13. Impact of Covid-19 on Social Life

Dr. Rijul Sihag

Former Research Scholar,
Dept. Of Sociology,
CCS HAU, Hissar.

13.1 Introduction:

The coronavirus outbreak came to be known to the whole world when China informed the World Health Organisation on December 31, 2019 of a cluster of cases reported of pneumonia of an unknown cause in Wuhan City in Hubei Province. Consequently, the disease spread to more Provinces in China, and later to the rest of the world. The virus has been named SARS-CoV-2 which means Severe Acute Respiratory Syndrome Coronavirus 2 (Rutakirwa, 2020, p. 13).and the disease was called COVID-19, the name that was taken from Coronavirus Disease -2019. The World Health Organization (WHO) on March 11, 2020, declared the novel coronavirus COVID-19 outbreak a global pandemic. At a news briefing, WHO Director-General, Dr. Tedros Adhanom Ghebreyesus, noted that over the past 2 weeks, the number of cases outside China increased 13-fold and the number of countries with cases increased threefold. Thus, WHO then declared it a pandemic Not only that but because of its rampant spread countries were forced to stop international travelling as well as locked up themselves. Also, the lockdown has been recognised as the only method to control the spread of the pandemic and almost every country has adopted this method.

13.2 Where Did the Coronavirus Come From?

Experts say SARS-CoV-2 originated in bats. That's also how the coronaviruses behind Middle East respiratory syndrome (MERS) and severe acute respiratory syndrome (SARS) got started. SARS-CoV-2 made the jump to humans at one of Wuhan's open-air "wet markets." They're where customers buy fresh meat and fish, including animals that are killed on the spot. Some wet markets sell wild or banned species like cobras, wild boars, and raccoon dogs. Crowded conditions can let viruses from different animals swap genes. Sometimes the virus changes so much it can start to infect and spread among people.

As SARS-CoV-2 spread both inside and outside China, it infected people who have had no direct contact with animals. That meant the virus is transmitted from one human to another. It was then spreading in the U.S. and around the globe, meaning that people were unwittingly catching and passing on the coronavirus. This growing worldwide transmission is what later turned pandemic.

13.3 Coronavirus Evolution:

Scientists first identified a human coronavirus in 1965. It caused a common cold. Later that decade, researchers found a group of similar human and animal viruses and named them after their crown-like appearance.

Seven coronaviruses can infect humans. The one that causes SARS emerged in southern China in 2002 and quickly spread to 28 other countries. More than 8,000 people were infected by July 2003, and 774 died. A small outbreak in 2004 involved only four more cases. This coronavirus causes fever, headache, and respiratory problems such as cough and shortness of breath.

MERS started in Saudi Arabia in 2012. Almost all of the nearly 2,500 cases have been in people who live in or travel to the Middle East. This coronavirus is less contagious than its SARS cousin but more deadly, killing 858 people. It has the same respiratory symptoms but can also cause kidney failure.

13.4 Social Life with Covid-19:

The COVID-19 pandemic has led to a dramatic loss of human life worldwide and presents an unprecedented challenge to Public health, food systems and education. The economic and social disruption caused by the pandemic is devastating as millions of people came at risk of falling into extreme poverty, while the number of undernourished people, estimated in 2020 beginning at nearly 690 million, could increase by up to 132 million by the end of the year.

Millions of enterprises face an existential threat. Nearly half of the global work force is at risk of losing their livelihoods. Informal economy workers are particularly vulnerable because the majority lack social protection and access to quality health care and have lost access to productive assets. Without the means to earn an income during lockdown around the world, many are unable to feed themselves and their families. For most, no income means no food, or, at best, less food and less nutritious food.

The pandemic has been affecting the entire food system and has laid bare its fragility. Border closures, trade restrictions and confinement measures have been preventing farmers from accessing markets, including for buying inputs and selling their produce, and agricultural workers from harvesting crops, thus disrupting domestic and international food supply chains and reducing access to healthy, safe and diverse diets. The pandemic has decimated jobs and placed millions of livelihoods at risk. As breadwinners lose jobs, fall ill and die, the food security and nutrition of millions of women and men are under threat, with those in low-income countries, particularly the most marginalized populations, which include small-scale farmers and indigenous peoples, being hardest hit.

