

## "THE MENTAL HEALTH FALLOUT OF COVID-19 REVERSE MIGRATION: EXPLORING PERCEPTIONS OF MIGRANTS FROM RURAL REGIONS OF LUCKNOW."

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### Abstract

**Purpose:** The research focuses on a critical effect of COVID 19: mental and socio-economic toll on migrants and vulnerable individuals, including stress and depression and job loss. The study emphasises the necessity for better mental health services as well as other policies that are accustomed with handling of these characteristics thus eradicating long term impact..

**Design/methodology/approach:** This study employs **systematic review with quantitative analysis**. The literature was scanned for years 2022 – 2024. By analysing the findings and key words gap in research was identified. Based on that objective and hypothesis was framed

**Findings:** Housing displacement, unemployment, and uncertainty imitate immigrants' psychological dimensions such as identity crises and depression. Disconnect from ancestral occupations/ roles and perceived discrimination leads to disappointment and resentment towards government as the mental health interventions should reflect.

**Research limitations/implications:** The study details the worrisome mental and socio-economic losses due to COVID-19 for the migrants and enhances the corpus on migration and mental health while calling for future research on long-term ramifications along with further widening of inequalities. Government authorities are called to increase the level of mental health assistance as well as social protection for migrants that impacts employment, wages, and social distancing and create strategies for future shocks.

**Originality/value:** This study uniquely addresses COVID-19's psychological and socio-economic impact on migrants, filling gaps in existing research and emphasizing the need for targeted mental health support and policy development in a specific region in India

**Keywords:** Covid-19, Mental Health, Psychological Impact, Migrant Workers, Migration

### Introduction

#### Reverse Migration

Reverse migration can be defined as the process by which people and or families especially those who migrated to urban areas in search for employment and economic opportunities move from the urban areas back to their rural places of origin (Castles 2010). This movement is usually regarded

as being in contrast with the broad pattern of migration that characterized the rural-urban flow which is associated with a search for better jobs, education, improved standard of living. The COVID-19 pandemic further boosted reverse migration as most countries enforced the phenomenon of lock down which in turn led to massive loss of employment in the employment sector especially in the informal sector that is well known to accommodate the majority of migrant workers. As certain cities turned into epicenters of COVID-19 infection and the economy slowing down due to the measures against virus's spread, numerous migrant workers had no other option but to go back to their villages and rural towns. Return trip appears to have been demographically more challenging because of transportation inadequacies and investors' inability to provide the most essential needs such as food and shelter (Susarla & Shaji 2023). Morality moving has bearing on the rural and urban areas is partly summarized by the following reasons. For rural areas, there is added density pressure that comes with the return of migrants which strains available resources such as hospitals, jobs and facilities such as schools. However, it has also several advantages such as; it will ensure adequate supply of labor to support agriculture and the other industries within the region. In urban areas this created labour scarcity which affected numerous industries depending on migrant employees hence the construction, manufacturing and services industries. Further, the reverse migration has drawn the focus towards the issues of hard working migrants such as lack of social security, health facilities and living conditions in urban environment (Saha et al., 2018). Events in the past have as resulted to increased awareness on the need for policies to capture migrant worker s needs in both source and host countries. Long term measures may require improvement of infrastructure, employment opportunities for rural people and strengthening social amenities that will enable people live sustainably in the rural areas. (Behera, Mishra & Behera 2021).

### **Mental Health Impact**

The subject of reverse migration mental health is complex and broad where COVID-19 is making it even more challenging. Defaulting often takes place under forced conditions such as loss of job or adequate income and fear of diseases, people usually go back to the countryside from the urban centres, which is known as the reversal migration. Such stresses when added to the experience of trying to reintegrate into rural communities, can have deep psychological implications for the migrants.

The first mental health issue we identified from the interviews is anxiety (Kotera et al 2023).; this is because reverse migrants do not know whether they will get a job upon returning to their home country and they also fear they will be rejected by their family and friends. The following are some of the psychological effects that the returnees have to suffer (Kumar et al 2020).; Discrimination – The returnees may feel rejected or discriminated by the society for being perceived carriers of the virus (Spiritus-Beerden 2021). Further, the altered living conditions especially in areas of proven traditional inhabitancy compounded by development surge then the impoverished rural setting which sometimes is poorly endowed with resources can lead to overwhelm of stress and anxiety.

The other mental disorder that results from this is depression, because of joblessness and potential inability to cater for the family (Trivedi et al 2024). Most migrants are poor, or at least they start as such and the couple of dollars they have is spent by the time they get back to the rural areas, and they have no jobs, no opportunities, and thus they turn into hopeless cases. Hence, emotional strain is higher among people who think their migration experiences meant failure in their everyday life and loss of personal identity.

However, most of the issues arising from mental health issues affect family members, especially children in the instance that they have to change their school (Chavez Villegas et al 2021). be denied education or cope with their parents. Since there are few mental health care centers in rural regions, mental health problems become worse in migrants because they cannot receive counseling or psychological help easily.

In providing mental health support for reverse migrants, it is crucial to deliver mental health services as well as community support structures and anti-stigma campaigns (Gronholmet al 2021). It is suggested that comprehensive mental health care could be incorporated into rural health care service, while raising the awareness level of psychological effect of reverse migration.

### **Social Stigma**

During the COVID-19 pandemic too the condition of migrants deteriorated further they suffered from severe social exclusion. When cities had to be locked down migrant workers worldwide especially those in India lost their source of income and could neither feed themselves nor look for an opportunity to earn a living. People were having reverse migration and this was taking them back to rural areas where they were again 'detected'; this discovery was shocking residents and was bringing out older prejudices and phobias. Migrants were usually regarded as possessing several vices such as suspicion and were feared depending on the epidemic's view of their ability to spread the virus to non-urban regions (Khan & Arokkiaraj 2021). This resulted to discriminations, social isolations and at times physical violence against such people and institutions. Few of your fellow migrant workers were Locked out of their village, while others forced to Quarantined in dilapidated structures Or Forced Humiliate in public (Populations at risk: Implications of COVID-19 for hunger, migration and displacement 2020). That stigma was due to insufficient information in public health crises communication, negative portrayal of the migrants as bearers of the virus. It affected their psychological and physiological well being, as well as restricted their reintegration to the progress of rural development. This in combination with the economic hardships that the migrants were exposed to with an aim of enabling them to receive the necessary social services including social security services, health and other job markets. These challenges can only be solved through multisectoral endeavours: public sensitisation about the risks including harm and exploitation involved in the process; organisational actions as well as lobbying an advocacy to ensure the rights and dignities of the 'bound labour' (Sengupta & Jha (2020).

