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COVID-19 AND THE ROLE OF THE LEADERS OF LOCAL SELF-GOVERNANCE IN REVERSE MIGRATION: A CASE OF WESTERN ODISHA

Abstract

This paper examines the role of the Leaders of Local self-Governance (PRI) in reverse migration in Balangir and Nuapada districts of western Odisha. Odisha Government has adopted a novel people-centric approach to contain the COVID-19 pandemic in the State. It has extended full support to all Panchayats to take the lead in dealing with the emerging situation at the grassroots level. The role of Panchayats, which was strengthened over the years, became crucial as Oriya people working in neighboring States returned during the lockdown. Keeping the emerging situation in view, the Chief Minister expressed confidence in elected people's representatives and delegated the powers of District Collectors to Sarpanchs – the head of the Panchayat/Local self-Governance as part of his Government's proactive scientific road map for the return of Oriya workers from other States. The basic argument here is that how the leaders of Local self-Governance along with the Front Line Workers (FLWs) – Accredited Social Health Activist (ASHA), Anganwadi Worker (AWW) and Auxiliary Nurse Midwife (ANM) and other secondary stakeholders of the villages managed the pandemic situation in the Panchayats. The argument is substantiated by empirical cases collected amongst of the different stakeholders during fieldwork.

Keywords: *Local self-Governance, Reverse Migration, Quarantine, Front Line Workers, Civil Society Organizations*

Introduction

COVID-19 is not just a medical pandemic; it is a social happening that is disrupting our whole social system and structure. As Leach and colleagues noted in a recent online essay: The dynamics of the virus, infection and immunity, not to mention on-going efforts to revise and improve clinical care, and endeavors to develop medical treatments and vaccines, are a critical part of the unfolding story. So, too, are peoples' social responses to the disease and

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interactions with each other. COVID-19 is revealing, reinforcing, and catalyzing new social and cultural relations; laying bare inequalities and anxieties, discrimination and division; but also galvanizing solidarities and collective action (Leach et al. 2020).

In fact, the *Panchayats* of Odisha have always played a significant role during many natural disasters in the past. They are taking the lead at the ground level this time too. This adds to the administration's confidence in tackling the pandemic. The Chief Minister of Odisha has been delegated the power to the leaders of Local self-Governance (*Panchayat*) to manage the pandemic in their respective geographical locale. So here in this paper, an attempt has been made to document the role, preparedness and responsiveness of the Leaders of Local self-Governance (PRI) in reverse migration in Balangir (Balangir and Deogaon Blocks) and Nuapada (Khariar and Sinapalli Block) districts of western Odisha. The core argument of the paper has been substantiated by the qualitative data rather the empirical cases collected amongst of the different stakeholders during fieldwork.

As the State COVID-19 Dash Board, Government of Odisha is concerned, there are 3,37,929 cases has been reported till the date which is 3.05 per cent reported of cases of India and among them 335322 (3.12 per cent of India cases) people has been recovered. The percentage of deceased is 1917 (1.22 per cent of India cases). Similarly, In Balangir district the total confirmed cases till the date is 8854, which is 2.62 percentage of Odisha case. The total recovered cases of the district are 8811, which is 0.16 per cent of Odisha cases. The deceased case of Balngir is 42, which is 2.19 per cent of the deceased cases in the state Odisha. In Nuapada the total cases reported is 7640 which is 2.26 per cent of Odisha cases. The 7610 person has been recovered which is 2.27 percentage of Odisha cases. The deceased cases in Nuapada are 27 which is 1.41 per cent of Odisha State (Government of Odisha, COVID-19 Dashboard, District- Nuapada).

Qualitative inquiries are the best method for capturing social responses to this pandemic. As has been shown with other epidemics and health, these methods allow us to capture and understand how people make meaning and sense of health and illness (Schatz et al. 2013; Teti et al. 2015). Pivotal to anthropological research such as participant observation, interviewing and methods like case study help eliciting information from the grassroots level. Thus, anthropological enquiry has a distinct advantage over other disciplines. At a time when qualitative dimensions of development are occupying an indispensable place, anthropologists would rightly fill up the gaps as over qualification and statistical results have no doubt brought success of development programs in paper and speeches, the reality does not correspond to these successes. An Important reason is the lack of proper qualitative enquiry during evaluation (Sahay 1981).

