

KERALA'S GENDERED RESPONSE TO THE PANDEMIC

Usha V.T.



A POLICY PAPER BY

Focus on the Global South

IN COLLABORATION WITH

Rosa Luxemburg Stiftung – South Asia

February 2021

Kerala's Gendered Response to the Pandemic

Author: Usha V.T.

Former Professor and Head, Centre for Women's Studies, Pondicherry University. Currently an independent researcher residing in Trivandrum. She is the author of *Re/Cognising Women's Studies* (2011) and *Figuring the Female* (2006)

Design: Vikas Thakur

Cover Image courtesy: TheEconomicsTimes.com

Images (Inside Pages): Google Commons Images

Published by:

Focus on the Global South with support from the Rosa Luxemburg Stiftung – South Asia office.

The publication is sponsored by the Rosa Luxemburg Stiftung with funds of the Federal Ministry for Economic Cooperation and Development of the Federal Republic of Germany. This publication or parts of it can be used by others for free as long as they provide a proper reference to the original publication)

The content of the publication is the sole responsibility of the partner and does not necessarily reflect a position of RLS

February 2021

**FOCUS
ON THE
GLOBAL
SOUTH**

**ROSA
LUXEMBURG
STIFTUNG
SOUTH ASIA**



Abstract

In terms of disaster preparedness and response to the onset of the COVID-19 pandemic in India, Kerala had a different story to tell from the rest of the country. The Kerala model included community action supporting state policy initiatives to achieve a humane, people-centric response to the demands of the COVID-19 situation. Herein the women's collectives and front-line workers became the agents of action in maintaining the required medical protocol and poverty alleviation measures. Based on the management of the pandemic during the first few months of its inception, the paper gives us a significant insight into the disaster-management strategy, where the significant role played by women helped prevent a major public health disaster in a state with a high density of population.

KeyWords

Pandemic, Gendered Response, Women's Agency, Collective Farming, Kudumbashree, Local Level Governance, Community Action, disaster preparedness, Women in Kerala.

Although natural calamities affect all humans alike, it is seen that they impact persons belonging to different genders differently. “The impact of disasters is felt differentially within societies, and those most socially excluded and economically insecure bear a disproportionate burden.”¹ Quite often, women as one of the most vulnerable sections of society, are the persons worst affected by such calamities. The COVID-19 pandemic situation was no different and Kerala society is no exception. But what makes Kerala unique is the manner in which the state and its people took control of the situation to mitigate the ensuing damage, flattening the curve initially and later working toward minimizing the losses. As we move into the second year of the pandemic, a close look at the strategies evolved by the state and the subsequent development in terms of natural disaster management could provide interesting insights. The strategy, which required strict adherence to the prescribed norms, such as use of masks, maintaining a distance between people and regular sanitization, was not strictly adhered to by the public once the norms were slightly relaxed. This led to an increase in the numbers of patients and community spread of the disease, according to Dr Amar Fettle the State Nodal officer for COVID-19. This was pointed out in a conversation between this author and the concerned officer, and this information was also brought out as part of a public statement.² However, this did not result in the collapse of the health services as it did in many other states and the medical services were able to provide treatment to all through their systematic approach. The social services, in turn, helped to make the management of the pandemic possible in a humane and sensitive manner. And, women clearly had a critical role to play in this process as they became agents of change.³

Kerala attained much public attention for its handling of the COVID-19 situation. It was the first Indian state to identify, isolate and treat a COVID-19 patient (in January 2020). Though a small state in terms of geographical area, Kerala is very densely populated with an estimated population of over 35 million, and therefore the risk of the rapid spread of the disease was enormous. Nevertheless, contrary to apprehensions, the state’s health services and health care systems were well prepared for the outbreak and swung into quick and effective action. Actively engaging the community has been a notable feature of Kerala’s response plan. Further, an important facet of Kerala’s pandemic strategy has been that during the early part of India’s national lockdown that began in March 2020, the poor and vulnerable sections of the state’s population were not subject to a ‘crisis of existence’—in significant contrast to the rest of the country. The supportive actions of the state ensured that Kerala’s COVID-19 response avoided pitting poor lives against rich lives; rather, Kerala’s public actions attempted to save all lives and livelihoods.⁴

