

How to Cite:

Shrivastava, A., & Chakole, S. (2022). COVID 19 pandemic and laws during it. *International Journal of Health Sciences*, 6(S3), 1041–1049.
<https://doi.org/10.53730/ijhs.v6nS3.5062>

COVID 19 Pandemic and Laws During It

Arteeka Shrivastava

Intern, Dept. of Community Medicine, Jawaharlal Nehru Medical College, Datta Meghe Institute of Medical Sciences (Deemed to be University), Sawangi (Meghe), Wardha-442001, Maharashtra, India
Email: arteeka.shrivastava@gmail.com

Swaroop Chakole

Professor, Dept. of Community Medicine, Jawaharlal Nehru Medical College, Datta Meghe Institute of Medical Sciences (Deemed to be University), Sawangi (Meghe), Wardha-442001, Maharashtra, India
Email: drswaroopachakole@gmail.com

Abstract--- Coronavirus disease 2019 or COVID-19 is the fatal disease which is spreading all across the world. Multispectral impact can be seen on people's lives most of them is adverse and negative impact. COVID-19 is tackled by preventive measures and it needs the backing of laws and regulation to strengthen the fight against COVID-19. Various laws are invoked and needs to be revisited and followed in letter and spirit. The laws which invoked in the COVID-19 pandemic must have some checks and balancing mechanism most suitable a judicial oversight or supervision to properly and justly implement the law. Vaccine hesitancy can be seen among people as many anti-social elements are spreading lies about the dosages of vaccine. Therefore proper care needs to be taken care of such elements. Necessary changes in laws must be made in order to keep them relevant in modern times.

Keywords--- pandemic, coronavirus, laws, disaster management act, epidemic diseases act.

Introduction

The coronavirus disease 2019 or COVID-19 has been spreading wildly in almost all the inhabitable parts of the earth. Multispectral impact can be seen on people's lives most of them is adverse and negative impact. The high virulent nature and capacity of producing extremely lethal clinical outcome are the factors which makes it the unprecedented event in the history of human civilization. As of January 27, 2021, 99,638,507 infection cases has been reported from all

International Journal of Health Sciences ISSN 2550-6978 E-ISSN 2550-696X © 2022.

Corresponding author: Chakole, S.; Email: drswaroopachakole@gmail.com

Manuscript submitted: 27 Nov 2021, Manuscript revised: 09 Feb 2022, Accepted for publication: 18 March 2022

across the world and 2,141,468 people lost their lives due to COVID-19 related complications(1). The extent was so huge that World Health Organization has to declare then COVID-19 as pandemic in the month of March 2020(2). The case fatalities are so huge that no other event was proven as deadly as COVID-19 in almost past hundred years of human history.(3) The case fatality rate is low and hanging around one and two percent but the numbers are huge and recently surpassed the unfortunate milestone of two million. United States of America, India, Brazil, Russian federation, United Kingdom and France are the top countries reeling under pressure of case infection and fatalities(4). The new and mutated strain reported from United Kingdom and South Africa has been successful in creating fear and thoughts are being given to re imposition of preventive measures like lockdown. The COVID-19 is unprecedented disease pandemic and needs unprecedented measures to tackle its spread. Guidelines which have statutory and legal backing are found to be useful in such times of crisis. It helps in coordinating between various agencies and work on mission mode. Various such laws are already there and mere invoking them was necessary. Disaster management act of 2005 is still invoked and work is being done under this act. Various emergency funds can be accessed to be used in mitigation measures. Archaic laws such epidemic diseases act of 1898 and various other acts were also helpful. Though these acts saw amendment at regular interval of time. Infodemic is the serious issue and to tackle the menace of fake news there are some provisions in different laws which can be imposed on someone doing unlawful acts. Information Technology act of 2000 is the frontrunner among them. This and many such acts which are invoked in COVID-19 pandemic are comprehensively overview in this article.

