

# DEPARTMENT OF POLITICAL SCIENCE

# **CITY COLLEGE, KOLKATA**



### **SURVEY PROJECT**

# **PARK CIRCUS**

This survey was conducted to give the students of political science a picture of the ground reality situation of the marginalized section of society and relation of Government with its People. An outline objective of this survey camp includes:

- It portraits an insight in the daily lives of peoples living in slum areas and how they have survived during the COVID-19 (era) Pre-Post (2019 -Till date).
- How people, of groups APL (Above Poverty Line) and BPL (Below Poverty Line) have/are struggling for day-to-day life amenities; which include Drinking water, Sustainable Ration, Education for all age groups, medical facilities, Jobs including daily wage worker and MSMES (Micro-Small & Medium Enterprises).
- ➤ Government programs for child and women empowerment and development: their effectiveness and beneficiaries.
- Effectiveness of Vaccination drive.

Keeping these objectives in mind we short listed some places that included an urban slum, a village in an Out-skirts of Metropolitan city and a Rural remote-village. Out of many options, we chose Park circus for our Urban city Venue.

**PARK CIRCUS**: is the 1<sup>st</sup> local railway station on the south railway division of Indian railway from SEALDAH station. It has a highly dense population, ranging peoples from different cultures and ethos. The majority of the population is Muslim, different communities such as Hindu, Christians, Sikhs live in harmony. People from U.P, Bihar, migrated Hindu Bengalis and Muslims Bengalis from Bangladesh forms the major part of the population. Majority of the people Livelihoods comes from daily wage earning, rag picking, small business such as local shops, hawkers, shoe manufacturing etc. A part of the population is highly influenced by politics specially the youths. The ruling T.M.C party has some of its office establishment to regulate its *karyakrtas*, which time to time provide aid and assistance to the locals.

The date for survey was finalized on **22**<sup>nd</sup> **December 2021**, which was carried out by the students of political science, city college consisting a batch of 11 participants from all the three **Semesters (1**<sup>st</sup>,**3**<sup>rd</sup>,**5**<sup>th</sup>) and volunteers of the NGO-SCIR.

The whole event was headed by our Honorable Head of the Department, *Dr. Swagata Ghosh*.

List of Students participating in Survey Project for Park Circus location-

- Anuj Kumar Prasad (5<sup>th</sup> Semester) [CO-ORDINATOR]
- Barun Rauth (5<sup>th</sup> Semester).
- Samrat Saha (5<sup>th</sup> Semester).
- Snehasree Saha (3<sup>rd</sup> Semester).
- Kazi Noor Fathma (1st Semester).
- Gourab Shaw (1<sup>st</sup> Semester).

- Puja Das (1<sup>st</sup> Semester).
- Komal Kumari Das (1st Semester).
- Swarnali Halder (1st Semester).
- Ankita Koiry (1<sup>st</sup> Semester).
- Hiran Das (1<sup>st</sup> Semester).

**SCIR** - (Society for Community Interventions and Research) is a NGO which is situated in the vicinity of the slum close to the Park Circus railway station. It has a establishment history dated back from 1996 and works on a joint venture with various research activities at the National Institute of Cholera and Enteric Disease and Indian Council of Medical Research. Some of the programs runed by SCIR includes:

- 2004-2012 HIV/AIDS prevention program.
- 2008-2012 Recovering Substances Users (RSU's)- 30-month vocational training, adult literacy, micro-credit, counseling etc. supported by UNESCO.

Since this NGO is present in the locality for a long run, we collaborated our survey project with them, so our team can get a vivid knowledge on the challenges faced by the locals and as well as to get familiarize with the workings of an NGO, which will work as a boon for the students in shaping their skills as future social activist and future leaders.

## Events of the day-

- Facilitation by the NGO and a warm welcome of our survey project team.
- Briefing about the workings of the NGO and exposure to their Un-Aided School, Faculty members, Teachers, Students and some of the NGO-Bridge courses for the upliftment of secondary and higher secondary Female education/Vocational training.
- One to one interaction of the team with the students of NGO and teachers/faculty.
- Tea break (Half Day).
- Commencement of the survey in locality and interaction with the locals.
- Sorting of the observation's papers/notes.
- Verification and authentication of papers.
- Departure.



Fully analyzed report has been categorized into four sections for the convenience of reading, namely: (i) Municipality (ii) Education (iii) Work profession (iv) Health care.

# **MUNCIPALITY**

A municipal corporation is a type of local government in India that administers urban areas with a population of more than one million. The growing population and urbanization of various Indian cities highlighted the need for a type of local governing body that could provide services such as healthcare, education, housing and transport by collecting property taxes and administering grants from the state government. The Municipal corporation carries out its function through well-organized divisions or departments. For example, water supply and sewage disposal Undertaking, Housing Board, Education Department and Electricity Department. Each of these Departments are looked after by experienced and qualified persons.

The Kolkata Municipal Corporation (abbreviated KMC; formerly The Calcutta Municipal Corporation) is the local government of the Indian city of Kolkata, the state capital of West Bengal. This civic administrative body administers an area of 206.08 square kilometres (79.57 sq. mi). Its motto, Purosri Bibardhan, is inscribed on its emblem in Bengali script. Sutanati, Kolkata and Gobindapur, covering roughly the area along the banks of the Hooghly from Baghbazar to Barabazar, thence to Esplanade and from there up to Hastings, were three insignificant villages, when the East India Company raised their banner, on his return journey from Madras following rapprochement with the Mogul Fouzdar, Job Charnock landed at Sutanati on 24th August, 1690, at a place now known as Hatkhola. The Savarna Ray Chowdhuri family was persuaded by Prince Azim-us-Shan, grandson of Aurangzeb to transfer the zamindari rights of the three villages of Sutanati, Kolkatta and Gobindapur to the East India Company for Rs. 1300/- on November 8, 1698. Work on the first Fort William was begun in 1697 and completed in phases.

Though Siraj-ud-Dowla ransacked the English Settlement in 1756, Kolkata was retaken by Robert Clive in 1757. The battle of Plassey followed by the grant of Dewani to the Company in 1768 enabled the English to establish suzerainty over the province of Bengal. Kolkata was made a separate presidency as early as 1707, the administration being entrusted to a council of four members headed by the President. There was, however, a zamindar (Collector of Kolkata) who was directly responsible for collection of taxes and settlement of disputes. Steady growth of the city resulted in the acquisition of 38 neighbouring villages by the Company in 1717.

Another royal charter in 1763 redefined the powers and responsibilities of the civic body, marginally to cope with additional demands made on it. Expansion of the lighting and conservancy services, laying of roads and drains and excavation of tanks for supply of drinking water were the direct outcome of the growth the city. Clearance of the Maidan, construction of Fort William in the present site and the spread of European quarters at Chowringhee were the significant developments between 1757 and 1800.

