

COVID-19 AND THE MIGRANT POPULATION: THE RESILIENCE OF SOUTH ASIANS

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ABSTRACT

Migration has appeared as a constitutive aspect of global reality today. While the COVID-19 pandemic has spared no single community, the migrant population has been the hardest hit. The woes of this population have been exacerbated by imposed immobility, restrictions, xenophobic treatment, residential status, poor living conditions, and limited access to health and protection. Millions of jobs have vanished. Millions of migrants got stranded either in their destination or origin countries and are unsure if they can return to their work. Against this backdrop, they try to stand up by seeking resilience. This study looks into how migrants in varying situations—those who returned home, those trapped in transit, and those who remained in the host nations—gain stability in the devastating pandemic. While a wealth of literature has been generated, the issue of migrants' resilience has received little attention. This article employs content analysis to examine the gravity of the impact of the pandemic on the migrants and the process of developing their resilience. This article contributes to the broader debate about the

dynamics of migration, COVID-19, and resilience. This research has implications for the policymakers of both the receiving and sending countries.

Keywords: Migration, vulnerability, resilience, economy, COVID-19

INTRODUCTION

Millions of people have endured difficulty and adversity as a result of the global coronavirus or COVID-19 outbreak. It is one of the most devastating pandemics the world has seen in recent times. Never before has resilience been more critical than in this trying time. The shocks of the pandemic can have a wide variety of unanticipated consequences on health systems. While everyone's reaction to a crisis varies according to their cultural, societal, and religious upbringing, most of us suffer fear in the face of a pandemic, which generates a variety of physiological and psychological responses. Maintaining a more expansive, optimistic viewpoint will assist in dealing with stress and fear in a healthy manner (O'Donnell 2020).

The COVID-19 pandemic's pervasiveness threatens to damage the world economy: a decrease of around 8%-9% (approximately USD9 trillion) in the global GDP (Chowdhury and Chakraborty 2021) also resulted in widespread unemployment and compensation cuts. With employment losses, income fell precipitously. Along with a variety of economic activities and revenues from various sources, remittances (which averaged USD315 billion in 2019) have been an important and steady source of income for several developing countries in the Asia Pacific region. They boost both the public aggregate demand and national debt support by increasing the foreign exchange base. Overall, remittance flows are considered countercyclical since the migrants transfer money to their families, many of whom are likely to be experiencing economic difficulty (Ullah 2010; Ullah and Haque 2020). Remittances have a multiplier effect on consumption and investment at the micro and macro levels since they help to cover import dues and government obligations by increasing the foreign currency reserve, and so migrants' remittances protect economies against fiscal shocks and natural disasters. Unlike other disasters and shocks, the COVID-19 pandemic has a devastating impact on both migrant sources and destination countries (Takenaka et al. 2020; Ullah et al. 2021).

The measures undertaken to thwart the spread of COVID-19 have had a massive influence on the world's migrant population. In Asia Pacific, the impact on the migrants has been extremely harsh. The number of migrants trapped in transit, locked up in lockdown destinations, and stuck in origin countries exceeded 70 million. Under these conditions, millions of them succumbed to the mentality that "whatever will be will be". Their key priority in that moment was to remain resilient. They accepted that this pandemic was beyond their control. They also learned that recovering from the immediate impact of COVID-19 and being resilient to unforeseen events (Integra 2020) would be the best ways to deal with the problem.

Assessing the impact of COVID-19 on remittances flow and job opportunities abroad and taking immediate and integrated action to mitigate the negative consequences on the availability of food, education, health services, and remittances for migrants (Chowdhury and Chakraborty 2021) is critical at this time. Already vulnerable, the migrant population has been thrown into turmoil as the world lost around 500 million full-time employments due to the pandemic. Migrants are not exempt; in fact, they have lost a disproportionately higher number of employments. A large proportion of people are either stranded at their destination without work, in transit, or in their home nations. Many of them have been financially bankrupt, emotionally distraught, and physically vulnerable. There are numerous claims that they are barred from benefiting from protective regimes. Racist and xenophobic incidents have been widely reported in connection with the pandemic (Ullah et al. 2021, 2019). Refugees and others living on the outskirts of society have been blamed for spreading the virus.

