

A Study on COVID 19 Awareness and Preventive Measures in Selected Villages of Cachar, Assam

Prof. Gangabhushan M. Molankal*

Chayan Deb

Abstract

The spread of COVID 19 has been so colossal that no region of the world is saved to face the wrath of its impact on the socio-economy of societies. The only way to control the spread of this pandemic is to make people follow social distancing as far as possible. However, the social fabric of India thrives on interdependence within families, relatives and friends. People are closely connected to meet the economic and emotional ends. While these features are extremely common among Indian societies, these are also deterrent to 'social distancing' as mandated during this pandemic. These special features of Indian society demand more safeguarding provisions to reduce the risk of spreading. One of the very important measures that could be taken up is to spread awareness and information to the core of society.

The paper intends to identify the level of awareness among the people who are somehow confronted with this pandemic. It tries to identify the precautionary measures taken by the respondents and his/her family as well as society to tackle the spread of pandemic. The paper focuses on the impact of Covid 19 on the livelihood of the respondents and their coping strategies to defy the impact brought by this mammoth pandemic.

Key Words: Covid 19, Awareness, Preventive Measures, Pandemic, Migrants.

About COVID 19

Corona Virus Disease 2019 (COVID-19) originated in Wuhan has spread throughout China from December 2019, which has seriously threatened human health (Huang et al., 2020). On 30th January, WHO announced the novel corona virus pneumonia (NCP, later renamed as COVID-19) epidemic as Public Health Emergency of International Concern (WHO, 2020). According to the statistics of the National Health Commission of the People's Republic of China, 81,054 confirmed cases, 687,680 suspected cases and 3261 deaths had been reported in Chinese mainland up to 24:00 on March 21 (NHCPRC, 2020). The COVID-19 pandemic has caused severe threats to the lives and physical health of people around the globe (Qiu et al., 2020).

In response to the problems posed by the pandemic, various public health strategies such as isolation of infected or at-risk persons, reduction of social contact, and simple hygiene like frequent hand wash, have been advised to reduce the risk of infection. Although isolation helps in achieving the goal of reducing infections, reduces access to family, friends, and other social support systems, causes loneliness increasing mental issues like anxiety and depression. (Zhou et al., 2020).

The outbreak of COVID-19 exerted a multi-facet impact on daily life, jeopardizing people's access to social networks. To prevent the spread of covid-19, the Government of India and the State Governments have issued various prevention and control policies, and actively taken various prevention and control measures to control the epidemic. The Ministry of Health and Family Welfare, Govt. of India, has provided health advisories, videos, posters and even conducted webinars on handling mental health issues of individuals and children. More information on the same can be obtained at '<https://www.mohfw.gov.in/>,' a government-administered website. (Government of India, 2020)

Resilience is an individual's capacity to deal with significant adversity and quick recover (Fletcher and Sarkar, 2013). Due to highly contagious COVID-19, and the lockdown, people lost contacts and had to face isolation and the respondents have to cut off the direct contact with other people, and confined to their home. Therefore, the availability of support services

plays an important role in mitigating the issues arising out of the lockdown. During such stressful situations, the concerned government, hospitals, educational institutions, organizations, and even individuals need to look into psychological intervention and adopt necessary measures. In addition to educating individuals to stay isolated, it is vital to educate and prepare them to face the mental health issues they may endure during the period (Banerjee, 2020; Dickerson, 2020; Zandifar and Badrfam, 2020).

The spread of Corona Virus Disease 2019 (COVID-19) has become a global crisis and has given rise to impact on social, economic, and health status of people. The Government of Assam has started a YouTube channel for spreading awareness among the public regarding the precautions to be taken against COVID-19 (Youtube, 2020). Also, the government has launched a mobile application called COVAAS for users to get information and updates regarding the COVID-19 in Assam. The app also incorporates the application of lockdown pass, live help desk and many more (News Live, 2020). The government with the help of National Informatics Centre (NIC) of Assam, has launched an app called COVID Suraksha to monitor the status of each home quarantined persons (The Telegraph, 2020).

