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# Evaluating the Role and Challenges of the Pradhan Mantri Jan Aushadhi Pariyojana in Enhancing Healthcare Access: A Social Scientific Study of Palamu and Gumla Districts in Jhaarkhand

### Dr. Amarnath Paswan\*

\*Assistant Professor cum Assistant Director, Centre for The Study of Social Exclusion and Inclusive Policy, Faculty of Social Sciences, Banaras Hindu University, Varanasi

## Abstract

India's healthcare system is dedicated to delivering quality medical services to its vast population of over 1.3 billion. It operates through a complex framework that integrates both government and private healthcare providers. This dual system is designed to address the medical needs of citizens, particularly in rural regions where access to quality care remains a challenge. To enhance healthcare accessibility, ensure affordability, and encourage the use of generic medicines, the 'Pradhan Mantri Bhartiya Jan Aushadhi Yojana' was introduced. As a result, Jan Aushadhi Kendras have been expanding rapidly across the country, yielding significant positive outcomes. However, despite these advancements, several challenges continue to hinder the scheme's success. These obstacles not only slow the expansion of essential healthcare services but also widen the gap in healthcare quality between urban and rural areas. Although efforts to achieve equitable health outcomes are intensifying, the financial burden of medical treatment persists as a pressing concern.

Keywords: PMBJP, Healthcare Services, Affordability, Chhattisgarh and Jharkhand.

### Introduction

The Pradhan Mantri Bhartiya Jan Aushadhi Pariyojana (PMBJP) was introduced in 2008 with the primary goal of providing high-quality generic medicines at affordable prices, thereby reducing the financial burden of medical treatment for the general public. Initially, the scheme progressed at a slow pace, but it witnessed rapid expansion after 2015. As per data from the PMBJP portal of the Government of India, the number of Jan Aushadhi Kendras increased significantly—reaching 1,080 outlets in 2016-17, 2,226 in 2017-18, 3,306 in 2018-19, and over 5,000 in 2020-21, eventually growing to 7,557 by the same period. To further enhance accessibility, the government has set an ambitious target of opening 25,000 Pradhan Mantri Bhartiya Janaushadhi Kendras (PMBJKs) across the country by March 31, 2026.

Recognizing the need for transformative healthcare interventions, the Government of India has implemented several initiatives aimed at ensuring equitable access to medical services. Among these, the PMBJP has emerged as a crucial step toward making healthcare more affordable, especially for marginalized communities. The scheme not only seeks to reduce the economic burden of healthcare but also promotes awareness about the efficacy and benefits of generic medicines. By establishing Jan Aushadhi Kendras nationwide, the initiative is ensuring the availability of essential medicines at lower prices, thus improving overall health outcomes. Additionally, this initiative encourages a shift toward informed healthcare choices, empowering citizens with better access to cost-effective treatment options.

Despite its positive impact, the Indian healthcare system continues to face major challenges that hinder the full realization of this initiative's objectives. Some of the key issues include inadequate healthcare infrastructure, lack of transparency, and non-compliance among pharmaceutical companies. The limited accessibility of Jan Aushadhi Kendras in certain areas and the absence of a robust monitoring system further weaken the scheme's effectiveness. A critical concern is the prevalence of substandard and counterfeit drugs, often due to unethical practices such as data manipulation, use of inferior raw materials, and neglect of quality assurance standards. These malpractices not only lead to treatment failures and drug resistance but also pose severe health risks to patients, ultimately eroding public trust in the system.

To fully harness the potential of the PMBJP, it is imperative to address these systemic shortcomings. Strengthening regulatory frameworks, ensuring stringent quality control, and improving transparency in pharmaceutical manufacturing are essential steps toward safeguarding public health. Additionally, enhancing awareness, increasing accountability, and expanding accessibility in rural and underserved regions will be key to making affordable healthcare a reality for all. By overcoming these obstacles, India can significantly strengthen its healthcare system and ensure that the benefits of this initiative reach every citizen in need.