A billion migrants (both internal and international) have risen to the occasion in order to get the global economy moving. To that end, resilience is critical for migrants to be able to stand. A resilient person is empowered, healthy, and has the knowledge, skills, competencies, and mindset to adapt to new events and better her/his life, as well as the lives of her/his family, friends, and community. Migrants who are resilient may be able to better withstand external shocks encountered throughout their journey (The International Federation of Red Cross and Red Crescent Societies [IFRC] 2016: 10).

Resilience is a characteristic that helps one to cope with and overcome hardship. On the other hand, resilience is something we develop through time, interaction, and experiences. Hence, we all react uniquely to stress and misfortune, such as the COVID-19 outbreak (Sagan et al. 2021). To better understand how shocks affect health systems, a holistic approach is required

that incorporates all functions and their interrelationships (O'Donnell 2020). One technique to establish the ideal course of action in the aftermath of a major shock such as the COVID-19 pandemic, is to undertake a more indepth analysis that incorporates industries and larger contextual elements. Shock-resistant medical systems respond by implementing procedures to ensure the continuing operation of medical system functions, hence ensuring the system's overall performance (Gilmore et al. 2020).

Resilience refers to an individual's capacity to bounce back from adversity as a result of a few acquired and evolved behaviours, attitudes, and actions (Gilmore et al. 2020). Resilience is not a state of being, but a collection of talents acquired through adversity. Resilience does not imply reverting to a previous state. It is about allowing the light to show through the cracks in yourself or the system, allowing the light to become stronger where it has been damaged, and allowing one to be altered (Sagan et al. 2021). Resilience does not entail a return to pre-crisis levels of performance. It implies a significant shift in one's everyday routine. This is something we witness in children and teenagers who have endured personal trauma. They possess the greatest tenacity.

This article aims to look into how migrant workers from South Asia build resilience in the face of adversity caused by COVID-19. This study delves deeper into elements of their resilience and policy prescriptions to reduce the risk of COVID-19 in the current context (job status, economic recession, work-related uncertainties, and insecurities related to food, health access, literacy, well-being and gender).

Between August 2020 and May 2021, 40 informal interviews (via Skype and WhatsApp) were conducted with South Asian migrants living in Singapore, Brunei, the Philippines, Hong Kong, Macau, the United States (Maryland, New York, Newark, Florida, Atlanta, and Ohio), Copenhagen (Denmark), Düsseldorf (Germany), Amsterdam (Netherlands), France, Spain, Italy, Qatar, Kuwait, Saudi Arabia, Bangladesh, India, and Nepal. These respondents were chosen using the snowball method. The focus was on low-skilled and semi-skilled migrants vulnerable to COVID-19. Those who could return home, those trapped in transit, and those who could not leave their host destinations were all included in this study. The respondents were questioned about their position in their place/country (in terms of their job, contract, health access, contacts with their relatives, money, the prospect of returning home or working, etc.), and how their lives had been affected by the pandemic. They were also asked what their plans were if the (then) current situation persisted for an indefinite amount of time.

Only those who met the study's criteria were included. Respondents must be at least 18 years old and have spent at least two years overseas; they must also be low-skilled and semi-skilled migrants. The sample consisted of 12 participants (11 men and 1 woman) from India, 16 (14 men and 2 women) from Bangladesh, 7 (5 men and 2 women) from Nepal, and 5 (men) from Pakistan. The gender distribution in the sample is obviously skewed. The length of time spent overseas ranged between 2 and 15 years. More than half of the respondents (41%) were between the ages of 26 and 35 years old, 26% were between the ages of 18 and 25 years old, 22% were between the ages of 36 and 45 years old, and 11% were between the ages of 46 and 55 years old. Each migrant worker was approached personally and briefed about the research's purpose and importance. They were then given the option to ask any questions they had about the interview and were told that their responses would be kept private and anonymous. They were also instructed that they may only answer questions that they felt comfortable answering, and that they could refuse to answer any questions that made them uncomfortable. The interviewer and participants agreed on a mutually agreeable date and time for the interview.

