



Review of Primary Health Care Centre in Dharashiv District

Dr. Chochande Ranjana Uttamrao

Associate Professor, Department of Geography,

B.S.S. Arts, Science & Commerce College, Makani, Tq. Lohara, Dist. Osmanabad.

Corresponding Author- Dr. Chochande Ranjana Uttamrao

Email: ranjanachochande@gmail.com

DOI- 10.5281/zenodo.14059487

Abstract:

Primary health care is basic health care universally available to individuals and acceptable to them through their full participation and at a cost that the community and the country can afford (W.H.O., 1978) the primary health center plays an important role in the health care system, i.e. emphasizes preventive rather than curative services. Provides first contact care to villagers. Primary health care implements all national programs and schemes under public health and family care. The primary health center extends outdoor and indoor treatment facilities and outreach services such as vaccination, family health care, family planning, blindness, and leprosy control, etc. (Agnihotri R.C 1995). From this point of view, this chapter considered only the distribution of primary healthcare centers within the studied region.

Keywords: PHC, Dharashiv district, Decadal Changes, Public Health.

Introduction:

According to the population norms for various public health facilities set by the Government of India, there should be one sub-primary care center for a population of 3,000–5,000; one primary care center for 20,000–30,000 inhabitants; and CHC center for 80,000–120,000 population in tribal and rural areas. Partial entry is not expected in urban areas. Instead, Assistant Midwives (ANMs), who are MPHWS (F) multi-purpose health workers, are based in urban primary health services. Due to population density in urban areas and relatively shorter distances, ANMs have easy access to their reach when they are based in urban PHCs.

The population norm for urban primary health care is set at 50,000 for areas with high slum population and 75,000 for areas with sparse slum population. The idea is that each urban PHC should serve about 20,000–30,000 in the slums. Urban primary health care in areas with a high slum population would thus serve about 20,000–30,000 persons living in identified slums and 30,000–20,000

persons living in the neighbourhood. Health facilities in Maharashtra are presented.

Objective:

To Study of Primary Health Centre in Dharashiv district.

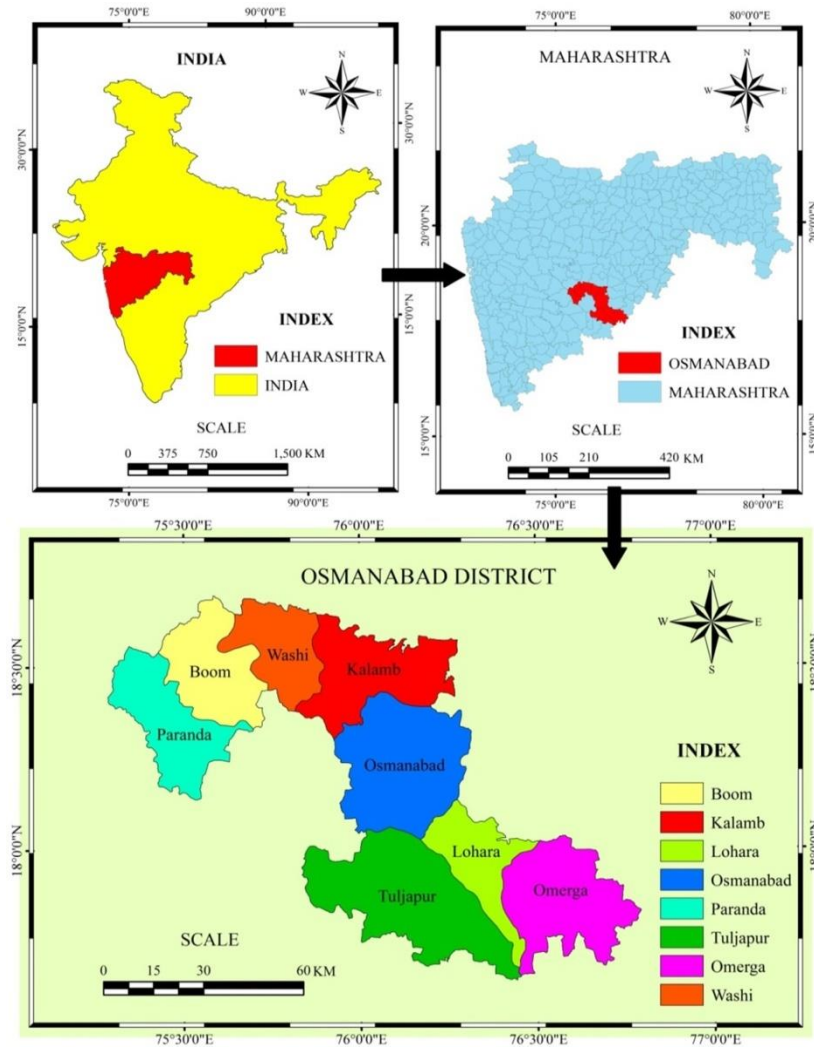
Database and Methodology:

The present study generally depends on the secondary data. Data Collected through the District Statistical Department, Censuses handbook of Dharashiv District, and Socio-Economic Review of Dharashiv District.

Study Area:

Dharashiv district is located in the state of Maharashtra. This district is spread over eight tehsils with a total geographical extent of 7512.04 sq km. The district lying between 17°35'N to 18°40'N and 75°16'E and 76°40'E. Dharashiv district is 24th in Maharashtra in terms of total geographical area. It is bounded on the southwest by Solapur district, on the northwest by Ahemadnager district, and on the north by Beed. Latur to the east and northeast and Bidar and Gulbarga districts of Karnataka state to the south.

Location Map of Study area



Primary Health Centres:

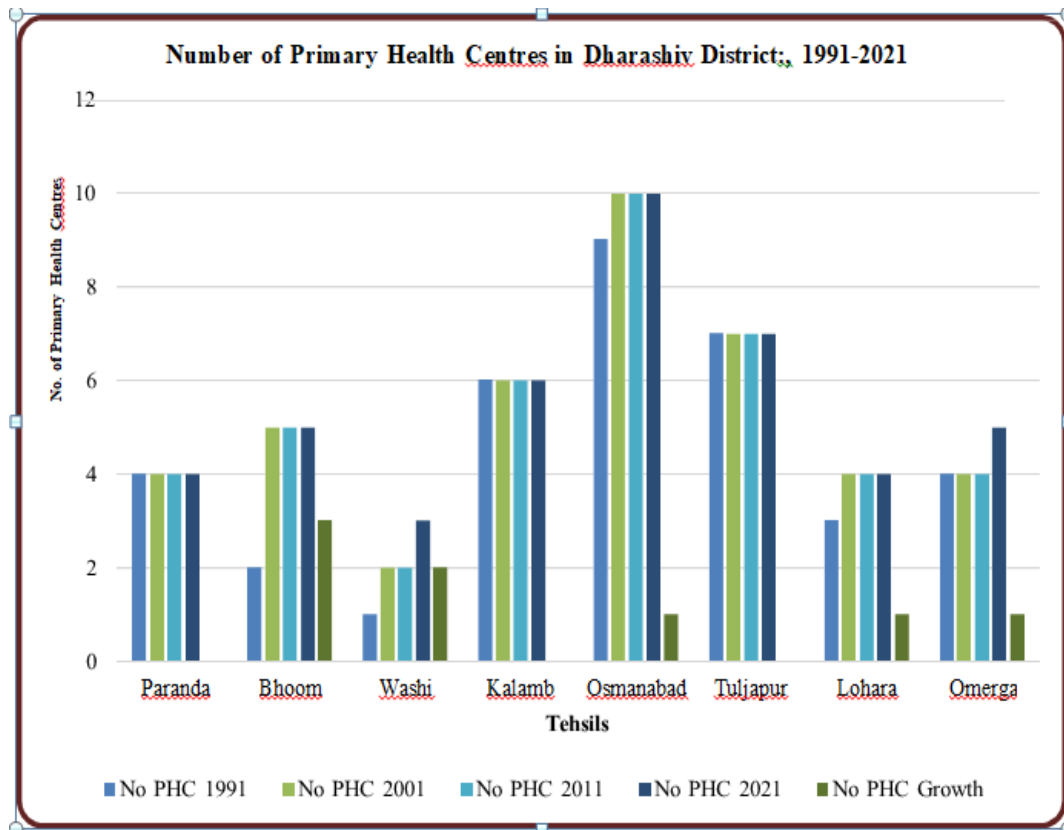
The Primary Health Center is the cornerstone of rural health services – the first port of call for qualified public sector doctors in rural areas for patients and those who directly report or refer sub-centres for curative, preventive and primary health care. A typical primary health center covers 20,000 residents in hilly, tribal or difficult areas and 30,000 residents in plain areas with 6

