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EMERGENCY STATECRAFT, LOCKDOWN VULNERABILITY, AND FOOD INSECURITY AMONG MIGRANT WORKERS IN QATAR DURING COVID-19

Emergency Statecraft, Lockdown Vulnerability, and Food Insecurity Among Migrant Workers in Qatar During COVID-19

JONATHAN CRUSH AND BERNARD OWUSU

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Cover photo: Mandatory contract-tracing app – Ehteraz Health QR Code – launched by the Qatari government in April 2020.



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EXECUTIVE SUMMARY

Qatar has one of the world's most extreme migration demographics, with over 85% of its 2.5 million residents being non-citizens. These migrant workers are primarily low-wage labourers from South and Southeast Asia, but increasingly also from Africa. They mainly work in the construction, services, and domestic sectors and, although there have been reforms to the *kafāla* (sponsorship) system, many remain tied to specific employers. Others have taken advantage of the changes and opted to work as freelancers for employers other than their original sponsors. While freelancing brings greater autonomy and labour market flexibility, it also has several potential drawbacks. These became particularly evident during the pandemic. When COVID-19 struck in early 2020, Qatar responded with a stringent containment regime to stop the spread of the virus. Borders were sealed and Doha's massive labour camps were locked down. Companies were mandated to keep paying their employees and ensure that they had access to food in the communal canteens. Although these measures prevented large-scale hunger or shortages, they also reinforced structural inequalities. Freelancers bore the brunt of economic immobility, job loss, and restricted food access. This report examines these dynamics through the experiences of Ghanaian migrants in Qatar, revealing how pandemic emergency statecraft exacerbated vulnerability to infection and food insecurity.

Key Findings

- National Resilience and Local Inequality:** Qatar's strong food security apparatus built after the 2017 blockade of Qatar by other Gulf states ensured the availability of food throughout the pandemic. However, macro-resilience masked micro-level inequality. While the Qatari government prevented a national food crisis, its emergency governance provisions did not extend protection to all residents equally.
- Emergency Statecraft and Containment:** Qatar's lockdowns, movement restrictions, and contact-tracing infrastructure confined tens of thousands of migrants to overcrowded labour camps. Infection rates within these camps rapidly reached 60-70%. Mortality remained low, however, ostensibly due to the workforce's youth and relative absence of co-morbidities.
- Unequal Food Security Outcomes:** Company-employed migrants in the labour camps were shielded from extreme hunger because employers were legally required to provide food and wages during lockdowns. However, meals in company canteens were widely described as monotonous, poor quality, and culturally inappropriate.

4. **Extreme Freelancer Vulnerability:** Ghanaian freelance workers operating outside original sponsorship faced acute economic and food insecurity as jobs evaporated and movement was curtailed. Many relied on charity or social networks, fell into debt, skipped meals or survived on low-cost, unhealthy foods.
5. **Spatial and Structural Precarity:** The geography of food access in Doha mirrored Qatar's social hierarchy. Labour camps, though sites of contagion and control, paradoxically offered food stability. On the other hand, dispersed freelancers experienced isolation, exclusion from employer-based welfare protections, and heightened food insecurity.

Policy Recommendations

1. **Make Migrant Inclusion Part of Food Security Strategy:** Future iterations of Qatar's National Food Security Strategy could explicitly include migrant welfare, ensuring equitable access to adequate, nutritious, and culturally acceptable food during crises.
2. **Establish Safety Nets for Freelancers and Informal Workers:** Plan for emergency relief mechanisms, such as temporary food assistance, rent support, and access to health care for migrants excluded from employer obligations.
3. **Improve Food Quality and Cultural Adequacy in Labour Camps:** Develop minimum nutrition and quality standards for employer-provided meals, including periodic consultation with migrant workers to ensure culturally appropriate diets and dietary diversity.
4. **Create a Migrant Food Security Monitoring System:** Implement a research program and data collection on migrant food provisioning, dietary requirements, and food consumption practices to guide policy responses and hold employers accountable.
5. **Strengthen Regional and Corporate Accountability:** Promote GCC-wide consultations on migrant protection standards and food security and require multinational companies operating in Qatar to integrate food security and welfare provisions into their corporate social responsibility programs.

INTRODUCTION

On 11th March 2020, the Director General of the World Health Organization, Dr. Tedros Adhanom Ghebreyesus, characterized COVID-19 as a global pandemic (WHO, 2021). At that time, there were 118,000 confirmed cases and 4,291 recorded deaths from COVID-19 across 114 countries. By September 2025, the count reached 704 million confirmed cases and over 7 million deaths. WHO (2023) has calculated that there were an additional 13 to 16 million COVID-19 fatalities in 2020-21, which would put actual mortality at three times the official toll (Msemburi et al., 2023). The secondary impacts of the COVID-19 pandemic extended well beyond the direct consequences for individuals contracting the SARS-CoV-2 virus. Factory and office closures, mass layoffs and unemployment, reduced working hours, contaminated workplaces, absence of social benefits, and income collapse all had a major negative impact in countries across the Global South (Carmody et al., 2020; Kugler et al., 2021). Yet, the impacts of the pandemic were extremely uneven as “its effects were highly differentiated, inflected through a wide range of existing cleavages like class, race, gender, and nationality, among others” (Rajan, 2025, p. 5).

The imposition of unprecedented international and internal controls on human mobility was the most immediate and impactful feature of the pandemic response by governments (Martin & Bergmann, 2021; Shiraef et al., 2021). By 10th March 2020, close to 100 governments and authorities had implemented travel restrictions directly related to COVID-19. More quickly followed, so that by May 2020 over 200 had either closed their borders or put severe entry restrictions in place (Grépin et al., 2024). Millions of people were left stranded as land borders closed and flights were grounded. The drastic limitations on international mobility were justified by governments as necessary to prevent virus carriers from infiltrating their countries and infecting citizens. Every jurisdiction saw a sharp decline in border crossings, and for the first time in contemporary history, global migration flows almost ground to a halt (IOM, 2021). The underlying logic for border closures drew on the long-standing association between disease control and the spatial imaginary of the *cordon sanitaire*, a linkage with deep roots in the history of quarantine practices (Kosec & Topp, 2021). In many parts of the world, however, border closures had little effect on the incidence of COVID-19 (Emeto et al., 2021; Grépin et al., 2023; Shiraef et al., 2022).

Actual and aspirant migrant workers bore the brunt of involuntary immobility. As McAuliffe (2024, p. 200) notes, “COVID-19 proved to be a massive disruption to migration, negatively impacting migrants throughout the migration cycle, starting with departure from countries of origin, entry into transit and destination countries, stay in transit and destination countries, and the return to countries of origin.” For Ewers et al. (2023a, p. 29), “Covid-19 is an immobility crisis

that has closed borders and reduced migration at the financial expense of migrant workers and businesses.” The closure of recruitment agencies and suspension of international flights froze new migration opportunities. Countries such as the Philippines, one of the world’s largest migrant-labour-sending countries, recorded dramatic declines in overseas deployment, with significant losses in the remittance inflows on which many households depended (Gomez-Magdaraog et al., 2024; Opiniano & Ang, 2023). The disruption of global labour migration systems was particularly acute in sectors such as construction, agriculture, services, domestic work, and healthcare that depend heavily on imported migrant workers. Remittance flows plummeted and then recovered as migrants used savings to keep their families at home afloat (Crush & Ramachandran, 2025).

Not all migrant workers were immobilized and stranded during the early weeks of 2020. Return or reverse migration accelerated during the early days of the pandemic as desperate workers sought to return home and host governments were equally keen to get rid of them (Kang & Latoia, 2022; Liao, 2020; Rajan & Arcand, 2023). Many returned empty-handed and were criticized for doing so, and some were even vilified as COVID-19 “super-spreaders” (Foley & Piper, 2021; Rahman et al., 2023). Returns from the Gulf were a combination of mass, state-organized “voluntary” flights and involuntary deportations. The Indian government’s Vande Bharat mission brought over 700,000 Indian migrants back from six Gulf countries, while the Philippines and Pakistan also implemented return operations from the Gulf (Farooq & Arif, 2023; Rajan & Pattath, 2022, 2023). Despite these large-scale repatriations, many migrants were stranded in the Gulf as “loss of jobs and income, lack of employment, loss of residence permits and lack of resources to return home” all impacted mobility (Ahsan Ullah et al., 2021).

