A Comparative study on Primary Health Centers in Rural and Urban areas of Bhavnagar district, Gujarat

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INTRODUCTION

- Bhavnagar is a District of the Gujarat State of India. It is the fifth largest city in the state of Gujarat.
- It borders with Ahmedabad District to the northeast, Botad District to the northwest, the Gulf of Cambay to the east and south and Amreli District to the west.
- The district is divided into ten Talukas.
- Total no. of Urban Health center in district six.
- Total no. of Primary Health Center in district 44.
- According to NFHS 4, urbanization of Gujarat is 42.6%

RESEARCH QUESTION

How different is the current status of Primary Health center in Urban as compared to that of Rural area?

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Objectives

- To compare the current status of facilities available at PHCs and UHCs.
- To compare the current status of services available at PHCs and UHCs.

RATIONALE

- In Bhavnagar district after establishment of NRHM and NUHM no attempt has been made to have a systematic assessment of implementation of IPHS guidelines in Primary health centres. In order to initiate any program intervention to provide effective services to beneficiaries it is imperative to assess the current situation of PHCs in urban and rural areas.

RESEARCH METHODOLOGY

- **Study Design:** The study design is Cross Sectional Observational Study/Descriptive.

- **Study Duration:** 3 months (February to April 2017)

- **Study Area:** The study was conducted in Bhavnagar district. PHCs from six blocks were studied.

