

COVID 19 –LOCKDOWN: REVERSE MIGRATION AND RELOCATION IN INDIA – AN OVERVIEW

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ABSTRACT

*Migration is inevitable due to various socio-economic reasons in India. But, as soon as the lockdown announced due to this pandemic covid – 19 created serious havoc in the minds of migrant workers. Exodus migrants decided to reverse migration. This leads to several issues and they received some pains and some lost their life also while moving back to native place by walk. Government took several measures to relocate and help them. The objective of the study are: 1) to study the concept of migration and the factors influencing migration; 2) to know the history's worst pandemic and about COVID-19; 3) to identify the factors which are responsible for reverse migration; 4) to understand the reverse migration's impact in the study area; 5) to study the Relocation measures taken by the government to help the reverse migrants; 6) to give suggestions to improve the status of reverse migrated workers. The reverse migrants got several reasons to move back. **sudden loosing of job** is foremost reason and followed by other reasons. They got dilemma before going back and they satisfied with several travel back measures provided by the Government of India. Government of India took several measures to help them while relocation. Again, Government of India should collect the full data regarding all the domestic migrant workers, especially the women migrants and pregnant women and the mothers and store it. Before announcing the Lockdown again, it is helpful in speeding up the relocation, PDS and reaching economic doles to the affected migrants. Preference must be given to women migrants, pregnant women and the mothers. Their reverse migration affected not so seriously the local economic development in the study area. Any how it affected to certain extent. But labour cost was increased to certain extent and the profit margin was reduced. The government should take several measures to upkeep the skill levels of the local labours. The skillset is to be improved by providing several trainings in the study area.*

Keywords: covid – 19, Pandemic, Lockdown, WHO, Global Health Emergency.

Introduction

On 30th January 2020, the first Indian Covid-19 case was found in Kerala. At the same time, the World Health Organisation (WHO) declared "Global Health Emergency" to combat this new coronavirus.

On 24th March 2020, Sri Narendra Modi, honourable Prime Minister of India announced the countrywide Lockdown to protect the whole people in India from Covid-19. It is announced after watching China, Italy and other countries' Lockdown measures to curb this disease. The Covid-19 Lockdown took different phases. First phase is for 21 days from 24th March 2020. Second stage – extension of the same till 18th May 2020. Later, in the third stage it was further extended till May 31 2020 with some relaxation on mobility.

The people those who are moving from their villages to urban areas to work for getting their livelihood or better life are considered as migrants. They are going to urban areas to work as domestic helpers, drivers, gardeners, house keepers, street vendors, daily wagers in construction works, building malls, flyovers, homes, saloons, juice makers, crafts makers and vendors, etc. Majority of women i.e., 65.9 percent in 1981-1991 and 64.9 per cent in 1991-2001 migrated due to marriage reason.

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Domestic migrant workers were stranded far from home when India declared nationwide lockdown to combat the pandemic of novel coronavirus (COVID-19). A large number of these workers were left with no economic support, no food and in many cases nowhere to live. The pandemic posed a serious health threat to these people, and the socioeconomic insecurity pushed them towards the edge of sustainability. Many of the migrants began walking home and accepted an uncertain fate if they could not return back home. The Govt. of India initiated efforts to provide transport support with special train services from the beginning of May 2020. While the migrants have started to return to their villages and towns, the states are facing the challenges of preventing the spread of COVID-19. The point-of-entry screening, quarantine and isolation facilities have increased substantially in capacity, although the quality of care remains a point of concern. Back at their homes, the migrants are enduring stigma, discrimination and poor social security. In order to avert the brewing humanitarian crisis, empathetic administration combined with political will is a must. Prudent, evidence-based decision-making in the economic and health sectors is also necessary.

Statement of the Problem

After announcing the Lockdown in India by hon. Prime Minister, the mass number of migrant workers strongly determined to return to their hometowns or villages or native places. This created the situation of Reverse migration in India. There are some factors influencing their migration to cities and urban places. Now pandemic COVID-19 lockdown created intolerable pains such as economic crisis, social and humanitarian crisis. So, the present study is assessing the different factors which are responsible for their migration and reverse migration and its impact on the study area.