The Studies

This study is to investigate the level of awareness about the causes and prevention of corona virus and how it has impacted their lives. Cachar district of Assam also has witnessed increasing number of Covid 19 cases. According to Corona Virus Outbreak Control Daily Checklist of District Commissioner, 31019 number of people suspected with Corona Virus Exposure with 1501 number of people diagnosed as Corona virus Positive by the end of July 2020 (Government of Assam, 2020). Guidelines are issued by the local administration to deal with pandemic situation. Information was disseminated through various means of communication namely mass media and different social media to prevent further spread of Covid 19. With the advent of lockdowns, there has been a great impact on the rural people. Adjoining villages of Assam University were selected and NSS volunteers, Social Work Department students including the author himself participated in the data collection process. The purpose of this study was to build an understanding of the awareness levels of the villagers on Covid-19;

how did the villagers withstand various challenges posed by Covid 19; what strategies were adopted by the village to combat the challenges posed by Covid 19. The study involved designing of tool for conducting interviews and data collection within a period of ten days in the month of July 2020. By keeping these objectives in mind, a total of 67 respondents were interviewed from the selected four geographical villages.

All participants received an informed consent before data collection so that they could choose whether or not to participate, and withdraw at any time if they wish. Frequencies and percentages were calculated for descriptive analysis. The primary data collected from the respondents have been substantiated with the online data from Government departments.

Methodology

Research Universe

The survey was done in the adjoining villages of Assam University namely Irongmara, Dorgakona, Brojalenga and Rosekandy of Cachar district of Assam. Among all the four villages, Irongmara is found to have a maximum number of respondents i.e. 36% followed by Doragkona, Rosekandi&Borjalenga with 28%, 24% and 12% respectively.

Profile of the Respondents

The profile of the respondents comprises of data on the personal, social, demographic, educational and economic backgrounds of the respondents (Table 1). The personal backgrounds of the respondents comprise the age backgrounds, educational background and gender status of the villagers selected from the four geographical communities chosen for the study.

Age

The age group of 18-28 years 49-58 years of age has maximum and equal number of respondents with 26.9% followed by 29-38 years of age with 23.9%. Age groups of 39-48 years found to be with 22.4 % respondents.

Gender

Gender background also determines its significant roles in providing services, securities to the male and female child. With regard to the gender,

male respondents are predominant in the study with 79.1% of the respondents are male. Thus, this survey found out that still women's mobility is controlled by the patriarchal ideologies, power and social structure in the villages.

Education

Primary Education with 33.8% is found to be the qualification of the maximum number of respondents followed by Graduation with 18.5 %, Higher Secondary with 12.3% and others.

Marital Status

Marital status of the individual has very vital significance in the village social structure which determines the women's social status and security. Most of the respondents are found married with about 65 percentage. It is followed by unmarried and the widow with 31.3% and 3% respectively.

Occupation

Since this study is conducted in villages, most of the respondents are showing their job profile under the unorganized sector. This comprises the job in agricultural work, wage labour, contract labour, self-employed, private job and domestic work. There are very few respondents engaged in government sector. Barring very minimum respondents, all the other respondents are found to be engaged in the unorganized sector for earning their livelihood. Maximum number of them are absorbed under self-employment, wage labour and agricultural activities with 23.4%, 18.8% and 12.5% respectively (Table 2).

Monthly Income

Occupation plays a significant role in the family income. The study revealed that most of the respondents earn irregular, very minimum and hand to mouth income. Therefore, any sudden shock can adversely affect their livelihood and income. It is found that about seventy percent of the respondents have income less than Rs. 8000/ per month and are resorting to various coping strategies to live by the hard days (Table 2)

Of all the respondents more than eighty-three percent responded 'yes' when asked if the ongoing lockdown had any impact on their income.

The predominance of agriculture, the unorganized nature of the job and low-income level reflects the economic vulnerability associated with the job profile in the rural area.

