IS THE CURE WORSE THAN THE DISEASE?

REFLECTIONS ON COVID GOVERNANCE IN SRI LANKA

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Contacts during difficult times: A study on the function of social networks in accessing state services during the COVID-19 pandemic

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Introduction

In Sri Lanka as elsewhere, the COVID-19 pandemic has made citizens dependent on the state significantly more than usual for such things as obtaining permits to hold ceremonies, engaging in certain business activities, traveling from one location to another, receiving vaccinations, receiving rations, etc. more than they usually do. In such a critical context, the state has a strong obligation to honour the principle of equality. However, at Sri Lanka’s national level, there have been numerous discussions about the types of favouritism and discrimination in operation when people seek COVID-19-related state services.

Several cases have been reported that serve as examples of such favouritism and discrimination. A recent incident in a COVID-19 vaccination centre in the Colombo district in which the Chairman of an Urban Council insisted that medical officers only vaccinate people in the area who brought a token issued by him is a
clear example of biased access to state-supplied vaccines (*Moratuwa Mayor arrested for disrupting the duties of health workers*, 2021). Another widely publicised incident involved a group of people from the Western Province traveling to Galle in the Southern Province despite travel restrictions being in operation, in order to receive the second dose of the AstraZeneca vaccine. This was in spite of the fact that the state had not yet officially begun the vaccination process for the second dose at the time and there was a limited supply of vaccines in the country even for the first dose (*Report finds 425 from Western Province got Covishield jab in Galle*, 2021). There were also numerous reports of ceremonies and public gatherings taking place during the period when travel restrictions were supposedly in force, and of specific individuals being granted exemptions from quarantine regulations. In a recent sensational example involving prominent figures in Sri Lanka’s entertainment industry, those who had organised a birthday celebration at a luxury hotel in Colombo were reportedly given a lot of flexibility during their subsequent quarantine process (*Chandimal’s birthday party: Seven arrested and granted bail*, 2021).

These events demonstrate how some are more capable than others in engaging with state services efficiently, resulting in greater injustice to the average citizen. In such situations, people use their existing social networks at the national level to gain access to or misuse state services. In this paper, I examine the role of social networks during a pandemic situation in which many people perceive the state’s involvement in civic life to be more important than usual. I visit four issues in this connection: First, the role of political and non-political actors in combating COVID-19; second, how the political patronage network functioned as a social network in facilitating access to state services during COVID-19; third, inequalities sustained as well as spawned due to the function of patronage networks; and last, the role played by mediators in enabling access to state services during the COVID-19 crisis.

My analysis is based on a series of qualitative interviews and observations conducted in two districts in the Western Province, namely, Colombo and Kalutara. This information was supplemented
by insights drawn from secondary sources, and data from a survey titled ‘Socio-Economic Index in the Face of COVID-19’ (2021) that provided insights into COVID-19-related state services during the pandemic. Drawing on the work of three theorists who have written extensively on the subject of ‘Social Networks,’ namely, Robert Putnam, James. C. Scott, and Pierre Bourdieu, as well as the works of Partha Chatterjee on political community, I argue that formal democratic institutions and processes have been somewhat suspended in the pandemic situation, to be almost entirely replaced by informal and largely extra-institutional means of engaging with the state.

Political and non-political actors in combating COVID-19

During the first quarter of 2021, Social Indicator conducted a survey that revealed that the public is more satisfied with the role of the Grama Niladhari, the health sector, the police, and the military in combating COVID-19, than with the Parliamentary representatives of their local areas (please refer tables 5-10 in annexure 3). Grama Niladaris were assigned several COVID-19 related duties such as distributing the Rs. 5000 allowance and dry ration packs to families under home quarantine, providing necessary information regarding getting medicine delivered to homes from government hospitals during the lockdown, and ensuring the public coordinates with the PHI in the event of a loved one’s death during the pandemic, among other things. The police and military too had multiple responsibilities at the time, including imposing travel restrictions and controlling the spread of the virus, with the military in particular being in charge of running quarantine centres. During the third wave, the military was heavily involved in the vaccination process in order to meet the daily vaccination targets. By this point of the pandemic, Public Health Inspectors (PHI) had gained prominence and were recognised as playing a critical role in the fight against COVID-19. They were primarily in charge of ensuring that quarantine regulations were followed, but they also had a number of other responsibilities in their respective local areas.
However, it should also be noted that there have been reports of Grama Niladharis and PHIs refusing to fulfil their responsibilities due to a variety of pressures. For example, Grama Niladharis raised concerns regarding participating in the distribution of the Rs. 5000 allowance on two occasions in 2020 and 2021. They stated in 2020 that they distributed the relief due to political pressure and according to them, there was no need to distribute the relief during that time period because the pandemic was still in its early stages (Grama Niladharis call off boycott of Rs 5,000 allowance distribution duties, 2020; Distribution of Rs 5,000: Grama Niladharis to withdraw, 2020). In 2021, they refused to distribute the relief yet again, claiming that it was unsafe for the officials to do so and that the government’s request to distribute it before the New Year was too optimistic (Grama Niladharis refuse to distribute Rs. 5,000, 2021). Similarly, PHIs wished to withdraw from COVID-19 control duties after being denied legal cover for their work and after health ministers made a demoralising statement that PHIs are causing inconvenience to the general public (PHIs step away from COVID-19 control duties, 2020).

