



Impact of the COVID-19 pandemic on labor market mobility and fiscal-budgetary measures

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Abstract

Migration and spatial mobility of people have over time played a key role in the spread of epidemics, as travel from one region to another has facilitated the transmission of diseases. The COVID-19 pandemic has affected the lives of the population, but the most affected category of the population remains migrants, as this category represents staff, who are at the forefront of the sanitary crisis COVID-19. This paper aims to identify the impact of the pandemic on labor market mobility and fiscal-budgetary measures taken by European states in this context. The approach of this paper focuses on presenting and detailing the implications of the pandemic from a demographic and economic point of view. The database used to carry out this work is represented by statistical data taken from the websites of national and European institutions. Compared to the way of presenting the information from the bibliographic references mentioned at the end of the research, this paper found only the essential aspects and particularities of the chosen research topic, which contributes to creating an overview of this topic.

Keywords: pandemic, migrants, health crisis, measures, evolution.

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1. Introduction

The global crisis generated by the COVID-19 pandemic has left deep imprints on all sectors of society, having a major impact from an economic-financial, social, health, but also a migration point of view (Ronchi, 2021). At the time of the World Health Organization's declaration of a pandemic on 11 March 2020, the COVID-19 pandemic was equivalent in the current context to the onset of a much more complex and extensive global crisis compared to any other similar events, which had been recorded in the last hundred years have generally had a low demographic and geographical impact, affecting only a few countries globally and at the same time involving an insignificant percentage of the population relative to the global share (Quality of Life Research Institute, 2020).

According to the literature, a similar situation was encountered during the "Spanish flu" during the years 1918-1920, which affected almost a third of the global population, namely, about 500 million people, causing about 50 million deaths, this action being recorded in three recurring phases. Taking into account the above information, it can be stated that in the context of repeating the pattern that was recorded in the first part of the twentieth century, the COVID-19 pandemic could have a much longer duration and intensity higher than the predictions made by the governments of the world's states, and in this sense, it would present recurrences in the next 24 months (World Health Organization, 2020).

To reduce the negative impact of the current pandemic and its rapid spread, the government of each state at the global level has developed and implemented immediate and unprecedented actions, which consist of measures of social distancing, reduction or stagnation of financial activity, and economic conditions, as well as the travel ban. This measure was first applied in China, as it was the starting point of the pandemic, and was gradually instituted in other countries in close accordance with the evolution of the new virus on their territory. An example is the official data presented by the International Organization for Migration, abbreviated IOM, on 8 June 2020, according to which, at the level of 220 states affected by the COVID-19 pandemic, 65,692 travel restrictions were established and issued, and about 10% of all of them were due to increased restrictions on medical requirements. Another important aspect regarding the context of the COVID-19 pandemic is the fact that "the risk of infection was twice as high among migrants compared to the local population", according to the Organization for Economic Cooperation and Development.

1.1. Literature review

The emergence of epidemic diseases is closely in line with the outbreak of the agricultural revolution when bacteria and viruses were transmitted from domestic animals to humans, a process facilitated mainly by the creation of sedentary communities, whose density has increased with the improvement and evolution of agricultural technologies, (Diamond, 1998). An example can be represented by measles, which appeared after the domestication of dogs, while smallpox was transmitted from cattle to humans (Dobson & Carper, 1996). Thus, technological progress has brought with it the disadvantage of transmitting the virus and pathogens much faster, this aspect being accelerated simultaneously with the increase in the density of human settlements and the connections that are made between them.

Historical demography has highlighted over time successive waves of epidemics that have marked the global population, starting with Antiquity, continuing to the Middle Ages, and reaching the contemporary period, during which time the epidemics occurred either in periods shorter or for longer periods in close correlation with collective immunization or the development of a vaccine that reduces the negative effects of the disease, (Dobson & Carper, 1996; Hays, 2005). An example can be the plague, which left deep imprints on Europe from the second half of the fourteenth century until the end of the nineteenth century, while the flu was for the first time in human history reported in Europe, later in Japan in 1556, the mortality rate at that time was about 20% (Dobson & Carper, 1996). However, one of the strongest flus that has left a deep imprint on humanity is the Spanish flu from 1918- 1920, which led to 20 million deaths (McNeil, 1976). In the context of the analyzes performed on the pandemics registered in the last century, one can observe the patterns of individuals as a

reaction to the virus, from where public policymakers can be inspired to substantiate the measures aimed at the impact on the population's health.

Table 1

Pandemics reported in the last 120 years and deaths recorded at that time

Name	Period	Number of deaths (approximately)
Russian flu	1889	250,000 at the European level, 1 million globally
Spanish flu	1918-1920	40-50 million
Asian flu	1957-1958	1-4 million
Hong Kong flu	1968-1970	500,000-4 million
Swine flu	2009-2010	up to 575,000
COVID-19	2020-	4.772.049

Undoubtedly, the progress of medicine and pharmaceutical science has been intricately linked to the health protection of the population. However, the impact of globalization in all economic spheres, and in particular in how viruses adapt to treatments developed in various emerging countries, highlights the importance of international cooperation in identifying and developing the most effective and rapid means of prevention, treatment, and tackling. Furthermore, over time, companies have implemented a number of protection mechanisms concerning the spread of contagious diseases by quarantining sick or suspected patients, as well as travelers arriving from countries with a high epidemiological risk, (MacPherson et al., 2007). The pandemic caused by COVID-19 has registered and continues to be one of the worst epidemics, which has led during the 2 years since the outbreak to the existence of major risks to humanity. Diseases belonging to this virus were reported in December 2019, in China, the place where it was formed, and 72 days later, the World Health Organization characterized this context in the category of pandemics, is known that at that time there were more than 118,000 cases in 114 states with 4,291 global deaths, (WHO, 2020). Furthermore, due to the relatively long incubation period, namely, 2 to 14 days, and the fact that a large part of the population, although infected, remain asymptomatic, they are still considered vectors of transmission of the infection, but also in the conditions in which the free movement of people between the states at the global level led to the elimination of the epidemiological triage at the moment of crossing the border, the virus, unfortunately, continued to spread both directly and indirectly.

