

KERALA MODEL-THE ELIXIR OF SURVIVAL • RANNI SURVIVORS • RAJDEEP SARDESAI ON KERALA MODEL

KERALA CALLING

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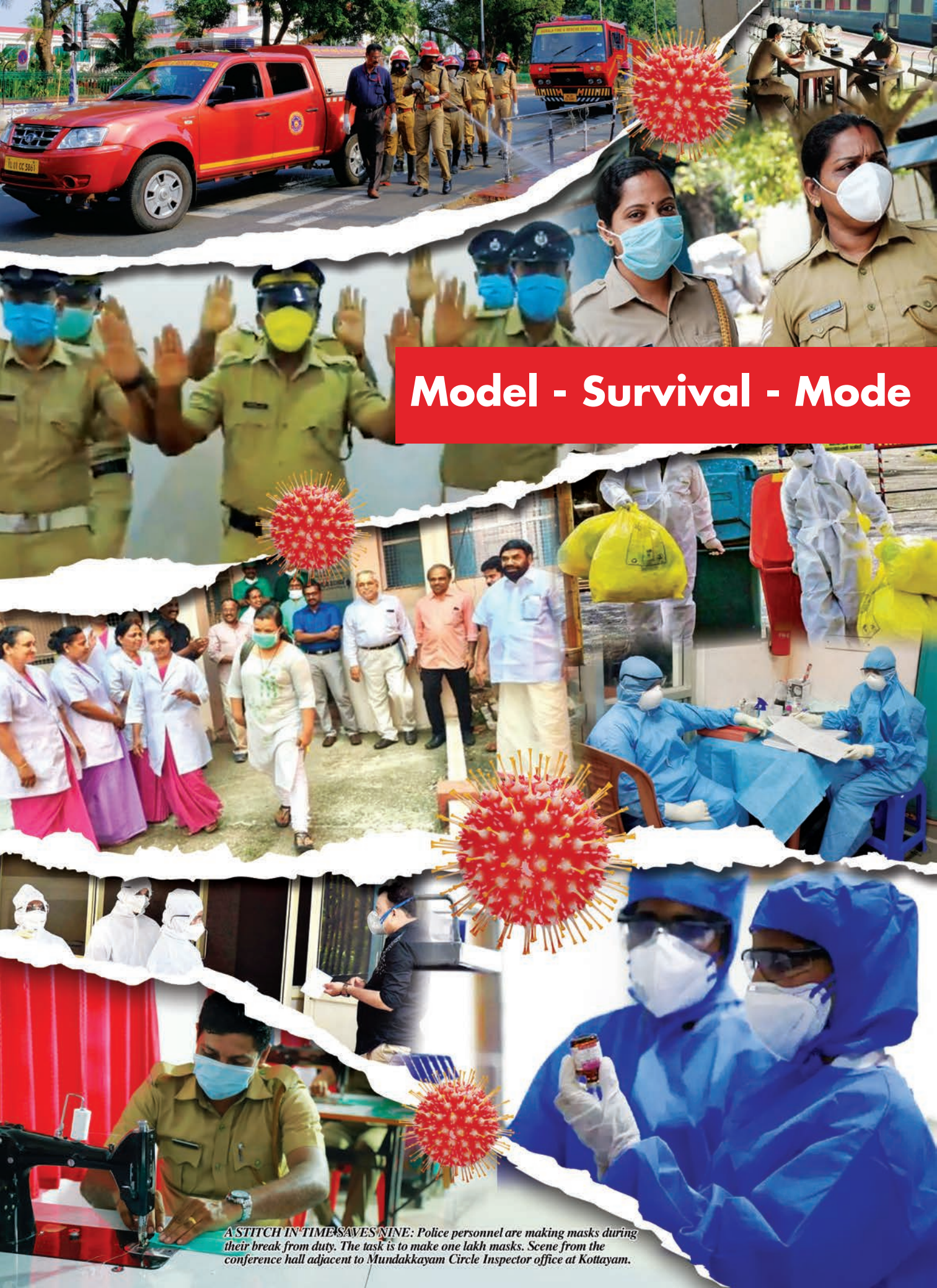
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2020 APRIL 01



COVID 19

KERALA MODEL



Model - Survival - Mode

A STITCH IN TIME SAVES NINE: Police personnel are making masks during their break from duty. The task is to make one lakh masks. Scene from the conference hall adjacent to Mundakkayam Circle Inspector office at Kottayam.

Ordeal of Leadership and Resilience

EDITORIAL

Crises like pandemics and wars are times to test our resilience and strength of character. Now four years in a row we have been tested by virus attacks, repeated floods and cyclonic storms. Kerala was not used to such calamities but only when it happened did we realise our steely resolve, our inner strength.

Kerala depends mostly on our foreign revenues, tourism, IT and taxes to run the needs of the state. That's exactly why a pandemic like Covid-19, which has its vice-like grip over the entire world, becomes a real test of character.

But since the first reported case more than 100 days ago, we have been on alert, working on a war footing. Our healthcare system and healthcare workers are more than competent. No wonder world's leading newspapers like Washington Post covers prominently the lead that we take in fighting Covid-19 while many developed countries are brought to their knees.

Chief Minister Pinarayi Vijayan has led from the front, and Health Minister K.K. Shailaja has been a pillar of strength in our efforts to fight corona virus. Our police force has played an exemplary role in making the lockdown period effective. The Chief Minister has made it a point to stand united, forgetting or setting aside, all political differences, to make sure that we broke the chain and survived the pandemic.

Both healthcare and socio-economic welfare of the people were a priority even when the entire state went into a lockdown. The government announced Rs. 20,000 crore relief packages to tide over the situation. The government made sure that the lockdown period would not in any way affect the smooth flow of life by making arrangements with all essential service sectors. Public healthcare system was strengthened by hiring more people and preparing additional facilities to face any emergency. Hospital beds, ICUs and ventilators were mobilised. Concerted efforts were made to ensure adequate domestic production and distribution of respirators, oxygen cylinders, biomedical instruments and personal protection equipments (PPE) and N95 masks for healthcare workers.

It is important that to survive a crisis a society has to function as one. Our motto in dealing with Covid-19 is 'Physical distance, social unity'. Though we made sure people kept strict social distancing, the government made it a point that it has always kept people close to heart.

The Chief Minister repeatedly says that Malayali expatriates living around the world are the backbone of our economy, and in times of their need the government will certainly be with them. While we wait for a decision from the Central government on bringing those who want to come back home, the State is ready to welcome them with testing and quarantine facilities.

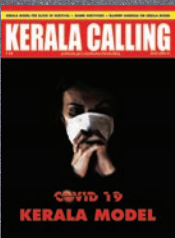
It is said that iron sharpens iron. It is true of Kerala. Natural calamities and epidemics have made us a resilient peoples sharp and ready to fight back.

U. V. Jose IAS
Editor-in-Chief

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COVER STORY / COVID 19

Kerala Model - The Elixir of Survival

Pinarayi Vijayan

Chief Minister, Kerala

The State Government is leading from the front in the fight against the pandemic. All out efforts from every stratum is the hallmark of our resistance. In fact we are taming the peril...

In just three months time, a mysterious illness that was first reported in Wuhan city in the Hubei province of China has put the world to a standstill. The cause of this illness was ascertained to be a novel Coronavirus – SARS-CoV-2, and the World Health Organization has named the disease COVID-19. More than 13 lakh people have been infected with this disease around the world, and the death has crossed 75,000. In India, more than 5,000 positive cases have been reported, and the deaths have crossed the 150 mark.

As on 8th April 2020, 259 people are undergoing treatment for COVID-19 in Kerala. We have cured 84 patients and restricted the mortality to 2 (0.58%). So far, even when highly developed countries have faltered



against the novel Coronavirus, we have been able to put up stiff resistance. We hope to retain this momentum, flatten the curve and ultimately emerge victorious in this long-drawn battle.

Detection and Containment

Kerala had started preparing for this new infectious disease as early as the third week of January itself. With the disease spreading further internationally and with an increase in the number of people coming to Kerala from foreign countries, the possibility of COVID-19 being reported in the state was taken seriously. On January 24, a control room was set up in the Directorate of Health Services. On January 25, required guidelines were issued to health officials and local self governments on the measures to be adopted. By January 28, control rooms were set up in the districts as well.

We went into a lockdown, even before it was announced at the national level.

Right from the very beginning, we have been screening and quarantining people coming in from infected areas. Contacts of positive cases have been rigorously traced and placed under observation. While taking these precautionary measures to prevent the spread of the virus, we have also

been testing at a rate that is unmatched by any other State, to accurately ascertain the spread. To date, 11,986 samples have been tested in Kerala. As there was a progressive swell in the cases, we went into lockdown, even before it was announced at the national level.

Once we announced a lockdown, public transport facilities were discontinued and the State's borders were closed down. At the same time, emergency services, hospitals, and medical stores have been allowed to function as usual. Stores selling essential articles are allowed to open for a fixed period of time. Restaurants are allowed to offer takeaway and

delivery facilities. We are ensuring adequate stock of grain and allowing movement of goods from across the State's borders to facilitate the supply of food as well. Personnel are being deployed in a phased manner to ensure that the government offices are functioning.

Financial Assistance

When there is a restriction on the movement of and interaction between people, it affects social and economic life. Well seized of this, and much before going into lockdown, on March 18 itself, the Government of Kerala announced a package to the tune of Rs. 20,000 Cr to tide over the ensuing crisis. Rs. 1,320 Cr has been set apart to disburse welfare pensions in advance, for two months, in March itself. This was disbursed already and before April 14, the government is planning to give welfare pension for five more months. For this, the government has to sanction Rs. 2730 Cr.

Rs. 100 Cr has been set apart to provide assistance of Rs 1,000 each for families that are not eligible for welfare pensions. In the next two months, loans to the tune of Rs. 2,000 Cr will be disbursed through the Kudumbashree scheme. The interest component will be borne entirely by the state government. Rs. 2,000 Cr will be utilized to provide work under the employment guarantee scheme.

Rs. 500 Cr has been set apart for the additional expenses incurred in public health on account of COVID-19 care. Food grain worth Rs. 100 Cr will be distributed to eligible families through

We hope to retain this momentum, flatten the curve and ultimately emerge victorious in this long-drawn battle.

the public distribution system. Apart from this Rs. 350 Cr was allotted from Chief Minister's Distress Relief Fund to procure and distribute a kit with essential provisions to 87 lakh ration cardholders. Rs. 50 Cr will be utilized to provide meals at just Rs. 20, as part of the Hunger-Free Kerala project.

1,323 community kitchens were set up in the length and breadth of the state. They cater to the neediest and serve meals thrice a day free of cost and those who could pay at a rate of Rs. 25 for the takeaway meal. In the state budget, it was declared that they would be set up in September to provide meals at Rs. 25.

Our motto in dealing with COVID-19 has been 'physical distance, social unity'.

Rs. 14,000 Cr will be utilized to clear all pending payments of the state government to institutions and individuals. Thus, Rs. 20,000 Cr is being infused into the state's economy on an emergency basis.

Assistance is being provided through the 44 welfare funds to artists, temple employees, madrasa teachers, head load and abkari workers, workers in various fields like construction, textiles, shops and so on as well. The fitness fee for auto rickshaws and taxis have been relaxed. Relaxation of one month will be provided in the quarterly taxes of stage carriages and contract carriages.

Concessions worth Rs. 23.60 Cr are being allowed in this manner. Electricity and water bills can be paid with a delay of up to one month without any fines. Entertainment tax on movie theatres has been waived for a month as well. Apart from the emergency infusion of cash into the economy, relaxations are also being provided to help people to overcome the crisis.

