**MIGRANT FORUM IN ASIA (MFA) SUBMISSION TO THE SPECIAL RAPPORTEUR (SR) ON VIOLENCE AGAINST WOMEN (VAW) IN THE CONTEXT OF THE COVID-19 PANDEMIC**

30 June 2020

***Introduction***

The world is currently facing extraordinary times due to the COVID19 pandemic. No country has been spared from the pandemic and the international community is scrambling to address the crisis. Countries have shut down and imposed restrictive measures on mobility to prevent the spread of COVID-19. The United Nations Special Rapporteur (UNSR) on Violence against Women (VAW), Ms. Dubravka Šimonovic, said in her statement on 27 March 2020 that restrictive measures to fight COVID-19 intensify the risk of domestic violence. She also called on governments not to put on hold the protection of victims and urged them to continue to combat domestic violence in the time of COVID-19. In line with this, the UN SR on VAW is requesting contributions for information on the increase of gender-based VAW and domestic violence in the context of the COVID-19 pandemic.

The Migrant Forum in Asia (MFA), the Cross-Regional Centre for Refugees and Migrants (CCRM), and the Migrant Women Forum (MWF) prepared a report regarding the increase of gender-based VAW and domestic violence in the context of the COVID-19 pandemic, specifically focusing on international migration. The report is based on inputs of the members of MFA, CCRM, and MWF from the following countries: Australia, Bangladesh, Cambodia, Egypt, Jordan, Kuwait, Lebanon, Philippines, and Singapore.

***Violence against women migrant workers in the context of the COVID-19 pandemic***

Statistics show that there are large numbers of women in all forms of migration as they comprise 130 million or 47.9% of all international, global migrants (UN DESA, 2019). The trend towards the feminization of migration is particularly obvious as shown by changes in the proportion of women in total immigration flows between 1990 and 1999. The feminization of labour migration is attributed to the growing demand of households for domestic services. Most women migrant workers dominate occupations like domestic work wherein they often perform unpaid and underpaid roles, particularly in the care sector. This condition makes them one of the most vulnerable sectors, even before the COVID-19 pandemic.

The COVID-19 pandemic has affected millions of migrant workers, including women migrant workers. Many migrant workers have been found positive for COVID-19 but they have limited or no access to treatment in countries of destination (CODs) or upon return to their home countries. Many have lost their jobs and put on forced leaves without pay as industries shut down. Many were stranded in transit or in CODs as governments closed borders and imposed travel restrictions. Migrant healthcare workers are among those who are most vulnerable as they are at the frontline treating those who are sick. Migrants living in crowded and unsanitary dormitories are also infected with COVID-19.

The restrictive measures imposed by governments to fight the pandemic have intensified women migrants’ vulnerability to abuse in the workplace. Women migrant domestic workers are among those vulnerable to abuse given that they work in isolation and live in the homes of their employers. Since the beginning of March 2020 when governments imposed quarantine and travel restrictions, migrant Civil Society Organizations (CSOs) have received increasing reports of abuse in the workplace from women migrant domestic workers. Such issues include increased workloads, disputes with employers, verbal and physical abuse, increased surveillance and restrictions on the use of mobile phones, lack of food, lack of rest, non-payment of wages, and inability to send remittances to family members. CSOs in countries of origin (COOs) also received an increasing number of reports from migrant domestic workers complaining of more workload with the start of Ramadan. These cases were reported from migrant domestic workers who are based in the Middle East.

Due to quarantine measures imposed by governments, the entire family of employers are at home which means longer working hours as well as increased household and caregiving duties for migrant domestic workers. The increase in workload means no rest days for a migrant domestic worker. The quarantine measures limit the mobility of household members and many domestic workers are also not allowed by their employers to leave the household in order to remit money to their families, buy personal hygiene products, and top up their mobile phones. These restrictions meant that it was difficult for some migrant domestic workers to get in touch with family members or seek help or report cases of abuse.

