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COVID-19 and Migrant Workers: Challenges and Opportunities for Odisha

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Abstract

Migration is associated with economic endeavours leading to inter and intra state migrations. But the situation arose due to pandemic COVID-19 is panic and became a tragedy in the history of India. The outbreak of Corona Virus with continuous reporting of fatality of the disease created consternation among the workers staying miles away from their near and dears. The imposition of lockdown and shutdown in phased manner also created uncertainty on their food security. The migrants without job and money have no other option to sustain in the host city except coming back to their native land. This desperate movement of huge number of migrants in the pandemic situation has created a bigger challenge for the state to address the life and livelihood issues simultaneously with a limited resource and infrastructure facilities. The increasing trend of COVID and its prolong nature has posed challenge for the state government to contain it and revive the economy at the earliest. Hence, an attempt has been made here to view the influx of migrants to Odisha during a period of health crisis from the dimensions of challenges and opportunities for the state which will pave way to address such vulnerability in future.

Key words: Corona virus disease, migration, Odisha

NB: The views expressed in the paper are those of the authors and not the institution they belong.

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1. Introduction

The outbreak of Corona Virus Disease (Covid-19), has become a global challenge. As on 19th June 2020 it has affected about 213 countries and two international conveyances around the world infecting 8618787 people, out of which 457275 death cases (5.31%) are reported. When we look at the Indian scenario there are 381320 confirmed Corona cases, out of which 12605 are death cases (3.31%). Similarly the confirmed Novel Corona case in Odisha is 4677 including 11 reported death cases (0.24%). As it is contagious and spreading very quickly, it has created an alarming situation across the country. Fears and rumours are going on among the different communities about the disease. It has not only created the health hazards and economic regression but also affected livelihoods of the different sections of people due to declaration of nationwide lockdown from 25th March 2020 to 31st May 2020. Particularly, the migrant workers are worst sufferers who live without a safety net as were looked no-bodies babies. It is worthy to mention here that migrant workers contributing to nearly 80% of the total workforce (Chatterjee, 2020) are treated as the silent contributors to the national economy but till date the government has not a clear database or registration mandate for inter and intra state migrants. Though, a number of measures have been taken by the central as well as the state governments to contain the pandemic Covid-19 and to ease the distress still they are being pulled into the zone of vulnerability by disruption of economic and social life. Hence, it is high time to focus on issues related to migrant workers in the context of Covid-19.

The lockdown decision of government compelled many people to live in anxiety and distress. Due to this pandemic, economic loss at national/ state as well as individual level cannot be ignored, which is becoming an upcoming challenge for food security. A large number of migrant workers and their families, including women and children, had to leave the cities across the country, as the lockdown rendered them jobless and helpless due to lack of social security network. While thousands of migrants were stranded in different parts of the country, many had to walk hundreds of kilometres from cities to their homes. This desperate movement has created problem for the destination state like Odisha by spreading infection to new areas which are asymptomatic, surveillance and screening issues along with quarantine facilities for the migrants, enrolling in PDS and creation of job to ensure their food security etc.

Migration is considered as an integral part of the process of evolution and closely associated with human civilization. Intra and inter migration with respect to a particular geographical area is a continuous process. The word migration connotes temporary or permanent movement or shifting of an individual from one place to another place which is derived from the Latin word 'Migrate' (Change of one's residence). Tracing back to the evolution of human civilization, i.e. from pre-historic Palaeolithic era to Neolithic era it is found that human went on moving in search of food and lead a nomadic life. Later, after settling down in a particular region, human started exploring options to satisfy their needs which pushed them to move from one area to other for appeasing the requirement. History also evidences about the migration in forms of invasions and conquests. Hence, when Geographers are mapping the migration with reference to time and space, the Social Scientists look at the social and economic driving forces behind the mobility. "Migration is a response of human organization to social, economic and demographic forces of the environment" (Kaul, 2005). At the same time it envelops different aspects on the basis of 3 D's such as distance, duration and direction (Behera, 2017).

In post-economic liberalisation era mobility of human beings are mostly influenced by the improved transport and communication system where unavailability of livelihood options in the native area insists people for outward mobility in search of their livelihood options. Sometimes due to development projects people of a particular area also forced to migrate to the neighbouring districts or states. Kaul (2005) highlighted that there are four components of migration movement, i.e. economic, social, technological and environmental, and these are considered interdependence between the sending and receiving areas. This indicates that migration is a complex but integral part of the society as it influences the economic system of the society by bringing economic change whereas it needs to understand the problems encountered by the people at both the receiving and sending end.

Though migration is a by-product of socio-cultural, economic and political arena, most of the time it is viewed in terms of economic progress as it is directly linked with the enhanced economic status of the migrants as well as influences the consumption behaviour of the family. Particularly, in the agrarian state like Odisha where agriculture is considered as a seasonal activity majority of rural population migrate seasonally to different areas in search of alternative livelihood options during lean period. A migrant is a person who moves from one administrative unit to another, with an intention to settle permanently in a different

region or a country (Behera, 2017). But seasonal migrants are having special characteristics as they migrate internally from rural set-up to urban or industrial areas in search of their livelihood which is generally categorized as labour-migration. The abject poverty and unavailability of adequate employment opportunity or livelihood options in the locality forces rural people to migrate to more developed areas. Besides, lack of interest in agriculture and exploring employment opportunity in the industrial area or trade centre matching to the aspiration are the major motivational factors of internal migration for the youth mass. As recorded in Census 2011, about 37 per cent of the total population in India are internal migrants (Rajan and Sami, 2020) and with change of years the trend is in an increasing order. Basically, unequal economic development causes short duration internal migration in the form of inter-state, inter-district or intra-district migration. Among the migrants in both rural and urban areas nearly 99 per cent were internal migrants out of which 91 per cent migrate from the rural areas (Behera, 2017).

