Re-thinking exclusionary policies: the case of irregular migrants during the COVID-19 pandemic in Europe

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In March 2020, as the COVID-19 epidemic was spreading through the Western Hemisphere, The Lancet warned of the heightened vulnerabilities of migrant and refugee populations and of the utmost importance of developing preparedness plans and responses that are inclusive of refugee and migrant health (Kluge et al., 2020). These concerns stemmed from the pre-existing precarities and societal exclusion of refugee and migrant populations around the world, including in Europe. With the pandemic, the “leave no one behind” pledge of the UN 2030 Agenda for Sustainable Development gained pressing importance in relation to migrants and refugees (The Lancet, 2020). A few studies have looked at the vulnerabilities during the COVID-19 pandemic of migrants and refugees in general (Lange et al., 2020), however, within these groups layers of vulnerability and societal exclusion significantly differ according to several factors, including migration status. In fact, amongst the most vulnerable are irregular (or “undocumented”) migrants, that is migrants with an irregular migration status, who lack residency rights for not fulfilling the legal requirements for entering and/or staying in a country.

Throughout the decades preceding the pandemic, due to the lack of residency rights, irregular migrants’ exclusion from measures and policies of public support, including in the area of health care, had not only been possible, but also persistently emboldened by national policies focused on creating a “hostile environment” for migrants without residency rights (Goodfellow, 2019). Although their current number in Europe is not known, the definition of “irregular migrants” englobes the situation of numerous groups of migrants. Aside from those who entered a country without the required authorisation, many are those who entered with a regular authorisation (e.g. a visa or a residence permit), but then lost their residency rights and did not leave. In fact, “overstayers” are deemed to constitute the largest share of irregular migrants in Europe. This includes, among others, rejected asylum seekers, but also migrant workers upon the termination of employment; migrants with a permit tied to a spousal relationship following the end of such relationship; students who remain in the host country beyond the terms allowed in their permit. Children may also be considered irregular “migrants” since their birth, if they are born in a country where their parents reside with an irregular status. In other contexts, a child may be considered as regularly residing but then fall into irregularity at their eighteenth birthday (Triandafyllidou and Bartolini, 2019).

Ultimately, aside from legal exclusion from society, what mostly characterise the condition of having an irregular migration status is to be subjectable to immigration enforcement and removal. This leads irregular migrants to live a life in the shadows, hiding their identity and status, and with little to no interactions with the authority. This is particularly true where there are no “firewalls” between service providers and immigration enforcement authorities, that is legislation or practices that ensure that no
information collected with the purpose of protecting access to services is shared or used for migration law enforcement; or that migrants are not subject to searches or arrest for immigration enforcement purposes when being present at, or in the vicinity of institutions providing the basic services they are entitled to on basis of their human rights (Hermansson et al., 2020).

This combination of dynamics poses significant challenges for authorities' contact tracing efforts against the spreading of COVID-19. In light of the renewed attention given to the possibility of health authorities’ to interact with the wider population, the pandemic may offer the opportunity to re-think policies that do not provide sound firewalls and push irregular migrants in the shadows. Indeed, both national and local governments have been seeking innovative responses to best reach and assist this group of migrants traditionally excluded by legal provisions and reluctant to contact the authorities. On the one hand, the pandemic exacerbated sanitary, social and economic vulnerabilities of migrants, confirming the abovementioned concerns. It exposed the risks of having groups of informal residents, regardless of their migration status, at the margins of society with limited or no contacts with the authorities. On the other, this new context revamped the policy debate over the opportunity of introducing measures of formal inclusion of irregular migrants into European societies, partially departing from the long-established policy trend to exclude irregular migrants to encourage their departure.

We question whether a re-thinking of strictly exclusionary policies is being favoured by considerations of public health related to access to treatment for communicable diseases, and by reflections on the essential contribution to local economies and societies in crisis (particularly in the agricultural and care sectors) made by migrants.