Disaster management ACT 2005

Disasters are unpredictable and their mitigation is a challenge. Various disasters from earthquakes to landslides and from avalanches to volcanic eruption occurs regularly in every part of the world. The disaster management is the crucial aspect from detecting and forecasting some of the disasters like cyclones and cloud burst to being resilient for some disasters like earthquakes which are extremely difficult to predict. Handling post disaster situation and planning the pre disaster scenario can reduce tremendous amount of money and muscle power. A quick response during and after disaster can make the situation and losses can be easily minimized. Coordinated efforts and citizen participation along with guidelines issued at time to time can ensures effective results. This can be done through properly placed rules by some legislation and enactment of law. There was practically no regulation before the disaster management act of 2005 came in to being. In India disaster management act 2005 was prompted by several unfortunate disasters which crated more ruckus and enhanced the need of such a law. From 1993 earthquake in Maharashtra state to 2002 Bhuj earthquake in Gujarat state.

After that the strike of tsunami after earthquake near Indonesia created major damages across the country. Many people lost their lives and loss of property was on another scale. Transport and communications were disrupted and widespread casualties was reported. Part of losses could have been easily avoided by enacting some legislation which list the standard operating procedure. The disaster

management act of 2005 does the same. The disaster management authority was constituted at each governing level starting from block level to district level and then state and national level. Prime minister of India directly monitors the work and machinery and gives necessary orders for coordination(5). But the local participation is a must as they are the first responders to the calamity. Trained local people for every scenario help out themselves as well as others as they know the terrain very well and responding agencies can take time to arrive at the situation. As the COVID-19 struck all over the world, the need of coordinated efforts was felt and that was the only way in dealing with the COVID-19 pandemic.

Therefore COVID-19 was declared as notified disaster and then it was treated as disaster and all the clauses of the disaster management act 2005 were invoked which is active till date. Disaster management cover multispectral efforts to contain disaster and a well oil machinery is in place to readily act on the notice. Ministry of home affairs is the nodal ministry through which all the executive decisions are made. In the second week of March, COVID-19 was declared as notified disaster. As per the separation of power under seventh schedule of constitution of India, Epidemics and disease outbreaks are covered under concurrent list which means that both center and state may invoke appropriate measures for the containment of the outbreaks. The disaster management act has mandate to effectively manage the disaster. Under national disaster management authorities the COVID-19 is covered under the ambit of biological disaster. A detailed management plan was recently unveiled by the NDMA in 2019 to tackle the health emergency situations.

The central government has extensive overriding powers during the invocation of this act. Central governments authorities have power to issue any order to contain the disaster to any public and private body in the whole country. And then it is the duty of the state disaster management authority and lower agencies to follow that order. Under section 6 and sub section 3, prime minister who heads the NDMA gets all powers and directs competent authorities to take certain steps which must be followed by it. The order dated March 24, 2020, applied the disaster management act until further notice. Under section 6 sun section 2(i) of the act NDMA mandates all agencies to prevent the COVID-19 from spreading by various measures. At the functions level of districts, district magistrates have sweeping powers on almost all public related activities. He or she can order closure of any non-essential facilities, banning congregation whether social or religious and can impose prohibitory orders on any type of gatherings. After the invocation of this act the government gets access to the funds which can be used to tackle the disaster.

There national disaster response fund at national levels and also have counterparts at state and district levels. Considering the huge population of India, there are some administrative challenges to enforce the law. There are some news about law enforcement agency excesses during lockdown o particularly on migrant laborers, daily wagers and returnees due to concentration of powers. Effective implementation can be ensured by proper monitoring of the situation. Under section 35 of the act, central government has already constitutes committees of the secretaries to monitor worst hit areas of the country due to

COVID-19. There are penalties listed under section 51 to 60 of disaster management act which are for defiance of the imposed rules. There provisions of up to one year jail term or fine or both and if the act results in loss of any life then the jail term can increased up to two years and fine. Under section 54, rumors or false alarm raisers which results in panic situation then upon courts conviction the person may ends up in jail for one year. Black marketing during distress and calamity time can fetch up to two year jail term or fine or both under section 53 of the disaster management act. There are some checks for law enforcement agencies too. Failing to comply with orders or defiance of duty can fetch up to one year of jail term or fine or both under section 56 of the act. NDMA is empowered to requisitioning of any building which is seems necessary to aid the efforts of containment under section 57, failing to comply to it may fetch jail term of one year or fine or both(6).

