Towards a better response to Internal Labour Migration in India

Key Recommendations for the 12th Plan

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Labour migration: An overview

- 30% of the population or 309 million people were classified as migrants . (Census 2001) ; However, these data do not tell us how many people migrate on a temporary basis
- Both NSS and Census data are likely to provide serious underestimates given the difficulty in interviewing mobile population.
- This trend also highlights increase in migration among women (both with their families and independently), making it a significant proportion of migration flows.
- Of the 309 million migrants, 218 million are females of which 90% were interstate migrants as compared to only 21% of males being interstate migrants.

Labour migration: An overview

- Among male interstate migrants, rural to urban accounted for 47% of migration while for female interstate migrants 36% moved from rural to rural areas
- Migration is on the rise with 226 million migrants being in 1991 census and 309 million migrants being in 2001 census (increase of 36.7% in a decade)
- Much of the migration is concentrated around northern Indian states with UP leading as a destination followed by Delhi, West Bengal, Tamil Nadu and Rajasthan
- Delhi leads as a destination for rural to urban (followed by MH, UP, HR, AP) and urban to urban migration (followed by UP, MH, WB and KA)
- MH, GJ, AP and KA have significant migration into urban areas

Migration: Key Statistics

572,254

Surveyed Population

NSS 2007-08

30%

Migrants

Intra-State **85%**

Across-States **15%**

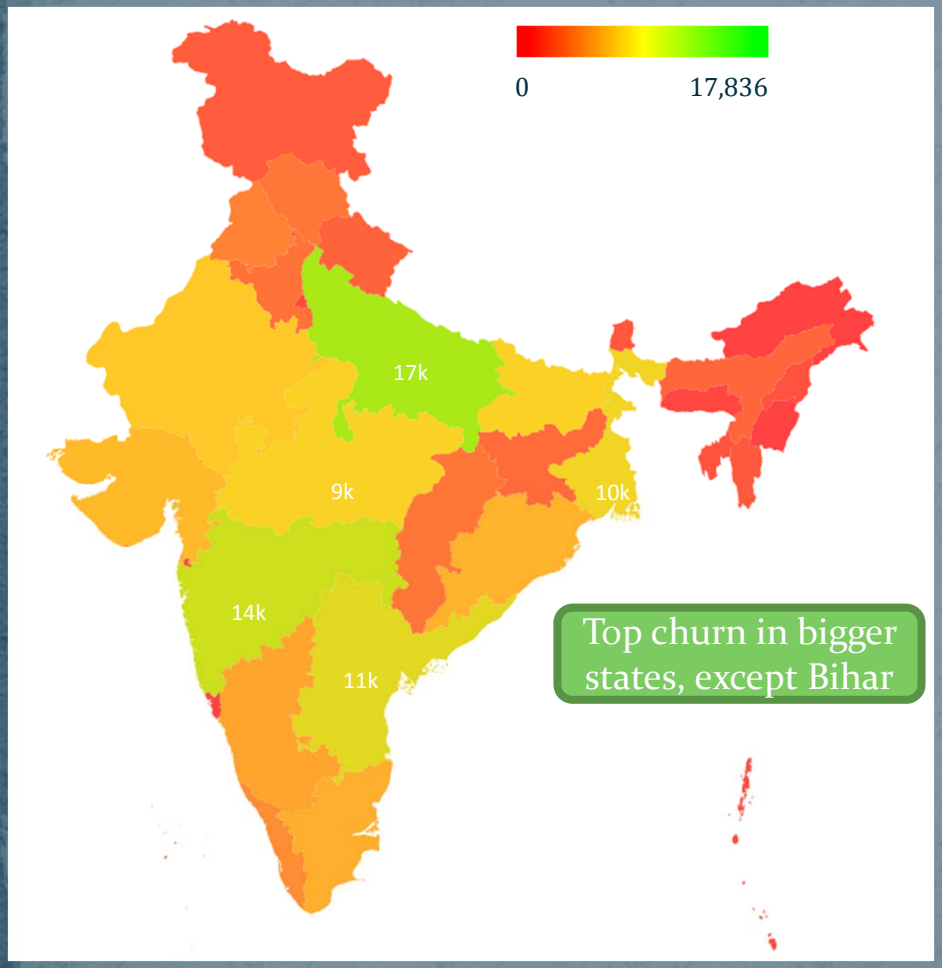
Geographic Distribution of Intra-State movement

Inbound vs. Outbound pattern across States

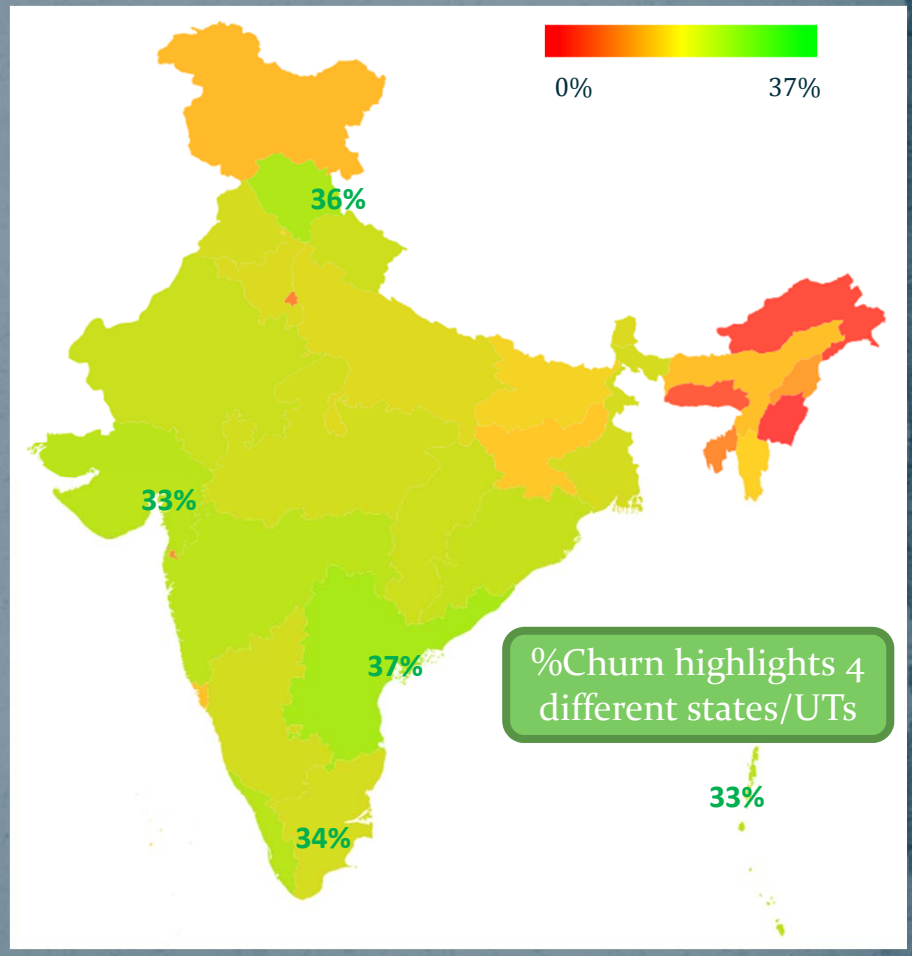
Migration between Rural and Urban regions

Intra-State migration Patterns

Number of migrants moving within each of the States…



…in absolute numbers



…as a % of state's survey size

Source: Asia Analytics lab, Indian School of Business and Gramener

Migration across **Rural Areas** is significant!

..followed by migration **to Urban** Areas..

..**Reverse migration** from Urban to Rural is rare!

Union Territories **buck this trend**, again! ..along with some North-Eastern states

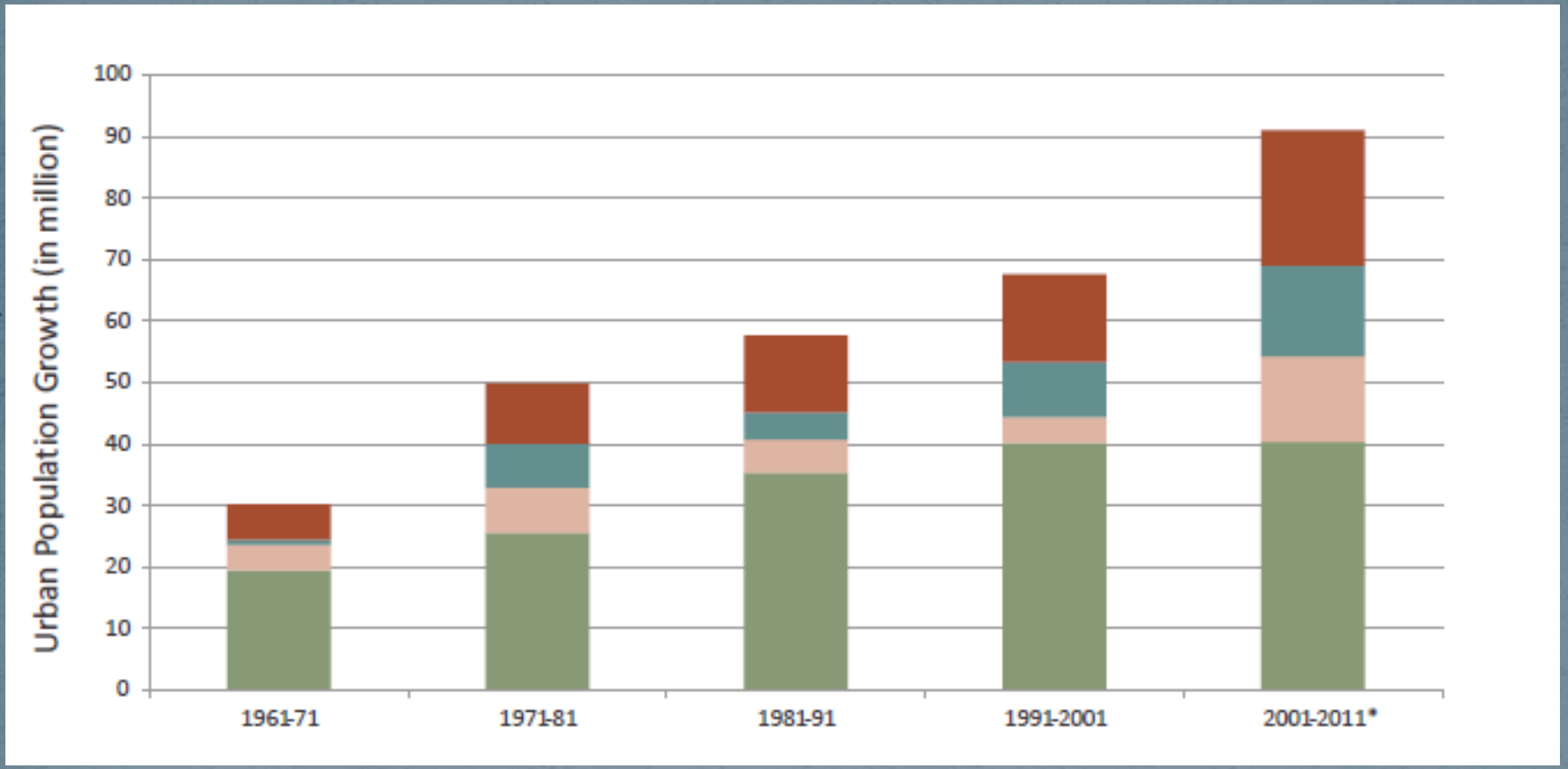
Source: Asia Analytics lab, Indian School of Business and Gramener

