



PAPER

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"I knew nothing would be easy without papers"

A glance at undocumented migrants' access to housing, employment, and healthcare in Brussels and Paris

Key findings

- **Housing was the most common challenge in both cities.** In Brussels, 78% of respondents reported facing housing difficulties, compared to 51% in Paris. Afghan respondents in Paris and Guineans in Brussels were disproportionately affected by housing precarity, including sleeping rough and relying on emergency shelters or squats.
- **Employment-related challenges were widespread and shaped by legal status in Brussels and working conditions in Paris.** 58% in Brussels and 38% in Paris reported challenges related to employment and work. In Brussels, lack of documentation was the primary barrier to employment, reported by three quarters of those facing work-related challenges. In Paris, while documentation was a factor, respondents more often cited poor working conditions.
- **Access to healthcare varied by country and was linked to housing stability.** Use of state medical aid was more common in Brussels (51%) than in Paris (27%). Respondents facing housing precarity were more likely to rely on NGOs or private out-of-pocket services. In Paris, qualitative data highlighted a lack of awareness among some respondents about available healthcare options.
- **Perceptions of safety diverged notably across cities and nationalities.** In Paris, North African respondents were more likely to feel safe, while Guinean respondents were the most likely to report never feeling safe (19%). In Brussels, experiences of insecurity were more widespread, including among North African respondents, one-third of whom reported never feeling safe.
- **Despite the challenges, most respondents considered Belgium and France their final destination.** A majority of respondents - 66% in Brussels and 79% in Paris - reported that they had reached the end of their journey, and close to three quarters had never actively planned a return to their country of origin.

Introduction

Undocumented migrants in urban centres across Europe face **complex challenges in accessing housing, employment, healthcare, and protection**, with their experiences shaped by legal status, local policies, and socio-economic conditions. In France and Belgium, two key migration destinations, they often rely on **informal networks and civil society actors** to navigate daily life, yet structural barriers persist.

In this context, MMC conducted **1,002 interviews** with irregular migrants¹ from Afghanistan, Algeria, Guinea, Morocco, and Tunisia between **July and December 2024**. The interviews aimed to explore the journeys of undocumented migrants to Europe, their sources and use of information, current access to basic services, and return intentions

This briefing paper examines the **experiences of third-country nationals in and around Paris and Brussels**, with a focus on access to housing, work opportunities, healthcare access, as well as relationship with authorities and return intentions. By highlighting key trends and challenges, the paper aims to inform **researchers, practitioners, policymakers, and civil society actors** working on migration, urban inclusion, and access to services for vulnerable populations.

For further insights into return migration and migration dynamics in cities, readers are encouraged to consult the work of MMC on [cities](#) and on [returns](#).

1 In the context of this study, irregular/undocumented migrants are understood as third-country nationals lacking the documentation to legally reside in the country at the time of data collection, and therefore living in an irregular situation. This includes Afghans and other potential asylum seekers who, at the time of interview, had not yet decided to apply for asylum, as well as individuals with ongoing asylum applications in another EU country who were not complying with legal procedures and were therefore also considered to be in an irregular situation in the country of data collection. For the purposes of this study and for brevity, the sample group is collectively referred to as "irregular," while acknowledging the legal distinctions that may exist within this categorisation.

2 "I knew nothing would be easy without papers"
A glance at undocumented migrants' access to housing, employment, and healthcare in Brussels and Paris

Methodology

This briefing paper is based on 1,002 interviews conducted between July and December 2024. In France, MMC conducted 500 interviews in Paris and surrounding suburbs;² in Belgium, MMC conducted 502 interviews in the Brussels-Capital region.³

Sampling strategy

Respondents were purposively selected among five nationalities (Afghanistan, Algeria, Guinea Conakry,⁴ Morocco, Tunisia), with quotas per nationality. Respondents must have not had legal documentation to stay in the country at the time of the interview, which therefore included:

- individuals who entered the country irregularly and did not apply for international protection, or any other form of regular permit to stay;
- asylum seekers with a pending application for international protection in another EU country who did not apply for asylum in France or Belgium;
- individuals who overstayed their visas;
- individuals who remained after the withdrawal of their residence status
- individuals who stayed following the rejection of their asylum claim.

Limitations

As the study relied on quota-based sampling, findings are **not representative** of the entire undocumented migrant population in France and Belgium, but rather indicative of the experiences and perceptions of those interviewed. The findings offer **indicative trends** that contribute to a deeper understanding of migrants' lived realities. Additionally, due to small proportion of women or people with diverse sexual orientation, gender identity and expression, and sex characteristics (SOGIESC) in the sample, this analysis will not include gender-specific findings. Finally, MMC did not control for respondents' length of stay in Europe, meaning the sample includes individuals with varying durations of residence. This may influence findings related to current access to services (given that more recent arrivals may have less information or support) as well as perceptions of conditions in countries of origin, which may be based on experiences from the more distant past. When deemed particularly relevant, the variable of time has been taken into consideration in the analysis; such instances are explicitly mentioned in the report.

2 Besides Paris, interviews were conducted in Argenteuil, Asnières sur Seine, Athis Mons, Aubervilliers, Bois Colombes, Bry sur Marne, Clichy, Domont, Draveil, Epinay sur Seine, Gennevilliers, Grigny, Issy-les-Moulineaux, Juvisy sur Orge, La Chapelle (Aéroport Charles de Gaulle), Lagny Thorigny, Marne la Vallée, Nanterre, Neuilly Plaisance, Reilly Malmaison, Persan, Ris-Orangis, Saint Denis, Saint Ouen sur Seine, Savigny sur Orge, Torcy.

3 Besides the municipality of Brussels, interviews were conducted in Anderlecht, Brussels, Ixelles, Jette, Machelen, Molenbeek-Saint-Jean, Ninove, Rebecq, Schaerbeek, Saint-Agatha, Saint-Gilles, Tubize and Vilvoorde.

4 Throughout this briefing paper, Guinea Conakry will be indicated as Guinea.

Demographic profiles of the sample

The most represented nationality was Morocco (273 respondents across both locations) followed by Afghanistan (206), Guinea (201), Algeria (179) and

Tunisia (138).⁵ 80% of the interviews were conducted with men, and only 19% with women.⁶

