

Open Sociology

Direzione scientifica

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SOCIOLOGY

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PROXIMITY VIOLENCE IN MIGRATION TIMES

A Focus in some Regions
of Italy, France and Spain

Edited by Ignazia Bartholini



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Index

1. Introduction. A nagging thought of a scholar, by Ignazia Bartholini	pag.	11
1.1 The interweave between desk analysis and field of “PROVIDE” research	«	11
1.2 Gender-based violence and proximity violence	«	13
1.3 The field research	«	16
1.4 The Reception System in Italy, Spain and France	«	19
1.5 Critical elements regarding the reception system	«	23
1.6 Different instances of best practices	«	25
1.7 A number of recommendations	«	28
References	«	28
2. The phenomenology of proximity violence: relational strategies and modalities used against vulnerable migrants, by Ignazia Bartholini	«	31
2.1 Migration and segregation	«	31
2.2 An amphibiotic terminology: “Violence against women” and “gender violence”	«	32
2.3 Proximity violence	«	35
2.4 Domination over and segregation of the female body	«	39
2.5 Dehumanisation, objectification and reification of the migrant woman’s body	«	42
2.6 Conclusions	«	45
References	«	46

3. The EU's legislative framework and the issue of violence perpetrated against migrant women, by <i>Rafaela Hilário Pascoal</i>	pag.	51
3.1 Introduction	«	51
3.2 From gender inequality to gender-based violence	«	53
3.3 Gender-based violence in the European legal framework on migration	«	54
3.4 Conclusions	«	61
References	«	62
4. Proximity violence against women refugees and migrants in Sicily. Operators' testimonies, by <i>Ignazia Bartholini</i>	«	67
4.1 Two preliminary issues of a methodological nature	«	67
4.2 Interviewee sampling and profiling	«	71
4.3 The interviews	«	76
4.4 The main problems detected	«	90
4.5 Intervention	«	94
4.6 The network	«	101
4.7 The procedures activated	«	103
4.8 Best practices and need for inclusive policies: the operators' proposals	«	105
4.9 Aspects to be enhanced or set up	«	109
4.10 Critical issues	«	112
References	«	113
5. Proximity violence against women refugees and migrants. Experiences and good practices in the Milano area, by <i>Lia Lombardi</i>	«	115
5.1 Introduction: an overview of the dimension of and approaches to violence in contexts of forced migration	«	115
5.2 Migration to Italy and Lombardy	«	119
5.3 The qualitative research plan. The main results	«	123
References	«	145
6. The research and the experiences of Telefono Donna on proximity violence against women refugees and migrants, by <i>Fulvio Palmieri</i> and <i>Elisa Re</i>	«	149
6.1 Introduction	«	149
6.2 Main findings of research	«	150

6.3 Best practices	«	158
References	«	165
	«	
7. Proximity violence against women refugees and asylum-seekers. Oxfam experiences in Tuscany Region, by <i>Maria Nella Lippi</i>	pag.	167
7.1 The asylum-seeker and refugee population in the Tuscany Region	«	167
7.2 How violence is managed in the Region	«	169
7.3 The research method used and results of the field research	«	171
7.4 Some “concrete examples” of the “good practices” detected	«	176
References	«	179
8. The system of asylum and protection for refugees victims of proximity violence in the Paris region, by <i>Julia Tran Thanh</i>	«	181
8.1 Overview of the French system of asylum and protection	«	181
8.2 The pathway to asylum	«	183
8.3 The research and “research methodology” used	«	188
8.4 The research and “research methodology” used	«	191
8.5 Some concrete examples of the good practices detected	«	197
8.6 Conclusions	«	197
References	«	
9. Proximity violence against women refugees and migrants. Experiences and best practices in Andalusia, by <i>Belén Agrela, Beatriz Montes, M^a Luisa Grande and M^a José Calero</i>	«	199
9.1 The situation in the Region	«	199
9.2 Process and research method	«	205
9.3 Main results of the research	«	207
9.4 Concrete examples of the “good practices” detected	«	212
References	«	218
Authors	«	221

4. Proximity violence against women refugees and migrants in Sicily. Operators' testimonies

by Ignazia Bartholini

4.1 Two preliminary issues of a methodological nature

The research presented here intended illustrating the practices implemented to foster inclusion of and support to migrants above all, female refugees/asylum seekers hosted by reception centres in Sicily¹. At the same time, it sought to outline some of the limits the reception system presents when it comes to supporting victims of proximity violence. A description of these practices and identification of the limits became, therefore, the two-fold purpose of this investigative project. When the ideal parameters of the research project had been established, it was a question of outlining and implementing a complex, multidimensional investigative plan with the contribution of external researchers and of those engaged within the reception circuit. The peculiarity of this research lay in the fact that it presented the viewpoints of significant witnesses who as “outsiders”, “insiders within” and strangers, are, at the same time, an integral part of that very reality under investigation². Needs, critical issues and good practices were identified and highlighted by operators and stakeholders with many years of experience, thanks to the interviews administered.

To carry out the research two methodological choices had to be made: one concerned the strategy to apply in order to identify the stakeholders and operators to be interviewed; the other was the software to use to manage the data provided by the interviewees.

¹ The reception system in Sicily is regulated by norms defining a networked and articulated system of Hotspots (facilities for initial reception, identification, registration and fingerprinting of asylum-seekers and migrants arriving in the EU by sea), CASs (Extraordinary Reception Centres) and SPRAR (Protection System for Asylum Seekers and Refugees) facilities, outlined in paragraph 1.4 of the present volume and to which we refer here.

² During the interviews Ignazia Bartholini was accompanied by Pamela Corso who, besides being a member of Badia Grande, a cooperative partnered with the Provide project, who, with Maria Concetta Papa and Giuseppina Cusenza, coordinates the cooperative's reception phases.

The choice of the interviewees was not determined by the roles they played within the reception circuit as such nor by the numerical prevalence of subjects performing certain tasks rather than others. It was more a question of identifying interlocutors who had particular *bonding* and *bridging* links with professionals and operators belonging to other bodies or facilities. The aim was to select operators capable of bearing testimony consistent with the skills required to receive migrants within the hosting system while, at the same time, performing the different roles required to take charge of asylum seekers and make choices strategic to the hosting service as a whole. The reasons for this choice are to be sought within a dimension rooted intrinsically in the characteristics of non-profit organisations.

Social workers are not, in actual fact, professionals who produce material goods by availing themselves of solid methodologies and well-defined scientific criteria. They are people who deal with a social reality that is often not only unpredictable but also complex and multifaceted, where intervention cannot be encoded up front, nor the certainty or success of their application and outcome be guaranteed (Gui, 2009; Grose *et al.*, 2013). It was a question, therefore, of identifying a network of ties, potentially loose due to slack degrees of intimacy and low frequency of contact, from which to select the workers to interview, in order to avoid that all of them might provide accounts from a similar angle and thus produce serialised testimonies. On the contrary, we sought to gain knowledge about the object of our research – good reception practices and emerging criticalities – from diverse observational stances.

It was necessary, therefore, to make a preliminary selection of interviewees from among subjects with weak ties. As Deriu (2016) observes, weak ties lead more easily to new information, because they come from a variety of different networks. On the contrary, strong bonds which produce dense networks lead to redundancy of data, repeated practically verbatim by those belonging to them.

It was a matter, therefore, of using bridges, that is, connections between stakeholders and professionals with weak ties operating in different though internally connected circuits. A weak bond forms a bridge between two separate contact clusters. It is both the space between the peaks of two mountains and the structure connecting them; a “lack of ties” and what links this “absence of ties” by creating a link: A bridge is two things at once, «a chasm spanned and the span itself [...]. The structural hole argument is about the chasm spanned. It is the latter that generates information benefits» (Burt, 1995: 28).

It was necessary, therefore, that the research project should concentrate on segments capable of outlining a circuit, the phases and elements of the work carried out by professionals who, although acting separately, were the pieces that made up the larger picture.

Figure 1 – Illustration of a weak-tie network



Having identified professionals who had no direct ties but who worked in the same reference area, we were able, by means of the interviews carried out, to obtain a set of indications, experiences, critical reflections and proposals characterised by the experiences of these operators connected internally to a loose or weak-tie network (Granovetter, 1983), working as professionals but performing different roles in different reception facilities in different localities. This, far from creating alienation and fragmentation, turned out to be an important productive resource at information level, because the interviewees provided different information on the same issues, thus helping to enrich the overall view of matters without sliding into redundancy.

However, by simply stating that the task of the interviewees was to “provide information” does not do justice to the interviews, which often turned out to be veritable “emerging interactions” (Charmaz, 2014) highlighting fertile themes and reflections of a multiple kind.

Many of the interviewees were former students of the main interviewer. The interaction that arose in these cases was of the “emerging” type, in the sense that it created a new link upon a previously established one, that of professor / supervisor of / degree or postgraduate thesis. This new experiential link was, at the same time, friendly and symmetrical, permitting both parties to understand more easily what was meant to be received and delivered at the level of the narrative account of the experiences and of the opinions formulated. It was a matter of getting the professional capital – that is, the set of skills and competences acquired and developed during the educational process, as well as a positivistic assessment of the work performance in question – to emerge fruitfully; this, combined with the social capital, intended as something that exists in social relations or produced by social relations and understood as an “intervening variable” (Donati, 2013) of the interviews conducted. The aims of the research were not to establish causal

links or find out what kind of capital prevailed or conditioned another. It did not intend validating any causal model, but to detect the strong circularity existing between the different types of social capital that fed and reinforced each other. If from a strictly analytical point of view, the two dimensions may be kept separate, from an empirical point of view, from the point of view of the interviews carried out in the practices of “proximity”, they are profoundly interrelated.

The interviews carried out were non-directive but followed the flow of the narration without interfering when it seemed to take a tangential direction; on the contrary it treasured the original inputs these deviations produced. These interviews were narrative interactions based on profound generative exigencies, permitting the production of social meaning interpreted and re-elaborated thanks to the experiences shared during the interviews.

The second methodological issue concerned the choice of software. NVivo 12 (Non-numerical Unstructured Data Indexing, Live Searching and Theorizing), proved to be a fundamental tool during the entire construction process of the research project. One of its peculiarities is that of functioning as a sort of hypertext, a feature which permits the collection of unstructured data within a procedural framework. While it obliged the researcher to follow an ordered structure which depends not only on a Document System, but also on a set of containers – called nodes – used to manage coding, that is, the attribution of codes to segments of text referred to the material produced during the interviews, NVivo software favoured not only conceptualisation, but also the creative phase by examining the attributes. The clarity of the goals to be achieved by using the data collected during the interviews permitted us to enlarge the Node Browser and obtain a richer vision than that provided by the codified text. Furthermore, the Non-Numerical Unstructured Data Indexing, Live Searching and Theorizing favoured memorisation of the steps of the analytical process and of the choices made to interpret the research material.

In the specific case of the interviews with the professionals and stakeholders operating in the refugee / asylum-seekers’ centres, the NVivo 12 software facilitated:

- identification and examination of the *nodes* used to visualise the contexts encoded in a given item;
- examination of the *attributes* permitting visualisation of the documents to which specific values had been associated;
- identification of texts within a node;
- formulation of *queries*, making comparisons between results over time fruitful;
- the creation of different types of models and graphic representations.

The possibility of making systematic comparisons, the storing of the memory of the analytical process's set up and the ease of access to the material produced, were among the most salient features of the process by which the interview material was reconstructed. In any case, the significance of the intersection matrices created using NVivo, explained in the paragraphs below, is a direct demonstration of the operations and intentions of the researcher who set up the project.

Tab. 1 – Nodes and answers

Node	N. Answers
1st node: the operator's view	52 answers
2nd node: knowing how to recognise proximity violence	28 answers
3rd node: greatest problems noticed	54 answers
4 th linguistic and cultural difficulties	57 answers
5th node: intervention measures	58 answers
6th node: the network	56 answers
7th node: procedures set up	50 answers
8th node: good practices and needs for inclusive policies and operators' proposals	49 answers
9th node: aspects to set up or enhance	46 answers
10th node: critical elements	46 answers

4.2 Interviewee sampling and profiling

Seventy-eight persons were interviewed including operators and stakeholders chosen from among those who carry out their professions in facilities of different types or in different institutions, for the most part, identifiable as first-stage reception centres (CAS), second-stage reception centres (SPRAR for adults, SPRAR for Minori), facilities made available by the Municipal Authorities and by the Prefectures, anti-violence centres and Hotspots (see Tab. n. 1).

