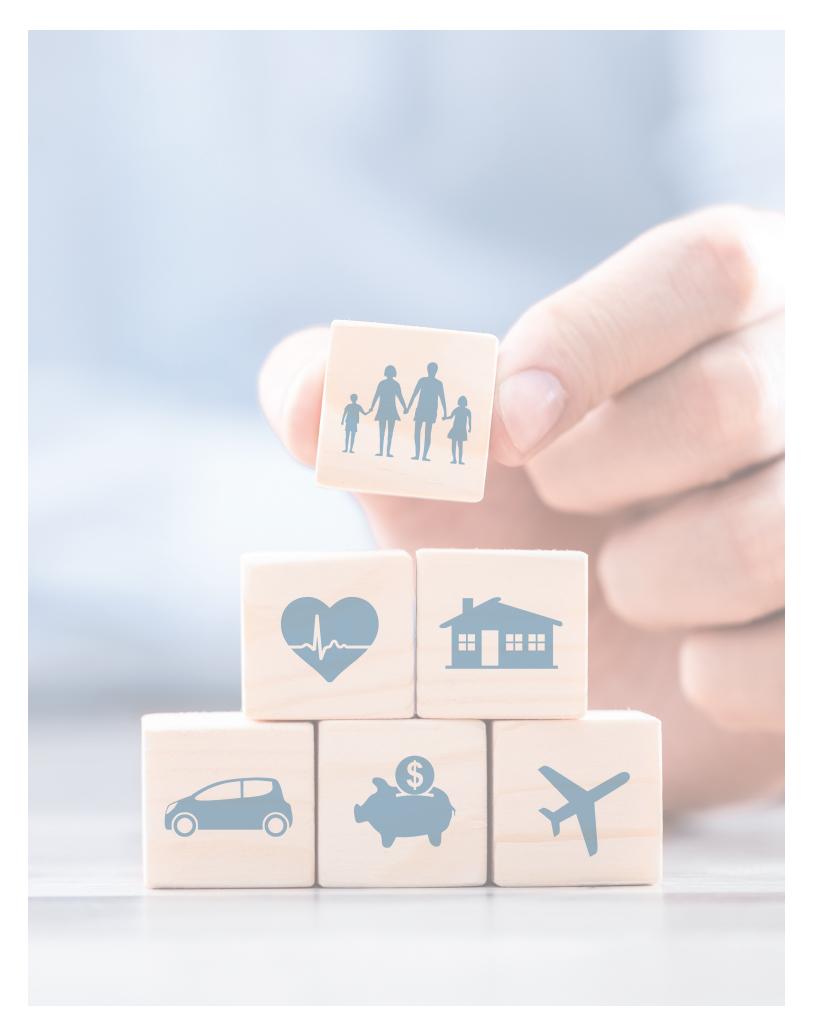# 3. Building forward better for migrants and refugees in the Arab region: COVID-19 consequences

3. Building forward better for migrants and refugees in the Arab region:
COVID-19 consequences

Summary statement

The impact and effects of the COVID-19 pandemic have proven to be far-reaching, with consequences beyond the ensuing health crisis. In addition to the tragic loss of human lives, it has caused or aggravated economic crises and social disruptions globally, and exacerbated political unrest in some countries. Many migrants and refugees have been at the forefront of the pandemic, providing essential services including health care, agriculture and food production, and ensuring the continuity of supply chains across the region. They have also been among the population groups most impacted by the pandemic. The COVID-19 crisis has magnified the negative impact of pre-existing structural barriers on migrants and refugees, and increased their vulnerability as a result of severe economic challenges, increased food insecurity, difficulty accessing water and sanitation facilities, limited access to affordable health and education services, increased challenges to enter formal job markets, increased exploitation and gendered violence, mobility restrictions, heightened xenophobia, and limited connectivity and communication. Building forward better for migrants and refugees in the Arab region requires serious political will to mainstream migrant and refugee issues and concerns in policies across different sectors. The policy recommendations offered in the present chapter are derived from lessons learned during the pandemic, and offer a roadmap for protecting and empowering migrants and refugees to become active agents of development.

Background

Migrants and refugees were among the population groups most impacted by the pandemic, with many left stranded in host countries, suffering from loss of income and housing and from malnutrition, and facing difficulties in accessing health services.

The pandemic also heightened the pre-existing vulnerabilities of specific population groups, including migrants and refugees, and highlighted the urgent need to address the structural causes underlying those vulnerabilities, including non-inclusive social protection and health-care systems, limited regular migration pathways, labour governance frameworks that fail to protect their rights, social exclusion and xenophobia.

Nonetheless, the pandemic also showcased the resilience of migrant workers and their contribution to their communities as they continued to serve as frontline workers, providing essential services, including health care, cleaning, domestic work, agriculture and food production, and ensuring the continuity of supply chains and other essential businesses despite the difficult conditions imposed by the pandemic.

The unprecedented shock created by the pandemic also provided a learning opportunity on how to improve protection for the most vulnerable. In the words of Secretary-General of the United Nations, Antonio Guterres: "COVID-19 is a human tragedy. It has also created a generational opportunity. An opportunity to build back a more equal and sustainable world".[288] The pandemic also highlighted the importance of accelerating efforts to achieve the SDGs, the objectives of the Global Compact for Migration, and the Global Compact for Refugees as key frameworks that guide the efforts of member States to better protect and empower the most vulnerable members of our communities, notably migrants and refugees.

Several Arab countries have already made important strides in reforming their policies, as highlighted in the previous chapter of the present report. Nonetheless, several areas require attention and enhanced efforts to empower and protect migrants and refugees. Rooted in global governance frameworks and the inherent human rights of migrants and refugees, the present chapter aims to reflect on the lessons learned from the pandemic to explore means to build forward better for migrants and refugees, and enhance their capacity to resist similar shocks and crises. To this end, the chapter examines some of the structural challenges experienced by migrant workers and refugees prior to and during the pandemic, and provides a set of actionable and concrete policy recommendations to guide the efforts of Arab Governments.

