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Risks and vulnerabilities among women in internal migrant households in India in the context of the Covid-19 pandemic: Need for strengthening the social protection floor through a gender perspective

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Abstract

On a global scale, India has one of the highest populations of internal migrants , with the majority engaged in short-term and seasonal movement. The onset of the COVID-19 pandemic in India caused severe challenges to people's lives and livelihoods. Migrant families, especially in the lower strata, faced the stiffest challenges of coping with the unprecedented crisis. While there have been many studies that have attempted to delineate the hardships of migrant families during COVID in general, only a few have examined the vulnerability of women living in these households and how social protection measures helped them to overcome the crisis. The goal of this study is to identify the risks and specific ways that left-behind and accompanying women in households with internal migrants are more vulnerable, as well as to highlight policy gaps in social protection for these vulnerable migrants. Using qualitative research methods, the current study elicited primary information from adult women from internal migrant households in Bihar—a state with a large volume of outmigration—and slums in Delhi, a popular destination for migrants from other states. This study argues that the COVID-19 pandemic further deepened the pre-existing gender inequalities and exacerbated vulnerabilities in terms of the individual agency of women and their economic, social, familial, and political conditions. To strengthen the social protection floor in India, it is critical to design policies that prioritize women and ensure they receive maximum support while services are delivered during and after crises.

Keywords: COVID-19, Internal Migrants, Gender, Risks and Vulnerability, Social Protection
JEL Codes: J610, J680, J16, H84, I31, I38

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1. Introduction

With the highest overall number of COVID-19 infections (over 43 million) and over 530,000 fatalities, India was among the top two or three countries worst affected by the pandemic. Responding early to the pandemic, in March 2020, India announced one of the largest and strictest lockdowns in the world. Different sections of the country felt the effects severely, with the poorest of the poor bearing the brunt of the large-scale loss of livelihood (Cash and Patel 2020). In this regard, the economic consequences were particularly severe for internal migrants, including families dependent on remittances, and other informal workers (Barker et al. 2020; Irudaya Rajan Sivakumar, and Srinivasan 2020).

Women in migrant households were among the vulnerable population groups that experienced the disproportionate effects of the pandemic (Allard et al. 2022). Women in internal migrant households include those who migrated with male members and those who chose to stay in the place of origin of male migrants, with the latter group frequently referred to as "left-behind women" in the literature (Banerji 2008; Das 2018), irrespective of their working status in labor markets. These women's overwhelming dependence on income from migration is a defining characteristic

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Women experienced a variety of discriminatory effects during the pandemic. During the lockdown period, women not only experienced an increase in gender-based violence (UN Women 2022) but they also faced difficulties in accessing a range of healthcare services (Cash and Patel 2020), increased unpaid labor and family care, increased vulnerability in the labor market (International Labour Organization [ILO] 2020a), and greater risk of economic hardships (ILO 2021a). In a policy brief, the United Nations (2020) noted that the pandemic was deepening pre-existing (gender) inequalities, exposing vulnerabilities in social, political, and economic systems, which threatened to undo even the limited progress in gender equality over the past decades (United Nations 2020).

Using insights from literature (Foley and Piper, 2020; Irudaya Rajan Sivakumar, and Srinivasan 2020; United Nations 2020), we focussed on three categories of women in India, who faced increased vulnerability during the COVID-19 pandemic, namely: a) left-behind women in the migrant households in source states; b) internal migrant women, working or not working in labor markets but accompanying their male working partners; and c) women-headed migrant households—often overlapping with a) and b). India is among the countries with the largest number of internal migrants, mainly comprising poor and vulnerable populations. Despite significant research focusing on the effects of COVID-19 on internal migrants in India, most studies have seriously overlooked the gender perspective (Irudaya Rajan, Sivakumar, and Srinivasan 2020).

Against this background, this study uses qualitative data from a primary survey of migrant households—including women who were left behind at the source of migration, women who

migrated with their husbands, and women-headed households[1] at the migration destination. The goal is to document and explore how the COVID-19 pandemic worsened gender inequality for women compared to men. The study also aims to identify relevant policy implications for improving social protection for women in general and for women from migrant households in particular.

Given the above background, we aim to address the following research questions:

- How did the COVID-19 pandemic affect the lives of women in migrant households? Did they experience an increased burden of household chores, mental stress and anxiety related to the well-being of their families? How did they cope with these challenges, and what are their social protection needs?
- Do the government's social protection measures recognize the specific needs of women in migrant households? Are such measures designed to adequately address these needs and empower women across economic, social, familial, and political dimensions?
- What are the policy implications for social protection for women in migrant households in the context of the pandemic?

This paper is organized as follows: Section 2 presents a broad overview of the available literature on the effects of the COVID-19 pandemic in general and on short-term internal migrants in particular. This section also reviews specific literature on the differential effects of the pandemic on women, including those who are internal migrants. Section 3 sets out an analytical framework and methods for examining the differential effects of the COVID-19 pandemic on women. Section 4 presents the main findings, which distinguish between the pre-existing and heightened discriminatory effects of the pandemic on women. Section 5 discusses the study's results and limitations, and Section 6 examines specific areas of gender-inclusive social protection policy.

2. Literature review

This section reviews the relevant literature on gender and internal migrants in India, various effects of the COVID-19 pandemic on women, and protection measures to support internal migrants in India.

2.1. Gender and internal migrants in India

According to Irudaya Rajan, Sivakumar, and Srinivasan (2020), the estimated size of India's internal migrant population in 2020 was approximately 600 million, with short-distance intra-district migrants accounting for up to 62% of all internal migrants. Further, a significant number of internal migrant workers were temporary or seasonal migrants (approximately 21%), with a large proportion being from the poor and vulnerable segments of the population (Keshri and Bhagat 2013; Srivastava 2020a; Srivastava 2020b). Most short-term seasonal migrants lack adequate physical, financial, and

[1] Women headed households are defined as households with women as the main bread-winner and having not adult member in the household.

human capital, often working in the informal sector with minimal job and income security (Srivastava 2020a; Srivastava 2020b). Scholars have characterized this short-term seasonal migration in India as largely a form of "distress migration" phenomenon (Dandekar and Ghai 2020).

Marriage is the most common reason for female migration in India, accounting for about 70% of internal migration (Singh, Keshri, and Bhagat 2015; Rai 2020).). However, the reported reasons of migration for women in India significantly underestimate women's participation in work both at home and in the labor market (Deshingkar 2019; Deshinkar and Akther 2009; Mazumdar, Neetha, and Agnihotri 2013). For instance, the factors driving short-term seasonal migration for both men and women include the search for employment, the education of children, and healthcare. The literature also identifies many "push factors," such as caste-based discrimination, low wages, and a lack of economic opportunities at the source, as major reasons for migration for disadvantaged families (Deshinkar and Akther 2009; Srivastava 2011; Das 2018).

As Srivastava (2020b) argues, women's contributions as workers remain invisible and unrecognized. Numerous studies have shown that while many women may not actively participate in the labor market, they carry out crucial support and productive tasks—caring for children and elders, cooking and cleaning, and generating unpaid income, among others—making them indispensable contributors to household well-being and the economy (Das 2018; Singh and Pattanaik 2020). Rai (2020) also points out that the left-behind women are invisible since they are not migrants, but they remain an important component in the process of internal migration.

Several studies have also highlighted persistent gender-based inequalities—including unequal access to household and social resources, labor markets and government programs—during the pre-pandemic period. For instance, a study covering destination sites in Delhi and Mumbai found that women migrant workers faced severe challenges in accessing healthcare services and experienced discrimination at the workplace, along with physical and verbal abuse by their husbands (Saraswati, Sharma, and Sarna 2015).Similarly, Das (2018) identified several forms of gender-based inequality, such as access to education, employment and wages, among left-behind women in Bihar.

2.2 Vulnerability of Internal migrant women in India during the pandemic

The rapid spread of COVID-19 prompted governments around the world to restrict the mobility of people and shut down economic activities. These restrictions caused unprecedented disruption and distress in people's lives globally.

The Government of India initiated a countrywide lockdown in March 2020, which included strict mobility restrictions and the abrupt cessation of transportation links in addition to clising down almost all economic activities. this abrupt restrictions on mobility caused widespread panic, particularly among short-term and seasonal migrants living in India's major cities and in the rural

areas of states from which migrants had originated (Basu et al. 2020; Dandekar and Ghai 2020; Irudaya Rajan, Sivakumar, and Srinivasan 2020; Kumar, Padhee, and Kumar 2020).

The COVID-19 pandemic is considered an event that resulted in "deepening pre-existing inequalities, exposing vulnerabilities in social, political and economic systems" (United Nations 2020). According to the United Nations (2020), women would suffer the most during the pandemic, but they would also play a crucial role in community recovery.

Migrant women workers in India are mostly employed in "feminized" occupations and sectors—such as domestic help, hospitality, accommodation and food services—which were among the hardest hit during the pandemic and experienced large-scale loss of livelihoods (ILO 2020b). "In most countries, regardless of income level, women tend to be more present than men in all forms of vulnerable employment, such as informal and domestic workwith no or little social protection mechanisms, including the assistance targeted at workers during crises" (De Paz et al. 2020, 9).

