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Hotspots and the geographies of humanitarianism

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Abstract
This article focuses on the humanitarian geographies of the hotspots. It argues that hotspots are humanitarian in both idea and practice by raising two fundamental questions that form the basis for the article: what is humanitarianism, and who is it for? The article understands humanitarianism as a logic of government that is more expansive than the mainstream ideal that emerged in the 20th-century. Instead humanitarianism is understood as concerning logics developed to both effectively manage disaster and to secure (in both senses of the word) imminently mobile populations for the maintenance of liberal order alongside and through the securing of life. The article takes an expansive view of humanitarian government to consider genealogies of caring and population security logics in the establishment of modern, western and liberal states. The article unsettles some of the traditional geographical understandings of humanitarianism as care for distant strangers and considers the ways compassion is rationalised by the hotspot approach. This critical reading of humanitarianism and the hotspots offers empirical weight to what has been called ‘humanitarianism as liberal diagnostic’, through which humanitarianism is deployed to secure both life and a liberal political order across multiple scales.

Keywords
Hotspots, humanitarianism, mobility, care, control, disaster

On 25 November 2016, in Moria ‘hotspot’ camp on Lesbos, a woman and child were killed in a fire after a gas canister attached to a hot plate exploded inside their small nylon tent. They were using the hot plate to try and keep warm. As a result of the accident, two people died and many more were injured. Later that month, three young men died in Moria camp and a fourth was taken to hospital in a critical condition. Survivors and friends reported that the deceased had no pre-existing medical conditions. To keep warm, the men had been burning cardboard, plastic and scraps of wood in the tents they shared. (MSF, 2017: 12)
Introduction

The Greek islands and the hotspots found there have gone from being places of transit and registration to places of effective containment and the management and consolidation of crisis (see Jeandesboz and Pallister-Wilkins, 2016). The hotspots are poorly defined by the European Union itself, yet are presented as the Union’s technical answer to how to ‘manage the undesirables’ (Agier, 2011) found within its ever-hardening external borders. The EU is unclear about what a hotspot actually is and does in policy documents and public pronouncements, preferring to refer to a ‘hotspot approach’ that is intended to ‘provide a platform for the agencies to intervene, rapidly and in an integrated manner, in frontline Member States when there is a crisis due to specific and disproportionate migratory pressure at their external borders’ (Statewatch, 2015). In practice, the hotspots are spaces made of a combination of functions designed with the purpose of controlling or interrupting people’s mobility, collecting their personal and biometric data (see Pallister-Wilkins, 2016) for the management of ‘crisis’ and in the hope of rendering them knowable and pliable to the sovereignty of European member states and EU border and asylum practices. As such hotspots have become semi-carceral spaces. Hotspots are not prisons or closed detention centres,1 however, as other reception and accommodation facilities across the Aegean islands are severely limited and people’s onward movement denied, the hotspots have, through design (as humanitarian agencies are considered part of the ‘integrated’ hotspot approach) and through necessity (due to their very limited provision of the necessary conditions for life) become spaces of humanitarianism. Meanwhile their function as registration and explicit border control points suggest they are both similar to and depart from traditional refugee camps that reflect the ‘interests of both states and humanitarian agencies for whom the concentration and segregation of refugees are politically and logistically expedient’ (Newhouse, 2015: 2294).

As a part of the EU’s integrated border management system hotspots are ‘machines of many moving parts’ (Khalili, 2012: 239), intended as one-stop interoperable shops for the EU’s border management. Following the EU-Turkey Statement, the European Commission recognised that ‘the hotspots on the islands in Greece will need to be adapted – with the current focus on registration and screening before swift transfer to the mainland replaced by the objective of implementing returns to Turkey’ (European Commission, 2016a, 2016b, 2016c). But as the implementation of returns to Turkey has come up against the rule of law preventing some returns and prolonging asylum requests hotspots have been transformed into de-facto quarantine spaces in the enforcement archipelago of island prisons used in the management of migration (Jones et al., 2017; Mountz, 2011). This containment has further iterated the hotspots as, in the words of a report for the EU Parliament’s LIBE Committee, spaces ‘to allow the Union to grant protection and humanitarian assistance in a swift manner to those in need’ (Neville et al., 2016).

Yet according to humanitarian organisations like Médecins Sans Frontières (MSF) and human rights organisations such as Human Right’s Watch (HRW), the protection capabilities of the hotspots are questionable. In a 2017 report published by MSF-Greece on the anniversary of the EU-Turkey Statement, MSF claim ‘men, women and children seeking protection in Europe have spent up to a year in poorly adapted and unwinterised temporary shelters, with inadequate access to basic services including heating and hot water’ (MSF, 2017: 11).2 This includes 600 people on the island of Samos, as of mid-February 2017, living in unheated accommodation with limited access to clean water and decent sanitation facilities. Meanwhile life seekers3 have told of widespread drug and alcohol abuse in Moria, as well as sexual harassment, violence and daily fights. On Samos and Lesvos, MSF teams have
witnessed firsthand people’s mental and physical health deteriorates over time. There has been a ‘2.5 fold increase in the percentage of patients with symptoms of anxiety and depression, and a threefold increase in the percentage of patients with post traumatic stress disorder’ and symptoms of psychosis have also increased (MSF, 2017: 13). Meanwhile women in Moria are reported to be wearing adult nappies overnight rather than use the unsafe and unsanitary toilet facilities.

