INFORMAL SETTLEMENTS
social marginality, obstacles to access to healthcare and basic needs for migrants, asylum seekers and refugees
SECOND EDITION
INTRODUCTION

This report is the follow up of the research contained in *Fuori campo - Asylum seekers and refugees in Italy: unofficial settlements and social marginalisation*. It is the result of constant monitoring activities carried out in 2016 and 2017 by way of repeated field visits and in collaboration with an extensive network of local associations.

The reception system for asylum seekers and refugees, expanding to reach just over 180,000 places as of 31 December 2017, continues to be based, for the most part, on extraordinary reception structures in which services aimed at social inclusion are limited.

There are pockets marginalization in urban and rural areas across Italy. The raise in forced evictions, combined with a lack of alternative housing solutions, result in the fragmentation of informal settlements, especially in urban contexts: migrants and refugees live in increasingly hidden locations in a state of growing fear and frustration, with progressively limited contact with local services, including healthcare.

Due to administrative barriers, and despite the laws in force, migrants and refugees in informal settlements, regardless of their legal status, have less and less opportunities to access medical treatment. Hospital emergency services are fast becoming the only gateway to the Italian National Health System.

In the last two years, more than twenty people have died attempting to cross the borders with France, Austria and Switzerland. Migrants suffer repeated border rejection, often accompanied by violence.

The number of people stranded at the borders and living in unofficial settlements is increasing, with limited access to basic needs and healthcare.

Throughout Italy, volunteers and activists are helping migrants excluded from the reception system, supporting them to access basic services and care. Opposition to their work has, in some cases, resulted in judicial proceedings against them.

In 2016 and 2017, Médecins Sans Frontières (MSF) strengthened its commitment to supporting migrants in unofficial settlements. In Como and Ventimiglia, a psychological first-aid programme was implemented for people in transit, together with a Women’s healthcare programme in Ventimiglia. In Rome, primary healthcare and psychological support was set up in the disused buildings where men, women and children live in disgraceful conditions.

In Bari and Torino, MSF has worked in buildings occupied by migrants and refugees, seeking to overcome their marginalisation by facilitating access to the National Health Service. MSF volunteers work alongside professionals in these activities, raising awareness on the lack of access to healthcare that marginalised migrants and refugees experience.

MSF saw Italian citizens living in informal settlements – as well as in self-organised occupations – in Rome, as marginalised as their migrant neighbours. This is not an isolated case in Italy.

The report confirms the estimate indicated in the first edition of *Fuori Campo*: there are at least 10,000 people excluded from the reception system, including holders and applicants of international and humanitarian protection, with limited or no access to basic needs and medical care. The distribution of such settlements is fragmented and widespread throughout the country.
RECEPTION SYSTEM AND BORDERS

After the peaks of 2016, 2017 saw an overall decrease in the number of landings - predominantly because of containement measures implemented following the agreement between Italy and Libya - and a parallel increase in asylum applications. The full implementation of the "hotspot approach" resulted in the forced registration of almost all of the migrants arriving in Italy. This contained the secondary movements towards countries further North.

By 31 December 2017, the reception system had 183,681 places, a slight increase compared to 2016. Despite the government attempts to promote the model of the Protection System for Refugees and Asylum Seekers (SPRAR), managed by the Municipalities, the number of asylum seekers and refugees in the SPRAR network stood at 31,270 on the same date, just 17% of the total.

The chronic shortage of places in the reception centres, is due not only to the increasing numbers of asylum applications, but also to the low levels of turnover in the centres due to the time required for assessing the applications. Despite the increase in Territorial Commissions in recent years, the time elapsing between first applying for asylum and being notified of the result averages 307 days. In the case of denial of protection and the lodging of an appeal, the time spent in the centres can increase to a further 10 months (the average time required to achieve an outcome after a first appeal). To speed the asylum process up, the government has adopted a series of measures, such as establishing migration specialised sections within each ordinary court, and abolishing the appeals system. This has led to doubts about whether such lowering of the standards of legal protection for asylum seekers is constitutional, and has provoked criticism from associations in the sector.

Other factors are putting pressure on the reception system. First is the increasing number of asylum seekers in other countries being sent back to Italy under the Dublin Regulation. Second is the failure of the relocation procedure decided by the EU Council in September 2015 to transfer a number of asylum seekers from Italy and Greece to other member States.

Current legislation envisages that a person gains access to the reception system as soon as they apply for asylum. However, in practice (for migrants who independently present themselves at police stations), access to the system is postponed until the asylum seekers formalise their application by completing the C3 Form. This results in applicants waiting for weeks - and sometimes months - without any form of assistance. This has been seen, for example, in police stations near large reception centres such as in Gorizia, Bari, Crotone and Caltanissetta. EU Directive 2013/33 establishes the possibility to revoke the asylum process up, the government has
seeker the right to a place in a reception centre, but only as a last resort. In Italy, this provision, set out in Legislative Decree no. 142/2015, is adopted without any degree of graduality and proportionality, especially for those staying at the CAS. Here, it is often used as a sanction for people who break centre rules, from minor disciplinary infractions to violent behaviour. These applicants are left to find alternative accommodation, often ending up in the unofficial settlements deprived of any form of assistance.

Systematic checks are carried out along the borders with Austria, France and Switzerland, on migrants in transit who are then collectively and summarily forced to return to Italy, on the basis of bilateral cooperation agreements. This contravenes the Schengen agreements on freedom of movement that allow checks at internal borders only under exceptional and temporary circumstances, upon risks to public order or the security of a Member State. Such practices are even imposed on the most vulnerable groups, including unaccompanied minors, single women with children, and pregnant women, which results in increased numbers of migrants stranded in the border areas. When they are not given accommodation into government facilities, they are forced to live in unofficial settlements outdoors, and with limited access to basic provisions such as shelter, food, sanitation, and healthcare. Amongst them are migrants who have just landed a few days previously, trying to reach another Member State where they can apply for protection despite the fact that they were registered in ‘hotspots’ under the Dublin Regulation; there are also asylum seekers whose reception has been withdrawn; migrants leaving the centres with international protection denied, having appealed to the rejection or not; people who hold international or humanitarian protection but are unable to achieve a full social inclusion; all waiting to cross a border that is increasingly hard to penetrate.

Since the summer of 2016, people are being forced to leave the cities of Como and Ventimiglia and forcibly relocated to the ‘hotspot’ of Taranto. The official reasons for this are to ease pressure on the borders; prevent problems of public order and avoid high concentrations of migrants giving rise to public health and sanitary emergencies. Of the 14,576 people who have been accommodated in the hotspot of Taranto between March and October 2016, only 5,048 came from landings. The rest are foreigners found within Italy’s borders and taken to the centre to be identified. After they arrive at Taranto, most migrants return to the northern borders, feeding a nonsensical circular flow.
SOCIAL MARGINALIZATION

In 2017, at least 100,000 people left government reception centres for asylum seekers and refugees. Lacking a fully achieved social integration, they try to cross borders - less permeable than in the past - or end up in pockets of marginality across Italy, in large cities (such as Rome), or in the ghettos of the South (such as Puglia and Calabria regions), where the population ebbs and flows in time with the peaks of seasonal agricultural work. This continuous flow of people includes a number of fixed points (such as Rome, the province of Caserta, the ghettos in Capitanata and Calabria) and, on a rotating basis, seasonal work areas, to which the border areas have been added within the last year (if you cannot pass the border, you return into the flux).

In October 2017 the National Integration Plan for holders of international protection was issued for the 2017-2018 two-year period. The Plan contains general guidelines and fails to allocate specific resources, merely referring to the possibility of drawing on European funds. The Plan recommends that the Regions and Municipalities include in their emergency housing plans “means of supporting protection holders exiting from the reception centres, and verifying the possibility of including such in public housing and lease support programmes” as well as “programmes to support the exit from unofficial settlements in urban centres, also by identifying suitable disused public buildings to be allocated to social housing.”

In anticipation of SPRAR becoming the only system of second reception, the Plan states that CAS must homogenise “their own services and activities aimed at social integration with those offered in the SPRAR system.” This is a contradiction of the provisions of the Ministry of the Interior issued just a few months previously in its tender specifications for the supply of goods and services in the same centres, where the only activities envisaged for social inclusion (in addition to Italian language courses) are a generic orientation to local public services and “the organisation of leisure time through recreational, sporting and cultural activities.”

Regarding housing conditions in seasonal agricultural work areas, the Plan recommends the full application of the so-called Law Against “Caporalato”1. The management of these critical areas follows certain directives that are common to all national territories such as the appointment of Extraordinary Commissioners with a focus on the fight against crime and labour exploitation and on housing, the setting up of large-scale temporary camps (using tents or containers).

A tent camp was set up in S. Ferdinando (RC) on 18 August 2017, with up to 1,000 beds for seasonal fruit pickers. The facility was intended to house residents of a nearby unofficial camp that had been destroyed by a fire, and where the sanitary conditions were very precarious1. In December, more than 2,000 workers arrived in the area, forced to lodge again in the old, unofficial settlement of plastic, zinc and cardboard shacks.

In Campobello di Mazara (TR) the seasonal olive harvest peaks between October and November. In 2017 the local institutions, coordinated by the Prefecture, turned over a former oil mill, Fontane d’Oro, for housing 250 seasonal workers. The structure has insufficient toilets with no hot water for showers. Meanwhile, in the same area (in Erbe Bianche), an unofficial settlement is present. In September it accommodates 300 people, and by October around 1,400. Many have come from CAS, women and minors among them. The Municipality installs four water points. Twenty chemical toilets are delivered, but regular maintenance is not carried out and after a short while the toilets are not fit to be used. Workers install their own showers with a water heating system. On 27 October, Fontane d’Oro opens for migrants with a regular work contract but nobody leaves the Erbe Bianche informal camp.

From October, an MSF team supports a Red Cross OPD in Erbe Bianche, through donation of medicines; runs psychosocial support activities1 and health and hygiene promotion activities. At the beginning of November, it distributed 1,000 blankets and 1,000 hygiene kits. Refugees and asylum seekers are included amongst the recipients of the Guidelines for the fight against serious adult marginalisation in Italy1. This document states the need for guaranteed access to basic services, including healthcare, referring to international humanitarian law and agreements signed by Italy1.

As for the integration Plan, the Regions and Municipalities are responsible for such interventions2. Particular recommendations include: i) the elimination of all obstacles to the registration of the residence2; ii) overcoming the barriers to accessing the so-called “low threshold services” (soup kitchens, bathrooms, overnight emergency reception, essential medical assistance); iii) the “housing first” approach, which designates stable reception centres as the starting point to setting off on the path of social integration; iv) strengthening outreach services; v) providing linguistic and cultural mediators in essential public services, including in the “low threshold” and outreach services.