Objectives of the Study

- To study the concept of migration, status of migrants in India and the factors influencing migration
- To know the history's worst pandemic and about COVID-19
- To identify the factors which are responsible for reverse migration
- To understand the reverse migration's impact in the study area.. .
- To study the Relocation measures taken by the government to help the reverse migrants.
- To give suggestions to improve the status of reverse migrated workers

Methodology

The study is based on survey method.

Scope of the Study

The scope of the study is the reverse migration of domestic migrant workers in Tumkur district.

Significance of the Study

This research is to throw the light on the concept of domestic migration, reverse migration arises due to lockdown measure taken by the Govt. of India. The intention of the study is to understand the factors responsible for these situations and the measures taken by the government to help these migrants who want to go back to their villages and risks faced by them after reaching the villages.

Sources of Data

- **Primary Data:** is collected with the help of questionnaires.
- **Secondary Data:** Secondary data is collected by referring to the journals, articles, newspaper, books and also by referring to some website.

Sampling Design

- **Sample Size:** The sample size of the study is 30 respondents.
- **Sampling Technique:** Simple random technique is used for the study.
- **Sampling Unit:** The sampling unit is domestic migrants of Tumakuru district those who are ready to go back to their hometown and in que for registering their names with several documents for the same through online.

About the COVID – 19

In the beginning of December 2019, COVID – 19 was invented for the first time in Wuhan city of China. So, it was noted as Coronavirus disease 19 and WHO made it popular by naming it as "COVID – 19" and pronounced it as pandemic on March 11, 2020. Its etiological agent was named as "Severe acute respiratory syndrome coronavirus - 2" i.e., SARS-COV-2. It disseminated to most of all the nations

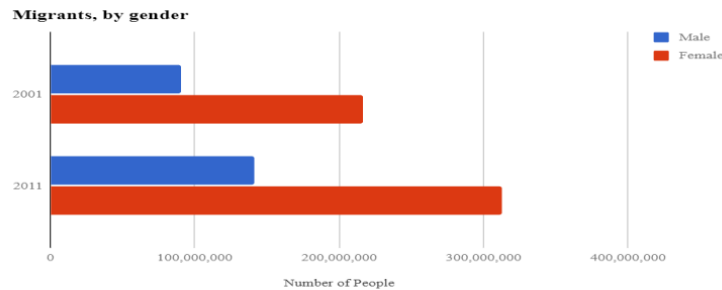
with confirmed COVID – 19 cases. It causes through direct, indirect or close contact with infected people through infected secretions such as respiratory secretions, saliva or through respiratory droplets that are expelled when an infected person coughs, sneezes or speaks. This virus is highly transmittable and its gestation period is 2 to 14 days. Human respiratory epithelial cells are infected by this virus which binds with Angiotensin Converting Enzyme 2 (ACE2) receptors. The main medical signs of the disease are fever, nonproductive cough, fatigue, malaise and breathlessness. Most of the affected people are either asymptomatic or develop a mild respiratory illness. The mortality rate is predicted as 2 percent to 3 percent. The death rate due to covid-19 increased beyond China since from early March 2020. The disease is detected by the identification of viral RNA in nasopharyngeal swab or Broncho-alveolar lavage (BAL) by polymerase chain reaction Reverse Transcriptase – Polymerase Chain Reaction (RT-PCR). Treatment is fundamentally symptomatic and supportive. Earlier, there was no vaccines, Remdesivir used as the first antiviral drug for treatment. Now vaccines are available in India. The strategy followed for controlling the dissemination of this virus is through preventive measures like contact, droplet and airborne precautions. It is through Sanitization, Mask and Social Distance (SMS) principle.