Survey is ideal for micro understanding but presenting the humanistic arena a micro situation of case study seems to be a method par excellence.

Individual cases pertaining to how people respond to development, what happens to their style of life, do they register satisfaction to it, do they still cherish and nostalgically remember their pre development stage need to be recorded to know what development is doing at local level (Patnaik 1990).

In development context emphasis on case studies dies not; however, negate the importance of other standardized anthropological methods. And also case study is one of the well-known methods; the importance is to be fully explored in development studies. In contemporary world, where the subject matter of anthropology is fast changing because in changes in the equation between “those who study” and those who are studied, we can no longer treat the people we study as subjects in the traditional anthropological sense. In such as anti-colonial instinctual scenario, human perspectives and individual oriented theories have gained firmer grounds, and case study method in its richness and holism, introspecting the qualitative dimensions of human life, fully serves this need. We not only need information on “what is happening with development”, but also “what do the people think and feel when they know that they are the “targets” the proposed beneficiaries of development programs. For both of them, in an ex-post-facto design, case study is one of the best methods for it investigates how the intrinsic factors interact with the external (Patnaik 1990).

The value of qualitative methods with special reference to case studies is to help explain, address, and plan for disease outbreaks and health emergencies. So, here in this paper attempt has been made to describe the experiences of migrants and the role of the leaders of Local self-Governance preparedness and responsiveness of the leaders of Local self-Governance and the Front Line Workers (FLWs) in dealing with the reverse migration in 2 districts Balangir and Nuapada of western Odisha.

What is COVID-19

In December 2019, COVID-19 was recognized in Wuhan, China (Wang et al. 2020). Since then, the virus has caused serious illness, death, and social disruption around the world. The scope of the outbreak is rapidly evolving and ever changing. As of the end of March, the United States leads the world in case counts. Neither a vaccine nor a cure exists—and in many places, testing remains limited. Thus, in most places, public health officials have moved on to mitigation by instructing everyone to engage in hand hygiene, social distancing, and quarantine to protect themselves and others. Outbreaks like COVID-19 draw attention to the importance of epidemiology, the study of distribution and determinants of health and illness among specified populations (Last 1988).

Panchayats and COVID-19

The Prime Minister of India was addressing various *Panchayats* across the country on 24th April 2020. The day has been celebrated annually as the National *Panchayati Raj* Day. As it was a lockdown period, the honorable

Prime Minister interacted with the leaders of Local self-Governance through video-conferencing. Calling *Panchayats* as vital links of development and democracy, Prime Minister launched a slew of important schemes including unified *e-Gram Swaraj* portal and mobile application and *Swamitva* scheme. While *e-Gram Swaraj* would help prepare and implement *Panchayat* development plans, e-portal is a major step towards digitization of *Panchayats*. In applauding the *Sarpanches* for their critical roles in ensuring social distancing and providing vital information related to COVID-19 on daily basis, the Prime Minister further exhorted them to make each *Panchayat* “self-sufficient enough to provide for its basic needs.” (Sahoo 2020).

With *Panchayats* emerging as front warriors in the collective fight against COVID-19 pandemic, Prime Minister’s address to key members of Local self-Governance institutions/*Panchayat* across the country have been playing extremely critical roles in pertaining to corona virus spread. One of the most talked about example is Odisha. With its genesis of decentralization the three-tier institutions *Panchayats* in Odisha are on the forefront of arranging to take the reverse migrated population to the quarantine center, coordinating Government in tracing, organizing health checkup camps, sanitation and hygiene, social distancing messages among others. The Odisha Chief Minister delegated *Sarpanches* with the powers of a District Magistrate/Collector using Section 51 of the National Disaster Management Act, 2005. He has empowered *Sarpanches* to ensure quarantine of the reverse migrated population. To ensure a decentralized way of tackling pandemic, Odisha Government has ensured every *Panchayat* with registry facility and mechanisms for social accountability with special reference to community monitoring. Concisely *Panchayats* have emerged as frontline institutions to curtail the spread of virus. The roles of the *Panchayat* have become stronger in the post-lockdown stage requiring considerable mitigation efforts. According to the Chief Minister, “Extraordinary circumstances demand extraordinary response. We will be able to handle the COVID-19 situation by empowering *Panchayats* and urban local bodies. It will help provide service to people returning to the State and strengthen our fight against COVID-19,” (Das, 2020).

