CHAPTER 5

Strategic Marketing
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Increasing population, polluting environment, contaminated food and water, high rate of illiteracy, radiation caused by scientific inventions and innovations, use of plastic and glass materials are some of the new developments of course slowly but surely have been laying a strong foundation for the development of a number of diseases. In addition, the cultural-pollution, irresponsible sexual behaviour, drug addiction, increasing use of tobacco, craze for “Gutka” in the new generation are the additional developments very much instrumental in aggravating the magnitude of the problem. On the other hand, the negligent attitude of the government to the health sector, inadequate support of public at large, delay in the process of conceptualizing marketing in the healthcare services, increasing insensitivity among the masses to the healthcare services, degenerating work culture and falling rate of productivity of hospitals and healthcare organisations are fuelling the process of negative developments.

Private hospitals are growing because they assign due weightage to the concept of modern marketing but so far as government hospitals are concerned, we find the picture very gloomy. The demand side is increasing fast while the supply position is facing qualitative-cum-quantitative degeneration. These facts make it essential that the policy makers, boardrooms, medical scientists, doctors, managerial staff make sincere efforts to find out appropriate solutions so that the dealing healthcare systems are set right. It is against this background that we need an innovative marketing strategy.

During the yester decades, the contours of development have undergone radical changes in almost all the areas. The scientific advancements have led to a structural change in all the important areas of socio-economic transformation. If we look at the healthcare sector, the achievements appear very disappointing. India was one of the pioneers in the health service planning with focus on primary healthcare. In 1946, the Health Survey and Development Committee headed by Shri Joseph Bhore recommended establishment of a well-structured and comprehensive health service with a sound primary healthcare infrastructure. This report not only provided a historical background to the development of a public health system but also laid down the blueprint of subsequent health planning and development in independent India.

At the time of Independence, the national healthcare infrastructure was mainly urban based and clinically promoted. The hospitals and clinics provided curative care to patients who came to them. The reachout of
the rural healthcare services was very limited. Gradually, we started development plans and during the last Five Year Plans, a number of steps were taken to improve qualitative-cum-quantitative developments. Improvements in the coverage and quality of healthcare and implementation of disease control programmes resulted in steep decline in the Crude Death Rate(CDR) from 25.1 in 1951 to almost 9.0 and we expect even a further decline in the coming years. Life expectancy rose from 32 years in 1947 to almost 62 years now and the female life expectancy even higher than the male. Morbidity due to non-communicable diseases is showing a progressive increase because of increasing longevity and a change in the life style. Morbidity due to common communicable diseases and nutrition related diseases continue to be high. There is no doubt that India today has a vast network of governmental voluntary and private health infrastructure manned by a large number of medical and para-medical personnel.

Despite a number of positive developments in the healthcare sector, we find the masses not getting even the basic healthcare facilities then what to talk of the world class services. We find a persistent gap in manpower and infrastructural facilities, poor referral services, inadequacy of almost all categories of the hospital personnel, inadequacy of sophisticated bio-medical equipment, apparatus, instruments, machines and technicians and engineers, massive inter-state and inter-district differences in the levels of performance, lack of inter-sectoral co-ordination, increasing dual disease burden, communicable and non-communicable diseases are some of the constraints standing as a major barrier while developing the healthcare services.

Of course, the state governments have been investing huge funds for the government hospitals but the level of efficiency is coming down. Even if they have bio-medical equipment of world class, we find them of no use. On the one hand, the government hospitals complain about the inadequacy of personnel while, on the other, we find them practicing in the private clinics. Financial support by the government is steadily falling. The government hospitals do not have the freedom of generating revenue. Charities and donations are decreasing and ultimately we find them facing a financial crunch. The potentials of hospitals are decreasing whereas the requirements for healthcare services are increasing. The ultimate and the worst sufferers are the weaker sections of the society because the affluent sections get world class healthcare services provided by the private hospitals. It is in this context that we find strategic marketing impact-generating since innovative strategic decisions will lead to quantitative and qualitative developments.
Present century leads the next century. We have a long-run target of having a healthier 21st century and a short-run target of improving the quality of healthcare services. The hospitals today are responsible for protecting, and serving the human resources considered as precious endowment. The formation of human capital is sizeably influenced by the development of healthcare services. In the modern Indian Society, marketing of healthcare services is difficult because a majority of us feel that it is the sole responsibility of the government to promote the healthcare services. To improve the quality of diagnostic, curative and other services the hospitals need to implement a number of capital-intensive projects in addition to the developments of different types of infrastructural facilities. The heads of investment in a majority of the cases lead to qualitative improvements. At this juncture, we need to formulate a new strategy for the healthcare organisations.

