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Book Forum

Epidemic Ecstasy

Anjuli Raza Kolb

> In the Puranas, there is a cure for everything.
>
> —Wendy Doniger, *The Hindus*

The week I received these four beautiful articles moving out from and through *Epidemic Empire* was also the week during which India's COVID-19 case count flew past all previous pandemic records. At the time of writing, daily infection rates have hovered in the mid-300,000s for more than a week, following a peak of 414,188 on May 7, 2021. Twenty-four million total cases have been counted, and at least 260,000 people have died.[1] The scenes of anguish are familiar to us now, amplified by the exoticist horror of the English-language media, both in India and abroad: patients die alone on the sidewalk outside inadequate and overwhelmed and hospitals, waiting for a bed, struggling to breathe. Some say these estimates are as little as an eighth of the real numbers. Hundreds of thousands more are believed to be suffering and dying far from COVID testing sites, and hospitals in the rural areas of Uttar Pradesh, Madhya Pradesh, Bihar, and West Bengal.[2] Others are dying at home, untested and uncounted. Oxygen and ventilators are in such short supply that hospitals are instructing patients to bring their own tanks, and a black market in oxygen is flourishing, something medical anthropologist Paul Farmer warned about in a brief editorial I shared with my students in a course called Public Writing and Public Health just a few weeks ago.[3] I told those students—practicing nurses, doctors, public health advocates, and social workers—that their expertise mattered. That to write well about science is as much about observation and humility as it is about pitching timely stories and crafting beautiful sentences. That to supplement the work of the clinic with the skills of the critic was their responsibility. In the era of Trump and Modi, we have needed to say "Listen to the science," but this, too, is a

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1 Saheli Roy Choudhury, "India Reports More Than 343,000 New Cases as One Professor Claims Infection May Have Peaked," *CCNBC,* May 14, 2021.

2 Arundhati Roy, "We Are Witnessing a Crime Against Humanity," *Guardian,* April 28, 2021 (https://www.theguardian.com/news/2021/apr/28/crime-against-humanity-arundhati-roy-india-covid-catastrophe).

3 Paul Farmer, "The Crisis in Medical Oxygen Deserves an Airing," *Financial Times*, February 3, 2021 (https://www.ft.com/content/b1c91c0c-98eb-4b16-9277-c978e3cd39ec).

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necessarily complex task. These facts and numbers, as we know, are impossible to feel. We can no more compass their magnitude than we can tamp down our horror and our guilt.[4]

Time is out of sync at home in South Asia and across the diaspora, and vaccine apartheid has made class relation an again-acute spatial relation. We are sick with worry. I cannot read Poulomi Saha's moving thoughts on reading the symptom in itself as a prompt to "train ourselves to its appearance, its movements, its mutations, its social and distal transmissions … to the wood of the truth, rather than the smoke of its burning" without seeing the vivid flames rising from the cremation grounds of Delhi, of Mumbai, of Lucknow, where my grandfather was born. Wood for funeral pyres at one point ran so low that authorities in Delhi gave leave for trees from city parks to be used to fuel the disposal of the dead.[5] The smoke from the pyres is making the already catastrophic air quality in Delhi even harder to breathe. In Bihar, authorities installed a net across the Ganges River to catch the bodies that have been disposed of there in desperation.[6] Nasser Mufti, a fellow Pakistani-American, writes in his article of the gut-churning "imperial force of Western benevolence when imploring [our] families overseas to socially distance" a special brand of nausea that dogs every one of us "bourgeois immigrants from the global south." I remember sobbing, completely past consoling, for hours after the assassination of Bin Laden. It was the middle of the night in New York. It was morning in Abbotabad, where I once spent a night in an officers' bungalow with my cousins and my uncle, an engineer in the Pakistan airforce, vomiting my guts out because I had been overeager with the trifle in the mess hall. Knowing the roads of that violence, the high walls of those compounds, the people the Pentagon called collateral, the children left unvaccinated when the CIA's hepatitis-B sham was no longer needed, the long jeep journey from the cities to get to that repurposed hill station garlanded in evergreens: it hits different. The United States, the country I was born and raised in, "buried" Bin Laden at sea to avoid making a monument of his death around which people might gather and radicalize, and my stomach lurched again. We kill and we kill and we enable others to kill: almost always civilians who are trapped where they are, trying to live—in Gaza, in Minneapolis, in Allahabad. It is in us, and expelled from us, this diasporic distemper.

