Özgün Makale

Biopolitics During COVID-19 Pandemic: Migration Movements and Border Practices in Europe¹

COVID-19 Pandemi Sürecinde Biyopolitika: Avrupa'daki Göç Hareketleri ve Sınır Pratikleri

> Ece CIM* Yasin ÖZBFY**

Abstract

In the domain of migration policy management, border practices constitute the subject of a basic laboratory. This is because the border practices might demonstrate flexibility and diverse policies during extraordinary periods/occasions. Currently, worldwide COVID-19 pandemic as a relatively new outbreak is being investigated especially from a biopolitical perspective by some researchers. The main purpose of the paper is understanding how some of the EU members cope with the regular migrants within the framework of Foucauldian biopolitics in such an extraordinary time. This research period extends January-December 2020. Four European countries (Italy, Germany, Poland, Greece) were selected since practices concerning migrants and fair geographical distribution. As a conclusion, one can state that the decisions in crisis situations can be reconsidered for disadvantaged groups. In times of crisis the permeability of borders may be subjected to change. Some groups should be exempted from general decisions. Despite of all the restrictions, borders should be more permeable for effective bodies.

Keywords: EU, COVID-19, Border Policy, Biopolitics, Migration.

Öz

Göç yönetiminde, sınır pratikleri temel bir laboratuvar olarak incelenmektedir. Çünkü sınır pratiklerinde olağanüstü dönemlerde/durumlarda esneklikler olabilmekte ve farklı politikalar uygulanabilmektedir. Şu anda, dünya çapında nispeten yeni bir salgın olan COVID-19, bazı

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^{*} Ph.D. Candidate, Department of Political Science and International Relations, Istanbul University, ececcim@gmail.com, ORCID: 0000-0001-9248-2497.

^{**} Ph.D. Candidate, Department of Political Science and International Relations, Istanbul University, ozbeyasin@gmail.com, ORCID: 0000-0003-3260-3941.

araştırmacılar tarafından özellikle biyopolitik bir bakış açısıyla ele alınmaktadır. Makalenin temel amacı, böylesine olağanüstü bir zamanda bazı AB üye devletlerinin göçmenleri Foucaultcu biyopolitika çerçevesinde sınırlarda nasıl yönettiklerini anlamaktır. Araştırmanın dönemi Ocak-Aralık 2020 arasıdır. Göçmenlere yönelik sınır politikaları uygulamaları ve coğrafi olarak adil bölgesel dağılım nedeniyle dört Avrupa ülkesi (İtalya, Almanya, Polonya, Yunanistan) seçilmiştir. Sonuç olarak, dezavantajlı gruplar için kriz durumlarında alınan kararların yeniden gözden geçirilebileceği söylenebilir. Bu nedenle, sınırların yarı geçirgenliği kriz anlarında daha da netleşebilir. Bu tür durumlar, belirli zamanlarda yarı geçirgen olan sınırları daraltan veya esneten bir niteliğe sahiptir. Tüm kısıtlamalara rağmen, verimli bedenler için sınırlar daha geçirgen olabilir.

Anahtar Kelimeler: AB, COVID-19, Sınır Politikaları, Biyopolitika, Göç.

Introduction

The mobility of goods and people, which has already increased with globalization, has played a role in the rapid spread of COVID-19, turning it into a worldwide pandemic. It has been argued by new research that there is a relationship between the spread rate of the virus and the intensity of human mobility (Sirkeci and Yüceşahin, 2020, pp. 380-381). This study puts aside the fact of the relationship between the spread rate of the virus and the increase in goods and human mobility. In this regard, it tackles the subsequent border practices within the European Union (EU). In this context, the relationship between these two main points examined historically/periodically. First, the change in the density of the Covid-19 cases within the country/region, and secondly, the changes in the border-visa policies and implementation of that country/region for the same period were taken into consideration. At the onset of the pandemic, it appears that countries that have reactively implemented strict border closure policies continue to receive visa applications and make their borders "selectively permeable" as before. This study discusses which groups are targeted with these stretched border and visa policies. This perspective, which causes a periodic sharp closure or limitation of selectively permeable nation-states or community borders, is challenged critically in the context of biopolitics.

