

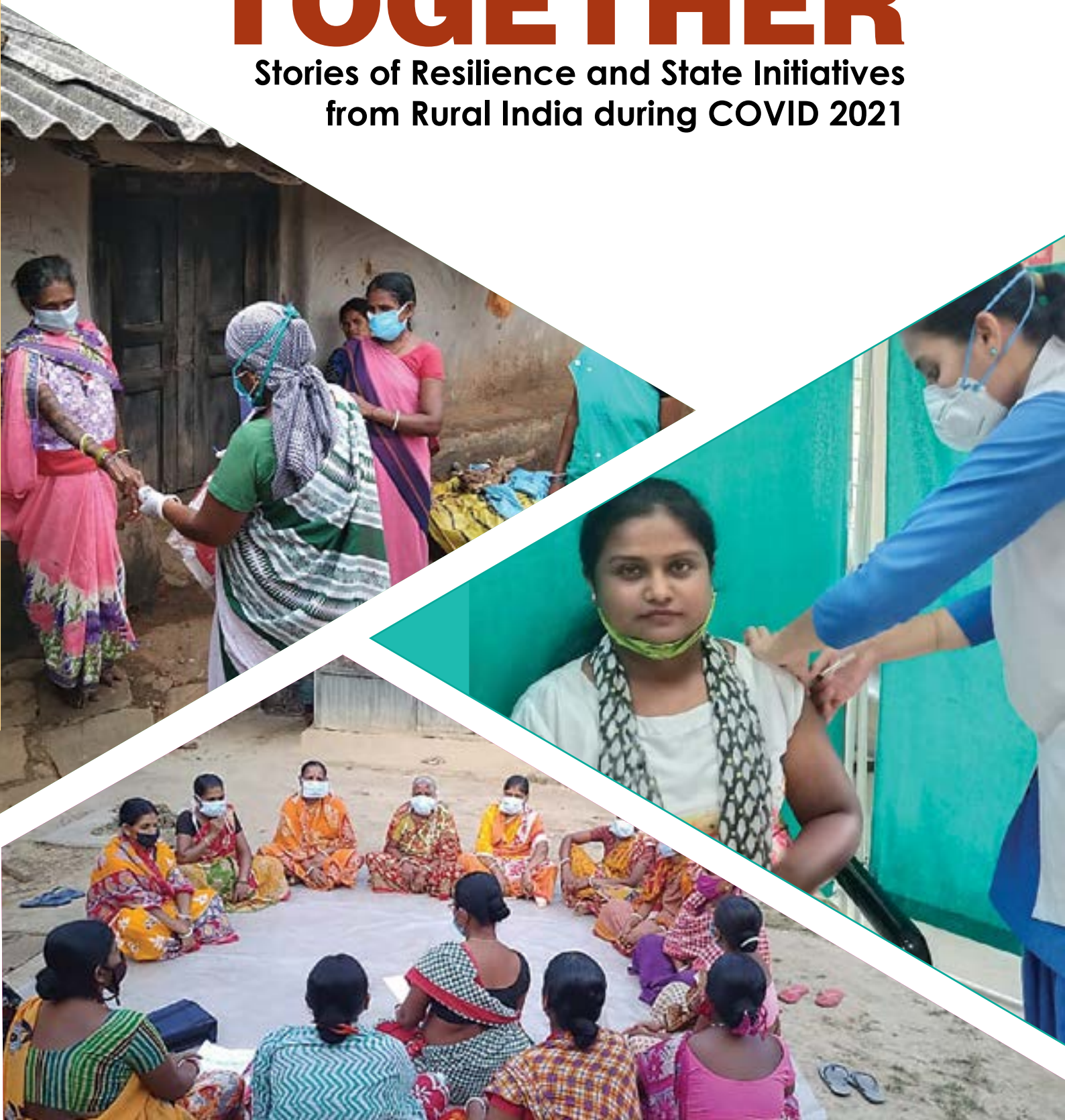


Ministry of Rural Development
Government of India



RISING TOGETHER

Stories of Resilience and State Initiatives
from Rural India during COVID 2021



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from Rural India during COVID 2021



Ministry of Rural Development
Government of India



Deendayal Antyodaya Yojana - National Rural Livelihoods Mission (DAY-NRLM)

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June 29, 2021

Message

Ministry of Rural Development (MoRD) is the nodal Ministry for most of the development and welfare activities in the rural areas and plays a pivotal role in the overall development strategy of the country. To fertilize its role, MoRD launched Deendayal Antyodaya Yojana - National Rural Livelihood Mission (DAY-NRLM) with its key tenet to reduce poverty by enabling the poor households to access gainful self-employment and skilled wage employment opportunities, resulting in appreciable improvement in their livelihoods on a sustainable basis, through building strong grassroots institutions of the poor.

COVID-19 pandemic has been around since March 2020 and just when the country was slowly moving back to normal, the second wave of COVID-19 pandemic hit hard the population. In combat response, State Missions under DAY-NRLM marshaled and undertook various context specific initiatives to address the situation. They stepped up to generate awareness on vaccine and reinforced COVID appropriate behaviours through various mediums and technological platforms, supported in establishing home quarantine centres and helplines, mobilized people for vaccination, supported in ensuring food security of the needy and provided special funds to meet the requirements. The initiatives are clear reflections of state missions' ability to innovate and vigour as they quickly channelized their efforts to meet immediate needs of the community.

It is my pleasure to present this compendium that captures the relentless efforts made by our State Missions during second wave of COVID 19 pandemic. One of the key learning of this compilation is that state missions' led contextualized solutions are the most effective when supported by host of convergence partners, local governments and technical support agencies.

This can be utilized as a guide and reference for policy and programmatic decisions and a repository for cross learning for replication of efforts in future. I applaud the commitment of everyone involved and deeply appreciate the commitment to service that led to creative solutions of unanticipated and unstructured problems.

(Nagendra Nath Sinha)

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MESSAGE

India has just seemingly undergone through the peak of second wave of COVID-19 pandemic with continuously increasing number of cases in past. With states being under lockdown for most parts, the livelihoods and social development aspects hit the lowest once again. India has introduced the COVID-19 vaccination, however, COVID 19 preventive behaviours still hold the utmost important and it is advisable to keep following those.

Ministry of rural Development (MoRD)'s state missions along with the network of Self-Help Groups (SHGs) and its federations provide an institutional structure to deliver the right kind of services and reiterate the right kind of messages in the community to encourage adoption of practices recommended with regard to response and containment of COVID-19. It is encouraging to know that State Rural Livelihoods Missions (SRLMs) have taken various initiatives for addressing the COVID-19 outbreak related issues in a timely manner. Ranging from creating awareness on various aspects (vaccine, COVID appropriate behaviours, home management) to mobilizing community for vaccination to ensuring supply of the most critical services to providing medical and COVID Kits to allocating funds to meet the specialized demands, state missions have not left any stone unturned to ensure optimum addressal of the adversity. Partnering with other stakeholders and use of technology platforms have doubled the impact.

This compendium provides the glimpse of the initiatives undertaken gives recognition and applauds the leadership of various state missions. Against the backdrop of myriad of COVID 19 challenges, the efforts of state missions exhibited great resolve and their capability to triumph in any situation. When everyone was suffering, they showed us the way that coming together to help each other is the way to go. I am sure that these initiatives have the potential of adaptation and duplication in future if any need of such a magnitude arises.

(Alka Upadhyaya)

NITA KEJREWAL
JOINT SECRETARY



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Message

Since the start of the year 2020, the world has been facing an unprecedented public health crisis caused by the COVID-19 pandemic. Many people have died due to this disease so far and this epidemic has also disrupted the livelihood of millions of people globally. The Government of India is making several efforts to curb the disease by creating awareness about COVID-19 and providing preventive, diagnostic and curative services.

Deendayal Antyodaya Yojana-National Rural Livelihood Mission (DAY-NRLM) aims to create efficient and effective institutional platform for poor women of rural areas to increase household income through sustainable livelihood promotion and better access to financial and selected public services. It is heartening to know that state missions and their community institutions have played vital role in mitigating some of the adverse effects of the pandemic. Their efforts are the reflection of their tireless spirit and passion to serve community in the best possible way. This compendium highlights that focused support was extended to the communities to fight COVID 19 crisis that multiplied their needs to address gap in their understanding and knowledge, to instil more confidence about vaccine & dispel myths and to provide support to other critical services crucial for COVID 19 management.

I am pleased to take this opportunity to give the brief look, acknowledge and hail the initiative of hosted by different state missions. Amidst COVID 19 difficulties, the endeavours of state missions displayed extraordinary determination and their ability to win in any circumstance. Time and again, our state missions have proved that they are one of the strongest pillars when it comes to serving the community. I wish you all a great success.

I acknowledge the efforts of FNHW team of National Mission Management Unit, DAY-NRLM for conceptualizing, anchoring and editing this compendium. I also thank state mission teams and technical partners including TA to NRLM, ROSHNI Centre, CDCC, PRADAN, TRIF and IWWAGE for their contribution in developing this document.

(Nita Kejrewal)

FOREWORD

The second wave of Covid swept across India in the first few months of 2021. It caused extreme miseries not only in the form of loss of livelihoods but also number of infections and deaths. This wave was much severe than the first wave and gripped both urban and rural parts of the country. The rural community which was already reeling under the onslaught of the first wave.

Ever since the first wave, DAY-NRLM has been relentlessly pursuing activities to reach out to its over 7 crore women members of more than 69 lakh SHGs with information, trainings and guidelines to help them brace the situation. It makes us extremely proud to see that our women members – the Didis – have shown exemplary mettle and taken the Covid wave with chin up. They have not only been a pillar of support for their family but have been a beacon of light for their community and their villages.

The Ministry has continued to take lead in its support to the State Missions and SHG women collectives by issuing advisories and guidelines to help and facilitate implementation of programme and awareness generation for combating Covid. Online trainings were regularly conducted to build the capacities of the SHG members for their support to their communities and the local health initiatives.

This compendium, 'Rising Together' is a testimony to the humungous efforts of our thousands of women of the women's collective who have put service before self to ensure health and safety of their respective communities. These Sakhis and Didis have helped in ensuring supply of essentials and essential services, meeting the demand of masks and sanitizers, supplying PPE kits, awareness generation for vaccination and then ensuring that it does happen. The cadre was also involved in providing services as varied as Psycho-social support, Transportation support, running Covid help-desk and war rooms etc.

Our SHG members are at the core of the programme. Time and again they have performed beyond the expectations and strengthened the programme.

DAY-NRLM expresses gratitude to our Covid warriors, our Didis, for their efforts in this most trying time. We present this compendium as a tribute to their hard work and dedication.

Exemplary efforts of State Mission teams, Self-Help Groups (SHGs) and their federations inspired this documentation. Anchoring the Covid activities, FNHW team of National Mission Management Unit, DAY-NRLM steered the conceptualization and development of this compendium. Technical partners including TA to NRLM, ROSHNI Centre, CDCC, PRADAN, TRIF and IWWAGE extended their support in content development. TRIF also supported in designing and finalization of the compendium.

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NATIONAL INITIATIVE

As on April, 2021, the Deendayal Antyodaya Yojana- National Rural Livelihoods Mission (DAY-NRLM) is being implemented in 6,757 blocks in 705 districts across all 28 States and 6 UTs. In 6758 blocks and 705 districts. Women mobilized: 7.59 crore, SHGs: more than 69 lakh, 4.05 lakh VOs and 30709 CLFs. Further, the SHGs have been federated into 4.03 lakh village level federations and 30,609 cluster level federations.

With this large network of community institution and social capital developed under DAY NRLM capacity building efforts are being undertaken to reach out to the rural poor to provide information on Covid related issues e.g appropriate behaviours, vaccine, management of mild and asymptomatic Covid cases at home, promote good health seeking behaviour and immunity building measures etc.

Along with the capacity building efforts, relevant advisories on awareness generation on Covid and related issues were issued to sup-

port community institutions during the pandemic and also on their roles in addressing issues emerged due the Covid outbreak.

Covid response was initiated by DAY-NRLM during the early stages of the pandemic, in May-June 2020 and then during the second wave i.e April-May, 2021 when a series of trainings were organized for all State Rural Livelihoods Mission (SRLMs) on Covid prevention and management related messages.

1 Advisories issues during May-June 2020, on awareness generation and capacity building :

A. Advisories:

Issued an advisory on 11th March 2020 informing SRLMs about awareness generation on Covid through SHGs and mass gathering etc. Subsequently, advisories on maintaining social distance, care of elderly, building immunity, address myth, psycho social issues of migrants,

maintaining mental health and well-being, promotion of Aarogya Setu App, coordinate with frontline workers of other Ministries on Covid activities etc were issued along with the technical content developed by MoHFW. Depending on the need, SRLMs were also advised to initiate community kitchen, ensure food security for vulnerable population.

B. Capacity building: National training on 'Risk Communication for Prevention of Spread of Covid in Rural India'

The first few Covid cases were reported from India in Jan- Feb 2020, following which the number of cases steadily rose to 500,000 by June 2020. Responding to this escalating crisis, DAY-NRLM in association with NIRD-PR, technical partners and SRLMs conducted training from the national level down to the SHG level in a coordinated effort to disseminate messages on Covid prevention to rural women across the country.

Under the guidance of Secretary, MoRD, a cascade training model was developed in which training was imparted to the State, District and Block Resource Persons (BRPs) by the technical team from the national level. These trained BRPs then trained selected Community Resource Persons (CRPs) who further trained the SHG members. This training was entitled 'Risk Communication for Prevention of Spread of Covid in Rural India'. DAY-NRLM also developed training modules, material, tools and aids to facilitate training upto the SGF level and shared with the SRLMs.

Between 2-9th June 2020, nine training sessions were held to train State, District and Block Resource Persons. After the master training, SRLMs rolled out the field training following Covid guidelines issued by the state and district administration. For monitoring the progress, the data on number of persons trained was captured on an MIS. A Dashboard was updated daily at the national and state level to review the progress of training activities. Women SHG members sensitized community and fellow SHG member households on maintaining distance, wearing masks, regular handwashing, importance of good health and hygiene, do's and don'ts of Covid, care of elderly, stigma, violence against women and children, psychosocial support, children, nutritious foods, myths, mental health etc on Covid pandemic through home visits and during SHG meetings.

C. IEC campaign on Covid:

With the support of MoRD IEC Division, RL Division has participated in the Campaign for Covid appropriate behaviour launched on 8 Oct, 2020 in view of festive season. An online



Following were trained on Covid:

- 20,065 Mission Staff, District Resource Persons, Block Resource Persons
- 5.10 lakh Community Resource Persons, Community Based Organization Staff, Gram Rozgar Sahayak, Anganwadi workers, ASHA, PRI members
- 5.10 crore SHG members in 3.24 lakh villages

(As on 31st August, 2020)

VC meeting was held with all the State Missions chaired by JS-RL II. IEC Division has shared the creatives and the template to promote Covid appropriate behaviour and the State Missions have diligently followed to the core. Advisories and letters were issued. As on 11th Jan, 2021, more than 3.35 lakhs letters and 136.75 lakh SMS have been sent, 101.80 lakh WhatsApp message reached through 7.02 lakh WA groups, 54.30 lakhs outdoor messages have been sent. Other initiatives include Miking/projected; headcount 290.38 lakhs by 95,932 no of messages, social media: 11,134 messages through twitter, facebook, instagram and YouTube reached 4.55 lakh, Jan Andolan Pledge: 6.50 lakh offices (including community institutions offices) wherein 73.75 lakh have participated and 3.40 lakh influencers reached 121.74 lakh.

D. Production of masks, sanitizers, hand wash, protective gears etc:

Women SHGs and their federations initiated numerous activities to support the poor and needy members and the rural community at

large, during the Covid pandemic. Women SHG members-initiated production of masks, sanitizers, hand wash, protective gears, community kitchen, supplied dry ration, fruits and vegetables to the poor and needy following the advisories of the Ministry of Health and Family Welfare and Ministry of Consumers' Affairs. Their contribution in the current pandemic situation has been enormous as mentioned below:

- More than 2.96 lakh women members from 58,581 SHGs have come together to produce more than 22.54 crore face masks across 29 states.

- 4.8 lakh ltrs of sanitizer was produced by 13,662 women members from 17 states.

- 1.02 lakh ltrs of hand-wash was produced by 1,790 women members across 10 states.

- Over 6585 women produced more than 35.61 lakh protective gears across 13 states from (March to July, 2020).

- Women members had set up more than 12,000 community kitchens across 4 states served more than 6 crore meals to the vulnerable and migrants.

E. Door step banking services:

During this pandemic SHG women have been providing banking and financial solutions by acting as banking correspondents. The efforts of SHGs became predominant in ensuring banking and pension services available in the rural areas, since March, 2020.

- As of 23rd June, 2020 under Pradhan Mantri Garib Kalyan Yojana (PMGKY), DAY-NRLM has transferred Rs.30,956.90 crore benefiting 20.65 crore women Pradhan Mantri Jan Dhan Yojana (PMJDY) accounts holders in 3 instalments (April,

May and June, 2020).

- SHG members positioned as B C Sakhi (Business Correspondent Agents) with Banks played a critical role in providing doorstep financial services to the rural poor during this period. Between 25th March 2020 and 31st January, 2021, approximately 13420 B C Sakhis have conducted 184.81 lakh transactions amounting to Rs. 5076.77 Crore;

- The Mission also facilitated the transfer of about Rs. 30944.90 crore benefiting 20.64 crore women Pradhan Mantri Jan Dhan Yojana (PMJDY) account holders under the PM Garib Kalyan Yojana (PMGKY)

F. Livelihoods support:

Producer Groups and Producer Enterprises have procured more than 25,502 MT of fruits, other agriculture and milk since April, 2020, more than Rs.94.13 crore to support small farmers to market the perishable items like vegetables and fruits, promote nutri-gardens of individuals and community to boost immunity and ensure food for nutritional security. Some of the SHG members have provided cooked food to the quarantine centres, using protective gears. Nutrition baskets were provided in some of the quarantine centres where pregnant mothers were stationed.

G. Documentation on Covid:

Various initiatives taken up by the SHGs and their federation and stories of resilience by women SHGs in addressing issues faced by the community during pandemic under the DAY-NRLM have also been documented and uploaded on the Ministry's website:





■ 'Covid Response by Women SHG Warriors' - Initiatives by DAY-NRLM SHGs during the Covid pandemic. https://ajeevika.gov.in/sites/default/files/nrlp_repository/Covid%20Response%20by%20Women%20SHG%20Warriors.pdf

■ 'Community and Institutional Response to Covid in India: Role of Women's SHGs & NRLM'. <https://bit.ly/376BWVU>. The same has been uploaded in the website https://ajeevika.gov.in/sites/default/files/nrlp_repository/Swayam-Report.pdf

2 Advisories issues during April-June 2021, on awareness generation and capacity building :

A. Advisories:

■ An advisory dated 27th Jan, 2021 was sent to the SRLMs regarding support in Covid vaccination drive to the concerned department. State teams were advised to support D/oHFW in vaccine roll out, engage SHG for social mobilization and awareness generation.

