

COVIDEXTERS

Best Practices During COVID-19



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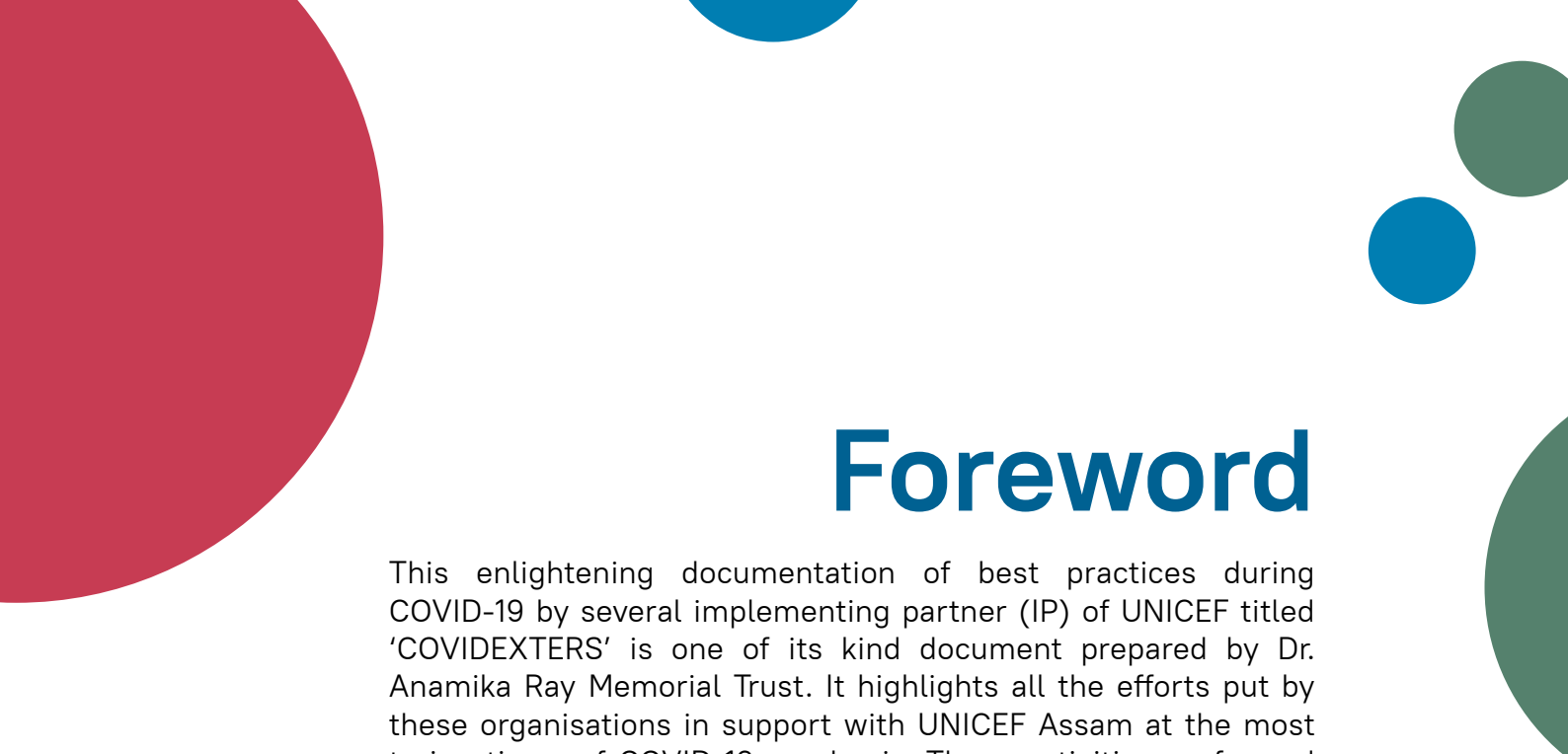
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Content

Foreword

Preface: Voices from the Field

ABITA's Pandemic Response	1
Bharatiya Chah Parishad's ANGANA	13
BRIDGE Training for Frontline Workers	26
COVID Initiatives – Arunachal Pradesh	36
COVID Initiatives – Nagaland	46
Folk Art for Change – Tezpur University	56
SBCC Activities – Radio Brahmaputra	67



Foreword

This enlightening documentation of best practices during COVID-19 by several implementing partner (IP) of UNICEF titled 'COVIDEXTERS' is one of its kind document prepared by Dr. Anamika Ray Memorial Trust. It highlights all the efforts put by these organisations in support with UNICEF Assam at the most trying times of COVID-19 pandemic. These activities performed at the ground penetrates into the struggles faced by various organisations with the most innovative strategies possible from one's side. Reaching to the last person in the queue has almost been made possible with the support of UNICEF Assam during the difficult situation of this pandemic. Several activities/interventions with certain innovations and adaptations were the most output/outcome-based performances that was successful in establishing an inter-faith relationship with the communities possible. And this was made possible for the encouragement made by UNICEF Assam in grooming the facilitators of the partner organisations into most charismatic leadership. This is not our words but a return gift for our hard work that we received from our implementing partners; and at the most, is witnessed by the story telling documentation of all their activities shared by the beneficiaries. This is a well-designed, enjoyable while reading document with the views from the ground shared by multiple beneficiaries of the activities performed by each of all the seven partner organisations.

We are delightful and at the same time elated to see such a wonderful capture of the activities that needs to be preserved for the next generation. It is a story-telling documentation that will take the readers from the desk to the ground, help them confront the beneficiaries, assess the strategies and innovations and realise the adaptation power generated by these organisations at the most difficult time and bring them back to the desk enlightened. We wholeheartedly appreciate the team of Dr. Anamika Ray Memorial Trust to put their every effort in making the documentation most attractive, apart from being innovative with their methodologies and structuring the entire framework of 'COVIDEXTERS' scientifically.

Dr Madhulika Jonathan
Chief of Field Office, UNICEF, Assam

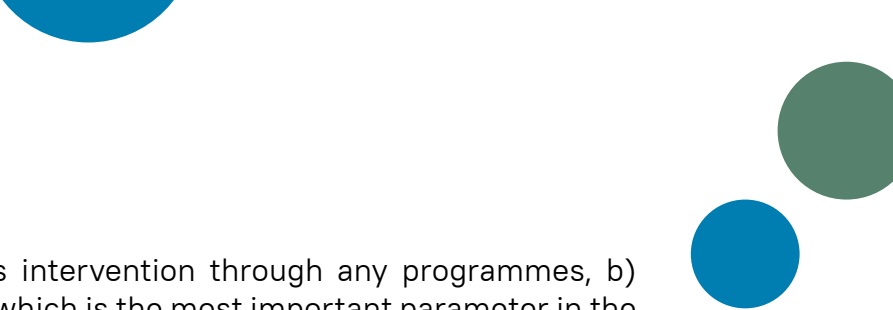


Preface

This documentation of best practices of various organisations – both government and non-government with support of UNICEF during COVID-19 crisis – titled ‘COVIDEXTERS’, is an extensive and systematic research work accomplished by the research team of Dr. Anamika Ray Memorial Trust (ARMT). While undertaking the research activities for this documentation, the ARMT team was conscious about making the document readable for the targeted audiences. Unlike many other documents where only the activities are mentioned and described, this is an exclusive reading document on best practices based on scientific parameters identified by the team. Besides, the most highlighting point about this document is the addition of success stories shared by each of the partner organizations and their beneficiaries from the ground. This makes the piece of work more intense, relevant and enjoyable.

There were so many activities with or without evidence of the organization that it made the entire process difficult in choosing the best practices among them. So, this work completely based on research and analysis was neither a shot in the dark nor did the idea arrive out of the blue. A lot of energy was put into preparation of this exhaustive document – starting right from the identification of parameters, giving structure to the text, telling the best story out of many stories for each organization, putting facts and information together with shared experiences of beneficiaries and partners, to compilation of the document with attractive but illustrative layout embedded with selected eye-pleasing but realistic photographs, etc. as evidences.

The ARMT research team put in extensive effort in studying lots of literature on COVID-19 success stories during the most difficult situation of pandemic. After going through these stories, the team reached a stage of decision making to identify four parameters in order to analyse the best practices of organisations during the pandemic. The identified parameters for the best practices during COVID-19 were – a) Activities/Interventions that list and explain the activities of the organization in its thrust area



during the period, and its intervention through any programmes, b) Adaptations/Innovations, which is the most important parameter in the context of difficult situation like the pandemic that measures whether organizations adapted established practices or used innovative ideas to deal with drastically changed situation on ground, c) Output/Outcome, with Outcome of course difficult to assess for now; but the immediate beneficiaries are contacted upon to know their stories regarding the initiative(s) of the organization, and d) Evidences that prove the truth of the activities the organisations claim to have carried out during COVID-19 in the form of photographs, videos shared on social media platforms, as well as their social media/website links. Based on these parameters, the team has developed a set of five research questions e-mailed to the organisations in the first stage. In the second stage, the ARMT research team contacted all the six prescribed organisations – 1) Assam Branch Indian Tea Association (ABITA), 2) Bharatiya Chah Parishad (BCP), 3) BRIDGE training for FLWs, 4) COVID initiative – Arunachal state, 5) COVID initiative – Nagaland state, 6) Folklore initiative of Tezpur University, and 7) SBCC activities of Radio Brahmaputra, discussed with them for over two months and identified the partners and beneficiaries of these activities. At least 10 designated individuals as partners/beneficiaries from each organisation, including the Resource Person, were contacted. The team conducted in-depth interviews and focused group discussion among the partners/beneficiaries/collaborators through online mode of communication, which were later transcribed. They were also responsible for initial data collection about the organisations and later formatting the data for use in profiling of the organisations. The informative material or the handouts sent by each of the organisations through mail in response to the research questions on the basis of four parameters were studied, discussed and analysed. The information obtained was cross-checked with the information collected through in-depth interviews and focused group discussions. Then an investigation was carried out through the evidences provided. All the photographs, videos, reports, social media links were checked as per the record of the activities. The team thereafter undertook a multi-layered intervention on editorial part. The partners/beneficiaries' stories were undertaken by a designated team having journalistic experience of field reporting, which then followed a gatekeeping model for the documentation. The documentation of facts and figures of the best practices were framed and analysed into three stages before it went to the final stage of layout. The document derived, therefore, is a result of rigorous step by step process of research and evaluation, which has only been possible due to the ample support provided by UNICEF Assam. Prior to the engagement with UNICEF, the Trust in association with the National Council for Science & Technology Communication (NCSTC),

DST, Government of India prepared an online multimedia resource guide on A-to-Z of COVID-19 titled 'COVID Katha – A Multimedia Guide for Mass Awareness' which eventually became a national document. It was formally released by Union Minister of Health and Family Welfare Dr. Harsha Vardhan on May 3, 2020. ARMT also released a book titled 'Break the Fake Toons' based on its own month-long campaign titled 'CheckTheFake on Covid-19' that focused on combating INFODEMIC, the pandemic of information disorder. The Trust didn't stop there, it further came up with a document titled 'MOTIVATION' with the objective to create awareness among more than 3 crore students of higher education across the country about the mental toll due to confinement during the pandemic, as well as encouraging them to adopt and use various coping strategies.

The ARMT is also privileged to partner with UNICEF in other three documents before the completion of 'COVIDEXTERS' – namely, 'Beyond COVID', a multimedia interactive document on New Normal for Urban Population, 'Kiting High', a comic book on New Normal for Children (both in English and Assamese) and '4 Puppet Videos on Covid Awareness'. On behalf of the Dr. Anamika Ray Memorial Trust, I extend my sincere gratitude to Dr. Madhulika Jonathan, Chief of Field Office, UNICEF Assam for her kind support in accomplishment of this project. This work would not be possible without the guidance and coordination of Mr. Sureshbhai Parmar, C4D Officer and Dr. Gitali Kakati, State C4D Consultant, UNICEF Assam.

In giving concrete shape to this document, ARMT's Vice Chairperson Mr. Rajat Baran Mahanta, formerly Joint Secretary, Government of Assam, guided the team. I am grateful to the entire team of Mr. Raman Bora, Dr. Anupa Lahkar Goswami, Mr. Raja Das, Ms. Himashree Deka and Jennifer Shahin Hussain for their valuable efforts in development of beautiful features, stories and profiling of the organisations. I also extend my heartfelt thanks to Ms. Mehjabin Rahman, Ms. Priyanka Deka and Ms. Bisakha Bharadwaj for their initial role in data collection and formatting for preparation of this document and Mr. Pallab Bharali for his assistance in production. I am thankful to the members of the Board of Trustees of Dr. Anamika Ray Memorial Trust, especially the Chairperson Prof. M C Sarma and the Treasurer Mr. Bhaskar Jyoti Bhuyan for their encouragement.

Dr. Ankuran Dutta
Managing Trustee

Dr. Anamika Ray Memorial Trust

30 January, 2021



COVIDEXTERS

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ABITA's

Pandemic Response



Adolescent girls in vanguard

With entire India going into stringent lockdown mode as COVID-19 loomed by March 2020, the outlook for tea garden areas in Assam looked daunting. The novel coronavirus had to be stopped in its tracks before it struck the tea community. Long beset with a host of socio-economic challenges, the tea labour lines appeared highly vulnerable. Yet as Assam weathered the first wave of the pandemic, the tea gardens came out relatively unscathed. The groundwork over long years by Assam Branch Indian Tea Association (ABITA) in partnership with UNICEF and other entities paid off, along with initiatives across a broad front during lockdown and unlock phases. Among the foot soldiers, adolescent girls were in the vanguard. Their drive and commitment can be gauged from letters of appreciation issued to adolescent girls groups of Namroop, Sealkotee and Kenduguri tea estates by the concerned district administration.

"When we could not even get out of our homes, there was no way our girls' club could meet to play its proactive role.



But people were using their phones more than ever during lockdown, so some of us created videos to raise awareness on various aspects of COVID-19,” said Vandana Urang, an adolescent girls group member, Namroop tea estate. In normal times, her club during weekly meetings dealt with not just personal problems of members, but would intervene whenever there were cases of child labour, marriage, lack of safety or other ills. Hamstrung during the lockdown, the girls’ club was back in the fray as soon as unlock began. “Once we could go out, we started by cleaning up the labour line areas. The safety messages of wearing mask, washing hands and keeping distance which had been drilled into us by ABITA and UNICEF, we began to pass on to others,” said Vandana. She did so well she got a letter of appreciation from the Dibrugarh district administration; her impassioned video about the woes of those unable to access online teaching or benefit from it – was displayed for 24 hours in Assam Chief Minister’s official Twitter account.