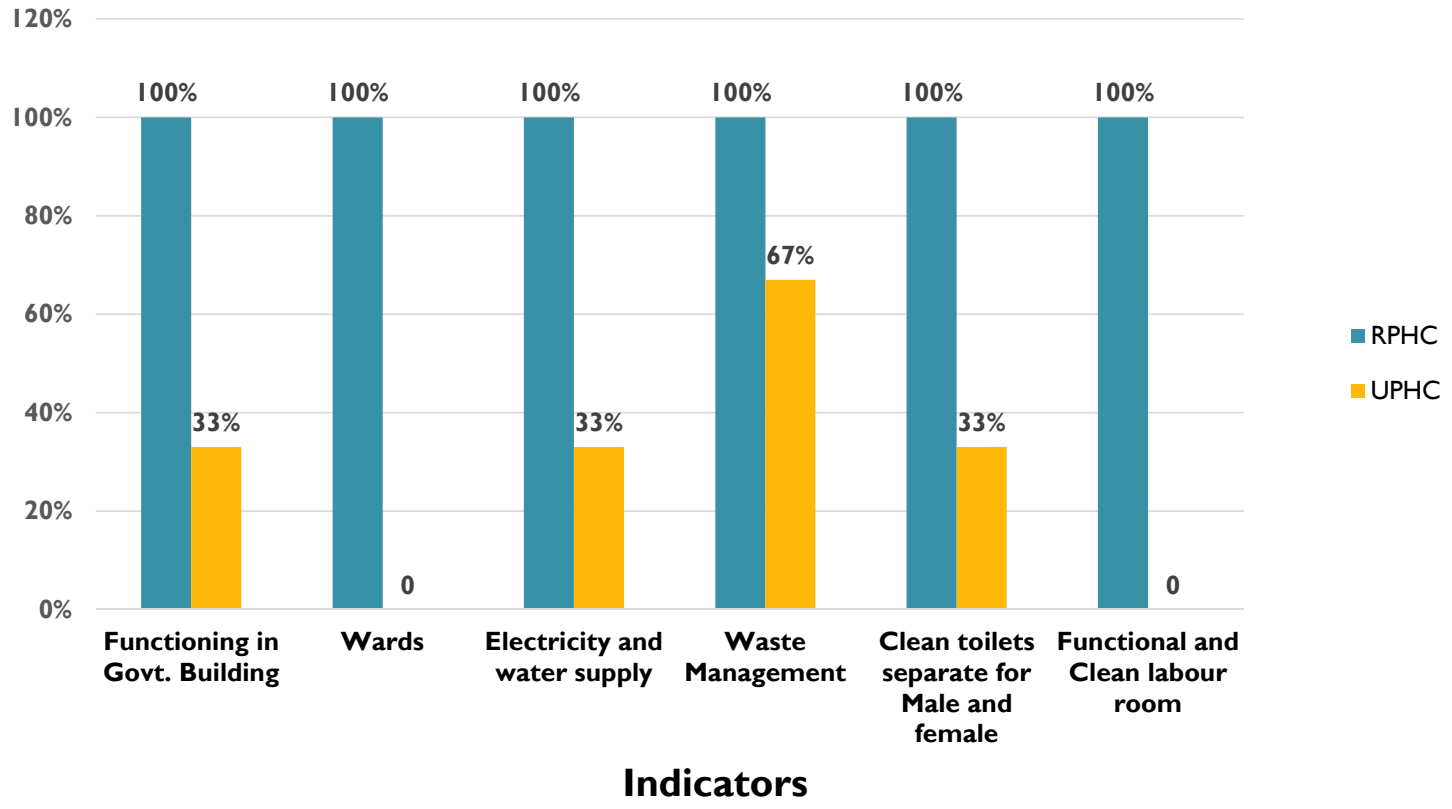
Sample selection process

- There are six UPHCs in district. Therefore all were selected for the study.
- For selection of PHCs in rural areas: Purposive sampling was done.

Sample size: 12 Health centers (6 PHCs and 6 UHCs)

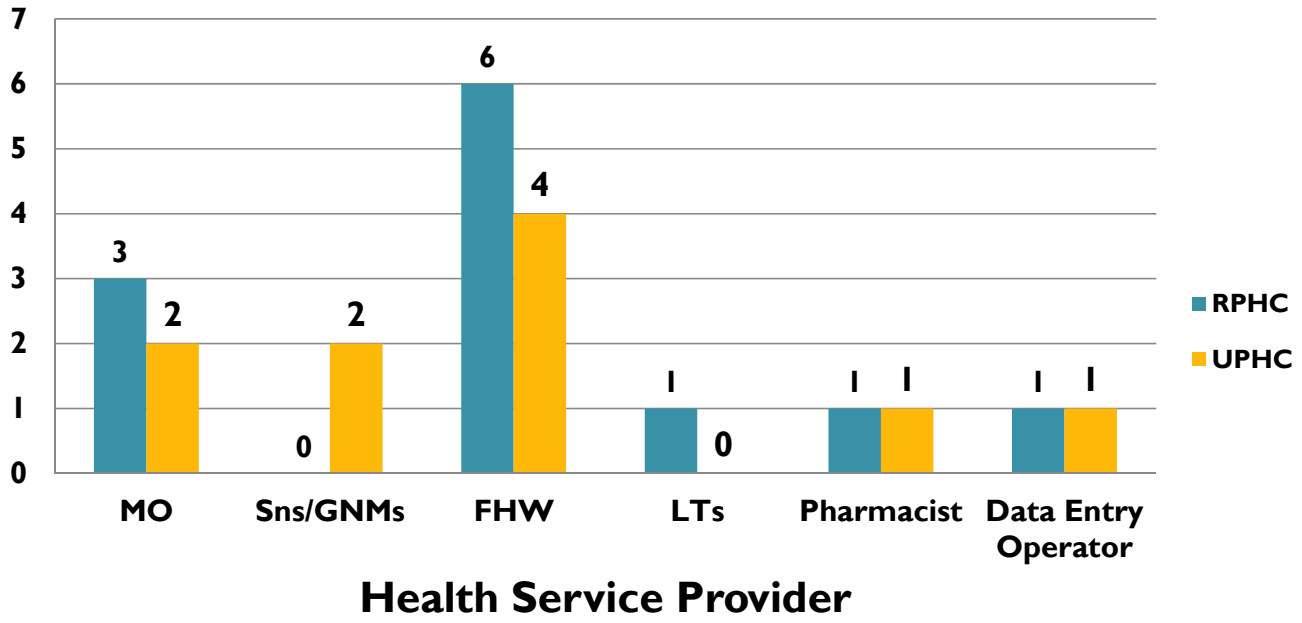
Data collection: Checklist was used for data collection**.**