According to the survey data, it is clear that non-political actors have become more popular among the public for providing a satisfactory service during the pandemic, whereas political actors have not enjoyed such popularity. However, based on the above incidents that are demonstrative of non-political actors’ reluctance to continue their services, it is possible to conclude that there has been tension between political and non-political actors, with political actors maintaining an advantage over non-political actors throughout the COVID-19 period.

In addition to the issue of reluctance stemming from political involvement, there has been growing dissatisfaction in the healthcare sector about the military’s involvement in pandemic control. For instance, the Government Medical Officers’ Association has informed the Health Ministry that they are dissatisfied with increased military involvement in the vaccination process, claiming it has caused some confusion among the public (GMOA complains of military interference in vaccination drive: Army refutes allegation, 2021).
Role of political patronage in the pandemic situation

**Nature of political patronage in Sri Lanka**

It is necessary to understand what ‘patronage’ means in order to understand its impact during the pandemic. Patronage was a rather clear affair in feudal society, consisting of an uneven power relationship between landlords and their tenants. This means that the superior party, the patron, exerts influence on the inferior party, the client, by supporting or protecting the latter, and the latter, in turn, performs certain services, the nature of which is determined by the patron’s demands (Scott, 1972; Hettige, 1984).

However, with the emergence of democracy, patron-client relationships became more complicated. Clients gained more agency in this new situation because patrons were under pressure to placate the ever-increasing number of clients. Because this growing demand could not be fulfilled in their personal capacity, patrons were forced to turn to state-owned resources in addition to what they already had (Kitschelt and Wilkinson, 2005). As a result, we see the formation of a ‘patronage democracy’, or a kind of democracy based primarily on patron-client relationships, in which patrons enable their clients’ access to state-controlled resources in exchange for their vote.

In this equation, even welfare is used to cater to the patronage demands of voters, resulting in people viewing the state as “the supreme agency of social welfare and benevolence.” (Uyangoda, 2010, p. 61; also see Weerawardana, 1951) Thus, politicians have come to play an important intermediary role between citizens and welfare such that they have become indispensable in accessing welfare services, rendering them absolutely necessary for the former, in order to access the latter (Gunasekara, 1992; Uyangoda, 2010; Peiris, 2021). It is in this context that ‘contacts’ and ‘networks’ during the pandemic should be understood, to which I turn next.
Patronage networks and convenient access to state services during the pandemic

As mentioned earlier, politicians have become useful and efficient nodes of access to the state’s welfare scheme. In the pandemic situation too, there were several instances where established patronage networks were used as an effective means by many local communities to access COVID-19-related state services. Most of the time, having access to state services was critical to people’s lives, for purposes such as obtaining travel passes to cross provincial borders during personal emergencies, or obtaining permits for businessmen to sell groceries or continue other personal business and so on.

It may be instructive, in this regard, to compare the experiences of two respondents I had approached for this study. One among them owns a small business in his area that produces hand sanitisers, masks, and other safety equipment. Through the assistance of a local politician, he had been able to easily send his employees who worked with him to their hometowns during the lockdown period in the first wave of COVID-19. He was able to do so because of his close relationship with a local politician and his previous support for him in his political activities. Another respondent who is a young executive who is not connected to any patronage network in his local area, had been unable to send a mason who was working in their house back to his hometown during the lockdown period. Yet another respondent, similar to the first case, reported to having obtained a coveted food distribution permit with the recommendation of the Chairman of his Urban Council, which had enabled him to sell his fresh vegetable produce through the travel restrictions of the third wave, when many others who lacked the necessary network could not do so.

