

### Migration Factsheet No. 6 – The impact of COVID-19 on migrants

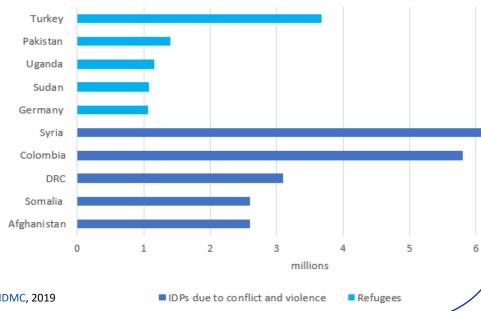
Synthesis analysis drawing on IOM's World Migration Report series

## COVID-19 and the risk of exacerbating existing vulnerabilities

Some of the 272 million international migrants worldwide are more vulnerable than others because of personal, social, situational and structural factors. Their vulnerabilities may be exacerbated in crisis situations, as it is the case with the COVID-19 pandemic.

Persons displaced internally and across borders are particularly at risk. The majority of the 25.9 million refugees and 41.3 internally displaced persons are in developing countries that are starting to be affected by the pandemic.

Top 5 countries with the largest number of refugees and persons internally displaced by conflict and violence in 2018



Data from UNHCR, 2019 and IDMC, 2019



# The impact on mobility and migration

With measures introduced by governments to 'flatten the curve' of infections, the COVID-19 pandemic is already greatly impacting mobility and migration. Travel restrictions are passed to contain the virus, including by prohibiting entry of residents from other countries, and some countries have closed their borders entirely. Labour migration has been temporarily suspended in some countries while, in others, migration processing and assistance to asylum seekers are being slowed down.

These mobility restrictions and concerns over exposing refugees to the novel Coronavirus have forced the International Organization for Migration and the United High Commissioner for Refugees to temporarily suspend refugees' resettlement travels.

## Migrants' health

While some migrants may be healthier than their receiving community, others have health vulnerabilities which can be due to:

- ⇒ socioeconomic status;
- ⇒ being in crowded or otherwise suboptimal environments;
- ⇒ restriction to eligibility or access to services, including heath services, for instance due to migration status; or
- ⇒ cultural-linguistic barriers or health information.

The lack of or inappropriate health insurance, often coupled to insufficient financial resources, may negatively impact migrants' ability to take preventive measures against COVID-19 and to receive medical care if contaminated. While many support and care services provided by civil society organizations had to be closed with countries' lockdown, irregular migrants can find it more difficult to access care, as outside activity needs to be registered with authorities or they may be reluctant to enter medical facilities for fear of being reported if no appropriate firewalls exist regarding data sharing with the immigration and law enforcement authorities.

Crowded living environments may also affect the implementation of preventive measures such as social distancing. This is for instance the case for irregular migrants in administrative detention, refugees in camps or migrant workers in highly populated migrant labour camps.

While it is critical for migrants to receive communications on COVID-19 in a language they understand, calls are more generally being made for inclusive COVID-19 responses to ensure migrants are incorporated into public health strategies and planning.

## Stigmatization and exclusion

Fake news, misinformation and politicization of issues tend to be pervasive in times of uncertainty and anxiety. However, stigmatizing and excluding migrants carries the risk of higher contamination when migrants, for instance, hide potential symptoms instead of seeking treatment. It can also entail longer-term consequences for migrants' integration and social cohesion.

The loss of control being felt across communities worldwide due to border closures, restrictions on movement or feelings of social isolation provides insights into the daily struggles faced by displaced persons around the world every day. It provides grounds for empathy and solidarity.



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