



## Precarious employment and health: A qualitative study in Venezuelan immigrant population in Colombia

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### ARTICLE INFO

#### Keywords:

Immigrants  
Working conditions  
Precarious employment  
Social protection  
Health (source: MeSH)

### ABSTRACT

**Background:** Employment and working conditions are considered as an element that impacts on health inequalities, especially among vulnerable groups such as the immigrant population. This study aims to describe the characteristics of precarious employment in the Venezuelan immigrant population in Medellín (Colombia) according to its theoretical model and its relationship with the perception of their physical, mental, and psychosocial health.

**Methods:** A qualitative study was conducted with a focused ethnography perspective. 31 people with Venezuelan origin and work experience were interviewed in the city of Medellín and its metropolitan area and 12 key informants from different formal and informal social organizations that work with the immigrant population. A narrative content analysis was carried out manually and by using the Atlas.Ti 8.0 software. The principles of analytical induction were applied to carry out a thematic analysis of the main categories defined in the precarious employment framework.

**Results:** The following characteristics of precarious employment were found: instability in employment conditions, work in the informal or submerged economy, limited empowerment, absence of social benefits, high vulnerability, low income, and a limited capacity for exercising labor rights. This situation affects mental health conditions, access to health services, and the presence of risks due to the work they perform.

**Conclusions:** The Venezuelan working population in Medellín is found in a precarious employment situation. Inclusive social strategies and policies that take into account the reality of this population are required.

### Introduction

In recent decades, there have been important social and population shifts due to the movement of people between countries (Segal, 2019). Some countries, traditionally senders of migrants, are becoming receivers of people of productive age. Over the last few years in Latin America, Chile, for example, has received working immigrants mainly from Haiti, Colombia, Peru, Bolivia, and Argentina (Cano and Sofía, 2009). The Venezuelan population is currently facing upheavals in its political and social order that have caused a massive exodus (Crašto and Álvarez, 2017). Colombia faces a change in its population structure due to the arrival of families and individuals who find opportunities for wellbeing in the country in contrast with their native country (Fernández-Nino and Bojorquez-Chapela, 2018). Even though there are variations in statistics available, over one and a half million

Venezuelans are reported to be in Colombia—the highest number of expatriate Venezuelans in the world (Fernández-Nino and Bojorquez-Chapela, 2018).

In absorbing immigrant working populations into host countries, many considerations are highlighted regarding the migratory process and integration into the labor market. An important element under consideration is that immigrants are more likely than local workers to feel compelled to accept jobs with poor working conditions (Porthé et al., 2007). Furthermore, segmentation of the labor market is evident in the construction, hospitality, agriculture, and housekeeping sectors (Porthé et al., 2007; Benach et al., 2010). It cannot be ruled out that they often work in the informal economy as a strategy to insert themselves into the labor market (Kleidermacher, 2015). The informal economy comprises employment in the informal sector and informal employment. In the first case, the informal sector consists of a subset of unincorporated

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<https://doi.org/10.1016/j.jmh.2020.100009>

Received 21 October 2020; Received in revised form 25 November 2020; Accepted 25 November 2020

Available online 30 November 2020

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enterprises that are not formally registered with national government authorities. By contrast, informal employment is an employment-based concept defined in terms of the employment relationship and protections associated with the worker's job (Bonnet et al., 2019).

With regard to employment conditions, an analysis of transformations in the job market is mandatory, as it has caused greater flexibility of hiring conditions and fewer employment benefits. This translates into greater precariousness (Tompa et al., 2007), which can be extreme in vulnerable groups—immigrant populations, women, and those with irregular migratory status (Porthe et al., 2009, 2010)—and in specific activities and sectors of the economy. Precarious employment emerges as a social determinant with impact on health inequalities (Benach et al., 2014) as it has effects on physical, mental, and psychosocial health (Quinlan, 2013; Vives et al., 2013).

Precarious employment as a concept has its roots in numerous sociological texts, even if with different shades in its definition (Porthe et al., 2009; Kreshpaj et al., 2020). However, Marcelo Amable developed research on the Spanish salaried population that resulted in a complex model for studying job precariousness (Amable et al., 2001; Amable, 2006). The model analyzes the following characteristics: job instability, empowerment, vulnerability, wage level, social benefits, and capacity to exercise workers' rights, and was applied to the immigrant working population in Spain (Porthe et al., 2009, 2010).

