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Original Research Article

The Impact of Novel Corona Virus Pandemic on Livelihood of an Urban Marginalized Community in Assam, India

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Abstract: The study made to see the impact of Covid-19 pandemic on the livelihood of an urban marginalized community revealed that the people of the community were affected adversely. As most of them were daily wage earners, they did not get jobs always during pandemic period and as a result, their weekly income had gone down drastically. This monetary crisis hurt their livelihood causing their lives so miserable that they couldn't withstand this unprecedented crisis. They were illiterate and ignorant to get access to the government schemes for Covid relief and other opportunities. They had to pass the days with great difficulty and stress. Awareness is required to motivate these community people so that they can explore the welfare schemes and other opportunities announced by the Government for the people under poverty line time to time for improving their livelihood for a better living.

Keywords: Covid-19, Pandemic, Marginalized community, Livelihood, Illiteracy, Ignorance, Awareness.

INTRODUCTION

Nowadays, no one's day ends without the utterance of the word novel Corona virus which is later named as "Covid –19" after World Health Organization, categorizing it as pandemic. It was initially reported in Wuhan province of China and since then, it transmitted to most of countries of the world in epidemic form causing high morbidity and mortality. Now, it is a matter of concerned how long this virus activity will continue and when the globe will be free from Covid infection. The viral infection is ravaging economies, livelihoods and activities in all walks of life. This, being a new virus infecting humans for the first time, the whole world is looking for its prevention and effective treatment. The main emphasis is on maintenance of extensive precautions such as proper hygiene protocols of health department and the department of disaster management for containment of the transmission of the virus. Almost all the countries took stringent steps to ban gatherings of people so as to curb the spread and break the exponential curve. Also all the countries were bound to lock their population in their houses enforcing strict quarantine to break the chain of the spread of the havoc of this highly communicable disease. Thus, the virus creates significant knock-on effects on the daily life of citizens, as well as their socioeconomic status.

World Health Organization (WHO) highlights that the COVID-19 pandemic has led to a dramatic loss of human life worldwide and presents an unprecedented challenge to public health, food systems and the world of work. The economic and social disruption caused by the pandemic is devastating: tens of millions of people are at risk of falling into extreme poverty, while the number of undernourished people, currently estimated at nearly 690 million, could increase threat. Nearly half of the world's 3.3 billion global workforce are at risk of losing their live by up to 132 million by the end of the year. Millions of enterprises face an existential threat. Informal economy workers are particularly vulnerable because the majority lacks social protection and access to quality health care and have lost access to productive assets. Without the means to earn an income during lockdowns, many are unable to feed themselves and their families. For most, no income means no food, or, at best, less food and less nutritious food (WHO, 2020).

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The most vulnerable affected people are the marginalized groups which are isolated, mostly daily casual workers who have less access to social protection because of no savings or very meager amount of savings or limited alternative sources of income.

In the present study, the difficulties faced due to Covid-19 catastrophe by an urban marginalized community residing in Dibrugarh district, Assam have been discussed.

MATERIALS AND METHODS

Study area

A study was made in an unprivileged community residing near Oil India Township, Duliajan, under Dibrugarh district of Assam, India. People are mostly Hindus with a few Muslims and Christians. Most of them are daily wage earners engaging themselves in different types of jobs. They are illiterate with very low socioeconomic status.

Sampling for survey

The visits were made in the study area to collect the information required for the study. After getting the information about number of families or population (enumeration of households), the sampling technique was chosen. Systematic random sampling had been chosen to select samples at a particular preset interval. There are about 90 families in the community and 30 families were taken for the survey and every 3rd house of the community had been taken for the survey for getting a representative sample of the study population statistically. Data were collected for getting information on qualitative and quantitative aspects through a predesigned interview schedule. Qualitative method was given priority in this research and the quantitative aspect was used to enrich the understanding of the qualitative data.

RESULTS AND DISCUSSION

In this study, the respondents of 30 families in the community were interviewed through a predesigned interview schedule. Table-1 depicts the age group, religion and education status of the respondents, Majority of respondents were Hindus, few were Muslims and Christian people. Respondents of age group 31-40 were more in comparison to other age groups, Illiteracy rate was high among the respondents and no one was of metric standard. As per the family size of the respondents as shown in Table-2, maximum were in age group 1-4 followed by 1-3/ 1-5 group and 1-6 family size group. The illiteracy and ignorance of the respondents are the foremost reasons for which they are unable to understand the situation and to explore the facilities or opportunities as provided by the government time to time for the people below poverty line. The lack of awareness among the community creates difficulties which they cannot escape and ultimately get deprived of the opportunities provided through different government schemes. Apart from these, their ignorance and unawareness pose various social and health problems. The non hygienic living conditions seemed to be a formidable problem and as a result, the community people and their children suffer badly from malnutrition, worm infestations, skin diseases and enteric diseases. This study is in conformity with earlier study made in a marginalized teagarden community revealed prevalence of malnutrition, anemia, worm infection, skin problems and children were more prone to these diseases. The illiteracy, lack of awareness and living conditions are the main causes of their sufferings (Medhi et al., 2007). The Covid-19 pandemic situations aggravated their disease sufferings because they were unable to access the medical facilities for treatment during the period and were in severe monetary crisis to purchase the medicines on proper time. They spent the days with fear, uncertainty with an ordeal state of mind all the time.

