

## **UPDATE ON THE SITUATION IN OUR PROJECT AREAS**

Most of you will have heard of the dire situation in India regarding the resurgence of Covid-19, and many of you have been in touch to ask how things are going on our projects. This is just a brief update so you have some idea, but if any of you would like to know more, then please do not hesitate to contact us and ask. We're not making an appeal, because most of our work is aimed as sustainable development. However, it is hard to stand by when our friends are facing such terrible things, and we are doing what we can to help. If anyone wishes to help with what our partners are doing in this emergency, we are very happy to channel donations in that direction. But our main focus of work continues to be on our long-term projects.

### **DELHI**

In the lockdown last year, our partners in Delhi, the Baliga Trust, took a lead role in the areas of Delhi where it works. The following describes what they were able to do during the three months of lockdown last year, and they will be carrying out similar work this time round as well.

#### **COVID19 Relief Work:**

**A. Dry Ration kits with adequate material for 15 days/one month:** Total Persons covered 45000 of 8931 families. Over 500 transgenders and 1400 sex workers were also covered.

*Majority of minority and needy population in walled city including Chandni Chowk areas were covered.*

**B. Cooked meals:** two times a day for over 3 months to 10000 people.

**C. Hygiene kits and Education Kits:** Over 2500 children.

**D. Health and Medical Services:** Over 1500 patients were provided primary medical care services including free medical check up and free medicines in Basti Khwaja Meer Dard in Central District.

*Regular Life Line Clinics are running in Holambikalan and in Narela in North district*

Much of this work was done ensuring that government and other schemes were activated, and properly implemented, supported and accessed; manpower was provided by Baliga Trust staff and volunteers. This meant that much could be achieved for relatively little cost.

If anyone does want to make a donation to support them in work of this nature, providing relief to poor communities who are dependent on daily wages from work which will have disappeared during the current lockdown, then we can make sure the money is directed to them, and it will be gratefully received.

### **ODISHA**

Odisha has not suffered the same ravages that face Delhi – partly because it is largely rural, but also because the government took rapid action to address the situation, and the measures have been fairly successful. However, the situation there is deteriorating as well, and many of our project team and participants have been directly affected. Some have had serious Covid, and many have lost members of their family. The figures do not give an accurate picture, and there is serious underreporting of cases.

In the early stages of the pandemic last year, we made a donation to help our partner, CHALE CHALO, to carry out awareness and support work. One of the most

serious issues was that migrant workers had lost their jobs in the cities and other states. Many families rely on this money to get them through the year. We helped people access all the available government relief, benefits and schemes to make sure that everyone had enough food, and, when it became possible, access to work under government schemes. In addition, we set up a kitchen garden project in Nuapada (Western Odisha) which trained 380 women in 20 villages. This enabled each of them to set up a kitchen garden, making their own compost and fertiliser, producing vegetables to improve the diet of their own families, and income from the sale of surpluses. This has been really successful, and each village now has a seed bank where local seed is collected and distributed. The benefits have reached the families of these 380 women, about 2,000 people in all.

We have received an anonymous donation which enables us to set up a similar project in our MANGRO Project area, by the coast. The donor wanted the money to focus on women, so we are using it to work with 400 women in three Gram Panchayats. It will offer the same support and opportunities as our Nuapada project, but we aim to use it as a springboard for extending it to more villages in the area. The women will be creating model kitchen gardens, and will be trained as peer educators, stepping out into surrounding villages to pass on their skills and experience. We have enough money for the first year of the project, but if anyone would like to donate to this longer term way of addressing the problems that come with the pandemic, then we can make sure that it is directed to this work.

The following are two recent articles from “Down to Earth” and “The Hindu” about the situation in Nuapada. They highlight some of the unexpected issues surrounding Covid in Indian villages, particularly the problem with accurate statistics.

## Odisha's Nuapada a snapshot of how COVID-19 is affecting rural India

Nuapada district experiences lack of oxygen, callous staff, a swelling number of infection cases and deaths and an administration in denial as COVID-19 wreaks havoc .

