



Containing the Rural COVID-19 Spread

What is the issue?

The second wave of the COVID-19 pandemic has affected the rural areas significantly when compared to first wave.

How worse is the situation?

- There are scenes of floating dead bodies in the Ganga which is one of the most painful and distressing scenes of the Covid-19.
- People are gasping for breath in hospitals due to shortage of oxygen and medical supplies were supplied in the black market.
- Farmers' agitations, religious congregations are the easy source for virus spread.
- In rural areas, especially Punjab tops the list of Covid-19 death rates, followed by Uttarakhand, Goa, Delhi, Maharashtra because virus easily spreads in crowds.
- The agitating farmers in Punjab say that corona is a conspiracy against their agitation.
- This denial, whether due to deficit of trust or lack of education, will make it harder to control the virus which is compounded by weak health infrastructure in rural areas, leading to third or fourth wave.
- It is now time for some quick action to contain the spread of virus in villages and the only solution seems to be vaccination.

How long will it take to vaccinate at least 100 crore Indians?

- Though there are no clear cut answers, but between August and December 2021, about 200 crore doses of vaccines will be available for Indians.
- The government is taking all efforts to ramp up vaccine production, largely through the private sector.
- But until then the country under lockdown conditions for long as it hits

livelihoods, especially of the poorer sections.

- So calibrated needs to be taken by balancing lives and livelihoods of the people.

What are the steps government has taken?

- ICRIER suggested the creation of a war-room at the central level with representatives from relevant states, medical experts, army logistics, corporate sector, civil society, etc. which exists already.
- It would be good if the leader of the war-room addresses the nation at least twice a week for better communication with the citizens telling how well the government is prepared.
- Also the centre is working with more than one lakh NGOs, corporate bodies, and coordinating international aid, for smooth and timely flow of medical supplies.
- But, it is falling short of the needs, especially in rural areas, so panchayats, NGOs, and corporate leaders can be roped in.

What are the other measures to be taken?

- Rural people must be convinced about vaccination and simultaneously the health infrastructure-especially Primary Health Centres (PHCs) -needs to be upgraded.
- In rural areas, controlled temperatures and power supplies in PHCs remains an issue for stocking the vaccines.
- The PHCs can use solar power thereby creating new jobs and giving a fillip to health infrastructure with a green footprint.
- MGNREGA workers are likely to be vulnerable due to group activity and they should be incentivised for vaccination, given free food for three months or so, and/or with some cash rewards.
- But, if that does not work, some mandatory vaccination for group workers in villages and factories will be needed to save lives of everyone in the group.
- Finally, big infrastructure push and supporting MSME in rural areas can go a long way in saving their lives and livelihoods.

Source: Financial Express



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