

Episode 15 Transcript

Covid-19 and the Migrant Crisis

Hosted By: Rebecca Richards

Guest: Dr. Arianne Shahvisi

This transcript may have been slightly edited for clarity.

Hello and welcome to another episode of Just Emergencies. I'm Rebecca Richards and I'm delighted to be joined today by Dr. Arianne Shahvisi to talk about Covid-19 and the ongoing Migrant 'Crisis'. Dr. Shahvisi is a Senior Lecturer in Ethics at Brighton and Sussex Medical School. She is an applied philosopher whose research focuses on reproductive ethics, feminist bioethics, migration, gender, and race. She has written for the London Review of Books, The Independent, and Huffington post and is currently writing a book on the philosophy of social justice which will be published by Penguin in 2022.

Now this episode was recorded a few months ago, but you'll see that all of the issues we discussed are still very relevant today and throughout the Covid-19 management and vaccination process. With that being said, let's jump into the episode.

[Intro Music]

This is 'Just Emergencies', the podcast where we show that global health emergencies are anything but just. In each episode we explore an issue, question, or event that makes us think about global health emergencies, humanitarian crises, and how to best respond to them.

Without further ado, let's get into the episode!

Rebecca: Hi Arianne and thanks so much for joining us on the Just Emergencies podcast.

Dr. Shahvisi: Hi, thank you for having me.

Rebecca: Ok, so today we were wanting to talk about migration and the Covid-19 pandemic. Over the past few years - as we're all aware - there's been the development of what's widely called 'the migration *crisis*'. Can you give us some background on that and what it means to think of this as a humanitarian issue or humanitarian crisis, rather than perhaps an issue of security or border?

Dr. Shahvisi: Sure, yes.

Crisis is an interesting word, isn't it? Because it makes it sound like something that's kind of short term, a sort of sharp peak. But actually, this is an ongoing catastrophe that's been unfolding for many years. Personally, I can't see how it comes to an end, either, short of radically changing how borders are managed and asylum is sought.

So about 80 million people are displaced globally. And there are lots and lots of reasons for that: land degradation, climate change, war, persecution, poverty is a big one. So there's lot of reasons why people are displaced.

I think one of the things that people often don't realise is that most of those refugees are in fact displaced into Global South countries, not into Global North countries. I think when we're talking about this migrant crisis, we're often talking about the places from which we - you and I - are located within. So places like the UK. But actually, most refugees - it's something like 85% of the world's refugees - are actually located within Global South states. Places like Lebanon, Jordan, Turkey, Liberia, and Uganda actually shoulder the biggest burden.

I do think though that when we have these discussions it's important to specify which of those regions we're talking about. And I expect that you and I, in our conversation, will be most focussed on what's going on in Europe at

the moment. And there's some good reasons for that, actually. One is that we're located here. Another is that, actually, from a moral perspective, things look slightly different. If we look at the places that asylum seekers are coming from when they arrive in Europe, they're coming from a range of countries that have histories of European colonialism and military intervention from European powers.

You asked why we should move away from this kind of security framing to more of a humanitarian framing... well, I say that maybe even the humanitarian framing isn't quite the right way to see it. Because I think a humanitarian framing indicates that something terrible has happened somewhere and we should now help those people. Actually, I think it's more accurate to say that many of the terrible things that have happened that have led to people becoming displaced we actually have either a direct or indirect responsibility for. And I think that massively changes how we ought to be thinking about what we owe to these people.

Rebecca: I guess that is a particularly important question during the Covid-19 pandemic in terms of access to healthcare resources and those surrounding issues. So how does the current Covid-19 pandemic change how we talk and think about the ongoing migrant crisis? For example, has there been any change in political discourse or action around this issue?

Dr. Shahvisi: I think there was certainly the potential for a change in discourse. I think there were moments where some of us were hopeful that the whole world being affected by this disease would break some of the ruts we've gotten ourselves into, in terms of how we think of ourselves as a global community. That maybe there would be stronger notions of solidarity, both within each state but also internationally.

I think that hasn't happened. And actually, as the vaccine has been released, I think we've seen this vaccine nationalism. We've seen wealthy states like the UK kind of doubling down on how important it is that people

in the UK are vaccinated - not thinking very much about what happens to those in the Global South or those in the kind of liminal spaces of refugee camps, who are very very vulnerable. We've seen all of that stuff resumed quite readily. So it hasn't really delivered for me on one of the things I was hopeful about this situation would lead to improvements within. That's one side of what's happened in terms of migration and international solidarity in Covid-19.

Another is that obviously our travel has been limited. So for lots of us we've not been able to move around in the ways we ordinarily would. But in fact, refugees are still moving around and have been all year. And lots of people are using more unofficial channels for travel. We've had record numbers of people attempting to cross the English channel from France into the UK, for example. That's despite the number of cases in the UK being incredibly high. The desperation of these people is so great that they're prepared to take on that sort of risk.

And what we haven't see either, I should say, is a change of attitude within the UK to those refugees. I think in some ways, tackling the pandemic has made people even less open and generous in how they think about the other forms of suffering in the world.

In the beginning of this, I would have liked to have thought that we'd have learnt some lessons. I don't see that we have at this point.

Rebecca: Going back to the refugee and migrant populations, would I be correct in assuming that these populations and communities might be very underrepresented in terms of testing for Covid-19 and also the resources that are available to help them deal with the pandemic both economically and socially, but also in terms of access to healthcare?

Dr. Shahvisi: Yes, absolutely.