The structure of this article is as follows: the next section summarises the theory of resilience while the following section discusses the overview of the context of COVID-19 and its effects on the South Asian migrant population. The final section discusses migrants' resilience to overcome difficulties and vulnerabilities.

SOUTH ASIAN MIGRANT POPULATIONS IN THE PANDEMIC

The COVID-19 pandemic has not spared any country, whether a sending or a receiving country, rich or poor. Of course, the pandemic adds additional challenges for countries that rely on migrants for labour and those that rely on remittances for their fiscal budget. The coronavirus outbreak has had an impact on both international and domestic migration in South Asia, as it has in other regions of the world. As the crisis developed, many overseas migrants intended to return to their home countries in South Asia, such as India, Pakistan, and Bangladesh, but were unable to do so due to travel restrictions (World Bank 2020). During any recession, migrants are more exposed to job losses and income drops than non-migrants. The COVID-19 is no different. The COVID-19 response increased their precarity. When viewed through the lens of migration, the COVID-19-induced

economic crisis may be much longer, deeper, and more widespread than the authors' estimates suggest. As the harvest season begins in many countries, labour issues in the agricultural sectors of industrial countries that rely on migrant labourers become apparent. Labour shortages have created concerns about food security due to agriculture's seasonality. The crisis has restricted employees' cross-sectoral mobility, which could be especially problematic for semi- or low-skilled migrant workers and those who are undocumented (World Bank 2020).

Prior to the COVID-19 pandemic, interregional migration between South Asian countries was extensive. These migrations used to take place along migratory corridors, including Nepal-India, Bangladesh-India, and Afghanistan-Pakistan (United Nations Children's Fund [UNICEF] 2020a). Because of travel restrictions enforced since the outbreak began in early 2020, mobility has come to a halt. As pandemic worries increased, hundreds of thousands of employees returned to their hometowns. However, as South Asian countries-imposed border restrictions and lockdowns, the majority of international migrant labourers were unable to escape. Some were able to keep their jobs in other countries, but others were fired or forced to take unpaid leave, leaving them with little or no money (Baniya et al. 2020). Many others were also concerned about losing their jobs if their visas were not renewed when they wished to return (Ullah et al. 2020). Given the unknown timing of the COVID-19 pandemic, migrant workers who were able to return to their countries adopted resilience strategies, such as starting a new business, developing entrepreneurial spirit, searching for fresh jobs, skill-matching or reskilling, giving up migration volition, spending time with family, and being patient in order to survive this calamity (Figure 1). Those who were unable to return and those who planned to return had comparable resilience strategies for dealing with their circumstances.

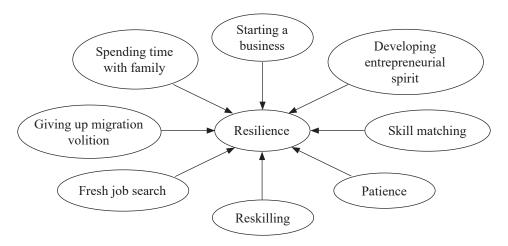


Figure 1: Migrants' resilience strategies.

Source: Authors.

RESILIENCE: THEORETICAL FRAMEWORK

Resilience is increasingly essential in the realm of community development. And it is becoming more relevant in the field of migration studies, owing in part to the fact that this demographic group faces numerous difficulties on a daily basis on foreign soil—far from their faith, culture, and language. They would not be able to live a global life if they were not resilient. The notion of resilience arose from a systematic and empirical framework for analysing a certain population group's ability to withstand, ameliorate, or modify disruptions and pressures (Luthar & Cicchetti 2000). It is vital for long-term and equitable development to strengthen and broaden the abilities of enduring disruptions while taking into account local realities (Cafer et al. 2019). As a result, the concepts "survival," "healing," and "thriving" entered the realm of resilience. They indicate a person's position amid or after adversity (Ledesma 2014).

