South-South Migration, Food Insecurity and the COVID-19 Pandemic



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Abstract

The implementation of global migration governance processes such as the 2030 Sustainable Development Agenda and the Global Compact for Migration has been stalled by the COVID-19 crisis as flows of and opportunities for international migrants shrink through the containment strategies adopted by most governments in response to the pandemic. Migrants have been disproportionately affected by COVID-19 and the policies taken in response to the pandemic, with higher risk of exposure to the virus, greater likelihood of working in sectors that have experienced major economic downturn, lower rates of access to social support mechanisms and health care, and increased vulnerability to poverty and food insecurity. This paper examines the ways in which the globalized migration regime has been disrupted and reconfigured by COVID-19 and argues for urgent research and policy attention. It explores how the pandemic has affected migrants' food security and how food insecurity might impact migration flows. The authors conclude that a concerted evidence-based response to the crisis of immobility is urgently needed.

Keywords

COVID-19, migration governance, social support, food insecurity

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Key Points

- 1. COVID-19 and the containment and mitigation strategies adopted by most governments have had a major impact on the flows of and opportunities for international migrants, creating what has been called a global crisis of immobility.
- 2. The implementation of recent global migration governance processes such as the 2030 Sustainable Development Agenda and the Global Compact for Migration has been stalled by the pandemic and many development benefits of migration have been compromised.
- 3. South-South migrants have had their vulnerabilities exacerbated by COVID-19 and the policies taken in response to the pandemic. Migrants have been disproportionately affected, with higher risk of exposure to the virus, greater likelihood of working in sectors that have experienced major economic downturn, lower rates of access to social support mechanisms and health care, and increased vulnerability to poverty and food insecurity.
- 4. A concerted evidence-based response to the crisis of immobility is urgently needed. With a major consequence of the pandemic likely to be further entrenchment of marginalization, precarity, and inequality, more research and policy focus is essential for inclusive and effective COVID-19 responses that will ensure the inclusion of migrants.

The COVID-19 pandemic and the containment and mitigation strategies adopted by most governments have had a major impact on the flows of and opportunities for international migrants, creating what Kathleen Newland (2020: 1) calls a "worldwide crisis of immobility." The implementation of recent global migration governance processes such as the 2030 Sustainable Development Agenda and the Global Compact for Migration has been stalled by the pandemic (Barbier and Burgess, 2020; CFS, 2020; Gagnon, 2020; Valensisi 2020; van Riemsdijk et al., 2020; Yeoh, 2020). Many well-documented development benefits of migration have also been compromised (Crush, 2019). Prior to the pandemic, increasing policy and research attention was being paid to the phenomenon of South-South migration; that is, the rapid increase in numbers and complexity of migration movements between countries of the global South in Asia, Sub-Saharan Africa, North Africa and the Middle East, and Latin America and the Caribbean (Crush and Chikanda, 2019; Fiddian-Qasmiyeh, 2020; Pholphirul, 2020). The impacts of the pandemic on South-South migration flows are largely undocumented, as are the hardships experienced by migrants in crowded and unsanitary conditions far away from home, as well as their families and communities in countries of origin (Ullah et al., 2021).

In this paper we examine the ways in which the globalized migration regime has been disrupted and reconfigured by COVID-19 and argue for urgent research and policy attention. First, we examine the growing pre-pandemic phenomenon of South-South migration and highlight the ways in which international South-South migrants have had their vulnerabilities exacerbated by COVID-19 and the policies taken in response to the pandemic. Second, we point out the COVID-19-related impacts on "both ends of the chain" (i.e.

in areas of origin and destination) (Hammond, 2020). Third, we explore how the pandemic has affected migrants' food security and how food insecurity might impact migration flows. Finally, we reflect on the need for a concerted evidence-based response to the worldwide crisis of immobility.

