

Insight

Managing COVID-19 pandemic: tale of Odisha, a state in Eastern India

Jigyansa Ipsita Pattnaik, Mahima Panigrahi, Nilamadhab Kar, Binod Kumar Patro, Susanta Kumar Padhy

Abstract

Fighting the COVID-19 pandemic has been a herculean task even by the developed countries. India, however, has handled the crisis proactively with various measures. In this connection the strategies taken by Odisha, an Eastern Indian state, are noteworthy and deserve attention considering scale of the efforts taken to contain the spread of the virus and setting up intervention facilities. Odisha took proactive steps in widespread awareness campaigns on social distancing, containment at ground level (community, district and villages) with shared responsibility up to village panchayat level. Regular open communication to public through press meets coupled with extensive contact tracing, active testing, isolating and setting up COVID hospitals dedicated to the cause are remarkable. The state also restructured the functioning of the health care set-ups with online training programs and even skilled professionals being sent to remote areas in COVID duty. A dedicated team involving top level bureaucrats working in close coordination with ground level workers, with active implementation of all policies has been the key to the current achievements in management of the pandemic. The state has a well-controlled infection rate, and one of the least case fatality rate, in comparison with figures from India and the world. Considering the current picture, it appears Odisha has led the way in the effective management of COVID-19 pandemic.

Key words

COVID-19, India, Odisha, Management, Pandemic, Public Health

Introduction

India is among the most severely affected countries during the COVID-19 pandemic in the world and the worst affected in Asia considering the sheer number of cases.¹⁻⁴ It is remarkable that India, being a developing country, despite its limited resources, has so far however, managed to have one of the lowest death rates at 2.8% as compared to 7% in the globe.^{3,4} It is imperative at this

point to have a look at how the world's largest democracy approached the pandemic.

Nations across the world have incorporated widespread containment activities, lockdown/ shut down and curfews in addition to massive awareness activities to curb the spread of COVID-19. The first country in the world to impose nationwide lockdown was Italy on 9th March 2020, when the confirmed cases crossed 4000 mark and deaths crossed 400. In contrast, India imposed a nationwide lockdown affecting the entire population of 1.3 billion people on 25th March 2020 when the total number of confirmed cases crossed 500 and deaths were at only twelve. India was appreciated in the international arena for the response being described as 'timely, comprehensive and robust, far-sighted and courageous'.⁵

