DISTRESS OF INTER-STATE MIGRANT LABOURERS FROM ASSAM DURING NATIONWIDE COVID-19 LOCKDOWN 2020: A CRISIS WITHIN THE CRISIS

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Abstract

COVID-19 had emerged in world in December 2019 and spread to different countries through international movements. In India, the first positive case found in the state of Kerala on 30th January 2020, till 26th August 2020 there were 32, 34,474 corona virus infected cases reported in India and to reduce the spread of COVID-19 government of India imposed nationwide lockdown on 25th March, 2020. During this COVID-19 lockdown people had no money to buy food and their basic necessities. Thousands of migrant workers struggled for their livelihood and they tried to reach their own home at the earliest, many of them reach their home and several died at streets and railway tracks. Some of were just waiting in their migrant place to over the lockdown. Overall, they faced very hard situation during the lockdown period because most of them were lost their earning source. So, this paper tries to attempt the study of impact of COVID 19 on the livelihood of migrant workers during the period of lockdown.

Keywords: Migrant Workers, Assam, Lockdown and COVID-19.

INTRODUCTION

People migrate from one place to another for various reasons and purposes, the most obvious being economic gain, achieving a higher standard of living, security, poverty alleviation, discrimination, educational opportunities etc. Movements are sometimes voluntarily and at other times, it is forced. It is predicted that number of migrants worldwide will almost double from 214 million in 2010 to 405 million by 2050 because of demographic disparity, environmental change, new political and economic dynamics, technological revolutions, and social networks (World Migration Report, 2010). The United Nations Population Division (UNDP) has defined migrants as "persons who move to a country other than that of their usual residence for a period of at least one year, so that the country of destination effectively becomes their new country of usual residence". When workers are not getting employment and livelihood and they want their economic improvement, people are migrated to another place (Bhagat, Reshmi, Sahoo, Roy & Govil, 2020). In the whole world, it has been estimated that the total migrant is 164 million, comprising 4.7 percent of the total labour force of the world (International Labour Organization, 2020). India has to be the largest

country of origin of international migrants with a 17.5 million across the world (Global Migration Report, 2020). India also received the highest remittance of \$78.6 billion from Indian livings abroad. The internal migration (inter and intra-state) in India increased from 314.5 million to 455.8 million in between 2001 and 2011 with the figure of migrant main workers rising up from 100.6 million in 2001 to 139.1 million in 2011 (Census of India, 2001& 2011). The Uttar Pradesh, Bihar, Jharkhand, Odisha, Madhya Pradesh, Rajasthan, Chhattisgarh, West Bengal and the Northeastern states are major sources of working-age Indian population who migrated to other Indian states such as Maharashtra, Delhi, Kerala, etc. in search of the livelihood. The internal migration of labourers has played an important role in every sector of Indian economy. More than 20% of the Indian workforces are engaged in informal sector and MSMEs.

Corona virus disease is a severe acute respiratory syndrome virus. Corona virus disease 19 (COVID-19), originated at Wuhan city of China in December 2019. Later it was rapidly widespread with confirmed cases in almost every country across the world and had become a new global pandemic. The World Health Organization coined the term COVID-19 and declared this novel corona virus disease as a pandemic on March 11, 2020. As of May 8th, the World Health Organization (WHO) had declared 3,759,967 positive COVID-cases, and the number of death COVID-19 had reached 259,474 worldwide (www.who.int). On January 30th 2020, the Director-General Dr. Adhanom Ghebreyesus Tedros declared COVID-19 as a public health emergency of international concern (www.euro.who.int). The first positive case in India was found in the state of Kerala on 30th January, 2020. Though initially India had relatively less number of COVID-19 infected cases compared with UK and USA, but seen cases and death rate started rising since the end week of March 2020, especially in states like Maharashtra, Gujarat and Tamil Nadu. As on 26th August 2020 there were 32, 34,474corona virus infected cases in India and 94,592 cases in Assam whilst the number of reported deaths were 59,449 and 260 respectively in India and Assam (Govt. of India, 2020). To prevent the virus from spreading, the Indian government imposed a nationwide lockdown that was full lockdown, for 40 days in two phases from March 25 to May 3, 2020, and a partial lockdown for 28 days in two phases from May 4 to May 31, 2020. The protracted lockdown paralysed the economy, hurting all or parts of the three sectors of the economy: agriculture, industry, and services. As a result, aggregate demand fall, hurting the manufacturing process and labour market, as well as trade and industry, supply chains, and the public health system (Guha, Islam & Hussain, 2020).