Epidemic diseases ACT 1897

As the title is telling that this epidemic act was enacted in 1897, almost more than hundred years ago. This was also came into force after the pandemic started raging through various regions. In fact, when this law was enacted, the country of India was under British imperialism and colonialism. Britisher's enacted and enforce this law. The context was that there was widespread epidemic of bubonic plague and lots of people were affected by the lethal disease back by then. But unfortunately Britisher's were unsuccessful in controlling the plague outbreak which predominantly raging in erstwhile Bombay state of British India. There has been debate that there is no clear definition of dangerous epidemic disease outbreak and it is up to governmental agencies that which disease should be considered as one. Ideally the classification of various disease, be it viral fever or pandemic like COVID-19, must be on scientific analysis and empirical data which would provide depth to the efforts and would in turn prove efficient. Various sections of Indian Penal Code 1860 has been invoked along with this act to aid the containment efforts. Some antisocial elements in the initial days of the pandemic, started to spread fake news about doctors.

Many incidents of violence and abuses were registered by doctors. Widespread and unfair discrimination was happening against doctor as they were treating the COVID-19 patients which is a highly virulent and lethal disease pandemic. Even some evictions and refusal to reside was invoked to prohibit doctors to enter in their own houses. This was highly unfair and condemnable as they are the first responders and are front line warriors in war against COVID-19. On the contrary they must be applauded and felicitated for their grate service to the nation and to humanity as a whole(7). Therefore to incorporate some penal action to deter these anti-social elements attacking doctors and allied health care professionals, government of India came with amendment in Epidemic disease act, which was highly welcomed in all strata of the society and naturally regained their confidence and got working back with same vigor to defeat the viral spread. The amendment includes stringent and hefty penalties along with imprisonment to those who do such punishable offense. But certain anomalies of epidemic disease act can be addressed after pandemic is over such as rights of citizens during pandemic, incorporation of clause containing effective management and monitoring of the ground condition steps taken under this act. Multilevel

coordination with various other agencies whose work overlaps with each other such as national center for disease control and many more.

Epidemic disease act just contains four sections and needs to be elaborately describes to minimize discretionary power and should be formulated according to current and contemporary situations leaving some leeway to changes in future according to future circumstances. The first two section describes broadly the definition of the diseases outbreak and special powers of central and state governments to formulate new and viable rules for containment. There is punishment provision in this act. Under section 3, defiance of epidemic diseases act 1897 may fetch up to six months of jail term or one thousand Indian rupees fine or both. The last section that is section 4 provides certain degree of protection to the authorities that are implementing this act(8).

Indian penal code 1860

Under section 188 of the IPC, any violation of the administrative order in this case of COVID-19 which is lockdown may fetch punishment. Specific orders are issued in each and every district must be followed as they can vary from district to district. An order can be promulgated by the public or civil servant which should be related to public property or law and order, or to contain any situation must be followed by everyone upon which this order is applicable. Any disobedience or annoyance or defiance of this order may fetch punishment. Penalty upon convictions may fetch prison time of one month or fine or both. If the act threatens the human lives or other people or proved fatal then the jail term can increased up to six months along with fine 1000 INR.

Section 269 of the Indian Penal Code 1860 is a specific section covering the negligence of person in spreading and disease which is harmful to others and can cause chaotic situations. Diseases such as COVID-19 which are highly virulent and lethal at the same time, are covered under this section. Spreading such diseases negligently can fetch punishment. A proviso of six month of jail time or fine or both the provisos can be imposed upon conviction. For example If a person has COVID-19 and still roaming with the viral load in a public transport without using any preventive measures and informing the authorities is liable under this section as it undermines the health of surrounding persons. Similarly, the section 270 deals with malignant nature of spreading act of the infectious disease which can create the threat to human life(9).