1 Discussion with key informant, Kotikawatta Mulleriyawa Pradeshiya Sabha area, Colombo District, 02 June 2021.
2 Discussion with key informant, Kotikawatta Mulleriyawa Pradeshiya Sabha area, Colombo District, 02 June 2021.
3 Discussion with key informant, Kolonnawa Urban Council area, Colombo District, 04 June 2021.
These anecdotes demonstrate the difference between how easily one can be exempted from state rules and regulations on COVID-19 if one is connected to a patronage network, and the disadvantage of not being connected to such a network. Political patronage also worked in the pandemic situation to satisfy clients by allowing them to manipulate COVID-19 regulations. This type of patronage then gives rise to what Partha Chatterjee has termed ‘political society’ (2004), referring to that section of society which uses informal and extra-institutional means to access the state due either to the unavailability of alternatives or simply the greater effectiveness of such means.

However, because of limited resources and high demand during this time period, the utility of these patronage networks in gaining access to state services was limited. As a result, many people who had previously relied on such networks were disappointed in certain situations because they could not fully reap the benefits or achieve the desired outcomes through their connections. For instance, a labourer at a local Urban Council reported to be extremely dissatisfied with the fact that the second dose of the AstraZeneca vaccination, which they would have received as a Council employee, was given to relatives of the Chairman of the urban council. These employees at the local council are also beneficiaries of the patronage network, and they were hired into the Urban Council as a result of these established networks. However, because the nature and availability of resources during COVID-19 are different, such networks may struggle to function and provide benefits as effectively as they did previously. Increased scarcity also has implications for issues of social equality, which I take up in the next section.

**Patronage networks and inequalities**

As previously stated, those who have connections in a patronage network often have easier access to services than those who do not. This had resulted in a situation in which one group of
people could reap the benefits of such services at a disproportionately higher rate than another. Therefore, patronage networks have contributed to the creation of even more inequality in society during the COVID-19 period.

For instance, there were reports of the government’s Rs. 5000 allowance being distributed in accordance with state regulations, and in certain instances by manipulating the process. Individuals with patronage networks, for example, were exempt from the eligibility criteria and did not face a background check by the local officials in charge of allocating the allowance. On the other hand, some families who were not part of any patronage networks found it difficult to obtain the allowance and were required to follow the regulations in order to qualify and receive it. I reproduce below two stories from the field illustrative of this reality.

One respondent is a retired government employee with ties to the local patronage network, who is frequently seen participating in party mobilisation activities in his area during election season. He has two families living in his household, i.e. him and his wife as well as his son and daughter-in-law. He was able to obtain allowances for each family through his patronage network\(^5\). Another respondent, on the other hand, is an employee in the private sector who is not involved in any political activities. He too has multiple families living in his house, but was unable to obtain allowances for each family because he was not closely connected to a patronage network. He claimed he later approached one of his contacts, who had connections with a member in the local Pradeshiya Sabha, and was able to obtain allowances for each family in his household\(^6\). This latter example is a particularly apt one in relation to the point I am making here, namely that the respondent’s realisation and actions indicate that approaching the patronage network was deemed more advantageous to him in obtaining the allowance than attempting to obtain it through formal means.

\(^5\) Discussion with key informant, Kotikawatta Mulleriyawa Pradeshiya Sabha area, Colombo District, 04 June 2021.

\(^6\) Discussion with key informant, Kotikawatta Mulleriyawa Pradeshiya Sabha area, Colombo District, 05 June 2021.
In yet another example, a respondent who works as the Secretary of her community’s Samurdhi Society, and happens to be the sister of a local politician in that area, shared that she took the lead in distributing the Rs. 5000 allowance in her village. She had advised the Grama Sevaka and Samurdhi officers of the village to identify the area’s low-income earners. However, many people had been dissatisfied with the way beneficiaries were identified and came into conflict with her because they believed the process was unfair. Many had claimed she gave the allowance to people in her close circle and within her own political network. In this case, possible favouritism seems to have contributed to disproportionate access to state-sponsored welfare schemes.

In April 2021, the media reported an incident where people in the Ratmalana area complained that they were handed tokens based on a pre-prepared list, but when relief was distributed, it was based on favouritism, forcing them to wait in long lines for hours (The 5000 that heated up Ratmalana, 2021). Transparency International (ENSURING COVID-19 RELIEF REACHES SRI LANKA’S PEOPLE, 2020) also raised concerns about malpractices in the distribution of COVID-19 relief to disadvantaged families. TI also reported on an allegation that a local council member used the relief as a campaign tool by deciding who would receive it.