This catalogue of suffering seems to stand in stark contrast to the growth of the ‘humanitarian border’ (Walters, 2011) where practices of border control and border policing elide with or use humanitarian concerns for life in the policing of mobility (Pallister-Wilkins, 2015a, 2017a, 2017b, 2017c). Academic work focusing on the growth of the humanitarian border has shown how humanitarian concerns for saving lives and providing basic relief for life seekers as they encounter violent borders (Jones, 2016) works to expand borders and borderwork (Jones et al., 2017). However, hotspots seem to show how borderwork appears to shrink humanitarian imagination (Lester and Dussart, 2014). Therefore, how in the face of the conditions produced by the hotspots can the hotspots be considered within geographies of humanitarianism? This would seem counterintuitive at best and insulting at worse. In this article, I argue that hotspots are humanitarian in both idea and practice by raising two further fundamental questions: what is humanitarianism, and who is it for? I argue that humanitarianism is more expansive than the mainstream ideal that emerged in the 20th-century (see Barnett, 2011) and instead concerns developments designed to both effectively manage disaster and to secure imminently mobile populations – as potential subjects of harm and potentially harmful – for the maintenance of modern liberal sovereignty alongside and through the securing of life (see Vernon, 2014).

In doing this, my argument builds on work in critical humanitarianism studies that has mapped the intersection of care and control in governing vulnerable populations (Agier, 2011; Feldman and Ticktin, 2012; Hyndman, 2000); charted a humanitarian reason in the government of populations (Fassin, 2012); and highlighted the ways humanitarian concerns for life structure not only sovereignty’s ability to make live but also to make die (Weizman, 2012). As such it takes an expansive view of humanitarianism and humanitarian government, moving beyond more mainstream and conventional emergency humanitarianism concerned with providing relief in times of particular suffering (Barnett, 2011) and instead concerns developments designed to both effectively manage disaster and to secure imminently mobile populations – as potential subjects of harm and potentially harmful – for the maintenance of modern liberal sovereignty.

Liberal sovereignty here is understood as forming the foundation of the modern, European state as it emerged in the 18th-century and as a particular political, social and economic ordering system structuring ‘the basis of a wealthy civilisation founded on capitalism in which general concern for human wellbeing can flourish’ (Asad, 2015: 392). This results in sovereignty being more than the control of territory but includes the ability to provide effective protection to the population in its entirety. Building on this role of protection in the modern state I unsettle some of the traditional geographical understandings of humanitarianism as care for distant strangers. In this, I am aided by recent work on colonial humanitarianism highlights how care for distant strangers deployed expansive moral geographies that were concomitantly about saving distant, colonised others and maintaining a liberal order ‘at home’ (Lester and Dussart, 2014).

This critical reading of humanitarianism and the hotspots offers empirical weight to what Simon Reid-Henry has called ‘humanitarianism as liberal diagnostic’ that identifies and characterises problems in particular, humanitarian, ways and frames particular, humanitarian, solutions (2014: 425). Humanitarianism as liberal diagnostic orders morality and mitigates against insecurity in the present and works for the reproduction and maintenance
of modern liberal sovereignty in the future. Understanding humanitarianism as liberal diagnostic enables a reading of hotspots as humanitarian. This is done through the way hotspots exercise power over life through enhancing the security of life seekers while securing and enhancing the political order of European states by (arguably) ‘offering more efficient ways to respond’ (Reid-Henry, 2014: 425) to the ‘migration crisis’. As a response to the migration crisis, the hotspot approach works to re-inscribe processes of violence that make humanitarian protection necessary in the first instance and suggest how care and control are performed as part of wider European government.

This article is based on a long-running engagement with humanitarian practices in border control and in border spaces. The argument I present here is predominantly theoretical in nature but grows out of a substantive ethnographic engagement with humanitarian efforts by both border police and humanitarian actors at Europe’s borders and predominantly in Greece. I have conducted fieldwork on the Aegean islands and in the hotspots on a number of occasions between 2015 and the present as well as engaging repeatedly with humanitarian practitioners in their offices and headquarters across Europe. It is intended to broaden discussions of humanitarian government in the present while being fully cognisant of the complex humanitarian politics of the hotspots themselves (see MSF, 2016).

My argument proceeds as follows. First, I trace the emergence of humanitarianism’s seemingly contradictory demands of care and control through its relationship to the growth of modern government and the emergence of circulation and population as the field of security. Here, I further focus on the concomitant existence of the effective management of disaster and the rationalisation of compassion. Second, I examine the traditional geographies of humanitarianism concerned with saving distant strangers and the spatial and socio-political strategies of containment used for keeping strangers distant even in cases of close proximity. Third, I examine the specific management of populations in the hotspots asking questions about the unsettling of traditional humanitarian geographies of distance and separation while consolidating long-running geographies of population management. Finally, I suggest that the hotspots practice humanitarianism as liberal diagnostic, performing care for not-so-distant strangers while also working to maintain liberal sovereignty in Europe itself. Highlighting in the process the ever-present paradoxes within humanitarianism, the ever-changing technologies of humanitarianism and the ways that ‘humanitarianism is not the same humanitarianism all the time’ (Feldman, 2012: 160), or to build on Feldman, the same humanitarianism across different spaces.

**Care and control in humanitarianism**

There is considerable work in a variety of disciplines examining the growth of the management of migrant mobilities focused on processes of detention and incarceration (Bosworth, 2014; Martin, 2012; Mountz, 2011). Alongside this there has been an emerging body of literature that has tracked the logics of care and control in the policing of mobility (Albahari, 2015; Fassin, 2012; Pallister-Wilkins, 2015a; Sheller, 2012; Ticktin, 2005; Williams, 2015). Much of this work builds on Foucauldian approaches to security, that understand the emergence of security as a field of modern government and a particular political rationality of liberal government with a genealogy we can uncover (Foucault, 2009). Meanwhile wider work in critical humanitarianism studies is keen to highlight what appears to be a paradox, or contradiction between care and control in the practicing of humanitarianism. Craig Calhoun has characterised this paradox as one between the normative and the instrumental rationalities of humanitarianism. Normative, or value-rationality is concerned with the provision of care and dominates mainstream
understandings of humanitarian practice. Alongside this however Calhoun argues that humanitarianism has become increasingly instrumentalised as a way of managing global relations (2008). Calhoun’s focus on humanitarianism’s instrumentalisation in managing global relations does not go as far as Eyal Weizman’s argument concerning what he calls the ‘humanitarian present’ where humanitarian sentiment is a way of managing not only the contradictions of late-modern capitalism that produces and maintains a world of have and have-nots, but also structures and determines the limits of violence itself as opposed to acting as a sticking-plaster for violence (2012).

