

Role of Human Behaviour in Covid-19 Management and the State Government as Catalyst

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Abstract - An omni directed relationship is present between human behaviour and environment. The Relationship is positive with ecofriendly human behaviour and vice-versa. Rich environment is helpful to development and human health. But development is harmful to environment as well as human health. As per an estimation of WHO twenty-four percent diseases caused by environment and forty percent of cancer can be prevented by life style choice.

The current Covid-19 originated in China and the ways of spreading all over the globe is unprecedented. All most over 6,267,488 people of 213 countries declared covid-19 positive and death toll to 373,961.

This is a record breaking endemic over the centuries and still on without proper treatment. While scientists and doctors have been failed, can the laymen prevent the catastrophic disease? In these Lockdown stages while the profit of the business becomes the saving of life what should be the role of common people as well as government to manage the endemic? With a view to address the issues this paper made an effort to observe the effectiveness of human behaviour in covid-19 management with special reference to Assam and the initiative taken by Assam Government. It was found that changing human behaviour to a great extent is effective in covid-19 management and the state government can catalysis the process.

Index Terms - Human behaviour, life style choice, Covid management, Catalysis.

INTRODUCTION

An omnidirected relationship is present between human behaviour and environment. The relationship is positive with the eco-friendly human behaviour and vice-versa. Rich environment is helpful in Economic development and economic development is harmful to environment. As per an estimation of WHO 24 percent of diseases caused for environment and forty percent of cancer can be prevented by life style choice.

The current Covid-19 originated as believe by health expert in bats or pangolins. The first transmission to human was in Wuhan province of China. Since then , the virus has been spreading through person to person contact. This is a record breaking pandemic over the centuries. Almost 210 countries and territories have been affected and the death toll to 428210(10%) by June 13/2020. Total positive cases rises to 7733673 including 3925273(90) recovered cases. In India total number of positive cases rises to 321,626 including 162326(95%) recovered and 9199(5%) death. This is a record-breaking pandemic over the centuries and still on without proper treatment. While scientist and doctors have been failed, can laymen be able to prevent the catastrophic disease? How they will fight against the disease without having any weapon? In this lockdown stages while profit of the business men becomes the saving of life what should be the role of common men and the government towards covid management? Are quarantine, Social isolation and distancing and hygiene maintaining only solution? Will not these steps break the human right? How they will affect on livelihood of common men and how these can be mitigated? These are the questions need to investigate in this research paper.

OBJECTIVES OF THE PAPER

Under this backdrop this paper set following objectives

1. To observe the role of human behaviour in Covid-19 management.
2. To observe how the state government can catalyse the process with reference to the state government of Assam.

Hypothesis:

In this regard following hypothesis were taken to be tested.

1. Covid-19 management is positively related to human behaviour.
2. State government can catalyse the covid-19 management process.

METHODOLOGY OF THE STUDY

This paper is both empirical and descriptive type based on secondary data available in government websites, news channel, and news paper and news bulletins. Data so collected were processed in computer for utilisation purposes. However this paper confine about the strategy and policies of the state of Assam government toward behavioural change of the people of Assam to serve the purposes.

LITERATURE REVIEW

Available literatures regarding human behaviour reveal that conducive human behaviour is helpful in Covid-19 management. In an article Jenifer Cole observe how the virus is danger to fail the healthcare system around the globe. She mentioned how behavioural factor is important in slowing and stopping down the disease spreading. WHO also recognised the value of human behaviour in managing pandemic. It is also mentioned that the behaviour change can reduce the spread by 80 percent. During Ebola out break in 2000-2001 in Uganda research from 2003 has been recognise the importance of human behaviour in its management. Similar observation was also found in Spanish flu management in 1998-1999. Thus available literatures support the role of human behaviour in covid-19 management.

