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The Double-Edged Sword of Health and Safety: COVID-19 and the Policing and Exclusion of Migrant Asian Massage Workers in North America

Elene Lam ¹, Elena Shih ²,*, Katherine Chin ³ and Kate Zen ³

- Butterfly (Asian and Migrant Sex Workers Support Network), Toronto, ON M5S 2T9, Canada; elenelam2020@gmail.com
- Department of American Studies, Brown University, Providence, RI 02912, USA
- ³ Red Canary Song, New York, NY 11354, USA; katherine_chin@alumni.brown.edu (K.C.); katezenjoy@gmail.com (K.Z.)
- * Correspondence: elena_shih@brown.edu



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1. Introduction

In the past two decades, migrant Asian massage workers have been severely targeted by the police and other law enforcement agencies in the U.S. and Canada. The growing attention of local and national law enforcement agencies on "Asian massage parlors" as potential locales of illicit sex work is driven by a widespread moral panic surrounding human trafficking, promoted by anti-sex work organizations, the anti-trafficking rescue industry, religious groups, and politicians (Bernstein 2018; Chang and Kim 2007; Nolan Brown 2020; Shih 2021). These groups conflate sex work, trafficking, and migration, espousing the myth that Asian massage businesses are sites of human trafficking. Although many migrant Asian workers find massage work preferable to other forms of physically and emotionally strenuous labor, such as work in nail salons, restaurants, or domestic settings, and do not provide sexual services, these groups put forth the narrative that many migrant Asian massage workers are not proper laborers of their own right, but human trafficking victims, exploited and forced to do sex work. In response, law enforcement agencies have targeted Asian massage businesses throughout North America, conducting investigations, surveillance, raids, and forced closures. Caught in this moral panic, Asian migrant massage workers are being racially profiled, over policed, harassed, fined, arrested, detained, and deported (Lam 2018a; Lam and Lepp 2019; Lam and Dumaresque 2019; Chang and Kim 2007; Chin et al. 2017; Shih 2021).

Indeed, it is often in the hands of police officers that migrant Asian massage workers suffer the most harm. While anti-trafficking raids claim to save and protect trafficked women from violence and abuse, their effect on Asian massage parlors has been to bring additional violence, abuse, and exploitation to these places of work. In 2017, Song Yang, a migrant Chinese woman working in Flushing, Queens, was chased out of her fourth-floor window to her death during a police raid on the massage business where she worked (Barry and Singer 2018). The circumstances of Song Yang's death drew suspicion, as she had previously filed a complaint of sexual assault against a police officer and subsequently became a target for harassment and threats from members of law enforcement (Grant and Whitford 2017; Clarke 2019). Organizers of Red Canary Song, a sex worker rights group that formed after her death, argue that Song Yang's tragic fall illustrates the severity of the harassment, intimidation, and institutional oppression she faced at the hands of the police—Song Yang would have rather fallen to her death than risk arrest, imprisonment, and potential deportation.

For many migrant workers, police represent the violence of the criminal legal system, not the liberation from traffickers and exploitation espoused by law enforcement. Yet, despite the disruption, injuries, and casualties wreaked on Asian massage workers, local politicians and police forces have expanded their anti-trafficking initiatives in the wake of Song's death, turning to the two pronged approach of: (1) amplifying police surveillance and crackdowns on Asian massage businesses, while (2) offering civilian erroneous and racist trainings on "how to spot human trafficking" in public spaces like local libraries, encouraging public discrimination against massage parlor workers through the spread of disinformation (Shih 2021). Song Yang and the countless other Asian migrant workers who are fined, arrested, deported, or injured in the process are merely treated as "collateral damage" (Dottridge 2007) in the alleged war against human trafficking.

Song Yang's case is just one of a litany of anti-trafficking investigations and arrests that have implicated workers in Asian massage parlors across the United States and Canada in the past decade. This troubling pattern in which initiatives proclaimed to be human trafficking rescue efforts end in the targeting, deportation, and criminalization of the purported victims exemplify the "sexual humanitarian" (Mai 2018) motives of anti-trafficking initiatives by publicly casting Asian massage workers as universally victimized and deserving of rescue, while privately policing, deporting, and in the worst cases, murdering these workers as part of anti-trafficking efforts.

The COVID-19 pandemic has only heightened the policing of colored bodies and exacerbated the physical and economic consequences of anti-trafficking initiatives on Asian

massage workers in North America. At a time of unprecedented attention to public health, essential service workers, and government aid, one might expect greater access to social services for all, especially for particularly vulnerable populations. However, new racial anxieties developed around the COVID-19 pandemic have heightened the targeting of migrant Asian massage workers and entangled with anti-trafficking initiatives to justify greater exclusion from the social welfare regime. Drawing from oral history and survey data collected by two migrant sex worker organizations, this paper seeks to investigate the barriers migrant Asian massage workers face in accessing the urgent health care and social benefits provided by the government during a worldwide pandemic, the devastating effects such barriers wreak on this vulnerable population, and the purpose and rationalization behind the explicit exclusion of the migrant Asian community. The data and narratives collected reveal how the United States' and Canada's responses to the COVID-19 pandemic follow the same discriminatory logic central to anti-trafficking initiatives and have further amplified the marginalization, exclusion, and vulnerability of Asian massage workers in North America.

2. Racial and Economic Disparities in the COVID-19 Public Health Crisis

2.1. Inequality: Our Pre-Existing Condition

The COVID-19 pandemic and its devastating toll on Canada and the United States has illustrated that public health crises do not treat all equally. The virus itself may not be discriminatory, but as Dr. Paula Braveman succinctly put it in an article for UNESCO's Inclusive Policy Lab, "inequality is our pre-existing condition" (Braveman 2020). Not only has the COVID-19 pandemic exposed the consequences of inequality in North America, but the failure to properly manage the COVID-19 crisis has exacerbated racial disparities in the lives that it has taken and the economic burdens it has levied.

