



DISC INITIATIVE

The Joint Global Initiative on Diversity,
Inclusion and Social Cohesion



No Social Exclusion in ‘Social’ Distancing: *Leaving No Migrants Behind in COVID-19 Response*

DISC Digest Special Edition



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COVID-19 awareness raising sessions for migrants in Tak Province, Thailand. © IOM, 2020.

About this Digest

Countries across the world are taking decisive measures to prevent the spread of COVID-19 and mitigate the pandemic's socio-economic impacts. Such measures must contain provisions to ensure that they do not have unintentional negative consequences for those already disadvantaged within societies.

The virus does not discriminate but its impacts do.

Existing social ills – including inequality, xenophobia and abuse – are exacerbated in times of crisis, requiring targeted and inclusive strategies to protect those most at risk. Many migrants are particularly vulnerable to the inequalities and structural barriers which means that COVID-19

disproportionately impacts certain communities and individuals. At the same time, migrants are not a homogeneous group: some are at greater risk of being left behind in the response and in recovery than others.

This special edition of the global **DISC Digest** explores the multi-dimensional risks of social exclusion caused by inequities for different migrant groups in the COVID-19 response, including women and children, people living with disabilities and LGBTQI+ communities. This issue will also provide insight into the key challenges and concerns migrants face and showcase initiatives from the field that are responding to those challenges, as well relevant resources and tools.

About the DISC Initiative

The **DISC Initiative** is a flexible, demand-led and multi-year initiative, which aims to elevate IOM's capacity and programming to support Member States and relevant partners in the areas of social cohesion, migrant integration and inclusion. The DISC Initiative serves as a global platform to share, learn,

develop and implement innovative strategies and interventions in this area.

For more information about the DISC Initiative, please download our [infosheet](#) or download the [DISC Digest 1st](#) and [2nd Editions](#)



How are various migrant groups disproportionately impacted?

While measures to combat the virus apply to all, not all migrant groups have the same set of resources and capacities to comply with the rules. In the following pages, contributions from key IOM experts are featured to shed light on crosscutting issues and vulnerabilities that various migrant groups face, as well as complementary resources for developing a more differentiated, appropriate and migrant-friendly response to the pandemic.

- Persons with disabilities’ dependence on health services and specialized assistance they can hardly access due to restrictions.
- Widening gender inequalities and multiple burdens that women face as carers and workers in high-risk services, while also at greater risk of gender and domestic based violence
- The increased threat of child labour, child marriage, child trafficking, and sexual exploitation as migrants and families face increasing economic uncertainty
- Systemic marginalization of transgender people, LGBTIQ+ youth, seniors and people living with HIV, and economically vulnerable and/or homeless LGBTIQ+ people in the midst of the crisis
- Creation or exacerbation of pre-existing mental health conditions and vulnerabilities of migrants and risks of social isolation of disadvantaged groups who are already disconnected from mainstream society
- How anxiety fuels stigma and discrimination of migrants, building upon existing societal norms and public perceptions and why words matter in communicating about COVID-19



Persons with disabilities



Women



LGBTIQ+



Children



Stigmatization and Discrimination



Mental Health and Psychosocial Well-being



Persons with disabilities

15% of the world's population are persons with disabilities. Many, especially communities on the move, face significant barriers in their daily lives, particularly in times of crisis, and the current COVID health pandemic is no exception. Here are some of the reasons why persons with disabilities are at particular risk:

1. **Persons with Disabilities are likely to experience stigma and discrimination** during the COVID-19 crisis. The people most often cited as being at serious risk are largely, by some definition, people with disabilities so saying "don't worry COVID-19 is only dangerous for older persons or people with pre-existing conditions" is likely to stigmatise them further.

2. **It can be harder for persons with disabilities to take the appropriate steps to protect themselves from the coronavirus outbreak.** Taking measures to self-isolate for those who rely on others is difficult. Going shopping for food when someone else needs to help you is complicated. For those with chronic health conditions, getting life-saving medicine can be hard with disrupted services. Even washing hands and cleaning surfaces regularly (the advice we are all given) can be more difficult for persons with physical impairments. These measures may be even harder to ensure for migrants and their families.

3. **COVID-19 coronavirus threatens not only the health of persons with disabilities, but their independence.** For those who need support to maintain independence, particularly those who live in group settings like residential homes, outbreaks of the disease can disrupt these services. Caregivers may become sick, or the risk catching and spreading the illness may require them to stay at home.

4. **To be accessible, public health messages on COVID-19 MUST be provided in different and accessible formats.** Translated information for migrants should include audio, large print, easy to read, pictures and sign language and be accessible to children with disabilities

5. **Closing of residential schools and day centres can put persons with disabilities at risk of abuse.** As some persons with disabilities will require additional care, families who are not used to providing this care, and who struggle in doing so can put persons with disabilities at risk of violence, neglect and abuse. Abrupt changes in safety networks can cause further harm to those who need support.

