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# THE PANDEMIC IN THE TRENTO ASYLUM RECEPTION SYSTEM: SUBJECTIVITIES LOST WITHIN THE “HEALTH OF THE FACILITY”

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## ABSTRACT

### The Pandemic in the Trentino Asylum Reception System: Subjectivities Lost Within the “Health of the Facility”

This contribution results from research conducted during the first months of the COVID-19 pandemic. It explores how the restrictions imposed for safety reasons impacted the everyday routines of a group of asylum seekers and beneficiaries of protection hosted in the asylum reception system in the city of Trento, Italy. Drawing on the interviews, the authors enlighten how the “health of the facility” sometimes came at the expense of the health of the individual, reducing their sociability outside the reception facilities and, therefore, their opportunities to develop their paths toward independence.

**KEYWORDS:** asylum seekers and beneficiaries of protection, COVID-19 pandemic, reception system, independence, “health of the facility”

## IZVLEČEK

### Pandemija v sistemu za sprejem azilantov v Trentu. Subjektivnosti, izgubljene v »zdravju ustanove«

Prispevek je nastal na podlagi raziskave, opravljene v prvih mesecih epidemije bolezni Covid-19 v njem avtorice raziskujejo, kako so omejitve, sprejete iz varnostnih razlogov, vplivale na vsakodnevno življenje skupine prosilcev za azil in upravičencev do zaščite, ki bivajo v azilnem sprejemnem sistemu v italijanskem mestu Trento. S pomočjo intervjujev razkrivajo, kako se je »zdravje ustanove« včasih vzdrževalo na račun zdravja posameznikov – z omejevanjem njihovih socialnih stikov izven sprejemnih prostorov, s tem pa tudi njihovih možnosti za to, da bi se podali na pot samostojnosti.

**KLJUČNE BESEDE:** prosilci za azil in upravičenci do zaščite, pandemija bolezni Covid-19, sprejemni sistem, neodvisnost, »zdravje ustanove«

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## INTRODUCTION

As the pandemic spread, governments called on their populations to stay home. In the first weeks of the pandemic, the outside turned into a place of contagion and insecurity, while the inside—the home—began to be seen as a place of health and safety. While we know that this assumption does not correspond to everyone's experience, the majority of the population—or at least the population reflected in the dominant narrative—undeniably did its best to make it happen. However, what about those who could not have a home of their own? What happens when the inside is a place governed by strict rules that might make it difficult for people hosted in reception facilities to feel at home or safe? Would those people fit in the dominant narrative? Or rather, would they tell a different story? With these questions in mind, we decided—as social workers, activists, and researchers<sup>1</sup>—to listen to the voices of a group of asylum seekers and beneficiaries of protection who were living in reception facilities during the first phase of the pandemic. While different sectors of the population share collective and institutionalized living conditions, we decided to focus on their experiences because of their marginalized position in society. Indeed, a global emergency can exacerbate and accelerate situations that were already critical (Della Puppa & Perocco, 2021; Bozorgmehr et al., 2020; Cassidy, 2020; Mukumbang et al., 2020; Pastore, 2021; Sanò & Firouzi Tabar, 2021), such as that of the asylum reception system. Inside it, the pandemic has been treated as an emergency within an emergency, leading to the wider precarization of all actors involved (Pitzalis, 2020), also enacted through the reduction of supplied services and activities within and outside the facilities, which undermined the paths toward independence of the persons living in the system.

In this scenario, we examined the living conditions, everyday routines, and concerns of a group of asylum seekers and beneficiaries of protection who found themselves living during the first lockdown in Trento's various reception facilities. After a brief presentation of the research context and participants, the article discusses how, from the interviewees' perspective, the safety and health needs of the facility came at the expense of those of the individual. Secondly, the paper describes how, while restricted, asylum seekers and beneficiaries of protection faced relational, social, and economic losses which challenged their already difficult paths within the wider local society, incurring a further precarization of their everyday lives.