Focused Interventions

Discussions have been held with organizations of traders and businessmen to ensure adequate availability of essential materials during these times. Online facilities are being set up to ensure the delivery of essential articles, including vegetables and pulses to families during this lockdown. Voluntary services of organizations are being ensured to assist people in need. Books are being made available to those in quarantine with the assistance of publishing houses. Sufficient internet bandwidth is also being ensured, following discussions with service providers, so that while people stay at home, they have sufficient means of communication and entertainment. BSNL Kerala has announced that it will provide free data of 5 GB per day for a month, to their broadband customers.

A meeting of the State Level Bankers Committee was held, to persuade them to not undertake recovery proceedings during this time of economic turmoil and to provide relaxations on interests and repayments. Even the Kerala High Court had made a favorable verdict in this regard. But, on the Centre's insistence, the Supreme Court has stayed it. Even while moving towards a lockdown, we took all measures to ensure the protection of life. For life to sustain, it requires health and economic activity. The Government of Kerala has continuously worked to ensure



both, in these challenging times. We did not simply ask the people to stay at home; we even ensured that they would be able to sustain themselves while staying at home.

We have hired additional health personnel to further strengthen our public health care system. Around 1, 73,000 beds have been arranged specifically for COVID-19 patients. Hospital beds, ICUs and ventilators are also being mobilized as required. Buildings that can serve as isolation wards have been identified, sanitized and prepared, with the help of youth and voluntary organizations.

A special action plan has been undertaken in districts where the incidence of the disease has been

Kerala is giving a tough fight, to curtail the spread of this virus



comparatively higher. In just a few days, a hospital dedicated to treating COVID-19 patients was made fully functional in Kasargod. This pandemic manifests itself as a health emergency as well as an economic crisis. We are dealing with both.

Innovation and Optimization

Concerted efforts have been made to ensure adequate domestic production and distribution of respirators, ventilators, oxygen cylinders, biomedical instruments, and personal protection equipment and N95 masks for health care workers. The Super Fab Lab in Kochi under the aegis of the Kerala Startup Mission, industry partners and research institutions have been brought together, and a cluster of innovators and investors has been formed at the Industrial Park in Kanjikode, Palakkad in this regard. In a short span of time, we were able to develop a functioning prototype of an emergency ventilator system based on an Artificial Manual Breathing Unit (AMBU), with locally available materials, on an open-source platform.

The capacity building undertaken through the Aardram Mission has helped us immensely at this time.

WHO has repeatedly been asking countries to test more and more. The experience of countries that have been able to contain the spread of the virus point to how essential is mass and rapid testing. Now, Kerala has developed kiosks locally for this purpose. Our Walk-in Sample Kiosk (WISK) keeps

health workers safe while collecting samples. That is a model initially put forth by South Korea. We are imbibing knowledge from around the world, in our fight against this pandemic.

'Physical Distance, Social Unity'

As far as Kerala goes, the repeated onslaughts of viruses and contagious diseases have increased the resilience of our public health system. It has helped us to understand our pitfalls and undertake remedial measures. Experience from around the world in combating COVID-19 underlines

the necessity of robust public health care systems. Imbibing that lesson, we have taken adequate measures to strengthen Kerala's public health system. It needs to be noted that the capacity building undertaken through the Aardram Mission has helped us

The Government of Kerala announced a package to the tune of Rs. 20,000 Cr to tide over the ensuing crisis.

immensely at this time.

We have also ensured that society moves forward as one, to survive this crisis. Our motto in dealing with COVID-19 has been 'physical distance, social unity'. To keep the society together, we are keeping them informed at every turn, through press meets and official channels of communication, including social media.

We are facing a very extraordinary challenge. All our systems, commitment, love towards fellow human beings, are being combined for

Apart from the emergency infusion of cash into the economy, relaxations are also being provided to help people to overcome the crisis.

us to move forward. This pandemic has brought many developed countries to a standstill. Kerala is giving a tough fight, to curtail the spread of this virus. In order to stop it, we are working together. The State Government of Kerala is leading this fight right from the forefront.



COVER STORY / COVID 19

India's oldest Covid-19 survivors walk out of hospital defeating deadly virus

The Role-Model Ascendancy

ANAMIKA

Freelance Journalist

Governance with a mission, especially an all-encompassing care marks the worth of any Government. In a pandemic-struck world of today, this is what makes the State Government top-notch ahead of others.

When 93-year-old Thomas and 86-year-old Mariamma, the senior-most COVID-19 patients in Kerala, walked out of Government Medical College Hospital, Kottayam, in early April, the State was well on its way into an unrelenting battle against COVID-19. It had reported the first case on 30 January and the response was swift, error-free and well-coordinated, drawing heavily from its recent tryst with Nipah.

At a time when the contagion had brought the healthcare system of many developed countries to a crashing point, Kerala registered the highest recovery rate of 27.17 against a global 22.2 successfully tackling the virus transmission. As of now, 'Kerala model' of COVID containment, an ideal example of how to handle a pandemic, has grabbed global



attention with experts urging the world to replicate it.

Even before India reported the first COVID-19 case, the State Government had activated the emergency mitigation measures. A spate of committees to monitor the situation and a State-level control room was set up, leaving no loopholes.

The mitigation strategy was already in place when coronavirus first struck the State, which also was India's first case of the easy-spreading contagion. It was a medical student who had recently returned from Wuhan who first tested positive for COVID-19 and it was followed by two more cases, both students from the same province.

Kerala's second run-in with the virus happened nearly one month later on March 8 when five positive cases were reported from the Pathanamthitta

Kerala registered the highest recovery rate of 27.17 against a global 22.2 successfully tackling the virus transmission.

district. Three of them had a travel history to Italy, One of the worst-affected countries and the other two were their primary contacts. Event-free days and absence of new cases might have prompted anyone to lower the guard, but not the State Government. They sprung to action swiftly, effectively tracing contacts, isolating high-risk cases and placing the rest

under home quarantine. By the day World Health Organization (WHO) declared COVID-19 a pandemic, there were cases being reported on a daily basis and the patients included expatriates and tourists from European countries.

While efforts to contain the spread of COVID-19 were progressing efficiently, the Kerala government launched 'Break the Chain', a campaign that mainly involved a sanitation spree and lessons on social distancing. Water taps were installed at all public places along with bottles of hand

wash. All offices, shops, institutions, bus stands, and railway stations provided water and soap at entry points.

Hand sanitizers and masks were mass-produced with many organizations including Kudumbashree pitching in. A strong task force that included everyone from professionals to volunteers was formed and corona-care centers were opened across the state. The government also started releasing the route maps of infected persons, instructing all persons who were present at those points to contact the Health Department immediately. While ASHA workers were deployed to strengthen ground-level surveillance, a multitude of teams and special squads were taking care of all the activities related to COVID-19 prevention. Thermal screenings were held at airports and borders all the while reminding the public to stay extra alert.

When Prime Minister Narendra Modi declared a complete 21-day lockdown, throwing the entire nation into panic mode, Kerala was perhaps the only State all prepared for the ensuing chaos. In a first in the country, Chief Minister Pinarayi Vijayan had already announced a 20,000 crore revival

Kerala government launched 'Break the Chain', a campaign that mainly involved a sanitation spree and lessons on social distancing.

package, benefiting all sections of the society. Yet, the biggest challenge during the lockdown was keeping the supply chain of essential commodities and food grains intact. An elaborate network was formed coordinating with local bodies and community kitchens were opened state-wide. The



public movement was strictly regulated and all state and district borders were sealed allowing only freight transport of essential supplies.

In a first in the country, Chief Minister Pinarayi Vijayan had already announced a 20,000 crore revival package.

Free ration and grocery kits were distributed and online systems were arranged to ensure the home delivery of provisions. “Nobody will stay hungry in the State during the lockdown,” the CM said in one of the press briefings. All the destitute and homeless in the State were shifted to the newly-

opened shelters and community kitchens offered them free meals every day. At the same time, each district administration in Kerala was taking over dysfunctional private hospitals and other buildings, converting them into reserve treatment and quarantine facilities.

A couple of days into lockdown, the majority of migrant workers in other states were left with no job, food or shelter. When their mass exodus from the national capital was making headlines and the heartbreaking visuals of migrant families walking home to their villages from Delhi were doing rounds, Kerala had a different story. The entire population of the guest workers had been provided with food and safe accommodation by then. Regular medical check-ups were being held in their camps and

According to a report by Home Ministry, Kerala was operating the highest number of shelters for stranded migrant workers.

every symptomatic resident was moved to government-operated quarantine centers.

According to a report by Home Ministry, Kerala was operating the highest number of shelters for stranded migrant workers. Among the 22,567 government-run shelters, 15,541, which are

69% of the total, happened to be in Kerala.

In the capital city, a war room was opened at the State secretariat manned by top bureaucrats and directly supervised by the Chief Minister. He had the vision to foresee many a challenge and was the first to point out the psychological repercussions of lockdown and quarantine.

As Kerala enters the most crucial phase of COVID-19 containment, it's far ahead compared to all Indian states and even many nations.

As Kerala enters the most crucial phase of COVID-19 containment, it's far ahead compared to all Indian states and even many nations. The Health machinery of the State remains alert and its meticulous surveillance system will be operating extra time in the coming days to spot any possible cases. After all, that's how Kerala keeps emerging as the best performer in the healthcare sector. ●



WISK (Walk in Sample Kiosk)

WISK (Walk in Sample Kiosk), set up by doctors here to facilitate the collection of secretions as part of the Covid tests has become a favorite with neighboring states. Its popularity is owing to the fact that it reduces the use of a personal protection kit and allows you to collect sap in a matter of seconds. WISK's services will be utilized by Tamil Nadu Vellore Medical College and Thiruvannamalai Medical College. For this purpose 14 WISK kiosks were taken from Kalamassery last day.

Medical College RMO Dr. Ganesh Mohan, Additional District Medical Officer Dr. Vivek Kumar, Ardrum District Assistant Nodal Officer Dr. Nikhilesh Menon and ARMO Dr. Manoj are the masterminds behind the design of the WISK. The key feature is that health workers can collect samples in less than two minutes under this new system.

The sterilized kiosks have magnetic doors, exhaust fan, ultra violet light and other provisions, for the safety of collectors and suppliers. Each time the sample is collected, the glove and the adjacent chair in the kiosk will be sterilized. It is for the first time in India, that such a system has been prepared for Covid defense activities. The kiosk is being built at a cost of Rs. 40,000.

Covid - Kiosk can collect large quantities of samples in any given area after temporarily setting it up there. The most comforting thing is that health workers who are assigned to collect samples do not have to wear safety kits. WISK can also be widely used for things like the Rapid Test, said Dr. Nikhilesh.

COVID 19 - TELANGANA TEAM IN KERALA

A 12 member team of the Telangana State government is in Kerala to learn about the preventive measures Kerala took to contain COVID-19. They held discussions with Health Minister K.K. Shailaja. The Government of Kerala has arranged facilities for them to learn the State's well- equipped preventive system.

Though many cases tested positive, thanks to the highly vigilant surveillance system, it was contained successfully. The clinical precision in designing action plans as per the guidelines issued by the W.H.O. helped the State overcome the threat. Under the leadership of the Health Department, district and state-level measures were conducted.

State and District control rooms started functioning. Surveillance system made stronger at airports. People were rendered awareness. Call centres started functioning for clearing doubts of the public. Stringent measures were taken to tackle the issue of fake news.





COVER STORY / COVID 19

We care, Support imperative...

