Rapid needs assessment:

COVID-19 RELATED VULNERABILITIES AMONG MIGRANTS IN ARMENIA

IOM UN MIGRATION

EURASIA PARTNERSHIP FOUNDATION

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Abbreviations

EPF	Eurasia Partnership Foundation
IGO	Intergovernmental organization
KII	Key Information Interviews
NGO	non-governmental organization
PCI	Primary Care Institution
SMS	State Migration Service
WHO	World Health Organization
UNHCR	United Nations High Commissioner for Refugees

EXECUTIVE SUMMARY

Assessment Background

Armenia has traditionally been seen as an origin country for migration and a transit point for migrants heading elsewhere, predominantly to the Russian Federation and the West. However, although official statistics continue to record net emigration, the country has recently experienced a year on year increase in the arrival of immigrants seeking to work and study.

When the migration balance changes in any country, the authorities and the people inevitably need time to adjust and Armenia is no exception. When the number of migrant arrivals was negligible, Armenia took a reactive approach to 3rd country migrants, primarily because they could be fairly easily integrated within the existing social and official structure. However, a significant and rapid rise in new arrivals has threatened to increase migrant vulnerability and created issues relating to access to information and basic services (e.g. health-care, education, social protection, etc.). The threat has become considerably more severe due to the state of emergency precipitated by the COVID-19 pandemic. In response, this assessment was initiated by IOM Armenia under the "Enhancing Migrants' Rights and Good Governance in Armenia and Georgia" regional project funded by the Norwegian Foreign Affairs Ministry. It was conducted by Eurasia Partnership Foundation and covers the period between April - May 2020, when strict lockdown and public limitation rules were introduced by the Government of Armenia.[1]

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1 Major restrictions were lifted on 2020, however the Government adopted strict rule for public transportation, business activities, border management, etc.

Scope and Methodology

A representative sampling for the study was not possible due to lack of sufficient information on migrants in Armenia. As a result, chain referral sampling or the snowball method (Annex B) was used to identify the contacts of migrants through talking to existing migrant community groups and non-governmental and international organizations dealing with migrant issues, as well as cooperative migrants themselves. Due to the COVID-19 pandemic, interviews were conducted using online communication tools and a Google based online questionnaire. Interviews were semi-structured and developed in advance. In total, 64 migrants participated in the study, 32 of whom were interviewed and 32, foreign students in Armenia, filled in the online questionnaire. The interviews and responses to the online questionnaires provided insight to the difficulties faced by migrants in the wake of the COVID-19 and a picture of problems encountered by them before the pandemic was drawn from a review of national media reporting, focusing on publications related to foreign migrants in Armenia between 2019 − 2020.

Policy and Legislation

On 16 March 2020, as a result of the COVID-19 outbreak, the Government of Armenia declared a state of emergency for an initial period of month, which was subsequently extended. Movement restrictions were imposed on the Armenian − Islamic Republic of Iran border and air travel, allowing only nationals of the Islamic Republic of Iran and holders of temporary resident permits to return to the country. Restrictions also were extended to Georgia, the Russian Federation and 16 other countries. As the situation deteriorated, travel restrictions within the country and lockdown measures were imposed.

On 3 May, most businesses were conditionally allowed to operate and most restrictions on movement were removed. Support programmes were provided by the Government, aimed at reducing the impact on the economy and providing support to individuals to assist with social consequences. Many of these benefited labour migrants, provided that they were legally registered in the Country, together with Armenian nationals. They included low interest business loans, compensation towards energy costs and assistance for people in specific businesses, particularly the hospitality industry.

Issues of Concern to Migrants

When describing the major issues which they and their communities experience, interviewed migrants highlighted financial difficulties both for themselves and for their communities, housing issues, access to health care, access to information and visa and migration issues. Examples of low-level antipathy towards migrants were described, but appear not to have been exacerbated by COVID-19.

Students had issues with education, such as online classes, tuition fees, etc., together with housing, residence rights and regularization of their status, as well as access to information and health issues. As a result of lockdowns and closure of businesses, many labour migrants lost their income and faced financial struggles, as many were involved in sectors that were highly affected by the state of emergency, such as hospitality, tourism, customer service, manufacturing, agriculture, etc. Many migrants were employed without being formally contracted, which made them more vulnerable in terms of losing jobs qualifying for Armenian Government support.

Obtaining information has been difficult for migrants and many said that they had limited information in languages they could read and no sources provided up-to-the-minute information. Neighbours and community, social media and other communication tools, such as WhatsApp, are quoted as major sources of information.

Refugees and migrants tend to live in conditions that may increase their vulnerability to COVID-19, which includes overcrowded living and working conditions, physical and mental stress and deprivation due to lack of housing, food and clean water. Barriers to accessing health services include language, physical obstacles to accessing facilities and legal, administrative and financial problems.

Migrant families who have lost jobs and have children are very particularly vulnerable, with some having lost their income and with it the ability to send remittances to family at home. Some cannot receive remittances as family at home have also lost income through COVID-19 and some have been forced into barely subsistence level menial jobs. Some, though, have been cushioned by Government assistance.

There are very few local and grassroots organizations, especially in the regions of Armenia, that have the necessary knowledge, sensitivity and overall capacity to deal with such cases in a structured way. Charitable organizations working in the country are overwhelmed with several simultaneous projects and are not always able to access and provide high quality services to irregular migrants, most of whom are beyond their reach and radar.

COVID-19 Specific Emergency Recommendations

Based on the findings of the study, several COVID-19 specific emergency recommendations, which are included in more detail in recommendations in the body of the report, are outlined below;

▶ Create an emergency fund and/or other quick response mechanism to support migrant workers and other socially vulnerable groups to provide food, housing, hygiene kits and other basic necessities;

▶ Provide basic food and sanitation supplies to the most economically vulnerable migrant groups;

▶ Establish a multilingual universal hotline for migrants to provide information on basic human rights;

▶ Translate and disseminate COVID-19 related information updates through social media and software applications to include state support programmes and anti-epidemic measures;

▶ Increase safe and possibly anonymous access to health-care institutions.

1. BACKGROUND

1.1 Assessment Objectives

This assessment has been conducted under the "Enhancing Migrants' Rights and Good Governance in Armenia and Georgia" regional project funded by the Norwegian Foreign Affairs Ministry. It is intended as a baseline study to examine the basic human rights of migrants residing in Armenia as of April − May, 2020 and how they may have been impacted by the State of Emergency declared by the Government of Armenia in response to the COVID-19 pandemic.

The primary objectives are to:

▶ Identify the largest irregular migrant groups currently residing in Armenia;
▶ Examine the most pressing human rights issues, such as access to information and health-care services under the State of Emergency caused by COVID-19;
▶ Develop practical recommendations on short and middle-term assistance that could be provided by the Government of Armenia, IOM and other humanitarian actors;
▶ Classify less well-known groups of migrants;
▶ Reach out to irregular, undocumented migrants, low-skilled/low income migrant workers, foreign students and rejected asylum seekers.

While the study has been precipitated by the COVID-19 situation, the objectives have been widened to include the broader framework of human rights and other topics of importance, such as cooperation with local authorities on health-care matters or information provision/dissemination,[2] discrimination and social intolerance that existed prior to the start of the pandemic.

2   www.bit.ly/3gX6jjt.

1.2 Scope and Methodology

In specific terms, the assessment aims to provide answers from a variety of sources to the following key questions, designed to identify the most vulnerable migrant groups currently resident in Armenia and reveal the most urgent human rights issues related to basic social rights:

What migrant groups can be identified in Armenia?

> ▶ What is a rough estimate of the number of migrants in Armenia per migrant group?
> ▶ Which groups (among those identified) and which individuals within those groups are the most vulnerable?
> ▶ What are the major obstacles to effective access by migrants to minimum social rights as defined by migrants themselves?
> ▶ What are the obstacles related to access to information, housing, education, social security, health, social and welfare Services, employment conditions, residence rights and regularization?
> ▶ What practical and tailor-made recommendations that can be made to IOM and other stakeholders in order to provide assistance to those in need?

Methodology employed desk Study, including media sources research, an exploratory survey among students, an exploratory survey among NGO/IGO/State Body Stakeholders (Migrants) and exploratory key informant interviews with NGO/IGO and State Body representatives. Snowball sampling (Annex B), also known as Chain Referral Sampling, was used for research purposes. This is a sampling technique that relies on identification of initial interviewees, who then refer to other prospective interviewees. This has the potential for the interviewees themselves to create an expanding web of contact and inquiry. The strategy has been utlized primarily as a response to overcome the problems associated with concealed populations and social groups and communities, such as irregular migrants (Faugier and Sargeant, 1997).[3] It enables legitimate cooperative contacts to distance associates from researchers.

It is important to note that the interviews and the student survey conducted within the framework of this research gave respondents full freedom to refuse to answer any questions. As a result, the analysis is based on the number and content of responses received for a particular question. The research team, for ethical reasons, also avoided direct questions on legal/illegal working status of migrants and their perceptions on the working status of their community members.

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3   Faugier, J. and M. Sargeant. (1997). Sampling hard to achieve populations. Journal of Advanced Nursing, 26, pp. 790 - 797.

Four key informant interviews (KII) were conducted with an expert, a representative of the Red Cross, Mission Armenia and Indio-Armenian Friendship NGOs. Separate conversations were held with a UNHCR representative, representatives of Yerevan State Medical University, the Eurasia International University, the American University in Armenia, as well as a non-formal community leader. These interviews set the stage for future interviews and surveys that were conducted online using methods selected by the interviewees, which included skype, zoom, Facebook, WhatsApp and telephone.

In total, 64 migrants participated in the study, 32 out of which were interviewed through semi-structured interviews and another 32 participants, foreign students in Armenia, completed the online questionnaire. Interviewed migrants mostly come from India, the Islamic Republic of Iran and Iraq, with small number, one or two, from China, Indonesia, Tajikistan, Philippines, Nigeria, etc. The majority of foreign students, who filled in online questionnaire, were Iraqis with a comparably smaller number of Indians and Nigerians.

Semi-structured interviews were conducted with seven asylum seekers, nine students, five working students and eleven workers. Four out of seven asylum seekers stated that some people in their community were informally (unofficially) employed, while three of the five working students mentioned that their community members were formally contracted and the other two stated that they were informally employed. Out of eleven workers, only six responded to the question on their/their community members' type of employment and five said that they were officially contracted. Only one mentioned informal employment and four refused to comment on the subject. Of the interviewed migrants, eleven were from India, five were from the Islamic Republic of Iran and six from Iraq. However, given the qualitative nature of interviews, a variety of migrants from different countries of origin were interviewed. Thirteen were single, nine were living in mixed (single persons and persons with families) communities and four, of which two were from Indonesia, one from the Islamic Republic of Iran and one from Iraq, said that their communities were mostly represented by families with children. The gender composition of communities was mostly male.

In total, 32 students voluntarily participated in an online survey — two from India, 27 from Iraq and three from Nigeria. Of these, 24 were male and four were female. Out of four working students, two reported being officially contracted, while the other two from Iraq reported being unofficially (informally) employed.

For further information on research, see Tables 1 - 7, Annex C.

Recommendations – 1 – Methodology and Data Collection

1.1 *Conduct more comprehensive research with a view to collecting a larger volume of accurate and in-depth data on 3rd country migrants in Armenia, including those who are irregular, as well as the main range of issues and challenges faced by specific migrant groups in order to improve targeting of solutions and policies.*

1.2 *Increase the role and activity of provincial and local governments in terms of data collection and support to migrants.*

2. MIGRANT DEMOGRAPHICS AND COMMUNITY PROFILES

2.1 Community Composition

As of 31 December, 2019, 16,648 foreigners had valid residence status in the Republic of Armenia, of which 5,000 were temporary, up to 1 year, 7482 were permanent, up to 5 years and 4,166 were special, up to 10 years (hetq.am, 2020a).[4] Statistics show resident permits are mostly provided for up to 5 year-term. of those with temporary residency status, 54 per cent received it on the grounds of education, 22 per cent for employment and 20 per cent for family reunification.

Of the 5,000 people with temporary residency status, 1562 were Indian nationals, of whom 1,325 were students. Of the 7,482 people with permanent residency status, 3,680 were Russian nationals and only 66 were Indian nationals (hetq.am, 2020a).[5] These statistics include those who have Armenian origins, and those who are foreigners. For migrants of Armenian origin, the process for obtaining residence permits, in particular for longer periods, is easier. It is generally acknowledged that the process for obtaining work permits is somewhat challenging and the the Republic of Armenia Migration Service has proposed amendments to legislation to simplify it.

Figures from the Armenian Statistical Committee data[6] reveal that in 2018, 57 asylum seekers from the Islamic Republic of Iran, 55 from Iraq, 14 from Yemen, 26 from Iraq, 21 from the Syrian Arab Republic and 2 from the Islamic Republic of Iran, received a refugee status in Armenia. According to the most recent statistics (2019) from the Migration Service, there were 248 asylum seekers in Armenia, out of which 107 were Iranians, 21 Iraqis, 33 from Cuba, and 37 from the Syrian Arab Republic (interview with state migration service representative, 2020).

