



INDIAN EXPERIENCE OF THE COVID-19 PANDEMIC



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NATIONAL EXPERIENCE



With the advent of COVID-19, an authoritarian lockdown was imposed. It had a devastating impact on the unorganized sector. Migrant workers working in the city had no choice but to move back to their native places (massive exodus on foot as public transport was halted). Disproportionate impact on women, children, disabled people and the trans community.

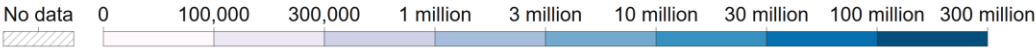
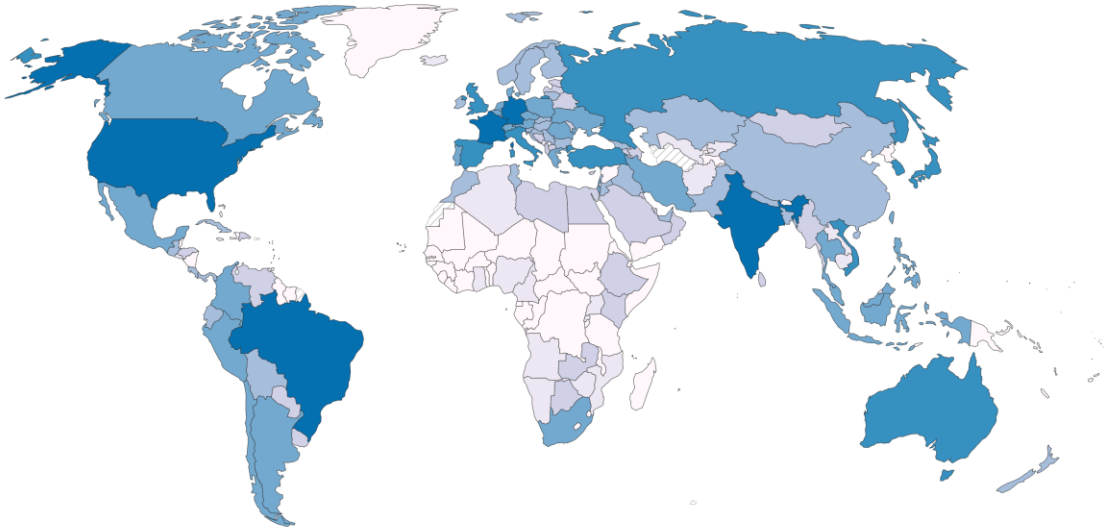
NATIONAL EXPERIENCE



While remittances from family members working in big cities were relied upon to boost the incomes of the rural households- occurred massively during first wave – March 2020 and second wave Feb 2021 Data collected from 100 slum dwellers showed that their average monthly income had reduced to Rs 12,106 post the 2021 lockdown, compared to the pre-Covid income of Rs 14,919. While only 54% of them reported having food consistently during the first lockdown of 2020, 98% had adequate food in the 2021 lockdown.

Cumulative confirmed COVID-19 cases, Dec 4, 2022

Due to limited testing, the number of confirmed cases is lower than the true number of infections.

