“Action Through Omission”: Biopoliticization of Migration in Times of Pandemic in Nuevo León, Mexico

“En la omisión está la acción”: Biopolitización de la migración en tiempos de pandemia en Nuevo León, México

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ABSTRACT
This article explores the intrusion of power into the lives of migrant populations in Mexico during the first year of the COVID-19 pandemic. Drawing from biopolitical theories, a documentary analysis of the state of Nuevo León, and interviews with key actors from civil society, it reveals control mechanisms that pathologize migrants. Contrary to official discourses, the exercise of power is characterized by two dynamics of disposability: an almost exclusive focus on repressive migration policies and a policy of omission that denies migrants in irregular situations access to healthcare services. Whether intentionally implemented or as an unreflective practice by authorities based on supposed health risks, these biopolitical devices align with the needs of the current hegemonic economic system, against which individuals develop strategies of resistance in an attempt to emancipate themselves from the forms of oppression that afflict them.

Keywords: 1. biopolitics, 2. COVID-19, 3. irregular migration, 4. Nuevo León, 5. Mexico.

RESUMEN
En este artículo se explora la intromisión del poder en la vida de las poblaciones migrantes en México durante el primer año de la pandemia de COVID-19. Partiendo de las teorías de la biopolítica, de un análisis documental sobre el estado de Nuevo León y de entrevistas con actores centrales de la sociedad civil, se evidencian mecanismos de control que patologizan a los migrantes. Alejado de los discursos oficialistas, el ejercicio del poder se caracteriza por dos dinámicas de desechabilidad: un enfoque casi exclusivo en la represión y una política de la omisión que los deja sin atención sanitaria. Implementados deliberadamente o como una práctica irreflexiva de las autoridades por un supuesto riesgo sanitario, estos dispositivos biopolíticos responden en realidad a las necesidades del sistema económico hegemónico, frente a las cuales los sujetos desarrollan estrategias de resistencia en un intento por emanciparse de las formas de opresión que los acechan.


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INTRODUCTION

During the first year of the COVID-19 pandemic, Mexico exceeded 185,000 deaths, far surpassing the “very catastrophic scenario” of 60,000 deaths predicted by health authorities in June 2020 (Presidency of the Republic, 2020) and making it “the worst country to live in during the pandemic” (Chang et al., 2020, para. 7). Particularly the state of Nuevo León suffered an infection rate of 1,670 affected per 100,000 inhabitants, and reached a total of 104,620 confirmed cases as of December 3, 2020, positioning itself in third place nationally in accumulated and positive cases (Secretaría de Salud, 2020; Secretaría de Salud de Nuevo León, 2020).

In parallel, the number of migrants increased unprecedentedly in 2018 and 2019 in Mexico and, particularly, in the aforementioned state. Although by definition this flow of people cannot be accurately measured, one can consult the records of shelters of civil society and the National Institute of Migration (INM, acronym in Spanish for Instituto Nacional de Migración) to get an idea of its dynamics. Casanicolás Migrant Home (Casa del Migrante Casanicolás)—which publishes a thematic report every year—highlighted this increase in its 2019 installment based on data from the National Institute of Migration (INM):

In the previous year [2018], 3,742 people from Honduras, El Salvador, Guatemala, and Nicaragua were detained by INM agents in Nuevo León; of which 2,748 were deported and 1,882 were “assisted” in their return to Central America. In 2019 there were 6,658 people detained by the INM, of which 4,724 were deported by migration authorities and 2,978 were “assisted” to return to Central America (Casanicolás, 2020, pp. 23-24).

Some organizations estimate a figure of more than 400,000 people nationally throughout 2019 (Nájar, 2019). In Mexico’s northern border states, unprecedented restrictions imposed by the Trump administration drastically increased the number of people awaiting resolution on their legal status (Uribe Salas et al., 2020), leading them to the pandemic standstill and border closure.

Consequently, this period of crisis in Mexico resulted in “few options for [migrants] to protect themselves and to follow health protection measures in the face of COVID-19” (Uribe Salas et al., 2020, p. 3). In the context of this double crisis—that of the pandemic and that of migration governance—this article calls into question the way in which the Mexican State responded to the health needs of migrants in an irregular situation in the country. Through the case study of Nuevo León, we investigate the response to the COVID-19 pandemic, and the relationship between power and the pre-existing devices of surveillance and control of migrant bodies in the country, focusing our study on the actions—both deliberate and unintended—and omissions as methods of political and social domination, which not only prevent the proper care of migrant populations stuck in Mexico, but also monitor the modalities of their existence (and, in the most extreme cases, control them to the point of death).

This article hypothesizes that the migrant population was already living under a *quarantine of the clandestine* long before the declaration of a global alert, but that their precariousness then
reached unprecedented levels of surveillance and state repression. In effect, and far from pretending to expose a premeditated plan to intentionally annihilate migrants, we think that the careful observation of reality highlights a coincidence of socio-political mechanisms of control of the very existence of migrants, which, analyzed as a whole, set in motion a dynamic of strong prejudice to their corporeality.

It is for this reason that this paper seeks to analyze the relationship between these tactics of stalking, both migratory and sanitary, and the effects on the living conditions of migrants (which in many cases are deadly, in the literal sense of the word). By means of a journey through the actions, decisions and narratives that took place in Mexico and Nuevo León during the health crisis, we highlight the health exclusion devices implemented, although not necessarily intentionally. This document also highlights the individual and collective resistance capacities of migrants. Therefore, it addresses the demands and strategies they elaborate to emancipate themselves from the different forms of oppression, and thus achieve a certain autonomy in the face of the biopolitics that afflicts them.

So as to describe and question the mechanics of power and discipline that mark the daily life of migrants, we mainly resort to the thoughts of Michel Foucault and Achille Mbembe, as well as to the authors of the Italian critical current, Giorgio Agamben and Antonio Negri. This is integrated into documentary research and two semi-structured interviews: the first one was conducted in December 2020 with Father Luis Eduardo Villarreal Ríos, a key and central stakeholder in the non-governmental support provided to migrants in the state of Nuevo León;³ the second interview, conducted in November 2021, with the lawyer of an international organization that advised people on the move during the pandemic. The key actor in the second interview, possessing extensive knowledge in the field of study, allowed us to corroborate the analysis conducted and adjust it when necessary. It should be noted that, despite having established contact and initial communication with state and federal health sector authorities, the request for further interviews was not followed up.

After a brief introduction to the theories of bio- and necropolitics applied to the Mexican context, an analysis is provided on the pathologization and criminalization of migrant populations, whose existence becomes disposable as they no longer represent any useful asset for the hegemonic neoliberal system. Finally, through the case of Nuevo León, we examine the way in which the policies of migratory discipline and sanitary control are articulated in a continuum, thus engendering a necropower that lets those who are surplus to requirements die.

