CHAPTER:4: DATA ANALYSIS & INTERPRETATIONS OF THE RESEARCH STUDY

CHAPTER: 4: DATA ANALYSIS & INTERPRETATIONS OF THE RESEARCH STUDY DETAILED CONTENTS AT A GLANCE

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CHAPTER: 4:

DATA ANALYSIS & INTERPRETATIONS OF THE RESEARCH STUDY EXECUTIVE SUMMARY OF CHAPTER NUMBER - FOUR:

This chapter, which is titled "Data Analysis and Interpretations of the Research Study," makes an effort to present research results based on the analysis and interpretation of the primary data that was gathered through the use of a structured, non-disguised questionnaire that was filled out by the villagers living in rural areas of the Vadodara district in Gujarat. The research issue and the goals of the present research study were taken into consideration by the researcher. The data gathered from the replies produced by the questionnaire approach were examined for this study. In addition to preparing demographic profiles of the respondents based on selected variables like age, educational attainment, occupation, annual family income, etc., information was sought on the topics of Accessibility, Availability, Affordability, Awareness, Environment, Community Engagement, Infrastructure, Preferences, and Work Culture in relation to Primary Health Care centres. The qualitative components, such as stakeholder preferences and satisfaction with the services provided by primary health centres, have also been highlighted by the researcher. The graphical representation of the data and information gained during the main data collection for the study attests to the researcher's comprehensive investigation of the data using numerous statistical methods, including percentages, averages, and frequency distribution. The researcher used SPSS-21 version statistical software and Microsoft Excel to examine the data. The amount and quality of the analyses' findings are noteworthy. It can be of great significance in understanding the healthcare scenario in the rural Vadodara district in Gujarat. The data collected will prove to be a significant contribution to the policymakers of rural health. Also, the analysis based on the data will open avenues for other researchers to look into other related aspects of Primary Health Centres.

CHAPTER:4:

DATA ANALYSIS & INTERPRETATIONS OF THE RESEARCH STUDY

4.0: INTRODUCTION:

As also said in other chapters, the collection of the primary data has attempted to analyze, classify, interpret and report the results using SPSS 21.0-Windows. The collected preliminary data were tabulated, analyzed and interpreted, giving ways to several developments, which have been demonstrated in tabular form below. The figures mentioned in parenthesis suggest the percentages of PHCs users. The term users mean the stakeholders of the Primary Health Centres who avail their services.

4.1: PROFILE OF TALUKA WISE RESPONSES RECEIVED:

Table No. 4.1 shows that a total of 650 responses were received from the eight talukas (Dabhoi, Desar, Karjan, Padra, Savli, Waghodia, Vadodara rural and Shinor) of Vadodara district.

Table No: 4.1: Taluka Wise Responses Received:

Taluka	Village	Responses
Dabhoi	Gamdi	2
	Anguthan	2
	Sathod	2
	Simaliya	32
	Motipura	1
	Sunvalja	2
	Karvan	2
	Halipura	2
	Tharvasa	2
	Pisai	2
	Kanayada	2
	Shirola	2
	Shankarpura	2
	Total	55
Karjan	Pura	3
	Fatepur	1
	Fajalpur	4
	Vemardi	2
	Ganpatpura	1
	Ananshtu	1
	Samtabad	1
	Dhavat	1
	Gandhara	4
	Pachiyapura	2
	Urad	1
	Methi	2
	Simli	1
	Kothav	4
	Bamangam	2
	Anakhi	12
	Sayar	6

	Total	48
Desar	Valavav	5
	Varsada	4
	Jambu Goral	5
	Desar	5
	Chhalier	10
	Vaghanu Muvadu	5
	Vachchhesar	3
	Tansiya	6
	Bhila	5
	Bhuval	2
	Total	50
Padra	Anti	1
	Abhol	1
	Mujpur	34
	Sadhi	5
	Jalapur	6
	Chansad	9
	Sejakuva	2
	Somjipura	8
	Vishrampura	6
	Darapura	6
	Kotna	21
	Kalyankui	10
	Mobha	4
	Karkhadi	2
	Rajupura	1
	Gavasad	1
	Vasnaref	1
	Ambada	1
	Vadu	1
	Total	120
Savli	Dhanora	4
	Samlaya	6
	Poicha	2
	Tundav	16
	Bhadarva	9
	Karachiya	3
	Gothada	12
	Javla	12
	Kamalpura	12
	Vakaner	3
	Ranjitnagar	1
	Total	80
Waghodia	Amodar	11
	Jarod	13
	Antoli	10
	Goraj	13
	Nimeta	1
	Ganpatpura	2
	Total	50
Vadodara Gramin	Varnama	11
	Kelanpur	10

	Siswa	28
	Koyali	28
	Dhanora	14
	Nandesari	1
	Rayaka	1
	Khatamba	6
	Dumad	5
	Angadh	6
	Vasana-Kotariya	5
	Hingalot	5
	Intola	5
	Ankodiya	19
	Sherkhi	11
	Karachiya (Vadodara)	13
	Ajod	10
	Padmala	5
	Choranda	2
	Sokhda	7
	Total	192
Shinor	Satisana	5
	Segva	5
	Anandi	5
	Surasamal	5
	Sinor	5
	Mandva	4
	Mindhol	5
	Kukas	3
	Tarva	7
	Bithali	6
	Sadhali	5
	Total	55

Source: FieldWork

This research study has covered 105 villages from the eight talukas (Dabhoi, Desar, Karjan, Padra, Savli, Waghodia, Vadodara rural and Shinor) of the Vadodara district. The research study covers rural areas, including Primary Health Centers (PHCs) facilities. Out of the total of 650 responses, the researcher received 55 responses from Dabhoi, 50 responses from Desar, 48 from Karjan, 120 from Padra, 80 from Savli, 50 from Waghodia, 192 replies from Vadodara rural and 55 responses from Shinor respectively.

4.2: DEMOGRAPHIC PROFILE OF SELECTED PRIMARY HEALTH CENTERS (PHCs) USERS:

The researcher has conducted research keeping in mind the rural population from selected rural areas/villages of the Vadodara district in Gujarat. The researcher has provided a demographic as well as quantitative data profile in terms of Qualifications, Age and Monthly Income as follows:

Table No. 4.2: Demographic Profile of the Respondents:

Parameters		Responses	Percentage
	Below 30 Years	141	21.7
Age (In Venus)	31 to 50 Years	335	51.5
Age (In Years)	50 Years and Above	174	26.8
	Total	650	100
	Male	547	84.2
Gender	Female	103	15.8
	Total	650	100
	No Formal Education	83	12.8
	Primary	184	28.3
Educational	12th Pass	224	34.5
Qualifications	Graduation	131	20.2
	Post-Graduation	28	4.3
	Total	650	100
	Farmer	260	40
	Trader	97	14.9
Occupation	Home Maker/House Wife	93	14.3
Occupation	Student	49	7.5
	Service	151	23.2
	Total	650	100
	Below Rs. 10,000	199	30.6
Monthly Family	Rs. 10,001 to Rs. 20,000	199	30.6
Monthly Family Income	Rs. 20,001 to Rs. 30,000	105	16.2
Income	Rs. 30,001 and Above	147	22.6
	Total	650	100

Source: Field Work

Table No. 4.2 shows the Demographic profile of the selected respondents. Out of the total respondents, half were in the age group of 31 to 50 years of male respondents, 84.2 per cent used rural Primary Health Centers (PHCs), and more than the female respondent, 15.8 per cent. Considering education, it has been observed that 28.3 per cent of respondents possess only primary education, 12.8 per cent of respondents have no Formal Education, 34.5 per cent of respondents have qualified HSC, 20.2 per cent possess a graduation degree, and only a handful number of respondents possess a post-graduation Degree. Considering occupation, Mix responses were received from people of different professions.