### **Psychosocial Support**

Covid-19 exacerbated the difficulties observed in the lives of reverse migrants, and psychosocial support to meet the various problems they experienced when they returned to rural areas is vital.

This sudden forceful displacement, loss of source of income, and the resultant social isolations or exclusion due to being tagged as potential virus carriers posed enormous challenges in mental health among the reverse migrants. Many of them reported stress with symptoms of anxiety, depression, and hopelessness mainly caused by job insecurity and financial challenges arising from unemployment.

To support these migrants, several interventions were necessary to support these migrants, several interventions were necessary:

**Counseling Services:** Self care as well as access to mental health workers who could assist the migrants with counselling and therapy assisted the migrants in dealing with stress, trauma and anxiety (Chander et 2021). These services could have been delivered through telehealth, group services provided in community-based organizations, or mobile clinics.

**Community Support Networks:** Setting up of support groups from the community went a long way in helping reverse the problem of migrants to feel they are alone while facing those challenges. These networks could also support their peers in a situation they or their loved ones might need it, exchange coping mechanisms and overall, focus on the health of the mind (Cravero et (2024) ; Tan et (2023) ; Dalingwater et al (2023).

**Awareness Programs:** The strategy which worked was raising awareness among the communities on the psychosocial effect of reverse migration and demystification of mental health associated stigma (Spiritus-Beerden et al 2021 ; et al(2024). The awareness could be created with the help of local media, social works, and other activist who are ready to organize meetings and inform population about the problem.

**Employment and Livelihood Support:** Through working and skill enhancements or training opportunities, the migrants were eased back into the economy of the town which in turn really helped them to ease financial burdens, but also gave them meaning and worth as inhabitants of the town (Irudaya & Arcand 2023 ; Anderson et al. 2021).

**Cultural Stigmatization:** One of the major sociopolitical correlates of COVID-19 was stigmatization of migrants in the culture of states that came out as the unity of fear, inadequate information, and prejudice. Especially, the migrants, particularly those who came back from cities, were considered to be potential 'vectors' of the virus, which caused mass stereotyping.

This was quite a sadistic endeavour that was driven by cultural beliefs that saw outsiders as carriers of all diseases that would befall the community. The study showed that the migrants, who are mostly from the lower classes of the society, become more stigmatized on their return home. Some of them are still shamed, isolated up to even attacked in public today. Sometimes, people even urged other villagers not to let the migrant workers to enter their villages for fear that the latter are carriers of the virus.

Comprehension of culture stigmatization was interfered with poor health hazard communication and the action of rumor that caused fear and paranoia. There some elements in traditional beliefs regarding purity, cleanliness, and contagion which contributed to worsening of this stigmatization.

While in the urban areas the migrants were considered as “the other” they had now become the “other” in their own shantytowns when they returned home.

These cultural losses impacted the mental well-being, social status, and integration patterns of the migrants in the societies. It limited the migrants’ ability to obtain services such as healthcare and social services and employment or the ability to start over. To solve this problem, culturally competent strategies such as anti-stigma campaigns, and programmes to offer appropriate knowledge and awareness need to be developed to tackle incorrect information and prejudice (Regmi et al 2022 ; Bhanot et al ; Biswas et al2021).

### **Methodology**

When questionnaire is used together with methodology that involves the use of Systematic Literature Review (SLR), the flow of the approach is normally sequential, where primary data is collected together with secondary research. Below is a summary of how such a methodology might be structured: Below is a summary of how such a methodology might be structured:

**1. Research Design:** The study addresses the problem by using survey questionnaires structured quantitative data together with qualitative data generated from Systematic Literature Review (SLR). This makes it easier for the researcher to come up with an all rounded results by using both primary and secondary data in the research problem.

**2. Questionnaire Design and Distribution:** Primary data is also obtained from the target population by constructing a structured questionnaire. These are closed-ended questions, which are helpful to receive information concerning the respondents’ experience, attitude or behavior in connection with the topic of the research. It is an online and/or face-to-face survey depending on the accessibility and the choice of the respondents.

**Sampling:** A kind of technique call stratified random sampling technique is undertaken for constructing the sample so that the sample anticipated to represent all the segments of the population. The sample size is considered with reference to the statistical power analysis with a view to make the results generalize.

**Data Collection:** These are obtained over a given time to enable one to get a good number of respondents. To increase participation follow-ups are done where necessary.

**3. Systematic Literature Review (SLR):** In conjunction to the analysis of the questionnaire, a systematic literature review is also performed to review the literature about the subject. In order to maintain the credibility and the credibility of the results, the SLR adapts a strict procedure.

**Search Strategy:** These sources include academic refereed journals which are searched through electronic databases using relevant key words and only articles that meet specific criteria of inclusion and exclusion are retrieved. The search is confined to the articles in the peer-reviewed journals, conference papers and other sources of scholarly publications.

**Screening and Selection:** In the case of identified articles, relevance is determined from the title, abstract, and the full text. Literature which satisfies the above eligibility criteria is considered for further examination.

**Data Extraction and Synthesis:** Selected studies are summarized by extracting certain data points such as study design, sample size, some results and study limitations. The information extracted is then used to develop an overall summary of findings, missing areas in the literature and agreement and disagreement among the sources under review.

#### **4. Data Analysis:**

**Quantitative Analysis:** By using statistical software the survey data is analyzed. The study also involves the use of descriptive statistics whereby findings of the respondents on their demographic characteristics as well as their responses to the survey questions are calculated. Descriptive statistics, like means, standard deviations or percentiles, are employed to summarisedata collected in a study, while, inferential statistics which include regression analysis or ANOVA are used to hypothesis test and explore hypothesis in a research study.

**Qualitative Analysis:** The conclusions regarding the broader research context are derived from finding presented and analyzed according to themes in SLR. This data obtained from the survey questions that were open-ended are also categorized into patterns and themes that respond to the quantitative results.

The majority of the literature reviews and especially systematic reviews employ PRISMA which is an acronym for Preferred Reporting Items for Systematic Reviews and Meta-Analyses. PRISMA flow chart presents a flow of selection of the studies and it gives a clear account of the study selection. This is how it has been used PRISMA flow method for a literature review: the research papers have been selected using certain criteria and certain literature have been excluded. This ensures a transparency in literature selection and this is made possible through SLR and makes the quality stronger and intensifies the process of the review (Tranfield et al 2003). Additionally, it provides comprehensive and extensive information for considering points of view of several authors, admitting scholars of the field of interest to collect or derive literature to comprehend the contradictions or research issues (Healy & Perry 2000)

The **Inclusion Criteria** were

**Keywords** as "Psychological Impact of Covid-19" AND "Reverse Migration"**Year of Publication:** 2022 – 2024, **Publication Type:** Journal Articles, **Language:** English, **Fields of Research (ANZSRC 2020):** 5205 Social and Personality Psychology, Journal List: "Norwegian register level 2" OR "PubMed" OR "Norwegian register level 1" OR "UGC Journal List II

**Exclusion Criteria:** Conference Proceedings, Book Chapters, Monographs

Finally**21Articles** were identified at the end of the screening process.

