



COVID-19 Pandemic- Understanding its Impact on Marginal Groups and Populations

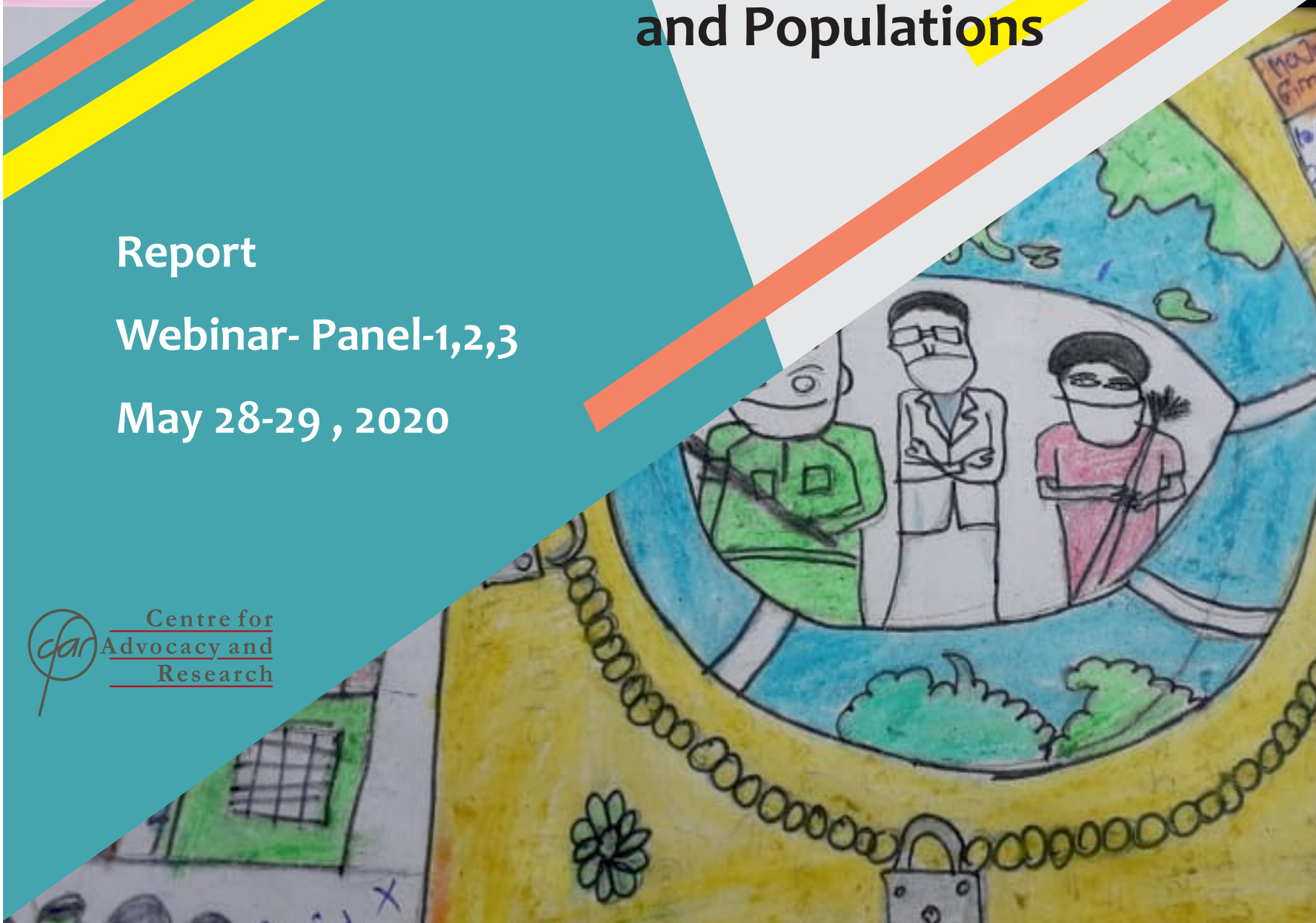
Report

Webinar- Panel-1,2,3

May 28-29 , 2020



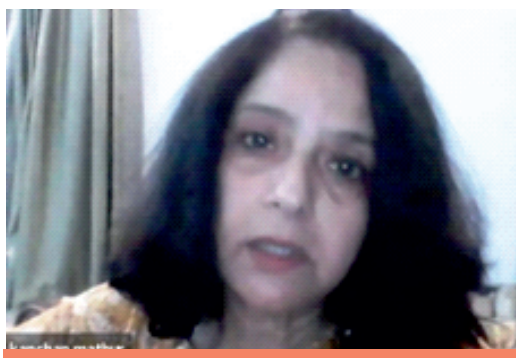
Centre for
Advocacy and
Research



Panel 1 : COVID-19 and Gender Justice: Is the Response Adequate?

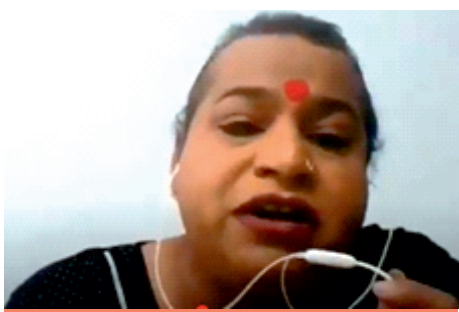
Date: Thursday, May 28, 2020

Time: 10.30 to 12.30 hrs

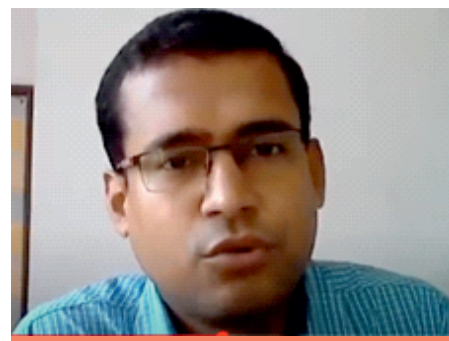


Moderator: Dr. Kanchan Mathur, Honorary Professor, Independent Consultant and Gender Expert, Institute of Development Studies, Jaipur

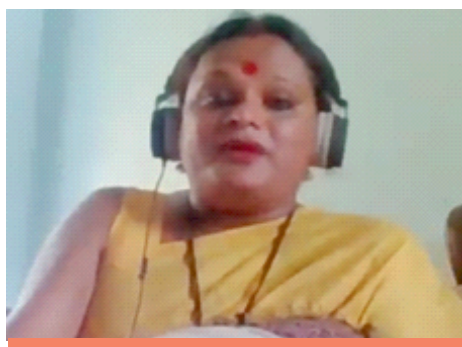
PANELLISTS



Pushpa Mai, Founder *Nai Bhor*, Jaipur, a community-based organization (CBO) working for the rights of transgender persons. Pushpa is a well-known transgender leader in Rajasthan and a member of the Transgender Welfare Board, Government of Rajasthan. A strong advocate of transgender rights across the state, she has been involved in facilitating relief and financial assistance to vulnerable transgender persons with support of the local government.



Basanta Nayak is Senior Programme Manager at the Centre for Youth and Social Development in Odisha, an organization working with urban poor communities for over four decades. An expert on gender budgeting, he is currently involved in leading the organization's work on SDG Goals which, he believes, have to be shaped by the people.



