



The Covid-19 Pandemic And Social Crisis: Policy Issues In India

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Abstract

In the wake of the COVID-19 epidemic, the Indian labour market has been engulfed in an unprecedented crisis. The livelihood of the majority workers specifically the daily wagers sector has severely been affected, and a significant degree of unpredictability continues to linger over foreseeable future. The pandemic has had a huge impact on the working environment in India, and the purpose of this essay is to analyse the continuing difficulties that have arisen as a result of the pandemic. However, the massive vulnerability of workers in the country, which has been brutally exposed in the current crisis, did not appear overnight and needs to be positioned against the backdrop of the economic reforms, formulated specifically during the preceding six years of the current dispensation at the centre and (mis)management. This is accomplished, although in a very short manner, in the very first substantial portion of the essay. The subsequent segment takes stock mainly of the existing circumstances and worsening state of working communities of the world due to Covid-19 pandemic and how it continues to develop. The issues and challenges that Indian working sector is currently facing are immeasurably tremendous and policy remedies in this context, seems imperative.

Keywords: Labour, COVID-19, employment, economic crisis, slowdown, world of work.

Introduction

On March 24, 2020, at eight o'clock in the evening, government of India issued an announcement stating that a lockdown has been devised throughout the country to curb the spread of Covid-19. The government announcement, without any preparatory guidelines or roadmap, and addressing even the most fundamental concerns for support system for the major section of the country's population whose livelihoods were likely to be threatened. This accounted for more than 90 percent of the workforce in the country's unorganized/informal segments, including daily wage workers, of which a significant share consisted of migrant workers. It accounts that the COVID-19 lockdown was the world's most severe example of 'shock and awe' tactic, in which millions of people and an overwhelming majority of employees were left to fend for themselves. This decision on the part of the government led to the unprecedented, tragic, and desperate mobility of

hundreds of thousands of workers accounting the vulnerability of the section. The joblessness and lack of state intervention further deteriorated the living conditions of the working sector.

The rapid spread of the coronavirus (SARS-CoV-2) and the disease that it causes (COVID-19) around the world since December 2019 have infected millions and entire economy system have been come to a halt due to the subsequent lockdowns ordered by the government. The pandemic caused by COVID-19 is inarguably a threat to public health on a worldwide scale yet, the effects of this pandemic go much beyond the purview of epidemiology. As observed, it was a political, economic, and social catastrophe the world has not seen since the outbreak of influenza that occurred in 1918. In addition, the consequent psychological pressure is now emerging as another significant issue that draws attention. International travel has been curtailed as a result of border closures, and quarantine, stay-at-home orders, social distancing, have resulted not only in the emptying of city streets, parks, and other public areas but also generating pandemic stigmatization. Unemployment rates have increased worldwide besides nursing homes, prisons, and migrant detention centres have become hotbeds of death and disease, all of which has exacerbated existing social inequalities and economic disparities. Schools and universities have started adopting to new mode of online learning, creating an impersonal virtual space for communication further.

At the same time, there has been an incredible outpouring of social solidarity and mutual help to support those who are in urgent need. Every day, people who work in health care and other industry sectors delivering essential and emergency services and ensuring that public transit systems are operational. Researchers in the medical field are exploring possibilities to develop a vaccine against the coronavirus as well as other life-saving therapies. Solidarity networks are other emerging organisational dynamics to promote socially fair solutions to the worldwide epidemic. COVID-19 labour rights campaigners and trade unions are campaigning to adopt preventive measures against exploitative and hazardous working conditions. In spite of these attempts, it is possible that the worst days of the COVID-19 epidemic are yet to come, and much of what will become clearer with hindsight in the future remains shrouded in the immediacy of the current crisis. On the other hand, the pandemic has pushed the citizens down into a state of vulnerability and wait till the normalcy returns and estimate the social ramifications emerge out of the pandemic.

The term social policy is used to describe programmes that are benevolent, redistributive, and concerned with economic as well as non-economic aims. In practise, this term refers to the welfare state and encompasses health care, social security, pension, family, educational, and other such programmes.

