Panel: Ensuring human rights for all migrants: Practitioner’s perspectives and proposals in providing access to services to migrants in irregular situations

13 October, 13.15-14.45, Room VII (Palais des Nations), Geneva

It is a pleasure to be here on behalf of the British Red Cross, to represent the International Federation of Red Cross and Red Crescent Societies, its 190 National Societies worldwide and its 13 million volunteers.

Today I will be presenting some of the findings from a forthcoming study the British Red Cross has developed with IFRC, on the issue of vulnerable migrants’ access to essential services, in the context of the Global Compact for Safe, Orderly and Regular Migration.

Although there are many varied definitions of ‘essential services’, in our study we focused on: access to shelter, food and essential non-food items; basic and emergency health services; psychosocial support, information and legal assistance.

The study looked at the practices and experiences of Red Cross and Red Crescent national societies worldwide, examining frameworks that enabled or limited access to assistance.

This is an issue we approached from a global perspective, taking into account different stages of migratory journeys – looking at countries of transit and destination, developed and developing nations.

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We all in this room are too well acquainted with the risks that can be involved in migratory journeys, and with the stories of violence, abuse, exploitation, risks at sea and on land.

Drivers behind population movements, as well as journeys themselves can create urgent needs and exacerbate vulnerabilities.

Yet – in this context of acute needs – it is the experience of many Red Cross and Red Crescent National societies that migrants have significant challenges in meeting their basic needs and accessing lifesaving assistance.

Although our study looked at access to services for all vulnerable migrants, irregular migrants are often among those who – living at the margins of society - are most vulnerable, while also being among those least able to access assistance.

As the international Red Cross and Red Crescent Movement, we come to this issue from a humanitarian perspective. Our approach is rooted in the principle of humanity, which requires us to bring assistance, without discrimination, to prevent and alleviate human suffering wherever it is found.
This means ensuring access to essential services for all migrants irrespective of status, to prevent those who are already vulnerable from falling into even deeper crisis.

We found that, while there are important differences between different contexts, some common principles can be identified.

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First and foremost, our study highlighted the need to develop national frameworks that are humane, inclusive and clear – acknowledging basic standards of care that should be afforded to all migrants regardless of status.

This is particularly important in contexts where national frameworks explicitly exclude irregular migrants from accessing services, posing a formal barrier to those in need of assistance.

However, we found that inclusive frameworks in themselves are not enough.

Even in contexts where frameworks are progressive, informal barriers may still limit access, linked to factors such as language, culture and knowledge about rights and entitlements.

In the case of irregular migrants, those in need of help may be hesitant to access assistance, fearing punitive measures if they make themselves known to service providers.

Progress on frameworks must be matched with commitment to ensuring that inclusive frameworks translate into clear outcomes.

This means committing to better data and analysis on needs and outcomes, as well as investing in tackling barriers between inclusive frameworks and what we see on the ground.

This involves looking at assistance from the point of view of those who access it, to understand factors that continue to inhibit access even where it is formally guaranteed.

In the case of irregular migrants, this also includes looking at how different frameworks in different areas of government may interact with one another.

For example, where on the one hand a state may guarantee irregular migrants’ access to emergency health care, this may be counterbalanced with parallel requirements for service providers to share irregular migrants’ details with immigration authorities – which in practice means that those without status are deterred from accessing assistance.
To ensure better access in practice, a key recommendation is to **recognise the need for firewalls** between essential service provision and immigration enforcement, so that fear of detection does not prevent irregular migrants from accessing essential services, or from reporting abuse and exploitation.

This means establishing robust **data protection protocols** for all those providing essential services to vulnerable migrants, and **moving away from frameworks** that require service providers to **share migrants’ personal data** with immigration authorities.

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We also identified the need for **greater cooperation and complementarity between states and humanitarian actors** in responding to vulnerable migrants’ needs.

In recent years **tensions have sometimes arisen** between the core humanitarian imperative to alleviate suffering and **state policies of migration management**, particularly in terms of assistance to irregular migrants.

Yet we believe **that the two objectives need not be fundamentally opposed**.

Humanitarian service provision does not undermine a state’s **sovereign right to control its borders**. However humanitarian organizations can **work with states towards a shared understanding** that this sovereign right **must be balanced with commitment to avoiding and addressing risks to human life and dignity**.

Numerous cases exist where states and humanitarian actors have **worked together to ensure vulnerable migrants’ access to essential services**. For example, the **Italian Red Cross** has worked with local municipalities to facilitate creation of ‘Safe Spaces’—mobile help desks set up on a regular basis, where migrants can access information and advice, as well as basic services and onwards referral.

In this case, through dialogue, **agreement was found** that support could be provided to all migrants, and that authorities would not use the Safe Spaces as a way to arrest migrants without legal status.

A review of practices from within the International Red Cross and Red Crescent Movement showed **numerous other instances of National Societies securing support from state authorities to create safe spaces for migrants to access assistance**—from **Red Cross Hubs in Australia** to mobile aid stations provided by the **Mexican, Guatemalan and Honduras Red Cross** in partnership with ICRC.

Similarly, the **Korean Red Cross** operates a ‘**Healthy Neighbour Centre**’, providing medical services to migrant workers, refugees and asylum-seekers, alongside other vulnerable groups from host communities.
Such examples show that greater cooperation is possible – recognising that states and humanitarian actors play different roles in responding to migratory movements, but that cooperation can be fostered based on the shared objective of making assistance accessible where it is most needed.

From the side of host governments, this means preserving space for humanitarian service providers to operate and address needs, and ensuring that assistance to those without status is not criminalised in national legislation.

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As we approach the Global Compact on Migration, we reiterate our belief that immigration status should never become a barrier to accessing lifesaving care where it is available.

The Global Compact provides an important opportunity to clearly define a set of practical, outcome-oriented basic minimum standards of human dignity, to be afforded to all migrants irrespective of status.

For us, the issue of access to essential services is a vital part of this ambition, and National Societies across the world stand ready to assist and support states to develop and implement commitments in this area.