The management of the town was placed in the hands of Justice of Peace under Charter of 1793. From 1794 to 1876, the Chairman of the Justices discharged the duties of the Police Commissioner as well as the Chief Executive of the Municipality, Assessment department, executive department and judicial department constituted the broad functional area. However, lack of resources combined with absence of adequate statutory powers made their tasks far from happy. At the intervention of Lord Wellesley, a Town Improvement Committee was formed in 1804 with thirty members.

With the passing of the Calcutta Municipal Consolidation Act, 1876, a corporation was created consisting of 72 Commissioners with a Chairman and Vice-Chairman; 48 Commissioners were elected by the rate-payers and 24 appointed by the Government. In 1888 the Municipal boundaries were extended by the inclusion of suburbs lying east and south of Lower Circular Road. Seven wards were brought within the fold and additions were made to three other wards in the north of the town. The number of Municipal Commissioners was raised to 75, of whom 50 were elected, 15 appointed by the Government and the other 10 nominated by the Chambers of Commerce, the Trades Association and the Port Commissioners.

Democracy was ushered into the Municipal Government of Kolkata by making provision for election of a mayor annually, by Sir Surendranath Banerjee, who as the first Minister of Local Self-Government in Bengal was the architect of Calcutta Municipal Act of 1923. A major reform was the enfranchisement of women. The adjacent municipalities of Cossipore, Manicktola, Chitpore and Garden Reach were amalgamated with Kolkata. Garden Reach was later separated. C. R. Das was the first elected Mayor and Subhas Chandra Bose his Chief Executive Officer. The city was ruled under the Act till March 1948 when the State Government superseded the Corporation.

Despite a series of amendments over two decades, the 1951 Act could not provide an effective framework for the governance of a problem-ridden metropolis. The focus of authority was fragmented and the Mayor largely remained a figure head. The Corporation was superseded by the State Government in 1972.

During the long interlude of 13 years of rule by Administrators, lot of thought went into devising a model legislation suited to the genius of city government. The Calcutta Municipal Corporation Act of 1980, which came into effect in January, 1984 marked a bold departure from the beaten track in shaping a corporation that is truly autonomous and directly responsible to the electorate. In combined features of a "Strong Mayoral" concept with a cabinet form of Government in the Mayor-in-Council. Apart from the provision of full-time political executive, the Act created three authorities in keeping with the widely accepted democratic norms: -

(i) The Corporation (ii) The Mayor-in-Council (iii) The Mayor.

The city is divided into 144 administrative wards that are grouped into 16 boroughs. Each of these wards elects a councillor to the KMC. Each borough has a committee consisting of the councillors elected from the respective wards of the boroughs. The Corporation, through the borough committees, maintains government aided schools, hospitals and municipal markets and partakes in urban planning and road maintenance. The corporation as the apex body discharges its function through the mayor-in-Council, consisting of a mayor, assisted by a deputy mayor, and ten other elected members of the KMC. The mayor is responsible for the overall functioning of the KMC and has a tenure of five years. At present, the All-India Trinamool Congress holds the power in the KMC.

The KMC is responsible for administering and providing basic infrastructure to the city.

- Water purification and supply
- Sewage treatment and disposal
- Garbage disposal and street cleanliness
- Food Inspection: Through KMC Food Inspectors
- Solid waste management

- Building and maintenance of roads, streets and flyovers.
- Street lighting
- Maintenance of parks and open spaces
- Cemeteries and Crematoriums
- Registering of births and deaths
- Conservation of heritage sites
- Disease control, including immunisation
- Public municipal schools etc.

Some of the current West Bengal Government Schemes:

|                   | -   |
|-------------------|---|
| AIKYASHREE        | West Bengal State Scholarships for Minority Students in West Bengal to be   |
| SCHOLARSHIP       | fully funded from the State budget from the financial year 2019-20          |
| SCHEME            | onwards.  |
|                   | WBTIDCL is the active agent of this project. In case of Commercial cars the |
| GATIDHARA SCHEME  | State Government shall provide 30% of the price of car or Rs 1 Lakh         |
|                   | maximum as subsidy.   |
| GITANJALI HOUSING | State Government is providing Rs. 70 thousand per house in plain area       |
| SCHEME            | and Rs. 75 thousand per house at Hill area and also at Sundarban area       |
|                   | under this project Gitanjali.   |
| HAWKER SUPPORT    | Any hawker who is a permanent resident of West Bengal, who is in            |
| SCHEME, 2020      | extreme distress due to loss of business/ livelihood opportunities due to   |
|                   | outbreak of Corona Virus (COVID-19) will be eligible for the assistance.    |
| JAI BANGLA        | All SC and ST persons above the age of 60 years are eligible under the      |
| SCHEME, 2020      | scheme and shall receive a pension of Rs. 1,000 per month.                  |
|                   | JALADHARA Scheme to extend financial assistance for replacement or          |
| JALADHARA SCHEME  | conversion of the existing 'BHUTBHUTI's by safe and secure mechanically     |
|                   | propelled boats in the interest of public safety.                           |
| KANYASHREE        | An unmarried girl child who is 13 to 18 years old and reading in class      |
| PRAKALPA          | VIII/IX/XI/XII will get annual scholarship of Rs. 750/- if annual income of |
|                   | her family is upto Rs. 1.2 Lac.   |
| KARMA SATHI       | Employment generation for the promising youth through opening new           |
| PRAKALPA          | doors to help intending or prospective entrepreneurs and make them self-    |
|                   | dependent.  |
| KRISHAK BANDHU    | Krishak Bandhu (Assured Income and Death Benefit) Scheme under which        |
| SCHEME            | every farmer including recorded Bhagchasi (Share Croper) will be eligible   |
|                   | to get financial support.   |
| KHADYA SATHI      | The main purpose of Khadya Sathi project is to ensure food and nutrition    |
| SCHEME            | by supply of food to the people from backward classes/ pavement             |
|                   | dwellers/ aila, drought affected people etc.                                |
| LOKPRASAR         | To revive and showcase the different folk music forms of Bengal, a unique   |
| PRAKALPA          | project entitled Lok Prasar Prakalpa has spread its wings across the State. |
| MANABIK PENSION   | It is applicable for the person having 50% or more disability and the       |
| SCHEME, 2018      | annual family income of the person with disability does not exceed Rs.      |
|                   | 1,00,000.00 (Rupees One lakh) per annum.                                    |
| NATIONAL TRUST    | Gharaunda, Aspiration, Gyan Prabha, Niramaya, Samarth, Uddyam Prabha        |
| SCHEME            | etc.  |
|                   |   |

