Documentation Highlight

Reflections on COVID-19: What the Data Reveal
Series No. 4: CityNet Live Webinar – III
June 23, 2020, Tuesday, 1:00-2:30 PM Korean Standard Time

Speaker:
- Dr. Anjum Altaf - Research Fellow, Lahore University of Management Sciences; Former Professor of Economics and Dean, School of Humanities and Social Sciences at the Lahore University of Management Sciences and Former Provost at Habib University in Karachi;

Panelists:
- Mayor Rosie Senanayake, Colombo Municipal Council, Sri Lanka;
- Mary Jane Ortega, CityNet Special Advisor, Philippines
- Sanjay Sridhar, former Regional Director, C40 South Asia

Moderator:
- Vijay Jagannathan, Secretary-General, CityNet

Highlights

Vijay Jagannathan moderated the webinar. He introduced Kirtee Shah, the President of INHAF and co-organizer to render the welcome remarks.

Kirtee Shah
President, INHAF

Mr. Kirtee Shah said this is the 3rd of the series of webinar that INHAF has been doing. He is delighted to have CityNet as a partner in this webinar.

Mr. Shah laid down the context on why the need for this webinar. Cities are the future in India and 35 percent of India's whole population is already living in cities. Seventy five (75%) of India's gross domestic product is conducted in cities. It is expected to grow bigger in future. Cities have become the central of technology, art, innovation and culture.

As many opportunities the city offers, there are also a lot of problems like pollution, poverty. Half of the population in Mumbai, India's capital, is living in slum because of poverty. In the future, the cities have to work more on being economically productive way to resolve these ongoing city problems. India needs to restructure its economy because 90% of its jobs will be in the informal sectors.

Therefore, India needs to ensure that cities are economically-productive, politically participatory, culturally vibrant, socially just, environmentally sustainable, technology adoptive, and people-centered.

The challenge of cities should be handled not only by governments but also societies, public and businesses. This is the context for innovation and for today's webinar.

Dr. Anjum Altaf
Research Fellow, Lahore University of Management Sciences

Dr. Altaf presented the salient points of his discussion paper. He started that cross country comparisons is tricky.

Most cross country comparisons are not useful due to a non-standardized statistics. Most of the comparisons, number-wise, are useless. However, there are exceptions such as when there are no deaths in Vietnam, one should think about the reason for that than elsewhere.
Some inferences are useful. For example, the mortality profile, and measures like wearing masks are proven to be very helpful. Different strategies have led to different results.

Focus on local, forgetting about national comparisons, even within the nation. Excess Deaths is a useful indicator but India’s actions are slow. Another data is COVID-19 death versus non-COVID-19 deaths. A choice between lockdown and opening up. A choice between saving lives or saving livelihood. One needs to emphasize non-COVID-19 related death versus COVID-19.

In my estimation, given the kind of population and given the poverty level, it is important to figure out how many people die out of COVID-19 and how many will die out of non-COVID-19 in a healthcare perspective.

Higher density leads to higher infection but it is not the only element because living conditions matter. For example, the case of Manhattan in New York. In South Asia, we automatically associate density as slums but it is not the point. Living condition is also an important element as well as density of population.

Normalizing cases or deaths over national population is methodologically incorrect. There was news called “Health ministry said India has the lowest death per lakh population in the world,” which gives a false comfort.

Death over national population is inappropriate. When every condition is same, bigger forests have more trees down in the end. That is the function of the size. If the country is bigger, then there are bigger possibilities for more transmission cases as well. Therefore, the exact number of confirmed cases or patient cannot be the fair statistic result.

The burning spreads so fast. You can think of places like New York, Wuhan, or Italy. There were already lots of infections before the lockdowns were instituted. One person can infect a lot of people that is why it spreads so fast. The spread of infection, time of the burn rate and infection rate, have a delay in time. Nursery homes for old people spread faster in Sweden and half of the death case is from old people’s home, but there are not many nursery homes in South Asia.

If you lock down the virus within the small circle, the virus will escape out to the bigger circle. Even if you lock down the city, it may slow the transmission but it cannot be the ultimate cure because the fire will be still spreading within a small circle. People have to get out of the lock down, so the vaccine can work to extinguish and nuclearize the disease/fire. You have to get rid of the virus but it won’t be able to get rid of it with a lockdown.

It is a natural experiment to compare countries that have similar conditions on facilities, populations among others.

India and Pakistan comparison case will not be a perfect example but it is the closest one that we can get from the reality. Locking down the multi-use facilities is making sense. The stay at home measure was very strangely executed in India but it was not executed in Pakistan.

Pakistan and India used to have similar number of cases until April 10th when the number of cases in India started to skyrocket. Both India and Pakistan are having the high number of deaths until today but we can tell that stay at home measure really did not flatten the curve in a sense.

