



TABLIGHI JAMAAT AMIDST PANDEMIC COVID-19: TWISTING KNIFE IN THE WOUND?

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The contagious diseases have been existent among the human race and communities since the beginning of history. Infectious diseases are constantly progressing, often acquiring epidemic potential. In recent times since travelling across the world has become easier, many people are travelling all over the world thereby exposing the whole world to epidemics or in worst case scenarios it takes a horrifying leap of a pandemic. Coronavirus disease (COVID-19) is an infectious disease caused by a newly discovered virus called as Severe Acute Respiratory Syndrome Coronavirus 2 (SARS- CoV- 2). The virus spreads mainly through droplets of saliva or discharge from the nose when infected person coughs or sneezes.¹ The most common symptoms of the disease are fever, dry cough, tiredness and difficulty in breathing. Most of the people infected with the disease recover even without getting a special treatment but it may prove fatal to older people and people with medical conditions such as asthma, heart disease or diabetes. At this hour, there are no specific vaccine and treatments for COVID- 19. In March, WHO has declared Coronavirus pandemic.² The term ‘pandemic’ means

worldwide spread of a disease and is connected with geographical spread usually affecting large number of people. The consequence of coronavirus across the world are unmatched and has forced many countries to impose complete or partial lockdown.

The question that comes to our mind is that how did this novel outbreak start? It seems that it all started from a Wuhan seafood market where wild animals, both dead and living, including birds, rabbit, bats and snakes are sold. Such markets create high risk of viruses jumping from animal to human because standards of hygiene are difficult to maintain if animals are being kept and butchered at the same place. The markets are also densely packed letting the disease to spread from species to species. The source of virus has not yet identified but original host is thought to be bats, even though they do not typically transmit coronavirus directly to humans. Instead, the transmission might occur via an “intermediary” animal.³ On December 31, 2019, WHO’s China office heard its first case of previously- unknown virus. Although, China took aggressive steps to stop the outbreak like shutting down the transportation, suspending public gathering etc. Government officials isolated sick people and aggressively tracked their contacts and made a dedicated network of hospitals to test the virus. For most of the people, Coronavirus appears to be mild. And it takes around 5 to 14 days to show symptoms, if it does it all. Unfortunately, that

¹ *Coronavirus*, WORLD HEALTH ORGANIZATION, https://www.who.int/health-topics/coronavirus#tab=tab_1.

² *WHO Director- General’s opening remarks at the media briefing on Covid-19 – 11 March*, WORLD HEALTH ORGANIZATION, <https://www.who.int/dg/speeches/detail/who->

director-general-s-opening-remarks-at-the-media-briefing-on-covid-19---11-march-2020.

³ *Novel Coronavirus: Your questions, answered*, MEDICAL NEWS TODAY, <https://www.medicalnewstoday.com/articles/novel-coronavirus-your-questions-answered>.



is exactly what makes it so dangerous. In the period when an infected person is mildly ill, he could transmit the virus to dozens of other people through water droplets discharged by coughs and sneezes. But what started as an epidemic in China has now become truly global pandemic. There have been now over 17,05,766 reported cases and over 1,03,230 deaths.⁴ One person known as “Patient 31” in South Korea, transmitted the virus to over 1,100 people as she went on with her life.⁵ In March, the World Health Organization says, the new epicenter of the pandemic is Europe, which has more new reported cases each day than China did at the peak of its outbreak. Italy was the first European country after China to report a serious domestic outbreak. Italy has now 1,47,577 reported cases and the government immediately took some serious measures like schools were shut down, partial lockdown was imposed and public gatherings were banned. But the government has often acted erratically like it failed to impose full lockdown in another area of Lombardy which has most cases now. While Italy has done more than 2,50,000 tests but it failed to put comprehensive strategy of tracking and self-isolation. With the population so large, the serious question is that could India, by learning from other countries mistakes and taking necessary measures, contain the outbreak? Although, the government took charge to fight against Covid-19 right from the beginning. When WHO declared

coronavirus pandemic, the government took no time and suspended all visas except for diplomats, official, employment and project visas from March 13.⁶ Travellers who were at risk were identified, quarantined, tested, their contacts were traced and quarantined. The government was involved from day one for staying well ahead of the invisible enemy and checking its spread. On March 19, 2020, the Prime Minister addressed the nation for the first-time regarding coronavirus and called for a 14-hours *janta curfew* on March 22. It came out to be huge success. And then he announced severe 21- days lockdown from March 25 and restrict all transport facilities including air, rail and roadways. The first flaw on the part of the government was that its strategy is not science- based and proactive but reactive. If it had been proactive, the government would have revealed to the public that how much diagnostic test kits, ventilators for patient-care, protective equipment for healthcare workers are on order or stockpiling? What are the plans for rapid construction of temporary hospital? Are beds, linens and sanitary on stockpile? The second flaw is that the government has put complete reliance on government-based health care institutions and hospitals, shunning out private institutions. Private health care institutions, with their hardware and software capacities were not invited from the beginning.⁷ The lockdown has also paralyzed virtually all

