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Hazardous confinement during the COVID-19 pandemic: The fate of migrants detained yet nondeportable

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ABSTRACT

As the French government decided on a lockdown of the population to prevent the spread of COVID-19, it soon appeared that, in an apparent paradox, two forcibly confined categories were particularly at risk: prisoners and detainees. Confronted with multiple mobilizations from civil society, authorities reacted in two distinct ways, significantly reducing the demographic of correctional facilities to allow for protective measures, but refusing to temporarily close detention centers, despite their insalubrious conditions and the impossibility of organizing deportations. These differential policies reveal an implicit moral hierarchy, in which undocumented migrants occupy the lower segment of the social scale, as well as a politics of indifference, which inculcates in them the illegitimacy of their presence and the unworthiness of their lives. Rebellions, self-harm, and hunger strikes are attempts to denounce and resist this intolerable situation.

“We’d rather die of hunger than from this shit!” wrote the migrants of the Lesquin Detention Center, in the North of France, on March 15, in a distressed public call. A case of infection by the novel coronavirus had been diagnosed among them two days earlier, leading several to stop going to the dining room for fear of being contaminated; as consequence, they had not gotten their meals for three days.¹ They were soon followed by others facing similar conditions at the Mesnil-Amelot Detention Center, near the Roissy airport, but those migrants made it clear this time, in an anguished statement published on March 30, that they were definitely on a hunger strike:

We demand our immediate liberation and the closing of the center. We are afraid of being contaminated by the coronavirus. There are still new arrivals. Here there is no hygiene. There are no flights. Nothing. Why are we still here? There are guys who cut themselves to get out of here. The police are violent toward us.²

Several such protests, sometimes accompanied with gestures of despair including self-mutilations or with rebellions punished by prison sentences, took place in various detention centers where undocumented migrants were being held at the height of the pandemic. Alarm was palpable, but incomprehension as well. Why were they detained, as staying in these centers was supposed to be the prelude to their deportation, which the situation rendered impossible? Most countries had closed their borders, flights were cancelled. The centers themselves were progressively deserted. Visits from relatives and friends were no longer authorized. Nongovernmental organizations (NGOs) that had been granted presence to assist migrants in their legal files and bear witness to their conditions of detention were not sending their members anymore because of the risk incurred. Only the police were still there, as well as the minimal staffing from the

private companies in charge of catering, while the personnel responsible for cleaning had exercised their right to opt out.

With the expansion of the epidemic across the country, the number of detainees had significantly decreased after the liberation of many, but as the justice system itself was partially shut down, hearings with liberty and custody judges were often postponed, not allowing for those who remained to have their situations examined as provided by law. For them, the risk of being infected could come either from police officers or from newly detained migrants. They knew this and dreaded it. Calls to temporarily close all detention centers multiplied from various sides, but the Minister of the Interior and the prefects remained unmoved.

In this article, I want to question the way French authorities treat undocumented migrants in the context of the pandemic. Although the imposed but voluntary confinement of the general population was intended to protect it from the risk of being infected, the forcible lockdown of detainees has exposed them to this very risk due to the poor conditions of their detention, the lack of preventative measures, the absence of testing, the unfeasibility of isolation, and the delay in diagnosis and treatment of patients. The government was alerted by multiple institutions, organizations, unions, and intellectuals not only to the potential danger for the migrants under these circumstances but also to the absurdity and illegality of detaining them in anticipation of their deportation when there was no chance of conducting such an operation.

This dual paradox—a forcible lockdown with predictable results the opposite of those intended as the outcome of the voluntary confinement, and a senseless measure supposedly to prepare expulsions but actually impossible to carry out—is only one on the face of it (Fassin 2019). In fact, exposing undocumented migrants to such a deadly threat pertains to the same politics of life as exposing them to even deadlier threats in the Mediterranean and the Alps as they attempt to reach the European, or more specifically French, territory. It is a politics of indifference (Herzfeld 1993).

