“Casale Monferrato is not the City of Asbestos; 
Casale Monferrato is the City that Fights Against Asbestos!”

An exploratory study on the socio-political actions of going beyond suffering related to an environmental disaster caused by asbestos manufacturing

by

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To a shy woman

who used to cover her mouth with her hand, when she smiled.

Unfortunately, her hand could not protect her from

breathing the asbestos fibres

that took away her on January 10, 2012.
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Summary

This thesis discusses the data collected in Casale Monferrato in Piemonte (northwestern Italy) from May to June 2012. The socio-political and geographic context of my research is characterised by an environmental disaster caused by asbestos pollution from an asbestos-cement factory owned by Eternit and subsequent significant civil mobilization against the asbestos manufacturing.

From an anthropological perspective, I explore the socio-political actions undertaken by workers, citizens, relatives of victims and sufferers from asbestos-related diseases in reaction to their disaster experiences. In particular, I focused on disaster experiences in terms of asbestos-related illness experiences and the risk of living with an asbestos-related illness experience. The relationships between such experiences and socio-political actions are investigated from a theoretical approach that considers the socio-political actions as practices triggered by the suffering related to the disaster experiences. Taking into account the various disaster experiences, I analyse the range of related suffering according to distinct subjectivities, circumstances, and bodily experiences.

I consider socio-political actions as victims’—active social actors—practices undertaken to go beyond their physical and social suffering, i.e. to act and promote social change at a local and broader level, and at a collective and individual level as well.

I present the environmental disaster in Casale Monferrato as a multi-faceted process characterised by specific political and economic strategies; moreover, I consider the relationships between the risk perception of the danger of asbestos and the various disaster experiences lived by workers and citizens.

Next, I draw the attention to distinct forms of suffering and the practices undertaken by social actors to face the upsetting event of their subjective disaster experiences and go beyond the related suffering by trying to overcome the boundaries that divide the public and private spheres of their existence. I explore the social context and the practices that have characterised the individual and collective attempts to make the suffering a condition from which new meanings and powers can emerge.

Lastly, I consider the crucial role played by the AFeVA—Associazione Familiari Vittime Amianto (Association of Relatives and/of Victims from Asbestos) in the civil mobilization in Casale Monferrato. AFeVA is the association that emerged from the suffering of the relatives of victims from asbestos and it coordinates the various local socio-political actions in an
organized social movement that has achieved important goals in the local, national and international context.
Chapter 1: A Context of Environmental Disaster

Statement of the Problem

Casale Monferrato is in Piemonte, northwestern Italy. On February 13, 2012, the Court of Turin, in the capital of Piemonte, declared that Casale Monferrato was affected by an environmental disaster caused by asbestos pollution. Stephan Schmidheiny and Louis De Cartier De la Marchienne, who managed Eternit’s asbestos-cement plant in Casale Monferrato from 1952 to 1986, were found responsible\textsuperscript{1}. The judgement ended the judicial trial with the largest number of injured parties (started in December 2009) against Eternit, the most powerful asbestos-cement corporation in the world. The two men were also found guilty of a lack of safety measures in the workplace. They were convicted to 16 years in prison and had to pay damages to 2899 injured parties including individuals, organizations, public institutions and municipalities (Rossi 2012:19). The final verdict can be seen as the successful outcome of a long process involving former asbestos workers, local citizens, asbestos-related (A-R) disease sufferers, and their relatives. In particular, the AFeVA—Associazione Familiari Vittime Amianto (Association of/and Relatives of Victims from Asbestos\textsuperscript{2}) was the main actor in the negotiation process with institutionalized forms of power and knowledge, e.g. biomedicine, political institutions, and government organisations. It was this long process that made it possible to undertake the judicial action against Eternit.

For my thesis, I decided to explore how a life-threatening situation caused by an asbestos-related environmental disaster triggered socio-political actions by workers and citizens in Casale Monferrato. I aim to contribute to current knowledge about social movements emerging from contexts of environmental disasters using an anthropological perspective. In particular, I focus on the role of social actors who use suffering caused by illness experiences related to a local disaster as the fundamental condition for taking action in a socio-political context.

My interpretation of the socio-political mobilization of Casale Monferrato’s inhabitants (as sufferers) may provide information for future efforts against asbestos manufacturing. Considering the international resonance of the final verdict of the judicial trial and Casale Monferrato as a successful model of civil mobilization, my study can be used as

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\textsuperscript{1} The previous managers of the Eternit’s plant in Casale Monferrato are dead.

\textsuperscript{2} In the Italian language the name of the association can be interpreted as Association of Relatives of Victims from Asbestos and as Association of Relatives and Victims from Asbestos.
an instrument (Simonelli 2007:156-170) by social organizations to promote awareness of civil and workers’ rights and the risk of asbestos exposure in countries where asbestos is not yet banned.

In order to grasp the relevance of the mobilization that occurred in Casale Monferrato, it is necessary to provide epidemiological data on the number of people affected by A-R diseases. The number of A-R disease sufferers is increasing in Italy and many other countries (ISPESL 2010). In Italy, the number of deaths from A-R diseases is expected to peak in 2015-2018 (ISPESL 2010). Fortunately, because of the Italian ban on asbestos manufacturing\(^3\), the rate of asbestosis is definitely decreasing. However, A-R diseases caused by environmental or domestic exposure to asbestos in Italy are significantly increasing (ISPESL 2010).

Each year the National Register of Mesothelioma-ReNaM documents thousands of new cases of mesothelioma (Iocca 2011). Mesothelioma is a rare form of cancer that is exclusively caused by exposure to asbestos fibres (Musti 2009). The distribution of the new “cases” of mesothelioma is not consistent throughout Italy; Casale Monferrato, Broni, Monfalcone, and Bari are all cities with higher rates of the disease (Terracini 2010). In Western Europe, the current rate of 50,000 annual deaths from exposure to asbestos is expected to continue through 2030 (Iocca 2011). Globally, more than 107,000 persons die every year from A-R diseases, and more than 125 million people are still exposed to asbestos in their workplace (WHO 2010). Despite investigations of the danger of breathing asbestos since the end of the 19th century (Rossi 2008), official biomedical recognition of the relationship between exposure to asbestos and the increase of malignant pleural mesothelioma (MPM) since the 1960s (Selikoff 1965), asbestos is still handled by workers. In Casale Monferrato, to this date, more than 1800 deaths caused by A-R diseases have been registered (Rossi 2012) and more than 50 new cases of mesothelioma are diagnosed per year (Mossano 2010:128). The majority of the new cases of mesothelioma are caused by environmental exposure to asbestos and are generally in people younger than those who have contracted mesothelioma in the past (Mossano 2010). In my short fieldwork in May and June 2012, I learned about three new cases of mesothelioma: a 19 year-old boy, a 35 year-old woman, and a 32 year-old man.

\(^3\) Asbestosis is a disease almost exclusively caused by occupational exposure to asbestos. Currently, in Italy, the only workers exposed to asbestos are the ones who remove asbestos from public and private places.
Asbestos and Industrial Use

There is only the quarry’s grey dust cloud of asbestos, that, wherever it arrives, it burns leaves and lungs (Calvino 1954 quoted in Mossano 2010:158)

In Casale Monferrato, people refer to asbestos dust as polvere (dust) and to the asbestos dust from waste materials as polverino (thin, little dust). I use these terms, in addition to “asbestos”, to respect the emic and experienced knowledge of my research partners—the inhabitants of Casale Monferrato.

Asbestos is a generic term for a variety of fibrous silicate minerals (Assennato 2003:7) with common characteristics like durability, mechanical resistance, and resistance to corrosive agents, high temperature, and combustion. The etymology of asbestos is the Greek word ἀσβεστός (asbestos) an adjective that means incorruptible, inextinguishable and eternal (Rossi 2008). During ancient times, asbestos was largely used and appreciated for its “magic” properties. It was believed to be “salamander’s wool”, because, like the small amphibian, it was not damaged by fire (Rossi 2008).

The widespread use of asbestos, especially in construction industry, is due to its unique properties and to the fact that asbestos fibres can be woven and combined with other raw materials. In 1902, the Austrian chemist Ludwig Hatschek patented “Eternit”, a mixture of cement and asbestos in a 6:1 ratio. The name was chosen to emphasise the product’s longevity and Eternit was produced worldwide with extraordinary economic profits because of the low cost of the raw materials (Altopiedi 2011).

According to World Mining Data 2008, in the 20th century, the main asbestos-producing countries were the Former Soviet Union, Canada and South Africa with a total production of 67.100.000, 60.500.000, and 9.920.000 tons respectively (Iocca 2011). In the 20th century, Italy was the second largest asbestos-producing country in Europe with 3.860.000 tons; the highest tonnage production in Italy (118.536 tons) was in the 1970s. Moreover, Italy has the largest asbestos quarry in Europe—the Balangero’s quarry in Piemonte, 100 km from Casale Monferrato.

In the following paragraphs, I present the diseases caused by inhaling asbestos dust, the history of biomedical knowledge and the effects of biomedical information on the asbestos-cement lobbies’ strategies and the governmental laws concerning the asbestos manufacturing in Italy and other countries.
Asbestos-Related (A-R) Diseases

“In the Imperial Forums in Rome, on a stone it is written that asbestos is dangerous. The Romans already knew that asbestos was dangerous!”
(Interview nr. 1)

The characteristics of asbestos that have significant industrial implications are the same that represent a serious risk for the health of human beings. To date, diseases related to asbestos exposure that are recognized by the biomedicine are asbestosis, lung and laryngeal cancers and malignant mesothelioma. Mesothelioma is a cancer that can affect multiple tissues. The most common types of mesothelioma related to exposure to asbestos are pleural and peritoneal mesothelioma (ISPESL 2010). Moreover, the US Environmental Protection Agency has noted an increase of cancers other than respiratory in people exposed to asbestos dust (Assennato 2003).

Considering the biomedical knowledge as a cultural product (Kleinman 1980) of a dynamic negotiation process where various factors are involved, I summarize a few of the significant and historical steps of the biomedical exploration of A-R diseases. This is necessary to understand the criminality of the political-economic strategies adopted by the asbestos-cement lobbyists to promote the continuation of asbestos manufacturing, despite the biomedical evidence of the danger of breathing asbestos fibres (Altopiedi 2011).

Early surveys on the relationship between exposure to asbestos fibres in work settings and the increase of specific lung diseases among workers date back to the end of the 19th century. As noted by Her Majesty’s Stationery Office, in 1898 two British sanitary inspectors, Deane and Anderson, included asbestos weaving on a list of the dustiest jobs and their report declared that asbestos dust could easily be recognized as a dangerous risk for workers (HSMO 1899 quoted in Iocca 2011:137). Inspectors Merewether and Price conducted another relevant survey required by the British Parliament in the early 1930s. Their clinical and epidemiological report certified that constant exposure to asbestos dust was associated with an increase in lung fibrosis, and their findings supported a law to improve the working conditions in the United Kingdom (Altopiedi 2011). The first epidemiological study that established the relationship between the asbestos fibres exposure and the insurgence of lung cancers was published by Doll in 1955 in the UK (Altopiedi 2011).

In 1960, Wagner and Webster published the findings of a survey conducted in South Africa that found only 8 of the 33 analysed cases of mesothelioma were caused by an occupational exposure. The remaining 25 cases were caused by environmental exposure and
people who lived nearby asbestos mines or factories. This survey showed that mesothelioma could occur even at low levels of exposure, after a long latency period and that there was no safe level of exposure (Altopiedi 2011). Beginning with this South African survey, mesothelioma (a rare cancer) was linked to occupational and environmental exposure to asbestos.

The findings of biomedical and epidemiological studies were known by the asbestos-cement lobbies, but they denied the danger of asbestos and offered counter-knowledge based on the studies of corrupted scientists (Rossi 2012). Moreover, the lobbyists funded surveys whose findings were strategically hidden from workers and trade unionists who had begun to mobilize in the early 1970s (Altopiedi 2011).

Although the denunciation of asbestos dangerousness by workers and civil mobilization organizations led to a ban on asbestos in several countries, it is still handled in many countries and represents important economic revenue. In the 2000s the main asbestos-producing countries were Russia, China, Canada, Kazakhstan, Brazil, and Zimbabwe. In particular, to this day, Asia area represents the main market for asbestos (Iocca 2011).

Casale Monferrato was the first town in Italy to ban the mining, manufacturing and use of asbestos. Based on Casale Monferrato’s local law and in line with the other European countries, a national Italian law 257/1992 banned asbestos throughout the country (Rossi 2012).

**The Plant and the City**

Why Casale? Why was that big plant, that first gave lots of hopes and then lots of pain, situated just on the Po’s banks, at the feet of Monferrato’s hills so rich of truffles and vineyards? (Rossi 2012:53)

Hatschek’s patent for Eternit was bought by the Swiss businessman Steinmann, who began asbestos-cement production at the Schweizerische Eternitwerke Ag plant in Niederunen, Switzerland in 1903 (Mossano 2010:130). In the early 1900s, the engineer Adolfo Mazza introduced asbestos-cement production in Italy after having bought the licence from Steinmann. In 1906, he founded the Società Anonima Eternit – Pietra Artificiale (Anonymous Society Eternit – Artificial Stone) with a legal base in Genoa. In 1942, the company became Eternit (Rossi 2012).
Casale Monferrato was chosen as the site for the Eternit asbestos-cement plant for various reasons. It was in the centre of the industrial triangle Turin-Milan-Genoa and situated in an area with a long tradition of high-quality cement manufacturing. There was a plenty of water and the town was near the largest asbestos quarry in Western Europe—Balangero. Moreover, Casale Monferrato had a railway station that could be used to easily import asbestos dust and export asbestos-cement products (Rossi 2012). The production of asbestos-cement in Casale Monferrato started in 1907 and ended in 1986 (Altopiedi 2011:42-43). Over 80 years, 5,000 workers participated in the production of asbestos cement (Mossano 2010:130).

The asbestos-cement plant in Casale Monferrato was built in the working class district called Ronzone, in Via Oggero. In the early 1900s, there were many cement factories in the area, but Eternit’s factory of 94,000 m² quickly took over 47% of the total industrial area; thus, forcing the closure of smaller factories who were less competitive. Asbestos-cement production began in 1907 and specialized in roofs and pipes (Rossi 2012).

In 1932, a store was built near the railway station, in Piazza D’Armi, across the city from the Eternit factory; “it was connected to the Ronzone’s plant by a narrow-gauge small train that, loaded with asbestos-cement products, went through the houses and the city. Later, the trucks run through the same path” (Mossano 2010:130). During my fieldwork the image of the train causing an asbestos leak by crossing the city was evoked by many informants. From a retrospective view, the train has been conceptualized as one of the main vehicles of asbestos as a death threat.

Casale Monferrato’s plant was the largest and most important site owned by Eternit in Italy. Other Italian Eternit factories were located in Cavagnolo (Piemonte), Bagnoli (Campania), Rubiera (Emilia Romagna) and Siracusa (Sicilia). Mazza managed the Casale Monferrato’s plant until the early 1950s. Then, the Belgian dynasty of Emsens De Cartier had control of production from April 19, 1952 to December 12, 1972. Louis De Cartier De la Marchienne—the only family member still alive—took control in 1966. Lastly, a Swiss businessman, Stephan Schmidheiny, was in charge of the Eternit in Casale Monferrato until 1986, the year the factory was declared a failure (Rossi 2012). The Eternit plant in Casale Monferrato was declared a failure for economic reasons; the market of the asbestos-cement products was in crisis in Italy and workers were asking to abandon asbestos in the production process and to use alternative fibres as raw material. Eternit managers decided that it would be more profitable to abandon the plant and dismiss the workers, who numbered approximately 350 in 1986 (Rossi 2012).
After the failure of the Eternit factory, the plant was literally abandoned. The Eternit factory site represented a significant source of pollution from asbestos dust and material for years until asbestos removal by dismantling the factory began in 2000. Over the following years, a project called “Eternot” sponsored development of the Ronzone neighbourhood and the plan was to remove the Eternit factory entirely and construct a large park on the site.

“Eternit has been: the name of dozens of manufacturing companies and scores of building products; a dominant multinational industrial group, two global asbestos conglomerates, a brand, a patent and a generic term; in many markets, the word “Eternit” is used to denote a range of asbestos-cement building products regardless of the trade mark. But Eternit is more, much more than has been described in the preceding sentences; over the last hundred years, these seven letters have come to represent a production process which uses up and spits out human beings as part of the manufacturing cycle” (IBAS 2012:14).
Chapter 2: Literature Review

Introduction
I chose to conduct my study in Casale Monferrato, Italy, because I wanted to explore the socio-political practices triggered by the suffering caused by an environmental disaster related to asbestos pollution and to the presence of the asbestos-cement plant. My data analysis focuses on the strong relationships between the socio-political and cultural context and the local disaster experiences; my thesis also discusses the disaster experiences in terms of A-R illness experiences and the experiences of living with the risk of an A-R illness.

