

COMMENTARY

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REFUGE IN THE TIME OF CORONA

by Martin Wagner and Caitlin Katsiaficas

As the coronavirus has upended life as we know it around the globe, asylum systems have not been spared. With national governments acting in different ways to stem its spread, the pandemic has resulted in a series of measures that have far-reaching consequences for asylum systems and applicants for international protection.

With our lives put on hold due to COVID-19, so too are asylum systems across Europe. As a result, seeking asylum at and within Europe's borders is at present a difficult, if not unrealistic, prospect for many whilst asylum services within individual EU countries have drastically cut back face-to-face services. COVID-19 has managed to do what neither terrorist attacks, the 2015-2016 'migration crisis' nor the strongest critics of the Common European Asylum System (CEAS) managed: in just a few weeks, it closed down most components of national asylum systems, and the CEAS as such. Europe is hardly alone in this regard: Canada, Mexico and the United States have closed borders to non-essential travel, barred asylum seekers from entering, postponed interviews and/or paused asylum processing.

Differences of national approach within the EU mirror closely the divisions that have held back a reform of the Union's common asylum rules. Hungary, for example, was one of the first to close its borders whilst <u>Sweden's remain open</u> for now (although closed to non-essential travel from outside the EEA and Switzerland, with Swedes <u>advised against non-essential</u> <u>travel</u> abroad until 15 June 2020). Countries like Germany and especially Sweden are reluctant to impose far-reaching restrictions on citizens, with the latter allowing restaurants to remain open and people to move freely. Meanwhile, Italy and Austria quickly introduced and enforced severe restrictions on individual rights.

The pandemic has forced policymakers to grapple with the question of how to balance concerns of public health with access to international protection. But what does all this mean for those trying to access refuge in Europe?

 Travel restrictions versus access to protection: The EU has <u>banned non-essential</u> <u>travel</u> to the area first for 30 days (until mid-April) and invited the Member States to <u>extend it until 15 May</u>, with internal border controls reintroduced within Schengen until further notice. However, the EC also clarified that <u>persons in need of international</u>





protection are exempted from the travel ban with heath checks for those who enter EU territory. On 17 March, the UN Refugee Agency (UNHCR) and the International Organization for Migration (IOM) announced that they would temporarily suspend refugee resettlement-related travel. Following a spike in asylum seeker arrivals from Turkey, Greece's Prime Minister declared on 1 March that the country would not accept any new asylum applications for one month, but later announced that it would not extend this policy. Hungary indefinitely suspended asylum applications on 1 March, citing concerns to public health over irregular arrivals from Iran. Meanwhile, initially required to quarantine, migrants picked up by search-and-rescue vessels are now barred from disembarking in Italy, with the government deeming its ports 'unsafe'. Other countries have taken measures that may stop short of suspending the 1951 Refugee Convention but still have the effect of severely restricting access to international protection. For example, Belgium's Federal Immigration Office announced it would stop physical registrations indefinitely as of 17 March, with applicants asked to make an appointment online to register their claims. In contrast, Sweden is still permitting applications, with some operational modifications to its services.

2. Social distancing impossible in crowded reception facilities: With social distancing being one of the most propagated ways to avoid infection, people across Europe are being asked to stay home. But for asylum seekers in reception facilities, social distancing in their place of residence is extremely difficult - if not impossible. These facilities typically accommodate people from multiple countries together in centres of various capacities, ranging from small buildings housing a few dozen people to larger centres with several hundred or even several thousand places. Six or more applicants may share one room and may share their canteen with all residents. Implementing social distancing is not an option in such situations, especially in overcrowded centres. This puts the health of both residents and staff who work with them at risk. Residents in centres with confirmed infections are currently in quarantine in Suhl (Germany), Traiskirchen (Austria), Ritsona and Malakasa (Greece), and Hal Far (Malta). The situation is most dire in Greece, where island camps were already massively overcrowded and unsanitary before the pandemic. The Greek government has moved to restrict movement among residents in these island camps, only permitting a limited number of people to leave per hour. In other efforts to halt the pandemic's spread, the Netherlands' Asylum Seeker Agency (COA) has barred new arrivals at its accommodation centres since 15 March but has opened an emergency





<u>shelter</u> for newly arrived applicants. France has <u>closed its reception centres</u> from 16 March to at least 15 April.

3. Restricted access to asylum procedures: With more than 800,000 applications already pending before the pandemic, the crisis will further swell asylum backlogs in the EU and Schengen associated states. Most asylum services have reduced or ended inperson service provision and tried to move processes online where possible. To reduce personal contact, France announced that applicants must submit their claims by mail rather than in person; Germany's Federal Office for Migration and Refugees (BAMF) also requires applications to be submitted in writing. As another consequence, asylum proceedings are partially or completely paused in many countries. Greece's Asylum Service announced on 13 March the temporary suspension of all services, including applicant registrations, interviews and appeal submissions, until at least 10 April. While asylum seekers are still able to register in the Netherlands, all other steps in the asylum procedure, with the exception of security and medical check-ins, are on hold. The Dutch migration service (IND) declared it would stop interviews until at least 28 April because hour-long meetings with applicants, who potentially travelled several European countries, posed high risks for all through parties concerned. France has postponed interviews scheduled from 16 March to 15 April, except in exceptional circumstances. Appeals hearings in front of its national asylum court (CNDA) are suspended until 24 May. Austria has suspended procedural time limits for appeals (generally, not only for asylum applications) until 1 May.

To keep asylum processes moving while respecting public health considerations, Germany is adjudicating applications <u>without conducting asylum interviews wherever possible</u>. Applicants in Portugal <u>can register to present their claims</u> although their appointments will be postponed, and people with pending applications will be <u>treated like permanent</u> <u>residents</u> until 1 July.

Looking ahead

Governments are understandably fixated on the pandemic, to the exclusion of much else. They must answer difficult questions and find solutions in challenging and evolving situations, including dilemmas that concern core principles of international refugee law and fundamental human rights as well as public health for all (migrants, those working with them and receiving societies). Although terrorism has long been a central concern of those thinking about the security-related facets of migration, health is now front and centre.





In this bleak landscape, solidarity has arisen as a key, community-driven response to an unprecedented challenge. Could the solidarity which has been so contested in the area of asylum become more political viable in the post-corona era? We have already seen movements to acknowledge and utilize the various potentials of asylum seekers and refugees by, for instance, making use of their <u>medical skills</u> to address current health care needs or recruiting them as <u>fruit and vegetable pickers</u> key to the agricultural industry and food supply chain. And with Greece having pushed to decongest its island camps <u>currently hosting over 40,000 asylum seekers</u>, efforts to relocate unaccompanied minors to <u>other Member States</u> have begun, albeit slowly. Perhaps this crisis could serve as a turning point for discussions about solidarity and migration – although this is by no means guaranteed.

One feature that clearly arises from this pandemic is that the disease does not discriminate based on nationality. Indeed, it affects us all: physically on our health and existentially on our jobs and the lives to which we were accustomed. In this, we are all in the same boat. This is a moment for new impulses and thinking outside of the box.

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