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## HEALTH INFRASTRUCTURE FACILITIES IN KARWAR DISTRICT OF KARNATAKA

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### ABSTRACT

Health infrastructure is one of the basic infrastructural facilities which are helpful in the easy execution of economic activities, these are to be called as the heart of basic amenities. The objective of the present is to know the Government health services provided and developed in different talukas of Karwar District in Karnataka State. And it has been put forth and explained how the health facilities are developed and distributed among the people of this district which comprises eleven talukas. The present study is based on secondary data collected from published and unpublished sources of Government and non-government institutions. From the study analysis it is found that there is wide disparities in the provision of health infrastructure in different talukas of Karwar district. Hence with this attempt and study findings some remedial measures or suggestions are discussed.

**Keywords:** Health, Infrastructure, PHC's, Development, Service

### INTRODUCTION

“Health infrastructure is nothing but the availability of necessary health amenities, like, hospital buildings, beds, transport facilities, etc., and health equipments like, medicines, x-ray, laboratory services etc. in the health sector in a economy”. Basic amenities are the infrastructural facilities, the provisions of which are very vital for economic development. The scarcity of these reduces the economic development. The comfortable and proper living of people is made possible through the provision of these facilities. Without provision of these no society or nation would develop. The economic development of different sectors will be depending upon the availability and accessibility of these infrastructural facilities. Hence health infrastructure is an essential factor for the Human Resource or Manpower Development of a country.

### Review of Literature

Dutt P. R. (1965), Karne Manisha (2007), revealed the importance of Health Centres and there infrastructure facilities as the institution for the promotion of the health and welfare of the people. This seeks to achieve its purpose of welfare and relief as may be related to the general public health work .Impressive health outcomes and a thought to be attributable to the priority assigned by the government to health care, as evidenced by clinics, immunization campaigns, vector control and a commitment to minimizing inequality in access to health care. Lavees Bhandari and Siddartha Dutta (2007), Manisha Tiwari ( 2004 ) examined that the last couple of decades have witnessed tremendous level of development in the field of medical sciences. And mentioned that health care system covers all those services which protect and promote health of the community.

Thus there are many studies which concluded with revealing the importance and need for health

infrastructures in the economics development of the country. The main objective of the study is to reveal how the health services have been provided and developed in different Talukas of Karwar District in Karnataka State. It further attempts to understand and explain how the health and health facilities like hospitals, beds and drugs stores are developed and distributed among the people of Karwar District which comprises eleven Talukas.

#### **DATA SOURCES AND METHODOLOGY**

The study is based on secondary data collected from official documents and other published and unpublished materials like Government reports, District at a Glance, Research articles and books etc. The information contained in sources has been analyzed and used for the same. As for the development of a state or region, three types of infrastructural facilities and all-round development are complimenting with each other keeping this purpose in view, review of secondary literature has been done in relation to health infrastructure like establishment of Government Hospitals, Primary Health Centres, Beds and Drug stores etc in Karwar district.

#### **RESULTS AND DISCUSSION**

The following discussion shows the structure and composition of health infrastructure in different talukas of Karwar district. Different aspects of health infrastructure like number of Government hospitals, availability of Beds, PHC's, Drugs Shop etc. in the study area are discussed with the help of data's presented in the table. Problems in the provision of health infrastructure are discussed in the last part of this discussion.

##### **1. Government Hospitals**

The Government Hospitals play vital important role in protecting the health of the people in Uttar Kannada (Karwar) district. An analysis has been made to know the extent of health infrastructure facilities particulars offered in each taluka during different years.

The study found that there are only 13 Government hospitals in different talukas of Karwar district and this has been not increased since 1998-99 to 2009-10, where in only 7.69 percent (1) Government hospital is there in Ankola, Bhatkal, Honnavar, Karwar, Kumata, Mundagod, Siddapur, Sirsi, and Yallapur respectively. But in Haliyal and Supa(Joida) there are 15.38 percent (2) Government hospitals since 1998-99 to 2009-10. There is not significant change in study area. (Uttar Kannada, District Statistical Glance, 1998-99 to 2009-10).