The pandemic also made it more difficult for women and girls to access treatment and health services. Multiple and intersecting inequalities—such as ethnicity, socioeconomic status, disability, age, race, and location—compounded this issue by influencing access to critical health services, information about COVID-19, and decision-making (United Nations 2020). This is reflected in increased maternal mortality, lower immunization and ANC coverage of expecting women during the pandemic period (United Nations, 2020; Population Foundation of India 2020a) Migrant women, irrespective of their employment status in labor markets, were among the worst affected, as they lived in places less familiar to them (Irudaya Rajan, Sivakumar, and Srinivasan. 2020; Mookerjee et al. 2021).

The pandemic starkly revealed that the invisible and unpaid labor of women and girls underpins the world's formal economies and daily life (United Nations 2020a). With children out of school, the care needs of older persons and ill family members intensifying, and health services overwhelmed, the demand for care work during the COVID crisis intensified exponentially. Several studies in India highlighted rising mental stress among children, including adolescent girls, during the COVID-19 lockdown (Population Foundation of India 2020b). Irudaya Rajan, Sivakumar, and Srinivasan (2020, p.1025) stressed that "loans, debts and accompanying poverty may result in alcoholism and depression among returnee male migrants, which will victimize women and girl children" .

Rukmini (2020) notes that within two months of lockdown in India, four in every ten working women, a total of about 17 million, lost their jobs. When significant numbers of internal migrants lost their jobs overnight, they experienced major setbacks in their lives . According to a report by the Action Aid Association (2020), over 79% of women workers experienced unemployment, compared to 75% of men, as a result of the pandemic.

The vulnerabilities were further exacerbated for women, children, and large families at both the source and destination areas, particularly as they did not receive adequate policy or programmatic attention. Several factors—including limited access to essential services, poor workplace safety, low wages, and weak civil and political rights—plagued the lives of migrant workers and their families (Jones, Mudaliar, and Piper 2021).

2.3 Provision of social and legal protection for internal migrants in India

Measures to prevent, reduce, and eliminate economic and social vulnerabilities to poverty and deprivation, known as social protection (ILO 2021b), often fall into two major categories: i) social assistance, which involves cash or in-kind welfare payments funded by taxes, and ii) mandatory social security contributory schemes, primarily related to employment. The social assistance system supports individuals and families—particularly the poor and vulnerable—in managing crises and shocks, securing employment, and maintaining basic living standards. However, social security programs also aim to safeguard labor rights, improve labor productivity, and enforce labor standards (ILO 2021b; ILO 2022). The social and economic empowerment of poor and vulnerable populations is closely associated with both types of social security. Additionally, these measures help safeguard and enhance the agency of vulnerable population groups such as women, children, and the elderly.

Some social assistance schemes for poor households existed in India before the pandemic. These included the provision of subsidized rations under *the Public Distribution System* (PDS), the *Mahatma Gandhi National Rural Employment Guarantee Act* (MGNREGA), free and compulsory primary education, fully subsidized healthcare under a tax-funded health insurance scheme for informal sector workers and their families, pension schemes for poor widows and the elderly, etc. However, the outreach and depth of these schemes remained limited. For migrant workers, the Government of India enacted *the Inter-State Migrant Workmen* (*Regulation of Employment and Conditions of Service*) *Act* in 1979, which was later subsumed under the *Occupational Safety, Health and Working Conditions (OSH) Code* 2020.[2] However, most of the seasonal short-term migrants remained outside the coverage of the Act, as many of them were not formally registered.

Responding to the negative impacts of COVID-19-induced shocks, the Government of India implemented several social protection measures, such as the *Pradhan Mantri Garib Kalyan Yojana* (PMGKY), to protect vulnerable and poor population. The Government of India also announced an economic stimulus package of US $ 260 billion to promote businesses among farmers and provide relief to migrant laborers, as well as to increase cash transfers for several existing schemes.

Furthermore, the Ministry of Labour and Employment launched the *e-Shram* portal in 2021, to establish a comprehensive national database of unorganized workers, authenticated through

[2] This is one of the four Labour Codes enacted by the Parliament of India that amalgamated several older Acts dealing with various issues of labor reforms in India.

Aadhaar[3]. Through the *e-Shram* portal, the Ministry aims to facilitate access to various social security schemes implemented by various ministries and departments for the benefit of the unorganized workforce across th country.

A 2022 study by KPMG Advisory Services Private Limited (2022), India, reported that among the various schemes implemented by the Government of India over the previous two years to support poor populations, PMGKY had proved highly effective on the ground. The study also showed that payments made through the *Jan Dhan Yojana* accounts benefitted poor women and promoted rural employment, while the *MGNREGA* helped poor families meet their basic needs (KPMG Advisory Service Private Limited 2022; Shrayana and Roy 2021). A study conducted by JICA (2022) found that *PMGKAY* and *Direct Benefit Transfers* (DBT) were similarly welcomed by migrant women at both the source and destination.

While several social protection measures were implemented, Azim Premji University (2021) found that nearly 20 percent of households reported no improvement in food intake after the lockdown began. Another survey found that one-third of respondents reported household members having to skip meals (Sinha and Narayanan 2021). Drèze and Somanchi (2021) provided a synthesis of evidence on escalating food insecurity following the lockdown. In the nationwide Consumer Pyramids Household Survey 2022, 28 percent of households reported being unable to buy sufficient food. These findings indicate that existing social protection measures were not always sufficient to protect the poor and vulnerable, particularly during times of crisis.

The above research provides important insights into the issues related to internal migration, the central role of women in the migration process, and the vulnerabilities and risks faced by internal migrant women. However, most of these studies do not examine the ground-level realities of the suffering and hardship experienced by internal migrant women in the immediate post-COVID period. The present study aims to fill in this gap and to explore the policy implications of social protection for internal migrant women based on an analysis of ground-level evidence.

3. Analytical framework and methodology

3.1 Analytical framework

In order to assess the vulnerabilities faced by women from migrant families, an analytical framework was developed for application in the Indian context, based on the theoretical models of women's empowerment proposed by Kabeer (1999) and Narayan (2005). The framework consists of three interrelated dimensions: resources, agency, and achievements (or outcomes). Using this framework, the paper analyzes the situation of internal migrant women across economic, social, familial, and political determinants that underlie their experiences of discrimination, voicelessness, and

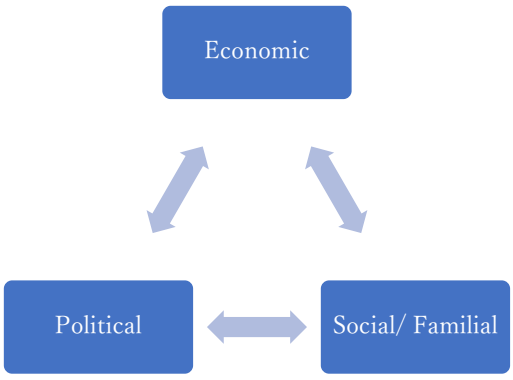
[3] Aadhaar is a twelve-digit unique identity number that can be obtained voluntarily by all residents of India based on their biometrics and demographic data

powerlessness, and identifies these determinants through qualitative analysis.

The framework captures key determinants shaped by multiple social and familial relationships operating across various institutional domains, including family, labor market, and community. In this framework, agency refers to women's capacity to define their own life choices and pursue their own goals, such as household decisions, freedom of movement, and the ability to express views and exercise voice. In the context of migration, this encompasses decisions such as whether to migrate or remain, whether to enter the labor market, how to manage financial and family matters, and whether to participate in social networks, among other aspects. As a result of these decisions, the outcomes constitute key achievements that reflect different dimensions of women's empowerment.

The determinants and required services impacting women's empowerment are summarized in Figure 1. Migration of women and/or other family members is actually a cross-cutting process that intersects with all three dimensions and contributes to multiple factors.

Figure 1: Factors impacting women's empowerment and services necessary for enhancing empowerment



Determinants and required services

- **Financial services: opening a bank account, participating in thrift and credit activities**
- **Business development services**
- **Skills training**
- **Assets provision: financial and non-financial**
- **Social protection measures: PDS, PMGKY, MGNREGA, etc.**
- **Union participation and fair employment practices**
- **Access to market linkages: Farmer Producer Organization, etc.**

This model was adapted to suit the specific context of women from migrant households and their vulnerabilities during any crisis time such as COVID-19. The level of empowerment of women from migrant households can be assessed by examining the most significant determinants within each of the three factors. These primarily include:

1. Economic empowerment: This factor captures the economic empowerment and decision-making abilities of women, with key determinants including:

   a. Ability to make decisions: such as household investment decisions, livelihood decisions, purchasing decisions, decisions related to migration, and involvement in community-based decisions both at the source and destination of migration.
   b. Self-perception: including property rights, educational equality, role in economic activities, and self-confidence.
   c. Support from social networks: referring to the degree of social connectedness, participation in community groups, and the extent of support received from such groups for personal initiatives.
   d. Increased household income: including the use of income from migration for children's education, raising consumption levels, and investing in productive assets.
2. Social/familial empowerment: This factor captures the social determinants of women's empowerment, reflected in the following key determinants:
   a. Household decision-making: including participation in production and household decisions, and involvement in accessing services, such as health, education, and other programs.
   b. Self-perception: encompassing self-efficacy and attitudes towards sharing household duties and recognizing women's rights. Psychosocial well-being relies on an individual's ability to access education and receive support from their family and community networks.
   c. Social relations: refers to the use of migration as a tool for enhancing social relationships in rural communities, as well as expanding social contacts within more diverse communities upon arrival at migration destinations. Family support and attitudes toward violence also play a significant role.
3. Political empowerment: This factor captures the political determinants of women's empowerment, which include:
   a. Representation in elected bodies, political rights, roles in the political sphere;
   b. Participation in community-level decision-making;
   c. Influence over community processes, and
   d. Participation in the urban or rural community at the destination of migration.

