

TESTIFYING, AGAIN



Annual report
2023

CENTRE
PRIMO LEVI
VIVRE APRÈS
LA TORTURE

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The Primo Levi Centre

The Primo Levi Centre is a non profit association dedicated to the care and support of survivors of torture and political violence exiled in France. The Primo Levi Centre's work is based on three missions: caring, training, and advocating.

Caring

Every year, the Primo Levi Centre welcomes over 400 people from almost 50 different countries to its care center in Paris. These people benefit from multidisciplinary care: psychological, medical and physiotherapeutic, as well as social and legal support. The treatment offered lasts an average of three years, depending on the patient's needs and the pace of their integration into France.

Medical and physiotherapeutic care, psychotherapeutic work, social accompaniment and legal support are interlinked and function in a dynamic space. The aim of this space is to provide a physical and psychological enclosure for survivors of torture and political violence. The reception interview is integral part of care.

Since its creation, the Primo Levi Centre has made it a requirement to provide an interpreter according to patients' wishes. A Children and Youth Center is specifically dedicated to young patients, particularly unaccompanied minors.

Training

The Primo Levi Centre has long been committed to transmitting and passing on its experience in caring for and supporting exiled survivors of torture and political violence. In 2002, this approach led to the creation of a training center for professionals and volunteers working with exiles. Over 700 people are trained every year. The Primo Levi Centre also highlights the issues encountered in its clinical practice, through the publication of a journal entitled *Mémoires*. It is conceived as a space and a forum for reflection and debate, open to external contributions, on the effects of exile and psychotrauma. The desire to create a space for reflection and debate is also reflected in the organization, every two years, in the form of a conference bringing together care and support professionals, as well as researchers, all invited to share their knowledge and experience. Finally, the Primo Levi Centre is a regular contributor to academic and professional forums.

Advocating

Backed by its experience and legitimized by its field work with exiles, the Primo Levi Centre carries out, alone and as a part of a network, advocacy, and informational campaigns to bear witness to the effects of torture, promote appropriate care and defend the right to asylum. It regularly participates in the drafting and promotion of advocacy reports in conjunction with other associations. It is also a partner in information and awareness-raising campaigns.

Finally, the Primo Levi Centre regularly takes part in conferences, meetings, debates and screenings organized by associations and cultural partners, to shed light on the effects of political violence and exile.

A look into 2023

Key Figures

335

patients

(25% of which are minors)



of patients entered the center in 2023



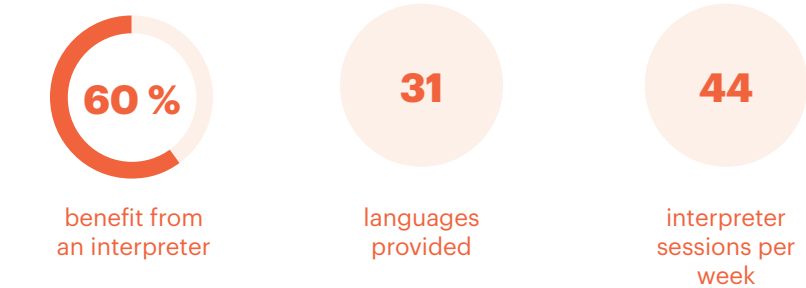
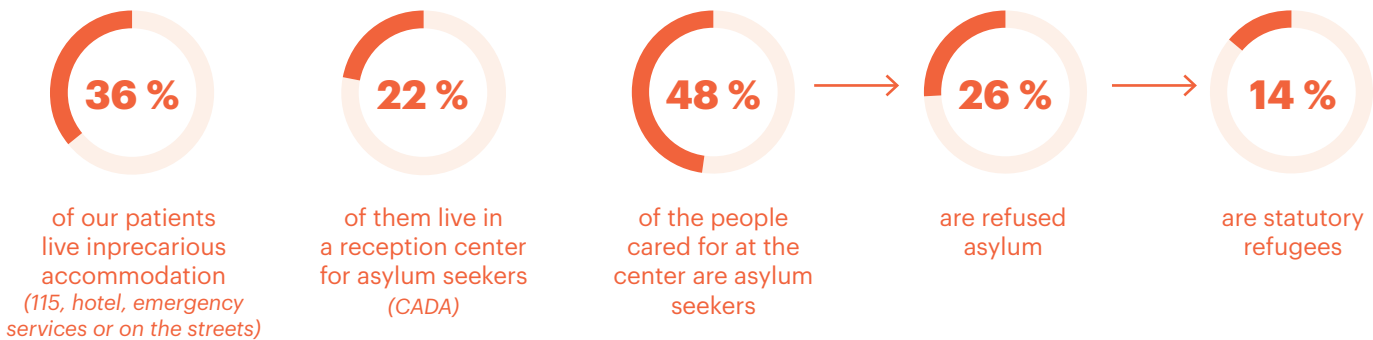
of newly-received minors are unaccompanied

4 562

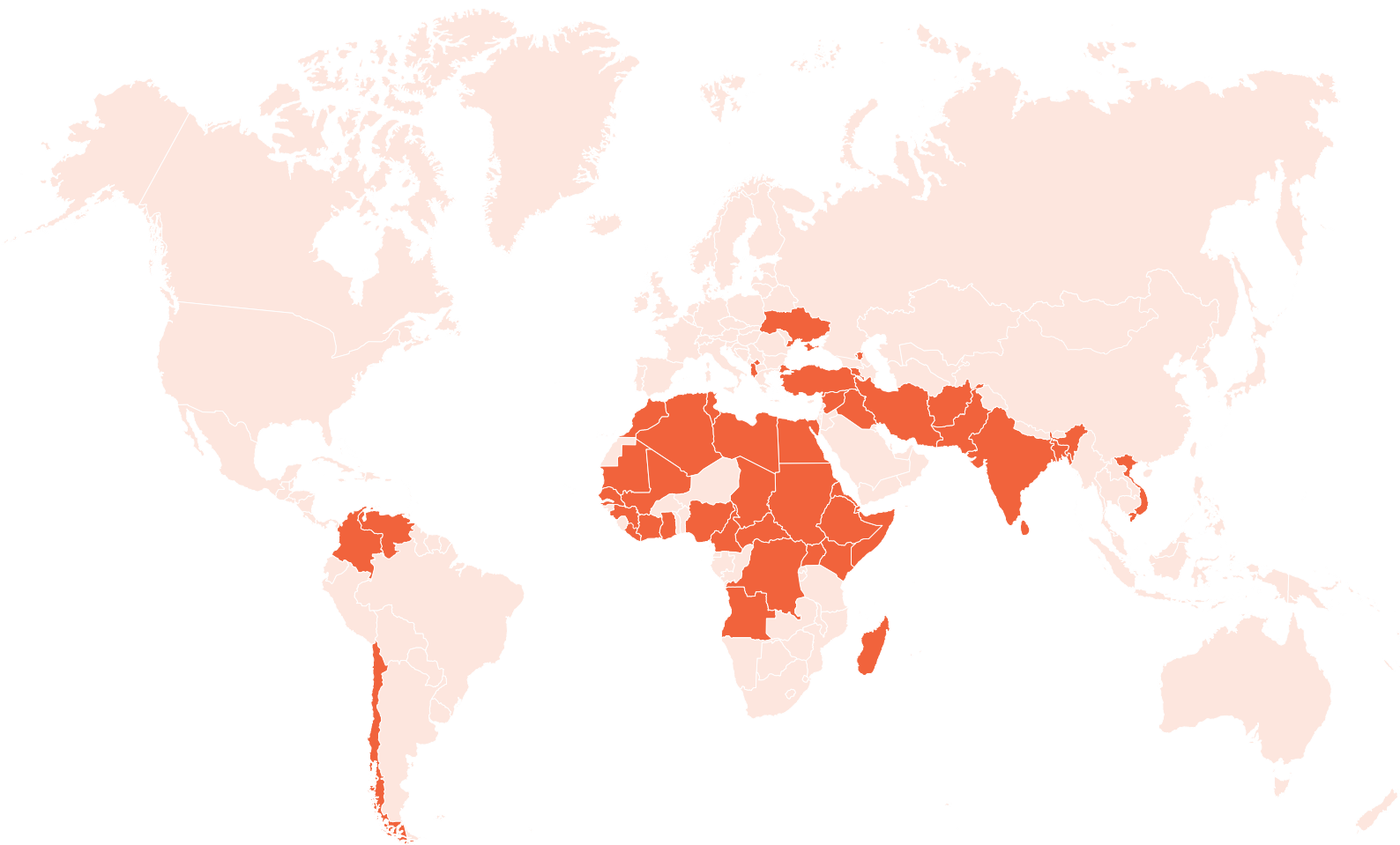
consultations

3 years

average treatment length



Where do our patients come from?



