

राजेश भूषण, आईएएस
सचिव
RAJESH BHUSHAN, IAS
SECRETARY



भारत सरकार
ग्रामीण विकास मंत्रालय
ग्रामीण विकास विभाग
कृषि भवन, नई दिल्ली-110001

Government of India
Ministry of Rural Development
Department of Rural Development
Krishi Bhawan, New Delhi-110001
Tel.: 91-11-23382230, 23384467
Fax: 011-23382408
E-mail: secyrd@nic.in

D.O. No J-18046/04/2020RSETI

March 30, 2020

Dear Chief Secretary,

You may be aware that Ministry of Rural Development is supporting a Bank led intervention called Rural Self-Employment Training Institutes (RSETIs) for skill development of rural poor youth for self-employment throughout the Country. So far 585 such RSETIs have been established and are functional in different Districts of the Country. The RSETIs are providing trainings in 61 National Skill Qualifications Framework (NSQF) aligned courses to various candidates. One of the very popular courses being run in RSETIs is Sewing Machine Operators (SMO). A large number of trainees have been trained under this course in almost all RSETIs and have subsequently started working on their own.

One such RSETI in Varanasi, Uttar Pradesh, has engaged some of its ex-trainees to take up work of stitching masks for use in fight against Coronavirus Pandemic in coordination with District authority. If this activity is replicated around all RSETIs in the country, it is likely to have a positive impact on fight against the current Pandemic.

I would like to take this opportunity to advise you to take up this matter on a priority basis with State Rural Livelihood Mission and District Collectors /Magistrates to motivate and facilitate stitching of masks by Ex-trainees of RSETIs, as well as the SHGs. As the trainings presently have been stopped in all RSETIs across the country because of the nationwide lock down , ex-trainees can be advised to use RSETI buildings for such activities if feasible. However, social distancing and all other prescribed precautionary measures should be ensured for all to be involved in this activity.

Yours sincerely

(Rajesh Bhushan)

To

Chief Secretaries of all States/UTs.

Copy for taking up with RSETIs and respective Banks to:
DG, NAR / National Director (NACER)

(Rajesh Bhushan)

Advisory on use of Homemade Protective Cover for Face & Mouth

1. We are aware that social distancing and personal hygiene are keys to prevent COVID 19 infections. Certain countries have claimed benefits of homemade face cover for the general public. Such homemade face cover is a good method for maintaining personal hygiene. Such usage certainly will help in maintaining overall hygienic health conditions.
2. Therefore, it is suggested that such people who are not suffering from medical conditions or having breathing difficulties may use the handmade reusable face cover, particularly when they step out of their house. This will help in protecting the community at large.
3. This face cover is not recommended for either health workers or those working with or in contact with COVID 19 patients or are patients themselves as these categories of people are required to wear specified protective gear.
4. It is advised that two sets of such face covers be made so that one can be washed while the other is used. Hand washing would still remain essential criteria and hand should be washed before wearing the face cover. Such face covers should also not be thrown anywhere but kept safely, washed properly with soap and hot water and dried properly before they are used.
5. These face covers could be made out of clean cloth available at home, which needs to be thoroughly cleaned and washed before a face cover is stitched/made. The face cover should be prepared in such a manner that it can cover the mouth and nose completely and can be tied over the face easily.

6. There must not be a sharing of face covers and a face cover must be used by only one individual. So, in a family of several members, each member should have a separate face cover.

* * * * *

Issued **by** the Office of the Principal
Scientific Advisor to the Government
of India_ April 3, 2020

Annexure

Illustration by MoHFW



Face Covers for Curbing the Spread of SARS-CoV-2 Coronavirus

Manual on Homemade Protective Cover
for Face and Mouth.

Proposed guide is meant to provide a simple outline of best practices to make, use and reuse face covers to enable NGOs and individuals to make face protection themselves.

The key criteria for proposed designs are Ease of Access to Materials, Ease of Making at Home, Ease of Use and Reuse.

The homemade face cover should be prepared in such a manner that it can cover the mouth and nose completely and can be tied over the face easily.

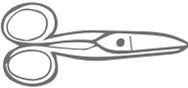
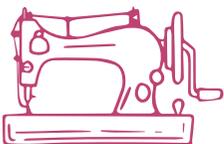
This face cover is not recommended for either health workers or those working with or in contact with COVID 19 patients or are patients themselves as these categories of people are required to wear specified protective gear.

Wearing of face covers is especially recommended for people living in densely populated areas across India.

You can easily make a face cover at home to protect yourself.

Option 1. Make a Face Cover using a Sewing Machine*

Things you will need:

- | | | |
|---|--|--|
| <p>1. </p> <p>100% cotton material</p> | <p>Any used cotton cloth can be used to make this face cover. The colour of the fabric does NOT matter but you must ensure that you wash the fabric well in boiling water for 5 minutes and dry it well before making the face cover. Adding salt to this water is recommended.</p> | |
| <p>2. </p> <p>Four pieces of cloth strips</p> | <p>3. </p> <p>Scissors</p> | <p>4. </p> <p>Sewing Machine</p> |

Begin with

1.a Cutting Fabric – Cut cloth for the face cover at the following sizes as required:

- Adult: 9 inch x 7 inch
- Child: 7 inch x 5 inch

For Adult Size Face Cover

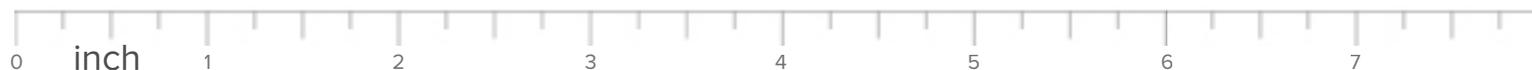


1.b Cutting Strips– Cut 4 strips for tying and piping from cloth: **Two pieces at 1.5”x 5” and Two pieces at 1.5”x 40”**



Illustration by MoHFW

*You can also make this face cover without a sewing machine



Inch(“)=2.5cms

Process demonstrated below is for Adult Size Face Cover



Take the cut fabric, attach the 1.5x5" strip to be used as piping to the fabric on one end as shown.