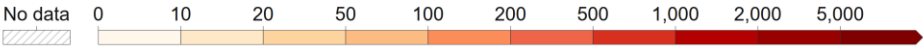
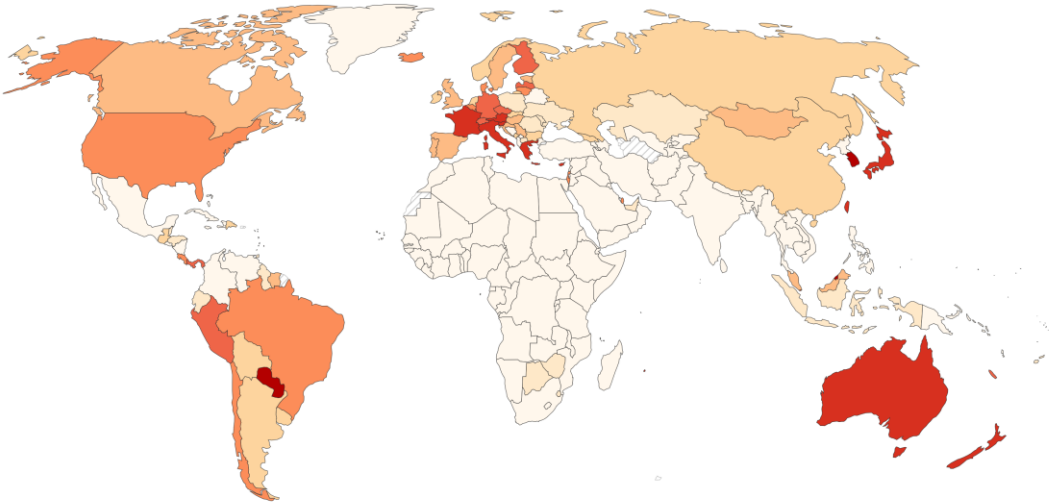


Source: Johns Hopkins University CSSE COVID-19 Data

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Daily new confirmed COVID-19 cases per million people, Dec 4, 2022

7-day rolling average. Due to limited testing, the number of confirmed cases is lower than the true number of infections.

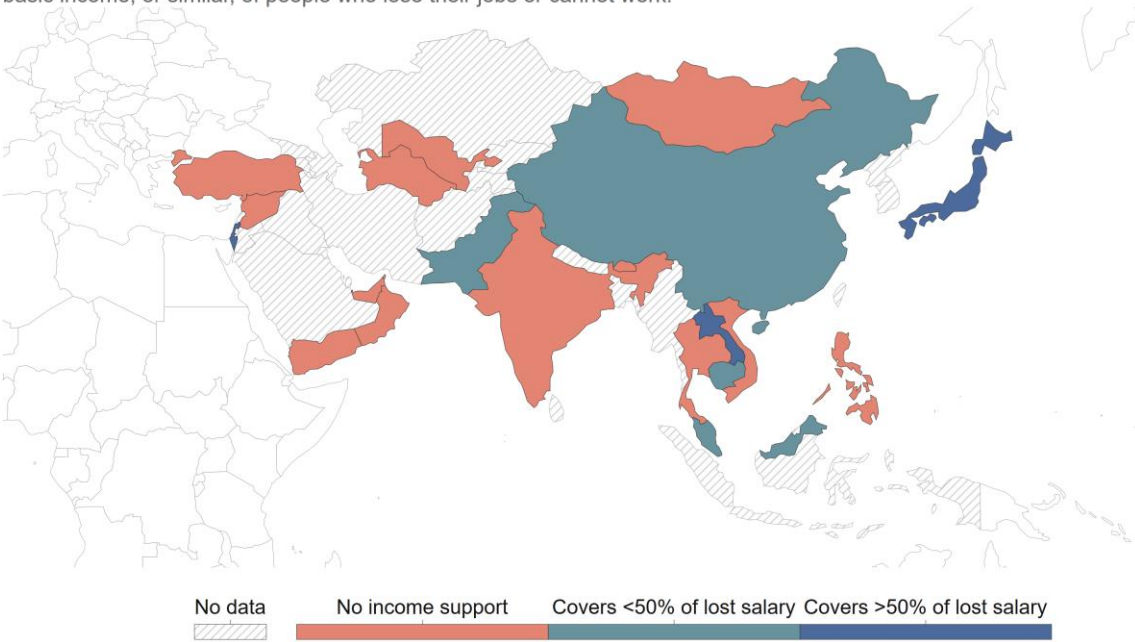


Source: Johns Hopkins University CSSE COVID-19 Data

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Income support during the COVID-19 pandemic, Dec 4, 2022

