



# INTERNATIONAL DAY FOR DISASTER REDUCTION (IDDR, 2020)

*“Strengthening Disaster Risk Governance to manage  
disaster risk”*



Assam State Disaster Management Authority

## 2020 – Target

Substantially increase the number of countries with national and local disaster risk reduction strategies by 2020

**A detailed report on celebration of IDDR, 2020 and local DRR strategies adopted for management of COVID-19 hazard vis a vis Flood in Assam**

Report prepared By - Assam State Disaster Management Authority, Govt. of Assam

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## FOREWORD



The world is coping with unprecedented challenge of a climate emergency and a full-blown pandemic at the same time. COVID-19 is a clear example of what is meant by systemic risk, and an illustration of the impacts of both the disaster event and the responses adopted by States. If disaster risk reduction is included in development plans and climate adaptation plans and budgets, all parts of government within and across sectors are then able to programme risk reduction actions and investments. As a part of the Global DRR community, our country has a commitment to implement the Sendai 7 targets at the local level. One very important target of Sendai 7 is to reduce disaster mortality by 2030. However, in order to achieve the target of reducing mortality, implementation of local DRR initiatives play an important role. The citizen engagement at the local level on DRR issues and their sensitization on disaster risk reduction is very crucial to reduce death. Volunteers and local youth need to be engaged and sensitized on risk management practices to strengthen the community units. They must be equipped with resources to better mitigate the risks.

In a recent experience of managing the COVID-19 crisis, Assam State Disaster Management Authority issued several guidelines and advisories for the State following the national advisories. ASDMA also mobilised volunteers in COVID-19 response and extended support towards providing psychosocial support to the affected communities. The experience of the State and Districts while dealing with COVID-19 crisis has been collated in this document and I hope this document will provide useful insights to the administrative bottlenecks and lessons learnt while dealing with a health emergency at the local level.

Guwahati

01-12-2020

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## ACKNOWLEDGEMENT



On behalf of Assam State Disaster Management Authority, I would like to sincerely thank the Deputy Commissioners of Barpeta, Goalpara, Morigaon, Kokrajhar and Cachar District who actively participated in the video conference held with the District Disaster Management Authorities on the occasion of International Day for Disaster Reduction and shared their valuable inputs on experiences of the Districts while dealing with the COVID-19 pandemic and flood. It was really a great to hear from them about the best practices at the District level. I would also thank the DDMA officials and staff who contributed write ups for compilation of this document and also congratulate them for their hard work during the crisis times. ASDMA has made an effort to document the experiences shared by the districts and share it with the public at large. Dealing with a health hazard in the midst of other known hazards emerged as a challenge to the District and State Authorities, however prompt response of the State government in association with civil society organizations and UN agencies helped towards effective mitigation of the disaster.

I offer sincere thanks to the all health workers and other officials / staff of the State and the District administration and officials / staff of emergency services who toiled day and night to deal with the pandemic.

Guwahati  
01-12-2020

*Dhiraj Saud.*  
(Dhiraj Saud)

## A BRIEF BACKGROUND

The United Nations General Assembly has designated 13 October as International Day for Disaster Risk Reduction to promote a global culture of disaster risk reduction. It is an opportunity to acknowledge the progress being made toward reducing disaster risk and losses in lives, livelihoods and health in line with the Sendai Framework for Disaster Risk Reduction 2015-2030 adopted at the Third UN World Conference on Disaster Risk Reduction in Japan in March 2015.

In 2016, the UN Secretary-General launched “The Sendai Seven Campaign” to promote each of the seven targets of Sendai Framework over seven years.

### **Sendai Seven Targets are as below:**

**2016 – Target (a):** Substantially reduce global disaster mortality by 2030, aiming to lower the average per 100,000 global mortality rate in the decade 2020-2030 compared to the period 2005-2015;

**2017 – Target (b):** Substantially reduce the number of people affected globally by 2030, aiming to lower the average global figure per 100,000 in the decade 2020-2030 compared to the period 2005-2015;

**2018 – Target (c):** Reduce direct disaster economic loss in relation to global gross domestic product (GDP) by 2030;

**2019–Target (d):** Substantially reduce disaster damage to critical infrastructure and disruption of basic services, among them health and educational facilities, including through developing their resilience by 2030;

**2020 –Target (e):** Substantially increase the number of countries with national and local disaster risk reduction strategies by 2020;

**2021–Target (f):** Substantially enhance international cooperation to developing countries through adequate and sustainable support to complement their national actions for implementation of the present Framework by 2030;

**2022–Target (g):** Substantially increase the availability of and access to multi-hazard early warning systems and disaster risk information and assessments to people by 2030.

This year the target was “Substantially increase the number of countries with national and local disaster risk reduction strategies by 2020” which lays the foundation for the implementation of the Sendai Framework and is closely linked with Priority for Action 2:

*“Strengthening Disaster Risk Governance to manage disaster risk”*

**Goal:** Identify advocacy opportunities to highlight how good disaster risk governance, planning and implementation leads to reduced numbers of people

affected by disasters (especially in terms of death, injury, displacement and loss of livelihood).

**Objectives:**

- Promote and encourage events at State, District and community level to mark implementation of the Sendai Framework with a focus on governance and Target E,
- Highlight challenges faced with the COVID-19 pandemic;
- Develop capacity to implement integrated whole-of-society action on disaster risk reduction including for biological risks and hazards;
- Integrate risks associated with biological hazards, including pandemics, in local strategies for disaster risk reduction (especially in District DM Plan, Departmental DM Plan, Village DM Plan, School DM Plan etc.)
- Integrate in Local DRR strategies the risk of climate emergency and full blown pandemic at the same time

Disaster Risk Reduction requires all of society engagement to develop and successfully implement local strategies for disaster risk reduction. Unless global greenhouse gas emissions fall by 7.6 per cent each year between 2020 and 2030, the world will not

achieve the 1.5°C temperature goal of the Paris Agreement. Good planning, national and local DRR strategies saves lives and reduces the risk of displacement in floods, storms and drought. 25 million people are displaced every year by climate and weather. Planning for drought, heatwaves and wildfires in local DRR strategies can reduce the risk of all three and speed up adaptation to climate change. It is important to include the potentially vulnerable in developing and implementing a local strategy to reduce disaster risk. #COVID19 has reinforced the need for people with life-threatening and chronic disease, living with disability or in poverty, to be included in the design of policies and plans to manage their risks. Risk-informed land use planning and building codes are key elements of any national strategy to reduce disaster risk. Careful planning around the location of critical infrastructure saves lives and avoids economic losses. Schools, hospitals, bridges, roads, public utilities should be planned in such a way to make sure they are still there when we need them most. Unplanned urbanization creates greater risk of floods. Too many people die in earthquakes, floods and storms because of poor planning and failure to implement adequate building codes. Climate and extreme weather displace an average of 25 million people every year in their own countries. Reducing risk of displacement needs to be

a goal of local DRR strategies. About 95% of #COVID19 cases have come from urban areas. Pandemic preparedness in cities and towns must be included in urban and local strategies for disaster risk reduction. Disaster risk reduction is the desired outcome of all measures which can be taken to reduce loss of life, injury and displacement, damage to critical infrastructure and loss of access to basic services, because of both man-made and natural hazards. #COVID19 shows that consumption patterns, travel & trade, urban density, lack of access to clean water combined with poor risk management creates conditions for an outbreak to become an epidemic, a pandemic– and a global economic & social disaster. If we do not improve disaster risk governance, the #COVID-19 pandemic will be viewed by future generations as a lesson that was ignored in the course of destroying the planet. The greatest single driver of disaster risk is weak governance and lack of political commitment to invest in disaster prevention. Good governance means good national and local DRR strategies. If the benefits of investing in disaster risk reduction were fully realised, we would not be facing a global economic crisis. The world would have been better prepared to mitigate the impact of the #COVID19 pandemic. Good disaster risk governance can be measured by lives saved, fewer people affected and reduced economic losses.

### **Some questions for local authorities to consider for promoting the day-**

- ✓ Do your local strategies for disaster risk reduction take adequate account of biological, technological and environmental hazards and risks?
- ✓ Have you been able to establish and strengthen government coordination forums composed of relevant stakeholders at the state and local levels, such as State and local platforms for disaster risk reduction?
- ✓ Have you designated focal point for implementing the Sendai Framework for Disaster Risk Reduction 2015–2030?
- ✓ Are you addressing disaster risk in publicly owned, managed or regulated services and infrastructures?
- ✓ Do you include financial incentives, public awareness-raising and training initiatives?
- ✓ Does your local strategy for disaster risk reduction have a clear vision supported by plans, the necessary competence, legislation, resources, guidance and co-ordination within and across sectors?
- ✓ Have you put in place organizational structures to implement the Sendai Framework or risk-informed sustainable development?

**CELEBRATION OF INTERNATIONAL DAY  
FOR DISASTER REDUCTION, (IDDR, 2020)  
ON 13<sup>TH</sup> OCTOBER, 2020**

Assam State Disaster Management Authority (ASDMA) celebrated the International Day for Disaster Reduction (IDDR) on 13th October, 2020. To mark the occasion of International Day for Disaster Reduction, a Video Conference was held under the Chairmanship of Shri. M.S. Manivannan, IAS, Chief Executive Officer (CEO, ASDMA) with all the Deputy Commissioners of Assam. The Video Conference was attended by the staff of District Disaster Management Authorities (DDMA) s. The Video Conference was chaired by Shri. M.S. Manivannan, IAS, Commissioner & Secretary (Revenue & DM & Chief Executive Officer (ASDMA) and convened by Shri. Dhiraj Saud, ACS (Deputy Secretary & State Project Co-ordinator, ASDMA). Shri. Manivannan highlighted on the sufferings every year due to floods in Assam. He also mentioned about loss of precious lives every year and that the trend of loss of lives is increasing day by day. He spoke about the concern of losing 122 lives in 2020 flood and the trend in last 5 years. He discussed in detail about the impact created by flood on livelihood of people, impact on education, health etc. He called for preparation of the Gaon Panchayat Disaster Management Plans (GPDMP) and its implementation under SDRMF

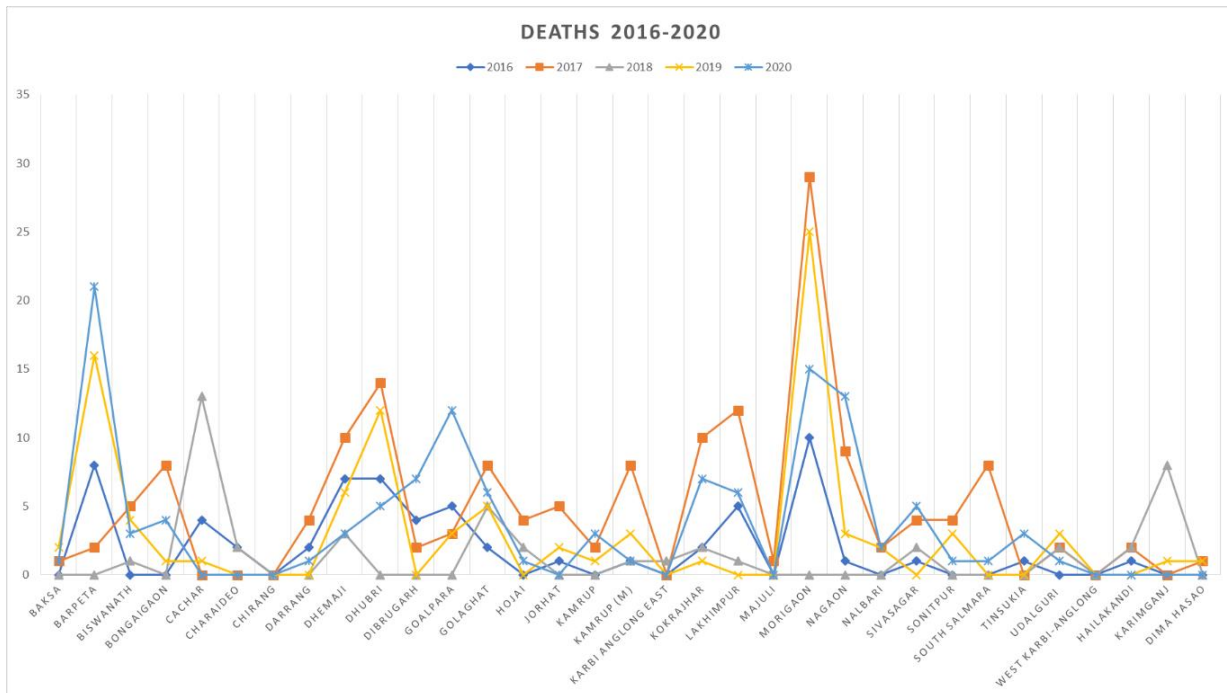
(State Disaster Risk Management Fund) to sensitize people and minimize deaths. He laid more focus on the cause of drowning of people which is a major concern during flood every year. He talked about strengthening village level teams for better preparedness and implementation of community based disaster risk reduction activities.



After the speech from Chairperson, a short presentation was made by Shri. Mukta Ram Deka, Project Manager (DRR) on the “Cumulative Flood Deaths of last 5 years” and an analysis of flood deaths that occurred in last 5 years.

The Deputy Commissioners of Barpeta, Goalpara, Morigaon, Kokrajhar presented the cause of death in their District along with initiatives taken to minimize the deaths. The reasons for increasing death were discussed in details along with some best practices of the districts.

Shri. Munindra Sarma (IAS), Deputy Commissioner, Barpeta presented on the “District level practices and factors that either increased the death or helped in



preventing more deaths”. He highlighted on the hazards like Flood, Storm, Lightning, Fire incident, Earthquake, Erosion etc. that affect the district every year. He mentioned about a fire incident that took place in a cracker factory at Bilortarihathi of Barpeta town and led to death of 4 people and 8 sustained severe injuries. During the year 2020, Barpeta recorded the highest number of flood deaths. Out of 21 lives lost, 14 are children deaths. He mentioned that most of the people are reluctant to leave their flood submerged houses and come to relief camps which makes them vulnerable of being washed away by floods and most of the people prefer to live in their boats. The flood affected areas are mostly low lying with depths of 4-5 m and the river has a depth of 10-20 meters. People move in boats and or bamboo barges during nights which have led to accidents

where people slip and fall into the flood water. Activities like fishing and timber collection have led to many deaths during the year 2020. He also reiterated that many people who come to watch the flood waters/ embankment breaches and due to unpredictability of the river they are caught off guard and fall into the high water current of the river. People of Barpeta mostly lack awareness. After a detailed discussion on the various issues, he requested to strengthen the Early Warning (EW) systems between Govt. of Bhutan, Kurichu dam authorities and the State Government to facilitate better dissemination of EW messages to the communities and establish a failsafe risk communication to the worst affected communities of Baghbar, Kalgachia and Chenga living in downstream areas of Kurichu dam.



Smti. Varnali Deka, IAS, Deputy Commissioner, Goalpara informed about the causes of human lives lost in Goalpara due to flood. She told that most people misjudge the water level and river current while they get washed away. She also informed that most of the people who died in flood waters knew swimming but could not gauge the high river current. People also die while trying to rescue other people. Children and youths die while they go for baths, sit on the banks of the river because they are less aware about the eddy currents below the land surface on the river banks. There are cases where infants have accidentally fallen off into flood waters from the arms of their mother and died. While water from the Garo hills enter the district, most people, who try to move at night by boats, fall off from the overcrowded boats. She made special mention about the broadcast mechanism through public alert system in mosques. Goalpara has listed all vulnerable people in the districts and has segregated data of elderly people, disabled persons, women and children. The initiative for elderly persons is called “Surakshit Dada Dadi and Nana Nani” in which volunteers take care of the elderly people in the district and frequently call them for wellness checking. She also mentioned about the relocation of 8-9 house hold (approx.70-80 people) near the Moinamoti bund in the Krishnai river catchment area where the water force becomes high.



District Administration of Goalpara also collaborated with UNICEF to produce modular videos for education continuity. They launched the “Mission Tara” under which psychosocial support and counselling was provided to the children. The district implemented “Child Friendly spaces” during flood 2020.

Smti. Leena Das, Deputy Commissioner, Morigaon District suggested that swimming should be integrated at school level curriculum. People mostly fall from boats, fall from the banana raft, get washed away while crossing the river and roads. To minimize deaths awareness programmes are conducted.

Shri. Partha Pratim Mazumdar, Deputy Commissioner, Kokrajhar informed that due to lack of institutional mechanism in Kokrajhar, disaster response becomes difficult. He requested ASDMA to support the district in setting up of an institutional mechanism to strengthen awareness and capacity building initiatives of village level task forces in the district. He also mentioned that people get washed away due to flash floods while washing clothes, taking bath, fishing in rivers or trying to cross rivers. He said

that the communities are not able to gauge the velocity of water. He suggested the need for river catchment studies to understand the preparation for flash flood and also establish a communication link with Bhutan in order to receive early warning for flash floods.

DDMA, Cachar and Dhemaji also presented on the case studies from the respective districts. Shamim Ahmed Laskar, District Project Officer, Cachar presented on the deaths in the district. He informed that more deaths occurred this year in Cachar due to drowning other than flood drowning. He informed the challenges of disseminating information to the village communities. DDMA, Cachar launched a project “Aastha” to provide psychosocial support in quarantine centres. The District administration is also initiating constant dialogue with Turial dam authorities in Mizoram to avert any kind of flash flooding in Sonai Revenue circle.

Lohit Gogoi, District Project Officer, DDMA, Dhemaji presented the causes of death in Dhemaji. He informed that Dhemaji mostly faces flash floods due to which drowning of people occurs. Dhemaji also faces the wrath of erosion, lightning and thunderstorms. He mentioned about the need for a strengthened early warning system for flash floods and elevated infrastructures like schools, hospitals,

community centres. He informed that the people of Dhemaji are accustomed to the flood situation and therefore prepared with wooden boats, bamboo rafts, skill of plying in high currents and the Mishing communities have the traditional knowledge of building house on stilts. He informed that dissemination of early warning to last mile is a challenge and needs to be strengthened. He mentioned about some resources placed at the village level with the support of Oxfam & Rural Volunteer centre. He requested ASDMA for prepositioning of contingency stock at the Panchayat level, construction of high raised platforms and construction of flood resilient AWC, school building, PHC, Toilets & Child Friendly spaces and some multi-level flood shelters.