The main observation here is that these networks are primarily used to manipulate the existing system in order to obtain certain services in an unreasonable or disproportionate manner. This also created a situation in which people who were not connected to a political patronage network were unable to secure access to special provisions while others were able to.

Asquith (2019) expounding Bourdieu’s conception of social capital notes how it “is shaped by the material, cultural and symbolic status of the individual and her/his family, status in the community, economic situation and engagement in certain forms of cultural activity. Therefore, the volume of social capital that an individual

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7 Discussion with key informant, Beruwala Pradeshiya Sabha area, Kalutara District, 16 June 2021.
holds depends upon the size of his/her network and the cultural and economic capital that is possessed by the members of the network.” (p. 32) As such, inequalities and exclusion are implied in the very idea of social capital, and come to occupy a central position when social capital is made to be the chief means of mediation in a situation. While it is true that the function of patronage politics has enabled those who are less powerful in society to benefit from the network as Chatterjee’s political society thesis also posits, the very tendency to view what should be a right and an entitlement as a ‘benefit’ is the primary danger of this sort of patronage politics infiltrating into relief distribution schemes.

**The importance of mediators in accessing state services**

We have seen the critical role of mediators within political patronage networks in gaining access to state services or obtaining special exceptions from COVID-19 rules and regulations in the previous sections. The term ‘mediator’ in this context refers to a person who connects the general public to state services or assists in obtaining a special exception from COVID-19 rules and regulations.

Apart from mediators in the political patronage network, employees in the healthcare sector, officers in the police and military, and bureaucrats can all be viewed as potential mediators who could assist in obtaining of COVID-19-related state services and exemptions. However, the primary goal of this section is to describe the role of various types of mediators in patronage networks.

**Mediators in the political patronage network**

During the COVID-19 pandemic, mediators in political patronage networks became more visible and noticeable. Such mediators are at once part of the political patronage network as well as other social networks in their respective villages, which sometimes encourages them to provide services even beyond the scope of the patronage network.
For instance, a respondent who is a Govi Niyamaka and former Pradeshiya Sabha member shared how he contributed to the smooth execution of the vaccination drive of his area. He is also a member of several community-based organisations and is actively involved in social work such as shramadhanas and blood donation initiatives. Now a supporter of a local politician, he had been put in charge of making the necessary arrangements with the help of a local youth group to ensure the vaccination process at the centre went smoothly. At this centre, both the respondent and youth group made an effort to provide proper seating, ensure that sanitisation requirements were met, distribute water bottles to those waiting in line, and provide refreshments to the vaccinated. The mediators in this situation ensured that the message about the vaccination centre reached a large number of people, which helped attract voters, non-voters, and people from both inside and outside of the patronage network.

It is also worth noting that in this incident, the vaccination centre was a local Buddhist temple. The ideology promoted by this choice of location coincides with the agenda promoted by a certain political party during the previous Presidential election. As such, this could be considered as strengthening, either intentionally or unintentionally, the support base of this political party.

Similarly, another respondent who was a former local political candidate for the Pradeshiya Sabha elections, and is currently a Samurdhi officer, was put in charge of distributing the Rs. 5000 allowance in his area. The officer had used his previous political connections to help with the distribution. He claimed to have made certain that the allowance was distributed to both people within and outside of the patronage network in the area.

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8 Discussion with key informant, Kotikawatta Mulleriyawa Pradeshiya Sabha area, Colombo District, 08 June 2021.

9 Discussion with key informant, Kotikawatta Mulleriyawa Pradeshiya Sabha area, Colombo District, 16 June 2021.
The above two incidents indicate that mediators play a dual role in strengthening the patronage network and other societal networks in the community, both indirectly and directly, due to their broad reach and engagement within their local areas. These mediators ensure that the network functions and that the process runs smoothly. The patronage network is designed in such a way that it strives to reach the ground in the most efficient way possible. Most of the time, the mediators and networks established on the ground that are largely used by politicians for political motives are also some of the best networks for organising and implementing such activities within local communities.

Patronage networks have become more successful in establishing themselves on the ground since the outbreak of the pandemic. They have done so by focusing on providing COVID-19-related benefits to their people in order to meet the demands of the time. Regardless of this success, it is necessary to keep in mind that using these same patronage networks to access services during the pandemic time has also resulted in disparities.

