IMPACT AND RESILIENCE IN COVID-19 PANDEMIC

A STUDY OF DALITS IN INDIA







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ABOUT ASIA DALIT RIGHTS FORUM

Asia Dalit Rights Forum (ADRF) is a platform of Dalits, and those working with Dalits in Bangladesh, India, Nepal, Pakistan, and Sri Lanka committed to the empowerment and emancipation of communities subjected to descent and work-based (caste-based) discrimination and violence (DWD&V). ADRF aims at addressing violations of the rights and entitlements of these communities, in particular their women and children, in the respective countries as well as worldwide. It focuses on supporting all the communities subjected to DWD&V and systemic discrimination in any part of the world in their noble aspirations and courageous struggles to establish an inclusive society that is marked by equity and equality, dignity and self-governance, justice, and freedom. ADRF is committed to collaborating with all national, regional, and international agencies- civil society organisations and human rights agencies, UN bodies, and state institutions espousing the cause of eliminating DWD and building an inclusive, peaceful and egalitarian society in Asia and elsewhere in the world.

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INTRODUCTION

The impact of the COVID-19 pandemic has been unprecedented with over 99 million cases reported including over 2 million deaths. Thus, 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. With the approval and vaccination drive, which would be the largest in the world, we finally see light and hope, after a year of darkness. However, caution should prevail as the new strands of the virus threatening the sheer existence of people around the world.

India has been a case of precipitous and hurried decision making to control the pandemic. While initially calling the world largest lockdown abruptly and without warning or awareness provided to people. This resulted in unforeseen circumstances of grief through increasing unemployment, hunger, displacement, paranoia, and violence. While many in society could cope with this new norm, this has mostly affected the hundreds of millions of marginalized communities, especially the Dalit communities.

The first official case in India was found in late January in the state of Kerala, however, the rates significantly increased in March, when WHO announced it as a global pandemic. The Prime Minister and the government announced the 21 days of lockdown starting from March 25, 2020. While the move was universally praised at its time because of its audacity to call for sudden, immediate, and complete lockdown for 1.35 billion people to control the spreading of the virus. At the time, when European countries and the USA were unable to have a timely lockdown resulting in the many loss of lives, India was seen as a role model for the world.

While the first period of lockdown was able to control the high spread of the COVID-19, it had little effect in decreasing the cases. In such a situation the government has announced the extension of the lockdown to the second and third period, thus limiting the social movement and relationships of the people for almost three months. Even after the withdrawal of the lockdown, there were serious regulations put on the people, social meetings, shops, and leisure events. While the death rates within the country have been comparatively lower than the many of the European and American countries. Many experts credit the indigenous treatments like Ayurveda, homeopathy, and other traditional forms of treatments found in the country.

Dates	No of People Infected	No of Deaths		
31 March	1071	35		
30 April	33062	1154		
31 May	139049	5408		
30 June	549035	17410		
31 July	1482490	36551		
31 August	3384576	65435		
30 September	6230000	98708		
31 October	8137119	122149		
30 November	9463491	137659		

INDIA COVID19 CASES BY NUMBERS

(based on https://www.worldometers.info/coronavirus/country/india/)

India has been a case of precipitous and hurried decision making to control the pandemic. While initially calling the world largest lockdown abruptly and without warning or awareness provided to people. This resulted in unforeseen circumstances of grief through increasing unemployment, hunger, displacement, paranoia, and violence.

The rate of cases under COVID-19 increased in the mid-year, especially after the lockdown was lifted by the government. The first month since lockdown the doubling rate of the cases in the country. This has been the start of the increasing rate of the cases with case rates in September and October saw multiple rates of increased cases with more than a week had more than 90000 cases per day in the country. Similar to the rising cases, the death rate also parallel increases during this time with doubling the rate of deaths in the subsequent post lockdown period in the country.

Low testing rate and loose implementation of the health precautions including the basic sanitation needs have played a crucial role in the inhibited increase in the cases of COVID19 in India. While the unlocking of the country has raised serious doubts in the minds of many experts, the structure of unlocking has resulted in a rapid increase of cases in India. Since the unlock in July cases has gone from 5.50,000 to 81,37,119 in the short period of four months. India is currently the second-largest country in terms of COVID-19 cases.



DAILY NEW DEATHS IN INDIA

Since unlocking the country has seen an exponential growth of the virus till December 2020, with alarming death rates to support the uncontrolled growth of the disease. The ten months of pandemic ridden time has been a challenge for all the people, however, it was particularly difficult for the marginalized communities. The lack of preparation and the uncertainty of their jobs created a panic among the marginalized communities. This was exclusively reported in the case of the migrants, who were displaced due to the lockdown and resulting in the loss of employment.

The impact on the Dalits and Adivasis of the coronavirus was devastating as many of them had to restrict to their own homes without any livelihood opportunities or wages to live on. A majority of the Dalits depends upon the daily wages and manual labour for their survival, as well as being migrant labourers. The inclusion and accessibility of the services have been a big challenge for the Dalit and Adivasi communities in any disaster situation, this has continued in this pandemic. This report aims to look at the challenges faced by the Dalit communities in India, while the steps taken by the community towards fighting the dreadful situation with courage and resilience.

1.1 METHODOLOGY

In this report, the team from National Campaign on Dalit Human Rights (NCDHR) have conducted a detailed survey across 15 states – Andhra Pradesh, Telangana, Bihar, Uttar Pradesh, Maharashtra, Himachal Pradesh, Gujarat, Tamil Nadu, Kerala, Delhi, Odisha, Chhattisgarh, Jharkhand, Haryana, and Madhya Pradesh, to understand the access to all entitlements as announced by the center and state governments, especially health information and services in the context of the COVID-19 pandemic. The report also explores issues like awareness and access to entitlements, the worst-affected communities, the effects of the delay in taking decisive action, and documents the learnings from the chaos that has ensued. What are the relief packages that have been announced and what has been rolled out? The lapses in these systems, individuals who are not enrolled in any government schemes, or those who are enrolled but their cards have not been issued. What worked, what did not, and what could have been done better.

The report studies the impact of the lockdown on marginalised communities that were, before the disaster, reeling under poverty and the inadequate coverage and functionality of social security schemes and fragile livelihoods. The report attempts to assess the efficacy and timeliness of social security measures, in terms of their coverage and implementation for marginalised sections during the outbreak of COVID-19. The report does this by examining the extent of realization of these schemes by the intended target population, and hardships faced in the process. The purpose of the report is also to inform the center and state authorities about policy and programmatic improvements towards an inclusive and human rights sensitive disaster management.

The project adopted a comprehensive response to the pandemic by examining the awareness around the preventive measures, action around increased social protection, and economic support that is offered to the economically and socially weakest sections. To this end, a technological solution in the way of an exclusive mobile application was designed to assist with data collection, and can then be used to govern the regional and the national response of the government and aid agencies.

