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Body Politics of the Indian State in the COVID-19 Era: from an Ambedkarite Lens

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A health pandemic is a complex phenomenon that can't be merely understood in biomedical terms while ignoring the socio-cultural context of how it has spread, and the way countries have responded to it. For this reason, many scholars like Reyes (2020) and Horton (2020) have argued that we need to look at natural/health disasters in conjunction with the social interactions and institutional responses to make an accurate sense of the situation. The Covid-19 pandemic was initially touted as a great leveller as it didn't distinguish between different social classes while spreading profusely among people, which created a false image that somehow every person, whether rich or poor, is equally affected by it. However, in the past one year we have seen anything but the pandemic having an equal impact on everyone. In fact, what happened was that different measures were taken for different groups to address the spread of the virus, which showed a great bias against vulnerable groups and communities in India. Instead of being a great leveller, the pandemic exacerbated the social cleavages and ended up increasing inequalities.

In this article, I am going to analyse the body politics of the Indian State from an Ambedkarite lens to argue that the deeper social virus of Brahminical patriarchy shaped the way Indian State responded to the crises. I will draw upon the relief work I have been involved in since the past 1 year, which started with supplying food and other essentials, and then move to address community health issues of the most marginalized groups. With this theorization, I hope to contribute to the conversation on how an Ambedkarite perspective is an important tool in understanding social phenomena in the South Asian context and to encourage more such scholarship to make sense of the Covid-19 pandemic and its repercussions.

Body Politics of the Indian State

Brown and Gershon (2017) explain the nature of body politics of the 21st century by highlighting new forms of inclusion and exclusion of bodies by the State by employing different kinds of bio-regimes to discipline the polity. In the government's response to the pandemic, it has given contradictory messages about what is required by the people, and it uses the resulting confusion to take arbitrary steps. On the one hand, the State promises that it will interfere less by making claims such as "minimum government and maximum governance," but on the other hand we see more and more intervention of t State in private matters that should ideally be beyond intervention. In this

double bind of simultaneously more and less State intervention, we encounter a regime that wants to govern and control bodily movements of the people to an extreme level while shirking all their real responsibilities towards the same people.

In the Indian context, we have seen that the ruling government not only aims to capture absolute power of the State but also is interested in capturing religious and cultural hegemony in the society that goes way beyond political power. It aims to control the private lives of the citizens whether in matter of food, clothing, relationships, love, personal laws, and other such areas considered private in a liberal democratic setup. While at the same time, the State is heavily interested in privatizing many areas of public interest such as education, health, agriculture, land, and other essential public goods. So, interfering in private matters while withdrawing from the actually important public affairs has been a systematic trend that has been observed in the past few years, and the pandemic provided even further opportunities to infiltrate the lives of its citizens.

Thus, with such deep and absolute desires of controlling human bodies, the Indian State found the perfect opportunity that the pandemic and the associated Epidemic Disease Act of 1897 and its amendment of 2020 provided. Instead of treating the situation from a public health lens, the State came out in full force on 24 March 2020 when it announced an unplanned lockdown to supposedly control the spread of the virus in the country. Treating the situation with the heavy handedness of a law-and-order problem, the curfew implemented across the country was instrumental in restricting vulnerable human bodies.

Thus, going back to Reyes (2020), Covid-19 in India can't be understood as merely a health pandemic but should be understood as a socio-natural disaster that brought out the insidious use of body politics by the Indian State in responding to the pandemic. At one level it used curfew style lockdown in the name of stopping the spread of pandemic while on the other hand made little effort to address the enormous livelihood, hunger, and health crises that hit the most vulnerable communities. In this way, the Indian State showed that its priorities are to control the private lives of its citizens as it shirked its responsibility for the public crisis caused by the lockdown.