Regarding occupation, 40 per cent were farmers, followed by service-going people at 23.2 per cent, and 14.3 per cent were homemakers/housewife. Traders and students were minimum in numbers. The majority of respondents, i.e. 61.2 per cent, had a Monthly family income of Less than Rs. 20,000.

4.3: AWARENESS, ACCESSIBILITY AND AVAILABILITY OF PHC:

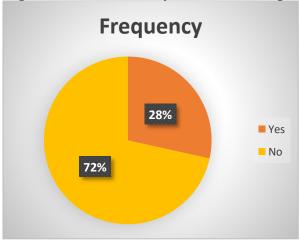
Table No. 4.3: PHC Available in the Village:

Response	Frequency	Per cent
Yes	185	28.5
No	465	71.5
Total	650	100.0

Source: FieldWork

Table 4.3 shows that out of 650 respondents, 71.5 per cent of respondents visit PHCs available in the nearest Village, and 28.5 per cent reported that the PHCs facility is available in their Village.

Figure No. 4.1 Availability of PHCs in Villages



Only eight villages have the facilities of PHCs, and the rest of the people have to visit the nearest Village for PHCs. Of the total respondents, 185 agreed that they have the Primary Health Centers (PHCs) facility in their Village, and 465 respondents accepted that there were non-availability Primary Health Centers (PHCs) in their respective villages.

Table No. 4.4: Nearby Village for Availing Services of PHC:

Response	Frequency	Per cent
Yes	470	72.3
No	180	27.7
Total	650	100.0

Source: FieldWork

Table 4.4 shows that 72.3 percent of respondents were compelled to visit the nearby Village to avail of the services of PHCs, and facilities helped only 27.7 per cent of the respondents in their Village.

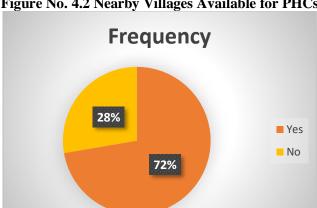


Figure No. 4.2 Nearby Villages Available for PHCs

Out of the total respondents, 470 have to visit nearby Villages for PHCs services as there is nonavailability of the PHC in their Village, and 180 respondents have the PHCs in their Village.

Table No. 4.5: Responses Received Based on PHC:

Sr. No.	Name of PHC	Frequency	Per cent	Sr. No.	Name of PHC	Frequency	Per cent
1	Sathod	21	3.2	22	Methi	15	2.3
2	Samlaya	9	1.4	23	Chandod	9	1.4
3	Poicha	14	2.2	24	Mobha	44	6.8
4	Tundav	28	4.3	25	Choranda	16	2.5
5	Bhadarva	13	2	26	Valan	4	0.6
6	Mujpur	34	5.2	27	Handod	12	1.8
7	Shimali	24	3.7	28	Sadhali	17	2.6
8	Sinor	14	2.2	29	Sandhasal	5	0.8
9	Vejpur	14	2.2	30	Pandu	5	0.8
10	Desar	16	2.5	31	Dabka	15	2.3
11	Shihora	10	1.5	32	Waghodiya	19	2.9
12	Karvan	6	0.9	33	Ranoli	5	0.8
13	Kelanpur	16	2.5	34	Thuvavi	19	2.9
14	Aasoj	5	0.8	35	Karkhadi	2	0.3
15	Anagadh	17	2.6	36	Asoj (Waghodiya)	13	2
16	Bhayali	5	0.8	37	Rustampura	2	0.3
17	Varnama	8	1.2	38	Goraj	15	2.3
18	Rarod	3	0.5	39	Varnama	8	1.2
19	Sadhi	10	1.5	40	Sokhda	50	7.7
20	Chansad	15	2.3	41	Koyali	78	12
21	Vadiya	12	1.8	42	Sankarda	3	0.4
Total					650	100	

Source: Field Work

Table 4.5 shows that out of the total responses, 650 there were 44 Primary Health Centers (PHCs) covered under the research study. The highest number of responses have been received under the Koyli Primary Health Centers (PHCs), which was 12 per cent of the total responses received, followed by Sokhda Primary Health Centers (PHCs), which was 7.7 per cent and Mobha Primary Health Centers (PHCs) which was 6.8 per cent respectively. On the other hand, the lowest number of responses have been received under the Primary Health Centers and Nimeta Primary Health Centers (PHCs).

Table No. 4.6: Villages Covered under PHC:

Villages Covered under PHC	Frequency	Per cent
Three or more Villages	650	100
Total	650	100.0

Source: FieldWork

Table No. 4.6 shows that there are more than three villages covered under the PHCs. Almost all the respondents gave their views regarding the coverage of the PHCs, and their responses show that more than three villages are covered under the PHCs.

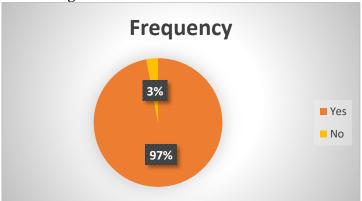
Table No. 4.7: PHC is Located at a Convenient Place in All Villages:

Responses	Frequency	Per cent
Yes	631	97.1
No	19	2.9
Total	650	100.0

Source: FieldWork

From Table 4.7, Out of a total of 650 respondents, 97.1 respondents opined that "Rural PHCs are at the Convenient place where people can get medical facilities very easily".

Figure No. 4.3 Convenient Place of PHC



On the other hand, only 2.9 per cent of people opined that "PHCs are not located at the convenient places, so people are struggling to get the proper medical care facility".

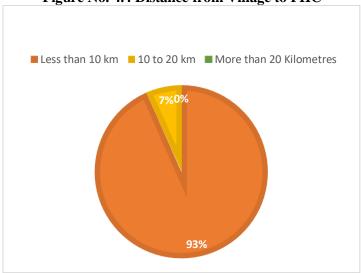
Table No. 4.8: Distance from Your Village to Reach PHCs:

Distance	Frequency	Per cent
Less than 10 km	607	93.4
10 to 20 km	43	6.6
More than 20 Kilometres	0	0
Total	650	100.0

Source: FieldWork

From the above-given Table No. 4.8, Out of a total of 650 respondents, 607 travelled for less than 10 km to reach the PHCs.

