

COVID-19 Pandemics and Socioeconomic Situation of Women Workers

BACKGROUND

- The impacts of the ongoing Corona Virus (COVID-19) pandemic on lives of the migrants in all cities of Bangladesh have left many in fear, millions of migrated women, while hundreds of thousands have lost their livelihoods and are facing serious starvation and health insecurity.
- Disruption of livelihoods due to covId-19 has increased the pre-existing low levels of access to health services to migrant families.
- Overstay in small houses have increased rate of violence against women migrants and their children and family fueds.
- Unplanned mass awareness among the community has increased distress and mental sickness among the women migrant workers.
- The communities have been burdened with having to overstretch on food and the provision of basic services since the pandemics have destroyed their livelihood.
- BNSK has conducted an Impact Assessment for the affected women migrant workers across five areas – Chollish Basti, Pora Basti, Geneva camp, Bizlee Mahlla and Jahuri Mahalla of Mohammadpur. Respondents are the migrants from Barisal, Satkhira, Khulna, Jamalpur, Mymensingh, Nilphamari, Kurigram, Rangpur, Gopalganj and Sylhet
- The respondents included women migrant workers, their family members and community women members.
- The Assessment report is intended to guide BNSK and partners in humanitarian programming and address the needs of the migrant workers.

FOOD-SECURITY AND LIVELIHOOD

- Conduct a quantitative and qualitative study to identify the exact number of people that are affected by COVID-19 pandemics and they require emergency food assistance.
- Provision job status to identify livelihood options of the people
- Provision food assistance to bridge the food needs of the people
- Provision cash assistance to improve the various sources of livelihood in wider areas for migrant workers
- Provision business tools, capacity and seed money to improve Entrepreneurial, agricultural activities in wider areas within the coverage districts
- Conduct detailed livelihoods assessment to inform the income and food insecurity dynamics of migrant households in the wider areas within the areas
- Conduct detailed training needs assessment on employment and entrepreneurship skills of the women migrant workers in the wider working areas.



CORONA PREVENTION

- Health status due to COVID-19 to the households within the areas
- Availability of basic sanitisation materials such as soaps, hand sanitizer (disinfectants) to the migrant families within the areas
- Knowledge on significance of prevention process like hand wash, self quarantine, isolation.
- Level conduction of handwashing campaigns in the wider areas

PROTECTION

- Conduct a protection and inclusion survey to assess the level of establish social stigma and violence against women workers in the areas
- Provide social protection assistance to the areas



INTRODUCTION

More than 2 million people are being integrated into the national workforce each year. From them nearly 400 thousand gets employment (seasonal or regular and the rests do not have any opportunity. These groups migrate from rural to urban and country to overseas. Nearly 50% of these migrants are women who move from rural to urban areas and country to overseas. These women have been thrust into high and deeply concerning levels of humanitarian situations; some of the worst in the world. Sudden economic lockdown in Bangladesh caused by the COVID-19 pandemics have left widespread devastation in livelihoods within Dhaka city and other parts of Bangladesh especially in the urban areas.

Therefore, the large numbers of migrant women in the region have found jobless, empty pocket resulting into empty-stomach! These migrant women in dire need of urgent humanitarian relief and support for livelihoods and rehabilitation.

Recognizing that the crisis has led to a new class of poor and vulnerable people struggling to access limited resources and infrastructure, BNSK in its rapid humanitarian response seeks to address the needs of both those who have been migrated in the urban areas.

This document is a report of the COVID-19 Impact assessment including needs of the women migrants in urban settings Chollish Basti (forty roomed slum), Pora Basti (Burnt slum), Geneva camp, Bizli moholla and Jahuri Moholla.

It is intended that this report will give BNSK and other like-minded organizations a strategic direction on areas of expansion and scale up of humanitarian assistance to the affected women migrants due to COVID-19 pandemics all over the country and the findings of this Impact assessment will be used by key stakeholders to make evidenced based decision on the most critical humanitarian needs of the people.