At the time of the COVID-19 pandemic, the global state had relaxed in terms of the transmission of contagious diseases, and this favored the transmission and spread of the virus at an extremely high speed. As a result of the spread of the pandemic, the virus did not discriminate against the social context of any individual, but the state-specific governance systems led to this action (Yancy, 2020; Koh and Goh, 2020). Both in Romania and other countries globally, there has been a fairly obvious interest in occupational health and safety, this aspect being closely related to jobs that involve higher exposure rates, and for these reasons, they include Asians, minorities, people of color, and migrants, (Windsor-Shellard & Butt, 2020; Hattenstone, 2020; Neef, 2020; Foley & Piper, 2021). Additionally, migrants have been in the current context the most affected category at the level of society, both in terms of measures and restrictions applied, they remain unemployed, and because they have become determinants of the degree of exposure concerning the disease, (Purkayastha et al., 2021).

1.2. Purpose of study

The motivation for the development of the migration concept in this article is the topicality of the subject and its global importance, taking into account that migrants have been particularly affected by the adverse effects propagated by the COVID-19 crisis. For these reasons, the migration phenomenon registered an upward trend, this aspect is considered a negative one for both parties. According to data presented by the OECD (2020), migrants make up about 24% of all doctors and 16% of care staff, who are at the forefront of the fight against coronavirus. The negative effects were also felt by them because some of them came in direct contact with infected people, and another part due to poor living conditions and extremely crowded spaces became infected with this virus. Through this paper, we

want to identify the impact of the health crisis generated by the COVID-19 pandemic on labor market mobility, but also the fiscal-budgetary measures implemented by European states in this context.

2. Materials and Methods

This paper is based on a mixed research methodology, as it includes, on the one hand, a method of descriptive analysis aimed at introducing the current state of knowledge, as well as a dynamic macroeconomic analysis to identify the impact of the COVID-19 crisis on the labor market and the territorial mobility of citizens. Moreover, the approach of this paper focuses in particular on highlighting the implications that the pandemic has brought from an economic, demographic, and social point of view, but also on the entire package of fiscal-budgetary measures adopted by European states to combat the spread of the virus and reducing the negative effects on the economy and population. Given that the COVID-19 pandemic is currently in full swing and data on its evolution are limited, it is quite difficult to carry out an analysis of the medium or long-term impact, which is a limitation of the research on this issue.

2.1. Data collection

For the data sources used, they come from both national institutions and European institutions, such as the Ministry of Health, the Ministry of Internal Affairs, the National Institute of Public Health, the National Institute of Statistics, the European Commission, and the World Bank. Finally, simultaneously with the analysis of the literature, the starting point of this research is represented by the effect transmitted by other epidemics triggered over the years in terms of population size, dynamics, and structure.

2.2. Analysis

Data sources from the aforementioned institutions are exported from official databases, processed, and arranged in the form of graphical representations, through the Microsoft Excel software program, which allows data visualization and analysis.

This paper also has limitations, especially in terms of the availability of data sources. Specifically, for the data set on the evolution of immigrants and emigrants by total sex and broken down by females and males, the data for 2020 were not published on the Eurostat website, nor on the website of other institutions at the level of European. Thus, the analysis of the evolution of these macroeconomic indicators was performed only until 2019.

3. Results

3.1. Fiscal-budgetary measures adopted by European states in the context of the COVID-19 crisis

The latest studies show that the COVID-19 pandemic contributes significantly to the emergence and development of a severe economic recession. In this context, the first effects that can be observed are related to the companies that started to encounter various difficulties in terms of contract execution, and for these reasons, some had to send their employees into technical unemployment, while other companies were forced to close their business.

To reduce and combat the negative effects generated by the Covid-19 pandemic, global states, including Romania, have had to adopt a series of unprecedented fiscal-budgetary measures through which to support the population, but also companies in terms of concern about the continuity of activity at the level of the labor market. In the present analysis, several European states will be brought to the fore, with the mention that each of them implements other measures, some of the measures are already announced and published, and others are still being worked on from the perspective of clarification and regulations (World Bank Group, 2021).

Austria is one of the countries considered in this analysis, announcing the implementation of a state aid scheme, through which 4 billion euros will be provided to companies that have reduced their revenues as a result of the effects of the COVID-19 crisis. At the same time, the Austrian authorities

emphasized the importance of implementing a financing scheme for companies with operations in Austria. Additionally, the measure of the possibility of reducing the working hours to 10% of the total working time was implemented, more precisely up to 90% during the 3 months. Another measure relates to the fact that the employee can continue the remuneration, amounting to 80 to 90% of the total previous net remuneration, more precisely the net compensation rate, which must be paid by the employer. However, the employer must bear only the costs allocated to the hours worked during short-term work. For example, if the employee works only 10%, the employer will bear costs amounting to 10% of the total net compensation rate. Specifically, the amount represents the difference between the payment for hours worked and the net compensation rate, which will then be compensated by the National Labor Agency, abbreviated AMS. In other words, there is sustainable financial support from AMS, which supports the employer to continue to maintain the employment contracts of employees.

Another state that has taken considerable steps to recover the situation in the economy amid the spread of the COVID-19 crisis in Finland, more specifically, taxpayers have the opportunity to request an extension to file income tax returns or in certain circumstances, they can request certain payment arrangements for the related taxes. Analogous to the measures implemented at the level of the other states, where no sanctions will be levied regarding the late submission of VAT returns. Another particularly important measure adopted by Finland is to reduce the social contribution at the employer level by around 2.6%, a measure which was implemented on 1 June 2020.

France, in turn, focused on deferrals from the payment of taxes and social security contributions, as well as tax credits for the companies concerned, a measure which resulted in a further reduction in taxes for companies in difficulty. In the same vein, France has been involved in providing significant sums of money to support small and medium-sized enterprises and has also announced its intention to provide payments for employees who cannot work from home.

Germany intends to provide loans of up to EUR 1 billion, which can be accessed for more than 5 years or even less than 5 years, depending on the context of each company, the maximum loan amount being equivalent to 25% of the total revenues recorded in 2019 or even twice the costs allocated to staff, taking into account the financing needs for 18 months for small and medium-sized enterprises and 12 months for large companies. From the point of view of employees, the German state offers financing of up to 67% of the total net salary, being also imposed ceilings for employees with high salaries.

Italy is one of the European countries most affected by the COVID-19 pandemic, which authorizes a moratorium on mortgages. At the same time, the Italian authorities assist with the payment of services and subsequently adopted the postponement of all utility-specific payments, such as gas, water, and electricity until 30 April 2020. Moreover, the interest on small and medium-sized enterprises is reduced for 12 months and consideration is given to postponing the payment of taxes.

