

Care and support in the community: The LSG Interface

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How can LSGIs Intervene a crisis situation?

Aims

1. Confidence building
2. Rescue/rehabilitation/prevention
3. Social security/care services
4. Support for livelihood

How?

1. Community mobilization
2. Stakeholder coordination
3. Information dissemination
4. Information gathering
5. Resource mobilization

Information

System
(Infrastructure/
HR)

Resources

Knowledge/skill

How did the LSGIs do this in Covid-19?

1. Targeting response to the vulnerabilities
2. Detailing and delivering service like basic needs, medical needs, testing tracing tracking, risk communication and management of psychological breakdown
3. Coordination of different agencies and care givers
4. Integrating with already existing primary health care systems and networks
5. The frontline health workers, how they were protected, how cases were detected and managed
6. Special services in the community like care of the aged and frail groups palliative and terminal care
7. Challenges and problems

1. Targeting response to vulnerable groups

- Kerala being the state with highest NCD prevalence and greater proportion of elderly persons, protecting them was crucial in reducing disease fatality.
- Reverse quarantine and constant monitoring by LSGIs.
- Provided essential services to fulfil needs limited by restricted mobility.
- Provided psychosocial support for isolated persons and those need caregiver support.
- Prioritised in vaccination drive.

Elderly

Palliative care patients

Disabled persons

SC/ST colonies

Coastal area inhabitants

Slum dwellers

Care homes

MGNREGA/AUEGS beneficiaries

Guest labourers

2. Detailing and delivering service like basic needs, medical needs, testing tracing tracking, risk communication and management of psychological breakdown

- 'Break the Chain' campaign
- Contact tracing
- Quarantine and Isolation
- Management of CFLTC and other health service delivery systems
- Supporting the Vaccination drive



The LSGI officials marking the physical distancing boxes in a bus stop. Picture Source: (Business Today, 2021)



Hand washing kiosks installed in public spaces (BBC news, 2020)



Thanneermukkam grama panchayat launched 'Break the chain umbrella' project in the presence of Local Self-Government Minister Sri A C Moideen and Finance Minister Sri T M Thomas Issac. (Source; (The Hindu, 2020))

Contact tracing

LSGIs organized a proper system for contact tracing with 3 levels.

1. Ward committee
2. A Cluster of 50 houses
3. Neighbourhood groups

Quarantine and Isolation

- Set up and support ***Institutional quarantine*** facilities.
- Doorstep delivery services and psychosocial support for ***Home quarantine***

Special attention to those in ***Reverse quarantine***



Picture courtesy: (News click, 2020)

Management of CFLTC and other health service delivery systems

- Identification of suitable venues
- Ensure infrastructural facilities
- Administrative support
- Provision of food for the inhabitants
- Waste management