Many migration studies are carried out focusing on push and pull factors (Samal and Meher, 2012) as well as analysing positive and negative factors. But during the pandemic COVID-19 situation issues of reverse migration go beyond those factors, for which there is an urgent need to think about the migrants from a different dimension. The outbreak of Corona Virus and the consequent lockdown decision of the government as a preventive and protective measure have a greater impact on the livelihood as well as socio-psychological state of the migrants working in different cities.

When the honourable Prime Minister of India declared nationwide lockdown on 24th March 2020, the migrants who are basically labourers were hopeful of resumption of their work soon. But the second phase lockdown declaration on 14th April 2020 shocked them and forced to stay in anxiety. At that time most of the migrants had already spent their money to meet their day to day need in the lean period. This was an unplanned and unnatural crisis for them. They were exposed to confront with brutality of the house owners as well as hungry stomach. Because of joblessness, hunger and feeling of insecurity thousands of migrants tried to come back to their native land. But it was difficult for them to reach their home due to seize of transport system.

According to an estimate about 20 lakh migrants were aspiring to return to Odisha (Mishra, 2020). It was suggested for removal of travel and other restrictions for migrant workers in a

staggered manner with a proper registration as well as necessary checks and balance system (Damini et al, 2020). In order to manage such a huge influx of population in the period of health crisis was a challenge for the state for surveillance and screening issues along with quarantine facilities as well as job assurance for them. Print media as well as electronic media highlighted the issues in a periphrastic way. Polemic statements about migrant workers from different stakeholders were also coming from different corners of the society. Hence, return of inter-state migrants during pandemic COVID-19 situation drawn attention of administrators, policy makers, civil society organizations as well as heath functionaries. Thus the present work tried to throw light on the coping mechanism adopted by the migrants as well as government to address the issues of migrants. Besides, attempt has been made to analyse the opportunities and challenges emerging before the state government for accommodating the returned migrants as well as their livelihood security.

2. Legal framework for Migration

The Indian Constitution has considered mobility of the individual as a fundamental right under article 19(1) on the basis of which an individual gets freedom to go anywhere and settle anywhere within the Indian territory. When the Emigration Act 1983 regulates the mobility of people to outside India (international Migration), the Inter-State Migrant Workmen (ISMW) Act 1979 deals with the migration of the people within the country. As this paper basically deals with the issues of inter-state migrants during COVID-19 there is a need to look at the provisions and applicability of the ISMW Act 1979.

The applicability of the ISMW Act extends to the establishment or working place where five or more inter-state migrants are engaged, registrations of the employer and the migrants as well as license of the employer are made mandatory. It also gives certain rights to those migrants like:

- i. Equal wage for equal nature of work according to the minimum wage act, 1948 and rules 1954
- During recruitment they are eligible to get non-refundable displacement allowances equal to 50% of monthly wage (15 days wage), home journey allowance as well as wage and food for journey period.
- iii. Provision of suitable accommodation and health check-up facilities.
- iv. Regular payment of wages without any gender discrimination.

- v. Rights to file complain within three months of the happening of incident.
- vi. Violators will be fined or punished with one year imprisonment.

Besides, there are other Acts and Rules which are also applicable for the migrants like

- i. The Workmen's Compensation Act, 1923 and Rules, 1924
- ii. The Minimum Wages Act, 1948 and Rules 1954
- iii. The equal remuneration act, 1976
- iv. The contract labour (regulation and abolition) act, 1970 and rules, 1975
- v. The child labour (prohibition and regulation) act, 1986 and rules, 1994
- vi. The payment of gratuity act, 1972 and rules, 1974
- vii. The unorganised workers' social security act, 2007 and rules 2010
- viii. The building and other construction workers' welfare and cess act, 1996 and rules 2002

However, in order to avoid complex procedure of registration many labourers are going to the work places through agents or through their peer groups for which they are facing problem in later stage.

3. Overview of COVID-19 in Odisha

The novel Corona virus disease was first identified in late December in Wuhan city of China which thereafter rampantly spread across the World. Subsequently when there were 26 confirmed cases reported in India on 15th March 2020, the first case of COVID-19 was detected in Odisha on 16th March 2020. The data shows that instead of lockdown and all sorts of preventive measures the disease is spreading very quickly. Though the first case of covid-19 was found in Odisha after 46 days of detection in India (30th January 2020), till 2nd April 2020 it remained more or less flattened, thereafter shown rising trend when migrants started returning from the neighbouring states, particularly West Bengal. The second phase of rapid rising trend of covid-19 infection cases was started from 6th May 2020 (Figure 1) after the influx of migrants who returned from Surat, followed by Kerala, Tamil Nadu, Maharashtra, Andhra Pradesh, Telengana, and others. Hence, the rapid rising of COVID-19 cases in Odisha is mostly due to the infection to the return migrants, who have mostly come in groups from the high corona infected states of India. The number of positive cases reached 500 after 59 days of detection of first case in Odisha. However, the second 500 cases reached only after

a week. Thereafter in every 6 days 500 positive cases are detected in the state till 1st June 2020, which thereafter gradually decreased.

