

4 *Excluding through Care*

“Hi Lorena.” I glanced distractedly at the WhatsApp notification on my phone, which I had left by the sink while washing the dishes. I was in a house in the Fes suburbia, where I had rented a room for the week to be able to do interviews with NGOs operating in the Fes–Meknes area. As my phone kept vibrating, I rinsed my hands, and I unblocked the screen with my little finger. The message was from Sandra, a friend of mine from the United States who was teaching English to West and Central African kids in Rabat. I dried my hands on my trousers and grabbed the phone to read more carefully. “A friend of mine is currently homeless and begging,” the message continued. “He’s a minor. Would you know of any organisations or any of your European friends in Rabat that would be able to help him?.” The friend that Sandra was trying to support was B enoit, a young Cameroonian guy that she had met through her work. B enoit had been looking for work, as a cleaner, in restaurants, but without much luck. After enquiring a bit more about the case, I told Sandra that I did not know of any NGO specifically working with foreign minors in Rabat at that time, but that I would make some calls to enquire. I later recalled an organisation that ran emergency shelters for unaccompanied minors. I wrote to Sandra, advising her to direct B enoit there. “The problem is . . . he is not actually a minor,” she told me. “I am telling people he is because this might make them more eager to help him. He went to the drop-in center and told them his real age [20], so they did not help him.” After making a quick recap, I realised that all the NGOs I could think of would have been more likely to help B enoit if he was under eighteen. ‘Unaccompanied minors’, in fact, constituted one of the categories most likely to be classified as vulnerable by aid-funded organisations.

As the case of B enoit shows, aid produces an elusive form of migrant marginalisation. Since the early 2000s, aid-funded NGOs and IOs have been at the forefront of care provision for migrants,

refugees, and asylum seekers living in Morocco. This parallel apparatus of social assistance sits in the interstices of multiple processes of exclusion. The funding it relies on depends on the border externalisation interests of European donors. The people it assists are endangered by migration control policies, and they are often excluded from public service provision in Morocco. But despite their role as care providers, aid-funded organisations are also producers of marginalisation. NGOs and IOs, in fact, have the authority to ultimately decide who can and who cannot access care. They do so by establishing thresholds of eligibility. As an adult, Bénéto is not considered vulnerable enough to be eligible for support, but this does not make his position any less precarious: Bénéto remains homeless – too poor not to ask for support, but too bureaucratically old to be eligible for it.

This chapter explores the ambivalent nature of aid-funded assistance to migrant people in Morocco. I argue that the aid-funded network of migrant care plays a double function of relief and segregation, care and domination. Aid-funded NGOs and IOs, in fact, provide a form of fleeting relief to migrant communities in a context where state-funded support is lacking. However, aid supports a structure of care provision that is *rooted in* and *conducive to* migrant marginalisation. The very presence of migrant people in need of assistance, and the availability of funding for projects focusing on migrant relief, is tied to European donors' political interests in containing 'sub-Saharan' mobility in the Western Mediterranean. Furthermore, the capacity of aid-funded organisations to provide care is intimately linked to their obligation to turn down assistance requests from migrants, refugees, and asylum seekers not deemed 'eligible' for support. Care and abandonment are not mutually exclusive. Rather, they are co-constitutive of a system of donor-sponsored regulations of migrant lives operating in tandem with the spectacular workings of border violence.

This chapter retraces the production of migrant exclusion through mechanisms of aid-funded care. I first identify patterns of state disengagement and (discursive) engagement in migrant integration, connecting them to the evolution of migration policy in Morocco. I then explore how the state formally and informally outsources the costs for service provision to migrant people onto civil society organisations. I examine donors' engagement in the funding of migrant

assistance and how border politics affects their funding strategies. The next section investigates the bureaucratic strategies that NGOs and IOs adopt to filter the assistance requests received. The last section explores how aid workers make sense of migrants' criticism of the aid system. I argue that these actors process migrants' complaints by enacting sense-making strategies through which they distance themselves from their role in the production of migrant marginalisation.

State (Dis)Engagement from Migrant Care

Despite the rise of migration to the top of the political agenda in the early 2000s, the Moroccan state has fundamentally disengaged from the direct provision of basic services to migrants and refugees. Until 2013, state disengagement was part of a broader security-oriented attitude towards migration control, aimed at deterring migrants from both crossing into Europe and settling in Morocco. As a result, migrants had a hard time accessing state services. They were completely left to find solutions to their daily problems through their own *débrouillardise* (improvisation) (Alioua 2011a, 416), relying on migrant networks of mutual assistance and on the support of local and international NGOs (Bachelet 2016). The launch of the new migration policy in 2013 seemed to upset the established order. In a break with a past of marked and purposeful disinterest towards migrant integration, the state committed to a major engagement in this field. The SNIA, in fact, mentions "facilitating the integration of regular migrants" as its first objective. This includes easing access to education and culture, programmes for youth and leisure, healthcare, accommodation, social and humanitarian assistance, professional training courses, and employment (MCMREAM 2016).