| NIJO GRIHA NIJO    | Ownership of five decimals of land per family of houseless agricultural        |
|--------------------|--|
| BHUMI              | labourers, artisans and fishermen is provided by the Government of West        |
|                    | Bengal.  |
| NIJASHREE HOUSING  | Government of West Bengal is determined to provide a 'Basha' (house) to        |
| SCHEME FOR         | all the people belonging to the Lower Income Group (LIG) and the Middle        |
| LIG/ MIG           | Income Group (MIG).  |
| "PRACHESTA"        | To provide some financial relief to labourer/ daily wage earner/ worker,       |
| (প্রচেম্টা)        | who is in extreme distress, due to COVID-19 outbreak.                          |
| ,                  | 'Paray Shikshalay' is teaching learning session at community habitation        |
| PARAY SHIKSHALAY   | level for children of age group of 5-9 years i.e. from Pre-Primary to Class IV |
|                    | level in COVID times.  |
|                    | To provide some relief to the Migrant Workers in the form of dry ration        |
| PARIJAYEE SAHAY    | and other benefits who can not avail themselves of food grains under the       |
| 7744374722 3741741 | Public Distribution System.  |
| LAKSHMIR BHANDAR   | To provide the female members of all families of the state an assured          |
| PRAKALPA           | monthly income to improve their financial condition and promote women          |
| TO HOTEL TO        | empowerment.   |
| RUPASHREE          | Govt. of West Bengal has launched Rupashree Scheme. In this scheme one         |
| PRAKALPA           | time financial grant of Rs. 25,000/- will be given to girls above 18 years old |
|                    | for marriage purpose.  |
| SNEHALAYA          | To provide pucca dwelling housing unit to people not owning pucca house        |
| PRAKALPA           | in his or her name or in the name of any family member in West Bengal.         |
| 71011012171        | A financial assistance of one-time exgratia payment of Rs. 1,000/- to          |
| SNEHER PARAS       | worker who is residents of West Bengal and who is stranded in other parts      |
| SNETTERTYTOIS      | of the country due to lockdown.  |
| SAMAJIK MUKTI      | State Assisted Scheme of Provident Fund for Unorganized Workers                |
| (SOCIAL FREEDOM)   | (SASPFUW), Buildings and Other Construction Workers' Welfare (BOCWA)           |
|                    | and West Bengal Motor Transport Workers' Welfare (WBTWSS) Schemes              |
| SAMAJIK SURAKSHA   | A new and consolidated social security scheme for the unorganised              |
| YOJANA             | workers namely, SAMAJIK SURAKSHA YOJANA, 2017.                                 |
| SABOOJ SATHI       | A scheme for distribution of bi-cycles to students of class IX to XII studying |
| SCHEME             | in Govt. run and Govt. aided Schools and Madrashas of the State of West        |
|                    | Bengal.  |
|                    | Sabujshree will increase awareness and attach values about environment         |
| SABUJSHREE         | and society to the younger generation. The project will transform Bengal       |
|                    | into a Green Bengal.   |
|                    | Sufal Bangla is an initiative of the Govt. of West Bengal for the benefit of   |
| SUFAL BANGLA       | the people to ensure fresh vegetables at reasonable price at the their door    |
|                    | step.  |
| SHISHU SATHI       | Shishu Sathi scheme is to provide free treatment to children below 18          |
| SCHEME             | years age, who need heart surgeries, irrespective of how rich or poor the      |
|                    | parents are.   |
| SABALA SCHEME      | Sabala aims at empowering Adolescent Girls of 11 to 18 years by                |
| FOR ADOLESCENT     | improving their nutritional and health status, up gradation of home skills,    |
| GIRLS              | life skills and vocational skills.   |
| SIKSHASHREE        | Sikshashree Scholarship Scheme is for the day scholar students of Class V      |
| SCHEME             | to VIII belonging to Scheduled Caste/ Scheduled Tribe category.                |
| SWASTHYA SATHI     | "Swasthya Sathi" for Contractual/ Casual/ Daily rated workers.                 |
| SCHEME             |  |
|                    | A flagship Scheme for the entire non-institutional, non-project mode,          |
|                    | short term Skill Development interventions to provide wage/ self-              |
|                    |  |

|                | employment linked skills training to the residents of the State of West  |
|----------------|--|
| UTKARSH BANGLA | Bengal. Various Schemes and Programmes for Minority Communities.         |
|                | Providing soft loans for self-employment enterprises, Education loan for |
|                | pursuing professional courses, Stipend and Scholarship, Vocational       |
|                | courses etc.   |
| YUVASREE       | The objective of the scheme is to provide employment assistance to the   |
| (YUVA UTSAHA   | unemployed youths of West Bengal for increasing their employment         |
| PRAKALPA)      | ability and skill.   |
|                |  |

### Corona Outline effects on Kolkata (Municipal corp.) -

The city of Kolkata, which is under Kolkata Municipal Corporation (KMC), with 141 wards (sub city), has a total of 4.5 million inhabitants. Roughly 30% of inhabitants are living in slums where living conditions are poor. The total number of COVID-19 infections is over 120,000 along with a total death of 9,700 (COVID-19 India) The heightened COVID-19 cases are reported from few pockets and/or settlements. The West Bengal State Government has followed a strategy to identify the areas of heightened COVID-19 cases for the purpose of containing those areas to break the chain of virus transmission (West Bengal State Government). These contained areas are of three types: broadbased zones, which are typically a locality where the number of infections is many, isolation zones/units where the number of infections is one to many, and standalone houses/premises where the number of infections is limited to family members (typically one to a few). The detailed list of contained areas were made public to alert people regarding the risks of virus transmission .

We examined the degree of risk associated with COVID-19 infections in Kolkata Municipal Corporation at the sub city (ward) level based on socio economic and health indicators. We identified high risk and areas which have been affected the most of COVID-19 transmission in Kolkata. Our analysis based on four risk criteria and associated methodologies would help policy makers to formulate various prevention and/or intervention strategies against COVID-19 transmissions. Our study deals in details the risk factors that are common to any possible pandemic viral outbreak. Hence, the scientific analysis outlined in this research provides a global context to fight not only against COVID-19 infections but also any other future viral outbreak.

Lack of clean drinking water and proper sanitation are the major causes of disease intensity in developing countries like India. The use of water from untreated sources is likely to cause weak immune systems due to the presence of pathogens, and toxic trace elements such as, Fe (Iron) and Mn (Manganese). In India, the poorer section of the community is highly susceptible to Tuberculosis (TB) and poses greater risk of COVID-19 infections. Hence, arsenic (As) concentration in untreated groundwater used for drinking, cancer risk in southern KMC wards, and TB burden were used in the analysis. People living in nearly 40,000 houses here have to go without a proper toilet. As Kolkata tries to shake off its colonial past and come to terms to being a 21st century city, a vast section of its population doesn't bat an eyelid before urinating or defecating in public. Many households in the city are still without toilets, though a majority (74.67%) uses what is commonly known as water-closets. Add to this the large number of pavements –dwellers and the city has a problem in hand. In Kolkata, 5.89% of the population still depends on service toilets, while 15.11% uses pit-toilets.

Slum dwellers in India regularly deals with problems such as lack of clean water, constant migration at slums, no sewage or waste disposal facilities, pollution, and unsanitary living conditions. High levels of pollution, lack of basic needs, and room-crowding are some of the basic characteristics of slum housing. India is a third largest country that suffers from poverty, malnutrition, diseases,

unhealthy conditions, and more in Indian slums, which is alone responsible for more deaths of children than any other country in the world. Because of the dramatic rise of slums after independence, India's population has tripled. Most of the population is currently are slum dwellers in India.

