

Response to the COVID-19 Crisis: Observations from Communities in Assam

Introduction

The Governments of India and Assam in the wake of the COVID-19 pandemic has made it its objective to ensure efficient administration of various schemes to augment society's ability to cope with the current situation, especially for the most vulnerable sections of the society, who are facing an imminent loss of livelihood along with shortage in food and income. Tables 1 and 2 below present the various schemes announced by the central and state governments, respectively, to extend socio-economic support in dealing with the current situation.

Although children are not the only victims of this crisis, they are at risk of becoming one of the worst-affected members of society. With marginalised population are struggling to make ends meet due to loss of livelihood due to the severity of the response against this crisis, namely the lockdown, there will be a long-term impact on the well-being of children. In Assam, which has a large number of malnourished children, the crisis will deepen with many more children suffering from hunger and starvation without proper intervention. Moreover, children are facing loss of schooling, which is affecting their development outcomes. In this context, it is important to find ways to help families and prevent them from falling into poverty as a result of this crisis. Therefore, effective response through social protection schemes can prove extremely helpful.

Table 1. Central government schemes

Initiative by the Ministry of Finance (in association with Ministry of Commerce, Ministry of Corporate Affairs, EPFO, and other ministries)			
No.	Scheme/ Sector	Contribution	Beneficiary
1.	PM-KISAN	Offers Rs 6,000 per farmer annually, will be given as a front load to farmers. This means the eligible farmers will get Rs 2,000 in the first week of April.	8.69 crore farmers.
2.	MGNREGA	Daily wages increased from Rs 182 to Rs 202.	Manual laborers
3.	Deen Dayal Upadhyaya National Rural Mission scheme	Collateral-free loans worth up to Rs 10 lakh. It also doubled the limit applicable to the existing scheme to Rs 20 lakh.	63 lakh Women self-help groups
4.	Jan Dhan	Ex-gratia amount of Rs 500 per month for next three months.	About 20 crore women
5.	Ujjwala Scheme	Free LPG cylinder refills will be provided to beneficiaries of Ujjwala scheme for the next three months	Ujjwala Scheme beneficiaries
6.	Pensioners, widows and divyangs	A one-time ex-gratia amount of Rs 1,000 will be given to people over 60 years of age, widows and physically handicapped	About 3 crore poor senior citizens, poor widows and poor divyangs
7.	Organized sector	Centre will pay EPF contribution on behalf of both the employee and the employer for a period of three months for certain small companies. The government said companies with up to 100 employees in which 90 per cent of the staff is paid less than Rs 15,000 per month will be entitled to receive this benefit. It will also permit withdrawals of up to 75 per	4.8 crore employees registered with the Employee Provident Fund Organization

		cent of non-refundable advance or three months of wages from the EPF account, whichever is lower.	
8.	Construction workers sector	Centre will instruct the states to utilize the welfare fund for building and construction workers formed under a Central Government Act. The welfare fund has Rs 31,000 crore.	3.5 crore registered workers
9.	Pradhan Mantri Gareeb Kalyan Anna Yojana	5 kg of rice or wheat and 1 kg lentil per month free of cost for three months, over and above the 5 kg already available to them	800 million poor people

Table 2. State government schemes

No.	Scheme/ Sector	Contribution	Beneficiary
1.	National Food Security Act (NFSA)	From 1 st April, free rice would be provided.	Ration card holders.
		One-time financial assistance of Rs 1000 to poor families in rural and urban areas	Individuals w/o ration cards
		One-time financial assistance of Rs 1000 to poor families living in Bodoland Territorial Areas District (BTAD) and Karbi Anglong and Dima Hasao autonomous districts	Individuals w/o ration cards
		One-time financial assistance of Rs 1000	278,000 laborers registered with the government
2.	Ayushman Bharat Scheme	Cashless coverage to all persons in Assam going to any of the 36 private hospitals in the State. All 7 hospitals attached to medical colleges in the State are facilitated for COVID-19 treatment	All individuals
3.	PDS	The govt. has assured supply of rice at a newly subsidized rate of Rs 22 per kg.	Tea Garden workers

Objectives

- To understand the response of the central and state governments to the COVID-19 pandemic through various government schemes with respect to vulnerable communities of the society.
- To understand the awareness of PRIs on the COVID-19 crisis and their role in response to it.
- To provide suggestions based on the observations to enhancing the reach of the schemes with respect to vulnerable groups of population.

