



ISSUE **04:**MORE COVID CASES AND
NEW STRATEGIES

28th October, 2020

Amid the Covid-19 pandemic, Dharavi has received much attention from the media, first for a steep increase in the number of Covid-19 cases and then for it's commendable strategies to control and deal with its spread. Since the beginning of the unlock process, migrants have been returning to Dharavi, and the neighbourhood is seeing a rising number of cases once again. In this issue of the Dharavi Fortnightly, we interviewed 30 people including members of NGOs and beneficiaries to understand people's strategies to deal with in-migration, the unlock process and the new rise in Covid-19 cases.

The locality is no stranger to the occurrence of devastating epidemics or natural disasters. Infectious diseases have made comebacks in Mumbai since colonial times. The bubonic plague in the late 19th century, the influenza pandemic in 1918, and other outbreaks such as cholera and malaria have been well documented. Studying Dharavi's history in relation

to bio-emergencies can play a crucial role in helping us understand the conditions that have made Dharavi's "chase the virus" model so successful.

Spread of diseases has been influenced by factors such as public health policies, socio-economic contexts, and environmental conditions. [2] Historically, diseases have spread in India through port cities and trade centres like Bombay, which were and are well connected to the rest of the country and world. Similarly, we see that the Covid-19 pandemic has spread across international borders catalysed by increased connectivity and air travel.

Responding To A Spike In Cases

According to our respondents, approximately 60% migrants from Dharavi have now returned. With the reported new rise in Covid-19 cases, we asked our respondents how they feel about the new rise and if there were any cases in close proximity. 25 of 30 reported not having heard of any increase in cases within the proximity of their neighbourhood.

During the initial phase of the lockdown, we saw many community based organisations, NGOs and individuals taking initiative to help with food and ration distribution. [3]



Resumption of activities at Dharavi T-junction

https://www.urbz.net/articles/dharavi-weekly-03-food-issue



¹ https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2763662/

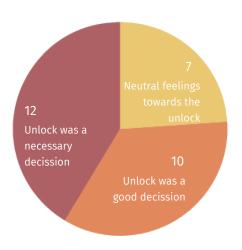
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Over the course of the lockdown, they formed links with each other and even managed to set up medical camps for Covid-19 tests. The importance of local leadership and the work of nongovernmental organizations holds true in the current pandemic and past ones due to their role in direct outreach to residents and implementation of community driven approaches. According to a November 1918 issue of The Times of India, volunteer work and community participation with local municipalities was the "highlight of the emergency" and provided a glimpse to what improvements the city needed.[5]

While everyone was proactively involved with helping their fellow neighbours during the lockdown, after the unlock phase 1, there has been a steady decrease in the activities of local initiatives. Our interviewees tell us that most of the smaller organisations or individuals who helped with food and other essential supplies have not been able to continue the social work. We received two plausible reasons from our respondent pool of 20 social workers and 10 beneficiaries.

There is a general assumption that because work is slowly resuming, people are able to earn for themselves and there is not an urgent need to distribute food since the government subsidies on ration are still applicable.

All the smaller organisations/
individuals have exhausted
their funds and do not have
enough monetary resources
to support others. Active
organisations are now working
on distributing masks and
sanitisers once again, along
with also gently reminding
people of the precautions and
social distancing protocols
that they should and need to
maintain.



The chart shows 29 respondents' take on the unlock.

Returning migrants are struggling to recover from the large amounts of debt that they have accumulated over the past few months. People are concerned about the oncoming rise in Covid cases, a decrease in the number of quarantine centers as well as the lack of rapid testing for incoming migrant workers. One of our

Health Checking Along with Ticket

Mushahid Ansari works as a tailor in a workshop in Dharavi. During the lockdown, he traveled to his village but he is now back in Mumbai and is working. He says that all his co-passengers were checked for temperatures when they reached Mumbai and were advised to home quarantine themselves. All people entering the city were inked and stamped on their hands as a method of tracking the spread of cases.

respondents stated that, other than a temperature check, people travelling to and from villages have to undergo no other precautionary measures when boarding a train.

Comparative Study with Cazuca in Soacha, Columbia

Dharavi and Cazuca are both homegrown economies and have a strong community presence. A large portion of residents in Dharavi are migrants who travel back and forth from their hometowns or villages for work.

⁵ https://timesofindia.indiatimes.com/city/mumbai/how-mumbai-battled-the-1918-19-influenza-pandemic/articleshow/75411150.cms



⁴ https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7437383/



Residents of Cazuca building structures to create a resilient community against the pandemic.

While migration in Dharavi is influenced by economic motives, Cazuca has seen immigration of people affected by violence and political instability from surrounding nations.