OBJECTIVE OF THE IMPACT ASSESSMENT

The overall aim of the assessment is to ascertain the impact of COVID-19 precisely the situation of the migrant women workers. Its focus is specifically on their vulnerabilities and the most critical needs in the area of access to food and livelihood, Awareness and knowledge access to water, sanitation, hygiene, and social protection

Specifically, the objectives of the Impact Assessment included the following:

- To identify the specific food needs of the women migrant workers in the areas
- To Assess the basic health status of the migrant women in the target areas
- To identify knowledge and practice of the women migrants and their families on prevention and protection of self, family and society from COVID-19 infection
- To identify the level of violence against women migrants during this pandemic and the level of social protection and assistance

SCOPE OF WORK

The key technical measures under the impact assessment covered the development of tools like In-depth-Interview questionnaires and Key Informant Interview Guides, to conduct the impact assessment, training of enumerators for the collection of quantitative and qualitative data planning and supervision of field data collection, extractions of the data collected, analysis and reporting. The present reality of the COVID-19 Impact assessment covered 154 families migrated from Barisal, Satkhira, Khulna, Jamalpur, Mymensingh, Nilphamari, kurigram, Rangpur, Gopalganj and Sylhet.

Chollish Basti is now a community of migrants with no formal housing for the migrants, the community is largely divided into block 1 and 2, with an estimated population of 250 people (150 in block 1 and 100 in block 2). Assessment data was sought from block 1 and 2. Almost all of the incountry-migrants here work as domestic worker. Some are garment workers.



Pora basti is another community of migrants, the community is largely established as the low income group's housing with a room facility of 40 families where data was collected of 35 women migrant families. Most of the women migrants work as domestic worker, street vendor, cleaner and few home based tailors.

Geneva camp has a mix of migrants from different parts of Bangladesh and hence data was sought from wards A, B and C communities. Geneva camp is 01 kilometers in area with an estimated population of 30,000 migrants. Most of the young men and women community often travel to different developed areas like Dhanmondi, Sobhanbag, Lalmatia (05 km away) to work as domestic worker, driver, street vendor as a source of income and livelihood. The research sought data of 43 migrant families.

In all the five areas data was sought from women migrant workers. There are estimated 1600 houses in the areas. Amongst them 40 in Chollish basti, while Pora Basti has an estimated population of 200 people. Geneva camp has1,500 families and 43 families are surveyed from Geneva camp. However, there is no established camp or housing in either Chollish basti, Pora basti, Bizli Moholla and Jahuri Moholla hence all are established by host community people.

In view of the above, 164 mobile interviews were held with 100% migrant women workers in all the assessment areas along with 19 KIIs conducted involving Community women leaders and youth leaders. Moreover, BNSK conducted 15 in-depth interviews to validate the quantitative survey data.



METHODOLOGY

The Impact assessment was conducted using quantitative and qualitative methods of data collection through In-depth interview, key informant interview to harvest precise data showing the condition of migrant women in their houses in the said areas including their place of origin.

The instruments for the COVID-19 impact assessment were designed with inputs from sector specialists and experts and front line workers including research professionals and rights activists and the humanitarian response teams of BNSK. This (tools) were there after critically reviewed before deployment on the field for the training of interviewers and data collection.

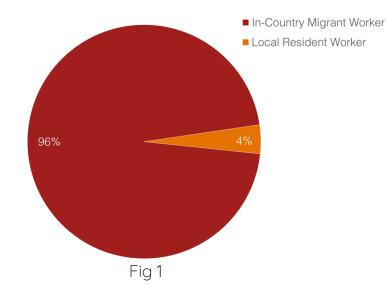
The inclusion criteria for the recruitment of IDI participants and KII interviewees covered people who had been working as domestic worker, street vendor, cleaner etc. since long 10 to 12 years in urban areas and in overseas.

