Anti-Discrimination and COVID-19 Advocacy Tool

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United Nations
Network on Migration
Working Better Together

Contents

Glossary

AAP	•	Asian American and Pacific Islander
CDC	•	Centre for Disease Control and Prevention
CEDAW	•	Convention on the Elimination of All Forms of Discrimination Against Women
CRPD	•	Convention on the Rights of People with Disabilities
DISC	•	Diversity, Inclusion and Social Cohesion
EU	•	European Union
EU FRA	•	European Union Fundamental Rights Agency
FADWU	•	Federation of Asian Domestic Workers Unions
FAO	•	Food and Agriculture Organization of the United Nations
FGM	•	Female Genital Mutilation
GBV	•	Gender-Based Violence
GCM	•	Global Compact on Safe, Orderly and Regular Migration
HRC	•	Human Rights Council
ICCPR	•	International Covenant on Civil and Political Rights
ICERD	•	International Convention on the Elimination of All Forms of Racial Discrimination
ICESCR	•	International Covenant on Economic, Social and Cultural Rights
ILGA	•	Lesbian, Gay, Bisexual, Trans and Intersex Association
ILO	•	International Labour Organization
IOM	•	International Organization on Migration
ITUC	•	International Trade Union Confederation
LAWRS	•	Latin American Women's Rights Service
LGBTIQ+	•	Lesbian, Gay, Bisexual, Trans, Intersex and Queer
MFA	•	Migrant Forum Asia
OECD	•	Organization for Economic Co-operation and Development
OHCHR	•	Office of the High Commissioner for Human Rights
PAHO	•	Pan American Health Organization
RIDE	•	Reach Inclusion through Digital Empowerment
SDGs	•	Sustainable Development Goals
SOGIESC	•	Sexual Orientation, Gender Identity, Gender Expression and Sex Characteristics
UDHR	•	Universal Declaration of Human Rights
UN	•	United Nations
UNDCO	•	United Nations Development Coordination Office
UNDESA	•	United Nations Department of Economic and Social Affairs
UNESCO	•	United Nations Educational, Scientific and Cultural Organization
UNGA	•	United Nations General Assembly
UNHCR	•	United Nations High Commissioner for Refugees
UNNM	•	United Nations Network on Migration
UNODC	•	United Nations Office on Drugs and Crime
UNPRDP	•	United Nations Partnership on the Rights of Persons with Disabilities
WHO	•	World Health Organization.

1   KEY MESSAGES

1.1   Introduction

COVID-19 has impacted and continues to impact on everyone's lives, disproportionately so for migrants, in particular those in an irregular situation, migrant women, racialized groups, people with diverse sexual orientation, gender identity, gender expression and sex characteristics (SOGIESC), children on the move, people with disabilities, those working in so-called "essential" jobs and in the informal sector. It has highlighted, accentuated and accelerated pre-existing inequalities experienced by migrants around the globe.

The human rights issues for migrants through and post the pandemic cannot be ignored. The stark reality is that racialized and ethnic minority groups in many countries, including migrants, are more likely to have contracted and died from COVID-19. They have also been more impacted economically.

The impact of COVID-19 has not been in isolation from migration governance, race-related policies, gender inequalities or systems of oppression. Furthermore, the experience of migrants is shaped by intersecting identities and inequalities, such as those based on race, gender, SOGIESC, disability, age, country of origin, nationality, ethnicity, religion and migration status. Even where migrant rights and migration regulations may be similar for different groups of migrants, their experience is not homogenous, and the impact of the COVID-19 pandemic reflects these differences.

The Global Compact on Safe, Orderly and Regular Migration (GCM) is based on a set of ten cross-cutting and interdependent principles, including human rights and gender responsiveness. It sets out objectives to eliminate all forms of discrimination and promote evidence-based public discourse to shape perceptions of migration (objective 17), provide access to basic services for migrants (objective 15) and empower migrants and societies to realise full inclusion and social cohesion (objective 16)[1].

Stakeholders all have a role to play in ensuring that the human rights of migrants are protected and that everyone can live in societies free from racism, xenophobia, gender inequalities and other forms of discrimination. States have a distinct role as duty bearers with the obligation and the power to protect migrants' rights. Now, there is both an opportunity and responsibility to hear the experiences of migrants and assess the systems underpinning them; to accentuate the positive experiences and accelerate the progress towards greater equality.

The role systemic racism plays in the context of racial justice and law enforcement has been acknowledged internationally. The report of the United Nations High Commissioner for Human Rights on racial justice and equality, pursuant to Human Rights Council (HRC) Resolution 43/1, sets out a four-point agenda, the first of which is to "step up", i.e. to dismantle, not deny, racism[2].

Systemic racism crosses all aspects of society, structures, and systems. Therefore, the potential for migration policies and governance to be shaped by and perpetuate racial discrimination similarly needs to be considered. This is essential to ensuring that migrants, regardless of status, are fully protected by and included in COVID-19 relief and recovery initiatives, and to ensure that the public is better prepared for and protected during future pandemics.

COVID-19 has clearly shown that no one is protected until everyone is protected. A message in the context of public health, it has a resonance for many human rights issues, including racism, gender inequalities and migration.

Many have demonstrated critical leadership in a time of great adversity. United Nations Secretary-General,

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1   United Nations General Assembly (UNGA) Global Compact on Safe, Orderly and Regular Migration (11 January 2019) UN Doc A/RES/73/195. Available online at https://www.un.org/en/ga/search/view_doc. asp?symbol=A/RES/73/195.

2   Human Rights Council (HRC) Promotion and protection of the human rights and fundamental freedoms of Africans and of people of African descent against excessive use of force and other human rights violations by law enforcement officers (9 July 2021) UN Doc A/HRC/47/53. Available online at https://www.ohchr.org/EN/Issues/Racism/Pages/Implementation-HRC-Resolution-43-1.aspx.

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António Guterres urges all actors, including those in the UN system, to,

> *"Redouble efforts to address violence, discrimination and exclusion of people including minorities, indigenous peoples, migrants, refugees, gay, lesbian, bisexual, transgender and intersex (LGBTI) people, people with disabilities and others[3]."*

International Organization on Migration's Director General, António Victorino also issued a statement noting that combatting xenophobia is key to an effective COVID-19 recovery and highlighting the fact that racist and xenophobic incidents linked to the pandemic are widespread[4].

As United Nations High Commissioner for Human Rights, Michelle Bachelet has said,

> *"COVID-19 has shown us that excluding and discriminating against groups of people makes us all weaker. To build societies that can be more resilient and resistant to all kinds of shocks, we need to act with greater solidarity. Instead of repeating harmful narratives of fear and exclusion, it's time to welcome people into our communities, to reimagine our collective future"[5]."*

While some policies have discriminated against migrants, other policies and practices have positively impacted their lives: crisis brings opportunity, and these promising practices show what is possible.

1.2   Key Messages

Several key messages emerge from the experiences of migrants and responses to COVID-19. These speak to the need for human rights-based approaches in health emergencies and meaningful migrant participation in all policy processes, such as COVID-19 recovery and beyond, migration, and inclusion specific policies.

PRINCIPLES AND APPROACH

1.   COVID-19 relief and recovery programmes must be underpinned by a human rights-based, gender-responsive, anti-racist and people-centred approach that strives to leave no one behind. COVID-19 does not discriminate; nor should our response. Including migrants in COVID-19 response and recovery is essential to promoting inclusive societies going forward. All relief and recovery programmes must also respect the core international human rights treaties[6] and international labour standards[7]. It is important that intersectionality is considered and addressed when developing COVID-19 responses.

2.   Migrant rights are human rights that need to be guaranteed without discrimination, including on grounds of nationality, ethnicity or migration status. The inequalities and discrimination embedded in migration policies need to be challenged at the international and national level if we are to recover from and be prepared for future pandemics.

3.   Targeted consideration of marginalized groups and remedial interventions need be considered at the earliest stage, to ensure policies do not intentionally or unintentionally exclude migrants or discriminate against them.

4.   Freedom from racial discrimination is a right, not a privilege. Protecting migrants from racial discrimination is a question of law, not of good will.

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3   OHCHR "United Nations Secretary-General Antonio Guterres launches his call to action for Human Rights" (24 February 2020), available online at https://www.ohchr.org/EN/NewsEvents/Pages/DisplayNews.aspx?NewsID=25603&LangID=E.

4   IOM "Combatting Xenophobia is Key to an Effective COVID-19 Recovery", 22 May 2020, available online at https://www.iom.int/speeches/combatting-xenophobia-key-effective-covid-19-recovery.

5   International Migrants Day video message from High Commissioner Michelle Bachelet, 18 December 2020, available online at https://www.ohchr.org/en/NewsEvents/Pages/DisplayNews.aspx?NewsID=26617&LangID=E.

6   https://www.ohchr.org/en/core-international-human-rights-instruments-and-their-monitoring-bodies.

7   https://www.ilo.org/global/standards/subjects-covered-by-international-labour-standards/equality-of-opportunity-and-treatment/lang--en/index.htm

5.   International migration needs more than collective attention, it needs collective action. Cooperation is key to ensuring human rights-based and gender-responsive migration. The Guiding Principles of the GCM recognise that the pursuit of principled migration governance requires the input of all sectors of government and society. Now is the time to ensure that this principle is upheld.

6.   Stakeholders including civil society organizations are actors in building inclusive societies and fostering a successful recovery.

7.   Building inclusive, resilient communities where rights are respected, protected and fulfilled is needed now more than ever, at a time of multiple crises including a health crisis and climate crisis. These crises disproportionately impact on migrants and can compel migrants to leave their homes.

8.   Political leadership is required to acknowledge racism, call out harmful racial and other stereotypes, encourage solidarity and take remedial action. Proactively, political leadership can promote evidence-based public discourse to shape the perception of migration[8].

9.   Take steps to eliminate the increase in hate speech and hate crimes, which disproportionately affected migrants and those of migrant backgrounds through the pandemic.

10.   We are stronger together, and so migrants must be included in COVID-19 relief and recovery programmes so that everyone is protected and has the opportunity to contribute.

11.   Harnessing the contributions of all migrants to support COVID-19 recovery efforts which benefit all, through unlocking the positive impact of migration on the sustainable development goals (SDGs).

12.   Global inequalities, gender inequalities, the impact of historical legacies of enslavement and colonialism and systemic racism, as well as climate change, can interact as drivers of migration amongst others. An intersectional approach needs to consider and to examine historical inequalities and structures, including social and political structures, for evidence of built-in racism and xenophobia, and not just the cumulative disadvantages or injustices posed currently by the pandemic.

ISSUE-SPECIFIC RESPONSES

1.   To ensure the human rights and dignity of migrants is respected - and for our response to the pandemic to be effective and sustainable in the longer term - policies, programmes and services need to address the specific issues in the context of migration and COVID-19 in a manner that is gender responsive and free from racial discrimination. We must overcome the specific barriers to adequate, affordable and universal healthcare through quality public services, ensuring the provision of services for migrants.

2.   Equal access to vaccination is a prerequisite to ensuring no migrant is left behind. This entails not only more equitable access within countries, but serious and urgent consideration of a WTO TRIPS Waiver and subsequent implementation that will allow global South countries to produce and distribute affordable vaccines.

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8   This is in line with the GCM, objective 17: "Eliminate all forms of discrimination and promote evidence-based public discourse to shape perceptions of migration".

3.   Redoubling tripartite efforts to ensure decent work with appropriate protection equipment and social protection for migrants is necessary, with particular consideration of those most marginalized, often with intersecting identities, including racialized groups, migrant women, those in the informal sectors, and migrant workers in an irregular situation. This includes facilitating fair and ethical recruitment and safeguarding conditions that ensure decent work, as set out in the GCM (objective six).

4.   Racial stratification of the labour market and the gender division of labour are linked to historical processes and structures including systemic racism, colonialism, slavery and patriarchy, as well as an unsustainable global financial system. Structural issues need to be acknowledged and addressed if we are to overcome issues such as poverty that have caused higher levels of risk for migrants, including the risks of being exposed to COVID-19, and that of being disproportionately impacted by the associated socio-economic consequences.

5.   Migrants in an irregular situation face barriers accessing economic and social rights, such as health, education, social security and decent work. The benefit of firewalls is evident, particularly in the context of accessing COVID-19 related health services, Greater consideration of and more widespread implementation of firewalls, including between service providers and immigration officials, is needed.

6.   There needs to be more consistent collection, analysis and protection of race-, sex-, gender- and age-disaggregated data, as well as data disaggregated by migration status (while guaranteeing privacy and security, and with consideration of firewalls as above) in order to systematically discern and address the specific issues migrants face through an intersectional lens. This is key to meeting GCM objective one to "collect and utilize accurate and disaggregated data as a basis for evidence-based policies".

7.   Given service providers increased use of and reliance on technology through the COVID-19 pandemic, the human rights implications of digitalization – including risks, benefits, and protections – need to be high on the agenda, including by addressing the digital race and gender divides. Similarly, it is important to reflect on and address the issues associated with the use of digital technologies in border and immigration enforcement, including how this has perpetuated racial and xenophobic discrimination[9].

8.   COVID-19 recovery plans[10] can avoid and address discrimination through broad action areas including interventions[11] explicitly tackling discrimination based on race and ethnicity interventions   addressing compounding and intersecting drivers of discrimination and social exclusion; principles for a human rights-based and gender-responsive approach; and critical transversal enablers[12].

See UN Network on Migration statements online at https://migrationnetwork.un.org/statements

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9   See for example, report of the Special Rapporteur. Human Rights Council (HRC) Racial and Xenophobia discrimination and the use of digital technologies n border and immigration enforcement – Report of the Special Rapporteur on contemporary forms of racism, racial discrimination, xenophobia and related intolerance (22 September 2021) UN Doc A/HRC/48/76. Available online at https://www.ohchr.org/en/documents/thematic-reports/ahrc4876-racial-and-xenophobic-discrimination-and-use-digital.

10   The Outcome Report of the Frontier Dialogue Consultations on Addressing Structural Racial and Ethnicity-Based Discrimination, November 2021, p. 16, sets out three entry points for COVID-19 recovery plans. The consultations were led by led by WHO and UNESCO, with the support of OHCHR, IOM, UNDCO and UNDESA, under the umbrella of the UNSDG Task Team on Leaving No One Behind, Human Rights and the Normative Agenda October 2020 to February 2021. The Outcome Report is available online at https://www.who.int/publications/m/item/frontier-dialogue-consultations-on-addressing-structural-racial-and-ethnicity-based-discrimination.

11   The grounds protected under ICERD are highly relevant to migrants, i.e. race, colour, descent, nationality and ethnic origin.

12   Transversal enablers identified include ensuring meaningful political and civic participation, enabling data disaggregation, ensuring right to birth registration and legal identify, dedicating sufficient resources to support civil society and investing in accurate and timely communication.

2 INTRODUCTION AND PURPOSE

2.1   Introduction and purpose

The UN Network on Migration has developed this publication on anti-discrimination and COVID-19 relief access for migrants to advance inclusive and gender-responsive responses to COVID-19. The tool provides a snapshot of issues, challenges, and promising practices across regions.