FINDINGS OF THE STUDY

Covid-19 places a huge pressure on government and health department to produce right messaging on it. The state government of Assam become very cautious to shift the pressure to public by reducing their livelihood burden through safe packages with assuring that the government well able to manage the disease. Leading from the front the State government health minister Dr. Himanta Biswa Sarmah decided to convert all Medical hospital to covid hospital. To manage the shortages of doctors training program have

been arranged including last semester medical students with recurring quarantine applicable to all health care workers. The government was well ahead of announcing first stage lock down over nationwide lock down announced by central government form 23rd march. In shifting lock down burden to the public the Assam government go in right direction by utilising minimal resources for maximum result. Though the disturbing one usual work routine, may not be pleasing thing to many people yet the government able to handle the pressure well by reducing the burden of the public to a sustainable level. Being a social animal social distancing, quarantine, curfew, stay at home all are displeasing things, the government ably handle these through moral suasion policy. It is mention worthy that till last five days of first stage lock down no covid positive cases were found in the state. It was only in 31st march when the Zammate were come back from Delhi and zamate related cases rises up to 33 in the mid of second stage lock down in the state. As of 13 June 2020. The confirm cases in Assam moved to 3693 including 1587 recoveries and eight death. The death percentage in the state is much below the national average of 2.87 percent and global average of 5 percent. It is only .21%. It was also observed around 99% confirm cases were not from home origin, rather from migrants workers from outside the state. It was minimal till the end of third stage lock down and cross thousand marks only after inflow of migrant workers to their home state. Government of state having zero covid-19 treatment facilities fight well the pandemic from the very beginning. Took some bold steps for transforming the government medical hospitals to covid-19 hospital and shift the patients from government hospital to private nursing home with assuring 100% expenditure package to the admitted patients. The nursing home owners were also agreed to government proposal and did accordingly.

In order to inspire the migrant workers of the state to stay safely at their working place transfer of Rs. 2000 per month to all workers was done. By 22th April of the year transfer of fund was completed to about 8600 workers. In order to predict the actual number of this type workers government create a helpline number and it is estimated about nine lakhs. When Challenge become heavier Government decided to build up temporary quarantine center almost in each assembly constituency to take the load of the migrant workers.

Government also made sufficient arrangement to those people were in foreign tour. It was also observed that people give positives response to government appeal. Govt employees not only donate one day salary to the Arugya nidhi but provide food and other essential commodities at least three to five people during festive session of April by each employee. Other Individuals including, Artist and Businessmen also donate to large extent to the state Arugya nidhi. by the end of June 13/2020 almost 112 crores were donated by the public for combat with covid-19. It was also supervising thing where thousand gathering is common phenomenon almost in every Mouza of the state during rangali bihu were Zero gathering and even not observed the massive festival. It was first occasion in the Assam history to stay home during the festival.

During these stages government raises its capacity for covid treatment and personal covid test completed about 2 lakhs, and stood first position in India. Develop a Covid ward with ICU and Ventilation facilities in each Medical College hospital and District hospitals. The government is able to build temporary Quarantined canter initially at sarusajai Stadium with 700 person quarantine capacity now build numbers of quarantine canter almost at least one in all Assembly constituency.

Despite the surge in cases in recent days the state government confident enough to tackle the problem. Though two or three cases come out without having any travel history so called mass infection is not seen in the state. This is attributed to a great extent to the rational behaviour of the public of the state. Thus human behaviour has a pivotal role to play in covid management. Of course so far public behaviour is rational the behaviour and covid management have a positive relation otherwise it may cause community infection. In this process of covid management state government can catalyst the movement with an assurance that they will be always with them.

The covid map of the state shows that almost in all district covid positive case was found with the different range. Highest number of positive case was found in kamrup metro district with 552 positive cases followed by Dhuburi 306 and Hojai with 237 cases while least number was observed in South Salmara district with 6 cases as on 13th June. The total number of positive cases in the state constitutes about 0.47 percent of the world and 1.098 percent of the nation. Highest numbers of positive cases in India is found in

