Status of DWD
WOMEN FACING MULTIPLE DISCRIMINATION
During COVID-19 Pandemic

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## CONTENTS

<table>
<thead>
<tr>
<th>Section</th>
<th>Region</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Executive Summary</td>
<td></td>
<td>4</td>
</tr>
<tr>
<td>Introduction</td>
<td></td>
<td>7</td>
</tr>
<tr>
<td><strong>Section 1</strong></td>
<td>South Asia</td>
<td>9</td>
</tr>
<tr>
<td><strong>Section 2</strong></td>
<td>Europe</td>
<td>21</td>
</tr>
<tr>
<td><strong>Section 3</strong></td>
<td>Latin America</td>
<td>22</td>
</tr>
<tr>
<td>Conclusion and recommendations</td>
<td></td>
<td>23</td>
</tr>
<tr>
<td>Bibliography</td>
<td></td>
<td>25</td>
</tr>
</tbody>
</table>
There is a special sort of discrimination based on Work and Descent (DWD), derived from principles of ‘purity and pollution’. This is the fate of members of particular communities who experience it by virtue of being born into certain groups, a fate that accompanies them throughout their lives.

Discrimination based on Work and Descent (DWD) is the UN terminology for structural and hierarchical systemic discrimination. ‘Work’ here refers to coerced occupational specialisation in locally stigmatised forms of labour, for example, sanitation, working with dead bodies (death work), leatherwork, devalued musical and performance traditions, and ‘slave occupations.’ The ‘Descent’ here refers to the inescapable, birth-based criteria of a social structure enforced and sustained through endogamy.

Gender discrimination intersects with Occupation and Descent, which means women from stigmatised and excluded communities experience extra disadvantage and vulnerability. In many cases, DWD communities are not recognised by their governments, and do not benefit from targeted policies and programmes which could support their welfare and development.

In Africa they are known as the Shambara in Somalia, Osu Oru in Nigeria, and Haratine in Mauritania. In South Asia they are referred to as the Scheduled Caste (Dalit). DWD communities in Europe include the Roma, Gypsy, and Sinti women; they are the Quilombolas in Brazil, Latin America. They are found in diaspora communities settled in different parts of the world.

Akin to all major disasters, COVID-19 has exacerbated pre-existing vulnerabilities and further marginalised discriminated communities. Governments provided immediate relief for some in cash and in kind, extending social protection provisions during lockdowns. However, the evidence points to the gross inadequacy of relief assistance and low take up of entitlements by the DWD communities, together with continued violence against DWD women. In all regions DWD communities are typically embedded in the informal sector and do not have identity documents, which disenfranchises them and means they cannot benefit from welfare schemes.

Executive Summary

The novel coronavirus - COVID-19 - pandemic startled the world with its uniqueness, reach and impact. Whilst research and analysis has mainly focused on global economic losses and related challenges ahead for governments and policy makers, it is important to throw light on the plight of the poorest and marginalised people – those who have been disproportionately impacted owing to their occupation and descent.
In South Asia the tea workers of Sri Lanka form the DWD community. They are mainly of Indian Tamil descent, historically transported by the British to work on the plantations under exploitative conditions. In Sri Lanka the female labour force participation rate is 33.6%, with most of the tea plantation workers in the country being women. The government announced a one-time cash transfer of Sri Lanka rupees 5000 ($25) under the Samurdhi Scheme but, because the women did not have the documents needed to register for social protection programmes, they could not access this support. A news report from "The Guardian" reported the absence of coronavirus public health measures on estates, including lack of clean water and sanitisation facilities for the women workers. The case study of the plantation worker Mrs. Sarojadevi and her family of the Kandy district illustrates how all sources of income were lost, that the family were without food and were confined to a 10”x2” room.

In Pakistan DWD communities are widely known as Scheduled Castes (so-called low caste) Hindus or Dalits. Dalits in Pakistan mostly belong to the Hindu minority and are victims of double discrimination due to their religious status – as non-Muslims in a Muslim state – as well as their caste. The Government of Pakistan announced an immediate cash transfer of PKR 12,000 ($78) in four monthly installments to the 12 million families of daily wage earners under the Ehsaas Emergency Cash Program. However only 22% of women in Pakistan are part of the workforce, with the majority engaged in low paid work in the informal sector, which has been severely affected by COVID-19 related restrictions. As of December 2019, 12.7 million eligible women in Pakistan lacked National Identity Cards. Due to seasonal and casual labour and lack of legal documents they were ineligible for cash assistance.