Millions of agricultural workers – waged and self-employed – while feeding the world, regularly face high levels of working poverty, malnutrition and poor health, and suffer from a lack of safety and labour protection as well as other types of abuse. With low and irregular incomes and a lack of social support, many of them are spurred to continue working, often in unsafe conditions, thus exposing themselves and their families to additional risks. Further, when experiencing income losses, they may resort to negative coping strategies, such as distress sale of assets, predatory loans or child labour. Migrant agricultural workers are particularly vulnerable, because they face risks in their transport, working and living conditions and struggle to access support measures put in place by governments. Guaranteeing the safety and health of all agri-food workers – from primary producers to those involved in food processing, transport and retail, including street food vendors – as well as better incomes and protection, will be critical to saving lives and protecting public health, people's livelihoods and food security.

In the COVID-19 crisis food security, public health, and employment and labour issues, in particular workers' health and safety, converge. Adhering to workplace safety and health practices and ensuring access to decent work and the protection of labour rights in all industries will be crucial in addressing the human dimension of the crisis. Immediate and purposeful action to save lives and livelihoods should include extending social protection towards universal health coverage and income support for those most affected. These include workers in the informal economy and in poorly protected and low-paid jobs, including youth, older workers, and migrants. Particular attention must be paid to the situation of women, who are over-represented in low-paid jobs and care roles. Different forms of support are key, including cash transfers, child allowances and healthy school meals, shelter and food relief initiatives, support for employment retention and recovery, and financial relief for businesses, including micro, small and medium-sized enterprises. In designing and implementing such measures it is essential that governments work closely with employers and workers.

Countries dealing with existing humanitarian crises or emergencies are particularly exposed to the effects of COVID-19. Responding swiftly to the pandemic, while ensuring that humanitarian and recovery assistance reaches those most in need, is critical. Now is the time for global solidarity and support, especially with the most vulnerable in our societies, particularly in the emerging and developing world. Only together can we overcome the intertwined health and social and economic impacts of the pandemic and prevent its escalation into a protracted humanitarian and food security catastrophe, with the potential loss of already achieved development gains. We must recognize this opportunity to build back better, as noted in the Policy Brief issued by the United Nations Secretary-General. We are committed to pooling our expertise and experience to support countries in their crisis response measures and efforts to achieve the Sustainable Development Goals.

We need to develop long-term sustainable strategies to address the challenges facing the health and agri-food sectors. Priority should be given to addressing underlying food security and malnutrition challenges, tackling rural poverty, in particular through more and better jobs in the rural economy, extending social protection to all, facilitating safe migration pathways and promoting the formalization of the informal economy. We must rethink the future of our environment and tackle climate change and environmental degradation with ambition and urgency. Only then can we protect the health, livelihoods, food security and nutrition of all people, and ensure that our 'new normal' is a better one.

13.5 Impact of Coronavirus around the Globe:

Many countries have declared restrictive measures, such as lockdown, shelter in place, or stay at home orders, to control the pandemic at a local level.

13.5.1 China:

China appeared to manage the coronavirus outbreak effectively, putting in place early travel bans within the country itself. As early as January 23, Chinese authorities declared a nationwide travel ban, which, some experts suggest, may have averted over 700,000 COVID-19 cases within the country. Earlier in April, China eased the lockdown measures in Wuhan, the original epicenter of the new coronavirus outbreak, amid celebrations that the nation had beaten the virus.

13.5.2 Europe:

Some European countries have reacted sooner to the steep rise in COVID-19 cases than others. On March 10, Italy ordered a strict nationwide lockdown, becoming the first country in Europe to do so. The government banned all travel in the country, and people could only leave their homes for essential reasons — such as to buy food. When going out, people had to carry declaration forms and wear face masks and disposable gloves. Despite a slowdown in the growth of new COVID-19 cases, the Italian government took all necessary lockdown measures to keep the growth of cases in control. Only one family was allowed to go out at once and only for valid reasons, such as doing the groceries, going to the pharmacy, or the post office for urgent matters.

Spain, another one of the European countries hit badly by the coronavirus, also announced strict lockdown measures from mid- March. Spain's Prime Minister Pedro Sanchez announced that Spain reached the peak of the pandemic in early April.