I have read so much, talked so much, and learned so much over these last months about what I missed, what I skipped, what I didn't know when I wrote *Epidemic Empire*. As Mufti notes, a longer accounting of Guha's *Elementary Aspects of Peasant Insurgency in Colonial India* did not make it into the final manuscript. Neither did a section on Spivak's 2004 "Terror: A Speech After 9/11," where she writes of how "making terror both civil and natural provides a rationale for exercising psychological diagnostics, the

4 See Diksha Basu, "Mourning My Grandmother—and India—from Across the Ocean," *Vox*, May 17, 2021 (https://www.vox.com/first-person/22436498/india-covid-19-pandemic-crisis).

5 Priyangi Agarwal and Vibha Sharma, "Delhi: Forest Department Allows Felling of 200 Dead Trees for Wood," *Times of India,* April 25, 2021 (https://timesofindia.indiatimes.com/city/delhi/forest-dept-allows-felling-of-200-dead-trees-for-wood/articleshow/82235990.cms#:~:text=NEW%20DELHI%3A%20With%20the%20spike,utilising%20the%20wood%20for%20cremati).

6 Akshita Jain, "India Installs Net Across Ganges River to Deal with Bodies of Covid Dead," *Independent*, May 13, 2021 (https://www.independent.co.uk/asia/india/india-covid-ganges-net-bodies-b1846776.html).

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most malign ingredient of racism."[7] This line—particularly the term *diagnostics*—was one of the first seeds of this project. As we have learned or relearned over the last months, even epidemics are not "natural," in the sense that their courses are shaped profoundly by human interaction and human behavior. The COVID-19 pandemic has been exactly as cruel as we allowed it to be. Arundhati Roy, whose reporting in the early days of COVID I also cited in the book's preface, has recently called the current wave in India a "crime against humanity," perpetrated in large part by a callous, ignorant, self-serving Hindu-nationalist government. Anthony Alessandrini observes this necessary corrective to conceptions of the "natural" in connection with Mike Davis's *Late Victorian Holocausts*, a book I stole from a family member in late 2019 but did not read until after I had finished writing. Suvir Kaul generously supplements my argument with his own deeper knowledge of the context of anti-Muslim violence and policy in Modi's India, noting more sharply than I do that "state agencies in the postcolonial global south have no compunction about using vocabularies inherited from imperialists, particularly since these modes of address have been refurbished and refined to serve the interests of the global war on terror."

In counterpoint to these revelations of *Epidemic Empire*'s limitations and oversights, I have been grateful at moments to have written something that might be a useful guide in our present, or to at least know where to point those in search of historical precedents, so that is what I will try here, again, to do. I am thinking about behavioral epidemiology; about ecstasy and desire and how the many organisms that live in and alongside us thrive because of them. Not the good kind or the bad kind, but simply the powerful kind that pulls us, like gravity, toward our dearest and *also* toward unknown and untold each others.[8] Since the start of the COVID -19 pandemic, public health authorities across the world have warned about family reunions and large gatherings, of course, but also, specifically, about "screaming on roller coasters," singing at karaoke bars, and dancing at raves.[9] We've spoken casually about how the virus exploits our desire to be together, to touch each other, to shout in glee and laugh with mouths wide open, to bump, grind, sweat on each other, hug, hold hands, make out, march, collapse in a heap. We've done some of these things, against our better judgment, driven by our need for vestibular stimulation, our loving, social heedlessness. We've been ashamed of it, calculated the risks, made mistakes, revised our understanding of the other, sometimes greater risks of staying apart. In his new book on Ebola in the Kissi Triangle in Upper West Africa, Paul Farmer writes about filoviruses and COVID -19 both as caregivers' diseases, transmitted, especially in the case of Ebola, "in the course of caring for the sick

7 Gayatri Spivak, "Terror: A Speech After 9/11," *boundary 2* 31.2 (Summer 2004): 91.

8 For a beautiful account of the pathologization of nonwhite ecstatic collectivity, see the introduction and chapter 3 in Lindsay Reckson, *Realist Ecstasy: Religion, Race, and Performance in American Literature* (New York: New York University Press, 2020).