Section 271 of IPC 1860 deals with violation of quarantine rules and states that any person disobeys or defies the rules made for isolation or quarantine in any circumstances made by the state or union government or any competent authority may be liable for appropriate punishment and sentence can be announce upon conviction. Another very important section from criminal procedure code 1898 is section 144. It is a prohibitory order issues by district magistrate or other comparable and competent authority in a particular area for particular period of time. Prohibition on any gathering above certain number of people can be imposed on people residing in a particular area or region. Defiance of which can fetch arrest by law enforcement agencies for creating hindrance in governmental process. This a coercive measure to ensure social distancing

particularly in hard hit area by COVID-19 as it is a highly virulent pathogenic disease(10).

Infodemic and related laws

Infodemic as the World Health Organization (WHO) termed it is the indiscriminate flow of unauthorized and unauthenticated false news across the internet and social media networks which are creating more ruckus in addition to COVID-19. Hence it is also called as pandemic in pandemic. The expanse and extent of the Infodemic is so huge that comparable amount of damage can be created by it. Disruptions in social harmony and various other adverse impacts are reportedly covered under Infodemic. Already the resources are strained and major chunk of the resources are diverted to containment of COVID-19. If this Infodemic gains more ground then it will be difficult for agencies to fight on two front at same time with limited resources. In the initial days, the scare of lack of food and ration supplies took up the people and they started hoarding stuffs which then sky rocketed the prices in inflation went up. This was felt mainly by poorer and vulnerable sections as they were unable to afford things. In reality there was no scarcity of any daily needs and this rumor came to be known as false. Doctors were targeted by certain ill-informed people on the basis of social media message and medical professionals were highly threatened. Later it was also found to be sourced in such Infodemic aspect. Therefore it is important to keep some deterrence and laws must be invoked so as to tackle this Infodemic mess.

Several sections of different laws are connected and invoke to deal with this rumor mongering's. Section 505 subsection 1 of Indian Penal Code 1860 provides punishment and sentence for circulation or publishing such information which is false and which crates unrest and chaos among society or between groups of section. It can be up to three years of imprisonment or fine or both. As the digital evolution has already kicked in, all the information flows seamlessly by one click. Therefore it is important to bring the technology in laws ambit to maintain checks and balances upon the same. The information technology act of 2000 covers this aspect. Many mis information and rumors are now spread through mobile phones and social media networks. Therefore digital misuse is covered in IT act of 2000. Section 66 subsection d deals of personation on the digital device like personal computers or mobile phones. Provision of jail term extending up to 3 years and fine of up to one lakh rupees can be imposed on the convicted person under this section. Disaster management act of 2005 categorically mentions under section 54 of the said act that any circulation of false news or alarm that can create panic among larger masses is liable to be punished with up to one year jail term and fine(11).

Other related acts in COVID-19 pandemic

Other laws which was also used to tackle the allied impact of the COVID-19 pandemic. The essential commodities act of 1955 was used to tackle the hoarding and shortage of any essential commodities such as foods and also the inclusion of face mask and personal and protective equipment was important as the prices shot up for these products exponentially(12). As the public health is atopic which is included under the state list of separation of powers, many governments'

invoked local laws to deal with the situation. But the overriding powers remains with the union as the invocation of disaster management act 2005 provides leeway to the union government to issue overriding directions(13). Related studies were reported by Mahapatra et. al.(14), Mandwar et. al (15) and Mehta et. al (16). Nanotkar et. al. emphasized on importance of social distancing(17). Patil et. al. reported on impact of COVID pandemic on adaptive learning strategies in medical education system(18). Related articles were reported by Patnaik et. al. (19), Quazi et. al (20) and Joseph et. al.(21). Gaidhane et. al. reported a study on depression, anxiety and stress among the general population in the time of covid-19 lockdown (22). Lakhkar et. al. reported on impact of COVID on children and pregnant women (23). Effects of Covid on migrated population were quite alarming (24-28).