By [Ajit Panda](#)

Published: Monday 26 April 2021 DOWN TO EARTH



*A person being tested for COVID-19 at the Khariar Road Railway Station in Odisha's Nuapada district. Photo: Twitter Handle of the Collector and District Magistrate of Nuapada*

The worst fears of experts regarding rural India during the first wave of the novel coronavirus disease (COVID-19) last year are coming true. Nuapada, a district of Odisha bordering Chhattisgarh, offers a snapshot of the havoc that the pandemic is wreaking, now that it has reached these areas.

Lack of oxygen, callous staff, the swelling number of infection cases and deaths and an administration in denial is there for all to see in the western Odisha district.

Take the example of shortage of oxygen. Duryodhan Majhi, a member of the Silva Gram Panchayat, died of COVID-19 April 24, 2021. His brother Sadharam alleged that Duryodhan had died due to medical negligence:

He was on oxygen since April 16. When supply exhausted at about 2 am April 24, I approached the hospital staff. They said it would be available in the morning. As my brother's condition deteriorated, I approached emergency staff again at 5 am. But I was told oxygen was not available. My brother died subsequently.

Dolley Hota sent a letter to the chief district medical officer (CDMO) of Nuapada after her father Janmejaya Joshi died at the Covid hospital at Nuapada town April 24. She claims her father died due to oxygen shortage.

Janmejaya's wife requested staff to change the exhausted cylinder at about 12 midnight April 23 to no effect. "When my mother repeatedly asked them to provide oxygen, the staff became irritated and scolded her," Dolley told this reporter.

The family's relatives in Khariar town, also in Nuapada, rushed to the hospital with three cylinders but it was too late.

"The situation in the Covid hospital at Nuapada was very good during the first wave of the pandemic. There was hardly any complaint about treatment and care. But the situation now is very very bad," a local journalist whose wife died of COVID-19 in the hospital a week ago, said.

"There are no timely visits by staff. Patients have to run to the emergency section frequently to complain of their problems," he added.

The CDMO, Nuapada, however said there was no question of an oxygen shortage or any other negligence. Kali Prasad Behera said the hospital was getting 250 cylinders every day.

The hospital is located at Sildha village in the Nuapada block and has a bed strength of 140. With five ICUs and five ventilators, the hospital accommodated about 160 affected persons a week ago.

This reduced after the Covid Care Center at Khariar became operative.

The Covid Care Center at Khariar, with 100 beds, 16 oxygen cylinders and 40 concentrators, has forty patients at present. "We have been assured by the district collector that the number of oxygen cylinders would be increased. We need them as the number of affected persons is increasing," Tanmaya Hota, in charge of the Covid Care Centre, said.

### **Swelling numbers**

The number of daily new COVID-19 positive cases in the district as well as the percentage has not shown any decline in the last few days.

The total number of positive cases from March 1 till April 25 was 5,399, which was 10.16 per cent of the total people tested. The number of people found positive in the district April 25 was 300, which was about 30 per cent of the total 1,003 people tested.

Deaths due to COVID-19 in Nuapada have also significantly increased in April, at an average of five deaths daily in the last three weeks. The total deaths due to COVID-19 in Nuapada district till April 26 is 68.

The administration has decided to open another 100-bed Covid Care Center at Sinapali. "It will be operational with 22 dedicated staff from April 27," Sada Naik, block development officer (BDO) of Sinapali, said.

Most people in the villages of the district are still shying away from COVID-19 testing. Radheshyam Behera of Sargimunda village said most people in his village had COVID-19 symptoms. Hence, he requested the CDMO, Nuapada, to depute a team to conduct antigen tests in the village.

“But when a testing team reached the village the next day, only three families volunteered for testing and six out of twenty persons were found to be COVID-19 positive,” Radheshyam said.

For most people in the villages, COVID-19 still carries stigma, that leads to restrictions on the use of village commons especially water sources.

Sadananda Naik, BDO, Boden, said:

Except some remotely located villages, the situation all over the district is same. Most affected villages are those located nearer to the Chhattisgarh border and nearer to urban areas in the district. The Kendumunda, Godal, Sinapali and Gandabaheli panchayats of Sinapali block are more affected.

## COVID-19 stalks Odisha’s poorly connected Nuapada district

Satyasundar Barik

THE HINDU, BHUBANESWAR, APRIL 25, 2021 17:10 IST



### Relying on Chhattisgarh for jobs and supplies, Nuapada’s health infrastructure is under severe strain with a test positivity rate of nearly 40%.

