

Health risk assessment and emergency health contingency plan essay sample

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Abstract

Every society has its own share of health risks and they eventually carry with them sociological implications. They range from social dysfunctions such as domestic violence, sexually transmitted diseases like HIV/AIDS towards hazards in the community which include pollution of the atmosphere by toxic substances; gases and odor from carcasses. Recent studies have shown where even road accidents are community health concerns. As such, in truly conducting a Community health assessment all of these contributory factors ought to be considered in the process. Various changes in the environment also carry with them a number of health disruptions. Earthquakes; flooding; forest fires; hurricanes; tornadoes; construction and industrial changes in the environment produce health risks which can affect ecosystems and human life span. It is therefore imperative that public health agencies along with social planners be keen on planning strategies that would minimize the consequences of such actions on the environment. Someone once said that man is a product of his environment. If this is so then, it becomes pertinent that measures be taken to protect both the social and physical strata that encompass human interaction since there is an interrelationship between them.

HEALTH RISK ASSESMENT AND EMERGENCY HEALTH CONTINGENCY PLAN

Introduction

This essay seeks to offer a health risk assessment and emergency health contingency plan as it relates to the contributions of rural youth in community development and wellbeing in India with special reference to

Hyderabad - Andhra Pradesh Southern India. In so doing the author of this document will address the nature of health risk associated with changes experienced in the tourist industry; effectiveness of various preventative interventions and justification of strategies recommended.

Further reports have been that Andhra Pradesh accounts for 157 million visits per year entertaining 1.5 million international tourist annually garnering an amount of \$23US million (TNN, 2011). With this success rate of tourism in the society immense changes in the environment due to magnificent infrastructural accommodation is eminent. This is, perhaps, undertaken without recognizing the impact it has on the health of the population.

This city has a population of 6,809,970. 50% is below the age of 25 (Census, 2011). Therefore, any which ought to be implemented must involve the youth in the community. Importantly, they are the strongest human resources available to any country. Hyderabad youth are not exception to this rule. Already they have made tremulous impact in revolutionizing the society being in the vanguard of change

According to research conducted by Nancy Ames, David Miller, Poonam Ahluwalia and Puneetha S. Palakurthi (2003) outlining Service-Learning: Promoting Employability, Empowerment, and Social Entrepreneurship among Youth there is need for more youth involvement in change. Participation is limited since they have been marginalized through lack of technical skills; knowledge and entrepreneurial culture (Ames, 2003)

Hence, the contributions of rural youth in community development and wellbeing in India with special reference to Hyderabad - Andhra Pradesh in

Southern India is vital as discussions concerning health risk associated with changes experienced in the tourist industry; effectiveness of various preventative interventions and justification of strategies recommended is embraced.

Nature of Health Risks Associated with Changes Created by the Tourist Industry

The Environment

It is no secret that infrastructural development for tourist industries across the world has disturbed the delicate balances of nature. Research has shown where destruction of mangroves along beaches which harbor useful insects and animals interfere with the general health of people living in close proximity to these infrastructural developments (Environmental Impacts of Tourism, 2011).

Essentially, the impact of tourism is three fold with its accompanying health risks. Depletion of natural resources stands high on the list of effects.

Inevitably, with depletion of natural resources comes a cycle of other depletion in the environment. Man is a product of the environment and a very valuable environmental species. Studies have proven where water is usually overused in countries practicing tourism through swimming pools, golf courts and domestically (Environmental Impacts of Tourism, 2011).

Next is land degradation. Essential elements for growth of agricultural produce are minimized due to increase in construction activity on landscape. Even when land is not physically used most tourist countries save large spanse of land where sand or dirt is removed to enhance other portions of grounds for tourists' interaction (Environmental Impacts of Tourism, 2011).