Biopolitics is a management approach that comes from the notion of "bios", meaning "life" in Ancient Greek, and addresses a collectivity, or a population (Campbell, 2006, pp. 12-13). The importance of statistical data on birth rates, diseases, and endemics in biopolitics also provides information about population management (Legg, 2005, p. 145). Foucault has proposed the concept of biopolitics as an alternative to the traditional power model. He asserts that traditional power consists of the existence of a prohibitory and restrictive ruler and the authority of this ruler over the right to life of his subjects (Foucault, 2015, p. 35). In the new form of power, –put forward as an alternative- the human body has become something valuable and human life something to be protected. Moreover, the new approach in population management has been the control and protection of the multi-human structure (Gökalp Aras, 2014, p. 74). In this new power structure in which the population is targeted rather than individuals, the regulation of the general population rather than disciplining the individual is at the forefront (Koyuncu, 2016, p. 39). According to Foucault, the population is now a mass that must be governed as legal subjects. This population refers to the society within the governmental principles to be controlled by political economy information and security mechanisms as a fundamental target (Foucault, 2011, p. 76). The foundations of this controlled governance tendency are based on liberalism, which means "restriction of management practices". Predicating biopolitics and governance on the foundations of liberalism are related to its "rationalization" method (Foucault, 2015, p. 265). The mentioned rationalization is explained as "a sufficient management to achieve the ideal result" (Foucault, 2015, p. 264).

During the pandemic, EU countries applied lately the intervention principle which is required for the liberal order. And in this sense, these countries have experienced "biopolitical failure" (Arminjon et al., 2021 p. 4; Kloet et al., 2020, p. 638). On the other hand, separating migrant workers from their own citizens and "selecting" them as the guarantors of economic production shows that they apply biopolitics on a migrant basis. The transformation of the position and function of the market in classical liberalism to its position and function in the neoliberal order form the main criticism of biopolitics. In the classical liberal order, the boundaries of management practices are rationalized as a sufficient government to achieve the ideal result. The market ensures its functioning by its natural rules without interrupting the functioning of the state and without interfering with it. However, in the neoliberal order, the market itself has moved into a position that weighs the state (Kartal, 2016, p. 247). Meanwhile, neoliberalism is political rationality that seeks to economize the social sphere and link a reduction in welfare-state services and security systems to an increasing call for personal responsibility and self-care. In the context of this political rationality, social exploitation and domination mechanisms are re-coded since a new topography of the social sphere (Lemke, 2010, p. 7). In the neoliberalism-dominated establishment, bodies are dehumanized and mechanized for service and efficiency. In biopolitics, the subject is not a human; efficiency, continuity and order is at the forefront (Gökalp Aras, 2014, p. 73). For this reason, biopolitics is sometimes legitimized by physical and psychological security discourses. Prisons can be given as an example of this situation. For societal security, the prisons have been turned into places of confinement where individuals are rehabilitated and intended to be reintegrated into society (Foucault, 2002, p. 248). Punishment and discipline methods, as well as redemptive measures, coincide with the logic of regulatory and disciplinary- based biopolitics. The transformation from the right to kill or survive in the classical understanding of power into the right to let live or let die in the understanding of biopolitics also points to the regulatory and disciplinary role of biopolitics (Foucault, 2002, p. 246). Biopolitics play a big role in the importance of city management and the administration of intercity roaming. According to Foucault, biopolitics comes into play in the circulation within the city and between the cities in the form of expelling the dangerous elements and increasing the good ones, as well as bringing the bad ones down (Foucault, 2007, p. 20).