In this study, we isolate the discussion of healthcare from that of social policy, which we define as all of the other areas of policy that make it possible to comply with public health requirements. In the context of COVID 19, particularly pertinent social policies include automatic stabilisers such as unemployment insurance as well as specific actions including eviction moratoria, universal cash transfers, distribution of free food, support for small businesses, worker protections, and short-term work in which the government

finances payroll for firmly prevent laying off employees who have lost their jobs due to the crisis. The idea that social policy is necessary to support pandemic response can be summed up in phrases such as test, trace, isolate or test, trace, isolate, support, or in the statement that compliance requires not only things like good communication and trust, but also a political economy that permits people to stay at home without starving. Both of these statements are illustrative of the thesis that social policy is required to support pandemic response. We are able to differentiate a social policy baseline that existed before the epidemic erupted from particular activities that were implemented as a reaction to the pandemic and to support policies about public health. Therefore, unemployment insurance for formal employees is an automatic method of stabilisation nevertheless, further top-up payments for it might be an additional governmental respond to the crisis. During the epidemic, several nations passed new social policies, most of which were only temporary. However, the need for such policies may have been lower if the countries had already formulated social policies that were well-funded and efficient.

Interaction of social policies and pandemic response

The initial assumption made by policymakers was that the federal government would successfully manage the COVID-19 pandemic and claimed that the country would return to normal economic life in the fall of 2020. As a result, the majority of the CARES Act provisions were set to expire during the months of August and September in the year 2020. Unfortunately, the assumption was incorrect due to the fact that extraordinary social policy measures were not renewed, the United States was forced to face the autumn of 2020 and the resulting economic disruption with very little COVID-specific federal social policy and a pre-existing social policy baseline that was not adequately equipped to deal with problems of a lesser magnitude than the pandemic. People avoided going to public places such as bars, restaurants, physical retail stores, and travel because they feared contracting the virus. This meant that the economic damage would likely get worse as the virus continued to spread. During the summer of 2020, the United States temporarily established a comprehensive safety net. This may have made it possible to implement coercive measures sufficient to control the virus; however, the federal government and the majority of state governments failed to maintain it or match it with public health measures sufficient to restore something resembling a normal economy by autumn of 2020. Therefore, by October, the United States was mired in a very politicised argument regarding the effectiveness of NPIs; the Chief of Staff of the White House warned CNN that we are not going to control the epidemic. The public health infrastructures were largely overburdened, and the modest economic gain that had been made during the summer was in jeopardy.

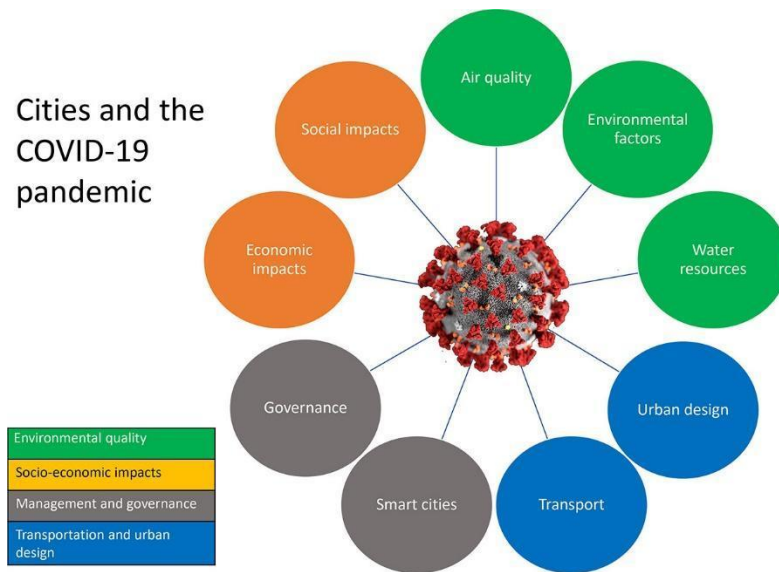
Contextual exploration of social policy and pandemic response in India

On March 24, the federal government of India made the announcement that a comprehensive national lockdown will be implemented throughout the country with uniform execution. The states differ mostly in how strictly they would enforce the

lockdown. However, as soon as the national lockdown was lifted in May to allow movement of migrant workers from their place of work to their home and to revitalise the economy, the efficacy and coherence of the national effort quickly deteriorated. This was done in order to enable the movement of migrant workers from their place of work to their home. Individual states including as Odisha, Punjab, Maharashtra, Karnataka, and West Bengal, as well as Telangana, prolonged their curfews for an additional period of time. The ability to regulate diseases and natural disasters is delegated to the states, despite the fact that the federal government exercises financial control, including the provision of cash to the states.