Clearly, despite significant progress in recent years, the healthcare system still faces many challenges, including inadequate funding, shortages of healthcare workers, and inadequate infrastructure. It is important that India's healthcare system is given priority attention and both the government and private sectors focus on addressing these challenges, so that the citizens of India can have access to good healthcare. Studies conducted over the years not only highlight the challenges faced by the Pradhan Mantri Bhartiya Jan Aushadhi Project but also provide a path for possible solutions, some of the major ones are:

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Madri Chandak (2020) in his article 'Jan Aushadhi Facility: Emerging Challenges' explains that- Even though the government has worked hard to make the Pradhan Mantri Bhartiya Jan Aushadhi Pariyojana a success, it has not had the impact as much as they initially expected. There are some problems with this program. The biggest problem is that a lot of people don't even know about it. Even when they know, they are not sure whether the medicines and sanitary napkins are of good quality or not, so they prefer to use well-known brands instead. Another major problem is that sometimes people are not able to get the medicines they need because they are not available in sufficient quantities and all the medicines are not in stock at all times.

Prime Minister(2020)Press Information Bureau, Government of India, In the 'Jan Aushadhi Yojana provides the best and affordable medicines', it was made clear that for the success of the Jan Aushadhi Yojana implemented with the objective of providing affordable and good treatment to every citizen in the country, the Prime Minister made it clear in his statements that for better health success in the country, prevention of disease, With the availability of cheap and good treatment, modern hospitals and better doctors, it is also imperative to face the challenges in the way.

Ankki Sharma (2019), in his article 'The Inside Story of Jan Aushadhi Kendras' based on individual studies, based on the experiences of local residents towards the functioning of Jan Aushadhi Kendras opened under Jan Aushadhi Yojana in different areas of Ghaziabad and Noida, pointed out that the availability of medicines under the scheme, There are many problems related to price, quality, lack of tracking system and distribution. The PMBJP Kendra, of course, is an ambitious programme that provides generic medicines at affordable prices, but needs more effort to be successful.

Prasad, Purendra & Jesani, Amar (2018)In their book 'Equity and Access: Health Care Studies in India', the Healthcare Minister pointed out that the healthcare sector faces challenges ranging from the continued growth of the poor, the continuous decline in access to key healthcare services and the complex network of products that are responsible for this situation.

Vikram A Munshi, in his article Jan Aushadhi Program: Challenges vs Intent, while highlighting the major challenges associated with the Jan Aushadhi scheme, said that the number of people coming to Jan Aushadhi is very less. The biggest problem with the increasing demand for compliance and interaction with some of these stores is ensuring awareness of the mental quality of the targeted patient. Even poor patients will not want to take medicines that are not considered "standard quality." The exorbitantly low prices of generic drugs raise questions on the mindset of patients. Instead of immediately increasing the number of stores, it is important for the government to simplify all procurement and supply chains.

Mishra R. and Sathyaseelan B. In his article 'Generic Drug Distribution in India: Issues and Challenges', the study pointed out that there are still major challenges in the backward areas of the country in terms of lack of adequate number of stores, reliability of the quality of generic drug manufacturers and the complexities of accessing these benefits for the people.

According to a report released by the Kailash Satyarthi Children's Foundation, 2021, Availability and Accessiblity to Health Care Services in Jharkhand, many shocking facts have been revealed in the report on health services of Jharkhand. According to the report, there is a huge shortage of health services in Jharkhand, especially in rural areas.

It has been reported in the report that in 2019-2020 in Jharkhand, there are 3848 sub-centers, 291 community health centers in rural areas, 60 community health centers in urban areas and 171 primary health centers in rural and 6 in urban areas. But there is a huge shortage of doctors in these health centers, due to which patients are not able to get adequate treatment. The report also pointed out that the condition of health services in Koderma and Giridih districts is very poor. The number of health sub-centres in these districts is very less, and even those that are there do not have the necessary facilities. During COVID-19, the condition of health services in these districts had worsened.