In the municipality of Castel Vottorno, 25,000 people are registered at the civil registry, including 4,000 foreign citizens. An estimated 10,000 people in the area are unregistered, the overwhelming majority of whom are from sub-Saharan Africa, in conditions of widespread irregularity regarding working and housing contracts. Their living conditions are often not legally registered and very run-down. Amongst them are people who have left the CAS across Italy, including increasing numbers of young women from Nigeria.

A group of local civil society organisations3 presented a “Plan for Castel Vottorno” to the governing bodies, which recommends granting humanitarian protection to 2,000 people – which is now underway thanks to the establishment of a Special Section of the Territorial Commission in Caserta – and a programme to facilitate social inclusion for 1,000 people over a period of 18 months, delivering literacy, vocational courses, job placement and housing through registration, the legalisation of leases and the maintenance of houses. The Plan proposes to use measures set out in recent national legislation to combat poverty, such as the REI subsidy4.

1. This estimate is calculated by comparing the slight increase in places in the reception system in 2017 compared to the previous year (just over 7,000) and the number of asylum applications presented in the same year (530,180).
2. Law no. 10/2016.
4. Law no. 18/2014.
5. Set up after the clashes of zona in Rosarno. The Municipality of S. Ferdinando rented an industrial warehouse to increase the availability of places for another 250 people.

References:

1. "Law Against "Caporalato"4. The full application of the so-called "Law Against "Caporalato"4. The Plan proposes to use measures set out in recent national legislation to combat poverty, such as the REI subsidy4.

6. Coming From Senegal (25%), Tunisia (17%), Gambia (10%), Sudan (6%), Mali (5%), Nigeria (5%).

7. Open from the end of October until 30 November. The API (NRT local branch) of Trapani had refused to increase the opening hours of the nearby emergency medical service.

8. In collaboration with CLEDU (Clinica per i Diritti Umano - Clinic for Human Rights) in Palermo.


11. With the reform of Chapter V of the Constitution (Constitutional Law no. 3/2005), social policies fall to the jurisdiction of the Regions, the only entities now appointed to the legislation and planning of services, even in matters of extreme poverty. Only matters of “determination of the essential levels of provisions pertaining to civil and social rights that must be guaranteed throughout the national territory” remained under the domain of the State.


13. Another example of good practice is the self-managed social area accommodation is found in the private market and rivocated with the involvement of the beneficiaries of the programmes. This practice provides a number of benefits, including reduction of rental costs, the possibility of increasing income for the people concerned, and the creation of training sites where people are reacquainted to the workforce.

14. From last August, the Government has appointed a special commissioner to hosting programme interventions aimed at the integration of migrants and the environmental restoration of the area.

15. “Comitato per il Centro Sociale” Volunteer Association and Information Desk for Migrants and Refugees “Ospiti di Cittadinanza per tutti”, Managing Body of the municipality of Caserta SPRAR project, in collaboration with Caritas and the “Movimento Migranti a Rifugio”.

Over the last two years, the numbers of applicants and holders of international and humanitarian protection living in occupied buildings has increased. The majority of these people have never entered the institutional reception system or have been expelled from it in the absence of proper social inclusion. Occupations are self-managed by the migrants and refugees, mostly those where residents come from the same countries of origin, others are managed by right to housing movements; this generally concerns so-called “mixed occupations”, where migrants and refugees from different areas - sub-Saharan Africa, Latin America, Europe - coexist together with a significant component of Italians. Many occupations that began outside the law, were later legalised, with the involvement of private entities and institutions (primarily the Municipalities and Regions). Compared to the government reception system for asylum seekers and refugees, the occupations promote a model based on self-management and on giving residents an opportunity to remain in safety until they have achieved effective social, housing and work independence. With regards to healthcare, limitations were imposed under Law no. 80/2014 (Article 3) and confirmed under Law no. 48/2017: living in occupied buildings does not give people the opportunity to get a formal residence and thus to get registered with the National Health Services. This is particularly relevant in those cities where the municipality does not provide with factitious residence - the one provided to homeless people - or where it is particularly hard to get it. In Turin in 2014, a building in Via Madonna de la Salette was occupied by a group of refugees who left the reception centres under the North Africa Emergency Plan. In 2015, Pastore Migranti, Caritas and Congregazione dei Missionari di Nostra Signora de La Salette – as owners of the property – established an association with the aim of legalising the occupation and redeveloping the property, using funds from the Diocese of Turin and the Compagnia di San Paolo, transforming it into a model of self-managed social housing, specifically aimed at vulnerable people. The building was renovated involving the same inhabitants. Currently, 80 men live in the building, half of whom have a residency permit (“permesso di soggiorno”) for humanitarian reasons, and 20% for subsidiary protection. In December 2015, the Rumori Sinistrî and No Border associations signed an agreement with the Municipality of Rimini to manage a reception facility in the context of the Winter contingency plan. The building, renamed Casa Don Milani, hosted Italians and foreign migrants. The two charities raised concerns about the reception model represented by a donation open only at night and only during the winter. They decided to keep the centre open 24 hours a day and started activities aimed at the guests autonomy, without imposing them any temporal limitation to their permanence in the centre. The agreement expired in April 2016, but the associations continued to manage the centre together with the guests in complete autonomy, even financially. Recently, a deal was reached with the Municipality to regularise the occupation of the building and to extend the activities until April 2018. Negotiations are still ongoing to find a more stable solution internationally. Since it opened, Casa Don Gallo has welcomed 71 people, 16 of them from Somalia. Today, 44 people live in the centre – 39 men and five women (both Italians and non-Italians). Three people have come from the centres of North Africa Emergency Programme (ENA), 24 from CAS. Some are holders of a form of international or humanitarian protection; others are appealing, either the first or second degree, against denial of protection decisions. For others, reception in the CAS was revoked before their asylum application procedures were concluded. Four people have a recognised condition of disability, with 7 suffering from psychiatric disorders or psychological distress. In Bari, since 2009, about 60 refugees (mostly from Eritrea) have lived in a former high school owned by the Municipality. Around forty are employed in a precarious or intermitent way in restaurants, domestic work or as caretakers, with others being seasonal agricultural workers or refugees awaiting the renewal of their residency permits. Sometimes Italian citizens in difficulty are also living there. The building needs urgent maintenance work. In May 2014, a memorandum of understanding was signed between the residents, the Municipality of Bari, the Fuglia Region and other entities that set out a number of commitments including: the restoration of the property, with the involvement of the refugees living there, in construction works; the Municipality of Bari to ensure the safety of the building and grant the property to the residents according to the principle of self-management, and the Fuglia Region to provide the resources needed to finance the project.

Three years after it was signed, the agreement has yet to be fulfilled. The occupation of the former Institute of Canossiane in Cosenza, promoted by the Prendocasa committee, dates back to October 2013. This was the first “mixed” residence in Cosenza: amongst the inhabitants are around 20 Italians and 35 men from sub-Saharan Africa, who are holders of international and humanitarian protection. Twenty places are reserved for migrants awaiting the renewal of their residency permit. Today, the settlement is legalised, as is the former Don Milani primary school in the district of Portapiana, owned by the Municipality, for which a self-restoration project is planned. Living alongside Italian citizens are North Africans and ten holders of international protection; altogether a population of 30 people. The most recent occupations supported by the Prendocasa committee is a building in Via Savoia (from November 2016) and the Hotel Centrale (from December 2017). In these occupied premises Italians coexist with foreign migrants, amongst whom – in ever greater numbers – are applicants and holders of international and humanitarian protection. At the Hotel Centrale alone, 35 people from sub-Saharan Africa share the spaces with 12 asylum seekers who are appealing against the denial of protection, in both the first and second instances. Running alongside these housing projects in Cosenza are activities that aim to promote integration in their neighbourhoods, starting with children.
FORCED EVICTIONS

Legislative Decree no. 261/2000 grants authority to the mayor “in relation to the urban area” to intervene in emergencies or interventions aimed at overcoming situations of serious negligence or degradation of the territory, of the environment and of cultural heritage, or of detriment to cleanliness and urban liveability.” Such authority, reaffirmed and strengthened by Law no. 48/2017, is increasingly used to break up unofficial settlements where migrants and refugees excluded from the institutional reception system live, using more or less forced evictions, almost never arranging them alongside the resident population. This forces them to disperse into increasingly peripheral areas and ever more hidden locations, with more limited access to social and healthcare services, with the increasingly remote possibility of those services providing for the needs of this vulnerable population. On 6 December 2016, following an order by the mayor of Palermo (CZ) citing reasons of hygiene and sanitation, the residence degli Ulivi was evicted, which, since the closure of the ENA programme in 2013 had been hosting about 200 refugees from sub-Saharan Africa. The city police, supported by a huge deployment of law enforcement, but no municipal social workers. The City did not offer any alternative housing options apart from temporary solutions for a handful of families. Amongst the refugees were at least 30 minors and a number of pregnant women. 1 March 2017 saw the cleaning of the Gran Ghetto in Rignano Garganico (FG), a shanty town that was home to more than 2,000 migrants and refugees in the summer, during the peak agricultural season. A year previously, the governor of Puglia Region had submitted a complaint to Barì’s District Anti-Mafia Directorate on reduction in slavery in reference to the inhabitants of the Ghetto. This was followed by a Decree authorising the seizure of the land on which the ghetto stood, and an eviction order. About 200 migrants refused to leave the area. During the night of 3 March, a fire broke out amongst the shacks. Mamadou Konate and Nouhou Doumbia, 22 and 26 years old respectively, and both of Malian origin, died in the blaze. On 12 July 2017, about 50 Somali refugees, some of whom had been in Italy for over 10 years, were evicted from the ex Meyer warehouses, owned by the Municipality of Florence. The mayor, in his eviction order, claimed the property was uninhabitable and unsafe (in fact, it was in an extremely poor condition). No stable housing solution was proposed for the refugees who, supported by Movimento di Lotta per la Casa, went on to occupy another building, in Via Baraçca. This occupation is ongoing. On 11 January 2017, a fire destroyed the shed attached to the former Aiazzio furniture factory in Sesto Fiorentino, where a hundred Somali refugees had been camping since December 2014. All Muse died in the blaze, whilst trying to recover paperwork relating to family reunification. The lack of housing solutions for the refugees affected by this fire forced them to occupy a building owned by Jesuit Priests. On 29 November, the building was cleared following an agreement between the Municipality, local Police, Jesuit Fathers, Caritas and the inhabitants of the building themselves. A minority were transferred into the SPRAR network; the single women into housing for vulnerable groups; others were helped into private rented accommodation. The police issued 30 people with travel documents to move to other EU countries, whilst six chose the option for assisted repatriation to Somalia. On 11 September, attended by 10,000 people, the eviction operations of 24th August, the Prosecutor asked for two and a half years in prison. In a Circular published on 1 September 2017, the Minister of the Interior states that “The protection of nuclear families in situations of economic and social distress is a priority condition for the definition of procedures regarding the execution of eviction operations”. Public Prosecutor’s Office following a complaint by the owner, Cassa Depositi e Prestiti. The migrants remain on the streets. The indignation caused by the eviction and the way it was carried out led to a public demonstration, on 9 September, attended by 10,000 people. After this, the Municipality committed to finding a new space to house the activities previously run in the centre. In December, an indictment was requested for 11 activists who had tried to oppose the eviction, with accusations of resistance against public officials and personal injuries. On two occasions, on 8 and 12 June, a shed on Via di Vannina in the Tor Cervara area in Rome was evacuated. Around 500 people, including minors, elderly people, pregnant women and the disabled were living in the shed. The police intervened with force, using armoured vehicles. The Municipality was not present. On 21 July, an MSF team visited an adjoining shed where some of the people had moved after the eviction. MSF doctors found seven people with trauma, all – according to the statements of the people involved – due to the nature of the eviction. Amongst these, four people had sought treatment at nearby hospitals on the previous days: one with a fracture of the orbital wall and the nasal septum; one with a bruise to the head and back and a wound on the left arm; one with a bruised leg over a previous fracture of the tibia; the last one with bruising to the metatarsal-phalangeal joint of the foot. Since 2013, in a building in Piazza Indipendenza in Rome, there have been at least 800 refugees, almost all of Eritrean and Ethiopian origin. Amongst these are many women and children. On 19 August 2017, when police cleared the building, 200 people set up a makeshift camp in the square. The Municipality only offered temporary housing solutions to women and minors, without any protection for nuclear families. On 24 August, the police intervened again to clear the square, this time using water hydrants. An MSF team provided assistance to 15 injured people, most of them women. Five needed to be sent to hospital. In the following days, the inhabitants of the building were again dispersed from other parts of the city. In mid-November, the authorities began to allow people to recover the belongings that had been kept inside the evacuated building. In January 2018, for three refugees accused of resistance to a public officials during the eviction operations of 26th August, the Prosecutor asked for two and a half years in prison. In a Circular published on 1 September 2017, the Minister of the Interior states that “The protection of nuclear families in situations of economic and social distress is a priority condition for the definition of procedures regarding the execution of eviction operations”. I slept on the street for four months in Cagliari. Finally, police gave us a document and told us that we could use it to catch a ferry. I applied for asylum in Florence. After the fire in Sesto Fiorentino warehouse, I ended up in this occupied building. I do not know how [it happened]. I am really tired. 5. Article 1 of Law no. 148/2017 reads: “[The prefect defined] the use of force actions for the execution of the necessary interventions, according to criteria of priority that, even taking into consideration the protection of nuclear families in situations of economic and social hardship, takes account of the situation of public order and safety in the territorial areas concerned, of the possible risks for public health and safety, of the rights of the owners of the building.” Regarding the rights of the owners, it is to be highlighted that on 26/8/2017 issued by the Court of Rome in November 2017 gave the owner the possibility of the eviction responsibility in case of any damage caused to the buildings by the occupants in case of lack of eviction. 6. Analysis on Spatial Policies, (2017).
OBSTACLES TO ACCESS THE NATIONAL HEALTH SERVICE