A total of 9 Enumerators were trained in mid-March, 2020 with the objective of giving the enumerators a general overview of the "COVID-19 Impact Assessment for migrant women workers". The in-depth interview (IDI) questionnaire and key informant interview (KII) guides were demystified with key emphasis on content understanding for the instrument, data quality and other necessary procedures to be adhered to during field work and data collection.



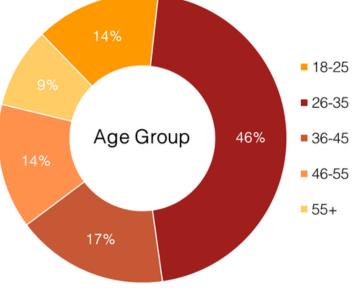
KEY FINDINGS

BNSK survey reporting team has tried to get DEMOGRAPHIC INFORMATION to set priority for humanitarian needs.

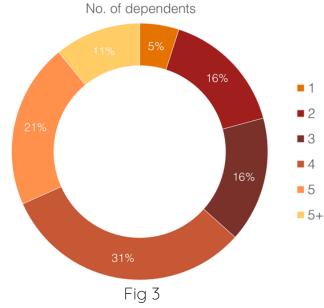


Respondents in all the five areas were women. 96% of the surveyed women were migrated from rural (their place of origin) to urban to alleviate poverty and economic hardship.

All the migrant women (fig 2) are of working (18y-55y) age population. Among them 18 to 55 year age group are nearly 81%. The rest 19% works on and off as their age and physical condition do not permit them to work.81% reported about the dependency of the children and the 56 + age group on other family members.



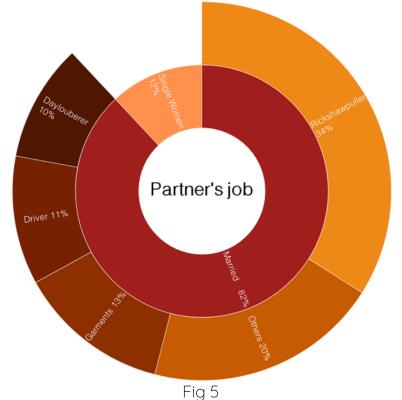




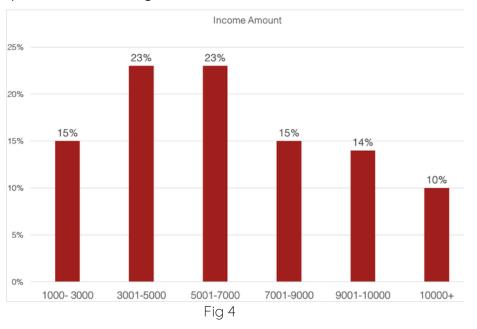
100% of respondent women report of having minimum 1 child. 63% of the families have more than 4 children.Only mere 5% of the respondents have single child.



The migrant women reported that 95% of their partners work in informal sector namely day labour, street vendor and motor mechanics while 5% are unemployed or recently lost jobs for other reasons before Corona pandemics started in Bangladesh. 12% of the single women do not have any alternative earner in the family. Respondents have reported of having dependents members are almost children and old family members. Partners of the migrant women are found 13% work in formal sector.



