

#### AIM STATEMENT ON LOCKDOWNS

We have observed since March 2020, beginning with the imposition of the "national lock down", a host of measures that have been ordered by the state - central government, state and union territory governments, and municipal corporations - which have been presented as means to control the coronavirus "epidemic" in India.

These measures are non-pharmacological and non-medical measures, that is, they are presented as controlling the transmission and spread of any disease outbreak or epidemic by halting, restricting, controlling or limiting the routine movement of citizens through the course of their day and week for social, commercial, leisure and faith-related activities.

The Awaken India Movement has opposed and continues to oppose and reject "lock down" and its host of associated restrictions as a means to address and control a disease outbreak/epidemic. Completely opposite to what their alleged aims are, all these measures cause harm to society and individuals. Moreover, these measures have no place - nor did they ever have any place, at any time during the modern medical history of India as has been recorded from the late 19th century - in elementary epidemiology.

## No basis in public health

The "national lock down" that was imposed from March to June 2020, and the many state "lock downs" that followed, including those imposed during the alleged "second wave" of March 2021 onwards, together constitute the most serious assault on citizens' freedoms, civil liberties, inalienable rights, religious and faith-related customs, and livelihoods that post-Independence India has experienced. Not even during the notorious Emergency period (1975-77) were there such draconian measures.

These draconian measures, with no basis in public health whatsoever, gave rise to associated measures such as night curfews, quarantine centres, isolation centres, containment zones, quarantine periods and the like which all were alleged to control the transmission and spread of coronavirus. None of these measures,

not a single one, was supported by the epidemiological evidence in India, of which there is a very extensive record.

### **Opaque decision-making with no accountability**

Worse, not once was any such measure, whether introduced and enforced nationally, in a state or in a city/town/district, subject to review and assessment by any members of the large pool of experienced medical practitioners in India who have worked on public health. Instead, central and state governments, municipal corporations and district administrations either created as bodies to endorse these measure "expert groups" and "expert committees" whose members were chosen and selected opaquely, or issued administrative "orders' to impose such measures which bore no reference whatsoever to any objective assessments of the situation on the ground.

The Awaken India Movement finds that the cumulative impact of such measures has been devastating to the public at large and the ordinary citizen. This impact is far greater, and has much more long-lasting consequences, than would have been the case had any disease outbreak/epidemic in India run its natural course. We say this unreservedly because never in the Indian public health record have healthy citizens been confined - under risk of penalty - and then subjected to continued and acute psychological pressures.

These pressures took the form, early during the "national lock down", as compliance demanded by the state at the point of penalties and fines, and also through physical assault by the police, for not wearing face masks and coverings, or for missing curfew deadlines.

## Assault on citizens' right to services

During 2021, these pressures have taken the form, especially since early February 2021, of submitting to the illegal and unconstitutional "vaccination drive" (or "tika utsav") that was commenced by the central government, and which quickly thereafter was attempted to be enforced by making vaccination against coronavirus the condition against which employment as a government or public sector employee could continue, against which essential services such as food rations from fair price shops could be disbursed, and against which transport services such as metropolitan commuter trains and buses could be boarded. As we state towards the close of this statement, these wholly authoritarian measures have ignored all democratic scrutiny and oversight.

The wage labour and informal sectors of the Indian economy, which have depended on and continue to depend on daily or weekly wages, were especially



from late March until July 2020 reduced to penury and starvation by these draconian measures that had nothing whatsoever to do with public health.

From July 2020 when these measures began to be relaxed in different regions and states, earning daily and weekly wages and monthly salaries once again became possible as commercial and business activity resumed, three to four months of living off debt for a large number of households proved to be a crushing burden. It has been estimated that between 20% and 25% of all households in India were made poorer, and pushed below the true poverty line, directly because of the "lock down" and associated restrictions.

### The devastating fall-out on household incomes, livelihoods

Whether during the "national lock down" or during the many state-level lock downs and movement restrictions during the 2020-21 period, daily and casual wage labour lost income. Surveys have shown that 6 out of 10 domestic workers did not get paid at all during lock downs, that 9 out of 10 casual labourers (such as those who labour at construction sites) did not get paid. Their capacities to save, already small, were ruined for 20 months and counting, and the great majority of such households have been pushed into debt.