Also in many cities, even though the multi-use facilities like public transportations are not available, people in India really did not follow the lockdown rules. They rented a car to move and go to religious buildings because the lockdown is not feasible for their culture. That is the biggest reason why India did not get benefited from the lockdown. Moreover, India was not ready for locking down because the pre-lockdown preparation was not executed well. Before lockdown, the government could have prepared measures on social distancing and on buying necessities.
It is also important to visit each home to test who are infected and who are not infected. It will help ease up the situation better in the future. The sole objective is minimizing death. Both countries fell into the trap of lockdown as the cure. Personally, I do not feel that the curve will be flattened by the end of this year because I do not see any interventions in stopping the transmission.

Countries that apply measures from local levels are resulting better than countries that only applied locked downs. It is obvious lockdowns could not be continued because most of people in South Asia do not have the means to survive.

As to the suggestions for cities to minimize the number of deaths, we should focus on identifying people at the most risk to minimize the number like age-related. Moreover, we need to identify activities that are safe versus risky.

Panelist

Mayor Rosie Senanayake
Colombo City
Sri Lanka

In contrast with India and Pakistan, Sri Lanka provided basic necessities like medicines to the citizens during the quarantine. There are strong public health infrastructures as public health inspectors know their geographic area. It was the people working at the grassroots level who helped prevent significantly the outbreak of COVID-19. It was the joint authorities appointed by the president, headed by the different directors, that we were able to work together and resolve the outbreak of COVID-19.

The number of COVID-19 deaths is relative with the age of the population and other diseases like diabetes. Thus, direct comparisons of different countries without considering the dynamics in demography and other factors is very tricky and may result to wrong conclusions.

Sri Lanka has only 11 deaths. There is a self-quarantine of all those who first exposed with contacts and vigorous testing. Health promotion under health offices such as hand washing and sanitizing are well promoted as well during the lockdown.

Lockdown of is only one of the measures, it’s more appropriate to consider other factors.

Mary Jane Ortega
CityNet Special Advisor
Philippines

In Sri Lanka and also in the Philippines there were very strict guidelines that were imposed on local authorities from the central government. However, it was not totally feasible to be applied on all of cities.

In San Fernando, we have had zero deaths, and still we were following the same strict guidelines given by central government. It is important to increase the capacity of our leaders at the local level in terms of pandemic response. It can be a form of decentralization. I believe that the approach to COVID-19 should be decentralized.

We should determine local measures instead of taking advice directly. It is not only density but taking account the quality of life like is there access to water to drink and to wash their hands and sanitize the contaminated stuff. Some good habits from Korea and Japan that we might should follow as well. (For example, wearing masks outside and change to slippers indoor).
Sanjay Sridhar  
former C40 Regional Director  
South Asia

I will take a slightly different point on the impact of COVID-19 on Indian Cities. I have been in touch with many mayors in the cities in India which have high density level.

The restriction is only implemented largely to urban areas, which has been an indication to see the demographic moving from urban to rural within the country. We could see that people move from big cities to big towns to small towns, eventually gone back to villages. There were only few confirmed cases in the rural area. This is becoming an indicator to show the demographic distribution in the city.

Another thing I would like to point out is the role of civil service. Political class has been largely kept out of the implementation of COVID-19 measures. This is a strong direction from the national government. Though there are ministers in charge of each district in the state, they are not fully in charge of the implementation. If we have empowered mayors, the result will be different.

In addition, what the COVID-19 has revealed is the huge deficiency in education system. Because we have to rule out the offline tests and classes, those students who do not have laptops and internet services cannot really take any classes which is very unfair. Anybody who wants to learn should be able to learn. Otherwise in 15 years, India will still be in the bottom third nations that do not have the education system.

In Bangladesh, India and Pakistan the medical system did not work fast enough to treat patients as soon as possible. Most of patients were not able to get the medicine quickly because the medical system also did not move fast enough to provide drugs to patients in need. Pre-existing drugs could help and there should be locally produced new drugs for the pandemic. Poorest of the poor is the most affected.

In the city of Bangalore, the city government has done a fairly decent job for its measures. They did a good job on 1.) Door-to-door survey to investigate the path of infection; 2.) Testing and inviting private hospitals on board; 3.) Use of technologies to have real time data with coordination from all departments; and 4.) Transparency, making sure numbers reported honestly, including infection numbers and death numbers.

Lastly, the lockdown also revealed that we can have cleaner air. It is possible to have cleaner air without shutting down the whole city or social activities. For example, because of social distancing, path for pedestrian should be expanded. On the other hand, less cars will also occupy less roads than before and it will lessen the congestion and air pollution in the city. Furthermore, consulting with big corporations and changing work from home to a permanent working style to lower road congestion is also discussed.

