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Article

Direct Provision, Rights and Everyday Life for Asylum Seekers in Ireland during COVID-19

Fiona Murphy

School of History, Anthropology, Philosophy and Politics, Queen's University Belfast, Belfast BT7 1NN, UK; f.murphy@qub.ac.uk

Abstract: This article considers the impact of COVID-19 on international protection applicants in the Irish asylum system. It presents a critical reflection on the failings of direct provision and how the experience of COVID-19 has further heightened the issues at stake for asylum seekers and refugees living in Ireland. In Ireland, international protection applicants are detained in a system of institutionalized living called direct provision where they must remain until they receive status. Direct provision centres offer substandard accommodation and are often overcrowded. During the pandemic, many asylum seekers could not effectively socially isolate, so many centres experienced COVID-19 outbreaks. This article examines these experiences and joins a community of scholars calling for the urgent end to the system of direct provision.

Keywords: asylum seekers; Ireland; direct provision; COVID-19



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1. Introduction

Protest, hunger strikes, COVID-19 outbreaks. In the midst of Ireland's first lockdown (March 2020), a group of asylum seekers living in an over-crowded direct provision centre in one of the more rural parts of Ireland experienced an outbreak of COVID-19. Together with local townspeople, they stand outside the hotel serving as a direct provision centre, one of which has been poorly repurposed as a full-time residency for international protection applications. They have been sent from the capital city Dublin to the rural Southwest, Co. Kerry, from other direct provision centres due to overcrowding so as to ensure the possibility of social distancing. This is a weak government attempt to address the concerns of those living in direct provision regarding the pandemic; in total, they move approximately 600 international protection applicants to different centres, with 105 being sent to Co. Kerry (Gusciute 2020). The protestors hold placards demanding that the hotel be closed with immediate effect. Some residents state emphatically that they will go on hunger strike should this not happen. The residents of the centre have the support of the townspeople and a local radio station captures their voices, their complaints, even their fear. The protest is widely broadcast and written about in a number of different news outlets. In spite of their combined protests, over 25% of the residents in this particular centre get COVID-19 (Gusciute 2020) and the Government's response comes slowly.

Direct provision is a highly commercialized system of institutionalized living (Fanning and Veale 2004; Gusciute 2020; Lentin 2020; McGuirk and Pine 2020) for individuals or families seeking international protection (asylum seekers) awaiting the outcome of the determination of their refugee status claim (O'Reilly 2018). While for the most part asylum seekers have freedom of movement during the day and children attend local schools, the system is one which closely resembles other forms of asylum detainment. Direct provision was only ever meant as a temporary measure (in 2000) but still exists over 20 years later in spite of repeated public protest and calls to end the system (#enddirectprovision) (Breen 2008). The pandemic has further heightened the extant issues within a weak, overcrowded system and, since March 2020, a number of direct provision centres have experienced COVID-19 outbreaks (IRC 2020). Carlo Caduff reminds us that the measure of a society

during a pandemic (Caduff 2020) is its response to it. Globally, there has been great mismanagement of COVID-19 with rolling lockdowns putting massive pressure on people's everyday existence. In an Irish context, very strict lockdowns have impacted individuals in many different parts of society, but direct provision residents stand out as having had to endure much suffering during these very harsh restrictions (Gusciute 2020).

This article thus takes the form of a critical reflection on the experience of Ireland's asylum seekers during the pandemic in the Irish asylum system, known as direct provision. It constructs the Irish asylum system as a site of warehousing and alienation. The main focus herein is to, therefore, highlight how the broad failings of direct provision have become further heightened by the impact of COVID-19. This has impacted the psychosocial well-being of asylum seekers in multiple and overlapping ways. In conjunction with this, the ways in which a dynamic of blame and risk in society at large played out regarding fluctuations in COVID-19 numbers, brought renewed attention to "crowded" places, such as direct provision in both negative and positive ways. Widespread media attention has also centred on how challenging life has been in direct provision during the pandemic. This has subsequently mapped onto a well-organised solidarity movement that has been working for many years to have direct provision ended. As such, calls to end direct provision from many different sectors of the Irish public have hardened, culminating in the issuing of a very promising government white paper (February 2021) committing to the end of direct provision by 2024.