Taking into account the case of the Netherlands, it can be mentioned that it is proposed to postpone the payment of taxes without charging penalties for nonpayment in the next period. For companies that have been severely affected by the negative effects of the pandemic, those that have seen a drop in turnover of more than 20 percentage points, they will be offered funds covering almost 90% of the amount allocated to employees' salaries, this measure being closely related to the decrease in turnover. At the same time, this state aid is mainly available for 3 months, the option being to be able to extend it for another 3 months later.

Another country that has taken important steps in the context of the existence and development of the COVID-19 pandemic is Portugal. It has introduced a € 3 billion credit line for companies that have been hit hard by the COVID-19 crisis, and in this situation, a company can benefit from up to € 1.5 million. Another measure through which Portugal has differentiated at the European level is related to companies that do not lay off their employees, which can automatically trigger a simplified dismissal,

more precisely employees will receive about 2/3 of the total salary, and 70% will be paid by the state, and the remaining 30% by the company.

Spain considered introducing a stimulus plan with a budget of 18.23 billion euros and subsequently supplemented the budgets of local governments with 1 billion euros and social services, amounting to 25 billion euros. Regarding the tourism field, the Spanish government has allocated a budget of 400 million euros.

Norway, one of the countries belonging to the European Economic Area, has introduced a measure aimed at profit tax, more precisely companies that recorded significant losses in 2020 due to the pandemic can compensate them with the profits obtained in 2019 and 2018. Moreover, the postponed date on which the payment of the second installment of the income tax is made, from 15 April 2020 to 1 September 2020, as well as the payment of the social security contribution belonging to the employers, from 15 May to on 15 August 2020. As regards the other fiscal budgetary measures taken into account by the Norwegian State, those relating to VAT, on the one hand, the temporary reduction of the VAT rate for passenger transport, museums, and accommodation, to 12% to 8%, and on the other hand, the postponement of the date for the payment of VAT from 14 April 2020 was applied. In addition, a scheme was introduced in the state that targets new financial bank loans for small and medium-sized enterprises that have suffered significant losses as a result of the COVID-19 pandemic.

Regarding Romania, similar to the other states considered in this analysis, the authorities have developed and implemented a series of sustainable measures from a fiscal-budgetary point of view, among which are:

- bonus related to the advance payment of the profit tax/income tax of microenterprises;
- postponement of payment of specific customs duties for importers of test kits, medicines, and protective equipment against the COVID-19 virus;
- non-calculation of penalties or interest on arrears on fiscal obligations due after the date of entry into force of GEO 29 / 21.03.2020, unpaid until the expiration of a period of 30 days from the date of conclusion of the state of emergency, more precisely 16 May 2020;
- the postponement from March 31 to June 30, 2020, of the payment term for the building tax, the land tax, respectively, the tax on means of transport, as well as the deadline for granting the bonus for the advance payment;
- the indemnities related to technical unemployment were settled from the total unemployment insurance budget, within the limit of 75% of the total average gross earnings, 5,429 lei for employers who diminish or temporarily interrupt the activity totally or partially during the state of emergency;
- aid to small and medium-sized enterprises, which comes in the form of deferred payments for utility services such as electricity, natural gas, water, telephone and internet services, rent payments, and state guarantees for loans and other grants;
- days off offered to parents for the supervision of children, in case of the temporary closure of schools, for all working days during the state of emergency with an allowance of 75% of gross monthly salary, but not more than 75% of the average salary gross monthly at the national level.

Additionally, the measures implemented in response to the pandemic have led to the limitation or even stagnation of economic activity in some sectors, while disrupting other sectors. As can be seen from the previous examples, most of the measures implemented were discretionary fiscal measures which consisted of deferrals, immediate fiscal momentum, but also liquidity guarantees, and other provisions. In other words, bankruptcy along with job losses can create economic tensions that will make it even more difficult for European and other global countries.

Finally, given the measures implemented by the European authorities in the context of reducing and combating the negative effects of the Covid-19 pandemic, European states have made an unprecedented financial effort, which was also supported by the activation of the general derogation clause in the budget. The Stability and Growth Pact by the European Commission is part of the strategy for a rapid, firm, and coordinated response to the Covid-19 crisis. Thus, all these measures taken by European states have deepened economic imbalances and jeopardized the process of recovery and avoided an even stronger crisis compared to that recorded in 2008.

At the same time, failure to identify a treatment to combat the new virus will lead to amplifying the economic and social problems that will have a strong impact on the economy at the level of the European states, but also on the economy at the global level. In this context, to identify the impact of the measures implemented by European countries, the following tables on public debt and budget deficit by quarters have been prepared, as the impact of the measures can be observed according to the evolution of the health crisis and the impact on population and economy. Regarding the table on the evolution of the budget deficit/surplus, for the states of Greece, Croatia, Italy, and Cyprus, the cells are incomplete, as no data were available on the Eurostat website. Additionally, as can be seen from the tables below, the Covid-19 pandemic has put much more pressure on some European countries, due to the economic specificity of these states, existing imbalances, and the ability of the authorities to cope with the new economic context.