Figure 1. Nationality of respondents

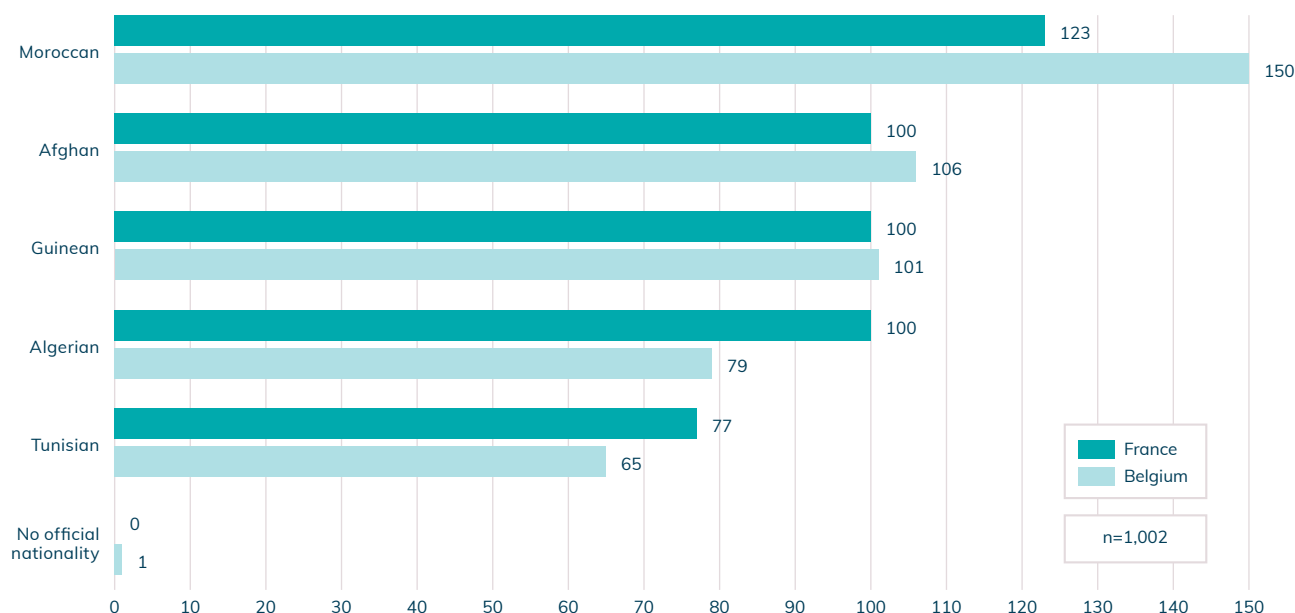
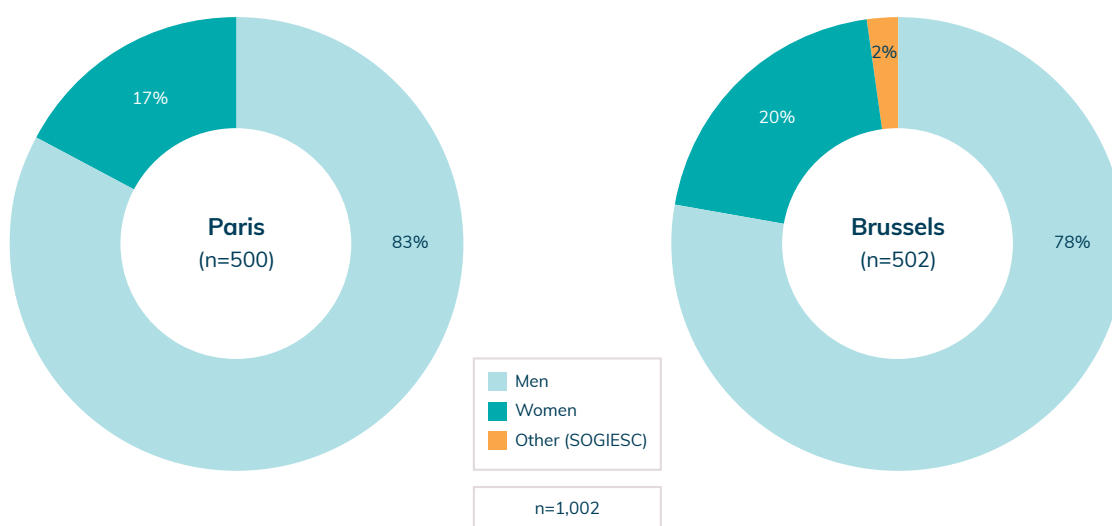


Figure 2. Gender of respondents



Respondents interviewed in Brussels had been in Europe for longer compared to those interviewed in Paris. In Paris,

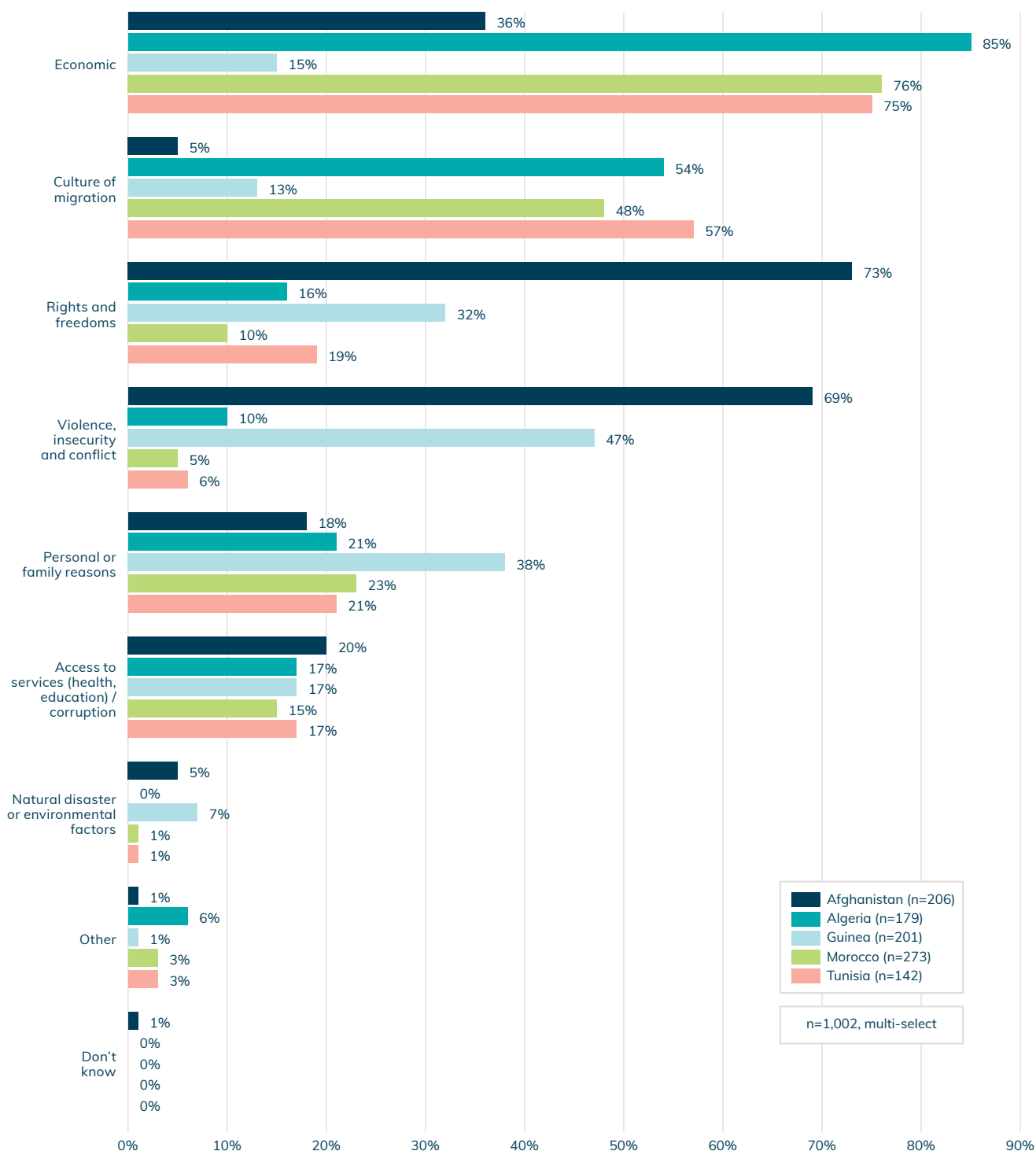
41% of respondents arrived before 2020, compared to 58% for Brussels.

