



ACCESSIBILITY OF MEDICAL FACILITIES IN THE TSUNAMI AFFECTED REGIONS. NAGAPATTINAM DISTRICT, TAMILNADU

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Abstract: On 26th December 2004 the earthquake occurred near Sumatra island of Indian Ocean. The coastal areas of island, mainland, natural and man made environment are affected by natural disaster is called Tsunami. Most of the population died, injured and mentally affected because of this disaster. The Prime objectives of the post-disaster migration is health care of those people who are affected the most. The Healthcare facilities for vital to avoid mortality and morbidity in the disaster affected regions. Every individual in the region is should be provided with medical care. In such a situation, this paper tries to analyse the accessibility of medical facilities in the tsunami affected regions of Nagapattinam District, Tamilnadu. This study also tries to compare high affected and less affected region among the different categories of population. The health care practices of the coastal population is also categorize different parts. The government and Private Health Care practices are also taken into consideration to study the deprived population group and to understand the nature of approaches of different Health Care practices available to them. This study collected data information from Nagapattinam district Tamilnadu. The study is on tsunami high affected area is Vadakkupoyyur and Tsunami less affected area Prathabaramapuram. The study suggests that the health care awareness program must be implemented in the tsunami affected villages. The reason behind it is that the people are needy and poor compared to other regions. Since the people affected by the natural disaster are most vulnerable both economically and socially. Hence this set of population should be provided with free medical facilities such as diagnosis of diseases treatment of chronicle diseases and mental treatments at free of cost.

Index Terms: Vadakkupoyyur, Prathabaramapuram, Health Care practices, mental treatments, less affected, high affected.

1. INTRODUCTION

Ocean earthquake is called Tsunami. On 26th December 2004 the earthquake occurred near Sumatra island of Indian Ocean. The coastal areas of island, mainland, natural and man made environment are affected by natural disaster is called Tsunami. Most of the population died, injured and mentally affected because of this disaster. The Prime objectives of the post-disaster mitigation is health care of those people who are affected the most. The Healthcare facilities for vital to avoid mortality and morbidity in the disaster affected regions. Every individual in the region is should be provided with medical care. So that longevity of the individual's life could be protected. Both physical and mental ability are distorted when disaster take place. To avoid such distortion medical facilities are pertinent. In such a situation, this paper tries to analyse the accessibility of medical facilities in the tsunami affected regions of Nagapattinam District, Tamilnadu.

This study also tries to compare high affected and less affected region among the different categories of population. The health care practices of the coastal population is also categorized into different parts. The government and Private Health Care practices are also taken into consideration to study the deprived population group and to understand the nature of approaches of different Health Care practices available to them. This study collected data information from Nagapattinam district Tamilnadu. The study is on tsunami high affected area is Vadakkupoyyur and Tsunami less affected area Prathabaramapuram. The table shows that the five major Health Care practices they are care of pregnancy, delivery, care of new born, care of common disease, General Health Care. Healthcare practice of fish Catchers, Fish Sellers, Fisher cum Government Employees, and Others. The study used tools of percentage analysis. Total sample is 240 sample is distributed between highly affected and less affected area having 120 samples each sample or in the divided in the four categories each one is having 30 samples.

The study discusses about Health Care Practices of Fish Catchers in Nagapattinam District.

Table - 1

Health Care Practices of Fish Catchers in Nagapattinam District

Sl. No.	Practice of Health Care	Persons Treated in Hospitals					
		Highly Affected			Less Affected		
		Govt.	Private	Total	Govt.	Private	Total
1	Care of Pregnancy	11 (15)	6 (12)	17 (14)	6 (12)	7 (12)	13 (12)
2	Delivery	10 (13)	7 (15)	17 (14)	8 (15)	8 (13)	16 (15)
3	Care of New Born	10 (13)	8 (17)	17 (14)	9 (17)	9 (16)	19 (17)
4	Care of Common Disease	32 (43)	19 (39)	52 (42)	18 (35)	25 (43)	42 (38)
5	General Health Care	12 (16)	8 (17)	20 (16)	11 (21)	9 (16)	20 (18)
	Total	75 (100)	48 (100)	123 (100)	52 (100)	5,8 (100)	110 (100)

Source: Computed.