In that regard, it is revealing that the other locked-up population, prisoners, received more attention from the government during the health crisis. The contrast between the policies toward migrants whose only crime was to be undocumented and the policies toward individuals who have been accused of or sentenced for an offense is indicative of implicitly established moral hierarchies. In contemporary society, exiles—those being called undocumented migrants who may also be asylum seekers—often occupy the lower segment of the social scale, even more disgraced than criminals. The French case is certainly not an exception in this respect (De Genova and Peutz 2010). It can be regarded as exemplary of the more general condition of those who flee their home countries because of war, persecution, hardship, and a dire future.

Based on research carried out in May and June 2020 in the Paris region through interviews, observation, and collection of data, I will first recount how the government reacted to the pandemic, emphasizing the situation of prisoners and detainees. I will then focus on the political mobilization to protect these populations from infection, and the differential response provided by the authorities. I will finally show that the health crisis did not provoke the crisis in the detention centers but, instead, uncovered their appalling ordinary reality.

The forgotten

The first case of the novel coronavirus infection in France was diagnosed on January 24, 2020, but it was later discovered that several patients presenting typical symptoms and who subsequently tested positive were already present in the country as early as mid-December 2019. Yet, only at the end of February were several clusters identified in three different regions, with initial patients having returned from Wuhan or Lombardy.

On March 7, despite a rapid doubling of cases and deaths every 48 hours, President Emmanuel Macron ostensibly went to the theater with his wife, stating that people should continue to live

normally; on March 15, when the incidence of the infection had been multiplied by 28 and its mortality by 42 in only two weeks, the French government decided to uphold the municipal elections. However, the next day, a strict shelter-in-place order with the slogan, “Save lives, stay home,” was announced for a period of two weeks, which was later extended for a total of almost two months.³ Only essential workers could go on with their activities, even though face masks remained unavailable for several weeks. In an awkward justification for their worrying shortage, two successive health ministers asserted at the time that these masks were actually useless for the general public.

To enforce the measures taken to fight the epidemic, notably the confinement, a state-of-emergency law was enacted on March 24, giving special powers to the executive branch and the police.⁴ The violation of the prohibition of being outside, except with the appropriate document authorizing it, was sanctioned by a \$160 fine, increased to \$1,800 in cases of repeated offenses and even up to \$4,500 with up to six months of imprisonment in cases of continued recidivism. In two months, more than 20 million checks were conducted and more than a million tickets issued, disproportionately to people belonging to ethno-racial minorities in disadvantaged neighborhoods, accompanied sometimes by violent interactions with the police.⁵ Even homeless people were occasionally fined for not abiding by the law. In sum, to make up for their lack of preparedness in the crisis foretold and for their ignorance of its early signs, the authorities turned to sanitary policing, imposing a rigorous confinement to protect the population from the spread of the infection.

But although confinement was presented as the best response to the expansion of the epidemic, it soon appeared that in two specific contexts where it was by definition implemented in the strictest way—in correctional facilities and detention centers—it threatened to produce the opposite of the desired effect. In the former—more specifically, in short-stay prisons, which house people awaiting trial and those who are sentenced to less than two years imprisonment—overcrowding reached unprecedented levels, two or even frequently three inmates being locked up 23 hours a day in the 100 square feet of a supposedly individual cell.⁶ In the latter, all activities, including meals, were collective and, as people could circulate freely within the centers, social distancing was impossible to respect, even less so as information regarding preventative measures was rarely available.⁷ In both situations, there were constant new arrivals of prisoners and migrants, respectively, and whereas visits had been forbidden, the personnel, either prison guards or police officers who came from outside, had frequent unprotected interactions with those locked up. Besides, although clear recommendations had been issued by the Ministry of Health for both institutions in the first days of the national confinement, hand sanitizer was lacking and masks were not provided. Finally, in the absence of testing, it was difficult to know whether people were infected by the coronavirus when they presented fever, cough, or other symptoms.