Conclusion

COVID-19 needs to be tackled by laws and preventive measures. All the coercive measures must be under proper checks and balances and any excess must be avoided in order to be fair and helpful in the distressing time of pandemic. Vaccine hesitancy can be seen among people as many anti-social elements are spreading lies about the dosages of vaccine. Therefore proper care needs to be taken care of such elements. Necessary changes in laws must be made in order to keep them relevant in modern times.

References

1. COVID-19 Map - Johns Hopkins Coronavirus Resource Center [Internet]. [cited 2021 Jan 27]. Available from: <https://coronavirus.jhu.edu/map.html>
2. WHO Director-General's opening remarks at the media briefing on COVID-19 - 11 March 2020.pdf.
3. Dushyant Bawiskar, Pratik Phansopkar, Ayurva Vilas Gotmare. COVID-19 Facets: Pandemics, Curse and Humanity. *Int J Res Pharm Sci.* 2020 Aug 6;11(SPL1):385–90.
4. WHO Coronavirus Disease (COVID-19) Dashboard [Internet]. [cited 2021 Jan 27]. Available from: <https://covid19.who.int>
5. Home | National Disaster Management Authority, Government of India [Internet]. [cited 2021 Jan 26]. Available from: <https://ndma.gov.in/>
6. Setya AK. Being Legally Sound in the COVID-19 Era. *J Dig Endosc* [Internet]. 2020 Mar [cited 2021 Jan 27];11(1):83–6. Available from: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7295277/>
7. Ghosh A, Nundy S, Mallick TK. How India is dealing with COVID-19 pandemic. *Sens Int* [Internet]. 2020 [cited 2021 Jan 26];1:100021. Available from: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7376361/>
8. Rakesh PS. The Epidemic Diseases Act of 1897: public health relevance in the current scenario. *Indian J Med Ethics.* 2016 Sep;1(3):156–60.
9. Indian Penal Code, 1860. It is expedient to provide a general Penal Code for india [Internet]. 1860 Oct 6 [cited 2021 Jan 27]; Available from: <http://indiacode.nic.in/handle/123456789/2263>
10. On the Legal Front, How Prepared Is India for the Next Public Health Emergency? [Internet]. *The Wire.* [cited 2021 Jan 26]. Available from: <https://thewire.in/law/india-covid-19-legally-prepared-next-pandemic-epidemic>