The shift, however, has been more rhetorical than practical. Official discourses about migrant access to state-supported services are largely inconsistent with the implementation of the integration strategy. Healthcare provides a case in point. In principle, migrants have access to medical care in Morocco. In order to limit the spread of transmissible diseases, a circular distributed in 2003 by the Ministry of Health allowed medical structures to provide health services to irregular migrants (MSF 2013c). The Hospital Internal Regulation issued in 2011 reiterates that "foreigners, whatever their status, are

admitted and treated in the same way as Moroccan citizens” (MCMREAM 2015, 22). However, access to healthcare is *financially* more problematic. Basic medical assistance is provided free of charge to anyone in Morocco in the *centres de santé* (healthcare centres). According to the MDMCMREAM, between September 2016 and June 2017, 13,485 migrants were treated in primary healthcare centres in the areas of Rabat-Salé-Kenitra, Tangier-Tétouan, and in the region of the Oriental (MDMCMREAM 2017).

Secondary and tertiary medical care, however, comes at a cost. Moroccan authorities have given contradictory signals concerning their intention to make migrants eligible for applying to the Regime of Medical Assistance (RAMED, in the French acronym), the system subsidising healthcare for low-income citizens. In October 2015, the Ministry of Economy and Finance, the Ministry of Interior, the Ministry of Foreign Affairs, and the Ministry of Migration signed a convention allowing regularised migrants to benefit from the RAMED (PNPM 2017b; Qacimi 2015). In March 2017, the Medical Agency for National Insurance (ANAM, in the French acronym) and the Ministry of Migration signed another convention to deliver RAMED cards to migrants (LesEco.ma 2017a). Despite these highly publicised and performative events, however, the two conventions are *de facto* inoperative. Some regularised migrants tried to apply to the RAMED, but their attempts proved unsuccessful because there are no procedures in place to operationalise the conventions (PNPM 2017b). Hesitation about the expansion of the RAMED to migrants is not surprising. In fact, the open attitude of the state *vis-à-vis* migration has not been met with a decisive increase of financial resources for this purpose (GADEM 2018a). Between 2013 and 2017, the budget of the MDMCREAM has increased from 383.4 million dirham (€35 million) to 587.7 million dirham (€53.7 million). However, out of a total budget of 530 million dirham (€48.5 million) for the year 2016, only 45 million dirham (€4.1 million) were flagged for the implementation of activities specifically related to the integration strategy (European Commission 2016).

In this situation of institutional stalemate, migrants remain *de facto* excluded from the provision of basic health services. Research conducted by the Université Internationale de Rabat uncovered that out of a sample of 1,453 ‘sub-Saharan migrants’ surveyed in the cities

of Rabat, Casablanca, Mohammedia, Salé, and Tangier, 420 people declared having fallen ill in the previous 4 weeks. As many as 147 respondents stated they did not seek medical assistance, and around 25 per cent of them stated a lack of financial means as their main reason not to. Of those who had sought medical assistance, almost half of them paid over 100 dirhams (€9.10) for the visit, and 8 per cent paid a bill ranging from 500 to over 1,000 dirhams (from €45.70 to over € 91.40). These costs are onerous for most of the migrants surveyed, many of whom earn considerably less than the average Moroccan monthly income (2,413 dirham, i.e. €220.60). As I will further detail in Chapter 5, close to 58 per cent of all respondents from the same study declared earning less than 2,500 dirhams (€228.50) a month, and almost half of them earned less than 1,250 dirhams (€114.20). Considering that 85 per cent of all respondents do not have any sort of medical coverage (Mourji et al. 2016), it is unsurprising that many migrants do not seek medical help in case of illness. If not on the basis of racial discrimination, vulnerable foreigners risk being excluded from healthcare services because of their precarious economic situation. Marina, a European NGO officer working on an EU-funded healthcare project, told me:

The access to the building is guaranteed, they will not kick you out ... but then you don't have the money to pay for treatments, so if you don't have an NGO behind you that can pay ... well, the doctor can be really nice, but he can't make the diagnosis because you don't have the money to pay the X-rays.¹

Despite adopting a discursive attitude that appears to be extremely proactive in the inclusion of migrants into welfare provision, the state reinforces the financial exclusion of poor foreigners from social assistance. This lays the basis for the delegation of care responsibilities to non-state actors (Natter 2018; Norman 2019).

Outsourcing Care to Non-State Actors

In a context of state disengagement, NGOs, IOs, and the donors supporting them are therefore at the forefront of care provision. In practice, they substitute the existence of public healthcare coverage for

¹ Interview with Marina, officer of an INGO, Rabat, September 2016.

vulnerable foreigners. The number of migrants claiming NGO support to pay for healthcare fees can be considerable. In the study conducted by the International University of Rabat previously mentioned, Mourji et al. (2016) state that, of the seventy-nine migrants who declared having been hospitalised, 24 per cent of them managed to pay for their medical treatments thanks to the support of an association. In their 2017 report, the MDMCREAM stated that between January and September 2016, 2,350 migrants had received financial assistance for their medical bills from Caritas, a Catholic organisation at the time funded by Switzerland and Germany. Between April and December 2016, the same organisation subsidised the rent of 1,000 migrant people and hosted 130 vulnerable people in emergency accommodation (MDMCREAM 2017, 58–65). In the period 2017–18, the UNHCR subsidised pharmaceuticals for 2,600 people, assisted 689 refugees needing a long-term or onerous medical treatment, and put in place a 24/7 emergency number for refugees needing immediate medical attention (MDMCREAM 2018). In 2019, the UNHCR's annual budget for healthcare expenses of their population of concern was 541,119 USD.²

Throughout the 2000s, the state obstructed the action of organisations engaged in the assistance and the defence of migrants' rights, obliging them to operate with great discretion and, at times, denying them legal recognition (Natter 2018). In 2013, the attitude changed, with the state actively incorporating non-state actors into its own integration strategy.³ Moroccan authorities, in fact, have adopted formal and informal methods to outsource the costs of welfare provision to NGOs and IOs (PNPM 2017a, 2017b). One of the most direct and comprehensive measures is the support of state-civil society partnerships in the implementation of the new migration policy. Since 2013, Moroccan authorities have engaged directly with NGOs working with migrants, inviting an even more active participation of civil society in the governance of migrants' welfare. The importance of involving NGOs in the elaboration and implementation of the new migration policy is constantly emphasised by politicians (LesEco.ma 2017b; MDMCREAM and CNDH 2016), members of human rights

² Email communication with a UNHCR officer, June 2019.