Literature Review

When biopolitical management approach -in which good and bad are distinguished- was adapted to migration governance, it is understood that the bad are kept outside the borders and the good are allowed to act freely (Schwenken and Russ-sattar, 2014, p. 107). The management of these borders where the bad and the good are separated is characterized by an inherent indecisiveness stemming from its internal and external functions as the basis of the state's control over the region. Thus, the characteristic of the boundary is heterotopic (Balibar, 2010, p. 316) because it is an exceptional place where both daily living conditions and distinctions are suspended; it is also a place that creates peoples, languages, races, and genealogies, and where the contradictions of politics are manifest (Balibar, 2010, p. 316). Border, by its very nature, contains contradictions. Because of this contradiction, today's security understanding and humanitarian border security discourses are intertwined (Koca, 2020, p. 2).

The transformation of multiple bodies into individual bodies to be watched, trained, used, maybe punished (Foucault, 2002, p. 248) is manifested in Europe's migration and border management as European Agency for the Management of Operational Cooperation at the External Borders of the Member States of the European Union (FRONTEX), European Border Surveillance System (EUROSUR), and the European Asylum Dactyloscopy Database (EURODAC). While EU-ROSUR was established as a surveillance system aiming to strengthen the control of Europe's external borders; FRONTEX is the agency of the surveillance system that handles the operation at external borders (Rijpma and Vermeulen, 2015, p. 454). EURODAC is the EU fingerprint database (Van Der Ploeg, 1999, p. 295). FRONTEX's operations emerge as the securitization of migration flows because the operations are carried out by semi-military organizations and they are acting against actions that respect fundamental human rights, such as the "principle of nonrefoulement".

Two further border control surveillance mechanisms have recently been added to the EURO-SUR and FRONTEX operations: The first is the agreements with third countries outside European borders, and the second is smart border technologies. With these developments, even if there is a relative success in reducing migrant deaths, they make Europe's borders increasingly surveilled and inaccessible (Rijpma and Vermeulen, 2015, p. 458). The regulatory and disciplinary position of the biopolitics is reinforced even though border surveillance mechanisms, -a tool of migration governance- undergo changes over time with technology, in other words, their technique (Foucault, 2007, p. 20).

Today, border surveillance mechanisms, which have become the most important tools of biopolitics in the field of migration, are understood as an open system in which some bodies are allowed to circulate, some are monitored, and others are stopped (Pinkerton, 2019, p.131). The EU countries make a distinction between inside and outside the Schengen boundaries, allowing the bodies within these boundaries to move freely, and the bodies outside of these boundaries to enter in a controlled manner. In this control process, it uses mechanisms such as FRONTEX, EUROSUR, and EURODAC.

During the pandemic, restrictions on migration and border practices have been implemented in EU countries as well as in many other countries around the world. These restrictions brought along some discussions. While one side claims that the pandemic is fake; the other side argues that it is a health problem. For example, according to Agamben, changes in "transition to online education, banning of gatherings, meetings, and cultural or political demonstrations, ensuring communication between people solely through digital means, replacing all kinds of contact between people by machines" are the regulations that the government desires. According to him, these regulations are carried out under the pretense of COVID-19. Meanwhile, Žižek argues that it is not reasonable to support an epidemic that would disrupt the functioning of the market and create distrust of their power. In this context, in addition to the claims of Agamben and Žižek, there is a study that includes the views of Nancy and Lorenzini on biopolitics and the process of COVID-19. It mainly deals with the differences in the ways in which they define the concept of "biopolitics" itself (as cited in Güler Sevli, 2020, p. 323).