On the other hand, women migrant workers employed in the services sector are forced to accept lower labour standards for fear of losing their jobs. Migrant CSO partners received reports from women migrant workers employed by cleaning companies that they continue to work without personal protective equipment (PPE) or any protective measures in place. This has caused severe anxiety among women as they fear the exposure to the virus.

CSOs also received reports from women who continue to work in factories in Jordan that there are no health and safety standards to address COVID-19 in the workplace. Measures recommended by the World Health Organization (WHO) such as social/physical distancing, disinfecting workplaces, and using PPE are not being followed. There were also reports of non-payment of wages among women working in factories. Many of these issues being faced by women migrant workers are already existing prior to COVID-19. However, the current circumstances have exacerbated their situation and exposed them to further abuse and violence.

When it comes to VAW and domestic violence, there are a very few official data in terms of the impact on women migrant workers. Information released by governments do not include disaggregated data between local and migrant women. In some countries such as Kuwait, Lebanon, the Kingdom of Saudi Arabia, Jordan, Singapore, Nepal, and Bangladesh, CSOs have seen an increased prevalence of VAW among migrant domestic workers. Some of the cases of violence against women migrants were reported to CSOs in COOs. In the Philippines, there have been a very few reports of VAW cases among returnee migrants, however, this does not reflect the absence of VAW incidents. In Egypt, CSOs have also not seen an increased reporting of VAW among migrants. CSOs have indicated that the low reporting could be because of the restrictions on mobility during quarantine. Many returning migrants have no access to complaint mechanisms and they find it extra challenging to report violence and abuse because of lockdown measures. Most of them live with their abusers or perpetrators as well.

The Singapore government reports indicate a 14% increase in referrals and inquiries related to domestic conflict and violence in the first two weeks of the quarantine. The data do not provide information on the percentage of inquiries coming from women migrant workers. However, a CSO in Singapore that provides assistance to migrant domestic workers, the Humanitarian Organization for Migration Economics (HOME), noted 25% increase of reports received through its helpline for domestic workers who are facing abuse in the workplace. AWARE, an NGO that runs a women’s helpline, received a 33% increase of family violence-related calls in February 2020.

In Cambodia, there is no official data on the number of cases of VAW experienced by migrant workers. Nevertheless, informal interviews with returnee migrants exposed that they have experienced abuse prior to their repatriation.

The Bangladesh Nari Sramik Kendra (BNSK), an organization supporting women migrant workers, received 34 cases of gender-based violence during the COVID-19 pandemic from women migrant domestic workers working in the Kingdom of Saudi Arabia, Jordan, and Lebanon. All of the women requested to be repatriated due to abusive working conditions. A local survey conducted by BNSK among 164 women migrant domestic workers in Bangladesh reveals that 94% of the women experienced physical violence from their male partners during the lockdown imposed by the government. Data provided by the Refugee and Migratory Movements Unit (RMMRU) Bangladesh, indicate that there were more than 300 incidents of domestic abuse and violence, 36 were rape incidents in March in three districts -- Bogura, Jamalpur, and Cox's Bazar. Based on this trend it may be surmised that women migrants are also facing this kind of distress. These cases are not documented properly by the government and others as in most instances, victims do not report violence to authorities or take legal action.

CSOs, AMKAS Nepal and Pravasi Nepali Coordination Committee (PNCC), reported that through informal interviews with women migrant returnees, women, particularly domestic workers, faced increased violence in the workplace. Aside from increasing workload with all family members at home, some employers divert their stress to their domestic workers. POURAKHI Nepal received reports from their 21 district focal points that women migrant worker returnees are struggling with physical violence from their male partners. The men pour out their stress to their women partners. Another CSO in Nepal, the Women's Rehabilitation Centre (WOREC), reported an increase in discrimination against women migrant returnees. Many returnees are not welcomed or shunned by their communities. The women are blamed for spreading COVID-19 in the community even if they have not tested positive for the virus.

