

## **Interstate Youth Domestic Migrant Labourers in Kerala: Strategies for Integration and Positive Youth Development**

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### **Abstract**

Kerala State in India is becoming the host of domestic migrant labourers (DML) from across the country with a majority of them from West Bengal, Bihar, Assam, Uttar Pradesh and Orissa. According to a recent study published by the Department of Labour, Govt. of Kerala, 2.5 million Domestic migrant labourers live in Kerala with an annual inflow of 0.235 million. Among the 2.5 million DML, 40.95% belongs to 18-23, 34.29% to 24 – 29 and 15.65% to 30-35. That means more than 90% of them are at their young ages. These statistics call for attending to the migrant youth as an emergency need. The young migrants can achieve success by developing their own economic and social assets for their future if they receive a positive migration experience. Likewise, negative experiences may adversely affect their short and long term future. This paper attempts to draw youth issues and challenges among the DML and draw a model for integration and positive youth development. The strategies for integration and positive development are presented as a practice model incorporating mental health and developmental principles.

**Key Words:** domestic migrant labourer, positive migration experience, integrated model, positive youth development

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### **Introduction:**

Human mobility for want of better job prospects and living conditions is as old as human history. International migration has become common and easier due to advancement in modern transportation and enhanced inter-connectedness among various countries across the globe. Conflict, poverty, inequality and lack of decent jobs also contribute to migration. International migration report, 2015 reported a rapid growth of international migrants worldwide reaching to 244 million in 2015, up from 222 million in 2010 and 173 million in 2000 (United Nations, 2015).

India has the largest diaspora in 2015 with 16 million international migrants. According to the Kerala Migration Survey 2014, the number of Kerala emigrants living abroad in 2014 is estimated to be about 2.4 million, up from 2.28 million in 2011, 2.19 million in 2008, 1.84 million in 2003 and 1.36 million in 1998 (Zachariah & Rajan, 2015).

Any discussion on migration focuses more on outward migration and international migration. However, Kerala has witnessed a sweeping high rate of inward migration from domestic migration in the last decade. According to a recent study published by the Department of Labour, Govt. of Kerala, 2.5 million Domestic migrant labourers live in Kerala with an annual inflow of 0.235 million. More than 90% of them are in their 18-35 age group with 41% belonging to the 18-23 age group (Narayana, Venkiteswaran & Joseph, 2013). Any discussion on youth in Kerala cannot ignore the migrant youth.

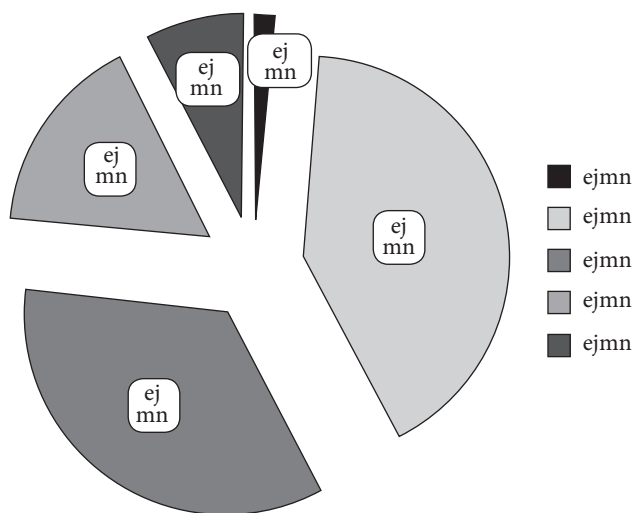
The upsurge of domestic migrant labourers in Kerala results from the fast development of urban areas, the gaps and opportunities created by the outward migration of Kerala youth, and the educated unemployed youth's reluctance to work in so-called menial jobs (Frontline, 2013).

Migration has implications for those who move, those left behind and for those who host them. This paper explores the issues and challenges of migration and tries to draw a feasible model for a positive youth development plan for migrant youth. The model has implications for both the persons who have

migrated and the host community.

### Profile of Domestic Migrant Labour in Kerala

According to a comprehensive study done by Gulati Institute of Finance



and Taxation, 2.5 million domestic migrant labourers reside in Kerala, of which 40.95% belongs to the age group of 18-23, 34.29% to 24 – 29 and 15.65% to 30-35. That means more than 90% of them are in their youthful ages (Narayana, Venkiteswaran& Joseph, 2013).