45

nationalities

3

main
geographical
origins

52 %

Democratic Republic of
Congo, Guinea, Ivory Coast

21 %

Afghanistan,
Turkey, Iran

12 %

Chechnya,
Armenia

4 Highlights of 2023



Ukraine: continuing to spread our experience and knowledge in the face of growing needs

Dating back to the start of the Ukraine Crisis, the Primo Levi Centre began a partnership with the Lviv Hospital in Ukraine, which continued into 2023. Located in the west of the country, 70 kilometers from the Polish border, this hospital operates three sites for adults and children, and is on the front line of care for war victims. As previously done with the Democratic Republic of the Congo, Lebanon and Chechnya, the Primo Levi Centre has elected to share its experience in the care of victims of war in dealing with the effects of war and political violence on civilian populations. After an initial training session in July 2022, a team of four professionals from the Centre travelled to Warsaw in March 2023 and co-hosted a training session with the Yale University School of Medicine geared

towards care providers from the psychiatric department of the Lviv Hospital. A few months later, at the invitation of our Ukrainian partners, a delegation from the center took part in an international forum on the reconstruction and rehabilitation of the Lviv Hospital premises. The forum allowed us to better understand the dynamics at work on location, and more specifically, the project to create a mental health center dedicated to the rehabilitation of war victims. This project is strongly supported by the team of Dr. Oleh Berezyuk, head of the psychiatry department, who wishes to draw inspiration from the Primo Levi Centre model. In October 2023, six members of his team visited the Centre in Paris to gain a better understanding of how it operates. Against the backdrop of the war, this visit was particularly significant for both teams, opening the door to a number of partnership development proposals, including the organization of new training sessions, the publication of a joint issue of our magazine *Mémoires*, as well as the development of new lines of research.

Advocacy in France: speaking out about the consequences of the “immigration” bill

The Centre’s advocacy in 2023 focused on the bill “*Immigration and Integration*”. Our aim was to raise parliamentary’s awareness of the situation of exiled women and the consequences the bill could have for them, as well as for exiled people in France in general, given their background and social situation.

Presented as a text of “*balance*”, the bill was imbued with a spirit of mistrust towards exiled people, founded in three previous trends: the acceleration of the asylum application procedure detrimental to the time needed to put together a narrative, the limitation of the right to health, and restrictive integration measures in practice.

An analysis of the bill was carried out in early 2023 and sent to all members of parliament, along with a request for a meeting. The Primo Levi Centre was able to take part in three hearings at the National Assembly and Senate, ensuring that the situation of exiled women was taken into account in the discussions.

Following the decision to suspend consideration of the text by the Senate, the Center addressed a letter of analysis and a call to action in September 2024 to the same contacts. Recurrent contacts with the Senate resulted in Senator Laurence Rossignol acting upon our recommendation of addressing the violence suffered by exiled women on the route towards migration, in the form of a question posed to the government in November 2023. This question led to a response from the Minister of the Interior, Gérald Darmanin, concerning developments to be considered in the scope of the Geneva Convention.

In parallel to its own activities, the Centre joined a group of 60 associations in January 2023, whose actions led to five press releases and a direct questioning of members of parliament in September and December, two crucial points in the discussions.

The Primo Levi Centre’s Biannual Conference: “*Silences and Listening*”

The conferences organized since the birth of the Primo Levi Centre are a cornerstone of its transmission work. The Centre’s 10th conference examined the links between silence and listening, a theme at the heart of clinical research into the effects of torture and exile for patients and professionals alike: what do the silences of those who have been survivors of political violence cover? Are they the mute traces of an intimate struggle in the face of shock, fear, shame and guilt, impossible to put into words? Are they the mark of a desire to forget, to erase, or on the contrary, to keep to oneself a supposedly irrevocable word, thus protecting the listener from the violence he or she encounters? What impact does this clinic have on the professionals who listen? What effects do silences have on the institution?

Because these issues are multidisciplinary, some twenty speakers (psychoanalysts, historians, legal experts, philosophers, artists, journalists and psychologists) presented at the Espace Niemeyer in Paris with 270 people in attendance.

Accompaniment: Laughter to relieve family trauma

The project beginning in autumn 2021 with Clowns sans Frontières (clowns without borders) is directly linked to the practice of the Primo Levi Centre: a significant number of the families welcomed by the Centre have been dislocated, whether during the violent events suffered at home, at the time of flight, or during the journey. Many are single-parent families, one parent having been killed or disappeared. Unaccompanied minors, who have lost their parents or have no news of them, are also monitored. These traumatic experiences have left deep scars on adults and children alike, which continue into exile. Clowns sans Frontières’s unique use of performing arts to support populations affected by humanitarian crises or in extremely precarious situations, resonates with our own work. The 15 workshops took place one afternoon a month and were led by two artists, bringing together 150 children and their parents.

In three-hour sessions, Clowns Sans Frontières artists used laughter with children and adolescents to soothe their psychological suffering. This year’s artistic focus was specifically on a clown’s work, with which few participants were familiar. The experience will be repeated and continued in 2024.

Editorial

I Make it “hold”

This verb, «to hold», is essential in the work of the Primo Levi Centre. First, to make our patients “hold” in the face of the effects of violence and torture. Maintaining the link with society, so that little by little, landmarks destroyed by violence return, and they become subjects again, actors in their own lives. This is “haute couture” work, as one of our doctors who recently joined our team puts it. But this work, patiently carried out, is fragile. A rejected asylum application dashes hopes of integration, a new episode of violence in the country of origin recreates the trauma, and the care “bubble” can burst.

Second of all, to make our patients “hold” since in 2023 sessions with our psychologists increasingly began with the question: “Have you eaten today?” In the opinion of our team, never has the precariousness of our patients’ lives been so intense, with serious consequences in our work and a sense of waste. Hunger is now forcing its way into our consulting rooms and undermining our support. One of our doctors warns of this situation, which may not be new, but is now taking up an enormous amount of space: “A large proportion of my patients only eat once a day. So yes, it’s a big concern because it implies health problems and therefore more difficult medical followup. These are health problems that aren’t medical to begin with, and that I’m obliged to medicalize.”

Even the refugees we support, whose suffering has been officially recognized, experience acute distress. In many cases, this is due to cuts in entitlements, for example following a move to another region. In other cases, entitlements are opened too slowly. These periods of administrative “no-man’s-land” can last for months, plunging our patients back into precariousness.

Our support is also likely to be hampered by the vote, on January 26, 2024, of the bill “to control immigration and improve integration”. The consequences for our patients will be deep: automatic refusal of material reception conditions, automatic closure of the asylum application, impossibility of access to the job market, extension of detention cases, one single judge at the National Asylum Court. In this disarming list, one measure should draw our attention: the obligation, rather than the possibility, to refuse or withdraw material reception conditions.¹ The case-by-case approach has been abandoned, and the individual situation of the person, particularly his or her vulnerability, is no longer taken into account. Let us take for example the case of a single mother living in a reception center for asylum seekers (CADA) in Paris, who refuses an offer to move to another center in Marseille because her two children attend school in Paris and her entire network of acquaintances is located there, will automatically be denied access to the support from the state. And will find herself without accommodation or income.

¹ These include an asylum seeker’s allowance and the possibility of accommodation. CMAs can be withdrawn or refused if the legal conditions are met.

2,300 km away from Paris, our colleagues in the psychology department at Lviv hospital in Ukraine, one of the only departments in the country to offer psychological care for war victims, work under extreme stress, but without having had extensive experience of the effects of psychotrauma. The Primo Levi Centre passed on this experience to them in 2023, stating a once again in its role as intermediary. As one of our practitioners puts it, *"the particularity of our clinic is that it is not caught up in discursive political contexts. Symptoms are, by definition, detached from reality. When a person has a nightmare in Paris, Bogotá, Istanbul or Kiev, the mechanism is the same. That's why we can share and transmit certain types of knowledge, without drifting from the singularity of the case."* We are following in the footsteps of Primo Levi, for whom testifying was a necessity. For our team, it's a question of making visible what is not visible, of transmitting what is difficult to say, in order to support those who are in direct contact with exiled people, to help them think about how to welcome them, to give them the tools to understand trauma, and thus to offer appropriate care. A clinic such as ours, faced with complex situations and intersecting realities, cannot remain without *"thinking"* and sharing.