“The teacher at the blackboard I can understand, but I cannot say the same about lessons over phone. Online classes during lockdown were tough for me,” rued Niharika Lohar, adolescent girls group member, Sessa tea estate. Nevertheless, the Class X student kept up with lessons at home, but at other times, she found work to occupy her. There was the home courtyard to be kept clean, the kitchen garden to be worked over, and plastic waste to be converted into pen stands, artificial flowers and other useful things. Such skills Niharika, Vandana and other adolescent girls had picked up at various training programmes conducted by ABITA. While some essential tasks in the tea gardens had to be continued for survival of both gardens and workers’ families, ABITA functionaries began to marshal adolescent girls’ groups to install handwashing units in front of homes in the labour lines. These units consisted of a washbasin fitted with metal water container, soap stand and outlet pipe; bigger units were placed at entry points of the labour lines. The girls further pitched in to make and distribute masks. “We used sewing machines at the tailoring unit to make masks. These were

priced at Rs 5 when sent outside. Within our garden, we distributed these for free among poor people," said Niharika.

Nutrition to raise immunity

While making people in tea gardens aware of the new norms to stay safe from the pandemic, ABITA also had to drive home the importance of nutrition in raising immunity levels. "We were taught to prepare food suitable for children, and how mother's milk benefit babies. When I now cook for my one and half year old son, I take care to add dal, vegetables, leafy greens and a pinch of salt to powdered rice meals," said Akashi Rajowar, a nursing mother from Nahortoli tea estate. Another lactating mother with an eleven month baby, Kunti Karmakar from Borborooah tea estate, said: "I learnt to make khichdi from rice and pulses, adding to it potatoes, carrots and the like. To give the baby frequent change of taste, I also learnt to make sweet dishes like suji and payas."

For community mobilisers like Nayanmoni Gogoi Chetia working for ABITA, regular duties would involve visits to primary schools, anganwadi centers, labour line households and other places in tea gardens. When COVID-19 lockdown at first disrupted their work, they utilised the time in the confines of their home by making audio/video messages and circulating these among the community through social media. The messages were about staying safe by making appropriate behaviour changes, looking after physical and mental health, arranging playtime for children at home, preparing nutritious food, among others. As lockdown was gradually relaxed, training sessions were held to reinforce these messages. "Our trainers showed how to pound rice at home, store it safely, prepare meals from it to nourish children, make it nutritious and tasty by adding vegetables, herbs and ghee. They gave tips, like making soup from herbs and regularly adding pulses for protein and sugar for glucose. The idea was to use locally available sources of food," said Ms Chetia.

With markets closed during lockdown, accessing foodstuff was a problem. Supply of essentials like rice was maintained through government outlets. Some

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Once we could go out, we started by cleaning up the labour line areas. The safety messages of wearing mask, washing hands and keeping distance which had been drilled into us by ABITA and UNICEF, we began to pass on to others.

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Vandana Urang
Adolescent Girls Group
Member, Namroop Tea
Estate

amount of locally grown produce eased the situation. Many tea community households relied on kitchen gardens, another ABITA focus area. "They had taught us about food value and balanced diet, how to prepare good food hygienically, to wash and cut vegetables before cooking, to keep utensils clean. We learnt to think in colour codes of 'white', 'yellow' and 'green' foods, so as not to leave out carbohydrates, proteins, vitamins or minerals from our meals," said Vandana Urang. Creating awareness on nutrition also helped Niharika Lohar, who worked with her parents at their kitchen garden. "We had planted a variety of seeds last year. It really helped when vegetables and herbs came up during the lockdown," she quipped.

Multi-pronged prevention strategy

With little likelihood of vaccines & medicines against the novel coronavirus in the short term, the tea community had to be made aware of the nature of the threat and how to stay safe from it. In the early days of lockdown, it was hard for ABITA and partners to mount an effective multi-pronged response. "With everyone ordered to stay indoors, it wasn't possible to visit tea gardens and deal with situations on the ground. The unlock phase was hardly easier, for Covid cases would crop up and entire labour lines get sealed off with red flags as containment zones. Programmes would be called off at the last minute whenever garden management personnel fell sick," recalled Muktikam Bordoloi, programme manager, ABITA. To organise and create awareness about the menace, the stakeholders formed WhatsApp groups and began posting videos and animated clips. This was followed by initiatives which helped prevent SARS-CoV-2 virus from making deep inroads in tea gardens.

"Barely 2 percent of the tea workforce was affected. Our efforts to raise awareness about the pandemic and instill new norms paid off as these were accepted and adopted by the community," said Mr. Bordoloi. With support from UNICEF, state government agencies, NGOs and CBOs, ABITA pressed ahead



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We used sewing machines at the tailoring unit to make masks. These were priced at Rs 5 when sent outside. Within our garden, we distributed these for free among poor people

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Niharika Lohar
Adolescent Girls Group
Member, Sessa Tea
Estate

with activities under WASH (washing, sanitation & hygiene) and IPC (infection prevention & control). Messages were spread with loudspeakers (miking), posters, banners and leaflets; tea garden school teachers, mothers groups, girls clubs and labour line watchmen were all involved in informing the community and warning against rumours and fake news. Adolescent girls started visiting homes to install mobile handwashing units at the entrance. People at the settlements, factories and institutional facilities were taught to stay safe by wearing mask, keeping distance and maintaining hygiene. Disinfection was carried out in all 159 tea gardens; solid waste management was promoted at individual household level.

Menstrual hygiene received greater focus during lockdown, as women found it difficult to access sanitary pads. Under an initiative by Indian Tea Association with Zorg Van DeZaak Foundation of The Netherlands, small units were set up in some tea gardens to make and provide low cost sanitary pads. Tea garden managements, on being approached, took steps to stock sanitary pads in health outlets and grocery shops within garden periphery. ABITA trainers taught girls how to use cotton cloth and keep it clean for menstrual purposes. "Menstrual Hygiene Day was observed on 28 May, the entire week was spent in spreading awareness. Adolescent girls took part in the Red Dot challenge, sporting red dots on their right or left hand palms – so as to bust superstitions about menstruation and convince people there is nothing to be ashamed of and keep secret this natural bodily process," said Mr. Bordoloi.

Nutrition was promoted by targeting pregnant women, nursing mothers, children below two years age and adolescent girls. Supply of iron and folic acid (IFA) tablet strips was strengthened during lockdown; during May-June 2020 and thereafter during 1-15 August, studies carried out on IFA supplementation status showed 136 out of 159 tea estates covered under the augmented programme, the lion's share of work done by Anganwadi workers (AWWs). The month-long national nutrition programme was observed by ABITA and UNICEF





Assam as Rashtriya Poshan Maah in the month of September 2020. Considering the importance of nutrition in pandemic times, this effort was focused more on children suffering severe acute malnutrition (SAM). Camps were held for rigorous screening, at the end of which 4.84 percent children in the tea gardens were identified as SAM cases; they were targeted for follow-up services from the Health and ICDS departments. Nutrition efforts picked up further with resumption of programmes related to village health and nutrition day (VHND) observed every month.

Efforts were made to sensitize the community on the importance of first 1,000 days of the child in its overall development. Home visits were paid to talk to pregnant women and lactating mothers on exclusive breastfeeding, complementary feeding, diet diversity and hygienic practices. Need for early initiation of breastfeeding, do's & don'ts and proper technique for breastfeeding while dispelling myths/misconceptions associated with it, tips to deal with breastfeeding problems – all these and more were highlighted. ABITA training sessions also equipped mothers with knowhow of complementary feeding when their child's nutritional needs would no longer be wholly met by mother's milk. This transition may come anytime when the baby is 6-24 months old, so timely initiation of complementary feeding, the components (quantity, quality, frequency,

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We were taught to prepare food suitable for children, and how mother's milk benefit babies. When I now cook for my one and half year old son, I take care to add dal, vegetables, leafy greens and a pinch of salt to powdered rice meals
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Akashi Rajowar
Nursing Mother,
Nahortoli Tea Estate

consistency and diversity) of family meals which ought to be fed to the child – these and other information proved useful for mothers. Trainers showed them how to cut, mix and prepare food ingredients; to make use of locally grown food; benefits of green leafy vegetables, iron-rich food, iodized salt and lemon; the importance of safe drinking water, etc.

There was encouraging response from mothers and adolescent girls to tree planting and growing kitchen gardens with vermicompost pits. ABITA programmes under these heads were not only continued during the pandemic, but in fact received greater impetus. As part of activities to observe World Environment Day on June 5, adolescent group members planted over 1,000 iron-rich fruit saplings in their home compounds like mango, guava, jackfruit, blackberry, olive and amla. During Poshan Maah in September 2020, over 1,800 mothers planted more than 2,000 saplings of banana, mango, guava, jackfruit, drumstick and olive. Nearly 250 kitchen gardens were newly set up by adolescent girl groups; overall, they have developed 931 kitchen gardens, and have received enthusiastic support from their families. Disruption of education due to pandemic being a major concern for stakeholders, ABITA pushed for remedial classes with adolescent girl groups again leading

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I learnt to make kh-ichdi from rice and pulses, adding to it potatoes, carrots and the like. To give the baby frequent change of taste, I also learnt to make sweet dishes like suji and payas

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Kunti Karmakar
Nursing Mother
Borborooah Tea Estate





the efforts. The managements of two tea gardens provided internet connection for online classes; in many other gardens, adolescent girls helped organise classes for primary school students. There was much interest in accessing textbooks as well as educational apps and YouTube learning videos. Another vital aspect was mental health issues among children and adolescents brought on by lockdown. “From the beginning when we stakeholders organised on WhatsApp platform, we shared videos collected from different sources. How to stave off depression and suicidal thoughts, keep up with lessons, engage in constructive activities – these and other pandemic related issues were addressed by the instructional videos,” stated Mr. Bordoloi.

Formed in 1889, Assam Branch Indian Tea Association (ABITA) represents the collective interests of its members and advises tea estate managements on various matters excluding marketing and research. With three zonal offices at Dibrugarh, Jorhat and Tezpur and head office at Guwahati, ABITA has a number of flagship projects to empower its workforce and improve their quality of life. It’s partnership with UNICEF began in 2000 with interventions in education, crèche development and nutrition. These expanded and diversified into more structured intervention to promote health, nutrition, sanitation, child protection & child rights in the tea community. By focusing on adolescents, women and young children; reducing inequities and inequalities based on gender, region and ethnicity; and strengthening its delivery mechanisms – ABITA aims to improve the overall social status of the tea community.

Activities/ Interventions

■ All 159 tea gardens covered by ABITA disinfected as important part of infection prevention control activities.

■ WhatsApp groups created to circulate large number of audio-visual messages for mental health support during lockdown; virtual training conducted for adolescent girl volunteers

■ Widespread awareness created on mask wearing, hand washing, physical distancing and hygiene

■ Nutrition awareness activities strengthened, including breastfeeding and diet diversity for infants; kitchen garden for green leafy vegetables & herbs; fruit tree planting; local sourcing of food; iron and folic acid supplementation; monthly village health and nutrition day (VHND) programmes continued; training of ASHA, Anganwadi and Creche workers for nutrition support

■ More than 2,000 fruit tree saplings planted by mothers during Poshan month, over 1,000 saplings planted by adolescent girls on World Environment Day on June 5, over 250 new kitchen gardens started by adolescent girls to raise the overall count to 931

■ Solid waste management practices widely promoted and implemented

■ More home visits paid to pregnant women and lactating mothers as part of support programmes

■ Identification and tracking of children suffering from severe acute malnutrition; 4.84% of children identified as SAM in tea gardens

■ Adolescent groups strengthened by conducting sessions on prevention & control of COVID-19, domestic violence & alcoholism, good touch & bad

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Our trainers showed how to pound rice at home, store it safely, prepare meals from it to nourish children, make it nutritious and tasty by adding vegetables, herbs and ghee. They gave tips, like making soup from herbs and regularly adding pulses for protein and sugar for glucose. The idea was to use locally available sources of food //

Nayanmoni Gogoi Chetia
Community Mobiliser
working with ABITA





touch, importance of girl child, prevention of child marriage & pregnancy, importance of education & reducing dropouts, inter-gender & inter-generation dialogues, social protection schemes

Continuation of children's education with the help of adolescent groups, seeking network support for online lessons from tea garden managements

Holding life skills training in two phases for adolescent boys and girls, covering topics like problem solving, decision making, leadership, communication skills, negotiating for rights, power relations, financial planning, sexual & reproductive health, sexual violence & abuse, HIV & AIDS risk behavior etc.

Arranging coaching classes for Class X students sitting for HSLC examination in 2021

Financial inclusion camps organised in September 2020 to help tea garden students open bank accounts

Adaptations/Innovations



Adolescents, mostly girls, were motivated to work as 'Corona Warriors' in the tea community. Treated as peer leaders, they worked hard to spread awareness about safe practices and new norms. They also participated eagerly in tree planting, kitchen garden, nutrition and education programmes

Involving teachers, mothers' clubs and line chowkidars for dissemination of awareness messages and warning people against fake news/rumours

Stress on nutrition, diet diversity, local food sources and growing own food helped to mitigate supply disruptions during lockdown and boost immunity

Mobile handwashing units installed in front of individual households, masks and physical distancing enforced in settlements, factories and institutional

Emphasis on menstrual hygiene by providing training on reusable cloth and making of low cost sanitary pads was a big help for women during lockdown

Acceptance of behaviour change messages by the tea community ensured their effective adoption

Output/Outcome

Despite the acute vulnerability of tea garden areas to COVID-19, barely 2 percent of labour force affected.

Broad awareness created in tea community about the pandemic, desirable social & behavioral change affected in terms of safe practices

Nutritional outcome sustained during pandemic, which was vital to keep bodily immunity strong against the virus

Fillip to girl empowerment as adolescent girls performed well in awareness building, as well as hygiene, nutrition, environment protection and education efforts



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From the beginning when we stakeholders organised on WhatsApp platform, we shared videos collected from different sources. How to stave off depression and suicidal thoughts, keep up with lessons, engage in constructive activities – these and other pandemic related issues were addressed by the instructional videos... Barely 2 percent of the tea workforce was affected. Our efforts to raise awareness about the pandemic and instill new norms paid off as these were accepted and adopted by the community //

Muktikam Bordoloi
Programme Manager,
ABITA



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**BHARATIYA CHAH PARISHAD'S
ANGANA**



BCP's *Angana*

Lifeline during Lockdown

The memory of life in the tea garden during lockdown still makes Amrita Bhumi recoil. "It was mind-numbingly tiresome. There was nothing to look forward to, with our school closed for months, not knowing when better times would come. Cooped up indoors, I lost all touch with friends," shudders the class V student. Then as if someone, somewhere, rubbed a magic lamp, the classroom shifted right onto her courtyard. 'Lohar Sir' with his Angana classes came calling and things suddenly began to look up.