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³ As president of the Archdiocesan Commission for the Support of Migrants, Refugees and Displaced Persons (Comisión Arquidiocesana para la Atención Integral a las Personas Migrantes, Refugiadas y Desplazadas) of the Diocese of Monterrey, he coordinates the efforts of the Episcopal authority to provide social support to migrants. He is also experienced and has gained legitimacy by founding in 2008 and being the general director of Casanicolás, one of the three main shelters for migrants in the state. It is worth mentioning that there is explicit authorization from Father Villarreal to include his name here.
Michel Foucault calls biopower that disciplinary power concerned with the administration and demographic control of populations—not of individuals—, yet also being the power “to make live and let die” (Foucault, 1976, p. 178). The author refers to the power of the sovereign to take life as a ius gladii (“right of the sword”) (Foucault, 1997, p. 214). This power consists alternately in giving life, letting live and enabling it, or, on the contrary, ungiving life and condemning to death, either directly or simply letting it happen naturally. In turn, Foucault argues that administering, directing and controlling human behavior is the ultimate goal of biopower. Such actions are paramount in the development of capitalism, by allowing the “controlled insertion of bodies” (Foucault, 1976, p. 185) into economic processes.

Biopolitics, defined as the exercise of power over the body and life of a population as a collective unit and political entity (Foucault, 1976), refers then to the population “as a political problem, as a problem both scientific and political, as a biological problem and as a problem of power” (López, 2014, p. 121). In his works The Will to Knowledge (Foucault, 1976) and Society Must Be Defended (Foucault, 1997), the philosopher focuses on sovereign power and identifies the state as the main actor, but not the only one, of biopolitics. To achieve its control objectives, it deploys countless maneuvers on the population: induction, enabling, obstruction, or limitation; such as those disguised by laws, regulations, various bureaucratic actions, but also by social organizations.

Foucault himself identified government, not as a political body in charge of directing an administrative entity, but as the activity of “directing the behaviors” of individuals through logics, a language, and rules and regulations, explicit or not, whose observance is monitored by specific agencies (1994, p. 582). The latter adopt the supposed economic rationality of neoliberalism as a line of conduct and, following its logic of reduced State intervention and free competition, apply the neoliberal rationale to the governance of human beings (Foucault, 1997). As a result, in the 21st century Antonio Negri (2003) underlined the imperial phase in which global capitalism finds itself, far beyond the limits of nation-States.

It is not surprising then that, even in times of pandemic, the economic rationality that sustains the paradigm of power has imposed itself on all areas of social life and has tried to regulate it from within, in a manner immanent to the social field (Hardt & Negri, 2000). In these societies, which Gilles Deleuze calls “societies of control”, surveillance is not necessarily affected by confinement in external disciplinary institutions (boarding schools, asylums, detention centers), but “by continuous control and instantaneous communication” (1990, p. 236). Hardt and Negri (2000) deepen their analysis along the same line, arguing that the mechanisms of domination are increasingly inherent to the brain and body of citizens.

In emergency scenarios, national governments tend to expand their biopolitical impact (Denisenko & Trikoz, 2020), and human rights are absorbed by the laws of the market, where
some enjoy the privilege of protecting their rights at the expense of others (Persaud & Yoder, 2020). Migrant populations, extremely vulnerable and with limited agency capacity, are even more subjected to these modes of operation. For them, the pandemic became “a metaphor for the unjust human suffering caused by capitalist exploitation, racial discrimination, and sexual discrimination” (De Sousa Santos, 2020, p. 45). Unable to fulfill their role as economic and exploitable labor force at will, their uselessness increased, as they ceased to represent a valuable asset for economic activity and governmental rationality.

This situation is particularly strong among populations in transit, which are systematically conceived as multidimensional threats to public and national security, territorial integrity, identity, and public health. In the latter aspect, institutional practices and tactics are implemented to control their mobile bodies, extending the neoliberal logic to the field of health. Thus, the role of medicine and health in biopolitics—constructed and articulated through public policies, but also by means of private companies—is manifest in Foucauldian thought. Likewise, the discourses of (in)security and the different narratives that refer to these populations affect the bodies of individuals, modifying their behaviors and the relationship with their own corporeality. In addition, migrants are characterized as threats to health, property, and social peace by producing states of social emergency.

Hence, the State implements devices of control and discipline over biological processes in order to manage both the life and death of populations. To these devices correspond the forms of production, organization and distribution of discourses, the function of which is to sustain hegemonic power by means of elements that include the said as much as the unsaid [such as] [...] discourses, institutions, architectural forms, regulatory decisions, laws, administrative measures, scientific statements, philosophical, moral, and philanthropic propositions [...] The device itself is the network that is established between these elements (Foucault, 1994, cited in Agamben, 2011, p. 250).

Giorgio Agamben refines and expands on these elements of definition by means of a broader generality to Foucault’s already vast class of devices [and] calls [a] device anything that has in some way the capacity to capture, orient, determine, intercept, model, control, or secure the gestures, behaviors, opinions, or discourses of living beings (Agamben, 2011, p. 257).

Applied to migrants, devices include all the discursive and non-discursive tools of migration control that involve selecting some and discarding others. Only the most profitable are useful to global capitalism and can be absorbed by it. These are usually located at the two extremes of this structural and class discrimination: the most qualified and the most vulnerable (in other words, the most exploitable).
It is at this point that the thinking of philosopher Mbembe becomes relevant, who expands upon Foucault to argue that biopolitics becomes necropolitics when the biological object of administration is death and not life. This happens, for example, when structural phenomena such as violence, massacres, coercive resource markets (labor and minerals), and the fragmentation and privatization of violence (urban militias, private armies, state armies, mercenaries, etc.) become ubiquitous and prevalent dynamics (Mbembe, 2003). Mbembe (2003) also argues that necropolitics is exercised on the population not only so as to discipline the bodies, but also to ensure their total destruction through necropolitical biotechnologies such as massacres or confinement in camps.

In the case of Mexico, there is a profusion of examples of applied devices in recent years. In her *Gore capitalism*, Sayak Valencia (2010) narrates how life in border cities has been transformed into a simple commodity for a capitalism that manages all the processes related to it, from its most intense care in view of a commercial exchange, to death itself when it is no longer profitable. Valencia reminds us that criminal groups apply the rules of neoliberalism to the letter, putting a price on every life that falls into their power.

Ariadna Estévez (2018) confirms that, “in Mexico, necropolitics has a particularity: The State shares its technologies and techniques of domination and administration of death with the subjects of privatized violence—particularly criminals” (p. 4). The author argues that the neoliberal State singles out as undesirable those who “fail to insert themselves into ‘globalization’, or who do so on its margins” (Estévez, 2018, p. 4), that is, those who are not economically productive. In these “economies of abandonment” (Povinelli, 2011, pp. 29-30) that easily substitute one individual for another, State and non-State forces *de facto* grant themselves the right to decide on the lives of individuals.

