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► **To cite this version:**

Florian Aumond, Véronique Petit, Nelly Robin. Editorial: COVID-19, migration and Parkours: Ruptures and Continuities. *Revue Européenne des Migrations Internationales*, 2022, 38 (1-2), pp.7 - 36. 10.4000/remi.24251 . hal-04505735

**HAL Id: hal-04505735**

**<https://hal.science/hal-04505735>**

Submitted on 15 Mar 2024

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# Editorial: COVID-19, migration and trajectories: Ruptures and continuities

**Florian Aumond, Véronique Petit, Nelly Robin**, Translated by **Miriam Watchorn**

IN **REVUE EUROPÉENNE DES MIGRATIONS INTERNATIONALES** VOLUME 38, ISSUE 1, 2022, PAGES 7 TO 36

PUBLISHERS **UNIVERSITÉ DE POITIERS**

ISSN 0765-0752

ISBN 9782381940212

DOI 10.4000/remi.19909

Article available online at

<https://www.cairn-int.info/revue-europeenne-des-migrations-internationales-2022-1-page-7.htm>



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## Revue européenne des migrations internationales

vol. 38 - n°1 et 2 | 2022

COVID-19, migrations et parcours. Des mobilités aux prismes de l'immobilité : paradoxes et réalités

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#### Electronic version

URL: <https://journals.openedition.org/remi/24251>

DOI: 10.4000/remi.24251

ISSN: 1777-5418

#### This article is a translation of:

Éditorial : COVID-19, migrations et parcours : ruptures et continuités - URL : <https://journals.openedition.org/remi/19909> [fr]

#### Publisher

Université de Poitiers

#### Printed version

Date of publication: July 1, 2022

ISBN: 978-23-81940-21-2

ISSN: 0765-0752

Electronic distribution by Cairn



#### Electronic reference

Florian Aumond, Véronique Petit and Nelly Robin, "Editorial: COVID-19, Migration and Parkours: Ruptures and Continuities", *Revue européenne des migrations internationales* [Online], vol. 38 - n°1 et 2 | 2022, Online since 31 August 2022, connection on 14 December 2023. URL: <http://journals.openedition.org/remi/24251> ; DOI: <https://doi.org/10.4000/remi.24251>

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# Editorial: COVID-19, Migration and Parkours: Ruptures and Continuities

*Éditorial : COVID-19, migrations et parcours : ruptures et continuités*

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- 1 The six articles in this series were written in response to a call for papers launched on 20 January 2021 entitled “COVID-19, migrations and parkours. Mobility through the prism of immobility: paradoxes and realities”.<sup>1</sup> Interrogating the concept of parkours, defined as “a process shaped by several factors: place (the spaces travelled through), the resources mobilised, and the personal choices made. A parkour is conceived of as involving specific intent and determination – depending on opportunity as well as difficulty and risk. The series also examines the interactions between the many actors (migrants, states, criminal organisations, solidarity groups). And looking beyond these experiences of migration ‘routes’, the authors also consider integration and inclusion in the host society as well as returns to the country of origin as part and parcel of the migration parkour.”<sup>2</sup> Florian Aumond, Véronique Petit and Nelly Robin asked researchers to examine the heuristic value of the concept and to investigate the dynamics of migration in the context of COVID-19 from two points of view: looking at (i) the effects of the health pandemic and its political management on migration parkours and (ii) What COVID-19 revealed about these journeys even as it imposed immobility across the globe. With some limitations due to the consequences of the COVID-19 pandemic on research output, this objective was achieved.
- 2 The researchers were unable to access specific locations and populations during the first phase of the pandemic in 2020 before the vaccination campaigns in 2021 allowed some travellers to move around again in some regions under certain conditions. Lockdown restrictions limiting access to locations and consequences for research conditions meant that many researchers had to redefine their approach, adopt new methodological methods, adapt existing measures and experiment with new ways to overcome the distance imposed by public health measures, both between researchers

themselves and between them and migrant populations, in order to describe their responses, experiences and strategies faced with a situation that complicated their condition as migrants even further. Not all researchers were able or inclined to reconfigure their research. For example, some proposals for articles initially selected for inclusion in this topical collection had to be withdrawn during the editing process when the authors proved unable to reach distant locations or work using their preferred methodologies. Despite these difficulties, the articles in this topical collection report on a range of different contexts. They look at the conditions of migrants in France faced with the management of “immobility” and the many consequences (legal, familial, social, economic, psychological, etc.) of restrictions on freedom of movement. Other articles include an account of the political and legal treatment meted out to different categories of migrants (immigrants, refugees, people from a migrant background) in Brazil, Turkey and Iraq and the role of diasporas and their relationships with their countries of origin in drawing up and implementing arrangements for the repatriation and/or return of emigrants to Egypt, Senegal and Tunisia.

- 3 While the pandemic was experienced and presented as a major crisis – marking a before and after in global history, in society as a whole and in people’s life paths and heralding the advent of a “new world”, this collection seeks to temper this analysis in terms of disruption. The papers provide a nuanced reading of this interpretation, in terms of both the substance and the methodologies used by the authors. COVID-19 was a time like no other, a “pandemic moment” characterised by disruption and discontinuity, yet this series reveals a sense of amplified continuity.

## Context: the “Pandemic Moment”

- 4 All of the articles discuss the “pandemic moment” – defined in Tony Rublon’s paper as “a timespan anchored in temporality and identifiable by a particular chronology”. The chronology of events was determined in specific national contexts by how the health crisis was handled on a political level and by stakeholders on the ground: how was COVID-19 represented? What strategies did they adopt? How did they mobilise? This diachrony was also structured according to morbidity at regional and global level and the progress in understanding the coronavirus. We will not attempt to summarise the different national contexts and the different policies and health protection measures adopted but leave it to the authors to present their findings in more detail.
- 5 While the pandemic moment could be confined to the political and health measures imposed, to epidemiological indicators and to regulatory changes in relation to migration and mobility, it also revealed other, deeper sociohistorical and political temporalities as regards the construction of nation states, the dynamics of identity and of belonging, and the migration flows and policies during which the crisis unfolded. Although it needs some qualification, the “immobility” phase is both proximate and already fading in our information-saturated memories. Objectively recent in terms of history and the passage of time, the confusing succession of events, discoveries, measures and emotional shocks experienced subjectively during this first phase formed the existential backdrop to the crisis. It is important therefore to document the experiences of this unprecedented crisis, especially as the health crisis entered a new phase in 2022. Although the pandemic is not over, it seems to have taken a new turn as vaccination programs are rolled out, immunity is developed and the virus becomes

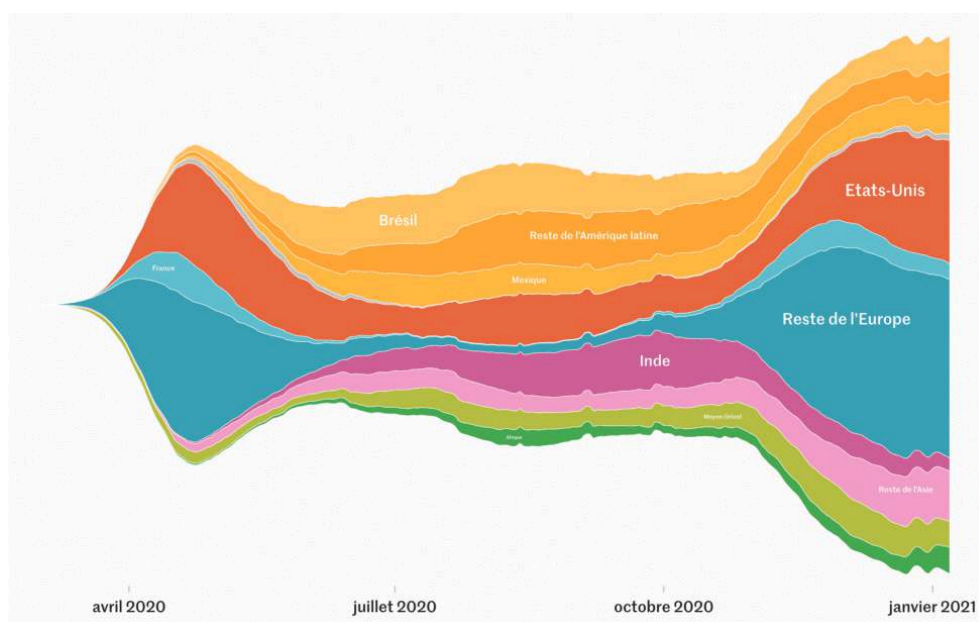
endemic. These developments have prompted more and more governments to shift to policies aimed at reopening society and lifting health restrictions, which were becoming increasingly difficult for people to accept. In an environment where the scale of the social consequences is still poorly understood (Leschi, 2022) and with a different type of crisis disrupting the world order (the war in Ukraine), it remains to be seen what the post-COVID world will look like from a migratory perspective. However, we need to take a more nuanced approach to this return to “normal” according to context. Take China, for example, and the precautions taken by countries that are shifting from a “zero-COVID” policy.