Open Forum

Dato’ Sr Hj Rozali Bin Mohamud of Seberang Perai asked what sectors were most negatively and positively impacted by the pandemic.

Vijay Jagannathan said that leveraging the technology, people have begun to realize the importance of clean air and water. He asked Mayor Senanayake if Colombo is taking advantage of COVID-19 to better improve air and water quality and traffic management.

Mayor Senanayake said people have been more self-disciplined. There is a chance to maintain the commitment of the people when their lives are at risk. They have become more supportive to the government. That is why Sri Lanka minimized the number of death.
However it is too soon to predict the future. We have just opened up the city from the lockdown. We will continue to provide citizens the necessities, medicines, and also the medical services. We have been able to immediately lock down the city, test vigorously, and provided necessities to the citizen to make the lockdown feasible and applicable. We will try to go slowly to revive the economy in few months. We will take care of underserved community. But it is going to be challenging.

Nilima Prabhu, an academician and researcher at the University of Mumbai asked what measures India should adopt to start normalizing in schools and colleges. Participant Kaustubh Das asked that in the case of India it was clear that case of COVID-19 increased once the lockdown is lifted and people starting to go to work. He asked for any comments from the resource persons and panelists?

Dr. Anjum said that the city needs to identify who are at risk as an essential measure to let the cities return to normal as before. People should be educated and disciplined to follow the guidelines to stop the spread of disease. Those regulations need to be followed if the city wants to open up.

One participant emphasized that comparing India, Pakistan and Sri Lanka is useless because of the difference of medical infrastructures and social development. A participant from the Chamber of Social and Solidarity Economy asked, “How is the informal sector being managed? Did it have any impact on civil society?” Another participant asked, “Will post-COVID19 reverse the trends of globalization and urbanization, are there any other options than lockdowns?”

Secretary General Vijay Jagannathan said that providing efficient healthcare is a lacking element in both Pakistan and India and this further helps spread the transmission and disease. If one learns about Sri Lanka, it has done social development almost as good as South Korean social development years ago. There has been a neglect of developing anti-poverty programs for example, healthcare, in many states in India and Pakistan. One does not become a country with a five trillion dollar economy if one does not have a basic healthcare that is universally accessible.

This is a learning moment for political leaders. If we want to make a city livable there is no need to make too much extra transaction costs. A livable city can be green and pedestrian friendly over vehicles and air pollution. There is an opportunity to change the dialogue and governance. If one needs help from CityNet, we are more than happy to assist.

Secretary General Vijay added that Dr. Anjum’s point helps us draw conclusions which are not political. All politics are local so everything becomes questions that are further against. But the interesting thing related to COVID-19 experience is that we cannot really question the data that reflects pollution, bad quality of life, poor health and lack of housing.

Sanjay Shridar said that COVID-19 has also created misconceptions. One misconception is that public transport increases the rate of infection and people feel safer travelling in private vehicles. But there is a long term impact on public health. Some people are now pushing the government to allow selling more private cars but in the long term, it is not beneficial for public health. It has to be discussed in more details.

The impact of COVID is at multiple levels and across all sectors. Only time will be able to tell, in six to eight months, what the impact will it be?

Going back to normal after the COVID-19, if we continue to have a production system based on competition and profit, it would result the same situation, like labors without any rights. We have to focus on sustainable production and gain rights back to the workers. All this urbanization and traffic will only be effected if the system of production is changing to a more meaningful way.

One participant asked “What is the difference between per capita case loads and per capita mortality between India and Pakistan? What implications of lockdown on these trends?”
Dr. Anjum said that per capita measure is not a useful measure if the infection rate is the same. So in the end, big countries will result to more deaths number. It is not a useful measure.

One participant asked, “What was the extent of the capacity in the management for contact tracing and data analysis vis-à-vis other levels of government? Has there been any role for civil society?

Mary Jane Ortega said that in the Philippines, civil society has been active in helping the overall response to COVID-19. The small and medium-size establishments and schools are participating in terms of sanitizing to stop the spread. Citizens can also wash their hands by using water drums installed on the streets. Civil society is also active in terms of the education and giving relief goods.

Mary Jane however noted that senior citizens and minors are getting discriminated because of their health status and age. This needs to be resolved. Lastly, when we come up with online education for minors, we are only developing their IQs. We need to educate on their EQs in schools with social interactions.

Kirteeh Shah made a closing statement. He said that COVID-19 has brought opportunities to think about the society, to reflect on it, to develop response. It is a new direction to develop our cities. Cities are our future so the way we manage is important. One should continue learning.