Create three downward facing pleats of approximately 1.5" each folding cloth as shown.



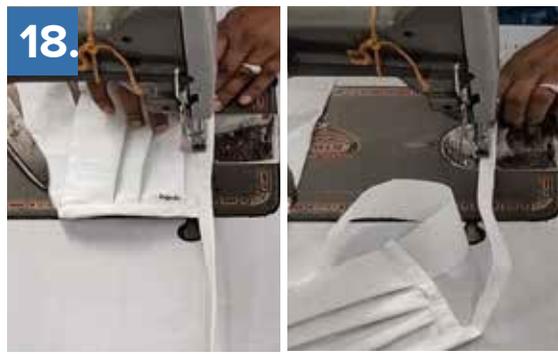
Turn the pleated cloth to the other side and repeat steps for pleating on this side as shown above. Once the pleats have been made, the height of the pleated cloth will be reduced from 9" to 5".



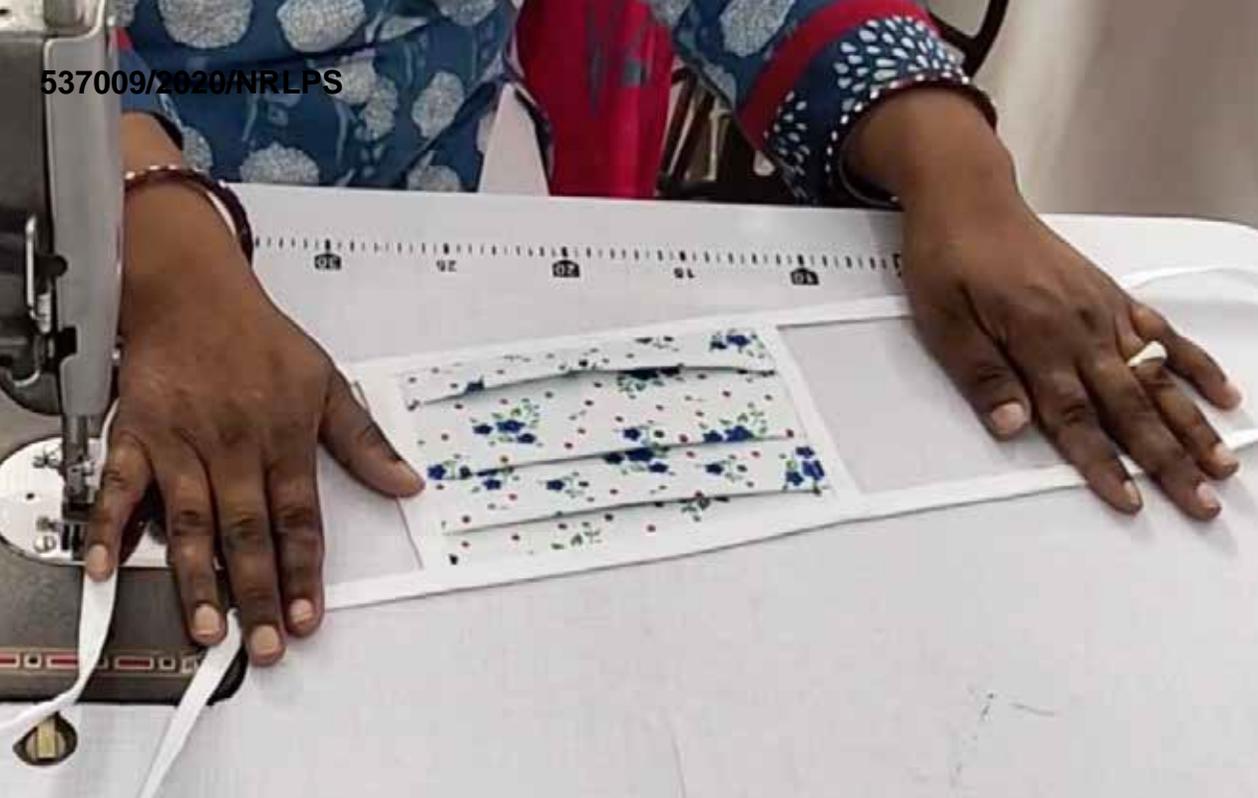
10. Secure the pleats with piping on both sides as shown above. *Take extra care to keep all pleats facing downward as shown.*



13. Now begin attaching the long 40" strips used for tying the face cover to the top and bottom as shown.



14. Once again fold both these strips three times and stitch as shown above.



 **Your face cover is now ready**

 **Ensure that the face cover fits around your mouth and nose** and there is no gap between it and your face. When wearing the face cover, the side facing you should show the pleats as facing downwards.

 **You must never reverse the face cover for reuse. Always thoroughly wash it after every use** following process shown further.