Table 2
Evolution of public debt - quarterly data

	2019- Q1	2019- Q2	2019- Q3	2019- Q4	2020- Q1	2020- Q2	2020- Q3	2020- Q4	2021- Q1
European Union	79,8	79,6	79,1	77,5	79,2	87,5	89,6	90,5	92,9
Belgium	102,8	102,0	101,6	98,1	103,4	114,0	113,1	114,1	118,6
Bulgaria	20,9	20,3	20,5	20,2	20,1	21,3	25,3	25,0	25,1
Czechia	33,4	32,5	31,3	30,0	32,4	39,6	38,1	37,8	44,1
Denmark	33,4	34,8	34,3	33,6	33,2	41,2	41,9	42,1	40,7
Germany	61,6	61,1	61,0	59,7	60,9	67,3	70,0	69,7	71,1
Estonia	7,8	9,1	9,0	8,4	8,9	18,5	18,5	18,2	18,5
Ireland	64,6	63,0	61,2	57,2	58,8	62,1	61,2	58,4	60,5
Greece	187,3	185,0	182,6	180,5	180,7	191,3	199,8	205,6	209,3
Spain	98,4	98,4	97,5	95,5	99,1	110,2	114,0	119,9	125,2
France	98,9	98,7	99,5	97,6	100,8	113,1	115,6	115,1	118,0
Croatia	74,2	75,4	74,4	72,8	73,7	84,5	86,1	88,7	91,3
Italy	136,0	137,4	136,7	134,6	137,8	149,4	154,4	155,8	160,0
Cyprus	101,7	105,6	96,6	94,0	96,2	113,2	119,5	119,1	125,7
Latvia	38,5	37,5	37,2	37,0	37,1	43,0	44,7	43,5	45,7
Lithuania	33,6	35,7	35,4	35,9	33,0	41,3	45,9	47,1	45,6
Luxembourg	20,7	20,3	20,1	22,0	22,2	23,9	26,0	24,8	28,1
Hungary	68,4	67,2	67,2	65,5	65,8	70,3	73,9	80,4	81,0
Malta	45,3	44,6	42,3	42,0	43,3	50,1	52,8	54,8	59,0
Netherlands	50,8	50,8	49,2	48,5	49,3	55,0	55,1	54,3	54,9
Austria	72,9	71,9	71,1	70,5	73,1	82,2	78,6	83,5	87,4
Poland	48,9	47,7	46,9	45,6	47,5	54,6	56,5	57,5	59,1
Portugal	122,8	120,0	119,3	116,8	119,2	125,7	130,5	133,6	137,2
Romania	33,8	33,8	35,2	35,3	37,4	40,7	43,1	47,3	47,6
Slovenia	67,8	67,4	67,7	65,6	68,9	78,2	78,4	80,8	86,0
Slovakia	49,6	48,9	48,7	48,2	49,5	59,9	60,2	60,3	60,3
Finland	59,6	61,7	60,3	59,5	64,4	68,9	67,2	69,5	70,3

Sweden	36,6	35,7	35,1	34,9	35,7	37,1	38,3	39,7	40,3
Norway	36,1	35,4	35,2	40,2	41,3	41,0	40,9	45,9	43,0

Table 3
Evolution of the budget deficit/surplus - quarterly data

	2019- Q1	2019- Q2	2019- Q3	2019- Q4	2020- Q1	2020- Q2	2020- Q3	2020- Q4	2021- Q1
European Union	-0,3	-0,3	-0,8	-0,9	-2,9	-11,8	-6,1	-7,5	-6,8
Belgium	-1,9	-2,0	-1,6	-2,0	-7,1	-15,1	-6,6	-9,5	-6,0
Bulgaria	2,3	1,3	1,4	3,7	0,4	-5,1	-2,4	-2,4	-4,5
Czechia	1,3	1,5	-0,4	-1,1	-2,7	-7,6	-6,1	-8,1	-8,8
Denmark	5,8	5,2	2,9	2,9	0,5	-2,7	1,6	-2,7	0,3
Germany	2,1	1,7	1,2	1,1	0,4	-9,1	-5,2	-4,4	-6,0
Estonia	0,0	0,4	-0,6	0,0	-3,8	-8,6	-2,6	-4,6	-3,4
Ireland	-0,5	0,5	0,3	0,6	-2,1	-7,5	-5,4	-5,4	-5,0
Greece									
Spain	-2,2	-2,9	-3,1	-3,1	-5,6	-19,6	-8,3	-11,9	-8,2
France	-2,7	-2,6	-2,9	-4,1	-6,0	-14,5	-6,1	-10,9	-9,3
Croatia									
Italy									
Cyprus									
Latvia	-1,3	-1,4	0,1	-0,3	-1,6	-5,4	-6,0	-5,6	-8,6
Lithuania	1,2	1,0	-0,5	0,5	-3,1	-7,2	-8,6	-11,5	-5,8
Luxembourg	5,2	3,1	1,4	0,3	-0,6	-10,7	-1,3	-3,9	3,0
Hungary	-1,7	-0,4	-3,9	-2,3	-3,6	-9,3	-5,2	-14,4	-8,5
Malta	1,1	0,6	-0,3	-0,5	-9,7	-11,4	-9,7	-9,9	-9,8
Netherlands	2,1	1,8	1,3	1,9	0,2	-9,4	-3,2	-4,5	-6,4
Austria	-0,1	0,7	0,5	1,2	0,0	-13,9	-7,0	-14,4	-7,7
Poland	0,6	-1,5	-1,2	-1,0	-3,7	-17,6	-4,6	-2,4	-2,6
Portugal	0,6	-0,6	0,3	0,0	-0,5	-8,7	-8,7	-5,1	-5,3
Romania	-4,4	-3,9	-6,1	-3,5	-7,5	-10,3	-9,2	-10,0	-8,3
Slovenia	0,4	0,7	0,3	0,3	-5,8	-14,6	-4,4	-9,3	-7,5
Slovakia	-0,8	-1,4	-1,7	-1,3	-3,4	-7,8	-6,1	-7,0	-6,3
Finland	-1,2	-1,2	-1,7	0,4	-1,8	-9,1	-6,0	-5,1	-5,2
Sweden	-0,3	1,7	-0,2	0,6	-0,4	-5,6	-2,6	-3,1	-1,9
Switzerland	1,4	1,4	1,4	1,5	-1,0	-1,9	-1,8	-1,3	-3,7

3.2. Effects of the measures implemented to reduce and combat the spread of COVID-19 on labor mobility and migration

Consistent with economic research conducted at the European level, the measures developed and implemented in the Member States of the European Union to reduce the negative effects of the pandemic on the health of the population have been tantamount to imposing significant challenges in terms of labor mobility to the European Union, and implicitly, to the European labor market, which brings with it interdependent effects on the global economy. In the same vein, it can be stated that the majority of persons who carry out activities in the territories of the Member States of the European Union, but who are not citizens of them, are directly affected by the effects of measures adopted at the state level, regardless of the type of worker cross-border, seconded or seasonal. An eloquent

example is a situation of Poles in Zgorzelec, who before the pandemic broke out in March 2020, were moving to Görlitz or other German cities near the border to perform work and be paid accordingly. In the context of the application of mobility restrictions, the jobs of Poles were placed under uncertainty, and in these conditions, they organized various protests to have the opportunity to return to work (Andriescu, 2020). Another example of long-term affected workers is that of Romanians working on the territory of the other Member States of the European Union.