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1 Our thanks go to Sara Ballardini for her contribution in the interviews.

## RESEARCH CONTEXT AND PARTICIPANTS

The research was conducted in the city of Trento, the capital city of the homonymous autonomous province in the northeast of Italy. Although, due to the special legal status of the province, the local asylum reception system intertwines national, provincial, and municipal competences, it reflects the discretion and fragmentation typical of the entire national system (Marchetti, 2014; Colloca, 2017) as well as its inner ambivalence between assistance and control (Szczepanikova, 2013; Avallone, 2018; Acocella & Turchi, 2020). Also, because of these features, the working and housing trajectories of asylum seekers and beneficiaries of international protection, both inside and outside the reception, are marked by a series of obstacles, discriminations, and challenges (Dines & Rigo, 2016; D'Agostino, 2017; Pasqualetto & Perocco, 2020). The recent reforms have worsened this scenario. In particular, the cuts in services of Decree 113/2018 (Della Puppa et al., 2020; Firouzi Tabar, 2020; Filippi & Giliberti, 2021) had significant consequences on the paths toward independence (Boccagni et al., 2020), our interviewees included. Furthermore, these cuts have resulted in a growing relevance of the system of shelters for homeless people managed by the Municipality of Trento (Storato et al., 2021). These shelters, along with a network of informal reception facilities, have become a *de facto* part of the asylum reception system making crystal clear the marginalization of asylum seekers and beneficiaries of international protection in the city. Within this context and without any claim to provide a quantitatively representative analysis—which, however, is still scarce (Perocco, 2021; AA.VV., 2020) and probably hard to gain also at the national level (Pastore, 2021)—our investigation collected narratives which allowed us to partially grasp the experiences of those living within an asylum reception facility during the pandemic.

We interviewed sixteen asylum seekers and beneficiaries of protection—fifteen men and one woman—aged 25–35 who spent the lockdown in different collective facilities. Starting from the contacts that each of us as researchers, former social workers, and activists had within the reception system, we used a snowball sampling to collect voices from the different facilities that shape the Trentino asylum reception system. Half of the interviewees were living in the formal asylum reception system: seven in facilities that host more than fifty people and one in a small reception facility. Regarding the other half, five of the interviewees were hosted by the network of the informal reception facilities, one in a shelter for homeless people and one in a collective facility for medical rehabilitation. Eleven interviewees were from West Africa, one from North Africa, three from the Middle East, and one from Asia. The time the interviewees had spent in the city of Trento before the pandemic varied from a few months (only one) to more than a year. The interviews were carried out between May and June 2020 in online or face-to-face modes, in accordance with the anti-COVID measures. Italian was the language of most of the interviews, except for three conducted with the support of cultural mediators and one using English as

a vehicular language. The authors have thus translated the non-English interviews presented herein into English. All the names of the participants reported in the text are fictitious.

## EXPERIENCES OF “COLLECTIVE ISOLATION”: RULES, PITFALLS, AND REACTIONS TO FEEL SAFE

The global COVID-19 pandemic has been addressed through social distancing, assuming that people live in single-family dwellings in which they can isolate themselves to protect (from) the broader social community (Cassidy, 2020). Asylum seekers and beneficiaries of protection experienced the oxymoron of a “collective isolation” where the concern for their own health is overridden by the one for—what we called—the “health of the facility,” guaranteed through a reorganization of its spaces and times (Marabello, 2020). This new concern addressed asylum seekers and beneficiaries of protection who lived in the facility as a whole but not necessarily as individuals. Exploring the difficulties faced by interviewees in their attempt to self-isolate in a facility, we shed light on the tensions between the health needs of the individuals and those of the facility.

Living in a reception facility implied different and additional rules than those in force for the rest of the population (Filippi & Giliberti, 2021). The majority of interviewees justified this difference on the grounds that not following the rules could cause damage to all the inhabitants of the facility: “What made me worried is that in a big facility if a person [...] does not respect rules, it will hit everyone, not only this person” (Hassan).

