



November 30th, 2016

Report on the Situation in the Reception & Identification Center of Moria Lesvos

Infrastructures and installations are now being used beyond their capacity, in a Center where it is obvious that the overconcentration of the population has serious negative consequences to the living conditions. These are the main characteristics of the situation in the Reception & Identification Center (hereafter RIC) Moria, Lesvos, 9 months on from the EU-Turkey Agreement (March-November 2016).

Indicative of the current situation is the tragic incident that took place on November the 24st, during which two persons lost their lives and two were seriously injured, due to a gas explosion¹ inside a tent.

After the accident, a protest followed by Third Country Nationals (hereafter TCNs) which was defused in the morning of 25 September, after 75 tents were burnt in various places of the Centre, leaving temporarily “without shelter” approximately 700 people, among them families with young children.

Various parameters, the overcrowding, delays and lack of sufficient information given to TCNs concerning the procedures of petitions for international protection, the agony in front of the existing danger for readmission, the living conditions, especially after the deterioration of the weather in the last days of November and the insecurity at all levels, all together create a sense of accumulating tension, especially since the perspective of “decongestion” of the islands and by extension Lesvos, is not put into practice.

Especially as far as the readmissions to Turkey are concerned, a stage that follows the negative decisions on the petitions for international protection, on a Press Release issued by the Hellenic Police, the current legal and constitutive context is presented:

- a) *The bilateral Greek-Turkish Protocol for Readmission, signed in Athens on 8 November 2001 and ratified by law N.3030/2002 (GG A'-163/15-07-2002).*

¹ There is no official report by the responsible investigating authorities for the exact circumstances of the accident.

- b) *The EU-Turkey Readmission Agreement which was signed on December 2013 in Ankara and was put into effect on October 2014 for the readmission of Turkish citizens. From 1 June 2016 it was put into effect also for TCNs, replacing the bilateral Greek-Turkish Protocol for Readmission. However, in the current phase, the Greek Government is in negotiation with the Turkish authorities and the signing of an Implementing Protocol is still pending.*
- c) *Common statement EU-Turkey of 18 March 2016 according to which, from 20 March 2016, all the foreigners newly arrived to the Greek islands will be returned to Turkey.*

Taking into consideration the above and focusing on the presentation and analysis of the situation in the RIC in Moria, for November 2016, the following conclusions can be reached:

GENERAL OVERVIEW

Official information from the competent authorities as far as the procedures of submission and examination of claims for international protection and especially clarification of the existing legal framework and the acceleration of their examination, remain a constant claim and at the same time a basic source of tensions for the TCNs.

The tension is culminated, since it is added to undignified and insecure living conditions, in prolonged geographical restriction, as well as to the feeling of despair stemming from the danger of expulsion from Europe.

As a result of the continuous and increasing tension is the creation of extreme behaviors and incidents that end up to physical and psychological injury as well as to the destruction of infrastructure, used either for shelter or for the provision of services to the TCNs.

As far as the general overview of the current situation we must underline that according to the last official data of the Hellenic Police, the number of TCNs that reside in the RIC reaches 5000 persons. This number may not reflect reality, however according to the effort for registering the population by UNHCR with the participation of many NGOs on 30/9/2016 and based on the arrivals up to today, it becomes clear that the population that resides in the RIC has exceeded 3000.

Even in accordance with the most moderate estimate, it becomes evident that in the current phase, the Center is called to support far bigger numbers than those that it can “host” in theory, securing at least the basic conditions for a dignified living.

More detailed information follows for the basic sectors of the daily functioning of the Centre follows:

ACCOMMODATION

The overconcentration of people inside the RIC pushes to their limits the existing structures and infrastructure.

The majority of the TCNs continues to live in tents or temporary shelters (as a consequence of the extended incidents of the 19th of September, when a large number of the RHU's was destroyed).

The immediate replacement of the 75 tents that were burnt during the protest of 24 November was the biggest challenge that the Authorities and Organizations in the shelter sector were called to face.

Thanks to the coordinated efforts of the Authorities and mainly Organizations the necessary actions were completed in a very short period offering on time a basic "refuge" to hundreds of people, a little before Lesvos was hit by a heavy rainfall.

The opportunity to replace the tents by containers, which offer undoubtedly better isolation, protection, as well as a sense of privacy and security, before the significant deterioration of weather conditions (strong winds, heavy rain and a sudden drop in temperature), has been lost for good.

Not even the painful events of 24 November served as a pretext for overcoming any obstacles and technical difficulties that have arisen as far as the scenario under discussion for the containers' placement is concerned.

In any case, the improvement of the accommodation conditions as well as of other crucial sectors is closely linked to the decongestion of the Centre.

WASH

Taking under consideration the above mentioned conditions of accommodation and hygiene, despite the continuous efforts for improvement and expansion of the relevant infrastructures, the conclusion that it is difficult to safeguard public health can be reached.