But we're not alone. Since its creation, the Primo Levi Centre has worked with a wide range of people (associations, hospitals, schools, health centers, medico-psychological centers, reception facilities, shelters). This ecosystem, which has been put on hold by the pandemic, is flourishing again in 2023. It shows that the mental health of exiled people, faced with an undersized healthcare offer and rundown, unsuitable reception facilities, is not only a public health issue, but also and above all a collective one.

The current political, where the extremes are showing increasing hostility to the figure of the foreigner, is gradually transforming reception policies into machines for exclusion and precarity, making it imperative for everyone to mobilize.



Antoine Ricard

President of the Primo
Levi Centre

Caring

Reception and orientation

To remember in 2023

- The reception service handles an average of **35** inquiries or referrals **a week**.
- 45% of new patients applied for a consultation or referral **over 18 months after their arrival in France**.
- The stability of the team is at the heart of the Primo Levi Centre's support, **a stability that has continued in the Reception department**, run by the same three employees for several years.
- The Primo Levi Centre is **at the heart of an ecosystem of care organization and support for exiled people**. Requests for care sent in by institutional and associative partners in 2023 came from a wide variety of sources: associations, hospitals, health centers and medicalpsychological centers, accommodation facilities for asylum seekers and schools.

Why a reception

In the practice of the Primo Levi Centre, the word welcoming has a double meaning: receiving foreigners to France, and receiving them to our care center. This raises a number of questions: do we need to receive people in order to care for them? Can we care without welcoming? **Déborah Caetano**, head of reception services, and **Dimitra Kolonia**, clinical psychologist, answer these questions.²

What does it mean to host at the Primo Levi Centre?

Dimitra Kolonia : At the Primo Levi Centre, reception has two dimensions: the reception interview, which is a prerequisite for care, but also reception on a daily basis and throughout care. These two dimensions have different purposes and time-frames. I'd say that reception here means the possibility of an offer of time and space, in which a subject may or may not take part, with the primary aim of treating himself. An offer of time, by taking the time it takes, rather than that of a protocol. It's more logical than chronological. It's a time that respects the singular rhythm of each subject's treatment. In this sense, the welcome opens up to singularity and targets it. It tries to respect the particularity and temporality of each subject. It's the offer of a word that is not an injunction.

Déborah Caetano : The reception function has been designed as an integral part of patient care. As a result, anyone who comes to the Centre for psychological or medical treatment must undergo an initial intake interview.

Welcoming someone is an encounter: the first contact with the place, the first look, the first smile and the first words with the carer and the professionals. It's not a simple state of mind, but a complex professional act that will determine the rest of the relationship with the other person. I remember the time when, on leaving an interview, a lady breathed a sigh of relief, smiled at me through her eyes and said: "I'm so happy!" tears and thanked me for taking the time to listen to her: "Thank you, you

looked at me as if I were a person." That's how dehumanized some people can feel! The receptionists give the first impression of the place to the person who will be settling in physically and psychologically as a patient. Right from the outset, the aim is to consider the individual and his or her needs. This makes it possible for a bond of trust to emerge. I receive people in a closed office, away from prying eyes and ears, to ensure confidentiality. I adopt a nonjudgmental, non-infantilizing stance, respecting each person's voice, temporality and uniqueness. We also have to find the right distance between ourselves and what is heard.

I receive people alone, or with a professional interpreter if necessary. If possible, I suggest that the person choose an interpreter of the same or opposite sex. This is her space, so that she feels free to speak. It's necessary to continually adapt to the singularity of the person in front of me. In an interview, in addition to understanding my interviewee's request and completing it with him/her, it will be necessary to contain, stop the emotion, maintain or reposition a framework in view of the person's history.

² Dimitra Kolonia was a member of the Primo Levi Centre team from 2019 to 2024.

Multidisciplinary care

Takeaways from 2023

- **4,562 consultations were carried out**, with a strong predominance of psychological consultations carried out by 7 part-time psychologists.
- **Food insecurity has been a very prevalent problem** over the last three years: in 2023, 29% of patients followed by the social service were affected.
- **A second jurist position was created** in 2023 to meet the growing need for patient support in line with an increasingly complex administrative process.
- Over the past three years, the association has had to cope with a **significant turnover in its clinical team** (around 50%), which has led to transmission problems within the team, and a drop in activity in 2023. This is because the accompaniment of patients by new practitioners has to be done gradually and requires an incompressible training period.



Psychological follow-up

Keeping patients on track

"In almost all my therapies, I feel a weight of making the therapy 'stick' for the patient, without knowing whether it's going to work or not. When the person doesn't turn up for an appointment, for various reasons, you have to make these absences count for something, i.e. make the person understand that they were expected, that their absence didn't go unnoticed", says one of our psychologists. A sentiment that many members of our team share: the creation and continuity of a bond between clinician and patient are essential to effective support. Our patients find it hard to establish a form of continuity, due to an instability from ruptures caused by the violence they have suffered or from their incessant need to comply with administrative and legal injunctions. There is no respite. The center is therefore a solid landmark in their lives. *"Some people have difficulty situating themselves in time and space. They may walk into a room and say to themselves: 'Am I in prison now? What day is it?'"* according to another psychologist from the center. The administrative process of exile is also a real ordeal, to which the center must respond. *"We have to tell them: 'We'll continue to support you.' The person must know that we'll be expecting them the following week, that we're here. The link is not broken, even though the person may have received a decision that is upsetting."*

Setting the scene

Being there, even beyond direct care, especially for children (and parents) who are "constantly on the move. They don't have the respite they need to rebuild a bit of a bond, to stabilize their situation, around themselves and their education. It's as if they're constantly on the run", describes one of the Center's psychologists. This constant movement can lead to delays and learning difficulties. It's up to our team to make the link, with the school for example, to find solutions.

It's all about getting children to "fit in", but also parents who have seen their lives disrupted without yet having regained control of them. *"We're really involved in a type of support that goes beyond conventional psychological counseling. It's not just a problem of concentration, there's a support system that addresses both the anxiety these children experience and their learning, which gradually improves as the anxiety subsides".*

Patients pathways

From Kabul to Paris, reconstruction on hold

Sahar A. is Afghan and has just turned 76. She arrived in France in 2016. Her fate changed after she and her husband took part in a demonstration in Kabul. Three weeks later, her husband was sent to prison, where he lost his life. Their business and all their possessions were confiscated, and she had to flee her country or face the same fate. She manages to arrive in France, a widow, in a country she doesn't know, driven by circumstances, the country isn't really her choice. She arrives at the center, and begins a double psychological and medical support. At 76 years of age, her stay in France was not easy. She was initially supported by a women's association in Paris, with which the Centre Primo Levi is connected. A first home is found, but one essential element is missing: a key. She doesn't have a key to her room, and being constantly on the alert, she can't sleep.

After several months, thanks to the joint action of the center and the women's association, she found independent accommodation. Her situation improved greatly. Consultations became less frequent, but in 2021, the takeover of Kabul by Taliban forces brought her back to horror. She returns to the center once a week. This episode of violence in Kabul also brings back older episodes that she hadn't mentioned during her consultations. The shame of having been betrayed and manipulated by the Taliban, a shame she can't share, also comes to the fore. The respite she had begun to experience was suspended. The psychologist at our center who follows her is mobilized to ensure the link, to bring her some form of stability. She's a 76-year-old woman, who may have refugee status, but she lives on very few financial resources and has strong doubts about why she's in France. If it hadn't been for this new episode of violence, the treatment would have been concluded, but the war has reappeared once again, on too massive a scale, and has damaged her stabilization path. We now have to respond once again to his request for support.

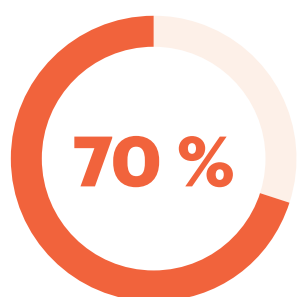
A Return to Normality

Sékou A., at age 34, is a member of a very active opposition party in Côte d'Ivoire. He was a local section chief and also a shopkeeper. His business was flourishing, but he was arrested, tortured and his store looted. He spent several periods in prison. Through a cousin, he managed to get out and decided to flee to France.

He arrived at the Primo Levi Centre, almost 6 months after his arrival in France, in a truly critical state. His body had been *"invaded."* He was initially seen by a doctor. Talking was difficult. However, his speech gradually came back, paving the way to work with the psychologist to whom Mr. A. was referred. The psychologist provides him with a great deal of support, helping him rebuilding his bearings, which have been destroyed by the violence. A lack of bearings manifests itself into missed appointments due to a disconnect from his environment. The psychologist thus ensures the appointments remain consistent, bringing a permanence or continuity to Mr. A. The psychologist reminds Mr. A., *"I'll see you next week."* Slowly, he returned to a certain normality. However, this respite was short-lived, when he was informed that his application for asylum had been rejected.

