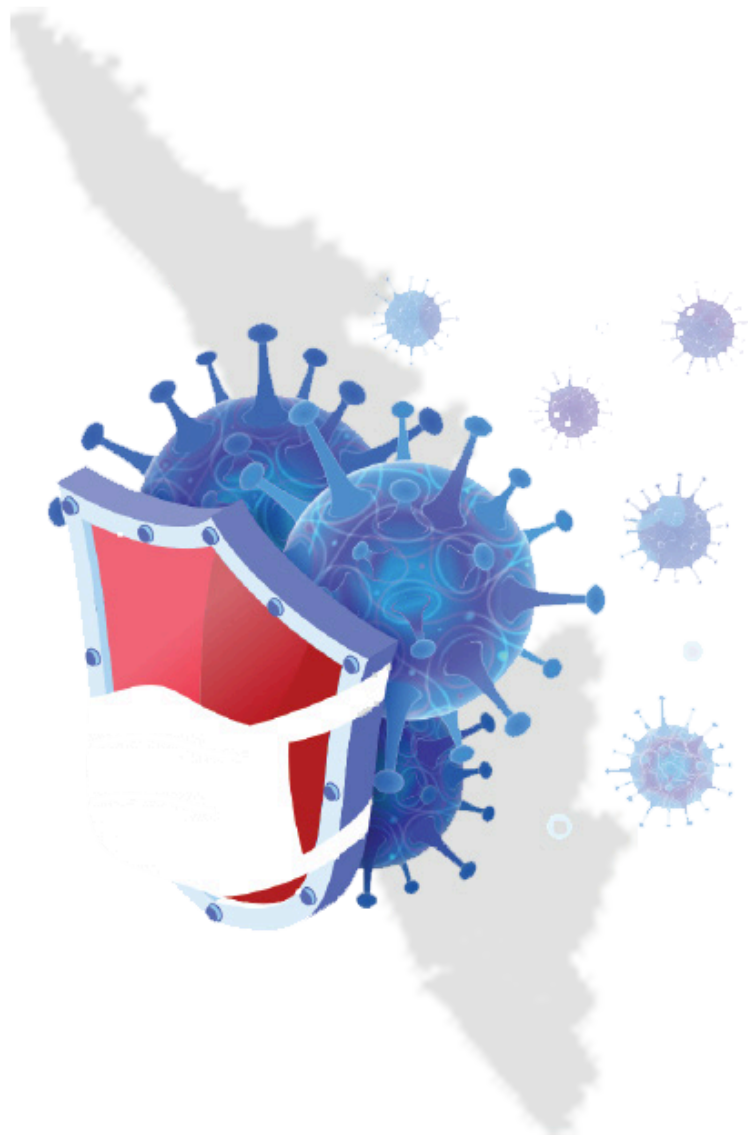




Response to COVID-19

Kerala



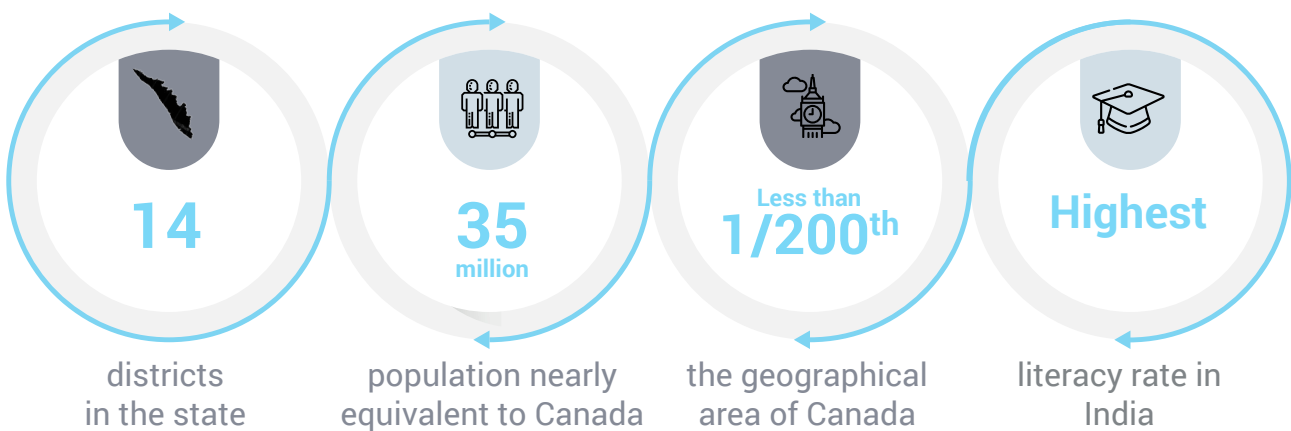
Context

What can one Indian state teach the world? The global battle against COVID-19 has proved to be a challenge for many countries, India included. There has been a wide range of responses to the virus; while the characteristics of the disease and principal modes of transmission are similar across the world, local factors such as population density, patterns of social interaction and the capability of local public health systems determine the course of the disease. This applies even at the state level; India, a diverse country with several geographies and demographics, has witnessed different responses across its many states. In many places, initiatives driven by local innovations, resourcefulness, and commitment are leading to inspiring success stories—the state of Kerala is one

such outstanding case. In fact, its rigorous campaign to defeat COVID-19 attracted international attention early on.