The Mexican State has implemented numerous devices in response to migration: the externalization of the southern border from the United States to southern Mexico, the militarization of both borders, the establishment of detention centers, collective proceedings, mass deportations, and the neglect of all humanitarian aid. Also, within this field can be included the discourses on the human rights of people in mobility (who are between those seen as refugees—therefore legitimized—and those socially repudiated illegals), which are reflected in a legal order through which individuals are included or excluded by the law, which conditions their access to life or their condemnation to death. The so-called “right to have rights” (Arendt, 1998, p. 247) is linked to migratory status, in such a way that irregularity is used to justify, and even to promote, the constant violations of their human rights.

Such mistreatment is not exclusive to people in an irregular situation, but it is clear that Central American migrants recently arrived in Nuevo León find themselves in a logic of accumulation of vulnerability factors that frequently exceeds their resilience and available resources. Regarding the obstacles inherent to their situation, the lawyer interviewed presents the structural vulnerability that characterizes them:
There is a great difference, vast difference between a displaced Mexican person, internal migrants, returnees, and migrants in transit. In other words, there is an enormous difference and I could say that the migrant is a person who brings a backpack, who brings a suitcase, and in that suitcase, they are putting more and more human rights violations, from the moment they cross the border until they cross the border to the other side (lawyer for an international organization, personal communication, November 13, 2021).

He also explained that migrants’ priorities are not always focused on asserting their right to health:

The fact that they are here in an irregular manner without access to those rights is normal for them. The simple fact that a person has left because they fear for their life and that they are here in the State, that they say “well, I have a job, I don’t have benefits, I don’t have access to healthcare but I am safe”, for them it is already a gain. [...] Badly, they get used to living within a violation of human rights (lawyer for an international organization, personal communication, November 13, 2021).

All these devices serve to manage migrant bodies in the most convenient way for the neoliberal system, and together they constitute themselves into biopolitics. Nowadays, with the sharp contraction of economic activity following health restrictions, such bodies, which are not in themselves the object of much attention when they disappear ordinarily, become totally dispensable, since they cannot be exploited. It should be emphasized that migrants disappear in several ways: if they are not kidnapped or killed by organized crime, their rights vanish, their living territories are out of sight of society, and their bodies are used as disposable merchandise when they cease to be of benefit to whoever takes possession of them.

Disposability: The Constitution of the Homo Sacer

The first twelve months of reaction to the pandemic showed the existence of measures that desubjectivize ways of life considered expendable, harmful, and even dangerous for the community. Migrants have been categorized as undesirable elements of the population and, consequently, disposable. This undesirability-disposability binomial confines them to a space that “is neither life nor death, a life that is no longer the life of the rest of mortals but is not yet death” (Rocca, 2009, p. 8). Its “bare life” is then understood as “life exposed to death” (Agamben, 1998, p. 114) in which the homo sacer, the inhabitant of the concentration camp, is stripped of all rights and political status, and reduced only to his biological nature. In this sense, according to Agamben, bare life is materialized in its clearest expression and the person is stripped of everything that shapes him or her.

Does recent history not show that, in Mexico, the situation of the irregular migrant is similar to that of the homo sacer of Roman law, whose status is contained in the formula Neque fas est
eum immolari, sed qui occidit, parricidi non damnatur? (Agamben, 1998, p. 71). Suffice it to recall the impunity with which, precisely in the state of Nuevo León, 49 bodies were massacred on a highway in the municipality of Cadereyta in May 2012, with an unusual level of atrocity—despite the otherwise banality of violence in the country—, as their heads, feet and hands were cut-off.

However, this form of necropolitics is not only constituted by extremely extreme violent practices, but also by stealthier forms of violence and death: discrimination, marginalization and abandonment (López, 2014). These subtler measures of managing life and death have a direct link to the invisibility imposed on migrants: being ignored and rejected by the State and by native populations.

Agamben himself (1998) expands the idea of the concentration camp to any structure that materializes the “state of exception and in the consequent creation of a space of bare life [...], regardless of the crimes that have been committed there and regardless of their denomination and topographical peculiarities” (p. 221). How else to consider the inhumane spaces, designed to sentence people to suffer and perish, parallel to any sense or system of legality, in which the migrants stuck in Mexico’s northern border have gathered? Such is the case of the emblematic ravine located near Matamoros in which up to 2,000 people lived at its peak in the midst of garbage, without any hygienic conditions, and exposed to criminal organizations, which habitually carry out kidnappings and extortions in the area (Pradilla, 2020).

These imposed spaces and states of existence, which since before the pandemic constituted a focal point of danger to migrants’ well-being, have now become possible niches of contagion, echoing Mendiola’s (2017, p. 220) concept of the “uninhabitable”, used to describe geographic environments that strip people of their humanity and are characterized by their capability to produce what the author calls an exposed life:

A life stripped of shelters and protections of various kinds, a life placed at the disposal of a regime of power, a life exposed to the elements, to pain and suffering, a life that does not want to be lived (Mendiola, 2017, p. 223).

The inherent brutality of the uninhabitable imposes on human beings a process of depersonalization that robs them of all capacity for self-recognition, including the corporeal—“they are left [...] without spaces in which to recognize themselves, without bodies to feel as their own” (Mendiola, 2017, p. 225)—. In this way, the violent implantation of the categories of the strange and the alien becomes the license by which the being, far from being identified as human, is turned into a thing—not a person—dispensible, dispensable, superfluous. The inhabitant, therefore, has before him a life that is not life, and that is subtracted from “a regime of recognition

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4 “It is not permitted to sacrifice this man, but whoever kills him shall not be condemned for murder”. 
that safeguards it in its basic right, left then to remain, ultimately, exposed to death” (Mendiola, 2017, p. 231).

The imposition of this state of exception produces a relationship between law and violence in which “the law, far from being the unequivocal solution to the exposure to death, is part of its own logic of production” (Mendiola, 2017, p. 239). The legal regime is stripped of its pretended effort for justice, truth, and equity to be deformed into a “procedural practice that knots discourses, regulations, technologies, and war-punitive measures” (Balzacq et al., 2010, as cited in Mendiola, 2017, pp. 239-240). There is no more left of the rule of law, except the use of its spectrum as a channel of action intended to drive and enable the capture and disciplining in order to expose to death (Mendiola, 2017).

In terms of this, Mbembe (2003) introduced the existence of “worlds of death” (p. 40) as an elemental factor of necropolitics: “new and unique forms of social existence in which vast populations are subjected to living conditions that confer on them the condition of the living dead” (Mbembe, 2003, p. 40). In turn, part of the Mexican population has normalized the institutionalization of a policy of death towards migrants, so that necropolitical practice in the Mexican migratory context is also connected to social indifference.