⁵ One respondent originating from Tunisia self-reported to not have an official nationality. This respondent has been grouped with the Tunisian respondents for the rest of the analysis.

⁶ The residual 1% of the sample was people with diverse sexual orientation, gender identity and expression, and sex characteristics (SOGIESC).

Drivers: Economic factors shaped North African migration; rights and freedoms were key for Afghans

Figure 3. Why did you leave the country you migrated from?



For respondents from Algeria (n=179), Morocco (n=273), and Tunisia (n=142), economic factors were a prominent migration driver, motivating the decision to migrate of, on average, 79% of respondents. Afghans placed greater emphasis on the absence of rights and freedoms, with 73% citing this as a key driver, followed closely by 69% who pointed to violence and insecurity. Guinean

respondents showed a more complex set of motivations, with violence and insecurity reported by 59%, family reasons by 38%, and the lack of rights and freedoms by 33%. 65% reported two or more reasons, while only 35% selected a single driver, underscoring that migration decisions are rarely due to a single factor.

Journeys: three quarters of respondents reached Europe via Mediterranean Sea routes

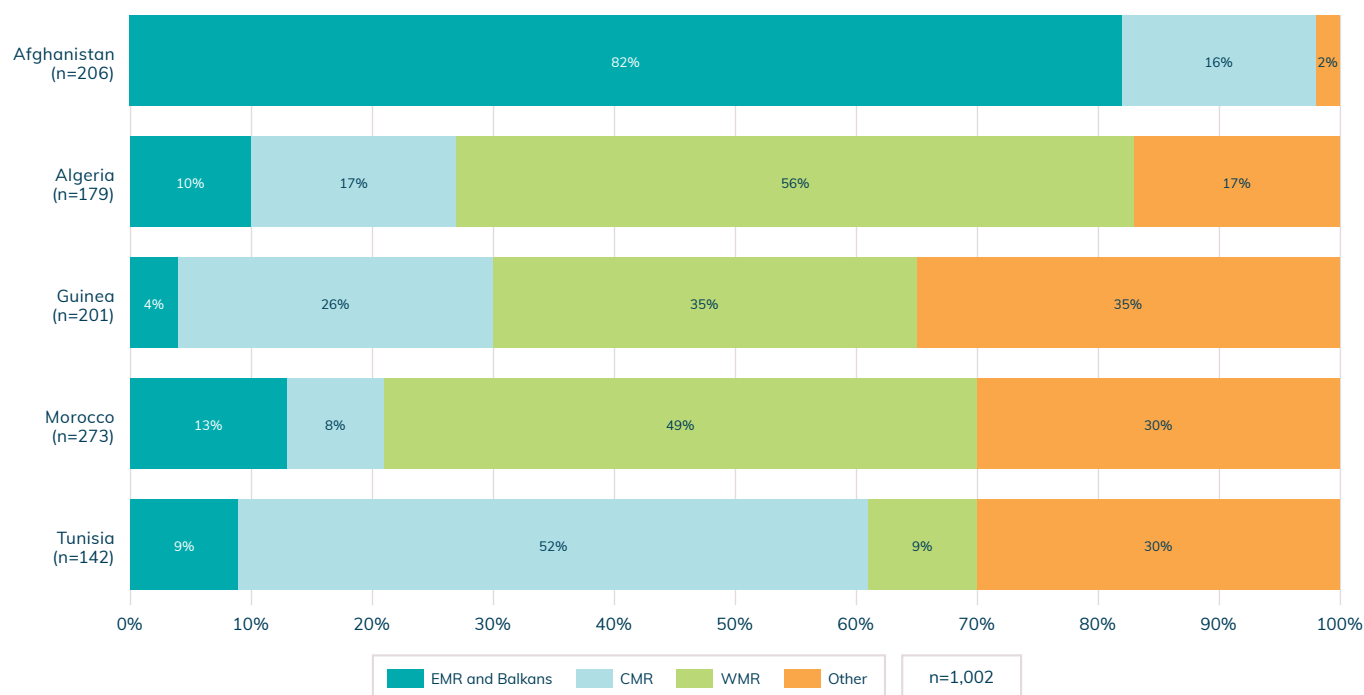
Overall, 77% of respondents entered Europe through three main routes, as shown in Figure 4.

- **Eastern Mediterranean and Balkans Route:** includes entrances via Bulgaria, Cyprus, Greece, Hungary, Romania, and Serbia.
- **Central Mediterranean Route:** includes entrances via Italy and Malta.

- **Western Mediterranean Route:** includes entrances via Spain.

The remaining 23% entered from other countries (namely Austria, Belgium, Croatia, France, Germany, Netherlands, Portugal, and Switzerland) suggesting that they likely entered via regular channels.

Figure 4. Routes used to enter Europe



The low share of Afghan respondents using routes other than the Central and Eastern Mediterranean (2%) underscores the limited availability of regular entry pathways to Europe. This is particularly concerning given

the humanitarian and security situation in the country, which may justify a well-founded fear of remaining and warrant the establishment of accessible and safe channels to international protection.

Challenges: Housing and employment were top concerns, though a quarter faced no challenges

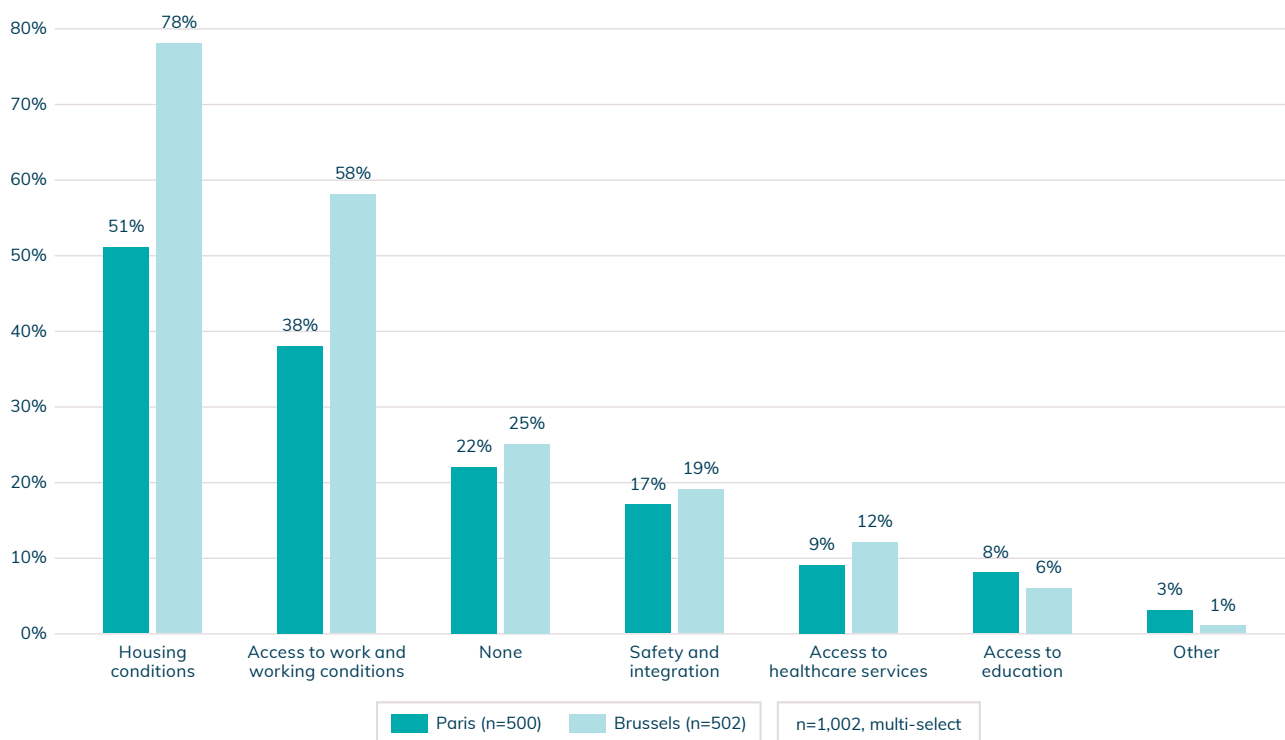
Housing conditions emerged as the most commonly reported challenge in both cities during the month previous to the interview, cited by 78% of respondents in Brussels and 51% in Paris, as shown in Figure 5.