BACKGROUND

Kerala is often compared to developed nations in terms of some of the human development indicators, such as literacy rate, life expectancy, infant mortality, access to drinking water and sanitation facilities and lowest numbers of population below the poverty line. Besides these, historical factors including a long legacy of social reforms and peasant movements around land reforms and wages, which included the active involvement of women, the existence of matrilineal social systems, and a literate population made it possible for strong community engagement during the pandemic. Active surveillance, setting up of district control rooms for monitoring, capacity-building of frontline health workers, risk communication and community involvement and addressing the psycho-social needs of the vulnerable population are some of the key strategic interventions implemented by the state government

	Kerala	India
Life Expectancy (years) [2015 data]	75.2	69
Infant Mortality (per 1000 live births) [2018]	7	32
Maternal Mortality rate (per 10,000 births) [2015]	46	130
Overall Adult Literacy (% of population) [2016]	94.57	73.2
Female Literacy (% of female population) [2016]	92.52	64.6
Sex Ratio (females per 1000 males) [2011]	1084	940
Public Hospital Beds (per 10,000 people) [2016]	11.9	5.5

Source: J. Jalan, A. Sen (2020). "Containing a pandemic with public actions and public trust: the Kerala story". Indian Economic Review

DISASTER MANAGEMENT PLAN

Having already battled natural disasters like the Nipah virus in May 2018 and the floods in August 2018 and 2019, Kerala had developed a viable disaster response strategy, wherein crucial emergency services were already identified and human resources listed and mapped. The state's comprehensive disaster-management plan combined state policy with participatory ways of response and public action for well-being, in which the role of women was critical.

It was interestingly a woman who gave the leadership to the team. Kerala's Minister for Health, Social Justice and Women and Child Development K.K Shylaja, fondly known as "Shylaja teacher", was strongly backed by the Chief Minister Pinarayi Vijayan and the state machinery. The Health Services of Kerala (both state owned as well as private), which is identified as one of the best in South Asia, was mobilised quickly. The doctors and nurses were ably supported by an army of health workers, mostly women, including ASHA (Accredited Social Health Activist) workers,⁵ Kudumbashree workers, Anganwadi workers, a large number of volunteers and sanitation workers.⁶ A large part of these front line workers were women. Unlike many other states where women were seen as vulnerable and dependent, women's agency was visible here as helpers and care givers, who not only connected the state machinery with the people and developed an atmosphere of trust between the government and the public but also took on multiple roles as frontline workers depending on their varying capabilities. It was the women workers of Kudumbashree units,⁷ the ASHA workers, the Anganwadi workers and other frontline workers who toiled hard, often with very little remuneration, to create the right environment and the communication link between the medical personnel and government machinery with the community.



DECENTRALISED GOVERNMENT

All this was not achieved in a day. As far back as 1996, Kerala adopted the People's Plan Campaign (PPC) for decentralisation of government. Thereafter, the state transferred the management of all health institutions, except a few specialized hospitals, to Local Self Governments (LSGs) and allotted 35 per cent to 40 per cent of its health budget for the purpose. The public healthcare system consisted of 4,575 sub-centres that serve the population at the ward-level and 809 Primary Health Centres (PHC) that serve a village.⁸ This enabled decision making from both the state as well as the community.

When COVID-19 struck, the government constituted COVID-19 cells in all departments. The LSGs were assigned a large number of roles and responsibilities, which included running awareness programmes, conducting sanitation drives and outreach to the persons in quarantine, collection and distribution of essential materials, providing volunteers and medical supplies, and giving special attention to the vulnerable, the senior citizens, those with co-morbidities, the physically or mentally challenged persons and so on.

Local issues were addressed at the ward level. Various committees such as "working groups on health" consisting of community members, representatives from Kudumbashree⁹ (the world's largest women's community-based organisation), multipurpose health workers, elected representatives, ASHA workers and experts discussed and planned projects depending on the community's needs.



KUDUMBASHREE

Kudumbashree, which literally means family prosperity, was a programme set up in 1998 as the State Poverty Eradication Mission of Kerala for poverty eradication through socio-economic development and women's empowerment. It has developed into a network of community organizations of women with a state-wide base which worked in partnership with LSGs. In each LSG Unit, whether rural Gram Panchayat or Urban Local Body, Kudumbashree scheme has a federal structure with three tiers, comprising of Neighbourhood Group (NHG), Area Development Society (ADS) and Community Development Society (CDS). Through Kudumbashree, women as groups were encouraged to take up collective farming using microcredit and making use of fallow lands in their localities to cultivate food crops of their choice. The programme included 60 per cent of women from households in Kerala, especially those in the lower income group. Membership was open to all women in the communities but restricted to one woman per family. The programme was able to bring together farm workers who had lost their livelihoods and women from other vulnerable sections to act collectively to empower themselves and earn a livelihood.