These notions of extreme marginalization and dehumanization are also used by Estévez (2018) to explain the precariousness and institutional abandonment suffered by migrants, deportees, displaced persons, and refugee claimants. The author frames these phenomena within the term “pockets of disposability”, places where people survive in impoverished living conditions, such as garbage dumps, drainage sewers, or improvised migrant shelters (Estévez, 2018, p. 13).

However, Estévez (2018) does not study these spaces as the product of the organic organization of groups of individuals in (ir)regular mobility, but rather explains their configuration as part of what he calls the necropolitical device of production and administration of forced migration. In other words, these pockets of disposability are the direct result of the State’s effort to dispose of migrants’ lives and, eventually, to administer their death. This way, the author describes these geographical points as “spatially defined sites of death in which asylum seekers, migrants and deportees are confined” (Estévez, 2018, pp. 6-7).

However, it should be pointed out that these pockets of disposability function specifically through the deliberate negligence and abandonment of the State and governments that act indirectly on the administration of death, as these spaces of extreme precariousness were not physically created by them, but are conditioned to exist due to their absolute indifference to human life.

Pathologization and Criminalization of the Migrant Threat

In a hostile context, the suspicion on which society as a whole bases its rejection of migrants stands out. As early as 2000, Didier Fassin referred to a “double logic of discrimination [...] and naturalization” (2000, p. 5) to explain the distrust that historically prevails with respect to migrant
otherness and the health risk it would inevitably represent: Jews responsible for the plague in the Middle Ages, *Spanish* or *Mexican* flu, *African* Ebola or *Chinese* COVID. Epidemics systematically provide anti-foreigner arguments. According to Fassin (2001), this process of embodiment of the social condition of the immigrant is formed around the dualities of inclusion/exclusion and visibilization/invisibilization. The sociologist asserts that, through this double process, the recognition of the human being operates exclusively through pathology.

With the emergence of COVID-19, biopolitics took to unprecedented levels the production of devices to control migrants, invariably conceived as a major risk to the health security of the Mexican State. The migrant becomes a prisoner, and their body is highly *pathologized*. If they break in the slightest way the social norm of self-confinement, they are criminalized for spreading the virus and is threatened with expulsion and social or physical elimination. In this sense, the migrant is sought to be kept separate—and self-excluded—from the rest of society.

The authorities often resorted to discourses initially generated in the biomedical sphere that permeated the political world from which they were traditionally absent. The biomedical paradigm, along the same lines as neoliberal *rationality* apparently based on *objective* knowledge and scientific *truth*, led the State to delegate to each individual the responsibility for his or her health. To achieve this, it established a set of public policies and social norms that, by interacting, generated and reinforced personal responsibility in the name of individual freedoms. People less endowed with individual resources—with less capacity for agency—were severely limited in their ability to achieve a level of health adequate for their well-being.

Thus, in the face of the pandemic, criteria were established that became fundamental to *safeguard* the social body. This protection was clothed in the pathologization of unwanted foreign bodies, which were then considered true biological threats. The first consequence of this is the criminalization of migrants, which, although it a constant in Mexico at least since the beginning of the 21st century, has now reached a level never seen before.

In the current historical moment, this pathologization has pushed the boundary between what was previously *tolerable* with respect to migrants and what is now clearly *unacceptable*. With this turn of events, social norms have come to replace laws as the marker of admissible behavior. Exclusion no longer depends on who breaks a law, but on the deviation from the current norm. This process makes migrants doubly suspicious, and exacerbates their illegitimacy in times of COVID-19. In addition to being perceived as invaders, their otherness is also understood as dangerous to health. They are criminalized regardless of their behavior, since no crime is required: their mere presence in the community (and thus their right to exist) is rejected.

Pathologization gives an *object* character to migrant *subjects*, supported by divisive sciences and practices through institutions (hospitals, migratory stations, temporary shelters) whose role is not only to monitor bodies, but also to make them docile and obedient, always in line with the economic system in force (neoliberalism in our case), and justifying the new situation on grounds of health security.
Consequently, migrants occupy a privileged space in the biopolitical discourses on security, which produce a state of social emergency through the dissemination of a generalized feeling of panic that, in turn, justifies the implementation of disciplinary devices. In other words, “the rhetoric of emergency represents the means through which to apply exceptional provisions and measures, whose validity is directly related to the supposed situation of social emergency that justifies them” (Cossarini, 2011, p. 10). In the current situation, the exception seems to apply more often than the general rule, and the appeal to a sense of (in)security leads to justify that biopolitics is engaged in instrumentalizing regulatory and disciplinary devices to provoke the exclusion, violence and death of migrants.

**Biopower and Migratory Repression in a Waiting Territory**

In Mexico, this process of objectification of migrant populations does not date from recent years, as its existence was visible long before the pandemic, through a broad set of technologies, including administrative and sanitary measures, as well as migratory (necro)policies. Together, laws, regulations, the INM and detention centers have formed what De Genova and Peutz (2010, p. 4) call a “deportation regime”.

Under pressure from the Trump administration, Mexican immigration policy was significantly tightened as of June 2019, and led to the appointment in Mexico of Francisco Garduño Yáñez as Commissioner of the INM. Symbolically, it is interesting to note that this former head of the federal penitentiary system was also appointed during the pandemic in charge of a commission for the administration of the country’s cemeteries and crematoriums (La Jornada, 2020). Given such necropolitical expertise, it is not surprising that the National Human Rights Commission (CNDH, acronym in Spanish for Comisión Nacional de los Derechos Humanos) has subsequently denounced the militarization of the INM (CNDH, 2020b). The priority given to repression over attention to the root causes of migration was described by his predecessor, Tonatiuh Guillén, as a “dramatic turn [towards] a migratory vision completely aimed at containment” (AP, 2020, para. 7).

As a consequence, the conditions of multidimensional insecurity (physical, psychological, food, social, etc.) of migrants in Mexico skyrocketed; they were stuck by the impossibility of returning to their country and by a closed northern border controlled by State and non-State agencies (such as organized crime groups). Migrants were more than ever trapped in their own mobility (Hess, 2011) and in a severe position of vulnerability and exposure to COVID-19 (Uribe Salas et al., 2020). In this regard, Crali (2020) states that “there seems to be no protocol or effort to monitor and support the entire migrant population returning to Mexican territory” (para. 11). This problem is particularly prevalent in Nuevo León, since half of the migrants who arrive in the state seek to settle there: “in reality, 50 percent of the migrants who arrive here seek to settle […], since they see Nuevo León […] as a destination state, not as a transit state” (lawyer for an international organization, personal communication, November 13, 2021).
In turn, Mexico reproduced the U.S. scheme by not stopping deportations during the pandemic, despite pressure from international civil society. The International Detention Coalition and the Institute for Women in Migration (Instituto para las Mujeres en la Migración) reported that 7,442 minors in transit through Mexico were detained in immigration stations in the midst of the health crisis, according to official figures (Noticias de América Latina, 2020). In other words, deportations continued regardless of the closure of the Central American borders, further exposing migrants to the risk of contagion during detention and transport. In fact, 20% of the cases in Guatemala at the end of April 2020 corresponded to returnees.

