



Commentary

Health and migration: Will migrants share the road to recovery from COVID-19?

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International migration often creates complex social and political controversies. People migrate regardless of risks, looking for security from conflicts, poverty, human rights violations or climate-related changes. Often refugees and migrants [1,2] live on the fringes of society, in fear and without access to essential health services. Yet migrants make valuable contributions economically, socially and culturally [3]; for example, the company that developed the first effective COVID-19 vaccine was founded in 2008 by a Turkish immigrant couple in Germany.

The United Nations and its Member States committed in 2018 to provide better tools to manage migration, with an international framework and overarching statement documents, including the 2030 Agenda for Sustainable Development Goals and the Global Compacts for safe, orderly and regular migration (GCM) and a compact for refugees. A Network on Migration involving more than 40 United Nations agencies was set up to ensure effective, timely and globally coordinated support to countries. A Start-up Fund for Safe, Orderly and Regular Migration was established, the first of its kind, to foster capacity and better managed migration policies. International response to the health needs of migration are implemented at a country level and WHO is currently acting to support measures to address public health challenges associated with human mobility. WHO is engaging with member states and key partners (e.g. United Nations Refugee Agency and International Organization for Migration) to create alliances and a collaboration platform for technical assistance, research and capacity-building for health and migration worldwide.

Despite all these efforts, there is a substantial risk of a backlash in public opinion against refugees and migrants due to the

unprecedented health, social and economic challenges brought about by COVID-19. Negative attitudes and stereotypes against migration could be exacerbated by the fear of COVID-19 and growing unemployment. There is also the potential for misinformation regarding the role of refugees and migrants in the spread of the virus, whilst, in the short term, border closures and travel restrictions have caused a significant decline in migration and probably also in irregular migration [4]. Migration has a positive impact on our societies, contributing to economic growth, skills and employment, education, technology, taxes and social contributions, and the COVID-19 pandemic challenges societies to embrace sympathetic policy responses.

Within populations, some groups are more vulnerable to the virus and to the knock-on effects of containment measures. Lockdown designed to slow the spread of infection has significant unequal economic and health effects [5]. Refugees and migrants can be particularly vulnerable because of their higher incidence of poverty and overcrowded living conditions. Refugees and migrants are also widely represented among those working in "essential" industries where physical distancing is difficult and risk of infection higher, such as the health and care sector, transport, construction, retail and hospitality. As a result, they are at a higher risk of COVID-19 infection yet may also have more difficulty in accessing care. COVID-19-related mortality rates for immigrants are higher than for the majority of native-born people [6]. Studies of previous economic crises and social studies during the current pandemic suggest that COVID-19 is likely to have a disproportionate impact on refugees and migrants [7]: tens of millions have lost their employment and are at risk of falling into extreme poverty [8]. Further, school closures and distance learning may have put children of refugees and migrants at a disadvantage because their parents have fewer resources.

Globally, our societies will be evaluated on how we respond to COVID-19 and to its health, social and economic impacts. The pandemic has highlighted significant inequities between high- and low-income countries, both in the burden of disease and mortality and the capacities to respond. A key issue is "vaccine nationalism", yet equitable prioritization and access to treatment and vaccines is vital for all to be safe. The COVAX initiative is the vaccine pillar [9] of the Access to COVID-19 Tools (ACT) Accelerator, a global collaboration to accelerate the development, production and equitable access to COVID-19 tests, treatments and vaccines. How will the World support this endeavor? Globally our societies will be evaluated on how

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COVAX was managed, what access to vaccines was provided to those living in low-income countries, and what attention was provided to those in low-income countries, including refugees and migrants. [10] At the time of writing, COVAX needs additional financial resources beyond those already pledged if it is to achieve its target. Nevertheless, optimistically, COVAX has now begun to deliver vaccines and recently announced a delivery target of 337.3 million doses by June 2021.

Vaccine equity is perhaps today's most compelling health human rights issue. Do we really mean our commitment to the human right to health and universal health coverage and will we ensure access to vaccines is provided to those living in low-income countries and to the vulnerable, including refugees and migrants? Recovering from the COVID-19 pandemic provides the opportunity to reduce inequities and for a better inclusion of vulnerable group populations, such as migrants and refugees, in accessing health systems.

Contributors

Dr Jakab - Study design, writing,
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 Mr Hossain - Data collection
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Declaration of Interests

None.

References

- [1] United Nations High Commissioner for Refugees. Convention and protocol relating to the status of refugees. <https://cms.emergency.unhcr.org/documents/11982/55726/Convention+relating+to+the+Status+of+Refugees+%28signed+28+July+1951%2C+entered+into+force+22+April+1954%29+189+UNTS+150+and+Protocol+relating+to+the+Status+of+Refugees+%28signed+31+January+1967%2C+entered+into+force+4+October+1967%29+606+UNTS+267/0bf3248a-cfa8-4a60-864d-65cdfece1d47> Date December 29 JanuaryDate accessed 30 April 2021.
- [2] International Organization for Migration. Who is a migrant. <https://www.iom.int/who-is-a-migrant> Date JanuaryDate accessed 30 April 2021.
- [3] Organisation for Economic Co-operation and Development. Is migration good for the economy? Migration policy debates; <https://www.oecd.org/migration/OECD%20Migration%20Policy%20Debates%20Numero%202.pdf> DateDate accessed 27 April 2021.
- [4] European Commission. Migration statistics update: the impact of COVID-19. https://ec.europa.eu/commission/presscorner/detail/en/IP_21_232 Date 29 JanuaryDate accessed 27 April 2021.
- [5] Bamba C, Riordan R, Ford J, et al. The COVID-19 pandemic and health inequalities. *J Epidemiol Community Health* 2020;74:964–8 Date 2014. Date accessed 27 April 2021.
- [6] International Organization for Migration. Migration data relevant for the COVID-19 pandemic. migration data portal. <https://migrationdataportal.org/themes/migration-data-relevant-covid-19-pandemic> Date 10 MarchDate accessed 27 April 2021.
- [7] Organisation for Economic Co-operation and Development. What is the impact of the COVID-19 pandemic on immigrants and their children? <http://www.oecd.org/coronavirus/policy-responses/what-is-the-impact-of-the-covid-19-pandemic-on-immigrants-and-their-children-e7cbb7de/> Date 19 OctoberDate accessed 27 April 2021.
- [8] International Labour Organization. COVID-19 and the world of work. seventh edition https://www.ilo.org/wcmsp5/groups/public/@dgreports/@dcomm/documents/briefingnote/wcms_767028.pdf Date 25 JanuaryDate accessed 27 April 2021.
- [9] World Health Organization. COVAX: working for global equitable access to COVID-19 vaccines. <https://www.who.int/initiatives/act-accelerator/covax> DateDate accessed 27 April 2021.
- [10] United Nations High Commissioner for Refugees. Refugees receive COVID-19 vaccinations in Jordan. <https://www.unhcr.org/uk/news/press/2021/1/5ffff614/refugees-receive-covid-19-vaccinations-jordan.html> Date 14 JanuaryDate accessed 27 April 2021.