These facts bear a staunch testimony to the proposition that despite innovative and strategic decisions, a marketer is expected to meet his/her professional requirements. The government exchequer finds it difficult to finance the students related to the education, training and research programmes. This draws our attention to some of the sensitive areas mentioned below. We, have to reiterate that the hospitals or the healthcare organisations bear the managerial responsibility of bringing the detailed healthcare system back on the track. Since we talk about formulating strategic marketing, it is essential that we assign due weightage to the following suggestions so that the innovative strategic decisions prove successful.

❖ **Orchestrating the marketing resources:**

Tailoring of marketing resources according to an action plan so that the marketing mixes proves to be proactive is known as strategic marketing. The fact makes it clear that the demand position is to increase and in addition, the disease profile would also be more hazardous. The hospital planners, architects, consultants, top-level doctors, top-level managers and the boardrooms or the government policy makers would have to change their attitudes and the line of action. They need to identify the thrust areas and to develop the marketing inputs accordingly so that the government and private hospitals are in a position to cater to the increasing health requirements. This requires qualitative as well as quantitative improvements in the healthcare sector of the country.
The existing hospitals need qualitative transformation:
By and large almost all the government hospitals are in a state of disarray. They have been facing the problem of financial crunch and so, financially bankrupt. And, naturally we find bankruptcy at almost all the levels. The traditional technologies and traditional management orientation has been found in the reverse gear. It is essential that a special task force is set-up to overhaul them. The management orientation, up-gradation of bio-medical equipment, apparatus, instruments, availability of uninterrupted supporting infrastructural facilities, screening of the performance of almost all categories of medical and para-medical personnel, performance-based incentive plans need due attention of the policy makers. While dealing with the problems of government hospitals,
it is natural that the Health Department of the state government takes keen interest in the process overhauling. So far as the financial requirements are concerned, the Union Government would be required to offer a matching grant. In addition, the global bodies taking part in the process would also be approached. An important task before the government would be to make possible one hundred per cent fair use of the financial resources.

**Private hospitals to be promoted:**

In this context, it is also essential that we promote the private hospitals. This means that formulation of policy decisions should be given due weightage in this context. Since we make a strong advocacy in favour of the bearing of social costs even by the private hospitals, it is necessary that they are offered special incentives for the development of such hospitals. It is necessary that we promote the corporate sector for the opening of new hospitals in the vulnerable areas of the country. Here, we need to stress a sense of co-ordination and cooperation between the government and private hospitals, specially to face the challenges caused by natural calamities or epidemics, immunisation and vaccination programmes. We agree with this view that in terms of infrastructural facilities and quality of apparatus and equipment, we find private hospitals in general having an edge over the government hospitals and this is mainly on account of their management orientation which they practice on a priority basis. Of course in terms of the quality of medical and para-medical personnel, we find government hospitals having an upper hand but this is not due to special incentives they get there but because of the well established image of a few of the government hospitals and institutes. The government policy makers are required to study the problems of private hospitals and help them to solve the same. When they need to import bio-medical equipment of world class which are not available in the domestic markets, and when they need multi-faceted facilities, the government should come forward to help them. When they need financial support, the public sector commercial banks and other financial institutions should offer credit facilities on the reasonable terms and conditions. The supply of infrastructural facilities like power, water, communications should be ensured. The law and order problems and the safety and security measures need due support of the government. The concept of small private clinics is to be given a shape so that they do not face a problem. It is to be ensured that whatever fee they charge is fair according to the quality of the services they offer. At the initial stage, they need concessional services of infrastructural industries. Thus we need to promote the private hospitals so that they
develop and prosper and increase their potentials of bearing the social costs. In Andhra Pradesh, Maharashtra, Gujarat and Kerala; the Private hospitals have been flourishing. It is a lesson for other states because the Government hospitals are not able to cater to the increasing healthcare requirements.