Accordingly, this study aims to describe the characteristics of job precariousness in the Venezuelan immigrant population in Medellín (Colombia) using the theoretical model defined above and previously defined, and its relation to perceptions of physical, mental, and psychosocial health.

## Methods

### Ethical compliance

This study was granted approval by the Committee of Bioethics of Research at the School of Dentistry at the Universidad de Antioquia (affiliation of the head researcher) under Act 3 of 2018. All interviewees gave their informed consent to participate in the research and for their interviews to be recorded. This is considered no-risk research, as it does not intervene in the social or health situation of the participants. The writing took into consideration the standards for qualitative reports (O'Brien et al., 2014).

### Approach and design

This paper is part of an ongoing project: "A qualitative approach for studying the employment, working and health conditions of the Venezuelan immigrant population in Medellín (Colombia)". A qualitative, interpretative, and emergent study was conducted. The researchers opted for a focused ethnography approach, described as an ethnography of small groups and targeted to a specific topic (Morse 2003). In this case, we present a thematic analysis according to the theoretical model of job precariousness and its adaptations for other studies in the immigrant population (Amable et al., 2001; Amable, 2006; Porthe et al., 2009, 2010). Table 1 presents the main categories and concept definitions.

### Participants

- Key informants in organizations: 12 participants were identified who are members of 11 public, private, and community organizations (formal and informal) that promote better conditions for the Venezuelan immigrant population (Table 2). In the case of one organization (National Labor School), an interview with two participants was possible. The principal researcher (AAAS) contacted these organizations through web pages, Facebook, and other social networks, and by referrals.

- Venezuelan population: 31 participants over age 18, born in Venezuela and with minimal work experience in Colombia, residing in Medellín and the metropolitan area, and without restrictions in their migratory status were interviewed for the study. For the selection of participants, theoretical and/or intentional sampling strategies were used; some were recruited through the collaboration of key actors in organizations and others by snowball sampling through referral (Vázquez et al., 2011). The final number of participants was determined by saturation, that is, upon verifying that no new data for the objectives of the study were emerging. This process was verified by all members of the research team (Saunders et al., 2018). The sociodemographic characteristics of the Venezuelan population interviewed are summarized in Table 3.

### Techniques and instruments of data collection

Fieldwork took place between March and June 2018. Semi-structured interviews of 30–70 min were conducted. A guide of topics was considered and questions were adapted from previous studies (Agudelo-Suarez et al., 2009a) and in accordance with the type of participant (organizational key informant or Venezuelan immigrant). The questions enquired about topics related to the characteristics of the migratory process and work history (Venezuelan and Colombian), current work and employment conditions, relationships with colleagues and superiors, perceptions of physical, mental, and psychosocial conditions, occupational hazards, access to health services, and expectations and plans for the future. Interviews were carried out by three members of the research team (AAAS, YV, and WR). Fieldwork was complemented with basic sociodemographic data in the case of the Venezuelan participants in the study (Table 3).

The interviews were audiotaped in MP3 format and transcribed initially in Spanish by a transcriber hired by the research group. Later, a specialized translator in academic editing carried out the translation of the interviews from Spanish to English, ensuring that the meaning was preserved. The final transcription was reviewed by the researchers to guarantee data quality.

### Data analysis

All members of the research team took part in the initial review of the interviews, and data were segmented manually, identifying fragments and meanings to make a narrative analysis of the content (Vázquez et al., 2011). Supported by Atlas.Ti 8.1, a set of codes and categories was developed. This process was led by the main researcher and reviewed by the rest of the research team. The process of analytic induction allowed verification of the previous hypothesis against data from the interviews and the determination of negative and extreme cases, starting from a proposed theme analysis (Amable et al., 2001; Amable, 2006; Porthe et al., 2009, 2010). Finally, triangulation was used as a strategy to ensure consistency and quality of data (process led by the main researcher and supported by the rest of members of the research team). Extracts of the discourses are presented in the text labeled according to data source (Int: interviewee, number, and sex; KI: key informant, number, and sex).

## Results

Findings are presented in accordance with the categories designated in the employment precariousness model and the perceptions of the participants. Additionally, they reflect the perception of the state of health and its relationship with work precariousness.