The NCDHR invested in developing the WeClaim

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mobile application to reach out to thousands of distressed households across the country and capture their responses to the COVID-19 pandemic and the subsequent lockdown in India. The team has engaged 1000 trained community volunteers across 15 states and has also the additional leverage of a vast network of over 20,000 volunteers who can receive and disseminate digital messages. The assessment will review precautionary measures that are being taken at the community-level, like physical distancing, monitoring of symptoms to ensure timely isolation, and hospitalisation at the appropriate stage, and in real-time, the extent to which these households can access the government entitlements announced in the wake of the nation-wide lockdown. For this survey the team has covered 32251

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individuals, however, the survey will continue for the next one year and the team will monitor the level of inclusion of 10 lakh people through this process. The real-time information will be shared digitally with the district and state authorities including the respective state disaster management authorities for urgent action.

The objective is to inform policy frameworks and response guidelines and to proactively place the health, social security, and economic interests of the marginalised communities at the center of all public health exigency planning. And concurrently, to align the social security and economic programs to disaster risk reduction and mitigation. The survey will focus on the workers in the unorganised sector, those who are self-employed, sanitation workers, landless labourers, migrants, daily-wage workers, communities who live in slums, along with women, children, and elderly people with disabilities, and other vulnerable members in the community, many of whom are from the Dalit and Adivasi communities.

While the app-based remote interventions will be carried out still, through wider collaborative efforts, NCDHR will amplify the concerns and needs to authorities and humanitarian organisations as a member of Sphere India, a coalition of humanitarian organisations. The coalition members include non-government organisations, aid agencies, officials of the National Disaster Management Authority (NDMA), and UN agencies. Since the outbreak of COVID-19, NCDHR has been leading and participating in the action and the planning processes for different sectors – protection for marginalised groups, women, children, elderly, and people with disabilities, education, health, and advocacy committees. NCDHR also leads the Protection and Advocacy Committees of Sphere India. The information generated from the WeClaim application will be shared with humanitarian actors and education and social institutions. The information will also be transmitted to the Empowered Groups constituted by the Ministry of Home Affairs under the Disaster Management Act to inform government policy, guidelines, and actions to fight health as well as social and economic issues of the poorest sections.

1.2 LIMITATION OF THE STUDY

Owing to travel restrictions in the lockdown, the survey was conducted remotely through a specially designed android phone-based app, 'WeClaim', and was not a sample-based study. Therefore, the number of respondents across social categories are uneven and findings cannot be compared across social groups, nor be generalized to their entire population across the surveyed states or nationally. The findings are thus gathered from intra-community analysis across the SC, ST, Minority, and OBC communities only.

The study findings should be read and understood from the perspective of pre-existing multi-dimensional poverty and deprivations among the SC, ST, Minority and OBC communities, as also available in government documents in disaggregated fashion such as the Census, and Socio-Economic Caste Census data; and the need for ensuring that the state assistance reaches those who are most dependent on social security schemes on time.

SITUATION OF DALITS DURING PANDEMIC

COVID-19 and lockdown have severely impacted the livelihoods of substantial sections of the population across the world, leaving many unemployed overnights and forcing them into a state of multidimensional vulnerability with no or minimal protection at their disposal. The economic crisis has not only further compounded their marginalization but also aggravated the involuntary deprivations arising out of a hierarchical system based on caste. The economic pain caused by the lockdown has hit socially and historically marginalized communities like Dalits in a disparate manner. These groups as a result of discriminatory practices embedded in the caste system were already disproportionately poor compared to other social groups.

COVID-19 exposed them to immediate risk of hunger and starvation and loss of dignity and powerlessness. The insecurity of livelihood, employment, and lack of adequate social security rendered them into helpless situations and at the mercy of the government. Studies have highlighted that owing to lower levels of educational attainments, job loss was higher among them. Further, reverse migration due to the closure of economic activities resulted in additional debts for marginalized families and an increase in drop out of children from schools. In this process, the women get affected more than men as they are confronted by multiple forms of discrimination is at the intersection of caste, class, and gender. The following sections discuss the wide range of impacts of COVID-19 on Dalits.

The slowed economic activities have increasingly resulted in shrinking revenue of government thereby resulting in cuts on social expenditures such as education, health, and other social insurance schemes that are crucial for human development of the population in general and more particularly marginalized groups. In India, the sudden change in priority expenditure has put heavy curtailment of expenditure on important heads like education and other social protection facilities provided to vulnerable sections of the society. It is estimated that children from socially disadvantaged groups are most likely to be forced into stunted growth and extreme levels of malnourishment.¹ It is important to note that education is instrumental in securing de-

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cent jobs/work, and any curtailment of expenditure on education could result in compromising the capability formation of marginalized groups who are the greatest beneficiary of social welfare provided by the state.

Caste continues to be one of the determining factors in the public provisioning of services even during difficult times like the COVID-19 lockdown. There are instances of separate quarantine facilities for historically marginalized communities and dominant communities, and Dalits being prevented from using the crematorium. In some of the incidents, COVID-19 positive patients who were admitted into quarantine facilities declined to eat food cooked by Dalit women.²

2.1 DEMOGRAPHY

The survey included a total of 32251 respondents across the General category (1470), Minority (1422), OBC (4043), De-Notified Tribes (284), Dalits (22689), and Adivasis/STs (2343) across various vulnerable groups. These included the homeless people (3122), migrant workers (1751), orphans (577), persons with disabilities (PwD) (1020), the single women-headed households (894), transgenders (70), and widows (2383).

2.2 DALIT WOMEN

Dalit women, predominantly in Indian societies, are forced into unclean, indecent, and traditional menial jobs like manual scavenging, cremating dead bodies, and cleaning open sewages without much protection. These unhygienic practices have made these women prone to the high risk of transmitting the disease. "The disgust and fear and desperation to hygiene to safeguard against coronavirus has further fuelled deliberate distancing of the vulnerable Dalit women by the other population. Their plight is worsened with limited access to healthcare facilities. These limitations are a result of- poverty, gender

States	Social categories						
Row Labels	DNT	General	Minority	OBC	SC	ST	Grand Total
Andhra Pradesh		5	9	104	4929	281	5328
Bihar		17	119	639	3325	84	4184
Chhattisgarh		21		7	29	1	58
Gujarat		28	122	55	99	40	344
Haryana		10	16	31	455		512
Himachal Pradesh		10	3	4	208	16	241
Jharkhand		5	12	54	50	180	301
Kerala	2	456	626	694	2652	616	5046
Madhya Pradesh		40		324	710	307	1381
Maharashtra	280	640	236	857	2939	445	5397
Odisha		37	106	90	1371	112	1716
Rajasthan		1		7	416	2	426
Tamil Nadu		5	3	264	3329	57	3658
Uttar Pradesh	2	195	170	913	2176	200	3656
Grand Total	284	1470	1422	4043	22689	2343	32251

¹ Saini Manvir.*HARYANA*:49% of Dalit kids are malnourished: Report. The Economic Times, 29th July, 2015,

https://health.economictimes.indiatimes.com/news/industry/haryana-49-of-dalit-kids-are-malnourished-report/48260967 ² Jha Prashant. "Quarantined youth, 23, refuses to eat food eat food cooked by Dalit woman in Nainital, booked". The Times of India, May 20, 2020, https://timesofindia.indiatimes.com/city/dehradun/quarantined-youth-23-refuses-to-eat-food-cooked-by-dalit-woman-in-nainital-booked/articleshow/75834636.cms