Restrictions on personal mobility and exclusion from public spaces were the primary domestic policy response to contain the spread of the virus and relieve the pressure on overburdened public health facilities. The lockdown for over two months of the 12 million residents of Wuhan, the Chinese city at the epicentre of the pandemic, was one of the most stringent responses to the virus globally but also served as a model for others to emulate in whole or in part. As Hale et al. (2020) conclude, “the policy response in the early phase of the pandemic was a case of ‘copycat effect’: policymakers all around the world, with little information beyond news reports coming out of China and northern Italy, quickly adopted similar sets of preventative measures.” Lockdowns and stay-at-home orders were variously imposed and unevenly policed. One of the most draconian African examples of involuntary immobility occurred in South Africa, where the whole country was locked down for several weeks and regulations were ruthlessly enforced by the police and army (Crush & Sithole, 2025). During 2020, over 400,000 arrests were made for breach of lockdown, mostly in the informal settlements that surround South Africa’s major cities.

Stranded migrant workers throughout the Global South were invariably confined to barracks during the pandemic. In Singapore, for example, 200,000 migrant workers were living in over 40 large purpose-built dormitories with rooms housing between 12 and 20 workers sharing communal facilities (Tan et al., 2021). In the Gulf states, most migrant workers are low-paid labourers accommodated in dormitory-style “labour camps”. In the camps, migrants generally live in small rooms with up to a dozen bunkbeds and shared bathrooms. In Kuwait, Alahamad et al. (2020) note that “a large proportion of migrant workers in Kuwait live in cramped dormitories with poor housing conditions: small rooms with tens of men living together; unmaintained and shared toilets; poor or no ventilation; and high risk of bed bugs and other pests.” Overcrowded dormitories and labour camps became hotspots for COVID-19 transmission, giving the authorities an added reason to seal them off from the general population. As a result, stranded migrants were confined for long periods in the ubiquitous labour camps that dot the urban landscape of major Gulf cities (Babar, 2020; Nahari et al., 2024).

COVID-19 had “the unintended but important consequence of sharpening global awareness of the neglected research and policy linkages between international migration and food security” (Crush et al., 2021, p. 8). The deleterious impact of COVID-19 on food security is now a well-documented consequence of the pandemic across the globe (Béné et al., 2021; Dasgupta & Robinson, 2022; Mueller et al., 2022; Oliva-Orcas et al., 2022). Pandemic-related food insecurity was unevenly spread but experienced most intensely by vulnerable groups of particular social, racial, and ethnic background in every jurisdiction (Ahmed et al., 2023). Migrant populations experienced higher job losses and reduced incomes compared to much of the population, which eventually disrupted their access to adequate, nutritious food. The pandemic significantly altered household food consumption and spending due to restricted food access, food price inflation, and supply chain disruptions. In the African context, various case studies have documented in detail how pre-pandemic food insecurity among vulnerable migrant populations was significantly exacerbated by COVID-19 (Ahmed et al., 2024; Bhanye, 2023; Ncube et al., 2025; Onyango et al., 2023; Ramachandran et al., 2024; Tawodzera & Crush, 2025). Less attention has been paid to the pandemic-related food security challenges confronting African migrants outside the continent (Mansour et al., 2020; Mori & Onyango, 2023). And hardly any attention has been paid to the food security of the millions of migrants stranded in the Gulf without jobs and incomes (Woertz, 2020).

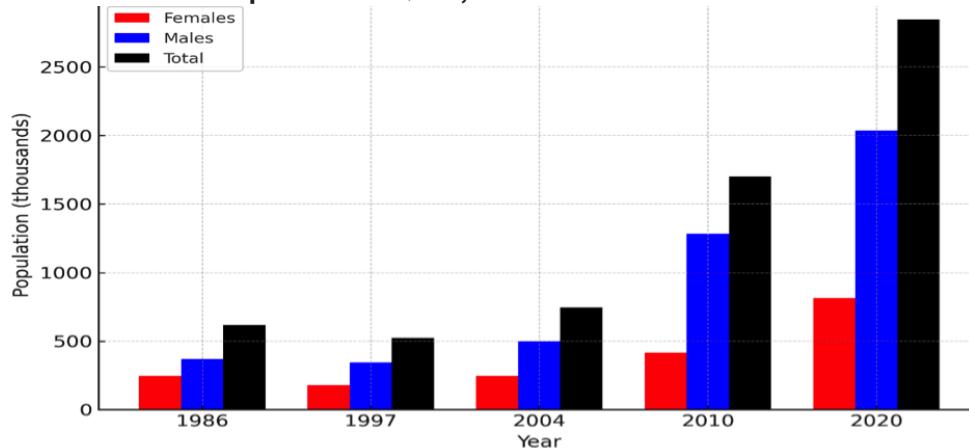
This report examines the plight of a group of stranded Ghanaian migrant workers in Qatar during the pandemic. Although this is a case study of a cluster of migrants from one of the minor source countries for Qatar, it aims to make four main contributions to the literature on COVID-19. First, it provides a contextual overview of the course of the pandemic in Qatar and the reasons for the exceptionally high rates of seropositivity among stranded migrants. Second, it

contributes to the literature on the subjective experience of the pandemic by migrant workers in the Gulf which, to date, has primarily focused on Asian and not African migrants (Ansar, 2023; Ekanayake & Amirthalingam, 2021; Morad & Chowdury, 2024; Saraswathi, 2025; Shah & Alkazi, 2023; Shadab & Asif, 2023). Third, it adds depth to the concept of pandemic precarity among migrants by demonstrating the fundamentally spatial nature of the phenomenon (Borras et al., 2021; Garcia et al., 2023; Kapilashram & John, 2023; Mürage & Smith, 2023; Ramachandran et al., 2024). Finally, Jureidini (2025, p. 308) notes that “no studies have attended to the quantity and quality of food consumed by migrant workers in Qatar.” This report therefore breaks new ground by investigating the impact of COVID-19 on the food security of migrants stranded in the Gulf.

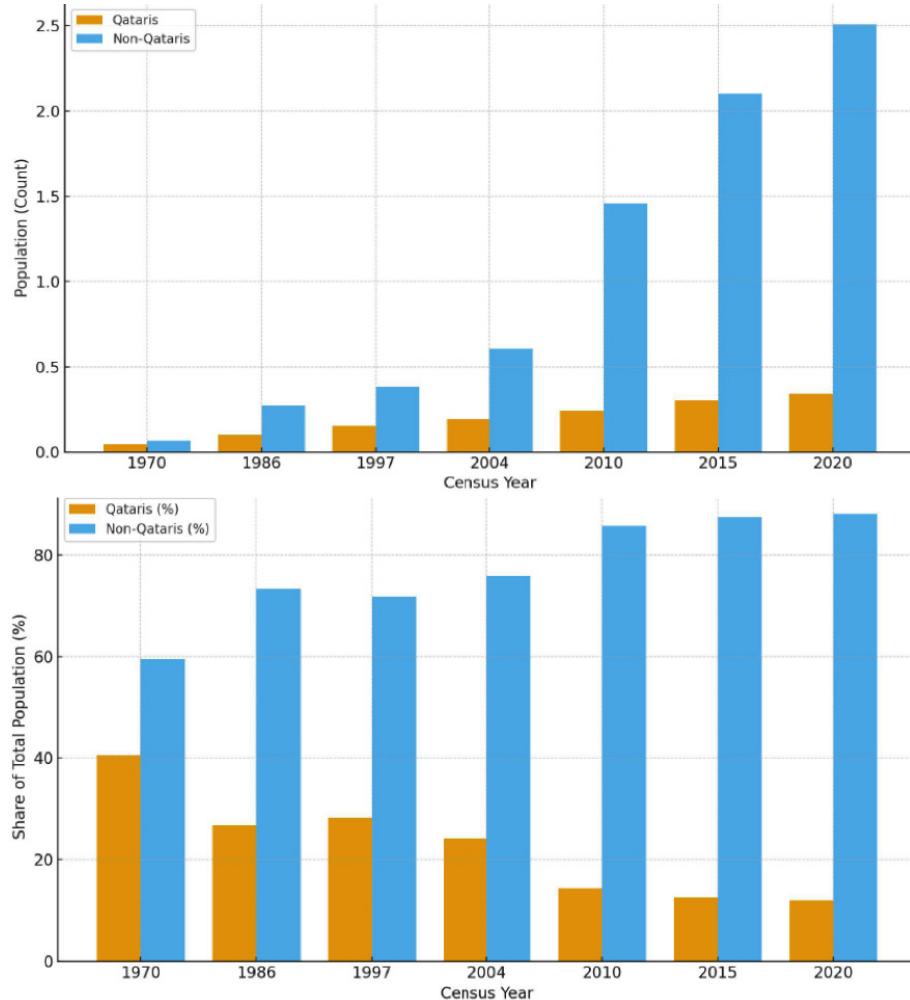
The report is divided into four sections. The first provides a contextual overview of the migrant population and the course of the COVID-19 pandemic in Qatar. The second section discusses the research methodology used to gather qualitative insights into the experience of Ghanaian migrants stranded in Qatar during the pandemic. The third discusses the findings of the research on the food security challenges confronting the migrants, with reference to the contrast between company employees in the Doha labour camps and freelance migrants outside the camps. The conclusion reflects on the broader significance of the case study for future research on the impacts of food security shocks for temporary migrant workers more generally.