State migrated to	Rural-to-Rural	Rural-to-Urban	Urban-to-Urban	Urban-to-Rural
INDIA	53%	24%	16%	6%
Bihar	71%	17%	7%	5%
Sikkim	69%	12%	9%	10%
Tripura	66%	19%	11%	4%
Himachal Pradesh	65%	19%	8%	7%
Uttar Pradesh	65%	18%	12%	5%
Orissa	65%	22%	9%	4%
Rajasthan	60%	21%	13%	6%
Madhya Pradesh	57%	21%	18%	5%
Jharkhand	57%	22%	18%	3%
West Bengal	56%	22%	18%	4%
Chhattisgarh	56%	23%	13%	8%
Kerala	55%	22%	12%	11%
Andhra Pradesh	53%	28%	13%	6%
Assam	51%	29%	15%	5%
Haryana	50%	25%	17%	7%
Punjab	50%	20%	23%	7%
Uttaranchal	50%	22%	20%	7%
Andaman & N Islands	50%	31%	11%	9%
Karnataka	48%	26%	21%	6%
Meghalaya	46%	20%	20%	15%
Dadra & Nagar Haveli	45%	39%	14%	2%
Gujarat	45%	29%	21%	6%
Jammu & Kashmir	45%	33%	16%	6%
Maharashtra	42%	29%	23%	6%
Tamil Nadu	40%	30%	21%	9%
Daman & Diu	40%	26%	18%	16%
Manipur	39%	18%	15%	28%
Nagaland	27%	24%	21%	27%
Mizoram	26%	38%	30%	6%
Goa	23%	47%	25%	6%
Arunachal Pradesh	22%	37%	24%	17%
Pondicherry	20%	43%	32%	6%
Lakshadweep	18%	31%	28%	23%
Chandigarh	14%	39%	44%	3%
Delhi	6%	54%	37%	3%

A word on rural to urban migration

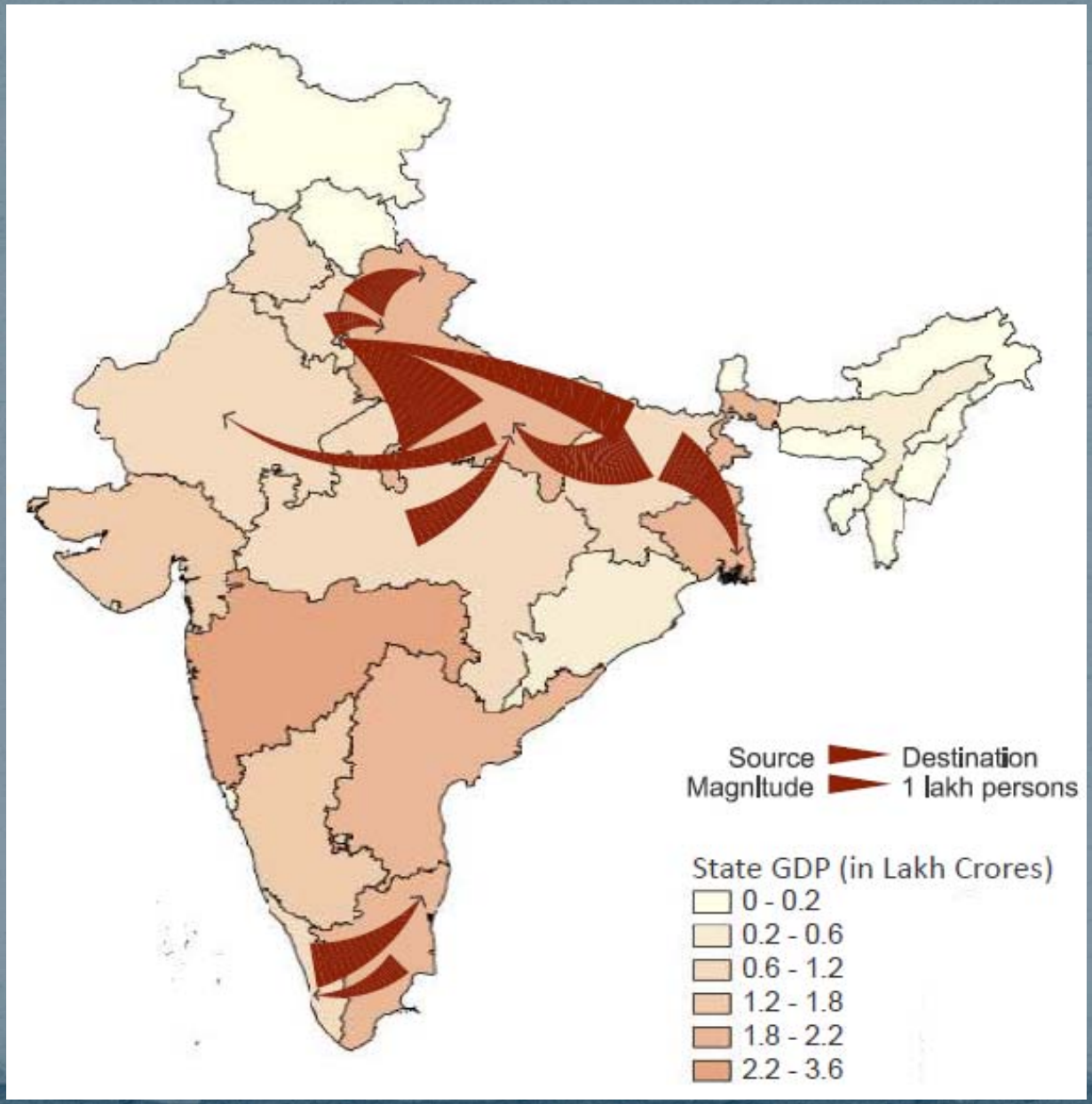
- India's present urban population is around 350 million which is expected to grow up to 800 million by 2050
- India will be increasingly living in cities and more than two-thirds of India's economic output will be from urban areas
- These numbers indicate that migration is here to stay and is going to increase exponentially in coming years with continued development
- This will have huge impact on India's society, culture, politics and natural and built environment
- If we wish to continue on our path of developing into a strong, vibrant, sustainable democracy we should make our urban planning migrant friendly and inclusive

Components of urban population growth



Source: IIHS analysis based on 2011 census, NSS 64th round, and Sivaramakrishnan, Kundu, Singh (2005) SRS, Vol.45, No.1, 2011

Largest interstate migrations



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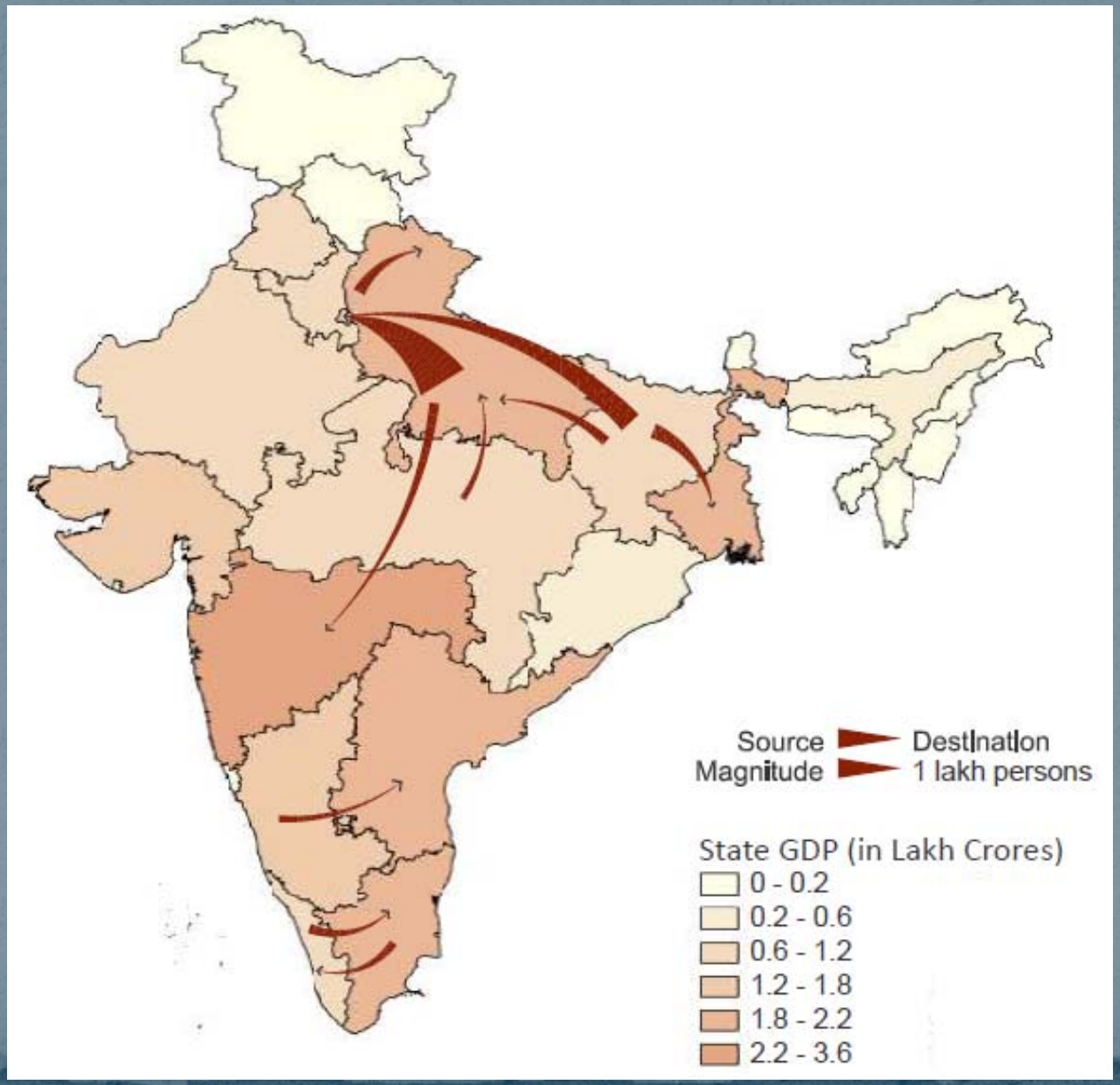
Major rural to urban interstate migration



