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Dedicated Caravan Sites for French Gens du Voyage: Public Health Policy or Construction of Health and Environmental Inequalities?

LISE FOISNEAU

Abstract

In France, *gens du voyage* (“people who travel” or “travellers”) is a term used by the government to categorize various itinerant populations, the majority of which are diverse Romani groups. People categorized as *gens du voyage* are legally required to reside in particular locations called “dedicated caravan sites.” Parliamentary debates about these dedicated caravan sites have clarified that one of the objectives of such sites is to help fulfill the *gens du voyage*’s right to health. However, there is a significant gap between the officially stated goals of such sites and the reality of life within them. This paper draws on research finding that the conditions in most dedicated caravan sites do not conform with the rights of *gens du voyage* to acceptable sanitary conditions and other underlying determinants of health.

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Introduction

In France, a dedicated caravan site (*aire d'accueil*) is a site reserved for caravans and camping-cars that belong to people whom the French government calls *gens du voyage* (“people who travel” or “travelers”). A caravan site is a fenced-in area, somewhat like a parking lot, completely paved with asphalt, and with a gate controlling access. Alongside the gate is a cement administration building. The state and local councils are legally obligated to construct these caravan sites and therefore they select their location and design.¹

The legal definition of *gens du voyage* is rather broad, and includes “all persons having had neither home nor fixed residence for more than six months in a member state of the EU.”² In reality, nearly all people defined in that way belong to Romani groups that have been traveling around France for several centuries.

One of the officially stated purposes of placing obligations on local councils to provide caravan sites is to reduce social and sanitary inequalities experienced by *gens du voyage*. Their life expectancy is 15 years less than the total French population.³ Parliamentary debates about these dedicated caravan sites have clarified that one of the objectives of such sites is to help fulfill the right to health of *gens du voyage*. However, there is a significant gap between official discourse and the reality of life within these sites. Most dedicated caravan sites are located in distant suburban areas alongside industrial parks, highways, or railroads. Consequently, residents are exposed to high levels of pollution of many sorts, including noise, dangerous chemical products, and traffic.

This paper presents research that identifies a disconnect between the intention of relevant legislation—improving the health conditions of *gens du voyage*—and the reality of residents’ lives in the dedicated sites. It suggests that the very design of most dedicated caravan sites leads to violations of *gens du voyage* human rights entitlements. The research applies a critical analysis of the administrative and legislative requirements that *gens du voyage* stay in these degraded sanitary environments, thereby

denying them their right to the highest attainable standard of health.⁴

European scholars have used three main lenses to analyze environmental inequalities: research-action studies, publicly or privately funded, which have justified the public policies; political theory studies exploring the nature of environmental inequalities; and critical analyses of environmental normativity.⁵ The present paper is a contribution to the latter approach, and it includes analysis of historical documents, legal and otherwise, as well as direct observations of the current living conditions.

This paper begins by providing an interpretation of international and national texts related to the health conditions of *gens du voyage*, because these texts have provided legitimacy to particular treatment of people on dedicated caravan sites. In the following section, the paper draws on observations of the sites made by the author over a 22-month research period. In the third section, the paper presents analysis of historical sources from various departmental archives which show that dedicated caravan sites, although a relatively recent phenomenon, are in fact a further development of a century-long history of indirect forced settlement.

From international discourses to local interpretations

Most political decisions regarding *gens du voyage* are health-oriented: the justification of a new dedicated caravan site on a local community territory is thus, most of the time, to achieve a higher standard of health conditions for its inhabitants. How are such justifications articulated with public policies aiming at controlling Romani groups?