### Job instability

According to the migratory process, the insertion of the Venezuelan immigrant population in the city is characterized by segmentation in

**Table 1**  
Dimensions of precarious employment for interviews’ analyses.

Dimension	Definition
Job instability	It is characterized by the presence of temporary or short-term contracts. The literature also comments about the term “job insecurity” and is defined as the discrepancy between the level of security that a person experiences and the level that they would rather have, and refers to the degree of uncertainty about their employment conditions.
Empowerment	It is referred to the institutional relations, of legal protection of the salary relation, that contemplate the union presence and the individual or collective level of negotiation on the working conditions.
Vulnerability	It refers to the set of social power relations, explicit or implicit, in the workplace. Vulnerability is related to low levels of empowerment, except that, rather than manifesting themselves in normative terms, they appear in social relations in the workplace.
Wage level	Classifies workers according to the degree of economic dependency related to employment conditions and possible material deprivation.
Social benefits	Social protection mechanisms for the working population, which can contribute to mitigating their precarious employment situation.
Capacity to exercise workers’ rights	Ability to exercise and negotiate rights related to employment conditions without harming the employment situation for workers.

Source: adaptation for research purposes of previous studies (Amable et al., 2001; Amable, 2006; Porthé et al., 2009; Porthé et al., 2010).

**Table 2**  
List of social organizations participating in the fieldwork.

N°	Organization’s name (Spanish- English)	Alphanumeric code
1	Colonia Venezolana en Medellín (Venezuelan Colony in Medellín)	KI-1
2	Emprecolvenz: Emprendimiento Colombia- Venezuela (Entrepreneurship Colombia-Venezuela)	KI-2
3	Ayúdame a ayudar por Venezuela (Help me to help for Venezuela)	KI-3
4	Venezolanos que vivan en Medellín (Venezuelans living in Medellín)	KI-4
5	Consultorio Jurídico Universidad de Antioquia (Legal Office Universidad de Antioquia)	KI-5
6	Defensoría del pueblo (Ombudsman office of Colombia)	KI-6
7	ACNUR (ACNUR)	KI-7
8	Grupo de ayuda a venezolanos (Venezuelan aid group)	KI-8
9	Organización Internacional para las Migraciones (International Organization for Migration)	KI-9
10	Escuela Nacional Sindical (National Trade Union School of Colombia)	KI-10-11
11	Personería de Medellín (Personnel of Medellín)	KI-12

Source: by the authors.

**Table 3**  
Sociodemographic characteristics of Venezuelan population participating in the study. Medellín, 2018 (n = 31).

Characteristics	N (%)
<b>Age</b>	
Mean (minimum-maximum)	32 (18–52)
<b>Sex</b>	
Male	19 (61.3)
Female	12 (38.7)
<b>Socioeconomic position</b>	
Low	10 (32.3)
Middle	19 (61.3)
High	2 (6.4)
<b>Social security enrolment</b>	
None	21 (67.7)
Paying regime	10 (32.3)
<b>Marital status</b>	
Married – Common-law	7 (22.6)
Single	23 (74.2)
Divorced	1 (3.2)
<b>Schooling</b>	
Highschool (unfinished)	1 (3.2)
Highschool	2 (6.4)
Technical/Technological	10 (32.3)
University (unfinished)	9 (29.0)
University	8 (25.8)
Graduate	1 (3.2)
<b>Occupation</b>	
Service sector	16 (51.6)
Administrative	5 (16.2)
Sales / Commerce	5 (16.2)
Unemployed	3 (9.7)
Manual non-qualified	2 (6.4)
<b>Total</b>	<b>31 (100.0)</b>

Source: by the authors.

the job market. A considerable number of the interviewees mentioned they were placed in the service sector, many in the informal economy and some do not have a written contract. In some cases of informal and verbal agreements, employment conditions were discussed verbally with the employer, in terms of salary, working hours, and working days per week. This places them in a position of instability and fear of losing their jobs (Table 4: 1a, 1b). The following quote is an example of the many reports highlighting stressful situations as a result of the informal agreements:

“Well, here pressure is greater... As I tell you, no, here there is much pressure because there I am in my country, and here you feel more pressure, more, more... as I tell you, fear of losing the job, you know? The situation is almost more stressing than in Venezuela” (Int-10, male)