In Nepal, Scheduled Castes or Dalits constitute 13% of the country’s population, of whom 50% are women. 42% of the Dalits live below the poverty line (Paudal & Nikarthil, 2020), and mostly survive on daily wages. Assessments made by Dalit civil society organisations reveal a complete collapse of livelihoods, increased hunger and food insecurity, and greater violence towards Dalit women. 56 cases of caste-based discrimination were reported during the three-month lockdown period. Among them, eight incidents of caste-based discrimination occurred in the quarantine centres. Remoteness and lack of information contributed to Dalits’ inability to access their entitlements.

Bangladesh has approximately 6.5 million DWD groups belonging to over 80 communities. They are identified by occupations, such as manual scavenging, burying the dead, street sweeping etc. They live in congested colonies, slums or informal settlements with limited access to basic services. The government announced direct cash assistance to informal sector workers and direct cash aid of BDT 2,500 (USD 30) for 5 million poor families during the COVID pandemic. However, the number of Dalits beneficiaries is not known, nor how many Dalit women have benefited from the scheme.

India enforced the Disaster Management Act to contain the spread of the virus and provided immediate food and shelter relief from state and national disaster funds. Caste and gender-based violence increased sharply despite the lockdown according to India’s Dalit civil society groups. The

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3. Manual scavenging is a term mainly used in India for manually cleaning, carrying, disposing of, or otherwise handling human excreta in an insanitary latrine or in an open drain or sewer or in a septictank or a pit.
inclusion assessment of the COVID-19 relief package, Pradhan Mantri Garib Kalyan Yojana, by a Dalit rights organisation, highlighted very poor coverage of the Scheduled Caste (Dalits) and Tribal communities, and low take up of the package by registered beneficiaries. Two social protection schemes - the Jan Dhan Yojana and Ujjawala Yojana - were targeted at women and provided assistance of INR 1500 ($14) in three instalments, with up to three free LPG (liquefied petroleum gas) cylinder refills. However, lack of legal documentation resulted in a significant proportion of the DWD communities being excluded from state assistance at such a crucial period. The case study of Shakuntala, a former manual scavenger, from Chamari village in of Uttar Pradesh, describes how she lost her work, with eight children and an ailing husband to feed and take care of. They could barely survive on food donations from the neighbours.

In Europe the situation of DWD communities, the Roma, is very serious. The Roma people experience ‘antigypsyism’ - expressed through anti-Roma attitudes, negative stereotypes in the public sphere and hate speech. Poverty, unemployment and social exclusion are rampant within the Roma community in Spain. A European Union study on the gendered impact of COVID-19 observed that disruption and restrictions to reproductive health services, with projects discontinued in Bulgaria, Romania and Serbia, affected some communities more than others, including Roma women.

In South America, COVID-19 has ravaged the Afro-descendant Quilombola communities (DWD), exacerbating ongoing problems of pollution, encroachment and lack of public health services. In July 2020, the Brazil government passed a law with the intention of protecting indigenous and Quilombola communities during the pandemic, but it did not guarantee access to basic amenities and Medicare.

Globally, DWD women have suffered disproportionately due to their reliance on casual labour, unpaid care jobs, lack of documentation and stigma. Social protection schemes should be put in place for them in the wake of the pandemic to help communities survive with dignity. This requires a long-term financial commitment to COVID-19 recovery plans that are based on social justice, equity and a rights based-approach to promote community resilience.
Introduction

The novel Coronavirus or COVID-19 pandemic startled the world with its uniqueness, reach and impact. Whilst research and analysis have mainly focussed on global economic losses and the challenges ahead for governments and policy makers, it is important to throw light on the plight of the poorest and marginalised people who have been disproportionately impacted owing to their occupation and descent.

There is a special sort of discrimination based on Work and Descent (DWD), derived from principles of ‘purity and pollution’. This is the fate of certain communities who experience it by virtue of birth into certain groups, a fate that accompanies them throughout their lives.

Discrimination based on Work and Descent (DWD) is the UN terminology for structural and hierarchical systemic discrimination, contained in the Draft Principles and Guidelines for the Effective Elimination of the Discrimination based on Work and Descent. These communities are bound together in a common struggle against social structures that assign them a permanent status of devalued personhood and require them to undertake stigmatised and exploitative forms of labour.

Their experience has been called ‘discrimination based on work and descent (DWD).’ Work here refers to coerced occupational specialisation in locally stigmatised forms of labour: for example, sanitation, death work, leatherwork, devalued musical and performance traditions, and ‘slave occupations.’ The Descent refers to the inescapable, birth-based criteria of the social structure, the control of population through enforced endogamy—the restriction of marriage prospects to other members of the group, policed by violence from socially dominant communities.

