



KUTCH KARUNA ABHIYAN



An Initiative by Voluntary
Organisations of Kutch

COLLABORATIVE EFFORTS DURING COVID-19 (SECOND WAVE) IN KUTCH
REPORT FOR JUNE, 2021



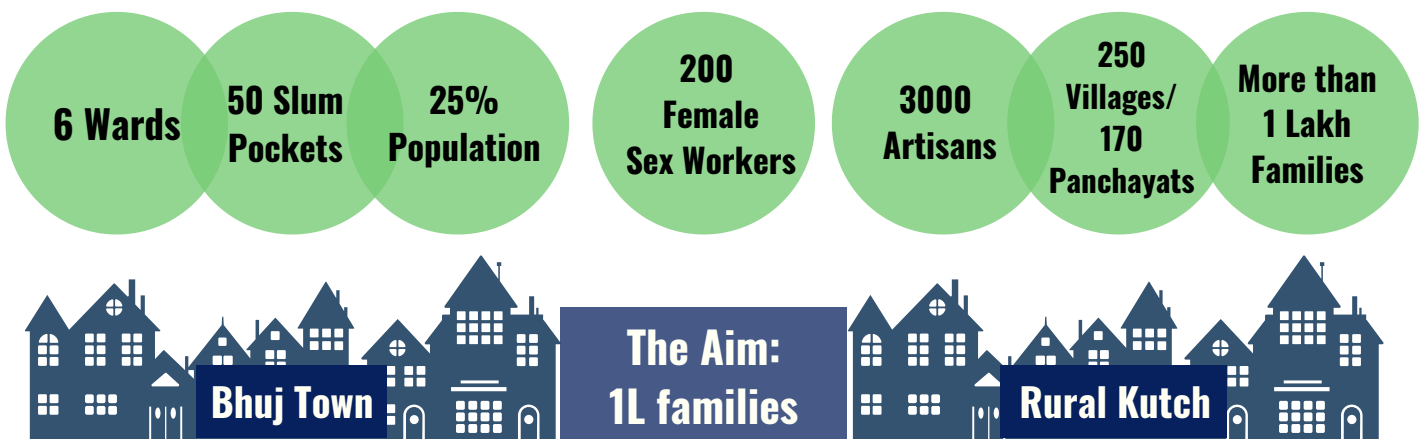
**ASSOCIATED NETWORK
ORGANISATIONS**

SUMMARY

Given the circumstances, this collaborative initiative launched the following emergency support services –

1. Tele-medicine and e-consultation support for COVID-19 patients.
2. Distribution of ration kits, safety equipment and monitoring devices amongst trained volunteers and community members.
3. Communication campaign to control the spread of the virus, guide patients to the correct set of resources, as well as help people overcome fears of vaccinations and testing by using credible influencers from amongst the community, community radio, social media, and volunteers.
4. Community kitchens and tiffin services for COVID-19 affected community members for families who were infected and quarantined, as well as the old and single women/men facing distress due to the pandemic.
5. Support to the Quarantine Centres established by gram panchayats.
6. Dedicated vaccination camps in collaboration with registered medical institutions.

The aim was to reach out and cover 1 lakh families. More significantly, three Wards of Bhuj Town which covers 50 slum pockets and 25% of the population in Bhuj under this initiative. However, KKA has covered more than 170 Panchayats and 6 wards in Bhuj (Urban) covering more than 1 lakh families, including 3000 craft artisans, all of whom have been severely affected by the pandemic, were also covered under the initiative. A count of 200 female sex workers and transgender populations that are critically vulnerable to the pandemic by virtue of their profession, loss of livelihood and societal shunning were also targeted to be covered. Total 7683 ration kits, 350 medical kits, 1350 rapid testing kits, 20 oxygen cylinders, 56000 masks, 3000 sanitizers, 1000 hand gloves, 5040 glucose, were distributed among various communities in 6 wards in Bhuj and 250 villages across Kutch.

