

DISASTER RISK REDUCTION

POLICY BRIEF

BACKGROUND

The impact of the COVID-19 pandemic has been unprecedented. The pandemic has been classified as one of the biggest disasters the world has ever seen. While countries have used various strategies to tackle this problem, no one has predicted the aftermaths of the pandemic. The pandemic impacted almost all countries in an enormous way. It has affected the economic and political spheres of most countries leaving devastating impacts at the local levels. While it is still escalating, there are growing concerns over its impact on people, especially the most marginalised and socio-economically vulnerable communities including the Dalits.

Most countries have seen a lot of ups and downs due to the pandemic including a series of lockdowns, followed by a series of unlocks. COVID-19 has become of the worst crisis of recent times. The pandemic has created an uncertainty among nations around the entire world and India is no exception to that. People realised that this is indeed an uncertain world where there is often a failure to predict the occurrences of extremes, and they barely manage to understand and predict the systemic consequences of actions taken. The pandemic reinforced that humanity is still stuck in a universe where it habitually relies more on response, rather than on preparation.

The COVID-19 pandemic heightened the disaster risks, as the consequences of the pandemic along with natural calamities have impacted the lives and livelihoods of large populations, especially Dalit communities in South Asia. These challenging times call for a paradigm shift in disaster risk reduction - from a single hazard, single sector perspective to a multi-hazard, multi-sectoral, and systemic risk perspective. This paradigm shift needs to be supported by parallel risk financing measures that are more targeted towards building both economic and community resilience. The aim of the policy brief is to strengthen initiatives that could potentially reduce disaster risks of peoples of the region in the future.



DALITS IN ASIA

COVID-19 is hitting the most vulnerable people, the Dalits, the hardest, and those same groups are often experiencing increased discrimination. The Dalits in Asia are one amongst the most marginalized communities in Asia, especially in South Asia. Asia is home to an estimated 220 million Dalit communities from Bangladesh, India, Nepal, Pakistan, Sri Lanka and Malaysia. They are the most marginalised and excluded communities in the political, social and economic spheres. They are discriminated on the basis of their identity due to the work they are engaged in and the caste within the social structure they belong to. The Dalits faces social and structural exclusion from accessing developmental services and justice. Atrocities and violence have been prominently used by the dominant castes to curb their progress in the socio-economic and political ladder. Since caste affected people of South Asia were traditionally and systemically deprived of resources, the majority of them have been compelled to live in meagre daily wages without any savings. The majority of them belong to the category of daily wage earners mostly working as migrant workers, domestic workers, sanitation workers, farm workers and health workers

IMPACT OF COVID

COVID-19 had multiple forms of impact on the Dalit communities. Some of the key impacts were loss of livelihood, migrations, hunger, paranoia and violence due to lockdown and the consequent restrictions on social communication. Being unskilled and semi-skilled labourers in both rural and urban areas, the majority of the Dalit workforce were suddenly pushed to the brink of unemployment and what made their situation worse was the less or no access to the COVID19 mitigation measures introduced and implemented in their respective countries.

The proportion of informal economy which employs mainly the migrant workers, is highest in South Asia standing at 77.0%. In India alone, it accounts more than 90% and there have been no efforts to enforce minimum wage protection for the benefit of this sector.



This is evident in the region that workers from marginalized sections of the society are involved in menial and precarious kind of work that is dictated by caste and descent considerations for instance, the cleaning work and manual scavenging is done by Dalits in India, Bangladesh, Pakistan. As constructed from ILO employment data on Informal Sector, in India the number of informal sector workers accounted highest in the region around 92%, while in Bangladesh it is 87%, Nepal and Pakistan it is estimated 72% and 71.7% respectively and Sri Lanka it is accounted as 60.8%.

The lack of preparation during region wide lockdowns in respective countries and subsequent loss of jobs created panic in the case of the migrant workers, who are mostly Dalits and Adivasis and are mainly engaged in daily wage work and labour. Many, who decided to walk back home faced a lot of difficulties - harassment and state violence for breaking the lockdown rules. Those who stayed back had to face problems with food, rent and non-payment of wages. The data compiled by the Ministry and Labour in India states that more than 10.6 million migrant labourers returned to their home states on foot during March to June 2020. During this period 81,385 accidents occurred on the roads including national highways with 29,415 fatalities.

It is an undeniable fact that disasters affect the most vulnerable sections of society thus Dalits were the most affected community during lockdown due to their engagement in menial jobs in the South Asian region. Bangladesh hosts around 6.5 million Dalit population engaged professions that are tied to their caste identity. The occupations such as cleaning, shoe making/ repairing, fishing, washing, pottery, pig rearing, bamboo basket making, and casual labour are some of the main occupations Dalits are engaged in. Nagorik Uddyog, a partner organisation of ADRF, points out that many of the street-cleaners are vulnerable because they are often employed contractually. Due to the ongoing crisis, many contract workers have lost their jobs, as have street-cleaners working for private entities.