The Draft Principles and Guidelines for the Effective Elimination of the Discrimination based on Work and Descent affirm that this form of discrimination is prohibited under international human rights law. CERD’s (Convention on Elimination of All forms of Racial Discrimination) general recommendation No. 29 on Descent-Based Discrimination recognises caste and analogous forms of discrimination as within the scope of the Convention.

Gender discrimination intersects with discrimination based on Work and Descent, which means women from these stigmatised and excluded communities experience extra disadvantages and vulnerability. In many cases, DWD communities are not recognised by their governments, and therefore do not have targeted policies and programmes for their welfare and development. In some countries, for example Nepal and India, there are special provisions to address the issues of the communities discriminated by work and descent.

In Africa they are known as the Shambara in Somalia, Osu Oru in Nigeria, and Haratine in Mauritania; in South Asia they are referred to as the Scheduled Caste (Dalit). In Brazil they are the Quilombolas. DWD communities in Europe include the Roma, Gypsy, and Sinti women. They are found in diaspora communities settled in different parts of the world.
COVID-19 exposed an epidemic of embedded inequalities in the world. Like any disaster, COVID-19 has exacerbated pre-existing vulnerabilities and has further marginalised discriminated communities. It has overwhelmed governments’ capacities to respond to this rare and unforeseen public health disaster. The psychosocial and economic impact has been felt by people from all walks of life, but for the DWD communities, and the women among them, the impact has been tremendous.

DWD women experience manifold and multi-faceted vulnerabilities due to their gender, patriarchal attitudes and DWD norms. DWD identity causes greater vulnerability and engenders stigma. Pre-existing vulnerabilities meant that in disaster situations their lives, liberty and legal protections already at risk before the pandemic, have been heightened during COVID-19.

Governments provided immediate relief in cash and in kind for some, extending social protection provisions, during the lockdowns. Nevertheless the evidence points to the gross inadequacy of relief assistance and low take up of entitlements by DWD communities, together with continued violence against DWD women, and lack of support by governments despite their special vulnerabilities.

In all regions examined by this paper DWD communities are typically embedded in the informal sector and do not have identity documents which disenfranchises them. This means they cannot benefit from welfare schemes.
The tea workers of Sri Lanka are considered a DWD community. They are mainly of Indian Tamil descent, historically transported by the British to work on the plantations. This population of about 840,000 people only gained Sri Lankan citizenship in 2003. They are placed at the bottom of its society, working under exploitative conditions. The private plantation management system is responsible for the administration and workers’ health and education of children on plantations, and there are no public regulatory mechanisms. The majority of tea plantation workers in the country are women, who do not possess the documents needed to register for social protection programmes. They also face undue delays in the payment of wages (Senaratne, 2020). Overall, Sri Lanka’s female labour force participation stands at 33.6%.

During the lockdown, while all other economic activities were suspended, paddy farming and plantation work, including work on tea small holdings and fishing activities, were permitted. A news report of April 2020 from The Guardian noted poor coronavirus

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7 Ibid
Mrs. Sarojadevi (37) lives in barrack style quarters on the Mausawa Estate in the Kandy district, with her husband and five children. Owing to maladministration, poor maintenance, land fragmentation and political interference, the estate was brought under the management of Janatha Estate Development Board (JEDB), a state agency. The family earn their living by working on the plantation, earning up to 1,000 rupees ($5) per day. After the lockdown, they lost the precious little they earned from their hard labour under exploitative conditions. Recounting their experiences of the lockdown she says, “I thought that with the curfew lifted in a day or two everything will be alright. As schools had been closed, we were confined to our tiny 10’x12 house along with all the children. I had 2,000 rupees ($10) left with me, and some food stocks. But the lockdown, which I thought would be over soon, kept on extending, leaving us food insecure. Minor self-employment prospects such as poultry, preparing and selling snacks and food processing were also affected. I could no longer sell off the surplus eggs to the schoolteachers which had earned me some money to supplement family income.” The right to livelihood of women like Saroja Devi was compromised during the pandemic, and gave rise to domestic violence and the thrashing of children when they cried for food.

The majority of the workforce in the plantation sector in Sri Lanka are women. 52.9% of estate workers are women working in tea plantations (The Sri Lankan Women, Partner in Progress, 2014). Women and girls experience various kinds of oppression which violate their civil, political and economic rights. Historically, girls and women on the plantations were assigned work as tea pickers. This involves long working hours and exposure to occupational health hazards. The women do not have job security, the gender division of labour is inequitable, and women are second class citizens in the labour market.