"Angana, the courtyard, represents purity in our society, where we wash the feet of visitors to our abode. It is where we plant and worship the sacred tulsi (basil plant). It was therefore a privilege to be allowed to use courtyards as a place for learning," said Joykush Lohar, Headmaster, Sewpur Tea Garden LP School in Tinsukia district. "Supported by UNICEF and partner organization Bharatiya Chah Parishad, the Angana programme eventually drew our entire community together," he enthused.



Angana for joyful learning

As the COVID-19 pandemic swept in and schools along with nearly everything else shut down, the outlook for tea community children was bleak, saddled as they are with high dropout rate. Mr. Lohar well knew that unless they received regular instruction to cover the syllabus, their learning outcome would be pitiful by the time the academic year ended. This besides, resuming classes could help children cope with the lockdown disruption, banish their boredom and anxiety. The problem was how to go about it.

“At first I asked myself what was I doing! Wasn’t my mission to teach during the pandemic against the government’s COVID protocol?” said Mr Lohar, recalling the early days of his mission. After all, people were warned not to step out of home during lockdown, so taking the classroom to people’s courtyards needed a lot of gumption. When human contact was being shunned to avoid contagion, how could his visits be welcome? “In the beginning, for nearly a month I took the Angana classes alone. There was hardly any support. But God was with me. As I started to visit courtyards at my own risk to teach children, it slowly began to impress people as a noble service,” Mr Lohar said proudly.

For the likes of Amrita, Angana classes came as a huge relief where they could reunite with friends and learn together, although their teacher made it clear they had to follow a different set of norms. “It was a new experience, doing lessons with friends, all sitting on peeras (wooden stools) in a circle. We were taught about the coronavirus for which we had to wear mask, wash hands with soap and sit apart from each other,” said Amrita. At long last, the lessons in Maths, English and Assamese gave her something to work upon, while the Art classes were a joy. And there were other simple pleasures, for as she says, “I will have to wear mask even after school reopens, I am told. I have three masks already – all different colours – black, white and red!”

BCP–UNICEF partnership

Tea gardens form a major component of Assam's economy, the tea community a vital workforce of the state. Bharatiya Chah Parishad (BCP), one of the oldest tea planters' organizations established way back in 1944, has membership strength of 101 tea gardens along with bought leaf factories across five districts in Upper Assam – Tinsukia, Dibrugarh, Sivasagar, Charaideo and Jorhat. In 2008, BCP received a major boost when UNICEF came in with its focus on improving the lives of children, adolescents and women in tea garden areas. Their partnership led to implementation of various projects to realize the rights of beneficiaries for survival, development and participation by cutting down inequalities over gender, ethnicity, class and region. This was done by using delivery mechanisms of the government and the tea gardens in alignment with the UN's Sustainable Development Goals (SDGs).

When COVID-19 exploded at the end of 2019 as a global pandemic and soon reached India's shores, the resulting enormous disruption did not leave the tea community unscathed. Production was hit hard in the tea gardens, the bustling labour lines fell silent. It was an unprecedented situation, and the BCP came up with its first initiative of using online platforms to share information and create general awareness about the threat. As the crisis grew, it circulated WhatsApp messages and videos with facts and information about COVID-19, preventive measures to be taken, need for testing, coping strategies, among others.

Teachers on mission mode

As Joykush Lohar mulled over the consequences of schools closed indefinitely, he knew something had to be done fast. Since the midnight of March 24, 2020 when lockdown was enforced across the country as the pandemic hit, education at all levels had been seriously impacted. Tea garden areas had long borne more than their fair share of problems, and Mr Lohar now feared for the future of his pupils. Not only must

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Amrita Bhumij
Student, Class V

they keep abreast with the lessons, it was necessary to teach them about the novel coronavirus, how it invaded human bodies and what to do to remain safe and healthy. Thus began Mr Lohar's mission to take his classes to the labour lines and teach children in their courtyards while following the new norms.

Initially, other teachers of Mr Lohar's school were fearful and hesitated to join him. But he was encouraged by Memsaab (the tea garden owner's daughter-in-law) who further put up funds to buy teaching materials for art and craft. "With her help, we also organised competitions while maintaining COVID protocol at Angana. Our students participated enthusiastically, and Rupesh Gowala, the All Assam Chah Majdoor Union general secretary, attended the programme," said Mr Lohar.

As the initiative became popular, it drew the attention of the school director, the district project manager and the cluster coordinator of the tea garden. They all threw their weight behind Mr Lohar. The challenge now was to motivate not just students but also their guardians, along with getting skeptical teachers to come forward. After a month of lone struggle, Mr Lohar was joined by colleagues Dayal Saha and Jiban Tati, and his grown-up children too pitched in. The realization had sunk in that it was precisely in crises like these that teachers and conscientious citizens should stand firm by young learners and ensure their education remains unhampered.

"Initially we were suspicious of Lohar Sir's initiative and were reluctant to join him. The government's COVID protocol was strict. We were afraid of what people would say if we violated it, as well as catching the infection ourselves," said Dayal Saha, assistant teacher, Sewpur Tea Garden LP School. After some soul searching, he joined Mr Lohar, his former teacher, because he felt if he wanted to see development, he must begin with his own community still battling endemic backwardness. "I used to be a student of Lohar Sir in this school where I am now a teacher of 14 years standing. In such hard times, our responsibilities as teacher have doubled," added Mr Saha.

Jiban Tati, another of Mr Lohar's former pupils and also serving as assistant teacher in his school, next



**“
Angana, the courtyard, represents purity in our society, where we wash the feet of visitors to our abode. It is where we plant and worship the sacred tulsi (basil plant). It was therefore a privilege to be allowed to use courtyards as a place for learning
”**

Joykush Lohar
Headmaster, Sewpur
Tea Garden LP School

came forward. "The Angana classes provided me the best scope to talk to adolescents and youths of tea garden areas. I thought it important to connect with them and know their thoughts about this pandemic. They were aware of the situation, I found out, and many of them cooperated in this initiative later both as participants and as helpers," said Mr Tati.

The youths had already built temporary gates in the locality to restrict the entry of outsiders and thereby check the spread of the virus. They mostly knew about the COVID protocols and applied these on their own. Ashik Khando, a former student of Sewpur School studying for BA degree at Makum but stuck at home during lockdown, who came forward to lend a helping hand in Angana classes, said, "Whenever Lohar Sir or Tati Sir could not make it, I took their place by arranging classes during the lockdown and taught English grammar, Assamese and Hindi." Other local youths also took occasional general awareness classes for the children.

Getting guardians on board

The bigger challenge was to convince guardians to allow their wards to come out in the midst of a pandemic for their lessons, albeit in their own courtyards. There was understandable fear of a contagious disease that had made all human contact risky, forcing the closure of schools and stopping nearly all work. Mr Lohar would carry a bar of soap and demonstrate to guardians how important it was to follow safety practices like hand washing, wearing mask and keeping physical distance while learning under open skies. It took some effort to gain their confidence, but gradually they warmed up to the initiative.

"What I straightaway noticed in the Angana classes was the manner the teachers taught, as well as how careful they were in maintaining the stipulated 2-metre distance from students," said Pinky Gope whose daughter attended the classes. Praising teachers for striving to cover the syllabus during lockdown, she spoke of her own efforts to persuade other guardians to allow their courtyards to be



used for classes. She had a word of appreciation for inclusion of dance, music and craftwork sessions between the classes. "Rabindra sangeet and other music classes were conducted by the teachers, which charged up the students and regaled us too," she said.

"My three children really benefited from the Angana classes. I had been worried after their school closed. Thankfully the teachers provided this option to keep on learning right through the COVID crisis while remaining safe," said Aman Mura, pointing to the emphasis on mask, hand washing and physical distancing.

Classes under open sky

The response initially was weak with only 8 students taking Angana classes, but before long their numbers swelled fast. "We started to get 25-30 students from each labour line every day during the lockdown," said Mr Lohar. Students of altogether 8 schools in their area took the Angana classes. There were four worker habitations, or what is popularly called labour lines, in the area. It would have been too hectic for teachers to visit all the four lines in one day for Angana classes; so, the children from the first two lines were taught one day and those of the other two the day next. In the first half of the day, classes were conducted in the courtyards of one labour line; after lunch in the second half, the teachers would move on to the other line. The Angana classes thus laid down a platform for participatory learning under open skies.

Getting school lessons in their own courtyard was akin to a lifeline for the tea community children, but there were other aspects to take care of. The abnormal times had taken a toll on them both physically and mentally, for forced indoor stay is bad for young bodies and minds. This presented the teachers with the challenge to not only design formal instruction in interesting manner, but to mix it up with informal teaching in fine arts and craftwork.

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What I straight-away noticed in the Angana classes was the manner the teachers taught, as well as how careful they were in maintaining the stipulated 2-metre distance from students
//

Pinky Gope
A guardian

"Most students didn't know about Rabindra sangeet, Rabha sangeet etc., so we introduced songs of these genres in our Angana classes. Sometimes we held art competitions among them. When we taught something formal like mathematics, we would often present it in interesting ways like a magic play. All these had to be done within the COVID protocol," said Mr Lohar.

The children experimented with materials of various kinds and shapes in their courtyards; they learnt to use everyday objects to draw geometrical shapes, like circles from bangles and coins; they fashioned handicrafts with locally available materials; they learnt to sing evergreen folk songs like 'Bilote halise dhunia podumi...' with musical accompaniment. Angana classes thus helped to create a strong bond between teachers, students and guardians by addressing curricular as well as extra-curricular needs of students during this time of turmoil.

Education the savior

"We thank the BCP for providing full technical support to our Angana classes. With initiatives like this, we can face any pandemic without letting children's education be affected. If I have to assess our Angana initiative, I would give it 9 out of 10," said Mr Lohar proudly.

"The Angana initiative was most innovative and therefore received BCP's full support. And with UNICEF backing us, it became possible to arrange for the logistics and finances to this initiative," said Kalpa Ranjan Chetia, Programme Manager, BCP. The Angana classes were facilitated by BCP's Child Protection Committee (CPC) with most of its members being schoolteachers in the area. "Considering the dropout rate here, this initiative showed how education can be a savior of children during a major disruption like a pandemic lockdown," added Mr Chetia.

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The Angana initiative was most innovative and therefore received BCP's full support. And with UNICEF backing us, it became possible to arrange for the logistics and finances to this initiative //

Kalpa Ranjan Chetia
Programme Manager,
BCP



Activities/ Interventions

Backing courtyard classes

The BCP's focus on education yielded fruits during COVID-19 crisis when all activities in tea gardens came to a standstill. Right to education is a fundamental right in India; in recent years governments have been getting tough against child labour which continues to be an issue for the tea community. BCP's support to door-to-door teaching at the courtyards of children was the crying need of the hour. As teachers sought out students to keep their education going through Angana classes, the opportunity was also taken to create awareness about the pandemic, advocate behaviour changes and instill safety practices. Guardians were involved in the programme, which helped to spread awareness further and mobilize socially. The objective was to ensure students did not lag behind in studies with the schools closed, for that would have adversely impacted their learning outcome. This was important, because online teaching was hardly a reliable option in the under-developed tea garden areas. Thanks to Angana programme, the children were put in a better position when classes resumed once the government decided to allow COVID-19 'unlock'.



Addressing menstrual hygiene

A crucial BCP campaign carried out separately was to train adolescent girls in menstrual hygiene and making reusable sanitary cloth pads. During lockdown, women in tea garden areas were unable to step out and access sanitary napkins. Their difficulty was highlighted in a small telephonic survey by facilitators/field workers on basic menstrual hygiene, in which respondents from 30 out of 46 tea gardens reported this problem. BCP then undertook a training initiative jointly with UNICEF and Dibrugarh



UNICEF File Photo

district administration. As part of WASH (water, sanitation & hygiene) activities, this initiative first trained facilitators who made videos containing detailed instruction on how to make sanitary pads at home from cotton cloth and buttons, and keep these clean. Nearly 500 adolescent girls from around 24 tea gardens were trained with these videos.

Tackling mental health

Providing psycho-social support to children was another important task the BCP undertook, so as to deal with mental health issues manifesting due to movement restriction and social isolation due to COVID-19. Counselors connected with children through their parents' mobile phones, asking them about health issues, advising them on coping strategies, suggesting ways to keep occupied during lockdown, forming WhatsApp groups for sharing materials on mental health and basic information about the pandemic, and briefing them on safety practices. The UNICEF had earlier organized an orientation programme on 'providing psycho-social support' to train BCP staff and counselors how to approach children and guide them effectively. The Child Protection Committee (CPC) and Mothers Community were roped in, and they later played active roles in creating awareness in the tea community on issues like child education, child trafficking and domestic violence. WhatsApp groups were created to maintain contact, share information and receive feedback.



UNICEF File Photo

Adaptations/Innovations



Through Angana programme, teachers brought the classroom to the courtyards of students, while maintaining COVID-19 safety protocol and also spreading awareness about the pandemic. This ensured that students did not lag behind when schools reopened at an uncertain date in future, guaranteed learning outcomes by keeping students informed and ready, stimulated their minds and kept them socially engaged. The initiative helped in reducing dropout rates, particularly among girls in the area.

The teachers researched and devised methods to make the courtyard lessons interesting, like arranging magic shows to explain mathematical concepts. Music, dance, art and craft sessions were held to enliven the learning experience.

Students were encouraged to access the government education portal SWAYAM and use educational apps like 'Porhaxali'. Those not having mobile phones were advised to take radio classes. Schedules were drawn up so that students didn't miss the Angana classes while ensuring they benefited from the other learning sources.

A video making competition on 'Life during COVID-19' was organized in which children from the area took part. The video entry 'Coping with Covid-19: A pandemic through a girl's eyes' by 15 year old student Bijita Sawachi from Ethelwold tea estate was among the two videos selected by UNICEF from India. The UNICEF initiative had asked girls from around the world to offer a window into 5 weeks of their life

during the pandemic; participants had to share their real stories using mobile phones to shoot videos, but without script or direction.