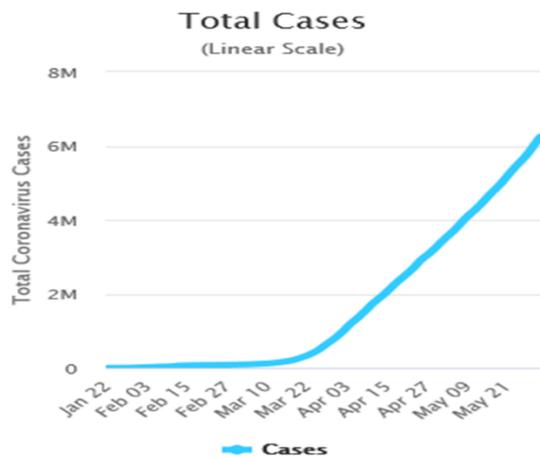
Maharashtra with 101000 positive cases including 3717 death followed by Tamilnadu with 40698 positive cases with 367 death cases and Delhi 36824 Positive with 1224 death cases. Least number of positive cases found in Andaman and Nicobar Island with 38 positive cases without death. While Lakshadweep is the only State with zero positive cases. ASSAM Stood 16th position with 3498 positive cases and with 8 death cases.

Of course some unwarranted behaviour from police forces has been seen in on road for controlling public though their contribution towards covid management is admissible. Though some political leader like Aminul Islam of AIUDF MLA, try to give a communal colour with stick initiation of the government the effort was fed in bad. State government in many directions become successful till today in covid management by encouraging them to be quarantined and stay safe in home.

CONCLUSION

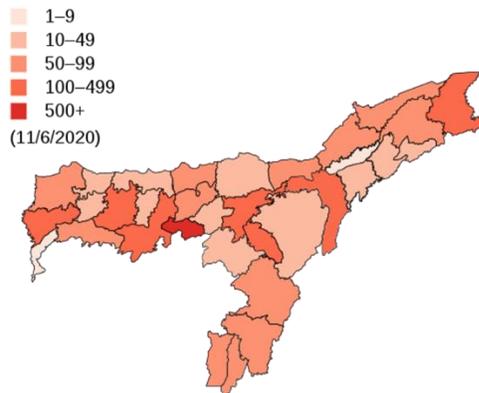
Always a strong health care system is best defence for disease management. But When the system is failed conducive human behaviour is only way out to control diseases. Presently highest numbers of Covid-19 case found in America followed by UK, Brazil, French and Italy all are have well equipped health facilities. Ebola outbreak in West Africa attributed to weak health care now cannot be attributed too much to that it was totally failed till today. Thus everybody needs to rely on self defence to avoid covid-19 and spreading to other. This is the time just to listen what we are being told to do, stay inside, maintain social distancing and wash our hand and maintain hygiene in public places. During Swine flu pandemic 1918-1919 same behavioural factor slowed down the spread of fever. It was also seen in the early twenty century and late 19th century improvement of municipal and house hold sanitation brought down the overall mortality rate. It is also suggested to the policy maker before framing a disease management strategy, thrust to be given for running all economic activities subject to maintain public health. Policy should be such that minimum burden shift to the general public that they can recover soon all their losses. However less burden shift and more public benefit policy need to be taken to Covid management. The public behaviour is always ahead of all.

Covid-19 spreading map of India



Source: Central Government Website

Covid -19 map of Assam



Source: Government of Assam Website.

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Appendix-1

Health Advisory for Elderly Population of India during COVID19 Pandemic Globally, COVID-19 has impacted several lives and is steadily increasing its reach. While Indian Government has taken stringent actions to contain the spread of COVID-19, including nation-wide lockdown, it is also critical for each one of us to follow the protocols and take necessary measures and precautions to break the chain of transmission of the disease. Elderly people are at a higher risk of COVID-19 infection due to their decreased immunity and body reserves, as well as multiple associated comorbidities like diabetes, hypertension, chronic kidney disease and chronic obstructive pulmonary disease. Also, course of disease tends to be more severe in case of elderlies resulting in higher mortality. However, COVID-19 transmission among elderly population can be reduced by taking following measures: DO's 1. Stay at home. Avoid meeting visitors at home. If meeting is essential, maintain a distance of one meter. 2. Wash your hands and face at regular intervals with soap and water. 3. Sneeze and cough either into your elbow or into tissue paper/handkerchief. After coughing or sneezing dispose of the tissue paper/ wash your handkerchief. 4. Ensure proper nutrition through home cooked fresh hot meals, hydrate frequently and take fresh juices to boost immunity. 5. Exercise and meditate. 6. Take your daily prescribed medicines regularly. 7. Talk to your family members (not staying with you), relatives, friends via call or video conferencing, take help from family members if needed 8. Postpone your elective surgeries (if any) like cataract surgery or total knee replacement 9. Clean the frequently touched surfaces with disinfectant regularly. 10. Monitor your health. If you develop fever, cough and/or breathing difficulty immediately contact nearest health care facility and follow the medical advice rendered DON'Ts 1. Do not cough or sneeze into your bare hands or without covering your face. 2. Don't go near your contacts if you are suffering from fever and cough. 3. Don't touch your eyes, face, nose and tongue. 4. Don't go near affected/ sick people . 5. Don't self-medicate. 6. Don't shake hands or hug your friends and near ones. 7. Do not go to hospital for routine checkup or follow up. As far as possible make tele-consultation with your healthcare provider. 8. Don't go to crowded places like parks, markets and religious places. 9. Don't go out unless it is absolutely essential.