At Bikrampur village, surrounded by the Kudalkiara forest in western Odisha’s Nuapada district, Muralidhar Kand, 52, is very relieved that 18 days have passed since he tested positive for COVID-19. His brother, Shyamdhar, 45, too appears to be recuperating well from COVID-19.

But, Mr. Kand said, “We were left puzzled when we tested positive for the coronavirus. We rarely go outside for shopping while vendors occasionally come to us. Our interaction with the outside world is limited.” A small forest patch has to be crossed to reach Bikrampur, home to about 50 families.

“If tests are conducted scrupulously, identifying people having flu-like symptoms, I am sure every home will turn into a COVID Care Centre,” Mr. Kand remarked.

While COVID-19 is creating havoc in urban India, in Nuapada, it’s infecting people and claiming lives silently. At Belpada village under Lanji panchayat of Nuapada’s Khariar block, 20 out of 30 villagers tested positive when rapid antigen tests were conducted. In Brahmanipada under Sinapali block, 29 positive cases were detected in early April. Several villagers under Komna block refused to get themselves tested after 23 persons there tested positive.

Till Sunday, COVID-19 had claimed 42 lives at the Nuapada COVID-19 hospital since April 8. If the deaths of COVID-19 patients referred from Nuapada to outside hospitals were taken into account, the toll would exceed 60 in the past 20 days.

## **Worrying TPR**

Chief District Medical Officer Kalicharan Behera admitted that Nuapada had been clocking a test positivity rate of close to 40% in the past one week and its health infrastructure had come under severe strain.

Health experts are attributing the rapid spread to neighbouring Chhattisgarh, on which people in Nuapada are dependent for everything from employment to trade.

“When cases increased in Chhattisgarh in the month of March, people started returning home. At that time, people in Nuapada were complacent and were not adhering to precautionary measures. Soon the situation went from bad to worse,” said Annada Shankar Das, an Ayush doctor assigned to track COVID-19 trends in the community.

The district headquarters hospital, eight community health centres, around 20 primary health centres and 100 sub-centres of the district cater not just to the people of Nuapada, but also the bordering districts of Chhattisgarh.

Nuapada has 2,584 active cases after Khordha (7,969) and Sundargarh (5,981). The rising numbers have greatly strained the COVID-19 infrastructure in the district. There is one COVID-19 hospital having 165 beds at Nuapada, and a 50-bedded COVID Care Centre at Khariar. Of the five beds with ventilator facility, only two are functional at any given time.

If tests are ramped up, the number of positive cases in Nuapada is likely to shoot up. The present outcome from antigen tests is an indicator. On April 17, 221 (25.66%) out of 861 persons tested positive. On the next day, the test positivity rate (TPR) went up to 31.24%, when 249 of 797 persons tested positive. Subsequently, the TPR continued to hover between 35% and 40%. The TPR was estimated at 37.75% on April 23 and 39.75% April 24.

## **Limited infrastructure**

As Nuapada sends RT-PCR samples to Bhubaneswar for testing, it takes an average 10 to 12 days for results to be known. During this time, infected persons unknowingly spread the virus. Lack of space for home isolation contributes to further spread.

Though the local district administration claims to have enough test kits stocked up, a large population stuck at home with COVID-19 symptoms is estimated to be shying away from tests. Non-existence of public transport is a major reason. Symptomatic people are unable to hire vehicles. Even neighbours are unwilling to take people to testing centres by two-wheelers.

“A man with a family in Bendrabahal village in Bargaon panchyat tried everything to access a testing centre but he failed. After my personal message to a senior officer on April 14, the administration sent a team to his house. Two people from the house later tested positive,” said Ajit Panda, Khariar-based journalist.

“Though we have enough test kits to test people, we are facing staff crunch. Many staff have gone into home isolation after getting infected,” said Gopal Chandra Mallick, Nuapada district COVID officer.

“Most people from villages cannot afford to get treated in private hospitals outside the district. People here seem to be sitting ducks in the ever worsening COVID-19 pandemic,” said Rudra Patnaik, Nuapada-based activist.