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4   Ibid.
5   Ibid.
6   See the link for more details: www.armstat.am/file/article/demog_2019_7.pdf, pp. 141 - 144.

The definitions of "community" for the purpose of this assessment are not a comprehensive description of the situation of migrants in Armenia. They are based on the information received from migrants identified through the snowball sampling method and differed from migrant interviewee to interviewee. Some described around 10 people living in the same apartment with them as their community, while others meant consolidated communities, such as churches or schools of up to 50 people. Others had in mind members of their ethnic groups of around 100 − 300 persons and Indians referred to the approximate number of the Indian population in Armenia. In most cases, their understanding of how large the community was matched the official statistics of inward migration in Armenia (Armstat, 2019, p. 140).[7]

2.2 Student Communities

Student communities frequently live in hostels provided or recommended by universities and tend to socialize with each other, regardless of their countries of origin. The majority were studying and did not have jobs, while those who did have jobs were more vulnerable in terms of working conditions and dependency on salaries. Some students formed groups and rented apartments together. For example, Nigerian, Kenyan and Indian students sometimes rented apartments together. Indian communities were mostly single students, while Iranian communities were mostly families (students, asylum seekers, and workers).

2.3 Worker Communities

Migrant worker communities were mostly based on their ethnic/national origin. For instance, workers from the Philippines mainly associated with other Filipinos and Indonesians. The latter had some Armenian friends. Iranian Armenians, Syrian Armenians, Lebanese Armenians and Iranians form a big community in Armenia and have varied working profiles. Some are employed by private companies (Syrian − Armenia, Iranian − Armenian, Lebanese − Armenian, etc.), while others work for the Government, in embassies, or in the cultural sector. Research data identified at least 20 female Chinese teachers and other Chinese nationals are employed in construction work for the Embassy.

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7   See the ArmStat Handbook chapter for more details:
    www.armstat.am/file/article/demog_2018_7.pdf.

According to five employment agencies surveyed by OC Media (2019), the number of Indian citizens seeking work in Armenia has been increasing, especially during the last half of 2019.[8] This may also be due to the fact that, in 2017, Armenia liberalized the visa regime for Indians. In 2015-2016, about 1100 Indians received residence permits. In 2017, the figure increased to 938 people and one year later, in 2018, 2,000 Indians got permits (Civilnet, 2019).[9] In the first three months of 2019, the figure stood at over 9000 (Media.org, 2019).[10] Reports in the media perceive that Indians mostly open restaurants, fast food centres, pubs and other businesses (Medialab.am, 2018).[11] Nelli Shishmanyan, in her article published on 4Plus media (2019), highlighted the increase of Indians in Armenia, who mostly come for education, work, private business and to open small stores of Indian spices and other goods, as well as Indian restaurants.[12] This said, some Indians go back to India because of the language problem, whilst others get help from their compatriots who moved to Armenia earlier. Many of them speak not only English, but have also started learning Armenian.[13]

Migrant workers from Tajikistan usually come to Armenia in groups of up to 40 people to work in cotton fields. They come in February and leave in November. During this period, to avoid problems with paperwork, they have to go to Georgia and come back. This particular group appears, from media reporting, to have been particularly affected by the COVID-19 situation as they cannot work or return to their own country because of restrictions on travel.

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8   Looking for a better life: the Indians coming to Armenia, 26 July 2019, available at
    www.bit.ly/3jJ2a4g.

9   Indians also create jobs in Armenia, 18 January 2019, available in Armenian at www.bit.ly/3jDhH5A.

10 Looking for a better life: the Indians coming to Armenia, 26 July 2019, available at
    www.bit.ly/32SNh8S.

11 "After the revolution I understood that the situation has changed and it's worth starting a business",
    15 November 2018, available in Armenian at www.medialab.am/18937.

12 "Indian Flavor". 24 January 2019, available at www.4plus.org/indian.

13 Ibid.

3. POLICY AND LEGISLATION

3.1 Response to COVID-19

COVID-19 pandemic has been an extraordinary and unprecedented public health emergency for Armenia. The country, like many others, has been taking measures to prevent the spread of the virus and emergency policy and legislation has been rapidly introduced.

In January 2020, the Government of Armenia had already established an interdepartmental commission to prevent the spread of COVID-19 and coordinate a response. On 1 March, the first case was registered in Armenia, detected in an Armenian national who had arrived from neighbouring Islamic Republic of Iran.

On 16 March 2020, the Government of Armenia adopted decision No. 298-N, which declared a state of emergency in the country[14] for an initial period of one month. It was subsequently extended several times. As Islamic Republic of Iran was one of the neighbouring countries most affected by the spread of the virus at the time, Armenia imposed movement restrictions both at the Armenian — Islamic Republic of Iran border and air travel, allowing only nationals of Armenia and holders of temporary resident permits to return to the country.

Border movement restrictions had been established with Georgia on 14 March, prior to the state of emergency, and with the Russian Federation on 17 March, the day after. As the situation started to deteriorate and more cases of COVID-19 were registered, in particular in the city of Etchmiadzin, rights of movement were restricted and lockdown measures imposed. Travel restrictions were imposed on 16 countries and later further extended[15] (Commandant's decision No.10, dated 22 March, 2020).[16]

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14 Republic of Armenia Government decision No. 298-N, dated 16 March 2020, available at
www.bit.ly/2Z0zbks.
15 Commandant's decision No. 1 adopted on 17 March, 2020, available at
www.gov.am/files/docs/3950.pdf.
16 Commandant's decision No.10, dated 22 March, 2020,
www.gov.am/files/docs/3962.pdf.

On 3 May, the Commandant allowed most businesses to operate, provided they observed certain rules set out in Commandant's decision N 63, dated 3 May, 2020.[17] Most restrictions on internal movement were removed.

In order to mitigate the serious negative impact of COVID-19 on the socioeconomic situation in the country, a number of support programmes were adopted by the Government. More than 15 such support programmes have been developed, which can be categorized as those aimed at reducing the negative impact on the economy and others to provide support to individuals to mitigate the social consequences precipitated by the Virus. Some of these programmes benefit labour migrants along with Armenian nationals, whereas others only relate to Armenian nationals (Republic of Armenia Government, 2020).[18] For example, on 26 March, the Government subsidised 0%-6% per annum loans for businesses registered and operating in Armenia that provided support to small and medium-sized enterprises operating in several fields. These included food, transportation, tourism, other businesses providing services, entertainment and leisure businesses (Republic of Armenia Government decision, N 357-L, dated 26 March 2020).[19]

Additionally, some measures were implemented to assist individuals. Compensation for 30% of electricity and gas utility costs for February could be claimed, provided the total cost did not exceed 10,000 AMD and 30,000 AMD respectively. This programme also applied to labour migrants (Republic of Armenia Government decision, N 550-L, dated 14 April 2020).[20]

Some programme were aimed at supporting those who had lost their jobs and income. For instance, assistance was provided to people who worked for specific businesses during the period of 13-30 March, such as hotel and hostel services, tourism services, catering services, etc. This measure also applied to labour migrants, provided they were formally registered employees, i.e. their work is based on an employment contract (Republic of Armenia Government decision No. 412-L, dated 30 March 2020).[21] Some other measures were focused on those who permanently live in Armenia (Republic of Armenia Government decision No. 427-L, 2 April 2020)[22] and did not include labour migrants or foreign students.

17 Commandant's decision No.63, dated 3 May, 2020,
   www.arlis.am/DocumentView.aspx?docid=141955.
18 The description of the programmes is available on the Republic of Armenia Government website,
   www.bit.ly/2DrbH0z.
19 Republic of Armenia Government decision, No. 357-L, dated 26 March, 2020, decision available at
   www.arlis.am/DocumentView.aspx?docid=140968.
20 Republic of Armenia Government decision, No. 550-L, dated 14 April, 2020, available in Armenian at
   www.arlis.am/DocumentView.aspx?DocID=141374.
21 Republic of Armenia Government decision No. 412-L dated 30 March, 2020
   www.arlis.am/DocumentView.aspx?DocID=140720.
22 For instance, for a family who has a child, and whose parents do not have a registered (i.e. contractual) job and whose salary did not exceed 500,000 AMD before 1 March, the Government provided 26,500 AMD per child as a support. However, this decision applied to those who permanently live in Armenia.

According to a representative from Armenian Caritas (2020), Caritas, Red Cross and Mission Armenia are working with refugees and legal migrants to obtain information on their circumstances to contribute to policy development, as well as providing assistance. However, there have not been any studies conducted into the circumstances of irregular migrants, not least because there do not appear to be any official estimates of roughly how many there are in the country. The organizations translated selected COVID-19 related decisions into several languages and shared them with migrants and partners. Usually, information is shared via UNHCR group messages but, obviously, they have no access to irregular migrants.

Recommendation – 2 – Policy Development

Strengthen cooperation with civil society organizations, especially in the regions of Armenia in order to ensure better communication with the grassroots with a view to ensure comprehensive data collection and exchange, as well as engagement of civil society organizations in migrant-related support projects and programmes.

3.2 Policy Implications for Migrants

Migrants can be particularly vulnerable to the direct and indirect impact of the COVID-19 virus. Although most face similar health threats from COVID-19 as their host population, a number of factors can affect their ability to avoid the virus, receive adequate health care and deal with the economic, social and psychological impacts of the COVID-19 (IOM, 2020, p. 4).[23] Those factors include migrants' living and working conditions, lack of consideration of their cultural and linguistic diversity, their limited local knowledge and networks, their access to rights and level of inclusion in host communities, often related to their migration status.

There are recurring conditions of vulnerability that can increase the likelihood of contracting COVID-19, such as not accessing appropriate care, suffering from psychosocial problems and from livelihood and income insecurity (IOM, 2020, p. 3).[24] These conditions include limited awareness of recommended prevention measures due to linguistic barriers, as well as being unable to maintain social distancing in crowded living spaces, such as student hostels. Due to income loss, some families are not able to pay

23 L. Guadagno, International Organization for Migration, "Migrants and the COVID-19 pandemic",
   an initial analysis, page 4.
24 Ibid, page 3.

for rent and as a result, several families may decide to live together and rent one apartment to reduce costs. Other factors include limited personal protective equipment in the workplace, limited awareness of options or the right to receive health care. As this research shows, migrants have mostly been affected by language barriers hindering communication with service providers, lack of basic assistance and integration services programmes, loss of employment, loss of income and businesses, lack of housing provision programmes or rental subsidies/exemptions, inability to maintain regular migration status.

The COVID-19 lockdown policy has clearly affected everybody in Armenia, but the implications for migrant groups have been amplified by the often precarious nature of their circumstances. This can be encapsulated by the experience of the Indian community, because it is one of the largest and fastest growing migrant communities in Armenia. Many Indian migrants rely on being paid by the day, which has meant that their income instantly stopped when lockdown started and they were left dependent on assistance from friends. In the absence of income, their accommodation was put in jeopardy and while the Indian Embassy helped by giving hand sanitizers and masks to those who applied, many were left needing basic food and provisions. Scared that they might be found without proper documentation and faced with fines and deportation, many Indian workers did not attempt to contact hospitals and authorities for medical and other assistance.

Recommendations - 2

> 2.1 Conduct mapping of humanitarian and other local organizations which implement programmes and deliver services to migrant communities and asylum seekers in Armenia as well as identify new organizations and groups for future partnership.

> 2.2 Improve monitoring and evaluation systems to control and assess the efficiency and quality of services provided by the social workers, especially in the regions of Armenia, to ensure that policy is effectively implemented. Additional capacity-building of stakeholders on the topic may be required.

4. ISSUES OF CONCERN TO MIGRANTS

Having looked at some of the side-effects of the response to COVID-19 resulting from the lockdown policy that has been widely adopted internationally and followed by the Government of Armenia, this section deals in detail with the concerns voiced by migrants in the media, in the online survey and during interviews. Information obtained from the media comes from articles published in 2019 — 2020 and covers mainly pre-COVID-19 perceptions of migrants relating to the challenges of life in Armenia. The fact that some of these issues have become more severe post-COVID-19 have been highlighted by the migrants who participated in the survey and interviews.

Media analysis revealed that the majority of articles published on migration are about Indian migrants, in all probability because the community has rapidly grown over a relatively short period of time and thus assumed a higher profile than smaller migrant groups who have been in the country much longer.

Analysis of interview results showed that the main concerns of migrants, in order of the number of times that they were mentioned, were financial difficulties both for themselves (chiefly) and their communities, housing issues (more an issue for their community members than for themselves) and access to health care (equally an issue for the community members and themselves). Access to information and visa and emigration issues were said to have equal importance for themselves and for their community members. Major issues mentioned by the students who responded to the online survey were slightly different in so far as half of them said that they did not have sufficient access to information.