Barriers to accessing work and favourable working conditions were also prominent, reported by 58% of respondents in Brussels and 38% in Paris. In contrast, **challenges related to accessing healthcare were less**

frequently reported, with only 12% of respondents in Brussels and 10% in Paris mentioning them.

Is to be noted that 22% of respondents in Paris and 25% in Brussels **reported facing none of the challenges listed in the survey**, which seem to suggest a degree of relative stability in their employment, housing, and healthcare situations.

Figure 5. Among the following challenges, which ones did you experience here in the past month?



In Brussels housing is a common struggle, but employment precarity varies widely

Table 1. Specific challenges by nationality in Brussels (n=502; multi-select)

Challenges	Afghanistan (n=106)	Algeria (n=79)	Guinea (n=101)	Morocco (n=150)	Tunisia (n=66)	Total (n=502)
Housing conditions	74%	73%	98%	74%	67%	78%
Access to healthcare services	11%	14%	11%	13%	11%	12%
Access to education	31%	16%	40%	17%	21%	25%
Access to work and working conditions	73%	34%	95%	43%	41%	58%
Safety and integration	11%	11%	41%	15%	15%	19%
None	13%	11%	0%	3%	3%	6%
Other	0%	4%	0%	1%	2%	1%

In Brussels, while housing conditions was the main challenge reported across nationalities, there were notable differences regarding access to work and working conditions. While only 39% of North African respondents (n=295, across three countries) reported challenges in this area, 74% of Afghan respondents (n=106) and 95% of Guinean respondents (n=101) reported difficulties. **Nearly all Guinean respondents also reported challenges in terms of housing conditions (98%), highlighting their diffused exposure to extreme precarity.**

These differences may point to varying strategies to accessing employment, as well as the time and modality of arrival in the country. Quite a few North African respondents have arrived in Belgium through regular migration channels (on average, one in three had a regular status upon arrival) and may have benefited from strong personal networks within the established diaspora, which may have helped them finding work and overcome some employment-related challenges. Conversely, many Afghan respondents arrived in Belgium through irregular channels (only 3% of Afghans respondents had a regular status at arrival), which may have limited their access

to stable employment. Their relatively recent arrival,⁷ coupled with the irregular status, likely compounds the challenges they face in entering the labour market.

The situation for Guinean respondents requires a different interpretation. Most Guineans arrived between 2016 and 2021, suggesting that recent arrival alone does

not explain the high prevalence of reported challenges. Moreover, these difficulties were reported across all Guinean respondents, regardless of their legal status at arrival. This pattern may indicate a greater awareness of, or exposure to, exploitative working conditions among Guineans, compared to other groups.

Marked nationality-based disparities in Paris

Table 2. Specific challenges by nationality in Paris (multi-select)

Challenges	Afghanistan (n=100) ⁸	Algeria (n=100)	Guinea (n=100)	Morocco (n=123)	Tunisia (n=77)	Total (n=500)
Housing conditions	73%	48%	53%	45%	35%	51%
Access to healthcare services	9%	10%	14%	7%	4%	9%
Access to education	14%	0%	25%	2%	0%	8%
Access to work and working conditions	39%	36%	50%	32%	34%	38%
Safety and integration	9%	11%	51%	9%	3%	17%
None	1%	31%	14%	31%	34%	22%
Other	15%	0%	0%	0%	0%	3%
Refused	1%	0%	0%	0%	0%	0%

In Paris, nationality-based differences emerged across key areas of reported challenges. **Afghan respondents (n=100) disproportionately reported difficulties related to housing conditions**, with 73% citing it as a challenge compared to an average of 45% among other nationalities.

North African respondents (overall, n=300) were more likely to report that they did not face any challenge in the past month than other nationalities. This was reported by a third of North African respondents, compared to 14% of Guineans (n=100) and 1% of Afghans (n=100).

Guinean respondents (n=100) were more likely to report challenges related to access to work and working conditions (50% vs. 35% average), and this disparity was even more pronounced regarding safety and integration: 51% of Guineans cited it as a challenge, compared to only 8% of other respondents.

The heightened exposure of sub-Saharan irregular migrants to safety and security risks, particularly in informal settlements and urban slums in the suburbs of Paris, has been previously documented by researchers and advocacy groups.⁹ This vulnerability appears more pronounced compared to respondents of other nationalities.

⁷ 84% of the Afghan respondents interviewed in Brussels, and 88% of the Afghans interviewed in Paris, arrived in Belgium and in France respectively after the Taliban's takeover in August 2021.

⁸ One respondent from Afghanistan preferred to not answer to this question.

⁹ Byrne, M. (2021). [On the Streets of Paris: The Experience of Displaced Migrants and Refugees](#). Social Sciences, 10(4), 130. See also: Refugee Rights Europe (2018). [Still On The Streets. Documenting the situation of refugees and displaced people in Paris, France](#).

