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Health and social care for illegal sub-Saharan immigrants in Oran

الرعاية الصحية والاجتماعية للمهاجرين غير الشرعيين جنوب الصحراء بمدينة وهران

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Abstract:

This field study addresses the health and social care of illegal migrants arriving from sub-Saharan countries to the urban area of Oran Due to its strategic location overlooking the Mediterranean Sea and its proximity to the European continent, this city witnesses a large influx of these migrants. During their movement and residence in the region, they may encounter life-threatening health and social risks or problems. The study showed that despite their illegal residency status, they benefit from free medical examinations in public hospitals. They also engage in work that, although irregular and unorganized, provides them with a livelihood within the local community.

Keywords : - Illegal immigration- health care - social care- urban space- Marginal

ملخص:

تعـالجُ هـذه الدِّراسـةُ الميدانيَّـةُ موضـوعَ الرِّعايـةِ الصـحيَّةِ والاجتماعيَّـةِ للمهـاجرينَ غيـرِ الشـرعيينَ الوافـدينَ مـن دولِ جنـوبِ الصَّـحراءِ إلـى الفضـاءِ الحضـريِّ لمدينـةِ وهـرانَ، التـي بحُكـمِ موقعِهـا

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الاستراتيجيّ المُطلّ على البحرِ الأبيضِ المُتوسّطِ والقريبِ من قارّةِ أوروبا، تشهدُ توافدًا كبيرًا لهؤلاءِ المهاجرينَ. وأثناءَ تنقُّلِهم وإقامتِهم في المنطقةِ، قد يُواجهونَ مخاطرَ أو مشكلاتٍ صحيَّةً واجتماعيَّةً تُهدّدُ حياتَهم.

وقد أظهرتِ الدّراسةُ أنَّهُ على الرَّغمِ مِنَ الوضعيَّةِ غيرِ القانونيَّةِ لإقامتِهم على التُّرابِ الوطنيّ، فإنَّهم يستفيدونَ من الفحصِ الطِّبّيّ المجّانيّ في المستشفياتِ العموميَّةِ. كما أنَّهم يُزاولونَ أعمالًا، رغمَ أنَّها غيرُ دائمةٍ وغيرُ مُنظَّمةٍ، إلَّا أنَّها تُتيحُ لهم سُبُلَ العيشِ داخلَ المجتمعِ المحليّ.

الكلمات المفتاحية: الهجرة الغير شرعية؛ الرعاية الصحية؛ الرعاية الاجتماعية؛ الهامشيه-الفضاء الحضري.

1. Introduction

irregular migration refers to crossing land or sea borders and residing in another country in an illegal manner, but once the period of. It is sometimes described as irregular migration or Harga; however, all these terms share the common feature of individuals or groups moving from one place to another by land, sea, or air in violation of international migration laws (Hisham Bashir, 2010, p. 6).

Algeria has shifted from being merely a transit space to becoming, for some migrants. In this context, Abdelmalek Sayad (cited in Kim Sabiha, 2021, p. 5) states: "Migration will not stop as long as the world remains divided into two worlds: one of the privileged and one of the labouring classes, that is, between a rich world and a poor world." In the same vein, Alfred Sauvy (2021) argues: "Either wealth goes where the poor are, or the poor go where wealth exists."

What is new in modern times is the placement of this phenomenon within the context of globalization. While older societies were only relatively connected, mainly through wars and long-distance trade, as Samir Amin notes (2013, p. 3), modern societies are now integrated into a new global system at the economic, political, and even cultural levels. This liberal system promotes the principle of free movement of people, making migration one of the core components of globalization. Migration patterns now reflect changes in economic, political, and cultural relations between countries (Anthony Giddens, 1987, p. 133). Nevertheless, migration transforms the individual from a citizen in the country of origin into a foreigner in the host country (Sayad, 1999, p. 10).

Considering the above, the following research questions are raised: What is the reality of health and social care for irregular migrants in the city of Oran? Does the irregular legal status of these migrants affect their access to health and social services?

Accordingly, the study proposes the following hypotheses:

Irregular migrants benefit from certain aspects of health and social care.

The irregular legal status of migrants in urban areas prevents them from accessing all available health and social care benefits.

Methodology of the Study

This field study on health and social care for irregular migrants in urban areas of the city of Oran adopts an anthropological approach. One of the main objectives of this approach is to explore cultural diversity and to understand interactions and exchanges between individuals and groups. The study relies on the ethnographic method, which is based on detailed and in-depth description. Due to its strategic geographical location, Oran experiences significant flows of irregular migrants from sub-Saharan African countries.