The above framework, along with its underlying determinants that encompass migration as a process or factor, establishes a comprehensive foundation for evaluating empowerment, identifying vulnerabilities, and determining the necessary services to mitigate these vulnerabilities. The framework can also help in evaluating the role of women during and after the COVID-19-induced lockdowns, and guide the development of relevant policies aimed at reducing the vulnerabilities of women from groups such as migrant families.

We have incorporated a familial dimension into the framework alongside the social dimension and government dimensions to better understand how government support can mitigate the within family vulnerabilities of women from migrant households. Accordingly, the study aims to examine how women in migrant households experienced and coped with the COVID-19 pandemic crisis, and to identify the necessary social protection measures to empower women by addressing existing and

aggravated vulnerabilities due to COVID-19 across five dimensions: economic, social, familial, agency, and access to government support.

3.2 Methodology

The study employed a qualitative research approach to gather primary information from adult women in internal migrant households in India. We conducted a series of in-depth interviews with women from Bihar and Delhi (Uttar Pradesh), representing two prominent 'source' and 'destination' sites respectively for internal labor migration in India (Srivastava 2020a). Both regions have long been regarded as among the largest reservoirs of migrant labor. The interviews took place during the last two months of 2021—almost six months after the deadly second wave of COVID-19. An open-ended checklist was used to guide the interviews (Bhagat and Keshri 2020).

The respondents were able to draw on their experiences of two waves of COVID-19, multiple lockdowns, and more than eighteen months of coping with the pandemic. For data collection, collation, and analysis, the study broadly adopted standard principles of qualitative data analysis (see Annexture 2 for details), for instance a thematic analysis framework.

The study employed purposive sampling, selecting 39 and 37 women from Bihar and Delhi, respectively, for a total of 76 participants (see Annexure 1). The sample size of approximately 40 participants per location was considered sufficient to capture the range of experiences of the women. This design allowed a comprehensive analysis of the traits and perceptions relevant to the research questions and the identification of key conceptual categories of interest. Such an approach maximized the possibility of collecting sufficient data to clarify relationships between conceptual categories, identify variations in processes, and explore negative and hypothetical negative cases in the data (Charmaz 2006; Morse 1994).

After conducting all the interviews, we applied the analytical framework outlined in Section 3.1 to conduct a thematic analysis, categorizing the participants' responses into five dimensions: economic, social, familial, agency, and government support. Additionally, we also carried out a discourse analysis to examine the social context of communication and to explore how language shaped the participants' narratives in this study.

The fieldwork received ethical approval from the Sigma-Institutional Review Board (A Division of Sigma Research and Consulting Pvt. Ltd.), located at C 23, South Extension I, Second Floor, New Delhi-110049, Tel(+91)-11-41063450, www.sigma-india.in, with the approval number 10053/IRB/21-22.

3.3 Limitations of the study

Internal migrants are a diverse population group in terms of location, duration, purpose, nature of employment, migration patterns and employment sector. However, this research did not cover all

categories of internal migrant workers in India. For this study, the focus was limited to three types of internal migrants: women who were left behind in the source state, working or non-working women who migrated with their husbands, and women who ran their own households in the destination state. This scope was determined after following preliminary research on how COVID-19 affected these different categories of migrants.

4. **Findings**

In this section, we present the main findings regarding the effects of the pandemic on women from migrant households in Bihar and Delhi, focusing on the four dimensions earlier mentioned. While presenting these findings, we distinguish between pre-pandemic conditions and the effects of the pandemic to facilitate an understanding of the pandemic's impacts on the women. Using the analytical framework outlined in Section 3.1, the findings are presented across economic, social, familial and agency dimensions. Additionally, we present the responses from women regarding the adequacy and regularity of government support during and after the lockdown periods.

4.1 Economic dimension

This section examines how women's economic status changed from before to after the onset of the COVID-19 pandemic, highlighting the primary forms of discrimination and shifts in economic burdens. Significant changes were observed in handling financial burdens, food security, and the evolving nature of women's employment, based on an analysis of respondents' responses.

(1) Handling financial burdens pre- and post-pandemic

Prior to the COVID-19 pandemic, the primary source of income for migrants in both source and destination states was their spouse's income. Their ability to meet their basic needs was greatly influenced by their earnings. Since there are typically no jobs available and little land for farming in villages, migration was a better option for them to maintain their standard of living. However, during the COVID-19 pandemic, they encountered financial difficulties. They had to draw on their savings, sell possessions (jewellery, livestock, and ornaments), take out loans to supplement their incomes, and deal with the difficult financial circumstances. These are typical coping mechanisms (Naraya et al. 2000) used during pandemics, and for nearly all migrant households, debt and difficulties repaying loans were significant sources of anxiety and shame.

(2) Food Shortages

During the COVID-19 pandemic, migrants experienced food shortages in both their source and destination states. The main causes of this food scarcity were low incomes and store closures, which limited food availability. Most women in the source state relied on government food rations. A few

respondents spoke of receiving "double rations[4]." However, the majority of respondents at the migration destination reported that they had trouble obtaining cooked meals from the government. A few participants voiced their dissatisfaction with long wait times and inconsistent availability of food. Pregnant women also reported that their pregnancies prevented them from obtaining adequate nutrition. Although food scarcity was a common issue for migrants in both their source and destination states, the effects varied depending on family size and socioeconomic status, as well as the accessibility of public distribution services and other food resources.

(3) The evolving nature of women's work

Women's primary responsibilities before the COVID-19 pandemic were managing their households and caring for their families, as opposed to working outside the home. Nonetheless, many households were forced to reconsider their livelihood strategies due to the economic shock brought on by the pandemic. To supplement the family income, many women in the source locations began working as laborers in agricultural fields or in small jobs in the village after receiving advice from their spouses to look for work. In the destination areas, a few respondents discussed how the COVID pandemic forced them to take on additional jobs to supplement the family income. Some started working as ragpickers, while others had to take on domestic help in more homes. One fifteen-year-old girl was compelled to work as a domestic worker in the destination state in order to supplement her family's income.

(4) Access to public services is hampered by extreme financial stress

During the COVID-19 pandemic, most households experienced severe financial strain due to lockdown measures and the broader economic disruptions. This trend was observed across both origin and destination areas, where families were often compelled to sell assets or take out loans to sustain their livelihoods—a coping strategy frequently documented in this study.
As a result of these financial constraints, many households were unable to afford healthcare services. Some resorted to free public health facilities, while others relied on home-based remedies. In particular, several women expressed concern about deteriorating health conditions, noting that their inability to purchase necessary medications or access timely treatment exacerbated their symptoms and heightened their sense of vulnerability.

The excerpts presented below are drawn from qualitative interviews conducted as part of this research. In accordance with ethical research practices, all names mentioned are pseudonyms to protect the identities of the participants. The procedures and ethical considerations described here have been uniformly applied to all other sections involving qualitative data.

During the Covid epidemic, our economic condition deteriorated considerably. When the

[4] During COVID-19, Government announced additional (aaproximately double) ration entitlement in addition to the usual entitlement under the PDS

rations for our house ran out and there was no money left, our children's tuition fees could not be paid, and many other expenses could not be paid. To meet these expenses, our jewellery had to be sold (Anita, 25 years old, Bihar).

Because of Corona, we became more deprived. We did not have work. It was difficult to feed my kids. I had some jewelry that I sold to provide medicine and food for my kids (Gita, 23 years old, Bihar).

There were a lot of difficulties during the lockdown. Our employment situation completely changed and there was no work, so there was no money. No one was able to obtain the necessary goods. They had to face a lot of difficulties in the house (Anil, 35 years old, Bihar).

This COVID has not improved anything; it has worsened the situation! We have more responsibilities and liabilities now. We also took a loan, which we have to pay back. My husband has lost his job and now he is not working for his company. We do not have a farm, and we have spent all our savings and sold out all our jewelry too to meet our requirements (Bibi, 25 years old, Bihar).

It was a very difficult time, and we faced a food problem. We didn't have enough money to buy food. During the rainy season in lockdown, I faced a lot of problems. Everything was closed, so we couldn't do any work. We had always faced one hardship or another, but during COVID, the shortage of money was a major hurdle (Savita, 19 years old, Delhi).

It was a very difficult time; we faced food problems in both lockdowns. We know very few people or relatives who could help us. My 15-year-old daughter works as a domestic help in houses for income purposes (Ramavati, 40 years old, Delhi).

