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*Refugee camps as spaces of rescue in times of Covid-19:
invisible mobilities in Bourj Albarajenah*

Keywords: Covid-19, Palestinian refugees, refugee camps, invisible mobilities, solidarity, Lebanon.

This paper aims to explore the peculiarity of the pandemic in stateless communities. Through a case study from a Palestinian refugee camp in Beirut, Lebanon, we analyse how Palestinian refugees were affected by and responded to the pandemic. We find that the legal exclusion of refugees from the state protection has generated invisible mobility, which further increased the risk of spreading the virus. Refugees have founded their own community response mechanisms of food sharing and crowdfunding. They established Aman medical centre in the camp, which has become a destination for infected, yet undocumented, residents of the city. We conclude how Palestinian refugees used this invisible mobility to save other refugees, therefore proving how refugee camps can become spaces of rescue in times of global emergency.

Campi profughi come spazi di soccorso in tempo di Covid-19: mobilità invisibili a Bourj Albarajenah

Parole chiave: Covid-19, profughi palestinesi, campi profughi, mobilità invisibili, solidarietà, Libano.

Questo articolo esplora le peculiarità della pandemia nelle comunità apolidi. Attraverso il caso di studio di un campo profughi palestinese a Beirut, Libano, abbiamo analizzato gli impatti sofferti dai rifugiati palestinesi e le risposte comunitarie alla pandemia. L'esclusione dei rifugiati palestinesi da meccanismi di protezione legale ha generato una mobilità invisibile che, se da una parte ha ulteriormente aumentato il rischio di diffusione del

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Saggio proposto alla redazione il 12 febbraio 2022, accettato il 25 maggio 2022.

virus, dall'altra ha permesso di organizzare risposte comunitarie agli effetti della crisi: ad esempio, tramite collette alimentari e di fondi, o l'organizzazione di un centro medico per altri residenti di Beirut privi di documenti e contagiati. Tramite l'osservazione di azioni di resistenza e mobilità invisibile, intendiamo dimostrare come i campi profughi possano diventare spazi di soccorso in tempi di emergenza globale.

1. INTRODUCTION. – With the breakout of Covid-19, we began to hear about the return of the state as the main actor of securitization at times of emergency (Stasavage, 2020; Stott *et al.*, 2020; Woods *et al.*, 2020). States worldwide have been enforcing measures for protecting their nations, controlling the spread by imposing lockdowns, providing medical care, and rolling out vaccinations. While some states have been competing over medical resources and hoarding vaccines, states at the margins are struggling to stabilize their already fragile health systems and protect their citizens (WHO *et al.*, 2021). In these times, we would wonder who can protect stateless communities, for which no sovereign institutions are functional in managing the spread of the pandemic. How is their experience different in the pandemic, and how are they supposed to mitigate this crisis?

The stateless Palestinian refugee community has been battling against the same alarming spread of the virus, only with fewer medical resources and greater socio-economic challenges. We move from research which has showcased the refugee as a local sovereign (Dorai, 2014; Sari Hanafi, 2008; Mountz, 2011; Pascucci, 2017), and the camp as a space of solidarity at times of overlapping displacements (Fiddian-Qasmiyeh, 2018; Sharif, 2018). In this paper, we attempt to go further, by exploring how the refugee camp, a space lacking state protection, becomes a space of rescue during the global health emergency.

Through a case study from Bourj Albarajenah Palestinian refugee camp in Beirut, our aim is to shed light on the impact of Covid-19 on this stateless community, and on its community-based response as a functional alternative to the absent state. Their access to urgent healthcare has been hindered by a number of factors which include discrimination against refugees in the Lebanese community (Kheireddine *et al.*, 2021), discrimination against refugees in the public healthcare system (Parkinson and Behrouzan, 2015), sentiments of insecurity due to a history of violence between Palestinian refugees and Lebanese citizens (Knudsen, 2007; Long and Hanafi, 2010), in addition to the lack of healthcare resources and infrastructures in place due to the financial crisis of both the Lebanese state, and the humanitarian organization responsible for Palestinian refugee camps – The United Nations Relief and Works Agency for Palestinians in the Near East (UNRWA). In the light of this lacking medical care during the pandemic, we have observed and interacted with Aman initiative in Bourj Albarajenah, a medical centre that has become a destination for infected yet undocu-

mented migrants of the city. We argue that the invisibility of this camp space and the informal community cooperation are factors that enable it to become a safe haven for migrants who are seeking urgent medical assistance during the pandemic, but are also fearing deportation. This analysis allows us to conceptualize refugee camps, not just as urban spaces or spaces of agency, but also as spaces that have the potential to provide critical care in threatening situations where the state cannot.

We will tackle this argument via the following path: First, we will bring our insights on refugee camps as living spaces during the current pandemic. We will provide an overview of Bourj Albarajenah camp space, and its host community; and will explore the conditions of living the pandemic time in the camp during the breakout of Covid-19, by engaging with the experiences of Palestinian refugees as both infected patients and caregivers, also to other refugees. Moreover, we will discuss some observed unconventional patterns of mobility, seeking medical care, from the city of Beirut towards the camp. Finally, we will reflect on broader linkages of our study to the global issue of self-care within spaces of protracted refuge.

