



PSYCHO-SOCIAL AND HEALTH RELATED ISSUES FACED BY LABOR MIGRANTS IN KERALA DURING COVID-19 PANDEMIC

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Abstract

The life of migrant workers in a host state has been a serious issue all the time. This paper tries to identify different psycho-social and health related issues faced by labour migrants in Kerala and how does these issues become vulnerable during pandemic. For this, the researcher's learnings from empirics have been well utilized to evolve the concept and arrive at conclusion. Self-observation of the various psychosocial and health related issues faced by migrant workers in pandemic period supported by document analysis from data derived from articles, journals and news reports has been used for a comprehensive analysis. The most significant findings are the psycho-social issues, which include a high level of anxiety, tension, and dread as a result of disease-related worries. But to certain extent Kerala was the only one Indian state which could provide maximum support for migrant workers to overcome the effect of Covid- 19. But there are negative impacts reflected while implementing the supportive measures to these interstate migrants because of the lack of national level inclusion. A reflective learning from this analysis is that a comprehensive legislative framework is required to accommodate the diverse health and welfare demands of interstate migrant workers.

Keywords: *Psycho-Social issue, Health issues, Labour migrants, Covid-19*



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Introduction

Migration, both international and interstate has been a serious issue and concern to the different states and central governments in Indian socio-political landscape. The migrants and specifically migrant workers resides equally both at urban and rural areas. In India, migrant workers beyond state lines face a variety of issues. Indian social economic and political landscape has been interestingly entwined with these issues which often forms even the basis

of serious political discourses. Some of these difficulties include limited access to health care, social marginalization, inadequate social contact, and lack of integration with the local population, Non-provision of government initiative entitlements, poor access to available schemes and facilities, insufficient and inadequate employee protections, poor quality of housing, heavy workloads, and low wage compared to other local workers, limited access to medical services. The education and health care of children of migrant workers is one among the burning issues to be addressed. Some of them treat their children simply as supporters of their income and curtails their education and development while others participate in school on a part time basis along with attending some work to support the family.

The prime intention of this paper is to identify the different psycho-social and health related issues faced by migrant workers and how does these issues become vulnerable during pandemic. For this, the researcher's learnings from empirics has been well utilized to evolve the concept and arrive at conclusion. The researcher reviewed the secondary data from articles, journals and news reports for a comprehensive analysis.

The life of migrant workers in a host state has been an issue all the time. But in pandemic situations like flood, earthquake and disease spreading the mechanism adopted by migrants to overcome the dangerous situation was always problematic. Identifying the problems faced by migrants during pandemic is a hectic job for authorities. So also identifying the related issues and rectifying those issues became a challenge for both the state as well as central government in every country. According to 2011 census 37 percentage of Indian population were migrant workers. Majority of these workers are daily wage employees. Because of non-availability of agricultural land and other socio-economic challenges, they are forced to abandon their villages (Das, 2020). Despite the fact that a large portion of the population depends on migration to metro cities for a living (Suresh et al., 2020), these workers are among the most vulnerable members of society (Yadav and Priya, 2020). As a result of migration, compared with natives they face many issues in their day today life. Long-term poverty, inadequate housing, cultural differences, linguistic hurdles in a new setting, absence of family support, and discrimination based on their low socioeconomic level are all the issues they face (Choudhari, 2020).

In the last few decades, long-distance migration to Kerala has exploded. Kerala's population structure, labour market scenario, and comparatively high pay, less discrimination both inside and outside the labour market, serve as some of the key draw factors. The

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government has made a variety of initiatives to help labour migrants by introducing welfare programmes, a health insurance programme, and a housing/hostel programme. The government has also taken focused initiatives to improve educational and health-care services. However, the vast majority of labour migrants remain outside the scope of these programmes, as well as the state's social security and social assistance programmes. In this context attempt is also made to analyze Kerala Model Intervention to tackle the issues of migrant workers during pandemic period and how well these intervention strategies helped migrants for sustaining healthy life. Based on this analysis, the researcher explores the up and downs of existing strategies adopted by the government to support the life of migrants in Kerala and suggest some generalized suggestions for future endeavor.

Main text Times New Roman, 12 pt., justified. Articles should be 1.5 spaced and have 2.54 cm (1 inch) margins. Separate paragraphs by one empty line. All abbreviations and acronyms should be defined. To facilitate reader comprehension, abbreviations should be used sparingly/carefully. Article should be free from spelling and grammatical mistakes.