Migrants’ Status in India

The data furnished by Census 2011 reveals the following facts:

37 per cent of total population are inter-state migrants in India. Heavy number of migrants (i.e., 20.9 million people) are from Uttar Pradesh and Bihar States. Delhi and Mumbai are known as **migrant magnet cities** as these accounted 9.9 million migrants from other states. Hindi belt states such as Uttar Pradesh, Bihar, Rajasthan and Madhya Pradesh supplies 50 per cent of India’s inter-state migrants. Mainly the four states viz., Maharashtra, Delhi, Gujarat, Uttar Pradesh and Haryana accommodated 50 percent of India’s inter-state migrants. The highest share of **Out-migrants** is from Uttar Pradesh and the highest share of **in-migrants** is of Maharashtra. Between 1991 and 2001 Census, the number of inter-state migrants increased at 55 per cent. But it is reduced to 33 per cent between 2001 and 2011 census.

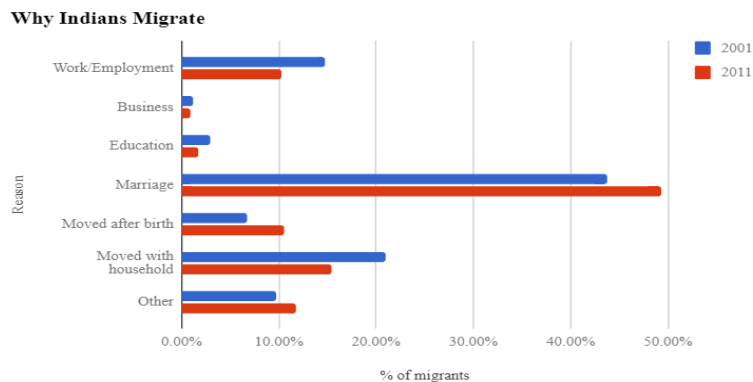
Graph No. 1



Source: 2011 Census

The above figure shows that the majority of the migrants i.e., 70 per cent are women.

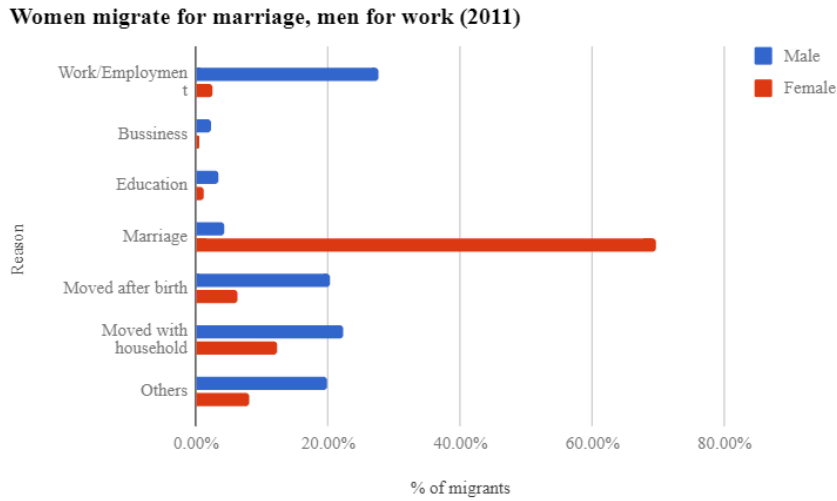
Graph No. 2



Source: 2011 Census

The above graph shows that the majority of people in India, i.e., 49 per cent migrated for marriage purpose. During 2011, small proportion of people of India i.e., 10.2 per cent are migrated due to work and employment. It was 14.4 per cent during 2001. It shows decreased trend from 14.4 per cent during 2001 to 10.2 per cent in 2011. It shows that very small proportion of people migrated for business purpose in India during 2011 but, it is more or less equal to 2001.

