

Pandemic Pressures: Socio-Economic Challenges and Coping Strategies of Unorganized Women Workers in India

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Abstract

The COVID-19 pandemic has intensified the vulnerabilities of India's unorganized women workers, revealing and exacerbating long-standing socio-economic challenges. This review synthesizes existing studies and reports to explore the impact of the pandemic on employment, income security, access to social protection, and the coping strategies adopted by unorganized women workers. Drawing from diverse academic and policy-based literature, the article identifies six major thematic areas that reflect the lived realities of these women during the crisis. The paper also discusses the inadequacies in government responses and emphasizes the need for inclusive, gender-sensitive labour and welfare policies.

Keywords: COVID-19, women workers, Informal sector, , Socio-economic impact, Coping strategies, India.

Introduction

India's informal sector is the backbone of its economy, employing over 90% of its labor force, with a significant proportion being women (ILO, 2020). These women engage in various informal occupations such as domestic work, agriculture, construction, street vending, and home-based manufacturing. Despite their vital contributions, they remain excluded from formal labour rights, wage security, and social protection mechanisms. The advent of the COVID-19 pandemic in early 2020 triggered nationwide lockdowns, paralyzing informal economic activities and disproportionately impacting unorganized women workers (Kesar et al., 2020; Chandrasekhar and Ghosh, 2020).

The pandemic not only disrupted work and income but also exposed the structural inequalities embedded in India's labour system. Women in informal employment were among the first to lose their jobs and the last to regain them (Deshpande, 2020). Most lacked savings, access to digital technology, or alternative income sources, thereby compounding their economic vulnerability. For many, the burden of unpaid care work also increased, as schools shut down and family members fell ill (Agarwal, 2021).

Moreover, government relief measures, though well-intentioned, were often inaccessible due to lack of awareness, bureaucratic barriers, and exclusion from digital systems. The Pradhan Mantri Garib Kalyan Yojana (PMGKY), for example, aimed to offer cash and food aid, but many informal women workers did not benefit due to identification and documentation issues (Raveendran, 2021). Migrant women workers faced unique challenges, including sudden displacement, poor shelter conditions, and heightened exposure to exploitation and violence.

This review aims to provide a holistic understanding of the socio-economic effects of the COVID-19 pandemic on unorganized women workers in India. It examines both the immediate and long-term consequences through a thematic analysis of available literature. The study further explores the coping mechanisms adopted by these women, from community-based solutions to informal credit networks and adaptive work strategies. It concludes by identifying critical policy gaps and proposing recommendations for a more equitable labour and social welfare framework.

Methods

This review followed a structured approach using peer-reviewed articles, government and NGO reports, and grey literature published between March 2020 and December 2023. Inclusion criteria focused on empirical and theoretical works addressing socio-economic challenges, policy interventions, and coping strategies among unorganized women workers in the Indian context.

Search Strategy and Data Extraction

A systematic search was conducted using databases such as Google Scholar, JSTOR, Scopus, and PubMed. Keywords included "COVID-19," "unorganized women workers," "informal sector,"

“socio-economic impact,” and “coping strategies.” Grey literature from reputed organizations like ILO, SEWA, Oxfam India, and the Ministry of Labour and Employment was also reviewed. Initial searches yielded 200+ documents; after screening titles, abstracts, and full texts, 75 relevant sources were selected for thematic analysis. Data was extracted based on relevance to employment, income, social security, and gender-specific issues. Only literature with verifiable methodology and contextual relevance to India was included. The extracted data was organized by key themes to enable comparative and critical insights.

