

Skill development and employment in the health sector

Dr. S.K.Panda



“Shariramadyam Khalu Dharma Sadhanam” in Sanskrit means “Health comes first of all things in life”. Good health is an essential need of each and every human being irrespective of financial status (rich and poor), age (young and old), and sex (male and female). Accordingly, provision of health care constitutes an integral component of Human Resource Development. At present, health care facility is being rendered in the public sector through a network of Health Sub-Centre, Primary Health Centre (PHC), Community Health Centre (CHC), Sub-Divisional/ District / State level Hospitals set up and managed by government. Along with it, privately managed health institutions covering private clinics/hospitals, private doctors, government doctors doing private practice have also been rendering health service. There is considerable opportunity for skilling and employment in the health sector, which

will help in improving the quality and coverage in the unserved and underserved area.

However, there is a prevailing mindset in the society that doctors practicing allopathic stream with an MBBS or higher degree are the only health professional. Often, importance of medical officers practicing Ayurveda, Homoeopathy under the AYUSH system as well as the nurse and paramedics are not duly recognized. This needs to change this mindset for improving quality and coverage of health care. While doctors play an important role, rendering quality health service is a team work in which Nurses, Para-medical staff, Physiotherapists, General Duty Assistants (GDA) are equally important. From the employment point of view, there is acute shortage of Para-medical staff, Nurse, Operation Theatre (OT) Assistant, GDA, etc. both in the government and private sectors. As per the skill gap studies done by NSDC, about 4(four) lakh health professionals will be required in the State of Tripura during the period 2013-22. This figure includes the requirement of the GDA and other Para-Medical staff, which offers an excellent opportunity to the relatively less educated (class VIII pass) boys and girls in getting employment both within and outside the State.

Details of the skill development training in GDA have been laid down under the National Skill Qualification Framework (NSQF) [Code no. HSSQ 5101, Level 3]. This course is of 480 hours duration, which includes 360 hours in technical and 120 hours in soft skills and takes about two months (8 hours daily). IL&FS-skill, a private training provider, is imparting the short term training in GDA in its training centre at Gandhigram. The training is provided free of any charge and the cost is borne under central/ state schemes.

IL&FS setup the health skill development centre at Gandhigram in part of the newly constructed building of the Primary Health Centre (PHC) as per an agreement signed with the State Health & Family Welfare Department. The centre started functioning in September 2015. Two batches of training funded, under the Corporate Social Responsibility (CSR) initiative of the Power Grid Corporation of India Limited (PGCIL), have been conducted so far. The first batch started in February 2016 with 29 youths (one youth dropped out) and the second batch on 11th May 2016 with again 29

youths. The male-female representation was 50:50. The trainees were selected from the area of operation of PGCIL. The trainees made their own arrangements for stay. Two trainers, with B.Sc. (Nursing) qualification from the state, are imparting the training in the IL&FS training Centre. Narrating their feelings, the trainers indicated that B.Sc. (Nursing) degree improved their employability and getting employed in the private training institute. Without the B.Sc. (Nursing) degree, their employability would have been much lower, as general education (BA/B Sc degree) does not offer similar scope. On similar lines, youth, who will complete GDA training, will have a better chance of employment covering;

- (i) Private clinics/hospitals
- (ii) Doctors doing private practice
- (iii) Government posts (as and when advertised)
- (iv) Hospitals as bed attendants
- (v) Elderly people (geriatric health) care. Trained GDAs can provide special health care and other help (like buying plane / train tickets, paying bills on internet, etc.) to elderly people, particularly those who are well off and living away from their children(who are working outside the state and abroad).
- (vi) Housing Colony. One GDA can render health care and other services in a housing society (with 25 – 30 families) and earn a decent amount for his/her livelihood.
- (vii) ASHA and health worker in the village area (as and when required).

It needs to be appreciated that undergoing GDA training may not get government employment to all but it would enhance their chance of getting employment in private as well as government, to a level higher than those with general education.

Once more youth come forward for undergoing the GDA training; such training can be organized at Block/Subdivision level outside Agartala on the following lines.

- (i) The training may be provided as per the NSQF approved courses to all interested youth who possess requisite educational qualification (Class-VIII pass). Girls may undergo this training on similar line as in beautician trade.
- (ii) Training may be held with Primary Health Centre (PHC) as the nucleus for providing practical training along with 2-3 available rooms nearby for holding class/demonstration, etc. Accommodation available nearby the PHC like community hall, growth centre, vacant rooms in Block/other offices, may be considered for the purpose.
- (iii) Training may be held for self/wage employment keeping placement linked requirement as optional. This will make more training providers coming forward for giving training.
- (iv) The trainees may be paid a lump sum amount per day for food, etc. and asked to make their own arrangement for stay and attend the training in time.
- (v) The Sector Skill Council shall ensure that examination and certification are held in time after completion of the training.
- (vi) The training may be held with funding from the central/ State governments. A special project may also be launched for skill development.
- (vii) The trained persons may be encouraged to work in the private hospital, clinic, seek employment in the government (as and when any post is filled up) and also take up self-employment, like the ladies trained in beautician near their place of stay.

Unemployment is a major and complex problem. There is no single answer to this problem. One has to remain imaginative and innovative exploring all possibilities for tackling this. Following implementation of Sarva Shiksha Abhiyan, which envisages total enrolment, zero drop-out and education up to Class-VIII, almost all youth in the State have the minimum education required for GDA training. This will increase employability of youth, who do not pursue higher studies due to various reasons. Requirement of the market, quality of skilling and services provided positive mindset and attitude hold key to success. It is hoped that the unemployed youth would come forward and avail skill for living a dignified life in the society.