

## **Rethinking Refuge in the time of COVID-19**

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## **Abstract**

COVID-19 has profoundly reduced the global movement of people. Two key questions, however, remain unclear. Firstly, what are the possible medium and long-term implications of recent changes and, secondly, do they mark a departure from the existing approaches in state practices toward displaced migration? Using examples limited to Europe, we argue that the first question cannot yet be fully answered but a better understanding can be achieved by considering recent trends. The second question, we maintain, is no easier to gauge but should be facilitated by utilising conceptual material to theorise current and infolding developments, and specifically to consider which theoretical repertoires appear especially suited as these unfold. Two literatures, one drawn from the discussion of displaced migration and the 'disease' metaphor, and the other from thinking about asylum and the 'racial state', are brought together not to assert any definitive conclusion, but in order to help re-think contemporary developments.

## **Key words**

racialization, refugees, Bordering, COVID, Disease, Migration

## Introduction

COVID-19 has profoundly reduced the global movement of people, illustrated by the roughly 46,000 travel restrictions imposed by individual states and whole regional blocks by early April 2020 (International Organization for Migration (IOM), 2020). While some states have been more cautious than others, in the large majority of cases, this freeze on mobility has included the closure of borders to asylum seekers and refugees (Meer and Villegas 2020). Two key questions, however, remain unclear. Firstly, what are the possible medium and long-term implications of recent changes and, secondly, do they mark a qualitative departure from the existing approaches in state practices toward displaced migration? In this short article, and using examples limited to Europe, we argue that the first question cannot yet be fully answered but a better understanding can be achieved by considering recent trends and developments. The second question, we maintain, is no easier to gauge but should be facilitated by utilising conceptual material that can theorise current and infolding developments, specifically to consider which theoretical repertoires in a crowded field may appear especially suited as developments continue to unfold in light of the current pandemic. Two literatures, one drawn from the discussion of displaced migration and the ‘disease’ metaphor, and the other from thinking about asylum and the ‘racial state’, are brought together not to assert any definitive conclusion, but in order to help read contemporary developments.

## Recent Trends and Developments

As part of a series of restrictions on the movement of people, the right to seek asylum and refuge was severely curtailed during the early months of the COVID-19 pandemic. At least 57 countries made no exception to their travel restrictions for refugees seeking asylum (UNHCR, 2020a), even though the World Health Organisation (WHO) offered clear guidance on the use of quarantines and health screening measures at points of entry for those fleeing persecution. As a result, travel bans and other emergency measures led to a continual decline in asylum applications in the EU compared to pre-COVID levels, with a registered drop of 43% in March and a subsequent decline of 87% in April 2020 following many countries’ suspension of asylum procedures for public health reasons (Fundamental Rights Agency, 2020).

This move left many people seeking refuge stranded in precarious conditions, and led Filippo Grandi, the UN High Commissioner for Refugees, to argue that, ‘the core principles of refugee protection are being put to test’ (UNHCR, 2020c). In other words, and despite protections enshrined in international law, the UNHCR saw the response to the global public health emergency as posing a novel risk to established conventions. Specifically, and as Villegas and Meer (2020) have summarised, ‘since 1951, the United Nations Refugee Convention has protected refugees and asylum seekers from being returned to a place where they would be in danger because of their race, religion, nationality, membership in a particular social group, or their political opinion’. The key point here in the Convention is that it make the principle of ‘non-refoulement’ a cornerstone of international refugee protection.<sup>1</sup> Presently, the UNHCR has been clear in stating that neither the 1951 Refugee Convention nor EU refugee law provide any legal basis for suspending asylum applications (UNHCR, 2020a and b). While stakeholders recognise that it is presently lawful for undocumented migrants to be detained for a short and finite amount of time, it needs to be stressed that arbitrary detention is prohibited and removal must be the result of individual determinations, not a blanket application of policy (Human Rights Watch, 2020).

In specific cases, however, and before the COVID 19 pandemic arose, the European Court of Justice found several EU member states guilty of not fulfilling their asylum responsibilities by attempting to opt out of EU treaties that require them to take their allotted share of asylum seekers. Importantly these cases date back to 2015 and include how, in its April 2, 2020 decision for example, the European Court of Justice Court ruled against Hungary, the Czech Republic, and Poland and their refusal to relocate asylum seekers from Greece and Italy on the grounds of maintaining public safety and law and order (Rankin, 2020). What the COVID-19 pandemic has arguably blurred is the thin line states can tread between violating the principle of non-refoulement and doing just enough to stay within its parameters. For example,

