MILBODARILON

INTRODUCTION

It was natural to offer the major part of health services to rural population in order to compensate them for what they had missed in the past, where the rural population form 55% of the estimated population in Egypt in 1983 (Ministry of Health, 1984).

The rural health services in Egypt have greatly improved, nevertheless, since they first began in 1928 with the mobile health units, to 1938 with the comprehensive health offices, 1939 the rural social centers, 1942 rural health center, 1954 combined or community centers, 1956 comprehensive treatment units and lastly to 1962 when all the health services were taken over by the Ministry of Health. Consequently rural health services at present are delivered through different health units which consist of:

1- Rural health units:

One for every 5000 population giving all basic health services except hospitalization.

2- Rural health centers:

One for every 15,000 population with 20-30 beds as referral center for three rural health units.

Rural hospitals:

One for every 20,000 population with 30-50 beds. (Ministry of Health, 1966 & 1984).

According to Ministry of health (1984), every health unit offers all the primary, (basic), health services including:

- 1- Maternal and child health services.
- 2- Family planning.
- 3- Communicable disease control.
- 4- Environmental sanitation.
- 5- Health education.
- 6- Control and treatment of parasitic and endemic diseases.
- 7- School health services.
- 8- Curative and emergency care.
- 9- Vital registration for births and deaths.

All these services are offered in an integrated and comprehensive method through a complete health team.