Arguments about the current instrumentalisation of humanitarianism or the way violence is structured by and through humanitarianism remain somewhat limited spatially and temporally. For example, scholars of humanitarian sentiment in colonial practice, especially within the governing and expansion of the British Empire, argue cogently about the ways humanitarian sentiments of care worked to condition processes of control and structure practices of colonial violence (Laidlaw, 2012; Lester and Dussart, 2014). Building on scholars such as Fassin and Calhoun and, similar to those scholars who have traced the logics of humanitarianism in colonial practice, Reid-Henry has argued that what appears to be a paradox, or a contradiction between care and control in humanitarianism is in fact neither paradox nor contradiction (2014: 420). Reid-Henry argues that Foucault is useful for understanding humanitarianism’s ambivalence, as care and control are co-constitutive of the modern state that has sought to provide security and to govern in ever more efficient and productive ways (2014: 420).

Most Foucauldian-inspired work on humanitarianism’s governmental rationality in policing mobility (Pallister-Wilkins, 2015a; Ticktin, 2005) has focused on Foucault’s general work on biopolitics (2004) and security (2009). In focusing on humanitarianism’s imbrication within modern government, Reid-Henry suggests Foucault’s *Omnes et Singulatim* lecture from 1979 is more useful as it focuses on the way ‘the arts of government constitute not so much a form of “reason in general” as Foucault says “but always a very specific type of rationality’” (2014: 421 quoting Foucault, 1979: 313). These specific rationalities according to Reid-Henry, and ones I believe are central to understanding the hotspots as humanitarian revolve around the sovereign will to care, or what Maurizio Albahari (2015) has recently called ‘sovereignty as responsibility’. In the context of my argument, these specific rationalities are: the effective management of disaster and the rationalisation of compassion. It is to a discussion of these specific rationalities I now turn.

**The effective management of disaster**

In the pre-modern era, disasters were contained. The state’s primary responsibility was to keep insecurity outside the walls. There is a comforting simplicity to this approach in analysing current European or EUropean border practices (Bialasiewicz, 2012) focused as it is on deterrence, expulsion and externalisation. The popular refrain ‘Fortress Europe’ evokes Europe’s attempts to contain disaster beyond its external borders. However, as recent Foucauldian influenced work on walling as a security practice has argued, seeing borders as blockades and walls as containers alone, fails to understand how they work as spaces and architectures of effective management (see Pallister-Wilkins, 2015b, 2016). This is not to argue that humanitarian concerns for life do not make use of specific technologies of containment in particular instances. Quarantine for example is a technique for the effective management of certain diseases. But even in quarantine, the focus is on effective and efficient management designed to reduce damages, control the distribution of risks and
enable safe circulation to continue unhindered as opposed to simple containment and the
swift restitution of law and order (Reid-Henry, 2014: 422).

This shift from containment and the restitution of law and order to a concern with
managing the risks of circulation and securing the population in the most efficient and
life-enhancing way possible is identified by Foucault as two differing forms of sovereignty.
The first is the sovereignty of the intra muros, the king within the walls, contrasted with the
second, the sovereignty of the shepherd or pastoralism (2009). For Reid-Henry, this chang-
ing approach from containment to the effective management of disaster is the distinction
between the pre-modern state and the emergence of a modern-liberal state. In its concern for
the effective management of risk and thus the effective management of life, Reid-Henry
recognises ‘a humanitarian form of intervention concerned with maintaining – not only the
population’s well-being – but maintaining the state’s own security and as importantly its
efficacy’ (2014: 422, italics in original).

Thus, the management of disaster by the emergent modern state made use of instrumen-
tal and normative technologies and spatial arrangements concerned with the regulation of
human life. Here categories of life recognisable to political geographers (Jones, 2009) and
known to critical scholars of humanitarianism as both biopolitics and the politics of life
(Fassin, 2012) regulate the security of the population more generally. Thus, specificity of
control and the creation of particular governing instruments went hand-in-hand with, or
were contained within, particular governing rationalities and a universal concern for (the
good) life that we can recognise as humanitarian. Here, a humanitarian logic, or what
Fassin (2012) would call a humanitarian reason, developed with modern states as a tech-
nique to manage populations and the social, economic and political risks that they faced
(Reid-Henry, 2014: 422–423) while also ensuring the state’s security through the effective
management of disaster. However, as a technique of government in the emerging modern,
liberal state humanitarianism itself became subject to processes of effective management or
rationalisation.

The rationalisation of compassion

Hannah Arendt is perhaps the scholar most well known for a critique of what she terms the
passion for compassion (2009). However, long before Arendt called attention to the poten-
tial problems of political action guided by the affects of unchecked compassion, the modern
liberal state was itself developing ways to ‘render compassion party to liberal forms of social
regulation and control’ (Reid-Henry, 2014: 423). This worked in a variety of ways, ensuring
that humanitarian ideals came to be incorporated into more instrumental forms of govern-
ment from colonialism (see Lester, 2002; Lester and Dussart, 2014); to the civilising laws of
conflict; to the present day management of global relations (see Calhoun, 2008) and the
limits and legitimation of violence itself (see Weizman, 2012). Thus, according to Reid-
Henry, by the early 20th-century this meant, ‘humanitarian endeavour was quite clearly a
part of liberal political rationality more broadly, wherein it served as both an enabler and a
limit on state powers’ (2014: 423, italics in original).