Mr. A. described to his psychologist that during his interview for asylum, he felt as if he was paralyzed, unable to explain his situation, to show the documents that justify it. He went through the interview passively, without daring to intervene, as if he had reverted to being merely an object in the eyes of others, a direct consequence of the traumas and tortures he endured. The refusal of his request was very unpleasant. This was a decisive moment for our team, as we really had to *"hold up"* Mr. A. so that he could continue what he had started to build, under the threat of collapse. His accompaniment is crucial if we are to overcome this ever-present sense of disorientation. This requires a great deal of support, so that, little by little, his bearings can be reestablished so that Mr. A. ceases to be a victim and becomes a subject, the actor of his own life.

○ The statistic



of the Centre's patients benefit from psychological care, with minors accounting for 32% of patients receiving this support.

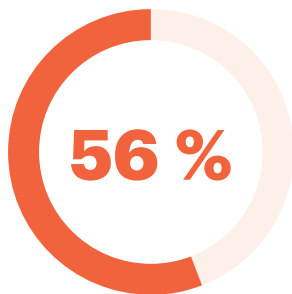


Medical and physiotherapeutic care

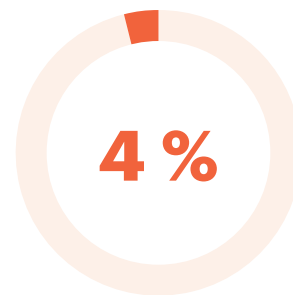
The role of medical care is becoming increasingly important among our patients. 2023 was an unusual year, as the Primo Levi Centre was faced with a shortage of doctors. However, an additional doctor was recruited at the end of the year. For her, coming to the center for care is linked to a strong ambition, “to create a welcoming space that is sufficiently caring for people to feel confident, to open up, and to make a connection despite what they have been through. One of the hallmarks of the Primo Levi Centre is its ‘haute couture’ approach to care, in other words, its ability to adapt to each situation and weave a new fabric around it. Means are put in place to be able to welcome a difficult public, with long consultation times, and spaces between consultations that allow for informal exchanges, which were very important for me when I arrived.”

Physiotherapy support has been consolidated over the past two years, with one practitioner providing weekly support. She spoke of the importance of the first meeting with the patient, as she has to reach the “untouchables”: *“I tell myself that the importance of the first session is that the person knows that he or she has been heard, that his or her pain has been taken into account. You have to show that there’s a good reason to meet. In fact, I never know if I’ve found the right hook, and that’s where the difficulty lies. I remember one of my first patients. I had the impression that the first session had gone well, but I didn’t hear from her for months. Had I gone too far, or not far enough? She finally came back, without mentioning that first session, and resumed the sessions regularly.”*

○ The statistic



56% of patients benefited from medical care



4% of patients receive follow-up care kinesitherapy.³

³ The physiotherapist works one day a week at the Primo Levi Centre and takes part in weekly clinical team meetings, representing a total of 0.3 FTE.

Interview



With **Agnès Afnaim**,
doctor at the Primo Levi Centre

What role does your patients' social situation play in the consultation?

The social aspect has always been present. But now it's taking up an enormous amount of space. A large proportion of my patients only eat once a day. This is a major cause for concern, because it implies health problems and therefore more difficult medical follow-up.

These are health problems which are often not medical in nature, and which I am obliged to medicalize. The other problem is the constant change of accommodation, often over long distances. The few bonds my patients form on the spot are not taken into account. I'm always amazed at how fundamental the Primo Levi Centre is to their lives. I have an image in my head of a raft in the middle of the sea, which enables people to survive. This feeling is very strong among the people we accompany.

"These are health problems that often aren't medical in the first place and that I'm forced to medicalize."

Has a patient made a particular impression on you this year? How did this happen?

I'm thinking of this Syrian patient, always in exactly the same posture, kind of withdrawn, with a completely inaudible voice. He refuses to be approached, even by his family, and isolates himself. He is suffering from severe back pain. Medical tests are inconclusive.

During a consultation, I put my hand on his shoulder and his body immediately nodded in agreement. The following consultation, he readily accepts the somato-psychotherapy session. ⁴ I start treating him. I see that his body is responding, like he was thirsty. His body was completely locked, now it's closed. When a door is locked, there's no way out. When a door is closed, it can be opened. He comes back the following week and tells me his back still hurts, but for the first time, he talks about the violence he suffered in his country. I won't be seeing him for a long time, then one day he comes back but I don't recognize him. I look for him in the waiting room, say his name and he stands up. His posture is different, he starts to speak with a different body language and a modulated voice. I try to find out what has happened in this man's life. His daughter has just been born. I ask him about our last session: do you remember how you felt? He says, "Yes, it opened me up." At the end of the session, I ask him what his daughter's name is, and he answers Sidra. In the Quran, Sidra is the tree at the gateway to paradise.

⁴ "Manual therapy focuses not on tissues but on the person, on the relationship between the person and his or her body. It's a form of psychology based on the body", Agnès Afnaim - September 2022.

Legal support

The Primo Levi Centre's legal support covers all stages of application for asylum (from filing to eventual re-examination), the application for or renewal of a residence permit, the family reunification procedure, and applications for citizenship. The Primo Levi Centre's legal experts therefore see some patients in the course of several procedures when their situation has changed over the course of the year.

The recruitment of a second legal expert was necessary to keep pace with the increasing judicialization of asylum and the growing complexity of procedures. *"The aim,"* says the head of the legal department, *"is to make up for the lack of human resources and to consolidate our legal support, which has grown considerably in recent years, as we face more and more procedures, and since the various legal procedures have been dematerialized, the people we support are increasingly dependent on the courts. of us."*

The Legal Department has had to face up to the difficulty for refugees of digitizing their procedures via the ANEF (Administration Nationale des Etrangers en France) online platform. In place since 2022, this platform governs the entire asylum procedure, from application to the granting or rejection of refugee status. As there is no physical access to the platform at prefectures, this exacerbates the difficulties faced by exiles who are far removed from the digital world.

Moreover, it is often necessary to wait one or two years before obtaining a residence permit (the law stipulates a period of 3 months), a delay that keeps recognized refugees in a precarious situation, despite the granting of a residence permit. Some employers refuse to take this document into account, and several of the people we support have experienced difficulties in renewing their provisional document due to the malfunctioning of the ANEF platform. The consequences are far-reaching, with the absence of a residence permit leading to the suspension of employment contracts and social rights.

Social support

Problems of food insecurity have particularly increased over the last three years: in 2023, 29% of patients followed by the social service were affected. The case of one patient illustrates this worrying new situation; *"Ten days ago"* recalls our reception manager, *"the kindergarten of the youngest sibling called us and told us that he hadn't been coming for ten days. They can't get in touch with their mother, do you have any news?"*

A mother and her two children, aged 4 and 11, who are being cared for at the Primo Levi Centre, set off for Italy, where they were taken in by the local Red Cross. This is a first for our team. The cause of this sudden departure was precariousness and hunger. For this patient, the situation had become untenable. Originally from Côte d'Ivoire, she had her asylum application rejected. of her asylum application, and had to leave the CADA (reception center for asylum seekers) where she was staying, as required by law. She then moved in with her children in a hotel room provided by the 115 in the Yvelines department, even though she was officially domiciled in another department and her children went to school in a third. This is the kind of administrative fragmentation that is commonplace for many of our patients. Destitute following the rejection of her asylum application, she survives by cleaning houses, but in the absence of a legal residence permit, she is forced to stop. Her living conditions are disastrous, and the room in which the three of them sleep is overrun with cockroaches. The family, whose father is detained in Morocco, survives thanks to food banks and service vouchers provided by the Primo Levi Centre.

Soon, the mother could no longer afford half-board for her children, as even the lowest rate our social workers were trying to obtain for her was financially out of reach. One day, during a consultation, her eldest son confessed to the psychologist who was looking after him that he didn't eat at lunchtime. He had chosen to go without meals so as not to add to the family's financial burden. He also admits to eating nothing but rice when he gets home. It should be noted that in the hotels where the families of people refused asylum are housed, it is forbidden to cook. Meal parcels are delivered to them, but they don't correspond to their eating habits. So these families sometimes use an improbable stratagem: they return to their former reception center, cook there and bring back the meals prepared in their hotel, for the week.