³ As the interview with Stéphane in Chapter 3 suggests, though, the State seems to still ostracise the legalisation of civil society organisations that are critical of the State (Interview with Stéphane, officer of a migrant-led NGO, Rabat, June 2019).

institutions, and promotional texts produced by the Ministry of Migration (MCMREAM 2015, 2016). Between 2013 and 2017, the Ministry of Migration launched multiple calls for projects addressed to civil society organisations. Project proposals could target different areas of migrant integration, such as access to employment, language teaching, and social assistance (MCMREAM 2015, 81). Between 2013 and 2015, the Ministry of Migration funded 130 projects with a budget of 31.5 million dirhams (€2.8 million) (MCMREAM and CNDH 2016).

The state also adopts informal tactics to outsource the cost of migrants' welfare onto non-state, aid-funded actors. State-run hospitals, in fact, either refer patients directly to NGOs or try to convince civil society organisations to negotiate 'conventions' to cover medical costs incurred by migrant people (PNPM 2017b, 12, translation by author). In a recent report, the PNPM complained that healthcare institutions seem to apprehend NGOs as substitute providers of health-care insurance for foreigners (PNPM 2017b). During our interview, Marina explained that "it's civil society that now takes care of all fees [for migrant healthcare], due to the lack of the RAMED or whatever, it's civil society – or actually it's the donors – that takes care of this, it's super expensive."⁴

By outsourcing public services to non-state actors, Morocco follows a regional trend. In fact, most countries in the Middle East and North Africa started dismantling their welfare state during the neo-liberal reordering in the 1970s and 1980s. The welfare state in Morocco has never been as robust as in other countries in the region (Catusse 2010). The presence of NGOs in social assistance has been a constant element in Moroccan pre- and post-independence history. In the 2000s, social issues rose to the top of the political agenda, and the state started re-engaging in social services (Bono 2008; Catusse 2010).⁵ This, however, did not coincide with the expansion of traditional welfare programmes. The government and the Palace – the

⁴ Interview with Marina, officer of an INGO, Rabat, September 2016.

⁵ This shift in intervention is not only in line with the rise of a new global sensitivity to the issue of poverty and inequality. It is also motivated by the state's perceived need to reaffirm its primacy in an increasingly competitive domestic political scene, with Islamists openly engaging in actions of social assistance (Hibou and Tozy 2015).

*Makhzen*⁶ – opted for addressing the rampant share of poverty and inequality affecting the country through neoliberal tools. The most emblematic of such instruments is certainly the National Initiative for Human Development (INDH, in the French acronym). Since the early 2000s, the INDH has channelled funding for social, economic, and cultural interventions through local NGOs (Bono 2008; Catusse 2005). Delegating social protection to non-state actors should not be understood as an obliged path imposed by a lack of state funding. A recent report from the Economic, Social, and Environmental Council, a Moroccan public consultative body, called for a “change of paradigm” in the Moroccan system of social protection. The report subtly reprimanded the state for spending less money on welfare than public finances would allow (Conseil Economique, Social et Environnemental 2018, 11, translation by author).⁷

Since migration escalated to the top of the public agenda in Morocco, the state has outsourced social assistance for migrants to aid-funded NGOs and IOs. This pattern has become particularly evident after 2013, when Moroccan authorities started directly and indirectly delegating the financial efforts to cover migrant care to non-state actors. Outsourcing seems part of Morocco’s strategic choice to rationalise resources by purposefully delegating care for migrants to non-state actors (Norman 2019, 43). The rise of aid-funded NGOs and IOs as social assistance providers is therefore rooted in a logic of abandonment, whereby the state decides to deny

⁶ By “Dar Makhzen” I refer to a restricted circle composed of the King and to his closest advisors (Claisse 2013, 285). Throughout the book, I draw a distinction between the government and the Palace, or Makhzen, because the King detains an undeniable amount of power in Moroccan polity. As Ferrié and Alioua have it: “The most important policies are, first of all, conceived within the entourage of the King and, then, entrusted to the ordinary actors of public action, ministers, members of parliament, civil servants” (Ferrié and Alioua 2017, 20–21).

⁷ French scholar Béatrice Hibou understands the outsourcing of state functions not as symptomatic of a loss of state sovereignty, but rather as a (cheaper) mode of government in its own right (Hibou 1999, 2004; Hibou and Tozy 2015). Historically, governing through outsourcing has allowed Morocco not only to rationalise government costs, but also to incorporate more firmly non-state actors within state outreach, and to gain international legitimacy by securing the financial and political support of donors, ready to praise Morocco as a model of “democratic participation” for its support to civil society organisations (Bono 2007; Catusse and Vairel 2010).

care to migrant communities that have already been pushed to the margins by border externalisation policies.