While these rules were unknown outside the facility, these have been explained to us by interviewees. Ali told us that those living in a facility with a canteen service could not go to the supermarket. In contrast, where no canteen service was in place, they were allowed to go to supermarkets under specific rules. Mohammed reported: “They said we can go out only twice a week to go shopping.” Along the same line, Usman told us that “to go to the tobacco shop you have 15 minutes and to go to the supermarket you have 30 minutes. [...] Every week you can go out only once. If you’re late, you’re not allowed to go the following week. And they check your receipt on arrival.” Aziz also expresses the difficulty for him and his family in complying with the rules: “Especially at the beginning, we were obliged to go only to the supermarkets close to our reception center, we could not go to the low-cost ones [because too distant]. We had to write down the street of the supermarket, so we were obliged to go only to the nearby ones. This limitation was an economic problem for us. After some time, we were authorized to go to other supermarkets.”

Interviewees attached a great value to accessing reliable information, which enabled them to understand how to protect themselves and others. Given the specificity of the rules applied in the facility, the interviewees revealed that entrusted

figures—such as social workers—were considered the main source of information along with online news, which was not limited to the Italian ones but also included the news in their mother tongue or vehicular languages. How these rules were communicated represents the first element of friction between the individual and the facility. From the interviews, it emerged that there was not a uniform procedure to communicate rules and behavioral guidelines within the facilities during the pandemic. For instance, in one of the collective facilities, interviewees reported that regular meetings were organized and that information and rules were communicated, paying attention to the mother tongue of those present. In contrast, in another one, posters were the main tool. They were hung in the common spaces so that everybody could read them. As mentioned, none of the interviewees questioned the necessity of the rules. However, the majority pointed out that while responding to the collective need for clarity, how the rules were communicated did not meet the individuals' needs for understanding. This is especially evident with respect to the use of posters. As Abdou said, "All the information was in Italian, which was a bit difficult for me. And they were basically only written on paper, and you cannot ask questions to a paper." The few informative sessions posed a similar issue. Conducted either in Italian or English, the sessions excluded those who poorly mastered those vehicular languages.

Moreover, social workers had little role in conveying the information, whether written or oral. According to interviewees, social workers tended to merely repeat what was written on the posters without adding information or explanation even when it was needed. Samba said: "I am quite sure that they [social workers] do not explain to other people more than what they explain to me ... so I wonder how they managed to explain things to those that cannot understand the posters...I have never seen any social worker talking to them." Interviews revealed that sometimes even social workers had problems understanding the rules. As Zakaria reported, "He said, 'Sorry, I didn't even know it myself, they [the authorities] didn't explain these things very well.'" The lack of clarity concerning rules combined with absolute clarity concerning the interdependence between the health of the individual and that of the facility generated anxiety and distrust. Mohammed told us: "They put hand-sanitizing gel [...], some people use it, others not. In the dining room, I can see people who respect the rules and others who do not." The same feelings are traceable in the words of Leila, who had in mind the health not only of herself but also of her children: "The very fact that to get in and out of the facility we had to sign using the same pen...I didn't trust it. I thought, who touched the pen? Who touched the paper? [...] I always tried to wash my hands, especially the children. Since we live in a facility where there are people from all over the world—Pakistan, Iraq, Iran, and Africa—there are differences. So, I didn't trust them." While, to some extent, individuals tried to adopt a personal strategy to feel safer—Sidibe increased his own levels of protection, "I always wear a mask, also in my house. It is better." There have been cases where the very way in which the facility was organized clearly runs counter

to the health needs of the individuals hosted there. This is the case for Abdou and his mates, who were moved from a shelter for the homeless to an isolated place to perform quarantine. Once there, they discovered that the facility did not have adequate space to guarantee the physical distance. “There were nine people, six were positive, and there was a bathroom and only one door. You cannot quarantine in this way,” About said.