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Further reading and suggested resources

1. [COVID 19 and the disability movement](#) (International Disability Alliance (IDA)) provides various general recommendations, guidelines and toolkits to support persons with disabilities.
2. [Toward a Disability-Inclusive COVID19 Response](#) (IDA) proposes 10 recommendations to mitigate main barriers that persons with disabilities face in this emergency situation.
3. [Disability considerations during the COVID-19 outbreak](#) (WHO) suggests protective measures for key stakeholders to reduce COVID-19's impacts on populations with disability.
4. [Guidance developed for a disability-inclusive response to COVID-19](#) (IASC) aims to improve the accountability and inclusivity of the humanitarian responses to the COVID-19 outbreak.
5. [COVID-19 response: Considerations for Children and Adults with Disabilities](#) (UNICEF) highlights the importance of considerations for Children and Adults with Disabilities during the pandemic.
6. [Policy brief: A Disability Inclusive Response to COVID-19](#) (UNSG) Guidance for UN entities to include persons with disabilities in their COVID response

For more information, please refer to [DISC Resource Bank on COVID-19](#).





Women and Girls

As we learn more about the impacts of this pandemic, two patterns are emerging, both with significant potential consequences for gender equality and inclusion. The first is that, despite higher mortality rates seen among men than women, the direct and indirect effects of the pandemic are gravely impacting women and girls, especially migrants.

A long list of existing risk factors already affect many migrant women and girls - including overrepresentation in precarious employment and informal sectors which do not allow working from home and offer little to no safety net, visa-related and financial dependence on family members and employers, irregular migration status, tightened travel and mobility restrictions, language barriers and lack of strong social support networks. All these combine to expose women and girls to even more threats to their physical, economic and mental well-being during this already difficult time, perhaps the most well-reported threat being the rise of domestic violence within households.

The second is that women, including many migrant women, are active on the frontlines of the response effort, as healthcare professionals and caregivers. This is despite challenges impacting women differently from men, such as the persistent gender pay gap and underrepresentation in leadership and decision-making roles. Women are also on the frontlines in refugee and displacement camps, where women leaders in these settings are working to raise awareness on COVID-19 and promote healthy practices.

While the full extent of the consequences on women's and girls' well-being (and on gender equality) is still unknown, one thing is certain: in order to fight this pandemic effectively, migrant women and girls must be included in every aspect of the response effort.

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Further reading and suggested resources

1. [Global Rapid Gender Analysis on COVID-19](#) (CARE and IRC) organised around broad themes and areas of focus of particular importance to those whose programming advances gender equality and reduces gender inequalities.
2. [Addressing the impacts of the COVID-19 pandemic on women migrant workers](#) (UN Women) highlights the emerging impacts on women migrant workers, focusing on the key challenges and risks they face.
3. [COVID-19 and ending violence against women and girls](#) (UN Women) highlights emerging evidence of the impact of the COVID-19 pandemic on violence against women and girls and makes recommendations to be considered by all sectors of society.
4. [COVID-19 and essential services provision for survivors of violence against women and girls](#) (UN Women) explores the implications for the provision of essential services for women and girls who have experienced violence.

For more information, please refer to [DISC Resource Bank on COVID-19](#).





LGBTIQ+

In [every region of the world](#), people who are lesbian, gay, bisexual, transgender, intersex, queer or another diverse sexual orientation, gender identity or gender expression ([LGBTIQ+ people](#)) experience [discrimination, harassment and violence](#) in their daily lives. This systemic marginalization results in disproportionate [rates of poverty](#), [mental health concerns](#), [substance use](#) and [negative health outcomes](#). Studies have shown that LGBTIQ+ people are at [heightened risk](#) of cancer and other diseases due to factors such as discrimination within health care systems and high rates of stress from stigma.

In humanitarian emergencies, it is [well established](#) that LGBTIQ+ people are particularly vulnerable. The COVID-19 pandemic presents [numerous risks](#), including fear of discrimination or being outed while seeking medical treatment; cancellation of vital health services related to transition, conception and HIV status; homo- and transphobic quarantine environments; increased rates of anxiety and depression; border closures blocking flight; and economic impacts more severe than those experienced by heterosexual, cisgender, endosex peers, especially for LGBTIQ+ [migrants](#) and/or Black, [Indigenous](#) and people of color. At particular risk are [transgender](#) people, LGBTIQ+ [youth](#), [seniors](#) and people with [HIV](#), and economically vulnerable and/or [homeless](#) LGBTIQ+ people.

The pandemic has exacerbated the isolation of LGBTIQ+ people in several ways. It has disconnected LGBTIQ+ people from their networks due to the closure of health and community centers that provided safe and supportive spaces. It has required many LGBTIQ+ people to stay home for extended periods of time, including with family members who stigmatize or abuse them. LGBTIQ+ people sheltering alone face the [negative mental health effects](#) of quarantine, which may compound pre-existing mental health conditions. Widespread discrimination in health care means LGBTIQ+ people may be reluctant to seek care and fear they will experience trauma when doing so. LGBTIQ+ migrants face additional layers of discrimination when accessing medical systems and government services that may be new to them.