The interviewees, though they carried out their professions in different territorial areas of Sicily, were mostly involved in first – and second – stage reception circuits belonging to the *Badia Grande Cooperative* (a Provide project partner), which, in western Sicily, coordinates 25 reception facilities of various types in addition to the *Cara di Mineo* (province of Catania), a mega-structure accommodating as many as 2,000 migrants, and in the *San Francesco* cooperative, which plays an important role in the reception of migrants in eastern Sicily.

Tab. 2 – Facilities where the interviewees worked

Type	Number of interviewees
Non-affiliated	1
Other	1
Anti-violence centre	1
CAS	20
Cooperative	5
Hotspot	2
MSNA SPRAR – centres for unaccompanied minors	31
Prefectures and Municipalities	3
SPRAR for adults	17
Labour orientation agency	1

Table n. 3 describes the specific geographical areas where the interviewees are employed. Conduction of the interviews with the operators belonging to the Badia Grande Cooperative were enhanced by a period of peer-to-peer participant observation within some of the facilities, carried out by other operators engaged in coaching and, less frequently, in professional-training activities.

Tab. 3 – Province

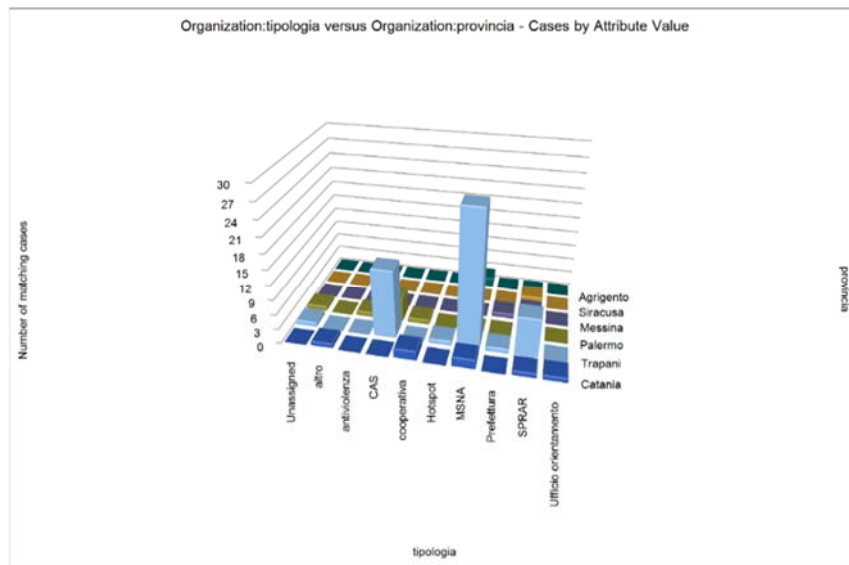
Province	N. of Operators
Non-affiliated	1
Catania	7
Trapani	52
Palermo	12
Messina	3
Siracusa	2
Agrigento	2

Moreover, in some cases, it was the professionals who work within the facilities who “swapped their roles” as “operators” – social worker coordinator, psychologist, educator – to become “participant observers” within the facilities where they worked or, again, acting as “collaborators” with the task of interviewing colleagues engaged in hosting migrants. The interviews were

collected on the basis of a cluster model whereby a very small group of respondents (mostly former students of the main interviewer) began to interview, first, operatives working in other centres within the same geographical area and, gradually, others from neighbouring territories. The operators interviewed benefitted also from a number of hours dedicated to the supervision they carried out with other professionals belonging to the same sector and, during the final phase of the interviews, some of the latter were interviewed too.

General sharing and, beyond physical closeness, the meaning and purpose informing the interviews contributed to the acquisition of added value which bestowed depth, spontaneity and naturalness on the interviews themselves. In some cases, the interviewees, by anticipating the interviewers' prompt questions, fostered a flow of information to be shared thanks to a kind of empathy which allowed them to identify the salient elements of the interview and its topical issues without these having to be, as it were, "dug out" of the communicative flow.

Graph. 1 – Operators' provinces of reference



Of the interviewees, 63 were women, 15 men, for the most part aged between 33 and 45; only one of them declared being over 56 while one had not as yet turned twenty when interviewed.

Tab. 4 – Interviewees' professions

PROFESSION	NUMBER OF CASES
Non-affiliated	1
Educator	31
Employment adviser	3
Mediator	8
Social assistant	11
Psychologist	10
Animator	1
Medical doctor	1
Legal operator	4
Hotspot coordinator	1
Nurse	1
Area manager	4
Facility manager	4

The experience rate for work with migrants was high on average: of the 78 respondents, 32 declared having worked in the field for between 3 and 5 years, while 20 of them – including a doctor, a psychologist, area and facility managers – were in their sixth year or had worked for more than 6 years within the sector (see tab. n. 4).

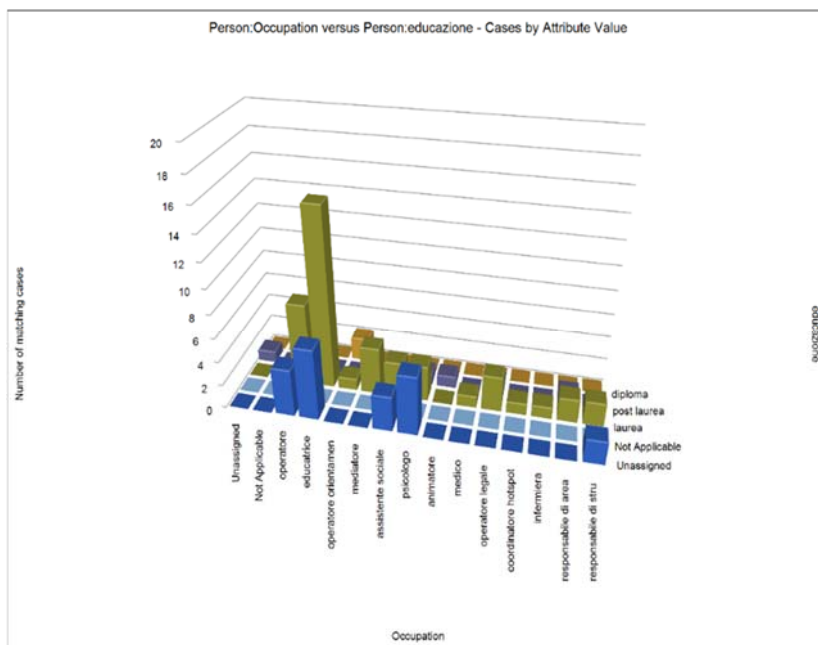
As regards their educational qualifications, 53 were graduates of whom 20 had attended masters and post-graduate specialisation courses, while 5 of them had only a secondary school diploma to their credit. The professions carried out, as described in table n. 4, belong to a broad range of social-oriented specialist professions, with a prevalence of educators.

The intersection between professions and educational qualifications described in graph No. 2, highlights a prevalence of educators and operators with a degree.

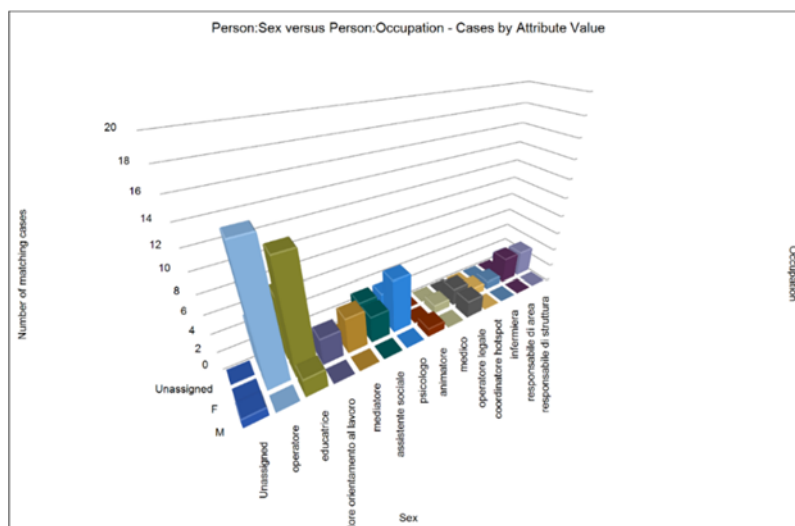
Of the interviewees, those with a professional experience of or greater than three years in hosting, belong to the health-care sector (1 doctor and 1 psychologist) and to the area of management or coordination (7 area managers, 1 dealing with minors, 3 dealing with adults, 4 in charge of facilities, 2 in charge of Hotspots).

This prevalence is in line with some of the professions practiced by the operators including those of cultural mediator, psychologist, legal operator and nurse. Although not mandatory for the practice of some of the other professions foreseen, like that of educator and, unlike what happens in other regional contexts, the interviewees included in our sample were all graduates.

Graph. 2 – Profession and educational qualifications of the operators



Graph. 3 – Profession and gender of the operators



Furthermore, the datum concerning the intersection between hierarchical position and gender of those representing it, is also interesting. It is a question of “professional capital” which, in the specific case of this project, is connoted further by being predominantly female. The area and facility managers are women. Only in the case of the legal operators is the proportion reversed with only two women among the lawyers interviewed by us and involved in the migrant reception circuit.

This general “feminisation of the workforce” within the area of the reception in Sicily is due to a complex interweave between systems of protection for asylum seekers and some of the professions traditionally practiced by women, such as the care-provision professions which require specific skills aimed at improving the conditions of vulnerable beneficiaries like refugees and asylum seekers. There are, actually, some abilities that may prove very fruitful when seeking to facilitate others (Nussbaum, 2012: 138), as well as a number of “transversal” – relational and communicative – competences generally attributed to female professionals.

4.3 The interviews

In this part of the chapter a summary of the main results of the interviews deep understanding of key issues is provided.

4.3.1 Some general annotations

The interviews administered to the operators were the fruit of lengthy construction work carried out by the *Provide project* teams first, with the interviewees later, to identify and choose some of the sensitising (or focus) concepts from which to derive the topics to include in the interviews. During the creative phase of its conception and design, during the experiential stage of its administration and, finally, during the codification and interpretation of the material gathered, the interview remained “a complex social interaction” (Ferrarotti, 1981), where the construction and attribution of meaning to the experiences narrated foresaw a goodly degree of trust and a profound sharing of the results the interview sought to obtain. The fact that the main interviewer had been the teacher of a fair number of the interviewees might have favoured or, on the contrary, rendered the interviews artificial and shallow. This doubt was dissolved during the conduction phase, however. The material collected denotes a reality that was only partially foreseeable as far as truthfulness goes. The ideas of the interviewees regarding the tasks carried out and the experience gained were accompanied by lucid narratives, objectively supported by well-described episodes and circumstances.

Secondly, the interviews acted as a bridge between an international research team and the local context in which they were conducted. The planning and drawing up of the interview required a lengthy preparatory phase in order to choose the topics to be included and their inclusion within increasingly limited perimeters. Initially, an outline interview touching on 48 issues was drawn up only to be gradually reduced in number and simplified in formulation. This progressive stripping aimed at focusing on some particularly important conceptual issues while, at the same time, giving the interviewees greater freedom to respond, modulating and directing their thoughts towards episodes, annotations, reflections that this smaller number of open questions was better able to prompt and grasp in depth.

The focus-group meetings held preliminarily to the individual interviews had a strategic function, to the extent that they were considered, by the interviewees and interviewers alike as informal group interviews, as free-wheeling, spontaneous exchanges of ideas. These informal interviews were held before the actual interview – 4 in all – with operators from different facilities (Hotspots, CAS and SPRAR facilities) belonging to the migrant reception network and on different occasions, like, for example, during the *Festa del Migrante* (The Feast of the Migrant), held in Trapani in June 2018.