Awareness on COVID 19

In the era of information abundances, no people have been left unknown about the current pandemics and its related aspects. In the study, almost all the respondents reported of knowing about Corona Virus (Table 3). The source of information is being News Paper and TV. However, about fifty percent of the respondents informed that they were informed both by TV and Newspaper. Information on News channels and in awareness advertisements broadcasted by the government played a significant role in promoting awareness among the rural masses.

The respondents had some sort of knowledge about the symptoms of the disease. About seventy percent responded very accurately saying that COVID 19 infection might show all the symptoms like Cold, Cough, fever, difficulty in breathing. Only a small fraction of respondents responded with either of these as the symptoms of COVID 19. Most of the respondents are found to know that social gathering can spread infection and maintaining physical distance can help to stop the spreading of infection.

Almost fifty-five percent have rightly reported that all small children, malnourished children, pregnant women, diabetic person and the person with the less immune system are more vulnerable to COVID 19. Others have less information that COVID 19 can damage any person with less immunity.

None of the respondents has reported having any members with COVID 19 infection. However, more than nineteen percent of the respondents have reported that some members of their locality have been found with COVID 19 infection. Those that have been found with COVID 19 infection are quarantined (38.46%) and sent to Government Schools (61.53%).

Preventive Measures Adopted by the Respondents

The study revealed that all the respondents are taking some sort of precautionary measures to curtail the risk (Table 4). About seventy-three

percent reported that they are frequently washing their hands, wearing masks, not going out of the home. Surprisingly one person was found to have taken none of the precautionary measures.

Time to time, the Government of India issued guidelines to follow the preventive measures. The AyushMantralaya of Government of India has suggested some preventive medicines from Ayurveda, Homeopathy and Unani disciplines as a preventive measure. Among all the respondents 41.5% has used Pranayama to prevent the spread of Corona Virus. It is followed by the use of Other Medicines, Ayurvedic Medicine and Homeopathy with 26.8%, 22% and 7.3% respectively. Rest of the respondents has not used either of these to prevent the spread of corona virus.

Preventive Measures Adopted by the Local Government and Civil Society Organisations

With the advent of the declaration of lockdown by the Central Government and declaration of preventive measures by the State Government to control the situations, Lockdown is declared onwards since the first week of March 2020. Under the lockdowns, the Village Gram Panchayats have given instructions to control the village activities. Village Gram Panchayats played very significant roles with the help of governmental agents such as village secretaries, Doctors, Police, ASHA Workers and local Non-Governmental Organizations (NGOs) to apply preventive measures in their respective villages.

Preventive Measures for Migrants

Decline of economic activities in urban areas has given rise to several problems in the rural areas. A significant proportion of rural household incomes come from migration and daily-wage labourers. The decline of informal industry in cities has resulted in loss of rural income. What's more, massive layoffs and lack of relief measures are pushing migrant workers to return, which would increase the risk of the spread of the virus. The people from the study area who resorted to out-migration to various metropolitan cities of the states like Karnataka, Maharashtra, started returning to their villages. This required mandatory provisions for Institutional/ Home quarantines by the State Government monitored by the village administration to coordinate with the State Government Agencies for facilitating quarantine

centres. Out of the 65 respondents, it is revealed that nearly 39 percent of the respondents are aware that the out migrants of their village have returned back and also they are aware about the initiatives taken by the Panchayats. About forty-four percent of the respondents are aware that migrants are given home quarantined, another 14 percent respondents knew that migrants were quarantined in the schools and more than thirty percent of the respondents stated that the migrants were sent to the government hospital for quarantine (Table 5).

Role of local government institutions is pivotal in addressing the pandemic through adopting preventive measures. Around 48 percent of the respondents stated that distribution of masks by the village panchayat prevented further spread of COVID 19. More than one third of the respondents have mentioned about cleanliness drive, distribution of masks, distribution of sanitizers, organization of health checkup camps as measures taken in regard to COVID 19. Civil society organizations also played a pivotal role in promoting awareness about the prevention and further spread of Covid 19. However, about nine percent of the respondents have said that the GP has done nothing in regard to COVID 19 infection.