**Government and private hospitals need to promote social advertising:** Since we talk about management of hospitals on the basis of the defined principles of social marketing, it is necessary that public as well as private hospitals both of them take keen interest in social advertising. By social advertising, our focus is on promoting social interests, viz., advertisements related to family welfare, child care immunization, noise pollution, water contamination, irresponsible sexual behaviour, food habits, drug addition, liquor consumption, use of tobacco or so. The messages related to the aforesaid problems would prevent health problems. Since different categories of patients and attendants are coming to the hospitals in large numbers from different parts of the country or even from abroad, the advertisements slogans and messages should be made creative and effective.

Whatever you expect from others, you should also need to fulfill the expectations of others. You expect that corporate citizen should promote the healthcare sector by extending to you the financial support and similarly, the society also expects that you promote and subserve their interests by inculcating mass awareness. The slogans related to social advertising would be efficacious in fulfilling or meeting the expectations of the public at large. Besides, the society would be benefited considerably because a number of social problems would successfully be solved if the messages of social advertising become effective in sensitizing and motivating the society.

**Injecting needs for techniculture:** Except a very few, we find almost all the hospitals, private or government, creating healthcare services with the help of traditional technologies. The latest developments in the medical sciences have been successful in innovating bio-medical equipment, apparatus, instruments, and, in addition, the information technology has been adding, new dimension by innovating the diagnostic and treatment process. The patients are benefited because of authentic and quick diagnosis and the doctors are benefited by minimizing the time gap between initiating investigations and coming to a final conclusion. It is against this background that we should try to promote techniculture which focuses our attention on aggravating the temptation for the new
generation of medical technologies. Not only the government hospitals but even the private hospitals should promote the same to meet the increasing levels of expectations of users. Since we advocate strongly in favour of quality in totality; it is the prime responsibility of a few of the leading hospitals of the country like Escorts Heart Institute, Delhi. AIIMS, Delhi, Institute of Reproductive Medicine, Calcutta. Tata Memorial Mumbai. NIMHANS, Bangalore and Shankar Nethralaya, Chennai to educate and persuade new as well as the old hospitals to promote technologies.

Creativity in health care communication: A large number of diseases has been spreading like a wild fire in the present society, are self-generated. Since we find a majority of the population illiterate and unaware of wrong food habits, consumption of contaminated water, generation of noise and atmospheric pollution, drug addiction, family planning, early and late marriages, consumption of liquor, use of tobacco, irresponsible sexual behaviour invite a number of health problems. Hence, we talk about healthcare awareness. Even today, a majority of the hospitals have not given due weightage to the preventive services. It is the responsibility of all categories of hospitals to accept this vital social responsibility of creating mass awareness so that the health problems are considerably minimized. Since you as an expert knows well about the instrumentality of creative messages and slogans in creating mass awareness, the slogans related to social advertising should be made creative. Of course media have remained instrumental in the process but the messages and campaigns promoted by the doctors and hospital managers will have a greater impact.

Vaccination culture to be promoted: In view of the emerging health problems, it is also significant that hospitals in general promote vaccination culture. Vaccines are the most cost-effective agents for controlling communicable diseases. Here, a revolution is needed on the vaccinology front. The immunization programme will benefit the society in many ways. A reduction in the infant mortality rate is the result of child immunization. The Universal immunization Programme (UIP) is aimed at a healthier 21st Century. This can certainly be achieved if the government and the core and para-medical personnel are actively involved in the immunization programme. An aggressive marketing strategy is needed to make the immunization programme a grand success. We are witnessing the positive results of Pulse Polio Programme and expect that in the near future, we also promote the Vaccination Programme for Hepatitis B. Tuberculosis is a major killer disease and in India about half a million people are dying of this
disease every year. Of course, we have vaccine like BCG in the immunization programme but it is not so effective against Pulmonary Tuberculosis. It is essential that we develop more effective medicines against Tuberculosis. Yes DOTS is a solution but this has to promoted aggressively to the rural masses. Cholera is still around and often appears as an epidemic. The old cholera vaccine is no longer used. Typhoid is another problem that needs an antigen to counter this problem. Since we are studying the managerial problem, we should focus on the managerial lapses that we find in the process. Of course we are making efforts to promote immunization programme but the vulnerable segments of the society specially the rural population have not been given due weightage. Thus, it is our prime responsibility to constitute a special task force for the benefit of the rural segment.