Data from the Centers for Disease Control and Prevention (CDC) in the United States have exposed stark disparities in mortality rates among Americans of different racial and ethnic groups. As of 17 March 2021, the CDC has reported that African Americans accounted for 22.4% of age-standardized coronavirus deaths in the United States, even though they represent only 12.7% of the population (CDC 2021). The disparities are particularly drastic in certain states: in the District of Columbia, for example, African Americans account for 68.7% of COVID-19 related deaths, while representing only 44.4% of the total population (CDC 2021). In Alaska, Asian Americans account for 11% of COVID-19 deaths while representing only 6.4% of the population (CDC 2021). The Journal of the American Medical Association has reported that age-adjusted COVID-19 mortality rates among African American individuals in Chicago are over three times higher than White residents (Hooper et al. 2020). Native Americans accounted for 57% of infections in New Mexico, even though they represent only 11% of the population (Kaplan and Davis 2020). These dramatic disparities shown in the data, demonstrating that people of color in the United States are dying from COVID-19 at shockingly higher rates, are strikingly obvious even though reports from NPR and the Washington Post have exposed that minority groups are getting tested at disproportionately low rates. The Washington Post has reported that in Illinois, African Americans make up 38.1% of COVID-19 deaths and 24.2% of confirmed cases—far greater than their share of the population—while they only make up about 13.2% of those tested (Daniels and Morial 2020). The low testing rate for minority populations suggests that the racial disparities in infection and death could be far worse than reported.

Although Canada has not been tracking race or ethnicity as part of its data collection to track COVID-19 cases and mortality rates nationally, a number of analyses have been conducted at the local level, combining census and COVID-19 data. Studies in Canada have shown that in the country's most populous province, Ontario, the rate of COVID-19 infection in the most diverse neighborhoods was three times higher than that in the least diverse neighborhoods, and the rate of hospitalization four times higher (Public Health Ontario 2020). Age-standardized mortality rates in Quebec show similar patterns—neighborhood populations with over 25% designated as visible minorities had COVID-19

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mortality rates that were over three times higher than neighborhoods with the lowest proportions of minority populations (Subedi et al. 2020). Although the number of deaths in British Columbia has been very low compared to other provinces, the same study found mortality rates to be ten times higher in neighborhoods with the highest concentrations of racial minorities (Subedi et al. 2020). It has been reported that in Canada, a one percentage point increase in the share of Black residents in a region is associated with a doubled COVID-19 infection rate (Choi et al. 2020). In Toronto, local data collection efforts studying COVID-19 infection rates from May to July 2020 revealed that racialized populations made up over 80% of COVID-19 cases in the city, even though they represented only slightly more than 50% of the population (Public Health Agency of Canada 2020). Analyses conducted on COVID-19 and census data in Montreal also found strong positive correlations between the percentage of COVID-19 cases and the concentration of Black residents in the neighborhood (Public Health Agency of Canada 2020). These reports reveal the disturbing fact that the COVID-19 pandemic is killing minority populations in North America, while the government serves as a silent accomplice, failing to provide vulnerable populations with the necessary resources to stay alive.

Behind the seemingly innocent veneer of a health care system that is desperately attempting to save American lives but collapsing under the demands of an urgent health crisis is a history of structural racism and inequality that has deliberately created barriers to health care services, affordable housing, financial security, quality education, and job opportunities, the compounded effect of which is now causing minority populations to die at a dreadful rate. Residential segregation has persisted in the United States since explicit zoning ordinances and redlining were official practices in the early to mid-1900s, demarcating neighborhoods along racial lines and thereby limiting people of color from accessing employment opportunities, public spaces, health care facilities, schools, and other public services (Greene et al. 2017). Housing programs that continued to build affordable housing in neighborhoods with pre-existing structural disadvantages further entrenched lack of mobility and access for minority populations (Greene et al. 2017). This persistent residential segregation has thus served to racialize concentrated poverty and lack of access to public health services. African Americans in the United States tend to live further away from hospitals, are more likely to have subpar pharmacies, and tend to wait longer for urgent prescriptions than their White counterparts (Ray 2020). They also tend to live in more densely populated areas and lack healthy food options (Ray 2020). The U.S. Department of Agriculture has reported that for less dense urban areas, census tracts that have higher concentrations of minority populations are more likely to be food deserts (Dutko et al. 2012).

Inequities embedded in the structural determinants of health, including social and economic policies, political governance, and resource distribution persist in Canada as well. Indigenous communities in Canada continue to live with the persistent effects of forced displacement, abuse, violence, and inequitable resource distribution (Public Health Agency of Canada 2020). In Canada, 48% of First Nations households faced food insecurity before the pandemic hit (Ro 2020). The Public Health Agency of Canada's 2019 annual report describes how barriers to accessing post-secondary education, adequate housing, and employment as well as increased risk of food insecurity and exposure to violence among African, Caribbean, and Black Canadians has significant effects on both physical and mental health outcomes in these populations (Public Health Agency of Canada 2019). These barriers, coupled with disparities in access to health insurance, poorer quality of care, and high rates of criminalization and imprisonment, have driven minority populations to suffer from higher health risks and rates of chronic conditions such as diabetes, cardiovascular disease, and asthma that lead to severe responses to COVID-19, while being deprived of the necessary resources to protect themselves from or treat the virus.

