PREFACE

Since Independence the social scientists in India have taken a great interest in working in different national health programmes as well as in major community health problems. They have tried to understand the nexus between health services and the community. But very often they could not grapple with the issues falling within interdisciplinary boundary i.e. Health & health service because of their unidisciplinary training.

It has been lately realised that concepts and methods required to study the complex issues in the field of community health by the social scientists are to be integrated and interdisciplinary. For instance even to study patients in a hospital who form only one component of highly complex social and technological system, social scientists are forced to study such diverse areas as cultural adjustment of different groups of patients within the hospital, their illness behaviour and sick role and perceptions and attitude of patients towards the different services that are offered to them. Similarly research on community involvement needs studies of cultural aspects of health, health services, health institution and health practices besides total life style of the community. Health
services - promotive, preventive curative and rehabilitative form one of the means of improving the health status of a society. Economic status, nutrition, water supply and other environmental conditions, education and social and political relations are some of the other factors which influence the health status of a community. The intrinsic dynamic of a society, which are so important in determining the status of the health and health services, have their roots in the ecological and historical background of the society. Human groups interact with their surroundings to develop their own ways of life—their culture includes mode of production and social relations. The consideration of social ecological setting is also so important in analysing the generation of health problems within a human group, social ecological conditions also mediate between the disease causative agents and the individuals and are often direct causative agents. Obviously, because of specific ecological and historical considerations, different modes of production and production relations, the human groups differ in their socio cultural status. Therefore an important social science consideration is that, the socio-cultural status of a community defines the limits of its health and health services development along with its health culture.

The life of the slum community resettled in
Jahangirpuri, Delhi stimulated me to undertake a study to find out how far the health services of Delhi which is highly professionalised, elite oriented, bureaucratic and technocentric has shaped the health culture of these people. In my M.Phil dissertation an attempt was also made to raise above issues in relation to the hospital as a social institution. The social scientists who studied the hospital have not provided sufficient data for understanding these issues. So, this study is an humble attempt in this direction.

This work would not have been possible without the ceaseless and unabated guidance of my supervisor Dr. S.K. Sahu. Incidentally, his guidance, ideas and for that matter his own Ph.D. thesis had been guiding source and principle for my thesis. His pains taking and meticulous between the lines readings are some of the helps besides the overall perusal of the thesis deserves very special mention. It is my sincere duty to mention that Prof. D. Banerji happened to be the pioneer of the very concept of "health culture" and which make the key component of the present thesis has given his most valuable and purposeful suggestion to carry out the work systematically.

I must also mention that Dr. (Mrs) P. Ramalingswami,
Dr. (Mrs.) I Quadeer have extended their valuable and constructive suggestion for my thesis. Besides the faculty members of CSMCH who has been kind enough to go through the thesis and express their useful suggestion.

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Every edifice of excellence has master craftsmen behind it, similarly for every thesis there works the tender but determined fingers of typist. And in my case it was no exception, so, I express my sincere and warm gratitude to Mrs. Kameswari Viswanatham who did word processed my thesis. And, finally, I express a lot of thanks and gratitude to my mother and father who constantly inspired me and kept my enthusiasm alive by various ways to complete this work. They have never hesitated to sacrifice anything at the hours of need but saw to it that the work gets done. And last but not the least my younger brother who deserves a special note of mention that even from abroad he has kept me inspiring that I have to finish this magnum opus.

Kalyan Kr. Ganguly.