After finding through telephonic survey the difficulties faced by women in tea garden areas in accessing sanitary pads, it was further observed that even if pads are available, there is the problem of disposal because these are non-biodegradable. Many respondents reported they preferred making their own pads at home as these were reusable, comfortable and cost less. From these feedbacks, BCP organized online training sessions in 24 tea gardens in collaboration with the Dibrugarh district administration, the Divisional WASH consultant and UNICEF.

During lockdown, other initiatives were undertaken – announcements were made over loudspeakers to spread awareness in localities about COVID-19 and the precautions to be adopted, health tips and dietary guidance were offered with emphasis on women's health, audio & audio-visual clips were shared on social media platforms, and audio messages were aired over Akashvani (All India Radio).

Output/Outcome

The BCP initiatives at a time of unprecedented disruption due to COVID-19 had much beneficial impact on the tea community. In isolated tea garden areas during the lockdown and bleak aftermath, children's education was continued despite stringent pandemic restrictions. Efforts were made to spread awareness about the pandemic while keeping them abreast with studies. This was done in a joyful learning environment on children's courtyards so that they stayed keenly interested, involved and receptive. Mental health was given importance, counseling was provided to help children as well as family members cope with the crisis. Adolescent girls and women were helped by the sanitary pad initiative. The beneficiaries learnt to make proper sanitary pads at home from available cotton cloth,



keep these clean and maintain menstrual hygiene. The sanitary pads were environment-friendly and biodegradable, and women from 24 tea gardens were benefited.

Kalpa Ranjan Chetia, Programme Manager, BCP, when asked whether BCP was involved in any government programmes on COVID-19, replied in the negative. He said the BCP's initiatives were its very own in response to the pandemic. Giving an overall rating of '7-8 out of 10' to BCP's initiatives, he summed up its major thrusts in conducting Angana classes, providing psycho-social support, DIY video making on homemade sanitary pads, and organizing a video competition for children on the pandemic.





COVIDEXTERS

Best Practices During COVID-19

BRIDGE Training for
Frontline Workers



Foot soldiers against COVID

No knowledge or training ever goes waste, and frontline worker Minati Deka was thankful for her BRIDGE training at the height of COVID-19 transmission in Assam in the middle of 2020. An ASHA worker in Morigaon district, she would remain alert 24x7 to visit patients detected as COVID-19 positive. "I had to rush to a site even in the middle of night if a COVID-19 positive patient was found there," she recalled.

It was a herculean task to cover 1,400 beneficiaries in the area assigned to her, but Ms Deka was up to it. "I would wait for hours at the patient's residence until an ambulance was sent from the nearby health center, and would not leave until he/she was allotted a bed in the COVID-19 center," she added. The role and responsibility of FLWs like Minati Deka during the pandemic was vital, and BRIDGE training had equipped them with a set of skills, like how to approach people resistant to intervention by the Health department. "BRIDGE training helped us a lot. It facilitates communication or relationship between stakeholders and

beneficiaries, acting like a bridge between the two parties,” said Jusna Bora, working as ANM in Morigaon district. She would reach out to beneficiaries on every scheduled day, and along with Anganwadi workers, worked to strengthen their immunity. A vaccine for COVID-19 was still quite a distance away, so boosting immunity levels and providing health counsel went a long way to serve the people.

Bridge to healthy community

BRIDGE – short for ‘Boosting Routine Immunization Demand Generation’ – is a training programme to develop interpersonal communication skills of frontline workers (FLWs) to work effectively in routine immunization (RI) activities. The training content is based on Tarang training module developed by UNICEF on ‘social and behavioral change communication (SBCC)’. After undergoing this training, frontline workers are expected to use their skills towards raising demand, generation and expansion of routine immunization.

The importance of RI activities can hardly be overstated. These ensure that every person is fully immunized against vaccine-preventable diseases like polio, diphtheria, tetanus, tuberculosis or Japanese encephalitis, and thereby bring down morbidity and mortality due to such scourges. This requires sustainable, reliable and timely interaction between the vaccine, those who deliver it and those who receive it. The supply side of RI can be strengthened through improved infrastructure, new vaccines and regular technical training. The demand side depends on the quality of interaction between frontline workers and the community.

To bring about sustained behavior change in communities as well as among caregivers, FLWs must know how to engage communities in issues like child health and immunization, deliver key messages, test understanding, interact with influencers, and self-assess the results of efforts. In routine immunization, the goal is to reduce vaccine hesitancy among the populace (due to fear and lack of awareness) while increasing RI coverage. To bring this about, three classes of frontline workers are deployed in the field together as the ‘3As’ – the Auxiliary Nurse and Midwife (ANM), the Accredited Social Health Activist (ASHA) and the Anganwadi Worker (AWW).

“I would wait for hours at the patient’s residence until an ambulance was sent from the nearby health center, and would not leave until he/she was allotted a bed in the COVID-19 center”

Minati Deka, ASHA
Morigaon District



3As on pandemic battlelines

The '3As' serve as the bridge between the health delivery system and the community. In routine immunization, the ANM plays the dual role of vaccinator and primary counselor to caregivers. The ASHA is the first point of contact for the community when seeking information and knowledge about RI activities, especially in rural areas. The AWW ensures all mothers (including pregnant women) and children in the village visiting the Anganwadi centre receive the specified services related to health and nutrition, including RI counseling. While ASHA and ANM personnel are under the Health department, AWW personnel are under Social Welfare department, so their activities as frontline workers need to be properly coordinated at the ground for effective community outreach.

The entire process of BRIDGE training is designed to reach effectively to the grassroots, descending from district level trainers to block level trainers to frontline workers. It starts with Training of Trainers (ToT). "After attending a BRIDGE training session in Guwahati, we moved to the district to train district level trainers, who in turn trained block level trainers at the blocks. These block level trainers then trained the FLWs like ANMs, Lady Health Visitors (LHVs), Supervisors etc. during the spread of the pandemic," said Arif Ahmed, District Community Mobilizer, NHM, Dhubri.

“BRIDGE training helped us a lot. It facilitates communication or relationship between stakeholders and beneficiaries, acting like a bridge between the two parties”

Jusna Bora, ANM
Morigaon District

The frontline workers further trained beneficiaries in boosting immunization methods and safety measures for COVID-19. The training plan was prepared keeping minimum three sessions a month per block. About 70 percent frontline workers were trained in boosting immunization. Through quality assessment and supportive supervision as trainer feedback, track was kept on the quality of training provided by district level trainers to frontline workers, as well as by frontline workers to targeted beneficiaries in the communities.

The frontline workers were also trained to raise COVID-19 related awareness. Each sub-centre was assigned to an ANM worker, who on average covered four villages. While a sub-centre would be located in one village, the other 3 villages would be assigned under it as per convenience. For each village, one ASHA worker was assigned. The roles played by ASHAs and Anganwadi workers were very important. The Anganwadi workers' role was to provide nutritional information and supply the supplements to children of the villages in block-wise pattern. The criteria required each and every village should have one ASHA and one anganwadi worker to provide nutritional support and deliver rations for the children. This eventually extended to adolescent programmes. They performed mobilization activities, carried out routine immunization services as well as rendered maternal health services under the government schemes. This practice was followed in Assam along with the rest of the country.

Some FLWs were elderly while some others had infirmity issues, so there were question marks whether they could meet the physical demands of the job. But overcoming all handicaps, BRIDGE helped them to cope with the challenge. "As a few of our ASHA workers were aged and not much educated, it was challenging for us to train them; some had hearing problems, while some couldn't follow visual displays on screen due to eyesight problems. Despite all these, we handheld them and helped them to adapt to the challenging situation," said Kamal Chandra Nath, a block programme manager (BPM) involved in training nearly 1,200 ANM and ASHA workers to overcome the challenges on the ground during the COVID-19 pandemic.



“As a few of our ASHA workers were aged and not much educated, it was challenging for us to train them; some had hearing problems, while some couldn't follow visual displays on screen due to eyesight problems. Despite all these, we handheld them and helped them to adapt to the challenging situation”

Kamal Chandra Nath
A Block Programme
Manager (BPM)

"Apart from spreading pandemic related awareness, the roles of ASHAs, ANMs and AWWs also required providing nutritional information and supplying supplements to children of the village they are assigned to in respective blocks," said Abhijit Basu Biswas, SBCC consultant. He mentioned that the specific area of BRIDGE training is communication, which has two parts – social and behavioral change communication (SBCC), and the other is advocacy communication, social media training and routine immunization. "In Kamrup metro district alone, many ANMs, ASHAs and Anganwadi workers underwent such training," added Biswas.

Routine immunisation challenge

With the health system of Assam straining at the onslaught of COVID-19, as in other states, routine immunization took a backseat. The lockdown, containment and physical distancing compulsions hampered vaccination of children, putting them at serious risk of contracting other diseases. As UNICEF called upon parents to get their children vaccinated after the pandemic waned and normal health services resumed, the onus was on the state government to restart RI activities as soon as the situation permitted. Despite the efforts of FLWs, it was difficult to bring people to camp sites for routine immunization, which was an integral part of staying strong during the pandemic. But frontline workers like Jusna Bora know the tactics to get the job done. "Whenever people hesitated to visit us for the routine health camps, we sought help from a local teacher/elderly person/learned person to persuade them by making them aware of the situation. This is how we managed to get people to the camps for routine immunization," she said.

"While we managed to approach the people for routine immunization, when the beneficiaries, especially the pregnant women, were asked to visit health centers for routine checkups and vaccination, they turned resistant which made my job hard. On the other hand, whenever someone from another state visited

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Apart from spreading pandemic related awareness, the roles of ASHAs, ANMs and AWWs also required providing nutritional information and supplying supplements to children of the village they are assigned to in respective blocks

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Abhijit Basu Biswas
State RI- SBCC
Consultant (Supported
by UNICEF)

my area, the locals would immediately inform me and help in reaching out to them,” said Minati Deka. Clearly, public fear of the COVID-19 contagion was taking a toll on RI activities by frontline workers. Assam faced challenges in continuing routine immunization during and after the lockdown, firstly due to poor accessibility in this period, and secondly because of two waves of floods which created hurdles in smooth functioning of the programme. The State resumed above 85% of planned RI sessions which began from the third week of April 2020 and resulted in 74% full immunization coverage even when the pandemic was at its height. To initiate this programme, over 85% FLWs underwent COVID-19 training on how to conduct the sessions during that time. Thanks to BRIDGE, Assam even in the grip of the pandemic could make a fight of it in providing people access to immunisation.



Activities/ Interventions

Immunization at pace

BRIDGE is the only training body from State Immunization Cell approved by Assam government which has been conducting training in routine immunization by following COVID-19 protocol strictly.

BRIDGE has helped to develop interpersonal communication skills of frontline workers. This has increased their effectiveness in community outreach, the aim of which is to foster social and behavioral change in the targeted people.

BRIDGE training enabled ASHAs, ANMs and AWWs in creating awareness on COVID-19. They demonstrated safe practices, provided information on nutrition and boosting immunity, supplied rations and supplements to children and beneficiaries. They further helped COVID-19 patients in hospitalization while counseling their families on do's and don'ts.

During the hot, rainy months in Assam in 2020 when COVID-19 posed a serious threat to public health and tied down the government's response, along with floods creating additional menace, BRIDGE-trained frontline workers kept mobilizing the communities to cooperate in government activities towards routine immunization and maternal health.

Indicative list of Probable District Trainers

- Existing SBCC trainers developed by UNICEF or other partners like WHO, FHI360 etc.
- New trainers from
 - ASHA Trainers & ASHA Supervisors
 - Government health institutions
 - Health Education Officers
 - NGO Partners
- Anganwadi Training Center trainers / ICDS supervisors (including them will help in ICDS systems strengthening and will improve field-level convergence)
- DIO
- Dist. ASHA Coordinator

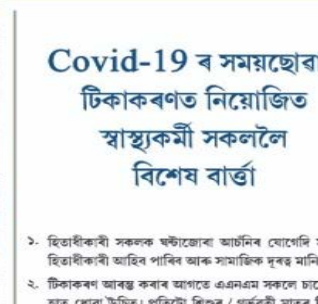


বিশ্ব টিকাকৰণ সপ্তাহ আৰু নিয়মিত টিকাকৰণ : অসমৰ উদ্যোগত

২৪ এপ্রিল, ২০২০ পৰা



সকলোৰে বাবে প্ৰতিবেশক।



Covid-19 ৰ সময়ছোৱাত টিকাকৰণত নিয়োজিত স্বাস্থ্যকৰ্মী সকললৈ বিশেষ বাৰ্তা

- হিতাধীকাৰী সকলক ঘৰোৱাৰ আৱশ্যক অনুযায়ী মতা উচিত। এফালেত খুব বেছি ৪ জন হিতাধীকাৰী আহিব পাৰিব আৰু সামাজিক দূৰত্ব মানি চলিব লাগিব।
- টিকাকৰণ আৰম্ভ কৰাৰ আগতে এএনএম সকলে চাবোন আৰু পানীৰে ২০ ছেকেণ্ডৰ বাবে হাত ধোৱা উচিত। প্ৰতিটো শিশুৰ / গৰ্ভৱতী মাতৃৰ টিকা কৰণৰ টিকাৰ আগত আৰু পাছত এলকহল মুক্ত চেণ্টিছিজৰ ব্যৱহাৰ কৰাটো নিতান্তই প্ৰয়োজনীয়।
- এএনএম সকলে তিনিজনীয়া চাৰ্জকেল মাস্ক আৰু গ্লোভছ পিন্ধা উচিত।
- টিকাকৰণৰ পাছত আধা ঘণ্টাৰ জিৰণিৰ সময়ত হিতাধীকাৰী সকলক মুখা উপদেশ যেনে Covid-19 ৰ সময়ছোৱাত লৰা লগা সাৱধানতাৰ বিষয়ে জনোৱা উচিত। হাত ধোৱাৰ নিয়ম, গৰ্ভৱতীৰ সুখম আহাৰ, মাতৃ দুগ্ধপান আদি নিয়মবোৰ হিতাধীকাৰীক জনোৱা উচিত।
- টিকা কৰণৰ ঠিক পিছত, টিকাকৰণ কৰা ঠাই, আৰু অন্যান্য সামগ্ৰীবোৰ ততাতৈয়াকৈ ভালদৰে বীজানু মুক্ত কৰিব লাগিব।
- বাৰমৈডিকেল আৱৰ্জনাৰোৰ আৱশ্যক কৰোঁতে বিশেষ সাৱধানতা অবলম্বন কৰা উচিত। এনে কৰোঁতে BMW নীতি নিৰ্দেশনা মানি চলাটো অত্যন্ত জৰুৰী।

সকলো ধৰণৰ টিকা কৰণ কাৰ্যসূচীত সামাজিক দূৰত্ব, হস্ত প্ৰক্ষালন, আৰু স্বাস্থ্যসন্মত বিধিসমূহ সকলোৰে মানি চলিব লাগিব।

জন্মৰ সময়ত প্ৰদান কৰিবলগীয়া প্ৰতিবেশকসমূহ সকলো জিলাৰ (Covid-19 সংক্ৰমিত বা সংক্ৰমিত নোহোৱা) স্বাস্থ্য কেন্দ্ৰ সমূহত নিয়মিতভাৱে চলি থাকিব।

Adaptations/ Innovations

'No mask, no vaccination' message was widely disseminated, which sensitized beneficiaries on safe practices to be followed while taking vaccine shots for other diseases.