At the end of March 2020, at the time of the application of measures to combat the spread of the COVID-19 pandemic, more than 200,000 Romanian workers were forced to return to Romania from countries that were much more affected by the pandemic, such as Italy, Spain, and the main causes of their return include poor working conditions, limitations on health insurance and social security conditions and reduced incomes. According to a technical report on the correlation between labor markets and restrictive measures taken to reduce the spread of the virus, the negative impact of the pandemic has been particularly targeted at the most vulnerable sectors of the economy and for these reasons, on the one hand, it affects employees with very low incomes and poor working conditions, and on the other hand, these women and young employees are the categories that face unemployment quite hard. At the same time, in the case of the unemployed, the negative effects will be intensely felt in the medium and short term, because they must be oriented towards a job, but the current economic context is characterized by substantially reduced economic activity and lack of jobs providing the satisfaction of the daily needs of workers (Fana et al., 2020).

Taking into account the areas of activity that have been affected by the measures adopted at the governmental level, the idea can be stated that the areas considered fundamental, such as the medical sector, food production, utilities, and which have a European labor market with a share of 25%, operated normally during the pandemic. Other areas that have managed to operate in real-time and follow their programs but have had to adopt telework work are institutions belonging to public administration, education, telecommunications, insurance, and finance. The share of these areas of activity accounts for about a quarter of all European workers. In the light of the above, it can be stated that these two categories of sectors have managed to manage their work in optimal conditions even during the restrictions and have adapted either to the risky context to which they were exposed or to the telework regime.

However, economically, not only are the areas specified above, but there were also sectors in which employees did not work normally or in telework, and for these reasons, the workforce program has decreased considerably. These areas of activity include retail trade or the manufacture of chemicals, covering about 20 percentage points of the total union labor market. The fourth category of activity sectors is the one that failed to operate in telework conditions, more precisely the types of products that were not previously stated repair, respectively, construction of machines, computers, and these fields are forced to adapt to drastic conditions, either to decrease their activity significantly during the pandemic, or the industries had to be closed during the restrictions. The share of activities that are included in this sector varies from one state to another depending on the economy of that country and the level of production they record, the highest being found in Italy and Germany.

In terms of the most affected areas of activity in the European Union and beyond, we find the hotel sector, restaurants, cafes, travel, and real estate agencies, as well as recreational and leisure services, to have ceased to operate in all Member States of the European Union, mainly at the time of the first wave of the pandemic, when austerity measures were adopted. From a statistical point of view, the number of people working in these fields of activity is less than 10% compared to the labor market in the European Union, but this indicator varies from country to country. For example, in Greece, Ireland, and Spain the proportion of this indicator is 13%, while in Romania and Bulgaria, the value is less than 8%. Over time, travel restrictions have been much lighter, but the tourism sector has continued to be affected due to low consumer demand.

Consistent with the current statistics provided by the European Commission and the World Bank and correlating them with the European economic context, it can be said that the effects of the COVID-19 pandemic crisis have been felt by most workers in the European Union, regardless of their nationality they when they have it, but it is important to emphasize that the most affected are cross-border workers, posted, seasonal, but also people who before the onset of this crisis faced modest jobs. This reminds us that the actions of these people are particularly important for the functioning of the economies of the host states, as they are involved in healthcare, medical infrastructure, transport, agriculture, and the supply of goods. Admitting the above information, the example of the agricultural sector can be brought to the fore, following the temporary closure of borders and the introduction of travel bans in the European Union, the many Member States have faced the inability to ensure the necessary foreign workers for agricultural activities.

An important aspect to be highlighted is the fact that the lack of labor in the agricultural sector is a threat to the European food supply chain, in the situation where thousands of seasonal workers in this sector of activity have found themselves unable to work and he went to the farms where they carried out their daily work. Taking into account the other fields of activity, the first line of the sectors on which the COVID-19 pandemic has left deep imprints in the medical and personal care sector. In 2018, more than 1 million Europeans were employed in these fields, and the most important aspect in this regard is the fact that many of them did not have the citizenship of the state in which they worked. An example can be Germany, where more than 300,000 people come from Eastern Europe, and before the COVID-19 pandemic broke out, they worked in the home care sector. In the same situation in Austria, where more than 100,000 Europeans have worked in care centers and asylums, most of them being citizens of the Romanian, Hungarian, and finally, Slovakia. Given the above, a number of 3 million Italians require medium and long-term health care (Andriescu, 2020). Furthermore, even before the outbreak of the pandemic, there was a shortage of labor in the previously stated sectors, but with the current crisis, the medical and care field has become essential sectors in the fight against coronavirus, also in the process of guaranteeing the functioning of the food chain.

Given the current epidemiological context, it is necessary to develop and implement a coordinated approach, through which workers in key sectors can cross internal borders to reach jobs outside the borders of the state of citizenship. For these reasons, on 30 March 2020, the European Executive considered the publication of a communication entitled "Guidelines on the free movement of workers during the COVID-19 epidemic". The main objective of this communication was to maintain the integrity of the internal market while ensuring the protection of public health. According to the provisions of the Guidelines, Member States must allow employees in the medical and food sector, but also those belonging to other key areas, such as childcare, and the elderly to ensure the continuity of professional activity and the optimal management of the effects propagated by the COVID-19 pandemic, (European Commission, 2020). Furthermore, through this communiqué, the aim was to implement at the state borders an efficient system that would allow the free movement of the personnel of the critical sectors in a fast way and in a short time as possible, without carrying out additional administrative procedures.

An important aspect to mention is the idea that the European Trade Union Confederation, abbreviated ETUC stated that the guidelines adopted by the European Commission in 2020 do not fully address the issue, because it does not solve a number of significant challenges, such as the difficulties they face welcoming posted workers in terms of access to work, safety and security conditions, social protection rules, access to relatively decent accommodation, health facilities, healthcare and finally, access to the necessary information. All these criteria have created a wave of uncertainty among migrants (ETUI, 2020). Because of this, many workers have stopped their postings due to the application of restrictions and unfortunately, they were no longer employed in those places going into unemployment. Moreover, some people continued to migrate to another state to work, but encountered challenges from the point of view of social protection, because the rules applicable to them remained those of the state of origin and not those in the state of destination.

Another problem specific to migrants as a result of the application of travel restrictions was the lack of eligibility for any measures introduced by the host state security system, such as possible allowances to shorten the time spent at work, and simplified access to social assistance services and various types of sick leave. At present, there is no forecast of the situation of migrants, but it can certainly be said that the medium and long-term COVID-19 pandemic will affect secondments in the internal market, especially in areas of activity such as construction, transport, agriculture, food industry, these being the most vulnerable from a socio-economic perspective and a medical point of view (ETUI, 2020).