Graph No. 3

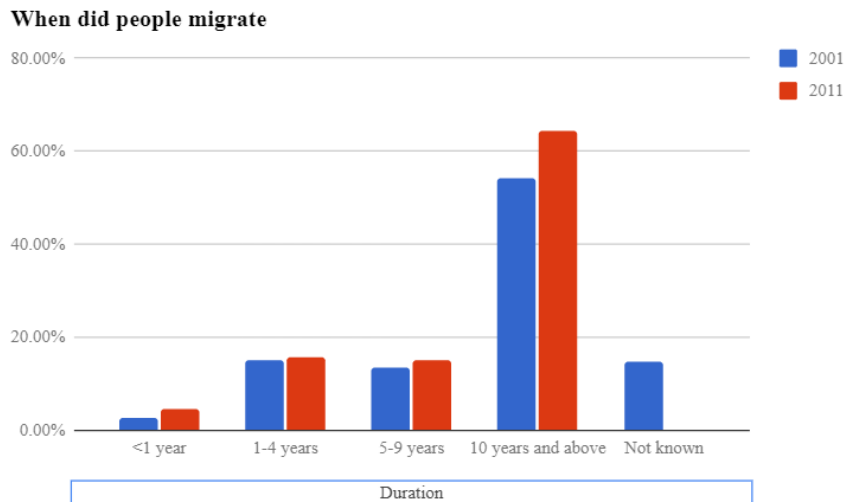


Source: 2011 Census

The period between 2001 – 2011, i.e., compared with a decade back, the main intention of migration of women arises due to marriage. About 69.7% i.e., 21.7 Crore of the 31.2 Crore of women migrants has given this reason for their migration.

The considerable proportion of men i.e., 3 crore of the 14 crore says that the “work and employment” is the main reason for migration.

Graph No. 4



Source: 2011 Census

The above graph shows that most of the migrants i.e., 64 per cent migrated more than 10 years ago. It shows an increasing trend when compared to 2001 i.e., 54 per cent.

Figure 1: Economic Lifestyle of migrant workers

The above figure No. 1 represents the economic lifestyle of migrant workers in south Rajasthan, this has severe inter-generational implications, transferring vulnerability, poor health and low level of skills from the parents to children.

Theoretical Background

Since several hundreds of years, the globe has been witnessing, facing and fighting with several pandemic diseases and planned to eradicate these. Till date, we are successful to eliminate only one disease i.e., smallpox. The rest are staying as endemic and disseminates as epidemic and becoming pandemic in the population. They are malaria, HIV/AIDS, Ebola, measles and influenza. Now, Covid-19 is a new one.

On May 13, 2020 Mike Ryan, executive director, WHO emergencies programme while addressing to press, says that “ the coronavirus (COVID-19) might become one more epidemic virus in the population and could not get away”.

In India, COVID-19 second wave is prevailing causes speedy spreading and with greater severity. Due to this, most of the states are imposing second lockdown with some liberation to economic activities.

Till 28th April 2021, 148 Million people diagnosed with covid-19 positive, 18.5 million recovered and 3.31 million death cases found in the globe. In India, till 27th April 2021, 18 million positive cases, 14.8 million recovered and 2.01 lakh death cases reported.

History's Worst Pandemics

Most of the infectious diseases have never really seen their end. The past records of worst Pandemics are as follows:

Plague

It was aroused in the year 541 due to Yersinia pestis bacterium which was spread through fleas living on rodents such as rats. It began in Eastern Roman Empire, spread in Europe, Asia, North Africa, Arabia and caused the death of 30 to 50 million people. People have lack of knowledge to combat the plague. It was cleared in 544 CE following herd immunity. It was also called as Bubonic Plague.

Black Death

The plague repeated as Black Death pandemic in the year 1346. The Yersinia pestis passes to lungs and made pneumonic plague. It transmits through coughs and sneezes.

It was began in China and passed through Europe, North Africa, West Asia, Russia, India and caused the death of 200 million people in four years. The concept of isolation commenced. It was finished in 1353. It was prevailed in UK till 1665.

Smallpox

It was aroused in the year 1520 due to two virus variants viz., 1) Variola major and 2) Variola minor. It expanded through America and become the endemic in Asea, Arabia and Europe over hundreds of years. A vaccine was invented in 1796 for the first time to combat with Smallpox. It was vanished but repeated during 1870 subsequent to Franco-Prussian war. In 1967, WHO took serious measures to eradicate it and deepened the Smallpox elimination programme and in the year 1980, it announced that smallpox was eliminated.

Cholera

It was found in the year 1817 due to Vibrio Cholera Bacteria and it expands through faecal matter and contaminated water.

Originally it was began in India in Bengal region and passed on to Asia, East Africa and Mediterranean countries through trade routes. The past records shows that it was occurred for seven times up to 1961. Millions of people dead in all continents due to Cholera. Because of improved sanitation and the quality of the drinking water, the condition is better. But it occurs often.