K.K. Shailaja

Minister of Health and Social Welfare - Government of Kerala

United we stand, no crisis can overwhelm us. Be responsible enough to abide by the compulsory restrictions in the time of distress. The government is there to support each and everyone.

COVID-19, which broke out in Hubei Province in China by the end of December 2019, has now spread to more than 200 countries in the world and become a pandemic. Precautionary measures were taken in Kerala from 18 January onwards, much before the disease was confirmed in the state.

All the guidelines for combating the infection, issued by the World Health Organization (WHO), the central Ministry of Health, and the National Centre for Disease Control (NCDC) were distributed to all the districts, and a State Control Cell started functioning on 24 January to co-ordinate all activities related to fighting the disease.

As Malayalis live in almost all parts of the world, Kerala made no compromises in remaining vigilant. On 8 March, COVID-19 infection was confirmed in three members of a family hailing from Pathanamthitta, who returned to Kerala from Italy on 29 February, and also in two relatives of theirs who were in close contact with them. This was when Kerala went into the second phase, taking greater precautions. The quality service extended by the Department of Health helped the



family overcome the disease.

Those who alighted at all the airports in Kerala as well as the Kochi,

The quality service extended by the Department of Health helped the family overcome the disease.

Beypore and Vizhinjam harbours were examined carefully, and individuals with symptoms were transferred to specially equipped hospitals. After systematic medical analysis, they were sent to a spell of strictly-monitored home-quarantine.

Isolation wards have been arranged for observing and treating patients at all Medical College Hospitals, General Hospitals, District Hospitals and prominent Private Hospitals. Besides, ICU facilities, including ventilators, have been arranged in all District Hospitals. Measures have also been taken to make these facilities available in more hospitals, if the need arises.

Arrangements have been made in more centres to facilitate examination of samples from suspected patients. The Department of Health has also taken steps to solve the physical and psychological problems of patients in isolation.

The Department of Health has also taken steps to solve the physical and psychological problems of patients in isolation.

The project “Break the Chain” was conceived by the State Department of Health in order to check the spread of disease. In these circumstances, when COVID-19 is spreading all over the world, the State Departments of Health, Social Justice, Woman and Child Welfare have joined hands with the Kerala Social Security

Mission to carry out the “Break the Chain” campaign in a bid to slow down the rapid spread of the disease in Kerala.

Nearly 60,000 workers from 33,115 Anganawadis in the state are actively participating in this disease-resistance campaign. They play

a prominent role in offering their services at the kiosks near prominent

The project “Break the Chain” was conceived by the State Department of Health in order to check the spread of disease.

institutions. They also undertake door-to-door awareness campaigns to inform people about COVID-19, especially about effective hand-washing methods.

As the number of COVID-positive cases is increasing in the state, the Department of Health is working on a war-footing to confront the crisis. The Department of Health has already devised Plans A, B and

Under the leadership of the Chief Minister, large-scale activities have been initiated by co-ordinating various departments.

C to handle such an eventuality. Nearly 6,000 isolation beds have been arranged for this purpose. Besides, Corona Care Centres that can house up to 21,866 patients have been identified. A decision has been taken to make new appointments, according to requirement. Under the leadership of the Chief Minister, large-scale activities have been initiated by co-ordinating various departments. The country and the state are under lockdown. Therefore for our own safety and the health of our society, let us all remain indoors till the restrictions are lifted. The co-operative attitude of all will definitely help us survive this COVID-19 pandemic.



COVER STORY / COVID 19

All-Out Efforts to Safeguard Labourers

T.P. Ramakrishnan

Minister for Labour, Skills & Excise - Government of Kerala

Labourers domestic or from other states, all are considered in equal terms and the same is evident in the testing time of corona too. All amenities are provided as well as means to tide over the job-starving days are initiated.

As the State Government is planning to have a jump towards more achievements, the situation coming out of the COVID-19 crisis has made the progress tough. The world itself is paralyzed. India and Kerala

are suffering a lot. The economy is going through an unprecedented crisis of the century and its revival may take a while to happen.

Not to mention, this situation has worsened the living conditions of the people, especially of the working class. The State Government has already initiated many sturdy actions to help the workers with a broad view of social uplift.

As I have earlier noted, the Government has declared a Labor Policy with a definite view to strengthen the Employer-Employee relationship and thereby to create a new work culture in the State. Receiving wages by the workers without doing any work has been banned and strong action has been taken to stop this unhealthy practice. The Department wishes to have a Plantation policy and Career

policy and actions in this regard are being carried out in a time-bound manner. The Skills policy is also being framed to have a better vision of the skill activities.

During the COVID-19 period, Special help packages have been declared by various welfare boards that have financial self-sufficiency. The details are as follows:

1. Abkari Welfare Fund Board: Rs. 5,000/- financial assistance, Rs. 10,000/- Interest-free loan to workers in the bar hotels.
2. Motor Workers Welfare Fund Board: Rs. 5,000/- financial assistance to stage carriage / contract carriage / Bus employees, Rs. 3,500/- to Goods vehicle, Rs. 2,500/- to Taxi workers, Rs. 2,000/- to Auto rickshaw / Tractor workers, Rs. 1,000/- to Automobile workshop workers.
3. Toddy Workers Welfare Fund Board: Rs. 10,000/- as interest-free loan and Rs. 5,000/- special financial assistance.
4. Head Load Workers Welfare Fund Board :
 - (a) To distribute Rs. 30 crores by way of the bonus before April 14.
 - (b) Rs. 24 crore as an advance in wages to unattached workers.
 - (c) Rs. 12 crore recovery benefit to unattached workers.
 - (d) Special financial assistance of Rs. 3000/- each 35,000 scattered workers, 39,000 unattached workers and 800 attached workers.
5. Kerala Shops and Commercial Establishment Board :
 - (a) Special financial assistance @ Rs. 1,000/-.
 - (b) For Corona affected members / family members Rs. 10,000/- assistance.
 - (c) For Corona suspected isolated members Rs. 5,000/- based on the medical certificate.
6. Kerala Building and Other Construction workers Welfare Fund Board :
 - (a) Rs. 200 crore special packages.
 - (b) Rs. 1,000/- financial assistance for members
 - (c) For seriously ill, Rs. 2,000/- financial assistance.
 - (d) Advance pension payment for the month of April.
7. Handloom Workers Welfare Fund Board: Financial assistance @ Rs. 750/- under the income support scheme.
8. Beedi – Cigar Workers Welfare Fund Board: Special financial assistance package for Rs. 2 cores under the income support scheme.
9. For Khadi Workers: Total financial assistance of Rs. 14 crores under the income support scheme.

Government has issued clear instructions to all concerned for payment of full wages to all workers including contract and daily wages during the period of lockdown.

Special financial assistance @ Rs. 1000/- were also distributed to all members enrolled under the Welfare Fund Boards under the Labour department, including Cashew, Tailoring, Ornaments, Agriculture workers, Eetta kattuvally, unorganized sector. Special packages for entire workers were also declared.

As we all know, the interstate migrant workers (Guest workers) are the major partners

of the workforce in Kerala. Many welfare schemes have been already introduced in the State for their

A special team of officers was entrusted especially to look after the welfare of Guest workers.

welfare. Now, at the period of Covid-19, the situation in other parts of the country is very pathetic, as far as the migrant workers are concerned.

In Kerala, the Government has provided them with all the basic needs. A special team of officers was entrusted especially to look after the welfare of Guest workers. Special camps were also started in all the

During the Covid-19 period, Special help packages have been declared by various welfare boards.

districts for this purpose. A total number of 17,646 camps have been set up in all 14 districts altogether and the number of inmates is 3,28,076 (April 8 statistics). Moreover, food and essential food materials and medicine were also supplied to these workers at their residing places, apart from these camps.

Government has issued clear instructions to all concerned for payment of full wages to all workers including contract and daily wages during the period of lockdown irrespective of the duty performed. The workers were also benefited by the State Government's decision to issue a free supply of ration and other essential commodities.



COVER STORY / COVID 19

Strategic Steps to Ensure Food Security

P. Thilothaman

Minister for Food, Civil Supplies, Consumer Affairs & Legal Metrology
- Government of Kerala

It is an unassailable fact that COVID -19 pandemic had strolled into the life of all human beings across the world. The COVID-19 virus has gobbled the economic security, Social Security and food security of all the nations except a few.

As the COVID -19 is identified in the State, the Government had swung into action and declared lockdown to restrict the spread of disease. In the meantime, the Food and Civil Supplies Department had taken all arrangements to ensure the procurement and storage of foodgrains and essentials for a period of next 3 months.

All FCI godowns are having hefty stock for eight months against the requirement. The Supplyco is the Authorized Agency for arranging the intra-State movement of stock from FCI godowns and to deliver at the doorsteps of FPS owners. In light of COVID-19 pandemic, the State had declared food grains to all people irrespective of whether they own the Ration card or not - free of cost. Those who are bereft of ration cards can use their Aadhar for identification.

The distribution of PDS articles is being made out through E-Pos transactions to ensure maximum transparency. Due to the COVID – 19 spread, identification through E-pos has been dispensed with. Community kitchens are functioning to provide food to the needy.

The Food and Civil Supplies Department had taken all arrangements to ensure the procurement and storage of foodgrains and essentials.

The government didn't hesitate to consider the difficulties of migrant workers too. With the assistance of local bodies, these people were rehabilitated properly in College Hostels. / Recreation Halls etc and food

is ensured. Apart from the above, the Government had started a scheme to sell meals at Rs.20/- to all through Kudumbasree units.

The intra-State movement of trucks had resumed momentum and for the time being there is no scarcity for vegetables and other essentials. All enforcement officers are put on alert to ensure the availability of essentials in all markets and shops at all times. The practice of hoarding / black marketing, undue profiteering is being severely dealt with.

- 232200.180 Metric Tonnes of rice free of cost, from Pradhan Manthri Garib Kalyan Anna Yojana.
- A quantity of 15 Kg of rice per family is being issued for those who have no ration cards.
- A quantity of 5 Kg rice OR 4 Kg Atta per person is being distributed to migrant laborers through District Administration
- Engaged in-home delivery of food article to those who are under home quarantine with the help of local self government institutions.
- Started to move maximum stock to ration shops and also started to lift quota for May 2020 from FCI godown.
- Regularly monitoring the prices of essential articles.

SUPPLYCO

The Corporation took the challenge of arranging foodstuffs for the people of Kerala. Arranging food for those in home isolation and quarantine centers was the first assignment. Foodgrains, pulses, spices, edible oil, etc were delivered to the local bodies as and when required by them.

Quarantine kits that contain major essential items to the isolated families are being distributed. Introduced e-commerce for the supply of essential items and supply of medicines was also ensured.

Required provisions for running the community kitchens were delivered to the local bodies on a credit basis. The government have entrusted Supplyco to distribute kits containing 17 essential items to entire ration cardholders in the state. Supplyco has made all the arrangements for ensuring food security in the state in the background of COVID 19.



DEPARTMENT OF LEGAL METROLOGY

The department is enforcing the Legal Metrology Act 2009 and the rules made there under. It covers weights and measures, packaged commodities rules and violations relating thereto.

Selling in short weight or measure, using unstamped and non-standard weighing or measuring instruments,

Required provisions for running the community kitchens were delivered to the local bodies on a credit basis.

exhibiting and selling packaged commodities without having the mandatory declarations as envisaged in packaged commodities rules are the main areas in which the department is giving special attention. The department is booking cases for the above said violations. Also, the department is taking action against the overcharging of packages of masks, sanitizers, and packaged drinking water of which government had notified as essential commodities and fixed prices.