Data Analysis

Thematic analysis was employed to synthesize findings across diverse literature sources (Braun and Clarke, 2006; Nowell et al., 2017). The selected materials were coded manually based on recurring themes such as employment loss, social protection gaps, gender roles, health challenges, coping strategies, and policy responses. Each theme was further broken down into sub-themes for nuanced understanding. For example, within employment loss, sub-themes included occupational sectors, rural vs. urban impacts, and migrant labour experiences. This approach allowed for the integration of both quantitative data (e.g., employment statistics, income losses) and qualitative insights (e.g., lived experiences, narratives). Themes were compared across different sources to identify consensus, contradictions, and gaps. Emphasis was placed on capturing the intersectional dimensions of gender, caste, class, and geography. The findings were synthesized to inform the discussion section, where patterns were interpreted in light of structural inequalities and policy frameworks.

Results

Background

The review revealed that unorganized women workers in India experienced multidimensional hardships during the COVID-19 pandemic. Employment disruptions were most acute in sectors like domestic work, construction, and petty trade—fields predominantly occupied by women. The lack of formal contracts, savings, and access to social security schemes further aggravated their vulnerabilities (ILO, 2020). Government interventions provided some relief but remained largely

inadequate due to systemic exclusions and weak implementation (Deshpande, 2020). Simultaneously, women employed various coping mechanisms, including borrowing from informal sources, reducing food consumption, and seeking alternative low-paid work (Agarwal, 2021). Community networks and women's collectives emerged as critical sources of support. However, these strategies were largely survivalist rather than transformative. Six major themes emerged from the review: employment and livelihood loss, food and income insecurity, social protection and welfare gaps, health and psychological stress, gendered unpaid labour, and community resilience and adaptation.

Major Themes:

1. Employment and Livelihood Loss

The sudden lockdown led to massive job losses among unorganized women workers, especially in urban centers. Domestic workers, construction labourers, and street vendors—predominantly women—saw their livelihoods vanish overnight (Chaudhary, 2021). Unlike formal workers, they lacked legal contracts or employer accountability, leaving them with no compensation or job security. A survey by SEWA (2021) indicated that over 70% of its women members lost work during the lockdown. Migrant women workers were doubly hit, facing both job loss and displacement. Those engaged in home-based production reported halted supply chains and cancelled orders, severely disrupting their income. The gendered nature of job recovery post-lockdown was evident, with men regaining employment at a faster rate compared to women (Deshpande, 2020). Many women were forced to shift to lower-paying and more exploitative work. The loss of employment not only impacted financial stability but also their social mobility and bargaining power within households and communities.

2. Food and Income Insecurity

Loss of employment quickly translated into food insecurity, with many women unable to afford basic staples for their families. The disruption of the Public Distribution System (PDS) and inadequate outreach of relief schemes further deepened this crisis (Oxfam India, 2021). Informal workers reported skipping meals, reducing nutritional intake, and prioritizing children's food needs

over their own. The lack of access to savings or insurance made them heavily reliant on informal loans, often at high interest rates. Cash transfers announced by the government under PMGKY were insufficient and failed to reach a large segment of women due to lack of bank accounts or Aadhaar-linked identification (Raveendran, 2021). Income loss also restricted access to healthcare, sanitation, and hygiene essentials, compounding the risk of illness. The pressure to feed their families forced many women to accept exploitative work or engage in multiple insecure jobs. The overall impact of the pandemic thus pushed many households into chronic poverty and debt.

3. Social Protection and Welfare Gaps

One of the glaring challenges faced by unorganized women workers during the pandemic was the near-total absence of effective social protection. The lack of universal health insurance, maternity benefits, paid leave, or pension support exposed the systemic exclusions in India's welfare framework (ILO, 2020). While schemes like PMGKY and Pradhan Mantri Jan Dhan Yojana aimed to offer immediate relief, they often failed to reach women in the informal sector due to technological, logistical, or documentary barriers (Agarwal, 2021). Women without ration cards, especially migrants, were excluded from PDS support. Moreover, digital modes of transferring aid often bypassed those without mobile phones or digital literacy. Even in cases where women were registered under welfare schemes, delays and leakages in disbursement limited the effectiveness of relief measures. These gaps underline the urgent need for a gender-responsive, inclusive social security net that addresses the specific vulnerabilities of informal women workers across rural and urban India.

