Kerala's Response to COVID-19 Pandemic

What is the issue?

- Kerala has consistently stayed ahead of the coronavirus curve, with its 70% recovery rate being the highest in the country.
- It is imperative, in this context, to understand the strategies employed and the features of Kerala's healthcare system.

How has public health in Kerala been?

- Much before Kerala became a separate state in 1956, the region had seen several path-breaking public health interventions.
- In 1879, the erstwhile Travancore rulers made a proclamation making vaccination compulsory for public servants, prisoners and students.
- In 1928, a parasite survey, done in association with the Rockefeller Foundation, led to the control of hookworm and filariasis.
- This community health legacy was further supported by the state's focus on literacy and women's education.
- This helped attain near 100% vaccination levels and develop a culture of personal hygiene.
- The WHO, in a survey held in 12 countries in 2005, found that hand-washing with soap after defecation had a prevalence of 34% in Kerala.
- This was the highest among the states/countries surveyed.
- So, the 'Break the Chain' campaign for COVID-19, to promote hand-washing and sanitizers' use, only reiterated some of the already existing best practices.

How supportive is the health infrastructure?

- A critical factor in Kerala's COVID-19 battle has been its robust healthcare system.
- It is considered on a par with those of many developed countries.
- In June 2019, Kerala topped all states on the NITI Aayog's annual health index with an overall score of 74.01.
- This is more than 2½ times that of the least-performing state, UP (28.61).
- Kerala has only been investing 5% of its total state plan outlay on healthcare (roughly the national average spending in the sector).
- But its focus on healthcare at the level of Primary Health Centres and

Community Health Centres is noteworthy.
- The management of these centres are in the hands of three-tier local bodies.
- With efficient management, many of these have modern diagnostic facilities and offer tele-medicine services.
- The state's private health sector, once dominated by the Church, has grown rapidly in the last two decades.
- This was mainly with support from investment from NRIs and corporate healthcare groups.

How was Kerala's response to the COVID-19 pandemic?

- On January 30, 2020 India - and Kerala - reported its first COVID-19 case, a 23-year-old medical student who had returned from Wuhan, China.
- But by January 30, as many as 800 persons with China travel history had already been kept under observation in Kerala.
- On February 1, 2020, the state's coronavirus control cells laid out guidelines on testing, quarantine, hospital admission and discharge criteria. This is a living document that is regularly updated.
- Until late January, the state did not have any testing facility.
- The throat swabs of suspected cases had to be sent to the National Institute of Virology (NIV), Pune.
- But by the first week of February, NIV-Alappuzha got sanction to conduct the tests.
- In two months from then, Kerala's COVID-19 testing facilities have grown to 13, ten of those in the government sector.
- As on 22 April, 2020, Kerala has tested close to 20,800 samples, whish is the highest for any state.
- The state also stepped up its medical facilities, turning defunct hospitals into COVID-19 facilities.

How did the earlier Nipah outbreak experience help?

- While broadly sticking to the Indian Council of Medical Research (ICMR) protocol, Kerala put in place its rigorous surveillance network.
- The surveillance network was one that had been fine-tuned to perfection during the outbreak of the Nipah virus in 2018 and 2019.
- Besides tracing contacts, Kerala strictly enforced 28 days of home quarantine (the general incubation period of the virus is 14 days).
- From early March 2020, the state screened all international passengers.
- Even if someone managed to skip airport screening, they would have to deal with village committees.
- These committees kept the health department informed about fresh arrivals

and ensured they remained indoors.
- In hotspots districts, some village panchayats even launched call centres, connecting those quarantined with the authorities.
- Besides, route maps of positive cases, drawn through GPS data, were released to help people self-report.
- Geo-mapping of those under observation enabled better cluster management.
- Once flight operations were suspended, the state focused on inter-state road and rail travellers.
- Those who reached Kerala from other states in this period and their contacts were asked to isolate themselves.
- It was this strategy that helped the state rein in infections from participants of the Tablighi Jamaat event in Delhi.
- Several other states started acting only when positive cases from among the Tablighis were reported.
- But Kerala had already placed around 217 such persons under observation. Eventually, 20 of them tested positive.

How has the social, political outfits helped?

- Despite the largely bipolar nature of Kerala's politics, there was unison between the parties to fight the pandemic.
- Every evening, Chief Minister Pinarayi Vijayan chairs a review meeting and address daily press briefings on the state's tackling of the situation.
- The Health Minister Shailaja holds daily meetings with district medical officers.
- The Chief Minister's Office coordinates with other departments such as police, revenue, electricity, etc.
- The Kudumbashree Mission, the state's poverty eradication and women empowerment programme, has also been at the frontlines.
- It has been supporting the efforts in various ways, with volunteers pitching in to make masks and launching community kitchens, etc.

Source: Indian Express

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