



## **2021 OHCHR REPORT**

To Dr. Felipe González Morales, United Nations Special Rapporteur on the Human Rights of Migrants,  
in response to the call for inputs  
“After one and half year: the impact of COVID-19 on the human rights of migrants”

June, 2021

### **REFUGEE WOMEN, COVID-19, AND THE IMPORTANCE OF COMMUNITY**

by the Center for Migration, Gender, and Justice

#### **Introduction**

“Community is the best place for us. For all of us refugees.” These words by a refugee woman pointedly summarize our findings from research on refugee women’s livelihoods during the COVID-19 pandemic in Portland, Oregon (US).

Between May and July 2020, we conducted interviews with fifteen refugee women and representatives of organizations working in the context of migration. We complemented these interviews with online observations of community efforts that provide resources to refugees. Through this immersive practice, we learned that centering community is key in sustaining refugee women’s livelihoods during the pandemic and beyond.

Refugee women have been impacted by the pandemic in various specific ways: from losing jobs and healthcare to becoming essential workers and assuming additional caretaker roles, to finding oneself again in unprecedented situations of limited mobility and social isolation. These impacts have been informed by restricted access to resources and services, lack of information about resources and services, and paramount fear due to ever-changing policy. In many ways, community efforts have - at the very least - complemented national COVID-19 responses (Golesorkhi et al., 2020).

We hold that the importance of community efforts points to the urgency of upholding human rights of migrants. Many national COVID-19 response plans leave migrants (of varied statuses) out of their measures, hereby exacerbating already existing marginalization and vulnerabilities. The impacts thereof have been particularly detrimental to refugee women as gendered implications of the pandemic have been laid bare.

For instance, emerging research shows that many refugee women are now unable to receive gendered health resources such as birth control and feminine hygiene products due to disruptions of supply lines. Furthermore, quarantine orders have led to increased gender-based violence (GBV), especially domestic violence. This increase in domestic violence has occurred in the context of funding for violence prevention and response being historically low with .012% of all humanitarian funding between 2016-2018 being allocated for GBV. COVID-19 responses reflect this data, as out of the over 2 billion dollars requested by the UN for its COVID relief programs, only \$375 million combined have been allocated to the United Nations High Commissioner for Refugees (UNHCR) and the United Nations Population Fund (UNFPA), organizations addressing refugees' and women's livelihoods, respectively (Cone, 2020).

Still, much remains unknown, resulting in COVID-19 responses that overlook intersectional experiences such as that of refugee women. Gaps between policy and lived experiences thus exist and the specific needs and challenges of refugee women continue to be unmet, including in the US.

In the US, the former Trump administration closed the US-Mexico border on April 24, 2020 as a means to "preserve employment opportunities for US citizens" (American Immigration Council, 2020). Subsequently, United States Citizenship and Immigration Services (USCIS) offices stopped processing immigration and asylum applications. The Center for Disease Control (CDC) authorized the denial of entrance to any migrants who were deemed a public health risk, leading the US Border Patrol to immediately expel 20,000 people from the southern border. Indeed, the COVID-19 pandemic and related national responses disrupted virtually every aspect of the US immigration system (Ibid).

Overseas visa processing as well as in-country processing of immigration cases came to a near standstill as many immigration court hearings were postponed. Furthermore, despite the high risk of COVID-19 transmission, tens of thousands of people have remained in immigration detention centers. Meanwhile, the US Congress left millions of migrants and their families out of relief measures (Ibid). According to the Migration Policy Institute (2021), an estimated three million persons in mixed-migration status families were excluded under the Coronavirus Aid, Relief, and Economic Security Act (CARES Act). Gendered implications of this exclusion from COVID-19 responses have manifested in areas such as employment and health in that migrant women (including refugee women) are disproportionately employed in sectors that have been especially hard hit with job losses (i.e. waitstaff, housekeepers, etc.) while migrant women who work in frontline industries (i.e. health care, food production, etc.) have been at high risk of getting COVID-19 (Gelatt et al., 2020; Capps and Gelatt, 2020).

When migrants are left out of national COVID-19 response plans, it is up to other mechanisms to address the specific needs and challenges that migrants face. In the context of our research (Portland, OR), these mechanisms include community efforts that have - at the very least - complemented national COVID-19 responses in terms of economic relief, health support, and information sharing (amongst others).