■ An advisory on planning and dissemination of IEC materials on Covid vaccines was issued on 1st Feb, 2021.

■ Another advisory dated 13th May, 2021 has been issued on creating awareness amongst the rural community on management of Covid and related issues emphasizing on awareness generation on home isolation of mild/asymptomatic Covid cases, encourage SHG members and their households to take vaccine and mobilize communities for vaccination etc.

B. Capacity building:

National training on Covid Vaccine, Covid Appropriate Behaviours, Health Seeking Behaviour and Immunity Building measures, Home

Management of Mild Covid and Black fungus infection

During the months of mid Feb – early May 2021, a second rapid surge in number of Covid cases was observed across the country. Within a short period of 7-8 weeks, the number of cases rose from 10-12,000 new cases and 80-90 deaths per day to a peak of 400,000 new cases and 4000 deaths per day.

Secretary, MoRD directed DAY-NRLM to conduct another round of training up to the SHG level on Covid Appropriate Behaviours, Covid Vaccine etc to contain the spread of corona virus in rural areas. DAY-NRLM along with the technical support agencies developed a cascade training program and conducted training on reiterating emerging

During April, 2021, training program on Covid Appropriate Behaviours, Covid Vaccine, Health Seeking Behaviour and Immunity Building measures was developed and rolled out training for trainers.

A training module on Health Seeking Behaviour and Immunity Building measures is developed under Food, Nutrition, Health & WASH (FNHW) component of DAY-NRLM. It aims to promote good health seeking behaviours amongst the rural community covering public health and nutrition services, FNHW activities under DAY-NRLM, entitlements, insurances, infection prevention, immunity building measures and role of staff and cadre.

The National Mission Management Unit (NMMU), DAY-NRLM conducted training for trainers was conducted on 9th and 12th April 2021 for the identified State, District, Block Resource Persons. An orientation on training content and expectations from SRLMs was held on 8th April, 2021 with all the SRLMs representatives from IBCB -SISD vertical. One day prior to the orientation, JS (RL-II) conducted a Video Conference on 7th April, 2021 with the SRLMs to inform them about the importance and objectives of the scheduled training and preparations required at the state level to complete the training in a time bound manner.

Training was conducted in twenty-one batches to train the master trainers of all the SRLMs by the teams comprising of resource persons from NMMU and technical support agencies. Efforts were made to make the training participatory and participants were asked quiz based on the content of the training, encouraged to ask questions in the chat-box, clarify their doubts which were answered during the session. At the end of the training, participants also filled a feedback form.

During May, 2021, another round of training for State, District and Block resource persons was organized on 'Home Management of Mild/



Asymptomatic Covid cases.'

As the Covid surge continued and progressed to rural areas in the latter two weeks of April 21, it was reported that several SRLM staff and their family members were getting affected by the disease. The number of cases and deaths in rural areas saw a steep rise. Therefore, a training on Home Management of Mild/Asymptomatic Covid cases was organized on 7th and 11th May, 2021 for representatives from all the SRLMs. They were also encouraged to conduct the training up to the SHG level. An interactive question and answer session was also held with a Medical Specialist from AIIMS, Jhajjar who is managing the Covid ICU.

The issues covered during the training were symptoms of mild Covid, home isolation and precaution, proning, breathing exercises, role of family in care for patients, measures to prevent spread of infection, measures to be taken when single room isolation is not possible and whole family is affected, identification of worsening symptoms, mental health, vaccines, myths, role of staff and community cadre etc.

A package of training material including power point presentation, handouts, compiled relevant advisories from M/oHFW and M/oWCD to conduct training of master trainers and at community level was developed. To prepare the training materials, Covid guidelines/advisories circulated by M/oRD, M/oHFW, M/oAYUSH, M/oWCD and other relevant documents of the

Following have been trained:

- 14,000 Mission Staff, District Resource Persons, Block Resource Persons from all the SRLMs were trained.
- 2.2 lakh CRPs trained
- 2.4 lakh community cadre/CBO staff
- 52 lakh SHGs in 1.73 lakh Gram Panchayat
- 5.57 crore SHG members in 3.9 lakh villages

(As on 17th June, 2021)

Government of India available in the public domain were referred. All the resource materials were shared after the training and participants were informed to further train CRPs, who would train other cadres and SHG women.

Following Covid guidelines, master trainers trained community cadre who further trained SHG members and their families online, telephonically and physical meetings. Training are being conducted despite challenges like Covid cases amongst the SRLM staff and cadre, their family members, restriction in movement in the field, locked down due to Covid etc. Messages regarding Covid appropriate behaviours and efforts are also being promoted in social media at the national and state level.



SHG Resilience



JeevikaSakhi providing succour to the needy

The JeevikaSakhis shared that the pandemic has not only caused financial loss but also resulted in several health related issues. Although not all SHG members have been infected with the disease but the COVID 19 emergency has impacted them in multiple ways. Many note that the situation and the conditions around

them was very stressful. One of the Jeevika interviewed narrated,

'Though my immediate family was not infected with the disease but it affected adversely. My 18 years old son who recently got enrolled in a college could not attend because of the pandemic. It became very stressful as we did not have adequate facilities for online education. Many people in my extended family got infected with COVID-19 and I could not visit them. This disturbed me to a great extent. The emergency situation also created difficulties in our livelihood. Although my husband

is a dealer for the Ration shop, we also used to sell vegetables grown in our backyard. However the COVID 19 situation impacted our farm products resulted in economic losses.

Other JeevikaSakhis/CRPs also noted similar ordeals and shared that the farmers in their villages have felt severe impact because of the pandemic situation. Many members of their SHG groups shared similar stories. However she shared that she is happy with the fact that SHG members who got infected have recovered or are now recovering.'

A CRP member added that the human loss in her village specifically demise of a member's husband has been very shocking for the entire SHG. She shared,

'Although no one in my family is impacted but I was deeply

shocked by the grief of my colleague who lost her family members. There has been deaths in some of the households in my village as well.'

Apart from these grim incidences, the JeevikaSakhis shared that the pandemic has interrupted regular activities such as operation of markets etc resulting in adverse impact on their livelihood and day to day life.

One of the Jeevika Sakhis shared that the workload at home has increased but her husband supports her in the daily household chores. Another narrated, 'The workload has increased during COVID19 situation. I think that is common for women every where when we stay at home, the extra demands from family members increases our engagement in cooking, cleaning etc'.

Financial hardship is also very common during pandemic, specifically repaying of loans, and EMLs. The husbands of many SHG women are daily wage earners who could not find work. Those who owned small shops were also severely impacted.

Though problems were mainly at the individual level, SHG group members tried to find collective solutions. One of the major ways for connecting with each other was over phone and WhatsApp groups. This helped in overcoming in several emotional and psychological hardships.

Moreover, many SHG women were benefitted from decisions such as allowing them to pay their instalment later since daily subsistence became more important for many families. Support was extended to them through training on COVID 19 precaution and awareness on vaccination.

The SHG members met in an open space in a group of 6 – 7 members maintaining physical distancing and wearing masks. The activity started around April 15 and ended on April 25 2021.



'The information shared during the training focused on basic precaution of COVID 19 and the symptoms during the second wave. I used the materials shared by the district team on WhatsApp group. We also received training on this. One of the major objectives was to reduce vaccine related fears among women in SHGs. Many women in the SHG groups feared that the vaccine would lead to other health issues and will have fever. During the training I tried to respond to their concerns and the myths around vaccination. I told them that vaccination does not completely control the disease but atleast it will heavily reduce risks. Now many women in my village are ready for vaccination. Some have already received,' says Purabi from Hajo Block.

Additionally they shared importance of handwashing, maintaining physical distance, sanitisation and keeping a check on their health with group members.

SHG members received online training at district office conducted by SMMU. Materials on COVID 19, vaccination etc were shared with them over WhatsApp group. Also

they have been sharing information on entitlements. One of the JeevikaSakhis shared that the women enquired about the PDS scheme and if there is any additional benefit given.

'A few of the SHG members who did not have ration card enquired on how to avail these. During this COVID 19 emergency ration received at PDS shop has been a great relief, specifically for most vulnerable households and families who has lost their livelihood or are daily wage earners. A member recently asked me if there are any additional ration given during the emergency since her husband who is a wage earner is unable to find work, shares Renu from Hajo block in Kamrup.

The following actions were undertaken to address this situation:

■ One of the Jeevika Sakhis shared that they are reaching out to their fellow members going door to door to enquire on their well – being, health and other needs. As far as products are concerned the SHG members have sold masks.

■ They have kept themselves up-

dated on vaccination dates and other COVID care facilities available in the village so that the same can be disseminated to other SHG members.

The field activity was undertaken from April 13 to April 25, 2021 including training of the JeevikaSakhis .

The Mission supported in terms of resource materials on COVID 19 and the training provided to the Jeevika Sakhis to build their capacities for further dissemination of information and generate awareness among the SHG members.

All four Jeevika Sakhis shared that their families have supported them. One of the Jeevika Sakhis narrated,

‘My family is aware of my work. They have not prohibited me from carrying out any activities. However since I have to do field work, my family and I take necessary pre-

cautions.’

SHG members used their smart phones to show the resource materials shared by state office while spreading awareness among members of the SHG. VO level whatsapp groups also proved useful in dissemination of information.

The four Jeevika Sakhis shared that reaching out to their family members have helped them psychologically to deal with the impact of COVID 19. At the same time they had to ensure taking precautions in their families as well since they went out to conduct training although the number of COVID cases was low. For many members in SHG they used the SHG network to take loans for subsistence during the COVID 19 pandemic

As a way forward Jeevika Sakhis shared that additional and re-

resher training on COVID 19 was needed and how the SHG women can cope with the impact of the pandemic in terms of their mental and financial well being will be a benefit. Such preparedness can help in dealing with emergency situations in better and planned manner specifically for the vulnerable households.

‘The poor and those who has temporary jobs suffer the most. If our members are taught well in terms of how to cope with such emergencies and work towards recovering own health and economy then this can be highly beneficial in dealing with such emergency situations. For example since we have been trained on kitchen gardening and how this can help in sustaining own health and income during COVID 19 situation by locally selling vegetables can help’, shares Sufia, one of the JeevikaSakhi from Block Rowta.



Experience makes one wiser

Mrinalini Saharia, an SHG member since last five years lives with her husband and children in the beautiful village of 1 no. Padumoni under Paschim Sarupathar Panchayat. She runs a grocery shop and cultivates mushrooms to earn their bread. Like many others in her village, her life too was impacted by COVID, especially her household income.

Her village had multiple positive cases, some of whom lost their lives to COVID. Although, she and her family were spared and no one in her family died but her business, especially mushroom cultivation suffered immensely. There was literally no market for the mushrooms she had cultivated and the grocery shop made little to no income during the partial curfew. Moreover, she had to throw away most of her mushroom produce due to lack of a market.

Mrinalini's family went through not only financial difficulties but

also mental stress and some health issues.

Though COVID second wave hit hard, but she was not prepared to give up. She had been through the challenges of the first wave. She had attended two rounds of training on COVID 19 prevention and ways to overcome related challenges. She was not only prepared to address her challenges like scarcity of food, health issues and loss of income, but also intended to help her village overcome this.

This time she was ready with a kitchen garden to tackle the scarcity of food for her family. Necessary ration items were stocked for the lockdown period.

She used her COVID trainings and her responsibility as a CLF president to ensure that the key messages regarding, COVID prevention, treatment of mild symptoms and vaccination reached her family as well as her entire village. Being a change leader her family was

amongst the first few in her village to get vaccinated. She was provided support at each step by the staff of BMMU, CRPs as well as the members of her CLF and SHG.

At the CBO level various COVID awareness activities were con-

ducted. Rations were also provided from CBO level to the needy members of the society. Mask and sanitizers were also distributed to the needy people during the crisis. Whatsapp groups were used to make COVID related information available to the community in a timely fashion. VRF was used to tackle any health emergencies. Mrinalini was at the forefront of all such activities. She also helped the villagers to book vaccination slots through smart phones.

As a result of her action, she was applauded widely by the villagers and the other members of the CBO consider her as an example to overcome this type of crisis or pandemic in the upcoming future.

Mirinalini made up for some of the loss through income earned by her through her COVID related activities. Her genuine efforts to help her co-villagers, created a very positive image and business gained momentum in no time post lockdown.



Leading from the front

Lakshmi Devi is an inhabitant of Hatogaon Pt-I Village of Dhamar Gaon Panchayat under Lakhimpur Development Block, Goalpara, Assam. She has been living with her husband and two child[r]. Even though she has not lost someone close to her family during this pandemic but she had to face a lot of challenges during the pandemic. She is a SHG member of Soali Atmo Sahayak Got and President of Mulagabhoru Village Organization.

Since a major part of her income is derived from agriculture, she faced difficulties in selling the farm produces like rice and vegetables as the weekly haats were also closed. During this Covid-19 situation interactions with the community got affected as the community members did not welcome each other to their respective homes for

day to day discussions due to the fear of Covid-19. It has really affected the bonding of the community members.

The entire village was under the fear of covid-19 as few of the villagers including SHG member and closed ones of SHG members were tested positive. One more huge challenge was conducting marriages, religious activities and other social ceremonies. Also, restrictions on movement from one village to another have affected the overall social environment of the village.

Being the President of her Village Organization she did door-to-door campaign, distributed food both from VO and also personally to a total of 90 plus SHG households from her income source. This process took almost one week.

Mulagabhoru Village Organization initiated a camp on Rapid Antigen Test (RAT) at Dhamar Gaon Panchayat under the guidance of BDO, BPM, ANM and ASHA worker. Around 60 plus SHG members including her VO members took part in the test. The only challenge was to convince the SHG members to come and take the test due to the fear of testing positive during the test as well as the fear that entire village will come to know about this. Lakshmi Devi has played a pivotal role in persuading the SHG members to come and take the test to remove the fear out of them and thankfully none of them tested positive. Any social initiative taken by Lakshmi Devi is fully supported by her family member.

It definitely had a positive impact in the mind-set of the SHG members regarding covid-19 testing as it removed the fear to a great extent. It also brought a great sense of positivity to the community members. Being a leader of a CBO definitely helped her to persuade fellow SHG members. In this process her SHG members also helped her spreading the message that we all should follow Covid-19 appropriate behaviours and do the testing.

Distributing food to elderly community member during Covid-19



Distributing food to elderly community member during Covid-19

As she is already a President of Mulagabhoru VO, she directly got the information on Covid-19 appropriate behaviours, precautions and guidance on overcoming the challenge from Mission staff and as well as Jeevika Sakhi.

Information on Covid Appropriate Behaviours (CAB) such as maintaining social distancing, washing hands regularly, wearing of masks, good food and nutrition for boosting immunity especially for pregnant women and lactating mothers during this isolation period received directly from Mission staff.

Initially it was difficult for her and her family members to cope up with the covid-19 situation which arise due to sudden lockdown but gradually she mentally prepared herself as well as her family members as she understood that the only way to fight this battle is to follow the CAB and making her community members aware of this pandemic.

Everyone hopes that the Covid situation ends and life normalizes soon so that more community based activities can be taken care of.



Together we will win



I would like to request the Mandal Gender Committee and the Village Associations in all the villages to work together in their villages to support the people who are in distress and provide better life to them.

Mrs. Battula Sampatamma is a resident of Harijanwada of Satukupado village, Parkasam District, Jarugumalli Zone in Andhra Pradesh. She along with her husband and grandchildren were infected with coronavirus. Though symptoms were minor but they self quarantined themselves in home. The family struggled for food and medicines and was going through a very difficult phase of their lives. They had no one to help them and Mrs Sampatamma suffered from panic attacks. At that time, they thought of to access the support from the village Organization. She contacted her village Organization over phone and requested them to support her with a humanitarian perspective.

The village Organization informed the Mandal Level Gender Committee about the matter. The members from the Gender Committee, Mrs. Kantu Lakshmi Prasanna and Salagatla Kameshwaramma, along with the three members of the Gram Sangha (Nallaguntla Seethamma, Addanki Padma and

Sannagura Sivamma) visited the family. They provided assurance to help the family in every possible way. They also provided appropriate medicines and fruits.

This way, with the help of the village Organization and the Mandal Samakhya level Gender Committee, all family members become mentally strong, confident, and recovered from the coronavirus. Medicines and food were supplied to them on time. Also due to the training given by the committee to the village group they were able to get proper care with empathy and understanding. Now the family has recovered and living a healthy life. On behalf of the village group, especially on behalf of her family, Mrs Sampatamma expressed her heartfelt thanks to everyone who has supported them in this crisis, gave advice and assistance. She says, 'I would like to request the Mandal Gender Committee and the Village Associations in all the villages to work together in their villages to support the people who are in distress and provide better life to them.'



The resilience of the Bastar didis

Since 2017, VO members under the Chhattisgarh Rural Livelihoods Mission have been supporting delivery of maternal and adolescent nutrition services to the last mile under BIHAN's Swabhimaan Programme. Through this programme, the Chhattisgarh Rural Livelihoods Mission has taken leadership to

build capacities and awareness of its cadre on nutri-specific and nutri-sensitive food, nutrition, health, WASH and gender issues. This was to address the high prevalence of malnutrition in the state, and also from the realisation that high levels of health expenditure kept women from breaking out of poverty. Focussed efforts in this domain over the past four years enabled women collectives to support their communities during the national and state level lockdowns, announced to contain spread of the Covid virus. This case study highlights the collective action taken by didis in Bastar, and their efforts to support food

and nutrition security for women, and families in their community.

'Many women and families were struggling because of lost livelihoods. We felt responsible to use funds from our VO like the vulnerability reduction fund to support our other members who were unable to put meals on the table,' explains Nirmala Thakur, Poshan Sakhi and member of Grameen Mahila Gram Sangathan, Karandola village, Bastar. Data collected through telephone surveys with 61 VOs conducted via BIHAN to understand the status of activities carried out via Poshan Sakhis during the first phase of the Covid pandemic in June 2020 found that nearly 91% of VOs used the VRF to provide food grains and vegetables to adolescent girls and women, 82% used it to provide vegetables, and basic rations to other vulnerable families (82%). 'Many of our VO members

had trouble getting ration. We bought green vegetables, grains and daal, and distributed these to families," informs Sambati Kashyap, Treasurer, Indravati CLF, from Tikanpal village. The same survey found that 50% VO leaders reported using the VRF to provide eggs to women and adolescent girls. Families with at-risk women and children were being linked to agri-poultry and social protection schemes. "BIHAN has made me confident about managing funds, and I wanted to use this skill to support other women to access interest free loans during this emergency" informs Sambati Kashyap when asked her experience of Covid response. "Over the past three years we have also learnt about nutrition and health, so we were able to prioritise these needs during the lockdown," she adds Sambati also highlighted that buying soap was not a priority for families who had lost their livelihood and so the community institutions stepped in to promote handwashing, and wearing masks "We distributed soaps, sanitisers, and masks for people and wrote important messages on the walls. Every week, we asked families what challenges were facing them and tried to address these," she explained.