##### **2. Beds in Government Hospitals in Karwar District**

The provision of beds to the patients in the hospitals is very important in treating the same in the hospitals. The provision of bed is very prominent in the hospital service.

Table - 1 indicates about the provision of beds to the number patients in the hospitals of each taluka from the year 1998-99 to 2009-10. Thus comprising all the eleven taluka hospitals the total number of beds provided was 618 in the year 1998-99, out of which, Ankola had 1.30 percent (80), Bhatkal 7.28 percent (45), Haliyal 11.33 percent (70), Honnavar 3.40 percent (21), Karwar 48.54 percent (300), Kumata 5.02 percent (31), Mundagod 0.97 percent (6), Siddapur 4.85 percent (30), Sirsi 9.22 percent (57) and Supa 3.24 (20) and Yallapur 4.85 percent (30) beds had been provided. Karwar Taluka had provided the highest number of beds and Mundagod had provided the least number of beds in the hospitals.

During the year 2009-10, all the eleven Talukas of the district increased the number of beds 920 to 970. Ankola, Honnavar, Kumata and Supa talukas provided 5.15 percent (50) beds and Bhatkal, and Sirsi talukas was provided 10.31 percent (100) beds, Haliyal taluka had provided 8.25 percent (80) beds, Karwar had provided the highest number of beds i.e., 41.24 percent (400) and remaining talukas i.e., Mundagod, Siddapur

and Yallapur had provided least number of beds i.e., 3.09 percent (30) only.

It implies that the provision of beds in the hospitals of all the talukas was not the same. The number of beds did increase in the subsequent years except in Siddapur and Yallapur Taluka.

### **3. Primary Health Centres (PHCs)**

As the mother's health is important in caring the health of child in the rural areas, the primary health centres are looking after the health of ruralities. The primary health centres are providing better health infrastructure facilities in the rural areas.

As is shown in the Table - 2 that in the rural areas of Uttara Kannada (Karwar) district there were 36 Primary Health Centres during the year 1990-91, in the year 1995-96 there were 55 PHCs and which increased to 58 in the year 2000-01. During the year 2005-06 the total numbers of PHCs were 59 and in 2009-10 this number of PHCs has been increased to 83.

In the same way, during the year 2009-10 Ankola and Bhatkal, had few number of PHCs i.e., 6.02 percent (5) separately. Haliyal and Supa had 8.43 percent (7) separately. Honnavar and Yallapur talukas had provided 10.84 percent (9) of PHCs. Karwar had provided the highest number of PHCs i.e., 15.66 percent (13), Kumata, Mundagod and Siddapur talukas had provided 8.23 percent (6) Sirsi taluka had provided 12.05 percent (10) Primary Health Centres.

The above study reveals that the number of PHCs had been increased slowly in Uttara Kannada district and rural areas. But still there is need of increasing such Health Centres to some extent. This analysis shows that there is a significant disparity in the provision of PHCs and other Government hospital facilities in Rural and Urban areas. Where in these facilities are better in urban talukas compared to rural talukas.

### **4. Beds in Primary Health Centres (PHCs)**

Even the provision of beds has been made in the primary health centres of Karwar district. Most of the primary health centres are providing the bed

facilities for proper treatment of pregnant and other patients.

As per study the Table – 3 reviews the provision of total number of beds in Primary Health Centres of Uttara Kannada district was 230 during the year 1990-91, whereas during the year 2000-01 and 2009-10 the provision of beds could increase to 390 and 366, respectively.