The modern, liberal state has thus rendered compassion into an effective instrument for
the management of disasters that sees care and control as co-constitutive parts of a process
of rationalisation. As humanitarians, driven by compassion for distant strangers
have sought to mobilise resources for action designed to relieve suffering, there are others
– economists, engineers, etc. – determining how such action can be made as efficient as
possible. As Thomas L. Haskell (1985a, 1985b) discussed in his seminal study on human-
itarianism and the emergence of capitalist market logics, moral sentiment only came to be
effective when it had the capacity to be mobilised within a framework that not only re-
enforced the market itself but also maintained the emerging liberal order through ever
greater rationalisation using a range of governing techniques. Here, a growth in moral
sentiments emerges in two ways. First, as the suffering of distant strangers grows in visibility
as time and space is shrunk through imperial and colonial activities. Second, though the
shift from a peasant economy of self-sufficiency to one of capitalist industrialisation saw a
rise in poverty and ‘suffering’ ‘at home’.

Thus not only do moral sentiments emerge but so too does recognition that suffering
(and its causes) fosters insecurity. Both moral sentiments and suffering contain the imminent
possibility of disaster that can be managed by the effective capturing of such sentiments and
their rationalisation. Thus as Reid-Henry argues, humanitarianism has worked to set limits
on state power while ‘making possible a mobius-like recuperation of sovereignty as the
power over life in other ways’ (2014: 425). Here as the state developed techniques to enhance
the security of the population it developed increasingly efficient techniques to intervene in
times of disaster, which concomitantly enhanced the sovereign power of the state.

These techniques Reid-Henry argues were geographically limited in scope to the preserva-
tion of the self, being applied to some more than others. This is apparent in the laws of war
that emerged that applied only to European soldiers and combatants and not to those
resisting colonial domination (2014: 425). Humanitarian sentiment as we shall see also
has a contrasting geography, focused as it is on saving distant strangers. I now turn to
these geographies of distance.

Saving distant strangers, keeping strangers distant

Alan Lester and Fae Dussart discuss similar sentiments to those of Reid-Henry in their
discussion of how a ‘will to do the right thing’ or colonialism under the ‘due observance of
justice’ emerged as a humanitarian form of colonial government. Lester and Dussart discuss
the ways the protection of colonised populations facilitated not only the preservation of
colonised life in the face of colonial violence and dispossession but also became a way for the
coloniser to maintain ‘honour’ or ‘self-esteem’ (2013: 24–24). This argument differs slightly
from Reid-Henry’s in its geographic scope. Colonial humanitarianism is more spatially
expansive, focused on governing at a distance and securing order in unfamiliar places
(Laidlaw, 2012) as opposed to within the modern, liberal state. Thus as much as humani-
tarian government may be a technique of effective management it has contrasting and
seemingly contradictory geographies. These include contradictions around distance, prox-
imity and containment.

Saving distant strangers is a key component of a dominant humanitarian imaginary
(Barnett, 2011) that contains both normative and instrumental rationalities. Building on
Reid-Henry’s recent argument, I attempted above to upset the idea that humanitarianism’s
traditional geography is concerned with the distant stranger not with the stranger within the
walls. These issues of distance deserve further attention. All humanitarian work contains
within it issues of distance. Resourceful and capable actors with a passion for ‘doing
the right thing’ and preserving life may travel to distant places to save strangers.
Meanwhile the act of saving may involve many instances of acute closeness, such as when
doctors tend the wounds of patients, administer therapeutic foods or perform life-saving
surgery. In these instances, humanitarians go from being distant and instead, literally in
some instances, enter the bodies of the strangers they aim to save. Distance, then, in these
instances is multi-scalar in the extreme.
However, there is potency to the idea of distance in humanitarian practice. Distance here is not only a geographic distance between different spaces and places; instead distance as suggested by the ‘saving of distant strangers’ is also a distance marked by self and other. In the case of medical humanitarians, medical ethics dictates the creation and maintenance of a professional distance. Therefore, distance is also distance in social relations. This distance in social relations extends beyond medical humanitarianism and comes to structure relations between humanitarian actor and humanitarian subject in wider humanitarian practice. It has become a central feature of efficiency and the professionalisation of the field and historically marks the shift from charitable giving ‘at home’ to more expansive attempts at saving distant strangers. The universalised ideals underpinning humanitarian sentiment necessitates distance, it requires that the humanitarian subject remains other, as a victim with needs rather than a person with full subjecthood. Ilana Feldman and Miriam Ticktin have discussed humanitarianism’s tendency to deny subjecthood to recipients and the objectifying role of much humanitarianism in thought and practice (2012). Meanwhile humanitarian practitioners themselves are aware of this limit within their work and controversies often revolve around the denial of subjecthood to humanitarian ‘victims’ and the needs of effective management. Furthermore, the work of border control, in which the hotspot approach claims to be a part, is concerned with maintaining this distinction between self and other, between citizens and those excluded from the full-rights of citizenship. And in recent years, there has been a growth of humanitarianism in border control practices (see Pallister-Wilkins, 2015a, 2017a, 2017b, 2017c) whereby humanitarianism enacts what Laleh Khalili and Lisa Hajjar describe as an ethical commitment towards others who are not quite regarded as equal (2013).

These contradictory geographies, of what I will call distant-while-proximate, are perhaps most visible in what has come to be the key site in the humanitarian imaginary: the refugee camp (see Agier, 2011; Hyndman, 2000; Newhouse, 2015). Here, the problems of ‘saving distant strangers’ are brought to the fore, where distance and proximity co-exist in spaces of containment. As was discussed earlier, humanitarianism as a technique emerged to manage disasters effectively (Reid-Henry, 2014) and to secure order in unfamiliar places (Laidlaw, 2012) rather than just to contain them and to prevent them spreading. This is a logic we can understand as deeply Foucauldian in its approach to security, to the securing of ‘bad things’ in order to facilitate and secure wider social, political and economic forces while letting them flourish (2009: 45). However, this does not mean that humanitarian practice does not engage in processes of containment during this effective management and securing of order in unfamiliar and distant places. Here, we see the use of spatial and carceral techniques of government to secure wider processes of circulation. In earlier work, I explored such spatial practices in relation to the work that security barriers do in securing populations, not through blocking in their entirety but through carefully calibrating life in the Foucauldian sense (see Pallister-Wilkins, 2015b, 2016). Humanitarianism engages in similar calibrating practices through refugee camps.