The residence registration continues to be the biggest administrative barrier to registering for the National Health Service for applicants and holders of international and humanitarian protection. Following recent government measures, residence registration is revoked with immediate effect upon leaving the reception centres. Declaring residence at occupied premises is not allowed, whilst the issuance of a fictitious residence, as the homeless are allowed to do, does not occur in any Municipality and would involve complex procedures even if it were to. Moreover, for migrants and refugees forced to move across Italy because of job insecurity – for example, those employed in seasonal agricultural work – if their temporary workplace does not tally with their registered residence or domicile, it is impossible for them to use the National Health Service. The result is a growing recourse to the Temporarily Present Foreigner (STP) regime, which was originally set up for undocumented migrants. Increasingly, the most common way to access the National Health Service is via hospital emergency departments. In some cities, people who want to submit an asylum application at a police station must present a medical certificate. This increases the waiting time for entry into the reception system, condemning the applicants to extended periods of time without any assistance. Notably, increasingly more asylum seekers use the STP code after filing their asylum request (C5 form). This happens mainly to people hosted in the first reception centres and in the extraordinary reception centres. The provision of medical services in CAS, even the small scale ones, set out in recent Ministry of the Interior Decree’s, is another factor in limiting asylum seekers the inclusion in National Practitioners, considering they should be assigned personal general practitioners as for the Italian citizens. More and more primary healthcare services for migrants without a residency permit are delegated to private humanitarian organizations, in general, these services do not issue a STP code when they are treating a patient (who is forced to obtain it from the health registry before returning to the service for prescriptions). In addition, they cannot issue prescriptions under the local healthcare authority, and therefore are forced to provide prescriptions for drugs or specialised services at full price. The result, again, is a separate healthcare system for migrants.

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Obstacles to Access to the National Health Service

The National Health Service is provided by the regions of Italy, with or without health authorities. The most significant barriers include:

1. **Registration to the NHS in the absence of residence registration:**
   - In Piedmont, the NHS is available to residents under the STP regime, whereas in other regions (such as Milan), the NHS is not available to residents under the STP regime. This results in a growing recourse to the STP regime, which was originally set up for undocumented migrants.
   - In Lombardy, the NHS is available to residents under the STP regime, but residents must have a tax code.
   - In Lazio, the NHS is available to residents under the STP regime, but residents must have a tax code.
   - In FVG, the NHS is available to residents under the STP regime, but residents must have a tax code.

2. **Fictitious residence NHS during permit renewal:**
   - In Piedmont, the NHS is available to residents under the STP regime, but residents must have a tax code.
   - In Lombardy, the NHS is available to residents under the STP regime, but residents must have a tax code.
   - In Lazio, the NHS is available to residents under the STP regime, but residents must have a tax code.
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3. **Exemption from co-pay for undocumented migrants:**
   - In Piedmont, the NHS is available to residents under the STP regime, but residents must have a tax code.
   - In Lombardy, the NHS is available to residents under the STP regime, but residents must have a tax code.
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   - In Lazio, the NHS is available to residents under the STP regime, but residents must have a tax code.
   - In FVG, the NHS is available to residents under the STP regime, but residents must have a tax code.

5. **Exemption from co-pay for undocumented children:**
   - In Piedmont, the NHS is available to residents under the STP regime, but residents must have a tax code.
   - In Lombardy, the NHS is available to residents under the STP regime, but residents must have a tax code.
   - In Lazio, the NHS is available to residents under the STP regime, but residents must have a tax code.
   - In FVG, the NHS is available to residents under the STP regime, but residents must have a tax code.

6. **Exemption from co-pay for undocumented women:**
   - In Piedmont, the NHS is available to residents under the STP regime, but residents must have a tax code.
   - In Lombardy, the NHS is available to residents under the STP regime, but residents must have a tax code.
   - In Lazio, the NHS is available to residents under the STP regime, but residents must have a tax code.
   - In FVG, the NHS is available to residents under the STP regime, but residents must have a tax code.

7. **Exemption from co-pay for undocumented children and women:**
   - In Piedmont, the NHS is available to residents under the STP regime, but residents must have a tax code.
   - In Lombardy, the NHS is available to residents under the STP regime, but residents must have a tax code.
   - In Lazio, the NHS is available to residents under the STP regime, but residents must have a tax code.
   - In FVG, the NHS is available to residents under the STP regime, but residents must have a tax code.
THE BORDERS AT COMO AND VENTIMIGLIA

Of the 287 adults that MSF interviewed in Ventimiglia between 28 August and 14 September 2017, 172 (60%) were interviewed by Italian or French men in uniform. In total, over 1,000 people remained stranded at the borders between Italy and France for several days and sometimes weeks, with the area close to the two borders, in formal reception centres or in unofficial open-air settlements, with no or limited access to basic needs. To reduce such concentrations of people, the practice of forcibly transferring migrants from the areas of Como and Ventimiglia to the hotspot at San Giovanni in Comune, Italy, in particular to Taranto, has been established. Of the same sample interviewed in Ventimiglia, 62 adults (22%) declared that they had suffered at least one act of violence committed by Italian or French men in uniform. Closure of the border in the summer of 2017, with peaks of 400 men, women and children in the area, after cleaning it up with the elements, food, washing and toilet facilities – was limited, and provided almost exclusively by local volunteers. Health problems included diarrhoea, coughs and colds, vomiting, fever, malnutrition, injuries, cuts and burns, and wounds. A service to support the integration of children – is not in place.

On 4 February 2017, MSF staff in Ventimiglia assisted a woman who was over 36-weeks pregnant. She claimed to have been forced to cross the border alone along with 120 others, and subjected to verbal abuse by the French police. The women were forced to return to Italy after an entire day without eating or drinking – one had evident difficulty in walking.

MSF Coordinador in Ventimiglia

**MSF intervention**

In October 2016, MSF launched programmes in Como, and subsequently in Ventimiglia, to support migrants andullo, with the aim of facilitating access to local healthcare services, providing psychological first aid (PFA) and – in Ventimiglia – assisting with women’s reproductive health. This latter intervention was carried out between November 2016 and July 2017 in an outpatient set-up inside the Gianchette parish church, where the following activities were carried out: general obstetric screening; pregnancy testing; obstetric ultrasounds; pre-and post-natal care; treatment of simple infections; information on the prevention of sexual and reproductive health, family planning, pregnancy and prevention of mother-to-child transmission of viral diseases; and the referral of victims of violence or trafficking to competent services and authorities.

In the first seven months of 2017, Gianchette church hosted more than 1,060 women, with 226 (21%) being under the age of 15 years. Of the 425 women consulted by MSF, 79 (19%) were pregnant. To give them access to better healthcare, a memorandum of understanding was signed with the Ventimiglia women clinic, providing patients with gynaecological examinations, ultrasounds, routine examinations and check of the results within a maximum of two days, in consideration of the short time of women’s permanence in the town. All these services are provided through the STP regime – which would have allowed the station. All throughout Como, the STP regime – which would have allowed the railway authorities to sheltered facilities included in the Winter Contingency Plan. The Municipal Council of Como, in order to prevent access to the car park once and for all, installed metal grids mounted on concrete Jersey barriers and, above the grids, rolls of barbed wire.

THE BORDERS AT COMO AND VENTIMIGLIA

In August, the new municipal council sealed off the only water point available to those staying at the car park. In December, in San Giovanni in Comune, July and September 2016, up to 300 migrants, mainly from Eritrea, were gathered in the park in front of the station, too close to the tracks, as it was impossible to cross the border. Access to basic needs – shelter from the elements, food, washing and toilet facilities – was limited, and provided almost exclusively by local volunteers. Health problems included diarrhoea, coughs and colds, vomiting, fever, malnutrition, injuries, cuts and burns, and wounds. A service to support the integration of children – is not in place.