In Pakistan, the Discriminated-based on Work and Descent (DWD) communities are widely known as the Scheduled Caste (so called lower caste) Hindus or Dalits. Some Christians working as janitors or sanitary workers, are also considered DWD communities in Pakistan, as are Muslim fishermen and castes such as Machi and Khaskheli, and recent converts known as Shaikh Musali. However, Dalits in Pakistan mostly belong to the Hindu minority and are victims of double discrimination due to their religious status – as non-Muslims in a Muslim state – as well as their caste. According to the last Census (2017), out of a total population of 208 million, there were 520,000 (0.25 percent) Scheduled Caste Hindus and 3.3 million (1.59 percent) Christians in Pakistan.

The Government of Pakistan provided funds to mitigate the impacts of COVID-19 on March 2020 by approving a fiscal stimulus package of PKR 1.2 trillion ($7.8 billion) and a supplementary grant of PKR 100 billion for a "Residual/Emergency Relief Fund." It also put

Webinar by Asia Dalit Rights Forum Impact of the pandemic on DWD communities and mitigation measures during the World Social Forum in February 2021

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13 https://idsn.org/countries/pakistan/#:~:text=Dalits%20in%20Pakistan%20mostly%20belong,as%20well%20as%20their%20caste.
in place an emergency cash grant scheme for registered workers, who had lost their jobs due to the lockdown. Additionally, an immediate cash transfer of PKR 12,000 ($78) was announced over the next four months (PKR 3000 per month) for the 12 million families of daily wage earners under the Ehsaas Emergency Cash Program. This was extended to cover a new target of 16.9 million beneficiaries with an enhanced budgetary allocation of PKR 203 billion.

Forced and bonded labour in Pakistan is widespread, particularly in agriculture and brick making. Most bonded labourers come from marginalised communities, including Dalits. The Dalits/DWD communities also work in sanitation. However, as these jobs are classified as casual labour, the workers were not able to access COVID-19 relief assistance. This has impacted the 22% of women in Pakistan who work as casual labourers, mostly in the low paid informal sector, as they have been severely affected by the COVID-19 related restrictions. Without identification documents, they could not access relief entitlements.

The absence of data on informal sector workers and daily wage labourers, both in urban and rural areas, the lack of documentation and the failure of government to recognise the DWD communities and their issues continues to deprive them of much-needed assistance (Shah, 2020). According to the IFES report (Tariq & Bibler, 2020), as of December 2019, 12.7 million eligible women in Pakistan lacked National Identity Cards. Without these identity cards they are unable to access COVID-19 relief along with other welfare programmes. The pandemic is said to have further widened this already substantial gender gap in accessing benefits. The benefits are not targeted at women, and have done little to support women’s access to cash.

During the peak of the COVID-19 pandemic, between January and December 2020, the Aurat Foundation reported increased violence against women and girls across 25 districts of Pakistan. The report details 57% of the total cases of violence in Punjab, 27% in Sindh, 8% in Khyber Pakhtunkhwa, 6% in Gilgit Baltistan and 2% in Baluchistan. Punjab reported the highest number of murders, rapes, suicides, acid burning, kidnapping, domestic violence and forced marriage, while Sindh had the greatest number of honour killings. Punjab and Sindh provinces account for the majority of the Dalit population in Pakistan.

In Nepal, Dalits constitute 13% of the country’s population, of whom 50% are women. They are further divided into ‘Hill Dalits’ and ‘Madhesi Dalits’, mainly based on geographical and cultural factors. The first Commission for Dalits was set up in 1963 and caste-based discrimination has been abolished. Nevertheless women continue to suffer due to caste, gender and patriarchy. In May 2011, the Interim Parliament passed the Caste-based Discrimination and Untouchability Crime Elimination and Punishment Act. Despite this, casteism remains prevalent in the Nepalese society and Dalits are considered ‘untouchables’.

42% of Dalits in Nepal live below the poverty line (Paudal & Nikarthil, 2020), and most survive on daily wages. The pandemic robbed them of this source of income. A rapid

16 https://www.ohchr.org/documents/issues/women/WG/PublicPoliticalLife/IDSN_2.pdf
assessment conducted by the Feminist Dalit Organisation (FEDO) revealed that most of the Dalit women had no source of income and were facing problems due to food scarcity. Relief packages could not be easily accessed by the communities due to the distance of their settlements from distribution points and patchy information sharing.

Despite knowledge of the pre-existing vulnerabilities of the Dalit communities and women in particular, the government relief packages did little to meet their basic needs during protracted lockdowns. The impact was particularly serious for women with disabilities and families of working women with members living with disabilities. Other socio-economic stimulus packages were introduced, but they made no additional provision for the needs of Dalit women and vulnerable groups who suffered disproportionately as a result.