Chapter 3 moves beyond a single-lens approach focused on statistical analyses and victimization by examining migrants' and refugees' experiences and challenges, while also seeking to illuminate how they are responding to the pandemic. More concretely, it asks what policies can facilitate migrant and refugee resilience in the Arab region, so as to enable better responses to exogenous shocks such as the current pandemic and future adversity. The present chapter addresses the following empirical questions: What are the structural barriers that influence migrant workers' and refugees' experiences during the pandemic in the Arab region? Which policies should be recommended to cater for the various protection and other needs of migrant workers and refugee communities, so as to build their resilience during times of crises such as the current pandemic?

The analysis recognizes the varied experiences of migrants and refugees, and assesses the structural barriers they face based on their gender, age, race, ethnicity, language, nationality, socioeconomic status, education, employment, specialization, religious backgrounds, and other power relations. In particular, the present chapter avoids homogenizing the experiences of migrants and refugees, given the specific circumstances of refugees and the regulatory frameworks governing their affairs, and where possible provides special analysis relevant to refugees.

Chapter 3 adopts a gender-sensitive analysis that examines the distinct and disproportionate consequences of the pandemic for migrants and refugees. The key insight in assessing gender and resilience in the context of the pandemic rests not only on the identification of the gendered impact of the pandemic on power relations, but also on the recognition that this form of migrant or refugee experience provides a significant opportunity for examining the structural inequalities between women and men. Furthermore, a gendered approach allows the analysis of challenges to realizing gender equality under condition of poverty and socioeconomic, health and security perils.

A. Information highlights

The COVID-19 pandemic provided an opportunity to acknowledge the vital role of migrants and refugees in the provision of essential services in their host communities but also magnified the negative impact of pre-existing structural barriers on migrants and refugees.

Low-skilled migrant workers, those in irregular situations, women migrants and refugees and those living in humanitarian contexts are among the most vulnerable.

The challenges posed by pandemic include, but are not limited to, economic hardship, food insecurity, health

Low-skilled Migrant **workers** and **women** migrants and refugees are among the **most vulnerable**

barriers, education challenges, gender consequences, mobility restrictions, and limited access to communication and connectivity.

The region witnessed increased returns of migrants owing to job losses, changing working modalities, and repatriation efforts by States.

Building forward better for migrants and refugees requires addressing structural barriers, including non-inclusive social protection and health-care systems, limited regular migration pathways, labour governance frameworks that fail to protect their rights, social exclusion and xenophobia.

Increased returns of migrants:
- job losses
- working modalities
- repatriation efforts

B. Methodology

The present chapter utilizes a mixed-method approach to secondary and primary data collection. A comprehensive desk research provided a wealth of secondary data, including data from supplementary scholarly peer-reviewed publications, various reports prepared by the United Nations and other regional and international non-governmental organizations, and additional reliable data available online. The desk research was useful in filling information gaps, identifying trends based on the emerging body of published work, and drawing meaningful conclusions.

In addition, primary data collected through in-depth interviews served to highlight the voices and experiences of both migrants and refugees residing in the Arab region during the COVID-19 pandemic.[289] Interview participants comprised migrants and refugees from various countries of origin, who resided in the different Arab subregions. To ensure utmost transparency and protect the anonymity of the interviewees, pseudonym names have been used in the present chapter to refer to their testimonies.

Several limitations are acknowledged, however. Firstly, given the personal, professional and contextual diversity of the migrants and refugees within the 22 countries of the Arab region, and the difficulties conducting face-to-face interviews owing to travel restrictions and safety concerns during the pandemic, a limitation of the present chapter is the small size and non-representativeness of its sample. Furthermore, the interviewees did not include migrants in irregular situations. For more details, please refer to the methodology note set out in annex 7 to the present report.

C. Structural barriers impacting migrants and refugees

There are multiple structural barriers that impact migrants and refugees in the Arab region, albeit differently. These include the labour governance frameworks adopted in some countries, the distinct experiences of low-skilled migrants versus high skilled migrants, the complex experiences of refugees in the region, the gender implications of migration, and the implementation of international and national policies.

1. Labour governance frameworks

Labour migration continues to be a dominant trend in the Arab region, as highlighted in chapter 1.

Oftentimes, migration to the Arab region is motivated by migrants' desire to enhance their lives and financially support their families back home. Yet migrant workers face several obstacles as a result of the labour governance frameworks in many Arab countries. For example, existing scholarly and policy research indicates that the *kafala* system may allow government agencies, recruitment companies, and private sponsors to impose considerable restrictions on migrant workers under their sponsorship.[290] The *kafala* system regulates the recruitment and oversight of migrant workers, strictly controlling migrant entry, residency and departure processes. It gives the sponsor responsibility and authority over workers' living, accommodation and working conditions and their movement.[291]

> "
> I have been lucky during the pandemic. I am surrounded by a great support network that has helped me find a job and helped me when needed. "

(Matias, a 24-year old male, Colombian expatriate working in the GCC subregion, May 2021).

Consequently, the kafala system enables migrant workers to enter the region legally with a work permit as temporary workers, while potentially undermining their agency and resilience. In recent years, most Arab countries with these systems have introduced reforms to better protect migrants' rights. Unfortunately, many of these reforms exclude domestic work, which employs large numbers of migrant workers, who continue to be among the most vulnerable migrant groups.

Despite the promising policy reforms to labour migration governance frameworks across the region, and the commitment to several global frameworks, notably the Global Compact on Migration and international human rights and labour standards that protect the rights of migrant workers, a significant gap remains between stipulations in international conventions and their application at the national level. Barriers include limited enforcement mechanisms, strained resources, limited capacity, weak efforts to ensure migrants' social inclusion, weak public awareness, and the prevalence of xenophobia and racism – all factors that negatively impact migrant inclusion in their host societies.

2. Vulnerability of low-skilled workers

Migrant workers' experiences are not homogeneous, even when working under the same labour governance frameworks. There are clear variations between the experiences of low-skilled and high-skilled migrant workers. High-skilled migrant workers often experience relative privilege compared with lower skilled migrant workers. This privilege is often based on factors such as levels of income, education, language, nationality or social status, and translates into flexible employment contracts/agreements, freedom of movement, competitive work packages, comfortable accommodation, and generous family benefits for education and health care.