Quarantine kits which contain major essential items to the isolated families are being distributed.



COVER STORY / COVID 19

COVID-19 and its Economic Impacts

Dr. C.S. Shaijumon

Associate Professor in Economics, Indian Institute of Space Science and Technology (IIST)



Yet another 'Kerala Model' is gaining acceptance world over in the time of the dreadful epidemic spread – Corona. The Efforts to tide over COVID -19 threats and the planning to revive the economy of The State is something more than exciting if not worth pondering.

The outbreak of COVID-19 started from China, the country contributes more than 35% of world growth, 20% of world trade and 19% of world population. The situation got worsened when the disease spreads across the other two major regions of the world, the United States of America and European Union. The three regions together contribute 60% of world growth.

As a country with 17% of world population and 75% of GDP from consumption sector, Indian economy got a severe blow due to economic slowdown of the world economy because of COVID-19.

The State of Kerala accounts for about 2.8% of India's population, and its economy contributes nearly 4% to the Indian economy. Economic activities are currently nearly paralysed over the virus scare in the state. Tourism and remittances sectors,

which together contribute 10% of state GDP, have completely stopped and have led to thousands of people jobless. The sectors that usually contribute fast growth in GSDP like fishing and aquaculture, construction, manufacturing, trade, hotels and restaurants, social services mainly education and health, public services and professional services etc are almost stand still and affected millions of people directly and indirectly. Alcohol, which forms a significant part of the state govt's revenue, too is banned.

The State of Kerala accounts for about 2.8% of India's population, and its economy contributes nearly 4% to the Indian economy.

Kerala produces 97% of national output of pepper and accounts for 85% of the area under natural rubber in the country. Coconut, tea, coffee, cashew, and spices — including cardamom, vanilla, cinnamon, nutmeg etc are already in crisis because of the worst hit of flood and now because of the closure of international markets. It is expected that the

economic growth of the State will go down by one percentage points due to the impact of corona virus and which can lead to unemployment because of the companies generate less revenue and lay off workers to cut costs.

Kerala's economy is a consumerist one that has been propped up by massive remittances from non-resident Keralites. It is estimated that about Rs 200 crore daily sent to the state by non-resident Keralites. COVID-19 has affected all most all Gulf countries and it affected the non-resident Keralites working there.

Solution

Immediate solution for the economic crisis of the state due to corona virus is to help the people who lost their jobs with minimum income for meeting their day to day expenditure. The government of Kerala has announced an Rs 20,000 crore package to tide over the corona virus crisis that has drained the state economically. Kerala became the first state to announce such a package in the country.

Tourism and remittances sectors, which together contribute 10% of state GDP, have completely stopped and have led to thousands of people jobless

Any government cannot do everything for the people of the state at the time of crisis. As citizens, we should help the needy people with income and other essentials for their life sustenance. Paid leave should

be allowed to regular workers, housemaids etc, till the end of lockdown period. NGO's and voluntary organisations have to come forward for helping the government for implementing micro level planning and activities.

The Kerala economy will definitely be affected temporarily maybe for the next three months to one year. Several policies have been announced by the government for helping the people in the time of crisis. But the major problem of the government is its poor financial strength.

The state can come out of the economic impact of COVID-19 very quickly through a very meticulous micro-level implementation of various measures announced by the government. Kerala is on the way to show the world yet another 'Kerala Model' in fighting against a pandemic virus spread. The efforts made by the state already have got wide appreciation nationally and internationally.

Paid leave should be allowed to regular workers, housemaids etc, till the end of lockdown period.

Macro level planning and local level implementation with micro management is the key for this new Kerala Model against COVID-19. This is not only a health model that we can showcase to the world, but also a socio-economic-management model by using limited resources to fight against a very difficult situation like COVID-19.



SHARJAH	ON TIME
MUSCAT	SCHEDULED
DELHI	SCHEDULED



COVER STORY / COVID 19

The Threshold of Recovery...

Dr. Indu P.S.

Prof. & H.O.D, Dept of Community medicine, G.M.C Thiruvananthapuram.

Dr. Malathi M., Dr. Pranav V. Vasisht, Dr. P. N. Sorna

Junior residents, Dept. of Community medicine, G.M.C Thiruvananthapuram.

The competent if not fail-safe health care system is here to combat any unruly disease threat. Adhering to instructions from these authorities is the best option for safety.

The beginning of the year 2020 witnessed a dramatic upsurge in the number of unusual pneumonia cases reported in China, which, as not many experts could predict, progressed to a nightmare of a pandemic affecting populations across the globe in an unprecedented pattern. As it turned out, a novel Coronavirus was discovered as the causative agent, causing Coronavirus disease, COVID-19 which affects the respiratory system. The virus belonged to the family of beta coronavirus. The virus has been named as Severe acute respiratory virus 2 (SARS CoV-2)1.

As of now, it has grown to huge proportions in almost all countries of the world, the worst affected being Italy, USA, Iran, and Spain, with around 16, 10,909 individuals affected worldwide and causing

nearly One lakh deaths.

In India, nation-wide lockdown was announced on 24 March 2020. It has now been extended for another 14 days. It is also a message to the community that the alertness is not to be lost and responsible behaviour is to be followed subsequently as well.

The health system of Kerala had responded promptly and exemplarily to the threat of this disease. Travellers from affected countries were identified and placed under isolation, including both hospital and home isolation. Surveillance systems, for contact tracing and data consolidation, were put in place. By 3rd March, with only one positive case, the number of people in surveillance reached around 2200. The contacts of the positive cases were traced meticulously, and adequate guidance was given.

Currently, samples are tested in more than 10 labs across the state. Control rooms were set up in every district, with minimum two hospitals identified for isolation in each district. Screening facilities with designated specialised teams were arranged in the various ports of entry including airports and seaports.

Health advisories were issued regularly to the people who are travelling in and out of the state, for that in-home isolation and for the general public, in view of the alarming rise of cases worldwide. Multiple platforms were utilised for health education, regarding cough etiquette, maintenance of personal hygiene and adopting other personal protective measures, like proper handwashing, appropriate use of gloves and masks. Motivational messages were regularly being sent to people under home isolation.

Various committees were convened. Establishment of single window communication channel, convening State disaster management authority for related purposes, constituting human resource management teams and training monitoring units, dissemination of related information through videos and training across different levels including in educational institutions and government offices are the various measures that aided in forming public health response that helped the authority to manage the status of the epidemic.

All positive patients are admitted and given specialised care in Medical colleges in each district, and in District hospitals in those districts with no medical colleges. Government Medical College, Ernakulam turned out to be the first hospital in Kerala, to be designated entirely as a COVID hospital.

Psychosocial support through telecounselling and teleconsultation facilities, for other medical illnesses, has been arranged. Home isolation is being ensured through teams at levels of local governance.

According to the existing evidence base across the world, around 80% of infections might pass uneventfully as no or mild fever, cough or sore throat, especially in healthy individuals and children, while approximately 15% may progress to moderate disease, with the progression of symptoms requiring oxygen therapy or even ICU admission and 5 % may get very critical requiring intensive care therapy and specialized care.

Elderly and patients with underlying medical problems like

hypertension, heart disease or diabetes, chronic illnesses like bronchial asthma, COPD, chronic liver and kidney disease and patients on long term medications like steroids are more likely to develop serious illness. Hence, such people should follow strict personal hygiene and social distancing measures to avoid acquiring infection from other mild or moderate COVID-19 positive patients.

People acquire COVID 19 infection from others who are infected with the virus, spreading through small droplets which get dispersed when a person coughs sneezes or breathes out. Based on the information available to date, COVID 19 is not air-borne.

COVID 19 can be transmitted in all areas including areas with hot and humid weather. So, regardless of climate, protective measures should be adopted. Novel coronavirus cannot be transmitted by mosquito bites. Similarly, spraying alcohol and chlorine cannot kill the virus already inside your body. Alcohol and chlorine can be used to disinfect surfaces, but they need to be used under appropriate recommendations.

Basic protective measures against COVID 19

- Proper handwashing following all the steps
- Maintaining social distancing
- Avoid touching Eyes, Nose and Mouth unnecessarily
- Practising cough etiquette
- Responsible behaviour – informing health care authorities appropriately and following the guidelines and advisory strictly
- Proper use and disposal of masks and gloves



COVER STORY / COVID 19

The Psycho-Social Support

Dr. Kiran P.S.

State Nodal Officer, Mental Health Programme

Providing mental health support is one of the core areas where scrupulous planning has been made during the lockdown days. All available avenues were explored to meet this end a success.

During the coronavirus outbreak in Kerala, it was decided to provide psychological support to the persons in Quarantine/Isolation and their family members. On February 4th, Psycho-Social Support Teams were constituted in all districts, under District Mental Programme (DMHPs). Psychiatrists, Psychiatric Social Workers, Clinical Psychologists, Social Workers and Counsellors started working in the entire state under DMHPs.

As Lock down was implemented, a psycho - social helpline was arranged in all districts (in addition to the DISHA Helpline Number for the entire state). All persons in Quarantine/Isolation are being called, given reassurance and District Helpline number is provided to call back in case of any psychological need. Psychiatrists/Clinical Psychologists/PSWs address the psychological needs if any and follow up calls are given every 3 to 5 days. When the number of persons in quarantine raised drastically, counsellors from ICDS, ICTC and NHM were pooled under the PSS Teams in districts. More than 1058 Personnel are working in the entire state to provide Psycho-Social Support. Calls on social needs (like food, medicines and medical consultations) began to increase and they were met through ICDS, Youth Welfare Board and LSGs. Stigma related issues were mostly due to the spread of fake information, social isolation and social media harassment. Measures were taken to create awareness in those areas.

Targeted Services were started all over the state under PSS Team whereby reassurance calls are made to 1) Mentally ill patients on treatment, 2) Children with special Needs, 3) Guest Labourers, 4) Personnel employed in corona care, 5) Elderly people living alone. When the number of alcohol withdrawal cases began to increase, Community de-addiction guidelines were prepared with the aim of treating the majority of the cases in Primary Care centres. A panel of Psychiatrists was also formed in all districts to help primary care Medical Officers.

1, 81,347 persons in quarantine/isolation were given reassurance calls till the first week of April. Among the psychological issues noted were Stress, Anxiety, Stigma, Social Needs and Sleep impairment. 74,463 follow up calls were made for those with above issues.



COVER STORY / COVID 19

The 'Oneness' of UK Malayali diaspora

Balagopal, Kent



Along with the rest of the world the United Kingdom too is fighting the COVID pandemic. The Malayali diasporas' professionals, key workers, essential services staff, volunteers, community organizations, art groups are all at the forefront with all their might to help the cause.

With no dearth of health professionals within the community, the majority of them are aware and knowledgeable about the pandemic, and taking sensible precautions by not allowing the virus to inflict major harm on them.

Deaths within the community

12 deaths have occurred within the UK Malayalee community until March. Out of them only one of them is reported to be Covid related.

Following the nationwide lockdown on March 23, there has been a "ban on public gatherings of more than two people," alongside instruction to avoid all but necessary travel.

The community members who lost their dear ones following the lockdown are going through a difficult phase in their lives. Some, who wished to have the funeral in

India had their request turned down due to the international lockdown of flights.

Community Organizations

United Malayalee Organization has set up a group of medical team including doctors, nurses, along with a team of volunteers who can give specialist advice in matters related to health, finance, social, legal and job-related matters.

Calls to the helpline number 02070626688 will be signposted to a team of around 40 doctors and 10 specialist nurse managers who will address clinical queries and give advice as per the guidelines given by Public Health England and Health Protection Scotland.