The conduction of the interviews was followed by a *reading and re-reading* of the transcripts of the audio recordings made and supported by the “memos” referring to observations of particular postures, tones of voice, pauses or digressions on the part of the interviewees. The coding phase permitted the analytical identification of *nominal labels* that were later merged.

The interview material was divided into nodes or sensitising concepts (Blumer, 1969), used to guide the foci of the investigation.

These were:

First node: “the operator’s view”

- How many asylum seekers and refugees are currently present (if they are aware of this) within their intervention area (province, city, district, department, etc.)?
- How many women asylum seekers and refugees are currently present (if they are aware of this) in their intervention area (province, city, district, department, etc.)?

Second node: knowing how to recognise the proximity violence

- Which forms of violence are reported mostly?
- Against whom are they perpetrated mostly (women, minors, men, homosexuals)?

Third node: the most important problems encountered

- What problems and kinds of violence have emerged the most?

Fourth node: linguistic and cultural difficulties

- Are there problems of communication (language, culture, attitude, etc.) with migrant people?
- If so, how are these problems addressed and dealt with?

Fifth node: Interventions

- What kind of intervention has been implemented, or do you plan to implement?

Sixth node: the network

- Does the institutional actor interviewed (prefecture, municipality, hospital manager, etc.) belong to a network of immigrant and anti-violence reception services?
- If so, which? And how do they collaborate?

Seventh node: The procedure implemented

- When a report regarding a case of violence arrives, how do you act? What procedure is activated?

Eighth node: Best practices and the need for inclusive policies and suggestions made by the operators

- What do you believe are, or might be, examples of best practices and inclusive policies for migrant women, in particular for asylum seekers and refugees at risk of violence and discrimination?

Ninth node: Aspects to enhance or activate

- How would you improve the charge-taking service provided to migrant victims of violence?
- How would you improve collaboration with the network?

Tenth node: Critical elements

- Are the male and female operators working for your facility / organisation competent when it comes to identifying the distress of abused persons and victims?

4.3.2 First node: “the operator’s view”

The first node aimed at ascertaining the operators’ awareness of their working in the here-and-now, in a reality which is not only a human and physical place but also a system organised within a territorial and urban reality, as well as a welcoming space.

Therefore, the first question was: *How many places for asylum seekers and refugees are there (if they are aware of this) within their intervention area (province, city, district, department, etc.)?*

The second question concerned the surrounding environment: *How many asylum seekers and refugees are currently present (if they are aware of this) in their intervention area (province, city, district, department, etc.)?* The third regarded the number of women within the territory: *How many women asylum seekers and refugees are currently present (if they are aware of this) in their area of intervention (province, city, district, department, etc.)?*

The answers received, which we quantified and report below, were mostly inaccurate or confused; many of the interviewees were actually unable to answer them:

Tab. 5 – Numbers of places available

ITEM	N. ANSWERS
She/he is not aware of the number of guests in her/his area of intervention	23
Provides the number for the facility where he/she works	16
Indicates the total number of guests present in the different facilities run by the cooperative for which he/she works	7
He/she is aware of the number of guests present within his/her province or region	5
Does not answer	28

The only two interviewees (women) who provided precise answers were the coordinator of the Trapani-Milo Hotspot, which, at the time of the interview, provided a total of 635 SPRAR places, and the coordinator of the MNSA (centre for unaccompanied minors) of the *Badia Grande Cooperative*, which provides about 2,000 places in the CAS facilities run by that cooperative.

This first item dwelt on the interviewees’ ability to collocate their own observations of the surrounding reality within an overall view of a system above and beyond their own particular reference focus. In this case perception needs to take much more than a simple glance if it is to grasp the cognitive elements of a reality and assimilate a space-time congerie connoted by salient elements permitting the observer to pass from a subjective to an objective, quantifiable dimension. We might say that among the operators this

kind of overall blindness was found to be widespread and stratified. However, a further hypothesis is that the operators' tendency to concentrate on their own functions occurred, probably, at the expense of a broader view of the state of things, which may not, actually, be detrimental to their conscious collocation within a professional organisational category. This hypothesis we deem the most plausible.

4.3.3 Second node: knowing how to recognise the proximity violence

4.3.3.1 The questions

Two of the questions³ posed during the interview aimed at promoting accounts of and feedback regarding gender-based violence and proximity violence (that is, violence perpetrated by a person close to the victim who believes he is entitled – because of some culturally normalised tradition and or, in some cases, by contextual conditions and situations beyond the victim's control – to behave in a violent manner because he is a father, a blood relation or a spouse etc., but at times even a subject contextually close to the victim who arrogates to himself – or who is legitimised by third parties to do so – power over the victim which transforms symbolic into concrete, indirect into direct violence)⁴. There exist specific cultural codes (symbolic violence) which favour the perpetration of relational models based on gender differentiation and segregation.

4.3.3.2 Violence against women, from intimidation to sexual exploitation

The interviews held with the operators revealed the existence of a plethora of power relations aimed at female subordination characterising relationships which are not only intimate but also more generically gendered-based among the guests of the refugee / asylum seekers' centres, a phenomenon which generates dysfunctional behavioural dynamics to the utter disadvantage of women and total benefit of men. During the interviews with the professionals, it was not a question of simply evaluating the dynamics of family groups by means of direct observation, but also of observing how frequently intimidation of women, be they spouses, sisters or daughters, came

³ The precise questions were: What forms of violence are reported most frequently? Against whom are they perpetrated mainly (women, minors, men, LGBT).

⁴ However, this initial phase of the research, we have not considered appropriate to deepen the theme of the differences between one and the other form of violence. We have instead tried to know how much the interviewees knew more generally in terms of gender-based violence et/or proximity violence and according to which operative declinations.

to light. For the interviewees, recognition of violence meant first of all *taking note of the silence of the victims*. This silence is not the outcome of linguistic difficulty, but the result of oppression combined with intimidation. The latter, from which a permanent state of oppression derives, is, to all intents and purposes, a latent aspect of proximity violence.

Intimidation means frightening the victim by resorting to gestures, looks and words. Frequently, the women involved are unaware of being victims of this kind of violence and if children witness it, they fail to realise that these too may suffer from traumas (assisted violence), because the victims tend to justify the male (female interviewee No. 7, a social worker in charge of a facility).

Since this violence is “normalised” both within family relationships and in relationships dictated by necessity and established during the journey in the company of subjects outside of the family circle, it is not perceived as such, except in its more concrete and material effects. Latent intimidation manifests itself in silent subordination and in the subalternity of women.

As one interviewee reports,

Our female guests consider it “just” and “normal” that men assume the superior attitudes they deem necessary to maintain family and community order (interviewee No. 7, a female social worker).

The first indicator of the normalisation of gender violence resides, therefore, within the norms of gender relations themselves. These rules legitimise the use of violence by the man, as the natural holder of a type of power inherited through the male line within the family or relational group. The element which characterises this violence is that it may be exercised also by others “in lieu of those who primarily authorised” to use it, like husbands or fathers. In the absence of the one or the other, other men, in various capacities, may take their place, attributing to themselves a form of power over women without husbands, fathers or brothers and legitimated by the group.

During my working experience, I was able to see how violence against women was perpetrated by people very close to the victim, like near relations, or even members of the clans the women belonged to or of the villages they came from. A model of proximity where the extension of borders did not reduce the possibility of abuse of the victims who, during the journey, became the property of many men (interviewee No. 5, a female social worker).

Violence, however legitimised takes place, above all, within marriage relationships, even if they are not always made known by the injured partner:

In Sciara, one female beneficiary had two children by the same father. He beat her repeatedly, secretly, mostly at night (interviewee No. 73, a counsellor).

Physical violence has a symbolic purpose too, that of frightening the victim as well as hurting her. This does not refer only to serious assault, which causes injury requiring emergency medical care, but any act of intimidation addressed to our guests, like pushing, shoving, or simulation of violence by people close to the victim. Our task as operators is also to interpret both what we witness and the information we receive. For example, economic blackmail through management of spending money is one of these (interviewee No. 7, a female social worker in charge of a facility).

Economic blackmail is one of the aspects of male domination frequently observed by the interviewees. Monopoly by the male partner of the woman's meagre sums of pocket money places the female partner in a constant position of dependence even in cases of petty purchases. Other indirect forms of intimidation consist in preventing the women from attending literacy courses within the reception facilities or professional courses outside the centre, both of which are provided with a view to rendering the women independent. These are women who before their arrival in Italy had never worked outside the home environment or at least only within the physical space surrounded by the family network, since their main job was to look after their husbands and children while keeping the home clean and tidy.

Finally, it is important to mention that category of violence known as symbolic (Bourdieu, 1988). It determines and regulates the structuring of the intersubjective codes by means of which men and women, dominator and dominated alike, reproduce male domination, permitting the reproduction and imposition of a cultural mind-set based on differentiation between genders. One of the main problems revolving around proximity violence, and which makes it difficult to hinder, is that, in many cultures, it is allowed, tolerated, legitimised and justified.

This is an approach to family based on the central role of the father, as a man, to the detriment of the wife, as a woman [...]. In some cases inequality is not seen only through a modality which outlines diversity of roles, but also establishes the veritable superiority of the man, so much so, that in cases of strong contrast it is considered "normal" that men use violence against women without needing to expect any kind of sanction, either legal or social (interviewee No. 70, a male CAS lawyer).

This patriarchal approach generates dysfunctional relational processes which perpetuate mechanisms of direct or indirect domination.

Only the tangible aspects of violence are perceived, but the exercise of physical violence within private environments is borne with because it is deemed the lawful prerogative of men.

This is a type of violence which is not perceived as such, because women consider “just” and “normal” that men assume superior attitudes, necessary to maintain family and community order, and to avoid destroying male honour, an essential element of the cultures of the non-European countries from which the women hail.

Precisely for these reasons, although the women are victims of different types of violence, they fail to recognise it, because it is normal for them to live in a state of daily subordination, due to the gender socialisation they have undergone which has inculcated in them attitudes of inferiority and submission. The only form of violence that they are able to perceive is physical, as it is the most obvious form and includes any act aimed at hurting or frightening the victim (female interviewee No. 7, a social worker at a SPRAR).

The interviews gradually revealed increasingly glaring forms of physical violence deteriorating also towards rape and sexual exploitation:

During my work experience at the CIE and the Hotspot, I noticed how sexual violence (some of the victims were men), ill-treatment and abuse were not unusual and occurred especially during the journey from the country of origin and up until the moment of landing upon the Italian coasts. This violence, which was then given to us to understand by some of the asylum seekers, was perpetrated especially in Libya. The signs on their bodies (of beatings, burns etc.) were still clearly visible at the time of their landing. Similarly, certain infections and lacerations were attributable only to sexual violence (interviewee No. 28, a male educator).

I wish to tell the story of a refugee, a Protestant Nigerian woman, who was helped financially and spiritually by the pastor of her village to travel to Italy. A minor at the time, once she had arrived, she was contacted by the pastor demanding restitution of all the money he had lent her and threatening that, otherwise, he would contact her mother and sister who had remained in Nigeria making them “pay the bill” in her stead. She immediately realised that the work she was offered here in Italy (prostitution) was at odds with her moral and religious precepts. At first, she hid the distress, so closely connected to the threat she was subjected to but finally confided her plight to a friend who helped her to turn to the operators. We did a lot for her, supporting her humanly, setting up a psychological support service etc. At present, the girl is no longer exposed to these threats nor is she easily contactable by telephone (interviewee No. 3, a female social assistant at an anti-violence centre).

There was evidence leading to suspicion that some of the beneficiaries of the SPRAR’s services were victims of human trafficking or in some way involved in trafficking associated with prostitution (interviewee No. 46, a female social assistant at an anti-violence centre).