Figure No. 4.4 Distance from Village to PHC



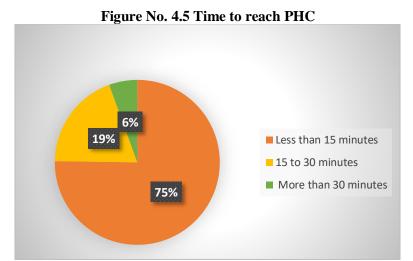
From the above-given Table No. 4.8, Out of a total of 650 respondents, 607 travelled for less than 10 km to reach the PHCs. 6.6 per cent of people had to visit far-off PHCs owing to the unavailability of PHCs in their Village.

Table No. 4.9: Time to Reach PHCs:

Time	Frequency	Per cent
Less than 15 minutes	489	75.2
15 to 30 minutes	125	19.2
More than 30 minutes	36	5.6
Total	650	100.0

Source: FieldWork

In the given Table No. 4.9, Out of a total of 650 respondents, 489 respondents reached the PHCs within 15 minutes from their Village,



There are total 125 respondents arrived at the PHCs within 15-30 minutes from their Village, and 36 respondents came to the PHCs more than 30 minutes as the more distance is found from their villages.

Table No. 4.10: Doctors/Specialists visit at PHCs:

Sr.	Specialists	Always	Visit once	Do not visit	Total
No.		available	in a Week	At All	(Percentage)
01	The Gynaecologist	152	446	52	650
		(23.4%)	(68.6%)	(8%)	(100%)
02	The Eye Specialist	0	118	532	650
			(18.2%)	(81.8%)	(100%)
03	The Dentist	9	35	606	650
		(1.4%)	(5.4%)	(93.2%)	(100%)

Source: FieldWork

Figure No.4.6: Doctors/Specialists visit at PHCs **Chart Title** 100.00% 93.20% 90.00% 81.80% 80.00% 68.60% 70.00% 60.00% 50.00% 40.00% 30.00% 23.40% 18.20% 20.00% 8% 5.40% 10.00% 1.40% 0 0.00% Gynaecologist Eye Specialist Dentist ■ Always available ■ Visit once in a week ■ Do not visit at all

From given Table 4.10, Out of a total of 650 respondents, 92 per cent of respondents got the facilities of a Gynaecologist in the PHCs in their Village, and 8 percent of respondents did not receive any Gynaecologist facilities at the PHCs. 18.2 per cent of respondents received treatment from Eye

Specialists in PHCs, whereas 81.8 per cent did not receive any eye check-up assistance in the PHCs. Almost 93.2 per cent of respondents thought there was no availability of the Dentist in the rural PHCs, and only 6.8 per cent of respondents have received the facilities of the Dentist in the PHCs.

4.4: FREQUENCY DISTRIBUTION OF AVAILABILITY OF PRIMARY HEALTH CENTERS (PHCs) IN THE VILLAGES:

In Table 4.11, 96.5 per cent of people were aware of the rural PHCs and have availed of the PHCs Services. In addition, 97.1 per cent of respondents were knowledgeable about the PHCs services provided by the nearby Village and visited nearby villages for PHCs services, and 98 per cent of people found that rural PHCs are situated at convenient places.

Table No. 4.11: Availability of Primary Health Centre in Your Village or Nearby Village (Appropriate option as I know, I have availed Services of PHCs, and I have not availed Services of PHCs):

Sr.	Statements	I Know	I have	I have	Total
No.			Availed	not	(Percentage)
			Services	Availed	
			of PHCs	Services	
				of PHCs	
01	Primary Health Centre (PHC) is available in	256	371	23	650
	Village	(39.4%)	(57.1%)	(3.5%)	(100%)
02	PHC is available at nearby place to my Village	254	377	19	650
		(39.1%)	(58.0%)	(2.9%)	(100%)
03	The location of PHC is convenient	262	375	13	650
		(40.3%)	(57.7%)	(2.0%)	(100%)
04	PHC provides good medical services	252	378	20	650
		(38.8%)	(58.2%)	(3.1%)	(100%)
05	PHC provides medical treatment at low price	275	357	18	650
		(42.3%)	(54.9%)	(2.8%)	(100%)
06	Doctors are available at PHC	267	371	12	650
		(41.1%)	(57.1%)	(1.8%)	(100%)
07	Other Paramedical Staff is available at PHC	292	350	12	650
		(44.9%)	(53.8%)	(1.3%)	(100%)

Source: FieldWork

Out of the Total 650 respondents, 252 know about the PHCs best practices, and 378 respondents have used the best medical services offered by the PHCs. 97.2 per cent of respondents are aware of the low-price policy of rural PHCs for medical facilities. 98.2 per cent of respondents were in the opinion of regular Doctor's Availability at PHCs and 98.7 percent of the respondents accepted the continued availability and support of the Paramedical Staff at PHCs. Nearly 17.4 per cent of the people not availed of the services provided by the PHCs.

4.5: FREQUENCY DISTRIBUTION OF OPINIONS OF USERS FOR DIFFERENT CRITERIA RELATED TO PRIMARY HEALTH CENTRES (PHCs):

4.5.1: Frequency Distribution of Rural Primary Health Centres (PHCs) with Regards to Accessibility:

Table 4.12 shows that 98 per cent of the respondents have easy access to the PHCs. In addition, 96.9 per cent of the respondents accepted that the PHCs are at a convenient location with adequately structured.

Table No. 4.12: Estimation for selected criteria of Rural Primary Health Centres(PHCs) with Regards to Accessibility:

Sr.	Statements		Res	sponses re	ceived	·	
No.			{(Freq	uency) Per	rcentage}		
	Accessibility (ACC)	SD	DA	NO	AG	SA	Total
01	I can easily visit the PHC of Village	0	4	2	368	276	650
		U	(0.6%)	(0.3%)	(56.6%)	(42,5%)	(100%)
02	The PHC is available at convenient	4	8	8	318	312	650
	location in our Village	(0.6%)	(1.2%)	(1.2%)	(48.9%)	(48.0%)	(100%)
03	The medical services are available to all	2	6	13	318	311	650
		(0.3%)	(0.9%)	(2.0%)	(48.9%)	(47.8%)	(100%)
04	The medical services are available to all	0	7	16	329	298	650
	irrespective of income of people	U	(1.1%)	(2.5%)	(50.6%)	(45.8%)	(100%)
05	The medical services are available to all	0	4	15	319	312	650
	irrespective of Gender of Patients	U	(0.6%)	(2.3%)	(49.1%)	(48.0%)	(100%)
06	The patients can easily		4	6	335	305	650
	meet/visit/approach the doctors at the	0		_			(100%)
	PHC		(0.6%)	(0.9%)	(51.5%)	(46.9%)	
07	The patients can easily		16	8	323	303	650
	meet/visit/approach the other	0	(2.5%)	(1.2%)	(49.7%)	(46.6%)	(100%)
	Paramedical Staff at the PHC		(2.5%)	(1.2%)	(47.7%)	(40.0%)	

Source: FieldWork

Ninety-six per cent of the respondents agreed that they received all the medical services at the PHCs. Ninety-six per cent of the respondents agreed with the PHCs services, which are available to all income groups in rural areas. It also shows that 97 per cent of the respondents agreed that without any gender discrimination, healthcare services had been provided at the PHCs of the Vadodara District of Gujarat State. Moreover, 98 per cent of the respondents were in the opinion of the Doctor's availability at the right time at the PHCs. Finally, 96.1 per cent of the respondents were given constant availability of Paramedical Staff of the PHCs to help the users with primary first-aid.