Webs of South-South Migration

Figure 1 shows that over the last three decades, South-South migration has become the most important general form of migration globally, exceeding South-North flows from 2010 onwards. Most countries in the South both receive and send migrants with 19 countries sending over one million migrants and 23 receiving more than one million migrants. Table 1 shows the major South-South countries of migrant origin and Table 2 the major South-South countries of destination. Only three countries - India, Bangladesh and Malaysia – appear on both lists. These tables also illustrate the geographical complexity of South-South migration, showing the number of other countries from which each country on the list either receives migrants from or sends migrants to. To put this another way: there are migrants from India in 85 other countries and migrants in South Africa from 107 other countries. Pandemic restrictions and mitigation measures in any one country therefore have the potential to affect migrants and migration flows from numerous other countries across the globe. The reverse is also true: that is, mobility restrictions on out-migration in any one country have the potential to affect migration to many other countries. However, impacts are likely to be felt most strongly at both ends of bilateral migration corridors, the major ones of which are itemized in Table 3

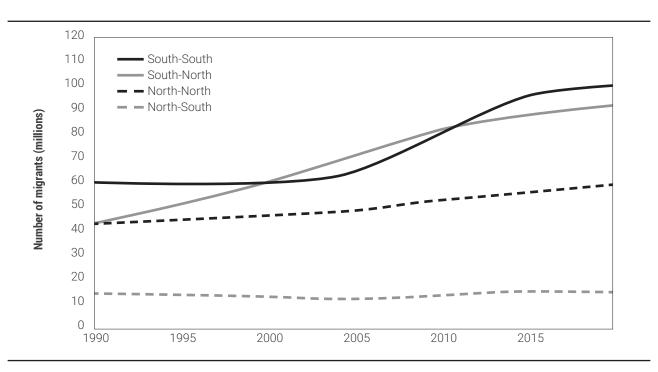


Figure 1: Major Migration Types, 1990-2017

Source: UN DESA (2017)

Table 1: Most Important South-South Migration Countries of Origin, 2019				
Origin Countries	No. of Migrants	No. of Destination Countries		
1. India	11,957,979	85		
2. Bangladesh	7,029,616	42		
3. Pakistan	4,802,638	64		
4. Afghanistan	4,413,335	32		
5. China	4,412,262	96		
6. Indonesia	4,078,093	49		
7. Palestine	3,774,663	26		
8. Myanmar	3,475,625	22		
9. Syria	3,278,057	41		
10. Egypt	2,880,143	44		
11. South Sudan	2,569,640	20		
12. Philippines	2,173,716	60		
13. Nepal	1,996,903	26		
14. Venezuela	1,925,462	34		
15. Sudan	1,898,352	35		
16. Burkina Faso	1,549,354	15		
17. Somalia	1,543,336	32		
18. Colombia	1,412,886	29		
19. Democratic Republic of Congo	1,384,025	39		
20. Malaysia	1,271,273	38		

Source: Compiled from UN DESA data

Table 2: Major South-South Migration Countries of Destination, 2019 **Destination Countries** No. of Migrants **No. of Origin Countries** 1. Saudi Arabia 12,680,056 18 2. United Arab Emirates 8,223,429 29 3. India 5,124,994 26 4. Thailand 3,606,374 34 5. Jordan 3,311,708 48 9 6. Pakistan 3,183,094 7. Malaysia 3,162,217 19 8. Kuwait 2,879,452 29 15 9. Hong Kong 2,816,493 10. South Africa 2,487,585 106 11. Côte d'Ivoire 2,477,985 17 12. Iran 2,439,002 6 13. Qatar 29 2,178,445 14. Oman 2,177,086 17 15. Singapore 1,885,702 12 16. Lebanon 22 1,860,171 85 17. Argentina 1,849,754 18. Bangladesh 1,741,183 14 19. Sudan 1,196,197 16 20. Nigeria 10 1,127,868

Source: Compiled from UN DESA data

Table 3: Major South-South Migration Corridors, 2019				
Origin Country	Destination Country	No. of Migrants		
1. India	United Arab Emirates	3,419,875		
2. Bangladesh	India	3,103,664		
3. India	Saudi Arabia	2,440,489		
4. Afghanistan	Iran	2,310,292		
5. China	Hong Kong	2,272,293		
6. Palestine	Jordan	2,118,267		
7. Myanmar	Thailand	1,858,735		
8. Indonesia	Saudi Arabia	1,667,077		
9. Afghanistan	Pakistan	1,589,146		
10. India	Pakistan	1,588,067		
11. Pakistan	Saudi Arabia	1,447,071		
12. Burkina Faso	Côte d'Ivoire	1,367,916		
13. India	Oman	1,325,444		
14. Bangladesh	Saudi Arabia	1,246,052		
15. Indonesia	Malaysia	1,225,156		
16. Syria	Lebanon	1,162,305		
17. India	Kuwait	1,124,256		
18. South Sudan	Uganda	1,100,096		
19. Pakistan	India	1,082,917		
20. Bangladesh	United Arab Emirates	1,079,013		
21. Venezuela	Columbia	1,048,714		