**STP regime**

Since July 2017, underage migrants are also allowed in the Red Cross camp (available places: 54). In the same period, a service to support the migrants in Ventimiglia, particularly those excluded from the Red Cross centre, was set up. The space – called “Eufemia” – offers social and legal assistance and other basic services such as the distribution of clothing and shoes, mobile phone charging and the use of computers. More than 100 people rely on these services daily, which are opposed by the institutions because they consider them an incentive for migrants to stay in the city without using the Red Cross centre. Throughout 2017, the number of migrants at the mouth of the Roja river, living in inhumane conditions, has rarely been less than 50 people with peaks of 400, women and children. On 4 August, all inhabitants of the Gianchette parish church were transferred to the Red Cross camp, in a letter to the Prefecture of Imperia, MSF expressed concerns about the unsafe conditions in the camp, in particular for the most vulnerable, women and minors, who were left unprotected in mixed and unsanitary living spaces. In Como, between July and September 2016, up to 300 migrants, mainly from Eritrea, were gathered in the park in front of the station, too close to the tracks, as it was impossible to cross the border. Access to basic needs – shelter from the elements, food, washing and toilet facilities – was limited, and provided almost exclusively by local volunteers. Health problems included diarrhoea, coughs and colds, vomiting, fever, malnutrition, injuries, cuts and burns, and wounds. A service to support the integration of children – is not in place.

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11. Many arrived from Milan or upon being rejected by the Swiss police at the border, remaining on the street because they reached the Red Cross centre after closing time.
12. The church has been the subject of numerous inspections by the police and the Local Health Authority.
13. Peaks of more than 100 people were recorded in July 2017.
15. PFA – Psychological First Aid – consists of: providing information to facilitate orientation to the area and access to health care and basic services; evaluating the general psychological conditions of the person, achieving early detection of symptoms of mental distress and providing support through individual and group sessions; identifying vulnerable people and directing them to the specific territorial services (victims of sexual violence/trafficking, patients in psychiatric distress), providing emotional support and psycho-education in relation to traumas suffered in countries of origin and during the journey to Italy.
16. Often caused by the critical hygienic conditions during the trip.

### PFA in Como and Ventimiglia Jan. Aug. 2017

<table>
<thead>
<tr>
<th>Symptom</th>
<th>Ventimiglia</th>
<th>Como</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anxiety symptoms</td>
<td>20%</td>
<td>30%</td>
</tr>
<tr>
<td>Anxiety symptoms</td>
<td>10%</td>
<td>20%</td>
</tr>
<tr>
<td>Anxiety symptoms</td>
<td>5%</td>
<td>10%</td>
</tr>
<tr>
<td>Symptomatic problems</td>
<td>1%</td>
<td>2%</td>
</tr>
<tr>
<td>Sexual violence with pregnancy</td>
<td>1%</td>
<td></td>
</tr>
<tr>
<td>Other symptoms</td>
<td>1%</td>
<td>1%</td>
</tr>
<tr>
<td>Sexual transmitted infections</td>
<td>3%</td>
<td>5%</td>
</tr>
<tr>
<td>Urinary tract infections</td>
<td>5%</td>
<td>3%</td>
</tr>
<tr>
<td>Vaginitis</td>
<td>5%</td>
<td>3%</td>
</tr>
<tr>
<td>Pregnancy</td>
<td>5%</td>
<td>1%</td>
</tr>
<tr>
<td>Good health</td>
<td>50%</td>
<td>50%</td>
</tr>
<tr>
<td>Women’s health consultations</td>
<td>30%</td>
<td>30%</td>
</tr>
</tbody>
</table>

THE DEADLY BORDER

Since the end of 2016, at least 23 people have died trying to cross the border to reach France, Switzerland or Austria.

Fifteen alone died on the frontier between Italy and France. Allalhe-Ahmed Bachire, a 17-year-old from Sudan, drowned in June 2017 whilst cleaning his shoes in the waters of the Roja, the same river in which another migrant had lost his life seven months previously, whose body has never been found. Many have lost their lives along the so-called death path, used in the past by fleeing Jews, partisans and smugglers. This is what happened to two nameless youths, found in March 2016 along the Grimaldi trail.

In September, another young man of Malian origin, Yousuf tried to cross the border hidden in a freight train to reach his brother in Germany, and an unknown man and woman were crushed whilst the truck they were travelling in was being unloaded. In October 2017, the corpse of Abbas, a 19-year-old boy from the Gambia, was found at Bolzano station. According to a police investigation, this young man was walking on the tracks heading south, waiting for a train to climb on to when he was struck. On Christmas Eve, another migrant died in Brenner on the roof of a freight car heading for Austria. The convoy had departed from Verona station.
As a result of borders being closed, the number of migrants who remain stranded in Bolzano is growing. These are migrants trying to leave for another European State immediately after disembarking; coming from the Balkan route; exiting reception centres throughout Italy at the end of the asylum process or with a decree revoking reception; and coming from other EU states, in particular from Austria and Germany where their request for protection was denied, with the intention of submitting a new asylum application in Italy. Migrants without valid residency permits or travel documents who are heading to Austria by train, are forced by the Italian police to alight before permits or travel documents who are issued by the Province of Bolzano in September 2016. According to this provision, reception is to be denied to all those who have been in other foreign states, or other Italian regions, where there was an opportunity to seek asylum. Hence, reception can be granted only when there are serious reasons (such as health), but only for a maximum of three days. In the case of nuclear families, adult males are excluded from reception. All this is on the basis of the arbitrary rule that migrants should apply for asylum in the first safe destination they arrive in.

On 8 October, Abdullah – a 13-year-old Kurdish-Iraqi boy affected by muscular dystrophy – died in Bolzano. Together with his family, consisting of his parents and three brothers aged six, 10 and 12 years old, Abdullah had come from Sweden one week previously, following the rejection of their request for international protection. At Bolzano police station, the family had expressed their intention to present an asylum request on 3 October, but reception was denied under the Critelli Circular. After spending their nights in the park near the train station, in the atrium of the Evangelical church and in hotel rooms paid for by volunteers, Abdullah fell from his wheelchair, resulting in multiple fractures to the lower limbs. He died two days later from complications.

Migrants excluded from reception live in extremely precarious conditions in Bolzano, sleeping along the banks of the river and under bridges. In order to preserve the decorum of the city, municipal workers continually turn them out from where they are resting, requisitioning their personal effects, and often enclosing the areas with grating to prevent their return.

Migrants are assisted by volunteer groups, such as Antenne Migranti and SOS Bozen. MSF supports them with donations of hygiene kits, sleeping bags and blankets that are distributed to people on the street, in the hope that they will not be lost as a result of the requisitions.

Following the closure of the Brenner border, and because of the Critelli circular, in the Autonomous Province of Trento, there has been an increase in the number of asylum seekers coming autonomously and by land to the city. Migrants cannot access the reception system until they are able to formalise their request for international protection. The Police in Trento require migrants to have a formal domicile in order to proceed with the formalisation of their application. This limits access to the asylum procedure. The number of those who are unable to enter the reception system today is around 70 people. The situation is also critical due to the scarcity of places in low-threshold dormitories and to the new municipal regulation limiting the right of access to these places to only 30 days a year for people who are not resident in the Province (for those who are resident the period is renewable for a further 30 days in winter). This not only has forced asylum seekers to live in more and more precarious places, but also hampered the formalisation of their international protection application, since the address of the dormitories is normally used also to formalise the same application.

From 2015 I was given accommodation for about one year at the Ex Lernay reception centre and for three months in the Ex Alimarket centre. Here, they accused me of having been involved in a fight and I lost the right to reception. But it was not true. I have been living on the streets for five months. At first, I slept on the banks of the river. The police came along and threw my tent into the water, then cut down all the bushes along the banks so that no-one could sleep there anymore. I moved under a bridge. Again, the police came along and kicked us out, closing the area with a grate. I have lived under this other bridge for three months. In the morning, I woke up and tidy everything up then I go to work. I collect apples, I have a regular work contract.

I slept on the street near the Caritas soup kitchen. They came along and chased everyone away, then fenced off the area with a grate. I would never have left Libya. But there were two friends of mine who were killed in cold blood in a detention centre, when bread was being handed out. I was also there – they hit me in the face with the butt of a rifle. Do you see my incisors are loose? I reckon that the day they open the borders, no black person will remain in Italy.

H., Pakistan, Bolzano

M., Senegal, Bolzano

1. Pakistani, Afghans, Syrians, Iraqis.
2. Coming mostly from sub-Saharan Africa.
3. At Brenner station, up to July 2017, there was an average of between 10 to 20 people per day. Non-systematic checks are carried out on trains departing from Verona station to Brenner by mixed patrols made up of German, Austrian and Italian police officers. Since November, the trilateral police collaboration has also extended to checks of freight trains.
4. They are mostly migrants from sub-Saharan Africa leaving the reception centres, but also Somalis, Pakistanis, Afghans, Bangladeshis who have just arrived in Italy via a number of routes and who plan to continue towards northern Europe. Many minors remain invisible to the institutions; others, due to the lack of places in the reception centres, are placed in adult facilities or simply remain on the street.
5. The so-called ‘out-of-quota’: 1,650 people have been assigned to Alto Adige according to the system of ‘ministerial quotas’ and accommodated in the CAS centres in June 2017. The Province has so far refused to join the SIPAR system.
6. In Alto Adige, the Province manages the reception of applicants and holders of international protection, in accordance with the Government Commissioner.
7. In the national laws, there is no geographical or temporal constraint regarding the place in which to apply for asylum and to ask for a reception centre place. Any regional or provincial provision that defines a place as being without such being disciplined by a national law is completely devoid of any legal value. In the first half of 2017, 50% of those out-of-quota comprised families. Reception was often guaranteed with temporary accommodation in hotels for vulnerable people, such as single women, single women with underage children and people with physical/psychological vulnerability. Many families refused to stay in a hotel because they would have to live in an environment where the husbands being denied a place. Several families housed in hotels had members with significant health problems (paralyses, autism) and psychological problems (traumas, depression). Formalisation of the request for protection at the police station in Bolzano can take up to two months.
9. By way of example, on 20 and 21 November, two evictions took place in different locations (bridges) in the city that led to the removal of blankets, sleeping bags, backpacks, mattresses and kitchen utensils of four Iraqi asylum seekers, four Afghan and seven Pakistani applicants.

THE BRENNER ROUTE AND TRENTINO ALTO ADIGE

OUT OF SIGHT
**Friuli-Venezia Giulia**

Throughout 2016 and 2017, the arrival of asylum seekers - mainly Pakistanis from other EU Member States and a smaller number of people from the Balkan Route continued across the region of Friuli-Venezia Giulia. Formalisation of an asylum application, along with simultaneous access to the reception system, is not immediate, and people are forced to stay on the streets for weeks, without a dignified shelter and with limited access to primary services. This is a deliberate policy by the municipal administration, to prevent what they call a “pull factor” and to deter other unwanted arrivals. Amongst the migrants living outside of reception facilities, the number of people leaving the centres at the end of the asylum procedure is on the rise, whether they are in possession of a residence permit or not. This is also true for those whose reception has been revoked (4%), migrants who are renewing their residency permit, a procedure that requires an average waiting time of one month in Udine (7%). Monitoring was undertaken by the Ospiti in Arrivo association of Udine.