- 6 The pandemic generated massive amounts of data and indicators to monitor its day-to-day evolution and to guide public decision-making in health and policy. Arrangements were also made to set up documentary resource banks to collect, archive and analyse traces and memories of the pandemic<sup>3</sup> that literally paralysed the planet and marked an anthropological rupture in contemporary society. As the shock recedes, it becomes important to look back over the production of research output during the period and to analyse various aspects in more detail (Lanssens, 2021). Because analysis was rushed through at the time, we need to revisit and review the data accumulated over the course of the pandemic with more critical distance and a better understanding of collection biases and complicated analysis models. According to recent papers in the field of demographics, COVID-19 mortality was underestimated, both in India (Guilmoto, 2022) and globally (COVID-19 excess mortality collaborators, 2022).

## The Context of the Pandemic

- 7 In early 2020, the world was abruptly plunged into emergency response mode as economies ground to a halt, countries shut their borders and locked down, aircraft were grounded and restrictions were introduced to contain the spread of the virus (curfews, lockdowns, mobility restrictions, different working and education arrangements, mobilisation of medical and research personnel and resources). Governments’ scope for action and people’s lifestyles were limited in the face of worrying epidemiological indicators in relation to an unknown pathology. On 16 November 2019 China identified a suspect case. In December 2019 it alerted the World Health Organisation (WHO) to several cases of what was called severe pneumonia. From early 2020 on, the number of cases grew rapidly. Deaths were recorded as the spread of the virus reflected the geography of trade and flows between countries and continents and their rate of globalisation. The virus gradually spread to several Asian countries, followed by the United States, then Europe and Latin America, the Caribbean and Africa in late February. The WHO declared a global emergency on 30 January and on 11 February named the virus coronavirus disease 2019 (COVID-19), an infectious disease caused by the SARS-CoV-2 virus. On 11 March 2020, the WHO declared it a pandemic, soon after designating Europe as the epicentre.

Figure 1: Distribution of the Human Toll of the Pandemic between April 2020 and January 2021. Daily Deaths Due to COVID-19 by Major Clusters. 21-Day Rolling Average



Source: <https://www.values-associates.fr/blog/datavisualisation-raconte-covid-19/>

- 8 Germany, Spain, Italy and France were among the hardest hit countries worldwide. While their ranking changed over the two years of the pandemic, these European countries remained at the top of the leader board and contributed to making Europe the worst affected continent, ahead of the Americas. In May-June 2020, South America, particularly Brazil, which became the second worst affected country in the world, became the new front line of the pandemic, although its scale was underestimated. Brazil, Columbia, Argentina, Mexico, Peru and Chile were the South American countries hardest hit by the pandemic. Progressively, between May and August 2020, the United States in turn became an epicentre of the pandemic following rapid growth in case numbers. In the Near East, at the end of two years of pandemic, the Islamic Republic of Iran recorded the greatest impact, followed by Iraq and then Jordan, Lebanon, the United Arab Emirates and Saudi Arabia. Egypt had over 410,000 cases and more than 223,000 deaths. Around a quarter of the population was vaccinated.
- 9 In Asia, India recorded over 39.5 million cases and almost 490,000 deaths. During the first wave, almost 1.3 billion individuals were locked down. This rushed decision led to the internal displacement of millions as migrant workers attempted to return to their villages. In early 2022, just under half the population of India was vaccinated. Indonesia came next (4.2 million cases, almost 144,000 deaths and a vaccination rate of approximately 44%), followed by Thailand (2.3 million cases, approximately 22,000 deaths and a vaccination rate of 68%) and Bangladesh (1.6 million cases, 28,200 deaths and a vaccination rate of almost 35%). There are no data available for China. Which – like other countries in Asia (Singapore, Hong Kong and Taiwan) and Oceania (Australia and New Zealand) – applied a “zero-COVID” policy. The policy to reduce the R number, i.e the average number of people that one infected person will pass on a virus to, to zero, involved mandatory, even coercive, screening of cases and contact tracing, with as a corollary reduced movement, the closure of external borders, global and local lockdowns and strict surveillance of individuals. Given the restrictions

on freedom it entailed, particularly in terms of movement, the policy required “buy-in” on the part of the population to succeed. And, looking at the statistics recorded by these countries where available, this seems to have been the case. Countries then had to negotiate their exit from the zero-COVID policy. One solution was to re-establish links with countries deemed “safe” as regards their epidemiological situation, creating “travel bubbles” and/or encouraging some categories of travel according to the structure of their economies (students, businesspeople, domestic workers or tourists). Zero-COVID was in contrast to the “living with COVID” policy, which consisted of allowing the virus to circulate among the population to boost herd immunity. This latter strategy was less costly economically and socially but had a greater impact on morbidity. Exiting the zero-COVID strategy was also not easy.

- 10 The year 2020 was roiled by the first and second waves of the COVID-19 pandemic and by the emergence of variants with differing levels of infectiousness but the same impact on morbidity. The timing of these waves varied according to hemisphere and season. Although vaccination campaigns started in late 2020 and intensified in 2021 — at greatly varying rates depending on national strategies and resources — the second year of the pandemic saw the third, fourth, fifth and sixth waves one after the other. Mutual recognition of COVID-19 vaccines between countries of departure and of arrival (“vaccination passport”), in addition to the legal arrangements already in place, opened the way for new opportunities to travel, adjusted according to the progress of the disease and government policies in terms of closure, opening and reopening. Access to vaccination and choice of vaccine introduced a new type of inequality between individuals with resources who could move freely and those whose mobility was limited or prevented by a range of administrative constraints. During vaccination campaigns, questions arose about including migrant populations in the drive to manage the crisis and more generally around the social inequalities in health uncovered by the pandemic. Care of those infected also highlighted the key role played by migrants and people from a migrant background in the operation of healthcare and social protection systems.

### **Inequality, Vulnerability and the Search for Justice through a Syndemic Prism**

- 11 COVID-19 is characterised as a pandemic due to its global spread. It has also been characterised as a “syndemic”, a term introduced by epidemiologists that emphasises the biological and social interactions between pandemic, chronic illnesses and the weight of social inequalities. To analyse what could be considered a “total social fact” as defined by Mauss (Delage *et al.*, 2021: 9), all knowledge, not just medical knowledge, needs to be considered. Unfortunately, the need for a cross-disciplinary approach was overlooked somewhat, both in the media and in political discourse and practice, with few experts from non-scientific disciplines other than medicine invited to present their findings and viewpoints and participate in the decision-making process.<sup>4</sup> However, understanding the health crisis in economic, political and social terms requires input from the humanities and social sciences among others, “indispensable to gain a greater understanding of similar situations and thus overcome the somewhat hopeless feeling of the unthinkable” (Lazar *et al.*, 2020: 12). These sciences can help overcome the initial feeling of paralysis in the face of the unexpected, offering a means to interpret and



understand events by reusing and updating tools, theoretical frameworks and analytical methods developed for other crisis situations.