Meera Parida is the Founder of SAKHA, a CBO working for the rights and entitlements of the transgender community. As a member of the Odisha Kinnar Samaj, she has represented the concerns of transgenders at many national and international forums, including the International Visitor Leadership Programme. Meera anchors a TV programme *Bhinna Manush Bhinna Katha* to sensitize people to issues related to transgenders.



Shobhita Rajagopal is Associate Professor and Officiating Director of the Institute of Development Studies, Jaipur. She has extensive experience of working on gender and intersectionality issues cutting across sectors, including education of marginalized girls, MHM and gender mainstreaming.

The key questions deliberated upon during the panel discussions were as follows:

1. Can we say with confidence that gender is recognized as a key issue and there is collective will to address all issues related to gender?
2. How can we equip and sensitize society and administration on the challenges faced by transgender persons, single women and girls?
3. What measures do we need to take to make the system provide all basic and essential services and be responsive to the needs of transgenders, women, girls and other vulnerable groups?
4. How to shape policies and interventions that ensure the principle *Leave No One Behind*?

While explaining the main objective of the webinar, Akhila Sivadas, Executive Director, Centre for Advocacy and Research (CFAR) said that CFAR is deeply engaged in community engagement processes with teams literally spending time from dawn to dusk with the community, listening to them, deliberating with them, planning and acting together in many ways from organizing campaigns, holding stakeholder consultations and advocating jointly with policy-makers. The pandemic is now posing new challenges especially as large gatherings are not allowed and movement is restricted. This requires changing the tactics of community mobilization and collective action. “We need to invest in each individual community member, strengthen leadership of each person, connect digitally and enable every person to participate, shape local action, get their voices heard and assert their agency,” she said. To enable this to happen, CFAR with the support of Water for Women (WFW) and Department of Foreign Affairs and Trade (DFAT), Australian Government, organized a three-panel webinar series on *COVID 19- Understanding the Impact of the Pandemic on Marginal Groups and Populations* on 28-29 May, 2020.



The webinars brought together experts, civil society and community leaders to weigh in on each around the themes, especially in the context of COVID-19, and to empower each of the community members with a renewed perspective on what more we needed to do with even greater conviction to enhance gender sensitivity, social inclusion and universal access to safe WASH services. This alone would enable us to secure the policy and budgetary support for a pro-poor COVID-19 response and recovery, she concluded.

SALIENT POINTS

Pushpa Mai said that the funds for COVID-19 were not reaching the transgender community. Government orders and directives related to COVID-19 response left them out. Transgenders were stereotyped and seen to be earning their livelihood by singing and dancing at weddings and collecting alms on auspicious occasions. The administration needs to be sensitized through focused workshops to address their inherent prejudices against this community and make them aware of the issues faced by them.

Pushpa asserted the urgent need to build capacities of transgender leaders and representatives to take forward WASH issues, especially in the current scenario of COVID-19. She also spoke about the efforts being made to secure inclusive toilets for the community for which she had approached the Jaipur Municipal Corporation to adopt transgender-friendly signage in public toilets and construct dedicated toilets for transgenders.

Basanta Nayak pointed out that gender was not adequately integrated in the COVID-19 response efforts of the Odisha government. He highlighted the three primary challenges faced by the urban poor, which were:

- (i) Economic distress and instability faced by the poor, including migrant workers, daily wage workers and those in informal sector.
- (ii) Absence of integration of gender issues within the overall administrative framework of the city government.
- (iii) Inadequate decentralization at the ward level.

Basanta stressed on the importance of gender being a cross cutting concern and that it should be made an integral part of city planning and budget allocation.

To address these challenges, he proposed setting up of a 'knowledge network' which would focus on gender planning, budgeting and strengthening of institutional mechanisms created by the government. Given the fact that the public finance framework is not gender-sensitive, there was an urgent need to evolve alternatives – even models – to demonstrate that it was possible and essential. He also stressed on the need to strengthen accountability mechanisms, without which gender integration would be a challenge. In the current context in Odisha, he discussed the role of the village head or *sarpanch* in managing livelihoods, especially of migrant labour, which indicated a shift towards decentralization. Basanta appealed for deepening these practices so that the decentralization was meaningful.

Meera Parida said that neither society nor government had given a thought to the transgenders and how they would cope with the lockdown and fulfil their basic needs. The Finance Minister of the country, too, did not include them when she announced an economic package for marginalized communities to offset the crippling effects of both the pandemic and the lockdown.

She also dwelt on the fact that transgenders were not a homogenous group, and like all other groups had within the community the elderly, unmarried, people with disability (PwDs). Till date there were no quarantine facilities in Odisha or Rajasthan for transgenders. “They are not so small in number that they can be ignored by those managing the pandemic,” she added.

The 73d Constitutional Amendment reserved 33 percent of seats in panchayats for women. However, transgenders were not granted any reservation and continued to be socially excluded in diverse ways. “People are experiencing the lockdown now, but transgenders have been experiencing social lockdown since birth,” she said. Meera also pointed out that a large proportion of transgenders were either homeless or lived in rented premises. Many of them had been evicted by landlords, hence lacked protection from the pandemic as they didn't have secure premises nor access to facilities to wash their hands frequently. Transgenders also lived together in cramped spaces, which made social distancing difficult.

Meera said that her organization SAKHA would like to work with CFAR to advocate for the rights of transgenders in all policy formulations and planning of programmes and services during COVID-19.

Shobhita Rajagopal began her presentation by saying that COVID-19 had disrupted the lives of the people but the most impacted were the most vulnerable and marginalized sections of society. She highlighted that several services had been disrupted during COVID-19, including sexual and reproductive health services, mid-day meal in schools, distribution of sanitary napkins and education of children from marginalized families.

She said that the existing inequalities had grown while the administrative response had been gender-neutral so far. However, a gender task force was needed to assess and address the differential needs of communities and groups including those of women, men, children (boys and girls), and transgenders. The gender lens was missing in policy-making, planning and implementation of initiatives and measures to prevent and manage COVID-19. For this to be set right, gender-disaggregated data was required so as to design responses informed by it.

OPEN DISCUSSION

In the discussion that followed, the panelists responded to the questions posed to them. Some of the points made included the following: Shobhita and Basant said that as May 28 is observed as the Menstrual Hygiene Management (MHM) Day, it was absolutely essential for all stakeholders to address issues related to MHM in an integrated manner. However, local solutions were needed to address the issues effectively. One suggestion was to enable self-help groups to produce sanitary napkins and sell these, and take this initiative to scale by building on existing efforts. In Jaipur, the police department had also distributed sanitary napkins. Menstrual waste must be disposed of properly to ensure safe sanitation.

Meera and Pushpa, responding to the inclusion of transgenders' needs and demands in the COVID-19 planning and response, suggested that there was an urgent need to sensitize the administration on their identity-related issues and their capability and needs.

All panelists agreed that as violence against women, especially transgenders, had increased during the time of COVID-19, an institutional mechanism was needed - to begin with more helplines were needed to support women experiencing violence – in addition to establishing more gender cells and building capacities of people managing these cells. The panel highlighted the need to conduct a gender analysis study to assess the impact of the economic package and the benefits that had accrued or were expected to accrue to different sections and constituencies.