Scope and Limitations

- Only important parameters such as awareness about COVID-19 and access to banking facilities and select government schemes among vulnerable communities were considered.
- Only six out of 33 districts in Assam were considered: Goalpara, Baksa, Morigaon, Sonitpur, Biswanath, and Lakhimpur. Among them, only two are COVID-19 red zone districts: Goalpara and Morigaon.

- Purposive sampling was used with small sample sizes. The ongoing lockdown has also posed an obstacle in acquiring data, thus rendering the number of valid responses small. Hence, the findings should be considered as mere observations and not generalized for the entire population of the districts that were studied.

However, the observations made has key implications in terms of access to government schemes, in particular, food and income, for vulnerable communities, including those dwelling in remote areas within the district. Figure 1 depicts the districts where the rapid assessment was conducted vis-à-vis COVID-19 red zone districts.

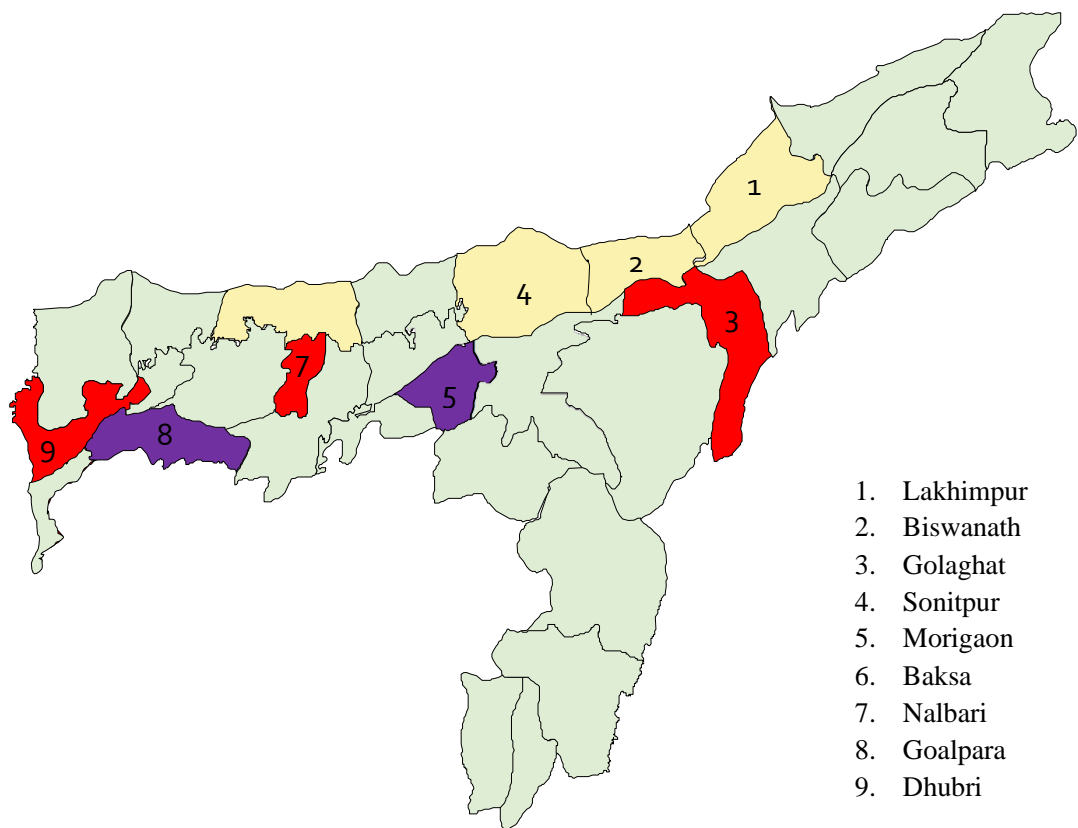
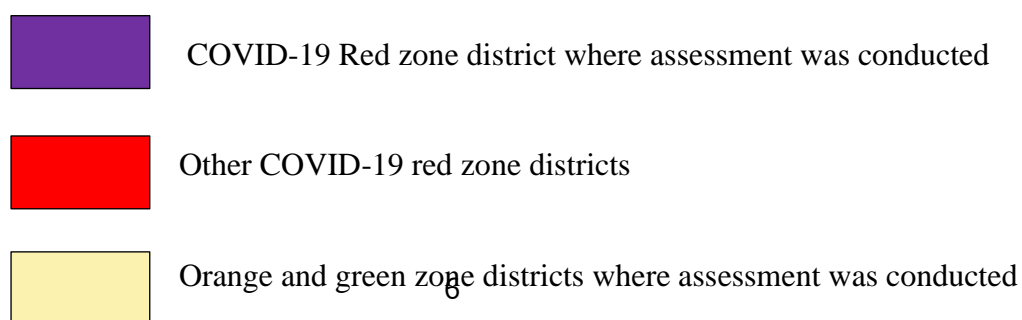