My analysis considers the potentialities of a—bodily and social—suffering referring to the post-structuralist anthropological definition of the “body politic” (Scheper-Hughes and Lock 1987:8). In Casale Monferrato, in addition to the regulation and exploitation of workers’ bodies in the plant, an invisible violence was perpetrated on local citizens’ bodies. In legitimised power systems like a corporate plant where workers “voluntarily” accept being subjected to the power held by the owners, violence is perpetrated through “formal, bureaucratic structures and professional roles” (Scheper-Hughes and Bourgois 2004:21) and official discourses that establish what is a life, death, body, suffering, risk, or disaster. The peculiarities of the mobilization that occurred in Casale Monferrato reside in the socio-political practices by which the local social actors reacted to such violence. Political strategies and asbestos manufacturing by Eternit management dramatically offer an example of how capitalistic economics and societies need “healthy bodies” (Scheper-Hughes and Lock 1987:25) for a production process. Nevertheless, the “gears” of such system can misalign when the “human resources” experience a bodily suffering that is subversive—healthy bodies are transformed into suffering bodies that are no longer “productive”. The human subjects, now experiencing bodily suffering and pain, begin to critique the “world” they live in and elaborate new meanings and practices that belong to a sense-making process triggered by a “disruption of the world” (Scarry 1985). In my analysis, I consider not only the physical pain of the asbestos workers and the community, but also the social suffering related to the A-R illness experiences as conditions from which new actions can be taken and changes can be promoted in a socio-political context. The socio-political actions are not obvious or natural consequences of a suffering condition; my exploration of the mobilization in the context of Casale Monferrato aims to understand the processes, practices, and circumstances that have

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4 Scarry (1985) argues that the physical pain is the triggering condition for “making and unmaking the world”. 4
characterised the experiences of a significant number of citizens in taking action starting from their suffering. I situate my study within the anthropological literature concerning the context of environmental disasters (Petryna 2002; Das 1995). In particular, my current and previous research interests have been inspired by Petryna’s ethnographic research of another environmental disaster—the post-Chernobyl and post-Soviet Ukraine context.

In line with Petryna’s anthropological understanding of a context characterised by an environmental disaster, I consider the disaster caused by the presence of the asbestos-cement Eternit plant in Casale Monferrato as a process. In the analysis phase, I consider some of these process aspects and I interpret the data collected during my fieldwork through the lens of the following theoretical concepts and framework in order to elaborate an original understanding of the socio-cultural phenomenon that I have investigated.

**A Disaster from an Anthropological Perspective**

From an anthropological perspective, a disaster is a situation of extreme crisis that occurs when a potentially destructive factor—with natural or technological origins—has an impact on a population caught in a vulnerable condition. Such a vulnerable condition is always physically and socially determined; therefore, an exclusively “natural” disaster does not exist (Ligi 2009).

I consider the environmental disaster of Casale Monferrato as a process in which a devastating role has been played by strategies adopted by the Eternit managers in promoting a condition of extreme “vulnerability” for workers and local citizens.

A disaster can cause an “anthropological shock” (Beck 1987:153-165) and force people to change their conception of the surrounding environment; however, the disaster is also defined by how people conceive and experience it. A disaster is not a sudden and accidental devastation of the social structures; instead, it is a social process that can be slowed to become imperceptible (Ligi 2009:16). The slowness and the “invisibility” of a disaster are peculiar characteristics of the environmental disasters caused by asbestos pollution; I found this to be true in Casale Monferrato and in Bari, Italy, in my earlier work as well.

“The most dangerous dangers are those that we do not recognize as dangers, the serious risks that we do not perceive” (Ligi 2009:9). The risk is not an objective entity; instead, it is a cognitive category through which relationships between concrete events can be made (Ligi 2009:6). In Casale Monferrato, for many years, the disaster was invisible and unperceived by the population. Before the awareness campaigns, there was no perception of
risk and the source of the pollution—the plant—was not considered a threat. The transformation from the “familiar to the extraordinary” (Parkhill at al. 2010:39) while living with the risk of disease from asbestos-cement processing is strongly linked to the long and tenacious mobilization occurring in Casale Monferrato.

In the next chapters, I refer to the disaster experiences that I have observed. I adopted a socio-cultural perspective to grasp how risk perception is experienced in the community’s daily life and how the awareness of living with risk belongs to a sense-making process, both collective and individual (Henwood et al. 2008:421-438). For instance, the cognitive categories of time and space concur to make the practices by which the disaster is experienced meaningful. Disasters caused by asbestos pollution are characterised by long-lasting consequences and the contamination of spaces far from the polluting source. Moreover, asbestos-cement products have promoted the spread of pollution and they too can be considered as sources of pollution. I consider these aspects when I discuss the subjective experiences of the “disasters” occurring in Casale Monferrato.

An environmental disaster is the context of the socio-political practices of my research collaborators, the citizens of Casale Monferrato. In this context, the “disruption of the world” (Scarry 1985) determined by the illness experience caused by the disaster (asbestos pollution and subsequent disease) concerns a whole community. I interpreted the “actions” taken by the community through the theoretical concepts of biosociality (Rabinow 1992:7-10), biocitizenships (Rose 2007) and biological citizenship (Petryna 2002; 2004:250-265) that I discuss in the next section.

Socio-political Practices from the Body

I refer to some fundamental concepts in order to understand how new forms of socio-political practices can be influenced by experiences that concern a person’s body. Petryna’s analysis of the Chernobyl disaster introduced the concept of “biological citizenship” (Petryna 2002). The author addresses the process by which social actors (suffering from the consequences of a disaster) can be empowered by official—political and biomedical—acknowledgment of their suffering. From a Foucauldian approach an illness experience can be considered a possibility to perform “counterpolitics” (Foucault 1997). This approach supports my interpretation of the practices undertaken by victims of asbestos pollution in Casale Monferrato as strategic actions. For instance, in Casale Monferrato, the mobilization began to spread through the

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5 I use this definition by Borland (1998).
community when the workers’ suffering began to be acknowledged by doctors. Moreover, the official acknowledgement defined the role of the “victim” (Altopiedi 2011) and guaranteed rights for a suffering that would not have been recognized without acknowledged bodily dimensions.

I agree with Rose (2007) who wrote about two dimensions of biocitizenship including both an individualising and a collectivising dimension of the citizenship. “It [biocitizenship] is individualized to the extent that individuals shape their relations with themselves in terms of a knowledge of their somatic individuality” (Rose 2007:134). However, this also implies a collectivising moment. Rabinow (1992) reminds us in his definition of “biosociality” that forms of collectivisation can emerge from sharing specific bodily experiences: “biosocial groupings—collectivities formed around a biological conception of a shared identity—have a long history” (Rose 2007:134).

In the context of Casale Monferrato, I focused on the “shared identity” built on the suffering caused by the environmental disaster related to the Eternit asbestos-cement factory in terms of A-R diseases experiences. I draw particular attention to Rose’s conception of biocitizenships (2007) that is reminiscent of Petryna’s definition (2002). Rose (2007) defines three citizenships: “informational biocitizenship” characterized by the acquisition of scientific and medical knowledge, “rights biocitizenship” characterized by awareness campaigns to achieve new civil rights, and “digital biocitizenship” that incorporates communities electronically linked through the internet and the new media technologies. I found all three forms of citizenship in Casale Monferrato. Because of the high incidence of A-R diseases, a significant number of the citizens have developed a deep knowledge of the biomedical science related to their symptoms, treatment and course (Iocca 2011). Moreover, the civil mobilization fighting to achieve more health and work rights began in the 1970s in Casale Monferrato and culminated with massive community participation in social activities organized during the judicial trial (December 2009 to February 2012). Furthermore, looking at the websites and Facebook groups as existing data (Green and Thorogood 2011) the local organizations, in particular the AFeVA and Voci della Memoria, Memory’s Voices, play a fundamental role in aggregating relatives of victims and persons with A-R diseases. The internet also serves to increase risk awareness, promote social events and situate the human and environmental disaster of Casale Monferrato in the broader national and international context.

Thanks to new computer-mediated communication (Thomsen et al. 1998) and personal involvement in embodied health social movements (Brown et al. 2004), new collective
identities and subjectivities are emerging. The various socio-political practices that I observed in Casale Monferrato can be considered as distinct forms of biosociality emerging from a variety of suffering caused by the same “factor”—the disaster caused by asbestos from the Eternit factory. In my analysis, the involvement in the socio-political activities organized by the workers and civil mobilization, and coordinated mostly by the AFeVA, is only one socio-political practice among those adopted by the social actors to face the disaster and related suffering.

In the next paragraphs, I refer to the anthropological and sociological contributions to situate my understanding of the suffering and the practices of the citizens of Casale Monferrato to go beyond their physical and social suffering.

**Body, Culture, and Society**

In Casale Monferrato, a significant number of citizens decided to live their subjective experiences of suffering related to the environmental disaster in the public space of the surrounding socio-political context. My thesis discusses their suffering (caused by the environmental disaster) mostly in relation to their A-R illness experiences. I agree with Becker (1997) in considering bodily experiences as not restricted to individuals, but rather as events that concern large collectives, e.g. social groups that can be empowered by sharing members’ illness stories.

An anthropological approach that considers the role of the socio-economic context in determining the causes of A-R diseases and the social dimension of the consequent illness experiences (Kleinman et al. 1997) is particularly appropriate for this study of an environmental disaster characterised by workers’ and citizens suffering and their reactions to the suffering through the civil mobilization.

I consider the bodily dimension of the citizens’ actions and my data interpretation as guided by a theoretical paradigm of the embodiment, i.e. a theoretical paradigm that addresses the body and self, as well as culture and experience conceived as bodily practices (Csordas 1990). Mauss (1991) stated that the body is the first tool that human beings have to act in the world. In my data interpretation, the mobilization in Casale Monferrato emerges from the body and the disaster experiences that concerned the citizens’ bodies. The body is the first place where power dynamics are deployed (Foucault 2008), e.g. in the plant; however, the body also represents the first “tool” to react to power and to participate in politics (Mauss 1991), e.g. engaging in socio-political practices.
Bodies can be victims of structural violence (Farmer 1996:261-283; 2005), but at the same time, bodies and suffering bodies can act politically and try to rise up against violence and control wielded by power institutions (Foucault 2008). Taking into account the potential of bodies—and suffering bodies—specifically situates my research questions within the contemporary medical anthropological debate. The A-R illness experiences I investigated due to the asbestos-cement factory environmental disaster are not only informed by the cultural and social context in which they occurred, but are also a moment of cultural production (Good 1994); new meanings, and new worldviews can emerge and create new ways to act and to live in the world. People are forced to search for cultural and social strategies in order to navigate (Lindegaard 2009) the new existential conditions determined by a “critical event” (Das 1995). These adaptive strategies and attempts at explanation are found in the cultural, personal, and social background of the actors involved.

Personal involvement in social movements can be interpreted as one strategy, among others, to negotiate a new role in society as a sufferer (Good 1994). Another strategy to cope with the new existential conditions determined by disaster experiences is the narratives that the social actors elaborate to make their world meaningful again. “We are intersubjective forms of memory and action. Our experiences are so completely integrated—narratized moments, transforming narratives—that the self is constituted out of visceral processes as much as expressed through them” (Kleinman and Kleinman 1991:293). Collective and individual narratives represent an action in the social world and their performance is strongly determined by the specific audience that is present in a particular historic moment (Riessman 2003). The narration can be considered a strategy for disclosure and to understand the meanings that one assigns to a bodily experience (Becker 1997:26). For this reason, I adopted in-depth interviews for data collection to understand how social actors conceptualize the relationship between their disaster experience and their personal involvement in socio-political activities.

**Taking Action in the Social Context**

The body is not only the “battlefield” where power dynamics are deployed (Foucault 2004), it is also the first “tool” that human beings have to socially and politically act in the world (Mauss 1991), to react (Scheper-Hughes and Lock 1987) to power forces, and to promote social change. I analyse the civil mobilization that has characterized the context of Casale Monferrato as a socio-cultural phenomenon and process—within which the role and the
functions assumed by the AFeVA have been pivotal—that can be interpreted as a health and disease-based social movement with peculiar characteristics.

Currently, health- and disease-based social movements are increasing significantly (Brown and Zavestoski 2004; Klawiter 2008; Lupton 1995). Nevertheless, their impact on biomedical research, public health practices, and public health politics has not been adequately explored by scholars (Brown and Zavestoski 2004). These collective and organised actions critique and force powerful institutions (e.g. biomedical organizations, governments, and legislative bodies) to think about themselves and eventually accept new priorities brought forward by the social movements (Brown and Zavestoski 2004; De Graff and Bröer 2012). In this sense, social movements can be considered as “challenging” an existing condition (Brown and Zavestoski 2004). In particular, I aim to add my anthropological perspective to the sociological studies on embodied health movements (Brown and Zavestoski 2004; Brown et al. 2004) that stem from consideration of the individual illness experience of the social actors involved. Specific peculiarities characterise embodied health movements: first, they are moulded by the embodied illness experiences of sufferers; second, they raise challenges to the existing powerful systems of knowledge; third; they often make use of the collaboration with exponents of biomedical knowledge in order to legitimize their concerns and to achieve improvements in illness “treatment, prevention, and research” (Brown et al. 2004:55).

To the best of my knowledge, anthropological studies on the specific context of Casale Monferrato and concerning the relationships between the disaster experiences in terms of A-R illness experience and citizens mobilization do not exist. Exploring this complex relationship from an anthropological viewpoint built on “thick descriptions” and respect for the social actors’ emic points of view can offer a significant insight on how the body, disease, and risk are experienced in a context of an environmental disaster and related socio-political actions (both structured in an organization or not).

*Power/Knowledge* \(^6\)

During the analysis phase of my data, I refer to a Foucauldian approach to understand the practices that characterise and regulate the access or non-access to power by acquiring knowledge. I consider the workers and civil mobilization as deeply characterised by practices designed to acquire knowledge for empowerment.

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\(^6\) I refer to Foucault (1980).
I argue that the workers and civil mobilization emerged from the suffering caused by the environmental disaster in Casale Monferrato. The disaster still plays a fundamental role in the processes by which knowledge about asbestos issues is elaborated and made accessible to the citizens. The risk perception process that has characterised the context of the asbestos environmental disaster in Casale Monferrato is emblematic of a dynamic negotiation between power and knowledge.

Power institutions and knowledge-control practices and risk perception increase the collective and individual experiences of risk-based anxiety (Klawiter 2008). Who controls and contributes to the definition of the risk perception in a specific context is in a powerful position; conversely, those who hold power are able to define what is or is not a situation of risk through practices of the “biopolitics of risk”—evaluation, management, regulation, administration, and communication of risk (Klawiter 2008).

De Graaff and Bröer (2012) highlighted the process dimensions of “establishing a risk object” and how the certainty or uncertainty of a set of knowledge has private and social effects on the illness experience, and in legitimizing or delegitimizing bodily suffering. The mutual influence and the contingent power differential between lay expertise and institutionalized knowledge have both been explored by multiple scholars. For instance, Epstein (1995) reflected on the construction of “credible knowledge” both for social activists and exponents of scientific knowledge to increase the credibility and authority of their actions and practices. Activists do not passively assimilate codes from more powerful systems of knowledge, but rather they use them in a strategic manner to achieve their goals. Taking into account the specific case of embodied health movements, social movements are defined in sociological terms as “boundary movements” (Brown and Zavestoski 2004). On the one hand, health social movements make strategic use of the collaboration of exponents of scientific research; on the other hand, institutionalized forms of knowledge have to accept what is advanced by activists in order to preserve their “credibility” (Epstein 1995; Brown and Zavestoski 2004).

Power and knowledge are inexorably intertwined. In Casale Monferrato, I interpreted many socio-political practices undertaken by social movements and by subjects as practices pivoting around knowledge acquisition and control to preserve or acquire power. Contemporary society seems to offer many opportunities to acquire knowledge; for instance, internet and social networks promote sharing of various forms of knowledge (epidemiological data, illness narratives, scientific publications), and therefore, determine the conditions for new processes of empowerment. I have observed how these “instruments” have played a
relevant role in empowerment process that has characterised the social movement of Casale Monferrato, both at a collective and personal level.

In conclusion, I consider it opportune to remember that from an anthropological perspective, systems of knowledge and their categories are cultural products, situated in a specific social and historic context. I refer to anthropological studies investigating the biomedical knowledge (Kleinman 1980), and risk discourses (Douglas and Wildavsky 1982) as dynamic cultural processes. My investigation of the socio-political practices related to the disaster experience in Casale Monferrato can be understood as “actions” to enter as active social actors and not passive victims of a disaster, as well as the socio-political processes of the construction of knowledge and power structures.

**Thesis Structure**

On the basis of the theoretical framework and concepts discussed in the previous paragraphs, I present the analysis of my data starting from the process that has determined the environmental disaster of asbestos pollution from the Eternit factory in Casale Monferrato, and how the process was experienced by the social actors.

