

Stories from a pandemic: : A Podcast by It's OK To Talk

Episode 3: From the frontlines

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Contributors

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- 2. Kashif Kakvi (M, Journalist, Bhopal)** *is a multimedia journalist who writes from Central India. He reports on injustice, Human Rights violation, Government policies, etc. Besides, he reports on atrocities against dalit, tribals and minorities. Keen on doing investigative and developmental stories. He writes for Newsclick.in, The Quint, The Wire, Al Jazeera, TRT World, IndiaAhead, Firstpost and others.*
- 3. Ishan Tankha (M, Photo-Journalist, NCR)** *is a well recognized New Delhi based independent photographer whose work has featured in a number of publications including Le Monde, The Financial Times, The Guardian, The Caravan among others. His work covers a range of subjects including national politics, life and the environment. He has been a staff photographer with leading Indian publications, and his work has been shown internationally.*
- 4. Rohini Mohan (F, Journalist, Bengaluru)** *is an independent and award-winning Bangalore based journalist, with 16 years of experience reporting on human rights, environment and politics, and now Covid and health too.*
- 5. Kiran (F, Call centre and customer service agent, ISayOrganic, NCR)** is originally from Uttarakhand and has been living in Delhi for 28 years. She has been working as a Customer Care Executive at I Say Organic (a Delhi-based organic food company) for 3 years. Kiran loves to travel, cook and spend time with her family. Her paneer and gobhi pakoras are very famous and she's looking forward to traveling when things are a little safer.
- 6. Shailendra Pal (M, Delivery agent, ISayOrganic, NCR)** moved from Sant Kabir Nagar in Uttar Pradesh 12 years ago and has been with I Say Organic since 2013! He is a key delivery agent for the company and when he's not working, he loves spending time with his family (wife and 3 children). If time allows he enjoys cooking and watching movies.
- 7. Sandeep Singh (M, Ware-house team, ISayOrganic, NCR)** hails from Uttar Pradesh but did his schooling in Delhi. He moved back to UP to finish his graduation. Sandeep has been with I Say

Organic since 2014 and absolutely loves to read novels and history books in his free time. He lives in Delhi with his parents, wife, and 2 children.

8. **Tanu Dogra (F, Book publicist, 29-year-old, NCR)** is a Sociology graduate from the University of Delhi, Tanu Dogra works as a books publicist in Delhi, India. She has previously worked in the independent music industry, as a freelance photographer, and also has experience in marketing communications. Beyond office hours, you'd usually find her exploring new artists, reading books, whipping up a smoothie or a cold brew.
9. **Liklaleima Ningombam (F, 25-years-old, Manipur)** is from Imphal, Manipur. She completed Masters in Social Work in Women Centred Practice, TISS Mumbai and works at Ya-All as a Project Consultant and engages in the areas of research on the health of the young LGBTQI and PLHIV population, gender sensitization workshops and sessions and life skills education. Currently, in the fight against COVID, She is volunteering in a collective COVID Response team created by 7 different teams of youth in Manipur where they collect, verify and amplify Covid related resources, coordinating with service providers, helplines and responding to SOS requests.

Host

Pattie Gonsalves works in the areas of public engagement and digital interventions to improve adolescent and youth mental health. She is currently a Project Director at Sangath (India) with the PRIDE research programme where she leads the design and evaluation of a digital intervention for school-going adolescents in low resource settings. Pattie also leads It's Ok To Talk (www.itsoktotalk.in), a national anti-stigma campaign for young people's mental health. As part of this initiative, Pattie currently leads a new Wellcome Trust funded project, "Mann Mela", that is setting up awareness-building immersive media museums for youth mental health in five cities across India. Pattie holds an MSc in Global Health from the University of Oxford and is completing her PhD from the University of Sussex.

Transcript

Content warning: *This episode contains content that may be alarming to some listeners. We advise listener and reader discretion for graphic depictions of death, discussion of mental ill health and existential struggle. Please check the show notes for a more detailed descriptions and take care of yourself.*

Kashif: It took me around me around half an hour to just normalise myself. Even after that I was recovering myself and I saw a half burned body. I thought that I am also Corona positive and I am also going to die. I lost my sense of taste. It was just beyond my imagination. Then, I bumped into a news reporter whose mother had died the previous day because she didn't get oxygen.

Rohini: I remember this conversation I had with a waste picker in Delhi. We talked on a video call and he was showing me, taking me around the garbage pile that he was going through. And he said, "Look at all these masks that people have just thrown. Am I not human? Do I, do my children have to get Covid?"

Ishan: We are looking at a state where the citizen has turned into a citizen doctor, citizen nurse, citizen hearse drivers, citizen ambulance drivers... you know. You are looking to Twitter to find beds for hospital patients. It's a bit absurd.