**Threat of hunger looms large for a woman with disabilities during the pandemic**

In the small Dalit settlement on the banks of the Tinau river of the Satyawati area, Tara Pariyar lives in a one-room cottage with her five family members. She has been worrying more about her daughters than herself during lockdown. Ms. Pariyar used to do tailoring and her husband got his daily wages in the construction sector, but now, they have both lost their incomes due to lockdown. Ms. Pariyar is pregnant and they worry about putting food on the table. Ms. Pariyar has a daughter with an intellectual disability who needs continual personal assistance. It has been very challenging when she asks for food. Ms. Pariyar, with tears in her eyes, says that her daughter asks for food the whole day: she doesn’t know there is lockdown. Nine months pregnant Ms. Pariyar is also suffers from asthma. She has also been diagnosed as deficient in necessary nutrients along with pneumonia. The precariousness caused by lockdown has meant that hunger poses a greater threat to their lives than COVID-19 itself. 17

Socio-economically deprived and landless, Dalits with disabilities are at great risk of hunger and starvation owing to the multiple barriers they face in accessing basic services. Due to the lack of disaggregated data on persons with disabilities, local governments did not have concrete plans on how to support them during lockdown.

Cases of caste and gender-based violence continued to soar during the pandemic. In a study conducted by the Samata Foundation, 56 cases of caste-based discrimination were reported during the three-month lockdown period. Among them, eight incidents of caste-based discrimination occurred in the quarantine centres. A Dalit woman was beaten up by a ward chairperson during relief collection in Mahottari district in Nepal. Similarly, Kalpana Nagari and Kalawati Audi, two Dalit women from the Godavari Municipality faced discrimination as their relatives tested positive for COVID-19 after returning from India (Paudal & Nikarthil, 2020).

The KIOS Foundation reported that during lockdown, the police administration offices were negligent in registering the cases of caste-based discrimination and gender-based violence against Dalit women. On 23 May 2020, the body of a 12-year-old Dalit girl was found hanging from a tree, a day after community leaders in Rupandehi district had ordered a 25-year-old man of a different caste, who had raped her, to marry her as his “punishment”. Instead of imprisoning the rapist, the community leaders made a decision to let him marry her. Some cases of rape and discrimination have also been registered by Feminist Dalit Organisation (FEDO).18

**Bangladesh** has approximately 6.5 million DWD groups belonging to over 80 communities, identified as such by their occupations.19 The caste-based system persists despite

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Bangladesh’s constitutional prohibition of discrimination based on caste (articles 27 and 28 establish principles of equality for all citizens). According to a survey by Nagorik Uddyog in June 2020, 179 people (Men-118, Women-56, Children-5) from DWD communities were COVID-19 positive, out of whom nine persons died (Hossain, 2020). As in other countries in the region, DWD communities in Bangladesh undertake the traditionally ‘passed-on’ unclean jobs in urban areas, such as street sweeping, manual scavenging and burying the dead. They live in congested colonies, slums or informal settlements with limited access to basic services. They lost their livelihoods instantaneously with the imposition of the lockdown. The government announced direct cash assistance to informal sector workers and a direct cash grant of BDT 2,500 ($30) for 5 million poor families. However, the number of Dalits beneficiaries is not known, let alone how many Dalit women were reached by this aid.

Caste discrimination affects both the Hindu and the Muslim populations in Bangladesh and perpetuates the poverty trap the population is caught in. Dalit girls and women in Bangladesh often fall victim to prostitution and are trafficked as bonded labour. Despite women’s ‘pre-existing vulnerabilities and risks caused by poverty and lack of social security, they did not qualify for any special or additional measures.

According to the International Federation of Human Rights, the number of rapes of women and children (i.e. girls below the age of 18) increased during the COVID-19 pandemic in Bangladesh. The Odhikar organisation reports that between January and September 2020, a total of 919 women and children were victims of rape, 325 of whom were women and 569 children.

When the government announced a “general holiday” (its term for lockdown), many workers lost their jobs. Consequent economic hardship together with living in cramped accommodation intensified frustrations and tempers which resulted in violence against women and girls.

India put in place the Disaster Management Act to contain the spread of the virus and provide immediate food and shelter relief from the state and national disaster funds. The inclusion assessment of the COVID-19 relief package study, DELAYED & DENIED: Injustice in COVID-19 relief, conducted by the National Campaign on Dalit Human Rights (NCDHR) in India revealed worrying gaps.

For the want of required documents, a sizeable proportion of Dalit and Adivasi (indigenous) communities were not able to access social protection programmes, the conduit for transferring relief assistance to beneficiaries. The assessment covered 21,431 Dalit households and 2,102 Adivasi households spanning eight states.