Migration and related issues

The Indian constitution guarantees all citizens the freedom to migrate around the country and the right to work anywhere in the country. However, migratory movements may be considered costly in terms of benefits to potential migrants due to social, political, and economic considerations, and these costs can vary depending on a number of factors, such as infrastructure and communication availability, policies instituted by sending and receiving regions that limit guaranteed rights, host community hostility or accommodation, and the presence of the migrant community and social networks at the destination. Interstate migrant workers' social security and health care are completely ignored, as a large number of them live in bad conditions and are exposed to different health dangers. A substantial majority of people are living in unhealthy and poorly sanitized labour camps and housing clusters. The majority of workers, particularly construction workers, are housed in overcrowded rooms with insufficient amenities. Due to lack of proper healthcare services the disease dissemination happens widely among labor migrants. Majority of interstate migrant workers suffer from health concerns as a result of overtime working. The natural life cycle of migrant workers' demands additional social security safeguards in order to successfully manage their risks by themselves. They move between states, exposing them to varied labour markets and social security systems. Furthermore, for a variety of reasons, access to public and basic services in

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the host state is frequently restricted. Interstate migrant workers' vulnerability is exacerbated by their lack of access to essential services and the inability to transfer their social security benefits. For migratory workers, a lack of access to rights and benefits is a major issue. Employers of migrant workers, as well as government organizations at the state and national levels, pay no attention for providing them with social benefits. Legal and social security mechanism awareness was very poor among them. Health care, welfare, and social security benefits are not available to migrant employees. Migrant employees have difficulties due to non-provisioning of entitlements and the lack of portability of benefits supplied by the federal government and the home state.

The unskilled labour migrants living in unhealthy physical environment making them to disease affected more rapidly. Migrant laborers working on large scale industries like construction, metro projects, quarries, mines, and highway projects work where they faced air and water pollution in a serious manner, which can lead them to serious kidney and respiratory disease. Majority of individuals live in open spaces or improvised shelters, notwithstanding the Contract Labor Act. The contractor or employer failed to provide adequate housing for these workers. Aside from Seasonal Workers, workers who travel to cities for work live in parks and pavements. Slum dwellers, the most of whom are migrants, live in appalling circumstances with limited drinkable water and poor drainage. (Ravi Srivastava, S. K. Sasikumar, 2000). Inadequate safety measures and a lack of knowledge about safety equipment lead to potentially fatal occurrences.

There are a number of central as well as state's social security and health service schemes for migrant workers, but the accessibility and availability were very poor. But there is no common institutional planning mechanism to address human rights violation against the interstate migrants as reported by John, J., Thomas, N, J., Jacob, M and Jacob, N; (2020). In the Pandemic period there are so many initiatives by the government for assisting the Domestic Migrant Workers in India (Kumar, S and Choudhury, S; 2021). How to tackle the migrant's issues and challenges seeks more important during this post pandemic situation as the most adversely affected group belongs to Migrants and their families.

COVID-19 and Migrants

COVID-19 was first reported in December 2019 in China. According to WHO globally 305,914,601 positive cases and 5486304 deaths reported. In India 3.57 crore people affected and 4.84 lakh deaths reported by WHO. This virus originated in China and spread vastly all

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over the country in the beginning of 2020. The transmission of the virus mainly through droplets. In the initial phase the disease adversely affected the entire life in the globe. The sudden lockdown and related issues forced people to move from the workplace to their hometown. The mass reverse migration was the result of the lockdown days and fear for death. Interstate as well as International Migration reversed back in a sudden and massive flow, which generated crucial changes in the socio-economic condition of human life. VandeBharat flights and Sramik trains were the survival mechanism used by lakhs of Indian migrants all over the world.

COVID-19 was a catastrophe in India, where migrant workers are frequently humiliated and unfairly blamed for illness transmission (Lau et al. 2020). They were, unfortunately, one of the most severely afflicted populations. The pandemic had a significant impact on India's internal migration, particularly the poor and destitute. Extreme poverty prolonged starvation, suicidal tendencies, instrumental accidents, inadequate medical care were some of the reasons for the causes of death. Inconsequent of the sudden lockdown declaration a large number of unskilled and semi-skilled workers marched back to their home town with nothing in hand. The reverse migration of workers from host place to their home villages had a significant negative impact on their physical, psychological as well as economic well-being. Around 128 million seasonal and long-term occupationally vulnerable workers livelihoods may have been harmed by the commencement of COVID19. (Vasudevan 2020).

Apart from financial crisis they faced a variety of psychological and sociological issues as a result of numerous concerns about the COVID-19 pandemic. (Choudhari 2020 Migrants are the most disadvantaged groups in society, reliant on daily salaries for living, and in difficulty times they require the community's sympathy and understanding. (Hargreaves et al. 2019). Migrant workers' basic worries mainly revolve around food, housing, medical services, and the risk of disease or spreading an infection, as well as loss of pay, family conflicts, tension, and stress. (Firdaus 2017; Singh- 2020; Das 2016).