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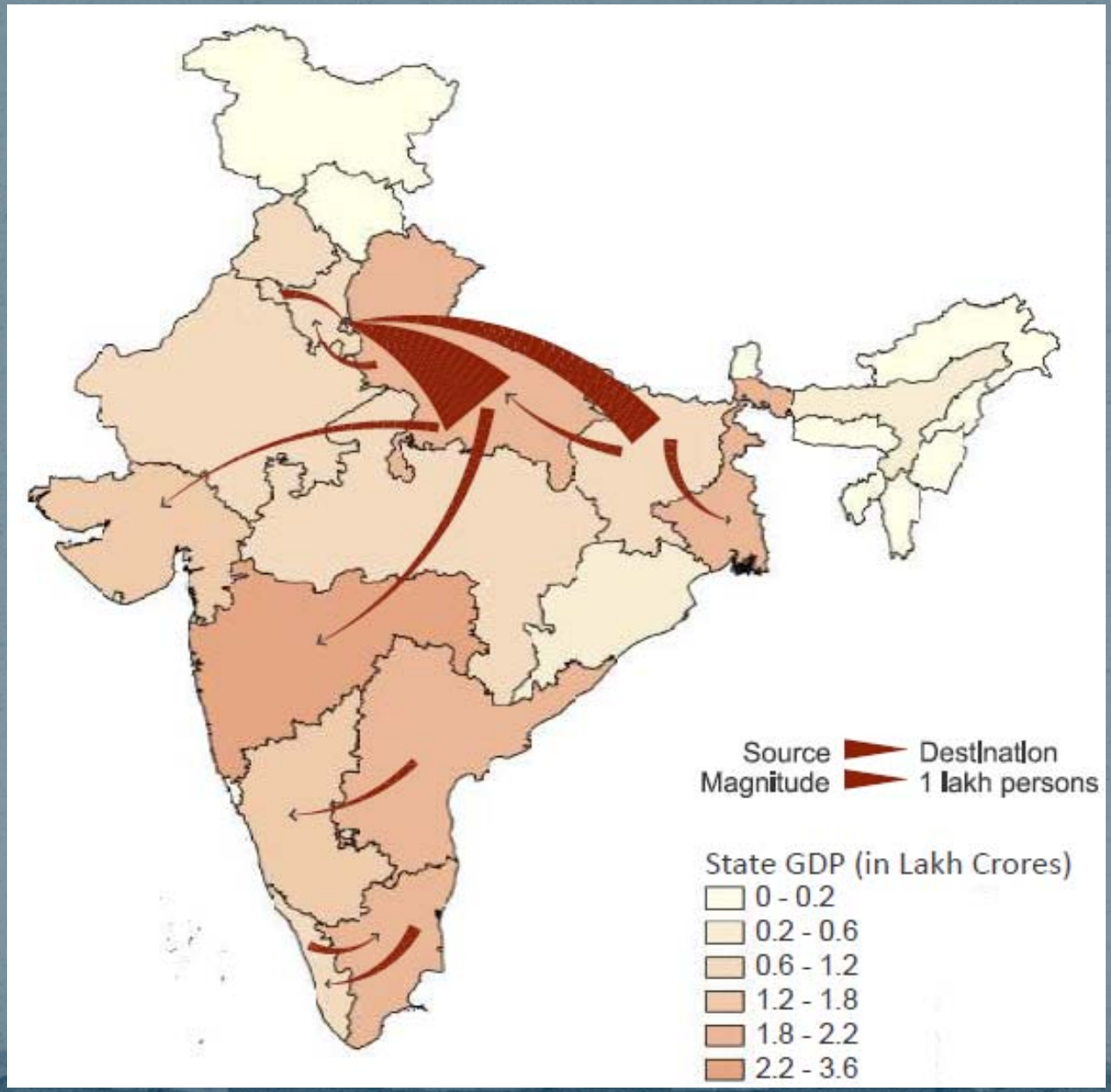
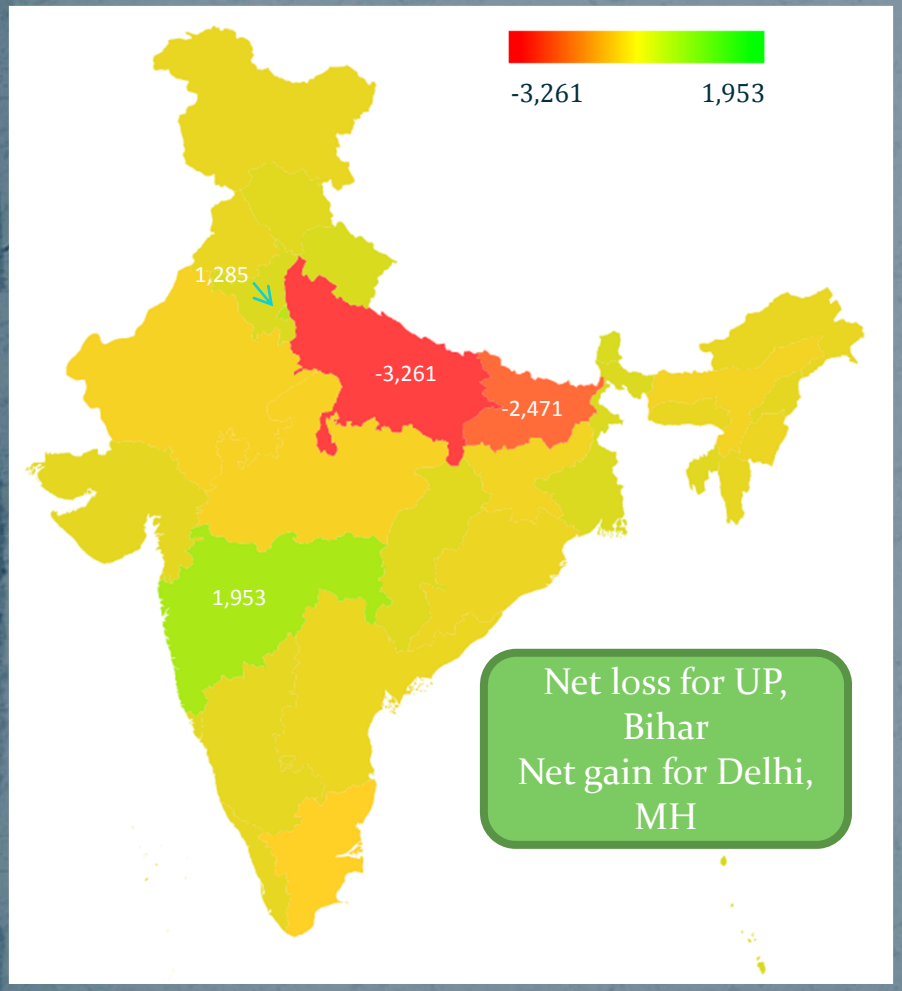
Major urban to urban interstate migration



Source: IIHS analysis based on 2011 census, NSS 64th round, and Sivaramakrishnan, Kundu, Singh (2005) SRS, Vol.45, No.1, 2011

Inter-State migration: Net Gain/Loss View

Net Inflow (i.e Inbound – Outbound) of migrants into each State…



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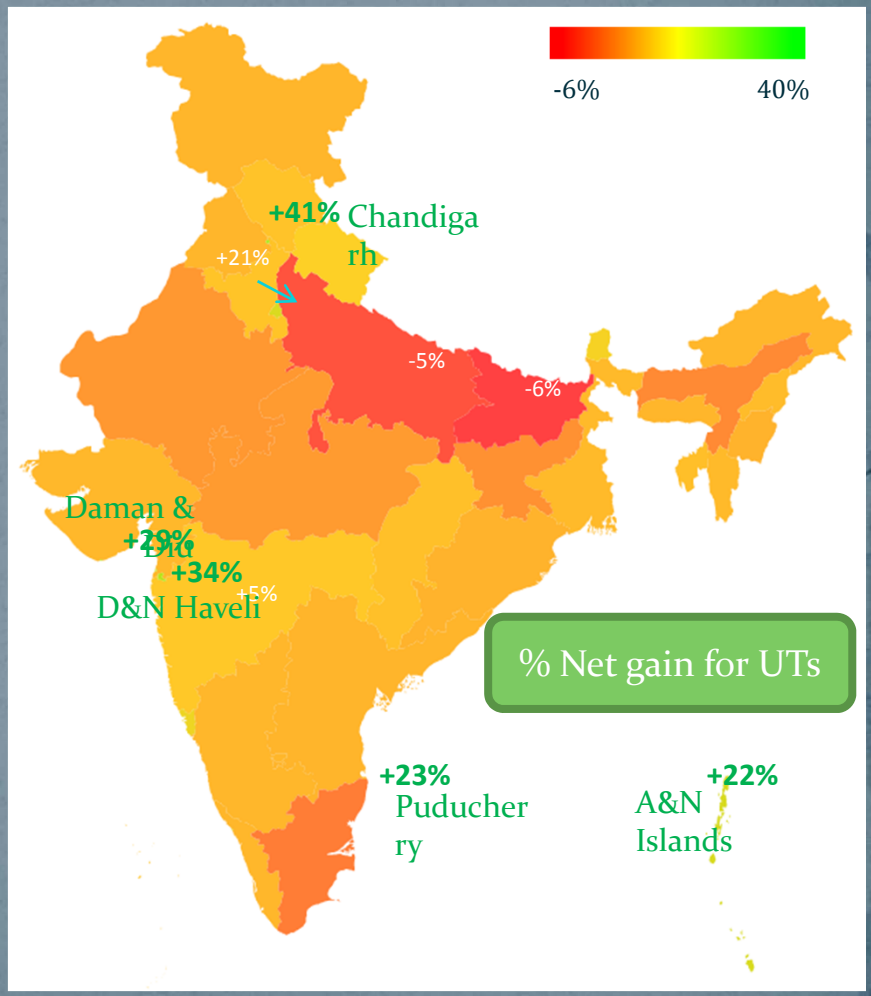