Tanu: I got a request on Twitter that a 30-year-old, six months pregnant woman, was struggling to get a bed, and you know I reached out to my resources, friends, started calling hospitals furiously, in fact, I

almost started to drive to one to figure out if we could find something, but by the time we actually found something she was dead.

Pattie: Welcome to our listeners and welcome Vikram to 'Stories from a pandemic' podcast. We just heard from journalists Kashif Kakvi, Rohini Mohan and Ishan Tankha, and a COVID-19 response volunteer Tanu Dogra, and we will hear more from them over the course of this episode.

In today's episode, I am back in conversation with professor Vikram Patel as we bring you stories of eight different frontline workers from India. Their accounts highlight just how complex the realities that young frontline workers face are, and we bring you stories of three groups of workers--journalists, volunteers and essential service workers, to give you a window into how they have provided services through the pandemic in roles that are invisible and most often not acknowledged. Most of us are not aware of the risks frontline workers are exposed to and the unfortunate reality is that today those who are at the front are often the most vulnerable.

My first question for you Vikram is, could you help our listeners understand the scope of frontline roles and frontline workers that they are playing in this pandemic. And this question is also about going a bit beyond the health and medical professions and perhaps also touching a bit upon how there is a lack of consensus and maybe even a debate on what constitutes a frontline worker.

Vikram: Thank you. First of all, can I just say how moving those accounts are that we just heard. They also demonstrate to us that our definition of frontline workers is much broader than what we are often led to believe, for example it only reflects doctors and nurses. In fact, frontline workers to me are pretty much any group in the community who have to directly engage with in-person activities even while we have been repeatedly told that we should, "Stay at home", or there should be a lockdown for our own safety. Frontline workers are essentially those individuals whose work requires them to in fact take risks that the rest of us are able to protect ourselves from, and this could of course include everyone from people who are driving public transport to those who are working in funeral homes, to the journalists that you already covered, the volunteers who are moving from one community to the next to help people who are suffering from Covid related symptoms, and so on. The list is really quite large but one thing that really unites them all is that they tend to be hidden from the public. They tend to be individuals who are rarely recognised by society and very often they tend to be people who are at the lowest income level and with the least power in our society.

Pattie: Thanks Vikram. Reporters and Journalists play a critical role in helping those of us at home know what's happening outside and this has been even more crucial in a lockdown era when most of us are sheltering in or at home and being on the field is something that all reporters who we interviewed shared is an essential part of doing their jobs. However, being on the field during the COVID-19 pandemic especially in this second wave that we have seen in India has meant putting themselves at risk and potentially their loved ones and families at considerable personal risk. Over the course of this segment we will hear not only what Journalists are seeing on the ground and the risk they are compelled to take but also the impacts of these that they have on them, we will first hear from Kashif Kakvi a Bhopal based Journalist on why despite the personal risk he feels being on the field and telling stories right now is more important than ever before.

Kashif: So I have gone to the graveyard where they were digging 15-20 graves in advance. And JCBs* were digging the holes. Because the hands of the grave diggers' hands were sore from digging so many graves in the past two weeks. They were disposing of at least 15-20 people per day and half of them were Covid bodies. So when I saw these kinds of situations and returned with the data, I realized

that till 17th April, at least 1400 bodies had been disposed of with COVID-19 protocols in Bhopal. Whereas the government data says that a total of fifty people have died of Covid. So when I reported that this is happening...and then I started a campaign on Twitter. I started posting daily reports with government figures and with the crematorium figures. A TV reporter saw that and went there and found it to be true. So when they went and saw these things on ground...a reporter from NDTV had gone there, a reporter from ABP news also went there. Local reporters also went there and it created a chain of reports now. A single visit unfolded too many things. The government has been lying. And now it has become a daily routine that 3-4 local newspapers in Bhopal are reporting the government figures and the crematorium figures every day. Even the *New York Times* has covered this story.

(*JCB is a manufacturer of equipment for construction, agriculture, waste handling, and demolition)

Pattie: Kashif's reporting has played an important role in debunking published figures about COVID deaths. We will now quickly hear from Ishan Tankha, a Delhi based photo-Journalist on feeling unsafe and what makes him the most anxious about his job.

Ishan: Like many other situations where photographers and reporters you know put themselves in unsafe situations. This was kind of different because you know once you remove yourself from an unsafe situation, you are safe. But in this case that pattern, that luxury didn't exist. You are in fact taking back whatever you may have picked up because at the end of the day you are going back to people you love and care for. So I think that distance that we are going to have to create to keep ourselves safe is the biggest challenge for me.

Pattie: Maintaining this safe distance isn't always a reality for most people and we will hear more about situations where that distance is in fact the biggest hindrance for frontline workers. While all of us may worry everyday about how to keep safe from this disease, those on the frontline need to worry a lot more. They are exposed to the highest risk and therefore logically should receive the most protection but unfortunately this doesn't seem to be the case. We now hear from Rohini, a Bangalore based journalist on how the stress of managing safety for such an extended period of time has a profound impact on her.