Unfortunately, this family's situation is not an isolated one, like the little girl who comes to the clinic on an empty stomach, or the patient who says he drinks tea in the evening to curb his hunger.

Today, more and more of our psychologists' sessions start with the question: "Have you eaten today? In the opinion of our team, never before have our patients been in such a precarious situation, with



In the case of the above-mentioned family, the eldest son had been in treatment for four years. In the case of the family mentioned above, the eldest son had been treated for 4 years, while the mother had just been treated.

Food has always been an issue at our center, with patients regularly declaring their hunger. In the past, however, these emergency situations could be alleviated by accessing food banks or community grocery stores, while waiting for support or entitlement. However, these spaces are less and less resources. The health crisis and inflation have led to an explosion in the use of food banks, which are themselves faced with rising food costs and falling donations. In the three years since 2020, the number of beneficiaries has risen by 35%. The refugees we support, whose suffering has been officially recognized, also experience acute distress. Very often, this is due to the loss of entitlements, following a move to another département for example. In other cases, the opening of rights is too slow, such as the issuing of civil status documents by the Office Français de Protection des Réfugiés et Apatrides (OFPRA), which takes an average of 14 months instead of 3. These periods of administrative limbo can last for months on end, plunging in a precarious situation. This is not a new situation, but the safety net provided by food banks has dwindled. Hunger is forcing its way into our consulting rooms and undermining our support for exiled victims of torture and political violence.

Social support covers all areas of daily life::

o Access to social rights

(medical coverage, complementary health insurance, AME, CAF...):
75% of patients

o Housing issues:

55% of patients.

o Help with daily living

(transport, food, school supplies, clothing, etc.): 46% of patients.

o 20% of our patients come from emergency services, or are homeless.

Focus

TRANSMITTING
FOR BETTER
SUPPORT

Takeaways from 2023

- **196** people took part in the **19** training courses run by the Primo Levi Centre, **most of them social workers, psychologists, doctors and nurses**, as well as lawyers, physiotherapists, osteopaths, art therapists and association volunteers.
- **40% of participants** work with asylum seekers on a daily basis.
- Training courses have focused on the *“exile clinic”, the “psychological and legal problems of unaccompanied minors”, the “trauma clinic”, “pregnant women, mothers and babies on the move”, “unaccompanied minors, a teenager like any other?”. “Childhood trauma” and “Trauma and the family”.*
- Over the past 20 years, **more than 5,000 people** have been trained at our Qualiopi-certified training center.
- Work has begun on an **online public library**, which will provide access to written, audio, and video materials produced by the center to complement the training sessions.

- On March 30 and 31 in Paris, the **Primo Levi Centre** held its **10th conference titled “Silences and Listening”**, bringing together some twenty speakers and 270 registrants.
- **Three issues of our magazine *Mémoires*** were distributed, the first on the effects of trauma on children, the second on the reception of asylum seekers, and the third on interpreting.
- The Primo Levi Centre took part in **31 external interventions** (attended by nearly 3,000 people, mostly in the Paris region)⁵.

⁵ These included invitations from the Paris Medical School, the Migration clinic at Sciences Po Law School, the French Psychiatry Federation, and the event “*Femmes et Migrations: quels enjeux de la visibilité?*” organized by the Fondation BNP Paribas, Synergies migrations, the Institut Convergences Migrations and the Fondation RAJA-Danièle Marcovici. Interest in the Primo Levi Centre’s clinical experience extends beyond national borders. A series of 5 university lectures were given by a psychologist from our team in Bogota and Medellín, Colombia. The Primo Levi Centre also spoke at a conference at the Yale Center for Traumatic Stress and Recovery in the United States and at an international conference in Ukraine titled “*Providing holistic care for survivors of sexual violence and torture*”.



Why transmit?

For Primo Levi, the necessity of story telling is two-fold. First, there is the vital need of a survivor to tell his story in order to go on living, to heal with words the wounds caused by violence. Second, the story is a force that restores rights: the right to express oneself, to be heard and thus to exist once again. We find this strength in the stories of our patients who, with the support of the clinicians at the Primo Levi Centre, are fighting to regain power over their lives. Out of concern for confidentiality and the preservation of appropriate care, the people we receive do not testify in the public sphere; it is the members of our team who bear witness to the torture and political violence they have endured. The aim is to make visible what is not visible, to convey what is difficult to say, with the utmost respect for the patients.

Why should we testify? First and foremost, to support those in direct contact with the exiles, faced with deteriorating reception conditions. Since the creation of the training center, our team has worked to distribute the tools necessary for trauma-informed care. Additionally, the training courses enable us to take a step back and catch our breath in a very difficult context for many professionals and volunteers.

According to our trainers

"What's important for me, through our training work, is to increase the chances that exiles will have access to caregivers and support staff who know how to help them and treat the consequences of torture-related trauma. We want to go against the grain of what is often said: 'we're not equipped to deal with exiles'", says the director of the care center, a trainer herself. We want to encourage interaction and exchange, so as not to leave care and support professionals in a vulnerable position when faced with a situation that may be beyond their control: "What does it mean to be faced with a person who has been the victim of injustice and knowingly damaged by another? Confronting this alone is difficult, and you need to be surrounded. Training courses help you to avoid feeling isolated by these issues," she continues. Frequently, these moments help to bond participants who know each other indirectly, but have never met. "They come across each other during our training courses," describes one of our psychologists, "and this creates a common work environment, with very concrete ideas that are followed up. I've been able to give training courses two or three times in the same organization. The work of the teams on site is evolving, and the training is helping them to adapt. What's important to us is to convey a certain 'pattern' of trauma, the mechanism of which remains the same, whether in Colombia during the violence of the 90s or during the Russian attack on Ukraine. Once this pattern is understood, the symptoms can be identified and treated."

Clinical practice feeds into training

On what basis can we train without running the risk of developing a fixed, top-down approach? *"I couldn't be a trainer without continuing my clinical practice,"* explains one of our psychologists. *"Clinical practice feeds into training, which is not fixed and in which I'm always learning. I never feel that I know things once and for all. I enrich my training courses through patient care and reading. I arrive with a very solid base, but I systematically adapt it to the comments and questions that arise during each session. The aim of training is not to be based solely on pre-established, universal knowledge, but for participants to become subjectively involved, to ask themselves how they can use the tools or concepts they've been given in their day-to-day practice. The people we train treat or accompany traumatized people. What stands out in our trainings is its integral clinical basis. Our desire to transmit is born out of the care center. I talk about clinical cases to explain what trauma is."* Inspiration of the Primo Levi Centre's multi-disciplinary approach, for example, will enable us to tackle the subject of reception, an area that is insufficiently taken into account. *"When people hear the word reception, they think secretary,"* says the Primo Levi director of reception. *"When I train people,"* she says, *"they see the importance of the reception in clinical care and they begin to see themselves providing the same kind of care. It's important to have a psychologist train with me, because it provides both the audience and me a global approach to care; I realize how important this position is."* Training also acts as a mirror for those who give it, and has a strong impact on one's own practice: *"I saw a clear difference when I started training, and preparing the training courses. You start to breathe, to really think about your clinic"* comments one of our trainers, a "breath of fresh air" shared by one of her colleagues: *"the dialogue with the participants makes me ask myself questions about my own clinic. That's the whole point of training courses: they force us to develop and re-develop, and that's what makes them lively."*

Internationally Transmitting the Duty of Solidarity

Democratic Republic of Congo, Chechnya, Lebanon and recently Ukraine: our experience is being passed on beyond our borders. *"The questions remain the same,"* says a psychologist on our team who has taken part in several of these international training courses, *"our experience helps 'orient' the positions of professionals, and that's what we pass on. How to find a place, a professional posture in patient care. What's special about our clinic is that it's not caught up in discursive political contexts. Symptoms are, by definition, detached from reality. When a person has a nightmare in Paris, Bogotá, Istanbul or Kiev, the mechanism is the same. This is why we can share and transmit a certain type of knowledge, without derogating from the singularity of the case"*. Two years ago, the Primo Levi Centre set up a partnership with the Lviv hospital in Ukraine. *"By working with the hospital in Lviv,"* says one of our psychologists, *"the Primo Levi Centre is renewing its international action, and it's important to show our solidarity above all else; these people are living a very intense reality. As a result, our Ukrainian colleagues have a real need to pass on their knowledge. I went there with my coworkers from the Primo Levi Centre, and we came back having learned a lot from our Ukrainian colleagues, who, despite their singularities, form a real group. There's a real collective intelligence."*

Thinking the unthinkable

Primo Levi Centre Conferences

"Errances et solitude", "Transmettre et témoigner", "Clinic: ethics and politics", "Language and violence", "Pudeur et violence" (Modesty and violence), "Entre rêves et cauchemars" (Between dreams and nightmares), "Silences et écoute" (Silences and listening): the various titles of our conferences illustrate their purpose: to encourage dialogue, discussion, and thought through a transversal and demanding clinic of exile. Organized every two years, the Primo Levi Centre's conferences have been designed as a forum for exchange, providing an opportunity to cross points of view, deepen reflection and analysis, and offer a breathing space outside of day-to-day work. Members from our team and outside contributors are invited to share their knowledge and experience. *"The whole team participates,"* says one of the psychologists organizing the 2023 conference, *"and there's an intense preparation time that creates a different dynamic between us. It's a time for dialogue, not just within the team, but also with the outside world, with the arts, literature, entertainment and so on. I think it gives a voice to patients who don't have one in*

the public arena. We often work with real clinical situations, echoing what we hear in our consultations. It's a fundamental experience. It also helps us get away from the loneliness that our profession can sometimes provoke."