This chapter provides a magnifying lens on the specific vulnerabilities of, and policy responses to, irregular migrants during the first months of the COVID-19 pandemic, with the aim of contributing to the raising knowledge of the impact of the pandemic on populations at the margins of society. Other articles and reports have already focused on national and local measures adopted during the pandemic targeting migrants and refugees in general, on asylum seekers at European borders, or on migrants in humanitarian settings (Kluge, IOM, 2020, Hargreaves et al, 2020). Many of the challenges faced by irregular migrants in Europe are similar to those faced by all migrants and refugees irrespective of migration status (such as linguistic barriers to access information, structural limitations to access public benefits and risks of exploitation). However, this chapter responds to the need of investigating the vulnerabilities specifically related to having an irregular status, which often translates into the conditions of being legally barred from accessing a wide range of services and the formal labour market (and to some extent related labour rights) and being subject to the constant risk and fear of being removed if detected by immigration authorities.

As we already navigate through subsequent “waves” of COVID-19, this chapter analyses national and local policy responses specifically targeting irregular migrants adopted across Europe in the first six months since COVID-19 spread through the continent. It compares how these measures depart from traditional policy approaches to the presence of irregular migrants and their access to services, and theorises on the lessons for longer-
term policy responses to manage irregular migrants’ presence once the pandemic subsides, or in case of subsequent COVID-19 waves.

We start our analysis by contextualising irregular migrants’ vulnerability within the “Fortress Europe” (Delvino, 2020) approach adopted along the decades preceding the pandemic. We then turn to the specific impacts the pandemic has had on irregular migrants and, relatedly, on policy approaches to this group of migrants. Finally, we look at the policy measures adopted at national and local level between March and August 2020 to mitigate the new and old challenges lived by irregular migrants. This chapter finds that traditional exclusionary policy approaches to irregular migrants prove counterproductive when confronted with the health, social and economic crises induced by the pandemic. It concludes by offering lessons for longer-term policy responses on managing irregular migrants, their access to services and regularisations, throughout subsequent waves of COVID-19 in Europe and once the pandemic will be over.

As sources of our evidence, we relied, on the one hand, on extensive desk research carried out between March and August 2020, focusing mostly on official policy documents, reports and official online communications by governmental institutions released in periods of lockdowns. On the other, we complemented and corroborated our findings through two dedicated roundtable discussions (April and October 2020) and personal communications with local officials responsible for providing services to irregular migrants (including, among others, service providers in Barcelona, Frankfurt, Ghent, Milan, Utrecht, and Zurich) through their involvement in the City Initiative on Migrants with Irregular Status in Europe (C-MISE), a knowledge-exchange programme between European cities specifically dedicated to the provision of services to irregular migrants. The research findings presented in this chapter were collected during and following the first C-MISE roundtable dedicated to irregular migrants during the COVID-19 pandemic (April 2020) and then presented to local service providers in a working paper at the second C-MISE roundtable (October 2020). This allowed to collect information from cities across Europe in the first roundtable, and then use the second roundtable to corroborate, expand and update our findings. This chapter therefore presents a revised, corroborated and updated version of the findings initially included in the C-MISE working paper (Mallet and Delvino, 2020).

Irregular migrants’ vulnerabilities predating the COVID-19 pandemic

Irregular migrants’ vulnerability lies in the intersection of their migration status, their socio-economic conditions and, often, their position as ethnic minorities. Prior to the pandemic’s outbreak, irregular migrants’ access to services, including those related to basic human needs such as health and shelters, had been strongly restricted by immigration policies in Europe (Goodfellow, 2020). EU Member States have generally kept irregular migrants’ access to public services to a minimum: in 2015, a mapping study of these migrants’ entitlements to health care and education in Europe found, for instance, that only emergency healthcare was being ensured to irregular adult migrants across all EU Member States, while higher levels of care were accorded only in some states or in relation to specific situations (children or certain medical conditions) (Spencer &
Hughes, 2015). In five EU countries, there was no entitlement for children with irregular status to attend mandatory education (Spencer & Hughes, 2015).