Appendix-2

Advisory on Social Distancing Measure in view of spread of COVID-19 disease Social distancing is a non-pharmaceutical infection prevention and control intervention implemented to avoid/decrease contact between those who are infected with a disease causing pathogen and those who are not, so as to stop or slow down the rate and extent of disease transmission in a community. This eventually leads to decrease in spread, morbidity and mortality due to the disease. In addition to the proposed interventions, the State/UT Governments may prescribe such other measures as they consider necessary. All these proposed interventions shall be in force till 31st of March, 2020. They will be reviewed as per the evolving situation. The following interventions are proposed: 1. Closure of all educational establishments (schools, universities etc), gyms, museums, cultural and social centres, swimming pools and theatres. Students should be advised to stay at home. Online education to be promoted. 2. Possibility of postponing exams may be explored. Ongoing exams to be conducted only after ensuring physical distance of one meter amongst students. 3. Encourage private sector organizations/employers to allow employees to work from home wherever feasible. 4. Meetings, as far as feasible, shall be done through video conferences. Minimize or reschedule meetings involving large number of people unless necessary. 5. Restaurants to ensure handwashing protocol and proper cleanliness of frequently touched surfaces. Ensure physical distancing (minimum 1metre) between tables; encourage open air seating where practical with adequate distancing. 6. Keep already planned weddings to a limited gathering, postpone all non-essential social and cultural gatherings. 7. Local authorities to have a dialogue with organizers of sporting events and competitions involving large gatherings and they may be advised to postpone such events. 8. Local authorities to have a dialogue with opinion leaders and religious leaders to regulate mass gatherings and should ensure no overcrowding/at least one metre distance between people. Page 2 of 2 9. Local authorities to have meeting with traders associations and other stakeholders to regulate hours, exhibit Do's and Don'ts and take up a communication drive in market places like sabzi mandi, anaj mandi, bus depots, railway stations, post-offices etc., where essential services are provided. 10. All commercial

activities must keep a distance of one meter between customers. Measures to reduce peak hour crowding in markets. 11. Non-essential travel should be avoided. Buses, Trains and aeroplanes to maximize social distancing in public transport besides ensuring regular and proper disinfection of surfaces. 12. Hospitals to follow necessary protocol related with COVID-19 management as prescribed and restrict family/friends/children visiting patients in hospitals. 13. Hygiene and physical distancing has to be maintained. Shaking hands and hugging as a matter of greeting to be avoided. 14. Special protective measures for delivery men/ women working in online ordering services. 15. Keep communities informed consistently and constantly. Ministry of Health & Family Welfare

Appendix-3

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Advisory for Hospitals/Clinics for management of Suspect COVID-19 case • Medical Officer/treating physician to keep the differential diagnosis of COVID-19 in mind while encountering a patient falling in suspect case definition of COVID-19 (Check <https://www.ncdc.gov.in/index4.php?lang=1&level=0&linkid=127&lid=432> for updated case definitions) • Give surgical mask to the patient and advise to follow cough etiquettes. • Refer the patient to designated health facility and inform District surveillance Officer or at National Helpline Number 01123978046 • Follow Infection Prevention and Control guidelines. Details available at <https://www.ncdc.gov.in/index4.php?lang=1&level=0&linkid=127&lid=432> • Display IEC material in hospital premises. • Conduct CME for Respiratory Medicine & Medicine faculty