Minority populations have also been reported to be disproportionately represented in the "essential workforce" as defined by the government during the COVID-19 pandemic and are thus more likely to have to continue in-person work to ensure the continuity

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of services to the broader population at the risk of their own health and safety. African Americans represent nearly 30% of the bus drivers and nearly 20% of all food service workers, janitors, cashiers, and stockers in the United States (Ray 2020). Farmworkers in the United States tend to be undocumented migrants from Latin America, who face more precarious work conditions, working in fields and living in camps where it can be difficult to ensure physical distancing (Ro 2020). These undocumented migrants are also often isolated from medical facilities, deprived of healthcare benefits, and avoid accessing public health facilities for fear of customs and immigration enforcement (Ro 2020). In Canada, meat processing plants emerged as common outbreak sites, due not only to the physical conditions of the facilities, but also to congregate housing, shared transportation to and from work, and incentives that encouraged workers to continue to work while ill (Public Health Agency of Canada 2020). Forty-one percent of meat processing workers in Canada are racial minorities, compared to 21% of the general workforce (Public Health Agency of Canada 2020). Canadian immigrants are also more disproportionately represented in nursing and residential care staff, another labor sector deemed "essential" by the government and at higher risk for COVID-19 (Public Health Agency of Canada 2020).

Racial minority populations in North America are thus more vulnerable to catching COVID-19 due to their employment, and more likely to suffer severe symptoms due to their lack of access to quality food and public health services. This suffering is not merely incidental; despite the facile attribution of the devastation faced by racial minorities to an apolitical virus, a deeper investigation of the underlying policies and systems of exclusion reveal that the afflictions are a direct consequence of human agency—a result of structural violence, termed by Galtung to define violence that "is built into the structure and shows up as unequal power and consequently as unequal life chances" (Farmer 1996; Galtung 1969; Kaufman 2014). The structural inequalities driven by deliberate processes of exclusion, exploitation, and deprivation of agency have caused the avoidable deaths of thousands of racial minorities and migrants in North America. Culture, poverty, and economic necessity are simply tools used by the state to justify and legitimize this violence. Nor is this violence unique to the COVID-19 pandemic, although it is certainly an extreme case. Much research has been done on how social and political hierarchies wreak violence through affliction, parsed into differences in disease and mortality rates between social groups (Nguyen and Peschard 2003). Policies that compel people of color to work and provide services during the COVID-19 pandemic while producing deleterious health effects and obstacles for those very same communities to access health services reveal the fact that for the state, people of color are merely bodies that may be exploited and expended for the benefit and survival of the core population. The deaths wrought by the COVID-19 pandemic and the underlying policies that manage the crisis reveal the racial economy of life, a concept articulated by Foucault, in which there exists an established population whose lives must be limited, circumscribed, and whose demise is willingly sacrificed in order to promote the lives of those worthy of protection (Foucault 2003; Foucault 2008; Foucault 2009). The racial outcomes witnessed here are not innocent products of an indiscriminate virus, but rather the deliberate product of more sinister forces.

2.2. The Distinct Exclusion of Migrant Asian Massage Workers

Migrant Asian communities, and migrant Asian massage workers in particular, face the obstacles of minority populations listed above as well as distinct vulnerabilities due to their occupation and migration status. Asian massage businesses have been targeted and treated by the state as locales of illicit sex work and potential human trafficking, drawing an increasing amount of surveillance, policing, and raids on these places of work. Sex workers typically operate on the margins of the economy in the United States and Canada due to the criminalization and policing of their work. In the U.S., engaging in prostitution as a buyer or seller is illegal in all 50 states except for select districts in Nevada. In Canada, although the Supreme Court struck down criminal provisions regarding sex work including those regarding communicating, living off avails, and bawdy house offences on the grounds

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that they violated the rights to life, liberty and security of sex workers in the 2012 Bedford case, the conservative government has introduced Bill-36, the Protection of Communities and Exploited Persons Act (PCEPA), that criminalizes the client, any third parties, and sex workers themselves. These criminal laws not only create barriers to the rights, health, safety, and security of sex workers, but are also used to justify raids on Asian massage parlors even when there is no evidence of sexual services. Such raids often lead to arrests, deportation, and fines on other grounds. The following paragraphs discuss some of the effects of this criminalization on access to health care and other government benefits that mainly apply to sex workers and those trading in sexual services but may overlap with those engaged in massage work. Most notably, the treatment of massage parlors as sites of illicit activity have pushed many into the informal economy, limiting access for massage workers to health care and unemployment benefits.

The criminalization of sex work has created significant obstacles for those in the profession to access basic labor rights and social protections, such as unionization, safe working environments, and health care. As a result, sex workers face particularly precarious conditions in the face of a public health crisis. Even prior to the COVID-19 pandemic, studies had shown that criminalization has severely deleterious effects on sex workers' health outcomes, most notably with regard to HIV/STI risk. Studies on sex workers' HIV risk have indicated that the risk of HIV/STI transmission is two to four times amplified among sex workers with experiences related to criminalization or police repression, and that decriminalization could avert 33-46% of HIV infections over a decade (Vanwesenbeeck 2017). Stigma and criminalization form strict barriers to interventions such as condom promotion, HIV/STI prevention and treatment, community empowerment, and prevention against gender-based violence. Moreover, where police wield and exploit the power of the criminal legal system over sex workers, studies have also shown significant rates of police coercion of sex under threats of violence, detention, or arrest; this sexual violence is highly associated with HIV/STI transmission (Decker et al. 2015). Although high rates of HIV and STI infection are the most widely reported differential health outcome among sex workers, the institutionalized discrimination they face in access to health and social services has significant effects across all health outcomes. The Lancet has reported that even the presumption of sex work or extra-marital sex can be enough to reduce women's access to health care (Decker et al. 2015).