COVID-19 and Reverse Migration

The lockdown has been implemented to prevent the transmission of COVID-19 pandemic in the country. As the lockdown destroys economies and causes a lack of jobs, homes, and food, migrant workers are all set to return to their native regions. Around 37 per cent or 45.36 crore Indians are migrants. Approximately 3 crores of them migrate for employment or work (Census 2011). The majority of them are employed in the informal sector in the cities. ‘India on the move and churning’ – a chapter in the Economic Survey 2016-17 revealed that an average of nine million people migrate between States every year for either education or work. However, no one has ever thought that this ‘moving

and churning' will become a nightmare (PRIA 2020).

Amidst lockdown due to COVID-19, it has become clear that reverse migration of millions of people back to the native villages. Most of these migrants originate from poor and backward districts of the country and belong to Scheduled Castes (SCs), Scheduled Tribes (STs), and Other Backward Classes (OBCs). A majority of them does not own land or any productive assets, depend on daily wages to support their families, and live in densely populated informal settlements and colonies in the cities. Most of them depend upon the subsistence economy. The sudden 'lockdown' to halt the spread of the COVID-19 virus has created panic of infection and deaths triggering this reverse migration. By all accounts, this situation is likely to continue because of the uncertainty of the lockdown period and might have severe consequences in the longer run. There are reported incidences where the returning people are facing harassment and restrictions on movement when they reach their villages. Misinformation, prejudices, and lack of awareness are significant bottlenecks as returnees are being treated as carriers of the virus and are not welcomed by the local community members/villagers. The biggest challenge they are likely to confront is the lack of opportunities for employment and livelihood – the most compelling reason for which they migrated in the first place (PRIA 2020).

The Central and State Governments have announced several interim relief packages. However, to make these accessible, *Panchayati Raj* Institutions (PRIs) play a major role in being the proximate institutions. The *Panchayats* can play a critical role in this situation, promoting hygienic practices, creating local quarantine facilities and assuring food for families. Many *Panchayats* have already taken several steps in this regard and have demonstrated their relevance and effectiveness. *Panchayats* can be supported to do even more, provided they are facilitated to understand- preventive health measures under COVID-19, entitlements announced by the State and Central Governments, right to livelihood and social security to migrants, synergizing the efforts by Government and civil society, developing an information system at the *Panchayat* level about the migrants.

Odisha Scenario

With thousands of migrant workers returning to Odisha from outside following coronavirus outbreak, the State Government has asked the *Panchayati Raj* Institutions (PRIs) to take care of the migrants. Secretary of labour and ESI department have been asked to the *Panchayats* to deal with and create awareness among the workers about social distancing and quarantine. The return of workers, especially those coming back to their native places from affected areas, without prior information, has raised concern for the Government to check the spread of the virus. In this situation, the coordination between *Panchayats* and revenue villagers has been extremely crucial to contain the spread of the virus. *Sarpanches* of 6,798 *Panchayats* in

the State is playing a key role in the fight against corona. The community response through *Panchayati Raj* Institutions and collective leadership at village level has been proved a strong weapon in control and mitigation of corona virus pandemic. On April 22, the *Sarpanchs* of all *Panchayats* in the State took the pledge that that the Chief Minister of Odisha administered through video-conferencing. "I take pledge to sincerely work towards containing the spread of novel coronavirus in my *Panchayat* for the public good. It has been ensured keeping the people coming from other States in quarantine and look after their stay, food and treatment," Since most of the people testing positive were asymptomatic for coronavirus, the State Government has made putting the returnees in isolation at *Panchayat* level mandatory. A sum of Rs. 2,000 has been given to them on completion of 14-day quarantine. Nodal officer has been appointed for each *Panchayat* to coordinate the work with the *Sarpanch*, the *Panchayat* Executive Officer and the *Gram Rozgar Sevak*, and work as a link between them and Block Development Officers (BDOs) who coordinates with the higher-ups. The *Panchayats* has also been given the charge to provide free food to the poor and destitute and those being kept at the quarantine facilities. (Das 2020).