4. Health and Psychological Stress

The pandemic placed enormous pressure on the mental and physical health of unorganized women workers. With restricted access to healthcare services, women suffering from chronic illnesses or maternal health issues faced increased risks (Patel et al., 2021). COVID-related misinformation, fear of infection, and inability to afford medical care intensified psychological stress. Additionally, the burden of care responsibilities escalated, with women tending to sick family members while struggling to maintain economic stability. Reports indicated a sharp rise in cases of anxiety,

depression, and trauma, particularly among women in overcrowded urban slums and migrant shelters (Bharadwaj & Singh, 2022). The stigma associated with illness further discouraged many from seeking help. Domestic violence also saw a spike, with lockdowns trapping women in abusive environments without access to support services. The compounded effects of health insecurity, economic hardship, and emotional stress created a prolonged state of crisis, underlining the importance of integrating psychosocial care into relief and recovery programs.

5. Gendered Unpaid Labor

The COVID-19 crisis reinforced traditional gender roles, with unorganized women workers facing an exponential increase in unpaid care work. With schools and childcare centers closed, and family members confined at home, the domestic burden fell disproportionately on women (Deshpande, 2020). This limited their ability to seek employment or participate in public work programs. Women also reported a lack of recognition for their domestic contributions, which exacerbated feelings of invisibility and fatigue (Oxfam India, 2021). In rural areas, women had to manage additional tasks such as fetching water and collecting fuel, often with minimal infrastructure support. In urban households, space constraints and constant caregiving responsibilities created mental and physical exhaustion. While men also faced job losses, household responsibilities did not redistribute equitably, revealing deep-rooted gender norms. The gendered division of labour during the pandemic exposed the systemic undervaluation of unpaid care work and highlighted the need for policy interventions that address time poverty and promote shared responsibilities.

6. Community Resilience and Adaptation

Despite immense challenges, unorganized women workers demonstrated resilience by forming support networks and adapting to the crisis. Women's self-help groups (SHGs) and community organizations played pivotal roles in providing food, information, and emotional support (SEWA, 2021). Some SHGs pivoted to mask-making, food distribution, or digital literacy training, enabling women to earn small incomes. Informal support systems, such as neighbourhood loan circles or barter exchanges, helped families cope with cash shortages. Local NGOs also facilitated access to health services and relief materials. However, these coping mechanisms were often localized and

under-resourced. The success of such community-based responses underscores the importance of strengthening grassroots women's organizations in disaster preparedness and recovery planning. It also reveals the potential for transformative change when women are empowered to lead and organize. While these efforts provided temporary relief, long-term support from the state remains crucial for building resilience and sustainable livelihoods in the informal sector.

Analysis and Discussion

The COVID-19 pandemic exposed and intensified the vulnerabilities of India's informal labor economy, especially affecting women who form a large yet often overlooked part of this workforce. Women faced greater job and income losses and were largely invisible in policy measures, highlighting the need for their formal recognition and support (Raveendran, 2020; Kabeer and Mahmud, 2013). The findings from this review clearly illustrate how deeply entrenched structural inequalities intersected with pandemic-induced disruptions, producing gender-specific socio-economic consequences. The six themes—employment loss, food and income insecurity, gaps in social protection, health and psychological stress, unpaid care burdens, and community resilience—collectively offer a comprehensive lens through which to understand these impacts.

Intersectionality and Structural Marginalization

Women in the unorganized sector are positioned at the intersection of multiple vulnerabilities: gender, class, caste, and geographic location. The intersectional lens is crucial in interpreting the compounded disadvantages experienced by women from Dalit, Adivasi, and minority communities. Studies have shown that these groups were more likely to experience exclusion from relief services and faced greater barriers to healthcare and employment recovery (Oxfam India, 2021). These realities reinforce the need for disaggregated data and targeted policy responses that do not treat the informal workforce as a monolith.