We first witnessed the immediate effect of the lockdown on migrant and da wage labourers because of the sudden loss of their livelihoods, whil **Translate** »

we also saw the knee-jerk reaction of sealing down homes and neighbourhoods, creating more stigma against those who were detected as Covid-19 positive (Chetterje 2020). In the months following 24 March 2020, we saw many people starving, sometimes to death, as no relief reached out to them, while many started walking back to their homes, sometimes hundreds of miles away in villages, as there was no transport made available to them for another 40 days. The *shramik* trains that started only in the beginning of May were equally unplanned and had severe problems –from not having enough water and food facilities to actually reaching a wrong destination. And the grossly insufficient number of trains required to send migrant labourers back to their rural homes as well as the complete lack of coordination created a human crisis that could have been avoided. In our relief work, we constantly heard migrant labourers lamenting that the State has left them to their own devices without caring for them. It was as if the pandemic was the labourers' burden to be borne. Migrant labourers demanded to be treated with respect and dignity from the police and State, which treated them as mere animals to be horded off in a train back to their homes. They pointed out that the virus had come to India from rich people traveling abroad and throughout India, but the labourers had to bear the burden of it more than the affluent, who were comfortably sitting in their homes.



The politics of controlling diseased bodies was equally problematic. The State machinery again was in a reactive rather than proactive mode in dealing with the increasing spread of the virus. Instead of more testing, contact tracing, and caring for the sick, the State sealed down homes and areas of those who tested positive, creating immense stigma around the disease. There was no effective communication from the government to its own citizens (apart from a few exceptions like the state of Kerala), which added to people's distrust in government actions. No one was aware as to what would happen if they tested positive because the Covid Care Centers were far away from the localities where people live. Combined with rumours of corruption and malpractices, there was a huge information gap between the State and its citizens, which was further aggravated when police forcibly came to take people to Covid Care Centers and seal down their homes with wooden planks and shutters.

Overall, the State used excessive force in dealing with the crises triggered by the lockdown. Instead of creating trust and consent among the people, the State resorted to forcibly disciplining bodies. This approach betrayed a paternalism of the State: it didn't deem it important to communicate with its citizens but instead treated them as chattel that needed to be managed. At the same time, however, the State behaved quite differently with dominant communities, which were mostly pandered to. Thus, it becomes extremely important to analyse this body politics of the State from an Ambedkarite lens to get a deeper understanding of the State's logic.

Looking from an Ambedkarite lens

The first question that will emerge in the reader's mind would be why do we need an Ambedkarite lens to understand the body politics of the Indian State in Covid-19. Isn't it more important to look at this from a global perspective of human rights and liberty? To respond to this question, we need to first conceptualize what an Ambedkarite lens is and why it is important to have that perspective in making sense of the State's response to the health pandemic in India.

An Ambedkarite lens is a theoretical perspective aimed at understanding whether an approach to social phenomena or problems will alleviate or exacerbate the inequalities that are deeply rooted in societal system

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Drawing on Ambedkar's sharp analysis of the pervasive Brahminical patriarchy in India, the lens can help us analyse, critique, and respond to what is happening around us. For instance, a major focus of Ambedkar's work has been on the experience of dignity (or lack thereof) in the Indian social context. Dignity as a guiding principle of action can help us challenge the State and the elite's callousness regarding the concerns of daily wage and migrant labourers. It can help us problematize treating people as mere objects or as a herd of animals that need to be fed or transported from one place to the other. Even though every human has basic needs to food and shelter, they equally are self-respecting human beings who can't be treated as objects of charity. Thus, a rights-based approach in relief work is essential from an Ambedkarite perspective, which treats all the relief material as the right of the vulnerable groups rather than a charity provided by the State or any NGO.

This rights versus charity approach ironically was inverted by Prime Minister Modi in his creation of PM-Cares fund. Instead of taking responsibility as the head of the State to respond to the pandemic while ensuring the rights and dignity of the people, the PM chose instead to use the opportunity to siphon off people's good will into a new NGO, PM-Cares, that is not accountable to the people of this country as told in a response to an RTI (Right to Information) application. Through this inversion, the PM essentially told the citizens that they have no right to life, food, or healthcare; it will come as a charitable dole from the benevolence of the Prime Minister for which he will be neither accountable nor responsible. A similar kind of attitude was seen in other parts of the State machinery, especially with the police who didn't treat the migrant labourers or the infected patients with rights and dignity but instead treated them as objects for whom they are doing a favour. This obviously goes against the mandate and citizen rights that are enshrined in the Constitution, which is to be followed by the State.