Because of our professional activity near the popular district of El-Medina El-Jadida, we passed daily through Tahtaha Square. During that period, the square was filled with irregular migrants of various nationalities. Several questions constantly came to mind: How do they live despite their irregular legal status in Algeria? What kind of work do they do? Where do they live? Is Algeria for them a place of settlement or merely a transit point toward Europe? These questions required convincing scientific answers regarding their lived reality and prospects.

The study sample was selected using a convenience random method, which was appropriate given the absence of reliable official statistics or representative reports on the number of irregular migrants. Snowball sampling was employed, allowing the researcher to conduct interviews with a sample of 30 male migrants of different nationalities: 20 from Niger, 2 from Côte d'Ivoire, 5 from Sudan, and 3 from Cameroon. The participants had generally low levels of education and limited professional experience, and their ages ranged between 21 and 30 years.

These migrants were mainly present and active in several urban areas of Oran, including the city center, marginal neighborhoods such as Douar B and Coca El-Hassi, the roundabout of El-Louz district, the roundabout of Colonel Lotfi district, and the Atlas roundabout in AADL Misserghine. These spaces are gathering points where many irregular migrants offer their services, particularly in physically demanding labor and construction work.

This study follows a qualitative methodology, using both structured and unstructured interviews, as well as direct and indirect observation. According to Pierre Bourdieu in The Weight of the World (cited in Boubker Boukhrissa, 2017, p. 312), the interview is always a face-to-face interaction between researcher and participant, it is a social relationship that shapes the outcomes produced by the interview process.

Observation, according to Durant J. Pet and Weil R. in their book Contemporary Sociology (Bettam Massouda, 1999, p. 123), is considered one of the most difficult research techniques because it depends largely on the researcher's skills and ability to uncover the details of social phenomena. In this technique, the researcher does not rely on chance when recording observations; rather, the process includes the views of the selected sample that constitutes the research population. At the same time, the researcher plans the observation in advance to cover a wide range of social situations and to closely examine behaviours and practices.

Nigerian migrants are spread across several neighbourhoods in Oran and include all age groups, including men, women, children, and even elderly individuals. This was particularly noticeable in the city center, especially among members of the Hausa group, who arrive in Algeria in large numbers. Some migrants set up informal checkpoints for begging at road networks, intersections, and busy public spaces with heavy traffic and transportation activity. Most of these migrants come from southern Niger and belong to the Hausa ethnic group, who could be described as nomadic in nature, dispersed across the Sahel region. They are widely present in the urban space of Oran, where they mainly engage in begging. According to a Nigerien migrant (30 years old, March 8, 2024): "The Hausa are the type of migrants who seek settlement if living conditions are suitable, and their occupation is begging, even in Niger."

The trajectories of irregular migrants differ between transit and settlement depending on several factors, including geographical destination and economic conditions. Transit migration aims at reaching a third country that offers better opportunities. Along this route, migrants face numerous risks, such as the dangers of desert crossings, sea journeys, arrest, deportation, or exploitation. .

Similarly, there is no formal system ensuring comprehensive social care for irregular migrants. Nevertheless, they may benefit from limited services provided either by public institutions or by charitable organizations.

2. **Migrants' Trajectories**

The trajectories of migrants crossing the Sahara constitute a highly risky experience due to harsh climatic conditions and the danger of exploitation by human trafficking networks. In an ethnographic study conducted by Salim Chenna (2016) in Tamanrasset on the routes of undocumented migrants crossing borders for the purpose of irregular migration, the researcher revealed diverse perspectives through multiple migrant experiences. He highlighted the forms of social organization among these migrants and clarified the idea of the commodification of the migrant, whereby the migrant is treated as a commodity within the informal labour market.

Analysis of the interviewees' narratives shows that the number of migrants determined to continue their journey decreases over time due to growing mobility constraints. Many rely on communication with former migrants residing in European countries. Most are young (between 20 and 30 years old), and nearly all maintain regular contact with a relative or friend who has successfully crossed to Europe and whom they regard as a role model. Their primary concern is to save a significant amount of money and wait for a suitable opportunity to move to the next stage of their journey.

Their migration process unfolds in stages, which may be prolonged or shortened depending on road conditions and financial resources. For some, the journey may take several years, marked by successive stops. The migration project may change direction or completely fail to achieve the initial goals set by the migrant.

During an encounter with one interviewee at the El-Louz roundabout in Oran, where he was waiting for a job opportunity by the roadside, he was speaking with a friend in Spain via WhatsApp. He stated:

"This is my friend who succeeded in reaching Spain. Before coming to Algeria, I tried to reach Spain. I stayed for a while in Morocco, specifically in Casablanca, where I worked. But job opportunities here in Algeria are better than in Morocco, so I chose Algeria. My dream is to reach Spain." He also described the difficulty of entering Spain due to strict security measures, guards, and surveillance cameras everywhere (Migrant from Niger, 21 years old, August 5, 2024).