❖ **Yoga and pranayam needs to be promoted** : Of late even the medically developed countries of the West have realized the significance of "Yoga" and "Pranayam" in counteracting a number of health problems. The revived interest in Yoga is a welcome all over the world. We find Yoga a beneficial and elegant way of regulating and exercising the mind, the brain, the respiration and other vital functions. Proper Yoga can give us a feeling of well-being in the system which no drug can provide. So, we strongly advocate in favour of Yoga. The hospitals of all categories can successfully create awareness and interest in yoga among the masses which would benefit the society in different ways. To be more specific the poor rural society right now face a number of difficult health problems and they can substantially benefit if they realise and practice yoga as part of their health management programme.

❖ **Herb products to be promoted** : In view of the increasing health problem, it is natural that we promote use of herbal products and create mass awareness regarding their efficacy in the treatment of a number of ailments and promote the cultivation of plants having medicinal value. In the Indian society where the masses find it difficult to buy the expensive medicines, it is essential that the hospitals and healthcare organisations should shoulder responsibility of promoting herb-based medicines and cosmetics. Hence it is right to claim that to cater to the increasing healthcare or medicare requirements of the society, the healthcare organisations must activate qualitative-cum-quantitative measures. A gap between the demand and supply is to be bridged on a priority basis and this requires public participation.
❖ **An Overriding priority to the quality system**: While discussing about the quality in totality for marketing the healthcare services nationally and internationally, we should focus on developing quality system essential in meeting the quality objectives. It also helps in satisfying the internal managerial needs of the hospitals and healthcare organisations. It is found broader than the requirements of a particular patient who for satisfaction only evaluates the relevant part of the system, such as the curative services made available to him/her. We find quality in totality a salient feature of an entity that depends on its ability to satisfy stated and implied needs. So it is essential that the hospitals or healthcare organisations know about the quality as formally expressed by the policy makers or the boardrooms.

For maintaining quality, we find quality management essential in which all the activities of the overall management functions concentrate on quality policy. We find operational techniques and factors influencing or degenerating quality and therefore should get due weightage. These things help in shaping quality assurance which proves to be an important constituent to evaluate the performance because a gap between the quality - promised and quality-offered will dissatisfy the patients and attendants. Thus, it is significant that a healthcare manager for marketing the services in the future realizes the right meaning of quality because any mistake committed in the process would lead to the marketing disaster. All the activities influencing quality are to be managed properly.

❖ **Behavioural Management to be improved**: In addition to the world class healthcare services, it is also essential that the hospital personnel improve their behavioural profile to minimize the gap between the services-promised and services-offered and also promotes, decency in processing. The hospital-personnel in general need to show sympathy to the patients and attendants and in addition also to show empathy. This makes it essential that the behavioural profile of hospital personnel gets due weightage which needs restructuring of training and development programmes. With the increasing level of expectations of users, the hospital personnel need to improve their behavioural profile.
❖ **Uniform culture to be promoted**: To give a fresh look to the personality of hospital personnel, it is necessary that the hospital manager thinks of promoting the uniform culture. It should be made compulsory that all the personnel wear the uniform supplied to them by the institutions. It should be ensured that the dresses are neat and clean and infection-free. The linen supplied by the hospitals should be washed, dried and pressed properly to counter the problem of infection. Sometimes we find senior doctors not wearing and in this case also the dresses they wear should be neat and clean and well pressed. Your look generates positive or negative image of hospitals and it is essential that you are very careful to the uniform or dress culture to promote physical attractions.