Rohini: I am in Karnataka, they approved that the Journalists are frontline workers and said that vaccines should be available for us but they are just not available. They never set up a procedure on how we go about getting one and Mental health I would say is... everybody is kind of short... their minds, our minds I should say are running at speeds, falling to depths you know.... reaching rage that I think we are not having an outlet for especially since we are working from home and specially since we are not doing anything else but covering the pandemic... most of us. And also coupled with personal worries, the social interaction or the cultural consumption, these are ways in which we let out our stress. These are not there and we talk... we are usually able to do adda (hang out) we talk to each other about our work. That is not there because we don't meet each other and we are only consuming the pain of others and trying to set aside our own worries and not our own personal fears or anxieties. And this is obviously not healthy. The new challenge is, having to think about myself falling sick. Now I am as vulnerable as anybody I am reporting on. Even if I think to myself that I am, I don't care that I fall sick, there is my family and I... you know it's like when somebody tells you don't fall sick now fall sick later when there are beds available and I mean what a farce it is. What a remarkable way in which we have to think right? So, there is that. So, for the first time I am thinking so much about my own safety. As a freelancer and I think a freelancer from any sector would identify, we are pretty much independent. That is the advantage. Disadvantage is when something goes bad there is no one to protect you, there is no cushion. There is no extra money, there is no Editor or employer who is going to pay for you if you fall

sick or if you get injured. They are not going to step in right, those are not in our contracts. So that is exacerbated now. People will say Oh be careful and wear PPE. And that 'be careful' really frustrates me, you know. It makes me very angry. This thing of 'just be careful'. What are the concrete ways in which you are helping me to be careful? But at the same time I am also experiencing the pull of having to report the pull of having to report... you know the social pull of having to do my job.

Pattie: So could you comment, Vikram... on this notion of safety and has this notion of safety changed where there are threats not only to our physical safety but also to our mental wellbeing and for quite a long period of time you know, over a year and half now.

Vikram: What these latest stories remind me of is the notion of trauma, the fact that trauma which is one of the most well recognised determinants of mental health can take many shapes. But at its heart it is really characterized by the toxic effects of extreme fear, insecurity, uncertainty, helplessness and profound grief on our minds. And if you listen to these stories it becomes extremely evident that each of these stories touches on some of these aspects. Indeed perhaps all of these aspects of trauma. If that is the case then it would not be surprising to conclude that trauma is sweeping across India and particularly affecting frontline workers disproportionately. As millions of stories of suffering, despair and death, here seen first-hand are twinned with profound helplessness as the comfort of a government or an employer who you can rely on and trust has evaporated.

Pattie: Thanks Vikram. And interestingly I mean you mentioned helplessness and that actually is what we will be talking about in this next section. We go back to Delhi based journalist Ishan about two days in the pandemic that he will never forget.

Ishan: You know last year I thought no day was going to top the first day that I went out to take pictures and I had actually gone to buy some eggs, you know to buy groceries. Then I saw what was happening on the road, which was an exodus. The migrant exodus you know. Workers going back home, desperate, and at that point you know they shut down all trains and buses, all transport. So I was literally on the road and when I came back home I picked up the camera and ran back because honestly I wouldn't have believed it if I had not seen myself ... you know it was a sight from history books. That was the day which would be difficult to forget or at least I thought that until you know last week when it's a different kind of pain that you are seeing. There is definitely a lot more death. I actually went to take some pictures at Indrapuram there's a gurudwara where they had set up an oxygen langar. Free oxygen. After a little while the volunteers over there had no choice but to say, "Listen, you have to take this person away somewhere else to a hospital because you know he is going to die right now otherwise." And as someone who is standing there and sort of witnessing this. I am not as invested in that particular moment because that is not my family but I can almost feel the panic sort of taking over in me because I know what is coming next. You are going to be in a car, you are going to be with an unconscious father, mother, brother, sister or a friend and you don't know where to go. You know you are literally on the road and I don't ... you want to do something but you have no option. You don't even have a single idea that you can give, hey go in that direction.

Pattie: This feeling of helplessness you just mentioned seems to resonate with all of the people we interviewed for this episode and this feeling was associated with both, the situation unraveling around them and their inability to help. We go back to Rohini who tells us how she has been managing to do her job through this.

Rohini: Yeah. Strangely in the first wave I felt extremely, I was very affected by what was going on but I felt because of my privilege and I was able to extend some of that privilege in terms of helping others in

terms of food and all of that. But in the second wave, I feel like I cannot do anything you know feeding people that's not the concern right now. Everything feels absolutely like it's crashing around me. So I have not felt as comfortable in my job or in my personal life as the people falling sick are so close to you. It has felt... every day that I don't fall sick has felt like luck or guilt and I don't know guilty privilege.