In addition to their lack of health care benefits, which leads to greater risks for preexisting conditions that may exacerbate the symptoms of and reactions to COVID-19, sex workers are also excluded from basic income support and unemployment benefits due to the illegal status imposed on their work. The criminalization of sex work has pushed it into the underground economy, without any formal fiscal data or documentation. Many sex workers lack the pay stubs or previous years' tax return forms that are required to file for unemployment benefits (Herrera 2020). As a result, they must either continue working to earn money to support themselves, putting their lives at risk, or lose the primary source of their income. A large proportion of sex workers in North America has been shown to already suffer from economic precarity. An Urban Institute report that examined individuals arrested for commercial sex work in New York City found that 40% of those surveyed reported recently being homeless or in a temporary living situation (Dank et al. 2017). Many are dependent on their work in order to afford shelter and may put themselves at risk of COVID-19 exposure to do so. The effects of structural racism and the criminalization of sex work thus make sex workers particularly vulnerable to losing shelter and developing severe symptoms from COVID-19, while lacking access to the health care services necessary to heal and recover from the virus.

The immigration status of migrant Asian massage workers adds to the barriers they face in seeking public services and health care during the pandemic. Many of these migrant Asian massage workers lack formal legal status in the United States—the study conducted by the Urban Institute found that of all the sex workers they surveyed that were arrested for unlicensed massage in New York City, 37% were undocumented (Dank et al.

2017). Due to recent ICE activity and the passage of the public charge rule, which requires individuals seeking lawful permanent resident status or extensions on their temporary visas to demonstrate that they have not received public benefits, many undocumented immigrants have voiced fear to seek care despite the dangerous and severe symptoms COVID-19 may bear (Jordan 2020; Khalid and Moore 2020).

The racialized rhetoric that government officials have employed in speaking about the COVID-19 pandemic has further exacerbated the precarity that migrant Asian massage workers face during this period of extreme insecurity. President Trump has insisted on referring to COVID-19 as the "Chinese virus," despite the fact that the United States has led the world in the number of confirmed cases since March 26, 2020 (Taylor 2021). Senator John Cornyn (R-TX) has gone further to say that "China is to blame" for the virus, "because [of] the culture where people eat bats and snakes and dogs and things like that" (Shen-Berro 2020). This rhetoric perpetuates the age-old narrative of the invasive, disease-bearing Chinese migrant that local governments and public health officials have used to disparage and police Chinatowns since the 1800s (Shah 2001; Lee 2003; Chen et al. 2020). With government officials peddling these narratives in the national media, it is no surprise that businesses, including restaurants and spas, in Chinese enclaves across the country have suffered the most in the face of the COVID-19 pandemic. Even before New York City had a single coronavirus case, newspapers such as the Guardian and the Financial Times reported drastic financial losses in Chinatown economic activity. Chinatown restaurants reported having to lay off 40% of their staff as early as mid-February (Aratani 2020). Asian massage parlors suffered a similar fate, as their work requires skin to skin contact. By attaching the virus to a culture, such rhetoric has caused a disproportionate burden to fall on the shoulders of Asian individuals in North America. In addition to illustrating a distinct binary between the dirty, disease-ridden migrant and the clean, healthy, and pure White American, the narrative serves to administer blame, casting Asian migrants as the scapegoat for the COVID-19 crisis in North America. Asian and migrant workers in all industries have reported experiencing pervasive racism resulting from myths promoted about COVID-19 as an "Asian and Chinese disease". Anti-Asian racist incidents have been intensified by this scapegoating, as well as gender inequality, whorephobia and xenophobia. Over 3800 incidents of anti-Asian violence have been reported in the past year, according to Stop AAPI Hate (Ho 2021). Most recently, eight people, six of whom were Asian women, were murdered on 16 March 2021 in a shooting spree in Atlanta that targeted Asian spas. The shooter, Robert Aaron Long, reportedly told police officers that the spas he targeted represented a "temptation he wanted to eliminate", alluding to potential sexual services and a specific, fetishized whorephobia (Solis 2021). The migrant Asian population has become the enemy of America's public health, a pest that must be controlled and managed, rather than part of the citizen populace as a member of the state who deserves safety and protection.

Such logics mirror that of anti-trafficking campaigns—in both cases, migrant Asian bodies are cast as scourges, parasites on the health, morality, and economy of the broader population. The policy conclusions are thus that these bodies must be surveilled, investigated, controlled, and avoided where possible. Rather than being politically worthy of life, health, and protection, migrant Asian sex and massage workers are, at best, "collateral damage" (Dottridge 2007) in the war against vice and disease, and at worst, public enemies and contagions whose behaviors and bodies must be corrected, removed, or destroyed. It is, therefore, unsurprising that both health and safety campaigns, in the anti-trafficking movement and in the battle against COVID-19, have had disastrous consequences on migrant Asian massage workers in North America.

3. Methods

This paper is based on preliminary data collected by two migrant Asian sex worker organizations: Butterfly (Asian and Migrant Sex Workers Support Network) in Toronto, Canada, and Red Canary Song in Flushing, NY, USA. Butterfly was founded in 2013 by

sex workers, activists, social workers, legal and health professionals. It provides support, leadership capacity-building, and rights advocacy for Asian and migrant workers in massage parlors and the sex industry in Canada. Butterfly asserts that, regardless of their immigration status, Asian and migrant sex workers are entitled to respect and human rights. Butterfly has built a strong and trusting relationship with massage parlor and sex industry workers. During the COVID-19 pandemic, Butterfly continued supporting and organizing with the community. In the wake of the COVID-19 crisis, Butterfly has increased their support and work for the migrant Asian massage worker community.