Translation of BRIDGE training material into local languages aided better understanding among frontline workers about the crucial aspects of their job, particularly during pandemic times.

To overcome vaccine resistance among targeted beneficiaries, frontline workers adopted various tactics to inform them properly, allay their fears and motivate them to take vaccine shots, like roping in local influencers to persuade them.

Stringent quality assessment and supportive supervision, based on trainer feedback, was done to keep track of the quality of training provided by district level trainers to frontline workers, as well as by frontline workers to beneficiaries on the ground.

Stationery to be provided by state for each training	
What	Number
Chart papers (For making charts as required)	15
Permanent Markers (Red, Black and Blue)	2 Black, 2 Blue, 1 red
Blu-Tack/Glue Drops (Bostik/Fevicol Reusable Adhesive)	2 packets
Board Clips	2
Cello tape, Scissors, Pencil/sharpener, Ball of string	1 each
VIPP Cards	25
Plain paper	10
Stapler and pins	1
Board pins	1 packet

Output/ Outcome

During the pandemic, BRIDGE training was given to 5,883 ANMs out of 10,156 and 14,137 ASHAs out of 31,527. Overall, 33 ANM batches, 26 ASHA batches and 22 AWW batches were trained, with 668 ANMs, 560 ASHAs and 550 AWWs in a batch.

Adaptation of animation videos related to COVID-19 in local languages and three videos for Precaution, Awareness & Vaccination were prepared by the Directorate of Health Services (FLW), with technical support from SBCC Cell of NHM Assam supported by UNICEF. Proposal made to the Director of Health Services (FLW) for broadcasting two videos in four channels.

BRIDGE training conducted with existing COVID-19 protocols in Sivasagar, Jorhat, Morigaon, Kamrup Metro, Kamrup Rural, Barpeta and Baksa districts. Kamrup Metro district also placed a request to the State government for conducting BRIDGE training for MAS (Mahila Arogya Samity) groups.

Even when the pandemic was at its height in Assam, the state government resumed more than 85% of planned routine immunization sessions which began from 3rd week of April, 2020. This resulted in 74 percent RI coverage. To carry out this work, 85.7 percent of FLW force underwent COVID-19 training on how to conduct the vaccination sessions.



Salient features of FLW training

- ✓ Duration: One day
- ✓ Methodology: Participatory - comprising of videos, games, role plays
- ✓ Batch size: 35 FLWs
- ✓ District trainer: 1



COVIDEXTERS

Best Practices During COVID-19

COVID Initiatives
ARUNACHAL PRADESH



Looming pandemic threat

"We had been following pandemic-related news coming from across the world, wondering what would happen when the novel coronavirus made its appearance in Arunachal Pradesh. We knew dealing with COVID-19 patients would tax our medical teams and infrastructure, but an equal if not bigger challenge was to mentally equip the people to deal with the threat," said Dr. Sajingula, medical officer in Lohit district.

Her anxiety turned into reality, and as it so happened, the first COVID-19 case in the state was detected on April 2 in Lohit district. The administration moved swiftly, setting up a helpline number, offering telephonic and online counseling to anyone who reached out for help. "Doctors, nurses, diet experts – all joined hands to treat and counsel patients. We advised them to eat proper diet with adequate protein, fruits, milk. Inhaling steam, gargling with hot water, drinking hot beverages like black tea and green tea was encouraged. There was no point panicking over a disease which had no cure, so we felt patients needed

psycho-social support the most,” observed Dr. Sajingula. With the lockdown in force, the state government had already been setting up COVID control rooms in each district along with helpline numbers. Regular review and planning meetings were conducted by Directorate of Health Services (DHS), National Health Mission (NHM) and the control rooms. State and district task forces were formed. Medical officers and their teams handled the cases with utmost priority. However, the state faced a serious shortage of ICU beds and medical staff. Infrastructure had to be upgraded and additional posts created at the zonal hospitals in Tezu, Bomdila, Aalo, Khonsa and Ziro, but the process was slow. The state got its first test lab only on May 1 when the sampling centre at Tomo Riba Institute of Health and Medical Sciences (TRIHMS) at Naharlagun was upgraded. The state government mulled telemedicine facilities in several hospitals and community health centres (CHCs) to be connected with specialists at TRIHMS and from outside the state, but only districts with reliable digital connectivity stood to benefit.

It was on 30/01/2020 that the World Health Organization (WHO) had declared COVID-19 as a global pandemic and public health emergency. Even as Government of India began taking pre-emptive steps to battle the pandemic once it appeared in the country, the state government of Arunachal Pradesh imposed a strict lockdown from third week of March. This was dovetailed with the nationwide lockdown clamped by the Union Government on the midnight of March 24. Lockdown was thereafter extended because at that time, movement restriction and containment measures provided the only means to break the transmission chain of the SARS-CoV-2 virus.

Ears to the ground

The pristine frontier state of Arunachal Pradesh on the Himalayan foothills at the north-easternmost corner of India was equipped with only modest resources to deal with such a pandemic, yet with careful planning and flexible approach, the state administration scrambled to kick-start a massive awareness drive to bring about community surveillance and participation, instill appropriate COVID-19 behaviour among the people, implement containment measures wherever cases appeared, and motivate frontline warriors against the novel coronavirus.

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Dr. Sajingula
Medical Officer
Lohit District



The National Health Mission (NHM) and the Directorate of Health Services (DHS) of Arunachal Pradesh government in consultation with UNICEF strove to stabilize the situation and contain the spread of the virus. Adopting WHO guidelines and Central government directives/SOPs, the state administration unfurled a series of initiatives, including information, education and communication (IEC) activities by NHM.

“Feedback was a crucial component of the mass awareness drive to combat the virus. Based on feedback received from the field, awareness sessions through different modes of communication were conducted,” said Dr. Runi Tasung, Information Education Communication (IEC) in-charge of NHM. In reaching out to the communities, digital divide was a hard reality. “In Arunachal, there are many places we could not access online, so we invited representatives of these areas to Itanagar to get their feedback. They were asked to speak freely about problems relating to COVID-19. This enabled us to put our ears to the ground and keep a close eye on problems faced by the people in fringe areas due to the pandemic,” Dr. Tasung added.

Home isolation was a serious issue, Dr. Tasung pointed out, so all stakeholders were involved in the decision-making process as to when and how to go about it. This is significant, since monitoring the health status of a patient opting for home isolation in a remote, mountainous area where communication is difficult, and getting the patient to hospital quickly if his/her condition turned serious – involved considerable risk for decision makers.

Leveraging the young

To strengthen containment measures, it was necessary to quarantine/isolate people with travel history and suspected or confirmed cases, provide appropriate treatment and trace contacts to break the chain of further transmission. The state government in collaboration with Indian Medical Association (IMA) launched telemedicine services to provide counseling with doctors over phone. An app was also launched for those in quarantine to self-report their health status and offer them health tips.

A State Task Force (STF) was set up, headed by the Director of Health Services with Dr. Tasung given the responsibility of IEC/BCC activities. Sensitization of all the stakeholders was the prime focus of a programme undertaken for the District Medical Officers, who in turn were responsible for sensitization and training of ASHAs/ANMs as frontline workers on the ground. Right from the nature of the novel coronavirus and its transmission to symptoms of the disease it causes, what stakeholders were supposed to do, what was PPE and how these were to be used, the importance of adopting COVID-19 appropriate behaviour like proper hand washing with soap, wearing mask and physical distancing – on all such issues sensitization sessions were conducted.

“A series of zoom meetings were held for this purpose. The district and police administration and civil society organizations were also sensitized. As students’ unions are active in our state, we sought their help in the sensitization of various communities,” Dr. Tasung informed, adding, “We used the youth population as a medium to reach the people on the ground as per their own demand. Rap music is very popular among the young here. So we used this genre to carry forward COVID-19 message prepared and played by a group of youths.” While Arunachal’s population is mostly young and COVID-19 usually spares the young, it was indeed heartening to see young people put their hands up to carry the message up to their homes in the mountains, implement these to protect their elders and share it through social media to spread awareness about the pandemic and acceptable behavior.

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Feedback was a crucial component of the mass awareness drive to combat the virus... As students’ unions are active in our state, we sought their help in the sensitization of various communities. We used the youth population as a medium to reach the people on the ground at their insistence. We used rap music, prepared and performed by youths, carrying COVID-19 messages for dissemination

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Dr. Runi Tasung
Deputy Director
(MCH)

Boosting COVID warriors

The state health machinery swung into action, training healthcare providers and frontline workers for capacity building to assist the people. Training was conducted in both online and offline modes. Keeping in view the COVID-19 protocols, most training sessions were carried out through video conferencing; physical training was conducted in Itanagar only for FLWs from districts with poor internet connectivity. A vital part of the campaign was to encourage healthcare service providers to do their job freely in the face of infection risk. Efforts were made to motivate recovering COVID-19 patients by ensuring they were not stigmatized or discriminated against. This would encourage people to report unhesitatingly to health authorities in case they or their family members developed symptoms.

Training of frontline workers (ANM, ASHA, AWW, MO, DPMU) for capacity building was carried out via a series of webinars. About 100 Medical Officers (DSO, DRCHO, DANO), 1,221 ASHA workers and 294 ANM workers were trained in emergency COVID-19 response preparation, while CSO members were trained in home isolation. Partnership was finalized between Health department and other line departments with non-governmental organizations (NGOs) and civil society organizations (CSOs) for implementation of behavior change communication (BCC) activities with the help of local influencers. Partnership with National Service Scheme (NSS) was done by some districts for mass mobilization and 'Mask For All' campaigns. Monitoring and screening at entry and exit points like railways and roadways points were conducted.



Communicating the message

"Overall, the state government pursued a comprehensive mass communication campaign right from the lockdown it had imposed in March. The thrust was to inform and mobilize the communities about the precautionary measures needed to stop COVID-19 transmission, the do's & don'ts for those

recovering from infection, providing psycho-social support and desisting from discriminatory behaviour. The state initiative was highly strategized. Formation of task forces, planning and review meets were conducted to ensure effective outcomes. Large numbers of CSOs, NGOs and community groups were roped into the awareness drive by IEC division of NHM and DHS to instill COVID-19 appropriate behaviour in the populace and go for testing whenever necessary. Virtual meets were supplemented by a range of mass media activities on various themes related to the pandemic,” said Vijay Dumdum, SBCC Officer, NHM. The communication strategy revolved around themes like ‘Badalkar Apna Vyavahar, Karein Corona Par Var’ as part of COVID Appropriate Behaviour campaign. Mass media was harnessed; Doordarshan televised a series of panel discussions on COVID-19, and around 30 programmes of half-an-hour duration were aired; radio jingles in 12-13 local dialects including Apatani, Nyishi, Monpa were broadcast by Akashvani (All India Radio) to spread awareness. The state government brought out advertisements in local newspapers to put forth vital information. Mid-Media activities like ‘miking’ (announcement through loudspeaker) from IEC vans in local dialects, distribution of leaflets and pamphlets, display of banners/posters/hoardings at strategic locations were conducted across the state. Sharing of IEC & BCC (behavior change communication) digital material across social media platforms (Facebook/Twitter/WhatsApp) was undertaken. Frontline workers (FLWs) paid house-to-house visits in villages for awareness creation and social mobilization, and distributed over 10,000 leaflets.

It was important for the government to garner public support and cooperation while coordinating the activities of the Health department with those of other line departments for COVID-19 control measures. It also needed to ensure that the communities abided by the health advisories released by Government of India from time to time. The high end awareness campaigns at different levels called upon communities to adhere to and practice social distancing in public places, make regular and proper use of mask and arrange its disposal, follow coughing and sneezing

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The Arunachal Pradesh government pursued a comprehensive mass communication campaign right from the lockdown it had imposed in March. The thrust was to inform and mobilize the communities about the precautionary measures needed to stop COVID-19 transmission, the do's & don'ts for those recovering from infection, providing psycho-social support and desisting from discriminatory behaviour

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Bijay Dungdung
State RI SBCC
Consultant,
Arunachal Pradesh



etiquette, wash hands with soap and water or use sanitizer containing 70% alcohol, need for COVID-19 testing etc., and overall, to adopt a range of health & hygiene seeking behaviors to prevent the spread of COVID-19 in the state. However, challenges came from residents in some localities around COVID hospitals when patients from other districts were admitted for treatment. This indicated the continuing need for sensitization programmes among the people.

Activities/Interventions

- Multi-level mass awareness drive undertaken across Arunachal Pradesh to inform communities about COVID-19, create awareness about the need to adopt appropriate behaviour and safety precautions, persuade people not to stigmatize or discriminate against patients and their family members, and motivate frontline warriors against the virus.

- Stress on safe home isolation of patients, constant monitoring of their health condition, making arrangement for prompt hospitalization, and involving civil society organisations to lend helping hand.

- Extensive sensitization and training of Medical Officers and frontline workers ASHAs/ANMs/AWWs and others, along with NGOs and CSOs.

- Mass media drive on Doordarshan, Akashvani, local newspapers, IEC vans and loudspeakers; display of banners/posters/hoardings at strategic locations





Adaptations/Innovations

- Tailoring the pandemic response to feedback received from grassroots, along with pragmatic strategy to overcome digital divide.
- Involving the youth as first recipients of COVID-19 messages for benefit of their family elders, use of rap songs as message vehicle.
- Stress on psycho-social counseling to eliminate panic, emphasis on fighting stigmatization/discrimination to boost COVID warriors.