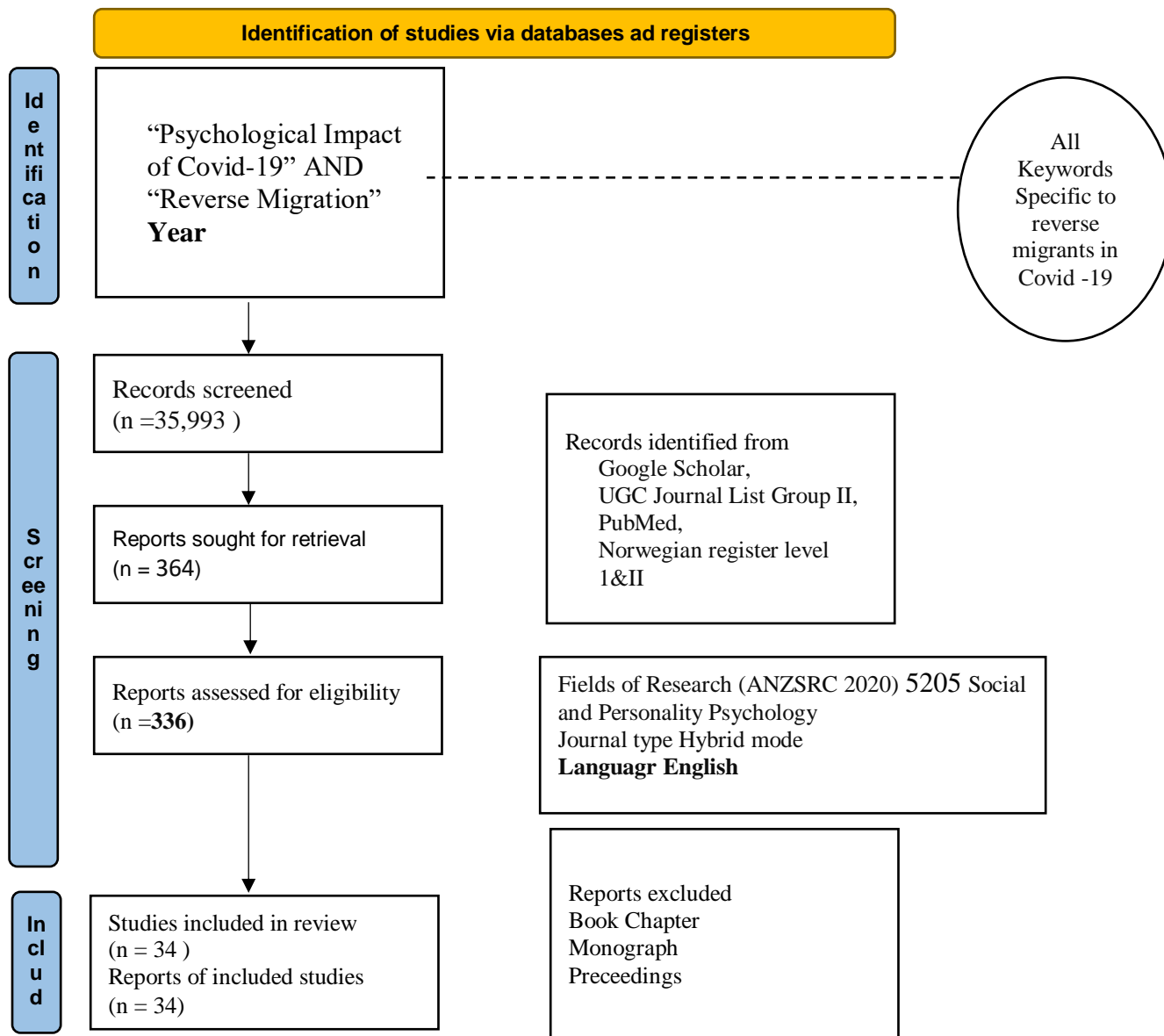


Figure 1: PRISMA Flow diagram for inclusion criteria of the study, Source: Compiled by authors

The summary of findings of the screened papers are presented in the table below.

Sno	Study	Author & Year	Findings	Method	Keywords
1	Mental health status of indian migrant workers in the united arab	Khan, M. I., Khan, M. A., Sherfudeen, N., Illiyan, A., &	The respondents had high levels of anxiety, depressive,	Quantitative	Mental Health Indian Migrant Workers COVID-19 Pandemic

	emirates during the covid-19 pandemic	Ali, M. A. (2023).	lonely, non-restorative sleep, and poor concentration indicating unmet need for mental health services promotion as well as diseases education.		Migration Survey Income Loss Depression Loneliness Policymakers
2	COVID-19 lockdown, family migration and unemployment in a gendered society	Mahata, S., Khan, R. K., Chaudhuri, S., & Nag, R. N. (2022).	Endogenous factors present in developing economies that are explained by timeless tower structure that determines gender migration and unemployment amidst the pandemic.		COVID-19 Lockdown Family migration Unemployment Gendered society Labour market Gender-based wage differentials Occupational segregation Multi-sectoral general equilibrium model Intra-household bargaining
3	The psychological, social, and economic impacts of covid-19 on nepali migrant workers	Ghimire, J., Nepal, R. M., Crowley, J., Ghimire, D., & Guragain, S. (2024).	migrant workers were less likely to receive economic support, anticipate borrowing money, experience negative personal life changes		COVID-19 Nepali migrant workers Psychological impacts Social challenges Economic impacts Nationwide lockdown Vulnerabilities Government actions