13.5.3 Sweden: 'Not a True Form of Self-Isolation':

Other European countries have put in place less stringent measures. For instance, in the United Kingdom, Prime Minister Boris Johnson announced a lockdown on March 23, though the measures have been less stringent than in other countries. Unlike in Italy, for instance, in the U.K., people may go out without a declaration form. The acceptable reasons for leaving one's home — "for food, health reasons or work" — has received criticism for being confusing and lacking clarity. Some, however, relish the relative freedom that Britain's more relaxed pandemic advice has afforded.

Other European countries, such as Sweden, which had reported fewer cases of COVID-19 overall, had fewer and much less restrictive measures in place. Yet, some experts worry that the authorities have underestimated the incidence of COVID-19 in Sweden. Others suggest that the guidelines have left older citizens one of the high-risk categories unnecessarily exposed to the virus.

The one country that has received consistent kudos for its approach to the pandemic appears to be Finland, where Prime Minister Sanna Marin announced, on April 22, a "composite strategy." This strategy would involve a gradual easing of lockdown measures while increasing COVID-19 testing. Testing would ensure that anyone exposed to the coronavirus receives the care they need, while those who have not had exposure may return to their normal life, little by little.

13.5.4 United States:

The U.S. strategy in dealing with the pandemic has been the target of an increased amount of criticism since different states have adopted wildly different measures. There was a lack of consensus since beginning between the authorities and various public health organizations. As of March 30, U.S. states including New York, California, Texas, and Washington directed their citizens to shelter in place or stay at home, though some have opted for less restrictive measures. Since March 31, the Department of State was advising all U.S. citizens "to avoid all international travel."

Although measures in the U.S. have been, overall, less stringent than elsewhere, groups of people in 18 states started protesting against the lockdown claiming that the measures have been harming them financially and otherwise. Even then President Donald Trump spoke in favor of easing the current measures, saying that the pandemic has already peaked in the U.S. However, some medical professionals had spoken out against the protests, stressing that the protesters may well be putting other people's lives and health in danger.

13.5.5 Canada:

In Canada, only two provinces Ontario and Alberta declared a state of emergency in the first half of March, following an increase in the number of COVID-19 cases. One reported worry among experts and the public was that Canadian authorities have not managed to capture important health data and that testing efforts for COVID-19 were falling short.

13.6 Covid-19 and Its Impact on India:

The first case of COVID-19 in India was reported on January 30, 2020 and after almost a year, 2020, confirmed cases stand at 107 lakhs with more than 157 thousand deaths. The impact of the pandemic is visible across the sectors globally, but its impact on marginalized sections, women and children has been immense in India. This crisis has affected economy as never before leading to massive psycho-social impacts as well.

Women were at greater risk during the pandemic from the health perspective. Homes which were already unsafe along with families living in poor and substandard conditions have added on to the social inequities like gender-based violence and child abuse, lack of security, money and health. Various unplanned lockdown extensions in the country made it more difficult for them to seek help for such concerns.

Resource limitations for women has brought in a situation where women tend to neglect their own requirements while prioritizing life and budgets of others in the family and issues like menstrual hygiene, mental health and her nutrition do not feature in the list of priority.

Amidst the lockdown in Indian society, multiple issues related to social, educational, economic, political, agricultural, psychological levels and many more have been noticed that has created the devastating impact on the lives of the people.

Social-distancing is the only measure to control the influence of Covid-19 and it should be promoted but we need to see the impact of this pandemic on the society how it has revived the social discriminatory practices.

Impact of Covid-19 has been multiple and not only limited to society at large. From the perspective of the economy, both rural and urban have been impacted adversely. Everyone has seen the issues being faced by migrant workers who depend on daily earnings, they barely had savings which they could spend during any emergency.

Many of them who didn't have many resources left with had started to move to their villages because of the unavailability of jobs and money in the cities. Walking thousands of miles barefoot with their children and families.

Apart from migrant workers, gig workers have been gone through a similar issue though it has not got much attention in the news. These workers e.g., delivery boys, cab driver etc. Because of Covid-19, the world came to stagnant position, so the online platform which leads to the economic hardship of this section of the urban economy.

Moving from the economy, the impact of Covid-19 on education has been cruel and its repercussions will be seen in the upcoming future. As per the report of World Bank titled "Beaten or broken: Informality and Covid", WB has warned that there will be the lifelong impact of school closures on the productivity of this generation of students.

Children being out of school for about eight months might forget some facts as well as impact their learning capacity.