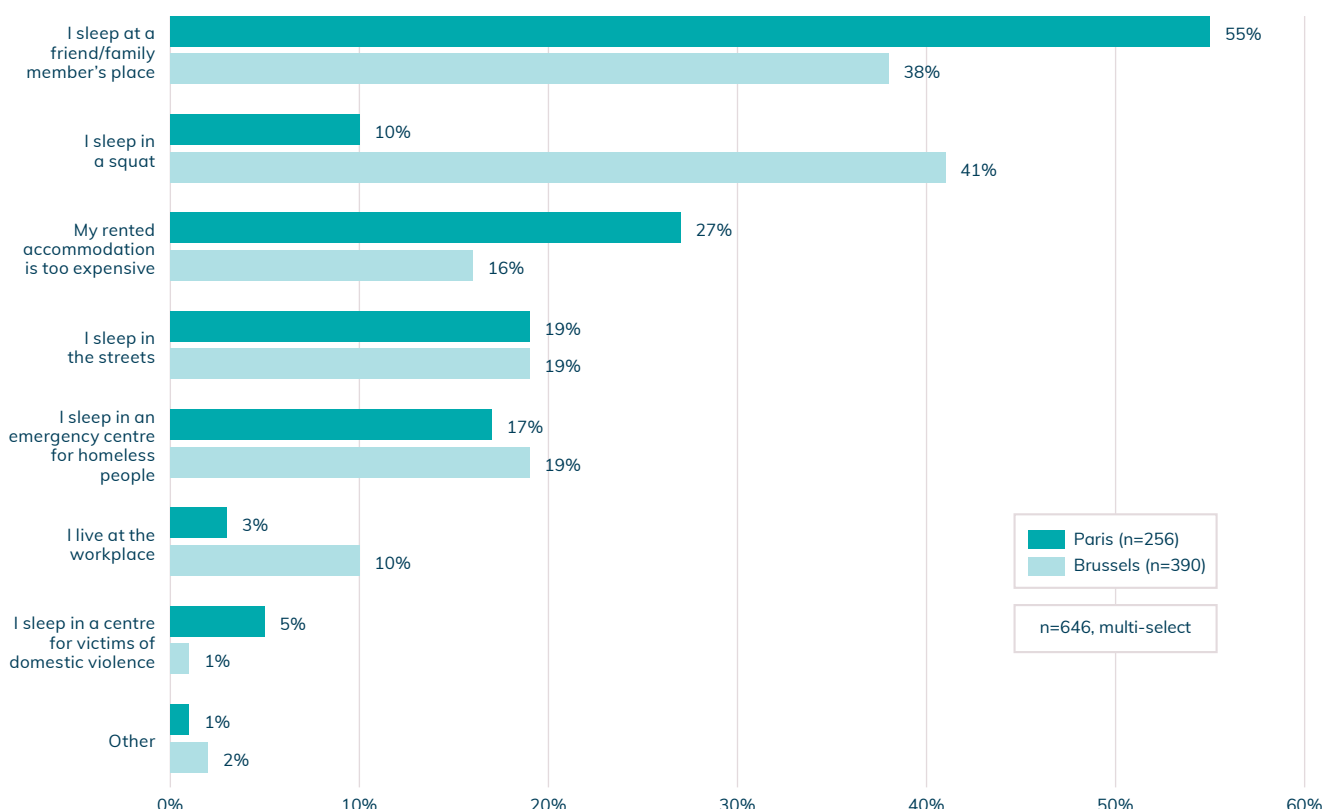
Housing: challenges in securing housing led some migrants to rely on squats or on the hospitality of family and friends

Housing challenges were the most reported challenge overall, which ties into the contextual housing crises experienced in the cities of Brussels and Paris. Among Belgium's three regions, Brussels has the highest rents and most overcrowded and poorly maintained rental units, contributing to widespread urban homelessness.¹⁰ The situation in Paris is also concerning, with a drastic decrease in the past three years in the number of available units, and skyrocketing rental costs that pose a

challenge for both locals and migrants.¹¹

The analysis of the follow-up question on types of challenges experienced, posed to respondents facing housing challenges (n=646), highlights the specific difficulties they faced and the various coping mechanisms they adopted, with notable differences across interview locations and nationalities, as shown in Figure 6.

Figure 6. What challenges with housing conditions did you experience in the past month?



In Paris, among respondents reporting housing-related challenges (n=646), close to one third (27%) reported their rent as too expensive, and more than half (55%) had to rely on family or friends for accommodation. A smaller but noteworthy proportion reported sleeping in the streets (19%) or in an emergency shelter (17%). It should be noted that respondents could select more than one answer option: as part of broader strategies or coping mechanisms people might, for instance, spend some time living with family and friends, then move to an emergency shelter, and occasionally find themselves sleeping in the street.

In terms of nationalities, **Afghans stand out as a particularly vulnerable group**. 47 out of 73 Afghan respondents who reported housing challenges in Paris said they sleep with friends and family (equivalent to 64%) - more or less in line with the average across nationalities. However, **43 reported sleeping in the street** (equivalent to 59%) **and 29 in an emergency centre** (40%), which is much higher than other nationalities in the study, who reported these options on average in less than 10% of cases. Another aspect worth mentioning - while keeping in mind the very limited sample - is that **8 out of 19 Guinean women respondents reported sleeping in**

10 IBSA Institut Bruxellois de statistique et d'analyse (2024). [Panorama socio-économique 2024 - Contexte économique, social et environnemental de la Région de Bruxelles-Capitale](#). See also Bruss'help (2024). [Les profils des personnes sans-abri et sans titre de séjour](#)

11 France24. [Wanted: A place to live in Paris](#). Published on 25th March 2024, accessed on 18th February 2025. See also RMC and AFP [Faute de logement, quelque 200 personnes campent place de la Bastille à Paris](#). Published on 6th August 2024, Accessed on 20th February 2025

a centre for survivors of domestic violence. This could point to the incidence of the issue, but also - positively - to the availability in Paris of specialised centres catering to the needs of this particularly vulnerable group.

In Brussels, sleeping in a squat (41%) and being hosted by family or friends (38%) emerged as common strategies for those reporting housing challenges (n=390), followed by sleeping in emergency centres or in the street (both 19%). In March 2024, Caritas identified 20 squats in the Brussels capital region, that housed more than 500 people.¹²

In contrast to the situation observed in Paris, Afghan respondents in Brussels reported relying less on sleeping on the street (27% vs. 59% in Paris) or in emergency centres (12% vs. 40% in Paris), while the proportion being hosted by family or friends rose to 91%, compared to 64% in Paris. With 42% Afghans interviewed in Brussels having arrived during 2024, so few months before data collection took place, this suggests that many of them were able to draw on existing social networks to meet their housing needs. Such support may have provided, at least temporarily, a degree of stability not observed in Paris.¹³

Degrees of risks and housing precarity

As seen above, respondents who faced housing challenges adopted a range of strategies to cope, reflecting different degrees of precarity, from economic vulnerability to episodes of sleeping rough. To assess varying degrees of risk and housing precarity among them, the coping strategies of those facing housing challenges (n=390 in Brussels and n=296 for Paris) have been categorised into three distinct groups.

Strained but stable: Respondents in this group reported that their only housing-related challenge was limited to the cost of their rented accommodation, without indicating any recent experiences of homelessness or reliance on temporary accommodation. This situation was reported by 14% of respondents facing housing challenges in Brussels (n=390) and 27% of respondents in Paris (n=256). In Brussels, Tunisian respondents were more likely to report this situation (14 out of 43), while in Paris, it was more commonly observed among North African respondents overall, with 45% of the 130 North African respondents who reported housing challenges falling into this category.

Network-dependent but not in crisis: This group included respondents who coped with housing challenges by being hosted by family, friends, or at the workplace,¹⁴ as well as reporting high costs of rent, but had not accessed emergency shelters in the past month. These individuals appeared to rely on informal support networks to manage housing needs without turning to institutional, emergency, or community-based services. 28% of respondents in Brussels and 38% of respondents in Paris fell into this category. As also highlighted above, Afghans in Brussels appeared to be particularly reliant on this set of strategies (56 out of 78).