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<sup>1</sup> Enshrined in Article 33 of the 1951 Refugee Convention, this principle insists that ‘No Contracting State shall expel or return (“refouler”) a refugee in any manner whatsoever to the frontiers of territories where his [or her] life or freedom would be threatened on account of his [or her] race, religion, nationality, membership of a particular social group or political opinion.’ (UNHCR, 1951)

when it comes to asylum seekers enroute by sea, international law requires states to disembark people rescued in a place where they are safe. Despite this, pandemic conditions have allowed actions, such as those undertaken in Cyprus, in which Cypriot authorities pushed a boat carrying Syrian refugees back out of its territorial waters, forcing it to dock in the self-declared Turkish Republic of Northern Cyprus, and which has no effective asylum system (Connelly 2020). Italy and Malta meanwhile also closed their ports for most boats and NGOs, and suspended their search and rescue operations at sea to comply with emergency legislation (Keller, Schöler and Goldoni, 2020).

In one respect, these moves are an escalation of what has gone before, including Hungary's 'chutes and ladders' asylum system which, as Armstrong's (2018) documents, has made it effectively impossible to be granted asylum. In the context of COVID, while closing borders and ceasing asylum procedures are therefore not explicit and overt refoulement actions, they have prevented potential asylum seekers from registering at the border (Fundamental Rights Agency, 2020). A stronger reading, however, would be to say that case law has extended the scope of Article 33 (1) whereby today it is commonly understood that: "It precludes any act of refoulement, of whatever form, including non-admittance at the frontier, that would have the effect of exposing refugees or asylum seekers to: (i) a threat of persecution on account of race, religion, nationality, membership of a particular social group or political opinion; (ii) a real risk of torture or cruel, inhuman or degrading treatment or punishment; or (iii) a threat to life, physical integrity or liberty" (Lauterpacht and Bethlehem, 2001, p.128). In this reading it may indeed be argued that closing humanitarian borders and procedures violate the principle by indirectly pushing asylum seekers into situations where their human rights can be violated. Yet focusing on this matter alone, however, is to overlook the conditions of people seeking asylum who are presently in Europe but prevented from moving on.

## **Deteriorating conditions for those seeking asylum in Europe**

Here there is evidence that displaced migrants have been held in wholly unsatisfactory and overcrowded reception centres in conditions that exacerbate the risk of COVID-19 infections. In several of the Greek hotspots, camps have lacked the

most basic sanitation, including soap and clean running water, with thousands forced to sleep in close proximity. Although the authorities announced certain measures to prevent the spread of disease in the hotspots, including restricting residents' movements, such measures also deepened human suffering and increased existing tensions in the camps (Fundamental Rights Agency, 2020).

Even before the 8 September 2020 fires that consumed the Moria camp on the Greek island of Lesbos, making it uninhabitable and leaving nearly 13,000 without shelter or basic services, medics on the ground reported horrific conditions where 'recommended measures such as frequent hand washing and social distancing to prevent the spread of the virus are just impossible' (MSF, 2020). "Siyana Marhroof Shaffi, director of the UK-based charity Kitrinos Healthcare, which runs a medical clinic on Lesbos, reported that many of the camp's residents already had respiratory infections and that, scabies was 'rampant'" (Iacobucci, 2020). As Meer (2020) has argued, 'these and camps in the other Aegean islands of Chios, Samos, Leros, and Kos, swelled following the EU-Turkey deal (signed in 2016) commenced to prevent onward movement from the camps' (cf Long, 2018).

In Cyprus, where the provision of accommodation for those seeking asylum is virtually non-existent (Christodoulou and Michael 2019), asylum seekers living in independent accommodation were forced to move to the Pournara camp in Kokkinotrimithia. Here they were effectively imprisoned as part of a nationwide lockdown and even when national restrictions were eased, residents of the camp were not allowed to leave, leading to hunger strikes and demonstrations (Bennett 2020). Such acts of desperation are not limited to reception facilities in Southern Europe. In Sweden, an inmate at a migrant detention centre died from COVID-19 in April 2020 and hunger strikes have taken place at a number of the Swedish Migration Agency's detention centres. Revolts have also been reported at various reception and detention centres in Italy where living conditions remain precarious. One such protest in the Sicilian town of Caltanissetta occurred after the death of a Tunisian detainee, and a hunger strike took place at the detention centre of Gradisca d'Isonzo in the north east of the country to protest against the risk of the virus spreading (Fundamental Rights Agency, 2020). Similarly, in Bologna, displaced migrants living in reception centres wrote an open letter to local and regional

authorities calling for improvements in living conditions to reduce the chance of transmission of COVID-19. Campaign groups report that in some cases, displaced migrants are forced to labour in jobs where they are openly exposed to the risk of infection:

“Many of us work side by side, day and night, at the Interporto, where in some warehouses the workload has doubled to keep pace with the growing demand provoked by the pandemic. When we have to rest, we go back to the crowded reception centres. In via Mattei, more than 200 of us live and sleep in dorms with 5 to 10 persons each, with beds very close, one on top of the other”  
(Coordinamento Migranti Letter reported in European Commission (2020).