Third Plague Pandemic

The plague occurred for the third time in 1860, which aroused in China and passed on to Hong Kong, India and expanded through sea routes. In the period between 1894 and 1897, the investigators discovered the pathogen and vectors of this plague. By 1960, the situation was decreased to endemic stage. The antibiotics were made available in the market for its treatment. But even now, every year 1,000 to 3,000 cases are registering.

Russian flu

The Russian flu was traced in 1889 in Siberia and Kazakhstan due to influenza virus. It moved to Moscow, Europe, North America and Africa. In 1890, it was vanished but repeated in subsequent years.

Spanish flu

The Spanish flu was traced in 1918 in Europe, the US and parts of Asia. It aroused due to avian-born influenza virus, H1N1.

Later it disseminated worldwide. During 1918 and 1919, it infected 500 million people. This was joined with bird flu or swine flu and resulted in pandemics.

Swine Flu

It was aroused in Mexico in 2009 due to H1N1 and immediately disseminated worldwide. Between 1,515,700 and 5,75,400 people had died. It spread from an individual to individual through respiratory droplets. A vaccine was invented. In August 2010, the WHO announced an end to the pandemic. But still it is appearing and spread as seasonal flu. Due to this, many people are hospitalized and dead.

COVID 19 Vaccine

"All the time the pandemic is closing slowly and it is filthy. It is not closing simultaneously in all the places". This is the statement made by Prof. Nukhet Varlik, Associate Professor, History department, University of Carolina, USA. The nature of this fresh infectious disease Covid-19 is turned into endemic in specified areas of the globe and then spread to other places. Now it is the transition period during which the country's effort is to gain the herd immunity to face it through vaccines or falling sick. The writings of research scholars Marc Veldhoen and J. Pedro Simas of Portugal's Lisbon Universty in the Nature Reviews Immunology dated 5th Jan. 2021 states that the new vaccines are useful in closing the covid-19 infectious disease. There is uncertainty about the vaccine's effectiveness against repeated infection. Because we should understand that how much duration does this vaccine is safeguarding us from Covid 19 and vaccine's capacity to withstand against the fresh virus variants appearing in near future.

It is necessary to vaccinate simultaneously in all the places of the world with similar speed. But the speed of the vaccination is vary fast in developed countries, but not in the rest of the world. It seems that, if the covid virus is spreading in any one or other place of the world, again, there is the danger to the entire globe. In India Covishield and Covaxin are the two vaccines which are invented and found successful. 13,83,79,832 doses of vaccine have been administered in India as of April 24th 2021. Out of these, a total of 11,69,36,487 people got first dose whereas 2,14,43,345 people got the second dose. Hence, India is the fastest country in the globe to administer this much covid-19 vaccine doses.

Table 1: General Information

Sl. No.	Total	Particulars	Number	%age
1	Gender	Male	24	80.00
		Female	06	20.00
		Total	30	100.00
2	Age	18 - 20 years	15	50.00
		20 – 30 yrs	09	30.00
		30 – 40 yrs	05	16.67
		Above 40 yrs	01	3.33
		Total	30	100.00

3	Qualification	Illiterate	03	10.00	
		Upto SSLC	22	73.34	
		PUC	04	13.33	
		UG	01	3.33	
		PG	00	00.00	
Total			30	100.00	
4	Reasons for Migration:	Poverty	05	16.67	
		Job	14	46.67	
		Business	03	10.00	
		Health of family members	01	3.33	
		Education of children	01	3.33	
		Marriage	06	20.00	
Total			30	100.00	
5	Nature of occupation	Contract labour	02	6.66	
		Brick industry	03	10.00	
		Saw-mill	02	6.66	
		Ply wood factory	01	3.33	
		Tiles work	02	6.67	
		POP Work	02	6.67	
		Bar attender	01	3.33	
		Hotel worker	02	6.67	
		Street vendor	02	6.67	
		Mobile Service Shop	01	3.33	
		Drivers	02	6.67	
		Gardener	02	6.67	
		Construction work	06	20.00	
Jerry work	02	6.67			
Total			30	100.00	
6	Marital Status	Married	10	33.33	
		Unmarried	20	66.67	
	Total			30	100.00
7	Monthly Income (in Rs.)	Number of respondents	Before migration	After migration	%age
		06	6,000	18,000	20
		18	6,000 to 10,000	24,000	60
		04	10,000 to 12,000	30,000	13.33
		02	12,000 to 15,000	36,000	6.67
Total		30			100.00

