BACKGROUND

The Mumbai Metropolitan Region (MMR) is largely urban in character, with nearly 91 per cent of the population living in municipal areas and about 3.5 per cent in census towns. Little under a third of urban households in MMR live in slums, and in Greater Mumbai the percentage population in slums is as high as 80 per cent. However, the overall proportion of urban slum households decreased from 39.29 per cent in 2001 to 28.64 per cent in 2011. This indicates that there is a severe lack of affordable housing options available in urban MMR and people have no choice but to resort to informal housing in slums. This is the single largest issue facing MMR, which has some of the highest real estate prices in the world. People are forced to relocate further away from the core city of Greater Mumbai (where the majority of the formal jobs continue to be located) in search of affordable housing (MMRDA, 2016).

Forms of housing created by people vary—from those living in temporary structures, on worksites, in slums, in rehabilitation and resettlement (R&R) colonies, adivasipadas (tribal hamlets) and gaothans (urban villages). The legality of the settlement determines access to basic services and security of housing.

‘Habitat’ emphasises that the dwelling structure is one aspect of the entire ecosystem of adequate housing. Basic services, open spaces, education and health amenities, and safe environments together with a ‘home’ refer to adequate housing. The report detailed the concerns of those living in inadequate habitats and the impacts of the same during the pandemic.
FINDINGS FROM THE REPORT

• Living in inadequate habitats created additional challenges for the urban poor. The homeless and those living on rent were most vulnerable to eviction during the lockdown. This was despite government announcements to prohibit evictions and moratorium on rents.

• Access to adequate and affordable basic services such as water, sanitation, electricity and healthcare was a challenge during the lockdown and became additional financial liabilities in a situation without earnings.

• The inadequacy of habitat, and the inability to prove residence has had a bearing on access to identity documents and entitlements—this meant no access to government provided relief for many.

• A considerable number of participants also reported limited access to water and practicing open defecation due to lack of functioning public toilets. Among those who had access to community or public toilets, many reported that they were still being charged to use them.

• Poor access to healthcare was another major concern among urban poor communities across the Mumbai Metropolitan Region (MMR).

• Those living in kutchha houses, adivasipadas and the homeless were concerned about the upcoming monsoon. Lack of money during the lockdown also hampered their ability to waterproof their housing structures, which they used to do every year before the monsoon.

• Lack of safety, violence and rising tensions were experienced by respondents in various settlements.

RECOMMENDATIONS

Immediate measures to ensure people’s immediate habitat related concerns are addressed

i. Homeless shelters that have been set up in response to the pandemic must be continued and provided for as per National Urban Livelihoods Mission (NULM) guidelines to ensure the safety and well-being of homeless residents.

ii. For those who have taken housing loans for upgrading slum housing, loan waivers for the same period for housing loans must be enforced.

iii. For those living on rent, a helpline and follow-up support should be provided for support in case they are forcibly evicted or denied any entitlement for the lack of any proof of residence.

iv. A strict moratorium on rent should be released, extending the Government Resolution (GR) released by the Government of Maharashtra that was valid till June 2020.

v. Electricity bills must be deferred for the next 6 months (during the disaster and recovery period) through coordination with public and private electricity providers for all urban poor settlements.

vi. Access to water and sanitation must be provided in all areas. The High Court and other legal directives to ensure water supply to all and implementation of the GR to allow the use of public toilets free of cost should be undertaken by the local government. All public toilets must be regularly sanitised.

vii. There must be emergency health services in underserved areas, disinfection of common areas, mobile health vans and free health care for all.

viii. Medication for tuberculosis, cancer and HIV is currently sparingly being accessed from health posts and hospitals. Patients must be given priority to access this medication in a smooth manner.

ix. Dedicated ambulances must be provided in remote areas such as adivasipadas for health emergencies during a time when normal transport services are unavailable.

x. As a disaster management strategy, kutchha house residents and residents of adivasipadas must be provided help with preparing or repairing their houses for monsoon, especially so during an ongoing disaster situation.
Long term measures to ensure resilient habitats in the MMR

i. As per the Maharashtra State Disaster Management Plan 2016, community-based early warning systems must be established in urban poor settlements to improve their disaster preparedness. Single women, transgender persons and unsupported elderly people must be integrated in community-based networks to ensure their security during disasters and inclusion during relief work and recovery.

ii. Slums must be notified as per the Maharashtra Slum Act and all basic services (water, sanitation, roads, drainage systems) should be provided in proportion to the number of residents. Currently, this is a long and cumbersome process that has prevented people in slums from receiving basic facilities that ensure adequate sanitation and quality of life.

iii. The Slum Rehabilitation Scheme must be amended to ensure that slum rehabilitation projects maintain densities prescribed by the National Building Code (higher floor space index means higher densities and for slum rehabilitation buildings it means more people living in smaller houses with compromised housing conditions).

iv. Urban planning must respond to this situation. As per the Maharashtra Regional and Town Planning Act, slums are planned for by the Slum Rehabilitation Authority (SRA). Slums must not remain Special Planning Areas (SPAs) under the SRA. The onus of containing this virus is on the local government and planning for it by the local government in the long term is crucial.

v. Local Area Planning with effective local governance must be developed. Local Area Plans need to have education, health care, sanitation services that cater to the existing population of an area.

vi. With this, the 74th Constitution Amendment Act must be implemented to ensure powers are devolved in wards, areas and mahallas. Local governments can partner with existing community leadership and non-profits to form emergency planning committees that can consider the unique social, economic and cultural needs of the community in charting the appropriate response, rather than relying on top-down directives.

vii. The Pradhan Mantri Awas Yojana (PMAY) rental housing scheme announced post the lockdown by the Central government is a welcome step. Operation of a rental housing scheme in the Mumbai Metropolitan Region (MMR) would need support from local governments and the state government through the Maharashtra Housing and Area Development Authority (MHADA). A government facilitated rental housing programme that takes into account needs and income capacities of daily wage and informal sector workers will be a step towards resolving housing challenges faced by workers in the MMR.

REFERENCES

Mumbai Metropolitan Regional Development Authority (2016) Draft Regional Plan 2016-2036