Dr. M.S. Lakshmi Priya, Deputy Commissioner, Bongaigaon mentioned about a special initiative of DDMA, Bongaigaon. The DDMA has marked the month of May as “The month of Disaster Awareness creation & mitigation”. In that month the district Disaster Management Teams will train up Anganwadi Supervisors as “Master Trainers” who will train up AWWs. The AWWs will take sessions for mothers, pregnant women and children for one week for disaster mitigation.

Lastly CEO, ASDMA shared his observations on the presentations and requested all DDMA's to analyse the deaths in their respective districts and the common patterns of death occurrence can be analysed to take steps for minimizing such deaths in future.

Shri. Dhiraj Saud, Deputy Secretary & State Project Co-ordinator, ASDMA offered his vote of thanks to all the participating districts and requested co-operation of all districts to collect information and analyse the deaths and find out the actual cause of death so that it could be minimized in the subsequent years.

### EXPERIENCE SHARED BY DISTRICT DISASTER MANAGEMENT AUTHORITIES (DDMA) ON DEALING WITH PANDEMIC & CLIMATE HAZARDS

On the occasion of International Day for Disaster Reduction (IDDR, 2020), ASDMA requested DDMA's for pre-submission of write up on the following:

- i. Issues & challenges faced in management of the pandemic-COVID-19 & Flood vis a vis COVID-19
- ii. Co-ordination mechanisms / issues at District level while managing COVID-19 & Flood vis a vis COVID-19

- iii. Best practices in the District level regarding management of COVID 19 & Flood vis a vis COVID-19

- iv. Lessons learnt during management of –
  - i) COVID-19 ii) COVID-19 vis. a vis. flood

Accordingly, the District Disaster Management Authorities (DDMA's) submitted the details of issues and challenges faced, co-ordination challenges, best practices at the District level and Lessons learnt in the management of COVID-19 and Climate hazards.

The issues and challenges faced by the District Disaster Management Authorities (DDMA's) in the management of COVID-19 pandemic are as below:

### HIGHLIGHT CHALLENGES/ ISSUES FACED WITH COVID-19 PANDEMIC:

#### **1. Baksa**

- Detection of persons entering the district by other means and getting them tested.
- Lack of awareness among public at large.
- Non-co-operative behavior of some people as far as wearing masks and maintaining social distancing.
- The Nationwide Lock Down has resulted in financial losses and has affected all segment of society. Infrastructure and logistic problem.

#### **2. Barpeta:**

- Initially District administration faced challenges in setting up of Quarantine Centre, Covid Care Centres as it requires more space by maintaining social distance, bathroom & toilet facilities, drinking water facilities and other essential items etc. as per Covid Protocol.
- Distribution of relief materials during lockdown period due to COVID-19 pandemic was a big challenge for the authorities.
- Identification of actual wage earners in the district is another challenge faced by the authority as there is no proper way of registration whether they belong to wage earner or not.
- Supply of good quality and sufficient food to Covid Care centres for the Covid positive patients. Persons coming from other states to Assam in quarantine centres is also one of the challenges faced during Covid-19 pandemic.
- Another widely reported concern is regarding the movement of workers/ personnel. The incident commanders have been empowered to issue passes for enabling essential movements in their respective jurisdiction.
- Zonal Screening Centre was set up on Mini stadium of Sorbhog for screening of people coming outside from Assam on 4th June, 2020. Thousands of passengers came at Zonal Screening Centre (ZSC), Sorbhog. The main problem was transportation as that, the crowd was massive and to collect swab sample in such a short interval of time was a big challenge. Most of the passengers were basically uneducated as they belonged to labour class, so to maintain hygiene was one of the issues.
- Burial of COVID dead bodies, sanitization of quarantine centre, and disposal of waste from quarantine centres was very challenging issue with COVID-19 pandemic.

### **3. Biswanath**

- Identification and transportation of migrant workers to their home was a huge challenge.
- Inadequate health institution and manpower in each of the departments was one of the challenges along with the administration.

### **4. Bongaigaon**

- Containment of COVID-19 infection in Bongaigaon District.
- To ensure that no death occurs due to COVID-19 in the district.

- Accommodation and food arrangements of Inter-State passengers was a huge challenge as the exact number of persons arriving was not known and also they used to reach at late nights which required extra efforts on transportation, security, food etc.
- Addressing the grievances on need basis.
- Employees were reluctant to come to work due to lockdown in the initial days.
- Assigning roles and responsibilities to different departments for management of COVID-19.
- Creation of Awareness regarding COVID-19 and safeguarding against spread of rumours and false information.
- Counselling the general public regarding COVID-19 pandemic and convincing them to get themselves tested for COVID-19.
- Selecting vendors to carry out a smooth door to door delivery of essential commodities during lockdown in GP Level, Village Level and Ward Level.
- Keeping a close watch on migrants who were on Home isolation, in co-ordination with ASHA Workers and GP Level workers was quite challenging.

## 5. Cachar

- COVID-19 pandemic was a totally different type of medical emergency about which there was no basic idea in the District.
- Available infrastructure was not very promising and conversion of them to make additional robust and functional COVID Care Centres (CCC) & Quarantine Centres (QCs).
- Setting up of quarantine centres & COVID care centres. There were around 87 such centres functional altogether at the same time in Cachar District.
- Community related risks for mental health.
- Quarantine associated challenges, as there were many people who created problems at quarantine centres. There were also persons who tried to run away or hide themselves on the thought of being quarantined.
- Management of inflow & outflow of migrants and related matters.
- Contact tracing of persons who came in contact with positive persons.

## 6. Charaideo

- Lack of sweepers cum cleaners for quarantine centres and isolation facilities.

- During COVID-19 a huge number of RT-PCR Tests has been done to the people staying at different quarantine centres.
- Delay of information regarding health condition given by the patients staying at Home Isolation.
- Shortage of 108 Ambulance Service/ Quick Response Team.
- Shortage of beds at Hospitals.
- Lack of ventilation facilities in Government Hospitals. So the District Administration was forced to send the serious patients to AMCH, Dibrugarh.

## 7. Chirang

- Difficulties experienced in COVID testing/ follow up in respect of migrant workers returning from other States.
- Reluctance on the part of common people to use Mask, Sanitizers etc.
- Not following the Social distancing norms.
- Reluctance of different authorities to allow their institutions to be used as Quarantine Centres.
- Difficulties experienced in receiving incoming passengers coming by trains, bus from the Zonal point and taking them to the district quarantine centres.

- Fearing the spread of COVID-19, villagers barricaded the entry points of their villages which hindered the smooth movement of on duty government officials.

## 8. Darrang

- Arrangement for transportation of a huge number of persons from Railway Station to different quarantine centres observing COVID-19 protocols as per the SOP/ Guidelines issued by competent Authority.
- Arrangements for accommodation/food and providing of welcome kits to migrant population coming to the district from outside States/ Countries by different means of communication observing the COVID-19 protocols.
- At the very beginning only the emergency services i.e. Health, Police, DM Officials, VDP, ASHA, Anganwadi workers and NGOs had to deliver services with a minimum manpower in such a critical situation of COVID-19 pandemic.

## 9. Dhemaji

- Dhemaji being a remote and a small district initially faced with lack of infrastructure for quarantine facilities. But with the passage of

time, 16 no. of Quarantine Centres with 1298 beds had been arranged.

- Logistics posed a challenge in the pandemic. The 1298 bedded Quarantine Centres needed 1200 beds and other necessary items which was a challenge to arrange at a night's call during the lockdown phase. Moreover a few logistics like mask, sanitizer, gloves, zipper bags, caps, Para film roll for the samples had to be purchased from Dibrugarh due to unavailability in the home district.

#### 10. Dhubri

- There were many challenges faced like infrastructure for quarantine centre, Isolation Centre, Shortage of medical staff, Manpower, timely logistics support, social awareness, communication, movement control of people etc.

##### ***Major Challenges:***

- Space management for the inmates came from outside States.
- Manpower for the management of inmates.
- Logistic, food and drinking water facility for the unexpected railway passengers/ a massive influx of inmates came from the outside states.

- Development of infrastructure with sufficient number of sanitary facility within a very short notice.
- Convincing the inmates for maintaining social distance among themselves
- Regular and proper sanitization of camps, Swab collection centre, Hospitals, Check gate, Quarantine centres and other large number of facilities
- Identifying the home isolation people and delivery of food items / ration etc. to the home isolation people
- Motivating the staff / officials during the initial stage for performing various COVID related duties
- Identifying and tracking down the COVID positive along with the contact persons of COVID positive cases. Also convincing them for swab test and home isolation.
- During the initial stage, convincing the local people for peacefully completing the cremation of COVID positive death cases.

#### 11. Dibrugarh

- Lack of up-to-date database of unorganized sector of people like daily wage earner/ rickshaw puller / barber etc. including migrant labour

- A complete separate chapter on management of disease / pandemic should be included in State Disaster Management Plan (SDMP)
- At the early stage of the pandemic people have to be forced to follow COVID Protocols like social distancing, wearing of face mask, stay-at-home etc.

## 12. Dima Hasao:

- Shortage of cleaners in the quarantine facilities and isolation facilities.
- Cremation ground for COVID-19 victims.
- Shortage of Morgue van.
- Less help from the general public.
- Too many reports to be sent on a single day
- Shortage of DDMA staff for running the office 24/7
- Many Committees/Groups created problem in co-ordination
- Lack of co-ordination from Town Committees
- Too many interventions from N.C Hills Executive Member

## 13. Goalpara

At the beginning stage of COVID-19, the major challenges/issues were faced by the District Administration, Goalpara as follows:

- Shortage of trained man power
- Lack of awareness among the common masses about COVID-19
- Shortage of infrastructure to be designated as facility quarantine centre
- Shortage of Ambulance, ICU equipped hospitals
- Rumors caused disturbance in normal life during the early stage due to viral videos/ posts in social media
- Hindrance aroused in streamlining the food / essential commodities during the early stage of lockdown.

## 14. Golaghat

- Management of the entire crisis period with limited manpower
- No past history, experiences and manual available to deal with the new crisis situations
- The impact of this disaster is not directly visible therefore challenge to take immediate response and relief measures
- This disaster has more impact on the post period especially for rehabilitation processes



in occupation, agriculture sector, market, education system, and mental or trauma state of human beings

- There were challenges in transportation of large number of passengers within limited time and limited resources
- Due to limited human resources the unlimited services offered was beyond imagination, which was posing health threat for the Doctors, Nurses, ward boys, paramedics, Police, Administrators etc.
- The Government was bound to enforce law and order for the wellbeing of the human population.
- The awareness programmes executed by the DDMA, Departments, NGOs etc. was challenging due to various protocols and guidelines. Some section of the community was reluctant to follow the protocols which brought bitter experiences.
- There were challenges to cater the requirement of food items like daily ration, vegetables etc. among the general public

#### **15. Hojai**

- Maintenance of social distancing in public places

- Identify and sending back the migrant labours to their native destinations district / State.

#### **16. Jorhat**

- In the initial stage, arrangement of quarantine / isolation facilities with all basic facilities maintaining COVID-19 protocol for the people coming from other states via train, flight and road was a big challenge
- Arrangement of all basic logistic facilities in the quarantine / isolation centres
- Arrangement of 24x7 screening centre at Mariani Railway Station for the passengers coming from other states via train
- Arrangement of transportation facilities for the passengers coming from other states via train got down at Maraini railway station to the designated quarantine / isolation centres.
- Arrangement of 24x7 Zonal Screening Centre for the people of entire upper Assam travelled by road and their accommodation in the quarantine centres.
- Surveillance / monitoring of health status of thousands of home quarantined people coming from other states

- Strict enforcement of lock down in the entire district involving police deptt. and engaging the officials of different departments as sector officer
- Continuous mobilization of manpower & resources of concerned departments to contain the spread of COVID-19
- Arrangement of continuous supply /make available of food items/ vegetables/ medicine and other essential items to the people.
- Arrangement of food items / medicines etc. to the people in quarantine
- Arrangement of food items/medicines etc. to the people who were admitted in the isolation centres
- Arrangement of food items and other essential things to the migrant people of other states
- Arrangement of accommodation facilities / transportation facilities to the migrant people of other states
- Arrangement of food and other essential items as Gratuitous Relief (G.R) to all wage earners, rickshaw pullers etc. whose livelihood have been severely affected by the lockdown and other needy persons has

been provided with Gratuitous Relief (G.R) from DDMA through concerned circle officers

#### **17. Kamrup**

- Lack of man power to create awareness among the villagers during the lockdown phase
- Lack of funds at Circle level to carry out activities related to COVID-19 on emergency situation

#### **18. Kamrup (M)**

- Identification and provision of food/shelter to the migrant labourers.  
Due to lockdown the migrant labourers coming from outside the district were stuck in different places and running out of food. We had to gather them in some pre-designated shelter places providing food and shelter.
- Transporting them to their native places by arranging buses
- Distribution of GR to the stranded migrants as well as poor and needy people by maintaining all COVID-19 Protocols
- Incoming people from other States through special train, by air and by road

- At an average 3000 incoming passengers per day were received by the district and needed to be quarantine initially for 14 days, for which huge arrangements had to be done in terms of food, shelter and testing. Hotels, Universities, College, Hostels, Schools, Apartment buildings were requisitioned for shelter. Logistical arrangements like folding beds, mattresses, essential goods were also to be provided to the quarantined people
- Food needed to be arranged for the quarantined people for which huge arrangement and man power were needed
- COVID testing for the incoming people was also a huge challenge. Make Shift testing, screening and quarantined centres were constructed in Sarusajai Stadium, Nehru Stadium, Khanapara Veterinary field. For management of these quarantine centres huge man power in terms of doctors, paramedics, officials, cleaner, labour etc. were required for which additional man power needed to be arranged was a herculean task for District Administration.
- Moreover, arrangement of huge quantity of personal protective equipments for the engaged man power in COVID-19 duty was also a major issue which was managed by district administration.
- When positive cases were increasing at that time the make shift quarantine centres were converted to COVID hospitals. Apart from that all the major Govt. hospitals were converted to COVID hospitals which also need additional arrangement of man power and logistic support.
- Issue of various emergency passes to the people for travelling to their native places. Case to case basis had to be responded and given permission
- Arrangement of labourers to work in the quarantine centres was a serious challenge in the initial stage

#### **19. Karbi Anglong:**

- Lack of availability of equipments and shortage of doctors, paramedical staff, Nurses
- Refusal of the public to come forward for COVID test due to Social stigma and ultimately aggressive behavior from the public towards medical teams
- Shortage of Administrative Officers especially ACS officers

## 20. Karimganj:

- Shortage of trained man power
- Shortage of adequate number of health facilities/ hospitals
- Shortage of ICU, Ambulance etc.
- Shortage of logistics
- Transportation of Migrant workers & their fooding and lodging was a great challenge

## 21. Kokrajhar:

- Social distancing at markets and banks is one of the main challenge
- Screening of passengers at Srirampur check gate as it is the main entry point to North eastern States of India
- Transportation of passengers to other district and States
- Shortage of Ambulance service
- Shortage of Sweepers/Cleaners in the district willing to work in the quarantine centres

## 22. Lakhimpur:

- Initially District administration faced challenges in setting up of COVID Care Centres. Hundreds of beds and toilets were installed within days to cater to the influx. For the migrants with higher vulnerability, like old

people and pregnant women, hotels were requisitioned by the district administration so that separate rooms may be provided to them. Additionally, migrants who could afford staying in hotels were given the option of paid quarantine facility. Measures like these ensured that the incoming travellers do not sneak out of the quarantine until they tested negative

- Distribution of relief materials during lockdown period due to COVID-19 pandemic is a big challenge for the authorities
- Supply of good quality with sufficient foods to COVID Care centres for the COVID positive patients and persons coming from outside states to Assam in quarantine centres is also one of the challenges faced during COVID-19 pandemic
- Another widely reported concern is regarding the movement of workers/ personnel. The incident commanders have been empowered to issue passes for enabling essential movements in their respective jurisdiction
- One of the immediate crisis that the district administration had to tackle was the shortage of Personal Protective Equipment (PPE). There was acute shortage of

protection gear like masks and sanitizers.

Initially, the district administration tried exploring outsourcing options for filling in the deficit

- Implementation of Infectious Disease Surveillance Programme (IDSP) team was a big challenge and was later successfully implemented

### **23. Majuli:**

- Identification of those people who were travelling to Majuli via different points of non-scheduled entry was the first and foremost challenge during the lockdown period. Due to lockdown, people were desperate to reach homes by any means for which they resorted to enter silently to Majuli via small ferries, which might have led to the spread of the virus in the district
- Persuading the people engaged in catering, hospitality and transportation business to provide food, accommodation and transportation facilities to the migrant was another big challenge. People were filled fear and anxiety the spread of the virus to them and their family member.

- Daily monitoring of the health status of the migrants during the initial period was another challenge faced by the district
- Majuli having predominantly rural setup, the arrangement of accommodation of huge influx of in-migrants for quarantine was another issue for the district administration
- Non availability of Health Stock, equipment or Medicine stock along with poor medical infrastructure was also another challenge
- No past history, experiences to deal with the new crisis situation, posed a serious challenge to take immediate response and relief measure
- Convening the meetings including awareness programmes executed by the DDMA, Departments, NGOs etc. was challenging due to various restriction protocols and guidelines
- Identification and then transporting the migrant workers to their home was a huge challenge.
- This disaster has more impact on occupation, agriculture sector, market, education system, and all other development sectors.