The programme attempted not only to create awareness among women but also sensitize the community. Though the state had a high literate population with a good male-female ratio (1084-1000 according to 2011 Census report), it tended to be slack

in terms of gender justice and women's empowerment. Kudumbashree worked to eradicate poverty and inequality, promote women's participation in decision making, and prevent their exploitation so that sustainable development could be effective. With the help of gender resource persons, community counsellors, gender resource centres and adequately trained personnel, the programmes aimed to focus on creating women-friendly NHG areas and living situations to ensure women empowerment and gender justice. By studying their situation and analysing their issues, the state helped them achieve self-sufficiency by providing resources, equipment, facilitating loans, enabling leasing of fallow land, guidance and training.



Gender Resource Centres

No	Districts	No of Gender Resource Centre Started	No of Block level Community Counselling centre Started	No of Activities/Initiatives conducted as part of GRC	No of Participants involved	No of convergent Programmes conducted in GRC	No of participants involved	No of Activities/initiatives conducted as part of BLCCC	No of participants involved
1	Thiruvananthapuram	10	10	67	2709	68	2849	1	56
2	Kollam	7	14	28	214	143	324	1	75
3	Pathanamthitta	8	12	8	628	25	1403	2	152
4	Alappuzha	6	12	13	800	6	425	2	336
5	Kottayam	10	13	13	647	20	772	4	326
6	Idukki	2	2	8	85	2	56	0	0
7	Ernakulam	79	30	187	6840	49	1650	28	1502
8	Thrissur	10	13	38	702	50	744	41	1451
9	Palakkad	10	13	13	495	4	318	5	0
10	Malappuram	5	3	16	744	12	345	2	140
11	Kozhikode	3	5	8	1184	8	130	5	134
12	Wayanad	6	5	60	1200	7	7	25	982
13	Kannur	5	1	5	362	1	114	0	0
14	Kasaragod	4	4	0	0	0	0	0	0
	Total	165	137	464	16610	395	9137	116	5154

Source: <https://www.kudumbashree.org/monitor-progress/233/533>



“BREAK THE CHAIN” CAMPAIGN

When the pandemic broke out, Kudumbashree with its women workforce became one of the major organisations for the Kerala State to obtain human resources for its “Break the Chain” campaign, which was put into operation on 16 March 2020, even before the All India lockdown was announced.¹⁰ This campaign aimed to sensitise the public about the mandatory need for maintaining personal hygiene, distancing and the use of masks to help prevent the spread of the virus. Kudumbashree conducted IEC (Information and Education Communication) campaigns through activities like posters, SMS messages to CDS (Community Development Society) members, verbal and social media communications and so on. It also formed 190,000 WhatsApp groups comprising of 22 lakh NHG members for the purpose.¹¹

Sl. No.	Name of district	CDS level			ADS level			NHG level			
		No. of CDS	No. of CDS group	Total Members	No. of ADS	No. of ADS group	Total Members	Total NHGs	Total NHG members	No. of NHG Group	Total Members in WG
1	Thiruvananthapuram	83	117	11084	1546	1375	85025	30452	476743	16628	116396
2	Kollam	74	148	19887	1420	1419	112308	24377	365103	12317	130436
3	Pathanamthitta	58	58	6588	920	920	46000	11163	180458	7032	105472
4	Alappuzha	79	100	6744	1384	1128	77725	21935	341304	8839	176776
5	Kottayam	78	78	1460	1339	1339	24000	16228	231859	15777	230000
6	Idukki	54	54	5054	861	637	12814	12142	164323	2014	20510
7	Ernakulam	101	303	14953	1833	1813	181237	26256	394749	18265	255710
8	Thrissur	100	159	9623	1794	1789	62240	26502	409939	18420	276320
9	Palakkad	96	143	7807	1730	1551	60422	25088	354977	10562	120804
10	Malappuram	110	110	12447	2257	2113	112391	28899	478338	22098	239624
11	Kozhikode	82	82	9560	1566	1544	111004	28706	454656	18754	291874
12	Waynad	26	28	3960	512	512	44448	11534	129008	6873	84364
13	Kannur	81	98	31200	1545	1514	104000	20168	331713	9464	123032
14	Kasaragod	42	42	4885	777	776	59624	11204	178664	7546	82246
	Total	1064	1520	1,45,252	19,484	18,430	10,93,238	2,94,654	44,91,834	1,74,589	22,53,564