❖ **Social costs to be made optimal**: To improve the finances of hospitals, it is necessary that we make the social costs proportionate to the potentials of hospitals. The social costs are the losses on account of concessional or subsidised or free services available to the poor segments of the society. Government hospitals are generally facing problems of paucity of funds which make them financially insolvent. Of course, the poor sections need due care but it is not meant that in all the cases and for all the purposes, we promote free or subsidised services. A basic change in the pricing policy is imperative. The private hospitals also need to promote the concessional or subsidised services because they have to contribute to the process of subserving the social or public interests optimally.

❖ **Concept of rural urbanisation to be promoted**: Strategic marketing makes it essential that for the development of new hospitals both in the private and public sectors, the concept of rural urbanisation is to be promoted. This means opening and developing new hospitals in the rural areas or in the suburbs so that even the rural segment is benefited by the new developments in the field of medical sciences. If we develop big, specialised hospitals close to the villages or suburbs, the development of backward regions would be possible since a number of patients and attendants coming to the hospitals for treatment will include all the segments of the population. The multiplier effects would be found effective and a number of development centres would start functioning. But in this context, it is important that we locate hospitals at places easily accessible round the year.
These strategic decisions would bring multi-dimensional improvements in the workings of hospitals or healthcare organisations. The patients would get quality healthcare services, the hospital personnel would be motivated and the hospitals would thrive leading to the developments in the medical sciences.

♦ Changing role of Marketing Professionals:

The marketing professionals also bear the responsibility of satisfying the users of hospitals and healthcare organisations. Professional excellence bears the efficacy of bringing the derailed healthcare system on the rail. We can't negate that despite intense pressure on the state exchequer, the masses have failed to avail even of the minimum healthcare and medicare services for their survival. It is, of course, a sore spot on the social systems where the government has the responsibility of making available to each one of us at least the basic healthcare devices. The government hospitals and healthcare centres, in a majority of cases, are in a poor shape. They face the problem of paucity of fund in addition to the professional deficiency. The infrastructural constraints, mismanagement of even expensive bio-medical equipments, inadequacy of dedicated and committed medical and paramedical personnel, increasing insensitivity among masses are some of the critical problems which requires due attention of the government policy makers and hospital professionals.

Managing a non-profit organisation is, no doubt, a difficult task. It requires world class professional excellence. The mission is to make the society fully aware of the medicare and healthcare problems so that they maintain a sound health. In this age of information and communication technology, the professionals can do it. In this context, they bear twin responsibilities; first, offering quality medicare and healthcare services, and secondly sensitising the masses to health problems. The hospitals and healthcare centres have to accept both the responsibilities with the support and co-operation of marketing professionals.

Paving the way for the generation of finance from the internal sources, mobilising donors, developing medical and paramedical personnel, minimising the problem of infrastructural constraint, promoting a rational fee structure based on the paying capacity of the masses, soliciting the co-operation of affluent sections of the society and national and global bodies for financial and other
support, developing research activities, orchestrating formal and informal education, making healthcare information system technology-driven, segmenting and understanding the needs and requirements of patients and attendants, showing a personal and human touch in the process of offering the services, promoting value system by strengthening the process of value-engineering are some of the prescriptions to be effective to bring the derailed healthcare system on the track. 

The professionals based on world-class expertise may help medical and para-medical personnel in different ways.

A majority of the government hospitals and healthcare centres present a deserted look but the private clinics are found overcrowded. Increasing the influx of users is an important functional responsibility before the marketing professionals which will not be possible unless they get due co-operation of medical and paramedical personnel. Making possible the cost economy and improving the quality of services are the two opposite considerations which require world-class professional excellence.

Regulating the unproductive expenses and soliciting the co-operation of medicare and healthcare personnel need due attention of the professionals. The aim is to increase the number of satisfied group of users which will not be possible unless the users get time-honoured and cost-effective services.