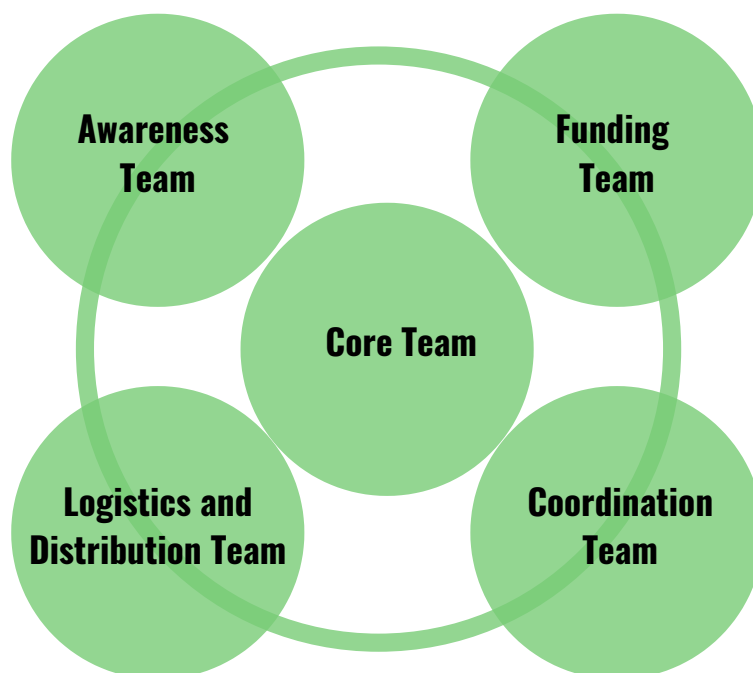


INTRODUCTION

Villages, towns and cities of India were wrecked by the deadly second wave of COVID-19 and citizens were left gasping for want of oxygen and medical support. Like the rest of India, Kutch too got engulfed by COVID-19, and communities across this far-flung district in India were reeling under the complete collapse of medical system. The voluntary organisations of Kutch came together to support the un-served communities - daily wage earners, artisans, vendors, migrants, vulnerable communities - in rural and urban Kutch, which was seeing widespread infection of COVID-19 and were in dire need of medical and economic support.