⁴ Covid- 19 Pandemic, WORLDOMETER, <https://www.worldometers.info/coronavirus/>.

⁵ Marco Hernandez, Simon Scarr and Manas Sharma, *The Korean clusters*, KOREA CENTRES FOR DISEASE CONTROL & PREVENTION; REUTERS, <https://graphics.reuters.com/CHINA-HEALTH-SOUTHKOREA-CLUSTERS/0100B5G33SB/index.html>.

⁶ Anindita Sanyal, *India suspends all tourist visas till April 15 over Coronavirus: 10 facts*, NDTV (March, 12,2020, 11:03 am IST), <https://www.ndtv.com/india-news/coronavirus-impact-visas-to-india-suspended-till-april-15-2193382>.

⁷ T Jacob Jones, *India's corona strategy is very amoebic*, THE HINDU (March 26,2020), <https://www.thehindubusinessline.com/opinion/indias>



commerce in the country, leaving many people struggling with basic requirements such as food and medicines. Preparing for the pandemic is not confined to the health and medical sector alone. It augments to the non-health sector also, by that means it requires complete preparedness measures. It is important to recognize all the essential and indispensable service providers and also to put together all the important provisions for their business continuity at the time of a pandemic or any biological disaster situation. The International Labour Organisation (ILO) in its report stated that in India, with the share of almost 90 percent of people working in the informal economy, about 400 million people are at risk of falling deeper into poverty during the crisis.⁸ Of all the people, poor has been hit the hardest. The enforcement of lockdown, should not put a halt to the services that are essential and indispensable in nature, thereby facilitating the continuation of such services amid the pandemic so that the people while following the measures of social distancing and quarantining are not deprived of any such essential services, further preventing unnecessary hoarding and chaos among the people. In one of the incidents, a daily wage-earning mother in Allahabad threw her five children into the Ganges before jumping herself due to hunger amid coronavirus.⁹ Millions of other daily wage earners are in a similar situation. The lockdown means that they are now facing no prospect of income.

Most do not have pension or any kind of insurance. Many of them do not have bank account, relying simply on cash to meet their daily needs. In rural areas of northern and eastern India, most men migrate to cities to earn a living in factories, construction sites and other businesses. The announcement of 21-days complete lockdown triggered a mass movement of hundreds of thousands of migrant workers from their places of work to their homes in villages across India because they know that they could not afford to stay in cities if they had no income and in a desperate attempt to reach their villages, they resorted to walking because lockdown does not permit travelling in vehicles and passenger trains were also closed. At least 22 people have died while trying to make home.¹⁰ The Centre has asked State government and Union territories administration to utilize the State Disaster Response Fund for providing food and shelter to migrant workers hit by the lockdown. The State and UTs were also told to communicate about the availability of free food and accommodation to workers through volunteers and public addresses. But is lockdown enough to stop a resurgence of cases? The Director General of WHO said that the lockdown, which is being implemented in several countries to combat Covid-19 is not enough and advice countries to take aggressive measures to find, isolate, test, treat and trace to prevent coronavirus.¹¹ National lockdown is necessary, but it is not

-corona-strategy-is-very-amoebic/article31165263.ece#.

⁸ *ILO Monitor 2nd edition: COVID-19 and the world of work*, ILO, Apr 7, 2020, at 6.

⁹ *UP woman throws her 5 kids into river before jumps in. Then she changes her mind*, HINDUSTAN TIMES (Apr 13, 2020, 13:16 IST), <https://www.thehindubusinessline.com/opinion/indias>

-corona-strategy-is-very-amoebic/article31165263.ece#.

¹⁰ *22 Migrant workers, Kin have died Trying to return Home since the lockdown started*, THE WIRE (Mar 20, 2020), <https://thewire.in/rights/coronavirus-national-lockdown-migrant-workers-dead>.