Ensuring the active participation of women, 50 per cent of the posts in three-tier *Panchayati Raj* Institutions has been reserved for women. This gives the PRIs extra advantage to work in coordination with lakhs of members of women Self-Help Groups (SHGs) who are engaged in the fight against COVID-19. The broad objective of the institute of Local self-Governance is to take collective action at village level for control and mitigation of corona virus pandemic. The activities of these institutions have been delegated are:

Activities

1. Promote preventive measures for control of corona virus pandemic (create community awareness regarding routes of transmission and control measures social distancing, hand-washing, cough etiquettes and use of mask and make provisions at community level to facilitate compliance with these control measures)
2. Promote solidarity at community level and address any stigma associated with the disease
3. Help in the surveillance activities related to corona virus pandemic in the village (Identify vulnerable groups, e.g. elderly, people with hypertension and diabetes, pregnant women, promote adequate control of co-morbid conditions, for example hypertension, diabetes etc. surveillance for influenza like illnesses and fever, keep vigilance on arrival of any outsider in the village and take appropriate measures to prevent disease transmission ensure proper management of dead bodies to avoid infections, while ensuring dignity during death

4. Support quarantine/ isolation (keep a watch on the people who have been quarantined in home and support their families take necessary precautions, make arrangement for village-level quarantine facility wherever home quarantine is not feasible, identify events/ places of mass gathering and plan to avoid these gathering)
5. Identify needy families and plan for providing those help
6. Support for continued provision of essential health services at village and *Panchayat* level
7. Prompt response, in case corona virus positive case/s are detected (Help in containment measures at village level and safe management of dead bodies with dignity)

Figure 1: The Activities of PRIs Delegated to Manage COVID-19 in Odisha



Panchayat should take lead and ensure participation of Front Line Workers (ASHA, AWW and ANM), women’s Self-Help Groups and other community based organization, schoolteachers, youth volunteers from *Nehru Yuva Kendra (NYKS)*- one of the largest youth organizations in the world. NYKS currently has about 8.5 million youth enrolled through 3.01 lakh Youth Clubs/Mahila Mandals, religious leaders, as well as other influential leaders in the village. Representation of all section of the society (including minority

groups) must be ensured. In addition to the core members, the committee may organize a team of volunteers for discharging key responsibilities. Health Department along with Social Welfare (ICDS), local police and Non-Government Organizations (NGOs) should provide support network for these committees.

Approximately 2,00,000 migrants who are working outside of Odisha in different parts of India. Apart from them the second set of migrant workers working in the Deen Dayal Upadhyaya Grameen Kaushalya Yojana (DDU-GKY) trainees, who receive 2-3 months of skill-based training from various states like, Karnataka, Tamil Nadu, etc. Odisha sends, on average, 50,000 skilled labours every year under the program. The Government of Odisha has given them financial resources amounting to Rs. 5, 00,000 for dealing with this issue to each *Panchayats*. The money provided can be used for various issues like running the quarantine centers and making arrangement of food those who are staying in the quarantine. Rupees worth 1000 was allotted to each cardholder in the vulnerable sections of the villages under the Public Distribution System (PDS), the most vulnerable people those who were coming under the *Antyodaya* scheme and a special package for surviving in the absence of alternative livelihood. House to house health surveillance conducted by the *Panchayats* with the help of Front Line Workers (FLWs), paramedical professionals, etc. in the area. The Health Department coordinates this effort (PRIA 2020)

Study Locale and Methodology

Purposive sampling was used to sample 10 migrant those who are staying in the quarantine center, 10 *Sarpanchs*, 10 ward Members, 5 ASHAs and 5 AWWs from the two Blocks each in two districts of western Odisha Balangir (Balangir and Deogaon Blocks) and Nuapada (Khariar and Sinapalli Blocks). Apart from the participatory observation, the semi-structured interviews were conducted with the informants mentioned above. An interview schedule was designed to conduct the semi-structured interviews. The Focus Group Discussions (FGDs) were conducted with the FLWs and checklist was designed for the same.

Study Tool

Qualitative intensive cases were prepared for the selected, the data were collected from the above-mentioned stakeholders through Focus Group Discussions (FGDs), and semi structured interviews.