- The District Administration had issued orders to all head of the Departments to stop any kind of construction related work. Which was badly affected all over development works during the Lockdown period
- There was challenge to cater the requirement of food items during the lockdown period

#### **24. Morigaon:**

- Tracing, transportation & sheltering of large number of people coming from outside the state by rail, road & air
- Lack of private nursing home at district level for treatment of COVID patient
- Issue of online and offline passes to large number of people at a time during lock down
- Lack of awareness among common people regarding COVID-19, lack of knowledge among common people regarding maintenance of health and hygiene, lack of knowledge of fatality of COVID-19
- Disbelief of people regarding existence of COVID-19, poor socio-economic condition of people to maintain COVID-19 standard
- Lack of manpower/ Health worker and infrastructure in the district to combat such pandemic situation

- Lack of expertise of health care workers of government setup
- Lack of government supply of few essential medicines of COVID-19
- Limited bed availability in health centres for critically ill patients

#### **25. Nagaon:**

- During the initial phases of COVID-19, a good number of families/ individuals of other States as well as other districts of Assam were working in different sector like Industries, Tea Estates, Brick-Kilns, Agriculture, Business like street vending and door to door sale etc. for managing their livelihood
- As soon as complete lockdown was declared on 24/03/2020, all such people became stranded in the district and faced acute food problem due to loss of employment and shutting down of shops and movement of vehicles
- Some of such stranded people stayed in organized way whereas other lived in different place like Rented Houses, Roadside reserve land, Temples, Petrol Pumps and even in Hotels

- During the initial phase, it was very difficult to organize them to bring them under same roof or to keep them in clustered manner

#### **26. Nalbari:**

- Identification and management of quarantine centre at the initial phase of Lock down
- Tracing, transportation & sheltering of large number of people coming from outside the state by rail, road and air
- Handling of exempted categories of lockdown
- Arrangement of livelihood to the marginal section of the people during lockdown
- Mobilization of private nursing home at district level for treatment of COVID patient
- Issue of online & offline passes to large number of people at a time during lock down

#### **27. Sivasagar:**

- Cremation/Burial process was a prime challenge during initial stage of COVID-19 pandemic due to public obligation in different places
- Electrified cremation ground would help to speed up the cremation process despite of bad weather condition

- Collection of Bio medical and other wastes generated from the quarantine centres, Isolation facilities etc. and disposal of same due to lack of trained persons and public incinerators
- Hired workers were not willing to work with a fear of being infected/ victimized by the pandemic
- Non availability of Standard Record keeping format

#### **28. Sonitpur:**

- Availability of Infrastructure, i.e. Building having capacity to accommodate more than 100 person
- Performing of duties by all stakeholders while maintaining COVID-19 protocols
- Awareness Generation among the public about the pandemic
- Financial Burden
- Limited Health Institutions which are well equipped

#### **29. South Salmara:**

- There were many challenges faced like Infrastructure for Quarantine centre, Isolation centre, shortage of medical staff, manpower, timely logistics support, Social

awareness, communication, movement control of people etc.

### **30. Tinsukia:**

- During COVID-19, the main challenge was shortage of medical staff, equipments and facilities like ICU beds, ventilators, ambulances, manpower etc.

### **31. Udalguri:**

- Shortage of trained manpower
- Shortage of facility/ hospital
- Shortage of ICU, Ambulance etc.
- Shortage of logistics

### **32. West KarbiAnglong:**

- Non- obedience of COVID-19 rules declared by Government
- Un-available of Sanitation items and other items within given radius

### **33. Hailakandi:**

At the initial stage of COVID-19, the major challenges / issues faced by the District Administration, Hailakandi are as follows:

- Shortage of trained manpower
- Lack of awareness among the common masses about COVID-19
- Shortage of infrastructure to be designated as facility quarantine centers

- Shortage of Health care worker, ambulance, ICU equipped hospitals.
- Rumours caused disturbance in normal life during the early stage due to viral videos/ posts in Social Media
- There were hindrances in streamlining the food/ essential commodities during the early stage of lockdown



**BEST PRACTICES IN MANAGEMENT OF COVID-19 (INCLUDE PHOTOGRAPHS) IF ANY:**

**1. Baksa:**

- Direct support by physical visit to the Quarantine centre by DC, ADC & CO with Quarantine centre (QC)- in charge and solving problem immediately

**2. Barpeta:**

- For the smooth functioning of the district administration during pandemic COVID-19, the district was divided into many sectors where one ADC was designated as a nodal officer and co-ordinating officers are Circle Officer and other line department officials.
- Constituted different cells with a few officers & staff
  - i) Food cell: For providing good quality food and refreshment to the doctors, paramedic's staff and people kept in Quarantine Centres
  - ii) Pass Cell: In order to issue of permissions and passes in favour of the persons and vehicles engaged in essential services
  - iii) Transport Cell: For requisition of vehicles and to issue POLs for the essential services



- Awareness rallies on COVID-19 by AASHA workers, Banners and posters are hanged within almost all part of the district



**3. Biswanath:**

- Protirudhi Bondhu Volunteer's active participation in management of COVID-19 in grass root level
- Ensuring Home Isolation by proper monitoring by the Protirudhi Bondhu (PB) volunteers

**4. Bongaigaon:**

- Project Milijuli- an initiative of Deputy Commissioner & Chairman, DDMA, Bongaigaon was taken for participation of the communities at the grass root level in the fight against COVID-19. The project was a

four tier approach by forming Corona Protirodhi Dal for management of COVID-19. Corona Protirodhi Dal was formed at the village, Panchayat, Block and District level involving the grass root workers of the Government Machinery and all the concerned officials of the Panchayat, Block and District level. Using these persons prevention/containment of COVID-19 works were done smoothly. It got a good response from the Stakeholders.

- Project Samarthan, also an initiative was started involving the communities to donate and participate in the fight against COVID-19
- Whats app no. of DEOC, DDMA, Bongaigaon was shared for the people to express their grievances, provide vital information etc. which got a huge success
- Food cell & House-keeping cell for monitoring and prompt trouble shooting, of any problem that may arise under North Salmara Sub-Division.
- Weekly meeting with all the members of Corona Protirodhi Dal, Block, GP and even village level to tackle all the day to day problems

#### **5. Cachar:**

- E-help centers were establish all around the district to help people in distress
- Involvement of community level volunteers like Pratirodhi Bandhu and AAPDA Mitra in COVID related aspects like awareness generation, sanitization and in cremation

#### **6. Charaideo:**

- Announcement regarding COVID-19 in the area under Moran & Sonari Municipal Board of the District.
- Awareness generation among the people for maintaining social distance and wearing face masks in public places like Grocery Shops, Banks, Public Offices etc. with the help of Protirodhi Bondhus and other officials
- Sanitization in urban as well as rural areas like Banks, Markets, Hut- Bazar with the help of Gaon Panchayat, Moran & Sonari Municipal Board and district Fire & Emergency Service
- Pasting of Home Isolation and Containment zone posters and barricading the area to isolate every COVID positive case
- Facilities for hand washing at public offices, shops etc. for public.

## 7. Chirang:

- Sensitization programme was organized for the departmental officials/ staff on regular basis
- Awareness programme were organized for the School Focal Point Teachers of different Schools in collaboration with Health Officials so that the trained teachers can sensitize students in their locality
- Miking as well as leaflet distribution was carried out for mass awareness amongst public
- Deployment of Pratirodhi Bandhu volunteers in monitoring social distancing in Banks, ATMs, Markets and extended helping hand to the families who were in quarantine
- Collaborated with different departments like PHED, Fire Services, IOCL-BGR, etc. for sanitization of public places
- Distributed masks and sanitizers free of cost to those who could not afford it
- Regular telephonic follow up of those people who were advised home quarantine by the health department in order to ensure that govt. guidelines are followed
- Telephonic assistance provided to the migrant workers of the district who were

stranded outside the state for availing govt. cash benefits

- Issued directives to the departments to set up hand washing facilities at the entry points of their respective offices

## 8. Darrang:

- Providing transportation, accommodations, food, drinking water, Baby food, Milk, fruits to children to around 1,000 migrant labours in a day coming from different parts of the country
- Registration/ Preparation of database of around 10,364 Nos. of Migrant populations who came to this district, by different means of communication
- Sending of stranded migrant labours to their respective district/ states / country observing COVID-19 protocols as per the SOP /Guidelines and deadline fixed by the Govt.
- Receiving of around 812 nos. of public calls relating to COVID-19 and taking steps for disposal of complains/issues by the Information Assistants of DEOC, Darrang
- Involvement of Pratirodhi Bondhu Volunteers in remote areas for awareness generation on COVID-19 protocol and importance of social distancing through

miking, leaflet, etc. NGOs were involved for sanitization relating to COVID-19

- Frequent sanitizations of public places like offices, bus stops, market places, containment zones, etc. by Fire & Emergency Services and Municipal Authority
- Engagement of ULB / PRI representatives for identification of COVID patient and transportation to the local COVID Care Centres
- Due to proper awareness, without any hindrance of the public, cremation of COVID patient were done smoothly observing all COVID protocol

#### **9. Dhemaji:**

- Several Awareness programmes were held in the village level
- Screening camps were organised in the entry points of the district
- Sanitization of all the Govt. line departments Office buildings, Quarantine Centres, Health Institutions, Contaminated Govt. and private banks, markets etc. were carried out with the help of NDRF, SDRF and PHE, Health departments teams

#### **10. Dhubri:**

- State Disaster Response Force (SDRF) teams played a very key role in sanitization of various places
- Pratirodhi Bondhu volunteers helped in maintaining COVID-19 guidelines/ protocols.
- Proper disposal of waste from the Quarantine Centre and Swab collection Centre.

#### **11. Dibrugarh:**

- Proactive actions like screening of Air passengers, establishing COVID Control room in the first week of February, 2020, i.e. far ahead of lock down etc. helped controlling the pandemic at the early stage
- Maintaining database of Ambulance services in the district including private Ambulance services
- Provided the contact numbers of Home Isolation people to the officials engaged to monitor them
- Quarantine Centres were identified in advance with capacity of accommodation, facilities available/ required
- Engaging volunteers to create awareness among common masses

## 12. Dima Hasao:

- Protirodhi Bondhu selfless service throughout the district
- Sanitization of COVID Care Centres (CCC), Quarantine Centres and areas by F&E.S

## 13. Goalpara:

- Laid emphasis on increasing Testing and contact Tracing.
- Notified containment zones were monitored in co-ordination with police so as to control spread of COVID-19
- In order to promote and encourage the people engaged in different works related to COVID-19, the District Administration, Goalpara used to select CORONA WARRIORS amongst them and highlighted in the District Administration Facebook Page
- Educational institutions were encouraged to continue their teaching-learning activities through on-line
- The garbage generated from the quarantine centres was ensured to be disposed-off by the way of burning in pit dug at a distant place
- In order to continue the normal treatment of patients other than COVID-19, MoU was signed with the Private Hospitals to admit

patients (other than COVID-19) from district administration, Goalpara

- Under CSR, insurance of safai karmachari & medical workers
- Care kits for frontline medical workers
- Use of local science college for productions of sanitizers during shortage
- Use of local SHGs for production of mask etc.
- Under Goalpara cares initiative, retail funding to provide food & hygiene kits to vulnerable families to supplement staples & govt. supplies
- Use of masjid loudspeaker for relay of urgent IEC messages
- Use of Poshan clubs for motivating & orienting local population

## 14. Golaghat:

- The District Administration had conducted a meeting with the Tea Garden Authorities and started a whatsapp group to track every case and for immediate response and relief activities. Every Tea garden had to submit a daily report of visitors and activities taken for COVID 19



- The District Administration also had meeting with the Transport Department, Transport Associations, local dealers and media personnel for precautionary measures to be taken and tracking mechanism for passengers coming from outside Assam. A questionnaire was developed and distributed for collecting passenger details



- **Power of Information Technology:** The CSC SPV team of Golaghat had stood at the front of community services reaching to their door steps. They had provided tele medicines along with live consultations with the Doctors of Ministry of Ayush, Apollo Hospitals, Down Town Hospital etc. CSC team has also provided services at the Flood relief camps for tele medicine, consultation and

distribution of other essential commodities through Common Services Centers



- Awareness programmes and mitigation measures taken like distributing leaflets, street plays, public announcements, installation of hand wash point and sanitizers etc.

Date:31-07-2020 *Main Market, Golaghat*



*Protirodhi Bondhu, Golaghat*

AWARENESS THROUGH PRATIRODHI BONDHU



PUBLIC ANNOUNCEMENT



LEAFLET DISTRIBUTION



HAND WASHING POINT

**15. Hojai:**

- Engagement of Protirodhi Bandhu volunteers in Quarantine Centres and COVID 19 dead body disposal



- Screening of Railway/Air/ Road passengers in various screening centers

- The district has developed the 1st COVID-19 Home Quarantine App (COVID SURAKSHA) in Assam for monitoring the home quarantine patients which was inaugurated by Hon'ble Chief Minister, Assam on 6th April'2020. The App helps in 100% full proof monitoring of home quarantine patients and effectively checks the spread of Corona Virus. The app has been implemented in all other districts as well.



**16. Jorhat:**

- Conducted coordination meeting with NGOs/ CSOs and other organizations and mobilize their facilities / support to the needy persons in planned manner
- All stranded labourers / migrant labourers in the district from other states and other needy people had been provided relief / essentials items through civil society organizations and NGOs like Indian Red Cross Society, Zomato, Feeding India, Marwari Yuva Mancha, HELP, NEADS, Journalist Association etc. Around 52,000 such migrant labourers / other needy people had been provided with such help. Regular calls are

being made from control room to ensure that all necessary support reach them

- Pratirodhi Bondhu Volunteers and Civil Defence volunteers are widely engaged in the market areas, CODID-19 screening centres, different offices etc. to maintain social distancing norms
- Civil Defence volunteers are engaged in all parts of the district to monitor the containment measures taken by DDMA, Jorhat relating to COVID-19

### 17. Kamrup:

- Involvement of Pratirodhi Bondhu and AAPDA Mitra volunteers as community volunteers to create awareness at various levels
- Maintenance of social distance in shops and other places by marking a circle at 1 meter interval
- Distribution of leaflets to create awareness
- Marking throughout the district w.r.t. do's and don'ts during Covid-19



### 18. Kamrup (M)

- Disposal and burial of dead bodies: Disposing and burial of dead bodies was systematically arranged by DDMA. Proper precautions were taken and conducted the cremations in a very systematic way as per SOP. More than 900 dead bodies were disposed

### 19. Karbi Anglong:

- Awareness generation on COVID especially house to house visit of ASHAs, poster, involvement of local NGOs among public played a vital role in removing the social stigma that people had related to COVID

### 20. Karimganj:

The joint effort of the important departments are very appreciating such as:-

- Sanitization of the quarantine centres done by the Fire & Emergency Services Stations & PHED.
- Services rendered by the Health Deptt./ NHM/ Police Deptt., Transport Deptt., ASTC, Education Deptt. etc.
- Assistance provided by the VDPs, Non-Governmental Organizations in distribution of Masks, food items along with the District Administration



## 21. Kokrajhar:

- Social distancing, awareness and marking of circles at Grocery Shops, Bank branches, CSP's, CSC's, Market places, Clubs, Mosques and temples with the help of Field Officials of DDMA and Women Pratirodhi Bondhu Volunteers
- Hand washing techniques and awareness on social distancing are being practiced at villages and Govt. Offices
- Creating awareness on the protocols for the Home Quarantine people and people in isolation who have been released from institutional quarantine centers
- Sanitization carried out 24x7 at different places with the help of PHED, F&ES, and Municipal Officials
- Food Distributed to the stranded peoples stuck at Srirampur check gate
- Regular monitoring and psycho-social support to the home quarantine persons by Field Officials and Volunteers
- DEOC Control room co-ordinated with other districts and states round the clock for stranded persons

- Formation of Constituency level quarantine and isolation center management committees for smooth supervision
- Villagers co-operated in respect of lockdown as they themselves made arrangements to halt the movement of vehicles in villages
- Use of Volunteers in Rapid Antigen Tests for helping Medical Officials to maintain COVID-19 protocols among the patients or persons

## 22. Lakhimpur:

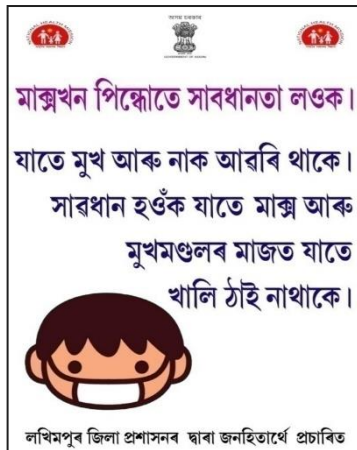
- For the smooth functioning of the District Administration during pandemic COVID-19, different cells were constituted as shown below:
  - i) District Covid-19 cell: For preparation of day to day reports, checklist of precautionary measures to prevent spread of COVID-19 etc.
  - ii) Food cell: For providing good quality food and refreshment to the doctors, paramedics' staff and people kept in Quarantine Centres.
  - iii) Pass Cell: In order to issue permissions and passes in favour of the persons and vehicles engaged in essential services
  - iv) Transport Cell: For requisition of vehicles and to issue POLs for the essential services
- A call centre dedicated to COVID-19 had been opened by the District Administration, Lakhimpur to perform the following works.

- i) Bulk SMS
- ii) Interactive Voice Response (IVR)
- iii) Cloud Telephony

Purpose – Active Surveillance of health status in containment area and home quarantined persons



- A Mask on Lakhimpur campaign is being run by the District Administration on Facebook page uploading various awareness poems, pictures, cartoons etc. for awareness of general people



- The District Administration arranged for an online delivery app called “Antflip” where buyers can directly connect with the hawkers of Groceries, Vegetables and House-hold goods through the app



### 23. Majuli:

- Awareness program was done throughout the 1st lockdown to continuously 1 (one) months in every nook and corner of the District which was helpful for awareness generation to the public



- Protirudhi Bondhu Volunteer active participation in management of COVID-19 in grass root level
- Ensuring Home Isolation monitoring by the PB volunteers
- The District Administration and Health Department had taken all the necessary steps and measures to contain the spread of COVID



19 in Majuli District. The department organized a Screening Team at all 14 Ghats for check-up of local and foreign tourists. Moreover a Help Desk was also set up for awareness of the passengers and local people about COVID-19

- Successful distribution of NON-NFSA rice through Revenue staff at various places in the District by maintaining COVID-19 protocol
- Majuli District Administration marked circles on the ground in front of Banks, ATMs and grocery shops of Majuli district to maintain physical distance between the customers



- The District Administration opened 24X 7 District COVID call Centre for prevention and immediate action on COVID-19. District Administration also uploaded the details and contact numbers of concerned officials in the Majuli District Administration website ([www.majuli.gov.in](http://www.majuli.gov.in)) for any queries and information of public

- A Mask making Committee was formed during the lockdown period involving SHG and they made 1 lakh masks for school students, ASHA, Panchayat level workers, which helped the economically weaker sections during the crisis situation.