During the last two decades; migration from villages and small towns to metropolitan areas has increased tremendously in India. It leads to the degradation of urban environmental quality and sustainable development, especially in metropolitan cities. Every year, hundreds of thousands of men, women, and children die worldwide, and India alone is responsible for 25% of the deaths. Lack of basic necessities is one of the most frequently mentioned characteristics of slum definitions Kolkata.

Lack of access to improved sanitation facilities and improved water sources is the most important feature, sometimes supplemented by the absence of waste collection systems, electricity supply, surfaced roads and footpaths, street lighting and rainwater drainage. Unhealthy living conditions result from a lack of basic services, with visible, open sewers, lack of pathways, uncontrolled dumping of waste, polluted environments, etc. their houses can be built on hazardous locations or land unsuitable for settlement, such as floodplains, in proximity to industrial plants with toxic emissions or waste disposal sites, and on the areas subject to a landslip. The settlement layout may be hazardous because of a lack of access ways and high densities of dilapidated structures.

Government schemes Meant for poor, but beyond their reach. *Meenu Das*, an elderly woman from Park circus Kolkata is miserable. Her husband is sweating it out as a bonded labourer, trying to pay off the Rs 16,000 debt accumulated to treat her son's brain fever. The irony is that this could have been avoided if she had known about that government insurance scheme that protects her from such a financial disaster, but she didn't have a clue. Das is not alone there are thousands of citizens who have no idea about the government's insurance schemes, especially designed for the poor. What's worse is that they are even turned away by insurance companies and hospitals under some pretext or the other. Just like food subsidies or fuel subsidies on fair price ration shops, there are chances of these benefits being abused by the malpractices and connections in the administration, instead of people getting benefited from these schemes they are being exploited. There are also acquisition that insurance companies do not honour all the claims if the premium collected under a particular head are already been exhausted, its high time for the government to penalise these kinds of firms either being private or government administer and put an end to all such schemes which seem to be benefitting just a few and exploiting majority.

At present, there are 39 government-sponsored schemes including Rashtriya Swasthya Bima Yojana (RSBY), Aam Aadmi Bima Yojana, Janashree Bima Yojana, Shiksha Sahayog Yojana, Micro-Insurance Products, Varishtha Pension Bima Yojana, Universal Health Insurance Scheme, National Agricultural Insurance Scheme, Pilot Modified National Agricultural Insurance Scheme and Pilot Weather-based Crop Insurance Scheme. But even if 39 schemes sound pretty impressive, they are not so effective when it comes to the basics. And like many other government schemes, there are overlaps in these schemes, are without any clear mandate, and there's hardly any awareness among the beneficiaries.

Moving forward, we propose the following urban safeguarding measurements, recommendations and action points:

• Increasing the effectiveness and reach of the COVID-19 welfare, relief, and recovery schemes, to ultravulnerable groups including migrants, 'trapped' populations, and people residing in urban informal settlements.

- Ensure free and rapid vaccine access to all including the ultra-vulnerable.
- Improving access to water and sanitation, food and adequate shelter, and transportation facilities within urban areas. These efforts ought to be ensured throughout the pandemic as well as continued in its aftermath while focusing on achieving the SDGs.
- Supporting people on the move as well as those who find themselves stranded in urban areas, or 'trapped' in route, safe passages home to their families and loved ones.
- Targeting weaknesses in the disaster response capacities of urban local governments and strengthen their ability to better respond to emergencies in the future.
- Identifying vulnerable groups and creating inclusive city level COVID-19 response plans led by local leaders, entrusted figures that closely collaborate with urban local governments.
- Investing in city level public healthcare systems, that provide health services in normal times, to increase their capacity to respond to unprecedented moments.
- Involving urban disaster planners in the design and development of cities in the future to avoid building in unnecessary urban disaster risks.
- Reducing urban social inequalities by expanding access to social support systems and public health services in a collective and participatory way.
- Allocating resources and support to local urban support bodies and NGOs to provide basic human rights for all including safe food, drinking water and sufficient sanitation, adequate housing, and prevention, treatment and control of diseases, as well as public healthcare facilities.
  - Developing cities like Kolkata need to recognize that the slum dwellers and not just beneficiaries of development. Developing cities requires local solutions. Local authorities need to be empowered with financial and human resources to deliver services and infrastructure to the slum dwellers in Kolkata. Cities must draw up local long-term strategies for improving the lives of slum dwellers in India.
  - State governments have to develop strategies to prevent the formation of new slums. These should include access to affordable land, reasonably priced materials, employment opportunities, and basic infrastructure and social services.
  - Public investments must focus on providing access to basic services and infrastructure. The cities need to invest in housing, water, sanitation, energy, and urban services, such as garbage disposal. These services and infrastructure must reach the poor living in informal settlements.
  - The transportation needs and safety concerns of a city's poorest residents should be a high priority in planning urban transportation systems, which can expand the choices people have regarding where to live and work.

Kolkata is among the eight metropolitan cities of India. Down the decades, the city population has increased manifolds. One of the direct impacts of this rapid population growth is the increase in water demand of the city. Most of the water distributed within the city is extracted from Hooghly River. Although the capacities of major WTPs of the city, namely *Palta* Water Works was increased in 2019 and Garden Reach Water Works is under construction, the city is still likely to face a water crisis problem in near future. Adding to this is the problem of lowering of groundwater table at alarming rate and presence of contaminants in groundwater in some areas. It is possibly the best time to adopt rainwater harvesting techniques or switch to advanced global technologies to avoid this foreseeable water crisis problem

# **EDUCATION**

Education is a doorway to success. It is the key that unlocks multiple doors of vast opportunities that leads to the pathway of success. Education is a highly essential tool that helps you irrespective of the age- whether you are a child or a grown-up. Education is the backbone of a country. It is an integrate to that aids the development of human civilization. equips the nation with the workforce, uplifts awareness among the general public, promotes national unity. Kolkata must be recognised for playing a major role in the development of modern education system in India. The western technique for today's education is mainly provided in Kolkata. The missionaries and social reformist had established the first college and schools in the state. For the purpose of developing oriental studies, Sir William Jones (philologist) established Asiatic Society in 1784. National Patriots like Raja Rammohan Roy, David Hare, Ishwar Chandra Vidyasagar, Shashi Bhusan Chatterjee and William Carey played an important role in Establishing modern colleges and school's today.

Many Colleges came into existence like:

- Hindu College in 1817 (Hindu College later renamed Presidency College afterward).
- Fort William College in 1800.
- **Serampore College** was established in Serampore City (30 kilometer from Kolkata) by William CareyIn 1818. After as it was assimilated by a Royal Charter as a Danish University it Became the first modern University in 1857. Though it had a charter it doesn't technically an university in the modern term.
- The Sanskrit College was established in 1824. Reverend Alexander Duff of the Church Of Scotland established the General Assembly's Institution in 1830 and later the Free Church Institution in 1844, which were later merged to form what is now known as the Scottish Church College, Calcutta. These institutions played a significant role in what came to be known as the Young Bengal Movement and the Bengal Renaissance.
- La Martiniere Calcutta was established in 1836. John Bethune established a School for Indian girls in 1850 at a time when women's education was frowned upon in the society. The Bethune College for girls was also set up by him in 1879.