Resilience is defined as the ability to perform in the face of adversity without significantly impairing one's abilities or motivation (Perry 2002; Ullah and Huque 2014). Resilience is characterised by favourable outcomes in the face of significant barriers to development adaptation (Masten 2001). According to Bonanno (2004), resilience is classified based on preventive risk variables that improve positive outcomes and positive personality traits. Resilience is synonymous with positive coping, adaptation, and tenacity (Greene et al. 2002). According to Adger (2000) and Luthar (2006), two key theoretical approaches create resilience tenets: socio-ecological resilience and social resilience. The former emphasises adaptation processes of

individuals, communities, and regions in response to external threats, whereas the latter focuses on human agency, social justice, power relations, discourses, and social institutions.

In fact, conceptual frameworks for assessing and measuring resilience are still being developed (Cafer et al. 2019). The existing literature predicts that when confronted with adversity, people will respond in three ways i.e., (1) they will survive the occurrence, (2) they will recover from the incident, and (3) they will prosper as a result of experiencing the adversity (Nishikawa 2006; Ledesma 2014). According to Frankenberger et al. (2013), the four projected effects are health security, energy security, environmental preservation, and financial security. According to Cafer et al. (2019), while various frameworks provide some variation of these outcomes, their limited nature provides blind spots for practitioners employing this model. Other critical sectors in resilience building, such as health and education, are sometimes disregarded when focusing primarily on these four factors. It is critical to recognise that inexpensive healthcare, literacy, and knowledge are necessary outcomes of resilience development and that investing in them can help people become more resilient in general. This limitation is due in part to the researchers' concentration on developing countries. Nutrition, food, and financial stability connected to smallholder or peasant agriculture are the four outcomes that comprise essential service resilience. It is vital to develop a more representative strategy that is suitable to professionals from all territories and socioeconomic backgrounds (The International Fund for Agricultural Development [IFAD] 2010).

Resilience may better reflect the nuances of "damaged" people's relationships and life processes, allowing scholars to delve further into concepts like "risk," "vulnerability," and "disability" (Hutcheon and Lashewicz 2014; Gutierrez-Montes et al. 2009). The purpose of community resilience is for the community to be sustainable, that is, to have (1) a healthy environment, (2) a solid and robust regional economy, and (3) social fairness and empowerment (Cafer et al. 2019). This model takes into account both short-term and long-term pressures, both of which are frequently referenced in disaster resilience rhetoric. It is critical to include the health care and education sectors. This notion builds on previous efforts by emphasising health care and education (Green et al. 2019). The resilience of a community is dependent on well-functioning health care and educational systems. However, resilience encompasses far more than just those systems (Bloom and Canning 2003; Morton 2003). Disparities based on race, class, and gender have a severe impact on people's health and overall well-being and

produce huge societal vulnerabilities. Communities become more resilient when safety measures and facilities are in place to allow community systems to develop the abilities required to overcome deficiencies and establish gateways for resilience. As a result, financial concerns directly impact food access, health care, educational challenges, and gender disparities. Community resilience, as a framework, can help to better understand a community's long-term ability to overcome and recover from adversity (Yip et al. 2021). Some of the components of community resilience described by Chandra et al. (2011) include physical and psychological health, communication, social connectivity and integration, and organisational involvement.

As time passes, some people become resilient to survive adversities, and some people in adversities become immune to them. As a result, some migrant populations become resilient, while others become immune, and still, others succumb to adversity. We contend that the resilience of migratory populations to adversity varies depending on where they come from: destination, origin, or transit.

Scholars rarely call into doubt the risk that underpins resilience theories (Hutcheon and Lashewicz 2014). The term "vulnerability" was used to characterise both people's risk exposure (in general) and the social mechanisms that result in unequal risk exposure across communities (in particular) (Hillhorst and Bankoff 2004).

