

The name of the person interviewed is Mr. Manoj Aithal .He is a doctor by profession whose age is 45. As said by him the various medical facilities in his area are government run hospitals ,private hospitals ,private clinics, ambulances ,pharmacies and charitable trust hospitals .These medical facilities are available 24 hours a day and they are sufficient .Various hospitals are there which specialize in treatment of children, gynecological disorders ,cardiac ailments, tuberculosis etc .Free treatment in his area is available to poor as well as other sections of the society in government run hospitals. There are some charitable trust hospitals dedicated to the needy .Problems faced by people during times of emergencies are transportation to the hospitals from the residence and sometimes non availability of beds in the hospitals .Very rarely, there is non availability of equipment in small hospitals, where they are not equipped to deal with

complicated cases .Medicines are available by in large in all hospitals but the availability of specialist doctors to treat certain diseases becomes a problem .Rapidly, the demand for medical facilities in his area is increasing day by day due to the increase in population.

The name of the next person interviewed is Mr. Paras Kumar .He is a chemist by profession and his age is 25 .In his area there are general practitioners available throughout the day and the pharmacies are open 24/7.Ambulances are also available day and night and there are enough of these facilities. Unfortunately, there are not specialized hospitals in his area to treat various ailments like cancer ,AIDS ,cardiac diseases ,to avail such facilities the people have to travel to other parts of the city .Some general practitioners provide assistance to the underprivileged people of the society. According to him ,in scenarios of emergency like the current pandemic ,there is a huge scarcity of hospital beds which becomes a problem for the people .The demand of medicine in his area is high in the current scenario of the pandemic as everybody wants to take extra precautions. Initially, when the lockdown just started there was a shortage of

masks and sanitizers as their manufacture was temporarily stopped due to the spread of corona virus, but gradually everything started to be manufactured again making things available in the pharmacies.

This report was written on the basis of four research interviews conducted with different people, from different backgrounds, with varying living situations, all from different areas of Mumbai. These interviews were carried out to evaluate similarities and disparities or variations, in the quantity and quality of medical facilities provided to different areas of Mumbai. We decided the active variables in our investigation would be the age, profession, and percentage income per annum to provide a variety of results, thus allowing us to come to the fairest possible conclusion.

Our interviewee was a senior citizen and a former defence personnel. According to him, emergency aid for the most part easily available in his area at all times, with their being more than enough to sustain the needs of the population in that sector of Mumbai. Hospitals specialising in cardiac ailments are

in close proximity and easily available however, for less common, and harder to treat ailments such as, AIDS or cancer, treatment can be found further away. Free treatment in this locality is easily available at government hospitals. In times of crisis getting an ambulance has proven to be difficult and specialised healthcare professionals can also be challenging to find at odd hours, nonetheless medicines are accessible and easy to find when needed.

Another interview was conducted with a teacher from our school, who specialises in her field of art and design. Her locale has a round the clock medical assistance when needed with delays in service being very rare. Specialist hospitals (for cancer, aids (etc)) are not found in her area, but can be found a little further away if needed. Free treatment is available for the less fortunate sections of society but nowhere near her area, with the journey taking approximately one hour. One of the problems that can be faced in times of crisis the lack of basic medical knowledge needed to handle a situation, before it can be passed over to a professional to be treated.

Next interview was conducted with household help. Her area does have basic medical facilities such as pharmacies and hospitals, however they're a slight distance away, and this can cause an inconvenience sometimes especially when things like medicine are needed instantaneously. Basic emergency assistance is available at all times but may also take some time to arrive due to the distance and other external factors like traffic, however larger hospitals that specialise in the treatment of more severe ailments aren't available anywhere in or around her area. Her area also does not provide free treatment for the less fortunate.



Our final interviewee was an average upper middle class man. His area has more than enough medical facilities ranging from pharmacies, to hospitals, to even dialysis centres, all in very close vicinities to him, however none of them are a hundred percent optimum either in terms of service or facilities. Medical assistance is available, but not at all times, (eg. certain specialist doctors come to the hospital/ clinic only on certain days) which makes it inconvenient, sometimes even uncomfortable for the person in distress as they cannot be treated instantly. The amount of medical facilities in that area according to the interviewee are “fair”, as in not optimum level of availability or service, however optimum in numbers of facilities available to a patient. Problems faced in times of criticality are, misinformation or not enough information on basic health issues, or not knowing where to go for correct treatment for a particular

problem. Free Healthcare was not available during the time of the pandemic for the poorer sections of society in this area.

Overall from these four interviews the conclusion can be drawn that, different parts of Mumbai based on their individual standards of living will have different provisions of healthcare and varying levels of accessibility to medical facilities, with mainly the upper class areas being better off in respects to their medical needs. This is in stark contrast to the difficulties a lot of poorer parts of Mumbai have to go through, just to get basic healthcare, especially in times of crisis with respect to the distance and funds required to have these medical services easily accessible to one's self .