In our study, rather than discussions about the concept of biopolitics, the issue of how the population is regulated and disciplined during COVID-19 pandemic was addressed critically. Biopolitics is also concerned about the impact of diseases and epidemics on the population. In this regard, the COVID-19 outbreak, -which resulted in rapid and fatal consequences according to the World Health Organization (WHO) – is considered as a biopolitical issue in this study. In the relationship between diseases and biopolitics, the structure, nature, spread, duration, and severity of the diseases prevalent in the population are important (Foucault, 2002, p. 249). Other factors: how far the disease has spread, the decrease in working hours of the population, the increase in the costs of working less, and the decrease in the energy of the population due to this spread are other important aspects of biopolitics (Foucault, 2002, p. 249).

Considering the form and rate of spread of the current COVID-19 epidemic, it is possible to read this process in biopolitics. As stated before, during this process, changing arrangements were made for certain groups such as agriculture, horticulture, and international transport workers or athletes in certain periods. Four of the EU countries that have taken these decisions were selected and are discussed below.

Research Methods

It was observed that the aforementioned rules are changed throughout COVID-19. Even while this study is being written, new decisions are being made. In this way, effective bodies are allowed to pass borders that are coherent with predetermined rules. These rules might demonstrate differences from one country to another based on which authority to determine, how to be determine ned, or for whom and for which period it needs to be determined.



Figure 1: Sample Countries of This Study

The EU policy of migration and the visa policy of the Schengen Area have been based on specific documents, standard procedures for legal migration and sanctions against irregular migration and are expected to remain in common practice. As geographical distribution is prioritized, four case studies are selected: Italy, Germany, Poland and Greece. Attention is paid only to the fact that the distribution is as equal as possible and the justification issues in the selection of the determined samples. In addition to the geographical distribution, migration sources and mobility of the countries are also taken into consideration. WHO reports on COVID-19 data are used in the research as descriptive numerical data. Historically, January 24, 2020, is taken as the turning point in this study (WHO, 2021e). The first COVID-19 case was reported on that date in Europe. The official announcements of the Ministry of Foreign Affairs and Consulate (Italy, Germany, Poland, and Greece) websites regarding the visa and border crossing practices of the selected countries are incorporated while analyzing migration and border policies with a critical perspective for qualitative research. In this research, two different typologies of migration are examined, in the form of changes in visa policies for regular migration practices and measures taken for irregular migration practices within the framework of management techniques by applying Foucauldian biopolitics. For example, border policies are always pursued to control irregular migrants' border crossings in a restrictive manner. This situation continued during the Covid-19 pandemic for irregular migrants whereas the regular migrant groups were also controlled according to the needs of the countries. During the COVID-19 pandemic, countries have also been pragmatic and regulated their border policies by excluding groups that would ensure the continuity of their welfare states from regular migrants.

The first of the selected countries is Italy, which has experienced significant crises in the health system, especially in the first three months of the pandemic process. Although severity of the epidemic has been decreased, according to WHO data, Italy remains in the first place among European countries in mortality (WHO, 2021c). Since Italy is the first country in Europe to close its borders with other European countries, Italy constitutes an important area of study for this research. The second sample, Germany, stands out with low mortality rate and the highest number of tests (WHO, 2021a). In addition, it is meaningful to have Germany since it has the secondlargest migrant population in the world with 15.8 million migrants according to the data of the United Nations 2020 (IOM, 2021). Poland was chosen as the third sample due to its shuttle migration with Germany. At this point, it is necessary to emphasize the existence of shuttle migration from Czechia and Austria to Germany -called cross-border migrant workers. In the context of the COVID-19 process, Poland is a country where the number of cases and deaths is relatively higher compared to other shuttle migration countries (WHO, 2021d). Finally, the fourth sample, Greece, was selected as one of the Schengen countries with the lowest Covid-19 mortality rate, and as a country located at the outer border of the Schengen (WHO, 2021b).

Country of Sample	The Reason of Sample Selection
Italy	The first case and lockdown
Germany	The low mortality rate and the highest number of tests The second-largest migrant population
Poland	Shuttle migration
Greece	The lowest Covid-19 mortality rate The outer border of the Schengen

Table1. The Reason of Sample Selection

Discussions

First of all, it is crucial to understand these four EU countries' migration management backgrounds, before the discussion on their migration management during the COVID-19 period. It is seen that these countries and the European Union periodically manage their migration policies according to their own needs. This is also a part and proof of population management.