In Egypt, CSOs said there were a very few reports from women migrant workers in the first two weeks of the quarantine. However, upon follow up with previous clients to inform them that CSOs provide shelters for abused women, they found out that many women were just afraid to report complaints on VAW. Many of the women refused to report or take action for fear that they will have nowhere to go due to the uncertainty of the situation. With strict quarantine measures, they were also unsure if anybody will be able to help them leave their house to go to a shelter. This fear was especially exacerbated in the case of female refugees and asylum seekers who have children.

The Kuwait Society for Human Rights recorded an increase in VAW cases, receiving 31 cases of violence against migrant workers during the quarantine period. Cases involved physical and verbal abuse as well as economic abuse with husbands taking their wive’s salaries. Some of the women migrants were blamed by their husbands for losing their jobs as many industries shut down.

In Jordan, migrant workers are excluded from government protection schemes, thus those who have lost their jobs are unable to access wage compensation and humanitarian relief. Migrant women work under exploitative sponsorship conditions and are associated with all types of violence and harassment, especially those working in low-wage, underpaid, and under-evaluated sectors. Violence being experienced by many women migrant workers goes beyond physical violence but also extends to psychological, sexual, and economic harm, including non-payment and delays of wages. Many migrant women are unable to transfer money to their families as they are not allowed to open bank accounts in Jordan. They also do not know how to use petitions and there is lack of complaint mechanisms which is also linked to lack of access to justice. These factors increase stress and uncertainty about the future as the pandemic continues to pose many negative impacts.

In the Pacific region, there has been a 75% increase in people searching online for support and assistance related to VAW.

***Women migrants’ access to services***

Due to the mobility restrictions imposed by countries to address COVID-19, women are having difficulty in accessing a number of services provided by governments. In some cases, migrant workers are not eligible nor covered by social protection schemes in CODs. The lockdown in some countries also means that embassies are not fully operational, thus limiting services that migrants can avail. A number of embassies are overwhelmed with coordinating humanitarian support for migrants who have lost their jobs and stranded in CODs. With COVID-19 response given the priority, a number of women who reported abuses in the workplace informed CSO partners that they are not entertained by the concerned embassies.

When it comes to the access of women migrant workers to the services of CSOs, all CSO partners who provided information for this report mentioned that CSO services for migrant victims of VAW are all open despite the quarantine and lockdown imposed by governments. Some of the services such as help desks and counselling have been moved virtually. Due to the quarantine, helpdesks in public places like malls are now closed but hotlines are still operational. A number of organizations also started providing online counselling.

* *Temporary shelters for women migrant workers*

Temporary shelters to quarantine returnee women migrant workers are currently not provided by the Government of Nepal. CSOs are in dialogue with the Ministries of Women, Health, Labour, and the Foreign Ministry for the Nepal government to support quarantine facilities for returnee women migrants before they are sent home to their villages. In some CODs, the Nepal government provides temporary shelters for women who are being repatriated because of COVID-19. Anecdotal reports from Nepali women migrant worker returnees show that the temporary shelters were not equipped to deal with the COVID-19 pandemic. For example, safety measures prescribed by the WHO were not being followed in the shelters. In the COO, the government also provides temporary shelters for victims of VAW but it is not available for women migrant workers. Women migrants who need temporary shelters upon return are referred to CSOs that run programmes to assist women and migrants.

The Philippine government provides shelter for migrant victims of VAW both in the COO and CODs. However, based on reports from CSO partners, the Centre for Migrant Advocacy (CMA) and Kanlungan Centre Foundation, it has been difficult for migrant victims of VAW to contact the shelters or embassies as they prioritize COVID-19 issues. Thus, they are unable to access the government shelters during the pandemic. The Philippine government requires all migrant returnees to undergo testing and quarantine for 14 days before they can go home to their cities or villages. Women migrant workers who were repatriated during the pandemic were put in quarantine facilities supported and paid for the Philippine government. A very few CSOs run shelters for women migrant worker returnees as majority of the cases are referred to the shelters being operated by the Overseas Workers Welfare Administration (OWWA).