 $Tab \underline{\text{le-1: Distribution of respondents (N=30) according to age group and religion and education status}$

Age group	20-30	31-40	41-50	51-60	Total
Respondents	5	18	5	2	30
Religion	Hinduism	Muslim	Christianity	Total	
Respondents	26	3	1	30	
Educational qualification	Illiterate	Primary	Read up to Class viii	Matriculation	
Respondents	18	10	2	0	30

Table-2: Distribution of respondents according to the family members

Total family size	1-3	1-4	1-5	1-6
No of respondents	6	17	6	1

Economic status and livelihood of the respondents

The respondents were not having any permanent nature of jobs. They have to earn their livelihood by engaging themselves in different daily wage jobs. Due to Covid-19 pandemic situation, they were not getting jobs always as informed by them and as a result their income was decreasing in comparison to earlier. Their weekly income as shown in the Fig-1 was in the range of majority 12 (40%) in Rs 500-800, 8(26.6%) in Rs.801-1000, 6(20%) in Rs.1001-1500 and only 4 (13.3%) was in Rs.1501-1800.

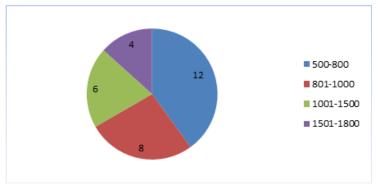


Fig-1: Weekly income of the respondents (N=30)

Their families (women) were also engaged in different types of jobs like cook, maids for fostering of babies or any other in-house works and this earning used to facilitate them to incur some of the routine expenditures in a smooth way. But the pandemic situation of Covid-19 made them jobless as the people who engaged them earlier were afraid of keeping them for in-house jobs due to fear of virus transmission. As per As per UN Women report, the impact of Covid-19 tends to affect the earning of women who are found to have less access to social protections and become the burden with unpaid care and domestic work and therefore are dropped out of the labour force. The ongoing pandemic situation made their economic status worse and could not withstand the proper sustenance of their livelihood and their children and family members became the victim of poverty. The lockdown had disproportionately hurt this community people due to loss of livelihood and lack of food, shelter, health, and other basic needs. When they were out of income during the pandemic struck catastrophe, they were forced to become more and more dependent on informal money lenders and ultimately, this has made their living condition worse over time.

Despite the government's efforts to ensure food-security during the period of lockdown, most of them were unable to avail the benefits of receiving ration packages or other help if any. They informed that they had been living through a horrid period and none of the government measures announced were accessible and expressed that it did not attract them in any way. Covid-19 has completely closed the lives of daily wage workers without work or without much income, without sufficient food, without personal commodities, without medicines and has generated a much stress upon them leading to social, mental and emotional trauma. After interviewing with the respondents, it was also observed that a large number of them had familial disturbance due to financial problem, alcoholism in family, wrangle or quarrel in the family. These types of disturbances create non-participation among family members which have adverse effect on their family maintenance. Similar impact as reported by Kumar and Pinky, 2020 in Bangladesh is that the ongoing Novel Corona Virus COVID-19 pandemic has created an unprecedented economic and social crisis among the unprivileged community. In addition, households engaged in informal services and labour-intensive activities such as construction workers, rickshaw pullers, day labourers and owners of small grocery stores are in a great danger of income losses due to slower demand and social distancing measures(Islam *et al.*, 2020). Moreover, the COVID-19 outbreak and the healthcare burden, together with related disruptions, are expected to exacerbate the negative impacts on employment, household income and livelihood in both rural and urban areas (World Bank, 2020).

Conclusion

From the present study and the foregoing discussion, it is assumed that the virulent Covid-19 virus has created a great catastrophe causing a huge loss of human life and subsequently, it has hurt the world economy in such a way that many more years will be required to relieve from this economic crisis. The groups of people seriously affected are the unprivileged communities because they are the people always dependent on informal employment mostly casual day laborers who have no savings and less access to social protection. They are the most vulnerable segments as Covid-19 situation has shown us. Awareness is required to motivate these community people so that they can explore the welfare schemes and other opportunities announced by the Government for the people under poverty line time to time for improving their livelihood for a better living.

At this juncture, the district or local authorities should also take all necessary steps to ensure that every one of a poor marginalized community, who has no alternative arrangement for their livelihood, should get access to food and medical care, and in this unavoidable critical condition they should not feel that they are mistreated or stigmatized.

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