More than 90% of migrant workers in India had no access to rations from government stores and were not paid their wages during the initial period of full lockdown (The Hindu, 2020). At the announcement of the lockdown, millions of migrants and informal sector workers in India were become jobless, with only enough funds to support themselves for a week or two at most. Many of them lacked ration cards, preventing them from receiving food aid. As a result, mass exoduses of people fleeing cities return to their villages on foot, covering hundreds of kilometers (The Times of India, 2020). Because factories, businesses, and workplaces were locked during the lockdown, millions of migratory workers faced a loss of income, a food crisis, and anxiety about their future.

Objectives of the Study

1) To study the impact of COVID-19 lockdown on the lifestyle of interstate migrant labourers.

2) To study the impact of COVID-19 lockdown on working environment of interstate migrant labourers.

Literature Review

Khanna (2020) mentioned that due to the lockout and the resulting threat of recession, millions of migrant workers are expected to lose their jobs in India. Many migrant labourers have returned to their villages, and many more are anxiously awaiting the lifting of the lockdown. Those who work in unorganised sectors, do not have written contracts, or whose contracts are about to expire have a greater danger. Suresh, James and R.S.J. (2020) Grant workers in India are more likely to contract the disease because they live and work in megacities in crowded conditions that do not allow for social distancing. Even in normal circumstances, migrant workers face difficulties accessing health care due to a lack of health insurance, high costs, administrative hurdles, a lack of public health infrastructure, and a lack of access to these facilities. The sudden lockdown caused by Covid left lakhs of migrant workers in India stranded and on the road, having lost jobs and being deprived of income, food, and shelter. Lakhs of people sought to return home on foot, only to be shuttled into hurriedly constructed shelters and relief camps as a last-minute reaction to the migrant crisis. Peter (2021) mentioned that respondents are from Tamil Nadu, Odisha, Assam, Uttar Pradesh, and West Bengal. Contract workers live in company quarters, whereas other respondents live in labour market premises in rented flats and houses. Migrant workers in this study are aware of the coronavirus, at least one symptom, and preventative actions. Corona afflicted 17.1 percent of respondents, and they received adequate medical care. When the lockdown was announced, around 42 percent of migrants left Kerala, while the remaining 61 percent remained. They were in financial difficulty as a result of the loss of their employment, so they borrowed money from friends, contractors, and relatives, and they are working hard to repay this money. They had access to meals through the community kitchen during the lockdown.

Methodology

Assam is situated in the North-Eastern part of India. According to 2011 census, the total number population in Assam was 31,169,272 and the number of inter-state migrant labourers in Assam is 496 thousand which is highest among the North-Eastern states. In this study both primary and secondary data were used. In this study primary data has been collected through telephonic interview with 100 labourers from different districts of Assam. Since it is not possible to collect data from each and every migrant labourers, therefore to collect the primary data convenient sampling method was used. To collect the data a self structured questionnaire was made and accordingly interview was conducted. Moreover, secondary data was collected from various journals, newspapers, books, websites etc. To analysed the overall experience of lockdown Likert scale has been used.