Pattie: This guilt and helplessness are manifested in different ways when journalists are on the ground telling stories.

Rohini: Just the day before yesterday actually, last week I was working on a story on COVID orphans and I was having to reach out to families that were recently bereaved. Especially children who have lost their parents and I felt so ashamed of my job. I am used to interviewing... used to in the sense I know how to interview people who are grieving and people who have just, you know, just witnessed or experienced trauma because I know how to do it face to face. I know what non-verbal cues to do, when to shut up and when to just observe, when not to ask questions, when to just hold someone's hand and be quiet. But when I had to text someone and ask them I wanted to talk to them eight days after they had lost their parents, it just felt... at the same time I have a deadline... I also want to tell stories because it's important. It was so.... I felt quite small and I felt really like my job was making me do things that were so insensitive.

Ishan: What's happening is it's not that you don't want to give dignity to people. It's that there is no dignity being given to people. You have three days of waiting to get a slot to cremate your dead. It's not that you have places to keep your dead. So where is dignity? I really don't know how to angle my camera to not seem exploitative. Like wherever you point or just turn, any picture seems exploitative quite honestly. I am sort of questioning how much more of...because every expert is saying that this is going to go on for some time. So pretty much if it is going to be devastation which is sort of moving around geographically, are we going to be doing it as reporters and photographers and even documenters...is it going to be the same thing we are going to be shooting for the next 6-8 months? What does it do and what will that do to both the image makers and viewers?

Pattie: As Ishan shared, the pandemic in India has taken away even more dignity from people, especially in their darkest hour. I would like to turn his question over to you Vikram. We have heard from Kashif, Ishan and Rohini on the challenges of not only what they have seen but also the stresses of gathering and telling these very difficult stories and in the short to medium term considering as Ishan points out that this probably isn't going to end very soon, what impacts do you predict that this is having on journalists or on people telling these stories and on the people who are watching or reading this news and this piece of information?

Vikram: Earlier I have you know made some remarks about some of the ingredients about the second wave of this pandemic that can help us understand and why trauma has become very widespread especially for front line workers. What we have just heard in these latest accounts is another really critical factor and that is the modern dilemma of the choices one is faced with especially when the choice is are both- unpleasant and lacking dignity and inhuman. I thought the comment in particular about whether to take an image which is not exploitative but at the same time which pretty much does what a journalist is seeking to do, to tell the story, the truthful story... that kind of moral dilemma I have also seen at many different levels during the second pandemic. For example, in my own networks, the question about where an oxygen concentrator should be kept when more than one person actually needed it, these are the sort of horrible decisions no human being is ever prepared for and wants to actually make. This is when we rely on a system and of course it is that system that has disintegrated in

front of our eyes. It wouldn't surprise me at all that if we had to think of this widespread trauma in our society that we will see an increase in distress across the population and that this will inevitably fuel an increase in clinically significant mental health problems. But I would really caution the, for us to sort of translate that into saying that everyone needs a therapist, I think we do really need to see the increase in distress as a part of normative response of the human mind to an unprecedented and extra ordinary set of stresses that we have never experienced in our lives before. That said, of course because there will be individuals who will develop more significant mental health problems, we also have to attend to how those individuals can be helped towards recovery.

Pattie: We now move to the second segment of this episode hearing from food delivery agents who are classified as essential workers. In many states these workers have been instrumental in ensuring social distancing, working from home and a sense of normalcy for most of us during the lockdown. We talked to three employees from 'I Say Organic', a social enterprise offering home delivery of groceries through the lockdowns. We heard earlier in this episode from journalist Rohini who talked with a waste picker, also an essential worker who is not even provided with basic protective measures like a pair of gloves or a mask. These essential workers provide indispensable services. Since the lockdown last year the media has actively covered stories of many companies large and small where workers claim they received no minimum guarantee of work or any pay out if they were laid off. Workers were also required to produce e-passes failing which there have many incidences of brutal police checks and violence. First, we hear from Kiran, a customer service agent at 'I Say Organic' who tells us how COVID is different this year as compared with last year. She says, in this second wave every second house was COVID positive and she even tells us how customers were voicing their frustrations at the service when they needed to organise safe deliveries. She also tells us how worrying it is knowing that your colleagues are constantly being exposed to COVID.

Kiran: There was a lot of difference when COVID hit us in 2020 and then again in 2021. In the first wave there were cases but in the second wave every second person was positive. Because sometimes when we used to call customers they used to say, 'Hi Kiran, I have Covid. So please inform the delivery boy to just place the order outside and go. I will make the payment.' And we used to get shocked that our client has COVID. We feel overwhelmed for two minutes because we realize that this client of ours has COVID. Then again, the third customer we called will tell us that he also has COVID and to ask the delivery boy to place the order outside. Some customers even tell us that we are all doing so much even during this time and calling them. We call each customer before we deliver the order. We actually feel more mentally stressed than them after the call because our client has COVID and our delivery boy will be going there. We will be worried that he will also be affected.