Only for a handful of exceptions policymakers extended access to services to irregular migrants out of concerns related to, among others, public health or public order. Although limited, the instances of national (re)inclusion of irregular migrants in the last decade have been increasing (Delvino, 2020). One such example is the extension of access to free HIV care for irregular migrants in 2012, which followed a significant debate at parliamentary level on, in particular, the public health implications of excluding this section of the public (Delvino, 2020). In 2015, public health concerns also led EU Member States to provide extended access to care – that is beyond the level of care normally afforded – to irregular migrants and at least 15 EU states allowed access to screening for HIV and 10 allowed access to HIV treatment. A greater number of States (17) also allowed access to screening for other infectious diseases such as tuberculosis, of which 14 also allow access to treatment, at least for tuberculosis. Conversely – and importantly – in 11 EU countries irregular migrants were not entitled to access screening or treatment for any infectious diseases¹ – a finding that could assume a whole new dimension in the context of the COVID-19 pandemic. (Spencer and Hughes, 2015). Even when irregular migrants have been legally entitled to certain services, administrative prerequisites that they cannot meet or high costs of services (not covered by public funds) might in practice nullify the entitlement (Larchanché, 2012). In other cases, migrants are deterred from seeking services out of fear of removal (Ramos-Sanchez, 2020) due to the lack of a ‘firewall’ between the service provider and immigration authorities.

From a legal standpoint, irregular migrants’ exclusion has been based on the principle that Member States of the EU should not tolerate the presence of third-country nationals without residency rights and have to remove them to a third country. Thus, policies on irregular migration developed a system of incentives to encourage return (e.g. assisted voluntary return packages) and disincentives to stay for irregular migrants, including setting up a ‘hostile environment’ by denying these migrants access to most public services (Hatton, 2020). The criminalisation of irregularity and the exclusion from the formal labour market have often led to exploitative work environments that perpetuate their exclusion (Ucakar, 2020). Irregular migrants have been therefore dependent upon work characterised by high volatility and low wages, often in particularly exploitative contexts in the agricultural, care and other sectors (MacPherson, 2020). Given their combined exclusion from the formal labour market and social support, they are at higher risk of living in destitution, homeless or in overcrowded and degraded settings.

The exclusionary trend of national policies has also been reflected in the shrinking of avenues for regularisation: before the COVID-19 pandemic, European countries had not carried out any significant regularisation programme in the 2010s (with the exception of Poland in 2012), breaking with a previous tradition of European states coming to terms with the presence of irregular migrants through ‘mass amnesties’ (Delvino, 2020). This hardening towards immigration policies is in line with policy arguments that

¹ Bulgaria, Cyprus, Czech Republic, Denmark, Estonia, Finland, Lithuania, Luxembourg, Romania, Slovakia and Slovenia. In some cases, they may be able to access screening and treatment on the payment of the full cost of that service. Ibidem.
regularisations would be a ‘pull factor’ for irregular migrants and therefore at odds with the EU prioritisation of curtailing irregular migration – even though there is no clear evidence of the effectiveness of exclusionary policies in deterring the arrival and permanence of irregular migrants (Leerkes, 2016).

**Irregular migrants’ vulnerabilities during the COVID-19 pandemic**

The pandemic heightened the various intersecting vulnerabilities faced by migrants with irregular status, making them one of the most vulnerable groups in European societies. Recent figures indicate that they constitute one of the populations most exposed to COVID-19 given their occupational profile and living conditions at the margins of society (Open Society Foundation, 2020). Irregular immigrants are disproportionately represented in what is considered essential work, such as food and delivery services and their position as key workers has made them particularly at risk because of the nature of their work (Fernandez-Reino & al, 2020). These occupations typically pose greater hazards and offer fewer protections against the contraction of illnesses like COVID-19. They limit the ability to abide by lockdowns, and their public-facing nature places migrants at increased risk of exposure and mental health-related issues (Douglas et al, 2020; Rothman et al, 2020). Irregular migrants’ restricted access to healthcare or basic services also presents significant challenges for authorities’ contact tracing efforts against the spreading of COVID-19. Indeed, prior to the pandemic, their overall exclusion from mainstream health services in most European countries made them less aware and able to navigate sometimes complex healthcare systems. Their general lack of awareness of their rights, coupled with heightened fears of deportation, further reduces the likelihood of them accessing such aids and hampers efforts to medically monitor migrants even in localities where free access to treatment is granted (Kaplan, 2020). As a result, reports suggest that irregular migrants have been dying from COVID-19 without accessing any healthcare (Bulman, 2020). Their exacerbated fear of deportation has led some to forgo or delay urgent medical care, which can prove fatal in the current pandemic (Grunau, 2020).

Irregular migrants are also overly represented in some of the industries most impacted by lockdowns and their subsequent economic fallout, such as hospitality and personal services. Because of their status, they rely on the informal economy for income. As this has been hit particularly hard by confinement measures, many were left without any income, labour protections or social security support. The economic fallout also raised the risk of more migrant workers becoming irregular as a consequence of losing employment. As a result, they also become more vulnerable to being exploited and/or falling into extreme poverty (Sanchez & Achilli, 2020).