11. Information Technology Act 2000 | Ministry of Electronics and Information Technology, Government of India [Internet]. [cited 2021 Jan 27]. Available from: <https://www.meity.gov.in/content/information-technology-act-2000>
12. Govt brings masks and hand sanitizers under the Essential Commodities Act [Internet]. [cited 2021 Jan 27]. Available from: <https://pib.gov.in/newsite/PrintRelease.aspx?relid=200239>
13. Essential Commodities Act, 1955. An Act to provide, in the interest of the general public, for the control of the production, supply and distribution of, and trade and commerce, in certain commodities [Internet]. 1955 Apr 1 [cited 2021 Jan 27]; Available from: <http://indiacode.nic.in/handle/123456789/1579>.
14. Mahapatra, J., and P. Nikhade. "Covid-19: A Pandemic Situation." *International Journal of Research in Pharmaceutical Sciences* 11, no. Special Issue 1 (2020): 787–95. <https://doi.org/10.26452/ijrps.v11iSPL1.3084>.
15. Buran, T., Sanem Gökçe Merve Kılınç, & Elmas Kasap. (2020). Prevalence of Extraintestinal Manifestations of Ulcerative Colitis Patients in Turkey: Community-Based Monocentric Observational Study. *Clinical Medicine and Medical Research*, 1(2), 39-46. <https://doi.org/10.52845/CMMR/2020v1i2a8>
16. Mandwar, S., S. Dharampuria, G. Nimbalkar, K.G. Chhabra, and A. Reche. "Misconceptions and Myths about COVID-19." *International Journal of Research in Pharmaceutical Sciences* 11, no. Special Issue 1 (2020): 1319–22. <https://doi.org/10.26452/ijrps.v11iSPL1.3630>.
17. Mehta, J., S. Baliga, N. Thosar, N. Rathi, S. Jain, R. Srivastava, and R. Waykar. "Management of Pandemic Crisis: COVID-19." *International Journal of Research in Pharmaceutical Sciences* 11, no. Special Issue 1 (2020): 885–91. <https://doi.org/10.26452/ijrps.v11iSPL1.3110>.
18. Nanotkar, L., S. Dhanvij, and A. Joshi. "COVID-19 and Importance of Social Distancing." *Journal of Critical Reviews* 7, no. 8 (2020): 1103–4. <https://doi.org/10.31838/jcr.07.08.232>.
19. Daniel, V. ., & Daniel, K. (2020). Diabetic neuropathy: new perspectives on early diagnosis and treatments. *Journal of Current Diabetes Reports*, 1(1), 12–14. <https://doi.org/10.52845/JCDR/2020v1i1a3>
20. Patil, D., and W.M. Naqvi. "COVID-19 and Education System: Impact of Current Pandemic on Adaptive Learning Strategies in Medical Education System." *International Journal of Research in Pharmaceutical Sciences* 11, no. Special Issue 1 (2020): 403–6. <https://doi.org/10.26452/ijrps.v11iSPL1.2736>.
21. Patnaik, K.C., and D. Rajput. "Role of Antioxidant Herbs and Yoga Practices in Prevention of Infectious Diseases with Special Reference to Covid-19 Pandemic." *International Journal of Research in Pharmaceutical Sciences* 11, no. Special Issue 1 (2020): 317–22. <https://doi.org/10.26452/ijrps.v11iSPL1.2719>.
22. Daniel, V., & Daniel, K. (2020). Perception of Nurses' Work in Psychiatric Clinic. *Clinical Medicine Insights*, 1(1), 27-33. <https://doi.org/10.52845/CMI/2020v1i1a5>
23. Quazi, A.A., and M. Patil. "Measures of Preventing Covid-19 Transmission." *International Journal of Research in Pharmaceutical Sciences* 11, no. Special Issue 1 (2020): 1000–1007. <https://doi.org/10.26452/ijrps.v11iSPL1.3405>.
24. Joseph, M.B., S. Pohekar, A. Raut, and M. Patil. "The Palliative Care and Covid-19 Pandemic." *International Journal of Research in Pharmaceutical*

- Sciences 11, no. Special Issue 1 (2020): 618–22. <https://doi.org/10.26452/ijrps.v11iSPL1.2861>.
25. Daniel, V., & Daniel, K. (2020). Exercises training program: It's Effect on Muscle strength and Activity of daily living among elderly people. *Nursing and Midwifery*, 1(01), 19-23. <https://doi.org/10.52845/NM/2020v1i1a5>
 26. Gaidhane, S., N. Khatib, Q.S. Zahiruddin, A. Gaidhane, S. Telrandhe, and P. Godhiwal. "Depression, Anxiety and Stress among the General Population in the Time of COVID-19 Lockdown: A Cross-Sectional Study Protocol." *International Journal of Research in Pharmaceutical Sciences* 11, no. Special Issue 1 (2020): 360–64. <https://doi.org/10.26452/ijrps.v11iSPL1.2726>.
 27. Lakhkar, B.B., B. Guru, S. Damke, and S. Damke. "Most Susceptible Duo in COVID-19 Crisis: A Literature Review." *Perinatology* 21, no. 3 (2020): 112–23.
 28. Regmi, P.R., E. van Teijlingen, P. Mahato, N. Aryal, N. Jadhav, P. Simkhada, Q.S. Zahiruddin, and A. Gaidhane. "The Health of Nepali Migrants in India: A Qualitative Study of Lifestyles and Risks." *International Journal of Environmental Research and Public Health* 16, no. 19 (2019). <https://doi.org/10.3390/ijerph16193655>.