A duty to remember

"Do not forget it was real," Primo Levi's opening poem in his book *"Si c'est un homme"* (If This is a Man). The poem appeared on the first issue of our journal *Mémoires* in 1997, emphasizing the importance of stories to keep the memory of horrible events alive so that they don't happen again. Through its journal, the center wanted to follow in the footsteps of a great witness to the effects of torture and political violence. *"Violence repeats itself, whether in Rwanda, Bosnia or Ukraine. So the idea is to be able to continue to testify to its effects. As the name of our magazine suggests, we have a duty to remember, because violence erases violence,"* says its editor-in-chief. This duty to remember means testifying to the effects of political violence. It means sharing our team's experience and, more broadly, providing a forum for reflection on the issues surrounding torture and political violence with the ultimate aim of improving understanding of the effects of the trauma associated with this type of violence. *"Trauma... to madness", "When violence isolates", "Mothers' sickness - motherhood in exile", "Restoring intimacy - sexual violence", "Refugee childhood - growing up despite the ordeal", "From one language to another - interpreting at the heart of care",* the various titles of our journal show, as do our conferences, the complexity and scope of our clinic. *"We talk about the effects of psychotrauma,"* continues the editor-in-chief, *"but these are very wide-ranging, affecting many aspects of an exiled person's life - social, intimate and emotional."* The great violences suffered can engulf both the survivors and witnesses to their story. Thus it is important to find the right distance. *"We've always been careful to not to give raw content to our readers"*. she concludes.

This is particularly true for the Centre's healthcare professionals. *"For our team,"* says the director of the care center, *"participating in Mémoires enables them to take a step back and work more effectively, to feel that their practice is being reflected on, that they're not navigating by sight. It creates a sense of belonging to a thought process and analyse."* The magazine format was not chosen at random - it allows ideas to flow. *"Very often,"* says the editor-in-chief, *"the angle proposed for an article will shift and sharpen as we write. My colleagues readjust it in relation to their clinic and to what might help others to understand it"*.

Advocating

Takeaways from 2023

- The Centre's advocacy work focused on the French bill "*Immigration and Integration*." Our aim was to raise members of parliament's awareness on the situation of exiled women and the potential impact of the bill on them as well as other refugees.
- An analysis of the bill was scheduled for early 2023. This mobilization led to the Centre's participation in several parliamentary hearings to highlight the situation of exiled women.
- In January 2023, the center joined a collective of over 60 associations, whose actions led to public interpellation through several press releases.
- On November 25 2023⁶, the center took part in the conference "*Femmes et migrations: quels enjeux de visibilité?*", organized by the BNP Paribas Foundation, Synergies migrations, the Convergences Migrations Institute and the RA-JA-Danièle Marcovici Foundation, with a strong institutional impact.

⁶ International Day for the Elimination of Violence against Women.

Our Centre in the media

 <p><i>"Immigration law: 'Let's have the courage to oppose to the res- triction of freedoms'"</i>.</p>	 <p><i>"Against the law of shame, let's stay mobilized"</i>.</p>	 <p><i>"Mental health, the other frontline of the war in Ukraine"</i>.</p>	 <p><i>"Ukrainian psychiatrist Oleh Berezyuk: 'We didn't know anything of war trauma'"</i>.</p>
 <p><i>"Caring for the minds of Ukrainian victims"</i>.</p>	 <p><i>"Paris 2024: some sixty associations warn of the risk of 'social clean- sing' of the streets of Paris between now and the Olympics"</i>.</p>	 <p><i>"How can you start therapy without speaking the same language? The difficult psychological care of exiles"</i>.</p>	 <p><i>"Ici, je me sens bien: in Bobigny, France, exiled minors find refuge in a house reserved for women"</i>.</p>
 <p><i>"The Immigration Act, a new danger for our patients?"</i></p>	 <p><i>Testimony of Valentin Hecker, clinical psychologist.</i></p>	 <p><i>Testimonial from Jacky Roptin, clinical psychologist.</i></p>	 <p><i>"Attack in Annecy: psychiatric follow-up of refugees in question"</i>.</p>
 <p><i>"Mental health of migrants, the great taboo"</i>.</p>	 <p><i>A report to "defend the hope of exiles"</i>.</p>	 <p><i>"Teaching migrants to swim to overcome the trauma of their crossing"</i>.</p>	 <p><i>"35 organizations call for better protection for unaccompanied minors, one year after the Taquet law"</i>.</p>



The Means of Action

The Means of Action

The year 2023 was marked by an overall drop in the volume of activity at the Primo Levi Centre compared with the previous year. Nevertheless, the Primo Levi Centre broke even in 2023 (+31 euros) thanks to the mobilization of exceptional public and private resources and the loyalty of its donors.

Largest expenses

Expenditure for 2023 amounts to € 2,039,108, down 7% overall compared with 2022. Personnel costs are the largest item of expenditure (57%). All the professionals on the care center's team are salaried, most of them part-time, to ensure continuity of care and long-term support for patients on the long road to well-being. These are the same people who take part in training and advocacy actions. Support functions coordinate all activities at the Primo Levi Centre.

At € 1,166,000 in 2023, down € 24,000 from 2022, payroll has remained relatively stable despite a drop in overall activity at the Primo Levi Centre in 2023. This is due to:

- High staff turnover and difficulty in finding care staff, resulting in high recruitment and exit costs.
- The additional cost generated by the "Prime Ségur" (a financial bonus provided by the French government as a part of the Ségur de la santé Initiative, aimed at improving the health-care system), not covered by donors.
- The recruitment of a new lawyer and a resource (via the On Purpose tool) to find a new premise for the Primo Levi Centre.

Other expenses

Other expenses include rent, interpreting and external fees. These expenses for 2023 amount to € 673,000 compared to € 572,000 in 2022, representing an increase of 18%.

This increase is due to:

- Net increase in fees due to costs incurred in the search for a new premise for the Primo Levi Centre and recruitment assistance (architectural firms, design office for the AMO, recruitment firms).
- An increase in the rent in summer 2023 (7%) for the premises currently housing all the Primo Levi Centre's activities.
- Expenditure on professional interpreting (6%), which is essential to guarantee quality care for non-French speakers. These have been reduced as a result of the drop in clinical activity and more precise management of the scheduling of interpreting shifts.
- The use of a Dailly-type banking solution to alleviate the association's cash-flow difficulties, linked in particular to the management of European funds.

Les aides aux patients :

En raison d'une précarité croissante de nos publics, cette dépense indispensable a augmenté. En 2023, les aides aux patients s'élèvent à près de € 48,000, soit une hausse de 14% (Pass Navigo, chèques services).

Sources of financing

Financial resources amount to € 2,039,139 in 2023, down 12% on 2022.

The Primo Levi Centre has suffered from the complexity of the management rules applicable to European funds - in this case the Asylum Migration Integration Fund (FAMI) - with the nonreimbursement of interpreting expenses, which represent a pillar of its care project. As the volume of FAMI funding is also linked to the number of asylum seekers, European funding has been reduced as a result of the decline in this target group within the care center's active file over the last two years. Finally, the association suffered from the lack of funding from the "Prime Ségur" and the decline in its private funding (from revenues and foundations).

