PREFACE

A healthier 21st century has been the target of our country. The governments in their manifesto before the onset of new millennium have flaunted the slogan ‘Health for All by 2000 AD’. In reality it is still a myth. In Indian society, health care management is at the bottom of the welfare agenda. India lives in its almost 6.5 lakh villages. If basic health care does not reach the rural areas, no matter how much progress is achieved in the urban and semi-urban areas, overall growth as a nation will be retarded.

The healthcare in a country as a whole is facing many challenges. India desperately requires tremendous magnitude of India's healthcare needs and the immense investments required to improve the health status of people from all parts of India and across all strata of society. Improving access to basic healthcare services to the rural population is perhaps one of the most pressing needs from a straightforward human development perspective. This access would ensure a solid foundation for future economic growth. Healthcare indicators vary widely across states. But one trend that is totally consistent is that indicators are much worse in rural areas than in urban ones. The problem is, first and foremost, one of access. In addition, there is also an urgent need to raise the availability of qualified doctors, nurses and paramedical staff and to create an infrastructure and a system for them to work in rural areas. Further, general lack of awareness on healthcare issues and the low public consciousness of hygiene and sanitation norms will need to be addressed as a starting point and with it the lack of accessibility to healthcare services.

The present “Rural Healthcare Services” study is undertaken to explore current healthcare system and health facilities in the Anand and Kheda district of Gujarat, India. The research is designed to study the significant aspects of health care such as - availability, accessibility, and acceptance of the health care services. and the social marketing of different health programmes to create awareness, educate the rural community in increasing the utilization of the available facilities in the rural parts of Anand and Kheda districts of state of Gujarat with a special focus to Maternal and Child Health.

The entire thesis is divided into six chapters to cover all the dimensions of rural health care delivery system. Chapter 1 discusses the Concept of health, Role of health with respect to the economic development and human capital of the nation and Determinants of the health. Chapter
2 presents in detail the Rural Health Care System and reviews the situation of the health care in the country from pre independence era to the current date (1946 – 2010). Chapter 3 completely deals with the literature review with respect to different dimensions of the Health Care Services like availability, accessibility, acceptance through utilization, perception and satisfaction and health care services delivery. Chapter 4 deals with the Research Methodology. Chapter 5 discusses the analysis, findings from the primary survey and sixth chapter summarises the entire research work along with the possible areas for the further research.

Date:
Place: Vallbh Vidyanagar

(Sujatha K.)