In Singapore, shelters for migrant victims of VAW are run by CSOs. HOME continues running shelters for women migrant domestic workers despite the quarantine and lockdown imposed in Singapore. Their shelters are currently at full capacity as flights were cancelled and many migrants are left stranded. WHO protocols and safety measures to prevent COVID-19 were being followed in the CSO shelters. The WHO safety measures have made it difficult for CSOs to accept more migrants due to the safe distancing measures implemented. Given that the shelters are at full capacity, new victims of abuse can no longer be accommodated posing a big issue for migrants.

The Government of Cambodia offers a transit centre at the Thailand border for all women migrants, including victims of VAW. If further support is needed after the women left the transit centre, they are referred to CSO-run shelters. There was no information provided if shelters were equipped with safety measures to address COVID 19.

Based on the information from CSO partners in Nepal: AMKAS, POURAKHI, and WOREC, their shelters continue to operate despite the lockdown/quarantine measures imposed by the government. The shelters provide support for women migrant worker returnees in distress and victims of VAW. The shelters have been adapted to the requirements of the WHO in terms of implementing safety measures to address COVID-19. Women migrant returnees who are in need of temporary shelters upon repatriation are referred to these organizations.

The Bangladesh government has six shelter homes run by the Department of Social Welfare in six divisional headquarters that are open and available for women victims of violence. Aside from this, the Department of Women Affairs has a national helpline to support the victims of VAW (<http://nhc.gov.bd/>). Special shelters have been dedicated by the government for migrant women in Bangladesh. Shelters for migrants are run in CODs like in Saudi Arabia. CSOs, however, reported that many of the state-run shelters in CODs were not equipped to address the COVID-19 pandemic. Safety measures of the WHO were not strictly implemented with overcrowding in some shelters preventing physical distancing. The government also opened quarantine facilities for women migrant worker returnees but it was unclear if all women migrant workers were able to access the shelter.

Shelters by CSOs in Bangladesh continue to operate despite the lockdown and quarantine. The temporary shelters provide accommodation, food, counselling, medical treatment or referral to medical facilities, linkages to government facilities, and facilitate migrants’ communication with their family members. Some organizations also provide financial aid to VAW victims even after leaving the shelters. Among the organizations that provide shelters include RMMRU’s Migrants Support Centre, Dhaka Ahsania Mission, RokeyaSadan, managed by Bangladesh Mahila Parishad (BMP), Bangladesh Mohila Parisod, and Ovibashi Karmi Unnayan Program (OKUP).

Based on reports provided by the Kuwait Society for Human Rights, shelters for migrant victims of VAW remain available and open during the quarantine. The women migrants can stay in the shelters until such time that they are repatriated by their governments. The women who are found positive for COVID-19 are transferred to a different location, the amnesty programme shelter where they are provided with better and more specific healthcare.

According to the information provided by the Solidarity Centre Jordan, the Jordanian Women’s Union (JWU) provides legal, medical, and psychosocial support to the shelter residents. The women are subject to the COVID-19 test and social distancing is applied in the shelter. However, with the lockdown and curfew in Jordan, it would be difficult for women victims of violence to reach the shelter easily, especially that the government was not permitting the JWU to reach out to the women who call them. The civil society is unable to do its role efficiently because of the government's restrictions.

Most of the migrant women cases were referred to the JWU through the anti-trafficking unit.

In Australia, women from migrant and refugee backgrounds who are experiencing family or domestic violence can contact inTouch of the Multicultural Centre Against Family Violence at 1800 755 988, or visit intouch.org.au.

* *Hotlines for women specific to addressing COVID-19*

Majority of the countries have government hotlines related to COVID-19. Nevertheless, there are no specific hotlines run by governments that address women's issues during COVID-19. Hotlines operated by embassies are sometimes not accessible as they are overwhelmed with COVID-related concerns from migrants who have been stranded during the pandemic. CSO hotlines for women who need support and assistance during COVID-19 continue to be open during the quarantine period. Some CSOs had to increase their number of hotlines in order to accommodate additional calls from migrants who have been stranded or lost their jobs during the pandemic.