Public funding:

Public subsidies amounted to € 1,032,535, including € 50,000 recovery of dedicated funds, representing 50.6% of the Primo Levi Centre's resources, a decrease of € 164,000. (-14%), mainly due to a reduction in European funding. Nevertheless, the European Union remains one of the Primo Levi Centre's main donors through the FAMI. Among national public backers, the main ones are the Ministry of the Interior, the Agence Régionale de Santé Ile-de-France (ARS IDF), the City and Department of Paris, and the Direction régionale et interdépartementale de l'hébergement et du logement (DRIHL). The association is also supported by the French Ministry of Labour, Health and Solidarity, the Délégation interministérielle à l'hébergement et à l'accès au logement (DIHAL) and the Direction régionale interdépartementale de l'économie, de l'emploi, du travail et des solidarités (DRIEETS). An exceptional subsidy from the ARS IDF was granted to the Primo Levi Centre at the end of 2023 to help the association cope with inflation, cover the "Prime Ségur" (not otherwise covered) and break even.

Financial contributions:

Subsidies from foundations and endowments fell by 13% to € 669,451, including € 429,000 in new 2023 funding and € 240,000 in the recovery of dedicated funds. They represent 32.8% of resources. This can be explained by the fact that 2022 was an exceptional year in terms of private funding, with the Charles Defforey Foundation's Grand Prix and funding for Ukraine taken over as dedicated funds in 2023. In addition, some partnerships came to an end and others were scaled back. The Primo Levi Centre has nevertheless received substantial support from the Fonds Transmission et Fraternité to help it break even in 2023.

Resources from donations and subscriptions:

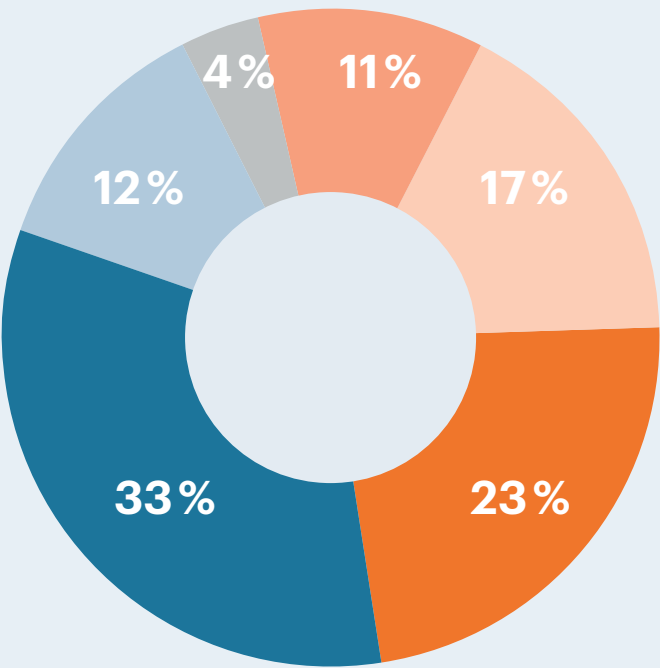
These amounted to € 249,858 (12% of resources), an increase of 8%. The Primo Levi Centre has been able to count on the generosity and trust of its supporters and sympathizers despite the tense socio-economic context, as well as corporate donations. The association has also benefited from the loyal support of Amnesty International and ACAT-France.

Revenue from training services and sales of publications:

Revenues amounted to € 71,957 (3.5% of resources), down 18%. This is linked to the drop in the number of training courses, which can be explained both by the staff movements experienced by the center in 2023, and by changes in habits since COVID 19, with a marked preference for distance learning courses in a context of intervention covering the whole of France.

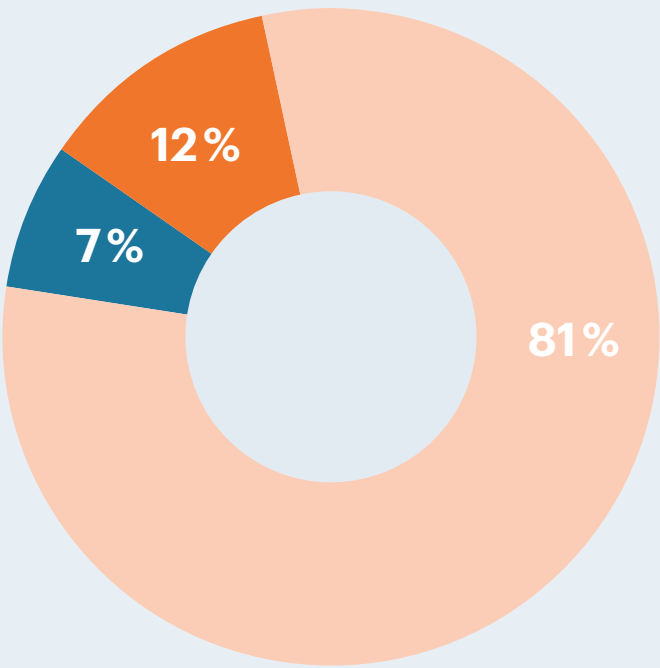
Other operating income (write-back of depreciation, financial aid for people in difficulty, CPAM remuneration, etc.) represented €15,339, or 0.8% of resources.

Many thanks to all our public, private and associative institutional partners, as well as to our donors, for their commitment to our cause! Thanks to their support, we can continue and perpetuate our actions on behalf of exiled survivors of torture and political violence.



Origin of resources

- European public funds 11 %
- National public funds 17 %
- Local authorities 23 %
- Private funds 33 %
- Individual donations and subscriptions 12 %
- Services (training), sales and other 4 %



Breakdown of donations by type of expenditure

- Social missions 81 %
- Fundraising 12 %
- Operating 7 %

The Primo Levi Centre would like to extend its warmest thanks to all its financial partners, whose support has enabled it to carry out its care and support for exiled survivors of torture and political violence.



Interview

"I pay great attention to the respect of fundamental rights."



Sabrina Goldman is a member of the board of the Primo Levi Centre, and talks about the reasons for her commitment, at the crossroads of her associative and professional career.

Why the Primo Levi Centre?

My involvement with the center, which dates back to 2019, is a manifestation of several militant commitments that I have or have had, notably as vice-president of the LICRA for several years. I am both very sensitive to the center's history and its name, a reference to the testimony of a Shoah survivor, and to its work with exiled people who are subject to racism and xenophobia. As a lawyer, I also had the honor of defend Cédric Herrou, who is a symbol of the fight for the rights of exiled people. The case obviously alerted me to the need to care for, support and defend people exiled in France who have suffered torture or political violence in their country of origin.

How do you make the link between your profession as a lawyer and your commitment to the center?

For me, the process of caring for exiles also requires recognition of the legality of their presence in France. As long as there is legal insecurity, I think that this is effectively an obstacle to care. So we need to grant them administrative status. Legal support is part of the center's activities, even if it's not the core of its support. More generally, as a lawyer, you're bound to have a strong interest in defending rights, so I pay close attention regarding fundamental rights. An activist is often by nature a lawyer at heart.

How do you view the center's work?

It is an association with a very specific field of expertise, namely the care and support of exiled people who are survivors of torture or political violence; as a result, it is recognized with this "trademark". Its words are rare, fair and measured, and must remain "above the fray" of certain political polemics.

What did you learn from 2023?

The vote on the immigration law was a difficult moment, but fortunately the Constitutional Council prevented certain fundamental rights from being called into question. However, it remains a dangerous reform for the rights of asylum seekers. The center has mobilized around this issue. This must continue in 2024 so that the issue of health care for exiles is a real concern for public authorities. The specific psychological, social and economic situation of these people must be taken into account. The center's 30th anniversary will also be an important moment of visibility to raise awareness of the need to welcome and care for exiles, and to highlight our mission of transmission.