- 12 The COVID-19 epidemic was soon defined as a pandemic because of the scale of morbidity and global spread. In view of the social and economic inequalities progressively uncovered by research, healthcare specialists turned to another conceptual framework – the syndemic prism – to examine social inequalities in health more directly. “Sars-Cov-2 has a greater deleterious effect on the health of persons with chronic illnesses, which are not randomly distributed in the social space. It amplifies social inequalities, which in turn are partly correlated with socioeconomic inequality” (Pierru, 2021: 333). Morbidity differentials brought to light the involvement of certain categories of migrants and people from a migrant background in combatting the pandemic (frontline and healthcare workers for example), uncovering their social positions, their invisibility and the discrimination to which they are subject particularly in terms of respect for their rights and access to healthcare. In September 2020, these gaps prompted Richard Horton, chief editor of *The Lancet*, to argue that COVID-19 should be analysed as a syndemic:

“The most important consequence of seeing COVID-19 as a syndemic is to underline its social origins. The vulnerability of older citizens; Black, Asian, and minority ethnic communities; and the key workers who are commonly poorly paid with fewer welfare protections points to a truth so far barely acknowledged – namely, that no matter how effective a treatment or protective a vaccine, the pursuit of a purely biomedical solution to COVID-19 will fail. [...]. Approaching COVID-19 as a syndemic will invite a larger vision, one encompassing education, employment, housing, food, and environment. Viewing COVID-19 only as a pandemic [through epidemiological models and with infectious disease specialists] excludes such a broader but necessary prospectus.” (Horton, 2020: 854)

- 13 Developed in the early 1990s by anthropologist Merrill Singer, the syndemic model took off in medical anthropology before being quickly adopted in other disciplines. In addition to fitting seamlessly into the One Health approach,<sup>5</sup> it also focuses on social inequalities in health and questions of vulnerability:

“The syndemics model focuses on the biosocial complex, which consists of interacting, co-present, or sequential diseases and the social environmental factors that promote and enhance the negative effects of disease interaction. This emergent approach to health conception and clinical practice reconfigures conventional historical understanding of diseases as distinct entities in nature, separate from other diseases and independent of the social contexts in which they are found. Rather, all these factors tend to interact synergistically in various and consequential ways, having a substantial impact on the health of individuals and whole population. Specifically, a syndemics approach examines why certain diseases cluster (i.e. multiple diseases affecting individuals and groups); the pathways through which they interact biologically in individuals and within populations, and thereby multiply their overall disease burden, and the ways social environments, especially conditions of social inequality and injustice, contribute to disease clustering and interaction as well as to vulnerability.” (Singer *et al.*, 2017: 941)

- 14 Remember that up until the early 1990s, development (an issue that is not just a matter of concern for the global south) was considered a necessary condition for improving health indicators and reducing mortality and morbidity gaps. Following the work of Fogel and Sachs,<sup>6</sup> this conception was turned on its head to focus on “improving the health status of populations [as] a decisive input for poverty reduction, economic

growth and long-term development” (Sachs, quoted by Moatti and Ventelou, 2009). This change in perspective is also connected to the emergence of a moral conception of health. Richard Horton (again) refers to the work of philosopher Norman Daniels:

“Daniels’ claim is that health is of special moral importance because protecting health-keeping people functioning normally by meeting their health needs-protects the opportunities open to us. By opportunities, Daniels means the array of life plans reasonable persons are likely to develop themselves. [...] Daniels based his argument on John Rawls’ theory of justice. Rawls claimed there could be no justice without fair opportunities for all.” (Horton, 2022: 223)

- 15 Although the inequalities affecting migrant populations cannot be reduced to social inequalities in health, they do offer a striking prism through which to apprehend the conditions faced by migrants throughout their lives and their migration journeys, as Petit and Wang (2019) have shown in relation to mental health.
- 16 Analysis through the prism of social health inequalities, trajectories and vulnerability requires multi- and inter-disciplinary approaches and the decompartmentalisation of disciplines. Firstly, because of “the increasing complexity of models of understanding and of factors determining health, cross-referenced with individual and collective data, and with the biological, social, economic and cultural factors that drove cooperation between the social and the medical sciences” (Fromageot *et al.*, 2005: 2). Secondly, “it is no longer permissible to use a few relatively simple sub-systems evolving independently” (Morin, 1994) given the globality of realities (Villeva *et al.*, 2014). The interweaving of health and migration questions is part and parcel of this increasing complexity and of this globalisation of the challenges and the issues at stake. This rapprochement between disciplines seems increasingly natural and also forms part of the history of the rapprochement between the humanities and social sciences and the medical world. Like AIDS in the 1980s and the more recent environmental and climate challenges, COVID-19 has reactualised “the need for this encounter” and disrupted the biomedical model, forcing it to “open up to other disciplinary approaches including the humanities and social sciences” (Kivits *et al.*, 2013).

## Surveying during COVID-19: Innovation and Continuity

- 17 A wide range of disciplines was mobilised in record time to develop vaccines and medical treatments, to understand the genesis and emergence of the coronavirus, to observe and analyse its effects on the social, political and economic functioning of our society, and to understand the hidden consequences that became apparent over time, time that itself was suddenly fractured between the world of “before” and the world “after”, the meaning and advent of which remain unclear.
- 18 The imperative to produce research, coupled with the responsiveness of researchers to the shock of the initial stages of the pandemic, the daily mortality statistics, unprecedented images and modelling, led many researchers in the humanities and social sciences to abandon or park their research work in order to focus on original projects relating to COVID-19 or to adapt or redefine existing projects. The aim was to observe what was happening right then and there, with no real point of comparison, watched by a stunned world, and to understand the various ways in which people were being affected, how the virus was transforming individual lives and collective experiences. How and in what terms should this apparent rupture, this unprecedented

crisis, be understood? To provide answers to these questions, researchers in the humanities and social sciences had to adapt their investigative tools or create new ones to cope with sudden shutdowns, travel restrictions, inability to access specific locations for the interactions in the field that generally characterise their work. The actors being observed were themselves caught up in the process of adjusting to the health restrictions, which required them to redefine their interactions, their sociability and their movements, particularly in a transnational or diasporic context. This process itself became a new space and a new research topic.

- 19 The authors of the articles in this topical collection managed to negotiate the shift from familiar methodologies to an approach developed in response to the changes and constraints induced by the pandemic. They demonstrated the qualities expected of researchers: flexibility, responsiveness, opportunism and creativity. The research presented in this series attests to their innovation, experimentation and adjustment to the changing material conditions for undertaking research and to newly emerging or reformulated questions. But did this disruption in empirical output lead to a radical change in the methods used or did it instead involve systemically applying methodologies already used in some disciplines and/or by some researchers? Or did COVID-19 perhaps simply restate or highlight what is part and parcel of researchers' normal activity, namely adapting to changes in one's environment? The pandemic made it more difficult to produce data, forcing researchers out of their comfort zone to shake off their methodological and personal habits.
- 20 The impossibility of doing field work, of making observations or conducting face-to-face interviews was nevertheless experienced as a loss of deeply internalised practices and disciplinary habitus, which sees recording the words of actors (migrants in this case) as a central plank to understanding migration journeys. Face-to-face interviews are seen as encouraging people to express themselves and tell their stories, especially when these are private and/or involve emotions associated with tragic or symbolic events. Sharing migrants' lived experiences can also help contextualise what they say and provides an opportunity to observe their relationships with other categories of actors and access to other sources of information. The health restrictions forced many researchers to shift to digital technology. This shift was not a radical one as all the researchers note that the surveys they developed were inseparable from their prior knowledge of and familiarity with the terrain and their experiences with certain groups. This experience facilitated the transition to virtual ethnography and online quantitative surveys.
- 21 As part of the European project *Migration and Transnational Social Protection in (post-)crisis Europe* (MiTSoPro), Félicien de Heusch, Carole Wenger and Jean-Michel Lafleur developed a comparative survey of body repatriation policies in twelve states and of ethnographic fieldwork on the mobilisation of Senegalese and Tunisian emigrant NGO networks around the "right" to body repatriation before and during the COVID-19 pandemic. To do this, they had to rethink their strategy. Originally based on participative observation and semi-structured interviews conducted face to face, their approach changed to a "netnography" (Kozinets, 2019). Using virtual or digital ethnography, the authors followed the progress of NGO campaigns online – mainly on social networks – on the right to body repatriation and the responses from the states of Senegal and Tunisia. Referencing Bluteau (2019), they note that in view of the current importance of "digital landscapes", it has now become impossible to undertake

ethnographic work without taking these into consideration. It could therefore be argued that we are now in a post-digital era where digital technology is no longer a distinct entity but is rooted in the everyday. This reality requires researchers to be copresent – in the field and virtually. However, once lockdowns were over and interviews could again be conducted face to face, the authors seized the opportunity, seeing this mode of interaction as more conducive to their work than an interview conducted remotely as it facilitated investigating the place of emotions and of symbols more effectively and with greater sensitivity.