Figure 1. COVID-19 red zone districts and districts where assessment was conducted



Methodology

This rapid assessment examines how social protection schemes can be used to cope with rising vulnerabilities in the wake of a public health emergency. Six districts, Goalpara, Baksa, Morigaon, Sonitpur, Biswanath, and Lakhimpur, were selected based on socio-economic and demographic characteristics indicating vulnerability:

- Districts with tea intensive blocks (both small and big tea estates) or Adivasi population
- Aspirational districts
- Districts with lower health and education outcomes.
- Districts with greater proportion of SC/ST and other minority population, riverine and flood prone areas

Two GPs in each district were selected based on the presence of physical vulnerability, tribal population, tea-intensive activities with Adivasi population, lower access to education, health, and government schemes. Then, four wards in each GP were selected based on vulnerabilities such as flood prone areas, remote areas, areas with Adivasi and minority population, which are at greater risk of being affected by the crisis, were selected from which household level data has been collected. A triangulation of data was conducted through Key Informant Interviews conducted with GP presidents, Secretaries, CSO members.

Table 3. Sample selection

Name of district	Block	Number of GPs	Number of wards	Number of households
Goalpara	Kushdhuwa Balijana	4	4	37
Baksa	Tamulpur	2	4	24
Lakhimpur	Dhakuwakhana	4	4	22
Biswanath	Sakomata	2	4	17
Sonitpur	Balipara	2	4	22
Morigaon	Mayong	2	4	22
Total		16	24	144

Key Findings

- Last mile connectivity efforts made by government to raise awareness had a positive impact. **In this context, PRIs have played a very important role in raising awareness through different techniques like mic announcements and door-to-door visits.** The messages on social distancing to prevent the transmission of COVID-19 reached areas with lesser media connectivity.
- Community-based networks in the villages have played an important role in the response to the COVID-19 crisis. **PRI networks and voluntary groups/organizations have been very crucial in extending support to communities in terms of distribution of rations and cash transfers to vulnerable groups.**
- Most of the benefit derived from government schemes is in the form of food rations. **The impact of cash transfer benefit seems low due to hurdles in accessing banking facilities during the lockdown.** The major hurdle reported was lack of transportation facilities and non-possession of ATM cards.

Awareness of Community Members

It is noteworthy that majority of the respondents reported having adequate information on COVID-19 symptoms and preventive measures. The message on social distancing was found to have been clearly communicated with 76% of respondents being aware of it. In this context, it is important to note that PRI members also widely shared the message of social distancing during their awareness campaigns.

The awareness of emergency helpline is moderate with roughly 55% of the respondents claiming to know the helpline numbers.

Source of knowledge

Neighbours/Word-of-mouth. It was found that messages on COVID-19 symptoms and preventive measures were largely spread within communities through word-of-mouth by community members who have come across the information on television, social media, etc. Networks of youth volunteers and teachers have also participated in disseminating information.

Television. Around 30% section of the respondents have reported becoming aware of the crisis and how to prevent it through television news.

PRI Networks. PRI members across most districts have effectively disseminated information through various means like mic announcements and door-to-door visits.

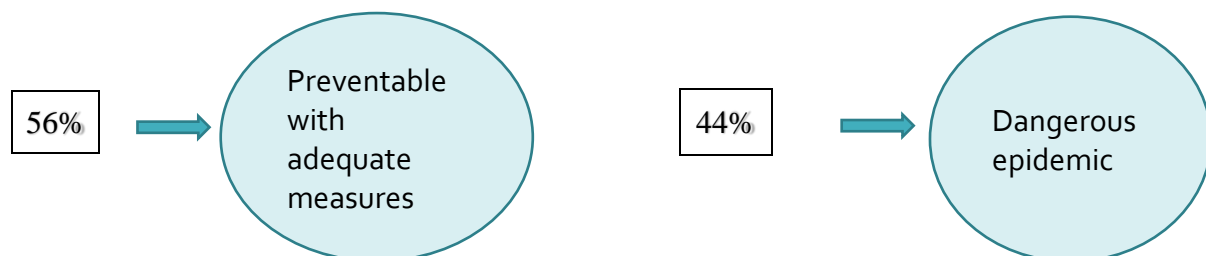
Tea Garden Authority. In areas of Sonitpur, the tea garden community has received information on COVID-19 from the tea garden authority.