It is clear from this report that the condition of health services in Jharkhand is very worrisome. The government needs to pay immediate attention to this issue so that better health services can be provided to the people.

### Importance of the Study

This research paper examines the role of the Pradhan Mantri Bhartiya Janaushadhi Pariyojana (PMBJP) within the broader framework of India's healthcare system. By providing a descriptive analysis of the scheme's impact, benefits, and associated challenges, the study offers valuable insights into the effectiveness of the initiative in making essential medicines more accessible and affordable.

The findings of this research hold significant policy implications, as they can serve as a reference for the Government of India and the Ministry of Health in future policy formulation. By identifying the strengths and limitations of the scheme, the study provides a comprehensive understanding of the areas that require intervention, ultimately contributing to the development of more efficient and inclusive healthcare policies.

### **Research Objectives**

The main objective of this research work is to evaluate the impact and effectiveness of the Pradhan Mantri Bhartiya Jan Aushadhi Project. Under this, mainly the following subjects are proposed to be studied and recommended:

- 1. How far has the government been able to achieve the objectives aimed at achieving through the Pradhan Mantri Bhartiya Jan Aushadhi Project?
- 2. How is this project going to impact on the ground?
- 3. What are the problems/obstacles (physical/attitude) it is facing?

4. What can be done to make this scheme even better?

## **Hypothesis**

- 1. Since its existence in the year 2015, more than 5000 functional Indian Jan Aushadhi Kendras have been opened under the Bharatiya Jan Aushadhi Project, as a result of which this scheme is playing an effective role in providing better health care to the people.
- 2. The number of medicines and surgical and other consumables available under the project has been steadily increasing, leading to a steady decline in the expenditure on health care services of the people. That is, this scheme is proving helpful in maintaining the health level of the people.
- 3. After the use of generic medicines available through Pradhan Mantri Jan Aushadhi Kendras, there has been an increase in both interest and awareness among people about the use of these medicines.

### Field of study

In this area, we have selected two districts Palamu and Gumla from Jharkhandto study the contribution of Pradhan Mantri Bhartiya Jan Aushadhi Pariyojana in improving healthcare services in India. A brief introduction of these two districts is as follows:

### 1. Palamu (Jharkhand)

Pradhan Mantri Bhartiya Janaushadhi Pariyojana has been launched at the level of Pradhan Mantri Bhartiya Janaushadhi Pariyojana with the objective of providing high quality and affordable generic medicines to the poor and underprivileged patients. Under the scheme, 8578 outlets have been opened by the Department of Medicine across the country in the name of Jan Aushadhi Kendra. A total of 75 outlets have been opened in 24 districts of Jharkhand so far. In such a situation, the benefits of Jan Aushadhi Kendra are reaching the needy patients in these districts in the right way. Palamu is a district of north-western Jharkhand, bordering the district Chatra in the east, Garhwa in the west, Latehar in the south and the state of Bihar in the north. It came into existence on 1 January 1928. Palamu District is situated between 23°50' to 24°8' north latitude and 83°55' to 84°30' east longitude. It covers an area of 5043.8 sq km. Spread over the area of. The administrative headquarters of Palamu is located at Daltonganj (Medininagar) on the banks of the Koil River. Daltonganj is known after Colonel Dalton, the commissioner of Chhotanagpur in 1861. About Jan Aushadhi Store or Generic Drug Store in Palamu, Jharkhand are popular as Jan Aushadhi Kendras and provide quality generic medicines at affordable prices.

### 1. Gumla (Jharkhand)

Blessed with the beauty of nature, the district of Gumla is covered with dense forests, hills and rivers. It is located in the southwestern part of the state of Jharkhand. On 18th May 1983 Gumla District was carved out of Ranchi District. Earlier it was a sub-division of the old Ranchi district. Gumla District lies between 22°35' to 23°33' north latitude and 84°40' to 85°1' east longitude. According to the 1991 census the district has a total population of 706489, out of which 355505 are male population and 350984 are female population. Gumla district is dominated by tribal people. The population of the tribal tribe is 11283, the population of the Scheduled Tribe is 24329, the population of the Scheduled Tribe is 476316, and the population of BC is 132610 and the second population is 61951. Clearly, the total population in the district is 68%, so it falls within the scheduled area.