RECOMMENDATIONS

- To ensure a gendered COVID-19 response, the following recommendations were made
- Apply a gender lens in policy formulation, planning and implementation.
- Set up a Gender Task Force to mainstream gender issues at all levels.
- Adopt an integrated approach to address the livelihood concerns of the transgender community.
- Strengthen 'Care Economy', and in particular, recognize the caretaking roles of women (cooking, cleaning, care for children, elderly and those ailing) while planning COVID-19 response.
- Involve Ward Committees in planning and executing COVID-19-related initiatives.
- Involve youth groups, both girls and boys, in collating gender-disaggregated data.
- Sensitize police, doctors and media on gender and transgender rights and entitlements. Provide antiretroviral therapy (ART) drugs to those transgenders who are under or need treatment.
- Let CFAR, along with CBOs and NGOs, strongly advocate for mainstreaming gender concerns in COVID-19 response planning and implementation.
- Assess and address WASH needs of the transgender community, including PwDs, such as separate toilets, signages, mobile toilets and Water ATMs.

FEEDBACK FROM COMMUNITY REPRESENTATIVES FROM BHUBANESWAR AND JAIPUR

Happy to find transgender issues being discussed

Divyanshi Jena, Kaberi Nayak, Jaquleen Kinner, Transgender community representatives, Bhubaneswar.

We are very happy to see Meera Maa and Pushpa ji talking about our issues and so many people discussing about our problems, which are never discussed anywhere. This gives us confidence that we are being heard and looked after.

Ramzana, Community Management Member, Hathroi, Jaipur

It has been a wonderful experience to see transgender and women experts from Bhubaneswar and Jaipur in one place and hear them discuss issues related to women and transgender persons.

Deepak Behera, Youth Club member, Bhubaneswar

We really liked the discussion and we also understand the concerns of transgenders. We also wanted to know more about the problems of women migrants, as we have been hearing in news about their difficulties.

Would have liked to hear and learn more

Sanju, Community Management member, Brajlalpur, Jaipur

We would also like to hear from experts about women-headed households, experiences of single women, and women managing households with a large number of family members.

Arati Jena, Mahila Aarogya Samiti, Bhubaneswar

We want to discuss the problems faced by women in our community. We also want to know about the problems other women are facing in different places all over the country. We would like to hear more on gender roles, and on what a woman can do to help other community members during this pandemic.

Manju, Community Management member, Brajlalpur

We would like to hear personal experiences and case studies of women and transgenders from Jaipur as well as other cities.

Asha Samal, Single Window Forum member, Dumduma Pana Sahi, Bhubaneswar

We would also like to know the situation of women in other parts of the country. Are the women facing domestic violence at other places as we have been hearing about many such cases in the news.

Need solutions and know how to overcome problems

Kaberi Bhoi, Adolescent Group, Dumduma Bhoi Sahi, Bhubaneswar

I could understand whatever the panelists were saying and liked the discussion on problems related to menstruation faced by girls during the lockdown. I would like to know more on the solutions and the help we are going to get to overcome them.

Veerender Sahu, Slum Development Committee member, Brajlalpur, Jaipur

There is a need for a capacity-building and sensitization program for participants on gender, transgender and women's issues. Dr. Shobhita mentioned about the Gender Task Force. We heard about gender budgeting for the first time today. This will help them become familiar with the terms which are used in such sessions.

Make the discussion more interactive and in local language

Mumtaz, CMC Member, Hathroi

CFAR team members explained to us what was being said but there were many instances where English was used. It would be preferable if Hindi or our local language is used to help us understand better.

Veerender Sahu, Slum Development Committee member, Brajlalpur, Ramzana, Community Management Member, Hathroi, Jaipur

We would like to get an opportunity to ask questions directly and also participate in the discussions. A question-answer session between the panelists and participants will be nice.

Santoshi Sahoo, Community Management member, Bhubaneswar

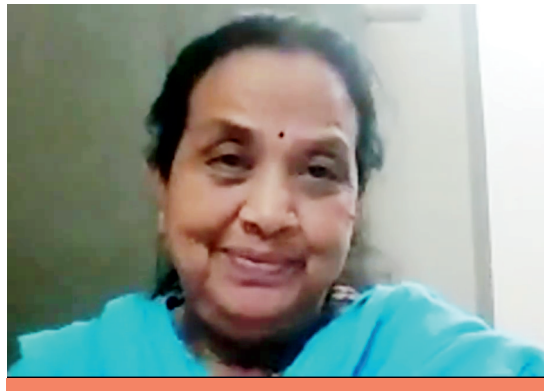
We liked the topic of the discussion as it is very relevant to our context, but we could not understand both English and Hindi and would prefer the conversation is in Odia.

Santoshi Sahoo, Community Management member, Bhubaneswar

Panel 2: Are the challenges faced by the most vulnerable groups being responded to?

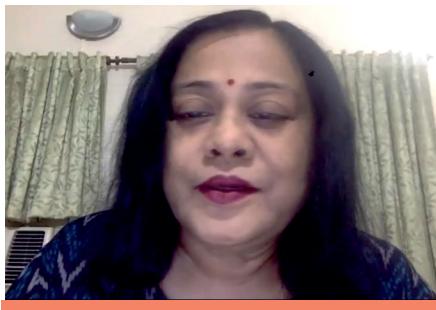
Date: Thursday, May 28, 2020

Time: 15.30 to 17.30 hrs



Moderator: Rakhee Badhwar, Programme Lead, Social Inclusion, CFAR

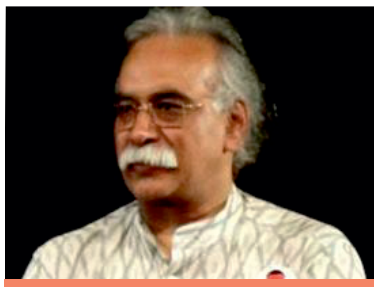
PANELLISTS



Dr. Sruti Mohapatra is the Chief Executive of Swabhimani, a CSO working for the empowerment of persons with disabilities (PwDs). Her efforts have resulted in many positive changes in Odisha and India, including policy changes, increasing public awareness on disability and making cities – including offices and public spaces - accessible to PwDs. She started an inclusive platform for children with disabilities and those without – a project called Anjali which brought together over 40,000 disabled and non-disabled children together.



Mr. Mathew Cherian is the Chief Executive Officer of HelpAge India, based in New Delhi, India, and serves on the international boards of HelpAge International and Guide Star International. An institution-builder, he is a Board member of CFAR, CARE India, the Royal Commonwealth Society of the Blind and the National Foundation of Communal Harmony. He is a member of the Core Committee of National Human Rights Commission and the National Council of Senior Citizens chaired by the Prime Minister of India. Mr Cherian has long years of experience of strategic issues related to rural development, care and support of the elderly, financial alliance and fundraising for CSOs and development organizations.



Dr. Indu Prakash Singh is a prolific writer, poet and a feminist who has over four decades of experience in working on issues of homelessness, rights of destitute, urban poor, people living with HIV (PLHIV), street children, food security, livelihoods, social security, health and human deprivation, women's empowerment, gender and the many intersectionalities. He is a mentor, adept at networking and has been a friend, philosopher and guide to many people. He is one of the pioneers in advocating for the rights of homeless.



Ms. Bhasha Singh is a journalist, lawyer, activist and writer. She has written extensively on the issues of manual scavenging and farmer suicides in North India. She received the Prabha Dutt Fellowship in 2005 for working on the issue of manual scavenging and is the recipient of Ramnath Goenka Award for best Hindi Journalist in 2007 for her story on manually-scavenging women. She is presently associated with News Click.



