



Importance of Local Governance in Crisis Management

Cities across the world have become hotspots of COVID-19 pandemic. While quality of health services is crucial in dealing with the pandemic, other precautionary measures like contact tracing, quarantine, social distancing also play an important role in curbing the spread. Administration of cities through decentralised and localised management of crisis becomes crucial during such times. Effective coordination between the elected representatives, executive officials and local CSOs brings about rapid responses to fight such crises in the city. Efficient local governance forms the backbone towards ensuring better response to the current crisis.

Study on COVID-19 Response Mapping

Even after 25 years of the 74th Constitutional Amendment Act, we have found that it is not implemented in true letter and spirit throughout the country. The COVID response mapping study by Praja, has only cemented this statement as majority of city governments are playing a limited role in terms of decision making and response actions, barring a few major cities, during the crisis. This points to the need for a vital discussion on the learnings from the response actions undertaken in cities against the COVID crisis, and immediate actions to be taken for improving city governance towards better management of such crises in the future.

The decentralised and efficient delivery of public health services has always been vital, especially in this pandemic. In line with this, the Twelfth Schedule in the 74th Constitutional Amendment Act has provisions on the need for State Government to devolve Public Health function to the City Government. Under such circumstances, it is crucial to understand how City Governments across the country handled the COVID -19 crisis in cities.

Hence, to understand the response of local governments to the COVID-19 pandemic, Praja conducted a study involving its network of stakeholders from **29 cities**¹ across all **28 States and NCT of Delhi** in the initial phases of lockdown during **May and June 2020**.

- The study included a random sample² that comprised of stakeholders such as Elected Representatives (ER), local administration and civil society organisations from the 29 cities.
- Interview questions were set to capture the perceptions of the stakeholders interviewed and to get directional information on the city responses to the COVID crisis.

Key data findings of covid-19 response in 29 cities during the initial phase (May and June 2020)

1. Eight cities do not have an active functioning city government council as municipal elections are yet to be held.



2. The city government in Ranchi, Mumbai, Bhubaneswar, Coimbatore has control over the delivery of public health service.

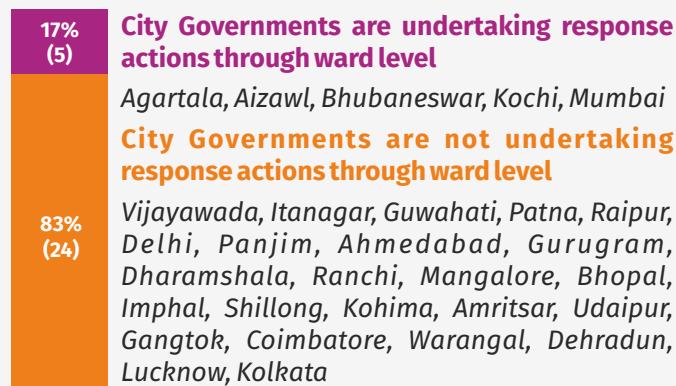


1: Agartala, Ahmedabad, Aizawl, Amritsar, Bhopal, Bhubaneswar, Coimbatore, Dehradun, Delhi, Dharamshala, Gangtok, Gurugram, Guwahati, Imphal, Itanagar, Kochi, Kohima, Kolkata, Lucknow, Mangalore, Mumbai, Panjim, Patna, Raipur, Ranchi, Shillong, Udaipur, Vijayawada, Warangal.
2: ** Total Sample – 58 Stakeholders across 29 states (ERs – 39; Administrators – 8; CSOs – 11)

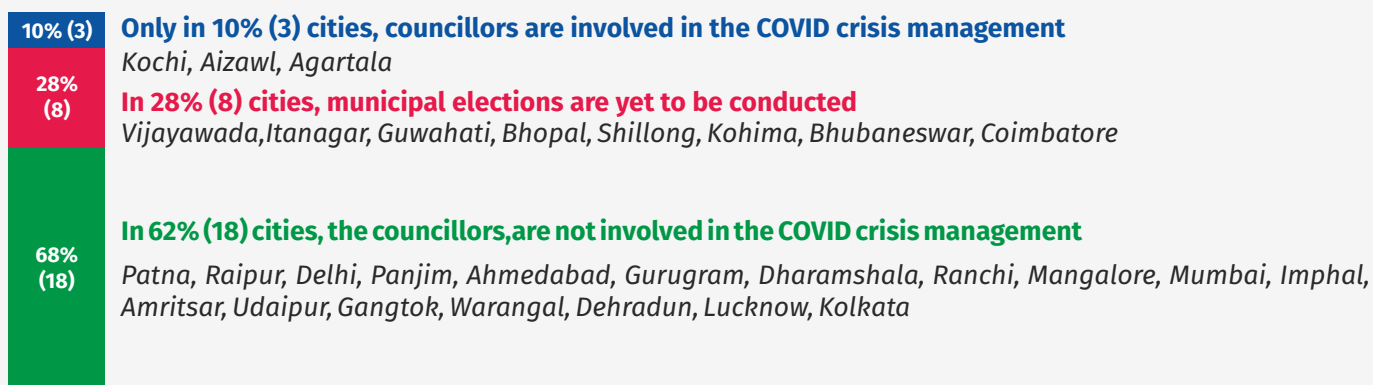
3. **Only in 7 cities** the City Government is involved in COVID crisis management.



4. The City Government in **Agartala, Aizawl, Bhubaneswar, Kochi, Mumbai** are undertaking response actions through ward level.



