

## Review Article

# Late reply to no reply for COVID-19 in India: a tale of India's journey in fighting the pandemic and way forward

Suma Rache<sup>1</sup>, Anand Dixit<sup>2\*</sup>

<sup>1</sup>Department of Epidemiology, NIMHANS, Bengaluru, Karnataka, India

<sup>2</sup>Department of Neurology, NIMHANS, Bengaluru, Karnataka, India

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### \*Correspondence:

Dr. Anand Dixit,

E-mail: [ananddixit28@gmail.com](mailto:ananddixit28@gmail.com)

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## ABSTRACT

More than one and a half years has elapsed since the World Health Organization (WHO) declared Coronavirus disease 2019 (COVID-19) as a Public Health Emergency of International Concern (PHEIC), and characterized it as a pandemic. A systematic, monthly analysis of weekly situation reports of COVID-19 released by WHO and relevant news articles/events available in the digital version, since January 2020 to till date was done and the critical review of the pandemic management in the country is provided. The consequences of late reply to the pandemic in the 1st wave include failure of preventing the crowds of migrants in the cities queuing up to get a square meal and returning to homes by harsh journeys for long distances coupled with poverty led deaths rather than deaths due to COVID-19. In the 2nd wave, the system not only failed to face the war waged by the disease but rather, in few instances appeared to be encouraging super spread of COVID-19 through activities such as allowing the pilgrims to take dips in Ganges as a part of Maha Kumbh which lead to overwhelmed cases. The most important and the only valid way forward to win the battle of this pandemic along with sticking to Covid Appropriate Behaviour (CAB) is to invest more for vaccinations in union budget to get 95% of the citizens vaccinated at the earliest as the further waves are definitely going to target the unvaccinated individuals.

**Keywords:** COVID-19, Coronavirus, Lockdown, Non-residential Indians, Situational analysis

## INTRODUCTION

As soon as the primary news of the coronavirus outbreak within the city of Wuhan of Hubei province of China was out, it was not immediately anticipated by many of the health care practitioners in our country about the speed and extent of its spread and transmission across the globe. The capacity and probability of the virus to invade the geographical and Political boundaries to progress as a pandemic was undermined.<sup>1</sup> India, like many other fast-growing economies of the world, overlooked the very fact that the world now is a global village due to globalization and Chinese entrepreneurs are holding a major contribution towards this. COVID-19 was realized as a sole health threat only after the declaration by director

general of WHO that the outbreak of novel coronavirus (2019-nCoV) constitutes a Public Health Emergency of International Concern (PHEIC) as per the advice of International Health Regulations (IHR) Emergency Committee on January 30, 2020.<sup>2</sup>

The aim of this review was to understand the situations and turns of events in India in both waves of COVID-19 and provide inputs for efficient management of further waves COVID-19 in the country. For this, a systematic, monthly analysis of weekly situation reports of COVID-19 in India released by WHO and relevant news articles/events available in the digital version since January 2020 to till date was done and the critical review of the pandemic management in the country is provided.

## WAVE 1 OF COVID-19 IN INDIA

By February 1, 2020, India has reported only one case in Kerala who was a student that returned from Wuhan. Entry screening for symptoms of fever and cough for travelers coming from China at 21 airports of India was initiated. Travel advisories were issued regarding travel to and from China alone. The country's preparedness for a health emergency was evident with only one institute (NIV, Pune) testing for about 49 samples in a period of one month since the outbreak in Wuhan from December 2019.<sup>3</sup> Only on 22nd February, the screening at airports extended to flights coming from over 10 countries of eastern and south east Asian countries while during the same period there were exponential increase in cases and the associated mortality across European countries. Along with this, GoI started evacuating citizens from Wuhan city undermining the safety of Indian nationals back home due to increased political demand.<sup>4</sup> Until March 22nd and further from March 28th when the whole country was pronounced to be under lock down, the governments have solely relied on screening at airports from selected countries, testing of symptomatic- suspect cases in 12 designated laboratories across India. Extensive IEC activities through all means of communication were carried out. With announcement of Janata curfew and lock down, further break of chain was intended.<sup>5,6</sup> Only on March 28th, all the international flights were suspended. However, until and for almost 3 months, the government has overlooked the risks of inter state migration within the country, of disease transmission by evacuations from across the nations and poor screening at the borders, both national and international, seaports and airports particularly with the flights and passengers from western countries. The situation was worsened with incidents such as protests against Citizens Amendment Act (the famous Shaheen Bagh protest) and the Tablighi jamaat incident which proves that the IEC activities were not well received by the masses.<sup>7,8</sup> Though, the visionary leadership and prompt timely actions of mobilizing the crowds and masses in understanding the fact of fight against unknown enemy was appreciable, India's major strength, its human capital was at the risk of war from an unknown enemy. Late imposition of lockdown, poor preparedness for an international health emergency in terms of technology, equipment and man power had pushed India to a dangerous risk of increased morbidity and mortality. Failure of governments to prevent the crowds of migrants in cities queuing up to have a square meal and returning homes by travelling long distances, sometimes even losing the battle of life due to harsh journeys and poverty but not due to COVID-19 were the consequences of late reply to the pandemic.<sup>9,10</sup> The governments could have thought and performed much more to gain the trust of Indians in home rather than evacuating the NRIs who constitute a small proportion of 130 crores of Indians, during the peak of transmission, putting the national security at the risk. Instead the NRIs could have been tackled through Indian embassies and ambassadors residing in the respective countries by providing the resources such as money, food, health facilities. All international flights should have been