Mr. Sanyasi Behera is the first visually-impaired civil servant of the Odisha Administrative Services (OAS). He is currently the District Social Security Officer, Headquarters, in the Social Security & Empowerment of Persons with Disabilities Department (SSEPD) in Bhubaneswar. An articulate crusader for the rights of the most marginalized poor, visually challenged, leprosy-affected persons, he has contributed meaningfully to policy briefs, schemes and inclusion of PwDs in the mainstream.

The panel discussed and strengthened the perspective and understanding of social marginalization and the impact of COVID-19 on persons with disability, elderly, sanitation workers and homeless people, among others. The key questions deliberated upon during the panel discussions were as follows:

1. Is social exclusion and denial of all basic entitlements and services recognized as a key challenge?
2. Have the policies and programmes framed to bring about social inclusion helped empower the marginalized groups?
3. In the COVID-19 context, what are the urgent concerns that we need to address?
4. What measures does the government need to take post-COVID-19 to ensure empowerment of all marginal groups and their right to access services and secure essential care and support?

SETTING THE CONTEXT

In her opening remarks, Akhila Sivadas, Executive Director, CFAR, stated, *“I would like to welcome everyone and clarify the special purpose of this webinar. The primary focus of CFAR's work is the community and enabling them to voice and shape their issues. And since issues related to the community are complex, we work with partners who bring their specialisations and expertise to this work. However, in the context of COVID-19, working with communities in the same way as we did before is no longer possible. We have to change the way we work. While we cannot give up the issues we are working for, and in fact we need to accelerate the pace of work around these issues, at the same time we can no longer hold large community meetings and gatherings. Now, each one of us has to take ownership of the issues and processes that matter to us and make a difference. This requires shared perspective and understanding, and this webinar is the first step in this direction.”*



SALIENT POINTS

Sruti Mohapatra shared some of the critical concerns faced by PwDs during the pandemic. She said that PwDs neither had enough information on how this pandemic occurred, nor did they have the immunity to protect themselves against the virus, which made them both vulnerable and at-risk. In the COVID-19 response, PwDs are being left behind because of attitudinal, environmental and institutional barriers. Their issues are not factored in while planning the response. This is evident in initiatives such as 'Accessible India.' The government did not take into consideration the need for attitudinal changes. The lockdown was announced at a four-hour notice. There are PwDs who need attendant support for washing, bathing, changing clothes, etc. Many such people were without attendants and were forced to be in dirty clothes for more than 24 hours. Before planning any response, PwD issues have to be understood and planned for, she stressed.

Speaking about the concerns of PwDs, she informed that according to Census 2011, there are 21 million PwDs in India. Now with the Rights of Person with Disabilities Act recognizing over 21 groups as part of the spectrum of disabled, the numbers have trebled. Between six and seven million of them are in Odisha. Such large groups of people cannot be ignored, and especially in the context of COVID-19. It is very important to understand that people with different disabilities need different support as this is a heterogeneous population.

Drawing attention to the link between poverty, disability and vulnerability, she said that 20% of the poorest people in the world are those with disability. Disability leads to poverty, and poverty leads to vulnerability.

Finally, it is important to understand that PwDs are a high-risk group for three critical reasons: Firstly, PwDs are more susceptible to infections, and if they get an infection it is most often severe due to their existing co-morbidities. Hence, the chances of their fatality are very high. Secondly, PwDs are more susceptible because they need to touch things and cannot follow the norms of social distancing. Many are dependent on caregivers for their daily routine; and, finally, it is very difficult to explain to PwDs the new norms of behaviour as it takes many years of training and cannot be done over a short period of time.

Mathew Cherian, shared his insights on the plight of the elderly who have been impacted by the pandemic due to lack of money, food and caregiving support. Many are not able to receive remittances sent by their children. COVID-19 testing facilities for the elderly are minimal and many of those who suffer from ailments such as asthma require timely treatment and care. Our country has 53 million poor elderly persons who should be given pensions

though direct bank transfers. However, the pension of Rs. 200 is given only to 15 million people, while others are left to fight for their survival.

Underlying the concern was the feeling that the virus might not be eradicated for a long period of time. In this context, with restrictions on people above 65 for going out, everyone needs to think how support can be given for the basic survival needs of senior citizens.

As a step towards finding solutions, he stressed on the need to develop grain banks, Jan Aushadhi Kendras (generic drug-dispensing stores) and Ayush (Indian systems of medicine) clinics in villages and smaller districts, improving the infrastructure and service standards in government and public hospitals for providing timely care-giving.

Mr Cherian also shared the work HelpAge India was doing to support elderly by distributing personal protection equipment to strengthen prevention measures. However, he opined that there had been instances when social distancing had been used to discriminate against the elderly belonging to lower castes – this is an issue we all must seriously take cognizance of.

With weak sanitation facilities in villages and absence of proper health facilities for elderly, compounded by no work opportunities even under Mahatma Gandhi National Rural Employment Guarantee Act (MNREGA), exclusion from Right to Food, not many options were in sight to prevent elderly and senior citizens losing their lives due to starvation and disease. Therefore, an integrated approach was very critical to ensure that elderly people can lead a life of dignity and care, he said.

Bhasha Singh began her deliberation by stating that the “invisible people of India have become visible in the current situation.” After waiting for 40 to 50 days, the labourers and workers found that the promises of the Indian state to save them were not kept, and they decided to leave for their homes in large numbers. Once this happened, there were a spurt of negative reports about them as they were labelled as 'carriers of coronavirus'. This influenced the socio-political discourse in a big way. She said it was unfortunate that while the voluntary sector supported the affected people, politicians remained locked inside their homes and did not come up with any measures to support this group of workers. “If we listen to speeches of state representatives, in the announcements they made, there is no mention of migrant people. Even the opposition took a long time to come out. Coronavirus has exposed what an ugly, anti-poor, anti-women, anti-labour system we have,” she opined.

She went on to share about the plight of sanitation workers, and other groups of workers who were engaged in most at-risk work such as waste collection, rag-picking, drain desilting and desludging, who had been ignored and left unprotected in the pandemic. Sanitation workers in COVID-19 hospitals like the Lok Nayak Jai Prakash (LNJP) hospital worked without any protection. Fearing they would die, they demanded protection kits and even offered their resignations, yet they were not given the support they needed. Sanitation workers were also not given advance salaries or any other health care benefit during this time.

Drawing attention to systemic gaps, she urged the civil society to find ways to support these workers. Some of the steps, she suggested, which could be taken for this are: allocate work under MNREGA, contracts and health facilities, access to pension, subsidised food through the public distribution system (PDS) and right to food. Cash assistance of 10,000 rupees should be made available to these groups as early as possible so that they do not get disenchanted by the system and can continue to support the government and civil society in the different ways they can.

Indu Prakash Singh shared information about the work the Delhi government was doing as part of the COVID-19 response to support the urban poor and marginalised population and groups. He said in Delhi, the government had set up community kitchens in shelters, provided PDS rations, e-coupons for non-ration card holders and milk for children as the first level of support. The government's relief work was supplemented by many CSOs. However, this was not enough as the problem was humongous and there were other needs which could only be met with cash transfers.

He went on to share some of the challenges the Delhi government faced in this time as officials were hesitant in responding to the declarations issued by the government. Implementation on the ground was weak. The apathy with which the concerns of the migrants were handled gave rise to suffering with many people undertaking tough journeys, walking back home and losing their lives en route. This could have been averted if the transit was planned properly.