Every IOM office, regardless of its location, already assists LGBTIQ+ migrants. How can we ensure our assistance is appropriate and respectful? It is imperative to [train staff](#) to address the unique vulnerabilities of LGBTIQ+ populations.

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Further reading and suggested resources

1. [COVID-19 and the Human Rights of LGBTI People](#) (OHCHR) shows specific challenges for LGBTI People in the pandemic and proposes key actions for States and other stakeholders.
2. [COVID-19 And Specific Impact on LGBTI People](#) and What Authorities Should Be Doing to Mitigate Impact (International Lesbian, Gay, Bisexual, Trans and Intersex Association ILGA) describes COVID-19's impacts on LGBTI People and suggests some solutions for authorities.
3. [How Transgender and Non-Binary Communities Around the World Are Being Impacted by COVID-19](#) (Human Rights Campaign) discusses top five issues for transgender and non-binary communities around the world, particularly those living with HIV.
4. [Implications of COVID-19 for LGBTQ Youth Mental Health and Suicide Prevention](#) (The Trevor Project) outlines COVID-19's impacts on LGBTQ youth and explains what to do to support them during this time.
5. [COVID-19 is hitting older LGBTQ adults especially hard](#) (Association of Health Care Journalists AHCI) emphasizes increased risks for severe illness and even death among older LGBTQ community.

For more information, please refer to [DISC Resource Bank on COVID-19](#).





Children

The COVID-19 pandemic has increased vulnerability of children already at risk, including vulnerable migrant children. As migrants and families face increasing economic uncertainty, the threat of child labour, child marriage, child trafficking, and sexual exploitation will increase. There is emerging evidence that violence against children is increasing in all different forms, from domestic violence and abuse at home to excessive use of force by law enforcement while enforcing lockdown decisions against street children. In the words of the UN Secretary General: What began as a health crisis risks evolving into a broader child-rights crisis.

All children have the same rights, regardless of their migration status. Migrant children should not face discrimination in judicial or administrative proceedings, in access to education, health, and other services, or in any other area. All children deserve equal access to services; services need to be made available to them in an adequate and age-appropriate manner that is accessible and appropriate for children. Children should be provided with information and the opportunity to participate in decisions on services provided to them, in a manner appropriate to the child's age and

development, and which supports the child's rights to self-determination and full participation.

During pandemics children on the move face various risks including psychological distress caused by fear of infection with the disease, stigmatization of individuals infected with, or suspected to be infected with the disease, and xenophobia. Interruptions to health services - including services critical to children such as immunization - have faced interruptions. IOM should work to support continued access to services for migrant children.

Migrant children may be present in locations in it is difficult to take adequate measures to prevent infection – such as in transit centres, detention centres and at points of entry. IOM should work to ensure that migrant children and their family members are not placed in immigration detention, and that adequate prevention measures are put in place in any locations in which migrant children may congregate.

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Further reading and suggested resources

1. [Protection of children during the coronavirus disease \(COVID-19\) pandemic](#) (UNICEF) provides recommendations for child protection practitioners to better respond to the risks children face during the pandemic.
2. [COVID-19 and its implications for protecting children online](#) (UNICEF) sets out some key priorities and recommendations on how to mitigate those risks and promote positive online experiences for children.
3. [How to keep your child safe online](#) while stuck at home during COVID-19 (UNICEF) suggests 5 ways to help keep children's online experiences positive and safe.
4. [Quick Tips on COVID-19 and Migrant, Refugee and Internally Displaced Children](#) (UNICEF) emphasizes the inclusion of migrant and displaced children in the response to COVID-19 to ensure health, safety, and protection for all.

For more information, please refer to [DISC Resource Bank on COVID-19](#).





Mental Health and Psychosocial Wellbeing

Moments of crisis and uncertainty are known to create or exacerbate pre-existing mental health conditions or vulnerabilities. Needless to say, the pandemic has generated stress, anxiety and fear among the world's populations. While the measures to prevent further spread of the pandemic apply to everyone, migrants and their families are immensely impacted.

As most migrants are separated from their families and support systems in the midst of lockdowns and travel bans globally, they face a great deal of adversity related to the virus, encompassing uncertainty about their future, loss of livelihood opportunities, financial hardship, loss of loved ones, enduring effects of isolation as well as a general sense of fear.

Oftentimes, migrants are also reluctant to access or avail counseling-related services due to stigma or are unable to receive such support due to language barriers and/or exclusionary policies and social protection measures of their host countries. Aside

from being excluded from these services, migrant earnings and remittances are also adversely affected, increasing their exposure to family tensions, as well as their worry and sense of guilt towards those left behind in their countries of origin.