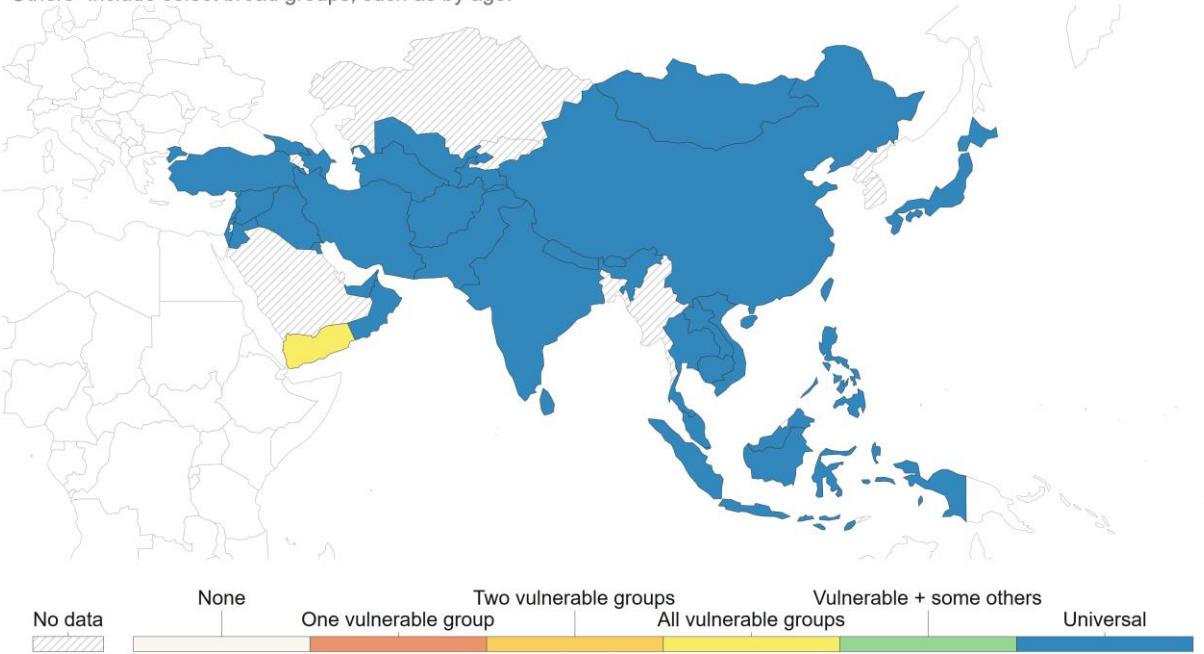
Income support captures if the government is covering the salaries or providing direct cash payments, universal basic income, or similar, of people who lose their jobs or cannot work.



Source: Oxford COVID-19 Government Response Tracker, Blavatnik School of Government, University of Oxford – Last updated 4 December 2022
Note: This income support may not apply to workers in all sectors, and may vary at the sub-national level.
OurWorldInData.org/coronavirus • CC BY

COVID-19 vaccination policy, Dec 4, 2022

Policies for vaccine delivery. Vulnerable groups include key workers, the clinically vulnerable, and the elderly. "Others" include select broad groups, such as by age.



Source: Oxford COVID-19 Government Response Tracker, Blavatnik School of Government, University of Oxford – Last updated 4 December 2022
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NATIONAL EXPERIENCE

