# Health Care Facilities & Spatial Distribution in Buldhana District

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#### **Abstract**

The study of health care facilities is the integral part of medical geography. Health care is defined as the active process by. Which on individual achieves physical and mental well being. Health is one of the basic determinants of social well being and development of Human resources. Human health plays an important role is the development of the region of the country. Health care system of any country or region has an important role to play for the sustainable health management. In this paper an attempt has been made to study the health care facilities and its spatial distribution in Buldhana district.

Key words: Health care Facility, community Health centre, distribution, Diseases.

#### **Introduction:**

An investment on health is an investment on Men improving the quality of his life it is always says that," health is Wealth" This type of slogans can be seen always in every developing country like India. in the world Health does not simply mean absence of disease or infirmity but the overall well being of an individual horizontal and vertical linkages have therefore to be established among all the interrelated with protected water supply, family planning and maternity and child care, this is the main agenda for any government across the country. for achievement of above development activities India government its inception established several welfare plans including the five year plans for the welfare of its people. The ministry of Health and Family welfare looks after above activates in India. The health service may be analyzed in terms of the community for which they serve and deal with These survive are the integral part of a particular health system and represent response to the health concern and to the health needs. In this paper researcher has attempted to analyze the existing health care facilities available in Buldhana District, Health sub-centers, Hospitals, dispensaries, and number of hospital beds, nurses, doctors available are also considered for this study.

## **Objectives:**

- 1. To study the spatial Distribution of Health care facilities in Buldhana district.
- 2. To find the deficiency of health care facilities in Buldhana district.

## **Data Base and Methodology:**

The work is entirely based on secondary data. Which is obtained from various sources. Data regarding the availability of various health care facilities are collected from socio-economic review and health officer Buldhana the collected data is processed and presented in the form of table.

# **Study Area:**

Buldhana is a district in Amaravati division of Maharashtra state in western India at the western most border of Vidarbha region It lies between 19<sup>0</sup> 51'to 21<sup>0</sup>17' north latitude and 75<sup>0</sup> 57' to 76<sup>0</sup> 59' east lognitude. Total area of the district is 7670 square Kilometer There are 13 tahsil and 1427 Villages in the district. As per 2011 census, the population was 25,86,258. The sex ratio was 946 and literacy rate was 76.14%.

The district is a major centers with Lonar Lake (Second Largest in the world) declared a World heritage, shegaon of maharaj and sailanibabas Dargah are the major places of Pilgrimage sindkhedraja in the district is renamed to be the birthplace of rajmata jeejabai.

#### **Result and Discussion:**

The discussion of health care service in the district throws light on general health and available medical facilities. The Health care facilities. In the district under study as whole area as compared to total population. the various facilities in the district are shown In the table 1. Indicate the health care facilities in district from 1995-96 to 2015-16

Table - 1

Trends of Health Care Facilities in Buldhana District
1995-96 to 2015-16

Year	Clinic	Hospital	P.H.C.	P.H.S.C	Bed
1995-96	14	72	47	231	1251
2001-02	14	81	52	271	1298
2005-06	20	70	52	278	1038
2011-12	20	75	52	280	1386
2015-16	36	75	52	280	1588

(P.H.C: primary Health center, P.H.S.C: Primary Health sub center)

In the year 1995-96 (Table-1) there was 14 clinics and 72 hospitals in the year 2015-16 The highest number of clinic was recorded (36) in the year 2015-16 and lowest (14) in 1995-96 Hospital Provides their cervices the surrounding hinterland sometime the doctors of primary health center and these hospital refer the complicated and serious cases Hospital is generally facilities by the infrastructure Facilities Among these residential medical officer and paramedical staffs, operation theaters, equipped lab, X -ray unit, table number of beds.

The Bhore committees in 1946 have the concept of primary health center as a basic health unit to provide an intergraded curative and preventive health care to rural and tribal people According to the national health plan one primary health center. Should provide its services to about 2000 population in hilly tribal and backward areas for getting more converge in the year 1995-96 there were recorded 47 primary health center in the district as against 52 primary health center in 2015-16 primary health sub center is the peripheral outpost of the primary health center they are being established of the basis of one primary health sub center for 500 population in general the availability of number of beds in bed in various clinics hospital and primary health center are recorded small number.