Socio - Economic Impact

Covid19 pandemic has an adverse impact on the economic conditions due to the suspension of most of the economic activities in urban areas, which has an indirect impact on the rural livelihood systems. In rural area agriculture work was allowed to continue as per the seasonal need of harvesting and sowing. But the rural area is tightly attached to the urban area for its economic transaction and hence there has been an adverse economic effect in a rural area too. Almost 83% of the respondents experienced a decrease in their income and livelihood in one way or other. 15.3% mentioned that there has been a decrease in the sale. Whereas others reported that they have lost their job and loss of earnings from agriculture (Table 6).

During lockdown, majority (86%) of the respondents had experienced various problems in access to essential items like supply of grocery, vegetables, etc. others managed from the limited resources.

It was found from the study that among the measures adopted by respondents to meet their daily needs was use of previous savings, borrowing money from others, diversification in their work. Lockdown has forced many people to cut down their daily expenditure on account of the absence of any active income. A very interesting finding was occupational diversification of the respondents. 28.6% of the respondents have reported having 'engaged in other works' (Table 7). Livelihood theories suggest that sudden unplanned diversification, which is the result of sudden shocks cannot be beneficial for the households and many a time it adds to miseries of the poor. It is alarming especially for the poor with very minimum income who are very unlikely to repay the debt very soon and gets trapped in the vicious circle of poverty.

Economic activities cannot be separated from social activities. Besides economic loss, the lockdown has hampered the social lives of the people and especially curtailed their social participation. As stated by more than 72 percent of the respondents, due to lockdown they could not participate fully in the social gatherings like marriage and could not extend help to others due to the threat of spreading of Covid 19.

Role of Different Actors in Rendering Help

Various actors played an important role in rendering help to the needy poor in the villages. These actors include the Government machineries, local clubs, Non-Governmental Organizations (NGOs), voluntary organizations and community-based organizations who played significant philanthropic roles during this period. During the lockdown, however, barring two respondents, all the respondents mentioned about assistance in one form or other from Government and other sources. Around 40 percent of the respondents have stated that they have received government assistance followed by the local clubs, NGOs, Rich people and others (Table 8).

The major beneficiaries are those who have received money from Jan Dhan Yojana. More than 27 percent of the respondents have received money under Jan Dhan Yojana; same percentage of respondents have received food grains under PDS. The rest of the respondents have received financial help from other sources.

Perceived Future Challenges

The thought of losing their employment and income is haunting the villages. As found, more than 48 percent of respondents have apprehension that they will lose their income further in the future. A small fraction of people believes that they may lose their employment itself. More than 30 percent of the respondents could not say anything, due to the prevailing uncertainty (Table 9).

Use of E Payment Options during Lockdown

COVID 19 has marked an increase in the use of e payment options. About one-third of the respondents mentioned that they have used e payment options during the lockdown. More than 24 percent of the respondents have said, they have used Google Pay, followed by internet banking and Amazon Pay with 17.1% and 2.4 % respectively. 28.3% of the respondents have used e payment for mobile recharge, followed by electricity bill payment and grocery payment with 18.9% and 5.7% respectively (Table 10).

Addiction Habits

Serious illness from COVID-19 seems concentrated among those who are older and who have underlying health issues, such as diabetes, cancer, and respiratory conditions. It is, therefore, reasonable to be concerned that lung function or lung disease related to smoking history, such as chronic obstructive pulmonary disease (COPD), could put people at risk for serious complications of COVID-19. From the study, it was found that more than 28 percent of the respondents have the habit of smoking. Another 23 percent of respondents did not reveal about their addiction habits. Out of those who responded that they have a habit of smoking, nearly 12 percent revealed that their habit has increased whereas around 11 percent of the respondents mentioned that their addiction habits have decreased.

Recommendations

Proactive role of different stakeholders is prerequisite for safeguarding rural masses from the economic fallout of this pandemic with the following measures:

1. To combat the problem, state governments through the local administration, have to promote awareness about the virus, and its

prevention and to reduce the chance of its spreading.