This is still being practiced Hyderabad - Andhra Pradesh in Southern India whenever it becomes necessary. Hence, the quality and quantity of ' minerals, fuel fossils, fertile soil, forests, wet land and wildlife' is affected (Environmental Impacts of Tourism, 2011)

Accompanying this is one of the most frightening hazards to the environment which seeps insidiously and goes unnoticed for a very long time. It is air pollution emitting the largest source of Carbon dioxide in the atmosphere daily. With rising concerns regarding global warming and immense disturbance in the ozone layer this must be addressed with urgency since air pollution is associated with many illnesses which have not yet been clinically diagnosed (Environmental Impacts of Tourism, 2011).

For example, research studies conducted by Ravi Thomas (2005) and others point towards an alarming increase in Pseudoexfoliation in Southern India: The Andhra Pradesh Eye Disease Study disclosed. The researchers linked this health condition to ocular disease. They are still researching to discover the underlying causes to determine what preventative measures ought to be taken (Thomas et. al, 2005). Could it be that it is a direct impact of environmental changes due to tourist activity? It is well the worth researching as a twenty-first century health risk in Hyderabad - Andhra Pradesh Southern India.

Society

Health risks linking tourism with society pertains to cultural intermingling. Travel does not only transmit cultural influences, but social diseases as well in Hyderabad - Andhra Pradesh Southern India. History showed where before

Christopher Columbus discovered the New World there was no evidence of many health risks among the Indians, but as acculturation persisted they became ill and died (Environmental Impacts of Tourism, 2011).

Similarly, Studies relating the increase in mortality among Hyderabad - Andhra Pradesh population linked it to chronic diseases. Rohini Joshi (2006) and others have concluded that, non communicable and chronic diseases were the leading cause of death in rural India. Precisely, 32% were from Ischemic Heart Disease; Tuberculosis; Intestinal Infections; 13% from self inflicting harm (suicide); 12% parasitic infestation; 2% HIV/AIDS; 7% Neoplasm and 5% respiratory conditions (Joshi et. al, 2006).

An analysis interpreting the mortality etiology emanating from a society where tourist activity is foremost; implications are that while sexually transmitted diseases are well controlled and at a minimal other predisposing factors related to chronic diseases need to be researched thoroughly.

Ischemic Heart disease is known to occur when there is poor blood supply to the heart induced by hardening of the arteries supplying blood to the myocardium. Predisposing conditions are diabetes and other nutritional imposed dysfunctions. Could it be that due to tourist intervention natives of Hyderabad - Andhra Pradesh have become so acculturated with food practices imported from more developed societies that they fall easy prey Ischemic heart disease? Also, could it be that there is not enough land to plant vegetables, fruits, rice and staples as before that fresh food is less eaten by residents?

Economy

It is quite clear that the economic benefits of Tourism is worthy within the state of Hyderabad - Andhra Pradesh since it has major influence on the Gross Domestic Product of the country. However, how is this depicted in money expended on health care and other social services within the society?

Does the financial burden of keeping the tourist industry flourishing affect the quality of health care residents of this society receives from the Government?

With reference to Nancy Ames (2003) and others; with a prosperous economy from tourism there is still an alarming rate of unemployment among youths. They have described it as a 'growing crisis of unemployment' (Ames, 2003). Does this predict a comparable type of health care services provided for the elderly; pregnant women and disabled in the society?

Does this indicate that changes in the way policy makers empathize tourism, impact the economy negatively? For example, studies have revealed that Andhra Pradesh is one of six states in India where HIV/AIDS has reached epidemic proportions. Prevalence in the adult population is above 1% in 18 districts and above 2% in 7. To date the state ranks second in the prevalence of HIV/AIDS infection (Economic Impact of HIV/AIDS, 2005).

Subsequent studies conducted to distinctly evaluate its impact on the economy and expected expenditure to maintain 311 persons diagnosed with the disease showed an estimated 2.1 million US per year (Economic Impact of HIV/AIDS, 2005). When the income from tourism is calculated, how this measure in terms of health care cost across the state?

However, it was heartening to find that state authorities in Andhra Pradesh

have been contemplating health care reform since in the 1970 and outlined measures to address emerging health issues occurring and recurring with the society. Yet it appears that from an economic perspective social service as in many societies are submerged for more financially resourceful ventures.