In response to the COVID-19 crisis, Butterfly translated relevant policy and health information for migrant sex workers. In just the first two weeks of the shutdown in Toronto due to the COVID-19 pandemic, Butterfly received more than 500 calls and text messages from migrant sex workers expressing panic and worry, particularly about their ability to work, receive income, and access basic information concerning COVID-19 and government policies (Lam 2020a). Witnessing the broad effect the pandemic had on this community, Butterfly conducted a survey with 106 respondents to investigate the impact of COVID-19 on the community and to inform Butterfly's response and activism (Lam 2020a). The survey questions were developed in consultation with steering committee members. The study's participants were recruited through social media, text, and phone contacts, as well as by word of mouth through Butterfly's network. Most participants completed the survey on their own. For those who were unable to do so or had difficulties accessing the internet or the necessary technology, the surveys were completed by interviewers, typically Butterfly outreach workers (Lam 2020a).

In New York, the research builds off an oral history project conducted by Shih and Chin, and Zen's work as the former co-director and outreach worker for Red Canary Song, a grassroots collective of Asian American and Asian migrant sex workers and allies, supporting the organizing of massage parlor workers in New York City. Red Canary Song creates peer-led and accessible resources for people who are trading sexual services for income or survival needs. They also promote safety, health, pride, and mutual care, while fighting stigma, isolation, and systemic violence. Throughout the COVID-19 pandemic, Red Canary Song's outreach team has supported migrant massage and sex workers in Flushing, NY with cash assistance and provisions delivery via mutual aid efforts to workers. Red Canary Song equally advocates for policy changes to mitigate the policing of migrant massage workers. The oral history project began in Fall 2020 following a persistent feeling that migrant massage workers felt their experiences were too often collapsed into their experiences with policing and/or sex trafficking, and sought venues to share the more complex narratives of their lives. While new data collection for the oral history project has paused during the pandemic, this research draws from the organization's shift from focusing on rights advocacy to mutual aid since April 2020. Since massage parlors were forced to shut down following citywide mandates, Red Canary Song has conducted monthly outreach efforts to deliver groceries and cash aid to migrant Asian massage workers in Flushing, New York. These outreach efforts have served as touchpoints to hear about general concerns from the massage workers in an informal setting built upon trust and mutual aid.

4. Results and Discussion

4.1. The Immediate Impacts of COVID-19

4.1.1. Flushing, NY

Migrant massage workers first experienced the impacts of COVID-19 in the last weeks of January 2020, when business dropped drastically due to widespread xenophobic fears that the virus was concentrated in Chinese diasporic communities. In these early weeks, massage workers reported seeing about one client a day on a good day, and were struggling to live off earnings of USD 20–30 a day. By 20 March 2020, when all non-essential businesses were mandated to close, many massage workers had already stopped working due to growing fears of personal safety as they lack access to primary

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care physicians, cleaning supplies, medicine, and personal protective gear. Moreover, due to the informal nature of their work arrangements, many migrant massage workers lacked the necessary documentation to access unemployment benefits and other social welfare services. Operating on both the social and economic margins of society, migrant Asian massage workers thus faced some of the most severe immediate impacts of the COVID-19 crisis, both in terms of material income and health and safety. Xenophobic attitudes and rhetoric drove vital business away and lack of access to health care and supplies prevented massage workers from continuing to work in a safe manner. When their work was deemed non-essential and they were prevented from accessing their primary source of income, migrant Asian massage workers were denied the economic relief offered to other members of the workforce.

Because their personal resource networks are primarily contained to Flushing, the migrant Asian massage workers interviewed are limited to grocery stores and pharmacies in the area for access to food, personal protective equipment, medication, and other important supplies. After several of these large grocery stores closed on 1 April 2020, most low wage workers in Flushing were left with limited options to buy fresh food. Many reported witnessing price gouging for essential goods, yet were unable to travel outside of this dense immigrant enclave to seek lower prices. Already faced with depressed incomes, migrant Asian massage workers' economic vulnerability was further exacerbated by supermarket chains and others seeking to profit off of the scarce supply of resources.

Many migrant Asian massage workers in Red Canary Song's network share bedrooms in apartments that are subleased and divided in order to be affordable. Living in these close living situations, many are unable to follow social distancing protocols when they live with others who are essential workers. Despite eviction moratoriums, the massage workers stated that their subleasing arrangements meant that rent strikes were not a feasible option. Forced to continue to pay rent in order to maintain shelter and unable to access unemployment benefits, the massage workers were forced into a difficult position: either give up shelter or continue working and risk exposure to a deadly virus.

The migrant Asian massage workers interviewed by Red Canary Song reveal that they were particularly vulnerable to the devastating effects of the COVID-19 pandemic due to systemic barriers enforced on those working on the margins of the economy. However, the xenophobic rhetoric and attitudes surrounding COVID-19 as an "Asian virus" exacerbated their marginality and prevented them from accessing individual earnings and other potential sources of aid and income. Such scapegoating, promulgated at the highest levels of the U.S. government, justify these exclusions by sending the signal that Asian communities, and migrant Asian massage workers in particular, are enemies to the American public rather than an important part of it that is worthy of economic and social support and protection.

4.1.2. Toronto, CA

Similarly, in Canada, emergency orders shut down workplaces, including Asian massage parlors. While some migrant Asian massage workers had no choice but to continue to work for lack of other financial options and resources, many workplaces were closed and income and clients were lost as a result. More than 80% (n = 83) of respondents expressed that they were not able to pay their rent and personal expenses. Over 40% of respondents stated that they were not able to access government support and relief, and that they were being left out of basic social protections and benefits; over 30% (n = 31) stated that they were not eligible due to undocumented work or immigration status. The criminalization and over-policing of many workplaces have also increased barriers for migrant sex workers to access financial, health, and social support during the COVID-19 pandemic. Those who are undocumented or have a precarious immigration status expressed worries that their information would be shared with Canadian Border Services. Since the Protection of Communities and Exploited Persons Act prohibits working in sex work-related industry, migrant Asian sex workers fear being arrested, detained and

deported when contacting government institutions and often avoid doing so (Lam and Fudge 2020).