Union of UK Malayalee Association (UUKMA)

Union of UK Malayalee Association (UUKMA), an umbrella the organisation of Malayalee association in the UK has set up a nationwide volunteer group under the auspices of their own UUKMA Charity Foundation to stay in touch with each and every community member. Volunteers are set up in different regions of the UK. Details are available on www.uukmanews.com

Malayalee Association of the UK

Immediately following the epidemic showing a rapid increase in elderly clients the Malayalee Association of the UK (MAUK) sprung in action to help the elderly and vulnerable in the community.

MAUK has decided to check-in regularly on elders in the community and call them for a friendly chat. Their volunteers will also help in delivering essential items, including books and magazines for them to keep engaged with healthy activities. More details can be had from their website www.mauk.org.

Coffee and Poetry (Kattankaappiyum Kavithayum)

Coffee and Poetry (Kattankaappiyum Kavithayum), the literary group of Malayalee Association of the UK (MAUK), has set up regular weekend Cyber Meet where participants from different parts of the UK log into hold a live session of interaction through rendering poems, talks on relevant topics and also disseminating topics of relevance. Facebook Page - <https://www.facebook.com/groups/coffeeandpoetry>

Visa extended for those on Work Visa

As part of the national effort to combat coronavirus, doctors, nurses and paramedics will automatically have their visas extended, free of charge, for one year. The extension announced on 31st March by the Home Secretary Priti Patel will apply to around 2,800 migrant doctors, nurses, and paramedics, employed by the NHS whose visa is due to expire before 1 October. The extension will also apply to their family members. The extension to NHS visas will be automatic, there will be no fee attached and it will be exempt from the Immigration Health Surcharge.

The community members who lost their dear ones following the lockdown are going through a difficult phase in their lives.

United Malayalee Organization has set up a group of medical team.

Doctors, nurses and paramedics will automatically have their visas extended, free of charge, for one year.

The Loka Kerala Sabha has launched a simple one page online registration.

Loka Kerala Sabha to assist Malayalee students

Overseas Malayalee students in the UK those who have been caught up in lockdown due to the Coronavirus are also offered assistance by the Loka Kerala Sabha unit based in the UK. The Loka Kerala Sabha has launched a simple one-page online registration. Students can click on the link <https://bit.ly/3bAy1QK> and one of the volunteers will get in touch with the students.

Trust the Effective Leadership.

One of the senior-most and much sought-after Journalists in the country, **Sri. Rajdeep Sardesai** elaborates his views regarding the Corona threat and the manner in which he sees the Kerala model in fighting corona. He talked to Our Assistant Editor **L. Hemanth Kumar** on the phone. Excerpts from the **Exclusive** interview...



Q. What do you think about the corona crisis and how India dealing the situation as compared to other nations?

The good thing is that India has moved early on the lockdown. I think that has made a difference. Yes, we should have tested more and I still think February was a wasted month at the Centre. But in comparison with the UK or the US even Spain and Italy, India moved early so I think that is a good sign. But we cannot be complacent and I think you know this is a long fight. This is not a T20 cricket match, which will be over in 2 or 3 hours and we get excited and play victory. So, I think we are at the crucial stage in India where the next 6 weeks will decide how effective we have done. But states like Kerala have shown the way that it is

possible to contain the spread of the virus. I think states like Kerala have planned early and that has helped in a way. Kerala has by planning early ensured that the state was better prepared.

Q. How far chief ministers in the country have got towards containing the pandemic?

I think one thing is clear that what corona virus has shown is that chief ministers matter much more than we can imagine. There has been too much of focus in the last 6 years on what happens in Delhi. All the focus is on national leadership. Actually, the real leadership lies in our state capitals. Our chief ministers by and large all of them cutting across party lines have done a very good job. In general, most chief ministers have



been conscious that they need to lead the way. It is a good sign that chief ministers are in a way more connected to the ground than many people sitting in the durbars of Delhi. This battle has to be won by the leadership of chief ministers and centre-state co-ordination.

Q. Where would you position Kerala CM in dealing the novel corona threat?

Kerala CM has done very well; there is no doubt about it. But in the end, fighting a virus is a team effort: so, TEAM KERALA deserves credit. The team led by the Chief Minister including the Health Minister, the entire government machinery, officials, citizens, health workers and so on. Kerala has a strong public

health system and the CM also seems to be very, very focused on this challenge. Maybe Kerala has learned from its past experiences, like the Nipah crisis. I don't want to rank states because that would be unfair but few will dispute that Kerala has made a great effort in controlling the virus.

Q. How good is the strategy adopted by Kerala in preventing the disease spread?

I think what is very clear is that the strategy has to be about containment, it has to be about planning and effective use of government machinery. On all of these aspects, Kerala has done certainly very well. They have used the public health system; they have used local self- government to try and ensure that the virus is

contained. I keep saying that what Kerala does today India has to do tomorrow. And I mentioned that Kerala has shown the way: it is possible that if you have a focused approach then you can overcome even a corona virus.

I also want to say that Kerala seems to have risen above all social and political divides when fighting the virus:



Actually, the real leadership lies in our state capitals Kerala CM has done very well; there is no doubt about it.

that is a great sign for the rest of India. Remember, the virus knows no religion, so we all need to fight it unitedly.

Q. Can you elaborate a little bit on this statement that what Kerala thinks today is what the country follows the next day?

If you look at the lockdown itself, Kerala had implemented the lockdown even before the national lockdown was announced and began quarantining people even before the rest of the country began. It also carried out the screening of people who were coming in from outside more rigorously even before airports in Delhi and other places did so. Kerala with its emergency health facilities began setting up camps for those who are affected and conducted emergency testing before the rest of the country started it.

So, I think in all of these aspects whether the screening, testing, public health facilities being made available, communication, lockdown, in all these key parameters, Kerala started before the rest of the country began. I think the planning that Kerala did in February itself has helped in the month of March and April.



The Chief Minister Pinarayi Vijayan has emerged as a strong and effective leader in the time of the crisis.

Q. Another thing is that every state in the country is facing financial difficulties for the time being. Did the Kerala Chief Minister was able to alleviate doubts regarding the impact

of the pandemic in the state's economy?

I think this is a big challenge and Kerala has also shown the way in terms of social security. The big package that was announced of Rs. 20,000 crores providing free ration and other needs, that was good because you are providing some social security to the poor. But there is a bigger challenge which Kerala and every state need to address: How will you revive the economy? Because while the health emergency is there, there is also is an economic emergency.

Q. How good is Kerala's health care system according to

you and even natives from foreign land acknowledge the same as they are recovered from the dreadful disease?

Look, for decades, Kerala's public health system has been praised. It is a model for the rest of the country that if you invest more in public health and education, then at times like corona it will come to your advantage. Kerala is the export hub for nurses. The quality of nursing facilities gives Kerala a large and able human resource. The fact that Kerala has focused on education and health puts it a huge edge over other states at times like this. There is no doubt in my mind that Kerala



The fact that Kerala has focused on education and health puts it a huge edge over other states.

has shown the way in terms of public health investments to the rest of the country.

Q. How will you rate Kerala Chief Minister's overall performance during the corona start and do you find a pragmatic leader in Kerala Chief Minister? If so why?

Kerala has done a very good job. There is no doubt. And the Chief Minister Pinarayi Vijayan has emerged as a strong and effective leader in the time of the crisis. Actually, the real leadership lies in our state capitals.



What Kerala does today India has to do tomorrow.



COVER STORY / COVID 19

“I got world-class care at Kerala” - Brian

Balagopal Kent



Life started at the couples from UK in the form of Corona Virus. But they were finally elated to see themselves in a new life. Excerpts from their interview...

British couples Brian Lockwood and Jane Lockwood from Norwich in the UK were all prepared to leave after their tour of Kerala on 15th March, and just when they were about to board the flight from Kochi to Dubai the health officials in Kerala broke the news to them that Brian has been tested positive for COVID-19. Brian, who hasn't been to any hospitals for some years, couldn't come to terms at first when the doctors shared the findings with him.

Brian then just saw things unfolding in front of him. Soon he was shifted to Ernakulam Medical College and from Triage, he was moved into isolation immediately and gets separated from the wife who was luckily tested negative for the virus. With no drugs yet identified to fight the Corona virus, doctors at the Ernakulam Medical College had to make some serious decisions as Brian was severely ill and therefore any time delayed would have had adverse effects.

The doctors at Ernakulam Medical College decided that they should risk HIV antiretroviral drugs on him to contain the infection and they consulted with Brian and Jane and obtained their permission before they started the anti-HIV drugs which later paved way for Brian's recovery.

The team led by Dr. Jacob and Dr. Fathahudeen infused in Brian the confidence and kept his wife informed and updated during the whole time they were isolated. Finally, after seventeen days Brian reunited with his wife, which he terms as the most touching moment as all happiness, was turned sour when he ended up in hospital separated from his wife, away from home and finally, it was all an emotional moment for him. Brian and Jane spoke to Kerala Calling in this exclusive interview from where they are recuperating.

Fishers Ecstatic despite the 'Odds'

H. Basil Lal

Governing council member - Kerala University for Fisheries and Oceanographic studies.



'Kerala's Army' was poised to encounter yet another challenge – this time it is not the floods but a dreadful virus – Corona. Deprived of their livelihood owing to the lockdown, they were threatened by penury and more. In came the support in the form of constrained fishing, much to the delight of the clan.

Coronavirus spread has affected people from all walks of life these days. The country and our state are also in the throes of the lockdown which is affecting most of the milieu especially the daily-wage earners and the down-trodden, and the fisher community in particular.

Having know-how regarding the difficulties faced by the fisherfolk, Fisheries Minister J. Mercykuttyamma initiated to advance a mechanism for undertaking optimum fishing activities while adhering to the basic norms of the lockdown, For which these decisions were taken -

- 1) To convene village level meetings of fishermen.
- 2) Only traditional fishermen plying Kattamarams and plywood boats would be allowed.
- 3) Once the craft reaches the shore, the fish caught would be taken to the fish landing centers of the respective villages of the fishermen.
- 4) The present system of auctioning is to be discontinued and a pricing mechanism should be evolved whereby the Harbor Management Society would decide the necessary price of the fish.
- 5) To ensure social distancing and to prevent congestion, strict restrictions are to be imposed on the number of people attending to the catch, keeping of accounts, the number of vehicles to be

allowed in the harbor and other related activities.

- 6) It was also decided that each lot would be weighed only by the weighing machines provided by the local fishermen societies.
- 7) The Matsyafed is to take the lead in procuring the initial landings each day, which is to be disbursed to individual vendors.
- 8) Additionally, Matsyafed will continue to retail the catch through its own centers like Anthipacha etc.
- 9) Over and above, the remaining catch, if any will be sold to the fish traders.

The children of the sea were rewarded with a price that commensurates with their labor. All the crafts which landed received a decided, fixed price throughout the landing period. The role of the police was such that no commend would be sufficient to enumerate the actions taken to implement the decisions. In Kollam, the land of the biggest fishing harbors, A.C.P Pradeep Kumar was monitoring the activities in coordination with the Fisheries Department and the Harbor Management Society on a day to day basis. The same kind of support was provided in other harbors too. These measures will act as a beacon to lead other parts of the country in restructuring the fishing sector so as to alleviate the woes of the fishermen.





INTERVIEW / COVID 19

Ranni Survivors

It was on his grandfather's request that Rijo Moncy, who was scheduled to come to India in August this year, advanced his trip from Italy, and accompanied his parents to Pathanamthitta in March. The threat of contracting COVID-19, that was spreading panic all over the world, had not crossed their minds at all. Today, cured of the infection, the family is greatly relieved.