EMERGENCY STATECRAFT

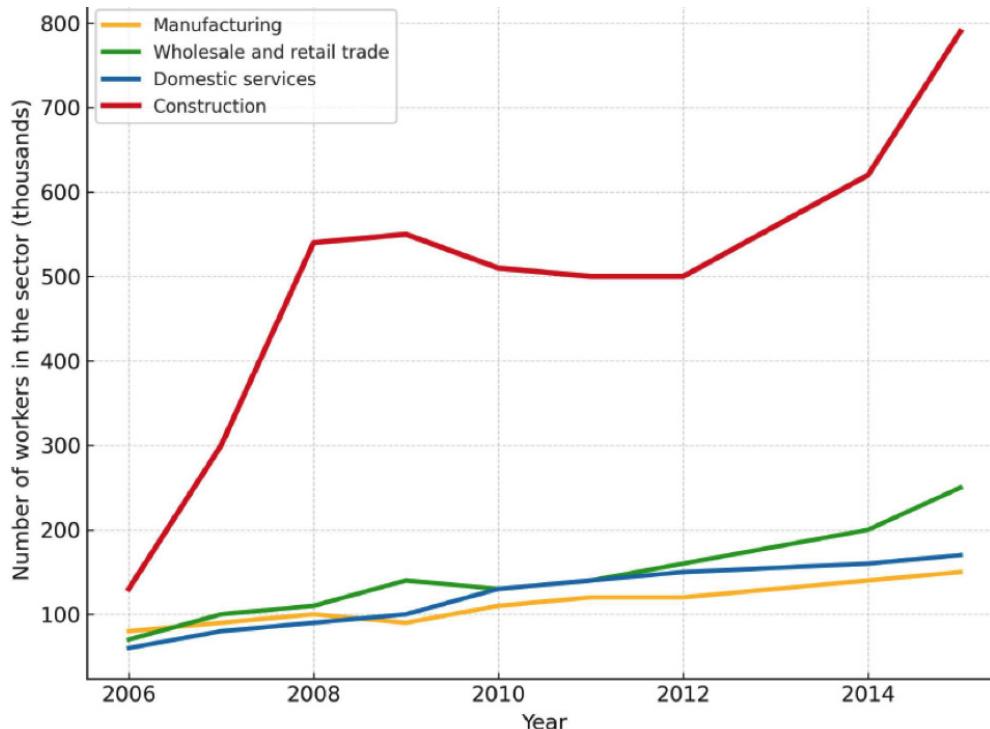
On the eve of the pandemic, 30 million temporary migrants were living and working in the six Gulf Cooperation Council (GCC) countries. Combined, they made up 11% of the world’s total migrant stock and 53% of the Gulf region’s resident population (De Bel-Air et al., 2021). In Qatar, the imbalance between citizens and non-citizens was extreme. The total population of Qatar increased from 373,000 in 1986 to 2,546,000 in 2017 (Figure 1). The country also had a sex ratio imbalance with men outnumbering women by 5 to 1, as the migration stream to the country was increasingly male dominated. The number of non-citizens in Qatar had reached 2.5 million by 2020 and constituted 87% of the total population (Figure 2). Construction was the major employment sector for migrant workers with over 800,000 employees, followed by wholesale and retail trade and domestic service (Figure 3). The migrant labour force was dominated by migrants from India, Nepal, Bangladesh, and the Philippines (Table 1). The main African source country was Egypt, followed by Sudan, Ethiopia, Tunisia, Kenya, and Eritrea. The number of Ghanaians in Qatar was estimated at 5,000 in 2015, although Rahman & Salisu (2023) put the number at over 8,000.

FIGURE 1: Total Population of Qatar, 1986-2020

Source: Data from Qatar Census

FIGURE 2: Number and Proportion of Non-Citizens in Qatar, 1970-1920

Source: Data from <https://gulfmigration.grc.net/qatar-population-by-nationality-qatari-non-qatari-at-dates-of-censuses-1970-2020/>

FIGURE 3: Employment of Labour Migrants in Qatar by Sector, 2006-2015

Source: Data from Qatar Labour Force Surveys

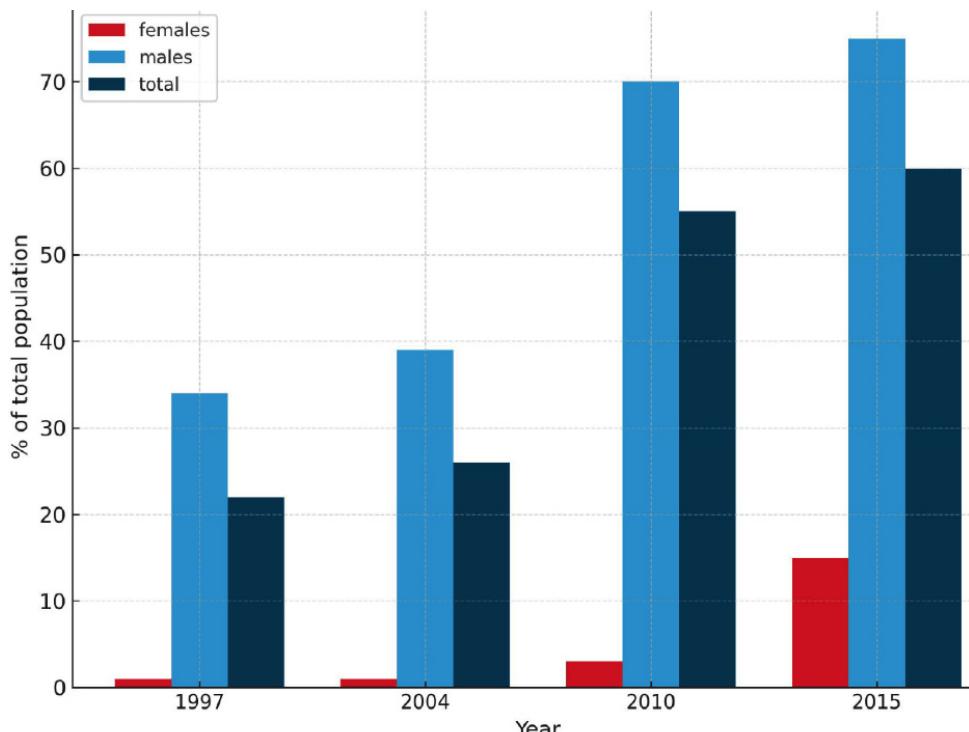
TABLE 1: Country of Origin of Non-Citizens in Qatar (with 10,000+), 2015

| Country of Origin | No. | % of Total Population |
|-------------------|---------|-----------------------|
| India | 650,000 | 25.0 |
| Nepal | 350,000 | 13.5 |
| Bangladesh | 280,000 | 10.8 |
| Philippines | 260,000 | 10.0 |
| Egypt | 200,000 | 8.6 |
| Sri Lanka | 145,000 | 5.6 |
| Pakistan | 125,000 | 4.8 |
| Syria | 54,000 | 2.2 |
| Sudan | 50,000 | 2.1 |
| Indonesia | 43,000 | 1.8 |
| Jordan | 40,000 | 1.7 |
| Iran | 30,000 | 1.5 |
| Lebanon | 24,000 | 0.9 |
| Ethiopia | 22,000 | 0.9 |
| Tunisia | 20,000 | 0.8 |
| Palestine | 20,000 | 0.8 |
| Kenya | 14,000 | 0.5 |
| Eritrea | 10,000 | 0.4 |