¹¹ *Lockdown is not enough to eradicate Covid-19 pandemic: WHO*, INDIA TODAY (Mar 26, 2020, 05:31 IST), indiatoday.in/world/story/coronavirus-



a cure. Managing the virus needs widespread testing, tracing system and isolation strategy which begins by firstly, randomizing testing of people in urban areas using voter ids. These can be slums or unauthorized colonies. If the virus takes root in such place then there is no stopping of it. Secondly, randomized testing of people who are allowed to move around during lockdown. These include sanitary workers, police officials, delivery person, vegetable vendors, pharmacists, media persons. And thirdly, randomized test of migrants who have returned home from cities. But testing alone will not eradicate the virus unless we are able to isolate infected people in local facilities. We also need to prepare health care facilities to take patients in larger numbers, even built hospitals and quarantine facilities in football fields, just like Assam is doing. The lockdown is time to prepare so that health care systems is not overwhelmed.

According to the Constitution of India, health and matters related to it are state subject.¹² The constitutional responsibility of dealing with biological disasters rests with the state government. The government by enforcing the legislations that govern and control the nation's health policies can prevent and contain the spread of infectious diseases. Unfortunately, the prime legal weapon that government holds is the Epidemic Disease Act of 1897¹³, which is a hastily drafted short

legislation to obstruct the bubonic plague often called the 'black death' that wrecked life in Mumbai in 1896. The Epidemic Diseases Act, 1897 is an act which provides for better prevention and spread of dangerous epidemic diseases¹⁴. This Act, still in force, gives the states the power to appoint any of its agencies or officers to take necessary measures for the prevention and control of such infectious diseases, epidemics or pandemics. Unfortunately, this Act does not give any authority to the Centre to make such measures or intervene in such biological emergencies such as a pandemic. Therefore, it shall be repealed. It shall be amended or substituted by an Act which not only takes care of the prevailing and foreseeable public health needs including emergencies such as bioterrorism attacks and use of biological weapons by an adversary, cross-border issues, and international spread of diseases¹⁵ but also, give enough powers to the central government, state governments and local authorities so that they can act with impunity and immunity, notify the affected areas, restrict the movement in the affected areas or quarantine such an area and enter any premises or establishment to take samples of suspected materials and seal them. The legal shortcoming to tackle with infectious or contagious disease outbreaks was known for a long time but instead of coming up with an integrated act, baby steps were taken. The country was not fully prepared to tackle with

lockdown-not-enough-eradicate-covid-19-pandemic-take-measures-who-1659772-2020-03-26.

¹²The Constitution of India, 1950, Schedule VII, List-II, State List, Item 6. (Public health and sanitation; hospitals and dispensaries).

¹³ *The Epidemic Diseases Act, 1897*. [Act No. 3 of 1897 dated 4th. February, 1897].

¹⁴ Statement of Object & Reasons of The Epidemic Diseases Act, 1897, (An Act to provide for the better

prevention of the spread of Dangerous Epidemic Diseases.).

¹⁵ NATIONAL DISASTER MANAGEMENT GUIDELINES—MANAGEMENT OF BIOLOGICAL DISASTERS, 2008. A publication of National Disaster Management Authority, Government of India. ISBN 978-81-906483-6-3, July 2008, New Delhi.



another pandemic which disputably is the severest since the 1918 influenza pandemic which killed around seven to eight million people in the country.¹⁶ The Management of Biological Disaster Guidelines, 2008 drafted by the Centre pointed out the inadequacy of the abovementioned act to deal with the pandemic. During the first term of Modi's government, with the help of Health and Family Welfare Ministry a draft was made, namely, Public Health (Prevention, Control and Management of Epidemics, Bio-terrorism and Disasters) Bill, 2017 proposing the repeal of the epidemic law of 1897. The bill so drafted explains the terms quarantining of suspects and isolation of the infected persons clearly. It also empowers the Centre to direct state governments and district or local bodies and it bestows power to states under Section 3¹⁷ to issue any order related to public health measure it is found to be "expedient and in public interests" to do so. In addition to it, it also instilled a provision saying that anyone intentionally violating the law could end up with a punishment comprising of fine of up to 1 lakh and imprisonment of up to two years.

