Policy Recommendations for Post COVID-19 Lockdown Relief and Recovery:
Low-income families, daily waged workers and vulnerable communities in Colombo district
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On the 11th of March 2020 the World Health Organisation (WHO) responding to the rapidly spreading COVID-19 virus declared the outbreak of the disease a pandemic. As with all countries across the globe Sri Lanka responded with special and extraordinary measures. These included restrictions to movement through a strictly enforced curfew resulting in an island-wide lockdown to prevent the spread of infection.

The policy recommendations that follow relate to the impact of the COVID-19 response on urban poor and low-income communities in Colombo and also highlight possible interventions in relation to other vulnerable groups such as the disabled, elderly, LGBTIQ+ community and Sex workers living in urban low-income communities.

The recommendations will centre primarily on socio-economic concerns and will not delve into the public health response vis a vis these communities. However, we wish to state at the outset that the pandemic, the nature of the responses to it and the consequences of those responses affected low income and poor communities very differently and unequally. The recommendations that follow are a reflection of these differences that are the result of deep-seated systemic and structural inequalities.

Recommendations

Low-income families in the Colombo district

Short term

1. Aid must not be politicized and all assistance from the President’s Fund or any cabinet approved funding must be distributed equitably irrespective of people’s political affiliations. Assistance provided by the State must not be attributed to any political party and State resources must not be abused in the run up to the Parliamentary elections.
2. Targeted livelihood restoration schemes should be introduced to meet the needs of all informal sector workers and the daily waged. Daily waged workers should be supported for a minimum six months (April to September 2020), with a monthly stipend, so that they can restart their livelihoods without incurring further debt.

3. Monthly rent payments should be cancelled for those living in the UDA high-rise apartment buildings along with utility bill payments for six months (March to August 2020). These amounts should be paid directly to the UDA.

4. A plan should be drawn up to cover the cost of rent for those living in low income settlements, by paying the landlords directly from March to August 2020. This is because landlords depend on rent money for their own expenses and many people may face eviction, making women renters more vulnerable due to their inability to pay.

5. Establish community-based groups, through the Colombo Municipality with a gender, ethnic and religious balance to assist with decision making and distribution of relief at the local level.

6. Consult women local councilors and community based women’s groups in relief efforts, so that gendered needs are identified and met when relief is distributed to communities.

7. The Colombo Municipal Council and other state institutions must invest in more infrastructure in low income communities and public spaces in the city to enable people to better access water and hand washing facilities.

8. Implement a special programme to ensure the supply of essential nutritious food to low income communities and the urban poor whose nutrition may be compromised due to the loss of income during the lockdown and the transition out of it.

**Long term**

1. Strengthen social and community networks that operate at the ground level and provide them with reliable information for immediate community transmission, to reach communities that do not have easy access to government information sources.
2. Revisit existing social protection mechanisms such as the current Samurdhi scheme and a) update the criteria for beneficiaries and b) ensure the monthly assistance is adequate and based on the cost of living.

3. Provide seed grants for low income earners to start self-employment initiatives with government assistance and help create a market for their products. Those interested should be given vocational training for a trade that suits their respective environments.

4. Adequate and affordable shelter must be constructed and made available to daily wage workers and homeless persons in the city. This would enable them to have access to water and sanitation, but also make them less vulnerable to spread of infections, have the ability to socially distance or quarantine when necessary.

5. Rethink housing projects for the urban poor such as the Urban Regeneration Project building of the high-rise complexes, as the current model is does not adequately meet the requirements of the communities. The design of the apartment complexes and relocation process disproportionately affect women some of who are worse off after being moved. New designs must look at increasing apartment size, more green public spaces, more access to public hand washing facilities and sustainable energy friendly buildings.

6. Establish free/subsidized day care centres for low-income families, to support women in returning to employment. This can be managed by Community Based Organisations and resourced by the state.

7. Develop a gender and ethnic balance in the various existing mechanisms and those that may be created to design and implement COVID-19 recovery programmes.

8. Strengthen the co-operative movement (consumer co-ops, credit co-ops, producer co-ops and service co-ops) so that it can play a more efficient and effective role in times of crisis as well as in the process of long term recovery.

**Violence Against Women**

1. Introduce government assisted shelters for at-risk women and children who are in danger of domestic or intimate partner violence, have sustained injuries, have made formal complaints or requested protection or relocation, particularly in the context of a spike in violence during the
lockdown. These shelters can be run by professional CSOs in conjunction with local government authorities.

