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“COMMUNIST MOVEMENT AND DISTRESS RELIEF TRADITION IN KERALA”

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Introduction

Kerala, which has become a model for the world through its progressive interventions in the fields of education and health, is now embarking on a new revolution in the field of palliative care. The Kerala Care Project, which aims to provide free palliative treatment to bedridden patients and people suffering from incurable diseases, is a new step forward in this field. This project was an initiative taken by the Communist government in Kerala in 2025. The Communist Party's journey into the field of palliative care grew out of its earlier tradition of disaster and distress relief. This paper looks into the role of the Communist volunteers, in organising distress relief works in Malabar in 1940s.

Palliative care is a form of care that provides relief and support to people suffering from chronic or serious illnesses and to their families. Today, we call this as palliative care. One of its primary responsibilities is to care for patients with life-threatening illnesses and provide them and their families with comfort through compassion, sympathy and love. Through palliative care activities, volunteers not only care for patients but also help those suffering from incurable illnesses to reduce their physical and psychological pain as much as possible. When a person with an incurable illness is at home, the impact of the disease is experienced not only by the patient but also by the family members. Therefore, such care provides considerable relief not only to patients but also to their families.

Palliative care may be a term that has become widely popular only in recent times, but activities of compassion and relief—extending a helping hand to people who have fallen into distress out of concern for humanity—have a history dating back to ancient times. Ancient religions promoted acts of compassion and charity, and hence, such activities were regarded as divine and thus, they gained considerable social

acceptance. In the modern era, particularly during the colonial period, palliative care made significant advances. The unparalleled service rendered by Christian missionaries in this field can never be forgotten. Several voluntary organizations also have made their own distinctive contributions to this field. In recent times, the interventions of political parties in the field of palliative care have opened a new chapter in its history.

Studies on the role of the Communist Party in palliative care and relief activities are very limited. The relief activities undertaken by the Party have a history extending back to the early years of its emergence. It was during the period of the Second World War, when famine and epidemics disrupted people's lives, that Communist volunteers came forward to provide relief to the people. Its tradition of activism was intertwined with several other areas of social work beyond peasant and labour struggles. Following the formation in 1939, the Communist Party succeeded in building a strong base among the oppressed sections by addressing their economic and social problems through numerous interventions. Volunteers played a significant role in easing the suffering of people afflicted by incurable diseases and experiencing physical and mental pain.

It was during the period when cholera broke out as an epidemic in the 1940s that Communist volunteers became actively involved in relief and palliative-care activities. In 1943, when the cholera epidemic was at its peak, it was reported that thousands of people lost their lives. Some sources say that approximately 30,000 people succumbed to the epidemic¹. As impoverished and helpless people died from the disease, entire families were plunged into distress. There were situations in which even relatives were unwilling to treat or care for those who had contracted the disease. The epidemic created a panic situation that people were afraid even to venture out. In such a terrifying situation, Communist volunteers entered the field of relief work, in cooperation with the Health Department to assist patients and families affected by the disease.

By the 1940s, the Communist Party had not only an ideological foundation but also an organized party structure. Efficient party cell units existed in villages to communicate decisions taken by the state leadership to the grassroots and implement them through systematic activities. From the time they had worked in the Congress

Socialist Party, the leaders had been particularly careful about building an extensive organizational structure. At the beginning of the 1940s, only four or five members were there in most of the cell units, which were the basic organizational units of the Party. Nevertheless, through the dedication and spirit of service of these members, relief activities were carried out effectively.

The rapid spread of cholera disrupted social life and demonstrated the complete inadequacy of the colonial healthcare system, which was struggling under limited resources. The shortage of human resources also adversely affected disease-prevention activities in rural areas. It was in this situation that Party cell units became actively involved, following the instructions of the state leadership. Prominent leaders such as P.Krishna Pillai made the rank and file aware of the need to intervene actively in disease-prevention activities. Volunteer groups were formed in various parts of Kerala in cooperation with class and mass organizations. The activities undertaken by the Peasant-Labour Union in Alappuzha were exemplary. They created songs about the disease and conducted awareness programmes among the people by singing them and distributed medicines to prevent cholera and also provided food, clothing and other necessities to the affected families².