Status of PHCs in terms of Physical Infrastructure (fig in %)

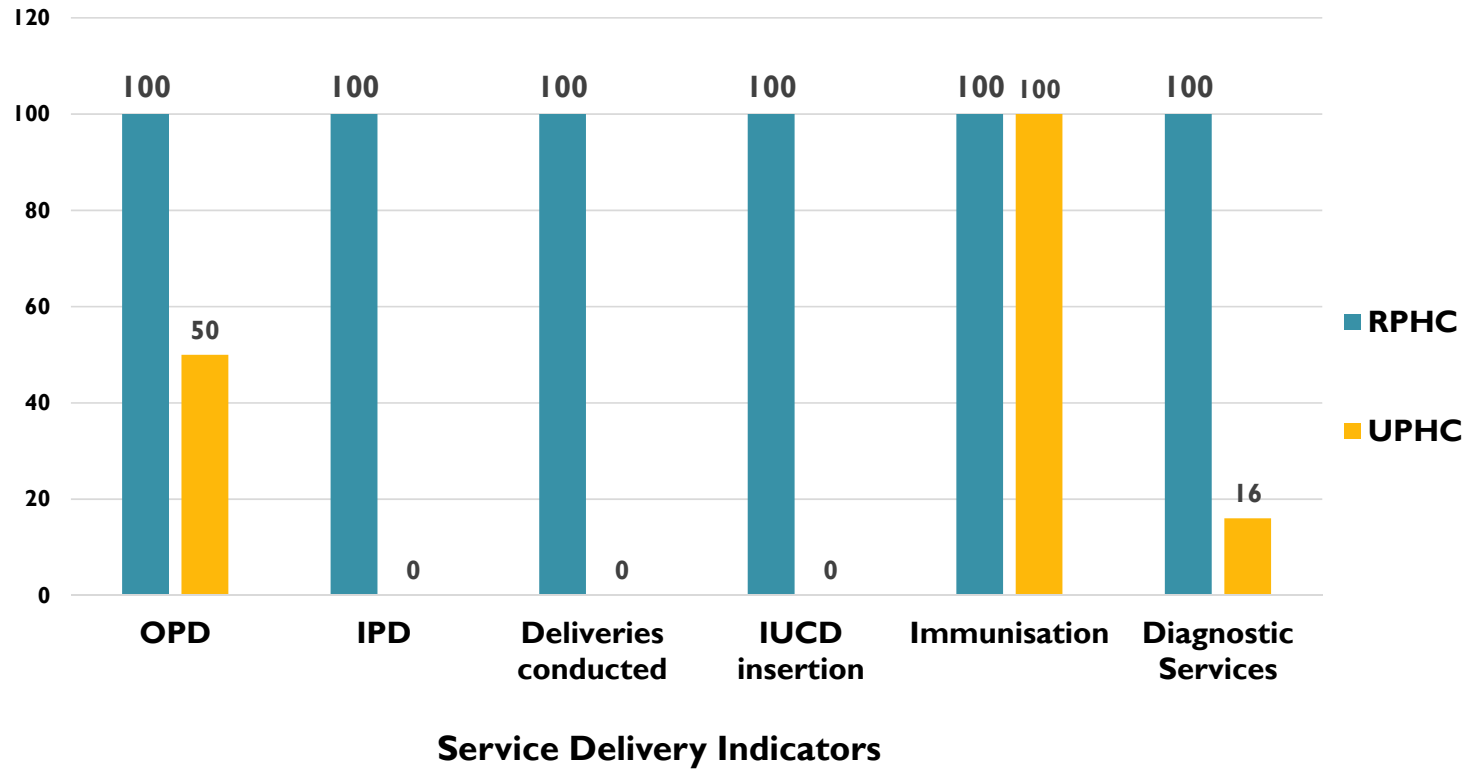