- 22 Tony Rublon looks at the manner in which various political forces appropriated the health crisis to consolidate power, redefine migration policies and realign the management of displaced persons. Focusing on Turkey and Iraq, his paper sheds light on the situation in the Middle East, one of the world's main migration crossroads. His key objective is to show how the various political actors in place transformed this “pandemic moment”, looking at the consequences of different political responses to the health crisis on refugees and displaced persons in Turkey and Iraq. He examines how, after first causing significant restrictions to be imposed on freedom across society as a whole, the health crisis then accelerated a shift in Turkish and Iraqi migration policies, with an immediate impact on migration journeys and experiences (Vahabi, 2013). Tony Rublon's paper is part of a collective media monitoring project undertaken in partnership with UMR 196 Ceped (Centre for Populations & Development) and UMR 7301 Migrinter in March 2020, which involved opening threads on *seenthis* social media in order to gather and collate press articles on migration during the pandemic, at a time when researchers were unable to travel to remote locations.<sup>7</sup> The corpus built up was used to track the emergence and evolution of problems highlighted by media monitoring and, in Tony Rublon's work, involved collecting different types of documents illustrating the impact of the pandemic on migration policies and migrants in the Middle East. He uses this corpus (made up of 1,000 documents over the period from 30 March to 31 December 2020) to query portrayals conveyed by media and states and investigate the impact on migrants of policies put in place by governments to contain the spread of the virus.
- 23 Laura Odasso and Frédérique Fogel look at the challenges hampering migration, particularly those involving “a disconnect (repeated throughout the migration journey) between ‘the rules’ and ‘the facts’ – where the situation of individuals, couples and families does not correspond exactly to the criteria determining access to a visa and to residency on the legal basis of ‘private and family life’” (Odasso and Fogel, in this topic collection). This focus on migration journeys tallies with their querying of the place of the family in “nation” building, assessing the emotional and family bonds that are used to discriminate between the “right” immigrants and their close corollary – the others. The authors focus in particular on how the pandemic affected the lives of migrants and on the consequences for the emotional and personal ties of non-European nationals and their families when the political and administrative measures to tackle the spread of COVID-19 affected their access to the law. Their work “reveals the uncertain and fragmented bureaucratic and legal dynamics and temporalities that immobilise administrator pathways, severely impacting the personal and family life of our interviewees” (Odasso and Fogel, in this topic collection). Laura Odasso and Frédérique Fogel use ethnography to describe typical situations where emotional and family ties have enabled people to regularise their situation in France, renew their residency

permit, reunite families and reunify French nationals with foreign partners, whether they are seeking to marry or not.

- 24 Although the health crisis did not change their research objectives, it does constitute a singular moment in an ethnographic study conducted among binational couples and foreign families in various French regions. In addition to subjects who had been followed for ten years, new subjects were identified through support groups that emerged during lockdown, a period during which most NGO reception centres were closed. As well as collecting narratives of their experiences, the researchers review government measures taken in 2020 and 2021 affecting individuals. They look at regulatory texts and government steps announced by decree and also at parliamentary questions and tweets from the Ministry of the Interior and the Ministry of Foreign Affairs. They also report on administrative disputes and petitions to the Council of State and on the reaction to these institutional measures. To complete this corpus and offer different perspectives, the researchers take a look – online and offline – at the mobilisation of organisations and movements of separated spouses and families, and at binational couples applying for reunification. Their research encompasses the institutional settings where foreigners' fates are decided. They include some elements of the media debate and official statistics to shed light on the viewpoint of actors in French migration policy. The wealth of their research material shows that the health crisis was just one “episode” in a longer research study and that the former underscored the relevance of the latter.
- 25 In an exploratory qualitative study conducted in March and April 2021, Svetlana Ruseishvili and Caio Fernandes analyse the effects of the pandemic and mobility restrictions on migration rules in Brazil. While the border and migration rules introduced at that time did not make any significant changes to the country's migration policy, the researchers nevertheless note a toughening of practices that affected migrants' rights and daily lives (hyper-vigilance, criminalisation of migrants and expulsion). Through telephone interviews with people from different origins (Haiti, Argentina, Venezuela, Mexico and Brazil) living in Brazil for variable periods and with different migration situations, the authors look first at the impacts of the epidemic on migrants' daily living conditions and social networks. They then home in on issues relating to the regularisation process, employment, their economic situation and their access to healthcare and other rights. Ultimately, the paper seeks to understand the changes in the daily lives of international migrants in Brazil. The migrants were selected via a network linked to the Federal University of São Carlos (state of São Paulo) in various regions more or less close to the border. They document the pre-pandemic phase of the migration regime dating back to the 1990s and then move on to a review of orders issued by the Brazilian government limiting international travel between March 2020 and October 2021.
- 26 For their part, Evelyne Barthou, Yann Bruna and Emma Lujan look at migration parkours and at the experience of international students in France via the TRANSCOVID project. Although relatively little is known about students in globalised migration (Barthou *et al.*, in this topic collection), France is host to increasing numbers of foreign students from Africa and the Middle East. The health crisis drew attention to this population category living in France and lifted a veil on their difficulties. These young people were severely affected by the health crisis due to their status as students, their separation from family and their housing conditions. The researchers look at

international students' experience of the health crisis through the issue of *access*: access to others first of all, whether this happened online (family and friends in their country of origin) or offline (friends and acquaintances in France), but also access to higher education – their main reason for coming to France. From this perspective, particular attention is paid to the role of “digital mobility” in the management of immobility and the “closeting and yet liberating nature of digital technology” (Barthou *et al.*, in this topical collection). The health crisis is seen “as an opportunity to query international students about their migration journeys, between bifurcation, giving up and new horizons” (Gohard-Radenkovic, 2017). Many students were forced to review their plans and their international mobility, particularly in light of the conditions for return. The research team launched a quantitative sociological survey. Between June and November 2020, 2101 students, including 131 international students, answered an online questionnaire containing closed and open questions on the students' objective and subjective life experiences during the health crisis. The results shed light on individual student experiences at that time and in-depth interviews were conducted between March and May 2021 to gain further insight into their lived experiences. The authors pay particular attention to African students given the high proportion of these in the population of foreign students in France.

- 27 Research by Sarah Boisson and Mayada Madbouly also looks at students. The authors look at the situation of Egyptian students and young professionals living in France when the epidemic broke out. Investigating what it meant to be “stranded” abroad, the authors seek to elucidate how this population experienced the contradictory health and administrative orders issued in France and Egypt, at a time when they had to develop adaptation and negotiation strategies to deal with national contexts and authorities while hanging on to their transnational links. Sarah Boisson and Mayada Madbouly note that the student population indicated above were young and engaged, perceiving migration as temporary and living in a highly connected transnational universe. Following in the footsteps of Dufoix (2010), who proposed investigating the concept of “double presence”, the authors extend the work on this topic (Diminescu, 2005), with these migrations seen as part of an “ever-expanding disentangling of space and time where ubiquity is no longer wholly impossible”. Although “migrants, no more than any other individual, cannot be in two places at once” (Dufoix, 2010: 28), new methods of communication and the support of states for their expatriates has helped reduce the distance experienced between host country and country of origin.
- 28 Sarah Boisson and Mayada Madbouly also undertake a digital ethnographic study. Between April and September 2020, they conducted in-depth semi-structured interviews (on living conditions, on the experience of lockdown, on changing practices in a time of crisis and on the migration parkour and the issue of repatriation – involving more or less long-term return depending on the case, or refusal to return). The interviews followed the “digital traces” (El Chazli, 2020) of Egyptian nationals, most of whom were sourced via the two main social networking platforms used by this migrant population: ADEEF (association of Egyptian students in France) and Égyptiens Sans Frontières (Egyptians without borders). The Facebook pages for these groups are also spaces where this student population can meet and share information. The authors clarify their inductive approach and explain how virtual ethnography helped expand the geographic recruitment of survey participants. In addition to interviews, the paper also looks at official communiqués from the Egyptian authorities in France to gain insight into how repatriation was managed by the Egyptian government and its use of

the institutional category of “stranded abroad”. Use of this term, erratic to say the least, illustrates the categorisation difficulties encountered during COVID-19.