Obviously, if we're thinking about refugee camps then we're talking about massively overcrowded spaces where people are necessarily unable to adhere to social distancing guidelines. Because there just isn't enough room to do it. In terms of using the bathroom or using the shower... these services are so overused, there are so many people and so few of each of these things that it's really really hard for people to keep any kind of distance from each other.

The things that we need like frequent handwashing, I mean that's not going to be possible if you have limited access to water and soap. So there's all these sorts of challenges within refugee camps.

Then on the other hand, within the UK for example, undocumented migrants here, there's the challenge that even if testing is available to those who are symptomatic, you're unlikely to approach a medical professional or are unlikely to go to a GP clinic if you are in a situation where the Home Office could be contacted if you start having these interactions with healthcare workers or the healthcare institution. It is the case that if you're an undocumented migrant and you incur debts within the NHS, then the NHS is required to share your details with the Home Office. Although that wouldn't apply in cases of tests or treatments for infectious diseases, the details are so hard to get your head around, it's very unlikely that that information is going to get to the people who need to hear it. And that they're going to trust it, frankly.

It's not just about whether tests are available, but about whether there's the trust there that people will be able to do the right thing. And we know that undocumented migrants are underusing health service at the moment, as they always are. So there'll be lots of cases we're not picking up on there.

Rebecca: During the pandemic in particular - though the momentum has been growing before that as well - we've seen a lot of academics involved in the media or in outreach programmes, writing Op-Eds, and really getting

out there and doing advocacy work. So there has been this growing call recently for academics to use their positions of power, privilege, and knowledge to do advocacy work. As academic activists, what should we be thinking about and doing in relation to the migrant crisis and improving the situation?

Dr. Shahvisi: It's really good question. It's something that I think about a lot myself.

I think it depends a little bit on the field that you're in as to which particular ways you can be useful. I'm a Philosopher and one of the things that is most important for me and for people who work in similar, related fields, is to just cut through some of the misinformation. I think we're very well positioned to do that.

One of the big things that I've been trying to tackle is what I call the 'asylum-paradox'. So you hear a lot in the news about these people who are entering the UK illegally and they're criminals, and all of this. In some sense they *are* entering the UK illegally. We can't argue with that. But I think the bit that is missed is that there isn't actually a way of them entering legally. You can come into the UK in two ways: you can either come in with a visa, with the appropriate documentation. Or you can come in by some covert means and illegally. The UK has over the years made it the case that for any country which is seen to be economically, politically, socially insecure in any way, they require visas for people to travel from those countries. So if you're coming from a wealthy country, there might be some deal where you don't need a visa. But you absolutely do need a visa where the UK government suspects that you may have reasons to want to stay in the UK beyond the term of your visa and apply for asylum. Because they don't want people to be applying for asylum.

So then we have this weird situation where you can only apply for asylum if you're already in the UK, but you can only really get into the UK illegally.

And I think this just isn't made clear enough to the public. How much of a kind of trap this is. Clearly what that means is that people have to undertake extraordinarily dangerous journeys in order to get here and give their life savings to smuggling groups who will - with no guarantee that any of them or their family members will make it alive - try to get them across borders illegally.

I think it's things like that that we need to make clearer to the public. That they have been misinformed. I mean the other thing that I mentioned earlier as well about the Global South shouldering the burden of resettling something like 85% of the world's refugees - I think that's not widely known either. People have this idea that the UK is overburdened and we are being asked to take on an unfair share of this particular burden. And that's just not true at all. In fact, we're even meeting the meagre targets that have been proposed by the government.

So I think the role of academics is to make sure that they are well informed about what is really going on here. And then informing the public. I think once people have better information about the reality of what is powering this ongoing crisis, then I think they would see things quite differently. I *hope* they would see things differently. And obviously, we're up against the misinformation campaigns of the government and the media, unfortunately.

Rebecca: Speaking of the media, how would, should, can academics go about getting that message out to the public? Because publishing in academic journals is obviously great, but it can function as a bit of an echo chamber - at least to the extent where generally it's only other academics or other people involved in scholarly work that can get access to those journals, to those opinions, to that information. So how can we go about making our advocacy work and our information widely accessible?

Dr. Shahvisi: That's an important point. Certainly the papers that I write in philosophy journals reach a very very small group of people. And they're people that are primarily interested, I'd say, in the ideas rather than any practical outcome that might come from them.

I think there are so many platforms out there these days. I think a lot of academics are already using those platforms. Writing for online magazines and newspapers is a great way of getting these messages out. Appearing on radio on television is probably more impactful still.

And then there are other places as well. I live in Brighton and we're very lucky to have an initiative called 'The Free University of Brighton', which is local academics giving lectures to the general public. They're completely free. So that's a great way of speaking to audiences that you wouldn't ordinarily be speaking to and that will go away and speak to the people they know. So I think there are definitely ways to do it.

I worry that for many academics, they're under such pressure from their institutions - clearly a lot of weight is put on academic publications - that there isn't a lot of time to be thinking about how to focus on these more *moral* missions.

The platforms are out there. As academics we are extremely fortunate in that we are seen as credible and authoritative. I think with that and with the platforms that we can reach, there comes a tremendous responsibility. I think we have to use them as well as we can.

Rebecca: Hopefully this podcast episode will go a little bit of a way towards sharing that information. Thank you so much for joining us today and for discussing this really important topic.

Dr. Shahvisi: Thank you, Rebecca.

[Outro music]

That's it for today – we hope you enjoyed the today's episode.

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Be sure to check out and explore our website “Justice in Global Health Emergencies and Humanitarian Crises” for more great content, just go to <https://www.ghe.law.ed.ac.uk/>.

Thanks for listening and see you again for the next episode.

This podcast is edited and produced by Rebecca Richards, made with funding from the Wellcome Trust.