



“If the virus doesn’t kill me...”: socioeconomic impacts of COVID-19 on rural working people in the Global South

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As the world reacts to the COVID-19 pandemic, there has been a disproportionate difference in attention shown by government authorities to the health dimension versus the socioeconomic dimension of the crisis. Every day new numbers are on dashboard display: how many new confirmed cases, deaths, by country, by region, by age and gender, with various rates and ratios.¹ Such tracking may be necessary, but it cannot explain why this is happening or who is suffering what consequences and why. Taking stock of the deeper impacts of COVID-19 is crucial. Daily news reports from around the world, shared rapidly via internet, suggest that direct health impacts are the tip of the iceberg. Probably more people’s lives and livelihoods in the short and longer term, and around such basic matters as access to healthy food, are being seriously undermined by political responses to COVID-19, than by the virus itself. When mention is made of the pandemic’s socioeconomic impacts, almost always the focus is on people in big urban centers. Yet half of the world’s population is rural. Far less attention is being given to the socio-economic impact of the pandemic on working people in rural communities, especially in the Global South. This is the focus of this short piece.

Take the case of Myanmar. As late as April 21, Myanmar had just 119 confirmed positive cases (out of 4692 tested), and just 5 confirmed deaths—quite a small number compared to some other Southeast Asian countries, and even more so compared to China, Europe and Northern America. Yet the effects of the outbreak elsewhere began reaching Myanmar earlier, in February and March—weeks before

the first officially confirmed cases of the virus itself were announced. Desperate appeals began circulating on social media by groups of Myanmar workers stranded inside China after being locked out of workplaces empty-handed and turned away from surrounding villages. Cross-border flows became restricted, affecting the flow of fresh fruit and vegetables from fields in Myanmar to markets in China. Garment factories began closing abruptly in February, throwing thousands of workers (mainly young women) and their families deeper into precarity. Tens of thousands of Myanmar workers in Thailand suddenly found themselves out of work, scrambling to leave quickly after the Thai government announced that its borders would close on March 23. Many places inside Myanmar were reportedly unprepared for the influx of migrant workers who did manage to get home. The national government had done little to prepare the country with information or protective equipment. Also at risk are tens (if not hundreds) of thousands of people previously displaced by the armed conflict and/or land grabbing and already being squeezed by the triple threat of diminishing humanitarian aid (including food rations) to internally displaced people (IDP) and refugee camps; continuing land, water and forest grabbing of so-called “vacant and unused land”; and the government’s nationwide IDP camp closure strategy plan. Close to a million people are living in IDP or refugee camps or elsewhere due to past cycles of military operations, excluding the close to a million Rohingya expelled in recent years. A fresh round of Myanmar Army offensives has resulted in more displacement. Grassroots organizations are mobilizing to fill the gap, distributing thermometers and hand sanitizers and organizing quarantine facilities in villages and IDP camps, but in some places have been blocked by the military. The government said it would distribute basic food to poor people across the country for free, but this seems to have been little more than a limited

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¹ See the now famous Johns Hopkins University and Medicine Coronavirus Resource Center at <https://coronavirus.jhu.edu/map.html>.

public relations move. The prospects of more people joining the ranks of the hungry seem high at this point.

Stepping back, even before the COVID-19 crisis hit, humanity was failing to ensure that *everyone* has a reasonable and effective chance to live a well and dignified system-wide. Instead, hunger, destitution, exclusion, exploitation, and oppression have become normalized states of being for many people in many places, not just Myanmar. In 2018 globally, for example, 5.3 million children under the age of 5 died largely from “preventable or treatable causes like infectious diseases and injuries when we have the means to prevent these deaths”.² Despite decades of ‘poverty alleviation’ programs and initiatives, there continues to be 1 billion hungry people in the world—a now standard estimate that is also a gross underestimation linked to how cynically hunger is measured by the agencies officially tasked with ‘tackling the problem’.³

Sober reminders like this are an antidote to the normalization of suffering in our collective psyche. Unpacking such data shines a light on the gap between those whose lives count and those whose don’t when it comes to mainstream sustainable development agendas. For all the resources that have been devoted historically to ‘poverty alleviation’, the proportion of those going hungry doesn’t change and the absolute numbers are rising. Now comes COVID-19 and the

gap can be seen even more clearly in the kinds of responses to the health emergency and how they are unfolding and interacting with conditions received from the past. A chorus of voices is rising from many normally invisible corners of the world, speaking a common refrain: “If the virus doesn’t kill me, hunger will, and if for some reason neither of these take me, then perhaps a bullet will if I am caught out of doors during lockdown.”

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² Levels and Trends in Child Mortality, Report 2019 by the Interagency Group for Child Mortality Estimation, p. 6, available online at https://www.who.int/gho/child_health/mortality/mortality_under_five_text/en/.

³ As Eric Holt Gimenez reminds us, firstly, “People are only identified as hungry if they experience hunger 12 months out of the year. If they experience hunger for only 11 months out of the year, they’re not counted as hungry”; and secondly, “The caloric intake threshold for determining hunger (around 2000 kcalories) is fine if you sit quietly behind a computer for 8 h a day. But most hungry people in the world are women farmers in the developing world who work under a hot sun all day long and are nursing one or more children. They need as much as 5000 kilocalories a day” (see <https://foodfirst.org/wp-content/uploads/2019/08/JAFSCD-PBFS-Keynote-Capitalism-Holt-Gimenez-August-2019.pdf>).