2. FROM SPACES OF EXCEPTION TO SPACES OF RESCUE. – A substantial proportion of the world's stateless people are also victims of forced displacement, and therefore statelessness is a true situation of overall human insecurity (UNHCR, 2014). This applies to Palestinian refugees, who are both displaced and considered to be *de jure* stateless persons with 5.7 million Palestinian refugees registered by UNRWA (2021a).

A Palestinian refugee camp is defined as a plot of land placed at the disposal of UNRWA by the host government, to accommodate Palestine refugees and set up facilities to cater to their needs (UNRWA, 2021b). The lands on which the camp shelters were set up are not the property of refugees, but refugees have the right to 'use' the land for residency until stated otherwise (UNRWA, 2021b). Scholars have defined the camp as a space of containment of displaced groups that is established to deal with populations that disturb the national order of things (Turner, 2016); a (non)-governmental mode of managing the undesirables (Agier, 2011); or a spatial formation in the state's 'custody management' system (Minca, 2005). Reflections on refugee camps derive from Agamben's conceptualization of refugee camps as spaces of exception, which can be eliminated without consequences (Agamben, 1998). Putting that into the current perspective of Covid-19, the camp is an invisible space that can remain unprotected, without any noise or consequences.

2.1 *Refugee Camps as Spaces of Agency.* – Hanafi criticizes Agamben's failure to address the resistance of the camp, and argues, instead, that Palestinian refugee camps, for example, are spaces of resistance and transgression when

refugees become the 'local sovereigns' themselves (Hanafi, 2008). Sayigh (2010) even argued that this lack of state sovereignty over Palestinian refugee spaces in Lebanon has led to the development of a camp local/national group identity by which refugees lead oppositional consciousness towards their nationalist leaderships and seek their own refugee and return-oriented goals. Feldman (2018) also examined the livelihood in Palestinian refugee camps, and explained that we can understand the agency of Palestinian refugees through the ways in which they used humanitarian tools, such as the camp space and food rations for example, as partial means of constructing non-humanitarian and self-reliant futures.

Musmar (2021) also challenges the representation of the refugee camps as merely places where refugees are being hosted, and rather portrays refugee agency by documenting how certain spaces are being used, attended, and socialised in Jordan's Syrian refugee camps. Similarly, Mountz (2011) also rejects framing life in a refugee camp as suspension, and rather speaks of 'waiting' in a refugee camp as a dynamic and active experience. For her, waiting is a time when small things like sickness, childbirth, or local language acquisition are acts of agency; they are strategies pursued to survive (Mountz, 2011).

Skran and Easton Calabria (2020) also defy the humanitarian representations of refugee self-reliance and agency. They explain that these concepts entail social elements and cannot only be limited to income creation, entrepreneurship and market activities, but must be understood as a cooperative dynamic whose final aim is community wellbeing. Indeed, refugee agency and self-reliance cannot be understood through an economic lens, because refugees' livelihoods often operate on familial and community levels, rather than at the individual level (Easton-Calabria *et al.*, 2017). Similarly, Pascucci (2017) emphasizes the community-oriented agency in situations of displacement, explaining that the social infrastructures replace institutional infrastructures and material assistance, at times of shrinking humanitarian aid.

2.2 Refugee Camps as Spaces of Diversity and Solidarity. – Relationships and community-based infrastructure to accommodate social services, thus construct possibilities for agency in the refugee space, in line with Massey's (2005) argument, for whom space is a product of interrelations and is co-situated through interactions. Moving from this definition, we can also understand the camp space as a location of multiple possibilities of existence where distinct trajectories could arise or coexist. On one hand, the camp space is constantly evolving, and camp dwellers are attempting to make their own pathways: to end their temporality and build better futures for themselves (Corbet, 2016). On the other hand, various communities can make their own trajectory into the camp and cohabitate the camp space despite their various backgrounds. This can be better understood

when looking at the camp space from the perspective of the mobility turn in social sciences, intersecting spatial with social mobilities as liberation paths from situations of social inequalities and oppressions (Faist, 2013); perspectives that were already present in Massey's (1991) theorization of physical movement including new social interactions with places and beyond; or in Thrift's (1996) conceptualization of being mobile to resist authoritarian regimes, in spaces of communication of meanings. These contributions lead us to think of the refugee camp as a combination of these potentials: coexistence, mobility and resistance; in other words, as a space of possibilities in challenging times such as the one of the current pandemic, even when mobilities are unrecorded by, and thus invisible for, institutional powers that should govern the camp.

Palestinian refugee camps have generally been homogenous spaces of refugees that have been displaced from Palestine between 1948 and 1951, and their descendants only. Until recently, the main pattern of mobility was rather directed outwards, where the refugees attempted to attain a better life by leaving the camp (Dorai, 2003). However, the permanently temporary situation of these camps has been slowly transforming them into urban components of the host community (Dorai, 2014; El Masri, 2020). Recent turbulence-induced mobilities taking place in the area, such as the Syrian crisis for example, have changed the ingress patterns towards the camp space. Dorai (2010) explains that both social mobility (refugees leaving the camp) and the new migration flows (people entering the camp) have been profoundly changing the Palestinian refugee camp population, and even blurring the boundaries between the two categories of urban refugees and camp dwellers in Beirut.