Kerala, located on the southwestern end of the Indian subcontinent, is divided into 14 districts in terms of administration. Its population of around 35 million people, is marginally less than that of Canada, living in less than 1/200 of geographical area. The state is unique, with the highest literacy rate in the country and noteworthy achievements in education, health and social justice. It also sends many workers out into the world, as part of India's diaspora, contributing in the fields of healthcare and engineering, among other sectors.

Kerala: Overview



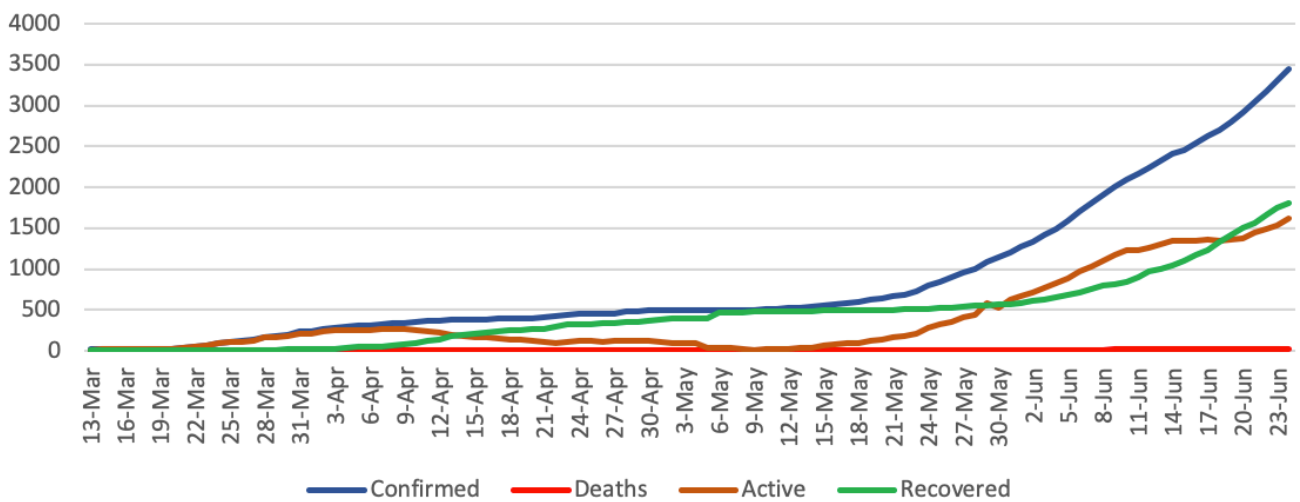
As the virus began to spread around the world, some Indians began to return home, to relative safety. When Kerala registered India's first COVID-19 case on 30th January, 2020 (IDFC Institute, 2020), the state was prepared. Four days before registering its first case, Government of Kerala (GoK) had already released novel coronavirus-specific guidelines that established case definitions, screening and sampling protocol, hospital preparedness and surveillance. Over the weeks that followed, a series of comprehensive measures were rolled out. By the time, the second case was registered on 2nd February 2020 (4th day), the State Government had already modified its testing and tracing protocol and initiated local testing labs. The rapid screening

and quarantining of patients and isolation of their contacts delayed the transmission from imported cases for up to 40 days, until Kerala witnessed its first cluster outbreak in the district of Pathanamthitta. A total of 14 confirmed cases were registered over the two days that followed.

Given the early spread of the virus in Kerala, it is commendable that the state had two consecutive days of zero new cases over the 100- day period from the day it registered the first case of COVID-19. Given its relatively efficient public health care systems, backed by strong socio-economic foundation and the experience of

previously handling the Nipah virus in 2018, the State was able to act swiftly. Kerala prepared itself to address the pandemic as early as January. The State followed the time-tested strategy of case identification, isolation, contact-tracing and vulnerability mapping in containing the virus. Kerala's public healthcare system is decentralized with facilities at the state, district, sub-district, panchayath, and ward level. Government hospitals at all levels, from the primary health centres to the medical colleges, were given clear responsibilities. The field-level staff including health inspectors, ASHA (Accredited Social Health Activists)

workers functioned in teams as the first line of defence and reached out to people even in remote locations. Coordination at the middle level was largely done by the District Collectors who worked in close coordination with the District Medical Officers and the district-level heads of the police. One of the flagship measures adopted by the State was the development of COVID First Line Treatment Centers and COVID-19 Care Centers. Local testing labs, district-wise allocations and, later, walk-in sample kiosks, allowed Kerala to quickly scale up testing capacities and, over time, conduct mass screenings and serological tests.



COVID-19 Kerala Graph, June 2020



Innovations and outcomes



Kerala’s strategies towards Covid-19 response largely focused on three main aspects-effective risk communication strategy, community-based approach and social welfare policies.