## Tahsil wise Distribution of Major Health Care Facilities

Tahsil wise health care facilities have been given in Table-2 Where the uneven distribution of health care facilities are notices in the district the year 2015-16. 36 Hospital and 75 Clinic and one cancer Hospital 52 primary Health care centers, 280 primary health sub centers etc. served the entire district those 454 doctors and 1214 nurses are working in various health center. Table-2 Tahsil Wise Distribution of health care facilities in Buldhana District (2015-16)

Table - 2

Tahsil wise Distribution of Health care Facilities in Buldhana District (2015-16)

Tahsil	Hospital	Clinics	Р.Н.С	P.H.S.C	Doctors	Staff	Bed Strength
Jalgaon (jamod)	2	7	3	15	24	40	60
Sangrampur	2	3	4	15	21	40	70
Shegaon	2	6	4	15	34	90	140
Nandura	0	6	4	20	25	36	40
Malkapur	3	5	2	18	18	71	70
Motala	1	4	4	23	25	67	66
Khamgaon	5	23	5	29	75	221	300
Mehkar	3	5	5	31	31	74	80
Chikhli	3	4	6	29	27	71	86
Buldana	5	4	25	28	87	325	386
Deolgaon Raja	4	2	2	14	23	70	80
Sindkhed Raja	3	4	4	24	30	48	110
Lonar	3	4	4	24	30	61	100
Total	36	75	52	280	454	1214	1188

Source :-District and Health officer Buldhana

Of These agents of health services in promoting maintaining and restoring the health of people in the district The highest number of hospital and clinic and cancer hospital are (28) observed in Buldhana Tahsil and lowest number are noticed in motala tahsil in the year 2015-16 chikhli Tahsil is ranked first in number of P.H.C and Mehkar Tahsil ranked First in number of P.H.S.C also cancer hospital during the same period. Where lowest number are marketing Malkapur and Devlgaon Raja Tahsil There are 1668 Doctors employed in various health centers and treated nearly about 20,22,77 patients In Buldhana district hospital, primary health sub centers are geographically different places.

Table-3
Tahsil Wise Patients Treats in Buldhana Districts (2015-16)

		Patients Treated		
Sr.No	Tahsil	Indoor Patients	Outdoor Patients	
1	Jalgaon (jamod)	6348	108655	
2	Sangrampur	5124	95482	
3	Shegaon	19750	161823	
4	Nandura	6433	1,11,051	
5	Malkapur	5099	1,21,183	

6	Motala	4669	96289
7	Khamgaon	31198	2,83906
8	Mehkar	603	155070
9	Chikhli	8226	172944
10	Buldhana	36083	349910
11	Devlgaon Raja	6730	13,34,14
12	Sindkhed Raja	7673	110704
13	Lonar	7106	12,2546
Total		150442	20,22977

Source: District Medical and Health Officer Buldhana.

When a patient is serious or needs under the supervision of medical staff, He should be admitted in indoor. It is excepted that every Primary Health center should be Facilities by indoor patients departments that includes world and required numbered of beds Nearly about 150442 (Table-3) Patients were treated as a indoor patients in the year 2015-16 the highest Number of Indoor Patients were treated Buldhana Tahsil and lowest in Motala Tahsil in the same year where as in Khamgaon (31198) Shegaon (19750) Chikhali (8226) Devlgaon Raja (6703) Sindkhed Raja (7673) Nandura (6433) Jalgaon (jamod) (6348) Mehkar (6030) Sangrampur 5124 (Malkapur (5099) Motala (4669) Patients were treated in Indoor Patients every primary center has O.P.D Facilities However the number of outdoor patients investigated daily is varying it is clear from the Table-3 That in about 20,22,977 patients Were treated as outdoor patients in the year 2015-16 The highest number of Patients were treated in Buldhana Tahsil and lowest in sangrampur Tahsil during the same Year followed by Khamgaon (2,83,906) Chikhli (1,72,944) Shegaon (1,6,1,823) Mehkar (1,55,070) Deulgaon Raja (1,33,414) Lonar (1,22,5,46) Malkarpur (1,21,183) Nandura (1,11,051) Sindkhed Raja (1,10,704) Jalgaon (Jamod) (10,86,55) Motala (96289) Sangrampur (95482) etc.

## **Pathological Lab:**

Generally Various Primary tests of urine, stools, spite, etc have been conduction is a pathological in order to get perfect diagnosis of the service of pathological laboratories.

## **Operation Theatre:**

In the study region same primary health centers have the facilities of operation theaters each tahsil has one operation theatre and mainly perform minor surgery and family planning operation.

### **Conclusion:**

To conclude the health care facility scenario of the district which included hospital P.H.C, P.H.S.C Pathological lab etc. reveled that there in an inequality in the spatial distribution of health care facility in the district the achievement of immunization programmes was not uniform in the study area same tahsils recorded more cases and some tahsil achieved few cases.

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