Voluntary Groups. CSO networks and voluntary groups comprising of teachers and youth volunteers have been spreading important messages and providing aid (food ration and cash transfer benefit) during the lockdown.

How do communities perceive this disease?

Although most of the respondents show an overall understanding of the disease and its preventable nature, a section of respondents also showed fear.

Figure 2. Perception of people about COVID-19



“I think this new disease is extremely dangerous and it is best to avoid travel at any cost. I have not been to go to my bank branch to withdraw money since the disease can be transmitted through proximity. Our family is trying to manage with what we have at this moment. My fear is mainly because of how people behave in banks and shops. It is very difficult to avoid crowds.”

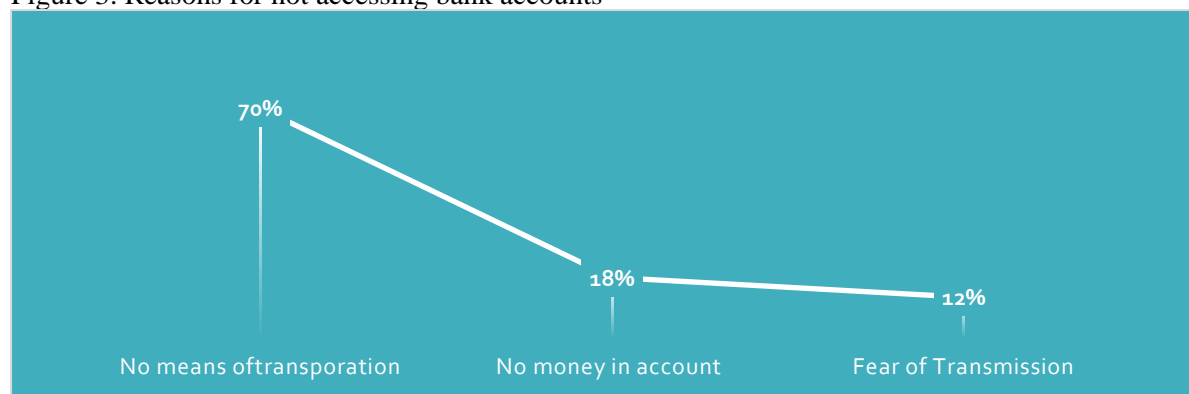
Access to Benefits by Communities

Government schemes administered to address the shock faced by communities was assessed in terms of availability and accessibility. It was found that people are facing challenges in availing the benefits of direct cash transfer schemes mostly due to lack of awareness or the inability to access banking facilities under the current lockdown.

Access to bank accounts

Although nearly 86% of the total respondents possess a bank account, only a few of respondents have managed to withdraw money from their accounts. The respondents cited various reasons for not being able to access their bank accounts, the most important ones being distance from the bank and lack of transportation facilities during the lockdown. However, very few respondents reported possessing ATM cards or using one to withdraw money.