Next, I focus on the suffering and on the practices undertaken to go beyond the suffering related to the disaster experiences. In my interpretation, “going beyond the suffering” in a context affected by an environmental disaster is a process characterised by the attempts to overcome the private and physical finitude and the loneliness of the dying—and suffering—person (Elias 1999) both at a collective and individual level. It also means to support the potentials that emerge from a suffering condition that does not exclusively concern the body, but also the social context in which suffering is experienced. Going beyond the suffering does not necessarily mean making the experienced suffering meaningful at a private level, but making the suffering meaningful in the social context e.g. by sharing one’s own experiences to help other sufferers and promoting awareness campaigns to safeguard following generations. Going beyond the suffering means not being passively subjected to the suffering, but rather reacting to the suffering.

Finally, I analyse the practices adopted by workers and citizens that have made Casale Monferrato an important context for studying the social struggle against the asbestos and the manufacture of asbestos as a bottom-up process undertaken by various social actors.
**Research Questions and Sub-questions**

My research question is:

How is the Casale Monferrato’s environmental disaster lived by various social actors in relation to political and social actions?

My sub-questions are:

What are the processes and the practices that characterise the environmental disaster of Casale Monferrato?

How do social actors live with a disaster and with the risk determined by asbestos exposure?

What are the practices undertaken by social actors in order to face the disaster?
Chapter 3: Methodology

My Fieldwork Experience

The findings discussed in this thesis are based on the qualitative data that I gathered during the fieldwork conducted in Casale Monferrato over six weeks. In March 2012, thanks to the social network built on by the AFeVA of Bari, I began an email correspondence with members of the AFeVA of Casale Monferrato in order to introduce myself, to consider the feasibility of my research, and to find accommodation. I found also my two gatekeepers among the AFeVA members. They introduced me to other members and to persons who were not affiliated with AFeVA as well. These first contacts allowed me to find a house close to the city centre and to the AFeVA office, where I went daily to attend organized meetings, perform participant observation and interviews. AFeVA members allowed me to use a room in their office for the interviews.

I stayed alone in the house of Piercarlo Busto’s parents. Piercarlo was a young man who died from mesothelioma because of environmental exposure to asbestos in 1988. His family was the first family to denounce the asbestos pollution from the Eternit as the cause of his death; previously, workers’ deaths were only heard about in general public rumours. The house was a comfortable accommodation since I had no car. Although Casale Monferrato is easily to walk around, many of my informants did not live in the city centre or in Casale Monferrato anymore. It was convenient for the informants to meet me in the city centre where they did their errands. The house served as a micro-context for my study and played a significant role in my fieldwork.

The house where I stayed was an old house full of old pictures. There was also a picture of Piercarlo. Perhaps, I slept in the same bed where Piercarlo slept. I lived near the railway station. When the Eternit factory was open, asbestos dust was brought to the plant from the railroad station by crossing the town and passing alongside the building where I stayed. Later, the train was replaced by trucks. A railroad track passed nearby the house and was used exclusively to connect the plant to the station. In both cases, the asbestos dust and asbestos-cement products were transported without covering or measures to limit the leaking of asbestos fibres.

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7 Due to my previous anthropological study on asbestos, I have been actively in touch with the AFeVA of Bari, Italy.
I believe that living in Piercarlo’s family’s house deeply influenced my perception of the environmental disaster experienced by Casale Monferrato’s citizens. Staying there, in a dramatically strategic place, surrounded by furniture and pictures that constantly evoked the past, and served as traces of interrupted lives and relationships, gave me the sense of the tragedy lived by many families in Casale Monferrato due to asbestos pollution.

I do not consider the emotional involvement triggered by living in that home as a source of bias in my data analysis; on the contrary, it represented an optimal view of the emic perspective on the environmental disaster. However, I have to confess that sometimes it was very hard for me as a research instrument (Piasere 2002). Sometimes, living there increased the sadness and discouragement that I felt; other times, it motivated me to be more determined and tenacious in continuing with my research.

I took this picture from the balcony of the house where I stayed in Casale Monferrato. In the past, the railroad tracks used by the train that connected the train station to the Eternit factory passed through this rotary.

Research Methods

The main research methods I used were participant observation and in-depth interviews. I wrote a daily journey with my fieldnotes and included my feelings and any detail that I noticed and considered significant for my understanding of the context. Moreover, I read several books and articles by local writers and journalists to have a more complete view of the past and current history of the civil mobilization linked to A-R issues in Casale Monferrato.
**Participant-observation**

Through participant observation, I observed the community’s life in Casale Monferrato as well as my research collaborators during their daily activities. I attended public and social activities organized by the AFeVA and other local organizations; therefore, I had the opportunity to have many informal conversations with various social actors. Being fully immersed in the local context, allowed me a great opportunity to better situate the practices that I investigated. During public meetings, I took notes and recorded conferences. During informal meetings, like lunches, dinners, walks, and journeys by car, I could not take notes. After these meetings, I wrote my fieldnotes when I came back home.

**In-depth interviews**

The majority of my interviewees were recruited from a list of phone numbers of AFeVA members. In collaboration with my gatekeepers, who understood my research, I created a list of persons who might be available to be interviewed. I planned to interview subjects who could be included in the broad categories of “sufferer from A-R diseases”, “relative of victims from A-R diseases”, exposed citizen”, “unexposed citizen”, “socio-politically involved”, and “not socio-politically involved”. These categories were useful to me when selecting my informants, especially during the first two weeks of the fieldwork. Nevertheless, as discussed in the following chapters, I found that these “categories” overlapped each other and were experienced in many ways.

During my fieldwork, I had 27 formal interviews with various social actors involved in A-R issues\(^8\). The interviews settings were numerous. When possible, I preferred places where informants would feel comfortable speaking about intimate and moving aspects of their lives; accordingly, I privileged private meetings because the presence of others could have influence the informants’ answers. I based my interviews on a list of topics (see Annex 2) and prepared a list of questions as well. However, as a listener I was flexible and favoured the natural flow of the conversation (acknowledging that it had been constructed).

An interview implies a social interaction when two or more actors perform their roles (Riessman 2003). In the analysis phase, I take into account that the data collected have

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\(^8\) See the table in the Annex 1.
emerged from a negotiation process between the “truths” narrated to me, solicited by my questions, and then interpreted by me. During the data collection process, I discussed my narrative interpretations with my research collaborators to improve the quality of the data, be more respectful of their “voice” and achieve a deeper understanding of their point of view. At the same time, I was careful not to become an echo of my informants. My analysis aims to be more than a report of their worldviews (Borland 1998).

I take into account the performing dimension of interviews and that they are a step of a meaning-making process related to the illness or risk experience. I interpret the narratives I heard during my fieldwork, being aware that the qualitative data like life-stories are deeply related to the context in which they are collected and to the subjectivity of the narrator and listener as well (Green and Thorogood 2004).

In order to compare differing experiences, I interviewed persons who had A-R experiences whether they were involved in social and political activities or not. For the same reason, in the analytical chapters of this thesis I compare some aspects of the data collected in Casale Monferrato to those collected in Bari, the context of my previous anthropological study on the illness experience caused by environmental exposure to asbestos.

The analysis follows a grounded theory approach as elaborated by Glaser and Strauss (1967) Although I did not reach a “point of saturation” for new knowledge in my limited fieldwork, I consider the process of the analysis moment “moving back and forward between emerging theory and data” particularly appropriate for my exploratory study (Green and Thorogood 2004:203). I compared data, elaborated codes, and wrote memos looking at the “6 Cs” of social phenomena: causes, contexts, contingencies, consequences, covariances, and conditions (Starks and Brown Trinidad 2007). During the writing phase, I adopted a fieldnotes-centered approach. I combined integrative and excerpt strategies (Emerson et al. 1995) to present an ethnographic text in which the social actors’ voices are recognizable, my theoretical interpretation supported, and my account credible.

**Ethical Considerations and My Role as Researcher**

I guaranteed to respect the privacy of my research collaborators. I explained the purposes of my research and assured their anonymity. Although, I also interviewed persons who wanted to make their story public in order to denounce Eternit—and to have their suffered injustice publicly acknowledged—I decided to preserve the anonymity of the majority of interviewees because their names were not necessary to support my findings. I am mindful of my scientific
responsibilities and the sensitivity of the topics of the interviews and informal conversations; therefore, I decided not to reveal the names of most of my informants so their private stories would not be too “exposed” in the local social context.

I introduced myself as an anthropology student familiar with the matters linked to asbestos exposure and as a member of the AFeVA of Bari, Italy. My personal involvement in socio-political activities related to the A-R illness experiences facilitated my access to research collaborators, because they recognized me as a part of their community (Thomsen et al. 1998). Simultaneously, sharing the same political perspectives on asbestos and having personal links to the suffering caused by asbestos exposure accentuated my empathy. I felt uncomfortable interviewing and meeting social actors who did not share and support the social mobilization against the asbestos and Eternit.

Therefore, I found being a “research instrument” distressing in some circumstances and I tried to find strategies to cope with the effects of my lack of an affective detachment and in the interpretation of my data as well. I am aware that my role as researcher cannot be neutral, but this does not mean that it cannot be scientifically valid—every researcher constructs their “truth” starting from their own body, personal and cultural background, and fortuitous contingencies.
Chapter 4: How the Disasters Happen

Introduction

In this chapter, I discuss the collected data and how the environmental disaster of Casale Monferrato happened. I argue that the management strategies adopted by the Swiss corporation, Eternit (common for all the Eternit’s plants worldwide), have amplified the seriousness of the environmental disaster. In particular, I refer to Eternit’s control of biomedical knowledge about the danger of asbestos and to the promotion of counter-knowledge to prevent asbestos workers to be informed about the risks associated with asbestos exposure. In particular, I refer to the risk of contracting malignant mesothelioma (Rossi 2012).

Eternit’s tactics to minimize and deny the danger of asbestos delayed the awareness of risks, among the workers, and citizens as well. Moreover, Eternit’s plant in Casale Monferrato was not provided with appropriate disposal systems nor there were specific procedures followed to dispose of waste materials containing asbestos. For instance, it was usual practice at Eternit to discharge waste asbestos materials into the river Po. In addition to the air, ground, and water pollution from the production waste, inhabitants of Casale Monferrato and the surrounding area were the recipients of a wide range of asbestos-cement material and products that were given for free or sold at low cost at the Eternit plant.9

In the following paragraphs, I will present the data following the process by which the disaster from the plant came to concern the entire city.

The Disaster in the Plant

The final verdict pronounced by the Turin Court on February 13, 2012 established that Stephan Schmidheiny and Louis De Cartier De la Marchienne violated articles 437 and 434 of the Italian Penal Code at the Eternit plant in Casale Monferrato. Article 434 addresses disaster manslaughter and article 437 concerns the crime of a lack of safety measures in the workplace (Rossi 2012).

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9 To this date, it is still possible to note the massive presence of numerous asbestos-cement products in the city and in the surrounding countryside. It is necessary to consider that the asbestos pollution is relevant not only in the Casale Monferrato area. It represents a problem in Italy and in many other countries all over the world.
On the basis of my interviews and of readings in books and newspaper articles about working conditions at Eternit, I argue that even though the workplace was visibly dusty at an “epidermic level, you could sense that it was an unsafe environment” (Interview nr. 5), the political strategies adopted by Eternit’s managers to minimize and deny the asbestos danger determined a certain “acceptance” of those dreadful working conditions. The construction of such “acceptance”—and the consequent disaster—was realized in distinct ways. I list some of the most recurrent practices narrated to me by my research collaborators.

First, the salary at the Eternit was higher than the salaries offered by the other local plants. Workers and their relatives received practical and social benefits like milk\(^{10}\), oil, Christmas gifts, and even summer camps and scholarships for the workers’ sons and daughters. Workers and former workers were offered thermal treatments (Interview nr. 7).

Second, in addition to a high salary, an *indennità di polvere* (a compensation for the dust) was paid to the workers who were able to demonstrate, through medical certification that they had *polvere* (dust) in their lungs because of working in dusty departments. The Turin Court declared that there were no differences between the various departments in terms of quantity of dust, because asbestos dust was everywhere (Rossi 2012). The Eternit managers decided to divide the departments by plastic panels to limit the diffusion of asbestos dust all over the plant; unfortunately, those panels were completely useless. The former workers that I interviewed explained that the presence of those panels was a justification to acknowledge the presence of asbestos dust only in certain departments, and accordingly, to limit dust compensation only to certain categories of workers.

Third, periodically workers were subjected to official medical controls made by the doctors from the ENPI – *Ente Nazionale Prevenzione Infortuni*, a national organization working to prevent injuries in the workplace. Former workers talked to me about the unreliability of such controls, because even workers with visible symptoms of the asbestosis (generally recognized by doctors subsequently consulted privately by the workers) were said to be symptoms of a “simple bronchitis” (Interview nr. 4).

Fourth, workers were constantly alerted that smoking was much more dangerous than asbestos dust and were advised to stop smoking. An informant told me that once he received a note, with the salary on which he was given this advice.

Denunciations and requests for better working conditions by workers were quickly repressed by punishments and dismissals. For instance, the workers who complained about

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\(^{10}\) Milk was said to be good for removing the dust from the lungs. Workers usually did not drink the milk in the plant, but saved it for their families. In my previous study, I found that giving workers milk was also usual at the Fibronit asbestos-cement factory in Bari.
the hard working conditions were assigned to a department called the “Kremlin”\(^{11}\) by workers. The former workers who I met described the “Kremlin” as a “hell”—a terribly dusty department. In this context of absolute denial about the danger of asbestos dust and repression of dissent, workers were subjected to a real “brain washing” (Rossi 2012). I conclude this section with a quote from an interview with a relative of three victims of A-R diseases; two of them were former workers at Eternit. The informant is an activist at the AFEVA.

My brother and my father never believed that asbestos was dangerous. My father was 89 years old when he died. He saw all his friends and former colleagues dying from A-R diseases, but only after the death of his last friend he doubtfully asked “Is asbestos dangerous?”

After a pause, the informant said in a whisper: “They did not believe that”. (Interview nr. 7) Despite of the denial politics adopted by Eternit, at the end of 1970s, the workers in Casale Monferrato began to mobilize and asked for safer working conditions. The first protests organized by the trade unions faced severe hostility from the Eternit managers and with a lack of support from some workers. The interest of the other citizens in the city was very poor or absent at that time.

**The Disaster at Home**

At Eternit, workers were told that asbestos was not dangerous, accordingly they were not trained to follow practices designed to limit leaking asbestos fibres outside the plant. Workers themselves were vehicles for the transportation of asbestos fibres throughout the city and public places they visited after work, before returning to their homes. For instance, there were no instructions for the workers to wash or leave their clothes in the plant; instead, washing work clothes was a job usually performed by the workers’ wives. Because of domestic exposure to asbestos, many relatives of workers who handled asbestos contracted A-R diseases, in particular, malignant mesothelioma (ISPESL 2010).

I report a quote from an interview made with the son of an Eternit worker.

Because my family lived in San Germano\(^{12}\), before coming back home, my father, on his own initiative, would remove the *polvere* from his work clothes with an air pump. When he arrived at home he looked quite clean, but later you saw… when he combed

\(^{11}\) It was called Kremlin because it was a common opinion that the workers who denounced the hard working conditions were communist.

\(^{12}\) It is a hamlet of Casale Monferrato, 5/6 km from the Eternit’site.
his hair, you saw the *polvere*, you know, backlit, you really saw the *polvere* that was floating around […] Every three days my mum washed his work clothes. She left them to soak during the night, you know, there were no washing machines at those times, and on the following morning, on the water’s surface there was a lot of asbestos like this [he showed me the thickness with his fingers]. There was a patina that she removed with her hands and then she washed the clothes. (Interview nr. 1)

In the early 1980s, in addition to workers’ deaths, the workers’ wives’ deaths began to be counted and denounced by the trade union movement that coordinated the workers’ protests.

**The Disaster in the City**

The Eternit’s plant was situated in the neighbourhood Ronzone that represented the industrial area of Casale Monferrato, until recent times. During my fieldwork, I talked to several people who lived in Ronzone; they told me that there was so much *polvere* (dust) that bikes left a track on the asbestos dust deposited on the street. One lady remembered that her high-heeled shoes sank into the dust. The inhabitants of Ronzone mostly belonged to the working class, and this was the first civil area to sense the asbestos disaster; although, the disaster was not confined to only Ronzone. Asbestos pollution caused by Eternit’s plant was of interest to the entire city of Casale Monferrato and surrounding area. The diffusion of asbestos-cement material and the air, ground, and water pollution occur in multiple ways; even products containing asbestos—and not only asbestos dust as a raw material—are potential polluting sources because of the unavoidable deterioration process and exfoliation of asbestos-cement and the consequent leaking of asbestos fibres (Assennato 2003). One of the main practices that has determined the “uncontrollable, continuous, and enduring” civil exposure to asbestos (Rossi 2012:21) was the diffusion of the so-called *polverino* by donation or low-cost selling by Eternit. The *polverino*, asbestos dust from the production waste, was largely handed over for private or public works.