Poshan Sakhis reported having their own reservations about conducting home visits. Especially when this was on foot in the peak of summer "It was hard for us to leave the house. We were also scared, and our families were uncomfortable with us going door to door because of fear of the virus. But because I had other VO members helping me, this gave me confidence. We carried on with consent from Mukhia ji (PRI leader), explained Lalita Kashyap – a Poshan Sakhi and member of Sheetala Devi, VO from Karandola of Cham-
iya CLF. She said these individual monthly home visits to at-nutritional risk adolescent girls and women for nutrition counselling were important because ration shops were closed and medical supplies had run out. 70% - 80% of Poshan Sakhis reported that these home visits were conducted jointly with either



Accredited Social Health Activists (ASHAs), Auxiliary Nurse Midwives (ANMs) or Anganwadi Workers (AWW). This also helped women to access services from Village,

Health, Sanitation and Nutrition Day (VHSND). The Poshan Sakhis also developed nutri-gardens in their homes so that at-risk women and girls could access vegetables.



A Good Samaritan in Covid times

Shreya Mandrekar, resident of Moira, Bardez Block, Goa, is a well known community worker in the area. Through her amazing work she has developed trust in her community. Her husband and a 21 years old son have been always supportive and encouraging in her work.

She says, 'Since I have joined the Self Help Group under Goa SRLM it has transformed me. My self-confidence and my knowledge about various schemes have increased'. She has attended several trainings under SIRD Training Centre and now she is able to train other peer workers. She works as a Community Resource Person at Moira in Bardez block. She states that working for her community gives her immense satisfaction and this has helped her to serve her people.

During the pandemic time, Shreya had initiated Covidsensi-

zation drive in her village. She has been actively participating in vaccination drive as well as motivating other people to take the vaccine. She also informed that there were many challenges during this drive as people were afraid to take the vaccine but after sharing her own experience with the community she has motivated them to get vaccinated.

She has also provided groceries and made oxygen cylinders available at the doorstep of the Covidpositive people in her village. She has delivered medicines and the PPE kit by maintaining confidentiality. Shreya is thankful to God for giving her good health and she believes that it is her duty to serve her people in the village and her constituency and all this good work



Ponda:
 Grocery and
 Essential Distribution

has been possible because of her supporting family.

Presently she runs Community Kitchen with the help of two other CRPs - Sushma Naik and Shilpa Bhagdi. This initiative got the sponsorship of a local advocate. On a daily basis they are able to provide 250 tiffin services to the Covidpatients who are quarantined. She shared that the food is prepared at her home kitchen with Covidprotocols in place.



Bardez:
 Mask Distribution

Shreya is proud of her work as it is appreciated and duly recognized in her village by the PRI members and staff of Aldona PHC. She feels

that during such difficult prevailing times she is able to contribute positively by taking care of her community.

Empowerment through SHG

Sushma Naik stays with her husband and her mother at Aldona. Her husband worked in a catering unit that was shut down due to the Covidlockdown. She works under Goa SRLM as a CRP and now she is also trained to work as an auditor. But it was not so before 2010. She underwent lot of mental tensions, as she could not have a child. This not only affected her mental health but her relationship with her husband also deteriorated. But in the year 2010 they formed a Mahila Mandal under the guidance Mrs. Parulekaer that allowed her to engage in many activities like Dan-

diya dance, Fugdi and Community Kitchen Melas etc. In the year 2012, Rekha from BDO office gave her idea of forming SHGs and taking the benefits of the schemes under Goa SRLM. She was chosen as a treasurer. In the year 2016 she mobilized the women in Bardez block to join the Streeshakti Project.

Sushma informs that after joining the Streeshakti group her confidence has boosted and now she is able to conduct SHG meetings and utilize her time constructively. Last year she was able to do more activities. During the lockdown she

coordinated with the SHG women and motivated them to stitch face mask and sell them at a reasonable price. This year she is assisting in Vaccination awareness drive, giving medicines to Covidpatients and helping Sherya Mandrekar in managing the Community Kitchen. She is serving around 159 Covidafected families.

Sushma said that before nobody knew her but now people know her and they appreciate her work. Those who criticized her initially, now take pride in mentioning that Sushma is their neighbor.



Where there is a will, there is a way



In 2020, the first wave of the Covidpandemic and resulting lockdown hit the country, causing loss of life and livelihoods. Even as people struggled to recover their social and economic activities, the second Covidwave struck with

doubled ferocity causing great devastation. Unlike the previous time, during the second wave, rural life too was heavily affected.

At this point, the Commissioner and the Secretary, Rural Development together floated the idea of

convergence between SHGs under NRLM with MNREGA, for generating a stable income. This would prove to be a visionary step for the way ahead, providing a unique solution for an assured income to SHG households enabling them to

withstand the losses caused due to the pandemic.

Usually SHGs have to be dependent on Bank loans, that they pay back to the Banks with interest, while the difference of interest rate in the Community Investment Fund (CIF) would only be their profit. Under the MNREGA women get wages for the work done as well as assistance for the materials. Thus, the financial risk is almost nil and remuneration is assured. This has brought about a sea change among the life of women SHGs in the rural areas.

The "Thol Cluster Sakhi Mandal" is a glaring example of such resilience created through convergence. The Mandal is formed at the village Laxmanpura of Kadi taluka in Mahesana District. The Organization was formed by uniting ten SHGs of the Village. Almost all the members survive on agrarian activities and animal husbandry and are from different casts. The Village Organization was efficiently performing regular meetings and internal finance and recoveries etc.

The second wave of pandemic played spoilsport for the routine activities of "Thol Cluster Sakhi Sangh". The members were struggling individually for support. Officials from the Taluka paid a visit to this Organization to discuss their problems and constraints. The officials from Rural Development advised the members to converge the SHGs with MNREGA, and proposed to establish a nursery for assured employment to the members while the Village Organization acted as a Project Implementing Agency (PIA). The innovative way for resilience opened a new horizon.

The Laxmanpura Village Panchayat allotted a piece of land to establish a nursery to the Village Organization as a PIA. This materialized due to the intervention and efforts of the MD GLPC and District Development Officer, The Director, DRDA and the teams of NRLM and MNREGA, but this was a first step. The women members of the Village Organization did not have acquired skills for rearing a nursery, though they had experience of agricultural work. The necessary



support was provided to them by the Forest Department and they organized a visit to the nursery run by "Vanzari Mission Mangal

Sakhi Mandal" at Nargasan in Kadi Taluka. The demonstration brought confidence among the members and the mission got momentum.

There are executive guidelines in place, jointly prepared by GLPC and MNREGA division of CRD under the guidance of the Secretary and Commissioner, Rural Development. MNREGA sanctioned Rs. 4, 20,000/- to establish a nursery. Now the women members of the Village Organization are earning gracefully through this activity and assured wages through MNREGA job card.

This is how the resilience could be brought through the visionary decisions of the Secretary and Commissioner, Rural Development and synchronized efforts of the field officers and willingness and co-operation of the stakeholders.



Under the MNREGA women get wages for the work done as well as assistance for the materials. Thus, the financial risk is almost nil and remuneration is assured.



Promoting vaccination through women champions



Rania block of Khunti district in Jharkhand, includes 7 Gram Panchayats and 66 villages, where a total no. of six women are working as Setu Didis who have been identified and deployed by 3 Cluster Level Federations (CLF), that were formed of 51 Village Organizations (VO), 578

SHGs. Setu didis were promoting Covid19 appropriate behaviors, Covid Symptoms, importance, and need of Testing & vaccination, tracking migrant laborers, Nutritional food diet in the community through CLF/SHG/VO meeting in

the community and ensuring to follow up the eligible cases through meetings and different other events.

Setu Didis with support from the concerned SHG groups have

played a significant role in the 1st phase of vaccination aged from 45yrs and above. During the 1st phase of vaccination, due to the common adverse effects like high fever, body ache weakness, etc many people at communities developed confusion about the efficacy of the vaccine itself. It was also associated with social stigma, rumors, misconceptions, and misinformation among people, that vaccination itself is leading to severe illness. These factors led vaccine resistance within community set up and they started refusing to get vaccinated and tested for Covid-19.

To break these misconceptions and misinformation among people in the community Setu didis with technical support by TRIF, acquired technical knowledge and skills to respond to Covid crisis, and started engaging themselves with Mukhiya and Ward member of the Panchayat, CLF leaders, VO members etc, to promote community ownership and participation by spreading true and necessary information. Displaying IEC during CLF/VO/SHG meetings, conducting rallies and spreading positive messages on WhatsApp etc were some of their strategies to address misconceptions and taboo related to vaccination. Through these strategies they could work with women collectives to ensure 10716 no of people to be vaccinated and 18000 people to be mobilized and undertook Covid testing in that block (as of 31st May, 2021). Similar experiences are being observed from the engagement of TRIF in 38 blocks from 5 selected districts in Jharkhand where around 38000 SHGs are being coordinated by the respective CLFs through the identified Setu didis. The process has led to ensuring more than 1 Lakh people to get vaccinated till 31st May 2021 in these five districts. For doing these Setu didis are following localised strategies with differential approaches to convince people in accessing to Covid services like Vaccination.





Savitri Devi, the Covid warrior from Gumla

In the recent past, the second wave of the Corona Pandemic created mayhem in the whole country, and the state of Jharkhand was also badly affected. Numerous people were affected. Unlike last year, this time, rural areas were also witnessed a very high number of cases everywhere. Thus, it was important to aware the rural mass regarding the preventive measures of Covid and about the vaccination.

JSLPS (Jharkhand State Livelihood Promotion Society) came forward

with a clear-cut strategy to create a massive level of awareness among rural masses to prevent and curb the spread of the virus. To achieve this goal, once again, like last year, JSLPS reached all the Sakhi Mandals in remote rural areas. 23 Lakh of Women Sakhi mandals were given offline and online awareness training to the women members. These women further generated awareness in their own villages. Sakhi Mandals were once again united against the spread of Coronavirus in the rural areas of Jharkhand. These rural women spread awareness regarding the spread of Covid and the ways to prevent the spread. In addition to this, they made all people aware of the importance of vaccination to prevent the disease.

Savitri Devi, a resident of Patsaar village, Jarmundi block of Gumla; is a member of Radharani Aajeevika

Mahila Sakhi Mandal. She is one of the thousands of corona warriors of Sakhi Mandals who made a tremendous contribution in spreading awareness about the pandemic. Constant efforts of Savitri increased awareness regarding Covid in her own village. She motivated more than 115 villagers to come forward and get vaccinated. Savitri shared her experiences and stated, “ It is a hard time for everyone but we can overcome this situation only when we are together. I have been working as a Community Coordinator and spreading awareness about government schemes in the villages. It gives me immense pleasure and pride when I am able to do something for society.”

Savitri Devi received training for spreading awareness regarding Covid through JSLPS. It was difficult for her to mobilize villagers in the beginning as there was a lot of myth and misconceptions regarding the pandemic and effect of vaccination. But slowly her efforts yielded results and the people of her village started coming forward for vaccination and started following standard preventive measures. Savitri emphasized on the usage of masks and regular washing of hands. Savitri is one of those 23 lakh women of Sakhi Mandals who were trained and are still constantly trying to spread awareness regarding Coronavirus in villages.

Across the districts, trained women of Sakhi Mandals are spreading awareness regarding Covid and the standard preventive measures to control its spread. These trained women are taking the help of posters etc in specially organized meeting and are even moving from door-to-door so that the awareness reaches to the very last member of the family, in the remotest of villages. In West Singhbhum, members of Sakhi Mandals are moving door-to-door with ANM of the village and still now mobilizing people for vaccination. They are propagating safety measures (such as usage of mask, regular washing of hands) and to stay at home and to step out only when necessary.



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It is a hard time for everyone but we can overcome this situation only when we are together. I have been working as a Community Coordinator and spreading awareness about government schemes in the villages. It gives me immense pleasure and pride when I am able to do something for society.”

These women of Sakhi Mandals have declared a war against the pandemic.

Efforts of these women are showing up results in form of the increased number of vaccinated villagers. These women of Sakhi Mandals are acting as Covid Warriors, working in the frontline to spread awareness regarding preventive measures to all the rural families.





Taking adversity head on

Latha, is 45 years old and has a family of 4 members. She is part of Omkara Sanjeevini Mahila Okkuta GPLF, Shibaje GP, Belthangadi taluk of Dhakshina Kannada district, Karnataka. She has completed her secondary pre-university college.

She is a Master Book Keeper (MBK), and her family consists of her hus-

band and two children. The family lives in the hilly area of Shibaje GP. The major source of their family's income is from agriculture. Hailing from a hilly region and working as an MBK, she has regular issues in commuting to the SHG households within her GPLF. However, the issue persisted since long especially during rainy season but these days due to COVID restrictions and lockdown, the difficulty worsened. It was kind of a terrifying experience for her and her family when her neighbour's entire family were infected from Covid and one of the elderly persons passed away due to severe infection. Shibaje and its surrounding villages receive

poor mobile network connections as well, making it more difficult to provide or receive any immediate services via phone call.

Lockdown, has made her days more socially active. Earlier all the members used to come and discuss or had meetings at the GPLF centre. But now, the added responsibility on her shoulder is that she along with other GPLF members have to visit all the households for delivering food kits to the needy at their door steps, spreading awareness regarding vaccination and other appropriate behaviours.

It was a tough situation for different people like our community cadres, GP members, health workers, Anganwadi workers in order to deal with the villagers. This is because, most of them were reluctant about getting tests done initially even after having symptoms, some were hesitant about shifting to the Covid -19 care

centres even when there were no other family members to take care of them during the infection. Apart from all this, there were also days when they had to deal with heavy floods as well, blocking the roads, disturbing the natural system and so on.

Since hers was an agricultural family, they did require more man power in the farm to help with the food crops but during lockdown due to Covidfear there was a lack of people who could help them in the farm activities. She, being an MBK and in order to fulfil her duties like spreading awareness on prevention of Covid and appropriate behaviours towards the infection, distributing food kits and masks, promoting vaccination etc., had to spend extra hours in field. Due to this, she lagged behind on her responsibilities at home and had frequent differences/arguments with her husband, which went to an extent where he was not letting her to continue to go out for carrying out any task. But not too lately, her children made her husband realise that her role in delivering certain services of what she was doing was of utmost betterment for the people around. After which she got some support from her family.

She could not spend enough time with her children and family members. She did have fear of contacting with infection but still chose to work no matter what with abiding by to all the precautionary measure of Covid 19. Their investment in terms of farming went low due to non-availability of agri labourers for work, and she herself could also not work. Commuting extra miles and ensuring that she reaches every household was very much crucial and an added responsibility during the second of Covid-19. Along with this convincing people on taking vaccination was another challenging factor for her along with ASHA and Anganwadi workers.

She was regularly receiving sufficient materials on awareness and Covid precautions from the DMMU and TMMU staff which were being shared by SMMU. These were the materials which were collated from the state's IEC materials and a



few resource materials like PPTs on appropriate behaviour and how to manage mild Covid symptoms at home which were shared by NMMU. Whatsapp groups of GP, TMMU, and DMMU were of great use to communicate the information.

She along with other GPLF members and ASHAs, PHC nurses, Anganwadi worker, undertook door-to-door campaign regarding vaccination. They have distributed masks and food kits in collaboration with Panchayath members even to the remotest places by walking to each poor household. They have also spread word about the nearest Covid care centres and facilities provided there. Though there were frequent network issues, she also tried her best to keep constant communication with few poorest households through phone calls and visited them when required.

All the afore-mentioned activities were undertaken during the lockdown period from April 2021-June

2021. Gradually, in the beginning of the June month, her family supported her in accumulation of funds and they themselves purchased some food grains and vegetables to be distributed as food kits to the needy. To this particular GPLF, the members also received Rs. 1 lakh as VRF, which was further provided to the poor members of the SHG, with no interest repayment later on.

She was finally, successful in convincing her husband and continued her services to the SHG members in these crucial times. She gained confidence to work even in adverse conditions. Her networking with other line department staff has improved. The trust within the community is retained and the motive to do some unique activities has grown. Continuing with this, in the upcoming days, she with the help of TMMU staff and GPLF members of Sanjeevini-KSRLPS, including the local GP members, aims to develop kitchen gardens to support the family's access to some home-grown vegetables.



Led by Example

Vimala Bhanwar lives in a small house in the Ajanda Village. She is a mother of three children - two daughters and one son. Daughters got married and son works as a driver. Vimala didi and her husband do daily wages work as a means of livelihood. During the lockdown not only Vimala didi and her family but many of the families from her village faced an economic crisis for daily living.

The total number of households in the village is 600 out of this about 250 families depend on daily wag-

es. There are total 18 SHGs in the village but due to lockdown regular weekly meeting of SHGs and VO got affected.

About 20 people got infected with Covid and two of them did not survive. Most of the patients suffered from typhoid as they were not willing to go for proper treatment. The problem is amplified amongst migrant labours. Lack of health facilities as well as food security were the major challenges during lockdown for both daily wages labor as well as for small vendors. Young children also faced

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Most of the patients suffered from typhoid as they were not willing to go for proper treatment. The problem is amplified amongst migrant labours. Lack of health facilities as well as food security were the major challenges during lockdown for both daily wages labor as well as for small vendors.

problem as Aganwadi centres were not functioning.

Vimla didi played a role of as facilitator for MNREGS and distribution of dry ration. She also led the awareness for vaccination. Not only she is motivated the VO members but also villagers for vaccination. Vimla didi is identified as a change vector for governance (voluntary Badlav didi) under the Mission Antyodaya program supported by TRIF. She received training and orientation on governance offline and online on the issues of rules, entitlements and good governance from TRIF.

Understanding situation and the need of the villagers she demanded work for 30 families under MNREGS from Panchayat and as a result all 30 families got the work during the tough situation of lock-

down. She informed and motivated villagers for social distancing and regular hand wash. She supported and ensured distribution of dry ration to eligible beneficiaries. She did this tremendous job during both the lockdowns with continuous support from TRIF's governance partner organization Samarthan.

kindness and helping attitude she is now an icon of her village. She represents her SHG at every social event in the village. Members of the group admire her and want to follow on her footsteps. Vimla didi used her knowledge and trainings for the betterment of her village. She was the person to refer to for her villagers during the severe crisis of Covid. She is continuing with her efforts to secure her village and presently she targets 100% vaccination for all the eligible member of the Ajanda.