Status of Availability of Human Resources in PHCs and UPHCs

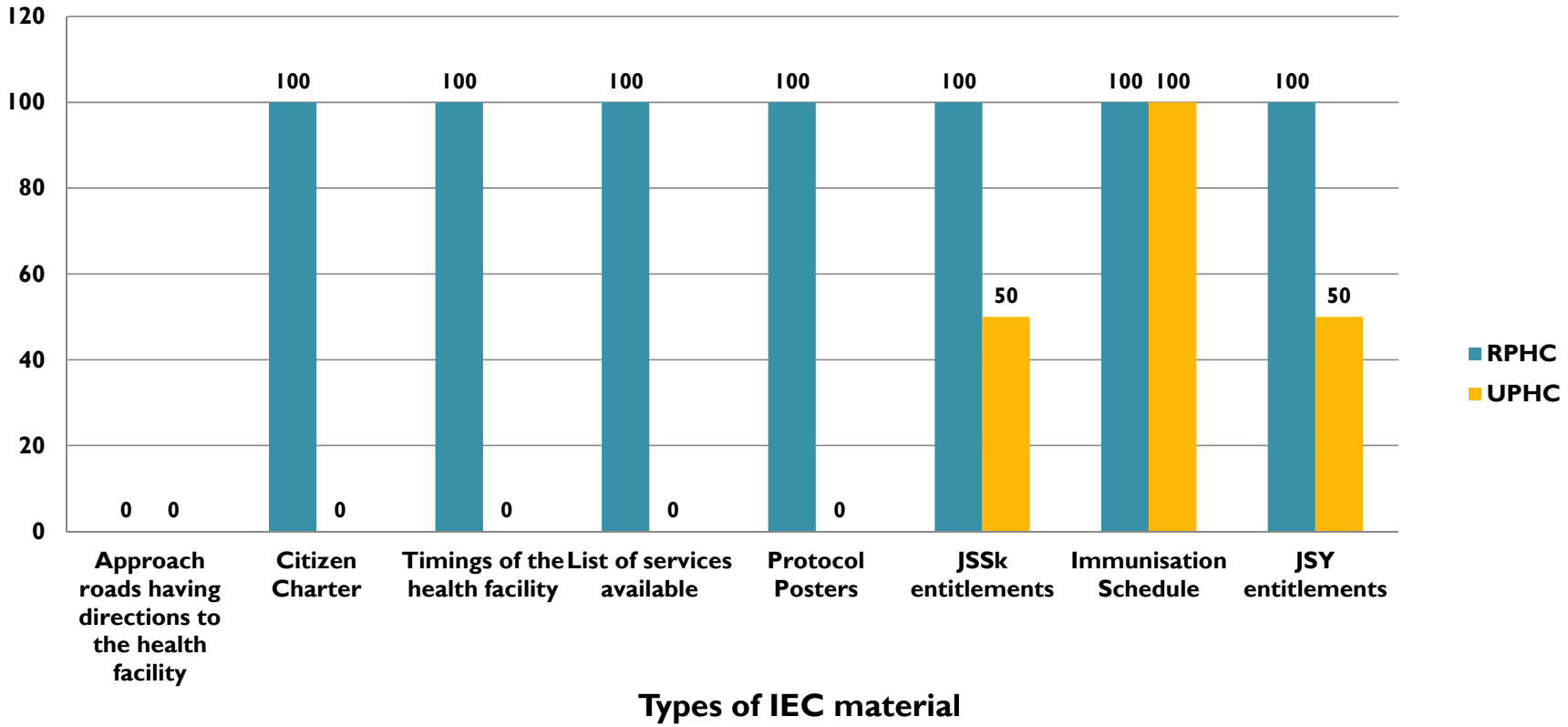
(fig in Average number)