					International migration Domestic migration
4	‘I doubt myself and am losing everything I have since covid came’— A case study of mental health and coping strategies among undocumented myanmar migrant workers in thailand.	Khai, T. S., &Asaduzzaman, M. (2022).	Mental illnesses reported are; depression, generalised anxiety disorder, frustration, stress and panic disorders, owing to factors as; job loss, pandemic concerns, stigmatisation, and inadequacy of health care. Two primary coping mechanisms employed Ppersonal like listening to music, playing online games, praying as well as self-motivational Social coping strategies include communication with friends and relatives as well as going to	mixed method	Mental health Undocumented migrant workers COVID-19 Coping strategies Depression Economic crises Social exclusion Healthcare access

			church. Mental health literacy as the call for policy and intervention programs therapeutic and social integration of the migrants regardless of their immigration status		
5	The economic and psychological impact of COVID-19 on highly skilled Indian migrants: A case study of Saudi Arabia.	Shadab, S., &Asif, M. (2023).	It was found half of the migrants suffered some form of financial loss such as a decreased wage, the removal of emolument or decreased remittances. The research also revealed the following correlation between the migrants' attitudes towards government policies and mental health and thus it was	Quantitative	COVID-19 Indian migrants economic impact psychological impact Saudi Arabia Gulf Cooperation Council financial issues government policies mental health remittance flow

			<p>evident that the actions of government plays a critical role in the psychological status of the immigrants. Hence, the paper stresses on right governmental policies to deal with the problems of skilled Migrants.</p>		
6	<p>A bird's eye view of the COVID-19 pandemic in India: The past, present, and future.</p>	<p>Gupta, D. S., Aswar, M., &amp; Kumar, M. S. (2024).</p>	<p>Study summarises all the aspects related to pandemic management in India such as the first phase of infection, the pattern of infection progression through waves, and the role of vaccine. Those students say that lessons learned from the pandemic can be valuable references for potential future outbreaks and</p>		<p>COVID-19 Pandemic India Healthcare systems Vaccine development Disease management Urban-rural disparity Vaccine diplomacy Postlockdown challenges New Normal</p>

			show how complementary systems of medicine can be included with modern medicine in disease management.		
7	An analysis of India's uncalled migrant labor crisis during the covid-19 pandemic: Case study of bihar.	Kumari, B. (2023).	Study emphasizes the unwelcoming conditions faced by migrant laborers as a result of these lapses during the pandemic		Migrant labor Crisis India COVID-19 Lockdown Bihar Relief measures SARS CoV-2 Unwelcome Pandemic
8	Livelihood, employment and health of migrant workers in the context of covid-19 pandemic.	Bhat, L. D., Nayar, K. R., George, S., Rao, A. P., Lordson, J., Devi, N. A., Chowdhury, S. R., Shaffi, M., Vijayan, B., & Prajwal, N. (2022).	The first one is substandard wages for migrant worker, who are denied access to social security. Its key findings were that on the one hand there was a shortage of specific actions of the central and state governments and society directed towards migrants during the complete	Qualitative Study	Migrant Workers COVID-19 Pandemic Livelihood Employment Health Vulnerabilities Social Protection Qualitative Study Assistance Health-seeking Behaviour

			lockdown in the country.		
9	Covid-19 and the sociology of risk and uncertainty: Studies of social phenomena and social theory across 6 continents	Brown, P. R., & Zinn, J. O. (Eds.). (2022).	From comprehensive analysis of risk and uncertainty research point of view in social sciences, adopting cultural theory, risk society theory and governmentality approaches. : This study contributes to filling the gap in the literature on the subject by enhancing knowledge of the issues related to the pandemic.	Mixed	COVID-19 Sociology Risk Uncertainty Social Theory Governance Cultural Theory Empirical Studies Global Perspective Southern Theories
10	Global perspectives of covid-19 pandemic on health, education, and role of media	Pachauri, S., & Pachauri, A. (Eds.). (2023).	The lasting, negative impact of long quarantine on the psychological state of the population, the increase in the number of suicides, and the incidents of the situation regarding specific	Mixed	COVID-19 Pandemic Health Education Media Global perspective Mental health Low- and middle-income countries Economic impact Vulnerable groups

			vulnerable categories – refugees, and adolescents.		
11	Harsh realities of migrant workers during COVID-19 epoch: An investigation from the backward remote districts in India	Sahu, T. N., Maity, S., & Sen, N. (2023).	Study discusses the pre and post-pandemic conditions of socio-economic rights of migrant workers. Data concerning wage differentials, education, and employment status of relatives were identified to affect employability of migrants.	Quantitative	Migrant workers COVID-19 Socio-economic condition West Bengal Unemployment Pandemic Wage difference Education Lockdown Employability
12	Understanding the impact of the covid-19 pandemic on indian migrant workers in the united arab emirates: Perceptions, challenges, and psychological effects	Khan, M. I., & Alharthi, M. (2024).	Age, the time of stay, level and source of income, as well as earnings were also defined as the crucial indicators of the examined fear.	Quantitative	COVID-19 Pandemic Indian Migrant Workers United Arab Emirates Employment Status Remittances Health Facilities Challenges Psychological Effects Migration Rates Policy Recommendations

13	India migration report 2021: Migrants and health	Rajan, S. I. (2022).	Study enumerates several health risks faced by migrant workers which include, barrier in primary health care, safety concerns at workplace and health disorders such as skin and respiratory diseases and even potential malignant neoplasms and psychological disorders.	Mixed	Migrants Health COVID-19 Healthcare challenges Gender-based violence Psychological distress Primary healthcare services Food insecurity Decentralization Welfare programs
14	Pandemic perspectives: Praxis, policy and pedagogies	Joseph, S., & Marwah, R. (2024).	Study raised concerns about digitisation, marginalisation, government legislation and matters arising from the functioning of health systems and advanced pedagogy strategies for higher learning institutions.	Qualitative	COVID-19 Pandemic Perspectives Policy Development Economic Social Health systems Digitisation Methodologies

15	The impact of the covid-19 pandemic on people and their lives: Socio-political and economic aspects	Sobti, R. C., Sobti, V., & Aggarwal, M. (2023).	Study focuses on the bitter impacts the COVID-19 pandemic has brought to individuals' social and economical lives in terms of loss, psychological trauma, mobility restrictions among others.	Qualitative	Covid-19 Pandemic Socio-Political Aspects Economic Impact Psychological Trauma Community Shifts Policy Changes Resilience Public Health Marginalized Communities Interdisciplinary Contributions
16	Covid-19 and india's northeast: Psychological and social imprints	Borooah, I. P., Choudhury, S. A., & Das, B. (2022).	It explores the psychological, social and economic upheavals people go through, emigration, job loss, prejudice and violence to name a few.	Qualitative	COVID-19 Northeast India Psychological Social Challenges Communities Migration Livelihood Discrimination Public health
17	The psychological after-effects of covid: Post-pandemic complications and interventions in india	Uzaina, U., Verma, R., & Pandey, R. (2024).	Study examines the psycho-social impact of the pandemic, including changes in collective behavior, coping strategies, and interventions	Mixed	Psychological After-Effects Covid Post-Pandemic Interventions India Psycho-Social Impact Coping Strategies Case Studies Mental Health