## Political and Legal Categories through the Prism of the Pandemic: Change and Continuity

- 29 COVID-19 is the product of globalisation. It exposed the main drivers of the phenomenon but also its main flaws: carried primarily by the more mobile upper classes, it mainly affected the most disadvantaged populations (Charmes and Rousseau, 2020: 19). Various studies conducted in the social sciences agree that the health crisis “starkly highlighted the extent of global inequalities” (Alviar *et al.*, 2020: 175; Gaille and Terral, 2020). Made at the start of the crisis, this observation was confirmed by later analysis: on the one hand, poverty and extreme poverty worldwide rose sharply,<sup>8</sup> while on the other the wealthiest amassed even more wealth from the pandemic period.<sup>9</sup> Persons in migration situations were among the groups most affected by a growing inequality, which the pandemic both revealed and widened. Some of the most vulnerable were also engaged in a process of “disaffiliation”, as defined by Castel (1991), characterised by a “social non-existence” due to unemployment and isolation in the host country (Carillon *et al.*, 2020).
- 30 Rather than contradicting these observations, the articles in this series confirm them for the most part. They do provide some nuance, however, querying the categories usually used to describe populations located on either side of the border of inequality. The dynamic approach focusing on trajectories supports this to a certain extent.

## Relative and Provisional Erasure of Differences in Foreigners' Situations in Terms of Freedom of Movement

- 31 COVID-19 plunged the world into (relative) immobility. Freedom of movement was largely curtailed, both within and between states (see above). These restrictions on freedom of movement in fact merely reproduced or even reinforced the mechanisms faced by “travellers without the right to travel” (Aubin, 2014: 24), i.e. those who regularly come up against policies that close borders to them under normal circumstances. However, the restrictions surprised and even disconcerted those for whom border and customs posts merely marked a suspension of time in an otherwise fluid and linear mobility, those for whom “the world itself, with all its borders, its topography, its detritus, its odours, forms the soft-focus backdrop to their unhindered, comfortable travel” (Agier, 2014: 14). When COVID-19 surfaced, these people experienced the border as an at times insurmountable obstacle to their travel plans. This forced, indiscriminate immobility, which gave rise to the emergence of a *unified migrant condition* that blurred habitual differences based on national origin, was in many ways a unique feature of the situation engendered by COVID-19.
- 32 This situation prospered on fertile ground: although not generated by the pandemic, the return to borders defined politically and legally as lines separating sovereign states was exacerbated by it. The “territorialised response” to a threat that itself was a territorial took on and amplified a process that was initiated by the fall of the Berlin wall and subsequently fuelled by the attacks of 9/11 and the increase in migration

patterns after 2015 (Amilhat Szary, 2020: 142). How this process was reinforced was observed particularly in zones of free movement. In Europe, reintroducing internal border controls within the Schengen area (Martucci, 2020) merely extended a practice already observed in the fight against terrorism. On the African continent, more specifically within the Economic Community of West African States (ECOWAS), the pandemic seems to have been used as an opportunity to justify stepping up restrictive measures that had already been adopted at the instigation of the European Union (Hamadou, 2020: 340). The measures adopted in these areas helped bring about a convergence in the freedom of nationals of member states and nationals of other states to move freely and specifically a convergence in terms of restriction of movement. In other words, looking at Europe, the “preferential treatment” of citizens of European Union member states party to the Schengen Convention was eroded and EU nationals in the main received the treatment generally reserved for third-party nationals. This alignment in the condition of migrants relativised the usual categorisations.

- 33 In regional spaces with internal freedom of movement, responses to the pandemic were bilateral when it came to managing international migrations, to the detriment of a multilateral approach (Achiume *et al.*, 2020: 112): borders were often opened and re-opened on a selective basis, depending in particular on the status of the pandemic in the states of origin of aspiring migrants. In this context, the conventional differentiation between nationalities with “preferential treatment” and others as regards permission to enter the territory of a third state was at times turned on its head. The British were banned by several states, including Brazil, as Svetlana Ruseischvili and Caio Fernandes remind us in their article. The French were also among the nationalities denied entry into some states. They experienced a situation perceived at times as unbearable, while failing to recognise this was the usual treatment mainly meted out to nationals from the global south. The lack of differentiation between migrants needs to be qualified, however. The virus discommoded those who made money from the regions most affected by the virus more it did nationals from southern states, and the usual divide between “the haves” and “the have nots” was not exactly the same during COVID-19.
- 34 Yet reconsideration of this conventional distinction needs to be tempered considerably. Like any crisis, the one generated by COVID-19 may have engendered some positive changes. Some hoped that the restrictions placed on their international freedom of movement might jolt the conscience of “the haves” regarding the situation of migrants who already had to deal with these restrictions on a daily basis. Even supposing this took place, it must be said that there is little evidence of any concrete translation of any such realisation. And any changes made were highly provisional in nature. Once restrictions were lifted, the gap between those for whom borders posed little or no obstacle to mobility and those whose movements were restricted by the same borders quite plainly resurfaced. This gap widened when the security argument was brandished to restrict movement and the key tool in current policies to “control migration flows” took on a health dimension which, although evident before this, now grew in importance. Enhancing requirements in this area and expanding the use of “health passports” could also exacerbate the difficulties encountered by those who could not afford the additional cost and/or are from states that are unwilling or unable to issue them.<sup>10</sup>



- 35 COVID-19 also brought into question the scope of another even deeper distinction in political and legal migration management: that between *nationals* and *foreigners*.

### Partial Alignment of the Situation of Foreigners and Nationals in Terms of Return

- 36 As we have seen, the pandemic confirmed the pervasiveness of the state in its sovereign function of border management. However, it also uncovered an aspect not generally appreciable in the exercise of this power. This revelation came on top of a rebalancing in the “migratory equation” observed during the pandemic, in the sense of reassessing the place and role of the state of origin (Mégret, 2020), prompting a reconsideration of relations between emigrants and their states of origin. More specifically, the pandemic called for a deeper, more wide-ranging analysis of diaspora policies. Such policies generally lean towards a static approach concentrating on relations between the state of origin and members of the diaspora community settled in various host states, but COVID-19 helped focus attention on the *dynamic* relations surrounding the issue of returning emigrants.<sup>11</sup> Two questions arose: should a state organise the repatriation of its nationals living abroad and if yes, what should be the arrangements and the conditions for this? Can a state object to the return of its nationals? Two questions that also arose in relation to both the living and the dead.
- 37 The issue of return has a legal dimension. From this perspective, the pandemic provided an opportunity to look at a dimension of mobility that had been somewhat overlooked by academia because it was uncontroversial (Mégret, 2020: 323). Firstly, in terms of organising repatriation, it is difficult to identify a *positive obligation* on the part of the state, based on the obligation to provide protection and consular assistance.<sup>12</sup> Practice varied widely during COVID-19. Some states rolled out substantial supports very quickly, offering all their nationals abroad a means to return. This was the case with France for example.<sup>13</sup> Responses from other states came later and took longer to implement. At times, the conditions imposed by some complicated the situation of those seeking to return. This was the case in Egypt, where the eligibility conditions for the state’s return support scheme were tightened little by little to include only people stranded abroad, as detailed by Sarah Boisson and Mayada Madbouly in their article. The upshot of these difficulties was to increase the number of stranded migrants, a category that the pandemic made more visible (Chamie, 2020: 236). This number rose even higher when certain states such as India and Morocco simply refused to take back their emigrants, including when they arrived at their borders. The consequence of these decisions was an alignment between the condition of emigrants and that of foreigners that blurred the distinction between nationals and foreigners. This was, however, contrary to international law, which unequivocally enshrines the *negative* obligation of states not to oppose the return of any person to “his or her own country” except in exceptional situations (Jouzier, 2020; Martha and Bailey, 2020).<sup>14</sup>
- 38 The issue of return during the pandemic also led to reconsidering the underpinnings of relationships between states and their emigrants. The sequence constituted “a moment when consensus between states and diasporas came under challenge, a rupturing of the ‘symbolic exchange system’ [...] guaranteeing social order [and offering] an opportunity to observe the values governing relations between a diaspora and its society of origin” (de Heusch *et al.*, in this topical collection). The comparative analysis offered by Félicien

de Heusch, Carole Wenger and Jean-Michel Lafleur in this topical collection on body repatriation by Senegal and Tunisia is particularly illuminating. Reactions to the obstacles posed by these two states point up the difference between the representations shared by their respective diasporas regarding the role the state should play: on one side (Tunisia), an interventionist state providing protection in exchange for emigrant loyalty and remittances; on the other (Senegal), an abstentionist state implementing a “laissez-faire” policy whereby it only intervened on an exceptional basis and on behalf of the most vulnerable. In both cases, however, the policies adopted largely hindered the return of “COVID bodies”. Such decisions, whose compliance with international law is debatable, are part of a convergence between the fate of emigrants and that habitually reserved for foreigners concerning entry into the territory of the state of origin. They are therefore elements in a reassessment of the conventional distinctions between categories as regards entering the territory of a state. The benefit of this reassessment is much less palpable when it comes to residency.