Source: Compiled from UN DESA data

In 2018, the ILO estimated that of the global total of 258 million international migrants, 164 million were migrant workers (defined as migrant individuals of working age and older who are either employed or unemployed in their current country of residence). Migrant workers constitute nearly 5% of all workers globally (ILO, 2018: 15). One-third of all migrant workers were located in the Global South including 33 million (20%) in Asia and the Pacific, 23 million (14%) in the Arab States, 13 million (8%) in Africa, and 4 million (3%) in Latin America and the Caribbean. In sum, nearly 75 million international migrant workers and their dependants in the South stood to be affected in some way by the COVID-19 pandemic.

Mobility and Immobility

Jacqueline Bhabha (2020) notes that "vulnerable populations, including those experiencing socioeconomic hardship, racial, ethnic or caste-related injustice and other forms of structural inequality, face disproportionate pandemic-related impacts." From the research published to date, it is increasingly clear that the pandemic has exacerbated migrant vulnerabilities in both the Global South and the Global North (Rajan, 2020; Brito, 2020; Chamie, 2020). Some of these vulnerabilities are specific to migrants' circumstances, while other vulnerabilities are shared with local populations. In the following sub-sections, the migrant-specific impacts of the pandemic are itemized.

Contained Mobility

In March 2020, governments responded to the threat of COVID-19 by instituting travel bans, flight suspensions, and border closures, many of which remain in place (Hale et al., 2020; Piccoli et al., 2021). These measures, in addition to the economic impact of lockdown policies, resulted in a situation where "migrants were stranded in countries of destination while others, without permanent residence permits, were required to return to their countries of origin, and still other chose to return after losing their jobs and incomes abroad" (Newland, 2020: 3). Even when governments did not issue travel bans, the processing of visas was suspended by

many countries. The international refugee system has also been impacted by the closing of borders and tightening immigration regimes. Of the 120 countries that have instituted a form of border closure, only about 30 were still considering the claims of asylum seekers in mid-2020 (Semple, 2020). In addition, many resettlement programmes ground to a halt. But these restrictive mobility measures disrupted mass deportation policies as well. As Guadagno (2020: 110) notes, "countries have halted deportation processes of irregular migrants given the impossibility to logistically and physically proceed due to many travel restrictions passed by countries all over the world." Some, including the US, continued deportations and expelled 185,000 people during the course of 2020 (Cénat, 2020). Many countries, including Canada, have exhibited undue haste in resuming deportations despite stringent restrictions on other forms of mobility.

The most obvious and immediate impact of COVID-19 in 2020 was the effect on migration flows of the closure of border posts and attendant restrictions on cross-border mobility. In the case of Southern Africa, for example, the dramatic impact of these restrictions on legal patterns of migration can be clearly seen in administrative data. Table 4 shows that there were over 11 million arrivals in South Africa from January to September 2019 and only 4 million in the same period in 2020. For the months April to September, the number was 7.5 million in 2019 and only 352,000 in 2020. In January and February 2020, the positive increase in numbers was abruptly replaced by negative growth in March. The number of migrant arrivals plummeted during this month, registering a sharp drop of nearly 34%. The following months witnessed acute contractions exceeding 90%. By April, fewer than 30,000 migrants travelled to the country. There was a slight increase from May to July, even though total arrivals were less than 70,000 migrants each month, well below the regular volumes documented in the pre-COVID-19 period. These figures will recover with the opening of all South African borders in November 2020 but the numbers will take years to reach 2019 levels as so much international travel is still at a greatly reduced level.

