

COVID-19: Health, livelihood and social protection strategies for immediate and long-term relief among informal women workers

As more and more parts of the world declare lockdown measures in the face of the COVID-19 pandemic, the damage to economies and livelihoods is rapidly escalating and giving rise to additional forms of distress during this healthcare crisis. The outbreak is widely being considered two epidemics - a health crisis and a livelihood loss epidemic.

Already amongst the most vulnerable in normal times, informal sector workers find themselves bearing the brunt of this economic fallout. With physical distancing measures in place, their usual channels of income lie broken, many stranded in places away from their homes, without proper shelter and supplies, and often without the capacity and awareness to prevent exposure to infection.

Through our work with cooperatives, we have been able to document significant losses as:

- Farmers are unable to sell their produce, given that many of the main markets have been shut down. On top of this, our estimates show that farmers are earning half of what they used to make per sale. For example, the prices of tomatoes have reduced from Rs. 5 per kg to Rs. 1-3 per kg.
- Local shopkeepers are taking advantage of the situation by hiking prices for hygiene products and other daily needs. This is a severe blow to women who do not have any work.
- Domestic workers and cleaners have not been guaranteed paid leave by their employers from the month of April. The cleaning cooperative Saundarya has women of some of the most vulnerable castes in their membership whose cleaning work has stopped, severely affecting their income.
- Childcare centres have been closed but the members are distributing one meal a day to children that live in close proximity from the centres. Raw materials are bought in the first week of the month, therefore the current stock will last until the end of March. However, moving forward, the centres have no stock of raw materials or source of revenue.

Gujarat government, starting April 1st, will provide free food items - including 3.5 kg wheat and 1.5 kg rice per person, and 1 kg of pulses. pulses, sugar and salt per family, to around 60 lakhs households or 3.25 crore individuals, holding ration cards. Additionally, It has been declared that it will give in advance one month's pension or assistance to senior citizens, widows, mothers, women and differently-abled people. Finally, industrialists and shopkeepers have been exempted from paying fixed charges levied in the electricity bill. They will only be charged for the actual use of electricity for the month of April.

There is no information yet on how these payments will be made - i.e. only to those with Jan Dhan Accounts, or other qualifying criteria. From our experience, we anticipate operational roadblocks may affect supply of these provisions.

Of our active cooperatives, most are classified as essential services, and are therefore functioning. These include 65 milk cooperatives and SEWA Bank. While our health cooperative - Lok Swasthya's medicine shops are classified as essential services, however, the primary healthcare including health education and awareness has been affected by the lockdown.

Therefore, SEWA Federation is actively seeking support for 11 cooperatives (including agriculture, handicrafts, services, and finance), with a total membership of 6300 informal women workers. These do not qualify as essential services and are looking at severe losses.

OUR ESTIMATES

Loss of income: Total cash loss per month, for the 11 cooperatives will be Rs. 40,38,414

<u>Viability:</u> Some of the cooperatives will not be viable by April end and will begin to run into losses. The other cooperatives will run, on average, for 4 months before running into losses.

<u>Revenues</u>: At its peak, the estimated total revenue for the 11 cooperatives was Rs. 80,25,285. With the current situation, the estimated revenue for the month of March is Rs. 79,69,780, projecting a difference of Rs. 55,505 in revenue generation.

The projected revenue for all 11 cooperatives for the month of April is Rs. 0, which signifies that they will be facing a loss of Rs. 29,85,160 for fixed costs. These losses will increase if the lockdown continues beyond April 15.

OUR RESPONSE

The lives of our members- informal women workers, are characterised by insecurity of work and income, and food, as well as limited or no access to social security. At this stage of the pandemic in India, the required social distancing will likely worsen the situation for our members. Therefore, the need for immediate intervention is particularly crucial to ensure income, social protection and health security to our members. SEWA Federation has adopted a three-fold strategy:

- 1. Safeguarding health
- 2. Livelihood restoration
- 3. Extending social protection and food security

Our immediate response involves distribution of food. Despite the government's announcement, our experience suggests that there will be those left out - those without ration cards, migrant workers whose ration cards are from their home states and may not allow them to access food in Gujarat. There is also the possibility of insufficient stock, and also in inadequate quantities given the household size.

Health kits: Due to small homes with many members, social distancing will be difficult for many. To prevent the spread of the virus, we will distribute five 2-layered, washable cloth face masks to each household. We will also distribute hand sanitiser or neem soap.

Cash transfer for sustenance: The COVID outbreak and the lockdown measures have imposed restriction on scale of production and activities, impacting revenue for many enterprises. This has a direct impact on our members. Therefore, to ease the inevitable economic pressure, we propose a direct cash transfer.

Our long-term response is working towards the development of a health cadre equipped to respond to a crisis and a livelihood restoration fund for cooperative recovery.

Immediate Response	Number of households reached	Cost/household	Total cost (in Rupees)
Health kit distribution	6300	110	693,000
Ration (food grain) pack distribution	6300	500	31,50,000
Food packet distribution - 2 meals a day for 30 days	6300	50 (per meal)	1,89,00,000
Immediate cash transfer for 3 months	6300	2000 (monthly)	3,78,00,000
Total cost			Rs. 6,05,43,000
Long-term Response	Detailed plan	Number of women reached	Total cost
Health	 Health awareness and providing information on government schemes and benefits, through 100 frontline health workers 	 500 (minimum) with health education and hygiene messages, information on schemes/benef its 	920,000

Detailed intervention and costs

	 Counselling/psych osocial care Development of training material in local language 	2. We anticipate that 10% of the 500 women, i.e 50 women (monthly) will need further counselling	
Total cost			Rs. 920,000
Livelihood	Develop a livelihood restoration fund to enable our member cooperatives to fall back on, when needed. In non-crisis times, the fund will support working capital needs of the cooperatives 1. Running costs for 6 months (11 cooperatives) 2. Working capital/cooperativ e fund (11 cooperatives)	6300 households	1. Rs. 33,00,000 2. Rs. 75,00,000
Total cost			Rs. 1,08,00,000

APPENDIX

The health kit includes:

Product	Quantity	Total cost
2-layered cotton cloth face mask (reusable, washable)	5	65
Sanitiser OR Neem soap (based on water availability)	1 sanitiser/3 neem soaps	45
Total		110

The ration pack includes the following:

Ration	Quantity (kgs)	Cost	Total cost
Wheat/Bajra flour	3	40	120
Rice	3	25	85
Dal (Lentils)	2	60	120
Salt	1	20	20
Sugar	1	45	45
Oil	1 (litre)	110	110
Total	11		500