Figure 3. Reasons for not accessing bank accounts

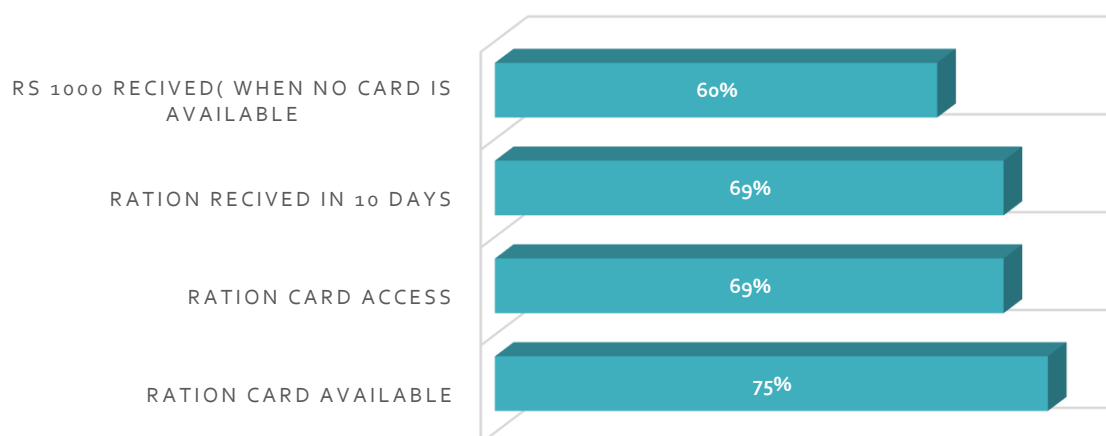


“The bank is located far from my village. Generally, on normal days, I ride my cycle half the distance and then withdraw money from the branch. However, since transportation is extremely low, I am unable to commute in most cases.” -A respondent from Mayong, Morigaon

Access to food rations

- It was found that most respondents possessed ration cards and around 69% of them have received food rations.
- Respondents in Biswanath and Baksa districts have reported that they have benefited adequately from free distribution of food rations, including additional amounts of rice.
- However, respondents in certain GPs of Morigaon, Sonitpur, and Lakhimpur districts have reported limited or no access to food rations. The major reasons cited by them include lack of ration cards and being unaware of such provisions. This is particularly the case in areas with minority and Adivasi population. For instance, in the area of Balipara tea estate, many respondents claimed that they do not possess ration cards due to lack of necessary basic documents. It should be noted that they have received rations mostly from voluntary bodies.

Figure 4. Access to ration



“We have not received any ration since I don’t have a ration card. I have a bank account, but I am not aware of receiving any money in my account at the moment. I have no way to know without visiting the bank. No vehicles are plying at this moment. Even if I go some distance by cycle, I would still have to take public transport to reach the bank where I have my account” - A respondent from Jhargaon, Mayong, Morigaon

Access to schemes under National Social Assistance Programme (NSAP)

Among the eligible respondents, only 29% were aware of the benefits of the schemes under NSAP and only 8% had access to them, mostly in the form of old-age pension and widows’ pension benefits.

Access to wage compensation scheme in tea garden areas

Based on the information collected from the tea garden areas in Sonitpur district, it was found that no wage compensation benefits have been received by pregnant women during the lockdown.

Access to Jan Dhan Yojana and Ujjwala scheme

- It was found that around 60% of the respondents were aware of the transfer of Rs. 500 per month for three months to their bank accounts under the Jan Dhan Yojana, while 52% of the respondents have already received this benefit. One of the primary reasons for this is the low access to banking facilities with people opting out from going to the bank due to fear of transmission of COVID-19. However, it should be noted that the number of respondents with Jan Dhan accounts was low.
- Access to Ujjwala scheme was found to be low with only 50% of the respondents reporting having received its benefits in contrast to 84% of the respondents being aware of the scheme.

Best Practices Observed

Role of PRIs

Awareness on COVID-19. The **panchayats have played a crucial role in the emergency response to the COVID-19 crisis.** PRI members conducted mic announcements and door-to-door visits for awareness generation. The key messages of these awareness campaigns include preventive measures against COVID-19 such as handwashing and social distancing and common symptoms such as fever and cough.

However, PRI members have emphasized the need for knowledge on different communication techniques and ways in which communities can help women and children during public health emergencies. They have also emphasized the need for more facts on COVID-19.

“I think the training on handwashing was extremely useful. We need more training related to COVID-19, specifically on how to communicate better with community members. We require more information, important messages that need to be shared and most importantly, ways in which we can help the community during a pandemic situation, particularly women and children.” -PRI member, Lakhimpur

Access to Social Protection Schemes. PRI members have coordinated with ration shops in their local areas to keep the shops functional. Contingency funds were used in some cases to support marginalised households in the community.

“Most of the families here do not have bank accounts and those who do have are not able to commute to withdraw money due to the lockdown. As such, our panchayat has used its contingency funds specifically for those who are not able to access rations because they do not have ration cards. We have helped 200 families in our GP using Rs. 2 lakhs from our contingency fund.” -GP member, Napam GP, Sonitpur

In Lakhimpur district, PRI members have used existing data to extract information on those who do not possess ration cards in order to distribute Rs. 1000 per household.