Facilitating free ration distribution

The second wave of Covid has undoubtedly struck the whole nation far worse than the first wave and the gravity was also witnessed in the rural areas of the country. The condition of the rural was not just affected because of the exodus of returnee migrants this time but more because of the deaths and dreads they were witnessing. This wave has taken a major blow on the livelihood of the population as well as people were struggling to make a living. Considering this the government launched an initiative of providing free ration for the people in rural areas for three months, the highlight of this

initiative was that the people that don't even have a ration card can also get the free ration conditioned on them being registered on what is called the "Khadhyan parchi".

Sondwa is one of the most remote areas of western Madhya Pradesh and it lies in the Alirajpur district of India which is one of the most poverty-struck districts on the multi-dimensional poverty Index. The majority of the population in Sondwa is illiterate and due to poor availability of resources, the communication channels aren't well established naturally hampering the awareness of the people.

This case study is about two

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Sondwa is one of the most remote areas of western Madhya Pradesh and it lies in the Alirajpur district of India which is one of the most poverty-struck districts on the multi-dimensional poverty Index.

women Surma Kemta and Jhinli Egriya of village Semlani who are also the change vectors (badlav didi) of governance and have been constantly engaged with TRIF. These two women took charge of creating awareness among their village on the distribution of free ration for the vulnerable households and spearhead the whole movement. These women did door-to-door awareness also identifying the most vulnerable families to assist them in availing the free ration. These women were also helped by the staff of our governance partners and governance prerak in the whole movement. By the end of the process, these two women

identified 20 vulnerable households that didn't have a ration card. They mobilized these families and contacted PRI members to get them registered. Then they facilitated the process of getting them registered on the Khadhyan Parchi. But their fight wasn't over yet, they then led these two families to the ration shop based in Semlani and ensured that these families receive the ration as well. By their relentless efforts, altruistic approach and proactiveness helped these 20 households are receiving the free ration in this time of crisis and that is helping them to cope up with these difficult times and making them be back on their feet again.





Kavita Gedam, the Covid warrior from Gadchiroli

Kavita Gedam, a resident of village Yevali, Gadchiroli block of Gadchiroli district; is a member of Annapurna SHG. She is one of the thousands of corona warriors of SHG trained by MSRLM who made a tremendous contribution in spreading awareness and other supports during the second wave of COVID-19.

Kavita Gedam, belonging to a middle-class family, depends on farming and their SHG business of apparel for their livelihood. To support her family, she learned stitching which enabled her to generate additional income. Later, the interventions of Umed-MSRLM provided a platform to capacitate herself in realising her skills and empowering her both socially and economically.

The covid-19 pandemic and subsequent lockdowns generated fear among people which eventually impacted in shutting down the businesses across the state. Also due to strict restrictions against

public meetings, gathering, Marriages etc. the amount of work to be generated was lowered and hence the income from her business was fully stopped. This made difficult for addressing the basic needs of the family such as incurring for health treatment, household activities, etc.

After approaching of second wave, the conditions became worse which affected the village areas. Like others Kavita and other around 2428 villages of her village were suffered in which 9 people were severely infected. Inadequate access to primary health care facilities and most of the family having less space and more numbers of members caused rapid spread of covid-19. The most important factor is poor literacy regarding government norms for covid-19 precautions and vaccination.



Mobilization of People at vaccination centre



Food for migrant people at school quarantine centre



Small sari centre business established by Annapurna SHG

Recognising the inaccurate awareness among the rural people, NRLM implemented Covid-19 Campaign across the country. "The training conducted by Umed-MSRLM on Covid 19 awareness, appropriate behaviour and Vaccination has bridged gaps for me as well as my village to tackle the and controlled the spread of diseases in a more informed manner for which I am greatly thank full to the team", says Kavita Gedam. Also, this enabled her to become a trainer herself and she contributed in creating awareness through wall painting and conducting training to the community while maintaining the necessary Covid -19 norms. She also became an aid for her family as well as her village by utilising her skills of tailoring and making masks. This resulted in generating income for her family and fulfilling needs of her children while also selling the mask at rate Rs. 20 per piece to district health department and made turnover of Rs. 1.26 lakh by Shop established by her and her SHG

member with the help of Mission. The Mission provided Rs. 2.5 Lakh under Hirkani schemes.

She has proved herself on being an asset for mobilising the best practices and build awareness about accountability in one's health care by educating the Covid -19 patients about the importance and necessity of institutional quarantine. Under this campaign, she along with her team member reviewed the present scenario and collected the real time data which helped district health department to take immediate actions upon the people not following the rules out of fear. This enabled the victims to recover under supervision of health care workers. She also motivated the family members of the victims to undergo RTPCR test and keep themselves in home quarantine to break the chain. With the help of VRF fund of Rs. 4000 from Jijau Gram Sangh, her team provided necessary food supplies to the Institutional quarantine centres.

Her team helped the health workers to manage to keep migrant population returning from outside states and districts for undergoing mandatory 14 days quarantine in Schools before their departure to their respective homes. In order to fight the prevailing uncertainties, Jijau Gramsangh supported for formation of kitchen garden in poor households to supplement their income. Sanitizers, Mask and medicines were also provided for maintaining healthy environment.

Kavita Gedam has now been chosen as a Gram panchayat member of her GP- Yavali considering her unconditional services and devotion towards the human kind. "The Umed- MSRLM provided me proper guidance which made me realise my potential and helped me to become a support for backing the future of my family and my village. This has motivated me to work more for my family and society which ultimately provides me lasting happiness and fulfilment".



Surviving to help survive

Joy Dkhar lives with her father and siblings. She has lost her beloved mother in this pandemic. The deepest sorrow and heavy heart has covered the family during that time. She feels that she has lost everything in her life. All the daily activities have hampered in the family during that time. The major challenges faced by the family during that time was that, they didn't have enough money to pay the hospitalization bill of their mother. So with God's blessing fortunately the VO from that village came forward and gave a helping hand in payment of the hospitalization bills.

The lockdown further affected her and the family in all the sector of the life (economically, socially, and mentally). Since there is a restriction of movement in their village, so they could not go out of their village to do their daily earnings hence it totally affected their income generation and also the livelihood activities. Besides, social gathering were banned, moving from one place to other was also restricted in the Village. Stigmatisation also happened in the village for the family as their mother was infected. Hence, with all these reasons, they found themselves that they were totally isolated from the society. Being in Isolation felt like a mental torture to them. The family felt stressed for the most duration of the pandemic.

All this led to many issues like economic challenges, food insecurities and mental stress. Since she was the daily wage earner so her family monthly income reduced as she did not have job. This led to a great difficulty for her to manage and run her family. As the family was quarantined and with no job they all survived on whatever was available at home. All this was already stressful for her and moreover an alarming rise in the Covidcases added to her stress levels.

In order to mitigate some the pandemic effect in their family, they adopted few strategies like they separated the children and the elderly from the infected person in the family and kept them separately with some of the family members who were not infected.

She approached the SHG and other members of her area and to address the issue, she discussed here challenges at SHG level first and then with the EC members who belong to that particular group. She received support from the VO and VEOC to meet the food security needs of her and her family in the form of Ration support. SHG and VO members empathized with her and encouraged her to look past the bad situation which boosted her morale and she felt emotionally more content. And slowly the family overcame these challenges with the help of the VO and the VEOC.

In lieu of the support that she received from CBOs, she also supported in the collective efforts of SHGs and VOs like conducting door- to-door campaigns for awareness generation ON COVID 19, coordination with ASHA/AWW, making and distributing mask/sanitizer etc. Through the awareness programme on Covid19 behaviour Changes, she gained more knowledge on appropriate behaviours and imparted the same to her family and further I the community. Being in a group, helped her a lot in all kinds of support whether entitlement support, mental support or financial support.





Empowering women to secure their dreams

The mineral rich district of Sundargarh is home to many tribal communities. The ambitions of women in the district have been encouraged by the Odisha Mineral Bearing Areas Development Corporation (OMBADC) and Odisha Livelihoods Mission (OLM). OLM has mobilised many rural women into its SHG fold to enhance their financial acumen. 29 year old Reena Tirkey, a resident from Jalangbira Gram Panchayat, Kuarmunda block in Sundargarh is one example.

“

I am happy that I can care for my family through domestic work, but also support them financially. After dealing with the challenges of last year, I feel more empowered than before as I now know how to face such situations in future.

Tirkey is a budding entrepreneur. She has completed seven years of schooling and is president of the Om Sai Ram Self Help Group (SHG) and Jalangbira Gram Panchayat Level Federation (GPLF). At home, she helps provide for her family of twelve while her husband is away working in Asanso. She does this by running a clothing store which she set up last year from where she generates an income of nearly Rs 15, 000 a month. This, however was not without challenges.

In January 2020, she learnt about and applied for Community Enterprise Fund (CEF) under the Start-up Village Entrepreneurship Program (SVEP) and secured a loan of Rs. 30,000/-. Additionally, she invested Rs. 10,000/- from her savings to start her clothing store enterprise in February 2020.

However, with the onset of the Covidpandemic, she had to close her store. The prolonged, phased lockdown impacted her savings, which were also used to provide for her home.

When the market resumed post

lockdown, Tirkey was determined to open her shop again. “I set this up for the income, but also for a break from the monotony. So I wanted to get back to work again” she explained. A lack of funds, however, meant that she could not procure supplies for sale. News of the Odisha Government promoted CovidAssistance Package (CAP) loan benefit gave her hope. She applied and was granted a loan of Rs. 50,000/- under CAP – 1 from which she bought winter clothing supplies such as sweaters, shawls, sarees etc. As of today, she generates an income of nearly Rs 15,000 per month.

The financial aid that she received from the Odisha Mineral Bearing Areas Development Corporation and Odisha Livelihoods Mission as CAP loan gave her the confidence for future expansion. Ms. Tirkey expressed that “I am happy that I can care for my family through domestic work, but also support them financially. After dealing with the challenges of last year, I feel more empowered than before as I now know how to face such situations in future,” she said.





The Silver lining on the dark cloud

Dr. K Sheetal was born in April 1978. She is a social activist based in Pondicherry, India and one of India's most prominent LGBT rights activists. She completed her Mechanical engineering at Goa and mostly spends her parts at Chennai, Tamilnadu. Sheethal K has been an 'out' activist for the rights of all sexualities since

1990, including playing a leading role in the movement for decriminalization of sodomy in India.

She is the President cum Director of Sahodaran Community Oriented Health Development (SCOHD) Society, an LGBT Human Rights organization based in Pondicherry District & Karaikal District, Puducherry state and Cuddalore District at Tamilnadu state, India. SCOHD Society work comprises community work, outreach into the MSM and TG groups, advocacy on gender and sexuality issues concerning sexual minorities and gender issues. Sheethal K and the trust have been lobbying with

policy making bodies as well as supporting similar upcoming groups across both the states. She has been entered into a self-help group which offered by Puducherry SRLM and many of them from her community followed her to joined SHGs. Now 15 SHGs were formed under a federation named "Agni siragugal Transgender Federation", is a registered body under society act.

"Formation of Hand sanitizers' preparation of Arianmedu Hand Sanitizer Group under Agni Siragugal Transgender Federation "Integrating into society at large and finding a job continues to be challenge for LGBT community in the rural and city. Our LGBT members in Puducherry instead of giving up, a part of them, had begun finding self-sustaining, innovative ways of earning livelihood.

On beyond of Agni Siragugal Transgender Federation, aided by

District Rural Development (DRDA) & Puducherry State Rural Livelihood Mission (PSRLM) Under Ministry of Rural Development (MoRD) took initial step in providing training in manufacturing Hand Sanitizer and Phenoyl to the LGBT members.

In the start of the initiative to till date, 1000 litres of Hand sanitizers were produced, said Dr. Sheethal K, President of Agni Siragugal Transgender Federation under Arikamedu Hand Sanitizer Group

Preparation of Hand Sanitizers 20ml, 200ml 60ml ,500ml and 1000ml Bottles and card type spray bottles which is to porable.

COVID- 19 had affected her Federation. S.Selvam (36), N.Lakshetha (38), R.Honey (23), P.Sakshy, S.Bawadharani (30), Ruthara (22) where some of the others who belonged to the transgender community who were in search of financial stability due to the pandemic. Usually, SHGs in the villages functioned in a specific way to improved their livelihoods. People of each SHG pooled their money out of which each of them could avail it whenever they needed and return it at a rate of interest much lower than the market rate. This enabled them to help and support each other financially.

COVID- 19 made this scenario much more complex with the members struggling to find a steady source of revenue as the entire nation reeked with people who had lost their source of livelihood with the advent of the lockdown. Health was also a major concern initially during the advent and initial phases of the pandemic. It was those days when masks and sanitizers were difficult and scarce in cities needless to say about the nooks and corners of rural Tamil Nadu. That was when entire villages struggled to stay afloat financially and found it difficult to address and follow sanitary practices as well.

K Sheetal also realized how the transgender community too suffered a lot with lack of alternate

livelihood options. Food security, livelihoods, economic, health, stress, gender-based violence were all in question over these difficult times. They got only a monthly transgender pension of Rs.1500/only. During lockdown, due to the higher numbers of COVID positive cases in Puducherry District, it was difficult for them to run their routine life and fulfill their normal basic needs. During COVID pandemic these members are economically suffered. Many of them are well educated, and skilled but due to social stigma, forced to begging from shop to shop, in the signals, crowded places.

This was when S.Selvam , N.Lakshetha, R.Honey, P.Sakshy, S.Bawadharani, Ruthara decided to seek the help of K Sheetal in-order to come up with an alternate means of livelihood. That was when they realized the way sanitizers and masks were difficult to come across in the rural parts of the state. Together, they decided to help in improving the quality of health and sanitization in the country. The seven of them who initially are from different SHGs decided to come together to create this initiative.

They started a producer group called namely "Arikamedu Hand Sanitizer Producer Group" under Agnisiragugal Transgender Federation at VO/PLF level in Ariyankuppam Block Level Federation/MCLF. It had opened a separate bank account. This helps the community that is the most vulnerable, socially and eco-

nomically isolated from the normal existence.

They had suffered a lot for their day-to-day livelihoods. And this helped them contribute to the society while looking after their own financial needs as well.

Dr Sheetal put in efforts and ensured that these members were trained on the preparation of hand sanitizers with the help of Bharathidasan Government Arts and Science College for women, Puducherry. Many of the SHGs members who suffered from Corona positive came out to help this producer group. This producer group members were trained on how to write a letter to the BLF and Excise Department to buy Ethanol, shops to buy chemicals, obtained license and NOC from food & drugs control, bottling and labeling, to prepare it with the help of the Puducherry State Rural Livelihood Mission (PSRLM). Further, training on books of account was also provided.

The Arikamedu Hand Sanitizer Group taking training sessions with thechemistry professors and the HOD of the Bharathidasan Government Arts and science College for women, Puducherry.

Sheetal K had motivated her team towards the preparation of Hand Sanitizer and others who participated in the activities. Sheetal guided the group in terms of the division of labour as well. One member is



PROJECT OFFICER MR.D. MOHAN KUMAR, AMD-CUM-PO,ADDRESSING THEIR ISSUES AND MOTIVATING THEM DURING COVID-19

involved in procuring bottles, next one is in procuring raw materials, next member is in designing labels, another one member is in obtaining license. Measuring and filling bottles, pasting labels on the bottles, counting the numbers, arranging, and packing of it. Apart from the producer group members, other most vulnerable SHGs members who hardly fights for foods are provided employment with wage of MGNREGA. And they were motivated for self-employment by PSRLM through CRP of the federation. She had initiated the producer group in the most successful way.

The producer group had also availed a loan of Rs. 2,00,000 as a Bank linkage loan arranged for an amount of Rs.2 Lakhs to procure raw materials and for financial support.

Our heartfelt thanks to Respected A.S.P.S.RVIPRAKSH, I.A.S., Rural Development, and D.MOHANKUMAR, SADM-CUM-PO, DRDA Government of Puducherry, was one of the first to make and bring positive changes for the sake of the transgender community.

"Hello! I am Sakshy. P. I am a transgender studying BSc Dialysis Technology at the Mahatma Gandhi Medical College and Research Institute, Pondicherry and am a member of Arikamedu Hand Sanitizer Group. During this difficult Corona period, the income from this group helped me a lot to improve my livelihood. I am very happy to be able to produce sanitizer for the people in this Corona period and to be learning lots of knowledge. Given such a good opportunity in this society where transgender people are subjected to humiliation, and ridicule. A special thanks to D. MOHAN KUMAR, A MD and Dr. Sheethal.k, Agni siragugal transgender federation."

This is the testimonial of one of the seven workers in the company who has benefitted so much thanks to the action of Dr. Sheetal K.

This has also provided much needed financial stability for the team



Transgender SHG members are involved in volunteering service during 2nd wave of COVID-19

Convergence of Various Schemes During the pandemic:

1. Convergence of Transgender under the scheme of MGNAREGA
2. SBM: 5 Transgender got financial assistance for construction of individual toilet. 3 of them comes under Ariyankuppam and 2 of them comes under Villianur block.
3. DWCD- Transgender Pension Cards, nearly 35 cards were obtained for them in coordination with Department of women and Child Development.
4. Common Service Centre: She has been made efforts to get 42 Aadhaar cards were issued by the CSC.
5. Civil Supply and Consumer Affairs: she had facilitated to receive 38 ration cards for dry ration, as an entitlement.
6. Sara's Mela - Govt. of West Bengal Sara's Mela was conducted at Calcutta for the general people, behalf of DRDA support among 13 SHG's 2 transgender selected and participated as State Co-Ordinators/escorts.



12 Transgender got job cards and working under MGNAREGA scheme through DRDA, Rural Development.

As a way forward, they can hope to scale up and grow in revenue and size by employing more members of the community as well. In the long run, when the pandemic is no more and when things get back to normal, they can diversify and invest in another line of business that could benefit the society as well. An alternate source for a steady source of income would be essential in order to succeed in the longer run.

since they have been able to find market and supply of their produce to banks, commune panchayats, Block development offices, KVK, Transport Department, municipalities, MGNREGA workers with the help of DRDA. This is very useful during covid pandemic, the produce reached to their door steps.