Few studies have been addressing this diversity aspect of Palestinian refugee camps and the increasing multicultural cooperation inside them. Most notably, Fiddian-Qasmiyeh (2018) has been examining refugee-led initiatives that have emerged in response to new refugee situations and exploring the dynamics underpinning the encounters between 'established' Palestinian refugees who have lived in an urban Palestinian refugee camp in North Lebanon since the 1950s and the 'new' refugees arriving to these camps from Syria since 2011. In earlier works, the author refers to a history of refugee solidarity, mentioning that the Palestinian refugee camps have welcomed and assisted Palestinian refugees from other camps fleeing violence, such as the destruction of Nahr Albarid camp in the north of Lebanon in 2007 (Fiddian-Qasmiyeh, 2016). Her argument is that this case of refugees helping refugees situates Palestinian refugees as agents and active providers of support to others, rather than as mere aid recipients. Similarly, Sharif (2018) has highlighted the Refugee solidarity initiated by Palestinian refugees in Shatila camp in Beirut as they were assisting Syrian refugees whom Lebanon refused to establish refugee camps for, in the beginning of the Syrian crisis. As

for refugee camps outside Lebanon, studies have been examining how refugees themselves are frequently mobilising to create community-based organisations or informal networks, based on kinship, culture and faith, as alternative providers of social protection for other refugees in matters of education, health, livelihoods, finance, and housing (Pincock *et al.*, 2020). Even though the rescue aspect of these initiatives has not been particularly indicated, there is evidence on refugee camps as spaces of hospitality for other refugees at times of violence and displacement.

In this paper, we elaborate the above argument in the light of the pandemic and its threat to people's lives, to explore how refugee camps exceed being spaces of agency for the internal communities into becoming spaces of rescue also for outsiders at peril during these times of global health emergencies.

To understand the rescue aspect of Bourj Albarajenah, in the following sections we will describe some of the features of its urban space, governance and offered services, and then present an overview of the critical situation of refugees living in Lebanon under multiple challenges that the pandemic has exacerbated.

3. THE PALESTINIAN REFUGEE CAMP OF BOURJ ALBARAJENAH. – Bourj Albarajenah is one of twelve Palestinian Refugee camps in Lebanon. With a central location in the southern suburb of Beirut, this camp is only four kilometres from the capital's downtown and two kilometres away from the capital's international airport. There is no official data on the population of the camp, but this camp, which was originally built by the Red Cross in 1949 to accommodate 3,500 refugees (UNRWA, 2018), is now estimated to be a home to over 30,000 Palestinian refugees (ANERA, 2021). The camp space of only one squared kilometre (ANERA, 2021) is characterised by over crowdedness, maze-like narrow hallways, and dire housing conditions mainly described as dark and damp (Fig. 1). However, the ever-growing population within the limited camp space has led the refugees to attempt improving their livelihood conditions by expanding their concrete structures vertically, where adding more layers to their homes helped make more space for various services. For example, there are eleven artesian water wells, five mosques, around forty grocery shops, several pharmacies, a cemetery, a drug-abuse rehabilitation centre, and a cinder block factory inside Bourj Albarajenah refugee camp today. The camp is connected to the city through five main entrances, of which only one is controlled with a Lebanese military checkpoint, thus making the camp porous and well connected to its surroundings.

Despite living in this camp for over seven decades, its dwellers cannot become permanent residents or citizens of Lebanon, due to the nation's restrictive migration policies (Halabi, 2004). This exception deprives Palestinian refugees in Lebanon from access to the labour market, civil participation and public services such as health and education (Abdulrahim and Khawaja, 2011; UNRWA, 2015).



Photos taken by Yafa El Masri in 2021.

Fig. 1 - Photos of hallways of Bourj Albarajenah

Instead, Palestinian refugee camps access these basic services through UNRWA, although serious financial cuts have shrunk even its most basic assistance to the refugees (El Masri, 2019).

Bourj Albarajenah, just as other Palestinian refugee camps in Lebanon, is quite a peculiar space in terms of governance. These camps were under the governance of the Lebanese state until 1969 when the Lebanese and Palestinian representatives reached The Cairo Agreement, giving the Palestinian camps in Lebanon complete autonomy under the governance of the Palestinian Liberation Organization (PLO) (UNRWA, 2020). They became dubbed as ‘a state within the state’. After the defeat of the PLO in 1982 and its departure from Lebanon, the Agreement was declared null and void by the Lebanese Parliament (UNRWA, 2020). However, the camps never actually returned to the realm of governance of the Lebanese state because Palestinian refugees wanted to preserve their short-lived sense of being an autonomous state, but eventually remained as marginal spaces of no legitimate governance structures in place (Hanafi and Long, 2010; Mahoudeau, 2019). Agier (2011) has argued that the ‘humanitarian government’ is normally in charge of refugee camp spaces; however, in Palestinian refugee camps that is not the case either. Hanafi (2014) calls UNRWA the Phantom Sovereign, explaining that the Agency has historically understood its role as a temporary relief provider to a temporary group of ‘victims’, carefully avoiding taking on a governing role. Therefore, in legal terms, no one is responsible for the lives of those dwelling in Palestinian refugee camps in Lebanon (Mahoudeau, 2019). In Bourj Albarajenah, popular committees are created in informal ways among camp families to address matters of local conflicts and general security.