For further information on research relating to issues of concern to migrants, see Annex D for statistical charts and tables.

4.1 Employment and Financial Difficulties

Media reporting prior to the emergence of COVID-19 tended to focus on the same employment difficulties for migrants in Armenia faced by those in many other countries and is heavily slanted towards the experience of Indian migrants. Problems include not having proper documentation, questionable migration status and not being competitive enough in the labour market due to a lack of education or skills, all of which are further exacerbated by language barriers.

As Armine Avetisyan from OC media notes in her article (2019), employers and workers are not always able to come to a common agreement due to the language barrier.[25] As a result, many Indians in Armenia are stuck in low-wage physical labour and many choose to work with their compatriots to avoid language problems. An entrepreneur from New Delhi said that, while he had Armenian workers, the majority of his workforce came from India. A different perspective was provided by an Indian businessman, who revealed that some Indians receive a salary double what they would get in India. He was quoted as saying that the chief cook in his hotel restaurant received about USD 950 a month.

> "The amount that my chef receives as a pure profit, he would not receive in India, that's why the Armenian labour market attracts many Indians. The salaries are high here" (OC media, 2019).[26]

Medialab ran the story of an Indian migrant who had been living in Armenia since 2011. He came as a student at the Medical University and in 2018 he opened a fast food business, later followed by another. Both Armenian and Indian customers enjoyed Indian food at these places (Medialab.am, 2020).[27] Another Indian businessman who opened an Indian restaurant reported that even though most of his customers are Indian students, due to Indian soap operas, the restaurant is becoming popular among Armenians as well (ibid).[28] However, the language barrier is challenging, and those who know English get along better. Many foreigners cannot use public transport because they don't know Armenian and all the public routes are indicated only in Armenian.

As Immigration and visa consultants in India have started to market Armenia to Indians as a destination for work, education and business

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25 Looking for a better life: the Indians coming to Armenia, 26 July 2019, available at
   www.bit.ly/3302zJ8.
26 Ibid.
27 Ibid.
28 "My business improved due to soap operas" from India to Armenia with spices and customs,
   26 November, 2018 available in Armenian at www.medialab.am/15390/.

investment opportunities, reports of exploitation have inevitably emerged, with some taking advantage of the situation to make fraudulent job offers to the uninformed, or use Armenia as a staging-ground, promising to help applicants to migrate to Western countries (OC-media, 2019).[29]

As a result of lockdowns and closure of businesses, many labour migrants lost their income and faced financial struggles, which was clear from the survey and interviews. In addition to creating financial problems for themselves, COVID-19 counter-measures, as in other countries, have adversely affected migrants' ability to send back remittances due to interrupted jobs and lost salaries. This is very likely to heavily affect the well-being of households and communities of origin, as well as the future development of their wider communities. Likewise, students who study in Armenia and receive remittances from their families in the communities of origin have had financial difficulties, as their families lost jobs and income at home.

Analysis of semi-structured interviews reveals that Indians who came to Armenia for business appear to have suffered because of the COVID-19 pandemic. One said:

> "I came here for business; however, due to the current situation, I have closed one of my restaurants. Now I do not get much income. After my business closed, I started doing daily jobs, however, most probably this daily job opportunity will also end soon. I do not have enough money to pay for rent. There are about 150 − 200 people in the same condition as I am. There are some people who help them with food. But there are also people who were able to find daily jobs and can get approximately 5,000 − 6,000 AMD a day which, however, is not enough to survive here".

The interview data indicates that mostly males said that they had lost their work and income, while six of them mentioned that members of their community had lost their jobs, three of whom were on formal contracts. Indian students seem to have experienced difficulty with informal work, particularly because most work in the hospitality industry and the service sector that has been hard hit by the collapse of tourism, which was highlighted by a female worker from the Philippines. Another interviewee is quoted as saying:

29 Looking for a better life: the Indians coming to Armenia, 26 July 2019, available at www.bit.ly/2F1cbuM.

"There are businesses here that hire Indian students for work but as far as I know, those are kind of informal jobs. Those who hire them usually give them promises that they will pay them more but they usually make partial payments. Main areas for work are the restaurants (female Indian student)".

In common with media reports, interviewees claimed that migrant businesses had suffered and one quoted the example of an Indian family with three children. They had a small Indian and Armenian grocery shop that shut down because of COVID-19, primarily because their customers were all Indians who were themselves in financial difficulty. They had to vacate the shop after the landlord asked them to leave. The failure of Indian businesses and consequent impact on student employment has had the knock-on effect of forcing some students to return home, thus further depleting the main customer base of Indian businesses. However, there were indications that Government assistance was being received and one interviewee said that the Government gave their company financial support during the preceding month, for which they were very grateful as they would otherwise have had to cut the salaries of the staff.

4.2 Housing

In relation to housing issues, the focus of media reporting pre-COVID-19 was again mainly on the Indian migrant community. Journalist Arusyak Kapukchyan studied advertisements for apartment rentals on one of the popular websites, list.am, and wrote that many explicitly stated that the apartment was not available for Indians or Iranians (ampop.am, 2020).[30] However, on the other hand, there were some which highlighted that there were apartments available to Indians, perhaps because rents for Indians appear to be higher and they are sometimes willing to give a couple of months' pre-payment, which is attractive to landlords.

Students may choose to live in university dormitories, but out of 16 state higher education institutions, only 4 have dormitories. The student dormitory at Yerevan State University foundation has been operating since September 2019 and has 142 rooms designed for 301 students. Since 2019, 45 students have been living there, out of which 30 were students of YSU and 15 were from other institutes (hetq.am, 2020c).[31]

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30 "Indians are leaving, interest towards Armenia is reducing", 28 January 2020 available in Armenian at www.ampop.am/indians.

31 "Dormitories for students, what is provided by higher educational institutes", 10 March 2020, available in Armenian at www.hetq.am/hy/article/114237.

The dormitory of the Armenian National Agrarian University was opened in 1965 and has never been renovated since. It was designed for 170 students but in 2020, only 50 to 60 students lived there. Yerevan Brusov State Linguistic University has 20 rooms for 40 students and only foreign students live there (ibid).[32] A fourth dormitory is owned by the Armenian State University of Economics, but it has not been in use since 2019.

Analysis of the migrant accommodation situation post-COVID-19 is drawn from the interviews and online survey. In essence, migrant perceptions of the rental market were that:

> ▶ Migrants are charged more than the general population for renting apartments;
> ▶ Many migrants were not aware that there were discounts for utilities based on the Government's support package;
> ▶ Migrants who had businesses affected by the situation experienced difficulties in paying rent;
> ▶ Some landlords refused to rent apartments to migrants.

Despite this, in terms of affordability, of the migrants interviewed, although only one said that it was easy to pay rent, 13 said that it was affordable or manageable, leaving seven who found it difficult. Of those who responded to the survey, 3 found paying rent easy, 18 thought that it was manageable and 9 found it difficult. This suggests that, although migrants can be charged a rent premium, it is still largely affordable.

Several groups of migrants had encountered landlords who were concerned about renting accommodation to them and one female Indian migrant claimed that she had been refused accommodation when the landlord realized that she was Indian. Another, who was a male Nigerian, alleged that when he enquired about an apartment advertised on line at AMD150,000 per month, he was told that the price had gone up to AMD170,000. One of his Armenian friends who subsequently also enquired was quoted the original figure.

A migrant renting an apartment, who covered utility costs by giving money to the landlord, was not informed by the landlord that the Government had paid the utilities. Conversely, there were reports of some landlords agreeing to reduce rents because of the emergency situation. Some students had expected that their rent would be suspended, or the payment date, but there were no reports of this happening.

The situation with business owners whose work suffered due to COVID-19 can be critical, as demonstrated from the quote from one male Indian respondent demonstrates:

32 Ibid.

"Housing is expensive, we get money in Armenian drams, pay for the rent in USD. We were staying in a house and could not pay for the rent, and the landlord asked us to leave. There was no negotiation, the landlord just contacted us on Viber. The shop landlord also asked us to vacate the place. We are facing an exceptional financial crisis, with three children to take care of. Due to the crisis we have not paid the tax on our business for three months. Our house utilities were disconnected, and we borrowed money from some people to be able to pay for the gas. We did not get discounts. We heard that the Prime Minister had announced that the Government provides support for businesses but did not know how to apply and get the support".

This also raises the issue of migrants not accessing State assistance because they do not know how to apply for it and presumably, what is available.

4.3 Migration Status

Since 2016 it has been compulsory for migrants to hold work permits before taking employment in Armenia. Although the process appears quite straightforward, it can be prolonged, even before COVID-19 emerged. In brief, an employer wishing to employ a worker from abroad has to apply to the Labour Migration Department of the State Employment Agency for a work permit. Upon receipt of the application, the agency first tries to fill the vacancy with an Armenian citizen and only if it fails to do so does it give permission to hire a foreign citizen.[33] In addition to a work permit, labour migrants must obtain a residence permit in order to reside and work in Armenia.

Media articles pre-COVID-19 reported that some migrants were having difficulty in obtaining residence permits and that the process sometimes took months. On 22 May 2020, the Hetq news agency published an article about a national from Guinea who lived in a crowded Vardashen homeless shelter (hetq.am, 2020b).[34] He wanted to stay in Armenia and said that he has been treated well in Vardashen but a review of his application to remain kept being extended every three months despite the

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33 "Armenia in the circle of migration flows, challenge, or opportunity?", 29 February, 2020
    www.hetq.am/hy/article/113890.
34 Abdul's Odyssey from Guinea to the Vardashen homeless shelter: "I love Armenia", 22 May 2020,
    www.hetq.am/en/article/117366.

fact that he needed to be allowed to stay for at least one year to get permission for removal of the temporary suspension of his employment rights.

There were also some Indian businessmen who had difficulty in obtaining residence permits. Nelli Shishmanyan, in her article published on 4Plus media (2019), narrates:

> "Darli, 32 years old, has been in Armenia since November, 2018. He has rented a small venue to sell Indian dishes. Darli communicates with the locals in English, that is why it is easier for him to work in Armenia than for those compatriots of his who don't know any foreign language. The only problem for Darli is the residence permit. He is not sure if he will have the opportunity to lengthen it by the end of the permit: many are getting rejected now. Despite this fact he is getting ready to bring his wife and children along".[35]

Ignorance of the system and lead to exploitation. Migrants can find it difficult to access information on legalizing their migration status and media reports have suggested that some of them ask other migrants for support. One article reported that several Indians provided falsified resident permit documents to their compatriot, who had paid them to help him receive a resident permit by lawful means (news.am, 2020).[36]

The response to the interviews and survey on the impact of COVID-19 did not seem to identify any worsening of the situation, quite possibly because there has been insufficient time to assess the long-term effect of the lockdown on Government and bureaucratic mechanisms. As in many other countries, it is likely that processing of routine documentation has been reduced or suspended due to the difficulty in staffing offices, both in terms of employee health issues and social distancing. Migrants who were interviewed listed visa and migration issues nearly at the bottom of their concerns, below health care, housing, unemployment, finances, and access to information. Only access to education came lower. The survey showed a slightly different pattern. Fifteen out of 32 respondents mentioned that they had sufficient information on their stay in Armenia from embassy contacts, information on flights, visa support, legal assistance, etc. However, another 13 said that they did not always have sufficient information and four replied that they did not have sufficient information.

35 "Indian Flavor", 24 January 2019, www.4plus.org/indian.
36 "Fraud by Indians", 10 April, 2020, available in Armenian at
    www.news.am/arm/news/571749.html.

4.4 Antipathy Towards Migrants

Once again, media reporting concentrates on examples of antipathy towards migrants from the Indian community, which is not entirely surprising given the significant influx of Indian migrants since 2016. Indigenous populations, or more accurately, a minority of individuals and groups within them, sometimes feel threatened by migrants who clearly have a different culture and values. It is thus relatively easy to find examples of distorted perceptions, such as migrants taking jobs from citizens and racism resulting from ignorance and sometimes malice. Statistics on racist incidents in Armenia do not appear to be available, although it is unclear whether this is because they are not officially categorized and recorded as such, or so few take place that they are not perceived to be an issue.

Some examples are quoted from OC-media below:

An Indian immigrant to Armenia who has been living in the country since 2015, vividly remembers taking a phone call from an ill friend while on a minibus in Yerevan (OC-media, 2019).[37]

> "I was talking very quietly, trying to help them over the phone, when a woman started saying loudly that "she's tired of these Indians". Why? What bad thing have I done? I want to explain that I love Armenia; I consider it to be a part of me (2019)".[38]

Five years ago, another Indian migrant and his wife moved to Armenia. He told OC media (2019):

> "When I first came here, many of the taxi drivers were trying to deceive us — they demanded more money",

Also, he had problems when shopping, but over time, developed a method for getting around these obstacles:[39]

> "If, for example, I wanted to buy something, I waited until an Armenian would ask the price and buy it. Then I did my shopping right after him so that the seller would not lie to me and quote an expensive price".