It was a very difficult time; we faced food problems, as one of my children is an infant, solely dependent on milk. We were bringing meals from camps from the school. We were entitled to food twice a day, but I got it only for one meal (Sunita, 35 years old, Delhi).

It was a very difficult time. During lockdown, I lost my job, and my husband passed away, so I had to manage everything on my own. I was unable to pay rent during the lockdown, and my rent is overdue (Usha, 45 years old, Delhi).

My responsibility increased but not only in terms of household responsibilities. Since we had no money, I had to look for other ways to get two staple meals [a day] for the family. To get free meals, I had to go to schools and stand in long queues" (a woman in a migrant household at New Delhi).

Our economic situation changed after the pandemic [began] due to money problems, and my children stopped going to school. Whenever we got sick, we would go to the government hospital, where we got free treatment and medicines. Our choice of food has changed drastically. We eat potatoes, pulses and cheap vegetables available in the local market. We stay in a place provided by my relatives [for] rent. We were so deprived that sometimes I begged for food sitting outside the temple (Sita, 40 years old, Delhi).

Our economic situation has changed after the pandemic [began]. Before, we used to get work and manage our household expenses. After lockdown, I lost my job, and because there was no source of income, I took loans from neighbors and relatives to meet our daily expenses (Lalita, 35 years old, Delhi).

Our economic situation has changed after the pandemic. All of my jobs and work have been lost, so we rely on credit to meet our expenses (Ira, 30 years old, Delhi).

The key findings related to the economic dimension are presented in Table 1.

Table 1: Economic activities of migrant families and effects of COVID-19

	Women in Source State	Women in Destination State
	Main form of discrimination/Burden	Main form of discrimination/Burden
Pre-Covid-19/ Pre-Pandemic	‣ Most women were dependent on the wage income of their husbands whose earnings were the main source of family income. In a few cases, sons also migrated alongside their fathers to work as laborers. ‣ Some women had no land to farm and there were no job opportunities. In villages, there were few opportunities for work and lower wages compared to urban areas. ‣ Women considered husbands' migration to cities a preferable option for repaying loans. ‣ In some cases, women also worked to supplement the family income and meet small expenses. Some women were engaged in livestock work and employed as farm laborers to supplement the family income.	‣ Husbands' earnings were the main source of family income for the majority of respondents. Some respondents contributed to their family income by undertaking activities they could do from home, such as tailoring work or garland making. ‣ A majority of respondents migrated to cities due to lack of work, poor family assets and resources and insufficient family support to survive in the village. ‣ Some respondents were able to manage household needs with small earnings from self-employment before COVID pandemic. ‣ Some respondents prioritized repaying loans and clearing overdue rent, which they could only do by working in the cities
After the outbreak of Covid-19	‣ Following the COVID pandemic, many respondents returned to work, while a few remained behind to work in the villages. ‣ All the respondents faced severe financial stress due to the pandemic and lockdown measures.	‣ All respondents faced severe financial stress due to pandemic and lockdown measures. ‣ Lockdown created many difficulties and uncertainties as respondents faced numerous problems due to job loss and food shortages.

	‣ Several respondents had exhausted all their savings and had to borrow heavily to sustain their families as their income sources had dried up or become very precarious. ‣ A large number of women respondents had to mortgage/sell their ornaments, marriage jewellery and livestock. ‣ Food shortages were primarily due to limited income and the shortage of food items due to shop closures. Women had to reduce food consumption. ‣ Women were very afraid about health issues during lockdown. Food shortages and children's health issues were major causes of stress. Health conditions deteriorated as they were unable to pay for medicine and treatment. ‣ Indebtedness and difficulties in repaying loans were a major cause of worry and embarrassment. ‣ The economic shock caused by COVID compelled many households to review their livelihood strategy. A large number of women, in source locations, were advised by their spouses to look for employment and they started working as laborers in agricultural fields and/or in small jobs in the village to supplement the family income during the pandemic. The majority of respondents emphasized that there were no regrets regarding the migration of household members, as it was considered a financial necessity for the household.	‣ Several respondents exhausted all their savings and had to borrow heavily to survive after income sources dried up or became very precarious. ‣ A few respondents recalled days where they slept hungry and days where they were not sure about the source of their next meal. Several respondents remained in the city during the lockdown, but faced difficulties paying rent and electricity bills. ‣ Food shortages and children's health problems caused major stress. Food shortages primarily occurred due to low income and food shortages due to shop closures. Women reduced food intake. ‣ Pregnant women were unable to obtain adequate nutrition during the pandemic. ‣ Some women faced financial and physical hardships while taking care of family health conditions. In some cases, women had to take out loans for husbands' treatment, and ongoing medical treatment for a son was affected by the lockdown. ‣ A few respondents sold their farmland or homes in their villages to survive during the crisis. ‣ Several respondents took on additional work to supplement the family income. Some respondents worked as domestic helpers in additional houses and some started ragpicking, while their children also began working to contribute to the family income.

Source: Field survey

4.2 Social dimension

This section examines how the women's social dimension changed from before to after the onset of the COVID-19 pandemic, highlighting the primary forms of discrimination and the ways in which social burdens shifted. Significant changes were observed in the strength of community ties, the extent of support, and the negative impact on children's education.

(1) Differences in the strength of community ties in rural and urban settings

Some of the women in the source state explained that they were members of self-help groups (SHGs), which were formed by the Bihar Rural Livelihood Promotion Society. These groups, supported by

the Government of Bihar (popularly known as Jeevika), actively engaged in thrift and credit activities. Respondents expressed that SHGs fostered a strong sense of unity and strength among women. They participated in various activities, including enhancing the collective capacity of women, providing them with access to finance, public services, and direct market links. As members of SHGs, they also took collective decisions, and credit activities were undertaken with the consent of all members. In rural settings, SHGs played an important role in creating livelihood foundations for mutual support by advancing loans to needy members, as well as by advising, sharing information, and providing moral support to one another, even though social participation decreased due to the lockdown. However, others who were not part of the SHGs indicated that they lacked such support during the COVID-19 pandemic.

In contrast with rural settings, no women in the destination state were part of any social groups and did not benefit from them, giving reasons such as lack of time, low confidence, unfamiliarity, or disapproval by their spouses. Additionally, only a small percentage of respondents in the destination state indicated that they had participated in NGO activities and derived benefits from them. As these examples illustrate, the migrant households primarily live in urban settings, and as a result, they appear somewhat more vulnerable, as social groups and strong community ties were not well-established.

(2) Negative COVID-19 pandemic impact on children's education

The COVID-19 pandemic had a detrimental effect on children's education. Parents were unable to send their kids to school in both the source and destination states due to financial constraints. In the source state, women were required to devote more time to their children's education at home because they were forced to leave formal education. Many children in the destination state were unable to participate in online classes because they did not have access to a cell phone. One fifteen-year-old girl in Delhi was compelled to work as a domestic helper in order to support her family instead of pursuing her education. The financial crisis brought on by COVID-19 had a severe impact on children's education, as these cases illustrate.

> *We are not able to take part in any community activities because of COVID. To adhere to COVID norms, we refrain from meeting together. We are connected through phones and give and receive advice on the phone only (Shanti, 27 years old, Bihar).*

> *We share our opinions through participation and also connect with other women. We collectively make decisions. If we want to give money to someone, then our consent is given (Rita, 35 years old, Bihar).*

> *Our economic condition has worsened, and we share advice with other women to help each other (Shanti, 35 years old, Bihar).*

> *We women in a group share our ideas to address COVID challenges (Usha, 30 years old,*

Bihar).
We are not part of any group. And we have not received any help related to the COVID-19 challenge. (Devi, 38years old, Bihar).

People meet less or do not talk as they are facing a lot of economic challenges (Rita,48 years old, Bihar).
I was part of an SHG group, but in lockdown I took a loan; so, from that money I paid back an old loan and kept the remaining amount (Asha,35 years old, Delhi).

I don't know any groups, nor am I part of any SHG groups. I have been here for the past two years, but I don't know any people here (Arun,40 years old, Delhi)

I don't know any groups, nor am I part of any SHG groups. In this area, we have a few societies, but I don't have enough savings to participate in them (Sarita, 44 years old, Delhi).

I am not connected to any group, as I am not allowed to go outside of my home. I only go out to fetch necessary food items from the market (Soni, 31 years old, Delhi).

I don't know many people here, as I shifted here recently after the lockdown [began] (Ayisha, 23 years old, Delhi).

I don't participate in any group activities or decisions in my community. I neither talk nor go outside of my home, as I am not permitted. My children are also small, so I need to take care of them (Chita, 31 years old, Delhi).

I engage with a group of women in the neighborhood; we go together to NGO meetings to get some information about schemes or programs (Sarita,44 years old, Delhi).

Key findings related to the social dimension are presented in Table 2.