Lamenting the lockdown, he shared, “I hope something like is not done again – that a lockdown is not declared at a four-hour notice and people are unable to move. The government doesn't realise that without work people cannot earn, pay their rents. We need to address this gap.”

Sanyasi Behera strongly spoke of the critical gaps in a planned COVID response for persons living with disability. He prefaced his delivery by stating, “I will recite a quote from the Charak Samhita which says that we work for the welfare of others, not for our own good. We work not because of the profession we are in but because of our commitment to serve others.”

Speaking about the plight of PwDs, he said that the caregivers for PwDs are entitled to the same benefits as health workers. The Central government had developed guidelines for this and directed the state governments to devise state policies to implement this. However, this had not been done so far.

To do this, he suggested that Central and State Advisory Boards on Rights for Disabled People meet to deliberate and develop these guidelines further for implementation. Sharing information about the steps taken in Odisha for the benefit of marginalised groups, he spoke of advance pension for four

months given to widows, PwDs, construction workers, destitute women and ration for those who did not have ration cards.

Mr Behera said that COVID-19 circulars and guidelines should be converted into audio and braille formats so that PwDs could have access to them. All communication should be made comprehensible to PwDs. Under the Disaster Management Act, there is a provision that those who are at risk, such as PwDs and senior citizens, should be issued Relief Scheme cards. This should be implemented nationwide. Functional 24x7 helplines must be set up to offer them immediate support, he stated.

PwDs also need assistive devices and manufacturing, repair and maintenance support locally so that they can work efficiently. People using wheel chairs need these because even to go to the toilet they need a wheel chair. PwDs also need work in new sectors, including poultry, fishery and dairy-related products. PPEs should be given to therapy centres. He added that to ensure good health outcomes in the public health system, it was necessary to infuse adequate funds. “Dispensaries need not only doctors, but a proper delivery mechanism, and systems that make it work – particularly adequate funds. Without it, the right to life will not be possible,” he said.

OPEN DISCUSSION

In the discussion that followed, the panellists responded to the questions posed to them by the participants. Some specific concerns related to mainstreaming of rights of PwDs, doorstep delivery of services, livelihood and income generation opportunities and institutional care and support.

The panellists made suggestions as follows:

Sruti Mohapatra said that there was no special provision for doorstep delivery of services as a result of which PwDs were left out as they did not get services or their entitlements. It was important to include PwDs and experts while planning any response for COVID-19 so that it could be customised on the basis of their needs. She also recommended re opening of therapy centres.

Sanyasi Behera shared the lessons from Bhubaneswar and stated that the Single Window clearance camps were planned for door step delivery of services. Unique Disability ID (UDID) cards could be delivered at home but after registration it would take almost 8-12 months for the cards to reach the beneficiary, which means the service delivery would be stalled. He also spoke about Shamata Express providing doorstep therapy for PwDs. He informed that special homes had been set up recently in Bhubaneswar for destitute and homeless people where they were being provided counselling and clinical services, health care and food.

Speaking about the plight of leprosy-affected persons, Mr Behera said that there was a need to strengthen laws meant for them. Even though they were entitled for the Antyodaya (poorest of the poor) ration benefits, but they were not able to collect these. Despite the state being declared leprosy-free, there were 70 percent leprosy-affected persons who needed to be looked after.

He recommended setting up technical committees as set up in Odisha and other states for ensuring the right to life for such persons was honoured and operationalised.

Indu Prakash Singh added that to ensure that the government works in an inclusive manner for all marginalised groups, NGOs, CSOs and CBOs should regularly place communities' issues before the government and advocate for them.

Decentralization is vital to ensure that rights and entitlements of homeless persons are addressed. For this, livelihood centres and leprosy community rehabilitation models need to be set up. In a recent meeting with the Ministry of Social Justice and Empowerment (MoSJE), he said he (and other participants) had a discussion on decriminalising beggary, and turning beggar homes into livelihood centres. “It is time to reunite leprosy-affected persons with the community rather than keep them separate from others,” he urged.

RECOMMENDATIONS

Persons with Disability

Advocacy and Policy

Set up a coordination committee with representatives from the community at the national, state and district levels to look into the gaps at the policy levels for PwDs.

Livelihood and Financial Assistance

- a. Financial assistance for PwDs who have lost their livelihood should be made eligible for unemployment allowance.
- b. Simplify procedures for registration of workers to secure benefits of schemes and services announced as part of the emergency response.
- c. Provide ex-gratia cash transfer of Rs. 5,000 to all persons with disability above 18 years of age.

Health care Services

- a. Health care and medical aid through accessible CoVID-19 centres.
- b. Provision of doorstep consultations and medical requirement delivery for PwDs.
- c. Specific isolation wards for PwDs with a caregiver in every district.

- d. Institutional care for PwDs who are single parents or need support with small children.
- e. All persons responsible for handling emergency response services should be linked to specialized local organizations for PwDs with special needs.

Information and Helplines

- a. All information about COVID-19 services offered and precautions to be taken should be available in the local language and accessible formats.
- b. Sign language interpreters who are certified by the Rehabilitation Council of India to be allowed to interpret for PwDs.
- c. Special helplines (with video call facility and Indian sign language interpretation) which could then be held accountable.
- d. Special sessions on Community Radio, Doordarshan and AIR slots and phone-in programmes with dedicated government funding.

Elderly and Senior Citizens

Food Security

- a. Universalise National Food Security Act (NFSA) to provide ration for all, grain banks and emergency ration cards to be issued for ensuring food security.
- b. Cash grant scheme for financial security.

Health care

- a. Strengthen health services in district hospitals for COVID-19 testing.
- b. Setting up Jan Aushadhi Kendras (generic drug-dispensing stores).

Livelihood and Financial Support

- a. Dedicated work under MNREGA and access to short-term loans and credit facility.
- b. Helplines for elderly-1800 and 1801253 - to be made accessible from all villages in all states (currently it is operational in 23 states of India).
- c. Set up multi-purpose centres for the elderly, including day care centres, community radio, digital resource centre, agriculture extension centres and telemedicine centres.

FEEDBACK FROM COMMUNITY REPRESENTATIVES, BHUBANESWAR AND JAIPUR

Important to hear voices from the margins

Vijay Kanwar & Gora Devi, Community Management Committee (CMC) members, Transport Nagar, Jaipur

Sunita, CMC Member, RIICO Basti, Jaipur

Anam, Adolescent group, Shakti Colony, Jaipur

Sanju, CMC member, Brajlalpur, Jaipur

It is very important that issues of the vulnerable and most excluded sections are being discussed in such forums.

It will be useful to include lohars (ironsmiths and those who work with metals), Dalits (Scheduled Caste), ragpickers and single women in this discussion.

Sessions on persons with disability were an eye opener.

We never think about PwDs. We now understand how the pandemic is affecting their lives. It was a very engaging and interesting session.

Sunita, CMC member, Transport Nagar, Jaipur

We would like talk to people directly to understand their concerns.

There are so many people who are a part of the “*vanchit varg*” (excluded community). We want to speak to them directly to understand their priorities and plan how we support them.

Nafisa, Shakti Colony, Single Window Forum member, Jaipur

Planning with those who are most affected is critical for solutions

We need to talk to people in the *basti* (slum) to bring in more views, opinions, issues, challenges and solutions. On the basis of their responses, we can build on it and the work with these communities.