Participants perceived that job instability and the fear of loss of employment force workers to accept substandard employment conditions, as compared to local hires, due to their current economic needs to support themselves and the fundamental need to be able to send money to their families (Table 4: 1c, 1d). They mentioned that administrative and legal requirements to work and remain in the country are determinants of instability in employment conditions. In some cases, it is more expensive to hire Venezuelans legally than Colombians in the same type of job. As an example, one interviewee expressed his concerns about the legal requirements to have work and residence permit in Colombia:

“Oh no” “I have to tell you there is a possibility that the special permit to remain but when I arrived it was very complicated, I even had 6 months to be here, then I was thinking about going to Ecuador, Peru or Chile using what I was earning here because the visa protocol is very hard, very hard for one to take risks. Even investors, Venezuelans who want to invest here to set an example to other Venezuelans, it is very hard. It is very complicated to become legal here” (Int-16, Male)

**Table 4**

Verbatim interview extracts from participants' discourses, in relation with dimensions of precarious employment. Medellín, Colombia, 2018 (n = 43).

Dimensions	Verbatim extracts from participants' discourses
<b>1). Employment instability</b>	<p>"The second biggest field for women is housekeeping. It has had a growth... in the last months higher in housekeeping. Also in textile, temporary workers in sewing; in all this it is mostly informal. They never get hired formally" (KI-10–11, females)</p> <p>"I know there is verbal hiring, not physical nor signed. I know they pay social security because they are written in the weekly pay slip but currently no... it is like they pay me and that's it! I am not in any EPS ..." (Int-30, male)</p> <p>Does your contract include social security?</p> <p>No, no, not at all. You know it is also that certainly the business people, I mean, the employee will always look after its own wellbeing. Even though we have permit and everything, the amount of Venezuelans, right, if you do not want to work for this, then there will always be someone who will do it. You have to take it one way or another". (Int-4, male)</p> <p>"(...) I had a job where I was working for almost 72 h straight at the International Book Fair and at that moment you do not feel exploited, because... you feel grateful you are covering a need. Hey! You are hungry and do not have a place to sleep. You have to pay rent". (KI-3, male)</p>
<b>2). Empowerment</b>	<p>"No, I don't have a working contract nor health services of any kind. The time I retired that month, I had worked for several months and didn't get a settlement. I am aware that I earn more than minimum wage. I earn one point two million pesos". (Int-5, male)</p>
<b>3). Vulnerability</b>	<p>"Regularly, as they explain at the beginning, when you don't have the permit, there are usually 10 h-work a day that can be more because... help me, I need to wash the restaurant and john doe has left already... -I clean, no problem... You don't want to lose the job. So, you work without concern for the hours". (KI-4, male)</p>
<b>4). Wage level</b>	<p>"There are here, I have heard of Venezuelans who do work for half the pay, under a minimum wage without benefits. They work over 8 h. Many say: your schedule is very good. I say: you think? They say: yes, we here work 10 and 12 h". (Int-14, male)</p> <p>Is your salary enough for living in Colombia?</p> <p>I have managed under the circumstances because you cannot do miracles with the wages here. That is a lie (Int-27, male)</p>
<b>5). Social benefits</b>	<p>"So far I have signed the contract. We agreed that EPS is included but I have not used it. I have checked and I am not yet active but because we have to be registered in Sire with the permit, so the employer is in that process of registering me. As I said at the beginning, there is no clarity when (...)" (Int-16, male)</p>
<b>6). Capacity to exercise rights</b>	<p>"Which is the real problem: Venezuelans are irregular in the country, say 90%. This leads to work informality" (KI-10–11, females)</p> <p>"He has his papers because his family is Colombian so he has ID. All the same, I am not sure... I think they are exploitative slaver. I do not have anything else to say about those people". (Int-9, female)</p> <p>"But we also have the case of a person who is working informally because he does not hold a permit or even if they had it we all know people here have been taking advantage of the situation of Venezuelans and are hiring and then not paying them. We have those cases where people are abusing". (KI-5, male)</p>

Source: by the authors.