The political rhetoric of some leaders across Europe, meanwhile, has used the pandemic to re-articulate anti-migrant sentiment. The Hungarian Prime Minister Viktor Orbán, for example, has told the people of Hungary that ‘Our experience is that primarily foreigners brought in the disease, and that it is spreading among foreigners’ (France 24, 2020). In Italy, the former Interior Minister Matteo Salvini claimed that a migrant rescue ship should not have been allowed to dock in Sicily due to the supposed health risk posed by those on board (Tondo, 2020). In a similar vein, the Governor of Sicily, Nello Musumeci, cited fears of migrants spreading COVID when he ordered an emergency decree, subsequently quashed by the Italian government, to close down all hotspots and emergency reception centres. In Greece, the nationalist New Democracy government used COVID to implement closed camps (which are essentially detention centres) for asylum seekers stranded on various Aegean islands. In France, Marine Le Pen cited the spread of the coronavirus to justify her renewed push to close France’s border with Italy (Trilling, 2020). Alice Weidel, The AfD (Alternative for Germany) leader in the Bundestag, has blamed the spread of the virus on what she called “the dogma of open borders” (Zerka, 2020). Elsewhere, Santiago Abascal, head of the populist Vox movement in Spain has been quoted blaming the Socialist government for the spread of COVID-19, because they are, “so keen to bring down borders it has not even taken the minimum measures dictated by common sense” (Ashfor, 2020).

If political rhetoric is relevant then these statements matter in forging norms in public discourse, and in setting agendas more broadly, and of course dovetail with material policy changes. Across the examples discussed above, pandemic conditions have resulted in heightened and tightened curbs on border entry and, in our view, facilitated violations of international human rights law. For asylum seekers and refugees already resident in-country, pandemic conditions have also resulted in increased internal restrictions on their mobility and a swift, enforced decline in living conditions. In some cases, politicians have used the pandemic to advance their agenda on displaced migration, taking the opportunity to put in place enhanced border measures to prevent entry into the state. In others, disease prevention controls – social restrictions, quarantining, lockdown – have coincided with existing border controls such as immobilisation, coercive housing and border closures.

## **Theorising Developments**

Within this context, the cases above are particularly striking on two counts: (1) that expressions of anxiety or hostility towards displaced migration and/in pandemic conditions coincide in the language of ‘disease’ and that (2) whilst this language displays open hostility to migrants of all backgrounds, it utilises frameworks that signal asylum seekers and refugees are at the nexus of this concern. The use of the language of ‘disease’ to talk about displaced migration has particular potency within pandemic conditions; however, though it may appear to be specific to the current context, there are pre-COVID precedents for mobilising medicalised prejudice against asylum seekers and refugees, consideration of which offers frameworks and explanatory starting-points from which to analyse the deterioration of border and living conditions for displaced migrants.

### *(i) Displaced migration and the ‘disease’ metaphor*

The association of immigration with ‘disease’ is a discursive strand with a distinctive genealogy. Evidence from the mid-nineteenth century onwards indicates that migrants of all statuses have been associated with medicalised prejudice, from the association of typhus with Irish refugees in mid-nineteenth century Britain (Darwen et al 2020, Hickman and Ryan, 2020), to the coterminous stigmatisation in the US of



Irish migrants as the ‘bearers of cholera’ (Kraut 2010:125), the naming of late-nineteenth century outbreaks of tuberculosis as the ‘Jewish disease’ (ibid), and the blaming of Chinese groups for the San Francisco plague in the early twentieth century (Rosenberg, 1962). By the twentieth century, this rhetoric found a specific target, so that in the UK, the Aliens Order (1920), identified refugees as ‘unsanitary aliens’, and sought to restrict their entry on the alleged grounds that their ‘presence is likely to be a danger to the health of the people of this country’ (quoted in Taylor, 2016: 520). This is a trend echoed in contemporary examples of politicians representing displaced migrants as ‘swarms’, ‘swarming’, or ‘swamping’ – thereby likening them to insects or unhuman entities who carry disease – whilst calling for more stringent and restrictive border regulations. The language deployed by present anti-immigrant actors above must also be situated within this genealogy.