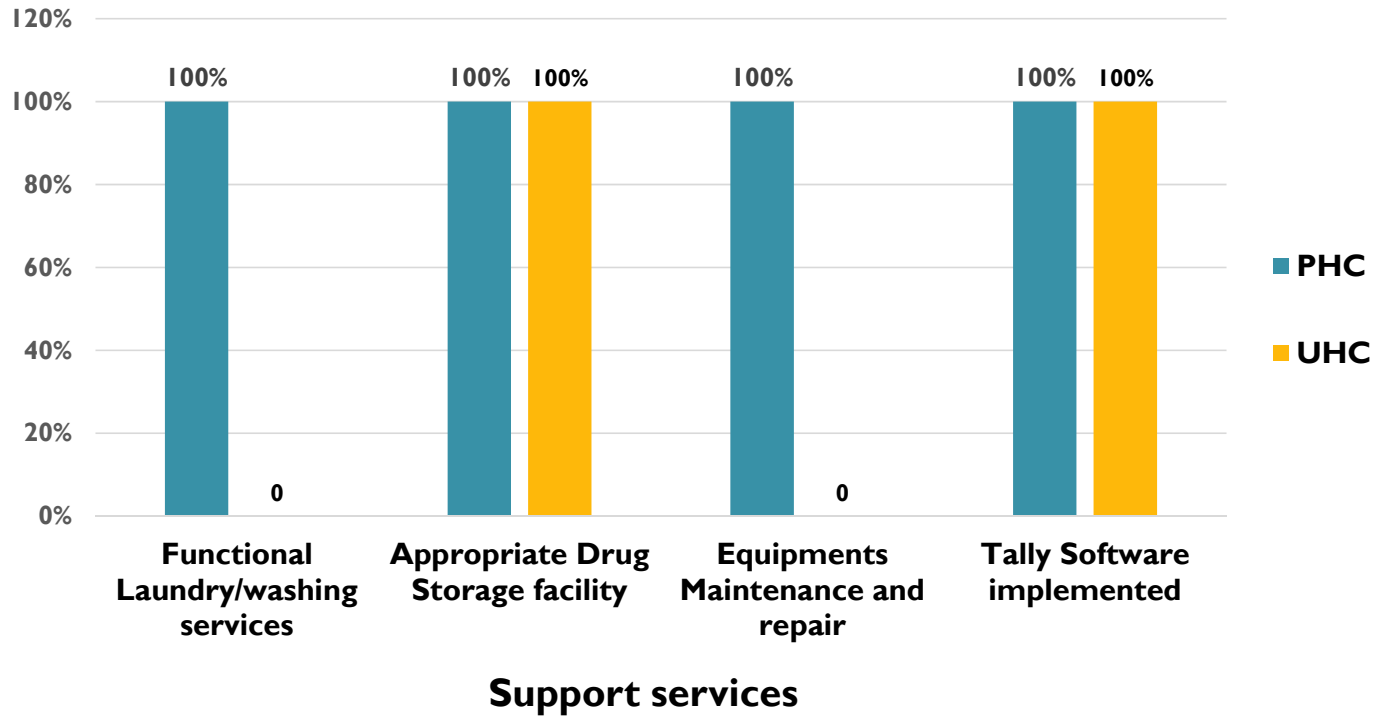
Status of service delivery in health centers (fig in %)



