PRESS STATEMENT

JAN SWASTHYA ABHIYAN - MUMBAI

A call to Government of Maharashtra to put in place a comprehensive strategy for controlling the spread of the corona virus based on human rights principles, strengthening of public health care and mitigation of the adverse impact on the poor and marginalized

The country is reeling under the impact of COVID-19 which has been declared by WHO as a global pandemic. There is a steady rise in the number of cases each day. The central government has reacted swiftly and put in a range of measures to curb the spread of the virus. Maharashtra which has the highest number of COVID-19 cases in the country is facing its worst health crisis. The state government has ordered all shops, establishments and offices in Mumbai, Pune and Nagpur to remain shut till March 31. This partial lockdown and other strategies of social distancing that have been implemented so far are bound to create severe economic distress for the poor and those in the informal sector given the larger spectre of economic slowdown and rising unemployment in the country.

The city of Mumbai has a whopping 41.3% of its population living in slums¹ and over 2.5 lakh homeless people². Most of them are daily wage earners who live in extremely precarious conditions. They face a disproportionate burden of malnutrition, lack access to adequate housing, shelter, healthcare and basic services, especially water and sanitation and live in areas with high population density. The current approach to pandemic control that is being followed - the shutting down of considerable economic and social activity has already begun to hit them hard, particularly those who are daily wage labourers. Moreover, these communities and others living a cheek by jowl existence in the city would be extremely vulnerable to corona virus disease with disastrous consequences once community transmission is established.

Given the above context, the rising number of COVID-19 cases in the city, the severe challenges faced by the public health system and the dominance of private health care in the city, Jan Swasthya Abhiyan - Mumbai demands that Government of Maharashtra and the municipal corporations in the MMR region work in close coordination with various stakeholders to put together a comprehensive public health strategy which while focusing on the control of the pandemic also takes into the account the adverse impact that control measures are having on the lives and livelihoods of people. The strategic response to the COVID-19 crisis must also prioritize strengthening of the public health care in the city, especially primary health care, community solidarity and a respect of the rights and dignity of all persons, especially those infected with the virus.

In particular we demand that Government of Maharashtra and the municipal corporations adopt the following charter of demands as part of its overall response

² https://indianexpress.com/article/cities/mumbai/the-street-is-their-home-mumbai-homeless-people-5840818/
I. Health Care Related

- **Scale up testing facilities across the MMR region**: Currently, there is only one testing facility in Mumbai - Kasturba Hospital for Infectious Diseases at Chinchpokli. As government scales up testing it must ensure that testing facilities are expanded to the central, eastern and western suburbs. This can be done by starting facilities in larger hospitals run by municipal corporations and the state government. In the meanwhile sample collection must be initiated at the ward level so that people do not have to stand in large queues for testing, thereby placing themselves at further risk of exposure.

- **Involvement of private sector**: As the epidemic advances, the government will need to spruce up enough healthcare capacity by involving private health care sector. While doing so government of Maharashtra and municipal corporations must ensure that there is strict regulation of costs related to testing and treatment so that there is no profiteering. Charitable hospitals must be roped in to provide treatment free of cost to poor patients with corona virus disease. Anti-viral drugs should be made available free within the public health system and at subsidized costs within the private sector. All such measures will require decisive and determined action by the State.

- **Health system preparedness**: To prepare for the surge of patients requiring health care and hospitalization, the state government and municipal corporations must ensure that there are adequate personnel, beds, oxygen supply, ventilators, medical equipment and capacity for intensive care in the MMR region. Clear guidelines must be put in place for examining, diagnostic sampling, admitting and referring patients with COVID-19 disease. Hospitals should not be allowed to turn away or evict patients showing symptoms without proper referrals. Government must ensure that there is adequate safety equipment for health workers. Fears and anxieties of health care providers involved in the treatment and management of the disease must be acknowledged and counselling services should be made available to them. An action plan must be put in place to ensure that there are no breaks in treatment for patients with TB, Cancer, HIV, etc.

- **Creating additional quarantine facilities**: Social distancing and home quarantine for population in slum and other informal settlements is impossible. We propose that vacant PAP tenements, MHADA housing, hostels, schools and other vacant housing in MMR region should be taken over by the government for quarantine facilities. Private and trust run hospitals should also be roped in to create additional quarantine facilities.

- **Mental Health Care**: Mental health services, especially counselling services through helplines should be made available for patients in quarantine, those who test positive, their caregivers and those experiencing stigma and discrimination. The state government and municipal corporations must collaborate with civil society organizations and other mental health services in the MMR in this regard. IEC campaigns must include positive mental health strategies to deal with social distancing, isolation and quarantine.

II Need for improved living condition and access to basic services

- Communities having no access to potable water should be provided water through tankers.
- Provisions for soaps and water should be made available from the budgets of Swachh Bharat Abhiyan for community toilets and Sulabh through their own funds. No one should be charged for availing the facility of washing hands in Sulabh Shauchalaya. The State Government, MCGM must ensure that there are soap, water and sanitizer facilities bus depots, railway stations, market places, etc. Protective gear must be made available to workers involved in road sweeping and transportation of garbage for MCGM and other neighboring corporations.
- Since anganwadis in communities have closed down temporarily, provision for providing meals to children should be made closer to their communities. The services should also be extended to school going children, pregnant and lactating mothers, disabled and elderly. Appropriate budgetary allocation and availability of cooked meals should be ensured.
- Homeless persons who test positive for COVID-19 should be provided temporary shelters in the vacant buildings. These shelters should have established water connections and usable toilets facilities.
• Regular fumigation, waste collection should be carried out in slums, dense informal settlements. Public spaces must be regularly disinfected.
• There must be an immediate increase in public expenditure by the state government that leads to widespread demand-side support in the form of increased social security and food security measures such as enhancement of entitlement under the Public Distribution System (PDS), and cash transfers. Soaps and sanitizers must also be made available through the PDS.
• Payment periods for electricity and water bills must be extended by a month or two given the loss of livelihood due to reduced economic activity.
• Government of Maharashtra must ensure wage compensation for all those who are missing work because of the pandemic and strongly advise the formal sector to provide paid sick leaves to its employees.

III. Need for adequate information

• IEC material on corona virus prevention should be distributed in the community through the established ICDS and public health networks with support from grass roots organizations. Information should be in Hindi, Marathi and Urdu. IEC campaigns must emphasize a compassionate, nondiscriminatory approach to infected persons and their families and the need for community solidarity.
• Government, health professionals, civil society organizations, housing societies must come together to address widespread fear and myths and misconceptions related to the spread of COVID-19 so that those infected and their care givers are not targeted in anyway.

IV. Complete moratorium on evictions

• We cannot evict people from their habitats even if found to be illegal in this time of crisis.

This statement has been mailed to Honorable Chief Minister of Maharashtra, Mr. Uddhav Thackeray; Minister of Health, Mr. Rajesh Tope and Mr. Parveen Pardeshi, Municipal Commissioner, MCGM.

For Jan Swasthya Abhiyan - Mumbai,

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