I wish to tell a story told to me a year ago by a young woman from Cameroon, during her preliminary interview, in the presence of the psychologist and mediator. She, her husband and two daughters had fled their country because of war and reached the border with Nigeria, where, unfortunately, they were imprisoned on ethnic grounds. At the time of their capture, the two girls were murdered in the presence of their parents. The mother was held in the female prison, the husband in the male one. The woman says that during her imprisonment, which lasted about a year, she was kept in total darkness, raped every night by soldiers from whom she later had a child. As soon as she delivered the child, she cut the umbilical cord with the lid of the tuna tin. Today she lives in Italy and has had no further news of her husband since she was forced to leave the Libyan prison, without knowing where she was destined (interviewed No. 3, a female social worker).

I have noticed signs of violence (scars seen during medical check-ups at the facility), which lead me to believe that, before arriving here in Sicily, not only women but minors and men too, are victims of violence not necessarily associated only with their journey as migrants, but also experienced within their native socio-family-cultural environments (interviewee No. 45, a female educator).

The signs are evident on physical, psychosomatic and psychological level alike. These subjects generally have elusive personalities, are apparently introverted and inclined to isolate themselves; they have often lived in family environments which are deconstructive and violent from many points of view (interviewed No. 56, a male medical doctor).

The stories of the operators interviewed reveal a widespread reality of submission, patriarchal rule, male domination, echoed in most cases only by the silence of the victims which transforms their vulnerability into submission and servitude.

4.3.3.3 Violence against minors

Violence, especially when it comes to minors, is a possibility contemplated by those who choose to travel to Europe and is considered by the Sicilian operators interviewed for the Provide project as a practice commonly perpetrated. The interviews reveal an even more widespread perpetration of the violence to which unaccompanied minors, UAMs, are exposed *en route* to Europe. Many of the minors hosted by the Sicilian reception centres have undergone physical violence, been subjected to forced labour and suffered hunger, especially in transit areas where they waited before undertaking further stages of their journey and where survival itself was often an unknown.

Many of the UAMs have been victims of violence or have seen their friends or mothers abused [...] have been subjected to hard labour, to physical violence and threats (interviewee No. 23, a male animator at a SPRAR facility).

Very often the minors bear evident signs of the violence they suffered (scars, burns, amputations, etc.) during their journey, especially during their stay in Libya (interviewee No. 36, a female educator)

In the case of minors, violence is frequent precisely because their age-related vulnerability makes them easier preys to violent experiences.

Among the kinds of ill-treatment undergone we find the following: physical and psychological abuse, neglect, lack of adult referents. Exposure to violent and aggressive situations, the violence experienced in Libya, directly and indirectly, regards the majority of the minors arriving in the centres, who have been denied the possibility of experiencing childhood (interviewee No. 37, a female psychologist at a SPRAR facility).

In my experience with UAMs, in addition to physical evidence, scars, body marks, I have noted psychological symptoms and proof of violence undergone at an early age, at times reiterated and which “disorganise” the child’s personality significantly, influencing the way they relate to others. Often aggressive patterns of behaviour are due to reactions against the traumatic events they have experienced. This aggressive behaviour of theirs is a means by which the children seek to free themselves from the frustration of the impotence experienced in the past (interviewee No. 37, a female psychologist at a SPRAR facility).

I can speak about the psychological evidence (as well as of the scars observed during medical visits at the facility), which leads back to a history of violence and / or closeness to it, not necessarily linked to the migratory journey as such, but also to the person’s socio-family-cultural background (interviewee No. 45, a female mediator).

The signs are evident at physical, psychosomatic and psychological level. These are persons whose personalities are elusive, who are introverted only in appearance and prone to isolation. They have often lived in family environments that are deconstructive and violent from several points of view (interviewee No. 54, a female psychologist working at a SPRAR facility).

As to the UAMs, the risk factors regarding them are considerable; they are a vulnerable category because they are psychologically permeable because of being so very young and having undergone high-impact negative experiences at a very early age: abandonment, loss, lack of recognition and legitimacy, all of which affect their psychic identity and influence their emotional, social and behavioural makeup. Minors in this area represent a resource for various forms of delinquency and illicit organisations which take advantage of their

legal status as minors to manipulate and involve them in activities such as drug dealing, prostitution etc.

Furthermore, within the facilities for minors one risk factor is that some of the so-called minors declare themselves such despite being older in order to recruit younger ones for the criminal networks already present within the area.

The most prevalent forms of violence found among the UAMs are direct and indirect physical abuse, domestic violence, exploitation of labour, trafficking, constant threats, repeated disrupting torture. Experiences of neglect, physical and psychological abuse that have a significant and sometimes irreversible impact upon the psychic functions of minors are common (interviewee No. 23, a male animator at a SPRAR facility).

The interviewees, in addition to indicating various signs of violence noted not only upon the bodies of children but detected also by means of the behaviour of many of the minors hosted at the centres where they work, also described the rooting of a kind of proximity violence within their immediate and broader family circles. This is evidence of the presence of a type of violence that feeds on the vulnerability of the victim and on the context in which it was culturally normalized.

Some of the guests declare having suffered intra-family violence in their countries of origin, at the hands of stepmothers and half-brothers, or others related to their fathers. Some of them report an increase in similar violence after the death of the latter, aimed at obtaining certain economic and material advantages like possession of the land and / or livestock and / or the commercial activities belonging to the deceased (interviewee No. 31, a male psychologist at a SPRAR facility, non-affiliated).

The minors I work with are all boys, and few speak of the violence suffered or carried out; however, they maintain power relations among themselves, make a show of their authority or leadership within their peer groups by claiming the deference of other minors by resorting to tangible actions like being served first, jumping queues or claiming precedence over others, when it comes to delivery of benefits, etc. (interviewee No. 23, a male animator).

The forms of violence reported as having been experienced in the countries of origin are almost always of a physical and / or domestic (but never sexual) nature and generally associated with problems regarding family legacy, inheritance of blame and / or because of having been abandoned. The acts of violence narrated by the guests hosted by our centre for unaccompanied minors were experienced during the journey, for the most part, in Libya. These consisted mostly in acts of physical violence or forms of exploitation of labour (with consequent physical and psychological violence connected to “denied payment” and / or workload), or in violence associated with their vulnerable status which made them “bargaining commodities” [...]. Although

sexual violence may have been perpetrated in the countries of origin and during migration, the UAMs rarely tell about them because of personal-emotional and / or social-cultural blocks (interviewee No. 38, a female educator at a SPRAR facility).

Most of the UAMs have, during their psychological and social interviews, expressly declared being victims of violence. This not only within their own families and their countries of origin, but also, and above all, during their migratory journey and in the places where they lived while waiting to undertake their journey to Europe. Before arriving in Italy, they underwent physical and sexual violence and were subjected to inhuman treatment and forced labour (interviewee No. 44, a female mediator at SPRAR facility).

The forms of violence suffered in their countries of origin are almost always physical and / or domestic (rarely sexual) and due generally to issues of family inheritance, forced marriages or juvenile recruitment.

Geographically speaking, the acts of violence relating to the migratory journeys which the minors report almost always regard Libya, Algeria or other countries of transit. They are of a physical nature, involve deprivation of individual liberty, exploitation of labour, or violence associated to their condition as “bargaining commodities” (saleable “goods”, therefore). The reasons for this latter treatment are always traced back to their status as migrants or, more in general, to racism. Although they may have been subjected to acts of sexual violence both in their home countries and during migration, the UAMs rarely tell about them due to some personal-emotional and / or social-cultural mental blocks (interviewee No. 45, a female mediator).

Minors who constitute the most vulnerable group have often been victims of violence or witnessed acts of violence perpetrated against friends. Within their own families to begin with or in their country of origin, they have often been neglected, discriminated against and marginalised. They are left to face their journey of hope towards Europe in total solitude, to reside in places where they often suffer hunger, are subjected to hard labour, to physical violence and threats. They often have to hide from the authorities and have no access to education and health care, are initiated to prostitution, forced into child labour or enrolled as soldiers (interviewee No. 47, a female educator at SPRAR facility).

Enormous scars, flesh wounds too evident to have been self-inflicted, etc. Often the children have been subjected to the religious rites of a traditional or minority cult, practised directly or legitimised by the family. In some cases, the ill-treatment is perpetrated by individual family members who are particularly “powerful”, with the intent of bringing the young people into the fold or punishing them if they or their families seek to abandon it.

As regards their emotional and psychological dimension, these children are often orphans, or having been abandoned by their parents have failed to be adequately accepted by the broader family circle which exploits them or tries to make them submit through the use of physical violence or deprivation (interviewee n. 54, a female educator).

4.3.3.4 Forms of violence against vulnerable victims of proximity violence and widespread problems

The violence described and observed by the operators all have as their object the bodies of the victims which they exploit to subject people – women or minors – who are exposed to the will of their persecutors.

The large number of excerpts drawn from the interviews conducted, highlight specific cases of violence. We have preferred to place other more heinous accounts into a general scheme, dividing them into topics all belonging to the macro-category of proximity violence.

These are:

- Physical violence: physical torture (beatings, exposure of people to the sun without water or food, exposure of the person to electrical current).
- Psychological violence: psychological torture (forcing people to remain in the dark without any notion of time in order to disorient them, death threats against them or their family members).
- Sexual violence: from rape to female genital mutilation, otherwise, sexual exploitation for financial gain (victims of trafficking).

Similar forms of violence would not have been possible without the convergence of two factors: the victim's condition of vulnerability, oppression transformed into victims' trust in the perpetrator.

The problems most frequently encountered, and the violence undergone regard most often abandonment, parental neglect, physical and psychological abuse, torture, forced labour, various forms of exploitation. These experiences are the ones which affect normal, emotional and relational development and a sense of identity, the most (interviewee No. 49, a female psychologist working at SPRAR facility).

[...] forced labour, malnutrition, etc.; sexual violence (women raped repeatedly by different men, sold as slaves and forced to submit to violence; amputation of the genitals of both homosexual and straight men, etc.); psychological violence (death threats against them and their families, etc.); gender-based violence (discriminatory acts relating to ethnic groups, political, social and sexual orientation) (interviewee No. 55, a female social worker in charge of Hotspots).

During the over 25,000 medical examinations carried out at the health-care clinics of the Extraordinary Reception Centres as well as those of the Hotspots, most of the cases of physical violence (burns, bodily injury caused by blunt instruments (rifle butts), burns caused by electric current, wounds, tying of hands and feet) reported, regarded periods of detention in Libya. Certainly, the types of violence most frequently reported were of a sexual nature and often depended on the traditional customs of the countries of origin. It may be said that most of the women hosted by the centres were abused in particular during their stay in Libya. This situation does not exclude men, minors and homosexuals (interviewee No. 56, a male medical doctor). In almost all cases, the migrants I helped as a lawyer to apply for humanitarian protection, once they had passed through Libya, were considered assets belonging both to the traffickers who acquired them and the people for whom they had been forced to work. They were considered saleable goods whose sole function was the production of profit. The persons, so totally deprived of all rights and recognition, having been reduced to the status of a mere instrument, had no choice but to carry out all that was imposed upon them. In a relationship such as this the compensation granted to the migrant workers was exclusively avoidance of violence and the food deemed barely sufficient to permit them to go on working (interviewed No. 70, a male legal operator at the Badia Grande cooperative).

The testimonies provided by the interviewees describe and explain the nature of the phenomenon in great detail. The last of those we report in this section were provided by the coordinator of a Hotspot and, in our opinion, sums up in exemplary fashion what has been presented so far by all the previous testimonies:

- Out of the 30,500 migrants hosted by the Hotspot about 90% are victims of violence.
- The kinds of violence reported are: physical (torture, forced labour, malnutrition, etc.); sexual violence (in the case of women being repeatedly abused and raped by different men, being sold into slavery and forced to endure violence; in the case of both homosexual and straight men amputation of the genitals, etc.); psychological violence (death threats against the victims and their families, etc.); gender-based violence (discriminatory acts relating to ethnicity, political, social and sexual orientation).
- Violence in all these forms is perpetrated against women, children and homosexuals. This phenomenon has increased because of longer permanence in Libyan migrant camps due to the closure of the Italian ports (interviewee n. 55, female social worker and coordinator of a Hotspot).