#### **24. Morigaon:**

- Early hospitalisation of symptomatic patients
- Early imitation of antibodies, antiviral, antithrombotic agents, steroids, oxygen therapy another supportive measures
- Mental support to patients
- Distribution of IEC materials for COVID-19 Mitigation like Posters, Banners, Leaflets and awareness Booklets on Corona Virus for Children and also advisory for elderly citizens of Assam on COVID-19 prevention provided by ASDMA to all Revenue Circles of Morigaon District
- Installation of hand washing facilities in public places like Bank, Market Places , Bus stands, Auto stand for generating awareness
- Regular contact with All the Gaon-burha & ASHA workers from DEOC in order to take the feedback from each village about enforcement of lock down and health status of community

- Pratirodhi Bandhu volunteers, Volunteer organizations– Indian Red Cross Society (Morigaon Branch), Morigaon, Mahila Mehfil, Poohar, Ahsus Foundation, Woman Development Centre etc. have been continuously engaged to strengthen community networking for containment of COVID-19, sensitize people about COVID-19 hygiene protocols. The Inter-Agency groups has also been involved for Miking in all the villages about COVID-19, Making and Distribution of masks, distribution of food and essential items among the needy people and teaching proper hand-washing demonstration in the remote areas in collaboration with DDMA, Morigaon.
- For each containment zone, Pratirodhi Bandhu along with Gaonburah were deputed for delivery of essential items
- Last scale Sensitization done at market places, Govt. offices, Hospitals etc. of the Morigaon district with the help of Fire & Emergency Services and SDRF, Morigaon.

#### **25. Nagaon:**

- Awareness drive amongst all section of people were carried out
- Sanitization of all Offices, business place /market area in all Municipal and Village area.

- Ensured wearing of Masks by all citizens.
- Sufficient number of COVID Care Centres (CCCs) maintaining COVID-19 protocol were set up to facilitate more inmates
- Implementation of Hand wash practices in front of the shops, market places banks etc.
- Distribution of Face Masks, Hand Sanitizers and leaflets
- Engaged of Pratirodhi Bondhu Volunteers in highly crowded places for maintaining Social Distancing, Use of Masks & Use of Hand Sanitizer or hand wash.

#### **26. Nalbari:**

- Installation of hand washing facilities in public places like Bustand , Auto stand for generating awareness
- Regular contact with All the Gaon burha & ASHA workers from DEOC in order to take the feedback from each village about enforcement of lock down and health status of community
- Involvement of Pratirodhi Bandhu for awareness generation
- Home delivery of vegetables & other food items were ensured during lockdown as report of scarcity of food & other essential items were not received

#### **27. Sivasagar:**

- Advance meetings held with committees of all cremation / burial grounds of the district
- SOP developed for Bio-medical waste disposal at district level
- Development of different Daily Reporting Formats at district level effective monitoring and record keeping (Formats for quarantine centres / Hotels, Food Suppliers etc.).
- Engagement of Pratirodhi Bondhu Volunteers

### 28. Sonitpur:

- Performance of all field level staff i.e. ASHA, ANM, AWW, Revenue & DDMA officials, Police etc.
- Hygiene & Sanitization measures taken at all Govt. premises.

### 29. South Salmara:

- Promptly response by our SDRF team, field workers and fast reporting system by our ASHAs to Block Project Management Unit (BPMU)
- Pratirodhi Bondhu volunteers helped in maintaining COVID-19 guidelines

- E-help centres were established all around the district to help people in distress.



### 30. Tinsukia:

- Young volunteers of the community known as Pratirodhi Bondhu helped in combating the spread of the COVID-19 in Tinsukia District. These volunteers are helping District Administration with their selfless services in maintaining COVID-19 Guidelines in the district till now.
- The District Administration had daily monitored the supply of essential goods and movement of the essential services to ensure sufficient

availability of food grains, milk and medicine in the District.



### 31. Udalguri:

The joint effort of the important department are appreciating such as:-

- Effective screening and quarantining by engaging the community.
- Sanitization of the quarantine centres by Fire & Emergency Services and PHE.
- Involvement of Prathirodhi Bondhu volunteers in Information dissemination
- Assistance provided by the Non-Governmental Organization in distribution of food items along with the district administration.

### 32. West Karbi Anglong:

- Customer in queue during Lockdown as per Govt. guidelines of maintaining Social Distancing



### 33. Hailakandi:

- Emphasized was put in place to increase Testing & Contact Tracing.
- Notified containment zones were monitored in co- ordination with police so as to control spread of COVID-19.
- In order to promote & encourage the people engaged in different works related to COVID-19, the District Administration, Hailakandi used to select CORONA WARRIORS amongst them & highlighted in the District Administration Facebook Page.
- Dedicated Control Room setup at DEOC where calls and video calls are made constantly to ensure people do not go out of the Containment Zone.
- Educational institutions were encouraged to continue their teaching- learning activities through Online.

- The garbage generated from the quarantine center was ensured to dispose by the way of burning in pit dug at a distant place.
- In order to continue the normal treatment of patients other than COVID-19, MoU was made to the Private Hospitals to admit patients (other than COVID-19) from District Administration, Hailakandi.
- Under CSR, insurance of safai karmachari & Medical workers.
- Care kits for frontline Medical workers.
- Use of local Science College for productions of sanitizers during shortage.
- Use of local SHGs for production of masks, etc.
- Under Hailakandi care initiative, retail funding to provide food & hygiene kits to vulnerable families to supplements staples & Govt. supplies.
- Use of DIPRO through miking.
- Use of Poshan clubs for motivating & orienting local population.

## CO-ORDINATION MECHANISM / CHALLENGES:

### 1. Baksa:

- Close involvement with public NGOs, Media etc. by conducting awareness programme etc.
- Coordination with Health dept., Police personnel, PHE, WRD, PWD, BDOs, Teachers and front line employee's dept.

### 2. Barpeta:

- Central Co-ordination of all activities through control room (DEOC)
- Incident Response system activated.
  - i) 1077 – Common control room for both district administration and health department and Whatsapp No. (9864643089) was circulated
  - ii) 24 x 7 duty by different departments (8 hourly shift)
  - iii) All issues (feedback, Home quarantine, symptomatic persons screening, lockdown, essential services) handled centrally.

### 3. Biswanath:

- Frequent meeting was organized with the concerned line departments
- Telephonic communication was maintained with all concerned
- Various cells, control room were notified to manage the Covid-19 response.

### **Challenges**

- Main challenge occurred during finding out migrant workers coming from outside places and maintaining a proper database of them. A difference can be seen in the database prepared by health officials with the database maintained by local administrative authorities based on the feedback of gaon-burhas and other local sources
- During the time of transporting the Migrant/ Stranded workers some of the States were not responsive enough

### 4. Bongaigaon:

- Co-ordination with various stakeholders was done through review meeting, video conference etc.
- With the increasing number of migrants returning back home, working with limited man power by keeping them motivated
- Survey of containment zones with limited number of field level staff was very challenging

### 5. Cachar:

- Mapping and managing coordination mechanisms
- Developing repertoires for thinking beyond the immediate demands of the crisis, and ensuring reliance across the system
- Inclusion of various line departments for remaining fully functional during the pandemic

### 6. Charaideo:

- Good co-ordination with the personnel related to Health and Medical Department, Fire &



Emergency Service, PHE, Police, Gaon Burhas, VDP, Panchayat Officials etc.

- Lack of Doctors, Nurses and Paramedical staff in Health Department

#### **7. Chirang:**

- In addition to coordination with the line departments, the DDMA, Chirang also coordinated with Gaon Burahs/ Community leaders/ religious leaders in generating mass awareness amongst common people

#### **8. Darrang:**

- Using of Information Technology in all the approachable ground for arrangement of Coordination mechanism from PRI / GB Level to District Administration/ Police Administration
- Formation of whatsapp group for prompt disposal of any unwanted situation, coordination with all concerned with District Administration / Police Administration
- Ensure functioning of CSCs for hassle free woks; reduce gathering, tally medicine process etc.
- Issue of E-Pass and providing of other Govt. services with the help of IT in time of pandemic situation on emergency ground

#### **9. Dhemaji:**

- Establishment of Joint Control Room (24x7) deploying staff from DEOC, Health Department, Police etc. for smooth co-ordinations information in between line departments and other agencies
- Although there was a scarcity of medical staff initially, it was managed in due course of time. 6 no.s of COVID CARE CENTRES with 458 beds with dedicated staff had been opened
- There is no ICU in Dhemaji. However equipments for a 20 bedded have been received and repair/ renovation for a ICU in Dhemaji Civil Hospital will be started. However there has been a very close coordination with AMCH, Dibrugarh for the patients needing referral

#### **10. Dhubri:**

- A good co-ordination among the Civil Administration, Health, Police and other departments was established and were available 24 x 7 for the passengers arriving at the district
- Wide publicity was carried out through DIPRO using FLS, poster, distribution of hand bills, pamphlets etc.
- Health Department and AWW jointly visited the home quarantined people on regular basis

#### **Challenges**

- As 108 ambulances were mostly unavailable, it became difficult for the movement of serious cases other than COVID-19

- Due to a large no. of Quarantine centre it was very difficult to supply food for each person in the Quarantine Centre.

#### 11. Dibrugarh:

##### *Co-ordination mechanism-*

- Constituted Incident Response Team (IRT) assigned duties & monitoring
- Circle Level Plan prepared, officials were assigned responsibilities
- Different cells were formed under the supervision of Senior officials and accordingly plan out steps for managing COVID related activities

#### 12. Dima Hasao:

- Though co-ordination between different departments is good enough, it was not satisfactory to handle the pandemic, as all the line departments are under the Administrative control of N.C Hills Autonomous Council, Halflong.

#### 13. Goalpara:

To ensure the response in a holistic manner, the district administration immediately constituted the following committees:

- District Level task force for COVID-19
  - Incident response team (IRT) for COVID-19.
- Accordingly regular meeting was conducted

involving all heads of departments for better co-ordination

#### 14. Golaghat:

- The District Administration had meetings with various stake holders for containment of COVID-19
- The District Administration started a whatsapp group with every department, Police, health practitioner for tracking every passenger from outside the State in the initial stage. Also, for keeping track of COVID -19 cases
- The District Administration had meetings with Chamber of Commerce for sufficient stock of essential items and regulating opening of shops with alphabetical markings
- Review meetings held at the District, Sub Division and Circle level to take feedback of the management system and requirement of assistance for better management of the crisis situation

#### 15. Hojai:

- A 24x7 Control Room is set up in coordination with Health and Food and Civil Supplies departments
- Training of Municipal Workers/ Protirodhi Bandhus on Deadbody Disposal in connection with COVID 19 deaths.

**16. Jorhat:**

- For necessary co-ordination among the concerned departments/ officials, the District Level Incident Response Team (IRT) for COVID-19 in respect of Jorhat district was constituted as per Incident Response System (IRS) and notified accordingly
- The meeting of Incident Response Team (IRT) and DDMA, Jorhat was conducted regularly for smooth co-ordination among the concerned departments/ officials/ doctors etc.
- Whatsapp groups were created at different levels involving key officials of concerned departments for smooth co-ordination and quick dissemination of information

**17. Kamrup:**

- All the departments worked in close coordination to manage the COVID-19 pandemic

**18. Kamrup (M):**

- Co-ordination among agencies was as per IRS. Even in Lockdown the co-ordination among agencies were prompt and responded effectively

**19. Karbi Anglong:**

- One bottleneck in the 6th Schedule district is that Deputy Commissioner executes the disaster response work but the fund is utilized by the KAAC

(Karbi- Anglong Autonomous Council) through NHM.

- All the line departments were cooperative and were prompt in response in managing COVID

**20. Karimganj:**

- To ensure the response in a holistic manner the District Administration immediately constituted the following committees :-
  - ✓ District Level task force for COVID-19.
  - ✓ Incident Response Team (IRT) for COVID-19. Accordingly, regular meeting was conducted involving all heads of departments for better co-ordination

**21. Kokrajhar:**

- District level and Sub Divisional level task force formation with all pioneer line departments and regular meeting has been conducted
- A very good co-ordination and prompt response with PHED, F&ES, Town committee & Municipality, BDO Office, Health & Family welfare Deptt, Police Department, SSB, CRPF etc.

**22. Lakhimpur:**

- Central Co-ordination of all activities through (DEOC) control room
- Incident Response system was activated

- i) 1077 – Common control room for both district administration and health department and Whatsapp No. is 6000188628
- ii) 24 x 7 Magistrate (8 hourly shift)
- iii) All issues (feedback, Home quarantine, symptomatic persons screening, lockdown, and essential services) handled centrally.
- iv) All magistrates trained on handling above issues and guidelines issued

### **23. Majuli:**

- Major Challenge was to find out migrant workers coming from outside States and maintaining a proper database of them. The database was maintained by local administrative authorities based on the feedback of Gaon burhas, ASHA and other local sources
- The District Administration coordinated with the PHED & Fire & Emergency Service for sanitization of the quarantine centres and the district
- The District Administration has published the List of Dos and Don'ts for the prevention of spread of Novel Corona Virus through ASHA, GB, Teachers, and Lot Mandal in local language
- During the time of transporting the Migrant/ Stranded worker some of the States were not responsive enough

- The District Administration had meetings with various stake holders for containment of COVID-19
- The District Administration had meetings with Food & Civil Supplies and Whole sellers for sufficient stock of essential items and sale with maintenance of COVID-19 protocols
- Review meetings were held at the District level and Circle level to take feedback of the management system and requirement of assistance for better management of the crisis situation

### **24. Morigaon:**

- Good co-ordination existed amongst administration, health department, 104/108, transportation system and Medical Colleges (GMCH)
- There is good coordination among health institution, CCC and District Hospital for management and handling of COVID-19 positive patients
- A 24X7 Control Room had been set up at Morigaon Circuit House with telephone number 03678241341 and Toll free no. 1077 for COVID-19 with DEOC staff as well as staff mobilized from Govt. line Departments
- COVID Core Cells & District Level Task Force Committee members under the chairmanship of

Deputy Commissioner organised meetings on every order related to lockdown & unlock issued by State Govt. & Central Government

#### **25. Nagaon:**

- No major challenges were faced in co-ordination mechanism during the COVID-19 pandemic
- Officers and staff from P&RD, PHE, Social Welfare, Education and other line departments were engaged in management of different CCCs and District health Screening Centers for containment of COVID 19
- Local NGOs were also involved in management of Covid-19
- Community wise coordination were established which resulted in timely receipt of information

#### **26. Nalbari:**

- DEOC has been activated as COVID Control Room on 24X7 basis with DEOC staff as well as staff mobilized from Govt. line Department.
- Meetings with officers from District Administration and Police Administration was held on every order related to lockdown & unlock issued by State Govt. & Central Government.

#### **27. Sivasagar:**

- Co-ordination mechanism was executed as per Incident Response System (IRS). No lack of co-ordination seen amongst Incident Response Team members of different line department/ stakeholders of IRT from top to bottom
- No other co-ordination challenges were observed

#### **28. Sonitpur:**

- Co-ordination with all stakeholders of the society are maintained through DDMA, Magistracy Branch, DHS etc.

#### **29. South Salmara:**

- Health team, Administration co-ordination team, Sanitization team and Police team are available 24 x 7 at the screening centre for the passenger's arriving at the district
- Wide publicity was carried out through publicity department by miking, poster, distribution of hand bills, pamphlets etc.

#### **30. Tinsukia:**

- An NGO coordination group was formed which helped the stranded migrant labourers and other needy persons in the District. Wide publicity was carried out through FLS and Whatsapp groups and social media on COVID-19 Guidelines. A Control Room with toll free number was

functioning at DC's Office, Tinsukia round the clock for addressing all public grievances. Grievances were also received through text messages and WhatsApp and necessary steps were taken by the District Administration to resolve the distressed messages and calls

### **31. Udalguri:**

To ensure response in a holistic manner, the District administration immediately constituted the following committees:-

- District Level Task Force for COVID-19.
  - Incident Response Team (IRT) for COVID-19.
- Accordingly regular meetings were conducted involving all heads of departments for better coordination

### **32. West Karbi Anglong:**

- Positive response receipt from G.B, Lot Mondal, Police Personnel, Health Dept and others participating depts.

### **33. Hailakandi:**

District Administration constituted the following committees for response:

- District Level Task Force for COVID-19.
- Incident Response Team (IRT) for COVID-19. Accordingly, regular meeting was

conducted involving all heads of departments for better co- ordination.

- Flying Squad for constant monitoring of price rise in the District.
- Sector Magistrate nominated for proper functioning of law & order & also monitor Containment zone

## LESSONS LEARNT IN MANAGEMENT OF COVID-19

### 1. Baksa:

- Lack of infrastructure to deal with multiple disaster at the same time

### 2. Barpeta:

- It is essential to increase health care facilities like bed, especially ICU bed, sufficient ventilators etc. as it creates scarcity almost in all the districts in order to reduce stress situations where patients cannot receive required treatment and to prevent hospitals from being overcrowded in times of crisis, where there is a spike in patients requiring hospitalization
- Governments should involve civil society in discussing restrictive measures because this increase compliance and the solidarity to shoulder the consequences
- Active surveillance, setting up of district control rooms for monitoring, capacity building of frontline health workers, risk communication and strong community engagement and addressing the psychosocial needs of the vulnerable population are some of the key strategic interventions implemented by the district that kept the disease in control.