Effectiveness of various preventative interventions (Contingency Plan)

Many preventative measures have been adopted overtime. They are wrapped up in health care reform projects, public health interventions and social service improvements. The issue at hand for this portion of the discussion is whether they are effective and if they are to what extent.

Individual

Reports coming from studies conducted by Ames (2003) and colleges the contingency plan designed to address youth unemployment at the individual level are geared towards 'Service- Learning" (Ames, 2003). How effective is Service Learning among youth in Hyderabad - Andhra Pradesh? Precisely, it is expected to enable ' young people, including students, to engage in a carefully organized, extended period of service in which they learn new knowledge and skills, while also carrying out activities that meet significant needs in their community' (Ames, 2003)

The objective outlined is pertinent to success, but so far a project of this nature takes decades to declare its worth in any society since it encompasses change of perceptions and behavior. This does not occur overnight, but with tedious work. Besides, youth in themselves are obstacles

to change, especially, if it is not consistent with their values. Therefore, a way to begin is to conduct studies that would inform social planners what skills youth are interested in and formulate programs consist with those skills. Then the effectiveness could be wide spread and meaningful to their communities.

Contributions of rural youth in community development and wellbeing are vital for twenty-first century improvements in Hyderabad - Andhra Pradesh. Health risks associated with unemployment among youth cannot be bypassed. With a tourism culture it can be more far reaching since in such societies a measure of prostitution exists to feed the industry. Further conclusions from the study reveal that ' Institutional capacity for improving unemployment was sadly lacking' (Ames, 2003)

Local

This reform was to be undertaken in 5 year segments ending 2007. Since then there has been no report evaluating the efficacy of such reform with a view of making adjusts to the existing interventions. Hence, a true assessment of its effectiveness cannot be described comprehensively

Regional

Regional and local contingency plans tend to overlap in Hyderabad - Andhra Pradesh. Decisions are made regionally for the entire state. Variations in implementation based on health risks of specific communities are evident. For example, emanating from the National Rural Health Mission policy opportunities for every village in the country to be serviced by a trained community health activist was implemented as a public health intervention

(Press Information Bureau, 2008). To evaluate the efficacy of such programs follow up studies must be conducted.

Justification of Strategies Recommended

Service -Training for youth provides access to employment and is expected to reduce health risks pertaining to low self esteem, depression and attempts at seeking employment through illegal activities in the presence of tourist environmental changes. These changes can further compromise the health of young people if they discriminately engage in such practices.

A major justification for health care reform strategies in Hyderabad - Andhra Pradesh is that with impending dangers of changes emanating from tourists' influenced activities social administration needs to improve health care services for its people. Hazards form air and water pollution; acculturation; social mingling can create similar crises as youth unemployment in the society.

Public health intervention strategies of providing community health activists in each village was to reduce the amount of citizens accessing free health care services that could afford to pay and redirect those services to the rural poor who were not less fortunate. In this way maternal and child health care delivery was addressed; education in HIV/AIDS and other sexually transmitted diseases; infrastructural rehabilitation due to tourism could be undertaken and health risks reduced for both rural and urban residents alike.

Conclusion

The foregoing exposition related a health risk assessment with accompanying contingency plan for Hyderabad - Andhra Pradesh in Southern

India focusing on highlighting the importance of contributions by rural youth in community development and wellbeing. Health risks discussed circulated among continuous changes impacting the society due to a flourishing tourists industry.

It was discovered that youth contributions were compromised due to lack of involvement in the social structure decision making process. This was detected as being initiated by inadequate preparation and apparently ignoring of the usefulness of youth within a society.

The impact of tourism even though more investigated studies ought to be conducted from this literature review it is clear that the industry poses health risks which are not immediately address through healthcare reform programs. Recommendations are that local governments expend more dollars towards youth development and more realistic health care reform Hyderabad - Andhra Pradesh in Southern India for 2012.

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