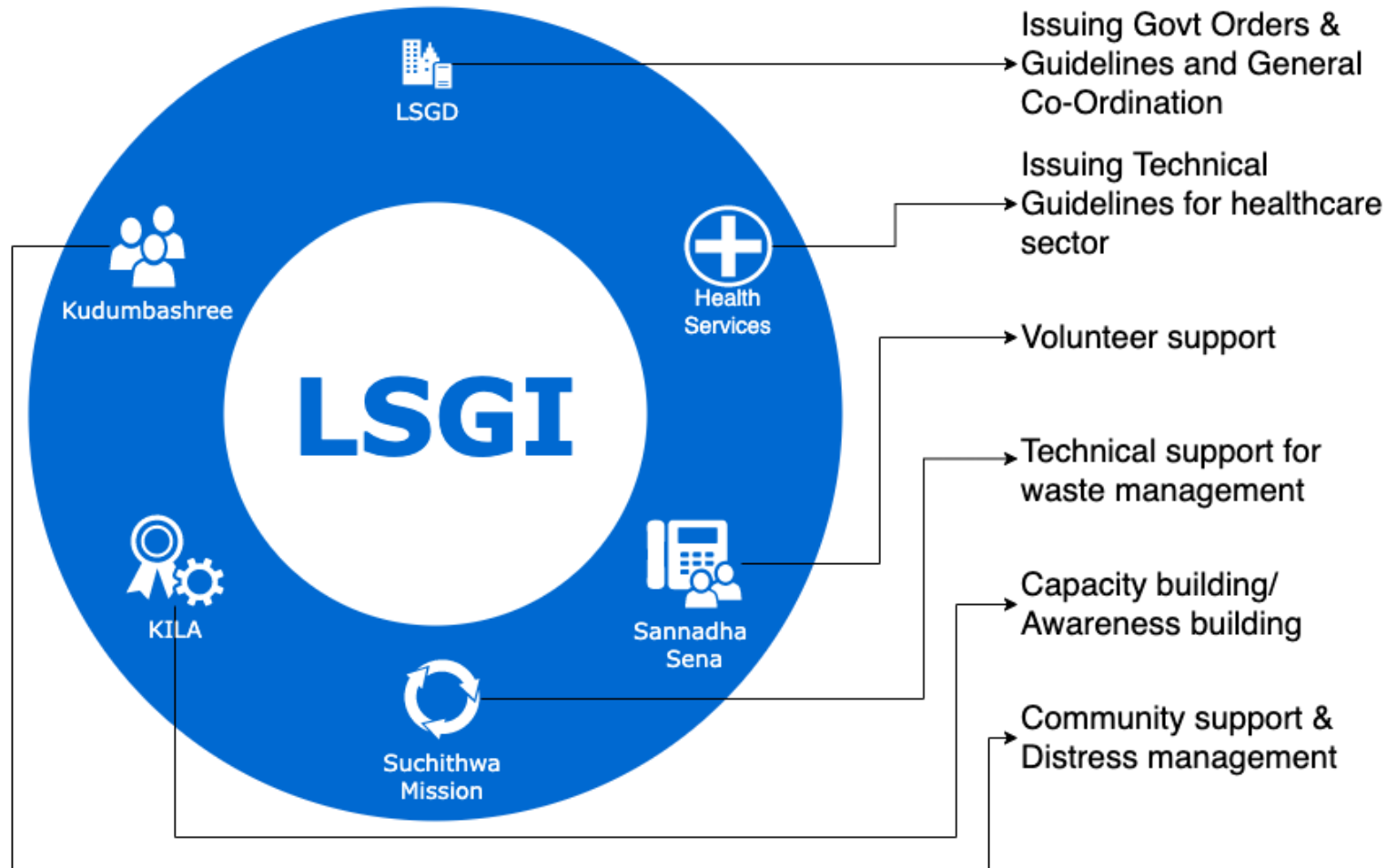
Support the vaccination drive

- Awareness creation
- Community mobilisation
- Facilitation of slot allocation



Workers in a CFLTC set up in an auditorium. Picture courtesy: (The new Indian express, 2021)

