

COVID-19 and Women Migrant Workers - Challenges and Perspectives

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Abstract: States' actions during the pandemic have caused extensive unintended consequences and aggravated living and safety conditions of certain vulnerable groups of people. Women migrant workers are one of the casualties of unsystematic and inconsistent restrictive measures, which aim to prevent the spread of the virus. Countries have not yet analyzed the shortcomings of their decisions that negatively affected those groups, which already face many other social and economic problems. The article discusses how states' restrictive measures to protect against COVID-19 may harm women migrant workers.

The beginning of the second decade of the 21st century has turned out to be filled with new concerns for the world. The pandemic that erupted in 2019 sparked a global crisis that will take several years to resolve. States failed to timely and efficiently respond to the grand scale of global challenges that COVID-19 brought to the world. Existing struggles were exacerbated. Problems became visible that had not been identified before the pandemic, under normal circumstances. The new reality has also created new types of challenges that pose a particular threat to the most vulnerable groups of the population. The current situation is unique in many respects, including in the context of human rights: the scale and complexity of restrictive measures imposed by states, the inconsistent and unsystematic nature of *force majeure* decisions and possible legal shortcomings, and an inadequate understanding of the effect of the measures taken. Given the rapid pace of COVID-19's spread, as well as global, economic, social and political challenges, the impact of protective measures taken by countries has not yet been properly assessed. However, one trend has already emerged - countries, while concentrating on protecting their own citizens, have given a backseat to the needs of foreign nationals or stateless persons in their territory. A particularly wide range of problems has emerged in the context of migrant women workers, which requires a proactive response from both the authorities of the host countries and diplomatic missions. Taking into considerations that [many women of Georgia migrate for labor](#), the issue is also relevant in terms of effectively protecting the country's interests.

In 2019, before the pandemic, half of the 272 million migrants in the world were women,¹ and approximately 66.6 million were labor migrants.² In many countries, a large proportion of those employed in the healthcare and hospitality sectors are migrant women workers.³ Medical workers are one of the highest risk groups on the front line of the fight against infection, as evidenced by their high rate of both infections and deaths from the virus.⁴ Employees in what have come to be called “front line” sectors, including the service sector, are at the highest risk of infection, the

¹ “International Migration Report 2017: Highlights”, United Nations publication, Sales No. E.18.XIII.4, available at

<https://webcache.googleusercontent.com/search?q=cacher:leTquqB6iwJ:https://www.un.org/en/development/desa/population/migration/publications/migrationreport/docs/MigrationReport2017_Highlights.pdf+&cd=1&hl=ka&ct=clnk&gl=ge> last visited December 28, 2020.

² “Labor Migration, Migration Data Portal”, available at <<https://migrationdataportal.org/themes/labour-migration>> last visited December 29, 2020.

³ Sykes Wendy, et al, “Coming clean: the experience of cleaning operatives. Equality and Human Rights Commission, Manchester”, 2014, available at <www.equalityhumanrights.com/sites/default/files/research-report-95-coming-clean-the-experience-of-cleaning-operatives.pdf> last visited December 28, 2020.

⁴ “COVID-19 has infected some 570,000 health workers and killed 2,500 in the Americas”, PAHO, available at <<https://www.paho.org/en/news/2-9-2020-covid-19-has-infected-some-570000-health-workers-and-killed-2500-americas-paho>> last visited December 16, 2020; “Amnesty analysis reveals over 7,000 health workers have died from COVID-19”, Amnesty International, available at <<https://www.amnesty.org/en/latest/news/2020/09/amnesty-analysis-7000-health-workers-have-died-from-covid19/>> last visited December 30, 2020; “Over 10 000 health workers in Africa infected with COVID-19”, WHO, available at <<https://www.afro.who.int/news/over-10-000-health-workers-africa-infected-covid-19>> last visited December 30, 2020

majority of which are women.⁵ The high contribution of migrant women workers to the global economy, especially through remittances, is not new.⁶ Unfortunately, the pandemic has had a significant impact on their jobs and poses a threat not only to the global economy but also to the financial independence of this group of women in their host countries. Financial independence is an important factor in ensuring personal safety, especially during a pandemic when their vulnerability to a variety of threats may increase. The situation can be aggravated if the legal status of a labor migrant changes under the conditions of a closed border and their shift to the category of an irregular migrant.