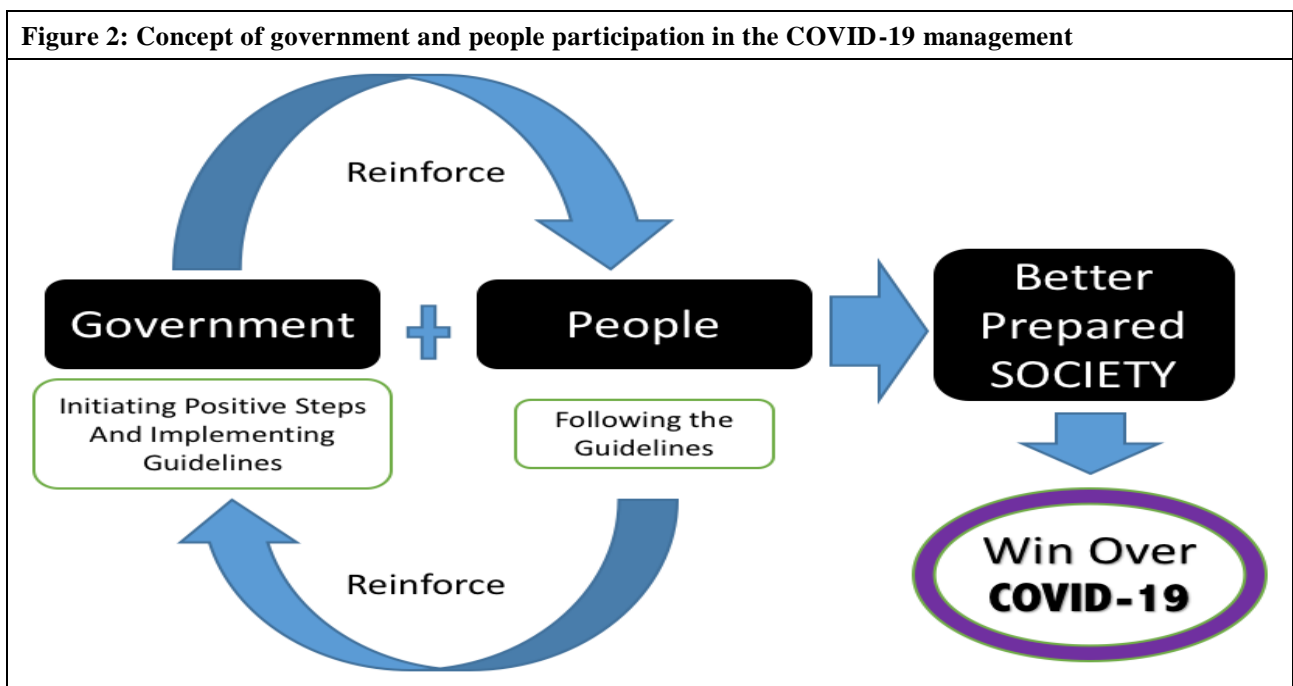
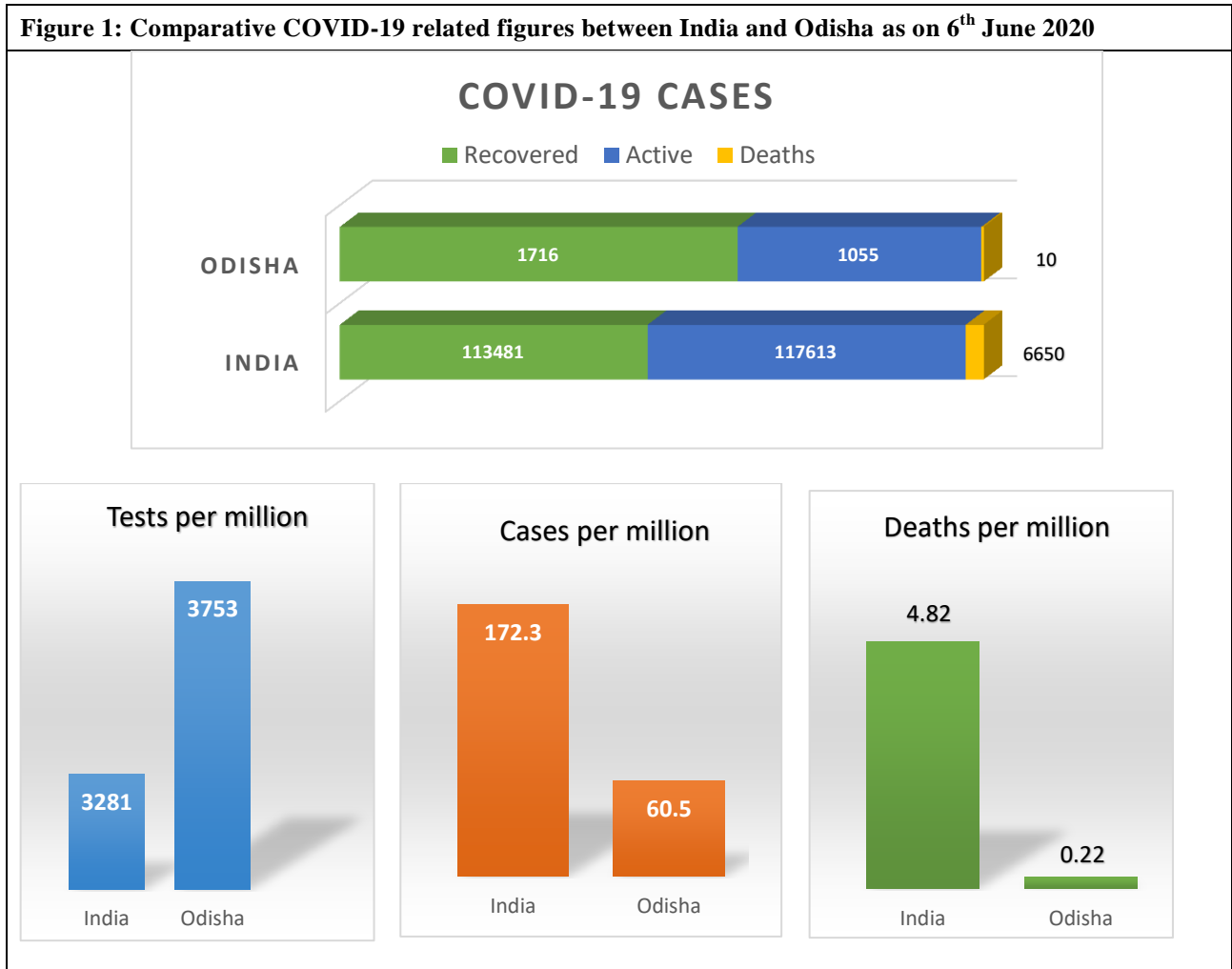
As a central government strategy, the entire nation was divided into three zones - green, orange and red - with differential prohibitions and relaxations; with the red zone having the strictest containment measures. This has seen to slow the growth rate of the pandemic from that of doubling every three days before the lockdown to doubling every six days by 6th April and doubling every twelve days by 25 April 2020.^{6,7}