In line with the Global Compact for Safe, Orderly and Regular Migration (GCM), which sets objectives on the elimination of all forms of discrimination , access to basic services and realizing full inclusion and social cohesion , this work builds upon the current knowledge of measures taken to address the pandemic. It considers how COVID-19 policies and responses may interact with other migration, gender and race-related policies, including those impacting on social determinants of health (e.g. income, employment, education and access to services) .

The publication looks at discrimination on grounds related to race and gender and how these shape the impact of COVID-19 on migrants, including their access to gender-responsive COVID-19 relief. It looks at these grounds separately and through an intersectional lens, including instances of interlinkages between race and gender, including SOGIESC, as well as with other prohibited grounds of discrimination.

A term first coined by Kimberlé Crenshaw in 1989 , intersectionality is a term that has gained popularity and many definitions have emerged. Intersectionality extends beyond a focus merely on identity and constitutes a structural analysis. It has been described for example as recognising that "people's lives are shaped by their identities, relationships and social factors. These combine to create intersecting forms of privilege and oppression depending on a person's context and existing power structures such as patriarchy, ableism, colonialism, imperialism, homophobia and racism" .

Limited access to disaggregated data is a long-standing issue highlighted in the publication. This issue has also had practical implications for the development of this publication. Given some data limitations, particularly regarding disaggregated quantitative data, the arguments made throughout are therefore based on evidence that is readily available, qualitative data, and analysis and deduction.
The advocacy tool aims to:

•	Provide a snapshot of issues, challenges in relation to discrimination, including on the basis of race and gender experienced by migrants across regions, to help identify problems presenting for migrants;
•	Consider how Covid-19 policies and responses may have interacted with other migration, race and/or gender-related policies, and where this may have contributed to differential impacts on the social determinants of health (e.g. income, employment, education, access to other services), where feasible;
•	Provide examples of current promising practices and processes developed by stakeholders that may inform and inspire stakeholders looking to improve outcomes for migrants of all backgrounds.

13	GCM, Objective 17.

14	GCM, Objective 15.

15	 GCM, Objective 16.

16	The World Health Organization (WHO) Framework on promoting the health of refugees and migrants is a key framework which is also referenced in the GCM, available online at https://www.who.int/migrants/about/framework_refugees-migrants.pdf The accompanying Global Action Plan is available online at https://www.who.int/publications/i/item/promoting-the-health-of-refugees-and-migrants-draft-global-action-plan-2019-2023.

17	Crenshaw, Kimberlé (1989) "Demarginalizing the Intersection of Race and Sex: A Black Feminist Critique of Antidiscrimination Doctrine, Feminist Theory and Antiracist Politics," University of Chicago Legal Forum: Vol. 1989: Iss. 1, Article 8. Available online at http://chicagounbound.uchicago.edu/uclf/vol1989/iss1/8.

18	This explanation is from Hankivsky, O. (Ed.). Intersectionality 101. Vancouver: Institute for Intersectionality Research and Policy, Simon Fraser University. 2014. Cited in UN Women/UN Partnership on the Rights of Persons with Disabilities (UNPRDP) Intersectionality Resource Guide and Toolkit: An Intersectional Approach to Leave No One Behind, 2022, p. 8. Available online at https://www.unwomen.org/sites/default/files/2022-01/Intersectionality-resource-guide-and-toolkit-en.pdf.

A short, focused and time-sensitive project, this publication does not set out to provide a comprehensive mapping of all discrimination issues or anti-discrimination practices, in each region. It does, however, hope to highlight some of the issues that may be overlooked when migrants are treated as a homogenous group, without due regard to their multiple identities and the intersecting issues they may experience based on gender, race, SOGIESC and other identity markers.

The publication paints a picture of some of the issues emerging, drawing examples from different regions; deduces some key messages from lessons learned; and provides some direction towards practices or other resources for those stakeholders looking to focus on a specific issue or area .

2.3   Publication in context: migration, anti-discrimination and COVID-19

COVID-19 requires a rapid and global response. Cooperation at an international and national level is key to enabling a consistent approach to a virus which does not recognise borders[20]. In a situation requiring a rapid response, those who are already marginalized are also likely to be most impacted. Evidence demonstrates that this has materialized during the COVID-19 pandemic.

At the same time, previous experience of pandemics, and the existing international infrastructure can help ensure that a human rights-based and gender-responsive approach that is people-centred and leaves no one behind is applied to all aspects of COVID-19 relief and recovery. A range of international mechanisms[21] relevant to migration and anti-discrimination can support this, including for example:

- Durban Declaration and Programme of Action
- Global Compact on Safe, Orderly and Regular Migration
- International Covenant on Civil and Political Rights
- International Covenant on Economic, Social and Cultural Rights
- International Convention on the Elimination of All Forms of Racial Discrimination[22]
- International Convention on the Elimination of Discrimination Against Women
- International Convention and Protocol relating to the Status of Refugees
- International Convention on the Protection of the Rights of All Migrant Workers and Members of their Families
- International Convention on the Rights of Persons with Disabilities
- International Convention on the Rights of the Child and its optional protocols
- International Convention for the Protection of All Persons from Enforced Disappearance
- Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment
- Convention on Domestic Workers of the International Labour Organization (ILO) (189)
- Convention on Eliminating Violence and Harassment in the World of Work of the ILO (190)
- Migration for Employment Convention of the ILO
- Migrant Workers (Supplementary Provisions) Convention of the ILO
- Protocol against the Smuggling of Migrants by Land, Sea and Air
- Protocol to Prevent, Suppress and Punish Trafficking in Persons
- The Yogyakarta Principles[23]
- Universal Declaration of Human Rights.

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19   Disclaimer: Information on uniform resource locators and links to websites contained in the present publication are provided for the convenience of the reader and are correct at the time of issuance. No responsibility is taken for the continued accuracy of that information or for the content of any external website.

20   For information on the role of WHO and related COVID-19 responses, visit the website at https://www.who.int/emergencies/diseases/novel-coronavirus-2019.

21   A useful summary of international mechanisms relevant to health and migration is presented in the annex II of the IOM/UNHCR publication, International Migration, Health and Human Rights, (p.55-60), 2013, available online at https://publications.iom.int/books/international-migration-health-and-human-rights. A short summary of international instruments is also presented in Refugees and Migrants in Times of COVID-19: mapping trends of public health and migration policies and practices, WHO, 2021, available online at https://www.who.int/publications/i/item/9789240028906.

22   General Recommendation 30 of the CERD explains the scope of application of the ICERD to non-citizens: https://tbinternet.ohchr.org/_layouts/15/treatybodyexternal/Download.aspx?symbolno=INT%2fCERD%2fGEC%2f7502&Lang=en.

23   Principles on the application of international human rights law in relation to sexual orientation and gender identity, 2007, available online at https://www.refworld.org/pdfid/48244e602.pdf.

The Global Compact on Safe, Orderly and Regular Migration (GCM) is the first inter-governmentally negotiated agreement, prepared under the auspices of the United Nations, covering all dimensions of international migration in a holistic and comprehensive manner and is consistent with target 10.7 of the 2030 Agenda for Sustainable Development in which Member States committed to cooperate internationally to facilitate safe, orderly and regular migration.

The GCM is intended to address all aspects of international migration, including the humanitarian, developmental, human rights-related and other aspects; make an important contribution to global governance and enhance coordination on international migration; present a framework for comprehensive international cooperation on migrants and human mobility; set out a range of actionable commitments, means of implementation and a framework for follow-up and review among Member States regarding international migration in all its dimensions; be guided by the 2030 Agenda for Sustainable Development and the Addis Ababa Action Agenda; and be informed by the Declaration of the 2013 High-Level Dialogue on International Migration and Development[24].

The GCM sets out a vision and guiding principles. The GCM expresses the collective commitment to improving cooperation on international migration and recognizes that migration undeniably affects countries, communities, migrants and their families in very different and sometimes unpredictable ways. It is crucial that the challenges and opportunities of international migration unite us, rather than divide us. The GCM sets out the common understanding, shared responsibilities and unity of purpose regarding migration, making it work for all. The GCM is based on a set of ten cross-cutting and interdependent principles including human rights and gender responsiveness[25].

The GCM sets objectives to eliminate all forms of discrimination and promote evidence-based public discourse to shape perceptions of migration (objective 17), provide access to basic services for migrants (objective 15) and empower migrants and societies to realise full inclusion and social cohesion (objective 16)[26].

Discrimination in international human rights law is defined as 'any distinction, exclusion, or restriction which has the purpose or the effect of impairing or nullifying the recognition, enjoyment or exercise, on an equal basis with others, of human rights and fundamental freedoms in the political, economic, social, cultural, civil or any other field[27].' The Universal Declaration of Human Rights (UDHR) states in Article 1 that 'All human beings are born free and equal in dignity and rights' and Article 2 sets out the prohibited grounds of discrimination: 'Everyone is entitled to all rights and freedoms set forth in this Declaration, without distinction of any kind, such as race, colour, sex, language, religion, political or other opinion, national or social origin, property, birth or other status […]'. The addition of 'other status' to the list of prohibited grounds is a recognition that grounds can change over time and no list can be exhaustive. The principles of non-discrimination and equality are enshrined in all major human rights treaties adopted since the UDHR[28].

The legal concept of discrimination, including prohibited differential treatment and legitimate distinction, is key to identifying where laws, policies and practices need to be addressed as well as how migrants can claim their rights vis-à-vis duty bearers.

The Durban Declaration and Programme of Action and its follow up documents is the key international policy framework for combatting racism, racial discrimination, xenophobia and relation intolerance and includes specific provisions on migrants[29].

As the world grapples with the COVID-19, other issues continue or are exacerbated, such as a surge in gender-based violence (GBV), with systemic racism by law enforcement also coming to the fore in certain locales over the course of the pandemic.

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24   https://www.iom.int/global-compact-migration

25   United Nations General Assembly (UNGA) Global Compact on Safe, Orderly and Regular Migration (11 January 2019) UN Doc A/RES/73/195. Available online at https://migrationnetwork.un.org/sites/g/files/tmzbdl416/files/docs/gcm-n1845199.pdf.

26   https://www.un.org/en/ga/search/view_doc.asp?symbol=A/RES/73/195.

27   See Article 1 (1) Convention on the Elimination of All Forms of Discrimination against Women (CEDAW), Article 2 Convention on the Rights of Persons with Disabilities (CRPD).

28   Treaties with provisions on non-discrimination and equality include: Art. 2(2), 3 of the International Covenant on Economic, Social and Cultural Rights (ICESCR); Art. 2(1), 3 of the International Covenant on Civil and Political Rights (ICCPR); Art. 1, 2, 3 of the CEDAW; Art. 1, 2 of the International Convention on the Elimination of All Forms of Racial Discrimination (ICERD); Art 2(1)(2) of the Convention on the Rights of the Child; and Art. 1 of the CRPD.

29   https://www.ohchr.org/sites/default/files/Documents/Publications/Durban_text_en.pdf.

For example, Resolution 43/1 was adopted by the Human Rights Council in June 2020, following urgent debate on racially inspired human rights violations, systemic racism, and police brutality. The subsequent, seminal report (28 June 2021) sets out a four-point agenda to end systemic racism and human rights violations against Africans and people of African descent by law enforcement.

An inclusive response to COVID-19 and a consistent approach to systemic racism are factors that need to be embedded likewise in migration policies, moving forward.

The Secretary-General, in his report on the Global Compact for Migration (GCM), notes that the COVID-19 pandemic has, in many ways, reshaped international migration. Noting that many of the challenges predate the pandemic, he states,

> *"Efforts to reform policies, practices and discourse must confront xenophobia and disinformation on migration and migrants and dismantle structural, systemic and institutional forms of discrimination. Myths, misperceptions and discrimination against migrants persist. Narratives that falsely associate migrants with criminal activities or play to anti-immigrant anxieties should never be used to justify policies and practices. During the pandemic, migrants faced hate speech, racial slurs, stigma and violence, as well as discriminatory policies and programmes that impaired their well-being[30]."*

The GCM and International Migration Review Forum (IMRF) provide critical touch points for advancing commitments and action to promote inclusive societies which include migrants in COVID-19 response and recovery, and beyond, as outlined in the report of the Secretary-General.

2.4   Outline of document

Section one presents key messages emerging from the advocacy tool research process. It sets out some useful principles, approaches, and actions that different stakeholders could consider in developing advocacy and policy initiatives, based on the issues and emerging lessons from the COVID-19 pandemic. Section two introduces and sets out the purpose of the publication.

Section three presents an overview of the issues and migrants' lived experiences of discrimination in the context of COVID-19, looking specifically at race, gender, SOGIESC and the intersection of these categories. Section four outlines some examples of promising practices as they correlate with the issues identified in section two, drawing on examples across regions by different states, institutions, civil society organizations and stakeholders.

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30   United Nations General Assembly (UNGA) Global Compact for Safe, Orderly and Regular Migration. Report of the Secretary-General (27 December 2021) UN Doc A/76/642, para 57, available online at https://migrationnetwork.un.org/sites/g/files/tmzbdl416/files/resources_files/sgs_report_english.pdf.

3   ISSUES AND EXPERIENCES

3.1   Introduction

COVID-19 has impacted everyone's lives, but disproportionately so for migrants, and in particular migrants in irregular situations, migrant women, racialized groups and those working in so-called "essential" jobs and in the informal sector. COVID-19 has highlighted, accentuated, and accelerated pre-existing inequalities experienced by migrants around the globe. COVID-19 policies and responses have interacted with other migration, gender and race-related policies, and contributed to the differential impacts on the social determinants of health (e.g. income, employment, education, access to other services). The experience of migrants is impacted by intersecting identities and inequalities, such as those based on race, gender, disability status and SOGIESC. This section provides a snapshot of issues experienced by migrants. It is divided into three sub-sections. Each sub-section illustrates the shared and specific issues affecting different migrant groups, presenting concrete examples in everyday life.

3.2   Race, racism and discrimination

Data (including disaggregated data), information and disinformation

Limited access to data, particularly disaggregated data is a long-standing issue in migration. The lack of sex, gender, race/ethnicity, nationality, age and migration status disaggregated data (with the associated and essential data protection and security measures) hides the extent of the racism, gender issues, inequalities and health issues experienced by migrants. The distinct lack of disaggregated data limits the ability to understand and systematically discern or address the specific issues including through an intersectional lens, and therefore also limits the capacity to respond effectively and appropriately.

In the United States, for example, concern has been expressed that because Arab groups are categorized as 'white', their experience is invisible. They may be experiencing higher levels of COVID-19 than is officially documented[31]. Official data reveals the disproportionate impact of COVID-19 on racialized groups, as data on the risk of COVID-19 infection, hospitalization and death is collected by race/ethnicity[32]. However, specific data is not available for Arab Americans who are counted under the 'white' category.

Issues related to misinformation and disinformation thrive where there is an absence of reliable data. Much false information about migrants and racialized groups has been promulgated, particularly on social media, but also in various mainstream media outlets, and indeed from politicians in various countries over the course of the pandemic.