The impact of this gap of governance on refugees has been intensified during the Covid-19 pandemic. Bourj Albarajenah refugee camp faces major challenges in the healthcare system and shortages of medical care. Bourj Albarajenah refugee camp hosts only one UNRWA medical clinic and one Palestinian Red Crescent medical centre, both with limited medical resources and staffing. The camp's UNRWA clinic provides eight hours a day of medical support through one family doctor, one lab technician, and one pharmacist on a daily basis, in addition to one dentist, one paediatrician and one gynaecologist on certain days of the week. It is reported that 94% of Palestinian refugees in Lebanon access the UNRWA medical clinic for healthcare (UNRWA, 2015). The clinic does not perform X-rays, operations, and many types of tests, and therefore the Red Crescent centre (referred to as Haifa Hospital) is essential for those needing to carry out more intensive medical procedure or requiring urgent medical interventions outside the work hours of UNRWA. However, Haifa hospital has as little as ten doctors for the various domains, struggles with adequate access to electricity, as the rest of the camp, and does require fees for its services, all which come as hurdles for responding to health issues in the camp. As a result, one third of the Palestinian residents suffer from at least one chronic disease. In the current Covid-19 pandemic time, medical services have been under more pressure than ever. Having a poorer health at baseline, Palestinian refugees are three times more likely to die of the virus than the population as a whole, as their dire living conditions aggravate pulmonary and cardiac diseases (UNRWA, 2022).

4. OTHER MIGRANTS AT RISK IN LEBANON DURING THE PANDEMIC. – All of the country has been hit hard by the pandemic. The crises that have accumulated since 2019 have affected all segments of society in Lebanon, limiting their access to medical services and also drastically impacting the access of all refugees to various sources of livelihood (UNRWA, 2021c). After the capital port in Beirut exploded on August 4th of 2020, destroying the city's infrastructure and exhausting the medical system (Human Rights Watch, 2021) and the ongoing *Deliberate Depression* imposed by the country's elites, causing a devaluation of the local currency by 90% that has diminished its purchasing power (World Bank Group, 2021), the entire population in Lebanon is struggling to access basic services.

Palestinian refugees are not the only vulnerable population of the country during the Pandemic. Lebanon is also home to 865,500 registered Syrian refugees, and 15,800 registered refugees of Ethiopian, Iraqi, Sudanese and other origins, thus making it the country with the highest number of refugees per capita in the world (UNHCR, 2021a). A major part of refugees in Lebanon remain unregistered with UNHCR, since Lebanon instructed UNHCR to suspend registrations

in 2015, and with no legal residency in the country, either due to high costs, lack of required documentation or irregular entry (UNHCR, 2021b). UNHCR has been stressing that this lack of access to legal status puts refugees at high risk especially during the pandemic, even more, since Lebanese municipalities have introduced discriminatory restrictions against non-Lebanese residents, e.g. by enforcing a curfew on Syrian refugees but not on the whole population, as part of their efforts to combat Covid-19 (Human Rights Watch, 2020a). Human rights watch also reported that migrants were not targeted in any awareness campaign about the virus, and were not given any kind of information to guarantee their safe stay in case they arrive at the hospital with no legal documents. The regulations that require documentation, to validate the patients' eligibility for care, put those who have no legal residency in the country at the risk of deportation (Human Rights Watch, 2020a).

In addition to refugees who do not have legal residency in the country, Lebanon hosts thousands of migrants who arrive to work as cleaners, haulers or domestic helpers, under the *kafala* (sponsorship) System (Human Rights Watch 2010, 2020b). Dubbed as a form of modern slavery, *kafala* is a restrictive system that excludes migrant workers from the official labour jurisdiction and enlists them under a law that ties their legal residency to their employers (Majzboub, 2021). Leaving or changing jobs without their employers' consent put them at risk of losing their legal residency and facing detention and deportation. Many of these domestic helpers suffer from abuse in the homes of their employers, but cannot react for the fear of unemployment and deportation. Those who are able to escape the employers' homes are left undocumented as their employers have the right to retain their passport throughout their contact. This causes thousands of migrant workers to lay low, live in slum areas and refugee camps in order to hide from the state. This situation leaves them in constant uncertainty and deprives them from any ability to access healthcare or bureaucratic services. These disabling factors imposed by the institutions against refugees in need, have called for other systems of response and self-care from the grassroots, which our study has aimed to analyse.

5. METHODOLOGY. – This paper engages with the refugee camp of Bourj Albarajenah: a space stiffened by past forced settlement orders and lacking any service interventions by either the Lebanese state or lower administrative jurisdictions in which the camp is located. To study peculiar spaces like this one that lies outside the 'normal' territorial regulated frameworks, we believe in the explanatory power of case studies as research methods, to analyse specific issues in their social, cultural, political, spatial and territorial contexts and their unique patterns in relations with phenomena (including politics) at the national and global scales (Bahl and Becker, 2020; Williams *et al.*, 1991).