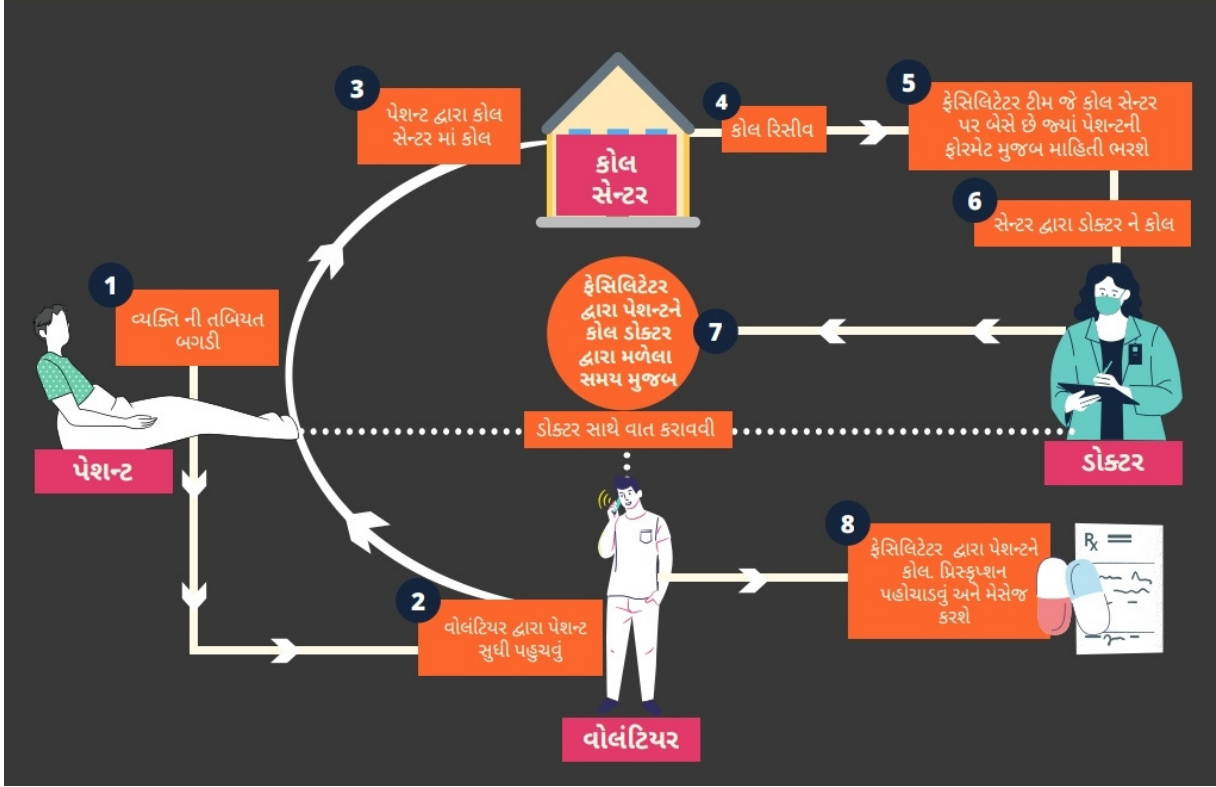
BACKGROUND

Kutch has a history of collaborative initiatives to deal with disasters like drought, 1998 - 1999 cyclone, and 2001 earthquake under the umbrella of Kutch Nav Nirman Abhiyan. The network organisations of Kutch though have registered and working separately on different areas/issues, come together in any situation of grave concern to the people and work collectively. Similarly, once graphs of COVID-19 cases started going up and prediction of loss of lives and livelihoods were visible, all partner organizations of Kutch met online to discuss the intervention(s)/initiative(s) that can be taken collectively. After a detail discussion all organisations came together and started the initiative, Kutch Karuna Abhiyan to tackle the issues of second wave and support the already over burdened official, health staff and most importantly to the people who needed support. Various Teams were formed for the smooth functioning of the initiative which includes:



E-CONSULTATION PROCESS

ટેલિ-મેડિસિન



Selection of volunteers were done by partner organisations in their respective wards & panchyats based on their willingness and understanding of the situation and health system. Selected volunteers were given online training about their roles & responsibilities.

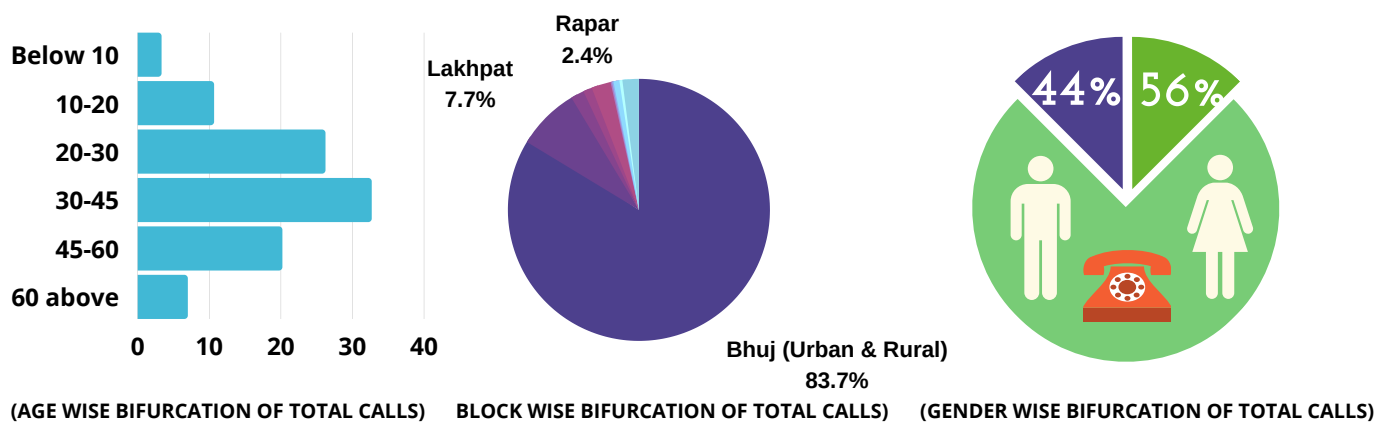
After the volunteers had received both online & field level training by health experts and the team, and a personal safety kit (facemasks, face shield, hand gloves, sanitizers, etc.) along with thermal gun and oximeter. Equipped with safety kits volunteers started visiting individual households in their respective areas. The volunteers were also trained for interacting with people and explaining them the purpose of their visit, so as to avoid creating panic among people. Many a times, people did not allow the volunteers to take oxygen and temperature readings due to fear, but the volunteers were kind and patient enough to politely explain them that taking these readings will help them receive an e-consultation and a visit to the hospital can be avoided if the illness is not major.

