

INDIA'S RESPONSE TO COVID-19 PANDEMIC

India, a country of 1.3 billion, has been able to limit the number of deaths to about 300 in the 11 weeks since the first COVID-19 case was detected in India. Reported cases in India are much lower than the global incidence rate. The pandemic has also been contained geographically with negligible “community” transmission. Prime Minister of India Mr. Narendra Modi leads a pandemic response that is historic in its ambition and complexity. Technology and administrative methods are supplemented by the strengths of our collective consciousness and our ancient philosophy. It is a *sui generis* crisis management operation.

2. The strategy leverages the deep reservoir of national resolve to confront, as one nation and one people, the current challenge. It is conducted in a democratic setting. Parliament has debated this crisis extensively. Prime Minister Narendra Modi has also consulted and sought inputs from the entire political spectrum. Regular press briefings and press conferences are being held.

3. India's public administration system is one of its strengths. The Union and State executives have mobilized and are working as an integrated unit. Prime Minister manages the effort at the highest political and executive level. A Group of Ministers, Committee of Secretaries and Empowered Groups provide political and operational direction. Coordination between Union and States has been effected at the level of Prime Minister and the Cabinet and Chief Ministers at the political level. At the operational level, Cabinet Secretary and Health Secretary are coordinating in real-time, through multiple video-conferences, a system-wide response that is being harmonized across all of India's 728 districts.

4. The decisive Indian response was initiated much before WHO declared COVID 19 to be “Public Health Emergency of International Concern” on January 30, 2020 and before the first confirmed COVID positive case was reported, also on January 30. This was a day before Italy saw its first case on January 31. By that time, surveillance and screening of passengers had commenced – in spite of reservations expressed by WHO and China. States had been alerted and the crisis management system was operating at full speed.

LOCKDOWN

5. The whole country has been placed under a lockdown since March 25 for 21 days. The lockdown, which has met an unprecedented and voluntary nationwide response, is meant to break the transmission through social distancing. Prior to the lockdown, the nation had placed itself under a “Janata” or “voluntary people's curfew” on 22nd March on a clarion call given by the Prime Minister Narendra Modi as a measure to check spread of COVID 19. The extent of the lockdown and the compliance it has received are unique.

6. It was an India specific crisis response measure tailored to Indian conditions and has demonstrated results. Government, central and states, have used this period to trace and isolate positive cases and their contacts. The graph of COVID 19 cases has “flattened.” Cases are doubling in a little less than 4 days.

7. The lockdown was not the beginning but the logical continuation of a strategy. Surveillance at points of entry (airports, major and minor ports, land borders) was initiated on January 17, 2020. Visa and travel restrictions were imposed on foreign nationals on February

5. All visas were suspended on March 11 and incoming flights were suspended from March 19. Incoming passengers were placed under daily surveillance through the Integrated Disease Surveillance Program (IDSP) Network and monitored through a national online portal. The portal aggregates data and maintains a log of all community contacts of positive cases. 621,000 passengers were monitored and not a single positive case in this universe has been able to mix with the general population.

MEDICAL PREPAREDNESS

8. The lockdown is accompanied by a nationwide effort to enhance medical preparedness. A network of labs across the country has been set-up to facilitate early and timely sample testing. 223 labs are operational. State Nodal Officers have been appointed and specific labs have been designated for States.

9. A national Hospital preparedness effort is underway to ensure availability of beds. You may like to see image 1 for figures of isolation beds, critical care beds and ventilators available in dedicated COVID hospitals. Health facilities of the Defence, Labour, Railways, Home (para military forces) and Steel Ministries and other Central and State government Institutions can be enlisted to augment hospital capacity if required. Personal Protective Equipment (PPEs), ventilators, essential drugs and other consumables are being stockpiled and buffer stocks are being constantly monitored. Guidelines on every aspect of COVID-19 management have been widely disseminated. Medical and paramedical personnel and Rapid Response Teams nationwide are receiving orientation on infection prevention, clinical management and protocols etc. Video-conferences are held on alternate days between central and state authorities to review status. A massive contact tracing and surveillance operation is continuing on a nationwide scale to pre-empt transmission. A public health communication exercise has been in operation since Jan 2020. Social media platforms and webpages of Government are pushing out information about basic preventive steps. TV & Radio channels were mobilized and an advertisement campaign launched.

MIGRATION OF WORKERS

10. The lockdown produced a number of challenges. A movement of migrant labour occurred during the initial period of the lockdown. A national effort was launched to mitigate the hardship faced by them. Transport was mobilized to safely move them to their home states. A detailed protocol was evolved to manage the migrants, and guidelines were issued to ensure essential supplies, rations and food packets for them. Relief camps providing food and shelter were organised on an unprecedented scale within days. This massive administrative effort across a number of states (see image 2) established more than 27,000 camps and shelters housing 1.25 million individuals. An additional 360,000 workers have been provided shelter by industry. 7.5 million individuals are being fed through this network of camps and shelters plus another 19,460 food camps/distribution points. The public health aspect of this movement has not been neglected and the camps have been linked to a network of quarantine facilities, testing laboratories etc. The nationwide response to assist these workers and their families highlighted the popular understanding of the rationale behind the lockdown.

MITIGATION MEASURES

11. A series of special programmes have been launched to mitigate the hardships being faced by the poor and disadvantaged individuals like senior citizens, widows, the physically challenged, women, workers etc.

12. Food supplies, cooking fuel, financial support and other forms of support are being delivered on a nationwide basis. These programmes attempt to create a security net, particularly for the disadvantaged sections of society that are worst affected in such situations. This enormous exercise involves a financial outlay of USD 22 billion.

INTERNATIONAL ASPECTS

13. This is a global pandemic and requires a global response. Prime Minister Modi took the lead in organizing a video conference with SAARC leaders to discuss efforts to fight COVID-19 situation in South Asia. Prime Minister Modi also took the initiative in conducting video conference of G-20 leaders. India has organized inward and outward evacuations on a massive scale. A global procurement and supply chain effort has been launched to enhance medical preparedness in India. India is, however, acutely aware of the need to balance its central concern about the welfare of its own citizens with its global responsibilities. India has been providing medical assistance overseas in Maldives and Kuwait. India is a major source of pharmaceuticals. India is committed to acting responsibly during this crisis. There is no outright ban on exports of critical drugs and requests are being examined and responded to appropriately.

Image 1:

Hospital Preparedness

- **Guidelines** issued - **Surveillance & Contact Tracing**, Sample Collection, Packaging & Transportation, Infection Prevention Control & Clinical Management Protocol
- **Dedicated COVID-19 hospitals** - 508 ready

82,795 isolation beds	8,182 ICU beds	4,935 ventilators
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- Additional **Health facilities** - **5,110** ready

1,13,315 isolation beds	27,641 ICU beds	12,867 ventilators
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- Union Government providing funds under **NHM** for upgradation
- **Railway Isolation coaches** - **2,500 coaches** with **40,000 isolation beds**

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Image 2:

Migrant Labourers – Status (4 Apr)

Component	Number
Relief Camps / Shelters set up	27,660
Number of sheltered individuals	12.5 lakhs
Workers given shelter by industry	3.6 lakhs
Additional Food camps	19,460
Persons provided food	75 lakh

To augment funds with States, **Rs 11,000 cr** released from **SDRF** by **special dispensation** in advance on **3 Apr** for crisis management

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