However, the recovery rate has been increasing rapidly (Figure 1) and crossed more than 50 per cent since 27th May 2020, which is a sign of relief to the state. The recovery rate in the state is also higher than the all-India average. At the same time, death due to COVID-19 has remained very low and reached 11 by 19th June 2020. The fatality rate in the state has also remained much lower (0.24%) compared to all-India level (3.31%) as on 19th June 2020.



Source: COVID-19: Odisha State Dashboard

There is increasing trend in daily positive cases in Odisha with the highest 225 cases found on 13th June 2020 (Figure 2). It is found that during the month of March and April, the curve was flattening, but since Mar 2020 there is rising trend. The infection is mostly concentrated in the 15-40 age group, followed by 41-60 age group (Figure 3). These two age groups constitute 94 per cent of total COVID positive cases in the state. Further majority of the affected persons are from the male group (Figure 4).



Source: COVID-19: Odisha State Dashboard



Source: COVID-19: Odisha State Dashboard



Source: COVID-19: Odisha State Dashboard

It is found from Table 1 that the top 10 districts having high infected cases are Ganjam, Jajapur, Khordha, Balasore, Kendrapada, Cuttack, Bhadrak, Puri, Bolangir, and Jagatsinghpur. These 10 districts constitute more than 75% of the total covid-19 infected cases in Odisha on 14th June. Out of these only Ganjam district has the highest share. Most of the positive cases are from the quarantine centres, indicating that the COVID-19 positive cases in Odisha is dominated by the migrants. However, local cases have also started recently. As per the information of the Health and Family Welfare Dept., Government of Odisha, more than 5 lakhs of migrants have registered to return Odisha. About 543905 Odia migrants have returned by different modes of transport to the state till 14th June 2020 (Times of India, 14th June 2020). But a total number of 202513 tests have been done by 14th June 2020 in the state, out of which only 1.93% are found to be positive. The maximum number of 5612 tests was done on 19th May 2020. Initially the number of tests was low due to availability of only one testing centre in the state, which increased gradually with the increase in the number of testing centres. But after 19th may 2020 the testing has been decreasing gradually and has remained below 4000 during June 2020 (Figure 5). The average number of tests per day increased from 55 during March to 1117 during April and 3921 during May, but decreased to 3344 during June (up to 14). During the whole period only in five days the number of tests crossed 5000, even though the state government had planned to increase the test to 15000 per day. Considering the large influx of migrants to the state, and around 0.43% of the total population has been covered so far, the total COVID testing done by the state may be considered as very low. With the low and declining rate of testing, the threat of COVID would stay for a long time in Odisha, thereby affecting the speed of economic recovery.





Source: Dept. of Health and Family Welfare, Govt. of Odisha

4. Forecasting COVID-19 positive cases

With the rising trend of COVID cases, its forecast may be helpful to the administrators and policy makers for future course of action. Therefore, an attempt has been done here to forecast the COVID positive cases in Odisha. There are a number of forecasting methods. However, we have employed here three different models, viz. Autoregressive Integrated Moving Average (ARIMA)³, Vector Autoregression (VAR)⁴ and Vector Error Correction (VEC)⁵ to forecast COVID cases.

$$d(COVID_t) = c + \sum_{i=1}^p \beta_i d(COVID_{t-i}) + \sum_{i=1}^q \gamma_i u_{t-i} + u_t$$

$$COVID_{t} = \alpha_{0} + \sum_{i=1}^{p} \alpha_{1i} COVID_{t-i} + \sum_{i=0}^{q} \alpha_{2i} TEST_{t-i} + v_{t}$$

⁵Error Correction Model (ECM) enables simultaneous modelling of first difference and level of the variables. It provides the framework for estimating, forecasting and testing of co-integrated systems. The ECM used for forecasting is presented in the following.

$$\Delta COVID_{t} = \alpha_{0} + \sum_{i=1}^{p} \alpha_{1i} \Delta COVID_{t-i} + \sum_{i=0}^{q} \alpha_{2i} \Delta TEST_{t-i} + \lambda ECT_{t-1} + w_{i}$$

³Autoregressive integrated moving average (ARIMA) has been used extensively in forecasting time series variables. It predicts variables using only past values. This model uses both autoregressive and moving average terms after differencing *d* times to transform the series to stationarity denoted by ARIMA (p, d, q) and hence is called autoregressive integrated moving average model. Here p denotes the number of autoregressive terms, *d* is the number of times the series is differenced to become stationary, and q is the number of moving average terms. This study uses the following ARIMA model to forecast positive COVID cases in Odisha.

⁴Vector autoregression (VAR) is a widely used economic technique for multivariate time series modelling, which provides both estimation and forecasting of time series data. Here each variable depends linearly on its own lagged values and lagged values of the other variables in the vector. The vector autoregressive model can be used at level and first difference. In this study, the dependent variable is positive COVID and the independent variable is testing (TEST). The model used is as follows.