The health of gens du voyage from a World Health Organization perspective

In 2009, the World Health Organization (WHO) and the *Réseau français des Villes-Santé* [RFVS; French Healthy Cities Network] published a guide entitled *The health of gens du voyage: Knowledge and action*. Throughout the guide, the terms “*gens du voyage*” and “gypsies” [“*tsiganes*”] are incorrectly assigned

to the groups. Furthermore, the guide states that “*gens du voyage*” and “gypsies” are of Indian origin, although they do not form two homogeneous groups.⁶ In fact, the French phrase “*gens du voyage*” has no anthropological basis at all; invented by the French government in 1969, it classified a subgroup of citizens and replaced the term “nomad” that had previously been used in French law.⁷ Both categories, “nomad” and “*gens du voyage*”, allow the government to characterize a small minority of the French population without using racial terms—to do so would be contrary to French republicanism.⁸ The *gens du voyage* category includes Catalan Gypsies, Yeniches, itinerant merchants, and Roma. The only common feature they share is their inclusion in the category; that is, they live an itinerant life as defined by a circulation booklet, which for a long time deprived them of a proper French identity card. The groups travel not because they cannot afford a house but because they want to travel. Indeed, their caravans and camping-cars are often very expensive. The French government treats them differently simply because of their choice of lifestyle.

The WHO-RFVS guide explains that the French government has no specific public health policy related to *gens du voyages*, but it identifies “actions in the general framework of struggle against poverty or related to dedicated caravan sites and housing.”⁹ It states that

*on the basis of the danger associated with their conditions of housing and their way of life gypsies can be considered as a ‘risk population’, along with ‘young people having difficulties in finding their place in society’, ‘persons under justice surveillance or coming out of prison’, and ‘illegal immigrant[s].’*¹⁰

“Gypsy” housing and way of life are thus considered a source of health problems; indeed, health problems among *gens du voyage* would be “associated with the combined effects of precarity and mobile housing.”¹¹ It suggests that frequent pathologies affecting *gens du voyage* are due to “the promiscuity of caravan residents” and to “[bad] professional habits” of their inhabitants. In particular, infectious respiratory disease is said to be due to overcrowding and lack of

air circulation in caravans.¹² This WHO-sponsored guide attributes the ill health of the “*gens du voyage/ gypsies*” to their habits and, in particular, to living in caravans. The guide suggests that dedicated caravan sites include “a building aimed at collective activities so that inhabitants can get together in a room larger than a caravan,” a recommendation representing a series of misunderstandings.¹³

Health evaluation and public actors

Two influential documents demonstrate the negative way in which the health of *gens du voyage* is presented. In 2001, *Médecins du Monde* (Doctors of the World) and a regional association published a report entitled *A community health diagnosis of the gens du voyage population*. In 2010, a transcript was published following a conference in Guyancourt on the health of *gens du voyage*.

The Doctors of the World report states: “living in a caravan has a direct impact on human health.”¹⁴ Due to its “contiguity,” caravan life increases the number of “domestic incidents,” “respiratory problems,” “sleeping difficulties,” “unruly behavior of children,” and the “overeating and stress of mothers.”¹⁵ Furthermore, it claims that “traditional activities” have health impacts, citing metal collection, which exposes the collectors to toxic substances.¹⁶ The report concludes that the habits of *gens du voyage* are the main cause of their poor health. These public health observations refer only briefly and very cautiously to the risks that the settlement of caravans on unhealthy sites (“*l’environnement insalubre*”) could represent for human health.¹⁷ One of the speakers at the 2010 Guyancourt conference, a general practitioner, stresses that, according to his analysis, the main causes of sickness among *gens du voyage* are consanguinity, addictions, and unhealthy food. He writes: “I have observed pathologies due to consanguinity that can only be seen in medical books.”¹⁸ The speaker appears unaware that his stated observations are a repeat, with little change, of racial stereotypes widely circulated in the late-19th century that led to 20th century persecutions of the Roma. These reports support the ill-informed view that dedicated

caravan sites will allow a higher standard of health conditions for their inhabitants.

Dedicated caravan sites: Legally required but unwanted

Between legislative direction and practice

French authorities generally refer positively to the “Besson law,” passed on July 5, 2000, noting that it enables local councils to fulfill their legal obligations for hosting and housing *gens du voyage*. These include allowing *gens du voyage* to pass through, or to host and provide decent housing for the families that want to adopt a more settled lifestyle.¹⁹ The law obliges all towns with more than 5,000 inhabitants to build a dedicated caravan site for *gens du voyage*. However, a reading of the legislation suggests the burden of obligation rests only on the side of local authorities who must welcome, host, and provide the caravan site. In this paper, it is observed that there is also an obligation placed on the *gens du voyage*, who are no longer free to choose where they can park their caravans as they could before the enactment of the Besson law. Under this law, they are obliged to gather in specific places reserved for *gens du voyage*.²⁰