Status of COVID-19 in Odisha

Among the Indian states, Odisha was the first to extend the first phase of the state lockdown on 9th April 2020.⁸ Odisha is a state in Eastern India on the Bay of Bengal, with a population of 46 million.

As of June 6th 2020, when India's COVID-19 case count was 237,756 with 6650 deaths; it is surprising to see Odisha had 2781 cases and ten deaths with a case fatality rate of 0.4% in comparison with 2.8% in India, and recovery rate of 61.7% (47.7% in India).^{3,4} Some comparative figures with India is provided in the Figure 1.

It was a pragmatic vision of the state when there were only 60 confirmed cases and one reported death, taking the lead by making an exemplary stand and pushing the nation to further extend the lockdown in four phases till 31st May 2020.^{9,10}



Since the beginning, the state's response to the pandemic has seen increased testing, effective resource allocation, swift private sector partnerships, infrastructure set-up, capacity building of human resources in health care, and incentives for citizens to test. This may have directly resulted in a low case confirmation ratio, low case fatality rate, and a high recovery and discharge ratio.

COVID-19 management strategy in Odisha

Odisha's COVID-19 management strategy could offer insights into effective pandemic management. Here are some of the examples:

Leadership and collaboration: The best examples of international collaborative success ranges from smallpox to Ebola, with breakthroughs and advances we could not have imagined if countries had gone it alone. Odisha played the lead role in extending the lockdown in the initial phase and it was also unique in introducing the complete weekend shutdown in the state after the nationwide lockdown was withdrawn, as a potential harm-reduction measure. Odisha's solution-based approach in this hour of crisis, with flexible and dynamic leadership, and minimal importance to political gains helped strengthen the centre-state collaboration; thus, ensuring the best possible outcomes.^{9,10}

Early and extensive outreach programmes: The first statewide information, education and communication (IEC) outreach about the coronavirus in Odisha was conducted on March 8, the same day when the first international passenger was screened in the state. Two days later, the state government declared COVID-19 to be a 'disaster' and public officials were empowered to combat the spread under the Disaster Management Act, 2005.⁹

Curbing myths and misinformation: A single portal information system was set up with a dedicated spokesperson to provide clear information and discrete instructions to the public at a press meet which took place every day. Clear guidelines on 'what to do' and 'what not to do' were detailed. There was strict regulation on disclosure of identity, and information management.^{7,9}

Efficient work delivery: The police personnel, the health care workers and government had delineated responsibilities. The health officials were not directly involved in public information management, so as to let them focus on their work. The police took a lead role in enforcing the lockdown and strict distancing norms.⁹