The forecast of COVID positive cases by using the above three techniques from 15th June 2020 to 31st July 2020 is presented in Table 2. While the VAR model predicts for a decrease in new COVID positive cases by the end of July 2020, VEC and ARIMA models predict increase in new positive cases by that time. VAR model projects 2.1 times increase in cumulative positive case between 15 June 2020 and 31 July 2020. At the same time, VEC model projects for an increase of 3.8 times and ARIMA model presents an increase of 3.3 times. The results show that cumulative COVID positive cases would be in the range of 8419 to 15469 by 31stJuly 2020. This indicates that the COVID would continue for a long time with the existing trend of testing. The state government should therefore take necessary steps to increase the COVID testing in order to avoid delay in the process of economic recovery and to ensure livelihood restoration of the migrants.

The graphical presentation of daily and cumulative COVID positive cases can be seen from Figures 6&7. It shows that the projection varies in different forecast models. The cumulative positive case is less steep in case of VAR compared to VEC and ARIMA, with highest steep in the case of former.



Figure 6: Forecasting daily new positive COVID cases

Where COVID represents positive COVID cases, TEST represents testing for COVID and ECT represents error correction term.

Source: Authors' calculation using data from Health and Family Welfare Dept., Govt. of Odisha



Figure 7: Projection of cumulative positive cases

5. Infrastructure facilities to handle COVID-19 in Odisha

With the outbreak of COVID-19, there was a big challenge for the government of Odisha to accommodate the COVID affected persons in the state, as the state had very few health infrastructures. Prior to the outbreak of COVID-19 there was 2501 hospitals (including public and private) in the state with only 25650 number of beds (Kapoor et al, 2020). These hospitals were not suitable to accommodate the COVID infected persons as it required isolation. Therefore, the state government established new COVID hospitals in all districts to accommodate the COVID confirmed persons. A total number of 35 COVID hospitals, with 5547 beds and 342 ICUs were established by the state government. The detailed district wise break-up of number of COVID hospitals, beds and ICU is presented in Table 3. The table shows that at least one COVID hospital per district is established in the state, except in Nuapada. The districts with more than one COVID hospitals are Bargarh, Khordha, Puri and Sundargarh. The distribution of COVID beds is relatively uniform in the districts, which

Source: Authors' calculation using data from Health and Family Welfare Dept., Govt. of Odisha

varies from 100 to 200, except in the districts of Keonjhar and Jagatsinghpur, where less than 100 beds and Deogarh, Khordha and Sundargarh, where there are more than 200 beds. Besides, 174 COVID care centres are established in different districts with 20859 bed facilities. Further, in order to facilitate the quarantine of the migrants, the state government has established 17638 temporary medical centres (TMCs) in different Gram Panchayats and Urban Local Bodies of different districts with 820797 beds (Odisha State Dashboard). Besides, the state has allowed home quarantine in some cases where travel history is not from hotspot and the person has no symptoms. They are also abided by maintaining safe distance and without exposing other persons with high risk (Damini et al., 2020). The government has also set up 11 testing centres in different places.

6. Plight of migrants: An Overview

Generally temporary migrants belong to people from poor economic class and mostly from unprivileged or under privileged areas of Odisha. Their destination is also selective basing on the contact with friends and relatives. Though migration is coming under the demographic feature of the society, their contribution to economic growth cannot be ignored. The remittance of migrants supports economic upliftment of the concerned families. Besides, current life style of the people and matching aspiration are major promotional factor for migration. The hierarchy of needs (psychological – safety – belongingness – esteem- selfactualization) as stated by Abraham Maslow (1954) is also applicable for migration factors. When all the earning doors at the locality are closed or inadequate to meet the basic needs of the people, they think about migration as an alternative option of livelihood. A widely-quoted figure based on the 2011 census and on NSSO (National Sample Survey Office) data, asserts that there are 65 million inter-state migrants, of which a third are workers in the informal sector (Dharker, 2020).

The Odisha government has no data base for such migrants. Rough estimates put Odisha's migrant worker population at around 20 lakh⁶. These migrants, particularly the labourers have faced a lot of difficulties due to the national lockdown declared by the central government from 25th March 2020 till 31st May 2020 in different phases to contain the spread of novel coronavirus disease. The sudden announcement of lockdown and the frequent media

https://thewire.in/labour/covid-19-odisha-workers-stranded-because-they-dont-have-aadhaar

coverage on the pandemic of COVID-19 forced them to stay in social, psychological and emotional trauma. When the lockdown to control spread of COVID-19 snatched their bread and butter, their survival in the host city became a question. The government has also not thought about their rehabilitative food security measures before declaration of lockdown. The perception of risk and fear of being infected as well as starvation instigated them to leave the working cities and opt for reverse migration. But seize of transport system made thousands of migrants stranded in different parts of the country whereas some of them tried to reach their native place by walking or cycling. The plight of the migrant worker brings out all that is rotten in today's India: obscene class inequalities, loss of society's moral compass, paralysis of politics and toxic media (Yadav, 2020).

When the lockdown was declared, the migrants desperately started their journey to reach home. Newspapers bearing photographs of migrants walking on roads, railway tracks started coming regularly. All the TV channels, social media also focused on their desire to be with their families. It is well understood from the scenario that at the initial phase of lockdown they became invisible for the planners as well as politicians. But when they have no work, no food and no roof they rushed to the railway stations and bus stands to go back to their native place as no other alternative option was left for them. Since the migrants live in two worlds, i.e. urban insecure employment and stable homeland, they are forced to come back to homeland during such pandemic. The migrants who were staying in densely populated and unhygienic condition, social distancing bore no meaning for them. The only thing in their mind was how to survive. Thus in the crisis of lockdown they came together to the road and desperate crowds at different stations shown in different media were evidence of gravity of situation of the reverse migration.