2. Role of social media is pivotal in spreading the accurate messages; however, care should be taken to prevent rumors about the preventive measures and treatment.
3. Role of civil society is to developing and disseminating Information, Education and Communication (IEC), providing material to promote right awareness and combat the problems.
4. The Government should ensure the functioning of the Mid-Day Meals and Anganwadi meals for the children and the pregnant mothers in the villages.
5. Proper functioning of the PDS is equally important to prevent the hunger among the masses
6. The government should take initiatives to promote rural livelihood focusing on the local resources available. Financial support to the needed people to revive their livelihood, which can prevent them from the exploitation by the money lenders.
7. Capacity building of people in general and vulnerable sections of the society like the small farmers, women and unorganized labour for diversification of their livelihood systems as per the need of the hour.
8. SHGs across the country are proactively engaged in making masks, the support of Government and Non-Government Organizations in promoting the marketing of the locally produced articles to revive their lost livelihood systems.

Concluding Remarks

Covid-19 has a varied impact on the lives of rural masses. A person irrespective of educational background had access to the important information with regard to Covid-19 and has promoted their awareness level with regard to causes and preventions of Covid-19. Social media happens to be an important media for promoting awareness about Covid-19.

Predominant dependency on agriculture and the unorganized structure caused most of the respondents to remain in low-income category

hence they are economically vulnerable and gets affected by any kind of shocks that adversely affect their income.

To combat the challenges, there were initiatives by the individuals. Various civil society organizations and the local government institutions played a significant role in the dissemination of the crucial information on Covid 19 and role of social media was pivotal in addressing the challenges posed by Covid 19.

Vulnerable sections of the rural masses got access to the distribution of essential items for their survival and prevention of the further spread of Covid-19. However, with the advent of increasing Covid-19 cases, rural people in general and the poverty groups are experiencing more panic about the current situation. Providing a sustainable source of rural livelihood will need a coordinated effort from the various stakeholders.

Appendix : Survey Link

https://docs.google.com/forms/d/e/1FAIpQLScH11cBMzcXiOIDS-zkHp5Wa2OKO96_eo60BBon00pNMRy8A/viewform?vc=0&c=0&w=1

Table 1 Demographic Data

S.No.	Characteristic	Frequency	Percent
I	Age Group	Total: 67	
	a) 18-28 yrs	18	26.9
	b) 29-38 yrs	16	23.9
	c) 39-48 yrs	15	22.4
	d) 49-58 yrs	18	26.9
II	Gender		
	a) Male	53	79.1
	b) Female	14	20.9
III	Education Status		
	a) Illiterate	6	9.2
	b) Literate	6	9.2
	c) Primary Education	22	33.8
	d) Secondary Education	5	
	e) Higher Secondary Education	8	12.3
	f) Graduation	12	18.5
	g) Post Graduation	6	9.2

IV	Marital Status		
	a) Married	44	65.7
	b) Unmarried	21	31.3
	c) Widow	2	3
V	Religion		
	a) Hindu	62	92.5
	b) Muslim	5	7.5

Source: Computed

Table 2 Economic Data

S.No.	Characteristic	Frequency	Percent
		Total: 67	
I	Main Occupation		
	a) Wage labour	12	18.8
	b) Agriculture	8	12.5
	c) Private job	6	9.4
	d) Government job	6	9.4
	e) Self employed	15	23.4
	f) Domestic worker	4	6.3
	g) Other	13	20.3
II	Monthly Income		
	a) Up to Rs. 3000	20	33.3
	b) Rs. 3001 to 5000	11	18.3
	c) Rs. 5001 to 8000	11	18.3
	d) Rs. 8001 to 11000	6	10.
	e) Rs. 11001 & above	12	20
	Not revealed	7	10.44