Another big problem emerged by the careless coinage and usage of the term "social distancing." By using social distancing instead of physical distancing, the State helped legitimize newer forms of untouchability practices that have been banned by law in India since 1955 (although it continues to be practiced in subtler forms). Without the sensitivity of understanding how social distancing will legitimize "distance pollution" and fear of touching someone who is perceived as belonging to an "untouchable" community, the language and interventions of the State and Media gave a new life to casteism in India Of course, we need to ensure that the Covid-19 protocols are being "

the people, but at the same time we should attempt to build social solidarity during these challenging times rather than deepen the existing gaps between the communities.

Drawing on Dewey, Ambedkar has emphasized the practice of "social endosmosis" time and again in his writings (Kumar 2020). Social endosmosis is a process through which the different social groups in India, as divided by caste, religious, or ethnic lines, would come together by creating shared practices and lives with each other. However, with the spread of highly communicable Covid-19 virus, we do have to practice physical distancing so that the virus doesn't spread, but it need not create social distance between different individuals and communities. This could have been done by addressing the stigma of the disease head on and to ensure no individual or community felt ostracized. Instead, because of the way some urban slum neighbourhoods were sealed down and labelled as super spreaders, the stigma and distance pollution only increased. Ironically the virus that initially spread through the elite communities was then used to label slum communities as hotspots and origins of viral spreading.

Picture Credit: "File Photo"

This labelling and targeting were done more viciously with urban Muslim neighbourhoods where media in conjunction with the State found new language and metaphors, like Corono Jihad, to legitimize and perpetuate Islamophobia. This began by using bogey of the Tablighi Jamaat m Delhi to brandish Muslims as active spreaders of the virus. This approach spread to most cities of India where hotspots were named after Muslim neighbourhoods and sometimes even after the names of the nearest mosques, as in the case of Uttar Pradesh under the Yogi government. Ironically, none of dominant community festivals were stopped or vilified as super spreaders. For instance, right now as the country is going through an unprecedented second wave, the Kumbha Mela festival is attracting thousands and lakhs of devotees, and no measures of physical distancing or masks can be seen, resulting in a huge spike of cases. This differential treatment of minority and marginalized groups further divided the society and increased inequalities that is core to the ideology of Brahminism. Thus, instead of social endosmosis as a guiding principle, the State used graded hierarchy as their guiding principle to create domination and hegemony instead of equality and fraternity.

Picture Credit: PTI

This otherization not only became worse for the already vulnerable communities, but it also extended to healthcare providers from socially dominant groups. There were many reports that doctors, nurses, and patients were thrown out of their rented houses and ostracized by neighbours. The logic of caste-based exclusion was even extended to the so-called upper-caste members, as was reported by migrant labourers from those communities. A part of the community relief work organized and funded by Azim Premji Foundation, I interacted personally with frontline health workers in E who spoke about extreme stigmatization they had to experience due to the cultural association of purity and pollution with such kind of work. Of course, the sanitation workers, who are anyways disproportionately coming from the marginalized communities, also continued to suffer because of the pollution associated with their work and lack of proper safety equipment. Thus, from an Ambedkarite perspective, the State response needs to be cognizant of this deeply rooted societal association of purity and pollution with manual labour, especially in the context of health and sanitation. By pre-empting such exclusionary behaviours that can emerge in our society, we should be able to ensure safety and support to the frontline workers who are selflessly working for the benefit of others in these difficult times.

With so much happening on the pandemic front in the past year, one would expect the State to be completely immersed in responding to those challenges by bringing people together in trust with each other and with the governments to address the problems together. However, what we have seen instead was that the State has deviously employed body politics and created new laws to perpetuate the system of domination over certain bodies. The farm ordinances were passed in September 2020 without any parliamentary debate as the audios were switched off and no questions were allowed. When the farmers came out to protests in huge numbers, they were labelled as antinationals and terrorists to again silence their voices.