The CNDH even later attributed the death by COVID-19 of a Salvadoran migrant detained in Mexico City, after having been in the Tijuana migratory station, to the “institutional responsibility [of] the INM, and [...] the negligence and omission of personnel of that Institute” (CNDH, 2020a, p. 12). These data validate the hypothesis of the authorities’ lack of interest in the health of migrants and multiple deliberate omissions.

The Healthcare in Nuevo León

The inactivity of the INM in Nuevo Léon is similarly noteworthy, as it has shown strong signs of a true policy of omission that consolidates the abandonment of migrants. In this sense, the INM denied that there were positive cases of COVID-19 in its stations (INM, 2020b) despite the fact that it was demonstrated that there were 52 infections out of the only 78 tests performed during the first eight months of the pandemic (Ureste & Pradilla, 2020), and that the health authorities themselves identified hundreds of cases of infection among migrants (Secretaría de Salud, 2020).

In his testimony, Father Villarreal indicates that, since the beginning of the health crisis, the INM has been totally absent. He added that there is no initiative on the part of the health authorities to prevent outbreaks, or to channel those who might show symptoms, much less a standardized registry (L. E. Villareal Ríos, personal communication, December 11, 2020). The other informant stated that he was also unaware of any initiatives by the Secretariat of Health, and stressed that he was never told by any government authority that there was any program to support the migrant population during the pandemic: “No [I am not aware of any], and if there was an initiative and if there was a program on paper, it was only on paper”. On the contrary, he emphasizes how complicated it was to channel migrants into the health system:

It was also a problem because a person with a special [health] need would arrive, and we ourselves were looking for where to channel them [...]. This person would have a serious condition and we would look for a hospital, we looked for whatever place they could be treated. And the route that I took, for example, and that I continue to take is through the National [Human Rights] Commission. We request by means of an official letter that they issue the instruction for people to receive care. Why? Because if they go without a document, well, maybe you will receive care, maybe you will not. Now with the official
letter [...] from the Commission, then now I have to provide you with care (lawyer for an international organization, personal communication, November 13, 2021).

The lack of prevention promoted among migrants is confirmed by the fact that the only response from the state government was in reaction to an outbreak. That is, it was only until a shelter in Monterrey, receiving about 400 migrants (among other vulnerable and street populations), reported 30 infections (Robles, 2020) that the state Secretariat of Health began testing for COVID-19 there, and the state police transported those at risk to hospitals (Córdova, 2020). Undoubtedly, the event could have been prevented, particularly by means of specific protocols in place for information directed at migrants, prevention of contagion, and provision of the requested health supplies.

Close observation of the situation in Nuevo León is particularly relevant. On the one hand, its geographic location makes it one of Mexico’s “waiting territories” (Musset, 2015, pp. 306-307). On the other hand, it receives migrants returning from the United States in search of employment, as it traditionally constitutes the main pole of attraction in the Mexican northeast, due to its economic dynamism and the temporary job opportunities it usually offers.

In this sense, the deliberate lack of attention to migrants led them to face a myriad of risks to their lives, without the authorities being concerned about those who might die. As in the rest of the border area, violence, misery, and lack of advice produce precarious living conditions, moments and worlds of death. This necropower pushes and confines migrants to geographically and socially marginalized spaces where they deal with the circumstances they face with no more resources than the scarce individual and community support they can get by their own means, which results in a daily struggle for subsistence.

So as to identify these spaces of social relegation and their level of healthcare neglect, it is enough to take a look the surroundings of the shelters in the Metropolitan Zone of Monterrey. These areas have become real makeshift camps where people sleep on the floor, and where the highest expectation is for time to pass for food to be delivered, or that an informal job will come along that will allow them to earn a few pesos. Even the few people who continue to work face greater challenges, as they constitute a labor force coerced to work under precarious conditions and high risks to their health.

All this takes place in an environment of stigmatization strengthened by a pathologizing and exclusionary discourse that forms an ideal vehicle for biopower, and justifies disciplining strategies, such as the 10-year prison sentence for migrants who “put the population at risk of contagion” (Galván, 2020, para. 3).
The Articulation of the Biopolitical Devices of Migratory and Sanitary Control in Nuevo León

Delving into the logic of power that marginalizes migrant populations reveals the way in which migration and health control policies are enforced in an attempt, on the one hand, to isolate previously pathologized migrants and, on the other, to exhaust the few avenues of relief to which they usually resort, thus exacerbating their isolation in their struggle for survival and their fragility in the face of disease.

According to the weekly epidemiological report of the migrant population under study by COVID-19 of November 23, 2020, there were 3,078 migrants in Mexican territory studied under suspicion of COVID-19. Of these, 23.8% (n=732) tested positive, and 40 died, with a case fatality rate of 5.46%. Thus, at the national level, Nuevo León ranked second among the states with the highest number of COVID-19 positive migrants (83 cases), behind Mexico City (200 cases) and ahead of Chihuahua (55 cases) (Secretaría de Salud, 2020).

It is worth mentioning that Nuevo León serves as a perfect mirror of the reality of the rest of the country. At both levels, care for the welfare of migrant populations (healthcare, housing, food, psychosocial care) is overwhelmingly provided by nonprofit organizations (shelters, soup kitchens, community centers, churches, among the main ones), despite the legal possibility for foreigners—even those in an irregular situation—to access public health services. Similarly, the saturation of the public health system, its low funding, and the social processes of exclusion and symbolic violence (such as racism, stigmatization, and discrimination for considering that migrant presence spreads the virus) keeps migrants away, even when 4 out of 10 express having medical needs (Uribe Salas et al., 2019), often linked to the precarious social conditions of their journey (injuries, infections, diarrhea).

Exhaustion of Resources and Institutional Neglect

It is worth noting that, as a result of a federal judge’s order issued in April 2020, migration authorities released 3,653 of the 3,759 persons it had detained in the 65 stations in the country under the justification of “responsibility for and safeguarding [of] the integrity of the population in the context of migration by fully guaranteeing their human rights” (INM, 2020a, para. 1). This resolution followed complaints of overcrowded and unsanitary conditions: lack of water, face masks, toiletries, and showers; food served directly on the floor; rooms without light or ventilation, and shared between women and men; and sick children only receiving medical attention when their health condition worsened (CNDH, 2020a).