Taluka-wise distribution of beds in Primary Health Centres during the year 1990-91 shows that Ankola, Karwar, Mundagod and Siddapur had 7.83 percent (18) separately. Haliyal and Supa taluka accounts 5.22 percent (12), Honnavar had 13.04 percent (30) beds PHCs, Kumata taluka PHCs possessed the highest number of beds that is 14.78 percent (34) and Sirsi and Yallapur PHCs had 10.43 percent (24) beds each. In the same way, during the year 2009-10 Ankola and Bhatkal PHCs possessed 6.56 percent (24) beds each. Haliyal and Sirsi talukas had 11.47 percent (42), Honnavar PHCs possessed the highest number of beds i.e., 13.11 percent (48), Karwar had 9.83 percent (36) beds, Kumata, Mundagod, Siddapur, Supa and Yallapur PHCs had 8.20 percent (30) beds each talukas PHCs.

In the above Table of information we come to know that in each subsequent year that is from 1990-91 to 2009-10 the number of beds in PHCs could increase constantly.

During the year 1990-91 Haliyal and Supa talukas had least beds in PHCs and Kumta taluka had highest numbers of beds in PHCs. In the same way during the year 2009-10 Ankola and Bhatkal had very least number of beds in PHCs and Honnavar taluka had highest number of beds in PHCs.

### **5. Drug Shops**

Drug shops are the stores where medicine and chemicals are preserved and sold, all types of medicines and surgical instruments are supplied and provided to the hospitals and patients. Thus, the drug shops are as important as hospitals in preserving the health of public.

The Table -4 reveals that the total district had 101 drug shops during the year 1993-94, out of which 5.94 percent (6) were found in Ankola. Further the number of drug shops were found in Honnavar, Karwar, Kumata, Yallapur, Mundagod and Siddapur constitute 10.89 percent (11), 11.88 percent (12), 6.93 percent (7), 3.9 percent (4), 21.79 percent (22) and 0.99 percent (1). Thus, Sirsi had the highest number of drug shops and Supa had the least number of drug shops.

In this way, from the years 1993-94 to 2009-10, the number of drug stores could increase from 101 to 338. Out of which Ankola taluka had 5.62 percent (19), Bhatkal taluka had 7.10 percent (24), Haliyal and Honnavar talukas had 12.13 percent (41), Karwar had 13.91 percent (47), Kumata had 11.24 percent (38), Mundagod and Siddapur had 4.73 percent (16), Sirsi taluka had the highest number of drug shops i.e., 24.26 percent (82) and Supa had very least number of drug shops i.e., 0.89 percent (3) and Yallapur had 3.25 percent (11) respectively

Thus, from the above information in the table we can observe that the number of drug shops increased from the year to year. The Sirsi had more number of drug shops and Supa belonged to the least number of drug shops in Karwar District.

#### **Problems in the Provision of Health Infrastructure Facilities**

In the study area there are so many reasons for the poor growth of health infrastructure facilities in the Karwar district of Karnataka State. Those are., 1) Lack of financial resources. Means the public expenditure on health in Karnataka was less than 1 percent of GDP indicating inadequacies in the public provision of critical health services; 2) Shortage of building facilities for health centres; 3) Lack of physical infrastructure like., supplies, diagnostic facilities, laboratory equipments, etc. and these are extremely helpless condition which a very sad reflection on the functioning of health centers and a general deterioration of physical infrastructure

facilities; 4) Lack of human resource (manpower); 5) Scarcity of road and transport facilities; 6) Inbalanced growth of plane and hilly zones as well as Urban and Rural areas; 7) Lack of health education to the people; 8) Doctors and other staff are not showing interest to serve in rural area like., SCs and PHCs; 9) Not proper establishment of health policies and programmes.