This face cover is currently being used by community health workers of organizations in South Rajasthan including, Amrit Clinic, Arth Hospital, and Shreyas Hospital. Images and process courtesy: Jatan Sansthan, Udaipur

Make sure the face cover fits your face well and there are no gaps on the sides...



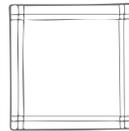
Remember to still maintain up to 2 meter distance from others at all times, wash your hands thoroughly when back home and do not touch your face or eyes!

Demonstrated by Dr. Gargi Goel, Pediatrician, Rajasthan

Option 2: Making a Face Cover at Home Without a Sewing Machine

Things you will need:

1.



100% Cotton material or a Men's cotton handkerchief

2.



Two rubber bands

Step 1



Fold the handkerchief from one side to little above the middle of the cloth

Step 2



Now fold over the other edge to go above the first fold

Step 3



Fold this again evenly from the middle as shown

Step 4

Take a rubber band and tie it on left side of the cloth as shown

Step 5

Now tie the other side with another rubber band
Ensure that the area in the middle of the two rubber bands is big enough to cover your mouth and nose

Step 6

Take one edge of the cloth on the side of the rubber band and fold over it. Do this for both sides

Step 7

Now take one fold and insert in to the other fold



1. Your face cover is now ready



2. Please ensure that the face cover fits around your mouth and nose comfortably but that there is no gap left between the face cover and the mouth.



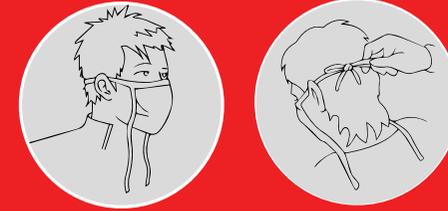
3. To wear this face cover just wrap each rubber band around your ears



4. You must follow all precautions and instructions outlined above when using the face cover

IMPORTANT PRECAUTIONS:**Before using the handmade face cover remember:**

1. Thoroughly wash and clean the face cover (as shown in next page) before wearing it.
2. Wash your hands thoroughly before wearing the face cover.
3. As soon as the face cover becomes damp or humid, switch to another face cover and clean the used face cover.
4. Never reuse a face cover after single use without cleaning it.
5. Never share the face cover with anyone. Every member in a family should have separate face cover.

**When removing the face cover:**

- **Do not touch the front or any other surface of the face cover**, remove it only with strings behind
- **For string face cover, always untie the string** below and then the string above
- **After removal, immediately clean your hands** with 65% alcohol-based hand sanitizer or with soap and water for 40 seconds
- **Drop it directly into a soap solution or boiling water** to which salt has been added

Wash and sanitize this mask in next page.

How to Clean and Sanitize your Homemade Face Cover Everyday

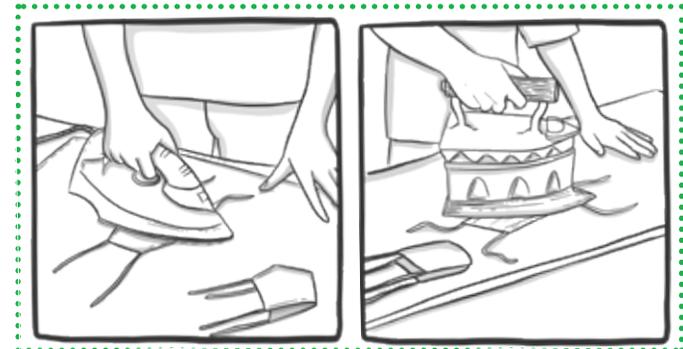
1. Thoroughly wash the face cover in soap and warm water and leave it to dry in hot sun for at least 5 hours.

If you do not have access to the sun, follow Option 2:

2. Place the face cover in water in a pressure cooker and pressure boil it for at least 10 minutes and leave it to dry. Adding salt to the water is recommended. **In the absence of a pressure cooker, you may boil the cloth face cover in hot water for 15 minutes.**

If you do not have access to a pressure cooker/boiling water, follow Option 3:

3. Wash and clean with soap and apply heat on the face cover for up to five minutes. (You may use an iron).



How to Store your Clean Face Cover

It is recommended that you make two face covers so you can wear one, while the other is washed and dried



1. *Take any plastic bag at home*



2. *Clean it thoroughly with soap and water*



3. *Let it dry well on both sides*



4. *Keep your extra clean face cover in this clean bag*



5. *Keep it sealed well*



6. *Now you can rotate your face covers for daily use*

537009/2020/NRLPS

Issued by the Office of the Principal
Scientific Advisor to the Government of
India_ April 3, 2020

Homemade reusable face covers only reduce the chances of inhaling droplets still in the air from an infected person, they do not give full protection. Homemade reusable face covers must be washed and cleaned each day, as instructed. Reuse without washing should **NEVER** be done. **Never share your face cover with anyone. Social distancing must still be maintained.**

**Remember to wash your hands frequently
with soap for 20 seconds.**

Images from public sources



Wearing of face covers is particularly useful in crowded areas.