4.5.2: Frequency Distribution of Rural Primary Health Centers (PHCs) with Regards to Affordability:

Table 4.13 shows that 96.8 per cent of the respondents have received the cheapest medical services at the PHCs.

Table No. 4.13: Estimation for selected criteria of Rural Primary Health Centres(PHCs) with Regards to Affordability:

Sr.	Statements		Res	ponses rec	eived		
No.			{(Frequ	iency) Per	centage}		
	Affordability (AFF)	SD	DA	NO	AG	SA	Total
01	The medical services provided by PHC	1	0	21	324	304	650
	is Inexpensive	(0.2%)	U	(3.2%)	(49.8%)	(46.8%)	(100%)
02	Patients have not to spent from their own pocket for availing medical services at PHC	0	12 (1.8%)	10 (1.5%)	350 (53.8%)	278 (42.8%)	650 (100%)
03	Charges for different medical services provided by PHC are as per rules that are conveyed to patients	1 (0.2%)	24 (3.7%)	10 (1.5%)	306 (47.1%)	309 (47.5%)	650 (100%)
04	Patients can easily afford to spend money to reach at the PHC	6 (0.9%)	14 (2.2%)	7 (1.1%)	308 (47.4%)	315 (48.5%)	650 (100%)
05	The patients can afford to spend money for hospitalization at the PHC	0	25 (3.8%)	9 (1.4%)	298 (45.8%)	318 (48.9%)	650 (100%)

Source: FieldWork

96.6 per cent of the respondents accepted that they no need to spend any money to availing healthcare services at the PHCs. 94.6 per cent of the respondents agreed that the PHCs were taking charge of the medical services per the rule and regulations set by the Ministry of Health and Family Welfare, Government of India. 95.9 per cent of the respondents can easily afford money to reach PHCs. It is also shown that 94.7 per cent of the respondents agreed with the pricing policy of the medical treatment, which can easily be affordable by the rural people of the Vadodara District of Gujarat State.

4.5.3: Frequency Distribution of Rural Primary Health Centers (PHCs) Regarding Availability:

Table 4.14 demonstrates that 96.6 per cent of the respondents have agreed with the Doctor's availability on their schedule.

Table No. 4.14: Estimation for selected criteria of Rural Primary Health Centres(PHCs) with

Regards to Availability:

Sr.	Statements		Re	sponses rec	eived		
No.			{(Free	quency) Per	centage}		
	Availability (AVA)	SD	DA	NO	AG	SA	Total
01	The doctors are available at PHC as per	6	14	2	323	305	650
	schedule	(0.9%)	(2.2%)	(0.3%)	(49.7%)	(46.9%)	(100%)
02	The medicines prescribed by doctors	7	10	10	283	340	650
	are available at PHC	(1.1%)	(1.5%)	(1.5%)	(43.5%)	(52.3%)	(100%)
03	Patients get all the medicines free of	1	4	10	327	308	650
	cost from the PHC	(0.2%)	(0.6%)	(1.5%)	(50.3%)	(47.4%)	(100%)
04	The laboratory of PHC offers services		1	24	214	211	650
	of testing Blood, Urine, and Sputum of	0	(0.20/)	24	314	311	(100%)
	Patients		(0.2%)	(3.7%)	(48.3%)	(47.8%)	,
05	The services of hospitalization are	0	0	0	345	305	650
	available at PHC	U	0	0	(53.1%)	(46.9%)	(100%)
06	The services of minor surgeries are	0	0	0	308	342	650
	available at PHC	U	U	U	(47.4%)	(52.6%)	(100%)
07	The Ambulance Service is available at	0	0	84	275	291	650
	PHC	0	0	(12.9%)	(42.3%)	(44.8%)	(100%)
08	The services of Laboratory				202	, i	650
	Technicians are available at PHC as	0	0	0	293	357	(100%)
	per schedule				(45.1%)	(54.9%)	
09	The services of Pharmacist are	0	0	0	298	352	650
	available at PHC as per schedule	0	0	0	(45.8%)	(54.2%)	(100%)

Source: FieldWork

95.8 per cent of the respondents accepted that they had received all types of medicines from the PHCs that the doctors of PHCs prescribed. 97.7 per cent of the respondents have agreed that they have received free medical treatment, and 96.1 per cent of the respondents have agreed with the Laboratory facilities provided by the PHCs, including Blood testing, Urine, and Sputum of Patients. All the respondents agreed with the availability of hospitalization facilities and minor surgeries available at the PHCs. It also shows that 87.1 percent of the respondents agreed with the Ambulance facilities available at the PHCs rest of the respondents have the opinion that they have not received any Ambulance services at the PHCs. All the respondents have accepted that the Pharmacist is always available at the PHCs of the Vadodara District of Gujarat State.

4.5.4: Frequency Distribution of Rural Primary Health Centers (PHCs) with Regards to Environment:

Table 4.15 shows that 92.2 per cent of the respondents have agreed that there was no water logging around the PHCs. Furthermore, all the respondents accepted that cleanliness had been maintained at the PHCs of the selected villages of the Vadodara District of Gujarat State.

Table No. 4.15: Estimation for selected criteria of Rural Primary Health Centres(PHCs) with Regards to Environment:

Sr. No.	Statements			sponses requency) Pe			
	Environment (ENV)	SD	DA	NO	AG	SA	Total
01	We do not find Water logging around	36	15	0	240	359	650
	the PHC	(5.5%)	(2.3%)	0	(36.9%)	(55.3%)	(100%)
02	We have clean PHC in our Village	0	0	0	313	337	650
		U	U	U	(48.2%)	(51.8%)	(100%)
03	We do not find heaps of Garbage	0	0	0	351	299	650
	around PHC in our Village	U	U	U	(54.0%)	(46.0%)	(100%)
04	The PHC has Drainage facilities	0	0	0	356	294	650
		U	U	U	(54.8%)	(45.2%)	(100%)
05	The people in Village are having jobs	21	26	0	292	311	650
	for their survival	(3.2%)	(4.0%)	U	(44.9%)	(47.8%)	(100%)
06	The School is available in Village	0	0	0	311	339	650
		U	U	U	(47.8%)	(52.2%)	(100%)
07	PHC is Ventilated with natural lights	0	0	1	301	348	650
		U	U	(0.2%)	(46.3%)	(53.5%)	(100%)
08	The location of the PHC Noise pollution	0	0	0	298	352	650
	free	U	U	U	(45.8%)	(54.2%)	(100%)
09	The Environment of PHC is infection	0	0	0	323	327	650
	free	U	U	U	(49.7%)	(50.3%)	(100%)

Source: FieldWork

All the respondents have agreed that garbage around the PHCs has appropriately been disposed of at the dumping areas of the selected villages of the Vadodara District. Furthermore, all the respondents have agreed that they have facilities of Schools in their villages, drainage facilities at the PHCs and employment opportunities available in their respective villages. It also shows that 99 per cent of the respondents agreed with the proper ventilation and natural lights, Noise Pollution free environment and infection-free Environment available at the PHCs of the selected villages of the Vadodara District of the Gujarat State.