Count of respondent vulnerable groups	Column Labels						
Row Labels	DNT	General	Minority	OBC	SC	ST	Grand Total
Homeless	1	225	87	452	2214	142	3121
Migrant worker	30	75	99	274	1163	109	1750
Orphan		15	19	66	460	17	577
PwD	153	20	26	64	559	198	1020
Single woman headed		43	37	78	655	81	894
Transgender	1	2	5	14	41	6	69
Widows		53	134	200	1804	192	2383
None of the above	99	1037	1015	2895	15793	1598	22437
Grand Total	284	1470	1422	4043	22689	2343	32251

SOCIAL CATEGORY AND VULNERABLE GROUPS PROFILE (DEMOGRAPHY)

differences, getting permission to go to the hospital facility, and the idea of 'Dalits as impure/ unclean'." (Ali Saha, 2020) ³

AIDMAM also identified that during the Pandemic, Caste and Gender-based Violence are being committed against Dalit women. The various forms of caste-based gender violence like physically and verbally abused, sexually harassed, raped, and forced prostitution are used to cement the social hierarchies existing in the social order. During the pandemic, even after having restrictions on physical distancing and contact, there have been various cases of sexual abuse and rape of Dalit women and girls. Most alarmingly the gang-rape and murder of a 19-year Dalit girl in Hathras, who has not just been sexually assaulted leading to murder, but whose dignity and right to dignified burial was snatched by the government authorities to save the dominant caste perpetrators. While many did not attract the attention of the mainstream media like Hathras case, there had been several similar occurrences of sexual abuse and rape of the Dalit girls around the country during the pandemic.

This is not an isolated incident as 18 cases of rape against Dalit women were reported in the past 6 days in Uttar Pradesh in Balarampur, Azamgarh, and Bulandshahr provinces. Furthermore, the recent Government data on 'Crimes in India 2019' released by the National Crime Records Bureau (NCRB) shows that cases of Rape against Schedule Caste women account for 7.5% (3486 cases) of the total cases reported. Cases of Rape, Attempt to rape, and Assault on women to outrage their modesty cumulatively stood at 15% (6985). On average, 10 Dalit women and girls were raped a day, in the year 2019.

Women's access to economic resources and livelihood opportunities can lead to their empowerment. Women's economic empowerment can enable them to have control over their way of life and to live dignified lives in society. It is also about creating a just and equal society. But the reality is that women often face various kinds of discrimination and gender-based violence, with particular sections of women experiencing multiple forms of discrimination because of factors such as ethnicity and caste, as asserted OECD

³ http://southasiajournal.net/re-birth-of-untouchability-dalit-women-during-covid-19/

HATHRAS GANG-RAPE AND MURDER, THAT SHOOK THE COUNTRY'S CASTE CONSCIOUSNESS



A 19-year-old Dalit woman was working in the field along with her mother and brother barely 200 meters away from their home. During the broad daylight, she was abducted by upper (Thakur) caste men and dragged into the field to be gang-raped. She was strangulated, her spine broken, and tongue cut. Her mother found her naked in a death-like condition with blood on her vagina and around her eyes.

She was not provided the best medical facilities for 14 days and thus upon the day of arrival in a premier medical facility, she passed away. Moreover, the district administration and police forcefully conducted her funeral without the consent of the family or kins. The mother and family members begged to give back the body of the victim, but the administration and police used force; and home sealed the family and relatives, thus snatching the rights of the family to conduct her last rites in a dignified way. This despicable act was followed by completely shutting down the village for the Valmiki (Dalit) community and no media, people's representatives were allowed to enter the village for days.

GFOD Appeal for Justice for CDWD women against violence

The reality is that women often face various kinds of discrimination and gender-based violence, with particular sections of women experiencing multiple forms of discrimination because of factors such as ethnicity and caste.



2012.⁴ Considering the preexisting vulnerability of Dalit women, it can be argued that they have experienced a high degree of discrimination during the COVID-19 pandemic.

The COVID-19 and lockdown have resulted in similar trends where women are hit hard and confronted with the existential question to earn their livelihood. A research report by Citi⁵ estimates around 220 million women working in different sectors are potentially exposed to vulnerability due to the risk of losing jobs and pay cuts, globally. Out of a total of 44 million workers engaged in vulnerable sectors, one-third of women i.e. 14 million faced and could face job cuts compared to men. The livelihood of women in stigmatized professions such as sex work is hit hard due to lockdown and physical distancing measures, leading to return migration to their home states due to loss of livelihood. According to estimates of the All India Network of Sex Workers (AINSW) over 60% of the sex workers have left to their home states due to sudden loss of income and to avoid starvation.⁶ The frontline health workers (ASHA) in India and cleaning workers or manual scavengers are exclusively Dalit.

An increase in economic distress during this lockdown has also resulted in the scaling up of domestic issues within Dalit families. All India Dalit Mahila Adhikar Manch (AIDMAM) witnessed incidents in which the already strained relationship between husband and wife were further aggravated during the 3 months lockdown as Dalit women were unable to access

⁴ Report on Women's economic empowerment, Poverty reduction and Pro-Poor Growth, the OECD DAC Network on Gender Equality. Organization for Economic Corporation and Development (OCED), 2012

⁵ Pipa Stevens. Women are disproportionately impacted by coronavirus job losses.29th May 2020

⁶ https://timesofindia.indiatimes.com/india/how-indiassex-workers-are-keeping-afloat-during-the-pandemic/articleshow/78251320.cms

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shelter homes or alternative safe spaces during the lockdown, and were also unaware of legal measures such as the domestic violence helpline number, etc.

2.3 INFORMAL WORKERS

There is no denying that the socio-economic development of India is tremendously influenced by the migration of labor. Data from the National Sample Survey (NSS) in 2007-2008 reveals that about 28% of the workforce in India are migrants. Migrants fuel the Indian economy by carrying human capital to regions where it is needed and enabling the acquisition of new skills and a better standard of living (Korra 2011). At the same time, the economic, social, and political marginalization of these migrant workers has been an area of concern. It may be noted that during 2007 to 2008, the migration rate in the rural areas was the lowest among the scheduled tribe (ST), nearly 24%, and it was the highest among those classified in the social group as 'others', nearly 28%. In urban areas, on the other hand, the migration rate was lowest among other backward class (OBC) nearly 33%, and it was highest among those classified in the social group 'others', nearly 38%.