Design by Vertiver

File No. J-11060/47/2019-RL
Government of India
Ministry of Rural Development
Department of Rural Development

Krishi Bhawan
New Delhi-110001
Dated: 4th April 2020

To
State Mission Director/CEO
State Rural Livelihoods Missions

Subject: Role of self-help groups in response to COVID-19 outbreak

Dear Madam/Sir,

It is heartening to learn that State Rural Livelihoods Missions (SRLMs) are taking various initiatives for addressing the COVID-19 outbreak related issues. The sensitivity and responsiveness demonstrated by Self-Help Group members in addressing various needs emerged due to the current situation at the community level is highly appreciable. In continuation of the earlier advisory dated 26.03.2020 (*copy attached for ready reference*), issued by this Ministry, I would like to reiterate/suggest the following for your information and necessary action

1. Self-Help Group network in the States provides an institutional structure to deliver and reiterate the right messages in the community to encourage adoption of practices recommended by the Ministry of Health and Family Welfare (MoHFW) with regard to response and containment of COVID-19. In this context, it is advised that SRLMs should augment their efforts for creating awareness amongst members and community on critical issues including social distancing, use of masks, recommended practices, quarantine and psycho-social issues of migrants, care of elderly population, mental health and wellbeing etc.
2. Also, SRLMs may coordinate with Department of Health and local authorities and enhance efforts on production of masks, sanitizers, protective gears like gowns etc to meet the demand from health department and. An advisory from Secretary, Rural Development (Copy attached) has also been sent to Chief Secretaries of all the States and UTs for supporting production of masks etc through RSETI trained candidates and using the RSETI infrastructure for producing them. *Advisories on easy methods of making of masks and right way of using masks and on Ayurvedic immunity boosting measures respectively, issued by M/o HFW and M/o AYUSH, are attached with the letter for ready reference.* So far about 132 Lakh masks have been produced by various SHGs across the country, having established the capacity for such large scale productions, the

same may be ramped up. The SRLMs may contact the state health Departments and District Officials to augment the supplies.

3. *Aarogya Setu* is a mobile application developed by the Government of India to connect essential health services with the people of India in our combined fight against COVID-19. The Application is aimed at augmenting the initiatives of the Government of India, particularly the Department of Health, in proactively reaching out to and informing the users regarding risks, best practices and relevant advisories pertaining to the containment of COVID-19. The application is available in 11 languages and operates both on Android and IOS mobile. All the SRLMs are requested to promote use of *Aarogya Setu* Application developed by MoHFW for staying informed and alert against COVID-19 (<https://www.mygov.in/aarogya-setu-app/>). Self-Help Group members shall also be encouraged to download this App to stay informed and updated.
4. For technical inputs and updates, it recommended to refer MoFHW website regularly (<https://www.mohfw.gov.in/>). Websites of MoAYUSH (<http://ayush.gov.in/>), MoWCD (<https://wcd.nic.in/>), FSSAI (<https://www.fssai.gov.in/>) and Ministry of Consumer Affairs (<https://consumeraffairs.nic.in/>) shall also be referred from time to time.
5. We have been informed that in most states, SHGs/VOs/CLFs have also initiated work related to provision of ration or cooked food to poor and vulnerable families using the Vulnerability Reduction Fund or with support from State and district administration. We encourage such activities so as to ensure that no family is left hungry in these difficult times. SRLMs may like universalise such interventions through convergence with relevant departments, like Food and Civil Supplies, for providing rations to the needy families through the women's institutions.
6. It is again cautioned that SRLMs must ensure that members follow various advisories including social distancing issued by MoHFW and State Governments while undertaking any activity. *A pocket reference book on COVID-19 including precautions and safety measures to be followed has been issued by MoHFW and is also attached with the letter for reference and circulation.*

Enclosures: As mentioned above

Yours sincerely,

Sd/-
(Alka Upadhyaya)

Copy for information to:

Ms. Preeti Sudan,
Secretary Ministry of Health and Family Welfare,
Nirman Bhawan, Room No. 156,
A-Wing, New Delhi - 1 1001

File No. J-11060/37/2017-RL
Government of India
Ministry of Rural Development
Rural Livelihoods Division

7th Floor, NDCC II Building
Jai Singh Road
New Delhi-110001
Dated: 26.03.2020

To

The State Mission Directors/CEOs
All States/UTs

Subject: Activities at different level to address COVID-19

Madam/Sir

This is in continuation to letter number J-11060/37/2017-RL dated 11th March 2020 regarding dissemination of information pertaining to COVID-19. In view of the continuing Corona Virus situation, sustained efforts are required for its prevention, control and address that issues that have emerged due to COVID-19 outbreak at the community level.

In this context, pl find attached herewith an advisory on the indicative activities at different levels i.e State Rural Livelihoods Mission (SRLM) and community institutions has been issued. All SMDs/CEOs are requested to take necessary action for the implementation of the advisory and submit the compliance report to this office on a regular basis.

Yours Faithfully,

(Nita Kejrewal)
Joint Secretary (RL)

Advisory on activities to be undertaken under the FNHW component of DAY-NRLM, in response to COVID-19 outbreak:

In order to ensure proper awareness generation about COVID-19 outbreak and to enable the SHG members to be better prepared to manage themselves in the current scenario, as well as to support in amelioration of the difficulties being faced by the disadvantaged sections of the society, SRLMs are advised to consider following activities through community institutions under DAY-NRLM and issue directions accordingly.

All the activities undertaken by SRLMs must follow Advisories issued by MoHFW including advices regarding social distancing, mass gathering or any other Advisory issued by the state with regard to COVID-19 outbreak.

All the Staff and members shall follow preventive measures as specified by the MoHFW on COVID - 19.