4.5.5: Frequency Distribution of Rural Primary Health Centers (PHCs) with Regards to Infrastructure:

Table 4.16 shows that all respondents agreed that the building was in good condition and the PHCs walls of the PHCs were painted correctly. In addition, all the respondents accepted that the windows of the PHCs were in good condition and there were no water leakages found in various rooms of PHCs.

Table No. 4.16: Estimation for selected criteria of Rural Primary Health Centres(PHCs) with Regards to Infrastructure:

Sr. No.	Statements			ponses rec uency) Per			
	Infrastructure (Physical facilities) (INF)	SD	DA	NO	AG	SA	Total
01	The building of the PHC is in good conditions	0	0	0	339 (52.2%)	311 (47.8%)	650 (100%)
02	The walls of the PHC Building are painted	0	0	3 (0.5%)	325 (50.0%)	322 (49.5%)	650 (100%)
03	The doors and windows of the PHC are in good conditions	0	0	0	314 (48.3%)	336 (51.7%)	650 (100%)
04	We do not find Water leakages in Rooms of PHC	0	0	0	297 (45.7%)	353 (54.3%)	650 (100%)
05	We find continuous Electricity Supply in PHC	2 (0.3%)	0	0	276 (42.5%)	372 (57.2%)	650 (100%)
06	The drinking water facility for patients is available at PHC	35 (5.4%)	35 (5.4%)	0	261 (40.2%)	319 (49 %)	650 (100%)
07	The toilet facility for patients is available at PHC	26 (4.0%)	46 (7.1%)	0	283 (43.5%)	295 (45.4%)	650 (100%)
08	The facility of beds for admitting patients is available at PHC	(0.3%)	0	0	332 (51.1%)	316 (48.6%)	650 (100%)
09	Facility for testing of Blood, Urine, and Sputum of the Patients is available at PHC	0	0	0	348 (53.5%)	302 (46.5%)	650 (100%)
10	The Ambulance is available at PHC to handle the emergency	0	0	0	335 (51.5%)	315 (48.5%)	650 (100%)
11	Necessary Medical equipment are available in working conditions at PHC	0	0	0	344 (52.9%)	306 (47.1%)	650 (100%)

Source: FieldWork

All the respondents agreed that the continuous supply of electricity was available at the PHCs of selected villages of the Vadodara District of Gujarat State. 89.2 per cent of the respondents believe that drinking water facilities were available in the PHCs, and 10.8 percent of the respondents have not found any water facilities at the PHCs. 88.9 per cent of the respondents agreed that sanitation facilities were available at the PHCs and 11.1 percent of the respondents did not find any sanitation facility at the PHCs. All the respondents have agreed with the availability of beds for admitting users, Laboratory Facilities, Ambulance for emergency Services and Necessary medical equipment at the PHCs of selected villages of the Vadodara District of Gujarat State.

4.5.6: Frequency Distribution of Rural Primary Health Centers (PHCs) with Regards to Work Culture:

Table 4.17 shows that all the respondents agreed that the doctors about their illness properly guided them at the PHCs. Furthermore, 91.7 per cent of the respondents have accepted that they have been recommended by the doctors correctly, and 8.3 per cent of the respondents have not been appropriately guided by the doctors available at the PHCs.

Table No. 4.17: Estimation for selected criteria of Rural Primary Health Centres(PHCs) with

Regards to Work Culture:

Sr.	Statements		Respo	nses re	ceived		
No.			{(Frequer	ncy) Pe	rcentage}		
	Work Culture (WC)	SD	DA	NO	AG	SA	Total
01	The Doctors explain about the illness to patients	0	0	0	313 (48.2%)	337 (51.8%)	650 (100%)
02	The Doctors supports patients while giving medical treatment	23 (3.5%)	31 (4.8%)	0	304 (46.8%)	292 (44.9%)	650 (100%)
03	The doctors behave politely and courteously with patients	22 (3.4%)	38 (5.8%)	0	303 (46.6%)	287 (44.2%)	650 (100%)
04	The Doctors show positive attitude while providing medical services to patients	0	0	0	310 (47.7%)	340 (52.3%)	650 (100%)
05	The Doctors take patients into confidence before testing of Blood, Urine, and Sputum of the Patients	0	0	0	312 (48.0%)	338 (52.0%)	650 (100%)
06	The Paramedical Staff explains to patients about medical treatment	33 (5.1%)	31 (4.7%)	0	289 (44.5%)	297 (45.7%)	650 (100%)
07	The Paramedical Staff are polite and courteous	2 (0.3%)	4 (0.6%)	0	298 (45.8%)	346 (53.2%)	650 (100%)
08	The Paramedical Staff satisfactorily answers to quarries of patients	0	0	0	328 (50.5%)	322 (49.5%)	650 (100%)
09	The Paramedical Staff listen to patients' suggestions	0	0	0	325 (50.0%)	325 (50.0%)	650 (100%)

Source: FieldWork

90.8 per cent of the respondents found that the doctors behave politely while treating the patients, and 9.2 per cent of the users found terrible behaviour of the doctors available at the PHCs. However, all the respondents agreed that the Doctor's attitude was positive while treating the users at the PHCs and adequately explained all the tests to the users available at the PHCs. 90.2 per cent of the respondents have accepted that they have been adequately guided about the medical treatment by the paramedical Staff, and 9.8 per cent of the respondents have not been appropriately guided by the Paramedical Staff available at the PHCs. All the respondents agreed that the behaviour of the paramedical Staff was polite and courteous. They solved all the users queries and listened to all the suggestions put by the users at the PHCs of selected villages of the Vadodara District of Gujarat State.

4.5.7: Frequency Distribution of Rural Primary Health Centers (PHCs) with Regards to Service Delivery:

Table No. 4.18 shows that all the respondents have agreed that they feel safe while taking treatment at the PHCs. In addition, respondents have agreed that the doctors and paramedical Staff were not taking any fees for the services provided by the PHCs other than case papers.