Because residents in many French towns do not want dedicated caravan sites near their own homes, the sites are usually placed in areas not favored by property developers. For example, the caravan site La Chaberte, in the territory of the *Toulon-Provence-Méditerranée*, was built on the outskirts of Toulon, in an industrial area between a major highway and a departmental road. It opened in 2014. The site is not served by public transport, and it is too remote for the inhabitants to walk to town, which leaves cars as the only means of transport. This is typical as dedicated caravan sites are nearly always in suburban areas, surrounded by national roads, highways, or a railway, if not all three together. They are also placed alongside industrial parks, exposing the inhabitants to pollution. Several caravan sites in the suburbs of Lyon have been set up near refineries and factories which the European Commission has associated with high industrial risk levels as identified by the Se-

veso Directives (named after the 1976 explosion of the Seveso chemical plant in Italy). Those directives place obligations on dangerous industrial sites to adopt measures to prevent pollution and accidents. Caravan sites built in smaller communities are not necessarily any better; those near Aubagne and Sisteron are located remotely, distant from the small communities, but near noisy major roads.

Administrative practices and architectural features result in further burdens for people living in dedicated caravan sites. Since the end of the 1990s, private enterprises have specialized in building and managing the sites. The New Public Policies (NPP), creations of neoliberal inspiration, have favored public service being delegated to the private sector. In the case of dedicated caravan sites, it created a new public market which is now in the hands of a few private enterprises. One such company, Vago, has outlined its “four commitments” in creating new sites: more respect, less degradation, less conflict, and no unpaid bills.²¹ Architecturally, dedicated caravan sites built by companies like Vago are comparable to low-category parking lots: the ground is all asphalt, there are no trees and therefore no shade in the summer. Bathroom facilities are rudimentary at best and designed simply to limit any degradation.

Case study: Marseille

In order to better understand the environmental and health conditions on dedicated caravan sites, I now turn to the findings of my fieldwork. This fieldwork was conducted for a PhD in anthropology at Aix-Marseille University (AMU). There has been some published research on dedicated caravan sites based on interviews with inhabitants, but I used a participant observation methodology, spending 22 months on various dedicated and non-dedicated caravan sites within my own caravan.²² I therefore had direct experience of the challenges of living on such sites, notably in matters of health and hygiene. My research received the ethics approval of my PhD committee at AMU.

Marseille’s dedicated caravan site, which can host up to 24 families, is located in the industrial area of Saint-Menet between a highway, a railway, and a power station. There is a large chemical plant

less than 500 meters from the boundary of the site. The chemical plant is hazardous, as evidenced by its Seveso category, and it is managed by Arkema, the company that managed the factory that burned in Texas after the 2017 Hurricane Harvey.

The layout of the caravan site matches the harsh environment: it has rectangular grounds surrounded by a fence, and looks onto the power station, which is surrounded by barbed wire. There is only one entrance to the site, so it would be difficult for all inhabitants to exit quickly in an emergency. In the center of the site, there is a building for administrative and social staff; its windows have iron bars, and staff can survey the entire site from this building. On both sides of an asphalt road, each lot has an individual sanitary block with squat toilets and a basic shower hose. Inhabitants must pay a EUR60 deposit, plus a EUR2 fee per day, but this does not include charges for water and electricity.

The dedicated caravan site is located in the most-at-risk part of the Seveso-rated area. This means if there is an explosion, the inhabitants and their caravans would experience direct thermal effects, as well as the impact of the explosion itself. The consequences were well-documented following the explosion that destroyed the AZF site in Toulouse in 2001.²³ Despite the EU's adoption in 1982 of the Seveso regulation that bans housing in most-at-risk areas, Marseille authorities kept this site at Saint-Menet, which had been built in 1977. The minimum safety standards require the site to include a confined room for shelter of all inhabitants in case of chemical emergency. The onus of this obligation lies with the local authorities and the management, Vago. France Nature Environnement, a French association specializing in environmental protection identified the lack of this safety feature in 2016. Their report notes "insufficient shelter conditions, for not even half of the persons who would be impacted, and this shelter [that is, the administrative building] is only open during business hours."²⁴

