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Minor Research Project

Spatial Pattern Of Health and Hygiene and Related Issues

In Suburban Mumbai



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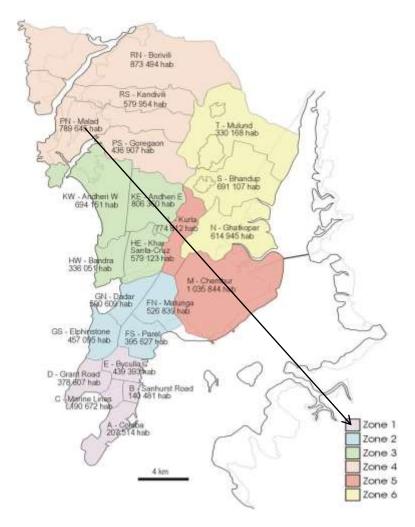
FINDINGS OF THE STUDY:

A) Slum Area (Malwani, Malad W & Nargis Dutt Nagar, Bandra W)

- The Slums studied are more vulnerable to contagious, infectious water borne diseases such as diarrohea, typhoid, hepatitis, malaria, tuberculosis, pneumonia, and dominate the morbidity pattern here.
- Some policies need to be planned in the slums for garbage collection. The point of collection centers should increase in number.
- Regular fogging is required in these congested slums especially the area next to the main drainage creek of Malwani.
- Also the creek clogged with polythene needs to be cleaned by the BMC (Bombay Municipal Corporation) especially prior to monsoons and then and there after on a regular basis.
- There exists a paramount need to inculcate Environmental consciousness at the community level.
- Slum dwellers having access to (OSD) Open Sewerage System should be sensitized about the consequences of flooding and therefore their participation by collaborating with the local body is a must for a healthy environment.

B) Hospitals in the wards H/W and P/N

- The ward H/W has a population of about 32,9952 as compared to P/N which has got three times more population figuring to about 94,34605 people
- There exists 5 Government Dispensaries for people in H/W whereas 10 dispensaries in P/N Ward.



SUGGESTIONS

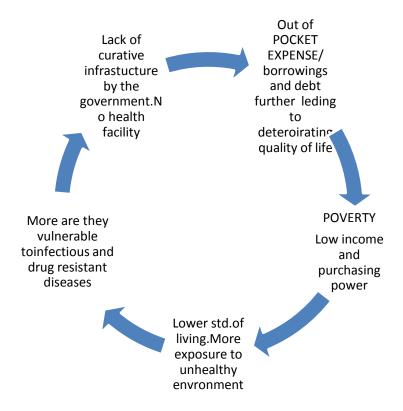
Need for Civic hospital for Curative diseases in Malwani P/N,Other than Maternity in Zone1 shown in the above map

- The population is too high and the I number of dispensaries too less. So there is an urgent need for more dispensaries
 - Although two wards have been studied in detail by the investigator ,the situation is the similar in northern suburbs
- Despite several growth oriented policies adopted by the government, there exists a widening gap. There exists economic, social and regional disparity in the health sector. More than 75% of the health infrastructure and health resources are concentrated in the core area of the city in South Mumbai.
- To improve the prevailing scenario the problem of lack of social infrastructure a **socio cultural model** needs to be adopted, where human beings are at the centre of model irrespective **of** class, caste, creed, and community.

- It's the need of the hour that policy maker frame policies where each and every one is entitled to get proper treatments, medication.
- Regional Planners should consider peripheral areas of Mumbai, (Northern suburbs are highly populous and needs the location of a health infrastructures in their vicinity.
- Affordability, Availability and Quality (AAQ) are the challenges when it comes to providing health care in slum areas. In slums of Northern Mumbai, apart from the above mentioned the other challenge by the slum-dwellers is accessibility.
- As most of the tertiary hospital and state hospitals are concentrated in Greater Mumbai, the geographical distance is created between health facility seeker and the provider. People not only from Eastern and Western suburb but also from areas having the shadow effect of Mumbai Metropolitan Region travel to KEM, Nair, J.J hospital, Kasturba Gandhi.

Final Observations (O) and Recommendations (R)

- (O)- The Central and State Government has confined themselves to Disease control and Population control programmes .
- R- The need of the hour is not just preventive care but inclusion of curative care by the state government to save the poor from vicious cycle of poverty enhancing quality of life of people who cannot afford healthcare



Vicious Circle of Health Care and Poverty by A.I.Gundagi

From the entire study ,a vicious circle can be drawn where the inadequate Government Infrastructure, Low expenditure on health care can be observed which further leads to marginalization of the economically low income group and People below povertyline.

Observations from Exit Interview.

8 out of 10 were not satisfied with some or the other aspect of the civic run and BMC hospitals. As mentioned by the respondents

- A) 50% Respondents complained about the hardships and procedures involved in government hospitals OPD SECTION.
- B) The forms are charged a minimum amount for a month, a queue to obtain the form followed by a long queue for the general practioners and doctors
- C) Rudely Behaved Ward boys,unhygienic condition of the hospital.
- D) 90% of the respondents complained about the inadequate drugs supplied by the government hospitals, The drugs prescribed by the doctors should be made available to the patients, but 1 out four drugs was provided and the rest were told to buy from outside

The availability of drugs is inadequate in all the Primary Health Centres and hospitals belonging to the government

"Right to good health is the basic fundamental right of the citizens of any country and should not be denied by any nations".

The Developed Countries of the world have insured a minimum healthcare through some health plan insured for their population.

In the First world (Capitalist) countries like U.S.A,Canada,Japan ,Australia,NewZealand ,health care is one of the important factors of a welfare state evolved under the concept of Social Security.In the Second world (Socialist) countries the state provides health care as a basic right of citizens

But sorry to say, there is no assurance of universal health care or any welfare model ensuring health for all its people in developing countries India.

Practically the government needs to intervene in the present model and assist it with micro health insurances for curative care to address the issue of affordability by the poorest of the poor

Also more spaces to be taken into account in suburban Mumbai for the development of health care infrastructure especially in pockets filled with poor and underprivileged class.

'India might not need Nuclear Reactors at this very minute in a Welfare State Model, but we definitely need Social Infrastructure to improve the *quality of life* of its people'

A very ironical situation can be observed in our country, where planning is done and redone to carve out spaces for international airports,sea links,bullet trains, for a handful of urbaniites, no doubt it adds to the cities infrastructure and charm, but no space for casualties in civic hospital and no bed availability so patients have to lie down in these hospitals. There is a need to re-think and re-visualize the development model the government is adhering to?

Whether patients in casualty needing a bed in the hospital is important or a transportation space in this so called globalization era is more important. It is we who need to analyse and conclude creating more of health care spaces for a larger section of society who is at much more needing situation than a flight passenger or a train commuter.

The main aim and focus of any development model of a country should be its Social Security in terms of "Health Care". Majority of our budget allocation should be on social infrastructure including Health and Welfare for all .

A Healthy Nation is a Wealthy Nation