Donors and the Politics of Integration

European aid constitutes the backbone of the system of non-state assistance available to migrants in Morocco. Since the mid-2000s, the EU and, until 2019, Switzerland have been the two most prominent funders of projects concerned with migrant assistance. Between 2014 and 2018 alone, the EU allocated over €32 million to projects targeting the ‘protection’ and ‘socio-economic integration’ of migrants (European Commission 2018b). Between 2006 and 2019, Switzerland granted at least 9.7 million CHF⁸ (€9.03 million) in projects including activities of direct assistance to migrants, refugees, and asylum seekers in Morocco. The strategy of funding allocation pursued by the two donors, however, evolved with time in line with their changing political priorities.

Before the new migration policy, both the EU and Switzerland acknowledged that Moroccan authorities viewed the presence of migrants as temporary and refused to support any sort of long-term integration policy (see Chapter 2). From the mid-2000s until 2013, both donors therefore channelled aid for migrant relief exclusively through NGOs and IOs⁹. In 2013, the announcement of the new migration policy pushed donors to reconsider their funding allocation strategy. They thus opted for a change in approach and resolved to channel aid for migrant assistance also through the state. An officer of the Swiss Development Cooperation recalled:

In 2013, Morocco announced this new migration policy. We therefore thought that it was no more appropriate to continue [working] in a logic of substitution [...] We wished [...] to go towards an approach of institutionalisation.

⁸ This figure was calculated by analysing the project information available on the website of the Swiss Development Cooperation in Morocco (www.eda.admin.ch) and on the website of the UNOCHA Financial Tracking Service (<https://fts.unocha.org>).

⁹ Interview, two officers of the Swiss Development Cooperation, Rabat, July 2016; Interview, officer of the EU Delegation in Morocco, Rabat, October 2016.

An EU officer similarly remembered:¹⁰

What changed is that after 2013 Moroccan authorities decided to become responsible for service provision to regularised [migrants] – and also some services to non-regularised [migrants], like access to school. We thought it was no more appropriate to work with a substitution approach. However, Moroccan authorities were not ready yet [to provide services directly to migrants] and migrants were not confident enough in addressing public services directly. We decided therefore to support this triangle between civil society and the state.¹¹

In the words of both Swiss and EU aid workers, the new migration policy marked donors' shift from a logic of 'substitution', where aid was used to fund projects that substituted the action of the state, to a logic of 'institutionalisation', where development projects did not replace state services but rather supported Moroccan authorities in expanding public services to migrant people. Donors thus interpreted the launch of the SNIA as the promise of a substantial readjustment of duties between the state and civil society. Both the EU and Switzerland thought that the Moroccan state would reappropriate most of the functions fulfilled by NGOs. Civil society organisations would then focus only on monitoring and mediating the implementation of the new migration policy. Both donors seemed to believe that aid would merely be a temporary instrument to support Morocco's integration policy, as the long-term social assistance for migrants would be covered by the state. Certainly, in the case of the EU, these expectations were influenced by the fact that the donor clearly perceived the SNIA as a sign of a major commitment of Morocco in border control cooperation. "The fact that Morocco has implemented the National Strategy for Immigration and Asylum means that Morocco is taking a responsibility [in border control cooperation]," the aforementioned EU officer explained. "They [Moroccan civil servants] consider that the [migration] issue concerns them and this means sharing the vision of the EU, which says to the countries of origin and transit, 'this concerns us all'." As the same EU officer commented during the interview, "It is important for Morocco to be manifestly supported with substantial [funding] support and budget support by the EU." The officer also

¹⁰ Interview, two officers of the Swiss Development Cooperation, Rabat, July 2016.

¹¹ Interview, officer of the EU Delegation in Morocco, Rabat, October 2016.

added, with a certain impatience, “but now they [Moroccan authorities] should be able to do this without us [the EU]!” The shift in the EU funding strategy should therefore be read as a diplomatic exercise (den Hertog 2016). Allocating Moroccan authorities’ funding for migrant integration and for the implementation of the new migration policy writ large is a way for the EU to materially express its support to Morocco for its commitment in border control cooperation. This financial support, however, is delivered with the expectation (and political impatience) that Morocco will soon be in a position to autonomously deliver services to foreigners.

The donors’ decision to rely more on the state and less on civil society organisations was not unanimously welcomed by organisations operating in the field. The officers of a charity providing direct assistance to migrants complained:

The EU [...] told us that now the funds were oriented to the reinforcement of Moroccan services. They therefore didn’t want to pass through NGOs anymore, but through the state. Voilà, this was the message. Now the EU is coming back on it a little bit, but at a certain moment we were a bit at risk because the donors decided that they wanted to work with the Moroccan authorities because there is this new migration policy . . . that has not been translated [into practice] and that addresses an extremely limited public [of beneficiaries]!¹²

The respondents might have, of course, been critical due to the funding shortage that this redirection of donor funding was likely to create for their organisation. However, their concern also seemed of a practical nature: channelling funding through the state at a moment when the implementation of the Moroccan migration policy seemed to be unclear risked restricting the material assistance available to vulnerable foreigners. These concerns would prove to be very accurate. In 2018, the EU announced a new €6.5 million programme, *Assistance to Migrant People in a Situation of Vulnerability*, funded through the Trust Fund for Africa. The funding is aimed at supporting social assistance projects implemented by civil society organisations in collaboration with state authorities. The programme factsheet justifies the action by arguing that “despite a strong engagement, the system in place struggles to sufficiently ensure access to essential basic services for

¹² Interview, two NGO officers, August 2016.

the vulnerable migrant populations” (European Commission 2018c, 4, translation by author). This change in strategy allows the EU to avoid straightforwardly criticising the implementation of the SNIA by continuing to frame aid as a temporary measure to support the migration policy transition.

