

Protests by West Bengal junior doctors over rape and killing of colleague continues after state passes reactionary death penalty legislation

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For well over a month, trainee doctors employed in government hospitals in the eastern state of West Bengal have been on a “cease-work” agitation severely crippling healthcare. They are demanding “justice” following the gruesome rape and murder of their 31-year-old colleague, Moumita Debnath, whose semi-naked and brutalized body was discovered on the morning of August 9.

Late at night on August 8, an exhausted Moumita, having worked a 36-hour shift at the government RG Kar Hospital in Kolkata (Calcutta) went into a seminar hall to get some sleep. She was forced to go there because the state government has failed to provide any facility with beds and toilets for the junior doctors, although they are expected to work night and day. Next morning on August 9, her severely mutilated corpse was discovered.

The Kolkata police have arrested Sanjoy Roy as the chief suspect. He was employed by Kolkata police as a “civic volunteer.” He frequently visited the hospital, enjoying unfettered access throughout the hospital and brazen immunity to bully people because he was part of the police force.

A central demand of the trainee doctors, who are commonly known as junior doctors, has been for a meeting with the West Bengal Chief Minister and Trinamool Congress (TMC) supremo Mamata Banerjee. Such a meeting finally took place on Monday, September 16, with a delegation of some 30 doctors meeting with Banerjee at her residence and presenting their main “immediate” demands.

These demands are all narrowly focussed on the investigation of Moumita’s rape and murder or revolve around providing greater “security” for the doctors through the deployment of police at hospitals and the provision of “safe spaces.”

They include the immediate sacking of Kolkata Police Commissioner Vineet Goyal, who has been accused of botching the investigation by allowing huge crowds to enter the seminar hall soon after Moumita’s body was discovered and the replacement of top state government health department officials

for failing to provide a safe environment in the hospital.

At the beginning of the junior doctors’ strike, which at its height in mid-August spread nationwide and involved as many as a million interns and nurses, numerous demands and issues were raised, including over the horrendous conditions to which trainee doctors are subjected, the deplorable state of public healthcare, and the failure of the central government to act on its pledge to improve working conditions and hospital health and safety in the wake of the COVID-19 pandemic.

However, these critical issues have been shunted aside, with the emphasis increasingly coming to be placed on the most narrow and reactionary law-and-order demands.

There is no question that Moumita’s horrific fate angered tens of millions in West Bengal and still more across India and that the calls for “justice” for the dead woman became infused with inchoate popular anger over government and police corruption.

But with the working class politically suppressed as a result of the criminal role of the various Stalinist Communist Parties and their trade unions, in this as with every other complex social issue, the terms of the political debate have quickly come to be defined by the most reactionary forces.

For weeks, Banerjee, her TMC and the BJP, the Hindu supremacist party of Indian Prime Minister Narendra Modi, have been involved in a very public brawl as to who is to blame for Moumita’s ghastly fate.

At first Banerjee refused to meet with the trainee doctors, waxing indignant over their “illegal” withdrawal of healthcare. But recognizing that much of the public was sympathetic to the junior doctors, she ultimately sacked the Kolkata Police Commissioner and several health department officials.

Banerjee’s TMC and the BJP are now competing with one another in advocating for more draconian forms of state violence as the solution to rape.

Soon after Moumita’s death, Banerjee shot off a letter to Prime Minister Modi advocating for a “tough central law”

where accused rapists would be tried and sentenced within 15 days to “ensure quick justice.”

In retort, the Modi government attacked Banerjee for not having activated 11 Fast Track Special Courts (FTSCs) for crimes of sexual violence as authorized under a 2018 central government order, despite the state having a backlog of 48,600 rape cases.

Nevertheless, on September 3, the two parties joined hands in the West Bengal state assembly to unanimously adopt by voice vote a draconian “tough-on-crime” bill, the Aparajita Women and Child (West Bengal Criminal Laws Amendment) Bill, 2024.

It’s to be noted that the Stalinist Left-Front coalition led by the CPM (Communist Party of India, Marxist) that dominated West Bengal’s government, ruling continuously for 34 years, from 1977 to 2011, could not even participate in this vote as it has not had a single elected legislator in West Bengal since 2019. It was the Stalinists’ ruthless pursuit of what they themselves termed “pro-investor” policies that opened the door for the rise to power of the anti-communist demagogue Banerjee and the subsequent emergence of the Hindu supremacist BJP as a major political force in the state.

The new “anti-rape” law mandates the death penalty for those convicted of rape and other sexual offences if the victim dies or ends up in a vegetative state. For other rapes, the bill mandates life sentence without any chance at parole. To become state law, this legislation requires the signatures of both the state governor and the president of India. While the governor—a BJP appointee who has been working hand in glove with Modi’s chief henchman, Amit Shah, to destabilize the TMC government—has signed off on the law and forwarded it to the president of India, Draupadi Murmu, it is far from clear that it will receive her signature. This is because the Modi government is loath to provide any kind of political “victory” to the TMC.

Speaking in favour of the bill in the state assembly, Banerjee termed it “historic” and a “model” for the whole country.

As with every other issue, all the ruling class has to offer is reaction and violence. The official debate over the prevalence of rape and other forms of gender violence in India is presented in entirely individual and Manichean terms, abstracted from any consideration of the brutality that pervades daily life in contemporary capitalist India, where the rich and powerful have impunity while hundreds of millions eke out an existence on a few dollars of income per day, and the indignities and perversions of a society in thrall to capital are interlaced with caste-ism and other semi-feudal survivals.

Also, completely absent from the debate was any discussion, let alone remedy, for the horrific conditions that prevail in government hospitals throughout the country. The junior doctors are treated like workhorses, in a system that suffers from massive staff shortages at every level from cleaners and orderlies to nurses, technicians, junior doctors, and senior

medical personnel.

The ratio of senior doctors to junior doctors is 1 to 4, meaning the latter must incur the principal burden for tending to a sea of desperate patients and their family members. This is further ensured by imposing on them inhumane work shifts of 36 hours, frequently virtually back to back.

Burnout and fatigue among doctors even at a young age after just a few years of exhaustive work is frequent. A young doctor speaking to the *New York Times* said she was worried of losing compassion towards her patients because she is “caring for hundreds of patients a day as if they were objects in a factory and not people.”

The junior doctors also must bear the wrath of patient families who are irate at the substandard care they are receiving in India’s overcrowded, poorly equipped hospitals.

So appalling and inadequate are the facilities, that two patients are often forced to share the same hospital bed, sleeping in opposite directions.

Because of the lack of personnel, family members are called upon to play the role of nurse and orderly during a patient’s stay. They also must frequently buy any drugs doctors prescribe, including pre-and post-surgery, and resort to private facilities for critical diagnostic tests.

Toilets are often clogged and rat infestation is common.

Such conditions of want and desperation are a breeding ground for corruption. As the right-wing Indian Medical Association itself conceded, “Ordinary people face problems due to corruption in the allotment of hospital beds, and shortage of life-saving drugs. We want a solution to all these problems.”

Outrage over these conditions at times takes reactionary forms, with more confused elements lashing out at individual doctors. In the immediate aftermath of Moumita’s death, a mob attacked the hospital, destroying equipment and terrorizing personnel.

Meanwhile, the wealthier layers of the population avoid government hospitals altogether and seek care in expensive private hospitals, where the most advanced medical treatments are available. So-called medical tourism is a major growth industry, with close to a million people seeking treatment at Indian private hospitals to escape the ever-escalating costs associated with healthcare privatization in the advanced capitalist west.



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