In Bourj Albarajenah, we have paid attention to the perspectives, interpretations, emotions and agency of the residents addressing the sanitary crisis, rescuing themselves and other refugees through food sharing, crowdfunding, and medical caregiving.

Moreover, this study is in the ‘home place’ of one of the researchers. Having grown up as a Palestinian refugee in Bourj Albarajenah refugee camp, she decided to return to her family during the winter season 2020-2021, doing fieldwork at the same time, with daily visits to the volunteer centre of the refugee camp. Access to information and interpretation was facilitated by the author’s situatedness as a member of the community, and by an overall deep knowledge of its local dynamics. Conversations with several camp dwellers were aimed at understanding their general situation throughout the breakout of Covid-19. The interviews involved eight volunteers of the Aman Centre, including one doctor, two nurses, two organizers and three assistants (all Palestinian refugees); ten patients (three Palestinian, three Syrian, one Bangladeshi, one Ethiopian, one Sudanese, and one Iraqi) who were being treated by the Aman Centre; an UNRWA social worker; and three Palestinian refugee activists. Being their first names very common in the area, their use next to the quotes reported in the next section will not reveal their identity. The interviews were conducted in Palestinian Arabic, and the quotes are from our translation.

6. EXPERIENCING COVID IN BOURJ ALBARAJENAH THROUGH THE CRACKS OF FORMAL CARE. – The peculiarity of the pandemic in Bourj Albarajenah refugee camp can be understood through the experiences and stories of Palestinian refugees by which we can identify the gaps that influenced the breakout impact in refugee camps. Through quotes and narrations of camp dwellers, we can view that the state exclusion has led to intensifying the socioeconomic struggles of Palestinian refugees, in addition to contributing to the spread of the virus in the camp and in the city.

As mentioned earlier, refugees have suffered due to the exclusion from the public medical services; moreover, UNRWA clinics were closed throughout the first few months of the breakout in 2020, due to the lack of preparations for pandemic emergencies, therefore leaving Palestinians with no accessible health services in such critical times. Interviewed people reported cases of hospitals’ refusal of patients who could not prove having insurance coverage. Others were able to secure a bed and receive medical care at a hospital in Beirut, but still, the lack of free medical coverage was a source of concern. Lacking the same access to public health facilities as the Lebanese citizens, Palestinian refugees have to cover their own medical expenses. UNRWA does provide some assistance in covering the costs of hospitalization in such cases, but the support is limited to certain hospitals with whom there is an agreement in place. At times of the pandemic, when oxygen

availabilities are limited across hospitals, this issue adds stress to the already precarious situations of Palestinian patients. Youssef narrated the story of his father:

My father was only 52 years old. When he contracted the virus, we took him to a non-UNRWA contracted hospital because none of the contracted ones had medical supplies or oxygen machines to treat him due to the extreme rise in cases. My father died there after struggling for 9 days with the virus. The hospital is now asking for 7,500 US Dollars to release his body. We do not have that kind of money, now we are in debt and cannot even bury my father. We are trying to collect donations from Palestinians abroad to help us pay the bill.

An important spatial character of the camp, which intensified the struggle against the virus, is the high human density in Bourj Albarajenah. People in the camp are not able to observe social distance in everyday life or self-isolate upon infection, which cause a faster and more impactful spread of the virus among camp dwellers.

Other refugees even reported having to continue going to work every day while still being infected with the virus, only because they had no other means to provide for their family. Palestinian refugee Jalal is a twenty-five year old construction worker who has no work permit and works illegally in a construction site near the camp. Jalal commented:

My own family and I live with my parents and my younger brother. I got the virus from my little brother, but I could not stop going to work. If I stay at home, who is going to come forward and feed my children? Even my elderly parents depend on me, who is going to pay for my father's and my wife's medications?

Palestinian refugee Qassem has told a similar story, as he kept his infection a secret, and continued his truck delivery work in Beirut, trying to avoid any human contact while still making the necessary income to feed his kids.

Like most Palestinians who do have a job, Jalal and Qassem have no work contract and thus no holidays, health coverage, sick days off, or any labour law that can protect them at times of emergency. In fact, according to the latest available UNRWA survey (2015), 84% of Palestinian refugees who work, are in the black market. Their exclusion from the formal labour system and public medical care has worsened their already precarious livelihoods, and further increased their risk of infections and mortalities, ultimately contributing to the spread of the disease within the camp and the city.

However, even though Palestinian refugees in Bourj Albarajenah are not able to physically change their camp space to ensure social distancing or influence the Lebanese jurisdiction in order to attain socioeconomic security, they have succeeded to reorganize their life in that limited space, through different means.

Those we could observe were food sharing and crowdfunding, which provided medical and other forms of care for Palestinian refugees in the pandemic, and even for non-Palestinian living outside the camp.