Let's Fight Corona | Awareness of Coronavirus - Sporting reflective jackets, the transgender group walk up to the motorists and Path walkers advising them to wear Facemask, maintain social distancing and instructed other safety measures cit-

izens should take to stop the spread of corona virus at the society in the crisis situation Puducherry Transgender's don the role of volunteers in their spare time to assist cops in a wide range of duties in the region and in addition there are some more few other transgenders who are going to get a chance to live with dignity as monitors in Puducherry Traffic Police. "This unique initiative is an attempt to break ice and stereotypes people have about transgenders. The move will help the transgender community gain confidence and inspire them to live life with dignity," said Dr. Sheethal K.



From the Community, For the Community

CRP Meenatchi, lives in the Katterikuppam Panchayat and is a single woman running her life taking care of her only son. She had to face several problems during COVID-19, because her son had been infected by the Covid. This made it difficult for her to carry on with her day-to-day activities. They had been isolated at home. She found it difficult to even go to the nearby shop to buy essentials. Social stigma and fear in the society made many people, even neighbours and friends afraid to go to her house. She was being looked at differently in the village at initially since she was the first person in the

village who tested Covid positive. During home quarantine, ANM had helped her to check her oxygen levels and temperatures. Gradually she recovered and returned to her role of SHG member. She realised that the present situation requires her to work for the community and help those who are struggling with the impact of Covid.

Lack of awareness on vaccination, house quarantines and lack of separate room facility were some of the major reasons for the virus spreading to all the members of the family in rural areas. Likewise, the village as a whole got affected by COVID-19. It was not just Meenatchi, many in the village too started facing issues with food security, livelihoods, economic, health, stress and gender-based violence conditions. For Meenatchi, it became hard to care for the children and elderly while trying to

manage domestic chores and the collection of water, fuel and fodder as well at the same time.

It was very difficult to arrange for group meetings, writing resolutions and getting signatures from the EC members for disbursement of internal loan during the lockdown. Social distancing too affected their livelihoods, health and her interaction with the groups and community as well.

In view of the circumstances, there was change in roles and responsibilities of the SHG members. They were at the forefront of arranging pre-meetings in order to achieve 100% vaccination with the village heads, youths, AWW, ANM, PHC doctors, Sub-Collector and Political leaders was a new and difficult role for her. They were engaged on household wise surveys to measure the positive cases and in demanding them to undertake vaccination. The SHG members also supported the distribution of sanitary kits to positive households in the village and in assisting with the supply of grocery items and medicine to their door step. Meenatchi led from the front and along with her fellow SHG members fought the onslaught of Covid.

She used the received the information from Mission staff through SAC members. And the COVID Training provided to her by the BMMU team put her in a good stead in facing the challenge. SHG members helped the social campaign for vaccination mobilisation, door-to-door campaigns, community kitchens, masks, sanitizer distribution.

The BLF had disbursed VRF, CIF to VO/PLF on time, in order to meet the liquidity at SHGs level. Smart phones are being used for the field communication for mobilising. Her group is now involved in producing mask and has helped her earn an income amidst the covid pandemic. Her actions helped to support her family and her son financially as well. With her hard work, the community also benefitted since the positive cases started reducing. Sensitizing the people about the virus and awareness



about regular hand washing and avoiding of unwanted travel was also created. Now, the entire village people have been sensitized and

has been made aware of COVID HSF wise.

People have been inspired by her and several others have started making masks, sanitizers and other Covid essentials as a measure that not only helps them financially but also helps in eradicating the virus from rural Puducherry.



Regular practice of hand wash, intake of nutri-food by implementing nutri-gardens at each household is also being implemented with the consent of the household.

Going forward, saturation of every single person in the village for COVID Vaccination, under Katterikuppam PLF is the aim. Regular practice of hand wash, intake of nutri-food by implementing nutri-gardens at each household is also being implemented with the consent of the household. These small but significant efforts helped Meenatchi and her village fight the deadly Covid.

Rajasthan



Community Efforts Kept COVID at Bay



Sonam Meena was born in the Saroop village of Girwa Block, Udaipur. She belongs to the Meena community that is categorised under Scheduled Tribe. Female Literacy rate in the tribal areas of Udaipur is hardly

50% and parents are reluctant to send their daughters for higher studies. Sonam was determined and wanted to study to earn a living for herself. She has five siblings and the family income was limited. She had to persuade her parents to

continue her schooling. Her determination to fight against all odds led her to complete her graduation in Arts stream. Upon completing her graduation, she was married in Kikawat village, Rishabdev Block, Udaipur. After her marriage she lived in a joint family for a few years and later had a nuclear family. Sonam has a son of 10 years and she is currently employed as a Data Entry Sakhi in Asha Cluster of Rajeevika, Rishabdev.

She has been earning well through her work until the Covid-lockdown hit in 2020 and again in 2021. These lockdowns adversely impacted lives of all villagers. The biggest blow was in terms of loss of livelihoods. The mobility restriction took away the opportunity to work in the nearby towns and the MGNREGA work was also halted. Other than the loss of income, villagers were not able to access their savings and available funds as the accessibility to banks was curtailed by lack of transportation as there was no ATMs in the village.

Sonam herself lost a significant amount of income due to the lockdown. Her payment is based on the MPR entry in the Rajeevika MIS. As the Cluster office was shut and SHG meetings were not being held, the numbers of MPR reduced to a minimal. This led to a decrease of more than 50% in her monthly income. The functioning of the SHGs and CLF had already declined significantly since the lockdown in the previous year. As the situation was getting back to normal, the second wave hit and it got worsen. Most of the women who have been working with Rajeevika, had to bear the brunt of lockdown. But the community support has been of the greatest help during these difficult times.

Sonam's family also faced the same problems and in order to save funds, the family was united and started to live back as a joint family until the situation was normal again. Her office was shut and she had to stay at home with 10 other family members. Social distancing



in a large family with limited space was a remote possibility. Her burden of housework and care work got multiplied many folds.

“

Sonam went through training provided by the Rajeevika on the COVID appropriate behaviours, bursting the hoax around vaccination and discussing the benefits of taking vaccination, importance of social distancing, identifying the Covid-related symptoms.

Even though her office was shut, Rajeevika worked as an information agency for creating awareness regarding Covid and vaccination. Sonam volunteered and was appointed as the nodal for her village Kikawat to carry out awareness campaign. She went through training provided by the Rajeevika on the COVID appropriate behaviours, bursting the hoax around vaccination and discussing the benefits of taking vaccination, importance of social distancing, identifying the Covid-related symptoms at an initial stage, measures to take if anyone displays any Covid symptoms, importance of self-isolation in the initial stage, etc. She took the lead in the awareness campaign and formed a team with CRP cadre of her village. The workload at her house was a deterrent at the beginning but she received support from her husband and the extended family living nearby, who were also members of her SHG. This support was the biggest help in this time of need.

The team led by Sonam conducted awareness training of all the 18 SHGs present in the village in phases with limited members in each training session and with Covid protocols being followed. They used the audio-visuals provided by Rajeevika for conducting these trainings. Along with COVID-19, they also discussed the importance of SHGs and their positive contribution in the current situation.

The biggest problem that Kikawat village faced was in terms of villagers' reluctance to take Covid vaccine. Panchayat level institutions were also struggling to roll-out vaccination in village. SHGs collaborated with ASHA and Aanganwadi workers and expedited the process of Covid related awareness in the village especially talking about the vaccine. SHG members were the first to take vaccine in order to build the confidence of the community.

The Covid awareness programme was conducted from end-April to beginning of June. The initial two weeks were focused on making people aware of the second wave of Covid and the extent to which it has impacted the country. After mid-May, as the vaccination drive was scaled-up, they focused on creating awareness about the importance of Covid vaccine. Rajeevika, ICDS and Panchayat institutions had been of great support in the whole process. Sonam was able to conduct these trainings due to the network she had built being SHG member and working at the cluster office. She is good with using computer, phones and internet and could attend the virtual training conducted by Rajeevika.

Owing to the widespread awareness campaign, Kikawat was one of the least affected villages in the whole area, despite the rising cases in the Rishabdev block. There were a couple of cases in the initial phase but later the social distancing and use of masks became the norm. People can also be seen to be more accepting of the vaccines. It was only through her

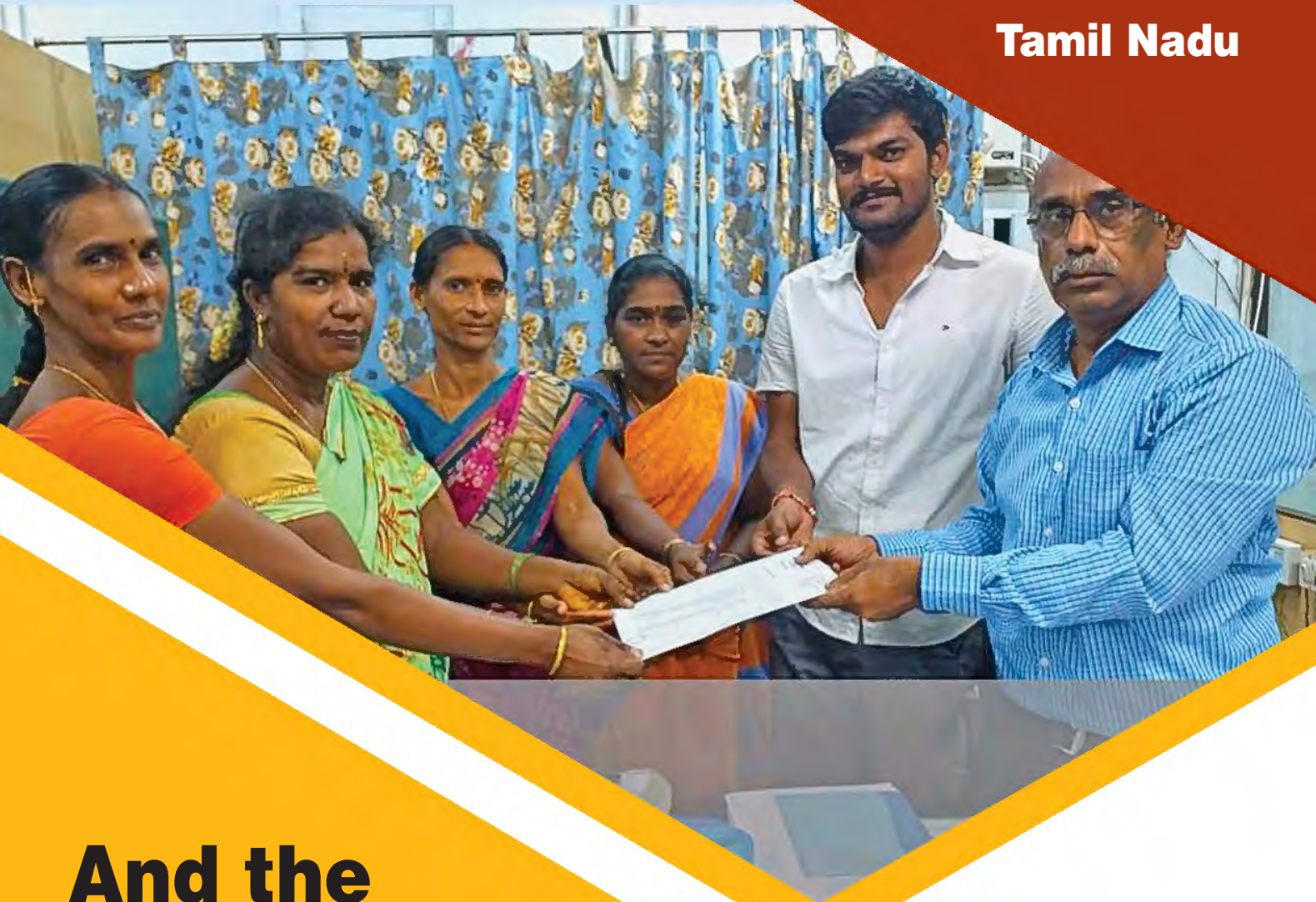


SHG network that Sonam was able to conduct the training covering whole of the village within a month.

Kikawat village survived the second wave without a single Covid related fatality due to the community efforts but it was not an easy goal to achieve. The training resources were limited as all the members do not have a smart phone and internet connection. The members who were providing training used their own resources to reach out to maximum households

and provide them with the most reliable information.

Even though the worst of second wave has passed and things are under control but our behaviour cannot be relaxed. It is crucial to follow Covid appropriate behaviour and vaccinate as many people as possible to prevent a third wave from hitting our nation. The efforts of the SHG members and their networks will continue to spread awareness and encourage everyone to get vaccinated.



And the tough got going...

Before joining the SHG, Sajitha Begum had struggled to earn money and her family suffered from poverty. She had faced several problems in running her family in a healthy way. That was then when she decided to overcome this problem. She got an idea about a SHG and decided to try and practice it in her village. Hence, she decided to join in that group.

Sajithabegam lives in the Kaman Kovil Street, Melkavarapattu, Panruti of the Cuddalore district. She was the main motivator of the Ragav-

endhira Women Self Help Group. The SHG which was formed in the year 2012, is now very successful. All members of the SHG maintain the savings and are answerable to the repayment of the installments for the loan repayments that were availed in banks. The members pool their resources and ensure that while benefitting financially as individuals, that the group as a whole makes successful repayments as well.

Sajitha who lived with her husband Tajitheen was already an established member of the SHG and had a steady source of income as well before COVID- 19. She saw people in their villages losing their sources of livelihood and struggle to make money after the advent of COVID-19. The pandemic led to Sajitha and her husband struggling financially and left them searching

for alternate sources of livelihood.

With the announcement of lockdowns, they realized that they had to come up with something different to generate income. She thought of several options as time progressed. Production of masks and sanitizers by SHGs were gaining in popularity. She decided that she wanted to be a part of an entrepreneurial activity that helped her in providing financial stability. That was when she came across some of the information from the government as to how they had assisted in setting up.

In the meanwhile, the Mahalir Thittam office had approached their village that was the turning point in their lives. The group received micro credit loan for small-scale business and revolving fund from the Mahalir Thittam Office. For our livelihood promotion, the Indian Bank, Nellikuppam branch provided a loan of Rs. 6,00,000/- as a Covidspecial loan to our SHG.

The population of Cuddalore District as per the 2011 Census data was 26.10 Lakhs. As many as 2225 SHG members volunteered their services towards mask production and as many as 832263 masks were produced and sold out to the public at affordable cost. As against a target set at 579.57 Crores for credit linkage, the team has achieved 513.85 Crores which is significant in the severe pandemic situation. The SHGs were involved in most important survey works of survey of lost certificates during floods. The dedicated work of the SHGs had poured light in many families. In the past, the SHGs were involved in the special campaign for distribution of flood materials received from various quarters during the flood time. They were trained urgently to handle the situation and proper distribution of food and other materials provided by donors.

A loan assistance of Rs. 30,000/- that she had received had helped her setup a loan then it will help her to setup a small shop in her place. From this shop she has been able to



earn around Rs. 400 to Rs. 500 per day. She is also very thankful to the Tamil Nadu government for giving a COVID special loan to our SHG for promote our livelihood.



An idle brain is devil's workshop". Failing to utilize manpower in a proper way may actively result in wrong usage and even in financial ruin for the members of the SHG. The accumulated power of a sensible group will acquire self-assertiveness when asked to do any good work.

"An idle brain is devil's workshop". Failing to utilize manpower in a proper way may actively result in wrong usage and even in financial ruin for the members of the SHG. The accumulated power of a sensible group will acquire self-assertiveness when asked to do any good work. The SHGs, being a group of poor but noble people, are always ready to work as hard as they can in helping the helpless people. If they are given suitable practice, they can act as a disciplined army. The SHG members as a forcible power unit can work towards peaceful results. Channelizing their collective power and efforts can earn desirable and good results.

While this remains the success story of one woman and one SHG, this success model of the Cuddalore district can be adopted in the other districts as well and she can serve as an example to people of similar backgrounds who are struggling financially amidst the pandemic and lockdowns.



SHG helped to tide over the crisis

In her own words, Sentamilselvi S. says, 'I am a proud member SHG member and Book Keeper by designation and represent Sathyavadi VO, from Virudhasalam District, Tamil Nadu.' She got infected with COVID in the month of May 2021. Her husband runs an audio system assistance business for the marriage functions and travels very often. When she was detected positive for COVID-19, the couple was very worried as they were already in an economic crisis. Because of the lockdown the family functions, marriages, and public functions were drastically reduced. They faced great difficulties in running

the family and supporting their two children.

She was advised for a quarantine by the doctor. Her family could not be fed properly. The neighbours and relatives panicked and did not approach to assist her family. After three four days my sister send food to my children and family. They were in severe financial stress. Her husband approached their friends and got some money as debt (5000/-) and through our Sakthi SHG members she received a small amount as debt for her medical expenses and somehow managed to run the family.

During that time, she called up her PLF leader on safety protocols and health issues related to COVID-19. This helped her to understand how to approach the disease. The health inspector from the primary health center, VPRC, PLF leader, visited their home, maintaining social distancing and following covid protocol comforted and advised my family members to be bold and strong. Continuous COVID lock down, with her being infected by COVID, her family faced acute food insecurity. Her panchayat Level federation leader Ms. Anuradha gave her immense support during this tough time.

The role of the PLF leaders, CRP, BFC, with the help of the panchayat leader and health inspector facilitated training to the COVID affected families and trained their family members on Self quarantine, how to wear and dispose a mask, about sanitation and hygiene, and awareness on COVID 19 disease needs appreciation.

The health CRPs took the initiatives to educate the COVID affected houses and the members after revival to take care of their health by taking nutritious food, include more fruits and vegetables, proteins and herbal decoctions including kabasura kudineer, and periodic steaming to sustain good health.

A month later, post Covidinfection, her family was healthy and safe. The small debt that they received from the SHG groups helped them to improve their livelihood.

Going forward, she notes that she can now empathise with the financial and mental status of the families affected and made it a point to help them as a frontline worker in the awareness drive for COVID appropriate behaviours, guiding them during home quarantine, counselling family members, etc. Appropriate knowledge and behaviour would save their lives and their family members further being affected or even the spread of disease.



Together against Covid

The first case of corona virus disease (SARS-CoV-2) was detected in January 2020 and the Government of India (GoI) declared lockdown in March 2020. Not only India but the entire world is fighting with the new, lesser known, but highly infectious and life threatening virus strain, commonly known as Covid. In order to prevent the spread of Covid it is recommended that hands have to be cleaned often, covering one's face with mask and maintaining social distancing. According to the guidelines issued by the World Health Organization and the Ministry of Health and family

Welfare, GoI, it has been directed to compulsorily wear a mask while leaving the house to prevent the corona pandemic.

This has increased the demand of face masks thousand folds, but availability of the good quality masks remains a challenge. And if these masks are available those are either expensive or not as per the universal standards. This was the time when it was thought by the UPSRLM team to respond to this challenging situation, not only because it was need of the hour but also it provided livelihood opportunity for the women trained in stitching by the non-farm livelihood team of UPSRLM. For this, 08 women of Jai Maa Durga group, trained in sewing work by Block Mission Manager



Ms. Sangeeta, were motivated to come forward, to make and supply these in the local market and areas in Varanasi and generate their own income and become economically independent.