Table 2: Social dimensions of migrant families and effects of COVID-19 on social activities of women

	Women in Source State	Women in Destination State
	Main form of discrimination/Burden	Main form of discrimination/Burden
Pre- Covid-19/ Pre-Pandemic	‣ A large number of women respondents joined women self help groups (SHG) and were involved in thrift and credit activities. ‣ In some cases, several women were jointly involved in decision-making in matters related to children and their education.	‣ Social relations were weaker in urban locations as people came from various other places. While respondents had a few friends/relatives living nearby, caste/kinship ties were not very strong compared to those typically found in rural locations. There was a high level of mobility, with several respondents indicating they had recently moved to the locality. ‣ Most respondents were not part of any community groups or SHG. Several respondents were not aware about SHG activities. ‣ Most respondents did not usually participate in community activities in urban locations. Even though some respondents were interested in engaging with other community members, they did not do so for several reasons, such as lack of time, shyness, low confidence, unfamiliarity or reluctance on part of these spouses to allow them to engage with their neighbors.
After the outbreak of Covid-19	‣ Respondents who were SHG members, could not have close get-togethers due to COVID, but made efforts to stay connected with each other through phone calls or meeting each other from a distance. ‣ Participation declined due to lack of physical meetings and because most members were grappling with economic challenges while trying to manage their households. However, members supported each other by giving advice, sharing information and providing moral support. ‣ Several respondents in source locations expressed feelings of fear and stress during lockdown, especially in cases where male members of households could not return due to travel restrictions and the women struggled for food and money. Women reported a sense of helplessness when their husbands could not return home during lockdown and no assistance was available from any quarter. ‣ Some women reported not receiving any support other women in the community during the lockdown. ‣The women gave more attention to their daughter's studies at home, as they had to be withdrawn from formal education due to inability to pay tuition fees.	‣ Due to COVID, social interactions declined, as people stopped meeting each other, communicated only from a distance, and schools closed down. ‣ One respondent stated that she left the SHG group during the lockdown and withdrew all her savings. ‣ Some respondents shared that a neighbor or landowner helped women's households through food provisions and waivers of rent. ‣ One woman said that she joined a group of women in the neighborhood who went together to NGO meetings, to obtain information about schemes and programs. ‣ The adverse impact of the pandemic and lockdown on education was evident as several children stopped going to school due to the financial crisis. Many children could not attend online classes due to the lack of access to a mobile phone. ‣ Several respondents highlighted that support was needed for education of the children.

Source: Field survey

4.3. Familial dimension

This section examines how the women's familial dimension changed from before to after the onset of the pandemic, highlighting the primary forms of discrimination and burden that have changed. Significant changes were observed, including an increased burden of women's household chores and a rise in domestic strife due to stress from the COVID-19 pandemic.

(1) Increase in the burden of women's household chores

At both, source and destination locations, the majority of respondents reported that their primary occupation was unpaid domestic work. They emphasized that their household responsibilities increased significantly when their husbands or other male family members migrated for employment. In the absence of men, women were compelled to manage uncomfortable situations and conflicts both within and outside the household, including unmet demands from children, challenges related to their education, and disputes with in-laws. During the COVID-19 pandemic, the burden of domestic work intensified, as all family members remained indoors. Women spent more time cooking and performing household tasks, while also devoting additional attention to their children's studies and activities due to school closures. Furthermore, many women reported taking extra precautions when family members showed signs of illness, expressing deep concern for their health, particularly that of elderly relatives.

The adverse impact of the pandemic on women migrants was more pronounced in the family context, with implications for domestic chores and familial relations. Even in the pre-COVID context, women migrants at destination locations had a heavy workload.

Women migrants, irrespective of whether they returned to their native villages or remained at their destinations during the pandemic, recalled that their household responsibilities increased tremendously. It was evident that even those men who participated in domestic chores at their destination refrained from doing so when they returned to the villages, as they felt more comfortable adhering to traditional family norms of not sharing domestic works in the presence of their extended family and local community members.

(2) Increased domestic strife due to stress caused by COVID-19

A few female respondents recalled that stress related to COVID-19 led to an increase in domestic strife. The respondents did not specifically mention their own experiences, but reported instances of domestic violence in the neighborhood, including physical abuse and beatings by male members. The respondents primarily cited economic pressures, such as their husbands' refusal to work, their frustration, and their lack of financial resources to cover household expenses. The issue of alcoholism was also reported by many women.

The excerpts presented below are drawn from qualitative interviews conducted as part of this

research.

> *I face a lot of difficulties, as the entire responsibility of the house falls on me: ration worries, children's education worries, home-family worries. Using money properly to manage a house is very challenging" (a left-behind woman from a migrant family in Bihar)*
>
> *My husband was away, so I was scared. He is my guardian" (Aasha, 32 years old, Bihar).*
>
> *We do not let the children go here and there due to fear of the epidemic (Divya, 22 years old, Bihar).*
>
> *I make more nutritious food for everyone and focus on the cleanliness of outside goods. We have to take as much care as possible due to the pandemic (Devy, 25years old, Bihar).*
>
> *My husband and I have arguments, as my husband drinks. During lockdown, these fights increased as he was not getting any alcohol to drink (Eva, 29 years old, Delhi).*
>
> *I stay alone as my husband has passed away. I [borrowed money] from my relatives. When I was not able to repay them back, they smashed my face. Even after this incident, I respect them (Eva, 45 years old, Delhi).*
>
> *In my native place [i.e., where I was born], my responsibility has increased. There are ten of us there, so I have to take care of the elderly as well as the children (Shakti, 29 years old, Delhi).*
>
> *I have additional responsibilities: my husband helps with household work in the city, but not in the village (Gita, 31 years old, Delhi)*

Key findings related to the familial dimension are provided in Table 3.

Table 3: Familial life of women and effects of COVID-19

	Women in Source State	Women in Destination State
	Main form of discrimination/Burden	Main form of discrimination/Burden
Pre- Covid-19/ Pre-Pandemic	‣ At source locations, women respondents were primarily engaged in unpaid household work. ‣ Women had immense responsibilities at home when their husbands and other male members migrated for work. They managed the house, their children, and the elderly in the family, as well as working outside the home. ‣ Women had to face and also resolve unpleasant situations and conflicts in the absence of the male family members, both within and outside their homes. Within the household, there were incidents related to unmet demands of children, their education, disagreements with parents-in-law or with others.	‣ A large number of women respondents were primarily involved in domestic chores and also supplemented their working income by taking up various livelihood activities. ‣ Very few women respondents were only involved in domestic chores. Many women were mothers with responsibilities for young children. A few respondents had adult daughters who could take care of household chores, whom they supervised to ensure their safety. Some respondents did not work outside the home due to poor health conditions or were forbidden from working by their husbands. ‣ Their household responsibilities increased whenever they returned to their native villages. While their husbands shared the workload in the cities, they did not contribute to household chores when the family returned to their native villages.
After the outbreak of Covid-19	‣ There was a steady increase in household chores during the pandemic and the lockdown. A major area of` work for women was to ensure that children stay at home and to take care of their day-to-day needs. This was viewed as a major task by the respondents, as children in villages generally spend much of their time outside of the home, roaming around the village, in agricultural fields or playing outside with friends. ‣ Women viewed it as their primary responsibility to ensure that the family members ate nutritious food and that everything that brought from outside was cleaned and sanitized. ‣ Women had to manage all the family needs with limited resources, which often led to differences and disputes that they were left to resolve themselves. ‣ It was a great source of big relief and happiness when their husbands returned home during the pandemic, and they also contributed by taking care of parents, children and outdoor work.	‣ There was a major increase in household chores due to the pandemic and lockdown. As all the family members stayed indoors, women had to spend more time doing cooking and other domestic tasks. As schools were closed, women had to pay greater attention to their children's studies and other activities. ‣ Women were extremely concerned about the health status of family members, especially elderly relatives, and took extra care whenever anyone showed signs of illness. ‣ In addition to household responsibilities, several women spent lot of time waiting in queues to get cooked food from schools. ‣ Workload of women who returned to their native places increased significantly as there were more family members in the village and they also had to look after their parents and elderly relatives. ‣ Domestic strife increased due to stress caused by COVID-19. Arguments and fights with husbands rose during lockdown as many men were frustrated after losing their jobs and being forced to remain at home. ‣ Women reduced consumption and overall family expenditure to cope with limited resources.

Source: Field survey

4.4 Agency dimension

This section examines how women's agency changed from before to after the onset of the pandemic, highlighting the primary forms of discrimination and burdens that shifted. Significant changes were observed in this dimension in terms of the nature of women's roles and decision-making at the household level, with increased work opportunities for women. These patterns were evident in the examination of respondents' responses.

(1) The evolving nature of women's roles and decision-making at the household level

The majority of women stated that their husbands had a greater say in household decisions prior to the COVID-19 pandemic. Typically, their male spouses made the decision to move to a city and managed the household finances, while taking into account women's opinions regarding household purchases, food, and their children's education. Women also generally needed their husbands' permission before working outside the home or going somewhere.

After the COVID-19 pandemic, the majority of women at both destination and source locations reported no significant changes in household decision-making. However, in some cases, husbands encouraged women to participate more in household and financial decisions due to resource scarcity and the family's vulnerable situation.

Overall, it is evident that some changes occurred in gender roles and decision-making at the household level. However, these adjustments appear to have been adopted primarily as coping strategies to deal with the pandemic and it remains to be seen whether such evolving gender dynamics and nuances will continue after the end of the pandemic.