3. Coordination of different agencies and care givers

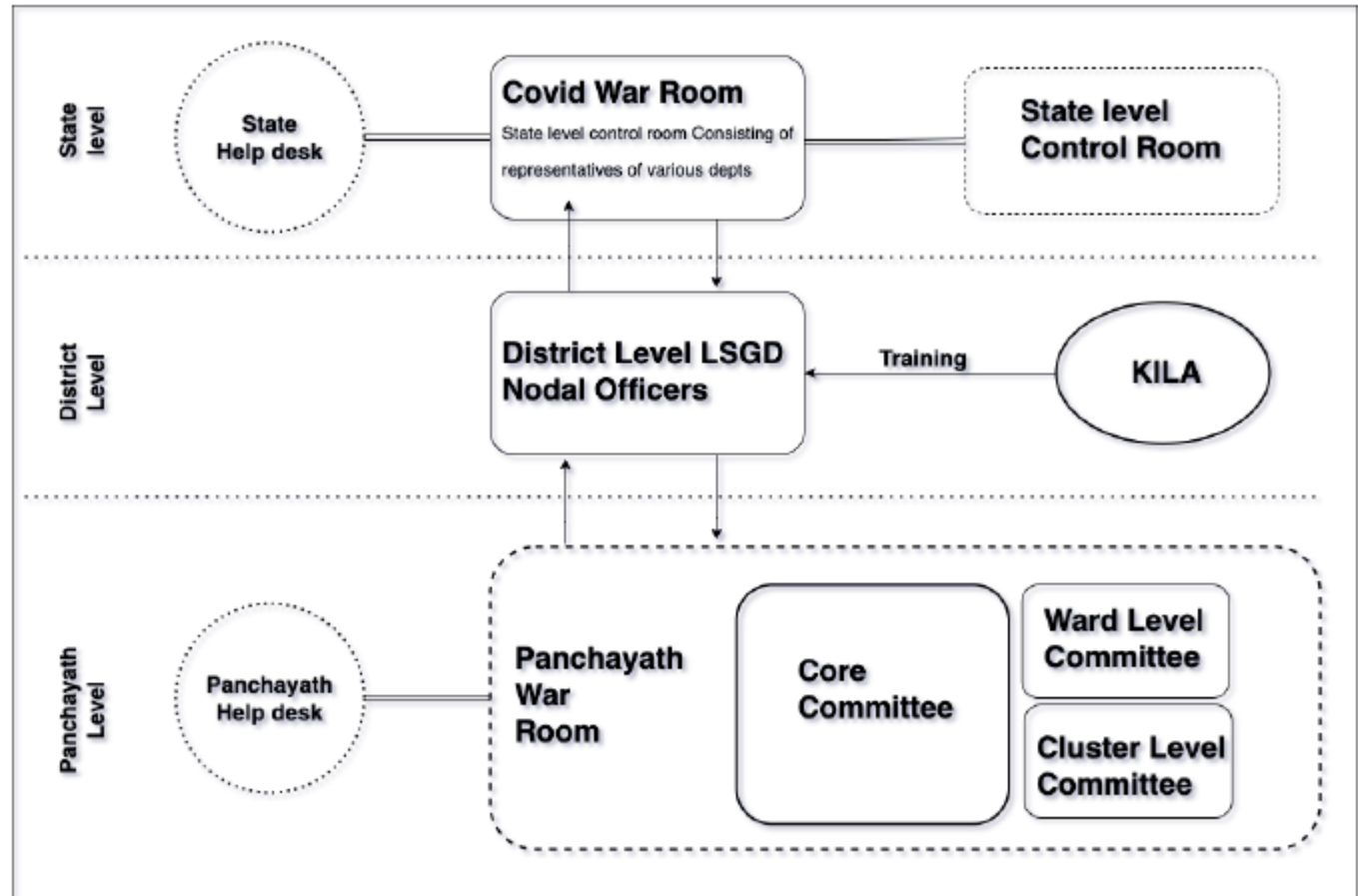


Major Stakeholders that supported LSGIs in the pandemic response and their primary roles (Source: Author's own)

Local Self Government Department (LSGD)

Major functions of LSGD include:

1. Preparing and issuing policy guidelines
2. Monitoring & Evaluation and Data management
3. Incorporating with activities of other departments



Information flow system through the Covid war rooms at the LSGI, district and state levels. (Data source: G.O. (R.T) No. 932/2021/LSGD and G.O. (R.T) No. 939/2021/LSGD) (Figure source: Author's own)

Kerala Institute of local Administration (KILA)

- workshops
- online courses
- live streaming programs
- workshops for faculties/resource persons
- workshops prior to the training of newly elected representatives
- activities related to the handbook preparation

Kudumbashree community network and its interface with the LSGI

- Manufacture of masks, sanitizers and face shields
- The community kitchen, Janakeeya hotel and take-away counters
- Community empowerment
- Non-medical waste management
- Psychosocial support
- Innovative and context specific Initiatives from Kudumbashree Units

4. Integrating with already existing primary health care systems and networks

- Existing health facilities were supported with additional medicine procurements, additional human resources, transportation and accommodation facilities for the health workers and other infrastructural facilities.
- LSGIs reconstituted existing committees such as Ward Health, Sanitation and Nutrition Committees, Aarogya Jagratha Committees and Emergency Response Teams formed as part of Disaster management.