Health

The stark reality is that racialized and ethnic minority groups, including migrants, are more likely to have contracted and died from COVID-19[33]. The risk of contracting COVID-19 is linked to exposure to the virus in employment, poverty, long-term lack of adequate healthcare and living conditions. In a racially stratified and gendered labour market, migrants and particularly migrant women are more likely to be engaged in "essential" and low paid work.

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31   USA Today reports concerns from a number of organizations, including the National Arab American Medical Association's San Diego chapter, in its February 2021 article, "Arab Americans, deemed 'white' in government records, suffer an unseen COVID-19 crisis", available online at https://www.usatoday.com/story/news/nation/2021/02/28/covid-19-cases-arab-americans-hit-hard-but-not-counted-data/4498387001/.

32   See Center for Disease Control and Prevention (CDC) data, available online at https://www.cdc.gov/coronavirus/2019-ncov/covid-data/investigations-discovery/hospitalization-death-by-race-ethnicity.html.

33   UN Human Rights. Racial discrimination in the context of the COVID-19 crisis. Available online at https://www.ohchr.org/sites/default/files/Documents/Issues/Racism/COVID-19_and_Racial_Discrimination.pdf.

Many healthcare workers are migrants, with a majority being women. In many places, migrants are critical to the running of healthcare services. Migrant health and care workers are "essential workers" on the frontline and facing the greatest risks[34]. However, despite the recognition of healthcare as a human right, and migrants' role in providing it, often migrants themselves are not able to access healthcare on an equal footing to citizens. In many countries, access to public healthcare is dependent on citizenship and regular migration status. Such a policy is particularly problematic during a pandemic.

Access to COVID-19 vaccinations, even where available, is not guaranteed for migrants[35]. There are particular concerns for undocumented migrants who, even where they are entitled to a vaccine, may remain concerned that their immigration status would come to the attention of authorities, impacting on their ability to remain in the country.

At the same time, global availability of vaccinations is another area of critical concern. The largest share of migration is within the global South[36]. While some in the global North were receiving fourth and fifth shots in March 2022, only about 13% of the population in low-income countries had been vaccinated with first doses[37]. There have been calls for a WTO TRIPS Waiver that would allow global South countries to produce and distribute affordable vaccines. It is argued that this would have an impact on entire populations, including migrants[38]. Without such access, low-income countries are paying many times more than some developed countries for vaccines, generating greater debt and forcing budgetary trade-offs that disproportionately impact women, migrants and racialized communities.

Racist violence, xenophobia and hate speech

The rise in racism, xenophobia, and hate speech during the pandemic has been acknowledged widely, from the international to the local level. Migrant women particularly have been scapegoated for spreading COVID-19 and have often experienced violence, including GBV, as a result[39]. While there can be an absence of reliable data, misinformation and disinformation have been circulated and promulgated, and this has fed into stigmatization and hate speech. Migrants and returning migrants for example, have been misperceived and misrepresented. Certain groups have been and continue to be especially targeted, including migrants of Asian origin. There are also reports of a rise in racism including hate crimes and hate speech against Asian-American and Pacific Islander (AAPI) communities[40]. Politicians are among those who have falsely linked immigration to the spread of COVID-19, including in Hungary, Denmark and Slovakia for example[41].

Racial injustice by law enforcement has continued during the pandemic. COVID-19 restrictions however, placed clear limitations on the public's ability to protest. Founded in 2013 in response to acts of violence inflicted on Black communities, in 2020 the Black Lives Matter movement once again raised awareness of the issue, and protests were organized in numerous countries following the killing of George Floyd in the US. However, the pandemic, risk of infection and associated restrictions, made public protest more difficult for individuals, communities, and organizations. Where states did permit protest, the public and media

34   Pillinger J, Gencianos G and Yeates N 'What we know about their situation', Migrant health and social care workers during the covid-19 pandemic Factsheet 1, Public Services International-The Open University: Ferney Voltaire/Milton Keynes, 2021. Available online at https://www.open.ac.uk/people/sites/www.open.ac.uk.people/files/files/8th%20Dec%20BC%20Fact%20Sheet%2001%20.pdf.

35   See for example IOM Report Migrant Inclusion in Vaccination Campaigns (updated December 2021), available online at https://www.iom.int/sites/g/files/tmzbdl486/files/documents/iom-vaccine-inclusion-mapping_global_december-2021_external.pdf. Further resources on the subject: https://www.iom.int/ensuring-migrants-equitable-access-covid-19-vaccines.

36   37% within the global south as opposed to 35% from south to north, The New Humanitarian, 8 July 2021. Available online at https://www.thenewhumanitarian.org/interview/2021/7/8/why-south-south-migration-has-long-been-overlooked#:~:text=More%20people%20migrate%20within%20the,hosted%20in%20the%20Global%20South.

37   Feminists for a People's Vaccine, Eyes on the Vaccine Gap, March 7, 2022, citing data from www.ourworldindata.org

38   https://peoplesvaccine.org/.

39   See for example, UN-Women COVID-19 and violence against women: The evidence behind the talk: Insights from big data analysis in Asian countries 2020. Available online at https://data.unwomen.org/publications/covid-19-and-violence-against-women-evidence-behind-talk. See also UN Human Rights, Racial discrimination in the context of the COVID-19 crisis. Available online at https://www.ohchr.org/sites/default/files/Documents/Issues/Racism/COVID-19_and_Racial_Discrimination.pdf.

40   https://peoplesvaccine.org/.

41   See for example, UN-Women COVID-19 and violence against women: The evidence behind the talk: Insights from big data analysis in Asian countries 2020. Available online at https://data.unwomen.org/publications/covid-19-and-violence-against-women-evidence-behind-talk. See also UN Human Rights, Racial discrimination in the context of the COVID-19 crisis. Available online at https://www.ohchr.org/sites/default/files/Documents/Issues/Racism/COVID-19_and_Racial_Discrimination.pdf.

response was not always supportive[42]. There have been reports of disproportionate targeting of minority communities, including migrant communities, during curfews and lockdowns[43]. Furthermore, migrants were not always able to participate in protests for fear of arrest and deportation.

Migration policy and governance

The combination of a global economic downturn alongside increased migration restrictions creates a tension for potential migrants between their interest in migration and accessible options for safe and regular migration[44]. Though the need for mobility continues during a pandemic, options for safe and regular migration are fewer; restrictions associated with COVID-19 and their interaction with migration policies such as border closures or closure of non-essential services which may employ more migrant workers, impeded this. The implementation of policies or associated practices had some serious consequence. For example, in some contexts, migrants who were detained and contracted COVID-19 were deported.

Black migrants have been and continue to be particularly impacted by racism in migration governance. Examples are reported where border closures and/or travel restrictions are affecting predominantly Black majority African countries, and where removals without process (i.e. illegal expulsions) are affecting mostly Black migrants[45]. In the US context for example, immigration has been described as a Black issue and it is argued that migrants from African and Caribbean nations receive tougher treatment in the immigration system[46].

Border closures severely impact migrants. Some State actors have perpetuated grave violence against migrants; for example, incidents at borders have been severe. Reports were also made of African migrants being shot at from both sides of a border in the Middle East[47]. In the US, a public health measure, "Title 42", enabled the State to refuse the right to claim asylum and subsequently people from Mexico, Central America and Caribbean nations could not do so and were summarily returned. Title 42 has specifically affected Black migrants, and predominantly Black countries[48]. In many states the principle of non-refoulement has been violated, although it cannot be derogated including in times of crisis, as highlighted in a report of the Special Rapporteur on the human rights of migrants, Felipe González Morales[49]. Title 42 has also significantly affected migrants at the Southern border, many Hispanic.

With residency rights often tied to employment, the economic shutdown left migrant workers in a precarious position. For many, returning to their country of origin was not an option. For those who might otherwise consider returning home, border closures meant this was not an option. Migrants who did return experienced issues of stigmatization and discrimination in the country of origin, often misperceived or blamed for the spread of COVID-19 for example.

43   Amnesty International "Europe: COVID-19 lockdowns reveal racial bias and discrimination in police", 24 June 2020, available online at https://www.amnesty.org/en/latest/news/2020/06/europe-covid19-lockdowns-expose-racial-bias-and-discrimination-within-police/.

44   United Nations Office on Drugs and Crime (UNODC) Research Brief How COVID-19 Restrictions and the Economic Consequences are Likely to Impact Migrant Smuggling and Cross-border Trafficking in Persons to Europe and North America, 2020, p.7, available online at https://www.unodc.org/documents/data-and-analysis/covid/Covid-related-impact-on-SoM-TiP-web3.pdf.

45   Quaker United Nations Office (QUNO). "Migration Justice: Delivering on the promise of the Global Compact for Migration", 2022, available online at https://quno.org/sites/default/files/resources/Migration%20Justice%20Paper%206%20%28Final%29.pdf.https://quno.org/sites/default/files/resources/Migration%20Justice%20paper_5_FINAL.pdf.

46   León-Gómez Sonet, Marisa "Black Lives Matter. Black immigrants lives matter. Black asylum seekers lives matter. Immigration is a Black Issue", Friends Committee on Legislation 4 December 2020. Available online at https://www.fcnl.org/updates/2020-12/black-lives-matter-black-immigrants-lives-matter-black-asylum-seekers-lives-matter. The article provides statistical evidence demonstrating for example that while just seven percent of non-citizens in the U.S. are Black, they make up 20 percent of those facing deportation on criminal grounds. In US Immigration and Customs Enforcement jails and private prisons, Black immigrants are subjected to solitary confinement at higher rates than non-Black immigrants. The longest incarcerations on record are for Black immigrants.

47   This incident in was reported by Human Rights Watch and highlighted by Taran and Kadysheva (2022). Human Rights Watch, "Greece: Island camps not prepared for COVID", available online at https://www.hrw.org/news/2020/04/22/greece-island-camps-not-prepared-covid-19#. For further details on related issues, see Taran, Patrick & Kadysheva, Olga COVID-19, Migrants, Refugees, Mobile Workers: Global Assessment and Action Agenda. 2022. Revista Tecnológica - ESPOL. 34. 28-57. 10.37815/rte.v34n1.889. Available online at https://www.researchgate.net/publication/359262272_COVID-19_Migrants_Refugees_Mobile_Workers_Global_Assessment_and_Action_Agenda.

48   For more on this issue, see for example https://www.humanrightsfirst.org/sites/default/files/FailuretoProtect.4.20.21.pdf and https://thehub.news/undocublack-the-cruelty-behind-title-42-and-its-impact-on-black-migrants/.

49   "Report on means to address the human rights impact of pushbacks of migrants on land and at sea", Report of the Special Rapporteur on the human rights of migrants, Felipe González Morales at https://reliefweb.int/sites/reliefweb.int/files/resources/A_HRC_47_30_E.pdf

Migrants in an irregular situation are extremely vulnerable. The level of inequality and insecurity experienced by undocumented migrants is such that issues could be foreseen even as COVID-19 responses began to emerge. These ranged from access to emergency support and healthcare, including sexual and reproductive and maternal healthcare, risk of homelessness, data protection, and risk of deportation[50]. Indeed restrictions, including border restrictions, threatened to force those whose visas were not extended into becoming undocumented.

Income, employment and social protection

COVID-19 has meant that migrants working in person during the pandemic could face additional health risks. Migrants are more likely to be engaged in so-called "essential" work (i.e. cleaners, emergency services, health and social care, transit and shop workers, teachers etc.), increasing their risk of exposure to COVID-19. Poor working conditions have been exacerbated during COVID-19, further increasing the risk of infection,and migrants have not always been provided with personal protective equipment (PPE).

The risk of abuse, including gender-based violence (GBV), labour exploitation, unemployment, and loss of livelihood has also increased for migrant workers. Migrants were more likely to lose their jobs than the workforce generally. In Sweden for example, 60% of initial job losses at the start of the pandemic were experienced by migrants. Millions of migrant workers were immediately and arbitrarily dismissed in the Middle East region and elsewhere[51]. Malaysia's Ministry of Human Resources issued advice that foreign workers should be retrenched first if necessary[52]. Women migrants experienced specific impacts also[53], some of which are outlined in section 3.3 below.

Agricultural workers are one group highlighted, as well as workers in meat processing factories, with people working in close proximity to one another. As early as April 2020, the Food and Agriculture Association of the United Nations (FAO) cautioned on the risks facing migrants engaged in agricultural work, including greater exposure to occupational safety and health hazards, as well as greater risk of contracting COVID-19. The FAO noted that many of these workers continue to work in indispensable services linked to the food sector. However, many work under informal or irregular arrangements, facing poor housing and working conditions and with no access to healthcare or social protection[54].

Cramped and close working conditions increase the risk of COVID-19 spreading. Conditions for those working in the meat industry have been highlighted in Germany for example where a COVID-19 outbreak spread to 1,500 employees and led to a local lockdown[55]. In May 2021, Si Mum Muang market in Thailand reported more than 900 COVID-19 cases; 70% of those infected were migrants, according to the Pathum Thani Health office[56].

Women migrant domestic workers also face heightened challenges during the pandemic, not only as it relates to health risks but also discrimination, violence including gender-based violence, labour exploitation and issues with migration status (see section 3.3).

Undocumented migrants became more visible and their work increasingly precarious. Seasonal workers were particularly affected by initial and subsequent changes to restrictions. In some instances, migrant workers were simply dismissed. In other contexts, states allowed employers to change contract terms, including in the Middle East.

Wage theft[57] issues for migrant workers have been reported extensively. Wage theft has proven to be such a significant issue that it has been taken up by many global stakeholders and partners including trade

50   PICUM "COVID-19 Statement", March 2020, available online at https://picum.org/wp-content/uploads/2020/03/COVID-19-Statement-March-2020.pdf.

51   Taran, Patrick & Kadysheva, Olga COVID-19, Migrants, Refugees, Mobile Workers: Global Assessment and Action Agenda. 2022. Revista Tecnológica - ESPOL. 34. 28-57. 10.37815/rte.v34n1.889, p.7. Available online at https://www.researchgate.net/publication/359262272_COVID-19_Migrants_Refugees_Mobile_Workers_Global_Assessment_and_Action_Agenda.

52   https://mohr.gov.my/images/FAQ_ON_MCO_MOHR_VOL3.pdf

53   See for example, UN Women Guidance Note: Addressing the Impact of the COVID-19 Pandemic on Women Migrant Workers, April 2020. Available online at https://www.unwomen.org/en/digital-library/publications/2020/04/guidance-note-addressing-the-impacts-of-the-covid-19-pandemic-on-women-migrant-workers.

54   Food and Agriculture Association of the United Nations (FAO) Migrant Workers and the COVID-19 Pandemic, 7 April 2020. Available online at https://www.fao.org/3/ca8559en/CA8559EN.pdf.

55   Organization for Economic Co-operation and Development (OECD) What is the Impact of the COVID-19 Pandemic on Immigrants and Their Children, October 2020. Available online at https://www.oecd.org/coronavirus/policy-responses/what-is-the-impact-of-the-covid-19-pandemic-on-immigrants-and-their-children-e7cbb7de/.