The Philippine embassies/consulates/mission posts, in general, have hotlines for Overseas Filipino Workers (OFWs), even direct, for example, to the Philippine Overseas Labour Office (POLO). The helpline staff, if there is, may not be adequately oriented to be gender-sensitive and responsive. While the Magna Carta of Women provides for gender focal persons in the posts, this is assigned to only one person who should be in charge of orienting the rest of the staff. Nonetheless, the embassies do not have a specific hotline for COVID-19 concerns. In the COO, the government has also initiated a number of hotlines for all COVID-related concerns which are accessible for all, including migrants.

In Singapore, the Ministry of Manpower (MOM) has a hotline for domestic workers who are facing well-being issues which has remained operational, although there have been feedbacks that it is harder to seek assistance from the hotline during this time. The government also launched a National Care Helpline on 10 April 2020 for COVID-19 related concerns. It is a 24-hour helpline manned by more than 300 psychologists, counsellors, social workers, psychiatrists, and public officers from around 50 agencies. However, the government has no dedicated helpline for domestic workers to deal with issues related to COVID-19. CSO-run hotlines in Singapore remain operational despite the lockdown and quarantine measures imposed. The lockdown resulted to the closure of help desks for migrants in public places but CSOs have moved a lot the services online. Counselling can be done online or through phone calls. Information previously provided by the CSO helpdesks can also be accessed through their social media and websites.

In Cambodia, a hotline is provided by the Ministry of Health to extend assistance to the residents of Cambodia. It is not specific for women migrant workers. For cases related to COVID-19, one may call the hotline 115 to get more information and updates from the Ministry of Health.

The Nepal government established a specific hotline for COVID-19 concerns as well as a separate hotline for medical counselling and support. There are also hotlines formed for VAW issues by the Ministry of Women, as well as work-related concerns by the Ministry of Labour. Nonetheless, there is no hotline dedicated for COVID-19 and migrants at this stage.

The Government of Bangladesh also opened several hotlines specific for COVID-19 concerns in the country. The ProbashBondu Call Centre of the Wage Earners' Welfare Board under the Ministry of Expatriates Welfare and Overseas Employment (MoEWOE) has been widely used to solve various problems faced by migrants in both the COO and CODs. In this situation, migrants mostly ask for livelihood support and raise concerns about their jobs. The call centre is kept open from 7am to 9pm every day, except on weekends and government holidays. The contact numbers of the call centre are 01784333333, 01794333333, and 02-9334888. A separate team is working under MoEWOE and they are responsive to women migrant issues. The 333 Call Centre of the government is also dedicated to providing support for COVID-19 patients. They mainly provide emergency support during the crisis, irrespective of being migrants or non-migrants. According to a report of the International Organization for Migration (IOM), the government also hosts a migrant-focused website: www.probashihelpline.com. It is a one-stop shop privately run by a few volunteers and partially supported by the government that is dedicated to provide information to Bangladeshi migrants around the world.

The Jordanian government and CSO helplines operate in Arabic. They are not gender-sensitive and responsive. They are meant to support Jordanian people in the first place but even Jordanians are not benefiting a lot from these helplines. There is a huge number of complaints from workers because of the closure of most businesses in Jordan. However, migrant workers are usually hesitant to call the government hotlines, especially because of the language barrier and their irregular residency status, in addition to lack of awareness about these services. Therefore, majority of the migrant workers prefer to call helplines run by CSOs.

In Kuwait, a hotline at 00965-24970967 is provided generally for both men and women who want to ask about COVID-19 symptoms, report on an incident if someone is infected, and ask to be examined by doctors. Unfortunately, no hotline is dedicated to receiving calls from migrant women, yet women can still call and be provided with answers. The hotline is receiving more calls due to increasing public concern regarding the pandemic.

In Egypt, the National Council for Women (NCW), a national government institution, assigned a hotline for victims of VAW; without mentioning that it is for Egyptian women per se. This has encouraged civil society members who work with non-Egyptian victims of VAW to spread this among their beneficiaries and encourage them to contact this helpline. The helpline has been enacted and endorsed, in response to the challenges that emanate from COVID-19 context/crisis. It has been receiving an influx of calls but there is no information if such calls include non-Egyptians. As for whether or not the helpline staff is adequately oriented to be gender-sensitive and responsive, there is no available information on that.