Output/ Outcome

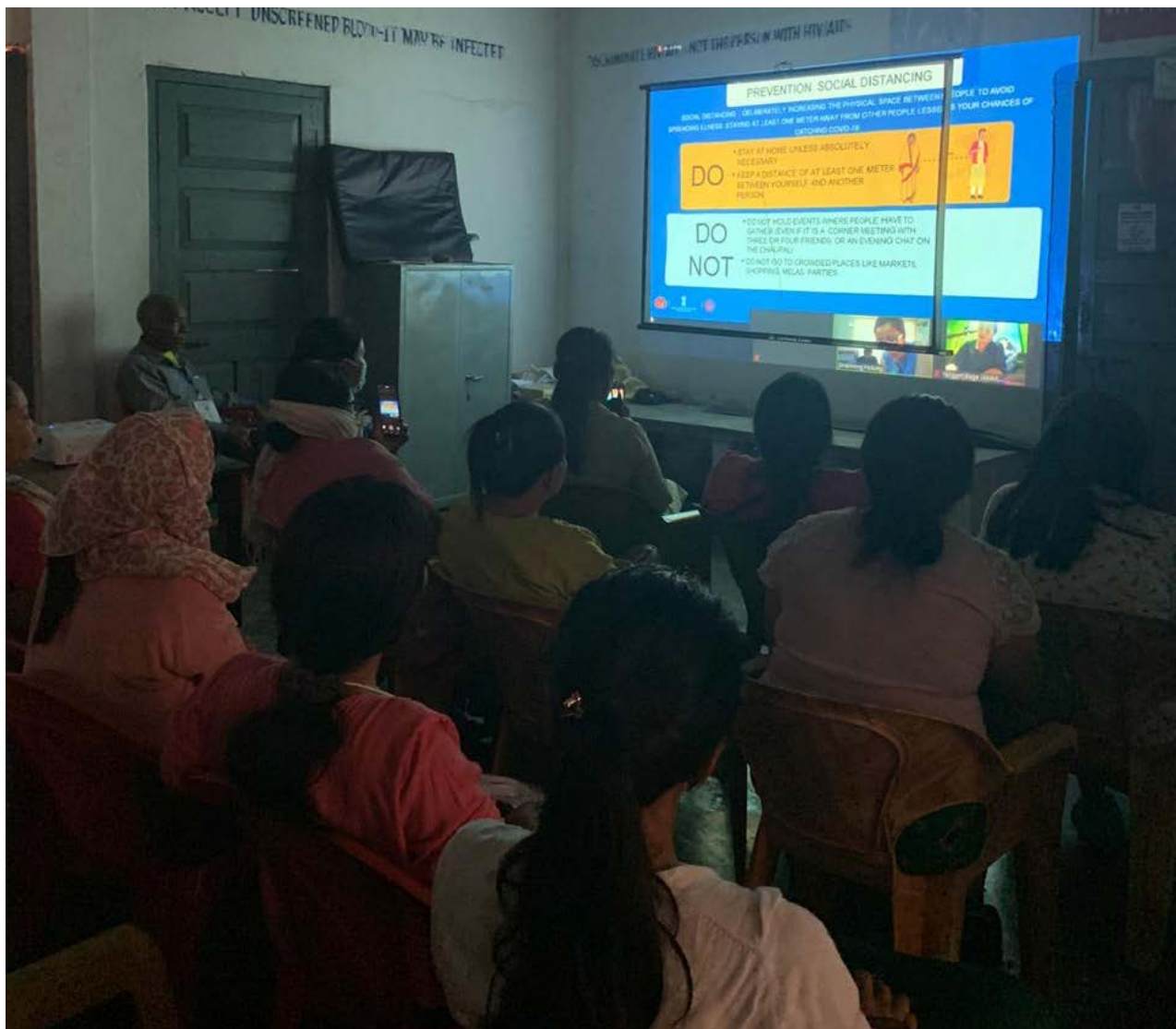
Meager resources and poor infrastructure handicaps were overcome by strategized mass communication drive involving various stakeholders, including NGOs, civil society organizations and community groups.

Public fear regarding COVID-19 removed to a large extent; awareness was created among all tribes about COVID protocol, primarily due to the translation of IEC material into different dialects.

Digital divide dealt with effectively by focusing on last mile contact between frontline workers and homesteads.

Widespread awareness creation along with sensitization of various levels of stakeholders.

Success in community involvement and social mobilization by leveraging strong community values to contain the spread of novel coronavirus.





COVIDEXTERS

Best Practices During COVID-19

COVID Initiatives
NAGALAND



Bracing for pandemic surge

As the sister states in India's Northeast scrambled to shore up defences against the pandemic early in 2020, Nagaland was in a difficult position. The state government had already closed borders and clamped strict movement restriction and distancing norms to block entry of the novel coronavirus. But with total lockdown enforced across the country from the midnight of March 24, Nagas working in other states, most of them youths, began to make their long, arduous journeys back to home state. To test thousands of returnees on arrival, isolate and treat those found infected, trace their contacts, guard against community transmission – carrying out these and related tasks presented a huge challenge for the health administration.

Would the healthcare system of Nagaland buckle under this imminent surge? As the race began to convert district hospitals in the 11 districts into COVID-19 hospitals, the true dimensions of the challenge emerged. The paltry numbers

of ICU beds, lack of basic diagnostic equipment, critical manpower shortage – all these and other shortcomings had to be urgently addressed. “Eventually, 2020 turned out to be a year of blessing for our healthcare sector. Given our meager resources as the pandemic loomed, all the departments concerned had to pull together and multi-task in communicating health guidelines and SOPs, test people and trace their contacts. The state government created posts of medical officers and other personnel on priority basis. District hospitals got more ICU beds, ventilators and better diagnostic facilities, the three test labs in our state were upgraded,” said Dr. Ritu Thurr, Joint Director, Directorate of Health & Family Welfare, Nagaland. Work thereafter began under the National Health Mission (NHM) to renovate all community health centres (CHCs), along with a number of primary health centres (PHCs) and sub-centres across the state.

Adding to the medical infrastructure and boosting manpower took time, but the state government had to immediately get the message across to people to adopt safe practices and stay vigilant. A hierarchy of task forces at state, district and sub-division levels was set up to coordinate actions taken on the ground. A massive publicity drive began with a strong digital component, and the government leaned heavily on three pillars of Naga society – the pre-eminent Church in leading role, proactive village councils and civil society groups. All stakeholders could deliver, thanks to Nagaland’s enormous ‘social capital’.

Social capital and the Church

“Ours is a small state with a predominantly tribal society. The community is our strength, everyone in the community knows and relies on everyone else. People here are simple, straightforward and godfearing, they look up to the Church, to tribal leaders, to village headmen. This is the rich social capital Nagaland is blessed with, and it helped us in facing this pandemic,” said Marykali Yephthomi, Consultant, Communication for Development, Nagaland. “Those educated and employed take it upon themselves to help their extended family, their tribal community, their church members and so on, which has brought about a culture of mutual support and philanthropy. Our public services, including healthcare

“

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”

Marykali Yephthomi
Consultant, Communication for Development,
Nagaland



services, are all based on community involvement and development approach,” she added.

Coming to grips with a pandemic of such massive scale was hard in the beginning, but the Church had to stand true to its moral leadership role and take the field, said Rev. Z Keyho, General Secretary, Nagaland Baptist Church Council (NBCC). “After taking stock of our resources in rural and urban areas, we first concentrated on the returning migrants. They were cut off from family and comforts of home, so our churches provided relief materials and took care of them. We also called upon churches to contribute, and close to Rs 1 crore was contributed to the government relief fund, to various departments and the police, to frontline workers. Churches extended their care to neighbourhoods, and began setting up quarantine centers within church premises and church-run schools. All these and more flowed from our decision to share our resources for the benefit of communities,” recalled Rev. Keyho.

Responding to the lockdown, churches suspended regular services and events to go online for virtual prayers to keep devotees safe. Tailoring units in churches began to make masks and distribute free of cost. Community kitchens were set up to feed people numbering in the thousands. “Our helping hand extended to all faiths and denominations. We worked across religious lines, because what mattered to us was survival and protection, not religion. This was appreciated by our friends from other religions during the pandemic,” said Rev. Keyho.

Throughout all the activities to mitigate the suffering of the people and give them succor, churches continued to pass on information

authoritatively to communities that this was an infectious disease with a difference, that government advisories, guidelines and SOPs needed to be followed, that it was vital to keep one's distance, wear mask, wash hands with soap or use sanitiser, and to keep surroundings clean and free of pathogens. "All our villages have churches and it was easy to pass on the information. Under our administration, there are 1,661 churches with total 8-10 lakh members. If we put all churches together regardless of denomination, I am sure the number will be close to 3,000 churches", said Rev. Keyho.

It is no surprise the Church played a central role in the community involvement approach taken by the state government. "The Church has always been the most effective platform to implement any programme in Nagaland. This has been true earlier for routine immunization (RI), intensified pulse polio immunisation (IPPI), integrated child development services (ICDS), among others. We wrote to the Church authority to help create public awareness on COVID-19, they joined our task forces and presently they are associated with the vaccine rollout programme," said Dr. Rebecca Y Sema, DPO (RCH/UIP), Dimapur. Rev Keyho agreed, saying, "The government does not work like us. Besides, it takes time to connect with the newspapers and other media entities. We disseminated information faster to members and connected more effectively to rural areas." It helps that in many villages, church members are also members of the village councils.

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Dr. Rebecca Y Sema
DPO (RCH/UIP)
Dimapur, Nagaland





Village councils and civil society

For returnees in rural Nagaland, quarantine centers were built outside villages. These were cottages of bamboo and thatch, stocked with relief kit, dry rations, stationery and essential items by the village councils and community groups. Some villages went further to figure in media reports, like Chizami village in Phek district, where a football field converted into a quarantine center was designated as 'COVID-19 creativity hub'. The idea was to give inmates 'a home away from home' where they could paint, write poems, create music, make artifacts, grow plants or engage in other productive work. It would help create a positive atmosphere, the village council reasoned, particularly for those whose mental health had taken a beating due to lockdown and social isolation.

Village councils formed the second pillar in Nagaland which has contributed to the success of its community surveillance and involvement strategy. "The state government relies upon village councils in information dissemination and development activities. These councils are very much a part of the state's administrative apparatus. During COVID-19 crisis, we kept regular contact with village council chairmen, as we did with ward committee chairmen in urban areas and media houses to inform and educate the public,"

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pandemic”

Rev. Zelhou Keyho
General Secretary,
Nagaland Baptist
Church Council

said Dr. Ritu Thurr. The Church, as always, performed its leadership role, while civil society groups and students organisations formed the third pillar against the pandemic in urban areas, he added. In capital city Kohima and business hub Dimapur, civil society groups and students organisations formed their own task forces, issued standard operating procedures, set up quarantine centres and enforced containment measures. Volunteers arranged for facilities in cash or kind and cooked food for returnees in camps, while vigilantes enforced masks and distancing in shopping malls and markets and manned check posts to screen visitors in localities.

Communication and outreach

When the COVID-19 crisis broke, the first initiative of the state government was to establish a toll-free helpline number. Anyone from Nagaland or people of the state residing outside could avail of the service. Doctors provided counselling on COVID-19 symptoms, treatment and health related issues. The helpline number also provided mental health counselling for people suffering from stress, anxiety or depression brought on by the pandemic. An app was launched – 'nCOVID NAGALAND VISITORS APP USER SUPPORT' provided callers with technical support for on-boarding onto 'nCOVID Nagaland Visitors App'. It was used by in-bound travelers entering Nagaland, people placed in quarantine or containment zone for surveillance of COVID-19 symptoms. The state administration also provided a set-up for 'GENERAL QUERIES ON COVID-19 IN NAGALAND/COVID INFORMATION CENTRE', where callers could pose queries. It also included a complaints and grievances submission service. In its efforts to reach out to the public, the state government's e-initiative garnered encouraging positive responses, with substantial numbers of followers on its Twitter and Instagram handles.

The state government also maintained essential services during lockdown, while outreach services picked up gradually during the unlock phase. Frontline health workers clad in PPE went house-to-house to spread awareness among villagers, particularly



COVID-19 WAR ROOM NAGALAND

NAGALAND COVID HELPLINE
HEALTH & FAMILY WELFARE DEPARTMENT

- TELE CONSULTATION, TELE COUNSELLING & MORE SERVICES NOW AVAILABLE IN ENGLISH & NAGAMESE.
- FREE TELEPHONIC COUNSELLING SERVICE PROVIDED IN COLLABORATION WITH ALL NAGALAND COUNSELLORS ASSOCIATION (NAGAL) CONFIDENTIALITY MAINTAINED.
- TELE-MEDICAL CONSULTATION ON COVID-19 SERVICE PROVIDED IN COLLABORATION WITH STEPONE.

HELPLINE 1800 345 0019
TOLL FREE NUMBER

- 01 TO SPEAK TO A DOCTOR
(1) SPEAK TO A DOCTOR
(2) SPEAK TO A DOCTOR
- 02 TO SPEAK TO A COUNSELLOR
STRESS, ANXIETY, DEPRESSION OR ANY MENTAL HEALTH ISSUE
- 03 nCOVID NAGALAND VISITORS APP
YOUR SUPPORT
- 04 COVID-19 IN NAGALAND
INFORMATION, QUERIES
- 05 COMPLAINTS/GRIEVANCE

04 MAY 2020 | WWW.COVID19.NAGALAND.GOV.IN | #STAYHOME STAY SAFE

HYDROVAGALAND | HYDROVAGALAND | NAGALANDHYDROV



Activities/Interventions

- Medical infrastructure was improved, manpower was increased in hospitals. More District hospitals were equipped with more ICU beds, ventilators and diagnostic equipment, test labs were upgraded.
- A comprehensive hierarchy of task forces was set up at state, district and sub-division levels to coordinate communication, health outreach, containment and other pandemic control actions taken on the ground.
- The state government began a massive publicity drive using the three platforms offered by the Church, village councils and civil society groups.
- Toll free helplines were opened for counselling while apps were launched to guide returnees and visitors.