Distribution of welfare resources: Advanced disbursement of welfare resources was done to the entitled beneficiaries including pensioners (4 months' pension), ration card holders (3 months' ration) and students (scholarships). Provision of food for sick, indigent and destitute people in rural areas was ensured.¹⁰

Setting up of Designated COVID Hospitals: Observing the problems faced by countries like Italy, where the

disease spread early, Odisha planned for exclusive COVID-19 healthcare setups early on. Designated 'coronavirus hospitals' across Odisha, with partnership with existing non-government hospitals, including medical colleges and private hospitals were set up. Odisha set an example by creating the first and the largest COVID-19 hospital in India.^{9,11}

Supporting health care workers: Online Training Programme for healthcare personnel and medical students and advance disbursement of salaries for all healthcare personnel in the state was initiated.

Strengthening village level administrative bodies (Gram Panchayats): Financial and organizational support was provided to *Gram Panchayats* (Fig 3). Ensuring provision for temporary medical camps with extensive information campaigns on COVID-19, its prevention and case reporting by *Swachhta Sathis* (Sanitation Workers) at *Zila Parishad* (District Council) level was emphasized.⁹

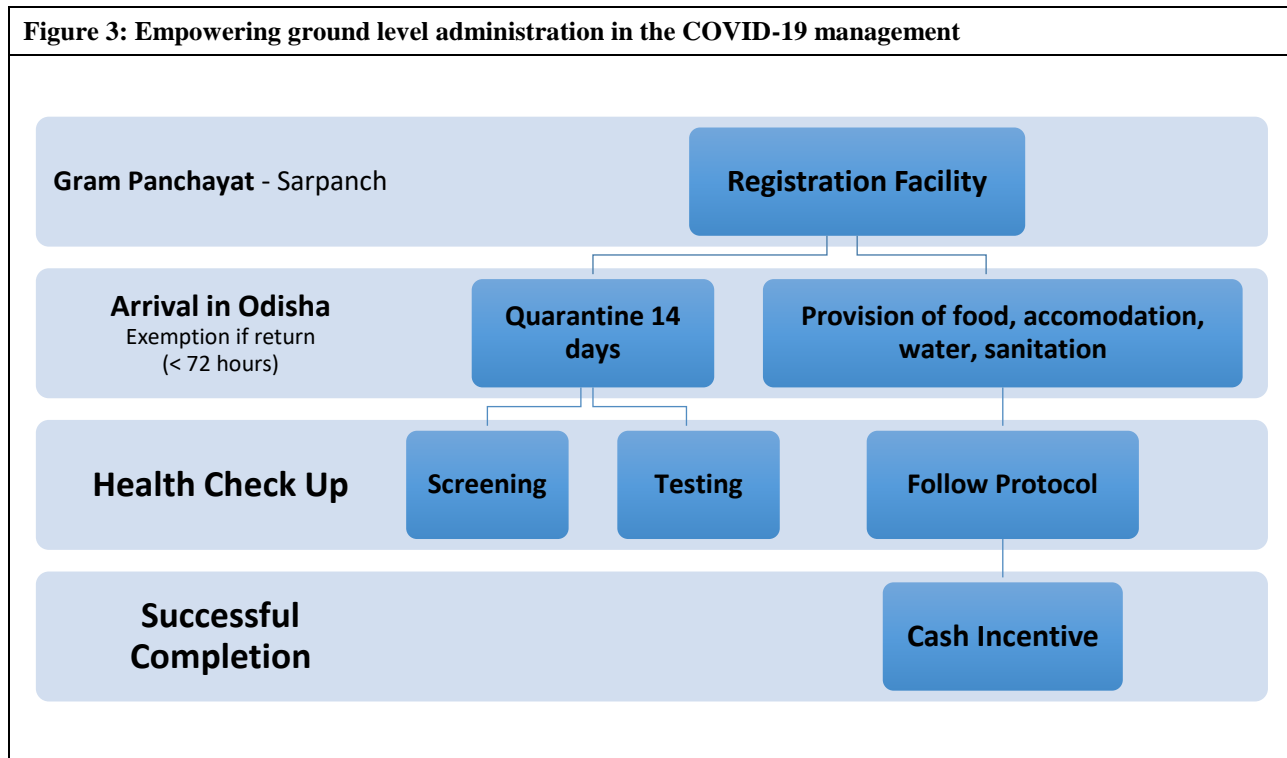
Migrants and returnees: Odisha was the pioneer in understanding the psychological state of the migrant laborers and took the initiative to write a letter to the Prime Minister for the safe return of the stranded Odias across India. A database of all persons arriving in Odisha from other states was activated. Provision of roadside *Jalachhatra* (drinking water and refreshments), temporary shelters and provision of food, etc. and mobile health care units was ensured. Through IEC, the state had already prepared panchayat members on encouraging returning migrants to self-isolate or quarantine, with cash-incentives.⁹