Employment and Livelihood Disruption

The most immediate and visible effect of the pandemic was job loss and livelihood disruption. According to the Centre for Monitoring Indian Economy (CMIE), women's workforce participation hit a historic low during the initial lockdowns, with many losing works permanently due to their informal employment status (Deshpande, 2020). Unlike men, who in some sectors could adapt through remote work, women in domestic labour, street vending, and home-based manufacturing had no such option.

A particularly distressing pattern emerged among migrant women workers who, in the absence of transport or state support, undertook perilous journeys home and often returned to environments with little or no job prospects (Raveendran, 2021). The lack of formal contracts or legal safeguards left them without severance pay, health insurance, or re-employment assurances (Mehrotra and Parida, 2017). Such conditions underscore the importance of formalizing at least basic labour rights for unorganized workers to prevent mass precarity in times of crisis (Srivastava, 2020).

Food and Income Insecurity

As income streams dried up, food insecurity rose sharply among informal women workers. Multiple surveys during the pandemic period reported families skipping meals, reducing portion sizes, and eliminating protein-rich foods from diets (Agarwal, 2021). Women, especially mothers, often bore the brunt of this insecurity, prioritizing the needs of children and elders.

Cash transfer schemes, such as the PMGKY, offered some relief but were plagued by implementation challenges. The exclusion of large numbers of women from formal banking systems, lack of digital access, and flawed identification mechanisms meant many did not receive these entitlements (ILO, 2020). These findings point to the urgent need for universal, accessible social assistance mechanisms that go beyond traditional identity-based targeting.

Gaps in Social Protection and Welfare

India's social security net is historically thin for informal workers, and this deficiency became glaring during the pandemic. Schemes such as the Public Distribution System (PDS) and Jan Dhan

Yojana were valuable but insufficient. Moreover, many women workers were unaware of their eligibility or faced digital barriers in accessing relief (Deshpande, 2020). The situation was exacerbated for migrant women, who were frequently caught between rural and urban jurisdictions, thereby slipping through the cracks of location-based assistance.

This situation reflects a systemic issue: the state's historical neglect of informal women workers in labour policy and welfare planning. A transformative approach would require the expansion of social protection coverage, including universal healthcare, maternity benefits, and unemployment assistance for informal women workers, accompanied by inclusive digital infrastructure and local facilitation (ILO, 2018; Ministry of Labour and Employment, 2020; Agarwal, 2010).

Health and Psychological Stress

The pandemic also illuminated the often-invisible toll on mental health. Anxiety about income, fear of infection, and isolation from social networks contributed to heightened psychological stress among women workers. According to SEWA Bharat (2021), members reported rising cases of depression and psychosomatic symptoms during lockdowns, with few avenues for care or counseling.

Simultaneously, access to physical healthcare suffered due to overburdened hospitals and disrupted transport services. During the COVID-19 lockdowns, healthcare systems were largely redirected toward pandemic response, leaving essential services for women, especially reproductive and maternal care, severely neglected. Government data and field reports indicate significant declines in institutional deliveries, antenatal care visits, and immunizations (Sharma et al. 1538). This deprioritization of women's health highlights an embedded gender bias in emergency health response frameworks, where the needs of marginalized female populations are often sidelined. Moreover, urban slum and rural women experienced disproportionate barriers to healthcare, including stigma, lack of information, and limited mobility, which further compounded their vulnerability (Josyula et al., 2021). These findings underscore the urgent need to mainstream gender-sensitive healthcare planning and to integrate community-based mental health and

reproductive health services into primary health centers, especially in rural and peri-urban areas, to ensure equity in crisis response.

Gendered Unpaid Labor and Domestic Inequalities

One of the pandemic's less visible but deeply consequential impacts was the surge in unpaid care work. Already responsible for the majority of household labor, unorganized women workers found their workload doubling with school closures and health crises. This "time poverty" reduced their availability for income-generating activities, further entrenching economic dependence and reinforcing patriarchal norms (Agarwal, 2021).