The refugee camp as a tool for the effective management of disaster is designed to maintain distance between self and other in instances of close spatial proximity, echoing the dialectical relationship in processes of modernity between strangers in spatially disaggregated societies and the reaffirmation of the local and personal (Vernon, 2014). Humanitarians have developed a range of practices that keep strangers distant while in close proximity including: geographical containment within semi-carceral spaces of the camp through the presence of security forces and carceral architectures; economically distant through the denial of the right to work and a reliance on humanitarianism for the provision of basic needs; and politically distant through the use of a combination of spatial
containment, reliance on outside assistance and their legal status as refugees (see Hoffmann, 2017). Within this, new technologies of remote management create increased impressions of distance and proximity to recipients through the use of ever more elaborate big-data systems designed to tailor aid delivery (Hoffmann, 2017; see also Read, Taithe and Mac Ginty (2016)). Meanwhile humanitarian aid is provided through humanitarian organisations to create and maintain the impression that humanitarian assistance is distant from state interests, even while humanitarianism is reliant on the sovereign permission of states to operate and much of the aid distributed is state funded.

Refugee camps are a technical solution for providing the necessary conditions for life and for effectively managing disaster on behalf of states, and a wider global refugee-regime fronted by the UNHCR. Refugee camps work to keep refugee populations at a distance even while they are within sovereign territory. Refugee camps are of course located somewhere, within the sovereign territory of a state, and also speak to a shift away from forms of containing ‘disaster’ and a Foucauldian move to manage it effectively using a range of techniques designed to govern the population through ensuring the necessary conditions for life. As I have argued humanitarianism’s dominant geographical imagination concerns the provision of care and the relief of suffering to distant strangers with the refugee camp acting as a tool to provide assistance to strangers while in close proximity. However, within popular humanitarian and Eurocentric imaginations these refugee camps are located in regions and countries far away from the headquarters of humanitarian organisations and the seats of global power, responding to disasters in far-away places.

The ‘refugee crisis’ in Europe has challenged this traditional, Eurocentric humanitarian imagination. The strangers are no longer distant to Europeans they are in European towns and cities; they are what I call distant-while-proximate. They can be found walking along European roads, taking a variety of European transport, using European supermarkets, and trying to cross European borders like Europeans. As such they are no longer distant strangers in need of care in the European imagination. Life seekers are on European holiday beaches and holiday resorts and in European city squares alive with European café culture. From the standpoint of Europe in the current age, the strangers are no longer distant geographically, nor are they abject or easily objectified and thus proximity unsettles the dominant *modus operandi* of humanitarian intervention that seeks to save distant strangers and keep them distant. The strangers are now within the borders of Europe and must be managed effectively for their own wellbeing and for the maintenance of European liberalism through the imposition of a range of techniques usually practiced elsewhere, in non-European, distant places. However, while the strangers are now not distant in a geographical sense, they must remain distant in the socio-political sense and thus the logics of effective disaster management remain and become entwined with wider, exclusive processes of bordering.

These arguments around keeping people distant in the socio-political sense through the effective management of disaster alongside and with exclusive border practices are found for example in the thinking behind the EU-Turkey Statement as articulated by its ‘architect’ Gerald Knaus (see MSF, 2017). Knaus has argued that the hotspot approach within wider systems of mobility governance and border control must enact what Khalili and Hajjar have called an ethical commitment towards others who are not quite (and cannot be) equal (2013). Through this ethical commitment that enforces exclusion Knaus argues the hotspots can operate effectively to secure liberal European politics from the potential harm brought by mobile populations. Harm here for Knaus is a retreat from liberal politics amongst European citizens and their political representatives and a demand for increased illiberal, restrictive and xenophobic policies expressed through increasing support for far-right,
neo-fascist parties. Exclusion here works to maintain a liberal Europe through the effective management of disaster and an externalisation of responsibility.\textsuperscript{6} Therefore, in similar ways as refugee camps are representative of humanitarian government for both the wellbeing of refugee populations and the security of states, the hotspots share similar logics. In the rest of the article, I turn to these technocratic logics designed to bring order to both the management of life seekers as well as the individual compassion that characterised the flourishing of volunteering efforts from individuals from across-Europe and beyond in response to the ‘refugee crisis’. Building on this I argue in conclusion that the hotspot approach seeks to govern life seekers through processes of care and control but also aims to care for and control the well-being of European states.

The management of disaster through the hotspots

In policy documents and statements by EU officials management and order are repeated refrains when discussing the intended and current efforts of the hotspots. It is not my intention to forensically examine the presence of management and order in European narratives about the hotspots. The genealogy of the hotspot approach in European migration and border management and its slow gestation is worthy of a study in and of itself. Nor should the hotspot approach only be understood solely as a crisis or emergency response but as further consolidation of pre-existing logics of control using the mobilisation and productive nature of crisis (see Işleyen, 2017; Jeandesboz and Pallister-Wilkins, 2016). However, from their apparent first iteration the dual logics of protection or what I have termed care in this article and the restitution of order has been a present refrain. We see the dual logic of care and control, or control and care emerging from the first two paragraphs of the European Commission’s Fact Sheet on the ‘hotspot approach to managing exceptional migration flows’:

The European Asylum Support Office (EASO), EU Border Agency (Frontex) EU Police Cooperation Agency (Europol) and EU Judicial Cooperation Agency (Eurojust) will work on the ground with the authorities of the frontline Member State to help to fulfill their obligations under EU law and swiftly identify, register and fingerprint incoming migrants. The work of the agencies will be complementary to one another. The Hotspot approach will also contribute to the implementation of the temporary relocation schemes proposed by the European Commission on 27 May and 9 September: people in clear need of international protection will be identified in frontline Member States for relocation to other EU Member States where their asylum application will be processed. (European Commission, 2015)

These refrains also form a major component of reports for the European Parliament (Neville et al., 2016) to reports by the EU’s co-ordinator for the implementation of the EU-Turkey Statement, Maarten Verwey. My intention in the examination of how hotspots seek to effectively manage disasters through the complimentary presence and practicing of care and control is not to gauge how well they do this. From a range of reports (see HRW, 2017; MSF, 2017) and my own fieldwork experiences the extent of protection and care offered by the hotspots is highly contestable. My intention here is to examine how order comes to be re-established and maintained through the practicing of care and through claims to the logic of protection to highlight in part how care and control are concomitant and co-constitutive parts of not only the humanitarian regime but modern liberalism itself. Through this, I intend to continue to highlight, as critical humanitarianism studies has been attempting, the politics of humanitarianism. In the hotspots, the politics of protection takes
two principle forms: one concerns the imbrication of care, protection and vulnerability with access to mobility and the other concerns the need to provide order and security (in all its forms) within the hotspots themselves.

Eyal Weizman (2012) has elucidated how humanitarian practice comes to calibrate life itself through the regulation of access to the necessary conditions for life. Meanwhile Didier Fassin (2012) has shown how hierarchies of humanity or a politics of life come to be produced through humanitarian practices that regulate and determine who has access to care. These calibrations and categorisations seem to stand in contrast to the forms of categorisation we witness for example in the border regime (see Jones, 2009) that predominantly categorise according to citizenship. However, in the hotspots, the border regime, biopolitical need, a politics of life and access to mobility become intertwined. Hierarchies of mobility, or ‘border triage’ as described to me by one humanitarian practitioner with a medical background, are created in the hotspot around logics of protection and what we could call a politics of vulnerability (Statewatch, 2015).

Within the hotspots life seekers’ relationship to particular hierarchies of vulnerability determine under the current EU-Turkey Statement their ability to escape the confines of the hotspot system. Currently under Greek law vulnerable people are exempted from the ‘admissibility procedure’ governing returns to Turkey and have been eligible for transfer to mainland Greece where they can access adequate services and await the outcome of their asylum claim (MSF, 2017: 17). Vulnerable people are categorised as belonging to one or more of the following: pregnant women, unaccompanied children single parents with children, victims of torture, and people with disabilities (HRW, 2017). As a report to the LIBE Committee of the European Parliament has iterated ‘great care needs to be taken to ensure that the categorising of migrants at hotspots is carried out in full respect for the rights of all migrants, while proper identification of applicants for international protection at the point of first arrival in the Union should help facilitate the overall functioning of a reformed Common European Asylum System’ (Neville et al., 2016: 42). Here we see clearly, even in a report designed to aid parliamentarians in the scrutiny of current EU implementation of legislation, the presence of logics of care and/or protection alongside and within logics of control and the effective management of disaster.

The effective management of disaster through care and control is practiced in the hotspots in other ways through a focus on the provision of security and the policing of life within the hotspot space. As discussed in the introduction, hotspots are ‘machines of many moving parts’ (Khalili, 2012: 239). They copy the techniques of the refugee camp discussed in the previous section while spatially expanding such techniques beyond the carceral space itself. The hotspot approach forms a network of support and (pre)registration facilities made up of not only the ‘spots’ themselves but a network of transit points, transport infrastructure and reception facilities including satellite facilities used for vulnerable cases and to relieve overcrowding and with each designed to – supposedly – offer protection. Such a description echoes that of Tom Corsellis and Antonella Vitale’s description of the systems of control of refugee populations that has emerged as a form of pre-emptive risk management designed to govern the mobility of refugee movements (2005: 258). Here, practices designed to govern populations, from the initial production of the population itself through registration, aggregation and calculation (Bulley, 2014: 70) to enable the efficient provision of the necessary conditions for life, to the actual provision of WaSH (water, sanitation, hygiene) facilities, food and physical security themselves are intended to occur within the hotspot machine of many moving parts. The hotspots then function to keep life seekers alive ‘while forming them as a “displaced population” – a known, calculated mass’ (Bulley, 2014: 71).
To carry this out the European Commission has allocated €506m ($541m) to the Asylum Migration Integration Fund (AMIF) and the Internal Security Fund (ISF). When coupled with contributions from individual member states as well as private donations it is estimated that €751m ($803m) have been allocated for the management of life seekers in Greece, with the majority of this €751m used to ‘address the needs of at least 57,000 people stranded in Greece after March 2016’ (Howden and Fotiadis, 2017). Much of this money has been spent by the EU itself as well as by the Greek state and amongst humanitarian organisations in receipt of EU funds working in the hotspots and their satellite spaces such as Kara Tepe on Lesvos, used to house vulnerable people from the hotspot of Moria, or Souda on Chios that make up part of the spatially disaggregated network of the hotspot approach. Currently, the Greek Directorate of Reception and Social Integration at the Ministry of Interior is responsible for the longer-term reception of life seekers in the hotspots with the Greek army tasked with the construction, logistics and management of the spaces (ECRE, 2016: 36–37) as well as the provision of food which is sub-contracted to a private catering company (ECRE, 2016: 46).