In order to provide quality medicines at affordable rates to the people in Gumla district, Pradhan Mantri Bhartiya Jan Aushadhi Kendra (PMBJK) will be opened in 209 blocks of Jharkhand. The Bureau of Pharmaceuticals and Medical Devices, the implementing agency under the Pradhan Mantri Bhartiya Jan Aushadhi Yojana, has started its process. In order to give special incentives to women and SC / ST and to give the benefit of Pradhan Mantri Bhartiya Janaushadhi Kendra to the residents of small towns and block headquarters of the state, the government is going to open centers in all the blocks.

# Sampling Methodology

This research employs a purposive sampling method to select respondents who can provide relevant insights into the impact of the Pradhan Mantri Bhartiya Janaushadhi Pariyojana (PMBJP) in the Palamu and Gumla districts of Jharkhand. A total of 100 respondents were chosen, including patients, their families, and the general public, to gather comprehensive data on the accessibility and effectiveness of the scheme.

Additionally, 50 local doctors were included in the study to gain a professional perspective on the availability, prescription, and efficacy of generic medicines provided under the scheme. To further enhance the reach and reliability of data collection, the snowball sampling method was also employed, allowing researchers to identify and engage respondents who might have otherwise been difficult to access.

# Research Methodology

The research work is based on the mixed format research method, in which various information and data regarding the scheme has been collected by law from all the respondents in the selected districts. Under which both qualitative and quantitative research results have been obtained.

The research work has addressed various physical and attitude problems that hinder the success of the project through the study of various primary and secondary sources. In this way, in this research work, facts have been compiled using interview schedule, observation and group discussion methods under the descriptive-explanatory research format.

# Data Collection & Analysis

This research utilizes both primary and secondary data sources to ensure a comprehensive analysis of the Pradhan Mantri Bhartiya Janaushadhi Pariyojana (PMBJP) and its impact on healthcare accessibility.

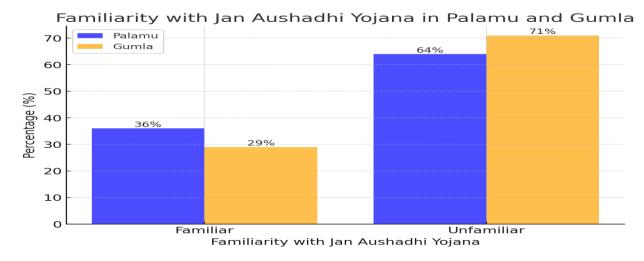
- Primary Data: The primary data has been collected through direct interactions with stakeholders, including:
- o Jan Aushadhi Kendras to assess the availability and affordability of medicines.
- o Doctors, patients, and the general public through structured questionnaires and interviews to understand their experiences and perceptions.
- o Government and Non-Government Organization officials to gather policy-related insights and operational challenges.
- Secondary Data: To complement the primary data, various credible sources have been analyzed, including:
- o Peer-reviewed publications and research studies related to healthcare affordability and accessibility.
- o Reports from international organizations such as WHO, USAID, and the World Bank, which provide global perspectives on pharmaceutical accessibility.
- o Government reports and policy documents from the Ministry of Health and other relevant ministries to understand the policy framework and implementation strategies.
- Medical journals and web-based resources to explore ongoing research and discussions around the use of generic medicines in India.

The following section provides an analytical description of the findings from the study area.