Note: Figures in parentheses denote the percentage.

The table 1 explains Healthcare practice of fish Catchers in Nagapattinam district. The table shows that the five major Health Care practice they are care of pregnancy, delivery, care of new born, care of common disease and General Health Care. The study try to compare less Tsunami affected area (Prathabaramapuram) and high Tsunami affected area (Vadakkupoyyur) with respect to the health care practice of the sample respondents the following five categories like care of pregnancy, delivery, care of new born, care of common disease, General Health Care of fish Catchers. The Healthcare practice are generally categorised as public health care and Private Health Care.

The fish Catchers in both Less Tsunami affected area (Prathabaramapuram) and highly Tsunami affected area (Vadakkupoyyur) categories are examined with the half of the sample size of 30. The table shows not only the sample but also the dependence of the sample involved in health care practices. Among the sample with respect to care of common disease in highly Tsunami affected area chose government Healthcare practice mostly compare to private Healthcare practice 43 percentage. In less Tsunami affected area choose private Healthcare practice mostly compare to government health care practice in 43 percentage.

Table- 2

Health Care Practices of Fish Sellers in Nagapattinam District

Sl. No.	Practice of Health Care	Persons Treated in Hospitals					
		Highly Affected			Less Affected		
		Govt.	Private	Total	Govt.	Private	Total
1	Care of Pregnancy	8 (18)	5 (14)	13 (16)	5 (14)	7 (17)	12 (16)
2	Delivery	7 (16)	6 (17)	13 (16)	6 (17)	9 (22)	15 (20)
3	Care of New Born	9 (20)	8 (23)	17 (21)	7 (20)	8 (19.5)	15 (20)
4	Care of Common Disease	10 (22)	9 (26)	19 (24)	8 (23)	9 (22)	17 (22)
5	General Health Care	11 (24)	7 (20)	18 (23)	9 (26)	8 (19.5)	17 (22)
	Total	45 (100)	35 (100)	80 (100)	35 (100)	41 (100)	76 (100)

Source: Computed.

Note: Figures in parentheses denote the percentage

The table 2 explains Healthcare practice of fish Sellers in Nagapattinam district. The table shows that the five major Health Care practice they are care of pregnancy, delivery, care of new born, care of common disease, General Health Care. The study try to compare less Tsunami affected area (Prathabaramapuram) and high Tsunami affected Sellers (Vadakkupoyyur) with respect to the health care practice of the sample respondents the following five categories like care of pregnancy, delivery, care of new born, care of common disease, General Health Care of fish Catchers. The Healthcare practice are generally categorised as public health care and Private Health Care.

The fish Catchers in both Less Tsunami affected area (Prathabaramapuram) and highly Tsunami affect (Vadakkupoyyur) categories are examined with the half of the sample size of 30. The table shows not only the sample but also the dependence of the sample involved in health care practices.

Table- 3

Health Care Practices of Fishers cum Government Employees in Nagapattinam District

Sl. No.	Practice of Health Care	Persons Treated in Hospitals					
		Highly Affected			Less Affected		
		Govt.	Private	Total	Govt.	Private	Total
1	Care of Pregnancy	5 (15.5)	8 (13)	13 (14)	4 (16)	9 (15)	13 (15)
2	Delivery	6 (19)	10 (16)	16 (17)	4 (16)	10 (17)	14 (17)
3	Care of New Born	5 (15.5)	9 (15)	14 (15)	6 (24)	9 (15)	15 (18)
4	Care of Common Disease	10 (31)	25 (40)	35 (37)	7 (28)	20 (34)	27 (32)
5	General Health Care	6 (19)	10 (16)	16 (17)	4 (16)	11 (19)	15 (18)
	Total	32 (100)	62 (100)	94 (100)	25 (100)	59 (100)	84 (100)

Source: Computed.

