

Sri Lankan government continues to ignore the rise of COVID-19 and other dangerous infections

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COVID-19 infections have been increasing in Sri Lanka since May this year. With the complete absence of mass testing or disease monitoring, the extent of the spread is impossible to determine. However, the prevalence of the virus is now being demonstrated in a number of tragic deaths.

The increase of infections in Sri Lanka appears to be part of a broader regional trend. Recent media reports show COVID-19 is at high levels in India with its health ministry indicating active cases had risen to 7,121 with 306 new cases on June 12.

On Thursday, the *Daily Mirror*, quoting Professor Dushantha Medagedara from the Faculty of Medicine at the University of the Northwest of Sri Lanka, reported that two more people had died from a new COVID-19 variant. That followed the death of an 18-month-old child in Galle, in the Southern Province, earlier this month after they tested positive for the virus.

While public concern is rising over the worsening situation, the Janatha Vimukthi Peramuna/National People's Power (JVP/NPP) government is concealing the true extent of the spread of this and other highly infectious diseases and the dangers they pose.

On June 2, Health Ministry secretary Anil Jasinghe issued a statement declaring that "health authorities remain vigilant in monitoring disease trends" but that the population "need not panic unnecessarily." He advised that "if individuals experience fever or respiratory symptoms, there is no need for hospital admission out of fear. However, if someone has difficulty breathing then medical attention should be sought."

In a media briefing on June 3, Health Minister Nalinda Jayatissa said his ministry would take the next decision over the current spread of COVID-19 "based on the number of cases being reported."

In fact, other than randomly testing patients who present for treatment at the island's 20 main hospitals, there is no scientific and large-scale method to assess the current prevalence of COVID-19. The Health Ministry's "COVID-19 Situation Report," moreover, has not been updated since December 13, 2022.

Jayatissa's claims that his ministry would respond "based on the number of cases being reported" is absurd and cynical.

Without a proper assessment system, it simply means that the JVP/NPP government will not take any serious action to protect the population from the deadly disease.

The government's real policy was revealed when a journalist asked the health minister whether the government would make mask-wearing mandatory. He replied: "We have increased PCR testing in hospitals. We cannot take decisions irresponsibly."

The reason the JVP/NPP government, which is fully committed to the International Monetary Fund's (IMF) austerity program, is unwilling to make face masks mandatory is because it fears this would make the public more aware of COVID-19 and demand increased government spending on public health.

Along with rising COVID-19 cases, there has also been a sudden increase in other dangerous infections, such as dengue fever and chikungunya, across the island.

According to Professor Neelika Malavige, who is Immunology and Molecular Medicine Department head at Sri Jayewardenepura University, "Sri Lanka is currently experiencing a large chikungunya outbreak after 16 years and the current virus is of the Indian Ocean Lineage (IOL) with several unique mutations."

Chikungunya is transmitted to humans via the bite of an infected mosquito. Though the disease is not fatal, some studies have indicated that 30 percent or more of patients experience persistent joint pains and prolonged fatigue for months or years after illness.

Those infected with COVID, dengue and chikungunya also confront a dangerous lack of human and physical resources in Sri Lanka's publicly funded health system. The country's hospital network is currently struggling with severe shortages of essential medicines, including antibiotics, insulin, painkillers and drugs for heart disease and high blood pressure.

According to General Medical Officers' Association secretary Chamil Wijesinghe, nearly 180 essential medicines in the medical supply sector had completely run out and 50 other basic items for hospitals had been depleted by the end of April.

An Emergency Treatment Unit (ETU) doctor at the Kandy National Hospital, the country's second-largest hospital, told

the *World Socialist Web Site* that the facility had no stocks of salbutamol nebulisation solution, which is critical for asthma treatments, for three weeks during April. “This is an essential drug for the ETU,” he said.

The collapse of laboratory facilities in state hospitals also means that patients are now forced to pay exorbitant fees to obtain medical tests from private laboratories. Doctors say that patients who cannot afford to pay do not take these tests, making it impossible to properly diagnose them.

Health workers also report service outages due to lack of proper maintenance of equipment. The Government Radiology Technologists Association recently stated that patient treatment has collapsed due to the inoperability of four “linear accelerator” radiation machines in the cancer units of major hospitals in Karapitiya, Maharagama, Batticaloa and Jaffna.

Public health services centered around the Medical Officer of Health offices have also suffered a similar fate. The lack of human and physical resources needed to properly run those institutions has resulted in the rapid spread of chikungunya.

Meanwhile, medical specialists have warned about the outbreak of dengue, also a mosquito-borne disease. According to the Health Ministry’s Epidemiology Unit there have been 25,300 dengue cases and 13 deaths so far this year.

These developments all point to a serious collapse of the country’s public health service.

While Sri Lanka’s public health system was often hailed as a model for South Asia, the COVID-19 pandemic revealed that it was in serious decline due to inadequate government spending, the result of IMF demands, and an expansion of the private sector.

Cost-cutting IMF demands are continuing under the JVP/NPP government, which came to power falsely promising to immediately upgrade the health system. But like previous big-business governments, it has allocated a paltry 1.83 percent of gross domestic product (GDP) to public health.

Instead of investing billions in healthcare to save lives from COVID, President Gotabhaya Rajapakse’s government did the opposite. Less than a year after the pandemic began it demanded all employees return to work, abandoning the limited measures it previously adopted.

Like every capitalist government, around the world, Rajapakse, and his successor Ranil Wickremesinghe, embraced the anti-scientific “let it rip” agenda, allowing COVID-19 to spread freely. As a result, by April 12, 2024, some 16,897 people in Sri Lanka had died from COVID and 672,754 were infected.

Only the International Committee of the Fourth International (ICFI) and its Socialist Equality Parties (SEP) fought these policies. As a *World Socialist Web Site* Perspective commented on March 17, 2020:

Two irreconcilable interests of two classes stand

opposed to each other. For the capitalists, it is a question of securing their profit interests and ensuring that their property and wealth remain untouched. No measures are to be taken that impinge on their interests. The working class is concerned with the interests of the broad mass of humanity, proceeding not from private profit but from social need.

Opposing the reactionary strategy of herd immunity, the ICFI advanced the global eradication of COVID-19 as the only viable strategy: “Eradication entails the universal deployment of every weapon in the arsenal of measures to combat COVID-19, coordinated on a global scale, to stamp out the virus once and for all.

The ICFI pointed out that this can only be achieved by mobilising the global working class as an independent force and fighting for international socialism. While the SEP in Sri Lanka fought for this perspective, all the capitalist parties including the JVP/NPP, the pseudo-left groups and the trade unions fully supported Rajapakse’s and Wickremesinghe’s “let it rip” agenda.

Five years on, the working class in Sri Lanka and internationally is witnessing a global assault on public health. This can only be fought in a unified struggle against the capitalist system and its replacement with socialism, which places human lives above private profit.



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