2. Guarantee rapid police response for all reports and emergencies involving violence against women and children, both for protection and the provision of health care.

3. Ensure the well-being of children from orphanages or homes who have been placed with relatives by having social workers or community-workers conduct follow ups to confirm that the children are not being abused or neglected.

4. Ensure that police guidelines are prepared and police at all police stations are directed to respond immediately in situations of domestic violence, particularly in times of emergency.

5. Enable the health sector to mobilise existing grassroots healthcare staff (Public Health Midwives, Public Health Nursing Sisters) to access hard-to-reach and high-risk households with prevention messages and practical information on accessing services and support.

At-risk Communities

The elderly and the disabled

Short Term

1. Extend the allowance of Rs.5000 for the elderly and disabled belonging to low-income families for six months from March 2020. This is so that they are able to attend to their medical and other needs without burdening family members where income is affected due to the COVID-19 pandemic.

2. Provide the necessary assistance such as delivering medical and food supplies, home consultations and emergency transportation for the elderly and disabled of low-income families, with special needs and compromised medical conditions until the risk of the pandemic is minimized.

3. Ensure there is no bias or discrimination against the elderly or the disabled. Be inclusive of invisible disabilities such as psychiatric disabilities, epilepsy, HIV to name a few that cannot be conventionally verified, ensuring that such groups of persons with such disabilities are also considered eligible for the allowance.
**Long Term**

1. Introduce a grant scheme that will recognize and support elderly women of low-income families in a time of crisis considering their vulnerabilities during situations such as lockdowns and other emergency responses.

2. Implement the increase of the monthly allowance in the Elderly Assistance Programme to Rs.2500 as proposed in the “SaubhagyayeDekma”.

3. Introduce the subsidy scheme that will allow the elderly above the age of 65 to purchase prescribed medicines as recommended in the “SaubhagyayeDekma”.

**The LGBTIQ+ community and Sex workers**

1. Provide at-risk communities with the option of legitimate but safe registration through NGOs or community-based organizations, they trust and are authorized to process such registrations so that relief and other assistance can reach these marginalized communities.

2. Prepare comprehensive anti-discriminatory guidelines that should be followed by all government officials.

3. Ensure the confidentiality of all personal information gathered through registration processes so that at-risk populations are not subject to persecution.

**Attachments:**


Compiled by Women and Media Collective in consultation with a group of activists and practitioners working with urban low income and poor communities and other vulnerable groups in Colombo

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For the daily wage worker and the low-income family, life has been significantly more complicated, since a few days prior to the official lockdown in the island. With the closing of schools on the 13th of March, limited mobility for a few days after, and the imposition of curfew on the 20th of March, many people plunged into crisis, with no means to take care of themselves. While one portion of Colombo’s residents hurried to organize new infrastructure to ensure their access to goods and essential services, the urban poor, struggled with no access to any income that would allow them to purchase essential items; “Elavulu lorry namaawa, eth mukuthgannaatheikeeyakwathne” ... (The vegetable lorries would come by but we didn't have a cent on us to actually buy anything).

These are stories, predominantly of women, who live and work within the Colombo District whose struggles have continued to grow in the last 10 weeks.

The reality is, even with a lift in curfew, the majority of the urban poor will not have an income because of the lack in financial and infrastructural support that have left them in debt and will continue to burden them;

(a) They have already lost or are on the verge of losing their jobs,
(b) They have either pawned everything they had or exhausted the sources of borrowing during the lockdown for consumption purposes hence they lack capital to explore a new livelihood option
(c) Except for the minimal support (financial or in-kind donations for consumption) there is no strategic support scheme to recognize and enhance/improve informal sector income sources that are fragile but have potential
(d) The lockdown period in which these extremely helpless individuals and families were forced to enter into unfavorable agreements (financially or otherwise) has now created extra burdens -financial or social- which further limit their capacity to recover
(e) Families and individuals engaged in informal sector jobs that are dependent on specific functions such as re-opening of schools, re-opening of hotels and tourism sector activities are neither recognized and informed nor supported for a shift of livelihoods
(f) Women are significantly challenged by increased responsibilities and lack of room-to-negotiate on the future of their livelihood activities.
**Story - Ms. A. F Rishard**

A. F Rishard is a mother of 4 children, all of whom go to school. Her mother and sister also live with her. She is an active community leader. Her husband is a trishaw driver. The family is dependent on his income, and have no savings. The family is reliant on nutrition meals that the school provides for the children during the majority of the year, and have a practice of putting money aside to help tide over during the holiday months. With schools being closed the family has no access to sufficient food to sustain the family and no income. The family has received goods from the CMC and via private donors. However, this is neither sufficient nor sustainable.