Source: <https://www.kudumbashree.org/pages/852>

COVID VOLUNTEERS “SANNADASENA”

Consequently, nearly 4250 Kudumbashree women workers enlisted as volunteers on an average week.¹² During the lockdown, these volunteers worked to help out the 1,54,858 destitute families in the state, including 1,44,339 senior citizens, by contacting them on phone once every five days.¹³ Kudumbashree also provided the much needed counselling and mental support through 360 Community Counsellors. This measure helped to counteract the various mental issues faced by people during the pandemic, especially the anxiety stress triggered by the lockdown. This activity aimed to help the destitute, the aged and children and was coordinated meticulously from a cell operated at the District Collectorate.¹⁴

PROMOTING ENTREPRENEURSHIP

The state government promoted entrepreneurship and financial independence during the pandemic by providing interest-free loans without collateral as per demand to members of NHGs as part of the Chief Minister's Sahayastham (Helping Hands) loan scheme. The interest-free loan, available to all women belonging to the registered neighbourhood groups, was meant to assist those who lost their livelihood due to the lockdown. The loans have a moratorium of three years and the debtors do not have to start repayment for a period of 6 months thereby enabling them to start rebuilding.

COVID-19 RELIEF MEASURES

Food grains were provided to all with no discrimination along with a one-month extension for the payment of electricity and water bills. Tax relief was declared for auto-rickshaws, taxis and buses. Food kits and loans were provided to members of the transgendered community. An INR 20,00 000 special package was announced to help people tide over the economic crisis wrought by the pandemic. Financial assistance was also provided to fisher-folk, artists, lottery sellers and others who lost their livelihood.

The link with the national MGNREGA (Mahatma Gandhi National Rural Employment Guarantee Act) scheme and the local AUEGS (Ayyankali Urban Employment) schemes¹⁵ also helped people get subsistence jobs that could help them survive the pandemic.



CHILD WELFARE

During the pandemic, the educational well-being of the children was prioritised and addressed by the state by launching an online educational programme. Teaching sessions based on the curriculum were also telecast through a dedicated channel and social media platforms by Kerala Infrastructure and Technology for Education (KITE), a government agency, so that their educational needs would not be neglected. The Kerala State Financial Enterprises (KSFE) also initiated the KSFE Vidyashree Scheme, which provided microcredit to help Kudumbashree members facilitate the purchase of laptops and internet facilities for the education of school and college going children, as all education went online.

For infants, the Integrated Child Development Services (ICDS) already had a scheme which provided Supplementary Nutrition for children in the age group of 6 months to 3 years in the form of Take Home Ration (THR). During the lockdown, Kudumbashree at the request of the Women and Child Department, assisted in the manufacture and supply of Amrutham Nutrimix powder (fortified health supplement). The cost of production was fully sponsored by the state government and distribution organised through the anganwadis, so that the nutritional needs of these small children were addressed.¹⁶

Kudumbashree also helped to relay instructions between teachers and the parents of the 8521 special children studying in 270 BUDS Schools (schools for mentally challenged children owned by the Local Self Governments) on how to keep their special children engaged during the lockdown.¹⁷ There were Balasabhas (children's collectives), wherein various online competitions like reading competition, special campaigns like the Akam Puram Nannayi and so on were conducted by the District Missions of Kudumbashree.

DOMESTIC VIOLENCE DURING THE PANDEMIC

During the lockdown many countries reported an increase in cases of domestic violence and child abuse as the victim of violence was often locked in with the abuser(s). In contrast, there was only a minimal increase in domestic violence in Kerala during the lockdown. The study conducted by the Gender advisor to the government in April 2020 for the WCD, based on data from the police stations and women helplines such as Mitra,¹⁸ Bhoomika,¹⁹ and Sakhi²⁰ suggests an increase in cases of domestic violence, compared to the previous year. According to the data collected from the 181 Mitra helplines run by the Kerala State Women's Development Corporation, the reported numbers were not too different from the previous months. The study on domestic violence conducted by KILA (Kerala Institute of Local Administration) also points in the same direction, and suggests that the lack of availability of alcohol due to the shutting down of liquor shops, the effective work of women facilitators and social workers in counselling families and the watchfulness of the Jagratha Samithis²¹ could have helped control the rise of domestic violence cases within the community.²² Chief Minister Pinarayi Vijayan in his speech warned people about strict action against perpetrators of domestic violence and encouraged women to report mental, physical, sexual and social violence. Posters printed and distributed by Kerala State Women's Development Corporation, provided information about whom to call, explained the various forms of domestic violence and the punishment under the Domestic Violence law. Bhoomika, the state health helpline was included among the essential services. The government also set up 28 fast track special courts in all 14 districts for speedy trial of rape and POCSO (Protection of Children from Sexual Offences Act) cases.²³