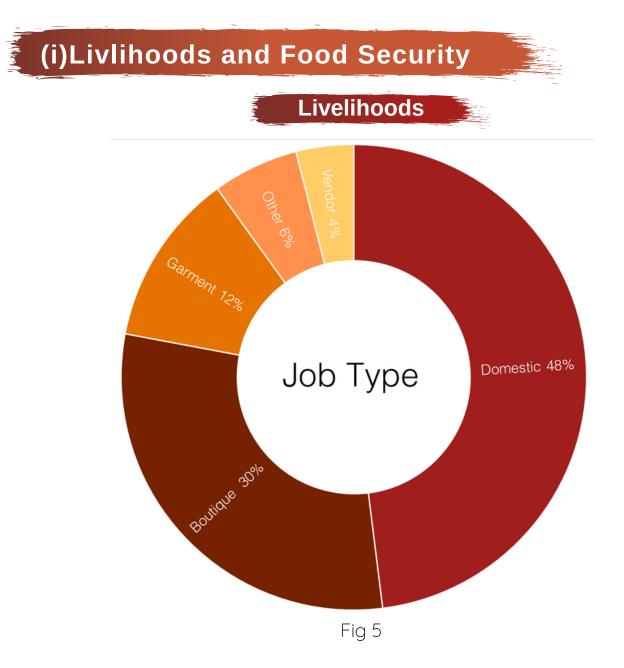
It was revealed, 90% of the workers earn (Fig 4) monthly BDT 1,000 to 10,000 per person, and only 10% of the workers had income above 10000





The key findings are compiled into three key humanitarian needs sectors:

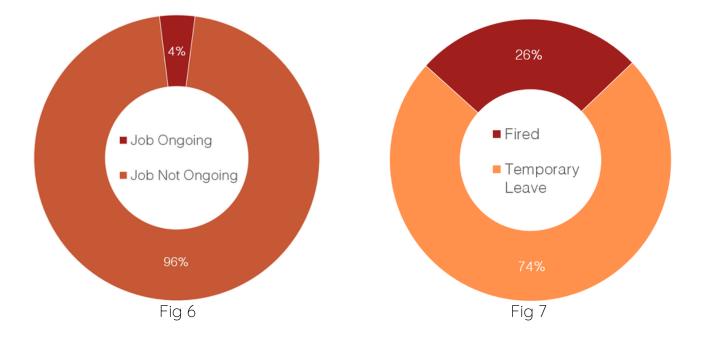
- (i) Livelihoods and Food security ;
- (ii) Corona Prevention; and
- (iii) Social protection and inclusion

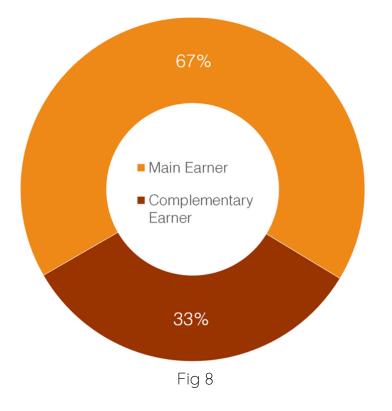


Respondents reported that almost 94% live hand to mouth and work in informal sector. 88% work as domestic worker, boutique labour, street vendor, and cleaner etc. while 12% work in garment factories around.



96% of the workers are not going to their work anymore (fig 6), and from them 94% (Fig 7) reported of losing jobs due to Corona pandemics. All the workers does not have any option to pay their room rental of Mar and Apr 2020 due to job seizure.

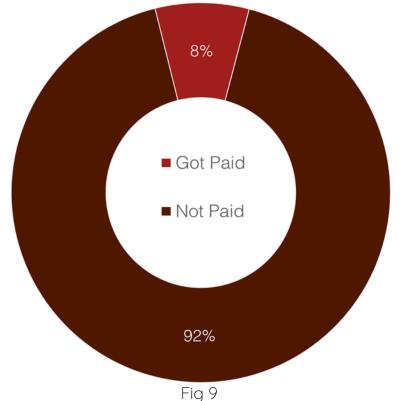




67% of the women workers (Fig 8) were the main income earner of the family while 33% were the complementary contributor of the family. And both the earners have lost or got suspended from their livelihood opportunities at the moment.