The Public Health Emergencies Bill was drafted by MoH&FW and was intended to replace the Epidemic Diseases Act, 1897 and provide for effective management of public health emergencies. But the draft is presently going through some modifications. So, under the current laws, relevant provisions of the

Indian Penal Code (IPC) and Criminal Procedure Code (CrPC) can be invoked to detain and question persons involved in criminal acts, or can be applied for establishing law and order, enforcing quarantine, etc. Police can charge someone under IPC's Section 269 for negligent act, under Section 270 for malignant act for spreading an infectious disease which is dangerous to life and under section 188 for showing disobedience to order duly promulgated by public servant. In addition to the bill, the legislations governing the health policies, gives certain powers to different levels of the government. The 73rd Constitutional Amendment on Panchayati Raj Institutions (PRIs)¹⁹ provides for setting up a three-tiered structure of governance at district, block and village level. Health is a subject matter that can be acted upon by PRIs. The amendment mandates setting up of health and sanitation committees in each village, the most peripheral body at the grass-root level, to take decisions on health matters for the community. The municipal Acts are civic. The Acts provide for the provision of safe drinking water, hygiene and sanitation, food safety, notification and control of diseases, and public health concerns, including containment of outbreaks.

On the other hand, the Act providing for effective management of disasters, the Disaster Management Act, 2005 seeks to establish mechanisms at the national, state

¹⁶ CENTRES FOR DISEASE CONTROL AND PREVENTION, National Centre for Immunization and Respiratory Diseases (NCIRD).

¹⁷ Public Health (Prevention, Control and Management of Epidemics, Bio-terrorism and Disasters) Bill, 2017, §3(Power of State Government or Union territories Territories or District/ or Local authority.).

¹⁸ Public Health (Prevention, Control and Management of Epidemics, Bio-terrorism and Disasters) Bill, 2017, §5(Penalty).

¹⁹ The Constitution of India, 1950, Schedule XI, Art. 243G, Entry 23 (Health and sanitation, including hospitals, primary health centres and dispensaries.), *inserted vide* The Constitution (Seventy-third Amendment) Act, 1992 (w.e.f. 20th April, 1993).



and district levels, to plan, prepare and ensure a rapid response to both natural calamities and man-made disasters/accidents. Under Section 6 of the Disaster Management Act, 2005²⁰, which defines the powers and functions of National Authority, National Disaster Management Authority (hereinafter referred to as “NDMA”) is inter alia mandated to issue certain guidelines for formulating action plans for synchronized and holistic management of all disasters which include biological disasters, such as epidemics, pandemics, accidental release of virulent microorganisms and Bioterrorism. The guidelines prepared by the national authority for the management of such biological disasters focuses on prevention, preparedness, mitigation, medical response, and relief of such aspects. These guidelines will form the basis for policies or action plans carried out by the central ministries and departments concerned. Ministry of Health and Family Welfare (hereinafter referred to as “MoH&FW”) is the nodal ministry for

handling pandemics. Now, during such biological disasters this can be achieved only through strict conformity and compliance with the existing and new policies and also with the proactive involvement of all the sectors. It will include the development of such specialized measures that concerns with the management of such epidemics or as the case suggests pandemics.

The policies, programmes and action plans formulated by the government at central, state and district level need to be supported by appropriate legal instruments, wherever necessary, for effective management of the outbreak and appropriate legal actions must also be taken on the offenders of the lockdown. When the Prime Minister announced a 21-day lockdown in India to contain the spread of coronavirus, the government also invoked Section 51 of the Disaster Management Act 2005, which mandates up to two years of imprisonment²¹, if the Centre’s guidelines on the lockdown

²⁰ 6. Powers and functions of National Authority.—
 (1) Subject to the provisions of this Act, the National Authority shall have the responsibility for laying down the policies, plans and guidelines for disaster management for ensuring timely and effective response to disaster. (2) Without prejudice to generality of the provisions contained in sub-section (1), the National Authority may — (a) lay down policies on disaster management; (b) approve the National Plan; (c) approve plans prepared by the Ministries or Departments of the Government of India in accordance with the National Plan; (d) lay down guidelines to be followed by the State Authorities in drawing up the State Plan; (e) lay down guidelines to be followed by the different Ministries or Departments of the Government of India for the purpose of integrating the measures for prevention of disaster or the mitigation of its effects in their development plans and projects; (f) coordinate the enforcement and implementation of the policy and plan for disaster management; (g) recommend provision of funds for the purpose of mitigation; (h) provide such support to

other countries affected by major disasters as may be determined by the Central Government; (i) take such other measures for the prevention of disaster, or the mitigation, or preparedness and capacity building for dealing with the threatening disaster situation or disaster as it may consider necessary; (j) lay down broad policies and guidelines for the functioning of the National Institute of Disaster Management. (3) The Chairperson of the National Authority shall, in the case of emergency, have power to exercise all or any of the powers of the National Authority but exercise of such powers shall be subject to ex post facto ratification by the National Authority.