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> "
> I came from India looking for better opportunities in the region because we hear about the good pay and better work opportunities… but what I did not anticipate was that my sponsor would take away my passport and all of my documentation papers and would have control of my movements and travel arrangements…this makes it very hard and stressful to not be able to travel back home to visit my wife, kids and family. Most of the time I feel helpless and demoralized here. "

(Haroon, Indian male, 29 years, working in the construction sector in the GCC subregion, personal communication, December 2020).

The majority of low-skilled migrant workers in the Arab region, including women migrants, are often employed on a temporary basis or in the informal sector, and therefore do not have job security and in many cases are not included in social protection platforms, which increases their vulnerability, particularly to exogenous shocks such as political instability, economic crises or a pandemic. Most have limited savings and contingency measures to resort to, and limited access to social protection mechanisms. Their migration status also plays a crucial role in their access to basic services, with migrants in irregular situations encountering various challenges in their interactions with public services. In addition, migrants' housing conditions are often characterized by overcrowding and precarity, with inadequate sanitary facilities. During the pandemic, this translated into a lack of access to food and social services, a lack of access to sustainable health services, limited access to vaccination and social distancing measures, xenophobia, racism and discrimination in their work and living spaces.

3. Protracted conflict and displacement

Countries across the Arab region continue to witness protracted conflict and displacement, which has resulted in increasing numbers of refugees. While both migrants and refugees in the Arab region experience complex disadvantages, the experiences of refugees, who are specifically defined and protected under international law, are often very distinct. For instance, refugees flee their country of origin for various reasons, including persecution and immediate threats to their lives, and are unable to return to their home countries.

Despite the efforts of host countries in the region, the hosting of many refugees in some Arab countries continues to pose a challenge given the critical need of refugees for urgent protection, shelter, food, health services and socioeconomic needs.[292] The pandemic[293] further undermined refugees' attempts to find durable solutions to their plight, including through voluntary repatriation, local inclusion, or resettlement.[294] During the pandemic, the Secretary-General of the United Nations has repeatedly

appealed to countries to adhere to a global ceasefire while the world fights the pandemic. Nevertheless, UNHCR estimates that global forced displacement[295] surpassed 82.4 million in 2020, while militarized conflicts and persecution persisted within the Arab region, including in the State of Palestine, Somalia, the Sudan, the Syrian Arab Republic and Yemen.[296]

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> " My family and I thought that the conflict would last a few months. I worked as a driver picking up and dropping off passengers between here (Lebanon) and Syria. We were happy but the war destroyed everything, and we had to leave. The current economic difficulties in Lebanon that were worsened by the Beirut Port blast have impoverished me and my family. "

(Habib, Syrian male, 50 years, working as a janitor in Lebanon, personal communication, May 2021).

The pandemic has intensified the vulnerability of refugees and asylum seekers in the Arab region by impacting their access to humanitarian assistance, while limiting pathways to exert their agency and seek durable solutions by pursuing voluntary repatriation, engaging in inclusion efforts, and reduced access to resettlement for those with compelling protection needs.

4. Gender considerations of migration and forced displacement

Experiences of women and men in migration and forced displacement are gendered and unequal. The inequalities that migrant and refugee women and girls experience often derive from traditional perceptions

of gender roles and relationships. Stereotypical perceptions about gendered identities, gendered roles and relationships are created and sustained by individuals and social and cultural institutions, including households, local communities, and national and international actors. In the Arab region, male migrants are predominantly employed in male-dominated sectors, such as construction, security-guarding, agriculture and food production, hospitality and transportation. Women typically work in health, education, non-governmental organizations and the domestic sector. In the latter, they are more likely to be bound by stereotypical notions of gender roles, which largely confine them to household and service work as cleaners, cooks, nannies and elderly carers. Furthermore, female domestic workers are often at risk of heightened abuse, including wage discrimination, sexual harassment, sexual exploitation and gender-based violence, which is attributed in part to the lack of standard protections against gender-based and domestic violence in the region. For example, most Arab countries maintain provisions that allow a reduced sentence for sex offenders who marry their victims, and provide clemency for perpetrators in cases of rape and honour crimes.[297]

Despite policy initiatives taken by some Arab countries, migrant domestic workers continue to be vulnerable.[298] To date, no Arab country has ratified the ILO Domestic Workers Convention, 2011 (No. 189), or the Violence and Harassment Convention, 2019 (No. 190).[299] The Domestic

Workers Convention puts in place new standards within the informal employment sector, which is often the site of substantial exploitation of migrant workers as noted by some of the research participants during their interviews. All Arab States have signed and ratified the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW), with Tunisia being the only country ratifying without any reservations.

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" Many of the domestic workers here experience aggression from family member and also sometimes from the kids we care for, but this kind of violence against us is rarely addressed or taken seriously. A lot of the workers I know are afraid to speak about these incidences. "

(Diwa, female, 30 years, working as domestic worker in the GCC subregion, personal communication, March 2021).

D. Assessing migrants' and refugees' vulnerabilities during the pandemic

In various ways, the pandemic has compounded the vulnerabilities and barriers of migrants and refugees. A significant body of evidence outlines the unique ways migrants' and refugees' vulnerabilities have been exacerbated by the pandemic, including the following:

• Migrants and refugees experiencing xenophobic attacks owing to a perceived link between their presence and the virus.[300]

• Migrants and refugees being increasingly exposed to sexual and gender-based violence during lockdowns and held in detention.[301]

• Migrants and refugees having limited access to essential items and services owing to a lack of availability and mobility restrictions.

• Migrants being stranded owing to restrictions on mobility imposed by countries worldwide.[302]

• Migrants being deported and forcefully returned to their countries of origin.