During my time on the caravan site in Saint-Menet between April 2015 and February 2016, Arkema had agreed to a containment scheme and was putting a containment room for shelter within every house inside the perimeter of the Seveso area. But when I

inquired as to whether the caravan site was included in the scheme, they said no, and they confirmed that there were no plans in place to ensure protection to inhabitants in case of a chemical emergency.²⁵

There are other unpleasant aspects of this site. It is close to the highway so the noise level is high, and there is an ever-present smell of gas.²⁶ The nearby power station means some of the inhabitants live only a few meters from high-tension power poles. The sanitation blocks are in a state of poor repair; the clogged drains from the toilets and showers frequently overflow. When I asked for the blocked drains to be cleared, the management informed me that the inhabitants had deliberately thrown little stones in the pipes. These unsanitary conditions attract rats and people living on the site claim they are often scratched by the rats.

Health services on the site

Where, in such conditions, could we observe actions that would fulfill the stated objectives of the legislative to improve the health and living standards of the *gens du voyage*? In the administrative building where medical staff work. Several times a month, nurses, and occasionally doctors, are on site to implement compulsory vaccination campaigns and health promotion measures, particularly for children.

However, my research found that inhabitants of the site prefer to consult their own doctors. The *gens du voyage*, like other French citizens, are included in a social security system that allows them to consult, without a fee, general practitioners and specialists anywhere in France. I observed that when inhabitants took their children to the nurses and doctors on the caravan site, they visited their own family doctor afterwards.

When I asked a neighbor about this arrangement, she explained that she did not want her present living arrangement in a contained area to prevent her from using normal public services like county primary schools and local doctors. She added that it would not be wise to trust the doctors designated for you by an administration that forces you to live in degraded environmental conditions. Since France has a non-discriminatory health system—anyone is entitled to equal and free health

care—why should the *gens du voyage* renounce the benefit of free choice of doctors? By consulting their own family doctors, my neighbors clearly demonstrated their understanding of their rights entitlements as French citizens to benefit from a common social security system and to be treated equally with the “sedentaries,” as they sometimes call French citizens who do not live in caravans.

Most inhabitants regard dedicated caravan sites as segregated places with unhealthy environments. By extension, they also consider the sites’ health services not as social services but as measures of social restraint. They were aware that French public policies concerning *gens du voyage* are not implementing the right to live in a healthy environment, or the right to health care, but to the contrary, the sites bring about environmental injustices. The right to health is not only a right to access equal care but also a right to live in a healthy environment. However, on the Saint-Menet caravan site, those arguments are only aired privately—I was aware of them because I was a resident—but I never heard them expressed to the managers of the site.

Women’s protest

Inhabitants are aware that managers of dedicated caravan sites could ban them if they complained about their living conditions.²⁷ And if they could no longer access dedicated caravan sites, the only option left to them would be to park in illegal locations, which would place them under constant threat of expulsion by police forces. Under such circumstances, their silence on their poor environment is understandable.

Nevertheless, some inhabitants have organized protests about their degrading environmental and health conditions. Women living in the Hellemmes-Ronchin dedicated caravan site in the suburbs of Lille formed an association in 2014. One of the women described the site as “stuck between a cement-plant, a stone-breaking company, and fields with regular spreading of pesticides and other toxic products.”²⁸ She added that “children and elderly people are more affected [than others] since they remain there constantly, and therefore breathe

ceaselessly the cement dust in the caravans and in the atmosphere.” She observed that children made up the majority of inhabitants.²⁹ These women assert that facilities were poorly designed: there are no closing doors and no heating in the sanitation blocks, which makes it difficult to take showers in the winter. The association observed that the gate controlling access to the area was not big enough to allow fire trucks to enter the area.³⁰

Hellemmes-Ronchin in Lille and Saint-Menet in Marseille are not isolated cases. The Besson Law has resulted in a market for dedicated caravan sites, with potential for good revenue for companies such as Vago. There is no incentive for a company to spend funds on creating a pleasant environment. Indeed, the less it spends on improving or maintaining the site, the greater its profits. A human rights accountability mechanism should review this public policy to ensure that profit is not made at the expense of inhabitants’ rights.