Pattie: Orders are then processed by the warehouse team and we now hear from Sandeep in the warehouse on the struggles faced when he was training his delivery agents to visit homes for COVID positive individuals.

Sandeep: It was very difficult in the beginning. It was very difficult to explain to the boys. They are going to a home and the customer has already informed them that he is COVID positive. They were also scared about how to go and what to do. Should they place it at the gate? What if they inadvertently touch something? Then I explained to them properly and gave them courage. I told them that they will be wearing gloves and so it will be fine. After coming out from there, throw the gloves into the dustbin kept in the vehicles. It took some time to explain to them all these things. But then everybody realized that the more they fear this thing and the more they keep in mind that they will be affected, the more chances of them getting it. In this entire period of COVID the most challenging part for us was arranging transport for our staff. Because, however careful they are, if they are coming by public transport they will

definitely come into contact with somebody. There were a lot of people who used to be outside even if they had little symptoms because they had to earn money for their daily living. So the main thing we had to do was arrange for individual vehicles for the staff. And secondly, we had to politely tell our customers to inform us if they had any symptoms or if there was any problem. (voice disconnected)

Pattie: Considering how difficult even getting to work can be certainly makes you wonder about how easy we are making it for our essential workers. Sandeep also tells us that he needed to live in isolation to keep his own family safe.

Sandeep: So I had also had to take care to stay in a separate room and I had to prepare my own food and do everything myself. I was not even going near my family at that time. Now, there are so many changes that, earlier after going back from work I used to just change and sit with my children. But now the normal routine has changed and all the arrangements for taking bath and all that has been done on the terrace of my home. Once I go back from my office I go to the terrace directly and I wash all my clothes and all that with my own hands on the terrace itself. Then I rest for one or two hours and then I sit away from my children. Even after I go home I behave like a guest at my own home.

Pattie: It seems that Sandeep's efforts have paid off and he has not tested positive for Covid yet. He's colleague Shailendra who works with deliveries wasn't so lucky last year. For Shailendra who tested positive the risks were not only personal but also social. We now hear his experience about coping with the negative reactions of his neighbours.

Shailendra: Last year I was tested positive when I was on duty. I don't know how it happened. They had tested everybody in our company and I was tested positive. I did not have any symptoms but they told me that I was positive. I myself did not believe it. I was at the Radha Soami Satsang for fourteen days and after that I was at home itself for 14 days. I didn't have any fever or pain or cold and cough. But the way my neighbors behaved towards my wife, children and relatives...I was very saddened by that. I was working before Covid 19 and I was working after Covid also. I was not scared. But people should not behave the way they behaved with my family. My kids are still young. My elder daughter is six years and younger one is four years old. My youngest son is nine months old. My neighbors used to drive them away from their homes and close the roads and tell them that 'your father is like this'. I felt very bad. Even my relatives didn't help us. That is why I say now that everybody should keep themselves strong so that even if something happens we shouldn't be dependent on others to come and help us.

Pattie: Shailendra's story is heart-breaking and is sadly becoming a common one of people who test covid positive and have been stigmatised in their communities. Vikram, how do we build more empathy and understanding for those on the front line? And an understanding that values their work, the personal risks to their health and lives to keep others safe just to deliver essential services that keep the rest of our homes and our lives functioning on a day-to-day basis?

Vikram: These are such harrowing stories, here you hear accounts of people who are doing essential jobs that none of us or the majority of us wouldn't venture to do at a time like this and not only putting their lives at risk but the lives of their family but on top of that they heap insult and injury. Actually facing stigma and discrimination from their neighbours. Well first of all you know I think the most important thing is society by acknowledging that front line workers are not just doctors and nurses in hospitals. I think it's important to acknowledge that doctors and nurses have seen death on an epic scale but actually through all the stories you've heard today, what we really understand now is that front line workers are a much more diverse group of individuals with very different experiences. And the example of the person who comes and delivers your pizza is such a great example. How much do we think of an

individual as a front-line worker? So just simply acknowledging and accepting that people who are up and around in our communities doing in person activities that we don't do are all front-line workers. Secondly, I believe very strongly that we need an informational campaign that is attached to this to let people understand the truth about this infection. One of the greatest crises I think we face right now isn't just the pandemic but the infodemic or perhaps more importantly the lack of trusted accurate information and I think in that context it isn't surprising actually that people are fearful. So I wouldn't immediately put the blame on you know people's neighbours for example. I think they are just reacting to fear that is completely explicable given the fact that we don't get trusted accurate information from the sources that historically we relied on. For example, the – the dealership of the medical establishment in the government. I think, you know, acknowledging also needs to go more beyond just simply accepting these individuals the roles that they play but also offering them monetary incentives that recognise that they are in fact doing jobs that are high risk and are high essential. They are not just you know doing these jobs because they enjoy going out in the community and taking risks but because in fact they have to do so. And so, providing monetary incentives is critically important as well. You know finally offering support in terms of both peer support but also more professional support for those individuals who are experiencing significant mental health difficulties would be one more strategy that would only advocate for.