• IDPs and refugees living in overpopulated camps and camp-like settings being vulnerable to the spread of the virus due to overcrowding.[303]

At the same time, the pandemic has reaffirmed the importance of migrant workers' contributions in achieving socioeconomic dividends in host countries and countries of origin. Migrant workers have been at the forefront of the pandemic response, providing needed services including health care, agriculture and food production, and ensuring the continuity of supply chains and essential businesses across the region.[304]

1. Economic challenges during the pandemic

The pandemic has had a devastating impact on the economies of countries across the Arab region. This was compounded by the continuing decline in oil prices, which lost the region nearly $11 billion in net oil revenues from January to mid-March 2020, while businesses in the region lost a massive $420 billion in market capital in the same period. ESCWA estimated that the region lost at least 42 billion dollars of gross domestic product in 2020.[305] ILO estimated that the region lost 9 per cent of all work hours in 2020 owing to the pandemic, equivalent to 5 million full time jobs.[306] In addition, studies highlighted that sectors most affected by the crisis in Arab countries were those with high shares of migrant workers, namely construction; other service activities, including domestic work; accommodation and food services; and wholesale and retail trade.[307]

The pandemic put many migrants and refugees in situations of economic hardship, with numerous individuals losing their source of income. In the Sudan, for example, over 20 per cent of respondents interviewed in a survey conducted by IOM declared that they had lost their source of income as a result of the pandemic.[308] Similarly, in Libya, more than 60 per cent of migrants and IDPs surveyed by IOM declared that although they were still employed, the pandemic made it more difficult for them to earn a living. Key challenges included sources of income (cafés, restaurants, barber shops) being closed (15 per cent); and their employer not paying salaries (20 per cent).[309] Refugees

are equally affected by the negative economic impact of the pandemic, with the poverty rates of refugees in Iraqi Kurdistan, Jordan and Lebanon soaring following the outbreak of the pandemic.[310] In Lebanon, 80 per cent of Palestinian refugees had either lost their income or had their salary reduced in May 2020.[311] In many cases, the savings of populations on the move have been wiped out by the crisis, and they have been forced to resort to negative coping strategies, such as taking children out of school or practising survival sex in some cases.

> "
> Before I could make a little profit of 400 dirhams ($45) per month, now nothing. I have finished all my savings.
> "
>
> *(Bisrat, an Eritrean migrant selling food products in Morocco, personal communication, March 2021).*

While the wellbeing of populations across the region has been affected by the pandemic, the economic vulnerability of migrants, particularly migrants in an irregular situation, and refugees, in most Arab countries has worsened. One reason for this is that migrants and refugees are often excluded from national social protection mechanisms.[312] While countries' pandemic relief packages have totalled more than $102 billion, with various disparities between subregions, refugees and migrants are not typically included in State support mechanisms, such as employment and cash assistance for the unemployed. Increasing percentages of bailout funds sent to small and medium enterprises in countries such as Saudi Arabia have no clear correlation to supporting these groups.[313]

In addition to exacerbating challenges for migrants and refugees, the pandemic has also resulted in downstream economic effects on countries within the region that rely on remittances from the Arab region, such as Egypt, Lebanon, Libya and the Sudan,[314] and beyond such as Ghana and Nigeria.[315] Lockdowns across the MENA region shut down financial transfer businesses. Access

to everyday financial systems is critical to migrants and the families they support with remittances. While online and low-cost money transfer systems enable migrants to send money, non-citizens are often left out of interest-earning savings and other financial schemes that can help reduce the impact of adverse economic circumstances. To strengthen resilience and financial independence, countries such as Jordan and Oman declared transfer providers as essential businesses,[316] and Qatar created a public education campaign about online transfer services.[317]

The economic hardships endured by migrants and refugees in the region have had a domino effect, resulting in a drop in their ability to send remittances to their families in their home countries, which makes it harder for their families to adapt to the economic challenges caused by COVID-19. The pandemic also affected the ability of some migrants and refugees living in Arab LDCs to receive money from abroad. This domino effect pushed many migrants and their families in home countries into destitution.[318] Despite this, remittance flows from and to the Arab region have resumed, slowly reaching pre-pandemic levels.[319]

2. Insecurity in food and access to water and sanitation

Access to clean water is a long-standing issue in the Arab region. In 2019, almost 362 million people (about 86 per cent of the region's population) lived on less than 1,000 cubic meters per person per year. Moreover, 18 of the 22 Arab countries were water scarce.[320] A strong body of evidence suggests that water became less accessible for migrants and refugees after the onset of the pandemic. In Yemen, a survey conducted by the Norwegian Refugee Council indicated that 25 per cent of IDPs interviewed stated that their ability to access water had been negatively affected by the pandemic. They said that the main reason for this was the increase in the cost of water since the outbreak of COVID-19.[321] At the same time, over

74 million people lacked access to handwashing facilities, and 87 million did not have improved water sources in their homes.[322] International organizations provided emergency support and humanitarian services in countries across the region during the pandemic, but long-term resilience still needs to be strengthened.[323]

Most Arab countries are food importers.[324] Border closures and movement restrictions have disrupted supply chains, causing bottlenecks in procuring basic goods such as food items, and increasing the prices of several items.

The pandemic, ongoing conflicts, economic crises and natural disasters (especially floods) have led to sharp increases in food prices across the Arab region. The impact on the food security of migrants and refugees and their families has been devastating. Movement restrictions and curfews have already led to sharp increases in food prices that, combined with reduced income, resulted in significantly reduced purchasing power. Countries in conflict or in a humanitarian context have suffered a heavier impact from the pandemic. For example, the cost of a minimum expenditure basket that would meet a family's basic needs, including food items, was 19.2 per cent more expensive in August than in March 2020 in Libya.[325] In Jordan, 64 per cent of Palestine refugees from the Syrian Arab Republic surveyed by UNRWA reported experiencing food insecurity,[326] and 86 per cent reported being in debt. In the Syrian Arab Republic, a staggering 99 per cent of Palestine refugee households surveyed by UNRWA in July 2020 reported that they struggled to buy food, and 80 per cent had reduced their daily meals.[327]

With the expected trajectory of COVID-19, migrants, particularly migrant workers in an irregular situation, will be increasingly unable to secure the income required to meet their basic needs, thus raising the risk of extreme food coping strategies and malnutrition. For example, WFP projects that in 79 countries where it operates, at least 32.9 million people could be at risk of facing acute food insecurity owing to the loss of remittances.[328]

3. Health barriers during the pandemic

Identifying the pandemic's characteristics in the Arab region, while recognizing the caveats of cultural contexts and diversity, is the first step to determining what constitutes resilience for migrants and refugees within the region and its countries. Eighteen months into the pandemic, the region is a microcosm of global trends, yet disproportionately affected by the COVID-19 crisis. The research findings show that the pandemic's prevalence, effects and responses vary widely between subregions and countries. While wealthier GCC countries have fared better than countries in the Maghreb and Mashreq, Arab developing countries have the weakest performance on the United Nations Informed COVID-19 Risk Index.[329] However, these general trends mask vast disparities within countries and subregions in confirmed cases and fatalities; and in access to vaccination, the ability to socially distance, especially in camp or collective shelter settings, and the means to maintain hygiene and obtain health services.

