

India: Modi government moves to “reopen” economy as virus cases surge

Wasantha Rupasinghe, Keith Jones
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Led by Prime Minister Narendra Modi and his Hindu supremacist Bharatiya Janata Party (BJP), India’s central government is encouraging state governments and district authorities in wide swathes of the country to begin “reopening” the economy, even as COVID-19 cases and deaths surge.

Yesterday, Indian authorities reported 1,577 new COVID-19 cases, the largest increase to date, and 47 additional deaths. This brings the official tallies to 18,601 cases and 595 deaths.

Maharashtra continues to be the hardest hit state, with 4,666 cases and 232 deaths. With more than three thousand COVID-19 cases, Mumbai, India’s commercial capital and second largest city, accounts for almost two-thirds of Maharashtra’s novel coronavirus infections.

Alarmingly, authorities appear to be failing in their efforts to stop the spread of the disease in Dharavi, a Mumbai slum. With 700,000 people living in an area little more than 2 kilometres square, Dharavi is one of the most densely populated places on the planet. Confirmed COVID-19 cases in Dharavi now exceed 175, including 11 deaths.

India is ostensibly under nationwide lockdown until May 3. But in extending the original 21-day shutdown order for a further 19 days on April 14, Modi, egged on by big business, announced that outside of areas deemed coronavirus “red zones” many industries would be allowed and encouraged to reopen starting Monday this week.

Sectors greenlighted for reopening include manufacturing, especially facilities located in Special Economic Zones and Export Oriented Units, tea, coffee and rubber plantations, oil and gas production, and construction. With the complicity of the political establishment, Indian employers violate the country’s lax occupational health and safety regulations virtually at will, but the authorities are claiming companies can be

trusted to enforce “social distancing.”

Under the BJP government’s reopening guidelines, public work projects under the Mahatma Gandhi National Rural Employment Guarantee (MNREG) can also resume with the approval of local authorities. The routinely oversubscribed MNREG is supposed to provide 100 days of menial, minimum-wage work per year to one member of every rural household that wants it.

Modi, the BJP government and the corporate media have cynically sought to justify their push for a premature return to work by pointing to the desperate plight of the hundreds of millions of workers and toilers whom the lockdown has deprived of their jobs and any income.

Criminally, Modi imposed the lockdown with less than four hours warning, and without making any provision for the large majority of Indian workers who are dependent on “informal sector,” subsistence day-labour jobs. While the government subsequently threw together a package of “relief” measures, this assistance amounts to starvation rations. Moreover, only a fraction of the newly jobless have been able to access it.

Underlining that it views India’s workers and toilers as dispensable, the BJP government has added not a single additional rupee to this “relief,” even as it has extended the lockdown to 40 days.

The BJP government’s reopening plan is as recklessly improvised as its lockdown.

For starters, Indian authorities have no idea as to the true extent of the contagion, since, from the outset, they have rationed tests. To date, in a country of 1.37 billion people less than 450,000 tests have been administered.

Given the lack of testing, the government’s claims to be able to distinguish COVID-19 “Green” and “Yellow” zones, where there is reputedly “minimum risk” of the virus and businesses and industries can restart, from “hot spots” or “Red” zones, where it claims the lockdown must remain in full force, are a cruel fraud.

Second, India manifestly lacks the capacity to conduct mass-testing and contact-tracing and its health care system is in shambles. For decades, India's government, whether led by the Congress Party or the BJP, has invested 1.5 percent of GDP or less in health care.

Under these conditions, Modi's push to reopen India's economy so that big business can resume its sweatshop exploitation of the working class threatens to magnify the ruinous impact of the highly contagious and lethal novel coronavirus many times over.

The government's ill-prepared lockdown and miserly relief have already caused immense hardship, especially for the poorest sections of the working class, the migrant workers and other day labourers.

Left by the government to fend for themselves, millions of migrant workers who had been employed in Delhi, Mumbai and other major centres sought to return on foot to their native villages. While some succeeded, the vast majority were intercepted along the way and forced into makeshift internal refugee camps, after the government suddenly realized its impromptu lockdown had precipitated a mass migration that threatened to spread the coronavirus across rural India.

Conditions in these camps, which the authorities have largely left to NGOs and charities to organise and provision, are generally appalling. Common complaints include: lack of food and water, overcrowding, poor sanitation, mosquitoes and police harassment. Everywhere workers, angry at their effective detention by the state, have one question on their lips, "Why can't we be sent to our villages?"

The reports from the poorer districts of Delhi and other major Indian cities are no less harrowing. On April 18, the News18 website published a report titled, "Should we watch them die of hunger?" These new mothers can't even breastfeed their babies due to lockdown." It documented how new mothers in a poor district of Gurgaon, an industrial city on the outskirts of Delhi, are unable to feed their children because their husbands are without work and income. Neetu, whose husband has been unable to practice his trade as a cobbler, told News18 she had not had a full meal since she gave birth to her fourth child on April 7. "Some medicines had also been prescribed," she added, "but I don't think I've had any. I feel dizzy mostly and weak always. My child is also weak."

These conditions are provoking growing opposition and have led to clashes between poor workers and police in Mumbai, Surat and other cities (see: "Millions of internal

migrant workers suffering under India's lockdown").

Meanwhile, due to a lack of Personal Protective Equipment (PPE), hundreds of doctors, nurses, and other medical staff have become infected with COVID-19.

On Tuesday, a coronavirus positive doctor who was being treated at Teerthanker Mahaveer University (TMU) medical college in Moradabad, Uttar Pradesh died.

In Mumbai, more than 200 medical personal have been infected and the city's Central Wockhardt Hospital has been closed for two weeks due to a large coronavirus outbreak among the staff.

Earlier this week, Swati Rane, a frontline healthcare worker and vice president of the Clinical Nursing Research Society, told Al Jazeera the situation in the city's hospitals is chaotic. She explained that currently the main source of COVID-19 infections among medical staff is not COVID-19 wards, but other wards, operation theatres, and emergency departments where the staff are being denied PPE. "They are at risk," said Rane, "as they do not even wear N-95 masks, which are important. If complete PPE is not possible, at least give them masks, gloves and gowns."

Across India state authorities have responded to a flood of complaints from doctors and other medical staff over the lack of PPE with threats of reprisals and repression.

Last Saturday, *The Wire* published an open letter from more than two dozen doctors and public health activists that called for PPE for all medical staff, food security for all Indians and the maintenance of public transport as an essential service to ensure access to health care for those living in rural and remote areas.

The letter also opposed the attempts of the BJP government, its Hindu right allies, and much of the corporate media to scapegoat Muslims for the spread of the pandemic. "This communalization of the pandemic, particularly targeting Muslims will prevent us," declared the open letter, "from using this opportunity to identify gaps in our public health system and put pressure on the government to plug these gaps so that we are much more prepared for any future outbreak. Blaming one community while not holding the government accountable serves no purpose."



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