According to those who subscribe to the more traditional meaning of "substantial risk," anyone can be competent, but only those who are exposed to significant risk can be considered resilient (Patterson et al. 2002). In this body of work, questioning the notion of "vulnerability" associated with individuals labelled "disabled" is critical—particularly because vulnerability (and being "at risk") serves as a reference point in both scientific and popular understandings of resilience. As adversity strikes, migrant people must be resilient in the face of uncertainties such as job loss, returning to work, dwindling savings/income, movement restrictions, immigration issues, contract expiry, racism, xenophobia, and family obligations (Figure 2).

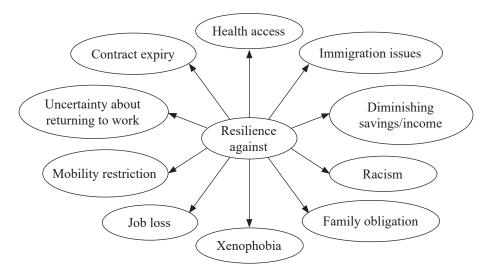


Figure 2: Migrants' resilience against adversities.

Source: Authors.

[UN]EXPECTED ADVERSITIES

Unprecedented Economic Slowdown

For a decade before COVID-19, there was a continuous influx of migrants and remittances. According to Chowdhury and Chakraborty (2021), COVID-19 will cost between USD5.8 trillion and USD8.8 trillion globally, representing 6.4%–9.7% of global GDP. Approximately 500 million jobs were lost in the first year of the pandemic. The number of Asian migrants has gradually increased to over 87 million in 2019 (Ullah and Haque 2020). Over the last decade, the total number of migrant workers from South Asia has increased from 23.89 million in 1990 to more than 38 million in 2017, and South Asia alone generated USD140 billion in remittances, accounting for approximately 20% of global remittances and played an essential role in the region's economic and social development (Chowdhury and Chakraborty 2021).

Remittances are important for economies because they help to reduce poverty and enhance health (Inman 2020). Remittances have surpassed foreign direct investment in several economies. As a result, remittances are frequently referred to as the "development mantra", implying that many countries around the world rely on remittances from migrants to fund their fiscal budgets. Without the flow of remittances, most developing countries' growth and fiscal plans are impossible to establish. The decrease inflow is a setback for them.

Global remittances are anticipated to fall by around 20% in 2020 as a result of the economic disaster triggered by the COVID-19 outbreak and shutdown (World Bank 2020). The anticipated reduction, which would be the greatest in recent history, is primarily due to a drop in migrant workers' income and employment, as they are more vulnerable to job loss and wage loss. Many of the migrants began to live off their money. Remittances to low and middle-income countries (LMICs) are predicted to fall 19.7% to USD445 billion, depriving many vulnerable households of an important source of income (World Bank 2020). The global economic halt caused by the coronavirus and travel restrictions will affect migratory patterns, keeping remittances low even in 2022 (World Bank 2020). Families are already suffering as a result of the lockdowns and fewer remittances. As the influence spreads to the micro-level, i.e., the individual level, children's education and health care are jeopardised (UNICEF 2020b). Our respondents stated that the tremendous blow caused by the drop in remittances began to affect them immediately. The money they had set aside to start a business when they returned is going to run out. Many of them stated that they have begun to borrow money in order to survive. Many of them who are still trapped at the destinations stated that they are having a terrible time because they launched a reverse remittance flow in order to survive.

While the situation is expected to improve in the second half of the year, the outlook has drastically worsened since June 2021. In a base case scenario, job losses in the fourth quarter will total 245 million, up from 140 million the previous quarter. A poor outcome might result in the loss of more than 500 million jobs (International Labour Organization [ILO] 2020a, b). As firms collapse due to long-term shutdowns that cause production to cease, migrant workers become increasingly vulnerable to unemployment, and they account for a sizable amount of this unemployment (Takenaka et al. 2020). Unemployment carries a slew of personal and social costs, including severe financial hardship and poverty, debt, homelessness and housing stress, family tensions and breakdown, boredom, alienation, shame and stigma, increased social isolation, crime, loss of confidence and self-esteem, deterioration of work skills, and ill-health (Figure 2) (White 1991). According to the World Bank, South Asia's GDP will drop to between 1.8% and 2.8% by 2020, down from 6.3% just six months ago (Shaikh 2020). If this occurs, the entire region's economy may suffer. Pakistan has finished its 11th International Monetary Fund (IMF) bailout. The rate of growth was rated as moderate near the close of