3.3. Migration in the context of the current global pandemic

The COVID-19 pandemic arose and developed at a crucial and particularly important time for international migration, given that before the onset of the crisis there were recorded inflows into several states and immigrant populations expanded gradually (August, Campmas, Judges & Renda, 2020). The integration of migrants has improved from several perspectives at the level of global states. For example, the attitudes of local citizens towards immigrants were much more open and permissive, allowing them to integrate and adjust much faster. Moreover, the educational outcomes of immigrant children have improved significantly since 2005, with educational levels and outcomes much higher, both in absolute and relative terms, narrowing the gap between migrant children and children of natives. Unfortunately, this progress is marked by uncertainty due to the pandemic. It should be noted that the Covid-19 pandemic indisputably affects the health, educational level, and jobs of immigrants, who are already vulnerable, and of their children, as well as their wider social integration.

According to a study conducted by the Organization for Economic Co-operation and Development (OECD, 2018), migrants represent in the current context the most affected category of the population, and the migration phenomenon decreasing considerably, being also a negative aspect for both parties. At present, the pandemic has affected people's lives globally, but migrants remain the most affected, as their loss has mainly resulted in the loss of jobs. According to Eurostat data, migrants make up 24% of all doctors and 16% of all care staff, thus being at the forefront of the fight against Covid-19. An important aspect to mention is the fact that a significant number of migrants became infected with this virus, due to the high number of direct contacts, but also to the working conditions, which in most cases were overcrowded. Several studies, which were developed by the OECD (2020a), showed that the risk of infection is double in the case of migrants compared to the local population. At the same time, migrants are much more affected by the economic consequences of the current health crisis compared to other categories, this aspect is influenced by the fact that the largest share of jobs they occupy is in the hotel, gastronomy, tourism, these are the branches that fight for survival at the market level. An example is a fact that in the HORECA sector in the European Union, about a quarter of all employees come from third countries, more precisely twice as much as in the rest of the economic fields. Moreover, the employment contracts within this field of activity, in general, are elaborated in a very short term. Therefore, migrants are the first category to be sent on unemployment.

Given that the COVID-19 pandemic is ongoing and there are no accurate statistics, migrants are severely affected in the southern European states, Sweden, Norway, Ireland, and finally, the United States. An important aspect to mention is the closure of schools because in this situation the children of migrants have been and remain especially when the courses are conducted online. Migrants have been much more affected by this measure, because their parents do not have the necessary technical means, for example, they do not have a computer, their living spaces are smaller in size, and their lack of language skills does not allow them to help children with homework. Therefore, homeschooling affects the children of migrants from several perspectives compared to those of the locals.

The pandemic has significantly affected migration, as it has drastically reduced it in OECD countries. According to economic and statistical estimates, in the first half of 2021, the migration rate fell to half the value it normally recorded. The main factors that have contributed to this are the closure of borders, the reduction of the number of trips, as well as the cessation of air transport. At the same time, the OECD (2020b) believes that the situation will not return to normal soon, as migrants have

been severely affected, although the economy will start operating at normal capacity again. The first cause is the fact that during the pandemic, a large part of the jobs was replaced by telework, which implies much less human mobility. Moreover, the negative effects resulting from the COVID-19 pandemic were felt at the level of migrants' countries of origin. An example can be the fact that the bank transfers of people working abroad to the remaining families in the country of origin have decreased significantly.

In the context of the above, the idea can be stated that the health vulnerabilities of migrants in the context of the current pandemic may be due to:

- socio-economic status;
- carrying out activities in overcrowded or suboptimal areas;
- restrictions on the degree of eligibility or access to services, in particular, medical services;
- cultural-linguistic barriers;
- lack of adequate health insurance at the same time as insufficient financial resources.

Figure 1

The evolution of emigrants and immigrants in the period 2018-2019 in European countries

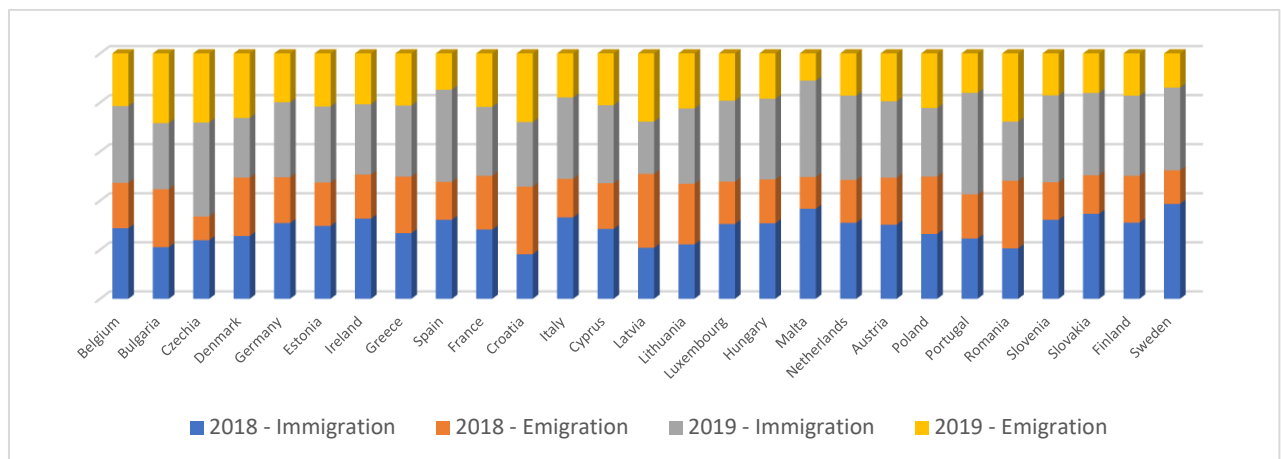


Figure 2

The evolution of female immigrants and emigrants in the period 2018-2019 in European countries