After taking the readings, the volunteers made a phone call to the Tele-medicine centre on the helpline number(s) and spoke to the call executive and described the symptoms along with the body temperature and oxygen levels of the patient. The call executives filled out detailed form on tele-medicine software (created by K-link Foundation) where details were shared with the doctor. The doctor looked into the filled form on the software and consulted the call executive and accordingly generated prescription which was shared with the volunteers to be communicated to the patient, be it medications or further medical tests. Some patients also had to be referred to other specialised doctors.

If any patient was unable to afford purchasing medicines or the costs of tests, they were also supported under the Kutch Karuna Abhiyan. For Bhuj city, the organisations partnered with a local medical shop, who provided free medicines to the patients referred by the helpline. Payment to the pharmacy was made under the Kutch Karuna Abhiyan. Similarly, in rural areas, patients were prescribed medicines that were easily available in the local Primary Health Centres/ sub-centres.

A follow up call was made by the executives every three days to the volunteers/ patients to assess the health status and to further advise accordingly.

SUMMARY OF CALLS RECEIVED



Out of a total 553 calls between 5th May to 10th June, nearly 84% calls were from Bhuj block (rural and urban). Remaining 16% calls were received from rural areas of Lakhpat, Rapar, Anjar, Bhachau, Nakhatrana, Gandhidham, Mundra, Chotila and Sayla blocks of Kutch and Surendranagar. The month of May saw 496 calls, while June had 57 calls. Majority of calls were received from people between 30 and 45 years of age (32.7%), followed by people between 20 and 30 years of age (26.2%). Nearly 56% of calls were from female patients. For detailed data and graphic representation, please refer to the Annexure/Link.

It is noteworthy that majority of the calls received were from the Bhuj urban area as, clearly, the hospitals in Bhuj were burdened with COVID-19 patients and people did not want to visit a hospital for other illnesses. In such a situation, telemedicine proved to be a blessing for them, as healthcare services were at their doorstep. On the other hand, in rural areas, the telemedicine facility did not gain much popularity, as the PHCs/CHCs/subcentres were already providing primary healthcare services and there were some private doctors as well. More importantly, people felt more comfortable in visiting a doctor personally for check up and consultation rather than on a phone call.

ACTIVITIES/SERVICES

KUTCH DISTRICT - GUJARAT

Precautionary Activities In Villages

Distribution and training of volunteers in the use of thermal guns , oximeters, masks and sanitizers.



KUTCH DISTRICT - GUJARAT

Collaborations With the Govt. In Villages

in setting up of care units, testing drives for COVID-19, etc.