6.1 *Food sharing.* – One of the camp’s notable initiatives during the pandemic is food sharing. As a response mechanism, food has become mobile when humans cannot be. Jalal’s neighbours, for instance, have begun to share their own food supply with Jalal’s family: “This is our way of telling him that if he decides to stay at home, we will always have his back”. The experience of Jalal is not unique. As many infected have either lost their source of income or are afraid to lose it, food sharing has grown as an informal cooperation mechanism among camp dwellers to provide security, support the ‘stay at home’ indication, and cope with the Covid-19 related unemployment. Food sharing have also become a formal mechanism for solidarity across the community. Small grocery shops and catering projects of the camp, such as Soufra, a catering initiative specialized to making traditional Palestinian food based in Bourj Albarajenah camp, have collaborated in cooking and distributing free meals to infected families in the camp (Fig. 2). This kind of solidarity has provided a sense of safety for the community, providing the protection and care that the state or the humanitarian agencies have failed to secure.



Photo is courtesy of Soufra, taken in 2020.

Fig. 2 - A Soufra Volunteer creating food rations for infected families in Bourj Albarajenah

6.2 *Crowdfunding.* – Another significant mobilization has involved the collection of funds to provide medical care and other needs. Messages posted in social media from the camp to the world and especially to Palestinians based abroad, have spread the need for contributions to purchase necessary material and equipment for residents of Bourj Albarajenah. Against the idea of a suspension of activism due to the pandemic, the camp, on the contrary, has become a hub of interactions and complementarity of various initiatives. In particular, we have observed those enacted by volunteer organization Aman.

Aman (security, in Arabic) is a volunteer group formed by 15 Palestinian refugees active in Bourj Albarajenah since 2017. Their activities have involved elderly care, basic health services, and maintenance works in the camp. As the pandemic began to spread in Bourj Albarajenah in May 2020, an urgent meeting of the volunteers led to setting a crowdfunding strategy to address the impact of the virus on the community. The plan is based on community support and the word of mouth, with small money banks organized in shops and common areas to collect funds necessary for purchasing basic medication and setting up a quarantine facility (Fig. 3 and 4). Parts of the collected funds were also used to pay various financial obligations of individuals struggling due to Covid-related unem-



Photo is courtesy of Aman initiative, taken in 2020.

Fig. 3 - An Aman money bank in a coffee shop in Bourj Albarajenah



Photo is courtesy of Aman initiative, taken in 2020.

Fig. 4 - Aman volunteers opening the collected Aman money banks

ployment, such as Jalal who benefited from Aman's funds to cover his family's medication and utility bills. Aman has also allocated parts of these funds to purchase childcare necessities, such as diapers and milk, for families who have lost their income due to infection or lockdown.

Thanks to these funds, a house of the camp has been sanitized, stocked with basic medical tools, and transformed into a primitive quarantine and treatment facility. Since Palestinian refugees cannot work legally in the medical field in Lebanon, those graduated in medicine, pharmacy and related fields either work informally in Beirut, practice their profession in the camp independently or in UNRWA clinics, or remain unemployed. The skills of these medical graduates represent fundamental assets for the camp during these critical times. Two Palestinian refugee doctors and three nurses joined the team providing free medical services.

With the worsening of the crisis and the increased need of oxygen machines and medications, Aman initiated a call for donations directed to Palestinian refugees settled abroad, and especially, based in Europe. Abu Hassan, a co-founder of Aman, reports that the donations have been used to purchase twenty Oxygen machines, other tools and medicines, which have allowed the continuation of the care services in the facility (Fig. 5 and 6).



Both photos are courtesy of Aman initiative, taken in 2020.

Fig. 5 - Aman Volunteer Doctor visiting a patient

Fig. 6 - Volunteers sorting out medicines at Aman Facility

6.3 Medical caregiving for all. – Aman is not a facility solely for Palestinian refugees but is rather a welcoming space that has been providing medical care for sick Palestinian refugees, Palestinian refugees from Syria's refugee camps, Syrian refugees, and African migrants. Several of these refugees arrive at Bourj Albarajenh seeking medical assistance because they lack legal residency in the country, or the legal criteria needed to access the state healthcare. For example, Aman has provided healthcare for Syrian refugees who have either entered Lebanon irregularly or have not been able to renew their residence permit and therefore cannot risk engaging with the state health system, such as Saba, who arrived from Aleppo to Lebanon in 2016. She explained her journey leading to Bourj Albarajenh:

I crossed the Syrian Lebanese borders in an irregular manner after Lebanon had ended its open-door policy. We did not have a choice. Our area was being bombarded every day, and civilians were being shot on the spot. And they [Lebanon] closed the borders in our face, so we had to cross through a smuggling route. But I have been illegal in this state since that day... if they find me, they will deport me. So, I cannot go to a hospital, my children cannot go to school; we cannot go to any public facility. When I got sick, we

had to look for a place, which does not require my documents to admit me to healthcare. Aman is a primitive form of a clinic, but at least I feel safe from the police.