Before the pandemic, universal access to health-care systems in the Arab region posed serious challenges for refugees, migrants and their families. Moreover, in many countries, it remains unclear who is responsible for providing health coverage to migrants and refugees (the State, employers, or themselves). As demonstrated in chapter 2, many Arab countries have adopted policies to ensure that migrants and refugees, and in some cases migrants in an irregular situation, have access to health services during the pandemic. In countries like Morocco, existing policy frameworks, such as the national strategy on migration and asylum, proved critical during the pandemic, given that they provide for the integration of migrants and refugees, including by granting them access to public services such as education and health.

Despite these efforts, medical service access and affordability have remained a primary concern for large numbers of migrants and refugees, particularly in view of loss of income that has reduced their ability to spend out-of-pocket on services, medicines, or transport to medical facilities.[330] In addition, a few countries have prioritized emergency and life-saving medical care owing to unprecedented pressure on medical services, which has resulted in disruptions or interruptions to many regular services, such as child health-care services, maternal care for pregnant women, services relating to chronic illnesses, and sexual and reproductive health care, including family planning and HIV prevention.

For migrants and refugees in countries in a humanitarian context, this challenge is exponentially magnified, given that hospitals, medical centres, and health-care systems have suffered serious damages, staff loss, and capability erosion due to ongoing conflicts.

Low skilled migrant workers living in labour camps, and refugees living in refugee camps, are also at a particular risk due to their living conditions, which are often characterized by overpopulation, inability to adhere to social distancing requirements, and limited access to sanitation and hygiene facilities.

Access to psychological medical care poses another challenge, given that many migrants and refugees consider the pandemic's psychological toll to be equally severe to physical health risks or food insecurity, as do members of host communities.

Understanding pandemic-related nuances across the Arab region and within individual countries is the first step to understanding how to better address the health needs of migrants and refugees, including mental health and psychosocial support. While strengthening existing health-care infrastructure is critical to improving migrant and refugee health and wellbeing, and by extension the health of all people in the Arab region, developing new targeted programmes

that respond to the lessons learned from COVID-19 is necessary to guarantee that health-care institutions are resilient and able to meet the growing needs of the population, including the pressing needs of the migrant and refugee population.

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" Psychological distress was the most difficult part of this year. COVID-induced isolation had a negative impact on the community, because the community is suffering from a lack of awareness and uncertainty, and everyone is in a state of fear of the other. There are no social events and celebrations, all of which has increased psychological pressures and barriers between people. "

(Diric, a Somalian refugee in Egypt, 35 years old, personal communication, March 2021).

4. Access to education challenges during the pandemic

In 2020, it was estimated that around 100 million students were out of school in the Arab region. The distance and e-learning modalities adopted in many schools raise various challenges for teachers, students and their parents, especially since only 51.6 per cent of households in non-GCC Arab countries have Internet access.[331]

Education access was a primary concern for migrants and refugees during the pandemic. The new learning modality posed several challenges. It increased costs associated with

securing proper ICT equipment and reliable and adequate Internet access, which added to the financial difficulties of migrant and refugee families. Some families' food insecurities intensified owing to these additional financial constraints.

Education access also resulted in increased stressors on both migrant and refugee parents and students. Anecdotal evidence suggests that parents of migrant and refugee children may be less likely to have the abilities to assist their children with their studies, as some felt they were ill-equipped to support their children owing to their background, language barriers, and the additional work of shepherding children through new, unfamiliar online learning procedures at home. Others sought ways to manage the strain while working multiple jobs to mitigate lost income. On the other hand, migrant and refugee students struggled with the compounded effect of quarantine and isolation from their school.

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" After schools moved to remote learning modalities, it became increasingly difficult to guide my children, because I do not speak Arabic. The children were asking questions and I had no answers to give them. "

(Lucia, from Ecuador, female, 41 years, entrepreneur living in Morocco, survey respondent, April 2021).

Students in higher education have also been affected. The lockdown measures affected around 449,000 tertiary students from Arab countries studying abroad, many of which had to be repatriated, while others could not travel to attend university because of travel and visa restrictions. Several studies show increased anxiety, stress, depression and other psychological adversity among university students.[332]

5. Gendered consequences of the pandemic

Female migrants and refugees often face distinct disadvantages within their households and in their communities, which were exacerbated by the COVID-19 lockdown, because they have less access to power, resources and decision-making processes than men. Women make up a significant proportion of the informal sector, account for most of the domestic workforce due to responsibilities associated with traditional gender roles and norms, and are disproportionately more likely to assume or be forced to assume responsibility for unpaid care and domestic work.[333]

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“
The pandemic has been difficult for women because we do a lot of housework. Some women are taking on additional duties at home during the pandemic, from managing children's online schooling to navigating job and income losses.
”

(Marie, a health worker in Morocco, survey respondent, April 2021).

Many testimonies have shed light on the difficulties faced by women migrants during the pandemic, in particular those working in the informal and domestic sectors. They were often left economically vulnerable or had to endure predatory working conditions due to the large losses in informal sector jobs. Others were expected to do more domestic work or work longer hours because of stay-at-home orders, and to spend more time caring for children, older persons, and the sick in their own homes. The research findings showcased the added responsibilities women have shouldered during the pandemic, particularly in terms of productive, reproductive and community work, which are often transferred to daughters and other females within the household. Many young women have had to assume more gendered responsibilities, such as caring for younger siblings and older persons, in addition to being burdened with domestic work. This added responsibility has both short and long term impacts on the welfare and the resilience of female household members.