Mandatory registration of returnees with mandatory quarantine 14 days and provision for Stamped indelible ink right inner forearm with date of entry at border check points.

Multiple Shramik Special trains and buses and welfare schemes for migrants have been initiated nation-wide. The nation has also been proactive to rescue Indians stranded abroad amidst of the COVID-19 pandemic by launching the '*Vande Bharat Mission*'.¹ Before the initiative by the nation, Odisha had taken a lead in getting back Odia workers stuck in Saudi Arabia and subsequently migrants stuck in other Indian states.^{9,10}

Infection control, COVID testing and contact tracing: It was made mandatory to use face masks while stepping out of house for any purpose. Extensive testing with 723 tests per million people compared to the national average of about 519 was being performed (5th May 2020). Stringent containment and contact tracing was being followed. Sharing of location information of mobile users relating to the confirmed/suspect cases of COVID-19 was performed.⁹

Economy sustenance: Odisha government cleared proposals worth Rs 9,000 crore to revive economy and 6500 jobs. Odisha allowed home delivery of liquor from mid-May with 50% COVID fee to support economy.^{9,10}



Honor at par with martyrs was instituted if a health care worker (HCW) succumbs to COVID-19, insurance schemes with coverage up to rupees 5,000,000 INR and awards of recognition for HCW were announced. Citizens all over India cheered and showed solidarity with all ‘Corona Warriors’ i.e., the HCW, police, and all those fighting the disease symbolically by lighting traditional candles (*diyas*), clapping and flower showering on different occasions.^{1,10}

Participation of non-governmental organisations: In addition to the measures from the state government, various initiatives were taken at individual and community levels by volunteers and organisations. In many places volunteers, in turns, closely monitored the entry of any outsider and ensured mandatory screening and notification. A few non-governmental organisations have come forward to provide basic necessities like shelter, food baskets and hygiene kits to the needy; providing masks and refreshments to the police officials and other workers who were on duty; etc. Some individuals and organisations have donated masks, sanitisers, personal protection equipments (PPEs), etc. to the health care institutions.¹⁰

Conclusion

It is perhaps too early to reflect upon the effectiveness of the containment and management measures for COVID-19 in India and Odisha. However, current trends have been reassuring in slowing the spread of the virus. Early lockdown, ensuring on-ground preparedness, improving the treatment facilities by setting up COVID hospitals, solidarity and decentralized information campaigns have shown an impact, at least at this initial stage. As the pandemic is still evolving it may be a long battle. The journey of a thousand miles begins with a small step. It

appears steps have been taken in the right direction and it may be hoped that these innovative strategies may help in the Fight against COVID-19.

Strategies of the state of Odisha may give ideas for similar strategies adapted for local communities elsewhere. As an immediate relief to the COVID-19 pandemic crisis is not in sight in near future, robust strategies are needed to keep the infection rate under control, to manage the treatment of COVID-19 patients effectively, while allowing the economics to regain the lost grounds.

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Competing interests: None.

Received: 3 June 2020; **Revised:** 6 June 2020; **Accepted:** 7 June 2020

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Citation: Pattnaik JI, Panigrahi M, Kar N, Patro BK, Padhy SK. Managing COVID-19 pandemic: tale of Odisha, a state in Eastern India. *Journal of Geriatric Care and Research* 2020, 7(2): 51-55.

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