This sudden closure crystallized the individuation of risk in the face of disease. Left to their own devices, each person had to find ways to ensure their own health security and support their own expenses, being impossible to comply with the government’s instruction to stay at home, since they had no housing. Paradoxically, in this episode, human rights do not constitute a brake on the repressive and arbitrary action of the State, but rather its justification. Contrary to what has
happened on other occasions, this time the compliance with the decision of the justice system was immediate, since it was convenient for the authorities to avoid the responsibility of guaranteeing the health of the detainees.

Still, the disguised argument of respect for individual rights did not last long. After this initial reaction of the INM, the demands of migratory stalking regained their preeminence over the protection of life, and the Institute soon resumed its detentions despite the serious implications for the people detained in “unsafe spaces and contributing to the spread of viruses among the population held there” (Moncada & Méndez, 2020, p. 52).

On top of this, the pandemic reinforced a pre-existing dynamic of exclusion of migrants from the rest of the population. Already in 2018, the governor of Nuevo León had justified actions that curtail their rights because granting them excessive freedoms would imply that the authorities could not control their actions and, in turn, would take away opportunities from Mexicans (Guardiola, 2018). Subsequently, this leader explicitly portrayed migrants as troublesome people who have to be expelled, by asserting that “we are not going to allow them to stay and generate a conflict that later society itself is going to make us responsible for” (Gobierno del Estado de Nuevo León, 2019, para. 1). He added that “our police […] is securing migrants and placing them at the disposal of the INM, and they will know what to do” (Gobierno del Estado de Nuevo León, 2019, para. 1), making clear the lack of collaboration with federal institutions, by exclusively assigning responsibility for the care of migrants to the INM.

However, despite the fact that public health services focus, above all, on prevention strategies, this criterion was not applied to the migrant population, at least not during the first year of the pandemic. As stated by our two interviewees, the only healthcare actions for migrants were reactive, specifically when the damage had already been done, and not preventive.

As a result of the above, the individual and community resources of migrants diminished sharply to the point of exhaustion in the case of those who received the least supplies. Thus, the capacity of migratory networks—considered as a resource and an actor in the migratory process, since they structure the departure, journey and settlement—has been restricted in the face of border closures, deportation policies, and the suspension of the deadlines established by law for the resolution of refugee procedures.

Thus, the migrant population stranded in the north of the country was completely exposed to multiple health risks—coronavirus, malnutrition, dehydration, exposure to the elements—, as well as to criminal and State violence, with limited alternatives for shelter and to satisfy their basic needs due to the weakening of their social support networks. Indeed, the lack of capacity and the insufficient resources of social organizations forced entire families to live in the streets for months at a time. Approximately 80% of the shelters in border states had to close temporarily (Forbes Staff, 2020). The latter is extremely worrisome, as access to health services for migrants has traditionally been restricted to that provided by nonprofit organizations (El Colef, 2019).
Currently, these same organizations have to deal with a lack of capacity, equipment, and basic medical supplies to provide basic sanitary protection (gloves, face masks, water, sanitizing material, adequate space to ensure a healthy distance, among others). They also fail to cover food needs, which causes a weakening of the immune systems to cope with the COVID-19 virus (Uribe Salas et al., 2020). Facing this lack of resources and support, the same teams of volunteers and employees of the shelters are subjected to the risk of death in the exercise of their humanitarian work, as happened in the Cáritas shelter in San Luis Potosí in November 2020, where its doctor (Cáritas, 2020) and its director (López, 2020) died in the same week.

However, we must remember that migrants are not passive, much less objects, but rather have a capacity for agency differentiated according to the available resources (material and immaterial), individual health trajectories and, in general, their life experiences. Consequently, even when this capacity for agency is increasingly limited, there are “decisions and struggles in favor of life and [...] resistance” (Valenzuela Arce, 2019, p. 103), some of them supported by civil society, which allows migrants to think of themselves as bodies in resistance against social meanings that exclude, marginalize, criminalize and pathologize them.

Thus, despite finding themselves in hostile political, economic, cultural and social spaces, bioresistance still exists: the capacity or, in the most vulnerable and deprived cases, the internal desire to “live and signify” their bodies in “resistance, dispute or challenge to the dispositions of biopolitics and necropolitics”, generating spheres—individual or collective, material or psychic—where they struggle for the control over “meaning, interpretation and representation” (Valenzuela Arce, 2019, p. 93, 102). Hence, our second informant expressed that “[t]he Central American has [a strong capacity for resilience], I don’t know if I could say the fortune or misfortune, to know how to deal with the violation of human rights from his country of origin” (lawyer for an international organization, personal communication, November 13, 2021).

**Health Policies: Mirror and Complement to Migration Policies**

Against this bleak backdrop, the control and repression policies of migration authorities are similarly found in the actions—and omissions—of their health counterparts. In the COVID-19 care policy, biopolitics can be found in the use of technologies to discipline the biological properties of individuals, as well as to collectively control populations. Health policy thus contributes to extending the field of application of biopolitics, completing the control of the biological by the State. With COVID-19, the apparatuses of biopolitical control of migrations went from being a matter of national security to one of public health. Medicine has become politicized in this crisis, just as politics has become medicalized, treating the citizen as a patient in need of extended care.

Consequently, health policies are part of the continuity of the policies of repression of irregular migration that existed prior to their implementation, and—as one of the consequences of biopower
introduced by Foucault (1976)—regulations gradually replace the legal system. Coercive measures—even illegal ones—become normal and are then legitimized by a higher interest that allows them to escape any regulation.

At the national level, the Mexican government implemented an Operational Plan for Migrant Support in Response for COVID-19 (Plan Operativo de Atención a la Población Migrante ante el COVID-19) in May 2020, with the enunciative purpose of guaranteeing migrants access to health services and, as always, human rights. This plan sought to organize and coordinate actions among agencies such as “Servicios Estatales de Salud (SESA), Secretaría de Salud, IMSS, ISSSTE, IMSS-Bienestar, DIF, INM, municipal health, state and municipal authorities, NGOs, those responsible for homes, shelters and refuges” (Gobierno de México, 2020, p. 6) to provide comprehensive healthcare to the migrant population.

Likewise, the Secretariat of Health stated that it would work in coordination with the INM to guarantee the sanitary conditions of the migrants housed in its stations (Infobae, 2020). However, in Nuevo León such collaboration did not take place, as not only is there no documentary evidence of such coordination, but also Father Villarreal confirmed that he was completely unaware of the matter.

Furthermore, the disjuncture between the official narrative of a zero-stigma stance against migrants and an attentive observation of the facts becomes relevant once more. While the government states that “it is important to emphasize that in terms of intolerance and xenophobia, the Mexican government takes no part of it, but rather has a vision of solidarity that avoids stigmatizing migrants” (Miranda, 2020, para. 9), in the Operational Plan mentioned above, only measures related to epidemiological control, health surveillance, and information management of the migrant population appear in detail. In other words, the promotion of migrant health, as well as the fight against xenophobia, stigma and discrimination referred to by officials are not even mentioned.