After the national lockdown in March of 2020, the Indian Finance Minister, Nirmala Sitharaman, made a statement about a stimulus package of Rs 20 lakh crore, which is equivalent to 307 billion USD. This was one of the main centralised social policy acts in India. “The funding, which amounted to around 24 billion US dollars, was designed to provide everyone with food and cooking gas. However, the direct cash transfers that were intended to avoid delays did not reach everyone because of complications with identification processes, inter-state travel, and challenges with identifying individuals residing in informal housing environments. The goal of the direct cash transfers was to avoid delays. The economic stimulus package was effective in allowing individuals to live in an economy that was momentarily frozen, but this success was limited to those who actually received the money. The first step that states made in assuming responsibility for social activities was to broaden the scope of their individual lockdowns, and the second one was to improve how they handled combined threats. For example, the states of Kerala, Karnataka, and Odisha have already adopted lockdowns at the state level prior to the nationwide lockdown. After the national lockdown was lifted, others followed suit and continued their lockdowns for a prolonged period of time. However, enforcement policies differed from state to state, and different levels of danger prompted different priorities in different parts of the nation. As an example, the swift deployment of relief workers was prompted by the cyclone Amphan that hit West Bengal in the mid of May. Despite this, the cyclone caused thousands of people to lose their houses, and those people had to choose between remaining in what was remained of their homes, where they were at risk of infection, or migrating to cyclone shelters, where the virus may spread. After the national lockdown was lifted, individual states were given the authority to decide whether or not they would also implement lockdowns. This led to confusion regarding states which had extended the lockdown and those which had lifted the lockdown. This in turn led to individual violations as well as the beginning of large-scale gatherings.

Cities and the COVID-19 pandemic



Strategizing social policies

Observably, barriers to the effect of social policy actions on public health in India; these barriers include the absence of standardised social policies across the country as well as barriers to social policy actions such as the stimulus package actually reaching everyone. Despite the fact that many states and even the central government had a strong response to the public health crisis, the barriers in reaching out the effected people cannot be ignored. Community organisations such as the Sikh community, in number of states took it upon themselves to provide people of their communities with access to food by means of the langar, also known as the community kitchen. These locations soon became bustling meeting places as more and more markets sprung up in the surrounding regions to provide people with food and other essentials. Maintaining a lockdown was difficult since there was no way to allow individuals to remain in their houses for indefinite period. The demand for vital commodities eventually took precedence over the need for social distance measurements. Because people need to purchase food and other necessities, they often have to shop in congested places. In addition, the majority of people have to find employment in order to make ends meet. Communities, particularly those who are at risk of requiring high volume health care, are left in a precarious situation without provision while health care organisations are suffering wage cutbacks and physicians are quitting their posts. In addition, there was no way to determine, in such a large and populous nation, who truly received monetary assistance under the stimulus package and who did not. As an immediate consequence of this, the well-intentioned centralised social policy did not offer the states with sufficient information to enable them to contribute their own stimulus funding in addition to supporting employment.

It is imperative that immediate action needs to be taken to address the alarming rise in the rate of violence against women by incorporating preventative measures into economic support and stimulus packages in a way that commensurate with the gravity and scope of the problem and takes into account the requirements of women who are subjected to multiple types of discrimination. The Secretary-General has issued a call to

all nations to ensure that their national response plans for COVID-19 prioritise the elimination of violence against women and the provision of services to victims of such abuse. Shelters and helplines for women should be regarded as important services in every nation, and each nation should provide dedicated resources toward maintaining and expanding these services and raising public knowledge about their existence.

It is imperative that grassroots and women's organisations, and communities, which have been instrumental in the prevention as well as responding to previous crises, receive robust support in their current frontline role, including the provision of funding that is intended to be maintained over the longer term. Helplines, psychosocial support, and online counselling should all be expanded, and technology-based solutions like SMS, online tools, and networks should be used to help reach women who do not have access to phones or the internet. This will expand social support for women, and it will also help women who do not have access to social support. It is imperative that the judicial system and the police work together to guarantee that those who are responsible for acts of violence against women and girls are brought to justice and that they do not go unpunished. The commercial sector also has an essential role to play, including the exchange of information, the alerting of personnel to the realities and the risks of domestic abuse, and the promoting of constructive initiatives such as sharing caregiving tasks inside the family. Already, COVID-19 is putting us to the test in ways that the vast majority of us have never been tested before. It is delivering emotional and economic shocks, and we are fighting our way to overcome them. The violence that is already developing as a dark aspect of this epidemic is both a reflection and a challenge to our common humanity, as well as our values and our capacity for resilience. Communities must not only evolve through the coronavirus, but also emerge in better shape than before, with women serving as a driving force at the centre of the recovery.