So, what is the benefit of nearly 100% enrolment ratio at primary level education? Despite one of the greatest achievements in enrolling the students at primary level Covid-19 is stopping us to reap its benefits in the coming future.

With any pandemic or any situation which impact the society at large comes the problem of psychological trauma? The lockdown has proved that "man is a social being" because continuous lockdown for about four months have impacted people psychologically and the burden has been faced by women and children in the form of domestic violence.

In the lockdown period, multiple calls have been received on the helpline number made for the people going through domestic violence.

As India is recognised as land of diversity, the impact of Covid-19 was diverse and countless. But, if we see the other side of reality, COVID-19 has impacted our society and that is for sure, but only adversely? That is the thing we need to analyse carefully and can't be left without a brief discussion.

It has been truly said that "crisis gives birth to the changes which were pending for many years", same has happened during the time of Covid-19. Things have been changed to meet the needs of the society what the government were trying hard to implement from past many years.

13.7 Social Life with Covid-19 after One Year:

Focus has mostly been on testing, treatment and prevention of COVID-19 but people and communities are going through various social problems as well in adjusting to the current lifestyles and fear of the disease across nations. Conditions have all the more affected the other half of the population globally and particularly in India where abrupt lockdown has brought millions below the poverty line struggling for basic needs like food and shelter which then leads to unequal share in domestic responsibilities, to violence against the vulnerable members of the household.

Social stress caused by lockdown has many faces and reasons resulting from travelling restrictions and disruption of cultural celebrations, limited healthcare facilities and interruption in regular immunisations in hospitals leading to anxiety and fear among the

population, social distancing with friends and family, closure of places of entertainment and leisure, unplanned closure of schools and colleges affecting both students and parents regarding the academic year and the loss of quality education. Inadequate infrastructures, leading to ill-equipped healthcare employees who were fighting endlessly to treat patients and protect themselves from infection at the same time are all quite visible. This major loss and unpreparedness is an aftermath of the negligence of healthcare sector since years. Incapacitated hospitals and distressed primary healthcare are significant reasons behind so much distress among the people for a disease which could be prevented with a little care and precaution.

The issue of migrant workers was one of the most cruel and highlighted issue in this pandemic where millions were rendered unemployed and stranded without money, food and shelter, crisscrossing the country's highways to return to their villages and several meeting with accidents and deaths on their way. Unemployment has rendered a large section as directionless, leaving the social health as well as economy in shambles.

Several forms of racism triggered the division among the people of India and other global counterparts. The stigma of religious hatred, caste based discrimination and stigmatisation of people from the North East is equally dangerous to humanity where the less informed and biased media as well as people with vested interests tried to damage the social fabric of the country and left a big social impact in the fight against coronavirus. Reports of racism against the Chinese and other Asians elsewhere around the world and calling it a Chinese virus due to its origin, showed the deteriorated levels of sensitivity among the world population. Realizing that viruses such as COVID-19 do not have race, nationality, or boundary is very important.

The COVID-19 pandemic has changed the world in many ways. Of the several implications on humanity, the issues of health, the rapid decline of economy, shortage of medicines, sanitizers, masks, and other essentials, poverty, unemployment has undoubtedly taken centre stage and each has left a mark on the lives of people.

Long term planning and collective efforts of individuals, communities, governments, national and international organisations to fight against this invisible deadly virus are needed. Policy response to the pandemic as well as health and contracted economy is the need of the hour. Health interventions to those who are in need as well as prioritising the focus on the social setbacks in the country for a healthy start are of utmost importance.

Reducing the psychological and social distress among people and promoting strategies to deal with the situation are required. Considering other health issues by the policy makers as well as strengthening of public healthcare with large investments and robust infrastructure and providing sufficient care to the patients suffering from other diseases as well are also very important. While the nationwide lockdown has resulted in financial losses and has affected all segments of society, the domino effect on health, healthcare and nutrition could possibly pose major setbacks to previously gained successes of National health programs.

At this stage, we should ask a genuine question: What kind of society we'll see post-Covid-19? Fragmented? Unequal? We don't know but we'll have to stand up again support each other. We'll have to adopt values enshrined in our Preamble of the Constitution i.e. "Equality, Fraternity, Integrity" as well as DPSP to make India a better place on earth for its citizens and the world.

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