Source: <https://gulfmigration.grc.net/qatar-estimates-foreign-residents-qatar-country-citizenship-selected-countries-c-2015-2016/>

In the capital, Doha, a significant proportion of the lower-skilled migrant workforce is enclosed in labour camps consisting of large dormitory complexes (Mohammad & Sidaway, 2016; Molho, 2025). One study distinguished between large dormitory-style camps (housing 40%) from smaller “villa camps”, which are single-family homes occupied by groups of workers (25%) (Gardener et al., 2013). As Figure 4 shows, the proportion of migrant workers housed in camps increased from 22% in 1997 to 60% in 2015. In 2015, 73% of labour camp residents were men and only 27% were women. Although Qatar introduced legally binding standards for workforce housing in 2014, actual conditions vary from camp to camp and complex to complex (Brik, 2024; Diop et al., 2020; Ewers et al., 2020, 2023b). In the dormitory complexes, privacy is minimal as residents must share rooms with as many as 10 other workers and bathrooms are communal, leading to considerable worker dissatisfaction (Fargues et al., 2019). There is on-site security and bus transport to worksites. Most camps have communal canteens for workers, some with ethnic menus, but ban workers from preparing or cooking their own food. The camps are spatially segregated from the commercial heart of the city and the middle and high-income residential areas. As Garner (2024, p. 84) observes, “this transnational proletariat’s experience in the urban landscape of Doha is, essentially, a segregated experience.”

FIGURE 4: Proportion of Migrants Living in Labour Camps by Sex, 1997-2015



Source : Qatar Census Data

The first confirmed case of COVID-19 in Qatar was a Qatari national returning by air from Iran on 28th February 2020. The first locally acquired infection was identified on 6th March and linked to a cluster of cases among craft and manual migrant workers who had no record of recent travel outside the country and were living in high-density accommodation. The Qatari government issued a COVID-19 National Response Plan in March 2020 and aggressively sought to contain spread through widespread testing and screening, restrictions on movement, contact-tracing, social distancing, wearing of face masks, shutting down of businesses, travel bans, remote working, and closure of borders, educational institutions, and public spaces (Table 2).

The residential segregation of migrants from the rest of the city in the geographic bubble of the labour camps played a key role in shaping the progression of the disease in Qatar as well as the nature of the policy response. Gardener (2025, p. 79) notes that during the pandemic, “the Qatari state locked down movement and mobility in the city in an attempt to repress the contagion.” The labour camps presented something of a policy dilemma in this regard. High density concentrations of migrants in the camps made it far easier for the state to lock down movement and mobility within the city. On the other hand, the crowded living conditions in the camps made them an ideal environment for the rapid diffusion of the virus or what Coyle et al. (2021) call “the boarding school effect”. That, in turn, made locking down the camps imperative in the eyes of the state to try to insulate those not living in the camps from being infected. The first cluster of over 200 infections was publicly announced on March 11th in a housing complex in the industrial area on Doha’s outskirts. The authorities immediately imposed tight restrictions and the strict lockdown of a 32-block neighbourhood. The camps acted as “fertile ground” for COVID-19 transmission (Mundodan et al., 2022). As they write, “Qatar’s largest labour camp for the migrant workers, a huge zone within the ‘Industrial Area’ had gone into total lockdown, cutting it off from the rest of the country. The government ensured they got free accommodation, food and basic wages. Free treatment was provided in case they fell ill. Soon strict lockdown measures were imposed in Qatar, for a three-month period.” The initial lockdown measures were lifted under a four-phase plan starting on 15th June 2020. Variants of lockdown of greater or lesser stringency came and went over the next five waves of the pandemic.

None of these containment strategies had the desired effect (Figure 5). Between 1st March and 31st July 2020, just over 200,000 individuals were tested for COVID-19 and returned an overall positivity rate of 29.4% (Al-Kuwari et al., 2021). The screening found that 32% of men tested positive, compared to only 10% of women (Table 3). Migrants from South Asia had a positivity rate of 36.5%, while the African population had a rate of 25.5%. In terms of the occupational structure, the positivity rate for workers in the two largest migrant employment sectors (construction and retail and wholesale trade) was as high as

TABLE 2: COVID-19 Containment Strategy

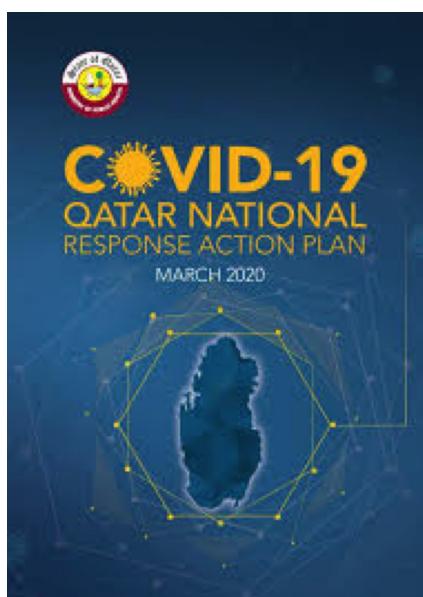
| Key Dates | COVID-19 Measures |
|------------------|---|
| 24 February 2020 | Supreme Committee for Crisis Management established to coordinate national response |
| 2 March 2020 | COVID-19 Qatar National Response Action Plan in place (State of Qatar, 2020) |
| 9 March 2020 | Nation-wide lockdown announced Closure of schools and universities Travel bans on 15 countries: Bangladesh, China, Egypt, India, Iran, Iraq, Italy, Lebanon, Nepal, Pakistan, the Philippines, South Korea, Sri Lanka, Syria, and Thailand |
| 15 March 2020 | Restrictions on sales and servings in open markets, restaurants, cafes and food courts Online delivery services and takeaway allowed Suspension of all forms of public transport Cordoning off of labour camps following cluster outbreaks begins |
| 17 March 2020 | Lockdown of Doha's industrial area |
| 18 March 2020 | Ban on entry of anyone except Qatari nationals to Qatar Ban on all incoming flights to Doha, except for air cargo and transit flights Stay-at-home orders, except for essential services Closure of non-essential shops and services (including hairdressers, retail stores, bank branches in commercial complexes and shopping centres) Implementation of a USD23.35-billion economic stimulus package to shield the economy |
| 20 March 2020 | Closure of all parks and public beaches |
| 26 March 2020 | Agreements with 14 major companies in the food sector to increase stocks of strategic commodities, especially wheat, rice, cooking oils, sugar, frozen red meat, long-life and powdered milk Launch of electronic application system to manage and activate public-private partnerships |
| 25 April 2020 | Launch of Ehteraz contact-tracing app by Ministry of Interior |
| 12 May 2020 | Restaurants and coffee shops allowed to resume the activity of delivering or handing over orders to customers outside the business premises |
| 14 May 2020 | Mask-wearing mandatory outside the home; violators subject to fines or jail terms |
| 8 June 2020 | Implementation of Phase 1 of four-phase re-opening strategy |
| 1 August 2020 | Re-opening of borders for Resident Permit holders with two weeks quarantine |
| 1 September 2020 | Reopening of all economic activities under Phase 4 |
| 23 December 2020 | Launch of COVID-19 vaccination campaign |
| 4 February 2021 | Reimposition of restrictions as cases surge |
| 8 April 2021 | Stricter lockdown to curb rising infections |
| 10 May 2021 | New four-phase plan to lift restrictions announced |
| 12 July 2021 | Updated travel and return policy |
| 3 October 2021 | Easing of Phase 4 |

Source: Based on Hassen et al. (2020, p.2)