indoor/observation beds. The table shows the primary health centers in Dharashiv district from 1991 to 2021. In 1991, there were 9 primary health centers in Dharashiv Tehsil. In 2001, the number increased to 10. In 2021, this number is considered constant, i.e. ten, so the growth rate of Dharashiv Tehsil is considered to be 1. In 1991, it was the primary health center of Bhoom Tehsil in Dharashiv district.

Number of Primary Health Centres in Dharashiv District: 1991-2021

Sr. No	Tehsils	Primary Health Centres				
		1991	2001	2011	2021	Growth
1	Paranda	4	4	4	4	0
2	Bhoom	2	5	5	5	3
3	Washi	1	2	2	3	2
4	Kalamb	6	6	6	6	0
5	Dharashiv	9	10	10	10	1
6	Tuljapur	7	7	7	7	0
7	Lohara	3	4	4	4	1
8	Omerga	4	4	4	5	1
District		36	42	42	44	8

Sources- Socio Economic review of Dharashiv District 1991, 2001, 2011,2021.



In Bhoom tehsils it is seen that the number has increased to 5 from 2001 to 2021, the growth rate of primary health center of Bhoom tehsils is 3. The growth rate of such Tehsil is one in 1991 and two in 2001 seems to be stable. in 2011 but in 2021 the primary health centers are considered to be three which means the increase in Washi Tehsil is 2. Status of primary health centers in Dharashiv district from 1991 to 2021 shows that in 1991 there were 36 primary health centers in the whole of Dharashiv district, which increased to 42 in 2001, an increase of ten primary health centers. Centers appear in 2011, there was no increase in primary polyclinics, on the contrary, the number of primary polyclinics increased to 44 in 2021, that is, two new primary polyclinics were launched in 2021 compared to 2011. Growth rate Primary health

References:

1. Socio-Economic Review and District Statistical Abstract. Dharashiv District. 1991,2001,2011,2021.
2. Lokhande, T. N. and Kale, V.P. (2014): "Planning for Primary Health Care Centers in Dharashiv District of Maharashtra", Published in Proceeding.
3. Kale, V.P. and Lokhande, T. N (2013): "A Geographical Study of Spatial Distribution of Health Care Facilities in Marathwada Region," Golden Research Thoughts Journal, Vol-3, Issue-5.
4. Husain, Majid (1994): "Medical Geography: Perspective in Economic Geography series-7, Anmol Publication Pvt. Ltd., New Delhi.

center in Dharashiv district is observed at 8%.

Conclusion:

The Primary Health Center provides the interface with the community at the local level and provides all primary health care services. It is the lowest rung of the reference pyramid of healthcare facilities. The primary health center is mainly preventive and promotional in nature, but also provides a basic level of medical care in rural areas. Growth of primary health centers in Dharashiv district from 2001 to 2021 there were only 7 primary health centers, the highest number was found in Ambegaon and Baramati tahsil which are 2 primary health centers and Haveli, Junnar and Junnar saw the growth of only one primary health center centers.

5. Duggal, Ravi and et. all (2005): "Health and Health Care in Maharashtra: A Status Report".
6. Dev and Amar, (1992): "Geography of Health Care- Spatial and Social Accessibility to the Health Care Facilities in Rural Himachal," Unpublished Ph.D. thesis, submitted to University of Mumbai.
7. Census handbook of Dharashiv district, 1991, 2001, 2011.
8. Barrett, F., (2000): "Disease and Geography: The History of The Idea", York University, Toronto.
9. Akhtar, R. and Hunter (1990): "Medical Geography and Epidemiology", Geographic Media, Vol.2