3- Health care for irregular migrants in the city of Oran

Health care refers to physical, psychological, and social well-being and not merely the absence of disease. It is a fundamental human right. It includes medical and preventive services provided to all citizens without exception to improve health standards and prevent the spread of diseases and epidemics. It also covers services that contribute to improving overall health conditions, such as health education, access to safe drinking water, proper nutrition, vaccination, and other essential services. These responsibilities should involve all sectors in coordination with the health sector. Politically, socially, and economically, it is not acceptable for there to be an imbalance in health and health equity among people.

Reflecting on health and its relationship with migration is necessary if we want to understand migrants' experiences and reduce their hardships or even prevent avoidable harm. This requires adopting a holistic view of health that considers individuals as whole persons and seeks to promote their well-being in line with the principles of the World Health Organization 1994. Good health is described as a major resource for social and economic development, and at the same time, an important dimension of quality of life for individuals.

The relationship between migration and health is complex and influenced by several factors including living and economic conditions, cultural differences, and access to health services. Understanding how irregular migrants perceive health, the body, and illness can help improve the health services provided to them, especially when cultural and linguistic elements are integrated into care. Irregular migrants are particularly vulnerable to health risks. Restricted access to health services during transit or after arrival may lead to serious consequences, including the spread of infectious diseases in both sending and host communities. The link between migration and health can therefore be considered highly complex.

Algeria places significant importance on health by providing public health services and has enacted laws regulating this sector, as stated in Official Gazette No 46. Chapter Two Article 13 affirms that Algeria ensures and organizes prevention, protection, and health promotion. In Chapter Three Article 21, it is stated that every person has the right to protection, treatment, and support required by their health condition.

There is also a commitment to non-discrimination between patients in access to prevention, care, or treatment, particularly based on origin, religion, age, gender, social or family status, health condition, or disability.

Hospitals in Algeria are therefore required to examine irregular migrants without conditions, as confirmed by many migrants. Treatment is provided free of charge to individuals who have no income.

When I get sick, I go to the clinic to have medical examinations for free and without being asked for a card or identity document. Nigerien migrant age 30, 2 June 2024, interview, El Louz roundabout.

Another migrant from Côte d'Ivoire aged 28 on 4 April 2023, who fell while carrying out construction work at a villa in Ain El Turck, Oran stated

I work in harsh and difficult conditions. One time I was working at a villa and I fell from above. I stayed almost a year without work. Look at the deformities caused by the injury I suffered. What truly shocked me was that the employer I was working for abandoned me and neglected me. I received treatment at the hospital for a period, and afterward, I went to Saint Eugène Church in Oran, which offered me assistance.

Severe injuries sustained by irregular migrants may not always be treated in public clinics and hospitals. As a result, these migrants may turn to private clinics which primarily operate for profit. Employers fearing legal accountability for hiring a foreign national who entered the country illegally may prefer this option. With the issuance of Law 88 15 private clinics were introduced into the Algerian health system as profit-oriented institutions, unlike public health establishments. This marked a significant shift in a health policy that had long been characterized by free treatment.

The opening of the private sector brought several advantages such as contributing to the provision of certain health services, reducing pressure on public institutions, and improving service quality. However, when irregular migrants suffer serious workplace injuries or require sensitive or high-risk surgical operations, public institutions often refuse to carry out such procedures due to the legal implications involved. This was confirmed by a 24-year-old migrant from Niger on 2 February 2024, who revealed multiple scars and work-related injuries on different parts of his body and stated

I had a workplace accident, and my employer took me to a private clinic for treatment.

Turning to private clinics helps both the employer and the irregular migrant avoid questioning by security authorities. For this reason, private clinics become the preferred destination since their primary concern is profit without other considerations.

4. Social care for irregular migrants in the city of Oran

The American Association of Social Workers defined social care as organized activities carried out by institutions, whether local or governmental, that seek to solve social problems and improve the social conditions of individuals, groups, and communities. These activities involve the efforts of various professionals such as doctors, nurses, legal experts, teachers, engineers, and social workers. Ronaldo Frederico also defined it as a means of improving social functioning or alleviating suffering through a system of social services organized to serve those who struggle to meet their needs or solve their problems.

With the increase in diseases and social problems, the need for social care has grown. Social care can be observed in several important areas including the educational field by helping children benefit from learning opportunities, especially during early childhood, while ensuring their protection and proper nutrition as well as safeguarding them from physical and psychological illnesses.

