Challenges of Disaster Health Management in Jammu and Kashmir

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ABSTRACT

Despite the need of an Efficient Health Response System to various disasters, the required research has still not been carried out when it comes to Jammu and Kashmir State especially one of the seismic prone zones of India. The relevant research is still in its infancy especially in the hilly mountainous seismic prone regions of the state. This paper provides an overview of the Disaster Health Management in Jammu and Kashmir, with the motive to promote the effectiveness of Health Response for reducing Disaster related mortality.

Keywords: Disaster Health Management, Public Health System, Jammu and Kashmir, Disaster Preparedness, Health Care System.

I. INTRODUCTION

The objective of this paper is to develop a viable, effective and comprehensive health care management plan at the state level to deal effectively the various natural and man-made disasters which are posing great threat to the lives of the affected people. Jammu and Kashmir is one of the most flood prone countries in India. Almost half of the Jammu and Kashmir lies in an earthquake prone belt and volcanic activity. The implications of such natural disasters for the health sector include damage to health care facilities and local infrastructure which interrupts provision of health care or destroying access routes to the facilities. An unexpected number of deaths, injuries and illnesses have an adverse impact on the local community. The other damages which include spread of communicable diseases and mental illnesses, difficulty in providing safe drinking water to the affected people. Both remedial and preventive health care services may become difficult or impossible to provide. The ability of hospitals to function largely depends on lifelines and other basic services such as electrical power, water and sanitation, communications, and waste management and disposal. Hospital authorities, cognizant of the facts outlined above frequently produce emergency response plans but such plans often fail to incorporate prevention and mitigation measures, or to strengthen the role of hospital disaster committees in risk management. Hence the need to incorporate measures for improving general safety and preserving the functionality of the key areas of the hospital which include emergency services, intensive care units, diagnostic facilities and food and drug storage. Significant reductions in risk and potential damage are feasible if preventive measures are incorporated into design, construction and maintenance of new health facilities. Prevention aims at the formulation and implementation of long-range policies and programs to prevent or eliminate the occurrence of disaster. Disaster preparedness aims at measures which enable governments, organizations, communities and individuals to respond rapidly and effectively to disaster situations. A clear State Disaster Management Policy is essential for establishing and maintaining adequate health care management to deal with all aspects of disaster threats more effectively.

II. LITERATURE REVIEW

The State of Jammu and Kashmir has witnessed a long history of natural disasters, ranging from catastrophic earthquakes to destructive floods, snow blizzards to avalanches, landslides to wind storms; all owing to its peculiar topography, rugged terrain, extreme weather conditions, and unique geographical and geo-climatic settings.

In February 2005, Waltengu Nad in Kulgam District of South Kashmir was hit by a Snow Blizzard and 175 people lost their lives.

On 8th October 2005, the State experienced earthquake of magnitude 7.6, which resulted in thousands of deaths and injuries. More than 24,000 houses were fully damaged.
In the intervening night of 5th and 6th, August 2010 a sudden Cloudburst occurred in Leh District, followed by flashfloods and mudslides. This unprecedented event resulted in the death of 255 people, including international tourists, and caused damages worth Lakhs of rupees. Leh is a cold desert and the amount of precipitation that occurred during the cloudburst was equivalent to the total rainfall recorded in the entire year.

The State witnessed devastating floods in September 2014 killing almost 300 people and damaging over 2,50,000 houses fully or severely. The floods affected almost all the Districts of the State. More than 5,50,000 people were displaced and had to be provided temporary shelter. Colossal damage was recorded to the public service infrastructure, including hospitals, schools and offices. Residential houses and business establishments were severely damaged as well. Historically, the Valley has experienced massive floods, back in 1841 and 1893; but the damage due to 2014 floods was colossal.

Avalanches are a recurrent feature, during winters. This is besides the share of human induced disasters our State has had to face in the past.

In the wake of recurring disasters, the State has always paid heavily in terms of loss of life and property. Enhanced vulnerabilities of the built environment make the State highly prone to natural disasters.

However the Relief and Recovery activities carried out in the affected areas by the Civil Administration, Police, Security forces, Army, Air Force and NGOs has been laudable. The courage, dedication and zeal of the local community revealed that human relations were at their peak during the disasters.

The State of Jammu and Kashmir recognizes that hazards are inevitable, but these need not necessarily convert into disasters. A pro-active, holistic, comprehensive and multifarious approach is required, for disaster risk reduction and management.

The State has thus, adopted the twin principle of minimizing human suffering, during disasters and reduction of financial losses through integration of Disaster Risk Reduction activities into development planning.

In the aftermath of the devastating floods, the Government of India requested assistance from the World Bank and an emergency project was started, the Project is named as Jehlum & Tawi Flood Recovery Project. The project focuses on restoring critical infrastructure using international best practices, on resilient infrastructure. Given the State’s vulnerability to both floods and earthquakes, the infrastructure is being designed with upgraded resilient features, and includes contingency planning for future disaster events. The project aims at both restoring essential services disrupted by the floods and improving the design standard and practices to increase resilience.