56   https://www.who.int/thailand/news/detail/09-01-2022-migrants-struggle-to-earn-a-living-during-lockdown

57   Migrant Forum in Asia Crying Out for Justice: Wage Theft Against Migrant Workers During COVID-19, 2021. Available online at http://mfasia.org/migrantforumasia/wp-content/uploads/2021/04/MFA_Crying-Out-for-Justice_04.12.pdf. See also https://www.solidaritycenter.org/justice-for-wage-theft-campaign-champions-migrant-workers/.

unions. The Migrant Forum in Asia (MFA) Wage Theft Campaign for example, may be one of the largest global migrant campaigns related to COVID-19.

Through the cases registered with MFA, they observe that wage theft during the pandemic includes a wide scope of challenges to access to justice and remedy that migrant workers face in obtaining compensation and unpaid wages. These challenges comprise but go well beyond established interpretations of wage theft as including for example partial or non-payment of a worker's remuneration, payment of salaries below the minimum wage, non-payment of overtime, non-payment of contractually owed benefits, the non-negotiated reduction of salaries and retention of dues upon contract termination[58].

Migrants, both documented and undocumented, were not included in social protection and income protection measures in some areas. With a loss of livelihood or reduction in income, remittances were at risk for families. The scale of impact on remittances would differ for people depending on their vulnerability and area of work. Remittances can alleviate household poverty and are often a key support for children's development. Consequently, when remittances fall away, this can present risks to children's physical health, mental health and education, as well as potential increases in child marriage and child labour[59].

Housing

Migrants living in poor and cramped conditions are more exposed to COVID-19. Furthermore, "stay at home" requirements impact more severely on these groups. These issues are more keenly felt by migrants and particular groups, including migrants of colour and migrant women than the general population

Living with their employer can heighten vulnerabilities experienced by migrant domestic workers. Women migrant domestic workers[60] have experienced specific issues, with travel restrictions forcing many who already did not do so to live with their employers, and reducing opportunities for those who already lived with their employers to leave,which in turn, heightens their vulnerabilities. Violations of the human rights of women migrant workers in domestic and care work including sexual and gender-based violence are further exacerbated during the pandemic[61]. They were also at risk of labour exploitation including the deprivation of liberties such as regular breaks and days off[62]. (See section 3.3 for further details on domestic work and care work.)

In institutionalized settings, such as in camps or in detention, migrants have had limited control over their personal COVID-19 prevention strategies (e.g., social distance, hygiene). Some migrant workers have been confined to living in dormitories, for example in the Middle East and Asia. Some migrants have also been forced to live in squalor, in desert camps for example.

Disparity in home ownership rates means migrants are more dependent on the rental market. With the loss of income experienced by migrants, covering rental payments is challenging. There have been also cases of evictions based on racial discrimination and xenophobia, or based on the exposed nature of a migrant's work. Migrants in an irregular situation can pay exorbitant amounts and often live in overcrowded conditions.

Migrants are less likely than national citizens to own their own home and therefore, less likely to be protected by measures such as mortgage payment breaks. In 2019 in the EU for example, 70.7 % of national citizens were homeowners. Home ownership rates were lower among foreign citizens, particularly non-EU citizens. Only 23.8% of non-EU Member State citizens and 35.6% of citizens from other EU Member States owned their own home[63].

58   Migrant Forum in Asia, 2021.

59   https://www.unicef.org/media/87986/file/A%20lifeline%20report.pdf.

60   For more on this question, see materials from the International Labour Organization (ILO) 2021 report launch on the occasion of the 10th anniversary of Convention 189, available online at https://www.ilo.org/asia/projects/WCMS_799648/lang--en/index.htm#:~:text=16%20June%202021%20is%20the,189). The Report Making Decent Work a Reality for Domestic Workers, ILO 2021, is available online at https://www.ilo.org/global/publications/books/WCMS_802551/lang--en/index.htm.

61   UN Women Guidance Note: Addressing the Impacts of the COVID-19 Pandemic on Women Migrant Workers, April 2020, p.3.

62   Foley, L. and N. Piper. COVID-19 and women migrant workers: Impacts and implications, International Organization for Migration (IOM). Geneva. 2020. Available online at https://publications.iom.int/system/files/pdf/covid19-and-women.pdf.

63   https://ec.europa.eu/eurostat/statistics-explained/index.php?title=Migrant_integration_statistics_-_housing#Home_ownership.

Education

School closures had an immediate impact for migrant families and may impact on children's education attainment into the longer term. In some places, with the demands on families so great, children have had to leave school early. Girls were particularly hard hit because of traditional gender norms, including greater responsibility for domestic and care work which impacts on their time to study or the possibility of them remaining in school.

Several factors can impact on migrant parents, but particularly mothers, and their capacity to support children in home-schooling, including for example knowledge of a country's education system, language, ability to work from home and technology.

Multiple burdens are being felt by women, especially migrant women, and those in precarious employment, who have to juggle not only in person working but also managing the care and education of school-age children.

Migrants, and particularly migrant women, are more likely to be engaged in "essential" work or under-employed and consequently, less likely to be holding positions where they could work remotely. Migrants are concentrated in "essential" occupations that cannot be undertaken from home and they are less likely to be able to work remotely. OECD calculations show that in three-quarters of OECD countries, the share of migrants able to work remotely (telework) is at least five percentage points less than their native counterparts[64]. This is a problem particularly for children's education and care when they are out of school due to COVID-19 related closures.

Digitalization and the digital divide

Where poverty, educational inequality and language issues are experienced by migrants, so too is the digital divide apparent and growing. With many services moving online, the digital divide exacerbates already existing issues with accessing services.

The digital divide between citizens and migrants is well documented. The response to the economic impacts of COVID-19 transformed the scale of and overall usage of technology. Technology and the internet were used to communicate with populations generally, including migrants. The increased use of, and dependency on, technology presents risks for migrant women who are more likely to be impacted by the digital divide.

Moreover, the impact of the digital divide on migrant children's education may be felt for years to come. Where learning has switched to online delivery, access to online resources and reliable electricity is out of reach for many, especially those living in remote locations, camps or informal settings. In sub-Saharan Africa for example, it is reported that 89 per cent of learners do not have household computers and 82 per cent lack internet access[65].

The gig-economy presents challenges regarding low paid work[66]; given the growth of the sector during the pandemic, the risks for migrant workers warrant consideration and protection.

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64   OECD What is the Impact of the COVID-19 Pandemic on Immigrants and Their Children? October 2020. Available online at https://www.oecd.org/coronavirus/policy-responses/what-is-the-impact-of-the-covid-19-pandemic-on-immigrants-and-their-children-e7cbb7de/. The calculations are based on data from Basso, G. et al "The new hazardous jobs and worker reallocation", OECD Social Employment and Migration Working Papers, No. 247, OECD Publishing, Paris. 2020. Available online at https://dx.doi.org/10.1787/400cf397-en

65   https://data.unicef.org/resources/migrant-and-displaced-children-in-the-age-of-covid-19/.

66   See for example issues raised by the Solidarity Center, https://www.solidaritycenter.org/colombia-gig-economy-workers-wage-country-wide-protest-for-rights/.

USEFUL RESOURCES

• Hennebry, J. and H. KC Quarantined! Xenophobia and migrant workers during the COVID-19 pandemic, International Organization for Migration (IOM). Geneva, 2020. Available online at https://publications.iom.int/system/files/pdf/quarantined.pdf.

• OHCHR, Durban Declaration and Programme of Action, website: https://www.un.org/en/fight-racism/background/durban-declaration-and-programme-of-action.

• OHCHR Racial Discrimination in the Context of the COVID-19 Crisis, 22 June 2020. Available online at https://www.ohchr.org/Documents/Issues/Racism/COVID-19_and_Racial_Discrimination.pdf.

• OHCHR - Submissions to and Note by Secretary-General (30 July 2021) on the Human Rights of Migrants. Note available online at https://undocs.org/A/76/257 and submissions available online at https://undocs.org/A/76/257.

• UN Network on Migration, Statement "Enhancing Access to Services for Migrants in the Context of COVID-19 Preparedness, Prevention, and Response and Beyond", 11 June 2021. Available online at https://migrationnetwork.un.org/statements/enhancing-access-services-migrants-context-covid-19-preparedness-prevention-and-response.

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• World Health Organization (WHO)/United Nations Educational, Scientific and Cultural Organization (UNESCO) Outcome Report: Frontier Dialogue Consultations on Addressing Structural, Racial and Ethnicity-Based Discrimination, November 2021. Available online at https://www.who.int/publications/m/item/frontier-dialogue-consultations-on-addressing-structural-racial-and-ethnicity-based-discrimination.

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3.3 Gender, migration and discrimination

In addition to the COVID-19 related issues facing migrants broadly, many migrants also face gender-specific issues, because of the gendered nature of decision-making, policies, practices and social norms.

Gender is a social construct deeply embedded in society and consequently, a determining factor for decision-making on all areas of inclusion and participation. A broad understanding of gender allows for the systematic assessment of discrimination on grounds of sexual orientation or gender identity, evidenced by United Nations Treaty Bodies interpretations, including for example, the Committee on Economic, Social and Cultural Rights (CESCR). For many, gendered identities contribute to experiences of discrimination, marginalization, and violence. That is often the case for women and persons whose gender identity and/or gender expression do not align with the preconceptions attached to the sex assigned them at birth[67].

The following sections are underpinned by a consideration of the gendered impact on migrants of COVID-19 and related policies and practices. Section 3.3 draws largely from research that focuses on women's human rights and examples of policies that target or disproportionately impact women, while section 3.4 focuses more specifically on discrimination on the grounds of SOGIESC.

Health

COVID-19 – The fact that migrant women are more likely to engage in informal and low paid work, particularly in care work and service sectors, increases their exposure to and risk of contracting COVID-19. Migrant women in domestic work, for example, are among such groups at greater risk of being exposed to COVID-19. As highlighted earlier, access to COVID-19 vaccinations may be restricted for migrant women, based on immigration status and lack of information about migrant rights on the part of service providers. Migrant women's migration status and working conditions can be additionally precarious, due to the under-regulation of some of the settings in which they work (e.g. private homes, agriculture etc.), their disproportionate caring responsibilities and dependency on a family member's immigration status.

Sexual and reproductive health and access to sexual and reproductive healthcare has been an issue of widespread concern during the pandemic. Migrant women experience additional access issues due to immigration status concerns, fearing for example being reported, detention, deportation and other harassment. COVID-19 has worsened already precarious access to sexual and reproductive healthcare, including pre and neonatal care, family planning and abortions in several countries[68]. For example, in Latin America and the Caribbean, it is estimated that 18 million women will lose regular access to contraceptives over the pandemic[69]. In some places, access to abortion has been declined including by deeming them as non-essential health services[70]. Inequalities in access to contraception mirror socio-economic inequalities within the population. Barriers in the access to contraceptives, including emergency contraception, exist especially for marginalized groups such as migrants[71]. The sexual and reproductive health of migrant women is impacted by a lack of health insurance and healthcare access issues, compounded by the fact that already weak health systems are stretched by COVID-19. For example, data from the United States shows that an estimated 20% of all migrants are uninsured, compared to 8.5% of the population overall[72].

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67   See the two reports on gender from the United Nations Independent Expert on Protection Against Violence and Discrimination Based on Sexual Orientation and Gender Identity, including the report on the Law of Inclusion and the report on Practices of Exclusion, presented in 2021 at the 47th UN Human Rights Council and 76th UN General Assembly, a summary of which is available online at https://www.ohchr.org/sites/default/files/Documents/Issues/SexualOrientation/IESOGI/Reports_on_Gender_Final_Summary.pdf.

68   For further information and analysis, see for example, Dasgupta, J., Schaaf, M., Contractor, S., Banda, A., Viana, M., Kashyntseva, O. and Ruano, A. Axes of alienation: Applying an intersectional lens on the social contract during the pandemic response to protect sexual and reproductive health and rights and health, International Journal for Equity in Health 19 (130), 2020 Available online at https://equityhealthj.biomedcentral.com/articles/10.1186/s12939-020-01245-w.

69   Hinz, K. and Zubek, I. (2020). "Why the Covid-19 pandemic needs an intersectional feminist approach. Rosa Luxemburg Stiftung Blog", 2020. Available online at https://www.rosalux.de/en/news/id/42062/why-the-covid-19-pandemic-needs-an-intersectionalfeminist-approach?cHash=82963ceb141a9a3480bfe2684d6e797b.

70   See for example the case in the US as outlined by the American College of Physicians, "States restricting access to abortion by wrongly deeming it as non-essential". Available online at https://www.acponline.org/advocacy/state-health-policy/covid-19-action-toolkit/states-restricting-access-to-abortion-by-wrongly-deeming-it-as-non-essential-during-covid-19?msclkid=2fb4b378b4db11ec98c146e285b1cfe5.

71   Council of Europe Empowering Women: Promoting Access to Contraception, provisional draft report, December 2019. Available online at http://www.assembly.coe.int/LifeRay/EGA/Pdf/TextesProvisoires/2019/201912046-autonomiser-femmes-contraception-EN.pdf.

72   UN Women Guidance Note: Addressing the Impacts of the COVID-19 Pandemic on Women Migrant Workers, 2020.

The extent of mental health issues for many migrants, and particularly migrant women, has increased over the course of the pandemic. Civil society organizations have expressed their concern for the mental health consequences of COVID-19 on migrants, including migrant women who have experienced GBV, and this has become an area of some research. One study for example, looks at the role of discrimination experienced and daily stressors on the mental health of migrants[73].

Gender based Violence (GBV): The Shadow Pandemic

Gender Based Violence, including the rise in domestic violence linked to lockdowns, has been described as the "Shadow Pandemic"[74]. While people of all backgrounds are at risk of an increase in GBV during the pandemic, the impact of this has specific implications for migrant women and non-binary migrants.

Migration status issues cause migrant women's dependency and increase situations of vulnerability, as well as increasing their exposure to violence. Migrant women's migration status may be linked to that of a family member. In many countries this will be a male spouse or relative, or an employer, which can limit women's options to report violence or seek services if they fear retribution or deportation.

Economic independence is a critical factor in ensuring people experiencing domestic violence can leave abusive situations. The fact that migrant women may be dependent on a family member's income or immigration status, be lower paid, or have greater caring responsibilities, places clear barriers to economic independence and therefore, to their ability to remove themselves from the domestic and intimate partner violence both in the short and longer term.

In relation to **Female Genital Mutilation (FGM)**, migrant women's organizations have expressed concern that FGM has continued during the pandemic and those gains made in previous years, including in education about FGM, may have been lost during the pandemic[75].

COVID-19 has further increased the risk of **exploitation and trafficking**. Unemployment, lack of social protection and migrants being stranded in countries where they do not have access to healthcare and social protection are among the circumstances contributing to vulnerability. A research brief prepared by the United Nations Office on Drugs and Crime (UNODC) demonstrates that the combination of a global economic downturn alongside intensified migration restrictions could increase the demand for smuggling services and risk of being trafficked. Incidents of exploitation and trafficking affecting migrants and refugees stranded en route could increase because of the COVID-19 pandemic. They highlight the potential for the human rights impacts of COVID-19 restrictions on smuggling and cross-border trafficking in persons to be severe. To address this, COVID-19 recovery plans will need to provide avenues for regular migration journeys and regular immigration in destination countries[76].