High housing precarity: Respondents in this category reported instances of sleeping rough or accessing emergency shelter in the past month. This includes stays in centres for survivors of domestic violence, squats, homeless shelters, or sleeping in the streets. 56% in Brussels reported resorting to such strategies, compared to 36% in Paris, highlighting the severity of lack of stable housing and shelter experienced by migrants in Brussels. This has been further confirmed by civil society and institutional actors, who were involved in a validation workshop held in April 2025. 82% of Guinean respondents fall into this category (out of 99 facing housing challenges) in Brussels, and 56 out of 73 Afghans in Paris.

Additionally, the distribution of housing strategies was cross-checked against respondents' length of stay in the country to explore whether time spent in Belgium or France correlated with more resilient housing arrangements, such as only experiencing economic strain related to rent, or being supported by family and friends. This analysis was based on the assumption that longer stays may lead to increased familiarity with the housing market and stronger community networks. However, the regression analysis found no statistically significant relationship between time spent in the country and more resilient housing strategies. This suggests that duration of residence alone, in the context of our respondents in Brussels, did not substantially improve respondents' ability to cope with housing needs.

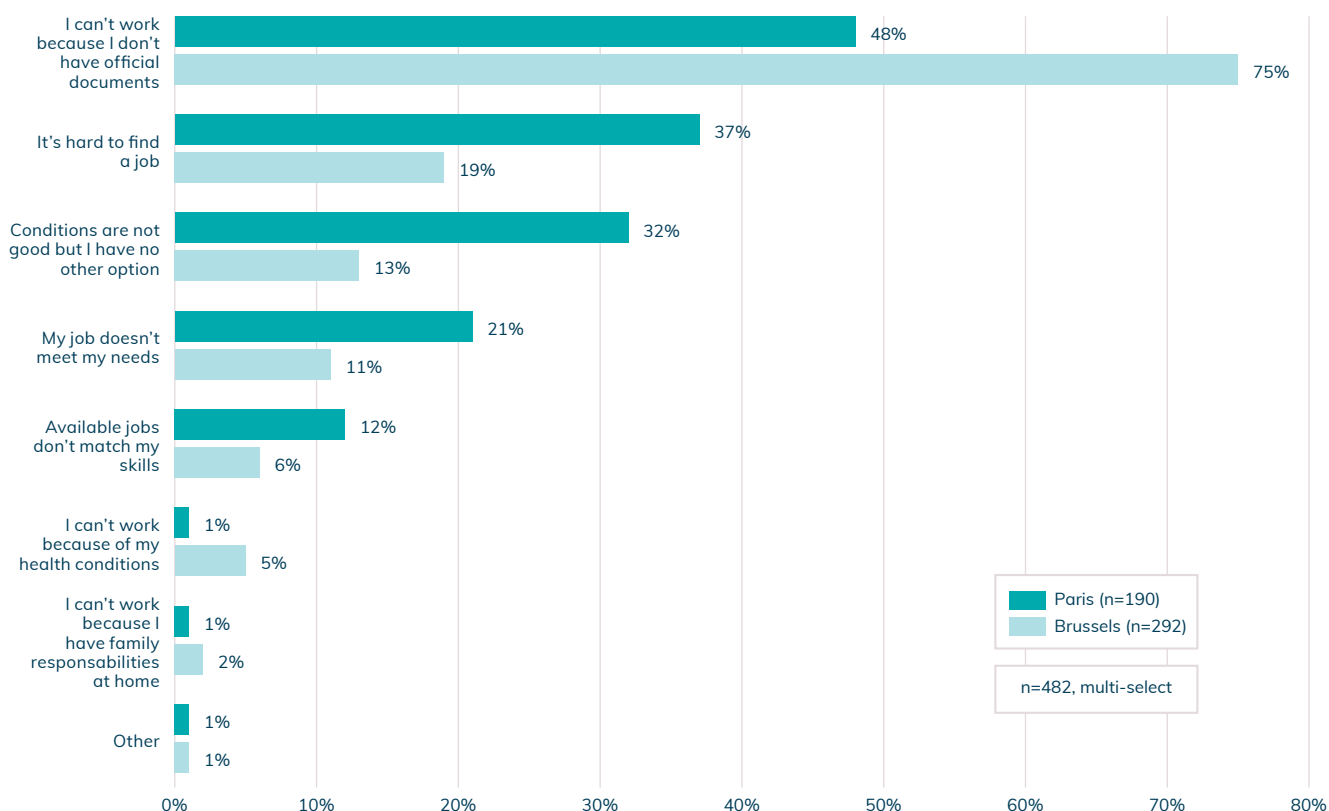
12 Caritas Belgium (2024). [Niet-Opvangbeleid Dashboard \(Dashboard on the policy of non-accommodation\)](#). Available in Dutch only.

13 The reliance on support from migrant communities to address housing needs has also been observed in other MMC studies conducted across Europe. See also: Come HoMe Consortium (2024) [Come HoMe: Understanding and combatting intersectional discrimination in housing for people with a migratory background. Synthesis of research findings](#)

14 Sleeping at the workplace is often linked in the literature to risks like trafficking, debt bondage, and forced labour. While having an employer control migrant workers' housing can increase the risk of exploitation, this categorisation focuses on housing precarity, rather than working conditions. For this reason, sleeping at the workplace is classified as medium-severe housing precarity rather than extreme.

Employment: lack of documentation impacted access to work in Brussels; in Paris, working conditions were a key challenge

Figure 7. What challenges with access to work/working conditions did you experience in the past month?



The follow-up question on types of employment challenges, posed to respondents who reported challenges with access to work and/or working conditions, highlights interesting differences across interview locations and counterintuitive findings about the relationship between length of stay and access to decent work.

In Brussels, among respondents facing work-related challenges (n=292), three-quarters identified a lack of documentation as the primary obstacle to employment. In contrast, in Paris, only a minority of respondents facing work-related challenges (n=190) attributed labour market difficulties directly to a lack of documentation (37%), though 32% reported challenges in securing work. This may reflect a greater reliance on informal employment arrangements among respondents in Paris.

However, other challenges emerge **in Paris**: nearly half (48%) of those affected by work-related challenges cited poor working conditions as a key issue, rooted in the absence of a residency status that leaves them vulnerable to exploitation. Additional challenges include difficulties in securing jobs (32%), inadequate pay (23%) and employment in roles that do not fully utilise their skills (12%).

Across Paris and Brussels, **similar proportions of men (n=808) and women (n=186) interviewed reported challenges related to work and working conditions**, at 48% and 49% respectively. **The specific challenges reported by women closely mirrored those reported by men.** This suggests that, in these contexts, gender does not appear to be a determining factor in shaping distinct barriers to employment. While overall patterns were similar, some marginal variations emerged between men and women regarding specific work-related challenges. In both locations, women were less likely than men to report difficulties finding a job (18% vs. 26%), but more frequently cited health conditions (8% vs. 3%) or unpaid care and domestic labour in their own home (4% vs. 1%) as reasons for not working.

With regards to nationalities, Afghan and Guinean participants most frequently cited documentation issues. This was reported by 70 out of 76 Afghans in Brussels, 38 out of 39 Afghans in Paris, and 84 out of 96 Guineans in Brussels. In contrast, Algerian and Tunisian respondents more often pointed to difficult working conditions, mentioned by 25 out of 52 Tunisians and 33 out of 63 Algerians across both locations. These patterns may be linked to differing levels of access to diaspora networks that facilitate entry into the labour market. However,

such employment is often informal, misaligned with prior qualifications, and characterised by low pay and poor working conditions.