The wicked conundrum of the oppressed caste worker is that their services are valued the least but are also fundamental in the functioning of day-to-day life, allowing the dominant caste to hold on to a semblance of normal. Some migrant workers do not have the privilege of 'working from home', daily wage labourers who live from one meal to the next, those who belong to Dalit/ Schedule Caste (SC), Schedule Tribe (ST) communities, and de-notified tribes (DNT) who relocate to urban settlements to escape poverty and subsist on low-paying, manual jobs. Reports of mass exoduses were filtering into the main-



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stream media. Disturbing images of thousands of migrant workers gathered at bus stands and railway stations in Delhi and Mumbai, images of men, women, children, and senior citizens, walking hundreds of kilometers, to return to their village, and media reports of suicide and deaths due to exhaustion have raised shock and outrage on social media. Government data is clear in defining the extent of the contribution of the informal workforce, the Economic Survey of 2018-19, has pegged India's informal workforce - self-employed or casual workers - at 93 percent. The NITI Aayog's Strategy for New India at 75, also released in 2018, estimated it at approximately 85% of all workers, still significant. Women's participation in the informal sector, predominantly as domestic help and sanitation works, and the likelihood of them being engaged as contractual or informal workers in the formal sector have placed their overall

health and well-being at high risk. lockdown was drastic and the consequence has been exponential, especially for a large number of people who live on the margins. With the sudden restriction on work and movement, daily wage workers had no time to prepare and were exposed to a greater and more complex risk which left them with a negligent chance of survival. These are sections of our society that are continually left out of the social safety net by being unregistered labourers and landless, the communities that live in slums, the homeless, women and households led by women, sexual minorities, de-notified tribes, Dalits, and Adivasis, and religious minorities. The absence of an income has rendered them vulnerable to health risks, which will further impair their reproductive and psychosocial well-being of women and adolescent girls, children and elderly, people with disabilities, and other vulnerable members in the household and the larger community.

2.4 DALIT CHILDREN

The greater and unrecognized impact has been on the children and youth who have had to face fear, anxiety, needs mounting to accessibility to education, limited resources posing greater challenges and even violence. With 472 million children, India has the largest child population in the world and campaigners say the lockdown has impacted around 40 million children from poor families- children working in farms and fields in rural areas, as well as children who work as ragpickers in cities or sell

Neglecting the welfare of the very people who lay the bricks of the country's welfare can be equated to the societal exclusion of the oppressed castes. The government's decision to go into balloons, and pens at traffic lights. ⁷

⁷ Coronavirus: The children struggling to survive India's lockdown, https://www.bbc.com/news/world-asia-india-52210888

during the lockdown, the students were required to attend virtual or online classes for compensating for their education. However, many Dalit kids without access to computers or smartphones, or the internet were unable to cope with this new way of education. This has resulted in many students drop out or having serious psychological problems due to lack of access to education.



EXPERIENCES OF DALIT STUDENTS DURING LOCKDOWN

 A young girl in the Malappuram district despaired. She had neither a TV nor a smartphone. In the afternoon, the Class 10 student went missing from her house. Her charred body was found from a deserted spot near her home around 3.30 pm. The girl said to be a good student, set herself on fire, said the police. "There is a television at home but that has not been working. She told me it needed to be repaired but I couldn't get it done. I couldn't afford a smartphone either," the girl's father, a Scheduled Caste daily wager with little income during the ongoing coronavirus lockdown, told reporters. 2. Upset about not having a smartphone to use for online classes, a Class 11 student from Punjab allegedly committed suicide on Friday. According to the police, the 17-year-old girl hung herself in her house in the state's Mansa district. The victim, who was the daughter of a farm labourer, had been asking for a smartphone for the last couple of weeks but because of their poor financial condition, the family could not buy her one. According to the girl's father, she was under stress and so ended her life, the investigating officer said. "She kept asking us for a smartphone but I am a farm labourer and couldn't afford it. Hence she ended her life," Jagseer Singh, father of the victim said.

The effects of lockdown and state-imposed restrictions had serious effects on the children's physical and mental health. The family's loss of jobs also contributed, as the lack of wages has resulted in hunger and mental trauma for the family, which directly impacted the children also. This is especially true as many of the Dalits are engaged in the informal sectors as farmworkers and migrant labourers. With no jobs, no place to stay, no food many decided to tread back home only to their long ordeal to exhaustion with no transportation, starvation, and in some cases deaths. Families were returning home; this made children more vulnerable as we had media reports highlighting the plight of those taking the journey.

In education during the lockdown, the students were required to attend virtual or online classes for compensating for their education. However, many Dalit kids without access to computers or smartphones, or the internet were unable to cope with this new way of education. This has resulted in many students drop out or having serious psychological problems due to lack of access to education. Two examples of the psychological struggles of the students from Dalit communities with examples from Kerala⁸ and Punjab.⁹

2.5 MANUAL SCAVENGERS

Manual Scavenging is prohibited under Section 5 & 6 of the Manual Scavenging Act 2013, but despite that total official figures of manual scavengers between 2013-14 to Feb 2020 are 63,246 from 17 states and the highest remains the UP with 35,308. While manual scavengers were considered as the frontline workers, there have been various cases of discrimination on the access of safety kits and protection from COVID-19. The Dalit, especially manual scavenger housing areas were seldom sanitized and given proper awareness on safety from COVID-19.

According to Indian Express, 1st July 2020, India's 40 lakh waste pickers in the informal sector and garbage collectors employed by states are at direct risk of getting infected with coronavirus from handling unmarked medical and contaminated waste, cleaning residential colonies, hospitals, and commercial establishments, and most of them work without safety gear and PPE, have no social security, instead of that, they face rampant discrimination. Now, these people are at risk of exposure to COVID-19 from handling Trash contaminated with bodily fluids from hospitals, quarantine centers, and home quarantine for suspected COVID-19 patients. ¹⁰

⁸ https://www.ndtv.com/india-news/coronavirus-kerala-girl-cant-attend-online-classes-amid-lockdown-

commits-suicide-2239318

⁹ https://www.ndtv.com/india-news/coronavirus-india-punjab-mansa-no-smartphone-for-online-classes-girlallegedly-commits-suicide-2242789



2.6 VIOLENCE AND ATROCITIES

While the lockdown and pandemic era is primarily seen restriction in social interactions and engagement, the pandemic has exposed the underlying social ills of untouchability and casteist attitude with the surging cases of caste and gender-based atrocities during the lockdown. The National Campaign on Dalit Human Rights, which has intervened in more than 80 such cases, stressed the need to draw the attention of the enforcement authorities and the judiciary on discrimination and atrocities against Dalits especially women and children. "Dalits have been discriminated against through social boycott and physical assault. Untouchability and physical abuse are rampant during the pandemic. It is important to highlight that Dalit lives matter in the country," said Dalit rights activist Paul Divakar. 11

All such violence happens in a country where there is a proper mechanism to safeguard its marginalized communities. The SC/ST Prevention of Atrocities Act, 1989 is specifically designed to safeguard the Dalit and Adivasi communities from any forms of atrocities. But under the larger umbrella of the pandemic, the mechanism, and the regulators failed to protect the Dalit and Adivasi communities. A press release by the National Dalit Movement for Justice (ND-MJ-NCDHR) has revealed that there have been around 92 cases of violence against Dalits since the lockdown following COVID-19 began (as of June) and that justice has been slow to them.

The era of the pandemic saw strong voices been raised and solidarity been showered against the atrocities against the racial discrimination and murder of George Floyd. However, there have been more than hundreds of murders and thousands of atrocities reported based on caste-based discrimination, which has often felt on deaf ears. Even the much talked about case of Hathras was made inconsequential after a couple of weeks. Thus, there is strong resistance to highlighting the atrocities on Dalits in the macro-level discussions. While in the micro-level, the police, the dominant caste families, the culprit, or the society creates hurdles in accessing any forms of justice for the Dalit victims of atrocities.