**Recommendations**

A one-off donation was not enough for the family, as the children have been home since the second week of March. The private donors reached out to her directly.

**Immediate –**

- The 5000 LKR grant was not sufficient to sustain a family this large. The government will need to recalculate the amounts being allocated per family. A tiered structure similar to Samurdhi that is dependent on the number of persons in the household and not a blanket amount, would be a more equitable solution. The minimum payment being no less than 5000 LKR.

**Long Term –**

- Monetary donations for mere consumption put people down to “dependents” and make them forget that they are “survivors”. Hence, it is important that these 5000 LKR grants becomes only the first step of a ladder that supports them to adapt to the new normal rather than a politically motivated “give-away” that further imposes the mentality of dependency.

- People need to be given room and support to envision, plan and implement new livelihood activities based on their existing skills. This can also boost their confidence and resistance against future shocks.

- Nutrition needs of children are a big concern for mothers. Community level catalysts such as building of community kitchens, food banks and other mechanisms that ease the burden of providing healthy meals for children can give parents more freedom to rethink their livelihood plans. The food banks can provide foods for the needy at subsidized rates and by running these throughout the year more livelihood opportunities will open up.

- To proactively work on strengthening networks between community, state and civil society sectors to help increase the effectiveness and efficiency of relief distribution during disasters. It is equally important to make sure the data on relief operations are openly accessible and are real time during disaster; this can minimize duplication of efforts and wastage of resources. This would require for the state officials like district and divisional secretaries and local authority members/officers to come together prior to disasters to lay the foundation for a collective and effective management of crisis situations. This can lead to a city-wide collective action where predetermined chains of actors from all sectors are automatically activated when needed. For this to happen
CMC/DS offices should lead such collective efforts throughout the year, and actively invest in building trust and stronger communication. This long-term connection may also help ease the apprehension that CSO’s have about politicization of distribution when working alongside government institutions and will bring in the blessings of good governance.

**Story – Pushpa**

*Pushpa sells homemade short eats. A single mother with a teenage son with a disability, she struggles as a daily wage earner to make ends meet. She lives with her son, and another cousin, in a small room that belongs to a relative. She has been trying to get on the Samurdhi list for years but has been told several times that she would be, at a time the list is revised. While trying to obtain the 5000 LKR she was repeatedly told she would not be able to obtain the money. After many arguments to prove legitimacy, and calls to the GS, Samurdhiniladari and LG Politician, she did get 5000 LKR.*

**Recommendations**

Despite the information on the 5000 LKR grant being discussed on the 15th of April, there was a lack in communication of this information to those who needed clarity. There was confusion on whom the point person was, and no access for printed copies of the form etc.

**Long term –**

- Finding more effective ways of information sharing with the communities especially those who have no access to smart devices/TV is highly recommended. The most reliable measure is strengthening social/community networks that operate at the ground level at all times to ensure 100% coverage of the needy families that are most likely to fall into the cracks of the state-centered information collection systems.

**Story - Sugathi**

*Sugathi is a single mother of a young child. She is a domestic worker in 3 homes in Colombo. Prior to the pandemic, she worked at these homes on a roster, after dropping her son off at nursery. Due to the fact that she lives in an underserved area, all three of her employees have discontinued her work, indefinitely. Despite the lift in curfew, she now has no work. Also as schools and day care centers are not in operation, she is unable to leave her son, and attempt to find work. She has no other means of income. She did not receive the Rs5000 as she was told by her GS that her parents who also live with her, received it. She was not considered a separate family unit.*

**Recommendations**

Despite the lift in curfew, many women, like Sugathi, will have to continue to forgo work, because of their commitments to the children and elderly. She lacks the financial support to find anyone to care for her child in a private capacity while she is away. One of her biggest expenses is day care for her son.
Sugathi is not on Samurdhi. She feels strongly that her voice is not recognized by her GS because of their minority status.

Immediate –
• Although in some areas people did receive the grant based on family unit, this did not happen in all areas. The Divisional secretariats will need to re visit these lists of recipients with immediate effect, so that there is a fairer distribution in the coming months, making sure no one falls through the cracks.

