The Virus of Communalism: What will be our response?

INDIA 2008: The reality once again!

“Where the mind is filled with fear and the head cowers in terror
Where knowledge is communalized and commercialized,
Where the world has been broken up into fragments by narrow domestic walls of caste, class, religious faith, ethnicity and occupation,
Where words come out from the superficiality of untruth, contrived, misinterpreted,
Where tireless activity stretches its arms towards promoting hate, avarice and fear,
Where the clear stream of reason has lost its way in the dreary desert sands of dead habit
And the stormy winds of communalized frenzy,
Where the mind is closed and stunted by ever widening circles of hate and despair,
Into ever widening chasms of strife and destruction,
Why hast thou let my country descend?”

-With Apologies To Rabindranath Tagore
Adapted From Geetanjali

First they came for the Dalit
And I did not speak out because I was not a Dalit,
Then they came for the Adivasi
And I did not speak out because I was not an Adivasi,
Then they came for the Muslims
And I did not speak out because I was not a Muslim,
Then they came for the Sikhs
And I did not speak out because I was not a Sikh,
Then they came for the Christians
And I did not speak out because I was not a Christian,
Then they came for the Secular Hindu
And I did not speak out because I was not a secular Hindu,
Then the came for the Social Activist who worked for the Poor or Marginalized,
And I did not speak out because I was not poor or marginalized.

Then they came for me
And there was no one left to speak out for any one,
No Dalit, no Adivasi, No Muslim, No Sikh, No Christian, No Secular Hindu, No Social Activist
No me....

With Apologies To Pastor Martin Niemoller (1892-1984)
In the last few weeks we have witnessed the re-emergence of a particularly virulent form of an old ‘virus’ – the virus of communalism with an explosive outbreak in Orissa and now spreading to Karnataka. For some years this ‘virus’ has been gaining ground sometimes with pandemic dimensions. In 1992 it spread rapidly even to our South Asian neighbours, then onto the middle east and finally all the way to UK as well. Bombay among the most cosmopolitan of all our metropolises, also suffered a particularly vicious attack, the acute phase of which lasted for over 10 days about a decade ago. Delhi saw a similar horror when the late Prime minister, Smt. Indira Gandhi was assassinated. Then we had the explosive and horrifying epidemic in Gujarat. After a lull its seems to have surfaced again in Orissa and a few weeks ago in Karnataka as well. Has the virus become endemic?

Since Independence this ‘virus’ has been localized to a few endemic pockets showing sporadic outbreaks. However in recent years, it has seen a re-emergence with greater severity and the recent outbreaks once again have proved beyond doubt that the virulent ‘virus’ is going to be with us for a long, long time.

Much has been written about this ‘virus’ in recent days but our knowledge of its socio-epidemiology is still relatively confused and our skills in its prevention are rather underdeveloped. However, what little is known is enough to establish that if left unchecked by concerted social, community and public health action, this virus could well prove to be the greatest threat to the physical, mental and social well-being of the Indian people. While bio-medically oriented health policy professionals may like us to continue to focus on polio, HIV/AIDS, Hepatitis and perhaps even avian flu all these pale into total insignificance as we gather evidence of the physical, mental, social, spiritual and environmental effects of the virus of the communalism.

For example, it is now relatively well-established that:

- The ‘virus’ affects the minds of people, especially the young and makes them indulge in pre-meditated acts of violence, especially directed towards innocent and defenseless people of communities and faiths perceived as different from them their own. Epidemics thus create the double burden not only of deranged affected youth, but additionally and more poignantly, of the innocent victims of these acts.

- It thrives in urban pockets, particularly in over-crowded metropolises and towns affecting young people, who are pre-disposed towards violence due to un-employment, urban lumpensation, social anomie and alienation. While males are usually affected, the recent episodes in some parts of the country especially in Gujarat has shown the disturbing trend towards female affliction as well. While it was thought to be a low-income group affliction it now seems to have concentrated on the educated middle income and even high-income groups.

- The ‘virus’ thrives in an unstable political climate and in an ethos of religious bigotry, cultural fanaticism and ethnic chauvinism. While Germany saw a particularly virulent subspecies in the early part of the century, similar episodes have been seen in Iran more recently, and in some states of Russia and parts of Eastern Europe as well as Rwanda in Africa. New ‘hot spots’ are emerging all the time.
The most disconcerting aspect of the available epidemiological evidence is that each epidemic leaves behind shattered families, devastated households, traumatized and scarred individuals, particularly women and children and pushes whole communities into a vicious cycle of fear, distrust, anxiety, anger and deep antipathy.

All this should be adequate evidence to jolt us out of our usual apathy and it is time we sat up and reflected on what we are going to do;

- each of us as individuals,
- each of us as members of an institution,
- and all of us as members of national networks and associations involved with the health and social life of the people.

What will be our response to control or eradicate this ‘virus’?