¹⁰ https://indianexpress.com/article/india/india-sanitation-workers-waste-pickers-coronavirus-pandemic-6414446/

 $^{^{11}\,}https://www.newindianexpress.com/cities/delhi/2020/jul/07/atrocities-against-dalits-see-a-rise-2166477.html$

¹² https://in.style.yahoo.com/many-atrocities-against-dalits-during-043134310.html

ANALYSING SERVICES AND RESPONSE FROM THE GOVERNMENT MECHANISMS

The primary challenge was the unavailability of credible data in the public forum either from the government or other reputed institutions including the UN. The impact of COVID-19 on the population is only based on generalized numbers rather than systematic disaggregated data. Thus, analyze the impact on the Dalit community is not systematically measured by the data collectors. To identify the impact, NCDHR has created an app- WeClaim- for finding the data on the impact, relief, and response of the government services for Dalit communities during this pandemic. The app analyzed various public services and measures including welfare programs targeted for the essential needs of the communities: this includes, access to health, relief and response measures, food and nutrition, employment and livelihood, and other services.

3.1 HEALTH

3.1.1 Soap, Sanitisers and Water

To prevent the spread of COVID-19, the World Health Organisation prescribed precautionary measures including washing hands with soap and water, using alcohol-based sanitizers to clean hands regularly, maintaining physical distance from others, and isolating the sick and quarantining those who may have been exposed. However, of the 30223 respondents, 13.65%% (4125) of the respondents reported that they did not have access to soap and 9.62% did not have access to water. Of these, 19.38% STs and 9.39% were SCs, who had no access to water. The finding reflects To the question on why they were not able to practice the precautionary measures for preventing Covid-19 spread in the community, 10.79% of 30223 respondents attributed it to lack of awareness as no health worker had visited and advised them on the important precautionary measures and importance of isolation.



the NFHS-IV data on only 51.9% SC households and 38.4% ST households had availability of water and soap for handwashing, much lower than other communities. ¹³

Much before stress was laid on regular handwashing with water and soap, the use of alcohol-based sanitizers was popularised through advertisements and social messaging. A point was reached where the demand for sanitizers spiked along with the cost of a commodity that was perhaps less know and certainly unused in the rural areas. However, 32.94% (9956) said they had no access to sanitizer. Of this percentage, 34.32% were SCs and 32.23% STs and closely followed by OBCs at 31.17%.

3.1.2 Visit by health workers

To the question on why they were not able to

¹³ Table 2.10 Handwashing, NFHS-IV, p.36. Available at http://rchiips.org/NFHS/NFHS-4Reports/India.pdf

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practice the precautionary measures for preventing Covid-19 spread in the community, 10.79% of 30223 respondents attributed it to lack of awareness as no health worker had visited and advised them on the important precautionary measures and importance of isolation. Of the 21406 SC respondents, 43% said that the health workers did not visit them, and it stood at 46% for STs (of 2106 persons) and 10.45% for DNT communities, out of 268 respondents. A little more than half 50% of the 9071 said that they were not visited by ASHA workers to check for symptoms and to provide them with medicines. Among them were included 51.26% of SCs, 46.85% of the STs and 64.47% of the Minority community, and 52.83% of the OBCs.

3.1.3. Quarantine facilities

Of all the respondents who did not have space for isolation, DNTs and STs top the list - 66% of the DNTs and 25% of the STs did not have space for isolation. The panchayat/municipality officials were tasked to ensure that settlements were sanitized to prevent the spread of the disease. Of the 29879 that were surveyed, 48.22% denied the regular sanitization of their settlements using a disinfectant. 69.71% from the minority communities responded that their settlements were not sanitized by the municipality/panchayat followed by 59% of the OBC respondents and 57% of the ST and 45% of the SC communities.

3.2 RELIEF PACKAGES

3.2.1 Shelter and food for the Homeless

Several respondents were rendered homeless as a result of the lockdown. Respondents from across the vulnerable communities who were out of work were unable to pay rent, many more were evicted. During the survey, nearly 17% of 3121 homeless respondents said that there were no homeless shelters available –Of the 10% (325) homeless people who reported that shelters were available they took refuge in these shelters provided by the state governments. Additionally, of the 324 who lived in the shelters for homeless people, 57% reported that all three meals were not provided to them at the shelter, this included 43% of the SCs respondents.



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All India	% of Households with a monthly income of the highest-earning household member						
Income slab	Total Households	< 5000	5000 - 10000				
SC	33164085	83.55%	11.74%				
ST	19737399	86.53%	8.95%				
Other than SC/ST category households	126857204	70.29%	19.89%				

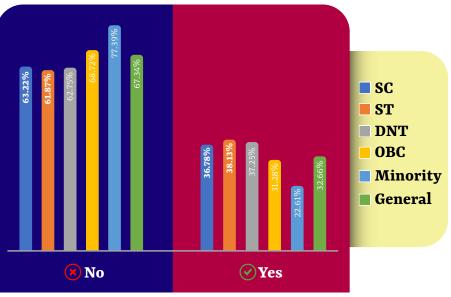
3.2.2 Shelter and food for the Migrants

Out of the total 1750 migrant worker respondents, a mere 16% of respondents reported that there were shelters available for migrants, and only 48% of migrants took shelter in these facilities.

3.2.3 The Pradhan Mantri Ujjwala Yojana (PMUY)

The scheme was launched in 2016 for the BPL families (with income less than or up to Rs. 10,000) with support of Rs.1600 per connection in the next 3 years. The connections are issued

in the name of women of the households. Identification of the BPL families under the scheme is done through Socio-Economic Caste Census (SECC) 2011 data.14 Apart from the SECC, beneficiaries are identified from seven categories which include SC/ST households. beneficiaries of PMAY(Gramin),



PMUY HHS

and 3rd refill too.

Antyodaya Anna Yojana, Most Backward Classes, Forest Dwellers, Resident of Islands/River Is-

lands, and Tea Garden & Ex-tea Garden Tribes.¹⁵

Under the PMUY, as part of the relief package an-

nounced by the Finance Minister in March 2020, beneficiaries are entitled to up to three free of

cost LPG cylinders between April and June. On

demanding and securing a refill against an empty LPG cylinder the beneficiary would receive the

entire cost of the cylinder in a few days in her

bank account. This would continue for the 2nd

¹⁴ Socio-Economic and Caste Census 2011. Available at- https://secc.gov.in/reportlistContent

¹⁵ https://pib.gov.in/PressReleasePage.aspx?PRID=1541545

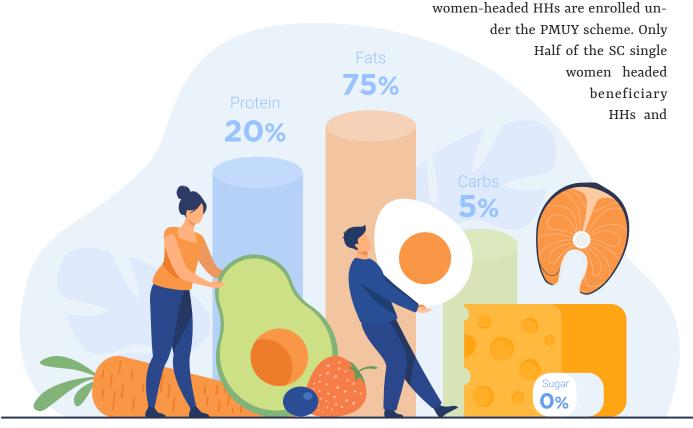
By 2018, the scheme has covered 47% of the SC/ ST households of the 5 Cr it intended to cover. Going by the above SECC 2011 income data for rural areas, it is seen that a massive proportion among both the SC and ST household earned less than Rs 5000 as their highest income, and only a measly proportion could earn more than Rs 5000 but up to Rs 10000. So, even 47% of the total intended coverage, despite being higher than the proportion of SC and ST population, is highly inadequate, because 63% of SCs and 38% of STs themselves adds up to more than 5 crores. The pattern of enrolment emerging from the study also reflects this inadequacy of coverage.