Panchayat level Organisational Structure

- **Panchayat Jagrata samiti** – panchayat members, health officials, volunteers, police, other stakeholders
- **5 member Core group** - GP President, Secretary, nodal officer, sectoral magistrate and Health Standing committee chairperson
- **Panchayat COVID War Room** - ERs, officers, CSOs, Volunteers, ASHAs, AWWs and Kudumbashree 24x7
- **Help Desk 24x7** – health experts, volunteers, officers
- **Ward level committees** – ward member led
- **Rapid Response Teams** for every ward
- **Cluster Teams** for every 50 households
- COVID Jagrata Portal

5. The frontline health workers how protected how case detected and managed

- Recruitment of healthy participants
- Education/training with the help of health services and KILA
- Allotted specific geographic areas for each group
- Distributed sufficient protective gears
- Top priority in immunization
- Immediate and efficient care facilities for those got infected

6. Special services in the community like care of the aged and tribal groups palliative and terminal care

- Formation of database - The LSGIs conducted a survey of people with severe co-morbidities such as those with renal failure, those in need of dialysis, those who had undergone organ replacement, cancer patients, etc.
- Based on this survey, health services decided specific interventions; LSGIs facilitated the interventions, procured and distributed essential medicines to poor patients who couldn't afford them.
- Psychosocial support for those in need
- Home care with the help of frontline workers and community participation
- Provision of cooked food/ raw materials delivered to home.



Household level monitoring and support services from LSGI (Source: LSG department)

The LSGI team in Munnar conducting the funeral rites of a covid positive elderly woman (Keralakaumudi, 2021)

ഉറ്റവരായി അവർ എത്തി, വൃദ്ധയുടെ സംസ്കാരം നടത്തി

മൂന്നാർ: കൊവിഡ് രോഗിയുടെ സംസ്കാരം നടത്തിയത് മൂന്നാർ പഞ്ചായത്ത് ഭരണ സമിതിയും ജീവനക്കാരുമാണ്. മൂന്നാർ വാഗവരയിൽ വെള്ളിയാഴ്ച രമിച്ച വൃദ്ധയുടെ സംസ്കാരം നടത്താൻ ഭിത്തി മൂലം ആരും തയ്യാറാകാതിരുന്ന സാഹചര്യത്തിലാണ് പഞ്ചായത്ത് ഭരണ സമിതിയും ജീവനക്കാരുമാണ് മുന്നോട്ട് വന്നത്. പഞ്ചായത്ത് പ്രസിഡന്റ് മണി മൊഴി, സെക്രട്ടറി അജിത് കുമാർ എന്നിവരുടെ നേതൃത്വത്തിൽ വൈസ് പ്രസിഡന്റ്, അസിസ്റ്റന്റ് സെക്രട്ടറി, ജൂനിയർ സൂപ്രണ്ട്, ക്ലർക്കുമാർ ഉൾപ്പെടെയുള്ള ജീവനക്കാർ പി.പി.ഇ കിറ്റ് ധരിച്ചാണ് ഉത്സേഹം ഏറ് വാങ്ങി സംസ്കാരം നടത്തിയത്. ഇതിന് മുൻപും പഞ്ചായത്ത് ജീവനക്കാർ കൊവിഡ് ബാധിച്ച് രമിച്ച ആളുടെ ഉത്സേഹം ഏറ്റെടുത്ത് സംസ്കാരം നടത്തിയിരുന്നു. മറ്റുള്ളവർക്ക് മാതൃകയായും സാമൂഹ്യ പ്ര



മൂന്നാർ പഞ്ചായത്ത് ഭരണ സമിതിയും ജീവനക്കാരുമാണ് കൊവിഡ് ബാധിച്ച് രമിച്ച വൃദ്ധയുടെ ഉത്സേഹം സംസ്കരിക്കുന്നത്

തിബദ്ധതയോടെയും പ്രവർത്തനം നടത്തിയ മൂന്നാർ പഞ്ചായത്ത് ഭരണ സമിതിയേയും ജീവനക്കാരേയും ഇടുക്കി പഞ്ചായത്ത് ഡെപ്യൂട്ടി ഡയറക്ടർ കെ.വി.കുറുപ്പൻ അഭിനന്ദിച്ചു.