Long Term –
• Subsidized day care centers – the Council will need to look at building and regulating more day care centers to support families continue working. This does not have to be a burden to the state because this can easily be managed through CBO’s under the supervision of the state.
• Acknowledging the need to revisit domestic worker rights and laws. It is important that the workers do not become the targets of the baseless stigma against low-income settlements of the city.
• Reconnecting and creating stronger ties between the GS/ SN, and the people so that mechanisms of sharing information can happen proactively.

Story - Mala

Mala and her husband are migrant workers. They came to Colombo to find work but were unsuccessful in doing so and were also unable to find work and lodging. Soon after the lockdown, they had no work, shelter and food. Mala’s husband caught a bad infection and was very ill, but was too afraid to seek medical assistance, as they were afraid of the repercussions of seeking medical advice, as a couple from a minority.

Recommendations
Mala and her husband belong to the category of not being counted at all. With no home, and no support, they received no aid from the state and did not have enough money for lodging. The husband, despite having covid symptoms, did not admit himself to hospital as he was afraid to leave her alone on the street and with no support.

Immediate- 
• State needs to be able to identify those who are homeless during a time of crisis as they are at immediate risk—especially women who are still vulnerable. Currently operating mechanisms like “praja police” networks can be used to develop an up-to-date data base on tenants and boarders living in the city. Further, making the landlords register their boarding and rental houses at a city level office will help ensure the quality and safety of the worker and student accommodation in the cities at all times in addition to crisis situations.
• Ensuring care packages reach the needy women before they get exploited by unfavorable and opportunistic support mechanisms is extremely important.
Long Term -
Creating state run, safe shelters for families/ women who are left compromised in times of crisis due to lack of shelter, safety or are dealing with abuse. These spaces will need to fulfil basic requirements of food, and sanitation as well as access to medication and other health related requirements.

Story - Rashika
Rashika and her husband are parents to 3 children, the youngest of who was born during the pandemic. Her husband who worked in a small fancy good store lost his job, leaving them with no source of income. She has now received utility bills and rent. The family is in no position to pay for food and essentials lets alone any other expenses.

Recommendations
Immediate
• Relief and reduction on utilities for low income/ daily wage families.

Story - Ranji
Ranji is the father of two teenage daughters. He is the sole breadwinner for his family and is a taxi driver. With no work, and no savings, his wife pawned her chain to a loan shark in the area. This money helped them buy essential food items. However, they did not have any money to buy sanitary napkins for the 3 females in the house for two months.

Recommendations
Immediate
• At times of crisis, women’s health must be given priority. Access to both sanitary products in care packs distributed by the government, to be included in all essential items packs. It could also be shared separately, as a care pack, only for the women in each household, to include sanitary napkins, drugs for those with menstrual pain/ difficulty, and access to contraception. These care packages could be distributed through the suvanariya clinics.

22 June 2020
A Review

Relief efforts in the Colombo district to low-income families, daily waged workers and vulnerable communities in response to the COVID-19 pandemic in Sri Lanka

Background to the Covid-19 Response in Sri Lanka

On the 11th of March 2020 the World Health Organisation (WHO) responding to the rapidly spreading COVID-19 virus declared the outbreak of the disease a pandemic. As with all countries across the globe Sri Lanka responded with special and extraordinary measures. These included restrictions to movement through a strictly enforced curfew resulting in an island-wide lockdown to prevent the spread of infection.

Sri Lanka recorded its first COVID-19 infections on the 27th January 2020. By the first week of March there were 16 individuals under observation. On the 2nd of March Parliament was dissolved with the expectation of elections in the third week of April and a period of nominations was specified from the 12th to the 19th of March. Sri Lanka’s concerted response to the COVID-19 pandemic commenced following the close of nominations with a curfew-imposed lockdown on 20th March and elections were postponed.