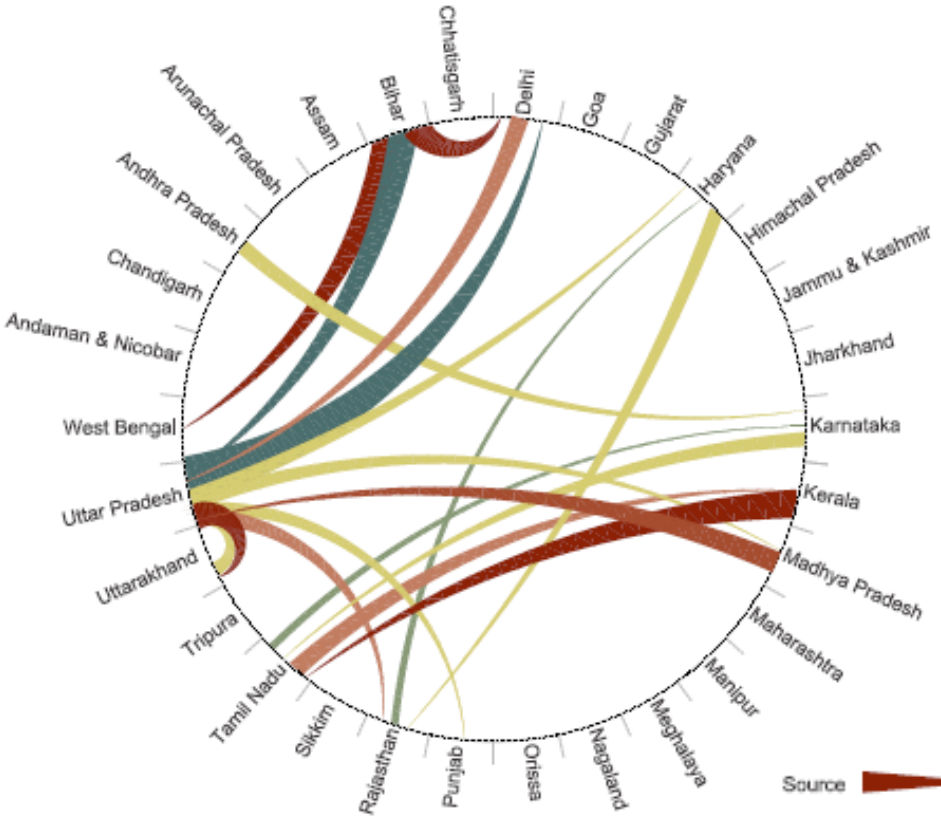
…as a % of state's survey size

(rescaled)

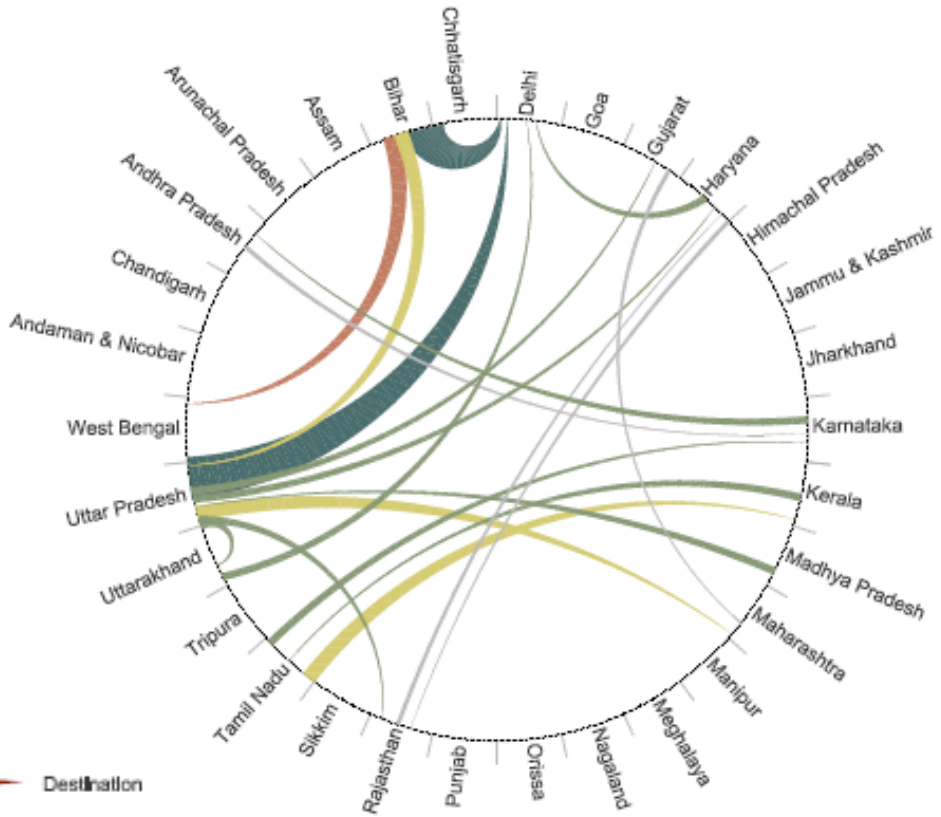
Source: Asia Analytics lab, Indian School of Business and Gramener

Top migration streams

Estimated top 50% of Total Migration



Estimated top 50% of Migration into Urban areas



Source: IIHS analysis based on 2011 census, NSS 64th round, and Sivaramakrishnan, Kundu, Singh (2005) SRS, Vol.45, No.1, 2011

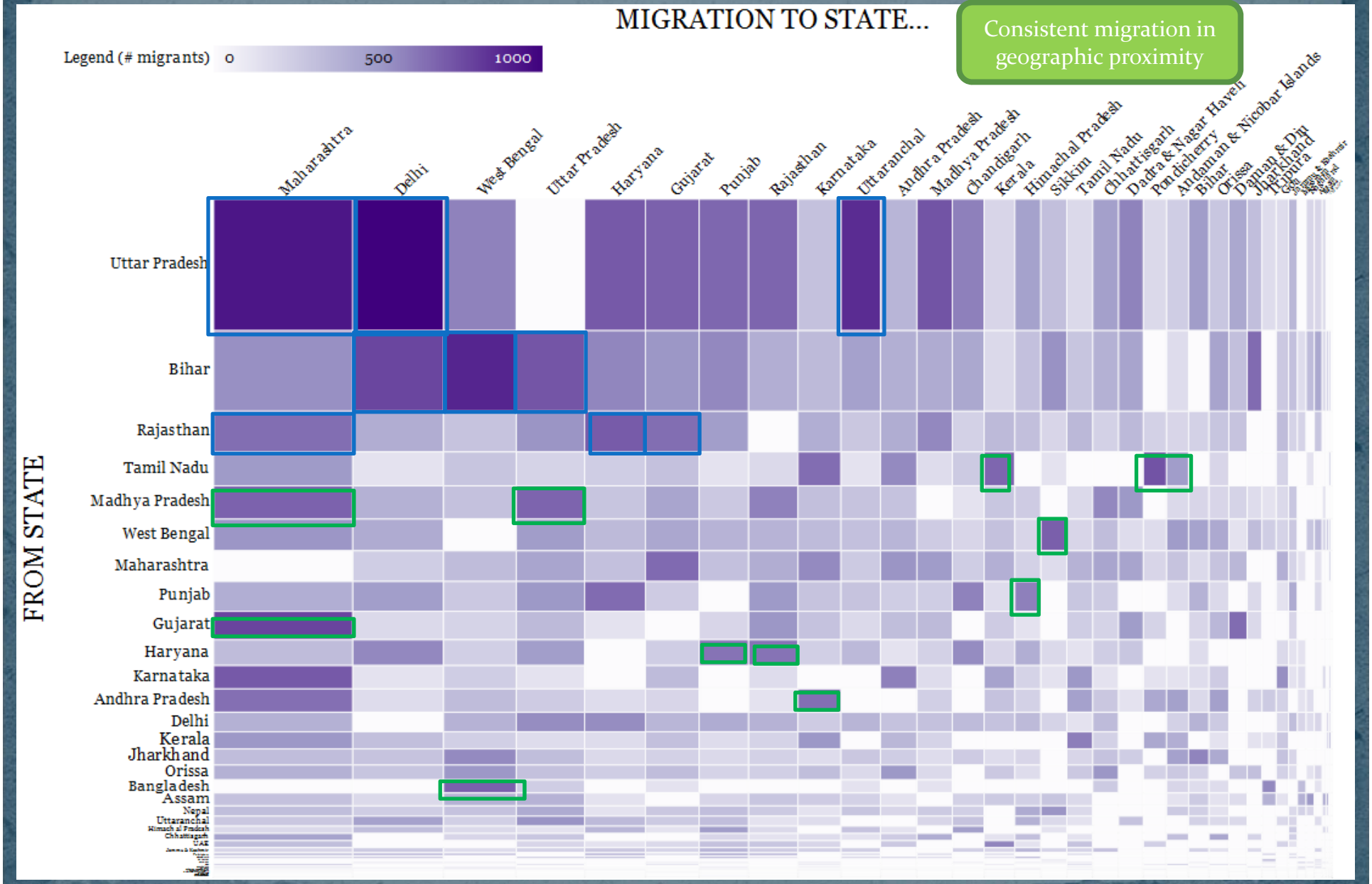
Source Destination

- 60,000 or less persons
- 60,000 - 100,000 persons
- 100,000 - 120,000 persons
- 120,000 - 150,000 persons
- 150,000 - 200,000 persons
- 200,000 - 300,000 persons
- More than 300,000 persons