Migrant women may also face additional barriers when trying to **access services** and support. This includes GBV related services and supports. Limited enjoyment of rights, racism, xenophobia, gender discrimination and lack of linguistic and culturally appropriate services may impact on a migrant woman's access to services. The lack of information about and limited access to, gender-responsive services, especially essential services, may perpetuate the cycle of violence and further limit migrant women's options to report violence and seek justice.

Accommodation is a significant issue for migrant women experiencing GBV, including domestic violence. Many have nowhere to go. While GBV increased during COVID-19, the services or resources to support victims of GBV did not. In a study conducted on GBV services in the USA, for example, over half of respondents

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73   Spiritus-Beerden, E. et al Mental Health of Refugees and Migrants during the COVID-19 Pandemic: The Role of Experienced Discrimination and Daily Stressors, Int J Environ Res Public Health. 2021 Jun 11;18(12). Available online at https://pubmed.ncbi.nlm.nih.gov/34208243/.

74   See for example a statement by UN Women on "Violence against women and girls: the Shadow Pandemic", released on 6 April 2020 and available online at https://www.unwomen.org/en/news/stories/2020/4/statement-ed-phumzile-violence-against-women-during-pandemic.

75   See for example, input from Akidwa, an African and migrant women's network in Ireland, broadcast by the national television station, Raidio Teilifís Éireann (RTE), and online article "Call for action plan for those affected by Female Genital mutilation", available at https://www.rte.ie/news/2022/0207/1278394-female-genital-mutilation/ More broadly, the UN has also raised concern about the increased risk of FGM globally during the pandemic, "From the Field: COVID-19 increasing risk of female genital mutilation", 2021, available online at https://news.un.org/en/story/2021/02/1083952.

76   See for example, UNODC Research Brief: How COVID-19 restrictions and the economic consequences are likely to impact migrant smuggling and cross-border trafficking in persons to Europe and North America, 2020, p. 7-8, available online at https://www.unodc.org/documents/data-and-analysis/covid/Covid-related-impact-on-SoM-TiP-web3.pdf.

reported that their services had stopped for a time during the pandemic, and a quarter reported limited capacity to provide services remotely. The study also shows that the increase in GBV and changing nature of service provision during the pandemic interacted with existing policies and funding opportunities that limit GBV service use for historically oppressed groups and that GBV service utilization remained particularly unequal for these groups, including for migrants[77].

Income, employment and social protection

Migrant women are more likely to work in services and sales. For migrant women working in the informal sector or in unregulated jobs, they have little to no labour protections and face an increased risk to labour exploitation. Such precarity increases migrant women's risk to sexual and gender-based violence in the workplace.

Women migrant workers in sectors requiring physical contact with other people often have limited access to personal protective equipment and hand-washing facilities[78].

While the majority of healthcare leadership positions are still held by men, it is women, including migrant women, who are more likely to be working on the front line. Women make up two thirds of frontline healthcare workers. Female healthcare workers earn on average 28% less than their male counterparts[79]. Public Services International points out that the distribution of healthcare workers is unequal globally[80] High income countries have nearly twelve times as many people employed in the health sector as low-income countries. More than half of the world's population lack access to healthcare. Yet, in the midst of the pandemic, the "brain drain" of health workers, particularly women migrant health workers, increased[81]. According to a 2022 New York Times article, "huge pay incentives and immigration fast-tracks are leading many to leave countries whose health systems urgently need their expertise". The impact of this on public health systems in the global south affects both citizens and migrants' access to pandemic and general healthcare in low-income countries[82].

Migrant workers are often excluded from COVID-19 relief measures as many are working in the informal economy or are not eligible for any form of social protection due to their migration status. Migrant women who work as street vendors and rely on the informal economy, for instance, saw their income disappear overnight in parts of Africa. In parts of Asia, care work has been absent from COVID-19 measures[83].

Domestic Work

Women migrant domestic workers also face heightened challenges during the pandemic[84], not only as it related to health risks but also discrimination, violence, labour exploitation and issues with migration status. Domestic workers were among the groups clearly and immediately affected, with high levels of domestic workers dismissed from their employment.

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77   Sapire R, Ostrowski J, Maier M, Samari G, Bencomo C, McGovern T. COVID-19 and gender-based violence service provision in the United States", 2022. Available online at https://doi.org/10.1371/journal.pone.0263970.

78   UN Women Guidance Note: Addressing the Impacts of COVID-19 on Women Migrant Workers, 2020,p. 3.

79   Boniol, Mathieu et al. Gender equity in the health workforce: Analysis of 104 countries, Health Workforce Working Paper #1, WHO, March 2019. Available online at https://apps.who.int/iris/bitstream/handle/10665/311314/WHO-HIS-HWF-Gender-WP1-2019.1-eng.pdf?sequence=1&isAllowed=y.

80   Public Services International Fact Sheet #1, Migrant Health and Social Care Workers During the COVID-19 Pandemic, 2021. Available online at https://pop-umbrella.s3.amazonaws.com/uploads/4fee9d86-59de-4b47-937b-3af9e72657b2_BC_Fact_Sheet_01_Vs_03.pdf.

81   https://www.nytimes.com/2022/01/24/health/covid-health-worker-immigration.html.

82   Article by Stephanie Nolen for the New York Times, 24 January 2022. Available online at https://www.nytimes.com/2022/01/24/health/covid-health-worker-immigration.html.

83   Women In Migration Network No Border to Equality: Global Mapping of Organizations Working on Gender and Migration, 2021. Available online at https://womeninmigration.org/2021/03/no-borders-to-equality-global-mapping/.

84   For more on this question, see materials from the ILO 2021 report launch on the occasion of the 10th anniversary of Convention 189, available online at https://www.ilo.org/asia/projects/WCMS_799648/lang--en/index.htm#:~:text=16%20June%202021%20is%20the,189). The Report Making Decent Work a Reality for Domestic Workers is available online at https://www.ilo.org/global/publications/books/WCMS_802551/lang--en/index.htm. Chapter 11 focuses specifically on the impacts of and the responses to the COVID-19 pandemic.

Others saw a reduction in their working hours. Both groups have experienced a dramatic reduction in the total amount of wages received[85] . The decrease in the amount of wages received by domestic workers has been between 1.5 and five times higher than the decrease for other employees[86].

For many migrant domestic workers, losing their job also means losing their home. It is reported that domestic workers with irregular legal status who were unable to leave the country due to travel restrictions became homeless in the USA, for example. There are reports of domestic workers being fired when they contract COVID-19. In Hong Kong for example, dozens of domestic workers became homeless when fired after contracting COVID-19 [87].

Domestic workers have been misperceived, unfairly scapegoated for the spread of COVID-19 and simply dismissed from their employment. Migrant women who lost their jobs in domestic work and hospitality in places in the Middle East for example, did so without receiving any or only limited entitlements[88]. Others live in fear of being dismissed, have to accept increased work demands and working hours without increased pay, and are particularly vulnerable as often their status was tied to their employment.

Where there was a direct policy or "crackdown" on undocumented workers, in Malaysia for example, this resulted in detention and deportation. Undocumented domestic workers immediately lost their jobs and were not free to move around for fear of government raids[89].

Care Work

The already disproportionate responsibility for and burden on women, including migrant women, from unpaid care work was further exacerbated by the pandemic. COVID-19 has increased the burden of unpaid care work on most women, including migrant women, as a result of closure of schools, early years care and education facilities and other public and social services.

Increased inequalities intersect with the socio-economic crisis. Overrepresented in the informal sector, migrant women are disproportionately affected by unemployment and rates of employment reengagement are lower due to increased care responsibilities and discrimination .

Migrant women's overrepresentation in the informal sector with low skilled, low paid and precarious jobs has meant that they are most affected by unemployment and have lower rates in employment reengagement due to enhanced care responsibilities and increased discrimination[90].

Women migrant workers without access to child or family benefits are obliged to leave their children at home, at times without supervision, to go to work. The additional burden of unpaid care work on women needs to be addressed as part of a comprehensive response to the pandemic[91].

85   i.e. the sum of wages across all domestic workers.
86   Ibid, p. 234.
87   https://www.theguardian.com/world/2022/feb/24/hong-kong-domestic-workers-left-homeless-after-being-fired-for-contracting-covid-19.
88   WIMN No Border to Equality: Global Mapping of Organizations Working on Gender and Migration, 2021, p. 20. For information on related issues, see also article by Rana Aoun on "COVID-19 Impact on Female Migrant Domestic Workers in the Middle East", published online by GBV AoR and available at https://gbvaor.net/sites/default/files/2020-05/COVID-19%20and%20Impact%20on%20Vulnerable%20Female%20Migrant%20Domestic%20Workers%5B5%5D.pdf.
89   WIMN No Border to Equality: Global Mapping of Organizations Working on Gender and Migration, 2021.
90   Gottardo, Carolina and Cyment, Paola "How COVID-19 affects women in migration", Friedrich Ebert Stiftung, 7 September 2020, https://www.fes.de/en/displacement-migration-integration/article-page-flight-migration-integration/how-covid-19-effects-women-in-migration-1-1.
91   UN Women Guidance Note: Addressing the Impacts of COVID-19 on Women Migrant Workers, 2020, p. 3.

Digitalization and the Digital Divide

The digital divide between citizens and migrants is well documented. The response to the economic impacts of COVID-19 transformed the use and scale of use of technology. Technology and the internet were used to communicate with populations generally, including migrants. The increased use of and dependency on technology presents risks for migrant women, who are more likely to be impacted by the digital divide.

The increased use of social media, coupled with the rise in racism and GBV during the pandemic, leaves migrant women increasingly at risk of online harassment. Women, and particularly racialized and migrant women, have long been at the receiving end of online abuse. Increased internet use can put children at greater risk of online harms such as sexual exploitation and cyberbullying[92].

A UN Women study includes statistics demonstrating that women are targeted due to their gender and experience higher levels of harassment online. In the European Union for example, one in ten women reports experiencing cyber-harassment from the age of 15. In the US, women are about twice as likely as men to say they have been targeted because of their gender. In Pakistan, 40% of women are reported to have faced various forms of harassment on the internet . The targeting of women and violence in the digital world can be particularly harmful for women and girls experiencing intersecting forms of oppression. For example, Black women are 84% more likely to receive abusive tweets on Twitter than white women. Religious or ethnic minority women may also be targeted more, as the case of a Facebook page in North Macedonia targeting Roma women specifically demonstrates[93].

USEFUL RESOURCES

•   OHCHR – OHCHR published guidance on COVID-19 and Women's Human Rights on 15 April 2020. The document, COVID-19 and women's human rights: guidance, is available online at https://www.ohchr. org/en/documents/tools-and-resources/covid-19-and-womens-human-rights-guidance.

•   United Nations Children's Fund (UNICEF) reviewed their GBV programme response to the impact of COVID-19 on gender-based violence refugee and migrant response. A summary of the review is available online at https://www.unicef.org/eca/media/15751/file.

•   UN Network on Migration/UN Women and Women in Migration Network (WIMN) Listening Session on "Migration, COVID-19 and Gender", June 2020. A summary report is available online at https:// womeninmigration.org/2020/06/reflections-on-unmn-listening-sessions-on-migration-covid-19-gender/.

•   UN Women Guidance Note Addressing the Impacts of COVID-19 Pandemic on Women Migrant Workers, 2020. Available online at https://www.unwomen.org/en/digital-library/publications/2020/04/ guidance-note-addressing-the-impacts-of-the-covid-19-pandemic-on-women-migrant-workers.

•   WIMN's 2020 Global Mapping of Organizations Working on Gender and Migration, included a question on the impact of the COVID-19 pandemic. WIMN "No Borders to Equality", 2021. Available online at https://womeninmigration.org/2021/03/no-borders-to-equality-global-mapping/. Related resources are available on the WIMN website at https://www.womeninmigration.org/map/.

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92   UNICEF Techical Note, Coronavirus Disease (COVID-19) and Its Implications for Protecting Children Online, available online at https://www.unicef.org/documents/covid-19-and-implications-protecting-children-online?utm_campaign=coronavirus&utm_source=referral&utm_medium=media-.

93   UN Women Online and ICT-facilitated violence against women and girls during COVID-19, 2020. Available online at https://www.unwomen.org/en/digital-library/publications/2020/04/brief-online-and-ict-facilitated-violence-against-women-and-girls-during-covid-19.

3.4   COVID-19, SOGIESC and Intersectionality

This document seeks to play a role in supporting advocacy responses to COVID-19, ensuring equal access to relief services of migrants from all backgrounds, without discrimination on the grounds of race and gender, including instances of interlinkages between both these and other categories. It is important that intersectionality is considered and addressed when developing COVID-19 responses, both regarding relief and recovery programmes.

While an in-depth exploration of intersectionality on multiple grounds is beyond the scope of this tool at this stage, the section below points to the overarching issue of the need for disaggregated data and highlights some specific issues related to discrimination based on SOGIESC. It also presents a broad overview of some potential issues for migrants with disabilities and points to useful resources for further reference.

To overcome some of the data challenges, this section draws from personal stories documented for example by civil society organizations[94] and international bodies or agencies[95], as well as webinars or videos[96]. It also draws from studies or civil society work with refugees. While there is limited disaggregated data for LGBTIQ+ migrants and their experience during and due to the pandemic, research with LGBTIQ+ refugees and asylum seekers may offer some light on the types of issues LGBTIQ+ migrants may experience.

Data and disaggregated data

The distinct lack of official disaggregated data makes it challenging to identify and report on the specific and intersecting issues affecting diverse groups of migrants. Similarly, this impacts on the capacity to develop evidence-based, targeted, and effective policies and programmes to secure equal outcomes for all – migrants and the general population.

Civil society organizations and international agencies on the ground collect valuable data, including qualitative data. Through their work and recent reports, some issues or opportunities to employ an intersectional lens can be identified. Ultimately, the data gap needs to be addressed and is a key starting point for a transformative post-pandemic future, so that no one is left behind.

Data issues raise concern around the invisibility of issues, including those related to SOGIESC, and the extent or severity of the impact of COVID-19 on specific groups. Issues emerging at the Ukrainian border for trans-people who. it is reported, are being stopped as they try to exit the country[98], highlight the need to prevent, monitor and address issues during the pandemic.

Discrimination on grounds of SOGIESC, stigmatization and violence

LGBTIQ+ migrants experience specific forms of discrimination and obstacles to participating fully in society. Migrants from the LGBTIQ+ community are at risk due to the increase in hate and violence targeting the community overall. However, limits in data disaggregation, as identified above, make it challenging to identify or evidence the stigmatization, discrimination and violence LGBTIQ+ migrants are experiencing during the pandemic or to analyse LGBTIQ+ disaggregated data through an intersectional lens.

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94   Council of Europe "No Space for Violence against Women and Girls in the Digital World", 15 March 2022. Available online at https://www.coe.int/en/web/commissioner/-/no-space-for-violence-against-women-and-girls-in-the-digital-world.

95   See for example, https://vozdeguanacaste.com/en/migrant-and-homosexual-stories-of-double-discrimination-with-covid-19/.

96   https://unitedkingdom.iom.int/stories/lgbtiq-migrants-perspectives-challenges-covid-19.