The COVID-19 pandemic, or indeed, what we should more accurately approach as a syndemic to draw on medical anthropologist Meryll Singer's 1990s work (Singer 2000; Meyer et al. 2011; Willen et al. 2017) has heightened the impact of racial capitalism, social exclusion and precarity across the globe. Bordering practices (Balibar 2010) anchored in notions of risk, fear and exclusion now criss-cross all of our daily realities (some more than others) with even more fervour. Questions of citizenship and fervent nationalisms are on the rise. We are all living this pandemic, but unevenly so, and the ignition of an alacritous rebordering within the EU region and elsewhere has had a direct and very grave impact on asylum seekers and their right to seek international protection.

Many feel that the geographical position of the island of Ireland has been underexploited with respect to managing the pandemic. Frequent comparisons have been made between the island of Ireland and New Zealand with calls for a #zerocovid response and mandated hotel quarantine to be adopted akin to that of Australia and New Zealand. However, with BREXIT, political trust between the Irish and UK jurisdictions is low, and the politics of division on the island of Ireland, between North and South has become heightened (Heenan 2021; Matthews 2021). Additionally, cross-border coordination and collaboration with respect to managing the pandemic has been weak, in spite of the signing of a Memorandum of Agreement in April 2020 by both jurisdictions agreeing to find solutions to managing the pandemic in a unified and co-ordinated manner (Heenan 2021). However, such efforts remain to be seen as largely tokenistic with no real policy or practice change forthcoming (at least not by the time of writing).

The crisis of borders on the island of Ireland, while not only symptomatic of the pandemic, is not a crisis that is happening in isolation. Rebordering practices are visible everywhere, with a failure of cross-border approaches apparent through a number of regions in the EU (Rumford 2006; Fanning 2019; Chetail 2020; Ní Ghráinne 2020) and some countries, such as Australia and New Zealand, closing their borders (a response many say is effective with respect to managing the virus). This is an intersection of medical and political borders (Ticktin 2020a, 2020b) which, while touted as being the best way to protect a country from the spread of the pandemic, has in fact also contributed to increased securitization and restriction of movement (and a foregrounding of citizenship). This is particularly so for international protection applicants held up or detained at such borders (Ní Ghráinne 2020). It is thus asylum seekers and refugees that bear the brunt of these border closures with many being delayed at frontiers (and even returned from closed borders), thus breaching the principles of international refugee protection law and of

refoulement (Ní Ghráinne 2020). Within a number of states, asylum seekers have been subjected to lengthy delays in having their international protection applications processed and in an Irish context, as one example, the deleterious conditions of our asylum system have been further exposed.

At the heart of this is state inaction, a limited sense of who is considered worthy to “protect ” or indeed “vulnerable”. As such, there are widespread concerns that the principle of non-refoulement is not being respected, which as the conceptual pillar of international refugee law, prevents a signatory state from forcing an individual seeking international protection into repatriation (Chetail 2020; Ní Ghráinne 2020). The closure of borders also signposts a failure of cross-border co-operation around matters of global health (particularly visible in Europe). A core element here is how the rhetoric of war and terrorism has been drawn on to speak about the pandemic. This is done so in a manner which deflects from what Povinelli (2020) calls the “quintessential terrorist,” that is the form of late liberal capitalism responsible for the global inequities which asylum seekers and refugees experience the blunt force of.

The ongoing debate about direct provision and the very public campaign to have this system abolished sits into very many of these broader global issues, particularly during the pandemic (Mfaco 2021). However, within national boundaries in Ireland, it has been decried not only because it is a deleterious system of warehousing but also because many believe it is a continuation of historical logics of containment which lead from Catholic run industrial schools, Magdalene laundries, and mother and baby homes to direct provision (Loyal and Quilley 2016). In 2021, at the time of writing, there is great momentum and appetite, particularly post the marriage equality referendum (2015) and the repeal of the eighth (abortion referendum 2018) to redefine the edges of Irishness (Browne et al. 2018; Mullally 2018; Carregal-Romero 2019). Therein, it is clear that there is no place for an asylum system resembling direct provision.