Table No. 1: Familiarity/Introduction to Jan Aushadhi Yojana/ Number of unfamiliar people

Sl. No.	Vote	Palamu (Frequency/Percent)	Gumla (Frequency/Percent)
1	Familiar	36	29
2	Unfamiliar	64	71
	Total	100	100

Source - Primary

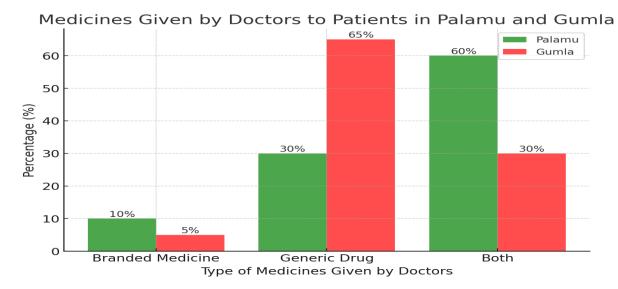


Analysis- It is clear from Table No. 1 that 36% of the people of Palamu district of Jharkhand are familiar with the Pradhan Mantri Jan Aushadhi Yojana while 64% of the people are unfamiliar. In Gumla district, 29% of the people are familiar with the Pradhan Mantri Jan Aushadhi Yojana while 71% are unfamiliar. Efforts need to be made.

Table No. 2 Medicines given by the doctor to the patients

Sl. No.	Medicines given by the doctor to the	Palamu	Gumla
	patients	(Frequency/Percentage)	(Frequency/Percentage)
1.	Branded medicine	10	5
2.	Generic Drug	30	65
3.	Both	60	30
	Total	100	100

Sources - Primary

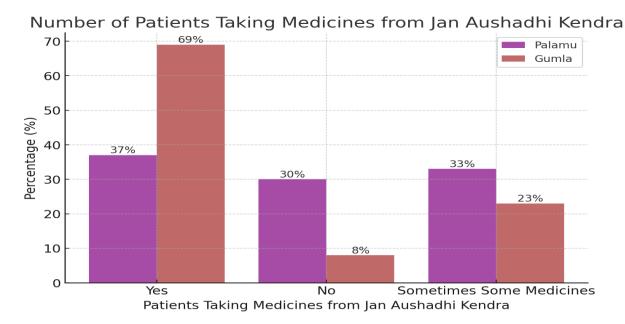


Analysis – It is clear from Table 2 that 10% of the respondents from Palamu say that doctors give them branded medicine, 30% of the respondents say that doctors give them generic medicine while 60% of the respondents say that doctors give them both branded and generic medicine. In Gumla district of Jharkhand, 5% of the respondents say that the doctor has given them branded medicine. Generic medicines are given while 30% of the respondents say that doctors give both types of medicines.

Table No. 3 Number of patients/others who took medicines from Jan Aushadhi Kendra

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Sl. No.	Medicines taken from Jan Aushadhi Kendra	Palamu	Gumla		
		(Frequency/Percentage)	(Frequency/Percentage)		
1.	Yes	37	69		
2.	No	30	08		
3.	Sometimes some medicines	33	23		
	Total	100	100		

Sources - Primary



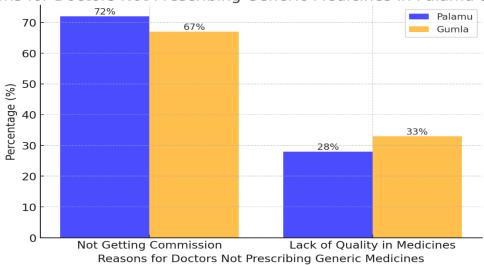
Analysis – It is clear from Table No. 3 that in Palamu district of Jharkhand, 37% of the respondents take generic medicine from Jan Aushadhi Kendra, 30% of the respondents do not take medicines from Jan Aushadhi Kendra while 33% of the respondents say that they occasionally take some medicines. On the other hand, 69% of the people of Gumla district of Jharkhand take medicines from Jan Aushadhi Kendra, 8% do not take medicines while 23% sometimes take some medicines from Jan Aushadhi Kendra.