The migrants who are backbone of the informal sector are felt insecure and trapped. They used to stay in slum areas in a group where house owner's livelihood depends on their rent only. When they have undergone a no work no money situation the house owners forced them to vacate the rooms. Migrants mostly working in small industrial units like garment/ textile industries, gem polishing industries, shoe making industries were struggling for their survival during lockdown period and hence, employers were unable to extend their support. Tragedies of physical torture issues as well as death due to mile long walk have come to lime light also. As they were deprived of accessing the food security cards, they had to remain in

starvation. Hunger and uncertainty as well as messages about the deadly Corona Virus started frightening them and compelled them to return their native place.

When the migrants were walking on the railway tracks and road ways, the scenario questions the imbalance of power between capital and labour as well as the limitations in the State welfare measures. Government has also negotiated with the Chief Ministers of other states to provide food, taken various initiatives to ensure their passage back home and were rescued by the authorities which was too late to address their sufferings. The central government took 53 days to set up NMIS (National Migrant Information System), an online dashboard for the states to put up figures so that they can monitor the movement of people (Dharker, 2020). On the other word, it can be said that the pandemic-induced lockdown has taken the lid off and exposed the existing structural gaps in economic growth of Odisha and India.

In order to bring the migrants home, the state government launched a web portal for the registration of the migrants. However, many workers faced problem in registering due to lack of an Aadhaar unique identity number.⁷ By 9th June 2020, more than five lakhs migrants registered. However, there was no sign of travel arrangement. The women migrants particularly suffered mental stress as nobody heed to their plight.⁸ While some migrants were able to come home by arranging buses, others faced problems in arranging transportation and stranded in different places. Further, the desperate decision to return home brought them together in different places thereby failing to follow physical distancing and regular hand wash, which made them susceptible to COVID. Even though the state government arranged special buses and trains for the return of migrants, they faced a number of problems. The problem did not left the migrants, even after they returned to Odisha. Many complained about the poor facilities & foods provided to them in institutional quarantine centres.⁹ This forced the state government to issue strictures for strong action against such migrants, which put them under stress who had already come across many hurdles due to the lockdown. Even though the state government has declared provision of MGNREGS works to the unskilled migrant workers after quarantine, the semi-skilled and skilled migrant workers have not got any work assurance. These workers who were sending remittances to the family have now become burden on the family as they have no source of earning at present.

⁷Ibid.

⁸<u>https://www.outlookindia.com/website/story/india-news-covid-19-odia-women-migrants-suffer-mental-stress-feel-nobody-heeds-to-their-plight/353325</u>

⁹https://m.thewire.in/article/government/odisha-migrant-workers-quarantine-jobs

7. Steps taken by the Government

Excessive media reporting regarding the fatality of COVID-19 pandemic created havoc among the migrant workers. As these workers were living far away from home in major cities like Delhi, Bombay, Surat, and others where the chance of catching COVID-19 was more as reported by the leading national media, it created panic among the migrant labourers to go back home (Bahinipati et al, 2020). Hence, during the pandemic Covid-19 the desperate reverse migration of lakhs of migrants in starvation on rail tracks and highways of "Shining India" compelled the government to take immediate steps. Besides, they also demanded for intervention and assistance of government in this regard. The Prime Minister of India had a dialogue with all the Chief Ministers of States and as on emergency basis free kitchen for all migrants was provided during the 2nd phase lock down. But nobody monitored that whether it is reached to the targeted people or not. The state government has also taken a number of steps for the relief of migrants. Odisha Government had requested to other State Governments to provide shelter and food to the stranded Odia workers in their state, unless until the transportation system is unlocked. Subsequently special aeroplane, train and bus services were arranged to bring back the stranded workers and those who want to return back. Step has also taken to ensure zero walking inside Odisha. Besides, quarantine camps/temporary medical centres (TMCs) were established at Gram Panchayat levels across the districts of Odisha to keep the migrants for 14 days observation. Different committees were formed to watchdog the Corona situation. The concerned Sarpanchs were delegated with the collector power to manage the quarantine camps of their jurisdiction whereas ward committees are formed involving AWW, ANM, SHG members etc. for surveillance of COVID-19. Odisha's model of intervention in taking measures to protect migrants has been quite effective (Rajan and Sami, 2020).

However, an increasing trend of confirmed Corona cases has been noticed after influx of migrant workers, i.e. from 1st week of May, 2020 though the recovery rate is high and fatality rate is quite low in comparison to other states. The trail of COVID-19 also evidences a wide variation across states as well as districts. But in handling the crisis, Odisha has shown an extraordinary effort instead of its internal health system challenges like inadequate health functionaries, inadequate service delivery system etc. But the geo-physical barriers of the

state for reaching out the health services, low resource base dominated with 23 per cent Scheduled Tribe and 32.59 per cent of the below poverty line population (The New Indian Express 20th July 2019) are becoming major obstacles before management strategy for Corona virus. Hence, the state is facing multiple deprivations in introducing the pre-emptive measures to control the infection (Rout, 2020).