²¹ 51. Punishment for obstruction, etc.—Whoever, without reasonable cause,

(a) obstructs any officer or employee of the Central Government or the State Government, or a person authorised by the National Authority or State Authority or District Authority in the discharge of his functions under this Act; or

(b) refuses to comply with any direction given by or on behalf of the Central Government or the State



are violated. Spread of communicable diseases as we all know by now in almost many conditions and situations can be prevented or controlled by adopting social distancing measures, isolation and quarantining.

Due to this outbreak there has been a build-up towards educating people that social-distancing is necessary, but unfortunately, we have seen that religious and non-religious gatherings continue to take place. Despite the orders of the government, over 2000 people had gathered in Nizamuddin Markaz for Tablighi Jamaat event, they did not inform the Health Department or any other government agency about the huge gathering inside the Markaz and deliberately disobeyed government orders. The Tablighi Jamaat, is an Islamic non-political organization which is highlighted for being the hotspot of novel coronavirus in every corner of the nation. As at least 2,000 people across the country as well as foreign nations such as Indonesia, Malaysia, Thailand, Nepal, Myanmar, Bangladesh, Sri Lanka and Kyrgyzstan had attended the religious congregation at its headquarter in Nizamuddin area of Delhi²².

The Tablighi Jamaat was birthed in the ace of another great pandemic, the most dangerous in the Indian history of epidemic. The plague

of 1896-1925, and the great influenza of 1918-1919, had claimed millions of lives. Jammat is a non-political global Sunni Islamic missionary with its headquarter and roots in India whose basic purpose is to rev up every Muslim to be more religiously observant. The Tablighi Jamaat means society of preachers was founded by a Deobandi Islamic scholar Muhammad Ilyas al-Kandhlawi in Mewat, India, in 1926. The organization grew fast in British India. In its annual conference held in November 1941. After Partition, it grew stronger in Pakistan and East Pakistan (lately Bangladesh). The group has presence in 150 countries and millions of followers.²³ According to the schooling of the Tablighi Jamaat, the reformation of a person and of society is achieved by the medium of personal spiritual renewal. Organization's pillars of faith are *kalmia* (belief in Allah), *salah* (daily prayers) and *dawah* (preaching the message of Allah). Male tablighi grow beards, wear kurtas and white robes, while women cover themselves in public and typically devote themselves to family and religious life. The tablighis are opposed to the syncretic nature of Sufi Islam and insist on its members to dress like the Prophet did. The focus of the organization is to engage Muslim people towards their religion and not on converting people from other faiths into Islam. Tablighi

Government or the National Executive Committee or the State Executive Committee or the District Authority under this Act, shall on conviction be punishable with imprisonment for a term which may extend to one year or with fine, or with both, and if such obstruction or refusal to comply with directions results in loss of lives or imminent danger thereof, shall on conviction be punishable with imprisonment for a term which may extend to two years.

²²Things to know about Tablighi Jamaat and Covid-19 controversy linked to it, INDIA TODAY(Apr 01,

2020 18:48 IST), <https://www.indiatoday.in/india/story/things-to-know-about-tablighi-jamaat-and-covid-19-controversy-linked-to-it-1662252-2020-04-01>.

²³Stanley Johny, *Explained. Who are Tablighi Jamaat*, THE HINDU (Apr 02,2020, 20:01IST), <https://www.thehindu.com/news/national/explained-who-are-the-tablighi-jamaat-the-organisation-at-the-epicentre-of-coronavirus-outbreak-in-india/article31238915.ece>.



adherents will go on a 40-day mission, or *chillah*, during which they preach to other Muslims, encouraging them to attend prayers at their mosque and listen to sermons. The mosques are used to support the efforts of the independent jamaat that undertake preaching missions.²⁴

