COVID-19
BOOK OF FIVE
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What is my role: ANM, ASHA, AWW

Health – ANM Under guidance of DSO/MO

- Provide information
  (a) Preventive and control measures including social distancing
  (b) Addressing myths and misconceptions;
- Support DSO on
  (a) Contact tracing as per SOPs
  (b) Implementing home quarantine,
  (c) Address psychosocial care and stigma and discrimination.
- Reporting and feedback
- Team safety and prevention
- Supportive Supervision

Health – ASHA, CHV (in urban areas) and ICDS – AWW Under guidance of ASHA Facilitator and CDPO

- Community awareness through inter-personal communication
  (a) Uptake of preventive and control measures including social distancing
  (b) Addressing myths and misconceptions;
- Support ANM/Supervisor in house to house surveillance including
  (a) Identification of HRG and probable cases
  (b) Ensure uptake of medical services in urban and rural areas and
  (c) Address psychosocial care and stigma and discrimination.
- Reporting and feedback
- Personal safety and precautions
- Use of COVID 19 IEC materials
It is a disease called Coronavirus Disease-2019 caused by a Coronavirus named as SARS-CoV-2

The symptoms of COVID-19 are Fever, Cough and Difficulty in breathing

If you have the symptoms of Fever, Cough or Difficulty in Breathing

You are a contact of a laboratory confirmed positive case

You must immediately call the State Helpline Number or Ministry of Health & Family Welfare, Government of India 24x7 helpline 011-2397 8046, 1075 or your ASHA/ANM.
### What are the safe practices to be promoted

1. **Frequent handwashing**  
   a. Regularly and thoroughly wash your hands with soap and water for 40 secs or 70% alcohol based hand rub

2. **Maintain social distancing**  
   a. Practice at least 1 metre distance between yourself and others.  
   b. Avoid going to crowded places  
   c. Avoid organising and attending events, prayers, parties

3. **Avoid touching eyes, nose and mouth**  
   a. Because contaminated hands can transfer the virus to your eyes, nose or mouth

4. **Practice good respiratory hygiene**  
   a. Cover your mouth and nose with handkerchief or tissue when you cough or sneeze.  
   b. Dispose of the used tissue immediately in a closed dustbin.  
   c. Wash your hands with soap and water for 40 secs or rub hands with 70% alcohol based hand sanitiser

5. **Stay informed, take care and follow advice from ANM / ASHA / AWW**  
   a. Stay informed on the latest developments about COVID-19  
   b. Check with the ASHA / ANM / AWW or PHC on any queries you have on how to protect yourself
Anyone with acute respiratory illness {fever and at least one sign/symptom of respiratory disease (cough, difficulty in breathing),

A history of travel to or residence in a country/area or territory reporting local transmission of COVID-19 disease during the 14 days prior to symptom onset;

Anyone with any acute respiratory illness AND having been in contact with a confirmed COVID-19 case in the last 14 days prior to onset of symptoms;

Anyone with severe acute respiratory infection {fever and at least one sign/symptom of respiratory disease (cough, difficulty in breathing} AND requiring hospitalization;

A case for whom testing for COVID-19 is inconclusive.

Laboratory Confirmed case: A person with laboratory confirmation of COVID-19 infection, irrespective of clinical signs and symptoms.
WHO IS A CONTACT CASE

1. Staying in the same house without proper protection with COVID-19 patient

2. Staying in the same close environment as a COVID-19 patient (including workplace, classroom, household, gatherings)

3. Traveling together in close proximity (less than 1 m) with a symptomatic person who later tested positive for COVID-19

4. Person providing direct care to a COVID-19 patient

5. The infection may have been transferred within a 14-day period before the onset of illness in the case under consideration
**Visiting Contact:** Community Surveillance done by visiting the local residence of the contact(s) by Health Personnel. Telephone may be used in certain circumstances or for follow-up. Follow precautions.

**Introducing purpose:** Introduce yourself, explain purpose of contact tracing, collect data in prescribed format.

**Use Formats:** Community Surveillance to include identification of extended social networks and travel history of cases during the 28 days after onset of illness.

**Monitoring:** Contacts of confirmed cases traced and monitored for at least 28 days after the last exposure to the case patient for evidence of COVID-19 symptoms as per case definition.

**Follow-up:** Information about contacts can be obtained from:
- A patient, his/her family members, persons at patient’s workplace or school associates, or
- others with knowledge about the patient’s recent activities and travels
Always be polite. Anyone can get affected by COVID-19. Do not discriminate, shout, or use rude language. Tell people about the purpose of your visit and what you will do with the answers you are seeking. Say that this is the support that the government is giving to all citizens.

Keep distance of 1 meter: When you meet people, avoid touching or close physical contact. This is true for passing on infection either way. It is better to sit in the open and speak with the family members if space and situation allows.

Interview: Ask questions and get very specific answers. When you are writing, make sure your writing is clear and complete information (addresses, names, contact numbers) is written legibly.

Feedback: Check if people have understood your messages correctly by taking feedback and asking them to repeat what you have advised or shared.

Clarifications: If there are questions and you have the answers, you must share this with the community member. However, if you do not have the answer, do not hesitate to say so. A lot is still unknown about COVID-19.

Be Prepared when you go to the field:
- Carry a Sanitizer/soap for cleaning your hand
- Carry your formats
- Carry your own writing materials like pen, writing pad
- Carry your masks and extra masks if required

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HOW TO CREATE A SUPPORTIVE ENVIRONMENT

1. Talk to and involve Influencers
   a. Make a list of local influencers (Gram Pradhan, Religious Leaders, Teachers, any other)
   b. Explain & discuss the situation and protocols to be followed and seek their support in awareness campaign

2. Plan community support for high risk groups
   a. Make a list of high risk people in the village as per contact tracing protocols
   b. Identify people they meet or talk to; share preventive measures with these people and request them to keep communicating these measures to the high risk people
   c. Take care of children whose parents may be in quarantine for issues of education and/or care

3. Develop community networks for support
   a. Divide village into smaller groups for emergency planning, keep contact details of group coordinators
   b. Share contact details of ANM, ASHA, AWW Ambulance, and other medical support with them
   c. Share coordinating details of child protection committees for addressing issues of trauma and violence in children.

4. Help develop household emergency contact lists
   a. Ensure each household has a current list of emergency contacts of the government help line, ANM, ASHA or AWW

5. Raise your voice against Stigma and Discrimination
   a. Identify stigma and discrimination situations in the community
   b. Talk to the affected households to support them in time of need.