4.4. The main problems detected

4.4.1 Fear

The interviewees were also asked to describe the main problems surfacing when taking charge of migrants, victims of violence⁵.

The first problem is the fear these vulnerable subjects continue to feel; a fear that was produced by a journey during which they risked dying and the signs of which are still visible on their bodies, as one of the operators informed us:

One serious issue is that caused by the trauma suffered by many of the women who, during the sea crossing, are placed along the edges of the boats, unlike the men, who sit at the centre of the vessels. During the journey, saltwater entering into contact with petrol, creates a chemical mixture which is very damaging to the skin and causes fourth-degree burns which have extremely harmful effects on the human body. The situation is terrible, because this way the women in question lose a large part of their skin; the care they require later on is very lengthy and delicate (interviewee No. 7, a female social worker).

Fear caused by sexual violence, found in female victims of trafficking in particular:

Violence experienced during the sea voyages to our shores. Often the women are sexually abused and forced to endure unwanted pregnancies, due to rape perpetrated by the traffickers during the journey (interviewee No. 7, a female social worker at a SPRAR facility).

The extent of the problem is difficult to quantify as women struggle / are afraid to report those who exploit them although there are many grounds for suspicion (exchanges of money, both Italian and foreign persons who come to pick them up, termination of pregnancies by the women) of involvement in criminal activities at the centre where I work, exploitation of female prostitution against women (interviewed No. 46, a female educator at a home shelter for female victims of violence).

Based on my many years of experience, I can say that the greatest difficulty migrants, male and female, encounter when telling the operator about the violence undergone, is fear of accusing a person who at that precise moment represents their point of reference in an unknown country: someone who has accompanied them and may be their spouse or sibling and so on (interviewee No. 56, a male medical doctor).

⁵ The main question asked here was: "What are the main problems and kinds of violence that have emerged most?"

The interviewees emphasised, on the basis of their experiences, problems referable also to the cultural milieu of the victims' places of origin which keep them in a state of continuous subjection:

The issue is essentially cultural. In actual fact, depending on the geographical origins of the women, similarities and differences are found as regards the relationships established between the two sexes. The basic problem is that, at the root of these dysfunctional relationships, we always find, on the one hand, women considered as victims, therefore, subordinate and submissive, on the other, men considered superior and dominant, compared to the female (interviewed No. 7, a social worker at a SPRAR facility).

Interviewee n. 3, a female operator who has been working for years in a reception centre for women victims of trafficking, recalls three particular cases:

Total closure of communication with the operators of a 34-year-old woman who remained in the facility for 6 months. She refused all help. Her attitude was always one of closure.

The absolute reserve with which another 19-year-old woman, currently a guest of the facility and who was helped by means of the psychosocial interviews conducted in the presence of a mediator and, above all, accompanied throughout the entire course of an unexpected and unwanted pregnancy.

The inability to enter into relational contact with another 24-year-old woman who escaped from the centre after only 4 days of hospitality, as she did not consider the facility where she was hosted safe and kept on recalling, obsessively, the torture and violence she had been subjected to repeatedly.

4.4.2 Language difficulties

The plurality of the backgrounds, both national and regional, of the migrants who have landed in Italy over the past few years has posed a challenge to the reception system, especially at linguistic level. The answers to the questions *Are there communication problems with migrants (language, culture, attitude, etc.)? If so, how are these problems addressed and managed?* reveal that the language barrier is one of the greatest problems encountered daily by the operators

Many of the problems that emerge most frequently are related to inability to communicate due to failure to understand one another linguistically (interviewee No. 7, a female social worker).

This occurs mostly at first-stage reception centres, which have larger reception facilities and, therefore, accommodate greater numbers of migrants of different nationalities, as soon as they land in Sicily. Communication during initial contact plays a fundamental role as one of the main pillars upon which to establish a relationship of trust and understanding, especially after the trauma of the journey. Furthermore, it is during this phase of initial contact that migrants are informed regarding the entire process required to seek asylum and access rights.

Since our centre is the very first one the migrants enter, it is clear that language creates an obstacle which is not easy to deal with. In this regard, our team avails itself of competent mediators and interpreters, who help break down the communications barriers and implement the procedures best suited to the needs of the beneficiaries (interviewee No. 19, a female social worker at a SPRAR facility for UAMs).

Upon arrival, most guests speak only the local language of their country or region of origin; their attitude is almost always elusive, resigned and accommodating. Initial contact is mediated thanks to the intervention of the guests present in the facility the longest, who have assimilated the rules of community life and acquired security and serenity. The contribution made by the latter is extremely important as they help speed up the process of adaptation and the demolition of the barriers of distrust and fear of being oppressed. The direct and concrete testimony of their facility-mates is one of the most valid tools of which we can avail ourselves.

Over time, the guests begin to understand Italian and learn to express basic concepts. Their learning speeds depend on their own intrinsic characteristics. Moreover, it has been frequently noted that this seems to be inversely proportional to the number of other guests with whom the newcomers share a language: the lower the number of fellow-nationals present, the faster the guests learn Italian.

In any case, the facility is endowed with cultural mediators and the *Badia Grande Cooperative* can count the collaboration of numerous specialised mediators, native and naturalised speakers, who intervene if necessary (interviewee No. 54, a female coordinator of a SPRAR facility).

Although many of the migrants come from the former English and French African colonies where English or French is their European vehicular languages, often spoken by the cultural operators or the mediators, some of the migrants speak languages that tend to make communication between the operators and guests more difficult. Problems of communication are particularly evident in the case of migrants belonging to ethnic minorities. Communication between speakers of English / French and minors who speak only Urdu, Punjabi, Bengali, Arabic, Tigrigna, Somali etc. becomes almost impossible (interviewee No. 33, a female educator at a SPRAR facility).

There are various problems related to communication in general and these emerge constantly and on a daily basis with these beneficiaries. Cultural differences due to language, attitude and verbal communication can sometimes interfere with the relationships with the other, but thanks to the simplicity of the topics addressed (except in the structured interview where the presence of a mediator is required) and to the simplicity of the environment in which the guests live, situations of stalemate can be overcome (interviewee No. 40, a female educator in a Fami).

4.4.3 Cultural difficulties

If communication is one of the main problems met when seeking to understand migrants' needs, cultural divergences are a fundamental aspect of communication with migrants. Socio-cultural issues arise in circumstances regarding every aspect of everyday life and often create misunderstandings on the part both of the migrant and of the operator.

Problems of communication do not end with the removal of language barriers but everyday life brings to the surface problems related to attitudinal habits and modes of thinking / beliefs deriving from the migrants' social-cultural systems of origin which, when they come into contact with the Other, can create misunderstandings and therefore represent operational and communicative obstacles to the life of the community and the guests' process of "adaptation" (or reorganisation of their Selves). We try to overcome these problems by relying on the presence, alternating it with that of the operators, of an intercultural educator-mediator, so that he/she may pick up on signals of potential problems or ways of resolving them, have them dealt directly with the actors or communicated to the multidisciplinary team with a view to drawing up concerted, dedicated operational solutions (interviewee No. 38, a female educator at a SPRAR facility).

We work with guests coming from cultures that are very different from those of the west. I believe that the systems of meaning, of reference and the cultural codes we use to view experiences are completely different. Linguistic differences are certainly a problem, but we must consider that communication is not only verbal, but that non-verbal communication, the most primitive of unconscious modes, influences the way we communicate and often unknowingly determines our relationships with others. Furthermore, cultural / sexual differences can, at times, create difficulties and misunderstandings (interviewee No. 37, a female social worker).

As regards culture and attitudes, the operators know how to grasp and are accustomed to doing so what they perceive dissonances regarding the standards typical of the migrants' socio-cultural backgrounds, with which they are

familiar with due to their training and research experiences, as well as to indirect experience acquired thanks to the stories and vicissitudes narrated by the UAMs, as well as their own direct observation (interviewee No. 54, a female coordinator of a SPRAR facility).

The communication problem is overcome when a relationship of trust is established, though it obviously takes time to consolidate. In the centres where the migrants reside for a long time, this can be achieved. When a relationship is consolidated, and fully respects roles and rules, it is possible to undertake a journey together.

It is quite a different matter when migrants remain for a few days only, as in the case of the Hotspots, where everything we have mentioned above has to be squeezed into a handful of days. In any case, the centres to which vulnerable guests are transferred are informed by means of a medical or social report.

Yes, sometimes communication problems with migrant are considerable, linguistic differences and cultural differences affect the management of everyday life and the relationship of trust that needs to be established. For these reasons, the training of operators and the constant supervision of the team and actors involved are fundamental (interviewed No. 72, a social assistant coordinator of a CAS structure).

The main problems concern the difficulty of adapting to our culture (that is, to the set of beliefs, traditions, social norms, practical knowledge, products etc. typical of a western country). These are usually addressed with the help of a cultural mediator (interviewee n. 73, a social assistant coordinator of a SPRAR facility, non-affiliated).

4.5 The intervention

One area of the interview concerned measures designed to support migrants, victims of violence, whether implemented or planned by the professionals interviewed⁶.

Similar intervention is applicable from the first days after landing and reception by the Hotspot:

The intervention and activities in favour of the victims of violence have been and continue to be guaranteed within the Hotspot by the psychological-social team. The various professional figures present provide responses to needs of a psycho-social nature to support victims, though these differ in type and

⁶ The main question asked here was: “What type of intervention was implemented, or do you plan to implement?”.

level. The activities are characterised by the continuous presence of intercultural linguistic mediators, thanks to whom it is possible to enter into a relationship with the guest and create a rapport of trust typical of the various aforementioned professions. The presence of women professionals also guarantees the possibility of paying particular attention to people belonging to vulnerable categories like victims of torture, of violence / abuse, minors, people with disabilities, people presenting with mental or social disorders and the elderly. The psycho-social team is present right from the initial reception phase, with a view, thanks to preliminary observation, to identifying cases of evident vulnerability and compare notes with the various international organisations present at the port during the landing and to which they report the cases of vulnerability also registered by the naval authorities which rescued them, so as to be able to take immediate charge of these guests.

Cases of vulnerability are also reported to the team by the staff of the centre's infirmary, which knows how to identify signs of violence or distress during medical examinations. In relation to the duration of the guests' stay, the team tries to heed the various guests hosted by the Hotspots, screened by means of an initial interview of a cognitive nature, after which, a personal file regarding the guest is compiled. During the compilation of this file, which provides a description and survey of various aspects concerning the guests, the social worker will have the opportunity to evaluate their personal histories, their non-verbal attitudes / behaviour, as well as possible distress on their part. If there are signs suggesting that the guests are vulnerable, this will be reported both to the psychology service and to the health-care service present at the centre.

The socio-psychological service, after assessing the degree of vulnerability of a guest, will outline and undertake a procedure of support and care. When the vulnerability is linked to mental distress, the mental-health-care department of the socio-psychological service, will be contacted within the time limits foreseen. This action provides, moreover, for the identification of guests with average mental distress and their transfer to centres specialised in the reception of people with mental health problems. In cases of vulnerability, the team draws up a discharge sheet to signal both the vulnerability and the work done by the team so as to ensure continuity and further in-depth action by the next team. The team, once it has identified cases of vulnerability, informs the Director of the centre, who then informs the Prefecture so as to identify the reception facility best suited to the guest's needs (interviewee n. 55, a female social worker at a Hotspot).

From this, as well as from the majority of the answers provided, it is evident that in most reception facilities intervention is activated by multidisciplinary teams composed of coordinators, social assistants, psychologists, mediators, interpreters, legal experts, children's rights experts, educators, counsellors, auxiliaries, night workers (the latter only during first-stage reception), aimed at the social integration and psychological rehabilitation of

guests. The teams also endeavour to encourage them to attend the laboratories aimed at a type of integration based on acknowledgement of different cultures. This in compliance with models of integration based on *and / or*, *not on either/ or*, which take into due consideration systems of meanings familiar to the minor and his/her culture of origin.