Inter-State migration: States Heat-map

Top destinations for UP, BH, RJ migrants

Consistent migration in geographic proximity



Source: Asia Analytics lab, Indian School of Business and Gramener

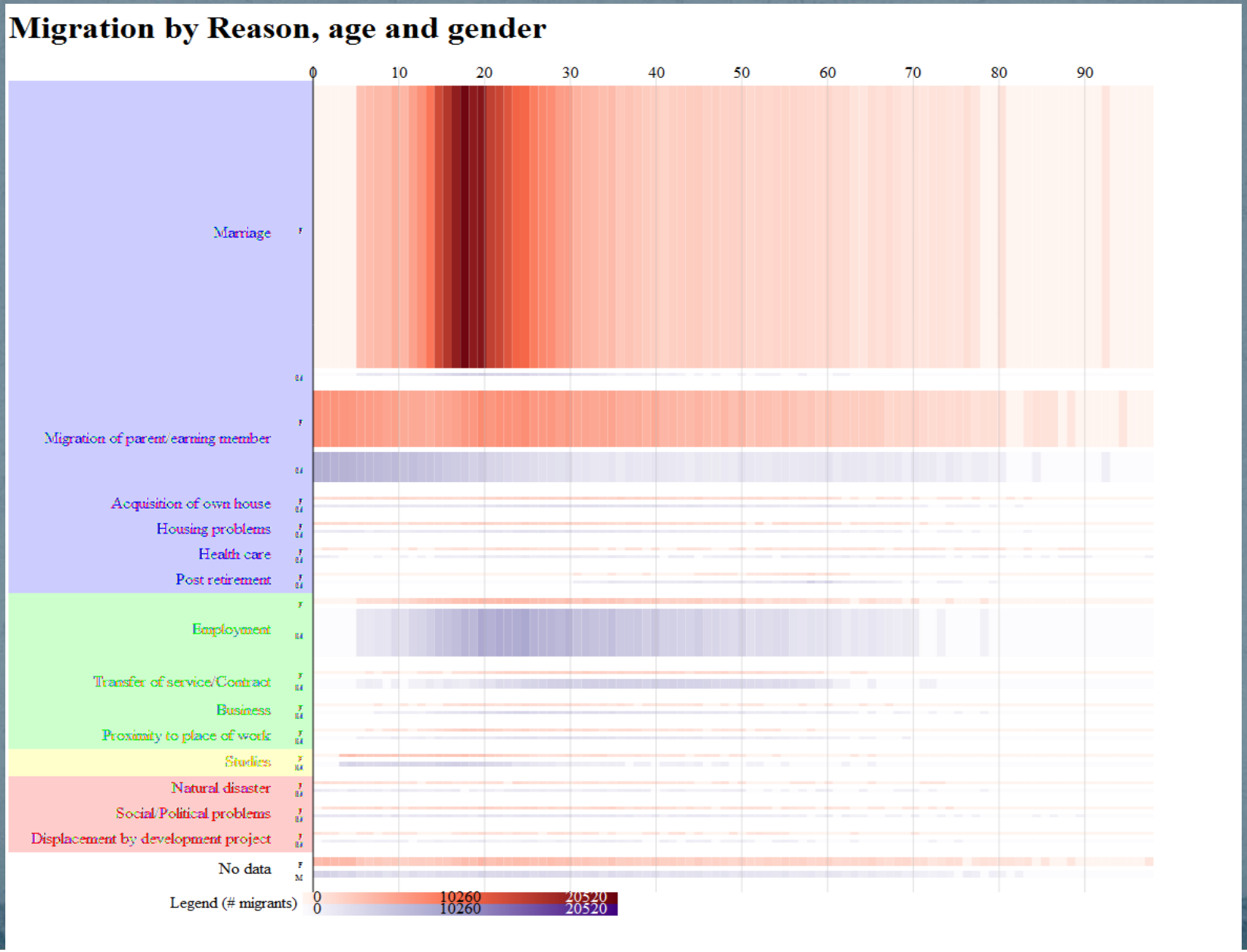
Internal Migration in India – Migrant workers

- Migration main exit from poverty; Migration and Revenue - studies
- Principal and *preferred* means of labour recruitment
- Economic growth hinges on mobility of labour
- Magnitude ~ 100 million migrant workers/wage labourers

Causes of migration

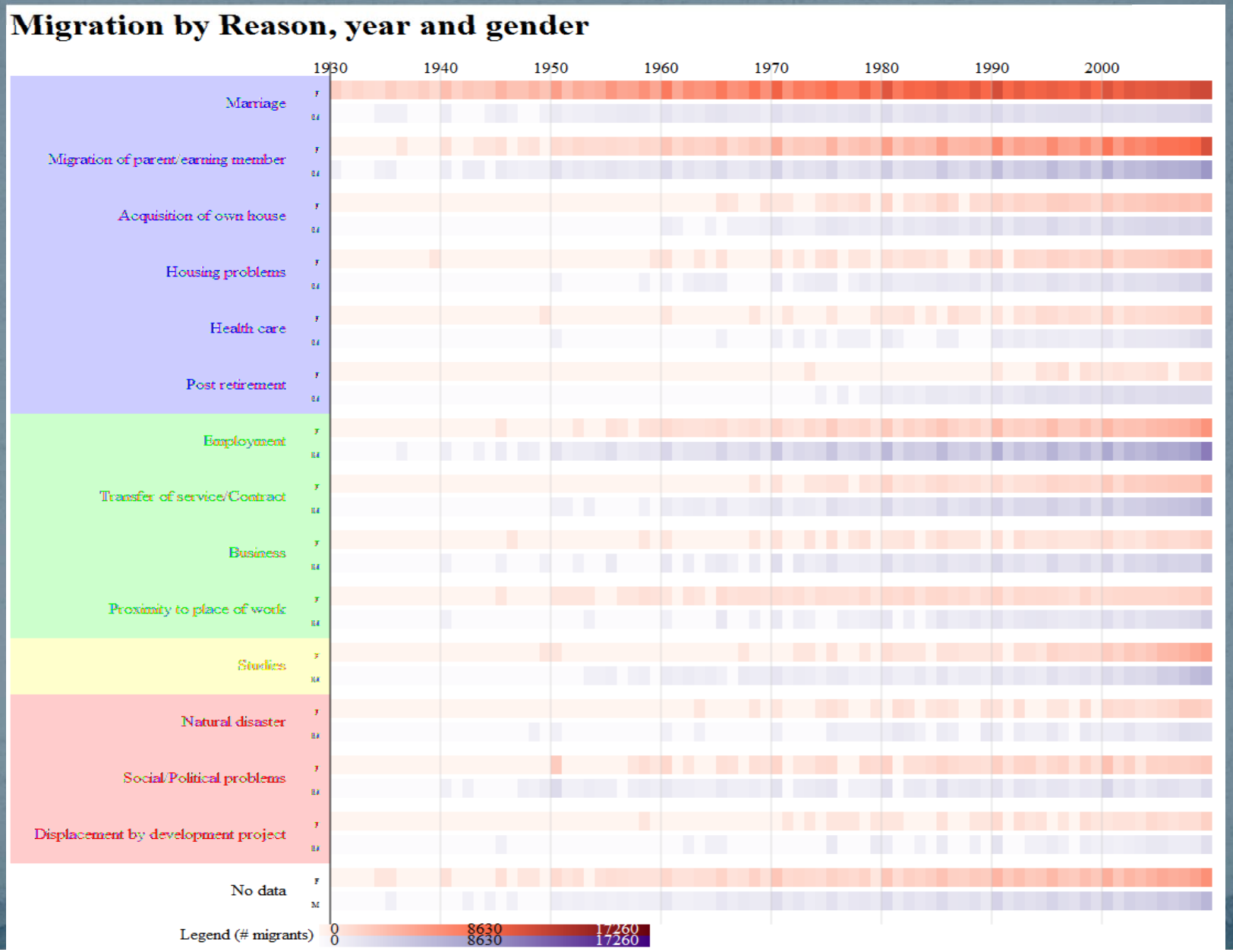
- Landlessness
- Lack of sufficient water for agriculture
- Agriculture and allied activities are unable to make sustained contribution to the livelihood of the rural poor
- Lower wages of daily Labour at Source
- Advance /debts
- Comparatively better wages and employment opportunities in cities
- Attraction of City Life
- Major survival strategy

Causes of migration - The major reason for women to migrate is due to marriage and for men it is search for better employment/transfer



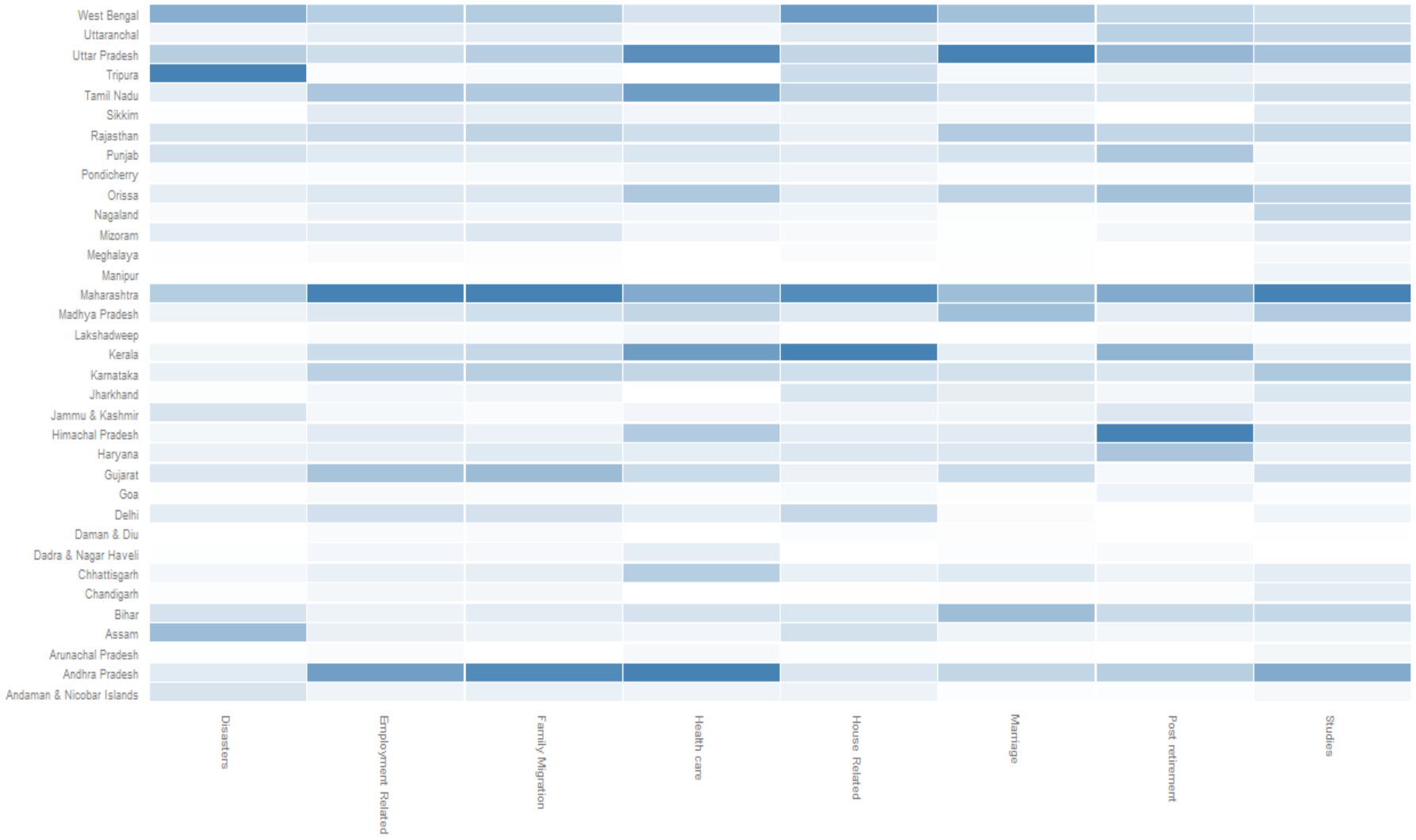
Source: Asia Analytics lab, Indian School of Business and Gramener