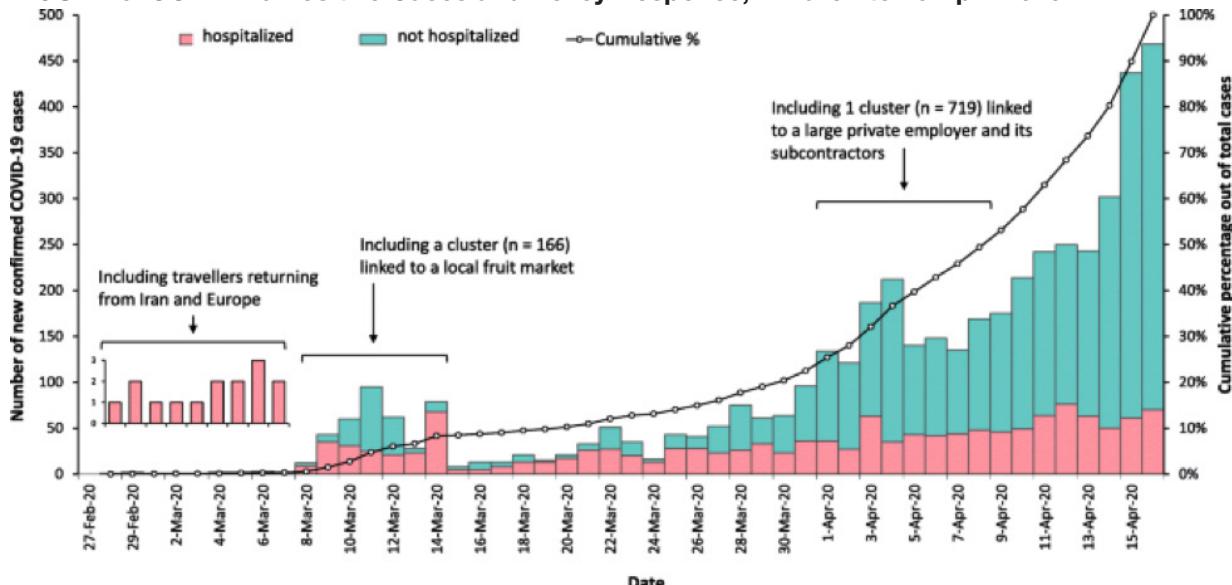
40%, followed by 34.5% for waste management workers and 33.1% for accommodation and food services workers. Serological studies completed by mid-October 2020 estimated the number of infections at 1,426,500 or 51% of the population of Qatar (Ayoub et al., 2021). These authors claim that “physical

and social distancing” measures averted an additional 840,000 infections and therefore, in effect, justified locking down the residents of the labour camps for extended periods.

The crowded living conditions in the labour camps were such that the residents themselves were highly vulnerable to infection. As Al-Jayyousi et al. (2022, p. 5) observe, the camps “were designed to accommodate workers in groups that amount to huge numbers, making the frequent and persistent social blending inevitable [with] constant exposure in the sleeping rooms, kitchens, dining halls, laundry, corridors, and other common places like gymnasiums and entertainment rooms.” Jeremijenko et al. (2021) tested blood specimens collected from June to September 2020 from a sample of workers from ten labour camp communities ranging in size from a few hundred to a few thousand. Because the choice of sites was not random but had shown evidence of substantial infection levels from prior RT-PCR testing, the results are not necessarily representative of all the labour camps. However, in those ten communities, seropositivity ranged from an exceptionally high 55–84%, with all but one having rates of over 60% (Table 3). Male seropositivity at 67% was again much higher than the female rate (at 19%). In terms of national origin, migrants from Bangladesh had the highest overall seroprevalence (at 75%), while migrants from Kenya had the highest rate among migrants from African countries (at 51%). Some epidemiologists claimed that, with these kinds of rates, the labour camps were at or near to herd immunity (Al-Thani et al., 2021; Jeremijenko et al. (2021).



Qatar's infection rates were among the highest in the world. Yet, the country also had one of the lowest mortality rates from COVID-19 worldwide (Al Nuaimi et al., 2023). Between March 2020 and October 2022, the total death toll from COVID-19 was 682, which means that less than 0.1% of recorded infections ended in death. Most infections were asymptomatic or mild and nearly 60% of those who tested positive in one study had no symptoms in the two weeks prior (Seedat et al., 2022). The very low morbidity and mortality rates in Qatar compared to other countries and to the home countries of migrants have been variously attributed to the young population structure, the healthy worker effect, and the low level of comorbidities (Al Nuaimi et al., 2023; Seedat et al., 2022).

FIGURE 5: COVID-19 Positive Cases and Policy Response, 1 March to 20 April 2020

Source: Omrani et al. (2020)

The impact of COVID-19 on food security in Qatar has garnered considerable research attention and commentary (Ben-Hamadou & Bello, 2021; Ben Hassen & El Bilali, 2024, 2025; Jureidini et al, 2025; Mohamed et al., 2025; Woertz, 2020). The consensus in the literature is that the pandemic had little impact on the availability of food in the country and therefore on overall levels of food security (Bello & Ben-Hamadou, 2021; Woertz, 2020). Supermarket shelves remained well stocked, there was minimal panic buying, and food prices remained relatively stable. Given the well-documented global disruption of agricultural production and food supply chains, food shortages, and rapid food price inflation, this was a significant achievement (Alabi & Ngwenyama, 2023; Béné et al., 2021; Clapp & Moseley, 2020; Khan et al. 2022; Laborde et al., 2021; Singh et al., 2021). In a study of policy responses to the pandemic in South Africa, Kroll & Adelle (2021) argue that food security outcomes were contingent on the effectiveness of “emergency statecraft”. In that country, this did not prevent a significant increase in food security especially among the migrant and refugee population (Crush & Sithole, 2024).

Qatari emergency statecraft was much more effective, primarily because the country had faced a food security crisis a few years before and was better prepared than most for another food system shock. In June 2017, Saudi Arabia, the UAE, Egypt, and Bahrain severed diplomatic ties with Qatar and initiated an air, sea, and road blockade of the country. Prior to the blockade, Qatar had imported 90% of its food and the 40% that was imported via Saudi Arabia was abruptly halted by the sealing of the land border between the two countries. In 2018, the Qatari Government issued its Qatar National Food Security Strategy, 2018–2023 (Qatar Food Security Department, 2018), which focused on greater self-

sufficiency and developing a variety of alternative food supply chains (Kaitibie et al., 2022). In pursuit of self-sufficiency, it rapidly expanded its capacity to produce more of its own food supply through public-private partnerships (Jureidini et al., 2025). As Monroe (2020, p. 25) observes, “the state’s reorganization of trade networks and its support for Qatari agricultural production became a site for the expansion of the state’s food security agenda.” For example, prior to the blockade, it produced only 28% of its dairy products; a figure that had increased to 84% by 2018 (Jureidini et al., 2025). Another lesson from the blockade was a need to augment national food reserves. At the time of the COVID-19 outbreak, the country had sufficient food to feed the population for a year. In sum, as Jureidini et al. (2025, p. 299) point out, “the blockade forced Qatar to address the risks of food insecurity, to improve the country’s resilience, and to provide environmentally friendly food production systems.”

On 7th May 2020, the UK’s *Guardian* newspaper published an exposé of the food situation in Qatar, provocatively titled “Qatar’s migrant workers beg for food as Covid-19 infections rise” (Pattison & Sehai, 2020). The story was amplified across regional and global outlets, spreading a “beg for food” framing and fixing international attention on Doha’s quarantined industrial area that was pictured from the air in the article. The article also reinforced a contemporaneous human rights discourse about the poor treatment and death of migrants toiling on World Cup construction sites (Amnesty International, 2021). In a rejoinder to the *Guardian*, the Qatari Government claimed that begging for food was “isolated incidents” and “did not accurately represent the experience of the vast majority of workers in Qatar” (Al Thani, 2020). Additionally, “during the ongoing pandemic response, employers are required to provide salaries, food and housing to all workers.” This public exchange raises the obvious question of who was correct. Unfortunately, the data is not available to adjudicate the dispute. Ben Hassen et al. (2020) did conduct an online survey in May and June 2020 that asked several questions related to how food consumption behaviours were altered during the pandemic. Of the 577 respondents, 37% were non-Qatari. However, most of the sample (84%) had at least one degree so it is unlikely that the survey captured many residents of the labour camps.