2. Methods and Scope

As an anthropologist of displacement, I have a longitudinal and sustained engagement with individuals and families who have experienced life in direct provision. I have been working on the broad issue of asylum and refuge since 2009 in the Republic of Ireland (Maguire and Murphy 2014, 2015, 2016; Murphy 2019) and have a particular interest in the deleterious impact of asylum systems such as direct provision on individual’s everyday life experience and settlement in Ireland. It is this ethnographic engagement that informs my ongoing critique of direct provision in my scholarly and applied work. Much of my work has concerned itself with the psycho-social impact of asylum systems and its entanglements with loss and trauma on individuals and families seeking international protection in a number of different contexts, such as Northern Ireland (Murphy and Vieten 2017), France and Turkey (Chatzipanagiotidou and Murphy 2020; Murphy and Chatzipanagiotidou 2020). This comparative scope has proven interesting in terms of having a broad range view of how different asylum systems work. The Irish asylum system, however, has always stood out as particularly deleterious where asylum seekers are essentially warehoused and alienated from mainstream Irish society, thereby engendering multiple layers of harm and producing a failed politics of refuge.

This article is thus formed and informed by such longitudinal ethnographic engagements coupled with a secondary analysis of key research reports (conducted by the Irish Refugee Council during the pandemic), existing and emerging white papers and policy, activist group’s reporting and newspaper articles (March 2020–January 2021). This secondary analysis has been particularly key during a strict and sustained lockdown in Ireland where continuing with face-to-face ethnographic engagement has not been possible with the exception of phone calls or WhatsApp conversations. The voices and experiences that I include in this article are reliant on data collected by the Irish Refugee Council in 2020. This emergent data highlights how challenging life has been (and continues to be) for asylum seekers in direct provision. In spite of a changing political narrative with the publication of

a white paper on direct provision that promises to abolish the system by 2024, the pandemic continues to put immense strain on international protection applicants. The vaccination rollout strategy which started in January 2021 has been controversially blighted by supply chain issues. Further, it does not consider asylum seekers living in these overcrowded and harmful conditions as part of the priority population for vaccination. The long-term harm engendered by direct provision and the experience of living therein during the COVID-19 pandemic remains to be fully seen but will need to be properly measured and addressed. As I write from the middle of another lockdown (January 2021), however, the urgency of documenting and responding to the needs of international protection applicants in direct provision remains essential.

3. History of Direct Provision

There are now approximately 7700 international protection applicants living in different direct provision centres across Ireland (Ní Raghallaigh and Thornton 2017; Thornton 2020; Thornton et al. 2020). Direct provision centres are located in a range of different kinds of accommodation such as former hotels, a holiday centre, a convent (to name but a few). Rarely are these accommodation centres repurposed correctly for long-term living and there are widespread reports about the poor living conditions that asylum seekers experience (IRC 2020). Reports of over-crowding are frequent and at the beginning of the pandemic (March 2020), the Irish government moved some 600 people into additional accommodation, such as hotels and bed and breakfasts (IRC 2020). Residents of direct provision receive their food, accommodation and a weekly allowance for adults of EUR 38.80 and for children of EUR 29.80 (there is no other entitlement to other social welfare support (Gusciute 2020)). The origins of direct provision are by now well-documented (too numerous to list in full but see (Thornton 2014a; Nedeljković 2018a, 2018b; Khambule 2019)). Widespread criticism has been directed towards direct provision (from the outset) from NGOs and activists because it was in essence a violation of international protection principles (coupled with questions over direct provision's compliance with national law at the time). However, there has been (until recently) little government interest in finding a solution with the state narrative around direct provision being largely positive (Lentin 2020).