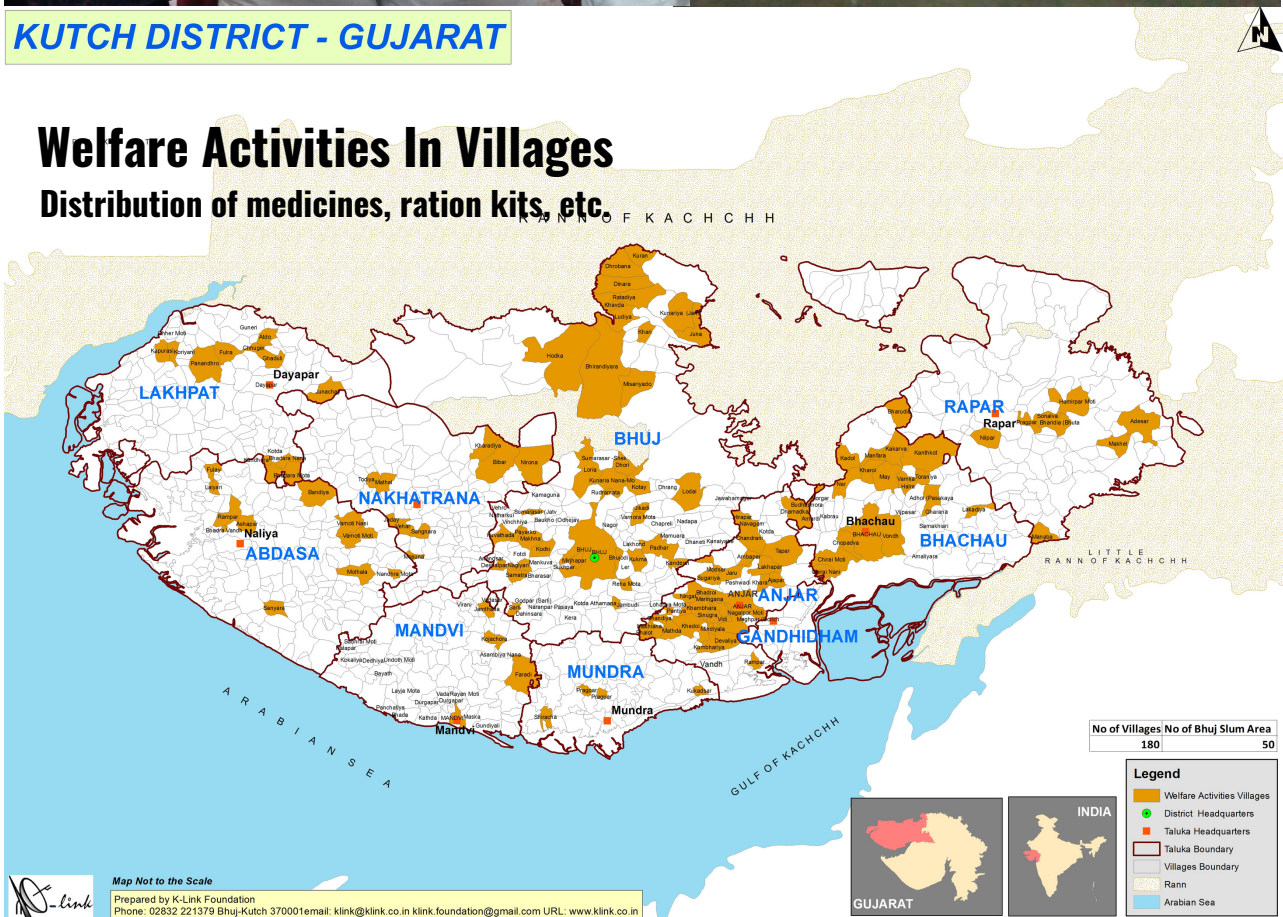
DISTRIBUTION OF RATION KITS

The pandemic hits even more to those whose economic condition is not stable specially those whose source of livelihood depends on daily earnings. Keeping this in mind and after assessing need/demand from the field a total of 7683 ration kits were distributed among different categories/communities by the volunteers and team members of Kutch Karuna Abhiyan.



KUTCH DISTRICT - GUJARAT

Welfare Activities In Villages Distribution of medicines, ration kits, etc.



DISTRIBUTION OF SAFETY EQUIPMENT & MONITORING DEVICES IN COMMUNITIES

Under Kutch Karuna Abhiyan, safety of field volunteers was a topmost priority. All the volunteers were provided with face shields, face masks, hand gloves and sanitizers before they started home visits. They were also given oximeters and thermal guns. The isolation centres in villages, that were set up by the Panchayats were also provided with 5L bottles of sanitizer, glucose packets, washable and single use face masks, hand gloves, PPE kit and a set of bedding (bed, pillow and bedsheet). Oxygen cylinders & Concentrators were also provided to some isolation centres. Medicines were donated to PHCs & CHCs in the villages.