The Central Government has announced the second tranche of COVID-19 relief package for the migrants who do not have NFSA cards or state cards, free ration of 5 Kgs of wheat or rice per person or 1 Kg chana per family per month for two months through the state governments. It planned to entail Rs.3500 Crore and is likely to benefit 8 crore migrants (The Economic Times, 17th May 2020). Besides, additional funding of Rs.40000 Crore was provided for MGNREGS to absorb the return migrants workers as well as rental accommodation incentives to private manufacturing and industrial units to develop affordable housing under Pradhan Mantri Awas Yojana for migrant workers (ibid).

At the same time Odisha Government has announced Rs. 17,000 Crore package to provide employment and income generation opportunities for migrant workers and farmers under special livelihood intervention plan package. The plan will generate employment in sectors such as agriculture, fisheries and animal resources development, MGNREGS, forest, and handlooms & Handicrafts (The New Indian Express, 29th May 2020).

An assistance of Rs. 1500 each to 22 lakh registered construction workers was announced by the State Government (Times of India, 27th March 2020). Odisha Government also declared Rs 62 crore from chief minister's relief fund (CMRF) to pay Rs 2000/-per migrant as an incentive for the returnee migrants who have completed the mandatory institutional quarantine period of 14 days followed by another seven days home quarantine successfully adhering to the prescribed guideline (Times of India, 31stMay 2020). The strategy has been taken in a convergence approach of all departments for enhancing the man days generation from 12 lakh to 20 lakh per day to accommodate the returnee migrants and Panchayati Raj Department, GoO will issue job cards to them (The New Indian Express, 28th May 2020). Besides, steps have been taken for creation of 20 crore man days under MGNREGS to ensure the livelihood of the returned migrants with a target to dig more than 1.3 lakh ponds (India Whispers News Service, 14th June 2020). It is planned to spend Rs 140 crore on skill

development of migrant workers (The New Indian Express, 29th May 2020). As a top-up facility for migrants the government has also announced short term credit provisions to take up different entrepreneur activities.

8. Challenges before the State Government

The state government had to face many challenges in tackling the situation of desperate return of migrants like spreading infection to new areas, surveillance and screening issues along with quarantine facilities and food security measures for the migrants. Most of these migrants returned to Odisha without informing the state government, which has created problems in the management of their stay at the institutional quarantine centres as well as become a major cause for spreading infection as they returned from most infected states. The extraordinary and massive inflow of returnee-migrant workers to their native places in the wake of the imposition of lockdown across the country has brought about a major challenge for ensuring their health, safety and means of livelihood (Orissa Economics Association, 2020).

The migrants who did their registration came in groups by different modes of transport, which became a challenge for the administration to accommodate them in institutional quarantine centres. The government also faced the challenge in the quarantine centre due to indiscipline created by some migrants. Some migrants while on the way to the institutional centres in rural areas flew to their homes without informing the government, which not only became problem for management but also created potential threat for the local spread of coronavirus. Though Government imposed many stringent conditions and restrictions to ensure quarantine of migrants, due to improper quarantine facilities in the TMCs the migrants were reluctant to stay there (Mishra, 2020).

The influx will be a welfare burden on the government for ensuring access to social security schemes. Identification of the returned migrants and interdepartmental coordination to address their livelihood issues with a realistic and holistic approach in order to guarantee their income will be a big challenge. There is a need for accreditation of informal sector and investment in training and skill development of the migrants.

Out-break of Corona virus and subsequent lockdown led the migrants to impoverishment due to loss of livelihood. Their reverse migration will stop the remittance flow which will affect the socio-economic status of the family. It will not only affect their food habits and nutritional status but also impact on the access to health care services and education of the children. They may be deprived from different entitlements and social security schemes. The enrolment of returned migrants under MGNREGA as well as identification of the potential skills with them needs to be taken up immediately. Accordingly they need to come forward for up-gradation of their existing skill matching to the government scheme and register themselves. As these migrants are not only unskilled, but also semi-skilled and skilled, the creation of 20 lakhs man days of employment per day in MGNREGS, as declared by the state government, would only attract the unskilled migrants but not the semi-skilled and skilled migrants. Further, past experience of implementing MGNREGA shows that it has outlived the utility. Time has come to have a fresh look at how to create employment opportunities for all those who have had to leave their homes in search of employment and go to other states (Pandey, 2020). Besides, mere declaration for creation of man days would not suffice as it had not attracted the migrants prior to the COVID situation. However, this can give temporary relief to the migrants. The state government should try to rectify the past mistakes. It should create actual potential and make timely payment for the MGNREGS works; otherwise it would only be a mere slogan.

Looking at the spreading rate of Covid-19 and size of the reverse migration it can be assumed that it will be a massive logistic challenge for the government to ensure exclusive accommodation for the Corona infected patients. Managing/ handling the people in negative pressure isolation area seems a difficult task for the designated personnel. The influx of huge number of migrants to Odisha may be an added constraint to the disease surveillance strategy as they usually forego treatment and resort to unreliable self-medication as well as try to hide them. Besides, during the pandemic Corona situation the migrants are mostly treated as carrier of the disease hence, trust building with the community will be a challenge for the migrants. The community will develop a prejudice of job saturation in the locality. The reverse migrants may influence the sanity of the culture, lifestyle and approach of the local people which needs to be addressed by engaging community.

Further, during unlock period, the inter-district and inter-state mobility of people cannot be restricted which will worsen the situation. In the current testing capacity of the state and facilities to manage Covid and Non-Covid patients will also create implementation challenges. To meet the crisis, State will require more investment on public health sector in economic regression period due to prolong lockdown.