What symptoms did you have?

We did not exhibit any symptoms at all. That's the truth. When Papa's brother tested positive, our samples were also examined since we had come from abroad. Even then we were sure we did not have the disease. But the results indicated that we had.

What was the treatment procedure? What kind of care did you get in hospital?

We were admitted to hospital on 6 March, and discharged on 30 March. We received very good treatment from Kottayam Medical College Hospital. My father is 55, and my mother 53. My grandfather is 91 and my grandmother 88. All of us were given very good care. In these circumstances, Italy does not give so much of medical attention to its aged population. Here, all the doctors,

nurses and the other staff extended very good service.

Did you receive any counselling?

Definitely! In fact, we feared the society more than the disease. At one stage, it was propagated that we had concealed our illness deliberately. That was absolutely false. The part of Italy where we stay is still untouched by the disease. Besides, we did not have any kind of awareness at the time of our departure. We must have contracted the infection during the flight or from the airport. All the people we visited were our relatives.

Will anyone try to spread disease among their own kith and kin? But as we remained in hospital, in fear of the society, our counsellors were like Gods. They spoke to us daily, and whenever we wanted they came to our rooms and consoled us. Besides, they rang us up every day, enquired about our welfare, and gave us psychological help.

What other help did you receive from the government?

Our greatest debt of gratitude is to the government and the health workers, and all who stood by us. The Chief Minister, the Minister for Health and others used to call regularly to find out details about us and console us. We received a lot of help from the panchayat as well. Although we have recovered and come back home, we have to remain in quarantine for 14 more days. All the support and essential goods we need during this period are given by the panchayat and ASHA [Accredited Social Health Activists].

Although you tested positive, are you happy that you're back in your mother land?

It is indeed a great blessing that we are here. My aged grandparents have come back to life solely because they are in Kerala. The same is the case with my father who has a heart problem. He's alive only because he was treated here. We have a government which believes that all lives are equally precious. At present, the other countries are leaving the aged to die. But our land is different, and I feel very proud about it. Very happy too.



KOTTAYAM, CHENGLAM SURVIVORS

Robin K. Thomas and Reena, who hail from Kottayam district in Kerala, are happy to have received a new lease of life. They had tested positive, following interaction with relatives from abroad, and were under treatment for COVID-19 at the Kottayam Medical College Hospital. The couple returned home on 28 March.

What symptoms did you see in yourselves?

I had cough, and my wife had sore throat. We did not take it seriously in the beginning. But when our relatives tested positive, we contacted a friend who is a Health Inspector. Immediately we were removed to hospital in a vehicle sent by the Department of Health.

What were the treatment procedures? What kind of care did you get in the hospital?

We spent 21 days in hospital. As there is no medicine for this disease, we were given antibiotics for cough. We did not have to take any other medicine. The doctors, nurses and the rest of the staff at the hospital did all they could.

Was counselling made available?

Of course! Remaining within a cubicle for so many days with no contact with the world is a very traumatic experience. The counselling helped reduce our stress. The counsellors called us every day over phone, made enquiries, and gave us emotional support.

What other help did you get from the government?

As we enter this new life, we have many to thank. We are most obliged to the government, the health workers, and everyone else who stood by us. The Chief Minister, the Minister for Health, and other political party leaders called us regularly to find out about our condition, and consoled us. People in charge of our diocese also made enquiries. The panchayat helped us greatly. We are also very grateful to the ASHA (Accredited Social Health Activists) because they took care of my aged parents by reaching them medicines and other materials when we were in hospital. They also took meticulous care of my parents' health. ●



COVER STORY / COVID 19

The 'Extra' Care

Since the inception of the pandemic – COVID 19, the state along with its medical care system is delivering quality and caring service to the needy. Now it's time for that 'extra' morsel...

Despite the efficient care given to the Corona affected patients a medical college hospital in Kerala has made sure that the patients and those under observation feel at home through providing nutritional food free of cost.

While all government hospitals in the state serve free bread, eggs and milk to patients, the Government Medical College Hospital in Kalamassery, in Ernakulam district has gone a step further. The hospital is serving meals thrice a day to all patients in its coronavirus-specific isolation ward, absolutely free. Apart from traditional cuisine, western dishes are also served.

“The meals are prepared at the canteen of the men's hostel of the med-



ical college according to the nutritional requirements of the patients,”
– Said resident medical officer Dr. Ganesh Mohan.

The Medical board of the college decided to serve the special meals to the coronavirus patients and those under observation. The meals meant for the coronavirus ward are packed by the students of the medical college attached to the hospital to maintain the highest standards of hygiene.

The patients and those under observation feel at home when it comes to having nutritional food.

The traditional breakfast is served at 7.30 A.M., dishes include dosa, sambar, two eggs, tea, one-liter mineral water bottle, a packet of tissue paper and a newspaper. Fruit juice is served at 10.30 am, which is followed by lunch at 12 noon.

The lunch has three chapattis, rice, fish fry, thoran, a curry, curd, and a mineral water bottle.

Tea is served at 3.30 P.M with biscuits, banana fry or vada. Dinner served at 7 P.M comprises appam, vegetable stew, two bananas, and mineral water. The western breakfast menu has soup, fresh fruits, and two boiled eggs. Fresh pineapple juice is served at 11 A. M and 4 P.M. Toasted bread, cheese, and fruits are served for lunch. Dinner served at 7 P.M has toasted bread, scrambled eggs, and fruits.

Boiled milk is served on demand for children. The food was being

funded by the hospital development committee which is part of the state

The hospital is serving meals thrice a day to all patients in its coronavirus-specific isolation ward.

health department. A medical nurse supervises the supply of the meals to each patient based on their requirements.

Apart from traditional cuisine, western dishes are also served.



COVER STORY / COVID 19

Crisis and Opportunity for India's Healthcare System

N. Bhadran Nair

Executive Editor, Indian Science Journal



Systems are there to deliver the 'goods' in testing times. When an unprecedented crisis of colossal scale hits, fail-safe initiatives are implemented. Here comes the significance of our healthcare system.

India is facing its biggest national crisis now, perhaps for the first in its independent history. In fact, the present health emergency due to the Novel Coronavirus that has affected 211 countries is the gravest global crisis since the Second World War. Several advanced countries like the USA appeared helpless at the onslaught of the infinitesimal virus, scrambling for ways to contain it, while its means were inadequate on many counts.

When Novel Coronavirus was first detected in a fish-seller in Wuhan, it did not take much time to spread like a wildfire in Hubei province of China; hundreds of lives succumbed to the viral infection. With the outbreak of Coronavirus, foreign nationals started trooping out of the country. And with them, many carried the virus unwittingly to their home countries. Thus the first country to spread Coronavirus outside

China was Thailand, through a woman travelled from Wuhan.

The first death outside China was reported from the Philippines and then reports of deaths came in from Japan, Europe and several other countries. Coronavirus travelled to India too and on 30 January and it was detected on a woman who had returned from Wuhan. Incidentally on that day, the World Health Organisation (WHO) had declared it as a “Global Health Emergency”.

The present health emergency due to Novel Coronavirus that has affected 211 countries is the gravest global crisis since the Second World War.

It was to the credit of Kerala, which already had faced

several infectious diseases in recent years like the deadly Nipah virus, the state put its acts together drawing from its previous experiences. The state activated its resources in the healthcare sector including communication mechanism to keep a tab on the viral infection and kept a watch on arrivals from foreign destinations. Kerala had its health infrastructure in place to handle the pandemic – the Central Government followed suit. Until then, the Central government was in a state of denial.

The state put its acts together drawing from its previous experiences.

While Kerala had its healthcare infrastructure spread across the state, from cities to panchayats and an army of health workers, it took no time to activate those cells to meet the emergency. Whereas at the national level, the first challenge India faced was the lack of testing facilities for

the new virus. All the samples had to be taken to National Institute of Virology in Pune for confirmation until the number of testing facilities was increased.

Indian health authorities calculated the inward route of infection from China or South-East Asian countries alone. Therefore, initially, it banned the arrival of air-passengers from those countries. By the time, hundreds of potential carriers of the virus had landed in India from countries like Italy, Europe and the USA and Arab nations.

What Kerala has achieved and continue to deliver is the near-perfect handling of the situation.

Many ports of arrivals had no infallible mechanism to screen incoming passengers for any

possible infection. Until 22 March, international carriers continued to operate to Indian ports. It was only from 22 March, India banned landing to all commercial passenger aircraft. Kerala, which had a draft

containment plan immediately after the first three confirmed cases of COVID-19, declared the situation as a state disaster.

Challenge before India's Healthcare System

The ongoing health crisis has focused attention on the healthcare infrastructure in the country. State-funded hospitals and research labs remained at the forefront of the fight against COVID-19.

Kerala reaped the benefit of its grass-root health infrastructure, which came as the frontline defence against the pandemic. Its surveillance net to route movement of a family returned from Italy through GPS tracking and zero down, all primary and secondary contacts helped stop community spread of the disease. The role of medical professionals at government healthcare facilities to save the lives

Kerala reaped the benefit of its grass-root health infrastructure, which came as the frontline defence against the pandemic.

of the high-risk category of people affected by COVID-19 stands out as an excellent example of their social commitment.

COVID-19 has brought to the table the necessity for a containment plan for similar communicable diseases. Similarly, a network of basic state-funded health facilities saved thousands from being wiped out. What Kerala has achieved and continue to deliver is the near-perfect handling of the situation. The same can also be considered as yet another model from this State.



COVER STORY / COVID 19

The All out Youth Defence Force is 'Out' there ...

N.V. Ravindranathan Nair

Senior Journalist



The die-hard attitude of the youth brigade in the State comes to the forefront to tame the novel Corona threat these days. The enthusiasm and determination is instilled upon them by The Kerala State Youth Commission.

Elders may have a tendency to complain that youths lack dedication and they shirk off responsibilities. But the post - 2018 flood scenario changed everything - Youth power helped the resurgent state to bounce back to life. Taking a leaf out of this lesson, The Kerala State Youth Commission, a quasi -judicial body has decided to constitute a Youth Defence Force to render support to the people in distress, whether during a natural calamity or a pandemic. The Commission, constituted to help in the development of youth and to protect their rights, responded to the call of The Chief minister and initiated a separate Youth Defence Force on its own.

In recognition of Kerala youths' self-less service to humanity during the 2018 floods, United Nations had invited Youth Commission chairperson Chintha Jerome to



attend a seminar in ‘Disaster Risk Reduction’ held at Bonn in Germany. This enhanced the blaze of youth in this lady, which helped her a lot in initiating several unique moves like the Youth defence force.

Several young women, including trained nurses and those working in health sector have come forward to work as volunteers.

The Commission decided to form a Youth Defence Force to deal with the crisis situations in future too. “We were not that sure about the response to such a call. Still we had hope. But there was massive response to this demand. As on March 31, out of the 23,000 youths enrolled as volunteers, 15,000 among them have offered to

assist patients as bystanders” – Chinthia Jerome said.

Film stars like Tovino Thomas, Sunny Wayne, Movie director Arun Gopi, Poornima Indrajith and Footballer C.K. Vineeth have expressed their willingness to become bystanders. Film Directors Major Ravi and Sreekumar Menon and actor Murali Gopi have expressed their willingness to join the force even though they have already crossed the age limit of 40 years.

The Kerala State Youth Commission has decided to constitute a Youth Defence Force to render support to the people in distress.



The Youth Commission’s Defence Force is enlisting those aged between 18 and 40 to the Government’s volunteer force “Sannadham”. The list of those who have expressed the willingness to function as

bystanders will be handed over to the Health department.

