

## WANTED : COFFINS AND FIREWOOD

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Since the last several months Keralam is in the grip of epidemic fevers of several varieties and the death toll is mounting with every passing day. The number of people affected is in terms of millions. Hospitals have proved utterly insufficient to cope with the crisis. The epidemic which started in the rubber growing areas of Pathanamthitta and Kottayam districts in central Travancore has now spread to the whole State. Though there is no known cure for these varieties of fever medical practitioners and pharmaceutical companies are having a roaring time. Treatment is for the symptoms rather than the cause because the causes are yet to be identified. The after-effects of fever are severe and can last a long time. Swelling of body joints, especially wrists, can last several months incapacitating the affected people. Relapses are also very common. The situation has degenerated so much that in several areas of the State there is shortage of coffins for burial and firewood for burning the dead bodies.

A tour of the State will surely reveal the apathy and cynicism that is getting rooted among the people. The media which initially paid a lot of attention to the dimensions of the health crisis has gradually settled down to a condition of casualness. The government has also become casual to the extent that a responsible, senior minister is on record stating that there is nothing new in people getting fever and fever has been there since the beginning of mankind! The people at large can be said to be living with the fever and its after-effects. This is what is happening in a State where the health standards and public health services are supposed to be the best in the whole country. Social democrats were even comparing Kerala health standards and life expectancy to Western Europe. That bubble has burst with the present ongoing fever epidemic. The public health services have miserably collapsed in front of this challenge.

Even before the fever epidemic started to rage the public health services had been exposed as incompetent and extremely callous. This was when the media exposed the death of more than a hundred new-born babies in a premier government hospital in the capital city due to infections inflicted by unhygienic conditions. This was exposed just a couple of months before the present epidemic was detected. And it was during the same period that mountains of rotting organic and inorganic garbage were "discovered" in the heart of Kochi city. By no means it is a peculiarity of Kochi. Every town and city in the State is chockfull of rotting garbage. "God's own country" is stinking to high heavens. Consumerism is at its apex but there is no effective waste management system worth the name. There is little doubt that this is the most important single reason behind the present all-pervading health crisis in the State. The great role of hygiene in preventing ill health needs no explanation.

Unfortunately, in Kerala, the priority is on allopathic medicines and not on preventive measures. Let us hope that this lop-sided emphasis on medicines and doctors who treat patients according to medical dictionaries and symptoms will get a jolt through the present epidemic. At the same time it should be underscored that the prevailing medical system is so deeply entrenched and hence very difficult to be deposed and replaced by a system that will give due emphasis to preventive measures. Allopathic doctors and hospitals and the multinational pharmaceutical companies that are maintaining them are certainly very strong and ultimately only a conscious people can challenge them effectively. The situation is strikingly similar to the octopus-like grip of multinational chemicals companies and seed companies on third world agriculture.

It is a vicious circle. Unnecessary, and often harmful, consumption needs keep on multiplying exactly like the application of chemical poisons in agriculture keeps on increasing resulting in the production of harmful food and unhealthy environment. All this in turn sustains the high profits of multinational pharmaceutical companies and allopathic doctors and hospitals. The more the number and variety of diseases the merrier are these sharks. Chemicals based agriculture, unnecessary consumption needs, proliferation of diseases, general decline in health standards all form part of the same system mutually reinforcing the vicious chain. The cash crop regions like Wayanad district are replete with killer diseases like varieties of cancer. On the whole the situation is starkly bleak.

The often heard excuse advanced by the public authorities is that the State government at all levels is seriously hamstrung in tackling the crisis in public health services {and also education} due to severe scarcity of funds. This is of course not a new development. In fact, since the last one decade the government had been functioning on the basis of overdrafts and it is one of most indebted States in the whole country. And there is no immediate relief in sight. So, when the finance minister or planning authorities blame the financial mess for the crisis in public services it is only passing the buck to invisible hands and this is nothing short of open admittance of incompetency and irresponsibility. It is the social structure itself that is bursting at the seams and belching out all the puss and slime which was getting stored up over a fairly long period of time. In earlier days the rotten character of the body politic could be dressed up under the euphemism of 'Kerala model of development'. But this has simply become untenable because of the very dimensions of the crisis itself. The health sector is currently the most revealing one but it does not at all mean that other sectors are any better.

In a society which is marked by severe and increasing disparities it is only common sense to assume that any crisis is bound to affect the lower strata much worse than others. This is seen very clearly in the ongoing health crisis too. No doubt the middle and richer classes are also hit by the epidemic fever. But they have better resources to ward off fatalities. Private hospitals are forbiddingly expensive in the State and the common workers, in spite of relatively high wages, are effectively out of bounds of the private health services and hence fatalities are more common among them. In Kerala, the public health services are clearly overburdened and, moreover, lack basic amenities. This means that the brunt of the epidemic attack is borne by the working class. And even among the working class the women and children fare the worst. Moreover, the Adivasis, who are the most destitute and are perennially undernourished and starving, are facing a near impossible question of survival. Their oppressors cannot be expected to show any special consideration to this highly vulnerable section of people because they are considered as disposable people, especially when they are making themselves into a nuisance by demanding restoration of their stolen lands. □□□