Of the respondents who were able to benefit from government assistance, most reported that their current social assistance only amounted to USD 700 to 800 per month, which is not enough to cover their living costs. Many migrant Asian workers are forced to work part-time in massage businesses or in the sex industry to supplement their income; an avenue which they are now unable to access because COVID-19 measures have shut down many of these places of businesses (Lam 2020a). Some Asian migrant sex workers have to take the risk and continue to work to pay for rent and food. Either way, the various levels of exclusion migrant Asian sex workers face across multiple axes of sex, race, immigration, and labor have culminated to make them even more vulnerable during the COVID-19 pandemic (Lam 2020b). Most are unable to benefit from basic government protections, and actually face harsher consequences from state policies such as discriminatory labor and immigration laws during this time of emergency than is the case normally. The government has made social protections and benefits more readily available for broad swaths of the population while simultaneously producing greater barriers to access and harsher restrictions than normal on migrant Asian massage workers during a public health emergency. This distinction illustrates the state's choices on who deserves to live and thrive. It is through these measures that the government actively manages life, and how one can see what communities it deems less worthy, even sacrificial.

4.2. Health, Housing, and Social Impacts

Throughout North America, "COVID-19 has blatantly exposed the cracks in the social system" (Lam 2020b). Across survey data and outreach with both Butterfly and Red Canary Song, Asian migrant workers reported feeling excluded from accessing information about the virus due to language barriers. Many of them are not able to access information about the health consequences surrounding COVID-19 and the accompanying government policies. Many respondents expressed concerns that they were not able to access health services, testing and supplies. These fears are not unfounded. Migrant workers are often excluded from governments' public health responses and from accessing basic health care (Abji et al. 2020; Migrant Rights Network 2020). Many fear contacting agencies for social services because they are worried about discrimination and surveillance, particularly from anti-trafficking initiatives. This has increased the marginalization and isolation of Asian migrant workers in a time of great need (Lam 2020a). In NYC, President Trump's public charge rule further generated a sense of panic from migrant workers who believed that a positive COVID-19 diagnosis, or application for unemployment benefits, would label them "burdens" of the state and could limit their eligibility for naturalization and/or future immigration sponsorship for relatives.

In addition to not being able to access government support, sex workers continue to be targeted in the name of public safety. Due to language barriers, marginalization and confusing information from the government, migrant Asian sex workers have difficulties accessing information about COVID-19 and government policies. Many of them are worried that they may not be able to access health services, testing and supplies. Some of the workers live in their workplace, and the forced closure of massage businesses also means the loss of their housing. Many others struggle to find a place to live due to their financial situation and may have to stay with their clients, move to other cities, or stay with friends. Most do not find that shelters helpful because of language barriers, bullying, and the overcrowding of the shelter system (Lam 2020a).

4.3. COVID-19 and Human Trafficking Policing

In the U.S. and Canada, provincial and municipal governments have declared states of emergency which allow them to increase surveillance and policing. Police and law enforcement are given extraordinary new powers during such periods, including the ability to charge and fine people suspected of violating emergency orders, and imposing regulations

on social distancing and ID requirements. One massage parlor worker respondent in the Butterfly survey reported that she received 5 tickets for living at her workplace, which she was doing to distance herself from her parents when she found out that she had COVID-19 symptoms (Lam et al. 2020).

4.3.1. Flushing, NY

The challenges presented by COVID-19 conflate existing struggles migrant massage workers have faced as the subjects of state violence and the anti-trafficking movement. Fears of massage parlors functioning as fronts for the indoor sex industry have driven law enforcement to initiate a new wave of enforcement against massage parlors in recent years, using licensure laws as a proxy to commit raids and investigate massage workers even when there is no evidence of prostitution. Pursuant to NY Ed. Law 6512, practicing as a massage therapist without a license is a class "E" felony, punishable by up to four years in state prison. Such a conviction can have especially severe consequences for those who are in a precarious immigration status. In the past several years, as real estate development efforts have ramped up in Flushing, local council members, developers, and the Flushing Chamber of Commercial Business Improvement District have collaborated with the NYPD to "clean up the streets" in the neighborhood, seeking to shut down massage parlors in the area as sites of "immoral and illegal activity". Such efforts have already resulted in the mass surveillance and displacement of migrant Asian massage workers. The total number of arrests of Asian-identified people charged with both unlicensed massage and prostitution in New York City increased by 2700 percent between 2012 and 2016, according to a study by the Urban Institute (Abello 2020; Dank et al. 2017). Non-citizen Asian migrant women made up 87 percent of the arrests for unlicensed massage (Abello 2020; Dank et al. 2017).

The increased policing of licensure is coupled with high barriers to obtaining licenses, especially for immigrant applicants who have limited English proficiency and are unfamiliar with navigating the New York State bureaucracy. Migrant Asian massage workers in Red Canary Song's network have reported extreme difficulties obtaining licenses, including being charged exorbitant fees by massage training programs and other middlemen. Red Canary Song has also heard cases of fraudulent licensing enterprises hoping to capitalize on the anxiety of the pandemic to sell fake massage licenses to massage workers seeking to comply with ever changing license requirements. Equally, other labor market intermediaries are seeking to recruit Flushing based massage workers to other states, preying upon the economic vulnerability of Flushing workers during the pandemic. Each of these new forms of predation under COVID-19 are facilitated by the anti-trafficking licensure regime that has aggressively sought to police and eradicate Asian massage work (Shih 2021).

