Study on Health Indicators of Pilgrims Accommodations Places in Samen Zone At Holy Mashhad in the Summer of 2011

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Abstract: Mashhad is a holy city in Iran which annually welcomes more than 30 million Iranians and also more than one million pilgrims from abroad. The Samen zone is the nearest place to the Holy Shrine of Imam Reza. this study has been designed to clarify the value of these indicators for accommodations in the Samen zone in holy city of Mashhad in 2011. This study was carried out on the health status of all inns (422 places) in the Samen zone in the summer of 2011. To assess the health indicators of the places according to the Article No. 13 of Food, Drink and Cosmetics Act, a checklist about personal health, building health and equipment was prepared containing 73 questions. Results show that 15.17% of places had standards of health, 62.09% of them had criteria of building sanitation and 22. 75% of them did not have desirable conditions. The results also indicate that 92.2% of all workers had health cards and 33.46% of them had health certificates. Significant percentage of the places with poor health status pushes us to recommend a priority of providing better hygienic facilities. By considering the number of employees of these places who had health certificates, continual training and also regular inspecting seem inevitable in order to achieve better health condition.

Key words: Accommodations · Health Indicators · Samen Zone · Mashhad

INTRODUCTION

The health science shows the ways of creating, maintaining, improving and developing physical, mental and social well-being and promotes the standard of living. Considering the fact that generally, hotels, motels and accommodations are used by different people daily, they should be comfortable, healthy and have a good weather and all the required conveniences; Not observing the health principles in these places will cause many problems because they are prone to passing contagious diseases and pathogenic factors will be spread across the country. Observing these principles in hotels and motels not only protects the guests’ health, but also draws more tourists to the country. These places are of utmost importance because they both improve the country’s economy and obviate the problem of unemployment and also add to the value of country in the tourists’ opinions [1].

The study by Askarian on the health indicators of Shiraz hospitals shows the rate of observing health standards as follows: the desirable status 81-100, the relatively desirable status 61-80 and 60 and less is for the undesirable status. Generally, it is claimed that the rate of observing these principles in non-training hospitals is higher than that of training hospitals [2]. Farzin’s study on the hotels and inns of Qom says that 9.7% of them are in undesirable status and 54.8% in optimization standard and 35.5 in the scope of health limits. Due to their geographical positions, the reason for their being unhealthy is their being located in the older parts of the cities and building problems [3].
The distance between the provincial capital and the capital is 900 kms. Two main roads and a two-way railway connect Mashhad to Tehran. Mashhad railway stations is the second most important railway station in Iran and joins the east-west railway to the Mashhad-Baqq railway. Mashhad is the most important tourist center in Iran due to the Holy Shrine of Imam Reza, Firdausi mausoleum, halcyon countries and resorts, pilgrim centers and innumerable monumental buildings. The existence of universities and reputable scientific centers has turned Mashhad into one of the main producers of science and the industrial estates, the international exposition and very many workshops and factories and gigantic economic institutions like Astan-e Quds have made this township a great economic center [4]. The demographical studies of Mashhad show that the ratio of pilgrim and traveler to population has increased from 2 to 7 within the last 100 years [4]. About 64.15% of total city-living population of the whole province is in Mashhad and this has led to some imbalance and instability (1 and 4). Annually, the Razavi Holy Shrine welcomes more than 30 million pilgrims from inside and more than 1 million from outside the country. It can be said that Mashhad had about more than 13 million pilgrims in the summer of 2010, indicating that Imam Reza Shrine has caused every Iranian to make a pilgrimage to Mashhad every third year (1 and 4). The Samen zone with an area of 337 hectares and a population of 32330 people is one of the most important neighborhoods of Mashhad. There are 86 hotels in this zone, 28 of which are one-starred, 30 two-starred, 22 three-starred, 2 four-starred and 4 five-starred [5].

Recently, the building of apartment-hotels has become very common in Mashhad; 164 apartment-hotels have been built in the recent 15 years. The number of inns older than apartment-hotels and even hotels is 456 [6]. You can find these inns all over the older parts of the city and even in the narrow alleys. Some houses have been renovated and gone through legal processes and now are serving as inns. One other type of centers welcoming pilgrims are pilgrim houses; they are places which are established by different governmental bodies. Pilgrim centers are usually used by guilds because they build them. Some religious communities have their own Hosseinies in Mashhad and use them as their place of residence. In summer, ministry of education assigns its schools to its employees when they are in Mashhad. Due to the number of passengers and insufficiency of residence places, it is likely that health indicators in these places are not desirable, but their real status is not clearly determined because they have not adequately been investigated scientifically; therefore, this paper intends to delineate these indicators regarding the accommodations of Samen zone in Mashhad in 2011.

MATERIALS AND METHODS

This study consists in taking a census of health status of all accommodations (353 units) in the Samen zone of Mashhad, including 3 health and treatment centers (Rasul Akram, Idgah and Haj Nowruz), conducted in the summer of 2011. All types of residence places, i.e. inns, residence units, apartment suites and pilgrim centers of Samen zone are studied in this paper. To determine the health indicators of these places, a checklist with 73 questions regarding personal health (articles 2, 3 and 4), building health (articles 16, 17, 18, 19, 20 and 24) and equipment (articles 71, 72, 73 and 74) has been prepared according to the Article No. 13 of Food, Drink and Cosmetics Act (5, 6, 7, 8). Some information about the health indicators of personal health, building health and equipment was gathered after making the required arrangements with the Healthcare center of Samen zone. After gathering and analyzing the data, these places were classified based on the hygienic principles; those devoid of building and health problems according to the hygienic standard are considered optimal and those having the mentioned problems are undesirable [8]. This paper uses SPSS (ver. 16) and K-score test.