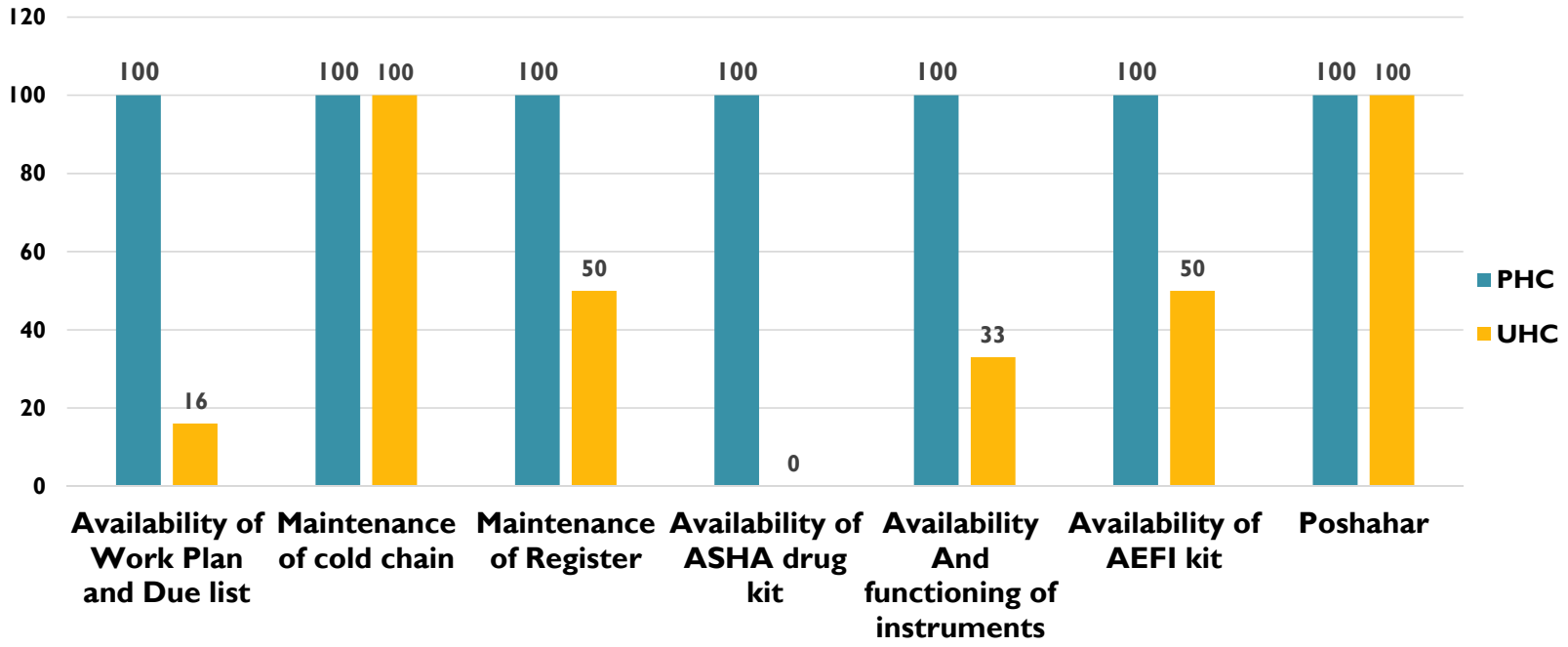
Status of Availability of IEC material(fig in%)



Status of Other support services available at health centers(fig in%)



Status of MAMTA Sessions of Rural and Urban Slums(fig in%)



CONCLUSION

- The physical infrastructure of UHCs is inadequate as compared to PHCs as discussed in graph. Lack of wards and Labour room in UHCs affects the service delivery indicator IPD and Deliveries.
- Average Staff at UHC is less than PHCs.
- Only 50% UHCs perform OPD. And no other services are being provided at UHCs in comparison to PHCs where all the services are provided.
- Lack of display of IEC material in UHCs.
- There was appropriate drug storage facility and tally software was implemented in all the PHCs as well as UHCs.
- The status of MAMTA session is inadequate in Urban as compared to Rural.
- Therefore, it is evident from the result that the facilities and services at UHCs is average as compared to rural and they are not efficient enough to Improve health of Urban poor. Hence, there's a need to strengthen UHCs setting the benchmark of PHCs.

References

- Mariolis, A., Mihas, C., Alevizos, A., Mariolis-Sapsakos, T., Marayiannis, K., Papathanasiou, M., Merkouris, B. (2008). Comparison of primary health care services between urban and rural settings after the introduction of the first urban health centre in Vyronas, Greece. BMC Health Services Research, 8, 124.
- http://doi.org/10.1186/1472-6963-8-124
- https://bioinfopublication.org/files/articles/3_1_1_IJPHHR.pdf
- http://nrhm.gov.in/nhm/nuhm.html

THANK YOU