CARE OF MIGRANT WORKERS

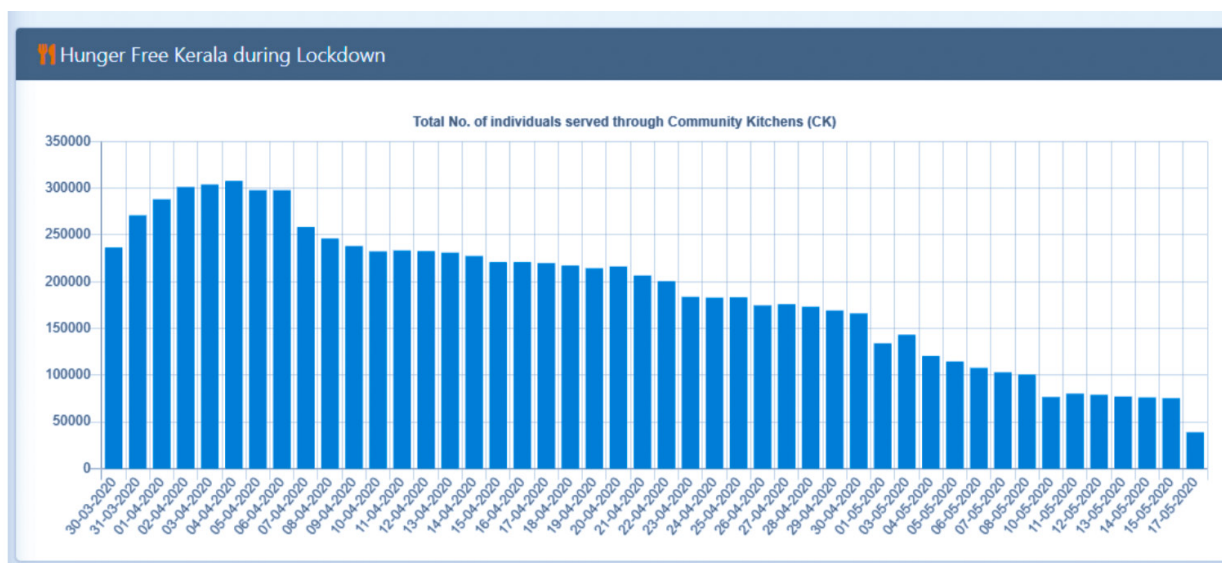
In a similar manner, the migrant workers, referred to as guest workers, were also taken care of by the state mechanisms. Unlike many other states where migrant workers and vulnerable sections of the population had to suffer undue hardship and starvation, Kerala devised a sensitive and humane approach towards them. More than 350,000 guest workers, as they were referred to, in 19,764 camps in Kerala were given adequate drinking water, shelter and food or raw materials of their choice and implements to cook in keeping with their dignity. They were also given instructions in their own languages on following protocol using masks and maintaining distance and cleanliness and hand washing. Forms of indoor entertainment including television sets, carrom boards, chess sets and other indoor games were also provided.²⁴



POVERTY ALLEVIATION MEASURES- FOOD KITS AND COMMUNITY KITCHENS

Grocery kits were supplied through the public distribution system to everyone. Kudumbashree members volunteered with the Civil Supplies Department of the Government of Kerala for the preparation of grocery kits for 8.7 million families during the pandemic. Approximately 569 volunteers came forward from 105 CDS and worked to organise and pack grocery kits in 54 different warehouses across the state.