The state government has faced two major challenges: first, to contain the COVID-19 and second, to provide employment to the migrants who have become jobless. Though government is planning to double man days under MGNREGA, it may not be possible in the coming monsoon (Mishra, 2020). It is required to design the employment generation activities plan under MSME which have all time demand like food processing and value addition, stitching and designing etc and involves some sort of skilled or semi-skilled work. The Govt. can utilize the information captured on migrant by "Mo Sahay App". It has collaborated with industry bodies like CII and FICCI and could capture 308 skills demanded across 24 industries (Orissa Economics Association, 2020). Hence, the migrants should be sensitized so that they will come forward to register themselves mentioning their details and about their preferable/ desire area of work.

The other challenge for the state government is to map the skills of the migrants, based on which the employment needs to be generated. Many migrants may not stay after the COVID situation improves and the previous work places open. The state government should therefore make a mapping of the migrants to take stocks of their skills, period of stay, etc. at the earliest at all the gram panchayat level. Accordingly, the state government should develop plans for generating employment. The state government may also need to enrol the migrants in PDS to ensure their food security.

In order to contain the disease, the steps taken by the state government are commendable. It has tried its best to implement the lockdown announced by the central government. Besides, during unlock period the state government has imposed night curfew in all districts and weekend shutdown in 11 most affected districts to contain the rapid increase of COVID. However, the weekend shutdown and duration of night curfew has been criticised on the ground that it would not only neutralise the positive impact of shutdown but would also impact on the loss of man days or livelihood¹⁰. The complete shutdown to half day with strict on the price of perishables. The government may relax the shutdown to half day with strict

¹⁰ P. Sahoo, "It's time state govt rethinks policy of curfew, shutdown", The Times of India, Bhubaneswar, June 16, 2020.

implementation of maintaining physical distance so that the market for perishable goods can function on regular basis. Therefore, the challenge before the government is how to reduce the spread of COVID.

In spite of all the challenge before the state government is to flatten the curve of positive cases. While the test for the detection of COVID cases is required for the detection of confirmed COVID cases, there is slow down in the process of testing. The average testing during the month of June 2010 (up to 14th June) remained below 4000, which is much lower than the announcement of the state government, i.e. 15000 tests per day. Therefore, it is a challenge for the state government to increase the number of testing, which has so far not crossed 5612 tests per day. The government should therefore find the reasons for such low tests. There are complaints that the swab tests are not done for the migrants who have come from most infected states and completed quarantine at panchayat level TMC¹¹, thereby posing potential threat to the locality.

When we look at the available infrastructure and manpower of the health department of Odisha it is clearly visible that both health workforce and infrastructure are unequally distributed across the districts. It is estimated that the Corona situation will spike in July/ August and affect differently across the districts. Hence, there is a need for adequate health functionaries in the periphery of districts. As per the available data currently the ratio of hospital beds to population is found to be 5:10000 which is appearing as a bigger challenge to accommodate such a huge population of Odisha during health crisis.

As the mysterious pneumonia symptom Covid-19 can be controlled only by avoiding infection by social distancing and number of health workers are also now getting infected by this deadly disease it may be a challenge to motivate health functionaries to participate. It will be also a strategic challenge before the government to protect health care workers as well as to ensure supply chain of required PPE kit. In addition to this community outreach for health service providers may become a constraint with limited workforce.

¹¹<u>https://thewirw.in/government/odisha-covid-19-migrant-workers-testing</u>

9. Opportunities for Odisha

The pandemic Covid-19 opened the door for public private partnership in health sector as well as other sectors. The contribution of migrants in informal sector to the state and national economy became visible to all stake holders. The planners are now rethinking on the decentralization of health management system and exploring the local public health facilities as key survival strategy.

The knowledge and skill acquired by the migrants as well as their work experience may be tapped and utilized for entrepreneurship development in Odisha which will support the economic growth strategy of the state. Their exposure to outer world have developed better bargain power and ability within them which is required to enter into the business arena. There will be no more labour shortage for different skilled and semi-skilled activities. The idea of migrant labours has created several advantages for the selected sectors, for instance the migrant labours can assist in making market entry mode, marketing strategies selection decisions and in tackling business environmental barriers. Skilled migration has become a key strategy in combating ageing workforce as well as skill shortage in increased globalized economies (Shariff & Ghani, 2016).

Although of diverse nature, these workers do possess skills and work experience which could be effectively utilised to provide training to the peer group in the rural and semi-urban areas of the state. Similarly, it could be reasonably expected that some returnee-migrants, especially from industrially dynamic states like Maharashtra, Gujarat and Rajasthan, would have imbibed the quality of entrepreneurship which could be supported by the Government of Odisha to create employment opportunities (Orissa Economics Association, 2020). The state government should take benefit of these opportunities for the rapid economic growth of Odisha.

The crisis of migrant workers during the COVID-19 has now exposed the absence of comprehensive official statistics about the migrant workers by state and their contribution to their state of origin. There is an urgent need to create a database for the migrant workers. At panchayat level, a system should be created for the registration of every migrant worker. This would, inter alia, help the government to extend benefits to the workers during any crisis like the COVID-19 (Ibid). The endeavour of Central government 'One nation one ration card' can

also be taken as a drive by the Odisha Government to ensure the food security of these people in the future and the situation like COVID-19 will be no more panic for them.