Direct provision was meant to be an emergency, temporary solution with international protection applications spending no longer than 6 months in the system. It was implemented in April 2000, after the Irish state believed there was an increase in the number of people seeking international protection in Ireland. Asylum seekers would from that point be placed in a system of institutionalized living (full board) and would no longer receive social welfare but instead get a weekly allowance (at that time of 15 Irish pounds per adult and 7.50 Irish pounds per child). Up until the year 2000, emergency accommodation was being utilized for the first two months of an applicant's arrival. Additionally, applicants were given the standard weekly social welfare allowance. Subsequent to this, applicants would move out of this emergency setting into housing whilst awaiting the outcome of their application (Ní Chiosáin 2019). By late 1999, influenced by the introduction in the UK of a policy of dispersal for asylum seekers and citing concerns about the availability and cost of housing in Dublin, the Irish state introduced its own policy of dispersal and hence, the system of direct provision was borne (Fanning et al. 2000; Loyal and Quilley 2016, 2018; Lentin 2020). Many critics claim that the Irish state was too concerned with the UK criticisms that Ireland was a backdoor to the UK (because of the Irish border and the 1998 Good Friday Agreement) and direct provision was a whiplash response. In 2004, following years of political hysteria regarding asylum numbers, a citizenship referendum was held. The outcome of this being the amendment of the Irish constitution in order to limit the constitutional right to Irish citizenship of individuals born on the island of Ireland to the children of Irish citizens (Lentin 2020).

Direct provision is a highly commercialised asylum system (Hewson 2020; McGuirk and Pine 2020) and many of its failings emanate from a lack of oversight by the Irish

state (even though it insists that it conducts regular inspections). From the outset, it was affixed to a project of outsourcing by the Department of Justice through a process of both buying or leasing hotels, guesthouses and other kinds of accommodation centres (Hewson 2020). Asylum seekers living in direct provision by and large do not have the ability to cook their own food (though this has been addressed in a number of centres following the McMahon report in 2015), they cannot apply for driving licenses and until 2018, could not work (Kerwin 2013; O'Reilly 2018). Given the often very rural location of many of these centres, all of these issues are very challenging. In 2003, when the EU introduced a directive to lay down minimum standards for asylum reception, Ireland was one of only 2 of the 27 member states to opt out, allowing the Irish state to continue with the ad hoc, deleterious and inconsistent system of direct provision. However, and in spite of the wide-spread documenting of its failings, direct provision has continued for 20 years on a non-statutory basis with few changes—the bedrock of government inaction. Even a ten-year appraisal in 2010 by the Reception and Integration Agency did not result in any positive changes. Instead, it saw cost-cutting measures including the closing down of particular centres and the relocation of residents introduced, resulting in a further diminishment of the system.

Later challenges to the system included the UN committee for the elimination of racial discrimination condemning the system for its negative impact on asylum's welfare in 2011 and in 2014, a mother and son housed in direct provision brought forth a challenge against the system citing it as inhumane and degrading. The Irish high court rejected the case in spite of a number of studies pointing to the impact of direct provision on asylum seeker's well-being. The year 2014 also saw a series of resident protests in a number of direct provision centres and the Irish Times Lives in Limbo series which squarely highlighted the egregious nature of the system. Ultimately, some of these events led to the then FG/Labour government setting up a Working Group which led to the publication in 2015 of the McMahon report. While welcomed, the report's some 173 recommended changes were only implemented in a selective and partial manner (Thornton 2014b, 2014c, 2020). The recommendations included the issue of improving living standards, payments, the right to work and access to education. The issue of reducing lengthy waiting times in direct provision centres to have an application processed was also addressed. The European Communities (Reception Conditions) Regulations 2018 came into effect in Ireland on 30 June 2018, this allowed access to the labour market for international protection applicants who nine months post the lodging of their protection application had yet to receive a recommendation. MASI (Movement of Asylum Seekers Ireland) have campaigned to have what they see as a limited right to work expanded, citing concerns that a range of factors such as lack of access to driving licenses, challenges opening bank accounts, and the remote location of many direct provision centres as posing intersecting issues to the ability to seek and find work (Khambule 2019). Indeed, 2019 figures suggest that roughly 3500 international applicants have been granted right to work, with only half of those actually entering the workforce. Some improvements have been made in terms of educational access at third level, with seven Irish universities now having attained the status of University of Sanctuary, thereby providing scholarships and/or tuition waivers to a small number of asylum seekers (Murphy 2020).