the previous fiscal year (Haider 2020). India's economy has been lowered from 6.1% to 1.5% to 2.8% for the fiscal year 2020–2021 (United Nations [UN] 2020). South Asian countries are having a particularly difficult time preserving private sector growth while dealing with the present pandemic (Shaikh 2020).

According to ILO, working hours are predicted to have fallen by 13.5% in Asia and the Pacific and 13.2% in Arab countries (ILO 2020c). The magnitude of employment shocks for migrants is determined by the industry in which they work as well as the host nations' overall economic status. It is possible that between 30 and 100 million Indians may lose their jobs (official and unofficial). The garment industry alone in Bangladesh is likely to lose between 2.5 and 3.0 million jobs (Shaikh 2020). Between four and eight million jobs in Pakistan's governmental and private sectors could be lost (Rana 2020). Remittance inflows, tourism, and foreign trade are all expected to suffer losses in Nepal, with remittances contributing 13.0% of GDP, down from 27.3%. Following a concentrated effort to assure safety, the Maldives began rebuilding guest accommodations in July 2020; the Ministry of Tourism recorded 92,103 visitors in January 2021, compared to 173,874 in January 2020 (UNICEF 2021a).

Reduced Access to Social Services

When it comes to vital services, foreign workers are always discriminated against. The pandemic's reversal of migration has also put a strain on crucial service delivery. Those who have lost their employment, for example, have moved from cities to rural areas, where living costs are lower but social services are scarce. The significant increase in rural population due to the return of migratory labour has resulted in rising food consumption. Children whose parents have migrated rely on remittances to cover their food and medical costs (UNICEF 2021a). COVID-19 has been associated with mental health problems. Migrant workers and their families are more likely than non-migrants to experience mental health problems. Pre-existing psychological trauma, oppression, and stigma from host countries, a lack of entertainment material to offset monotony caused by lockdowns and school closures, and inaccessibility to counselling services, which are already under-resourced among this group, are additional psychological tribulations that migrant and displaced children face (You et al. 2020).

Children in South Asia have suffered a variety of consequences as a result of mobility constraints. Children who have been removed from their

parents for an extended period of time are more likely to develop despair and anxiety (UNICEF 2021b). Children's rights to family unity are jeopardised when migrant workers are separated from their families during lockdowns. The COVID-19 crisis forced the closure of educational institutions in about 188 nations, interfering with the education of around 1.7 billion children, youth, and parents (Organisation for Economic Co-operation and Development [OECD] 2020). Children who return to their home country with their families confront additional challenges in continuing their education. Children who have migrated from the city to the suburbs have lost access to their schools and are less likely to use the internet. Migrant workers and families who risked returning to their destinations faced notoriously harsh trips, with several deaths along the route. This has a gender component as well. Many of the respondents expressed feelings of rejection after returning home. Women were observed to experience societal shame more than their colleagues due to the virus' level of horror (UN Women 2020).

In the aftermath of a public health crisis, most countries utilise residency criteria to assess eligibility for healthcare access, leaving migratory workers unable to obtain basic medical care (World Bank 2020). In some circumstances, they face exclusion, particularly if they are undocumented. Migrant workers and their families are unable to get crucial public health information due to language hurdles and a lack of internet access (You et al. 2020). Undocumented [im]migrants have been known to shun healthcare facilities, including COVID-19 testing, in several countries for fear of deportation; some migrant workers who tested positive were unable or scared to visit a doctor.