Table No. 4 Reasons for doctor not prescribing generic medicine

Sl. No.	Reasons for doctor not prescribing generic medicine	Palamu (Frequency/Percentage)	Gumla (Frequency/Percentage)
1.	Not getting commission	72	67
2.	Lack of quality in medicines	28	33
	Total	100	100

Sources - Primary

Reasons for Doctors Not Prescribing Generic Medicines in Palamu and Gumla



Analysis – It is clear from Table 4 that 72% of the people of Palamu district of Jharkhand believe that doctors do not prescribe generic medicines due to non-payment of commission, while 28% of the people believe that doctors do not prescribe generic medicines due to lack of quality (such as late or non-efficacy) in the claims. Doctors do not prescribe generic medicines due to lack of commission, while 33% of people believe that generic medicines are not prescribed by the doctor due to lack of quality in medicine.

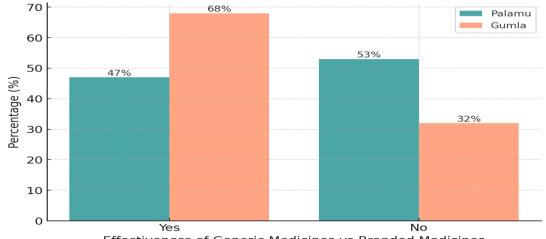
Table No. 5: Effectiveness of Generic Medicines and Branded Medicines

Are the medicines available at Jan Aushadhi Kendras as effective as branded medicines?

Sl. No.	Vote	Palamu (Frequency/Percentage)	Gumla(Frequency/Percent age)
1.	Yes	47	68
2.	No	53	32
	Total	100	100

Sources – Primary

Perceived Effectiveness of Generic Medicines in Palamu and Gumla



Effectiveness of Generic Medicines vs Branded Medicines

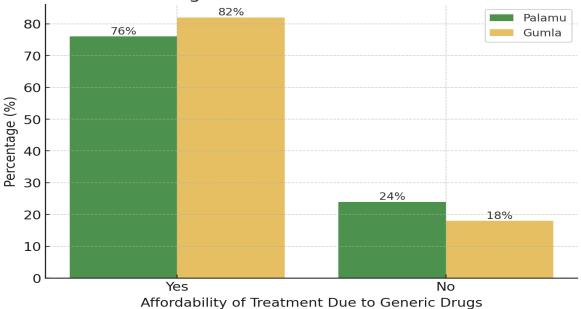
Analysis – It is clear from Table 5 that 47% of the people of Palamu district of Jharkhand believe that generic medicines work like branded medicines while 53% people believe that generic medicines are not as effective as branded medicines. It is clear that the lack of quality of generic claims is seen as a major challenge of the Pradhan Mantri Jan Aushadhi Yojana.

Table 6: Have generic drugs made treatment affordable for the poor?

Table 0. Trave generic drugs made treatment anormable for the poor.			
Sl. No.	Vote	Palamu	Gumla
		(Frequency/Percentage)	(Frequency/Percentage)
1.	Yes	76	82
2.	No	24	18
	Total	100	100

Sources - Primary



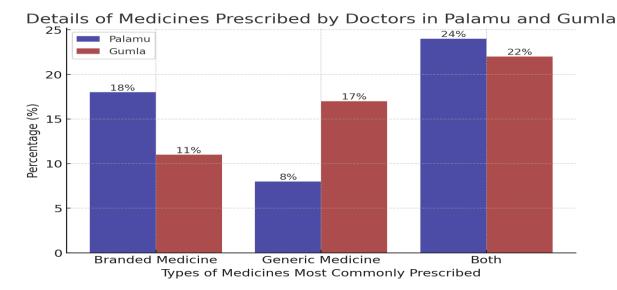


Analysis – It is clear from Table No. 6 that 76% of the people of Palamu district of Jharkhand have not accepted generic medicines while 24% of the people have negative expressions.