97   For example, a recent Williams Institute (at UCLA School of Law) webinar uploaded 7 April 2022 and entitled "The intersection of Race and SOGI", available online at https://www.youtube.com/watch?v=FiErZkJNsxE. See also European Commission Webinar Report Policies and Challenges Promoting Inclusion and Participation of LGBTIQ+ Migrants, 10 December 2021, https://ec.europa.eu/migrant-integration/library-document/webinar-report-policies-and-challenges-promote-inclusion-and-participation-lgbtiq_en.

98   The Guardian article, "I will not be held prisoner: the trans-women turned back at Ukraine", 24 March 2022, available online at https://www.theguardian.com/global-development/2022/mar/22/i-will-not-be-held-prisoner-the-trans-women-turned-back-at-ukraines-borders?utm_term=623b52134263e5ca02fd875acf2faec8&utm_campaign=GlobalDispatch&utm_source=esp&utm_medium=Email&CMP=globaldispatch_email.

In the EU, a 2019 survey carried out by the EU Fundamental Rights Agency – the largest study of its kind globally at the time[99]- showed that 40% of LGBQI+ respondents reported experiencing discrimination on the grounds of their ethnic origin or migrant background, on top of their gender identity and/or sexual orientation[100]. The Urban Partnership reports that the specific vulnerabilities of LGBTIQ+ migrants have been exacerbated by COVID-19 as they are more likely to have precarious employment, fewer financial resources, and lower access to healthcare. The confinement restrictions have increased vulnerability of domestic abuse and mental health issues. These challenges, they report, are compounded by discrimination and racism which have also been aggravated by the pandemic[101].

OHCHR and IOM have highlighted that LGBTIQ+ migrants continue to face prejudice, harassment and violence in destination countries both based on where they were born as well as based on their sexual orientation, gender identity, gender expression or sex characteristics. Trans and nonbinary people are particularly at risk. This includes access to health, housing, employment and services. As a result of discrimination, LGBTIQ+ migrants are also at higher risk of depression and taking jobs with few protections and poor working conditions. For those who also face marginalization for other reasons, such as their race, ethnicity, age, gender, disabilities, religion or other characteristics, the situation can get even more precarious.

OHCHR and IOM have recommended that Governments take measures to provide support and assistance to LGBTIQ+ migrants, including trans and nonbinary migrants; ensure they have access to information on their rights; integrate sexual orientation, gender identity, gender expression and sex characteristics in laws and policies on migration and asylum; sensitize and train immigration personnel and other government actors; recognise the gender identity of trans and nonbinary migrants; put in place firewalls between service providers and immigration officials; avoid rhetoric and terminology that reinforce harmful narratives, combat hate speech and incitement to violence; ensure effective access to quality healthcare services, including mental health; and ensure access to safe shelters without discrimination[102].

The IOM Regional Office for Central America, North America, and the Caribbean, as well as OHCHR for example, report on issues of the LGBTIQ+ people, including LGBTIQ+ migrants. The IOM Regional Office highlights issues relating to difficulties in accessing healthcare services; stigmatization, discrimination, hate speech and exclusion; access to work and livelihood; and vulnerability to violence.

The International Lesbian, Gay, Bisexual, Trans and Intersex Association (ILGA) Europe discusses the "alarming impact" of COVID-19 on LGBTIQ+ asylum seekers, highlighting similar issues, including higher levels of isolation and trauma re-triggering, overcrowded centres, greater exposure to violence, and difficulties accessing HIV treatment and trans healthcare[103].

A study by Outright Action International also reports on a range of issues affecting the LGBTIQ+ community, including the devastation of livelihoods and increasing food insecurity; disruptions in health care access and reluctance to seek care; elevated risk of family or domestic violence; social isolation and increased anxiety; fears of societal violence, stigma, discrimination, and scapegoating; abuse of state power; concerns about organizational survival, community support, and unity[104].

There are reports of increases in GBV targeted at LGBTIQ+ communities in Latin America, an increase in transphobia in India[105], and an increase in violence against trans-people in a number of European countries[106].

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99   https://gayexpress.co.nz/2020/05/40-of-lgbt-people-in-eu-continue-to-face-harassment/.

100   For access to the study and related material, see https://fra.europa.eu/en/news/2020/does-hope-or-fear-prevail-among-europes-lgbti-people.

101   https://www.inclusionpartnership.com/lgbtqi.

102   OHCHR and IOM Campaign on LGBTIQ+ Migrants available online at https://www.unfe.org/migrants/.

103   ILGA Europe "The shocking truth about LGBTI asylum seekers living through COVID-19 in Europe", 18 June 2021, available online at https://www.ilga-europe.org/blog/shocking-truth-about-lgbti-asylum-seekers-living-through-covid-19-europe.

104   Outright Action International Vulnerability Amplified: The Impact of the COVID-19 Pandemic on LGBTIQ People, 2020, available online at https://outrightinternational.org/sites/default/files/COVIDsReportDesign_FINAL_LR_0.pdf.

105   Dasgupta, J., Schaaf, M., Contractor, S., Banda, A., Viana, M., Kashyntseva, O. and Ruano, A. (2020). "Axes of alienation: Applying an intersectional lens on the social contract during the pandemic response to protect sexual and reproductive health and rights and health", p. 3. International Journal for Equity in Health 19 (130).

106   ILGA Europe "The shocking truth about LGBTI asylum seekers living through COVID-19 in Europe", 18 June 2021.

107   Highlighted in the OHCHR note, "COVID-19 and the Human Rights of LGBTI People. What is the impact of COVID-19 on LGBTI People?", with further details of a report by Human Rights Watch online at https://www.hrw.org/news/2020/04/03/uganda-lgbt-shelter-residents-arrested-covid-19-pretext#.

Limits in data disaggregation, as identified in 3.2 above, have been challenging in identifying the intersecting issues facing migrants from the LGBTIQ+ community, though they are at risk as a result of LGBTIQ+ targeted violence. ILGA, for example, raised the general increase in violence against trans-people as an issue affecting asylum seekers.

In some places, there are reports of police harassment, including using COVID-19 measures to target the LGBTIQ+ community. For example, in Uganda it was reported that LGBTIQ+ shelter residents were arrested[107]. ILGA Europe report shows that increased police interactions in the context of policing emergency measures can involve discrimination as regards SOGIESC and have exaggerated impacts on LGBTIQ+ migrants, as well as racial and ethnic minorities[108].

Health and SOGIESC

LGBTIQ+ migrants report the impact of COVID-19 on their mental health, including through being isolated from the LGBTIQ+ community. Without access to, or until they are able to, access accurate medical information, those who are HIV+ may also be fearful about COVID-19[109].

Access to trans-affirming healthcare has been impacted by the pandemic. In light of the limited disaggregated data available for LGBTIQ+ migrants, the experiences of those seeking asylum may offer some indication of some of the risks also for LGBTIQ+ migrants. For example, ILGA Europe explains that access to trans-affirming healthcare was already challenging for asylum seekers before the pandemic. Since the pandemic, lockdowns, limitations on mobility and the cutting of services at medical centres have caused trans asylum seekers to interrupt their treatment.

The Action Plan of the Urban Agenda Partnership on Inclusion of Migrants and Refugees sets out seven key actions, one of which is to identify challenges to inclusion facing LGBTQI+ migrant communities and exploring successful models to address intersecting forms of disadvantage, by consulting with relevant communities and promoting knowledge-sharing among experienced stakeholders. Another key action is to improve access to health care for hard-to-reach migrant populations, with a particular focus on challenges exposed by the COVID-19 pandemic. Such hard-to-reach migrant populations would include LGBIQ+ migrants. Hosting a webinar on LGBTIQ+ inclusion[110] in December 2021 is an example of this commitment in action.

COVID-19 and migrants with disabilities

It is important to note that migrants who experience racism and gender inequalities may also have a disability, and to be cognisant of intersectionality when developing COVID-19 responses, for relief and recovery.

Though research arguably continues to focus primarily on single grounds of discrimination, some resources that recognise the intersecting identities and issues experienced by migrants with disabilities are included below for further reference. Early in the pandemic, IOM for example, published an analytical snapshot for people with disabilities[111], a short document which also includes useful resources.

People with disabilities experience discrimination and lower levels of employment, prior to the pandemic, and there are concerns that COVID-19 will disproportionately and negatively impact their employment opportunities. IOM's snapshot explains that many states have social protection schemes designed to support people with disabilities. However, in many cases state health care supports are linked to a worker's contributions during formal employment. In a public health and economic crisis then, this presents a challenge for disability services. Without the adequate supports, migrants with disabilities experience

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107   Highlighted in the OHCHR note, "COVID-19 and the Human Rights of LGBTI People. What is the impact of COVID-19 on LGBTI People?", with further details of a report by Human Rights Watch online at https://www.hrw.org/news/2020/04/03/uganda-lgbt-shelter-residents-arrested-covid-19-pretext#.

108   ILGA Europe COVID-19 and specific impact on LGBTI people and what authorities should be doing to mitigate impact, https://ilga-europe.org/sites/default/files/COVID19%20_Impact%20LGBTI%20 people.pdf.

109   See for example article by Artuc Yavuz "LGBTIQ+ migrants' perspectives on challenges of COVID-19", IOM, 7 July 2020, online at https://unitedkingdom.iom.int/stories/lgbtiq-migrants-perspectives- challenges-covid-19.

110   "Policies and challenges to promote the inclusion and participation of LGBTIQ+ migrants", held by the Urban Agenda Partnership, City of Mechelen and Government of Flanders on 17 December 2021, the report of which is available online at https://ec.europa.eu/migrant-integration/library-document/webinar-report-policies-and-challenges-promote-inclusion-and-participation-lgbtiq_en. A report with best practices and recommendations is anticipated to be published in 2022, see also https://www.inclusionpartnership.com/lgbtqi.

111   IOM COVID-19 Analytical Snapshot #30: People with Disabilities, May 2020. Available online at https://www.iom.int/sites/g/files/tmzbdl486/files/documents/covid-19_analytical_snapshot_30_-_ people_with_a_disability.pdf.

multiplicative barriers which mean it is more difficult to meet even basic food, shelter, and health needs. The WHO has also highlighted the fact that people with disabilities, depending on the individual situation, may be more at risk of exposure to COVID-19, due for example to barriers to basic hygiene measures and difficulty social distancing due to support needs or living in group environments.

As the Special Rapporteur on people with disabilities has stated, it is crucial that information about how to prevent and contain the coronavirus is accessible to everyone. Organizations of people with disabilities should be consulted and involved in all stages of the COVID-19 response[112]. Migrant children with disabilities also need to be considered, as communication channels may not consider their specific needs or be accessible to them.

USEFUL RESOURCES

•   Birchall, J. Intersectionality and responses to COVID-19, COVID Collective, 2021. Available online at https://opendocs.ids.ac.uk/opendocs/bitstream/handle/20.500.12413/16545/Covid_Collective_helpdesk_paper_3_Intersectionality_and_responses_to_Covid-19.pdf?sequence=5&isAllowed=y.

•   IOM COVID-19 Analytical Snapshot #30: People with Disabilities, May 2020. Available online at https://www.iom.int/sites/g/files/tmzbdl486/files/documents/covid-19_analytical_snapshot_30_-_people_with_a_disability.pdf.

•   IOM International Migration Law Information Note: International Standards On The Protection Of People With Diverse Sexual Orientation, Gender Identity, Gender Expression And Sex Characteristics (SOGIESC) In The Context Of Migration, May 2021. Available online at https://www.iom.int/sites/g/files/tmzbdl486/files/documents/InfoNote-International-Standards-Protection-of-People-with-Diverse-SOGIESC.pdf.

•   IOM Regional Office for Central America, North America and the Caribbean "What is the impact of COVID-19 on LGBTI migrants?", 15 May 2020. Available at https://rosanjose.iom.int/en/blogs/what-impact-covid-19-lgbti-migrants?page=1%3Fpage%3D1.

•   IOM/DISC Initiative IOM Experts' Voice on Inclusive COVID-19 Responses for Migrants in Vulnerable Situation. Available online at https://www.iom.int/sites/g/files/tmzbdl486/files/documents/iom_experts_on_covid-19_and_specific_migrant_groups.pdf.

•   OHCHR ASPIRE Guidelines on COVID-19 response free from violence and discrimination based on sexual orientation and gender identity, 19 June 2020. Available online at https://www.ohchr.org/Documents/Issues/SexualOrientation/IESOGIASPIREGuidelinesReport_v5_20200622.pdf.

•   OHCHR COVID-19 and the Human Rights of LGBTI People, 17 April 2020. Available online at https://www.ohchr.org/Documents/Issues/LGBT/LGBTIpeople.pdf.

•   Outright Action International Vulnerability Amplified: The Impact of the Covid-19 Pandemic on LGBTIQ People, 2020. Available online at https://outrightinternational.org/sites/default/files/COVIDsReportDesign_FINAL_LR_0.pdf.

•   UN Women/UNPRDP Intersectionality Resource Guide and Toolkit: An Intersectional Approach to Leave No One Behind, 2022. Available online at https://www.unwomen.org/sites/default/files/2022-01/Intersectionality-resource-guide-and-toolkit-en.pdf.

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112   Pring, John "Coronavirus: UN rapporteur's concern over the impact of crisis on rights", Disability News Service, 19 March 2020, available online at https://www.disabilitynewsservice.com/coronavirus-un-rapporteurs-concerns-over-impact-of-crisis-on-rights/.

4   RESPONSES AND PROMISING PRACTICES

4.1   Systemic Racism: An overarching issue

Since the COVID-19 pandemic, several initiatives have been developed at the international, regional, and national levels that acknowledge and seek to address systemic racism.

International – OHCHR

Most recently, OHCHR released the High Commissioner's report and accompanying conference room paper on racial justice and equality[113]. The report was prepared pursuant to Human Rights Council Resolution 43/1[114], adopted in June 2020 following an urgent debate on "current racially inspired human rights violations, systemic racism, police brutality and violence against peaceful protests". The report presents a Four-Point Agenda Towards Transformative Change for Racial Justice and Equality[115] which sets out a vision for achieving racial justice and equality. Its four interconnected pillars call on States to:

STEP UP: Stop denying and start dismantling systemic racism

PURSUE JUSTICE: End impunity for human rights violations by law enforcement officials and build trust

LISTEN UP: Ensure that people of African descent and those who stand up against racism are protected and heard, and their concerns are acted on

REDRESS: Confront past legacies, take special measures and deliver reparatory justice.

Progress must happen on all four areas of the Agenda in order to bring about meaningful change for people of African descent.

Further to the presentation by the High Commissioner for Human Rights of the report to the Human Rights Council, the Council adopted resolution 47/21, establishing an international independent expert mechanism to further transformative change for racial justice and equality in the context of law enforcement globally[116]. It also requested the High Commissioner for Human Rights to enhance and broaden monitoring, in order to continue to report on systemic racism, violations of international human rights law against Africans and people of African descent by law enforcement agencies, to contribute to accountability and redress and to take further action globally towards transformative change for racial justice and equality.

Updates on the Implementation of Resolution 47/21 and other relevant material are available on the OHCHR website[117].