In December 2020, in spite of the challenges of the pandemic, the Day report (2020) was published. This report and its recommendations insist on abolishing the current direct provision system. It calls for a system where individual's seeking international protection are processed within three months whilst waiting in a reception centre. In that time, they should be issued with a social security number (PPS) and on having their application processed successfully, should be assisted in finding own door accommodation. The right to work is also recommended to be granted after three months. In February 2021, the government published a white paper in response to the Day recommendations with hopes that they take the task of abolishing the system of direct provision by 2024 seriously. This white paper has been met with a mixed response by direct provision residents and activists (Mfaco 2021).

4. COVID-19 in Ireland and Response to Direct Provision

The COVID-19 response in Ireland has been much like many other jurisdictions, one of ebb and flow, managed by the tyranny of numbers with daily reporting of COVID-19 results and deaths (Drażkiewicz 2020). At the time of writing (January 2021), there have been three lockdowns, and vaccination rollout began in January 2021. Mask-wearing and social distancing have all been mandated as elsewhere. Since January 2021, the Irish government has come under widespread attack due to their handling of their pandemic response over the Christmas season (2020) and a subsequent spiral of numbers and deaths in the weeks thereafter (due to new variants and general reopening).

In April 2020, a Joint Statement from the Department of Justice and Equality and the Health Service Executive on “the Measures to Protect Direct Provision Residents during COVID-19” was made (Gusciute 2020). It stated that it had put in place social distancing and protection measures in direct provision centres and that residents were subject to the same public health measures as the general public. However, widespread reports from residents in direct provision proved that their experiences during the pandemic was in fact one where many of these measures were impossible to follow, largely due to overcrowding (IRC 2020). As a response to this, some 600 direct provision residents were moved out of these overcrowded centres but as the opening scene from this article highlights (with the experience of asylum seekers moved to the Skellig Hotel in Co. Kerry), many of those who were moved did not experience this as a solution, rather a further failed attempt to manage direct provision centres in the midst of the pandemic.

The Irish Refugee Council (henceforth IRC) has conducted extensive research on the experience of asylum seekers in direct provision during the pandemic (2020). A number of other activist and NGO organisations have also collected reports on how the pandemic has impacted direct provision residents. In spite of the fact that there were some attempts to address issues of overcrowding, with health workers being allowed to move out into their own accommodation, there is nonetheless strong evidence that asylum seekers in Ireland have been failed during the COVID-19 outbreak. Entitled “Powerless” the Irish Refugee Council report published in August 2020 conducted research with 418 people living in 63 different Direct Provision and emergency centres. The report assesses mental health, stigma and racism, children, schooling and parenting of individuals and families living in direct provision during the pandemic. In doing so, it presents both a statistical overview but also importantly allows space for the voices of direct provision residents to openly express their concerns in each of these individual areas. Overcrowding and a lack of safety and inability to meet public health measures are foregrounded in the report. In total, 55% of respondents felt unsafe during the pandemic and 50% of respondents were unable to socially distance themselves from other residents during the pandemic (IRC 2020, pp. 9–10). One respondent says:

Plenty [of] adults and children living under the same roof, people share a lot [of] facilities that may not allow proper social distancing. If one person gets infected it will be hard to control the spread no matter the measures taken. (IRC 2020, p. 19)

While some attempts were made to address this issue of overcrowding, they were, as I have noted at the beginning of this piece, a failure. The lack of safety and security due to overcrowding has been compounded by the fact that Ireland has experienced two extended school closures (March–September 2020) and (January–April 2021).

I’m in the room with a colleague. Unfortunately, he is a kind of person [who] seems to have problems with emotional control. He can’t stand still. During the day he goes out more than 15 times [and] can open the door more than twenty times a day and goes down in five laps. I try to stay at home and in my room to try to protect myself and protect him too. Unfortunately, the other side does not cooperate so it’s difficult to find security. (IRC 2020, p. 18)

My experience is so saddening. [There are] 22 Covid cases here. We cry out to be moved for safety in vain. I am still living in an infected room for my roommate tested positive of Covid. The local residents are scared of us we are in total lock down and not safe. I am always in a state of fear. (IRC 2020, p. 39)

