Health workers in public hospitals across India are at the forefront while responding to the pandemic. Despite the fact that India has under invested in public health sector; be it infrastructure, or human resources, it was the health workers in public hospitals that led the response to COVID 19 pandemic. Private hospitals either closed down or continued to function in a profit-making manner with several reports about overcharging and other irrational practices and no effort was made to provide essential services during the pandemic.

The recent COVID 19 pandemic has exposed fault lines of Indian public health system. At the public health level; there has been a failure to explicitly address health workforce requirements and considerations. Reports are abundant about lack of PPEs, non-payment of salaries, absence of health insurance amongst others. Health workers endured assaults, harassment and social ostracism from society. Clearly, we failed to fulfil our reciprocal responsibilities towards healthcare workers who took additional risks to provide healthcare.

Against this background, CEHAT (Centre for Enquiry into Health and Allied Themes) carried out a rapid assessment with 13 peripheral hospitals in Mumbai between May-June 2020. Telephonic interviews with different cadres were carried out to document their experiences in responding to COVID 19. There is a need for explicit policies and practices to support the health workforce through the pandemic. Through this calendar, we highlight the role of health workers during the strictest lockdown.
About CEHAT

Centre for Enquiry into Health and Allied Themes (CEHAT), the research centre of Anusandhan Trust, is a multidisciplinary institution conducting socially relevant health related research, training, service and advocacy. It is governed democratically through participatory management and upholds the principles of transparency, social accountability and ethics.

About the Calendar

A rapid assessment was carried out by CEHAT across 13 peripheral hospitals in Mumbai between May and June 2020. This year’s calendar is based on the study, “Health workers’ response to the pandemic: Documenting challenges”, in Mumbai.

Thank you

We acknowledge the CEHAT team for carrying out the study.

We thank Svati Chakravarty Bhatkal for the concept and creativity in presenting the research findings.

We thank Ashna Jhunjhunwala for designing the calendar.

Centre for Enquiry into Health and Allied Themes

CEHAT is the research centre of Anusandhan Trust. All donations to be made in the name of “Anusandhan Trust”. Anusandhan Trust is registered as a Public Charitable Trust under Bombay Public Trust Act, 1950. All donations made to Anusandhan Trust are eligible for exemption under section 80G of Income Tax Act, 1961.

Tel: (022) 266 73571 / 266 73154 | Fax: 266 73156
Email: cehatmumbai@gmail.com
Website: www.cehat.org | Follow us on Facebook
During the initial phase of the pandemic, health workers were being trained to deal with the crisis. They learnt to create triage systems and implement physical distancing in wards and OPDs that were not designed for a pandemic. Hospitals were segregated as COVID and non-COVID. Health workers at COVID hospitals made efforts to ensure that all patients, COVID or otherwise, received care.

Says a matron, “We were designated as a COVID facility, but we made sure we continued to have deliveries and routine surgeries.”

HOSPITALS DID THEIR BEST TO PROVIDE ESSENTIAL SERVICES TO ALL
The shortage of staff, always a problem at public hospitals, got exacerbated during the pandemic. Administrators approached higher authorities to recruit doctors and even medical students to tide over the shortage. Support staff was also scarce and scared. Hospitals sought support from NGOs for a range of activities including swift disposal of bodies.

A senior health worker recalls “We realised that our labour staff also needed to stay safe; so we took a set of measures to assure them of safety, including accommodation.”

Hospitals adopted innovative strategies to mobilise human resources.
In normal circumstances patients are able to receive friends or family during visiting hours. During this time, they also look forward to tasting some home cooked food. It is a source of comfort. COVID 19 threw this out of balance. Patients had to be kept at a distance. There were no visitors, physical contact or even conversations with patients. This increased their stress levels. Health workers felt miserable and helpless about this.

A social worker recounts, “We started to sing, do yoga, show films and engage patients. They had to have a positive outlook if they had to recover quickly. We also had to stay positive.”

HOSPITALS TOOK PAINS TO RESPOND TO THE MENTAL HEALTH NEEDS OF PATIENTS
Doctors were acutely aware that ignoring other diseases such as TB in the face of the pandemic could take a toll on critical public health efforts.

A doctor explains, “We assigned a person to telephonically monitor patients taking the TB treatment. Arrangements were made to either deliver medication or ensure its availability in the OPD. We never gave up on TB eradication as a top public health priority.”

PUBLIC HOSPITALS MADE EFFORTS TO MITIGATE TB
Even as COVID raged, the pandemic of violence against women loomed large. The Municipal Corporation of Greater Mumbai’s Dilaasa departments in public hospitals remained functional. A survivor of rape or domestic violence reaching the hospital was ensured medical and psychological care.

The Dilaasa team that worked round the clock, carrying out these crucial activities says, “We are happy that even in this pandemic we were able to respond to the needs of survivors of violence.”

HOSPITALS ADDRESSED VIOLENCE AGAINST WOMEN AS AN ESSENTIAL SERVICE DURING THE PANDEMIC
Health workers continue to deal with high levels of stress, uncertainty and the fear of being infected. Long working hours, not being able to see their family and being blamed by families of patients are daily realities.

A hospital support staffer says, “Keeping each other motivated and focusing on patient recovery became our goal. We started meditating for calmness and looking after each other.”

UNDER THE MOST TRYING CIRCUMSTANCES, IT WAS TEAM SPIRIT THAT KEPT HEALTHCARE PROVIDERS GOING