Challenges related to employment and working conditions were cross-analysed against respondents' length of stay in the country to explore whether time spent in Belgium

or France correlated with fewer reported difficulties. Regression analysis found no statistically significant relationship between duration of residence and reduced reports of work-related challenges. This suggests that, among respondents in Paris and Brussels, **time spent in the country alone did not meaningfully improve their ability to overcome employment-related barriers.**

Healthcare: half of respondents in Brussels could access healthcare through state medical aid, while in Paris, a quarter did not try to access health services

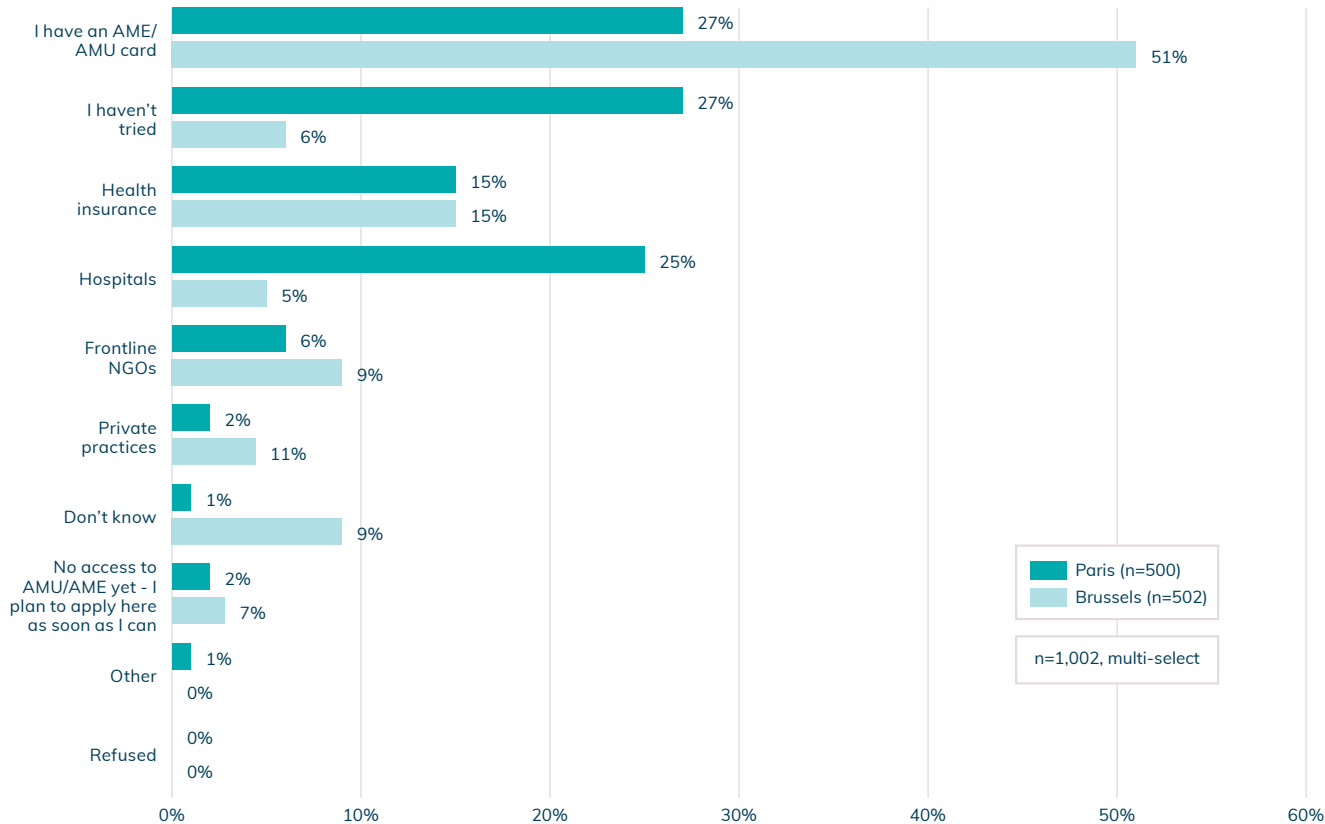
Both France and Belgium have programmes that ensure that vulnerable populations without legal residency can access some healthcare services in their respective countries.

In France, undocumented migrants can access the **Aide Médicale de l'État (State Medical Aid, AME)**. This programme provides access to healthcare for migrants residing irregularly in France, subject to certain residency conditions and income limits.¹⁵ Beneficiaries receive coverage for medical and dental care, medications,

hospitalisations, and other health services.

In Belgium, undocumented migrants can access the **Aide Médicale Urgente (Urgent Medical Aid, AMU)**. This assistance is designed for individuals without legal residency status who lack the financial means to afford medical care. AMU encompasses a wide range of medical services, including preventive care, general consultations, medications, and hospital treatments. Accessing AMU requires having qualified as "in need" by the Public Centre for Social Welfare, available at municipality level.¹⁶

Figure 8. How do you get access to healthcare services?



15 Residency in France must exceed three months. No valid residence permit must have been held for more than three months. Income must not exceed specific thresholds, which vary depending on the household size (€ 10,166 for a single-person household, up to € 21,348 for a four-people household). Minors are entitled to AME immediately, regardless of the three-month residency requirement. See also: [What is state medical assistance \(AME\)? | Service-Public.fr](#) – verified on 1st April 2024, accessed on 20th February 2025

16 To access AMU, individuals must apply through the Public Center for Social Welfare (CPAS/OCMW) in their municipality, providing proof of identity, proof of lacking residence, and financial need. See also: Fedasil. [You are without legal residence and need medical aid | Fedasil info - informatieplatform voor asielzoekers in België](#)

Among the total sample (n=1002), 39% accessed healthcare through state medical aid schemes such as AME (Aide Médicale d'État) in France or AMU (Aide Médicale Urgente) in Belgium. Of these, 35% relied exclusively on AME or AMU, while an additional 4% reported combining these services with other forms of access, including hospitals, frontline NGOs, out-of-pocket private care, or health insurance.

The use of AME/AMU was notably higher in Brussels (51%) than in Paris (27%), pointing to significant variation in access across contexts. In contrast, one in four respondents in Paris reported using hospital services, likely through emergency care.

In both countries, 15% of respondents accessed healthcare through formal health insurance. This relatively high share of respondents with some history of accessing insurance-based healthcare may be linked to prior attempts to regularise status. In fact, 53% of respondents in Brussels and Paris reported having tried to regularise their situation at some point. For many, being documented temporarily allowed access to health insurance, which was later lost when their residency status expired or was revoked.

In Brussels, address instability hindered access to public healthcare, leading to more reliance instead on private practices or NGOs

Table 3. Modalities of accessing healthcare by housing situation in Brussels (n=390; multi-select)

Housing strategies used in Brussels	Until now, I access health services through health insurance	I have an AME/AMU card	No access to AMU/AME yet - I plan to apply here as soon as I can	Frontline NGOs	Hospitals	Private practices	Other	I haven't tried
Strained but stable (n=54)	17%	80%	2%	4%	4%	0%	0%	0%
Network dependent but not in crisis (n=111)	11%	34%	8%	7%	2%	19%	0%	4%
High housing precarity (n=219)	17%	50%	10%	13%	6%	10%	0%	6%

Table 3 plots respondents' housing strategies classified by varying levels of precarity as described previously, against their reported modes of healthcare access, to explore how housing instability may influence access to health services.