Table 4: Comparison of International Migrant Arrivals in South Africa, 2019 and 2020					
Month	2019	2020	% Change (2019-2020)		
January	1,561,510	1,595,388	2.2		
February	1,205,901	1,218,468	1.0		
March	1,301,855	863,232	-33.7		
April	1,350,167	29,341	-97.8		
May	1,213,675	49,481	-95.9		
June	1,163,574	62,841	-94.6		
July	1,238,165	68,914	-94.4		
August	1,377,914	67,051	-95.2		
September	1,219,616	75,273	-93,9		
Total	11,632,377	4,029,989	-65.5		
Total (April-September)	7,563,360	352,901	-95.4		

Source: Statistics South Africa (2020)

Immigration restrictions and disruptions in transport services have also impacted international migrants' ability to voluntarily return to their countries of origin (World Bank, 2020a). However, COVID-19 containment and mitigation measures have also led to increased mobility in some parts of the world, particularly by migrants taking matters into their own hands and returning home, often in extremely trying circumstances. In many cases, particularly for migrants in neighbouring countries, the first response to sudden loss of employment and draconian lockdowns was to head for home which had the unintended consequence of disseminating the coronavirus from one country to another and from urban hotspots to rural communities. In the early months of the pandemic, for example, an estimated 100,000 Venezuelan migrants in Colombia made the decision to return home, many on foot (Turkewitz and Herrera, 2020). Over 900,000 Afghan migrants are estimated to have returned from Iran and Pakistan during 2020 (IOM, 2021). In some instances, governments of host societies have pressured the governments of countries of origin to support their repatriation. In the Gulf States, for example, in the context of a collapse of oil prices and massive layoffs, countries in South Asia were pressured to repatriate their citizens, because they were unwilling to provide for migrant workers' basic subsistence and health needs (Yeoh, 2020: 5).

Internal migrants have also been directly and heavily impacted by travel bans, lockdowns, and social distancing measures (Martin and Bergmann, 2020). The largest and best-documented pandemic-induced increase in mobility was internal to countries. Lockdown measures and economic deprivation in urban areas have pushed scores of internal migrants, especially in India and Latin American countries, to return to their (often rural) communities of origin (Lee et al., 2020; Mukhra et al., 2020). In India, where internal migration travel bans were also issued, many migrants also found themselves stranded, unable to stay in the cities where they lived and worked, and unable to return to their villages. As the World Bank (2020b: 5-6) has noted: "the crisis has created a chaotic and painful process of mass return for internal migrants in India and many countries in Latin America...The loss of jobs and livelihoods has also ruptured an important lifeline to rural households in many countries."

Migrant Job Losses and Unemployment

In many countries, internal and international migrants, like local racialized and other minorities, are over-represented in precarious formal and informal jobs that have been deemed non-essential in the context of the pandemic. In the formal sector, mass layoffs and furloughs followed as employers downsized their workforce or temporarily or permanently shut down altogether. Agriculture, mining, construction, hospitality, food services, manufacturing, domestic work and informal vending have been particularly affected sectors. In January 2021, the ILO (2021) released data showing that 8.8% of global working hours (employment losses plus reduced working hours) were lost in 2020 (compared to 2019), the equivalent of 255 million full-time jobs. Low-income countries experienced a 6.7% loss while in lower middle-income countries the figure was 11.3%. Global labour income declined by an estimated 8.3% equivalent to USD3.7 trillion or 4.4% of global GDP. The job loss equivalents by major region in the Global South include 140 million in Asia and the Pacific, 39 million in Latin America and the Caribbean, 22 million in Sub-Saharan Africa, and 5 million in the Arab States.

No specific data is available yet on migrant employment loss although the ILO notes that workers in sectors with concentrations of migrants have been disproportionately affected. Other recent estimates illustrative of the magnitude of the impact include (a) two-thirds of three million Venezuelan migrants in Colombia, Ecuador and Peru lost their jobs in 2020; (b) 200-300,000 Indian migrants in the Gulf were expected to lose their jobs and return to the major migrant-sending state of Kerala; (c) by mid-2020, 323,000 migrant workers had been sent home from Saudi Arabia and 600,000 migrants in total had returned to India; and (d) an estimated 20% of Nepal's 2.8 million workforce abroad were threatened with unemployment in August 2020 (Abella and Sasikumar, 2020; Sreejith and Sreejith, 2021; Baniya et al., 2020). These include 900,000 migrants in "elementary occupations" (such as cleaning and labouring) and 750.000 service and sales workers.