Table No. 4.18: Estimation for selected criteria of Rural Primary Health Centres(PHCs) with

Rega	ards to Service Delivery:						
Sr.	Statements		Re	sponses rece	eived		
No.			{(Free	uency) Pero	centage}		
	Service Delivery (SD)	SD	DA	NO	AG	SA	Total
01	The patients feel safe while availing	0	0	0	336	314	650
	medical treatment at PHC	U	U	U	(51.7%)	(48.3%)	(100%)
02	The Doctor, Nurse or any other PHC				294	356	650
	worker does not ask for money other	0	0	0	(45.2%)	(54.8%)	(100%)
	than for the Case Paper				(43.270)	(34.676)	
03	The Staff of PHC collect feedback	28	34	0	253	335	650
	from patients	(4.3%)	(5.3%)	U	(38.9%)	(51.5%)	(100%)
04	Doctors refers to other doctors online	14	45	1	281	309	650
	for giving medical treatment	(2.2%)	(6.9%)	(0.2%)	(43.2%)	(47.5%)	(100%)
05	The Rules, Procedure are followed by	0	0	2	327	321	650
	PHC	U	U	(0.3%)	(50.3%)	(49.4%)	(100%)
06	The Doctors asks patients to visit his	1		73	276	300	650
	own, or any other Doctor's Private	(0.2%)	0	(11.2%)	(42.5%)	(46.2%)	(100%)
	Clinic	(0.270)		(11.270)	,		
07	The Doctor examine patients using	0	0	0	270	380	650
	stethoscope	· ·	U	U	(41.5%)	(58.5%)	(100%)
08	The doctors explain about patient	0	0	0	249	401	650
	illness in his/her language	U	U	U	(38.3%)	(61.7%)	(100%)
09	the behaviour of the Nurse,				279	371	650
	Pharmacist and lab technician is	0	0	0	(42.9%)	(57.1%)	(100%)
	polite and courteous				(42.570)	` ′	
10	PHC staff wears the hygienic gloves	0	0	0	292	358	650
		U	U	0	(44.9%)	(55.1%)	(100%)
11	Post Medical Treatment is explained	0	0	0	331	319	650
	by Doctors to patients		U	J	(50.9%)	(49.1%)	(100%)

Source: FieldWork

90.4 per cent of the respondents have accepted that the feedback has been collected from the users after the treatment received at the PHCs. 9.6 per cent of the respondents did not receive any feedback from the PHCs of selected Villages of the Vadodara District of Gujarat State. 90.7 per cent of the respondents agreed that the doctors were taking the help of other doctors online for medical treatment. 9.1 per cent of the respondents believed that the doctors were not taking any help from other doctors via online mode. All the respondents agreed that rules were followed adequately at the PHCs. 88.7 per cent of the respondents agreed that the doctors ask users to visit their clinic or another Doctor's clinic, while 11 per cent did not agree. All the respondents agreed that they had been appropriately guided by the doctors about their illness in the local language. Doctors used stethoscopes for examining patients, and Staff of the PHCs used gloves for the treatment. All the respondents were accepted about the post-medical treatment adequately provided by the doctors of PHCs.

4.5.8: Frequency Distribution of Rural Primary Health Centers (PHCs) with Regards to Community Engagement:

Table 4.19 shows that 52.9 percent of the respondents strongly agreed that the timely meetings were organized by the PHCs staff with Sarpanch and local people. Moreover, 52.5 per cent of the Respondents strongly agreed that the doctors and paramedical Staff were giving a presentation in the Village about health awareness.

Table No. 4.19: Estimation for selected criteria of Rural Primary Health Centres(PHCs) with

Regards to Community Engagement:

Sr.	Statements		Respo	nses re	ceived		
No.			{(Frequer				
	Community Engagement (CE)	SD	DA	NO	AG	SA	Total
01	The Staff of PHC organizes meeting with the Village Sarpanch and community	0	0	0	344 (52.9%)	306 (47.1%)	650 (100%)
02	The Staff of PHC give presentations in Village about Health/Medical issues	0	0	0	309 (47.5%)	341 (52.5%)	650 (100%)
03	The Staff of PHC visit families in the villages to give advice about precautions for maintaining good health	0	0	0	303 (46.6%)	347 (53.4%)	650 (100%)
04	The Staff of PHC show Poster to inform people of Village about good health.	0	0	0	288 (44.3%)	362 (55.7%)	650 (100%)
05	The Staff of PHC train people of Village to develop awareness about medical issues	0	0	0	310 (47.7%)	340 (52.3%)	650 (100%)
06	The Staff of PHC give health education to children in School of Village	47 (7.2%)	24 (3.7%)	0	276 (42.5%)	303 (46.6%)	650 (100%)
07	The Staff of PHC organizes health camps	0	0	0	308 (47.4%)	342 (52.6%)	650 (100%)
08	The Staff of PHC go to Gram Panchayat meetings to make people aware about health issues	0	0	0	324 (49.8%)	326 (50.2%)	650 (100%)
09	The Staff of PHC collect feedback from people of Village on services provided by PHC	0	0	0	311 (47.8%)	339 (52.2%)	650 (100%)
10	The Staff of PHC meets Mahila Mandals to develop awareness on health issues	0	0	0	319 (49.1%)	331 (50.9%)	650 (100%)
11	The Staff of PHC assesses the health need of the people of the Village	0	0	0	309 (47.5%)	341 (52.5%)	650 (100%)
12	Health care Centre organizes free medical check-ups in Village	0	0	0	292 (44.9%)	358 (55.1%)	650 (100%)

Source: FieldWork

53.4 per cent of the respondents strongly agreed with the Doctor's visit at the families of rural people and explaining the medical precautions. 55.7 per cent of the respondents strongly agreed, and 44.3 per cent of the respondents agreed that the PHCs doctors were taking the help of posters for health awareness. 52.3 per cent of the respondents strongly agreed, and 47.7 per cent agreed that the PHCs staff were helping rural people to be aware of the medical issues.

46.6 per cent of the respondents strongly agreed that the PHCs staff were providing health education to their children in the School of Village, and 10.9 percent of the respondents disagreed. 52.6 per cent of the respondents strongly agreed, and 47.4 per cent agreed that the PHCs of selected villages of the Vadodara district of the Gujarat State organized the medical camp. 50.2 per cent of the respondents strongly agreed, and 49.8 per cent agreed that the PHCs staff were taking part in Gram Panchayat Meeting and were aware of the health and medical issue.

52.2 per cent of the respondents strongly agreed, and 47.8 per cent of the respondents agreed that the PHCs staff were taking feedback from the users about the medical treatment provided at the PHCs. 50.9 per cent of the respondents strongly agreed, and 49.1 per cent agreed that PHCs regularly met at the Mahila Mandal for medical awareness among women in rural areas. 55.1 per cent of the respondents strongly agreed, and 44.1 per cent agreed that PHCs were organizing free medical camps in rural areas.

4.5.9: Frequency Distribution of Rural Primary Health Centers (PHCs) with Regards to Perception for the use of PHC Services:

Table 4.20 shows that 49.5 per cent of the respondents strongly agreed that they visited PHCs when the first symptoms of diseases were found and 9 percent of the respondents did not see the PHCs when they found the first symptoms of the conditions.