Review of literature

(Sharifi and Khavarian-Garmsir, 2020) studied “The COVID-19 pandemic: Impacts on cities and major lessons for urban planning, design, and management discovered this and since the beginning of the COVID-19 crisis, the scientific community has been making consistent efforts to shed light on a variety of issues. These issues include the mechanisms that are driving the spread of the virus, its environmental and socio-economic impacts, and the necessary recovery and adaptation plans and policies. Cities, on account of the high population density and the extensive economic activities that take place there, are often hotspots for COVID-19 infections. As a consequence of this, a significant number of researchers are having difficulty investigating the dynamics of the pandemic in urban regions in order to comprehend the effects of COVID-19 on cities. By conducting a literature review covering the first eight months after the first confirmed instances of COVID-19 were reported in Wuhan, China, the purpose of this study is to provide a general summary of the research that has been conducted on COVID-19 in relation to urban areas. The primary objectives are to get an understanding of the effects that the pandemic has had on cities and to draw attention to the most important things that can be learnt about post-COVID urban planning and design. The findings indicate that, in

terms of thematic focus, early research on the impacts of COVID-19 on cities is primarily related to four major themes, namely, (1) environmental quality, (2) socio-economic impacts, (3) management and governance, and (4) transportation and urban design. While this indicates diverse search agenda includes a variety of topics, the first subject that focuses on concerns with air quality, meteorological factors, and water quality is the most prevalent, while the other topics are yet to a large extent relatively unexplored. The tremendous environmental implications that human activity has on the environment are brought to light by the improvements in air and water quality that occur in cities during lockdown times. These improvements serve as a wake-up call to embrace ecologically responsible growth routes. This study also presents further suggestions that may be utilised for post-COVID urban planning and design. These recommendations are connected to socio-economic aspects, urban management and governance, transportation and urban design, and urban design in general. According to the information that is now available, the COVID-19 situation presents an outstanding opportunity for city planners and policymakers to take revolutionary initiatives towards the creation of communities that are more equitable, resilient, and sustainable.

(Jha and Kumar, 2020) studied Labour in India and the COVID-19 pandemic discovered this and in the wake of the COVID-19 epidemic, the Indian labour market has been engulfed in a crisis that has never before been seen in living memory, and this is a truth that is universally accepted. The employment and means of subsistence of the overwhelming majority of workers have suffered significant blows, and a great deal of unpredictability continues to hang over their near and foreseeable future. The epidemic has had a significant influence on the working environment in India, and the purpose of this essay is to analyse the continuing difficulties that have arisen as a result of the pandemic. However, the massive vulnerability of workers in the country, which has been brutally exposed in the current crisis, did not appear overnight and needs to be positioned against the backdrop of the so-called economic reforms, specifically those that took place during the preceding six years of the current dispensation at the centre and its (mis)management. This is accomplished, although in a very short manner, in the very first substantial portion of the essay. The second main portion takes stock of the existing circumstances of the working world, which have been made worse by the epidemic, as it continues to develop. To say that the issues that face India's working people at the present moment are great would be an understatement; nonetheless, it would seem that the governing regime is, at best, oblivious to their existence.

(Rose-Redwood et al., 2020) studied Geographies of the COVID-19 pandemic” discovered this and because of the rapid spread of the new coronavirus known as SARS-CoV-2, the world is now facing the gravest threat to its public health in more than a century. More than ten million individuals from different parts of the world are now infected with the Coronavirus Disease 2019 (COVID-19), which has resulted in more than half a million fatalities around the globe. The worldwide health catastrophe that was triggered by the COVID-19 pandemic has been compounded by political, economic, and social issues that have exacerbated existing disparities and harmed the most vulnerable elements of

society to a disproportionately greater extent. As the present crisis continues to play out, there is an urgent need for geographers and other researchers to critically investigate the epidemic's ramifications. The worldwide pandemic has had major implications for geography. This introduction piece offers a summary of the 42 comments that are included in the current special edition on the geographies of the Corresponding COVID-19 pandemic, which is focused on the geographies of the pandemic. The writers come from all around the world. To better comprehend the unequal geographies of the Coronavirus/COVID-19, this special issue's articles, taken as a whole, demonstrate the different theoretical views, methodological techniques, and thematic focuses that geographical studies may provide.