Once the list of YDF volunteers is ready, the local bodies will be deploying the volunteers. The noted part of the enrolment is that several young women including trained

The state’s youth force is out there to surprise if not to inspire.

nurses and those working in health sector have come forward to work as volunteers.

It is very significant that even after we cross over the challenge posed by Corona virus, we could make use of the potential of this self-less youth in any time, in case a critical situation like this occur. We have the experience of youth power being utilised for the rescue operations during 2018 flood. Now we are in

Film stars like Tovino Thomas, Sunny Wayne, Movie director Arun Gopi, Poornima Indrajith and Footballer C.K. Vineeth have expressed their willingness to become bystanders.

business against the Covid -19 threat with the fire-brand youth vigour.

This is the first time that the State witnessing a pandemic having a field day. But proving the adage uncommon situations warrant uncommon action, the state’s youth force is out there to surprise if not to inspire.



COVER STORY / COVID 19

It is only the 'Half-time'

Sanil P. Thomas
Senior Sports Journalist



"I didn't imagine at all we would be tested to this degree"- Thushiro Muto, CEO, Tokyo Olympics 2020 Organizing Committee said. Of course, nobody thought Coronavirus would spread worldwide and cause that much havoc in sport-action fields.

Till Canada and Australia threatened withdrawal and a few more were set to follow, International Olympic Committee and its Olympic fencing gold winner president, Thomas Bach and Tokyo 2020 president Yoshiro Mori stood firm and exuded confidence that there is no postponement. But on March 24th, John Coates IOC's co-ordination Commission Chief for Tokyo Olympics announced the Games scheduled for July 2020 have been postponed for July 2021.

In these troubled times of the pandemic, there is no other option. What is important now is to halt the COVID 19 spread. Though modern Olympics were canceled thrice, during 1916, 1940 and 1944 due to World Wars, a postponement is a first in its history.

UEFA was a little ahead of IOC that they had decided to postpone



Euro 2020 football championship to 2021 before IOC could arrive at a decision. And, all the famed Euro leagues including Champions League were stopped.

French Open tennis has been postponed to September whereas Wimbledon is canceled. After the 2nd World war, this was the first year without Wimbledon.

IPL too has to be postponed. Cash-rich BCCI was forced to shut down its office for the time being. Corona took away a few lives as well. Former Real Madrid president Lorenzo Sanz died of COVID 19. Pakistani squash great Azam Khan too died of Coronavirus.

Christiano Ronaldo, Paolo Maldini, Paulo Dy Bala, Fellaini Marouane, etc were tested positive. Arsenal coach Michael Artella survived Corona to celebrate his 38th birthday. Utah Jazz player Rudy Gobert was tested positive which forced the NBA to shut down its season.

Turkish Boxing Federation slammed organizers of an Olympic qualifying tournament in London after three boxers and a coach tested positive. Japanese Olympic Committee deputy head Kozo Tashima too was found positive.

The financial crunch will affect the entire sports world. Uruguay had even declared lay off. Ronaldo and his Juventus teammates along with Coach Maurizio Sarri agreed to forgo \$100 million in wages.

Regarding India other than IPL, hosting FIFA - Under 17 women's

World Cup football in November will be a tough ask. In India, we had a few football matches in closed stadiums. IPL too can have a try with telecast assured, but the availability of overseas players is uncertain.

Coming to Kerala our main loss will be in IPL. Other than this KCA is trying to host a few one-day internationals. Sevens football season in Kerala was over halfway when shut down came into being. 15 tournaments finished, whereas five had an abrupt end. Eight tournaments were waiting for the kick-off. A loss of about Rs. One crore is expected.

COVID 19 is certain to have thrown a spanner in athletes' practices as well. And, how much money the Corporate could pump in sports after this lean patch is another question. But sports had made a comeback many a time in the Open era, professional era rather. Let us wait and pray. Let the new beginning be pompous.



FEATURE / COVID 19

Community Kitchens-Another Kerala Model

Bimal Shivaji
Senior Journalist



One of the major challenges that came before the State Government in the form of hunger – struck populace, owing to the nation-wide lockdown. Feeding the needs of thousands was addressed with an all-encompassing initiative – The Community kitchen.

When a 21-day lockdown came into being to combat the spread of COVID-19, one of the largest sections that were immediately hit was the homeless and the destitute across the state. The daily wage earners and laborers were rendered jobless. More than one lakh laborers from other states too suffered in the wake of restrictions.

Taking into account the demands from various sections of society, Chief Minister Pinarayi Vijayan on March 25 announced the setting up of ‘community kitchen’, a novel initiative in the state. “The disease might push people into starvation. This should not happen in Kerala.” - Said the caring Chief Minister, much to the relief of thousands in this land.

43 community kitchens were set up initially and 2,215 persons were provided meals, of which 1,639 were



KSCDC veggies for community kitchens

given free of cost. On March 27, 528 more kitchens started functioning. The initiative is also being implemented through Local Self government institutions such as corporations, panchayats, ward-level committees and volunteers.

In the first week of April, food was being delivered to the needy at their doorsteps free of cost by setting up community kitchens at all the 941 panchayats in the state.

This is apart from the 15kg of free ration being provided to ration card holders and others with valid identity proof.

The Kudumashree poverty eradication mission of the state is entrusted with setting up of the community kitchens and many hotels and catering service workers have come up voluntarily offering manpower and cooking utensils.

“We are very happy to cooperate with the LSGs and work as a team in this time of need,” - said S.Harikishore, Executive Director of Kudumbashree. A total of 85 community kitchens were opened in

Thiruvananthapuram district alone.

The community kitchens were opened at convenient locations chosen by the panchayats or wards – like schools, auditoriums or Kudumbashree units.

A sum of Rs 23.64 crore was allotted to Kudumbashree .

One of the largest sections that were immediately hit was the homeless and destitute across the state

According to Dr. P.K. Jayashree, Director of Department of Panchayats, depending on the population there could be more than one community kitchen in a panchayat.

Regular inspections are conducted at all kitchens by the departments of health, food and safety, and the district administration. They make sure all safety and hygienic measures are followed and employees use masks inside the kitchen.

Another distinct announcement by the chief minister was about

“The disease might push people into starvation. This should not happen in Kerala.” - Said the caring Chief Minister

the arrangements made to feed the animals of the state until the lockdown is lifted. The volunteers wrap up the day only after feeding stray canines of the area these days. This is the largest such initiative taken by a state government

Food was being delivered to the needy at their doorsteps free of cost by setting up community kitchens at all the 941 panchayats

following the breakout of COVID 19 in any of the states or union territories in India. Perhaps, the community kitchen would be another concept that would earn accolades and even be adopted by communities across the world in the wake of the pandemic.

This is the largest such initiative taken by a state government following the breakout of COVID 19 in any of the states or union territories in COVID



COVER STORY / COVID 19

The Rock-Solid Defense



Dr. Sreejith N. Kumar

Succumbing to harsh realities becomes inevitable in the time of distress. One has to shape-up flexible according to the situation. Here comes the relevance of social distancing.

The more one tries to read up on Corona, the clearer it appears that in the current situation, social distancing is definitely the most effective method to contain the disease. We have to be rock-steady in finding out facts, and remain rock-solid in resisting the infection.

The instructions that the WHO or the government gives us are not thoughtlessly put out. Changes are likely to take place, and when they do, it will be informed.

COVID seems to be an insurmountable challenge today. Vaccines and medicines to fight it are not in the scene yet. Until then, there is only one alternative – social distancing. And none other than the WHO prescribes this remedy.

The droplets that come out of a



COVID patient will contain Coronavirus. Whenever one coughs, sneezes or speaks, the virus may get transmitted to the person who stands close by (within three feet or a maximum of six feet).

Most people get infected when their hands come in contact with a surface that holds the virus-infected droplets. It is said that these viruses can survive on various surfaces for varying periods of time, from a couple of hours to a few days. So when we touch our eyes, nose or mouth with these hands, the virus enters our bodies, and we get infected.

Do not go near a COVID patient or to places where the droplets may have fallen. This is what is meant by social distancing. Those who are aged, or those who suffer from a heart ailment, have diabetes or lung disorder is likely to fall seriously ill if they contract COVID. Therefore they should remain strictly at home.

We have to be rock-steady in finding out facts, and remain rock-solid in resisting the infection.

There are researchers who advise everyone to wear masks because not all patients exhibit the symptoms. Whatever that is, no one should cough or sneeze openly but rather use disposable tissue to cover their nose and mouth. Those who interact with patients too should wear masks. The WHO as well as our government insists on that.

The best way to destroy the virus sticking to our hands is to wash our hands with soap. Soap weakens the lipid (fat) covering of the virus and destroys it. That is why we are told not to touch any surface (especially tables, chairs, doorknobs, banisters, etc.) as far as possible, and to wash our hands (for more than 20 seconds) frequently. If soap and water are not available, we must use hand sanitizers which have more than 60 % alcohol content.

Remaining indoors is the best way to prevent the spread of virus infection, both for the individual and for society. Lockdown paved the way

There is only one alternative – social distancing.

to this social distancing practice. The countries that could maintain it meticulously achieved some measure of success in containing the spread.

A study published on 26 March recommends that our country remains in lockdown mode for 49 consecutive days. Another option they suggest is the clamping down of

Stay put like a stone in your abodes.

two spans of three-week lockdowns, with an interval of four to five days in the middle. All that needs to be done now is one simple thing- Stay put like a stone in your abodes. ●



COVER STORY / COVID 19

Lockdown – A Blessing In Disguise

Dr. Namita Nazeer

M.D. Psychiatry, P.H.C, Chirakkara, Kollam.



The trauma of Lockdown is upsetting the populace with dire consequences. With no other way out from the kind of situation entire world is facing, cope-up with the reality that lockdown actually comes as a blessing in disguise.

In January 2020 the World Health Organization (WHO) declared the outbreak of a new corona virus disease, COVID-19, to be a Public Health Emergency of International Concern. In March 2020, WHO

declared it as a pandemic.

Initially only few localised cases were seen in Wuhan China. Slowly it spread all over the world by means of travel. The third phase is community level transmission in which those with no travel or contact history develops the disease.

A lockdown is an emergency protocol that usually prevents the spread of disease through extensive travel and contact. It is declared to slow the spread of virus and prevent community transmission. This will reduce the morbidity and mortality rate and help flatten the curve and reduce the peak number of cases and death rate.

But lockdown has resulted in a host of mental health issues due to loss of autonomy, competency and connectedness. Isolation makes people feel they have no control over the situation.



Schools and universities are closed. Entertainment and sports events cancelled. Restaurants and theatres are stopped up. Economy is almost paralyzed with flights grounded, travel restricted, borders closed. This has increased the levels of anxiety in as many people who have already lost their jobs both abroad and within the country. Daily - wage labourers and manual labourers are the most affected. This has increased the stress and anxiety levels.

Isolation makes people feel they have no control over the situation.

Some develop loneliness and depression especially the elderly. Social media and chat apps and video conferencing tools can mitigate this to some extent. But it can't replace human interaction.

Mental health issues are even more acute for the

quarantined ones as they are confined to a room and they worry about being infected or infecting other people and like anyone worry about finances. Being quarantined with family can be a blessing as it's an opportunity for families to come together and strengthen their bonds.

Small children will be overjoyed to spend time with their parents. But in problem – families like those with abusive spouse or issues between spouses, abuse and tensions may increase resulting in injuries and divorce.

People who are particularly vulnerable are the psychiatrically ill adults and children and children with special needs and their caregivers. Anxiety and claustrophobia increases. Suicidal risk increases as depression rates increase.