			that emerged in response to the crisis.		Preparedness
18	Psychosocial consequences of covid-19 across age groups	Manglani, A., Kalsi, N., Prasad, S., Babel, S., Jahan, N., & Sharma, M. (2024).	The following psychosocial outcomes: The child is sleeping with their parents or having anxiety issues, adolescents are becoming depressed and anxious, adults experience disruptions in work or school and exhibit a range of mental health problems like anxiety, depressive disorder, stress, or PTSD, and older adults are confined to isolation.	Quantitative	COVID-19 Psychosocial Consequences Age Groups Anxiety Depression Systematic Review Social Isolation Well-being Pandemic
19	Speculated anticipatory anxiety of social interactions post-covid-19 lockdown and the reality check	Mittal, S., Kumar, S., & Gairola, V. (2024).	concerns the survey of expectant anxiety as the main index. It has also explored how people have adapted their sociability and their travel patterns after	Quantitative	COVID-19 Anticipatory Anxiety Social Interactions Lockdown Mental Health Survey Study Travel Choices Quarantine Social Distancing Behavioural Patterns

			and during lockdowns: there is a quick and fast return to normal sociability even if there is still a sense of fear.		
20	Rajyoga meditation as an intervention technique for managing negative affect post-covid-19	Singh, P., & Kumar, P. (2024).	With Rajyoga It was possible to establish substantial decrease in anxiety, stress, depression, regression, fatigue, and guilt among the participants while extraversion and the arousal scores were observed to improve after the intervention; effect size of the present study was moderate for all the negative affectivity subscales.	Quantitative	Rajyoga Meditation Negative Affect COVID-19 Psychological Crisis Intervention Technique Eight-limbed Yoga Mental Health Coping Strategy Participants Effect Size
21	Migration experiences during a pandemic: An investigation into the	Boodram, C.-A. S. (2023).	Women from Venezuela are recognized as one of the most endangered populations that	Qualitative	Migration COVID-19 Venezuelan women Trinidad and Tobago Vulnerability

	impact of the covid-19 pandemic on migrant venezuelan women in trinidad and tobago.		experience discrimination and face multiple barriers in access to the labor market and other opportunities mainly because of their migrant status and their gender.		Discrimination Social capital Challenges Coping strategies Policy recommendations
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Table 1: Literature Review

### Summary of Literature Review

**Keyword Analysis:** The bar chart (Chart 1) displaying the frequency of the top 8 common keywords in the provided LSI (**Latent Semantic Indexing**) data. LSI is a technique from the NLP domain employed in the analysis of a given corpus of texts with the aim of establishing the correlation that exists in between words and the concepts they refer. It is in line with the assumption that words that are similar with each other are used in similar contexts.

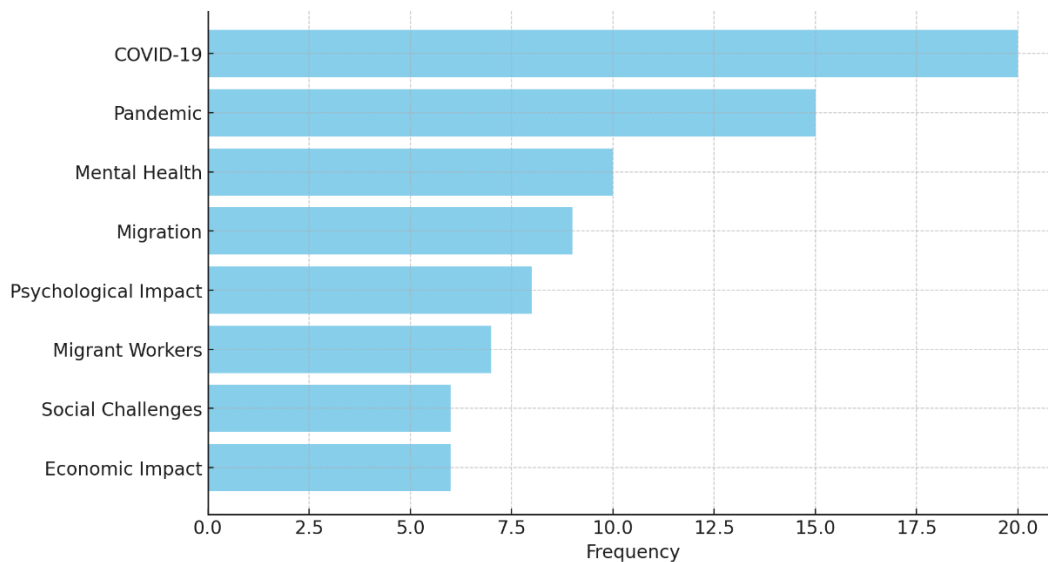


Chart 1: Common keywords in the studies

Further, research on the effects of COVID-19 show severe consequences in terms of mental and socio-economic well-being of migrants and other marginalized groups. Respondents' stress, depressive, and loneliness scores, and poor sleep quality identified in the current study portray a high unmet need for mental health services and awareness. Some of these problems are due to

internal factors in the developing economies for instance, gender migration and unemployment which have been worsened by the pandemic. The social impact of the pandemic on migrant workers especially showed negative effects as they suffered from loss of income, reduced wages and poor access to social security systems as well as worsening mental health issues. They also had less chances of getting economic assistance in their personal life, and this made them have negative changes in their personal lives, and their possibility of borrowing money or cash also increases.

Depression, anxiety, stress, panic and other types of diseases were reached high levels due to job loss, pandemic concerns and lack of proper health care. The mental health was coping by migration with the means of personal actions; for instance, listening to music as well as social means of coping with the peers, friends, etc. The studies call for policy efforts to focus on the psychological and social aspects of migrants including the documented and the undocumented. Moreover, the current study highlights the government's actions concerning psychological experiences of migrants and calls for reinforcement and expansion of policies in this area especially in the context of the COVID-19 crisis and its aftermath.

Overview of authors and co-authors found in this analysis is shown in figure2.



Figure 2: Relatedness of Researcher

Based on the literature certain gaps were found. thus, the objective for the study was formulated. The hypothesis to establish the objective of the study.

The major gaps found the literature are:

**Gap 1:**No study was found on what psychological impact is created on Reverse migrants (labours)

**Gap 3:**No study could be identified for situation of reverse migration in the largest state if India, Uttar Pradesh

**Gap 3:**No empirical establishment of facts on psychological impact and its reason on Migrants was found

Based in these gaps the objective of this study was formed.

**Objective:**To examine the implications of COVID-19 on employment status, income profile and livelihood of returned migrants in Uttar Pradesh (Lucknow).