Other Indians in Armenia have also reported racist harassment, even assault. An Indian businessman told OC-media (2019).

37 Looking for a better life: the Indians coming to Armenia. 26 July 2019, available at
www.bit.ly/3gWou8E.
38 Ibid.
39 Ibid.

"I was standing in front of my restaurant when some people began to beat me with stones. I hadn't done anything", "Sometimes, I'm told that my skin smells bad. To be honest, I cannot understand why they hate us".[40] Nevertheless, "if you stick it out and find a job, it is an ideal place to live".[41]

In these examples, there are positives and negatives, exemplified by a female Indian migrant who stated that overall Armenians were kind towards her, although sometimes there were occasions of rude attitudes on public transport, or people staring in the supermarket, which creates a tense atmosphere. However, she deals with it, and likes living in Armenia (Ampop.am, 2020).[42]

Media reporting may sometimes have a tendency to give the impression that perceived problems are more serious than they actually are. A broader picture of hostility towards migrants can be seen from survey and interviews. Many of the migrants who participated in the research did not mention any instances of hostile behaviour. Five cases of recent hostility were mentioned by both interviewed migrants and those students who participated in the online survey. To be precise, of 27 interviewees who replied to questions about their experience of antipathy, only 5 said that they had been victims of it. Exactly the same numbers were reflected by respondents to the online survey. Of those who said that they had encountered antipathy, examples given by them tended to revolve around difficulties dealing with the Armenian Authorities, in respect of police checks and difficulty in getting permission to work, through lack of official information to discrimination in housing.

4.5 Social Rights

Asylum seekers are the migrants most in need of protection of their social rights. Many of them came to Armenia as a result of conflicts and pressures on them due to their religious and democratic beliefs, and they are comparatively vulnerable as they will not receive any support from the Authorities in their countries of origin. The migrants appreciate the support that they get from charities but as one male Iranian asylum seeker said, they would prefer to get some kind of job instead of waiting for support from any institution.

40 Ibid.
41 Ibid.
42 "Indians are leaving, interest towards Armenia is reducing", 28 January 2020 available in Armenian at
www.ampop.am/indians.

Before the COVID-19 restrictions, some migrants used to participate in Armenian language classes organized by the Migration Service, but the classes were interrupted by emergency situation, which has caused further difficulties in potentially getting employment.

There is some evidence that several migrant Iranian families attend Armenian churches (for instance, the church in Erebuni) as they are Christians and that is why they left the Islamic Republic of Iran. Thus, they have no connection with the Embassy of the Islamic Republic of Iran. in Armenia, as well as not having any intention of going back to the Islamic Republic of Iran, as they fear persecution. Even before COVID-19, these families have been in touch with the priest. There are some local people (e.g. Armenian – Iranians) who support them by providing information and an interviewee mentioned that the church gave a little money to their community members to survive.

4.6 Access to Information

In general, refugees and migrants experience difficulty in obtaining information because of language barriers, lack of access to sources of information, inadequate access to communications technology and not being effectively targeted by disseminators of information. These difficulties have been amplified during the COVID-19 pandemic because of the sudden need to put out clear, easily understood instructions and advice through infrastructure that is not designed for the purpose. Delays in putting vital messages across become potentially life threatening. The World Health Organization (WHO) specifies that Member States should ensure that they have the ability to develop health-related messages that reach everyone in the community and contribute to promotion of protective measures that can contain and stop the outbreak. The importance of providing information in appropriate languages by translating written materials is stressed. (WHO, Interim Guidance, 2020).[43] Information should be made available on internet, via social media and official websites.

Information is conveyed more effectively through formal and informal channels, which migrants routinely use, by individuals and organizations that migrants know and trust. Dissemination of official information on informal channels is also essential. In Armenia, at the time of writing, communication with communities has not been enhanced, there is no hotline for migrants has been set up, and there are no legal services offered

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43 WHO guidance on "Interim guidance for refugee and migrant health in relation to COVID-19 in the WHO European region", 25 March 2020, is available at www.bit.ly/3gSJvBf.

over the phone. Some also stated that the Eurasia Partnership Foundation (EPF) is the first organization that has reached out to them to find out about their situation. This opinion was not shared by all respondents, but the majority highlighted it. Other organizations said to be in contact with migrants were the Armenian Red Cross, India — Armenia friendship NGO, Migration Service, UNHCR, Mission Armenia and the Confucius Institute.

Some civil society and international organizations are reaching out to asylum seekers and refugee communities. Armenian Caritas and Armenian Red Cross, for example, have translated information about COVID-19 and state programmes. Basic information was also posted in the reception shelter. However, as the migrant interviews show, no organization has reached them and they get information from principally from internet resources. Respondents pointed out that some websites provided general information on the international situation, but for more Armenia-related information, they look at Armenian news and websites and use google translate. Text messages from the Commandant are not accessible if they are in Armenian and many messages are untranslatable. The Facebook feature of automatic translation is frequently used by the migrants. The Ministry of Health website is only in Armenian. English, Iranian, Yezidi, Arabic, Spanish and Russian were mentioned as languages that would be useful to have information in.

As shown in the charts 11 — 13 in Annex D, the situation as regards access to information is not satisfactory, at neither community nor individual level. Most of the migrants who participated in the research said that they and their community do not always have sufficient information. However, of 27 interviewed migrants, only 4 categorically stated that they did not get sufficient information, while 13 said that they did not always get enough and 4 said that they did. The online survey revealed that out of 31 respondents, 15 got enough information, 13 did not always get sufficient and 3 said that they did not get enough. The picture is similar with regard to as regards the languages in which information is available to migrants. Specifically, some migrants, 11 out of 25 interviewees, mentioned that they have only some information in the languages they could read.

As shown in table 10, Annex D, interviewees indicated that neighbours, their community, Facebook and other social media were the major sources of information both for their community members and for themselves. However, for COVID-19 specific information, direct searches on the Internet was the predominant information source, especially when added to the number of respondents who accessed Facebook and other social media on the Internet. Only migrants from Tajikistan (Armavir region) mentioned the municipality as a source of information for them and their community.

From the other responses, it became clear that migrants follow bloggers' pages and google translator for translating important information. The university was mentioned by the students to be a source of information for them, charities also support them if they approach them for information and they sometimes call telephone operators to ask questions. Finally, the English page of news.am seems to be read by many migrants. Usually, if a migrant reads important information, they share it via their WhatsApp groups.

Unfortunately, there is a perception that none of the available information sources provide up-to-the-minute information and timeliness of information seems to be a major issue, especially during the emergency. It was also perceived that not enough information about the Government programmes had reached the migrant community and a female Chinese student was quoted as saying that her Embassy provided important information on COVID-19, but not many details about Government response programmes. It was acknowledged, however, that the Government has released an application about COVID-19, which some migrants use. Embassies provide a contact number and those who can keep in touch with their embassies use it, but they do not have a number for any official Armenian organization, although it was acknowledged that sometimes universities gave hotline numbers for the Ministry of Health to migrant students. The temperature of those in hostels were measured once a day and doctors visited those who were isolated and may have a temperature 3 or 4 times a day.

A male Indian student, said:

> "I usually ask my Armenian friends about whatever rules have been announced. It is quite depressing at times, because we got to know about things such as having to carry our passports and a signed form about two or three days after these rules had been implemented. One of my friends was called by a police officer and asked for all these things and he said 'we have not been informed'. He was eventually allowed to go. The thing is that all awareness programmes are in the Armenian language. They should also conduct it in English because it's quite difficult for us".

When reviewing provision of information, it is important to achieve a balance between not enough and too much. Not enough and the response is not likely to be adequate and too much may hinder understanding and result in unintentional non-compliance. The pandemic is a unique situation and there is a general feeling of learning how to respond day by day. This applies to dissemination of information and while the research indicates

that the majority of respondents are getting information, there is a strong implication that it could be more effective.

4.7 Health care

It is generally acknowledged that refugees and migrants potentially have more health-related risks and vulnerabilities than the general population and they can face particular barriers to accessing health care. For example, they may live in conditions that make them particularly vulnerable to COVID-19. These include overcrowded living and working conditions, physical and mental stress and deprivation due to lack of housing, food and clean water. They may also face barriers to accessing health services that increase health risks, including language barriers, physical barriers to accessing facilities and legal, administrative and financial obstacles.[44] Additional concerns have been raised about the lack of health services for undocumented persons and persons staying irregularly. Stateless persons and other vulnerable groups are believed to be less likely to receive health services in case of COVID-19 symptoms.

On 25 March 2020, the World Health Organization released interim guidance for refugee and migrant health in relation to COVID-19 in the WHO European region, which is intended for use by health authorities (WHO, Interim Guidance, 2020).[45] The guidance encourages health authorities to consider the vulnerabilities of migrants when responding to emergencies such as the COVID-19 outbreak. In particular, it advises that States should ensure that disease surveillance, early warning, response systems, access and provision of health care and risk communications are in place.

The Republic of Armenia Law on Medical assistance and service to the population" establishes the legal, economic and financial grounds for organizing medical assistance and service to ensure the exercise of a person's constitutional right to health care. The law has a separate chapter on human rights in the field of provision of medical assistance and service, where access to medical assistance is provided.[46] Like the Constitution, the Law also bans discrimination and provides that every person, irrespective of national origin, race, gender, language, religion, age, health condition, political or other views, social origin, property or other status, enjoys the

44 Ibid.
45 WHO issued guidance on "Interim guidance for refugee and migrant health in relation to COVID-19 in the WHO European region", 25 March 2020.
46 Republic of Armenia Law on "Medical assistance and service to the population", adopted on 1996, March 4, Chapter 2, available in Armenian at www.irtek.am/views/act.aspx?aid=1398#.

right to medical assistance and service in the Republic of Armenia. Additionally, everybody is entitled to medical assistance and service free of charge or under privileged conditions within the framework of programmes to maintain and improve the population's health, as guaranteed by the State.[47] Article 13(3) of the Law stipulates that every person shall have the right to medical assistance, beyond the scope of those programmes, at the expense of medical insurance compensations, personal payments and other sources envisaged by the legislation of the Republic of Armenia.

The socially vulnerable and specific (special) groups entitled to free medical assistance and support are listed in Government decree No. 318-N dated 4 March 2004. Migrants or foreign students, as a separate group, are not included in this list, but asylum seekers and their families are listed are included.

A person suffering from a disease which poses a danger for the wider public has the right to medical assistance and service free of charge guaranteed by the State and should be treated in special establishments providing specialized medical assistance and service designed for that purpose.[48] The list of such diseases is provided by the Republic of Armenia Government decree No. 1286 dated 27 December 2001, which was amended in 2020, and COVID-19 was included. Therefore, it is perfectly clear that patients with COVID-19, irrespective of their nationality and legal status in Armenia, are entitled to free medical assistance and support.

The Ministry of Health has designated and equipped nine hospitals to provide medical services solely to patients with COVID-19. These hospitals include Nork" infectious hospital, the Police Hospital, Sourb Astvatsamayr" medical centre, several hospitals in the regions of Armenia (Gyumri, Vanadzor, Artashat and Kapan), Orthopedic Institute and Saint G. Lusavorich" (Hetq.am, 2020d).[49] Hotlines have been established to call and request an ambulance if patients suspect that they might have COVID-19. If symptoms continue to develop, they are advised to call the Primary Care Institution (PCI). The PCI has been tasked to provide further guidance, either to advise the patient to visit the doctor at the PCI, or if there are very clear symptoms, to call the ambulance hotline. A doctor accompanying the ambulance should then organize hospitalization and isolation.

Although in Armenia migrants are entitled to health-care services, language barriers, as well as lack of knowledge on how to apply, may result in insufficient access to health care. Some respondents stated that when

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47 Republic of Armenia Law on "Medical assistance and service to the population", Article 13, part 2.
48 Republic of Armenia Law on "Medical assistance and service to the population", Article 19.
49 Minister of Healthcare, Arsen Torosyan's statement at the Republic of Armenia Government
   meeting on 2 April 2020 www.hetq.am/hy/article/115410.

they have a serious issue, they visit hospitals directly and do not visit the practitioners in primary health-care polyclinics, which are first-contact outpatient facilities where general and specialist examinations and treatments are provided.

International migrant workers and refugees can be affected by income loss, health-care insecurity and the negative consequences that arise from the postponement of decisions on their legal status, which impacts on their health and presents risk for their communities. Income loss itself can result in an inability to pay rent and subsequent homelessness. Living conditions for homeless refugees and migrants can undermine the ability to follow public health advice, including basic hygiene measures, quarantine, or self-isolation, because many people are in close contact and gather in large groups. The risk of rapid spread of the disease is especially heightened in overcrowded living areas and reception centres, since physical distancing and self-isolation are not possible or extremely difficult to implement, because of the need to share washrooms, cooking facilities dining rooms. The same issues apply to dormitories and other communal accommodations (ILO, 2020).[50]

According to the interviews conducted with migrants, most of them visit doctors when experiencing health issues, but seven migrants mentioned that this is unaffordable for them and their community members, and that they have communication issues. An issue raised by foreign students was that they do not have health insurance and it is expensive for them to go to doctors. In Armenia medicines are particularly expensive for migrant students. Generally, most migrants do not go to doctors if they only have mild symptoms.