Gora Devi, CMC member, Transport Nagar, Jaipur

Need to discuss care and support for caregivers of PwDs

It was good to see so many people discussing together about such an important topic. We also wanted to hear more about the support other state governments are giving to PwDs.

Sushanti Behera, Self-help Group Member, Basti Bikas 2, Bhubaneswar

Need to hear about government support to persons with disability across states

We would also like to know more about the situation of PwDs in other states. At the time of the COVID-19 lockdown, when there is so much problem related to the livelihoods of people, we get worried thinking about the additional expenses incurred by the parents of PwDs. We would like to hear from the panellists, if there are any additional schemes for PwDs in other states.

Laxmipriya Lenka, Single Window Forum & MAS Members, Nirantikari Nagar, Bhubaneswar

It was good to see so many people discussing together about such an important topic. We also wanted to hear more about the support other state governments are giving to PwDs.

Sushanti Behera, Self-help Group Member, Basti Bikas 2, Bhubaneswar

I am attending the webinar for the first time and feeling really good that this topic is being discussed so seriously and so many people are thinking about the concerns of PwDs. But we will be more comfortable if this is done in Odiya language.

Jaya Patra, CMC member, Basti Bikas, Bhubaneswar

Sessions should be conducted in local language and in inclusive ways

The audio and video were not clear, so we missed out on some conversations. There was less time allotted to every group. It will be nice to focus on one group at a time.

Anam, Adolescent Group, Shakti Colony, Jaipur

Bibhusmita has hearing disability but she came with her mother. When asked how she liked the panel discussion, she communicated to her mother that it was nice to see so many people discussing together, but it would have been good if someone could have interpreted for her.

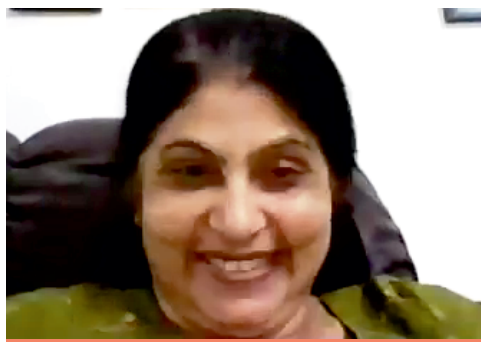
Bibhusmita Behera, PwD, Adolescent Group, Bhubaneswar

Panel 3: Can we contain the pandemic without safe and inclusive WASH?

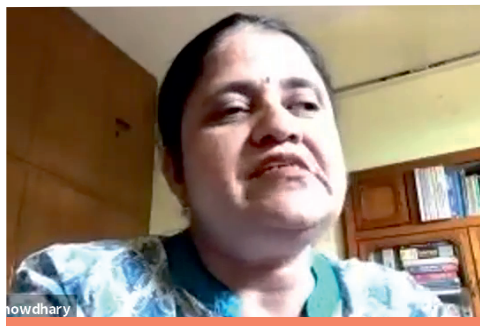
Date: Friday, May 29, 2020

Time: 10.30 to 12.30 hrs

Moderator: Juhi Jain, Programme Lead, WASH,
CFAR



PANELLISTS



Dr. Monika Chaudhary is Associate Professor at the Indian Institute of Health Management Research (IIHMR), a premier university in Jaipur. A degree holder in economics, finance, business administration and international trade, she has been involved in research in health economics, including water economics, water financing, hospital finance, integrated water resource management, monitoring and evaluation of health programs, health financing and health economics. She has worked closely with the government, funding agencies, NGOs and communities to promote and develop sustainable models in the health sector, which may contribute in the growth and development of the economy. Her forte is developing models of community-led low-cost water conservation and management systems in partnership with the government, community and civil society.



Shri A K Gupta is a retired Chemical Engineer and currently a Member Expert with the Delhi Urban Shelter Improvement Board, the nodal agency for slum re-development in Delhi. In this capacity he is responsible for safe and inclusive WASH for all residents in shelters and urban slums. To do this he plays a pivotal role in bringing government stakeholders, community and civil society together to develop, facilitate and implement community-led models, with a focus on gender-inclusive infrastructure. He is currently monitoring community toilets, night shelters, sewage and septage management, installation and management of sewer lines for DUSIB. More recently, he has supported the setting up of designated toilets for COVID-affected persons in the city.



Dr Kajri Mishra, is an alumna of Cornell University, and currently heads the Xavier Institute of Human Settlements, Bhubaneswar. Dr Mishra is also an Independent Director of WATCO (Water Corporation of Odisha), which is a not-for-profit company of the Government of Odisha, responsible for providing water supply and sewerage services. In this capacity, Dr Mishra plays an advisory role to ensure participatory planning and policy-making in the areas of water resource management, sewage and septage treatment from a gender and inclusion perspective. She has led several research studies on urban governance, gender and marginalization, gender equity to advocate for a policy framework on WASH with communities leading the process of change.



Elisa Patnaik Communication Lead, Ernst & Young, has played a key role in building technical capacities of community representatives on fecal sludge and septage management. Her support in strengthening the knowledge and involvement of the community in building safe containments and undertaking regular desludging has proved to be a game changer. Elisa has helped the community to advocate with the Bhubaneswar Municipal Corporation and OWSSB for involving Single Window Forum members in strengthening evidence, planning scheduled desludging at subsidized rates, preparing simple tools and IEC materials for spreading public awareness on the rights of sanitation workers.

The key questions deliberated upon during the panel discussions were as follows:

1. Can we contain the pandemic without ensuring safe and inclusive WASH?
2. Is there a danger of the pandemic being perceived only as a health emergency?
3. How do we address critical gaps in WASH services for the urban poor?
4. How will COVID-19 impact the social development priorities of the government and society?
5. Will WASH feature in the priorities set by the government? If so, how, and if not, what are the challenges?
6. Are specific strategies needed to ensure access to equitable and safe WASH services?
7. If safe hygiene practices have to be sustained, how can these be shaped and sustained, and who will be the critical changemakers?

SETTING THE CONTEXT

Welcoming the participants, Akhila Sivadas, Executive Director, CFAR said, “I would like to preface the panel with a few critical questions on what we aim to deliberate on today and also share the objectives for this webinar. CFAR essentially works with the urban poor community and everything – from our day-to-day planning, listening, any course correction and implementation – is done consultatively with the community. Due to COVID-19, this process has slowed down although we are in touch on a daily basis with the community on different accounts such as relief distribution, understanding the needs women and men are facing, enabling community to provide care and support to groups that need it, and so on. But we do realize that we have to change the way we work, foster new ways of facilitating and mobilizing the community and use more digital technology and to build a relationship between the community, government and partners and so we have organized three panels over two days to discuss the way forward.”



Introducing the panellists, Juhi Jain, Moderator, extended a special welcome to WFW-DFAT partners from Australia; faculty and students from the School of Community Medicine; Jawaharlal Nehru University, Delhi; IIHMR and Institute of Development Studies, Jaipur.