22 https://idsn.org/countries/bangladesh/#:~:text=The%20estimates%20of%20the%20number,able%20to%20raise%20their%20voices.
The findings of the inclusion assessment relating to Dalit and Adivasi women are summed up as follows.

- 65% of single/widow women households (HHs) were not registered under the Ayushman Bharat to access free testing and treatment for COVID-19.

- 68% of single women/widows were not registered under the Pradhan Mantri Ujjwala Yojana (Free gas refill for 3 months)

- 59% of single/widow women HHs were not registered under the flagship rural employment scheme to receive enhanced wages (of 202 rupees), although 73% of Scheduled Caste (SC) migrant workers are women and 72% of Schedule Tribe (ST) workers are women (Census 2011).

- 83.55% SC workers earn less than INR 5000; and only 11.74% earn between 5,000 and 10,000 rupees.

- 86.53% ST workers earn less than 5,000 rupees.

- 61% of single/widow women HHs are not registered under Pradhan Mantri Jan Dhan Yojana, which provided a cash transfer of 500 rupees for three months to female account holders.

- 52% of single/widow women HHs with children aged between 0 and 6 years had not received the ICDS (Integrated Child Development Service) assistance.

- 30% of single/widow women HHs received a partial quota of free food grains under the national food security programme.

- 12% of the SC and 12% ST HHs had widow pensioners but 68% of the SC and 59% of the ST pension-holders had not received the ex-gratia assistance.
Hunger during the lockdown

Shakuntala, a former manual scavenger, from Chamari village in Bulandsher district of Uttar Pradesh, India, mother of eight children, is visibly dejected when we approached. With many mouths to feed and an asthmatic husband, her situation is desperate during the COVID-19 lockdown. When asked if she got any public assistance during the lockdown, she said she had not, but acknowledged the food support she received from her kind neighbourhood. “Kuch laabh nahi mila hamein, aur bhooka marr rahein hain”, (we are starving as no public relief reached us) she retorts, referring to the acute hunger situation in the house. The support from neighbours could provide occasional meals. Her husband’s condition deteriorated, and she could not seek medical care during the lockdown. “Kuch bhi toh nahi socha sarkar ne hamare liye”, (the government did not consider us at all) she says. And, despite having the ration card she had not received provisions in the last six months, she adds. “Apni pareshani kisko bata de? Jab Sarkara nahi sunti to garib aadmi kya sunengey hamari samasya,” (To whom should we go with our predicament? If the Government does not bother who else would?), she laments.
Some of the social protection schemes of the Government of India, such as Jan Dhan Yojana and Ujjwala Yojana were female targeted. However, most of the schemes were universal in nature and did not provide special or additional assistance to the Dalit and Adivasi communities and women, despite availability of government data on multi-dimensional poverty and deprivation among these groups. It is worth mentioning that some states like Delhi did announce enhanced pensions for Dalits and Adivasi pensioners, including for widows, although not many Dalits reside in urban areas like Delhi.

To add to the misery of Dalits and Adivasi who did not get government relief, the National Dalit Movement for Justice and All India Dalit Mahila Adhikar Manch, the two movements under the aegis of the NCDHR, recorded a sharp rise in caste crimes against the community and Dalit women during the lockdown. Many other cases and reports were recorded and acted on by the civil society members of Dalit Human Rights Defenders Network (Veeraraghav, 2020).

For example, in Vijaywada, a nine-month pregnant Dalit woman who needed to go down 250 steps from her hilltop home to get daily essentials was sent back empty-handed for being a Dalit. A domestic worker in Saharanpur, Uttar Pradesh, was repeatedly beaten up for speaking up when she was denied rations. Several instances of gang rape were reported from across Uttar Pradesh. In one gruesome case, a Dalit woman was kept hostage by five influential people of a village for eight hours on her wedding day and gang-raped several times, while in Hathras district of Uttar Pradesh after being gang raped and murdered by dominant caste men, the body of a 19-year-old girl was cremated by the police without the consent of her family.
Violence against a Dalit widow

In an incident in Uttar Pradesh’s Saharanpur, Mamta, a 44-year-old Dalit domestic worker, was reportedly beaten up badly when she spoke up when denied rations that were supposed to be distributed among all the residents of Abhishek Nagar. Mamta, a widow and mother of two sons, one of whom is physically challenged, has blamed the area’s Councillor for the incident. According to Mamta, on the night of 3rd April, she had sent her son to collect rations when she heard that the ward councillor’s husband, along with a few other people, were distributing rations in their locality. She said her son came back empty-handed, after which she accompanied him back and faced a barrage of casteist remarks: “Tum logon ne hame vote nahi diya, hum tumhe ration nahi denge. Ye tumhare liye nhi ayya” (You people did not vote for us, so we will not give you rations). Mamta said when she questioned them and demanded that she be treated equally and with respect, she was rebuked with derogatory casteist slurs. Soon the verbal abuse turned into physical assault. Mamta is among 400 residents who were reportedly denied rations that were being distributed by the councillor’s husband and brother-in-law.28

16.2% of the population of India is Dalit, and 8.2% are Adivasi. There are 97.9 million Dalit females and 103.5 million males; there are 51.9 million Adivasi females and 52.4 million males (Population Census 2011). India’s Constitution outlawed ‘untouchability’ in 1948, and made it a punishable offence under various subsequent laws.