This apparently contradictory double discourse is clarified through the concept of compassionate repression set forth by Fassin, who defines it as the “invocation of moral sentiments of concern and empathy towards the disadvantaged and, at the same time, advancing and diverting attention from policies that increase suffering and inequality” (Fassin & Gomme, 2004, p. 2).

In its fight against COVID-19, the State acts and intervenes only to protect the rest, the local social body. The bare life of the migrant can be totally disregarded and even discarded, but the sick body is considered the object of immediate medical attention, having become a pathogenic threat to the community. In fact, health authorities intervened in migrant shelters in Nuevo León only when bodies became ill, as in the aforementioned case of the outbreak of disease in a local shelter.

For the others, there is neither prevention nor medical screening. According to the documentary research carried out, the government of Nuevo León only established a COVID directory through
its state program Allied With You (Aliados Contigo) with the aim of “supporting the vulnerable population of the state of Nuevo León [...] disseminating prevention measures [...] to contain the coronavirus in the state” (Secretaría de Desarrollo Social del Estado de Nuevo León, 2020, p. 2). However, it de facto excludes migrants, as it requires “[proof] of a minimum stay of 3 months” in the state (Secretaría de Desarrollo Social del Estado de Nuevo León, 2020, p. 7). In addition, hospital rejections were a constant, and in the migratory stations migrants are only given medical attention once they become ill. In this sense, the pandemic demonstrated that migrants in Mexico only enjoy “bio-legitimacy” (Fassin, 2004, p. 310) when their social status as irregular immigrant is partially and temporarily substituted by that of sick body.

The experience of organized civil society actors confirms this situation. Casanicolás provides humanitarian assistance to the migrant population in collaboration mainly with a local health center and two universities, and, to a lesser extent, with international organizations, so as to provide medical and psychological services, food, shelter, communication with family members, and spiritual support. Villarreal explains that this “strategic alliance” has made it possible “to provide care to all migrants for years, without discrimination of any kind. There have been HIV and diabetes brigades here” (L. E. Villareal Ríos, personal communication, December 11, 2020). Thus, Casanicolás is a space where bioresistance work is promoted and carried out, as it gives migrants the opportunity to think of themselves according to meanings of their own, parallel to and in opposition to the pathologizing and criminalizing discourses of biopolitics.

In the face of COVID-19, Casanicolás curtailed its operations and closed its doors in March 2020, keeping 50 people sheltered. This home continued its efforts to protect the health of its guests with the few means at its disposal, despite institutional abandonment. In fact, in March of that same year, representatives of the three shelters belonging to the Episcopate in the state met with the state Secretary of Health and his team, but Father Villarreal pointed out that no agreements were reached and there was no “commitment [from] the Secretary of Health towards migrants, except for some general recommendations for us shelters; verbal recommendations only” (L. E. Villareal Ríos, personal communication, December 11, 2020). This informant emphasized that the official received them “as a mere formality [because] we asked the archbishop for his personal phone number and we looked for him” (L. E. Villareal Ríos, personal communication, December 11, 2020).

The informant presents his understanding of the situation and considers that “the hypothesis that the government, the state, with the appearance of doing a lot, is actually leaving migrants to their fate” (L. E. Villareal Ríos, personal communication, December 11, 2020). This double discourse characteristic of both health authorities and the rest of the state government would be demonstrated by

the fact that we have also had six meetings with the director of the General Secretariat of Government, and only the sending of some food supplies was concretized, [even when] they
offered monthly funding for 90,000 pesos, money that we never got to see (L. E. Villareal Ríos, personal communication, December 11, 2020).

Father Villarreal added:

Reviewing the function of this General Secretariat of Government which is “to be intermediaries—this can be found on the [state of Nuevo León government’s internet] portal—in the solution of petitions and demands of citizens and legal entities, attention to the vulnerable, channeling [...]”, the raison d’être of this Secretariat was not fulfilled in the face of COVID. This reinforces the hypothesis [that they are leaving migrants to their fate] (L. E. Villareal Ríos, personal communication, December 11, 2020).

For Casanicolás, he requested:

a sanitary filter in the corner outside the shelter, a tent with quick tests, a kind of drive-thru to do express tests from the car, and the response of this General Secretariat of Government was “the mayoress does not want to”. This does not seem to me to be a proper response from the state government (L. E. Villareal Ríos, personal communication, December 11, 2020).

It stands out from this testimony that the state government, despite its official discourse in which it pretends to carry out an “identification of vulnerable population” (Gobierno del Estado de Nuevo León, 2020, para. 5), exempts itself from its responsibility towards the health protection of the migrant populations, and is content to delegate to the individual the responsibility for their own protection measures.

This state passivity justified in the denial of a lesser authority (the mayoress) also stands out, which reveals a convergence of the three powers of the federation in their disinterest in migrant bodies, which are then placed in a situation of disposability. Such coordination in inaction echoes what Rodrigo Parrini (2015, p. 122) calls “biopolitics of abandonment”, which keeps migrants away from the local population, due to the risks they would carry.

In its response to COVID-19, Father Villarreal argued that the State “is not interested” in caring for the lives of migrants:

there is no institutional communication with the public and migrants [...] There should be very clear institutional communication. Here outside [the shelter], there should at least be a banner from the state government stating “you can call this phone number [...] for those who wish to regularize their stay or file a complaint”. We don’t even have this minimum. This is a fact showing action through omission [emphasis by the authors] (L. E. Villareal Ríos, personal communication, December 11, 2020).

The case of Nuevo León demonstrates the migration and health necropolitics of a State that is only concerned with projecting an image respectful of human rights. In reality, the government is not content to let disposable people die, but also adopts a disciplinary attitude towards the sectors of civil society that take care of migrants with the (insufficient) means at its disposal. An example
of this is that, despite the lack of guidance and support from the state government, Casanicolás was the object of strict surveillance visits by inspectors from the Secretariat of Health, which resulted in strong reprimands.

Father Villarreal reports having received threats to close the shelter if he did not comply with the list of requirements to which he was requested to adhere:

Two officials from the Secretariat of Health have visited us here at the shelter. One guy came to fill out a file and check a mark for himself. He came, saw and said “everything is fine” and left us a very short memorandum. The second visit was in a tone [...] with the threat of closing it [the home] if we did not comply with the requirements (L. E. Villareal Ríos, personal communication, December 11, 2020).

Villarreal insisted that such a measure “would have been very scandalous, because there has not been a single outbreak in the shelter”, and regretted again that “they did not emphasize what kind of collaboration the Secretariat of Health could have with the shelter to improve its safety [sanitary] measures” (L. E. Villareal Ríos, personal communication, December 11, 2020). This event highlights the way in which the physician was granted prerogatives that, in the past, only the government officer could exercise (Agamben, 1998).