One way of unpacking the discourse of ‘disease’ in the context of displaced migration is to consider the role of the body politic in sustaining the ‘disease’ metaphor. As Musolff (2004: 437–438) notes, the rhetorical association of refuge with ‘disease’, has allowed political actors to present nation states as analogous to a ‘body’ in need of protection from ‘invasion, penetration, infection or disease’, a rhetoric which has become ‘[one of] the foundation[s] for the arguments of immigration restrictions’ (Kraut, 2010: 125). The body politic of the nation-state might therefore be understood to occupy the centre of the ‘disease’ metaphor, whereby the nation is imagined as the representative ‘body’ of its citizens, made in their normative image. In this representational economy, the language of ‘disease’ is used to express the limits of the nation-state, and those outside the body politic are not only considered ‘foreign’ or Other, but also potential ‘threats’ to the wellness, ‘purity’ and resilience of the body of the nation.

There is precedent for the language of ‘disease’ to be applied to a number of social groups who are considered beyond the body politic (including the unemployed, people living in poverty, LGBTQI populations, and Travellers). However, a broad analysis of the relationship between the body politic and the ‘disease’ metaphor does not account for the specificities of its application to displaced migrants. As the examples above indicate, the ‘disease’ metaphor appears to be of particular utility for those wishing to express hostility towards asylum seekers and refugees. Why? What

so directs its focus towards displaced migration? One possible explanation is related to asylum seekers' and refugees' distinctive immigration status. Achiume (2019) has argued that in contrast to forms of migration over which they can exert full border controls (such as economic or familial migrants), for signatories of the 1951 Convention, which obliges nation-states to honour human rights commitments, displaced migration represents a loss of border (and national) sovereignty, making asylum and refugee statuses the migrant category over which nation-states have least control. Pandemic imaginaries that associate asylum seekers and refugees as 'bringing disease' therefore might in part be explained as an expression of nation-states' perceived loss of control resulting from their international humanitarian obligations. In this framework, and within the disease metaphor, asylum seekers and refugees are imagined as the vessels of disease, of threat to the nation, which, at a time when borders play a central role in pandemic regulation, is able to exert less control over their arrival, and is vulnerable to 'infection'.

### *(ii) Asylum and the 'racial state'*

It is not simply the case, however, that the disease metaphor is utilised to express anxieties about high levels of infection in pandemic conditions. Rather, it is used to perform a political sleight of hand, in which asylum seekers and refugees are framed not simply as *carrying* disease, but *as the disease*. As Darwen et al (2020), Kraut (1994, 2010) and Taylor (2016) help elaborate, this is a pattern which is well-established, from Jewish and Irish displaced migrants, to post-1990 asylum seekers and refugees from former-colonies in the Global South. It is also a trend readily identifiable in the examples above, including, (for instance) the swift translation of far-right 'asylum-seekers-as-disease' rhetoric into actual border and port closures. Yet if this is so, it also requires a consideration of the underlying governmentality in current approaches.

In this regard, a second register that can help continue to theorise present and emerging approaches to refugee in light of COVID is that which comes from theorisations of asylum and the 'racial state'. This is specifically used to (a) express anxiety over the entry and presence of racialised minorities in the nation state, and (b) technologised control to regulate and discipline their movements. The 'disease

metaphor' therefore requires further elaboration, with reference to frameworks which theorise the relationship between racial hierarchy and the development of the nation. Of relevance here is David Theo Goldberg's scholarship (2002, 2008), which has argued that modern nation-states are in fact 'racial states' (Goldberg 2002), with the purpose of maintaining white hegemony. Theorising the nation-state as the 'racial state' means that race is understood as one of the key organising forces of the nation-state, and that factors such as citizenship, access to the nation and belonging is hierarchized as such. This offers a framework and motive with which to analyse the representational economy of the 'disease' metaphor, as applied to displaced migrants, and sheds further light on European nation-states' approaches to displaced migration. An influential argument, it is taken up by a number of authors to specifically theorise current approaches to migration in ways helpfully summarised by Lentin (2007: 612):

"Through constitutions, border controls, the law, policy making, bureaucracy and governmental technologies such as census categorizations, invented histories and traditions, ceremonies and cultural imaginings, modern states, each in its own way, are defined by their power to exclude (and include) in racially ordered terms, to categorize hierarchically, and to set aside".