However, despite the existence of targeted policy and programmes of the government and affirmative action in support of the welfare and development of Dalits and Adivasi, practically speaking, those responsible for attacks on Dalits still enjoy impunity, while Dalit and Adivasi poverty has increased alongside newer forms of caste discrimination, the existence of systemic loopholes and tolerance of caste crimes. Meanwhile Dalits and Adivasi remain trapped in historical and intergenerational multifaceted poverty.

As for migrants, the migrant crisis was exacerbated by the national lockdown which violated the right to life with dignity of millions of migrant workers. A staggering 77% of India’s workforce (three out four workers) falls under the category of vulnerable employment (World Bank, 2019). Seasonal migrants – workers who migrate temporarily are one of the largest and most vulnerable workforces of India. The figures for seasonal migrants vary from 15.2 million to 55 million.

28 https://www.newsclick.in/COVID-19-Dalit-Woman-Beaten-Denied-Rations-Saharanpur
They are largely driven by poverty and distress, with the majority being landless, or small-scale and marginal farmers who have no livelihood opportunities post-harvest. 23.1% and 18.6% of seasonal migrants come from the Dalit and Adivasi communities respectively. They have little education, and minimal or no assets. The vulnerability of migrants is compounded by their caste identity, as the majority belong to categories such as Other Backward Castes, Scheduled Castes and Adivasi, because caste determines wealth, income and remittance level. (Venugopal, J, Samuel, & Kidwai, 2020)

Women are particularly affected as they are often responsible for getting food and water. Some migrant returnees said they wait for hours at the village tap because dominant caste families get access first.

No work for a Dalit family back in the village

In Aston village, in the central state of Madhya Pradesh, Krishna Ahirwar, 22, returned from New Delhi along with her husband and toddler and is staying in a separate locality where Dalits have historically lived. Landless, with no ration card -- the government document required to get food aid – she has found it hard to secure food. “We are thinking about whether to go back to the city,” Ahirwar said.

The situation during the pandemic of the Roma people, the DWD communities in Europe, is of real concern. They experience discrimination and stigmatisation that is largely unrecognised by global human rights discourse and practice. The Roma people are subjected to antigypsyism which can be manifested in anti-Roma attitudes, prevalent negative stereotyping in the public sphere and hate speech (Nikarthil, 2019).

The situation of vulnerability and inequality affecting the Roma population was already alarming before the COVID-19 crisis. A study of the Roma population in Spain in 2018 on their employment and poverty found that poverty and social exclusion affected more than 80% of Roma people, with 46% living in extreme poverty. More than 9,000 Roma families in Spain were found to live in substandard housing which does not meet basic standards of habitability.

The unemployment rate was as high as 52% (more than three times the rate of 14.5% found in the general population). Roma women were at a clear disadvantage, with an employment rate of only 16%. As street vending is the most prevalent form of work for Roma people, and 47% are self-employed, they have been very hard hit by lockdowns. Only 32% of very poor Roma households receive social welfare payments (Impact of the COVID-19 Crisis on Roma Population, 2020). It has not been possible accurately to gauge the burden of COVID 19 impacts on Roma men and women and their access to health services as these data are unavailable.

A European Union study on the gendered impact of COVID-19 observed that disruption and restrictions to reproductive health services would affect some communities more than others, including women living in poverty, women with disabilities, Roma women, undocumented migrant women, adolescents, transgender people, and women at risk of or who are survivors of domestic and sexual violence. For example, in Bulgaria, Romania and Serbia, projects supporting the sexual and reproductive health of Roma girls and women have been suspended (WENHAM, 2020).