### 3. Biswanath:

- Adequate manpower and number of health institute along with adequate facilities needed to be improved so as to effectively deal with COVID -19 or any other epidemic
- A mechanism is to be prepared for effective communication amongst the local authorities of the entire country
- Awareness for fitness is required

### 4. Bongaigaon:

- The “One size fits all” theory does not apply to all
- The grass root level workers need to be trained well, especially in rural areas, as they are usually the first responders

### 5. Cachar:

- Public adherence and community participation is a must, but efforts of the government are futile unless observed by citizens. It must be understood that simple measures such as social distancing and wearing of masks can significantly reduce the rate at which the infection spreads. We have to adjust to a new normal wherein social distancing becomes the new norm and wearing of masks, the new fashion. In all this, community participation is critical.
- Enforcement plays a major role in ensuring implementation of rules that have been framed to

curb the spread of corona virus, are observed strictly

#### **6. Charaideo:**

- To maintain basic hygiene and awareness generation in the society for using mask and maintain social distance
- Social Stigma attached to the COVID-19 positive patients need to be cleared through awareness campaigns
- Suitable Quarantine cum isolation centres need to be pre-identified along with sweepers and cleaners for any pandemic
- Proper hygiene and sanitation is indispensable

#### **7. Chirang:**

- Focus should be extended beyond recurring disasters and should be well equipped with periodic mock exercises for any unforeseen disaster with a well-designed SOP

#### **8. Darrang:**

- Management/ mitigation of multiple disasters simultaneously with limited human resources /basic facility
- Use of Information Technology in communication/providing prompt emergency services to the citizens with proper verification of records with the help of IT

- Several guidelines / SOPs are issued by State/ Central Govt. time to time based on the COVID-19 situation and this has given important lessons to the District Administration as well as public for containment of COVID-19
- Enforcement of Social Distancing, wearing of mask etc. reduced the number of COVID Positive patients to below 2% in the district

#### **9. Dhemaji:**

- Requirement of more number of Health Personnel
- Requirement of more number of Hospitals
- Public awareness and cooperation
- Availability of mask, sanitizer, gloves, PPE Kits etc.

#### **10. Dhubri:**

- Social stigma attached to the COVID-19 positive patients. It is possible to clear through the awareness campaign
- The people living in the backward places are unaware of the COVID-19 protocols. More awareness need to be created amongst the people living in backward places
- The fundamental lesson learnt from COVID 19 is that proper planning, management; coordination amongst the line departments together can fight and control such a pandemic situation as well as any kind of disaster



### **11. Dibrugarh:**

- Need of specific disaster management instruments (protocol/ guidelines etc.) for control of pandemic

### **12. Dima Hasao:**

- Strengthening of DDMA regarding man power and resources required
- A single command centre is important for co-ordination and execution, especially in 6th Schedule areas.
- Roles and responsibilities should be defined in case of pandemic in Disaster Management Manual
- Concerned department / agencies should be given responsibilities regarding disposal of dead bodies

### **13. Goalpara:**

- Dedication and pro-activeness towards service delivery is vital to minimize losses during disasters
- All the institutions should work in synergy to tackle any emergent situation
- Helping the needy (as a community) is of divine happiness
- Awareness has a great importance to deal with any pandemic

- Keeping frontline workers & Departmental staff motivated is key to fight a pandemic

### **14. Golaghat:**

- There should be a dedicated plan to tackle the crisis situation covering every aspect like human resource, livestock management, agriculture, livelihood, financial institutions, commercial sectors, transportation, health and sanitation, burial, disposal of the corpse, management of logistics
- There should be strict protocol for hygiene and sanitation at market places, bus stand, Govt. and private Offices, Banks, ATMs, POL Depots. Special care to be taken for wet markets
- There should be mock drill at every levels - District, Sub Division, Circle and Block level for crisis management involving all key stake holders

### **15. Hojai:**

- Effective coordination must occur among the line departments
- Awareness drive should be organized for Psychological impact during Pandemic

### **16. Jorhat:**

- It is a new experience for all to manage a pandemic situation

- Initially the district faced hurdles as it was an unusual situation for all, but with the active support of all concerned departments /officials /doctors and other health deptt. staff ,Police etc. and with the guidance of the Govt. ,everything was managed properly in Jorhat district
- Advanced planning and infrastructure facility development is very crucial / important to manage this type of pandemic situation
- Proper co-ordination among the key departments /officials is vital to manage a disaster situation
- Active participation / involvement as well as co-operation of public / common people is important for proper management of disaster situation
- Active involvement of NGO's /CBO's with proper co-ordination with district administration/DDMA makes the disaster management process much easier.
- Judicious / optimum use of human recourses and other resources also makes the things effective
- Involvement of people with voluntary service (volunteer) is also very helpful in managing the disaster situations
- The control rooms (e.g. DEOC, Police control room and other key departments control room) may be equipped with all facilities /equipments for better and effective co-ordination

#### **17. Kamrup:**

- Effective leadership helps to bring proper efficiency in managing a pandemic like COVID-19.
- Coordination amongst the departments can reduce the impact of a pandemic
- Contingency planning: proper use of funds available

#### **18. Kamrup (M):**

- Resource Management is the key to smooth operation. If resources are in place and co-ordination among agencies is good then any disaster can be mitigated effectively.

For instance PWD Department has supported in the construction of the make shift arrangements for accommodating 900 people in each of the Quarantine Centres and COVID hospitals. PHE Department has provided water supply in all the centres and hospitals. APDCL has provided electricity in these centres and hospitals. Health department has provided the technical man power for management of the hospitals and quarantine centres. Sports Authority of Assam has spared Sarusajai Stadium, Nehru Stadium for constructing makeshift hospitals. Food & Civil Supply Department, FCI supervised the fooding of the quarantine people. F&ES has provided

sanitization of the centres. Transport department and other private vehicle providers provided vehicles for transporting people. Moreover local cremation grounds have helped by providing cremation and disposal of dead bodies. Revenue & DM Department has provided necessary financial support for smooth operation of the activities for containment of COVID-19. All these cumulative efforts received from different stakeholders, departments, the management of COVID-19 has been effective till date.

#### **19. Karbi Anglong:**

- More awareness is required on the preventive measures like wearing of Mask, maintaining social distancing as people are still lacking awareness
- Closer Co-operation between KAAC and DDMA.

#### **20. Karimganj:**

- It is learnt from the pandemic COVID-19 that situation like multiple disasters like COVID-19, flood, Landslide, Cyclone etc. may simultaneously occurs and preparedness and readiness is always essential to overcome such situation
- It is also important to have adequate infrastructure, regular training of manpower to handle any emergent situation which may occur at any moment

#### **21. Kokrajhar:**

- Need more suitable pre-identified infrastructures with adequate sweepers for any pandemic or any disaster
- Need of more awareness campaigns to eliminate social stigma related to COVID-19
- Mechanism to develop for fast and relevant information from field
- Need protective gears for the field level staff and also for volunteers

#### **22. Lakhimpur:**

- It is essential to increase health care facilities like bed, especially ICU bed, sufficient ventilators etc. as it creates scarcity almost in all the districts in order to reduce stress situations where patients cannot receive required treatment and to prevent hospitals from being overwhelmed in times of crisis, where there is a spike in patients requiring hospitalization.
- Governments should involve civil society in discussing restrictive measures because this increase compliance and the solidarity to shoulder the consequences
- Active surveillance, setting up of district control rooms for monitoring, capacity building of frontline health workers, risk communication and strong community engagement and addressing the psychosocial needs of the vulnerable population

are some of the key strategic interventions implemented by the district that kept the disease in control

### **23. Majuli:**

- Adequate manpower and number of health institute along with adequate facilities needed to be improved so as to effectively deal with COVID -19 or any other epidemic
- There should be a dedicated plan to manage the crisis situation covering every aspect like human resource, livestock management, agriculture, livelihood, financial institutions etc.
- Strengthening of local economy for self-sufficiency at district level in every aspect in future
- There should be strict protocol for hygiene and sanitation at market places, Govt. and private Offices, Banks, ATMs, POL Depots as well as wearing of mask and hand sanitizer should be compulsory in public places even during normal time
- Awareness campaign at every level District, Circle and Block level for crisis management involving all key stake holders required
- Awareness for fitness is required

### **24. Morigaon:**

- Patient with Chronic Obstructive Pulmonary Disease (COPD), uncontrolled Diabetic

Medication always deteriorates in spite of best possible treatment

- We have not seen any complication in young patient and pregnant woman yet
- Only oxygen therapy does not have good result
- Early initiation of treatment with intravenous antibiotics, low molecular weight heparin, steroids, antiviral drugs, high flow oxygen along with other supportive measures has promising results

### **25. Nagaon:**

- Creation of awareness amongst common mass to follow the COVID 19 norms and guidelines was a major task in both urban and rural area
- Enforcement of COVID-19 protocol is the biggest challenge for District administration

### **26. Nalbari:**

- Extensive awareness generation activities like miking, leaflet, banner helped for implementation of rules & regulation of lock down as no serious violation of law & order was reported

### **27. Sivasagar:**

- The COVID-19 pandemic was a complete new challenge task for District Authority. Most of the decisions had to be taken judicially to meet the situational demand. Demands of different

stakeholders, communities were also to be balanced

- Effective management results from a sound co-ordination of all line departments

#### **28. Sonitpur:**

- Participation of general public with administration is of utmost important for tackling any pandemic situation
- Preparedness measures needs to be stepped up for any imminent disaster situation

#### **29. South Salmara:**

- Basic lesson learnt from COVID 19 is that proper planning, management, coordination is necessary to control such a pandemic situation. Integrity and attitude is important to fight in such a war like situation.

#### **30. Tinsukia:**

- Coordination with civil societies and media is a must in management of pandemic as both plays an avid role in preventing spread of rumours and misinformation. For effective management and implementation of COVID-19 protocol with a focus on hand washing and social distancing, requires full engagement of communities. Respect for human dignity is fundamental in management of COVID-19 as it was observed that when people

are afraid of being stigmatized for having COVID-19, they may hide the illness to avoid discrimination. Humanitarian assistance is required and all agencies should work together to eliminate this fear from the general public.

#### **31. Udalguri:**

- Primary & Secondary level health care facilities and manpower need augmentation.
- To encourage community based activities by involving community volunteers.
- There is a surge in field level activities by field functionaries like the ASHA, Angawadis, Prathirodhi Bondhus, Gaonburahs & VDPs.

#### **32. West Karbi Anglong:**

- Clean & hygienic environment provide us healthy working experiences.

#### **33. Hailakandi:**

- Dedication & pro-activeness towards service delivery is vital to minimize losses during disasters
- All the institutions should work in synergy to tackle any emergent situation
- Awareness has a great importance to deal any pandemic
- It is important to keep frontline workers & Departmental staff motivated

## HIGHLIGHT CHALLENGES/ ISSUES FACED DURING FLOOD VIS A VIS COVID-19

### **1. Baksa:**

- Deliberate violation of COVID-19 protocol at flood relief camps by some inmates
- To maintain social distancing in relief camps
- Shortage of officers, manpower due to fear psychosis of COVID-19

### **2. Barpeta:**

- Keeping people in relief centres and evacuation centres in the context of COVID-19 was extremely challenging while maintaining social distancing and other safety measures to avoid the risk of spreading or getting infected by the virus
- Distribution of relief materials during lockdown period due to COVID-19 pandemic in flood affected areas was a big challenge for the authorities.
- Essential health services are already collapsing under the weight of pandemic. Government employees are burdened, disaster management teams stressed and other supporting staff overworked and anxious

### **3. Biswanath:**

- Management of Relief Camps by maintaining social distance due to insufficient infrastructure in flood affected areas
- No social distancing mechanism can be followed properly in relief camps

### **4. Bongaigaon:**

- Maintaining social distance during rescue, relief distribution and housing the affected people in relief camps as per SOP of ASDMA
- Screening of the relief camps inmates by the Health Department
- Training programme regarding the management of relief camps (RC) as per new guidelines of COVID-19 with relief camp in-charge
- Creation of awareness regarding COVID-19 in each relief camp (RC) during flood involving Pratirodhi Bandhu volunteers and relief camp in-charge

### **5. Cachar:**

- Flood like situation occurred in Silchar Urban Areas, so it was difficult to open relief camps and to follow COVID-19 protocol in RC. Three numbers of schools had to be used for a particular area. It would have been difficult to cope with the situation, if flood affected areas had increased, resulting in exhausting of almost all the government infrastructures

- Families affected by flood had to be sheltered under same school and at times it posed a problem for families with large number of members
- Masks and sanitizers mandatorily had to be used and during flood situation it was tough for people to abide by the same
- Providing food to the relief camp members

#### **6. Charaideo:**

- No flood like situation occurred in the district during COVID-19 pandemic

#### **7. Chirang:**

- To maintain the social distancing norms in the relief camps as per SOP of COVID-19
- Limited availability of flood relief camps in the flood affected as well as nearby areas
- Mostly people were reluctant to go out of their village for taking shelter during flood due to COVID-19

#### **8. Darrang:**

- Setting up of Flood Relief Camps as per COVID-19 protocols and maintaining social distancing
- Management / mitigation of multiple disasters simultaneously with limited human resources /basic facility

#### **9. Dhemaji:**

Dhemaji district is situated adjacent to Arunachal Pradesh and the district is having numerous rivers and rivulets which originates in the hilly terrain of Arunachal Pradesh. During the monsoon period, Dhemaji district often faces flash flood problems. Hence the district gets very little time to prepare for sudden rush of floods which causes the district to be more vulnerable to flood

- During the rainy season lot of silt is coming from upper catchment of Arunachal Pradesh along with torrential water which causes vast amount of silt deposition in the River bed of Brahmaputra and its various tributaries. Due to rising of river beds the water carrying capacity of the rivers gradually decreases and causes flood in river side areas
- Flooding of new areas in the district such as Lakhpathar area under Dhemaji Rev. Circle.
- Unavailability of proper flood warning system for flash flood in the district
- Arrangement of sufficient space for flood affected people in relief camps considering the COVID-19 guideline
- Prolonged lockdown hampered in carrying out flood awareness programme as well as flood mock drill before the onset of the flood period

- Lockdown and the fear of infection amongst the official staff hampered in carrying out regular official work

#### **10. Dhubri:**

- Rescue and evacuation operation of people from the flood affected areas by maintaining social distance was a challenge
- Family-wise room allotment was fulfilled keeping in view of all COVID-19 protocols
- As most of the health workers were engaged in COVID-19 duties, so providing health facilities to the camps was most challenging
- Providing relief materials to far-flung areas became difficult due to manpower shortage
- Special care has been taken during distribution of GR
- Thermal Screening and Swab test was arranged in the camps. Fortunately no one has been tested positive in the camp
- Number of extra camps were increased

#### **11. Dibrugarh:**

- Shortage of departmental machine boat. At least one additional IWT boat required to be provided
- High velocity de-watering pump is required to mitigate the urban flood problem
- Shortage of Shelter place to accommodate people

#### **12. Goalpara:**

- Identification of relief camp management keeping in view the COVID-19 protocols. More relief camps had to be identified by the district administration
- Lack of awareness apprehend the spread of COVID-19 among the camp inmates
- High land areas were identified to set up relief camps
- Reluctance of the camp inmates to get themselves tested for COVID-19

#### **13. Golaghat:**

- The SDRF/ NDRF team with PPE Kit had to conduct rescue operations even in extreme hot weather
- During rescue operations it was difficult to enforce mask to the affected community
- The inmates at Relief camps were advised to maintain social distance, use mask, sanitizer and practice hand wash. This was hardly followed by the inmates. The adult could be convinced but challenge was for the infant and children
- While distributing GR items the Officials present had to persuade the community members to maintain social distance and use mask for collection of GR items. There was challenge in



taking thumb impression of beneficiaries who could not put signatures

- Due to space constraint at some Relief camps, it was difficult to maintain physical distance. The community was not ready to move to another relief camp away from their villages
- With the support of AWWs, Child Friendly Spaces were opened in the Relief camps. The AWWs used every means to maintain social distance, hand washing and masks in the CFS. During the crisis situation the AWWs used their innovative skills to create a playing and learning environment at the CFS.
- Due to the ongoing COVID-19 situation, the presence of doctors or paramedical staff at every relief camp was not possible. However, in any medical case, the medical team rushed for assistance

#### **14. Hojai:**

- Maintaining social distancing in Relief camps
- Managing separate place for symptomatic persons

#### **15. Jorhat:**

- Arrangements for maintenance of social distancing and other sanitation facilities in the flood affected areas and in flood relief camps.

- Maintenance of social distancing during the distribution of flood relief items among the flood victims

#### **16. Kamrup:**

- Non-availability of more nos. of relief camps at close intervals so as to maintain distance among the inmates
- Non accessible areas during flood to carry out sanitization process

#### **17. Kamrup (M):**

- Firstly, distribution of GR during flood while maintaining all COVID protocols. In the relief shelters it was the challenge for the field officials to make the affected people follow all COVID protocols
- Maintaining social distancing amongst affected people and field officials was a challenge

#### **18. Karbi Anglong:**

- Flood affected people were reluctant to come to relief camps leaving their belongings at home, as security was not ensured
- It was difficult to maintain COVID protocols like social distancing of 6 feet amongst the inmates in the relief camps.
- White markings were done on the floor of each relief camps for maintaining social distancing for

each inmates but the issue of space constraints came up as the inmates of the camps increased.