100% of these respondents reported of no savings to buy food for the next weeks as they live on their daily/monthly income of BDT1000 to 9000 per month





9

Almost 92% of the women workers reported of not having their last month wages while getting leave due to sudden economic lockdown for Corona Virus pandemic. (Fig 9)

Its been noticed that for 95% of the Domestic workers, employers would not allow them to enter into the premises until the Corona virus pandemic is over from the country. Experienced Street vendors have no chance to work as Economic lockdown seeming to be retained for long time! Cleaners, Boutique tailors are dependent also on the current situation to be normal!

All the women workers require some immediate livelihood opportunities. They prefer the jobs they are habituated of doing during last few years. However, for the time being they want any job to protect their family members from starvation.

Interviews revealed that the disruption of livelihoods have worse preexisting low levels of access to food, medical supplies for older citizens in the families.



86% of the women workers reported of financial crises to maintain family subsistence

Age old workers (40%) reported of not having regular medication of special health condition.

85% of low-income women are in serious need for food that would ensure them healthy survival

50% of the workers are in deep need for protective gears, as they are unavailable and those which are available are so costly that it would be a major portion of what they have to survive

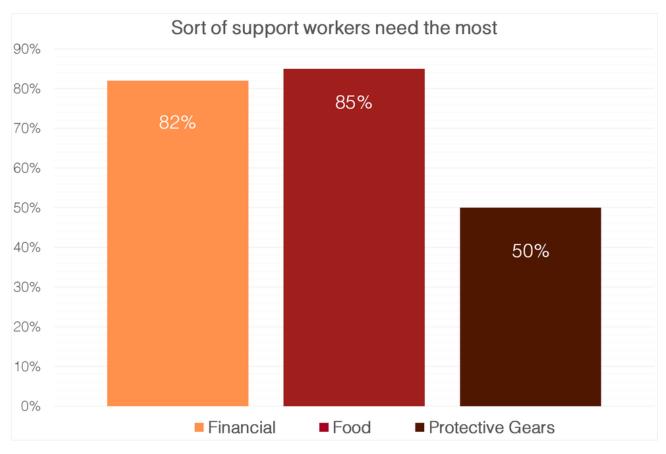


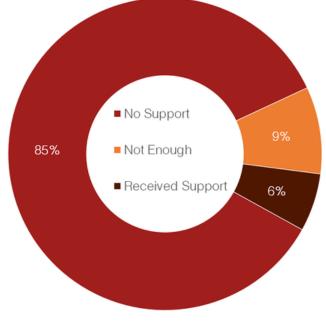
Fig 10



Food Security

Food is a critical need of the families. 85% of the adult women are in need of minimum food while, lactating mothers and children are in desperate need of nutritious food such as milk, egg, fish and nutrient cereals to strengthen the immune system of the children to avoid Corona virus.

85% of the respondents reported of getting no supports from government service delivery agencies during this economic lockdown due to COVID-19 pandemics, while 9% of the respondents reported of insufficient food supply from local commissioner. One of the respondent reported, "I was given 2kg of rice only during last 30-days."





Many of the elderly women are sleeping around even in the midday, because staying awake and movement would increase their appetite of meals. So to avoid meals they try to sleep.

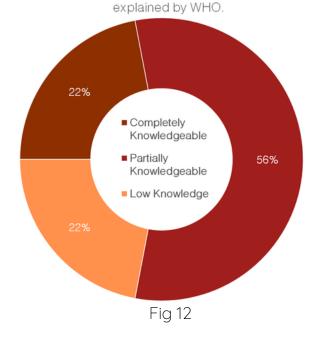
-Alo, Peer Leader



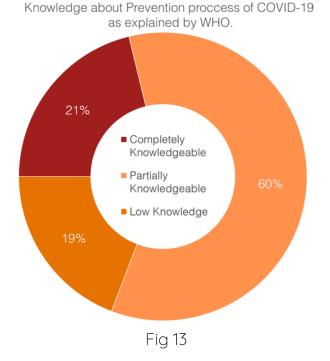
COVID-19 Protection

50% of the respondents reported of emergency needs of protective gears like Facemask, Personal Protective Equipments (PPE). The rest 50% are either "not aware about personal protections and prevention" or "does not have the financial means of buying PPEs"

78% of the workers were not completely informed about the danger and means of infection. (Fig 12). Thus these groups of women migrants especially the domestic workers are very much prone to Corona spread either as a carrier.