Jureidini et al. (2025) raise the possibility that not all migrants were equally affected by food insecurity during the pandemic. As they suggest, there are three basic categories of migrant workers in Qatar in relation to food provision. First, there are those for whom the employer provides all food needs. Second, there are migrants who receive a monthly food allowance prescribed by law. And third, there are those who receive neither food nor a food allowance from their employer. The last category are so-called “free lancers” or “Azad visa” holders who have left the employ of their original sponsor to find alternative work on their own (Babar, 2025). Low-skilled, low-income migrant workers of all three types are

vulnerable to food insecurity “because of their low incomes, low food allowances, low education, and dependent families at home” (Jureidini et al., 2025, p. 307). Many are also heavily indebted to the agents, recruiters, and sponsors who organized their migration to Qatar (Jureidini, 2017; Moniruzzaman & Walton-Roberts, 2018). Of the three groups, the most vulnerable to food insecurity are those who receive neither food nor a food allowance and are responsible for their own food needs. As Owusu & Crush (2024) point out, those receiving a cash allowance, or nothing, are also more likely to sacrifice their own food needs to maximize their ability to send remittances to family at home.

TABLE 3: Seropositivity Rates in Qatar, 2020

| Variables | | Al-Kuwari et al. (2021) (%) | Jeremijenko et al. (2021) (%) |
|---------------------------------|--------------------------|--------------------------------|----------------------------------|
| Age group | 18-30 | 30.3 | 65.3 |
| | 31-40 | 28.9 | 62.1 |
| | 41-50 | 30.5 | 65.4 |
| | 51-60 | 27.3 | 66.4 (>50) |
| | >60 | 23.2 | |
| Sex | Male | 32.0 | 66.8 |
| | Female | 10.0 | 18.5 |
| Region/ Country of origin | South Asia | 36.5 | |
| | Sub-Saharan Africa | 25.5 | |
| | South East Asia | 16.7 | |
| | Northern Africa | 16.6 | |
| | Middle East | 10.6 | |
| | Europe | 5.1 | |
| | Other | 10.1 | |
| | Bangladesh | | 75.2 |
| | Nepal | | 68.7 |
| | India | | 62.8 |
| | Sri Lanka | | 52.4 |
| | Kenya | | 50.7 |
| | Philippines | | 36.5 |
| | Other | | 32.0 |
| Workplace | Construction | 40.0 | |
| | Retail & wholesale trade | 40.0 | |
| | Finance & business | 34.9 | |
| | Waste management | 34.5 | |
| | Accommodation & food | 33.1 | |
| | Holding/conglomerate | 30.9 | |
| | National security | 21.7 | |
| | Oil & gas | 18.5 | |
| | Public service | 17.6 | |
| | Health care | 11.0 | |

| | | | |
|-------------------------|-------|--|------|
| Labour camp communities | No 1 | | 78.7 |
| | No 2 | | 61.8 |
| | No 3 | | 83.8 |
| | No 4 | | 61.8 |
| | No 5 | | 54.9 |
| | No 6 | | 62.9 |
| | No 7 | | 64.9 |
| | No 8 | | 66.8 |
| | No 9 | | 62.4 |
| | No 10 | | 64.8 |

METHODS

Data for this study was collected in Qatar from May to June 2023 using a qualitative methodology and non-probabilistic sampling. The research team completed 58 face-to-face in-depth interviews among Ghanaian labour migrants living in Doha and surrounding communities. The research participants were recruited through various community networks, such as the Ghanaian Association in Qatar, and during regular church services on Fridays. The interviews were conducted in the labour camps, other accommodation facilities, Ghanaian restaurants, and other convenient places. During the interviews, the research team recorded migration histories and experiences, food access and food security challenges, and the impact of the pandemic on their food security experiences. The interviews were audio-recorded with the permission of the respondents and all personal details anonymized. For the analysis, the recordings were transcribed in English, read, coded, and thematically analyzed to identify and interpret themes and patterns using NVivo 12 Software.

The profile of the respondents in Table 4 shows that this was a relatively diverse sample in terms of basic demographic indices such as age, marital status, and highest level of education. The sample was heavily male-biased, reflecting a general characteristic of the migrant population in Qatar, and relatively young (with 89% under the age of 40). Nearly 80% of the sample were recent migrants who had come to Qatar after 2018. The occupational profile was more varied though dominated by three sectors: construction, cleaning, and restaurant work. One-third of the respondents were on company visas and two-thirds were freelancers.

TABLE 4: Profile of Ghanaian Migrant Respondents

| | | No. | % |
|----------------------------|--|-----|-------|
| Total sample | | 58 | 100.0 |
| Sex | Male | 45 | 77.6 |
| | Female | 13 | 22.4 |
| Age | 18-30 | 18 | 50.0 |
| | 31-40 | 14 | 38.9 |
| | 40+ | 4 | 11.1 |
| Marital status | Unmarried/single | 32 | 57.1 |
| | Married | 23 | 41.1 |
| | Separated/divorced | 1 | 1.8 |
| Highest level of education | Junior high school | 18 | 38.2 |
| | Senior high school | 17 | 36.2 |
| | Diploma | 6 | 12.8 |
| | University graduate | 6 | 12.8 |
| Number of years in Qatar | 0-3 | 45 | 78.9 |
| | 4-7 | 8 | 14.1 |
| | 7-9 | 2 | 3.5 |
| | 10 and above | 2 | 3.5 |
| Employment sector | Construction | 14 | 24.6 |
| | Cleaning | 14 | 24.6 |
| | Restaurant workers | 9 | 15.7 |
| | Factory (glass work and fixing) | 4 | 7.0 |
| | Cabin crew | 4 | 7.0 |
| | Food delivery | 4 | 7.0 |
| | Transportation (drivers and instructors) | 4 | 7.0 |
| | Security | 3 | 5.3 |
| Immigration status | Domestic work | 1 | 1.8 |
| | Company visas | 19 | 33.3 |
| | Freelancers/free visas | 37 | 66.7 |

LOCKDOWN (IM)MOBILITIES

Most Ghanaian migrants in Qatar were stranded during COVID-19, although some were able to leave on an Ethiopian Airlines flight in early March before the borders shut. During the COVID-19 lockdown of the labour camps in 2020, and again in 2021, their everyday mobility was closely monitored. As in other jurisdictions with large numbers of temporary workers living in labour camps, the residents were confined to the camps in March and April 2020 as the government sought to seal them off from the rest of the city (Yeoh & Lam, 2022). Thereafter, digital surveillance became a key component of the government strategy to allow a degree of controlled mobility. The Qatari Ministry of the Interior developed a contact-tracing app known as Ehteraz (or “precaution”)

which it launched in April 2020. It immediately became mandatory for all citizens and non-citizens to install the app on their cell phones (Hayajneh, 2020). As a contact-tracing device, the app had very low efficacy (Al-Kuwari et al., 2022). However, as a mobility surveillance tool, it had greater success. No-one could leave their place of residence without the app and non-compliance carried a heavy fine and/or the risk of imprisonment for up to three years. Ehteraz itself used GPS and Bluetooth to trace contacts and displayed the user's health status via a QR code and a colour code system (green, yellow, red, grey) depending on risk or infection/quarantine status. One respondent described how the app was used to monitor movement and COVID-19 status as well as identify contacts:

During the COVID-19 pandemic, there were challenges everywhere. Strict rules had to be followed, and entry requirements were enforced. One such requirement was the Ehteraz Covid app. The app changed colour upon entry, indicating whether you were allowed inside. If it turned green, you were clear to enter, but if it turned yellow, you might be taken for further evaluation, possibly to a hospital. This system monitored people's health status and contained their personal information. You could know if you have contracted the virus even without going to the hospital (Interview No. 27).

Official data on the employment impact of the pandemic on migrants is unavailable, although one online survey with 10,000 respondents reported in November 2020 that 56% of respondents had suffered a pay cut and 26% had been laid off (Nabila, 2020). Another survey by Ewers et al. (2023a) of 2,654 Qatar residents in late 2020 included 1,604 migrants. This survey found that 12% of the latter had lost their jobs due to COVID-19, that 29% feared they would still lose their jobs, and that 28% had experienced a pay cut. Additionally, 68% of migrants affirmed that COVID-19 would cause them financial hardship.