9 Thank you to Heather Cleary for reminding me of the rollercoaster mandate. See Jesse O'Neill, "No Screaming on Roller Coasters under California's Covid-19 Plan," *New York Post*, March 17, 2021 (https://nypost.com/2021/03/17/no-screaming-on-roller-coasters-under-californias-covid-19-plan/); Justin McCurry, "Karaoke Warning in Tokyo Amid Calls for Covid-19 State of Emergency in Japan," May 31, 2020 (https://www.theguardian.com/world/2020/mar/31/karaoke-shutdown-in-tokyo-amid-calls-for-covid-19-state-of-emergency-in-japan); and Jessica Lipsky, "How the Illegal Rave Scene Thrives During the Pandemic," *New York Times*, March 19, 2021 (https://www.nytimes.com/2021/03/19/nyregion/illegal-dance-parties-covid-nyc.html).

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or carrying out caregiving's final act, preparing the dead for burial."[10] These acts, Farmer elaborates, have been pathologized around the world as careless, ignorant, unmodern: a lie that upholds what he calls the containment-over-care paradigm of international medicine.[11]

As I read about the dozens of ultra-Orthodox men and children crushed to death at Mount Meron in northern Israel at the Lag BaOmer festival on April 30; as I thought back to the maskless Trump rallies, Trump's own performative bout with COVID, and the violence at the US Capitol on January 6; as I considered the Centers for Disease Control's directive (and then soft reversal) on Americans being allowed to stop wearing masks at a time when people of color are vastly under-vaccinated compared to their white counterparts; as I watched the Hindu-nationalist government in India imprison Muslims for gathering *before* lockdown began in March 2020 and, in Uttar Pradesh, hose migrant workers (many, again, Muslim) with bleach as they tried to return home to their rural villages on foot; as I learned about Indian Prime Minister Narendra Modi and his lackeys in Uttarkhand taking out front page advertisements in Indian newspapers a year later, declaring the Haridwar Kumbh Mela (a cyclical Hindu pilgrimage and reportedly the largest gathering of human beings on earth) "BEAUTIFUL, SAFE, CLEAN," and encouraging Indians from all over the country to attend, then watched as the state's COVID count went from 800 to 13,000 in less than two weeks, and then explode across the rest of the country—what has been most acutely on my mind is how viruses use this desire in us. Not just in our day-to-day existence as workers, commuters, students, and home sharers, but especially in our desire for everything that exceeds this ordinary. Our need for mass action, collective spirit, caregiving, and communion with divinity, even and perhaps especially when those desires are culturally, economically, and politically mediated, or manipulated to horrific ends. How they pretty much always have used us this way.

The Haridwar Kumbh Mela of 1867 was the cause of much consternation among health officials in British India. This gathering facilitated a large spread of cholera that I write about in the second chapter of *Epidemic Empire*, building on the scholarship of subalternist historian David Arnold. It was the first of its kind following the Indian Mutiny (more properly known as the First Indian War of Independence) in 1857, and with authorities still cautious about what they believed to be the religious fervor behind the political uprising, there was hesitancy about cracking down any further on expressions of religious freedom, even with the threat of epidemic looming. Disgust and horror, as well as planning, were outsourced from the Crown—recently having replaced the East India Company as the subcontinent's governing body—to medical personnel, who became expert at what Farmer gives us language for: the eclipsing of care in favor of containment, which, in the language of imperialism, was still called care. A detail that I didn't write about in the book but that has been nagging at me since the lead up to 2021's Kumbh Mela in Uttarkhand, is how British officials carved up the problem of cholera by religion and sought to interrupt it especially in the scenes of intimate care that are sought en masse by people in spiritual and material need.

10 Paul Farmer, *Fevers, Feuds, and Diamonds: Ebola and the Ravages of History* (New York: Farrar, Straus & Giroux, 2020), xix.
11 Farmer, *Fevers, Feuds, and Diamonds*, 520–22.

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The control of food and water are of particular importance in the account given by G. B. Malleson in the *Report on the Cholera Epidemic of 1867 in Northern India*, which hinges on the 1867 Haridwar Kumbh Mela outbreak. Here he writes of how provisional hospitals were built in case of infection and how ventilation was planned for in the sleeping and bathing grounds. He also writes about arrangements made for the delivery of the "best grain" to Haridwar prior to the mela, and he describes the regular inspection of food offered for sale, as well as the seizing and destruction of this food if it was found to be "unwholesome."[12] Poorer pilgrims regularly arrived with their own food, carried from home, and it is these most destitute pilgrims on whom much of the blame falls for the subsequent outbreak: the etiological hook is their unwholesome food, but the argument is, in fact, their poverty. Muslims number among the pilgrims (in reference to their preference for well over river water), in spite of the putatively "Hindu" nature of the celebration. At no point in the report, or any of those I read in preparation for the book, does the immiseration of millions of Indian people at the hands of an extractive for-profit company emerge as a viable cause for either the spread or the lethality of cholera. At no point does the deforestation of the Sundarban for East India Company timber in Bengal in the early nineteenth century enter the hundreds of thousands of pages of ink spilled in the quest to understand and contain cholera in the nineteenth century. It is the care the pilgrims extended to their families and those in their company who could not afford both travel and food that is identified as the source of the pathogen, and is then pathologized. At other times, a similar argument would be used to curtail Muslims performing *hajj*.