The Eastern Mediterranean Region has the second-highest prevalence of violence against women worldwide at around 37 per cent, according to WHO estimates.[334] In emergency situations, gender-based violence is likely to increase. The research findings corroborate this assumption, and indicate that the pandemic and ensuing lockdowns have rendered female migrants and refugees vulnerable to various forms of gender-based violence. Women have been more likely to experience physical violence, rape, beatings and other forms of violence by their husbands and close male relatives. In the early months of the pandemic, women in Jordan[335] witnessed a 33 per cent increase in gender-based violence, compared with a tripling in Tunisia[336] from 4.4 to 14.8 per cent. In Gaza, at least a third of Palestinian women, including refugees, have reported feeling unsafe at home and fearing domestic

violence.[337] There was a 35 per cent increase in calls to gender-based violence hotlines in the State of Palestine in July 2020,[338] compared with May 2020. The pandemic also limited women's access to medical care, especially reproductive and sexual health.[339] In Libya, 35 per cent of IDP respondents and 15 per cent of migrants said that instances of domestic violence had increased as a result of the pandemic and it associated measures, such as including lockdowns and mobility restrictions.[340]

Based on the analysis above, building forward better for migrants and refugees necessitates the adoption of a gender-responsive lens to examine how men and women face specific gendered challenges in the Arab region, and to formulate responses that adequately address those challenges.

6. Mobility restrictions

In responding to the pandemic, many Arab countries have taken unprecedented measures to control human mobility, many of which have had adverse effects on migrants and refugees. While some measures have supported migrant communities, such as amnesty policies and experimenting with flexibility by allowing temporary visa extensions to avoid letting large numbers of migrants fall into irregularity, others policies have included border closures, quarantines, expulsions, and lockdowns of migrant worker communities and refugee camps.[341]

As a result, many migrants and refugees have been left stranded in host countries, without food, shelter, access to essential services or the ability to return home.[342] However, evidence suggests that despite border closures and mobility restrictions, mobility in the region was not significantly curbed.[343] The region witnessed increased returns of migrants to and from Arab countries owing to job losses, changing

working modalities, and repatriation efforts by States. In addition, the drivers to migrate, even using irregular pathways intensified, as a result of deteriorating socioeconomic condition in countries of origin, transit and destination.

As for refugees and asylum seekers, the pandemic amplified their already harsh living conditions. For many, mobility restrictions have prevented them from accessing safety.[344] Consequently, many asylum seekers have not been able to reach asylum countries to seek protection.[345] Furthermore, many of those awaiting deportation, or of those held in immigration detention facilities, were confined for longer periods in often overcrowded spaces with poor access to hygiene services, thus increasing their risk of contracting COVID-19.

7. Limited connectivity and communication

The pandemic highlighted the importance of access to digital communication for migrants and refugees to stay connected with their communities. Evidence illuminates the important role support from loved ones and community plays in helping develop personal resilience of migrants and refugees, who are often away from their family members for extended periods of time.

Access to digital communication for migrants and refugees has also proved critical during the pandemic, as communication between Governments, migrants and refugees, and groups that serve them, has been largely limited to the digital space. While the pandemic has promoted investment in creative digital solutions to improve and expand access to virtual services, these advancements have not reached all groups equally. Migrant and refugee populations who do not have access to digital devices or Internet connection, or who are limited by a lack of digital skills

or language barriers, are sometimes left without reliable sources of information that enable them to make informed decisions and exercise their independence. Women and girls are often even more disproportionately affected by the digital divide.

Conversely, increased reliance on digital mediums could allow misinformation about COVID-19 to spread. The impact of misinformation, especially in relation to the pandemic, can have detrimental mental and physical consequences. This highlights the need for Governments to adopt various mediums of communication to ensure widespread access to reliable information.

Coordinated low-cost communication is essential for Government and service providers to share accurate information with groups who rely on them. During the pandemic, enhancing government capacity to share health guidelines that reach migrant and refugee populations is critical to preventing the virus' circulation and ensuring adequate treatment for the infected. Furthermore, developing government capacity to effectively communicate and reach vulnerable populations, particularly migrants and refugees, has important implications that extend far beyond the pandemic. To build forward better, Governments and groups that serve migrant and refugee interests should identify means to communicate clearly on ways to access services, including health care, immigration support, job and economic support, housing, food, and clean water.[346] Improved communication serves to inform the governance of migrant and refugee needs, and provides evidence to develop responsive policies and equip migrants and refugees with the knowledge and tools to protect and empower themselves.

E. Policy recommendations for a better future for migrants and refugees in the Arab region

The findings of the present research illustrate that the pandemic has exacerbated deeply entrenched structural and historical challenges for migrant and refugee communities, and for countries of origin and destination. Despite these challenges, migrants and refugees have displayed noticeable resilience, and continued to positively contribute to their communities.

Chapter 3 explores the challenges posed by pandemic across various themes, including economic conditions, food insecurity, health barriers, education challenges, gender, mobility, communication and connectivity. Eighteen months into the global pandemic, the increasing socioeconomic and health disparities (particularly vaccine availability) among and within Arab countries have compounded these issues.

In response to these challenges, systematic changes to migration and refugee policies are needed to protect basic human rights and empower migrants and refugees. The pandemic should serve as a learning opportunity for countries and relevant stakeholders to reflect on their experiences and answer the question: How can we collectively build forward better for migrants and refugees? The following policy recommendations are deduced from lessons learned and promising practices observed, and aim to support member States in answering the aforementioned question and in accelerating their efforts to achieve the objectives of the Global Compact for Migration and the Global Compact on Refugees to ensure that no migrant or refugee is left behind.

1. Facilitate regular migration pathways, limit irregular migration, and protect migrants

Enable voluntary returns for stranded migrants that respect their rights and dignity; and guarantee access to safe services that meet their basic needs such as food, shelter and water, and health-care needs including COVID-19 testing.

Adapt safe return procedures to ensure migrants have access to accommodation, food, water and other basic services, especially during crisis situations.

Invest in the digitization of migration processes, including simple explanations of procedures to renew and extend visas available in different languages, to increase the transparency and accessibility of migration procedures and avoid falling into situations of irregularity.

Intensify initiatives that facilitate regularization of migrants in irregular situations, such as regularization campaigns.

Guarantee that migrants have access to their passports, identification documents, and other personal paperwork necessary to facilitate travel; and ensure that migrants are aware of their right to retain these documents by spreading awareness through migrant networks, organizations on the ground, and other relevant channels.

Empower migrants with the ability to provide feedback on migration services; and ensure these mechanisms, such as hotlines, are accessible and promoted to migrant communities by offering services in relevant languages, and guaranteeing feedback will not be used to retaliate against complainants.