Adaptations/ Innovations

Use of church, village council and civil society platforms by the state government to maximise its reach among the people on creating awareness, adopting safe practices and seeking counseling or treatment

Use of community involvement and surveillance as core of state government strategy to combat pandemic

Special training imparted to teachers to draft them as influencers in outreach programmes by health workers

Designation of quarantine centers as 'creativity hubs' by some village councils to create positive atmosphere for inmates

“ 2020 turned out to be a year of blessing for our healthcare sector. Given our meager resources as the pandemic loomed, all the departments concerned had to pull together and multi-task in communicating the health guidelines and SOPs, test people and trace their contacts. The state government created posts of medical officers and other personnel on priority basis. District hospitals got more ICU beds, ventilators and better diagnostic facilities, the three test labs in our state were upgraded ”

Dr. Ritu Thurr
State Immunization
Officer, Nagaland

Output/ Outcome

The social media reach and engagement on COVID-19 was substantial with many views, likes and comments to posts.

Significant rise in awareness level seen about COVID-19 and precautionary measures.

Community involvement seen through volunteers/vigilantes in detecting returnees, operating quarantine centers, enforcing containment restrictions and ensuring COVID appropriate behaviour.

Seeking to ameliorate the plight of migrants and returnees, community support and help in cash and kind extended to state government, with the Church setting an example in contributions.

Business establishments put up notices at entrances (e.g. 'No Mask, No Entry'), provided hand sanitizers and displayed physical distancing markers; their employees sensitized customers on following standard precautions.

Success in community involvement and social mobilization by leveraging strong community values to contain the spread of novel coronavirus.





COVIDEXTERS

Best Practices During COVID-19

Folk Art for Change
TEZPUR UNIVERSITY



Saying it with songs

Where did your childhood disappear,
O beloved mate,
Married off at such young age,
Spent your life in tears,
Met an untimely death,
So much pain you bore,
Punished for what you did...

Thus sang the adolescent girls a jhumur song they had penned down about early marriage. They had been on awareness campaigns against social evils in the tea community. The song's sad refrain, bemoaning a lifetime of tears for the tender-aged forced to bear the burden of marriage and family, would invariably strike a responsive chord among listeners. "We would sing about dropping out of school, early marriage, child labour and exploitation, drunkenness and many such issues which affect us. Our people love jhumur song and dance shows. Unless we

get their attention, we cannot tell them what we want to say,” recalled Sunali Tanti. She spoke about how she and other girls in the labour lines first learnt to compose, sing and dance to their folk songs at a folklore intervention workshop.

As Sunali got to know in the workshop what she was capable of, she grew in confidence and has the abiding satisfaction of weaning her father off alcohol. “I was ashamed when I heard my daughter sing about what happens to drunkards and addicts. I thought it won’t be right if I continue to drink anymore, so I gave up liquor,” said Sunali’s father Krishna Tanti, a tea worker. Such behaviour changes among family members have been brought about by other participants as well. “We have seen some adolescent participants in our workshop get good results in their immediate families. There was one participant, a school dropout, whose song, while he was practicing at home, moved his parents so much they re-admitted him to school,” said Dipjyoti Gogoi, field investigator and folklore researcher. She also mentioned former participants like Jibantara Hembrom and Babul Masu who discovered their musical talent in such workshops, and later achieved popularity with songs bearing messages of social reform.

As COVID-19 stalked Assam in 2020, many adolescents of the tea community saw with dismay how the lockdown left their families without work, added fuel to alcoholism and triggered a surge in forced marriages. While no workshops could be held during those dreary months, some adolescents used social media as platform to pour out their thoughts and emotions through songs, poems, videos and slogans. After lockdown was lifted, community-based organizations like ABITA and BCP lost no time in holding workshops to craft messages on the new health norms and safe practices. “I helped in making my family and neighbours aware of the benefits of washing hands regularly, wearing mask and in keeping physical distance. I taught my younger siblings and also children and elderly people in our locality why acquiring these habits pay off in the long run in remaining healthy and disease-free,” said Reema Thakuri, an adolescent participant residing in Mahabirbari tea estate.

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I was taken aback when I heard my daughter sing about what happens to drunkards and addicts. I thought it won’t be right if I continue to drink anymore, so I gave up liquor

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Krishna Tanti
Tea worker and
former alcoholic



Messaging through folk tradition

The adolescents could discover their potential and tap it to bring about positive change, thanks to a sustainable model developed by the Department of Cultural Studies, Tezpur University and UNICEF Assam. It was designed to use folk tradition for community messaging, so that adolescents can serve as agents for social change and community empowerment. Aiming to channelize the energy, enthusiasm and optimism of early youth, this initiative trained adolescents to use folk art to create content which can mobilize their community on issues which impact their lives. "Adolescents were the target group which we planned to equip with information and life skills, to sensitize them about the evils which afflict their society, so that they in turn could deliver the message onwards to their community. The inter-gender and inter-generational dialogues which this model encouraged would contribute to the initiative," said Dr. Jayanta Vishnu Das, Head, Department of Cultural Studies, Tezpur University.

In 2015, the 'Folklore for Social Change' initiative got underway in Sivasagar district. Five villages in Sapekhati block formed the initial target area, while Amguri, Demow, Mahmora and Nazira blocks were selected for further work. Adolescent participants from Tai Khamyang, Nepali, Bengali and tea tribe communities were trained in their folk songs, dances and tales. Through a prior survey, the major social problems of the area had already been identified, viz. dropping out of school, early marriage, substance abuse, poor nutrition, low awareness of family planning, lack of proper sanitation & hygiene, child labour

and exploitation, gender-based violence and mental health issues.

The initiative later covered other districts like Dibrugarh, Sonitpur, Golaghat and Kokrajhar. When the 4-year initiative elicited good response from targeted communities, it was developed into a self-sustainable model presently being followed by community-based groups across Assam since 2019. "Folk tradition belongs to the community, it is they who must take it forward in their own way. Our field investigators and folk tradition experts first trained up those who later became trainers themselves. It is they who are now carrying on the good work in the field," said Dr. Das.

The training leveraged folk art as an effective form of communication, for it makes every participant feel a part of it, encourages creativity and new ideas; people learn more not as receivers of information but when they participate in creative activities. It is well known that adolescents use existent cognitive structures to make sense of their surroundings. After the target area and community was identified and mapped, the project involved orientation programmes, workshops and training. Faculty members of Tezpur University, community-based organizations, key influencers like government school principals, folk artistes and community workers were brought together by orientation programmes; training modules to empower adolescents were developed in workshops; district level training of trainers (ToT) was provided to field investigators and folk artists; block level training was provided to adolescents in which folk artistes and folklorists helped adolescents create poems and lyrics, write scripts and compose songs in their language to deliver suitable messages to their communities.

But wasn't it challenging to plant social reform messages, for example, on folk songs – risking their rejection by the community accustomed to such songs having settled wordings? Dr. Das revealed that 'mapping' was done also of folk artistes 'who were already established performers'. Once they were sensitized by master trainers about the social evils in their community which needed to be addressed through messaging, it was left to them to design

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Adolescents were the target group which we planned to equip with information and life skills, to sensitize them about the evils which afflict their society, so that they in turn could deliver the message onwards to their community

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Dr. Jayanta Vishnu Das
Assistant Professor,
Department of Cultural
Studies,
Tezpur University

the messages and plant it onto folk art forms. Thus the risk of rejection was avoided. "When folk artistes in turn trained adolescent participants, they began talking about their folk tradition. This was an excellent means to let young people appreciate their traditional art forms and performers, practice and discover their own talent in it, and think about preserving their tradition. Our training structure made it clear that we were merely facilitators, that we were only providing the platform for folk artistes to display their expertise and knowledge and pass it on to the younger generation," explained Dr. Das.

Adolescents as change agents

Adolescents were trained because of their potential to transform the social, economic and health fortunes of society; it made good demographic sense because 21 percent of India's population is in the adolescent age group of 10-19 years. They grow up with a host of factors which induce in them negative attitudes and undermine their abilities to lead full and productive lives. The project objective was therefore to equip adolescents with information and life skills, to sensitize them on issue impacting their lives – so they could demand their rights; they would be trained as change agents communicating through folk art & tradition to mobilize their communities.

At a wedding in a tea garden area, as the groom's family danced the domkuch with gay abandon, adolescent girls trained in a folklore workshop sang with a message about the school dropout problem:

...Don't drop out of school,
You will regret later if you do so,
If we stand firm,
Labour won't burden us,
Our work now is to play and study,
To spend life in learning.

On nutrition, adolescent participants in another workshop had learnt about the nutrients they needed in their diet to be strong, energetic and healthy; the good food sources in their native areas and its priceless knowledge their communities possess;

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I helped in making my family and neighbours aware of the benefits of washing hands regularly, wearing mask, and to keep physical distance. I taught my younger siblings, children of the neighbourhood and also the elderly people why acquiring these habits pay off in the long run in remaining healthy and disease-free

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Reema Thakuri
Adolescent participant
Mahabirbari Tea Estate



the importance of making the right food choices; and how to address nutrient deficiencies. On anaemia – the condition of inadequate haemoglobin in blood brought about by iron deficiency – so common among adolescent girls, the following jhumur song was penned:

Low intake of salt,
Turns blood into water,
Don't give up the blue iron tablet...
Take deworming tablets every 6 months,
Anaemia won't trouble you...

On menstrual hygiene, the message is conveyed through this Diha Naam:

Don't worry when periods begin,
Wear sanitary napkin and go to school,
Wash thoroughly on those days,
Change napkins thrice daily,
Don't miss studies, school...
Dry your clothes in the sun,
Bury used napkins after setting these afire...

A Bihu song carries this message of routine immunisation for measles & rubella to expecting mothers:

From 9 months till 15 years,
Everyone must take these vaccines,
Else you will be sickly,
Pneumonia and diarrhea will take you down...
If rubella infection occurs at childbirth,
The child could become handicapped...

Folk tradition over Technology

"We have trained several thousand adolescents belonging to about 7 backward communities. At our workshops when they first spoke about how their social ills had hurt them personally, they would often break down. This helped them let go of long bottled up feelings in a receptive environment. They subsequently learned not just to perform, but to think broadly about these issues and how to handle them. Thereafter they have been passing on whatever they learnt to other young people who are their fellow members of youth clubs coming up in large number," said Shahnewaz Hussain, a field investigator. "Folklore intervention has proved effective in social sensitization and gender sensitization, as well as creating awareness against sexual violence, substance abuse and stigma related to menstruation," said Forid Islam Hazarika of 'Naba Udit Samaj', an NGO active in several blocks of Sivasagar district.

Intervention by stakeholders through folk songs & dances such as Bihu songs, Diha Naam, Biya Naam, Nisukoni Geet, Jikir, Oinitom, Kaban, Jhumur, Domkuch, Tusu Geet, Sangeeni, Bholly, Mukham, Khathung Tai etc has enabled adolescent facilitators to work for social and behavior change in their respective communities. "Our group composed a Diha Naam bearing messages of getting a good education and avoiding intoxicants. Whenever we perform, we take care to announce to the audience beforehand that our Diha Naam comes with certain messages, and that they should give us their feedback later. Their response has always been good," enthused Noorin Rahman. "I used to dance the jhumur for sheer pleasure, but I now know I can do it for good purpose," said Sunali Tanti.

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At our workshops when participants first spoke about how their social ills had hurt them personally, they would often break down. This helped them let go of long bottled up feelings in a receptive environment. They subsequently learned not just to perform, but to think broadly about these issues and how to handle them. Thereafter they have been passing on whatever they learnt to other young people who are their fellow members of youth clubs coming up in large number

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Shahnewaz Hussain
Field investigator



The Department of Cultural Studies, Tezpur University broke new ground by leveraging folk tradition as a medium for development communication. This is in marked contrast to those advocating technological interventions to bring about positive social change in backward communities. As the COVID-19 crisis has so far demonstrated, nations cannot mount effective responses unless there is a degree of mass understanding of an emerging threat and how to meet it. Such understanding can come about when messages of social value are delivered through local idiom. The project 'Folklore for Community Messaging: Adolescents as Agents for Social Change & Empowerment' has the right thrust for addressing the cultural diversity of Assam and broader Northeast India region.

[NOTE: The translated versions of folk songs have been given in this report]

// Folklore intervention has proved effective in social sensitization and gender sensitization, as well as creating awareness against sexual violence, substance abuse and stigma related to menstruation //

Forid Islam Hazarika
NGO 'Naba Udit Samaj'

Activities/Interventions

A self-sustaining model was created to use folk tradition as a medium for social messaging. Adolescents formed the target group to be trained as change agents who can pose questions to their communities about social evils that affect them, to seek their rights from their peers.

Identifying folk artistes and involving them as trainers gave them not just due recognition, but also the opportunity for inter-generational discourse with young participants in folklore intervention workshops. This brought about appreciation of folk tradition among the young and thereby a strong commitment for its preservation.

Adolescent participants got opportunities for inter-gender dialogue in the workshops on social evils. They could speak about their own painful experiences, which finally helped in catharsis and healing. Performing gave them confidence and helped discover their hidden talents.



Adaptations/Innovations

Folk art & culture was used as the medium to deliver messages to the community on education, health, livelihood and social reform. This approach has brought about active youth participation and community involvement, and is considered preferable to a technology-centered approach.

Adolescents were taught by trainers who were established folk artistes of their communities, which facilitated passing of expertise and knowledge. The participants in turn shared it with other adolescents in youth clubs.

Designing social messages and techniques of planting these in folk art forms were learnt, which the youthful participants have begun applying in social media

Output/ Outcome

The joint initiative of Department of Cultural Studies, Tezpur University and UNICEF Assam to create awareness against social evils through folk tradition has resulted in a self-sustaining model that is being implemented by various community-based organizations. Their continuing work has benefited different backward communities spread across the state, with field investigators reporting higher awareness levels in participants' families and neighborhoods against school dropout, forced marriage, child labour & exploitation, trafficking of children, alcoholism & substance abuse and domestic violence. A general rise in confidence levels among participants has been observed due to catharsis, purposeful cross-gender interaction, learning from community folk artistes and opportunities for performance and self-expression. During the pandemic, despite cessation of field activities and workshops, youths took to social media with poems, songs, videos and slogans on safe practices to avoid contagion, boosting bodily immunity through proper nutrition and ensuring better sanitation & hygiene. These trends carry the promise of behavioral changes for the better in future.sensitization of various levels of stakeholders. Success in community involvement and social mobilization by leveraging strong community values to contain the spread of novel coronavirus.