ceased at the initial stage as a prevention measure to check the spread of coronavirus in India. Also, India cannot mask the fact that during lock down people, particularly women, had succumbed to many other issues such as domestic violence, mental health problems, lack of health services for basic Reproductive, Child health problems across private and public hospitals, as understood by various anecdotal documents. Inappropriate understanding by health care facilities, of the timely guidelines by Ministry of Health and Family Welfare (MoHFW) had taken many innocent lives for NCDs such as Myocardial infarction in India, the losses and miseries that many middle class families could ever bury. Though the mental health assistance was provided by NIMHANS with a tollfree number, the women were not empowered enough to make use of the services. Also, the tollfree number was overwhelmed with calls from all across the country. The Government of Tamilnadu had a good initiative of having one stop centres and appointing protection officers, one for each district, to effectively handle the violence against the women.<sup>11</sup> This model could have been adopted across the country.

## DID INDIA HAVE A REPLY FOR WAVE 2 OF COVID-19?

While the initial success of fight against Covid-19 is attributable to the laudable leadership and the resultant mass mobilization for COVID-19 appropriate behavior, as observed above, the same was not the case during 2nd wave. The leadership also urged the people for COVID appropriate behavior and the importance of vaccinations by and until October. By the end of March, 2021, India has crossed 6 crore vaccine doses.<sup>12</sup> However, the system not only failed to stop but rather, in few instances appeared to be encouraging the pilgrims taking dips in Ganges as a part of Maha kumbh. About 91 lakhs citizens took part in this "super spreader activity" from January to April.<sup>13</sup> Thanks to notorious communal beliefs and activities in the country. The biggest blow was conducting political rallies and gatherings due to electoral politics across West Bengal, Tamilnadu, Assam and Kerala. There were obvious scenes of minimal or no social distancing and no wearing of masks. Surge in cases and multiple mutant variants of virus were observed in the country since February, 2021. Vaccination rate was less though India ranked second in the world in terms of number of Vaccination doses in the world.<sup>12</sup> What is heart wrenching is that by April the country was drowned with the shortage of oxygen supplies resulting in loss of large number of lives making the country to witness the worst disaster of human kind.<sup>14</sup> There was no reply to the second wave of COVID-19 in India.

## WAY FORWARD

Though the situation appears to be under control currently, the country is standing at the peak of vulnerability from wave-3 from deadliest strain of the virus- Delta variant which originated in India and is already creating havoc in

USA and other parts of the world. The nations of the world are re-imposing/declaring health emergencies and indicating the possible multiple lock downs in near future while India already unlocked most of the states except for 2 to 3 states.<sup>15</sup> Also, callous comments by responsible personalities made quite often regarding the political and communal gatherings in India which actually influence the masses not to stick to COVID appropriate behaviors. Though measures like fines for not wearing masks have been initiated in cities like Bengaluru, its enforcement and implementation remained poor after the 1st wave. The shortage of vaccines and vaccination rate cannot be overlooked. With governments thinking about opening of schools and educational institutions and vaccinating the students attending the institutions, which is appreciable, the practicality of the approach should be deeply analysed before taking the step hastily and putting the lives of children at risk. Strict avoidance of mass gatherings, crowding and other violations of covid-19 appropriate behavior should be observed.

## CONCLUSION

As the fellow public health experts and epidemiologists, we also suggest by our understanding of evidence that behavioural change communications have little impact on health when compared to strict enforcements by policies and laws. Thus, all around India, violators should attract stringent punitive measures. Last but not the least, all the measures of unlocking should be in controlled and phased manner, at least until the vaccinations are given to 70% of the adults in the country, as the negligence results in huge cost. The most important way forward is to invest more for vaccinations in union budget to get 95% of the citizens vaccinated at the earliest as the further waves are definitely going to target the unvaccinated individuals. This is the only and imminent way forward for India to win the battle against the pandemic.

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