Pattie: Thanks, Vikram. We are moving into the final segment, so will start with the audio bite and then have a couple of more questions going.

Tanu: You know a lot of people have been very kind to me, my recovery, which is largely why, what inspired me to take this. I remember, during my time I was already struggling to get basic medication; I took to Instagram and Twitter you know. Cases were picking up. My feed was full with basically people scratching every edge to find you know covid related resources. It picked up really naturally for me. I started re-tweeting them, and you know attending those queries and because the helplessness was so jarring. I have to admit you know that was also one of the points that really pushed me to help them. In fact, my – my job, which is as a full-time book publisher, I actually took a back seat. I was focusing day in and day out, you know my clear focus was on this. In fact, incidentally it was also the time of my recovery and I do feel now in hindsight that I think I left that recovery slip through the crack. Because I was so deep into this work, there would be days that I would forget to eat, days where I would forget to sleep and which of course now has taken a toll on my body. As days went on, I have raised up to thirty to forty requests a day. In fact, I still have requests in my other folder that I haven't been able to tackle because I was just so overwhelmed. You know the thing with requests is that the process is so complicated because there are different channels involved. So there would be a patient's family member, there would be ten different vendors that I would be talking to, there would be three other you know friends who would also be coordinating that. So essentially you know all of us had to have that skill of negotiation at that period. These were grieving families so we had to be at our best foot, you know. We had to really calm down, calm ourselves because it was so dynamic, there wasn't really a structure yet, besides that I knew that I would wake up at 8am or 7 am to an SOS call.

Pattie: That was Tanu Dogra from Delhi. She is a book publicist and Tanu recovered from Covid 19 herself at the end of March earlier this year. The support and the kindness that she received from her friends inspired her to become a Covid 19 response volunteer. Her volunteering journey began with a simple act of sharing and amplifying the needs of other Covid patients on social media and at the beginning of this episode we heard Tanu tell us about trying to assist a thirty-year-old pregnant woman who died because she wasn't able to get a hospital bed. Since April this year with hospitals and clinics around the country facing a shortage of essential supplies including beds, oxygen, drugs, vaccines and Covid 19 tests, it is citizens like Tanu and civil society groups that have stepped forward. In April and

May volunteer groups sprung up all over the country identifying available hospital beds, oxygen supplies and sharing these with families in need. And I am sure that this is something that many of our listeners can relate to as they were probably doing this themselves. Individuals and groups though highly motivated were not equipped to step in and solve such a large scale humanitarian crisis that was and is still unfolding. Will now hear from Liklaleima who works with 'Ya-All' a Manipur based non-profit working with LGBT youth and young people with HIV on their health and wellbeing. Likla is also a volunteer with Manipur's Covid response team which is a group of seven different organisations. Let's hear about one of the most challenging cases Likla was supporting and how terrified she felt.

Liklaleima: You know it's always challenging you know every time you are not able to find requirements of SOS requests and if I have to recall one, there was this case of a woman, she had a nine-month-old infant with her and it was an emergency case. They were staying in a Covid care centre and due to her conditions, she had to be shifted to the hospital. So I got in touch with one of the doctors of the hospital and she told us to get a referral from the centre and send her to the hospital. So we prepared everything we got everything done and when the patient reached the hospital, the patient's family couldn't find any person, any authority who could you know help them get through the admission process and I tried calling the doctor again but she didn't pick up, I called her an number of times, she was not picking up. Later I found out that she was on covid duty. So, things had become so uncertain whether she would get admitted or not and the patient's family was literally panicking and I was panicking and I felt so helpless because I was in my room and all I could do was contacting people and coordinating. So, the problem here is you know there are no proper line of contacts and the contacts that we have are the personal numbers of the doctors that are being circulated. Since these are not helpline numbers, it's not guaranteed that you know anytime you call it will be picked up. So I tried a few other numbers and they were not reachable, they were not picking and – and fortunately the medical superintendent of the hospital picked my call and with the help of him she finally got a bed in the hospital. See, the situation like this is very difficult and very challenging and you know the patient had to wait for hours in the ambulance and this was really terrifying and I still wonder how things could have turned out if my call was not picked up. If nobody picked up my call that night. I still wonder how disaster would have been and how risky it would have been for the patient especially.

