Covid – 19 Pandemic And Governance Challenges In Developing Countries: A Case Study Of Kupwara District Of Jammu & Kashmir

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Abstract

COVID-19 has engulfed the entire world and impacted all aspects of human lives. The spread and the resulting consequences have tested the resources and the resilience of the world governments. Developed countries have comparatively more resources and other infrastructure associated with healthcare, but the developing ones have few resources at their disposal and are at the receiving end. Developing countries are undergoing social and economic transformations. They are apt examples of prismatic societies where the institutions and other governance structures are comparatively weak. In this paper, we have taken District Kupwara of Jammu And Kashmir Union Territory to review its COVIDappropriate governance in health. District Kupwara is one of the frontier districts towards the north of the union territory. According to the 2011 census, its population is 8.70 Lacs. This pandemic necessitated pragmatic changes in governance structures and procedures. Various aspects of governance need to be modified. The use of IT tools requires to be imbibed in day-to-day governance to meet the future challenges of pandemics. Interdepartmental coordination could be enhanced through such measures. The Health Department of the Kupwara district in the Kashmir region is the first responder to the situation. The infrastructure and human resources need to be remodelled to face the contagion. This paper is an endeavour to highlight the need for anticipatory governance to increase the resilience of various governmental organs against the outbreak of pandemics or other disasters in the future.

Keywords COVID-19, Governance, Healthcare, Jammu and Kashmir, Kupwara, Pandemic, Oxygen.

Introduction

The epidemic (COVID-19) has spread throughout the globe with scary speed, infecting millions and causing unprecedented economic upheaval; thus, the world is currently facing a devastating pandemic on numerous fronts. The government issued various guidelines and regulations for preventing COVID-19 transmission, providing treatment to the infected, and other relevant issues. It is essential to have authentic and easily accessible official information to the public in these circumstances. Concerns have been raised concerning how people experiencing poverty will be affected, especially in emerging nations. Measuring a nation's readiness to combat pandemic threats is one of the serious issues with the COVID-19 pandemic catastrophe. The scenario brought on by such pandemics highlights the need for nations to put additional public health safeguards in place so they can act quickly and effectively in the future.

Developing countries were at the receiving end because of scarce resources. India, a rapidly developing country, faced many challenges during the outbreak of this contagious disease. The governance set up in this country was also not ready to react efficiently to the emerging situation. It was altogether "Planning by Default." Jammu and Kashmir faced more or less the same challenges except for some issues which arose due to geographical location and the security point of view. Movement limitations, high unemployment rates, and mounting discontent with governmental institutions are only a few of the challenges left over from the outbreak that will likely persist. The functioning and the level of preparedness of the Public Health sector of District Kupwara are chosen as the focus of study in this paper.

The northern frontier district of Kupwara, which was established in 1979, has a total size of 2379 square kilometres and more than 240 kilometres of Line of Control. At 5300 feet above sea level, the region has a varied topography. The district's southern regions are plain, while its western, northern, and eastern regions are hilly. The LOC divides the district from Muzaffarabad, which is currently being occupied by Pakistan, in the west and north. The district is bordered on the east and south by the Baramulla district. It is situated in the northwest part of Kashmir Valley, roughly 90 kilometres from Srinagar. 875 564 people call it home, and 8.08 per cent are members of scheduled tribes. The Kupwara district is breathtakingly beautiful, with a rich culture, varied heritage, distinctive folklore, and wide meadows. Between the Pir Panchal and Shams Bari mountain ranges is where the Kupwara district is located. 71.58% of the geographical area of the Kupwara district is under forest cover.

Research Design

This paper used a mixed approach methodology of quantitative and qualitative methods like literature review, interviews, and questionnaires. The present paper reviews the health department's preparedness to face pandemic-like situations in the District Kupwara of the Kashmir division. The sample size is one hundred, consisting of administrators, doctors, the general public, and the health department's paramedical staff.

Limitations

This work was done during the third wave of COVID-19. It was a cumbersome task to access healthcare institutions because of the heavy workload and restrictions of the outbreak. Work done by a single department cannot be considered representative of other departments. More research needs to be done regarding the functioning and preparedness of different departments during the outbreak.