As we can see from the time of British India, the people of west Bengal had embraced the importance and necessity for education from centuries and presented great intellectuals from the state like Rabindranath Tagore, Swami Vivekananda, Netaji Subhash Chandra Bose, Ishwar Chandra Vidyasagar etc. To imply the efforts and dignity of our education system of the state Ruling government had imposed schemes to encourage and facilitate with higher studies and necessary funds like: -

- Kanyashree: One of the landmark programmes of the Trinamool Congress Government, the kanyashree Prakalpa, launched in 2013, is a scheme for empowering the girl child through enabling their education and thus, preventing their marriage at an early age. It has three components, names K1, K2 and K3, for those in school, after school and in post-graduation, respectively. The scheme has brought more than 48 lakh adolescent girls under its fold covering over 16,600 institutions across every corner of Bengal.
- Sabuj Sathi: Sabuj Sathi is a scheme, launched in 2015, for gifting bicycles to students of classes IX, X, XI and XII, both boys and girls, to make it easier for even those living in far-off places, to come to school and go back home conveniently. The green-coloured bicycles have noticeably improved attendance and have proved to be a tool of student empowerment,

- just like "Kanyashree". There have been 70 lakh beneficiaries (that is, 70 lakh bicycles have been distributed) till date.
- **Shikshashree**: Shikshashree is a scholarship scheme, begun in 2014, for scheduled caste (SC) category students from classes V to VIII. The scholarship is being paid directly into the bank accounts of the students. During financial years 2014-17, almost 38 lakh students were covered under this scheme.
- **Credit Card**: Student Credit Card is a Scheme, launched in 31june 2021 for students enables to take a soft loan of up to Rs 10 lakh for higher studies.

Education in Kolkata has drastically changed right from the way of learning to the assignments and assessment exams. Today, higher education plays an important role in every individual's life because the challenging economy of Kolkata demands more from the young generation in terms of output and professionalism. With the rise of modern, globalize India, education in India has raced forward and gained much popularity and importance when compared to the recent years. The positive impact can be seen in every corner of India. Kolkata and other parts of India have made great progress in the field of knowledge comprising science and technology. The changing phase of technology has brought many positive things in the education system provided at the universities and colleges. Schools in Kolkata are well known for their highly skilled and qualified staff whereas educational institutes in Kolkata are popular for their quality education, excellent teaching mode and world class infrastructure.

#### **Corona Outline effects on Education:**

Education is regarded as one of the most significant assets in human life which promotes individual growth. Covid 19 have a devastated effect on education on a large scale. Specially it had a major effect on children. Education is undeniably crucial in contributing to a country's welfare and an individual's growth, but it has been jeopardized by the emergence of Covid -19. Besides economic crisis which was faced due to lockdown hampered in the result of reduced output. According to studies 32 crore students were denied from education which resulted in national crisis and ultimately to the way of unemployment.

Due to the outbreak of corona in March 2020 a nationwide lockdown was imposed schools and colleges were forced to follow new mode of education via digital technology and abandon the usual classroom teaching style for their safety. The teachers were instructed to follow the syllabus through online curriculum. It took almost months that after the lockdown was declared in March 2020 there was any sign of education. Students were de -touched from everything. Almost after months revived new style education mode started through technology. But again, due to lack of infrastructure, education system got hampered productivity suffered because everybody could not afford the cost of education via new mode. Remote learning was not available in every family; according to the Global internet network research, just 24% of households had a consistent internet connection, while other remote areas remained unreachable. Remote learning was not available in every family; according to the Global internet network research, just 24% of households had a consistent internet connection, while other remote areas remained unreachable. Remote learning was not available in every family; according to the Global internet network research, just 24% of households had a consistent internet connection, while other remote areas remained unreachable. A large number of dropout rate was seen among the girl students due to this digital technology. Some of them were even forced to get married, especially in rural areas and many of them got engaged in other works, household chores. On the other hands boys were forced to work as wage employees. The GDP rate of poverty dropped to 8% which resulted ultimately in employment. Unemployed families on one

way were forced to stop their children education as they could not afford fees and resources of online classes which would meet the requirements of their children. Besides the pandemic also created a problem of debts and because one of this primary reason many students got dropped from education. No aid was provided from government to improve the situation. The digital technology system of education was started to meet the need of education and for students to not get detouched of education. Besides parents thought that the system would enable some new things which would be better for children. But the situation wholly over-changed the system ruined the education system and led to unemployment, economic crisis etc.

According to the survey conducted on Dec 22,2021 we observed most people demands were that they need help from government to meet their child's need in the field of *Education*. Most of the parents in this era of digital virtual classroom scenario the price of technological devices has shown a steady growth, which seemed *costly* for them(parents). We encounter some families whose children were studying in private schools and were facing problems regarding school fees, there main concern was, the schools were demanding the *same fees* that they used to charge in regular times. As we all know that Covid -19 had affected almost every section of society and led to economic crisis besides, the schools' demands were higher and as a matter of fact their(families) wards weren't using the school amenities such as fans, laboratory, library. So, the main concern of guardian was why should they pay extra money? There were some exception cases where parents wanted to pay school fees but they needed some *compensation*. On the other side of the coin, there were families who lost jobs during the pandemic and some were having debt in markets (small business).

These factors act as a barrier for their child's education. They urge the government to look upon their current situation and take necessary steps and introduce effective measures which would help them to meet the end needs of their child's education. West Bengal Government have introduced certain schemes for higher studies such as Kanyasree, Sabuj Sathi, Sikhasree, Student Credit Card for providing facility to students. Besides it was also announced and promised to provide laptop/tab to the students of higher secondary to make their learning and online classes more flexible and smoother. It is also suggestive to kept in mind about the poverty index and daily wage workers income as most of the family belong to this social framework. Majority of the people bashed the ground level implication of the government scheme and the scarcity of government educational institutions which includes English, Bengali, Urdu medium secondary and higher secondary school.

**Firstly,** the point to be mentioned out here is that, the govt schemes such as Kanyasree, Sikhasree, Student Credit Card, Sabuj Sathi etc which was promised by government to help in the enhancement of the children in education have not been effective in this locality. Most of them reported that they were not at all benefited from the schemes so far. And many of them were not aware of the schemes as well.

Besides these the dropout rate of children from that locality was comparatively bigger most parents told that due to the current pandemic situation they could not afford the schooling. Beside many were not accessible to internet and many were not having laptops and mobiles, which has become a serious issue in the way of education. Parents were not so wealthy enough and hadn't any persistent job to afford all these amenities. So, the question lies here in a one-way or the other that their children are being deprived of basic education and government institution are hardly well established here to look upon these issues.