In the study as well, the same was reflected for the nature of the scheme. Of the total 19590 SC respondents to the question, 36% (7205) are the PMUY beneficiary households, 38% of the 2030 ST respondents are PMUY beneficiaries, with others entailing 31% OBCs, 22% minority, 32% General community, and 37% DNT respondents. The coverage of the scheme is inadequate for the SCs and STs with only 35% were found to be enrolled under the PMUY.

Of the 9767 respondents who were enrolled in the scheme, 35% of households were yet to receive the fund transfer into their account. Although many of SC (66%), and OBCs (68%) received the benefit, the STs and Minority communities at 48% and 30% of the DNT community recorded the lowest extent of receipt of the assistance even in May.

3.2.4 Single women-headed households and PMUY

Of the 3165 single women-headed households covered in the survey, 32% (1048) were registered under the scheme, of which 48.76% or 118 households received the entitlement. Among the 655 SC single women headed respondents,29% SC single women-headed HHs and 43% ST single



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a measly 22% of ST women-headed HHs had received the entitlement.

3.3 FOOD AND NUTRITION-AL SECURITY ASSISTANCE IN COVID19

3.3.1 Integrated Child Development Scheme (ICDS)

Women and children are often the most vulnerable in the situation of a food crisis, the impact of community (of 1989 respondents), 15% were SCs (of 19701), followed by 13% minority communities (of 1122 respondents). And of the 27489 respondents, a higher proportion of the SC (25%) and ST respondents (31%) said there were children below six years of age in their households.

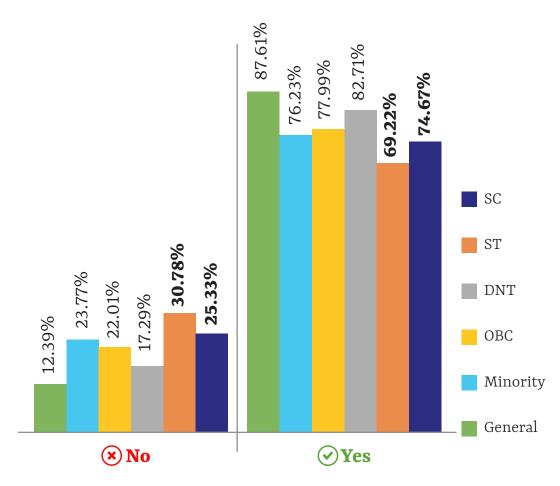
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However, 27.11% of SC beneficiaries and 26.11% of ST beneficiaries of ICDS said that they had raw food material was home delivered by Anganwadi worker in contrast with 32.65% of the general category, with 10% of the households having a pregnant woman or lactating mother and 12%



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which is compounded when they are also victims of oppression. It becomes more challenging for women and children of SC and ST communities who are prone to acute malnutrition. As part of the COVID-19 Relief package, home delivery of food and raw materials by Anganwadi worker for supplementary nutritional feed to pregnant and nursing women and under-5 year-aged children enrolled with the Anganwadi under the ICDS was announced. The survey revealed a higher presence of SC and ST eligible households. Of 27643 respondents, 15% reported that there were pregnant women in the family, 20% were from the ST of 0-6-year-old children in the households. It is also to be noted that as per the NFHS-IV (2015-16) data SC and ST children are most prone to malnutrition, with 42% stunting, 19% severe stunting, 15% and 18% SC and ST children wasted, and 32.7% SC and 36.7% ST children being underweight and 10.8% and 13.0% being severely wasted, as compared to other social groups. With the loss of livelihood post lockdown, and skewed supply of supplementary nutritional food materials to the eligible SC and ST households accompanied with food scarcity reported by 73% (of 1995) ST respondents, and 66% of SC respondents



HHs with 0-6 old children

(of 19701) throws back a bleak picture of difficulty for these communities.

3.3.2 Public Distribution Service (PDS)

As part of the relief package, the Central Government had announced an additional 5 kg cereal and 1 kg pulses free for the next three months per person to be distributed through public distribution service outlets. Foodgrains were announced only for the ration card and other eligible cardholders. Regarding documents like the Above Poverty Line (APL) card, Below Poverty Line (BPL) card, Antodya Anna Yojana (AAY) card, from 27530 respondents nearly 79% responded in the affirmative, and about 72% of the 27224 respondents had received their quota from the Public Distribution System (PDS). However, there is evidence of some discrimination in the distribution of quotas. While 68% of 13742 respondents were given full quota, only 50% of the ST community and 18% of the DNT community received full quota.

Access to PDS was also disrupted for several communities. While 48% of 24960 respondents reported that the PDS had been closed for a week, 22% reported that it was closed for up to two weeks, and nearly 30% did not have access to the PDS for more than two weeks. The service of the Anganwadis centers (AWC) tasked with the responsibility of distributing nutritious food to the children and eligible women were also interrupted. Of 27071 respondents, nearly 73% said

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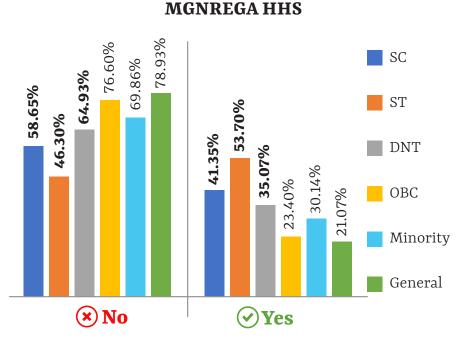
that food from the AWCs had not been delivered, and the percentages were over 70% across communities, and the General community followed closely at 67%.

3.4 EMPLOYMENT AND LIVELIHOOD

3.4.1 MGNREGA- Enhanced wages

In stark contrast to 34.51% of non-SC/ST households possessing capital assets, 54.71% SC and 35.65% of ST landless households derive a major part of their income from manual casual labour.¹⁶ 83.55% SCs and 86.53% of the STs fall in the lowest income slab, i.e. monthly income of highest earning household member, less than Rs. 5000. A measly 4.67% and 4.48% earn more than Rs. 10000 respectively (Summary, SECC 2011). With 78.19% of SCs engaged in marginal landholding ing and 23.97% STs having small landholding, and the overall deprivations along with income poverty, MGNREGS works are both the mainstay and supplementary livelihood option of SC communities back in rural areas despite progressive shrinking in the availability of work and timely wage payment.

