

## ISSUES AND CHALLENGES OF MIGRANT LABOURS IN INDIA

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***ABSTRACT:** This paper is an attempt to study the challenges faced by the internal migrant Labourers in India and the Policies that have been formulated to deal with the problems associated with Migrant Labourers. Migration of Labour in search of employment and improved livelihood is a common issue today. In developing countries, internal migration is a survival strategy for many labourers in search of better livelihood and opportunities. It is inevitable that many of them will leave their home towns and villages in the coming years, and that the future will see an increase in the number of migrant labourers in developing countries such as India. Migrant workers face unique health problems, and the health system must prepare itself to face these. In this context, the system will need to address specific key ethical issues. Internal Migration in search of employment has an impact on the economic, social and political conditions of the region both at the sending and receiving ends. About two out of Ten Indians are internal migrants. The labour migration is mostly male-dominated, and there is a significant increase in the female migrants with the spurring hypermarkets, showrooms and factories. The migration can be permanent, semi-permanent, seasonal or circular. The challenges faced by the migrant labour includes their inability to cope up with the diversity of culture, language, access to identity documentation, social entitlements, social and political exclusion, housing and exploitation. Migrant Labourers are covered by laws and policies, but some preclude the temporary migrants and unorganized sector.*

**Keyword:** Challenges, Issues, Migrant Labours

### INTRODUCTION

India, a collaboration of 29 states and 7 union territories is known for its great unity in diversity. But that unity bears certain loopholes in maintaining the same in reality. Each state in India has a uniqueness of its own whether it is in culture, geographic pattern, community settlements, economic or natural resources. There is indeed a wide disparity in development

which makes rich more rich & poor becomes poorer. As such, people living in rural part (poor regions) of India often transit between places either for a social or an economic cause. Migration between states is an outcome of social, economic and cultural diversity in India. Migration is a “process of movement of an individual from his place of birth to a new place of residence” (Ashok & Thomas; 2014). The Inter-State Migrant Workmen Act, 1979 defines an inter-state migrant workman/ labourer as “any person who is recruited by or through a contractor in any state under an agreement or other arrangement for employment in an establishment in another state, whether with or without the knowledge of the principal employer of such establishment (Gopal Iyer; 2004). For this technical paper Inter- State Migrant(ISM) labourers have been defined as „those people who belong to Lower Income Group and move from their state of origin to another state, within the boundaries of India, in search of jobs which give them high wages, a better quality of life, better facilities & other push & pull factors that contribute to the reasons of their migration’. Since they are in continuous movement, they are called a floating population. From reports and studies, it is understood that the majority of migrant labourers are engaged in building construction, agriculture, brick kilns, stone quarries, carpet weaving, street vendors, waiters in hotels etc. In recent years huge unplanned squatter settlements of ISM workers are seen in the areas where construction works are prominent. Hence housing is a major issue regarding the floating population. Due to influx of migrants to a particular state, underestimation of demands and lack of planning of resources & infrastructure, there is overburdening of infrastructure, the formation of unhygienic conditions, an outbreak of epidemics like cholera, tuberculosis, viral fever etc, as such an intervention is found necessary to curb the situation. The following technical paper highlights on housing, environmental & socio-economic issues of interstate migrant labourers working in the construction sector and belonging to Economically Weaker Section (EWS) or Lower Income Group (LIG) in India. The issues are understood through the collection of literature & statistical data, understanding welfare schemes & programs for ISM, and analyzing case studies.

Globalisation, Urbanisation and the search for better livelihood has led to an increase of migrant labourers. In some regions of India, three out of four households include a migrant. About two out of Ten Indians are internal migrants. The impact of migration of labourers and their households, has a significant effect on the social, economic and political conditions of India. Studies on internal migration have indicated a decline in population mobility up to 1990's

(Kundu; 1996, Singh; 1998, Srivastava; 1998, & Bhagat; 2009). Conversely, the post-reform period confirms an increase in the internal population movement. The increase in the migration rate of labourers can be due to several factors that contrast themselves. Increasing unemployment conditions, lack resources, environmental conditions, degradation of natural resources force the people to move. These push factors are in contrast with the pull factors like better employment opportunities, wages, excellent educational facilities, urbanization, better communication, commutation factors, lifestyles and economic factors.

There are two important reasons for rural labour migration: (a) migration for survival and (b) migration for subsistence. The first indicates the severe social and economic hardships faced by rural laborers, a situation where migration becomes necessary to stay alive. The second reason for migration is also rooted in a subsistence and arises because of the need to supplement income to fill the gaps in seasonal employment. Such communities often migrate for shorter periods and do not ordinarily travel very far from their homes. (Ankit Kr Mishra; 2011). This paper reviews issues relating to internal labour migration in India. This paper relies on secondary data and analysis it with a new dimension.