District Mission Manager Unit has linked Jai Maa Durga Group with 'Jalan Cloth Company' for sewing of masks by non-woven cloth and for supply of Khadi cloth with 'Green Khadi'. For sewing masks, the Jai Maa Durga group has financially supported women engaged in sewing work. This resulted in the sewing of masks was started on a very fast pace. Along with this, the group cooperated by providing stitching work of personal protection kit to the health workers, para medical staff, police personnel etc. of the district.

A total of 1800 masks and 33 PPEs were stitched by Jai Maa Durga Group. This has a positive outcome not only in terms of social work but also financial gains. The group members utilised their sewing skills during Covid pandemic and also earned an income of Rs.2137 by each member.



A total of 20865 masks and 227 PPEs were stitched by 250 SHG women of 97 groups in the block Kashi Vidyapeeth alone, while in district Varanasi 1801 women from 1007 SHGs have participated in this programme and prepared 104376 masks and 924 PPE kits, that were supplied to various government and non-government departments of the district.

Jai Maa Durga SHG has also played a big role in motivating

other women and groups to join this programme. In their village alone, 19 women of 6 groups joined them for sewing masks and PPE. They were also involved in this battle against the pandemic and also got the means to earn income in this difficult period. Didi says, 'by using skill one can earn income in any situation, and what better if your work is also contributing towards a social cause'. UPSRLM salutes such women and consider them as Covid warriors.



Serving the Community Selflessly

In order to motivate even a single family to vaccinate themselves, amid rumors of deaths due to vaccination, sounds to be a tough task, as it needs not only great convincing ability but also the ability to take risk of vaccinating the fearful people.

Seema devi, a SHG member of Chopan block in Sonbhadra in Uttar Pradesh not only took the responsibility of spreading awareness around benefits of vaccination through door to door campaign but also selflessly took the pain of registering members of 25 families for their dose of vaccination. She even accompanied them to their vaccination centers just to stay beside them. "Tika lagwake lautte they, to pati bolta tha alag kamre mein raho, hum rehte they, bachhe hain chote, bas unka dard hai". Seema says, that on returning from vaccination centers, her husband used to urge her to stay separate, away from her children and she used to stay, as she too is aware of risks of spreading.

Seema devi is a mother of two and a responsible member of Amulya SHG and Jag Janani VO in Billi Markundi Gram Panchayat. A Class 10 pass out, Seema Devi, has been working as CRP with a monthly wage of Rs 4000. Being a member of a four years old SHG, Seema Devi has in her every bit of a member, who works selflessly for fellow members in all the levels of her CLF, Udaan Purna Sankul Samity. Apart from being a respectable member she has also been a pioneer in livelihood generation activities of her CLF like dress, jewelry and rakhi making. During the first Covid wave, they distributed ration to 20 vulnerable households, which inspired and instigated the block to distribute ration to 40 more households. They also made their own sanitizer on just a mere idea from the District Mission Manager And learning about manufacturing through online content available

and consultation with medical personnel.

Family of Seema Devi, though never restricted her from being a vibrant SHG member, but was fearful during the recent second wave of Covid-19. They repeatedly asked her not to take so much risk, but she was adamant to spread awareness against the uprising rumors and motivate people to get themselves vaccinated, use masks, sanitizer and look after their health.

Seema says, 'It was not easy to convince people to take vaccination, as about 3 deaths took place in the area, unfortunately after taking vaccination. The deaths occurred due to already present morbidities and not vaccination.' She even got her vaccinated first just to lead by example and not just words. She says that people get easily influenced by rumors in such places and it is the responsibility of the aware ones to bring them out of dark. "koi didi meri nahi sunti thi to Punam didi se baat karate they", says Seema pointing towards Punam didi. Punam didi is one of the most valued members of her CLF, and has amazing problem solving ability. The CLF always

supported Seema in her attempt to counter rumors and inspire people to take vaccines. She even met with an accident, but that did not stop her. After taking rest for few days she again pushed herself back to spread awareness in her village.

"Lockdown mein bahut dikkat hui, par Yogi ji ka double ration system bahut madadgaari raha", says Seema along with Punam didi praising the double ration arrangement made by the Government of Uttar Pradesh for the vulnerable families during the second wave. When her brother-in-law got Covid infected, she had to take care of him as well. She prepared kaadha for him, kept him in isolation giving all necessary medicines and care. Seema says that members of her CLF are efficient in playing dual role of homemaker and member of CLF.

Udaan CLF of Seema Devi needs special mention at end, for its impressive work to combat economic crisis

of marginalised women. Punam didi says, "mahilayein paisa kamayeingi, tabhi apne pairon pe khadi honghi aur aage badhengi" with this developmental idea, women of Udaan CLF are engaged in many livelihood activities such as making school dresses,

colorful kurtis, handmade jewellery, bags. They have their mill set up.

They haven't received any financial support from Mission, and they say that this is because they don't need any now. When asked, what would happen if Mission stops existing tomorrow Seema and other women says, "Hum khud chalayenge, do saal se humne waise bhi koi aarthik madad Kahan li hai?" Women here are committed to reach to

the last standing woman, and support her to become financially stable through any of the livelihood activities they are into. The women are keen to receive bulk orders of kurtis and jewelry and says they all would work hard to nourish any such opportunity, as this would open a new gate of our growth and independence.



SHG turns saviour

The Covidpandemic has devastated many families. Along with the risk of lurking Covid infection there is also the pain of hunger due to loss of livelihood and induced poverty. Sarita was continuously troubled by thoughts of sustainability and susceptibility of the vulnerable families and especially the children in this critical period of time. Sarita lives in Pindra block in district Varanasi of Uttar Pradesh and is associated with a self-help group (SHG) called Durga Swayam Sahayata Samuh. She worried about how will people cope up with some eventuality in this time when there is almost no livelihood. She regularly discussed this in her SHG and the Village Organisation (VO) named Jyoti Mahila Gram Sangathan of

which her SHG was also a part.

One day her fears came true and she found herself in the midst of a huge crisis. A fire broke out in her house due to a gas leak in the kitchen and her husband got seriously burnt. At such a time, when Sarita was not even sure about how to provide for the next meal, the expense for husband's treatment was very tough to manage.

It was at this time that the women of the VO came forward to support Sarita. An amount of Rupees twenty thousand was immediately sanctioned from the Vulnerability Reduction Fund of the VO which it had received from National Rural Livelihood Mission. Apart from this,

each member contributed Rupees five hundred from her own pocket, amounting to a total of around Rupees forty thousand, which covered almost the entire treatment cost of her husband. This timely help meant a lot for Sarita as she was able to provide proper treatment for her husband and he recovered well.

Sarita thanked all the members of her VO profusely and said that her association livelihood mission has helped in gaining respect among her in-laws and also in the society, especially the fellow women. She has submitted a proposal in the VO to start her own livelihood activity so that she can return the loan and also manage her family well in the long term.



State Initiatives



Awareness and Mobilization

ANDAMAN AND NICOBAR ISLANDS

The need of the time is to motivate the general public for vaccination against Covid in order to control the spread as well as impact of the disease. The maximum the people are vaccinated, the minimum will be the drastic effects of the disease. Focusing on the same, the MoRD, GOI provided

training on mobilization of NRLM Cadre and SHG members to get vaccinated.

The trainings were on Covid awareness, prevention and vaccination was provided by the ANIRLM to all the dedicated staff and Community Cadres followed by mobilization of all SHG and VO members of all the three Districts. Community Resource Persons (CRPs) had organized awareness programmes for the SHG and VO members along with the other villagers. 117 is the number of CRPs trained, 72 GPs and 149 villages were covered, VOs trained were 54, SHGs trained

were 900 and the number of SHG members trained were 8598.

Further, the SRLM with the support of NMMU, New Delhi provided CovidTrainings at Block Level for the dedicated staff attached with NRLM and Community Cadre (CRPs). In turn the CRPs, mobilized the SHG and VO Members as well as general public so that maximum number of people may come forward to get vaccine for COVID-19.

Also, Special Drives like "Tika Utsav" were organized by the District Administrations to get the people of Age Group 45+ vaccinated. In the said drive, awareness was made in all the Blocks through the CRPs, VO Members, in conver-

gence with ASHA, ANM & AWC Workers to get the people vaccinated.

As a new initiative the Cluster Coordinators and the CRPs, after obtaining training on preventive measures and vaccination against COVID-19, imparted training to the SHG & VO members and encouraged them to maintain Covid appropriate behavior in public places as well as get vaccinated as soon as the facility is available in their respective areas.

This was achieved with the Cluster Coordinators and the CRPs attending the SHG and VO meetings under their jurisdiction and with the support of ASHA and ANMs. They made them aware about the benefits of getting vaccinated. Prior to lockdown that was imposed May 2021, the CRPs attended all the

SHG & VO meetings once for Covid training of the SHG & VO members.

The uniqueness of this initiative lies in the Cluster Coordinators and Community Resource Persons being assigned the duty of contact tracing and providing information about home quarantine of the Covidpatients. SHG also mobilized community for maximum footfall in Tika Utsav. After initiation of lockdown, the social media platform was actively used by the CRPs to make their respective SHG members aware about vaccination.

With the motivation of the CRPs, the family members of the SHG also came forward for vaccination. Even the CRPs have encourage the old age persons of their Gram Panchayats to get vaccinated during the "Tikka Utsav".

Due to these efforts, maximum number of population has been motivated for vaccination and so far 42.58% of total population has got 1st dose of vaccine and 29.97% are completely vaccinated.

The impact of the awareness regarding vaccination was that nearly 46% SHG members has been vaccinated so far. Nearly 50 camps were organized with the support of CRPs, ASHA & ANMs to mobilize the people for Covid vaccination in the rural areas. Even regular awareness of public was done through Radio & TV programmes as well as social media platforms.

The CRPs were also engaged by the Health Department for distribution of immunity boosting kits to the affected rural households in the Gram Panchayats under containment zone.

ANDHRA PRADESH



In the month of April,2021, FNHW conducted the awareness generation program on Covid, importance of vaccination, seasonal diseases and importance of Nutritional food in the 2nd phase of Covid. The learning agenda of the awareness training programs were Covid Vaccine, Covid Appropriate Behaviours, Health Seeking Behaviours and Immunity Building Measures

FNHW conducted the awareness generation program on Covid, Covid Vaccination importance, management of Mild Covid at Home Confirmation in the month of May 2021; A total of 4678693 person from different level were trained on home-management for Mild Covid symptoms.

A concerted drive for vaccination of SHG members was under-

taken. There was encouraging response from the SHGs. As a result, 3803251 SHG members, that is, 43.5% of targeted SHG members have been vaccinated during this period. Apart from this, due to the awareness generated regarding vaccination there has been a huge response from the family members of the SHG for getting vaccinated. The drive created a momentum in the community around the SHGs.

GUJARAT

Gujarat Livelihood Promotion Company limited is an executive arm of National Rural Livelihood Mission. This year, Gujarat was amongst the States worst hit states by COVID-19. Door-to-Door Awareness Campaign by SHG members was the initiative undertaken by the company. The objectives were to reach maximum population in rural areas for vaccination, to address the stigma and false beliefs related to vaccines, spread awareness regarding necessary Covid protocols to curb community spread and to address the challenges related to income generation.



In the Door to Door Awareness Campaign by SHG Women around 18,50,000 SHG members were trained during the 2nd wave of Covidin all 33 districts of the state and they spread awareness in their are-

as, regarding Covid Vaccine, Covid Appropriate Behaviors, Health Seeking Behavior and Immunity Building Measures, Management of Mild & Asymptomatic Cases at Home.

MADHYA PRADESH

Various activities were undertaken by MPSRLM in the field with the purpose to bring mass awareness in a collective manner. MPSRLM felt the importance of prevention of SHG and community members from Covid pandemic and hence involved the existing system in best possible manner to build mass awareness on Covid appropriate behavior, Covid vaccination, health seeking behavior, immunity building etc.

For prevention of Covid pandemic at the village level, manufacturing and distribution of masks, sanitizers, soaps, handwashes, PPE kits etc. were intensively done by the trained mission staff, VO/SHG members and members from the cluster level federation (CLF). The SHG

and VO members also supported the frontline workers in conducting house-to-house survey under the Kill Corona campaign being organized by govt of MP.

They have also extended support in mass public awareness for vaccination and supported them in reaching the center for vaccination, assisted in patient care and supported in medical kit distribution.

In Sheopur awareness and mobilisation regarding Covid prevention and vaccination along with supply of essential commodities are being provided by Aajeevika Express (vehicles being provided under a scheme under DAY_NRLM). Similarly in Anuppur district, circles are made to maintain social distance, convey message for public aware-



ness with loudspeakers by Aajeevika Express, and mass scale distribution of mask was also done.

In 40 Gram Panchayats of Bijadandi block of Mandla district, villagers are being made aware by placing loudspeakers in Aajeevika Express for awareness regarding the corona epidemic

The Covid Phase-II training was started on 12th of April'21 where the district nodal person (1 from each district) and block nodal persons (2 from each block) were trained by NMMU. The trained nodal persons further the cadres/CRPs/Active women, CLF leaders, office bearers; VO leaders, VO and CLF SAC committee members who further disseminated the trainings with the SHG members and community members. State level core committee was formed for regular follow up and support. Regular follow up done through WhatsApp group to with all district and blocks. Weekly VC also conducted with DPMs for reviews and resolving difficulties. With the

orientation the representatives of VO/SHG/CLF organised the community mobilisation activities for vaccination and other Covid related activities in the villages.

The intensive trainings and orientations brought changes about the understanding the important care on Covid pandemic. Through community mobilization large scale of vaccination was possible, where the community institutions played a vital role. Through representation of CBO representatives in VCMGMC, important community level initiatives were taken. Isolation centers were developed with the support and convergence with GPs.

HIMACHAL PRADESH

With the spread of corona virus, the existing 570 groups and 37 village organizations of the development block Ghumarvi immediately became active and contributed to a number of initiatives to support communities. Himachal Pradesh was hit by the virus in May, that is when all the members of the group were provided training through the block on the spread, preventive actions and management of mild symptoms at home. This training was done online through Zoom platform. The members took several initiatives after the training.

The methods were explained and

all the members of all the groups carefully followed the preventive guidelines not just themselves but also asked their family members, neighbors and other community members to be careful and follow the prescribed guidelines.

The development block Ghumarvi also encouraged all the members of the group to get vaccinated, so that all the members get the corona vaccine in time. For this, the group members not only generated awareness regarding the vaccine, but also mobilized communities and connected them to the nearest government health centers for getting vaccinated.



JAMMU & KASHMIR

In 8 blocks of the state, SHGs manufactured approximately 12,000 masks during this year's pandemic period and distributed among their community members free of cost.

SHG members played a major role in some villages by doing door-to-door awareness about importance of Covid vaccination.

JHARKHAND

First phase vaccination in the state of Jharkhand was started on early February 2021 for front line workers, second phase was conducted in March 2021 for people above 45 and the third phase started in May for 18 years and above persons. It was conducted in collaboration with health department and carried all over the state in all 263 blocks of 24 districts.

Awareness campaigns were carried out in villages by district and block administration along with SHG members. Vaccination drive was carried out in all 263 blocks of 24 districts in Jharkhand in which Front line workers, SHG members, their families, villagers etc. were covered.



Initially there were challenges in terms of people were hesitant owing to the prevalence of numerous myths and misconceptions at village levels. Continued awareness building through State government and JSLPS, BMMU staff and cadres' vaccination helped in building trust among villagers and people started coming out for the vaccination. As

a result of mass vaccination drive, there are villages in Jharkhand which are fully vaccinated. 98% of the population in Banaskantha was vaccinated through the intensive efforts of the District Team and other line department. In this initiative 5000 SHG women were actively functioning as the mobiliser in Vaccination Drive from 14 Blocks.

KARNATAKA

Due to the rapid surge in the Covid cases in the peri-urban and rural regions of Karnataka and in order to provide services regarding Covid prevention and care at the doorsteps and generate awareness about Vaccination, a program named "Doctors Tread Towards Villages" was initiated. This is an initiative which seeks the involvement of final year medical students/interns/ BSc/ Nursing/ BDS/AYUSH graduates to render their services in various acts of tackling Covid situation.

As per the program design, the above-mentioned people, along with the ANM and ASHA, were expected to visit and create door to door awareness campaigns across the state covering every single village along with providing

select clinical services.

The staffs that perform their duties in the mobile clinic were provided with the materials like, Stethoscope, BP Apparatus, Glucometer, Torch, Thermal Gun, Oximeter, Sanitizers, RAT Kits, RTPCR/VTMS kits. They also helped in distribution of PPE kits, Masks, Hand Gloves, Sanitizers, Vitamin - Zinc Tablets, Hot water flask, kettle for hot water, Steamer, Paper+ Pen etc. referred by ICMR and State Health department.

It was targeted that the staff of one mobile clinic needs to reach out to at least to 2-3 villages.. The initiative was well implemented and well received by the community as it provided much relief in tackling the on-ground COVID situation that arose suddenly.

PUDUCHERRY



Puducherry State Rural Livelihoods has been undertaking a mission mode approach towards implementation of Covid appropriate behaviour across all SHGs in all three intensive blocks of Puducherry and Karaikal districts, both in online and offline mode with strict follow up of Covid protocols/advisories issued by the Ministry of Rural Development, with an aim to reduce CORONA virus infection by increasing higher number of vaccination drive in rural Puducherry.

The "Covid free Village program" is an apt part of the SRLM that is targeted at achieving Vaccination awareness and mobilization. It has been very successful in the Union Territory of Puducherry. The mission hopes to reach saturation levels to achieve 100% vaccination for all. Social Vulnerability Mapping was employed to efficiently reach the set goals.

Puducherry had its first Covid case on the 17th of March 2020 while India's first case was on the 30th of January 2020. The 12.48 lakh population of Puducherry had seen 41,226 cases by the 29th of March 2021 and had seen 1,00,677 cases by 27th May 2021.

KERALA



During the initial phase of Covid vaccination, people had many doubts and concerns about its effectiveness. Various factors such as expedited trials, political views and mixed opinion from experts as well as non experts, have created lot of apprehension among people for Covid vaccines. The skepticism is deterring the people from accepting vaccines and may actually lead to failure of the mass immunization program that the Gov-

ernment of India is rolling out. Moreover a registration help desk was started in Snehitha and Gender Resource Centres (GRC) to help people facing difficulty with vaccine registration, getting slot allotted and make the scheduling accessible for ordinary people. Vaccine awareness campaigns were conducted to address the concerns raised by people related to vaccination. Community Counsellors also helped in getting the people to the vaccination centers.