1350 Rapid testing kits were also donated to village Panchayats to encourage testing among residents and to be able to identify and isolate such people who test positive. Mass testing camps were organised in villages by the PHCs, CHCs and Panchayats, where these testing kits were used.



AWARENESS CAMPAIGNS



“ડરો નહિં, હિંમત રાખો, હારશે કોરોના”

ઘરે બેસીને ડોક્ટર સાથે વાત કરો અને ચિંતામુક્ત બનો

શું તમને તાવ, શરદી, ઉધરસ, ઝાડા-ઉલ્ટી, શરીરમાં કળતર, સ્વાદ કે સુગંધ ના આવતા હોય એવાં કોઈ પણ લક્ષણ છે ? તો, ચિંતા કરવાની જરૂર નથી, ફક્ત જરૂર છે એક ફોન કરવાની !

હેલ્પલાઇન નંબર

૯૦૫૪૯૯૮૪૫૦ ૯૦૫૪૯૯૮૪૫૧ ૯૦૫૪૯૯૮૪૫૨

ઉપરના કોઈ પણ નંબર ઉપર ફોન કરો. ડોક્ટર સાહેબ તમારી સાથે વાત કરશે અને તમને દવા પણ લખીને મોકલશે. આપના વિસ્તારમાં કાર્યરત “સખિ સંગિની”, “અર્બન સેતુ” સંસ્થાઓ અને “શાહે જિલ્લાની યુવક મડલ”માં કાર્યરત આપણા વિસ્તારના આગેવાનો તેમજ સ્વયંસેવકો પણ તમારી મદદ કરશે! જે તમારું ઓકસીજન અને તાવ છે કે નહિં એ પણ તપાસી આપશે અને ડોક્ટર સાથે વાત કરાવી આપશે.

સ્વયંસેવકનું નામ



સંપર્ક નંબર

વધુ માહિતી માટે સંપર્ક કરો
અર્બન સેતુ (9978997224)
સખીસંગિની (9586790573)



“ડરો નહિં, હિંમત રાખો, હારશે કોરોના”

ઘરે બેસીને ડોક્ટર સાથે વાત કરો અને ચિંતામુક્ત બનો

શું તમને તાવ, શરદી, ઉધરસ, ઝાડા-ઉલ્ટી, શરીરમાં કળતર, સ્વાદ કે સુગંધ ના આવતા હોય એવાં કોઈ પણ લક્ષણ છે ? તો, ચિંતા કરવાની જરૂર નથી, ફક્ત જરૂર છે એક ફોન કરવાની !

હેલ્પલાઇન નંબર

૯૦૫૪૯૯૮૪૫૩ ૯૦૫૪૯૯૮૪૫૪

ઉપરના કોઈ પણ નંબર ઉપર ફોન કરો. ડોક્ટર સાહેબ તમારી સાથે વાત કરશે અને તમને દવા પણ લખીને મોકલશે. આપના વિસ્તારમાં કાર્યરત “કરછ મહિલા વિકાસ સંગઠન” સંસ્થા માં કાર્યરત આપણા વિસ્તારના આગેવાનો તેમજ સ્વયંસેવકો પણ તમારી મદદ કરશે! જે તમારું ઓક્સીજન લેવલ અને તાવ છે કે નહિં એ પણ તપાસી આપશે અને ડોક્ટર સાથે વાત કરાવી આપશે.