The situation is even worse for those migrants in vulnerable conditions, including those stranded, those in detention, identification and transit centres, as those living in camps and camp-like settings. Victims of human trafficking and migrants in conditions of servitude in particular are also at higher risk of mental distress as they often do not have full control over their bodies, movements, social interactions and sleep cycles.

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Further reading and suggested resources

1. [Mental Health and Psychosocial Support \(MHPSS\) in the COVID-19 Response: Guidance and Toolkit for the Use of IOM MHPSS Teams](#) (IOM) compiles existing material related to MHPSS for the COVID-19 crisis, as well as other resources that can be applicable to the context.
2. [Mental health and psychosocial considerations during the COVID-19 outbreak](#) (WHO) can be used in communications to support mental and psychosocial well-being in different target groups during the outbreak.
3. [Interim Briefing Note: Addressing Mental Health and Psychosocial Aspects of COVID-19 Outbreak](#) (IASC) summarizes key mental health and psychosocial support (MHPSS) considerations in relation to the 2019 novel coronavirus (COVID-19) outbreak.

For more information, please refer to [DISC Resource Bank on COVID-19](#).





Stigmatization and Discrimination of Migrants

The denigration of certain populations is unfortunately a familiar symptom of viral epidemics. Disease fosters fear, which in turn fosters discrimination and stigma – as we saw with HIV and Ebola. Similarly, COVID-19 may be popularly associated with a specific community or ethnic group, even though not everyone in that population or community is at risk of the disease. Individualized stigma can occur after a person has been released from COVID-19 quarantine or treatment. Migrants are particularly at risk of such discrimination or stigma, as they may be most likely to be excluded from wider society due to their legal status, or most prominently involved in the official response to the pandemic (for example as care or medical workers).

In these conditions of heightened fear and anxiety, appropriate communication about the pandemic and its modes of transmission is critical. Such communication can shape

people's perception and treatment of those who are already ill or who are at risk of acquiring the virus. If it is transparent, evidence-based and non-judgmental – if it explicitly avoids 'blaming and shaming' any particular group – populations feel more empowered, are more willing to be tested and self-isolate and to help those in need, and less likely to discriminate against others. The right words matter, particularly for those who were already subject to multiple forms of discrimination, including verbal and physical violence, before the pandemic, such as migrants, who are particularly vulnerable to becoming victims of an exclusionary discourse and its consequences.

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Words Matter: Dos and Don'ts when talking about COVID-19

Do - talk about the new coronavirus disease (COVID-19) **Don't** - attach locations or ethnicity to the disease, this is not a "Wuhan Virus", "Chinese Virus" or "Asian Virus".

Do - talk about "people who may have COVID-19" or "people who are presumptive for COVID-19" **Don't** - talk about "COVID-19 suspects" or "suspected cases".

Do - talk about people "acquiring" or "contracting" COVID-19 **Don't** - talk about people "transmitting COVID-19" "infecting others" or "spreading the virus" as it implies

intentional transmission and assigns blame.

Do - talk positively and emphasise the effectiveness of prevention and treatment measures. There are simple steps we can all take to keep ourselves, our loved ones and the most vulnerable safe. **Don't** - emphasise or dwell on the negative, or messages of threat. We need to work together to help keep those who are most vulnerable safe.

For more info, please refer to the [Stigma Guide prepared by WHO, UNICEF and IFRC](#).





Countering Xenophobia and Hate Speech

Multi-stakeholder response to addressing hate speech

United Nations Guidance Note on Addressing and Countering COVID-19 related Hate Speech

11 MAY 2020

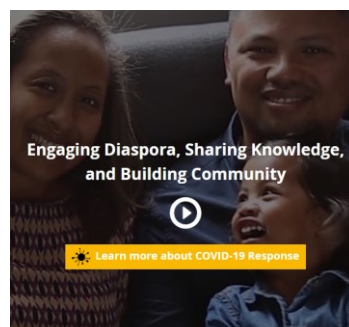
To respond to this COVID-19 related hate speech, concerted efforts of all actors are imperative. While Member States have the primary responsibility for tackling COVID-19-related hate speech, other actors – especially the UN system, tech and social media companies, mainstream media, and civil society – also have a significant role to play in condemning hate speech, promoting messages of inclusion, and acting in solidarity on the basis of international human rights law.

The [UN Guidance Note](#) sets out recommendations to various actors for addressing and countering covid-19 related hate speech which builds upon and is complementary to the [UN Strategy and Plan of Action on Hate Speech](#).

Mobilizing diaspora communities to fight xenophobia

Protecting others from prejudice and xenophobia is a shared responsibility. Migrants and diaspora organizations play a key role in promoting solidarity and safeguarding their communities by tackling xenophobia.

A [Joint Statement of Solidarity](#) has been launched recently by [iDiaspora](#) to raise awareness on this growing concern, calling on diaspora organizations to support this campaign and join the Global Diaspora Coalition on Combating COVID-19.



