Future Health Systems India Team investigates health of the affected population after the cyclone *Aila* hit the Sunderbans on May 25, 2009

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The Future Health Systems (FHS) India team are currently engaged in designing a master health plan for the Sunderbans area of India, a cluster of islands surrounded by one of the most beautiful arrangements of mangrove forests with exotic wild life (the Royal Bengal Tiger), and locked by a large number of rivers and rivulets. Ironically, this is also home to about 4 million people who survive in abject poverty and against severe geographical adversities. The idea behind the master health plan is to provide customized public health interventions for Sundarbans’ population based on their need, geographical location and accessibility to health services.

The Sunderbans have recently become headline news after a devastating cyclone – named *Aila* - rampaged through West Bengal, and more specifically the Sunderbans, on May 25, 2009. Within minutes, storm and consequent high tide wiped out a large part of river embankments, made thousands of villages disappear under water, killed hundreds of people, and rendered more than 400,000 homeless. Penetrated saline water has already seriously damaged the agricultural land, leaving a deep scar. The area now symbolizes extreme gloom and a losing battle for survival. Natural calamities are common in the Sunderbans, but this one has broken all records in terms of its intensity and impact.

The FHS research team recently concluded a comprehensive health survey in the whole area. But, that was before *Aila* struck. To assess the post-*Aila* situation, the team again visited several islands just three days after the devastation. The visit revealed a state of complete ruin and misfortune. The least fortunate are those who are still stranded in the remote villages with no food, no drinking water, no access to medical facilities, and absolutely nowhere to go. Even those, who took shelter in relief camps, are struggling to survive because the relief distributed by the government and NGOs is too little and too late. The absence of proper hygiene is evident everywhere and remnants of dead fish and other animals are constantly polluting the environment. Sources of drinking water are now submerged under saline water.

The plight of the poor

The hundred families of village Giripara under Sridharkathi gram panchayat had to live on the trees without food and water for the initial two days when *Aila* struck on May 25. The distant island located in the extreme southern edge of Sundarbans is highly inaccessible. It was only after three days that the survivors received *chira* (rice-flakes) and *gur* (jaggery) as relief. Although local NGO’s have supplied with few halogen tablets, the shortage for drinking water continues with survivors fetching water from a long distance making way through waist high water.
Discussions with local NGOs revealed that most of the villagers in the Sunderbans are suffering from enteric infection and diarrhea as people have no choice but to consume contaminated water. Added to this the victims of snake bites, dog bites, accident injuries, skin infection and other diseases mean the health of the Sunderbans has moved from a sorry to the worst state. In brief, it is a public health nightmare. In many places, the sub-centers and primary health centers were completely washed away by the flood. There is a colossal need for ORS, anti-diarrheal medicine and other basic medicines but, so far, the supplies are drops in the ocean.

With a weak public sector, the islands abound in unqualified rural doctors (RMP) who usually cater to the health care needs of about 60% of the people. The quality of care may be highly questionable, yet the cyclone made them the only option to many villagers. The team observed scores of diarrhea patients crowding the RMP clinics, and in worst cases, even getting treatment openly on roads. These providers are also running short of drug supply since the local pharmacies have run out of stocks. Working closely with the affected people, they perhaps have better knowledge about the pulse of the Sunderbans; as one of the RMPs said “..if not controlled now, it will lead to an epidemic; people will die largely suffering from diarrhea”.

*Aila* has demonstrated Sunderbans’ vulnerability to natural disaster and reconfirmed the experts’ opinion that, unless some drastic steps are taken now to protect the Sunderbans, the whole area may disappear under water within a few decades due to rapid changes in the ecological conditions. This unearths a much bigger issue before the FHS researchers: how should we respond to the health problem of a region which is being threatened to extinction tomorrow? In other words, does the traditional way of designing public health interventions for the areas like the Sunderbans make much long-term sense if it is not connected to the larger issue of human existence?

Notes:

1. Barun Kanjilal is based at the Institute of Health Management Research, Jaipur, a partner organisation of the Future Health Systems Research Consortium.
2. Future Health Systems is a UK Department of International Development funded Research Programme Consortium. [www.futurehealthsystems.org](http://www.futurehealthsystems.org)