Just after the COVID19 lockdown, the Mahatma Gandhi National Rural Employment Guarantee Scheme (MGNREGS) daily wage rate was increased by Rs 20, i.e. Rs 202 from Rs 182, not just as part of the relief package but a regular administrative requirement by the Central government. Besides the pending wages accruing to Rs. 6000 crores as of March 2020, the increase in wages announced as relief was found to be abysmally low and far from bringing any relief to some of the most vulnerable people. It is to be noted that many Southern states have higher wage rates than the Central wage rate.



Of the eligible 10694 MGNREGS beneficiaries. 66% had not received the enhanced wages during the survey. Among them were the DNT communities (98%) followed by 81% of the Minorities, 78% of the General community and STs, and 63% of the SC community. Through the survey, it was further revealed that nearly 58% of 27584 respondents were not aware of the increase, albeit negligible,

and only 14% with small landholding; together with 53.9% of the STs with marginal landhold-

in wages. The scenario gets progressively bleak as it is revealed that 59% of the SC and 46% of ST respondents were still not enrolled with

¹⁶ https://secc.gov.in/stateSummaryReport

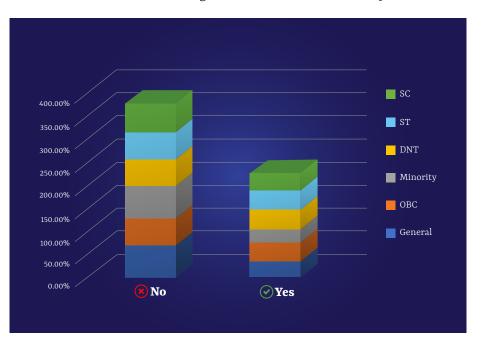
the MGNREGS despite the high prevalence of 3.4.2 Organised sector workers low-income poverty and multiple deprivations. Low enrolment under MGNREGS was found for the general community (21%), OBCs (24%), and Minority communities (30%) which could indicate their low dependence on MGNREGS work. Among the (94) MGNREGS enrolled respondents from the DNT community, only 11% reportedly had a job card. However, only 37% SCs and 22% STs received enhanced wages.

The distribution is also higher among women who are enrolled in the scheme, with a little more than 53% women enrolled in the MGNREGS followed by only 38% men. Examination of caste and gender-based analysis of the MGNREGS reveals that 58% of the total 19688 SC respondents were women, as compared with 42% SC men. The same stood almost equivalent at 50% for ST wom-

en and men, respectively, whereas, for all other communities, the participation of women dropped lower than of men in MGNREGS work, with general women. An equally high number of SC (52%) and ST (50%) women were found to have job cards than men (37% SC and 38% ST respectively). Only 37% of SC respondents and 22% of ST respondents had stated receipt of enhanced wages. Of

Only 3.95% SCs are employed in a salaried job in government and merely 0.93% are in salaried jobs in the Public sector in India. The ST community stands at 4.36% in salaried government jobs and 0.58% in salaried public jobs. Even after the Unorganised Workers' Social Security Act of 2008 came in, very few (about 5% to 6%) got enrolled for social security benefits". ¹⁷

For the survey, 25670 participants were asked if they knew about the government's relief measure to pay a full 24% EPF to those who earn less than Rs. 15,000. Under the scheme, the government has announced a facility to claim an advance subject to withdrawal up to 75% of PF balance (Employee share and Employer Share) or 3 months PF wages or the claimed amount by the member



these, only 34% SC (of 8045) women and 45% ST (of 1062) women, said that they had received the enhanced wages.

whichever is the least. A total of 88% responded that they were not aware of the provision. However, the lack of awareness is insignificant when compared to the 96% who responded that they

¹⁷ Mohanty, P. (2019, July 15). Labour reforms: No one knows the size of India's informal workforce, not even the govt. Business Today, Retrieved from https://www.businesstoday.in

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are not employed in the organised sector.

3.4.3 Jan Dhan Yojana- Ex-gratia amount of 500 for the next 3-months

Announcing the Pradhan Mantri Garib Kalyan Yojana (PMGKY), given the countrywide lockdown, the government announced Rs. 500 for three months as a relief to the women Jan Dhan account holders. However, of the 27329 respondents, only 37.63% (10261) were enrolled under the scheme. Of these, 21.64% are women account holders - 22.60% SC women, 23.74% ST women, 21.13% OBC women, 13.39% Minority women, 19.17% DNT women; and 10.76% general category women. And of the eligible account holder, only 57.88% had received the ex-gratia amount into their accounts, of which women constituted 36.79% and men stood at 21.09%. Only 24% of the ST women, 41% SC women received the ex-gratia DBT into their JD a/c. This speaks volumes about the real status of the coverage of the much-trumpeted JD accounts and the DBTs. A lapse of about 10-15 % could be condoned due to technical glitches, but 60-80% of non-coverage reeks of lack of will to reach out to the target population that this entitlement should reach.

3.4.4 Pradhan Mantri KISAN Samman Yojana -Additional Rs. 2000 for next three months

Additional relief was provided to agriculture workers and farmers under the Pradhan Mantri Kisan Samman Nidhi (PM-KISAN) scheme during the lockdown. The scheme entitled each farmer up to Rs 2,000 for three months, a total of Rs. 6000, which was funded by the Central Government. Of 26235 respondents, only 28% (7431) were farmers. This included 25.68% SCs, 36.23% STs, 24% minority community, 35.85% OBC and 37% general community.

Of 7431 respondents, close to 70% (5604) respondents were registered under the scheme, however, only 40% (3170) had received the assistance. Of those registered under the scheme, 87% are



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from the DNT community, 80.90% are from the general community, 64.51% from the minority community, 80.87% OBCs, 67.51% SCs, and 69.22% STs. However, from among 7431, only 58% of respondents have received the money in their accounts. These include 48.11% from the DNT community, 47.18% of the general community, 41.71% from the minority, 57.37% of the OBCs, 60.10% of the SCs, and 59.88% of the ST farmers.

3.4.5 Pension- Ex-gratia Rs. 1000 in 2 installments to the Senior citizens (above 60), widow and PwD

For senior citizens, widows, and disabled people, additional relief of Rs. 1000 was announced in two installments. Of 26413 respondents, it must be noted that merely 11% (2820), 10% (2587), and 2% (563) of the respondents said that they were registered under one of the national pension schemes for the elderly, widow, persons with a disability, respectively. For the 5216 respondents who were entitled to the relief announced under the pension scheme, only 64% had received the money in two installments of Rs. 500 each.

Of 26193 respondents, only 33% were aware that treatment for COVID-19 is covered under the Pradhan Mantri Jan Arogya Yojana (PMJAY) also known as Ayushman Bharat Scheme. However, of the total 25476 respondents, only 14% were covered under the PMAY scheme, comprising 5.38% DNTs, 10.93% general community, 12.73% minority community, 16.36% OBCs, 14% SC and ST communities respectively.

3.5 OTHER SERVICES

Nearly 70% of 30997 respondents said that they had received information about the timing for the distribution of ration at the PDS shops. However, of 29143 respondents, 62% also said that the quality of rations that they received was poor.