#### **19. Karimganj:**

- No incident of flood reported from any corner of the district during the ongoing monsoon season

#### **20. Kokrajhar:**

- Evacuation of affected peoples maintaining social distance is one of the main challenge, following COVID-19 Protocol

#### **21. Lakhimpur :**

- Putting people in relief centres and evacuation centres in the context of COVID-19 was extremely challenging, keeping in mind social distancing and other safety measures to avoid risk spreading or contracting the virus
- Distribution of relief materials during lockdown period due to COVID-19 pandemic and flood affected areas is a big challenge for the authorities
- Motivating Government employees overburdened, Disaster Management Teams stressed and other supporting staff overworked and anxious

#### **22. Majuli:**

- Management of Relief Camps by maintaining social distance due to insufficient infrastructure in flood affected areas

- During rescue operations it was difficult to enforce mask with PPE Kit to the affected community
- During the flood period, most of the flood affected families stayed at home due to COVID-19. At the same time while receiving any health related issues from them, the co-ordination by District Administration was a big challenge
- The inmates at Relief camp were advised to maintain social distance, use mask, sanitizer and practice hand wash which was a challenge for the infant and children
- Due to the ongoing COVID-19 situation, the presence of Doctors or paramedical staff in every Relief camp was not possible
- While distributing GR items, the Revenue Circle Officials had to persuade the community members to maintain social distance and use mask for collection of GR items. Sometimes it was a challenge for them

#### **23. Morigaon:**

- Insufficient no. of raised platform in flood prone areas especially under Bhuragaon Revenue Circle, it was not feasible to open and maintain Flood Relief camp
- There was no place to shelter animals during flood
- Maintaining social distancing and other COVID Protocol in road side shelter and rescue operation

- Insufficient no. of trained personnel like AAPDA MITRA volunteers in each village, rescue operation could not be executed in all the villages at the same time
- At present there are only 2 or 3 nos. of IRB boat with SDRF personnel which is not sufficient for immediate rescue operation. Therefore we need more IRB boat for Morigaon district

#### **24. Nagaon:**

- Management of Relief camps as well as Relief distribution centre maintaining COVID-19 protocol like social distancing, wearing of masks and awareness on washing of Hands was the major challenges/Issues faced during Flood vis. a vis. COVID-19
- Separate arrangements for children and old aged people in relief camp was another issue, due to constraint of space, as most of the colleges and schools having better facilities were in use as COVID Care centre.

#### **25. Nalbari:**

- Inadequate boats and SDRF personnel in the district leads to difficulty for rescue operation in multiple locations simultaneously
- Maintaining social distancing and other COVID Protocol in relief camps and rescue operation

#### **26. Sivasagar:**

- District Administration had to manage the flood along with maintaining COVID-19 norms
- Violating of social distancing norms was sometimes seen in few relief camps

#### **27. Sonitpur:**

- Selection of Probable Relief Camps for maintaining COVID-19 protocols
- Man-power
- Transportation
- Maintaining COVID-19 protocols

#### **28. South Salmara:**

- The main challenge was rescue operation and evacuating people from the flood affected areas
- During flood the major challenge was to maintain social distancing in areas where the people take shelter in high land.
- Second major challenge was to organise health camps

#### **29. Tinsukia:**

- The main challenge was rescue operation and evacuating people from the flood affected areas

#### **30. Udalguri:**

- No major incident of flood was reported for the year 2020-21 and not required to set up any long duration relief camp. Temporary shelters are

managed as per COVID-19 guideline and no major challenges found except erosion

### **31. West Karbi Anglong:**

- Inconvenience of space / building for setting up of Relief Camps.
- Carrying GR materials through deplorable roads
- Absence of Ware-houses.

### **32. Hailakandi:**

Hailakandi district was very fortunate that no flood occurred this year, however every effort was made to deal with the situation in case flood occurred in the district.

- Identification of relief camps, keeping in view of the COVID-19 protocols. More relief camps had to be identified by the District Administration.
- Lack of awareness apprehended spread of COVID-19 among the camp inmates.
- High land areas were identified to set up relief camps.
- Keep sufficient numbers of trained personnel and volunteers ready

**BEST PRACTICES IN MANAGEMENT DURING FLOOD VIS A VIS COVID-19 (INCLUDE PHOTOGRAPHS) IF ANY:**

**1. Baksa:**

- Direct support and physical visit at the flood prone villages and providing relief by maintaining COVID -19 protocols.
- With the best of efforts it was not fully possible to maintain the exact social distance norms

**2. Barpeta:**

- Child friendly Spaces set up in relief camps as per guidelines of relief camp management in the context of COVID-19 vis- a- vis. flood preferably in flood affected areas. All protocols for COVID-19 containment including safety and security of children were ensured in CFS. Participants were from various departments like Health, Education, Social welfare, PHED, Police, APDCL etc.



- E- Help desk at relief camp served multiple benefits for the flood affected population particularly for the inmates of relief camps. The

inmates were provided with free tele-medicine consultations, free emotional wellness counselling, enrolment under Pradhan Mantri Fasal Bima Yojana, enrolment under Kishan Credit card scheme etc.



- Awareness camp by DDMA with the help of NDRF in flood relief camps about flood, COVID-19 and earthquake.



**3. Biswanath:**

- Set up of Child friendly Space at Dathkola, Halem Revenue Circle
- GR was Packed and distributed among flood affected to maintain social distancing

- During flood relief distribution process, all the people were seen wearing mask and maintaining social distance

#### **4. Bongaigaon:**

- One CSC Centre was setup in each RC for counselling of the relief camp inmates regarding any problem related to COVID-19 and other issues.
- Thermal screening of relief camps inmates were done by medical staff in each RC before entering in the RC

#### **5. Cachar:**

- Generally in relief camps, raw and uncooked food items are provided. But this time to contain the spread of COVID, cooked food maintaining all COVID protocols were distributed amongst relief camp members.

#### **6. Chirang:**

- Availability of counselling for the children in the relief camps
- Arrangement of CFS (child Friendly Spaces) in the relief camps
- E-help desk set up in the relief camps for various services like telemedicine etc. for the camp inmates

#### **7. Darrang:**

- 24x7 services during the flood time, the District officials as well as Deputy Commissioner visited the flood prone areas with country boat/ machine boat
- Setting up of Child Friendly Spaces (CFS) during flood as per COVID-19 protocols
- Handling of smooth distribution of GR item to the flood affected people along with management of institutional quarantine centres simultaneously with limited resources. The respective officers of the district were entrusted to check the quantity and quality of GR.
- Sanitization of Quarantine centres and Containment Zones providing hygiene/ sanitization facilities in the Relief Camps as well as High Rise platforms
- Daily reporting of COVID situation report and Flood report in different prescribed format on time to the concerned authorities
- As desired by Govt., active Pratirodhi Bondhu Volunteers were involved in flood rescue, relief camp management for ensuring social distancing.

#### **8. Dhemaji:**

- Early preparation of Flood Contingency Plan involving all major Govt. line departments

- Formation of village level evacuation teams consisting of VLMCC members, Gaon burhas, Lot Mondals, VDP personnel, local people and Pratirodhi volunteers in flood vulnerable areas for smooth management of flood situation
- Early identification of more no. of flood shelters (98 nos.) considering the COVID-19 situation
- Deployment of sufficient numbers of NDRF & SDRF teams in the district
- Establishment of separate Child Friendly Space (CFS) in flood shelters
- Extensive conduct of awareness campaign “*Yatra*” for Flood and COVID-19 in various parts of the district
- Early arrangement for distribution of GR materials with the F& CS & CA department and fixation of rate for procurement of GR materials
- Early identification of isolation centres for shifting of infected COVID-19 patients in the flood shelter to separate locations
- Distribution of Face Mask and Sanitizers to the shelter inmates

#### 9. Dhubri:

- NDRF, SDRF and Protirudhi Bandhu created proper awareness regarding rescue techniques.

- NDRF and SDRF teams frequently visited the riverine areas and created awareness about the “Dos & Don’ts” during the flood period
- CFS was created in the relief camps and children were engaged in various activities

#### 10. Dibrugarh:

- Prepositioning of Boat to evacuate marooned people from Chapori areas
- Involving volunteers in Relief Camp to help the camp inmates, maintain hygiene, personal safety etc.

#### 11. Goalpara:

- Arrangements were made, including the availability of face masks and hand sanitizers in the relief camps
- Daily monitoring of the health condition of inmates were done by medical teams
- Inmate (s) found sneezing and suffering from common cold, Fever and breathing problem; were immediately isolated and later tested for COVID-19
- Sufficient number of hand tube wells and temporary toilets were set up in the relief camps as per protocol of COVID-19

- In order to maintain social distancing in the relief camps, the inmates were accommodated as per COVID-19 protocols
- Apart from the supply of G.R., the relief camps were regularly sanitized
- **Mission Tarang** psychosocial counselling to children
- Lifes skill training for children in relief camps
- Classes for students in relief camps. Teachers oriented & provided lesson
- Under **Surakshit Dada-Dadi, Nana-Nani/ Goalpara cares** programme reaching out to elderly vulnerable groups

## 12. Golaghat:

- During Flood the DDMA in coordination with Social Welfare Department had set up the Child Friendly Spaces (CFS), where the children of affected families were provided nutritious food and children were engaged in learning and playing



- The Administration provided dignity kit to the women and adolescent girls in the Relief camps to take care of their hygiene.



- The Administration set up Separate Space for Lactating Mothers at Relief Camps which benefited the lactating mothers.



## 13. Hojai:

- Distribution of GR



- Home delivery of Grocery items and vegetables
- Door to Door awareness drive in Relief camps, flood affected areas.





- Pratirodhi Bondhu Volunteers were of great help in managing relief camps, distribution of GR items.
- Anganwadi Workers played a vital role in establishing Child Friendly Spaces in relief camps. They actively engaged the children in recreation activities.

**14. Jorhat:**

- To accommodate the probable flood affected people with social distancing norms, sufficient numbers of proposed flood relief camps were identified in advance in all revenue circles
- Sufficient numbers of sanitation /toilet facilities were arranged in advance in all proposed flood relief camps through the concerned departments.
- Hand washing facilities, Sanitizers/soaps/mask etc. were arranged in all flood relief camps.

**15. Kamrup:**

- Distribution of leaflets among the inmates in relief camp.
- Distribution of sanitizers and masks among the inmates
- Installing hand washing facilities in relief centers.
- Child friendly spaces maintaining all covid protocols.

**16. Kamrup (M):**

**17. Karimganj:**

- The response mechanism (new SOP for management of Flood vis a vis COVID-19) was shared with the Line Deptts. and orientation with the officials & staff of concerned deptts & other stakeholders were held which includes immediate deployment of Sanitization Teams, Medical Teams for Screening, setting up of Child Friendly Spaces and maintaining social distancing norms following COVID-19 protocols/ guidelines etc. for flood relief camp management.

**18. Kokrajhar:**

- Awareness on flood safety advisories and safety of children during emergencies has been conducted with the help of Field Officials and Pratirodhi Bondhu Volunteers at flood prone villages.

- Establishing more numbers of relief camps for inmates keeping in mind the social distancing among the people in the relief camps.
- Creating awareness in the relief camps for social distancing, wearing mask and hand washing frequently.

### 19. Lakhimpur:

- Mock exercise on Child friendly Spaces conducted one each in all the revenue circles of the district as per guidelines of relief camp management in the context of COVID-19 vis- a- vis flood preferably flood affected areas in order to examine the state of preparedness of key response institutions. All protocols for COVID-19 containment including safety and security of children were ensured in CFS. Participants were from various departments like Health, Education, Social welfare, PHED, Police, APDCL etc.



- One day workshop conducted on Incident Response System (IRS) with all line departments in the conference hall of the Deputy Commissioners Office, Lakhimpur where clear cut role allocation and command system is pre assigned and manpower is trained. Resource persons were from 12th BN NDRF, Doimukh, Arunachal Pradesh.



### 20. Majuli:

- Set up of Child friendly Space at 6 Nos of Relief camps. Which was very effective for children to include learning spaces for children and mental support during the flood period. Also provided nutritious food and playing.



- During the GR was distributed among flood affected to maintain social distancing was

compulsory through Revenue Circle Staff, GB, APDAMITRA Volunteers and Pratirodhi Bandhu and also compulsory for received of GR items to be maintained the wearing of Mask and hand sanitizer.



- Separate spaces for lactating mothers to breastfeed, visits by ASHAs and Anganwadi workers etc.



- The inmates at Relief camps were advised to maintain social distance, use mask, sanitizer and practice hand wash. which was successfully done by inmates.



- Introducing and preparation of napier grass for the first time in the district, which was help to the community for income generation as well as sufficient cattle fodder used in flood period.



### 21. Morigaon:

- Police personnel, Pratirodhi Bandhu volunteers, School Teachers and Gaonburah were involved to maintain social distancing and COVID-19 protocol during flood relief distribution.

### 22. Nagaon:

- Use of Pratirodhi Bondhu Volunteers during Flood and COVID 19.
- Special emphasis on conduct of vigorous RTPCR test amongst flood affected people to reduce contamination in the relief camps and locality.
- Distribution of washable face masks amongst flood affected people.

### 23. Nalbari:

- Installation of bamboo barricade for maintaining social distancing during distribution of relief materials to the flood affected people

- Activation of Child Friendly Space at relief centre under Pashim Nalbari RC.
- Identification of more numbers of relief camps for the year 2020 than previous years due to COVID-19

#### 24. Sivasagar:

- Advance training for relief camp in charge on flood as well as do's and don'ts of COVID-19 by Health Department
- Awareness campaign among inmates carried out by Health Department
- Child Friendly Spaces in relief camps
- Different guidelines received from ASDMA in advance for management of flood along with COVID-19
- Early warning for flood

#### 25. Sonitpur:

- Performance of all Revenue & DDMA officials while maintaining COVID-19 protocols
- Functioning of DEOC as nerve centre for both Flood & COVID-19

#### 26. South Salmara:

- SDRF team and local people helped in i rescue operation to flood affected people



#### 27. Tinsukia:

- The Pratirodhi Bondhu volunteers and local organisations helped in evacuation of marooned people and their belongings. Local NGOs in coordination with District Administration provided food to the needy people and helped the District Administration in awareness generation.



### 28. Udalguri:

- The response mechanism to tackle the situation of flash flood in Kalaigaon Revenue Circle which includes immediate evacuation, deployment of sanitization team, Medical team for screening, and employees of Social welfare department in the relief camp to set up the Child friendly Spaces and maintain social distancing following COVID-19 guideline for flood relief camp management

### 29. West Karbi Anglong:

- Children carrying their basic necessities during recent flood.



### 30. Hailakandi:

- Arrangements were made including the availability of face masks & hand sanitizers at the Quarantine Facility.
- Daily monitoring of health condition of inmates were done by the Medical teams.

- Inmate (s) found to be sneezing & suffering from common cold, fever & breathing problem; were immediately isolated & later tested for COVID-19.
- Sufficient number of hand tube wells & temporary toilets were setup at the designated relief camps as per protocol of COVID-19.
- Baby food Children & nutritious diet for lactating mother were provided for maintaining good health at Quarantine Facility.
- High risk people like elderly, pregnant women were directly sent to home isolation after tested negative for COVID-19 & regularly follow up by ASHA workers & MPW.
- Mission Tarang psychology counseling to children.
- Village level management committee regularly arranges place for home isolation & monitor that no one venture out of Containment Zone.
- Under Surakshit Dada- Dadi, Nana- Nani/ Hailakandi cares programme reaching out to elderly vulnerable.
- Google spread sheet was used for maintaining all records in respect of COVID-19.
- Receiving all calls related to supply of essential food commodities and arranging distress call for counseling with psychiatrist.

## CO-ORDINATION MECHANISM/

### CHALLENGES:

#### 1. **Baksa:**

- Engagement of Protirodhi Bondhu / Volunteers for maintaining social distancing norms in market, Offices, relief camps and bridge the gap between community and the administration
- Co-ordination between the civil administration with concern dept. like SDRF, NDRF, Animal Husbandry, Medical, Police PHED etc.

#### 2. **Barpeta:**

- Central Co-ordination of all activities through control room (DEOC)
- Incident Response system activated
- All issues related to flood and COVID 19 were taken care of simultaneously

#### 3. **Biswanath:**

- Contingency plan was prepared according to the new SOP
- Frequent meetings were organized with the concerned line departments
- Telephonic communication was maintained

#### **Challenges**

- Delay in information dissemination due to network issue in the remote areas
- Insufficient man power and resources

- Insufficient rescue professional and mechanized boat

#### 4. **Bongaigaon:**

- Co-ordination with various stakeholders was done through review meeting, video conference etc.
- Creation of Relief camp management team to monitor the Relief camp (RC) during flood
- Volunteers are also actively engaged to each Relief camp (RC) in order to serve during emergencies

#### 5. **Cachar:**

- Mapping and managing coordinating mechanisms
- Developing repertoires for thinking beyond the immediate demands of the crisis, and ensuring reliance across the system

#### 6. **Chirang:**

- In addition to coordination with the line departments, the DDMA, Chirang also coordinated with Gaon Burahs / Community leaders/ religious leaders in generating mass awareness amongst common people

#### 7. **Darrang:**

- Use of Information Technology in all the approachable ground for arrangement of co-

ordination mechanism from PRI / GB Level to District Administration / Police Administration.

- Formation of whatsapp group for prompt reporting of any unwanted damages / immediate repair restoration etc., co-ordination with all concerned with District Administration / Police Administration.

#### **8. Dhemaji:**

- Establishment of Joint Control Room (24x7) deploying staff from DEOC, Health Department, Police etc. for smooth co-ordinations information in between line departments and other agencies
- Formation of Nodal Officer team from every Govt. line departments for smooth coordination and timely management of flood situations
- Formation of Vulnerable Pockets Management Committees including local people, social workers, VDP members, VLMCC members and Pratirodhi Bandhu Volunteers and collection of their contact numbers for coordination in flood vulnerable areas for smooth management flood situations
- Formation of Relief Distribution and Monitoring Committees including PRI members, Camp In-charge, Lot Mondals, Gaon Burhas, VDP personnel and leading Citizen and collection of their contact numbers for smooth co-ordination

and distribution of relief items in flood affected communities

#### **9. Dhubri:**

- Apart from the COVID-19 duties every department has put forward their hands to mitigate the flood situation
- The Education department, Health Department, P&RD Department, Police department were directly involved in GR distribution and Relief camp management in collaboration with the Civil Administration.

#### **Challenges:**

- During lockdown period the department officials were unable to reach to a place of emergency in proper time during flood occurrence

#### **10. Dibrugarh:**

- Departments like Veterinary & AH, Health, Public Health Engineering were sent to the flood affected areas as a team as their nature of work is similar

#### **11. Goalpara:**

As Flood occurred in 2020 amidst COVID-19 pandemic, it was a great challenge for the district administration to control the spread of COVID-19 especially in the relief camps. As such following measures were undertaken to control the spread of COVID-19.