In the absence of a sitting Parliament, the COVID-19 response was led by Presidential directive. Army Commander Shavendra Siva was tasked to head the ‘National Operation Centre for the Prevention of COVID-19 Outbreak’ to ‘coordinate preventive and management measures to ensure that healthcare and other services are well geared to serve the general public’. In addition, a Presidential Task Force was established on the 26th of March under extraordinary gazette notification headed by the President’s brother, Mr. Basil Rajapakse. Its remit was to ‘direct, coordinate and monitor the delivery of continuous services for the sustenance of overall community life, including the supply of food provisions produced in rural areas and producers direct to consumers giving priority to the Districts of Colombo, Kalutara, Gampaha, Puttalam, Jaffna, Mannar, Kilinochchi, Vavuniya and Mullaitivu. In April 2020, this Task Force was replaced by the Presidential Task Force on Economic Revival and Poverty Eradication with extraordinary powers to steer economic revival and poverty alleviation in the face of global and local shocks from the COVID-19 pandemic. It will direct a range of State institutions and agencies and monitor their activities. It is chaired by Mr. Basil Rajapaksa.

This review and the policy recommendations that follow are concerned with the impact of the COVID-19 response on urban poor and low income communities in Colombo and will also discuss the interventions and needs of some vulnerable groups in general. The comments will centre primarily on socio-economic concerns and will not delve into the public health response vis a vis these communities. However, we wish to state at the outset that the pandemic, the nature of the responses to it and the consequences of those responses affected low income and poor communities very differently and unequally. The
overview given here and the recommendations that follow are a reflection of these differences that are the result of deep-seated systemic and structural inequalities.

As in many parts of the world urban poor lack good infrastructure and services and are compelled to live in crowded communities which make the idea of social distancing completely infeasible. In the time of acute contagion these communities face additional health risks which are compounded by existing vulnerabilities. In addition to this a paramount concern with the lockdown was the loss of income which translated into very real spikes in poverty with more vulnerable sectors in marginalized communities falling into poverty. With this came the added insecurities of food, nutrition and basic health. For some, particularly women and children, the constricted environment of the home also added the threat of violence and abuse. All of these factors have to be taken into consideration by the continued State response.

Following a strict lockdown of over 50 days and the slow transition from the lockdown, the State response must now strengthen social and economic measures to support the urban poor and vulnerable low income communities, including women, children, the elderly and the disabled. The recovery must take into account new vulnerabilities faced by poverty-stricken communities such as financial instabilities due to the loss of jobs and access to income generating work, added health risks, food and nutrition insecurities, exacerbated poverty and indebtedness.

**Status of low income communities in the Colombo District**

The urban poor in Colombo city comprise of various categories of persons and amount to over a half million persons\(^1\), taking Urban Development Authority figures into consideration. While spread out through the city comparatively large communities of people inhabit areas such as Dematagoda, Wanathamulla, Kotahena, Kirulapone in which the population density is greater than other localities. After the end of the war in May 2009, Colombo was to be transformed into a ‘world class city’ through the Urban Regeneration Project (URP) of the Urban Development Authority (UDA). The UDA was functioning under the (then) newly created Ministry of Defense and Urban Development and the URP sought to move around 65,000 working class poor families, around half a million people, from their homes in central Colombo (mainly in the areas of Kompannyawediya, Torrington, Narahenpita) to government built high rise complexes in the outskirts of the City – Dematagoda, Henamulla, Salamulla. A significant proportion of urban poor were thus compelled to move from familiar locations and communities and livelihood access and adapt to new living conditions and environments. People thus relocated face tremendous difficulties and hardships ranging from security issues, debt, breakdown of care and kinship networks, lack of space and privacy, loss of livelihoods and income generation and women are disproportionately affected by all this.

The categories of urban poor are also many and diverse and range from the self employed to the daily waged and casual labour. The lockdown imposed restrictions also failed to take into account the numbers of migrant workers, renters and homeless people who do not

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have access to kitchens and were reliant on eateries or people providing them with food. Nor were the special needs of the disabled, aged, sick and single men and women with no care support taken into account.

The lockdown also surfaced other factors of vulnerability that must be dealt with in the post-lockdown transition. Economic vulnerabilities have been identified among occupation groups such as domestic workers, food vendors, those working in eateries and small enterprises. Also adversely affected were workers such as tailors, barbers, drivers and those engaged in the transport sector, hospitality sector, restaurant sector, construction sector, food and goods retailing and so on which provided work to a large segment of Colombo’s low income dwellers. These workers were not categorized among the urban poor and were not entitled to welfare benefits such as Samurdhi.

The diversity of daily wage work, the precarious lives people lead, the sudden and abrupt loss of livelihood and income were unfortunately not taken into adequate consideration when Sri Lanka went into lockdown. In addition, the public health response to the pandemic which required social distancing and heightened levels of sanitation were almost impossible in over-crowded and under resourced localities in which the urban poor are compelled to live.