4. The same organization runs regularly distributions in Gorizia and Pordenone.
5. Throughout the project, MSF accommodated 500 asylum seekers overall - in collaboration with the Italian Red Cross and Local Health Authority - providing medical treatment to around 800 people.
6. The same geographical origin and the same legal status as those excluded from reception in Gorizia.

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**Out of Sight**

I arrived in Italy after a year-long journey. As soon as I reached Udine, I broke my arm. I went to the police station in Gorizia to present my asylum application on 4 September 2017. From there, they sent me to the Monti barracks for a medical certificate. When I returned to the police station with the certificate, they gave me a new appointment for 6 November. Showing them the cast on my arm and repeating that, in such a state, I could not be examined by the doctor, all that time proved to be useless.

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**Access to asylum procedure, Pordenone**

- Police station: intention to submit asylum request
- Monti Barracks: medical examination + vaccines
- Police station: fingerprinting index finger
- Police station: fingerprinting other fingers
- Police station: C3 filling
- Monti Barracks: reception

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**In Pordenone, there has been a constant presence of more than fifty people living outside of the reception system since autumn 2016**. They are forced to wait up to 60 days before being able to formalise their asylum request, due to a procedure where even a mandatory medical screening contributes to lengthening time spent on the street.

In April 2017, an unofficial settlement located in an underground car park, unofficially called “Bronx”, was evicted. In May, the local Red Cross proposed the creation of a dormitory with 24 beds in the industrial area. Although the project would not result in any costs for the municipal administration, the latter opposed it. In September, people out of the reception system moved to an abandoned industrial warehouse, with rubble for a floor.

The municipality, which cannot intervene directly due to it being a private building, requested the owner to immediately make the shed safe, resulting in the entrances of the shed being walled shut.

The applicants slept in ditches in front of the Monti barracks, under the Crescenzia theatre, on the stairs of the fire escape of the sports hall, subject to perpetual harassment from private vigilantes, who asked the municipality who evicted them forcibly, night and day, seizing personal effects, including sleeping bags donated by MSF, which were taken away and never returned. The volunteers themselves are subject to continuous attacks, even by local citizens, being publicly defined as traffickers and accused of incentivising new arrivals with their support activities.

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1. At the end of November 2017, 466 asylum seekers and refugees were hosted in Trieste (50 in the SPRAR); 67 in Udine (49 in the SPRAR); 21 in Gorizia (corresponding to 0.89% of the resident population, zero in the SPRAR); 40 in Pordenone (0.79% of the resident population, 6 in the SPRAR).
2. In November, the mayor of Gorizia, Rodolfo Ziberna, in referring to the supportive action of the volunteers, “As long as it is known that in Gorizia, there are those who feed everyone outside the regulations of structured reception every day, it is clear that mere and more will continue to come here.” See https://www.avvenire.it/attualita/pagine/gorizia-ilprefetto-chiude-la-galleria-della-vergogna.
3. In November, around 70 people were registered, all men aged between 20-30 years of age, Pakistani and – to a lesser but increasing extent – Gambian and Ghanaian origin. These are refugees at the end of the reception period (8%); asylum seekers whose reception has been revoked (4%); migrants who are renewing their residency permit, a procedure that requires an average waiting time of one month in Udine (7%). Monitoring was undertaken by the Ospiti in Arrivo association of Udine.
4. The same organization runs regularly distributions in Gorizia and Pordenone.
5. Throughout the project, MSF accommodated 500 asylum seekers overall - in collaboration with the Italian Red Cross and Local Health Authority - providing medical treatment to around 800 people.
6. The same geographical origin and the same legal status as those excluded from reception in Gorizia.
In August 2016, around thirty people from Pakistan, mostly waiting to access the asylum process, were evicted from Turin’s Stura park and transferred to the Settimo Torinese first reception centre. They had been camping in the bushes on the banks of the river inside makeshift shelters, without any assistance, for months. It was a similar settlement, in terms of number, nationality and type of legal status of migrants, to the one present the year previously in the archaeological park of Porta Palatina, near the Palazzo Reale. To the unofficial settlements of Via Giordano Bruno, Via Madonna de la Salette, Via Bologna (of Sudanese refugees) and Corso Chieri (of Somali residents) some of the residents of the MOI, and the Refugee and Migrant Solidarity Committee based there, oppose the general approach of the project. They are particularly concerned about the temporary nature - six to twelve months - of both work placement and housing, already experienced in the past institutional assistance programmes and never resulted in a stable integration into Italian society. Faced with a crisis in the labour market, and particularly lack of permanent jobs, the Committee instead proposes investing in stable low-cost housing solutions, community housing, and salvaging unused public properties, all with strong institutional support and coordination. That is the model already successfully tested in the occupation in Via Madonna de la Salette: self-restoration and permanent use without time limitations for inhabitants who contribute to living expenses and give up their places as soon as they are fully independent.

**MSF’s activities in the Ex MOI**

Since September 2016, MSF has been working in the MOI, alongside about twenty volunteers from the local Turin group, coordinated by a project manager. The general objective is to promote residents’ access to local public healthcare services through:

- on-site information desk about services, regulations and administrative procedures concerning access to the National Health Service;
- outreach information activities in the main gathering places of the MOI and door-to-door in private rooms;
- accompanying vulnerable people to administrative offices and healthcare facilities;
- health and hygiene promotion activities (among the main topics, proper use of public healthcare services, vaccinations, women's and children's health), through focus groups.

Some inhabitants of the MOI, after a period of training, are now supporting MSF volunteers as linguistic facilitators and cultural mediators in the programme’s activities.

From January 1 to 30 November 2017, a total of 218 people – mainly from sub-Saharan Africa (Mali, Nigeria, Ghana) and Somalia – received support from MSF, including nine minors and 32 women (15%). Of the slightly less than 90% of users in possession of a regular residency permit upon first access, only 39.4% were registered in the National Health Service and only 18.4% were assigned to a family doctor. In the same period, 236 people accessed the information desk, and 141 people were accompanied to local services.

In November, an agreement was reached between MSF and the Local Health Authority of the City of Turin, to allow linguistic facilitators and cultural mediators to operate in the Local Health Authority services with strong institutional support and coordination. That is the model already successfully tested in the occupation in Via Madonna de la Salette: self-restoration and permanent use without time limitations for inhabitants who contribute to living expenses and give up their places as soon as they are fully independent.

**Table: ORIENTATION OF RESIDENT POPULATION TO TERRITORIAL SERVICES BY MSF JAN.-NOV. 2017**

<table>
<thead>
<tr>
<th>Service</th>
<th>Numbers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Municipality registration office</td>
<td>100</td>
</tr>
<tr>
<td>NHS administrative offices</td>
<td>120</td>
</tr>
<tr>
<td>Local tax office</td>
<td>90</td>
</tr>
<tr>
<td>Hospitals (including Emergency Unit)</td>
<td>70</td>
</tr>
<tr>
<td>GPs</td>
<td>50</td>
</tr>
<tr>
<td>Secondary healthcare consultations</td>
<td>40</td>
</tr>
<tr>
<td>Woman clinics</td>
<td>30</td>
</tr>
<tr>
<td>Infectious Disease OPD</td>
<td>20</td>
</tr>
<tr>
<td>Vaccinations</td>
<td>15</td>
</tr>
<tr>
<td>SHP OPD (&quot;18&quot;)</td>
<td>10</td>
</tr>
<tr>
<td>Other</td>
<td>50</td>
</tr>
</tbody>
</table>

**Note:** The original acronym refers to the Mercato Ortofrutticolo all’Ingrosso – the Wholesale Fruit and Vegetable Market.

**Sources:**

2. According to the team in charge of carrying out the project, in June 2017 there were 245 people living at the MOI, 40 of whom were women. Judging from MSF direct observation and a census carried out in 2015 by the "Comitato di Solidarietà Rifugiati e Migranti” association which indicated the number of people present as being 1,200, the team figure appears to be an underestimation.
3. The original acronym refers to the Mercato Ortofrutticolo all’Ingrosso – the Wholesale Fruit and Vegetable Market.
4. For four months, renewable, at shipyards outside Piedmont, with six months housing support (€50); in addition, work placements in the metropolitan area of Turin (€60).
5. Twelve months in the metropolitan area of Turin in premises owned by the project partners and managed by social housing associations and cooperatives (€68), in addition, provided with housing in the first two renovated buildings (€60).
6. The main sponsor is the Compagnia di San Paolo.
7. Assisted by volunteers from the National Civil Service.
9. MSF funds only will be used for the implementation of the agreement.
OUT OF SIGHT

ROME

In Rome, thousands of asylum seekers and refugees are excluded from institutional reception centres. As a result, they live on pavements, in abandoned and unsafe warehouses, in public and private occupied buildings. Despite of the mayor calling for more limits to the number of asylum seekers sent by the government\(^1\), the city hosts about 3,000 fewer people in its institutional reception centres than the 11,000 allocated to it by the State-Regional agreement\(^2\). Migrants in transit

In June 2015, the Municipality of Rome announced plans for an ad-hoc centre in the FerrHotell on Via Masaniello to cope with the increase in arrivals of migrants in transit from Southern Italy to other European States. However, the former hotel, which extends over 1,000 square metres and was made available by the State Railways, has not yet been opened\(^3\).

After Via Cupa was evicted in September 2016, and after around twenty more forced evictions, the volunteers of the group “Baobab Experience”\(^4\) in April 2017 set up an informal camp in support of the migrant in transit in a square near Tiburtina train station, nicknamed Piazzale Madia\(^5\). Tents, food, clothes, legal and social assistance and healthcare, are all provided in the camp, thanks to the collaboration of a network of organisations and the solidarity of private citizens. According to volunteers’ estimates, more than 70,000 people have been assisted by Baobab Experience since activities began\(^6\). Currently, an average of between 80 and 100 migrants are staying in the square, with peaks in the summer months of 150 people present every day. Amongst the most prominent nationalities are Eritreans (75%), Sudanese, Somalis and Iraqis. In the last two years, Baobab Experience has provided legal guidance to migrants – mostly Eritreans – with the right to relocation to another EU Member State, compensating for the lack of information received by people in the first reception centres immediately after arrival in Italy. Access to the relocation programme – and to the asylum process more generally – was hampered by a series of administrative barriers established by Rome’s Police Headquarters including: a limit of 20 appointments per day for the submission of applications; the request for a domicile through a declaration from a private person or by a reception centre; the request for a passport or a declaration of loss of the same; and, in order to request relocation, the presentation of a medical certificate of “suitability for community life”\(^7\).

The number of “Dubililated” migrants (those asylum seekers being transferred to Italy from another EU Member State under the Dublin Regulation and for which there is no automatic and immediate access to the institutional reception system) who are being helped in the camp is increasing. Also rising is the number of refugees who have left reception centres due to the expiration of their terms, holders of forms of international or humanitarian protection in the absence of effective social inclusion\(^8\).