Mission Armenia supports migrants who approach them with medicines, a translator and a nurse when needed, as the language barrier and lack of knowledge as to which hospital to go to make it difficult for them to visit doctors.

Two out of 32 interviewed migrants reported that there were cases of COVID-19 in their communities and in both cases those who needed medical support received it. However, some respondents said that migrant families who have lost jobs and have children are very vulnerable. Those living in the shelter are particularly vulnerable and a female migrant from the Islamic Republic of Iran pointed out that people who go back and forth from the shelter to work create risks for others who stay in the shelter. She said that masks and gloves were provided only once, which was not

50 International Labour Organization, Protecting migrant workers during the COVID-19,
    April 2020, can be found at www.bit.ly/32WrL2O.

enough. It should be noted that WHO recommends that health authorities provide refugees and migrants with disease control measures. While the research shows that masks and gloves were on one occasion provided to those in the reception centre run by the Migration Service of Armenia,[51] such assistance was not provided to labour/low-income or undocumented migrants who do not live in the reception centre.

A male Jordanian student interviewee stated that:

> "After the lockdown, access to hospital became hard. Whenever we go to the hospital, they send us to another one, from there to another one, so we stopped going to hospitals in this lockdown period. We know that there are hospitals that provide services only for COVID-19 patients so we go to the other ones, but everyone refers to other hospitals. Last week one of the community members had a stomach ache (food poisoning), they transferred him between 4 hospitals and in the end, he gave up and went home".

A male Indian student said:

> "Indians are a bit shy to ask for money to resolve their health issues. So, if we have health problems, we prefer to recover by ourselves at home without asking someone to help us. Even if they suspect they might have COVID-19, they cannot afford to take the test. I usually ask friends of mine who are doctors and if they say that the symptoms are not serious, I just take some medicine to recover, but I cannot afford to go to doctor".

It should also be acknowledged that the pandemic response is not just about what has to be provided for migrants, it is also about acknowledging their willingness to participate fully in helping to safeguard the population as whole. On 14 April, UNHCR and the Council of Europe issued a joint statement (UNHCR and CoE, 2020)[52] encouraging States to benefit from the support that refugees who are health professionals can provide to national health systems. Many refugees and asylum-seekers in Europe have the qualifications, experience and willingness to get involved in the COVID-19 response but, given the tight regulations of health-related professions, most lack the approval by national health authorities. There

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51 The reception centre is intended for asylum seekers and refugees.
52 UNHCR and the Council of Europe statement released on 14 April 2020
    www.unhcr.org/news/press/2020/4/5e957e9611/council-europe-unhcr-support-member-states-bringing-refugee-health-workers.html.

are approximately 1700 foreign students at the Medical University (YSMU, 2020) and during the interviews some of the Indian university students expressed their willingness to be involved as volunteers, and to provide support commensurate with their qualifications.

Recommendations – 3 - Employment and Financial Difficulties

3.1   *Create an emergency fund and/or other quick response mechanism to support migrant workers and other socially vulnerable groups in times of pandemic by provision of food, housing, hygiene kits and other basic necessities.*

3.2   *Provide basic food and sanitation supplies to the most economically vulnerable migrant groups, channelled through churches and hostels, migrant-founded restaurants and other food supply chains. Municipalities and local CSOs could serve as focal points to reach out the labour migrants in the regions such as Armavir, Kotayk and Shirak.*

Recommendations – 4 - Housing

4.1   *Implement proper oversight and control mechanisms ensuring equal opportunities and access to housing for migrants (e.g. fair rent, etc.).*

4.2   *Increase awareness of landlords on migrants' rights through targeted social advertisement, work with management of the real-estate agencies and other innovative approaches (such as PSAs at websites such as list.am and estate.am).*

Recommendations – 5 - Migration Status

5.1   *Ensure access to legal services for migrants through mobilizing the public defender's office and law firms when possible. Encourage pro-bono activities of the law firms and individual lawyers to the extent possible.*

5.2   *Provide free of charge legal advice to migrant communities and asylum seekers on obtaining residence/work permits, visa requirements and other documentation issues, thereby complementing the humanitarian aid provided by organizations which have access to these communities.*

5.3   Enable preliminary interviews to determine refugee status to be conducted online, as some appointments had been cancelled due to the pandemic-related situation.

5.4   International organizations to encouraged to enhance support to the Government of Armenia, State Migration Service, the law enforcement agencies in their fight against COVID-19, particularly with regard to service provision for migrants, including irregular migrants.

Recommendations – 6 - Antipathy towards migrants

6.1   Positively promote migrant-friendly, diversity sensitive and educational coverage through mass media and other available channels to counteract negative perceptions.

6.2   Continue support to the progressive media outlets and independent journalists in order to increase the volume of objective coverage on migration issues, including stories about irregular migrants living in Armenia.

6.3   Develop and provide special training for staff on intercultural and interreligious communications, particularly those in law enforcement and civil society organizations.

Recommendations – 7 - Social Rights

7.1   Strengthen cooperation with other civil society organizations working on the ground on variety of issues such as community mobilization, gender equality and youth empowerment.

7.2   Mainstream voices of the migrants – including women, youth and marginalized groups, such as religious minorities - into programming in Armenia at all stages.

7.3   Initiate awareness-raising campaigns to improve migrants' access to basic health care, social, employment and other services engaging local Non-Government Organizations dealing with migrants' issues (e.g. "Indian – Armenian Friendship" NGO, Yezidi Centre for Human Rights, etc.).

Recommendations – 8 - Information

8.1   *Ensure that information on COVID-19, state of emergency procedures and basic services (e.g. Government support programmes, health-care services/institutions, etc.) is available in different languages (e.g. English, Russian, Arabic, Farsi, etc.) for migrants though use of traditional and innovative communication tools.*

8.2   *Translate and disseminate COVID-19 related information updates among migrant communities through social media and software applications such as Facebook, telegram channels, WhatsApp groups, etc. regarding state support programmes and anti-epidemic measures through cooperation between policymakers and stakeholder organizations, as well as key persons from migrant communities themselves.*

8.3   *Establish a multilingual universal hotline/information for migrants to provide information on basic human rights in at least English, Persian, Yezidi, Arabic, Spanish, Chinese and Russian.*

8.4   *Deliver key announcements in English through text messages from the Commandant, to complement Armenian announcements.*

8.5   *Reinstate Armenian language classes for asylum seekers online through the State Migration Service.*

Recommendations – 9 - Health care

9.1   *Ensure that migrants have safe and if necessary, anonymous access to early warning and response systems and health-care institutions, especially at regional level.*

9.2   *Although this recommendation is also included above, it must heavily stressed that it is particularly important to make sure that information on COVID-19 and state of emergency procedures and associated services such as Government support programmes, health-care services/ institutions, etc. is available in different languages and in a user-friendly format for migrants.*

9.3   *Ensure that migrants have access to adequate health care, in particular, in relation to COVID-19, independent of the residence status.*

9.4 *Provide asylum seekers and labour migrants with Personal Protective Equipment (PPE) and supplies for COVID-19 disease, including medical masks and antiseptic. This can be done by the State Migration Service, municipalities and other relevant authorities.*

9.5 *Allow foreign students at the Medical University to do voluntary work at hospitals during the COVID-19 pandemic, as they are willing to volunteer and support the Armenian health-care hospital and society have mentioned they would like to feel helpful to society these days and.*

5. CONCLUSIONS

The situation of migrants in Armenia is, in many ways, opaque, mainly due to a lack of statistical recording and targeted studies, particularly since the emergence of COVID-19. As a result, the real number of irregular, labour and socially vulnerable migrants is unknown. This is understandable to an extent as, in terms of statistical recording on vulnerability, Armenia has only recently become a destination for economic migrants, so it could be argued that statistics and studies have previously been unnecessary. This equally applies to regular and irregular migration and while statistics exist for the former, the latter is, by its nature, unknown. The lack of study since COVID-19 is also understandable because it only emerged as a serious threat in February/March 2020, since when the response learning curve has been very steep and priorities have not always been clear.

This study, although confined to the use of online interviewing methods because very restricted access to the field, has provided a clearer insight into the diversity of migrant communities living in Armenia. Using the snowball method as a main tool for reaching out to respondents, several layers of migration patterns to Armenia were detected. There were diverse motives for migrants moving the country, such as persecution in the home country, religious views, economic hardship, educational opportunities, etc. There were also important issues of concern, obtained through in-depth interviews with respondents in their own languages, relating to their daily lives, including community engagement, interaction with the general population and cultural and religious diversity. For instance, several financially vulnerable migrant Iranian families who had no ties with their Embassy attended services in Armenian protestant churches, seeking and receiving support.

Societal attitudes towards migrants depended on their social, racial, religious and ethnic background and appeared to be at least partially linked to bias and stereotypes rooted in perceptions, usually wrong, of their lifestyle and culture. This said, the majority of those who took part in research did not highlight any incidents of antipathy towards them and

those who did had encountered largely low-level confrontation. However, stand-alone and in-depth research to measure public attitudes, level of bias and popular stereotypes towards different groups of migrants would be very useful when designing training programmes for law enforcement personnel and other public officials.

In comparison with Georgia, there are very few, if any, local and grassroots organizations, especially in the regions of Armenia, which have the necessary knowledge, sensitivity and overall capacity to deal with problems encountered by vulnerable migrants in a structured way. Charitable organizations working in the country were overwhelmed with several simultaneous projects and not always able to access and provide high quality services to irregular migrants, most of whom are beyond their reach and radar.

This study demonstrates that migrants in Armenia are particularly vulnerable to the direct and indirect impacts of COVID-19. Most migrants live in individual and communal accommodation and face coronavirus-associated health threats. As the Government of Armenia attempted to mitigate the effect of the pandemic and address the needs of the people, there is little direct evidence that migrant-specific vulnerability has been thoroughly considered, hence targeted measures to comprehensively address this issue have not yet been developed. It was significant that interviewed migrants and their community members have had very limited contact with Armenian Government institutions or state services, NGOs and IGOs in relation to COVID-19.

While information about COVID-19, awareness and prevention programmes and news have been widely circulated in Armenia via different online platforms, only a few sources have provided information in English and other languages accessible to migrants. Information on preventive measures to minimize transmission of the virus and expand health-care coverage to fit the migrants' needs are, of course, important and can only be achieved through improving inter-cultural and multi-disciplinary communication.

In these challenging times, especially while businesses were closed, migrants suffered financially and were in need of food and other basic necessities, often with no support from family in their home countries. While some were in touch with embassies and local and international organizations, there were many who remained in the shadow, especially irregular migrants, who are inevitably hard to reach and have no possibility of support, other than from members of their own community.

Economic, social and unemployment issues are at the core of COVID-19 consequences for migrants. Due to income loss, some families were unable

to pay rent and several families decided to live together and rent one apartment to reduce costs. Migrant reception shelters were crowded, which created greater risk of infection and transmission. Having been more dependent on daily wages, migrants needed basic foods and sanitation supplies. Some support was provided by restaurants founded by Indians, etc., but given the hardships incurred by businesses during the emergency situation, the support was stopped and did not reach those in the regions.

Migrants were reluctant to say if they or other members of their communities were officially contracted by employers. They lacked information on labour rights and their labour rights did not appear to be properly protected, which made them more vulnerable during the Pandemic. Some migrants experienced financial problems when renewing their passports and preparing their documentation and due probably to staff shortages through sickness in Government departments, difficulty in regularizing their migration status.

Even though in Armenia migrants are entitled to health-care services, provided they have relevant documentation, factors such as language barriers and lack of knowledge about where and to whom to apply resulted, on occasions, in insufficient access to health care. Some respondents said that they only visited doctors when they had serious problems, so they visited hospitals directly and do not use primary health- care facilities.

