

Communication, Care, Compassion, and Women Leadership: An Expatriate Watching Her Homeland (Kerala, India)

By Sindhu Jose

In December 2019, I flew to Kerala (India), my homeland, for vacation; I returned to Texas in January 2020. In that one month, in that liminal space between two decades, the world was changing as we knew it. In March, the spring-break ended where the shelter-in-place began. In April, with the new travel restrictions, with all the intercontinental flights canceled, the distance home widened. Home seemed far away. Almost two and a half years in the United States and through this pandemic, I now find myself asking those quintessentially diasporic questions, a little too early maybe, but a little differently as well: "Where does my heart lie? Why?" And why do I want to talk about it now?

Kerala reported the first COVID – 19 positive in India on 30 January 2020. As of 25 May 2020, there have been 896 confirmed cases and 5 deaths in the state – with the lowest mortality rate (0.56%) among all the Indian states (In the United States of America, the first case was reported around the same time, on 15 January, and the death toll has crossed 100,000). As I write this, the world is watching this coastal strip of land of about 35 million people with a population density of 860 persons/sq.km and

a GDP of 110 billion US dollars (whereas in Italy – one of the most affected European countries – this is 206 persons/sq.km and 2.084 trillion) fighting the coronavirus effectively and efficiently. How? This is a deeply personal, yet political reflection that tries to answer this very same question; by listening to friends, family, and myself.

Effective Communication

Thousands of miles away from Kerala, I follow COVID-related news through social media – social media pages of various state agencies that provide up to date and every other necessary information. I know the state protocols, I know the helpline numbers, I know the "risk-zone" status of each and every place, I know the exact numbers of patients in specific places; I even know the patients' route-maps so that I know for sure that my family hasn't come in contact with anyone infected. The state chief, The Chief Minister of Kerala, provides the bigger picture (taking care of even the smallest detail) through his routine press meets – live in television as well as social media. Every single citizen of the state – resident or non-resident – has the right to information. Never in one of these days was I worried about my elderly parents back home. Neither were they, even while living alone, with all their children away from them. Transparency in communication is the key, keeping fear and uncertainty at bay. The Health Minister of Kerala, Ms. K. K. Shailaja, nicknamed 'the coronavirus slayer'

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¹Aggressive testing, contact tracing, cooked meals: How the Indian state of Kerala flattened its coronavirus curve. (The Washington Post)

² How the Indian state of Kerala flattened the coronavirus curve. (The Guardian)

by The Guardian, was heard saying, "People understand why they must stay at home.

You can explain it to them."

Care, Compassion, and Women Leadership

Kerala's success story in defending the coronavirus is attributed to the state's universal, public health care system, its efficiency and effectiveness, and the coordinated efforts at all levels – from ASHA Workers⁴ to the Health Minister. **Across the globe, women leaders are excelling in managing COVID -19, and so is in Kerala.**⁵ K. K. Shailaja was way ahead of her peers in responding to COVID – 19. A science educator turned politician, Shailaja comes with the experience of managing the Nipah outbreak in 2018⁶ – a virus deadlier than the COVID. She already had a system in place for contact tracing and prevention of community transmission. Her leadership style, and what sets Kerala apart in general, is **the care provided with compassion** – taking into account every single detail of every single human being.

Everyone gets institutional care in Kerala, once tested positive. The students from a Wuhan medical college, who came home after the outbreak and later tested positive, told the media how they were provided with high-bandwidth internet in the

³ The coronavirus slayer! How Kerala's rock star health minister helped save it from Covid-19. (The Guardian)

⁴The foot soldiers of Kerala's Covid-19 battle, 26,000 women who won't overlook any detail. (The Indian Express)

⁵ The female brigade: Kerala's Covid-19 story is one of women power unleashed and the price they pay. (The Week)

⁶ Nipah Virus Outbreak in Kerala. (World Health Organization)

hospital, so that they could attend online classes. The police and the fire force were seen distributing food to the homeless, and community kitchens under the auspices of the state government were opened across the state to provide food for the needy. Whoever crossed the state borders from outside and put under the mandatory home-quarantine of fourteen days got regular phone calls from health workers, including mental health professionals. To quote my friend Veena's personal experience, which she shared on Facebook:

"As someone who crossed the border during lockdown after obtaining the pass, my eyes literally welled up when I reached the border...They treated us with dignity. All of them wore gloves and masks (I am not taking this for granted because this is NOT how things are everywhere). Doctors gave us detailed instructions. Since the day we reached home, we have been getting calls from the health department enquiring about our health (including mental health) in detail. The tone is not dry, distanced bureaucratic, but honest and caring. Care is the keyword here."

Alternatives are Possible

Reading these testimonies of friends and family, I often break down – sometimes with overwhelming pride, and sometimes guilty of the privileges we enjoy, which the rest of the country and the world lacked at the moment. In the north of India, migrant laborers are still walking home, thousands of miles away from where they work. Some

never reached home.⁷ Kerala fed her migrant workers and sent them home on charter trains.⁸ As the elderly – of the assisted living center just a few minutes' walk away from where I live and in New York and elsewhere – were succumbing to the virus, in Kerala an elderly couple, aged 93 and 88, returned home after completely recovering from the infection. Why am I making these comparisons right now? Because, I cannot fathom the inhumaneness of systems that perpetuate inequality and injustice and the suffering it unleashes on fellow human beings, and I want to shout from the rooftop to the world that alternatives are possible.

Yes, my heart lies in that small strip of land, in Kerala, because that is where I learned alternatives are possible; that every human being deserves dignity; that affordable and universal health care is the right of every citizen; that investments in public education and public healthcare can fight a pandemic.

⁷ The Pandemic Exposes India's Apathy Toward Migrant Workers. (The Atlantic)

⁸ Why we haven't seen an exodus of migrant workers on foot from Kerala. (The News Minute)