The disengagement of the state from migrants’ assistance and the outsourcing of care onto non-state actors has always intersected with the presence of donors in the migration aid market. After the announcement of the new migration policy, donors tried to retreat from their engagement towards NGOs and IOs with the view of assisting Morocco in becoming an autonomous care provider for migrants. The turn that the implementation of the new migration policy has taken, however, has maintained donors, and their diplomatic stakes, at the heart of the system of social assistance for migrant people made precarious by border control.

Producing Bureaucratic Exclusion

Processes of border externalisation, outsourcing of state services, and aid politicisation transform NGOs and IOs into frontline providers of assistance for migrant, refugee, and asylum-seeking people in Morocco. This, however, does not mean that these aid actors are able to respond to all the assistance requests that they receive (see, for example, PNPM 2017b; Terre des Hommes – Espagne 2014). Aid-funded organisations, in fact, operate with budgets and beneficiary benchmarks pre-emptively defined together with donors. Projects are audited according to an accountability structure that essentially responds to donor requirements and that does not aim to provide universal care. NGOs and IOs thus have to regularly turn down people demanding assistance. The duty to help is thus intimately tied to the duty to deny help (Harrell-Bond 2002).

As providers and deniers of care, aid-funded organisations are in the position to decide who can and who cannot access assistance. These decisions are made through a variety of bureaucratic strategies aimed at filtering the number of migrants that can access the aid system. Labelling is a prominent option among such techniques. Aid-funded projects, in fact, rarely address the entire migrant population. Rather, they target a well-defined category of beneficiaries (Capelli 2016). As an example, the Tamkine-migrants project, funded by the EU and

Switzerland between 2015 and 2018, addressed “migrant women in a great state of vulnerability.” The project, “Protection and Promotion of the Rights of Migrants in Morocco: Domestic workers and human trafficking victims, Tetouan,” also funded by the EU between 2015 and 2017, identified migrants categorised as “domestic workers” and “human trafficking victims” as its target group (EU Delegation in Rabat 2016). Interviewees justified the reliance on categorisation as instrumental in establishing boundaries of action between each organisation and in preventing aid agencies ‘from stepping on each other’s feet’. Julia and Nicole, that I mentioned in Chapter 3, explained that their organisation does not assist refugees in order to avoid interfering with the work of the UNHCR:

We do not work with refugees, this can result in people being frustrated [...] it is a bit complicated because it is not that we do not want to take care of them, but it is the field of action of another partner [the UNHCR], so we will take care of people that are asylum seekers, until they get refugee status and then some people, I don’t know if someone wants to continue their psychological therapy with our psychologist here, ok, but normally once someone gets refugee status we pass the case to the partners of the UNHCR.¹³

The firm separation between ‘migrants’ and ‘refugees’ thus determines different pathways to social assistance for poor foreigners. If a person has refugee status, they can access a system of assistance managed by the UNHCR. The IO determines the population deserving assistance under its mandate, ensures the financial endowment of the programme, and then establishes partnerships with relevant NGOs. If a vulnerable foreigner does not have refugee status, they must seek assistance from other organisations providing help to ‘irregular migrants’ and ‘regularised migrants’. These organisations include local and international NGOs, faith-based organisations situated in different Moroccan cities, operating with funding provided directly by donors to the organisation or channelled by donors through the IOM.

To further screen their beneficiaries, development and humanitarian actors apply certain criteria of deservedness, the most widespread being ‘vulnerability’ (Bartels 2017). Vulnerability is an uncertain category. Most often, it is used to refer to “womenandchildren” (Turner 2018, 119) as a vulnerable population (see also Turner 2017). In my

¹³ Interview with Julia and Nicole, NGO officers, Rabat, August 2016.

interviews, however, it became clear that the aid workers dealing directly with migrant people requesting assistance had a large margin of manoeuvre to decide who was “actually” vulnerable (and therefore eligible for assistance) and who was not. Julia and Nicole went on to explain that their organisation leaves room for social workers to carry out more individualised assessments of people’s vulnerability:

Julia: When people arrive for the first time, we welcome them through an initial interview. We evaluate their needs, because our main criteria in a centre like ours is vulnerability, we really try to help the most vulnerable people, so there is a first interview . . .

Lorena: And how do you define vulnerability?

Julia: This is the difficulty, we work with our staff over that . . .

Nicole: This is their expertise, the people that work in this centre most of them are migrants themselves, so they have experienced a mobility pattern, they know the difficulties that someone that is in a mobility pattern in Morocco faces. Their expertise, as social workers, is to express a judgement to see if there is room . . . voilà, it is subjective of course.¹⁴

The IOM also uses the vulnerability framework to screen beneficiaries for voluntary return (ISPI 2010). The organisation defines vulnerable people as “all individuals who fall into one of the categories of humanitarian assistance (women, minors, elderly, and ill persons) plus victims of slavery and/or human trafficking” (ISPI 2010, 35). Richard, an IOM officer, explained that the IOM utilises a mix of fixed categories and individualised assessment by the Voluntary Return team to decide whether migrants can benefit from return assistance:

The priority is really to allow vulnerable people to leave – unaccompanied minors, victims of human trafficking, elderly people, ill people, but then, you could tell me, how is it possible that the vast majority [of beneficiaries of Voluntary Return] are young men between 18 and 35? Good question, are they also vulnerable? We always check, if there is a migrant that is in front of our door, he sleeps day and night in front of our door it is a vulnerable case, you can see that, then there are others that arrive with a smartphone . . . it depends, this is why there is the interview, this is why our teams are trained . . .¹⁵

¹⁴ Interview with Julia and Nicole, NGO officers, Rabat, August 2016.