Engaging the media and promoting ethical journalism



As the media plays a critical role in shaping narratives and forming public opinion, it is imperative that journalists have the knowledge and skills to report on migration in an evidence- and human rights-based manner. Journalists are key to countering anti-migrant rhetoric, in particular the scapegoating of migrants that has proliferated in public and various digital media channels in the midst of the pandemic.

This [Journalist Guide](#) developed by IOM Tunisia serves as a resource for journalists to enhance the quality of media coverage of migration, and to better inform the public on this complex and often polarizing issue. The guide comprehensively covers all aspects needed to be considered by a journalist, from course content and practical exercises, best practices in pedagogy, down to practical issues.





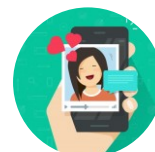
© IOM Somalia

Featured IOM Initiatives

Throughout the world, governments are taking decisive measures to counter the outbreak which range from physical distancing, imposing travel restrictions, and shutdown of economic activities, posing severe burden among migrants' health, socio-economic condition, physical security and mobility. While doing so,

efforts are made by IOM country missions around the world to mitigate COVID-19 related risks and impacts and ensure that such measures do not have unintended negative consequences to those already in vulnerable situations.

Digital media campaigns on countering xenophobia, stigma, and fake news



Stigma can undermine social cohesion within communities and prompt possible social exclusion of certain groups, including migrants. As migrants continue to bear the brunt of hate speech, racial slurs that have proliferated in various media platforms, some IOM missions have used the same platforms to counter fake news and promote positive stories on migration.

[IOM Mexico](#) launched a social media campaign, "*COVID 19 does not discriminate, why do you?*" through social networks with the aim of sensitizing citizens about the importance of avoiding xenophobia and hate speech towards migrants during the COVID-19 emergency.

[IOM Bosnia and Herzegovina](#) promotes "*Mi O Nama*" online campaign to promote positive stories of frontliners and [#StayAtHome campaign](#) where everyday, various children's audio books are read, targeting parents and children to promote positive atmosphere and learning in the midst of quarantine.

[IOM Armenia](#) rolled out "*Sincere Talk*" campaign to raise awareness of health-related issues among migrants and the population at large. Originally designed to counter HIV-related stigma, the campaign creates a supportive virtual environment where all demographics can disclose their concerns and seek information.



Targeted communications and awareness-raising initiatives for migrants and communities

To ensure that public health information and associated risks are communicated in a timely, accessible and culturally appropriate ways, IOM missions have recognized the imperative of investing in multilingual and targeted communications and awareness raising activities not just for migrants but also for host communities.

IOM Italy has developed targeted and multilingual messages for municipal actors and migrants to raise awareness about COVID-19 and accompany migrants' specific needs. Through the Admin4All project, they have provided municipalities materials on [support measures for housing, work and business](#) among migrant populations, [social implications](#) of COVID-19, [audio clips](#) and [informative videos](#) as well as [infosheets](#) translated in 38 languages.

IOM Brazil conducts [online courses for public services' employees](#) and [trainings for migrants and refugees](#) which include dedicated content

and case studies on COVID-19. Implemented within the framework of Project Oportunidades, these courses aim to prepare government actors and migrants to respond to diverse challenges on migrant integration, including social protection in crisis situations and mitigating the risks of public health emergencies like COVID-19, Ebola, etc.

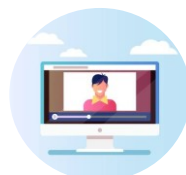
IOM Thailand has produced several multilingual [practical guidance](#) for [employers of domestic workers](#) to address associated risks and [migrant workers](#) whose job has been affected as a result of imposed measures. An [animated video](#) has also been produced to orient migrants on COVID-19, border closure and travel restrictions.

IOM UK runs a [multilingual website](#) and a telephone service which provides information to migrants on 5 key topics: health, work, benefits, visas and immigration, housing and homelessness, as well as available support schemes from both governments and NGOs.

Virtual counseling and lessons for migrants

To ensure continuity of services and activities for migrant education and training, several IOM missions has set-up remote communication mechanisms such as virtual language classes, counseling and literacy programs on a range of topics for both young and adult migrants.

IOM Indonesia provides [reimbursement of Internet quotas](#) on top of monthly subsistence allowances to continue virtual education of refugees and asylum-seekers enrolled in standard schooling and adult literacy programs. IOM Indonesia serves as bridge for teacher-parent interaction and also as a helpdesk for parents and school children in need of guidance for completion of assignments, in view of language barriers. They also continue providing their psychological and clinical services through online counseling.



IOM Peru participates in the inter-agency [#TuCausaEsMiCausa Initiative](#) where refugees and migrants from Venezuela are offering [online classes](#) on how to produce masks, cultivate vegetables at home, on topics such as art history, marketing, technical vocations, or leading exercise classes. These courses are offered to host and migrant populations.