Among the important models of social care are the provision of housing services, access to medical services, and food support, particularly for young children and minors. It also involves creating recreational spaces for play and ensuring care for all segments of society without discrimination, including adults. In addition, social protection for workers and professionals is provided through social insurance, which Anthony Giddens described as a system established by the state to protect individuals and their families from life's various risks and to ensure them a dignified and decent standard of living.

The irregular status of these migrants may deprive many of them of rights and benefits. Some migrants perceive this as an injustice against them, as expressed by one irregular migrant from Côte d'Ivoire.

"Why do they not integrate us into Algerian society like other countries so that we would have the same rights and duties? Why are our children not allowed to enter schools?" - 28 years old 4 April 2023

Some irregular migrants live in marginal neighborhoods such as Hassi Douar B in El Louz district and Ain El Beida. Marginality is a concept developed in Mexican sociology due to the widespread presence of marginal groups in Mexican society in both rural and urban areas.

Pablo Casanova was the first to coin the term in 1970 to refer to marginalized peasants suffering from severe poverty and belonging to indigenous origins.

In general, the concept refers to individuals who suffer and live on the margins of society. Robert Park, a leading figure of the Chicago School, used the term "marginal man" to describe instability and a constant readiness to engage in new experiences. In this sense, it also refers to an individual who belongs to two different cultures or societies without fully integrating into either and is destined to live in contradiction. In this context, Wilson sees that the marginal group lies outside the professional system and describes it as a group lacking training and high-level skills, suffering from both open and hidden unemployment, and existing outside the labor force.

They organize themselves in a structured way. Women, children, and the elderly head toward the city center and busy neighborhoods to practice begging, which we observed directly. Young adolescents between 10 and 15 years old go to the roundabout in the Martyrs district, known as Castor, where cars frequently stop. They wash cars even without the owner requesting it in exchange for a few dinars and sell car cleaning items. Adult men capable of physically demanding labor go to the roundabouts of Colonel Lotfi and El Louz and wait by the roadside for job offers, which are usually heavy manual work.

Migrants also face strong competition from local workers, which sometimes leads to insults and conflicts because local workers believe they have legitimacy over the land and greater entitlement to job opportunities than irregular migrants. At the El Louz roundabout, migrants gather in separate groups according to nationality such as Nigeriens, Guineans, and Malians. They gather daily and remain under each other's watch, forming a kind of organized network to confront the challenges posed by the host society and the recurring conflicts that arise.

Many migrants reside in marginal neighborhoods where they live collectively in shared houses and split rent expenses. A 30-year-old migrant from Niger interviewed on 12 January 2024, who speaks the local dialect fluently, likely due to his long stay in Algeria, stated

"I live in Douar B, a marginal neighborhood near El Louz. The rent is high. I share a house with my migrant friends and we divide the rent. I pay 10000 dinars per month for a house that lacks everything. What exhausts me most is bringing water."

Marginal neighborhoods are characterized by poor housing conditions, lack of sanitation, overcrowding, and unhealthy environments.

5 Conclusion

Migration has witnessed a significant acceleration in recent decades as a result of multiple factors including globalization, political and ethnic conflicts, environmental disasters, and the worsening of poverty. Irregular migration negatively affects the health of irregular migrants due to the difficulty of accessing health and social services because of their undocumented status, whether during their journey from their countries of origin or after reaching areas of settlement.

Health and social care for irregular migrants in the city of Oran reflects complex humanitarian and legal challenges that require a careful balance between ethical considerations, economic pressures, and security policies. Despite efforts to provide basic services to this vulnerable group, the absence of a clear legal framework and sufficient financial resources limits the effectiveness of these interventions.

These migrants benefit from free medical examinations in the same way as Algerian citizens. Infants receive vaccinations, and pregnant women can give birth without obstacles while also benefiting from maternal and prenatal follow-up. Despite the hardships they endure, many irregular migrants have managed to secure employment, even if temporary, which allows them to maintain a decent living. They often work in physically demanding sectors avoided by local workers such as construction sites or agricultural fields. In addition, they receive assistance from some Algerian citizens.

It is also important to note that many irregular migrants have succeeded in finding housing, even if in informal or marginal neighborhoods, which may strengthen their sense of belonging to the urban space. Many express a feeling of relative comfort compared to the poverty and insecurity they experienced in their countries of origin due to economic and social difficulties. Some develop small income-generating activities that ensure their daily subsistence such as selling tissues and other minor goods. For many, Algeria has gradually shifted from being a mere transit point toward Europe to becoming a space of settlement.

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