The floor minimum wage - which was set at some 18,000 rupees a month three years ago - has proven during 2020-21 to be wholly inadequate to provide for a family given the steep rise in food and fuel prices. Even until the start of 2020, the average Indian household paid some 60 out of every 100 rupees of its medical expenses out of pocket. The "epidemic"-related costs of tests and access to basic medical care have only raised this already very high out-of-pocket expenditure. We find that all this has contributed to a rate of household indebtedness that has not been seen two generations.

Other than during war time, which after 1945 are periods that Indians have experienced for short spells (such as in 1971), there has never been such a long period of concentrated deprivation. The cumulative effect of the "national lock down", the state lock downs that followed, the restrictions placed by municipal corporations and district administrations have caused directly the sharp reversal of all the average standard-of-living and public health gains that have slowly and painstakingly been secured over the previous 70 years.

# No monitoring or review of the 'lock down' effects

The Awaken India Movement has observed that not once since March 2020 until now, December 2021, has the central government or state government or



municipal corporations or district administrations when imposing "lock down" and associated restrictions, acknowledged the specific needs of the sections of the population: up to 18 years old (about 240 million male and 220 million female, total about 460 million), the population above 60 years old (about 143 million) (sources for both these: UN World Population Prospects 2019 Revision), the labour force (about 470 million, source: International Labour Organization, ILOSTAT). Nor did central and state governments learn from their own monitoring: that the "lock downs" had no impact was underlined by the result of the serosurveys carried out by the Indian Council of Medical Research (ICMR) which showed that by early May 2020, more than 6.4 million people were already infected.

The restrictions of all kinds taken together have affected India's large population of children, adolescents and teenagers severely. Their schools and colleges were shuttered for over a year (and continue to be in some places, while where normal classes resumed, they are limited in frequency and attendance, and now in early January 2022 schools in several states and cities are again ordered to close). Children, adolescents and teenagers being snatched away by the tens of millions from socialising settings, where they meet and play and speak to those of their own age group, and also from social and family settings, has caused both psychological and physiological harm to a degree that is still, 20 months after the onset of the alleged "epidemic", neither recognised by the government authorities nor remedied in any way.

#### Children, teenagers, youth: the greatest victims

This impact comes on top of the already very alarming situation that was recorded by the central government in 2017 which showed that more than 840,000 children die before completing the first year of their lives. This number is more than that recorded by any other country in the world. India's infant mortality rate was still 34 per 1,000 live births in 2016, but several states (such as Assam and Odisha with 44 per 1,000, Chhattisgarh with 39 per 1,000, Madhya Pradesh with 47 per 1,000) are very much above the national infant mortality rate.

We stand appalled that for 20 months, the Ministry of Health and Family Welfare, the Ministry of Women and Child Development, the Ministry of Home Affairs, the Indian Council of Medical Research and the health departments of all states and union territories have refused to acknowledge or consider the effects of their "lock down" and associated restrictions on so fundamental an indicator as the infant mortality rate.

Moreover, the shuttering of schools all over the country also stopped the provision of the mid-day meals. For pre-primary, primary and upper primary school



students from 2001 - and for all children in government and government-aided schools until the age of 14 as per the 2013 National Food Security Act - the midday meal programme provides fresh cooked food to 120 million children in over 1.26 million schools (and centres under the Education Guarantee Scheme).

With the schools shuttered the meals to children stopped - directly contravening the provisions of the 2013 Act - depriving them of one of their fresh cooked meals a day. No central or state government authorities have recognised or remedied this effect of the "lock down" and associated restrictions in a country that has over a third of the world's stunted (chronically malnourished) children.

### India's usual burden of diseases stands ignored

Ischaemic heart disease, chronic obstructive pulmonary disease (COPD), stroke, diarrhoeal diseases, neo-natal disorders, lower respiratory tract infections, tuberculosis, diabetes and cirrhosis were the leading cause of deaths in India in 2019 and yet throughout the period March 2020 until the present (December 2021) health authorities in central and state governments, and in municipal corporations, refused to ascertain, prior to considering any restrictive public health measure such as 'lock down', what the effects of such restriction, the curbing of personal mobility (in all situations including medical consultations and routine treatments), and the health effects of reduced income or no income at all were likely to be.