IOM Slovakia runs a Migrant Information Center which now delivers [online course on Slovak language and lessons on social and cultural orientation](#) for citizens of non-EU countries through the use of the [BlueJeans platform](#), complementing their other integration package services on legal advice, job counseling, etc.





Empowering migrant communities to contribute to the COVID-19 response

Migrants are often portrayed as vulnerable and in need of assistance, which often can downplay their skills and creativity to contribute to society. Several IOM missions have leveraged migrants' resourcefulness by involving them to contribute in the fight against COVID-19.

[IOM Azerbaijan](#) supported a group of victims of trafficking to produce home-made masks to essential service providers in their neighbourhood in the capital Baku. This helps to reduce the shortage of personal protection equipment in Azerbaijan, where the country encounter disruptions in medical supplies.

[IOM Indonesia](#) supported refugee and asylum seekers to produce cloth masks for refugee populations and local communities as part of the MHPSS program to maintain their psychosocial wellbeing.

[IOM Gambia](#), as part of their reintegration assistance, supported 20 migrant returnees produced up to 2,000 protective suits and shoe coverings for the use of frontline immigration and border officials.

[IOM Djibouti](#) supported the [set up of a digital training space](#) for young migrants to supply protective face shields to health workers. Digital machines – like 3D printers and laser cutters – are deployed to make medical face shields for the government at a time of critical shortage.

[Migrants as Messengers Project](#), engaged 248 volunteers from seven West African countries, who are returning migrants, in peer-to-peer communication trainings to spread the word about the pandemic in local languages or dialects in vulnerable communities.

Providing migrant assistance related to housing and eviction



Even before the pandemic, housing has already been an issue for migrants. As the pandemic rose, eviction of migrants and migrant households from their accommodations has even become a major concern, not only that it is inconsistent with the 'stay home' policies of governments but also because it exposes migrants to further health and physical risks.

[IOM Tunisia](#) provides legal assistance for migrant families who have been evicted as a result of COVID through dedicated help of lawyers in mediation. This complements their assistance to migrants which includes

offering food vouchers, medical and psychosocial assistance, as well as their advocacy efforts for migrant inclusion in social policies.

[IOM Greece](#) offers beneficiaries under the HELIOS Project [support in finding accommodation](#), providing rental subsidies and targeted assistance through specialized workshops and one-to-one sessions, and interpretation support. Multilingual Whatsapp helplines are also being run for booking appointments to seek support and counseling in response to mobility restrictions.





Migrants' Voices

© IOM Thailand

Rapid assessments on migrants' struggles and concerns



IOM country offices have conducted rapid assessments with key stakeholders to improve understanding of COVID-19-related vulnerabilities among migrant populations. This section features key findings from key informant interviews conducted with stakeholders in Italy, Georgia and Thailand. While small-scale and non-representative, they nevertheless provide interesting insights into the struggles and concerns of migrants in both developing and developed countries.

- Pre-literate migrant populations are particularly in danger of being excluded from risk communications, even where such communications are translated in the language of migrants

In Thailand, key informants estimated that approximately half of the migrants in their communities have no or little awareness of hand-washing practices and it is believed that most migrants are not able to identify COVID-19 symptoms. Aside from the lack of information, education and communication materials in the language of the migrants, respondents also cited lack of literacy as an important reason for this limited awareness of crucial information among their migrant populations. In Georgia, nearly one fifth of respondents are not able to

understand either English or Georgian, experiencing language barriers.

- Even where migrants are aware of hygiene and sanitation practices to prevent the spread COVID-19, they do not always have the means to implement them

Most key informants in the Thai survey estimated that over three-quarters of migrants did not have access to hand sanitizers or masks. While most informants agreed that soap for handwashing is more widely available among migrants than other personal protective equipment, a number of them believed that only a minority of migrants in their communities had daily access to soap.



© IOM Bangladesh

- Certain myths and misinformation about COVID-19 exist among migrant communities that put them at increased risk

Almost half of the key informants in Thailand agreed that there is a widespread belief among migrant communities that COVID-19 can be avoided or cured by using herbal remedies or consuming certain kinds of food. In Italy, migrant associations indicated that they had to be active in countering rumours and misinformation about the virus in their communities (such as that it only affects those of Caucasian origin).

- Limited access to data, connectivity and technical equipment exacerbates existing social isolation among migrants and constrains access to timely risk communications and basic services

Access to data and internet connections is a basic need for populations in lockdown. The rapid assessment of migrant associations in Italy showed that they had to support members who were no longer able to pay internet bills and thus risked being cut off from both official communications on the virus and the emotional support of friends and family members. In addition, migrant families often lacked the technological equipment (e.g. computers and printers) required to apply online for benefits and other services.

- Quarantine measures affect migrants' mobility and economic and psychological situations

Afraid to leave their homes to shop basic supplies, because of increased police controls, migrants in Italy often lack food and medicines. In situations where people mostly rely on income generated through day-to-day and informal jobs, quarantine measures have also affected people's ability to leave their homes and to earn a living, increasing the feeling of social isolation and stress. In Georgia, most acute needs identified result from loss of income (direct or indirect).