In India the rapid spread of COVID-19 forced authorities to impose a sudden declaration of lockdown, as well as extra precautions such as social separation, mask wear, and quarantine, in early 2020. Interstate borders were closed to prevent the disease from spreading farther. Although rules required to prevent the spread of disease, they had a devastating impact on people from all areas of life. People who have put money aside had an advantage over others who had a limited budget. Then there are some that do not have enough resources in their daily
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life and must constantly battle for existence. Internal migrants are people who leave their native places for a number of causes, including cultural persecution, natural calamities, or infrastructure development, in order to better their living conditions and escape poverty (Akinola et al., 2014). Due to lack of funds and considerable cultural differences in their profession, they remain isolated from native communities and are more exposed to dangers than local workers (Fasani and Mazza, 2020). Pandemics, which even harm resourceful people, have a doubly detrimental impact on internal migrant workers as a result of the pandemic crisis' dual power combined with horrible working situation. (Giorgi et al., 2020).

Kerala Model Intervention – An analysis

Kerala's COVID-19 response approach has received a lot of praise. Care for migratory workers is one of its components. Kerala state hosted around three lakh migrant workers in 18,912 camps after government of India declared lockdown on March 25, 2020, according to a report submitted to Supreme Court of India by the Home Ministry on April 8. The administration referred to them as "guest labourers". The economic conditions of their home state is very poor compared with Kerala, in Kerala the daily wage for unskilled workers are high and job opportunity also higher. So people prefer Kerala for mass migration. Apart from that, Kerala offers migrant workers more social security compared to other states. The insurance system started in 2010 provides rupees 15000 per annum to the migrant workers and rupees 25000 and rupees 5 lakhs for in-patient treatment and claim for injuries and impairments respectively. The migrant workers children are encouraged for enrollment in government and are treated equally to Kerala youngsters, receiving free education up to the tenth grade. Despite these provisions, hundreds of migrant workers called for a demand for ending the lockdown and travel arrangement back to home (Arnimesh, S. 2020). As a result, the government amended their pandemic strategies. Instead of free food, a variety of menus tailored to the needs of workers in the North and East Indian states. 24 hours counseling services were available for them. Various health-assistance programs for labour migrants had started by health department. Apart from basic necessities, they were provided with television, indoor game activity aids for enjoyment, and provision for free mobile recharge.

The issue that arose during the COVID-19 shutdown period highlighted the absence of an institutional framework. There was no collaboration between the federal and state administrations prior to the lockout. However, as part of COVID-19 alleviation measures, the Indian government has made a few steps toward establishing an institutional structure for

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management of interstate migrants. The main impediments to seeking health services are people's lack of confidence and distrust to the federal system. Other impediments include language barriers, blind belief, cultural conflict, lack of awareness on health services, and economic difficulties. Poor participation in social protection is due to a number of causes, including informal employment, a lack of awareness, and language problems. Whether a migrant worker has a contract he is eligible for enrolling in social insurance. The COVID-19 outbreak wreaked havoc on the lives of Kerala's labour migrants. In the host state, the people faced a wide range of psychosocial and health concerns.

Psycho- social issues and intervention strategy

The most basic impacts of COVID-19 in labour migrants was economic insecurity. They lost their job and tend to leave from the rented homes because of financial crisis. This economic insecurity created a lot of psychological issues among labor migrants during the lockdown days. (Chander et al., 2020; Kumar et al., 2020). Fear of social exclusion was another distress of labor migrants in Kerala. Inadequate knowledge and Spread of rumors created a pathetic situation in the state in the early days. Jobless workers trashed out from the temporary shelter and the primary needs forced them to protest against authority. (Choudhari, 2020). Messages were circulated that trains were organised by state government for the return of migrant workers during lockdown period. Thousands of workers gathered in Paippad, Kottayam, in the thick of the chaos, asking assistance to return home. (Source: Nair 2020). Protests of this nature were also held in Koothattukulam in Ernakulam district, Pattambi in Palakkad district, Payyannur in Kannur district, and Malappuram district. (Subrahmani, Mathrubhumi, and Shaju) in the year 2020. Footloose labourers protested the low quality of food provided to them at Perumbavoor, Ernakulam district (Indian Express 2020). These protests also revealed the deficiency of communication by migrants. The psychological as well as sociological issues faced by labour migrants are the effect of social exclusion by peoples in the host state. They are vulnerable to loss social status and discrimination by natives.