Pattie: The accounts of many volunteers including Bikhla echo the same feelings of panic and worry and even feeling responsible when patients including those they don't know and have never met don't survive. Another important fact being overlooked is that frontline workers of all kinds are people too, with families, with loved ones who are also affected by Covid and coping with crises at home. We hear again from Tanu on her experiences helping her uncle who is in need of critical care while she was also supporting strangers, many of whom she would probably never meet or see face to face. When Tanu was asked how she copes, here is what Tanu had to say.

Tanu: What is interesting is that you know my biggest support system has been my friends. You know they feel absolutely fantastic. I've garnered new friends during this time, through Twitter and Instagram, and it's incredibly encouraging to have these friends, your peers, even acquaintances you know reach out to you, to check on you, engage you in conversation. And frankly I'm operating on hope. I'm operating on compassion and I really hope that this crisis will destigmatize mental health in our country because you know it is essential, it is non-negotiable and counselling definitely needs to be made free and mandatory for all.

Pattie: So first, how do people begin to recover from both what they have seen and what they have experienced? Much of which as you already mentioned earlier on has been extremely traumatizing you know at an individual level but also perhaps at a sort of collective level. And if you could also talk a bit

about how we can support ourselves but also those around us and what you think are a few things that we can do as individuals to make sure that we are not locked or in a sort of cycle of crises when the next wave hits. And particularly I mean you know as you have heard any of these experiences are extremely harrowing and you know what is the mechanism to feel better. What is the- sort of the- what do young people do to recover from this last two to three months and obviously the year before but especially the last two months.

Vikram: So first of all you know let us acknowledge that it would be adding even further burden on people who are risking their lives to do the jobs that we have just heard about by asking them also to take care of themselves without any scaffolding or support. This is where I think society more generally even of the government has failed on all accounts I think this is where civil society has to step in and create the necessary supports to make sure that frontline workers are protecting themselves both from the infections, their loved ones from the infection but also be able to conduct their work while keeping their mental health in a reasonable shape. I think as I mentioned earlier you know I pretty see what we witnessed in these last few months as a humanitarian crisis really. It's perhaps the biggest humanitarian crisis that has hit India since our independence. And in that context, if I look at the kinds of responses that we should be supporting, these are responses that come in the same way as what you see in the humanitarian context for example: prioritizing basic needs, in particular safety, safety from the infection, equipping people with the necessary tools to protect themselves but also for their families, support for their families in the same way. For many of the low income frontline workers ensuring that they have adequate access to food and shelter and assuring that these are individuals in their families who will be given a priority should they ever need life saving interventions. Of course we can promote self care strategies for one's mental health. But I would suggest that is something we should do for everyone in the population, but I wouldn't suggest that it should be the only thing that we should invest in for frontline workers. Similarly, obviously I will also call for the support of a specific help for mental health intervention for frontline workers acknowledging that they are disproportionately affected by what is happening in the pandemic. And I wanted to say one more thing you know, I think and hear I speak not just to frontline workers but to the broader communities in which these workers are- find themselves. I think we must find a place to park our anger and rage. I believe that this is potentially one of the most dominant emotions that many people are experiencing. We've heard snippets of that in people's accounts but I also know in my own heart and talking to many people around me that this is a very dominant emotion but I also know that it's also a very destructive emotion. I think what we need to do is to try and find ways to channel this anger as justified as it might be and search for the compassion that lurks beneath it and support in any way... in any possible ways, there are many different ways... the efforts of the thousands of frontline workers and civil society organisations who are trying to stand the tide of suffering and death in the second wave. The outpouring of community actions that we have already heard about and we've seen happen across the country. I think it's a soothing balm for the anxiety that many of us are experiencing, as they- as we fear that the state that we ride on seems to have collapsed around us. It is civil society I think that has come out as perhaps the most important protector of both dignity and the rights of people to safety and to good health in these last few months.

Pattie: Thanks Vikram. We now hear two concluding thoughts from Ishaan and Rohini about their hopes for the future.

Ishaan: If you look at what's happened in the last year, year and a half. The- even if you just start with the term social distancing you know, in a country like India, it's a loaded term. We already have all kinds of ways of distancing between people whether it's a caste or class. So we need to sort of look at the situation and see what our problems have been which is pretty evident. We've been focused- our governments have been focused on you know dividing us more or less. Masjids and temples are more

important than hospitals. Once we've been through this really low phase or seen the collapse- seen what years of neglect and while you're feeding other industries or buying arms or whatever. You are not making hospitals. You are not making better medical colleges and etc. etc. what that has done. So I think maybe that's the hopeful thing but people are going to realize that there is going to be a lot more demand for our administrators and our government.