These policies, introduced and pursued by national anti-trafficking organizations like the Polaris Project, have caused the deportation and arrest of numerous migrant Asian massage workers, many of whom do not provide sexual services. Those who are able have turned to seeking work in other cities and other low wage service sector industries. Although strict licensure requirements are heralded as a way to ensure the "health and safety" of the work being done, in this context, such policies have been used to significantly increase the policing, arrest, and deportation of migrant Asian workers. According to the Urban Institute's study, the vast majority of those charged with unlicensed massage charges are not U.S. citizens (Dank et al. 2017). Rather than improve health and safety, this licensing regime has endangered migrant Asian massage workers, and exacerbated their vulnerability in the face of law enforcement as well as the public health threat of COVID-19. It is clear from the rhetoric surrounding enforcement of licensing requirements and the effects of this regime that migrant Asian massage workers are perceived as an immoral scourge on the community, one that must be eliminated through policing and raids for the benefit of the neighborhood. Such logics mirror and amplify broader national claims that ethnic Asian bodies are responsible for the COVID-19 pandemic wreaking havoc on the country, as disease-ridden bodies that must be disposed of for the sake of the greater national population. Enforcement of licensing requirements serve simply as another tool in

the arsenal of a state that seeks to control and isolate a problematic population depicted as a threat to public health and safety.

4.3.2. Toronto, CA

In Toronto, a municipal ordinance defining the categories of "body rub parlours" and "holistic health centers" has been in effect as early as the late 90's to distinguish "professional massage" from "body rubs". This ordinance introduced body rub license brokers, which include a number of Chinese-run licensing entities. Notably, this licensing opportunity was used not just by massage workers but by immigrant doctors, healers, and acupuncturists who were trained in Asia but found that their credentials were not accepted by the North American system upon arrival in Canada. The devaluation of foreign credentials is not limited to massage licenses—it is a broader structural issue well documented in research on immigrant populations in Canada (Anisef and Kilbride 2003; Segal and Mayadas 2005). Canadian immigration policy includes certain provisions on education and skills that place lower value on certain credentials, creating a barrier to skilled employment for newly arrived immigrants (Challinor 2011). A 2008 study found that 42% of immigrants aged 25 to 54 held higher educational qualifications than their jobs required, compared to 28% of native-born Canadians (Challinor 2011). Toronto's more recent revitalization of the municipal body ordinance in light of the trafficking panic in the past few years sought to ban licenses from five Professional Health Associations which are mainly run by Chinese owners. Toronto Bylaws 545–177(I) and 545–343 directly undermine workers' safety by forbidding owners and workers (with certain exceptions) from locking their doors or even installing a locking device of any kind to individual rooms and cubicles. Bylaw 545–343 states that no one may perform a body rub or provide any other service in a room with a door, or other means of access, that's equipped with a locking device (Butterfly 2019).

Since 2013, the City of Toronto has increased investigations and prosecutions against massage parlors (which are licensed as "holistic centers") in Toronto. These increased interactions with law enforcement officers have resulted in increased violence against massage parlor workers. Butterfly recently published the results of a survey that found that "more than one-third (34.4%) of Asian massage workers in Toronto reported that they had been abused or harassed by law enforcement officers" (Lam 2018b). The massage workers reported that they were being verbally, physically and sexually abused. Some workers were asked to take off their clothing to show their underwear. Moreover, half of the respondents had been charged and issued tickets for breaching municipal bylaws, e.g., locking their door, failing to display their license, or and failing to issue a receipt for services (Lam 2018b).

Many of these bylaws restrict activities that sex workers take to maintain their safety. For instance, one bylaw states that doors may never be locked, which deprives workers of their ability to maintain safety during sessions when front desk staff may not always be available. An additional provision requires that "Everyone present in the workplace must have a license and each workers license must be visibly displayed (Toronto Municipal Code, Chapter 545)". This requirement to display a business license with full name and address infringes on workers' rights to privacy and compromises their safety, especially considering the violence some face at their workplace. Some of the massage workers whom Butterfly surveyed stated that when there were only one or two practitioners working, they would lock the door to screen the clients with the intention of avoiding theft, robbery or assault. Moreover, reports have found that inspectors have launched invasive charges citing these bylaws. For example, a worker reported that her Chinese friend was charged against this license display requirement when she was merely visiting her, classifying the mere association with migrant massage workers as a crime and diminishing the ability to build community and organize as a workforce (Lam 2018b).

A separate rule requires that holistic practitioners "dress in a professional manner". Some practitioners have reported that they were sexually assaulted by bylaw or police

officers due to this rule, including being asked to remove their robes or pull up their dresses to show their clothing and undergarments. Two workers indicated that the officers took pictures of them in this state. The turn to massage work ordinances via building code violations, public health violations, and massage licenses is merely a new method to police and exclude migrant Asian massage workers, and among these auxiliary interests COVID-19 emerges as one more justification of policing errant and diseased bodies.

4.4. Racialized Paradoxes of Health and Safety

Workers started to respond to COVID-19 in January 2020 before the U.S. and Canadian governments enacted their formal responses to the virus in the middle of May. Due to their isolation, many migrant Asian massage workers still have strong ties with their home countries, often receiving news and information about the state of the pandemic in Asia as well as in North America from social media. Due to the reports they received about the virus from Asia, many started enacting protective measures, such as wearing masks, cleaning their workplace, and self-isolating after travel, well in advance of guidance from public health agencies in the U.S. and Canada. They also shared the information they received to their network through social media. However, in the early weeks of the global pandemic, these protective measures were seen as a problem and a sign of disease, particularly because mask-wearing was not perceived as necessary or useful in North America at that time.