As expected food scarcity was one of the major issues created by the lockdown. Arrangements were made to prepare food, which was then distributed. To this purpose, community kitchens were set up with the help of Kudumbashree and ASHA workers, and the food produced was packed and delivered. The beneficiaries included the elderly, those who were sick, those in quarantine, those who were helpless and in isolation, the homeless and so on. In the corona care centres set up by the Department of Health, Kudumbashree members operated canteens and catering services as a support to government initiatives to ensure food and related services were provided, mostly free, to the people who are under observation. During the peak of the lockdown, the community kitchens in Kerala (about 1,255 community kitchens in 14 districts) were cooking and distributing up to 280,000 food packets a day.²⁵ The kitchens were run by the local self-governing bodies in association with Kudumbashree, involving women volunteers. Kudumbashree was also serving budget meals through Janakeeya hotels (people's restaurants). After the lockdown, many of the community kitchens were converted to Janakeeya hotels. Later, two abandoned state-run buses were converted to mobile eating joints /take away hotels in Thiruvananthapuram and managed by the women trained by Kudumbashree.



Source: <https://dashboard.kerala.gov.in/ck-view-public.php>

AGRICULTURAL ACTIVITIES AND COMMUNITY SERVICE

Kudumbashree Joint Liability Groups (JLGs) across the state have voluntarily stood together for community kitchens and have donated their products generously for social causes during the pandemic. Around 115.94 metric tonnes of agricultural commodities (1,22,267.7 kilos of vegetables) had been handed over to community kitchens till 30 April 2020 by 17,372 Kudumbashree JLGs²⁶ Making use of regionally available produce as per local demand, the JLGs donated agricultural produce such as rice, banana, vegetables and tubers among other items. The collection and distribution of these commodities were coordinated by the respective district mission teams in rapport with the LSGI (Local Self-Governance India) officials and people's representatives.

As initiatives to promote farming during the lockdown, all district mission's agriculture teams initiated activities to promote vegetable cultivation and other agricultural practices. These include kitchen gardens, vegetable gardens, organic farming, seed distribution programs, tuber crop cultivation and agricultural campaign among Kudumbashree staff, members as well as the general public. These primarily women-centric initiatives have helped Kerala to move towards its goal of food sufficiency.

LOSSES SUFFERED BY KUDUMBASHREE FARMERS DURING LOCKDOWN

Due to the unexpected lockdown, many of the farmers had to undergo a great deal of economic loss. According to the study made by the Kudumbashree's agricultural wing, as much as 8.64 tonnes of produce such as rice, vegetables, plantain and tubers, grown especially with the Vishu (harvest) festival in mind, could not be harvested due to the lockdown. Due to lack of storage facilities, much produce had to be sold at low rates. Difficulty in transporting them to the markets and lack of proper procurement also led to further losses. However, women's spirit of resilience came to the forefront. Women as a community got together to work out strategies to regenerate and make good the losses and even donated some of their produce to the community kitchens and charity.⁻²⁷ The government also stepped in to procure their produce and assist in the logistics and supply chain management.

OTHER MICROENTERPRISES FOR COVID RELIEF

Kudumbashree set up 802 tailoring units as per the request of SupplyCo²⁸ for manufacturing and supplying cloth bags needed for the grocery kits for distribution. Apart from masks, they also manufactured hand sanitizers, face shields and other protective gear required for medical staff engaged in the treatment of COVID-19 patients. Kudumbashree also organised a fundraiser from the Project Implementation Agencies (PIAs) and gathered the resources required to produce sanitizers and to employ resource persons as tele-callers for calling on destitute families during the lockdown.

During the pandemic, to ensure continuity in skill development, online study materials had been prepared for various Deen Dayal Upadhyaya Grameen Kaushalya Yojana (DDU-GKY) courses and made available in the website along with providing students with detailed instructions. Twenty six of the Program Implementing Agencies (PIA) of the DDU-GKY have begun online classes.²⁹

KUDUMBASHREE FARMING

The prime objective of the Kudumbashree Mission in Kerala was poverty alleviation and to empower women who had lost their livelihoods to be able to strive towards food sufficiency through agriculture.

The state of Kerala reflects a different picture of the success of women in farming, in comparison with the rest of India. Harnessing the collective power of women's groups, and integrating them with local self-governments and connecting them with proactive credit schemes, landless women have emerged as commercial organic farmers in Kerala. Women are now visible as major farmers in the state, cultivating large areas of paddy, vegetables, banana, and tuber crops, on a group basis. A large number of women, who were once farm hands or temporary workers, are gaining identity as "farmers" under these women's collectives.