Discussion

As it is discussed earlier, an intensive attempt has been made to understand the ground- the COVID-19 situation and the role of the leaders of Local self-Governance and Front Line Workers (FLWs) to settle down the

reverse migrants in the quarantine center and sending them to their respective villages once the quarantine period is over. In the search of the fact and findings, some useful qualitative ethnographic data such as case studies were collected during the collection of qualitative data/fieldwork. The Socio-economic status of the reverse migrants has been reflected in the cases.

Case-1

Laylabati Bagh is the *Sarpanch* of Bodoheh *Panchayat* of Karihar Block of Nuapada district. The seat of this *Panchayat* is reserved for women. During the time of the fieldwork, 46 reverse migrants were staying in the quarantine center of Bodoheh. They all had come from the towns like Mumbai, Hyderabad and Chennai etc. All of them were male members. All the ward members of the *Panchayat* were engaged in the arrangements of the quarantine center. The *Sarpanch* was distributed the work to all her ward members. The FLWs visited frequently to the quarantine center and regularly examine the health of the inmates. The meals and the breakfast and afternoon snacks were served in the center. The food cost per day was coming around Rs.120/-. All the migrants were staying in the quarantine center at a stretch for 7 days. They were thoroughly trained on the issues of social distancing, wearing masks, hand washing etc. The *Sarpanch* and her colleagues requested to all the inmates to stay at home quarantine for 14 days after leaving the quarantine center. The *Sarpanch* herself contributed rice and other stuffs to the quarantine center. She was enjoying thoroughly of the management of the center and now she is very famous for taking responsibility and effective management of the center in the area.

Case-2

Nilji is a tribal village of Sinapalli Block of Nuapada district. The total population of the village is 5500, among them 493 villagers have migrated to Mumbai and Chennai. Belamati Majhi is the *Sarpanch* of the *Panchayat*. She is elected as a *Sarpanch* for the first time in the year 2017. These days she is maintaining the quarantine center of Bhoipada. Bhoipada is a revenue village of Nilji *Panchayat*. Around 87 migrants were staying in the center. Every day evening she took up the meeting of her fellow colleagues (Ward members) and the Front Line Workers of the village. She was constantly in touch with the Block Development Officer (BDO) and updating about the development of the center. The FLWs regularly visited to the center for the health checkups and train about the social distancing, hand washing and wearing masks etc. She also encouraged to the Ward members and the members of *Gaon Kalyan Samiti* i.e. the Village Health and Sanitation Committee (VHSNC) to move door to door in the *Panchayat* and counselling on the precaution of corona virus. She requested to the Outreach Workers (ORWs) of MAMTA to provide training on the *Aaroyoga Setu App*. This is an open source COVID-19 contact tracing,

syndrome mapping and self-assessment digital services- primarily a mobile app developed by Government of India.

Case-3

Kaintapadar is a *Panchayat* of Sinapalli Block of Nuapada district. It is a tribal dominated *Panchayat*. The river Udanti is flowing near the village. Sabitri Harihandan is the AWW of the one of the AWC the *Panchayat*. She is very hard working and committed worker. She was taking care of the quarantine center of Kaintapadar. She was taking of attendance twice in a day. Apart from that, she helped the ANM and AWW in the health examination of the inmates. There was 61 inmates in the Kaintapadar quarantine center. Among the 61 inmates, Sabitri found 1 pregnant mother, 2 children and 4 preschool children those who were coming under the beneficiaries or the target group of ICDS(Integrated Child Development Services). She was providing special counselling to them. She was also distributing the Take Home Ration (THR) to the beneficiaries at the quarantine center. After staying 7 days in the quarantine center, they all were back to their native. According to her the doctors, Child Development Project Officer (CDPO), BDO of the Block Sinapalli were visited to the quarantine center when the inmates were around. Recently, the CDPO declared the Kaintapadar AWC as an *Adarsh Anganwadi centre*.