However, they have reported that lack of access to banking facilities in their proximity has been a major hurdle for communities in availing cash benefits. They claimed that there is no issue in the flow of funds to beneficiary bank accounts under all the cash benefit schemes, but withdrawing the money has become an issue. In Biswanath district, where most respondents were found to possess ATM cards, people have been able to withdraw money, with the only issue being long queues.

Capacity Building Needs. PRI members have shared that there is a need to look into the livelihood situation of people in the villages during a public health emergency. In this respect, local and community-based stakeholders (such as SHGs, youth groups, local entrepreneurs) can play an important role. **A panchayat in Madhya Dhakuwakhana is already looking into the possibility of manufacturing face masks in collaboration with SHGs.**

In this regard, some PRI members have shared the need to build capacity regarding the utilisation of existing resources and platforms. They also expressed the need of adequate training on ways to deliver benefits of schemes to communities during public health emergencies. Further, they emphasized the need to prepare contingency and preparedness plans to combat such emergencies in the future.

Role of voluntary bodies

One of the key findings is the **major role played by voluntary organisations** in the districts, particularly Lakhimpur, Morigaon, and Sonitpur. In Mayong GP of Morigaon district, groups of teachers and youth volunteers have distributed ration to community members with the support of PRI members. This was an extensive drive that has been reported by most of the respondents.

Respondents have reported that such actions have helped them cope with this emergency situation. Some of them emphasized that the continuation of such support is necessary.

“We have received help from NGOs and other people. The help that we have received in the form of food rations is very helpful to sustain for few days since we have not earned wages for some days now. More such charitable action is needed to feed my family and sustain for few more days. I don’t have ration card and bank account. Such actions can help my family immensely.” -A respondent in Lokra GP, Sonitpur

Table 4. District-wise observations

No.	Observations		
1	Green zone districts		
	Sonitpur Block: Balipara GPs: Lokra, Chiloni	-The tea garden authority took proactive action in spreading information on COVID-19. In Lokra GP, information was also disseminated by GP through door-to-door visits. -Voluntary organisations in villages distributed rations for the poor and marginalised people. -Specifically, in Lokra GP, voluntary groups and local MLAs have distributed food rations such as potato, rice, and edible oil.	-Some respondents had lower access to ration due to lack of ration cards. -In Chiloni GP, which has a large Adivasi population, respondents from Balipara tea estate showed low awareness of the provision of food rations and cash transfers. Moreover, most of them do not have ration cards. -Among those without ration cards, very few have received ration from shops or Rs. 1000. - In Lokra GP, which has a considerable population of wage labourers and petty farmers, have reported that they have not received any ration.

2	Biswanath GPs: Pabhoi, Dhuli, Napam	<p>-The respondents have reported the use of social media platforms such as WhatsApp and Facebook for sending and receiving information on COVID-19.</p> <p>-They possess both bank accounts and ATM cards.</p> <p>-Most respondents with ration cards in both Pabhoi and Dhuli GPs have received rations.</p> <p>-Widow and elderly people have received benefits, but have faced hurdles in accessing the amount from their accounts.</p> <p>-Most respondents have received Rs 500 under the Jan Dhan Yojana. Some of them confirmed receiving SMS about the amount being deposited in their accounts, but they have not been able to withdraw the money.</p>	<p>-Access to banking facilities was low because of long queues in banks and ATMs.</p> <p>-Access to cash benefits for those who have not received ration have been found to be limited in both Pabhoi and Dhuli GPs.</p>
3	Baksa Block: Tamulpur VCDCs: No 4. Tamulpur, No 2. Tamulpur, No 2. Dakhin Kumarikata, No 4. Dakhin Kumarikata	<p>-Most respondents received awareness messages from TV, newspaper, and local community members.</p> <p>-The respondents are aware of the provision of free ration and have received 5 kg rice from the PDS during the lockdown.</p> <p>-Most respondents have also received Rs 500 under the Jan Dhan Yojna.</p>	<p>-Although most respondents reported having a bank account, they have been unable to withdraw money due to distance from the bank.</p> <p>-Respondents without ration cards have not received cash benefit of Rs. 1000 yet. They have not received any information about it from PRI or any other authority.</p> <p>- Although respondents have received information about schemes under NSAP, those who are eligible have not yet received monetary aid through any other mode.</p>
Orange zone districts			