A. Activities to be undertaken by SRLMs:

- i. Coordinate with department of health for latest updates and advisories and issue instructions as required.
- ii. List emergency contact details and information e.g. helpline numbers, hospitals conducting COVID-19 tests etc and share up to SHG level.
- iii. Use community radio where ever available or any other available medium for spreading messages on COVID-19.
- iv. Provide technical resource material for reference at all levels. Awareness material has been developed by MoHFW and can be accessed from the following link: <https://www.mohfw.gov.in/>.
- v. In view of on-going lockdown, a chain of communication can be developed: SMMU – DMMU – BMMU – CLF – VO - SHG Leaders / members. The communication with teams and members may be done through email, messages, WhatsApp and phone. Digital messaging at community level may be done for dissemination of information and local coordination may be done over phone, messages and WhatsApp. Awareness generation may be ensured on the COVID-19 virus situation, particularly with regard to the following:
 - a. Awareness on impact of COVID-19 spread and suggested preventive and control measures
 - Realization of possible harmful impact of COVID-19 spread is needed, hence awareness on this may be emphasized.
 - Preventive measures to contain COVID-19 have been specified by the MoHFW and may be reiterated to the community.
 - Resource material in form of poster, advisory, comic book, video, audio etc are available on the MoHFW website.

- b. Awareness on correct method of handwashing
 - Resource material may be available with SRLMs as it is a critical component of FNHW intervention package.
 - Awareness may be imparted considering social distancing and mass gathering advisories issued by the MoHFW.
- c. Awareness on not touching of nose, mouth and eyes and not spitting in public
 - As nose, mouth and eyes are the entry points of Virus, awareness on not touching them may be imparted.
 - Harmful effects of spitting in public may be emphasized.
 - Posters developed by MoHFW on these have already been shared with the SRLMs.
- d. Awareness on social distancing
 - Awareness on importance of social distancing and potential harmful effects if not followed may be emphasized.
 - Awareness on not conducting any social, cultural or mass gathering may be conducted.
 - Advisory on social distancing has been issued by the MoHFW and is available on its website.
- e. Awareness on myths may be addressed and correct information may be disseminated (Content is provided in the role of frontline workers in prevention and management of Corona Virus issued by MoHFW).
- vi. Support in production of sanitizers, soaps, mask and gloves making through community Institutions, as initiated by various SRLMs, and ensure quality standards to be followed. Hygiene has to be ensured during production, supply and distribution.
- vii. Support in cooking and distribution of meals for the needy etc. through groups that already have the existing infrastructure and expertise. *This would include running Community Kitchens in collaboration with State and District Administrations. As is already being done in Kerala through the community institutions. (A copy of the news article in this regard is attached.*
- viii. SRLM needs to identify the needy VOs, disburse of Vulnerability Reduction Fund to VOs and issue an advisory for allowing loans from VRF for COVID-19 medical emergencies, food security and health security etc. This may include provision for basic necessities like food, soap, access to treatment etc or any other as per VO's discretion

B. Activities to be undertaken by Community Institutions:

- i. Ensure that members follow preventive measures while undertaking any activity related to COVID-19 including maintaining distancing while working, washing hands regularly, maintain hygiene and social distancing as required.

- ii. Support in production of sanitizers, soaps, mask and gloves making as initiated by various SRLMs and ensure quality standards to be followed. Hygiene has to be ensured during production, supply and distribution.
- iii. If any SHG member/VO requires capital for purchase of raw material, production and distribution of Sanitizers, soaps, masks and gloves, loans can be disbursed either from Bank loan or CIF. (A letter in this regard has already been sent by the office of AS, MoRD to SRLMs on 23rd March 2020.)
- iv. Cooking and distribution of meals for the needy etc. may be done by groups that already have the existing infrastructure and expertise.
- v. Encourage social distancing and discourage any social, cultural or mass gatherings being organized in the community and report if required.
- vi. Report if any Indian or Foreigners travelled to COVID-19 affected countries in last 14 days are noticed.
- vii. Coordinate with ASHA and AWW in prevention and management of Corona Virus. A brochure has been issued by MoHFW on role of frontline workers in prevention and management of Corona Virus (attached with the email).

c. Disbursement and rescheduling of loans

- i. Disbursement of loans to needy SHG members for food security, medical emergency or production of sanitizers, soaps, mask etc by getting the consensus of member through phone. If it is not possible, disbursing loans and ratifying it in SHG meetings later.
- ii. Moratorium period 2 to 3 months for repayment of loans may be given to needy borrowers, if requested.
- iii. Loan rescheduling can be done to needy borrowers, if required.

Kerala's 43 lakh-strong women self-help network power community kitchens during coronavirus lockdown

By Vishnu Varma · indianexpress.com · 4 min

[View Original](#)



Powering this kitchen and scores of others across the state is the ever-dependable army of Kudumbashree

Powering this kitchen and scores of others across the state is the ever-dependable army of Kudumbashree (Express Photo by Vishnu Varma)

It's nearly 1 pm and the municipality community hall in Kakkanad neighbourhood of Kochi is a hive of activity. Inside the compound, a wooden desk blocks the passage to the hall. A wash basin, complete with handwash, sits on the left. Beyond the wooden table, on which



half their faces, are working furiously.

The menu today is simple: ney-choru (ghee rice) and chicken curry. The cooking's done. One set of women are engaged in filling little plastic pouches with the chicken curry, while the others are tending to the rice. As soon as they are ready, a couple of men hurry over and bring them to the table at the entrance from where they are scooped into little bags by volunteers and delivered to homes nearby.

Is India Under Curfew Or Lockdown? Here's What You Must ...