Note: Figures in parentheses denote the percentage

The table 3 explains Healthcare practice of Fishers cum Government Employees in Nagapattinam district. The table shows that the five major Health Care practice they are care of pregnancy, delivery,

care of new born, care of common disease, General Health Care. The study try to compare less Tsunami affected area (Prathabaramapuram) and high Tsunami affected area (Vadakkupoyyur) with respect to the health care practice of the sample respondents the following five categories like care of pregnancy, delivery, care of new born, care of common disease, General Health Care of fish Catchers. The Healthcare practice are generally categorised as public health care and Private Health Care.

The fish Catchers in both Less Tsunami affected area (Prathabaramapuram) and highly Tsunami affected area (Vadakkupoyyur) categories are examined with the half of the sample size of 30. The table shows not only the sample but also the dependence of the sample involved in health care practices.

Table- 4

Health Care Practices of Others in Nagapattinam District

Sl. No.	Practice of Health Care	Persons Treated in Hospitals					
		Highly Affected			Less Affected		
		Govt.	Private	Total	Govt.	Private	Total
1	Care of Pregnancy	6 (19)	8 (17)	14 (17.5)	5 (17)	9 (19)	14 (19)
2	Delivery	7 (21.5)	10 (20.5)	17 (21)	6 (22)	10 (21)	16 (21)
3	Care of New Born	6 (19)	9 (19)	15 (19)	5 (17)	8 (17)	13 (17)
4	Care of Common Disease	6 (19)	10 (20.5)	16 (20)	6 (22)	9 (19)	15 (20)
5	General Health Care	7 (21.5)	11 (23)	18 (22.5)	6 (22)	11 (24)	17 (23)
	Total	32 (100)	48 (100)	80 (100)	28 (100)	47 (100)	75 (100)

Source: Computed.

Note: Figures in parentheses denote the percentage

The table 4 explains Healthcare practice of Others in Nagapattinam district. The table shows that the five major Health Care practice they are care of pregnancy, delivery, care of new born, care of common disease, General Health Care. The study try to compare less Tsunami affected area (Prathabaramapuram) and high Tsunami affected area (Vadakkupoyyur) with respect to the health care practice of the sample respondents the following five categories like care of pregnancy, delivery, care of new born, care of common disease, General Health Care of fish Catchers. The Healthcare practice are generally categorised as public health care and Private Health Care.

The fish Catchers in both Less Tsunami affected area (Prathabaramapuram) and highly Tsunami affected area (Vadakkupoyyur) categories are examined with the half of the sample size of 30. The table shows not only the sample but also the dependence of the sample involved in health care practices.

POLICY IMPLICATIONS

This article discussed about the health care practices both private and government. These medical facilities available in the region are different from other parts of the country. The study find out that the sample with respect to care of common disease in highly Tsunami affected area chose government Healthcare practice mostly (43 percentage) compare to private Healthcare practice. In less Tsunami affected area choose private Healthcare practice mostly (43 percentage) compare to government health care practice. The fish Catchers in both Less Tsunami affected area (Prathabaramapuram) and highly Tsunami affected area (Vadakkupoyyur) categories are examined with the half of the sample size of 30. The table shows not only the sample but also the dependence of the sample involved in health care practices. The awareness of Primary Health betterments and special Healthcare facilities are recommended for the coastal villages. The study suggests that the health care awareness program must be implemented in the tsunami affected villages. The reason behind it is that the people are needy and poor compared to other regions. Since the people affected by the natural disaster are most vulnerable both economically and socially. Hence this set of population should be provided with free medical facilities such as diagnosis of diseases treatment of chronicle diseases and mental treatments at free of cost.

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