SALIENT POINTS

Kajri Mishra began her presentation by explaining how the issue of WASH has been transformed post-COVID. She emphasised that WASH is an issue of public service and public health, hence it is imperative that as the first step the state takes responsibility for provisioning of all basic sanitation services. Secondly, while health is a priority in the context of the pandemic, WASH cannot be ignored and it needs to be made a central part of the COVID-19 response. This requires the government to create systemic response to the issue so that the entire system gears up and responds to the crisis. It is not viable to take recourse to a Mission Mode, because in this the system does not take ownership and the responsibility falls on people. On the issue of WASH, a sectoral plan will not work, we need convergence of all related systems so that the benefits reach everyone.

She went on to say that the government does not have an integrated approach on WASH. For protection from COVID-19, handwashing is required which has a direct connection with health. However, a large proportion of Indians do not have adequate water for frequent handwashing. Therefore, the response on COVID-19 should bring the spotlight on WASH as a priority for all. And while doing this, we should also focus on the issues of on 'spatial' inequality and spatial poverty so that we can ensure and plan an essential and non-negotiable WASH agenda for all segments, she urged.

On the question of how safe hygiene practices can be promoted, Dr. Mishra said that the focus should be on public WASH facilities running water and waste management. Along with this, sanitation workers should be looked after and provided health and other social protection benefits. COVID-19 has brought back the attention on the need to strengthen WASH as a public health issue. Our collective advocacy should be focused on this, she concluded.

Ashok Gupta spoke about the plight of migrants among the urban poor and underlined three major concerns. The first major is that migrant workers in the informal sector comprise 80% of the total informal sector workforce. They are street vendors, domestic workers, car-cleaners, daily wage labour who are not tax-payers but give a boost to the economy. Since the national lockdown, this group been experienced dwindling incomes, unemployment, no access to food and means of survival. Many of them decided to return to their homes. But we all know that there is no work in villages. The government is talking about making them self-reliant, but how this will happen and how we will support the migrants are concerns that the government must respond to and plan for.

The second problem is the absence of cash in hand. Most migrants often live in rented accommodation and do not have cash in hand or work. At the same time, they need to pay rent to their landlords. To mitigate the suffering this was causing to workers, the Delhi government set up community kitchens and opened night shelters for them to stay. But without any cash in hand to survive in the city is difficult for them and they decided to travel back to their villages which were thousands of miles away. With negligible transport options available to them, many of them took to walking and other comparable options, and as a result had to suffer extreme hardship before they could reach their homes.

Lastly, but also very importantly, is the slum context of Delhi. There are 777 slum settlements in the city with over 30,000 residents. DUSIB provides toilets, pavements, drains, community halls, water and upgrades other facilities so that those living in the slums can have access to basic services. Around 627 toilet complexes with more than 22,000 WC seats have been provided in these slums. DUSIB has made special provisions for COVID-19 patients, children and disabled persons in these complexes. The elderly and transgender persons are also demanding reserved/special seats in these toilet complexes, on which a discussion is going on. A decision will be taken soon DUSIB will begin implementation. The agency managed 80 night shelters and 15 porta cabin shelters where homeless and destitute persons can stay. Additionally, in winter tents are put up to accommodate more people.

To address these three concerns, he suggested the following three steps: One, develop a database on people from the unorganized sector, workers, people with vulnerabilities, transgender persons, elderly, women and migrants to aid proper planning. Two, the government must provide employment and work opportunities to migrants who have already reached their villages. Three, in addition to offering loan facilities, set up cooperatives and shops selling every day products and other items on a minimum guaranteed price so that they can earn and the economy does not come to a standstill.

Monica Chaudhary focused on the functional challenges related to water, sanitation and hygiene faced by the urban poor living in slums. She went on to say that the pandemic has highlighted the worst human tragedy and brought to the fore the deplorable conditions in which poor live. Despite democracy working at many levels there is a problem as the community does not have a say in decision-making while those in authority do not have any idea about the situation on the ground, the needs of people and their priorities. The present crisis reflects this basic inequity and inequality in our system.

She stressed the point that one-third of the entire population of our country comprises informal workers. The present crisis, compounded by loss of livelihood and access to resources being experienced by migrant workers, cannot be addressed without proper local planning and a bottom-up approach. We do not give migrant workers the due status that they are entitled to. They should be registered so that they can benefit from all the social welfare schemes and programmes, she said.

Dr Chaudhary pointed out the example of Rajasthan where water is a very scarce resource. When water was managed locally, people owned resources and managed them. Now, the government has taken over the managing of water resources and people do not have the freedom and ownership, which is why they have distanced themselves from the issue and their solutions. Therefore, it is very important that people's participation is enhanced at the local level whether in villages or in cities. We can build a better system in the future with people's participation and involvement, she said.

WASH and poverty are interrelated issues. A good housing solution can solve water and other problems. For a comprehensive solution, many variables will need to be worked on. However, to begin with, a bottom-up approach will be needed, especially on a subject like water. We need to be training people so that they understand water and rainfall pattern in their areas and can participate. Statistically, 90 per cent of the people have drinking water, but there are many problems at the community level. The people's problems have to be documented and used to generate wider discussions and deliberation with policymakers.

The other important thing is data. Unique identification (UID) should be linked to how people live and their access to basic income, essential services, healthcare, sanitation and other important aspects of their lives. Without data, no policy change can happen since evidence is a very important tool to inform policy decisions. All intellectual rights to data should be with the community and used with their permission. Collecting, owning and analysing data and letting communities manage their own development will be a great model to work towards in the future for a sustainable WASH.

Elisa Patnaik shared her experience of working on both urban and rural issues and stated that rural local administration was far ahead of urban local administration. Local planning had been started in rural areas, and was needed in urban areas too. She said when people migrated from rural areas, their names were recorded at their native places in rural areas, but not when they when they reached urban areas. "In urban areas, they are known as unorganized sector workers, and their settlements are regarded as illegal," she said, describing their lives and their plight.

Sharing about her role as a part of the Technical Support Unit (TSU) on fecal sludge management supporting the Government of Odisha, she said that 80 per cent of diseases were a result of unsafe water and sanitation. In times of COVID-19, there was glaring inequality in the distribution of water and sanitation services. The poor were finding it difficult to wash hands regularly with soap and water and maintain social distancing, while vulnerable communities such as PwDs, transgender persons and elderly had been dealt a double blow with inadequate WASH services.

She emphasized the need to identify the priority areas in order to find solutions. She also stressed the need to link water and sanitation to larger issues, like food security, livelihood and housing rights. While this would be the first step, the second step would be to have community-led solutions. The gap should be identified and taken up with local and national authorities. The approach should be multi-sectoral with all stakeholders, including private sector, brought on one common platform to plan and implement these solutions. It

was important to ensure that the existing services, such as maintenance of toilets, supply of water and waste collection, were not affected during the lockdown.

Finally, she discussed the plight of the sanitation workers who were at the forefront of the COVID-19 response everywhere, including Odisha. The state government had provided them with PPE kits, while and salaries were given on time. “However, this is not enough. Much more needs to be done to keep these workers safe, motivated and secure. Odisha being a disaster-prone region, climate threat and diseases are frequent. COVID-19 has come like a wake-up call for all. We need to take cognizance of the plight of elderly, migrant persons, those with disability and other vulnerable community and groups. WASH programming should be based on a human rights approach and be development-centered to include the voices on those who are on the margins,” she said.

OPEN DISCUSSION

In the discussion that followed, the panelists responded to the questions posed to them. Some specific concerns related to the rights of sanitary workers and the need to ensure their protection and safety, WASH for migrant and destitute population groups, CSR funding for improved WASH services in partnership with community forums, digital connect of community leadership with top decision-makers, strengthening advocacy to make COVID-19 response community-centric and ensuring data privacy/data protection on various platforms.