The absence of disposal systems for production waste created ‘white beaches’ on the river Po (Rossi 2012:95). Illegally, the waste containing asbestos was repeatedly discharged on the Po’s banks until an artificial white beach was created (Rossi 2012). People used to go to this beach area during the summer; children and teenagers played or stayed in the sun on a beach made of asbestos, tranquilly breathing “everything that was present to be breathed”
The asbestos from the Eternit plant contaminated the ground, the water, and the air of Casale Monferrato.

The asbestos, from the quarries, arrived to the train station of Casale Monferrato. Then, it was carried to the Eternit plant by wagons or trucks, crossing the city without safety measures to limit the leaking dust. Although, initially, it was believed that the asbestos issues concerned only the working class, by the end of the 1980s, citizens began to become aware of the danger of asbestos and to mobilize with the workers. The deaths caused by asbestos began to be counted and denounced by people who had never entered or lived near the Eternit plant.

Below, I show a drawing by students in a competition organized by the AFeVA. It well demonstrates the idea of the threat of asbestos that enshrouds and concerns the whole city of Casale Monferrato like the shadow of death.

**Conclusion**

On the basis of the data analysed in this chapter, I argue that the environmental disaster of Casale Monferrato has been a process (Ligi 2009) characterised by specific political and economic strategies. The control of knowledge and the denial politics have been tools through which the power held by the Swiss corporation Eternit has been preserved for 80 years in
Casale Monferrato. In addition to these subtle forms of invisible violence, at Eternit, the violence against the workers was wielded by more visible and cruel actions like assigning “dissident” workers to the “Kremlin”, the dustiest department of the plant, as punishment. The “violence in time of peace” (Scheper-Hughes and Bourgois 2004) was made possible by the acceptance that Eternit’s managers constructed by controlling knowledge and preventing workers from accessing the knowledge about the risk of asbestos.

Although, the polvere was clearly visible in the plant and the surrounding neighbourhood, it was considered “normal” and A-R diseases that initially were due only to occupational exposure, were considered to be “acceptable” in exchange for the high salaries the asbestos workers earned. The deaths of asbestos workers from A-R diseases are the dreadful outcomes of a structural violence (Farmer 1996:261-283; 2005) that originated in the poverty that characterised the countryside of Casale Monferrato post World War II.

In the next chapter, I further discuss how the invisibility of the disaster can be interpreted as a form of violence wielded against the workers and the citizens of Casale Monferrato.

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13 Despite the acknowledged asbestos danger, and the condemnation by the Italian Government, Eternit still owns many plants around the world.
Chapter 5: Experiencing the Disaster

Introduction

In this chapter, I discuss the data and observations related to the disaster experiences of the social actors I met during my fieldwork. I have been attentive to their voices and glances, I have listened to their narratives, and above all I have been there with them, with my body. I breathed the same air, I drank the water that probably still runs through asbestos-cement pipes\textsuperscript{14}, and I walked through the beautiful streets of Casale Monferrato wondering if I was walking near places containing polverino.

In Casale Monferrato, asbestos decontamination began years ago. The workers and civil mobilization have played an important role in soliciting local and national political institutions to remove asbestos in the city. However, despite the removal of a huge quantity of asbestos from the city, considerable asbestos-cement material and products are still present.

Living in Casale Monferrato, although for a very short period of time, has given me the opportunity to understand what living in a context of environmental disaster can mean. I grouped the data collected through the interviews and the participant observation into three areas: space, time, and body. This choice allowed me to organize a large quantity of data about various aspects and perceptions that emerged in relation to the disaster experiences that I observed.

The Space

The asbestos disaster in Casale Monferrato has been characterised by apparently contrasting aspects over the years. The awareness of the risks related to asbestos exposure began to rise in the 1990s thanks to awareness campaigns promoted by the social movement that was spreading during that period.

In my analysis, I divided the data from my research collaborators about the space experienced in a risk situation into two groups. The first group includes stories of living in a space contaminated by the asbestos disaster in the total absence of a perception of disaster; the second group includes stories about the high awareness of living in a contaminated context. I

\textsuperscript{14} It was common to use asbestos-cement pipes for the construction of waterworks in Casale Monferrato and throughout the entire national territory during the 1960s and 1970s. I do not know if the asbestos-cement pipes of Casale Monferrato waterworks have been replaced with asbestos-cement free pipes.
refer to an interview with an AFeVA member, relative of victim dead from MPM because of environmental exposure to asbestos, as an example of the first group.

We have always lived in the central area of Casale Monferrato. I never thought about the plant before the death of my brother. The plant did not exist for me; it belonged to another world far from mine. The plant itself looked far from the city. Did you remember the polverino? No! I have never seen this polverino. I did not know what it was. And do you remember that the city was particularly dusty, as other informants told me, especially in the Ronzone neighbourhood? No. The only thing that I remember is that when my grandmother came to visit us from another city she said that the quantity of dust made in a week at her home was the same quantity of dust made in a single day at my home. I remember only this. But it was common dust! You did not think that it could be different from the usual dust. I did not remember the trucks that carried asbestos-cement material and products either. You did not notice them, because they were common trucks, why would you pay particular attention to normal things? (Interview nr. 9)

The asbestos dust was in the city, it was even visible in some areas of Casale Monferrato, but it was perceived as “normal”, not dangerous, and therefore “something on which you were not expected to put particular attention”. The “normality” made the danger “invisible”(Henwood et al. 2008:421-438). Even the plant, situated in the Ronzone neighbourhood, was considered invisible despite being more than 90.000 m² and the presence of daily deliveries that crossed the city between the plant, the train station, and the department store.

Various informants told me that the industrial area was considered an area where you could go to walk, stay in the sun, and breathe fresh air. “In the 1960s we went there during our school break. We were teenagers, we spent there our free time chatting and playing near the plant”. (Interview nr. 16). The invisibility of the disaster was broken by the workers and civil mobilization that forced the city to finally “see” the asbestos danger and the seriousness of the disaster caused by Eternit. Casale Monferrato inhabitants have been forced to look at and perceive the places of their daily life, memories, and environment as the most dangerous and risky place for one’s health. Such awareness is linked to one kind of suffering caused by the asbestos pollution from the Eternit plant that I discuss further in the next chapter.

At this point, I focus on how the acquired knowledge about the asbestos danger has been fundamental in influencing—and determining—the disaster experience.

I report a quote from my fieldnotes.
You can breathe the environmental disaster here. You cannot avoid thinking about the asbestos. The wind, but also the water, the ground (the asbestos dust was used to fix the streets) were channels through which asbestos fibres affected the whole city. Furthermore, there still are a significant number of Eternit products (especially Eternit roofs) all around; some of them are potentially dangerous. If you are aware, you immediately think of being at risk! Living in these circumstances is very distressful!

I arrived in Casale Monferrato on May 14th; it was spring. In the air floated a great deal of pollen.

Even to open the window led me to thinking; immediately, I think to the period of time in which together with the flower dust [pollen], the asbestos fibres floated in the air and entered your home, laying on everything, hooking into you, laying inside you without any possibility of being alerted. This invisibility is atrocious.

The air and the wind are vehicles by which asbestos fibres left the plant and floated across the whole city.

During my fieldwork I interviewed the wife of a man who died from MPM because of the environmental disaster; she is socio-politically engaged in various activities related to asbestos issues, even those organized by the AFeVA. Every year, she writes a letter to the local newspaper *Il Monferrato* on the anniversary of her husband’s death. She told me: “This year, I decided to end my letter with a quotation… I cannot remember the name of the author, but the sentence is: I am at home and I scream. I am at home and I scream… do you understand it?” (Interview nr. 6)

### The Time

*All of us are time bombs!*

(From an informal conversation with a young man from Casale Monferrato)

Often, in the narratives of my research collaborators, time assumed an important role in the meaning-making process (Good 1994) of their disaster experiences. Time does not represent only a framework to separate a life before and after the disaster experiences, because the disaster and the related experiences are continuous over the time. Time became a “parameter” to understand the A-R illness experiences, and to take action. Moreover, time characterises the disasters caused by asbestos pollution in relation to the long latency-period of malignant mesothelioma. Such disasters are slow and enduring.
I report a quote from an interview made with a young university student, who is involved in the AFeVA activities and who is the son of a woman who died from MPM because of environmental exposure. I met him on May 29, 2012. During the morning I did two interviews, the first with a former worker suffering from asbestosis, the second one with the student. A-R disease experiences overcome social class, age, gender, and space. Any person can be the next victim.

When I came back home, I opened the window of my bedroom and stood there, enjoying the fresh air. It was a nice spring early afternoon. I noticed a girl and a boy, teenagers, coming back home from school, who were kissing in the garden in front of my home. They were kissing, holding the hands, smiling, and whispering words. Three or four times they walked in opposite directions, but immediately they came back close to each other. I was looking at them, enraptured by the sweet gestures and glances, but suddenly, I remembered what the university student told to me about his mother.

Due to the long latency period, this disease is an incredibly cruel thing. Most probably, my mother contracted the disease when she was 14-15 years old. If we retrace the history of her life, we realize that this woman studied, had friends, fell in love, built a family, worked, and was active in various areas. Meanwhile she was doing all these things, she already had a micro fibre, invisible to the naked eye, and it had already condemned her to death. I think that this is the aspect that leaves you more dismayed when you discover having such a disease. It basically is a death condemnation that is pronounced, I use a judicial term, in contumacia [in abstentia], that is the absence of the person in charge, and then it happens after 30 years, when you have built a life.

This is the aspect of the mesothelioma that leaves me absolutely devastated, it is a time bomb with the timer set on a real precise moment, more or less in half of your existence. (Interview nr. 5)

I could not avoid thinking that only a few years ago boys and girls, with the same desires to live, to love, with dreams for the future like the two young persons in front of my window, were exposed to asbestos and were absolutely unconscious of the risk in which they lived.

Many of my informants used the image of a “time bomb” to explain their own or their relatives’ disaster experiences. Having breathed asbestos fibres, knowing that you have asbestos inside your lungs affects the way you think about your existence. For instance, in terms of “being out of risk” because you have more than 30-40 years from your first exposure to asbestos, or “being at extreme risk” because you were a teenager during the 1960s and you see that many of your friends and acquaintances are dying from mesothelioma.
Time is directly related to the cause of “social suffering” (Kleinman et al. 1997) occurring in Casale Monferrato. Eternit was chosen as the name of the factory because it recalls the concept of eternity. The asbestos-cement products were promoted because they could not be destroyed, they were presumed to be “eternal”. In the emic reconstruction of the disaster by local journalists and writers, the links between the eternity of the asbestos and the permanence of the disaster are often taken into account.

**The Body**

Subjects experience the asbestos disaster through their bodies; at the same time, their perception and how they inhabit their body can be influenced by the disaster context. I report a quote from an interview with an exposed citizen relative of three victims of A-R diseases.

Periodically, I have lung X-rays. Last year, I knew the doctor; he called me. I was worried, because here if doctors call you after the visit you have to worry, but he reassured me; he said, “I wanted only to show you a thing. Look! Do you see that white line around the lungs?” Yes, but… what is it? “It is the polvere from Eternit… here all of us have it. Everybody from Casale who does lung X-rays can see that line”. I was surprised. All of us are in the same condition, all of us have at least a little bit of polvere; but there is somebody who has weaker lungs than others do, somebody who is more predisposed than others… and he or she contracts the cancer. In contrast, there are people like me… to this day, I am fine, maybe this is due to the fact that I have never smoked, I have always lived in the countryside, now I live in a small town, I have always lived in the countryside…Also my dad has always lived in this way, but later he went to… Eternit.

_Questa polvere si annida dentro_ this polvere nests inside you. I remember that a lung specialist said to my dad that he had a particular way of breathing. If a normal person inhales 100 times in a minute, all members of my family inhale 50 times in a minute because we breathe more slowly than others do, but we inhale a lot of air. Maybe, this is the reason because three members of my family departed... We breathe tranquilly and we inhale everything. (Interview nr. 1)

There are some relevant points emerging from this quote. First, the awareness of being exposed to the risk of contracting an A-R disease, in particular malignant mesothelioma can lead one to “periodically have medical controls”. My impression in listening to the narrative of my informant was that he screamed terribly every time he had a lung X-ray, because he
thought that the diagnosis of malignant mesothelioma would come sooner or later. Moreover, the time and the practices related to such medical practices have “hospitalised” the ways in which my informant thinks about his body and the bodies of his relatives as well.

In particular, I noticed how the authority of the biomedical explanation of the differences among various ways of breathing was pervasive and accepted by my informant. Rethinking your body in order to make the deaths occurred in your family meaningful and considering that one’s breathing system is a possible “justification” for those deaths reminded me of the authority of the counter-knowledge elaborated by Eternit’s managers who tried to convince the workers that smoking was more dangerous than asbestos dust and invited them to stop their “bad habit” of smoking. I interpret both cases as attempts to shuffle off the causes of a socially determined suffering on the individual body and life-style.

Another aspect that emerged from my research collaborators narratives was the “violence” caused by the asbestos disaster on young and healthy bodies; this aspect influences the individual and collective elaboration of the stories related to the disaster and stresses the devastating effects of the A-R diseases on the body. Some of the AFeVA members, who have had direct and personal knowledge of the “world” of the plant, described the physical conditions of the Eternit workers. “I saw these young men in front of me, who lost their breath going up the stairs of the Camera del Lavoro (Room of the Labour), they arrived in front of me blue in the face, and they asked me: Doctor, will I really die so young because of this polvere?” (Interview nr. 16)

Eternit workers looked older that those who did not work in the plant; the hard working conditions and the asbestos dust that they were forced to breathe transformed the healthy bodies of the young ‘human resources’ into sick bodies, and deprived them of breath. The breathlessness was another recurrent element in the narratives concerning the body experience in the environmental disaster of Casale Monferrato. Even Piercarlo Busto was out of breath because of the asbestos that he breathed during his daily jogs near the plant. The death of Piercarlo Busto was considered as the emblem of a young body usurped by the asbestos from Eternit. Piercarlo was a sportsman, the secretary of the local basket team, and a fitness buff. His sister, who is an AFeVA activist said during an interview with a journalist: “He did not allow anybody to smoke at home; he did not suffer the smoke. Everyday, in each season he run along the banks of the river. Everybody in Casale knew him. I am sure that in another city he would have lived for a long time and became aged” (Iocca 2011:123-124). Instead, Piercarlo died when he was 33 years old.
I conclude this paragraph with some verses of a song written by Piercarlo’s friend. The translated title is “Banks”: Pica was strong, athlete’s lungs / And the soft pace, like the silk / You, warrior, run towards the life / Nylon shoes like a steed / But when the enemy backstabs you / It bandages your throat like a shawl / It does not leave time either to laugh either to cry / It wears only by dust and asbestos (Iocca 2011:126).

**Conclusion**

On the basis of the collected data in Casale Monferrato and my previous study in a second context of environmental disaster caused by asbestos pollution, I argue that many kinds of “disasters” can occur in one context because there are various experiences and factors that characterise a disaster. Furthermore, the absence of the awareness of “living exposed” (Petryna 2002) can be interpreted as a factor that has worsened the disaster and as peculiar element of the environmental disaster caused by asbestos pollution because of the invisibility of the cancer-causing factors—the asbestos fibres. The absence of risk perception related to the asbestos danger made even the plant and the surrounding area appear to be a safe and normal place for the citizens.

I interpreted the practices and the strategies adopted by Eternit through the theoretical concept of the “structural violence” (Farmer 1996:261-283; 2005). The violence wielded on workers, citizens, and the environment was possible because it was legitimised by an acceptance that emerged from the poverty of the workers, and by the political and social consensus towards a corporation that assured good salaries and riches for the city.

A-R diseases and deaths occurred among the citizens and the workers, the theft of the time, the angst moulding the memories linked to the childhood and the youth, in my analysis, can be read as expressions and actions of a violence wielded “in time of peace” (Scheper-Hughes and Bourgois 2004).
Chapter 6: Suffering and Going Beyond Suffering from Asbestos

Introduction

The traumatic event of the environmental disaster caused by Eternit has determined, and still determines, various kinds of suffering. The peculiarity of the Casale Monferrato context resides in the various strategies adopted by asbestos-exposed citizens, victims and their relatives coping with the “critical event” (Das 1995). These strategies, coordinated with the significant experience of workers and civil mobilization, made it possible to achieve important goals in the socio-political context. Taking into account the variety of ways in which suffering caused by the environmental disaster has been and still is experienced by citizens, it is necessary to also consider the variety of the strategies adopted to go “beyond the suffering”.

In this chapter, I discuss the data collected during my fieldwork concerning how the social actors I met experience the disaster. I base this chapter on narratives of sufferers from A-R diseases, their relatives, and asbestos-exposed citizens. To better organize my data, I group the narratives by main subjects, although I am aware that the suffering I discuss is a social experience. Therefore, I theoretically “isolate” three categories of subjects and experiences that are strongly intertwined.