Rohini: The hope is that people are not taking some of the disadvantages that have been imposed on them lightly. People are finally getting angry. People are getting upset. People are demanding that things change. Unfortunately, it is in the midst of great unbearable grief. But there is a loud call for things to change at least in the health sector. For things to change in terms of governance, ask people what they want, see what they are asking, listen carefully and do that job. So I see that is, I see a lot of hope in that, people are not switching off from asking for accountability and this is something that I have always been frustrated by...you know... from most people saying that why should we care but now we are all together in this, the depths of horror and at least some people and many people are asking for accountability. The other thing of hope is just how people care for each other. I mean the beauty of seeing absolute strangers being so kind to each other and just trying to help each other survive. Whether it is somebody who is driving an ambulance everyday to carry dead bodies to the crematorium, whether it is somebody who is rushing about with an oxygen cylinder to refill it and give another family or a homemaker who is sitting and cooking meals based on... customising it according to the patients that she is giving to different hospitals or just people checking on each other, importance of friends and that's all we have right now because everyone's sort of lost hope in the great systems and we only have each other. But that is also what is coming in handy right now. If anyone has survived it is actually because people are going out of their way to help each other, including those who are doctors and nurses, people who are working on the street, people who are regular students. Everyone is just helping each other, absolute strangers, they are opening their hearts out and going, spending day and night helping each other, that is so beautiful and that is some of, that is the really the only way we are coming out of this pandemic. How it will look when we do come out of the pandemic, I have no idea. It cannot, it will, sometimes I feel it will just be like this never happened, it will just be like we will just go back to how it always was but going by how, whenever I see an old movie or a photograph that is set in a different time, and I get panicky about no one wearing masks in a crowd, (laughs) I think something has shifted in my brain and most of us, where I think we are going to worry about certain things, I wish some of the source problems climate change and our destruction of wildlife, some of this we will never forget and we will work on it so we are not in this position again. I hope there will be much- much more investment in public health care. I hope we will care for facts and truths as we do today. And not go back to rhetoric and religion and identity-based politics and I really hope that we will not forget what has been really important in this last year and that actually we can see inequality, privilege, under-privilege quite clearly. We know who is privileged, we feel it and we shouldn't forget that.

Pattie: My last question is one that I think is on many of our minds, which is one that Rohini just raised, how do you think we will look when we emerge from this pandemic? And do you think that something fundamental has shifted inside of us? And a few things to just touch on in this response are for example lessons we can take away from the experiences of these workers that will help us be better equipped for the future. Kindness came up a lot in the interviews, it was also just mentioned in the last clip and you know what are your thoughts on both of these different points?

Vikram: So yeah I will say two different things, one on the kindness bit and the second is what I, what I want to say on long term healing okay. So let me start with the second one first. Long term recovery of the collective trauma that we are seeing across the country will need resolution of the pent-up rage that is burning a hole in our souls. We have heard so much of that in some of the stories in this podcast. In

due course I think what we are going to need is some kind of equivalent of a truth and conciliation commission, you know the ones that we have heard about that have served to heal the collective traumas of events that has affected the entire population which was apartheid in South Africa. Such an independent commission in my mind would help document the facts behind the tragedy that has unfolded across India. It's just not about blaming people, it's really about offering a path towards restorative justice to heal a deeply wounded nation. You know recently the Delhi High Court issued an order to the Central government to ensure the supply of Oxygen and I was puzzled by the statement of the judge when he said 'as it stands, we all know that this country is run by god', I absolutely hope and pray that, that is not what we do after the second wave has passed. This is not a divine act, what we must do is to get an actual and factual account of why this apocalypse happened. The people of this country are entitled to this because we need this honest account to put to rest our troubled minds, to rebuild trust in our nation and to be much better prepared for the next pandemic. And to the second point, I hear repeated accounts of how acts of kindness, acts of compassion, are such powerful ways to soothe the anxiety, the despair and the anger that we are experiencing. I am not surprised because there is a very rich body of science that has shown repeatedly that when we reach out to others, when we do what some of us call charity, when we are compassionate to others who are in a more difficult situation than ourselves, even if we think we are helping them, actually what we are doing more than anything else is helping ourselves because we as human beings are fundamentally social animals and in reaching out and making connections with others including complete strangers what we are building is the social safety net for our own wellbeing.

Pattie: Thank you Vikram for your insights today and thanks to our listeners for tuning in. Today we heard experiences from different frontline workers during the Second COVID-19 wave in India, and discussed how these experiences can inform and prepare our future humanitarian response to COVID-19 in India while also addressing the mental health fallout of the second wave and its response. If you or someone you know is in need of mental health support, you can visit Sangath's COVID-19 Wellbeing Center on www.sangath.in/covid19 for helplines and community support options. Stories from a pandemic is supported by the Wellcome Trust as a part of our Mann Mela project. And thanks to our studio engineer Ishaan Gandhi and producer Faith Gonsalves.

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