Many migratory workers used all available ways to reach their destinations during the current COVID outbreak. However, many of them are stranded at borders, including state, district, and national frontiers. Food, shelter, and healthcare are among the immediate concerns of such migrant workers, as is the risk of becoming sick and spreading the infection, salary loss, family concerns, anxiety, and terror. They are occasionally harassed and subjected to negative reactions from the local population. All of this necessitates a strong social safety net.

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Health related issues and intervention mechanism

In response to a Survey by the investigator, it is found that 48.3% of respondents do not have any health insurance facility. Only 28.6% had AAWAZ insurance issued by the State government. During lockdown days Kerala Government has extended help for migrant labours by providing free food kits. During lockdown days Kerala Government has extended help for migrant labours by providing free food kits. The beneficiary groups among migrant labours were identified by the labour department and provision for essential things was carried out by state government. Apart from providing food, strict measures for vaccination taken by labor department, issued notices and call centers help desks to migrant labours. The information passed in their mother tongue for easy understanding and separate health centres for them was implemented by the health department. Domestic care centres, launched in in every districts for housing the migrant families in a safe position.

Major Findings of the Study

India is a country experiencing huge number of internal as well as international migration in recent years. That's why the effect of Covid-19 on the life of every Indian was unpredictable at that time. Based on supporting documents and observations regarding psychosocial and health related issues faced by migrant workers in pandemic period the major findings are listed below.

- The psycho-social issue include high degree of anxieties, stress and fears concern to the disease.
- Migrant workers faced serious nervous breakdown, depression, and psychological disorders because of neglect by the local community.
- Unavailability of food, poor healthcare facility, fear of death, and loss of wages were the main primary issues they faced in the early stages of pandemic.
- Fear of social exclusion is another big problem faced by these migrant workers during the lockdown period. Local language problem, blind belief, cultural bias, illiteracy created an unfavorable response from migrants. They tried to escape from the host state to their native places. For that they forced to break the rules by the government and also forced them to protest against authorities.
- The migrant workers in unorganized sectors living in unhygienic environment, made them disease affected and lack of physical hygiene increased the chance disease

spreading, so proper health mechanism was another issue faced these migrants in the pandemic situation.

- In Kerala, the state government implemented different supporting measures for assisting these groups in healthcare, travelling facilities (sramik train, special bus for railway station, free transport) food supply, mobile recharges, and shelter provision.
- Unavailability of correct urban rural population of migrants in Kerala, spread of rumors, interfere of contractors all these effect on the proper implementation of supporting strategies.
- But in some extent Kerala was the only one Indian state which could provide maximum support for migrant workers to overcome the effect of Covid- 19. But there are negative impacts reflected while implementing the supportive measures to these interstate migrants because of the lack of national level inclusion. A comprehensive legislative framework is required to accommodate the diverse health and welfare demands of interstate migrant workers.

Discussions and Suggestions

According to all the relevant data regarding the migrant workers issues during pandemic, it is clear that there are gaps in Indian pandemic and emergency replication policies that must be addressed in a proper way. Then only inclusion in every section should be fulfilled. The researcher attained some suggestions on these issues based on the relevant data regarding the subject area are

1. Local language literacy programme for interstate migrants in the host state.
2. Life Skill Development workshops for unskilled labours inside the state.
3. Health and awareness classes organized by health department.
4. Maximum enrollment of migrant children in government and aided schools and promote inclusive education.
5. Appointment of multilingual resource teachers in such schools to assist them to access education in a healthy manner.
6. Provision of educational scholarships and incentives for continuing education in the host state.
7. Policy framework should be according to the need of the migrants in the state.

Conclusion

Migration is not a sudden phenomenon, it has a long history and milestones in the evolution of Indian society. Migrants and their families were the most pandemic affected groups all over the world. All over the world corona virus created a fearful situation to continue life in the host state where they staying. The psychological, sociological, and economic conditions of human beings were in a frozen stage for many days. In that condition most vulnerable group was migrant workers mainly people working in unskilled labour markets. After analyzing the relevant data regarding psycho-social and health related issues faced by labour migrants in pandemic situation revealed that the absence of centrally accepted policy implementation is the main cause of all these issues. Consulting with labour migrants after Covid-19 pandemic, the researcher identified some gaps between the central as well as state pandemic resolution all over the country. It is interesting that in all the issues more people retained here and they overcame the pandemic issues equal to local people in Kerala. The main causes of retention is for continuing education of their kids and job opportunity in Kerala. So, inclusion in all sector especially in social and educational circumstances will polish the life of interstate migrants in Kerala.

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