6. ANNEXES

Annex A

Consolidated List of Recommendations

Recommendations – 1 – Methodology and Data Collection

1.1 *Conduct more comprehensive research with a view to collecting a larger volume of accurate and in-depth data on 3rd country migrants in Armenia, including those who are irregular, as well as the main range of issues and challenges faced by specific migrant groups in order to improve targeting of solutions and policies.*

1.2 *Increase the role and activity of provincial and local governments in terms of data collection and support to migrants.*

Recommendations – 2 – Policy Development

2.1 *Conduct mapping of humanitarian and other local organizations which implement programmes and deliver services to migrant communities and asylum seekers in Armenia as well as identify new organizations and groups for future partnership.*

2.2 *Improve monitoring and evaluation systems to control and assess the efficiency and quality of services provided by the social workers, especially in the regions of Armenia, to ensure that policy is effectively implemented. Additional capacity-building of stakeholders on the topic may be required.*

Recommendations – 3 - Employment and Financial Difficulties

3.1 *Create an emergency fund and/or other quick response mechanism to support migrant workers and other socially vulnerable groups in times of pandemic by provision of food, housing, hygiene kits and other basic necessities.*

3.2 *Provide basic food and sanitation supplies to the most economically vulnerable migrant groups, channelled through churches and hostels, migrant-founded restaurants and other food supply chains. Municipalities and local CSOs could serve as focal points to reach out the labour migrants in the regions such as Armavir, Kotayk and Shirak.*

Recommendations – 4 - Housing

4.1 *Implement proper oversight and control mechanisms ensuring equal opportunities and access to housing for migrants (e.g. fair rent, etc.).*

4.2 *Increase awareness of landlords on migrants' rights through targeted social advertisement, work with management of the real-estate agencies and other innovative approaches (such as PSAs at websites such as list.am and estate.am).*

Recommendations – 5 - Migration Status

5.1 *Ensure access to legal services for migrants through mobilizing the public defender's office and law firms when possible. Encourage pro-bono activities of the law firms and individual lawyers to the extent possible.*

5.2 *Provide free of charge legal advice to migrant communities and asylum seekers on obtaining residence/work permits, visa requirements and other documentation issues, thereby complementing the humanitarian aid provided by organizations which have access to these communities.*

5.3 *Enable preliminary interviews to determine refugee status to be conducted online, as some appointments had been cancelled due to the pandemic-related situation.*

5.4   *International organizations to encouraged to enhance support to the Government of Armenia, State Migration Service, the law enforcement agencies in their fight against COVID-19, particularly with regard to service provision for migrants, including irregular migrants.*

Recommendations – 6 - Antipathy towards migrants

6.1   *Positively promote migrant-friendly, diversity sensitive and educational coverage through mass media and other available channels to counteract negative perceptions.*

6.2   *Continue support to the progressive media outlets and independent journalists in order to increase the volume of objective coverage on migration issues, including stories about irregular migrants living in Armenia.*

6.3   *Develop and provide special training for staff on intercultural and interreligious communications, particularly those in law enforcement and civil society organizations.*

Recommendations – 7 - Social Rights

7.1   *Strengthen cooperation with other civil society organizations working on the ground on variety of issues such as community mobilization, gender equality and youth empowerment.*

7.2   *Mainstream voices of the migrants — including women, youth and marginalized groups, such as religious minorities — into programming in Armenia at all stages.*

7.3   *Initiate awareness-raising campaigns to improve migrants' access to basic health care, social, employment and other services engaging local non-governmental organizations dealing with migrants' issues (e.g. "Indian-Armenian Friendship" NGO, Yezidi Centre for Human Rights, etc.).*

Recommendations – 8 - Information

8.1   *Ensure that information on COVID-19, state of emergency procedures and basic services (e.g. Government support programmes, health care services/institutions, etc.) is available in different languages (e.g. English, Russian,*

Arabic, Farsi, etc.) for migrants though use of traditional and innovative communication tools.

8.2 *Translate and disseminate COVID-19 related information updates among migrant communities through social media and software applications such as Facebook, telegram channels, WhatsApp groups, etc., regarding state support programmes and anti-epidemic measures through cooperation between policymakers and stakeholder organizations, as well as key persons from migrant communities themselves.*

8.3 *Establish a multilingual universal hotline/information for migrants to provide information on basic human rights in at least English, Persian, Yezidi, Arabic, Spanish, Chinese and Russian.*

8.4 *Deliver key announcements in English through text messages from the Commandant, to complement Armenian announcements.*

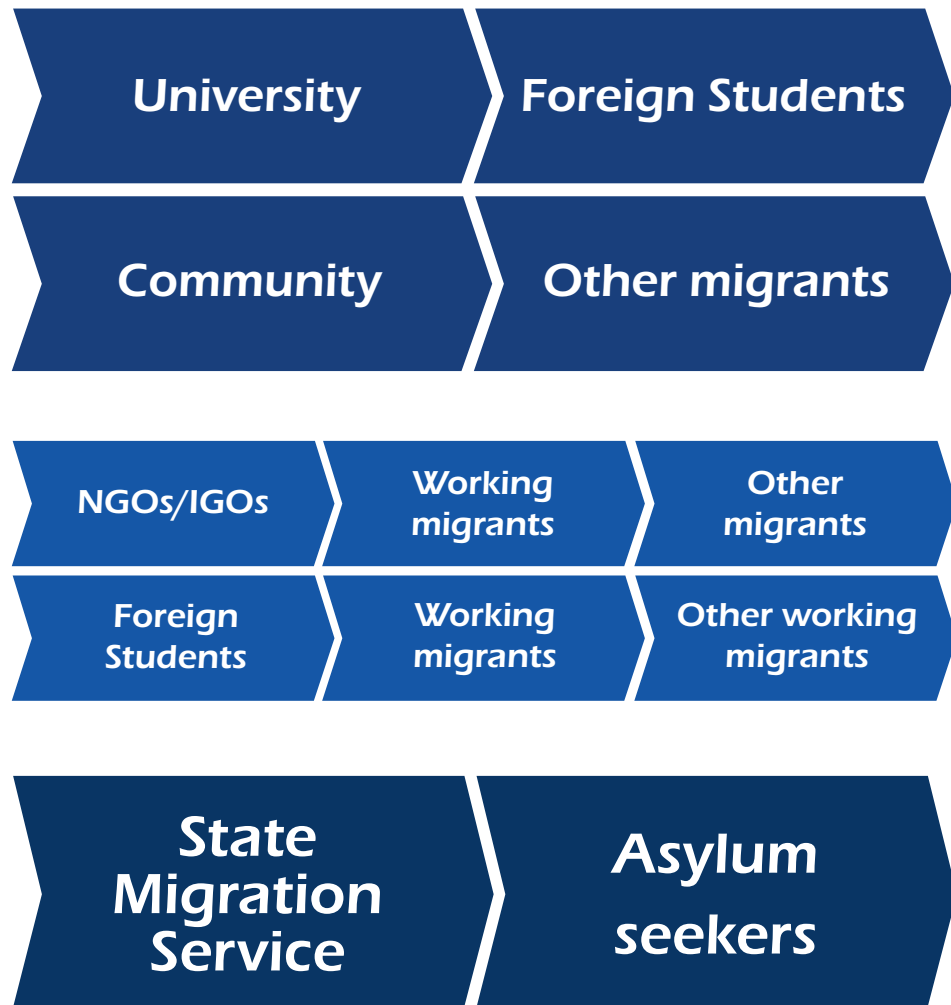8.5 *Reinstate Armenian language classes for asylum seekers online through the State Migration Service.*

Recommendations – 9 - Health care

9.1 *Ensure that migrants have safe and if necessary, anonymous access to early warning and response systems and health-care institutions, especially at regional level.*

9.2 *Although this recommendation is also included above, it must heavily stressed that it is particularly important to make sure that information on COVID-19 and state of emergency procedures and associated services such as Government support programmes, health-care services/institutions, etc., is available in different anguages and in a user-friendly format for migrants.*

9.3 *Ensure that migrants have access to adequate health care, in particular, in relation to COVID-19, independent of the residence status.*

9.4 *Provide asylum seekers and labour migrants with Personal Protective Equipment (PPE) and supplies for COVID-19 disease, including medical masks and antiseptic. This can be done by the State Migration Service, municipalities and other relevant authorities.*

9.5 Allow foreign students at the Medical University to do voluntary work at hospitals during the COVID-19 pandemic, as they are willing to volunteer and support the Armenian health-care hospital and society have mentioned they would like to feel helpful to society these days and.

Annex B

Snowball Chains

University	Foreign Students
Community	Other migrants

NGOs/IGOs	Working migrants	Other migrants
Foreign Students	Working migrants	Other working migrants

State Migration Service	Asylum seekers

Annex C

Research Tables 1 – 6.

Scope and Methodology

Table 1: Research Objectives, Questions, Methods

Note: O = Objective; RQ = Research Question; KII = Key Informant Interview

Research Objectives and Questions	Methods
O1: Discover and typify groups of migrants (including irregular migrants)	Desk Study (including media sources research) Exploratory Survey among StudentsExploratory Survey among NGO/IGO/State Body Stakeholders (Migrants) Exploratory KIIs with NGO/IGO/State Body Representatives
RQ1: What groups of migrants were identified so far?	
RQ2: What is the rough estimate of the number of migrants in Armenia per migrant group?	
RQ3: Which groups (among those identified) and which individuals within those groups are the most vulnerable?	Explanatory Semi-Structured Interviews with Gatekeepers Explanatory Semi-Structured Interviews with Migrants
O2: Reveal the major obstacles to effective access of migrants to minimum social rights as defined by migrants themselves	
RQ4: What are the obstacles related to: *Access to Information*, *Housing*, *Education*, *Social Security*, *Health*, *Social and Welfare Services*, *Employment Conditions*, *Residence Rights and Regularization*	
O3: Develop practical and tailor-made recommendations	Desk Study (including media sources research)Analysis of Survey and Interview (KIIs and Semi-Structured Interviews) data
RQ5: What are the practical and tailor-made recommendations that can be made to IOM and other stakeholders in order to provide assistance to those in need?	

Table 2: Interviewed Migrants' status and gender

Status	Male	Female	Transgender	Total
Asylum seeker	4	2	1	**7**
Student	6	3	0	**9**
Working student	3	2	0	**5**
Worker	7	4	0	**11**
Total	**20**	**11**	**1**	**32**

Table 3.1: Interviewed working migrants' status by gender

Status	Formally contracted		In informal (unofficial) employment		Refused to answer		Total
	Male	Female	Male	Female	Male	Female	
Working student	2	1	1	1	0	0	**5**
Worker	3	2	1	0	3	2	**11**
Total	**5**	**3**	**1**	**2**	**3**	**2**	**16**

Table 3.2: Interviewed working asylum seeker migrants' status by gender

Status	In informal (unofficial) employment			Total
	Male	Female	Transgender	
Asylum seeker	2	1	1	**4**

Table 4: Surveyed students' countries of origin and working status by gender

Country	Student		Working Student		Total
			Male		
	Male	Female	Formal work	Informal work	
India	2	0	-	-	**2**
Iraq	21	3	1	2	**27**
Nigeria	1	1	1	-	**3**
Total	**24**	**4**	**2**	**2**	**32**

Table 5: Interviewed migrants' country of origin, their status and working status by gender

Country	Student		Working Student		Worker		Asylum seeker			Total
	Male	Female	Male	Female	Male	Female	Male	Female	Trans gender	
China	-	-	-	1	-	1	-	-	-	2
Cuba	-	-	-	-	-	-	-	-	1	1
India	2	1	-	1	6	1	-	-	-	11
Indonesia	-	-	-	-	-	1	-	-	-	1
Islamic Republic of Iran	-	-	2	-	-	-	1	2	-	5
Iraq	3	1	-	-	-	-	2	-	-	6
Jordan	1	-	-	-	-	-	1	-	-	2
Netherlands	-	1	-	-	-	-	-	-	-	1
Nigeria	-	-	1	-	-	-	-	-	-	1
Philippines	-	-	-	-	-	1	-	-	-	1
Tajikistan	-	-	-	-	1	-	-	-	-	1
Total	**6**	**3**	**3**	**2**	**7**	**4**	**4**	**2**	**1**	**32**

Table 6: Migrants community members are mostly single

Country	Who are the members of your community?			Total
	Mostly singles	Mostly families with children	Mixed	
China	1	-	1	2
Cuba	-	-	1	1
India	4	-	2	6
Indonesia	-	1	-	1
Islamic Republic of Iran	2	1	2	5
Iraq	2	2	-	4
Jordan	1	-	1	2
Netherlands	1	-	-	1
Nigeria	1	-	-	1
Philippines	-	-	2	2
Tajikistan	1	-	-	1
Total	**13**	**4**	**9**	**26**

Table 7: Migrants' community members
are mostly male

Country	What is the balance between men and women?			Total
	More men	More women	Balanced ratio	
China	1	1	-	2
Cuba	-	-	1	1
India	3	-	5	8
Indonesia	-	1	-	1
Islamic Republic of Iran	1	1	2	4
Iraq	3	-	1	4
Jordan	2	-	-	2
Netherlands	-	1	-	1
Nigeria	1	-	-	1
Philippines	-	1	-	1
Tajikistan	1	-	-	1
Total	12	5	9	26