H1: Lack of regular employment has psychological impact on the immigrant

H2: Lack of sustainable livelihood has psychological impact on the immigrant.

H3: Loss of traditional occupation has psychological impact on the immigrant.

H4: Lack of agricultural land has psychological impact on the immigrant.

H5: Fall in real income of pre-displaced state has psychological impact on the immigrant

### Data Analysis and Interpretation

#### H1: Lack of regular employment has psychological impact on the immigrant

Here the **Dependent Variable is Lack of Regular Employment.**The independent Variable or predictors are **Psychological Impact.**

#### The proposed regression equation for the hypothesis is

**Lack of Regular Employment** =  $\beta_0 + \beta_1$  Felt agitated against Government for putting Lockdown +  $\beta_2$  Discriminated by other people who were not displaced +  $\beta_3$  Did you have attachment with your ancestral property+  $\beta_4$  Sense of insecurity of displacement+  $\beta_5$  Were you mentally prepared for displacement+  $\beta_6$  Suffer with the feeling of identity crisis+  $\beta_7$  Depressed because of displacement +  $\beta_8$  Suffer with the feeling of rootlessness +  $\beta_8$  Social status affected because of displacement +  $\beta_{10}$  Stressed because of displacement +  $\beta_{11}$  Dissatisfied because of displacement +  $\beta_{12}$  Felt isolated when displaced

ANOVA table shows that the proposed model is significant ( $F(12,107) = 8.83 ; p=.000$ ). Model summary shows the prediction strength to be

	Sum of Squares	df	Mean Square	F	Sig.	R <sup>2</sup>	Adjusted R <sup>2</sup>
Regression	32.033	12	2.669	8.834	.000 <sup>b</sup>	.498	.441
Residual	32.334	107	.302				
Total	64.367	119					

Table 2.1 ANOVA Table

The coefficient table shows that out of 12 predictors only two are predicting the model significantly. Thus the obtained regression model will be

**Lack of Regular Employment** =  $-.472 + .315(\text{Discriminated by other people who were not displaced}) + .176 (\text{Suffer with the feeling of rootlessness})$

Model		Unstandardized Coefficients		Standardized Coefficients	t	Sig.
		B	Std. Error	Beta		
1	(Constant)	-.472	.484		-.976	.331
	Felt isolated when displaced	.135	.110	.117	1.229	.222
	Discriminated by other people who were not displaced	.315	.094	.281	3.363	.001
	Suffer with the feeling of rootlessness	.176	.083	.191	2.113	.037
	Were you mentally prepared for displacement?	.090	.094	.081	.959	.340
	Suffer with the feeling of identity crisis	.139	.095	.126	1.461	.147
	Depressed because of displacement	.078	.083	.084	.947	.346
	Stressed because of displacement	.077	.095	.074	.806	.422
	Dissatisfied because of displacement	.011	.089	.012	.127	.899
	Sense of insecurity of displacement	-.041	.087	-.041	-.469	.640
	Social status affected because of displacement	.055	.099	.050	.556	.580
	Did you have attachment with your ancestral property	.026	.081	.027	.318	.751
Felt agitated against Government for putting Lockdown	.046	.091	.043	.511	.610	

Table 2.2 Coefficient Table

The Model Summary table shows that the prediction is moderate (Adjusted  $R^2 = .441$ , 44.1%)

Since the model is significant and also the predictors are impacting the dependent variable moderately thus the hypothesis **H1: Lack of regular employment has psychological impact on the immigrant is Accepted.**

**H2: Lack of sustainable livelihood has psychological impact on the immigrant**

Here the **Dependent Variable is Lack of sustainable livelihood. The independent Variable or predictors are Psychological Impact.**

The proposed regression equation for the hypothesis is

**Lack of sustainable livelihood** =  $\beta_0 + \beta_1$  Felt agitated against Government for putting Lockdown +  $\beta_2$  Discriminated by other people who were not displaced +  $\beta_3$  Did you have attachment with your ancestral property+  $\beta_4$  Sense of insecurity of displacement+  $\beta_5$  Were you mentally prepared for displacement+  $\beta_6$  Suffer with the feeling of identity crisis+  $\beta_7$  Depressed because of displacement +  $\beta_8$  Suffer with the feeling of rootlessness +  $\beta_8$  Social status affected because of displacement +  $\beta_{10}$  Stressed because of displacement +  $\beta_{11}$  Dissatisfied because of displacement +  $\beta_{12}$  Felt isolated when displaced

ANOVA table shows that the proposed model is significant ( $F(2,107) = 7.732; p=.000$ ). The Model Summary table shows that the prediction is moderate ( $\text{Adjusted } R^2=.404$ ). Which means that 40.4 % is the prediction strength.

	Sum of Squares	df	Mean Square	F	Sig.	R <sup>2</sup>	Adjusted R <sup>2</sup>
Regression	38.997	12	3.250	7.732	.000 <sup>b</sup>	.464	.404
Residual	44.970	107	.420				
Total	83.967	119					

Table 3.1 ANOVA

The coefficient table shows that out of 12 predictors only two predicting the model significantly. Thus the obtained regression model will be

**Lack of sustainable livelihood** =  $-.272 + .416 * \text{Stressed because of displacement} + .281 * \text{Suffer with the feeling of rootlessness}$

Model		Unstandardized Coefficients		Standardized Coefficients	t	Sig.
		B	Std. Error	Beta		
1	(Constant)	-.272	.571		-.477	.634
	Felt isolated when displaced	.227	.129	.173	1.756	.082
	Discriminated by other people who were not displaced	.077	.110	.061	.702	.484
	Suffer with the feeling of rootlessness	.281	.098	.267	2.858	.005
	Were you mentally prepared for displacement?	-.040	.111	-.032	-.364	.717
	Suffer with the feeling of identity crisis	-.172	.112	-.137	-1.534	.128
	Depressed because of displacement	-.012	.098	-.011	-.121	.904
	Stressed because of displacement	.416	.113	.350	3.696	.000
	Dissatisfied because of displacement	.014	.105	.012	.131	.896
	Sense of insecurity of displacement	-.010	.103	-.009	-.100	.921
	Social status affected because of displacement	.192	.116	.155	1.652	.101
	Did you have attachment with your ancestral property	-.097	.095	-.090	-1.020	.310
Felt agitated against Government for putting Lockdown	.163	.107	.132	1.527	.130	

Table 3.2 Coefficients

Since the model is significant and also the predictors are impacting the dependent variable moderately thus the hypothesis **H2: Lack of sustainable livelihood has psychological impact on the immigrant is accepted.**