In this study, "regular immigrants" constitute the main sample population. However, when the EU immigration policy is considered holistically, examples of biopolitics are encountered in practices regarding both irregular and regular immigrants. It is possible to see how state sovereignty works to create biopolitical borders and that these borders are fluid, that is, characterized by non-linear enforcement infrastructures, with different examples in each historical period.

The fact that today's EU countries signed labor agreements with some of today's EU countries and third world countries after the Second World War and the EU's border control practices on refugee movement after the Syrian Civil War are examples of border control situations. To elaborate on the first situation: Labor agreements were signed between Germany and Italy, Greece, Spain, Morocco, Tunisia, Yugoslavia, and Turkey. In this context, for example, 79,000 Italian agricultural workers came to Germany in 1955 (Martin, 2002, p. 7). These data show distribution according to the countries' needs. Labor agreements are a policy implemented not only in Germany but also in other EU countries. Here, Germany is especially mentioned as it is the sample in this study. Likewise, when the labor needs are over, return incentives have been a tool used in regular migration management. In other words, countries with an increasing number of immigrants have seen incentives as an element of relieving the labour market in times of economic crisis (Abadan-Unat, 2002; Boccagni and Lagomarsino, 2011).

When other social incidents that cause migration are examined historically, those that took place after the mentioned labour agreements can be listed as follows: The conflicts in the Balkans, the collapse of the Soviet Union, the Arab Spring and the Syrian Civil War, the Ukraine-Russia War. For instance, during the Syrian civil war period, while migrant bodies were abandoned to death, international protection, not death, was an exception. EU border policy and practices have constructed Fortress Europe; biopolitics that externalizes migrants at borders (Davitti, 2018, p. 1173). In general, the push-back situation can be cited in irregular migration management. Especially the Greece-Turkey border is a laboratory to observe pushbacks. There is no data on push-back, because measuring pushback is inconceivable as a numerical entity. However, there is certain proof to have that pushback happened all along Turkey-Greece border (Border Violence Monitoring Network, 2020).

It is impossible to explain regular migration management without giving examples of irregular migration management. In particular, the practices during the COVID-19 period can be seen as the continuation of the examples given above regarding the management forms of irregular migration. Actually, many countries collectively closed their borders in this period. In the CO-VID-19 period, it is possible to examine migration management, exceptionally, by tracing those who cross these borders. For this reason, exceptional groups at border crossings are included in the four countries covered.

First Case: Italy

Italy, as the country that faced the COVID-19 outbreak at the earliest, followed a relatively nonrestrictive attitude in border policies at the beginning and refused the request of forming Schengen internal borders. First of all, the Italian Minister of Health, and then the government argued that this measure could not prevent the epidemic. However, less than a month later, Italy took a lockdown decision. The starting date of the coronavirus epidemic in Italy could be considered to January 30, 2020, when two cases were identified (WHO, 2021c).