All the guests taken in charge are supported and assisted, are guaranteed correct information regarding their status and the reception solutions available to them, in languages and ways they can understand. Minors are assured living conditions suitable to their age, well-being and phase of development. The standard operating procedures identified by the Ministry of the Interior are respected. Group work and cross-referencing of the information gathered through the interviews held and observation of the migrants, are the main tools used to ensure adequate assessment of the greater interest of the vulnerable subject, especially if a minor, and to launch action at multiple levels (health-care, psycho-social, legal, socio-educational, training) capable of guaranteeing multilevel charge-taking.

The social operators, whose main aim is the protection of the fundamental rights of every human being, undertake a process of awareness-raising regarding women, through the creation of customised projects, since the uniqueness of each woman and her individual characteristics, need to be taken into account. The purpose is to review and reread using a new interpretational key, the events of the past, in order to rewrite a new biography for each migrant, protect their rights while respecting their natural inclinations and abilities. This is one of the social workers' main objectives, because very often the women are not aware of having rights that need to be protected and respected. The effort made by the social workers in this regard is considerable and manifold, because these migrants are women who do not know the meaning of the word "right". Despite the help provided by the cultural mediators, who use synonyms to convey the meaning of the term "right", for example "equality", "equal treatment", it is hardly ever possible to get these people to understand the meaning of the word, since an equivalent of the lexical item "right", which might help them grasp the enormous value that word bears, is not a part of their present-day cultural vocabulary (interviewee No. 7, a female social worker in charge of a facility).

The objective is to protect and guarantee the well-being of asylum seekers by ensuring their safe reception and custody, ascertaining their age (where necessary), tracing their families (in cases of UAMs), taking adequate psycho-socio-health and legal charge of them and providing them with due access to health and educational amenities through the activation of quality services and through synergistic cooperation with the competent authorities, with the socio-psychological system and those who support the system.

The methodology adopted is based on reception and social support, in a positive environment of compensation and rehabilitation of subjective disharmonies (vulnerabilities, cultural shocks etc.) where the guests are proactively helped manage every aspect of their daily lives. Simultaneously, thanks to all

the intervention made available (health-care, psycho-social services, etc.), “cultural-capital” development procedures are set up to safeguard the migrants’ identity of origin, facilitating both their adaptation to a new cultural context, and coexistence with migrants from different ethnic, social and religious backgrounds. The methodological approach adopted places at its core intervention favouring the migrants, considered as active subjects capable of knowingly participating in the choices that concern them, if adequately supported. This methodology rests upon 4 cornerstones: personalised institutional, group, sectoral and inhouse/ or external action provided by the network (interviewee No. 2, a female social worker in charge of the sector).

The team pays considerable attention to the indicators of distress the migrants reveal:

The intervention is differentiated on the basis of degrees of pain, awareness and elaboration of the violence suffered and reported during the interview and how this negatively affects the construction of the subject’s identity (if he/she is young), their self-esteem and how this functions in social and relational terms. The SPRAR team which takes charge of the migrants from a psycho-social point of view; area agencies like the ethnopsychiatric clinic at the Trapani Asp or the Mental Health-care centre may also be notified (interviewee No. 31, a male psychologist, non-affiliated).

Particular attention is also paid to UAMs for two opposite reasons. If, as a result of the Zampa Law⁷, asylum seekers from certain nations are considered migrants for predominantly economic reasons they may be expelled, this can prompt them to declare a lower age in order to be allowed to remain in Europe; in other cases, like those of female Nigerian minors, age may be increased to favour exploiters who advise the girls to declare being adults so as to avoid further protection by the Italian authorities.

As regards self-styled minors, age is assessed within the facility with the ASP. However, to date, despite reports to the authorities of dubious or problematic cases, no procedure and / or transfer of these migrants to more suitable facilities is implemented.

From the moment of their arrival, that is, immediately after disembarking, personalised psycho-social intervention for UAMs is activated in consideration of the psycho-physical traumas caused by the precariousness of the journey, as well as by painful personal experiences. The multidisciplinary team takes charge of the UAMs and sets up social interviews to go more deeply into the migratory issue and outlines intervention, aimed at identifying vulnerabilities, including those of a psychological nature availing themselves of specific examinations / psychological tests or consultations. In consideration

⁷ See <https://www.altalex.com/documents/leggi/2017/03/29/minori-stranieri-non-accompagnati>.

of the memorandum stipulated with the ASP Health Department of Trapani for the care of minors with psychic vulnerabilities, those who need it, are accompanied through all the steps deemed necessary to implement the therapeutic and rehabilitative action suited to the needs especially of the vulnerable cases requiring specialised psychiatric or psychological intervention.

This procedure is carried out thanks to the FAMI SILVER project and with the intervention of the ethnopsychiatric outpatients' clinic of Medicines Sans Frontiers with which we collaborate with a view to identifying, taking charge of, reporting and documenting children's vulnerabilities. The protocol foresees that the multidisciplinary team of each single UAMs facility shall promptly report cases requiring specialist treatment to the mental health services and by availing itself of the services available, organize the intervention required. The project's multidisciplinary team presents the cases and outline their specificities, writing a psychological and medical report where necessary. In addition, the facility provides specialised intercultural linguistic mediators to deal with the translation of interviews and specialist visits as well as an operator (educator, social worker, psychologist, etc.) who accompanies the child.

The team's social workers and psychologists handles *relations with the various international organisations* like Save the Children, IOM and UNHCR in order to resolve cases after they have identified possible victims of trafficking and violence. The interviews with minors are carried out following a given methodology and in a suitable setting, where programmed, structured, verified spaces for decompression of tension and listening are created. In these spaces, activities and moments dedicated to listening are planned to cater for the needs of UAMs, their fears and needs, providing ways for them to participate. These spaces make sure the UAMs see that their point of view is taken into serious consideration and that they receive answers to requests and to the critical points that emerge. The operators of the different facilities are trained by the system's organisations (in particular by the UNHCR, who hold scheduled meetings constantly) to adopt a "flexible, open, available and communicative" approach when planning the interviews and choosing the activities and appropriate places in which to hold them. The operators' expertise in the socio-legal field is also enhanced.

Furthermore, experience teaches me that involvement with young people who arrive in Italy following difficult and often traumatic journeys, with different backgrounds and origins, as well as very varied cognitive and relational skills, requires a very special and varied spectrum of attention modes. At the beginning, great difficulty is encountered when dealing with foreign minors since their precarious and unstable conditions do not always favour serene, aware participation. This is why it is fundamental and extremely important to guarantee structured planning of activities and precise organisation of activities within the facilities which focus on themes proposed by the children themselves. These are a priority because they provide the minors with simple, comprehensible tools they are able to handle as protagonists of the activities which are designed to allow them to handle the methods and the contents (interviewee n. 2, a female social worker and area coordinator).

Experiences of violence, abuse and deprivation are a constant with most of the guests who arrived in the facility, regardless of whether this violence carried out or not in proximity, so the team is trained to deal with this delicate area of intervention.

The actions that are implemented concern primarily hosting and the establishment of a relationship of trust which permits, first of all, the construction of a zone of comfort and security. Although some multidisciplinary teams within the reception centres are able to identify certain types of distress, especially those at psychological level, the regional health service is not geared to receive this type of guest, for linguistic and cultural reasons.

Once the overall health of the guest has been ascertained upon entry, he/she is then examined also for signs of physical violence or trauma caused by aggression like old scars, amputation, structural abnormalities of the bone and / or of the muscle. Then a series of dedicated cognitive, legal, social and psychological meetings are held with the guest to investigate the areas within which actions of support and/or specific intervention may be set up.

The multidisciplinary team then meets to discuss the cases reported by the various professionals involved, and generally agrees on a period of careful monitoring and observation, followed by further team meetings aimed at sharing their respective observations which are then used concretely to outline specific intervention and lodge the reports due to the third parties responsible for the protocols.

The “Silver project” team collaborates with the “Medicine sans Frontiers” organisation and the ASP Health Department in favour of migrants’ health, especially when guests are in states of vulnerability and pain, by turning to a group of specialists, operating within the National Health-care services, and which, informed by our report, decides whether or not to take charge of the minor (interviewee No. 54, a female educator).

Within the cooperative, many of the interviewees consider the presence of the multidisciplinary team as a strength when taking charge of migrant victims of violence:

In the facility where we work as a multidisciplinary team, we take the characteristics of the recipient of the service, the objective aspects of the experiences undergone and reported and subjective perception of this experience into due consideration. Space is also allotted to anthropological-cultural consideration of what is reported, in an effort to view distress within cultural categories which permit us to obtain a closer and more thorough grasp of the minor’s environment of origin.

Legal, social and psychological interviews are held to enter more thoroughly into areas of vulnerability, by re-elaborating the experiences the migrants underwent when seeking to reach Italy, like departure from home, the losses suffered, separation from the family.

In cases of physical vulnerability, work is carried out by the national health service which resorts not only to linguistic mediation but also to that provided by inhouse operators capable of interfacing with the external medical services.

In the case of psychological vulnerability, the facility's inhouse psychologist takes charge and outlines a procedure to follow. In cases where external specialist intervention is deemed necessary, we refer to the Silver project created for the well-being and health of migrants and which provides intervention by a team specialised in the care of minors – comprising a child psychiatrist and a developmental psychologist – which takes charge of and treats the child (interviewee No. 37, a female psychologist at a SPRAR facility).

The team then deals with the various stages of the charge taking:

As far as possible, the problems brought to light by the guests are addressed and resolved by means of continuous observation by the operators and thanks to operational strategies discussed and considered during scheduled multidisciplinary team meetings set up to deal with the issues from various points of view: professional, cultural and attitudinal (interviewee No. 37, a female psychologist at a SPRAR facility).

The team itself provides support to the migrants through various kinds of intervention. It is also worth mentioning that different international organisations with branch offices in Sicily deal with specific cases and the various phases foreseen for the charge-taking of asylum seekers. Of these organisations, the UNHCR and EASO handle applications for asylum and identification of the specific needs of migrants, Save the Children deals with unaccompanied minors, IOM with victims of trafficking.

Following several aspects (legal, social, psychological, observation of educators, multidisciplinary) of analyses regarding individual cases, it is possible to opt for different levels of intervention: from everyday educational-rehabilitative support within the facility, to time-planned single psychological-support interviews with the facility's inhouse psychologist (with the support of qualified mediators), to reports to the respective institutions (for example, territorial Commission, prefecture, etc.) and, in the more delicate cases, requests for the external psychological support of specialist institutions. Currently, our Cooperative has an active agreement with the A.S.P. "Silver" project (which activates the socio-psychological support of a multidisciplinary team comprising a child neuropsychiatrist, a developmental psychologist and a social worker), is in partnership with the social services of the Municipality of Trapani when obliged to report situations of high-risk delinquency; it is also engaged in continuous collaboration and can count on the ongoing support of international organisations involved in the sector like Save the Children, the UNHCR, IOM and EASO. Furthermore, for a period of time, our facility availed itself of the psycho-social services of the Prefecture's experimental "PUERI" project (interviewee No. 38, a female educator).

4.6 The network

One of the questions foreseen by the interview sought to explore the issue of networking⁸. A minority of respondents – 7 in all – claimed that there was no real network as such but only intervention that occasionally involved other organisations / institutions. However, most of the interviewees, besides indicating the presence of internal (between Hotspots, CAS and the SPRAR belonging to their own cooperative) and external networks (between them and the ASP, the Prefecture and the other organisations present within the area), described when and how they enhanced the work of the operators by helping them overcome critical issues. It is not a question of simply guaranteeing health and primary care by issuing an STP, that is, a temporarily permit. The construction of networks – according to the interviewees – is indispensable when seeking to gather data, exchange experiences, propagate best practices. The development of local networks is a starting point from which to begin work with victims.

We belong to a network which includes the Prefecture, the Municipality, the Police Headquarters, Frontex, EASO, UNCHR, IOM, Save the Children, CIR, PUERI, INMP, the Hospital, the ASP Project, the Voluntary Misericordia Association, the Italian Red Cross, etc. The various actors named above follow procedures regulated by protocols stipulated between the individual members, but also by the Standard Operating Procedures provided for in a roadmap for the management of Hotspot (interviewee No. 55, a female social worker, coordinator of a Hotspot).