Those who do retain their jobs (such as the more than 10,000 cleaners who work at both city corporations) find the pay inadequate. In India, the job loss was significantly high amongst Dalits and Adivasis during lockdown period was 14% as compared to “upper castes” which was 6.8%. Dalits also face identity-based discrimination as domestic workers were barred by gated communities re-establishing the inhuman concept of pollution and purity leading to “untouchability”. In a survey done by Dalit NGO Federation, Nepal, respondents were asked whether they have regular work and or wage-based work. A very large majority with 77% said that they have no work. Plantation sector in Sri Lanka also share similar forms of normalization like in other countries. This sector is characterized by feminization of labour with employing most Dalit women who confront to degrading working conditions. The labour force participation rate in this sector is 52.9%, almost 80% of workers in the plantation sector are women working in tea and rubber plantations as a daily paid worker. Plantation workers continued to be subjected to various kinds of oppression concerning their civil, political and economic rights particularly women.

IMPACT OF COVID ON WOMEN

During lockdown, women faced different kinds of discrimination and gender-based violence, particularly Dalit women experienced multiple forms of discrimination due to intersectionality of gender, caste and class. A huge pay gap has been observed between men and women and this has created unexpected income shock and risk for women for their survival. The National Family and Health Survey (NFHS) data shows the life expectancy of the Dalit and Adivasis is lower in comparison to other group women. Dalit women live 39.5 years whereas other group women live up to 54.1 years of life. An increase in economic distress during the covid lockdown has resulted in an increase in domestic violence in Dalit families. AIDMAM, ADRF’s Indian partner, witnessed cases where Dalit women were unable to access safe shelter spaces and during the lockdown as well as the unaware of the legal measures including domestic violence numbers.

One such case is the infamous case of Hathras, Uttar Pradesh, where a 19-year-old Dalit girl who worked in the fields of dominant caste was abducted during broad daylight, gang-raped and brutally murdered on 14 September 2020. This incident took place barely 200 meters away from her home. The state failed to provide her best medical facility for 14 days and upon her arrival in a premier medical facility in the national capital of India, she passed away. Her funeral was conducted forcefully in the absence of family members. The administration did not stop here. Media was not allowed to meet the family and till today the family faces heavy deployment of police and women face humiliation while attending nature's call in the fields in their presence.

In Nepal, a study conducted by FEDO states that Dalits women are worst affected by income losses and endangered their food security. Caste biases have to lead to discrimination during the relief distribution. Dalit women in Nepal faced violence too, in Badgi Gumbiki, Devdaha municipality 11, Rupandehi district, 15-year-old Angira Pasi was murdered due to her affair with an upper caste boy Bipendra. Both of them had eloped on 22 May and when some people found them, both were sent to Bipendra's home. Unfortunately, Angira was found dead during the day time the same day at home of Birendra.

In Sri Lanka, the girl-children and women on the plantations are assigned plucking work of tea for their livelihood. A few would be employed in the bungalows of senior estate management executive or staff as domestic servants. Though women have access to employment opportunities and incomes but the nature of work is precarious as they are employed mainly in semi-skilled labour-intensive industries irrespective of their educational level, with no opportunities for upgrading skills. The nature of work is characterised by long working hours, exposure to occupational health hazards, vulnerability to job insecurity, inequitable gender division of labour, and subordination in the labour market. However, due to the pandemic, women working in the plantation sector were on the brink of losing livelihood and all opportunities which enables them to be independent.

STRUCTURAL CAUSES FOR THE LACK OF RESILIENCE

A complete year of pandemic ridden time has been a challenge for the marginalised communities. The lack of preparation, unprecedented lockdown and the uncertainty of jobs have created a panic amongst the marginalised communities. This was exclusively reported in the case of the migrant workers who were displaced due to lock down and loss of employment.

In the middle of the pandemic cyclone, Amphan has hit eastern India and Bangladesh experiencing an alarming rise in coronavirus infections. Many villages along the Indian coast were rushing into packed emergency shelters with the fear of getting infected by the virus. Hundreds of shelters were not even available because they have been converted into quarantine centres. Apart from such following natural disasters, the already depreciating economy due to policy decisions such as demonetisation, poor healthcare facilities and poorly developed public infrastructures such as shelter homes, low employment rate etc. added on to causes of lack of resilience. Low testing rate and loose implementation of the health precautions including the basic sanitation played a crucial role in the inhibited increase in the cases of COVID-19, hindering the resilience process

RESPONSES FROM THE CSOs

Since WHO declared COVID-19 as a pandemic, the civil society organisations in Bangladesh, India and Nepal have been on their toes. With the support of the international organisations, they extended awareness and support to the jobless and migrant workers and distributed hygiene kits to them.

