



GENDER SAMVAAD

Presented by: Shri Sampath Kumar, IAS Principal Secretary C&RD, Health and Social Welfare Date: 2nd July'21

SNAPSHOTS



34,424 SHGs formed.







3,44,240 HHs mobilised.



₹ 7.08 Crores Community Fund released to 4856 SHGs covering 48,560HHs in the 1st Quarter.



46 Block war room were set up @ 1 per block.



40 Staff were infected by COVID, out of which 36 recovered.



44% Staff have been vaccinated so far.



879 SHG credit linked amounting ₹13.14 Crores in the 1st Quarter.

- 186 BC Agents registered with MRB
- 160 SHG members identified out of which 126 registered with CSC for Digi Pay transaction.
- 86 Micro ATM issued and 100 more to be distributed under BC initiative.
- 3759 transactions amounting to ₹ 1.4 CR.



BLOCK WAR ROOM STRATEGY

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)bjectives	 Mobilize Dorbar, Headman, VEC, SHGs, VOs & AWWs for prevention and treatment of COVID Educate all households and communities on three strategies Contain: ii. Treat iii. Vaccinate Facilitate formulation and implementation of Village COVID Plan Be a source of timely information to citizens, particularly on non-medical interventions. Coordinate with the Health Dept. to support actions under COVID action and the Rescue Mission Identification of vehicles that can be used for medical emergencies. Help Centre for high risk citizens.
Action for HGs & VO	 Weekly Discussion on the following key focus areas Contain Vaccinate Treat Action taken report Action Plan

Three-Pronged Strategy to Tackle COVID

1. Prevent & Contain

Mask Wearing

O Double mask or N95 O Don't remove the mask while speaking

Social-Distancing

O Stay 2 meters apart O Avoid gatherings in indoor spaces

O Practice distancing even at home

2. Early Treatment

• Early Testing

- O As soon as you feel any flu-like symptoms
- O Or if you have been in contact with someone else who has symptoms

• Early Treatment

- O Don't wait for test results to start treatment
- O Use Medical and Self-Help Interventions

Manage Biphasic Nature

- O Identify signs of biphasic disease
- O Use step-up treatment as needed

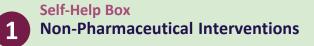
3. Vaccinate

Vaccination Access

O Make vaccination process easy O Organize vaccination drives

Counter Hesitancy

O Address common vaccine myths O Empowering households to encourage members to get vaccinated



a) Containment (Prevention)

1. *Mask wearing* (double masking or medical grade masks)

2. Social distancing

3. Hand washing and sanitizing

b) Non Medical Treatment

- 1. Self-Isolation and handle without fear
- 2. Hydration (drink 10-12 glasses daily)
- 2. Steam inhalation
- 3. Awake proning (SpO2 <94, rapid breathing)
- 4. lodine gargling,
- 5. Breathing exercises
- 6. Nutritious light diet (soups, soft foods, etc)

2 Medical Box Medical Interventions

Get Vaccinated as soon as possible

1.Paracetamol if you have fever

2.Ivermectin

- **3.**Vitamin C, Zinc, Multi-vitamins, Vitamin D3, Broncholidator cough syrup
- **4.**Budesonide (inhaler steroid) at onset of symptoms (to be administered by AAAs)
- 5. With doctor's advice: Oral steroids & anticoagulants and Antibiotics (only if fever does not subside by day 5)
- 6.Hospitalization for serious cases (SpO2 <94, high respiration rate)

Toll Free Helpline: 14410

Facilitator Box 3 **Community / Government Agencies Role** NHM DHS NRLM **Civil Society &** ICDS **NGOs** Mobilizing ANM, ASHA & Coordination among Mobilizing VEC & SHGs to AWW conduct door-to-door AWW (AAAs) on home Medical Institutions create Village Covid Plans visits, & FGD (inform on Mobilize Community Health (home care plan, community care, referrals as needed, (hospitalization of serious home-care, mobilize for Champions for door-to-door vaccination cases) isolation center, emergency vaccination) visits + managing vehicles) **Community Isolation** Centers

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home durina

containment

Medical Box

Led by: ASHAs Supported by: MOs

A. Educate

a. Home-care treatment protocols *b.* Identifying symptoms early to start treatment early *c.* Identifying warning signs 6 to 8 days after the onset of illness