Other ‘services’ are provided by a range of humanitarian organisations in the hotspots themselves and within their satellite spaces that make up the hotspot machine. For example, I have documented the following in Moria on Lesvos: Save the Children providing activities for children as well as safe spaces for mothers and children; Praksis working with unaccompanied minors; Mercy Corps running classes and activities for both children and adults and Remar supplementing food supplies. In Moria’s satellite site of Kara Tepe on Lesvos: IRC providing WaSH facilities; Human Support Agency providing clothes, Samaritan’s Purse providing essential non-food items such as hygiene kits and Medecins du Monde and MSF providing medical care; Oxfam providing food distribution and ActionAid providing interpreters and working to support women as well as a host of other smaller, volunteer organisations providing supplementary relief efforts. The presence of these humanitarian actors assisting in the efficient management of the hotspots themselves and their satellite sites have also been documented by the European Council for Refugees and Exiles (ERCE) in its joint report with the Dutch, Italian and Greek Councils for Refugees and ProAsyl (ECRE, 2016). As such the hotspots and their attendant infrastructures including a number of satellite sites and infrastructures such as Kara Tepe on Lesvos and Souda on Chios are sites of humanitarian action where a range of acts of compassion towards life seekers are performed and subsumed into the hotspot approach, making such compassion itself governable. This rationalisation of compassion in the hotspots is the focus of the following discussion.

The rationalisation of compassion through the hotspots

It will be unsurprising to scholars of the refugee regime and its common spatialisation in camps, to argue that the complex systems that underpin, design and manage camps employ advanced liberal techniques (Lipper, 1999) for effective population management (Bulley, 2014). Such processes are part of the modern, liberal state’s rendering of compassion into an effective instrument for the management of disasters. Like camps, hotspots employ a range of techniques that aim to bring order to chaos, governing through and allowing for the concomitant presence of both care and control. The hotspot approach thus aims to effectively deploy compassion for the securing of life seekers. However, the hotspot approach also intervenes at the level of European society, working to mould the concerns of citizens into effective tools of governing and liberal order, focused on freedom of both rational
political action but also freedom to act within the market place based on processes of rationality and efficiency. It is this latter phenomenon I wish to focus on here.

The ‘hotspots’ have come into existence within a ‘migration crisis’ that has been characterised not only by life seekers seeking life but also by the presence of large numbers of volunteers wanting to ‘help’ these ‘distant strangers’ upon their arrival in Europe. The autumn of 2015 saw large numbers of volunteers journey to Greece to assist life seekers. From wanting to ensure the safety of their journeys in small rubber dinghies across the Aegean, to providing dry clothes on the beaches, to offering food, and other basic needs at registration sites – later hotspots – compassion was mobilised and performed in many instances in the absence of what many volunteers considered an adequate response from the European Union, the Greek state and international humanitarian organisations. However, from the perspective of sovereignty such compassion needed to be made to work in ways that were effective to the management of the ‘migration crisis’ as a whole. Left unchecked compassion had the potential to exacerbate disorder. Over time – from the summer of 2015 through to 2016 – the provision of care within the hotspots and their attendant satellite sites, including search and rescue efforts, have been slowly consolidated and brought under ‘control’. So while the hotspots are an attempt to bring order to the management of mobility they and their related governing techniques are also an attempt to bring order to the compassion of volunteers and make it work effectively for liberal sovereignty rather than against it.

This rationalisation of compassion takes place on many geographical scales. It both consolidates the hotspot approaches’ humanitarian geography and also expands such moral geographies beyond the specific hotspots and their satellite sites to include specific initiatives instituted by the European Union to regulate and make effective the compassion that has been mobilised by the ‘migration crisis’. The hotspot approach rationalises compassion by regulating care within the hotspots themselves and their satellite sites while volunteers are included, represented and present in management meetings with other ‘stakeholders’ such as Frontex, EASO and local government representatives. Within this framework, the provision of basic needs is regulated to avoid replication and waste and thus to enhance the efficacy of provision overall. In addition representatives of Frontex have held regular meetings with volunteer rescuers who have worked to create many of the hotspot satellite sites and form part of what has been termed a humanitarian borderscape (Pallister-Wilkins, 2017c). These meetings work to bring such concerns for life performed by these volunteer rescuers under the regulation and control of liberal sovereignty.

Meanwhile compassion is not only rationalised by state-actors or those representing the EU. Volunteer organisers and humanitarian organisations themselves have worked hard to channel the ‘moral force’ of volunteers in ever more effective ways. Preventing duplication, speeding up response times, developing elaborate logistics systems, communication systems and funding mechanisms and requiring volunteers to adhere to ethical and professional standards. These processes, like the larger processes of humanitarianism that they emulate and are a part of, calibrate and channel ‘moral force’ as well as limit need in terms of defining who is in need and what is needed to specific spaces and times, e.g. the hotspots (see Reid-Henry, 2014: 426).

In thinking through the more expansive moral geographies underpinning the hotspots, the new EU Solidarity Corps is an illustrative example suggesting the EU aims to capture the desire to help exhibited by its citizenry and to ensure such desires are rendered effective as opposed to potentially destabilising. Similar in aim to state-based volunteering institutions such as the US Peace Corps or the German weltwärts, the EU Solidarity Corps was launched on 7 December 2016 and:
is the new European Union initiative which creates opportunities for young people to volunteer or work in projects in their own country or abroad that benefit communities and people around Europe. such as helping to prevent natural disasters or rebuild afterwards, assisting in centres for asylum seekers, or addressing different social issues in communities. (European Commission, 2016b)

Meanwhile Jean-Claude Juncker, President of the Commission, stated on its launch that the Solidarity Corps was designed ‘to help where it is needed most, to respond to crisis situations’ (European Commission, 2016c). The EU Solidarity Corps clearly ‘renders the compassion [of European young people] party to liberal forms of social regulation and control (Reid-Henry, 2014: 423). Thus the hotspot model, that includes efforts to govern compassion and the will to care of citizens, sits within wider assemblages and moral geographies that uncover not only attempts to govern the lives of life seekers but suggests concomitant attempts to manage inequality, insecurity and possible responses within a liberal democratic politics (see Duffield, 2010; Pallister-Wilkins, 2017b) that consolidates liberal forms of government rather than offer a politics of transformation (see Weizman, 2012). It is this that has led Reid-Henry to argue for humanitarianism as liberal diagnostic ‘helping to create and sustain a liberal worldview’ (2014: 427).