As a part of relief and rehabilitation programs in Asia, the CSOs have provided the relief materials to the CDWD. NCDHR in India has assisted 22,000 families, Nagorik Udyog assisted out to 10,000 in Bangladesh and Dalit organisation in Nepal has reached 15,000 families during the crises. The CSOs have done liaising with the states and with the help of networking systems helped to raise awareness on covid guidelines to prevent the spread of the virus and assist the government in their relief distribution process.

CSOs have also started collecting data on the situation of the minority groups impacted by COVID-19 to advocate with the government and non-government agencies for ensuring their social, financial and psychological security. In Nepal DNF, The Samata Foundation and FEDO worked on exploratory research on the impact of COVID-19 on Dalit communities from various indicators. In India, NCDHR has conducted an app-based survey that looked at various social protection schemes and COVID-19 packages supported by the government. The study identified the importance of access to services by the Dalits and Adivasi communities. The CSOs have supported the government and gave critical inputs to the government as and when required regarding the mismanagement of the crises.

The CSOs are engaged in government, judiciary and media advocacy efforts, helping the government to make the right decision on time. The CSOs' advocacy had reflected in the yearly budget where the demand was raised for maximum allocation in the health and livelihood sectors.

SUGGESTIONS AND THE WAY FORWARD

1. There is an urgent need for a paradigm shift in financing disaster management, considering key patterns in both the threats and the responses.
2. There is a pressing need to approach risk reduction from a multi-hazard, multi-sectoral, multi-people perspective.
3. Implement disaster risk financing and insurance schemes, especially for the vulnerable groups of people including the Dalits.
4. Coordination with broader disaster risk management programmes and strategies.
5. Scaling up the technical aspects of health disaster risk reduction.
6. Inclusive, universal coverage of all Dalits under existing national security schemes particularly those for livelihood and income support, preventive and curative healthcare, food and nutrition security, on an urgent and priority basis.

- 7 Economic packages (cash and in-kind assistance) oriented towards Dalit communities which allow for flexibility in access to these packages (in terms of documentation required, ability to access the packages etc.) must be rolled out
- 8 Introduce social security measures especially for livelihood and income security of informal/unorganised sector workers. Regular monitoring of these social security schemes to ensure their effective implementation.
- 9 Access to healthcare support and insurance, such as having a government health card with sufficient credit to access healthcare facilities. Access to subsidised sanitation, hygiene and health facilities to Dalit communities.
- 10 Food packages must be given to families on a weekly basis. Accessibility in remote and rural areas must be provided by Governments. Access to drinking water must also be included in these packages.
- 11 Representation of Dalit communities in local government is necessary to ensure that their voices are heard and that necessary relief is afforded to the community members.
- 12 Anti-discrimination laws and prevention of atrocity laws must be enacted and implemented properly in order to ensure the safety and protection of those who are most vulnerable to exploitation, violence and discrimination. Laws must also ensure the accountability of the State administrative mechanisms.
- 13 Specific helplines and access to pathways for reporting cases of violence and atrocities against women, discrimination, access to legal aid, medical assistance, and police assistance must be established.
- 14 Higher judicial courts to co-ordinate and hold lower courts accountable in cases of atrocities, discrimination and violence against marginalised communities.
- 15 Facilities and arrangements must be made to ensure access to education. Online capabilities should be enhanced, subsidised equipment, and access to these facilities must be provided to Dalit communities by the State, even in remote and rural areas.

- 16 States must create a database or disaggregated data of individuals to enhance identification of those who have not secured relief entitlements and to ensure that efforts can be made in future for more pointed relief for the most marginalised within the Dalit communities, such as Dalit women, people with disabilities, and the elderly. Subsequently ensure that those left behind are prioritised.
- 17 Revamp the spending structures for relief, taking into consideration short term, medium term and long-term needs for relief and recovery assistance. Increased spending and targeted, gender responsive budgeting that will take into account
- 18 Targeted awareness building campaigns on COVID-19, access to healthcare, access to economic packages, access to justice measure, etc. must be done by States even in the most remote areas of the country. Support for these campaigns can be garnered by recruiting and mobilising youth from the community.

The widespread impact of COVID-19 on the marginalised communities is witnessed by the world but yet remained unaddressed in many developing countries. The Dalits were hit the hardest by COVID impact, addressing their issues will take back a generation of development as the focus of inclusion will be further shifted in the COVID mitigation measures. If these socio-economic inequalities are not addressed, and social protection safety nets for the poor and the vulnerable communities are not strengthened, then this inequality in the communities will be a cause of concern for all. This calls for the need for a paradigm shift in financing disaster management, considering key and vulnerable populations and patterns in both the potential threats and provisions that are in place.

This Policy Brief is part of the project 'Strengthening capacities of communities discriminated based on work and descent (DWD) including caste in South Asia in the context of COVID-19' funded by Brot für die Welt (Bread for the World) implemented by Swadhikar supported by ADRF Secretariat and country partners along with The Inclusivity Project

The views expressed in this in publication do not necessarily reflect the views of Brot für die Welt (Bread for the World)