d. When to seek emergency medical care

B. Support

a. Make home visits to people tested positive or showing symptoms of COVID

b. Distributing medicines as per the advice of the MOs

C.Provide Step-up

*d.*Closely monitoring warning signs in the 5 to 10 day period

Self-Help Box

Led by: SHGs & AWWs Supported by: NRLM & ICDS

A. Educate (focus on Non-Pharmaceutical Interventions)

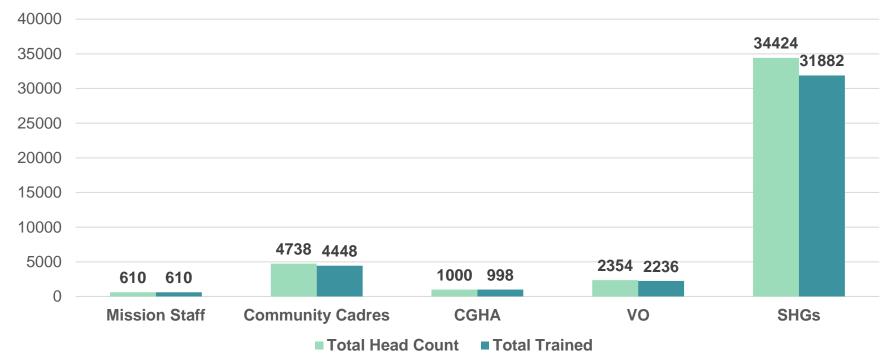
a. Proning (SpO2 <94, rapid breathing) **b.** Steam inhalation & Iodine gargling **c.** Self-Isolation and handle without fear **d.** Hydration (drink 10-12 glasses daily) **e.** Breathing exercises **f.** Nutritious light diet (soups, soft foods)

B. Support

*O***.** Help COVID-Infected households *D***.** Help ASHAs with home visits *C***.** Mobilise SHG HHs for vaccination



Training on COVID-19 Appropriate Behaviour



VACCINATION DRIVE



- 5600 villages vaccination drive initiated by the Block Office supported by VOs,SHGs, CGHA & CRPs.
- 270 Mission Staff vaccinated.
- 44,150 SHG Members vaccinated.

Community Partneship



- 6473 Community COVID Management Team/Committee (CCMT/C) constituted.
- 5661 villages COVID plans formulated till date
- **716** meetings conducted by CCMC
- 4476 Community COVID Care Centre set up covering all the villages.
- 2070 Community Ambulance mobilised.
- 2 Community Kitchen were set up in SWGH District by 10 SHGs.
- Provide cooked food to the COVID Care Centre, PHCs, CHC, Police Department etc. and also serve food to 35 most vulnerable HHs.

COMMUNITY GENDER AND HEALTH ACTIVIST



- 1000 CGHA identified.
- 998 CGHA trained on FNHW.
- 998 CGHA trained on COVID.
 Appropriate behaviour.
- 29,940 house hold visited to educate.
 HH members on 3 principles to beat Covid-19:
 - i. Knowledge
 - ii. Collective action
 - iii. Compassionate Support

BC - Ensuring Continuity in Banking Services



Bank Sakhi delivering banking services during the lockdown

Conducting business and awareness by Business Correspondent Agents

1. Bank Sakhi:

- Assist in mobilizing SHG for credit linked- 879 SHG credit linked for an amount of ₹ 13.48 Crores in the 1st Quarter.
- 2. BC project with Meghalaya Rural Bank:
 - Providing basic banking services using Micro-ATM in the unbanked areas to reach the last mile.
 - 3759 nos. of transactions were transacted using the Micro-ATM amounting to ₹1.4CR.
- 3. BC project with CSC:
 - 160 SHG members identified and 126 registered with CSC.
 - 50 SHG members trained for Digipay.

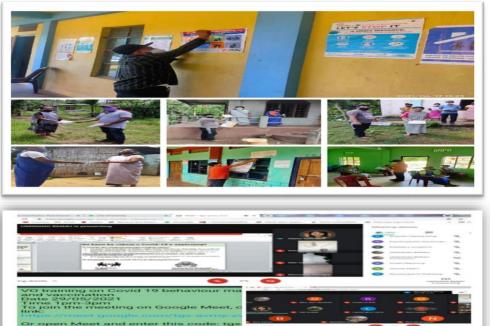
SPECIAL CARE FOR VULNERABLE HH's



- Mapping of Vulnerables Members & Families done by VO/SHG.
- 3305 Vulnerables Families benefited
 in terms of cooked ration and
 uncooked ration.
- 416 VOs received VRF amounting Rs
 ₹ 4.16 Crores covering 15028 HHs.
- 66 destitute HHs received donations in cash through SHG member contribution.
- An Amount of ₹1.33 lakhs mobilised and donated to some of the Vulnerables families.

Dissemination of Information & Knowledge Creation

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Online training programme on Covid-19 Appropriate Behaviour and Vaccination was conducted to Village Organisations under Umsning Management Units by Dr. A Sylemlieh MO. CIVII Hospital Nongpoh. During the session, the queries/doubts raised by the participants, in respect of Covid-19 were also clarified by the Doctor.

- IEC Materials received from NMMU/ Department.
- VO office notice board.
- Posters in community hall.
- Public announcement through PA system.
- Videos (live and animated).
- Audios (radio talk).
- Google, Zoom Meeting
- WhatsApp, Instagram, Facebook, YouTube link.

LIVELIHOODS SUPPORT MECHANISM





Multi Facilitation Centre cum Farmers Market

To mitigate the loss of farmers during the pandemic a temporary Market has been set up , to cater the needs of the farmers and consumer.

- 1. 10 SHGs manages the market In Mawkyrwat, SWKH
- 2. SHGs from 35 villages sells their products everyday in Mawkyrwat, SWKH.
- 3. The market accommodates 106 seller s in Mawkyrwat, SWKH
- 4. Similar Market has been set up in other districts & blocks.

THANK YOU