In the prison where I conducted my study, the physician in charge considered that inmates who complained about a loss of smell or taste were actually trying to manipulate her, and she therefore did not acknowledge them as probable cases. In detention centers, only severe forms of coronavirus infection were tested and isolated, thus ignoring a majority of clinical forms with little or no symptoms, particularly frequent among young men. In these circumstances, it was predictable that it would not take much to render the epidemiological situation critical and the atmosphere explosive in these institutions. It should, however, be noted from the start that during the five months following the declaration of national confinement, only one death was reported among the more than 70,000 inmates who were present at the beginning of the epidemic—that of a 74-year-old man who had been sentenced and incarcerated while already sick—and none has been reported in detention centers. The fact that there are very few individuals beyond the age of 60 in these facilities certainly accounts for this absence of fatality. As for the number of cases during that period, there are no reliable statistics, making it possible to establish it, as there has been no systematic testing in these facilities.

Difference

As the health crisis was looming, the awareness of the vulnerability of both populations rapidly gave rise to a broad mobilization.⁸ Researchers and intellectuals wrote opinion pieces asking whether, in the President's solemn address to the nation on March 16, his call for "a 'sense of responsibility and solidarity' stopped at the doors of correctional facilities and detention centers" (Fassin 2020).

On March 17, the Controller General of Facilities of Deprivation of Liberty, Adeline Hazan, wrote to the Minister of Justice, Nicole Belloubet, asking her "to reduce the carceral population to a level not above the actual capacity of the prison system" as the inmates' safety was "not guaranteed anymore," and to the Minister of the Interior, Christophe Castaner, asking him "to proceed immediately to the temporary closure of administrative detention centers" as "the prospect of deportations was slim, if not illusory."⁹

On March 19, the Defender of Rights, Jacques Toubon, also questioned the government on the situation of undocumented migrants, affirming that, in consideration of the situation, "the lockup lacked legal grounds" because they could not be deported, and even if they could, their expulsion to another country could "facilitate the spread of the virus contrary to the recommendations of the World Health Organization."¹⁰

On March 21, the Controller and the Defender along with the president of the National Consultative Commission for Human Rights, Jean-Marie Burguburu, signed an opinion editorial in the main French newspaper urging the government to take measures to protect undocumented migrants (Toubon, Hazan, and Burguburu 2020). In parallel, NGOs, including the International Observatory of Prisons and the Observatory of the Detention of Foreigners, and justice professional associations, such as the French Union of Lawyers and the National Bar Council, multiplied initiatives with the same ends but distinct means.

Regarding the prison system, a petition asking for the liberation of incarcerated persons with short sentences or near the end of their sentence was signed by a thousand judges, lawyers, social scientists, and health professionals.¹¹ Regarding the detention centers, legal actions were taken at the local, national and international levels, liberty and custody judges, and courts of appeal were seized for the release of individuals, while the Council of State and the European Court of Human Rights were requested to rule on the general principle of a temporary closure.¹² All these convergent actions were conducted in less than two weeks.

The response of the authorities was very different with respect to the treatment of the two populations. Whereas the Ministry of Justice took measures to reduce significantly the carceral population, the Ministry of the Interior refused to close the detention centers. The joint requests of official independent bodies, human rights organizations, professionals, and intellectuals were heard in regard to the condition of prisoners but not that of migrants. The fact that the latter came from the so-called Global South (particularly from the African continent and the Middle East) suggests a racial dimension in these policies, which is confirmed by the existence of systemic discrimination deeply ingrained in French law-enforcement institutions, and complaints by detainees about racist slurs coming from the police.