Changes in causes of migration with time - Gradually increasing / changing with evolving economic conditions



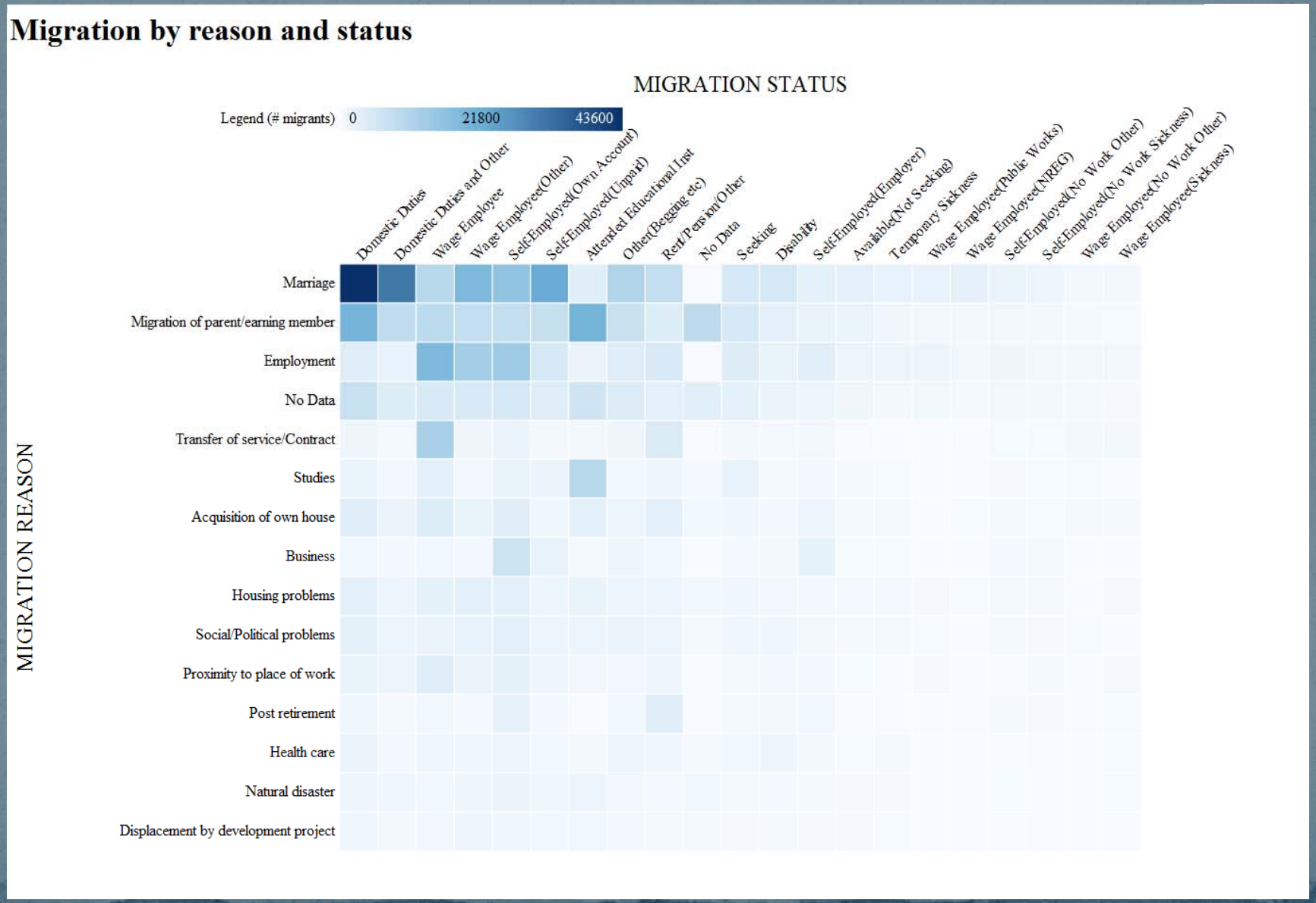
Source: Asia Analytics lab, Indian School of Business and Gramener

Causes differ by state - people in Tripura migrate mostly because of Forced Reasons, whereas the most dominant reason in UP is Marriage!



Source: Asia Analytics lab, Indian School of Business and Gramener

Women who marry and migrate are involved in domestic duties, while men who migrate are employed as wage employees.



Source: Asia Analytics lab, Indian School of Business and Gramener

Sectors of migrants

- According to NCRL, a large number of migrants are employed in below sectors, which have shown an increase in employing both men and women
- Cultivation and plantations,
- Brick-kilns, quarries, construction sites
- Fish processing.
- Urban informal manufacturing construction Services or transport sectors and are employed as casual laborers, Head loaders
- Hotel and tourism industry
- Rickshaw pullers and hawkers.
- Certain types of work such as construction, transport, hotel, domestic work, sex work, work in garment manufacturing and seafood processing, has shown a marked increase in engaging migrants

Vulnerability of Migrants

Majority of poor migrants work in the informal sector where:

- Working conditions are often dirty, dangerous and degrading;
- Wage rates are poor; with job insecurity and without written contracts;
- Working hours are long and access to formal social security is limited or non-existent
- Non-availability of basic sanitation and crèche facilities (Borhade 2007, Deshingkar and Farrington 2009).
- Migrants are mainly illiterate and are unaware of their rights and entitlements under law. They are frequently exploited – overworked and underpaid – by agents and contractors. Even those who freelance rarely earn a minimum wage and this is especially true for migrant women.
- While men's wages have increased recently, women's wages have remained low. Men = $4/5, Women= $2

Vulnerability of migrants

- Migrants are usually employed in jobs that are labeled as "light" but are in fact as difficult as the jobs done by men
- The risk of accidents and exposure to hazardous chemicals and disease is high and in the absence of accessible social protection
- Lack of information and access to health services pertaining to contraception, pre and post natal care leads to poor SRH
- Poor families face the risk of worsening poverty if they are unable to work or have to spend on expensive healthcare
- Women migrants are highly vulnerable to sexual abuse and violence at the hands of labor market intermediaries
- They are also routinely paid less than men for equivalent tasks and face extremely hostile working conditions when pregnant or breast-feeding

Common issues of migrants

Lack of identify at the destination cities; absence of ration/voter card.

The legal identity is linked with access to basic rights :

- Right to Education
- Right to food security and Livelihood
- Right to Health
- Right to shelter
- Issues related to financial inclusion

Government Response to Migration

- Migration not understood as development issue (both source and destination)
- Fixed frameworks of programs and policies – leads to systematic exclusion of migrants
- Limited human resource for better coverage of migrants in programs
- India does not have comprehensive policy on internal migration, fragmented polices do exist

Indian Public policy & Internal Migrants

- Missed out in National Statistical surveys
- Unable to exercise their franchise
- Portability of entitlements a serious issue
- Inter State Migrant Worker Act, 1979 – obsolete ,ineffective

Recommendations for Comprehensive Institutional Response to Seasonal internal Migration in India

Migration and Data

Issues	Recommendations	Reference Case	Responsible department
1.Lack of registration & accurate data of migrants.	Concerted efforts are required to address knowledge gap on migration 1. To involve the PRIs to initiate a countrywide documentation of migrant workers moving out of rural areas with the help of the civil society organizations and the labor department can take up a proactive role in supporting this initiative.	• Disha Foundation, Nashik has engaged panchayats and Tribal Department for migration registration and database. •Rajasthan Labor department has initiated such registration through an NGO named Aajeevika Bureau in Southern Rajasthan.	Labour Department Rural Development Ministry Tribal Development Ministry
2. Need of Mapping of Internal Migration	2. To adopt the Census and NSS methodology to capture seasonal and circular migrant populations.		Census and NSSO

Legal Response to Migration

Issue	Recommendations	Reference Case	Responsible department
1.Ineffective Legislation & its implementation	• Re-draft the legislation in keeping with the rising incidence and complexity of inter-state migration.	The Ministry of Labour and employment needs to initiate the process of revising the legislation. In order to contribute to the process, NACSOM would like to highlight specific lacunae in the Act, which need to be addressed	Labour Department
2. Grievance Handling	•Fast track legal response for cases of minimum wage violation, accidents at workplace and abuse	• Disha Foundation •Aide et action, Hyderabad/Odisha	Labour Department

Government Policies & Internal Migrants

Issues	Recommendations	Reference Case	Responsible department
• Lack of effective policies & its implementation	•Inclusion of migrants in construction workers welfare boards at receiving states - *universalization of these boards*	State Government of Delhi, Gujarat, Madhya Pradesh, Rajasthan etc. have formed the welfare boards for construction workers.(Annex)	Planning commission Labour Department
• Lack of proper assistance for migrants	• Setting up of Migrant Resource/Assistance Centers	-Odisha- AP Labour Departments MOU -NACSOM- Such centers are being run in 5 states including UP, Orissa, Maharashtra, Rajasthan, and Gujarat by 23	State Labour departments
• Lack of support system for migrants	•Creation of a national labor helpline: supported by a network of migration resource/assistance centers managed collectively by the labour departments and civil society	Disha Foundation and Maharashtra Labour Department Aajeevika Beaurea	Central Government-Labour Deparment/ IT

Social Security

Issues	**Recommendations**	**Reference Case**	Responsible department
• Lack of social security	•**Universalization of social security for migrant workers:** social security provisions which need to be made sensitive to the realities in which migrant workers operate	Kerala Migrant Welfare Board	Labour Department
Lack of proper implementation of the existing provisions.	**Execution of existing provisions** •More resource to support State Labour Departments: The Labour department needs an urgent infusion of resources both human and capital. - State to state and Central to states co-ordination and resources management for migration governance.	Odisha-AP Bihar initiatives BRLPS Special Commissioner for mgirt workers issues in Delhi	Labour department, State and central government

Food Security

Issue	**Recommendations**	**Reference Case**	Responsible department
1. Food security	1. Low cost food option for migrant workers	Bhopal Municipal Corporation	Public Distribution system
	2. Portability of PDS for Migrant workers across state borders. 3. A national roaming (mobile) Temporary ration card for such migrants can be provided to migrant workers	Disha Foundation has worked with PDS, Maharashtra towards activation of available GR for temporary ration card for migrant workers. According to this GR the intrastate migrants should be able to get temporary ration card at the destination city, and can avail up to 35 kg of food grain during the migration period.	Public Distribution System

Livelihood

Issue	**Recommendations**	**Reference Case**	Responsible department
•Livelihood	**•Adapting Skill Up-gradation Programs to needs of Migrant Workers:**	Industrial Training Institute (ITI), Nasik along with Disha Foundation has done pilot training on plumbing for migrants, at their halt point suiting to their time during 6 -9 pm. Aide et Action LAMP, America India Foundation	
	•National Skill Development Corporation needs to be expanded to develop into the Enteprise mode rather confining to the EMPLOYABILITY.		
	Strengthening of MNREGA		
	Agriculture/Horticulture/Tribal Welfare or other related departments		
	Promote financial inclusion of target group		
	Undertake efforts necessary to promote livelihood opportunities		
	Family Development change Plans		

Right to Shelter

Issue	Recommendations	Reference Case	Responsible Department
• Lack of accommodation during migration • Poor living conditions provided by employers of migrants	• Night shelters, short-stay homes and seasonal accommodation for migrant workers in cities (the Supreme Court of India gave an order requiring state governments to create a night shelter for every 1 lakh of homeless population)	1. Disha Foundation, Nasik has set up transit camp facility for migrants in Nasik city with support of the District administration. The District Collector has allocated land for the construction of such shelters. 2. Bhopal Municipal Corporation has renovated the 4 night shelters in Bhopal and are open for migrants, persons staying at these Rein Baseras are to be provided with food and cool water under Ram Roti Yojana.	