The panellists made the following suggestions:

Kajri Mishra emphasized changing the contractual arrangements of sanitary workers as the first and foremost step. It would require systematic advocacy. At the level of municipal administration, she said it was important to develop adequate facilities for sanitation workers where they could maintain their hygiene and clean themselves during duty hours. To take the issue of water and sanitation forward, technological options should be scaled up, especially in sectors such as water harvesting, recycling, replenishing and revitalizing traditional water storage structures. These should be integrated in city sanitation plans. Implementation of the Green-Blue plan was necessary to ensure there is no water shortage while fecal waste and sewage should be managed, and not dumped in clean water bodies. There was no water shortage in most places as much of the scarcity was man-made. Working towards community-level management of water and sanitation was important in addressing the issue of water shortage, she stressed.

On the issue of data processing, she opined that the concern whether the data is private or not is a debatable point. Public health-related data does have privacy concerns but given the fact that it is in public interest, it should be made public so that the data can be used to build policies to address the gaps. To put it more precisely she said, if any data has a bearing on public health or influences its consequences, it cannot be treated as private data.

Finally, behavior change does not come overnight. It has to be changed substantially, and the change has to be monitored to ensure that it is sustained.

Monica Chaudhary emphasized that sanitation workers were not corona warriors but were professionals who were doing their duty in times of need and for whom we should generate dignity and respect without glorifying them. She said children are changemakers in every society, and by working with the children of sanitation workers – who would advocate for the need for self-protection and use of safety gears with their parents. With regard to data, she said there were many ways of keeping data protected. “But it should be made public and shared for fast-tracking and improving services. Data has to be used but with caution,” she said.

AK Gupta affirmed that the government should hire its own team of sanitary workers. It is because the government is outsourcing the hiring of labour to contractors that the nexus of exploitation, unsafe work and low wages begins to take root. Sanitation workers will continue to be exploited until the government regularizes their services and brings them on its payrolls.

Elisa Patnaik stated that post-COVID there had been a lot of directives on sanitation workers being given PPE during their work, but the availability of safety gear and procurement were critical issues which the government needed to streamline. It was also important to ensure that workers were trained to use this equipment with constant follow up till it became a part of their daily practice. Health insurance was also necessary for sanitation workers. Their services should be acknowledged by Urban Local Bodies (ULBs) and they should be given dignity, respect and regular service conditions, she said.

RECOMMENDATIONS

- Communicate to municipal authorities the challenges faced by the urban poor on WASH-related issues and advocate for their inclusion as part of the COVID-19 response,
- Highlight the right to protection for sanitary workers-make PPE kits mandatory and orient the workers on using them.
- Give health insurance and job security to sanitary workers.
- Prepare a database of workers across states so that coordinated planning can be done to support them.
- Skilling of migrant workers wherever they are.
- Strengthen entrepreneurial skills and support in marketing their products and services.

- Facilitate National Urban Livelihood Mission (NULM) to include and promote sanitation-linked livelihoods
- Funding under Corporate Social Responsibility (CSR) for sanitation-linked enterprise in the PPP model should be encouraged.
- Skill building can be done by a private sector partners and they can also help to market products.
- City-wide sanitation planning should be considered and this means planning for all sections of society.
- Focus on building resilient sanitation infrastructure, and services such as household toilets that can withstand disasters, are necessary.
- Proper management of solid and liquid waste to enhance quality of water and reduce water-borne diseases should be pursued at a daily level

FEEDBACK FROM COMMUNITY REPRESENTATIVES, BHUBANESWAR AND JAIPUR

It is great to hear people talking about community concerns

It was good to hear the panellists speak in Hindi. The sessions were interesting and we felt someone was acknowledging what the community faces every day.

Aslam Khan, Organizing Committee Members, Sundar Nagar, Jaipur

I have never been part of such interactions and meetings. Thanks to CFAR for creating a platform to discuss community concerns at the national level

Some solutions can be implemented over a period of time.

Rafiq Khan, Organizing Committee Members, Sundar Nagar, Jaipur

The panellists have covered almost all the key issues, challenges and possible solutions. I feel some solutions such as regularizing the contract workers will take more time and need more work.

Virender Sahu, Slum Development Committee, Brajlalpur, Jaipur

We have to pay attention to what we can implement in our city and in our *basti*. We have to share what we learn with many more people. We also want answers to some more questions.

Anil, Brajlalpur, Jaipur

We need in-depth understanding of some issues

What immediate actions can be taken to build the confidence, and trust in the community and work on WASH issues? This is something we should discuss also and some in-depth understanding on strategies to be followed will help us.

Nafisa, Community Management Committee, Shakti Colony Jaipur

Questions related to WASH services for migrants who are traveling back home should be discussed in detail in another seminar
We would like to interact with the panellists.

Sunita, Community Management Committee, Transport Nagar Jaipur

We would also like to talk to the panellists directly to share our concerns and dialogue on them.

Gora Devi, CMC Member, Transport Nagar, Jaipur

What immediate actions can be taken to build the confidence, and trust in the community and work on WASH issues? This is something we should discuss also and some in-depth understanding on strategies to be followed will help us.

Nafisa, Community Management Committee, Shakti Colony Jaipur

We were able to understand and connect with what was being said at this session

Everyone communicated simply. The moderator was able to connect the participants to the session. We did not feel left out.

Language used was simple, understandable and interactive

We would like to tell stories about our community.

Anil, Virender Sahu, Aslam Khan, Rafiq Khan, Organizing Committee Member, Sundar Nagar, Anam, Adolescent group, Shakti Colony, Gora Devi, Community Management member, Transport Nagar, Nafisa, Shakti Colony, Single Window Forum member, Jaipur



We are very happy to be part of the session. There were some issues with language but it was interesting. Next time, we would also like to tell our stories from our community.

Sabitri Parida, Single Window Forum Member, Pichupadia, Bhubaneswar

The topic was good and it will be better if there can be a community-level representative to discuss the problems faced at the grassroots level.

Discussions on such issues are much needed.

Kuntala Pradhan, Self -help Group Member, Bhubaneswar

I am happy that the panellists were discussing our day to day issues At this time of crisis, when we all are struggling, such discussions are very much needed.

We should also discuss solutions and the next steps.

Probhati Dakua, Self-help Group, Bhubaneswar

We have been talking about hand-washing and other hygiene practices, but the use of water is more during summer season. There needs to be more discussion on the solutions for these problems by the panellists.

Jyoshna Datta, Community Management Committee, Sabar Sahi, Bhubaneswar

We would like to know some immediate solutions because community is suffering in many ways due to the pandemic, exclusion, rising heat and no work.

Sessions should be conducted in local language and in inclusive ways.

Rafiq Khan, Sundar Nagar, Organizing Committee Member, Jaipur

The meeting was good but it will be better if it can be done in Odiya language as it will be easier for us to understand. More interactions can help us discuss about our concerns, problems in the community and also help in getting solutions.

We would like to learn about WASH services in other states

Mirambika Nayak, Community Management Committee, Durgamandap, Bhubaneswar

It will be nice if we can get more information about the WASH facilities in other *bastis* in different states. This will help us understand the situation throughout the country during this pandemic.

Muna Pradhan, Community Management Committee, Durgamandap