10. Way forward

Migration cannot be checked as it involves economic issues. The migrants need to register at the panchayat level with their details which will be subsequently helpful for the labour department and district administration to tackle any unforeseen problem like COVID-19. There is a need to develop a pro-migrant policy and stringent mechanism to monitor the working condition of the migrants in regular intervals. Besides, the migrants should be aware about their rights, provisions and claims. Public Distribution Services (PDS) may be extended by adopting one nation one card by e-transaction of AADHAR card.

Those who do not prefer to go back to their work destination there is a need for generating employment opportunities for them. More working days under MGNREGA should be incorporated to absorb the returned migrants. Besides, identifying the knowledge and skill, skill development trainings need to be organized to absorb them in local industries. Cottage and handloom industries of Odisha may be restructured and revived with required market linkage strategies. Agri-allied activities along with related infrastructural development should be undertaken along with the storage and value addition of the agri-products.

The public health system with improved diagnostic services needs to be strengthened. Emphasis may be given on development of district level health plan. Development of different models for different districts are required as the geo-physical situation of one district varies from other.

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Sl. No.	District	No. of	% share	
		positive cases		
1	Ganjam	693	17.73	
2	Cuttack	509	13.02	
3	Khordha	366	9.36	
4	Jajpur	341	8.72	
5	Balasore	214	5.47	
6	Kendrapada	181	4.63	
7	Bhadrak	177	4.53	
8	Puri	163	4.17	
9	Jagatsinghpur	163	4.17	
10	Bolangir	144	3.68	
Odisha		3909	100.00	

Table 1: COVID-19 cases in 10 top districts in Odisha as on 14th June 2020

Source: COVID-19: Odisha State Dashboard, Govt. of Odisha.

Table 2: Forecasting results of COVID positive cases (Nos.)

Month	Dates		Daily			Cumulative		
		VAR	VEC	ARIMA	VAR	VEC	ARIMA	
June	15	178	154	148	4087	4063	4057	
	16	155	193	180	4241	4256	4236	
	17	156	173	156	4397	4428	4392	
	18	146	175	163	4544	4603	4555	
	19	142	189	157	4686	4793	4711	
	20	136	185	173	4822	4978	4884	
	21	131	188	169	4953	5166	5054	
	22	126	195	172	5079	5361	5226	
	23	122	196	169	5201	5557	5394	
	24	118	199	175	5318	5756	5570	
	25	114	203	177	5432	5959	5746	
	26	110	206	180	5542	6164	5926	
	27	107	209	179	5649	6373	6106	
	28	104	212	182	5752	6586	6287	
	29	101	216	184	5853	6801	6471	
	30	98	219	187	5951	7020	6658	
July	1	96	222	188	6047	7242	6846	
	2	93	225	190	6140	7468	7036	
	3	91	229	191	6231	7696	7227	
	4	89	232	194	6320	7928	7421	
	5	87	235	196	6408	8164	7617	
	6	86	239	198	6494	8402	7815	
	7	84	242	199	6578	8644	8014	
	8	83	245	201	6661	8889	8215	
	9	82	249	203	6743	9138	8419	

10	81	252	205	6824	9390	8624
11	80	255	207	6904	9645	8831
12	79	259	209	6983	9904	9040
13	78	262	211	7061	10166	9251
14	78	265	213	7139	10432	9464
15	77	269	215	7216	10700	9679
16	77	272	217	7293	10973	9896
17	76	276	219	7369	11248	10115
18	76	279	221	7445	11527	10335
19	75	283	223	7520	11810	10558
20	75	286	225	7595	12096	10783
21	75	289	226	7670	12385	11009
22	75	293	228	7745	12678	11237
23	75	296	230	7820	12974	11468
24	75	300	232	7895	13274	11700
25	75	303	234	7970	13577	11934
26	75	307	236	8044	13884	12170
27	75	310	238	8119	14194	12408
28	75	314	240	8194	14507	12648
29	75	317	242	8269	14824	12890
30	75	320	244	8344	15145	13134
31	75	324	246	8419	15469	13379
Compound daily growth rate (%)	-1.60	1.39	0.93	1.39	2.80	2.57

Source: Authors calculation

Sl. No.	Districts	No. of Hospitals	No. of beds	No. of ICUs
1	Anugul	1	150	10
2	Balangir	1	200	10
3	Baleshwar	1	120	12
4	Bargarh	2	200	8
5	Bhadrak	1	120	4
6	Boudh	1	116	0
7	Cuttack	1	150	40
8	Deogath	1	210	0
9	Dhenkanal	1	100	6
10	Gajapati	1	100	0
11	Ganjam	1	200	20
12	Jagatsinghpur	1	75	5
13	Jajpur	1	150	10
14	Jharsuguda	1	117	17
15	Kalahandi	1	200	6
16	Kandhamal	1	150	0
17	Kendrapara	1	110	9
18	Kendujhar	2	134	22
19	Khordha	2	1025	70
20	Koraput	1	150	4
21	Malkangiri	1	100	4
22	Mayurbhanj	1	200	10
23	Nabarangpur	1	200	5
24	Nayagarh	1	200	0
25	Puri	3	200	0
26	Rayagada	1	100	0
27	Sambalpur	1	200	20
28	Sonepur	1	200	20
29	Sundargarh	2	370	30
	Total	35	5547	342

Table 3: Status of COVID hospitals, beds and ICUs set up by Odisha

Source: COVID-19: Odisha State Dashboard, Govt. of Odisha.

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Source: Google