Many workers voiced concerns about racism in and outside of the workplace, due to COVID-19 being heralded as an Asian and Chinese disease. They reported being harassed and bullied when they took protective measures, not only in their workplace but also when in public spaces. It was difficult for workers to take these protective measures, particularly before mask wearing was recognized by the government as a means of prevention for COVID-19. Some workers were forced to not wear masks, and it was difficult to request that clients wear masks or take other protective measures.

Both in Canada and in the U.S., provincial and municipal governments have declared states of emergency which allow them to impose extraordinary new powers for police and law enforcement to charge and fine people who are suspected of violating emergency orders. For example, the government in Ontario has imposed regulations on social distancing and requiring IDs. Increased policing and law enforcement create new forms of distress, pain, and hardship to marginalized communities, such as racialized, homeless and street-involved people, drug users, migrants, and massage and sex workers, who have a long history of being surveilled, racially profiled, carded, criminalized, and harassed by law enforcement.

Rather than ensuring their safety, each of these measures that have been enacted to "regulate" Asian massage work—alongside the ongoing stigmatization that such work is "illicit" by nature. This exacerbates the challenges massage workers will face as they emerge from this crisis.

4.5. The Public Charge: Exclusion from Emergency Relief and Social Welfare

Although both the U.S. and Canadian governments have provided a lot of economic relief for individuals and businesses, nearly all Asian massage workers are excluded from these protections. Over 40% of surveyed Butterfly workers reported that they could not access any government financial relief due to their precarious immigration status. The vast majority of respondents who are citizens or legal permanent residents reported fear of being arrested, detained or deported due to the criminalization of their work.

Sex workers have historically been and are currently targeted by the public and law enforcement. Many massage and sex workers legitimately fear profiling and discrimination, and therefore avoid contact with government institutions. Even though some may be eligible to apply for government funding, they may avoid doing so for fear of interacting with government institutions, or because they do not feel safe providing government with banking and employment information due to historic discrimination. The criminalization

of sex work is a huge barrier for migrant sex workers to apply for government financial relief; many workers are hesitant to come into contact with government institutions and risk a criminal or immigration investigation.

In the U.S., under Trump's authority, the Department of Homeland Security's new Public Charge rule, unveiled at the end of February, subjects immigrants to scrutiny for accessing social welfare benefits. Under this rule, immigrants who rely on food stamps, for instance, may be prevented from adjusting their immigration status, or sponsoring family members to immigrate to the U.S. For migrant sex and massage workers, this new rule means that even those who are eligible for government assistance now self-select out of applying for unemployment and other forms of temporary relief, for fear that accepting help will jeopardize their immigration status. Several workers in NYC shared with Red Canary Song that they feared applying for unemployment due to circulating rumors around Trump's recent public charge laws that threaten deportation on the grounds that immigrants are perceived as a burden to the U.S. social safety net. Still other workers do not apply for the funding because they do not feel safe to provide government with banking and employment information due to the discrimination and criminalization of sex work. The extreme financial precarity has meant that some workers have no choice but to work so that they can pay for their food and rent. It is very clear how systematic oppression is reflected in this; certain populations have much greater access to government resources during the pandemic.

The fears generated by the Public Charge rule have also led immigrant workers to refrain from reaching out for testing and medical care when they need it, due to the notion that seeking medical services may negatively impact their pathway to legal residency. These widely held fears surrounding seeking economic and medical assistance demonstrate that public efforts to provide aid are not sufficiently combatting the message of the Public Charge rule: that immigrants are not welcome to access federal benefits in the United States.

The ongoing pressures on massage owners and workers alike has meant that massage owners are less likely to verify employment for workers who are applying for unemployment insurance. Migrant massage workers who are unemployed receive no government assistance, and those who have filed taxes have no employers willing to verify their employment.

5. Conclusions

Increased policing, law enforcement, and government control create new forms of distress, pain, and hardship for marginalized communities, such as racialized, homeless and street-involved people, drug users, migrants and sex workers. The long history of surveillance, racial profiling, carding, criminalization, and harassment of migrant Asian massage workers by law enforcement has been exacerbated by COVID-19 measures. During the COVID-19 pandemic, the government has created the illusion that the increase of state control, state power and policing is necessary to control the spread of COVID-19. Such measures are framed similarly to anti-trafficking campaigns, identifying certain behaviors and bodies as problematic for society and thus requiring of surveillance, control, and regulation. In both cases, it is the most marginalized communities that are deemed dangerous, immoral, and unhygienic and end up bearing the brunt of state force. Migrant Asian massage workers, as revealed through our survey and ethnographic data, have suffered immensely from oppressive pre-existing and COVID-19-specific policies that deny them access to government benefits, expose them to health risks, and bring violence into their workplace and everyday lives through surveillance and police raids. The effects of these government policies reveal the underlying fact that the state does not treat all as equally worthy of health, protection, and life, even in the midst of a pandemic that it is actively trying to manage. It is clear that migrant Asian sex workers in North America cannot rely on the government for protection. However, one can find hope in the extensive experience sex workers have in handling pandemics, including HIV/AIDS and SARS. Sex

workers have a deep history of mutual aid in their communities, and many community organizers have used sex worker mutual aid projects as models to develop their own responses to COVID-19. Instead of waiting for an inimical government to save them, workers have already developed their own strategies to protect themselves. An outpouring of mutual aid support—through cash aid, housing support, and free grocery delivery—has sustained migrant Asian massage and sex workers throughout the pandemic.

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