Organization

Board of Directors *(as of June 1st 2024)*



Antoine Ricard

Chairman / Lawyer



Natalie Nougayrède

Vice-President / Journalist



Andreas Hartmann

Secretary / Neurologist



Anne Burstin

Civil Servant in the
Health Field



Nicole Dagnino

Humanitarian Projects
Consultant / Médecins du
Monde Representative



Hélène Desforges

Physiotherapist /
Trêve Representative



Philippe Muller

Cardiologist / Representative
of ACAT-France



Julien Roirant

Communication
Consultant



Jacky Roptin

Clinical Psychologist /
Trêve Representative



David Randrianarivelo

Treasurer /
Chief Financial Officer



Sabrina Goldman

Member of the Board /
Lawyer



Michel Brugière

Doctor



Céline Figuière

Communications
Consultant



Bernard Hofmann

Habitat Consultant, former
teacher / Representative of
ACAT-France



Antoine Lazarus

Doctor



**Marie-Caroline
Saglio-Yatzimirsky**

Professor - Researcher



Anne Urtubia

Biologist / Médecins du
Monde Representative



**Marine Van
Schoonbeek**

General Manager and
Co-founder of the Thanks for
Nothing Association

Organization

Permanent Team *(as of June 1st 2024)*



Tatiana Theys
General Manager



Sibel Agrali
Care Center Manager



Emilie Abed
Clinical Psychologist



Agnès Afnaïm
General Practitioner



Marie Danies
Editor-in-Chief of
Mémoires Magazine



Hélène Desforges
Physiotherapist



Cintyha Dina
Financing
Manager



Nathalie Dollez
Clinical
Psychologist



Pauline Langlade
Social Worker



Adèle Legros
Reception and
Mission Manager



Aurélia Malhou
Jurist



**Pâmela Messais
Arentes**
Jurist

The
volunteers



**Isabelle
Bardet**



**Morgane
Joffredo**



Lucia Bley
Clinical
Psychologist



Déborah Caetano
Reception Department
Manager



**Marion
Chausserie-Laprée**
Social Worker



Armando Cote
Clinical
Psychologist



**Maxime
Guimberteau**
Head of Communications
and Advocacy



Valentin Hecker
Clinical
Psychologist



Juliette Krassilchik
Reception and
Training Officer



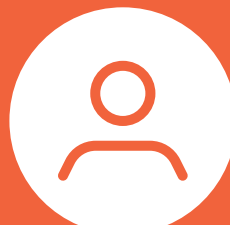
Nadia Kandelman
General Practitioner



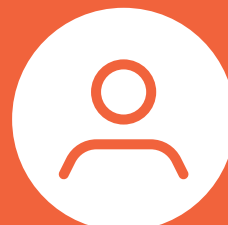
Géraldine Rippert
Financing
Manager



Jacky Roptin
Clinical
Psychologist



Armandine Sene
Administrative and Financial
Manager



Pauline Wetzel
Training
Manager



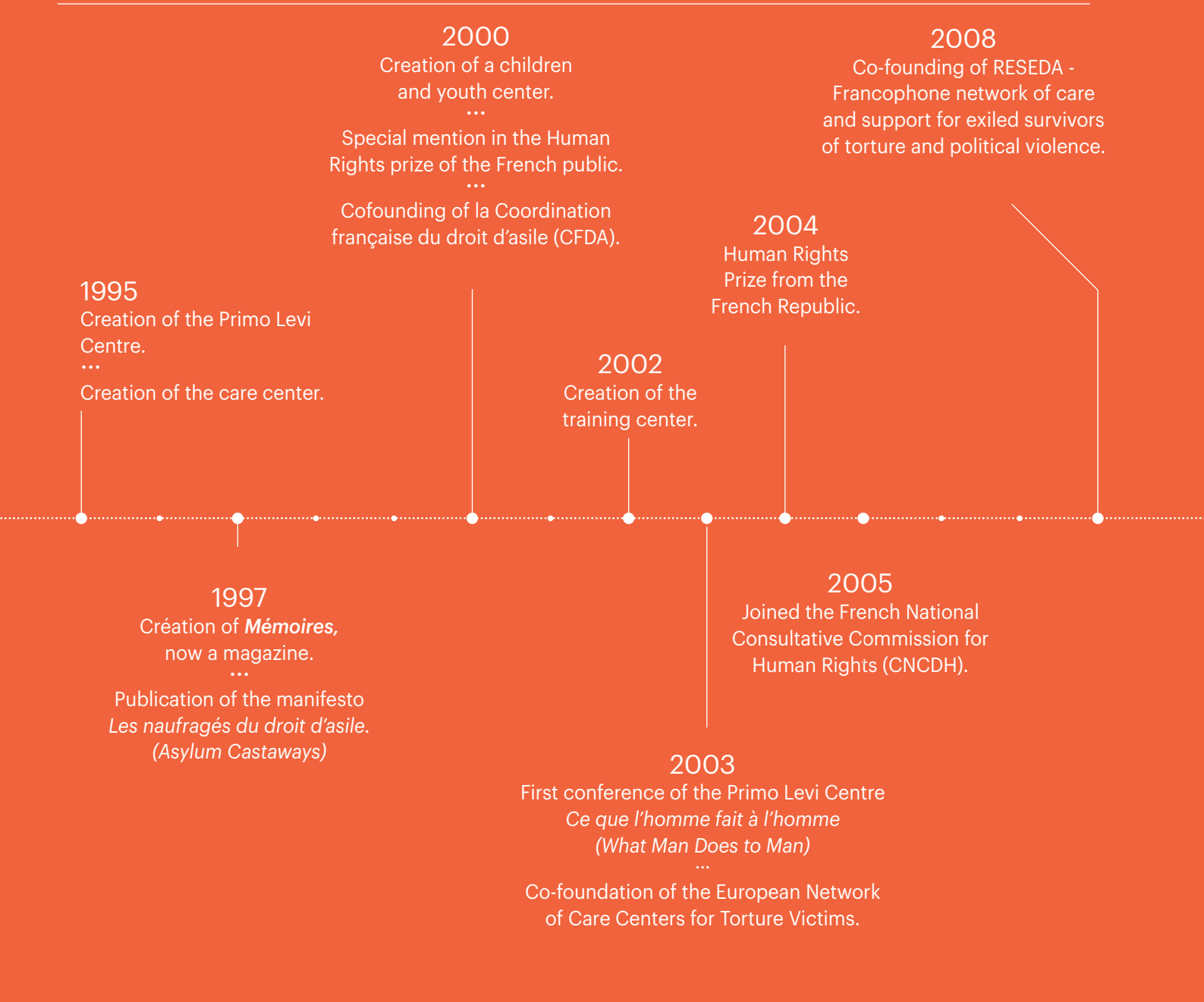
**Régine
de La Tour**



**Claire
Mérien**



**Lilliane
Passavant**



Networked action

The Primo Levi Centre is part of several networks:

- **Réséda** (Réseau de centres de soins francophones), of which the center is one of the main founders and facilitators
- **The European Network of Rehabilitation Centres for Survivors of Torture**, the European network of care centers, which helped found the Primo Levi Centre
- **CFDA** (French Coordination for the Right of Asylum)
- **ODSE** (Observatory on foreigners' right to health)
- **InfoMIE** (Information on Isolated Foreign Minors)
- **Uriopss Ile-de-France** (Union Régionale Interfédérale Organismes Privés non Lucratifs Sanitaires, Sociaux et Médico-sociaux en Ile-de France)
- **Coordination SUD** (since 2022)



2012

Publication of a white paper entitled *Soigner les victimes de torture exilées en France* (Caring for Exiled Torture Victims in France), the first inventory of the care provided in France for exiled torture survivors.

2018

Publication of the report *La souffrance psychique des exilé.e.s: une urgence de santé publique* (The Psychological Suffering of Exiles: a Public Health Emergency)

2022

Release of the report *Femmes exilées, une violence continue.* (Exiled Women, a continuing violence)

2015

Publication of the report *Vingt ans d'accueil et de soins des exilés victimes de la torture.* (Twenty Years of Reception and Care of Exiles Victim of Torture)

2014

Publication of *Clinique du trauma*, (Trauma Clinic) the first book in the Centre Primo Levi series published by Éditions Erès.

2019

100th anniversary of Primo Levi's birth

2016

Publication of the report *Déboutés au pays, persécutés en France.* (Rejected in their Country, Persecuted in France)

2021

Grand Prix Humanitaire de la Fondation Charles Defforey-Institut de France

The Support Committee

The Primo Levi Centre's support Committee, set up in 2007, brings together some twenty personalities from the worlds of the arts, academia, humanitarian action and politics. Its members have agreed to join the committee in order to publicize the Primo Levi Centre's work in their respective professional spheres and, more broadly, to contribute to raising public awareness. Members: Patrick Aeberhard - Jacques Attali - Miguel Benasayag - Constantin Costa-Gavras - Laurent Gaudé - Robert Guédiguian - François Julien-Lafferrière - Olivier Le Cour Grandmaison - Anicet Le Pors - Ariane Mnouch- kine - Edgar Morin - Rithy Panh - Serge Portelli - Reza - Léonie Simaga - Catherine Teitgen-Colly - Annette Wieviorka



Why the Name Primo Levi?

The name of the Italian writer and Auschwitz survivor, author of *Si c'est un homme*, was chosen in tribute to the strength of his testimony, the rigor of his thinking and his rejection of inhuman, cruel and degrading treatment.



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**CENTRE
PRIMO LEVI**
VIVRE APRÈS
LA TORTURE