* *Psychosocial support for women migrants*

In the Philippines, psychosocial support is not provided in embassy shelters or in shelters for migrant returnees. However, the Philippine government operates counselling hotlines for COVID-related concerns that are accessible to all.

In Singapore, HOME offers counselling services to its shelter residents. During Singapore’s quarantine period, this service was offered remotely. Domestic workers within the community can also speak with HOME’s counsellors. To HOME's knowledge, one other NGO offers similar services.

The Government of Nepal does not have specific mechanisms for providing psychosocial support to women migrant workers who are affected by COVID-19. The government provides only referral to hospitals and fever check service. There is also no COVID-19 testing for women migrant worker returnees. Majority of the psychosocial support is provided by CSOs through shelters for women migrants. Psychosocial support is among the essential services being offered by CSOs during the pandemic.

The Government of Bangladesh’s MoEWOE confirmed that it has started a psychological counselling service at the ministry's ground floor with limited support from the International Centre for Migration and Policy Development (ICMPD). The Department of Women Affairs has psychosocial counselling for the victims of trafficking and victims of violence as well. The Red Crescent Society has launched a psychosocial support cell to provide mental health services to those who become anxious over the spread of the COVID-19 pandemic. Moreover, there are some organizations that offer mental health support such as the Dhaka University’s Clinical Psychology Department, Department of Education Counselling Physiology, and National Trauma Counselling Centre by the government, Kaan Pete Roi, along with some other private institutions. Unfortunately, it is difficult for women migrants to access these as they are unaware of the availability of such support and they have limited opportunities to get access. But CSOs and NGOs are linking them to the support centres for migrants.

With regard to services by CSOs, RMMRU provides mental and counselling support for affected women migrants as well as their left-behind children. The lockdown situation has restricted the opportunities for rendering services to migrants, though. With its trained staff, BNSK is providing social counselling through its hotline numbers (01309295518-19 and 01715155198). It is also finding ways to continue clinical counselling over social media platforms such as IMO and WhatsApp, engaging youth clinical counsellors who graduated recently from public universities. Another CSO, BRAC, has also established 11 psychosocial counselling centres over the country for the migrants' psychosocial reintegration. It has a dedicated hotline number under a project with IOM and funded by the European Union (EU).

* *Protection orders that are meant to stop violence and harassment against women migrants made available and accessible during the COVID-19 pandemic*

Majority of the countries that responded to this report (Nepal, Bangladesh, Philippines, Jordan, Kuwait, and Singapore) indicate that their protection orders meant to stop violence and harassment against women migrants are not made available and accessible in the context of the COVID-19 pandemic.

For the Philippines, the Kanlungan Centre Foundation, expressed that protection orders meant to stop VAW and harassment against women are not applicable to women migrants. Most of the protection orders pertain to personal relationships and not work-related. Ironically, majority of the violence experienced by women migrants was related to work, thus most of the time not covered by protection orders.

In Kuwait, the courts were partially closed due to COVID-19. The public prosecution institute stopped investigating on complaints filed before COVID-19 and dedicated its full effort and time to investigate crimes committed during the pandemic such as spreading of rumours as well as physical abuse and cybercrime. These special measures could be considered only as temporary mechanisms to compact crimes against women migrants during the pandemic.

* *Access to justice*

The quarantine measures implemented by governments across the globe meant the closure of the courts and other related services they provide. Some countries tried to implement online hearings but were not really successful in the process. Many women migrants in most CODs are unable to report incidents of abuse, violence, and harassment due to the lack of complaint mechanisms. With the majority of courts closed, labour cases are pending, including cases filed by women migrant workers. In Kuwait, for example, courts are partially working only for criminal cases and nothing for migrant workers. Organizations facilitating money claims through arbitration processes are also unable to continue processing claims on behalf of migrants.