The above table i.e., Table No. 1 depicts that 80% are male and 20% are female respondents. Half of the respondents are between the age 18 to 20 years. Majority I/E/. 73.34% are studied below SSLC. Nearly half of the migrants says that job is the main reason for migration. 20% migrated for construction work. Most of the migrants i.e., 66.67% are unmarried. 60% says that their monthly income ranging from Rs.6000 – 10,000 to Rs.24,000

Table 2: Social Benefits after Migration

Sl. No.	Statements
1	Improvement in Health Status
2	Improvement in Food intake
3	Bought Mobile
4	Buying TV
5	Table fan purchased

6	Bought Bike
7	Sending money to home for brother's or sister's marriage
8	Participation in decision making
9	Migration helps the education of children or family members in home
10	Getting Social security benefits - PF
11	Life Insurance
12	ESI
13	Improvement in relationship with family, friends & relatives
14	Improvement in self confidence
15	Improvement in Social Status

Table 3: Economic Benefits after migration:

Sl. No.	Statements
1.	Improvement in standard of living
2.	Improvement in Purchase power
3.	Improvement in Housing facilities
4.	Improvement in Consumption expenditure
5.	Improvement in Health care expenditure
6.	Improvement in Furniture in home
7.	Improvement in Entertainment expenditure
8.	Improvement in Children care
9.	Improvement in Travel expenditure
10.	Improvement in Expenditure on Food

The Lockdown Policy and Reverse Migration

After the Lockdown policy announced, it became the nationwide policy in India. The lockdown policy needs each person to remain in the home and all the commercial activities except essentials were banned for the next 21 days. A mass departure of migrant workers commenced within 24 hours from metropolitan cities. Firstly from Delhi and it is followed by other cities and industrial areas. There arise the Reverse migration. It leads to the danger of spreading covid-19 among these workers on the road and they became the carriers of the virus to their villages. Thus, the idea of lockdown is to be compromised and it hurts the effectiveness of lockdown policy.

Relocation of Reverse Migrants

Nationwide shramik Special trains were arranged by the Indian Railway and 60 Lakh migrants reached their home States / villages through 4,450 Shramik Special trains since 1st May to June 14, 2020. They charged the nominal average price of Rs.600 per ticket.

Till 1st June 2020, more than 3,30,000 migrants made the journey towards their hometowns(i.e., in different parts of our country) from Karnataka. 217 Shramik Special Trains carried 3,07,661 migrants and 933 KSRTC Buses carried 25,431 migrants to their destination from Bengaluru.

The South Western Railway has facilitated the maximum number to leave the City (2,77,667) by running 192 trains from Bengaluru, Hubballi and Mysuru Railway Divisions while Southern Railway ran 21 trains from Mangaluru to help 25,134 leave while the Konkan Railway helped 4,860 from Udipi and Karwar go home.

Among those departing by the 933 Inter-state buses, the maximum number (12428) left by 474 buses organised in that direction to Tamil Nadu followed by Rajasthan which had less than half the number departing. The other States which had a good number leaving were Andhra Pradesh, Madhya Pradesh and Uttar Pradesh.

However, all those who have left is less than half of those who have registered to leave the State. "Just on the Seva Sindhu portal, 7,04,779 migrants have registered to leave to their hometowns. Migrants from Bengaluru Urban topped those who wanted to go with 4,03,377. Those from Bengaluru Rural were a far second with 52,540 opting to leave followed by Dakshin Kannada, Kolar and Belagavi," informed a State government official

The maximum number wanted to leave to Bihar, Uttar Pradesh and West Bengal, he added. A good number also wanted to leave to Jharkhand and Odisha, he added.

