

Abstract

Despite better health care services in Sri Lanka, there are disadvantaged or underserved communities such as conflict areas, estates and urban slums with poor service indicators. A paucity of research exists regarding patients care services in areas affected by long-term armed conflict. This study explores some aspects of health care services and the factors associated with them in the Vavuniya, Mannar, Mullaitivu and Kilinochchi Districts (wanni main land) in Sri Lanka.

A cross-sectional descriptive study was conducted among patients transferred from peripheral hospitals in those areas to the District General Hospital Vavuniya. Data were collected using an interviewer administered questionnaire from transferred patients and their BHTs at the District General Hospital Vavuniya. The sample included 391 consecutive transferred patients. The majority of the respondents were Sri Lankan Tamils by ethnicity (83.1%), and Hindus by religion (75.2%). Most of the patients (85.7%) were transferred from outside Vavuniya District.

The results revealed that the leading reason for transfer was found to be eye diseases (19.7%). A significant proportion of the patients have had Obstetrics cause (12.3%). Poisoning was found among 6 patients (1.5%) and malignant diseases were found in 18 patients (4.6%). 80% of the patients were transferred electively. Majority of the patients (57.5%) were transferred to DGH Vavuniya within one day of admission at peripheral hospitals. 58.8% of the patients were seen by medical officers at peripheral hospitals before the event of transfer. 98.5% of the transferred patients or their guardians had given clear reason for the transfer of the patients. The majority of the patients (84.4%) were accompanied with attendants. Around half of the patients from DGH Kilinochchi (51.7%) and DGH Mullaitivu (48.8%) were transferred with more than six patients in one ambulance.

The majority of the patients (41.4%) were discharged with the follow-up. 29.7% of the patients were discharged without any complications. A significant number of the patients (18.9%) were transferred to higher level institutions for further management. The Leading reason (37.8%) for higher level institutional transfer was orthopedic problem. The significant

number of patients transferred to higher level institutions were follow-up of urology (16.2%), neurology (13.5%) and oncology (9.5%).

In conclusion, this study revealed that majority (61.1%) of the patients were transferred from DGH Kilionochchi and DGH Mullaitivu. Among them eye diseases were the leading reason for transfer to DGH Vavuniya and a significant number of patients were transferred to higher level institutions. Strengthening of infrastructure facilities at DGH Manar, DGH Kilinichchi, DGH Mullaitivu and peripheral hospitals in Vavuniya District can reduce the number of transfer patients to DGH Vavuniya. Improving facilities at DGH Vavuniya could Seduce the transfer to higher level institutions. It is important to talk immediate measures to revise cadre and fill the vacancies in these districts and also conducting out reach clinic by consultants or senior registrars in above areas as much as possible. Further research is needed to assess the quality of care and availability of resources for health care services in conflict affected areas.

Key words : Sri Lanka, Transferred patients and Wannu main land.