The study provides the following insights about DML in Kerala.

An almost equal number of DML stayed in their current residences for less than a year, 1-2, 2 to 3 and more than three years. The internal mobility of the DML is high as they often move from one place to another during their stay in the state.

- 66% of them work under contractors. Majority of them work in construction work followed by working in hotel and restaurants.

- No unemployment or underemployment reported among the DML. 28.7 % work all days in a week while most (57.82%) work six days a week.
- Almost one-third of them earn Rupees Four hundred and more per day. Their remittances to home range from Rs. 1000-5000 to more than Rs. 20000 per month.

### Issues and Challenges of Youth Domestic Migrant labourers in Kerala

A brief overview of some of the concerns and challenges of DML in Kerala is depicted below.

### **The vulnerability of DML:**

As quoted in Ajith Kumar (2011), Bustamante (2011) points out that “migrants are inherently vulnerable as subjects of human rights from the time they leave home to initiate their migration. In other words, any human being is less vulnerable at home than right after he leaves it to become a migrant. The same applies to the sociological extension of the notion of home to a community of origin. The same person that migrates had more resources, both material and human, to defend and/or protect, himself, when he was at home, before moving elsewhere than after the outward movement had taken place.

According to Derosé et al. (2007), political and societal ostracism, lack of societal resources, and economic resources contribute to vulnerability.

Varennés (2003) states that “living in host states where they (migrants) may not master the official language(s), are unfamiliar with the workings of the legal system and administration, detached from traditional support and family networks, exposed to a society with ways of life or cultures which they may find at times alien, they may face trials that can leave them disoriented and disturbed.”

### **Housing and Living Conditions**

The migrant labourers live in unhygienic environments, often accommo-

dated at the factories and worksites. The rooms are crowded without proper sanitation facilities. These conditions make them vulnerable to contracting many diseases, which ostracize them, as carriers of communicable diseases (Narayana, Venkiteswaran & Joseph, 2013).

### **Social Security and health schemes**

Movement from their host communities took away several of their social security entitlements such as subsidized food through the public distribution system, and government-sponsored health insurance schemes such as Rashtriya Swasthya Bima Yojana (RSBY), inadequate access to quality education etc. (Ajith Kumar, 2011)

They also lack legal protection as most of them work in the unorganized sector. The Inter-State Migrant Workmen (Regulation of Employment and Conditions of Service) Act (1979) provides legal protection to the migrant worker as provisions for equality of wages, displacement allowance equivalent to half month wages, allowance to meet the travel from place of residence to place of work, the duty of the contractor to deliver and maintain appropriate residential accommodation etc. Most of the DML are unaware of these provisions and often fails to any social protection. Many other Acts applicable to any worker applies to the DML also. Some of the Acts are Minimum Wages Act, Contract Labour (Regulation and Abolition) Act, Equal Remuneration Act, Building and Other Construction Workers (Regulation of Employment and Conditions of Service) Act, Workmen's Compensation Act, Payment of Wages Act, Factories Act. Despite having many legislations to protect the rights of migrant labourers, violations of the provisions are rampant.

### **Leisure activities**

Lack of leisure activities is yet another problem faced by the DML. Many of them work for 12-14 hours per day. They don't find any time for relaxation and entertainment except on a Sunday, that too a quarter of them works seven days a week. They have no commonplace for recreation. The young pop-

ulation's lack of entertainment, age-related characteristics, living away from families, and lack of opportunities to meet emotional and sexual needs pose a threat in high-risk sexual behaviours. The Kerala State Aids Control Society volunteers reported that "the sudden influx of migrant male population into Kerala, who earn wages and has extra money to spend, has given a boost to the local sex industry. Sex work is rampant among them, but is carried out under veils of secrecy; moreover, they also are careful not to invite local moral policing's wrath. All this, along with the total lack of knowledge about safe sex and condoms, make them a very vulnerable section to fatal infections and diseases. A vast majority of them have not even heard of HIV or AIDS" (Narayana, Venkiteswaran & Joseph, 2013).