The impact on migrant food security would have been catastrophic had the government not mandated companies to continue to house and feed their employees and pay salaries and food allowances even if they were not working. Pandemic relief grants offered to companies were made to offset some of these costs. This strategy enabled many migrants in the camps to weather the COVID-19 storm without serious disruption to their pre-pandemic food consumption:

The COVID-19 pandemic never influenced my job or income because I was in the company, and they managed everything. It is a political statement to say COVID has caused economic problems (Interview No. 16).

We had no shortages during the COVID period. We were eating more during the COVID period because there was food in the system (Interview No. 15).

I was here during the Covid period, and the lockdown affected us. We had to stay in the house for one month and two weeks. Fortunately, we received back salaries, but we couldn't go to work because the roads to the industrial areas were blocked.

Interestingly, we could still go to shopping malls, with the police and military observing. Overall, I wouldn't say Covid affected me severely, not even my expenses. I spent my time eating and playing games for entertainment. Unfortunately, I did lose my overtime salary due to the lockdown, as well as the random tips I used to receive (Interview No. 23).

Migrants who experienced serious illness and were hospitalized continued to be paid if they were with the “right company” and spoke favourably of the treatment and food in hospital:

During the COVID period, I was in Qatar and unfortunately contracted the virus, which required me to stay at the hospital. Despite that, my company continued to pay me during my hospitalization. The COVID pandemic did not affect my salary. The hospital provided excellent meals, making the stay quite comfortable. Not everyone in Qatar finds it easy because you need to be at the right company to benefit (Interview No. 53).

Most salaries are fixed by the terms of the original contract and increases are rare. In certain sectors and occupations, salary supplementation was possible through tips and working overtime before the pandemic, something largely denied by the lockdown. For example, a migrant who worked for a pest control company highlighted how the lockdown led to a decline in gross income:

My basic salary is fixed. Nevertheless, the pandemic affected my work and other income streams, because I was not allowed to visit anybody's home to control pests. It was not allowed. We were still paid our basic salary even though we were not working, but I lost the supplementary income I got from my customers after work and home visits (Interview No. 19).

On the other hand, it would be a mistake to assume that all migrants were treated well by their employers or that all companies followed the directive to pay and feed their employees. For example, we identified cases where migrants were forced to work overtime despite the risks of contracting the virus in the workplace:

We were compelled to work extra hours under the threat of deportation if we refused. Despite this, we remained silent as we had our plans in mind. We discovered that we could change the company we worked for if they treated us poorly. Three of us left the initial company and then recommended that the others do the same (Interview No. 30).

Also, there were numerous cases of employers renegeing on their responsibilities as the pandemic dragged on:

COVID did not affect me in any way initially. After we started working following quarantine, we used to be paid very well, but in April, everything became complicated. The pay we had at times would have been spent before getting another one (Interview No. 15).

COVID-19 did not really have any impact on us here because we got jobs and were paid, but after some time, though the money was not coming, they didn't really specify that it was due to COVID-19 or something else (Interview No. 58).

Most Ghanaian migrants find the food served up in company canteens bland, monotonous, and often unpalatable (Owusu & Crush, 2025). Additionally, none of the catering companies provide Ghanaian migrants with culturally appropriate offerings:

The food they cooked in the company for us was not good at all. The rice they cook for us is not what we know or eat at all. They say it is African, but we don't know what it is and which country's rice it is. We don't have this food in Ghana and when you ask the other countries too, they say it is not from theirs. So we don't know where it is from. The rice is very dry, hard, and difficult to chew. It is like chicken feed (Interview No. 1).

During the pandemic, and especially during lockdown, the migrants were more tolerant of the poor quality of the industrial food on offer:

I was in the company accommodation. Food wasn't an issue. Foods are available everywhere and drinks. Look inside my bag here, there are so many soft drinks for free. You don't have to buy it. I would not say I get all the food I wanted while in the company. The food is not Ghanaian origin. I didn't care. I am not here to eat but to make money (Interview No. 58).

COVID did not affect my job or food while tied to the company. The company fed us three times daily, and you had no say in what was served, and the quality of the food was of less concern since everyone was eating whatever they prepared, unless you decided to buy food from outside. We were not allowed to cook (Interview No. 27).

Before the pandemic, some migrants in the labour camps who worked for smaller companies were paid the standard monthly food allowance prescribed by law. These payments continued in 2020, but the downside was that recipients were responsible for buying their own food, which was more challenging because of their limited ability to shop around. Some companies also switched to paying food allowances rather than feeding their workers as before: “During the COVID period, work was not really booming and so the company gave you money to fend for yourself” (Interview No. 23). Company employees on cash food allowances generally managed by purchasing food from the small convenience stores (or *baqala*) within or adjacent to the labour camps. By contrast, labour migrants who had left company employment and the labour camps to freelance, and use their social networks to find other employment or engage in multiple economic activities, were extremely hard hit by the pandemic.

FRAGILE FREELANCING

The concept of pandemic precarity has been suggested as a lens through which to see how pre-existing economic and social vulnerabilities, including food insecurity, were magnified by COVID-19. Ghanaian migrants in Qatar who had left their sponsor (*kafeel*) to seek alternative work were certainly vulnerable to the vagaries of the labour market before the arrival of COVID-19. But they also valued their independence and autonomy outside the strictures of company rule and the freedom it gave them to purchase, cook, and commensally consume the types of foods with which they were more familiar. Indeed, many said they had left company employment because they were disgusted by the industrial food served in canteens. As one noted:

The company used to feed us three times a day, but the food they gave us wasn't fit for dogs. We just ate because we were hungry. The rice was hard, and sometimes there was no stew or meat. We used to buy shito or make our own stew to add to it, otherwise you couldn't eat it. Some people got stomach problems from the food, but there was nothing you could do (Interview No. 17).

Some in company employ also objected to the racially segregated nature of eating and working:

My brothers here in Qatar support each other, which helps us stay together in difficult times. There were separate kitchens for Asian and African food in the accommodation. This disparity led to disagreements, and we questioned why we were segregated based on continents, even at the workplace. After confronting the supervisors, they resolved the matter by offering anyone who preferred Asian food a coupon for their meals (Interview No. 58).

However, the primary motivation for freelancing was the economic prospect of acquiring a job that paid more than the minimum and was also a better fit with their skills set. Others opted out of company employ and became freelancers because the job they were promised in Qatar was misrepresented to them and came as a shock. A teacher from Ghana explained:

They came to pick us up at dawn with a car and sent us to the field to work. I didn't even know we were going to work. It was a road construction work. So, they gave us a helmet, overall and boots, to do safety induction... I wasn't expecting to come here to be given a shovel, all of a sudden to dig a hole of about 50 metres and working hard while I left my students behind to come here. So, I said to myself what kind of life have I involved myself in. But in all, I was determined to achieve my goals (Interview No. 15).

Before the pandemic, freelancing was regarded by many as a pathway to independence and higher income. But it always carried certain inherent risks, as some respondents pointed out:

I would say Qatar is a good place if you get a good company to work with, but there are some people who come here and think that when they get here, they will get a job, but they realize that it's not as easy as they thought. Some people expect to earn a lot of money as soon as they get here, but after facing challenges for two months, they often realize the reality. Others even end up sleeping outside or being stranded. So, if you have a good company, you'll be fine, but if you're on your own, it can be tough (Interview No. 1).

This kind of vulnerability was significantly amplified during the pandemic, as the labour market freedoms associated with freelancing became an illusion. COVID-19 rapidly redefined their situation as a crisis of vulnerability as layoffs increased and jobs dried up. Work opportunities vanished as mobility was restricted, leaving many unable to pay rent or buy food. Freelancers were now excluded from the COVID-related protections of company employment and left to navigate the pandemic's disruptions on their own. Freelancers who had previously managed to sustain themselves through multiple jobs or side incomes found their finances decimated:

Now that I am a freelancer, I rent my accommodation, pay all bills, including internet and electricity, and feed myself, though I get a food allowance. COVID did not affect me much, though as a freelancer, I lost some jobs which provided me with valuable income (Interview No. 28).

We chose freelancing, but unfortunately for us we had no work for a long time. We were going through a lot; things became very difficult. Where to sleep and how to survive was becoming a problem. Even when I had to go out, I was thinking of what to eat when I returned. I called home for money so I could get an apartment to stay in, which I was given but still struggled with food. I got to a point where I even wanted to go back to Ghana, but I did not have the means. It was a very tough time (Interview No. 17).