Food, water and sanitation arrangements were made at five mustering centers in the City, he explained. "Migrant workers are intimated in advance to assemble here before their departure through Shramik Special trains," he said. BIEC for Bihar and Jharkhand workers, Tripura Vasini in Palace Grounds for Uttar Pradesh, Manpho Convention Centre for West Bengal, Bengaluru Main Palace for North East States and KTPO for Odisha, the official said.

Reasons for Reverse Migration

Table 4: Ranking the Most Critical Reasons for Reverse Migration

Reason for Remigration	Percentage of Respondents with rank					WAS*	Rank #
	# 1	# 2	# 3	# 4	# 5		
Sudden loosing of job	23.3	53.3	13.3	3.3	6.7	2.17	1
Strong determination to reach home to join with family members	26.7	60.0	10.0	0.0	3.3	1.93	2
Home Sentiment	30.0	56.7	10.0	0.0	3.3	1.90	3
Sudden monetary crisis	46.7	36.7	10.0	3.3	3.3	1.80	4
To live with parents	30.0	60.0	10.0	0.0	0.0	1.80	5
If dead, it is better to die in homeland	30.0	60.0	10.0	0.0	0.0	1.80	6
Discrimination	20.0	80.0	0.0	0.0	0.0	1.80	7
To meet friends and relatives	30.0	66.7	3.3	0.0	0.0	1.73	8
Fear	60.0	26.7	13.3	0.0	0.0	1.53	9
Anxiety	60.0	26.7	13.3	0.0	0.0	1.53	9
No ration	60.0	26.7	13.3	0.0	0.0	1.53	9

* Weighted Average Score.

Note: 1 being 'strongly agree' and 5 being the 'Strongly Disagree'

Respondents were asked to rank them based on their priority (1 being 'Strongly Agree' and 5 being 'strongly disagree') in terms of most likely reason for reverse migration. Consequently, a total of eleven critical reasons were considered as shown in Table 1 for reverse migration. It is observed from Table 1 that *sudden loosing of job* is foremost reason (with a Weighted Average Score of 2.17) for migration to their native places. This is followed by '*Strong determination to reach home to join with family members*' (WAS = 1.93) as their second most reason (in terms of ranking their intention of going back) and then '*Home Sentiment*' (with a WAS = 0.90) and followed by *Sudden Monetary Crisis* (WAS = 1.80) as their fourth choice for migrating back to their respective home towns. However, fear, anxiety and anticipating food scarcity has not been considered as the primary factors for reverse migration of labourers working in Tumkur district. Nevertheless, it should be noted that the weighted average score (WAS) of all the eleven reasons remains very close to each other and thus could be conducted that all of the reasons are equally contributed to their decision for reverse migration.

Table 5: Response of respondents about their return to the earlier jobs in the study area

Sl. No.	Response about Return to earlier jobs	Number of respondents
1	Yes	02
2	Neutral	07
3	No	21
Total		30

While going back, the mindset of the respondents shows that most of the reverse migrants does not want to comeback.

Table 6: Most of the reverse migrants satisfied with the following steps also regarding travel arrangement:

Sl. No.	Aspects
1	Government's measure to send back domestic migrants
2	Quality of Administrative authorities' service in registration
3	Information
4	Online registration facility
5	Conveyance
6	Food facility
7	Water facility
8	Hygienity
9	Documentation

Source: Primary Data

Table 7: Following are the dilemma in the minds of reverse migrants

Sl. No.	Aspects
1	Welcoming by State
2	Response from administrators – 14 days mandatory Quarantine
3	After mandatory Quarantine - acceptance from villagers
4	Discrimination from the villagers
5	Degradation by villagers
6	Harassment by villagers / bureaucrats / Police
7	Made alone
8	Fear of community spreading of virus
9	Become vectors of covid-19 virus
10	Getting ration
11	Received by parents
12	Involving with family
13	Acceptance by friends and relatives