Table No. 4.20: Estimation for selected criteria of Rural Primary Health Centres(PHCs) with Regards to Perception for use of PHC Services:

Sr. No.	Statements		Respon {(Frequent		ceived rcentage}		
	Perception for use of PHC Services (PER)	SD	DA	NO	AG	SA	Total
01	People visit the PHC when the first symptoms of dieses arise	12 (1.8%)	47 (7.2%)	0	269 (41.4%)	322 (49.5%)	650 (100%)
02	People visit PHC when my disease is in its advanced stage	0	0	0	322 (49.5%)	328 (50.5%)	650 (100%)
03	People understand that medication should be continued as long as recommended by PHC	0	0	0	313 (48.2%)	337 (51.8%)	650 (100%)
04	People follow the advice given by PHC Doctors and Paramedical Staff	0	0	0	283 (43.5%)	367 (56.5%)	650 (100%)
05	People accept advice of Doctor at PHC on prevention of medical illness	0	0	0	309 (47.5%)	341 (52.5%)	650 (100%)
06	People feel happy when doctors ask questions about my medical illness	0	(0.3%)	0	273 (42.0%)	375 (57.7%)	650 (100%)
07	People feel comfort while sitting inside PHC	0	0	0	295 (45.4%)	355 (54.6%)	650 (100%)
08	People find no overcrowding in PHC	30 (4.6%)	45 (6.9%)	0	256 (39.4%)	319 (49.1%)	650 (100%)
09	Attitude of PHC staff is positive	0	0	0	306 (47.1%)	344 (52.9%)	650 (100%)
10	People satisfied with medical treatment provided by PHC	0	0	0	296 (45.5%)	354 (54.5%)	650 (100%)
11	Hygiene and sanitary conditions of PHC are good	0	0	0	291 (44.8%)	359 (55.2%)	650 (100%)
12	People visit PHC again if medical services of PHC has improved my health	0	0	0	292 (44.9%)	358 (55.1%)	650 (100%)
13	People visit higher-level health facility if PHC's medication did not help them in becoming physically fit	0	0	0	319 (49.1%)	331 (50.9%)	650 (100%)

Source: FieldWork

It was shown that 49.5% of respondents agreed and 50.5% strongly agreed that users should see physicians when their diseases are at an advanced stage. 43.5 percent of respondents and 56.5% of respondents said they had followed the PHC staff's advice, respectively. 47.5 percent and 52.5 percent of respondents, respectively, said they followed the medical advice offered by PHCs' physicians.

42 percent and 57.7 percent of respondents, respectively, agreed that they felt satisfied when physicians inquired about their health and medical conditions. 45.4 percent and 54.6 percent of respondents, respectively, agreed that they felt at ease sitting in PHCs.

Overcrowding at the PHCs was reported by 11.5 percent of the respondents. Nonetheless, according to 88.5% of the respondents, there was no congestion at PHCs. 47.1 percent and 52.9% of respondents, respectively, agreed and strongly agreed that the PHC staff treated users with a pleasant attitude. 45.5 percent and 54.5 percent of respondents said they were happy with the medical care received at PHCs, respectively.

44.8 percent and 55.2% of respondents, respectively, agreed and strongly agreed that PHCs provide sanitary conditions. All the respondents have agreed that they will revisit PHCs for medical services if they find recovery in their health.

4.5.10: Frequency Distribution of Rural Primary Health Centers (PHCs) with Regards to Preference for PHC:

Table 4.21 shows that 48 percent of the respondents strongly agreed that they visited PHCs because the charges were reasonable at the PHCs. In addition, 51.8 per cent of the respondents strongly agreed that they saw PHCs as the quality services they provided.

Table No. 4.21: Estimation for selected criteria of Rural Primary Health Centres(PHCs) with Regards to Preference for PHC:

Sr.	Statements			onses re			
No.		+	(Frequ	ency) Pe	ercentage}		
	Preference for PHC (PRF)	SD	DA	NO	AG	SA	Total
01	People visit PHC as the charges of	0	0	0	338	312	650
	medical services are reasonable	U	U	U	(52.0%)	(48.0%)	(100%)
02	People prefer to get treatment from PHC	0	0	0	313	337	650
	as quality of medical service is acceptable	U	U	U	(48.2%)	(51.8%)	(100%)
03	People visit PHC as health personnel				332	318	650
	remain available to offer services to	0	0	0	(51.1%)	(48.9%)	(100%)
	community				(31.170)	(40.770)	
04	The PHC is preferred due to availability	0	0	0	307	343	650
	of medicine/drugs			O	(47.2%)	(52.8%)	(100%)
05	People visit the PHC due to good	0	0	0	298	352	650
	behaviour of health staff	0	Ů	0	(45.8%)	(54.2%)	(100%)
06	People have faith in doctors and health	0	0	0	294	356	650
	staff of the PHC	0	Ů	0	(45.2%)	(54.8%)	(100%)
07	People prefer to get treatment form PHC	0	0	0	287	363	650
	as response of doctors is positive	0	U	U	(44.2%)	(55.8%)	(100%)
08	People prefer to visit PHC as there is not	0	0	0	311	339	650
	much waiting time	0	U	U	(47.8%)	(52.2%)	(100%)
09	People found the hygiene of PHC is	0	0	0	331	319	650
	acceptable	0	U	U	(50.9%)	(49.1%)	(100%)
10	People visit PHC as there is provision for	0	0	0	318	332	650
	heath information	U		U	(48.9%)	(51.1%)	(100%)

Source: FieldWork

51.1 percent and 48.9 percent of respondents, respectively, agreed that they often visited PHCs because physicians were constantly on hand to treat rural residents. A majority of respondents 52.8% strongly agreed and 47.2% agreed said they preferred PHCs for medical care since all the medications were readily accessible at the PHCs in the Gujarati state's Vadodara district's chosen villages. 45.8% of respondents said they frequented PHCs because of the physicians' pleasant and polite behaviour there, and 54.2% of respondents strongly agreed. The majority of respondents 54.8% strongly agreed and 45.2% agreed that they had trust in the physicians who provide medical care at PHCs. 55.8% of respondents firmly agreed that they frequented PHCs because doctors' actions were deemed to be favourable when attending to users there. There was not much of a waiting time at the PHCs for obtaining healthcare services at PHCs in selected villages in the Vadodara District of the Gujarat state, according to 52.2% of respondents who strongly agreed with this statement and 47.8% who agreed. Also, every respondent agreed that PHCs provide access to health information.

4.6: FREQUENCY DISTRIBUTION FOR OVERALL OPINIONS OF PRIMARY HEALTH CENTRES (PHCS) USERS:

Table 4.22 shows that 55.1 percent of the respondents strongly agreed, and 44.9 per cent agreed that PHCs were accessible in selected villages of the Vadodara District of Gujarat State. Furthermore, 56.3 per cent of the respondents strongly agreed, and 43.7 per cent agreed that PHCs services were easily affordable in the rural villages of the Vadodara district of the Gujarat State.