**Conclusion – Hotspots as liberal diagnostic**

In his discussion of humanitarianism as liberal diagnostic Reid-Henry suggests we think about humanitarianism as a form of government designed to ‘distinguish and frame solutions’ (2014: 425). Humanitarianism as a form of government tells us ‘how people who suffer today are to be thought about even as it reaches out to them’ (Reid-Henry, 2014: 426) while helping us get past the competing claims that humanitarianism is either the best solution for secular, ethical action or a fig-leaf for the pursuit of political and economic interests. As a liberal diagnostic, humanitarianism is not only about securing governmental order in unfamiliar places (Laidlaw, 2012). Instead through securing order in unfamiliar, localised places such as the hotspots and the Greek islands, a liberal order is also produced and consolidated in other places and at other spatial scales. Thus returning to the questions that were raised at the beginning of this article: what is humanitarianism and who is it for? It is possible to see that hotspots not only render life seekers party to the modern, advanced liberal tactics of the current global refugee regime (Lippert, 1999) using systems of efficient administration (Bulley, 2014: 71) but also enable policy makers and politicians to maintain liberal order elsewhere in the face of socio-political opposition to refugees, growing xenophobia and a fear of increasing support for far-right parties.

The humanitarian geographies of the hotspots are therefore both local and transnational. Hotspots practice a liberal concern for life that takes not only life seekers as the subject but also includes European citizenry. In theory if not in practice the humanitarian geographies of the hotspots enable the effective management of the ‘migration crisis’ while ensuring the maintenance of a liberal order in Europe. Hotspots are the products of humanitarianism as liberal diagnostic where humanitarianism is a form of government in which ‘compassion is calibrated and put to work in the world’ (Reid-Henry, 2014: 428). Hotspots aim to capture the will-to-care present in modern liberal politics and the modern state with its focus on the security of populations, and put care to work in the most efficient and effective way for processes of control. At the same time, the hotspot model renders compassion itself a problem of order that needs to be captured and made effective to be deployed across the sites of the hotspot archipelago, the lines of flight of life seekers and European space.
Thus, in conclusion, this article has argued that the humanitarian geographies of the hotspots consolidate the presence of concomitant and co-constitutive practices of care and control in liberal government. It has complicated the focus on care for distant strangers in humanitarianism by showing what techniques of liberal government are deployed when those strangers become proximate. It has argued that hotspots work to keep life seekers distant-while-proximate through the application of liberal techniques aimed at managing and securing life. This differs from those practices also present in Europe that suggest a ‘violent inaction’ through processes of abandonment such as those found at Calais (see Davies et al., 2017). In addition, the hotspot approach differs from those practices that seek to govern migration through death (see Squire, 2017). Hotspots instead work to manage disaster effectively, incorporating a range of practices that render life seekers subject to liberal techniques and the desire to help party to liberalism that works to insulate liberal order from mobility and ‘irrational’ compassion.

Building on this, hotspots also differ from those practices that govern through death or the exception in other ways. They are underpinned by what has been identified in colonial humanitarianism as a will to ‘do the right thing’ and the maintenance of honour (see Lester and Dussart, 2014: 24), where doing the right thing, the maintenance of honour and the prevention of a politics of exception come to form a ‘way of being governmental’ (Lester and Dussart, 2014: 21) setting limits on sovereign violence while making possible its ‘mobius-like’ recuperation for the maintenance of a liberal order (Reid-Henry, 2014: 425). Here, the presence of death within violent border practices and a humanitarian response that seeks to make live as opposed to let die comes to consolidate sovereignty and liberalism itself (see Weizman, 2012), setting limits on the extent to which a liberal humanitarianism can form the basis of a radical political counterpoint. Thus the hotspots’ humanitarian geographies become apparent, not through their success in the provision of care to life seekers – at this they seemingly fail and fail demonstrably – but instead through the presence and use of humanitarian rationalities in the maintenance of Europe’s own security and efficacy and their work in keeping strangers politically distant, cared for but not equal.

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Notes

1. People are not ‘officially’ detained in the hotspots (although they may be held for three days during initial identification procedures, extendable up to 25 days).
2. Two years on 18 March 2018.
3. I use the term life seeker to break beyond the dichotomy of refugee and migrant that currently structures much of the humanitarian practice surrounding responding to displaced populations in need, through the Refugee Convention and Protocol. It is used to refer to both people on the move and people who are stuck, whose mobility and/or stasis is impacted by processes of mobility injustice (Sheller, 2012) shaped by the EU’s restrictive border policies.
4. Apostolos Veizis, Medical Director MSF-Greece, personal communication with author.
5. It is also sovereignty as responsibility that underpins the responsibility to protect doctrine. The responsibility to protect “assumes that the rights of sovereignty are based on the de facto ability to control its territory and provide effective protection to its entire population” (Asad, 2015: 408).

6. Gerald Knaus made these arguments in a public event hosted by the University of Amsterdam on 23 March 2017. www.accesseurope.org/access-europe-events/eventdetail/250/-/the-eu-turkey-deal-one-year-on

7. Many humanitarian organisations will not work in the hotspots themselves after the implementation of the EU-Turkey Statement. MSF for example pulled out of Moria in March 2016 (see MSF, 2016) prompting many other organisations to follow and the UNHCR along with other NGOs to give up overall management of Moria (see, ECRE, 2016: 46).

8. For a clear example, see the attempts by the Italian state to create and have Search and Rescue NGOs sign a Code of Conduct.

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