### Nationals Still Come First...

- 39 The increased difficulties encountered by expatriates living in a host state during the crisis sparked by COVID-19 have been amply documented. Contrary to the entry question, the importance of nationality when it comes to entitlement and exercise of rights is generally confirmed. The intensity of the fault line was mitigated in parts. For instance, nationals who returned to their state of origin (alive or dead) could be regarded with suspicion, expressed vehemently if not violently. Some emigrants thus had the same stigmatising experiences as immigrants, with distinction based no longer on nationality but on where they were living when the pandemic struck. According to de Heusch *et al.* in this topical collection, this distinction between those on the territory of the state in question and those who were settled abroad reactivated the historical association between migration and the spread of disease. However, one new feature was that all bodies entering the state were suspect, regardless of nationality, with extra-territoriality rather than foreign origin the decisive criterion. This convergence did not, however, eliminate all differences. Rejection experienced by some emigrants was neither as widespread nor as intense as certain categories of foreigners, particularly those targeted because of their Asian origin (Attané *et al.*, 2021; Wang and Madrisotti, 2022). The pandemic gave rise to the expression of “health nationalism” characterised by “the designation of outsiders, foreigners, immigrants and cultural minorities as the main populations responsible for spreading the virus nationally” (Geisser, 2020: 18). This type of rhetoric flourished in Turkey in particular, as noted by Tony Rublon in this topical collection. It was relayed by national authorities relying on scapegoating as they attempted to shirk responsibility for the impoverishment of their most vulnerable nationals.
- 40 The singular condition of expatriates is due to the multiple obstacles they had to overcome and the variety of areas affected. In healthcare, firstly, many studies have shown multiple restrictions impeded their access to treatment and even to information on the pandemic itself. In fact, like all crises, the pandemic laid bare the fault lines in many healthcare systems and exacerbated already latent inequalities. These were less pervasive in states with a proper public service offering – i.e. those with free and universal access as a matter of principle – than in those opting for the liberalisation

and withdrawal of healthcare. Brazil is an example of the first, as noted in this topical collection by Svetlana Ruseishvili and Caio Fernandes, while the United States provide an illustration of the second (Hill *et al.*, 2021).

- 41 The distinction was also perceptible in education: young migrants were generally foremost among those who suffered the deepest – and often the longest – from school closures and the alternative arrangements put in place. Several factors made things even more difficult, including where learners were living (camps for displaced persons for example) and their often cramped accommodation. COVID-19 also shed light on the particular conditions endured by foreign students and uncovered many instances where they were denied access to higher education. This clearly emerges from the studies by Sarah Boisson and Mayada Madbouly, and by Evelyne Barthou, Yann Bruna and Emma Lujan, both of which are included in this topical collection. The pandemic also curtailed international moves to encourage refugee access to higher education as well as to primary and secondary education.
- 42 The spread of the health crisis in the autumn of 2020 in fact affected many rights, including the right to a normal family life. The article in this series by Laura Odasso and Frédérique Fogel on France eloquently elucidates this point. The treatment of COVID-19 also had a deleterious effect on the general living conditions of persons in migration situations, compromising access to emergency aid and social security nets. The effects were felt with greater intensity by certain categories, including women. EpiCov, the French national survey on COVID-19, clearly documented this, underscoring how the aggregation of gender, class and ethnic inequalities meant that unskilled female immigrant workers of non-European origin were the most affected by the consequences of the pandemic (Bajos *et al.*, 2020: 11). In this respect, increased awareness of the indispensable role of frontline workers, often women, sometimes with no residence permit, did not lead to any significant measures. It did, however, focus media attention on people without residency papers and give rise to increased calls to regularise their situation, some of which were heard by some states, particularly Portugal. But the “example” of Lisbon, the real motivation for which needs elucidation,<sup>15</sup> was not widely replicated.
- 43 On the contrary, the obstacles to completing administrative procedures relating to foreigners’ migrant status (visa, application or renewal of residence permits, application for asylum, etc.) increased during the crisis. In their study, included in this topical collection, Laura Odasso and Frédérique Fogel underline how, far from streamlining and simplifying procedures, increasing digitisation instead made them much more difficult. The shift from queueing in person to queueing digitally was not helpful for most foreign service users. The distinction based on nationality as regards the right of residence remained in play during COVID-19; there was no convergence here between foreigners and nationals. The health crisis lifted the veil on an already existing situation. And, looking at the policies developed when the crisis started to abate, there is every reason to believe that these mechanisms will be maintained afterwards.<sup>16</sup> The pandemic held up a mirror on inequality and on discrimination – and indeed amplified both.

## Tensions in Global Migration Governance Revealed by COVID-19

- 44 COVID-19 brought to light the fundamental tension between different levels of migration governance: on one side, restrictive state policies during the crisis affecting primarily persons in migration situations; on the other, persistent calls from international organisations and institutions on the need to respect the human rights of all persons, regardless of their migration status or situation. In contrast to states, these organisations and institutions also stressed that rather than being an obstacle to containing the spread of the virus, strictly upholding these rights was the best means of responding to it and of ensuring the response was both lasting and effective. Happily, such calls during the pandemic were relayed and repeated by various private-sector initiatives. One such, entitled “Principles of protection for migrants, refugees, and other displaced persons” developed by the Mailman School of Public Health at Columbia University, the Migration and Human Rights Program at Cornell University and the Zolberg Institute on Migration and Mobility at The New School, drawn up by a panel of international experts and endorsed by over a thousand signatories, including many researchers and academics, is testimony to the engagement of the research community, particularly in the social sciences.<sup>17</sup>
- 45 And this engagement had a purpose. For the authors of the Principles, the objective was to “guide State action, to assist international organisations, and to provide a basis for advocacy and education”. This latter aspect is particularly interesting. COVID-19 highlighted the resilience of persons in migration situations. Many managed to mobilise a range of resources to contain the worst effects of the health crisis. They (re)activated solidarity networks, as seen with the Egyptian students portrayed by Sarah Boisson and Mayada Madbouly in this topical collection, or members of the Senegalese and Tunisian diasporas faced with the issue of repatriating bodies, as detailed by Félicien de Heusch, Carole Wenger and Jean-François Lafleur. Migrants were also able to rely on subjective rights, as the crisis helped raise awareness of these in terms of both scale and importance. With support from associations increasingly inclined to “weaponise” the law (Philippe, 2020; Lochak, 2016) they managed, despite several setbacks, to rack up some victories in the French administrative courts. Laura Odasso and Frédérique Fogel report on two significant examples in this regard in relation to respect for private and family life: the suspension (22 January 2021) and then overturning (29 June 2021) of the instruction and decision by the regulatory authority asking consuls not to register or process applications for long-stay visas for family reunification purposes; and the suspension (9 April 2021)<sup>18</sup> of the Prime Minister’s circular of 22 February 2021 on border measures put in place during the health emergency on the grounds that it did not provide for derogation to entry onto French territory by persons wishing to marry. These decisions, together with a raft of similar decisions, confirmed the role of the French Council of State as protector of the fundamental right of foreigners to a normal family life, a role it had not played in a long time. There was, therefore, some good news “during these troubled times” (Slama, 2021: 1939). The health crisis was not just a period of scaling back rights and standards to protect them.
- 46 It did, however, prompt a rethink of some normative mechanisms. In the legal chronicle associated with this collection, Tano Kassim Acka shows that this needs to happen in relation to the resettlement of refugees. COVID-19 revealed the structural

limitations to arrangements for selecting and transferring people with refugee status to a state other than the state where they are located (third-party state), with “volatility” linked to the freedom granted to states to implement it. However, the pandemic also demonstrated the resilience of this mechanism. Resettlements continued, underscoring the fact that the widespread immobility forced on the world did not prevent migration.