Literature Review

The standard process of governance has been hindered, and a new government framework needs to be formulated so that the functions of a state move on smoothly, even in critical situations. The working of any governmental agency needs to continue even in cumbersome situations to maintain the state's writ within its territory. (A. J. Singhai and D. Faizan, 2021)

Despite significant differences in resources, healthcare capability, and the incidence of COVID-19 cases between states, the centralized one-size-fits-all approach was imposed. It is believed that the centralized lockup prevents state and local governments from adjusting policy responses to meet local requirements. There is a need to give states more powers for effectively managing pandemics or disasters (Choutagunta et al., 2021).

Dynamism and responsivity are the hallmarks of welfare-oriented state governments. They need to respond to the pandemic through agility and adaptivity. All the circumstances surrounding an issue of public nature need to be considered. (Janssen & van der Voort, 2020)

There is a need to shift towards anticipatory governance where the administrative machinery is active and flexible to face the challenges. The health sector has often remained neglected because of political reasons. There is a need to overhaul it by anticipating situations and preparing for them accordingly to remain in sync with the current circumstances. (F, Nganje. 2021)

Developing countries, particularly in South Asia, have a complex and dynamic region, and there has been less focus on improving governance in general and health care in particular. The COVID-19 outbreak has once again proved the utility of having quality healthcare infrastructure all over the region (Khawaja & Canyon., 2021).

The outbreak of deadly contagious diseases and various disasters should force the policymakers of different countries to rethink the state architecture, considering current and future challenges. Government-civil society relations need to be re-energized to form a more comprehensive policy framework to meet any unforeseen eventuality in the future (Rousselle et al., 2020).

There is a need to use unique communication systems to provide online check-ups of patients, mainly when the standard communication systems are not functioning. Novel issues need novel solutions. There is a need to have proper governance facilities all over the valley of Kashmir and far-flung areas that need to be taken care of with special provisions keeping in view their remoteness from the capital. Most Kupwara district

areas remain cut off from the mainland due to snowfall. These areas should find a place in policy frameworks of governance. The development of health-related infrastructure is the need of the hour in the district (Shoib & Arafat, 2020) (Lakshmi Singh et al., 2021). Events like the COVID-19 outbreak need to have viewed as a total of biological, demographic, and geographic factors. There is a need to have a 360-degree vision while formulating these crucial issues. Vibrant policies are an effective antidote to the misgovernance arising from the absence of prior planning (Dutta & Fischer, 2021).

Research Methodology

This paper uses a mixed approach methodology of quantitative and qualitative methods like literature review, interviews, and questionnaires. The sample size is one hundred, which consists of Administrators, doctors, and paramedical staff of the health department. The responses collected are analyzed, and then conclusions are drawn.

Data Collection

Data regarding various parameters of the health department Kupwara was collected through Right to Information provisions from Chief Medical Officer Kupwara through Director Health Services Kashmir. Questionnaires were provided to the participants. Their responses were collected and analyzed.

Data Analysis

There are 239 regular doctors, consisting of 208 medical officers and 31 consultants. Under National Health Mission, there are 116 medical officers and 07 consultants. There are 685 regular paramedics and 447 under NHM working in the district.

Table 1: List of Medical Officials Working in the District

Point No.	Particular/s	Number
1	Doctors (Regular)	208
2	Doctors (National Health Mission)	116
3	Paramedics (Regular)	685
4	Paramedics (NHM)	447
5	Consultant (Regular)	31
6	Consultant (NHM)	07

Source: CMO Kupwara

Regarding the infrastructure for Oxygen generation in the district, there are three oxygen plants whose capacity is 2600 LPM. Tangdar is a far-flung area from district headquarters that remains cut from other areas because of snowfall.500 LPM oxygen plant has been made functional to provide easy access to oxygen to the patients in the area.

Table 2: Availability of Oxygen and Bed Capacity in the Medical Department

Sr. No.	Location	Capacity (LPM)	Functional	Non-Functional
1	CHC Kupwara	3000 litres	2000 litres	1000 litres
2	CHC Sogam	100 litres	Yes	NA
3	CHC Tangdar	500 litres	NA	Yes

Source: CMO Kupwara

In the district, there is the provision of oxygen-supported beds for the general public. The number of these beds per healthcare facility is shown as follows.