* *Access to healthcare*

The Philippine government provides free testing and treatment for COVID-19 for all migrant workers returnees. All returnees are required to be tested and if found positive, they are brought to COVID-19 treatment centres run by the government.

Domestic workers in Singapore are already vulnerable to lack of access to healthcare. Outpatient treatment costs are unsubsidized for domestic workers and are borne by the employers. HOME has regularly encountered domestic workers who have not received the required medical treatment as their employers were unwilling to pay for it. In light of COVID-19, this is especially dangerous as without prompt medical attention, domestic workers may be left untreated for the virus. Services like clinics are open but because of restrictions on physical movement, it may be tougher for women migrants to access them as they are subject to seeking permission from employers.

All Nepali government hospitals continue to provide access to healthcare for all, however, due to lockdown and mobility restrictions, it has been difficult for women to go to hospitals. It is not clear if the government provides free testing or treatment for migrant worker returnees. There have been anecdotal information as well of hospitals discriminating migrant returnees, refusing consultation and treatment for those who have a fever.

For Bangladesh, the increasing number of COVID-19 cases has made it more challenging to access health services. There is also no clear directive for testing or treatment of migrant worker returnees.

In Egypt, women migrant workers are still able to access healthcare with a few CSOs providing free medical assistance for some migrants.

In Jordan, no one is allowed to leave the house, unless it is an emergency case. Private medical clinics are closed and the only way to go to the hospital is by calling the civil defense. Most migrant workers in Jordan do not have medical insurance and the undocumented ones avoid public health services. Fortunately, COVID-19 testing is free of charge in public hospitals. Five migrant workers were tested positive and were quarantined in public hospitals. They are two Filipinas, two Sri Lankans, and one Ugandan.

The travel restrictions imposed in Australia due to COVID-19 have significantly impacted the access to doctors as well as hospitals. Telephone and virtual platforms such as Skype, Zoom, and Webex have been adopted during the pandemic.

* *Repatriation support*

The Philippine government covers the airfare of stranded OFWs, provides quarantine facilities, testing, and treatment for those who are found positive. The programmes before COVID-19 are still available, including the USD200 financial assistance for OFWs who have lost their jobs. There is also the Department of Labour and Employment (DOLE-AKAP) one time financial assistance of USD200 for terminated and no work no pay OFWs, available for both men and women. The Department of Social Welfare's (DSWD) reintegration programme for trafficked women is sustained though there may be a delay because of the ongoing pandemic response. The OWWA administrator said in a media interview that there will be a second wave of socio-economic stimulus package which is being discussed and to be charged to OWWA funds.

In Nepal, there is currently no reintegration programme available for women migrant workers. It is also unclear if the government will support the testing and treatment for migrant worker returnees.

In Bangladesh, the MoEWOE is arranging for the isolation of returnees at the airport. After the 14-day quarantine, each returnee is provided with BDT5,000 as transportation alllowance for reaching home. The families of migrant workers who died of COVID-19 are being given BDT300,000 each. The government also plans to extend loans for migrant returnees to enable them to pursue viable income activities, particularly in the agriculture sector. The loans, to be arranged by the MoEWOE, will be up to BDT500,000-700,000. However, there is no separate programme that targets migrant women who have experienced violence. For the civil society, the Migrants Support Centre of RMMRU is identifying VAW cases and supports them in this regard.

In Lebanon, the government has started the repatriation of migrant workers and promised to expedite the process by reducing the penalty for overstaying of undocumented migrants to a flat fee of LBP300,000, regardless of the number of years overstayed, instead of LBP300,000 every year spent in the country without papers. Expediting the repatriation process even for undocumented workers in Lebanon is to be acknowledged, however, the cost of repatriation remains to be a problem that cannot be addressed by most embassies due to lack of resources.

***Good practices and ways forward on preventing and eliminating violence against women migrants considering current challenges***

For Nepal, the following good practices were documented:

* The National Women Commission has established a call centre for responding to cases of women and also for providing psychosocial counselling support to cases related to VAW, including that of women migrant workers.
* The Ministry of Labour, Employment, and Social Security (MoLESS) has opened a call centre (1141 and 16600150005) to receive cases related to migrant workers. Similarly, MoLESS has also circulated WhatsApp, Viber, and email address for reporting of issues involving migrant workers.

