INTRODUCTION
We reflect on the varied health scenarios in our country and acknowledge and accept that there are many “Indians” within “the India” and the diversities between INDIA and BHARAT pose a challenge to health equity issues—what is available in the tertiary centers in metros. Is it quite different from what is available at the primary health centers in rural parts of India?

One has to figure how one can offer the best—but at a low/reasonable cost and see that it reaches ALL the women of India and makes an impact on health indices of our nation.

We need to “innovate” and see what works for us.

We need to “implement” in novel ways—educating the masses on their right to “safe motherhood” and empowering frontline health workers to offer care in the community.

We need to study the “impact” of preventive health care on reducing the burden of many of the morbidities and mortality.

I wish to deliberate on the positive impact of the following:

- IV iron sucrose declining blood transfusions and gestational anemia
- MgSO₄ made the difference to saving lives in women with eclampsia
- Medical abortions pills made available for safe abortions
- Early detection of ectopic pregnancy saves lives
- Postplacental intrauterine contraceptive device (IUCD) insertion revisited
- Human papilloma virus (HPV) vaccination for cancer cervix
- Simpler methods for universal screening for gestational diabetes mellitus (GDM).

We always seem to think that it is someone else’s job!

My sincere appeal to all colleagues:

- Let’s do our bit as “change makers”.
- Let us help in shifting the focus to “preventing illness and promoting wellness”.
- Let us be contributory to the well-being of women in India.
- Coming together is the beginning of the “mission” and we remain together to accomplish our “vision” for making a positive difference to women’s health care in India.