- Distribution of Hand Sanitizers in sufficient numbers to the camp inmates
- In order to generate awareness, the Circle Level Monitoring Committee was specially asked to deliver speech about health and hygiene before the camp inmates
- The regular health check-up of camp inmates was done in co-ordination with health department.
- Proper sanitization of relief camps was done on regular basis in co-ordination with the PHE department.
- No major problem was found in management of flood

#### **12. Golaghat:**

- The DDMA, Golaghat had coordination meeting with all Heads of Department for smooth management of Flood vis. a via COVID-19
- The Circle level Camp in charge meetings were held to enforce the Relief camp management guideline
- The local Pratirodhi Bondhu Volunteers were trained and briefed about Relief camp management.
- Whatsapp group were used to disseminate weather forecast, Water level etc. among the Departments, Field Officers, Circle level staff and volunteers for effective response

- Field level visits and follow up done to ensure smooth management of the Relief camps, rescue and relief operations.

#### **13. Hojai:**

- Distribution of Mask/ Sanitizers/ IEC materials in Relief Camps in coordination with Health Department
- Organized Health Camp in Relief camps
- Daily follow up of surveillance team to the Home Quarantine persons

#### **14. Kamrup:**

- Proper coordination between the line departments. led to proper management, however at times availability of insufficient no. of boats with the SDRF poses a concern during the emergency situations

#### **15. Kamrup(M):**

- Field Officials co-ordinated well and no such challenge faced

#### **16. Karimganj:**

- Co-ordinated & comprehensive approach has been planned for management of flood if occurs in the district.
- No major challenges on flood management were found in the district as no flood like situation



occurred during this COVID-19 pandemic situation.

#### **17. Lakhimpur:**

- Central Co-ordination of all activities through control room (DEOC)
- Incident Response system activated
- All the issues related to flood and COVID 19 taken care of simultaneously
- In the IRS mechanism also, the Gaon Burahs and AAPDA MITRA volunteers are assigned roles and trained as a first responder. Information and command channel is well introduced to them to help administration in getting first-hand information to the appropriate authorities in a timely manner to enable early response.

#### **18. Majuli:**

- The DDMA, Majuli had coordination meetings with all Heads of Department for smooth management of Flood vis. a vis. COVID-19
- Health camp setup in coordination with District Health Society for proper maintenance of COVID-19 protocol.
- Child Friendly Space was a big challenge to setup during the flood period in Relief Camp due to COVID-19. Because Children are mostly affected due to COVID-19 and also maintenance of social distancing as per COVID protocol

- Awareness programme was done through Health and PHE Department for Dos and Don'ts at relief camps and use of hand sanitizer as well as hand washing and face mask to relief camp inmates
- The Circle level Camp in charge meetings were held to enforce the Relief camp management guideline
- The local Pratirodhi Bondhu Volunteers were trained and briefed about Relief camp management

#### **19. Morigaon:**

- DDMA meeting was held in every week for better and efficient management of rescue operations during flood
- Report on flood shared every day in DDMA whats app group , NDRF & Army
- Submission of daily flood report to the State government by 2 PM becomes a challenge for DEOC as the circle level staff had to be busy in relief operation at the site. Hence collecting, compiling and sending the report to DEOC also becomes difficult for them.
- Daily flood situation reported to media on daily basis through DIPRO

#### **20. Nagaon:**

- No major challenges were faced in co-ordination mechanism during the COVID-19 pandemic vis. a vis. Flood
- Officers and staff of Agriculture, Veterinary, Social Welfare and field level functionaries of Municipal board and Revenue Circles were engaged for management of Flood
- Services of separate set of officials were utilized for management of COVID-19 vis. a vis. flood

#### **21. Nalbari:**

- DDMA meeting was held in every week for better and efficient management of rescue operations during flood
- Report on flood shared every day in DDMA whats app group , NDRF & Army
- Submission of daily flood report to the State government by 2 PM becomes a challenge for DEOC as the circle level staff had to be busy in relief operation at the site. Hence collecting, compiling and sending the report to DEOC also becomes difficult for them.
- Daily flood situation reported to media on daily basis through DIPRO

#### **22. Sivasagar:**

- No challenges were seen in co-ordination mechanism during flood vis. a vis. COVID-19 management.

#### **23. Sonitpur:**

- Efficient co-ordination is maintained with all Departments /Agencies through District Disaster Management Authority, Sonitpur.
- All directions were issued by the Chairman, DDMA.

#### **24. South Salmara:**

- Administration co-ordination team, SDRF, Police, all field workers from various line department are available 24 x 7 and worked together to combat the situation in the district
- There was no such lack in coordination while managing flood relief operation

#### **25. Tinsukia:**

- The NDRF, SDRF and administration worked together to combat the flood and COVID-19 in the district

#### **26. Udalguri:**

- No major problem found in management of flood vis. a vis. COVID-19.

### **27. West Karbi Anglong:**

- Positive response received from Gaon.Burha, Lot Mondal, Police Personnel, Health Deptt. and others participating deptts.

### **28. Jorhat:**

- The meeting of CDMC and DDMA, Jorhat was conducted regularly for smooth co-ordination among the concerned departments / officials
- Whatsapp groups were created at Revenue Circle Level and District Level involving key officials of different departments for smooth co-ordination and quick dissemination of information

### **29. Karbi Anglong:**

- All the line departments including the Revenue Staff co-ordinated during the flood situation

### **30. Hailakandi :**

Although no flood occurred in the district. However, measures were undertaken to control the spread of COVID-19 in case flood occurs.

- Sufficient amount of hand sanitizers were kept in stock.
- In order to generate awareness, the Circle Level Monitoring Committees were specially asked to deliver speech about health & hygiene for the camp inmates.

- The regular health check-up of camp inmates was done in co- ordination with health department.
- Proper sanitization of relief camps was done on regular basis in co-ordination with the PHE Department.

No major problem was found in management of flood.

## LESSONS LEARNT IN MANAGEMENT OF DURING FLOOD VIS A VIS COVID-19:

### **1. Baksa:**

- Lack of infrastructure to deal with multiple disaster at the same time

### **2. Barpeta:**

- Vulnerable groups require specific attention in disaster management. The elderly people suffer more from COVID-19 than younger generations, since they live in poor houses and can access little services of WASH and waste management. Local government should enhance disaster management measures in health care facilities where patients and infected persons are quarantined

### **3. Biswanath:**

- An effective relief distribution mechanism is to be prepared in an early manner to distribute the GR items effectively in such situation

### **4. Bongaigaon:**

- Increased awareness campaign should be done and training of the villagers on management of flood should be organized
- Villagers should construct / modify the houses by increasing their plinth level higher than flood level

### **5. Cachar:**

- Relief camps should be prepared keeping in mind, certain medical emergencies which might occur in the near future as well.
- Govt. Mechanism has to remain ready & prepared throughout for any such kind of crisis

### **6. Chirang:**

- Management of multiple disaster at the same time is a big challenge
- Need to build required infrastructures at some specific locations
- Extensive awareness programme for sensitization of people in rural areas

### **7. Darrang:**

- Identification of sufficient number of Relief Camps considering social distancing and other basic facilities which have not been practiced in earlier flood situation
- Management / mitigation of multiple disasters simultaneously with limited human resources / basic facility

### **8. Dhemaji:**

- It is very much needed to identify large numbers of Flood shelters to meet large numbers of affected people in respect of flood or any biological disaster such as COVID-19 pandemic

- Establishment of Flash Flood Early Warning System
- It is very much needed to construct separate multipurpose flood shelters as the District Administration usually uses the academic institutions which are not meant for shelter purpose
- More awareness activities should be carried out focusing Biological pandemic like COVID-19 etc.

#### **9. Dhubri:**

- Basic lesson learnt during Flood vis. a vis. health education. There is a gap of health education in society
- Identifying the reverent areas which are most vulnerable, where people tend to cross rivers, take baths, wash cloths and go for fishing. More awareness programme is needed among the local people about the vulnerabilities and risks of drowning
- Local people need to be trained up by NDRF and SDRF on flood rescue techniques

#### **10. Dibrugarh:**

- Local capacities (manpower & material) should be strengthen. There should be clearly articulated efforts to strengthen community capacities to cope with disasters

- Need of drainage master plan to mitigate urban flood

#### **11. Goalpara:**

- It is learnt from the present situation of COVID-19, that there may be emergent situation like multiple types of disaster at a time like COVID-19 and Flood. So, to tackle such multiple emergent situations, all the resources need to be set up in readiness. More emphasis need to be given to make people aware about disaster
- Preparation in advance and wide circulation of standard guidelines are very useful to deal with any disaster situation particularly the relief camp management guideline for COVID-19

#### **12. Golaghat:**

- Keep the inventory of Resources updated
- Set up temporary Relief shelters like community halls, Govt. Quarters, place of worship etc. which can be utilized during the crisis situation
- Increase strength of rescue teams for quick response
- Maintain records of additional Officers and staff from various departments for deployment in emergency duty

- There should be mock drill at every level District, Sub Division, Circle and Block level for crisis management involving all key stake holders
- Awareness required at the affected villages

### **13. Hojai:**

- There should be sufficient stock of logistics, adequate infrastructure, laboratory and other medical facilities within the district
- Pre- identification of additional Relief camps as per population density of villages to earmark space for social distancing

### **14. Jorhat:**

- Advanced planning and infrastructure / facility development are very crucial /important to manage this type of critical situation
- Proper co-ordination among the key departments / officials is important to manage such critical situation
- Active participation / involvement as well as co-operation of public/ common people is very important
- Active involvement of NGO's / CBO's with proper co-ordination with district administration / DDMA makes it easier to manage the situation.

### **15. Kamrup:**

- Prior identification of Relief Camps considering all the COVID-19 protocols has led to efficiency during the outbreak of flood
- Providing masks, sanitizers, hand washing facilities etc. in the relief camps have helped in minimizing the spread of COVID-19 in the relief camps.

### **16. Kamrup (M):**

- Resource management is the key to smooth operation. If resources are in place and there is good co-ordination amongst agencies than any disaster can be mitigated effectively

### **17. Karbi Anglong:**

- Relief camps with sufficient space and well placed infrastructure are needed
- All the Government development plans and schemes must be disaster resilient so that they can withstand and function during disaster

### **18. Karimganj:**

- Preparation in advance and wide circulation of standard guidelines are very useful to deal with any disaster like situation particularly in relief camp management vis. a vis. other disasters

### **19. Kokrajhar:**

- Need more SDRF personnel with trained divers for search and evacuation purpose

## **20. Lakhimpur:**

- Local communities play a key role in fighting against disasters in the front line as AAPDA MITRA and Pratirodhi Bondhu volunteers. They are engaged in supporting and managing evacuation, search and rescue operation, distribution of relief materials etc. Also hygiene promotion and social distancing in local communities are the most fundamental measures in reducing transmission of COVID-19

## **21. Majuli:**

- Setting up more and more Relief shelters like community halls, Govt. Quarters etc. which can be utilized during the crisis situation
- An effective relief distribution mechanism is to be prepared in an early manner to distribute the GR items effectively by maintaining social distance in such situation
- Maintenance of stock for relief items and medical items in an erstwhile rural district like Majuli is another important lesson learnt. During emergency situations, mostly suppliers resort to hoarding for which district like Majuli, which is

dependent upon neighbouring districts for supplies, face severe crisis.

- Facilities for maintaining the health hygiene, drinking water & compulsory sanitization required for relief camps in future
- Maintain records of additional officers and staff from various departments for deployment in emergency duty
- There should be mock drill and awareness required at the affected villages at every level like District, Circle and Block level for crisis management involving all key stake holders

## **22. Morigaon:**

- Mobilization of SDRF is convenient then NDRF for the district as there is no station of NDRF in the district
- Involvement of teachers helped for efficient distribution of flood relief materials among flood affected people
- DDMA, s what app group became effective for sharing of information and taking immediate action for response and relief operation

## **23. Nagaon:**

- Management of Relief Camps and Relief Distribution centers by maintaining COVID-19

protocol was the major challenge during Flood vis. a vis. COVID-19.

#### **24. Nalbari:**

- Mobilization of Army is comparatively convenient than NDRF for the district as there is no station of NDRF in the district.
- Department has prepared contingency flood plan, but activation of the contingency flood plan during the time of flood is not seen
- DDMA's what app group became effective for sharing of information and taking immediate action for response and relief operation

#### **25. Sivasagar:**

- Some advanced planning (Training of Relief Camp In-charge, Identification of Relief Camps, Identification of personnel for flood duty etc.) helped to manage flood vis. a vis. COVID-19 in Sivasagar district effectively

#### **26. Sonitpur:**

- More no. of probable relief camps needs to be identified
- Provision for hygiene items i.e. mask, gloves, sanitizers, soaps etc. are required not only for inmates but also for the field staff engaged

#### **27. South Salmara:**

- Basic lessons learnt during Flood vis. a vis. COVID-19 is that there is a gap of health education in the society
- Identifying the areas of the river where people tend to cross rivers, take baths, wash clothes and go for fishing and sensitize the locals about the vulnerabilities and risks of drowning
- Local people need to be trained up by NDRF and SDRF on flood rescue techniques

#### **28. Tinsukia:**

- Basic training to the local people of flood prone area on search and rescue techniques with a focus on Flood and First Aid will be helpful in near future

#### **29. Udalguri:**

- Preparation in advance and wide circulation of standard guidelines were very useful to deal with any disaster situation particularly the relief camp management Guideline for COVID-19

#### **30. West Karbi Anglong:**

- It is how we response the challenges / critical situation as positive manner. So that the devastating events consider as minor event.

#### **31. Hailakandi:**



- It is learnt from the present situation of COVID-19 that there may be emergent situation like multiple types of disaster all at a time like COVID-19 & Flood. So to tackle such multiple emergent situations, all the resources need to be in readiness. More emphasis needs to be given to make people aware about disaster
- Preparation in advance & wide circulation of standard guidelines are very useful to deal with any disaster situation particularly the relief camp management guideline for COVID-19

**ACTIVITIES / INITIATIVES UNDERTAKEN BY ASSAM STATE DISASTER MANAGEMENT AUTHORITY (ASDMA) AT THE STATE LEVEL IN CO-ORDINATION WITH DISTRICT AUTHORITIES FOR CONTAINMENT OF COVID-19 IN ASSAM:**

**1. A State Level Empowered Committee (SLEC)**

had been constituted under the Chairmanship of Chief Secretary, Assam which took important decisions regarding Implementation of Lockdown measures, including other essential services and maintenance of Law and order situation in the State.



The Committee members constituted senior level bureaucrats from the State. The Committee implemented the important orders and instructions issued by Ministry of Home Affairs, Govt. of India from time to time regarding implementation of Lockdown, functioning of essential services, transfer of funds under State Disaster Response Fund (SDRF) to the District Disaster Management Authorities (DDMAs) in order to facilitate COVID-19 response amongst many other guidelines issued by Govt. of India from time to time. The first stakeholders meeting of the committee was held on 12<sup>th</sup> March, 2020 and later the high level

committee went to be notified as the State Level Empowered Committee (SLEC) vide notification dated 18<sup>th</sup> April,2020. The Chief Secretary, Govt. of Assam exercised the powers conferred under Disaster Management Act, 2005 and Indian Penal Code at the State level and at the District level, the same powers were conferred to the Deputy Commissioners of the District.

**2. Identification of Quarantine and Isolation**

**Centres:**

As per the directives of State Level Empowered Committee (SLEC), ASDMA directed the DDMAs to identify District wise quarantine and isolation centres. And as per the directive, the DDMAs initially identified 121 Quarantine centres and 165 isolation centres jointly with the Joint Director Health Services.

**3. Issuance of Advisories / Guidelines:**

As per directives of the High level committee chaired by Chief Secretary, Govt. of Assam, the Authority prepared advisories for different sections of the society like the city dwellers, vulnerable sections of the society like elderly people, persons with disability, retail businesses, the urban dwellers in apartment societies, the marginalized like domestic help etc. The advisories were prepared in vernacular language for greater understanding of the communities. Advisories and Standard Operating Protocols were also developed for Persons with Disabilities, Children and

Flood Relief Camps in the context of COVID-19. Guidelines were issued for operationalization of “Child Friendly Spaces” in Relief Camps while combating the dual challenge of COVID-19 and climate related hazards.

The advisory on “Home Quarantine” prepared by Ministry of Health & FW, GoI was translated into vernacular language for easy understanding of public. There were many requests received from apartment dwellers, individual households and households having Persons with disabilities and infants for advisory related to engagement of “Domestic Help”. With the easing of Lockdown and partial opening of offices and establishments people had to manage both official and domestic work therefore in public interest ASDMA prepared advisory related to

domestic help and circulated amongst the people. The advisories were approved at the highest level and communicated to the public through District Disaster Management Authorities (DDMAs) and public platforms.

**4. Development of IEC / Awareness materials:**

Awareness materials in simplest form were developed as Leaflets, banners and posters for public dissemination. The guidelines, advisories and IECs of World Health Organization (WHO) and Ministry of

The image shows two leaflets in Assamese. The left one is titled 'সংগঠিত প্ৰতিবেশীকৈ সতৰ্ক হওক, সুৰক্ষিত হওক' (Stay alert and safe in organized neighborhoods). The right one is titled 'গৃহস্থত ই বাহিৰলৈ যোৱাৰ পৰা সতৰ্ক হওক, সুৰক্ষিত হওক' (Stay alert and safe from going out of the house).

The image shows two posters in Assamese. The left one is titled 'কৰনা ভাইৰাছ সতৰ্ক হওক, সুৰক্ষিত হওক' (Stay alert and safe from Corona Virus). The right one is titled 'ভ্ৰমণৰ সময়ত সুৰক্ষিত থাকক' (Stay safe during travel).

The image shows a poster featuring a man in a white shirt and a UNICEF logo. The text in Assamese says 'সেই সকলৰ বাবে ঘৰত থাকক যি সকলে কেৱল আমাৰ সুৰক্ষাৰ বাবে ঘৰত থাকিব পৰা নাই' (For those, stay at home as only those who stay at home can save our lives).

The image shows an article titled "Audio jingles in mother tongue to spread caution". It discusses how ASDMA is using audio jingles in local languages to spread awareness about COVID-19 safety measures.