A report of the Council of Europe (2020) noted the continuing hate speech, discrimination, and stigmatization against minority groups, especially Roma communities, throughout the pandemic (Marsal, Ahlund, & Wilson, 2020).
Section 3

Latin America

In Brazil, South America, COVID-19 has ravaged the Quilombola communities, exacerbating the ongoing impacts on them of pollution, encroachment and lack of public health services. Quilombolas are the descendants of African slaves who settled in remote parts of Brazil to flee their oppressors in the 1500s. Quilombolas are found throughout Brazil, including vast stretches of the Amazon basin. Their geographical and historical vulnerabilities are not included in government statistics, a failure which has led to the absence of targeted policy and programs to address their rights and needs. Lack of recognition has deprived them of basic human amenities of transport road, water, electricity, telephone or health services, while at the same time they face existential threats from ranchers, miners and loggers.

In July 2020, the federal government passed a law intended to protect indigenous and Quilombola communities during the pandemic, but it did not guarantee them access to drinking water, hygiene materials, hospital beds and mechanical ventilators. Despite the urgency, this delay and failure by the state to take action resulted in a thousand Quilombola deaths. There are few official data on COVID-19 infections and deaths but some estimates put the mortality rate among the Quilombolas at four times the national average. This has resulted in the Quilombolas being made a priority for vaccination, a topic which is part of the larger struggle to manage Covid 19 in Brazil.

Non availability of Medicare for COVID patients

Sonia Castro says her family stayed in self-isolation for two months in the Jambuaçu territory in Brazil’s Pará state. She recounts how they eventually fell ill, their condition worsening bit by bit without proper medical attention. “We were staying in our house in isolation. As their health condition got worse, I had to call an ambulance, and we were shifted to Belém, the state capital,” explains Castro. The other residents of her community feared they would be infected with COVID-19. Because of that, Castro says, she had to collect her children by motorboat – they were waiting on a bridge apart from the community. This daunting journey was meant to prevent interaction with others. “I was desperate, because I thought that I would lose my children and I felt I was being discriminated against because of the virus. “The worst part is there was no hospital bed available for a positive patient, nor an ambulance, and as a result people died. We live in a rural place, it’s easy to get fruit, get some açaí and prepare some tapioca flour in the place where it’s made, and that way we can survive. But with the virus, if we don’t get government help, we won’t survive.” Said Castro

Globally the communities subjected to discrimination based on Work and Descent have been especially affected by COVID-19, due to their marginalisation, exclusion, pre-existing vulnerabilities, fragile livelihoods and poor access to social security. DWD women engaged in casual labour and unpaid care jobs have been severely affected. In most regions or countries, governments have not made any special provision for DWD women’s health, safety, protection or income support.

DWD communities and DWD women are struggling for their dignified right to life and decent livelihoods, healthcare, freedom from violence and social security. Governments have responded with temporary increases in spending on social protection during COVID-19, but they must now make permanent to give protection to marginalised communities. A long term COVID-19 recovery plan that is based on social justice, equity and rights based-approach is vital for inclusive and resilient communities.
The following are key recommendations:

- Governments must recognize and record the population of DWD communities disaggregated by gender, age, disability status and economic status.

- Governments must collect and report on cases of COVID-19, hospitalisations, recovery, deaths and vaccinations among the DWD communities, disaggregated by social group, age, sex, disability, along the lines modelled by the US ‘Racial Data Transparency’ in order to document how public health challenges affect different groups differently to put in place tailored policy measures. \(^{31}\)

- Adequate budgetary allocations must be put in place by governments to ensure that marginalized women’s health and education are given priority during epidemics and pandemics.

- There must be finance for long-term recovery plans, with special and additional measures for income generation and security, and social protection of DWD communities in low-income and lower-middle income countries.

- Governments must ratify the ILO Conventions and Protocols relating to migrant workers, indigenous people, wage protection, domestic workers, health provisions for workers etc., and adopt and adapt national policies, legislation, programmes and budgets accordingly.

- Policy and legislation to address exclusion, discrimination and violence against DWD communities during disasters – including epidemics and pandemics – must be enacted.

- The numbers and circumstances of migrant and casual workers must be recorded and measures put in place to ensure they are covered by social protection schemes.

- Governments must support the strengthening of labour organizations and associations (trade unions) that monitor labour standards and wages, nutritional needs and social security entitlements – especially in countries where labour laws have been relaxed after lockdowns have been lifted or where there is insufficient legal protection for women workers.

- Governments must put finance in place for programmes targeted at the long-term COVID-19 recovery of DWD communities in the informal sector and ensure healthcare facilities and workplace protection for all women workers.

- Governments must monitor the implementation of labour laws and conditions of workers both in the regulated and unregulated sectors, and put in place mechanisms to ensure the timely adjudication of grievances.

- Governments must put in place mechanisms to prevent and act on violence against DWD women and ensure they have access to judicial redress.

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\(^{31}\) [https://coronavirus.jhu.edu/data/racial-data-transparency](https://coronavirus.jhu.edu/data/racial-data-transparency)
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