Source: Computed

Table 3 Awareness on COVID 19

S.No.	Characteristic	Frequency	Percent
		Total: 67	
I	Awareness about Corona Virus a) No b)Yes	2 65	3 97
II	Source of Information a) News paper b) TV, WhatsApp c) All of the above sources	5 27 35	7.5 40.3 52.2
III	Symptoms of Corona Virus a) Cold b) Cough c) Throat Pain d) Fever e) Difficulty in breathing f) All of the above	2 2 0 17 1 45	3 3 0 25.4 1.5 67.2
IV	Knowledge about Covid Spreading a) By touch b) Through Contact a) Through Crowd b) All of the above	22 1 2 42	32.8 1.5 3 62.7
V	Who is prone to Covid 19 a) Small children b) Malnourished children c) Pregnant women d) BP Patient e) Diabetic f) Person with less immune system g) All of the above Not responded	14 1 2 0 1 10 39	20.9 1.5 3 0 1.5 14.9 58.2

Source: Computed

Table 4 Preventive Measures Taken by the Respondents

S.No.	Characteristic	Frequency	Percent
		Total: 66	
I	Precautions taken		
	a) Frequently washing hands	3	4.5
	b) Wearing mask	10	15.2
	c) Not going out of home	4	6.1
	d) All of the above	48	72.7
	e) None of the above	1	1.5
II	Preventive Measures taken	41	
	a) Ayurvedic	9	22
	b) Unani	1	2.4
	c) Homeopathy	3	7.3
	d) Pranayam	17	41.5
	e) Other	11	26.8
	Not taken any of the above measures	26	

Source: Computed

Table 5 Preventive Measures Taken by the Local Government and Civil Society Organizations

S.No.	Characteristic	Frequency	Percent
I	Preventive measures for Migrants	48	
	a) Home quarantined	21	43.8
	b) Quarantined in the school	7	14.6
	c) Quarantined in the hospital	4	8.3
	a) NA	16	33.3
II	Preventive measures for the villagers	65	
	a) Cleanliness drive	3	4.6

	b) Distribution of masks	31	47.7
	c) Distribution of sanitizers	4	6.2
	d) Organization of health checkup camps	1	1.5
	e) All of the above	23	35.4
	f) None of the above	3	5.1

Source: Computed

Table 6 Impact of Covid 19 and Lockdown on Villagers

S.No.	Characteristic	Frequency	Percent
I	Whether there was any impact of lockdown on your income?	59	
	a)No	10	15.3
	b)Yes	49	83.1
II	Impact on Occupation	52	
	a) Lost Private Job	2	3.8
	b) Decrease in sale	12	23.1
	c) Sold agricultural products in loss	3	5.8
	d) Lost work in agriculture	4	7.7
	e) Lost self-employment	13	25.0
	f) NA	18	34.6
III	Problems in access to essential items	58	
	Not faced any problem	9	15.3
	a) Supply of grocery	19	32.8
	b) Vegetables	14	24.1
	c) Fruits	5	8.6
	d) Milk	1	1.7
	f) Other	19	32.8

IV	Problems in Social Participation	65	
	a) Could not participate in marriages	8	12.3
	b) Could not participate in social gatherings	6	9.2
	d) Could not help others	2	3.1
	e) Could not participate in the last rituals	2	3.1
	f) All of the above	47	72.3

Source: Computed

Table 7 Measures adopted to address the Problems faced

S.No.	Characteristic	Frequency	Percent
I	Management of daily needs		
	a) Borrowed money	5	7.9
	b) Used previous savings	26	41.3
	c) Engaged in other works	18	28.6
	d) NA	14	22.2

Source: Computed

Table 8 Nature of help rendered to the poor people in the village during lockdown?

S.No.	Characteristic	Frequency	Percent
I	Help rendered by		
	a) Rich people	5	7.7
	b) NGOs	2	3.1
	c) Local Club	14	21.5
	d) Government	26	40
	e) All of the above	16	24.6
	f) Any other	2	3.1

II	Nature of Help		
	a) Food grains distribution	19	28.8
	b) Financial help	7	10.6
	c) Money in the Jan Dhan Yojana Account	18	27.3
	d) MRNREGS work	2	3
	e) Seeds/fertilizer distribution	0	0
	f) All of the above	17	25.8
	g) No help	3	4.5