**H3: Loss of traditional occupation has psychological impact on the immigrant**

Here the Dependent Variable is Loss of traditional occupation. The independent Variable or predictors are Psychological Impact. The proposed regression equation for the hypothesis is

Loss of traditional occupation =  $\beta_0 + \beta_1$  Felt agitated against Government for putting Lockdown +  $\beta_2$  Discriminated by other people who were not displaced +  $\beta_3$  Did you have attachment with your ancestral property+  $\beta_4$  Sense of insecurity of displacement+  $\beta_5$  Were you mentally prepared for displacement+  $\beta_6$  Suffer with the feeling of identity crisis+  $\beta_7$  Depressed because of displacement +  $\beta_8$  Suffer with the feeling of rootlessness +  $\beta_8$  Social status affected because of displacement +  $\beta_{10}$  Stressed because of displacement +  $\beta_{11}$  Dissatisfied because of displacement +  $\beta_{12}$  Felt isolated when displaced

ANOVA table shows that the proposed model is significant ( $F(2,107) = 7.174$ ;  $p=.000$ ). The Model Summary shows that the prediction strength is low (Adjusted  $R^2 = .384$ , 38.4 %).

	Sum of Squares	df	Mean Square	F	Sig.	R <sup>2</sup>	Adjusted R <sup>2</sup>
Regression	31.920	12	2.660	7.174	.000 <sup>b</sup>	.446	.384
Residual	39.671	107	.371				
Total	71.592	119					

Table 4.1 ANOVA

The coefficient table shows that out of 12 predictors only three predicting the model significantly. Thus, the obtained regression model will be

**Loss of traditional occupation** =  $-.371 + .249 * \text{Were you mentally prepared for displacement} + .227 * \text{Suffer with the feeling of identity crisis} + .208 * \text{Discriminated by other people who were not displaced} + .157 * \text{Depressed because of displacement}$

Model		Unstandardized Coefficients		Standardized Coefficients	t	Sig.
		B	Std. Error	Beta		
1	(Constant)	-.371	.536		-.692	.490
	Felt isolated when displaced	.188	.122	.155	1.543	.126
	Discriminated by other people who were not displaced	.208	.104	.176	2.009	.047
	Suffer with the feeling of rootlessness	.097	.092	.100	1.049	.297
	Were you mentally prepared for displacement?	.249	.104	.212	2.396	.018
	Suffer with the feeling of identity crisis	.227	.105	.196	2.160	.033
	Depressed because of displacement	.157	.092	.160	1.706	.041
	Stressed because of displacement	-.045	.106	-.041	-.426	.671
	Dissatisfied because of displacement	.077	.099	.075	.782	.436
	Sense of insecurity of displacement	.019	.097	.018	.198	.843
	Social status affected because of displacement	-.133	.109	-.116	-1.220	.225
	Did you have attachment with your ancestral property	.039	.089	.039	.432	.667
Felt agitated against Government for putting Lockdown	-.001	.100	-.001	-.015	.988	

Table 4.2 Coefficients



Since the model is significant and also the predictors are impacting the dependent variable thus the hypothesis **H3: Loss of traditional occupation has psychological impact on the immigrant is accepted.**

**H4: Lack of agricultural land has psychological impact on the immigrant**

Here the **Dependent Variable** is **Lack of agricultural land**. The **independent Variable** or predictors are **Psychological Impact**. The proposed regression equation for the hypothesis is ANOVA table shows that the proposed model is significant ( $F(2,107) = 10.113; p=.000$ ). The Model Summary shows that the prediction is moderate (Adjusted  $R^2 = .479$ ). Which means that 47.9 % is the prediction strength which is moderate.

Model		Sum of Squares	df	Mean Square	F	Sig.	R <sup>2</sup>	Adjusted R <sup>2</sup>
1	Regression	38.436	12	3.203	10.113	.000 <sup>b</sup>	.531	.479
	Residual	33.889	107	.317				
	Total	72.325	119					

Table 5.1 ANOVA and Model Summary

The coefficient table shows that out of 12 predictors only four predicting the model significantly. Thus, the obtained regression model will be

**Lack of agricultural land** =  $-.814 + .279 * \text{Dissatisfied because of displacement} + .278 * \text{Suffer with the feeling of identity crisis} + .261 * \text{Felt isolated when displaced} + .197 * \text{Felt agitated against Government for putting Lockdown}$

	Unstandardized Coefficients		Standardized Coefficients	t	Sig.
	B	Std. Error	Beta		
(Constant)	-.814	.496		-1.643	.103
Felt isolated when displaced	.261	.112	.214	2.319	.022
Discriminated by other people who were not displaced	.048	.096	.040	.498	.619
Suffer with the feeling of rootlessness	.088	.085	.091	1.038	.302
Were you mentally prepared for displacement?	.055	.096	.047	.574	.567
Suffer with the feeling of identity crisis	.278	.097	.239	2.861	.005
Depressed because of displacement	-.040	.085	-.041	-.475	.636
Stressed because of displacement	-.032	.098	-.029	-.324	.747
Dissatisfied because of displacement	.279	.091	.271	3.058	.003
Sense of insecurity of displacement	.167	.089	.157	1.873	.064
Social status affected because of displacement	-.111	.101	-.096	-1.096	.275
Did you have attachment with your ancestral property	-.022	.083	-.022	-.264	.792
Felt agitated against Government for putting Lockdown	.197	.093	.172	2.124	.036

Table 5.2 Coefficients

Since the model is significant and also the predictors are impacting the dependent variable moderately thus the **H4: Lack of agricultural land has psychological impact on the immigrant is accepted.**

**H5: Fall in real income of pre-displaced state has psychological impact on the immigrant**

Here the **Dependent Variable** is **Lack of agricultural land**. The **independent Variable** or predictors are **Psychological Impact**.