5. Councillors are involved in the COVID crisis management only in **Kochi, Aizawl, Agartala**.



Status of Ward(s) Committee and Area/Ward Sabhas across the 29 cities covered under the study

1. No provisions of Ward(s) committee in the municipal acts applicable to **Shillong, Kohima and Gangtok**.



2. Ward(s) committee constituted only in **Delhi, Ahmedabad, Dharamshala, Ranchi, Mangaluru, Kochi, Bhopal, Mumbai, Imphal, Aizawl, Bhubaneswar, Udaipur and Agartala**.



3. Ward(s) committee functional only in **Delhi, Ahmedabad, Dharamshala, Kochi, Mumbai, Imphal, Aizawl, Bhubaneswar and Agartala**.



1. No provisions of Area/Ward Sabha in the municipal acts applicable to **Raipur, Delhi, Panaji, Ahmedabad, Gurugram, Bhopal, Imphal, Shillong, Kohima, Bhubaneswar, Udaipur, Warangal, Agartala, Lucknow and Dehradun**.



2. Area/Ward Sabha **constituted and functional** only in **Dharamshala, Kochi, Aizawl and Gangtok**.



Yes No Not applicable

Case Studies



The Royal palace of Tripura

1. Agartala

The Agartala Municipal Corporation (AMC) utilised the ward committees led by the Mayor and respective councillors across the city for discharging immediate relief measures as a result of the COVID crisis. Key actions taken:

- Volunteers across wards undertook thorough sanitation measures, with special handling of wastes from institutional quarantine centres.
- Localised monitoring and enforcement of COVID-19 norms issued at each ward.
- AMC used shelter home kitchens for supply of cooked food to the migrant workers.
- Ward wise resident population and other related data were used as a base for the planning.
- Self-help groups across the city prepared around 1,60,000 masks and distributed to frontline workers and others.



Aizawl cityscape

2. Aizawl

Task Forces were formed in each local area (Local Council Task Forces) to fight the crisis. The Local Council Task Forces that were created includes the Local Council chairman and members, health workers, the church, Young Mizo Association (YMA) and other Civil Society representatives working in full coordination. Ward councillors and city administration have been actively coordinating and supporting the Local Council operations. Key actions taken:

- Distribution of food, sanitary kits and other relief supplies.
- Community enforcement of COVID-19 guidelines and social distancing norms.
- Church and YMA made quarantine arrangements and provided required facilities.
- Strong coordination right from State to City Government to Local Councils in order to administer and localise management of crisis.
- Awareness measures through diverse mediums such as WhatsApp, Posters and songs.



Pobitora Wildlife Sanctuary

3. Guwahati

Nagrik committees were formed across different areas of the city as a result of COVID crisis to undertake local area monitoring and management. The committee has former area sabha representatives, former councillors, area volunteers and resident members from the area closely monitoring the situation in respective areas. The police have also been supporting the committee in enforcement of social distancing norms, monitoring patient households if any and safeguarding the institutional quarantine facilities Key actions taken:

- Local level monitoring of home quarantined households and safeguarding institutional quarantine facilities.
- Spreading awareness in slums and among urban poor communities in the area.
- Distribution of rations.
- Enforcement of social distancing norms in the area.



Kochi

4. Kochi

Councillors of Kochi Municipal Corporation (KMC) were given full responsibility to administer the situation in their respective wards and to actively coordinate with other key actors for localised COVID crisis management. Key actions taken:

- The local councillor and the administration were informed when a new person arrives in the ward through the e-permit system.
- Following this, the councillor and the volunteering team inspected the house of the concerned person coming to check if home quarantine is applicable or whether institutional quarantine is required.
- One community kitchen each across 10-11 wards in the city were set up to feed three-time meals to about 600-700 people every day.
- Community Kitchens are being run by the State establishment 'Kudambashree' under poverty eradication and women empowerment programme. Elected representatives from both State and City government are in continuous coordination to use the set up to help the migrant labourers.
- Distribution of rations including 15 kgs of rice to most families was also ensured.

Post the initial phase of lockdown i.e., after June 2020, all City Governments and State Governments started working closely wherein city level response and localised interventions began to be undertaken. However, cities across the country were gravely impacted by then. It was imperative that city level crisis management through the City Governments along with active coordination with State Governments take place since the initial phases of the pandemic. The experience undergone during this period has clearly pointed towards the need to empower our City Governments to fight such crises in the future. On this note, we have highlighted the key takeaways from the data points and case studies covered through this study.

KEY TAKEAWAYS



Role of State Government

- Under the provisions of Epidemic Diseases Act, 1897 and The National Disaster Management Act, 2005, the State Government must ensure that City Governments are authorised with larger control of disaster or crisis management at city level.
- State Government should devolve the ‘Public Health’ function to City Government with independent authority and control.
- State Government should provide advisory support to operationalise City Government’s response actions on ground.

Role of City Government

- The Mayor should hold authority to spearhead the disaster or crisis management at the city level.
- Ward councillors should be authorised for implementation of rapid response actions and effective reach out to the citizens at ward level.
- Citizen Engagement and Role of Citizens

Citizen Engagement and Role of Citizens

- Councillor and city administration should involve and coordinate with diverse group of stakeholders such as area level representatives, RWAs, CSOs, police and health workers etc. through the ward committee or area sabha platforms for effective and rapid response.

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November 2020

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