Restricted Access to Health Care and Social Protection

International migrants, especially those who are undocumented or on temporary visas, are often unable to access health-care services that are available to citizens even in normal times (Crush and Tawodzera, 2014; Loganathan et al., 2019; Fernandez, 2018). During the pandemic, even when they are legally able to access these services, they face further obstacles. As Lorenzo Guadagno (2020) notes, "language barriers, limited knowledge of the host context or prioritization of citizens may result in insufficient access [of international migrants] to health care" (Kluge et al., 2020). Those who are undocumented might avoid health assistance for fear of being reported to immigration authorities (and hence detained or deported). This is especially the case in contexts where there are no firewalls between health-care provision and immigration enforcement. Several countries, for example, deport migrants who test positive for HIV and migrant PLHIV are often forced into informal channels to access ART (Ahmed et al., 2020). While border closures and restrictions on international travel may temporarily reduce deportations, access to routine and life-saving medicines and health care are likely to be even more problematic.

Some host countries have made attempts to include international migrants (regardless of their formal status) in national programmes of COVID-19 testing, screening, and treatment. Such an approach is based on an understanding that viruses do not differentiate between citizens and non-citizens, and that to contain the spread of the virus, the whole population must be targeted. This has allowed some international migrants who were not entitled to health coverage before the pandemic to be provided with testing and treatment for COVID-19 (Yeoh, 2020). Countries that have adopted this approach include Malaysia, Singapore, South Korea, and Saudi Arabia. Some EU countries, such as Portugal and Italy, have also permitted temporary regularization of undocumented migrants so they can access the public health system (Freier, 2020).

Depending on their legal status, migrants might not have access to COVID-19 relief and support packages provided by governments in response to the economic impacts of the pandemic. As the International Labour Organization notes:

Migrant workers are often first to be laid-off but last to gain access to testing or treatment in line with nationals. They are often excluded from national COVID-19 policy responses, such as wage subsidies, unemployment benefits, or social security and social protection measures. Where access to COVID-19 testing or medical treatment is available, they may not come forward due to fear of detention or deportation, especially those in an irregular status (ILO, 2020: 2).

In South Africa, for example, undocumented migrants, temporary migrants, asylum-seekers, refugees, and stateless persons have largely been excluded from access to COVID-19 relief packages and health services (Mukumbang et al., 2020; Odunitan-Wayas et al., 2021). Small and informal businesses owned by asylum-seekers, refugees, and undocumented migrants are similarly excluded from the South African government's Business Relief Fund, thus exacerbating prior vulnerabilities.

Working Conditions

In many countries, internal and international migrants, like local racialized and other minorities, are over-represented in precarious jobs that have been deemed essential in the context of the pandemic, including in front-line services and supply chains (Foley and Piper, 2020). These jobs include care and health-care work, cleaning services, and in the production, processing, distribution, and delivery of food. This makes them particularly vulnerable to contagion, especially in circumstances where protocols and safety equipment are not provided. In addition, millions of both migrants and citizens are employed or self-employed in the informal economy throughout the Global South. As well as working in conditions that make social distancing virtually impossible (for example, in crowded marketplaces and on the streets), PPE is not supplied or readily available (ILO, 2020; FAO, 2020; Daniel et al., 2020). But migrants and local minorities are also often over-represented in precarious employment sectors that were severely impacted by pandemic lockdowns and business closures, including tourism, hospitality, non-essential retail, construction, and domestic work. With temporary and permanent layoffs and unemployment, many have experienced sudden and dramatic income loss and accompanying hardship. Migrants, unlike citizens, have generally been unable to access pandemic-related unemployment and other benefits.

Living Conditions

Many migrants reside in housing conditions that make them more vulnerable to the virus. In the large urban slums or informal settlements that characterize most cities in the global South, migrants and disenfranchised citizens live in very close quarters, and in homes lacking access to running water and hygiene products:

The informal settlements of the Global South are the least prepared for the pandemic of COVID-19 since basic needs such as water, toilets, sewers, drainage, waste collection, and secure and adequate housing are already in short supply or non-existent. Further, space constraints, violence, and overcrowding in slums make physical distancing and self-quarantine impractical, and the rapid spread of an infection highly likely (Corburn et al., 2020).

Migrants are also sometimes housed in spaces that are particularly prone to the spread of the virus, including camps, reception centres, compounds, hostels, dormitories, and precarious housing for migrant farmworkers (Alahmad et al., 2020; Alkhamis et al., 2020; Cai and Lai, 2020; Haley et al., 2020). In such spaces of infection, enforced immobility substantially increased vulnerability to COVID-19 once the virus had been introduced. Refugee camps represent another example of vulnerability through enforced immobility. These camps "usually provide inadequate and overcrowded living arrangements that present a severe health risk to inhabitants and host populations. The absence of basic amenities, such as clean running water and soap, insufficient medical personnel presence, and poor access to adequate health information are major problems in these settings" (Kluge et al., 2020: 1238; Raju and Ayeb-Karlsson, 2020).

