

International Organization for Migration (IOM)

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TOPIC B. Measures to address the humanitarian impact of COVID-19 on migration

I. Introduction

The Covid-19 pandemic has had several impacts in many aspects around the world. From socioeconomic issues to health problems, they are all increasing poverty and the vulnerability of people. But, even though, almost every citizen around the world may have to deal with consequences regarding the pandemic, migrants are a particular vulnerable group in the topic.

It is estimated that there are about 258 million migrants around the world and their safety and well-being is a global responsibility. According to the article 13 of the Universal Declaration of Human Rights, everybody has the right to freedom of movement and residence between the borders of each State, as well as the right to leave any country and return to that country. This means, migration is a human right and should never be obstructed. However, migrants have always been vulnerable to human trafficking, forced labor, modern slavery, among others, and now, because of the pandemic, to health-related issues and leading problems from the strict implementation of lockdowns and security measures.

Also, because of the pandemic looking forward decreasing its impacts, many territories have imposed mobility restrictions on borders and states. This has led to new emerging problems of global mobility that have placed migrants in different precarious situations that the International Organization for Migrations (IOM) divided in the next categories:

- Destitute migrants: Individuals who have lost their means of support and therefore are unable to cover their basic needs.
- Stranded migrants: Individuals stocked in a foreign country due to Covid-19 mobility restrictions.
- Evicted migrants: Individuals who have lost access to their shelters because of Covid-19 related issues.
- Returning migrants: Migrants who were previously stranded but are now returning to their country of origin.
- Migrants in detention centers, camps, and other camp-like settings: Individuals who have been residing transit countries on camps and other forms of shelter due to health and migration issues.
- Migrants in humanitarian/conflict setting: Individuals living in countries affected by conflict or humanitarian crisis and which communities have been affected by Covid-19.
- Migrant workers: Individuals in work and living conditions, in both formal and informal sectors, that expose migrants to contracting COVID-19.
- Migrants stocked at the sea: Individuals who experience different challenges while at the sea, including seafarers and marine personal as well as migrants, despite the COVID-19 pandemic containment measures and other difficulties.

II. Concept definition

- Migration: According to the IOM, migration is the movement of a person or a group of persons either across an international border or within a state. It is a population movement encompassing any kind of movement of people whatever its composition and causes. It includes migration of refugees, displaced persons, economic migrants, and people moving for other purposes including family reunification.

- Covid-19: According to the World Health Organization, the Corona virus disease is an infectious disease caused by a newly discovered coronavirus.
- Humanitarian impact: According to the Cambridge dictionary, humanitarian refers to an activity involved with improving people's life by reducing suffering, and impact refers to the effects on something or someone.

III. Current situation

During Covid-19 pandemic, immigrants have been part of at least 4.5% of the population in twelve of the twenty countries with the highest number of cases. Regardless of their work, they have been an important sector contributing by addressing the pandemic, but they have also been taking the highest risks of contracting and spreading the virus as a result of working on the frontline during the pandemic. Also, there exist other factors linked to it, as housing conditions and poverty on eight of these twenty countries like United States, France, Spain, United Kingdom, Germany, Chile, Italy and Belgium, that are countries that depend on foreign-born workers in the sector of healthcare services (OECD, 2019).

In Chile, 23% of doctors were foreign-trained, and in the United States as the United Kingdom, most of foreign-trained doctors in 2016 were educated in India and Pakistan. Additionally, many foreign-trained doctors in the United States studied in the Caribbean Islands, the Philippines, Mexico and Canada while many practicing in the United Kingdom studied in Nigeria, Egypt, Ireland, Greece and South Africa (OECD, 2019).

“Migration will continue to play an important role for economic growth and innovation, as well as in responding to rapidly changing labor markets,” said OECD Secretary-General Angel Gurría, launching the report with European Commissioner for Home Affairs Ylva Johansson. “We need to avoid rolling back on integration and reaffirm that migration is an integral part of our lives.”

