



ORIGINAL RESEARCH PAPER

Commerce

ROLE OF PRIMARY HEALTHCARE CENTERS IN RURAL HEALTH SERVICES OF THE BISHNUPUR DISTRICT, MANIPUR

KEY WORDS: Primary healthcare services, Rural health

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ABSTRACT

The geographical area and the total population of Manipur shows that the majority are rural areas with higher rural population. People residing in rural areas are more prone to different kind of illness and diseases as compared to urban residents. Therefore, providence of healthcare services are vital to rural peoples. The state Governments, Health Department or the concerned authorities need to survey and takes up certain steps for the easier availability of the healthcare services and also the quality of facilities and services provided in the rural areas.

1. INTRODUCTION

Manipur is one of the North- Eastern states of India with a population of 2,855,794 as per census 2011. The total area of Manipur is 22,327sq.km including 22,147.50sq.km. rural areas and 179.50sq.km urban areas. This indicates that the majority of the areas of Manipur and the total population is rural.

Bishnupur is one of the districts of Manipur locating in the central valley of Manipur. The National highway no. 150 runs through the district from north to south. As per census 2011, the district has total population of 237,399, residing 46,580 houses. The district has total area of 496sq.km, 37.02sq.km is urban and 458.98sq.km is rural.

Research shows that the healthcare needs of individuals living in rural areas are different from those in urban areas, and rural areas often suffer from lack of access to healthcare. People living in rural areas also tend to have poorer economic conditions, less education, higher rate of tobacco and alcohol use, and higher mortalities rate when compared to their urban counterparts. Many countries have made it priority to increase funding for research on rural health.

2. NEED FOR THE STUDY

The state has a majority of people living in rural areas having higher rural population. People in rural areas often faced various health issues than people in urban areas. This is due to certain reasons. Limited access to health promotion and disease prevention programs and health services is one of the most important reasons.

There is a need to find out the problems related with the rural health and health services provided. The study has been done to understand the difficulties of the rural people while accessing the health services and also to point out the shortages in the health centers of rural areas.

3. OBJECTIVES OF THE STUDY

The special objectives of the study are:

- a) To understand the various health related problems faced in rural areas.
- b) To provide equity and efficiency of health services participation in rural areas.
- c) To make the easier accessibility of healthcare services to every rural individuals.
- d) To study the major necessity and shortages in the Primary Health Centers.

4. RESEARCH METHODOLOGY

The methodology used in this study is a qualitative research method. It has been done on a very systematic way. The data

collections are done through primary survey and interview followed by questionnaires.

Sample size:

The study is conducted in the regions of Bishnupur district where Primary Healthcare Centers are available. In order to learn the details about the opinion of the people about their health centers, some of the medical officers, staff nurses and villagers are interviewed. Later on questionnaires were given to fill up their views regarding the health centers and its services.

Data Analysis and Interpretation:

The study help in analyzing the collected data and interpret them in easier and systematic way.

- 1. Table showing the number of persons covered under the services of particular facilities (SC, PHC & CHC).

Center	Population Norms	
	Plain Area	Hilly/Tribal Area
Sub Center	5000	3000
Primary Health Center	30000	20000
Community Health Center	120000	80000

The population norms given for Sub centers are 5000 in plain areas and 3000 in hilly/tribal areas. For Primary Health Centers the population must be 30000 in plain areas and 20000 in hilly/tribal areas and for the Community Health Centers, 120000 in plain areas and 80000 in hilly/tribal areas.

- 2. Chart showing the number of health centers functional in India (as on 31st March 2021).

Chart



SCs – Sub Centers (157819)
 PHCs – Primary Health Centers (30579)
 CHCs – Community Health Centers (5951)
 SDH – Sub District Hospitals (1224)
 DH – District Hospitals (764)

The pie chart indicates the number of health centers functioning in India. The Sub Centers constitute the highest total number of 157819 and the District Hospitals lowest comprising total number of 764.

3. Table showing the number of Medical officers and staffs in the PHCs of Bishnupur District.

Sl. No.	Name of the PHCs	Medical officers	Staff Nurses	Other staffs	Total
1.	PHC Kumbi	2	3	7	12
2.	PHC Kwakta	6	3	6	15
3.	PHC Leimapokpam	5	4	20	29
4.	PHC Ningthoukhong	8	3	23	34
5.	PHC Oinam	6	8	15	29
6.	PHC Thanga	4	4	11	19
7.	PHC Karang	2	1	4	7

Source: Primary Data

The data collected shows that there is unequal staffing pattern in the PHCs of Bishnupur district. The pattern manned by the Government is not followed and in some PHCs there are shortages of medical staffs. All these issues must be taken care by the concerned authority.

5. IMPACTS OF PHCs ON RURAL POPULATION

The rural healthcare system in India has been developed as a three tier system viz: Sub Centers, Primary Health Centers and Community Health Centers. PHC is the first contact point between village community and the medical officer. The PHCs were envisaged to provide an integrated curative and preventive health care to the rural population with emphasis on preventive and promotive aspects of health care..

The PHCs in Bishnupur district plays a vital role in the health care services of the people. The rural residents of the district can easily afford and access the different services and facilities provided by the health centers and opportunities of various health related schemes are also available.

They got more concern about their health than before from the various social welfare and public health services initiated by the concerned governing bodies or other organizations. It provide quality health and social services to the unprivileged sections also.

6. FINDINGS OF THE STUDY

The study found that the Primary Health Centers of Bishnupur district have been performing well with great hospitality providing services every 24 hours a day of the weeks. Although, there are some issues regarding the unavailability of some important facilities and equipments. Inadequacy of medical staffs in some health centers are also been noted.

7. SUGGESTIONS

1. The study should continue to provide the best possible information related with the health services in order to have a better understanding of the study.
2. The data collected should be analyzed and interpreted clearly in an easier language.
3. More in-depth and valid data should be collected to identify the advantages and disadvantages faced by the public in the PHCs.
4. The study should clearly outlined the problems and deficiencies faced by the particular PHCs. So that it is easier for the readers or concerned authority or state government to have knowledge about it.

8. CONCLUSION

The purpose of this study is to know about the performances and effectiveness of the PHCs in a particular areas. The study also identify that certain health centers have been working at their best. Some shortages are also found in the services and facilities that have to be look into by the concerned authorities.

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