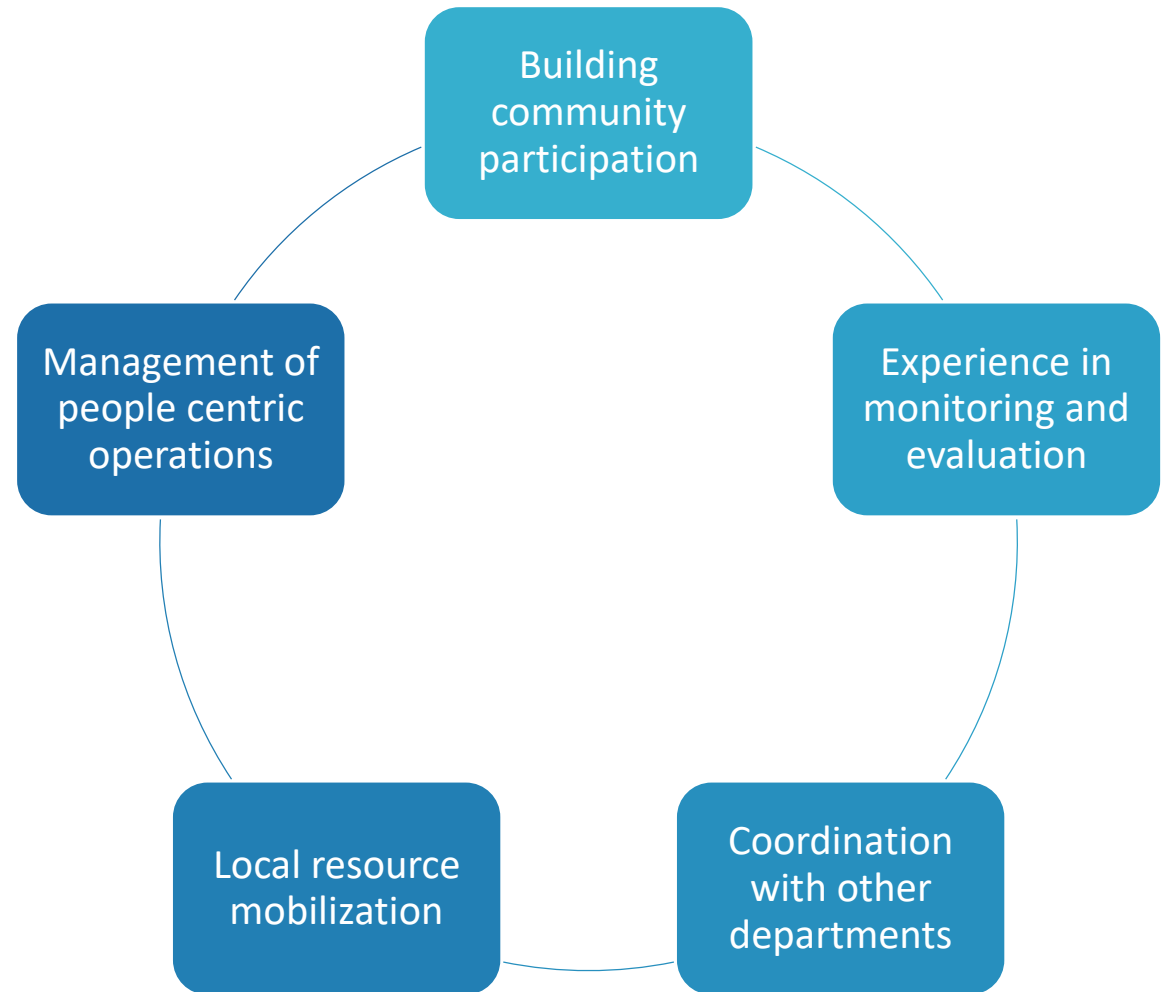
Community initiative for Covid management under Cochin Corporation 'Auto-ambulance' (Source: LSGD)

'Oxy Car' initiative from Vazhoor grama panchayat (Source: LSGD)



7. Challenges and problems

- KSDMA – LSGI – DDMA coordination was weak
- Information flow within LSGIs were weak (interdepartmental)
- Poor coordination of LSGIs with health service in the urban area



THANK YOU