Source: Primary Data

Steps taken by the Government of India to help the Migrant workers

Migrant workers will be able to access the Public Distribution System (Ration) from any Fair Price Shop in India by March 2021 under the Scheme of 'One Nation One Card'. The scheme will introduce the inter-state portability of access to ration for migrant labourers. By August 2020 the scheme is estimated to cover 67 crore beneficiaries in 23 states (83% of PDS population). All states and union territories are required to complete full automation of fair price shops by March 2021 for achieving 100% national probability. Migrant workers who are not beneficiaries under the National Food Security Act ration card or state card will be provided 5 kg of grains per person and 1 kg of chawal per family per month for two months under the free food grain supply plan. Rs.3,500 crore will be spent on this scheme and eight crore migrants are estimated to benefit under it. The migrant labour and urban poor will be provided living facilities at affordable housing for rent under Pradhan Mantri Awas Yojana (PMAY). This will be achieved by: (i) Converting government funded housing in the cities into ARCHCs through PPPs, and (ii) Incentivizing manufacturing units, industries, institutions, associations to develop ARHCs on their private land and operate them.

Impact of Lockdown on Indian Economy

Most of the countries of the globe faces the reduction in GDP per capita because of pandemic COVID-19. It seems to be the global crisis 2020 which occurs once-in –a-century. The main intention of India is to save the lives and livelihoods by suffering short- term for the long-term gain. Government of India identified that GDP growth rate will recover soon but human lives lost due to pandemic cannot be gained back.

World bank expected that global economy in 2020 is going to reduce by 4.3 per cent. IMF expect the same by 3.5 per cent. This risk is different in a number of ways.

- I Financial Crisis –
 - 1) Great Depression – occurred in 1930-32,1982, 1991 and in 2009
 - 2) Severe changes in oil prices in 1975 and in 1982
 - 3) Wars in 1914, 1917 – 21 and during 1945 -46.
- II Great Lockdown –due to pandemic which occur once in a 150 year event entire world is witnessing negative growth in 2020.
- III Social distancing and Limiting Physical Interactions

Since June 2020, the lockdown lifted in India which causes V-shaped recovery in the economy. The focus is to protect the interest of the poor and marginalized sections of the society and to the MSMEs in particular in business sector. The Pradhan Mantri Garib Kalyan Yojana (PMGKY) for ensuring food security through public distribution system, direct benefit transfers to widows, pensioners and women, additional funds for MGNREGS, and debt moratoria and liquidity support for business. With the easing of movement and health-related restrictions in the third quarter, the government transitioned in a calibrated fashion to support investment and consumption demand through Atmanirbhar 2.0 and 3.0.

Impact of Reverse Migration on Local Economic Development in the Study Area

It is confirmed that cent percent migrant labours are not returned to their hometowns from the study area. In the study area certain portion of migrant labours moved back and the vacant position does not make so serious havoc to the entrepreneurs, owners, industrialists, businessmen, construction work contractors those who appointed them in their tasks. They inevitably go with alternative. They appointed local labours. But it is some what costly. Their labour cost increased and profit margin somewhat comesdown. The entrepreneurs and owners feels that this reverse migration is temporary. Again they are returning to the works. Any how, dependency of local economy on migrant workers are not so high in all the sectors. But this reverse migration slightly affected in the study area and it was temporarily made good by local labours as there is less demand for all aspects due to postponement because of pandemic.

Conclusion

Migration is inevitable due to various socio-economic reasons in India. But, as soon as the lockdown announced due to this pandemic covid – 19 created serious havoc in the minds of migrant workers. Exodus migrants decided to reverse migration. This leads to several issues and they received some pains and some lost their life also while moving back to native place by walk. Government took several measures to relocate and help them. The reverse migrants got several reasons to move back. **sudden loosing of job** is foremost reason and followed by other reasons. They got dilemma before going back and they satisfied with several travel back measures provided by the Government of India. Government of India took several measures to help them while relocation. Again, Government of India should collect the full data regarding migrant workers, store it and it should speed up the relocation, PDS, economic doles to the affected migrants. Their reverse migration affected not so seriously the local economic development in the study area. Any how it affected to certain extent. But labour cost was increased to certain extent and the profit margin was reduced. The government should take several measures to upkeep the skill levels of the local labours. The skillset is to be improved by providing several trainings in the study area.

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