For example, Unite Oregon's "COVID-19 Immigrant and Refugee Fund" assists immigrants, refugees, and asylum-seekers who have been excluded from other relief programs. This involves directing \$15,000 to community members whose needs have already been identified by the organization, including members such as Sara, a single mother in a mixed-migration status family and survivor of domestic violence who previously worked in the hospitality industry at a local restaurant. Sara and her daughter, like many mixed-migration status families, did not qualify to receive the \$1,200 in federal coronavirus stimulus payments because even a single ineligible individual in a family disqualifies every member of that family, regardless of whether some or most family members are citizens, permanent residents, or otherwise eligible. The COVID-19 Immigrant and Refugee Fund was created for experiences such as this and aims to raise \$50,000 through donations by allies who received their federal stimulus payment (Unite Oregon, 2021).

Similarly, the “Oregon Worker Relief Fund” was created out of the understanding that impacts of the COVID-19 pandemic are disproportionate. Not only were migrants underserved in national response plans, they were overrepresented in cases of COVID-19 and economic losses. A coalition of around 80 organizations have endorsed the Oregon Worker Relief Fund in order to support persons, chiefly migrants and their families, who were left out of federal and state support measures. The Oregon Worker Relief Fund also provides temporary financial assistance to those left out of programs such as unemployment insurance and relief. This fund is a community-based effort to rapidly address the needs and challenges of an estimated 74,000 migrant workers in Oregon (Causa, 2021).

With regards to health support, the Rosewood Initiative’s “Vaccine Clinics” form an integral part of community-based efforts to complement national COVID-19 responses. The clinics operate within the Multnomah County - Racial and Ethnic Approaches to Community Health (REACH) program which is committed to offering equitable COVID-19 vaccine access to marginalized populations (Multnomah County, 2021). The Rosewood Initiative is also a partner in “Oregon’s COVID-19 Vaccination Plan,” a framework established by Governor Kate Brown, the Oregon Health Authority (OHA), and the Oregon Department of Human Services (ODHS). The framework includes community engagement through partnerships and grant funding to over 170 community-based and faith-based organizations (State of Oregon, 2020).

Additional community-based health support, specifically mental health support, has been provided by the Portland Refugee Support Group (PRSG). PRSG is a non-profit organization founded in 2016 that offers support to refugees who arrive through resettlement agencies. The organization is volunteer-run and has provided resources and services to 100 refugee families (over 400 individuals, and over 200 children) over the years. PRSG’s work focuses on four major components: adult and child education, community education about refugees, psycho-social support through social events and referrals for personalized counseling and mental health care, as well as life skills training. During the pandemic, PRSG’s psycho-social support has been imperative to migrant health in Portland. This has included mental health support through telehealth appointments with multilingual psychiatrists and sharing videos that feature mental and emotional well-being advice (PRSG, 2021).

Another critical aspect of community-based efforts in sustaining refugee livelihoods during the pandemic has been information sharing. The Immigrant & Refugee Community Organization (IRCO) has been, and continues to be, essential in providing accurate and accessible information to migrants in Oregon. In addition to their translation and interpretation services, IRCO has created translated material of COVID-19 information including policy updates, lockdown procedures, health and safety guidelines, and guidance on access to support services such as employment, housing, legal, and food assistance. This pertinent information is now accessible in up to 57 languages and has not only helped to withstand prevalent misinformation about COVID-19 but also to overcome language barriers (IRCO, 2021).

As this brief overview of several community efforts demonstrates, the importance of community in upholding migrant rights cannot be overstated. Whether it is economic relief, health support, or information sharing, community efforts have complemented national COVID-19 responses in meaningful and targeted ways. Given the close relationship between community-based organizations and migrants, we find it imperative to support these efforts beyond the pandemic. Indeed, we hold that civil society-government partnerships must be facilitated through collaborative and sustainable approaches as the protection of human rights necessitates shared agency, representation, and accountability as is our mission at the Center for Migration, Gender, and Justice.

## Authors and Contact Details:

Dr. Lara-Zuzan Golesorkhi  
Grace Fortson

## Center for Migration, Gender, and Justice

P.O. Box 600413  
70304 Stuttgart, Germany  
Email: [info@migrationgenderjustice.com](mailto:info@migrationgenderjustice.com)  
Website: [www.migrationgenderjustice.com](http://www.migrationgenderjustice.com)  
Facebook: @migrationgenderjustice  
Instagram: @cmgj\_ngo  
Twitter: @cmgj\_ngo  
#migrationgenderjustice

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