The Tablighi Jamaat congregation at Delhi's Nizamuddin Markaz, from where numbers of cases have been confirmed, is the legitimate matter of utmost concern in our country and it definitely shouldn't have taken place when a pandemic was claiming lives by the thousands in the every corner of the globe and the stake of lives were at risk. The Ministry of Home Affairs confirmed that on 13 March, approx 3,000 people, among them foreigners from other Southeast Asian countries including Covid-19 hotspot Malaysia, who had taken part in a Tablighi Jamaat were gathered in the national capital's Nizamuddin area at markaz²⁵. In fact, the Jamaat has also been held responsible for having spread the virus to half a dozen nations in its February gathering in Malaysia, pilgrims from nearly 30 countries, gathered in Malaysia for spiritual renewal. Three weeks later, participants in the 16,000-strong gathering of the world's biggest Islamic missionary movement had spread the corona virus to half a dozen nations, creating the largest known viral vector in Southeast Asia. More than 620 people connected to the four-day conclave had tested positive in Malaysia.²⁶ Now if we talk about India, the

convention which had been go-ahead by the authorities of Delhi was attended by thousands of people and soon it became apparent that some of the attendees picked up COVID-19 and brought it back to towns and villages across India and now authorities fear that many thousands of people may have been exposed to the virus. We are not trying to fire up Islamophobia; as it will always be a *parti pris* topic that will need an almighty opposition. But right now the concern is if isn't ignorance or applesauce in the name of religion, then what it is? The ignorance which is committed weather by the Tablighi Jamaat, Baldev Singh or patient 31 of South Korea is equally questionable and is considered to be the crime against the humanity. As per the reports and headlines, the Sikh priest named 'Baldev Singh', a resident of Punjab had a travel history of Italy and Germany. He violated the home quarantine order after returning to India and attended the *Hola Mohalla* festival which had thousands of people and visited many houses to give his blessings. Out of the first 33 cases in Punjab, 32 were directly linked to Singh. From all of the cases discussed above, the question that comes to our mind is that why people have urges to gather in such huge numbers when the conditions are already critical in other parts of the world. Their orthodox movement and spiritual renewal have put the whole country at a greater risk, and we can't justify it by saying that other religions had also kept their doors open for a long time. It has also been reported that the

²⁴ Fred Burton and Scott Stewart, *Tablighi Jammats: An indirect line to terrorism*, STRATFOR (Jan 23, 2008, 14:48 GMT), <https://worldview.stratfor.com/article/tablighi-jamaat-indirect-line-terrorism>.

²⁵ Snehesh Alex Philip, *How Tablighi Jamaat emerged as the 'largest know' Covid-19 source in South Asia*,

THE PRINT (31 Mar, 2020 1:22 pm IST), <https://theprint.in/india/how-tablighi-jamaat-unknowingly-emerges-as-largest-known-covid-19-source-in-south-asia/391918/>.

²⁶ THE NEWYORK TIMES (Mar 20, 2020), <https://www.nytimes.com/2020/03/20/world/asia/coronavirus-malaysia-muslims-outbreak.html>.



gathering of people continued to live there even after 13th march, although Delhi government on 13 March, 2020, prohibited any such gathering of more than 200 people under the Epidemic Diseases Act, 1897, along with that, Delhi government also gave the orders, which prohibited religious gatherings of over 50 people from 16 March. Moreover, they also directed people coming from any Covid-19 affected country to self-isolate. Members of the Tablighi Jamaat in Nizamuddin violated both these directions. About 2,100 foreigners had visited India for Tablighi Jamaat activities since 1 January this year, of which approximately 216 were staying at the Nizamuddin Markaz in Delhi, apart from the 216 foreigners staying at the Nizamuddin Markaz 824, were dispersed in different parts of the country as on 21 March. Many Muslim scholars are urging to the people to call it a “mistake not conspiracy”, but what about the other innocent people of this country, who are going to be the real victim of their spiritual renewal process. According to the prediction of The Indian Institute of Management, using mathematical models, the Tablighi Jamaat congregation held at its headquarters in Delhi from 13-15 March will increase corona virus cases exponentially to 13,000 cases by 15 April and to more than 1,50,000 cases by the first week of May.²⁷ Who would be held liable if the prediction comes out to be true? Another question that comes to our mind is that did the authorities react late to the problem? Hundreds of foreigners poured into Delhi in the last week of February and first week of