In addition to their vulnerable professional situation, migrants with irregular status often live and travel under conditions that deny them the ability to respect preventative measures suggested by governments and health authorities (Orcutt, et al. 2020). Social distancing is complicated for those who live in crowded housing (Ullah, et al, 2020).

Overall, vulnerabilities that predate COVID-19 such as the lack of language skills, social networks, and a dependency upon informal and precarious occupations for income further heightened during the pandemic for migrants with irregular status. Despite
greater needs related to the economic fallout, the lockdowns have generally prevented them from accessing relief and support. While studies suggest that migrants tend to underutilise social services, their vulnerable status, partly due to the fewer resources at their disposal, makes them uniquely dependent on these services (Mohanty et al, 2005).

**National policy responses to irregular migrants during the pandemic**

The COVID-19 outbreak led various European governments to pass emergency legislation designed to mitigate the health and social impacts of the pandemic on the whole population, including irregular migrants, and facilitate access to services. Several governments adopted measures that temporarily broke with the traditional exclusionary approach towards irregular migrants including, as outlined below, extending their entitlements to services, opening avenues for regularisation, and releasing them from detention (OECD, 2020). These measures were partially inspired by humanitarian concerns, but also by public health reasons, the need to fight back the spreading of COVID-19, concerns over the continuity of food provision and other essential services, and addressing unintended consequences of confinement measures. Importantly, these measures suggest that the crisis led to new reflections on the negative consequences of exclusionary approaches as well as on the important role played by irregular migrants in sectors that are essential for national and local economies. The negative impacts of exclusionary policies are not new. However, the role that irregular migrants play in the economies of their host countries has been brought to the fore during the pandemic.

Many of the national measures adopted in the first months of the COVID-19 pandemic in Europe may be temporary and contingent to the pandemic. However, as the crisis continues - and intensifies - they may lead to the implementation of more permanent inclusive national policies. Indeed, the long-term benefits of some of the national measures addressing negative impacts on irregular migrants might be perpetuated. For instance, most European countries have granted irregular migrants free access to treatment for COVID-19 (OECD, 2020). As the pandemic continues to progress in Europe, some countries, such as Ireland, have implemented additional firewalls to ensure that no data is shared between service providers and immigration authorities in compliance with the firewall principle (Wallis, 2020). Similarly, the UK government has provided guidance to the National Health Service to ensure that no immigration checks are performed for people accessing testing and treatment for COVID-19, which are provided for free to all foreigners (NHS, 2020). These measures, while implemented to widen access to health care specifically during the context of the COVID-19 pandemic, may prove both useful to keep in place and hard to scrape.

Certain EU countries have addressed barriers to access services through the temporary regularisation of migrants with irregular or precarious status. Regularisations have been linked to the role played by irregular migrants in certain essential sectors, or to the work suspension of immigration offices during lockdowns. In Italy, for example, the government passed a law on 13 May allowing for the temporary regularisation of an estimated 200,000 irregular migrants working in the agricultural and caregiving sectors to address likely labour shortages due to the lockdown measures (Palumbo, 2020). Portugal announced that it would grant residence status to everyone with a pending
residence application on any ground (Euronews, 2020). Greece also introduced an exceptional fast-track procedure for hiring irregular migrants in the agricultural sector to cover urgent needs, as well as an automatic 6-month extension of work permits granted on an exceptional base to irregular migrants. Similarly, Spain developed a fast-track procedure to grant residence and work permits for precarious migrants with a background in the health sector (OECD, 2020).

Given the various travel bans and the closure of immigration offices during the lockdowns, most European countries also extended the validity of those holding temporary residence permits to avoid migrants lapsing into irregular status (‘befallen irregularity’). While some countries provided specific grace periods (France gave a 90-day extension), others only indicated that they would tolerate late applications for renewal (e.g. Belgium) or offered an extension until the end of the state of emergency (10 days after in Estonia, 45 days after in Hungary) (OECD, 2020). Regularisations are potentially the best example of the ground-breaking impact of the crisis on national approaches towards irregular migrants: as discussed above, almost no large-scale regularisations had been conducted in EU countries in the last decade, in line with an EU policy line strongly opposed to regularisations, considered as a ‘pull factor’ for irregular migration. By making evident the necessary role played by irregular migrants in certain essential sectors, the crisis could potentially inspire a longer-term re-thinking of blanket oppositions to regularisations.