Alcohol withdrawal symptoms too increase owing to unavailability. Community level treatment comes inevitable here. Another section of people are those confined in hospitals due to COVID infection and the caregivers like medical professionals. They are isolated from their family and friends as part of quarantine or duty.

Being quarantined with family can be a blessing as it's an opportunity for families to come together.

People who are affected by COVID-19 need our support, compassion and kindness. Do not refer to people with the disease as "COVID-19 cases", "victims" "COVID-19 families" or "the diseased".

It is vital to separate a person from having an identity defined by COVID-19, in order to reduce stigma. Find opportunities to amplify

positive and hopeful stories and positive images of local people who have experienced COVID-19. Acknowledge the role they play in saving lives and keeping your loved ones safe.

The sudden and near-constant stream of news reports about an outbreak can cause anyone to feel worried. Get the facts; not rumours and misinformation. Facts can help to minimize fears.

Older adults, living alone, need to be contacted often and reassured.

Get the facts; not rumours and misinformation. Facts can help to minimize fears.

The basic measures for good mental health during lockdown include staying connected and informed.

Be through indoor exercises, indoor games or related activities. Keep children engaged with activities which are not monotonous. For

Keep children engaged with activities which are not monotonous

children with special needs keep them clean, ignore mild behavioural problems, continue their therapy at home and in case of any doubts consult therapist over phone or telemedicine. Better stay back at home till restrictions are lifted, for lockdown for the time being is nothing but a blessing in disguise. ●



COVER STORY / COVID 19

Kerala, Unique as always...

Ahffan Kondeth

Data Scientist, Washington DC



The World watches Kerala in awe for its unique way of managing an unprecedented pandemic like Corona. Timely action and forethoughtfulness is the hallmark of this accomplishment. Even Keralites who live in Developed nations acknowledge this feat. They unearth some interesting comparisons too...

Seventy years after driving out its British colonial rulers, India is engaged in a different struggle to expel another foreign invader — a highly infectious strain of the Corona virus- Covid-19. Leading this fight is a small state in Indian state that is half the size of most American states, but has a larger population than all but California. A small picturesque state nestled between the Arabian Sea and the lofty Western Ghats (mountains) Kerala has many firsts to its credits. From having the first democratically elected communist party, the first state in India to achieve 100% literacy to its impressive human development index comparable to North America, Kerala is very special to the rest of India.

But this time, Kerala is making news for another reason — its powerful 360 degree model to fight the Coronavirus, setting an example for other wealthier nations. Going

against all odds, it has been successful so far in keeping the COVID-19 at bay.

Early Detection and Prevention

Even before WHO declared the virus as a pandemic, Kerala had laid out its detection and prevention strategies. All International passengers, in case of symptoms, were transported in dedicated ambulances to the local district government hospitals, kept safe in isolation wards and then further decision is taken based on the test results

Kerala has many firsts to its credits.

from the virology labs.

Key to prevention was good public health awareness. All parties regardless of their affiliation joined together to create grassroot level awareness by public campaigns with catchy slogans like “Clean hands” and “Break the chain” to educate people about how to stop the spread of the virus.

Even before WHO declared the virus as a pandemic, Kerala had laid out its detection and prevention strategies.

Key to the government’s response strategy is a well thought out communication plan. In a country where fake news thrives through social media, the government was quick to nip this out in the bud by a concerted all-round campaign through official portals, social media accounts and volunteer groups.

In U.S. Washington metropolitan area comprising Maryland, Washington, DC, and Virginia, The Corona virus infected cases are exponentially increasing every day. The numbers swelled from three to 2000 in a matter of two weeks. In contrast, Kerala has kept the numbers within 100 despite the first case being reported even before the one in the US.

Recovery

The economic and social factors also have to be taken into consideration, when it comes to recovery. Kerala once again impresses here.

The government announced Rs. 20,000 Crore package (\$2 billion) to serve its citizens in these hard times. Kerala made arrangements for food to be supplied to certain homes, requested financial institutions & landlords to defer payment collection.

The Chief Minister also ensures the 1.45 lakh immigrant workers are taken care by opening up more than 4000 camps equipped with all necessities – mask, soaps and sanitizers. The Chief Minister urges for the importance of collaboration during the tough times.



Hope

Other nations would do well to study and try out the Kerala model in this hour of crisis. The famed

Other nations would do well to study and try out the Kerala model in this hour of crisis.

glitter of some modern states did not offer much hope for its residents; yet, this small under-resourced state shows that it’s not the glitzy malls, superpower like armies or technologies that gives hope for the future of this world. It’s a solid partnership between governments

Key to the Government’s response strategy is a well thought out communication plan.

and people to take care of every single living being in our vicinity, from our fellow human beings to the stray dogs or monkeys that Keralites were asked to feed in these times that give hope - Humanity will pull through this and come out stronger and wiser.



COVER STORY / COVID 19

In Combat Mode to Rout the Pandemic

Dr. P. K. Jameela

State Consultant, Aardram Mission



Kerala started planning for various aspects of an epidemic control as soon as World Health Organization (WHO) declared the outbreak of Covid-19, from Wuhan. The main focus was given for strengthening of surveillance activity, implementation of testing facility, management of patients as well as primary and secondary contacts and the huge task of prevention of community spread of the disease.

The planning of infrastructure was classified into plan A, B and C.

Plan A

Even before the first case was identified, two major hospitals in each district were identified for the admission of the suspected cases and their contacts for isolation and management. All Govt. Medical Colleges along with one major General Hospital/District Hospital were selected for this purpose. In districts without a Govt. Medical College, two major institutions under the Dept. of Health Services were selected.

Out of 70 students returned from Wuhan, 3 were detected to be positive for COVID-19. All of them recovered fully and the infrastructure under Plan A was more than sufficient for their management. By that time Plan A had included major Taluk Headquarters hospitals to the list thereby having 50 Govt. Institutions

and two major Private institutions. This offered 1110 isolation beds, 197 Intensive Care Unit beds with 126 ventilators.

Plan B

In plan B the state started adding the infrastructure to 71 Govt. Hospitals and 55 Major Private Hospitals which offered bed strength of additional 1328 beds for isolation with 33 additional ICU beds and 17 ventilators.

Plan C

Taking into consideration of the serious scenario of community transmission of the disease, plan C was prepared. In this phase all major Govt. hospitals will be evacuated exclusively for COVID-19 patients labeling the hospitals as COVID-19 hospitals. In this category 81 Govt. and 41 Private hospitals are identified which will offer 3028 beds with additional 128 ICU beds thereby the total beds available for COVID-19 patients will be around 6000. The Catholic Church has promised that all hospitals under their Diocese will be given to the Govt. for admitting patients with COVID-19.

AYUSH Hospitals

It is also planned that all Medical Colleges and hospitals under AYUSH Dept. (Ayurveda/Unani/Sidda/Homeo) will be evacuated for isolation or admitting patients if already identified beds are filled up.

Corona Care Centres

Home quarantine will not be possible for all suspect cases due to various reasons like inadequate facility at home, aged people/pregnant women/small children residing at home, lack of transport facility to the hospital in case of need etc. To accommodate such persons, Corona Care Centers are identified with the help of Local Self Govt., Education Dept., PWD, and other Govt. agencies /NGOs.

About 265 centers which can accommodate 26,431 persons at a time are identified and some of them started functioning after the declaration of lock out. Many hotel and hostel authorities in the state have agreed for accommodating persons under surveillance in their institutions. All the Private Medical Colleges in the state are ready to accommodate isolation- persons in their hostel rooms free of cost which itself counts to 4400 rooms.

Kerala started planning for various aspects of an epidemic control as soon as World Health Organization (WHO) declared the outbreak of Covid-19.

Role of other departments/agencies

Public Works Department was given the responsibility to identify and arrange centers in all districts for Corona prevention activities. Govt. guest houses and PWD rest houses are evacuated for the purpose of COVID-19 prevention and control activities. Private Medical Colleges and organizations like

Indian Medical Association are hand in hand with the state Govt. for

All of them recovered fully and the infrastructure under Plan A was more than sufficient for their management.

control activities.

Drugs and Consumables

Responsibility of procurement and distribution of drugs and consumables for the state is with the Kerala Medical Service Corporation Limited (KMSCL). Kerala State Drugs and Pharmaceuticals Ltd. (KSDP) which is a public sector undertaking took the responsibility of producing hand sanitizer on a large scale. Many volunteer organizations and self help group like Kudumbasree have come forward producing face mask, hand sanitizers, soaps etc. to help the Govt. Bed sheets, Pillow covers, towels are supplied by various handloom co-operative societies. All the companies manufacturing ventilators are instructed to produce as many ventilators they can within a short period so that patients needing ventilator support can be managed properly.

COVID-19 testing laboratories

During the initial days the throat swab samples were sent to the National Institute of Virology (NIV), Pune for testing the presence of Corona virus by RTPCR Test. Within a few days Indian Council of Medical Research (ICMR) issued permission to the Institute of Virology, Alappuzha for testing. Later, Medical Colleges - Thiruvananthapuram, Kozhikode and Thrissur, Rajiv Gandhi Centre for Biotechnology, SCTIMST and State Public Health Lab were given permission for the above test by ICMR.

The World-wide Acceptance...

The Washington Post

Aggressive testing, contact tracing, cooked meals: How the Indian state of Kerala flattened its coronavirus curve



The Washington Post

Dr. Safa Mote @SafaMote
Replying to @Bilimckibben
Kerala is the proof that EDUCATION is the key to PROSPERITY. Their GDP per capita was under \$300 until 1990s, yet they enjoyed better medical care, lower inequality, & higher life expectancy compared to the rest of India.

Tweet

Melissa Fleming @MelissaFleming
Kerala's approach was effective because it was "both strict and humane."
- Shahid Jameel, virologist & infectious disease expert
@wellcometrust



Mary Redden @MaryRedden1
Replying to @jasonhickel and @johncusack
Great story, encouraging ideas we need to look at in US
9:56 PM · 11/04/2020 from Florida, USA ·
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MIT Technology Review

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Tweet

Bill McKibben @Bilimckibben
Kerala is one of the most interesting places in the world, with sky-high rates of social trust—I wrote about them 30 years ago, and am glad to see there's still much success there

Laurie Reemeyer @aussie_laurie
Replying to @jasonhickel
Kerala has been a leader globally for decades. Very impressive.

Peter Rebeiro @peterrebeiro
Kerala's #COVID19 approach was effective because it was "both strict and humane."
"Aggressive testing, isolating, tracing and treating — those are ways of containing an outbreak."
I hope policy-makers in the US are paying attention!

What the world can learn from Kerala about how to fight covid-19

The inside story of how one Indian state is flattening the curve through epic levels of contact tracing and social assistance.

by Sonia Faleiro

The sun had already set on March 7 when Nook Pullichal Bava received the call. "I have bad news," his boss warned. On February 29, a family of three had arrived in the Indian state of Kerala from Italy, where they lived. The trio skipped a voluntary screening for covid-19 at the airport and took a taxi 125 miles (200 kilometers) to their home in the town of Ranni. When they started developing symptoms soon afterward, they didn't alert the hospital. Now, a whole week after taking off from Venice, all three—a middle-aged man and woman and their adult son—had tested positive for the virus, and so had two of their elderly relatives.

Jason Hickel @jasonhickel

Kerala's COVID-19 response has been humane, caring and successful. They've kept their death toll to 2, and new cases are falling thanks to widespread community testing. It puts the so-called "first world" to shame.



Aggressive testing, contact tracing, cooked

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April 12, 2020

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