Going Beyond Suffering as a Victim

Sufferers from Asbestosis

Before starting my anthropological fieldwork in Casale Monferrato, I expected to find many sufferers from A-R diseases who were socio-politically involved, especially in AFeVA activities. On the contrary, during the first weeks of fieldwork I was surprised that most of the AFeVA members were relatives of victims, and not “victims” themselves. Later, I understood some of the reasons for this.

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15 I use the term “victims” in the sense used by my research collaborators. They consider “victims” as only people who have died or who are physically suffering from A-R diseases, and not themselves, even though they are also suffering from the disaster experiences.
As I wrote in the first chapter, asbestosis and mesothelioma are two of the most widespread—and acknowledged—A-R diseases. Asbestosis is a serious disabling disease, but to date, it is not considered a life-threatening disease. Since the disease is almost exclusively occupational in origin, it is significantly decreasing in Italy where asbestos and its manufacture has been banned since 1992.

During my fieldwork I interviewed four asbestosis sufferers and all of them were former workers at Eternit.

My only problem is the asbestosis. Going up the stairs causes me great fatigue, but I am alive. I am lucky because I should not be at risk to get mesothelioma anymore… more than 30 years have passed… (Interview nr. 8)

Asbestosis is conceived as a disease that allows you continuing to live, although with physical impairments. All of the sufferers from asbestosis who I interviewed were engaged in the trade union movement, and later became active members of the AFeVA. The socio-political practices that characterise their suffering are deeply moulded by their engagement in the workers’ mobilization in Casale Monferrato. These men and women have a strong working class awareness. Their narratives, memories, relationships have been elaborated within the plant and, later in the context of the struggle against asbestos.

I noticed during the interviews that there were recurrent topoi (common themes) in their narratives, and the subjective dimension of their stories hardly emerged; therefore, I was careful to ask them questions to solicit answers related to their subjective experiences. I claim that the most relevant meaning that the respondents attributed to their personal stories and suffering was to denounce the danger of asbestos. I quote an interview with a former worker who wears his work clothes in every public occasion.

Why do you wear your work clothes at any kind of public event?
Because I want citizens to know that Eternit was dangerous; I went to the judicial audiences wearing those clothes because their lawyers also knew that somebody who has worked at Eternit is still alive and does not forget what they have done. (Interview nr. 3)

Another former worker, after learning that a student was doing interviews about A-R issues in Casale Monferrato, asked AFeVA members to contact me because he wanted to narrate his story.

Please, write in your thesis that asbestos is dangerous and it must been banned in every country of the world. People should know that I have been fighting for a long time to achieve justice. Nobody alerted us that asbestos was lethal. (Interview nr. 2)
In front of me, there was a 74 year-old man, who with his feeble voice and breathlessness caused by asbestosis, felt the urgency to talk to me and denounce the danger of asbestos. That encounter, like the ones I had with other former workers, led me to think about how deep the role of the workers and civil mobilization was in making the suffering bodies of the former workers living testimonies of “structural violence” (Farmer 1996:261-283; 2005).

**Sufferers from Malignant Mesothelioma**

In contrast to asbestosis, mesothelioma is an incurable cancer according to current biomedical knowledge[^16]. Moreover, mesothelioma is often diagnosed when it is already at an advanced status because it is asymptomatic for a long period of time. After a diagnosis, the estimated lifespan is very short and the person’s quality of life is bad.

The peritoneal mesothelioma is so dramatic because you have some liquid in the abdomen, and he was treated with a paracentesis every four or five days in order to withdraw five or six litres of liquid. That liquid that you remove is not water, but it contains indispensable substances for the life, therefore every time that they removed the “water”, they removed a piece of his life; in fact, he survived only 50 days. He had seven paracentesis in 50 days. (Interview nr. 7)

Furthermore, physical pain and impairments can make daily activities impossible. On the occasion of my previous study on A-R illness experiences, I met various people suffering from mesothelioma. In particular, I remember the meeting a woman who died five months after our first meeting. She described to me how agonizing her pain was and how she was desperate because she could survive only by depending on others.

I was a strong and active woman; today I am a larva. The pain does not fortify you; instead it destroys you. For this reason they used torture against populations during wars. The chemotherapy is devastating; it makes me feel so bad. When you go there—*to the hospital*—you see the death into the eyes of the others. If somebody that you usually meet is not present, you are terrified to ask the reason for her or his absence because he or she could be dead, and you suddenly think when you will die as well. […] The pain becomes physically and psychologically chronic. When I think to the chemotherapy, I have panic attacks through all my body. I perceive death… It is not easy… you want to scream, but you cannot do it, and then… you cry.

[^16]: I was informed of this status by Dr. Degiovanni during a formal interview.
Looking at these data, to be socio-politically involved can be reasonably considered very hard, if not impossible. This is the first reason that I found to explain the absence of mesothelioma sufferers among the AFeVA members during my fieldwork. Mesothelioma causes serious physical pain and it is a cancer without a cure. These characteristics lead the majority of my research collaborators to conceive or have conceived a diagnosis of mesothelioma as a death sentence. I noticed that in particular the AFeVA members used this metaphor to speak about mesothelioma.

The diagnosis itself is a condemnation; it is a death sentence. The death comes in the exact moment in which you receive the diagnosis. The eyes become dull. You renounce life. You wait for something that is inescapable. (Interview n. 27)

The impossibility of cure was the first of the main characteristics that my informants mentioned in talking about mesothelioma, and this aspect distinguishes mesothelioma from other cancers for which a cure has been found from their perspective. On the basis of my data, even people more “combative” in relation to their illness, considered the diagnosis a condemnation and constantly conceived of their life as “remaining time” or “more time” to their estimated date of death.

Perceiving the mesothelioma’s diagnosis as a death sentence can trigger the practices of non-disclosure investigated by Gordon (1991:137-156) in a clinical context during the 1990s in Tuscany. Non-disclosure follows a logic that a cancer diagnosis with a bad prognosis is equivalent to certain death and hopelessness (Gordon 1991:138).

Silence about mesothelioma has been another aspect of mesothelioma experiences that surprised me and I did not expect to find it in Casale Monferrato where citizens are currently well informed about A-R diseases, and in particular about mesothelioma. Before my fieldwork, I considered the ideal way of experiencing A-R diseases as an “expression” of this high awareness and knowledge For instance, I expected to meet many mesothelioma sufferers who openly lived their illnesses and were involved in AFeVA activities. On the contrary, I only met two mesothelioma sufferers and they were not actively involved in AFeVA.

I asked a long-standing AFeVA volunteer what were the reasons for the absence of mesothelioma sufferers in the association. She answered me that there were no mesothelioma sufferers because people who had made their illness a “denouncing act” against Eternit were dead. In general, few mesothelioma sufferers had been actively involved in the association. The name of the association is emblematic; actually, the name of the association AFeVA emphasizes the role of the relatives. This should have given me better—and closer to reality—
expectations. Nevertheless, I was still surprised by the low presence of mesothelioma sufferers who were socio-politically involved in AFeVA activities. My surprise was also determined by my previous research with the members of the AFeVA in Bari; many of whom were mesothelioma sufferers. Accordingly, my immediate—and simplistic—reasoning was that if in Bari I had met many mesothelioma sufferers participating in AFeVA activities, then in Casale Monferrato I should meet a larger number of victims because of the size of the environmental disaster and consequent media and social attention to the mesothelioma experiences, especially at the local level. I was wrong.

During my fieldwork I interviewed only two mesothelioma sufferers and both of them were not involved into AFeVA activities. Moreover, in contrast to my expectations, from the various illness narratives that I heard, “silence” has emerged as a coping strategy to face the “critical event” (Das 1995) represented by mesothelioma. I consider Gordon’s (1991:137-156) anthropological “reading” of the practice of not informing others about a cancer diagnosis with a poor prognosis as relevant to the mesothelioma experiences I investigated. Relatives of people who had died from mesothelioma justified their “silence” about the diagnosis as a strategy to preserve hope, not to cause a further pain, and to protect the victim.

To date, from a biomedical perspective, mesothelioma is an incurable cancer in the sense that you cannot remove it from your body. Accordingly, caring assumes or can assume various meanings and practices that are inexorably linked to the cultural, social and subjective circumstances (Gordon 1991:137-156). Because biomedical knowledge fails to provide a cure and meaning (Kleinman 1980), people experiencing mesothelioma in their family are “forced” to look for other strategies to care for a mesothelioma sufferer. Taking care of somebody is socially experienced and can mean offering him or her hope in culturally determined ways. Protecting the silence with somebody can be conceived as a strategy to preserve the hope (Gordon 1991:138-139).

In my research collaborators’ stories, I found many forms of “protection” towards their relatives or friends suffering from mesothelioma. The silence is conceived as a tool to protect the person who is ill. The unsaid truth that made the Casale Monferrato’s disaster so terribly cruel and prolonged is often considered as necessary and as an expression of love in the private dimensions of the illness experiences.

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17 I discuss some of the main differences between the AFeVA of Bari and the AFeVA of Casale Monferrato in more depth in the next paragraphs. The comparison can be useful to better understand the peculiarities of the AFeVA of Casale Monferrato.
Non-disclosure of the exact diagnosis can be also justified by the belief of relatives and doctors that patients do not want to know or do not have the necessary psychological strength to face the bad diagnosis (Gordon 1991:138-139).

We never openly talked to him about mesothelioma. Perhaps, he knew, but we never overdid it, we never insisted on it. He saved the hope to get well till a few months before he died. By not talking, he could deceive himself. There are people who become empowered by knowing it, but he was the opposite… he would have been more depressed. (Interview nr. 19)

I did the interview nr.19 with the son of a former worker at Eternit, dead from pleural mesothelioma in 2003.

He read in Il Monferrato about the deaths of his former colleagues and old friends. He said that he had worked with them, but he did not want to talk about the risk to contract mesothelioma. He had always lived with this burden till mesothelioma finally appeared, but we never talked about that. (Interview nr.19)

In the beginning of my fieldwork, it was hard for me to understand this peculiar aspect of a relevant number of mesothelioma experiences. I asked myself how it was possible for people who knew they had been exposed to asbestos and with a more or less deep knowledge of mesothelioma symptoms not to recognize the disease when it directly—and bodily—concerned them. The “silence” does not characterize only the illness narratives about experiences lived 20-25 years ago, when the risk perception and the knowledge about mesothelioma were very poor among citizens in Casale Monferrato. The “silence” characterises even some stories that concern recent times and persons well informed about mesothelioma.

In my opinion, he knew it, but he never talked to me about that, because when he realized that he was not self-sufficient anymore, he withdrew into silence, he never talked anymore, but in my opinion he knew that. (Interview nr. 7)

I did interview nr.7 with the relative of two victims from A-R diseases. This particular quotation is about the informant’s brother who was a former worker at Eternit and died from peritoneal mesothelioma in 2004.

Sometimes, the doctors have been silent about the diagnosis. The silence allowed them to continue performing their paternalistic and protective role (Gordon 1991:138), and to preserve the power in their institutionalized relationships with the patients.

Her doctor denied the mesothelioma. After the first analysis of the pleural liquid, the presence of mesothelioma cells was certified and characterised by a “strange
behaviour”, but when the doctor gave us the report, he said that there was no mesothelioma. The doctor denied that, I think that it was his behaviour towards those kinds of circumstance. Probably, if somebody asked him if he knew it, he would admit it, otherwise he did not say anything… this is a hypothesis of mine. (Interview nr.7)

Other times, relatives have been encouraged by doctors to keep silent about the diagnosis.

The doctor said to me that the best thing that I could do was not to say anything to him because there were no cures. The chemotherapy would have been devastating and the operation too dangerous at that time. So, I accepted his suggestion and I did not reveal the diagnosis to him for a long time […] Later, when I communicated him that he was suffering from mesothelioma, he asked me how I could have born that burden; but he also said that mesothelioma was the last thing that he expected to have. He was not expecting that anymore. Because he had pain in the abdomen, he was convinced he had a liver cancer, insomuch as he had removed it… despite this he never stopped coughing for a single day. (Interview nr. 12)

Looking at my data, such “silent practices” occurring in a context characterised by a tenacious struggle against the political strategies addressed to maintain the “silence” about the disaster, are deeply related to cultural and subjective circumstances. Moreover, I take into account the value and the meaning of the silence when it overcomes the limits of language that can be “disrupted” by extreme suffering and pain (Scarry 1985) and leaves room for an empathic communication among bodies. Certain kinds of knowledge do not need words to be understood (Gordon 1991:146).

The first sufferer from mesothelioma who I met in Casale Monferrato was a woman, 53 years old and upper-middle class. She received her diagnosis seven years ago. She contracted mesothelioma because of environmental exposure, but she does not know exactly what was the source of the asbestos fibres that caused her cancer. She told me that she discusses possible polluting sources with other mesothelioma sufferers. “Asbestos was everywhere, but we brick our brains in order to understand where we breathed the killer fibre”. (Interview nr. 10)

The asbestos was everywhere, but not visible. The workers at Eternit could sense that the dusty workplace was unsafe. “At an epidermic level, without having specific competence, you could understand that there was something dangerous”. (Interview nr. 5) On the contrary, exposed citizens did not perceive their risk because there were no signals that alerted them about the risk. I claim that the differences between environmental and occupational exposure
play a relevant role in characterising the A-R illness experiences and the strategies undertaken to cope with them.

My first informant sufferer from malignant pleural mesothelioma (MPM) is considered an “atypical” case of long-term mesothelioma survival by local doctors and citizens. She was personally informed about her cancer diagnosis.

I stood in the corridor, alone, at the door of the doctor’s room. He harshly told me that I had mesothelioma and an expected life of four or six months. (Interview nr. 10)

In this case the patient was directly informed, but the silence had been broken with “violence” from someone who held power and knowledge––the doctor. The sufferer perceived the moment of the disclosure as rude and violent. However, she has been really empowered by knowing her diagnosis; thanks to her acquired knowledge and personal economic means, she has been able to follow experimental trials that have allowed her to survive for a long period of time. She has been able to continue to actively play the “protective role” of the mother towards her sons (Gordon 1991:147).

I revealed my diagnosis to them only one month ago. Before, they were too young. I kept silent about my disease up to now, I lied to them, I said that I had backache, or that I felt tired and I needed to have a rest when the pain was less tolerable. But now, I had to reveal to them that I was suffering from mesothelioma. My husband disagreed with me about this decision. But now, my body did not react to the last cures, it seems that it––the mesothelioma––has started to grow… again… I cannot be included in new experimental trials… the protocols are closed. Moreover, my body is not the same body of seven years ago… it is devastated. (Interview nr. 10)

In this case the sufferer decided to keep silent about her cancer, but only with her two sons in order to protect them.

How could I tell them that I had mesothelioma? At school, teachers explain what mesothelioma is; they would have suddenly thought that mesothelioma meant certain death for their mum. (Interview nr. 10)

Her decision has been paradoxically determined by the “surplus” of knowledge that her sons had about mesothelioma. As I observed during my fieldwork, in the area of Casale Monferrato public and private schools organize many activities in order to sensitize the new generation about A-R issues. The social context erupts in a private relationship between a mother and her sons. The will to maintain her sons’ safety has been realized through her silence. Another informant told me that his mother did not say anything to him or his brother about her mesothelioma. “It is considered a strong obligation, in social relationships, to avoid
causing displeasure to others” (Gordon 1991:146). In particular, the role of the mother is
culturally and socially constructed on the image of being “strong, protective, and selfless”
(Gordon 1991:147); it is the mother who alone bears the burden of her suffering.

Nevertheless, sometimes the silence needs to be broken in order to cope with the
upsetting experience of mesothelioma. Occasionally, the silence is broken only “outside”, far
from the domestic and intimate space of a person’s home or after the departure of a beloved
one. Other times, it is not broken by words, but only by caresses and glances. My informant
decided to break the silence only outside her home.

I have known hundreds of persons. They called me, because the town is small and
everybody knows that I am a long-term mesothelioma survivor. People ask me
information about the experimental cure that I followed; we talk about the effects of
various therapies. (Interview nr. 10)

I asked this informant if it was harmful always talking to other persons about her cancer. She
answered me:

At home, I have never been able to talk about my disease because my husband did not
accept that and I revealed the diagnosis to my sons only one month ago. Therefore, for
seven years, because I had no pain, and I did not feel bad I have talked about my
cancer with the friends, with people that I met in order to buttare fuori la bestia che ho
dentro—throw out the beast that I have inside me.

I have known hundreds of sufferers like me. Some succeeded with the cures,
others not because they received the diagnosis too late. To me, talking to people who
listen and understand you is an important support. I was alone in front of a door where
they said me that I had four or six months of life, therefore I can understand these
people, because until you are personally involved in these situations, you cannot
understand from the outside. We sufferers understand each other, because we are
upset, the world falls apart around us, you are forced to completely change your life.
The outsiders cannot understand what you are forced to be subjected to, what are your
hopes. Sometimes, after conversations with other patients I feel a little depressed, but
during the conversation I try to encourage them. Every week I talk to at least two or
three patients, also from other cities. I spend lots of hours talking by phone. (Interview
nr.10)

The impression of being understood only by who has experienced your same disease is
common; for instance, recent anthropological studies have investigated how through the
internet people share feelings and practical information about their intimate illness experiences only with people who suffer from the same disease (Thomsen et al. 1998).