In this paper, I contend that authorities and commissions have been blind to the historical discrimination against Romani groups in France that the Besson Law perpetuates. I now consider this law in its historical context.

History of the dedicated caravan site policy

Hygienic surveillance of the “nomad”

The vagueness in the use of the terms “*gens du voyage*” or “gypsy” is not limited to the WHO guide discussed above.³¹ As early as the end of the 19th century, members of the Third Republic discussed the possibility of passing a specific law for bohemian populations, as Romani population used to be called. However, there were difficulties identifying the population concerned in the legislation. In 1907, the Chamber of Deputies (the lower level of parliament) queried: “What are the signs according to which a gypsy can be identified?”³² There is no evidence that the question caused any concern, even though it is equivalent to asking by what stigmas a gypsy can be stigmatized. One member answered: “Gypsies can be identified with the following characteristics: there is first of all a racial criterion that you know as well as I.”³³ It took until the adoption

of a July 16, 1912 law for the members to elaborate a “proper” administrative category, “nomad,” that focuses on the supposed nomadism of gypsies [“*romanichel*”] without using racial criteria explicitly. But this Republican “omission” of a racial characteristic is replaced by another dangerous concept, namely, the “precise idea that a nomad is, almost always, a criminal.”³⁴

Christophe Delclitte observes that the administrative category of “nomad” is “a central element in the understanding of the fact that there is a continuity in the way the [French] legislative, administrative, and police institutions have treated gypsies during the 20th century.”³⁵ The “nomad” category ended in 1969 but was immediately replaced by the new category of *gens du voyage*.³⁶ It is also worth noting that the 1912 legislation provided a legal framework for the detention of gypsies in France during the Second World War.³⁷

The “hygienic surveillance” of the gypsy population was one of the intentions of the July 16, 1912 law, which obliged all “nomads” to carry with them an anthropometric leaflet.³⁸ Nomadic populations were considered responsible for the spread of disease, so surveillance of the individuals was considered essential. The last pages of the anthropometric leaflet concerned health. This health section [*carte de santé*] started with smallpox [*antivaricelle*] vaccination and following pages included “prophylactic measures that can be applied to disease.” The leaflet mentioned whether the nomad had been in isolation or had been hospitalized, and also outlined whether “disinfection” measures had been applied, or if “destructions of contaminated objects” were required. This focus on hygiene is an ongoing feature of all policies relating to “nomads” or *gens du voyage*; indeed, it is used to justify increased health surveillance of specific populations.

First steps of a politics of settlement

In 1960, a few years before the abrogation of the 1912 law, the French Ministry of Public Health and Population launched an inquiry into “the conditions of life of populations having a nomadic origin.”³⁹ The inquiry led to a new law, passed in 1969, and helped generate new ideas on the best way to “hasten the

evolution in the sense of settling the Nomads.”⁴⁰ One of the most successful ideas was “to create in all important cities halting areas with facilities.”⁴¹ That is the first occurrence, at a national level, of a system of caravan sites under the supervision of local councils. The report says that “the halting areas for Nomads are liable to help the settlement and the social insertion of those populations.”⁴² The centers were to have “specialized” schools, because “if the young nomad is clever, he is used to an unconstrained life,” and workshops “that would encourage the transformation of itinerant jobs.” The centers were also to have a system of surveillance allowing “better public security (end of thefts, improvement of hygiene).”⁴³ The inquiry led to the laws and decrees that created the “dedicated caravan areas.” A historical study of this project shows that the initial target was not to allow a peaceful coexistence of two ways of life but to speed up the settlement of nomads.