- Reaching the invisible through migrant associations is key

Migrant associations in Italy are the first trusted contact for help for undocumented members of their communities. Through associations, large numbers of undocumented migrants could be reached and assisted, a category of people otherwise very difficult to intercept and for whom life-saving services are almost impossible to access.

Download the reports below:

- IOM Thailand's [Rapid Assessment: COVID-19 Related Vulnerabilities and Perceptions of Non-Thai Population in Thailand](#)
- IOM Georgia's [Rapid needs assessment: COVID-19 related vulnerabilities, risks and needs among third country migrants in Georgia](#)
- IOM Italy's [COVID-19 Rapid Assessment with Migrant Associations in Italy](#) and [Summary](#)

Featured Tools and Resources



[COVID-19 Resource Bank on Ensuring Migrant Inclusion and Social Cohesion](#) (DISC Initiative)

This tool aims to help IOM field missions easily find information and resources for reformulation of projects, programme information tools, and other communication materials to support innovation on the ground. The resource bank contains briefing notes, statements, practical guides, online dashboards, research and advocacy materials as well as audiovisual tools.

IOM Mobile Apps for COVID-19 Response

IOM's [Migration Translation App \(MiTA\)](#) for phones, facilitates communication between migration management officials and migrants during border procedures and situations of first contact. This free, custom-built offline application can offer a greater help when migrants move across borders during the COVID-19 crisis. It contains 52 simple questions relating to the identity, mode of travel, health and immediate protection needs of the migrants available in 12 languages.



[Support For Migrants App](#) provides advice on all the nearest services and support for migrants and refugees in the Western Balkans. Messages specifically formulated for the COVID19 emergency are also available in English, Pashto, Urdu, Bengali, Farsi, and Arabic.



Stanford

ETH zürich

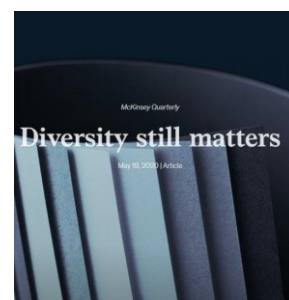
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Working Paper Series

[Who Can Work from Home?](#) (IPL)

The economic disruption caused by COVID-19 is especially difficult for workers who can't do their jobs from home—and that tends to mean people with less education, those who earn lower wages, ethnic minorities, and immigrants. A new IPL working paper explores the class divide in social distancing.

[Diversity Still Matters](#) (McKinsey)

Diversity and inclusion are at risk in the midst of the current crisis – but are critical for business recovery, resilience and reimagination. McKinsey's research has repeatedly shown that gender and ethnic diversity, inclusion, and performance go hand in hand. Their latest report, [Diversity wins: How inclusion matters](#), reinforces the business case.





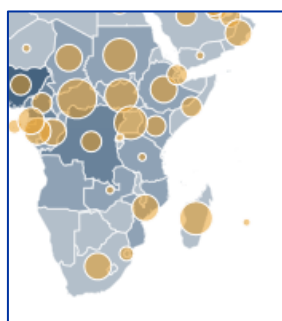
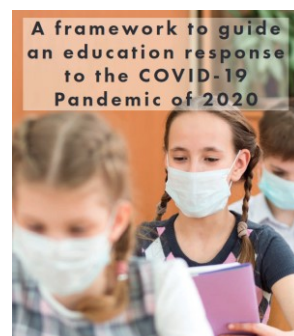
[My Hero is You, Storybook for Children on COVID-19 \(IASC\)](#)

The project was supported by global, regional and country based experts from Member Agencies of the IASC MHPSS RG, in addition to parents, caregivers, teachers and children in 104 countries. It should be read by a parent, caregiver or teacher alongside a child or a small group of children.

[Coronavirus school closures: What do they mean for student equity and inclusion? \(OECD\)](#)

The article explores how a holistic approach to education – that addresses students’ learning, social and emotional needs – is crucial, especially in times of crisis.

OECD’s [Framework to guide an education response to the COVID-19](#) aims at supporting decision making to develop and implement effective education response which is based on a rapid assessment of education needs and emerging responses in 98 countries.

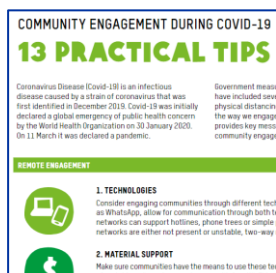


[Interactive database - Language diversity in the COVID-19 pandemic \(Translation without Borders\)](#)

COVID-19 is affecting linguistically diverse countries. People have a right to access the information they need during the COVID-19 pandemic. Yet often that information is not available in languages and formats they understand. The data shown here can help organizations prioritize their use of limited resources and better prepare for multilingual communication.