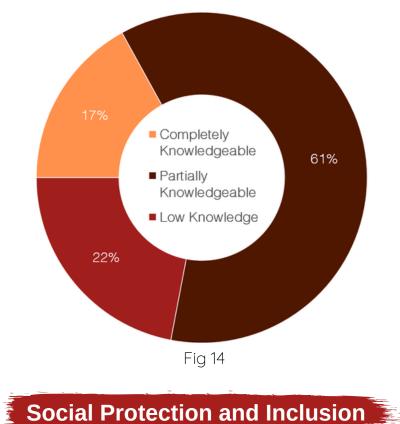
Knowledge about correct symptomes of COVID-19 as



Among those who do know about the COVID-19, only 21% know the actual prevention processes for COVID-19 (as stated by WHO).



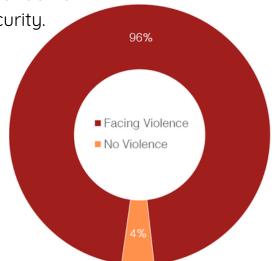
The most dangerous thing is that among all the respondent only 17% of the workers knew what to do just in case they were noticing COVID-19 symptomes among themselves, their family members or their community members. So if they get infected, the probability of them taking the right measure to prevent further spreading is low, and since most of them live in slums with everything and everyone being congested, the chances of others around them getting infected is way higher.



Social security is a universal human right to which everyone in any society should have access to; including migrant workers who are often excluded or significantly limited in their coverage.

Especially the 86% of the women migrant respondents reported of financial insecurity and Food insecurity.

Family feud (Fig 15) has become another issue of social insecurity. 94% of the women workers are facing physical violation as economic lock-down has created mental stress resulting into physical violence by their male partners.





SUMMARY FINDINGS

- Generally, there are no established support services for these migrant groups.
- The continual access to food is a challenge for migrants, who on average find it hard to have 3 meals per day coupled with the quality of food has been considered average in nutritional status because they are feeding on starchy food, vegetables and some oils.
- The sustainable sources of income for the migrant women is very essential which is totally absent in the community level.
- The COVID-19 protection facilities among the communities are absent.
- Special arrangement is essential to meet the emergency needs like soap and sanitization materials along with PPEs for the women migrants.



- There is low/no arrangements of awareness about COVID-19 pandemics in all areas.
- Financial insecurity has increased chances of violence against women workers.
- The practice of hand sanitization, physical distancing and social distancing to protect self, family and society from CORNOA virus infection is not followed properly.
- Family feud is critically harming the women migrant and their children around.
- Women migrants found excluded from the Social Safetynet programs. There is possibility of long term extreme poverty and famine among the women migrants.
- There is no special projects and programs to support the Domestic workers as they belong to informal sector



RECOMMENDATIONS FOR ACTION:

- The assessment team recommends the following actions as the main recommendations for actions based on the needs assessed in the community
- Provide emergency foods, sanitization materials for hand wash.
- Create awareness on how to sanitize their surrounding and to keep it clean to prevent the areas from spreading COVID-19 infection.
- Provide awareness on how to maintain social distancing, Physical distancing.
- Ensure inclusion of these women migrants be included into the social safety net programs of government irrespective to their place of origin.
- Provide skill empowerment programmes to enhance the livelihood of the people.
- Provide cash assistance to serve as capital for business to enhance the livelihood of the people.
- Provide enough technical support to make their pilots be successful enterprise for self sustainability.
- Provide NFIs like kits such as Dettol, soap, detergent etc. to disinfect the areas from COVID-19 spread.





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