#### **Suggestion to improve to health infrastructure facilities**

On the basis of the findings of the present study there are so many solutions to resolve problems in connection to provision of health infrastructures and some suggestions to the improvement of health infrastructure facilities in the study area like:

- 1) Proper allocation of the financial resources and increase the public expenditure on health care.
- 2) Equal distribution and creating the new health infrastructure amenities.
- 3) Government should take the support of NGOs and Private Institution for the development of health infrastructure.
- 4) Construction of buildings in the Ideal Location to help these beneficiaries and staff.
- 5) Full fill the shortage staff in a health centers among all type of health care.
- 6) Maintain the balanced growth of plane and hilly zones as well as Urban and Rural areas.
- 7) Make the strict rules to continuously absent and rude behaved staff.
- 8) Make the new policy and establishment to helpful to all people in a state. etc.

#### **CONCLUSION**

It is concluded that, in the present study area different types of health infrastructure facilities are available like, health hospitals, primary health centres and beds, drug shops etc. During the past years the vast spread and development of health infrastructure facilities and several health policies and programmes are implemented at both

National and State level. But the facilities were not distributed equally among all talukas in study area. There is disparity in the provisions of health facilities in different talukas of Karwar district. And even in case of rural and urban composition in relation to health infrastructure there is differentiation, where as health infrastructure are well developed in Urban taluka places compared to rural areas of Karwar district. Hence, Government should give priority to bring about equality in distribution of health infrastructure facilities in different talukas of karwar district and also it must concentrate to increase health infrastructure facilities in rural areas of it to view the good health status of population.

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**Table- 1 : Beds in government hospitals in karwar district**

Taluka	1998-99	2000-01	2005-06	2009-10
Ankola	8 (1.30)	50 (5.43)	50 (5.43)	50 (5.15)
Bhatkal	45 (7.28)	50 (5.43)	50 (5.43)	100 (10.31)
Haliyal	70 (11.33)	80 (8.70)	80 (8.70)	80 (8.25)
Honnavar	21 (3.40)	50 (5.43)	50 (5.43)	50 (5.15)
Karwar	300 (48.54)	400 (43.49)	400 (43.49)	400 (40.24)
Kumata	31 (5.02)	50 (5.43)	50 (5.43)	50 (5.15)
Mundagod	6 (0.97)	30 (3.26)	30 (3.26)	30 (3.09)
Siddapur	30 (4.85)	30 (3.26)	30 (3.26)	30 (3.09)

Sirsi	57 (9.22)	100 (10.88)	100 (10.88)	100 (10.31)
Supa (Joida)	20 (3.24)	50 (5.43)	50 (5.43)	50 (5.15)
Yallapur	30 (4.85)	30 (3.26)	30 (3.26)	30 (3.09)
<b>District</b>	<b>618</b> <b>(100.00)</b>	<b>920</b> <b>(100.00)</b>	<b>920</b> <b>(100.00)</b>	<b>970</b> <b>(100.00)</b>

Source: District Statistical Glance.

Note : Figures in bracket denote percentage.

**Table- 2: Primary Health Centres (PHCs) in Karwar District**

Taluka	1990-91	1995-96	2000-01	2005-06	2009-10
Ankola	3 (8.33)	4 (7.27)	4 (6.90)	4 (6.78)	5 (6.02)
Bhatkal	3 (8.33)	4 (7.27)	4 (6.90)	4 (6.78)	5 (6.02)
Haliyal	2 (5.56)	6 (10.91)	7 (12.07)	7 (11.87)	7 (8.43)
Honnavar	5 (13.90)	8 (14.55)	8 (13.79)	8 (13.56)	9 (10.84)
Karwar	3 (8.33)	5 (9.09)	6 (10.34)	6 (10.17)	13 (15.66)
Kumata	4 (11.11)	5 (9.09)	5 (8.62)	5 (8.47)	6 (7.23)
Mundagod	3 (8.33)	4 (7.27)	4 (6.90)	4 (6.78)	6 (7.23)
Siddapur	3 (8.33)	4 (7.27)	5 (8.62)	5 (8.47)	6 (7.23)
Sirsi	4 (11.11)	7 (12.73)	7 (12.07)	7 (11.87)	10 (12.05)
Supa (Joida)	2 (5.55)	3 (5.46)	3 (5.17)	4 (6.78)	7 (8.43)
Yallapur	4 (11.11)	5 (9.09)	5 (8.62)	5 (8.47)	9 (10.84)
<b>District</b>	<b>36</b> <b>(100.00)</b>	<b>55</b> <b>(100.00)</b>	<b>58</b> <b>(100.00)</b>	<b>59</b> <b>(100.00)</b>	<b>83</b> <b>(100.00)</b>

Source: District Statistical Glance.