(Sengupta and Jha, 2020) studied “Social Policy, COVID-19 and Impoverished Migrants: Challenges and Prospects in Locked Down India” discovered this and India is facing a humanitarian crisis of unimaginable dimensions at a time when other nations are strengthening their already established safeguards to deal with the social and economic effects of the COVID-19 epidemic. The unorganised sector of the Indian economy employs 90% of the country's workers; untold millions of people commute long distances to their jobs in the cities from their homes in rural regions. When the Government of India (GOI) announced the sudden 'lockdown' in March to contain the spread of the pandemic, migrant informal workers were already mired in a survival crisis. They were suffering from a loss of income, hunger, destitution, and persecution at the hands of authorities policing containment and fearful communities maintaining 'social distance.' Within this framework, the essay examines how the COVID-19 epidemic experiences of 'locked down' migrant workers exacerbate preexisting conditions such as poverty, informality, and inequality. This article takes a look at the nature and scope of existing social policy, which was developed in response to shifting political regimes and a shifting economic climate, with the goal of safeguarding a vulnerable population and reducing the likelihood of upheaval, discrimination, and homelessness both in the present and in the future.

(Greer et al., 2021) studied “Social policy as an integral component of pandemic response: Learning from COVID-19 in Brazil, Germany, India and the United States” discovered this and it is simple to believe that public health emergency measures and social policy may be separated from one another, but this is a mistake. The purpose of this study is to demonstrate that social policies such as unemployment insurance, flat payments, and short-time work are essential to the efficacy of non-pharmaceutical interventions as well as to their political viability by comparing the experiences of Brazil, Germany, India, and the United States during their responses to the COVID-19 pandemic in the year 2020. In a broader sense, public health policies that restrict economic activity will only be successful and sustainable if they are coupled with social policy measures that allow individuals to comply without compromising their livelihoods or their economic welfare. In Germany, the combination of the country's stringent public health laws with its extensive social programmes has proven to be successful. Generous social policies in Brazil and the United States during the summer of 2020 that were uncoupled from robust public health interventions enabled lockdown compliance but were unable to stop the pandemic. On the other hand, stringent public health measures that were implemented

in India without the support of social policy quickly failed. When it comes to COVID-19 and any future pandemics, the theory and practise of public health should acknowledge the significance of social policy, both in terms of the short-term efficacy of public health policy and the long-term repercussions of pandemics on society and the economy.

(Iyengar, Jain, and Vaishya 2022) studied “Current situation with doctors and healthcare workers during COVID-19 pandemic in India discovered this and with the publishing of public health recommendations on March 11, 2020, the World Health Organization (WHO) officially designated the outbreak of the new coronavirus severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) to be a pandemic. These guidelines will guide the pandemic response. A hospitalisation and the assistance of a ventilator may be required in the event of a serious disease. During the COVID-19 pandemic, the Indian government implemented a variety of preventative measures, such as a lockdown on March 23, 2020, along with social distancing and self-isolation strategies, and recommended shielding of individuals who were considered to be at an increased risk of contracting the disease. Because of the lockdown measures, people were less able to move about, which had a huge knock-on effect on the day-to-day activities of the Indian people, including a disruption in economic and social activities as well as access to healthcare services. People have been afraid and apprehensive as a result of this, and as a result, they have had difficulty accessing emergency treatment at times.

Conclusion

The widespread outbreak of COVID-19 has had an effect on the working sector in India. The job prospects and means of subsistence for the vast majority of employees have both suffered severe setbacks. They are still facing a great amount of uncertainty that hangs over the near and foreseeable future. However, it seems that the governing dispensation is inadequately concerned with the livelihoods of the vulnerable section. Since December 2019, the coronavirus known as SARS-CoV-2 and the sickness that it causes, known as COVID-19, have spread all over the world. There have been hundreds of thousands of fatalities, millions more people have been infected with the virus, and whole economies have ground to a standstill as a result of the outbreak. When it comes to COVID 19, social policies consist of automatic stabilisers like unemployment insurance as well as particular interventions like eviction moratoria. During the course of the epidemic, a number of nations passed supplementary social measures, most of which were only transitory. Had there been adequate support funded system and successful social programmes in place, it stands to reason that the demand for such policies would be reduced to a lower extent”. On March 24, the central government of India made the announcement that a total national lockdown would be implemented throughout the country with uniform execution having a primary difference in its enforcement. Individual states including as Odisha, Punjab, Maharashtra, Karnataka, and West Bengal, as well as Telangana, prolonged their curfews for an additional period of time. After the conclusion of the national lockdown, individual states were given the authority to choose whether or not they would continue the lockdown, which led to widespread uncertainty over the subject. Community organisations, such as the Sikh community evolved through

as a major social support system having provided food in the community kitchen known as langar(s). Helplines, psychological support, and online counselling should all be expanded as part of efforts to broaden the scope of social support and to reach women who do not have access to phones or the internet. Technology-based solutions should also be used in this effort. It is imperative that the judicial system and the police work together to ensure safety and prevent crime against women.

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