It was at this time of distress that the Communist Party launched Kerala People's Relief Fund. Through this initiative, the Party aimed to provide public service by efficiently utilizing the disciplined volunteers. Krishna Pillai reminded the party workers of the need to get involved in the distress relief works through its mouthpiece, *Deshabhimani* daily³. A Relief Committee was formed under the leadership of Moyarath Sankaran and T. S. Thirumump and a pamphlet prepared by them in English under the title "Call of Kerala" clearly explained the importance and relevance of the relief activities to be undertaken during this period as well as the need to collect funds for relief activities. As part of the fund raising campaign, Sankaran travelled to places outside Kerala, including Bangalore and Mysore, and approached numerous individuals and institutions seeking financial assistance⁴.

The relief activities in Malabar were initially organized under the leadership of Krishna Pillai. Krishna Pillai's first arrival in Ponnani was for organising cholera prevention activities. He demonstrated inspiring leadership by organizing volunteers and caring for patients. The volunteers walked several kilometres, distributing

necessary medicines, creating awareness among the people about cholera and providing various services.

The name of Communist leader Imbichi Bava deserves special mention in connection with the cholera-relief activities in Malappuram. He was a leading figure in the Party's relief activities in the Tirur area, particularly in the Mangalām region. When cholera was spreading fast and claiming many human lives, Imbichi Bava was in jail. It is said that at least 900 people died after contracting the disease in Mangalam area. After his release from jail in 1943, Imbichi Bava led a volunteer force that undertook relief activities, including caring for patients and burying the dead. After a prolonged period of relief work, when the village finally emerged from the grip of the disease, 90 children had been left orphaned. At this time Imbichi Bava intervened to rescue them and arranged for the children to be sent to orphanages in Kozhikode and Ponnani. Fathima, Amina and Mariyakutty were among the children who survived the cholera epidemic and were sent to the orphanage in Ponnani⁵.

At Pulamanthole in Malappuram, cholera-relief activities were carried out under the leadership of Kunjikannan, a beedi worker and Party leader.

Pulamanthole was an area largely surrounded by water and inhabited predominantly by impoverished Cheruma people. When the Party workers became aware of the cholera outbreak and the condition of the people in the settlement, Kunjikannan and other Communists informed Health Department officials and entered the field of relief work. When they reached, what they found in the settlement was extremely unhygienic. When the volunteers came to know about the deaths of five people and the unburied bodies, they dug graves and buried the bodies despite heavy rain. When Kunjikannan noticed a child vomiting and exhausted inside one of the huts, he took tablets from his bag and gave them to the child⁶. Health workers were apparently unaware that cholera had spread in the settlement. Only after Party workers arrived at the site and the news spread did a Health Inspector and assistants reach the island. Health Department records confirm that the epidemic spread from Ponnani to Kozhikode and the surrounding areas⁷. As the epidemic spread throughout both rural and urban areas, numerous lives were lost. The relief activities initiated by the Party's Kayalam Cell in Kozhikode were exemplary. The members of the volunteer group

included Kottattil Raghavan Nair, K. M. Alikkoya, Kunhothi, Madhavan Master and others.

When the rapidly spreading epidemic created panic among the people, these volunteers went from house to house caring for patients. They began their relief work after receiving preventive medicines from the Health Department. Distributing preventive medicines among the people, they educated them about personal hygiene, precautions against the disease and the importance of keeping their surroundings clean.

The Communist volunteer corps, that carried out the Cholera Eradication Campaign in the Kurumbanad area, was under the leadership of M. K. Kelu and M. Kumaran Master. Experts in the healthcare field, including Dr. Malar, Dr. P. P. Kelan and Chanthu Vaidyar, also provided assistance to the volunteers according to their respective expertise⁸. Wearing *khaki* trousers and red badges, the volunteers went from house to house caring for patients and delivered rice collected from various places to the people affected by the epidemic. In addition to sanitation campaigns and awareness programmes, they also took part in the burial of the dead. Volunteers such as O. Gopala Kurup of Pathiyarakkara near Vadakara were actively involved in preparing and distributing a special medicinal solution against cholera⁹. During these humanitarian activities, some of the volunteers had to sacrifice their own lives. Malliery Kunjikannan was one among them¹⁰.