Aman has also been providing medical care to migrant workers who have lost their legal residency due to evading the *kafala* system, such as Osman who arrived from Bangladesh to Lebanon in 2017 to work in a private cleaning company, but the termination of his contract caused expiration of his visa. To avoid returning to his country, and continue sending remittances to his family in Bangladesh, he had no other choice than working in the black market as a cleaner in a residential building. During the interview, Osman explained:

I would rather die with Covid than to be taken to the hospital. They might treat me, but then they will deliver me to the Lebanese Security, who beat us up and humiliate us in interrogation. I have heard horrible stories from my friends who were deported back to Bangladesh. This camp has welcomed us in many ways in the past, I know other migrants who live here, so I know that Palestinians will not turn us in or turn their back on us. I went to a camp charity organization who guided me to this place.

When asking Abu Hassan about his view of this setting of solidarity, he said: “We know what it is like to be a stranger; we have felt that all our lives here. We do not want them to feel that, especially in sickness. This is a home for all of us. Here, we protect each other”.

Aman has also been providing medical care to African migrants who have escaped the Kafala system due to domestic abuse, such as Anu, who arrived from Ethiopia in 2016 to work at a middle-class household as a domestic helper. She could not report her employer’s continuous physical abuse to the authorities because her right to stay and work in Lebanon is in his hands, and therefore decided to flee the house and reside in a slum area near the camp. Anu speaks of the care received by Aman volunteers:

They asked me what kind of food I liked, they tried to use the ingredients that we, Ethiopians, use. Everyday Duaa (a volunteer) would check on me. They got me the Wi-Fi password from the house next door, so I can call my family in Ethiopia and tell them that I am fine. They were genuinely concerned about my wellbeing; they understood that I needed family.

Finally, in the first few months of 2021, UNRWA reopened their facilities, providing medical care, free testing, a quarantine location, and vaccinations to Palestinian refugees. However, no formal programs were ever established for the assistance of undocumented migrants or unauthorized residents of the city; therefore, they continued to seek assistance in informal ways, to which initiatives like

Aman is able to respond, providing protection and hospitality. Aman volunteers continue to put themselves at risk until the day of writing this paper in February of 2022, where many of them have intercepted the virus during their contact with patients at the facility in the last year and have required intensive care themselves.

Other Palestinian refugee camps have been witnessing similar movements of crowdfunding for medical care and covid-related financial struggles. For example, refugees in Mar Elias refugee camp in Beirut have started a similar crowdfunding campaign among refugees in Lebanon to support those struggling with medical bills or access to medication. Similarly, Fiddain Qasmiyyeh (2020) has described acts sharing information, food and sanitation products among different migrants in Baddawi camp in the north of Lebanon during the pandemic; all which highlights a pattern of solidarity among refugees in Lebanon's Palestinian refugee camps.

7. BOURJ ALBARAJENAH AS A SPACE OF MOBILITY, RESISTANCE AND RESCUE. – Through the observation of Bourj Albarajenah camp and its dwellers during the pandemic, we have understood the potential of self-reliance, its outcomes and limitations in refugee spaces at times of critical threat. Some residents of Bourj Albarajenah were unable to follow the rules of social distancing or quarantine orders and continued to work even when infected, due to the lack of economic security, which threatens the survival of their families just as the virus, if not worse. However, social infrastructures organized in Bourj Albarajenah for food sharing, crowdfunding provision of medical services, and caring for incoming undocumented migrants, have highlighted the camp as a space of mobility, resistance and rescue for internal residents and other undocumented migrants based in Beirut: people left at the margins of the Lebanese state or international agency to assist refugees. The results above suggest that refugees are capable of strategizing, outsourcing and sharing resources for the sake of community protection that goes beyond their own camp limits.

These results have highlighted two major aspects of mobility in Bourj Albarajenah. One regards the role of disposing the mobile refugees as invisible in exacerbating the spread of the pandemic. Another one regards the use of this invisibility as a tool for resisting the pandemic and rescuing humans. Both are complex notions regarding agency and rescue, which explain the social reality of refugee camps, but also describe the proactive response to improve it, taking responsibility for their own lives but also for those of others.

The invisibility of refugee mobility patterns can be attributed to the disposal of refugee spaces as secondary during times of emergency. The stories of refugees who knowingly infected others during the pandemic could imply the responsibility of refugees for exacerbating the spread of the virus. However, from actually listening

to stories (Bennett *et al.*, 2015) and interpreting motives and power struggles (Bahl and Becker, 2020) we deduce the responsibility of humanitarian and legal authorities for exposing refugees and migrants to risks, by depriving them from much needed economic, and medical protection at the times of a pandemic. By rendering them invisible and marginal, authorities overlook unconventional mobility patterns and their underlying interactions with the black market of the city. The overlooked social interaction of the camp dwellers with the outside world, through hidden work, has caused unnoticed bilateral spread of the virus.

Understanding Bourj Albarajenah as a hub for mobility builds on Dorai's (2010) existing evidence of the refugee camp as a porous space that continues to integrate itself into the urban space through meaningful exchanges with its host environment. This alerts us to the risks of overlooking refugee mobility. Viewing refugee communities as confined, immobile and isolated, we assume their inability to communicate with, and thus infect, their surroundings, therefore leaving several channels open for risk transmission.