In correctional facilities, the population decreased by 19 percent in less than three months. There were 72,575 inmates on March 16 and 58,874 on June 11.¹³ During that period, the density of short-stay prisons declined from 140 to 108 percent, suggesting that the objective of one inmate per cell determined by an 1875 law, which had not been respected for decades, was almost reached. However, due to cells being rehabilitated or remaining dedicated to other functions, the actual density was higher than official statistics indicated. This evolution was hailed by the Union of Wardens, which demanded that what had been achieved because of the health crisis, thus demonstrating that single cell housing was possible, could become the norm. This remarkable result was attributable to the combination of a reduction in new incarcerations, partially due to the *quasi*-shutdown of the justice system and to the acceleration of the release—often with ankle

monitoring—of inmates approaching the end of their sentence, as ordered in a decree by the Ministry of Justice. A series of other measures was adopted to compensate for the loss of visits and activities, such as the granting of free access to television and a \$50 telephone card to call families, and the organization of regular meetings between the personnel and the inmates to improve the understanding of the plan implemented.

As for the detention centers, they remained open, with new migrants incessantly arriving over time. Surely, some did close after the liberty and custody judge freed the occupants, for instance in Strasbourg and Nice, or after the prefect decided to transfer those to another center, notably in Hendaye and Plaisir, with sometimes contrary arbitrations by the judge who released detainees and the prefect who added new ones, as was the case at the Spanish border. But the majority of them—especially the larger ones, such as Mesnil-Amelot near Roissy, Vincennes near Paris, Oissel near Rouen, and Coquelles near Calais—kept a large portion of their detainees.¹⁴ For those, the resistance to their closure came from both judges and prefects (Muchielli 2020). The former had the discretionary power to release or not as a function of their assessment of the infectious risk and, probably even more, of their ideological inclination. The latter opposed more specifically the release of migrants just liberated from prison with the argument that they could cause public disorder, although in most cases the offense for which they had been sentenced was relatively minor. Nevertheless, on the whole, the number of undocumented migrants detained in the centers substantially waned.

Although the government does not systematically publish statistics on this topic, which renders comparisons difficult, Cimade, an NGO present in detention centers since 1985, did produce some figures based on voluntary workers' observations on the ground. A year before the beginning of the epidemic, the number of persons detained was 878. At the time of the confinement, it was 343. Ten days later, 154. Seven centers had no detainees, nine had less than ten, five had eleven or more.¹⁵ This contraction of the population, which was limited in time, as the number of those detained began to increase again in April, served as a justification for the dismissal by the Council of State of the application for interim relief filed by several human rights and justice professional organizations that requested the closure of detention centers. For the highest French administrative court, the drop in the demographic rendered protection measures possible.

Had they visited detention centers, its members might have thought otherwise. Commenting on this decision, the NGOs that had initiated the case wrote that the court was providing “protection on the cheap for the migrants.”¹⁶ A representative who visited the center of Cornebarrieu, near Toulouse on April 3 described in his report the absence of masks, the lack of cleaning products, and the nonrespect of social distancing for both detainees and personnel. Similar observations were made on April 17 by the Controller General of Facilities of Deprivation of Liberty for the centers of Mesnil-Amelot and Vincennes, where eight cases were then officially reported.¹⁷ Although there was little testing, which did not allow for a precise estimation of the epidemiological situation, detainees who had symptoms and were confirmed as COVID-19 patients were supposed to be sent to the special medical centers established by the Regional Health Agency. However, this institution refused those just liberated from prison with the justification that they could disturb public order. Consequently, they ended up staying in isolation in the detention center.

The difference in the treatment of correctional facilities and detention centers by the authorities is not, however, only a question of numbers. After all, both significantly reduced their population so as to render its protection theoretically possible. It is also a question of management and commitment. The administration of correctional institutions devoted considerable efforts to ensure the protection of their inmates and personnel, designing protocols with the Health Ministry, coordinating with the local criminal courts, setting regional weekly videoconferences between wardens, involving guards in the prevention plans, and—to a certain degree—explaining the measures to the prisoners. There was nothing comparable for the detention centers, which

are under the distant authority of the prefect and whose personnel is composed of police officers with little interest in serving as custodians of people who have not committed crimes.