On March 14, 2020, when the decision was made to close all internal borders of all land, air, and sea routes in Italy, the number of reported cases in Italy was 17,660 and the number of deaths was 1,266 (WHO, 2021c). The daily case change rate decreased from 16.85% to less than 1% within approximately one and a half months. By May 4, 2020, it is stated that about 67,800 Italians were working in the Swiss Ticino Canton, which decided to open three border points closed with Italy after a month and a half, and 4,000 of this number are health sector employees (The Local Switzerland, 2020). It is observed that the Italian-Ticino Canton border was gradually closed, but some border crossing points continued to exist during the period when the border closure decisions were taken. In response to the criticism that some crossing points on the Ticino border were not closed, the Swiss Foreign Minister said, "We are mutually dependent on each other on the European continent. Our neighbors know how much of the Swiss healthcare system depends on border personnel" and argued that a complete ban from Italy to Switzerland would paralyze a large part of the Ticino economy and threaten many essential services for the population (Swiss Info, 2020). As can be understood from this statement, by emphasizing the existence of economic reasons, border crossings for bodies that contribute to this economy are managed in a way that can be "stretched" (for example, health sector employees). It is clear that closing Ticino borders "completely" and "for all" could not be achieved in the long run. Concurrently, the Italian Minister of Tourism's statement of "Tourism will continue this year" (2021), is an example of economypopulation-based management policies. The point to be expressed here is that border controls are carried out to protect public health, while on the other hand, permits are allowed for 'efficient and needed bodies' to pass "in". Italy seems to implement biopolitics by "selecting" productive bodies. While Italy's border is closed for all, except the health and tourism sector; productive bodies are selected "permeable" based on their sector roles and border practices. The important part here is not how they pry into their citizens' lives during COVID-19 period, but how the state has regulated each sector and their employees' mobility. So, what we have seen in Italy's case is that while citizens are securitized on the border inside, bodies allowed to cross the borders have been evaluated for "efficiency, continuity, and order" according to Foucauldian biopolitics (Gökalp Aras, 2014, p. 73). In other words, restrictions on certain groups were gradually removed throughout the process and the "good ones" are allowed to act freely in COVID-19 era migration management (Jaeger, 2010; Pinkerton, 2019, p. 131; Schwenken and Russ-sattar, 2014, p. 107). It is possible to observe that Germany follows similar policies.

Second Case: Germany

When we examine Germany, we see that strict border controls in Germany started on February 29, when the total number of cases was 79 (WHO, 2021a). In the Skilled Immigration Act, which entered into force almost simultaneously with COVID-19 and aims to meet the need for skilled workers in Germany, it is emphasized that especially medical doctors and nurses do not need to obtain another qualification that requires approval, apart from their minimum 5 years of experience (DW, 2021). Moreover, exempting the healthcare professionals and qualified personnel working in transportation and goods traffic during COVID- 19 from restrictions shows how selective "governmentality" is implemented (The Federal Government, 2021). While the COVID-19 restrictions point to the prohibitory side of power, it shows how migrants allowed to cross the borders or migrants with extended visas are "normalized" within the biopolitics mechanism (Koyuncu, 2016, p. 43). Not only skilled workers but also around 40,000 agricultural workers were exempted from the restrictions by the decision of the German Ministry of the Interior; and their transitions were eased. For example, Germany invited "needed" Romanians to harvest crops of various agricultural products such as asparagus, despite quarantine, with the permission of the Romanian government (Cretan and Light, 2020, p. 562).

On the other hand, in April, the decision of impunity to Schengen visa holders on the condition of returning to their countries until June 30, or the decisions to temporarily close the Austrian border on the grounds that they are on the irregular migration route, are important data on which bodies are restricted and which bodies are exempted (Schengenvisainfo News, 2020b). The number of cases, which was around 163,000 at the end of April, increased by 15-20 thousand every month, while the number of cases, which was 500,000 at the end of October, exceeded 1 million by the end of November (WHO, 2021a). The reason for citing these data is to state that ongoing border management is not directly dependent on numerical data. Regardless of the data, it is possible to assert that Germany made a "rational" biopolitical intervention via overcoming the "non-intervention" contradiction of the liberal order, which often complains about the interventions of the administration, but has not been able to break away from it, requiring a rationalization of management practices despite its opposing stance. The biopolitics that emerged because of this new form of government is not just about the regulation of the population; it is also a social and economic order in which economic production is secured (Legg, 2005, p. 139).

Like the case of Italy, it is obvious that the border practices are applied based on "efficiency" and are "selectively permeable". Biopolitics decides whether skilled and agricultural workers will pass or won't pass the borders in German migration management.

