

A.S.G.I.

Associazione per gli studi giuridici sull'immigrazione

PRESS RELEASE

**From Centres for temporary stay and assistance to Centres for identification and expulsion:
the story of a separate health service**

Precisely as the new executive passes the “Security package”, someone dies of insecurity. It happened in Turin in the brand new CPT that cost as much as 11,160,184 Euros (source, “La Stampa” 26/5/08 page 56) and which, from now on, will be called an Identification and expulsion centre, as envisaged in the law decree that is due to be issued soon.

Mr. Hassan Nejl died in the camp bed in his cell: there will be an inquiry to establish the causes, whether the care and assistance were timely, in a more convincing and adequate way than the statements given to the media by the colonel from the military staff of the Red Cross, the body that manages the “Brunelleschi” centre. He denied the existence of negligence in the structure and of calls for assistance from the other detainees, who were hurriedly dismissed as liars because they are “illegal”.

A.S.G.I. expresses its pain and grief for the death of a man who was deprived of his freedom since at least ten days ago, parked there while awaiting repatriation, but it also wonders: was it a tragic fatality?

According to the final report in 2007 of the De Mistura Commission – set up by Minister [of the Interior] Amato – *“it is not possible to accurately establish the overall number of ill foreigners who have come into contact with CPTs, ...we highlight a relatively significant number of foreign citizens who turn out not to have been removed for health reasons: 114 cases in the Turin CPT; ...this situation is managed in a very different way from one structure to another, depending on the greater or lesser sensitivity of the 23 different managing bodies...”*. The Commission itself concludes as follows:” *It must be stressed that the **the healthcare agency** that is competent by territory is **not** responsible for carrying out **periodic control visits**, nor is it the **direct point of reference of the healthcare services set up within the centres**. It may be considered that the choice to adopt a **separate healthcare** model from the ordinary management of healthcare interventions in the territory constitutes a **relevant critical aspect**”.*

The **lack of medical and legal assistance** in Italian CPTs has also been noted by the Committee for civil liberties and justice of the European Parliament in its December 2007 report. Nonetheless, people are still dying in CPTs.

Thus, it is not a matter of a tragic fatality, but rather, of an endemic structural lack of adequate healthcare standards. The protection of health that art. 32 of the Constitution recognises as a fundamental right for individuals – regardless of whether they are Italian or an “illegal” immigrant – is denied by a model of separate health service, something that does forebode insecurity.

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[unofficial translation by Statewatch]

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