March to attend Jamaat. They came to India on tourist visa, which does not allow them to conduct religion activities. A missionary visa is required for such work. Timely action by Delhi police, Delhi government and Central government could have prevented thousands of attendees from spreading the virus in India. Why did the officials did not subject to the foreigners to any medical checkups or quarantines them at the airport? It is certain that if the foreign attendees were screened and tested at the airport, then the virus could have been detected there. The Ministry of Affairs, on March 21, informed the State government about 824 foreigners who visited Markaz and then travelled to other states. But neither the government nor Delhi police made any efforts to stop the entry or vacate the premise²⁸. State police were also asked to identify people who were in Markaz and get them tested and quarantined. But it was only on March 29 that government rushed in to comb the Nizamuddin neighbourhood when reports of cases pouring out of Markaz. Also, another problem from the side of the government was that the orders issued by it are debatable, as they were vague and clearly did not mentioned which sort of event shall be prohibited and when the government issued 16th march order by that time event at Markaz had taken place. It seems like government in itself wasn't aware about its activity. In a statement home ministry said that 2,100 foreigners has visited India since 1st January for Tablighi Jammata activities.²⁹ By the first week of March it was already noted that the event Tablighi Jammata has

²⁷THE PRINT (8 Apr, 2020 11:02 am IST), <https://theprint.in/india/call-it-a-mistake-not-conspiracy-against-india-say-muslim-scholars-on-tablighi-jamaat-event/397319/>

²⁸ *Questions remain about How Delhi's Nizamuddin Became a Coronavirus hotspot*, THE WIRE(Apr 1,

2020),

<https://science.thewire.in/politics/government/delhis-nizamuddin-hotspot-coronavirus/>.

²⁹ THE QUINT (3 Mar,2020), thequint.com/news/india/2100-foreigners-in-india-for-tablighi-activities-this-year-mha.



been the hotspot of COVID-19 in Malaysia.³⁰ Still government did not cancel the international flights and gave permission to other foreign nationals to visit India including from the country which was affected by the COVID-19. While the Tablighi Jamaat should be held accountable, so as the Government who were aware of the event but did not act as they should have been. The foreign participants were allowed to enter India even after Malaysia had drawn the world's attention to the Tablighi Jamaat event there. The Tablighi Jamaat's gathering was located right next to the police station, yet the police did not act at any time. It is strange that members who have attended the gathering were allowed to return to their respective towns without any checks and quarantine, considering the number of cases has begun to rise. This is serious security lapse. The authorities of Jamaat were berated by the police authorities for large number of attendees still present at the Markaz but drew a blank when they sought help for moving everyone out given the suspension of rail services across India on March 21 and sealing of Delhi's border on 23. Ignorance can be done by anyone but no one can make an excuse and wash hands from the crime one has committed against the humanity. It could be anyone, the Jamaat, the celebrity Kanika Kapoor or the 45-year-old man who returned from Oman in Jaipur or the ill management by the government. They all are equally liable for being the spreader of virus. But the citizens of our country made things difficult for themselves and for the entire nation as

they all violated the rules, orders and mandatory quarantine. As a citizen of this country they had the duty to obey the guidelines- organization weren't supposed to have their annual spiritual renewal gathering, when WHO has already declared the deadly virus as pandemic; Kanika Kapoor was not supposed to hide her travel history from the authorities when she was asked; as well as the 45-year-old man who had returned from Oman, he was sent home with the instructions to quarantine himself. He allegedly continued to socialize for almost a week until he complained of a fever; tests showed that he was Covid-19-positive. Officials estimate that he alone met close to 200 people. And of the 32 members in his family, 11 have tested positive.³¹ Despite having the knowledge about the critical situation of the outbreak and the worldwide crisis caused by this corona virus outbreak, citizens of India are yet to wake up to the reality. Maxwell Pereira, Former joint police commissioner of Delhi even made a comment saying, "we Indians are a unique breed. We revel in being cowardly yet rebellious, finding our courage only when we are part of a mob." This insubordinate nature makes them find righteousness in breaking rules. They either violate the rules secretly or covertly when they believe that no one's looking, or they violate rules when they are in a crowd finding a false sense of strength. The only question we can ask ourselves is that, how do we as a citizens acknowledge and understand the critical or dire situation we are in, where any sort of contact with a

³⁰ *How a century old Indian muslim movement became malaysias covid-19 hotspot*, FMT NEWS (18 Mar, 2020 7:30 AM), <https://www.freemalaysiatoday.com/category/nation/2020/03/18/how-a-century-old-indian-muslim-movement-became-malaysias-covid-19-hotspot/>.