On the other hand, invisible mobility has become a tool for refugees in Bourj Albarajenah to rescue and protect undocumented migrants at risk through informal means of community humanitarianism. Through food sharing, crowd-funding and providing medical care to their own community and to others, dwellers of Bourj Albarajenah have created a space of rescue for those neglected by the state or pursued by it. Being the state's blind spot, the invisibility of the camp has provided a safe haven for those being chased by possible scenarios of legal and social violence. The work of refugees towards the construction of such space aligns with Mountz's (2011) study on waiting, where refugees who remain in Bourj Albarajenah camp are not merely waiting for legal or humanitarian strategies, but are actively developing their own strategies of survival and resistance through structures of solidarity. The human condition of refugees and migrants may be highlighting the legal suspension and socioeconomic exclusion, which has worsened the impact of the pandemic on the refugee community. However, it is still important to look at this condition through Hanafi's (2008) concept of the *local sovereign* to rather frame how refugees have become their own governors, policy makers, budget setters, action planners, and organizers at critical times of emergency.

The lack of the state or humanitarian sovereign in Bourj Albarajenah have produced the local sovereign in the form of a multiplicity of dynamic actors, such as grocery shop owners, Soufra kitchen chefs, Aman volunteers, and Jalal's neighbours, who have assumed responsibility for a timely and planned response to the pandemic. The variety and cooperation of these actors in asserts the notion of pluralised governance, introduced in the work of Pascucci and Soininen (2021), who invite us to think of other forms of governance that go beyond the territorial boundedness and make space for marginalized actors in between. Coinciding with their theory

that the plurality of subjects and polycentric powers can unsettle the vertical and ineffective governing structures in place, the legal and humanitarian structures in place in Lebanon have proven to have dangerous gaps, which refugees and undocumented migrants in Lebanon are falling through. Therefore, pluralized actions of food sharing, crowdfunding and hospitality that have been taking place on different scales, create more flexible decision making and collective action approaches that can prove to be more effective and inclusive in increasingly complex situations.

The approach of this pluralized governance also required actions of international upscaling, where refugees of Bourj Albarajenah have strategized their action through inviting refugees abroad to contribute to the rescue of their community. Aligning with the work of Minoia and Mölkänen (2021) in other geographical contexts, scaling through kinship crowdfunding and social media have enabled Bourj Albarajenah dwellers to jump beyond the administrative city and national levels of public care to strengthen their logistical and operational goals within the pandemic agenda. Through multi-governing, and local and transnational networking, Bourj Albarajenah has established alternatives to the normative state-humanitarian construct of protection and has remedied some of its short falling towards refugees and migrants.

By putting themselves at risk of infections and sacrificing already scarce resources to assist those in distress, we can situate the experience of Palestinian refugees in Bourj Albarajenah as an operation of rescue. Palestinians were able to rescue other refugees because of a long history in the country that enables them to locate possible channels of acquiring and mobilizing the resources needed to cope with this crisis.

These observations of refugee camps as spaces of rescue could be generalized to other refugee spaces, especially in cases of protracted refugees. Further comparative research can establish a better understanding of the different ways through which different types of refugee camps can perform operations of rescue, to investigate the role of other factors such as temporality and legal confinement, and to plan new sustainable forms of international solidarity other than those provided by UNRWA and other multilateral agencies depending on states' funding policies.

8. CONCLUSION. – Our study has posed the question of protection in the case of stateless communities, in a world where states are conceived as the main agents for protecting citizens from the risks of the current global pandemic. The lack of official structures has left displaced people unprotected at times of medical and economic emergencies. Having understood refugee camps as spaces of agency, in which displaced communities develop strategies of survival and better livelihoods, we have suggested the ability of refugees to construct spaces of rescue to provide medical care for those left at the margins.

At times recognised as of global immobility, refugee spaces have relied on invisible mobility for survival. Invisible mobility may have contributed to the spread of the virus but has also saved lives when undocumented migrants have travelled towards the camp seeking alternative types of care. Through this case study, we can deduce that refugees have constructed their space of rescue by strategizing a community response, establishing networks and jump scaling for solidarity crowdfunding, food sharing, and hospitality, even by putting themselves at further risk of infection, and sacrificing their minimal resources in order to relief other refugees in distress.

Recognizing these invisible mobilities and their potential in processes of rescue is important for redefining the position of the camp in the urban and global space. On a local level, the camp space is complementing the state's action plan by filling the gaps of the legal system. On a larger scale, the role of the camp in combating emergencies such as a global pandemic implies the significance of the camp on a wider arena where it has altered the lives of migrants from various areas of the world, thus making the camp less isolated than most theories suggest. Having conceived the diversity of the camp, we can no longer view the camp as a confined space of oppression, but rather as a space of transnational and transcultural solidarity in which displaced groups practice cooperation and rescue. If refugee camps are involved in issues of global significance, such as that of migrants during the pandemic, then a global recognition of refugee voices and experiences is necessary. Therefore, redefining the position of the camps on local and global levels entails inviting policy and theory to include refugee spaces in the global governance arena, through more serious representation and participation, and recognizing their ability to succeed where states may fail.

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