In addition to the supporting infrastructural facilities, the marketing professionals will also have to motivate the people serving hospitals and health centres. It is essential that professionals pave the way for the mobilisation of internal resources. The doctors and paramedical personnel in addition to expertise they have in the field of medical sciences also need to enrich their behavioural profile. They are expected to be aware of sympathy and empathy. The motive is to minimise the recovery period and for that the ailing patients need something more than just medicare. If the doctors do not realise the instrumentality of human-touch and personal-touch in service, the task of professionals will be made much more complicated. It is really amazing that the same doctor using soft and sweet words in his/her private clinic, acts rough and becomes aggressive when he/she works in the government hospital. An attitudinal change is significant and that is a matter of self-realisation, temptation to value system and professional commitments.
The most important task before the marketing professionals is to understand the changing needs of the patients, because, failing this, the task of orchestrating the marketing resources will be difficult. The healthcare information system requires due attention so that they become aware of the emerging problems. They need to bridge the gap between the services-promised and the services offered. For this, they need to identify the personnel/people instrumental in delaying the process or distorting the quality. The public expect at least the minimum medicare and healthcare devices and therefore, if the hospitals and healthcare centres work with a sense of dedication and commitment, the existing gap will conveniently be bridged.

Mobilising the donors is an important functional responsibility before the marketing professionals and in this process they need the support of the information system. Both from the individual and corporate segments, they have to influence and motivate the donors and potential donors for charities. Besides, they also need to identify the national and global welfare organisations for financial or infrastructural support. A rational fee structure is to be promoted in which the affluent segment should compensate the losses on account of the offerings of subsidised or cost-free medicare services made available to the poorest of the poor or the weaker sections. It is to be ensured that grants received from the government are used for productive purposes. The wastage of materials either in the process of offering or storing are to be regulated. The cases of theft and mandays lost are also to be minimised.

In addition, the marketing professionals also need to sensitise the public to the health problems. They need to develop an awareness of nutritional food, potable water, sanitation services, waste management, immunisation and vaccination culture and innovative healthcare communication system. On the one hand, the doctors need to sensitisise the public and, on the other, the marketing professionals should also shoulder the responsibility of developing general awareness. Creativity becomes essential in the entire process of sensitisation and the professionals by resorting to effective advertisement and publicity measures can make it possible. The slogans, posters, messages related to medicare and healthcare services will make the process of developing general awareness quite effective. In this age of technology, they are also supposed to use innovative devices for promotion. The communicative ability of professionals will activate the pace of sensitisation.
The people serving an organisation contribute significantly to the entire process of development. The medical and paramedical personnel and professionals need to be professionally-sound, value-based and personally committed. It is not only necessary that doctors know about the treatment method, it is equally important that they also know about human values. They need to work with an avowed mission of serving the patients by being punctual, sincere, value-based and personally committed.

The rural areas of the country present a very gloomy picture and therefore we not only need to post doctors and para-medical personnel in the villages but also to ensure that they actually stay there. A number of problems can be solved when they are on spot. The health problem of women and Children need an intensive care, particularly in the rural segment. The supply of safe drinking water is to be properly channelised and the administration has to do it on priority basis. The vaccination culture is to be promoted and for this purpose, the health care communication system is to be made much more creative. The cases of epidemics and natural calamities need to attract the special attention of the professionals.

The behavioural profile of medical and paramedical personnel has to be improved and for the same the professionals need to be aware of the changing levels of expectations of the users. Since we work with the mission of serving the society, it is essential that our efforts are productive. The rural health centres need a direct link with the hospitals located in the towns and cities. This focuses our attention on the promotion of referral hospitals. The corporate sector and social welfare organisations also bear the responsibility of improving the quality of services by developing the potentials of hospitals and healthcare centres. They can do it by offering donations and charities but the professionals need to make it sure that current misuse of funds is checked.

The above facts make it clear that in the face of emerging challenges and evolving developments in the field of medical sciences, the public has developed their expectations and the professionals would not get a positive response unless they act as a marketer. The moment professionals, medical and paramedical personnel start working with a team spirit, the team culture is possible, leading to an improvement in the work culture.
The level of efficiency would thus be increased and the medicare and healthcare centres would be in a position to serve and subserve social interests. The team and work culture will lead to quality culture promoting quality philosophy needed by all the healthcare centres working in the public and private sectors. The Indian healthcare industry thus will get right directions for development and prosperity.