By our observation we would like to suggest if government could conduct a survey in this locality and find out the dropout children's rates and take some initiative to bring pupils back to schools. There is also a lack of basic pre-primary and primary education in the locality. The NGO SCIR is taking a great

initiative to educate the girl child by their distance learning programmes and a couple of bridge courses to give these under privilege students a fair chance to stand in the society. Government should put initiatives to set up primary school in this locality consisting of English, Bengali and as well as Hindi mediums and make education free of cost for those who could not afford. Beside government should encourage parents to send their wards to schools irrespective of gender and give the girl child a fair chance to prove their worth. There also should be camps to promote the value of education in a person life and encourage the parents and future generations.

#### **WORKING PROFESSION**

Walk of Life is the provision of human advice or services in exchange for basic or ancillary needs. Covid-19 forced millions out of work and many to shift professions as they lived through lockdowns. But as the year ends, several of those who had shifted livelihoods have either gone back to their old jobs or have started multitasking. Threefold jump in Bengal's share of the unemployed, which had risen from 6.9% in March to 17.4% in May, indicating roughly one in six persons in Bengal was unemployed. However, the all-India scene was much worse, with the national unemployment rate rising from 8.8% in March to 23.5% in May (roughly one in four unemployed).

The second wave of COVID-19 has taken a heavy toll on employment as restrictions to control the second wave of the pandemic has crippled businesses. About 7.5 million jobs have been lost across sectors in February-May 2021, data compiled by Money control based on estimates of hiring consultants showed. This is the worst-ever loss of jobs in India since liberalisation. The 2007-2009 financial crisis had a relatively smaller impact, with about 5 million jobs lost. Jobs were lost across sectors such as travel/tourism and hospitality, which rely on people movement to sustain business, as well as start-ups and financial services.

The West Bengal government will **hire graduate** students as interns and offer them an opportunity to contribute to various government offices while studying, said Chief Minister Mamata Banerjee. Announcing the 'Student Internship Scheme' after a cabinet meeting, Ms. Banerjee said the scheme would allow them to gain experience and help students bag government and private jobs in the future. The government plans to hire 6,000 interns under the scheme. The CM said that to be eligible, the applicants must be residents of West Bengal and have an undergraduate degree with at least 60 per cent marks. Students of Polytechnic, ITI or an equivalent course will also be considered.

The present scheme introduced by the Government of West Bengal is called "Prachesta Proclapo Scheme" for the workers. In view of Covid 19, many workers have lost their jobs and livelihood, this project has been launched for the benefit of the citizens of Bengal. The chief minister of the West Bengal state has announced a package of rupees 1000 for all of the workers. As a large number of people are getting infected is rising now, the chief minister of the state has urged citizens of the state to stay indoors and cooperate with the administration during the lockdown.

A number of white-collar professionals, too, had to change professions and shift to something very different from their core skills to survive the lockdown. But over time, most of them too have returned to their careers.

**Travel & Tourism** This sector has been badly hit. With the second wave, close to 4.2 million jobs have been lost in this sector, with travel agents and tour guides taking the biggest hit. The sector was the worst hit even in the first wave because of the complete lockdown and ban on travel. It had started picking up pace from November 2020 when leisure travel had resumed but the second wave

has derailed it again. "At least 50 travel agencies have shut shop in the past one year. It is not possible to survive when there is so much uncertainty around. Some business picked up but again there is lockdown all around," said Bhushan Tiwari, consultant at BT Travels in Kolkata. Tiwari said he had initially laid off 60 percent of his 120-member team. However, in December the firm re-hired 40 people and had to retrench 10 people in April 2021.

**Hospitality**: Lockdown-like restrictions and fear of travel or dining out has battered India's \$10 billion hospitality industry that employs 35 million people. The Federation of Hotel & Restaurant Associations of India (FHRAI) said the hotel industry has taken a hit of over Rs 1.30 lakh crore in revenue for the fiscal year 2020-21 because of the pandemic. Restaurants employ 7.3 million people across India, according to the NRAI Food Services Report, 2019. Of these, about 3.7 million people are in the organised sector.

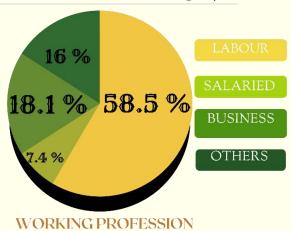
**Retail market**: After a brief take-off between October 2020 and January 2021, the retail sector that employs 7.5 million people is suffering again. It is estimated that close to 1 million jobs have been lost across the sector including in high-street fashion, small stores and standalone units including malls. Retailers Association of India (RAI) again urged the government to roll out relief measures for retailers, who have been reeling from the impact of the new set of restrictions.

**Banking, financial services and insurance**: This sector is relatively better off, as it is in the 'essential services' category. Close to 18,000 jobs have been lost in the sector, mostly in sales. "Apart from transactional banking, customers are staying away from products like gold loan, credit cards and other allied products. This means that those employed in these areas are liable to lose their jobs," said Jose Mathews, senior vice president at Pay-Hire HR Consulting which specialises in BFSI sector roles.

Park circus is a slum area where most of the people are employed in daily wage earnings, it also caters a large number of unemployed youths with little education or no education. People here live a marginal life with little support system from governments they are more or less basically dependent upon their hard work earnings. We observed multiple profession in which people are indulged in day-to-day life like:

- Rickshaw pullers: Ferry wala's, hand rickshaw puller and small transport utilities.
- Hawkers: Fruit hawkers and other kind of Street hawkers (Fuchka wala's, Sabji wala's etc.)
- **Daily wage worker:** includes sweepers, Municipal workers, Masson and construction workers, painters etc.
- **Cobbler**: indulges in shoe making which is a obvious reason as one the biggest shoe and sandals market (*Birsuul haat*) is located near the locality, it is also an epicentre for big companies like *Shree Leathers* and *Bata* who have their workshop for shoe and hand bags.
- Rag-picking: there is a small recycling plant for plastic waste management which sells the
  used plastic bottles and waste plastic and electrical parts to companies for recycling. This
  business is highly flourishing cause of cost effectiveness and cheap labours which includes
  kids and teenagers from in around of locality who are compelled into this work due to lack of
  awareness and opportunity of education. They play a vital role of Rag pickers collecting from
  garbage pits or by roaming on streets and picking the used soda and water bottles, which
  are brought to this small workshop and is compacted into giant boxes and then sold out.
- Small business: There are also small shop owners, we came across many small type of hut shops like pan wala, ration shop, general stores, stationery and hardware shop, medical stores and different types of fast-food store by which people are earning their daily bread.

 Youth: of this place who have some basic education are indulge in the small grade work's like in different kind of shop outlets and shopping mall & complexes as attendants, receptionist, also in dispensary or hospital as compandors or in B.P.O sectors. A large portion of youth is affected from politics and forms the major part of the ruling govt. as Karyakartas.