## COVID-19: One Event in the Migration Parkour?

- 47 Further in this topical collection, the scale of migration parkours is analysed to gain a better understanding of the incidence of COVID-19 on movements according to the political contexts in which they occurred.
- 48 Considering that migration parkours are a sequence of events and that “any unpredictable event is the result of links, discontinuities or incompatibilities between different forms of spatiality” (Etelain, 2022) and knowing that “each action that comes from spatiality produces a space (in the form of a new arrangement) which enhances a pre-existing spatial configuration” (Levy and Lussault, 2003: 867), the hypothesis posed here is that spatiality (in the migration journey) is intrinsically multiple (Zusman, 2021: 5), with different events coexisting. COVID-19 is one such event. Its incidence therefore needs to be resituated in the plurality of events making up a migration journey, understood as a reality built in social action.
- 49 The central Sahel, criss-crossed by routes linking sub-Saharan Africa to the Mediterranean, is a prime area of observation for interpreting the events that guided the choices made by migrants during the health crisis.
- 50 From the beginning of the COVID-19 pandemic, African states took strong preventive measures. Overall, almost half ordered the closure of borders even though less than ten cases had been detected in their territories. In ten days (from 16 March to 26 March 2020), all ECOWAS member countries (except Liberia) closed their borders (Petit and Robin, 2020).
- 51 Not since its inception in 1979 had this area of free movement seen such a move. The restrictions generated difficulties, tensions and dramatic situations. Over 2500 migrants in transit were blocked in Niger, Burkina Faso, Mali and Chad. Some of them had to be rescued from the middle of the desert.<sup>19</sup> In parallel, in Arlit, northern Niger, a revolt broke out in a migrant camp due to the deplorable living conditions and “endless quarantine”.<sup>20</sup> The COVID-19 epidemic also exacerbated vulnerabilities and stigmatisation. In Nador (Morocco), camps of migrants in transit, most of them originally from sub-Saharan Africa, were destroyed.
- 52 The media presented these dramatic situations as exclusively linked to the COVID-19 epidemic, without drawing attention to what they revealed implicitly about the multiplicity of forms of spatiality – health, political, security – in which migration journeys unfold. This observation focuses attention on whether it is possible to partition an area and if so the limitations to such a partition, given that migration journeys are not just a question of space but also and above all of the consistency of relations animating that space.
- 53 Closing the borders to prevent the spread of COVID-19 was just a momentary constraint on population movement over land. Migrants simply used riskier crossing points and itineraries. As pointed out by IOM Chief of Mission in Mauritius, “despite the

restrictions on mobility, migrants are still obliged to undertake perilous journeys” (August 2020). In early September 2020, eighty-three migrants in distress were rescued in the region of Agadez in northern Niger. They were attempting to cross into Algeria. There were forty-two men, mostly Nigerian but also nationals from Togo, Mali and Ghana, and forty-one Nigerian women, including four-year-old twin girls.<sup>21</sup> On 17 March 2020, Algeria decided to close all its borders because of the threat of COVID-19. On 16 May 2021, the government took the decision to partially re-open the land and air borders. But two days later, the Algerian authorities announced that the land borders would remain “closed except in an emergency”. According to whistleblower Alarm Phone Sahara (APS), in March 2021 alone, the total number of persons forcibly expelled from Algeria to Niger against their will was at least 6,249, nationals from many sub-Saharan countries, including Guinea-Conakry, Mali, Côte d’Ivoire, Nigeria, Sierra Leone, Niger, Sudan, Cameroon, Gambia, Senegal, Chad, Benin and Liberia.<sup>22</sup> These “unofficial” convoys abandoned migrants in the middle of the desert in the border zone between Algeria and Niger. They had to travel a further fifteen to twenty kilometres to reach the border post of Assamaka. There were fifty-five girls and seventy boys under the age of eighteen and forty-five women in the convoy on 30 March 2021.<sup>23</sup> Back in 2018, the state of Niger had asked Algeria to end the expulsion of “non-Nigerien” nationals. But since then, expulsions have continued apace, including during the COVID-19 crisis. Repatriated to Agadez, few planned to return to their country of origin so the only alternative was to continue on their migration journey.

- 54 These examples illustrate how the closing of borders, a political move leading back to the exercise of power by states, fed the illusion of an interruption in the movement of persons on migration routes and therefore migration journeys.
- 55 However, this overlooks one essential fact: migration journeys are a palpable experience of space which, far from being confined to the political action of states, has more to do with migrants’ intuition and inventiveness and to their individual and collective ability to respond to random events.
- 56 In this sense, philosopher Claire Marin<sup>24</sup> notes that “the real is not necessarily as it appears. It has a dual nature that needs to be uncovered. [...] Relations between things can appear obvious whereas in fact they are only probable.”
- 57 Countries in the central Sahel, Burkina Faso, Mali and Niger contain the most strategic locations and places along the migration routes linking sub-Saharan Africa to the southern banks of the Mediterranean. This region is facing an unprecedented humanitarian and protection crisis.<sup>25</sup> In 2020, only 17,120 cases of COVID were recorded while over 1,600,000 people were forced to flee their home because of violence.<sup>26</sup> The UN Coordination Office for Humanitarian Affairs (OCHA) spoke of a crisis reaching breaking point<sup>27</sup> and the High Commissioner for Refugees (HCR) has called it the most complex and fastest growing regional crisis worldwide.<sup>28</sup> Migration journeys pass through regions at the epicentre of these conflicts. Seeking to reach Agadez in northern Niger, migrants from Senegal, Guinea, Côte d’Ivoire and from Sikasso in southern Mali crossed the Liptako-Gourma border zone between Burkina Faso, Mali and Niger, which has an unprecedented concentration of security threats: activities of radical groups, growing criminal activity, organised crime and community conflicts.<sup>29</sup> Other migrants had previously chosen the route connecting Bamako to Agadez via Gao in central Mali. There was a deterioration in the security situation on the Gao-Ansongo-

Labezanga route, characterised by escalating criminality, attacks by non-state armed groups and military operations. Due to this growing insecurity, migrants now favour the route via Timbuktu, further east, which, although not untouched by violence, seems less dangerous to them. They then cross the Algerian border at Bordj Badji Mokhtar before heading to Tamanrasset and then on to Libya.

- 58 On top of the security risk, monitoring of migration flows through Niger has been stepped up. Since 2016, the IOM has set up seven population flow monitoring points, including two in Seguedine and Madama on the route from Agadez to the Libyan border.<sup>30</sup> This monitoring follows on from an extension of law 2015-36 on illicit trafficking in migrants,<sup>31</sup> adopted by the state of Niger on 26 May 2015. Officially, the law was adopted to transpose the Palermo Protocol against the Smuggling of Migrants by Land, Air and Sea into domestic law. Adopted by the United Nations General Assembly in 2000, this came into force in 2003<sup>32</sup> and was ratified by Niger in 2009.<sup>33</sup> But the underlying objective was to outsource border control from the Schengen area to the borders of African countries. At some border posts today in Niger, police forces demand a passport or ECOWAS travel certificate. Such practices are fundamentally contrary to the free movement protocol adopted by member states in 1979. However, Simon Compaoré, Minister for Security in Burkina Faso (2017), welcomed the new arrangements, claiming they eliminated the need to check identity cards or passports and record them on paper. Instead, these could be recorded on computer along with fingerprints, with the possibility that the information provided could also potentially be connected to INTERPOL.<sup>34</sup>
- 59 These new security and political situations have spurred migrants to take other routes and avoid dangerous areas and shakedowns at unannounced police checkpoints.<sup>35</sup>
- 60 Moreover, gender-based violence has intensified; women and girls are diverted to mining areas where they are forced into prostitution. In parallel, minors in convoys crossing the Sahara are kidnapped and sold on to armed groups and then recruited to fight or subjected to forced labour.
- 61 People who set off on migration routes, either voluntarily or under duress, saw the risks engendered by COVID as much lower than the dangers of armed conflict and the new – formal and informal – border controls, which have forced migrants to take other, more perilous routes that in turn have made migration journeys even more invisible and infringe on migrants' very right to live.
- 62 In this context, what migrants themselves say can play "a central role in explaining our conscious and unconscious actions" (Bachelard, 2000) and help understand how each person can "forge a new geography" (Brun-Picard, 2014: 179) and take ownership of a "random space" (Zusman, 2021).
- 63 The various health, security and political risks encountered along migration routes require each migrant to overcome, constantly and unremittingly, the "inevitable hiatus imposed on existence" (Latour, 2021: 45), to preserve the continuity of the migratory journey.
- 64 Seen from the south, migration journeys should encourage us to qualify the Eurocentric perception of the COVID crisis and to contextualise its effects on the movement of people. These journeys confirm the notion that the pandemic was as much about disruption as it was about continuity.