Some of the farming units go a step further and take up processing, packaging and even branding of their produce. Typical examples would be the Alamkode and Then-nala panchayats, who have collected and p d by NABARD to help them establish as Producer Companies of women farmers.³⁰

Training in mechanised agriculture and use of farm equipment was provided by panchayats like Wadakkancherry, which had built up a green army of farm workers including both men and women. In this initiative, men and women workers were paid equal wages.

Health disasters develop into social and economic disasters, often impacting the most vulnerable, including women and children severely. Kerala was able to utilize its human resources, particularly women, to help mitigate these issues effectively. Women have also emerged confident and empowered, capable of taking up further challenges with their resilience and determination. It is through their collectivism that these women have been able to address the challenges thrown up by the pandemic.

Making full use of the disaster management preparations made by the state, it was indeed noteworthy that a large number of women, comprising civil servants, women leaders, officers of the Health Department, ASHA workers, Anganwadi workers, Kudumbashree workers, women-community workers, women police, as well as doctors, nurses and health workers, were active participants in the efforts to control the COVID-19 virus in Kerala. These frontline warriors spent long hours away from their families in the field working with diligence, enthusiasm and determination. They had to work long hours and were often given minimum wages. Sometimes they could not be paid for many months and had to rally in protest in order to be heard. Nevertheless they took pride in their work and committed themselves selflessly in the larger interests of the community. From the ranks of these workers have emerged several panchayat level leaders who are now leading the community towards greater self-sufficiency and well-being. In brief, women's role in countering the pandemic in Kerala was multiple and multi-layered and in all, effective in controlling its spread right from its early days, and into the later period when through community-spread the number of cases kept increasing. They helped control the pandemic and the panic.

ENDNOTES

¹ World Health Organization. (2002). "Gender and Health in Disasters", Gender and Health, July https://www.who.int/gender/other_health/genderdisasters.pdf.

² Cris. (2020). "People didn't heed precautions: Kerala COVID-19 nodal officer on community spread", the News Minute, <https://www.thenewsminute.com/article/people-didn-t-heed-precautions-kerala-covid-19-nodal-officer-community-spread-128977>

³ Eapen, Mridul. (2020). "COVID And Impact on Women: The Kerala Response", published video: <https://focusweb.org/video/covid-and-impact-on-women-the-kerala-response/>

⁴ Jalan, Jyotsna and Arijit Sen. (2020). "Containing a pandemic with public actions and public trust: the Kerala story". Indian Economic Review. <https://europepmc.org/article/med/32836353>.

⁵ An accredited social health activist is a community health worker instituted by the government of India's Ministry of Health and Family Welfare as a part of the National Rural Health Mission. Selected from the village itself and accountable to it, the ASHA is trained to work as an interface between the community and the public health system.

⁶ The Anganwadi worker is a community based front line worker of the ICDS (Integrated Child Development Services) Programme. She plays a crucial role in promoting child growth and development. She is also an agent of social change, mobilizing community support for better care of young children.

⁷ See section on Kudumbashree for more details.

⁸ Prasad, Pallavi and Arathi P.M. (2020). "ASHAs Within the 'Kerala Model' Lead COVID-19 Response, Get Little in Return, 13 June. <https://behanbox.com/ashas-within-the-kerala-model-lead-COVID-19-response-get-little-in-return/>

⁹ Information on the programme available at www.kudumbashree.org

¹⁰ On 23 March 2020, Chief Minister Pinarayi Vijayan announced a state-wide lock-down till 31 March to prevent further spread of the corona virus. This was even before the nationwide lockdown in April 2020.

¹¹ <https://www.kudumbashree.org/pages/852>

¹² <https://www.kudumbashree.org/pages/839>

¹³ <https://www.kudumbashree.org/pages/844>

¹⁴ <https://www.kudumbashree.org/pages/838>

¹⁵ Ayyankali Urban Employment Guarantee Scheme (AUEGS) aims at enhancing the livelihood security of people in urban areas by guaranteeing a hundred days of wage-employment in a financial year to an urban household whose adult members volunteer to do unskilled manual work. It provides employment source, when other employment alternatives are scarce or inadequate.

¹⁶ <https://www.kudumbashree.org/pages/834>

¹⁷ Kudumbashree initiated the Disability Mainstreaming Program namely BUDs . To avoid the stigma towards the mentally challenged, the school was named as BUDs. These schools offer free education and training, free food and free transportation to all students. Parental participation is considered necessary for achieving the initiative's objective of helping the mentally challenged children to move from dependency to self-dependence or independence.