Unofficial settlements in Tor Cervara

The chronic lack of refuge places and forced evictions in the absence of alternative housing solutions are resulting in the multiplication of spontaneous unofficial settlements, in disused buildings far from city centres, where invisibility is accompanied by deplorable living conditions, where men, women and children cannot access the most basic needs. This is the case for many settlements in the area of Tor Cervara (Tiburtina), where hundreds of migrants and refugees live in abandoned buildings, disused factories and warehouses. They live without water, electricity and gas, often in rat-infested buildings surrounded by illegal landfill sites. In November 2017, MSF initiated an operation with a mobile unit consisting of a doctor, a psychologist and a cultural mediator\(^9\). During the first six weeks of activity, until the end of 2017, 194 consultations were made (39 women, 29 minors) in four settlements. The population is mostly of sub-Saharan origin (about 64%), having arrived in Italy in the last two years. Many are applicants or holders of international or humanitarian protection, some having appealed against the denial of the protection. In one of the sites visited, Italian citizens were also found amongst the residents.

The majority of medical problems detected – respiratory, dermatological, musculoskeletal, gastrointestinal - were linked to living conditions in deeply unhealthy and insanitary sites. The incidence of mental health related problems was also marked. These are the outcomes of traumatic experiences and violence suffered in countries of origin and during transit, with secondary traumatisation due to people’s current living conditions and marginalisation from society.

Organized occupations

In Rome, more than 100 occupations have been recorded. At least 600 asylum seekers and holders of international or humanitarian protection live in settlements linked to three different movements for the right to housing, equal to about 20% of the total number of occupants\(^10\). In the last five years, the settlements have mitigated the lack of places in the reception system for asylum seekers and refugees. They also represent the only alternative to the shameful

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in Africa, you think this is a good place to come, but once you are here, you would like to go back. When you do not eat for four days, it seems like you are going crazy. I have been here for three years, waiting for my appeal result. I slept by a train station when I arrived in Rome. Then some fellow countrymen brought me here. We are all suffering in this place. I respect the Italian people because they saved me from the sea. But now I would like to say, "Hey, I’m here, do something". Sometimes, I think it would be better to have drowned rather than suffer in this way.

I. I., Nigeria, Via di Vannina
conditions of the unofficial settlements described above. About 400 people, including around 100 asylum seekers or protection holders (20 from the Horn of Africa, 70 from sub-Saharan Africa), live in the Santa Croce in Gerusalemme building, occupied in 2012. Amongst the residents there are Italians. Activities within the building include, in addition to a legal assistance desk and Italian courses for migrants: carpentry and screen printing workshops and theatre courses in collaboration with schools in the neighbourhood. Currently ongoing is a temporary refuge project—from three to 12 months—exclusively for asylum seekers and refugees (currently 12 in all) to access specific social integration pathways, such as vocational training courses. Of the 300 occupants of the Via delle Province building (occupied since 2012), just under 100 are asylum seekers and protection holders. Together with Palazzo Selam and Palazzo Naznet—the two buildings where refugees from Eritrea and the rest of the Horn of Africa have historically settled, and whose populations have risen further after the evacuation of Piazza Indipendenza in August 2017—the building is included in the list of sites to be cleared as a priority under Resolution no. 50/2016 of the former Extraordinary Commission for Rome. Living in Palazzo Sudan, in Via Scorticatubo, are a hundred Sudanese refugees—all men—who came from another informal settlement, the Hotel Africa near Tiburtina station about 10 years ago. Over the years, the building has been included in various programmes financed by public entities and managed by private cooperatives. Once the programmes and funding were exhausted, the refugees remained in the building under complete self-management and without any form of intervention by public institutions. In the last few months, the gas supply has been cut off and the electricity supply reduced. The Regional Decision no. 110 (15/03/2016) allows people “living in occupied building by December 2017” to apply for public housing. However, the provision was revoked by the aforementioned Decision no. 50/2016. In 2017, the network of associations known as “Romacommunity” formulated a number of proposals to deal with the critical issues related to the reception system in the capital. Two of the measures were the recovery and enhancement of public housing for social use, and the development of projects aimed at the effective autonomy of refugees, through the search for accessible rents and shared housing, via a strengthened role of guidance and coordination by local authorities.

When we arrived, we saw one of the residents walking around the building with his arms flailing uncontrollably, tearing his clothes off. He said he was frightened by the presence of a snake inside his chest and was looking for an object to kill it. He even tried to strangle himself. We sat him down and called an ambulance. MSF field coordinator

FICTITIOUS RESIDENCE REGISTRATION Rome

REGENCY REGISTRATION OFFICE: tax code requested

in possession

SOCIAL ASSISTANTS: domicile requested

TAX OFFICE: residence requested

domicile in different urban area

procedure starts again

domicile in same urban area

RESIDENCE REGISTRATION OFFICE: residence request

REGENCY REGISTRATION OFFICE: residence released

POLICE HEADQUARTERS: residence requested

Obstacles to accessing medical care: the problem of residence

Asylum seekers and protection holders excluded from the government centres have difficulty getting the residence registration, a necessary condition for enrolment in the National Health Service. In the event that they live in occupied buildings, the Law no. 80/2014 impedes exercising residence in such places. As of last March, the municipal administration decided to issue by itself fictitious residence, with Via Modesta Valente to be used for homeless people including migrants present in unofficial settlements. From the information gathered by the responsible offices of districts four and five (those with the highest concentration of unofficial settlements for asylum seekers and refugees), it is clear that the application of this resolution remains broadly discretionary and not homogeneous. The main differences concern not only the timing for the issuance of the residence, but also the methods of access and the list of documents requested. In District four access occurs via TuPassi, an online booking platform. This procedure creates an obstacle to access, because it requires a tax code that many migrants do not have. Certain tax offices illegitimately request that residence must be proved in order to issue a tax code, creating a spiral from which it is difficult to escape. District five has not yet implemented the TuPassi system, so access is easier. However, the registry office requires a passport as a necessary document for the issuance of residence, a request that hinders asylum seekers and holders of international and humanitarian protection. In both Districts, before an appointment with the registry offices, a fact-finding interview is scheduled with social workers to verify that the place of actual residence of those requesting the fictitious residence is the territory of the districts. Finally, for the residence registration, it is necessary to show a valid residency permit. Recently, Rome’s Police demanded proof of residence for the renewal of a residency permit, which generates a situation in which the migrants bounce between the Town Hall and the Police Headquarters without being able to obtain either of the two documents.
One brother of mine died in prison in 1996. I run away and arrived in Italy in 2007 together with another brother. I am a refugee. I have been given accommodation in several reception centers, in Rome, in Lecce province, and now I am living here. It is not easy for us. My brother is not young anymore, and has some eye problems, but he is a good musician: he is self-taught.

C., Turchia, Via S. Croce in Gerusalemme, Rome
PUGLIA

The Gran Ghetto of Rignano Garganico was emptied in March 2017, but by August of the same year the number of people had risen to 600, and in September the numbers doubled again. Hundreds of caravans have replaced the camp made of scrap material, and the sanitary conditions have worsened in comparison to the old ghetto, where at least there was water each day, transported by tanker trucks. Most of the roughly 2,000 inhabitants of the ghetto spilled out into the informal settlement in Borgo Mezzanine (along the old airport runway) close to the government first reception centre, with a general deterioration of humanitarian conditions. Access to medical care is practically non-existent. In Borgo Mezzanine there is no emergency medical service. All migrants – even those not holding a valid residency permit – should, under regional law, be entitled to a family doctor. However, they are unable to access medical care due to the lack of information about laws regulating access to care, language barriers and difficulties in travelling (a lack of means of transport, no money). The only way to access healthcare is through the emergency department at the nearest hospital, – men and women – without water or electricity, in the heart of the city. Some accepted a transfer to the new multi-functional centre Casa delle Culture. In view of the maximum period of stay in this centre (three months, usually extended to six), there is a high risk that the refugees will return to the Ferrhotel again, if not to the streets. On 20 April 2016 refugees staying in the tents of the Ex Set were transferred to a low-threshold reception centre called Villa ATA. The transfer involved 25 people, compared to almost 200 in the tent city at the time of its closure. All the others were dispersed throughout the territory. In the first half of 2017, the Municipality of Bari recorded 500 homeless people, 5% of whom were migrants. Of the 1,610 requests for help received by the Emergency Social Intervention office in the first half of 2017, 66% concerned migrants.

2. 4,000 in summer, according to estimates by the CGIL of Foggia.
3. The camp was opened – late – in August 2017 and closed the following month.
4. Cf. the deliberation of the Regional Council no. 504 of 15 June 2017 and no. 1351 of 19 November 2017. In the absence of squaddisti and sewage collectors, the camp will be serviced by tanker trucks and/or accumulation tanks.
5. The facility can provide accommodation to 25 people.
6. At least one case of a person returning to the Ferrhotel has already been documented.
7. This guarantees urgent interventions for all areas of social emergency (family, minors, the elderly, homeless, migrants, female victims of violence, etc.). The service is available 24 hours a day.
8. Cf. Municipality resolution no. 747 of 17.11.2017. In addition to the Casa delle Culture, the municipal reception system currently includes Andromeda night reception centre (low-threshold intervention, 40 places); Sole a Luna social housing for adults in difficulty (second reception, 10 places); five Community houses, residential and semi-residential (with municipal funds) Red Cross night reception centre (62 places). The number of places has doubled in the last year, also providing shelters for families. Cf. http://www.lavoro.gov.it/temi-e-priorita/poverta-ed-esclusione-sociale/focal-reddito-di-inclusione-re/documents/Bibliociclo-Comune-Bari-4-10-2017.pdf.
9. The Municipality’s funds ranges from €15.50 per person per day for the semi-residential low-threshold night-time reception service, to €15.00 for residential services.

Out of Sight

When I saw the rail police officers, I asked them to help my 5-year-old daughter and my wife who was seven months pregnant. The agents gave us hot chocolate and a thousand people, then to another with more than a thousand people [the first reception centre in Bari-Palese], I thought that, as refugees, and given my wife’s condition and with such a small child, we would have had the right to a different arrangement.

H., Pakistan, Bari

With the closing of the tent city, I found myself on the street for months, until the day of the accident, when I was on my bicycle and was hit by a car, in an underpass in the city. I was hospitalised, with damage to the spine. When they discharged me, I was back on the street. Now I am in a centre run by the City. But still just for a limited time. On the positive side, my request for asylum has been re-examined and I now have a regular residency permit.