The second sufferer from pleural mesothelioma that I met in Casale Monferrato is a man who was diagnosed in 2009.

I did all the medical controls alone. I did not talk to anybody about them, but the day I was treated with the thoracoscopy the doctor asked me if there was anybody with me. I said no. The doctor said that he could not let me come back home alone and drive. So, I was forced to call my son. In his presence, the doctor communicated the diagnosis to us. My son was shocked; he was almost dead. Instead, I said ok, but I am not already dead! It is hard to kill me! The relatives feel worse than the sufferers, because they know the diagnosis and the outcomes. You know, there is no remedy. Before, I never thought that I could have such combative reaction. I used to say that I would have preferred to die if I had known I had cancer in order not to give troubles to anybody. I would have never have thought that I have this personality… you find it when you need it. A cousin of mine says to me that I play a combative role in public, but I am dying inside. I reply that you cannot play a role all the time. (Interview nr.13)

Several interesting points emerge from the quotation above. My research partner is a sufferer who stands in contrast to the common image of the sick person, weak and desperate (Gordon 1991:138-139). Due to this discrepancy, he needs to explain and almost justify his reaction to his cancer. Later in the conversation he said to me that he had no problem talking about his experience; instead, he was happy to publicly offer his image of a healthy sufferer from mesothelioma to “give hope to other citizens of Casale Monferrato”. (Interview nr. 13)

Nevertheless, this man kept silent about his diagnosis until he was forced by the doctor to involve his son. He wanted to protect his relatives from “knowing that”, because otherwise they would have felt worse than he did. Again, the silence was conceived as a tool to protect the others, to not cause suffering to the others.

Both of my informants who suffer from mesothelioma do not join the activities organized by the AFeVA. The second one is a sympathizer, but the first one disagrees with the socio-political strategies adopted by AFeVA.

I do not share their ideas. I do not like their political actions. They did a big mistake when they prevented the Mayor from accepting the money from Schmidheiny18. That

18 My informant referred to the offer made by Stephan Schmidheiny in exchange for the withdrawal of the municipality of Casale Monferrato from the lawsuit. I will discuss this further in the next chapter.
money could be used to fund the medical research for a cure for mesothelioma and to remove the asbestos that it is still present in our city. (Interview nr. 10)

I perceived in her words the desperation of a person who is aware she does not have enough time to live and who is distant from the values that characterise the AFeVA. Through practices that differed from those adopted by the AFeVA members, my informant decided to undertake social actions linked to her cancer experience. For instance, in addition to her communication with other sufferers from mesothelioma, she organized a medical conference about mesothelioma two years ago in Casale Monferrato and she attends various fundraising events for biomedical research on mesothelioma treatment.

**Going Beyond Suffering as a Relative**

“After seeing such suffering, you have to do something. If you do not do anything, you feel guilty… it is like leaving them—the victims—without burial” (Interview nr. 27)

I start this paragraph with sentences written by a journalist and writer from Casale Monferrato. She has always been attentive to the disaster and periodically writes articles about the local and international news concerning the asbestos. She has also written a book in which stories linked to the environmental disaster of Casale Monferrato are presented through the direct voices of the actors. She can be considered a citizen who is socially and publicly involved in a civil mobilization against asbestos and Eternit. In March 2012, her husband, the editor of the local newspaper *Il Monferrato*, died from pleural mesothelioma. She wrote and sent a public letter to *Il Monferrato* on March 23 2012, after the death of her husband.

A few days before his departure, he said me: “A wonderful thing happened to us: we fell in love. But also a tremendous thing happened to us: mesothelioma came to separate us”. I “breathed” with Marco for 434 days and nights of harrowing anguish, that anguish that enters your heart and makes your eyes dull since you receive this bad diagnosis. I tried to breathe for him, but mesothelioma beat me.

Many of my informants were relatives of victims of asbestos. As I previously wrote, the majority are not used to refer to themselves as victims from asbestos. I respect their emic perspectives about their subjectivities inexorably conditioned by the suffering caused by their exposure to asbestos. I do not refer to them as victims, but rather as sufferers from asbestos in a distinct way.

Suffering does not necessarily belong to a single person; it can be taken on by another and become collective (Gordon 1991:137-156). Suffering with somebody that you love can
mean not only worrying, but also upsetting your entire existence. On the basis of my data, I argue that it is the usual talking about a relative’s mesothelioma as a disease that concerns you. “Mesothelioma beat me” as Silvana Mossano wrote. Moreover, the desperate research for a cure or a treatment is usually undertaken by a husband and wife together. Sometimes, the illness experience totally involves and disrupts the relatives’ lives. The following quotation is from an interview that I did with the sister-in-law of a victim. She decided to take care of her relative by completely abandoning her usual life. She decided to dedicate her life after retirement to her sister-in-law. Now, she is one of the most active volunteers in the AFEVA.

She died four years after the diagnosis. Her doctor told me that he was convinced that she would have lived for a long time because I left everything, I changed home and moved to Casale… the doctors said me that the only thing that I could do was to stand by her, and I did that. (Interview nr.7)

The illness experience “disrupts the world” (Scarry 1985), not only the world of those who suffer bodily, but also the world of those who surround the ill or dying person. It is an experience that is culturally and socially lived (Kleinman 1980). Accordingly, the consequences of an illness experience, particularly of the extreme episode of the death of a beloved one, can have devastating effects on the “survivors”.

I do not know how to say it… this thing, happened at the end of my occupational life, made me really… I do not know how to explain it… it really crumbled me. I had always lived far from Casale and I have never been involved in city life. Yes, I knew that my father and my brother worked at Eternit, and perhaps, before them I knew that Eternit was dangerous, but it seemed to me impossible that something that would later devastate my family could hit it. Only later… and it really disintegrated me, because everything that happened before belongs to another life, and now, in this life. How can I say? I am not constructed inside anymore. Before my life was constructed, now I am disintegrated. (Interview nr.7)

Social relationships have been disrupted by the asbestos leaks from the Eternit plant. People have been forced to renegotiate the meanings of their lives, to change plans, to think about the future in a different way. Losing control over one’s own usual existence can represent a suffering for the relatives of the victims. Such suffering can manifest in various ways. In addition to depressive feelings, and sense of helplessness (Granieri 2008), there is also a sense of guilt.
The son of a woman who died from pleural mesothelioma because of environmental exposure to asbestos talked to me about the “unfair, but unavoidable” sense of guilt felt by his grandparents.

They decided to leave Turin and to move to the countryside near Casale Monferrato. They thought that the air was better in the countryside than in the industrial city of Turin.

They did not know that the asbestos was dangerous, that the area of Casale was contaminated. Their daughter, my mum, used to play volleyball in the same neighbourhood as Eternit in a gym whose floor was made from polverino.

(Interview nr. 5)

In the aforementioned case, not knowing the risk compromised the protective role of the parents towards their daughter (Gordon 1991:146-147).

Moreover, from an anthropological perspective that overcomes the dichotomy of mind/body, even the suffering of the relatives of the victims is experienced through bodily practices. During my fieldwork I noted some signals as bodily “symptoms” of the suffering of the relatives of victims from A-R diseases, in particular mesothelioma. For instance, at least two of my informants complained about their trouble sleeping. During an informal conversation, a relative of a victim told me: “Often, I wake up at 3 or 4 in the morning and I am not able to go back to sleep”. Another significant example is the ischemia that two relatives of victims, socially and politically engaged, had after the deaths of their beloved ones. During two separate interviews, both of informants placed their ischemia in relation to the distress caused by the “sense of injustice” they felt towards asbestos matters.

I am suffering from all the troubles that I have caused myself or that have occurred during the years… ischemia in the eye, diabetes, and so on… without mentioning my troubles about sleeping… Evidently, I am not able to suffer distress or perhaps, I have suffered from too much distress in my life. (Interview nr. 6)

They are my emotions… How can I say? I do not cry, I am not able to cry anymore, but my body must give an answer. It is strange, but at the same time it is quite normal. There are people who cry, or laugh, or get angry. Ischemia has been my answer to what has happened to me. Another “gift” from Eternit has been the ringing in my ears since the death of my daughter. (Interview nr.14)

Thousands of relatives of the victims from A-R diseases have been forced to look for coping strategies to face the suffering caused by the loss of their beloved ones. For a considerable number of them, these strategies have included personal involvement in the civil mobilization against asbestos that has characterised the context of environmental disaster of
Casale Monferrato. To this end, I discuss the case of the first family that decided to make a private and individual death a denouncing act against the danger of asbestos. It was the family of Piercarlo Busto, whose home I lived in during my fieldwork.

In Italy, when a person dies, a funeral poster is usually exhibited near the most significant places in the life of the deceased person, like their home, their relatives’ homes, and the workplace. On this poster, the name and the age of the deceased are written together with the funeral service information and the names of the relatives who announce the death. The Busto’s decided to add more information.

*Vogliamo un mondo migliore per tua figlia* (we want a better world for your daughter), and *l’inquinamento da amianto ha tolto all’affetto di chi lo amava Piercarlo Busto di anni 33* (asbestos pollution has separated Piercarlo Busto, 33 years old from the love of those who loved him).

The Busto’s decided to make Piercarlo’s death a public denunciation of the danger of asbestos. “We needed to do something, because his death was unthinkable and appeared meaningless” (From an informal conversation with Giuliana Busto, Piercarlo’ sister). The death of Piercarlo, as a public denunciation against the danger of asbestos, represented a turning point in the history of the civil mobilization in Casale Monferrato.

After the death of Piercarlo, who spent his last months of life without knowing the seriousness of his disease and its cause, the Bustos began to be socio-politically involved in activities directed to ban asbestos because of its dangers and became actively involved in the activities organized by the trade union and AFeVA. I conclude this paragraph with the picture of the funeral poster that announced the death of Piercarlo Busto.
I took this image from one of many newspapers articles collected by the Busto’s family over the last 24 years. In fact, since 1988, they have collected newspapers articles related to asbestos, Eternit and the death of Piercarlo. There have been many articles about his death since local and national media spread the news at the end of 1988.

**Going Beyond Suffering as an Exposed Citizen**

The final verdict pronounced by the Court of Turin on February 13, 2012, acknowledged exposure to asbestos as a moral damage suffered by a small sample of Casale Monferrato’s citizens (Rossi 2012). The awareness of living with the risk of contracting a serious disease, in particular mesothelioma, causes harm and constant anguish to the local citizens. The damage from exposure was considered as moral damage due remuneration even in the absence of biological or property damages because the psychological upheaval caused by the environmental disaster has limited citizens in their daily lives (Altopiedi 2011).

During my fieldwork, I talked to many exposed citizens. Actually, the majority of my informants were citizens exposed to asbestos. Regardless of the age, job or life stories, it was hard for me to find people who were unexposed to asbestos in Casale Monferrato. In fact, only people born after 2000, when the removal of asbestos from the Eternit plant started or who lived outside Casale Monferrato and were born after the end of Eternit’s asbestos-cement production could be considered as unexposed citizen. Moreover, it is hard to establish who had not been exposed since, according to the final verdict, the visible or invisible sources of asbestos fibres leak are still present in the city and determine the permanency of the environmental disaster (Rossi 2012).

The damage is also related to the constant powerless witnessing of a significant number of deaths of relatives, friends, neighbours, former colleagues, or of citizens that one did not directly know, but whose deaths are read or heard about.

It is a bad life, here. They drew up statistics and said that people born in 1950 or 1951 are more exposed to the risk of contracting mesothelioma because of the latency period of 35-40 years. We were children when Eternit was at the peak of its activity. We are the children who played in the streets nearby, who went to get their parents from the workplace—Eternit— who lived in the same homes where their parents came back wearing their dusty and whitened work clothes. Maria Rosa, Romana’s daughter, was 50 years old when she died. She was my friend. This is a damned age. Even if you get a stupid flu, you dread. I used to do thoracic X-rays very often, but now I stopped
with them. What is the utility to continue with them? I do not do anything, now. I have only a big fear and... that’s it! Every week you open *Il Monferrato* and read… deaths are not decreasing, instead they are increasing. Have you heard about the Mossano’s husband? It is very hard living here… (Interview nr. 11)

The prosecuting lawyers wanted to show that in Casale Monferrato, because of the fear of contracting mesothelioma on the one hand, some citizens undergo to an excessive number of medical controls; on the other hand, some citizens avoid undergoing medical controls at all, in particular thoracic X-rays. For instance, an informant told me that she really hopes not to have a thoracic X-ray in her life. She is a relative of a victim from mesothelioma caused by environmental exposure.

I decided not to do any kind of thoracic or lung controls because prevention would be useful if there was a cure, but since the cure does not exist… It is better not to know that—*having mesothelioma*. Because there is a long latency-period… what can you do if you know that in advance? (Interview nr. 9)

A psychological study lead by Granieri (2008) suggests that the symptoms of the “social suffering” (Kleinman et al. 1997) of the citizens from Casale Monferrato can be interpreted as symptoms of the Post-Traumatic Stress Disorder (PTSD). People affected by PTSD suffer, among the others, from depressive feelings, anxiety, obsessive thoughts, sleeping disorders; these troubles are caused by a catastrophic event (Granieri 2008:55-59).

I conclude this chapter with a quote from an interview with an elderly couple. I read from my fieldnotes that after the interview I came home with a positive mood, I felt that they transmitted something good to me. When they greeted me after a cup of coffee in the bar in front of the AFeVA place, they wished me to become a grandmother in my future because being grandparents is one of the best things that you can experience in your life.

The couple was really terrified from their awareness of being exposed to the risk of contracting mesothelioma as exposed citizens. I heard and saw the fear in their voices and in their eyes. I perceived their fear from the stories that they narrated to me about the daily worries that they have for their sons and nephews, but “you understand that the anguish that you have inside is the same that the entire Casale has, and then you feel a little bit better and you begin to want to do something with the others”. (Interview nr. 11). “Do something with the others” can be interpreted as a practice to go beyond the private and individual suffering.
Conclusion

On the basis of the data collected through in-depth interviews and participant observation, I argue that Casale Monferrato inhabitants are suffering from the environmental disaster caused by asbestos pollution and from Eternit, in varying ways according to the subjective experiences and life stories. The personal links to the suffering caused by the asbestos and by Eternit are clearly distinct; at the same time there are various strategies to face such a suffering. During my fieldwork I met many social actors who suffer, live, and face the socio-political context of a city affected by environmental disaster in a variety of ways. For instance, the actions undertaken by those who suffer bodily from mesothelioma can be different from the actions undertaken by those who suffer from the risk of living exposed to asbestos; there are a variety of social causes and forms of physical pain that can influence the ways social actors experience and make their suffering meaningful. At the same time, the practices of silence that I observed as recurrent strategies to cope with new circumstances one is forced to live with can be considered as actions undertaken by the victims and their relatives to control the “disruption of their world” (Scarry 1985). These practices are also moulded by the cultural context in which an illness experience occurs.

The social dimension of A-R diseases is more evident than the social dimension of other diseases, because of the awareness that these diseases are strongly linked to a social context in which they occurred and to asbestos manufacturing. Nevertheless, such awareness is not common in all the contexts characterised by environmental pollution related to the presence of an asbestos-cement plant. In Casale Monferrato, a context affected by enormous suffering related to A-R illness experiences and the social dimension of the private and intimate suffering has been recognized. The social actors, empowered by their awareness of the social dimension of their suffering, undertake actions to go beyond their suffering, to act and promote significant changes in the socio-political context.

In the next chapter, I discuss the AFeVA’s history and activities as an organization that has been able to coordinate the strategies adopted by the sufferers and, at the same time, has played a crucial role in making the disaster experiences meaningful in the context of Casale Monferrato.
Chapter 7: Casale Monferrato, the City that Fights Against Asbestos

Introduction

In this chapter, I discuss the peculiarities of the civil mobilization that occurred in Casale Monferrato. Like the disaster, the social movement against the asbestos was born in the plant. This is a crucial factor to be considered in understanding the mobilization that has characterised Casale Monferrato as a context of environmental disaster. I contrast my previous research in another Italian city, equally affected by an environmental disaster of asbestos pollution from an asbestos-cement plant, although judicially not as recognized as Casale Monferrato. I argue that the practices related to the workers and civil mobilization investigated during my fieldwork in Casale Monferrato represent a case of a health-based social movement characterised by strategies, activities, and values that still preserve and show the strong links with the union environment and experiences.

In the following paragraphs I discuss the role assumed by the AFeVA in the socio-political context of Casale Monferrato. I take into account the history of AFeVA, members, activities, and its relationships with other social organizations. In particular, I focus on the role assumed by the AFeVA towards biomedical research on the treatment of A-R diseases, above all malignant mesothelioma, and the lawsuit against the Eternit shareholders Stephan Schmidheiny and Luis de Cartier De La Marchienne.