4	<p>Lakhimpur</p> <p>Block: Dhakuakhana</p> <p>GPs Matmara, Uttar Dhakuakhana, Dimaruguri, Madhya Dhakuakhana</p>	<p>Awareness on covid 19: -Mic announcements were made widely to generate awareness on Covid 19.</p> <p>Benefits of schemes and other services: -In Madhya Dhakuakhana GP, Lakhimpur, panchayat also has started distribution of sanitary napkins to adolescent girls and women. -GPs have made a list of all those who do not have ration cards based on available data. -Most respondents have reported that they have received benefits from government schemes, including under JDY and Ujjwala schemes. -Aid received by respondents in the form of ration from voluntary organizations and government employees.</p>	<p>-GP presidents mostly reported requiring adequate training on communicating with the community. They feel that there is an urgent need of capacity building as on how to face and communicate with the community in such global emergencies. Handwashing was something they learned in the training of PNRD and which is of much helpful for them. -Similarly, if they can connect livelihood with health initiatives. Some of the PRI s here have involved SHGS in making masks locally. They feel that capacity building on such action is required. -They also need more information to equip farmers on how to respond in crisis since they face a heavy loss during such pandemic situation. -Most respondents have reported that they have received benefits from government schemes, including under JDY and Ujjwala schemes. - Aid received by respondents in the form of ration from voluntary organizations and government employees.</p>
Red zone districts			
5	<p>Morigaon</p> <p>Block: Mayong</p> <p>GP: Jhargaon</p>	<p>-Community network was found to be the key source of information on Covid 19.</p> <p>-Most respondents have bank accounts.</p>	<p>-However, respondents have claimed that they are unable to access banking facilities due the long distance of banks from their homes and lack of transportation facilities during lockdown.</p> <p>-Most respondents did not possess ration cards.</p> <p>-Many respondents without ration cards have reported that they have not received Rs.1000 from GPs on behest of the state government in lieu of free rations.</p> <p>-Very few instances voluntary bodies operating here. One instance reported by the respondents is of the distribution of ration by local teachers. However, they claimed that the ration received will not be sufficient.</p>

6	<p>Goalpara</p> <p>Blocks: Balijana, Kuchdhowa</p> <p>GPs: Agia, Balijana, Puranivita, Majjakhili</p>	<p>-The most common source of dissemination of information on COVID-19 is through community networks. GP members have played a part too through door-to-door visits.</p> <p>-Most of the information being disseminated relates to symptoms such as fever and cough and the importance of social distancing as a preventive action.</p> <p>-Most respondents have bank accounts.</p> <p>-Respondents are aware of schemes and benefits provided under NSAP and they have availed the benefits of widow and old-age pension.</p> <p>-Almost all respondents possessed ration cards and have received free rations.</p> <p>-They received information on the provision of rations from PRIs and voluntary organisations. They received additional aid in the form of food rations and cash transfers through voluntary bodies, particularly in two GPs.</p>	<p>-Access to banking facilities has been limited due to long distance from home and lack of transportation facilities during lockdown. Some also opted out due to fear of transmission of COVID-19.</p> <p>-Access to Jan Dhan Yojna was found to be limited. However, some respondents have claimed that they are not aware of receiving any money in their accounts through Jan Dhan Yojana as they have been unable to visit the bank.</p> <p>-Access to Ujjwala scheme was found to be low, with only 10 out of 46 households having received its benefits.</p>
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Suggestions

1. Strengthening community level action through PRIs

As voluntary actions have been undertaken in some of the communities along with the PRIs, there are benefits of strengthening such networks through capacity building and training.

2. Creating easy content for awareness generation

Informal networks were found to be one of the most crucial sources of information. Information was also disseminated by youth groups and PRI members. It is important to provide easy content that can be repeatedly disseminated. For example, the message on social distancing reached a wider population as it was disseminated through mic announcements and door-to-door visits by PRI members and other sources.

3. Using SHG networks to improve accessibility to banking facilities during such crises

As access to banking facilities have not been easy during this crisis, SHGs can be roped in to make banking facilities accessible in communities. As reported, PRI members have already taken the support of local SHGs in some of villages for the manufacture of face masks. These SHGs need to be empowered to fulfill other needs of the community.

4. Strengthening PRIs for emergency response

Capacity-building of PRI members on communication techniques for the disseminating of information, necessary actions to be taken in communities during emergencies, and use of local resources and agencies/bodies will strengthen the response of communities during crises. This has already been observed in some areas where voluntary action has been taken by local bodies/youth groups in collaboration with PRIs.