Note: 26 responses stated that 12 out of 26 migrant communities were represented by mainly males, 9 were seen as having a balanced ratio and only 5 were mentioned as being more represented by women.
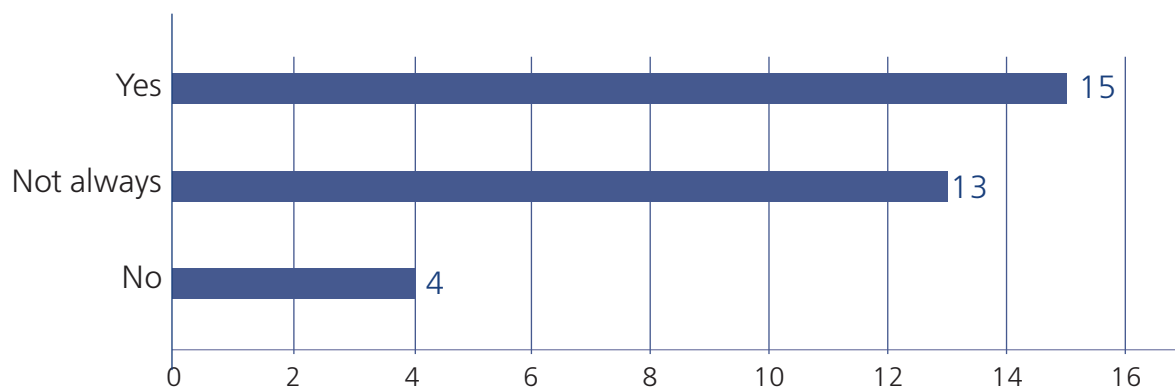
Annex D

Research Tables 8 – 10. Charts 1 - 13

Major Issues Experienced by Migrants

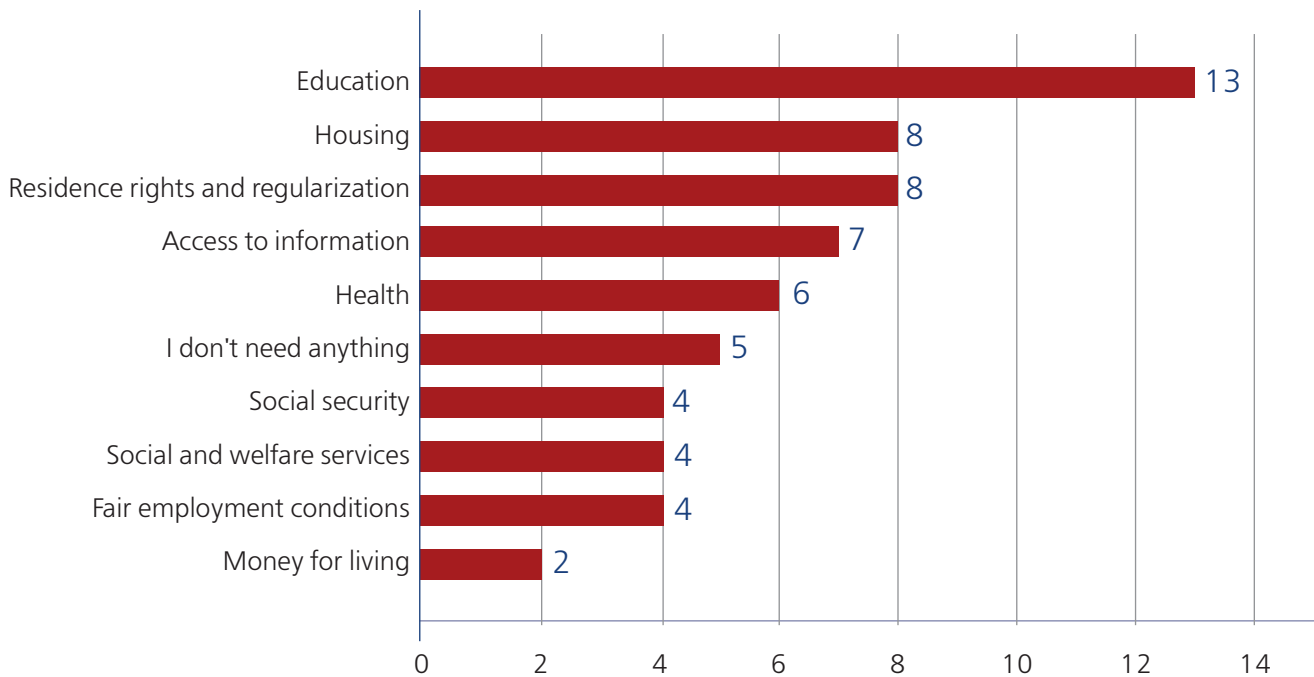### Table 8: Major issues experienced by migrants and their communities
(multiple answers accepted, # of mentions)

Issues experienced by the community		Issues experienced by migrants themselves	
Access to health care	7	Access to health care	7
Housing (quality, affordability)	8	Housing (quality, affordability)	3
Unemployment	7	Unemployment	9
Financial struggles (making ends meet)	9	Financial struggles (making ends meet)	11
Access to education	0	Access to education	3
Access to information	6	Access to information	6
Visa and immigration issues	5	Visa and immigration issues	5

**Chart 1: Sufficient access to information relevant to stay in Armenia** (embassy contacts, flights, visa support, and legal assistance)

Yes	15
Not always	13
No	4

Chart 2: Major issues experienced by migrant students
(multiple answers accepted)

| Issue	Value
Education	13
Housing	8
Residence rights and regularization	8
Access to information	7
Health	6
I don't need anything	5
Social security	4
Social and welfare services	4
Fair employment conditions	4
Money for living	2

Chart 3: Loss of work/income because of COVID -19
(all working migrants referring to themselves and their communities)

	Male	Female
Did not answer	3	2
None/few of them	3	2
Yes	4	2

Male   Female
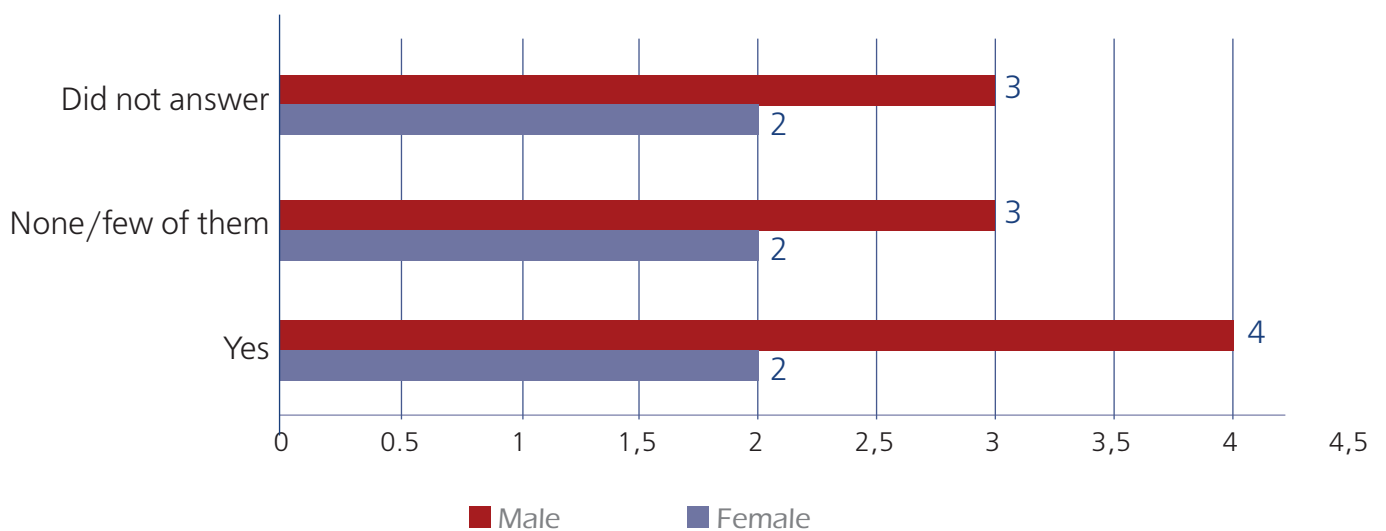
Chart 4: Loss of work/income because of COVID-19
(formally contracted migrants referring
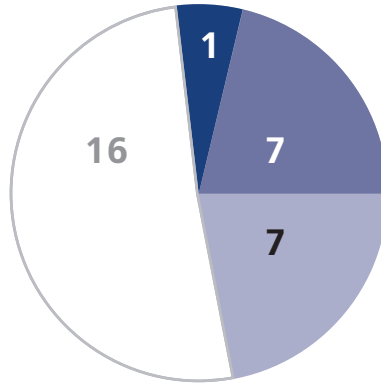*to themselves and their communities)*

Male   Female
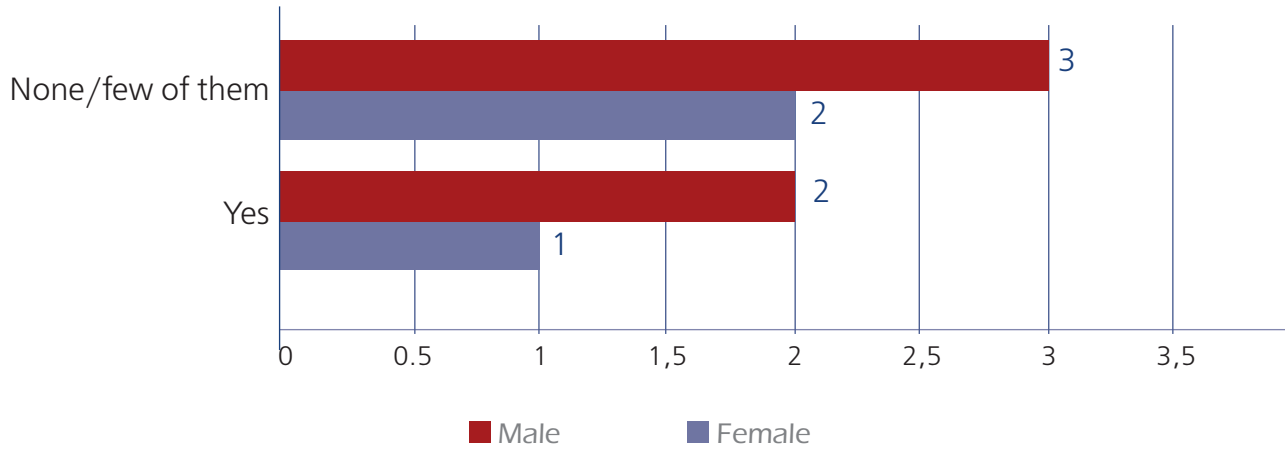
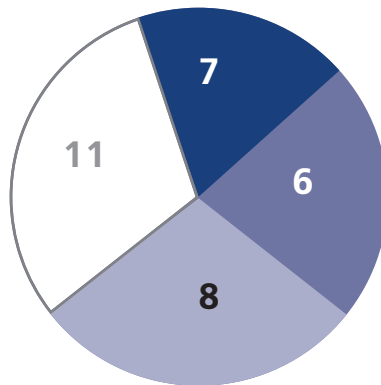**Chart 5: Migrant community members working spheres**
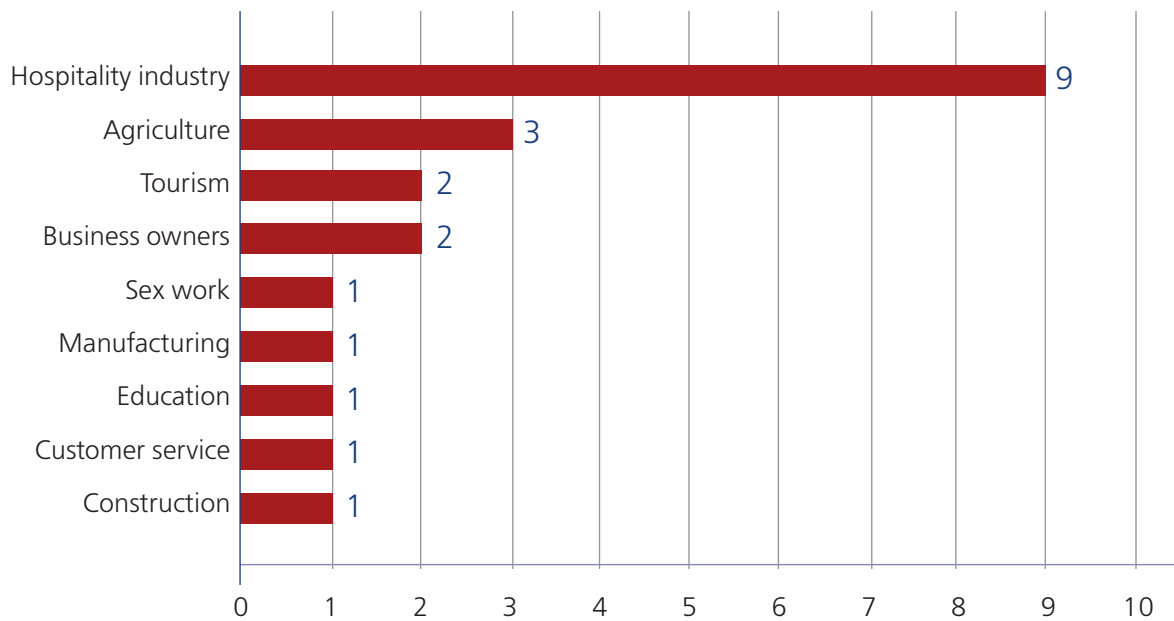
Charts 6-8: Affordability of rent: interviewed migrants' assessment of community situation, their situation and students' responses