Model village for saturation of covid-19' vaccination

It is an important tool which help to stop the Covid Pandemic and it helps to protect people from getting sick or severely ill with Covid, it might also help to protect people around them.

Themed as creating vaccine awareness and mobilization, the mission is aimed at achieving 100% vaccination for the people of rural Puducherry through Social Vulnerability Mapping. This process has been of utmost importance since

gathering information on the most vulnerable section of the population through SHG members and then vaccinating them would be the most beneficial and most efficient method to benefit the health of rural Puducherry. Also, by keeping track of the different phases at which different people get vaccinated guides us in understanding and ensuring that the villagers are vaccinated with both the doses optimally. Helping the entire set of people get vaccinated would be really beneficial in promoting Covid immunity and also in enabling easier access in the future.



TAMIL NADU

The SMMUs of TNSRLM have been given training on Covid-Vaccination by the FNHW vertical team of NMMU on Covid Appropriate Behaviours, Health Seeking Behaviour and Immunity Building Measures, Management of Mild & A symptomatic Cases at home to all the members of SHGs through online / offline mode. Out of the 35,65,929 SHG members identified, 31,19,235 have been trained.

SHGs of Tamil Nadu have been sent handbills, WhatsApp messages and have also been communicated verbally in order to create awareness on vaccination and mobilization. Ties with the D/o Health and other departments including the services of Community Cadres (Women Health Volunteers), which are already involved in Population based screening programme on Non-Communicable Diseases (NCD) are utilized for creation of awareness about Covid, Dissemination of messages about safety measures etc.

Some of the initiatives unique to different villages include the distribution of "Kabha Surakkudineer", free masks and sanitizers to all the members of SHGs at Polavakali palayam PLF, Gobichettipalayam



block in Erode. Herbal medicines distribution to all the members of SHGs through Panchayat Level Federations (PLFs) in Dindigul. Hand-



holding support to health functionaries for undertaking survey on Covidand mobilization of community for vaccination in Madurai.

दो गज की दूरी
मास्क है जरूरी

रा. ग्रा. आजीविका मिशन
बड़वानी



**Support
for home
isolation,
quarantine
centres
etc.**

GUJARAT

The District Development Officer of Bhavnagar encouraged SHG SAARTHAK SAKHI MANDAL Canteen Service to provide food and refreshments to Corona patients admitted at 'Samras Hostel' and 'Leprosy Hospital'. Overcoming their fear

of getting infected with the disease, these brave women willingly extended their services while strictly adhering to Covid protocols. The meals for patients were prepared according to guidelines prescribed by doctors and comprised all nutrients like green vegetables, milk, cereals, fruits etc.

HIMACHAL PRADESH

Members did the work of growing some crops and vegetables so that they do not have to go to the market and also shared these vegetables with the needy people for free. People who lost their livelihoods due to the pandemic, were also helped by the village organization



JAMMU AND KASHMIR

UT of Jammu & Kashmir (J&K) consists of 20 districts with a population of 1.25 Crore as per details of Census 2011 of whom 4,06,179 are SHG households. By mid-June, the UT had reported 3,10,688 Covidcases, with a recovery rate of 95%. About 10,000 patients are in hospital and are recovering while 4,234 persons have died.

Several measures were taken by the J&K Government to deal with the crises and some of these are mentioned here. Hospital facilities were ramped up with additional beds and oxygen supply. Mobile applications and other web-based applications were developed that could be used by local population to check the availability of hospital beds /ventilators before proceeding to hospital. Free kits are provided for patients in home isolation. The composition of the kit is determined by medical fraternity and the kit comprises a Pulse oximeter, tablets Paracetamol, Ivermectin, Azithromycin tablets, Zinc, Vitamin C and Vitamin D. Tele-consultation facilities have been made functional in every District.

During the pandemic, UMEED played a proactive role in sup-



porting communities to fight the disease. Awareness generation drives were held for SHG members on various aspects of the disease. So far, above 82.6% SHG members have been trained on Covidappropriate behaviours, immunity building measures, importance of vaccination and management of mild Covidpatients at home. As a result, SHG members have played a major role in disseminating information on Covidand are proactively seeking vaccination for themselves and their family.

Isolation centres for Covidin-

ected persons are important to prevent large scale spread of the disease and to provide institutional medical care to CovidPositive Patients in rural areas. As mentioned above, several Isolation centers are established in J&K and SHG SHG members are involved in referring Covidpositive persons to these centres.

About 3000 SHG members from 58 VO's have been participating in this exercise since April 2021. Their contribution has been recognized by the LG of J&K and shared on Social and Print Media and on Television.

JHARKHAND

With the support of home isolation, quarantine centres etc. commendable steps and measures were taken by Jharkhand government. COVID care centre, home isolation kit distribution, mask and sanitizer distribution are prime examples of it.

Home isolation kit has mask, sanitizer, gloves, digital thermometer, essential medicines and oximeter (as per the availability) in it and is distributed through ANM and Sahiya to people who are in home isolation with mild symptoms.



Quarantine centres are managed by health department and Panchayati Raj Departments and are established at Panchayat lev-

els. In many places, for instance in Khunti district, SHG Didis have been responsibility to cook for the patients in quarantine centres.

BIHAR

JEEViKA employees collectively came forward and started the 'JEEViKA Cares for You' initiative to support each other during the second wave of COVID-19. A call center was set-up to regularly follow-up the health status of infected staff members until full recovery. JEEVIKA empanelled a list of 6 doctors who are available to provide the tele-counselling and medical support to all the staff over a phone call every day from 10 am to 6 pm.

Around 258 employees have taken benefit of this facility. JEEViKA raised donations from the close networks, colleagues, and well-wishers of Rs 15,00,000 by 20th May, 2021, to procure and supplied 400 Oximeters and 40 Oxygen cylinders. Services like the 'JEEViKA Cares for You' Mobile application, Toll-Free number, etc., have been extended to community members.

All the VOs are provided with INR 10,000 and SHGs are provided with INR 5000 COVID support package to keep stock of basic medicines and medical equipment and support the vulnerable people within their VOs and SHGs. Further, VOs are advised to provide interest-free (0%) loans up to INR 10,000 to the SHG members, who got infected with COVID.



MAHARASHTRA

During first wave, SHGs were only limited to creating awareness, preparing mask/sanitizers and supply of vegetables in the local market and nearest town. During second wave district administration and Health departments involved SHGs in various activities. Especially the SHGs are involved in mobilization & facilitation of COVID 19 Testing campaign, vaccination drive at the PHCs and Villages and food supply to the COVID care centers and Quarantine Centers.

After approaching of second wave, the conditions became worse which affected the village areas.

Some District Authorities and District Health departments like Amravati, Dhule, Raigad, & Ratnagiri recognized the capacities of SHGs in consistence supply of



quality homemade food in cheaper price to the COVID Care and isolation Centers in the district. As a result, many district health Offices proposed to block staff for Catering services by SHGs to fulfil food requirement at quarantine centres.

State Mission Management Unit in Coordination with DMMU identified the scope for professional catering services by SHGs in the state and planned to scale up it at the large scales. All the support for getting licensing from FSSAI dept. and other business formalities to SHGs were provided and liaison with respective govt. departments

and district Authority.

The unique feature was that SHG Federation and local Banks played important role to support and promote SHGs for catering services and provided loan to SHGs for initial investment and procurement of equipments.

As nutritious, hygienic and home-made food is the key for immunity busting and recovery of the COVID- Infection. This key requirement addressed by the SHGs which resulted fast recovery of the infected and affected people of the COVID Care Centers in the districts.



Use of technology

ANDAMAN AND NICOBAR ISLANDS

South Andaman District.

and vaccination against Covid.

The ANIRLM has used the most popular social media platform "Whatsapp" to disseminate the information about preventive measures to control spread of Covid as well as benefits of Covid vaccine. Knowing the scattered settlement in the Islands and difficulty in movement of CRPs due to imposed restrictions, the Covid trainings were imparted through teleconferencing and with the support of Whatsapp in many areas of Blocks under N&M Andaman District as well as Swarajdweep and Saheed Dweep under

In these Islands maximum use of technology such as WhatsApp, community radio, Local TV Channels, Twitter and Newspapers was done for awareness of the General Public regarding the symptoms of Covid and its preventive measures. The dedicated staff of NRLM as well as the CRPs posted messages regarding preventive measures and vaccination against Covid in the respective groups of the Blocks and Gram Panchayats on regular basis to motivate the SHG members and their families to get vaccinated against Covid. This was achieved through several steps such as Covid related messages were regularly

Due to lockdown situation in the Islands on account of outbreak of pandemic when the movement of public was restricted, the use of technology has played a vital role for dissemination of information regarding the preventive measures

posted in the NRLM related groups of SHGs and CRPs, through radio talks organized by the administration, general public were advised to report to their nearest Hospitals if they have any symptoms of Covid-19. Various home treatments of Ayurveda were also published in the local newspapers for treatment of Mild Covid symptoms and the Director of Health Services, A&N Administration, Port Blair has also organized various TV Programmes in the local channels to make people aware of the Covid symptoms and also advised to wear mask properly, maintain social distance at public places and wash hands

or use sanitizers regularly. Also the pradeshik samachar broadcasted daily on All India Radio (AIR) starts with the line to follow Covid appropriate behavior. Also, in between the news appeals were made through advertisements on Covid to the Islanders with local news.

The uniqueness lies in the use of technological platforms like radio talks, TV programmes and AIR broadcasting was done to spread awareness on Covid preventive measures and importance of vaccination.

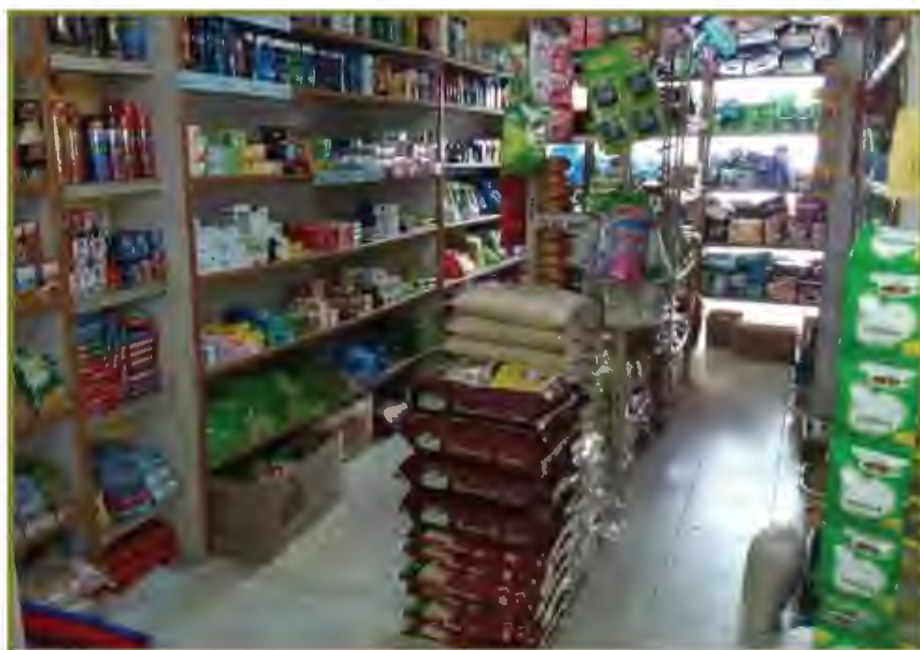
The advertisement and messages

through the means of technology has helped to reach wider public and motivate people including SHG members to follow Covid appropriate behavior as well get vaccinated. Utilizing such means of information transmission, the key were rapidly disseminated in the form of written content or videos dissemination among the community without getting in direct contact. Due to these efforts, maximum number of population has been motivated for vaccination and so far 42.58% of total population has got 1st dose of vaccine and 29.97% are completely vaccinated.

ASSAM

Due to lockdown all markets were closed. Farmers had produce ready for sale but they were unable to locate buyers. This impacted the small and marginal farmers the most. To overcome the problem an online delivery app called 'Antflip' was created. This app provided an online marketplace where buyers can directly connect with the sellers of groceries, vegetables and house-hold goods. The interface was developed keeping in mind the diverse range of products and the requirements of the buyers and sellers. This provided a safe trading platform and provided much required succour to the farmers.

District and Block officials coordinated with District Administration where SHG members got a platform to sell their produces like fruits and vegetables to hawkers and direct consumers. Digi pay Sakhis were also involved in helping SHG members in transactions during the period.



ANTFLIP

Book your delivery vehicles through online

Bikes are available for easy and fast delivery services

- 0 to 50 kg = 1 x 1.5 (100 ft)
- 5 to 100 kg = 1.5 x 1.5 (100 ft)
- 10 to 150 kg = 2 x 2 (100 ft)

Auto Vans are available for easy and fast delivery services for larger packages

- Quarter load
- Half load
- Full load

Cycle services also available

<https://www.facebook.com/AntFlipServices>

ANTFLIP

Flip everything with antflip

Antflip facilitates delivery of any purchased goods, household materials, food stuff, medicinal assistance in the most cost-effective manner and in optimum time. The service basically covers items not limited to the above alone and delivers any items at your doorstep without associated troubles and risks.

When you realize that anything that you have left back home or at any place, Antflip collects the same on your behalf and delivers at your current location.

We provide the best services in our commitment for customer service based on their individual needs while largely are committed to the dimensions of goods and the distance for the delivery and in choosing the right type of transportation mode.

BIHAR



JEEViKA in its venture for awareness has reached out to the community through audio messages, leaflets, theme songs and videos that are being shared with the community by the JEEViKA's officials and front line workers such as Community Mobilizers and Community Resource Persons. A total of 1.5 lakh leaflets were distributed to community professionals, while 5 lakh leaflets were printed for self-help groups, these leaflets have been used widely for raising awareness on the Covid-19. JEEViKA has released 15 audio messages, 5 videos, 1 theme song and a two-part comic series to raise awareness on the pandemic, and

has been relaying them through its SHG network. JEEViKA has developed IEC material to raise awareness about Covid and preventative measures. They are widely sharing this IEC material among the Cadre through WhatsApp. Further, JEEViKA has developed the following three (3) new IEC materials to create awareness among the CRPs and community members - Preventative measures of Covid, home-based Covid treatment and post-Covid care and recovery.

JEEViKA has tapped digital platforms such as IVR calls of Mobile Vaani to disseminate key messages in the community. JEEViKA

has to date addressed more than 5000 community queries on Covid through Mobile Vani. JEEViKA has trained 70890 community professionals and 8.6 lakh self-help groups for awareness on Covid-19. These efforts have helped in reaching out to 50.52 lakh households for awareness. Trainings were conducted by Dr TejPraksh, WHO CCT team member and Associate Professor, AIIMS, New Delhi in collaboration with NHSRC (GoI), UNICEF, BSD-MA, State Disaster Response Force, AIIMS, MGIMS, CDC and Bihar Vidyapith. 21 Jeevika Aapda Sahayaks have been identified from amongst JEEViKA didis and are being oriented by UNICEF & CORSTONE to support female community members visiting government hospitals for treatment. Cadres like CNRP/MRP have been actively involved in educating the community on the importance of getting immunized. On International Women's Day on March 8, 2021, JEEViKA through a vaccination drive and with the help of district administration has got 4,81,140 women immunized across 38 districts of Bihar in a single day.

JHARKHAND

The need: As the number of Covid cases were skyrocketing, so was the number of patients with severe symptoms requiring bed and medical attention. People were turned down at hospitals stating their capacity was full and in the transit from hospital to hospital, many lost their lives.

The innovative approach involved looking at the situation, the then CEO, who was also looking after health department, decided to come up with an idea to develop a web page and mobile application dedicated for providing updated status of bed (oxy-



gen, ICU, ventilator) in government and private hospitals.

As a result of this Amritvahini web portal (www.amritvahini.in) and mobile app has been developed and it has the updated status of beds available in government and private hospitals of Jharkhand.

Given the situation due to Covid19 and nature of the disease, the technology came in handy. Most of the awareness building programmes related to Covid related information, precautions, appropriate behaviours, home isolation etc. were all conducted through platforms like WhatsApp, zoom etc.



Nutrition security

JAMMU & KASHMIR

On a smaller scale, Community Kitchens were formed by VO/CLF with the help of villagers in some villages of Kashmir in order to provide free food to Covid affected families. Practically, one family of an SHG member takes responsibility of providing food to a Covid

affected family. Vegetables, grains, and other food materials are contributed by neighbours and other SHG members. These community kitchens helped Covid affected families who are unable to cook for themselves. As the cases have gone down, there is now little need of these Kitchens.

JHARKHAND

During this pandemic, SHG members were also engaged in delivering vegetables, eggs etc. to the people who placed their orders in advance. The person who needed essential items had to book their order through Aa-jeevika fresh mobile app/ Palash counters or phone number. The deliveries are being done both in villages and nearby city areas. This initiative is managed locally by women.



HIMACHAL PRADESH

In its fight against the impact of Covid on health, nutrition and livelihood 10364 works had been sanctioned in favour of women of SHGs under Mukhya Mantri Ek Bigha Scheme (an initiative of HPSRLM RDD) for Land Development, Nursery Production, Fruit Tree Plantation, Construction of Vermi Compost & Azolla Pit and Animal Shed related works and more than 5480 works have been started, 1330 works have been completed and Rs. 13.90 crore expenditure has been incurred under the scheme.



MAHARASHTRA



The Covid pandemic situation has taught us all about the significance of one's immunity to fight the infection and to attain strong immunity it is important to consume nutritious food. Having access to fresh, residue-free vegetable on daily basis can be good way to add nutrition in plate of the rural household. However, the pandemic situation has caused the shortage of supply of vegetables for the consumption purpose. To resolve this situation the state team

came up with the idea of conducting 30 days' campaign of developing individual Nutri-gardens in SHG households.

Recently Maharashtra State Rural Livelihoods Mission ran 30 days campaign of individual Nutri garden development called 'Mazi Poshan Parasbag Vikasan Mohim' in 351 blocks of 34 districts of Maharashtra which resulted in development of 82254 individual nutri gardens.

ODISHA

Odisha Livelihood Mission (OLM) initiated community kitchens with the help of the SHG members.

The women collected the locally grown vegetables and cooked the food together in the village. The food was distributed to the needy free of cost while following proper Covid protocol. This initiative not only helped to ensure nutrition in the local community of the SHG but also provided a channel for using the local produce.





Convergence

GUJARAT



The State Health department initiated a Covid Rath where participation of VO members helped to generate awareness on Covid. Later SHG members of Dang District of Gujarat were involved in the operations of the Covid Rath.

