

Preparedness to deal with Covid-19 and other pandemics in future

Suggestions from Ashoka University

The Parliamentary Standing Committee on Science and Technology, Environment, Forests and Climate Change is scheduled to meet on 10th July 2020 to discuss the ‘preparedness to deal with COVID-19 and other pandemics in future’. In this respect, **Ashoka University**, the leading liberal Arts and Sciences University in India, after due consultations with subject experts and faculty, submits its suggestions to the Parliamentary Standing Committee.

The suggestions are listed below.

I. Science & Technology and Education

1. Formulation of an effective and efficient mechanism for disease modelling in India, especially the modelling of epidemic diseases.
2. Encouraging independent modelling efforts that target the same data in place, for a broader and deeper, multi-disciplinary perspective. For example, academic scientists can implement the latest developments in machine learning as well as cutting edge statistical methods into their models much faster, simply because these are discussed in the academic literature long before they become general-purpose tools.
3. Enhanced funding for studies in disease ecology, including sentinel surveillance (to track potential spill-over events arising from human-animal interface). In other words, streamlining the system of disease surveillance and reporting.
4. Ensuring that the syllabi for school education, carefully developed over decades, is not tampered in the name of pandemic and in the pretext of reducing the course load.
5. Furthering education, teaching and learnings on climate change and environment.
6. Enhanced focus and concentrated action across all government sectors and society, towards reducing antimicrobial resistance (AMR) which is perceived as serious public health problem.
7. Formation of a high-level panel to determine standards of public health data collection, archiving and accessibility of data.
8. Collection and availability of reliable, trusted and updated data in public domain to examine the progress of COVID-19 similar pandemic infections manifesting in Indian

patients, evaluate complex relationships between pre-existing conditions, age-bracket and socio-economic class, and the possibility of serious illness upon infection.

9. Increasing the number of cross-country training and collaborative initiatives in epidemiology in South and South-East Asia.
10. Provision of financial grants and adequate funding which support the institutionalization of new departments / research centres of epidemiology in higher education universities.
11. Enabling and ensuring greater functional autonomy in the functioning of National Centre of Diseases Control (NCDC) and similar agencies and organisations.
12. Encouraging formation of a national consortia of academic / research institutions and industry to reduce India's import dependency on medicinal drugs & medical devices, strengthen domestic manufacturing capabilities and ensure uninterrupted supply of goods and services within the country.

II. Development

1. Running periodic awareness camps for Non-Governmental Organisations (NGOs) working at the grassroots levels, to ensure effective communication and correct dissemination of information.
2. Universalizing and expanding Public Distribution System (PDS) to mitigate hunger and starvation.
3. Issuance of temporary ration cards to individuals not possessing one, regardless of their origin, caste, creed and color.
4. Ensuring immediate release and distribution (to the needy sections of the population) of excess reserve of food grains stocked in the godowns of Food Corporation of India (FCI).
5. Forming an effective social safety net and enabling the disbursement of direct cash transfers to the needy sections including workers and labourers in urban and rural areas, through formal distributions channels like banks or panchayats (especially in rural and district areas).
6. Ensuring adequate supplies of essential goods like food and medicines through reliable and automated supply-chain networks, besides cash and in-kind transfers.

7. Increasing the allocation of budget to Mahatma Gandhi National Rural Employment Guarantee Scheme (MGNREGS) to accommodate and meet the increased demand for job.
8. Implementation of a scheme on the lines of NREGS in urban areas of an extension of NREGS to urban areas. Alternately, ensuring a distribution of universal basic income to workers, labourers (especially those who were working in the informal sector) who have lost their jobs as a result of the pandemic.
9. Ensuring the regular disbursement of salary / wages and adequate protection of frontline health workers [such as the ASHA workers, doctors, nurses and technicians in hospitals, auxiliary nurse midwife (ANM), etc]. The health staff must be adequately compensated during such pandemic times.
