SELECTION OF ATOLLS AND ISLANDS

North

Atolls selected based on:

- 1. Two highest populated Atolls with regional hospitals
- 2. Two highest populated Atolls with Atoll hospitals

Islands selected from:

- 1. One atoll with a regional hospital
- 2. One atoll with a Atoll hospital

Central – Male'

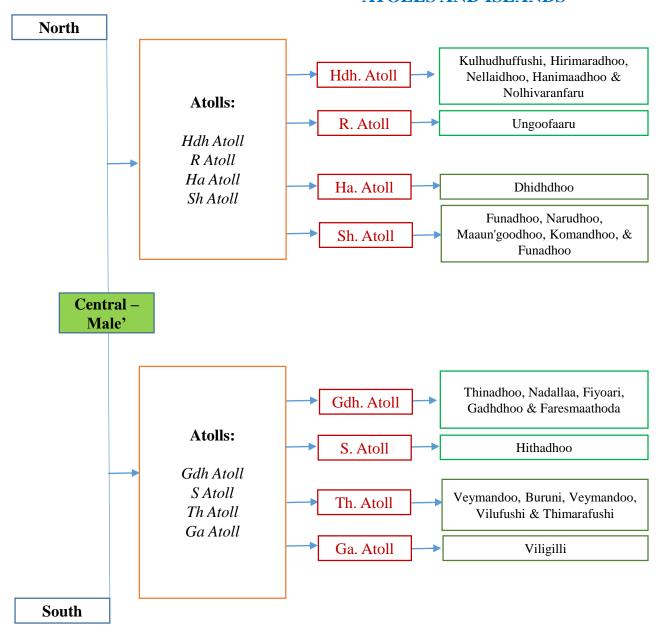
Atolls selected based on:

- 1. Two highest populated Atolls with regional hospitals
- 2. Two highest populated Atolls with Atoll hospitals

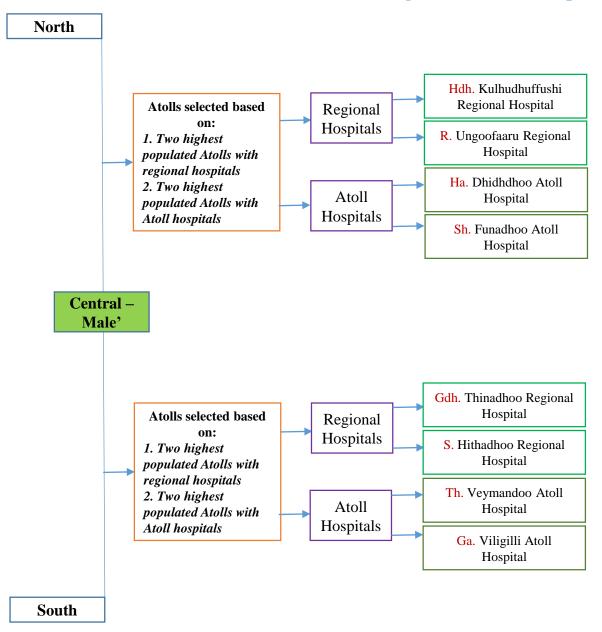
Islands selected from:

- 1. One atoll with a regional hospital
- 2. One atoll with a Atoll hospital

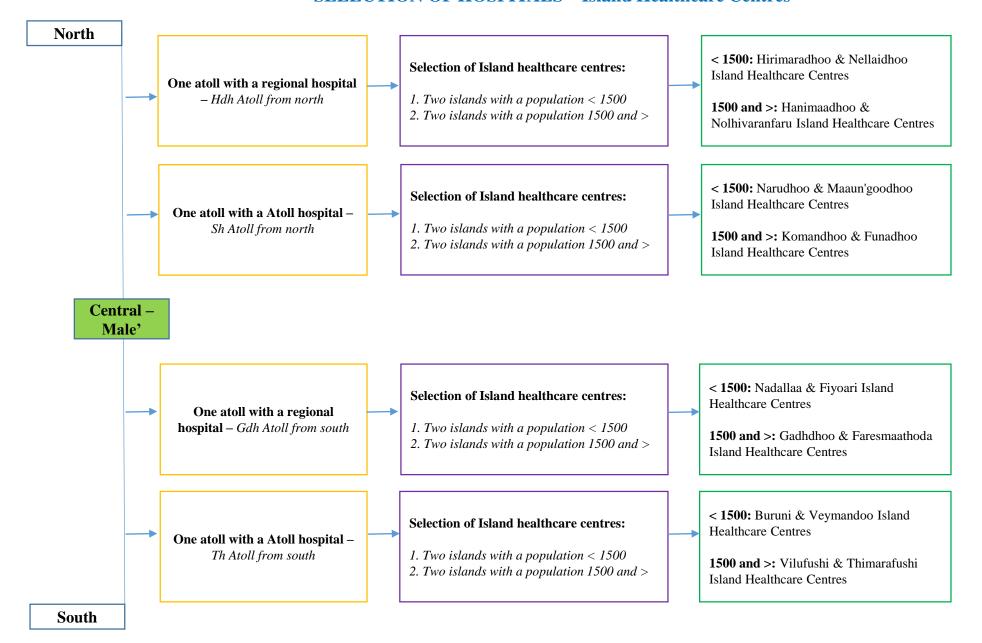
ATOLLS AND ISLANDS



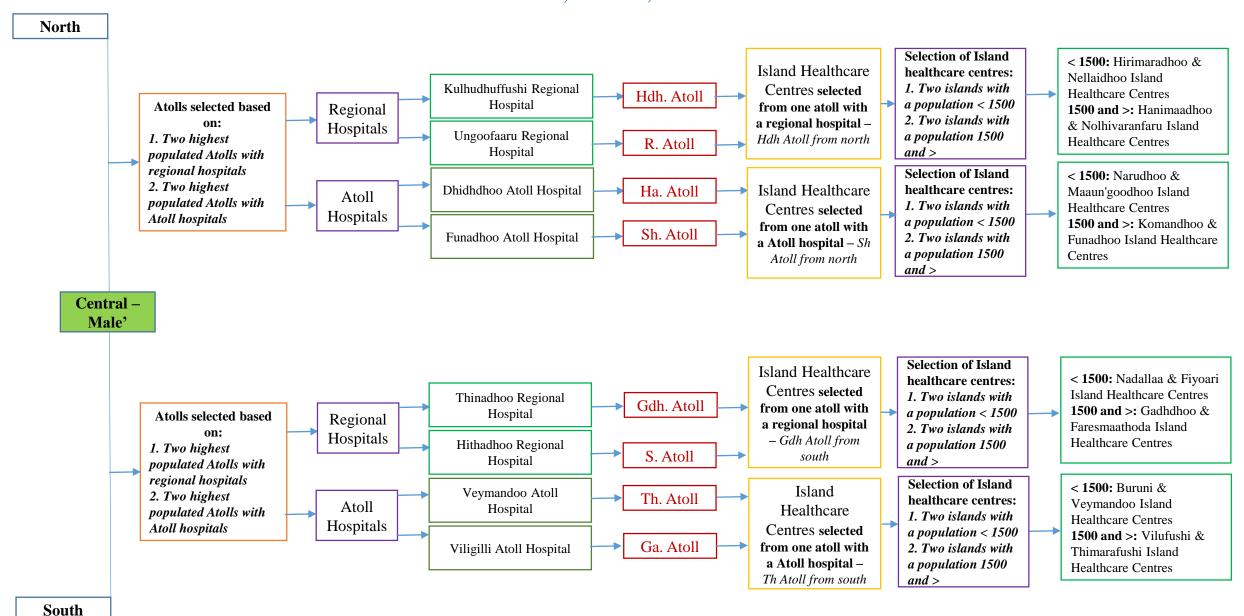
SELECTION OF HOSPITALS – Regional and Atoll Hospitals



SELECTION OF HOSPITALS – Island Healthcare Centres



SELECTION OF ATOLLS, ISLANDS, AND HOSPITALS



WHAT WAS CONSIDERED IN SELECTION OF THE ATOLLS, ISLANDS, AND HOSPITALS?

To capture the variation in access to primary healthcare in the Maldives in-terms of:

- a. Transportation
- b. Travel time
- c. Trust in healthcare provider

To capture the above variation between:

- a. North and South.
- b. Residents of islands with regional, atoll, and island hospitals.
- c. Residents of islands with small (<1500) and large(1500and >) populations.

EXISTING AND NEW PLAN

	Existing Plan	New Plan
Similariti es	Islands with Regional, Atoll, and island healthcare centres were selected Islands with different population densities were selected	
Differences	1. Maldives was divided into 5 regions – North, North Central, Central, South Central, and South	1. Maldives is divided into two regions - North and South Central region is excluded since all tertiary healthcare facilities are available in capital city Male' that belongs to central region of the Maldives. The few atolls that belongs to central region has direct transportation to capital city Male' throughout the week. They do not have a regional hospital. This is because of closer proximity to Male'. Therefore, their conditions differ to other atolls of the Maldives in-terms of type of healthcare facilities (tertiary healthcare facilities); and availability of transportation services in central region. There is no inter-regional differences between North and North-Central or South and South-Central. Integrating them would not make any difference to what I expect to capture: the variation between how people access to primary healthcare in North and South regions of the Maldives.
	2. Number of Atolls 10 and islands 19	2. Number of Atolls 8 and islands 24 Travel between atolls have become difficult. This is due to current Covid-19 situation in the Maldives. Therefore, I have reduced the number of atolls from 10 to 8. This will minimise the travel difficulties I may face. I have selected equal number of atolls from both regions. The selected atolls are similar to all other atolls in the region. I have increased the number of islands within the atolls. This change will help me to get a better picture of inter-island variation in access to primary healthcare between small and large populations with island healthcare units. This was not considered in the initial plan. To be noted: The small islands with larger populations are provided with better island healthcare facilities.