Table No. 7 Details of medicines to be prescribed by the doctor

Which medicines do you most commonly prescribe on the prescription?				
Sl. No.	Prescription medicine	Palamu	Gumla	
		(Frequency/Percentage	(Frequency/Percentage	
		)	)	
1.	Branded medicine	18	11	
2.	Generic medicine	08	17	
3.	Both	24	22	
	Total	50	50	

Source - Primary



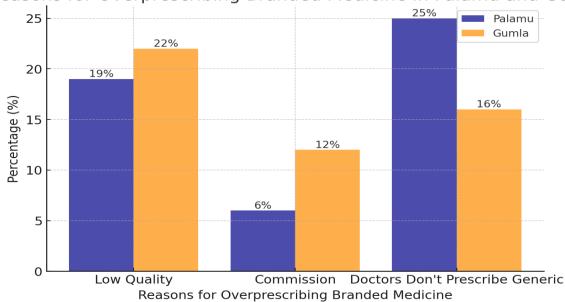
Analysis – It is clear from Table No. 7 that out of total 50 doctors as respondents in Palamu district of Jharkhand, 18% doctors prescribe branded medicine, 0.8% doctors prescribe generic medicine while 24% doctors prescribe both types of medicine. In Jharkhand's Gumla district, 11% of doctors prescribe branded medicines, 17% of doctors prescribe generic medicines and 22% of doctors prescribe both types of medicines.

Table No. 8 Reasons for overprescribing branded medicine

Table No. 8 Reasons for overprescribing branded medicine				
What do you think is the reason for prescribing more branded medicine than generic medicine?				
Sl. No.	Reason for overprescribing branded medicine	Palamu (Frequency/ Percentage)	Gumla (Frequency/ Percentage)	
1.	Low Quality	19	22	
2.	Commission	06	12	
3.	Doctors don't prescribe generic medicine	25	16	
	Total	50	50	

Source - Primary

Reasons for Overprescribing Branded Medicine in Palamu and Gumla



Analysis-It is clear from Table No. 8 that out of 50 doctors in Palamu district of Jharkhand, 19% doctors believe that doctors prescribe branded medicine due to lack of quality of generic medicine, 0.6% believe because of commission while 25% doctors say that they do not prescribe generic medicine at all. In Gumla district, 22% of doctors believe that doctors prescribe branded medicines due to lack of quality of generic medicines, 12% doctors believe that doctors prescribe branded medicines due to commission on branded medicines, while 16% doctors say that they do not prescribe generic medicines at all.

### **Conclusion:**

The study on the role and challenges of the Pradhan Mantri Bhartiya Jan Aushadhi Pariyojana (PMBJP) in improving healthcare services in Palamu and Gumla districts of Jharkhand highlights several key findings. Despite the scheme's extensive implementation, public awareness remains limited, with many people unaware of the availability and benefits of generic medicines under this initiative. While the use of generic medicines has shown positive results, their combination with branded medicines raises quality concerns, which can impact public trust. The study reveals that 53% of respondents in Palamu and 32% in Gumla believe that generic medicines are less effective than branded alternatives.

The PMBJP has played a significant role in making healthcare more affordable, particularly for economically disadvantaged individuals who struggle to afford expensive treatments. However, ensuring the quality and effectiveness of generic medicines is essential to enhance their credibility and acceptance. A major challenge identified in the study is the reluctance of local doctors to prescribe generic medicines, mainly due to concerns about their quality. Some doctors prescribe them only in combination with branded medicines, while others avoid recommending them altogether.

To improve healthcare services in Jharkhand, it is essential to strengthen training programs and establish local organizations that can support healthcare development at all levels. Addressing the gap in healthcare access between the rich and the poor is crucial to ensuring that every individual receives the medical care they need. To achieve this, a deeper understanding of the existing challenges is required, along with the creation of equitable and unbiased policies that benefit all sections of society. Additionally, building a skilled healthcare workforce and ensuring the widespread availability of high-quality generic medicines is imperative. While India is a major producer of generic drugs, many underprivileged individuals still face difficulties in accessing essential medicines. Therefore, it is vital to implement measures that ensure affordable, high-quality healthcare reaches even the most underserved communities.

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