(2) Limited work opportunities for women

The pandemic appears to have highlighted the economic role that women play. In source locations, some husbands allowed their spouses to work outside the home in order to supplement household income. Some respondents mentioned that they had worked as laborers in other's agricultural fields since they were poor.

In source states, the majority of women were not asked to work outside, but most women responded that they considered themselves independent and able to make decisions on work if required. Nevertheless, most women still needed permission to work outside the home.

In comparison to the situation in the source areas, most women in the destination locations reported that their husbands prohibited them from working and required them to seek permission to work outside. Only a few women were sufficiently independent to decide for themselves on working outside the home. However, these women belonged to scheduled castes or other backward classes, which are officially recognized as socially and educationally disadvantaged groups by the Government of India, and their educational background was often limited to the 5th or 10th grade

schooling, making it difficult for them to secure good jobs. As a result, some women resorted to selling balloons, picking rugs, making garlands, or making necklaces at home.

The excerpts presented below are drawn from qualitative interviews.

> *I am not involved in any decision-making, and all the decisions are made by my in-laws, along with my husband. I can't spend money at will, and my opinion is not being considered when making decisions (Bhakti, 32 years old, Bihar).*
>
> *My opinion is considered, I make decisions on food and household expenses (Mia, 32 years old, Bihar).*
>
> *Participation in decision-making has increased compared to before. We discuss: Where to go? Where not to go? Everyone cares (Isha, 38 years old, Bihar).*
>
> *My husband said no to work; but what do we do to meet expenses? I started working and now my husband is not saying anything against working (Bihar).*
>
> *To obtain work, we migrated to the city two years back, but due to the lockdown, I was unable to find work: I can say I had no work. I went ragpicking to fulfil my basic necessities (Malak, 40 years old, woman-headed household, Delhi).*
>
> *Yes, to recover the loss during lockdown, I did mask-making and earned 2 Rs per mask. I even sold my gold earrings, which I got when I was married (Anil, 35 years old, Delhi).*
>
> *I did not work outside the home as my husband did not give me permission. At home I made some pearl necklaces to earn some money, but that income was [too] small to meet our daily expenses (Mia, 44 years old, woman-headed household, Delhi).*
>
> *I am not working as I am not well-educated. I will not get a good job outside. We have received some credit from our relatives to meet our expenses (Gita, 45 years old, Delhi).*
>
> *I am independent and do work of my choice, and I am not stopped from doing any work; I make all the decisions, and I am independent in working and spending money. I don't have to get permission or consult anyone (Anysha, 25 years old, Delhi).*
>
> *As I can't work due to my leg condition, there is no scope for permission from anyone else. But since I can't work, my daughter has to go to work to receive an income. Here, I had to get permission from my husband before deciding whether she could work or not (Saavi,40 years old, Delhi).*
>
> *As my husband has passed away, I have to go and work outside. If I get work, I will work without asking anyone's permission. Nowadays, no one is giving me work because I look old (Ram, 40 years old, woman-headed household, Delhi).*

Key findings related to Agency are presented in Table 4.

Table 4: Agency dimension of women in migrant households and the effects of COVID-19

	Source	Destination
	Main form of discrimination/Burden	Main form of discrimination/Burden
Pre- Covid-19/ Pre-Pandemic	‣ In several instances, men did not allow women to work or go anywhere. In most cases, men decided or advised them on how and where to spend the money. ‣ In several instances, husbands did not consult their wives and made decisions on their own or would consult the parents. However, several women were jointly involved in decision making related to the purchase of land or property, house repairs or matters related to children and their education. ‣ Women from women-headed households took all the decisions on their own, but took suggestions from their children. ‣ In most cases, the decision to migrate was taken by the male members themselves.	‣ Some respondents noted that men did not allow them to work, as their children were small. In a few instances, it was also a matter of 'shame' for men that they cannot support the household and hence the women have to work to meet the family needs. ‣ Some women were not allowed to spend money independently and were required to hand over all their earnings to their husbands. ‣ Some husbands gave only part of their earnings to their spouse; the other part of their earnings was spent on alcohol consumption. ‣ Some women had to seek permission from husbands when making decisions. ‣ Some women were not involved in decision-making: husbands decided what to do and women acted accordingly.
After the outbreak of Covid-19	‣ Involvement in decision making increased in many instances—both at the source and destination—as their husbands started consulting their wives before making decisions regarding work or other expenditures. This appears to be linked to scarcity of resources, as family income declined and indebtedness rose, prompting men to consult their spouses more often on the judicious use of money. Another possible explanation is that the shock experienced by migrants during the COVID-19 pandemic might have made them more vulnerable and tentative, and leading them to seek second opinions and reassurance from their spouses when making decisions. ‣ During the pandemic, the respondents needed to obtain permission to work outside by husbands while some women did make their own decision by consulting with the husbands. In some instances, men encouraged their wives to work in other's fields to help support their families.	‣ A few women were not allowed to work outside; they took up activities such as making garlands, necklaces, and masks, which could be done from home. ‣ As their husbands were not earning enough, a few women started work as domestic helpers in other household. ‣ Some women in urban areas went to work collecting scrap or became involved in ragpicking work to make ends meet.

Source: Field survey

4.5 Government dimension

This section examines how the government dimension evolved from before to after the onset of the pandemic, highlighting how key forms of discrimination and burdens have changed. Changes were observed regarding insufficient government support to address women's needs and inadequate assistance in accessing social protection schemes. These findings emerged from the examination of respondents' qualitative accounts.

(1) Social protection funded by the government was helpful but fell short of meeting women's needs.

The pandemic highlighted the need for government social protection schemes, including the Public Distribution System (PDS), Rural Employment Guarantee Schemes, cash transfers, and LPG support, among others, to support vulnerable households. Following the outbreak of the pandemic, in March 2020, the central government implemented the PMGKY—a comprehensive relief package for the poor—to help them combat the social and economic effects of the pandemic. The program aimed to provide food and financial support to the most impoverished individuals, ensuring they did not struggle to purchase essential supplies to meet their basic needs.

In source states, most respondents received government rations, which helped them during the pandemic. Some reported receiving double rations, temporary ration cards, or rations from a special dealer. Support in the form of cash transfers from the government was also implemented, with some receiving INR 500 (approximately USD 6) credit to their bank account and INR 800 (approximately USD 10) as cash support for LPG.

However, these schemes proved insufficient to meet the requirements of the women respondents. At destination locations, while most respondents received food support (cooked meals) from the government, some noted that food was insufficient and they had to stand in long queues to obtain food. Some women received NGO-provided food kits, which were useful but inadequate.

Interestingly, none of the respondents reported access to employment guarantee schemes during the pandemic, although the majority expressed a need for employment support from the government. In the destination state, job creation-based job demands did not seem to accommodate laborers' needs in a timely or efficient manner during the pandemic.

Women respondents also highlighted the need for greater job security as they faced uncertainties about their employment conditions. They emphasized the importance of creating work opportunities for women who could work from home but were unable to venture out due to numerous family and social reasons and constraints. At source locations, the majority of respondents also stated that they needed employment support from the government.

At both, source and destination states, women received various types of central government and state

government support, but almost all households had to borrow money for financial needs. The scale of government support was insufficient and marginal, according to the majority of women respondents' feedback.

(2) Inadequate support in accessing social protection for the women

Access to social protection by women was hindered for several reasons, such as low literacy, lack of proper documentation, and other reasons. Migrant families in urban locations often faced challenges in accessing government support due to the lack of identity documents, such as ration cards. The One Nation One Ration Card (ONORC) plan became a top priority for the Department of Food & Public Distribution, India, allowing eligible ration card holders to access their entitlements from anywhere in the country. The plan enabled the distribution of subsidized food grains through nationwide portability of ration cards using an IT-driven system. The introduction of biometric systems largely helped rural households to obtain rations from the PDS system, but migrant households in destination states faced a bottleneck in accessing government support.

The excerpts presented below are drawn from qualitative interviews conducted as part of this research.

> *I [received] support [in the form] of rations, masks and soap from mukhiya [the village head]. I did not face any problems in getting any support, but I had to show my ration card. [However, the support] was not sufficient. I only [received] ration [items and] there was no other source of help [available to] me (Ram, 40 years old, Bihar).*
>
> *We received free rations, masks and soap. I was satisfied as I got free rations from the government which was a very big help (Puja, 49 years old, Bihar).*
>
> *The government should have helped us in obtaining ration cards; even without ration cards, they should still give us rations (Misthi, 50 years old, Bihar).*
>
> *The government should provide employment to women at home so that they can work while taking care of their households and children (Laximi, 50 years old, Bihar).*
> *We expect them to support us in meeting our food requirements, as we have had less produce due to water scarcity (Anil, 35 years old, Bihar).*
>
> *We have to go to the dealer with our ration cards, then we get the rations. Sometimes, the rice is good and sometimes it is bad (Prisha, 38 years old, Bihar).*
>
> *The government gave us rations, but we had to take out loans to meet our other needs (Usha, 30 years old, Bihar).*

We got double food rations from the NGO; we got cooked food at our home. We also bought cooked food from the school (Kirti, 36 years old, Delhi).