¹⁸ The Mitra 181 is a 24x7 Information and Emergency Help Line managed by the State Women's Development Corporation to ensure protection for women.

¹⁹ The Bhoomika counselling centre is part of the "Medical care for victims of gender-based violence/social abuses" programme initiated by the Kerala State government in association with National Rural Health Mission.

²⁰ Sakhi Women's Resource Centre is an NGO that works to bring women's issues to the forefront.

²¹ JagrathaSamithi is translated as 'Vigilance Committee'. JagrathaSamithis are committees formed at the level of local government in Kerala and were constituted on the initiative of the Kerala Women's Commission. They are intended to help in reducing the distance between women in the villages and the services provided by various government agencies. They act as quasi-judicial mechanisms at the panchayat level to protect the rights of women and children.

²² "Domestic Violence and the Issues experienced by the Women and girls of Kerala during the Corona Lockdown period—A Study", Kerala Institute of Local Administration, Thrissur, May 2020.

²³ www.newindianexpress.com, 22 April 2020

²⁴ <https://economictimes.indiatimes.com/news/politics-and-nation/amid-lockdown-migrant-workers-a-content-lot-in-https://2021census.in/kerala/kerala-population/>

²⁵ <https://www.thehindubusinessline.com/news/national/keralas-community-kitchens-serve-28-lakh-food-packets-a-day/article31309814.ece>

²⁶ <https://www.kudumbashree.org/pages/830>

²⁷ <https://www.kudumbashree.org/pages/841>

²⁸ The Kerala State Civil Supplies Corporation better Known as Supplyco is the gateway for the 30 million people of the state of Kerala, in a substantive style by supplying life's essentials and reaching out to the rural-poor and the urban-rich alike. It was incorporated in 1974 as a fully owned government company with authorised capital of 150 million to meet the limited objective of regulating the market price of essential commodities at reasonable prices. The growth of Supplyco over nearly three decades was substantial, and is more expansive than similar organisations in the country. Headquartered in Trivandrum and operating through five regional offices, 14 district depots, 56 taluk depots and around 1500 retail outlets, it has a work force of more than 4500.

²⁹ <https://www.kudumbashree.org/pages/845>

³⁰ Geethakutty P.S Leisa, India "Gaining identity as farmers--A case of the women collectives in Kerala" <https://leisaindia.org/gaining-identity-as-farmers/>



FOCUS ON THE GLOBAL SOUTH

Focus on the Global South is an Asia-based regional think tank that conducts research and policy analysis on the political economy of trade and development, democracy and people's alternatives. It works in national, regional and international coalitions with people's movements and civil society organisations and has offices in New Delhi, Manila, Phnom Penh and Bangkok



ROSA LUXEMBURG STIFTUNG (RLS)

The Rosa Luxemburg Stiftung (RLS) is a Germany-based foundation working in South Asia as in other parts of the world on the subjects of critical social analysis and civic education. It promotes a sovereign, socialist, secular and democratic social order, and aims to present alternative approaches to society and decision-makers. Research organisations, groups for self- emancipation and social activists are supported in their initiatives to develop models which have the potential to deliver greater social and economic justice



This paper draws attention to the gendered responses to the COVID-19 pandemic in the state of Kerala. Having been cautioned by the previous contagions like the Nipa Virus, Kerala had a different story to tell from the rest of India in terms of disaster-preparedness and response. The Kerala model included community action supporting state policy initiatives to achieve a humane, people-centric response to the demands of the COVID-19 situation. Herein the women's collectives and frontline workers became the agents of action in maintaining the required medical protocol and poverty alleviation. This paper also points out how the women workers of Kudumbashree, ASHA and Anganwadis worked tirelessly to implement the directives issued from the state government. Periodic instructions regarding public safety were widely disseminated and contact-tracing carried out with extreme diligence. These measures helped control the pandemic initially. The police and other departments of the government were also directed to implement these instructions.

And eventually, when the numbers of COVID-19 cases were on the increase and community spread occurred, the Health departments did not collapse, unlike in many other states. District administrations were able to maintain the number of patients admitted to hospitals and to give them quality health care, regardless of their economic background. Special efforts were made to care for the elderly, the mentally challenged, the destitute, women, children, migrant workers and the needy. This paper highlights the significance of women's involvement during the pandemic.