As their reactions proved, inmates and migrants made no mistake about the difference. There were few protests in the correctional facilities, and with one exception, these were limited to peaceful collective refusals to leave the yard and return to the cell until some specific demands were heard by the warden. They were disciplined by the prisons' special units without excessive use of force, although those considered to be the leaders were transferred to other facilities.

Conversely, in detention centers, there were multiple incidents, including hunger strikes and desperate revolts that were ignited by a climate of fear of coronavirus infection and of anger at the apathy of the authorities. Thus, the starting point for the riot in Vincennes was the rebuff of detainees' demand to have sick migrants taken care of in a hospital. Instead, the authorities sent police officers who used tear gas and violence to put down the disorder and transferred the migrants involved in the protests to other centers, purposely without their belongings—"like homeless people," one of them said. But such treatment was nothing new in detention centers. Rather than having generated these situations, the pandemic has simply unveiled them. It has been a catalyst and revealer of structural inequities.

Indifference

The detention centers were created in 1981 by the newly elected Socialist government to confine foreigners on the brink of being deported.¹⁸ They replaced a previous informal system whose infamous legacy was a warehouse in Arenc, near Marseille, where tens of thousands of Algerians were detained before being sent back to their country in the 1960s and 1970s. Once legalized, their development was parallel to the hardening of immigration policies from the 1980s onward, when the rise of the National Front moved these issues to the center of the public debate. Instead of denouncing this ideology, the Conservatives' and even the Socialists' and Communists' responses contributed to the legitimation of xenophobia. Thus, in 1984, the Prime Minister of a leftist coalition government, Laurent Fabius, stated that "the far-right has wrong answers to good questions."¹⁹

But it was in the 2000s that Minister of the Interior and later President Nicolas Sarkozy spectacularized the statistics of deportation, announcing and boasting about the numbers annually as his political signature, thus giving detention centers a crucial role and unprecedented visibility.²⁰ Two phenomena contributed to their rapid expansion. First, there was an increase in the number of individuals being detained every year: 14,000 at the end of the 1990s; 36,000 a decade later; more than 45,000 today. Second, there was an extension of the maximum duration of detention: it was seven days in 1981; it became nine days in 1999, 32 days in 2003, and 45 days in 2011; finally, in 2019, it doubled to reach 90 days.²¹ In other words, both flows and stocks have progressed rapidly, generating a need for more space.

The most substantial expansion of the system occurred after the vote for the law extending the maximum duration of detention to three months: There were 1,069 places in 2017, 1,549 in 2018, and 1,814 in 2019, an increase of 70 percent in two years, with 2,341 personnel and police mobilized. The official reason for the legislation was that it gave the administration more time to expedite the examination of cases and therefore made it be more effective in terms of deportations as the *laissez-passer* delivered by the corresponding foreign consulates were often delayed. Yet, a Senate report had demonstrated the previous year that only 6 percent of these *laissez-passer* were sent beyond the 45th day of detention (Buffet 2017). More than anything else, the law was supposed to show strength. However, the actual productivity of this policy and its cost effectiveness were rarely questioned. An analysis conducted by two representatives of the National Assembly shows that in 2018, out of 105,084 orders to leave the country delivered by the police and residence bans decided by judges in the metropolitan territory, only 15,677 deportations (that

is, 15 percent) have been executed. More specifically, among the migrants who had been housed in detention centers, the proportion of those actually deported was 40 percent. The average cost of each deportation was estimated at \$16,250 (Januel 2019).

This may seem a high price for such a modest outcome, and even more so, considering the invisible cost of suffering for the more than 45,000 individuals detained for increasingly long periods of time—25,000 in the metropolitan territory and 20,000 overseas—as well as their families. Many of them are separated from their spouses and children, who have legal status or, for some, French citizenship. Besides, 14 percent are asylum seekers are caught under the so-called Dublin Regulation, which requires that a file must be examined in the country where the fingerprints of the applicant were initially registered—that is, often the one they entered first.²² The insistence of the Ministry of the Interior to not close the detention centers must therefore be analyzed in light of these poor results and high costs.