### Empowerment

According to the participants' discourses, the capacity of the working Venezuelan population to negotiate employment conditions and the extent of social protection are low. Although some hold a special permit to remain (PEP, in Spanish) granted by the state, the relationship between employee and employer falls into the informal system. In many cases, salary and working conditions are unilaterally set by the employer (Table 4: 2a). In the case of workers in the informal economy, the capacity for empowerment is null. The following quote is an example of an informal coffee vendor on the streets, talking about her labor situation and inability to have better employment conditions:

I sell tinto (refers to a kind of coffee). I have to work hard because I have not found a job and have to send money to Venezuela to my kids and family. Right now, I go out in the morning, from six to twelve, twelve thirty. After I go out in the afternoon, from three to six. Then, at night I go out again from seven to nine thirty or ten. I have to do it that way because I only have one bottle and want to get money to send so I can help where I am because they are supporting me. I had to move after living with my cousin, to live with another cousin with the hope to have some day a more stable job to help my family more. It is very hard" (Int-20, female)

### Vulnerability

This category refers to the degree of defenselessness of the Venezuelan working population in confronting situations of abuse, arbitrariness, and unfair treatment in the host country (Colombia). A sizable number of the participants perceive that not having a work permit or a job contract places them in a situation of insecurity in the working scenario, in terms of the exercise of workers' rights, such as inclusion in the country's General System of Social Security (Table 4: 3a). As an example, one participant expressed his feelings of vulnerability and defenselessness in his current job:

"(...) I already, I sincerely was tired. I was very tired. The schedule was very hard and I truly couldn't make it and went and spoke with him. I said I honestly did not put up with the pace that I wanted to look for something else. He just got upset and wanted me to work that day because he did not have anyone else. I said yes, ok, no problem, I would work for another week while he found someone else. I would work for another week. In fact, payments were to be moved forward and everything was cool. A week passed and he did not find another person and when I asked for my money, he kicked me out at gun point and never paid me". (Int-1, male)

### Wage level

This category encompasses various aspects. First, within the formal economy, it examines whether the salary is perceived as fair considering the agreed working conditions and commensurate with time invested and risk exposure, safety, and the like. Second, it considers whether earnings are adequate to cover basic needs and unforeseen expenses.

In the first case, interviewees perceived that incomes were lower than the legal minimum salary in Colombia (around 252 dollars monthly). Others reported their perception of receiving lower salaries when compared with the local working class. Some said that have income related to tips, and others receive additional income from work at a different job—especially on weekends (Table 4: 4a, 4b). In the second case, in regards to their salary covering basic needs, the interviewees consider that one of the fundamental reasons to keep their employment (formal or informal) is the ability to send money to their families. Economic factors to be considered include the devaluation of the bolivar, which makes the cost of living in Colombia higher than in the neighboring country. However, the purchasing power of the Colombian currency is higher for their families in Venezuela, as expressed by one participant:

Approximately how much money do you send home?

The least I send is 20 thousand pesos. They are almost 2 million bolivares

**Tabla 5**

Verbatim interview extracts from participants' discourses, in relation with the perception of health. Medellín, Colombia, 2018 (n = 43).

Categories	Verbatim interview extracts from participants' discourses
<b>1) Overall health</b>	<p>"In terms of health I consider I have not been ill. About two weeks ago I got the flu, normal. I mean anyone can get the flu. But in Venezuela, the good thing is that here you get sick and can buy medicine. Not there because there aren't any". (Int-17, female)</p> <p>Have you had to visit the doctor while here?</p> <p>No. I always take care of myself, fats, cholesterol, and that. I had never suffered from anything. I wake up in the morning, take oatmeal, walk a little, have a good breakfast and I have not fallen ill here. Legally I have not been ill (Int-8, male)</p> <p>Well, I am very allergic and have asthma. All that praying not to get sick because I know here the medicine is a little expensive and doctors, I don't think there are public doctors. It is all that praying and when it rains right now for example, I have to take care of the rain. Everyday..." (Int-20, female)</p>
<b>2) Occupational hazards and health</b>	<p>"At least at work we use our hands a lot. I have suffered many accidents there but I do not report them because I need the job. Many hazards for my hands, for example". (Int-24, male)</p> <p>"Oh well, I can get burnt, I can get burnt, I can fall because every so often we slip in the kitchen because it is always wet. I can fall on an arm, falls, burns... cuts, knives very sharp because we sell grill". (Int-10, male)</p>
<b>3) Mental health</b>	<p>"For example, I felt badly today. My head aches. Thank God I brought some pills and other things from my country. Maybe it was the cold or many things. I don't know... many things. Every day of my life since I am here I cry for my children, my family and my comfort". (Int-20, male)</p>

Source: the authors.