# Corona had a drastic impact on people's work & professions:-

- Many of them lost their jobs.
- After the relaxation of covid curbs they didn't get the same job or hardly any job.
- Some did not receive any monthly salary for many months which made their survival a big challenge.
- Wages were cut down to half for the permanent government job employees.
- MNC's has initiated the work from home scheme which is currently persisting for major companies like WIPRO, TCS, TECH MAHINDRA etc.
- People were unable to counter their family expenses and didn't get an applaudable support from the government.
- Their covid time was spent basically from the saving they had before this event for the future goals. People were very hopeless for their as their savings and bank statements have drained out in sustaining their families.

### Their demands to the government for financial improvement:

- 1. Job opportunity and demand for opening the markets to business and put all the things back on track.
- 2. Government focus on people condition and better ground level implications of govt. schemes like MANREGA.
- 3. Control on inflammation and stabilising the market for common people to survive.
- 4. sustainable Ration for each person and family.
- 5. Medical and pharmaceutical aids.
- 6. Sanitary System/ Washroom/ Water closet.

## **HEALTHCARE**

A cross sectional observation study about health care in Kolkata has become one of the most challenging parts for State Government. During COVID pandemic health care system in Kolkata got affected such as general treatment. So, a large volume of people was deprived from the best health services. However, the hospitals of state had provided their best facilities in spite of their bound. Huge numbers of doctors and nurses kept their toe strong to continue the best health care scheme to the common people in Kolkata. Especially the people from slum areas like **Park circus** and all had been provided sustainable facilities from famous hospitals like **'Chittaranjan hospital, N.R.S hospital'**. Apart from the COVID patient, other in serious condition took same treatment and care from hospitals.

Initially 30 to 40 years ago people from central Kolkata did not have any perception on taking care of their health in a proper way. They feared to take their patients to the local hospitals due to utmost negligence and shortage and lack of proper treatment. Most of the mothers gave birth to premature babies in their homes only. Gradually the scenario has changed. With the help of more government and private hospitals the health services have changed a lot. Modern technology and government awareness programs (advertisement, commercials) had made people aware of health care which results in smooth treatment.

India's Ministry of health was established with independence from Britain in 1947. The government has made health a priority in its series of five-year plans, each of which determines state spending priorities for the coming five years. The National Health policy was endorsed by parliament in 1983. The policy aimed at universal health care coverage by 2000, and the program was updated in 2002.

From the scratch the health care unit has lunge forward to establish in a new era. State Government and other public services are being taken to a serious note to provide best health care facilities from door to door. Central and State Government has brought new schemes for lower middle class to under privileged people to break the perception of "treatment for rich people." Government is trying to aim to rich their best health assurance to the farthest corner of India.

The lists of Government Health Insurance schemes in India are as below: -

- Aam Aadmi Bima Yojana: The Aam Aadmi Bima Yojana was launched on 2<sup>nd</sup> October 2007. It is a social security scheme that is targeted toward the low-income families of India. This scheme benefits those who are usually not on a payroll, for example fishermen, auto drivers, cobblers etc. Due to low income, they may not think of saving money to face a grave contingency like death or disability. The Aam Aadmi Bima Yojana provides them with monetary aid to face such unfortunate situations.
- Ayushman Bharat Scheme: The Ayushman Bharat Scheme is a health insurance scheme
  designed to unify the segmented health sector in India. It comprises two components—
  Health and wellness Centres (HWC) and the Pradhan Mantri Jan Arogya Yojana (PM- JAY).
  The health and wellness Centres are supposed to be better developed versions of
  primary Health Care Centres
- Awaz Health Insurance Scheme: The Awaz Health Insurance Scheme was introduced in the state of Kerala and targeted at migrant workers. It offers labourers in Kerala a health insurance plan with an insured sum of Rs.15,000. It also provides a death benefit of Rs.2 lakh in case of death of the policy holder.

- Central Government Health Care: The Central Government Health scheme is a type of health plan provided by the Central Government of India. Only Central Government employees are eligible for this policy. These include supreme court judges, Central Railway Board employees etc.
- Chief Minister's Comprehensive Insurance Scheme: This State Government scheme has been promoted by the government of Tamil Nadu for people residing in the state that are earning less than 75000 per annum. Medical expenses upto Rs.5 lakh can be claimed using this scheme, and many private as well as government hospitals are a part of this scheme. It is basically a family floater plan by the government, in association with the United India Insurance company.
- **Bhamashah Swasthya Bima Yojana:** The BSBY scheme is an insurance initiative by the government of Rajasthan. It covers hospitalization expenses in the form of cash less claims for general as well as critical illnesses. People of all ages are eligible for this scheme and it covers both in- patient as well as out-patient expenses.
- Employees State Insurance Scheme: Employees State Insurance Scheme of India is a
  multidimensional social security system tailored to provide socio-economic protection to
  worker population and their dependents covered under the scheme. Besides full medical
  care for self and dependants, that is admissible from day one of insurable employment, the
  insured persons are also entitled to a variety of cash benefits in times of physical distress
  due to sickness, temporary or permanent disablement etc.
- **Karunya Health Scheme:** The Kerala Government launched this scheme in 2012 and it provides health insurance for certain listed chronic conditions. It is basically a critical illness policy for the poor that aims to cover kidney disorders, heart disorders, cancer etc.
- Mahatma Jyotiba Phule Jan Arogya Yojana: The Government of Maharashtra was the one to initiate this health insurance policy for the benefit of Maharashtrian people around or below the poverty line. It was targeted mainly at farmers in Maharashtra. The policy offers a family cover of upto Rs.1.5 lakh for treatment of listed diseases.
- Mukhyamantri Amrutam Yojana: The Gujarat Government initiated the Mukhyamantri Amrutam Yojana in the year 2012 for the benefit of the poor in the state of Gujarat. People under the poverty line and lower middle-class families are eligible for the scheme.
- **Pradhan Mantri Suraksha Bima Yojana:** This policy was launched in 2016, after it was evaluated that only 20 % of the Indian population had insurance coverage for accidents. Anone between 18 to 70 years of age and having a bank account is eligible for this policy.
- Telangana State Government Employees and Journalists Health Scheme: This particular
  scheme has been made available by the Telangana government for the benefit of its
  employees and Journalists. The health scheme is a cashless insurance scheme that can be
  used by current employees of the government as well as retirees and pensioners.
- Rashtriya Swasthya Bima Yojana: The Rashtriya Swasthya Bima Yojana (RSBY) is a scheme
  by the Central Government that provides social security to the underprivileged sections of
  society. This is done through health insurance coverage for families that are below the
  poverty line (BPL). The scheme provides financial protection against any financial liabilities
  that may arise as a result of expenditure related to health care, such as planned or
  emergency hospitalization. Thus, families are ensured that their health care is taken care of
  without being compromised due to financial challenge while also not being financially
  blindsided due to health care expenses.
- Universal Health Insurance Scheme: This scheme was initiated by the Indian government to provide universal health care to persons below the poverty line and their

families. Its aimwas to make universal health care accessible to these people. The scheme covers hospitalization, accident as well as disability for eligible persons between 5 to 70 years of age. Both individual and group insurance policies can be availed using this scheme.