In the context of possible increased threats of violence, the vulnerable situation of migrant women working in a household setting, such as home healthcare, is noteworthy, especially under disease-control regulations restricting movement, when police enforcement mechanisms are weakened, and the administrative resources of the state are concentrated in other directions. Employment in households was marginalized even before the pandemic and is considered to be the least protected labor sector. The problems of this category of migrant women are tied to the labor legislation of many countries, which does not consider this group of people to be formally or legally employed.⁷ As a result, there is a danger that this category will be left without compensation in the case of lost labor. In general, quarantine measures and restrictions on freedom of movement (lockdowns, curfews), significantly increase the risk of violence against migrant women workers. The situation is further complicated if a migrant woman worker is in irregular migration, as restrictions on movement pose a vital threat to this category of people. Special attention should be made to the detrimental practice of movement authorization, which involves applying to a state or local authority for a movement permit and sharing certain personal data. Migrant women workers in an

⁵ Boniol Mathieu, et al, “Gender equity in the health workforce: analysis of 104 countries, Healthforce Working paper 1”, March 2019, available at <<https://apps.who.int/iris/bitstream/handle/10665/311314/WHO-HIS-HWF-Gender-WP1-2019.1-eng.pdf?sequence=1&isAllowed=y>> last visited December 29, 2020; “Protecting Migrant Workers During the COVID-19 Pandemic: Recommendations for policy-makers and constituents”, April 2020, ILO, Geneva; “COVID-19: Women front and centre”, UN Women, available at <<https://www.unwomen.org/en/news/stories/2020/3/statement-ed-phumzile-covid-19-women-front-and-centre>> last visited December 30, 2020.

⁶ “Women and Financial Inclusion: Policy Options and Strategies for Remittance Service Providers” Global Migration Group, 2017; “Migration, Remittances and Financial Inclusion: Challenges and Opportunities for Women’s Economic Empowerment”, UN Women 2017, available at <http://webcache.googleusercontent.com/search?q=cache:wNOsMTVbYWYJ:globalmigrationgroup.org/system/files/GMG_Report_Remittances_and_Financial_Inclusion_updated_27_July.pdf+&cd=2&hl=ka&ct=clnk&gl=ge> last visited December 30, 2020; “Western Union Pays Tribute to Global Women Work-Force as World Economic Change Agents and Calls for Greater Recognition and Integration”, 2016, available at <<https://ir.westernunion.com/news/archived-press-releases/press-release-details/2016/Western-Union-Pays-Tribute-to-Global-Women-Work-Force-as-World-Economic-Change-Agents-and-Calls-for-Greater-Recognition-and-Integration/default.aspx>> last visited December 30, 2020.

⁷ “Protecting Migrant Workers During the COVID-19 Pandemic: Recommendations for policy-makers and constituents”, April 2020, ILO, Geneva; “COVID-19: Women front and centre”, UN Women, available at <<https://www.unwomen.org/en/news/stories/2020/3/statement-ed-phumzile-covid-19-women-front-and-centre>> last visited December 30, 2020.

irregular situation generally avoid all possible contact with public institutions. Imposing such a requirement puts this category of people at risk of being unable to access health services or purchase essential products.

Another key issue is equal access to public health services. It is important that migrant women workers are provided with equal access to resources, including during the vaccination period. Given the peculiarities of the vaccine distribution process, it is critical that countries do not allow discriminatory practices in selecting and prioritizing beneficiaries and do not use citizenship as a criterion. The International Organization for Migration recommends that states make social benefit packages available to migrant workers, including health services. Additionally, attention should be paid to the safety of working and living conditions, including intensive inspections, to be able to identify specific problems of migrant women workers at an early stage.

Given the existing threats, it is important that states restrict freedom of movement only in times of extreme need. Proportionality and effectiveness of the chosen decision should be properly assessed when using any such measures. Countries should not use authorization methods that require personal data collection and reporting if large scale restrictions on movement are imposed. Disease control regulations should be flexible and allow for free movement at certain times of the day. To effectively vaccinate migrant women workers in irregular migration, as well as to ensure their unimpeded access to basic medical services, it is advisable to involve the diplomatic missions of national states, the UNHCR, local offices of the International Committee of the Red Cross and Red Crescent, and other organizations working with a humanitarian mandate in the process. Individuals in irregular migration will likely have more confidence in the actors listed than in host country governments.

The COVID-19 pandemic is a terrible crisis independently, but negative outcomes are exacerbated by irrational responses from governments. While the dynamics of the spread of the virus and the response of countries to the challenges posed are still rapidly changing, diplomatic missions must act as a lifeline for their citizens. They should identify vulnerable groups and the problems created for them during the pandemic, considering the conditions of each specific host country. Subsequent action guidelines and support tools should be developed to help mitigate identified challenges. The current situation also presents an opportunity to strengthen relations between citizens who have emigrated and their state of origin. Due to the extraordinary situation, it would be unreasonable to rely solely on the rationality of the host state, especially as there are many examples worldwide of irrational decisions made by authorities. Based on either a constitutional obligation or simply an ethical responsibility to protect citizens, it is a matter of dignity for each country to be able to effectively support its citizens outside its own borders.