COVID-19: SUPPORTING MARGINALISED POPULATIONS IN SOUTH EAST ASIA

ADDRESSING VULNERABILITY IN MARGINALISED COMMUNITIES

States must cover health treatment regardless of legal status, enlisting vulnerable populations in safety net programmes, and waiving their visa requirements. South Korea covered the cost of treatment, regardless of legal status, and exempted public officials from their obligation to report violations of immigration laws.

When assessing protection needs and the design of relief measures, it is vital to consider local context, such as the connections between informal work, international migration, and unplanned urbanisation.

Support must be tailored to the needs of different groups and aim to include all vulnerable individuals in social protection systems - innovative and informal ways must be found to distribute support to those without legal status.

Government and civil society groups should work to minimise fear and distrust that may prevent vulnerable communities from accessing care and assistance.

Guidance is necessary for roles and professions often held by women (carers, cleaners, health professionals, garment workers), and ensuring labour protections are enforced.

Formal welfare mechanisms are less able to reach marginalised groups (migrants, informal workers and people living in informal settlements). As a result these groups are more likely to become destitute, hungry and at risk of COVID-19 infection without recourse to treatment.
WHY DO DECISION MAKERS NEED TO PAY ATTENTION TO THE INFORMAL ECONOMY?

Informal workers are less likely to be informed of guidelines, or be in workplaces that meet social distancing, provide PPE or handwashing stations. The insecure and low incomes of informal work also translate into low savings and food stockpiles making workers particularly vulnerable.

The informal economy makes up over 68% of the region’s economy, yet informal work is not protected under labour laws and is typically more hazardous than formal work with no formalised protections.

Informal work tends to be under-recognised which contributes to inadequate data and policy responses.

As a result of control measures in the pandemic, informal workers are losing work and have few options for their livelihoods in the interim.

Economic policy should account for the informal economy and its workers by encouraging linkages to informal businesses, improved access to capital, health services and protective equipment.
PROTECTING MIGRANTS FROM A PRECARIOUS SITUATION

- Transnational migrants’ residency status may impede their access to health services or in their resident country’s safety net programmes. Travel bans and border closures mean that there are large groups of people congregating together – increasing the risk of the circulation of COVID-19.

Countries should work with migrant associations and networks to plan how to ensure access to health care for migrants under their jurisdiction, regardless of their nationality or legal status.

Migrants under administrative detention related to migratory status should be released to avoid unnecessary crowding and contagion.

Migrants should be provided temporary accommodations that have access to water, sanitation, and enough space to enable physical distancing and self-isolation when necessary.

Local public health officials should provide migrant workers with protective equipment and attend to their public health needs.

Ensure safe passage of people, avoid agglomeration and enable physical distancing at the border.
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MANAGING COVID-19 IN INFORMAL SETTLEMENTS

People living in informal urban and peri-urban settlements are less likely to have access to health care and live with multiple underlying health issues. Inadequate housing and infrastructure physical distancing, isolation and hygiene measures increase residents’ risk of infection.

Because of strict restrictions governments are inequitably enforcing measures and are targeting marginalised areas like informal settlements - any enforcement should be done peacefully.

Tensions between informal settlement residents and governments are emerging. Efforts should be made to resolve these tensions between the state, local municipality and residents collaboratively.

Settlements are experienced in mounting their own response and relief efforts, and the response should build on local efforts such as distributing food aid or establishing quarantine zones.

Policymakers should disseminate public health and social protection guidance via trusted sources to informal settlement residents. These trusted sources may include local leaders, civil society, or religious leaders depending on the context.