Those facing only economic pressure had the highest rate of accessing healthcare via AMU (43 out of 54, corresponding to 80%). In contrast, among those relying on personal networks but not in emergency housing situations (n=111), only 34% accessed healthcare via the AMU, while this group had the highest reported use

of private medical practices (19%), suggesting reliance on out-of-pocket healthcare, possibly due to barriers accessing AMU in the absence of a permanent address. Social services such as emergency shelters, however, can facilitate access to healthcare entitlements: among respondents experiencing severe housing precarity (n=218), 50% reported accessing healthcare through AMU. Respondents in extreme housing precarity were also more likely to access emergency health services through frontline NGOs (13% vs. 7% among those supported by networks) and, to a lesser extent, through hospitals (6% vs. 2%).

Qualitative data collected in Paris seems to show a limited awareness of health services available for people without residency

In Paris, a few respondents were not aware of alternatives for accessing healthcare after having lost their health insurance following the rejection of their asylum application.

“I don't have any health insurance after OFPRA [Office Français de Protection des Réfugiés et Apatrides / Office for the Protection of Refugees and Stateless people, edit] refused my documents.”

25-year-old undocumented man from Afghanistan, interviewed in Paris

“For the last two years I haven't had health insurance, and I do not have the right to apply for that. It's really hard when I am sick, I can't access health services. I am stressed and mentally not stable most of the time due to thinking about my family, my kids and my destiny in France, being without legal status. I don't have any idea how to find a doctor's appointment for my mental health, to explain my situation.”

28-year-old undocumented man from Afghanistan, interviewed in Paris

Safety: perceptions of safety diverge sharply by nationality and city

Perceptions of safety were used as a proxy to assess respondents' experiences with safety and security challenges.

In Paris, perceptions of safety varied vastly by nationality. Respondents from North African countries were more likely to report feeling “always” or “often” safe, compared to Afghan and Guinean respondents. Guinean respondents stood out as the group most likely to report

“never” feeling safe, with 19% selecting this option, substantially more than any other nationality.

In Brussels, experiences of insecurity were more widespread across all groups. One-third of North African respondents reported “never” feeling safe. In contrast, Afghan respondents were more likely than other nationalities to report feeling “always” or “often” safe (see Figure 9).

Figure 9. Select the phrases that match your experiences in safety and feeling free to move and behave as you would like to without fear during the past month



“I live in constant fear of being arrested at any moment, fear of being deported to a country where I am no longer safe. I have no one to confide in and I don't dare to seek official help because I fear it will make my situation worse. My only hope is that one day I can live here without having to flee or hide.”

40-year-old man from Guinea Conakry, interviewed in Brussels

Onward movements and return intentions: despite the challenges, three quarters plan to remain permanently in Belgium or France

In Brussels, 66% of respondents reported that they had reached the end of their migration journey, compared to 79% in Paris. A further 26% in Brussels and 14% in Paris were unsure. Only a small minority (7% in both countries) stated that they did not consider Belgium or France their final destination and intended to continue their journey elsewhere.

As for return intentions, very few had previously taken any concrete steps towards returning to their country of origin, such as deciding on a departure date, purchasing a ticket, or making other travel arrangements. In Brussels, 75% reported never having actively planned a temporary or permanent return, and the same was true for 74% of respondents in Paris.

Conclusions

This briefing paper offers a glance at the experiences of undocumented migrants in Brussels and Paris, with a focus on their access to housing, employment, healthcare, interactions with authorities, and return intentions. The findings highlight how legal status intersects with local conditions, service availability, and individual networks to shape migrants' daily realities.

Access to housing emerged as the most pressing challenge, particularly in Brussels, where many respondents resorted to squats and emergency shelters. In Paris, although a majority reported hosting by family and friends as a coping mechanism, quite a few reported having to resort to sleeping in the street or in emergency shelters, particularly Afghan respondents. The analysis of coping mechanisms adopted to address housing challenges highlights notable differences across interview locations and nationalities, as well as the crucial role played by diaspora and social networks.

Access to work and working conditions was reported as the second main challenge. In Brussels, respondents identified the lack of documentation as a key barrier to employment. Respondents in Paris also mentioned documentation as a barrier, though to a lesser extent (37%). Nearly half of all respondents (48%) reported having to work in poor conditions, stating they had no other choice. These patterns also seem not to be influenced by the time spent in Belgium or France. Guinean respondents in both Brussels and Paris reported consistent exposure to housing and employment challenges, suggesting a heightened and persistent level of precarity.

Access to healthcare varied greatly. The use of public medical assistance schemes such as AMU in Belgium and

AME in France was markedly higher in Brussels. However, access to these schemes was linked to housing stability: respondents without a fixed address were less likely to receive state-provided medical aid, and more likely to rely on private or NGO-provided services. In Paris, qualitative data revealed limited awareness of healthcare options among some respondents, particularly after losing legal status or health coverage.

Perceptions of safety among undocumented migrants in Paris and Brussels varied across nationality groups and locations. While North African respondents in Paris were more likely to report feeling safe, Guinean respondents stood out for their heightened sense of insecurity, with nearly one in five reporting they “never” felt safe. In Brussels, feelings of insecurity were more widespread across all groups, including among North Africans, a third of whom reported “never” feeling safe. Afghan respondents, in contrast, were more likely to report positive perceptions of safety.

Despite these issues, one in four respondents in both countries reported facing none of the challenges listed in the survey, suggesting that some were able to maintain a degree of stability. The findings highlight the **importance of informal networks, prior regularisation, and local service availability** in shaping outcomes related to housing, work, and health. These insights are crucial for informing inclusive policy responses and targeted outreach by civil society and local actors.

Finally, these difficulties do not appear to deter respondents from intending to settle in Belgium or France, with only a minority expressing interest in temporary or permanent return to their country of origin.

“I left my country in 2009, driven by political tensions. I undertook a journey to Belgium, hoping to find a better life and protection.

Once I arrived here, I realised that life without papers is extremely difficult. I don't have legal status, which means I have to work in precarious jobs, often poorly paid. I do cleaning and construction work, but I'm often exploited and have no rights. Finding stable housing is a real challenge; I often live in shared flats, sometimes in unsanitary conditions. And now I'm looking for a squat because I can no longer pay. I've tried to regularise my situation by submitting several applications, but they were all rejected. This leaves me in a constant state of uncertainty. Psychologically, it's a heavy burden. I feel a deep sense of isolation and anxiety. I dream of finding a solution to live with dignity here and, above all, to be able to start a family in Belgium.”

40-year-old man from Guinea, interviewed in Brussels



MMC is a global network engaged in data collection, research, analysis, and policy and programmatic development on mixed migration, with regional hubs in Africa, Asia and the Pacific, Europe and Latin America, and a global team based across Copenhagen, Geneva and Brussels.



MMC is a leading source for independent and high-quality data, research, analysis and expertise. MMC aims to increase understanding of mixed migration, to positively impact global and regional migration policies, to inform evidence-based mixed migration responses for people on the move and to stimulate forward thinking in public and policy debates on mixed migration. MMC's overarching focus is on human rights and protection for all people on the move.



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