As Lentin indicates, border controls, including those enacted upon asylum seekers and refugees, are central to the maintenance of the 'racial state'. Border controls can be connected to what Goldberg (2002:43) identifies as the two traditions of the racial state - naturalism and historicism - which perpetuated narratives of racialised populations as 'biologically inferior', or 'less developed', and positioned border controls as 'necessary' measures to 'preserve' the perceived white 'homogeneity' of European nation-states. Here, we suggest, it is possible to glimpse the roots of the language of 'disease' deployed against racialised minorities and displaced migrants, where racist imaginaries of racialised populations as 'subhuman' map onto the somatic imagery of the body politic, and have established a means through which immigration can be framed as (racial) 'infection'.

Elsewhere, scholars including Bhabra (2015, 2017), Mayblin (2017) and El-Enany (2020) insist that for European nations implicated in colonialism, racial hierarchies

also had a series of additional functions, including (1) inhibiting movement from the colonies to the imperial centre and then, after independence, (2) delegitimising the claims of residents of ex-colonies – otherwise citizens of the ex-imperial nation-state to be citizens of European nations. These functions served the purpose of preserving the wealth of colonial spoils for the (white) citizens of the imperial centre, whilst preventing racialised citizens from accessing the benefits of stolen wealth. As Mayblin (2017) observes, it is not a coincidence that restrictions on asylum controls have developed in parallel with demographic shifts amongst asylum seeking populations, which, once predominantly white European, since 1990, have increasingly been made up of Black and Brown displaced migrants from the Global South.

Some might ask why this is relevant to the discussion at hand, and one answer is that the resulting regime of racialised and colonial border logics has both national and international effects, with distinctly ‘medicalised’ characteristics. For instance, Achiume (2019) suggests that European border regimes have effectively enacted a continental quarantining on states in the Global South. At the same time, within European nation-states, an agenda of what El-Enany (2020: 4) has called ‘racial (b)ordering’ seeks to prevent the entry of racialised populations to the state and subjects the ‘racialised poor’ to the ‘operation of internal borders [...] to street and state terror’.

Outwith pandemic conditions, these internal ‘everyday bordering’ (Yuval Davis et al 2017) practices to which displaced migrants are subject – coerced immobility, enforced impoverishment, precarious and unsafe accommodation, and spatial ‘dumping’ (Hill, Meer and Peace, 2021, Cheshire and Zappia 2016) – might be understood in the now-familiar terms of public health measures – ‘infection control’, social quarantining, social distancing. *Within* pandemic conditions, and following increased public health measures, thinking with ‘everyday bordering’ approaches might at least allow us to consider how current practices can also be understood as (1) compounding existing controls on asylum seekers and refugees, (2) creating conditions in which vulnerability to and likelihood of infection are increased, and (3) creating secondary risks to their everyday survival (i.e. food poverty or increased social vulnerability).

## **Governing Refuge after COVID 19**

This short discussion is necessarily limited given the allotted space, but it has at least sought to contribute to an understanding of some medium and long-term implications for refuge in light of COVID 19, including whether present approaches signal a departure from what has prevailed in state practices toward displaced migration. Using examples limited to Europe, we have elaborated some recent trends and developments which suggest that there is good reason to believe we are witnessing both continuity and novelty.

We note how during the early stages of the pandemic, international protections nominally afforded to asylum seekers and refugees were withdrawn on multiple fronts, and we maintain that it is insufficient to characterise these as merely continuity of what has gone before. This is especially relevant as states have partially eased their lock-down measures, and where it is far from clear that the new normal will be a return to pre-lockdown asylum regimes. Continued analysis is then necessary, but this description of events is not only an empirical matter, however, but is relevant to conceptual considerations and specifically how theoretical repertoires may appear especially relevant as developments continue to unfold.

This allows us to understand how the extended COVID restrictions can be read within an environment in which strategies of immobilisation are used to control the movements of asylum seekers and refugees, and are utilised in order to maintain a 'racial order' which discriminates against asylum seekers from the Global South (El-Enany 2020). We have argued that this might also allow us to understand that while, outwith the pandemic, existing 'everyday bordering' practices established an infrastructure with necropolitical objectives (Mayblin et al 2019; Mbembe 2003), pandemic conditions enable them to be more readily realised. To this end, we have argued that there is virtue in maintaining a focus on the 'disease' metaphor in the context of the 'racial state'. What this reveals is that whilst the increasingly restrictive, negligent and violent conditions to which displaced migrants are subject are implemented in the name of 'viral prevention', these measures may provide the means through which 'racial infection' controls can be increased.

These are not certainties that will apply universally, but what the conceptual material offers to our understanding of unfolding developments is that the present racialization of refuge is a key feature of an emerging international refugee settlement, something that must be analysed as both relying on old tropes while developing new ones in approaches to refuge in the time of COVID-19.

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