Overnight, people who were able to live manageable and fairly comfortable lives because of their daily wage work or whatever informal livelihood activity that they were engaged in, were unable to cope.

The pandemic and the response to it increased the vulnerability of the poor and threw low income households in the city into further debt dependence as they fought for survival. While a debt moratorium was offered by the Central Bank to buffer and support private enterprise this benefit overlooked microfinance and the poor, many of whom are in the informal sector and whose incomes often outstrip their basic expenditure and whose debt is at unsustainable levels. They are further challenged by the lack of social security and services and are expected to deal individually with their debt burden.

**Relief Measures**

During the lockdown, those among the urban poor assisted relatively quickly were Samurdhi recipients. In addition, a further sum of Rs.5000/- was allocated to low income groups, particularly those who lost their livelihoods or had no access to formal or informal sector employment. Under this scheme it was estimated that approximately 1.9 million families were eligible for assistance. Among them were teachers, private bus drivers, conductors, the Ayurveda medicine council, laborers, small scale tea estate owners, provincial reporters, three-wheel drivers, lottery sellers all of whom were subject to eligibility criteria. Also eligible for this assistance were senior citizens, disabled persons and kidney patients from low income families. The allowance was announced on the 30th of March and was primarily

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for those who lost their livelihood and income due to the lockdown. The government circular announcing the payment promised this as a monthly stipend. A registration process required potential recipients to provide sufficient information to meet eligibility criteria. Those whose employment was affected had to obtain a recommendation from the village society which in turn needed to be verified by their respective Divisional Secretaries which were then presented to their respective committees formed under the Grama Niladharis. All committee members had to collectively approve each recipient of the 5000 rupees allowance. The committee had to include at least 5 members, including a local government council member, the Grama Niladari, a family health worker, economic development officer and Samurdhi officer.

Challenges Posed by the Lockdown

Within days of the curfew low income and poor households in Colombo were running out of food since they had no surplus and families began cutting back on meals compromising on nutrition.

The restrictions also did not take into consideration the sheer number of the disabled, sick, elderly, migrant workers, renters or homeless. Financial anxieties increased with expenses such as rent payments, utility bills, mortgage and loan repayments, school fees, and monthly prescription medicine. These accumulated financial expenses continue to be a burden post the lockdown, particularly for those unable to resume their accustomed livelihoods.

Those who were Samurdhi beneficiaries were the first to receive any kind of payment. In some areas this was well organised and functioned efficiently. In others however the Samurdhi payments were accessed with difficulty with a lot of waiting at Grama Niladhari offices, and back and forth visits. Accessing the payment of Rs.5000/- was also fraught with problems as there were no set guidelines on eligibility made available to the public with many people having no access to official channels of information. Among the ineligible were those living on rent. Households with more than one nuclear family living together (as is the case with many families in working class poor communities) were entitled to only one payment. In many instances people lacked the required documents to fulfil eligibility criteria and many spent a lot of time writing appeal letters. The Rs.5000/- payment was expected to be paid monthly (the lockdown lasted over 50 days and was extended in parts of Colombo) yet only one payment was received and the payment for May was not made in most areas. The payment itself although welcome was inadequate considering the expenses people face every month, but it did at least ensure some ability to buy food and dry rations.

With the loss of income poor families were compelled to use their savings for food and essential provisions. Those with no savings or whose savings were exhausted borrowed from families or communities and many turned to moneylenders adding the burden of debt repayment to daily economic anxieties. Women bore the burden of food provision disproportionately. They had to pay multiple visits to the Grama Niladharis or co-operatives.

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while also being responsible for cooking, cleaning and care work within the household and they had to keep children occupied and fed.

**Gender discrimination**

Census and other official documents invariably designate the male resident, head of household. As a consequence it is men who are officially recognized as recipients of relief grants, particularly those of a monetary nature. With the introduction of the Rs.5000/- payment there were allegations that in some cases only male heads of the household were allowed to register for the grant. While this was not widely practiced, some women did find GramaNiladharies making the payment directly to men. Many women attest that when the men receive such allowances, they become the sole beneficiary of the money. Men who are prone to substance abuse tend to spend much of the allowance on alcohol, drugs or tobacco, while abusive men refuse to share the funds on family needs. We also came across women who had no access to maintenance payments because their husbands were defaulting or absconding and they had no recourse to the courts because these were not functioning.