We used to get cooked meals from school, and ration kit food while it lasted. I was stitching masks, and I got some money, which helped to meet my expenses (Aaira, 35 years old, Delhi).

Employment schemes should be provided by the government, [as well as support for] health, education and medicines should [also] be [made available] by the government (Shakti, 30 years old, Delhi).

We received credit from a relative during lockdown to meet our basic needs, but up until now, we have been unable to pay the loan (Hina, 31 years old, Delhi).

The government should help us with employment, as we are facing the most difficult times (Ram, 40 years old, Delhi).

The government should help us with our house and ration cards (Gita,19 years old, Delhi).

I did not have to show any identity proof to get cooked food, but the quantity of food was insufficient, although the quality was good (Sita, 40 years old, Delhi).

We were new in Delhi, had no proper documents and hardly knew anyone, so we couldn't get any help. But many people with documents got some kind of help (Asha, 35 years old, Delhi).

Key findings related to government support are presented in Table 5.

Table 5: Government support for women in migrant households and the effects of COVID-19

	Source	Destination
	Main form of discrimination/Burden	Main form of discrimination/Burden
Pre- Covid-19/ Pre-Pandemic	‣ Several women did not have access to information on government schemes because they lacked adequate education. Some did not have ration cards and were therefore unable to receive benefits from government schemes.	‣ Absence of proper documents was one of the major reasons, according to the respondents, for not being able to access benefits from the government in urban locations. ‣ Migrant households had limited connections and networks in Delhi and hence lacked adequate information. They were therefore unable to access benefits from government schemes.
After the outbreak of Covid-19		‣ Cooked food availability was generally available to all, as no documentation was required to get food. However, getting food was cumbersome, as people had to stand in long queues and sometimes these centres would run out of food. A few respondents received rations through the e-coupon ration system of the Delhi Government, which enabled them to receive rations on the basis of their Aadhar card, despite not having a ration card in the city. ‣ A few women received one-time cash assistance of INR 1500 (approximately USD 18) from the government and relied on Mohalla Clinics for their health care needs. ‣ Absence of proper documents—such as Delhi residence documents, Aadhaar cards, ration cards—was cited by respondents as one of the major reasons for not being able to access benefits from the government, including rations, food, and other forms of support. ‣ Housing insecurity and lack of city documents, such as ration cards, was the biggest issue for migrant families remaining in urban locations and they wanted government support for people who needed to rent accommodation. ‣ Employment generation was another area where government intervention was needed. Women respondents indicated that they needed job security as they faced many uncertainties about their employment conditions. A few women respondents highlighted the necessity of home-based work opportunities for women, but could not venture out due to various restrictions personal constraints.

Source: Field survey

5.Discussion

Across the globe, women are at greater risk than men in disasters and natural calamities and such risks are further heightened when compounded by other dimensions of vulnerability, such as class, ethnicity, disability, and poverty (Alston 2009; Parkinson, Lancaster, and Stewart 2011). The COVID-19-induced crisis was no different: it affected women and girls disproportionately due to deeply entrenched social norms and unequal power relations (UN Women 2022).

The gendered effects of the pandemic were especially pronounced among disadvantaged and vulnerable population groups—including internal seasonal and temporary migrants and left behind women, particularly those in women-headed households. Understanding the gender-differentiated impacts of the COVID-19 crisis is crucial to designing policy responses that mitigate the vulnerabilities and protect women's agency.

India is among the countries with the largest number of short-term and seasonal migrants. Migrant households experienced severe economic and social impacts during the COVID-19 pandemic. However, researchers and policymakers have paid only limited attention to its gender-differentiated effects, particularly among disadvantaged populations such as short-term and seasonal migrants.

Our findings highlight several deep-rooted forms of gender-based discrimination and inequality among migrant households and document further intensification of these patterns during the pandemic-induced nationwide lockdown. In particular, we examined the effects of the pandemic on the economic, social (including health and education issues), familial and agency dimensions of women's lives in migrant households. In addition, we also explored the extent of government support available to these households during the crisis and documented the needs and aspirations, as raised by the respondents.

Most of our findings on the gendered effects of the pandemic—including increased work burdens for women, reduced private space in homes (or crowded homes), greater pressure to manage food, extended caregiving responsibilities, and a rise in domestic violence—are consistent with existing literature (Irudaya Rajan, Sivakumar, and Srinivasan 2020; UN Women 2020; United Nations 2020; UNFPA 2020; World Bank 2020). In a recent study, Dalberg (2021) noted that "the increased household burden could also make it more difficult for women to re-enter the workforce, leading to economic consequences that will outlast the pandemic" (Dalberg 2021,). Women in migrant households, however, faced a double burden both at the source and destination. During the pandemic, the loss of jobs for male family members at the destination nearly forced women into menial jobs such as household help, ragpicking, and balloon sales. Likewise, at the source locations, women were often encouraged to work on farms and undertake small-scale self-employment as remittances dried up. Yet in both source and destination contexts, the responsibility for domestic work remained with women. A few women at destination locations also reported engaging in scrap picking to support

household needs. Women at the source also reported withdrawing from social and SHG activities owing to the increased work pressure.

Our results also indicated gender-differentiated effects of the pandemic, specifically on migrant households. For instance, women reported that remittances sent by male migrant workers served as the primary source of income for their families. However, due to the nationwide lockdown, these earnings completely disappeared, regardless of whether the male migrant members returned home. This led to a severe food crisis and asset dilution in the households. Because of the return of the migrant males and other family members to villages, women at home lost private physical space. Women from migrant households also reported that during the lockdown, they exhausted their savings, sold productive assets and received little help from either relatives or the community (Sewa Bharat 2020). The depletion of savings and the lack of job opportunities significantly undermined women's financial independence, leading to an increase in accumulated debt that could potentially become a burden in the future.

On the familial front, in many cases male family members had genuinely assisted them with household chores at their destination. However, upon their return to the village, they no longer shared household chores, although these experiences differed across villages. The pandemic severely affected the agency of women in general and women from migrant households in particular. Our study noted that women in migrant households frequently faced different forms of violence and coercive actions by male family members.

Women in general were not very proactive in reporting cases of domestic violence; they felt it was a matter of prestige for the family. However, women reported that male family members' loss of livelihood, anger and frustration, as well as alcohol abuse, all contributed to the latter's aggressive behavior. This echoes the findings of a recent study, which reported that such incidents were on the rise during the pandemic despite several such cases not being officially reported (Ghosh 2022). In fact, our study revealed that the majority of women experiencing domestic violence did not report, fearing that doing so would only worsen their lives and the lives of their families.

When it came to accessing government-provided benefits, most of the women at source areas received government rations and such government support was helpful for migrant households during times of crisis. However, inadequate information at the groud levels limited the benefits of such support from government. Also, lack of opportunities for women's participation in MGNREGA continued to be one of the challenges in the provision of social protection in Bihar.

On the other hand, only a limited number of women at destination locations were able to access meals, and many reported that the cooked meals provided in schools were insufficient. In the destination state, only a small number of women had access to rations and government support, primarily due to the lack of proper identity documents, such as identity proof and ration cards.

Promoting portability in social protection is essential in urban settings. Furthermore, women-headed

migrant households were comparably vulnerable, as they often received minimal support from relatives and had to manage everything themselves. In some cases, teenaged girls were forced to work as domestic helpers to supplement their family income, reflecting a bleak future for these girls.

Migrant women in urban settings seem to have experienced challenges in accessing the social protection schemes compared to those in rural settings. Evidently, the existing social protection schemes did not fully accommodate the diverse needs of migrant women that emerged during the COVID-19 crisis.

Nonetheless, all women, despite differences in the size and frequency of the benefits, widely welcomed the benefit schemes under the broad umbrella of PMGKY. Most women acknowledged that these benefits saved their families from starvation. A recent study by KPMG Advisory Services Private Limited (2022) recorded similar findings, noting that PMGKAY, which provided extended entitlement of ration and cash transfer to households, was highly efficient and successful in both source and destination areas.

Our findings refelected that the pandemic's gendered effects included a few important positive findings, including women's increased involvement in economic activities, men's increased consultation with women on household decisions, and women's increased voluntary community participation. This is in line with what is reported in other studies (UN Women 2021).

In this study, women from migrant households reported that, compared with the pre-pandemic period, their husbands and other male members of the family did not object to them working outside the home. Women were actually encouraged to take up employment, particularly in farming, during and after the lockdown. Although these positive developments should not be underestimated, it is important to note that these measures were used by households—primarily by male members of the family—as a coping mechanism to address the prevailing hardship. In a seminal paper, Nussbaum (2000, p.220) argued that "women are not treated as ends in their own right, persons with a dignity that deserves respect from laws and institutions. Instead, they are treated as mere instruments of the ends of others" .A more comprehensive study is needed to determine the sustainability of women's participation in paid work and household-level decision-making, especially in non-crisis contexts.

6. Conclusions

During the pandemic, women in migrant households faced severe economic hardships due to the lockdown, which prevented them from earning any income. Women exhausted their savings, mortgaged or sold their assets, and borrowed from various sources to manage the crisis. There was acute food insecurity, and difficulties in accessing basic amenities and services, such as house rent, electricity, medicine, and schooling. Women's responsibilities in terms of completing the household chores and caring for family members also significantly increased. Furthermore, most women were

compelled to work outside the home to supplement family income.