COVIDEXTERS

Best Practices During COVID-19

SBCC activities with
RADIO BRAHMAPUTRA



Classroom on airwaves

Two large districts in Upper Assam separated by the mighty Brahmaputra – Dhemaji on the north and Dibrugarh on the south bank. Education of poor children in both the districts was in a shambles due to a once-in-a-century pandemic. They had lost touch with teachers and lessons in the long months of lockdown, and it was already October. Over half the revised academic calendar was past, there was no knowing when schools would reopen. Then to their rescue came Radio Brahmaputra, bringing with it a band of dedicated teachers riding the airwaves.

“For three days a week, I would tune into the programme ‘Radio Porhaxali’. I loved the classes in which I could participate without being self-conscious,” said Basanti Hajong. The shy class VII student would listen with rapt attention, jotting down points swiftly on notebook as the teacher’s voice crackled from the radio set. After lessons, there would be question sessions and quizzes conducted by educational volunteers (Sikkha Bandhus) present with

them, who would connect them through phone to the teacher in the studio. It was this programme which helped Basanti pull abreast with her syllabus.

Basanti's grandfather is satisfied with the role played by Radio Brahmaputra in helping students with this programme when COVID-19 was in full cry. "We, in fact, are expecting better results from the children this year, despite all the disruption. Most of them have been able to cover their syllabus by now, thanks to this programme," he said. Expressing gratitude to Radio Brahmaputra and the teachers associated with the programme, Bachan Munda and Dipak Munda from Romai Bongali village in Dibrugarh district said: "We gather students at our home and help them do the lessons whenever 'Radio Porhaxali' is aired."

"With schools closed and students stuck at home as COVID-19 held sway, our teaching-learning process collapsed. It would have been tough for students to cover lost ground. Along came Radio Brahmaputra with UNICEF Assam, the Dibrugarh district administration, Education department officials and District Teachers and Resource group to start this programme targeting economically weaker students, primarily those belonging to the tea community," said Santosh Gupta, a teacher involved with 'Radio Porhaxali'. He added that radio was a convenient mode to communicate with students as many of them did not have smartphone, while power supply in the district remains erratic.

"We wanted to ensure students' participation in this programme. We succeeded, and made the teachers happy. This could happen because we would publicize the programme beforehand. Our Facebook page would carry well designed informative banners, giving full details of the timing, name of the teacher, class and subject for which the next educational episode would be aired. A two-way communication was set up – the teacher imparting the lesson would go on air and it would also be recorded and played on Facebook, while the student after listening could phone back to the teacher through the educational volunteer," said Bhaskar Bhuyan, Station Coordinator, Radio Brahmaputra.

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The lockdown severely impacted livelihoods. Small producers, vendors and daily wage earners were especially hard hit. We decided to give hope and show such people alternative sources and avenues to earn. They would phone in live to our studio and talk about their problems. We would suggest alternatives and announce their contact numbers for interested listeners to directly access their products or services

//

Bhaskarjyoti Bhuyan
Station Coordinator
Radio Brahmaputra



Voice to the voiceless

The first non-commercial, civil society run community radio station (CRS) in Northeast India, Radio Brahmaputra primarily serves local communities in Dibrugarh and Dhemaji districts, particularly the people residing in tea gardens, remote villages, river islands and sandbars. It aims to disseminate information on social, cultural and livelihood issues, as well as foster local cultures and talents. It broadcasts programmes in a variety of formats including radio and chat shows, music, plays, interviews, cultural events, information-based programmes, quiz shows for school children, special programmes for women and older people, public service announcements, among others.

Set up in 2010, Radio Brahmaputra 90.4 FM got license to broadcast in 2015. Supported by UNICEF, it has been giving voice to the voiceless by airing programmes in several local languages and dialects, including Mishing, Bodo, Sadri, Kuri, Bhojpuri and Hajong. The programmes cover issues across a wide range including agriculture, health, education, economy, environment, climate change and disaster relief. By taking up issues which matter to marginalized communities, it gets their direct involvement, along with local volunteers and community-based broadcasters. Participants speak into the microphone or face the camera operated by reporters or send audio/visual recordings or messages over social media.

'Radio Porhaxali' has been acclaimed as one of the most innovative of Radio Brahmaputra's offerings – an educational programme designed for students belonging to economically weak communities. To get a better understanding of what was needed, a survey was carried out on ground by a team of teachers, educational volunteers, students and guardians. Santosh Gupta recounted how the programme grew in

popularity to cover a large number of tea gardens in Dibrugarh district, char chapori areas in Dhemaji district and Nalbari Hajong village. "The participation rose steadily and we received good feedback from community members," he said.

This programme was marked by encouraging community involvement. Sikkha Bandhus, educated youths in a locality serving as volunteers, would facilitate reception at the ground by bringing together students to listen in community halls or under trees in open spaces, all following COVID-19 protocol of physical distancing, wearing mask and hand sanitization. After helping students phone in to teachers, the volunteers would send photos of listeners at 'radio class' to the official group of Radio Brahmaputra. For those who could not attend the programme's live sessions, Sikkha Bandhus would help them catch up with recorded videos available on the social media platform of Radio Brahmaputra.

Synergy with social media

"Due to COVID-19 fears, parents were first unwilling to send their children for radio classes in the courtyards, fields or community halls. But we managed to convince them about how their children's studies were lagging due to irregular power, phone network issues and lack of smartphones. Eventually they relented. I would help the students with homework, and to those who missed classes or wanted to know about a concept more thoroughly, I would access the lesson archived in Radio Brahmaputra's Facebook page," said Junmoni Hajong, a Sikkha Bandhu.

Radio Brahmaputra exemplifies the power of convergence media, a community radio station bringing together traditional and digital modes of communication on a common platform. This made its programmes 'Radio Porhaxali' and 'Okonir Porhaxali' widely followed during COVID-19 disruption. Feedbacks could be typed on phone or written on paper and the image sent to a dedicated WhatsApp number or through Facebook.

"As it was a new initiative, we had to make sure the chapters were completed properly. It wasn't difficult



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Due to COVID-19 fears, parents were first unwilling to send their children for radio classes in the courtyards, fields or community halls. But we managed to convince them about how their children's studies were lagging due to irregular power, phone network issues and lack of smartphones. Eventually they relented
//

Junmoni Hajong
Educational Volunteer

with short chapters, but if a chapter extended to 4-5 pages or more, it became necessary to verbally solve the questions during the radio class. To test students' understanding, we held quizzes as soon as class ended, and they would send replies to our WhatsApp number," said Santosh Gupta. In order to make the classes more interactive, the programmes were aired live. Having tasted success, the initiators are planning to add a dramatic element to the programme and take it up to panchayat level to attract more students.

Guiding through the pandemic

As Assam, battling community transmission of the novel coronavirus, went into lockdown, Radio Brahmaputra came into its own as a guiding voice. "We began airing COVID-19 oriented radio programmes and spots in Assamese, Bengali, Bodo, Kuri, Mishing, Hajong, Garo and Tiwa languages to raise awareness. On March 25 itself when countrywide lockdown began, we broadcast an interview of the District Joint Director of Health, which provided basic information to listeners about this rapidly evolving threat to public health. At that time, most people were unaware of the power of this new virus, how it spread and infected people, the harm it caused to their bodies. Our initiative went a long way in informing people, so they could take precautions without being panic-stricken," said Bhaskar Bhuyan.

Thus began a daily 2-hour Radio Live broadcast with information on COVID-19, the latest WHO and UNICEF guidelines, daily updates from Ministry of Health & Family Welfare (MoHFW), State NHM website and social media posts, and district health administration bulletins. Listeners were kept up-to-date with the latest guidelines/SOPs/testing centers/quarantine & follow-up norms, helplines and other relevant information. A special program 'Katha Covid' and its Sadri counterpart 'Baat Covid Kere' shed more light on pandemic-related issues. Soon live programmes began with various government departments like Health and Social Welfare, police administration and others about the activities they were undertaking to tackle the crisis.



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With schools closed and students stuck at home as COVID-19 held sway, our teaching-learning process collapsed. It would have been tough for students to cover lost ground. Along came Radio Brahmaputra with UNICEF Assam, the Dibrugarh district administration, Education department officials and District Teachers and Resource group to start this programme targeting economically weaker students, primarily those belonging to the tea community

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Santosh Gupta
Teacher with
Radio Porhaxali



Responding to public concerns over mental health due to pandemic fears, lockdown frustration and social isolation, a programme with doctors of Psychiatry department of Assam Medical College on mental health management was broadcast. There were also broadcasts to help pregnant women and people suffering from various ailments in accessing treatment facilities, as most of the hospitals were treating only COVID-19 patients. There was 'Doctor Mama' and a programme on parenting guide. Mindful of the mischief that can be wrought by 'Infodemic' during pandemic times, Radio Brahmaputra aired a programme to enlighten people on fake news, with one show conducted with Dr. Anamika Ray Memorial Trust (ARMT). Its thrust was to help people identify fake news, judge news sources and how to use social media. On the education front, along with 'Radio Porhaxali', there was 'Okonir Porhaxali', a programme produced and hosted by Anganwadi workers for the benefit of children (as Anganwadi centers too were closed during the pandemic).

"The lockdown severely impacted livelihoods. Small producers, vendors and daily wage earners were especially hard hit. We decided to give hope and show such people alternative sources and avenues to earn. They would phone in live to our studio and talk about their problems. We would suggest alternatives and announce their contact numbers for interested listeners to directly access their products or services," said Bhaskar Bhuyan. Radio Brahmaputra would talk to farmers in the fields about the status of their standing crops; in one episode, a milk seller from





Samaguri, Nagaon district shared how he switched over to milk products like paneer and rasgulla which he could preserve longer and sell from home. With such caring approach, Radio Brahmaputra fulfilled its role as a grassroots community radio station, ever ready to guide listeners and walk with them the extra mile.

Activities/ Interventions

Radio programmes and spots in Assamese, Bengali, Bodo, Kuri, Mishing Hajong, Garo and Tiwa languages broadcast with basic information on COVID-19.

Daily live programmes for 2 hours to keep listeners up-to-date with the latest advisories/guidelines/SOPs from WHO, UNICEF, MoHFW, NHM and district administration

Special in-depth programmes on pandemic like 'Katha Covid' aired

Live programmes with Health, Social Welfare and other government departments and police administration on activities and schemes during pandemic



Programmes aired to sensitize people on fake news; one show conducted with Dr. Anamika Ray Memorial Trust (ARMT).

Mental health programme aired with doctors of Psychiatry department, Assam Medical College on mental health management.

Programmes on community medicine, treatment for pregnant women and patients of other diseases, other medical issues during COVID-19

Educational programme 'Radio Porhaxali' helped schoolchildren from backward communities cover lost ground in syllabus with teachers broadcasting lessons from studio; students in turn phoned in queries and answered quizzes routed through educational volunteers.

Another educational programme for little children 'Okonir Porhaxali' produced and hosted by Anganwadi workers.

A series of programmes on seeking livelihood solutions and alternative sources of income aired for the benefit of listeners who had lost jobs and businesses during lockdown.

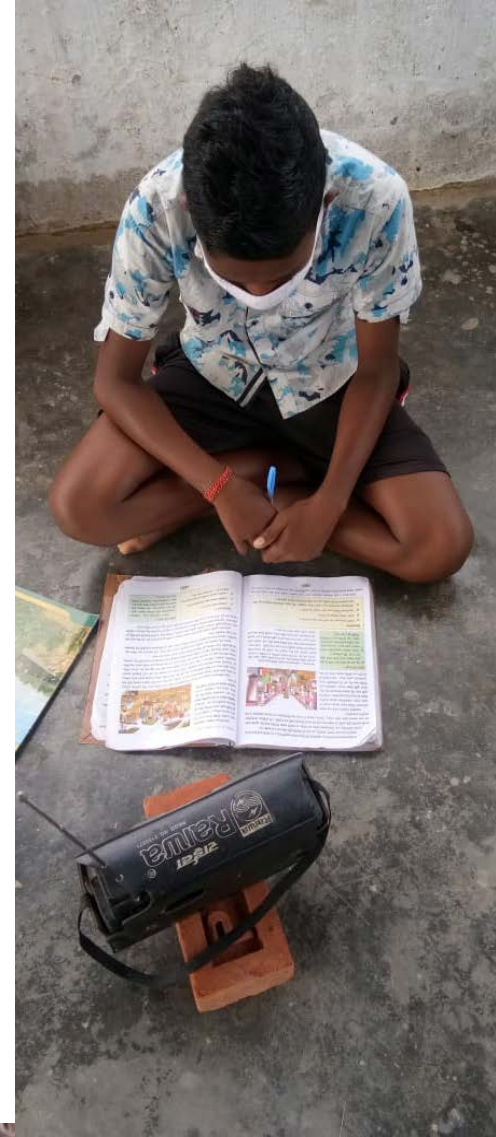


Adaptations/ Innovations

‘Radio Porhaxali’ was an educational programme with a difference, because it ensured 2-way communication by enabling students to phone in through educational volunteers to teachers in the studio.

Social media was used extensively in synergistic manner to publicize, store and disseminate programmes.

Widespread loss of livelihoods during lockdown was dealt with by a series of programmes which sought solutions, suggested alternative sources of income and facilitated producer-consumer direct contact.





Output/ Outcome

Radio Brahmaputra fulfilled its role as a civil society-led community radio station by airing a bouquet of programmes designed to inform and educate about the COVID-19 pandemic, as well as to bring about social and behavioural change among listeners. Keeping its focus on backward communities whose lot it aims to improve, it broadcast programmes on latest authoritative guidelines and SOPs, health bulletins, testing & treatment facilities, quarantine centers, helplines and government schemes for public benefit during pandemic times. Teachers were involved in airing lessons to students, and in turn the participation of students by phone-in was facilitated through volunteers. Other programmes tackled mental health issues arising from lockdown and enforced isolation, loss of income and menace due to wide circulation of fake news. Alternative sources of earning were suggested as part of seeking livelihood solutions due to business and job losses. opportunities for performance and self-expression. During the pandemic, despite cessation of field activities and workshops, youths took to social media with poems, songs, videos and slogans on safe practices to avoid contagion, boosting bodily immunity through proper nutrition and ensuring better sanitation & hygiene. These trends carry the promise of behavioral changes for the better in future. sensitization of various levels of stakeholders. Success in community involvement and social mobilization by leveraging strong community values to contain the spread of novel coronavirus.

COVIDEXTERS

Best Practices During COVID-19

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