SHG women of Banaskantha District, Palanpur block provided 50,000 masks to workers of MGN-REGA. This initiative was taken by 60 SHG members who earned Rs. 7, 50, 000 from this enterprise. The distribution of Covid Kit was provided by Department of AYUSH and SHG women distributed the AYUSH kit during door-to-door awareness generation drives.

JAMMU & KASHMIR



These centres are temporary with no dedicated staff to maintain them. So, the VO/ CLF and SHG members came forward to fumigate these centres and keep nearby areas clean. The Health department taught the SHG members the procedure and provided them masks, gloves, gowns etc for their personal protection.

BIHAR



SHG women are making 2 layer, 3 plated cotton mask and these masks are being supplied to various Govt Dept. like Panchayati Raj, Education Dept., MGNREGA, Electricity Dept. etc. , PRI has given orders to our jeevika didi's for mask production across 38 districts of Bihar which is also a source of income in this tough time. The total order for mask received from PRI (FY 21- 22) was for

Rs 7.87 Cr and through this the total business generated was for Rs 79.35 Cr. The cumulative production of mask for phase 1 and 2 is 10.17 Cr.

A pilot called 'Duraprot Coating Technology' was taken up as a joint venture of IIT Bombay (IITB) and Shilpgram, under the patronage of JEEViKA. The pilot aimed at producing and marketing special face masks using the coating

technology called 'Duraprot' which is a wash-resistant anti-viral and anti-bacterial coating chemical developed by IITB for textiles. Three centres from Bihta block of Patna, Laganj block of Vaishali and Shilpgram in Darbhanga were picked up for piloting the intervention. The pilot produced 87,100 medicated masks and also achieved the target of 100% sales/consumption of the products.

JHARKHAND

In each village one nodal cadre of JSLPS has been identified who will identify Covid symptoms like cold, fever, cough, mild cases & positive cases in the village through online application, and will report and refer cases to health workers like Sahiya and Sevika for further support like providing Covid medicine kits, motivating for vaccination, testing, sending positive cases to isolation centres/hospitals. JSLPS cadres/ SHG members, Health dept. Sahiyas & ICDS Sevikas were coordinating & working as Village Task Force to mitigate the effects of Covid 19 pandemic in the Rural Jharkhand.



Development of Amritvahini mobile app and web portal for real time status of availability of beds in both government and private hospitals. Survey of migrant labour returning to Jharkhand, bring the HHs into SHG fold those who are not & linking them with various livelihoods activities under Agriculture, horticulture, MGNREGS. They are also provided RF and CIF for consumption and production purposes JSLPS block teams, cadres & CLF leaders are still now mobilising villagers for vaccination in all the blocks.

KERALA

Covid is characterized predominantly by anxiety, stress, depression and stigma. Thus, it necessitates focus on the mental health interventions. The multi-disciplinary team under DMHP provides counselling and psychosocial support for people in isolation and quarantine. This facilitates people to share their emotions, concerns, and clarify queries openly without fear of stigmatization. The experts are trained to address these situations in a positive way with empathy, deep listening and confidentiality. DMHP coordinates with the local panchayat authorities for community level interventions, primarily with



regard to stigma. Regular follow-up is also done. Kottayam Snehitha mobile number was published as one of their helpline numbers in

the websites and posters. Snehitha Staffs and Community Counsellors work as second tier counselors for the DMHP.

MADHYA PRADESH



For prevention of Covid pandemic at the village level, manufacturing and distribution of masks, sanitisers, soaps, handwashes, PPE kits etc. were intensively done by the trained mission staff, VO/SHG members and members from the cluster level federation (CLF). The SHG and VO members also supported the frontline workers in conducting

house-to-house survey under the Kill Corona campaign being organised by govt of MP.

Village crisis management group and monitoring committee (VCMG-MC) were formed, and members from SHG/VO also represented the committee and participated the meetings of VCMGMC meetings. They have also extended support in

mass public awareness for vaccination and supported them in reaching the center for vaccination, assisted in patient care and supported in medical kit distribution also. The total number of masks prepared were 32,94,626; 15.464 ltrs of Sanitizers and 10,138 PPE Kits were distributed. Support in door-to-door survey under the Kill Corona campaign was provided and conducted in convergence with D/o of health and WCD. Under this activity SHG and VO members actively involved in identification of patients with sickness and motivated them to access the medical facilities

PUDUCHERRY

SRLM cadres mobilised people for vaccination campaign conducted by the department of Health and Family welfare, during the month of April, 2021. In addition to that, regular mobilisation was also done in the nearby PHC/CHCs.

Formed 12 LG Groups and trained on preparing & packing of quality of nutri-food in collaboration with Civil supply, Dept.of Revenue, Dairy Co-operative union (Ponlait booth) and there are four varieties of rice of Sambar/Curd/Coconut/Lemon rice provided for vulnerable, migrant labors, elderly persons at the rate of Rs.5/-(300gm) per parcel, supplied to urban and rural as well.

As a result, in the number positive cases has started declining and boosted their immunity power.



Support as monitoring/ response groups

After the Outbreak of Second Wave of Covid Pandemic, strict lockdown was imposed in this UT to control the spread of Covid. Containment Zones were set up at various places. Covid Centres were set up at various locations of this UT for treatment of Covid patients with critical conditions.

The CRPs were engaged by the Health Department for distribution of immunity boosting kits to the affected rural households in the Gram Panchayats under containment zone. Covid Control Room were set up

at the State Library wherein the State team of ANIRLM have been deputed along with the other Officials of Directorate of Rural Development Department and other Line Departments. Various teams were set up at State and Block Level for Contact Tracing, Indentation of Covid Patients and to quarantine them. Door to door Survey was conducted by the field staffs i.e. Cluster Coordinators, Community Resource Persons under DAY-NRLM, ASHA Workers and other officials of Line Departments.

Keeping in view the importance of field level functionaries to understand the ground difficulties and realities as well as their outreach to maximum number of people at village level, the Administration utilized the service of the Cluster Coordinators, Community Resource Persons under DAY-NRLM,

ANDAMAN AND NICOBAR ISLANDS

ASHA Workers and other officials of Line Departments to trace the Covid Patients.

Also, Covid Control Rooms were setup at State, District and Block levels to have contact tracing of the Covid patients for their home/institutional quarantine and to provide them all necessary support.

As per the direction of UT Administration maximum number of dedicated staff engaged under DAY-NRLM and CRPs were deputed on various duties under Covid Control Room for mitigation of the pandemic situation.

Being in direct contact with the people of rural areas, the services of Staff and CRPs to mitigate the pandemic situation was highly beneficial. The situation in the Islands is getting under control and present active cases in the Islands has reduced under 100.

ASSAM

Call centres were activated at GP level. The purpose of these centres at Gram Panchayat level is to ensure vital GP services. It is important that those who show symptoms are separated from the patients with non-Covid related conditions. Such Covid centres are not testing facilities. However, they coordinate with concerned Department and liaison with Ambulance, ASHA worker, doctors, Covid centres etc. It is ensured that patients will not be able to report directly to the Covid centres without being referred by their GP or out of hours provider. The centres allow patients who have Covid symptoms to be assessed by a GP, whilst maintaining practice based GP services for others. Patients thus receive the right treatment, assessment and, if necessary, onward referral to hospital. Further, these call centres are doing bulk SMS, IVR and Cloud Telephony.

Immediate Response Team (IRT) are identified at CLF level, so that they can address upcoming issues related to Covid crisis promptly. VO & CLF active members, community cadres, ASHA workers, Anganwadi workers (who are SHG members within the Cluster), Village headman are members of 'Immediate Response Team'. Cluster Jeevika Sakhi/CRP (any one as decided by team) is the Convenor. These teams contributed a significant approach in identifying Covid affected persons of the villages, liaising with Health Department



and Food & Civil Supply department for SHG members. The team size was minimum 5 members and maximum 7 members at CLF level and minimum 3 and maximum 5 members at VO level; if CLF does not exist.

In order to coordinate and help all frontline departments, forums, field level workers and volunteers working to fight against Covid outbreak now and in coming times. They have to be vigilant in terms of how many people from the village/Cluster stay outside or people from outside are residing in that village. Further they will coordinate with other department like Health and Family Welfare, PRI, Food and Civil supply and inform the SHG member about the new guidelines/information on Covid and latest benefits/assistance provided by the government for the poor and needy people.

JHARKHAND

Cadres and Didis being part of Village Task Force along with ANM and Sahiya for identification and management of Covid cases in villages. Staff were part of Covid control rooms at state and district levels and gave their contribution in day-to-day functioning related to Covid control in their respective areas.



MADHYA PRDESH

Village crisis management group and monitoring committee (VCMGMC) were formed, and members from SHG/VO also represented the committee and participated the meetings of VCMGMC meetings.



KERALA



There were several activities at various level in the state which required concerted coordination. Hence a 'Covid War Room' was set up for the same. The activities of War Room included

- coordination of the activities of ward level committees,
- giving guidance and directions regarding Covid prevention and precautions
- conducting orientation meetings of ward members and ward level committee members,
- coordination of the daily activities of RRTs,
- conducting orientation and review meetings of RRTs,
- providing of counselling and mental support to Covid positive persons and family members through community counsellors
- Snehitha Gender help desk,
- vaccination registration of frontline workers, comorbid persons and going abroad persons
- coordination of Kudumbashree activities related to Covid prevention and precautions at the respective CDSs
- organising Antigen test and RTP-

CR test camps in coordination with Health centres (PHC),

- daily cases and TPR updates and prevention activities based on it
- awareness through ward level Samithi members
- IEC activities, special ward level Samithi meetings of wards with high positive case rates on Covid prevention
- conducting of weekly basis meetings of war room and core committees
- updating of death cases and collection of details of children whose parents are dead due to Covid
- setting up of DCC,
- monitoring of ward level Nodal officers (Govt employees or teachers appointed on ward level basis for Covid prevention) on the basis of daily reports from their respective wards
- arrangement of transport facility including oxygen support vehicles
- mobilisation of Covid essential commodities like mask, cloves, sanitizer, PPE kit, pulse oximeter through sponsorship and distribution to RRT's and volunteers
- ensuring support to the old age and people living alone through community counsellors and Snehitha Staff.

There are 1165 war rooms working across the state. All panchayats have started help desks to assist people. Regarding the health statistical aspects these activities played a vital role in reducing the Test positivity rate from 29.8% to 10.7% currently and looking forward to reduce it to below 5% immediately.

In this lock down period, various programmes were conducted in different GRCs like webinars, preparation of IEC materials, awareness classes through online, etc. District gender resource centre also worked as a district level Covid help desk of Kudumbashree in the district.

Amidst the acute second wave of Covid, all the Snehitha offices remained open during the lockdown and functioned at district level help desk. The help desk acts as a centre for dispelling the concerns and misgivings of the people. While Snehitha acted as the District Help Desk, GRCs became Covid help desk at the panchayath level. When war rooms became active GRCs started working in conjunction with the war rooms.

MIZORAM

The initiative was to support as monitoring and response taken up by the Village Organizations. This initiative is very important as they are very much involved in taking care of the community by being a part of Village Level Task Force who are the force who handles anything when it comes to Covid.

In every village in Mizoram, a task force by the name of Village Level Task Force on Covid is set up comprising of NGO leaders. The NGO like the Young Mizo Association (YMA) executive members, Village Council members, Village Organization office bearers, Mizo Hmeichhe Insuihkhawm Pawl (MHIP) a female empowerment group and other volunteers who are monitored and supported by the State Government Officials. The main task of VLTF is to maintain Covid appropriate behavior within the village, to enforce lockdown and other Government SOP, spreading awareness regarding Covid, Contact tracing, to look after the villagers who are in desperate situation due to lockdown as livelihood activities are stopped, sealing of inter State and international borders, supply of essential commodities, maintenance of Covid Care Centers (CCC) and maintenance of quarantine centers.

VLTF in every village are given freedom and power with their village to function as the sole responsible force when it comes to Covid and its overall effect. However, they are monitored by the State Government and other District and Block Officials. The main function of VLTF is mentioned above. First a committee is formed and then detailing of the members are made in such a way that it is not too heavy on the members. All members are assigned their roles and responsibilities to carry out the above-mentioned task.

All taskforce members are not paid and is fully a volunteer force. The villagers report and take guidance and instructions from their VLTF.

The most unique feature with re-



The most unique feature with respect to the VLTF is that as mentioned before it is a volunteer force where members are not paid a single penny for their time. The function of the Village Level Task Force really helps the State Government is combatting the Pandemic.

spect to the VLTF is that as mentioned before it is a volunteer force where members are not paid a single penny for their time. The function of the Village Level Task Force really helps the State Government is combatting the Pandemic. If not mistaken, no other State in India has a task force which functions the way the VLTF in Mizoram does.

The result of the function of VLTF is that it closes the gap between the general public and the State Government. Every thing is easier and less time consuming when VLTF are involved as there are no bureaucracy involved. Each VLTF takes care of their village which resulted in the pandemic more challengeable.



KERALA

Special funds

Vidyashree chitty scheme was started during the first wave of Covid pandemic for enabling the online studies of children. Schools did not reopen and the studies were conducted in online mode. The poor children did not afford a mobile phone or laptop for online studies. They depended on their family for a mobile phone or other electronic device for their studies. While parents were going for work many children missed their online classes. In these circumstances, "state declared a new micro chitty scheme

for providing laptop to children of Kudumbashree members in association with Kerala State Financial Enterprises.

The members have to enrol in a chitty scheme by paying Rs 500 and have to make the payment for 30 months. The members can request for laptop after completion of 3 instalments in Vidyashree portal designed by IT mission. The members will be provided a laptop of their choice ie Coconics, Acer, Lenova and HP (in the range Rs 14999 to 18000) within 84 days (12 weeks) of duration. 5% of loan interest is borne by the govt and 4% by KSFE. SC,ST and Fishermen community are provided with an additional discount from their respective departments.

As per this scheme, members can either buy the laptop of their

choice with the stipulated amount or can join this scheme as a way to make savings can withdraw the money from the 13th month of the launch of the scheme.

Vidyashree Laptop program was inaugurated by Honourable CM Pinarayi Vijayan on 20th Feb 2021 by providing 200 Coconics laptops to students from SC,ST and Aashraya families. At present 93,166 members have enrolled under this scheme, among which 66,120 members have selected their preferred model and 4907 members have received their laptops they preferred.

Vidyashree scheme is integral to the comprehensive programme towards greater education, amassment of knowledge, apart from this purpose the scheme has offered in generating jobs, ie now Coconics team have expressed their interest to provide free induction training to the technically qualified Kudumbashree trained candidates from 14 districts that will also promote advancement to Kudumbashree families in this pandemic situation.



Psycho-social care



JHARKHAND

Survey of migrant labour returning to Jharkhand was done. The HHs, those who are not included into SHG were included in the fold of SHGs. The migrant families were linked with various livelihoods activities under Agriculture, horticulture, MGNREGS. They were also provided RF and CIF for consumption and production purposes. At present, 4,96,591 migrant labourers have been surveyed, in this calendar year total 45,315 migrant labourers have been surveyed.

KERALA



The Covid pandemic has thrown an unprecedented challenge for mental health across the country. The possibility of getting infected with Covid, an illness with no clear defined treatment protocols and uncertain outcomes has shaken the world. Worries about risk of infection to self and their families, adequacy of protection, being in quarantine/isolation, and separation from families can lead to severe psychological distress.

The Snehitha team and community counsellors have provided mental support to the infected individuals, clearing up their doubts and apprehensions. The gender team has reached out to those people who are isolated due to Covid 19 infection and succeeded in assuring them they have a support system aiding them. Snehitha staffs and community counsellors regularly contact the elderly and those who are Snehitha calling bell members, who are living alone, over the phone and provide them with the psychological support they need. The gender team also ensured their necessities are fulfilled.

The constant fears of getting the



infection also lead to the development of mental stress. People with an already existing mental health condition may feel even more distressed, and there can be an increase in their problems. Some of these fears and behaviours are realistic, while many are just borne out of lack of knowledge, rumours and misinformation. Steps are needed to prevent social stigma and discrimination associated with Covid. Care has to be taken to promote the integration of people who have been affected by Covid without over-targeting. While pre-

ventive and medical action are the most important, emergency psychological crisis interventions for people affected by Covid are also critical. The professional counsellors of gender team have provided the much needed psychological intervention through counselling. After assessing the needs of each affected, the cases are prioritized and immediate attention given to critical ones and dealt accordingly. Those needing medical assistance are referred for professional help and follow ups are done accordingly.



Transportation support

MIZORAM

In Mizoram 48 AGEY Vehicles are being operated by SHG members in 10 MzSRLM Blocks. During the 2nd wave lockdown period, AGEY Vehicles are utilized for distribution of water and essential commodities to the needy households in the villages and transportation of people who are meant for quarantine and Covid Care Centers (CCC).

As AGEY vehicles are operated in the rural areas of the State, the target group and beneficiaries are the rural people of the State. This particular initiative is continued from the 1st wave.

The importance of AGEY vehicles plying during the lockdown is that as the AGEY Vehicles are operated by the CBO who are a member of the Village Level Task Force on Covid, the vehicles operate for free to meet the needs of the community by transporting essential commodities, water and people bound for CCC and quarantine facilities.

All AGEY vehicles volunteers in their villages and are asked to service when needed by the Village Level Taskforce. They mostly carry fresh vegetables and other essential commodities meant for distribution within their villages. Also,



the supply water to the village as people are not allowed to fetch water due to the lockdown.

When contact tracing is done, the people from the community with contact with Covid patients and people coming from outside the state are transported to quarantine facilities using the AGEY vehicles.

The unique feature regarding the transport support is that it helps ease the burden of the State Government as villages with AGEY vehicles can take care of their village need and are very dependent when it comes to transportation. The AGEY vehicles received an overwhelming response from the general public as it makes facing the pandemic a lot easier when it comes to transportation and its effect.

MADHYA PRADESH

MPSRLM felt the importance of prevention of SHG and community members from Covid pandemic and hence involved the existing system in best possible manner to build mass awareness on Covid appropriate behavior, Covid vaccination, health seeking behavior, immunity building etc.

In Sheopur awareness and mobilisation regarding Covid prevention and vaccination along with supply of essential commodities are being provided by Aajeevika Express (vehicles being provided under a scheme under DAY_NRLM). Similarly in Anuppur district, circles are made to maintain social distance, convey message for public awareness with loudspeakers by Aajeevika Express, and mass scale distribu-



tion of mask was also done.

In 40 Gram Panchayats of Bijadandi block of Mandla district,

villagers are being made aware by placing loudspeakers in Aajeevika Express for awareness regarding the corona epidemic



Ministry of Rural Development
Government of India



Deendayal Antyodaya Yojana - National Rural Livelihoods Mission (DAY-NRLM)

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