Strengthen migrant access to justice mechanisms.

Amend visa and permit requirements to ensure survivors of human trafficking do not fall into irregular status owing to temporary documentation.

Endow law enforcement with the authority and resources to pursue existing and emerging human trafficking patterns.

Better integrate migrants and refugees in national and regional disaster preparedness plans and emergency procedures, and post emergency recovery.

2. Ensure the protection of refugees and asylum seekers

Make use of screening arrangements at borders, and of testing, quarantine and other measures, to enable authorities to manage the arrival of asylum seekers and refugees, including stateless refugees, in a safe manner, while respecting international refugee protection standards during the pandemic.

Where asylum procedures have been temporarily suspended on account of the pandemic, resume such procedures as soon as it is safe to do so, with all the necessary health considerations in place.

Enhance communication with refugee communities to improve information on changes regarding services and assistance that they are entitled, and on how to access them.

Further efforts to strengthen inclusion of refugees, including by providing national documents, ensuring access to services such as health care and education, and granting the right to work.

Support refugees and Arab countries hosting large numbers of refugees by increasing solidarity efforts, including resettlement quotas, enhancing access to family reunification and other complementary pathways, and resuming resettlement processing as soon as it is safe to do so.

3. Decent work, fair and safe employment, and income security

Complete a comprehensive reform of the *kafala* system to address areas that put migrants in situations of vulnerability and forced labour; and recognize and enforce existing international human rights and labour laws and conventions aimed at guaranteeing the protection of migrant workers' rights and welfare.

Engage directly with migrants, refugees and international organizations to identify creative ways to reduce the risks migrant workers and refugees face during crises.

Guarantee proper access to personal protective equipment in areas with high migrant or refugee density, including workplaces, labour camps, and migrant or refugee accommodation.

Develop confidential mechanisms for oversight and to report violations of health and other workplace guidelines that protect the privacy and job security of migrants and refugees.

Guarantee all migrant workers and refugees access to legal recourse for unfair or exploitative treatment, including withholding payment, underpayment, discrimination, overworking and other forms of abuse; and ensure that these resource channels are accessible to all, especially female migrant workers and refugees who face increased risk of violence, by offering personalized assistance and language interpretation services.

Guarantee that migrants and refugees have the same rights as other employed residents in terms of labour protections, equal pay for equal work, and organizing and forming unions and bargaining collectively; and ensure that domestic work is included in labour laws.

Develop a rights-based approach to employment law and practices that include the needs of communities, by engaging directly with migrant and refugee populations and local and international organizations that serve their interests.

Offer paid sick leave to disincentivize working while sick, particularly during a pandemic, to safeguard public health and avoid the unnecessary spread of the virus.

Ensure that national and local economic stimulus and support measures meet the needs of migrant and refugee populations; and consult with active local migrant advocacy groups and migrant and refugee populations to identify specific community needs and include them in the development of national and local economic policies.

Provide economic relief to guarantee that migrants and refugees have access to basic services, including adequate housing, clean drinking water and food.

Include migrants and refugees in national and local job skills training programmes to qualify them for a wider range of jobs; and ensure that these programmes are accessible by offering them in different languages, and without participations restrictions based on migration status, gender, ethnicity or religion.

Allow migrants and refugees to enter national and private banking systems by partnering with banks to offer competitive banking services, particularly services that reduce the cost of sending remittances for low-income migrants and refugees.

Offer financial literacy training and workshops to migrants and refugees, with emphasis on topics that meet the needs of local groups, to empower them with information that allows them to make informed financial decisions.

Strengthen State cooperation and collaboration with different stakeholders, including international and local non-governmental organizations that serve migrant communities, to provide better access to services.

4. Health

Engage with migrants, refugees, their host communities, and the organizations that serve them to ensure that the most up-to-date health guidelines, including sexual and reproductive health and other pertinent information, are shared regularly and are accessible in languages that meet the needs of the community.

Ensure universal access to health-care services regardless of migration status, race, ethnicity, gender or nationality.

Develop strategies to combat COVID-19 at all levels of government planning (especially testing, treatment and vaccine distribution) that include meeting the needs of migrant and refugee populations, with particular attention to underserved individuals such as women and migrants in irregular situations.

Engage with migrant and refugee communities and the organizations that serve them to increase awareness of available channels to seek medical treatment; and encourage individuals to seek health care when needed, including reproductive health services.

Safeguard access to female health-care practitioners and quality female health services, including obstetrics and gynaecology.

Ensure all service providers are trained to respond to the physical and mental health and psychological support needs of all survivors of gender-based violence in safe and confidential environments.

Extend migrants and refugees access to interpreters, including sign language, when needed for all interactions with medical professionals.

Expand the availability of telehealth services, including virtual counselling, to migrants and refugees particularly high-risk populations, during the current global health crisis and to groups

with longer-term limited access to nearby quality health-care services. To make existing telehealth services more accessible, providers should ensure services can be accessed using mediums and languages familiar to migrant and refugee communities.

Guarantee access to and coverage of mental health and psychosocial support for all migrant and refugee populations through and beyond the COVID-19 pandemic; and actively encourage engagement that destigmatizes mental illness and seek support by working directly with migrant and refugee groups and organizations that serve their interests.

5. Education

Promote the equal and continuous participation of girls in online learning and the return of girls to in-person learning at school when possible, including at the secondary level; address the needs of girls who have dropped out of school; and consider support classes specifically for girls.

Reduce barriers to entering public education systems, particularly restrictions based on migration status, which prevent migrant and refugee children from entering public schools, while actively encouraging the inclusion of these students in formal education.

Work with local organizations and communities to identify solutions to improve school access, and encourage the enrolment of migrant and refugee students.

Ensure migrant and refugee children have access to Internet and devices compatible with online learning by offering Internet subsidies to families with children, instituting device loan programmes, and partnering with private technology companies to expand access to educational technology to all school age children regardless of migration status.

Guarantee that programmes implemented at the local and national levels to alleviate the costs of remote learning and tutoring include migrant and refugee children and families.

Provide free or subsidized school supplies, child meal plans during in-person learning, and other support.

Ensure that programming and policy development meet the needs of migrant and refugee children and their families.