Another example of how the collective dimension can absorb the individual dimension is the access to welfare measures introduced to provide economic support for families, workers, and businesses affected by the emergency (Sanfelici, 2020). Although the measures target the entire population, the interviewed asylum seekers and beneficiaries of protection reported that they could not access the measures because they were living in a facility and thus already had access to services—such as shelter and cooked meals—provided by the asylum reception system. Sajad told us: “I requested the food bonus, but I received an email from my social worker [...] who told me ‘I am sorry, but your request had a negative reply because [...] there [in the facility] you eat lunch and dinner, and you pay nothing.’ But life is not only eating.” This example shows how asylum seekers and beneficiaries of protection were considered only in terms of their immediate needs and could not ask for more, thus blurring, once again, the lines between the individuals and the facility. Although the interviews show the anxiety, mistrust, and discouragement for the unequal treatments, our research has not identified cases where these resulted in collective claims. As well described by the words of Sidibe, the implementation of the “collective isolation” led to a loss of social interactions within the facility, so that each person had to deal with his or her own worries alone: “In the canteen, we are divided, and everyone eats at a table by himself [...] It’s not good to eat alone. The mind gets fixed, and this doesn’t help. I have many thoughts about the future. We don’t know when the virus will end, it seems to be under control, and we hope, inshallah, that it will end soon.” The lack of collective claims should be further investigated also in light of the awareness—reported by interviewees—that staying in a collective facility exposed them to a greater risk of contagion than the rest of the population.

## **PATHS TOWARD INDEPENDENCE STUCK IN A STRICTER “UNCHOSEN SOCIABILITY”**

The pandemic has significantly impacted the social relations and routines of individuals’ everyday lives. Prior to the outbreak of the COVID-19, interviewees used to go out of the facility to pursue their daily interests—to go to work, attend courses, and meet friends and fellows. Besides being necessary to reach economic and personal independence, these activities were another way to find greater wellbeing in actions and places other than the facility.

In the path of the asylum seekers and beneficiaries of protection toward independence, finding a job is an essential step. Therefore, it should be no surprise that most interviewees expressed serious concerns about how the pandemic would affect their capability to find a job and, therefore, to emancipate themselves from the asylum reception system. Most of the interviewees in March 2020 were looking for a job, but the pandemic deleted the possibility of visiting places, agencies, and persons who could help find one. As Bakary told us, the few interviews already settled have been canceled: "I had an appointment for a job interview on Thursday, but they closed everything that Thursday." Likewise, interviewees reported that most of the contracts had been interrupted or not renewed due to the pandemic, confirming the greater exposure of the migrant population to job loss (Perocco, 2021; Precipe, 2021; Quaranta et al., 2021). Zakaria told us: "Before the quarantine, I worked as a cultural mediator [...] with the quarantine. I worked 3 hours in two months." Along the same lines, Hussain shared with us his frustration: "All the things are closed, I send emails, but no one answers. They are still afraid of the virus, and the job is stuck." Among interviewees, frustration over job loss worsened because a job, however precarious—or however "little" as the interviewees labeled it—represented a legitimate reason for exiting the facility during the pandemic.

Among the interviewees were some students who faced difficulties due to the lack of adequate space and the constant presence of people. As reported by Lamin: "I study in the facility where I live. The facility's common areas are full of people, so I cannot study. I try to study in my room, but it's not so easy." Besides the shortage of physical spaces for studying, interviewees were confronted by the necessity to learn—in a short time—how to use the new online platforms for distance learning. In trying to cope with this new way of learning, interviewees also dealt with the absence of a stable internet connection and all the limitations of a lesson delivered remotely. As underlined by the words of Usman, somehow, the very motivation of interviewees to study was severely impaired by this new way of learning: "For me, it would be too difficult to have online lessons. I have a tablet, but there is no PC. I would like to study only if my teacher is close to me. In that way, it is better."