Note : Figures in bracket denote percentage.

**Table- 3 : Beds in Primary Health Centres (PHCs) in Karwar District**

Taluka	1990-91	1995-96	2000-01	2005-06	2009-10
Ankola	18 (7.83)	24 (6.90)	24 (6.15)	24 (6.74)	24 (6.56)
Bhatkal	22 (9.56)	28 (8.05)	24 (6.15)	24 (6.74)	24 (6.56)
Haliyal	12 (5.22)	36 (10.34)	42 (10.77)	42 (11.80)	42 (11.47)
Honnavar	30 (13.04)	48 (13.79)	48 (12.31)	48 (13.48)	48 (13.11)
Karwar	18 (7.83)	30 (8.62)	36 (9.24)	36 (10.11)	36 (9.83)
Kumata	34 (14.78)	40 (11.49)	30 (7.69)	30 (8.43)	30 (8.20)
Mundagod	18 (7.83)	24 (6.90)	48 (12.31)	24 (6.74)	30 (8.20)



Siddapur	18 (7.83)	24 (6.90)	24 (6.15)	30 (8.43)	30 (8.20)
Sirsi	24 (10.43)	46 (13.21)	42 (10.77)	44 (12.36)	42 (11.47)
Supa(Joida)	12 (5.22)	18 (5.17)	42 (10.77)	24 (6.74)	30 (8.20)
Yallapur	24 (10.43)	30 (8.62)	30 (7.69)	30 (8.43)	30 (8.20)
<b>District</b>	<b>230</b> <b>(100.00)</b>	<b>348</b> <b>(100.00)</b>	<b>390</b> <b>(100.00)</b>	<b>356</b> <b>(100.00)</b>	<b>366</b> <b>(100.00)</b>

Source: District Statistical Glance.

Note : Figures in bracket denote percentage.

**Table- 4 : Drug shops in Karwar District**

Taluka	1993-94	1999-00	2005-06	2009-10
	Drug Shops	Drug Shops	Drug Shops	Drug Shops
Ankola	6 (5.94)	13 (5.14)	16 (5.16)	19 (5.62)
Bhatkal	15 (14.85)	27 (10.67)	22 (8.39)	24 (7.10)
Haliyal	15 (14.85)	22 (8.70)	38 (12.26)	41 (12.13)
Honnavar	11 (10.89)	33 (13.04)	41 (13.23)	41 (12.13)
Karwar	12 (11.88)	40 (15.81)	45 (14.52)	47 (13.91)
Kumata	7 (6.93)	33 (13.04)	35 (11.29)	38 (11.24)
Mundagod	4 (3.96)	8 (3.16)	10 (3.23)	16 (4.73)
Siddapur	4 (3.96)	10 (3.96)	16 (5.16)	16 (4.73)
Sirsi	22 (21.79)	58 (22.92)	74 (23.87)	82 (24.26)
Supa (Joida)	1 (0.99)	3 (1.19)	2 (0.65)	3 (0.89)
Yallapur	4 (3.96)	6 (2.37)	11 (3.55)	11 (3.25)
<b>District</b>	<b>101 (100.00)</b>	<b>253 (100.00)</b>	<b>310 (100.00)</b>	<b>338 (100.00)</b>

Source: District Statistical Glance.

Note : Figures in bracket denote percentage.