The image shows a flowchart diagram in Assamese. It starts with the question 'সংগঠিত ব্যক্তি কোন? এজন সুস্থ ব্যক্তি বিজনৰ কৰ'না ভাইৰাছ সংক্ৰমণ হোৱাৰ ঝৰণেট শংকা আছে' (Who is an organized person? A healthy person and a person with COVID-19 infection have a risk of infection). It then lists various roles and actions like 'সংগঠনকৰ্তা / আক্ৰমণ ব্যক্তিৰ দৰে (সেবিয়া)', 'সংগঠনকৰ্তা / আক্ৰমণ ব্যক্তিৰ দৰে কৰা যিকোনো ব্যক্তি', 'আক্ৰমণ ব্যক্তিৰ হাঁচি, কাহ, খুঁ, খেঁদাৰ দৰে সতৰ্কতা অহা যিকোনো ব্যক্তি', 'আক্ৰমণ ব্যক্তিৰ বাহিৰে গৈ/পৰিষ্কাৰ / স্বেচ্ছাসেৱা কৰা যিকোনো ব্যক্তি', and 'ভ্ৰমণৰ সময়ত (বাণ/বিমান/বৈকী আদি) সংগঠনকৰ্তা/ আক্ৰমণ ব্যক্তিৰ সতৰ্কতা অহা যিকোনো ব্যক্তি'.

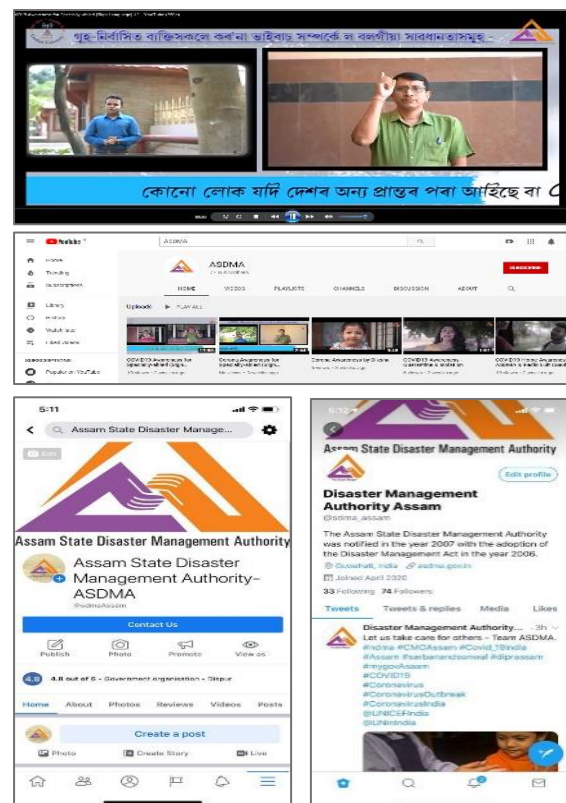
The image shows two posters in Assamese. The left one is titled 'Advisory from ASDMA on COVID-19 management in public places: 22nd April, 2020'. The right one is titled 'সতৰ্ক হওক, সুৰক্ষিত হওক!' (Stay alert and safe!).

Health & FW, Govt. of India were translated into vernacular language and IECs were developed. The IECs and advisories were later transformed into audio-visual modes of communication for greater understanding of the public. The ASDMA collaborated with Community radio platforms for preparation of “Community Videos” and facilitate risk communication. Community Radio- Radio Luit (Gauhati University) collaborated with ASDMA to prepare some short videos on “Home Quarantine advisories”, “Videos on sign Language for hearing impaired, Deaf & Dumb”. ASDMA also collaborated with Commissioner for Persons with Disabilities, Social Welfare Department for arranging interpreters and conversion of advisories/ SOPs for PwD into braille. Radio Brahmaputra which is located in Dibrugarh, Assam has a target audience which comprises of diverse communities having different dialects like Sadri (Tea Garden community), Bengali, Bodo, Mishing, Rabha, Hajong, Deuri, Tiwa, Bhatiali etc. ASDMA collaborated with Radio Brahmaputra to develop audio-jingles for risk communication in different dialects.

## 5. Risk Communication through Digital platforms / Media:

Assam State Disaster Management Authority (ASDMA) disseminated the audio-visuals through different digital platforms of ASDMA like social media-

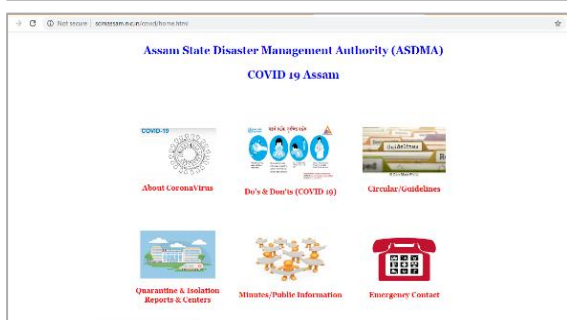
Facebook page, twitter, whatsapp groups, Youtube, Instagram and LinkedIn including E-News clips and social media handles of UNICEF Assam, G-Plus etc. ASDMA partnered with UNICEF and G-Plus for dissemination of information and IECs through creative media. ASDMA also disseminated information through newspapers, local television channels like Pratidin Times, DY-365, News Live, Prag News, News 18, Assam talks etc. including Doordarshan and FM Radio Channels like RED-FM, All India Radio etc. ASDMA also collaborated with My Gov, Assam, Public Relation Office of the Chief Ministers' Secretariat to produce short videos and print creatives on COVID-19 for dissemination through social and various other media.



## 6. Digital and Print Repository of Advisories /

### Govt. of Assam and Govt. of India orders:

ASDMA constituted a “Content Management” team and “Data Management & Reporting Team” to maintain and manage all advisories, circulars and orders related to COVID-19 in the print as well as digital platform. Accordingly the “Content Management” team maintained all circulars/ advisories and Govt. orders received at ASDMA, in COVID-19 Dashboard and Folders. A dashboard has been prepared in the ASDMA website <http://sdmassam.nic.in/covid/home.html> which maintains all relevant Minutes of meetings, Circular and guidelines, Emergency contact, IEC on Do's and Don'ts, Details of Quarantine and Isolation Centres etc. The repository is aimed to disseminate updated information to general public regarding measures



taken by State Govt. for containment of the COVID-19 outbreak.

## 7. E-Help initiative:

Common Services Centres Scheme (CSCs) Assam and Assam State Disaster Management Authority (ASDMA) envisaged a joint strategy for reaching out to the vulnerable section across Assam with ICT lease model and cater essential services like Banking services, Information dissemination, e-Pashu Chikitsa, e-Awareness, e-training etc. in the wake of COVID-19. Salient features of this e-Help initiative are as follows:



- It is a joint venture of CSC, SPV Assam and ASDMA to fight against COVID-19
- It is a convergence efforts of 6000+ CSCs and 33 DDMA's
- Dissemination of advisories' and other vital information through direct and indirect modes (live webcasting, call, SMS, WhatsApp etc.).
- Continuity of non-medical services for citizens through telemedicine consultation/video based interaction.
- Health care of farmer's livestock through e-Pashu Chikitsa (video based interaction)
- Disbursement of DBT under Garib Kalyan Scheme and other banking services through CSE Bank Correspondence and DigiPay.
- Potential use of CSCs as stocking and distribution points of essential commodities.

#### 8. **Community volunteer mobilization:**

Assam State Disaster Management Authority (ASDMA) created a cadre of volunteers in the line of NDMA guidelines (using existing cadre of ASLRM, NULM, Aapada Mitra, Indian Red Cross Society-ASB, NYKS, NSS, NCC etc.). The volunteers were named as "Pratirodhi Bondhus". Village/ ward wise volunteers from community cadres of ASRLM & NULM along with other groups/Indian Red Cross Society/NGOs/NSS/NCC/NYK etc. enrolled online to

support DDMA's in non-medical activities of COVID-19 response. Approximately 16000+ volunteers enrolled for "Pratirodhi Bondhu" to support DDMA and facilitate citizen centric services. "Pratirodhi Bondhu" s are providing psychological and emotional support to elderly and children for boosting their moral keeping social distance as part of COVID response, promoting social distancing and hygiene, helping district administration to develop coordination, reporting and feedback mechanism through community reach-out during lock-down and afterward. They have emerged as additional voluntary manpower support for non-medical activities at district, revenue circle and village level. They are mainly engaged in Banks, Quarantine centres, public places, parking lots, market places



where they sensitize people on social distancing norms and also carry out voluntary services like poster or banner fixing related to COVID-19, Temperature monitoring, sanitizing offices, bank., Hand sanitizing etc.

**‘Pratirodhi Bondhu’** act as volunteers for sensitizing people on health & hygiene, social distancing as preventive measures for containment of COVID-19.

Stress has emerged as a new challenge in the time of lockdowns and prohibitory orders, which has seriously affected mental health of people due to frustration. Moreover, fear of financial insecurity has hurt people and has brought further psychological impacts on an individual and family as a whole.

#### **9. NGO / CSO co-ordination:**

ASDMA and District Disaster Management Authority (DDMA) collaborated with NGOs/ CSOs for strengthening efforts of COVID-19. The NGO / Civil Society Organizations have been working closely with the DDMA to provide support in relief activities related to COVID-19. ASDMA coordinated closely with IAG Assam (an apex body of all NGOs, International NGOs, CSOs of Assam) with representatives from Action Aid, Aid-et-Action, Piramal Health, UNICEF etc. for taking measures in the districts to contain the spread of COVID-19. NGOs/CSOs are actively engaged in relief

distribution, Awareness Generation (Door to door visit, public miking, leaflet distribution etc.), Food Distribution, Sanitation item distribution, Psychosocial support, sanitization programme, feeding stray animals, Shelter arrangements for migrant workers, street & destitute etc. The State has nominated one State Nodal Officer and District Nodal Officer in all 33 districts of Assam to co-ordinate with the NGO/CSOs under NGO Darpan portal of Niti Aayog. At least 293 NGOs/CSOs are co-ordinating distribution of relief to the people in association with the District Disaster Management Authorities (DDMA) s.

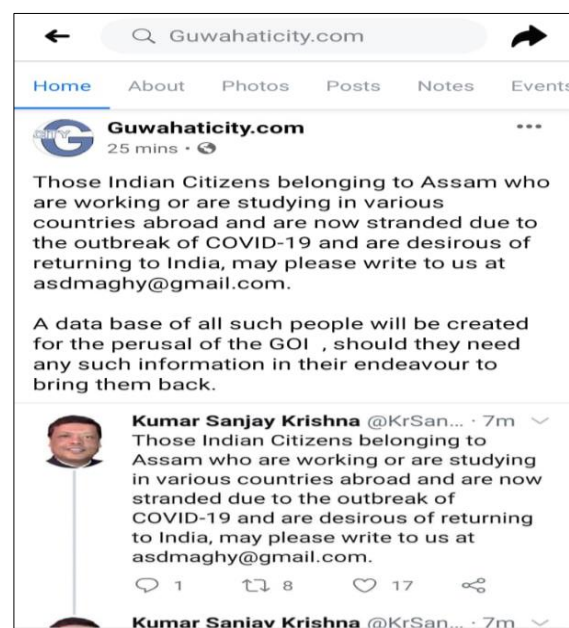


#### **10. Co-ordination with Assam Bhawan, State Disaster Management Authorities etc. in other States of India and support to People of Assam stranded within and outside the State:**

An amount of Rs.10 Lakhs was disbursed to the Resident Commissioners of Assam Bhawan, Delhi, Kolkata, Mumbai and Chennai for providing initial necessary support to the stranded people of Assam in respective states. Assam State Disaster Management Authority (ASDMA) also co-ordinated with Assam Bhawan to give psycho-social support to the stranded migrants on case to case basis. The people of Assam stranded in different parts of India, other than the States mentioned above, were given settlement in respective State after consultation and co-ordination with the District Administration and State Disaster Management Authority (SDMA) of the respective State.

The Authority co-ordinated to bring back dead bodies of people of Assam who died in other States due to unfortunate incidences like (suicide, heart attack etc. including other Non-COVID death cases). The Authority also supported to send back dead body of a worker to Bihar. The Authority co-ordinated with the Ministry of External Affairs, Govt. of India and High Commissioner, Indian Embassy of Bangladesh to provide ration to 7 students from Assam stranded in Bangladesh. The ASDMA co-ordinated with the other State Authorities to provide support and relief to the migrated people stranded in Assam from outside the State. As per directive issued by the Chief Secretary, Govt. of Assam, ASDMA also collected details of the

Indian citizens belonging to Assam, who are working or are studying in various countries abroad and are stranded due to the outbreak of COVID-19 and are willing to return back to India. A total no. of 1775 applicants have sent written request from outside the country from 24<sup>th</sup> April, 2020 till 3<sup>rd</sup> May, 2020 and The District Disaster Management Authorities (DDMA) set up relief camps in respective Districts for the migrant workers and needy people to provide





shelter, food and other basic amenities. The DDMA also provided relief materials to the needy people through mobile vans. The DDMA collaborated with NGO and CBOs to provide relief materials to the needy people of remote areas.

#### **11. Support Provided to Stranded Migrant**

##### **Population and other needy persons:**

NDMA in consultation with MHA prepared a reporting format for collection of details of support provided to Stranded Migrant Population and other needy persons to mitigate the spread of COVID-19 and shared the same to all states for daily reporting. Accordingly all the 33 districts of Assam started reporting on daily basis as per the format received from NDMA to the State H.Q and the same was submitted to NDMA and further to MHA. In this format the districts reported about the support extended by the District Administration, NGOs and also the owner of the industries including some individuals towards the stranded migrants and to the needy persons and also to the workers who have been working in industries. The Districts reported information regarding accommodation and food provided to these stranded & needy people. The Data regarding stranded migrant population & needy person have been collected from 2nd April, 2020 onwards till 3<sup>rd</sup>

September, 2020 and was regularly submitted to NDMA.

The main objective of the collected report was to keep record of the kind of support extended by District Administration or NGOs/CSOs or PSUs to those people who had been stranded due to lockdown, mainly people belonging to other states. The support was provided by giving those stranded persons with shelter and food. And also there are various industries where a large number of people are working as daily wage earners and maximum of them belonged to other states. Due to lockdown the industries got shutdown the workers working in those industries got stranded. The employers of the industries had provided food and shelter for their stranded workers during the lockdown period. District Administration extended full support towards travel of those migrant workers to their native states.

The format submitted to NDMA and cumulative table of the data submitted is as follows:

Name of District	Number of active Relief camps and shelters		Number of persons housed in Relief camps and Shelters		Number of Food camps		Number of persons given food		Number of Workers given shelter and food by employers/in industry where they are working	Remarks / Additional information
	Govt.	NGO/PSU /CSO	Govt.	NGO/PSU /CSO	Govt.	NGO/PSU/CSO	Govt.	NGO/PSU/CSO		

**District wise number of relief camps opened for migrant workers and number of migrant workers provided food/ shelter for COVID-19. (Cumulative table of information submitted to NDMA)**

Sl. No.	District	Relief Camp set up for migrant workers	No of migrant workers provided food/ shelter
1	Baksa	0	0
2	Barpeta	0	212
3	Biswanath	4	202
4	Bongaigaon	4	88
5	Cachar	77	15370
6	Charaideo	1	48
7	Chirang	2	52
8	Darrang	95 (food camps)	17834
9	Dhemaji	2	23
10	Dhubri	0	0
11	Dibrugarh	0	668
12	Dima-Hasao	0	3600 (Coal mine workers at Umrangshoo)
13	Goalpara	0	40
14	Golaghat	3	126
15	Hailakandi	0	404
16	Hojai	0	0
17	Jorhat	4	188
18	Kamrup Metro	4	95
19	Kamrup	4	1680
20	Karbi Anglong (East)	2	229
21	Karbi Anglong (W)	0	0
22	Karimganj	0	5319
23	Kokrajhar	7	506
24	Lakhimpur	6	378
25	Majuli	0	95
26	Morigaon	1	2228
27	Nagaon	2	527
28	Nalbari	0	1026
29	Sivasagar	0	365
30	Sonitpur	0	705
31	South Salmara	0	253
32	Tinsukia	0	2841
33	Udalguri	2	22
	<b>Total</b>	<b>220</b>	<b>55124</b>

## **12. Initiatives under Corporate Social**

### **Responsibility (CSR) :**

Assam State Disaster Management Authority also received items and funds under Corporate Social Responsibility (CSR) during COVID-19 pandemic from the following organizations for management of COVID-19 vis. a vis. flood emergency:

- Huhtamaki Pvt. Limited, Kamrup
- Apollo Hospital, Guwahati
- Coal India Ltd., Kolkata
- Hindustan Unilever Limited

ASDMA received masks, gloves, soaps for distribution in quarantine and relief centres and also received funds from the above organizations for management of COVID-19 vis. a vis. flood. ASDMA is also in the process of procuring river ambulances from amount received under CSR fund.

Sl. No.	Organization	Amount (In Rs.)	Items received (No.s)
1.	Huhtamaki Pvt. Limited, Kamrup	35032	Masks
2.	Apollo Hospital, Guwahati	800000	Masks, Gloves
3.	Coal India Ltd., Kolkata	1000000	-----
4.	Hindustan Unilever Limited	-----	Soaps (150000)

**SOME GLIMPSES OF COVID-19 MANAGEMENT BY DISTRICT ADMINISTRATION**



Aapda Mitra Volunteers carrying dead body of COVID-19 infected person in Cachar District



Cooked Food Distribution to stranded persons by Pratirodhi Bandhu volunteers in Tinisukia District



Containment Zone prohibitory orders in Hailakandi District



Installation of handwashing points at strategic public places in Kamrup Metro District by DDMA



Cremation of COVID-19 infected person by District Administration in Hojai District



Social Distancing circles marked by District Administration in Sonitpur District



Free Home Delivery of Vegetables and fruits in municipal areas during lockdown by District Administration in Dhubri District



Extensive public miking of important advisories by District Administration in Nalbari District



Mask preparation in Hailakandi District



Strict Enforcement of Home Quarantine in Sivasagar District



Sanitization of public places by personnel of Fire & Emergency Services, Municipality etc. in Lakhimpur District



Containment Zone prohibitory orders in South Salmara District