L., Gambia, Bari

When I saw the police, I told them to help my 5-year-old daughter and my wife who was seven months pregnant. The agents gave us hot chocolate and called social services. They took us first to a centre for the homeless, then to another with more than 1,700 people [the first reception centre in Bari-Palese], I thought that, as refugees, and given my wife’s condition and with such a small child, we would have had the right to a different arrangement.
CIVIL SOCIETY AND CRIMINALISATION OF SOLIDARITY

In recent years, civil society organisations, volunteers and activists have mobilised in solidarity with migrants, offering assistance and promoting an alternative management model entirely different to the emergency and security based government’s approach. Ensuring access to essential needs, regardless of the legal status of the migrants in a vulnerable position, is the top priority in this model. These organisations have often faced political pressure and in some cases, activists have been persecuted by the law.

In 2002, Brussels approved the so-called Facilitation Directive – implemented in Italy with Article 12 of the Law on Immigration which punishes those who assist the transit or stay of undocumented migrants in the territory of a Member State. In Italy, the facilitation of irregular immigration is punished with five years’ imprisonment and a fine of 15,000 euros for each migrant transported. The European Directive contains a humanitarian and financial clause, to protect those who help undocumented migrants for humanitarian reasons rather than for profit. The existence of a wide margin of interpretation in the hands of EU Member States in the implementation of the clauses hinders humanitarian actors’ activities, as underlined in the European Parliament’s LIBE Commission report1. The European Commission itself underlined the collateral risk of “criminalising humanitarian assistance” in the application of the directive.

Between France and Italy, activists were persecuted for helping migrants to cross the border or to assist those stranded there. One such person is Felix Croft, a French activist arrested near Ventimiglia in July 2016 whilst driving with a Sudanese family in his car. Prosecutors requested that he be sentenced to three years and four months imprisonment. However, the Court of Imperia acquitted him in April 2017, concluding that his action amounts to a humanitarian act and “does not constitute a crime”. In France, many activists in Val Roja have been subjected to similar processes. Amongst them is the Italian fascinat Perott, tried by the Court of Nice in November 2016 for “favouring the illegal entry of eight migrants onto French territory”. Her story came to an end in May 2017: the judges in Nice, whilst rejecting the request for a conviction of eight months in prison, sentenced the activist to a fine of 1,000 euros.

In June 2016, seven volunteers from the Ospiti in Arrivo association in Udine were investigated for assisting migrants sheltering in abandoned buildings. They were accused of unlawful occupation and aiding irregular migration for profit. Using a broad interpretation of the financial clause, the prosecution accused the association of making a profit through using the ‘cinque per mille’ pre-tax donations chosen each year through the Italian tax return system for the contested activities. Two years of investigations concluded in February 2017 with a dismissal for all volunteers.

In addition to judicial appeals, the use of administrative measures is growing in many cities to discourage and, in some cases, move the most active volunteers away. Even before the Minniti-Orlando Law2 legitimised the extensive use of this instrument, in Como and Ventimiglia some activists were forcefully expelled from the cities. This provision has a strong impact on the personal life of those to whom it is applied: although it can be appealed, the ban must be respected until the end of the trial, as the appeal process does not expedite the order. The main victims were activists in the No-Border network, accused of having participated in demonstrations in support of migrants, or of organizing protests against forced transfers to hotspots in the regions of Southern Italy, in particular that of Taranto. In July 2017, the Regional Administrative Court of Liguera ruled such charges to be illegitimate and cancelled the measures, in particular the compulsory expulsion order for a duration of three years from Ventimiglia and other neighbouring municipalities. The Como activists are still awaiting for the final decision on their cases. The Minniti-Orlando Law strengthens the power of mayors to ensure urban safety and decorum, ultimately legitimising a practice already in place. In the summer 2015, the mayor of Alghero prohibited entry into his municipality for non-EU citizens without a medical certificate.

In September 2015, the mayor of Padua denied migrants access to public parks, while in November 2016 the mayor of Trieste prohibited sleeping or camping out on the streets. In March 2017, three French activists were reported for violating the orders of the mayor of Ventimiglia, which had prohibited the distribution of food to migrants in the city. The order was withdrawn in April, following numerous protests.

Whatever form it takes – be it an accusation of aiding irregular immigration, or damage to urban decorum and security, we are witnessing the birth of the “crime of solidarity”. Besides the individual consequences for the volunteers and activists involved, the criminalisation of civil society places humanitarian action in a bad light and delegitimises it. Those who act to ensure the rights, and satisfy the primary humanitarian needs of migrants, are suspected of doing so for personal gain or with the aim of subverting the established order. All this helps dissuade many from supporting migrant people, the ultimate result being a progressive decrease in the space for action by civil society, and the weakening of its ability to respond to humanitarian needs.

I have always wanted to work in international cooperation. So, when I heard about 130 people on the streets in my city in 2014, I thought it was absurd not to pretend that nothing was happening. Many of us helped out of good nature – we were very naive. That is why we wanted to hit us. Simply helping, as individuals, was bothersome. They wanted to intimidate us, so that we would give up. At the beginning, there was no great impact on the association. Indeed, there was strong public support, with signatures collected in support of what we were doing. But there have been consequences in the long run. Our names were published in the newspapers, and we were talked about as being people who made money from migrants. It was as if all our efforts were gradually failing, little by little. An erosion. I was convinced that I was living in a system that still protected you. Instead, it was an icy shower. In short, we have been treated like criminals. I do not want to stay in a country like this anymore. It is not worth it.

Volunteer, Ospiti in Arrivo, Udine

7. Médicins Sans Frontières, Foreign citizens and threat to public health: an unjustified alarm with no scientific basis. MSF also lodged a complaint to the ombud (Anti-racial discrimination office), http://www.medicinsans frontieres.it/it/organizzazione/messaggi/straseni-erisi-la-salute-pubblica-un-allarme-dannoso.pdf
8. Article 650 of the Penal Code “Anyone who fails to comply with a provision legally given by the Authority for reasons of justice or public security, or of public health and hygiene, is punished if the fact does not constitute a more serious offense, with arrest for up to three months or with the fine up to €200”.
9. The report intentionally does not mention the events of summer 2017 related to SAR activities in the Mediterranean Sea and the controversy over some MSF’s activities – among them MSF. While fitting into the category of “criminalisation of solidarity”, these events do not relate to the population of the informal settlements, and thus are not covered in this report.
CONCLUSIONS AND RECOMMENDATIONS

The migrants and refugees living in unofficial settlements – on the borders, in open spaces, in occupied buildings in the cities and in ghettos in rural areas – are men, women and children in vulnerable circumstances. Regardless of their legal status, they should all be guaranteed access to basic needs and medical care throughout the period of their stay in Italy. The relevant institutions have a duty to ensure this.1

MSF calls on the responsible authorities to:

1. Strengthen humanitarian assistance to so-called “transient migrants” at the border areas and ensure full compliance with legal obligations already existing for those crossing borders (such as family reunion, relocation, implementation of the humanitarian clause included in the Dublin Regulation etc.). People crossing borders irregularly must not be subjected to violence, such as those documented by MSF in Ventimiglia, under any circumstances.

2. Reform the governmental reception system for asylum seekers and refugees – including unaccompanied minors, getting through the extraordinary reception centres (CAS), making the local authorities responsible for managing the ordinary reception facilities within the framework of the general welfare system provided to the resident population on the base of quotas of asylum seekers and refugees decided at national and regional level.

3. Under the regulation in force, ensure the full and uniform application required by the law. In relation to access to medical care, MSF calls on the responsible authorities to:

1. Ensure the full and uniform application across Italy of the Agreement between Government, Regions and Autonomous Provinces of Trento and Bolzano containing “Indications for the correct application of the legislation for health assistance to foreign populations” (20 December 2012).
2. Eliminate bureaucratic and administrative barriers that hinder the registration to National Health Service, forcing the improper use of the Temporarily Present Foreigner (STP) code. Specifically, provide registration procedures for asylum seekers and refugees that are not subject to any formal residence requirements and exclusively related to the place of actual residence, declared through self-certification. Registration must be guaranteed regardless of the nature of such a place (for example, occupied buildings), even when residence is temporary, as in the case of settlements linked to seasonal agricultural work.
3. Reform the L.48/2017 provisions, in order to prevent the increase in municipal power for the sake of urban safety and decorum, can compromise the access to primary needs and medical care for vulnerable people and the fulfilment of the mandatory duty of social solidarity as expressed in Article 2 of the Italian Constitution.
4. Provide economic, work and housing support programmes for refugees leaving the government centres. These programmes should support the refugees until their stable autonomy.
5. Avoid dismantling unofficial settlements – such as those in occupied buildings – by means of forced evictions when alternative housing solutions are absent.
6. Set up monitoring of unofficial settlements – in particular by municipal social services – with the minimum objective of identifying and taking care of the most vulnerable residents. Social services intervention must not be limited to crisis phases (such as forced evictions).
7. Ensure the full application of the humanitarian clause that explicitly excludes relief activities and humanitarian assistance from the crime of aiding and abetting the entry, transit and permanence of undocumented immigrants. The interpretation of this clause must also include the rescue of people, as well as helping them to access essential needs (shelter, food, water) and medical care.
8. Guarantee a paediatrician to all under age migrants, regardless of their legal status.
9. Provide exemption from the co-pay system for medicines and healthcare services for applicants and holders of international protection without employment.
10. Recruit on a permanent bases linguistic and cultural mediators at the health services with greater access by migrants and refugees, with particular reference to primary healthcare, women’s and children’s health and mental health. Introduce treatment and follow-up protocols for second-level services that take into account the limited time spent in the territory by the migrant.

9. Set up outreach programmes run by local health authorities in or nearby unofficial settlements, in order to direct residents towards local services, identify and take in charge of most vulnerable cases, notably minors, pregnant women, people affected by physical or mental disturbances, victims of torture or other physical or psychological maltreatment.
Last updated: 30 September 2017. The criteria for the inclusion of settlements in this research were: i) prevalent or relevant population, consisting of refugees in broad sense

out of sight

1.  Last updated: 30 September 2017. The criteria for the inclusion of settlements in this research were: i) prevalent or relevant population, consisting of refugees in broad sense