Result and Discussion

Changes in lifestyle and daily habits due to lockdown-

Туре	Less than before	More than before	Same
Food expenses	27	36	37
Clothing	55	15	30
Cosmetics	70	5	25
Health expenses	35	25	40
Sleeping time	20	40	40
Extracurricular activities	20	61	19
Family relation	15	65	20
Use of mobile	10	70	20

Table-1

Source: Field Study, September 2021

In the table-1 it is seen that among the 100 workers, majority workers food expenditure remain same and food expenses 36 labourers had increased because people keep cooking and eating while sitting at home. In the lockdown period, people's spending on cloths reduced because people had no place to go and people were afraid of what would happen in the future. During that period workers cosmetic needs reduced because people did not go out yet. There was no need for more using cosmetic just by staying at home. Health expenses of 40 labourers remain same because people were

afraid to go hospitals due to COVID-19. COVID-19 period gives people more time and therefore sleeping time was getting more but there was tension about the work of the people and that's why peoples sleeping time was getting same. During this pandemic, more than 60 percent labours spend their time in extracurricular activities, family relations and use of mobiles workers had no work to do. So the social connectedness of the people was increased.

□ Sector wise number of workers and number of workers loss their job due to lockdown-

Types of work	No. of workers	No. of workers loss their work during lockdown
Fabrication	7	1
Construction	15	7
Hospitality & Restaurant	23	18
Factories	20	4
Mall	13	10
Casual labour	6	6
Business	5	3
IT	3	0
Others	8	3

Source: Field Study, September 2021

In table 2 it is seen that labourers engaged in fabrication, factories and IT had not badly affected by lockdown they had their job though some of them lost their job it was only for temporary basis due to lockdown. Mainly labourers engaged in hospitality & restaurant, constriction and mall, heavily affected by the lockdown. Casual labourers lost their job because people were stayed at home during pandemic.

□ Numbers of workers have job and loss job-

Table	e-3
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Types		No. of workers
Have job	Have job but not working	27
	Working from home	14
	Working in office	7
Loss job	Temporarily loss	25
	Permanently loss	10
	Loss job and back to the home	11
	Loss job and staying there	6

Source: Field Study, September 2021

In table-3 it is seen that 48 workers had their job during lockdown, out of which 27 workers were not working though they had job because job place was closed during lockdown but still they were getting salary. Some workers working from home because they are either work on IT companies or doing high position job. During lockdown 52 workers lost their job some of them lost their job permanently, those who worked on restaurants, mall etc. and some of them lost temporarily for example construction workers. Daily wage workers have lost their job and they returned to home because there is no other source of their earnings.

Overall experience of lockdown-

Table-4

Not at all painful	Little bit painful	Neutral	Painful	More painful
2	7	10	16	65

Source: Field Study, September 2021

In table-4 only 2 labourers were hurting during this lockdown because they were got full salary without doing job. 7 workers were faced little bit painful situation because they had job but their working hour was increased. 10 labourers were doing job and their working hour was same. Among 100 migrant workers, 16 were faced painful situation during this pandemic because they loss their job temporarily. Most of the labourers were suffered painful situation because they loss their job and also loss their family members during this pandemic.

Conclusion

The coronavirus outbreak has been accompanied by uncertainty and extraordinary. It is difficult to predict how long and what extent this pandemic will be exist. COVID-19 has badly affected the workers because most of the workers lost their earning source and uncertainty about their job. More worse labourers are mainly daily earning workers. Distress of migration is exacerbated by the rural population's lack of access to land. Distress migration can be addressed by allocating cultivable land or giving strong security under tenural agreements, as well as providing resources for productive production such as seeds, fertilisers, and pesticides.Internal migration may be advantageous in terms of improving job prospects and allocating talented workers to relevant activities. It is critical to work together to provide improved working and living circumstances, decent earnings, favourable terms and conditions of employment, security, and a safety net for migrants in destination locations. Another important route for reducing poverty is the creation of self-employment opportunities in both the source and destination places. It has the potential to slow down the process of distress migration in source areas. Even if people migrate, self-employment opportunities in destination places might provide an alternate source of income if wage work is not available to deal the crisis, government must devise a well crafted strategy. Greater coordination is needed at the national level among government agencies with separate migration and health mandates. There is also need nationwide migration policies, which should accommodate the assistance and protection of migrants arriving from, or facing the prospect of returning to, areas affected by health crisis. The establishment of resilient food systems could reduce the food insecurity and the pressure on migrants to return to their native places.

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