Effective risk communication

Clear communication channels were established by the Kerala government to inform the public, check media speculations, attend to the needs of people home quarantined and dispel fake news. Graphically represented route maps of Covid- 19 patients were publicized to identify people who may have been exposed to the virus, to quarantine them immediately. It proved to be very effective as it nudged concerned people to approach the authorities and helped in identifying people missed out by the authorities. Regular public dissemination of surveillance data helped in gaining people’s trust and keeping their

panic under control. The Chief Minister’s daily evening press conference to share information on the number of cases, recoveries and deaths, government initiatives, and emphasize on the importance of precautionary measures further reassured the public. The Kerala government also launched a mobile application ‘GoK Direct’ to ensure the public had access to the right information regarding monitoring symptoms, approaching health officials, self-care and isolation etc. To enhance awareness and induce a behaviour change, a public health campaign ‘Break the Chain’ was launched to promote personal hygiene practices and social distancing. The campaign was largely successful in containing the spread of the virus.



Community- based approach

Actively engaging the community has been a notable feature of Kerala’s response strategy. To ensure people strictly complied to ‘home-quarantine’, neighbourhood watch initiatives were in place and a WhatsApp number was created by the district administration, which the public used to report violators. The on- ground surveillance systems were community-based involving elected representatives of local governments, members of the self-help group (SHG) called ‘Kudumbashree’ and the people who came forward and volunteered. A portal was created to engage volunteers, and anybody could register themselves at the local government level. Help lines were created to help elderly people to ensure supply of medicines and food materials through the volunteers. Community kitchens were also set-up by the local governments with the support of ‘Kudumbashree’ to ensure cooked meals were readily available to the needy.





Social welfare policies

Along with having appropriate containment measures, adequate testing, tracing and treatment, the Kerala government also ensured the process conformed to the needs and requirements of health workers, migrant workers who were referred to as 'guest workers', isolated patients and other vulnerable communities by taking considerate measures to socially and economically protect them. Arrangements were made to home deliver

'essential supplies' to people who were home quarantined, midday meals from schools were delivered to children even though the schools were shut and mental health helplines were established across the state. Special arrangements were done for the 'guest workers' by providing them with cooked food/food materials and entertainment and regular monitoring of hygiene and sanitation facilities in their camps. The Kerala government also announced a Rs. 200 billion relief-package, to tackle the health crisis with funds earmarked for health initiatives, loans and free ration.

The way forward

While Kerala has been lauded for a relatively more effective strategy in dealing with the global pandemic, there are a lot of upcoming challenges the state has to deal with. In the last two years, Kerala had witnessed its worst floods; these caused widespread damage, which some are still recovering from despite the state's best efforts and aid from around the world, particularly the diaspora. As the state braces itself for heavy monsoons in the month of August, preventive measures need to be rolled out to contain the spread, keeping in mind the cascading impacts in the eventuality of further floods and resultant landslides.

Kerala is now reporting a rise in COVID-19 cases, with 152 new cases in a day as of Wednesday, 24th June; currently 3,063 confirmed cases and 23 deaths have been reported. An additional challenge the state is gearing up to is contending with the large expat population of Kerala, which continues to return. A major reverse migration trend, especially from the Middle East (which is currently a hotspot for COVID-19), is anticipated. While Kerala had just about managed to flatten the curve, with the return of the expats to the state, a spike in active COVID-19 cases was witnessed. The state is now anticipating the largest influx of expats due to the COVID-19 crisis and has been planning for their return by expanding the number of hospital beds and quarantine centers.

Even though Kerala's handling of the crisis has been commendable, an economic crisis looms large over the state. Around 20% of Kerala's population resides abroad and with the ongoing crisis a large number of expats have been returning to Kerala (Policy Circle, 2020). This puts Kerala in a unique vulnerable position due to an increased

risk of virus and a fall in the foreign remittances. Foreign remittances account for one-third of Kerala's economy and with 15-20% fall in remittances being predicted this year, Kerala will face serious challenges in recovering the economy (moneycontrol, 2020). Tourism also plays a significant role in contributing to the economy of the state. It accounts for 10% of the state GDP. With the current crisis, the sector is facing an unprecedented shutdown (The Lede, 2020). For economic recovery, Kerala can consider partially opening the tourism sector by exploring the concept of 'travel bubble'. A concept being considered by Pacific nations such as Australia, New Zealand and Fiji wherein they will open their borders to international tourists from COVID-19 virus free nations. A similar approach can also be explored in Kerala by opening limited tourist locations, for instance the backwaters or the hill stations. The tourists can be placed in areas sealed from the general community and a special zone be created for the tourists starting from the airport, till they are transferred to a geographically isolated resort. The existing state response mechanism can be extended to handling the international tourist inflow with strict precautionary measures. Considering Kerala already has a reliable response mechanism in place, the viability of these measures can be considered as steps towards reviving the economy.

The key to Kerala's success in handling the COVID-19 crisis lies in its meticulous planning, which was drawn from the lessons learnt during its battle to contain the Nipah virus outbreak and an effective leadership. Kerala's pioneering model has also guided other states and countries in their handling of the current pandemic.

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