The Government of Bangladesh has some notable practices both in the COO and CODs which include the following:

* A monitoring committee has been formed in coordination with other stakeholders and is led by an Additional Secretary (mission and welfare) as a focal point for COVID-19 related activities. Leaflets circulated by the government in February 2020 have been widely shared by the Bangladesh Association of International Recruiting Agencies (BAIRA) and other NGOs. The Labour Welfare Wing, Technical Training Centre (TTC), Institute of Marine Technology (IMT), and support centres have been instructed to raise public awareness on COVID-19. Development agencies have been requested to provide relevant cooperation to tackle the COVID-19 crisis.
* Hotline numbers have been activated for Bangladeshi migrants residing in Thailand and Cambodia. Hotline numbers for the respective countries are: + 66-952-72-03-14 and + 66-946-63-20-27. • The Bangladesh High Commission in Singapore has issued a notification for Bangladeshi migrant workers to contact a dedicated hotline at +65 87397610 and emailcovid19help.bdhc@gmail.com. Through the phone number or email, migrant workers in Singapore can seek any help. • The Embassy of Bangladesh in Rome and the Consulate General in Milan have released dedicated numbers for Bangladeshi citizens, respectively: +393337441690/+393894756902 and +393298824305/+393202244829.
* On 17 April, Kuwait's government has declared special amnesty programme for undocumented migrant workers. As a result, more than 4,300 undocumented Bangladeshi migrant workers have applied for the amnesty and are waiting to be repatriated from Kuwait. There are also 40,000 Bangladeshi migrant workers who have the chance to legalize their status.
* In view of the situation emerging from COVID-19, the King of Bahrain has declared that all migrant workers who have become irregular there are regularized. Ambassador Md Nazrul Islam said that due to COVID-19, the Bahrain government has also exempted all foreign workers from paying any sort of taxes until June next year. The workers will have to apply before 31 December 2020.

The main good practice by the Government of Egypt is the hotline by the National Council for Women (NCW) for victims of sexual and gender-based violence (SGBV) along with the use of social media to increase awareness around this hotline. While the initiative is good, little is known about its efficiency and effectiveness. Aside from that, there have been no other good practices to address SGBV among women migrants. One good practice by the Care International is an initiative called Family Camp, administered via Zoom application, which offers awareness sessions on different topics to families and not only women. Good practices towards the migrant communities in Egypt are quite limited in the context of COVID-19.

The amnesty programme that Kuwait has launched allows migrant workers to return to their countries, regardless of their legal status. Kuwait also pays for their air tickets as well as shelter, healthcare, and food while they are waiting for their flights home.

Aside from good practices, CSOs from Bangladesh, Jordan, Kuwait, Lebanon, and Philippines provided recommendations and ways forward for preventing and eliminating violence against women migrants:

* Securing safety and protection, especially against GBV and other types of harassment, and extension of assistance to women migrant workers by constantly reminding and prompting duty bearers, embassies, consulates, and labour offices of their responsibilities to protect and assist women migrants and migrants in general.
* Amending the Kafala system and other systematic mechanisms that aggravate the risks of exploitation and violence against women migrant workers.
* Conducting awareness raising programmes among women migrant workers regarding visa regulations and on how to respond to instances of facing a violation/s.
* Strengthening cooperation between CSOs and trade unions (TUs) and seizing opportunities to work together to effectively address COVID-19 challenges. CSOs and TUs should also reinforce their commitment to forwarding the ratification of the International Labour Organization (ILO) Conventions No. 190 and No. 189 as well as strive to direct and impact the political will to address women's vulnerability and to protect their rights. CSOs and TUs should monitor violations and pressure the governments to take necessary interventions, cooperate and strengthen referral and support systems for migrant workers.
* Making justice accessible to women migrant workers through special procedures by any legal methods to enable courts and judiciary systems serve justice amid the COVID-19 pandemic.