Table 3: Oxygen-Supported Beds that are or Can be Designated For COVID-19 Patients

Sr. No.	Name /Location of Health Facility	No. of beds with O ₂ supply @15 LPM	No. of Beds with O ₂ supply @40 LPM			
			No. of beds with high flow O ₂	No. of ICU Beds without a ventilator	No. of Ventilator supported beds	
1	CHC Kupwara	85	7	1	7	
2	DH Handwara	8	N/A	N/A	N/A	
3	CHC Langate	10	N/A	N/A	N/A	
4	CHC Kralpora	2	N/A	N/A	N/A	
5	CHC Sogam	10	N/A	N/A	N/A	
6	CHC Tangdar	6	N/A	N/A	N/A	
7	PHC Panzgam	4	N/A	N/A	N/A	
8	PHC Keran	2	N/A	N/A	N/A	
9	PHC Machil	2	N/A	N/A	N/A	
10	CHC Zachaldara	2	N/A	N/A	N/A	

Source: CMO Kupwara

Beds without oxygen support that are or can be designated for COVID-19 are as follows:

Table 4: Beds Without Oxygen Support That are Meant for COVID-19 Patients

Sr. No	Health Facility	No of Beds
1	CHC Zachaldara	5
2	PHC Gonipora	30

3	PHC Nutnussa	30
4	PHC Cheerkoot	30
5	PHC Nagri	25

Source: CMO Kupwara

There has been the use of Local Self-Governing bodies. At local levels, Panchayats were provided with basic facilities to deal with the outbreak at local levels. The infrastructure available with such institutions is as follows.

Table 5: Panchayat COVID Care Centre

Total No. of Panchayat covid care centre (PCCC)	No of PCCCs with trained staff	No. of oxygen- supported beds	No. of beds without oxygen
			support
			* *

Source: CMO Kupwara

The total bed capacity of all the healthcare facilities in the district is as follows:

Table 6: Total Bed Capacity Available in the District

Sr. No.	Name of the Health facility	No. of beds with oxygen support	No. of beds without oxygen support	Paediatric isolation beds with oxygen support	Total capacity available
1	CHC Kupwara	140	0	10	150
2	District Hospital, Handwara	0	0	8	8
3	CHC Langate	50	0	0	50
4	CHC Kralpora	10	0	0	10
5	CHC Sogam	50	0	0	50
6	CHC Tangdar	30	0	0	30
7	PHC Panzgam	40	0	0	40
8	PHC Keran	5	0	0	05
9	PHC Machil	10	0	0	10
10	CHC Zachaldara	5	5	0	10
11	PHC Gonipora	0	30	0	30
12	PHC Natnussa	0	30	0	30
13	PHC Cherkoot	0	30	0	30

14	PHC Nagri	0	25	0	25
	Total	340	120	18	478
15	Panchayat COVID Care Centre	385	1540	0	1925
	Total	725	1660	18	2403

Source: CMO Kupwara

CHC: Community Health Centre, PHC: Public Health Centre

The level of preparedness of the government machinery to meet the challenges arising out of this deadly disease was gauged through the questionnaire, where 5% of participants were highly dissatisfied, 70% satisfied, 5% neutral, 12% satisfied, and 8% highly satisfied. It shows that the majority of the participants were dissatisfied. It may be because of the contagion spread, which was novel. Moreover, initially, the administration was caught unawares.

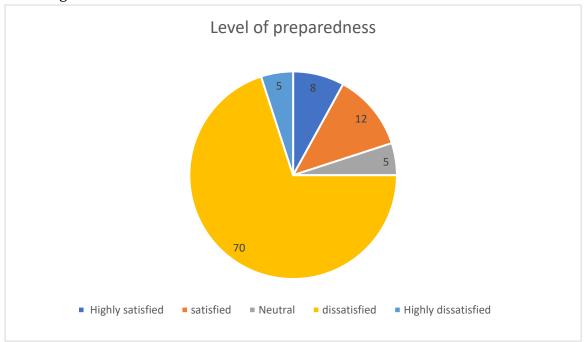


Figure 1: Level of Preparedness at the District Level

Concerning the infrastructural availability within the district, 0% of participants were highly satisfied, 30% dissatisfied, 20% neutral, 30% satisfied, and 20% highly satisfied.