This shows that migrant populations and social organizations are subject to the same treatment by the biopower of the State: while the former suffer repression by the INM, the latter are under the control and restrictive measures of the Secretariat of Health. With COVID-19, not only has the State failed to guarantee the right to health of migrants enshrined in the Constitution and the Migration Law, but it also exercises scrupulous vigilance over those who try to make up for these failures. Thus, the health regulation is extended from migrant bodies to the organizations that assist them, and the action of legal control is confused with that of medical control.

**Attempts at Resistance by Migrant Populations**

Such health and migratory neglect resulted in resistance struggles among those affected. Family, ecclesial and associative networks became decisive in trying to compensate for this asymmetrical situation. It has been documented that, although migrants are subjected to mechanisms of control and oppression, they indeed incorporate actions of resistance to the highly vertical social order that dominates them.

Ramírez and Morales (2019) analyze the responses of Central American migrants to the different types of violence they face when transiting through Mexico. The authors stress that despite their position of subordination to the power that stalks them, migrants make use of their capacity for agency to configure and activate strategies of resistance. Therefore, the migrant subject can be considered as a resistor rather than a victim, “as a historical subject protagonist of his or her own processes, and bearer of knowledge and experiences, and not only as a bearer of suffering” (Ramírez & Morales, 2019, p. 1285).
An example of this is that throughout Mexico, protests, sometimes frontal, were held in detention centers to demand an end to the confinement of migrants because of the risk of COVID-19 contagion. Likewise, related organizations deployed campaigns against massive deportations without sanitary filters (Varela, 2021).

So as to prevent such detentions, and as a reaction to the violence faced by migrants on the move, group mobilizations (known as caravans) intensified and continued during the pandemic (BBC News Mundo, 2020). These are inclusive movements of groups of different nationalities, genders, ages and sexual orientations, also inclusive of low-income people (Rizzo, 2021). The journey is made on foot, by means of rides and overnight stays in shelters, churches, streets, squares, among others. Organized through social networks, these caravans provide, at a lower cost, better protection against organized crime, as well as solidarity support and the support of nonprofit organizations (Torre Cantalapiedra, 2021).

Unlike individual or small group mobilities, caravans push the State to provide them with greater assistance (Franco-Sánchez, 2021). In this sense, they can be considered as a migrant social movement (Torre Cantalapiedra, 2021) in which the discourses, strategies and actions of their members imply a constitution and representation of themselves as subjects, which break with the historical and hegemonic image of migrants as victims (Rizzo, 2021). Therefore, they constitute forms of collective and individual resistance to containment policies and health indolence, by confronting the State to fulfill its obligations and responsibilities.

Throughout these journeys, there have been public protests against the institutions that prevented them from passing through, where migrants requested residence cards for humanitarian reasons, that is, to regularize their situation (Henríquez, 2021). In an attempt to demand from the Mexican State the right to transit freely, the members of a caravan demonstrated at the very national headquarters of the INM, where they threatened to stage sit-ins and hunger strikes if their demands were not met. They asked to be allowed to move forward in search of medical attention, so that they would not have to choose between taking their children to the doctor or being deported (Henríquez, 2021).

However, these initiatives only allowed to barely remedy the ravages of biopower, which was drastically reinforced during the first months of the pandemic, as evidenced by the police repression of these demonstrations, which left both agents and migrants injured (Infobae, 2021). Although the resistance strategies manifested in public protests did not succeed in changing government policies per se, they allowed them to publicly disseminate their situation and eventually escalate to a larger audience in order to provoke a mobilization in their favor (Della Porta & Tarrow, 2005).

5 Some migrants have adopted the tactic of shaming, i.e., the production of documents to publicly denounce the violations of their rights.
A Honduran migrant and his family, who were among the first to be deported to Matamoros in August 2019, carried out a digital resistance and protest. This migrant, Josué, made recordings denouncing his experiences living in an improvised camp; he would send his recordings to nonprofit organizations and journalists on both sides of the border as a form of protest against the lack of the most basic things to keep themselves from COVID-19 (food, water and bathrooms). Josué explained: “that was the only weapon to defend ourselves, the videos” (Arroyo & Guerrero, 2021, par. 8).

Father Villarreal states that in Nuevo León many migrants survive on money sent by relatives from their country of origin, some earn a small income by sweeping sidewalks or unloading trucks for street markets. Those who do not stay in shelters form groups to pay for a shared rental room, sometimes with no toilets or beds.

For their part, local non-governmental organizations have taken up these shaming practices to denounce the abandonment of migrants in this complicated period, and to remind the authorities of their international obligations, through reports, media interviews and direct contact with their representatives. Nonprofit organizations tried to carry the voice of those who lacked a voice due to not having spaces for expression, but they hardly managed to disturb the demand for submission to the new hegemonic health order, as can be seen in the account of Father Villarreal regarding his meeting with health authorities.

CLOSING REMARKS

The world health crisis has revealed biopolitics no longer as a recomposition of State action, but as political action in itself. Thus, the sovereign power that determines who lives and who dies has been reinforced, with authoritarian and threatening traits, resorting to very old methods that were thought to be at least limited by the universalization of individual rights. If the Mexican migration policy clearly constitutes an implementation of biopolitics, the continuum it forms with health measures gives way to necropolitics. With the pandemic, it is no longer the life of migrant populations, considered expendable, but their death that is at stake.

In the North-Mesoamerican migratory system, COVID-19 came to expose all the structural deficiencies that—paradoxically maybe—reinforced the bio/necropower of the States at the moment of greatest intensity of the pandemic: returning migrants from the United States to Mexico without judicial or sanitary procedures; overcrowding of the populations in migratory stations under inhumane conditions; abandonment of the State, leaving the responsibility for their welfare to shelters insufficiently equipped and staffed; rejection by society (first of all, by government officers and the media) who see them as invaders and threats. In this sense, the violence exercised on migrants, relegated by the authorities to a situation of survival, represents an attempt to subordinate them to State surveillance by means of measures that desubjectivize those ways of life considered expendable, harmful and dangerous to the community.
Unfortunately, migrants in Mexico had never fully achieved these rights, used as they already were to persecution and arbitrariness in their daily lives, in the name of a supposed rule of law. The only difference is that now this dynamic of restricting individual guarantees is exercised openly and with the support of both the media and public opinion. In other words, it is no longer hidden behind a human rights narrative, since the raison d'état potentially justifies everything.

In the face of this biopower focused on migratory repression and a sanitary policy of omission, migrants carry out actions of resubjectivization, albeit with limited results. Indeed, the resistance strategies implemented in an attempt to emancipate themselves from the forms of oppression that afflict them hardly find an echo outside the nonprofit organization that stands firmly by their side.

Translation: Fernando Llanas.

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