- Yeshasvini Health Insurance Scheme: The Yeshasvini Health Insurance Scheme is a health insurance plan devised by the Karnataka government in order to provide health care to farmers and peasants associated with co operative society. As many as 800 medical procedures are covered under this policy and that includes Orthopaedics, Angioplasty, Neurology etc.
- West Bengal Health Scheme: The scheme was announced by the government of West Bengal in 2008, and it aimed at providing health care to the government's employees and pensioners. It covers individuals as well as their families with an insured sum of Rs. 1 lakh coverage is offered for OPD and surgeries but excludes cosmetic surgeries and non – emergency procedures.

The most challenging threat in the history of the world COVID-19 has ripped off the health system globally. India is one of the most affected countries in the world. The entire health system was gone down due to that global threat. People were completely locked down for 1 year. From hospitals-to-hospitals patients of COVID-19 filled all the beds. Irrespective of the leaves and holidays doctors and patients toil extremely hard to serve the peoples. In West Bengal Kolkata is the most affected area. From NRS to R.G. Kar all other treatments were completely close for COVID patients' treatment. Inspite of lockdown and COVID restrictions the people of slum areas in Kolkata did not care about COVID threat. Very whimsical, adamancy of few people made the situation more horrible.

The COVID-19 pandemic has spotlighted the role of medical oxygen as a lifesaving therapy for patients struggling to breathe. In LMICs, many health facilities are unequipped to meet the rising demand. Almost half of all hospitals in these areas have an inconsistent supply of medical oxygen, or lack it entirely. More than ever, timely and robust planning for reliable oxygen delivery is needed to protect and save lives.

COVID-19 oxygen emergency impacting more than half a million people in low- and middle-income countries every day, as demand surge:

- More than half a million COVID-19 patients in LMICs estimated to need oxygen treatment every day.
- New assessment show US\$90 million immediate funding required to meet urgent need in upto 20 low- and middle- income countries (LMICs).
- COVID-19 Oxygen Emergency Taskforce brings together key organizations working on oxygen access under ACT- Accelerator Therapeutics pillar, as COVID-19 surges and preventable deaths occur.
- Taskforce partners will work together to measure oxygen demand, work with financing partners, and secure oxygen supplies and technical support for worst- affected countries.
- ➤ Since the start of the pandemic, affordable and sustainable access to oxygen has been a growing challenge in low- and middle- income countries.

Oxygen is an essential medicine, and despite being vital for the effective treatment of hospitalized COVID-19 patients, access in LMICs is limited due to cost, infrastructure and logistical barriers. COVId-19 has put huge pressure on health systems crisis with hospitals in many LMICs running out of oxygen, resulting in preventable deaths and families of hospitalized patients paying a bill for scarce oxygen supplies.

Most of people of park circus are not aware about their health. There is lot of filth in the slum, piles of garbage improper sanitation and open drainage is a common scenario. Tobacco (gutka) spits are prominent with a low level of cleanliness. There are potholes at various places including on roads, which serves as the breading ground for mosquitoes and which can cause many fatal diseases such as malaria & dengue. People are showing carelessness about the Global pandemic (COVID-19), many persons were seen not abiding COVID norms and protocols like wearing masks and taking vaccine shots there are also some exceptions where some people have taken vaccine and abiding through the guidelines of the government. Few people also complained regarding not getting any type of vaccine as the crowdedness on the vaccine centres and shortage of vaccine (initially), resulted in their negligence.

There was a demand from most of the people that in spite of a government hospital in locality they are not getting proper treatment due to shortage modern technologies so government should equip these hospitals with all kind of modern amenities and technology, where they can get treatment for any kind of diseases at earliest. People had to face different kinds of municipal problems caused by improper administrations like water logging, potholes on roads, clogged drainage, if all of these things are administered and cleaned properly then only people will be free from diseases.

Citizens/residents of park circus were very much obliged by the works of the government during the corona pandemic, when there was a lockdown in the whole country, all kinds of work were on halt with no source of income, the government gave free ration so that the families could survive. There was a lot of help and apart from this, beneficial schemes like *Swasta Sathi* card which gave a ray of hope to this people that they can now get a quality treatment in the private hospitals. With this scheme a family will be liable of getting an insurance of up to ₹5 lakh which will be acceptable by any private or government hospital and with *Lakhkhi Bhandar* female population of scheduled caste (SC) and scheduled tribe (ST) women's were benefited by getting a credit of ₹1000 per month and ₹500 per month to general category women's, directly in their bank accounts.

Any government scheme is not fruitful until and unless it is widely operated in a correct manner. It should be performed and executed to produce good feedback of the effectiveness. The scheme should be acknowledged by the all citizens regarding its value and importance, which moulds a society as well as a country. Each scheme has three steps to be followed:

- wide circulation
- well education and
- strong rooted implement in a country to get good effect.

Any citizen either educated or uneducated should be obedient to any rule or a scheme. Everyone should intimate a scheme by heart to make himself/herself get advantaged of the scheme. there are so many poor and illiterate who are not sincere and careful of the schemes of healthcare, so they suffer more for their whole life. Awareness camps and programs should be held more often to enlighten people about the health hazards, precautions, medical treatments and basic idea of first aid as well as government sponsored schemes for the citizens. Educated citizens should be encourage to take steps and come forward to indulge in these camps to promote awareness.

Our healthy future cannot be achieved without putting the health and wellbeing of citizens at the centre of public policy. When we visit these kinds of places(slums) such as **Park circus** and see this people living in these miserable conditions, the question arises that after 75<sup>th</sup> year of independence what kind of state we have made? where meagre health problems can't be eradicated and people of the largest democracy had to face problems regarding daily life amenities despite of a complex healthcare and administrative structures.

As per our suggestion there are few important matters which are of keen importance:

- Every scheme basically on health needs to be implemented with due proper awareness by the administration. As in most of the cases it is seen that lack of proper knowledge and awareness, people don't get any benefits from such scheme.
- Healthcare official should carry out surveys frequently by visiting these slum areas and carrying out routine check-ups for children's women and elderlies, special concerned is to be given to pregnant ladies as well as infants, as most of them are more prone to malnutrition and health hazards. Proper vaccination for infants and better nourishment.
- The Municipal government and administrative authority should conduct sanitization drive for proper cleaning of drains and roads more frequently. People should be made more aware to keep their locality in slum areas clean and it should be on regular basis. The tidiness and hygienic surroundings can help to build a proper atmosphere to live in and prosper.
- Drinking water is one of the most essential things for existence, as in this modern world people are less fortunate of having purified drinking water. The government should improve current arrangement for supply of tap water and ensure hygienic and sustainable water supply. Frequency of water tankers which carries drinking water is to be increase in these areas which is currently operating 3 to 4 days a week.
- More Public toilets are to be constructed so that people living in huts and thatched roofs beside the railway track and inside the slum could use it for lavatory purposes. Which will in turn reduce the chance of contamination and eradicate health problems.