Gendered Impacts

Women migrant workers have been impacted by the pandemic in particularly negative ways (Foley and Piper, 2020; Skinner et al., 2021). First, women migrants are over-represented in social care and health care work, which have been frontline occupations during the pandemic: "women constitute over 70 per cent of global front-line health- and social care workers and are more likely to be working (both paid and unpaid) on the front lines during this crisis in hospitals, in care facilities and in private homes, caring for patients affected by COVID-19" (Skinner et al., 2021: 3). Second, many migrant women domestic workers have been dismissed by employers because of their fears of possible transmission. Unable to find another source of income or return to their countries of origin because of closed borders, hardships have dramatically intensified (Dachs Muller, 2020). Third, in countries such as Malaysia, Singapore, Qatar and Saudi Arabia, losing their job has automatically meant losing their accommodation and work permit, as they are contractually tied to their employers and unable to find other work. Finally, an additional COVID-19-related hurdle faced by women migrant workers has been the increased levels of domestic violence recorded during the pandemic.

Depressed Remittances

Migrant remittances are estimated to have a direct impact on one billion senders and recipients each year. More importantly, two-third of these resources are used to meet the essential needs of receivers, while the remaining fiscal resources of some USD100 billion are channeled towards savings and investments. Pre-COVID-19 projections estimated that between 2015 and 2030, a total of USD6.5 trillion would be received as remittances by countries in the South, half of which would be sent to the rural poor. In 2019, remittance flows to countries in the South exceeded USD700. Data on remittances does not include sizable, but uncaptured, flows through informal channels.

With the pandemic causing havoc through significant spikes in migrant unemployment in host countries coupled with return migration and the downscaling of new recruiting, the COVID-19 pandemic has been widely predicted to have a major negative impact on remittance flows. Early estimates predicted a global "remittances' crisis" involving a sharp contraction of 20% for 2020 (World Bank, 2020a; Ratha, 2021). As a result, "the outlook for remittances remains uncertain and will depend on COVID-19's impact on global growth. This is linked, in turn, to uncertainties regarding the effectiveness of efforts to contain the spread of the disease" (World Bank, 2020a: vii).

The World Bank (2020b) projected an overall 7.2% fall in remittance flows in 2020 and a further decline of 7.5% in 2021. In many regions the projected decline was even more severe than the overall global picture: for example, Europe and Central Asia (-16%); Sub-Saharan Africa (-8.8%), the Middle East and North Africa (-8%), and East Asia and the Pacific (-10.5%). In Ethiopia, for example, the total amount remitted in the third quarter of 2020 (USD200 million) already represented a significant decline from the total amount remitted in the first two quarters of 2020 (USD1.8 billion).

The aggregate effects of COVID-related jobs losses and recruitment costs, ranging from 21% to 36% of earnings of unskilled migrant workers, is expected to reduce remittances by USD2 billion in the major India-Saudi Arabia migration corridor (Abella and Sasikumar, 2020). There have been some striking exceptions to the general remittances' decline, such as in Bangladesh, which registered a temporary growth, indicating that the pressure to remit is significantly higher than during regular times, with remitters curtailing their own consumption and using savings to meet these expectations (Chowdhury and Chakraborty, 2021). In six ASEAN Asian countries, 60% of remittance-receiving households surveyed reported a decline from this source by August 2020, and 17% experienced a decline of more than 75% (Morgan and Trinh, 2021).

On a more positive note, it has been recently suggested that remittance flows may be more resilient than expected, despite the current challenges of high-transmission virus variants, latest imposition of lockdowns, persistent economic uncertainties and uneven vaccine rollouts, especially in low-income countries (Oxford Economics, 2021). The

impact on remittance flows will stretch across 2021 and the key forces that drive remittances, such as oil prices, job creation and economic development, continue to be unstable (World Bank, 2020b). Continued restrictions on cross-border movement within migration corridors have interrupted migration flows and will therefore impact on future remittance flows:

This loss (of remittance income) is driven by both lower rates of migration – existing migrants sent home and new migrants unable to depart – as well as decreased remittances from those who remain away. This implies that not only do displaced workers experience lower earnings currently (Many having already incurred upfront travel costs) but their families will also remain vulnerable without future remittances (Baker et al., 2020).

