

# A SCHEME BEFORE ITS TIME: THE HINDU EDITORIAL ON DIGITAL HEALTH MISSION

Relevant for: Developmental Issues | Topic: Health & Sanitation and related issues

Prime Minister [Narendra Modi has announced the National Digital Health Mission](#), the most salient aspect of which is that all citizens will have the option of voluntarily opting for [a Health ID, a 14-digit health identification number](#) that will uniquely identify every citizen and will be a repository of their medical history. Illustratively, it will contain details of every test, every disease, the doctors visited, the medicines taken and the diagnosis. The portability this offers implies a person will, in theory, never have to haul around their reports. The doctor who is examining the patient can give more well-informed advice because it is possible that patients may not consider aspects of their medical history relevant to share with a doctor, or sometimes may forget about them, but which may be valuable for a better diagnosis. This id can be created by using a person's basic details and mobile number or Aadhaar number, and there will presumably be an app acting as a convenient interface.

As snazzy as all of this sounds, a digital health id right now is really a solution looking for a problem. There is no clear justification that the immobility of medical records is an insurmountable obstacle to the provision of affordable, high-quality health care in India. The challenge of health care in India, as decades of research and the experience with the [novel coronavirus pandemic](#) have shown, can be expressed quite simply. There are too few hospitals with trained staff to cater to all Indians. But expanding the health-care system will not be easy. India's federal structure, the size of its population — and a large rural one at that — the cost of researching, finding and buying appropriate drugs and treatment, competing systems of medicine and the very challenging nature of health itself, mean that the issues are manifold. The graver problem is that the technocratic sheen of a digital health id hides a mammoth store of personal data, which in the absence of a privacy law and little public awareness and control over their data, could be open to misuse. There is the danger that any large private insurance company could use sophisticated algorithms across the health and other databases to construct risk-profiles for people and make access to affordable insurance difficult. Also, data mining can prioritise certain rich demographics for their services and direct public and private resources to people who can afford a high premium for their services rather than to those who need them but cannot pay as much. For a digital health ecosystem to work, it is important that the fundamentals be fixed from the ground up.

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U.S. President Biden should not buckle to pressure from irate anti-vaccine campaigners

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