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## NOTES

1. Call for contributions: COVID-19, migrations and parkours. Mobility through the prism of immobility: paradoxes and realities, *Revue Européenne des Migrations Internationales* [online]. URL: <https://journals.openedition.org/remi/16255>
2. Extract from the call for contributions (available at <https://journals.openedition.org/remi/16255>).
3. The COVID-19 Ad Memoriam Institute in France for example. See <https://www.institutcovid19admemoriam.com/>
4. The fact that a sociologist and an anthropologist were appointed to the scientific committee formed in France in response to the COVID-19 epidemic changes little to this fact.
5. The One Health concept, propounded since the early 2000s alongside growing awareness of the close links between human health, animal health and the overall environment. It promotes a multidisciplinary and global approach to health issues (source: <https://www.anses.fr/fr/content/one-health>).

6. For a reframing of the work of these authors and to gain a better picture of the relations between health and development, see Berthelemy Jean-Claude and Thuilliez Josselin (2013) Health and Development: A Circular Causality, *Revue d'économie du développement*, 21 (2-3), pp. 119-147 [online]. URL: <https://www.cairn-int.info/journal-revue-d-economie-du-developpement-2013-2-page-119.htm>
7. This project brought together researchers from different disciplines (geography, sociodemographics, law, IT, literary studies, etc.), thus providing wide coverage of the phenomenon. Work focused on two main areas: (1) analysing the effects of lockdown measures on migration trajectories and in detention centres for foreigners; (2) textual, iconographic and thematic analysis of how journalists handled the topic of both internal and international migration. A range of methodological tools were used, including mapping, quantitative analysis of co-variations and analysis of text content. The work was done in collaboration with mapping engineers at IRD (Eric Opigez, Ceped – IRD/University of Paris Cité) and CNRS (Nelly Martin, Migrinter – CNRS/University of Poitiers) and with a researcher (Lakdar Saïs) and an engineer at CRIL (Fabien Delorme, CNRS/University of Artois), all of whom have a research focus on artificial intelligence and its applications. Geographic processing was done by Lucie Bacon (Balkans), Thomas Lacroix (rest of the world), Nelly Robin (Africa), Tony Rublon (Middle East) and Li Zhipeng (east Asia). Thematic analysis was provided by Florian Aumond (international organisations and the law), Elsa Gomis (images and video), Brenda Le Bigot and Jordan Pinel (north-south migrations) and Véronique Petit (health). The threads are listed on the Institut Convergences Migrations website: <https://www.icmigrations.cnrs.fr/2020/05/20/covid-19-et-migrations/>, <http://icmigrations.fr/2020/05/20/covid-19-et-migrations/> and [https://seenthis.net/people/tony\\_rublon](https://seenthis.net/people/tony_rublon)
8. Damon Julien (2021) Pauvreté globale : le choc du COVID-19, *Politique étrangère*, 1, pp. 11-22.
9. This was documented for example in the Oxfam France report, *Dans le monde d'après, les riches font sécession*, published in January 2022.
10. The media saga of Serbian tennis player Novac Djokovic, whose visa was cancelled by the Australian government for failure to comply with COVID-19 vaccination obligations, largely obscured the experience of thousands of less privileged.
11. The second dimension does not in any way mask the first. The collapse in remittances sent by the diaspora during the crisis was also a major event.
12. Some answers were provided by the Committee on the Rights of the Child, which noted that France was in violation of its obligations under the Convention on the Rights of the Child (1989) in refusing to repatriate French children held in camps in Iraq (communications 77/2019, 79/2019 and 109/2019, observation of 8 February 2022).
13. <http://www.senat.fr/rap/r19-526/r19-5261.pdf>
14. The French Council of State handed down this ruling on 28 January 2022: “The fundamental right of every French person to return to national territory may only be infringed in cases of imperative necessity for the protection of public order” (case no. 454927).
15. Carrère Violaine (2020) Régulariser les sans-papiers... dans le monde d'après, *Plein droit*, 4 (127), p. 6.
16. See for example, the “teleservice” introduced for residence permit applications. The Council of State did, however, circumscribe recourse to this, ruling that a replacement solution should be provided in some circumstances (case 45798, 3 June 2022).
17. <https://zolberginstitute.org/initiatives/covid-19/>
18. The Council of State did not overturn the decision, noting in its ruling of 19 November 2021 (no. 457726) that the Ministry of the Interior had undertaken to review this practice.
19. Interview with Florence Kim, spokesperson for the International Organization for Migration (IOM) for west and central Africa, Xinhua, 3 April 2020 [online]. URL: [http://french.xinhuanet.com/2020-04/04/c\\_138945533.htm](http://french.xinhuanet.com/2020-04/04/c_138945533.htm)

20. Ben Hamad Fatma (2020) Niger: in Arlit, sub-Saharan migrants revolt against the endless quarantine, *France 24, Les Observateurs*, 24 April [online]. URL: <https://observers.france24.com/fr/20200424-niger-arlit-migrants-subsahariens-revoltent-protester-contre-une-quarantaine-fin>
21. <https://news.un.org/fr/story/2020/09/1076682>
22. <https://www.alarmephonesahara.info/en/ticker>
23. Alarm Phone Sahara.
24. Enjalbert Cédric (2022) Interview with Claire Marin, *Philosophie magazine*, 157, pp. 64-69.
25. UNHCR (2020) Project 21. Regional Protection Monitoring Report. Central Sahel: Burkina Faso, Mali, Niger, May-November.
26. According to the HCR (2020): 1,658,000 internally displaced people, of which 1,075,000 in Burkina Faso, 326,000 in Mali and 257,000 in Niger.
27. ONU Info (2020) Sahel : face à une crise proche du « point de rupture », *ONU Info*, 16 October.
28. <https://www.unhcr.org/flagship-reports/globaltrends/>
29. “Three Borders” project, Alliance Sahel, April 2020.
30. DTM/OIM, Reports on population flow monitoring.
31. [https://sherloc.unodc.org/cld/uploads/res/document/ner/2015/loi\\_relative\\_au\\_trafic\\_illicite\\_de\\_migrants\\_html/Loi\\_N2015-36\\_relative\\_au\\_trafic\\_illicite\\_de\\_migrants.pdf](https://sherloc.unodc.org/cld/uploads/res/document/ner/2015/loi_relative_au_trafic_illicite_de_migrants_html/Loi_N2015-36_relative_au_trafic_illicite_de_migrants.pdf)
32. This is an additional protocol to the United Nations Convention against Transnational Organized Crime (2000).
33. This supplements the ratification in 2004 of the Protocol on trafficking in human beings, incorporated in the substantive law of Niger by order no. 2010-86 on the prevention of human trafficking. See <https://www.rabat-process.org/en/countries/71-niger>
34. Le Faso.net (2017) Official launch of the Migration information and data analysis system (MIDAS) with the collaboration of the IOM and technical and financial support from Japan, *Le Faso.net*, 2 October.
35. From Sikasso (Mali) to Agadez, the total sums demanded to cross various checkpoints rose from XAF 41,000 to XAF 115,000 between 2014 and 2020 (information gathered from migrants during surveys conducted by Nelly Robin, IRD, in December 2019 and February 2022).

## INDEX

**Palabras claves:** pandemia, rutas migratorias, salud, políticas migratorias, derechos, desigualdades, retornos

**Keywords:** pandemic, migration parkour, health, migration policies, rights, inequality, returns

**Mots-clés:** pandémie, parcours migratoires, santé, politiques migratoires, droits, inégalités, retours

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