One unintended consequence of border closures and mobility controls is that informal remitting (which often involves personal carriage of funds) will have declined, pushing more migrants into formal banking and mobile money remitting channels. Ironically, this outcome has long been an aim of international agencies and governments as well as the private sector, all of whom stand to benefit financially from a shift away from informal remitting.

Economic uncertainties tied to the pandemic, internal job losses, and weaker state capacity to effectively manage these volatile circumstances, have been compounded by falling remittance receipts, all of which have deepened existing domestic fiscal and social pressures in developing countries (Karim et al., 2020). Weaker support available through remittances will also intensify the social and economic dimensions of the pandemic in the migrant-sending areas. Larger declines in incomes and rising food insecurity have been documented among migrant households in Bangladesh and Nepal (Barker et al., 2020). These negative outcomes are the strongest in remittance-dependent countries and local areas such as the Hadiya-Kembata zone tied to the Ethiopia-South Africa migration corridor (Feyissa et al., 2020). In El Salvador, this loss in remittance incomes is believed to have led to a 6% growth in poverty (Caruso et al., 2021). Pre-pandemic conditions of economic and social instability have been aggravated in fragile and conflict-affected settings, causing major hardships (OXFAM, 2020).

Scapegoating Migrants

Alan Gamlen (2020) has noted that "since they may look or sound different, migrants and minorities make convenient scapegoats in troubled times." Since the beginning of the pandemic, there have been many COVID-19-related episodes of xenophobia, directed at different groups (Vertovec, 2020). Racially-charged incidents against migrants have been reported across the globe (Chan and Strabucchi, 2021; Hennebry and KC, 2020; Jillson, 2020; Kim, 2020; Reny and Barreto, 2020). The pandemic has also been used by some authorities to further stigmatize disenfranchised international migrants and legitimize more restrictive immigration regimes. In South Africa, for example, a 40km fence was

built along the Zimbabwean border, ostensibly to stop the spread of COVID-19 from Zimbabwe. This was pure theatre given that South Africa's explosive pandemic had very little do with migration from Zimbabwe. In fact, Zimbabwean migrants in South Africa are far more likely to contract COVID-19 in South Africa than they are at home and the greater transmission risk was to Zimbabweans from migrants returning from South Africa. However, preventing return migration was not the purpose of the fence, which actually proved ineffective in stopping two-way movement.

Migration and Food Insecurity

COVID-19 has had the unintended but important consequence of sharpening global awareness of the neglected research and policy linkages between international migration and food security (Crush, 2013; Crush and Caesar, 2017). One of the major consequences of the crisis of immobility discussed above is an anticipated major increase in global and local poverty and food insecurity, especially in migrant-sending regions and communities (de Lange et al., 2020; Sharma, 2020; Smith et al., 2020). Growing attention has been given to how COVID-19 has disrupted global and local agricultural production and food supply chains with resulting impacts on food prices and food security (Sharma, 2020; Aday and Aday, 2020; Devereux et al., 2020). The UN has even declared a "twin pandemic" of COVID-19 and food insecurity, projecting a massive drop in levels of food security and increased hunger across the globe (Schmidhuber, 2020; UN, 2020). There is already an emerging body of case-study evidence demonstrating that COVID-19 containment and mitigation measures have impacted negatively and severely on food security, particularly in urban centres (Gaitán-Rossi et al., 2021; Iheme et al., 2020; Kansiime et al., 2021; Manfrinato et al., 2021; Mishra and Rampal, 2020; Nechifor et al., 2021; Ouko et al., 2020; Zhang et al., 2021). The unanswered question to date, given the pre-pandemic vulnerability of many migrants to enhanced food insecurity, is whether or not COVID-19 has further intensified levels of food insecurity among migrants, migrant households, and migrant-sending households and communities.