Regional – Regional anti-racism strategies and plans

The European Union, for example, published "A Union of Equality: EU Anti-racism Action Plan 2020-2025" on 18 September 2020. The Action Plan acknowledges the prevalence of racism across Member States and says,

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112   Pring, John "Coronavirus: UN rapporteur's concern over the impact of crisis on rights", Disability News Service, 19 March 2020, available online at https://www.disabilitynewsservice.com/coronavirus-un-rapporteurs-concerns-over-impact-of-crisis-on-rights/.

113   OHCHR | A/HRC/47/53: Promotion and protection of the human rights and fundamental freedoms of Africans and of people of African descent against excessive use of force and other human rights violations by law enforcement officers

114   A/HRC/RES/43/1 (un.org).

115   HRC Resolution 43/1 is available online at https://www.ohchr.org/EN/Issues/Racism/Pages/Implementation-HRC-Resolution-43-1.aspx.

116   A/HRC/RES/47/21 (undocs.org).

117   https://www.ohchr.org/en/racism/agenda-towards-transformative-change-racial-justice-and-equality.

"Racism comes in different forms. Overt expressions of individual racism and racial discrimination are the most obvious. All too often, racial or ethnic origin is used as a ground to discriminate – the COVID-19 pandemic and the aftermath of terrorist attacks are just the most recent cases where blame has been unjustly directed at people with a minority racial or ethnic background. People of Asian and African descent, Muslims, Jewish and Roma people have all suffered from intolerance. But other, less explicit forms of racism and racial discrimination, such as those based on unconscious bias, can be equally damaging[118]"

National – e.g. National Action Plans

In Ireland for example, an independent anti-racism committee (ARC) established by government carried out the consultation on a new National Action Plan Against racism during 2021, through virtual workshops and a written submission process. ARC's interim report of makes explicit reference to the inclusion of migrants, stating:

> *The Committee recognises that the groups affected by racism in Ireland may not be confined to those covered by our international commitments, including ICERD and EU legislation. **We further recognise the need to ensure that the Action Plan includes citizens and residents, migrant workers (documented or undocumented), refugees and asylum seekers.** As recognized in the UN Durban Declaration on Racism and Programme of Action (DDPA), racism is a structurally embedded phenomenon of domination and power, which is reflected through, and reproduced by, institutional arrangements. Racism is embedded in structures, reflected and reproduced by institutions and experienced individually. This interplay between structure and institutions in the reproduction of racism, is referred to as 'systemic racism[119]".*

4.2   Promising practices – Race, racism and discrimination

RACIST VIOLENCE, XENOPHOBIA AND HATE SPEECH

•   **State** responses and measures to prevent and combat hate speech and racist and LGBTI-phobic violence can be found in many states. For example, in Austria the Anti-Discrimination Office of Styria has a "Ban Hate" app. It reported that there has been an increase in posts blaming refugees particularly for the spread of the COVID-19 virus. A new legislative package, "Hate on the Net", then came into effect on 1 January 2021, to bring more effective protection against hate posts on the internet[120] which should protect everyone at risk of racism, including migrants.

•   **Communities, civil society organizations and stakeholders** have also developed several responses and promising practices. An example of this is the US-based STOP AAPI HATE campaign. With the slogan, "Our communities stand united against racism", this initiative is responding to the rise in racism and hate against Asian-American and Pacific Islander communities during the COVID-19 pandemic. The campaign calls on people to "Act Now. Together, we can stop it"[121].

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118   EU Anti-racism Action Plan 2020-2025, p.1, available online at https://ec.europa.eu/info/policies/justice-and-fundamental-rights/combatting-discrimination/racism-and-xenophobia/eu-anti-racism-action-plan-2020-2025_en.

119   Anti-Racism Committee "Interim Report to the Minister for Children, Equality, Disability, Integration and Youth", July 2021, p. 6. Available online at https://www.gov.ie/pdf/?file=https://assets.gov.ie/132151/ed3f39e2-4aa1-4991-aa06-52beae8310db.pdf#page=null.

120   Further details highlighted in the Council of Europe report are available online at https://rm.coe.int/cdadi-2021-3rev-good-practices-responses-to-the-covid-19-pandemic-in-t/1680a1b72d.

121   Details can be found on the website at https://stopaapihate.org/. Reference to the initiative and further information on the context are also recorded by the EU FRA bulletin, https://fra.europa.eu/sites/default/files/fra_uploads/fra-2020-coronavirus-pandemic-eu-bulletin_en.pdf.

campaign #StandUp4Migrants and accompanying Toolbox engages a range of partners to shift harmful narratives on migrants and migration from fear and division towards what we have in common[123]. During the pandemic, this included showcasing stories of solidarity between migrant and local communities[124].

Health

•   **State** responses included many positive examples. Canada was amongst many states that ensured access to the vaccine and basic healthcare for migrants on an equal footing to citizens. Responding to concern raised by nineteen civil society organizations, on 27 March 2020 Portugal granted access to health care, welfare provisions and the labour market to those who had applied for a residence permit before 18 March 2020. This included in country applications for residence permits (regularisation) for work purposes [125].

•   **Civil society** organizations have developed a range of initiatives to support access to essential healthcare for all migrants, advocating for those who are most at risk of exclusion. For example, PICUM produced a vaccination policy scorecard, monitoring the situation for undocumented migrants in European states[126].

•   **Collaboration** has also been evident between state parties, agencies, and civil society actors. In The Gambia for example, IOM is supporting the Ministry of Health to roll out an awareness raising campaign with free vaccination against COVID-19. The campaign targets mobile populations along The Gambia's border with Senegal. The campaign involves working with health educators and community leaders in each region, to ensure that information provided is well understood[127].

•   In relation to communication and **language** for example, in Helsinki, Finland, officials and hospitals took a number of measures to address the concerns at the increase of Somali-speakers being admitted early in the pandemic. This included consulting with the Finish Somali community, and the production of COVID-19 information resources in diverse languages and media (including video). The city also included professionals representing language minorities in teams responsible for tracing infections[128].

•   **Agencies and UN Networks** have also provided promising practices and supports. The UN Network on Migration's Thematic Workstream on Access to Services is developing a **practical framework**. The framework encompasses a summary of steps that might be applied to national COVID-19 actions to ensure migrant-inclusive service delivery systems. It is built upon a cooperative, responsible, non-discriminative, and human-rights systematic approach, sensitive to gender-based issues, and to the special needs of and provisions for children, families, and older people. IOM has released an issue brief entitled Countering Xenophobia and Stigma to Foster Social Cohesion in the COVID-19 Response and Recovery which articulates how the ongoing pandemic has heightened already existing xenophobic attitudes and the stigmatization of migrants in numerous contexts. The issue brief builds upon the call of the UN Secretary General for a multi-stakeholder response to countering the "tsunami of hate and xenophobia", exacerbated by COVID-19 related misinformation and 'fake news' [129] .

•   In Mexico, a joint effort was carried out by UNHCR, IOM, UNICEF and PAHO/WHO in support of shelters run by civil society organizations so they would continue hosting incoming migrants and asylum seekers while minimizing the risks of spreading COVID-19 among them. Support was provided to 93 civil society shelters to keep on welcoming migrants while carrying out preventive measures against COVID-19[130].

122   For further details, visit the website https://www.unicef.org/colombia/super-panas.

123   OHCHR #StandUp4Migrants campaign: https://www.standup4humanrights.org/migration/en/index.html and Toolbox: https://www.standup4humanrights.org/migration/en/toolbox.html.

124   https://youtu.be/EMWssEFBn9E.

125   PICUM Non-exhaustive overview of European government measures impacting undocumented migrants in the context of COVID-19, 2020, p. 6, available online at https://picum.org/wp-content/uploads/2020/10/Non-exhaustive-overview-of-European-government-measures-impacting-undocumented-migrants-taken-in-the-context-of-COVID-19.pdf.

126   The scorecard is available online at https://picum.org/vaccinating-europe-undocumented-a-policy-scorecard/

127   Further details can be found online, including at https://www.iom.int/news/covid-19-immunization-campaign-targets-mobile-communities-along-gambia-senegal-border-over-1500-vaccinated.

128   "COVID-19 takes unequal toll on immigrants in the Nordic region", 04 April 2020, https://www.reuters.com/article/us-health-coronavirus-norway-immigrants-idUSKCN2260XW.

129   https://www.iom.int/sites/g/files/tmzbdl486/files/documents/countering_xenophobia_and_stigma_130720.pdf

130   This practice was highlighted in a January 2022 publication from the UN Network on Migration Working Group on Access to Services which is co-led by WHO and UN-Habitat (January 2022), Promising Practices in the Provision of Essential Services to Migrants, available online at https://migrationnetwork.un.org/sites/g/files/tmzbdl416/files/docs/provision_of_essential_services_-_good_practices.pdf

Data collection and protection

•	State responses have included measures related to data protection, as much as data collection. Critical to ensuring the safety of undocumented migrants, and the public at large, was the introduction of firewalls between state departments, which meant undocumented migrants could access vaccinations without their data being shared with another authority (e.g. in Portugal and Greece).

•	Collaboration was also evident, between states and agencies. In some states, while longstanding data limitations remained, short-term measures were taken that help to address the data gaps impacting directly on COVID-19 related issues, relief, and associated measures. In Ireland, IOM Ireland partnered with the Department of Justice and Equality to conduct a rapid policy survey. The objective of the survey was to gain a comprehensive view of policy measures taken by Ireland in response to COVID-19, from a migration governance lens, and examines the extent to which migrants and asylum seekers were included in pandemic policy responses[131].

•	Civil society actors also conducted surveys. PICUM's survey looking at the situation for Europe's undocumented during the pandemic, for example, was employed by members and picked up by media, thereby highlighting issues and providing evidence for policy makers and other stakeholders to inform responses[132].

Migration governance and policy

•	**State** responses to potential impacts of the pandemic and associated restrictions on migrants were encouraging in places, albeit that they need strengthening. Early in the pandemic for example, the Tunisian government suspended visa expiry dates and financial implications. Tunisia also confirmed that financial and in-kind support could be accessed by migrants and refugees . Italy and Portugal are among states that introduced temporary regularisation programmes for some undocumented migrants[134].

•	The UN Network on Migration called for a moratorium on forced returns during the COVID-19 pandemic[135]. A number of States suspended forced returns as policy. However, States in many regions were reported to have been using forced return of migrants as a measure in response to COVID-19. Concerned by such reports, the Network called on States to suspend forced returns during the pandemic, in order to protect the health of migrants and communities, and uphold the human rights of all migrants, regardless of status.

•	**Agencies** and other UN structures provided guidance to states and other stakeholders. The UN Network on Migration for examples, published a guidance note on immigration detention, early in the pandemic[136.] At this stage, five countries were identified as releasing some or all people from detention facilities. Spain had cleared several facilities and committed to releasing all migrants who were detained. Similarly in Zambia, the government announced they would release all detained migrants. Mexico and the UK also released certain groups of detained migrants, following legal direction and challenge.

131	Details are available online at https://www.migrationdataportal.org/resource/iom-ireland-rapid-policy-survey-reportthe-irish-governments-policy-response-covid-19.

132	For further information on the survey and responses, visit the website at https://picum.org/whats-happening-to-undocumented-people-during-the-covid-19-pandemic/.

133	This example is highlighted in the statement, "Government measures are encouraging but stronger decisions need to protect migrants and refugees against COVID-19", 10 April 2020, available online at https://ftdes.net/pour-des-mesures-durgence-de-protection-des-migrants-es-et-des-refugies-ees-contre-le-covid-19/. These measures were welcomed by civil society, though it was noted that while encouraging, stronger decisions needed to be made and the situation remained precarious.

134	PICUM Non-exhaustive overview of European government measures impacting undocumented migrants in the context of COVID-19, 2020, p. 3.

135	https://www.ohchr.org/en/statements/2020/05/forced-returns-migrants-must-be-suspended-times-covid-19

136	UN Network on Migration COVID-19 and immigration detention: What Governments and other stakeholders can do, available online at https://migrationnetwork.un.org/sites/g/files/tmzbdl416/files/docs/un_network_on_migration_wg_atd_policy_brief_covid-19_and_immigration_detention.pdf.

Digital Divide

- **Agency Collaboration** - IOM recognized some of the immediate challenges facing migrant inclusion and social cohesion from COVID-19, and the risks and opportunities digitization would present during the pandemic. Therefore, and in the framework of the **Joint Global Initiative on Diversity, Inclusion and Social Cohesion (DISC)**, the fourth edition of the global DISC Digest highlights the various initiatives that both IOM and other organizations have taken, to provide resources and guidance for those looking to transition their activities online in the areas of migrant training, integration and social cohesion[137].

The DISC Digest also includes information on various initiative including online campaigns that focus on **combatting hate speech** towards migrants and misinformation on COVID-19.

	OHCHR named best practices (OHCHR 2020)	Practices established – for example
1	Entry and access on an equal footing to citizens	Canada
2	Immediate testing, contact tracing and treatment	Singapore
3	Releasing of detainees	Belgium, Netherlands
4	Access to information	Germany, Norway
5	Extension of visa and regularization	Italy, Tunisia
6	Racism as a threat to public health	Canada
7	Pre and post migration support	Bangladesh, Mexico

Table 1: Examples of countries where government measures were put in place, that correspond best practice in combatting xenophobia during pandemic[138].

4.3   Promising Practices - Gender, discrimination and anti-discrimination

Health

- **Civil society** responses have included civil society and expert collaborations. PICUM collaborated with Lighthouse Reports on their study on COVID-19 vaccination and undocumented migrants[139], as well as engaging with the Bureau of Investigative Journalism[140].
- **Agency** responses have been evident at a regional and local level. UN Women in South Asia and its partners are providing critical support to women and their families to survive the pandemic, sustaining services, extending supplies and information, and advocating for gender-responsive strategies to respond to the crisis and recover in the aftermath.

Gender Based Violence (GBV) – The Shadow Pandemic

- **Civil society** responses have included solidarity networks of migrant women (including through the use of social media, hotlines, extending opening hours). For example, CONATT has a hotline for Cameroonian women stranded in North Africa.

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137   DISC Digest 4th edition, available online at https://www.iom.int/sites/g/files/tmzbdl486/files/documents/disc_digest_4th_edition_digitalization_and_migrant_inclusion_final.pdf.

138   Source: Hennebry, J. and H. KC. Quarantined! Xenophobia and migrant workers during the COVID-19 pandemic. International Organization for Migration (IOM). Geneva, 2020. Available online at https://publications.iom.int/system/files/pdf/quarantined.pdf

139   Lighthouse Reports, 2021, available online at https://lighthouse-reports.github.io/Vaccinating-Undoc-Microsite/scorecard/BEL.

140   https://euobserver.com/coronavirus/152781.

•   Step Up Migrant Women campaign (UK) is coordinated by Latin American Women's Rights Service (LAWRS), a member organization of PICUM. It runs a domestic abuse service and has called for urgent support for migrant victims, including undocumented migrants, blocked from safety, healthcare, and refuges[141].

•   Agency responses to the Shadow Pandemic have included actions by UNICEF which published a note presenting ideas on addressing GBV[142] and UN Women published a feminist plan, "Beyond COVID-19: A Feminist Plan for Sustainability and Social Justice"[143].