The institutional actors involved belong to a network. The Cooperative collaborates with the municipality, a partner in the project for foreign minors within the area set up to help provide minors with the best possible assistance. As regards the provincial health office, considering that our territory is in a favourable position when it comes to reception, the ASP has drawn up a project that evaluates and addresses the psychological vulnerabilities of migrants called the Silver project. Moreover, the ASP's mental health-care department has instituted an ethno-psychiatric clinic with a team of operators trained in mental health-care of migrants, run in collaboration with the Medicines sans Frontiers association.

The prefecture, the body responsible for the many reception projects (Pueri) managed by the our Cooperative, has set up, in conjunction with the ministry, a project for the identification of vulnerabilities in minors as soon as they land, so as to refer them to the teams of social workers and psychologists who

⁸ The questions asked were the following: “Is the institutional actor interviewed here (prefecture, municipality, hospital manager, etc.) networked with migrant and anti-violence reception services?” If so, which? And how do they operate together?”.

follow children from the moment of their landing to their transfer to a first-stage reception facility. Since the Cooperative has been operative in the Trapani area for several years, it has been able to build and organise interactive structured operational procedures in collaboration with the police, to handle, for example, the issue of residence permits for minors.

There is also a network that works well with the territorial associations with which the Cooperative has established and renewed collaboration. In addition, as part of the very first Fami reception project, it has been able to avail itself of the training and supervision provided by the UNHCR, IOM / IOM and Save the Children and, in the case of family reunification, it has worked with EASO (interviewee No. 37, a female psychologist at a SPRAR facility).

As regards women victims of trafficking, the operators lament a lack of cooperation with specific anti-violence centres:

The SPRAR where I work hosts single-parent families comprising women and children – at present Nigerian women victims of trafficking and prostitution. The help provided involves the mental health department, counselling and the SERT (national health agency for addiction), but, to date, the facility has never collaborated with anti-violence centres (interviewee No. 3, female educator).

The services with which one often enters into contact here in Palermo are those provided by the ASP, by international organisations like IOM and UNHCR and by local anti-violence associations (interviewee No. 61, a female social worker responsible for the facility).

However, as interviewee n. 2, a female social worker in charge of a facility, observes,

Collaboration with the network would improve if there were branches and specific protocols for the care of migrant guests staffed by competent professionals specialised in reception as well as mediators and operators specialised in guidance and in dealing with certain situations. Collaboration with the network would improve if meetings were held periodically between the facilities' team and the various services, organisations and institutions that deal with the phenomenon.

Furthermore, it is reported that in the Trapani area:

There is no network with anti-violence centres. There is active collaboration between the organisations and facilities present in the area. During 2017, for example, there was the Medicines Sans Frontiers' psycho-social team comprising a doctor, a psychologist and a mediator in the Extraordinary Reception Centres, who, in close contact with the centres' professionals, attended to their guests, providing individual or group interviews, to bring to light

cases of obvious or concealed vulnerability. Some of the guests then underwent therapy at the Trapani Asp Ethno-psychiatric clinic. Therefore, the first step is to make a report to the specialist services, so as to set up a therapeutic procedure with the victim (interviewee No. 56, a male doctor).

Besides:

Within the Trapani area there is no collaboration with the anti-violence desk for adult men (interviewee No. 65, head of a CAS, male).

From the answers obtained, it is clear that all the interviewees consider networking fundamental if female and juvenile victims of violence are to receive positive help. It is also fundamental to guarantee the integration and acceptance of the migrant in a completely different territory from that of origin. It follows that the interviewees are aware of the importance of adopting a network approach capable of taking people as whole beings into due consideration. Networking would also eliminate the risk of sectoral intervention, by recurring to an integrated logic capable of favouring the well-being of victims of violence.

The territory was actually better equipped to receive female victims, especially victims of violence and trafficking. However, due to the predominantly male flows and the normalisation of the violence they experienced during their journey, especially in Libya (IOM, 2017), the reception system has had to address the problem of the “atypical” male victim of violence.

4.7 The procedures activated

One of the questions that we believe has been most fruitful, concerned the procedures implemented in the case of the identification of victims of violence⁹. Only six of the interviewees claimed having had to deal with situations regarding potential victims of violence.

When the refugees disembark, the organisations present can lodge a report with the doctor at the Hotspot clinic concerning vulnerable cases like women with suspected pregnancies, victims of violence or trafficking, or cases of psychological vulnerability like trauma. The doctor, with the help of the mediator, carries out the medical and physical examination to evaluate, after a case-history interview, the extent and severity of the physical harm. Consequently, the first step is that of activating a procedure of psychological support. Moreover, if the violence is recent, has occurred, therefore, in Italy, attempts are made to involve the authorities (interviewee No. 56, a male doctor).

⁹ The questions were the following: “When a case of violence is reported, how do you act? What procedure is activated?”.

Furthermore,

If violence is suspected, the first step is usually taken by the legal operator in synergy with the psychologist and the mediator (Interviewee No. 11, a female social worker).

A female educator at a facility in Catania listed the following procedural steps:

- specific procedure managed by the centre's team (psychologist, lawyer, social worker and doctor);
- report to the anti-trafficking body;
- specific reports, upon request, to the territorial commission, for example;
- depending on the cases, admission to the ethno-psychological clinic;
- report to the central service.

Fundamental is the intervention of the social worker who, in collaboration with all the other operators, initiates action aimed at supporting the victims and possibly accompanying them along the route permitting them to escape from the circuit of violence. This phase requires knowledge and the ability to accompany the victim. Often, during the preliminary interview, the victim is not even aware of having been a victim of violence. This first step is followed by a phase of awareness: this is generally the most delicate stage of the journey, since the victim is often ambivalent in attitude, oscillates between the need to be protected and a sense of guilt for the consequences that may arise (interviewee No. 7, a female social worker in charge of a facility).

Finally, individual pathways are activated following the inhouse psychological interviews, and thanks to networking and collaboration with the socialising agencies, educational institutions, external and health-care services present in the area, such as the ethno-psychiatric, neuropsychiatric and legal clinics (interviewee No. 34, a female educator).

Our psycho-social team is alerted to arrange individual meetings with the guests indicated. The psychologist carries out her psychological interviews and the social workers those regarding their field. At the end of this procedure, detailed reports are provided and a specific "vulnerability report form" is filled out and sent to the centres chosen to host the guests. At our centre the guests remain only a few days (from between 24 and 48 hours) (interviewee No. 55, a female coordinator of a Hotspot in Messina).

Then:

The person is taken in charge immediately by the psycho-social team, while the Police Headquarters and the Prefecture are informed through presentation of a psycho-social report regarding the specific case, also with a view to identifying the location best able to cater for the needs of the person in question.

If the case requires it, the next step is the activation of the various support networks external to the facility like the IOM in the case of victims of trafficking, the ASP for ethno-psychiatric support, the Municipality and Prefecture for the identification of suitable centres, the Police in cases of crime and applications for asylum, etc. (interviewee No. 55, a female Hotspot manager).

In the case of unaccompanied minors, the procedure is different:

Admittedly, as already anticipated, declarations and reports of violence are rarely forthcoming (in particular in cases of sexual and / or gender-based violence). In the case of most of the UAMs taken into charge, after the multidisciplinary investigation has confirmed suspicions of abuse / proximity violence, we proceed along a documentary route which foresees requesting International Protection by presenting a consequent multidisciplinary and psychological report (attesting to vulnerability). It has never occurred, as far as the minors with which my team has come into contact are concerned, that specific requests of International Protection for victims of violence have been made (interviewee No. 38, a female educator at the Fami facility).

Although identification of the violence experienced by asylum seekers is not one of the main reasons for applying for asylum (even if the interviewee does not provide a specific definition of violence), it is acknowledged and subsequently documented in order to strengthen or bear witness to the request. Moreover, the violence suffered is often recognised, even before the Decree n.113/2018 was promulgated, as a cause for humanitarian protection for victims both of trafficking and of torture.

4.8 Best practices and need for inclusive policies: the operators' proposals

4.8.1 Best practices

Finally, the interviewees were asked whether the colleagues working in the same facilities as themselves were able, despite the need for training, to deal with problems concerning victims of violence¹⁰. For 46 of the 78 interviewees, their colleagues are capable, thanks also to the experience acquired over the years.

Definitely yes, but I realise that these skills are not the fruit of specific studies (at least for some) but of assimilation and understanding of previous experiences or, at times, the result of personal attitude (innate or induced). I have

¹⁰ The question was: "What, in your opinion, are or might be, examples of inclusive policies for migrant women, in particular for asylum seekers and refugees who risk violence and discrimination?"

noticed that there are no institutions or theoretical-practical study paths that aim at providing specific training regarding these problems to any of the professionals involved or who are preparing / prepared to undertake this type of work and, therefore, willing to deal with this kind of guest. I would also activate a permanent study service aimed at updating the institutions and operators regarding new types of violence / torture / proximity that may “surface” and / or that have been produced by natural changes in society (interviewee No. 38, a female educator).

Yes, the project on which the service is based was approved by the Ministry of the Interior, which, in order to set it up, requested highly specialised operators, qualified from a curricular and experiential point of view. These professionals constantly attend seminars and refresher courses on immigration-related topics. The multidisciplinary team which operates within the service knows how to identify distress due to abuse and victims of violence, despite the fact that, to date, no cases of violence have been reported (interviewee No. 39, female counsellor).

Within the SPRAR facility for minors, various professionals with skills suited to the performance of the tasks required, operate. An essential feature of our Project is multidisciplinary collaboration, so the operators, working in concert for the greater interest of the minor, consequently know how to identify the minors’ main needs. These personnel are qualified in different areas or can count on experience acquired previously and over time. They place their skills at the service of good practices in favour of precise, constant observation of minors (interviewee No. 40, a female educator).

Given that the male and female operators employed at the Hotspots are qualified professionals from a curricular and experiential point of view. They frequently take part in seminars and refresher courses on immigration-related issues. For this reason, I believe that the team possesses the skills functional to the identification of distress caused by abuse and victims of violence, because, to date, a considerable number of vulnerabilities due to abuse and violence have been reported. In addition, the team enters into direct periodical contact with the various organisations that operate within the centre. Moreover, the facility is endowed with a systematically guaranteed meeting place for the discussion of the strengths and weaknesses of work aimed at promoting interpersonal learning and guarantee the coherence and sharing of good practices (interviewee No. 55, a female social worker in charge of a Hotspot).

In order to enter this team it is necessary to have a knowledge of and be specialised in the phenomenon, given its delicacy. Dealing with these matters means having a certain kind of bent, a willingness to accept others unlike oneself, having good communication skills which permit the establishment of profound relationships such as those required to enable women to change their lives in a place far from home and will find a way, at last, to defend their fundamental rights (interviewee No. 7, a female social workers in charge of a facility).

The operators in service here have taken part in training sessions with UNHCR, IOM, SAVE THE CHILDREN and others who are experts in matters of gender and proximity violence. This has permitted them to acquire the necessary skills. However, continuous, in-depth updates regarding the guests' countries of origin, their culture would be appropriate too. Furthermore, it would be useful to share the experiences acquired in the different reception facilities (interviewee No. 70, a male legal operator).

4.8.2 Some examples of inclusive policies

One of the other questions the interviewees were asked¹¹ gave them the opportunity to provide examples of inclusive policy.

The answers - all based on the shared opinion that it is necessary to reinforce inclusion policies - concerned both the network and the need to accompany migrants with ex-ante support for vulnerable people who are developing through ongoing policies aimed at promoting integration.

Collaboration with the network would improve if there were help desks and specific handling protocols employing competent professionals specialised in reception, mediation, guidance, management of situations available to migrants. Collaboration with the network could be improved by holding periodic meetings between facility teams and the various services, organisations and institutions that deal with the various issues at different levels (interviewee No. 2, a female social worker in charge of facilities).