### Health

Health of DML and that of the local community is a significant concern for the state's health department. The ostracism caused by the local people's concern over the morbidity pattern among the DML and their fear as carriers of communicable diseases needs to be validated. Often the unhygienic living conditions of the DML and health hazards posed by these conditions have aroused hatred and resentment among the local community (Nair, 2015). Crowded and unhygienic living conditions compromised the health of the DML. In a two day camp conducted by the Rajagiri College of Social Sciences with the support of labour department identified scabies, a contagious skin disease, and body pain resulting from intense physical labour among many of the migrant workers screened at the construction site of the upcoming TCS campus inside Infopark Kochi (Health problems dog migrant workers in the city, 2012 June 28).

The reemergence of diseases like Malaria, Kala Azar, eradicated from Kerala is often attributed to the migrant labourers. Several cases have been identified among the DML in various parts of the state.

According to Kerala State AIDS Control Society (KSACS) statistics, the low prevalence status of Sexually transmitted diseases in Kerala is under threat with the reemergence such conditions through the migrant labourers

migrating from states with higher rates of STD prevalence. In Thiruvananthapuram alone, WHI Migrant Suraksha Project of KSACS 52 cases of sexually transmitted infections (STIs), including scabies and herpes in a year (The Suraksha projects in the states have identified many DML with risky sexual behaviour as most of them live away from families in their young ages. The Kerala State AIDS Control Society has established eight projects to prevent HIV/AIDS and treatment of STIs among migrant labourers. To minimize HIV transmission and mitigate the impact of HIV/AIDS among out-migrant families at their source points, HLFPPPT is implementing NACP's Source Migrant Intervention Project in 20 districts of Uttar Pradesh (HLFPPT).

### **Interaction with the Local Community**

Even though DML plays a significant role in Kerala's labour scenario, hatred mounts against them as the persons involved in criminal offences. Though they are very well integrated into the Kerala economy, there is a reluctance to incorporate them to the host culture. The 2013 GIFT report says that "they are often deliberately kept at bay, to ensure not only their social insularity but also to disempower them from asserting their rights—as citizens and labourers. This systematic exclusion works to the advantage of the host society in various ways: to keep the wage levels low, rent levels high, services cheap, and to maintain a labour force that is at their beck and call, one that can be absorbed and driven out at will."

However, reports of an increase in the number of crimes is a big concern for the resident population and the administrators. Murders apart, innumerable cases of theft, burglary, drug peddling, drug abuse, kidnaps, fights and sexual crimes involving migrant workers have been reported, especially from the countryside where the workers are in close contact with residents (Bashier, May 2015)

### **Positive Youth Development for a Positive Migration Experience**

Internal migration places a significant role in the development of the cities.

Migration and migrant workers contribute to the GDP of the country. Migrant workers often work in unorganized sectors like construction, agricultural labour, domestic work etc. (Bhagat, 2012)

The transition from childhood to adulthood and from dependence to independence and interdependence happens during the youth stage of a human being's life span. This transition in social, economic and biological realms is pivotal to safeguard and shape their future to optimize their social capital. This period is significant in the young person's life, where they make important decisions about their lives (Global Migration Group, 2014)

The young migrants can achieve success by developing their own economic and social assets for their future if they receive a positive migration experience. Likewise, negative experiences may adversely affect their short and long term future (GMG, 2014).

Interagency Working Group on Positive Youth Development defined "Positive youth development is an intentional, pro-social approach that engages youth within their communities, schools, organizations, peer groups, and families in a manner that is productive and constructive; recognizes, utilizes, and enhances youths' strengths; and promotes positive outcomes for young people by providing opportunities, fostering positive relationships, and furnishing the support needed to build on their leadership strengths" (Interagency Working Group on Positive Youth Development).

Positive youth development strategies could address many of the issues and concerns shared in the paper. Positive experiences supported with positive relationships and positive environments would lead to positive youth development.

Roth and Brooks-Gunn (2003) reported five C's of positive youth development viz. Competence, confidence, character, connection, and caring that need to be promoted and supplemented to any efforts focusing on developmental system ideas that stress the strengths of youth.



Inclusion is found to be an important strategy to address the issues cited in this paper. The inclusion would help address the problems faced by the DML and those faced by the local community. Faetanini& Tankha (2013) in their document published from UNESCO, “Social Inclusion of internal migrants in India” suggested ten critical areas for better inclusion of migrants. (DML are referred to as internal migrants in the document)

1. Registration and Identity: A proof of identity is essential for the domestic migrant labourers to avail all social security benefits. Providing a universally recognized proof of identity makes them eligible for availing all social welfare entitlements across the country.