Case-4

Dharam Shingh Majhi the Ward member of the village Haladimunda of Kaintapadar *Panchayat* of Sinapalli Block of Nuapada. The total population of that village is 646. It is a tribal dominated village. Dharam was elected as the Ward member in 2017 *Panchayat* election. Apart from the infrastructure development of the *Panchayat*, Dharam did lot of works to strengthen the *Gaon Kalyan Samiti (GKS)* of the village. He was keeping a good relation with the Front Line Workers of the village. He was visiting to the home of the beneficiaries while ASHA/AWW visited for the home visit. The untied fund of the GKS was utilized properly every year. He took lead of the group of youth and the other leaders of Local self-Governance to not to allow the other villagers into his village. He was instrumental to organize a meeting of the members of PRI and the FLWs to visit home to home to disseminate the message of hand washing, wearing masks and maintaining social distance. There were 134 reverse migrants were having their registration in the quarantine center.

According to him for tribal communities-, Minor Forest Produce (MFP) plays an important role in supplementing their household income. In Odisha, March to June is the peak time for collection of MFP of different types: *Mushrooms, Palua, Juna Mahua, Kendu, Chahar, Amla, Tentuli* etc. However, selling the produces was difficult during the lockdown period. The *Hatts* (weekly markets) were closed during the lockdown period and they found difficulties to sell the produces. Hence, majority of the villagers were forced to sell the MFP

to the local petty traders at throwaway prices. Sometimes they did not even find a buyer for their MFP. "Last year he earned about Rs. 4,000 by selling the MFP. This year was not visited to the local market due to the lockdown.

Case-5

The quarantine center of Dumuripita Panchayat was run at Dumuripita village. There are 4 revenue villages coming under Dumuripita *Panchayat* of the Deogaon Block of Balangir. Kunit Dharua the AWW of the village was taking care of the center along with the other FLWs and representatives of Local self-Governance. There were 31 reverse migrants staying in that center. As an AWC of the village, she counselled to all the inmates of the quarantine center to obey the rules of social distance, hand washing, using of the masks and not spitting at the public places etc. She was always encouraged the inmates to strengthen their self-confidence. Kunti along with the PRI leaders were frequently made home visit/door to door visit and disseminated the message (Do's and Don't's) of COVID-19. The THR and the food was being distributed in the AWC. The Village Health and Nutrition Day (VHND) and immunization session was regularly organized. The ORW of MAMTA was also visiting regularly. He was taking part in the home/door to door visit.

Case-6

The reverse migrants Khariar Block were facing lot more crises. Even those who had completed the 7 days quarantine period successfully were perceived as carriers of the virus – thus they were facing virtual ostracism in their native villages. Manglu Harijan a resident of Badmaheswar village of Khariar block had been to Hyderabad along with his wife Belmati and his daughter Maguli (2 years) to work in the brick kenneling. He received an amount of Rs.1.10 Lacs as advance for six months. Due to COVID-19 the family returned to the native land in the month of May 2020. They were staying in the quarantine center for a period of 7 days in Mantritarai of Lanji *Panchayat*. When they returned to the native village, the villagers were not allowed to enter the village. Then they were staying in a temporary thatched shed outside the village. Belmati with tears said that every time she goes to fetch water from the community hand pump, some of the village women subject her to taunts. "They said, 'we need to be careful of them- We can catch the virus from them'. After staying there for 8 days in the temporary shed, they returned to the village. Still the villagers are not accepted them wholeheartedly and maintained distance from the family. Now the situation is different because the family diagnosed as normal, not affected by COVID-19.

Case-7

Madhusudan Bagh who was living in Hyderabad. He was employed as a construction worker for two years, and return to his village Farsara in Boden

Block of Nuapada. He belongs to Aghariya tribe. He was staying in the quarantine home managed by the *Panchayat* at Farsara. After staying 7 days at quarantine center, he returned to his own village. His worries were mounting and he was expressing *Sarkari Babu* (Government employee) were instructing us to stay at home for another 14 days in home isolation /quarantine but their children was in dire need of food. He had neither any perineal income nor any savings to feed to his family members. His father was a paralytic and he needed medicines regularly. There was no option for wok there in the village. He was listening that *Sarapanch* supposed to open some work under Mahatma Gandhi National Employment Guarantee Act (MGNREGA) in the village. But till today he was not been able to do so.