Food insecurity can be both a cause and consequence of migration, but can also lead to improved food security outcomes through remittances to migrant-sending areas (Ebadi et al., 2018; Sadiddin et al., 2019; Smith and Floro, 2020). The economic shocks of unemployment, disappearing income and reduced remittances associated with COVID-19 will therefore hit migrant-sending households "especially hard" (Barker et al., 2020). As Manoj Sharma (2020: 183) notes, "with the emergence of COVID-19, the whole nexus of migration and food security has shifted; even the positive aspects of migration have become predisposed to the vulnerable side." Evidence from the global financial and food crisis in 2007-8 has shown that rapid increases in food prices, loss of migrant employment, and an attendant decline in remittances led to a significant increase in local food insecurity in migrant origin areas (Javed et al., 2020; Obi et al., 2020; Sonogo and Luma, 2010). By disrupting earnings through layoffs and depressing remittances, COVID-19 will increase vulnerability to food insecurity among migrants "stranded" in destination countries and their remittance-dependent households and communities. One study has calculated that COVID-19 has negatively impacted 13 million Bangladeshi migrant workers and 30 million dependents (Karim et al., 2020). Another survey of representative samples of migrant and non-migrant households in Bangladesh and Nepal in mid-2020 found that declines in income were 25% greater among migrant households (Barker et al., 2020). A further study in Nepal showed that remittances are the main source of income and 80% are used for daily consumption. Declining remittances "will reduce the purchasing power of households that rely on that source for sustenance." Food insecurity "will lead to an increase in the malnutrition rate, especially among children, pregnant women and the elderly" (Baniya et al., 2020).

Changes in remittance flows are a primary determinant of the migration related food security vulnerabilities of COVID-19, but they are far from being the only risk factor. Increased food prices, absent or inadequate social safety nets, and shifts in consumption to less healthy foods are all likely to exacerbate the various dimensions of food insecurity at both ends of the migration chain (HLPE, 2020). The closure of borders, reduced international travel and reduced demand for migrant workers, for example, means that income-generating migration flows are drying up which, in turn, will impact negatively on households that had been banking on a food security dividend from future migration. There is also the impact of COVID-19 on migrant workers working in "essential jobs" but consequently more at risk of infection, sickness, and death. For migrants who have lost employment and are struggling to survive in other countries, food and nutrition security depends on the ability to buy food or to obtain it from employers as part of employment contracts. In straitened circumstances, discretionary expenditure on food is generally the first to suffer as migrants without incomes, food in-kind or access to social safety nets reserved for locals, skip meals, eat smaller meals, reduce consumption of fresh produce, and even go hungry for days and nights on end.

Conclusion

There have been global pandemics before (including most recently HIV) and sudden shocks to the global economy (including the 2007-08 financial and food price crisis) that have influenced international migration in the Global South. However, none have had so rapid and disruptive an impact on migration than COVID-19. Virtually all the world's eight billion people have experienced some form of mobility restriction or change in their patterns of movement in the wake of government efforts to contain or eliminate SARS-CoV-2. However, for a significant sub-section of that population, over 200 million in number, restrictions on mobility have been particularly profound and damaging; that is, on the world's migrant workers who toil in factories, fields, and on the streets of countries other than their own. Most regularly share the fruits of their labour with family members and local communities "back home" at the other end of bilateral and multilateral migration corridors. As a result, any dramatic change in their circumstances quickly and directly impacts the lives of over one billion people.

In this paper, we focus on the increasingly important flows of migrants within the Global South. These are extremely complex movements with migrants from any one country scattered among many others, and migrants in one country commonly drawn from a variety of others. What this means, in effect, is that migrants from any one country have had highly variable pandemic experiences as host governments have responded in different ways to the pandemic and to protecting and supporting migrants themselves. What the preliminary research evidence reviewed in this paper shows, however, is that migrants have been disproportionately affected by COVID-19 with higher risk of exposure to the virus, greater likelihood of working in sectors that have experienced major economic downturn and retrenchments. lower rates of access to social support mechanisms and health care, and increased vulnerability to poverty and food insecurity. As marginalized populations with limited rights in countries of destination, there is also every likelihood that they will be excluded from early vaccine access, post-pandemic recovery planning and social protection planning. Migrant-sending families and communities experiencing the downstream impacts are also unlikely to be prioritized in post-pandemic economic recovery. In sum, one of the major consequences of the pandemic is likely to be further entrenchment of marginalization, precarity, and inequality. As Lorenzo Guadagno (2020) suggests, much more research and policy focus is urgently needed "for more inclusive and effective COVID-19 responses as the pandemic unfolds to ensure that migrants are duly included."

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