Education for Migrants

Issues	**Recommendations**	**Reference Case**	Responsible Department
High School Dropout ratio of migrant children	• Mapping of migrant families children • To initiated education system for migrant children's . • Early Childhood Care and Education . • Piloting operational challenges of Right to Education Act	• Government of Andhra Pradesh and Aide et Action have mapped migrant families children across the state of Andhra Pradesh, more than 2 lakh children in the age group of 01-4 years were identified against the total mapped migrant population of 7.39 lakhs, it is shows that about 25% of the population are children. • LAMPS program promoted by America India Foundation in western Orissa through organizations such as Lokadrusti for children of brick kiln workers, • SETU in Gujarat for children or migrants working in salt pans • Disha foundation in Nasik.	• Education Department

Financial Inclusion of Migrants

Issue	**Recommendations**	**Reference Case**	Responsible department
Lack of Identity proof and other documents for financial inclusion	• Strengthening linkages to banks for migrant workers		AADHAR RBI Financial institutes
	• Inclusion and mainstreaming of informal remittance service providers	• Adhikar has taken an initiative to address the remittance needs of migrant workers of Orissa working in the far flung areas of Gujarat & Maharashtra through its unique/innovation intervention like "Shramik Sahajog"(SS) / Money Remittance system.	

Health of Migrants - Overview

- Health of migrants affected due to various unique conditions migrants face such as
  - Exposure to difficult and unsafe conditions
  - Occupational hazards
  - Living in poor conditions with inadequate quantity and quality of water, poor environmental sanitation
  - Poor nutrition
  - Losing family and societal support structures
  - Exclusion from various mainstream programmes and benefits since they are considered “outsiders”

- All of the above creates situations that makes migrants vulnerable to infectious diseases, chronic diseases esp. related to occupation, maternal/child health problems and mental health issues

Infectious diseases among migrants

- Due to lack of proper water supply, poor hygiene and sanitation migrants are prone to various infectious diseases such as malaria, hepatitis, typhoid, respiratory infections etc.
- Chief infections among migrants are malaria and tuberculosis (TB) – apart from increasing exposure to agents and reducing access to health services, migration may also increase drug resistance
  - Especially in case of TB migration has been found to be an important reason for the persistence of TB due to treatment default (up to 25% of default)
- Another important infectious disease among migrants is HIV/AIDS with prevalence being 0.55% among migrants compared to 0.29% among non-migrants

Occupational health among migrants

- Various occupational health problems plague migrant workers due to poor work conditions, lack of safety measures and prolonged working hours
- Occupational health problems can include:
  - Chronic fatigue with increased cold-cough-fever and diarrhea
  - Chronic pain in various body parts
  - Injuries
  - Chemical and pesticide exposure related problems – giddiness, lack of appetite, weight loss, dermatitis, respiratory conditions, cancer etc.

Maternal and child health outcomes for migrants

Migrant communities experience poorer maternal and infant health outcomes than non-migrant populations (NUHM draft 2008)

- Poor antenatal care coverage
  - Poor access to MNCH facilities.
  - Missing MNCH services due to temporary migration
- Lack of immunisation coverage
- High rate of Low birth weight
- Higher Prevalence of anaemia, and malnutrition in children
  - Under nutrition among migrant children is 47.1% compared to urban average 32.8% and rural average 45%
  - 28% children are severely stunted
- Higher U5MR among urban migrant children (72.7%) Compared to urban average (51.9%)
- Low status of women
  - Doubly disadvantaged
- Vulnerable to violence and abuse
- Lack of accessibility redressal system

Sexual and reproductive health among migrants

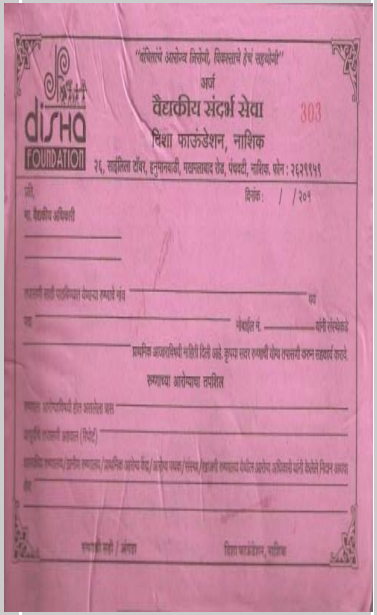
- Prolonged standing, bending, overexertion, poor nutrition and pesticide/chemical exposure contributes to-
  - Increased risk of spontaneous abortion
  - Premature delivery
  - Fetal malformation and growth retardation
  - Abnormal postnatal development
- Lack of toilets at work place and stringent work conditions promote chronic urine retention, which in turns encourages bacterial growth and stretches and weakens the bladder which in turns promotes chronic infections or colonization

Social and mental health among migrants

- Migration is a very stressful process with various factors like job uncertainty, poverty, social and geographic isolation, time pressures, poor living conditions, intergenerational conflicts, separation from family, lack of recreation etc. fuelling the stress
- Manifestations of stress include
  - Relationship problems
  - Alcohol, drug and substance abuse
  - Domestic violence
  - Psychiatric illnesses
  - Risky sexual behavior by single men
  - Child abuse among migrant children

Issues related to health of migrants

- Issues related to infectious diseases such as malaria, TB, HIV:
  - Most of the above diseases are addressed via vertical programmes of the government
  - Due to migration discontinuity occurs in accessing the services of these programmes
- Occupational health and mental health
  - Both the above areas are under-addressed in the public health scenario of India and also among migrants
- Overall, there is an immense lack of data regarding the health status of migrants and we need good research studies to know further about issues related to migrant health

Issues	Recommendations	Reference cases	Responsible depts.
• Mother and child health	• Integrated Child Development Scheme: According to Central Govt. guideline any migrant child, adolescent and pregnant and lactating women can be benefited from ICDS centers at the destination cities during their migration, BPL and non BPL families are eligible for it.	Referral forms	Women and Child Development
• Infection s disease	• **ESI** hospitals and health centers should made accessible to migrant workers. RSBY should be revised and made applicable to non BPL families also. As well the RSBY should be made applicable for OPD use.		MOHFW
• Occupation diseases	• Health Insurance. • Sensitization and training of government and non government stakeholders on large scale- human resource development and cadre building to address migrants health and other need.		MOHFW / Labour

Issues	Recommendations	Reference cases	Responsible depts.
•Sexual and reproductive heath •Mental health - Stress factors leading mental health problems among migrants: Job uncertainty, Social and geographic isolation, Intense time pressure, Poor work and living conditions, Separation from family, Lack of recreation, health safety concern.	•Some currently functioning programs like National AIDS Control Program have a mandate to provide outreach services. This program has adopted an outreach approach for HIV/AIDS prevention and treatment for few categories of migrant population viz. truckers, sex workers and construction workers in India. • better implementation of Labour Laws •Addressing basic needs of migrants in cities. •Night shelters , short stay homes , and seasonal accommodation for migrant workers. •Portability of PDS for migrant workers across state borders. •Development of national migrant policy	Disha foundation has worked with PDS, Maharashtra towards activation of available GR for temporary ration card for migrant workers should be able to get temporary ration card at the destination city, and can avail up to 35kg of food grain during the migration period . This is applicable for BPL families. It is working successfully in Nasik.	

Issues	Recommendations	Reference cases	Responsible depts.
• Vertical program for health and its coverage for migrants •Health service delivery	• There e is need to consciously channelize the information in to health sector and devise **tracking strategies** for improving health outcomes of migrants. It could be like providing mobile health cards to the migrants There is strong need for scaling up outreach programmers carefully such as Indian Population Project, and few initiatives by NGOs and draw lessons for replicability and scaling up of other public health outreach interventions for migrants.	•Disha Foundation as partner of a task force study is conducting an INTERVENTION STUDY ON MIGRATION, POVERTY AND ACCESS TO HEALTH CARE: A MULTI-CENTRCI STUDY ON PEOPLE'S ACCESS AND HEALTH SYSTEMS RESPONSIVENESS IN NASIK CITY OF MAHARASHTRA	

Recommendation for more research studies on migration health

- There is a need for good research studies on the health of migrants
- A recent taskforce study as mentioned before is being conducted in 15 centers regarding healthcare access of migrants
- However, a well planned cohort study will provide detailed prospective data on the health outcomes of migrants
- Such a study can be readily done at Nasik by building up on the work done with migrants as a part of the task force study

Recommendation for more research studies on migration health

- Based on the results of the initial analysis of the taskforce study it is possible to create a cohort of 2000-4000 migrant workers from within Maharashtra
- These participants can be followed up for 5-15 years and various aspects of health and healthcare can be assessed
- Their migration patterns can also be profiled in detailed during follow-up
- Intermittent studies can assess various outcomes, exposure and interventions
- If done, this can become the single largest data resource for health on migrant workers

Some Case studies .....

About NACSOM

- The National Coalition of Organizations for Security of Migrant Workers (henceforth, the Coalition) is a network of organizations working on issues related to internal migration and urban poverty.

- The Coalition represents 30 plus organizations spread across states of Maharashtra, Uttar Pradesh, Rajasthan, Bihar, Orissa, Madhya Pradesh, and Gujarat.

- The Coalition has been working to mainstream concerns of migrant workers at the state and national level and make the existing policies sensitive to the rising incidence and complexity of rural to urban and inter-state migration

About Center for Migration Health and Development (CMHD)

- CMHD is a new center within Indian Institute of Public Health, Delhi (IIPHD)
- It is dedicated to work on research, training and policy dialogues in all areas related to labour migration, health and development
- It is a multidisciplinary center drawing in experiences from diverse fields like public health, social sciences, law, medicine, geography, health economics and political sciences
- CMHD is focused on the needs of migrant population and their sustainable development

SAFE & PRODUCTIVE LABOUR MIGRATION

An initiative to Address
Labour migration in North Maharashtra

Center for Migration and Governance.