The loss of a job, even if precarious, and the impossibility to attend courses and Italian schools also meant the loss of the possibility of exiting the facility freely. The interviewees found themselves always more absorbed in the facility due to their reduced contact with the outside. Samba, who saliently expressed the relevance of the outside activities, told us: "Before, I knew what to do to help me live and not die inside here."

Moreover, they also lost access to external activities and goods—above all food—alternative to those provided by the asylum reception system. Interviewees perceived this alternative as essential for not becoming completely absorbed by the facility: "What I missed most is being able to do those things that are not really... regular" (Samba). The impossibility of having alternative meals rather than the ones offered by the canteen was identified by interviewees as one of the main negative

elements because, as Samba said: "Food [...] is an important thing, people always fight about it, because it is something that nourishes your body, no? And then you remember who you are [...] we have a weekly menu, so I see it, I decide the days when I eat [there] and the days when I don't, and then I go out and go to my friends for meals." Along the same line, Sidibe told us: "I don't know who is cooking. The food comes from outside. The food is not good, but you know the situation of the coronavirus, we have to adapt. To be honest, it's a very difficult situation."

The impossibility to exit the facility had a further consequence that, in the absence of family ties, interviewees attached a great value to the meetings with their fellows. However, those meetings were no longer possible due to the restrictions. Interviewees consider "being in presence" and the action of "meeting" as fundamental elements of their relations. These were built and maintained by sharing common habits and common places. Indeed, most of the interviewees were not used to planning meetings or having the telephone numbers of their fellows, as confirmed by Mohammed: "I have a lot of fellows that I meet around, but I don't call them on the phone. Usually, I go around to see them, but [during the lockdown] I was very lonely because I couldn't see anyone." Suddenly these moments of exchange faded with the lockdown. Practical impediments (such as the shortage of internet data) and the lack of interest in these online activities limited the use of technological tools and virtual meetings, which poorly replaced the action of "meeting." As Hassan told us, "We didn't have the internet, so we were very bored. And you know that if you are very bored, you can become depressed. I couldn't contact my friends [...] the Wi-Fi was too weak."

As the bond with the "unchosen sociability" of the facility became stricter, the paths toward independence of asylum seekers and beneficiaries of protection became more precarious due to the loss of those outside elements—above all social relations and job search—which motivated and sustained them. In the eyes of interviewees, they mainly see the lockdown as an impediment that delays their emancipation from the facility. The anxieties generated by this delay seeped out of Sajad's words: "I had the feeling that time was very long during these months. It is very difficult to stay three months in a room, like a prison. From the bed to the bathroom, from the bed to the canteen. There were no other activities." These anxieties were even louder in the voice of Leila, who told us, "I often question myself, and I am angry, why this coronavirus has arrived while I am in this facility." Indeed, the pandemic and the measures undertaken to counteract it led to a further precarization of asylum seekers and beneficiaries of protection, increasing their uncertainties and anxieties about the future.

## CONCLUSIONS

The article discusses how the outbreak of COVID-19 impacted the everyday routines and paths toward independence of asylum seekers and beneficiaries of protection living in the asylum reception system of Trento. Interviewees experienced the oxymoron of a “collective isolation,” where the individual’s health necessarily passed through the health of the facility. In consideration of this link, new rules and behaviors were established inside the collective space of the facility. Nevertheless, our research reveals that these new rules were far from clear and understandable to those for whom they were intended. This lack of clarity, combined with the awareness that staying in a collective facility exposed them more to the virus, generated anxiety and distrust among interviewees. Moreover, the interviewees reported how the “health of the facility” sometimes came at the expense of the health of the individuals. On the one hand, the interviewees’ right to move was restricted due to concerns for the facility’s safety. On the other, their right to access the welfare measures as individuals was denied due to their imposed belonging to the asylum reception system.