We find this omission to be one of the gravest committed by central, state and city administrations, an omission whose scale and true impact will not be known as the authorities have refused to monitor it. In India in 2015, as per an assessment by the WHO, nearly 5.8 million people died because of non-communicable diseases such as these. Their causes include physical inactivity, unhealthy food (diets low in fruit, vegetables, and whole grains, but high in salt and fats), daily exposure to air pollution (the 2016 Global Burden of Disease report showed that 920,000 premature deaths occurred because of household air pollution and 590,000 premature deaths because of ambient air pollution), tobacco use (smoking, smokeless tobacco), and the harmful use of alcohol.

### Legal subversion through the abuse of two Acts

The Awaken India Movement finds that during the period March 2020 until the present (December 2021), central and state governments, municipal corporations and district administrations alike have grossly and continuously abused emergency powers. Their applications of the Epidemic Diseases Act 1897 together with the Disaster Management Act 2005 and the imposition of sections



of the Indian Penal Code (such as Section 144) have in every single instance shown abuse of power under the guise of addressing an epidemic.

A recent Right To Information (RTI NDMAU/R/T/21/00101) response received by AIM on 27 Dec 2021, reveals the legal vacuum: "There is no objective criteria in the Disaster Management (DM) Act, 2005 for invoking provisions of the DM Act, 2005. The DM Act 2005 contains definition of disaster. Government invokes provisions of the DM Act, 2005, when it deems fit as per the provisions of the DM Act, 2005."

The central government, state governments, agencies and departments of administration, are zealous in claiming to citizens that provisions of the Epidemic Diseases Act 1897 together with the Disaster Management Act 2005 are sufficient grounds for "lock down" and associated restrictions. While doing so, they have obscured procedures for compensation to citizens that are also contained in these acts - Section 2 of the Epidemic Diseases Act and Section 12 of the Disaster Management Act, which are for the defraying of expenses (including compensation) and the relief for lost livelihood respectively, as a result of these acts being in force. It is only because of advocacy work by the Awaken India Movement that these provisions - deliberately obscured by government and administration - have come to be known.

## India's public health practice overturned

When combined with the spate of "orders" issued by local administrations - city corporations, state departments (health, education, civil supplies) - that have effectively created a two-tier society in different parts and regions of India, based on those who have been given one or two doses of the vaccine against Sars-CoV-2 and those who have not, the abuse of these laws and powers has overturned all the principles and practice of public health in India.

We have seen not a single instance of the discussion and employment of the precautionary principle concerning the covid19 "epidemic", and because of the abandonment of the cautionary tenets of public health in India, with the absence of precautions, we have seen no proportionate and graded response to any section of society (whether according to age bands, existing natural immunity, habitat and living conditions, geographical region, etc).

Instead, we have seen, and our attention as a group has been called to, numerous instances of coercion (both in public and private sector, with employees being threatened with termination or withholding of salaries if they do not acquiesce to being vaccinated) and even of forced vaccination. We can only conclude that the silence of the state in the face of such an abuse of human and community rights,



of the principle of bodily autonomy and sovereignty, is tantamount to sanction for a "vaccine mandate" in all but name.

#### Democratic safeguards dismantled

We find that the necessary democratic safeguards that accompany all emergency powers - they must be invoked only through legislative process, their use must be proportionate, their application must be specific, they must be shown to be necessary, their application must be non-discriminatory, their implementation must not infringe rights and freedoms recognised by the Constitution, they must observe time limits, they must be subject to judicial correction - have in every instance been done away with.

The attempts being made by the state and its partners to accelerate the rate of vaccination rests entirely on the stripping away of judicial and legislative checks and balances, and the blocking of citizens' oversight. What has alarmed us is the readiness of the state and its agencies to ignore entirely the directions given in Articles 14, 19 and 21 of the Constitution of India, and likewise the obligations upon the Republic of India as a signatory to international conventions such as the Universal Declaration on Bioethics and Human Rights 2005 and the International Covenant on Civil and Political Rights 1966.

What the state refuses to abide by however is what the citizens of India will defend.

- signed -

National Steering Committee, Team Awaken India Movement