Third Case: Poland

When a total of 1.389 (cumulative) cases were detected in Poland on March 27, it decided to close its internal borders with Czechia, Slovakia, Germany, and Lithuania for public health and internal security and extended this decision again on May 1(WHO, 2021d). Immediately after, based on the Poland national data, "the overall incidence rate was 3.65 per 10,000 population, mortality rate 0.18 per 10,000 population and case fatality rate 5%" on May 4 (Orlewska & Klusek, 2020, p. 2). Despite this, the Ukrainian consulate was kept open and work permits were granted in the fields of "agriculture, horticulture and international transport" (Schengenvisainfo News, 2020c). As can be seen, Poland has implemented selective governance by taking decisions with economic motives. It is known that new forms of power subordinate the population organizing to an economic organization to meet the demands of the capitalist order and add them to the production processes (Collier, 2009, p. 85-86). The existence of these specially determined sectoral areas demonstrate that Poland is not different from Germany and Italy regarding the border management understanding. In addition, these "designated" sectoral areas made "necessary" migrants of the pandemic period, who suddenly became "visible and recognized" (Cretan and Light, 2020, p. 563).

During COVID-19 pandemic, with the 'normalization' initiatives that took place towards the summer in general, Poland quickly opened its border gates, reopened visa application centers to provide the migration flows from countries such as Belarus, Ukraine, and Russia, and simplified the visa issuance procedures. In addition, in September, due to the ongoing protests in Belarus, Polish Foreign Secretary declared that they expect a migration flow towards their borders and stated "We have already reviewed the law to be prepared for a possible wave of people seeking to enter EU territory. You need to think about support for people who need to cross the border quickly, but we must be responsible for the Schengen border, our European partners" (Schengenvisainfo News, 2020a). Thus, he demonstrates the importance of borders in the management of migration mobility. The phrase "those who must cross the border" explains how "security" and "humanitarian" security issues are intertwined with each other. Just as Germany and Italy have executed, biopolitics is realized in a "strategic possibility area" where potential risks are minimized and maximum benefit is boosted (Evans, 2010, p. 2).

Fourth Case: Greece

Finally, Greece is a transit country where migration routes are used most frequently among the EU members, where irregular migration flows are stopped most frequently and where securitization systems such as EUROSUR and FRONTEX are implemented firsthand. During the initial phase of COVID-19 in Europe, Greece claimed that a migration crisis emerged at the Greece-Turkey border (Skordas, 2020). As a result, the influx of migrants was stopped by the harsh intervention of Greece and Turkey was accused on the grounds that it pushed migrants to the border. With the transition from disciplinary technologies (EUROSUR, EURODAC, FRONTEX) with their elaborate interventions to "laissez-faire" balance mechanisms, and security technologies based on freedom and liberty, freedom is no longer a taboo where power relations cannot penetrate; it has become a condition for the functioning of biopolitics mechanisms (Koyuncu, 2016, p. 56). The emergence of COVID-19 pandemic has been a reason for Greece to follow more rigid "security" policies at border crossings. In the same period, at the end of March, Greece had 1314 cases (WHO, 2021b). As can be understood from the example of Greece, which has a relatively low number of cases compared to other European countries, as stated before, numerical data have become the basis for "security" border and visa policies. On April 17, Greece suspended flights to European countries with the highest number of cases. Greece eased its restrictions on mobility in May and June and will not "impose mandatory quarantine or tests" (Stamouli, 2020). However, by announcing the "Golden Visa" programme for investment purposes on June 12, it signaled that restrictions could be relaxed for "investor" migrants to eliminate or minimize the economic costs caused by the epidemic (Nesheim, 2020). These flexible applications are in line with the view of WHO's "facilitating international trade and providing flexibility in the entry of necessary foreign nationals such as healthcare professionals" if the travel and trade restriction is coordinated at the very beginning of the pandemic and thus biopolitical regulations are underlined (Lee et al., 2020, p. 1593-1594).