Table No. 4.22: Overall Opinion on Selected Dimensions for Rural Primary Health Centres(PHCs):

Sr.	Statements	Responses Received {(Frequency) Percentage}						
No.		SD	DA	NO	AG	SA		
01	Accessibility of PHC	0	0	0	292 (44.9%)	358 (55.1%)	650 (100%)	
02	Affordability of PHC	0	0	0	284 (43.7%)	366 (56.3%)	650 (100%)	
03	Availability of Medical Services at PHC	0	0	0	316 (48.6%)	334 (51.4%)	650 (100%)	
04	Positive Environment to use services offered by PHC	0	0	0	311 (47.8%)	339 (52.2%)	650 (100%)	
05	Physical facilities of PHC	0	0	0	318 (48.9%)	332 (51.1%)	650 (100%)	
06	Work Culture of PHC	30 (4.6%)	45 (6.9%)	0	253 (38.9%)	322 (49.5%)	650 (100%)	
07	Delivery of Medical Service at PHC	0	0	0	330 (50.8%)	320 (49.2%)	650 (100%)	
08	Community Engagement by PHC	0	0	0	314 (48.3%)	336 (51.7%)	650 (100%)	
09	Favourable Perception for PHC	0	0	0	283 (43.5%)	367 (56.5%)	650 (100%)	
10	Preference for availing medical services offered by PHC	12 (1.8%)	16 (2.5%)	0	249 (38.3%)	373 (57.4%)	650 (100%)	
11	I will recommend others to use Medical Services of PHC	20 (3.1%)	25 (3.8%)	0	320 (49.2%)	285 (43.8%)	650 (100%)	
12	Overall, I feel satisfied by services provided by PHC	0	0	0	356 (54.8%)	294 (45.2%)	650 (100%)	

Source: Field Work

Overall, 51.4% of respondents strongly agreed that all amenities were provided at the PHCs, with 48.6% agreeing. Of those polled, 52.2% were in agreement that the PHC's atmosphere encouraged them to seek medical attention, with 47.8% giving their full approval.

Overall, 51.1% of respondents strongly agreed that PHCs have the necessary Physical infrastructure, and 48.9% agreed. There is a favourable work culture at the PHCs, with 49.5% of respondents strongly agreeing and 38.9% agreeing. Results showed that 49.2% of respondents strongly agreed and 50.8% agreed that the PHCs in the villages chosen to represent the Vadodara district of Gujarat state offered high-quality medical care.

The majority of respondents (51.7%) were in agreement with the PHCs' Community involvement procedures, whereas 48.3% were in agreement. The positive opinion of PHCs was shared by 56.5% of respondents with strong agreement from the additional 43.5%. 38.3 percent and 57.4 percent of respondents agreed—strongly—that they preferred PHCs for receiving medical care.

43.8 % of respondents said they strongly agreed with this statement, and 49.2% said they would advise others to utilise the PHCs' healthcare services. Also, it was discovered that 54.8% of respondents and 45.2% of them strongly agreed that they were happy with the medical services offered by the PHCs of certain villages in the Vadodara District of Gujarat.

4.7: FREQUENCY DISTRIBUTION FOR OVERALL OPINIONS FOR BEHAVIOURAL INTENTION OF PRIMARY HEALTH CENTRES (PHCs) USERS:

Table 4.23 shows the overall opinion of behavioural intention towards PHCs of the Vadodara district of Gujarat State. Likewise, 46.5% of those polled strongly agreed, while 45.4% agreed, that they would keep using PHCs in the future. In addition, 54.6% of respondents strongly agreed, and 45.4% agreed, that they would suggest the PHCs of chosen villages in the Vadodara district of the Gujarat State to those in need of healthcare.

Table No. 4.23: Overall Opinion for Behavioural Intention Toward Rural PHCs:

Sr.	Statements			Responses Received			
No.		SD	DA	NO	AG	SA	
01	I Continue to use medical services offered by	0	0	0	295	302	650
	PHC	U	0	U	(45.4%)	(46.5%)	(100%)
02	I will recommend others to use Healthcare	0	0	0	295	355	650
	services of PHC			U	(45.4%)	(54.6%)	(100%)
03	Overall, I feel healthy and satisfied with PHC	0	0	0	314	336	650
	Services		0	U	(48.3%)	(51.7%)	(100%)

Source: Field Work

It was shown that 48.3 percent of respondents and 51.7% of respondents agree or strongly agree that they felt happy and well after receiving treatment at PHCs.

4.8: FREQUENCY DISTRIBUTION FOR OVERALL SUGGESTIONS GIVEN BY USERS OF PRIMARY HEALTH CENTRES (PHCs):

Table No. 4.24 shows overall suggestions on selected dimensions for PHCs of the Vadodara district of Gujarat State. 51.8 percent and 48.2 percent of respondents, respectively, agreed that staff members should advise users about their rights and the PHCs' operating procedures. The majority of respondents—53.7%—strongly agreed and 46.3% agreed that staff should keep an eye on the PHCs' work absenteeism rate. It was shown that 49.5% of respondents agree, and 50.5% of respondents strongly agree, that physicians should inspire and motivate their staff to provide quality medical care.

Table No. 4.24: Overall Suggestions on Selected Dimensions for Rural Primary Health Centres(PHCs):

Sr. No.	Statements	Responses Received {(Frequency) Percentage}						
110.				NO	AG SA			
01	The Staff of the PHC must keep villagers informed about their Rights	0	0	0	337 (51.8%)	313 (48.2%)	650 (100%)	
02	The Staff of the PHC should monitor work absenteeism of their Staff	0	0	0	301 (46.3%)	349 (53.7%)	650 (100%)	
03	The Staff of the PHC should encourage its Staff to deliver medical services	0	0	0	322 (49.5%)	328 (50.5%)	650 (100%)	
04	The Staff of the PHC should put more efforts to improve medical services	0	0	0	313 (48.2%)	337 (51.8%)	650 (100%)	
05	The Staff of the PHC should assess health needs of people of Village	0	0	0	299 (46.0%)	351 (54.0%)	650 (100%)	
06	The Staff of the PHC should take support of people of Village to improve infrastructure of PHC	0	0	0	295 (45.4%)	355 (54.6%)	650 (100%)	
07	The Staff of the PHC need to encourage their Staff against corruption	0	0	0	322 (49.5%)	328 (50.5%)	650 (100%)	

Source: Field Work

Results showed that 51.8% of respondents strongly agreed and 48.2% agreed that PHC staff should make greater efforts to enhance the quality of medical care provided by PHCs. In addition, 54% of respondents strongly agreed, and 46% agreed, that PHCs personnel should evaluate the health requirements of those living in rural regions. In addition, 54.6% of respondents strongly agreed, and 45.4% of respondents agreed, that the PHC staff in chosen villages in the Vadodara District of Gujarat State should enlist the support of local residents in order to upgrade the facility's infrastructure. In addition, 50.5% of those surveyed strongly agreed, while 49.5% agreed, that the primary health care centres (PHCs) in the Vadodara District of Gujarat State were free from corruption.