Additionally, the release of irregular migrants from detention centres which occurred in several EU countries tested the adequacy of resorting to detentions in the first place, especially in periods with limits on international mobility and lockdowns. Indeed, due to the poor sanitary conditions and the inability to observe social distancing in detention centres, combined with the impossibility to return those held in the centres for the foreseeable future, some EU countries proposed alternatives to the (costly) detention method. For instance, Spain announced on March 18 that it would (temporarily) release immigrants held in detention centres (Human Rights Watch, 200). Since returns have not been possible, irregular migrants have, at times, also been given accommodation in state-funded reception programmes run by NGOs (Pallares Pla, 2020). Other European countries have also implemented similar measures: Belgium and the United Kingdom each released an estimated 300 migrants detained in immigration facilities in March and May respectively (Human Rights Watch, 2020). In the UK and the Netherlands, the general trend during the first months of the pandemic has been to use alternatives to detention such as case management, which entails a customised project usually coordinated by NGOs or local authorities and leads to the active involvement of migrants in finding a solution to their case, possibly through regularisation (Roman, 2020). Though most EU countries have not formally stopped forced returns, these have often been suspended or significantly reduced (OECD, 2020).

Certain European countries increased irregular migrants’ entitlements to access services beyond health care (PICUM, 2020). For instance, Ireland set up a website to allow

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2 Under EU law, detention is legal only insofar as there are reasonable removal prospects, or it should otherwise be ceased

workers with irregular status who have lost their job due to COVID-19 to apply for ‘Pandemic Unemployment Payment’ (Department of Employment Affairs and Social Protection). This benefit, unique in Europe, was designed to provide relief to those most affected by the economic fallout of the pandemic, including irregular migrants who lost their employment and could not access unemployment benefits (Bellanova, 2020).

**Local authorities’ responses mitigating the impact of the pandemic on irregular migrants**

Traditionally, the provision of services to irregular migrant has been a point of friction between national and local authorities. Indeed, national governments have sought to curb irregular migration by reducing the number and scope of entitlements that irregular migrants may receive. Concerned about what has been coined ‘welfare magnet’ (Jakubiak, 2019), they have been implementing increasingly restrictive policies in order to act as a deterrent for migrants, particularly irregular ones. However, at the local level, municipalities are required to provide some services to people regardless of status as a matter of law. To comply with international human rights standards, they are expected to provide a number of basic services. Local authorities may also want to take initiatives to reduce the number of people with irregular status, whether it be to achieve their social policy objectives, to ensure the efficient administration of public services, to respect professional ethics, or to reassure the public opinion of safeguard their public image (Delvino and Spencer, 2019). As a result, disparities between national guidelines and local responses designed to ease the burden of irregularity can lead to tensions in the relationships between national governments and local authorities (Spencer, 2018).

In recent months, the pandemic has served as a catalyst for change, as national governments have been seeking the support of local authorities on issues such as re-sheltering those released from migration detention. Additionally, the relatively more inclusive national policies towards irregular migrants implemented during the COVID-19 pandemic set a new context for local authorities, as prior to the pandemic one of the most challenging aspects for municipalities providing services to irregular migrants had been to find a balance between highly restrictive national policies and the de facto presence of residents with irregular migration status and their needs (Delvino, 2017). The pandemic created a context which appeared to be more favourable to the adoption of more inclusive measures that mitigate the negative impacts of migrants’ exclusion.

First, several cities implemented initiatives facilitating access to healthcare services, at times extending the scope of treatments beyond those provided by national authorities. Indeed, access to healthcare became crucial to fight the progression of COVID-19. Various cities, including Zurich and Frankfurt, allocated a specific portion of their budget to cover the costs incurred by hospitals, pharmacies and local ambulatories to care for people without health insurance, including irregular migrants (Mallet & Delvino, 2020; City Council of Europe, 2020).