I think living in a Direct Provision Center for a long time is cruel and very frustrating having a family . . . It is worse in Corona Virus Time sharing the same kitchen breathing the same air in the tiny space with more than 30 people is insane. A father I thank the Irish government for all support but [it] is time in this situation to act more responsible with people sharing, the virus can spread quickly. (IRC 2020, p. 41)

Homeschooling using technologies such as zoom, loom and seesaw (and it must be noted that the roll out of homeschooling in Ireland has been ad hoc and unequal in provision) means children living in direct provision need access to devices, a Wi-Fi connection, and, of course, space to do their daily schoolwork. In overcrowded centres, where families often share a single room, this has proven challenging, as direct provision residents have noted:

Now our children do not go to school and this is a problem for us, they do not receive education and cannot study remotely because we do not have the opportunity to do so. It is impossible to organize training in one room where there are 4 people in a locked room. (IRC 2020, p. 47)

If I could be moved to a place where both me and my kids can be in one house as my son is sharing a room with a stranger, it's so difficult for him. We need a place where we can cook for ourselves, my kids struggle with the food cooked in the hotel. (IRC 2020, p. 19)

School provides a welcome reprieve for many children from the challenges of living in confined direct provision spaces, so its absence has meant significant disruption to the daily rhythm of their lives, the chance to sustain a friendship network outside of the centre, and of course, ultimately for those unable to engage with online education, a significant educational lag. Given that many children seeking international protection have already experienced a pronounced educational lag due to their complex personal histories (many fleeing conflict and having undertaken long journeys to Ireland) in addition to needing to adjust to a new schooling system (and often language) in Ireland, the absence of schooling during the pandemic is likely to have a significant impact on this cohort of children (IRC 2020).

One of the most persistent and significant critiques of direct provision across the years is that it has a direct, negative impact on mental health. Broadly, asylum systems have a significant psycho-social impact and act as aggressive post-migration stressors (Murphy and Vieten 2020) but systems of containment such as direct provision engender harm in a more pronounced way. One direct provision articulates it as follows:

Since I have come into Direct Provision, it has been not easy at all, very stressful. I came here for protection and am traumatised here as well. For now, I don't have pieces of [my] mind, I feel like am no longer needed in this world. I don't want to go anywhere, sometimes I feel like maybe am I dreaming? I am losing my mind here, keeping us for a long time without any answer (from the minister of justice), every day I am living in fear. (IRC 2020, p. 41)

These feelings can be particularly acute in children who spend many years (some their entire childhoods) in direct provision (Fanning et al. 2001; Fanning 2004; Fanning and Veale 2004; Ní Raghallaigh and Thornton 2017; Micha et al. 2018; Zhou 2020). A range of studies evidence that particular elements of the asylum system such as protracted waiting in spaces of containment or detention, long processing times and adversarial legal processes for protection applications, lack of access to work or education, food poverty, and stigma all combine to attenuate the mental health and well-being of international protection applicants (Murphy and Vieten 2017, 2020). There have been a number of suicides in direct

provision. During the pandemic, asylum seekers have turned to protest and indeed, hunger strike to forcefully make their point about the deleterious impact of direct provision on their mental health and well-being. The IRC report highlights how increased stigma due to consistent media reporting of overcrowding and COVID-19 outbreaks, has led to racism and further alienation in some communities. One respondent states:

I do not want to send my child to school here, we had a bad experience while the community rejected us saying 'covid people'. [Threw us] out of the supermarket and told us not to come out of the building. It's a stigma on us to continue here. (IRC 2020, p. 38)

They are locked in a single room for over 3 weeks now. They are going bananas. Mental health is compromised. Showing signs of distress living in one room. (IRC 2020, p. 51)

The intersections of trust/mistrust and risk have characterised so much of the pandemic experience (for everyone albeit in different ways); for residents in direct provision, this has become more graphically inscribed on their everyday. While media scrutiny of direct provision is necessary and much welcomed, it has also fuelled deepened resentment and fear in some communities towards residents in direct provision over the course of the pandemic. Direct provision centres and meat factories (in which some DP residents and migrants work) have been continually pinpointed as points of COVID-19 outbreaks particularly in a number of rural areas (Co. Kildare as one example). The exclusionary tactics of this kind of asylum system firmly demarcates asylum seekers as "alien" or "outside" mainstream society. During the pandemic, as sites of warehousing, direct provision centres have become further entangled with a politics of exclusion and "danger" (or risk). At the same time, it has awakened many in the general population to the abhorrent conditions that asylum seekers in Ireland face on a daily basis.