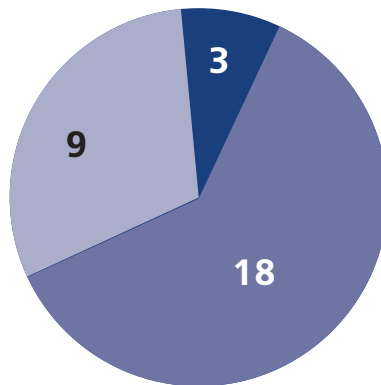### Community according to interviewed migrants

■ Yes, easily ■ They manage ■ It's difficult □ Don't know/did not answer

Interviewed migrants themselves

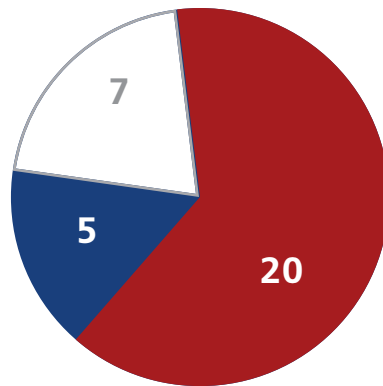■ Yes, easily ■ I manage ■ It's difficult □ Don't know/did not answer

Students who responded to the online survey
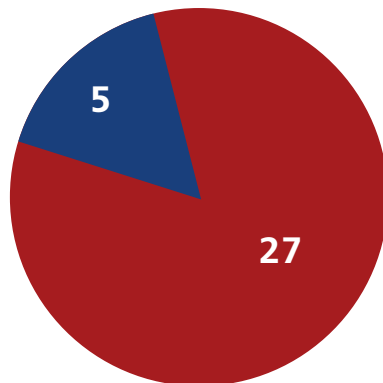

■ Yes, easily ■ I manage ■ It's difficult

Charts 9-10: **Instances of recent hostility**

Interviewed migrants

7

5

20

■ No   ■ Yes   □ Don't know/did not answer
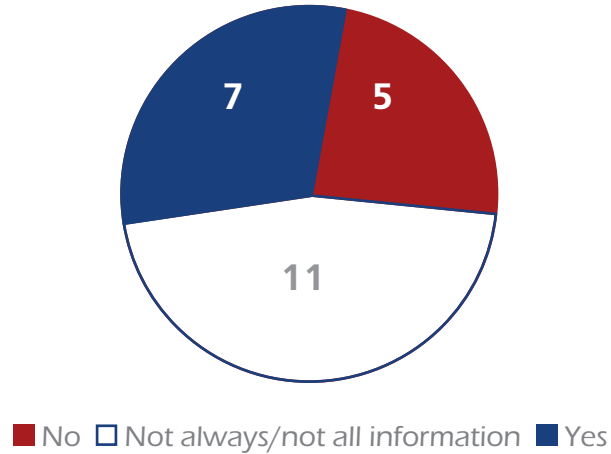
Students who responded to the online survey

5

27

■ No   ■ Yes

Charts 11-13: Assessment of sufficiency of information for the community, for migrants themselves and for students (number of responses)

Community according to interviewed migrants

7   5   11

■ No   □ Not always/not all information   ■ Yes

Interviewed migrants themselves

10   4   13

■ No   □ Not always/not all information   ■ Yes
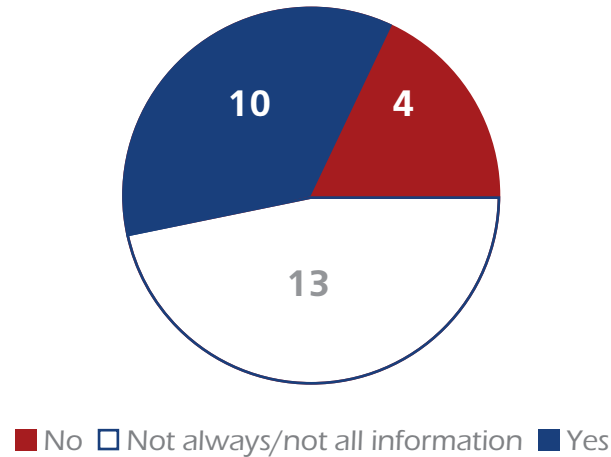
Chart 13: Languages that interviewed migrants reported they are able to read (multiple answers accepted)

Language	Value
English	32
Other	13
Arabic	8
Armenian	5
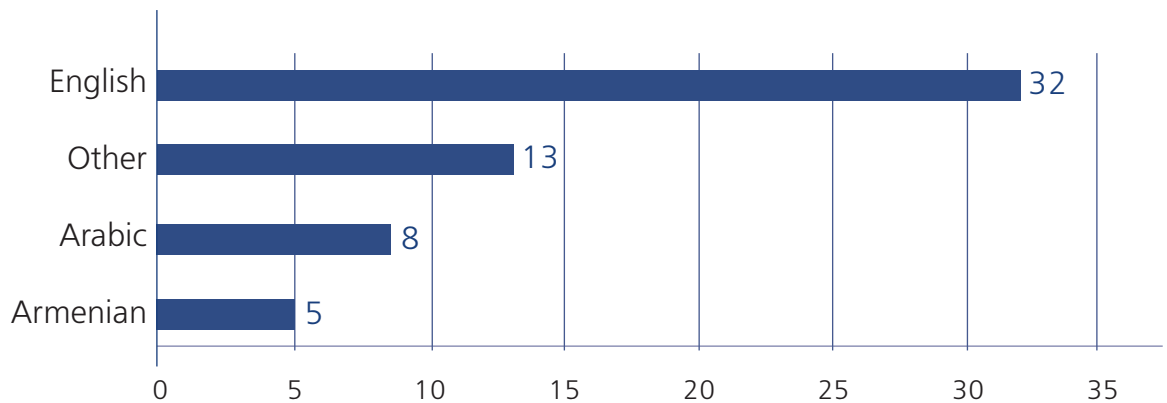
Table 9: Sources of important information for migrant community members and migrants

For community members		For migrants themselves	
Municipality	1	Municipality	1
Neighbours/community	11	Neighbours/community	13
Armenian News/TV	1	Armenian News/TV	5
Facebook, other social media	18	Facebook, other social media	20
Internet	19	Internet	19
Embassy	6	Embassy	4
NGOs	1	NGOs	1

Table 10: Detailed presentation of situation regarding information on COVID-19

Details	For community members		For migrants themselves	
Information sources about COVID-19	a. Municipality	0	a. Municipality	0
	b. Neighbours/in community	8	b. Neighbours/in community	7
	c. Armenian News/TV	1	c. Armenian News/TV	3
	d. Facebook, other social media	12	d. Facebook, other social media	14
	e. Internet	19	e. Internet	20
	f. Embassy	2	f. Embassy	2
	g. NGOs	0	g. NGOs	0

Comments: University, news and English-speaking Armenian friend were mentioned as other sources of information.

A migrant mentioned − "*No one supports us by providing this kind of information. Only in the beginning, basic information. They made some projects with doctors and Mission Armenia came and talked, gave us soap and towel.*"

COVID-19 information available in languages they understand	a. Yes 15 b. Not sure 3 c. No 5	a. Yes 19 b. Not sure 0 c. No 4

Comments: Some websites provide general information on the international situation. For more Armenia-related information, they look at Armenian news and websites that have information. They also use google translate. Text messages from the Commandant are not accessible if they are in Armenian, and many messages remain untranslatable — if these were in Armenian letters, migrants could google translate. FB feature of automatic translation is frequently used by the migrants. The migrants point out that the Ministry of Health website is only in Armenian. English, Iranian, Yezidi, Arabic, Spanish and Russian were mentioned as languages that would be useful to have information in.

Do people in the community have information on whom to call/what to do in case of a suspected case of COVID-19?	a. Yes 15 b. Not sure 4 c. No 4	a. Yes 17 b. Not sure 5 c. No 4

Comments: The Government has released an application about COVID-19, some migrants use this application, the embassies provided a number, most of migrants (those who can keep in touch with the embassies) call the embassies, but they do not know any number to call to an official Armenian body. Sometimes universities give hotline numbers from the Ministry of Health to the migrant students. For those in a hostel, they usually measure the temperature once a day and doctors visit those who are isolated (those who may have a temperature) 3 — 4 times a day.

Sources that would be most useful for information sharing	a. Mobile phone apps 3 b. Emails 1 c. Facebook and social media 5 d. Official websites (of the university, embassy, etc.) 2 e. None 1	a. Mobile phone apps 4 b. Emails 0 c. Facebook and social media 9 d. Official websites (of the university, embassy, etc.) 2 e. None 0

Comments: WhatsApp groups and physical visits of people with important information were mentioned as useful.

Access to clean water and soap	a. Yes	13	a. Yes	27
	b. Not sure	1	b. Not sure	0
	c. No	0	c. No	0

Comments: Migrants said they have clean water. It was mentioned that once Mission Armenia and a church provided support, soup, and shampoo. During the second week of every month, soap is provided to students, sometimes the soap is not enough for one month.

Loss of work/ income because of the COVID-19 epidemic	a. Yes, many lost their income	5	a. Yes, many lost their income	0
	b. Yes, some their income	4	b. Yes, some their income	1
	c. Only a few lost their jobs	0	c. Only a few lost their jobs	6
	d. No	2	d. No	6
	e. Not sure	4	e. Not sure	0

Comments: People who worked in the tourism industry in Armenia lost jobs. Some did not officially lose their job, but they simply cannot work in this emergency situation.

Is there support from their Embassy/ Embassies?	a. Yes	9	a. Yes	4
	b. No	9	b. No	11
	c. Not sure	4	c. Not sure	0

Comments: Students mentioned that on 29 April the Embassy organized a flight to Iraq for students that wanted to go back. As regards information, they are active and keep an eye and inform the people. The university was also helpful as they were in touch with the embassy. The Government of Iraq also helped financially to those who could not afford the tickets.

Embassies provided some emergency numbers on FB. However, embassies have limited resources so they will help only those who are in a very bad situation, in desperate need only. Some people avoid the embassy.

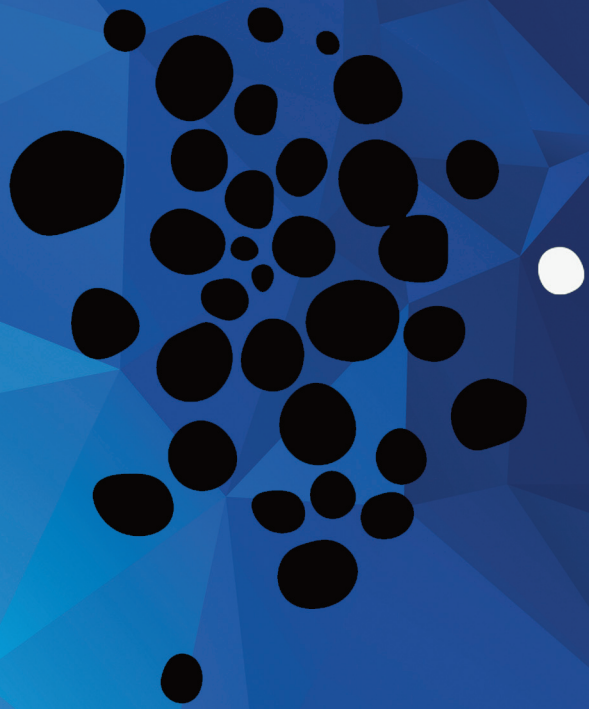| Contacts with Armenian Government institutions or state services or NGOs and IGOs in relation to COVID-19	a. Yes	5	a. Yes	8
	b. Not sure	3	b. Not sure	0
	c. No	17	c. No	18

Comments: Armenian Red Cross, India-Armenia friendship NGO, Migration Service, UNHCR, Mission Armenia and Confucius Institute were mentioned.

Need to return home due to COVID-19	a. No	7	a. No	15
	b. Only a few people	1	b. Only a few people	0
	c. Yes	13	c. Yes	5
	d. Not sure/Refuse to answer	0	d. Not sure/Refuse to answer	1

Comments: Mostly students want to return to their parents/families, but those who left the country to establish themselves in Armenia would not like to go back.

Need for assistance in returning to their country	a. Yes	2	a. Yes	0
	b. No	10	b. No	12
	c. Some yes, some not	2	c. Some yes, some not	1

Comments: It is not only the problem of sending someone from Armenia but also a matter of whether the destination country can receive people.

COVID-19 RELATED VULNERABILITIES AMONG MIGRANTS IN ARMENIA