## **CHALLENGES & ISSUES**

### **Health and Living Conditions:**

The migrant labourers working in unorganized sectors work and live in unhygienic and polluted environment are vulnerable to health problems and sickness. Migrant Labourers who are employed in construction sites, metro projects, quarries, mines and highway projects live in hazardous environment and are vulnerable to air and water pollution leading to kidney and lung disorders. Most live in open spaces or make shift shelters despite the Contract Labour Act which stipulates that the contractor or employer should provide suitable accommodation. Apart from Seasonal Workers, workers who migrate to the cities for a job live in parks and pavements. Slum-dwellers who are mostly migrants, stay in deplorable conditions, with inadequate water and bad drainage. (Ravi Srivastava, S.K.Sasikumar, 2000). Inadequate safety measures and ignorance of safety gadgets lead to accidents which may be fatal.

**Spread of communicable diseases:**

Each state has a unique epidemiological profile of communicable diseases. For example, Orissa is hyper-endemic to malaria. When labourers from Orissa migrate to some other state, such as Kerala, where the potential vector is available but the disease is not present, they introduce the disease in the state. Several new cases of malaria have been reported in regions where the disease was absent, and this has been mainly attributed to migration (Pai et al; 1997).

**Social determinants of health among migrant labourers:**

As mentioned in the introductory paragraph, the main reasons for internal migration in India are poverty and indebtedness. Labourers migrate from the underdeveloped states to the more developed ones to find work to fight poverty and debt. Poverty is a universal determinant of health among most migrant workers, strongly influencing their health status. It is associated with malnutrition, a poor overall health status, poor access to preventive and curative health services, and higher mortality and morbidity rates (Kundu & Sarangi; 2007). This determinant remains unchanged despite the migrant workers' relocation to greener pastures. Sometimes, the reason for migration is dire impoverishment due to a natural disaster, floods or famine. Once again, such migration perpetuates the cycle of poverty and ill health. Migration due to trafficking or internal displacement due to political unrest also leads to the disruption of most determinants of health (Skeldon; 2000). Cultural beliefs and practices are an important determinant of health among these populations. One of the cultural practices which have a direct impact on health is open-air defecation. As this practice is common in the rural areas of India, most rural migrants moving to crowded urban areas find it culturally unacceptable to use toilets. This naturally creates a significant problem of sanitation in the densely populated settlements in which they live. Another important determinant of health is the language. India is home to diverse cultures and languages, and when people from one region migrate to another, language becomes an essential barrier to communication. This complicates the delivery of effective healthcare services.

**Adaptation, adjustment and psychosocial disorders:**

Migrant labourers do not have social capital and social support structures in the place to which they have migrated. They uproot themselves from their native place and move to a new environment, and initially, they face problems adjusting to the new socio-cultural milieu. This gives rise to a good deal of psychological distress. The absence of strong social support

perpetuates the psychosocial distress and has an adverse effect on the migrant labourers' mental health (Rogaly et al; 2002).

### **Occupational diseases:**

Migrant labourers are usually employed in the 3-D jobs – dangerous, dirty and degrading. These are jobs which the local population of the developed state would not take up, and hence, labour is brought in from outside the state for the same wages and sometimes for less (same or less than what?). These jobs are invariably associated with more occupational hazards than other jobs. Migrant labourers working on construction sites commonly suffer from falls, injuries caused by machines, amputations and crush injuries (Schenker; 2010). Though the employers are required to provide personal protective equipment as per the labour laws, these laws are not heeded (Bremner; 1996).

### **Violence against Women:**

In the past, women used to migrate along with their husbands to help them with the housework while they eked out a living. In recent years, there has been an increase in the number of women who migrate independently in search of work. Women form more than half of the interstate migrant workforce. Ninety-two per cent of the 20 million domestic workers in the country are women and children, and 20% of these females are under 14 years of age (Banerjee et al; 2009).

Women constitute more than one-third of the labour in the construction industry. Female migrant labourers face several important gender-based problems, including gender-based discrimination at work and violence. Several women are subjected to physical, verbal and sexual abuse at the workplace and their place of residence. Apart from this, emerging research shows that intimate partner violence is higher among migrant women than other women. Given the lack of a supportive environment and social system, this can have a significant impact on the physical and mental health of these women (Raj & Silverman; 2002).

### **Child Labour:**

Children who migrate along with their families are deprived of the free and subsidised educational facilities offered by the state resulting in Child Labour. They are often engaged in occupations which are as dangerous as those in which the adults are involved. Thus, the children are exposed to health problems and occupational hazards similar to those faced by adults.

This hampers the overall growth and development of the child. It also contributes to increased childhood morbidity and mortality (Mansuri; 2006).

**Limited Access to Formal Financial Services:**

Despite the economic imperatives that drive migration, migrant workers permanently remain an unbanked population. Since migrants do not possess permissible proofs of identity and residence, they fail to satisfy the Know Your Customer (KYC) norms as stipulated by the Indian banking regulations. They are thus unable to open bank accounts in cities. This has implications on the savings and remittance behaviours of migrant workers.