Disha Foundation, Nasik

Geographical Map

Government Response to Migration – Challenges

- **Migration not understood as development issue (both source and destination)**
- **Fixed frameworks of programs and policies – leads to systematic exclusion of migrants**
- **Limited human resource for better coverage of migrants in programs**

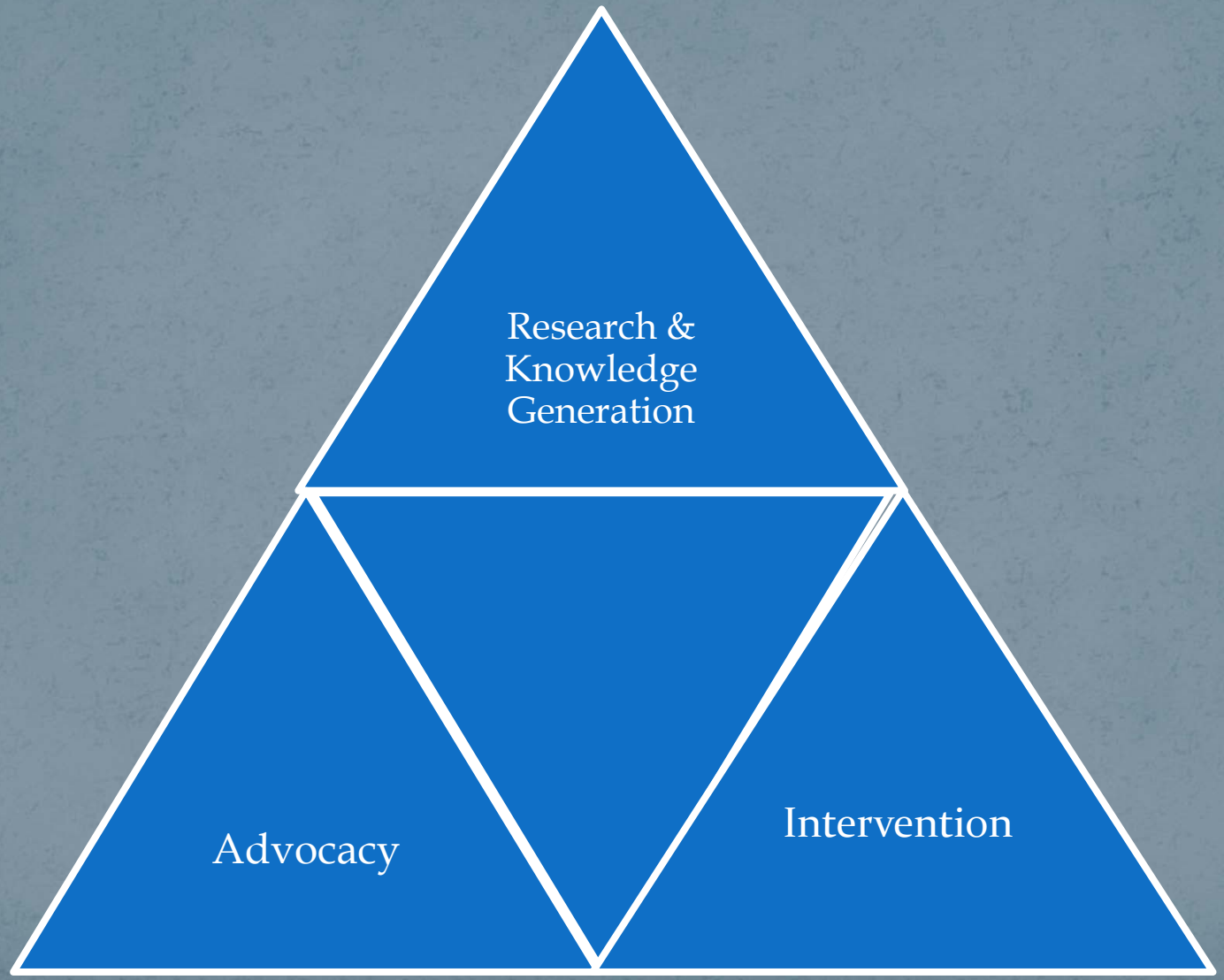
DISHA'S INITIATIVES

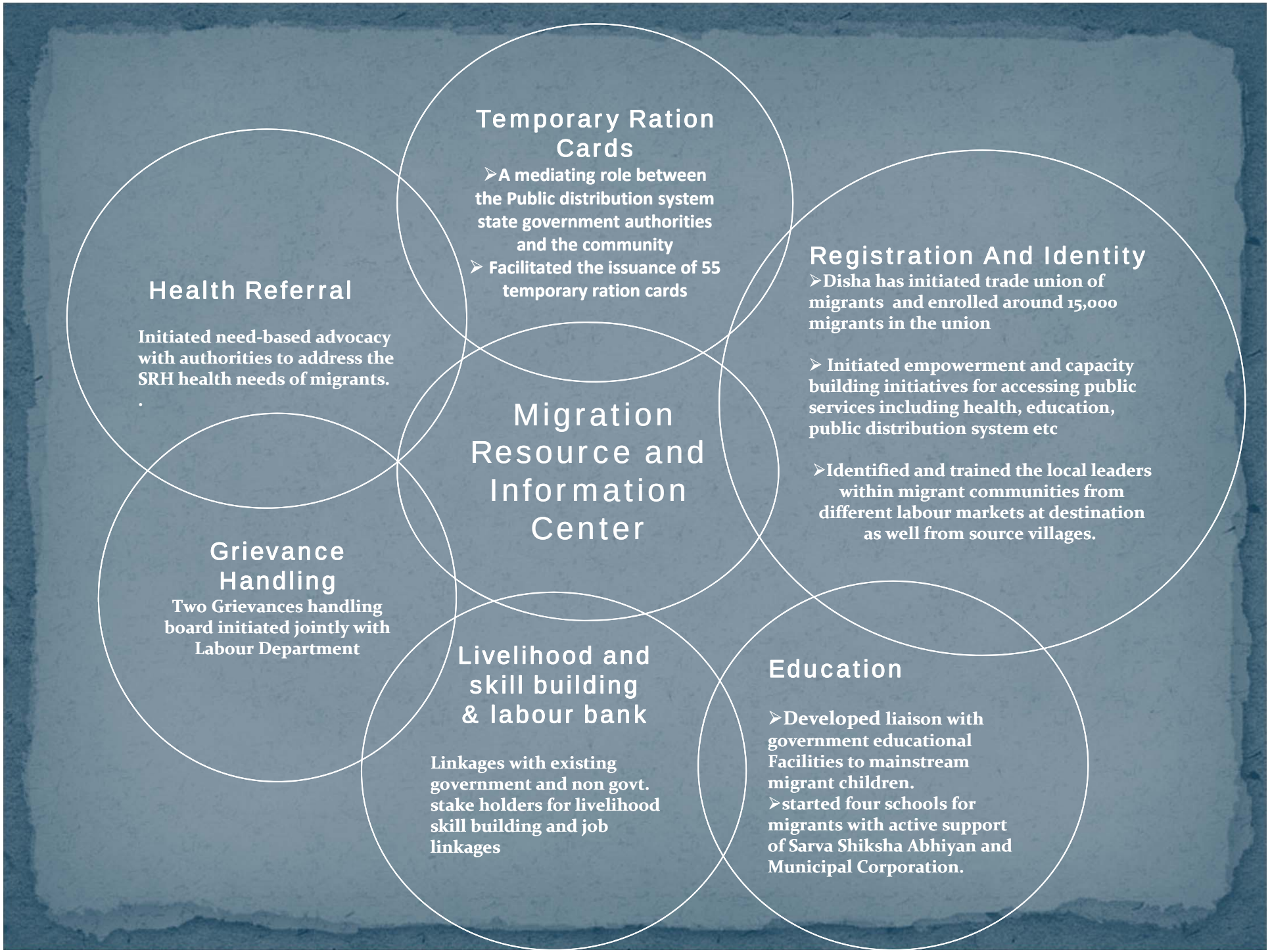
- **Migration program initiated in December 2002.**
- **Migration as important development issue**
- **Government's migration friendly approach and accountability is crucial**

DISHA'S APPROACH:

- **Engaging government for institutionalization of 'Labour Migration' in programs and policies**
- **Empowering migrants for access to government programs**

Approach




Temporary Ration Cards
➢A mediating role between the Public distribution system state government authorities and the community
➢ Facilitated the issuance of 55 temporary ration cards
Health Referral
Initiated need-based advocacy with authorities to address the SRH health needs of migrants.
.
Registration And Identity
➢Disha has initiated trade union of migrants and enrolled around 15,000 migrants in the union
➢ Initiated empowerment and capacity building initiatives for accessing public services including health, education, public distribution system etc
➢Identified and trained the local leaders within migrant communities from different labour markets at destination as well from source villages.
Migration Resource and Information Center
Grievance Handling
Two Grievances handling board initiated jointly with Labour Department
Livelihood and skill building & labour bank
Linkages with existing government and non govt. stake holders for livelihood skill building and job linkages
Education
➢Developed liaison with government educational Facilities to mainstream migrant children.
➢started four schools for migrants with active support of Sarva Shiksha Abhiyan and Municipal Corporation.

ENGAGING GOVERNMENT

SOURCE LEVEL

- Gram Panchayats: MIRC set up and facilitation at 6 units, authorization of sarpanch for union cards
- NREGA – facilitation for registration, and linkages to jobs for outgoing migrants
- Tribal Development Department: Migration Research and Resource Centre
- Aam Admi Pension scheme: registration of migrants
- Health Dept – Outreach and referral services for migrants
- Union membership

DESTINATION LEVEL

Labour Department

- Construction welfare board
- Grievances handling – units at 2 labour markets
- Interstate migrant workers act

ICDS

- Mapping of migrant children /Education construction worksites/Day care centers

Health Department

- Joint Referral services for migrants

Nasik Municipal Corporation

- Sarva Shiksha Abhiyan – mainstreaming migrant into education
    - Basic amenities

Public Distribution system:

- One time food grain scheme- formal evaluation and replication in sending districts
- Temporary ration cards
- Union registration /membership

MIGRATION RESOURCE AND RESEARCH CENTRE (MRRC) FOR MIGRANT WORKERS

•The center is initiated by Tribal Ministry, and GOM; Disha has facilitated the process and technical partner for the center.

•Migration Data management – source and destination

• Facilitation of migration at Nasik city- destination

• Individual family development plan at source areas- existing tribal programs for sustainable development of the region to reduce distress migration for livelihood.

Thank You