*Mediators in the healthcare sector*

With the onset of COVID-19 in Sri Lanka, employees from the healthcare sector received more recognition. In order to recognise and acknowledge the importance of the health sector and its services during this critical period, a campaign called ‘Suwa Wiruwo’ was launched in 2020, which received widespread attention. This campaign promoted the idea that the public should treat healthcare workers with utmost respect, as they were largely responsible for spearheading the national fight against COVID-19. The ‘Suwa Wiruwo’ campaign was successful in gaining the desired public attention.

Employees in the health sector have also received rewards such as special holiday packages from well-known hotel chains as a form of gratitude for their tireless efforts (*Cinnamon Hotels & Resorts offers a holiday package for “Suwa-Sewa Wiruwo”, 2020*). Furthermore,
in comparison to any other sector, employees in the health sector have gained an advantage in terms of being able to bargain for the improvement of their labour rights during this time.

Most importantly, people in local communities began to recognise the significance of certain healthcare workers due to their important role during the COVID-19 period. One of the study’s respondents stated that previously they used to address the Public Health Inspector (PHI) in their area as “Kunu Mahathaya” (Waste Management Officer), referring to his job as investigating improper waste disposal in the area. However, with the emergence of COVID-19, the locals’ perception of the PHI’s job have shifted, and many see them as providing an important service to the community. When applying Bourdeiu’s understanding of social capital in this context, individuals who have healthcare sector employees in their social networks find it useful to have such connections to access state services. However, this has largely occurred in a manner in which citizens use them to manipulate COVID-19 regulations and the process in place in order to receive an efficient and timely service.

It is also worth noting the distinction between the mediation of healthcare employees and the mediation of the political patronage network in terms of access to state services. The involvement of healthcare sector employees is unavoidable in this equation due to the nature of the COVID-19 crisis, but they are not directly involved with state services through the established hierarchical network that is set up to collect votes. Many respondents revealed that they themselves or people they know received assistance from employees in the health sector for purposes such as quickly performing PCR tests upon the passing away of a dear one, in order to conduct their final rituals in time. In this context, where people’s feelings are at stake, many claimed to have relied on contacts with healthcare workers. The excerpt reproduced below speaks directly to this fact:

My uncle died during the third wave of COVID-19. He died shortly after being admitted to one of the city’s public hospitals. The hospital staff told me that they will have to do a post-mortem, and I was asked to contact the police in my police area and get a police officer to conduct the post-mortem. Even after contacting the
police station through a policeman that I knew, I was not able to get a police officer for the post-mortem process. I then approached the Chairman of my local Urban Council to expedite the process. The chairman sent one of his employees to the police station, but I still couldn’t get a police officer in time. My final option was to approach a parliamentarian that I know. I knew the parliamentarian’s cousin brother very closely. Once the parliamentarian’s cousin brother asked me to help him during the election season to mobilise some votes from my networks. I remember I somehow managed to get a significant number of votes for him at the time, even though I didn’t personally support his political party. After speaking to him and explaining my situation he quickly arranged for a police officer. But after the post-mortem, I was told that they had to do a PCR test to release the body, and that this process could take up to two days. I knew a nurse and another person who works for the Ministry of Health, and they helped me to complete the process in less than two days. On the seventh day following my Uncle’s death, we had planned an almsgiving, but the monk of the local temple in our area refused to attend because of safety and health concerns. Then I spoke with one of my neighbours who said that he might be able to help me with getting a monk for the almsgiving. My neighbour is also a party mobiliser of one of the local ministers. Through him and his contacts, I was able to get a monk from another temple for the almsgiving in time.10

This account sheds light on the various types of social networks that have emerged during this time period and were being used to gain access to various services. The most intriguing aspect of his case is how healthcare workers are also emerging as an extremely important part of the social network when it comes to accessing state services.

Two other respondents also provided similar accounts. In one case, the respondent’s father had died while at home during the second wave of COVID-19, and had later been taken to the hospital. To speed up the PCR process, they had approached one of their relatives, an ambulance driver, who had been able to hand over

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10 Discussion with key informant, Kolonnawa Urban Council area, Colombo District, 04 June 2021.
the body to the deceased’s family with all the required documents without conducting the PCR test\textsuperscript{11}. In the second case, the respondent who is a marketing officer had been able to obtain the first dose of the AstraZeneca vaccine through a nurse who was one of his clients, under the quota set aside for essential and frontline workers by the state\textsuperscript{12}.