In the interviewees’ eyes, the measures imposed to contain the pandemic further challenged their already precarious and marginalized social position. The lockdown not only forced interviewees into a stricter “unchosen sociability” but also impoverished their social relations, drained by the lack of the action of “meeting.” Most of the interviewees interrupted their educational paths and were unable to find a job that would allow them to sustain their paths toward independence and emancipate themselves from the centrifugal and homologating force of the facility.

COVID-19 apparently reinforced the critical features of the asylum reception system: emergency, control, and temporariness. The measures to counter the pandemic were oriented more to control and prohibit than to empower and guarantee. This approach fueled the definitive temporariness (Rahola, 2003) of the living conditions of asylum seekers and beneficiaries of protection, who found their paths toward independence delayed by the pandemic. (Un)surprisingly, besides the individual attempts to avoid being completely absorbed by the facility, the impact of the pandemic on the asylum reception system did not seem to open to forms of collective claims.

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## POVZETEK

### PANDEMIJA V SISTEMU ZA SPREJEM AZILANTOV V TRENTU. SUBJEKTIVNOSTI, IZGUBLJENE V »ZDRAVJU USTANOVE«

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V prvih mesecih pandemije bolezni Covid-19 so se avtorice prispevka kot socialne delavke, aktivistke in raziskovalke odločile raziskati, kako so omejitve, uvedene iz varnostnih razlogov, vplivale na vsakodnevna življenja in prizadevanja za samostojnost skupine prosilcev za azil in upravičencev do zaščite v različnih sprejemnih centrih v italijanskem mestu Trento. Članek temelji na vrsti intervjujev, ki so jih avtorice leta 2020 opravile s petnajstimi moškimi in eno žensko iz afriških in azijskih držav, starimi med 25 in 35 let, ki so med prvo fazo pandemije bivali v centrih za sprejem azilantov v Trentu. Z raziskavo so med drugim ugotovile, da so intervjuvanci doživljali protislovno »kolektivno izolacijo«, v kateri je bilo zdrave posameznikov neizogibno pogojeno z zdravjem ustanove. Glede na to povezavo so bila v kolektivnem prostoru sprejemnih centrov vzpostavljena nova pravila in vedenja. Kljub temu pa njihova raziskava razkriva, da tistim, ki so jim bila nova pravila namenjena, ta še zdaleč niso bila jasna in razumljiva. Ta negotovost, skupaj z zavedanjem, da so z bivanjem v skupinskih prostorih bolj izpostavljeni virusu, je med intervjuvanci vzbujala tesnobo in nezaupanje, a kljub ti niso izražali skupinskih zahtev. Poleg tega se je po besedah intervjuvancev »zdravje ustanove« ohranjalo na račun zdravja posameznikov, hkrati pa so potrebe sprejemnih ustanov prevladale nad potrebami posameznikov. Intervjuvanci dejansko niso mogli zaprositi za posebno socialno pomoč, saj so že bili deležni storitev sprejemnega sistema (npr. kuhanih obrokov). V primerjavi z zunanjim svetom so bili intervjuvanci prisiljeni upoštevati strožje omejitve svobode gibanja, ali pa so se zaradi teh omejitev znašli v položaju »neželenih socialnih stikov«, s čimer so izgubili možnost aktivnega »srečevanja«, ki ga vidijo kot temeljni sestavni del odnosov s svojimi tovariši izven sprejemnih prostorov. Kot je povedala večina intervjuvancev, so morali prekiniti izobraževalne in zaposlitvene procese, ki so jim bili v pomoč pri osamosvajanju od centrifugalnih in homologacijskih silnic sprejemnih prostorov. V tem smislu se zdi, da so se s pandemijo koronavirusa še okrepile bistvene značilnosti sistema za sprejem azilantov, zaradi česar so slednji, skupaj z upravičenci do zaščite, postali še bolj ranljivi, njihova že tako negotova pot proti samostojnosti pa se je še upočasnila.