J&K has a structured institutional mechanism to deal with disasters at the State level. The State Disaster Management Authority is headed by Hon’ble Chief Minister.

The State has the unique distinction of having a shifting State Capital, between Srinagar and Jammu, every six months and therefore the State has two unique Divisional Disaster Management Authorities for Kashmir and Jammu Divisions, which are headed by the respective Divisional Commissioners. This is in addition to the State and District Disaster Management Authorities, to manage the whole gamut of disasters.

Land has been identified at the State level for establishment of State Emergency Operation Center, for ensuring effective management of disasters. Till the time the permanent EOCs are constructed, interim EOCs have been established. The State Disaster Management Plan, the State Disaster Management Policy and District Disaster Management Plans have been prepared and are regularly being updated and upgraded.

The State has established two dedicated Battalions of the State Disaster Response Force. The process of upgrading SDRF with adequate manpower, capacity building and equipment support has been initiated. Besides this, the Fire & Emergency Services is also being strengthened and upgraded.

Community is amongst the first responders in any disaster situations and therefore, the State has taken innovative initiatives for creating awareness amongst general masses and for building up their capacity, so that they are better equipped to handle any exigencies. Training of students and teachers on School Safety Measures has been accorded top priority. Revenue Officers, including District Collectors, Tehsildars, Patwaris, Senior Administrators and Municipal Ward Corporators will be imparted training and involved in preparation of Community Level Disaster Management Plans.

Disasters cannot be prevented, but all necessary measures can be taken to minimize damages due to disasters. A prepared community can deal with disasters in a better manner. The State believes in the slogan “Help people, to help themselves”.

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III. RESULTS

Post October, 2008 Earth Quake and September, 2014 Floods disaster in Jammu and Kashmir, Although efforts have been made to improve Health Disaster System in Jammu and Kashmir yet much more needs to be done. There is a challenge which obstructs the Effective Health Disaster Response including Low standards of disaster resistant infrastructure safety, The lack of specific Disaster plans, Poor emergency coordination between hospitals, Lack of portable diagnostic equipments and Least developed triage skills etc. There are other challenges confronting also like Fragmentation of the emergency health service system, A lack of specific legislation for emergencies, Disparities in the distribution of funding and Inadequate cost effective considerations for disaster rescue. Since Jammu and Kashmir falls in seismic zone and most of the parts of the state are flood prone and there are maximum chances of damage to human lives and property and as and when disasters take place. So hurdles and obstructions in Disaster Health Management need to be uprooted and challenges to be looked in depth and thoroughly. This paper aims to provide the current scenario of Disaster Health Management in Jammu and Kashmir. It has several Objectives:

- To identify the progress and current status of Disaster Management Health Care System in Jammu and Kashmir.
- To identify current challenges.
- To discuss and look into future strategies to overcome these challenges.
- To identify future research directions. The “PPRR” Disaster Management Quantum [of Preventing and Mitigation(P), Preparation and Planning(P), Response and Relief(R), and Recovery( R)] can be used to identify the challenges within each Management phase. Then corresponding strategies are proposed to promote the overall effectiveness of the Health System Response during and after major disaster related mortality by providing continuous health care.

CONCLUSION

One of the solutions identified to address these challenges appears to be through corresponding policy strategies at multiple levels (E.g : Community Hospital and Health Care System level). Disaster Health Management is fast becoming a unique specialty around the world, with its governing theories and principles. The ultimate objective of the Disaster Health Management is to reduce the impact of disasters on Human Health and well being by providing urgent Health interventions and ongoing healthcare during and after disasters. During a disaster, the Health Care System becomes a high profile element, Critical to the immediate health response and recovery phase. The System itself can be impacted directly by the consequences of the disaster while at the same time being expected to have the capacity to respond to the sudden increase in the demand associated with the disasters. The System, because it provides continuous Health Care, can be viewed as community infrastructure essential to the life preserving front line responses.

Not much of the research has been carried out in Jammu and Kashmir which would have focused on Health Systems Disaster Management (Disaster Health Management or the capability to supply medical services during Disasters, A little information too is available with respect to Jammu and Kashmir State). Jammu and Kashmir has been severely affected by multiple disasters and Pandemics of infectious diseases. Till date Disaster Management Research into the Health System in Jammu and Kashmir is in its infancy. The issues pertaining to disaster research are either inappropriate study design or lack empirical formula.

Since it is impossible to avoid natural disasters such as earth quakes etc. However, Disaster Preparedness Plans and Public Health Systems could be very helpful in rescue and relief operations and can be very much helpful in reducing mortalities. However the Disaster Health Management System or Public Health System in Jammu and Kashmir lack such Disaster Preparedness Plans and Training. Till date several shortcomings have been observed in disaster response such as Delayed Response, Absence of early warning systems, Lack of standard operating procedures for rescue and relief, and Lack of storage of essential medicines and supplies. The same needs to be looked into top priority. The Disaster Management Operations from SDRF and NDRF also a lesson to learn.

REFERENCES


