

## TRANSCRIPT

*EPISODE 8: Covid 19 and Undocumented Migrant Communities.  
Vulnerability Part 2*

**Hosted by:** Rebecca Richards

**Guest:** Josephine Greenbrook

*Transcripts may have been edited for clarity.*

**Rebecca:** Hello and welcome to another episode of Just Emergencies. I'm Rebecca Richards and I'm joined today by Josephine Greenbrook, who is a lecturer and researcher in healthcare sciences, migration medicine, transcultural psychiatry, and medical law at the University of Gothenburgh. She's also a Deputy Director of the Mason Institute here at the University of Edinburgh.

Today we're talking about the relationships between the Covid-19 pandemic, vulnerability, and communities of undocumented migrants and refugees.

*[Intro Music]*

This is "Just Emergencies", the podcast where we show that global health emergencies are anything but just. In each episode we explore an issue, question, or event that makes us think about global health emergencies, humanitarian crises, and how to best respond to them.

Without further ado, let's get into the episode!

**Rebecca:** Hello Josephine and thank you so much for joining me today to share your expertise with us.

**Josephine Greenbrook:** Thank you so much for having me.

**Rebecca:** Your work and your research are focused a lot around the issue of migration medicine and you pay attention to the cases of undocumented immigrants. So in the current Covid-19 pandemic, would you say that refugees and asylum seekers are a particularly vulnerable group?

**Josephine Greenbrook:** The quick answer to that would be 'yes'. But then we'd have to start discussing all the different kinds of aspects of what we mean by vulnerability. Also I know that a lot of people are quite uncomfortable with the idea of the word vulnerability. Of course, in my work, where I meet undocumented migrants a lot, I think they would also object to the word 'vulnerable'. When we speak of migrants more broadly, it's such a heterogenous group that it's very difficult to discuss vulnerability as a whole.

But if we were to broadly, or perhaps grossly, generalise issues of health and issues of safety... well broadly I would say issues relating directly to the pandemic and issues of justice in relation to healthcare access, in relation to safety from exploitation, or safety from many precarious situations that these groups tend to pertain, I would say that they're absolutely more vulnerable than the general population.

They're also more vulnerable because in many ways, they're left in positions that *make* them vulnerable. So I would say that they aren't necessarily vulnerable, they're *made* vulnerable. I know that this has

been argued by many people. I'm absolutely not alone on that position. But we do have to discuss the issues of power in some ways here, because I think that there's a lot of discussion in global health, or migration medicine, or even public health more broadly, that talks about empowering people to remain healthy, or to become more healthy, or empowering people through preventative strategies and approaches and treatments. The problem with that is that as soon as we have those approaches to empowerment, we also have the possibility to dis-empower a large percentage of people who don't have access to these things or who are excluded from these things.

I would say that migrants more broadly and absolutely undocumented migrants and asylum seekers are very often left in a position where they are excluded through different regulatory measures, or policies, or simply just access, affordability, and many other aspect. They're also largely impacted by issues that are otherwise supposed to protect the majority. And I think that that's perhaps where we can discuss vulnerability more broadly; so it's a systemic or structural vulnerability that is then somehow embodied by these populations.

I guess that was the longer answer.

**Rebecca:** I think that's a really important distinction to make. It's something that we've been trying to do throughout the project in general - sort of stress the idea of 'made vulnerable'. It's such a structural issue. So I think that nuance is definitely appreciated and needed.

**Josephine Greenbrook:** I think that there's also a broader issue in relation to the Covid-19 pandemic. I think that there is a broader issue in relation to agency and the idea that everybody can just stay at home or everybody can just seek help if they get sick. And I think that this is

also something I've been seeing in a lot of language used and rhetoric used: 'stay home', 'stay safe' ... which is what everybody is saying these days, right? And I know that they're absolutely meant well. But I think that they put a lot of responsibility on the individual. It makes people think that everybody's responsible for the harm that may occur if they didn't take care of themselves, or if they didn't stay safe, or if they didn't stay home... all these types of things. I think it removes responsibilities from certain state initiatives that should actually be protecting people. We need amount of freedom to keep people safe, but we also need a certain amount of restrictions to keep people safe.

So I think it's absolutely complex. We will sadly, probably, only know in retrospect how best we could have done.

**Rebecca:** And considering all of that, what do you think the most urgent ethical issues are that we should be attending to when we're talking about improving the Covid-19 situation... or how we're dealing with that, in relation to undocumented migrants?

**Josephine Greenbrook:** Ok, so I'm going to try to answer this from a global perspective, rather than thinking specific countries.

Because we do have absolutely, in the European context we have, for example, plenty of camps where migrants are broadly 'kept', I would say. Some undocumented, some registered somewhere in the European continent because of different government measures and so on. Keeping people restricted in close quarters is 100% not only unethical, but it's a public health and patient safety issue. It's a safety issue for whoever's in the camp who *might* be sick, but also for those who *are* sick and do get sick. And it would absolutely be a public health disaster if it starts

spreading, just like we've seen in prison and other places where people are confined to smaller spaces in closed quarters.