The advantages and autonomy of freelancing were predicated on uninterrupted employment and unrestricted physical mobility. Both were suspended in March 2020. In contrast to company employees, freelancers were responsible for all aspects of their subsistence, including food procurement and health care. Food insecurity was often an immediate consequence. One participant explained that his inability to move freely cut off both his income and his ability to buy affordable food:

During the COVID pandemic, we were forced to buy from the baqala close to the accommodations, but the disadvantage is that the prices of the foodstuffs were high. Even if I fall sick today and I do not have money, I may die. You cannot even move far to find cheaper places because of the lockdown, so you are forced to buy from what is nearby (Interview No. 4).

Thus, pandemic precarity for freelancers meant living in near-total absence of institutional or state protection. Rent, utilities, and food costs continued, and even escalated, while income ceased. Respondents recalled borrowing from friends, selling belongings, or cutting down on meals just to survive. The cumulative strain was both material and psychological:

When there was no work, I could not afford to pay for accommodation or food. I was always worried, thinking of what to eat or how to survive the next week. I was not sleeping. You wake up and think of food first before work, but there is no work. Even when we got some jobs after a long time, they were paying late or paying half. It was stressful, and some of my friends even became sick from worrying too much (Interview No. 25).

Several participants emphasized how their diets became monotonous and culturally disconnected. For example:

During COVID, I was not food secure because I could not go to the stores, so my eating pattern and diet changed and became “one-way”; thus, I was always eating the same food. I did not want to risk it at all, especially during the early days of COVID. Sometimes I would cook rice every day, other times only noodles. It was boring, and you miss food from home, but there was no way to get it (Interview No. 3).

Restrictions on movement and social gatherings also disrupted commensality and the exchange of homemade food among friends. The closure of borders also interrupted the informal transfer of familiar foods from Ghana, deepening the sense of cultural disconnection and social isolation:

My family back home prepares any food I want and brings it here. COVID-19 changed the dynamics of food transfer, in any case. I had nobody to bring me the food as there were lockdowns in Qatar and Ghana, as well as the closure of the Ghana airport for about five months. It was a difficult period. I just relied on and ate any food I could get (Interview No. 53).

Some freelancers were sustained by religious organizations or social networks, while others fell heavily into debt. Mutual aid was fragile, with a participant noting that even friends and fellow migrants could not always be trusted to repay loans:

Ghanaians really caused me a lot of problems. I lent money to people thinking they would pay me back, but now 45 to 50 percent of my money is with them, and that's why I have even lost interest in travelling. Everyone was struggling and promising to pay when they get work, but work never came (Interview No. 17).

The shock of pandemic precarity for freelancers is still a major concern. As one respondent observed, “my advice to any Ghanaian will be that do not come to Qatar to be a freelancer if you have not settled already, because it will be complicated and challenging for someone to hire you, and even with the renewal

of ID, it is not cheap. If you are not working, you cannot pay for anything, and you will be in trouble" (Interview No. 53). By the end of the pandemic period, many freelancers had re-evaluated the meaning of autonomy: "Of course, the company visas are the best because in difficult situations you will still have your job, accommodation, and basic salary unlike with a free visa. It is a very big risk" (Interview No. 3). Therefore, the prospect of autonomy and labour market freedom largely collapsed under the weight of the pandemic. Freelancing offered independence in name but delivered intense food insecurity in practice. And for migrants, pandemic precarity exposed the limitations of self-reliance in a Gulf economy in which institutional support and social protection remains tied to sponsorship.

CONCLUSION

This report has shone a spotlight on the plight of a group of Ghanaian migrant workers stranded in Qatar before, during, and after the COVID-19 pandemic in 2020 and 2021. The findings are not necessarily representative of the broader population of Ghanaian migrants in Qatar, nor of the experiences of migrants from the major Asian source countries of India, Nepal, and Bangladesh. However, as the first study of its kind in Qatar, it is worth dwelling on its potential significance for research at the interface between migration, food security, and pandemic precarity.

Our first stated objective was to provide a contextual overview of the course of the pandemic in Qatar and the emergency statecraft of the Qatari government in response. Strategies of involuntary immobility and physical isolation were common globally, but in the Gulf had the opposite effect of that intended. By locking down the labour camps where hundreds of thousands of migrant workers live and eat cheek by jowl, it was inevitable that the virus would run rampant. As seroprevalence has since shown, almost half of the population of Qatar, and upwards of 60-70% of migrant workers in sections of the labour camps, were infected over the course of 2020. Most infections were asymptomatic, which clearly hastened spread. But equally, a potentially disastrous outcome of mass fatalities was averted by the youthfulness and physiological resilience of the migrant population.

In terms of food security, Qatar's emergency statecraft was shaped by the lessons from the 2017 Gulf blockade, which ensured that national food availability and supply chains were maintained throughout the pandemic. At the same time, to ensure that food was not only available but accessible to migrants in the labour camps, emergency statecraft meant that companies would continue to pay their workers and provide meals in the canteens. Thus, a hunger and food security crisis was also avoided. But macro-level food stability did not translate into micro-

level food security for all. Migrants' ability to access adequate and culturally appropriate food was mediated by employment type, and spatial confinement within segregated labour camps. While Qatar's emergency statecraft protected the national food system and the large companies and their employees, it ironically disadvantaged those who had previously opted out of corporate control.

Our second objective was to contribute to the growing literature on the subjective experience of the pandemic by migrant workers in the Gulf by making African migrant experiences more visible. The Ghanaian migrants we interviewed provided compelling insights into the realities of survival during the pandemic. Company-employed workers, particularly those living in labour camps, benefited from state mandates requiring employers to provide accommodation, food, and basic wages even when work was suspended. In contrast, freelancers who operated outside formal employment relationships with large employers were excluded from pandemic relief protections. Many lost jobs, income, housing, and food access almost overnight. Their accounts highlighted the ways in which the pandemic turned the advantages of freelancing, including job satisfaction, earning potential, and ability to cook and consume desirable foods with friends into a liability.

Third, at a conceptual level, our findings add nuance to the understanding of pandemic precarity as a fundamentally spatial and relational condition. Precarity during COVID-19 was not limited to job loss or income decline as it was shaped by how movement, space, and control intersected in the migrant experience. The state's cordoning of labour camps and the mandatory use of the digital tracing system transformed everyday life into a regime of immobility, monitoring, and surveillance. Doha's labour camps became paradoxical spaces in that they amplified the risks of contagion yet shielded migrants from food insecurity. For the freelancers dispersed across Doha, spatial disconnection and involuntary immobility meant exclusion from institutional safety nets. Therefore, pandemic precarity in Qatar involved an inversion of the more common process of intensification of pre-existing vulnerabilities to food insecurity.

This report breaks new ground by investigating the impact of COVID-19 on the food security of migrants stranded in the Gulf during the pandemic. The experiences of the Ghanaians in lockdown Qatar illuminate how pandemic governance, migration regimes, and food security intersect in ways that reproduce vulnerability even within a robust food system that ensures availability but not accessibility for all. The pandemic exposed the limits of Qatar's food security model and emergency statecraft. As global attention shifts towards building resilience against future crises, this audit highlights the everyday challenges of those whose labour sustains the economies of the Gulf yet whose access to food security is far from unconditional.

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Qatar has one of the world's most extreme migration demographics, with over 85% of its 2.5 million residents being non-citizens. These migrant workers are primarily low-wage labourers in the construction, services, and domestic sectors and, although there have been reforms to the *kafāla* (sponsorship) system, many remain tied to specific employers. Others have taken advantage of the changes and opted to work as freelancers for employers other than their original sponsors. While freelancing brings greater autonomy and labour market flexibility, it also has drawbacks. These became particularly evident during the pandemic. When COVID-19 struck, Qatar responded with a stringent containment regime to stop the spread. Borders were sealed and Doha's massive labour camps were locked down. Companies were mandated to keep paying their employees and ensure that they had access to food in the communal canteens. Although these measures prevented large-scale hunger, they also reinforced structural inequalities. Freelancers bore the brunt of economic immobility, job loss, and restricted food access. This policy audit examines these dynamics through the experiences of Ghanaian migrants in Qatar, revealing how emergency statecraft exacerbated vulnerability to infection and food insecurity in a highly resilient state.



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