That this system has mostly a performative function is suggested not only by the low number of deportations related to the considerable means deployed in terms of human and financial resources, but also by the modest number of arrests, decisions, and detentions compared to the population of undocumented migrants. Although this figure is, almost by definition, unknown, its most conservative assessment can be made via the statistics of people benefiting from State Medical Assistance, which is provided to those irregularly present in French territory: 320,000 persons. Nevertheless, this figure gives a very partial view of the actual demographic reality, as many people entitled to this health insurance do not request it, and it is more reasonable to think that the actual number could be at least twice as high (Lebourcq 2019).

In other words, in metropolitan France, less than 5 percent of the undocumented migrants are detained each year and hardly more than 1 percent are deported. Given such poor performance, the social performativity of these policies has two objectives and two targets. On the one hand, it is meant to show to the general public the determination of the government to combat illegal immigration, even if many of those arrested and detained actually have close family ties or seek refugee status. On the other hand, it is directed toward undocumented migrants themselves in order to inculcate in them a sense of their illegitimacy and, if one considers the indignity of the vexing conditions of their arrest and detention, of their unworthiness.

The attitude of governments toward the most vulnerable segments of their population—in particular, their degree of care or, on the contrary, indifference—is an indicator of their ultimate ethical values. The range of these attitudes has been studied for health systems in general (Dauvrin, Lorant, Sandu, Devillé, Dia, Dias, Gaddini, Ioannidis, Jensen, Kluge, Mertaniemi, Puigpinos i Riera, Sarvary, Strabmayr, Stankunas, Soarea, Weibel, Priebe 2012) and more recently for responses to the coronavirus infection (Boinnard 2020).

When the pandemic started, Spain closed all its detention centers, considering that preventative measures could not discriminate against undocumented migrants and moreover that their confinement in these facilities had no remaining legal basis as they could not be deported. Portugal decided to grant a temporary residence permit to all migrants and asylum seekers who had pending applications in order to ensure their access to public services, including health facilities. By contrast, the United States has had approximately 60,000 undocumented migrants in its overcrowded detention centers since the beginning of the pandemic, with an estimated 20 percent infection rate among the 19,000 tested by the Immigration and Customs Enforcement agency; nevertheless, the country has continued to organize deportations to Mexico and the Northern Triangle via 180 flights, at the risk of spreading of the virus.²³

In between these extremes, France has chosen to reduce its detained population but not to close its detention centers, despite their insalubrious conditions. Most European countries have done the same. Their policies in that regard are not significantly different from those they already carry out in the Mediterranean and at their internal borders, particularly in the Alps, where European countries have considerably increased the risks of migrants' journeys by intensifying

state repression against those who try these dangerous crossings and preventing those who attempt to assist them from doing so.²⁴ Such policies reflect a profound indifference toward what the life of these exiles is worth.