³¹ THE PRINT (9 Apr, 2020 3:42 pm IST), <https://theprint.in/india/super-spreader-infects-nearly-100-people-in-jaipur-rajasthan-gets-second-covid-19-hotspot/398537/>.



stranger carrying the deadly infectious virus could supposedly result in several deaths? The lockdown to be effective needs far more data, information and messaging on the epidemiology. Also, we should not have vigilante threats and police taking action against those people who have a valid reason to be on the roads. The former joint police commissioner of Delhi also suggested that only fear of punishment or a considerable amount of penalty can keep them in the lockdown and not violate it unnecessarily. The community will be greatly empowered if the knowledge of the risk is communicated to them. Given the level of literacy in some states, to have a successful communication, it needs planning, trained manpower, an understanding of communication protocols, proper messaging and the media and also the ability to manage the flow of information. What we most certainly need is strong and firm messages from the influencers and the people who are widely respected. The health and medical fraternity, political leaders, civil society heads and religious community, leaders must be seen via television or on social media, asking and requesting people to stay home. If our best can beat empty containers because our leader asked us to, it leaves no reason for us to believe why we will not heed his order for isolation. While many leaders, politicians and officials consider that persuasion is the best and suitable way to make people obey the government's guidelines and orders of social distancing, fear of real punishment is perhaps the only thing that works for some people. Punishing the offenders of orders of government to set examples will not harm. The Tablighi Jamaat who allegedly violated the government

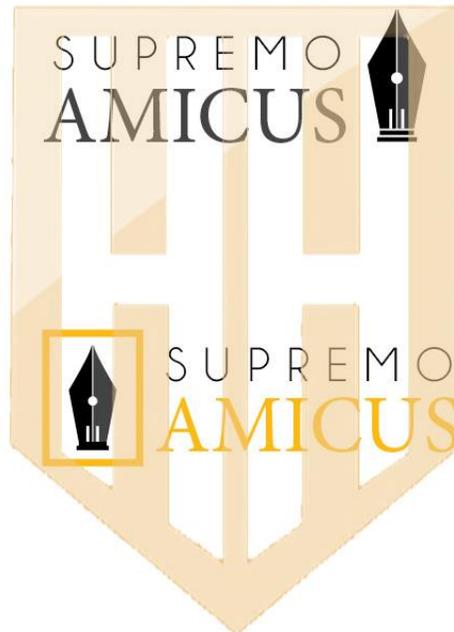
directions given to the management of Markaz in Basti Nizamuddin regarding the restrictions on social, political and religious gathering and for taking safety measures, including social distancing for prevention and treatment of the infection shall be held liable to the entire nation and appropriate legal actions must be taken, mere persuasion would not make things better at hand. In this regard, An FIR has been lodged by the Delhi Police Crime Branch against seven people, including the cleric, on a complaint by SHO Nizamuddin for holding a religious congregation here purportedly in violation of the lockdown orders of the government and not maintaining social distancing to contain the spread of coronavirus under Section 3³² describing penalty for the offence of the Epidemic Disease Act 1897 and Sections 269 Negligent act likely to spread infection of disease, 270 malignant act likely to spread infection of disease, 271 disobedience to quarantine rule and 120b punishment of criminal conspiracy of the Indian Penal Code. Discipline has to be a part of national character, especially during this pandemic. However, the real question that comes to mind is whether India can bear the burden of lives lost, economic turmoil and a crumble of a weak public healthcare system during this period? It is mandatory for the citizens to understand this aspect and assume their responsibility. Coercion, requests, and appeals by the governing bodies have to be paid attention to with all seriousness. Adoption of punitive measures is an extreme paradigm but justifiable for the greater good of the community in such scenario. Social distancing is every citizen's singular responsibility to keep himself, his closed

³² 3. Penalty. Any person disobeying any regulation or order made under this Act shall be deemed to have

committed an offence punishable under section 188 of the Indian Penal Code (45 of 1860).



ones and the society safe, if it is enforced and is within the legal limits and the established laws of the land. It is deemed to be appropriate to begin with convincing along with widespread education and counselling. However, if the persuasion does not work or isn't enough, then considering the fact that section 144³³ is already been imposed, action against offenders must be taken under section 188³⁴ of the Indian Penal Code, along with section 269 and section 270 of the penal code. There should be no hesitation in taking necessary legal action as it is in the larger interest of the people.



³³ The Indian Penal Code, 1860, §144 (Joining unlawful assembly armed with deadly weapon.).

³⁴ The Indian Penal Code, 1869, §188 (Disobedience to order duly promulgated by public servant.).