The First Steps of a Social Movement

“We were young and passionate. We spent hours and hours talking about asbestos. We jokingly said that we would have been transformed into a long asbestos fibre!” By these sentences Dr. Degiovanni, an oncologist, talked to me about her personal involvement in the workers’ and civil mobilization since the end of 1970s in Casale Monferrato. Dr. Degiovanni, together with Bruno Pesce and Nicola Pondrano are the main characters of the narratives that I heard during my fieldwork about the beginning of the political struggles against the asbestos and Eternit. Dr. Degiovanni was a medical consultant at the Camera del Lavoro (Room of Labour), the local union branch, of Casale Monferrato for 20 years, from the end of 1970s to the early 1990s. Currently, she directs the hospice Zaccheo building on the previous experience of the
association VITAS for domestic assistance to persons with advanced chronic diseases. During a formal interview, she told me that at the hospice Zaccheo the 30-40% of the patients are sufferers of malignant mesothelioma.

Nicola Pondrano was Eternit worker from 1974 to 1979. From 1980 to 1996, he was chairman of the INCA-Istituto Nazionale Confederale di Assistenza (National Confederated Institute of Assistance) that is the CGIL-Confederazione Generale Italiana del Lavoro (Italian General Confederation of the Labour) welfare society in the Alessandria province. From 1996 to 2002 he was general secretary of the FILLEA- Federazione Italiana Lavoratori Legno Edili e Affini (Wood, Construction and Similar Workers Italian Federation) in Alessandria. Since 2002 he has been responsible for the CGIL- of Casale Monferrato (Iocca 2011:13).

Bruno Pesce was secretary of the Camera del Lavoro (Room of Labour) of Casale from 1979 to 1994. Since 1994 he has been coordinator of the Comitato Vertenza Amianto (Asbestos Dispute Committee) on behalf of the AFeVA of Casale Monferrato e Cavagnolo (a town near Casale Monferrato where another Eternit plant was operative) (Iocca 2011:19). Throughout the years, Dr. Degiovanni, Pesce, and Pondrano acquired more and more knowledge about the working conditions and the danger of asbestos. During her job at the Camera del Lavoro (Room of Labour), Dr. Degiovanni visited hundreds of Eternit workers, the majority of whom suffered from asbestosis. The people with asbestosis went to the Camera del Lavoro (Room of the Labour) in order to denounce their occupational diseases.

Dr. Degiovanni, Pesce, and Pondrano formed a team. They began to collect medical certifications and documents to prove that the number of the A-R diseases and deaths in Casale Monferrato was excessive, to denounce the absence of safety working measures in the plant, and to solicit epidemiological studies and to initiate the first judicial trial against Eternit in 1993. Moreover, they began to promote early awareness campaigns about the danger of asbestos. Dr. Degiovanni told me:

In the beginning we were a very small group, but later we were able to drag in more people. We went to talk about the danger of asbestos everywhere. I remember that we went to even the smallest town near Casale. I remember lots of conferences in the parish recreation centres. During the winter, it was very cold and there were only a few elderly and sleepy participants, but we were not discouraged by these circumstances.

In 1988, the AFLED-Associazione Familiari Lavoratori Eternit Deceduti (Relatives of Dead Eternit Workers Association) was instituted. Bruno Pesce and Nicola Pondrano asked Romana Blasotti Pavesi—wife of a former worker who died from MPM in 1982—to be the
chairwoman of the association that in 2000 changed its name to AFevA. Romana Blasotti Pavesi accepted the job and over the last 24 years she has became the living symbol of the struggle against the asbestos in Casale Monferrato, in Italy and in other countries as well. Her entire existence has been upset by the suffering caused by asbestos and by Eternit. Romana lost her husband, a sister, an uncle, a nephew, and, lastly, her daughter because of malignant mesothelioma.

The first time that I met Romana it was the second day of my fieldwork. I was clearly moved in talking to her after hearing about her from the narratives of the co-founder of the AFevA of Bari, TV-programs, documentaries and books about asbestos matters and the devastated life of this woman. During my fieldwork, I met her many times. Once, she invited one of my gatekeepers and me to her home for a cup of tea. On a spring afternoon, the sunlight and the wind entered from the opened window of her kitchen. One wall was completely covered by pictures of her family: black and white pictures of children, boys and girls, smiling faces. The opposite wall was covered by pictures as well. These last pictures were taken at the Eternit plant before demolition. Only one aged face was there: Romana on a rainy day at Eternit, without the “affects” of what Eternit took away from her. I was impressed by how intertwined her private story and the story of Eternit were as clearly represented by those “simple” pictures combined together.

Romana’s life embodies the tragedy caused by asbestos, Eternit, and by the capitalist political-economic system; but, at the same time, her life embodies the reaction to such an environmental disaster and the struggle against asbestos and its manufacture. In Casale Monferrato the AFevA played a crucial role in turning the suffering linked to A-R diseases into the struggle for the “justice”. I conclude this paragraph with a quote from an interview with Dr. Degiovanni. It effectively describes the role played by the AFevA within the “suffering” community of Casale Monferrato.

If that mixture of explosive feelings was not contained by the increasing group born around Bruno Pesce and Nicola Pondrano who said to people: We know that we are dying, but we are here and we care about you, we want justice, we want that they remove asbestos everywhere, we want that medicine finds a cure... Consider… this movement has had a social and relevant therapeutic effectiveness. Here, an extraordinary thing happened: thousands of citizens did not punch the persons who did not safeguard them, instead they began to collect and they let themselves be embraced by the protective embrace of the association.
AFeVA Members and Activities

During my fieldwork, I often went to the AFeVA office that is situated in Piazza Castello 31, on the ground floor of the same old building where the local union branch is situated. I had the opportunity to observe the daily activities carried out by the volunteers. Moreover I attended meetings, public events, and a school competition annually organized by the AFeVA about topics related to the danger of asbestos and pollution\textsuperscript{19}.

Participant observation, interviews, and informal conversations let me enter a little bit into the “frenetic” world of the AFeVA of Casale Monferrato. I found an association engaged in various activities, public and social events, and interested in maintaining new public relations with other organizations and institutions in the local, national and international context. I noticed that the members are able to differentiate their activities and languages according to the various contexts to which they bring their struggle. Volunteers promote a massive awareness campaign in the city, for instance, by putting up posters in shops, streets, and the most popular places to invite the local population to public meetings or conferences. At the same time, there are volunteers who manage the website and the relationships with mass media and new forms of communication looking at a broader context than the city context. Every day two or three “stable” volunteers open the AFeVA offices, welcome people, answer the phone, read and collect newspaper articles about news related to asbestos.

During my fieldwork, my impression was that the AFeVA activities pivot around public service finalised to give information to people who need to be informed about all the issues related to asbestos, and, at the same time, volunteers who themselves want to acquire more knowledge about news related to asbestos (e.g. asbestos removal, struggles in other contexts, and biomedical research progress).

For instance, the day of my arrival in Casale Monferrato occurred on the day when the reasons for the final verdict pronounced by the Turin Court on February 13\textsuperscript{th} 2012 were published and made public. During the following days, many people went to the AFeVA office to learn the main points of the reasoning. I read from my fieldnotes that people asked to the volunteers to do a real “translation” of the judicial language because they could not understand it. The AFeVA volunteers answered that they needed time to read 713 pages, but in two weeks they would be able to give the requested information. Moreover, they organized a public meeting with the lawyers of the injured parties in the lawsuit to make the citizens aware of the next steps linked to the lawsuit.

\textsuperscript{19} AFeVA has organized the school competition in memory of the unionist Guglielmo Cavalli, since the year of his death from MPM in 1993.
It is necessary to take into account another aspect in the discussion of AFeVA activities. Over the last few years, the lawsuit has polarized the majority of their activities. Before the lawsuit began, the AFeVA members listed and called the former workers, relatives of the victims, exposed citizens suffering or dead from A-R diseases on the basis of the documents collected over the last 30 years by the Camera del Lavoro (Room of Labour) of Casale Monferrato.

I found it interesting that before the lawsuit, it was not required to have a membership card to become a AFeVA member. Everybody who asked for information or assistance about issues linked to troubles related to asbestos and Eternit was automatically considered an AFeVA member. When the lawsuit began, the AFeVA began to create memberships. However, the enrolment is free and, as the AFeVA volunteers say, it has only symbolic value, because in practice they offer services to people without a membership card. To date, the AFeVA counts around 3200 members, 260 former workers, 50 honorary members, and approximately 2900 relatives of former workers and exposed citizens—victims of A-R diseases.

I interpret the decision to give a membership card during the lawsuit that lasted from December 2009 to February 2012 as a factor determined by practical necessities, because during the entire period of the lawsuit, every Monday, the AFeVA organized the journey from Casale Monferrato to Turin to attend the judicial audiences. Therefore, AFeVA needed to have the contact numbers and the names of the persons who wanted to go to Turin by the bus that was booked and paid\textsuperscript{20} by the AFeVA. At least two AFeVA buses left from Casale Monferrato every Monday. The appointment was at 5.30 a.m. in front of the AFeVA office.

I asked the AFeVA members who did not miss a single audience and who were elderly people what were their reasons to go to Turin every week. I received several answers, but two were recurrent. The first reason was linked to the will to “know” what happened in the plant from the voices of the witnesses; the second reason was linked to the will to annoy the defending lawyers with their physical and massive presence “in order to show that we cared about our dead” (Interview nr. 1) and that they were “più tanti di loro”, many more (in numbers) of them (those in power). “Siamo più tanti di voi”, “we are many more than you” has become a slogan in the social movement of Casale Monferrato. It is a sentence, grammatically incorrect, but effective in its emphasis on the idea that the movement is made

\textsuperscript{20} AFeVA is a non-profit organization. The money used for paying the buses and the lunches for the volunteers mostly came from a donation made by Thomas Schmidheiny, the brother of Stephan. During the lawsuit Thomas gave testimony against his brother. The short duration of my fieldwork and the focus on other questions prevented me from exploring this aspect fully, although I found it noteworthy for further investigation.
by many more people than those who hold the power. It was pronounced by Romana Blasotti Pavesi during a talk show and addressed to Giorgio Demezzi, mayor of Casale Monferrato, who was involved in an economic transaction with Stephan Schmidheiny that I discuss in the next paragraph.

Two Sample-Cases of the AFeVA’s Role in the Socio-political Context

Over the last few years, the AFeVa has been able to coordinate various competences and resources that have emerged from the workers’ and civil mobilization and from raising awareness about the danger of asbestos in Casale Monferrato. It has become an influential—and powerful—interlocutor with other forms and structures of power. In particular, in order to present the role assumed by the AFeVA towards biomedical and political institutions, I refer to two significant—and sensitive—cases that emerged during my fieldwork.

The first one is an emblematic case of the relations of the AFeVA and the related social movement with the political institutions. According to the narratives heard from social actors variously involved in the mobilization, a particular period of time was crucial in the recent history of Casale Monferrato. In November 2011, a few months before the end of the lawsuit, a defending lawyer was talking to a journalist (not knowing that it was a journalist) and revealed that Schmidheiny and the Municipality of Casale Monferrato were negotiating an economic transaction based on Schmidheiny’s offer of 18 million euros in exchange for the withdrawal of the lawsuit and no future judicial action against Eternit. Suddenly, local media disclosed the news. The reactions of the AFeVA were immediate and in strong disagreement. The AFeVA declared that before the end of the lawsuit any possible negotiation with Schmidheiny was impossible; moreover, it was suspicious that the Municipality and the defending lawyers wanted to hide the transaction and exclude the civil society from the negotiation process.

The period of time from November 2011 to January 2012, when the Municipality finally refused the so-called “evil offer”21 was described to me by the AFeVA members and sympathizers as a period of hard struggle not to allow the Municipality accept the money. They organized protests, public meetings, musical and theatrical performances to demonstrate their disappointment and that of a substantial number of citizens.

It was an exhausting period; we felt betrayed, abandoned by who should have understood and shared our suffering, but at the same time we discovered a new city.

21 I read this in the local newspapers articles written in December 2011.
For the first time, the city seemed to wake up and was finally undivided about the matters related to Eternit. People, who have never been involved before, joined us and our cause. It was clear that accepting money meant an outrage to our struggle for justice. (Interview nr. 12)

On that occasion, the AFeVA was able to mobilize people and at the same time to accept new contributions and input from other organizations and citizens to make their actions as effective as possible. During that period, the relationship with the local political institutions was characterised by an atmosphere of extreme tension culminating on the night of the December 16, 2011. Almost 400 citizens, most of them AFeVA members, barged into City Hall while the town councillors were voting about accepting the offer. “There were also people from other towns; young persons and students joined us to show indignation. We stayed there until early in the morning. It was a cold winter night. We screamed: ‘Shame!’” (Interview nr. 1). A riot squad controlled the crowd. Various informants told me that a councillor “suggested” to a policeman to “sprinkle some napalm on that people” and the policeman answered: “Keep silent, please, because I also have my dead”.

During that night, the Municipality voted to accept the money. Although, in the end, successive actions and the intervention of the Health Minister Renato Balduzzi\(^\text{22}\) prevented the Municipality from accepting the money, a deep and irreparable fracture seemed to have occurred between the local institutions and the mobilizing citizens. Instead, thanks to the diplomacy that has always moulded the political actions undertaken and coordinated by the AFeVA that fracture has not been perceived as irreparable by activists.

In this sense, I understand Dr. Degiovanni’s words about the “therapeutic” function carried out by the AFeVa in the community of Casale Monferrato. “We have always looked for a communication with the political institutions, because we need them to continue our struggle. After many years, this is the first city administration with which communication has been very hard”. (Interview nr. 17)

During my fieldwork, I once met the Mayor of Casale Monferrato, Giorgio Demezzi, elected in June 2009 and supported by a right-wing political majority. I only had a brief conversation with him. He commented on the news about Stephan Schmidheiny’s invitation to the ONU Conference in Rio de Janeiro about sustainable development with these words: “It is clear that the final verdict pronounced in Turin is not relevant in the international context”.

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\(^{22}\) He is from Alessandria (Piemonte). He belongs to the same region and is sensitive to the asbestos matters denounced by the AFeVA members and other citizens involved in civil mobilization. The AFeVA and citizens are confident that the institutional actions that Minister Balduzzi performs can support Casale Monferrato in the struggle against asbestos.
The distance from the suffering, the values, and the struggles bravely carried on by a significant number of citizens was clearly represented to me by that short sentence and gave me more “data” to understand the feelings of abandonment and misunderstanding that many informants spoke to me about in relation to the public institutions that should have represented them in the lawsuit.

The second aspect that I take into account concerns the role assumed by the AFeVA toward biomedical knowledge and institutions. Since the beginning of the workers’ protests related to the diseases and deaths occurring among Eternit’s workers, support of the biomedical and epidemiological knowledge to “scientifically” legitimise the danger of asbestos has been fundamental. On the one hand, lobbying on local and regional biomedical institutions has been relevant and constant over the years; on the other hand, the huge number of people with A-R diseases registered in the area of Casale Monferrato (ISPESL 2010) has determined the conditions of interest from such institutions.

The three main goals set by the AFeVA are: “giustizia (justice), bonifica (decontamination), and ricerca (research). The AFeVA, together with local institutions of the national health public system manages millions of euros available to fund biomedical research on the treatment of A-R diseases, in particular malignant mesothelioma. This money is part of the money accepted by private citizens from Stephan Schmidheiny in exchange for their withdrawal from the lawsuit. Stephan Schmidheiny offered 50,000 euros, of which 30,000 euros went to private citizens and 20,000 euros for biomedical research that would be managed by the AFeVA and public biomedical institutions. This money has to be directed to “serious projects that can lead to significant results” said Bruno Pesce, who is the coordinator of the Comitato Vertenza Amianto (Asbestos Dispute Committee); moreover, he is one of the main “leaders” of the AFeVA. The AFeVA’s trust in public biomedical institutions, with which it has a long-standing relationship, and its search for clear and transparent projects are emblematic of the past experiences of the union’s struggle characterised by strategies directed to precise goals and moulded by a tenacious struggles against unrevealed knowledge.

23 One of the first epidemiological studies on the deaths occurring among Eternit workers was led at the end of the 1980s (Magnani et al. 1987).
24 During my fieldwork, I did not know the exact sum of money.
The AFeVA and Other Organizations

The AFeVA with its history and activities represents the most structured and influential “strategy” in the process of facing the disaster undertaken by a community that counts more than 1,800 dead from A-R diseases (Rossi 2012). However, the AFeVA is not alone. During my fieldwork, I had the opportunity to observe and to attend to social activities promoted by other organizations sensitive to asbestos matters. Once, I was invited by an informant to a fund-raising dinner organised by the Lions Club Marchesi of Casale Monferrato to fund the Buzzi-Unicem Foundation. Buzzi-Unicem is a multi-regional international cement corporation that originated in the cement factory founded by the Buzzis in Casale Monferrato in 1907. The Buzzi-Unicem Foundation funds biomedical research for curing the malignant mesothelioma and it is in a strong collaboration with the G.I.Me.—Gruppo Italiano Mesotelioma, Italian Mesothelioma Group, whose chairman is Dr. Luciano Mutti25.