[Age, Gender and Diversity Considerations – COVID-19 \(UNHCR\)](#)

This guidance on Age, Gender and Diversity (AGD) Considerations in relation to the COVID-19 pandemic is intended as a quick reference tool to support colleagues in the field who are working directly with populations of concern and/or engaged in protection advocacy. It has been developed in response to requests for further guidance on how the evolving COVID-19 pandemic may disproportionately impact specific ADG groups.



[Community Engagement Checklist and Practical Tips \(Oxfam\)](#)

These documents provide guidance on remote community engagement and raises specific questions on various components of community engagement related to COVID-19 which include adapting to the new context, information and communication, participation, M&E, capacity building, etc.



IOM Events



- 28 May - [European Cities on the Front Line Advancing migrant inclusion in times of COVID-19](#), analyzing the main challenges faced by local administrators in granting migrants access to public services, and sharing recommendations to optimize integration outcomes in the face of various constraints.
- 20 May - ["Global Diaspora Virtual Exchange on Response to COVID-19"](#) (in French) (Webinar) creates a collaborative space for diaspora groups to share their experiences and best practices in response to the COVID-19 crisis and beyond.
- 18 May - [The state of LGBTIQ+ rights in the world and a discussion about IOM's workplace](#) (Webinar) - this global event organized to commemorate the International Day Against Homophobia, Biphobia and Transphobia.
- 28 April - ["Ethical recruitment and protection of migrant workers in times of COVID-19"](#) (IOM RO Brussels, Webinar) explores the implications of the COVID-19 pandemic for ethical recruitment procedures and migrant workers' protection ([presentation](#)).
- 22 April - ["Global Diaspora Virtual Exchange on Response to COVID-19"](#) (Webinar) is a space for collaboration for diaspora groups from different communities to share experiences and best practices, as well as discuss about response to the COVID-19 crisis and beyond.
- 16 April - [Presentation of new tools in the field of Resettlement Programming and update on recent discussions](#) (IOM HQ, Webinar) introduced new guiding tools for country missions during the development and implementation of their resettlement programmes and related health protocols, and informed about discussions and plans regarding the future resumption of RST operations once COVID-19 allows ([recording](#)).
- 1 April - ["Managing Through - Psychosocial care and support during the COVID-19 situation"](#) (IOM HQ & Bern, Webinar) helped staff consider the current situation, its psychological impact, and some possible solutions ([resources](#)).

General Events

- [20 - 21 May](#) - Incorporating COVID-19 into Refugee Cultural Orientations ([Cultural Orientation Resource Exchange](#) - CORE, Webinar) provides tools and tips, including new COVID-19 supplemental lesson plans and refugee-facing resources, to address the pandemic with refugees
- 18 May - ["Why Ethical Considerations Matter in Responding to COVID-19 Pandemic?"](#) (part of series "Inclusion in the time of COVID-19") (UNESCO, Webinar) exchanges experiences and expertise on the social dimensions of "leaving no one behind" and on actions taken to fight against the growing incidents of racism and discrimination.
- 15 May - ["Protecting and Empowering Persons with Disabilities in the Context of the COVID-19 Pandemic"](#) (UN ESCAP, Webinar) identifies policy gaps and challenges in addressing the needs of persons with disabilities, and proposes some solutions for key stakeholders to deal with the pandemic.
- 14 May - [COVID-19 and the Impact on Latin American Migration](#) (Chatham House, Webinar) discusses the impact COVID-19 is having on migrants from Central America and Mexico.
- 6/13/20 May - ["Migration, Movement and Mobility in the Era of COVID-19"](#) (Rift Valley Forum, African Migration and Development Policy Centre (AMDPC) and Amnesty International, Webinar) aims to unpack the issues arising from the response to the pandemic on migration, tackling a number of questions and exploring potential policy responses with international organizations like IOM, ILO, and UNHCR.
- 6 May - ["The effects of COVID-19 on Mobility and Citizenship"](#) (Migration Policy Centre EUI, Webinar) discusses how public responses to the pandemic challenge our thinking about the meaning and purposes of citizenship
- 28 & 30 April - ["The Impact of COVID-19 on Migrants, Migration and Development"](#) (GFMD, Webinar) affords stakeholders an opportunity to reflect on the challenges for migrants, to take stock of effective responses to those challenges, and to identify joint action and potential partnerships among GFMD constituents aimed at mitigating the adverse impact of the global public health crisis on migrants and migrant communities.
- 9 April - ["Reducing COVID-19 vulnerability amongst displaced populations and migrants"](#) (UNDRR, Webinar) identified emerging lessons generated from experiences in combating COVID-19 in refugee camps in Cox's Bazaar, Bangladesh, and amongst internally displaced communities in Afghanistan, as well as explored how COVID-19 is impacting migrant workers in Asia-Pacific, featuring India as a case study.







DISC Initiative

The Joint Global Initiative on Diversity,
Inclusion and Social Cohesion

Disclaimer: The opinions expressed in this digest are those of the author and do not necessarily reflect the views of the International Organization for Migration (IOM).



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