RESULTS

This paper studies all the 353 accommodations of Samen zone in Mashhad including 309 inns, 15 residence units, 21 suites and 8 pilgrim centers. Out of these 353 units, 4.97% were closed, inactive and illegal; 4.5% were ramshackle and in bad condition; 6.87% were not investigated in the summer.

The Status of Personal Health Indicators:
After investigating personal indicators, it was found that 32.9% of accommodations had valid medical examination cards and 67.1% did not have them. 60.3% of these places had observed personal hygiene and general cleanliness principles and had obeyed the commands issued by health inspectors. But 39.7% had not observed the mentioned principles. Another study on personal indicators showed that 76.5% of accommodations observed the Article no. 4 of health regulations code of accommodations which was about being clad in clean and light uniforms and overalls, but 23.5% did not observe this article.
The Status of Building Indicators: Regarding building status, 83.3% of the accommodations had desirable floors. On the contrary, 16.7% did not have desirable floors. 73.9% have flat, seamless, light and strong walls, but 26.1% do not, which was the reason for the insects and rodents to enter the building. 69.1% of the accommodations had covered their walls according to their needs and occupational considerations while 30.9% had not paid attention to this issue. The ceiling of 56.1% of the studied accommodations was seamless and flat and did not have any cracks; they had light colors. The doors and windows of 55.2% were durable, in good condition, crackless; they were not rusty and could be washed. The condition and numbers of restrooms were proportionate and each had liquid-soap dispensers.

The Status of Equipment Indicators: The table surface of 97.2% of accommodations were clean, undamaged, seamless and their coatings were light and of a washable material. 98% had clean and undamaged chairs and benches. In 83.6% of accommodations, there were clean and new blankets, pillowcases and sheets for new passengers and 83.3% did not use dirty blankets, quilts, mattresses and pillows. 90.4% of the accommodations did not have any cracks, breaks, or dents in their beds.

**DISCUSSION**

Figure 1 shows the number of accommodation, most of which are inns. As can be seen in the second figure, just 15.17% of the accommodations observed the health and sanitary rules; therefore, considering the undesirable health condition, it is recommended that unhygienic placed get sanitized and get closed in case of disobedience. It can also be seen in this figure that 62.09% have optimization standards and they can be promoted; their promotion should be assigned to civil engineers who have to design buildings with more care and attention so as to prevent any optimization defects. The results indicate that few of the owners of these places have health certificates, so good training and continuous inspection will definitely decrease the number of unauthorized people and improve the personal health and hygiene. A similar study by Farzinnia et al. (2006) on accommodations in the city of Qom, also shows the low rate of observing sanitary principles; just 28.8% of these places had adequate hygienic standards and only 28.7% enjoyed having desirable optimization measures while 47.5% lacked them [9]. The study by Farzin and Khaza’i (2006) shows that 9.7% of accommodations are hygienically undesirable and 54.8% are optimized.

Employers and employees should be trained and get familiarized with health issues to improve the quality and standard of hotels in Samen zone. This improvement will protect the health and well-being of Imam Reza pilgrims. Nazemi et al. (2011) studied the health indicators of the city of Shahroud. This survey showed that 85% of the accommodations were desirable hygienically and 78% enjoyed optimization measures. 85% of the employees had valid medical examination cards and 70% of hotel staff wore suitable uniforms.

Shariat’s study on Hamedan inns showed that 80% of these places were undesirable hygienically, but all Hamedan hotels were in good sanitary conditions [11]. Dehghani et al. (2012) surveyed the health indicators of the hotels and inns of Shiraz. The results showed that in Shiraz, 58.2% had desirable sanitary conditions, 31.9% had optimization standards and 99% were undesirable [12]. Ghorbani et al. investigated the health indicators in the elementary schools of Rasht from 2006 to 2011; the results showed that 95% of the city schools and 54% of the village schools had drinking water piped into the schools. The average of the healthy drinking water was 82%. There has been no considerable change in the health indicators within the recent years [13]. Fahimi et al. (2013) took an extensive look at the health and environmental indicators of the parks and green fields of the city of Qom.
Based on the results, 83% of parks in terms of drinking status, 70% of restrooms, 78% of cafeterias and 39% of the lighting were in poor condition. Totally, 44% of the parks enjoyed acceptable health and environmental indicators [14].

The following issues are covered: the related psychological problems, like high job demands and low support, elimination of filth source and observance of health indicators and planning in order to improve the personal, building and equipment indicators; these can be done by the proper training and funding. Accommodations staff have to observe the hygienic principles to remove the optimization and health problems.

CONCLUSION

Considering the high number of poor quality accommodations, it is suggested that these places get sanitized as much as possible and get closed in case of defiance. Because few of the employees in these places have health certificates, they should be trained and continually inspected so that the number of unauthorized staff would decrease and the personal health would be improved.

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REFERENCES