Similarly, the so-called Love Jihad and anti-conversion laws have been introduced in MP, UP, Gujarat, and other BJP-ruled states to ensure that interfaith and intercaste marriages are discouraged. Obviously, this goes against any Constitutional principles or Ambedkarite ideas to increase intercommunity mingling and fraternity. Similar rhetoric to generate hatred and domination of marginalized groups have been seen in the election rallies time and again, where any caution against the pandemic has been thrown away to do mass political rallies. This makes it quite obvious that the State is not really interested in handling the pandemic but is using the pandemic to increase its penetration in the bodies and minds of people while simultaneously withdrawing from most of its public responsibility.

The last dimension I want to emphasize in the Ambedkarite perspective is the toll on education in the past I year and the complete disregard for ensuring education for both school and college students. As we know from Ambedka important slogan of Educate, Agitate, and Organise, education – both school

and higher education – is essential for marginalized communities to build social capital and gain social mobility and respect in this hierarchical society. However, the government policies have really seen Education as the softest target and without really considering the consequences have shut down educational institutions including hostels. India's mid-day meal scheme has been touted as one of the best public policies in the world to ensure nutrition and school attendance for a majority of children, but with schools shut down there hasn't been any strategy for compensating for the loss of the mid-day meal scheme. At the higher educational level, we know from a long history of Scheduled Castes and Scheduled Tribes hostels in the country, that without hostels there is no higher education possible for students hailing from marginalized communities. But without thinking through the entire situation, most colleges and universities have moved to online mode, assuming students can take classes from home. Of course, this is not true. What is actually required is a strategy in which students from deprived backgrounds can access hostel facilities with Covid-19 precaution and where they are also provided internet facilities for attending online classes. Where State's intervention was required the most, the State has been absent and instead made education a soft target, depriving students – especially those from marginalized communities – of education, hostels, and nutrition.

An Ambedkarite response to the body politics of the State

In light of the State's approach, which can be interpreted as callous at best and vicious at worst, we need an Ambedkarite response to fully address the short and long-term societal challenges. By understanding that the State is merely using the pandemic as an opportunity to further its agenda by stigmatizing and depriving the bodies that are already marginalized through Brahminical ideology, we see that the State actually has no real intention of addressing the complex societal problems triggered or brought to the surface by the pandemic. It is essential that we resist the anti-constitutional Brahminical forces and work towards creating an Ambedkarite society. As various aspects of our country's social life have been deeply affected in the past 1 year – whether it is health, nutrition, education, hostels, intercommunity relationships, and much more – we need to revive our commitment to Ambedkarite values and work towards them. The three important Ambedkarite pillars that I discussed in this paper – equal human dignity, social endosmosis or fraternity, and liberatory education – are absolutely essential to creating (just and equal society. But these pillars have been viciously attacke

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past I year in the garb of a pandemic response. We therefore need a clear understanding of what has happened as well as a strong commitment towards rebuilding the pillars of an Ambedkarite future in order to ensure that all our bodies – regardless of caste, religion, class, occupation, or disease statues – are afforded rights and treated with dignity.

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Article Picture Credit: Press Trust of India, Seva Bharati volunteers distribute groceries to people sitting in painted circles to maintain physical distancing during a nationwide lockdown in the wake of coronavirus pandemic, at a village in Prayagraj, Wednesday, April 22, 2020.

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Asim Siddiqui is an Assistant Professor of Philosophy at the Azim Premji University Bangalore. As a teacher, researcher, and socio-cultural worker, he focuses on cultural and ecological justice by drawing upon philosophical traditions from India and outside. His research and current educational experiments have been in developing an aesthetic-contemplative pedagogy for engaging with contemporary socio-political issues. He also does dramaturgy, consultancy, and experiential education workshops. In his previous avatar, he worked with NGOs and technology start-ups, and got an undergraduate degree from IIT Delhi.

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