During the pandemic, the Cazuca neighbourhood of Soacha did not receive adequate amounts of aid and support. A major issue Cazuca faced was the unavailability and lack of resources to buy food. Cazuca is not considered part of the formal city and its residents have had to come together to implement projects that would help them with daily sustenance. Examples are immediate response projects such as 'Community Pantries' and longer term initiatives such as 'Granja VIVA' or 'Proyecto Escape'.[6]

Dharavi and Cazuca are both very resilient localities that are doing their part to increase the resiliency of their communities from future crises. Selfmanagement and community action are effective tools that have helped both localities to cope with stresses of the pandemic. While the residents of Cazuca have the plans and intent to continue with their projects to supplement for the lack of aid provided by their municipality, the community response in Dharavi can be seen as a more temporary, immediate, and resourcelimited response.

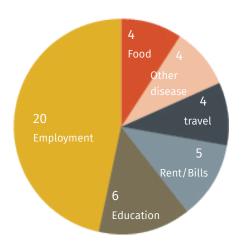
Other problems

The residents of Dharavi are fighting with many problems other than the virus, albeit most of them are a repercussion of the virus.

A most common and widely experienced problem is lack of employment. People have lost their jobs or are working for half the amount of their old pay. The lack of a source of income gives rise to many other struggles like not being able to pay for rent and electricity. People returning from their villages who had discontinued their agreements with former landlords, are struggling to accumulate enough money to pay rent deposits for new homes to live in.

Most of our respondents reported that they know of no organisations that can help them with procuring funds to re-setup their homes.

Though there are people who are trying to help returning migrants, there are no solid plans or schemes in action to help them. 12 of the 20 social workers we interviewed acknowledged that they have been unable to extend much help to these people.



The chart shows concerns other than COVID mentioned by the respondents.

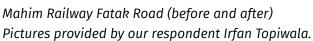
⁶ https://www.archdaily.co/co/943239/autogestion-en-tiempos-de-pandemia-al-sur-de-bogota



Much of the workforce in
Mumbai commute via trains
to and from their workplaces.
Since the lockdown started,
the trains have not been
functional. This is posing a
major challenge for the people
especially those in Dharavi,
because of which people have
to travel by bus or find other
means of private transport.
Travelling by road is often
expensive and time consuming.

Parents are concerned about the quality of education their children are getting as classes are online and for shorter periods of time. Often children do not even have access to mobile phones on which to attend online classes as families may share one or two devices amongst themselves. Children thus have to share and schedule classes according to the availability of a device. Another issue with online learning is the environment





An Act Of Charity

One of our respondents Jyoti Chawla is a broker from Dharavi. While all our respondents empathise with the struggles of people who are living on rent, few of our respondents like Jyoti, have been helping her clients avail lower rates. She has been taking smaller percentages of brokerage fees and because of this has been struggling with finances herself. She even had to discontinue her youngest daughter's education as she was unable to pay the tuition fee. Jyoti is of the strong opinion that we can and must help each other in whatever way we can when such situations present themselves.

in which the child studies and the attention with which they attend the classes. Children are unable to stay focused on their screens and do not like to study from a home set-up as compared to going to school. While the children may even enjoy learning processes, parents are even concerned about having to pay school fees, and other education related expenses.



While this was not a common observation, 2 of our respondents have noticed multiple cases of malaria, dengue, and pneumonia in their neighbourhoods in Dharavi. The reason expressed for malaria and dengue cases is clogged gutters and the unhygienic state of the neighborhood. While nobody is actively helping, people like Lakshmi from ACORN foundation are making sure at least the gutters near their workplace/house are cleaned.

This observation corresponds with issues faced in past outbreaks. A 1986 study cites "overcrowding, environmental decay, and poverty" as the key reasons that contributed towards a high death-rate in the ordinary population. Environmental decay can be understood as

https://www.google.com/url?q=https://www.cambridge.org/core/journals/modern-asian-studies/article/urban-development-and-death-bombay-city-18701914/3854A57D4CE0CC226B1AA37B8F78120F&sa=D&ust=1603778210678000&usg=AOvVaw1guMobH2rjDrJbQSnaBVy_



Education and Employment

Vijay Basak from Drona foundation is currently working on organising offline classes for children in a manner that follows social distancing protocols. The foundation has been working to provide employment to women by starting a small scale mask production project. Their vision was for women to earn enough to be able to buy themselves food and other rations.