At a time when Kerala and the rest of the country are under severe lockdown as part of measures to tackle coronavirus, the little morsels of food that get sent out from this makeshift community kitchen in Thrikkakara municipality are central to the hunger-free project of the state's Left government. And powering this kitchen and scores of others across the state is the ever-dependable army of Kudumbashree, a powerful self-help network of 43 lakh women.

families, the councillors of Thrikkakara municipality didn't have to think hard on whom to rely for support. They simply dialled the grassroot-level neighbourhood units of Kudumbashree who immediately jumped on board. Within no time, the kitchen was opened Friday morning to serve breakfast.



Kudumbashree, meaning 'prosperity of family' in Malayalam, was formed in 1997 as a three-tier community network aimed at empowering women

Kudumbashree, meaning 'prosperity of family' in Malayalam, was formed in 1997 as a three-tier community network aimed at empowering women (Express Photo by Vishnu Varma)

"These are women who run exceptional catering services. Soon, they will handle it entirely," said Nazar, an independent councillor who helped set up the kitchen.

Kudumbashree, meaning 'prosperity of family' in Malayalam, was formed in 1997 as a three-tier community network aimed at empowering women in each family and making them drivers of change at the grassroot level.



in a deeply-patriarchal state. From driving taxis to running Metro ticket counters, operating paper mills to orphanages and day-care centres, they have done it all. And so when each government faces an arduous task such as the present one, they have happily relied upon Kudumbashree.

“Kudumbashree’s success was that it was able to discover these women who want to function as public servants. More than improving wages, they have shown an inclination to volunteer and do something for the society,” said Manjeesh, a district programme manager with the network.



Riyaz, a computer technician, is among those who have signed up for the volunteering programme

Riyaz, a computer technician, is among those who have signed up for the volunteering programme (Express Photo by Vishnu Varma)



ubiquitous logo of three flowers on their pocket sleeves have a bit of time to rest. And then they have to start prepping for dinner: a simple meal of rice and sambar which has to get delivered at doorsteps by 8 pm.

“We distributed 380 packets of chapathi and vegetable curry in the morning. Lunch and dinner are for 500 people. Tomorrow, we are expecting to cook food for nearly a 1000 people, a majority of which would go to migrant workers” said Nazar.

The process to identify beneficiaries for the community meals across Kerala is pretty straight-forward: the local panchayat ward members/councillors, ASHA workers and anganwadi teachers comb through every home in their jurisdiction, making a list of those who need food.

They add a few dozens, keeping in mind the destitute and homeless. A helpline number is also provided on which people could call and enquire about the service. The state government has already started assigning volunteers, mostly young people who have private vehicles, who can transport supplies and cooked meals.



Back at the community kitchen, as the last of the food packets get bundled up, the Kudumbashree cooks in white aprons

Back at the community kitchen, as the last of the food packets get bundled up, the Kudumbashree cooks in white aprons (Express Photo by Vishnu Varma)

Nazar adds that he's been getting dozens of calls from youngsters wanting to volunteer. "But because the government has instructed that all safety protocols have to be followed at community kitchens, we're careful. Look at me, even I'm standing outside. The staff inside can go out only after they complete the shift."

Riyaz, a computer technician, is among those who have signed up for the volunteering programme. He waits in front of the wooden desk at the entrance for his share of food packets to be delivered in his neighbourhood. He works at home for a few hours and then engages in volunteering services like these.



There are so many young people like us waiting to see how we can support the government. All that we spend is on fuel, which is practically nothing.”

There’s optimism inside the kitchen too. Nisha, one of the Kudumbashree cooks who runs a catering agency called ‘Nirbhaya’ in her neighbourhood, is not wilting under pressure just yet. She understands the demand for cooked food will go up in the next couple of weeks, but she’s unfettered.

“During the floods, we helped cook for 2000 people. So this is nothing,” she said, with a smile.

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Role of Frontline Workers in Prevention and Management of CORONA VIRUS

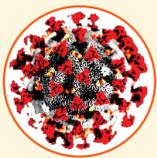


As you know a new respiratory disease called COVID-19 is spreading across the world. India has also reported cases from states and the government is trying to contain the spread of the disease. As an important frontline worker, you play a major role in preventing its spread.

Your Role as a Frontline Worker is two-fold:

1. Spread key messages in the community about measures to prevent the infection.
2. Take actions for early detection and referral of suspected COVID-19 cases.

As a key member of the primary health care team, we want you and your family to be safe. Following the advice in this document will help you in staying safe.



What is COVID-19?

COVID-19 is a disease caused by the “novel corona virus”. **Common symptoms** are:

- ▶ **Fever**
- ▶ **Dry cough**
- ▶ **Breathing difficulty**
- ▶ Some patients also have aches and pains, nasal congestion, runny nose, sore throat or diarrhoea

About 80% of confirmed cases recover from the disease without any serious complications. However, one out of every six people who gets COVID-19 can become seriously ill* and develop difficulty in breathing. In more severe cases, infection can cause severe pneumonia and other complications which can be treated only at higher level facilities (District Hospitals and above). In a few cases it may even cause death.

* Source: WHO

How does COVID-19 spread?

- ▶ COVID-19 spreads mainly by droplets produced as a result of coughing or sneezing of a COVID-19 infected person. This can happen in two ways:
 - ◆ **Direct close contact:** one can get the infection by being in close contact with COVID-19 patients (within one Metre of the infected person), especially if they do not cover their face when coughing or sneezing.
 - ◆ **Indirect contact:** the droplets survive on surfaces and clothes for many days. Therefore, touching any such infected surface or cloth and then touching one's mouth, nose or eyes can transmit the disease.
- ▶ The incubation period of COVID 19 (time between getting the infection and showing symptoms) is 1 to 14 days
- ▶ Some people with the infection, but without any serious symptoms can also spread the disease.

