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MIGRATION DIALOGUES IN TIMES OF COVID-19

by Eden Alemayehu and Caroline Ambiaux

The widespread national lockdowns witnessed since March 2020 unveiled the fragility of international cooperation. As Secretariat to four major Migration Dialogues, ICMPD and their respective Chairs mobilised Dialogues' rich experience, knowledge and networks to counter fragmented responses to a crisis that goes beyond health and the economy.

More than 6 months into fighting COVID-19, most countries in <u>Europe</u> and its <u>neighbouring</u> <u>regions</u> are cautiously re-opening their doors to international travellers while preparing for a possible <u>second wave</u>. Despite their different experience of the pandemic, the reaction of nearly all national governments included a mix of <u>migration control tools</u> with a pinch of <u>protectionist fixes</u>. They turned inward by closing borders and imposing mobility bans to limit contagion and <u>protect national welfare systems</u>. It appeared as if the pandemic had upended openness or any multilateral dialogue on the topic of mobility. In reality, international cooperation on migration never slowed down, not in the least under the ICMPD-facilitated Migration Dialogues: the <u>Budapest</u>, <u>Prague</u>, <u>Raba</u>t and <u>Khartoum Processes</u>.

Since March 2020, these Dialogues have reactively adapted their agendas, allowing their participating countries to explore COVID-19 implications on mobility and migration. Their priority is to help their stakeholders understand trends in managing health insecurity in a bid to inform policy responses related to migration and mobility.

The response of Migration Dialogues

Dialogues are not new to crises shaking migration governance. Some have been around for almost three <u>decades</u>. Some were even born out of <u>border crises</u>. All have continued to uphold and strengthen their mandate during the <u>2015 migration crisis</u>. They have the experience and institutional flexibility required to adjust to the emerging challenges and needs of their participating countries. This is what the Budapest Process did in its <u>virtual meeting on labour migration</u>. It brought European and Asian partners to an open discussion on their national response to current challenges that COVID-19 poses on their labour markets, welfare and protection of labour migrants, while also looking into the medium and longer-term trends and solutions.





Besides providing a virtual space for experience sharing, Migration Dialogues have continued to work with regional organisations alongside states. This is, for example, the case for the Rabat Process' engagement with ECOWAS in West Africa. For a regional organisation that operated in the epicentre of the Ebola crisis in 2014, ECOWAS brings to the partners not only its crisis management experience but also real-time data on COVID-19 impact on free movement in the region.

It is in times like these that the Dialogues' unique platforms for *knowledge* exchange become critical. <u>Virtual meetings</u> such as that of the Khartoum Process allow members to avoid pitfalls in their national responses by learning from one another. They engage European, East African partners and the African Union Commission in finding ways to collectively mitigate the impact of the pandemic on regional mobility.

COVID-19 has not interrupted the Dialogues' capacity to feed into policy discussions based on up-to-date and reliable information. Indeed, all Dialogues build political momentum through strong evidence and experience-based policy recommendations. For example, the Rabat Process is currently working with France and the <u>Mixed Migration Centre</u> on field research investigating the impact and response to COVID-19 on refugees and migrants in two transit cities: Tunis and Bamako.

The Prague Process has taken evidence and scenario-based policy discussions to a whole new level. It has launched a new series of <u>expert-led webinars and policy briefs</u> on the possible consequences of COVID-19 on labour, protection, and anti-trafficking efforts in Eastern Europe and Central Asia. The Dialogue has also made it its mission to open its webinars beyond its participating countries in an attempt to bridge the sharing of insights among different regions.

Finally, a wealth of experience and knowledge is only relevant when coupled with outreach to the right government networks, by bringing relevant parties around the virtual table. Naturally, the interpersonal contacts and bilateral talks around meetings are how Migration Dialogues help to seal mutual understanding and trust. Nevertheless, Dialogues have the advantage of strong networks built overtime to keep their focal points' engagement going even under times of remote collaboration. For instance, the Budapest Process used <u>its flanking project</u> to provide a <u>digital training programme</u> to officials' training. Similarly, the Prague Process rolled out <u>its first online training</u> on identification and profiling at the border. It is now actively working on widening the scope of distant learning tools for migration authorities in its 50 participating states. By building upon existing networks and encouraging their





counterparts to leverage the tools further, Migration Dialogues remain present albeit not physically in their focal points' daily work and beyond.

Migration Dialogues: Platforms for joint action

No national or bilateral solution can contain COVID-19 or reinstall international mobility. Isolation and border closings are not the sustainable way out, neither for the economies nor for the people. The return to any sort of normality will require strong international cooperation which Dialogues can enable. Intergovernmental Migration Dialogues offer that unique and flexible platform for states to discuss and agree on joint operational measures, share data, monitor and steer the reopening process. Using their unique characteristics to further multilateral debate is how Migration Dialogues contribute to the effective management of migration and mobility, which is key to mitigating the mid and long-term impacts of COVID-19.

Contact Information For more information please contact:

Policy Unit

International Centre for Migration Policy Development (ICMPD) Gonzagagasse 1, 5th floor 1010 Vienna, Austria

Email: Policy_Unit@icmpd.org

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