Then I would say that there's also the other aspect that is also on a global level; if we think about undocumented migration leading to a lot of exploitation in relation to precarious work or to trafficking and these types of thing - so sexual violence.

So if we take precarious work first, we see that undocumented migrants, for example in the US context, are actually working in a lot of the fields that are still considered essential. So farming and other things. So they're essentially still necessary and they will employ these populations on the black market. And yet these people are also essentially unprotected in every way. They're unprotected from any legal measures in relation to their employer. So their employer has no real legal obligation because everything is in the dark. But they're also unprotected in relation to health and health care seeking. I think it's quite interesting to see this idea of essential workers being essentially unprotected. And I think that that is something that should be explored, and will be explored, from many perspectives.

Then we also have ethical issues, if we think more broadly, in relation to human rights and the protection of those. I think that we do have to pay special attention to children and women - mostly because not only legal aspects of international law dictate that, but also more broadly, they do tend to be in more precarious situations. They also tend to be confined to the stay-home measures, and we're seeing an increase in violence - domestic violence -, we're seeing an increase of general abuse. But we're also seeing restricted measures in different aspects in relation to sexual and reproductive health. It's an easy situation right now to motivate

restricting health care services that are considered 'unessential' to some and very much 'essential' to others.

Especially if there are politics involved, it's always easy to politicise migration and undocumented migration specifically. So I think that the ethical issues, if we were to discuss them more broadly, it's protecting essential workers, protecting the right to work - especially if they're needed. This includes... now we're discussing undocumented migrants, but also in most countries, by far, asylum seekers don't have a right to work, either. So they also seek precarious work and unprotected work, and are easily the victims of exploitation in that sense.

Then there's the issue of women and children. I think those should be discussed separately. Because women have an issue of their own in relation to sexual violence and abuse, but also in relation to reproductive or sexual health and rights more broadly. And then children have the right to a childhood, a right to education, the right to a smooth transition to adulthood for teenagers. I think that the situation is more global, not just migration related, it's a *human* experience... I think that many of the measures that are put in place right now render children particularly vulnerable in the home.

**Rebecca:** You mentioned before that hindsight will be a valuable tool. What are the lessons we should learn from this? How can we improve pandemic responses in the future, but also hopefully now, for this pandemic?

**Josephine Greenbrook:** I think this is a really difficult one, because humans are notoriously bad at learning from their lessons. I mean we don't have to look very far back to SARS or different pandemics that we've seen in recent years, but also just if we look historically. And we

seemed to have learned very little. Even though, of course, we've learnt a lot, as well.

But the preparedness levels were no-where near what they needed to be, obviously we see that now. I think that one thing we will learn, and that we're already seeing now, is that governments that do not have sustainable human rights measures in place will suffer human rights citations - or at least risk to suffer. The cracks in whatever sustainable structure they may have developed over time are shown quite explicitly in this moment. If they didn't have the right protections for women and children, if they didn't have the right protections for the workplace or safety in the work place or these types of things, if they didn't have enough healthcare staff, if they don't have enough healthcare beds... all these things are somehow all of a sudden made explicit.

The question is if we will learn from this. If governments will respond to these obvious deficiencies that we are now all seeing. Normally they're discussed just in theory, but now they've become so real because people see them: people know somebody who's sick or has died, people know somebody who's losing their job... people might *be* that somebody. So I think that everything becomes more salient.

I think many populations now - migrant or not - are accepting of the fact that some resources are scarce. People are empathic to the situation because we're all in this together. The problem is - and that I think what we will learn from this - that we will see it in specific countries where public health will show that the general health of the population was weaker from the start. So these populations will be more impacted. And by that I mean that, for example, we will see that if you were unhealthy, or if you die largely disproportionately because you are of another skin colour or another background... that will show that in the system

somehow we had issues in relation to this. Either before you got sick, or the reason why you got sick, or how we responded to that sickness.

So I do think that we will see not only issues of inequality, but issues of injustice, issues of equity more broadly. The question is just if we will listen and learn and do something about it.

**Rebecca:** Well, let's hope then that we can break the mould and that we will learn and improve in the future.

So thank you very much for sharing your thoughts with me. That was very valuable.

I'm not going to say 'stay safe'. I will wish you and your family and your loved ones all the best in this time.

**Josephine Greenbrook:** Thank you.

*[Outro music]*

That's it for today – we hope you enjoyed the today's episode.

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If you have any questions, comments, or ideas for topics *you'd* like to hear about in future episodes, please emails us at [ghe@ed.ac.uk](mailto:ghe@ed.ac.uk). We're also on twitter as @GanguliMitra and @reb\_richards.

Be sure to check out and explore our website “Justice in Global Health Emergencies and Humanitarian Crises” for more great content, just go to <https://www.ghe.law.ed.ac.uk/>.

Thanks for listening and see you again for the next episode.

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