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<th>REGION</th>
<th>MUNICIPALITY</th>
<th>NAME</th>
<th>TYPOLOGY</th>
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<td>Lombardia</td>
<td>Milano - Varioli sites</td>
<td>Outdoor 100</td>
<td>200</td>
<td>No</td>
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<tr>
<td>Piemonte</td>
<td>Torino - Corso Chieri</td>
<td>Buildings 40</td>
<td>80</td>
<td>No</td>
<td>Yes</td>
<td>Yes</td>
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<tr>
<td>Piemonte</td>
<td>Torino - Corso Ciré</td>
<td>Buildings 40</td>
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<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
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<tr>
<td>Piemonte</td>
<td>Torino - Ex Maggi</td>
<td>Buildings 100</td>
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<td>Yes</td>
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<td>No</td>
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<td>Piemonte</td>
<td>Torino - Via Bologna</td>
<td>Buildings 50</td>
<td>80</td>
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<td>No</td>
<td>No</td>
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<td>Piemonte</td>
<td>Torino - Via Madonna delle Sallette</td>
<td>Buildings 80</td>
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<td>Puglia</td>
<td>Bari - Ex Socrate</td>
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<td>Puglia</td>
<td>Bari - Ferhotel</td>
<td>Buildings 50</td>
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<td>Shacks 500</td>
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<td>Puglia</td>
<td>Cerignola (FG)</td>
<td>Farmhouses 100</td>
<td>200</td>
<td>Yes</td>
<td>Yes</td>
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<td>Puglia</td>
<td>Foglia - Ex Daunialat</td>
<td>Buildings 20</td>
<td>50</td>
<td>No</td>
<td>No</td>
<td>No</td>
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<td>Puglia</td>
<td>San Marco in Lamis (FG)</td>
<td>Farmhouses 100</td>
<td>150</td>
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<td>Shacks 300</td>
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<td>Sicilia</td>
<td>Castelvetraro - Pan Del Lago</td>
<td>Tents 20</td>
<td>50</td>
<td>No</td>
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<td>Catania - Various sites</td>
<td>Outdoor 20</td>
<td>100</td>
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<tr>
<td>Sicilia</td>
<td>Messina - Various sites</td>
<td>Outdoor 20</td>
<td>50</td>
<td>No</td>
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<td>Sicilia</td>
<td>Palermo - Missioni di Speranza e Cartà (Wome/Minors)</td>
<td>Buildings 600</td>
<td>1000</td>
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<td>Yes</td>
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<td>Sicilia</td>
<td>Trapani - Campobello di Mazzara</td>
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<td>200</td>
<td>Yes</td>
<td>Yes</td>
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<td>Toscana</td>
<td>Firenze - Via Baracca</td>
<td>Buildings 40</td>
<td>60</td>
<td>No</td>
<td>Yes</td>
<td>Yes</td>
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Since 2002, MSF has been present across Italy in particularly sensitive places, including the landing points in Lampedusa, amongst seasonal workers in southern Italy, on the northern border and in reception centres for migrants in various regions. Since 2016, MSF has also run activities in some informal settlements, giving residents information about local health services, distributing basic commodities and providing psychological first aid. Currently, MSF manages a post-acute care centre in Catania specialising in refugees and asylum seekers discharged from hospital facilities in Sicily, who are failing to access adequate medical care during their post-acute or convalescence phase. The MSF centre aims to fill a gap by providing an intermediate medical facility where patients can find the support they need before they are able to return to their place of residence.

In Trapani, MSF provides psychosocial support to asylum seekers hosted in the province’s CAS. A group of psychologists and cultural mediators visit more than 15 centres each week to provide psychological support through group and individual sessions. A transcultural psychotherapeutic clinic was opened in July 2016 in collaboration with the local NHS mental health department, to tackle the most serious mental health cases. In addition, an MSF psychosocial team visits the Sicilian ports to provide psychological first aid to survivors of shipwrecks or tragic experiences during sea voyages.

In April 2016, MSF opened a rehabilitation centre in Rome for torture survivors and victims of cruel and degrading treatment. Patients are assisted through a multidisciplinary approach involving medical and psychological care, physiotherapy, and social and legal assistance. The activities are carried out in collaboration with the Medici Contro la Tortura (Doctors Against Torture) and ASGI.

Also in Rome, a mobile MSF team provides medical and psychological assistance to migrants, refugees and asylum seekers in unofficial settlements where access to medical care is not guaranteed.

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MSF IN INFORMAL SETTLEMENTS

Turin
Occupied Ex MOI, refugees
- From Sep. 2016
- Orientation to territorial health services
- Agreement with NHS local branch
Città di Torino

Como
Migrants in transit
- End 2016 – Sep. 2017
- Psychological First Aid (PFA)
- Distribution of hygiene kits, blankets, sleeping bags, even through local volunteers

Bolzano
Migrants in transit and excluded from reception
- From 2017
- Distribution of hygiene kits, blankets, sleeping bags, even through local volunteers

Udine, Gorizia, Pordenone
Asylum seekers
- From 2017
- Distribution of hygiene kits, blankets, sleeping bags, even through local volunteers
- Heated tent installation

Rome
Migrants excluded from reception
- From Nov. 2017
- Primary healthcare (mobile clinic)
- Psychological First Aid

Ventimiglia
Migrants in transit
- End 2016 – Sep. 2017
- Psychological First Aid (PFA)
- Women’s health
- Distribution of hygiene kits, blankets, sleeping bags, even through local volunteers

Bari
Occupied Ex Socrate, refugees
- Orientation to territorial health services

Campobello di Mazara
Seasonal agricultural workers
- From Oct. 2017
- Health promotion
- Distribution of hygiene kits
the first 72 hours of arrival. Currently, the active hotspots defined in Legislative Decree no. 142/2015. The process of identification should be completed, with various management bodies. The level of guaranteed services is a bare minimum, without the provision of specific programmes aimed at social inclusion.

Dublin Regulation (EU Regulation no. 604/2013, the so-called ‘Dublin III’) – Establishes the criteria and mechanisms for determining the State responsible for assessing an asylum application presented in one of the Member States by a third-country national or a stateless person. The basic principle is that the competent State is that in which the migrant first arrives/enters. Defined in Legislative Decree no. 142/2015. These are set up by the Prefectures in agreement with the National Health Service.

First reception centres – Defined in Legislative Decree no. 142/2015. The purpose of identification should be completed, and the asylum procedure started, within these centres. In reality, due to the lack of places in secondary reception facilities, asylum seekers may end up staying for the entire asylum procedure. First reception centres – Defined in Legislative Decree no. 142/2015. These are set up by the Prefectures in agreement with various management bodies. The level of guaranteed services is a bare minimum, without the provision of specific programmes aimed at social inclusion.

Extraordinary reception centres, managed by the Civil Protection and activated by the DPCM 12/2/2011 in order to process the arrival of people coming from Northern Africa. This consists of projects set up throughout the country, led by local authorities that voluntarily access the National Fund for policies and services of asylum managed by the Ministry of the Interior.

Refugees (holders of refugee status) – According to Article 1 of the Geneva Convention, those who, fearing persecution on the grounds of race, religion, nationality, belonging to a particular social group or for their political opinions, are outside the country of which they are citizens and cannot, or do not want to because of this fear, avail themselves of the protection of that country. In this report, the term is used in a broader sense, to include the holders of all forms of international and humanitarian protection.

Vulnerable Persons – In the context of international protection, such people are to be understood as minors, unaccompanied minors, the elderly, pregnant women, single parents with underage children, victims of trafficking, people suffering from serious physical illnesses or mental disorders, people who have suffered torture, rape or other severe forms of psychological, physical or sexual violence, and victims of genital mutilation.

Asylum seekers – People who are outside the borders of their home country and who present a request for refugee status in another State. The applicant remains such until the decision on the submitted application is made.

C3 Form – A form filled out at Police station through which the request for international protection is formalised, and which is valid as a first temporary residency permit.

CAS (Centri di Accoglienza Straordinaria, or Extraordinary Reception Centres) – Established by Legislative Decree no. 142/2015. These are set up by the Prefectures in agreement with various management bodies. The level of guaranteed services is a bare minimum, without the provision of specific programmes aimed at social inclusion.

ENAs (Extraordinary Asylum Assistance Centres) – Extraordinary reception centres, managed by the Civil Protection and activated by the DPCM 12/2/2011 in order to process the arrival of people coming from Northern Africa. The programme was closed in January 2013. 

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Hotspots – Reception facilities located in the entry ‘hotspots’ for migrants to ensure their identification and photographic registration. These overlap with the pre-existing CPSAs (Centri di Primo Soccorso e Assistenza, or First Aid and Assistance Centres), established by Legislative Decree no. 142/2015. Law enforcement officers proceed with the identification and registration of asylum seekers within the first 72 hours of arrival. Currently, the active hotspots are in Lampedusa, Pozzallo, Taranto and Trapani.

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STPs (Straniero Temporaneamente Presente, or Temporarily Present Foreigner) code – Introduced in 1998. This allows foreigners present within the territory who are not in compliance with the rules on staying (which is the case, for example, of migrants in transit to another EU state) to receive urgent, essential and continuous healthcare, from the National Health Service.

SPRAR (Sistema di Protezione per Richiedenti Asilo e Rifugiati, or Protection System for Asylum Seekers and Refugees) – A public system of second reception for holders and applicants of international and humanitarian protection. This consists of projects set up throughout the country, led by local authorities that voluntarily access the National Fund for policies and services of asylum managed by the Ministry of the Interior.

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GLOSSARY

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Thanks to the volunteers of MSF local groups in Italy:

- Action Diritti in Movimento, Roma
- ADIF – Associazione Diritti e Frontiere
- Alter Ego, Roma
- Antenne Migra-
- Archi-etti Senza Frontiere Italia
- ASGI – Associazione per gli Studi Giuridici sull’Immigrazione
- Baobab Experience, Roma
- Blocchi precari metropolitani, Roma
- Borderline Sicilia
- Cambio Passeo, Milano
- Campagna “LasciateCiEntrare”
- Campagna Welcome Taranto
- Carte Borgo Mezzanone (FS)
- Caritas Gorizia
- Collettivo Mamadou, Bolzano
- Coordinamento Cittadinato Lotta per la Casa, Roma
- Comitato di solidarietà rifugiati e migranti, Torino
- Comitato per la casa ed i diritti umani di Via Fanelli, Bari
- Como Senza Frontiere
- Co.S.M.L. (Comitato Solidarietà Migranti), Reggio Calabria
- CSA Ex Canapificio, Caserta
- CSC Nuvola Rossa, Reggio Calabria
- Emergency – Progetti di Castel Vulture e Polistena
- Ex OPG Occupato - Je so’ pazzo, Napoli
- Fondazione Alexander Langer Stiftung, Bolzano
- Fondazione ARCA, Milano
- Gruppo Lavoro Rifugiati, Bari
- ICS – Consorzio Italiano di Solidarietà Ufficio Rifugiati, Trieste
- Insieme con voi, Gorizia
- Internos, Roma
- La Kasbah, Cosenza
- Libera Occupato, Bologna
- Medici per i diritti umani (MEUD)
- Melting Pot Europa, Padova
- Montana di Lotta per la Casa, Firenze
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- Oxfam
- Prendocasa, Cosenza
- Progetto iAK
- Razzismo Stop, Padova
- Rumori sinistri, Rimini
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- SOS Bozen, Bolzano
- Tenda per la Pace e i Diritti, Gorizia
- Ufficio Pastorale Migranti, Torino

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Médecins Sans Frontières (MSF) is the largest independent medical humanitarian organization in the world. Founded by doctors and journalists in 1971, MSF delivers emergency aid to people affected by armed conflict, epidemics, malnutrition, exclusion from healthcare, and natural disasters in almost 70 countries. MSF offers independent and impartial assistance to those who need it most. MSF also acts to denounce forgotten crises, combat the inadequacy and abuses in the aid system and publicly support a better quality of treatment and medical protocols. In 1999, MSF was awarded the Nobel Peace Prize.