I am struck by the difficult resonance of evolutionary and behavioral epidemiology's key insight that nonvector transmitted viruses and bacteria use us as hosts and benefit when we seek each other out in intimate love and collective passion. That they are quite good at managing a fine balance between incubation periods, how badly they incapacitate us in our sneezing and spewing (and when), and how much they curtail our ability to move around, either through pain or fever or exhaustion or death.[13] I am trying to maintain a disposition of moral neutrality toward this paradox: we gather, in search of something greater than ourselves. It gives our lives meaning and puts us at risk. Sometimes these gatherings and the devastation they can lead to are fanned by state-sponsored propaganda, and sometimes that propaganda is invented in the crucible of anticolonial necessity. Kama MacLean writes that the Kumbh Mela is not nearly as timeless as the Indian state has made it out to be and that its supposed origins in the puranas—the ancient texts Wendy Doniger wryly says have "a cure for everything"—are belied by the Allahabad festival's institutionalization in the 1860s by Hindu priests trying to work around British restrictions on *any kind of gatherings*. Locating the origins of the mela in Hindu scripture pleased the Orientalist demands of British governing tendencies after the mutiny, which favored rituals that appeared eternal and heavily restricted forms of collectivity that were multi-confessional or in any way innovative.[14]

12 G. B. Malleson, *Report on the Cholera Epidemic of 1867 in Northern India* (Calcutta: Office of Superintendant of Government Printing, 1868), 6.

13 See, for example, Paul Ewald, *Evolution of Infectious Disease* (Oxford: Oxford University Press, 1994), 35–41.

14 Kama MacLean, "Making the Colonial State Work for You: The Modern Beginnings of the Ancient Kumbh Mela in Allahabad," *Journal of Asian Studies* 62.3 (August 2003): 875.

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It is beyond the scope of this short response to delve more deeply into this history and how politics appears and disappears in it. Suffice it to say: Of course, the withdrawal of care from an increasingly state-serving festival—now an index of India's criminal neglect in its handling of COVID —is a long-haul effect of colonial policing. Of course, the Haridwar Kumb Mela of 1867 was a public health catastrophe. Adjudicating surprise has become a macabre pastime this last year. Is there a cure in the puranas for this? Poulomi Saha's manner of returning us to the symptom without suspicion is a reminder of how "a single, unsurprised outcome" can be nonetheless "political, engaged, excited." I am grateful for these words. No, we are not surprised by what is happening in India: the racialized, monetized effects of vaccine apartheid, of privatization, of export pressure and the utterly broken infrastructure of a vast and abundantly populated nation that, like nearly every nation in the history of nations, has forgotten its poor. We are not surprised that a year of lockdowns and racist vaccine distribution with unabated settler incursions in the West Bank and East Jerusalem and Gaza have led to—in the last week—war crimes of a scale not seen in more than a decade against Palestinians on the anniversary of the Nakba. Yes, we are still aghast. Yes, we will fight for the right to political self-determination and against the racist apartheid legacies of white settler colonialism.

For the writers in this forum, for many readers of this journal, these weeks have pushed us to depths of grief and shame we may still not be able to fathom. What is our writing for? Who is it for? Anthony Alessandrini is right that I remain "ambivalent, at best, about the role of the critic in our pandemic moment." Or, to borrow Mufti borrowing *Bleak House*'s Jo, I am concerned that "I don't know nothink!" Or rather, I don't know enough. This is as true now, a year from completing the book, as it was in April 2020. I'm lucky to be able to teach, even if I teach nothing more than this sentiment as a political practice. I'm lucky to have had the teachers I had and the readers who have shared their time and thoughts on this project. Inallaha ma'a al sabireen. Free Palestine.

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