The charitable trusts gravitate our due attention because we find a number of individuals and corporations willing to make donations provided the marketing professionals inform, sense, sensitise and persuade them to the emerging social problems. The prime thing is persuasion and the professionals with world class excellence can help in this direction. We don't find anything wrong in soliciting the co-operation of the society for whom the services are meant. If the donors and potential donors are satisfied with the performance of hospitals and healthcare centres, a majority of us will start evincing keen interests in the process. The pressure on state exchequer will considerably be minimised, if we identify the sensitive segments and promote healthcare facilities preferably in the villages where the masses even now are deprived of the benefits in the field of medical sciences. Besides, the corporate sector has to come forward to promote big hospitals nearer to rural areas so that these areas get and opportunity to develop the base of the rural economy.

Potentially sound organisations would be financially sound to bear the social costs. If at the initial state of development, we concentrate on making them potentially rich, at the subsequent stages they will bear the social burdens even without inviting financial crunch. The modern hospitals depend on expensive inputs, so we have to try our best to improve their financial health. If make them financially viable, the quality of services will improve and both the rural and urban segments will extend to them the best possible co-operation. The government hospitals also need a structural change. The government policy makers have to devise ways for the development of hospitals and health centres of late found in a sorry state of affairs. It is high time that we think over the problem on a priority basis.

In the context of medicare and healthcare services, the most important thing is competence of doctors. If the medical and paramedical personnel are of world class, many problems will be solved automatically. In the process of quality addition, we find instrumentality of a number of factors such as adequacy of infrastructural facilities, cleanliness and management of waste, attention to patients and attendants, behavioural profile of medical and paramedical personnel, aesthetic sense and so on. To promote quality
in totality, it is necessary that hospitals and healthcare centres do their best to promote quality for that synchronization of all the constituents to be effective in improving quality. Total Quality Management concept is also to be conceptualised by the medicare and healthcare organisations.

The performance of the leading hospitals of the country, are based on some of the parameters. Escorts Heart Institute, New Delhi(Cardiology), AIIMS, New Delhi(Gastroenterology), Institute of Reproductive Medicine, Calcutta(Infertility), Tata Memorial, Mumbai (Cancer), NIMHANS Bangalore(Mental-Health) and Sankara Nethralaya, Chennai (Eye Disorders) all of them are known for the world-class services, they offer and we find them star performers. It is high time that these internationally acclaimed hospitals make sincere efforts to increase the number of world-class hospitals. In addition, it is also necessary that institutions promoting education and training facilities in the field of medical sciences learn about the Total Quality Concept and develop medical personnel accordingly. A few selected names are AIIMS, New Delhi, Kasturba Medical College, Manipal, Maulana Azad Medical College, Delhi, Osmania Medical College, Hyderabad, Madras Medical College, Chennai, AFMC Pune and the Christian Medical College, Vellur may help them while developing quality culture. It is essential that from the very Commencement of education and training processes, the students come to know about the changing perception of quality in the field of medical sciences.

These facts make it abundantly clear that a majority of the hospitals in India are in poor condition and to improve their quality all the elements of Total Quality need due care. In addition to the medicare services, the healthcare services also need due attention as a number of problems of medicare will automatically be solved, if the healthcare measures promote creative healthcare communications. The healthcare centres in general, and the rural healthcare centres in particular need priority attention because in the rural areas the people are totally unaware of the health problems though on account of this gap, they are prone to a number of diseases. They don’t know the sensitivity of sanitation facilities, immunization and vaccination, nutritional awareness, civic and aesthetic sense, potable water, child marriage and maternity problems in improving the quality of health and even the small problems turn into major ones. This necessitates creative promotional measures for which sophisticated media and the world-class marketing professionals are needed. The doctors also need to evince interests in promoting healthcare communication to minimise the pressure on hospitals. In this context, we find Health Information System to be very much instrumental in sensitising the masses. Since we have Satellite facilities, the communication and
information technology can be made much more effective. The print, broadcast and telecast media need due attention on promotion of healthcare measures.

We have set a target of "Health for All by 2006" but the target will remain only on paper unless the Services get a multi-dimensional support. On account of demographic pressure, the demand-side becomes non-optimal. Hence we also need to activate the process of quantitative transformation. India continues to lag behind in healthcare services for more than half a century even after independence. The population-to-bed ratio in India is one bed per 1000 whereas the World Health Organisation (WHO) norm is one bed per 300. Since the family welfare measures are not proactive to strike a balance in demography, we have no option but to improve the supply-position.