In many households, especially in conservative or rural settings, women's economic roles were deprioritized, reinforcing entrenched gender hierarchies that historically undervalue their labor. The pandemic intensified these dynamics, as women were often expected to absorb additional domestic responsibilities while giving up paid work opportunities. Evidence from recent surveys indicates that while men returned to the labour market more quickly after lockdowns, women remained trapped in unpaid care roles (Deshpande, 2020). Although some families did adapt with modest shifts in domestic roles—such as shared childcare or household chores—these instances were largely exceptions rather than the norm, and often confined to urban or more educated settings (Agarwal, 2020). Addressing this structural imbalance requires long-term, systemic interventions, including the expansion of public childcare infrastructure, implementation of paid family leave policies, and sustained public campaigns aimed at promoting the equitable distribution of domestic work across genders.

Community Resilience and Adaptive Strategies

Despite systemic neglect, the resilience demonstrated by unorganized women workers and their communities was remarkable. Grassroots organizations like SEWA enabled women to access relief, navigate bureaucratic processes, and share coping strategies (SEWA Bharat, 2021). Informal savings groups and skill-based pivots—such as tailoring, mask-making, or small-scale food services—offered temporary buffers against economic shocks.

However, the capacity for such adaptations varied significantly. Those without community ties or digital access were often excluded. The review suggests that while resilience at the community level is commendable, it should not be romanticized as a substitute for structural change. Instead, it must be supported through investments in community-based organizations, localized training, and inclusive platforms for knowledge-sharing.

Policy Implications

The review underscores that recovery for informal women workers cannot be limited to economic revival. It must involve a reimagining of labour rights, gender norms, and welfare mechanisms. First, there is an urgent need for a gender-inclusive labour registry and universal social protection floors. Second, policies should explicitly acknowledge unpaid care work, perhaps by integrating it into the GDP framework or compensating it through state-supported programs. Third, strengthening digital and financial literacy among women in the informal sector can facilitate their integration into formal welfare systems.

Finally, the review emphasizes that disaster preparedness and pandemic response must include gender-sensitive planning. Future relief programs should ensure decentralized delivery mechanisms, inclusive technology, and flexible documentation norms to ensure that no worker is left behind.

Limitations

This review is subject to several limitations. First, while the study draws on a wide range of published literature, it remains dependent on the availability and quality of existing data, which may not fully capture the nuanced experiences of marginalized subgroups such as Dalit, tribal, and disabled women workers. Second, much of the literature reviewed was produced during or shortly after the first two waves of the COVID-19 pandemic, which may not reflect longer-term outcomes or evolving policy responses. Third, despite efforts to include grey literature and non-academic sources, there may be underrepresentation of grassroots voices and undocumented coping mechanisms. Lastly, this review does not include field-based primary data, which limits the depth

of context-specific insights. Future research should incorporate ethnographic and longitudinal methods to address these gaps and better inform policy.

Conclusion

The COVID-19 pandemic served as a stark reminder of the fragile livelihoods and systemic exclusions faced by unorganized women workers in India. This review revealed the multi-layered impacts of the crisis, including loss of employment, food insecurity, poor access to health and welfare systems, and a sharp rise in unpaid labour. Despite these adversities, women exhibited resilience through community networks, informal support systems, and adaptive livelihood strategies. However, their coping mechanisms were mostly survival-oriented and cannot replace the need for structural reforms.

To build a more inclusive recovery, policy responses must move beyond temporary relief and address the deep-rooted inequalities that marginalize women in the informal sector. This includes extending labour protections, recognizing unpaid care work, ensuring universal access to healthcare and social security, and investing in digital and financial inclusion. The lived realities of these women must be central to India's post-pandemic reconstruction efforts. Without deliberate, gender-sensitive reforms, the goal of equitable development will remain elusive.

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