Under the leadership of Azhikodan Raghavan, the volunteer squad conducted a cholera-eradication campaign in Kannur town and the surrounding areas. During their house-to-house visits, they witnessed many experiences and one such incident occurred at house on the street north of the Kannur Taluk Office. When the volunteers arrived, they found a mother and child lying on the floor covered in vomit. There was nobody in the house even to clean the place or give them a drop of water. Azhikodan Raghavan, the leader of the volunteer squad, cleaned the house and provided the family with the necessary first aid¹¹. It was only after this that the doctor and his team arrived at the house.

At Kandakkai of Chirakkal Taluk, commendable service was carried out under the leadership of the S.K.M.Vayanasala, established by workers of the Karshaka Sangham. When cholera was spreading rapidly, the workers of the Vayanasala

became involved in dispelling misconceptions about the disease. At New Mahe near Thalassery, following an outbreak of cholera in the area, a meeting was held at the Edakkur Vijnana Vardhini Vayanasala in which a Cholera Relief Committee was formed, and K. M. Gopi was elected captain of the volunteer force. The committee took lead in providing every possible assistance to patients and people suffering from the epidemic. Similarly, the cholera-eradication activities carried out in 1943 became one of the milestones in the history of the Thalassery Beedi Workers' Union¹². Special mention should be made of four women who participated in cholera-relief activities in Anthoor Panchayat of Taliparamba. When cholera cases were reported, the women's group formed by Karichiriyedathi, C. Panthal, M. K. Narayani and P. Madhavi went from house to house providing assistance and supporting the health workers¹³. Against the background of the cholera-prevention activities, a public meeting was held at Kozhikode Town Hall under the auspices of the Grama Seva Sangham in which Manjunath Rao spoke on behalf of the Party¹⁴. In the areas where there were no cell units of the Party, individual Communists were willing to work as part of other voluntary organizations. Every volunteer was determined to undertake whatever work was possible to bring the people in distress back into the normal life, without expecting any personal reward.

The Communist volunteers had come forward to serve the people not only when cholera spread, but also during periods of food scarcity and when smallpox cases were reported in 1940s. During the time of the Second World War, the food shortage had reached its peak in Malabar. It was at this time that workers of the Karshaka Sangham started Community Kitchens. In the same period, Communist Party came forward to co-operate with the "Grow More Food" programme launched by the Madras Government to mitigate the distress of the people who were reeling under poverty. This type of philanthropic activities carried out by the red volunteers awarded a distress relief tradition to the Communist movement in the state.

The relief activities currently undertaken by the Communist Party should be viewed as a continuation of such a tradition. The activities carried out in cooperation with the state government during the COVID-19 lockdown were another manifestation of the Communists' tradition of distress relief. Services such as patient care and the programme of distributing food to patients and bystanders in government hospitals

through the youth organisations represent another new step by the Party in the field of palliative care. Other voluntary organizations working in this field also have their own traditions of service which can never be ignored.

Malayalees have a tradition of confronting disasters collectively, without distinctions based on caste, religion, politics or other differences.

The world witnessed this collective actions during the 2018 floods that devastated the state. A recent observation made by Adithi Uma Rao, Director of the Uttar Pradesh State Disaster Management Authority, that Kerala's disaster-management systems could serve as an excellent model for other states, deserves special attention. Every *Malayali* can take pride in the fact that Kerala was the first region in Asia to formulate a palliative-care policy. With the government systems becoming more active, there is no doubt that we can bring together the institutions and individuals working in the field of palliative care under one umbrella and create another model for the world.

Conclusion

The Communist Party's distress relief initiatives date back to its very inception, with the pioneering efforts of its first-generation activists in Kerala laying the groundwork and establishing a tradition of relief work that has become integral to the Communist movement. This legacy, upheld by successive generations, culminated in the formulation of a palliative care policy in 2008, during the Party's tenure in government and in the Kerala Care Project. Alongside Communist organizations, numerous caste- and religion-based groups also organise their own palliative care activities. Kerala owes a great deal to those who come forward to serve in this field, which demands tremendous dedication.

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