Half the Rent

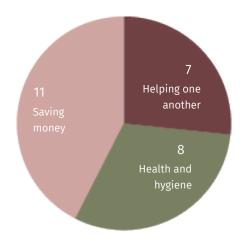
Tabrez Farooqui runs a local organisation called 'Farooqui organization'. Since the Unlock process began, they have been helping migrants with food and travel but they have not been very active recently. They do not get as many calls for requests but he has been helping whoever reaches out to him. Recently he helped a worker negotiate the pending rent with the landlord where the landlord eventually agreed to accept only half the rent for the time being.

unsanitary environments and environmental degradation such as water-logging and

pollution of groundwater sources. Low living standards and malnutrition also played a part in amplifying the impacts of the pandemics.

The bubonic plague in 1896 had resulted in the development of various strategies to improve the public health system of the country. The Bombay City Improvement Trust is an example of a plan to combat infectious diseases. Infrastructural development and better quarantining and sanitation structures were to be implemented to combat the soaring mortality rate and contain the spread of the disease. The British government also eventually introduced the Epidemic Diseases Act of 1897 and gave authorities more powers to act upon the containment of epidemics. Similarly, a Plague Research Committee, Cholera Committee, and Malaria Investigation Committee were also set up.[1]

Another related concern is the treatment of diseases other than Corona. Corona cases are prioritized at hospitals and other patients are not looked after or diagnosed with the same sense of urgency.



This chart shows the respondents' learnings from the lockdown.

For diseases which do not require immediate attention, people have been avoiding going to the hospital because of the fear of getting infected by Covid and which inturn might worsen their condition.

What is the Government not doing?

Paul Raphel is a part of the Dharavi Nagrik Seva Samiti who work to help the people of Dharavi. Paul says that one very useful takeaway from this pandemic is that our government should expand their services in the medical sector. The government was able to help with food and ration but medical aid and awareness is something that needs to be worked on to be better prepared against any other unknown health calamity we may encounter.

¹ https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2763662/



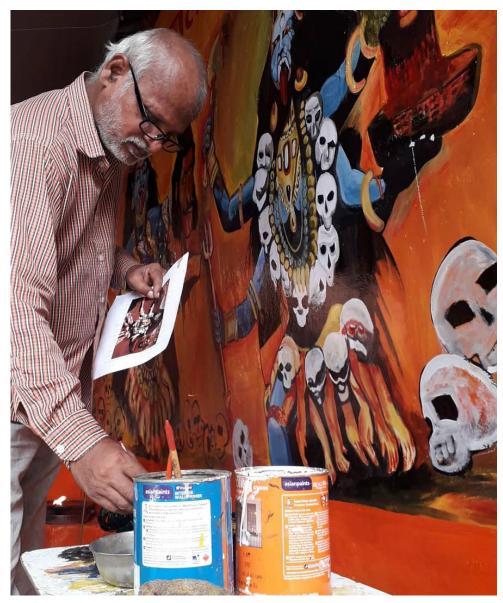
⁷ https://www.hindustantimes.com/mumbai-news/mumbai-then-and-now-city-s-encounter-with-epidemics/story-4dluDD7spOr3Ti57VSdDLI.html

Learnings from lockdown

People all over the world have been fighting Corona and its repercussions for a while now. But every calamity has a silver lining.

There is a resilience in the people of Mumbai to face any given situation and come out of it victorious. While the social workers now feel they are better prepared for any unforeseen calamities, our entire pool of respondents agree about the importance of saving money and managing it wisely along with taking good care of oneself and others in terms of health and hygiene. This pandemic taught everyone the value of good money management, and had people not have had savings, they may not have been able to maintain themselves for so long.

Historically, Indian cities such as Bombay were affected by plagues so devastatingly because of the Western-style development models that they had adapted which did not adequately protect the city or the common people [2]. Governments then failed to take effective action in a timely manner, but today the case is very different. Albeit appropriate preventive strategies were implemented



Krishna resuming his painting profession.

and precautions were taken, there is still work to be done to improve living conditions, strengthen the public health care system and build the local economy. Many respondents noted that they weren't aware of any provisions made for workers returning to Mumbai after the Unlock process, such as quarantine facilities. A community-focused approach can play a very important role in mitigating the effect of such emergencies, especially where the government may fall short.

One of our respondents,
Balwant also pointed out that
everyone has developed some
good habits because of this
virus. People are now more
aware of the importance of
personal and public hygiene
and cleanliness. Washing
their hands thoroughly and
sanitizing things are now a part
of their daily routine.

⁴ https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7437383/



² https://www.google.com/url?q=https://www.cambridge.org/core/journals/modern-asian-studies/article/urban-development-and-death-bombay-city-18701914/3854A57D4CE0CC226B1AA37B8F78120F&sa=D&ust=1603778210678000&usg=AOvVaw1guMobH2rjDrJbQSnaBVy_