

Abstract

This research has tried to explore how issues of healthcare have been addressed through policies by different regimes at the centre as well as at the sub-national level of West Bengal in India. Since healthcare is closely tied to a larger socio-economic and political system, it is a political problem, and healthcare policies are a component of a larger public policy agenda. The period chosen for the study is 1991 to 2015, which overlapped with post-liberalisation era. As a result, it would examine the changes brought about by the liberal reforms of the early 1990s in a state that had been influenced by welfarism since the time of independence.

Any discussion on healthcare policies would be considerably limited if it does not include discussions on healthcare workers, as efficient execution of policies at the ground level heavily depends on them. Different categories of healthcare workers are involved on a daily basis, providing healthcare to different sets of people. Among them the two categories chosen for the present research are the categories of nurses and *ayahs*. Although medical care is important for saving lives, but the care provided by nurses is also important for healing and rehabilitation. Untrained, semi-skilled women or *ayahs*, forming the underbelly of care, working in the informal sector, operating in both public and private spaces are increasingly becoming crucial on the face of increasing demands for more personal care. Yet, the latter category of women is not addressed in policy documents. The nurses, performing crucial caring roles are barely involved in policy making processes. Thus, their experiences and conditions, which affect healthcare delivery at the grass root level, never get heard in the ivory towers where policies are framed. This research highlights the realities of these careworkers, as without understanding them, a narrow analysis of policies would never complete the picture as to how healthcare is delivered.