¹⁵ Interview with Richard, IOM officer, Rabat, August 2016.

Although presented in technical and professional terms, assessing vulnerability relies on a large margin of discretion on the part of the agency's staff. Frontline workers are required to go beyond appearances when assessing the vulnerability of people who are not systematically categorised as vulnerable. Commodities such as smartphones are depicted as a sign of economic sufficiency by humanitarian actors, influencing whether they perceive migrants as destitute. In order to receive assistance from a particular organisation, migrants therefore have to fulfil the eligibility criteria characterising the target group. Fulfilling these criteria not only relies on one's status, but also by the capacity to portray oneself as vulnerable – and being recognised as such by the street-level operator (see also Maâ 2019).

Even when portrayed in a technical way, the labelling and filtering of beneficiaries is an exclusionary process. It is experienced as violent and unfair by people on the receiving end. Daouda, for example, is a Cameroonian man that I met in a small city in the Moroccan interior in the summer of 2019. When I met him, Daouda was ostensibly in a precarious condition: he was unemployed, homeless, and was begging at a traffic light. He had moved from one Moroccan city to the other in search of a job, without much success. He had also been forcefully removed from northern to central Morocco by state authorities on multiple occasions. While speaking, Daouda mentioned to me that he had spent a period living in Tetouan. As his living conditions were very precarious there as well, he had requested help from a local faith-based organisation. The person he had spoken to had declined his request because his case was not deemed vulnerable enough to be assisted. "He [the charity worker] was so mean!" Daouda recalled. "He started shouting to me when I insisted, he told me that he could just help people that were injured very badly."¹⁶ The charity worker justified his behaviour by implying that Daouda is not suffering enough to be eligible for help, seemingly invoking a form of rough vulnerability assessment. Daouda, however, experienced this refusal as simply mal-evilent and the tone of the charity worker as somewhat violent. Turner argues that assistance policies tend to apprehend women and children as axiomatic vulnerable subjects, thus systematically leaving behind young men (Turner 2017). The stories of Daouda – and of B enoit in this chapter's introduction – reveal that not conforming to certain

¹⁶ Interview, a Cameroonian citizen, city in the Moroccan interior, July 2019.

parameters of vulnerability (“he could just help people that were injured very badly” or “[he] told them his real age [20], so they did not help him”) confines them in the category of people who are too distressed not to demand help, but too bureaucratically in good shape to deserve it.

As frontline implementers of projects assisting migrants, aid-funded NGOs and IOs are at the forefront of migrant *inclusion* and *exclusion* from care. The delivery of assistance to precarious foreigners in Morocco is carried out according to strategies that decrease the number of people deemed eligible for help. Such strategies include labelling and vulnerability assessments, among others. The implementation of both these strategies is shifting, contingent, and subjective. It relies both on fixed categories and on the discretionary capacity of street-level aid workers to identify certain people as ‘vulnerable enough’ to receive help. Although framed in technical terms, bureaucratic filtering produces marginalisation in ways that are perceived as unfair by the people on the receiving end.

Who Is Responsible for Migrants' Suffering?

The exclusion of migrants from care is the product of a larger architecture of control with which racialised foreigners must interact. The frontline position that NGOs and IOs occupy, however, transforms them into the visible and reachable edge of the long marginalisation production chain. Aid-funded organisations thus often become the target of migrants’ grievances. In its 2017 report, the PNPM complained that by outsourcing service provision for migrants onto civil society organisations, the state also externalises the responsibility to deny care and to deal with complaints:

Since 2015, the services of certain NGOs providing assistance to migrants regularly receive people referred by CHU [Centre Hospitalier Universitaire, University Hospital Centre], that told them that this association could pay their bill. It is therefore NGOs that have to deal with people’s frustration if after the evaluation of their situation no aid can be granted.

(PNPM 2017b, 16, translation by author)

As Barbara Harrell-Bond argues, the relation between displaced people and humanitarian workers is an asymmetrical one, where the latter (who give) have way more power than the former (who receive).

Wittingly or unwittingly, NGOs and IOs interacting directly with migrants are therefore transferred “the *power* to decide who *deserves to receive*” from their sponsors (Harrell-Bond 2002, emphasis in original).

When confronted with these expressions of dissent, however, aid workers tend to enact mechanisms of sense-making in order to not perceive themselves as responsible for migrants’ suffering.¹⁷ The first of these strategies of sense-making relies on the dissociation between individual and collective responsibility. Aid workers that I interviewed tended to consider that they were not to be held responsible for failing to assist migrants or for causing migrants’ suffering. Rather, other more powerful actors were to be blamed, including donors, European governments, and Moroccan authorities. During an interview, I asked Moncif, a Moroccan man working as a senior officer for a Moroccan NGO, why the organisation he worked for only focused on refugees. He answered “Well we do not make differences, but the donors do. If someone comes and they are not a refugee, there is nothing we can do for them.”¹⁸ Louise, a French woman who used to intern for an NGO providing legal assistance to asylum seekers in Morocco, mentioned the difficulty in communicating the role and limits of the organisation to asylum-seeking people in situations of distress:

Louise: Sometimes, they [asylum-seeking people] do not manage to make the distinction between us and the UNHCR, they think we are the same thing . . . so then they tell us, “I do not understand why you rejected me [my asylum application]” . . . but I did not reject anything . . .