Source: Computed

Table 9 Perceived Future Challenges in the near future

S.No.	Characteristic	Frequency	Percent
I	Economic Challenges		
	a) Will lose income	31	58.4
	b) Will lose employment	6	9.4
	c) Will get new opportunities	5	7.8
	d) Will not get any impact	2	3.1
	e) Can't say	20	31.3

Source: Computed

Table 10 Use of E Payment Options during Lockdown

S.No.	Characteristic	Frequency	Percent
I	Used of E Payment Options	63	
	No	42	66.7
	Yes	21	33.3
II	E Options Used	41	
	a) Google pay	10	24.4
	b) Amazon pay	1	2.4
	c) Internet banking	7	17.1
	d) Other	23	56.1

	Not used e- payment	22	
III	Purpose of E Payment used		
	a) For electricity bill payment	10	18.9
	b) For mobile recharge	15	28.3
	c) For gas booking	1	1.9
	d) For grocery payment	3	5.7
	f) NA	24	45.3

Source: Computed

Table 11 Addictive Habits during Lockdown

S.No.	Characteristic	Frequency	Percent
I	Having Addictive Habits	53	
	No	38	71.7
	Yes	15	28.3
II	Addictive Habits during lockdown	43	
	a) Increased	10	23.3
	b) Decreased	6	14
	c) I gave up	0	0
	d) NA	27	62.8
	Not responded	23	39.0

Source: Computed

References

Banerjee, D., 2020. The COVID-19 outbreak: crucial role the psychiatrists can play. Asian J. Psychiatry. 50, 102014. <https://doi.org/10.1016/j.ajp.2020.102014>.

Fletcher, D., Sarkar, M., 2013. Psychological resilience. Eur. Psychol. 18 (1), 12-23.

Government of Assam, 2020 Corona Virus Outbreak Control: Daily Cheklist of Deputy Commissioner, Cachar District. Retrieved on 30/07/2020 from <https://covid19.assam.gov.in/wp-content/uploads/2020/07/DAILY-REPORT-AS-ON-30-7-2020.pdf>

Government of India, 2020 India Fights Corona COVID 19 , [https://www mygov.in/covid-19/](https://www.mygov.in/covid-19/)

Huang, C., Wang, Y., Li, X., Ren, L., Zhao, J., Hu, Y., et al., 2020. Clinical features of patients infected with 2019 novel coronavirus in Wuhan, China.

National Health Commission of People's Republic of China, 2020. Novel Coronavirus Pneumonia Epidemic Situation up to 24:00, March 21st.

Qiu, J., Shen, B., Zhao, M., Wang, Z., Xie, B., Xu, Y., 2020. A nationwide survey of psychological distress among Chinese people in the COVID-19 epidemic: implications and policy recommendations. *General Psychiatry* 33 (2), e100213. <https://doi.org/10.1136/gpsych-2020-100213>.

The Telegraph, 2020, "[App to check on home-quarantined, teams](#)". The Telegraph. 29 April 2020. Retrieved 7 June 2020.

World Health Organization, 2020. International Health Regulations Emergency Committee on Novel Coronavirus in China. [https://. https://www.who.int/newsroom/events/detail/2020/01/30/default-calendar/international-health-regulationsemergency-committee-on-novel-coronavirus-in-china](https://www.who.int/newsroom/events/detail/2020/01/30/default-calendar/international-health-regulationsemergency-committee-on-novel-coronavirus-in-china).

Youtube, 2020. "[Covid-19 Assam](#)". [YouTube](#). Retrieved 5 May 2020.

Zhou, X., Snoswell, C.L., Harding, L.E., Bambling, M., Edirippulige, S., Bai, X., Smith, A.C., 2020. The role of telehealth in reducing the mental health burden from COVID19. *Telemed. E-health*. <https://doi.org/10.1089/tmj.2020.0068>. [tmj.2020.0068](https://doi.org/10.1089/tmj.2020.0068).

Acknowledgment

We thank all the participants who participated in the study and the students of the Department of Social Work and NSS volunteers who facilitated the survey in their respective villages.