**Political Exclusion:**

In a state of continuous drift, migrant workers are deprived of many opportunities to exercise their political rights. Because migrants are not entitled to vote outside of their place of origin, some are simply unable to cast their votes. A 2011 study on the political inclusion of seasonal migrant workers by Amrita Sharma and her coauthors found that 22 per cent of seasonal migrant workers in India did not possess voter IDs or have their names in the voter list. Because of this, migrant workers are often left unable to make political demands for entitlements or seek reforms.

**Exploitation by Agents:**

Migration flows are mediated by an elaborate chain of contractors and mediators who perform the critical function of sourcing and recruiting workers. The lowest links in this chain are most often older migrants who are part of the same regional or caste-based social network in the rural areas.

While these networks do serve the purpose of providing migrants with information and subsequent access to work opportunities, they mostly operate in the informal economy. There are no written contracts, no enforceable agreements regarding wages or other benefits, and no commitments regarding the regular provision of work. Migrants, utterly dependent on the middlemen for information, end up working in low-end, low-value, hard, and risky manual labor and are always subject to exploitation with little or no opportunity for legal recourse. Their work lives are characterized by exploitative practices such as manipulation in wage rates and work records, nonpayment or withholding of wages, long work hours, abysmal work conditions, and verbal and physical abuse. Accidents and deaths at workplaces are also widespread in the construction sector, which is aggravated by the absence of any kind of social protection.

**Documentation and Identity:**

Proving their identity is one of the core issues impoverished migrants face when they arrive in a new place, a problem that can persist for years or even decades after they migrate. Identity documentation that is authenticated by the state is indispensable for ensuring that a person has a secure citizenship status and can benefit from the rights and protections that the state provides.

The basic problem of establishing identity results in a loss of access to entitlements and social services. Lack of identification means migrants are not able to access provisions such as subsidized food, fuel, health services, or education that are intended for the economically vulnerable sections of the population.

**GOVERNMENT LEGISLATION AND POLICIES****Labour laws and Policies:**

The Indian Constitution contains basic provisions relating to the conditions of employment, non-discrimination, right to work etc. (e.g., Article 23(1), Article 39, Article 42, Article 43). India is also a member of the ILO and has ratified many of the ILO conventions. These provisions and commitments, along with pressure from workers' organisations, have found expression in labour laws and policies.

Migrant labourers face additional problems and constraints as they are both labourers and migrants. Many of the problems faced by migrant labourers are covered by laws and policies in as much as they cover all labourers in a particular sector or industry. These laws include the Minimum Wages Act, 1948; the Contract Labour (Regulation and Abolition) Act, 1970; the Equal Remuneration Act, 1976; the Building and Other Construction Workers (Regulation of Employment and Conditions of Service), Act, 1996; the Workmen's Compensation Act 1923; the Payment of Wages Act 1936; the Child Labour (Prohibition & Regulation) Act, 1986; the Bonded Labour Act, 1976. Acts that preclude temporary migrants include The Employees State Insurance Act, 1952, The Employees Provident Fund Act, 1952 and The Maternity Benefit Act, 1961.

In addition to the above laws, Parliament passed the Inter-State Migrant Workmen (Regulation and Conditions of Service) Act 1979 specifically to deal with malpractices associated with the recruitment and employment of workers who migrate across state boundaries. In practice, however, this act is overwhelmingly ignored by state governments. As such, it articulates ideal working conditions for interstate migrants, but lacking provisions for

enforcement, it has not been used to create a better policy environment in practice. Labour laws aiming to protect migrant workers have remained mostly on paper. In the case of the 1979 Act, few contractors have taken licences, and very few enterprises employing interstate migrant workers have registered under the Act. The record of prosecutions and dispute settlement has been very weak. Migrant workers do not possess passbooks, prescribed by law, and forming the primary record of their identity and their transactions with the contractor and employers (NCRL 1991, GVT, 2003). Following the recommendations of the Second National Commission of Labour (NCL, 2002), the central government has mooted a draft law (The Unorganised Sector Workers Bill, 2003) to identify workers employed in the unorganised sector and to provide them with basic social security. The Bill builds upon the experience of tri-partite welfare funds already in existence for a few industries in some states

### **Conclusion**

With the increasing quantum of migration within the country, the problem of providing adequate healthcare services to migrant workers will assume more significant proportions over the years. To avoid this scenario, we must make sure that our policies and programmes incorporate migrant health. This is important not only for the ethical reasons discussed above, but also because if health is to be realised as a human right, it has to reach all individuals in the country. The ongoing discussions about universal health access in the country should take the issue of the healthcare of migrant workers into account. For example, urban health plans should feature special interventions for migrant workers. The issues discussed in this paper apply not only to India but to all developing countries, in which internal migration is bound to be a survival option.

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