All three examples above show that it is not only the mediators of political patronage networks who are crucial in securing access to much needed services and exemptions during the pandemic, but also employees of the healthcare sector. Drawing on Chatterjee’s categories, it seems that employees in the healthcare sector work both as part of the formal and institutional setup in mitigating COVID-19, and also as part of ‘political society’, assisting people in their social networks to access state services in informal and extra-institutional ways. In doing so, they have amassed considerable recognition in social networks, and hence the arrangement may be seen as a horizontal one of mutual benefit (Putnam, 1993, as cited in Gelderblom, 2018, p. 4), which then translates into ‘social capital’ as Bourdieu would have it.

\textit{Integration of political patronage networks in to the public healthcare sector}

In the pandemic, healthcare workers became more involved and visible in people’s social networks. The role of political patronage networks during the pandemic, on the other hand, followed a well-structured hierarchy. Political leadership and advisory roles were prominent in COVID-19 control committees at the national and local levels. Residents at several local areas were seen thanking their elected representatives for bringing the vaccination programme to their communities by putting up posters and banners (please refer figures below).

\textsuperscript{11} Discussion with key informant, Kotikawatta Mulleriyawa Pradeshiya Sabha area, Colombo District, 14 June 2021.

\textsuperscript{12} Discussion with key informant, Kotikawatta Mulleriyawa Pradeshiya Sabha area, Colombo District, 14 June 2021.
Figure 1: Locals thank Ramesh Pathirana, Minister of Plantations, and Priyantha Sahabandu, Mayor of the Galle Municipal Council, for bringing the vaccination programme to Madawalamulla, Galle District.

Figure 2: Locals thank the President, Prime Minister, and Johnston Fernando, Member of Parliament, for bringing the COVID-19 vaccination programme to Hiriyala, Kurunegala District.
During the early stages of the vaccination programme, when the number of vaccines available was limited and provided on a priority basis, patronage networks were effective in ensuring quick access to vaccines. One of the respondents in an Urban Council area chosen for this study spoke about two entrances to the MOH office, where the vaccination programme was being carried out. There had been a long line at the main entrance, and some people had gone through another entrance of the centre in case they knew someone inside the office and could thus get the vaccinations quickly. These people entering from the other entrance were those who had connections with the employees of the Urban Council. These Urban Council employees, who are supporters of various other Council members, were hired into the Urban Council through patronage networks as well. They, in turn, had been assisting others in their networks to enter the vaccination centre through the side entrance.\textsuperscript{13}

There were several other instances where political patronage was used to gain easy access to vaccines, and in most of these cases, it was not disrupted or hampered by healthcare sector employees who work at the vaccination centres. Thus, even if one had no connections to employees in the health sector, being a part of a patronage network provided more opportunities to access health-related services. As a result, political patronage networks have continued to be an

\textsuperscript{13} Discussion with key informant, Colombo District, 14 June 2021.
important part of the larger social network during the pandemic. Unlike employees in the healthcare sector, politicians will continue to advance in social networks as powerful agents in the state-society relationship through patronage politics.

Conclusion

During the COVID-19 period, the role of the state in the lives of citizens has become increasingly important. Citizens approach the state to obtain COVID-19-related services such as vaccinations, and are also required to follow state rules in order to mitigate the spread of the virus, such as adhering to travel restrictions. In both cases, the state’s involvement with society has grown. In practice, social networks influence the majority of these instances of engagement. Employees in the healthcare sector, in particular, are becoming important mediators in these social networks. However, the healthcare sector employees’ role as a powerful mediator between the state and society is limited by the nature of their involvement in social networks, which is mostly horizontal, interpersonal, and ends with the completion of a specific task. Political patronage networks, on the other hand, are actively engaged when society seeks to access the state or vice versa, even before and beyond the pandemic period. In effect, therefore, one sees a de facto suspension of formal democratic institutions and processes in favour of more fluid and largely extra-institutional means of engaging with the state, in a manifestation of what Chatterjee has termed ‘political society’. Even though, after Chatterjee, we could concede that these seemingly ‘anti-democratic’ methods in fact empower those in the margins in a manner that formal democracy has hardly been able to, the function of political patronage networks has also sustained and exacerbated disparities in ways that quite undermine the spirit of democracy, as particularly evidenced during the pandemic.
References


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