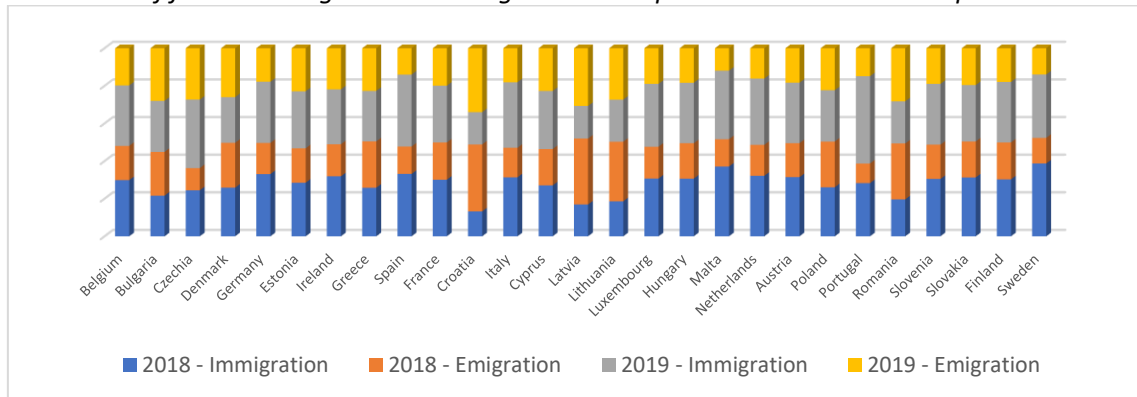
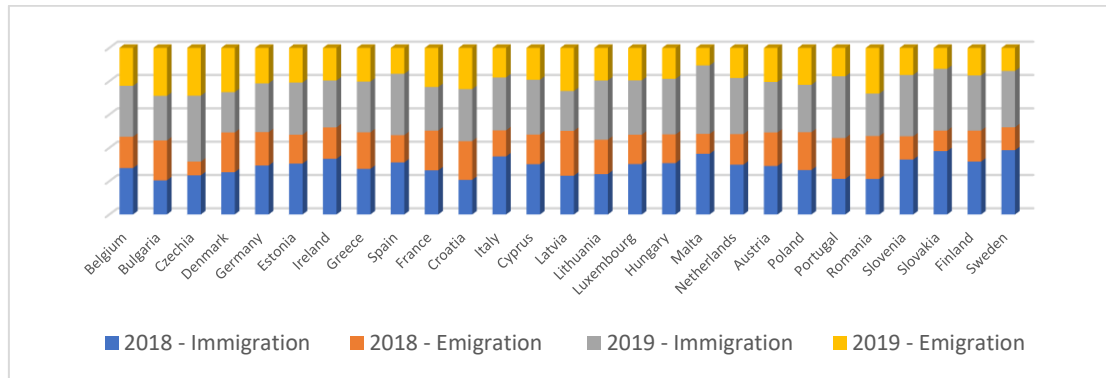


Figure 3

The evolution of male immigrants and emigrants in the period 2018-2019 in European countries



Another important aspect is that immigrants are on average younger people than the native population, therefore less likely to develop very serious forms of the disease with serious effects on health. In European OECD countries, 8% of all foreign births are over 75 years old compared to 12% of their native counterparts. However, there is a well-established fact that groups of the population with socio-economic disadvantages are more likely to have poor health conditions while suffering more from chronic diseases, which can lead to an increased risk of comorbidity in the context of current pandemics. Immigrants from the OECD Member States are overrepresented among these vulnerable groups that identify at the population level.

Another example is the idea that 30% of all immigrants currently live in relative poverty in OECD countries, compared to the number of native people which is 20%. They are also much more likely to live and work in substandard accommodation, their share being 23% compared to 19%, and two times more likely to be found in overcrowded spaces, more precisely 17 % compared to 8%. Under these conditions, poor living conditions increase the likelihood of infection, especially in the case of immigrants, because they are more likely to live in extended families. At the same time, immigrants tend to live in areas with much higher density, which makes it difficult to respect the social distance. This is often the case for certain groups living together in collective housing, such as asylum seekers. According to a study conducted at the University of Bielefeld in 2020, it was concluded that in collective housing, where refugees and immigrants live, the risk of transmitting the Covid-19 virus has increased compared to other housing, the proportion being 17 percentage points. At the same time, immigrants are one of the categories that have used excessively the means of public transport, this is a risk associated with the current pandemic context (Brun and Simon, 2020).

Moreover, immigrants do not carry out activities that can be done from home, therefore they are much more exposed to this risk. For example, immigrants make up more than half of all domestic workers in Southern Europe, Canada, and Israel. At the same time, immigrants not only have to go to work physically but also have to deal with complex and insecure situations from the perspective of COVID-19 transmission. An example is a fact that in Germany an outbreak of coronavirus in a slaughterhouse spread to more than 1,500 employees, most of whom were migrants, which triggered the local blockade. Another widespread situation among migrants today is that they have a lower inclination to take a test to identify the virus or to go to the hospital, this being influenced on the one hand by the fact that they do not have sufficient financial resources and, on the other hand, do not have very extensive coverage of social security systems, including health. Moreover, the lack of language skills does not allow them to have access to all information about the COVID-19 pandemic.

4. Conclusions

As a result of the present research, it was concluded that the COVID-19 pandemic highlighted that migrant workers play a fundamental role in fulfilling the basic functions that are found at the level of society. For example, in the European Union, 13% of all employees who have been identified in key

sectors of the economy in response to the COVID-19 pandemic are migrants. This category includes both mobile workers within the European Union and workers belonging to states outside the European Union. Studies conducted over the past two years on the propagating effects of the COVID-19 pandemic reveal that migrants are the most vulnerable category of the population, paying the highest rate of the current crisis.

In view of the interdependent effects exerted by the pandemic, such as shrinking economies, food insecurity, economic and political tensions, social unrest, and deepening divisions between population groups, there have been mass displacements at both European and global levels, including people which present the need for international protection. For these reasons, the risk of travel associated with the COVID-19 pandemic will gradually increase, although travel options are restricted. At the same time, immigrants have a high risk of infection with the SARS-VOC-2 virus due to a number of vulnerabilities, such as poor or overcrowded living conditions, high incidence of poverty, and high concentration of people in workplaces where physical distance is difficult to achieve. The negative impact felt on the labor market of migrants is increased by the fact that they are mainly found in the areas most affected by the pandemic at present. Therefore, global migration patterns will continue to be severely disrupted in the light of restrictions on territorial mobility, although they will relax over the coming period. However, it is too early to assess the most significant effects of the COVID-19 pandemic on the labor market, given that job retention systems have cushioned the rapid impact of the blockade.

Finally, the European authorities have intervened rapidly in the economy by implementing fiscal and budgetary measures to support the population and the economy to deal with the problems arising from the health crisis. The impact of these measures was positive in terms of supporting economies and population, but also negative in terms of deepening macroeconomic imbalances. In this context, the authorities must continue to support the population and economy, but also implement strategies to recover the macroeconomic gaps. This can be achieved through fiscal-budgetary policy which has a key role in the functioning of the economic and social system.