Notes

1. Their letter was published by the website infoLibertaire.net dedicated to the dissemination of news obtained from more than 150 sources in the activist media so as to serve as a repertoire of alternative media (see Infolibertaire 2020).
2. The statement was published by the website of the Assembly Against Administrative Detention Centers, an organization created in January 2019 in support of the collective struggles led by migrants in these centers (see A bas les CRA 2020).
3. The decree of March 16 prohibits all movements outside except under very specific circumstances with adequate permission (see <https://www.legifrance.gouv.fr/eli/decret/2020/3/16/PRMX2007858D/jo/texte>).
4. The language of the law 2020-290 is particularly dramatic in speaking of “health disaster” (*catastrophe sanitaire*; see <https://www.legifrance.gouv.fr/affichTexte.do?cidTexte=JORFTEXT000041746313&categorieLien=id>).
5. These fines amount to \$175 million. For details, see La Gazette des Communes (2020).
6. On January 1, there were 70,651 persons incarcerated. Short-stay prisons housed 48,288 prisoners, among whom 44 percent were awaiting trial. They had an average density of 138 percent per cell, with four facilities exceeding 200 percent (see Republic of France, Ministry of Justice 2020).
7. In 2019, there were 1,814 places in the administrative detention centers. There were 18,906 actual deportations that year, representing only 40 percent of those housed (see Republic of France, Cour de Comptes 2020).
8. A detailed and useful chronicle of this mobilization, of the authorities’ response, and of the reactions of the inmates and detainees has been produced by the French section of the International Prison Observatory (OIP 2020), for correctional facilities and by Gisti, the Group of Information and Support of Migrants, for detention centers (see Gisti 2020a) .
9. The Controllor General of Facilities of Deprivation of Liberty is an independent public body created in 2007 that controls all institutions where people are deprived of their liberty. See the statement and the letters to the ministers (Controleur General des Lieux de Privation de Liberte 2020a).
10. The Defensor of Rights is an independent public body in charge of guaranteeing the respect of human rights. See his statement to the government (Defenseur de Droits 2020).
11. The letter was published on May 3, three days after the most recent condemnation of the French state by the European Court of Human Rights for its inhumane treatment of prisoners. It is available through the Observatoire International des Prisons (2020).
12. The concern regarding the danger incurred by prisoners and detainees was not specific to France. On March 25, the UN High Commissioner for Human Rights, Michelle Bachelet, called on governments to protect the health and safety of people in detention and other closed facilities, including their staff (UN Office of the UN High Commissioner for Human Rights 2020).
13. These statistics were provided by the special advisor for prison of the minister of justice (interview by the author, June 15, 2020).
14. A detailed presentation of the situation of each detention center was produced on March 20 by Cimade (2020a).
15. These figures were obtained from the Observatory of the Detention of Foreigners (emails on file with the author, of March 16, 2020, and March 26, 2020).
16. See the full text of the decision of the Council of State in Conseil d’Etat (2020) and the response of the organizations in Gisti (2020b).
17. Members of Parliament and observers of the Controllor General of Facilities of Deprivation of Liberty can visit detention centers. See, for example, the statement by European Parliament member Manuel Bompard (2020) and Controleur General des Lieux de Privation de Liberte (2020b).
18. The history of detention centers has been recounted by Nicolas Fischer (2017), who has also conducted an ethnographic research in one of the largest of them, focusing his attention on the role of the NGO present to assist in legal cases and confront difficult dilemmas.
19. At the time, the government changed the rules of the legislative elections from majority voting to proportional representation, which allowed, for the first time under the Fifth Republic, the presence of the far right in the French Parliament. Archival footage is available via the French National Audiovisual Institute (INA 1984).

20. This “politics of number,” as it was coined, concerned also the statistics of crime. For the detention centers, the figure that was never publicized was that of the cost (Blic 2009).
21. A yearly report has been produced by Cimade since 2006, providing precious quantitative and qualitative information about detention centers (see Cimade 2020b).
22. An overview of both the statistical data and individual situations is presented in the *2018 Report on Administrative Detention Centers* written by the NGOs present in these centers (see Cimade 2018).
23. On the closure of detention centers in Spain, see Majkowska-Tomkin (2020); on immigration regularization in Portugal, see Waldersee (2020); on practices of the US Immigration and Customs Enforcement agency, see reporting by the International Rescue Committee (2020).
24. According to the Missing Migrant Project conducted by the UN International Organization for Migration (IOM), 10,958 migrants have died crossing the Mediterranean in the past five years; in the first seven months of 2020, there were 497 deaths. These figures are necessarily conservative, as an unknown number of fatalities are not registered. For details, see IOM (2020). As the repression of immigration by European authorities increased and as the humanitarian efforts to rescue people in sinking boats have been hindered, the mortality rate—that is, the number of deaths related to the number of arrivals—has climbed from 2 percent to 8 percent, meaning that for 12 persons reaching the European coast at least one has died in the crossing, making this border the most dangerous in the world (see IOM-Global Migration Data Analysis Centre 2020).

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