Lorena: [. . .] And how do you manage these cases?

Louise: I just try to tell them that it is not me, that it is like that and that we do not really have a choice, we can appeal but then if the appeal does not work there is nothing we can do [. . .] then they understand that it is not us. Some have the impression to speak to Macron or

¹⁷ The reaction of institutional actors towards more organised expressions of dissent can escalate to completely unsympathetic forms of reaction. In 2009, the UNHCR alerted Moroccan authorities to a protest happening outside its headquarters. The demonstration was dispersed by the harsh intervention of the police (Scheel & Ratfisch 2014). This happened at a time of institutional violence against migrants, and calling the police could have potentially led some of the protesters to be arrested and deported to Algeria.

¹⁸ Interview with Moncif, officer of a Moroccan NGO, Rabat, July 2016.

Merkel . . . when they understand that I am European, some tell me, "You must say to the European governments that . . ." Yes of course, I go home and tell this to them! [Laughs]¹⁹

Maria is an Italian woman who works for a European NGO that has implemented various projects related to migration in the past few years. When I asked her about the difficulty she encountered in her job, she mentioned a quarrel that occurred during the launch of a project assisting migrants in different areas of the country:

During the launch of the project, one migrant in the public raised his hand and asked, "So what have you done so far to help migrants?" We said we had done nothing yet because the project was being launched on that day. Then he kept on asking, "Why do you just help migrants, and not for example refugees?" But again, our project is about migrants and not refugees and we are not obliged to do everything for everybody I understand he was frustrated, but he was placing his frustration on the wrong people.²⁰

Maria seemed sympathetic to the man speaking from the audience and to the issues he raised. However, she could not help but think she was the wrong target for his complaints. Neither she nor the organisation she worked for, she thought, had a duty to provide care for the entire migrant population. Louise tries to solve this situation by communicating more clearly about her role and its limits. Differently from Maria, Louise seems to understand that migrant people are pushed towards making demands that might seem excessive or misplaced because they conflate the frontline worker's privilege (being White, being European, being in a position of power) with the privilege of more powerful decision makers. By depicting migrants' complaints as misplaced, Moncif, Maria, and Louise highlight the panoply of actors that contribute to the production of migrant exclusion. At the same time, however, this technique allows them to downsize their own role in the border control system.

Besides drawing a line between individual and collective responsibility, aid workers distanced themselves from the production of migrant exclusion by emphasising the technical character of vulnerability frameworks. Irene, a Southern European woman who used to intern

¹⁹ Interview with Louise, intern of a Moroccan NGO, Agadir, July 2019.

²⁰ Interview with Maria, officer of an INGO, Rabat, September 2017.

for the social team of a Moroccan NGO, was among the people who had to make decisions about assistance requests. She recalled the moment when the team responsible for social assistance had to communicate to their beneficiaries that they had to leave the accommodation in which they were hosted:

We would normally allow people to stay for a month, a month and a half maximum . . . there were times in which people did not want to leave because otherwise they would have been homeless and live in the street . . . we tried to avoid these situations and mediate, trying from the beginning to help them find a house. But I remember that once there was this person that arrived one day in the office, he was extremely angry, and started screaming, “Where will I go, where will I go if I leave the house?”

While recalling the decision-making process to evaluate assistance requests, Irene explained, “I mean, we tried to do what we could, but if you do not fit the criteria we had to say no . . . at the end of the day, the organisation was not a bank.”²¹ Irene’s testimony shows that assistance denials are not apprehended as a political act of marginalisation. Rather, they are framed as the result of a bureaucratic process that *technically* defines who deserves and who does not deserve assistance. This process allows Irene to legitimise her actions by highlighting their technical character, thus framing the discussion in terms of adherence to a protocol rather than engagement into politics or injustice. But technical decisions *are* political. As Hibou argues, “the production of indifference is, first of all, a social production.” By supporting the “selective rejection of those who are arbitrarily defined as different, out of their place, excluded from community” (Hibou 2012, 121, translation by author), bureaucracy legitimises the order of things established in society.

A third mechanism through which aid workers distance themselves is by developing racist discourses that depict migrant people as ‘undeserving’ and ‘manipulative’. This was certainly the case of Maxine, a French woman who used to work as a frontline NGO officer in a big Moroccan city. Maxine’s job included conducting distributions of food, medicine, and clothes in key areas of the city. She was also in charge of providing financial assistance to migrant people struggling to pay rent or medical bills. During the interview,

²¹ Interview with Irene, former intern of a Moroccan NGO, phone, October 2018.