Environmental injustices

Gradually, over the last 50 years, national and local authorities have implemented a system assigning special halting places to a certain category of people. Some areas that had already been known to *gens du voyage* were chosen by local authorities. In those cases, the spots had been chosen because, being far from city centers, they would be beyond easy reach by police forces. Often neglected by local authorities, those areas were very poorly kept and had degraded sanitary conditions. It was on those unhealthy grounds that some local authorities had decided to have dedicated caravan sites built. The state appears to have funded projects in these unsanitary areas than in newer, more pleasant areas.⁴⁴ As an example, Labarde in Bordeaux, also known as the “Andalous village,” was first a proper slum, then a camp occupied by various people, and eventually an area that local authorities rehabilitated, adding small houses for residents. In 2001, after recognizing extremely high lead levels in the blood of children living in the area, local authorities decided to relocate those families.⁴⁵ But the official statement from local authorities said that the lead poisoning in the children was the result of their parents’ professional activities, dealing with

metals. However, the parents had not worked with metals for many years, and Doctors of the World established that the cause of the lead poisoning was definitely environmental.⁴⁶

Other cases show that local authorities have sometimes chosen unhealthy spots with no connection to a “gypsy” background. A report of the advising committee of the Bouches-du-Rhône department (May 5, 2003) says that the proposition made by Gardanne, a local community, to have its dedicated caravan area “close to a Péchiney plant” must be subject to the results of a study on “risks afferent to the presence of two heavy oil tanks located at 60 meters from the area.”⁴⁷ The same report observed that the city of Arles had decided to have its dedicated area in a flood zone and that “a specific scheme of alert and emergency should be realized for the rapid evacuation of caravans.”⁴⁸ Similarly, the towns of Berre-l’Étang, Velaux, and la Fare-les-Oliviers have suggested that their respective caravan sites are located in most-at-risk areas, all in earthquake risk zones. The advising committee of the Bouches-du-Rhône department said it was not opposed to the choice for two other dedicated areas, in Fos-sur-Mer and Port-Saint-Louis-du-Rhône, each within a Seveso area.

Conclusion

The *gens du voyage* have been forced to stay for longer or shorter periods in areas supposedly intended to provide them with better health conditions. We have seen that the reality is extremely different from the stated intention of the legislation: the so-called *aires d’accueil*, literally in French “welcoming areas,” more closely resemble home residency, where inhabitants experience social discrimination, and poor health and environmental conditions. People staying in spots such as Saint-Menet (Marseille) or Hellemmes-Ronchin (Lille) inhale and ingest pollutants present in the environment and suffer diseases resulting from toxic environments. Although the inhabitants are sometimes being held responsible for their own illnesses, with blame placed on their professional activities or unsanitary habits, there is evidence to show the causes are environmental.

The creation of dedicated caravan sites in which *gens du voyage* must live has enabled authorities to keep surveillance on these people. The stated purpose of the sites is to improve the health of *gens du voyage*. But the evidence and history suggest otherwise: such arrangements simplify the surveillance of populations who have suffered discrimination from the beginning of the Third Republic onwards, through the official acceptance of their ‘bad reputation’: dangerous people, thieves, and vector of epidemic diseases.

This restriction of the rights of *gens du voyage* is not unique: it is analogous to the restriction imposed on other marginalized social groups’ rights, including, most recently, illegal immigrants. Sociologist Michel Agier has forged the word “encampment” to describe this general phenomenon of surveilling people through restricting their liberty of movement.⁴⁹ There are various ways in which to practice this encampment. One of the observations of my study is that French administration has invented a new form of encampment that I suggest calling “nomadic encampment,” consisting of leaving people free to circulate between dedicated areas.

By a perverse use of language, with the notion of *gens du voyage* evoking a choice of lifestyle associated with traveling, the category created by legislation aimed eliminating this way of living. In another perverse use of language, the health goals associated with the Besson Law—improving the health of *gens du voyage* thanks to medical services—are an illusion: the reality is that exposing the *gens du voyage* and their children to environmental toxins serves to curb their desire to continue to live on the road. The paper has shown the connection between today’s sanitary policies and a long history of administrative control and surveillance of ‘nomads’. It has also shown the unpleasant and dangerous consequences of contracting out public responsibilities to private enterprise.

There are immediate actions available to improve this situation for *gens du voyage*: dedicated caravan sites in the vicinity of industrial sites and highways could and should be closed. A second measure would be to listen to what *gens du voyage* have to say, and to address their concerns. Indeed,

when it comes to deciding what policies are needed to avoid major sanitary risks, people living in the areas need to be consulted so they can participate in policy development, as is their human right. This approach gives priority to the testimony of *gens du voyage* and helps shape changes in practices that would enable their rights to health and a healthy environment to be fulfilled.

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