Case-8

Bhagachan Bagarti belongs to Talapalli village of Bramhanjora *Panchyat* of Deogaon Block of Balangir. Since 2017, he was working as a mason in Noida. He returned a day before trains to Odisha started getting cancelled for the lockdown. He was lending money to purchase a bike from the local money lander. Now, the money lander everyday calling him to deposit the money with interest. Apart from that, his parents were all the time insisting to arrange money for her younger sister's marriage. Within two weeks of returning from NOIDA, Bhagchan sold off a pairs of goats and two hen and bought food and other essentials for his family. He said he returned to his village because he did not want to die in a strange place. Bagchan's wife Mudusuli was feeling just helpless. With tears, she said, "We are very unfortunate parents - we are managing with one meal now and not arranging two meals a day for the children and in laws. Now they were surviving on the rice, which they gathered, form the Public Distribution System (PDS).

Suggestive Measures

Now we have to look at all the cases, which have been selected from many qualitative cases gathered during the fieldwork. In one hand, the cases portray a picture the arrangements of engaging the leaders of Local self-Governance leaders for the COVID-19 responses and preparedness in their respective *Panchayat* and they are quite successful. In other hand, the cases portrays the picture of the poverty after the migrants coming back to the native village. In the present time, everything is uncertain. It is a big question in front of everyone that when the pandemic will over and people going back to the right track of livelihood and life. A lot of suggestions from the different stakeholders (Primary and Secondary) were gathered during the fieldwork that can be implemented to make the functioning of the Panchayati Raj Institutions more efficient in such situations :

- Setting up a system of maintaining records of all the migrant workers in each district, mapping the months in which migrants come and go,

seasons, which see a high number of migrants, etc. This will key database for the PRI.

- Continuing with MGNREGA work in the *Panchayat* is crucial in this time. The State had decided to continue with the MGNREGA before the lockdown, and the latest guidelines accounting for the lockdown have made provisions for household work, and household repair work to qualify under MGNREGA.
- Considering that this is the season for harvesting non-timber forest produce, there is a need to provide urgent support to forest dwellers to selling them out and get a proper price for that. The Government needs to ensure a minimum support price for these products to support the people and the *Panchayat* should advocate for this.
- Entitlement monitoring also needs to be carried out in potential areas, the Panchayats alone cannot do this alone and Civil Society Organizations (CSOs) can provide handholding support to the *Panchayats* in this process.
- The support can be done in various ways: Offering help and relief to the most vulnerable people affected by the pandemic, mediating and facilitating effective implementation of policies and measures aimed at countering the social and economic fallout of COVID-19, providing real-time feedback on working of policies and State intervention on the ground, facilitating participation and inclusion of all stakeholders in making of policy decisions and their implementation.
- The more stigmatized people are, the more afraid they are to seek medical help, say psychologists, which creates a challenging situation when the effort is to effectively contain the virus. As there is a lack of understanding about COVID-19, especially in the tribal hinterlands, communicating vital information and sensitizing people to become aware of their misconceptions is critically important.
- There should be special focus on vulnerable groups such as women, children, the elderly and differently-abled people
- Ensuring the active participation of women, 50 per cent of the posts in three-tier Panchayati Raj Institutions (PRI) and urban local bodies are reserved for women. This gives the PRIs extra advantage to work in coordination with lakhs of members of Women Self-Help groups (SHGs) who are engaged in the fight against COVID-19.
- For the returnees, who are facing high levels of stress as it is, the fact that they are being further discriminated in their villages which they had considered a safer place than the cities, is a striking irony
- In the short term, *Panchayats* have been successful in their efforts to

identify vulnerable families and provide them ration. They are able to do social distancing messaging and behavior change communication at public places such as hand pumps. Listing of returning migrants along with identifying people who could be potential carriers of the virus has also been done by the *Panchayats*. Further, they have also carried out efforts to sanitize roads, drains, made provisions for masks, sanitizers and soaps etc.

- One shortcoming of the *Panchayats* has been to keep migrants in quarantine either in their homes or in isolation centres as the returning migrants are convinced that they are not carriers of the virus. This has led to conflicts that *Panchayats* have not been able to deal with.
- Another issue that has come up is that of health, nutrition services coming to a halt as *Anganwadi* workers are not sure what to do and ANMs are busy dealing with COVID-19 cases. There is a need to restore these services for pregnant women, lactating women, children who need nutrition, etc.

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