5. Mapping New Solidarities

Direct provision has long been the subject of activist and scholarly opprobrium. In particular, the work of asylum seeker and refugee activists, such as MASI—the movement of asylum seekers Ireland—stands out, but there are also many other groups and activist/advocate scholars who have worked hard to ensure that the system's deleterious impact is public knowledge. Vukašin Nedeljković's activist-photographic work on direct provision sites is a striking example of placing direct provision in the spotlight by creating an archive of images that graphically condemns this asylum system (Nedeljković 2018b). Writers who have lived the experience of direct provision such as Melatu Uche Okorie (*This hostel life*, Skein Press) have written about it and the anthology *Correspondences* (2019) is a collaborative work edited by Jessica Traynor and Stephen Rea that calls for an end to the system of direct provision in Ireland. Creative, solidarity movements around food, which draw attention to the conditions in direct provision have been hugely successful (Murphy 2019). Media attention coupled with celebrity activism on the matter has also further cemented this overt understanding of direct provision as an egregious asylum system. In spite of the emergence of this new political community of solidarity formed by activists, poets, writers, musicians, actors, film-makers, journalists and academics, the Irish government has remained stalwart in its resistance towards ending direct provision until recent months (2021). The publication of a government white paper in February 2021; however, has indicated a willingness to end direct provision by 2024 and this has renewed hope amongst international protection applicants and support/solidarity circles and networks.

In more recent years, the general public has become broadly aware of the substandard living conditions in direct provision. The pandemic has further accelerated this awareness but this has manifested in complex ways, often increasing the stigma associated with living in these centres. It has laid bare, however, what Charlotte Brives calls the "multiplicity of the virus" and the "extremely variable" experience of the virus anchored in class, gender, race, living arrangements and the politics and health policies of different nation-states (Brives

2020). While Ireland largely escaped the significant rise of the far right that swept across Europe from 2015, it nonetheless, has a small and growing faction of far-right extremists (now further fuelled by COVID19 conspiracies) who have targeted direct provision centres. As with elsewhere, the intersection of virus conspiracy theorists, anti-maskers and the far right has seen an escalation in some forms of protest primarily during the more restrictive lockdowns. Both the capital city Dublin and Ireland's second city Cork has seen protests of this kind in 2020 and 2021. Nonetheless, broadly in Ireland with the pandemic, there have been many visible examples of mutual aid solidarity and community building in spite of so many of us having to remain within our own holding spaces during lockdown periods.

While such widespread and very public scrutiny of direct provision points to the urgent need to find a remedy to a system which so easily dehumanises, instead of reform, it provoked the social media surveillance of those condemning the system. In 2020, Sian Cowman and Ken Foxe (members of Refugee and Migrant Solidarity Ireland (RAMSI)) requested access to documents which revealed that the Department of Justice and Equality had directed its Transparency Unit to review social media tweets about direct provision. While government monitoring of social media is certainly not new (Trottier and Fuchs 2015), it appears to have increased during the pandemic, but the particular focus on direct provision has ignited much ire. Irish singer Hozier was one of many Irish celebrities whose tweets had been captured in the monitoring report:

As the Dept of Justice is monitoring social media posts about Direct Provision, they no-doubt have read countless accounts of dreadful experiences from those suffering within this exploitative, for profit system. I'd encourage them to use these considerable resources to end it (Tweet from Hozier 16 August 2020)

The monitoring of social media regarding direct provision suggests a very strong awareness on the part of the Irish Department of Justice for the appetite for reform. Given, the historical trajectories drawn between Ireland's history of containment with industrial schools, mother and baby homes, and Magdalene laundries, it is clear that, in our digital age, there is no room for public secrets of this kind. Further, this very public act of witnessing and condemnation on social media, coupled with increased discontent with the Irish government's approach to the pandemic paints a stark picture of a more generalised malaise which sees the intersections of failed governance through multiple lenses.