સ્વયંસેવકનું નામ



સંપર્ક નંબર

વધુ માહિતી માટે સંપર્ક કરો
કરછ મહિલા વિકાસ સંગઠન

Alongside home visits and testing, the field volunteers also went door to door and spread awareness about washing hands regularly, wearing masks and maintaining social distancing. They also explained about the telemedicine facility and process, and how can people get correct medication at home itself. Banners were prepared for the same and put up at eminent places in the localities, informing the residents about COVID-19 appropriate behavior, telemedicine centre helpline numbers and about the e-consultation process. An autorickshaw with loud speaker was driven around in the communities informing people to stay at home, follow COVID-19 appropriate behaviour, not to take any of the symptoms lightly and seek medical assistance as early as possible. Voice messages from eminent persons like Sarpanch, community leaders and influencers were circulated on social media that stressed on the importance of wearing masks, maintaining social distancing and how the community can collectively help flatten the curve.

People were also made aware of the COVID-19 vaccination and why its important to get vaccinated. Volunteers encouraged people to register themselves and get vaccinated. Volunteers also helped those who found it difficult to reach vaccination centres. Community leaders, political leaders also echoed a similar voice, and in some places, the community influencers led the drive and got vaccinated first, to motivate people and assure safety.

CONCLUDING REMARKS

While the initiative has shifted its focus on campaign for vaccine, the need for tele-medicine centre was not felt to be necessary as the number of cases saw a decline and additional support was not required. The decision was taken on the basis of number of calls received that were declining. Tele-medicine Centre was closed on 10th June, 2021. However, the the process of E-consultation is satisfying to a great extent in terms of reaching out to the people in distress and need for medical assistance which also became a tool for awareness about Covid-19 and vaccines in the communities.

WAY FORWARD

કોરોના સમયમાં શા માટે એકઠા ના થાઓ?

- અત્યારે શહેરો અને ગામોમાં કોરોના જડપથી ફેલાઈ રહ્યો છે
- લગ્ન, મરણ પછીની વિધિ વગેરેમાં લોકો એકઠા થવાથી બિમારી જડપથી ફેલાય છે
- એક બિમાર વ્યક્તિ અનેક લોકોમાં બિમારી ફેલાવી શકે છે



સામાજિક કાર્યક્રમોમાં શું સાવધાની રાખવી

- વપથી વધારે લોકોને ના બોલાવો. 
- ૨-૩ કલાકમાં કાર્યક્રમ પૂરો કરો. 
- મોં અને નાક પર કપડું ઢાંકીને જ રાખો. 
- હાથ અ મિલાવો દુરથી નમસ્તે કરો. 
- જેને ઉધરસ અથવા તાલુ હોય, તેઓ કાર્યક્રમમાં ના આવે. 



18 વર્ષ થી વધુ વયના તમામ વેક્સિનેશન માટે રજિસ્ટ્રેશન 28 એપ્રિલથી શરૂ કરવામાં આવ્યું છે

Registration Process!

વેક્સિન ના રજિસ્ટ્રેશન માટે ના સ્ટેપ નીચે મુજબ છે <https://selfregistration.cowin.gov.in>

- 1 આ લિંક ઓપન કરી રજિસ્ટ્રેશન પોર્ટલ પર જઈ રજિસ્ટ્રેશન નો વિકલ્પ પસંદ કરો
- 2 તમારો મોબાઈલ નંબર આપીને ગેટ OTP પર ક્લિક કરો.
- 3 તમારા મોબાઈલ નંબર પર OTP આવશે, જે 180 સેકન્ડમાં સબમિટ કરવાનો રહેશે
- 4 OTP સબમિટ કરતા જ નવું પેજ ખુલશે, જેમાં તમારી વિગતો ભરવાની રહેશે
- 5 ફોટો આઈડી માટે આધાર ઉપસંત ક્રાઈલિંગ લાઈસન્સ, પાનકાર્ડ, પાસપોર્ટ, પેશન પાસબુક, એનપીઆર સ્માર્ટ કાર્ડ કે વોટર આઈડી પણ માન્ય રહેશે.
- 6 તેમાંથી ફોટો એક વિકલ્પ પસંદ કરી આઈડી નંબર આપો
- 7 નામ, જાતિ, જન્મ તારીખ જણાવવાની રહેશે.
- 8 ત્યારબાદ નજીકનું કોવિડ વેક્સિનેશન સેન્ટર પસંદ કરવાનો વિકલ્પ મળશે
- 9 સેન્ટર સિલેક્ટ કર્યા બાદ તમને અનુકૂળ સમય નો સ્લોટ પસંદ કરી શકો છો