Within the migrant population and according to UN Women, there are certain risks involved due to the pandemic, some of those are different between men and women and can cause inequalities among people in vulnerable positions, in the specific case, towards migrant women; these risks are:

- Job insecurity, exploitation, and socioeconomic impacts: According to the 2020 IOM's World Migration Report, migrant women are an important part on the service industry, representing approximately 74% of domestic workers who must face job insecurity on a daily basis. Due to the pandemic, mobility and travel restrictions affect them since most of them use their income to support their families in their country of origin. The UNDP said that during this health crisis, women who do domestic work become more dependent on their employers and are further removed from social protection, also indicating that even when this crisis ends, the economic consequences can expose them to sexual exploitation like the one that occurred in 2013 due to the Ebola outbreak.
- Xenophobic rejection: Currently, there are many people who think that all migrants have Covid-19 for the simple fact of being migrants, this idea leads them to be discriminated. In the specific case of migrant women, consequences such as lack of support and care in medical centers in situations such as pregnancies, support for gender violence, among others.
- Greater insecurity against the virus: The limited capacity of some migrant women to access protective materials such as masks and hand sanitizer, as well as the greater tendency to live in crowded conditions, leaves this population less prepared to face the virus.
- Overload of care work: The burden of domestic work carried out by women around the world is twice the work carried out by men, and in many cases, it is unpaid. The workload resulting from the closure of schools due to the pandemic and the care that is required for people sick with Covid-19 is usually borne by migrant women.

- Increased gender-based violence: Mobility and quarantine restrictions force many women to isolate themselves from their abusers or potential abusers. Job and immigration uncertainty, as well as social distancing, exacerbate existing gender violence. For many migrant women who do not have sufficient support networks in transit and destination countries, isolation from their aggressor is a potential danger.

As we can analyze, global inequality has been on its highest levels since Covid-19 appeared. In countries such as the Philippines, Bangladesh, Ghana and Honduras rely heavily on remittances from citizens abroad. According to the United Nations, "migrants and their families are often part of marginalized and vulnerable groups that are already experiencing economic hardship as a result of containment measures." In an extreme case, that could become the norm as the pandemic worsens. For example, Iranian hospitals refuse to treat Afghan migrants, causing many of them to return home to a country with a nearly destroyed health infrastructure after decades of conflict.

IV. International initiatives

WHO is the leading organization responsible for promoting the health of refugees and migrants and currently emphasis on prevention and responses during the COVID-19 pandemic. Refugees and migrants have the same risks as the host population, but due to some barriers, like geography, facilities, discrimination, language, and costs, they might lack access to the health services needed to control and treat diseases.

For that reason, in countries that host many refugees and migrants, WHO offices are working with health ministries and other partners on initiatives to prevent and control the pandemic. WHO is also working with other UN agencies to provide interim technical guidance on scaling up outbreak readiness in humanitarian situations. Also, to improve inter-institutional coordination for country support, EMRO has established, in collaboration with OIM, ESCWA, and ILO, a regional task force on COVID-19 and migration/mobility.

WHO has been working with ministries of health across the world, including ministries in Cambodia, Greece, Lebanon, Mexico, Singapore, Thailand, and Turkey, among others. In Thailand, universal health coverage is available to all migrants and refugees, regardless of legal status. WHO's Thailand Country Office has mobilized resources locally from the Government of Japan, to help strengthen surveillance and outbreak response in refugee camps, along with distributing supplies and commodities.

In Mexico, education materials on the prevention, early detection and management of Covid-19 in shelters for migrants and asylum seekers have been developed. Migrant reception centers have been identified as areas of potentially greater health risk and WHO is promoting the implementation of health protocols for the prevention and early detection of Covid-19 at these points.

V. Guide questions

1. What measures can be taken to maintain global mobility but also provide security and health to migrants?
2. How has Covid-19 affected human trafficking and modern slavery in migration?
3. What measures are shelters and camps taking to provide health resources to migrants?
4. Why is migration during Covid-19 pandemic a global humanitarian concern?
5. What can the IOM do in order to protect the lives of the migrants during the Covid-19 pandemic?
6. What measures and protocols can be implemented in bordering-sea countries to protect the migrants stocked at the sea?
7. Which borders were the most affected by the Covid-19 virus?
8. What are the main impacts of Covid-19 in migrants?
9. How have children migrants been affected on their education by the Covid-19 security measures?

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