The publication of the Mother and Baby home report in January 2021 following a lengthy commission of inquiry into the experience of single mothers and their children in predominantly Catholic institutions has been met with public outcry. Primarily, it is clear that the experience of these mothers and children has not been accurately represented in this report. Furthermore, many critics have argued that the commission of inquiry was not properly conducted with much acrimony over the way in which the testimonies of survivors were taken and then destroyed. Critics of direct provision have established clear connections between the logics of containment and secrecy that engendered institutions like the mother and baby homes and indeed, in 2021, their continued misrepresentation. The same approach has essentially been applied to the creation and maintenance of the Irish asylum system which clearly follows similar logics. The privatisation of the system coupled with the rural location of direct provision and the active silencing of direct provision residents aided in the increased invisibility of the system for too long, now no longer possible through accelerated activism and critical/scholarly attention.

6. Conclusions

Life in direct provision has been further complicated by the COVID-19 pandemic. Individuals and families have found the following of public health guidelines next to impossible in the overcrowded, substandard living conditions imposed by the Irish asylum system. COVID-19 outbreaks have happened in a number of centres and many individuals have reported feeling a lack of security or trust in their places of residency. Home schooling in these conditions is challenging (or impossible) and children and their parents have suffered immensely trying to navigate the absence of school for extended periods in 2020

and 2021. The psycho-social impact of the pandemic on international protection applicants is thus likely to be significant and the Irish state has done little except for addressing (inadequately) some of the overcrowding issues. Protest, hunger strikes, fear and stigma have come to define the experience of direct provision residents during the COVID-19 pandemic.

This article joins a strong body of extant literature on direct provision which advocates for the abolishing of this harsh, dehumanising asylum system. As with other activists and scholars, I have considered herein, how direct provision serves as a cipher for rebordering practices, by pushing international protection applicants into the margins of Irish society through a system of warehousing. As a highly commercialised asylum system with direct provision centres dispersed in often very rural areas, asylum seekers are hidden in plain sight. In many instances, organisations have noted how much fear residents have of making a complaint when conditions are sub-par with the too vocal being moved frequently between centres. While the European Communities (Reception Conditions) Regulations came into effect in 2018, which allowed a certain cohort of asylum applicants (who had been waiting for 9 months) to access the labour market, the broader living conditions in direct provision were not adequately addressed. During the pandemic, asylum seekers in direct provision who had been furloughed or lost their jobs were unable to access the pandemic payment of EUR 350 a week, in spite of active lobbying by NGOs and activists to make it available. Activism and media attention, particularly during the pandemic, has, however, illuminated for the broader populace the challenges of life for direct provision residents.

The COVID-19 pandemic or “syndemic” has heightened experiences of racial capitalism, practices of rebordering, and exclusion. Repeatedly during this pandemic, we have been called upon as individuals, families and communities to protect our most vulnerable; to isolate and socially distance so that others may stay healthy. However, what has been striking is that this definition of vulnerability is firmly anchored in a politics of exclusion, one constitutive of particular kinds of citizenship and belonging. Asylum seekers and refugees have experienced the blunt force of these hardened exclusionary practices during the COVID-19 pandemic in the reproduction of bordering and rebordering practices that are intimately felt in their daily lives. This has compounded the many and intersecting layers of uncertainty that asylum seekers already face, such as lengthy processing times for their protection application, separation from families and challenging living conditions in direct provision. Within the Irish asylum system, we have seen a failure to fully address the ways in which the pandemic heightened the impossibility of life in direct provision. The abolition of direct provision as a system of exclusion and containment requires immediate action. The pandemic has proven that this is a system which fails individuals and families seeking international protection. It is clear that much harm has already been engendered through this system, now further compounded by the pandemic. Strong solidarity networks and links demand the abolition of direct provision but now it is time for a more respectful political vision that embraces a politics of everybody in a new imaginary of protection and refuge; to end direct provision in its current form is now the only meaningful response needed from the Irish state.

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