Although the government implemented various social protection schemes during the pandemic to address the adverse situation, these programs did not specifically address the specific needs of migrants and women. Responses from women in migrant households suggest that potential areas that may warrant further attention in future social protection research and policy discussions, particularly regarding ways to reduce the burden, vulnerability, and risks that women experienced during the crisis :

In examining the future direction of women-centered social protection policies, the following points illustrate potential aspects that could be considered. These examples may offer useful perspectives for further discussion and analysis regarding how social protection measures might better address the needs of women. These points are not intended as direct recommendations but rather as illustrative considerations that emerged from the challenges observed during the pandemic. They may be further examined in future work, including distinguishing between short-term emergency measures and long-term strategies for strengthening resilience.

We classified all our recommendations into a) short-term emergency measures and b) medium to long-term policy recommendations.

a) short-term emergency measures

i. Food security for the migrants and their family members at both source and destination states needs to be ensured;
ii. Self-help groups should be strengthened as key development actors, not only for financial and business matters but also for addressing familial issues and gender-based violence in both source and destination states;
iii. Access to information and documentation for government schemes should be improved to enhance women's ability to access government support;
iv. Counselling and support for childcare should be undertaken by village panchayat representatives, assisted by professional counselors.
v. Strengthening the role of ASHA workers is necessary to support community mobilization and women's empowerment.

b) medium to long-term policy recommendation

i. Employment opportunities for women at both source and destination locations should be strengthened;
ii. Conscious and focused efforts should be undertaken to increase the labor force participation of women—for example, by promoting women's participation in MGNREGA through MGNREGA Mate, and MGNREGA workers in source states, and by promoting urban employment schemes for women in destination states;

iii. Service delivery mechanisms for women should be redesigned to access government services easily in the absence of adult male members at home particilary in the regions with high out-migration.

iv. Digital awareness among women should be promoted on different fronts, including familial issues and gender violence.

v. All types of women (women-headed households, pregnant women, left-behind women, etc.) should have access to the benefits of public service programs.

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Annex 1

Study on risks and vulnerabilities among women in internal migrant households in the context of COVID-19 pandemic

Respondent profile

Table 1: Sample size of women respondents at source and destination

Respondent	Location type	Number of interviews
Left-behind women from migrant households in East Champaran, Bihar (wives of male migrants working in major cities within or outside Bihar)	**Source Site**: Rural areas from which people migrate	39
Women from migrant households living in selected urban slums in Delhi (both working and not working women at destination sites).	**Destination site**: Urban areas attracting migrants from other states	37

Table 2: Criteria for selecting the sample at source and destination sites

Location/Sample Size	Sex and Age	Criteria for sample selection
Destination 5 selected slums in Delhi(locations where a previous survey was conducted)	Adult females aged 18–49 years	a) Living in a migrant household in a notified or non-notified slum b) Marital status: married or unmarried c) Working status: not working in the formal sector with a formal written job contract d) Migration: moved to the current city from a rural area within the last three years e) Household possesses a BPL (AAY or PHH or temporary) ration card issued anywhere in India f) Preferably from a Scheduled Caste (SC), Scheduled Tribe (ST) or Other Backward Class (OBC) community
Source 10 villages across 2 blocks in East Champaran, Bihar	Adult females aged 18–49 years	a) Wife of a migrant worker currently living in a city within or outside Bihar b) Wife of a returnee migrant who returned to the native village any time after the first lockdown and remains there c) Household possesses a BPL ration card (AAY or PHH or temporary) d) Landless or owning less than 2 hectares of land e) Preferably from SC/ST/OBC community

Table 3: Profile of respondents covering socio-economic characteristics at the individual and household level for source and destination locations

Characteristic	Source	Destination
Total number of respondents	39	37
Relation to the migrant	In all respondent households, only men had migrated. The majority were husbands (24 out of 39) and sons (12 out of 39); In remaining cases, it was a brother-in-law or father-in-law.	Not applicable as all respondents were themselves migrants.
Age	• Average age of respondents: 34 years. • Ten respondents were under 30, 19 were between 30 and 40 years of age, and the remainder were over 40 years.	• Average age of respondents: 33 years. • Ten respondents were under 30, 17 respondents were between 30 and 40 years of age, and the remainder were over 40 years.
Religion	35 of 39 respondents were Hindu, and the remainder were Muslims.	22 of 37 respondents were Hindu, and the remainder were Muslims.
Caste category	A majority (33 out of 39) belonged to Other Backward Class (OBC) while the remainder were Scheduled Caste.	A majority (15 out of 37) belonged to OBC, 10 were Scheduled Caste (SC), two were Scheduled Tribe (ST) while the remainder were General Castes.
Highest education level	27 of 39 respondents had never attended school, two completed fifth grade, while the remaining 10 had achieved high school education.	18 of 37 respondents had never been to school, four had completed fifth grade, 12 had achieved high school education, and two respondents had completed graduation.
Ration card	25 of 39 respondents had a ration card.	Only two respondents reported having a ration card.
Household size	• Household size ranged from one to 17 members. • Average household size was six members, with most households comprising four or five members. 13 of 39 households had five members, and nine had four members living together.	• Household size ranged from one to 12 members. • Most households (11 out of 37 households) had four adult members, and eight had two members. A majority of households were not living with their children, with only two reporting their children lived with

Characteristic	Source	Destination
		them. three respondents were from single female-headed households.
Housing	36 respondents lived in their own house, three households lived in rented premises.	Only one respondent lived in her own home, while the remainder lived in rented accommodation.
Migration	• For most households (24 out of 39) only one household member had migrated, while 14 households had two members. Only one household had threemigrant members. • Most migrants had migrated within the previous one to two years. • 32 of the 39 respondents said that migrants from their households returned to the village during the lockdown, some immediately and others a few months later. • Almost half of these returned migrants (21 out of 39) had since returned to the destination.	• 27 out of 37 respondents came from Uttar Pradesh, while others were from Bihar (one), Haryana (one), Himachal Pradesh (one), Telangana (one), Uttarakhand (one), and West Bengal (two). • The majority of respondents visited their villages once or twice a year during festivals or other crucial events. • Average duration of visits varied from 15 days to one month. • 32 out of 37 did not return to their villages during the lockdown; those who did went back to their destinations a few days after the lockdown was lifted.

Annex 2

Interview schedule, data collection and analysis

Two separate open-ended interview guides were administered in the local language to gather relevant information from the participants. At the outset, a basic socio-economic and demographic profile—including religion, caste, education, and family size—was recorded. The profile also included several questions on the migration status of the family. Collecting this information helped determine participant eligibility, and later, during the analysis, it aided in assessing the saturation level of various insights across the broad categories of respondents.

The interview guide comprised five broad domains of enquiry: the migration status of the family, economic empowerment and social empowerment of the women, familial relationships, access to and utilization of social protection measures implemented by the government, and support received from civil society organizations and private entities (See Annexure 1 for English version of the interview schedule).

A team of four female investigators, trained in the use of the survey instrument and the ethical aspects

of the research, conducted the interviews in person. Two investigators were assigned to Delhi, and the two to Bihar. Two supervisors managed the fieldwork in Delhi and Bihar. The female investigators conducted the interviews in the local language and used a mobile application to record the conversations. Informed consent was obtained from each participant and the participants were told about the voluntary nature of their participation. The participants were not given any compensation, either in cash or in-kind, for their time. Each interview lasted about 45 minutes. Their names and identities were not recorded.

The audio recordings of each interview were transcribed into Hindi and subsequently translated into English for the content analysis. The profile data were analyzed in Excel by one of the authors, while the textual data were shared with the two lead authors. One set of transcripts utilizing data from the source location was given to one, and the transcripts with data from the destination location were given to the other. All textual data was analyzed manually and we classified responses thematically.

Abstract (in Japanese)

要約

インドは世界でも有数の国内移民人口を抱えており、その多くが短期的・季節的な移動に従事している。インドの COVID-19 パンデミックの発生により、人々の生命と生活に深刻な影響が生じ、特に下層階級の国内移民世帯は、前例のない危機に対処するという最も困難な課題に直面した。コロナ禍における国内移民世帯の困難を描いた研究は多数存在するが、こうした世帯に暮らす女性の脆弱性や、社会保障制度が彼女たちの危機克服にどのように寄与したかを検討した研究は限られている。本研究は、国内移民世帯に暮らす女性が直面する具体的なリスクと脆弱性を明らかにし、彼女たちに対する社会保障政策の課題を浮き彫りにすることを目的とする。質的調査手法を用い、国内移民の送り出し地域であるビハール州および受け入れ地域であるデリーのスラムに暮らす成人女性から一次情報を収集した。調査の結果、パンデミックは既存のジェンダー不平等をさらに深刻化させ、女性の主体性や経済的・社会的・家庭的・政治的状況における脆弱性を悪化させたことが示された。今後の社会保障政策においては、危機時およびその後において女性が最大限の支援を受けられるよう、ジェンダーに配慮した制度設計が不可欠である。

キーワード：Covid-19、国内移民、ジェンダー、リスクと脆弱性、社会的保護

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