The pandemic also gave new impetus for local interventions in the provision of shelters and housing for irregular migrants, often driven by new capacity and sanitary challenges.
The situation has required the provision of shelters to an increasing number of individuals to allow for social distancing and the respect of national lockdown measures for homeless individuals. The release from detention of irregular migrants without alternative accommodation has also meant that some local authorities had to take over the responsibility of sheltering these individuals. Cities, including Amsterdam and Milan, thus increased dramatically the number of shelters available and extended the use of winter shelters into the spring and summer months, set up new facilities or repurposed municipal buildings (Mallet & Delvino, 2020). They also block-booked hotel rooms to allow rough sleepers, regardless of immigration status, to follow self-isolation guidelines. Some cities, such as Bristol (UK) saw an opportunity to start working on finding longer-term solutions for more sustainable accommodations (Intercultural cities, 2020).

Besides shelters, cities have intensified their provision of food and other basic needs, responding to raising needs of local residents, including irregular migrants. For instance, in Italy, municipalities received funds to distribute food vouchers to people in need, with priority given to those that have not received any other public assistance. A tribunal in Rome established that municipalities must not exclude irregular migrants from the provision of food vouchers. Each municipality is responsible for determining the criteria for allocating the vouchers and the amount to be distributed, but as the purpose of this benefit is to help those in vulnerable situations, the Roman tribunal found it illegitimate to set conditions not requested by the law such as having a registered address, which de facto would limit the number of beneficiaries. As stated by the court, this includes irregular migrants in light of their fundamental rights necessary for a free and dignified life (PICUM, 2020).

The economic fallout and generalised economic crisis induced by the COVID-19 pandemic have led several cities to revisit the possibility of assisting migrants financially, regardless of status. For instance, the city of Barcelona (Spain) increased the allocation of economic aid (including exemption from the payment of certain fees and services) and extended financial support to irregular migrants. Two regional governments in Spain – Balearic Islands and Canary Islands – also increased the protection of irregular migrants by providing them a basic income (Pallarés Pla, 2020).

As COVID-19 suddenly forced most activities to shift online, it became fundamentally important that some of the most vulnerable members of society such as irregular migrants keep access to basic services on which they rely daily for subsistence. The online shift left cities struggling to ensure the continuity of certain services such as immigration or homelessness case management. Additionally, as recommendations on COVID-19 have been rapidly evolving, it has also been crucial that irregular migrants gain regular access to up-to-date information to ensure that they followed the latest guidelines. The best way to ensure this is by providing free access to internet – sometimes in alternative settings as libraries or other usual internet access points may have closed or may have been operating on reduced hours. Many cities have adopted communication and campaigning strategies specifically targeting their irregular population, through the use of innovative communication channels, providing specific information relevant to that group (e.g. on their entitlements to get treatments), and sharing information in
migrants’ native languages. For instance, the city of Leeds (United Kingdom) has put in place the “Migrant Access Project (MAP) Virtual Drop-In and Facebook” to provide information on COVID-19 related services for vulnerable migrants, particularly irregular migrants. Specifically, the city created a weekly virtual drop-in during which over a dozen migrant community networkers provide accurate information regarding COVID-19 to their fellow compatriots. To reach different age groups, a Facebook page was also created to relay this information (Intercultural cities, 2020).

Even though cities do not have authority to grant residence permits to third country nationals, they may play a crucial role as intermediaries between irregular migrants and national authorities in charge of immigration procedures. So far, local authorities’ scope of activity in this field had been strongly limited by the general lack of avenues for regularisation in Europe (Delvino and Spencer, 2019). This evolved during the pandemic, with national laws exceptionally introducing avenues for regularisation and fast track procedures for the concession or extension of work and residence permits, which has opened new opportunities for local authorities to facilitate access to these processes. Indeed, innovative local measures included mediating with the national government to identify and present target groups (e.g. essential workers or workers with medical training) of potential candidates for regularisation. The city of Barcelona, for instance, actively reached out to migrants in the city and identified at least 300 medical professionals with irregular status. The city then used this list of professionals to press on the governments to approve the regularisation of migrants working in essential sectors (Moreno, 2020; Martin, 2020; Piulachs, 2020).

