We continue the series (see *Natl Med J India* 2006;19:234–5, 293, 334 and 2007;20:34, 100, 157, 203).

In Map 1, the size of each territory is shown proportional to its public health spending, adjusted for purchasing power parity in the year 2001. This includes all government spending on healthcare, plus money from grants, social insurance and non-governmental organizations. Public health spending reduces, or even eliminates, the direct cost of healthcare to an individual. The highest public healthcare spending per person is in the regions of Western Europe, North America and Japan. Luxembourg, Norway and Iceland are the territories with the highest per person spending, which was purchasing power parity US dollars (PPPUS$) 3304, 2525 and 2261, respectively. India spent PPPUS$ 24 per person per year, which formed nearly 0.9% of its annual gross domestic product.

In Map 2, the size of each territory is shown proportional to the number of hospital beds, which includes beds in public and private hospitals, specialized hospitals and rehabilitation centres. In 2002, there were 19.6 million hospital beds in the world, with the largest number being in China (3.2 million; 1 bed per 400 persons), Japan (2.0 million; 1 bed per 61 persons) and the Russian Federation (1.6 million; 1 bed per 93 persons). The largest number of beds per person is in Monaco (1 bed per 46 people living) and Switzerland (1 bed per 56 people living). The lowest hospital bed density was in Niger (1 bed per 10 000 people living). India had 826 000 beds with nearly 8 beds per 1000 population (1 bed per 1250 persons living). In India’s neighbourhood, Bhutan had nearly twice as many beds per capita and Sri Lanka had nearly four times as many beds per capita as India.

REFERENCES