Which group of people are at higher risk of getting infected?



- ▶ People who have travelled to other countries in last 14 days and their family members.
- ▶ People coming from other states if they have been working with people who travelled to other countries in last 14 days.
- ▶ Family members and contacts of patients confirmed to have COVID-19.
- ▶ People older than 60 years of age and people with medical problems like high blood pressure, heart problems, respiratory disease/asthma, cancer or diabetes are at higher risk for developing serious complications..

Key messages to spread for prevention of COVID-19

1. How to avoid getting COVID-19 or spreading it?



a) Practice Social Distancing:

- ▶ **Avoid gatherings** such as melas, haats, gatherings in religious places, social functions etc.
- ▶ **Maintain a safe distance** of at least one Metre between you and other people when in public places, especially if they are having symptoms such as cough, fever etc. to avoid direct droplet contact.
- ▶ **Stay at home** as much as possible.
- ▶ **Avoid physical contact** like handshakes, hand holding or hugs.
- ▶ **Avoid touching surfaces** such as table tops, chairs, door handles etc.



b) Practice good hygiene

- ▶ **Wash your hands frequently using soap and water:**
 - ◆ After coming home from outside or meeting other people especially if they are ill.
 - ◆ After having touched your face, coughing or sneezing.
 - ◆ Before preparing food, eating or feeding children.
 - ◆ Before and after using toilet, cleaning etc.



Steps of hand washing

Duration 40 seconds



- ▶ While coughing or sneezing cover your nose and mouth with handkerchief. Wash the handkerchief at least daily
- ▶ It is preferable to **cough/sneeze into your bent elbow rather than** your palms.





- ▶ **Do not Spit or shout** in public places to avoid the spread of droplets.
- ▶ **Do not touch your eyes, nose and mouth** with unclean hands.
- ▶ Ensure that the surfaces and objects are regularly cleaned.

2. What to do if you are having symptoms or have travelled to other countries or states in past two weeks?

- Symptoms of COVID 19 and seasonal respiratory illness (common cold/flu) are similar. All people with these symptoms may not have COVID 19.
- Following persons should be quarantined for 14 days at home as a precaution:
 - ▶ People who have travelled to COVID 19 affected countries/areas in past 14 days
 - ▶ Those who have come in close contact with a suspected/confirmed COVID 19 patient
 - ▶ Those who develop symptoms
- These persons should inform you. If symptoms become severe then the person should visit a health facility after speaking with you.



For any COVID 19 related queries, call your State Helpline/Ministry of Health & Family Welfare's 24X7 helpline at **1075** or **011-23978046**.

Your role in early detection and referral



- ▶ As a community worker you may be asked to prepare a line list of all people who have travelled to other countries or other states inside India in last 14 days:
 - ◆ Share their names with your Medical Officer at PHC but not with others
 - ◆ Teach them Home Quarantine for next 14 days
 - ◆ Tell them to monitor themselves for symptoms of COVID-19
 - ◆ Tell them to inform you if symptoms develop and call the COVID 19 Helpline



- ▶ **Instructions for the person being Home Quarantined**
 - ◆ Stay in a separate room at home, if possible with an attached/separate toilet. Try to maintain a distance of at least 1 meter from others
 - ◆ Wear a mask at all times. If masks are not available, take a clean cotton cloth, fold it into a double layer and tie it on your face to cover your nose and mouth
 - ◆ Use separate dishes, towels, bedding etc. which should be cleaned separately
 - ◆ The surfaces such as floor, table tops, chairs, door handles etc. should be cleaned at least once a day
 - ◆ Make sure that only one assigned family member is the caretaker



- ▶ **Instructions for the caretaker of the Home Quarantined person:**
 - ◆ Keep a distance of one metre when entering the room
 - ◆ Wear a mask or cover your face with double layered cotton cloth
 - ◆ Wash your hands after coming out of the room
- ▶ **How to use masks (or cloth covering the nose and mouth)**
 - ◆ Wash your hands before putting on the mask
 - ◆ Make sure that it covers both mouth and nose and is not loose.
 - ◆ Do not touch the mask from the front, touch only from the sides.
 - ◆ Make sure to wash your hands after changing the mask
 - ◆ Change the mask every 6-8 hours or when it becomes moist
 - ◆ If using disposable masks, have a dustbin with cover and a plastic bag lining to throw the masks in.
 - ◆ If using cloth masks, wash them at least daily

How to take care of yourself and carry on with your duties as a frontline worker?

- ▶ **Take all preventive measures** that you are talking about in the community such as keeping safe distance, washing hands frequently including before and after home visits. Carry your own soap if necessary
- ▶ If you are visiting or **accompanying a suspected case** to any health facility, make sure to cover both your mouth and nose with folded cloth or mask.
- ▶ If you are conducting community meetings or supporting outreach sessions the **groups should not be larger than 10-12 people.**
- ▶ Maintaining safe distances for those living in crowded areas or the homeless is going to be difficult. Even then you should inform them about preventive measures and support them as required.
- ▶ **Self-monitor** for signs of illness and report to the Medical Officer, immediately if any symptoms develop.
- ▶ **Ensure that you continue to undertake tasks** related to care of pregnant women, newborns and sick children, Post Natal Care, Breastfeeding and Nutritional Counselling, TB and NCD patient follow up while taking preventive measures.
- ▶ Remember older people are at higher risk, so take **special care to visit homes of elderly people.**
- ▶ **Continue to pay special attention to the marginalized,** as is your routine practice.
- ▶ Also as the people's trusted health worker, try to **reassure them** that while those with symptoms and high risk need close attention, for others, prevention measures will decrease the risk of getting the disease.