Indeed, the pandemic and its serious social and economic consequences on migrant communities seem to have favoured a new impetus of local authorities’ advocacy towards national governments asking that national policy expand the legal and funding possibilities for cities to respond to the social needs related to migrants with irregular status. At times this has resulted in mutual understanding between the two levels of governance and in commitments from national authorities towards local authorities, an outcome probably favored by a new policy awareness of the contrasts between irregular migrants’ extreme vulnerability and the essential role they could play in local economies, as well as a renewed acknowledgment of the central role played by local authorities in identifying and addressing the most pressing social needs. In the UK, Mayors and Councilors of several cities, including London, Bristol, Birmingham and Oxford, wrote to the Home Office openly advocating for widening access to public assistance to migrants with “No Recourse to Public Funds” (NRPF), which notably include irregular migrants (Mallet & Delvino, 2020). Another example is the Mayors Migration Council (MMC), which launched the Global Solidarity Campaign for Inclusive COVID-19 Response and Recovery. The mayors of Bristol, Milan and Zurich led this initiative in Europe with the aim of promoting the inclusion of all migrants, regardless of their migration status, and building an equitable, sustainable response to the pandemic. The MMC has also created a Live Action City Tracker and Resource Hub that provides city leaders with practical solutions to ensure that vulnerable migrants – including irregular migrants – are included in COVID-19 responses. The goal is to provide access to services to all migrants – including those with irregular status – but also to empower them by advocating for the
regularisation of essential workers and to combat misinformation, racism and xenophobia to strengthen recovery efforts (Mayors Migration Council, 2020).

Conclusion

This chapter focused on how the COVID-19 pandemic impacted irregular migrants in Europe. It analysed the new scenarios reshaping policies on irregular migrants, and explored local authorities’ initiatives and practices addressing the social challenges posed to irregular migrants by the pandemic, the lockdown measures and subsequent economic fallouts.

The pandemic is highlighting old and new social, public health and economic challenges for national and local authorities. Before the pandemic, immigration policies had increasingly restricted access to services for irregular migrants. This included access to care for communicable diseases – a circumstance that today might seem counterintuitive in light of the world’s renewed awareness on public health. This trend was temporarily reversed during the pandemic, and since the start of lockdowns in spring 2020 national authorities began adopting more lenient and less restrictive approaches. This reversal is mostly due to national concerns in terms of public health (such as in relation to the extension of access to healthcare or the release from detention), but also efficiency of national immigration systems (as in relation to the extension of residence permits during the closure of immigration offices) or public order and economic concerns (as in the case of regularisations of agricultural workers). At the same time, these measures also demonstrated national authorities’ renewed awareness of the legitimacy and necessity of irregular migrants’ access to basic services and, importantly, of their role in national and local economies.

Regularisations best symbolize this shift in policies, as before 2020 they were explicitly resisted by national and EU policymakers. This change was also reflected in cities’ scope of action to provide services to irregular migrants. Indeed, a renewed awareness of the central role played by local authorities in managing social challenges that would normally be claimed by national competences can also be observed. Paradoxically, despite relatively limited resources and competences in the field of migration, local authorities are at the forefront of responding to the social needs of society. This ultimately allowed an increasing number of cities in Europe to feel confident in openly advocating with national authorities in support of irregular migrants’ access to services.

Many of the national measures adopted in the first months of the COVID-19 pandemic in Europe are intrinsically temporary and contingent on the pandemic. Measures adopted in the period of reference of this study (March-August 2020) were implemented at different stages of national responses to the pandemic, with some measures being exclusively contingent on the enactment of a lockdown. In fact, some measures, including for instance the interruption of migrants’ detention, were partially or completely discontinued with the lifting of lockdowns. Nevertheless, as a second wave of COVID-19 infections is on the rise in Europe and new lockdown strategies are being implemented,
measures adopted during the first set of lockdowns may be resumed and offer an example for the adoption of new and longer-term measures.

It remains to be seen whether the crisis will allow for a long-term rethinking of restrictive national policies. This new context raises the question of how policy approaches will develop as the pandemic evolves towards new and different forms of lockdowns, but also eventually when the pandemic will come to an end. Will there be a slow return to the status quo ante with a renewed exclusionary attitude towards irregular migrants? Alternatively, will there be a renewed vision of policies on irregular migrants stemming from considerations on the public health benefits of allowing access to certain public services, as well as the acknowledgment of migrants’ role into European societies and economies? In both cases, how will municipal authorities ‘keep the gains’ that they have made and ensure that service provision to this group will not again be as challenging and controversial as it was before the pandemic?

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