The Gandhian Response:

“As Gandhi was fasting for peace during the Calcutta riots, a Hindu man came to him, to speak of his young boy who had been killed by Muslim mobs, and of the depth of his anger and longing for revenge. And Gandhi is said to have replied: “if you really wish to overcome your pain, find a young boy, just as young as your son, a Muslim boy whose parents have been killed by Hindu mobs. Bring up that boy like you would your own son, but bring him up with the Muslim faith to which he was born. Only then will you find that you can heal your pain, anger and your longing for retribution”.

Source: Cry, The Beloved County by Harsh Mander.

I believe there are many possibilities open to us:

Firstly, we could get involved in pastoral and counseling initiatives at the community level, reaching out to affected communities of patients and victims; providing a supporting hand to the devastated; courage to the affected; comfort to the distressed, and various other supportive services that would help families and communities to come to terms with the crisis and get beyond it.

Secondly, we also need to particularly tackle the rage that the affected youth manifest by getting to the roots of the problem and countering the malicious propaganda that has confused their hearts and minds.

Thirdly, we could get involved in bridge building efforts between communities of all faiths and cultures using educational efforts - both formal and non-formal. We could initiate collective dialogues to build new attitudes, greater harmony and increasing trust and respect between different communities.
Fourthly, we could tackle prejudice, animosity and unhealthy stereotyping, by focusing our efforts on the youth and strengthening the value re-orientation of our educational system by strengthening are commitments to cultural diversity and plurality.

By doing all this, we would have helped to create an environment that immunizes minds against the future effects of this virus.

Finally, we also need to actively build networks and coalitions, to provide a socio-political – cultural - legal and democratic countervailing movement that tackles, counters and challenges our social, economic, political and cultural, environment and policies to build firewalls and preventives against this virulent organism. This coalition to win back the hearts and minds of our people and especially the increasing numbers of young people harbouring virus will need the efforts of all of us in society – citizens, academics, researchers, policy makers, poets, artists, philosophers, lawyers, doctors, social workers and activists, religious leaders, media, educationists – everyone.

THE PEOPLE’S HEALTH CHARTER RESPONSE:

“Violence, conflict - devastate communities and destroy human dignity. They have a severe impact on the physical and mental health of their members, especially women and children.
This charter calls on people to :

- Support campaigns against aggression...
- Support people’s initiatives to achieve a just and lasting peace...
- Encourage independent people initiatives to declare neighborhoods, communities and cities areas of peace...
- Support actions and campaigns for the prevention and reduction of aggressive and violent behaviour especially in men and the fostering of peaceful coexistence”.

- Extracted from the Global People’s health Charter of the People’s Health Movement

However there is still another type of response which seems to be unfortunately and inexplicably more popular than the alternatives outlined above. It is a response characterized by the combination of the following types of reactions:

- This is none of my business!
- It does not affect my community or me!
- I do not have the time to do much, because I’m busy.
- I have neither the skill nor the inclination!
- This problem is not of my calling!
- There are people better qualified and skilled to deal with it!
- It is only a passing aberration!
This apathy is dangerous. It is helping the ‘virus’ go completely unchecked and perhaps this attitude is as dangerous as the ‘virus’.

Another response is not uncommon either. Take part in rallies, send protest letters around acute resurgences of the virus and then get on with other preoccupations. While this at least helps to make public aware of the virus and provides some solidarity and security to those who are victims of the ‘virus affected’, it remains adhoc and does not tackle the problem where the focus should be. Often the demands of these campaigns are political-legal not adequately socio-cultural or psychosocial. A much more focused and consistent response is required.

**APATHY IS DANGEROUS AND IMPULSIVE ADHOC INVOLVEMENT IS NOT GOOD ENOUGH**

It is this response, apathy - and *adhocism* that has allowed various sub-species of this virus to localize in different parts of the world;

- The virus of *Casteism* to take firm roots in our country.
- The virus of Nazism to devastate Europe in the early part of this century.
- The virus of Apartheid to affect the mental health of generations of South Africans.
- The present virus to grow in strength in our country.

It is the same response that for generations and through the centuries has allowed man’s brutality against man, woman and child.

**Beyond the anger, the fear, the guilt, the shame, the anxiety, the despair -**

**What will be our response?**

**This choice will face us squarely in the days ahead.**

**INDIA 2010: CAN THIS BE AN ALTERNATIVE REALITY**

Where the mind is free of communalism or commercialization,
Where the head is held high because all Indians are equal
Where knowledge is free of distortions,
Where the world is built up of bricks of equality and love that is classless, casteless, gender sensitive and founded on the harmony of faiths
Where words come out from the depths of truth of all religions, philosophies and ideologies living together in harmony,
Where tireless striving stretches its arms towards building social harmony and an inspired collectivity,
Where the clear stream of reason has recovered from the dreary deserts of uninformed debates and stormy winds of communalised frenzy,
Where the mind is led forward by thee into ever widening ethical thought and community building action,
Into that heaven of a truly free India, my father let my country re-awake!

*With apologies again to Rabindranath Tagore’s collection of poems- Gitanjali.*