The proposed regression equation for the hypothesis is

**Fall in real income of pre-displaced state** =  $\beta_0 + \beta_1$  Felt agitated against Government for putting Lockdown +  $\beta_2$  Discriminated by other people who were not displaced +  $\beta_3$  Did you have attachment with your ancestral property+  $\beta_4$  Sense of insecurity of displacement+ $\beta_5$  Were you mentally prepared for displacement+  $\beta_6$  Suffer with the feeling of identity crisis+  $\beta_7$  Depressed because of displacement +  $\beta_8$  Suffer with the feeling of rootlessness +  $\beta_8$  Social status affected because of displacement +  $\beta_{10}$  Stressed because of displacement +  $\beta_{11}$  Dissatisfied because of displacement +  $\beta_{12}$  Felt isolated when displaced

Table 3.1 ANOVA table shows that the proposed model is significant ( $F(2,107) = 6.540$ ;  $p=.000$ ). the model summary shows that prediction strength is weak (Adjusted  $R^2=.358$ , 35.8%)

Model		Sum of Squares	df	Mean Square	F	Sig.	R <sup>2</sup>	Adjusted R <sup>2</sup>
1	Regression	27.330	12	2.278	6.540	.000 <sup>b</sup>	.423	.358
	Residual	37.262	107	.348				
	Total	64.592	119					

Table 6.1 ANOVA

The coefficient table shows that out of 12 predictors only four predicting the model significantly. Thus, the obtained regression model will be

**Fall in real income of pre-displaced state** =  $-.257 + .350 * \text{Discriminated by other people who were not displaced} + .241 * \text{Suffer with the feeling of identity crisis} + .184 * \text{Felt agitated against Government for putting Lockdown}$

Model		Unstandardized Coefficients		Standardized Coefficients	t	Sig.
		B	Std. Error	Beta		
1	(Constant)	-.257	.520		-.495	.621
	Felt isolated when displaced	.043	.118	.037	.362	.718
	Discriminated by other people who were not displaced	.350	.100	.312	3.481	.001
	Suffer with the feeling of rootlessness	.031	.089	.034	.351	.726
	Were you mentally prepared for displacement?	.022	.101	.020	.217	.829
	Suffer with the feeling of identity crisis	.241	.102	.219	2.362	.020
	Depressed because of displacement	-.058	.089	-.062	-.652	.516
	Stressed because of displacement	-.003	.102	-.003	-.028	.977
	Dissatisfied because of displacement	-.027	.096	-.028	-.283	.778
	Sense of insecurity of displacement	.116	.094	.115	1.239	.218
	Social status affected because of displacement	.096	.106	.088	.908	.366
	Did you have attachment with your ancestral property	.055	.087	.059	.639	.524
Felt agitated against Government for putting Lockdown	.184	.097	.169	1.887	.050	

Table 6.2 Coefficients

Since the model is significant and also the predictors are impacting the dependent variable moderately thus the **H5: Fall in real income of pre-displaced state has psychological impact on the immigrant** is accepted.

## **Findings**

Different types of displacement and the lack of work force stability residents' immigrants are some of the factors that lead to physiological effects. Due to this, people who have lost their jobs find themselves struggling to gain new ones hence resulting in feelings of aimlessness and prejudice from non-affected individuals (Napoli et al 2021). A proper livelihood and an established income also reduce stress created by life in displacement other than pure displacement that leaves people without dignity and a reason to live (Hazer&Gredebäck 2023). These shifts erase traditional occupation leaving them in great dissatisfaction, not only they lack preparation for such changes leading to identity crisis but also depression (Keyes 2000). Furthermore, when agricultural land is lost the immigrants feel they have lost their identity, they are dissatisfied and they get angry with the government especially in difficult seasons such as in the case of lock-down. Loss of earning capacity and a decline in their real income level based on previous economic conditions to which displaced persons were previously accustomed can be attributed to a feeling of discrimination and identity crisis (Brandt et al2022). that builds pressure on the displaced persons to become aggressive towards governmental actions. The sum total of these findings underlines the severe and complex nature of psychological impacts of economic and social disruptions for the displaced people and the need for the corresponding, more focused approaches aimed at the promotion of psychological well-being challenged by such events.

## **Conclusion**

The study shows a traumatic and negative impact of COVID-19 on migrants and other vulnerable populations' mental and socio-economic well-being. Specifically, respondents have experienced high levels of stress, depression, loneliness, and poor sleep quality especially migrants from developing countries highlighting the urgent need and largely untapped market for improved migrant mental health. The covid-19 has certainly created secondary adversities by compounding existing weaknesses like gender-based migration and joblessness which affects the mental health of these people. This social impact has been deeply felt most by migrant workers given that, they bear the brunt of loss of income, lowered wages, poor social security and minimal economic relief. These factors have also contributed to worst mental health wellbeing, and migration stress have resorted to coping with own practices like social contact and music therapy among others.

The study demands the policy to pay attention to the psychological and social aspects of migrants' health regardless of their legal status. It is recommended that governmental initiatives focus on strengthening and extending existing care of mental health and social care services especially due to COVID19 impact. Also, the previous literature revealed several research gaps among which are the special focus on the psychological impact of reverse migration and, specifically, the area of Uttar Pradesh, India. There is also the need to have studies that would help recognize the causes that lead to psychological distress among migrants as well as the impacts of the same. Displacement has also led to broken traditional livelihood sources: careers, farmland, and income opportunities or earning potentials; this has created feelings of alienation or exclusion due to loss of identity since they believe they are discriminated against, which makes their mental health

worse. These findings suggest the need to have an integrated approach to mental health of the migrants while providing support for economic and social effects of the pandemic.

### **Academic Implications**

This research focuses on the consequences of COVID-19 pandemic of psychological and socio-economic impact on the migrants and the vulnerable sections of society. Therefore, these research outcomes make a valuable addition to the existing literature in migration, mental health and economic precariousness in crises. Thus, the research enhances the understanding of the various adverse effects COVID-19 stressors exert on mental health with specific attention to how socio-economic adversities amplify pre-existing mental health issues. Further, it reveals the need to study how such disruptions can widen inequalities, especially in the developing world and extends the agenda for future studies by arguing some of the potential long-term psychological impacts of such disruptions.

### **Managerial Implications**

In its entirety, this research provides policymakers and managers with even greater insights on the need to provide mental health care support for migrants within the framework of social welfare programmes. The investigation recommends that more efforts should be directed to establishing elaborate support frameworks that meet the welfare and psychosocial needs of the affected people in current and future emergencies. This includes promoting the mental health before, including mental health care, identifying and targeting specific negative outcomes of job loss; income reduction; and social isolation. Two more aspects that should not be ignored in managerial approaches are prevention and establishment of suitable mitigation plans for disruption experienced in the future.

### **Limitations and directions for future research**

A limitation springing from the research is the fact that there is limited information on the effect of reverse migration on the psychological well-being of such persons, particularly in areas of Uttar Pradesh in India. Second, the study fails to explore the measures of impacts of socio-economic disruptions caused by pandemics on different demographic groups in the long run. The following are suggestions that need to be undertaken in future: More empirical research should undertake longitudinal designs aimed at establishing long-term effects of such human calamities on not only the mental health of individuals but other socio-economic aspects of societies as well too. Further, comparative data of different countries/regions and different tribes/populations may offer a better perspective on how and to what extent different factors affect migrant's and other vulnerable groups resilience and recovery.

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