References

- Andriescu, M. (2020). Under lockdown amid COVID-19 pandemic, Europe feels the pinch from slowed intra-EU Labor mobility. *Migration Policy Institute*. <https://www.migrationpolicy.org/article/covid19-europe-feels-pinch-slowed-intra-eu-labor-mobility>
- August, A., Campmas, A., Judges, P. & Renda, A. (2020). Monitoring Covid-19 contagion growth in Europe. <https://www.ceps.eu/cepspublications/monitoring-covid-19-contagion-growth-in-europe>.
- Brun, S. & Simon, P. (2020). Ethno-racial and coronavirus inequalities. <https://www.icmigrations.cnrs.fr/wp-content/uploads/2020/06/De-Facto-19.pdf>.
- Diamond, J. (1998). Guns, germs, and steel: a short history of everybody for the last 13,000 years. *Random House*.
- Dobson, A. P. & Carper, E. R. (1996). Infectious diseases and human population history. Throughout history, the establishment of disease has been a side effect of the growth of civilization. <https://doi.org/10.2307/1312814>.
- European Commission - European Migration Network. (2020). EU and OECD Member States responses to managing residence permits and migrant unemployment during the COVID-19 pandemic. <https://ec.europa.eu/migrant-integration/librarydoc/inform-1-eu-and-oecd-member-states-responses-to-managing-residence-permits-and-migrant-unemployment-during-the-covid-19-pandemic>.
- European Trade Union Institute. (2021). Work, health, and COVID-19: a literature review. <https://www.etui.org/sites/default/files/2021-03/Work%2C%20health%20and%20Covid-19%20a%20literature%20review%202021%20WEB.pdf>.
- Fana, M., Torrejón Pérez, S., & Fernández-Macías, E. (2020). Employment impact of Covid-19 crisis: from short term effects to long terms prospects. *Journal of Industrial and Business Economics*, 47(3), 391-410. <https://link.springer.com/article/10.1007/s40812-020-00168-5>

- Matei, E. F. & Mindrican, I. M. (2022). Impact of the COVID-19 pandemic on labor market mobility and fiscal-budgetary measures. The Case of American Insurance Association in Malaysia. *Global Journal of Business, Economics, and Management: Current Issues*, 12(2), 153-167. <https://doi.org/10.18844/gjbem.v12i2.6161>
- Foley, L., & Piper, N. (2021). Returning home empty-handed: Examining how COVID-19 exacerbates the non-payment of temporary migrant workers' wages. *Global Social Policy*, 21(3), 468-489. <https://journals.sagepub.com/doi/abs/10.1177/14680181211012958>
- Hattenstone, S. (2020). The virus piggybacked on racism": Why did Covid-19 hit BAME families so hard.
- Hays, J. N. (2005). Epidemics and Pandemics: Their Impacts on Human History. <https://iucat.iu.edu/iuk/6403443>.
- Koh, D., & Goh, H. P. (2020). Occupational health responses to COVID-19: What lessons can we learn from SARS?. *Journal of occupational health*, 62(1), e12128. https://www.jstage.jst.go.jp/article/joh/62/1/62_e12128/article-char/ja/
- MacPherson, D. W. & Gushulak, B. D. (2001). Human mobility and population Health: new approaches in a globalizing world. <https://pubmed.ncbi.nlm.nih.gov/11482008/>.
- MacPherson, D., Gushlak, B. D. & MacDonald, L. (2007). Health and foreign policy: influences of migration and population mobility. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2636223/>.
- McNeill W. H. (1976). *Plagues and people*. New York: Anchor Press, Doubleday. <https://www.cambridge.org/core/journals/review-of-politics/article/abs/plagues-and-peoples-william-h-mcneill-plagues-and-peoples-garden-city-new-york-anchor-press-doubleday-1976-pp-369-1000/D956DAE0B216454675ECD4E48A55805>.
- Neef, A. (2020). Legal and social protection for migrant farmworkers: lessons from COVID-19. *Agriculture and Human Values*, 37(3), 641-642. <https://link.springer.com/article/10.1007/s10460-020-10086-w>
- OECD. (2018). Settling in 2018: Indicators of immigrant integration. https://read.oecd-ilibrary.org/social-issues-migration-health/indicators-of-immigrant-integration-2018_9789264307216-en#page1.
- OECD. (2020). Education and COVID-19: Focusing on the long-term impact of school closures. <https://www.oecd.org/coronavirus/policy-responses/education-and-covid-19-focusing-on-the-long-term-impact-of-school-closures-2cea926e/>.
- OECD. (2020). Managing international migration under Covid-19. <https://www.oecd.org/coronavirus/policy-responses/managing-international-migration-under-covid-19-6e914d57/>.
- Purkayastha, D., Vanroelen, C., Bircan, T., Vantghem, M. A., and Adsera, C. G. (2021). Work, health, and COVID-19: a literature review. https://www.etui.org/sites/default/files/2021-03/Work%2C%20health%20and%20Covid-19%20a%20literature%20review_2021_WEB.pdf.
- Quality of Life Research Institute. (2020). Covid-19 pandemic from a demographic perspective. "Costin C. Kiritescu" *National Institute of Economic Research, Romanian Academy*. <https://uefiscdi.gov.ro/wfsf/resource-829420-2020-raport-covid-din-perspectiva-demografica.pdf>.
- Ronchi, S. (2021). European solidarity before and after Covid: we are in this together?. <http://www.euvisions.eu/european-solidarity-before-and-after-covid-we-are-in-this-together/>.
- Windsor-Shellard, B., & Butt, A. (2020). Coronavirus (COVID-19) related deaths by occupation, England and Wales: deaths registered between 9 March and 25 May 2020. <https://backup.ons.gov.uk/wp-content/uploads/sites/3/2020/06/Coronavirus-COVID-19-related-deaths-by-occupation-England-and-Wales-deaths-registered-between-9-March-and-25-M.pdf>
- World Bank Group. (2021). The fiscal impact and policy response to Covid-19. <https://openknowledge.worldbank.org/handle/10986/35424>.
- World Health Organization. (2020). Statement - We cannot allow the impact of COVID-19 to be amplified by neglecting other vital health protection measures <https://tinyurl.com/3mpxks4m>
- Yancy, C. W. (2020). COVID-19 and African Americans. *Jama*, 323(19), 1891-1892. <https://jamanetwork.com/journals/jama/article-abstract/2764789>