RESILIENCE IN THE FACE OF ADVERSITIES

Resilience is meaningless in the absence of a crisis or adversity. There is no doubt that migrant workers have faced difficulties, unforeseen circumstances, struggles, financial shocks, and life disruption since the pandemic's beginning. In this new normal world, the bulk of migrants are either trapped in destination nations due to travel restrictions, stuck in their home countries, or stranded in transit. This suggests they are in a state of limbo. Forty migrant workers from a variety of nations in South Asia (see methodology) were interviewed to see how they are dealing with the situation and what preparations they have to deal with the uncertainty. A variety of resiliency tactics dominated most of the interview transcripts. This study

is not suggesting that they have all become resilient. Human nature is such that they can adjust to any situation, either under force or freely, at some point. This study agrees with Akbar and Preston (2019) that resilience is about adapting to, overcoming, dealing with, adjusting to, coping with, and managing adverse social and environmental conditions, and these aspects can be seen in the responses below.

In the face of bigotry and xenophobia, migrants believe they must defend themselves against the undeserved label of virus carrier. They, too, believe that they (those who are still hoping to return to work and those who are currently abroad) needed to reconsider their integration methods (Figure 1). They intend to match the skill requirements. They may sense that when the world returns to normalcy, a different skill set in agriculture and the industrial sector may be required. As the number of work hours lost reaches an all-time high, revenue and remittances fall. For the majority of migrants who have lost work and endured income decreases, family commitments have become an onerous burden. This has the potential to escalate into domestic violence.

Some returnees believed that the pandemic taught them how to recover from a disaster. Some of them stated that they first lost hope after returning home but that the sadness has caused them to change their minds. They were brainstorming fresh plans for what to do if their ability to return to work becomes doubtful. Some respondents stated that they were previously hesitant to take on particular forms of the job; however, the pandemic taught them that they have no choice in the matter. They were eager to take on any available task. Many of them have already decided not to continue their migration. They intended to stand on their own two feet. Many of them stated that they were accepted into various reskilling programmes offered by their respective governments, despite being performed online. This indicates they are reskilling themselves as a resilience strategy in preparation for a new challenge.

Almost every participant found it difficult to maintain track of their finances after migrating due to COVID-19. The most significant financial worries throughout their lockdown journey were the lack of transportation, food shortages on the route back home, a lack of food during the lockdown itself, money saved for education that had to be spent on basic necessities, and the inability to pay the rent.

"As lockdown was enforced, I had my salary halved. I have four siblings and two of them are going to school. I had no choice but to decide to come back home". As a result of the lockdown, migrants who had no

choice but to return to their hometowns found themselves lonely and without the necessary social assistance.

One respondent shared his experiences after he arrived home. "Neighbours said corona is common, and since you came from another place, stay away from home; furthermore, they pushed me to keep my valuables away [. . .]. They asked me to wipe my shoes and socks, and they served me food in plastic containers with no utensils. I was in excruciating pain. No one touched me; they were all fleeing from me".

Throughout the migration process, there was a lot of uncertainty and fear, which added to the financial and social strains that were already there. People were concerned about the quarantine, the lockdown, their jobs, and the future. There was also the risk that the disease would spread. These issues constituted the majority of the stressors.

"When I returned home, I was told to go to the police station. I was told it was just for corona test. I was placed in quarantine as a result of their deception, and we had no extra clothing or means of communication with our family, who were continually concerned about us. We had no idea when the quarantine would be lifted".

Most of the participants used resilience strategies to manage stressful conditions, such as trying to find alternative work to generate income and taking medication when necessary to manage stress. "I was deeply tensed about the uncertainty we are going through. I spent many sleepless nights. At some point of time my condition had developed into depression as a result of the excessive strain. I realised this is not helping me. I started to read novels and watch movies. I got tired of this at a point but I recovered from depression".

Participants reported being able to cope with the assistance of others, such as family and friends or their owner. At one point, one of the participants stated: "During the time of distress, I used to spend my time playing with my two nephews. That was a huge assistance". Another participant told us that one of the friends offered monetary support to start a small business. "I have not accepted yet the money, though, but I felt relief that I have an option to survive at least".