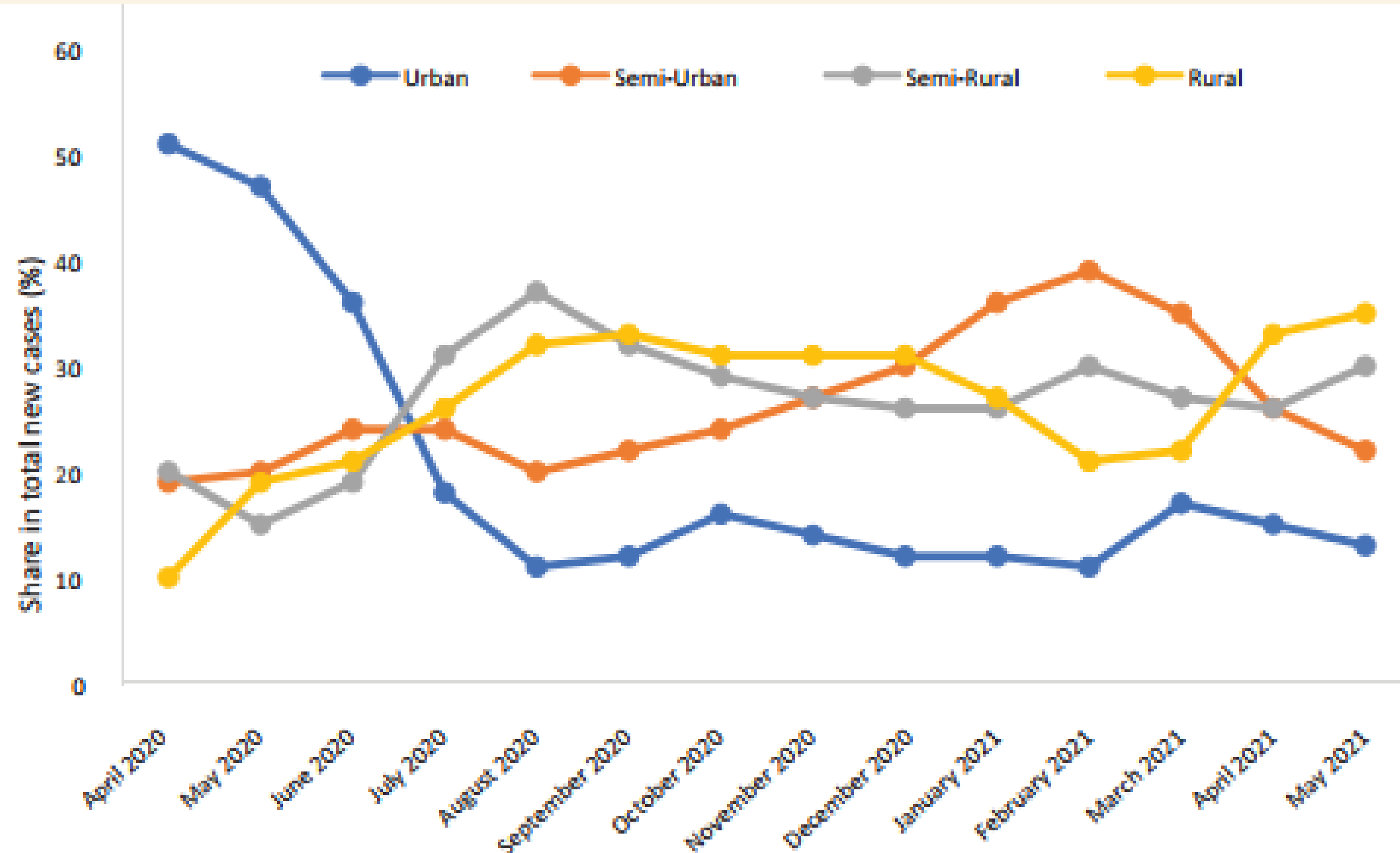
'Living in the stone age': Offline for 18 months in Kashmir

There have been more than 400 internet outages in Kashmir over the past decade, and shutdowns have become more frequent in recent years

Health professionals were unable to or received delays in accessing the important guidelines and updates on not just the prevalence of COVID-19, but also on the latest guidelines and breakthroughs issued by the Government of India, and the World Health Organisation (WHO) regarding testing and treatment for people suspected of being exposed to the virus or who are infected with the virus.

There were also reports that people are unable to share medical reports or make video calls to health professionals to seek advice for their health issues.