I wrote in my fieldnotes that I felt uncomfortable during the dinner. I was upset by seeing at the end of a delicious dinner, the elegant and elderly doctors of the local public hospital listening without interest to the researchers who spoke about their projects and the doctors’ diffidence towards the experimental trials. At my table, on one side were my informants (a sufferer from MPM and a relative of a victim from MPM) and some members of the local public hospital who vulgarly commented about the outcomes of the experimental trials. My informants, who are not AFeVA members, had a discussion with those doctors before leaving the restaurant. They felt outraged by their behaviour of absolute distance from the suffering of people with mesothelioma.

The relationship between the AFeVA and the Buzzi-Unicem foundation is not good, and there is a mutual diffidence. During the analysis of my data, I considered the various social classes and the political dimensions of their respective actions as two elements to be taken into account to explain the problematic relationship.

Approaching the conclusions of this thesis, I want to mention another social organization active in Casale Monferrato, sensitive to asbestos matters, that ideally represents the future of the mobilization in Casale Monferrato. The name of the association is Voci della Memoria, Memory’s Voices founded in 2010 by a group of young persons. The chairman is Diego Quirino, 32 years old and I met him in Casale Monferrato during my fieldwork. He

25 Dr. Lucian Mutti is a researcher on experimental trials for malignant mesothelioma. I knew about him from Bari on the occasion of a conference organised by the AFeVA of Bari in 2010 on the status quo of biomedical knowledge on malignant mesothelioma. Dr. Mutti is a doctor quite famous in Italy among the sufferers from mesothelioma and their relatives.
explained to me that the main objectives of the organization are not to forget the disaster that has affected Casale Monferrato, but at the same time, to export the local civil—and successful—struggle against the “injustice”, to other cities and contexts.

The AFeVA and Voci della Memoria collaborate in exporting their struggle to build on relationships with other activists and organizations all over the world. Not only the asbestos fibres can overcome spatial boundaries, but also a social movement that has been successful in giving voice to the suffering of thousands of people.

**Conclusion**

On the basis of the discussed data, I argue that the successful achievement of important goals prefixed by the social movement in Casale Monferrato, within which the AFeVA has played a fundamental role, can be partly understood in relation to the strong links with the past experiences of union struggles. In Casale Monferrato, to date, a strong relationship between the citizens and the workers’ worlds allowed the creation of a solid social network. Such a “therapeutic embrace” constructed and promoted by the social movement, for instance, was missing in Bari, where I did my previous research on the illness experiences caused by environmental exposure to asbestos.

Another relevant point emerged from my analysis and concerns the practices related to the empowerment process of the social actors regarding the embezzlement of knowledge elaborated by biomedical science and judicial tools used to legitimise and “go beyond” the suffering. I claim that the use of languages and practices of existing forms of power were not passive actions, but rather, these strategies were assumed to create a collective powerful subject emerging from the suffering of thousands. In Casale Monferrato, thanks to the workers and civil mobilization, citizens have acquired a high level of awareness of the risk linked to asbestos exposure. Such awareness, coming from the struggle for knowledge promoted by the social movement has determined the conditions that make the private and social dimensions of the suffering visible and show how they are strongly and mutually intertwined.

Breaking the boundaries between the dimensions of one’s existence can have relevant consequences in the socio-political context and in the private context as well. In contrast to other contexts, like Bari, where the suffering caused by the politics and economics linked to the asbestos manufacturing has hardly affected the surrounding socio-political context, Casale Monferrato’s mobilization was able to let the subversive power emerging from the suffering
body promote and implement socio-political changes, in local, national, and international contexts.

I conclude this chapter with the picture\textsuperscript{26} of a poster made by students during the annual school competition organized by the AFeVA. This poster was created some years ago. The sentence “il mondo nelle nostre mani” is translated into English as “the world in our hands”. The AFeVA decided to use coloured hands as logo the for the membership cards.

\textsuperscript{26} During my fieldwork I was not able to personally take this picture. The AFeVA volunteer who manages the AFeVA photographic archive sent me this picture.
Chapter 8

Conclusion and Recommendations for Future Research

This exploratory study focused on the socio-political practices related to disaster experiences caused by asbestos manufacturing and characterise the Casale Monferrato social movement that promotes awareness about the danger of asbestos, the decontamination of areas affected by asbestos pollution, banning of asbestos manufacturing worldwide, and biomedical research for treatment of malignant mesothelioma. My interpretation stems from the statement that a “critical event”, like a disaster (Das 1995), can upset one’s world and from this “disruption” (Scarry 1985) new meanings and new actions can emerge. In particular, I focused on disaster experiences related to the suffering caused by A-R illness experiences and I considered these experiences in relation to those who personally live with or have died from an A-R disease—the victims, according to the emic point of view. I include subjects who experience A-R illnesses in various circumstances, e.g. relatives of victims and citizens exposed to the risk of developing an A-R disease, specifically malignant mesothelioma.

In my interpretation, the conditions related to these disaster experiences concern the body and ways of thinking and inhabiting one’s own body (Bourdieu and Wacquant 1992). The experiences are seen as favourable conditions to take “subversive” actions against the surrounding local socio-political context. New actions and meanings can emerge from “bodies” that suffer. The social movement of Casale Monferrato represents the most visible and effective case of organised practices undertaken in the socio-political context. The AFeVA plays a fundamental role in coordinating the local energies and resources, but it is not alone or isolated in its work. In a context like Casale Monferrato, a city of almost 36,000 inhabitants, where the entire community is affected by the disaster caused by the Eternit asbestos-cement plant, social actors have undertaken a variety of “actions” that I consider socio-political, because they are socially experienced and have effects on the surrounding socio-political context.

Historically and today, disaster experiences vary in subjectivities, social backgrounds, and bodily experiences. Accordingly, I explored all forms of suffering related to the disaster experiences and the various practices undertaken by social actors to “go beyond” their suffering as well. In this thesis, I tried to preserve the dynamic and multi-faceted dimension of the local context starting by considering the environmental—and human—disaster as a
complex process characterised by several factors. Specific economic and political strategies controlled the spread of knowledge about the danger of asbestos. Strategies to minimize and deny the risk adopted by Eternit’s managers made the disaster “familiar” and “ordinary” (Parkhill et al. 2010:39) and exacerbated and prolonged its seriousness. Moreover, the subjective experiences of the disaster were profoundly moulded by the “invisibility” of the risk and the consequent absence of risk perception among workers and citizens for a considerable period of time.

Another aspect that emerged from my analysis was the occupational origin of the disaster and the civil mobilization occurring in Casale Monferrato. In fact, the mobilization against the asbestos began in 1970s as Eternit workers denounced the occupational diseases of their colleagues and demanded safer working conditions. The workers protests were supported and structured by the principal trade unions, especially the CGIL-Confederazione Generale Italiana del Lavoro [Italian General Confederation of the Labour]. The struggle for health rights emerged from the struggles for workers’ rights; accordingly, it was influenced by the strategies, values, social network, and competencies of the union environment. In my analysis, this aspect has emerged as crucial to understand the peculiarities of the social movement in Casale Monferrato; such peculiarities are distinct from health- and disease-based social movements that occur in other socio-political contexts.

I took into account how the A-R illness experiences—asbestosis and mesothelioma experiences—can be influenced by both occupational and environmental exposure to asbestos; the kind of exposure is linked to the social actors’ elaborated meanings and socio-political practices. Social mobilization against asbestos manufacturing, started from the plant and the denounciations made by the working class, but spread to a broad part of the city and citizens. Like the disaster process, the social mobilization of Casale Monferrato started in the plant. This could be expected because asbestos pollution is mostly caused by asbestos-cement plants; nevertheless, on the basis of my previous research in Bari and indirect knowledge of other urban contexts affected by asbestos pollution in Italy, I argue that such synergy between the plant and the city “world” is not an usual phenomenon. For instance, in Bari, this synergy is missing and a strong link between the plant and the city is missing as well. Although, the asbestos-cement factory is quite large and to this date still abandoned in a central and densely populated area of Bari, the plant is “ordinary” (Parkhill et al. 2010:39) and the risks coming from the exposure to asbestos remain as unperceived.

The social contexts of Bari and Casale Monferrato are quite disparate. Nevertheless, looking at other contexts can be useful to understand the process that has characterised the
Casale Monferrato movement, where the plant workers and the city began to “know” each other when they became aware of the common cause of their suffering.

I hope that my anthropological study has been effective presenting the community of Casale Monferrato as heterogeneous and dynamic. I tried to elaborate an interpretation of my data by taking into account the negotiation process by which the activists have built on a dialogue with other citizens, and the political, biomedical, and judicial institutions as well. In my data interpretation, the suffering experienced by a huge number of citizens has been the starting point from which the practices undertaken by subjects in order to navigate (Lindegaard 2009:19-35) new existential conditions, in the specific context of an environmental disaster, have been addressed by a social movement to promote and achieve changes in the socio-political context.

Workers and citizens have not always shared the same needs and have not been equally sensitive to the matters linked to the asbestos. To date, on the basis of my interviews and participant observation, I noticed that there is a significant number of citizens who do not “see” the matters linked to asbestos as problematic, particularly dangerous or different from others. At the same time, a significant number of citizens do not share or simply do not take socio-political action in the awareness campaigns against the asbestos and Eternit.

The strength of the social movement that I have observed has been and still is the capability to persist in their struggle despite the obstacles and hostility that they have encountered over 30 years spent in denouncing the asbestos dangerousness and the criminal actions committed by the Eternit. In particular, I refer to the activities and the role played by AFeVA volunteers. During my fieldwork, I asked my informants about the reasons they decided to become personally involved, or not, in the social movement. Informants who were socio-politically involved told me with various words, personal reasons, glances, facial expression that “fighting for justice” and “the awareness of doing the right thing” (Interview nr. 9) compensated for their the physical and emotional efforts. Moreover, another important reason to persist in taking socio-political actions was represented by the affective relationships they had constructed with the other activists who shared similar but not identical suffering experiences.

The limited time frame of my fieldwork and data analysis prevented me from deeply exploring certain aspects of my findings that deserve further review. For instance, it would be noteworthy to explore the dynamics and the practices by which the investigated social

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27 See Henwood et al. (2008) about the risk framings in daily life.
movement embezzles the knowledge and the codes elaborated by power institutions to enter the process of elaboration of knowledge and to legitimize its social struggles. My question would be: to what extent does the social movement reproduce and reinforce the existing forms of power? My hypothesis is that social movements elaborate new forms of knowledge, languages, and categories that can only be manifest in a long-term perspective. Conversely, in the short-term, they are forced to strategically use existing codes, produced by power institutions, to promote feasible changes and have the possibility to face official institutions and discourses such as the State, law, and biomedicine. Klawiter (2008) refers to new forms of culture elaborated from disease-based social movements as cultures of action, emerging and “going beyond” the State (Klawiter 2008:xxv-xxvi). It would be interesting to investigate to what extent the cultures elaborated by resistance powers are “creative” in relation to a stronger—institutionalised—power that itself creates conditions for the emergence of resistance because “power is a network, a grid or field of relations in which subjects are first constituted as both the products and the agents of power” (Foucault 1997:96).

Another aspect that could be further developed is the role of the social movement in a context where a community affectively experiences suffering caused by a disaster and the practices to go beyond the suffering. The studies on the role of affects and emotions (Massumi 2002; Gould 2009; Jasper 1998; Polletta 1998; Polletta and Jasper 2001) can be useful in the understanding the reasons that motivate people to take action in a social movement. My fieldwork has been an intense “affective” experience because of the full immersion in the research context, my personal involvement in the “world” of the mobilization against the asbestos, and above all, because of my encounters with the activists. They say that at the AFeVA place “you can breathe a different air” (Interview nr. 1); there is a “magic atmosphere” (Interview nr 27). You sense the strength, and the energy of the activists; most of them average 65 years of age (and some are older) and despite the personal troubles and physical impairments linked to their age, they are strongly motivated “to do something with the others” (Interview nr. 1). I was impressed by the words pronounced by a 74 year-old woman, activist, relative of a victim from A-R disease, and wife of a former Eternit worker. She said to me: “I did not believe that I could still live such a wonderful experience in my life. Here I have found lots of friends. They are my friends. Now, I miss the lawsuit period, but I often come to the AFeVA just to greet and to meet my friends” (Interview nr. 18). She was clearly proud of her involvement in the social movement. I consider that a further exploration of the role of the emotions and of the affects in relation to the decision to become socio-politically active would be noteworthy. At the same time, it
would be useful to explore the feelings that prevent people from taking socio-political actions. For instance, during my interviews and informal conversations, my informants often talked about the anger provoked by the suffering related to the disaster experiences. Sometimes it was considered as a basic emotion to trigger a socio-political action; other times it was believed to promote a social isolation and the will to ignore any matter related to asbestos, included civil mobilization.

The novelty of my interpretation resides in considering the extraordinary civil mobilization occurring in Casale Monferrato against asbestos manufacturing and Eternit as a socio-cultural phenomenon triggered by experiences that have caused enormous private, physical, and social suffering. The victims of the environmental disaster have reacted in differing ways to the “violence” which they have been subjected to and they have acted in a socio-political context as active social actors. My findings can contribute to the anthropological investigation of social movements and litigations occurring in contexts affected by asbestos pollution because of the presence of asbestos-cement plants (Waldman 2007a; 2007b; 2009) Moreover, the findings that emerged from my exploratory study can be useful to understand the socio-political dynamics occurring in contexts that are equally affected by environmental disasters, but where civil mobilization and socio-political actions related to the disaster experiences do not occur. Drawing attention to the struggles to date that emerge or can emerge in countries where asbestos is not yet banned, I wish that my findings about a successful bottom-up process rising from the suffering and reacting to a form of —subtly wielded— “structural violence” (Farmer 1996:261-283; 2005) can be useful to other contexts where activists are struggling to achieve the asbestos ban.

It is necessary to remind the reader that asbestos is still handled in many countries. According to World Mining Data 2008, 13.595 tons of asbestos was produced from 2004-2008 (Iocca 2011:144). The countries with the highest rates of production are China, Iran, India, Russia, Kazakhstan, and Thailand (Iocca 2011:144). Nevertheless, significant rates have been registered by Serbia, Bosnia, Brazil, Colombia, Canada, USA, Egypt, Zimbabwe, South Africa and Swaziland (Iocca 2001:144).

Moreover, Eternit continues to enrich itself by the contamination of the environment and the disruption of bodies and lives around the world. Both Stephan Schmidheiny and Louis De Cartier De La Marchienne continue to make profits from asbestos-cement production.  

28 In 2008 South Africa banned the asbestos use and manufacturing
Although they have been found guilty by the Italian Government, they are still free and are linked to the asbestos-cement brands Amindus Holding and Etex Group, respectively.

Taking into account the wicked aspects of a cultural and economic system in which biomedical and judicial knowledge cruelly reveal their nature as cultural systems determined by negotiation processes (Kleinman 1980) piloted by those who hold economic power, it is extremely important to understand a case characterised by the success achieved by activists who participated in the negotiation process as powerful interlocutors. The AFeVA members make their suffering meaningful by looking toward following generations and other contexts; new generations organized into the associations like Voci della Memoria (Memory’s Voices) seem to accept the invitation not to forget and to preserve the stories about the suffering caused by asbestos manufacturing and the actions undertaken by suffering bodies to go beyond the suffering.

“Casale Monferrato is not the city of asbestos; Casale Monferrato is the city that fights against asbestos!” (Interview nr. 12)
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WHO
Annex 1

**Table 1. List of Informant Categories**

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M: Male  
F: Female  
SA-RD: Sufferer of A-R diseases  
VR: Victim(s)’s Relative  
EC: Exposed Citizen  
UC: Unexposed Citizen  
FW: Former Worker  
S-PA: Socio-politically Active  
NS-PA: Not Socio-politically Active
Annex 2

List of Topics for the Interviews

Personal stories related to asbestos and, in particular, to the Eternit’s plant in Casale Monferrato

Personal reactions to the judicial acknowledgement of Casale Monferrato as a town suffering from environmental disaster manslaughter

Personal reactions to the role of Casale Monferrato as a model of successful civil mobilization against asbestos

Personal reactions to the final judicial verdict

Consequences of the judicial trial and final verdict on the local associations’ activities

Stories of the personal involvement in social and political activities related to asbestos matters

Reasons for not being socially and politically involved in organized associations

Consequences on private life of personal involvement in social and political activities related to asbestos matters

Consequences of sharing certain aspects of one’s disaster experience with others

Personal role in the social organizations

Examples of the consequences of the socio-political engagement on daily life