2. Political, civic inclusion: Provision of voting rights for the domestic migrant labourers could ensure political and civil inclusion of the migrants, which would help them lobby for their rights with political leaders.

3. Labour Market inclusion: Though there is no scarcity of employment for the DML. Underemployment and opportunities for training, placement and skill upgradation need to be addressed. The migrants need to be aware of their rights and facilities for protecting their rights, which is curtailed taking advantage of their lack of education and poverty.

4. Legal Aid and Dispute Resolution: The DML should be given fair access to legal aid on violations of their work and wage-related rights. Grievance redressal systems need to be established for timely negotiation of their issues with employers and contractors.

5. Inclusion of Women Internal Migrants: The mainstreaming initiatives for domestic migrant labourers should include gender-sensitive practices. While enhancing the rights and entitlements of women migrants, safe migration opportunities should also be ensured.

6. Inclusion through Access to Food: The domestic migrant labourers should also enjoy the Public Distribution System's benefits.

7. Inclusion through Housing: The quality of housing facilities should be

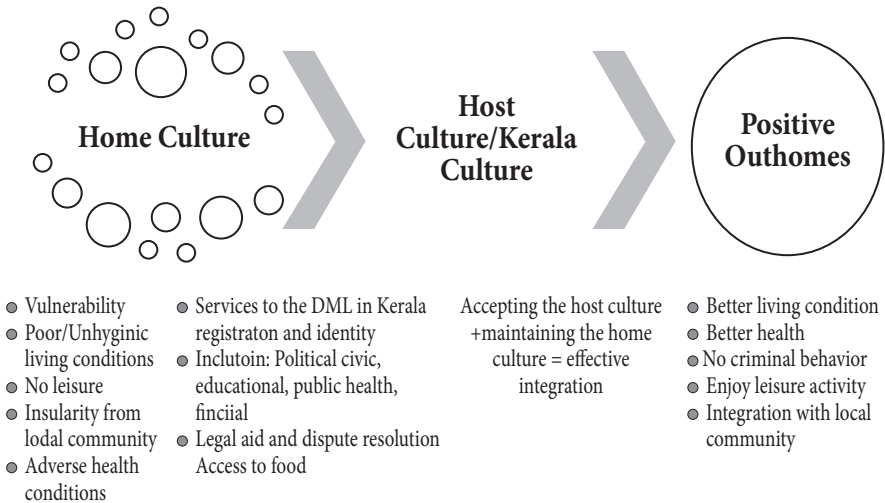
enhanced with a clear plan of action starting from low-cost rental housing to permanent housing closer to their workplaces.

8. Educational Inclusion: The children of migrant labours should be consciously included in educational initiatives of Government like Sarva Shiksha Abhiyan. They should enjoy the benefits under the Rights to Education Act (2009).

9. Public Health Inclusion: The local public and health personnel's tendency to label the migrants as carriers of diseases needs immediate attention. The access to health care as citizens of India need to be ensured by every Local Self Government. Health checkups and targeted health camps could be arranged.

10. Financial Inclusion: The migrants should enjoy all rights to use orga-

Positive Experiences+Positive Relationships+Positive Environments= Positive Youth Development



nized financial services such as banks to ensure safe and secure transfer of remittances.

**An Integrative Model for Integration and Positive Youth Development among DML ( Anish, 2016)**

*Educere-BCM Journal of Social Work (EBJSW), 16 (2), December 2020*

From the perspectives presented in the paper, it is clear that most of the DML live a life, as there in their domestic/culture( the state of origin)which has implications in the areas of vulnerability, poor/unhygienic living conditions, lack of leisure activities, insularity from the local community and adverse health conditions (Narayana, Venkiteswaran& Joseph, 2013). When we can provide services (Faetanini& Tankha, 2013) to the DML in Kerala, they would be helped accept the host culture and maintain the home culture, resulting in effective integration to the Kerala culture (Berry 1997, 2006). The integration would help facilitate positive outcome, which in turn leads to better living conditions, better health, no criminal behaviour and an integrated living with the local community.

Facilitating positive experiences supplemented through positive relationships and positive environments can enhance the wellbeing of the domestic migrant labourers in the country.

(This work was supported by the ICSSR-IMPRESS Scheme(Grant No. IMPRESS/P 3430/473/2018-19/ICSSR))

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