Another participant highlighted that spending time with friends was refreshing during the time of distress. "I used to spend time with friends. Spending time and talking to the friends with open mind without any sensor is really great stress reliever. I came to know that it was not only me who was suffering the fallout of the pandemic, rather everyone is struggling with same problem with varying degrees".

According to a number of participants, accepting the problem and altering their attitudes were two of the most effective ways to be resilient. They said that the idea of self-help helped them recover from the stressful situation. They inspired themselves or looked at those in worse situations, recognising that the pandemic was everyone's problem, and acknowledging that they would always be dealing with a problem. They also said, "We always assumed that patience and tenacity would lead to a successful end and hence, we kept doing that".

Many of the respondents said that they felt that everyone else was experiencing the same thing and that things will soon return to normal. One participant put it this way: "Because we are poor, it is natural for us to confront obstacles in life at any time". Others, on the other hand, coped by convincing themselves that life is always difficult. Since the idea of self-help became a resilience strategy for them during the lockdown period, it is obvious that they were able to handle the unpleasant situation by changing their thoughts and beliefs.

During this time, the migrant workers claimed to have spent more time on religious practices such as meditation and prayer. Faith and religion gave them the courage and perspective they needed to overcome the obstacles they encountered. One respondent mentioned that "I don't have to worry about dying as long as I'm a Muslim".

DISCUSSION AND CONCLUSIONS

Because of the pandemic's pervasiveness and expansion to critical economies, the worldwide economic impact of the COVID-19 pandemic is expected to vary from USD5.8 trillion to USD8.8 trillion (from 6.4% to 9.7%) (Asian Development Bank [ADB] 2020). In the grand scheme of things, migrant labourers are typically overlooked. Nonetheless, as a result of this, migrants, their jobs, and the flow of remittances have all suffered. Many migrant workers and their families rely on employment and remittances for a living. Remittances have helped the economy in a variety of ways, including increasing foreign exchange reserves, relieving budgetary stress, and lowering poverty levels.

Migrant workers have emerged as one of the most vulnerable populations during the COVID-19 outbreak. As a result, migrant workers face social, political, and psychological risks. Migrant workers' resilience tactics during COVID-19 included social trust and support, self-help, traditional

culture, and volunteerism. Respondents stated that they maintain resilience by working hard, persevering in the face of hardship, and having hope to face future obstacles.

Domestic violence and abuse have also increased as a result of the pandemic, with migrant women, in particular, finding it challenging to access shelters and sexual reproductive health care, either due to overburdened resources or the limits of their visa migratory status, or lack thereof. Maintaining specific migrants' well-being looks to be the best way to invest in their future and rekindle hope for a more peaceful future in this circumstance. We investigated a holistic problem on the route to resilience and adaptive techniques. The outbreak has exposed governments' inability to deal with massive variations in migrant movements. Governments and businesses in the host country can collaborate to create a minimum wage and ensure that workers in manufacturing and plantations are adequately compensated. Migrant workers and their families should not be forced to return home in the event of future disasters.

To assist migrants in becoming self-employed, government stimulus initiatives and social safety measures must be expanded. Thousands of migrant workers forced to return home as a result of the pandemic should be assisted through coordinated efforts. More research on potential policy and practical repercussions is needed to increase the resilience and prosperity of South Asia's migrant community.

Scholars have come up with a variety of explanations for migrants' susceptibility. Migrants, for example, are overrepresented in low-education groups, as workers in low-wage and jobs, and in occupations with high risks of exposure (Hutchins et al. 2009). Isolation emotionally triggered traumatic experiences in which fundamental rights were violated, as well as other psychological disorders such as grief, concern, fear, and uncertainty. Participants expressed feelings of powerlessness as a result of their inability to assist and care for family members in their home country, as well as their financial precarity and inability to mingle and network. However, most of the participants also said that the pandemic had taught them how to survive in the direst situation.

COMPLIANCE WITH ETHICAL STANDARDS

Survey participation was gained through informed consent of respondents in accordance with procedures standard in University of Brunei Darussalam (UBD) Ethical Review Committee.

NOTES

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