What can you buy with the 2 million bolivares?

It is not much but at least there is a comparison. Two million is about twicet the minimum wage in Venezuela (Int-18, male)

#### Social benefits

Social benefits depend on hiring agreements with employees. In the case of verbal contracts, the study participants reported receiving only their salary without social security or other benefits. Those who have fulfilled the administrative requirements to remain legally in the country have a legal contract with social security benefits and additional benefits (Table 4: 5a). As an example, a key informant mentioned, the most vulnerable, in terms of social benefits and working conditions, are those in the informal economy:

"Most of work is always informal. As I have said, here, for example, you walk all the tramway from Buenos Aires Station to San Jose and all the donuts, hotdogs, all things are tended by a Venezuelan and all, mostly, I mean from 100% of Venezuelans in Medellín, at least 80% are without any type of contract, they work per labor and don't have social security. I am talking of about 80% who work without a stable contract and work on the informal sector, many selling candy for example". (KI-8, male)

#### Capacity to exercise workers' rights

The capacity to exercise workers' rights is limited due to several factors. Foremost, it is related to high vulnerability and low perceived empowerment. Second, irregularity—not possessing a permit to remain and work—prevents this population from accessing a contract with full benefits (Table 4: 6a, 6b). According to the participants, the practices of employers who hire Venezuelans need to be monitored, including the investigation of work exploitation (Table 4: 6c). Participants emphasized that there are structural factors relating to administrative paperwork from both the Colombian and the Venezuelan governments with regard to legalizing document. The following quote is the opinion of one participant about how these structural factors limit the ability to exercise the labor rights of Venezuelans:

"I have felt here that benefits are not so good. I am not sure if it is because I am Venezuelan and do not have power to demand my rights and say: look, I am earning very little and you are not paying commission for my sales. Look, I feel you are not paying me the increase because it is being discounted for other concepts" (Int-11, male)

#### Health status of the Venezuelan population and its relationship with working conditions

Venezuelan participants have not reported a physical illness that prevented them from working. Some mentioned having suffered respiratory diseases such as flu; however, they did not seek medical care but only self-treated with rest and home remedies (Table 5: 1a, 1b). Study participants expressed the existence of factors related to access to health services that intervene in not seeking health services: costs, not having social security coverage, time constraints, and work pressure (Table 5: 1c). Some reported having concerns about occupational hazards, as they are performing jobs for which they have no experience (Table 5: 2a, 2b). With regard to mental health, interviewees affirmed having symptoms of depression, anxiety, and stress due to the migratory process and doing work for which they are unprepared. Many participants complained about the fact that they are trained professionals now working in low-qualification jobs in Colombia (Table 5: 3a). As an example, one participant expressed his day-to-day feelings in the host country:

"Emotionally, what can I say, it is hard, it is hard. I am not going to say no. That you don't get depressed is a lie. Sometimes there are mornings when you get up and you don't want to get out of bed and do not want to see anyone's face because you miss them. You feel like what would I be doing if I were there and things were not what they are or maybe... You remember what you were back then at home. You live in a constant flashback and that is not worth anything here" (Int-23, male)

#### Discussion

The findings of this study provide knowledge of employment precariousness among the Venezuelan immigrant population according to the characteristics delineated in the model that was adapted and applied. This population is characterized by accessing lower-skill jobs, being less stable in terms of contracts, social benefits, and enrolment in the security system, and often working in the informal economy. These conditions place this group in a situation of relative social vulnerability, which can have effects on health mainly due to increased stress, anxiety, and depression and greater vulnerability to occupational hazards derived from their lack of experience.

Migratory status constitutes a determinant of social inequalities, as immigrants take the most precarious jobs (Ahonen et al., 2009; Benach et al., 2010). The population interviewed, as in previous studies (Porthe et al., 2009, 2010), exhibits several extreme or negative cases when compared with the theoretical construct (Amable, 2006). This situation is may be explained by the fact that the theoretical model was originally developed for salaried workers, and there are many nuances in the working immigrant population related to working contracts in the

strict sense; many of them work in the informal economy (Bartley and Ferrie, 2001).