**Gender violence**

It was observed that living in close proximity and in lockdown often had detrimental psychological effects on families. A significant incidence of domestic violence was reported with women bearing the brunt of the abuse while in some instances, children, the elderly and those at risk within LGBTQI communities were also forced to endure domestic abuse. For women in existing situations of domestic abuse, the home and the lockdown which compelled her to remain within its confines exacerbated the danger and no adequate solutions were available. While helplines were established women often had no way of accessing them. Many poor women have no means or the privacy to do so. There was no established community support that provided alternate shelters. They couldn’t leave their homes because children/elderly had to be cared for. During curfew, some women did not want to report their husbands for fear they would be remanded with an increased risk of contracting the covid-19 virus. For households where the abusive man was the sole income earner making a complaint put the entire household at risk.

**At-risk Communities**

**The elderly and the disabled**

The on-going pandemic presents increased risks for the elderly and people with disabilities. Increased health risks, displacement, further dependency, disrupted access to assistance, restricted mobility and limited provisions are some of their major concerns. Considering that the safety and wellbeing of the elderly and the differently abled during lockdown were of immediate concern the government released specific guidelines for staying at home during the pandemic. As part of the government’s urgent grant scheme a sum of Rs.5000 was provided to senior citizens who were eligible for a standard government allowance. The disabled and special needs population was also provided with similar assistance. According
to the National Secretariat for the elderly 3.1 million elders over the age of 70 had been provided with the allowance during the lockdown.

For the low-income elderly the Public Welfare Assistance Allowance (PAMA), the Elderly Assistance Programme (EAP) and the Samurdhi subsidy provides an allowance to households with a monthly income below the minimum amount. The PAMA allowance is also provided to young and vulnerable individuals with disabilities or chronic illnesses. While the PAMA allowances range from LKR 250 – 3000 to eligible households, the EAP allowance ranges from LKR 1000 – 2000. In 2018 the government also introduced a payment scheme of LKR 2000 for the elderly over 70 years of age with an income of less than LKR 3000.

The allowance programmes available for the low-income elderly is at a minimum and while the one time grant is a vital support it may not be sufficient to sustain their needs throughout the course of the pandemic. It is also known that elderly women tend to face higher risk of poverty than men due to the existing income inequalities, low wage earnings over the years, longevity and family responsibilities. Therefore the existing allowances don’t fully meet the needs of older women.

The LGBTIQ+ community and Sex workers

UNAIDS and the Global Network of Sex Work Projects (NSWP) released a joint appeal for countries to take immediate action to protect the health and rights of sex workers whose livelihood is affected by the ongoing pandemic. Due to discriminatory laws and social stigma sex workers have been left unprotected and unsupported during this pandemic. The lack of a government response to support sex workers and their loss of income has put the community increasingly at risk and under tremendous stress. The few customers they have been getting during this time leave sex workers vulnerable to contracting the virus and breaking curfew protocols. This in turn puts them at risk of infection on the one hand and arrest on the other. They are also at risk of coming into contact with authorities who abuse or discriminate against them. They are also further stigmatized through accusations of spreading the virus. The community based support they received is not sustainable and not a substitute for government relief. Given their risks of contracting COVID-19, monetary relief would preclude this risk and keep them secure economically and from infection.

Further beach boys, nachchi and jogi dancers and LGBTIQ+ community members living in low income settlements of urban Colombo have also been deeply affected. The needy among this population is expanding as income loss and resultant shortage of food and nutrition becomes more widespread. In addition, many within the low waged LGBTIQ+ community, particularly those employed in economically vulnerable enterprises and NGO run projects which cannot be conducted online are experiencing economic stress and hardship meeting daily food and non-food needs.

Members of SOGIESC communities are trapped at their temporary residences located in urban areas where they have migrated for employment without the means to pay for rent due to unemployment and limited funds because many such persons are daily wage earners or are in the informal sector and therefore have no access to workers’ rights. They risk prosecution if they were to register for relief as they also face additional security risks on
the sole basis that they identify as LGBTIQ+. Some among them have been forced to return to unsupportive/abusive families. Other than the scarcity of material needs, isolated individuals are at a risk of emotional distress and require mental health support.

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Compiled by Women and Media Collective in consultation with a group of activists and practitioners working with urban low income and poor communities and other vulnerable groups in Colombo

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