A total of 31634 respondents were asked if they were faced with any harassment when demanding relief entitlements and 20% had no response. Nearly 14% said that the relief was deliberately delayed, including 20% of the general community of which 11% were also homeless, 14% of the SC community, 13% of the OBC community, 10% of the DNT communities, 9% of the minority communities, and 7% of the SC community. Nearly 6% of the respondents said that those who were from dominant castes were served first, 15% reported other kinds of harassment, and 46% reported no harassment. Of the 30257 respondents who were asked if they filed a complaint regarding the harassment, 96% responded that they had not.

RESPONSES FROM CIVIL SOCIETY

Civil society played a crucial role in addressing the gaps left by government services. Indian civil society organizations are actively responding to the COVID-19 pandemic drawn into action because of two factors- providing healthcare facilities, associated paraphernalia such as masks, sanitizers, and being frontline respondents in supporting poor populations affected by the lockdown. The lockdown imposed by the government to slow the infection spread quickly in creating economic challenges for daily breadwinners and labor classes due to the temporary suspension of factory work. This caused en-masse migration of factory workers, daily breadwinners to go back on foot to their villages because public transportation stands closed for the duration of the lockdown. Many civil society organizations have undertaken extensive meal distribution, ration facilitation, shelter provision in cities and major highways of the country.

However, many have been limited in their reach. The Dalit CSOs were quick to react and take steps towards ensuring that the Dalit communities are not left behind in the after-effects of the pandemic and lockdowns. National Campaign on Dalit Human Rights played a key role in reach more than 30,000 Dalit families with relief and care work, with the distribution of food and essential services in 8 states in India. While many partners of NCDHR, further helped various communities in their means and kept the fight for rights and development during the Pandemic.

Many of the NGOs played a crucial role in reaching the Dalit populations around the country as the state service was often under reached or unreached for accessing by the communities. Many activist and CSO representatives, worked day and night for the affected and marginalized communities in especially to ensure the food is available to the people. Many migrant labourers who were displaced and were traveling back to their domicile states by foot, were depending upon the relief and aid provided by the CSO and individual people.

EXPERIENCES OF DALIT STUDENTS DURING LOCKDOWN

Mr. Suresh is a President of Rajedrapattinam that has 900 households and more than 4000 populations, mobilized a resource from volunteers and the Goong Voluntary organization, and provided provisions to 60 households in the hamlet of the panchayat.

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He sent an appeal to the collector and authorities to full fill the needs of the communities but no authorities from the government have not responded to the appeal. While he took the position of president, Rs.3, 00,000 was allotted to the panchayat for providing 100 days' work for the BPL (Below Poverty Line) and the money had been transferred to the panchayat account to pay the communities who were working as daily wages under MNREGS.

The panchayat also gave work to the communities and paid their wages for their work-



ing days. Hereafter, the panchayat has not given work to the communities so far under MGNREGS.

The panchayat president, found new people in the village and inform to authorities and facilitate them to take treatment and continue to follow support for the people who were suffered from illness and fever, and other causes.

The president, is not able to work independently as per the guidance of panchayat for the needs of the communities, does not take decisions based on the guidance of the panchayat, does not receive the monthly budget for spending basic needs of the panchayat, received 10,300 as a monthly budget for spending needs of the communities during September 2020, received Rs.50000/- for the covid19 relief service, has not received any budget apart from (Rs.10300+50000) since took a position of president, says that many people from BDOs has been taking contact to do Pasumai Kudil housework for poor communities but contractors do not complete and finish the work properly.

CONCLUSION

In the regular world, migrant workers and those who are trapped in the informal economy are incredibly exposed, they have poor bargaining power, compromised food security, and inadequate healthcare facilities. While the government has promoted considered schemes

to alleviate their plight, the infrastructure is fractured and puts the onus of proof on the beneficiary. Additionally, the gaps in awareness about the schemes are a further barrier to people accessing these entitlements. Unfortunately, the fallout of the lockdown in India, exposed and exacerbated these vulnerabilities, levying a devastating economic and social cost that pushed the poor into penury.

> Following the announcement of the lockdown, those

The government should consider initiatives to help map internal migration at the level of the panchayat raj institutions (PRIs) to document migrants moving out of rural areas, build a register of migrant workers, and maintain a database with the panchayats in collaboration with the labour department.

employed in the informal sector in cities like Delhi, Mumbai, Surat, and several other cities were dealt a severe blow. They were out of work and trapped in cities that had no room for them and completely neglected their existence. Failing to receive any support from the authorities, thousands began an exodus, often compared to the Partition, to their villages that were hundreds if not thousands of kilometers away. The institutions that were meant to protect the interests of the most vulnerable - those who worked on construction sites, vendors, hawkers, sanitation workers, municipal workers, safai karamcharis, regiments of men and women who undertake essential services that remain invisible and unacknowledged - had failed them. The government should consider initiatives to help map internal migration at the level of the panchayat raj inchayats in collaboration with the labour department. Similarly, migrant resource centers across the country be a one-stop solution for workers to access all entitlements, inquiries, and information. The COVID-19 pandemic has certainly made an example of the brittle welfare and social security schemes that are on offer, but also of the horrific inequality blatant disregard for life and stoic

stitutions (PRIs) to document migrants moving out of rural areas, build a register of migrant workers, and maintain a database with the pan-

schemes that are on offer, but also of the horrific inequality, blatant disregard for life, and stoic indifference displayed by the government. As we wait for the larger picture to emerge, the government will have to work on earning the trust of the most vulnerable. What lies ahead is a long road to recovery, not only of our physical health but also our economic health, and it would be near impossible to move ahead unless the workers, the most critical demographic that runs this great country, are appeased immediately.

4.1 RECOMMENDATIONS

- Demand for allocation of resources for Disaster Risk Reduction and capacity building for Dalit communities through dedicated funds like Sub-Plans.
- II. Mainstream and strengthen social protection programming in Disaster situations.
- III. Enhance budgetary allocations under social security schemes, especially the flagship schemes based on SECC data.
- IV. Universal coverage of Dalit households in all social protection schemes on a mission mode
- V. Put in place accessible and people-friendly complaints and grievance registration and redress mechanisms.
- VI. To constitute a special monitoring committee at the district and taluk level to re-

duce, prevent the incidence of caste-based discriminations and violence.

- VII. The dominant caste persons (Caste Hindus) are targeting and brutally attacking the Dalits. We would recommend kindly register FIR under the SC/ST PoA Act and also registering case for violating the curfew rules (144 curfews) and arresting them under the Goonda Act
- VIII. The humanitarian organisation, UN (UN-SDR included), and EU should be mindful of the intersectionality of different vulnerabilities with social reality in India and collect disaggregated data.
- IX. Daily Wage-earners: The survey revealed that the respondents among Dalits have 66% of the daily wage earners compared

to 11% of the non-Dalit counterparts. That clearly shows how vulnerable they are to the corona pandemic. Therefore, there is a need to prioritize them and provide both short term and long-term support for their rehabilitation.

X. Caste-based discrimination: Several incidents of caste-based discrimination have been reported in the media. The surveys also revealed that 67% of the Dalit respondents said they face some kind of discrimination. There is a need to spread the message of anti-caste based programmatic interventions and this has to be done by Dalits and non-Dalit actors (both government and non-government bodies).

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