NATIONAL EXPERIENCE



NATIONAL EXPERIENCE

COVID-19: More than half of India still not testing enough, data shows

Data shows that testing is relatively limited to people with high suspicion of COVID-19 and may miss new chains of transmission in the community

May 2021

Covid fight: Govt system in front, private hospitals do the distancing

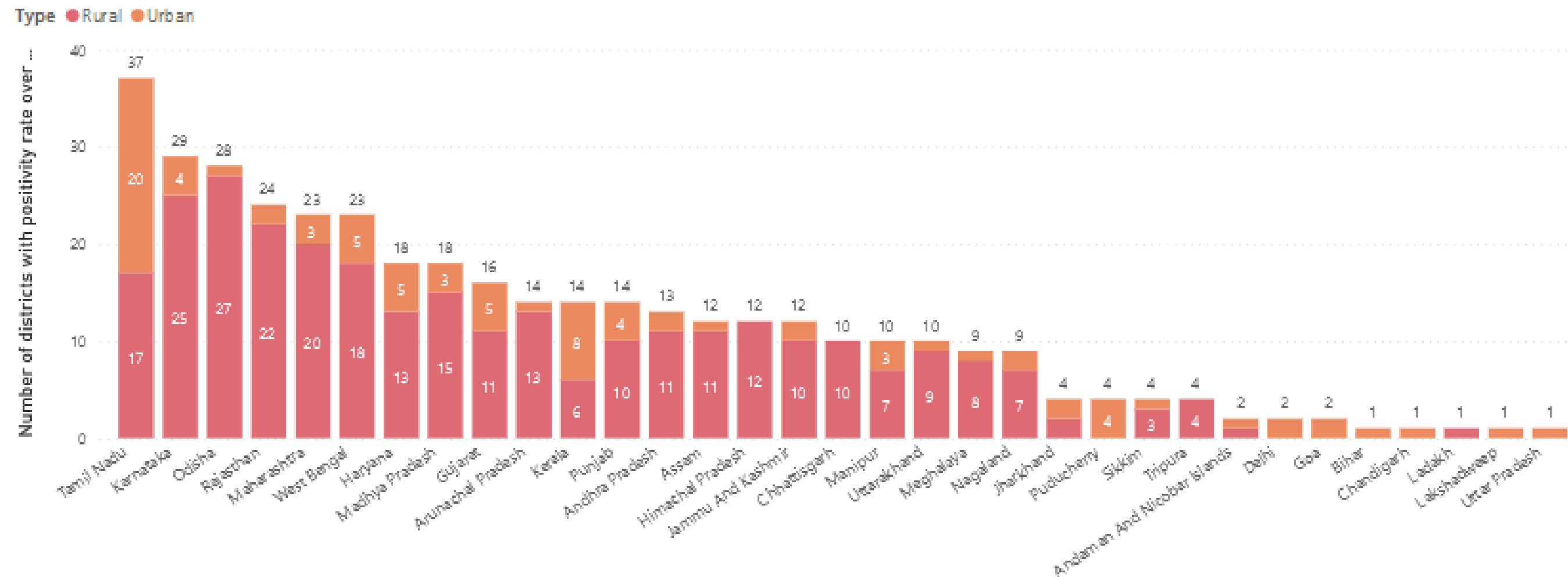
Private hospitals, which account for two-thirds of hospital beds in India, and almost 80 per cent of available ventilators, are handling less than 10 per cent of this critical load.

May 2020

NATIONAL EXPERIENCE

April 2021

**On May 21, India had 382 districts with positivity rate higher than 10 per cent.
77 per cent of these districts were rural**



Data shows that testing is relatively limited to people with high suspicion of COVID-19 and may miss new chains of transmission in the community

NATIONAL EXPERIENCE



The disparity was even stronger last month, after the government allowed private sales of vaccines for adults aged under 45 years, an offer which favoured residents of cities with larger private hospital networks. For the first four weeks of May, those nine cities gave 16% more doses than the combined rural districts, data from the government's Co-WIN vaccination portal shows.

HAAn affidavit from the Centre to the Supreme Court on April 27 projected a cumulative deficit of nearly 1,765 MT of oxygen per day in six states—Maharashtra, Gujarat, Madhya Pradesh, Uttar Pradesh, Delhi and Tamil Nadu.

NATIONAL EXPERIENCE

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The vaccine was publicly provided but was also opened to the open market. Rural India received less vaccine doses as compared to urban India.