One of the characteristics of the migratory process, similar to findings in other studies (Porthé et al., 2007; Agudelo-Suarez et al., 2009b), is the difficulty of access to the job market, which has been segmented into limited job openings, even for those having the qualifications to access higher-skill jobs. High demand, the competition with the locals, the administrative and legal requirements for the accreditation of foreign credentials and degrees, and regularization of residency and work permits are obstacles that must be overcome. Analyses must take into account in the demand and supply of jobs in the city of Medellín as compared to other cities in Colombia.

Overall, the interviewed population did not report major physical health problems. This has been described in the literature as the “*healthy immigrant effect*,” similar to the “*healthy worker effect*” (Chowdhury et al., 2017), and is due to selective immigration of people with stronger physical and mental states and better aptitudes to face the migratory process. However, the literature warns about the temporality of this effect, as the health of these people can be affected by different social conditions encountered (Gotsens et al., 2015). The interviewed population in this study was young and had mostly been in the city a short time. However, in analyzing their replies about mental health, investigators must consider the “*immigrant syndrome*”—called the Ulysses syndrome in some literature—defined as being associated with chronic stress. This condition is typical in those facing the challenges that arise from being in a different culture which, coupled with work dissatisfaction, work temporality, and high rotation of job positions, create feelings of marginality and exclusion (Achotegui, 2004; Gálvez Herrer, Gutiérrez García et al. 2011).

Regarding the perception of occupational hazards, most studies concur that immigrant populations tend to be at greater risk of various hazards at work, mainly associated with lower-skill qualifications for which they are unprepared (Ahonen et al., 2010). Many of them do not receive the requisite training for the work they perform, which can have an impact on their health situation in the short- and mid-terms (Agudelo-Suarez et al., 2011).

As a strength of this study, the benefits of qualitative research must be acknowledged that allowed us to approach the interpretation of the participants’ individual perceptions and experiences as those directly involved and affected by the topic of study. To the best of our knowledge, this is the first study of this type in Colombia to explore beyond the study group and examine different perspectives by including key informants from formal and informal organizations in addition to the working immigrants. As a limitation, it is important to consider that these results are limited to the city of Medellín and that to capture the broader reality, it should be complemented with studies in other cities and their experiences in terms of health and work.

Interviews took place during a period characterized by greater affluence of the immigrant population with higher skills; migratory processes have changed since then. At present, we face a difficult period due to the COVID-19 pandemic caused by the SARS-CoV-2 virus. This pandemic has had a profound impact on social and labor inequalities, especially in vulnerable groups such as immigrants (Hu, 2020; Koh, 2020). This may have led to higher unemployment rates, more precarious employment conditions, and greater exposure to occupational risks that exacerbate the physical and mental situations of immigrants like these participants (Alahmad et al., 2020).

This study suggests the creation of specific research lines for this social phenomenon, as the issues of immigration, work, and health are changing in Colombia. This research will be complemented with epidemiological approximations that allow understanding some fundamental aspects of employment and work conditions and their relation to physical, mental, and psychosocial indicators.

The country needs to implement social policies for this population. Even though the immigration phenomenon is recent, current policies are restrictive and controlling. However, some important steps have been

taken with the characterization of this population in Colombia and the creation of some social policies to guarantee access to health, social, and educational services for children and pregnant women, and to offer processes for regularization of the residence and work situation in the country through special residence permits (PEP, acronym in Spanish for Permiso Especial de Permanencia) (Colombia. Consejo Nacional de Política Económica y Social. Departamento Nacional de Planeación, 2018). It is essential to continue developing inclusive strategies that allow for job creation and that respond to the needs of this working population. A fundamental aspect is to guarantee effective access to social and health services to prevent greater job precariousness.

### Declaration of Competing Interest

The authors declare that they have no known competing financial interests or personal relationships that could have appeared to influence the work reported in this paper.

### Acknowledgment

The research groups thanks the Venezuelan population and the key informants which participated in the study whose answers allowed for the approach to the reality of hundreds of Venezuelans who fight on a daily basis for a better future in the middle of adversity in this migratory process in Colombia.

### Funding

None.

### Authors’ contributions

All authors participated in the conception, design of the work, analysis, interpretation of data, critical review and approval of the final version. AAAS, MYV, WJRG carried out the fieldwork. AAAS coordinated the design of the study and drafted the manuscript. All authors are responsible and guarantors of all the aspects related to the content of this manuscript.

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