Conclusion

"Human" and "body management", which are the most important subjects of social sciences, have always been taken into consideration by the government. The need to control the population, by numerical data, has been seen as legitimate by the rulers for the continuity of the existence of power. The "repressive power" attitudes of the nation-state have been realized as "kill, destroy" or "live" on the population.

However, when it comes to the modern state, a persuasive power has emerged with the "information" provided by "modernity". The power, which is "controlling" and "regulating" over population, surrounds individuals everywhere without exception. This is exactly the concept of biopolitics that Foucault put forward. Rather than being a concrete power, they are power relations that permeate every aspect of life.

When the Corona pandemic period is examined in the context of biopolitics, it is seen that in fact, the numerical data of the disease have only played a role in the phase of familiarizing with the disease, border management and visa policies. The main determining factor in border management and visa policies has been the sustainability of the market. Numerical data on the disease have formed the "persuasive" and consensual side of biopolitics. Individuals contribute

to the continuation of the practices by consenting that the restrictions are due to the disease. Italy, Germany, Poland, and Greece, all these countries have taken decisions on how to regulate migrant bodies more efficiently during the pandemic process. While making these decisions, they applied a "selectively permeable" biopolitics by classifying migrants on a sectoral basis. This situation has also shown us the practices of biopolitics at the borders, which determine which migrant groups will be out of the borders and which can cross the borders. These practices ensure economic sustainability and remind us that these countries follow successful biopolitics among migrants. At the beginning of the COVID-19 pandemic, Italy, one of the countries hardest hit by the pandemic, relaxed its border policies for those working in the health sector. Similarly, the "Tourism will continue this year" argument is an example of how the management of borders has become flexible. Border policies include which populations move where, how and when, and therefore involve biopolitics. The migration of agricultural workers between Germany and Romania is also an example of biopolitics. It is also biopolitics for Poland, which restricted visas during the pandemic, to exclude various profession groups (agriculture, horticulture and international transportation) from these restrictions. Another example is, when COVID-19 cases were on the increase, Greece's beginning of restrictions on migration in May and June, while introducing the Golden Visa by economic purpose.

Previously categorized visas are also an example of the implementation of biopolitics. When the period in question is analyzed, it is seen that the restrictions on visa categories were gradually removed. In many countries, first, the following steps were implemented; the reopening of closed Schengen internal borders; afterward, opening a D-type visa to third countries. In addition, certain occupational groups such as agricultural workers, transport workers, and professional athletes are exempted from the restrictions. Looking at the course of the disease while such situations occur, it is seen that the virus is in a stable line except for the period of mutation in November 2020. The information that the number of cases increased exponentially in many countries in November 2020 can be found in the graphs of the WHO. At this point, it is possible to see the continuity of biopolitical practices emphasized from the very beginning of this paper. Even if the number of cases increases exponentially, even if the virus mutates, re-restricting D-type visas will end many sectors and greatly disrupt the functioning of the market. For this reason, no new restrictions are imposed. Restrictions are not advocated in this study. The aim is to clarify that only the numerical data, which are justified at the very beginning of the process, are actually a "persuasion tool".

It has been observed that some immigrant groups are exempted from border crossings because they are "utility" in this COVID-19 process or in cases where a potential new epidemic and/or crisis arises, the general border policies of the countries in this study and the EU. This situation reminds us how fragile the immigrants working in other sectors or irregular immigrants are. At the same time, it clearly shows that immigrant groups that are subject to exceptions can also be sacrificed when they are not productive in extraordinary situations.

Here, the responsibility that should be placed on the entire international community, the EU in general and other regions, is to create a fair and human rights-oriented holistic migration policy for each group, rather than making efficient bodies "exceptions". This research may open further research on migration governance and biopolitics-based in the future corona period. The "vaccination card" or "vaccine passport" discussions that are taking place today can be reasonable examples for future research.

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