•   A UNICEF GBV programme, 'Action Against Gender-based Violence Affecting Refugee and Migrant Women and Children in Greece, Italy, Serbia and Bulgaria' has developed responses to the impact of Covid-19 on GBV[144].

Data and disaggregated data

•   **Civil society** organizations have played a role in compensating for the gap in official, disaggregated data. For example, WIMN added a section on the impact of COVID-19 into the 2020 Global Mapping survey[145].

•   In response to the limited evidence and analysis of the sex and gendered dynamics of COVID-19, the Gender and COVID-19 Research Project was established[146]. The project conducts real time sex and gender analysis on COVID-19. Originally including four countries, the project has expanded to include nine countries in four regions. Initially members came from Canada, China, Hong Kong and the United Kingdom. This expanded in June 2020 to include members from Bangladesh, Kenya, Nigeria, Brazil and the Democratic Republic of Congo.

Income, employment and social protection

•   **State responses** have been inclusive in places and on specific issues. For example, some states have ensured that migrants, including undocumented migrants, were included in COVID-19 relief programmes and income protection measures and have included these in the National Action Plans.

•   **Trade Unions** have also been active in this space. Reference is made elsewhere in the document to the labour movement call for a new social contract and to campaigns on wage theft. UNIDAPP, in Columbia (which is made up of primarily Venezuelan migrant women) has also been actively highlighting discrimination and issues related to the gig economy[147].

•   The Federation of Asian Domestic Workers Unions (FADWU) Hong Kong responded to support migrant domestic workers who were fired when they contracted COVID-19. Their response included: 1) handling cases of homeless workers including referring them to shelter; 2) handling cases of migrant domestic workers who are in need of medicine, food and antigen self-test kits; 3) sending an open letter to the Immigration Department of Hong Kong, Labour Department and the Equal Opportunities Commission ; 4) organizing initiatives including a webinar on "Know Your Rights in the Pandemic" and 5) regularly uploading government policies and information.

141   For further details, visit https://stepupmigrantwomen.org, www.picum.org and https://picum.org/covid-19migrantsineurope/.

142   Available online at https://www.unicef.org/media/68086/file/GBV%20Service%20Provision%20During%20COVID-19.pdf

143   UN Women Beyond COVID-19: A Feminist Plan for Sustainability and Social Justice, 2021, available online at https://www.unwomen.org/en/digital-library/publications/2021/09/feminist-plan-for-sustainability-and-social-justice?gclid=CjwKCAiAgvKQBhBbEiwAaPQw3LpHVoSP1GrX7355D1VwCtTVw-dpMGxpBmWBjYQGpssFTahQUWPh0RoCdY0QAvD_BwE.

144   Further information on the responses can be found online at https://www.unicef.org/eca/media/15751/file.

145   WIMN No borders to equality, 2020, available online at https://womeninmigration.org/2021/03/no-borders-to-equality-global-mapping/.

146   The project website is www.genderandcovid-19.org.

147   UNIDAPP is an affiliate of the Central Workers Union (CUT). https://www.facebook.com/unidappcolombia.

148   https://www.facebook.com/HKFADWU/posts/4896353787097147.

149   https://www.youtube.com/watch?v=KiWu9DYW0R8

150   See for example study by Farbenblum, B. and Berg, L. (2021) Migrant Workers Access to Justice for Wage Theft: A global study of promising practices, Migrant Justice Institute, 2021. Available online at https://static1.squarespace.com/static/593f6d9fe4fcb5c458624206/t/61adba9108bec25ce355c6e4/1638775475553/Farbenblum+Berg+2021+MWA2J+with+hyperlinks.pdf.

•   **Civil society** organizations in Asia, and in countries where there are protections, are providing legal counsel to people who have experienced wage theft[150]. Such initiatives are found for example in the Philippines, India and Bangladesh.

•   **Civil society organizations** in Africa worked with street vendors to 'pivot' their work and to make and sell masks. Similar initiatives are organised by organizations working with migrant women in Mexico[151].

•   **Collaboration** between and leadership by civil society organizations have highlighted the importance of building a gender and migration perspective into advocacy. Amplifying calls by the International Trade Union Confederation (ITUC), WIMN has set out the rationale for a new social contract at this time, explaining that an inclusive, intersectional feminist approach is the only way out of the COVID-19 crisis[152]. The following year, on International Women's Day 2021, trade unions, in alliance with women's rights organizations, feminist, human rights and social justice movements, called for a new social contract[153]. The new social contract called for by the labour movement would require states to build an economic model addressing all pillars of decent work and centred on the most marginalized workers, including migrants of all status[154].

Digitalization and the Digital Divide

•   **Collaboration** has resulted in the Reach Inclusion through Digital Empowerment (RIDE) project for migrant women[155]. The project aims to include migrant and refugee women in the digital labour market, through creating upskilling and re-skilling opportunities such as specially designed training courses .

•   Superrr Lab, a feminist group addressing digital issues, has created a new online intersectional Feminist Tech Policy guide to address digital gender concerns alongside a set of narrative future visions of just technology that serves a diverse society[157].

4.4   Promising practices through an intersectional lens

The discussion on a transformative post-pandemic future that leaves no one behind has provided a platform for considering how to move forward. In this context, and regarding intersectionality, stakeholders argue that an intersectional approach needs to consider gender inequalities, historical inequalities and structures based on race, and not only the cumulative disadvantages or injustices posed by the pandemic[158].

Research shows that risk factors do not operate in isolation. Different factors intersect in different ways to shape experiences of COVID-19. Intersecting factors are, in turn, embedded in socio-political processes and structures that create different risks and exposure for different groups. Those advocating for an analysis that goes beyond sex and gender, explain that intersecting structures and processes include, amongst others, climate change, patriarchy, racism, and xenophobia[159].

The WHO's core work, direction and targets for universal health coverage and emergency response actions specifically address the need to leave no one behind, to take a human rights-based and gender-responsive approach to address needs, and to provide evidence-informed and contextualized essential health services in acute and protracted emergencies[160].

151   As recorded by WIMN through their inclusion of a question on COVID-19 in their 2020 global mapping survey.

152   WIMN (April 2020). COVID-19 statement, available online at https://womeninmigration.org/wp-content/uploads/2020/04/WIMN-COVID19-Statement-FINAL2.pdf.

153   International Trade Union Confederation (ITUC) "A new social contract for gender-equitable recovery and resilience", 8 March 2021, available online at https://www.ituc-csi.org/IWD2021.

154   https://www.fes.de/en/africa-department/more-posts/a-pandemic-reset-for-migrant-workers.

155   Further details on the RIDE project are available online at https://www.ride-project.eu/.

156   RIDE is funded by the European Union's AMIF Fund, led by UNITE (Belgium), and in collaboration with Diesis Coop (Belgium), Litus Novum (Germany), Youth Included (Czech Republic), Simplexis (Greece), Code to Change (Netherlands), Chamber of Commerce of Bulgaria (Bulgaria) and Cisco Networking Academy Europe.

157   SuperrLab, https://superrr.net//.

158   See for example, https://www.qmul.ac.uk/media/global-policy-institute/Policy-brief-COVID-19-and-intersectionality.pdf

159   See for example, Hankivsky, O. and Kapilashrami, A. (2020). Beyond sex and gender analysis: an intersectional view of the Covid-19 pandemic outbreak and response. Queen Mary University of London 23. Available online at https://nccdh.ca/resources/entry/beyond-sex-and-gender-analysis-an-intersectional-view-of-the-covid-19-.

160   See WHO's Thirteenth General Programme of Work 2019-2023, available online at https://www.who.int/about/what-we-do/thirteenth-general-programme-of-work-2019---2023.

161   https://www.who.int/publications/m/item/frontier-dialogue-consultations-on-addressing-structural-racial-and-ethnicity-based-discrimination.

As the COVID-19 pandemic moved into a prolonged crisis, there is widespread recognition, including by WHO, that both short- and longer-term actions are needed, particularly to reach the most vulnerable groups including migrants"[161].

EXAMPLES OF PROMISING PRACTICES – SOGIESC

•   Collaboration is evident in Ecuador for example, where a local civil society organization, Diálogo Diverso, in partnership with the Canadian government, set up the first place and reference centre for LGBTIQ+ migrants from Venezuela[162] to access health and other services, linked in with the local community[163]. While not established specifically in response to COVID-19, spaces such as these would have been particularly important at this time when access to essential services and COVID-19 related healthcare and prevention was crucial.

•   Another collaboration was a webinar on "Policies and challenges to promote the inclusion and participation of LGBTIQ+ migrants", held by the Urban Agenda Partnership, City of Mechelen and Government of Flanders on 17 December 2021, the report of which is available online[164]. It is expected that a report with best practices and recommendations will be published in 2022[165].

•   Covid Collective – for example, Jenny Birchall Intersectionality and responses to COVID-19, 22 March 2021. Available online at https://opendocs.ids.ac.uk/opendocs/handle/20.500.12413/16545

•   EU FRA Civil Society Forum 2021, https://eungohumanrightsforum.app.swapcard.com/event/eu-ngo-human-rights-forum-2021-rebuilding-better-a-human-rights-based-recovery-from-the-pandemic-1

•   EU Fundamental Rights Agency (FRA) - https://fra.europa.eu/en/themes/covid-19.

•   European Network to Reduce Vulnerabilities in Health - https://mdmeuroblog.wordpress.com/resources/publications/.

•   Friedrich Ebert Stiftung – Spotlight: Migration and COVID-19, related articles available online at https://www.fes.de/en/displacement-migration-integration/causes-of-displacement-1/fokus-migration-and-covid-19. For example, https://www.fes.de/en/displacement-migration-integration/article-page-flight-migration-integration/the-need-to-link-migrant-rights-with-racial-justice.

•   Migration Data Portal - available online at https://www.migrationdataportal.org/themes/migration-data-relevant-covid-19-pandemic.

•   People's Migration Challenge - https://peoplesmigrationchallenge.org/ provides access to recorded webinar, a number of which have focused on COVID-19, e.g. https://peoplesmigrationchallenge.org/migration-covid-19-and-a-new-social-contract/.

•   PICUM - compilation of members' resources and statements can be found at https://picum.org/covid-19migrantsineurope/.

•   PICUM "Non-exhaustive overview of European government measures impacting undocumented migrants taken in the context of COVID-19", 2020. Available online at https://picum.org/wp-content/uploads/2020/10/Non-exhaustive-overview-of-European-government-measures-impacting-undocumented-migrants-taken-in-the-context-of-COVID-19.pdf.

162   LGBTIQ+ migrants are among the most vulnerable of the increasing numbers of Venezuelan nationals seeking asylum in Ecuador, who experience discrimination marginalization and barriers to accessing services based on their sexual orientation, gender identity and expression (SOGIESC).

163   Dialogo Diverso, Ecuador, http://dialogodiverso.org/servicios-copy-2/. The initiative is included in the UN Network on Migration's publication Promising Practices in the Provision of Essential Services to Migrants, January 2022, available online at https://migrationnetwork.un.org/sites/g/files/tmzbdl416/files/docs/provision_of_essential_services_-_good_practices.pdf

164   The report is available online at https://ec.europa.eu/migrant-integration/library-document/webinar-report-policies-and-challenges-promote-inclusion-and-participation-lgbtiq_en.

165   https://www.inclusionpartnership.com/lgbtqi.

- UNICEF "COVID-19 and Migrant and Displaced Children", 28 July 2020. Available at https://unicefmigrationdisplacement.exposure.co/covid19-and-migrant-and-displaced-children-nbsp.

- UN Network on Migration Working Group on Access to basic services publication features good practices: https://migrationnetwork.un.org/sites/g/files/tmzbdl416/files/docs/provision_of_essential_services_-_good_practices.pdf.

- Outright Action International Vulnerability Amplified: The Impact of the Covid-19 Pandemic on LGBTIQ People, 2020. Available online at https://outrightinternational.org/sites/default/files/COVIDsReportDesign_FINAL_LR_0.pdf.

- UN Women/UNPRDP Intersectionality Resource Guide and Toolkit: An Intersectional Approach to Leave No One Behind, 2022. Available online at https://www.unwomen.org/sites/default/files/2022-01/Intersectionality-resource-guide-and-toolkit-en.pdf.

Appendices

ANNEX: About the UN Network on Migration

The United Nations system is committed to supporting the implementation, follow-up, and review of the Global Compact for Safe, Orderly and Regular Migration (GCM).

To this end, the United Nations established a Network on Migration[166] to ensure effective, timely and coordinated system-wide support to Member States. In carrying out its mandate, the Network prioritizes the rights and wellbeing of migrants and their communities of destination, origin, and transit. It will place emphasis on those issues where a common UN system approach would add value and from which results and impact can be readily gauged.

In all its actions the Network respects the principles of the Global Compact for Safe, Orderly and Regular Migration and be guided, inter alia, by the United Nations Charter, international law, and the Agenda 2030 for sustainable development. Due regard, too, will be given to the importance of the Secretary-General's prevention agenda.

The objectives[167] of the UN Network on Migration (Network) are to:

• Ensure effective, timely, coordinated UN system-wide support to Member States in their implementation, follow-up and review of the GCM, for the rights and wellbeing of all migrants and their communities of destination, origin, and transit;

• Support coherent action by the UN system at country, regional and global levels in support of GCM implementation, where such action would add value, while ensuring well-defined linkages with UN structures at all levels;
• Act as a source of ideas, tools, reliable data and information, analysis, and policy guidance on migration issues, including through the capacity-building mechanism established in the GCM;

• Ensure Network actions promote the application of relevant international and regional norms and standards relating to migration and the protection of the human rights of migrants;

• Provide leadership to mobilize coordinated and collaborative action on migration by the UN system, including by speaking with one voice as appropriate, in accordance with the UN Charter, international law, and the mandates and technical expertise of relevant UN system entities;

• Ensure close collaboration with other existing UN system coordination mechanisms addressing migration-related issues, actively seeking out synergies and avoiding duplication;

• Establish and provide support to the capacity building mechanism, as outlined in the GCM.

• Engage with external partners, including migrants, civil society, migrant and diaspora organizations, faith-based organizations, local authorities and communities, the private sector, employers' and workers' organizations, trade unions, parliamentarians, National Human Rights Institutions, the International Red Cross and Red Crescent Movement, academia, the media and other relevant stakeholders at global, regional and national levels;

• Report to the Secretary-General as required on the implementation of the GCM, the activities of the UN system in this regard, as well as the functioning of the institutional arrangements, and support the Secretary-General's biennial reporting to the General Assembly, as called for in the GCM.

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166   This text reflects the Terms of Reference on the UN Network on Migration, available online at https://migrationnetwork.un.org/network-terms-of-reference
167   The objectives of the UN Network on Migration as stated here are drawn from the Executive Committee decision of 23 May 2018 and the Global Compact for Safe, Orderly and Regular Migration (GCM).

In its work, the Network is guided by the following principles:

- Accountability
- Human rights-based, gender-responsive and child-sensitive approach:
- Coherence
- Unity of purpose
- Efficiency
- Inclusivity
- Results-oriented
- Agility.