The initiative is still continuing its campaign to make people aware about the need & importance of getting vaccinated and curb the vaccine hesitancy among various communities in Kutch. Various pamphlets, posters and banners busting myths and misconceptions regarding vaccines are distributed/circulated through various mediums including online. The vaccine drive is going to be one of the major focus of Kutch Karuna Abhiyan given the time where new variants are indicating future waves. The initiative however has created a sense of confidence among people as the awareness programme is also carried out by the community, religious and local leaders of each ward/village or the locality.



KKA-IMPACTING FAMILIES

CASE STUDY

“While remembering the incident Bhavna Ben says *“in the time of distress when your own relatives, neighbors and sometimes even family cannot help, Sanstha (Organisation) comes in support & rescue”*.”

Bhavna ben is a resident of Ramdev Nagar (Ward No. 11), Bhuj who is associated with Sakhi Sangini which is part of Kutch Karuna Team. She was pregnant during the peak of second wave. Some of the family members developed the symptoms of Covid-19. They contacted Tele-Medicine centre for assistance where doctors present helped them with necessary medical assistance and since the symptoms were such they were also connected to Urban Health Centre through the helpline number for further assistance.



Above: Bhavna ben with her child

RTPCR test showed four members of her family were positive which added more layers to problems she was facing at home. In such situations relative, neighbors cannot and do not help. With the help of volunteers (both medically and economically) they started getting back to normal within 10 days. However, Bhavna ben started showing symptoms which was mild but had to take medical assistance which again was provided initially by tele-medicine centre through calls as she could not go anywhere in such a situation. Her delivery date was due and since her economic background is not strong the team took her to the Hospital where she can give birth to her child without any cost and get benefits under Chiranjeevi scheme.

However, the doctor denied her admission stating she has symptoms of Covid-19 which later demanded that if she pays 15000 they will admit. Two lives were at stake, so the team agreed to pay. Baby was born but was malnourished which required extra care, nutrition etc. However, this time the team raised the issue of money being paid and lack empathy towards marginalized people who cannot afford such huge fees.

The team coordinated with the Urban Health Centre, wrote letter to the DDO because of which the child was kept under Bal Shakka (Child's care wing) for 8 days. Once they came back home they needed nutritious food that is required to the mother and child which was provided by Kutch Karuna Abhiyan along with basic ration support.

The whole incident was not only draining and painful in terms of economic & physical burden but also affected them mentally where entire family was under pressure and worried. During this time also the field workers/volunteers of Kutch Karuna Abhiyan stood with them as a moral and emotional support. The team kept contacting via calls.

ACKNOWLEDGEMENTS

Kutch Karuna Abhiyan extends its gratitude to everyone who has been a part of this initiative and would like to emphasize that the contributions by one and all have added immense value to this initiative.

We are extremely grateful to all the Medical Practitioners without whose support it was not possible to provide medical assistance to the people of Kutch. Special thanks to Dr. Mann Thacker and Dr. Nehal Vaidya for supporting KKA through out the initiative. We are thankful to the Indian Medical Association, Bhuj for their support and guidance.

We are also very grateful to the Harijan Sewa Sangh for providing the premise i.e. Sarvjanik Kumar Chhatralaya at Lal Tekri, Bhuj which served as the Tele-Medicine Centre.

We are specially grateful to the funding partners without whose help it was not possible to provide support to such a large beneficiaries of Kutch Karuna Abhiyan initiative.

This would not have been possible without the support of Panchayats/councilors/ward committee members etc.

Undertaking such a huge initiative would also not have been possible without the efforts of all the staff members and volunteers of the partner organisations, community leaders and donors who had faith in this initiative.

REFERENCES

For more information, go through the links given below:

- Photos/videos of the field activities [here \(link\)](#)
- Data:
 - [Activity-Wise Data](#)
- [Annexure](#)