Provide opportunities and offer programmes for migrant and refugee teachers and tutors to gain necessary training or accreditation to enter public school systems that offer better job security and higher wages.

Expand and develop mental health support available to students by training teachers to identify signs of mental illness; and connect students with online counselling services and peer support groups.

Incorporate migrant and refugee experiences in national education curriculums.

Create accelerated language and educational programmes for children who were prevented from attending online and in-person schooling to ensure that they are not left behind.

Offer skills-based learning and recognition opportunities, such as free courses, for migrants and refugees; and ensure that these opportunities can accommodate adult working schedules.

Require teacher diversity and cultural sensitivity trainings to guarantee that teachers are equipped to engage and meet the needs of students from diverse backgrounds.

6. Gender

Guarantee national and local social protection efforts and benefits reach migrant and refugee women and girls.

Ensure female migrants and refugees are aware of and can access protection services and benefits that apply to them by offering services in different languages, creating clear and simple benefit redemption plans, and advertising programming on both digital and non-digital spaces in places with high concentrations of migrants and refugees.

Build safe houses and other spaces where women and girls facing sexual or domestic abuse, including intimate partner violence, can receive shelter, food, housing, medical assistance, and other necessities; ensure that these spaces are accessible, secure, and equipped to meet the childcare, mental health and psychosocial support needs of female migrants and refugees; and guarantee that access to existing safe houses for women are inclusive of migrant and refugee women and their children.

Develop and conduct information campaigns to raise the awareness of migrant and refugee women and girls of their rights; and offer confidential channels to provide assistance and counsel for women when these rights are abused.

Safeguard women's access to necessary Personal Protective Equipment and other health equipment by offering free products, such as masks and sanitizers, in areas with high female migrant and refugee concentrations.

Ensure women are included in COVID-19 and other critical decision-making efforts by offering childcare services during meetings, creating environments that do not dismiss the voices of women, hosting women-only meetings to discuss and identify key issues on the ground, and working with local and international organizations to keep migrant and refugee women informed of the results achieved due to their cooperation.

Engage men and boys to prevent violence and to encourage healthy ways of coping with stressful situations associated with crisis.

7. Connectivity and communication

Develop community loan programmes for electronic devices equipped with Internet in areas with high migrant and refugee density to provide access to digital platforms; and ensure these programmes are accessible to all regardless of gender, race, ethnicity or nationality.

Develop community centres and enclaves, in line with health guidelines and regulations, where individuals can access devices and the Internet; and guarantee that these spaces are accessible to women and young people. In areas where free public centres already exist, ensure the number of available digital devices meet the needs of the community and are inclusive of migrant and refugee communities.

Offer digital literacy courses and workshops in migrant and refugee dense communities.

Create and share a list of reliable information sources, especially during crisis, online and offline in areas with high migrant and refugee density; and ensure that these sources are offered in languages that meet the needs of the migrant and refugee populations, including up-to-date safety precautions and regulations.

Expose sources of misinformation and falsehoods; and create a channel for people to report misinformation or disinformation when they encounter it in various languages.

Open a dialogue between leaders in the migrant, refugee and local community to identify the source of hostility; and create a space that allows the groups to work together and create solutions that meet the needs of their communities.

Ensure that there are confidential reporting mechanisms for hate speech and discrimination available and accessible to the migrant and refugee population; and work with national and regional social media managers to remove groups that spread hate speech and violate online community guidelines.

Provide mental health services for migrants and refugees who experience hate speech and hostility; create spaces that allow for reflective open dialogue between migrants or refugees on their shared experiences; and use these discussions to help inform local organizational priorities and solutions that can help migrants and refugees feel more comfortable and protected.

Protect against hate crime by developing policies and training police and prosecutors to uphold migrant and refugee rights.

8. Expand transnational legal accountability

(a) For migrants

Ratify the 1990 International Convention on the Protection of the Rights of All Migrant Workers and the ILO conventions relevant to migrant workers, in particular the Migration for Employment Convention (Revised), 1949 (No. 97), the Migrant Workers (Supplementary Provisions) Convention, 1975 (No. 143), the Private Employment Agencies Convention, 1997 (No. 181), the Domestic Workers Convention, 2011 (No. 189), the 2014 Protocol to the Forced Labour Convention, 1930 (No. 29), and the Violence and Harassment Convention, 2019 (No. 190).

Launch campaigns that increase migrants' awareness of their legal rights under binding regional and international agreements; and offer legal counsel and advice, with translation services when needed, to migrants seeking to pursue legal action.

Establish regional and subregional standards relating to the kafala system that respect and promote human rights and dignity.

Expand the legal basis for pursuing action against human trafficking and smuggling by ratifying and enforcing the 2000 United Nations Convention against Transnational Organized Crime and its two supplementary protocols: the Protocol to Prevent, Suppress, and Punish Trafficking in Persons, Especially Women and Children; and the Protocol against the Smuggling of Migrants by Land, Sea and Air.

(b) For refugees

Ratify the 1951 Convention relating to the Status of Refugees, and the 1967 Protocol Relating to the Status of Refugees.

Where conventions have been ratified, government agencies should ensure that they are being followed. When abuses are found, actions, including enforcing legal measures, should be pursued.

9. Data collection

Invest in regional data collection efforts, with a particular emphasis on collecting disaggregated data, which may include information such as migration status, age, gender, ethnicity, disability status, occupation, sector of employment, country of origin, number of children per household, and level of education.

Ensure that anonymized data is made public and translated into different languages.

Collate existing data collected by States and non-governmental organizations into a single database, accounting for differences in collection methods and terminology where possible.

Move towards the standardization of migration and displacement-related terms by Governments at the subregional and regional level to ease the process of identifying common regional trends.

Standardize migration and displacement-related terms in data collected by international organizations.

Invest in the collection of qualitative data, and qualitative longitudinal studies where possible, to collect information that highlights the migration and displacement experience and can expand knowledge on the direct needs of migrants and refugees.

Prioritize data collection in the period before, during and after new programming and policies are launched to track their impact on migrant and refugee populations; and share evidence-driven successful policies and programming on a platform available to policymakers, international organizations, and other relevant bodies to encourage best practices.

Improve data collection and analysis on migration and refugee movements during sudden or slow-onset crises, and facilitate real-time data sharing.