Maxine mentioned that she conducted food distributions using her own car. However, some of the migrant people she met implied that the organisation that she worked for had paid for her car, thus implicitly accusing Maxine of enriching herself through her migration work. She also recalled that during the food distributions, some migrant people had justified their assistance requests by stating that “you [Maxine] are European, you [Europeans] stole from us, so now you have to pay [us] back.” In so doing, migrant people traced a relation between past colonial exploitation in Africa and the present unfairness of the aid system. These statements are quite similar to the interactions described by Louise and Maria. But while Louise and Maria described migrants’ accusations as “misplaced,” Maxine posited them as evidence depicting migrants as ungrateful and undeserving. Maxine clearly inhabited her role as a frontline worker through binary categories dividing migrants into ‘good’ and ‘bad’ people. During the entire interview, Maxine continued to describe migrant people as an impossible ‘problem’ to manage. She also labelled them as “all liars” because she had found out that the people she had been distributing clothes to had decided to resell the garments rather than wear them. Towards the end of the conversation, she brushed off stories about sexual violence against migrant women in Morocco by stating that “at the border they [migrant community leaders] send the women first so they can play with the border guards.” She then concluded that these situations were not “actually rape, but it is a transaction, it is strategic.”²² The misogynist and racist discourse upheld by Maxine naturalises and minimises sexual abuse against migrant women by depicting them as complicit in the production of the violence that they suffer (Tyszler 2019). The description that Maxine provided of the people she ‘assisted’ perfectly retraces the stereotype of the ‘bad’ refugees, which is quite pervasive in the discourses of humanitarian actors prone to see ‘beneficiaries’ as “thankless, ungrateful, cheating, conniving, aggressive, demanding, manipulative, and even dangerous persons who are out to subvert the aid system” (Harrell-Bond 2002, 58). According to Harrell-Bond, the figure of the ‘bad refugee’ is likely to be mobilised by aid workers to intervene in situations where their power is threatened

²² Interview with Maxine, former NGO officer, place withdrawn, July 2019.

(Harrell-Bond 2002, 58). By alternating between general racist statements about how ‘bad’ migrant people are and anecdotes from her own work, Maxine recrafted her own professional encounters with migrants into evidence for her argument. Criticising the aid world, or using aid-funded supplies for purposes that Maxine did not consider legitimate, were, in her view, actions that further justified her vision of migrants as manipulative people.

The dispersed character of the border transforms aid-funded organisations into the visible and reachable targets of migrants’ grievances. Aid workers develop different strategies to make sense of migrants’ complaints. Moncif, Louise, and Maria frame the suffering of migrants as the product of other more powerful border control actors. Irene justifies decisions over assistance requests as inevitable because they are the result of technical frameworks of eligibility. Maxine, instead, rebukes claims over her own involvement in historical structures of exploitation by framing them as evidence of migrants’ ‘bad’ character. These tactics do not spark solidarity or lead aid workers to question their own positionality into broader architectures of border control. Rather, sense-making strategies work as coping mechanisms that help aid workers downsize their perception of their own responsibilities in the production of migrant marginalisation. Moncif, Louise, and Maria feel legitimised to carry on with their work *because* they are not the most powerful actors in the production of the border regime. Irene is reassured about the fairness of her assessments *because* she respected the eligibility criteria. Maxine does not doubt herself *because* the accusations are made by people that she qualifies as manipulative and ungrateful anyway. Because they downsize aid workers’ role in border control, these mechanisms of sense-making transform the production of marginalisation into what Povinelli labels “quasi-events.” Contrary to spectacular forms of violence, quasi-events are injustices that slip through, that vanish in the “ongoing flow of the everyday.” Migrant marginalisation that is produced and reproduced through the aid industry does not reach “the threshold of awareness and theorization” (Povinelli 2011, 133) that would allow aid workers to *actually* reflect on the structures of inequality that migrants’ grievances highlights. Complaints do produce reactions – aid workers do record and analyse them. However, these reactions are not enough to destabilise the status quo. Sense-

making mechanisms downsize aid workers' perceptions of complaints, making grievances disappear into the background.

Conclusion

Aid-funded organisations occupy an ambivalent position in the regulation of migrant care in Morocco. On the one hand, they are often the sole consistent providers of assistance to West and Central African people living in precarious situations. On the other hand, however, the care they provide is *rooted in* and *conducive to* marginalisation. Assistance is rooted in marginalisation because the presence of migrant people made vulnerable by border control, and the availability of funding for projects related to migrant assistance, are directly tied to the interests of European states in controlling mobility in the Western Mediterranean route. But care is also, and more elusively, conducive to marginalisation. In fact, aid-funded organisations are rarely in the position to fulfil all assistance requests that they receive. Their position as frontline care providers transforms them into decision makers, endowed with the authority to declare who deserves assistance and who does not. The exclusion of migrants from care provision is produced through a bureaucratic process that frames claimants as “eligible” or “ineligible” for assistance through technical procedures such as labelling and vulnerability assessment. Despite their technical character, the screening and filtering of assistance requests produces marginalisation that can be experienced as violent by those people on the receiving end of exclusion. This merging between care and abandonment is particularly effective in blurring the boundaries of border containment because it prompts mechanisms that disperse responsibilities for the production of migrant marginalisation. Confronted with migrants' dissent, frontline aid workers enact three strategies to make sense of their own involvement in broader architectures of border control. They dissociate between individual and collective responsibility. They invoke the technical nature of screening frameworks. They portray migrants' complaints as part of broader racist discourses depicting them as ‘bad’ people. These sense-making mechanisms allow aid workers to distance themselves from responsibilities over the production of migrant marginalisation. In this way, migrants' dissent does not manage to trigger mechanisms to address the injustice and

power imbalances pervading the border control system writ large. Rather, sense-making mechanisms blur the boundaries of responsibility. They transform complaints over injustices into misplaced accusations, inevitable consequences, or evidence of the 'bad' character of people on the receiving end of border externalisation policies.