Create a reality alternative to the idea the guests have before they leave their countries of origin. Most of the time the migrant women, as soon as they arrive in the host country, are contacted to work at times in illegal jobs. This is what happens in particular with the Nigerians "employed", as we know, as prostitutes. In my opinion as a first step inclusive policies should provide job placement by means of work grants, providing women migrants with an immediate opportunity and, as said before, an alternative. Even if they are mothers, they should be permitted to be employed while performing their function as mothers at the same time. The victims themselves should become active subjects providing testimony within anti-violence circuits (interviewee No. 4, a female mediator).

Inclusive policies for migrant women should promote integration by encouraging them to learn the Italian language and the rules of social coexistence, by fostering social cohesion and the construction of positive relationships. This could be achieved by enhancing social mediation, legal protection, active participation and involvement in the social fabric, by providing open desks for information and conflict resolution, activate laboratories and work

¹¹ The question posed was the following: "What are, or might be, according to you, examples of inclusive policies for migrant women, particularly asylum seekers and refugees, victims at risk of violence and discrimination?"

grants contributing gradually to restoring the skills and competences the women believed they had lost and / or their sense of self, to be acknowledged and legitimised at social level (interviewee No. 47, a female educator in a SPRAR facility).

It is my personal opinion that a female victims of violence must first be placed in a position to be able to re-emerge emotionally and psychologically from the state of depression / destructuring / subjection that frequently characterises them, by fostering policies aimed at increasing their feelings of self-respect, pride and self esteem.

Again, in my opinion, inclusive policies cannot disregard the acquisition of psychological – first of all – but also social and economic independence, such as to facilitate emancipation from her oppressor but also consolidation of her position as an independent woman.

To this end, concrete action favouring guidance, training and work support would prove useful, if implemented wherever professional outlets are made possible a priori on the basis of concrete territorial analyses (interviewee No. 54, a female educator).

One example of inclusive policies in favour of abused women and victims of violence might be that set up after an initial personal recovery programme, aimed at elaborating previous experiences by taking part in therapeutic groups made available and promoted in the area (anti-violence centres, ASP, clinics etc.) to which other women who have undergone similar experiences have access. This, in order to create a first shared link functional, from the point of view of both psychotherapy and point of integration. Here women from different cultural backgrounds, however different their stories, would meet to share similar emotional experiences. As to aspects regarding integration and employment, both useful and necessary for rediscovery of the skills and competences believed lost, recovery of these would lead to acknowledgement at social level. Activities aimed at acquiring the language and technical, working and IT skills are fundamental and should be made available by means of laboratories, professional internships and work grants (interviewee No. 55, a female in charge of a Hotspot).

Inclusive policies should be oriented towards work centred on empowerment, providing every woman with the possibility of self-determination and planning a better future for herself.

These inclusive policies should be closely connected, in this case, to the battle against gender violence, be based on strong synergy between the various actors involved and on an active collaborative relationship between the State, the Provinces and the Municipalities.

Rejection of gender inequality should be an essential feature of any project aimed at overall social reform, providing a binding link between ethics and the economy, between a quest for well-being and freedom of choice and a confrontation between interests, values and objectives so as to favour the en-

hancement of differences and the rejection of models proposed as indisputable and universal (interviewee No. 7, female social worker in charge of a facility).

4.9 Aspects to be enhanced or set up

One of the last questions invited the interviewees to indicate aspects to be enhanced or activated when taking charge of victims of proximity violence¹².

The vast majority of the interviewees held that the foremost aspect to be enhanced was specialist training.

The service would improve if training of the professionals operating within the same sector were taken better care of. Of interest would be training aimed at acquiring knowledge of the guests' countries of origin, at exploring the issues that induce children to leave their native countries, families, etc.

Besides training, the efficacy of the network might be improved by including professionals capable of mediating (in this case mediators), especially in hospitals and police stations. Very often these institutions are not provided with similar figures, a fact which hinders reporting possible violence-aggression, or in hospital situations that are even more delicate and grave. Sometimes the lack of a mediator can slow down intervention by hospital staff because of the language barrier (interviewee No. 36, a female educator at a SPRAR facility).

More information on indicators for the identification of violence experienced. Improvement of charge-taking services. Greater presence of intercultural mediators. A more effective assumption of care by the ASP in order to guarantee more personalised treatment and better communication between the social services, the Prefecture and the ASP (interviewee No. 4, a female educator).

I would raise regional / national standards regarding the minimum number of professionals operating within the reception centres for migrants to guarantee greater customisation of support and care procedures. I would increase the number of external services in the province in order to better promulgate and support performance by / within the network in order to support the victims of violence and more specifically the UAMs, and put into practice techniques and methodologies better suited to that particular age group. I would provide operators with continuous updating on this issue. I would increase psychological support and supervision services for those obliged to address difficult realities on a daily basis (interviewee No. 45, a female mediator).

Based on my experience, I believe it would be appropriate for each micro-territory (municipality / police station) to be endowed with specific help desks

¹² The actual question was: "How would you improve the charge-taking of migrant victims of violence? How would you improve collaboration with the network?"

capable of dealing with these issues, in terms of prevention and charge taking, as the problem is much vaster and much more rooted in the territory than available data would have us believe, precisely because the victims are afraid reporting or lack the tools that would permit exposure of abuse or activation of defence mechanisms.

Within the territory we should work to create services and facilities to support to people so they may report violence or abuse immediately (interviewed No. 46, a female educator at the women's shelter).

The Hotspot team's charge-taking activity is limited by the temporal conditions imposed the shortness of their stay at the centre. It would be desirable, therefore, that during the initial phase of hosting at the assigned centre there existed a more structured collaboration with the psycho-social team, seeing that the present practice consists in providing discharged migrants if identified as possible victims of violence, with a vulnerability report indicating the need for psycho-social support (interviewee No. 55, a female social worker in charge of a Hotspot).

Unfortunately, in the medical/health-care sector in general, the quality of training in the specific professional skills required to provide service to migrants is still overly partial. The highly specific training of professionals entering the field, their already consolidated experiences and their knowledge, are often modelled on the cultural, anthropomorphological and psycho-social characteristics of the Caucasian European. This leads, potentially, to limits deriving from the assumption of general parameters which ignore the peculiarities of the migrants' origins, causing, in turn, to attribution of "unbalanced" importance (too much or too little) to the meaning of some social, psychological and relational attitudes or modalities, with the risk of missing the true analytical focus of the problem. Some of the intervention and action undertaken by professionals in the social and health-care fields with a mandate to operate within the area of reception, are "filtered" by hosting agents who, on the contrary, have developed discreet skills in this regard. In my opinion, summary action based on partial knowledge of this kind runs the risk of losing overall sight of the individual object of observation, as well as of the dimension of intimacy and the indispensable constitution of a direct bond of trust that the professional in charge of providing help and creating relationships needs to establish, even more so when it comes to the delicate area of abuse and violence. Therefore, it might be interesting to devise specific training for professionals working in direct contact with guests in the field of migration for the exclusive purpose of broadening and deepening their general knowledge.

Often, many of the organisations and associations which deal with migrants work simultaneously within the same area of intervention, creating overlaps because unaware of each other's action. This can reduce the impact of intervention, hinder it or even render it overly invasive.

One might consider placing individual migrants in the charge of a single subject, authorised to interface with a sole, highly specialised, super-structured

third party, comprising a team whose members represent the organisations interested or otherwise involved in various ways in hosting, thus enabling them to bring their skills into play, acting in concert, in a complementary and integrated manner, bestowing added value on intervention thanks to interesting, profitable work (interviewee No. 54, a female educator).

It would be important to provide specific desks and protocols for migrants staffed by skilled professionals specialised in the field of reception, expert mediators and operators well versed in guidance and in the management of given situations. Collaboration with the network would be improved if periodic meetings were held between the members of the team working in the facilities and various services, organisations, institutions which address the various issues involved (interviewee No. 69, a female social worker in charge of a SPRAR facility).

The charge taking of the migrant victims of violence might be improved if the operators who deal simultaneously with the phenomena of migration and gender violence had a more adequate basic knowledge, since, often, during their course of studies, these issues are touched on only marginally.

Social workers need to be far more open towards confrontation and collaboration, since shared knowledge is fundamental to integrated intervention capable of favouring collaboration between several social workers, with a view to promoting the well-being of the victim. Working for the welfare of migrant women, victims of violence, means being open to new cultures, to other modes of behaviour and living.

We should not seek to adapt the other to behavioural styles typical of the western world but must get to know and respect the culture of the other, since diversity is an asset.

I would propose conducting more dedicated internships within the various areas where social workers operate, creating the conditions for concrete experimentation, thus laying the foundations of adequate and highly professional action when working in the field (interviewee No. 7, a female social worker, manager of a facility).

Charge taking of migrant victims of trafficking and collaboration with the network might improve if specific anti-violence desks were opened and staffed by a team of skilled professionals with specific experience in the field of hosting, like psychologists, mediators and educators. Furthermore, network operations might be improved by holding team meetings between the operators belonging to the various facilities, services, organisations and institutions with a view to comparing ideas, situations and solutions (interviewee No. 72, a female social worker at SPRAR facility).

4.10 Critical issues

The answers concerning identification of critical elements regarding charge taking of migrant victims of violence varied even if a goodly number of interviewees (28) replied that they failed to detect any such elements.

All told, though the majority of the interviewees stated that they are able, especially thanks to skills acquired in the field, to accompany migrants who have undergone proximity violence down the pathway of recovery of their autonomy and identity, the need for more training remains. Many of them hold that there is a need for lifelong learning, also by means of professional, psychological and psychoanalytic supervision, designed for operators who work in the hosting sector and who have to deal with a series of conscious and unconscious psychological dynamics regarding the traumas experienced by the other which, as a result, can prove stressful to the operator.

Better training during the entire period of operators' professional commitment to reception facilities and, above all, greater information and training before entering the community, were urged. A request was also made for sociological and psychological, but above all, anthropological training, such as to permit the interviewees to see "through the eyes of others", something which should stem precisely from a broader range of university courses oriented towards the reception of migrants, a phenomenon that has now become a permanent feature of European societies.

One final element of criticality was identified in the small number of mediators available to the reception facilities, a feature of hosting which does not facilitate the work of the operators.

I believe that it might be useful to take part in thematic and working roundtables with the presence of the various actors belonging to the area's institutions and services according to their various capacities. This to make a mutual exchange of knowledge and skills possible and facilitate networking (interviewee No. 29, a male educator).

Greater information and cultural knowledge regarding the guests' culture (especially that of the countries of origin and the Arab countries through which the migrants transit, therefore, of median social-cultural impact), acquisition of multidisciplinary skills because distress often fails to surface in the offices where preliminary interviews are held though they do in informal everyday-life contexts. Each operator, regardless of his/her job, should acquire basic skills in this sense (interviewed No. 38, a female educator at a Fami facility). Greater training of operators is necessary. Due to the scarce presence of cultural mediators it can be difficult to make contact with guests who are often distrustful (interviewed No. 4, a female educator).

Specific training courses providing a knowledge of different ethnic cultures are necessary. It is essential that, regardless of the experience acquired in the

field, one has a sound knowledge of the traditions and dynamics – including those of a family and cultural nature – typical of the migrants' countries of origin. In addition, greater information regarding the indicators to use in order to recognise victims is required (interviewee No. 56, a male doctor).

To acquire a more ample and thorough knowledge it would be advisable to take refresher courses on the issue of female migration, which is constantly on the increase. Specific subjects related to the issue should be included, in particular, in academic courses, with the creation of multicultural laboratories capable of promoting the establishment of relationships with migrant women. Experimentation in the field is the basis of everything, because by means of the theory-practice - theory process, one would be enabled to transfer into the field what has been acquired through study, taking into account the reference theories as a guide to the practical performance of each social operator.

This, because Italy's present-day increasingly complex cultural milieu represents one of the most significant challenges of the moment especially for the social services.

Operators, therefore, social workers first and foremost, will have to continue working in increasingly multi-ethnic communities and be prepared to innovate their practices and intervention, especially when faced, simultaneously, with two complex phenomena: migration and gender violence (interviewee No. 7, a female social worker in charge of a facility).

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