Myths vs. reality for COVID-19

As COVID-19 is a new condition, there are many common myths.

Myths	Facts
1. The corona virus can be transmitted through mosquitoes.	The corona virus CANNOT be transmitted through mosquito bites.
2. Everyone should wear a mask.	People who should wear a mask are: <ul style="list-style-type: none">▶ Those having symptom of fever, cough etc.▶ Healthcare workers in facilities caring for ill people▶ The assigned care taker of a home quarantined person▶ Even those wearing masks should wash their hands frequently
3. Only people with symptoms of COVID-19 can spread the disease.	Even people with the COVID-19 infection but no symptoms can spread the disease.
4. Eating garlic and drinking alcohol can prevent COVID 19	Eating garlic and drinking alcohol DOES NOT prevent COVID 19



Ministry of Health & Family Welfare
Government of India





सत्यमेव जयते

MINISTRY OF AYUSH

AYURVEDA'S IMMUNITY BOOSTING MEASURES FOR SELF CARE DURING COVID 19 CRISIS

In the wake of the Covid 19 outbreak, entire mankind across the globe is suffering. Enhancing the body's natural defence system (Immunity) plays an important role in maintaining optimum health.

We all know that prevention is better than cure. While there is no medicine for COVID-19 as of now, it will be good to take preventive measures which boost our immunity in these times.

Ayurveda, being the science of life, propagates the gifts of nature in maintaining healthy and happy living. Ayurveda's extensive knowledge base on preventive care, derives from the concepts of "*Dinacharya*" - daily regimes and "*Ritucharya*" - Seasonal regimes to maintain healthy life. It is a totally plant-based science. The simplicity of awareness about oneself and the harmony each individual can achieve by uplifting and maintaining his or her immunity is emphasized across Ayurveda's classical scriptures.

Ministry of AYUSH recommends the following self-care guidelines for preventive health measures and boosting immunity with special reference to respiratory health. These are supported by Ayurvedic literature and scientific publications –

RECOMMENDED MEASURES

I | General Measures



1. Drink warm water throughout the day.



2. Daily practice of Yogasana, Pranayama and meditation for at least 30 minutes as advised by Ministry of AYUSH (#YOGAatHome #StayHome #StaySafe)



3. Haldi (Turmeric), Jeera (Cumin), Dhaniya (Coriander) and Lahsun (Garlic) is recommended in cooking.

II | Ayurvedic Immunity Promoting Measures



1. Take Chyavanprash 10gm (1tsf) in the morning. Diabetics should take sugar free Chyavanprash.



2. Drink herbal tea / decoction (Kadha) made from Tulsi (Basil), Dalchini (Cinnamon), Kalimirch (Black pepper), Shunthi (Dry Ginger) and Munakka (Raisin) - once or twice a day. Add jaggery (natural sugar) and / or fresh lemon juice to your taste, if needed.



3. Golden Milk- Half tea spoon Haldi (turmeric) powder in 150 ml hot milk - once or twice a day.

III | Simple Ayurvedic Procedures



1. Nasal application - Apply sesame oil / coconut oil or Ghee in both the nostrils (Pratimarsh Nasya) in morning and evening.



2. Oil pulling therapy - Take 1 table spoon sesame or coconut oil in mouth. Do not drink, Swish in the mouth for 2 to 3 minutes and spit it off followed by warm water rinse. This can be done once or twice a day.

IV | During dry cough / sore throat



1. Steam inhalation with fresh Pudina (Mint) leaves or Ajwain (Caraway seeds) can be practiced once in a day.



2. Lavang (Clove) powder mixed with natural sugar / honey can be taken 2-3 times a day in case of cough or throat irritation.



3. These measures generally treat normal dry cough and sore throat. However, it is best to consult doctors if these symptoms persist.

* The above measures can be followed to the extent possible as per an individual's convenience.

These measures are recommended by following eminent Vaidyas from across the Country as they may possibly boost an individual's immunity against infections.

- | | |
|---|--|
| 1. Padma Shri Vaidya P R Krishnakumar, Coimbatore | 9. Vaidya M S Baghel, Jaipur |
| 2. Padma Bhushan Vaidya Devendra Triguna, Delhi | 10. Vaidya R B Dwivedi, Hardoi UP |
| 3. Vaidya P M Varier, Kottakkal | 11. Vaidya K K Dwivedi, Varanasi |
| 4. Vaidya Jayant Devpujari, Nagpur | 12. Vaidya Rakesh Sharma, Chandigarh |
| 5. Vaidya Vinay Velankar, Thane | 13. Vaidya Abhichal Chattopadhyay, Kolkata |
| 6. Vaidya B S Prasad, Belgaum | 14. Vaidya Tanuja Nesari, Delhi |
| 7. Padma Shri Vaidya Gurdeep Singh, Jamnagar | 15. Vaidya Sanjeev Sharma, Jaipur |
| 8. Acharya Balkrishna ji, Haridwar | 16. Vaidya Anup Thakar, Jamnagar |

Disclaimer: The above advisory does not claim to be treatment for COVID 19.