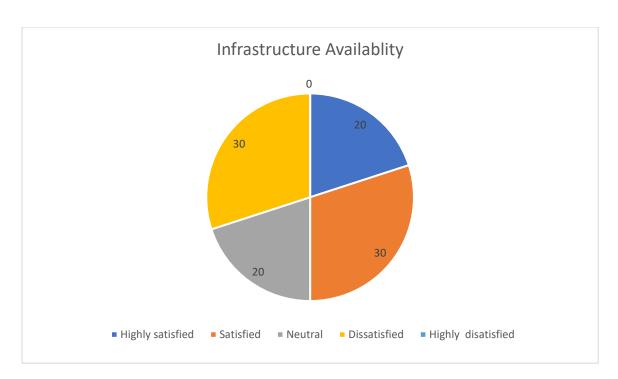


Figure 2: Availability of Infrastructure at the District Level

Concerning the effective functioning of the district administration, interdepartmental coordination was considered highly dissatisfied by 25% of the participants, 10% were dissatisfied, 30% were neutral, 35% were satisfied, and none of the participants was highly satisfied.

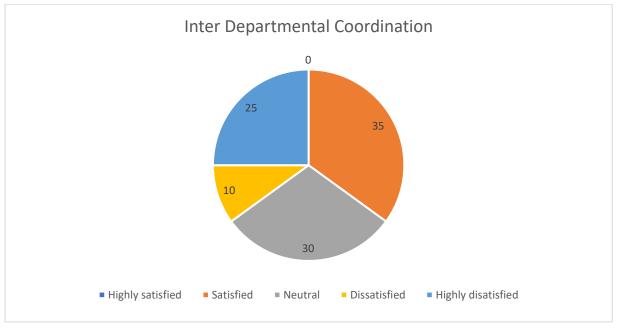


Figure 3: Inter-Departmental Coordination at the District Level

During the outbreak, the district administration's information dissemination or public relations aspect was rated as highly dissatisfied by 8% of participants; 22% considered it dissatisfied, 40% were neutral, 20% were satisfied, and 10% were highly satisfied.

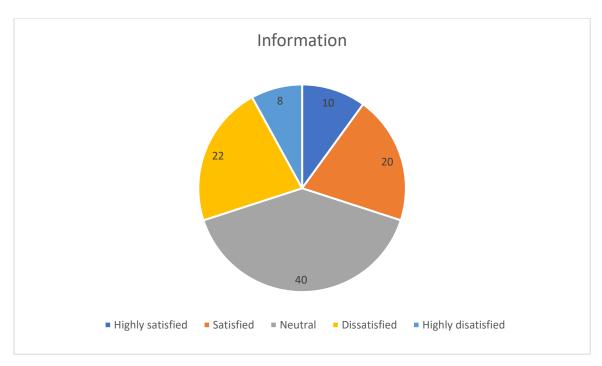


Figure 4: Information Dissemination during the COVID-19 Pandemic by District Administration

Conclusions and Suggestions

The district administration of Kupwara played a crucial role in the fight against the COVID-19 pandemic. Despite the lack of facilities and the unprecedented nature of the contamination, it was successful in achieving its main goals, which included providing top-notch services in trying circumstances. During this period, the main obstacle in the overall governance was that necessary skill sets and well-defined rules were not there. The District administration has a difficult job due to the lack of resources and personnel. Numerous facilities quarantined and treated thousands of COVID-19 patients. In battling the challenges, the government demonstrated commitment, vigour, cooperation, and visionary leadership in public service. Future policies and initiatives must take districtlevel management into account, according to policymakers. This level of administration is considered the foundation of the whole administrative structure. It should have all the necessary facilities and workforce to tide over crises in the future. Information Technology tools and other advanced mechanisms should be a routine part of the system, particularly in far-flung districts. Regular capacity-building measures need to be undertaken. Well-equipped district administration might be a game-changer in the field of disaster management.

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The response measures put in place for COVID-19 containment by the UT of J and K have proved to be somewhat successful as the reported cases are much less than the numbers predicted earlier. The coordination between various sectors is the prime key to face such challenges in the futuThe r measures put in place for COVID-19 containment by the UT of Jammu and Kashmir have proved to be to some extent successful as the reported cases are much less than the numbers projected earlier. The harmonization between various sectors is the key to face such challenges in the future.