The relationship between infrastructure (toilets, showers, taps etc) and population remains disproportionate, while the lack of hot water in many sites of the Centre is alarming.

However, cleaning in public spaces, in relationship to the overpopulation of the Centre, remains at a satisfactory level.

SITE PLANNING

Under the current conditions, where TCNs have reached numbers higher than 3.000, the tendency of the number of departures from the Centre remains low, and as a result, the tents occupy every available space in the Centre, even a small increase in the number of arrivals, which can follow the improvement of weather conditions, would be enough to cause the system's operation to crash (of all individual sectors). Indicatively it is mentioned that there is very little space available for additional tents.

The installation of containers presupposes big-scale technical preparation (to smooth the soil, works by heavy goods vehicles etc) for which it is required that people are removed from the tents and are temporarily hosted in another place. Even if the relevant technical and practical difficulties are overcome, the number of containers that could be placed within the Centre would possibly not suffice to cover all the needs of the existing population.

A significant source of risk continue to pose the interventions of the TCNs for cabling the Centre in order to secure electricity for their tents. The danger for electric shocks is increasing as long as the cables remain exposed to the rain. Despite the efforts of the authorities and Organizations to avoid improvised connections and at the same time to provide safe electricity the problem remains.

According to the Authorities the installation of 2 heated Rub halls remains pending for the immediate satisfaction of a part of the needs.

FOOD

As far as food is concerned, the Army, via a private catering company continues to cover the biggest part of the needs, increasing the portions from 3000 to 3500. Additional portions to those distributed by the Army regularly are offered by an NGO.

Probably due to the overcrowding and the overall situation, small scale incidents take place during food distribution.

Efforts to secure a special diet, when needed continue, without this being, for the moment, possible.

It is reminded that: a) there is no provision for «home» storage-maintenance for food and beverages and b) baby milk in powder (for infants that do not breast feed) is only distributed by MDM, in the context of a regular cooperation with the International Organization “Save the Children”.

NFI's – NON FOOD ITEMS

The biggest challenge that NGOs involved in this special field have faced is the replacement of NFIs of the TCNs which were destroyed during the events of 24 November.

Thanks to the coordinated efforts of the Authorities and mainly Organizations the relevant actions for the replacement of NFIs were concluded, in a very short time, offering on time the absolutely necessary items to hundreds of people a little before heavy rain hit Lesvos and temperature falls further.

The basic distribution of winter items for clothing and footwear and relevant winter accessories has been completed, however the needs in hygiene items as well as in certain sizes, remain high.

As far as regular and emergency actions that need to be followed in order to cover the needs of the population with NFIs, the responsible of the MDM team for NFIs, acting in a responsible and coherent manner during all these months has managed to create a safety net, capable of responding to the big pressure of the circumstances, building and using alliances at a central and local level.

PROTECTION

Overcrowding and living conditions as described in detail above are directly linked to protection issues and security.

For example, the limitation of digressive behaviors inside the Centre, as well as avoiding violent incidents continues to pose a need which needs to be considered by the competent authorities in order to reconstitute the security sentiment of the TCNs, especially the vulnerable.

In addition, the current conditions favor incidents of SGBV and at the same time make difficult their early detection and management.

If we take into consideration their psychological and social history, as molded in the countries of origin and/or transit, as well as the current status of living (legal, social, economic etc) of the

TCNs, it can be attributed to these parameters the phenomenon of extreme and self destructive-suicidal tendencies and behaviors. Unfortunately nothing has changed in this aspect towards a more positive direction, since similar incidents of voluntary or involuntary expression of feelings of insecurity and despair that undoubtedly torment the TCNs take place during all these nine past months (March 2016 until today).

As far as the especially vulnerable group of unaccompanied minors, the incidents of 24 November were the springboard for their mass immediate transfer for security reasons to an open hosting facility, which incidentally begun to operate in Lesvos a few days earlier. The unaccompanied minors remain in the specific structure and the wards within the RIC remain for the time being vacant.

For the rest of the vulnerable groups (newborns, persons with disabilities etc.) that remain in the Centre, specialized infrastructure and provisions remain absent, however there are works underway for the creation of a hosting space (with a limited number of beds) for cases in need.

The period that has passed by from the EU-Turkey agreement of March, which changed “violently” the model of political, legal, and even humanitarian management of the refugee phenomenon, should have been sufficient in order for the development and functioning of national, but especially international mechanisms of social integration of the TCNs (for example free access of the minors to the national education system), however in practice these persons remain trapped in a system, which probably until it “condemns” them, with choices against their will, chooses to ignore them.

MENTAL HEALTH & PSYCHOSOCIAL SUPPORT (MHPSS)

Taking into consideration the range of problems that remain and/or are being multiplied in each sector, one can comprehend the difficulty and complexity at the level of psychosocial and medical intervention. The most crucial part of this intervention, the MDM team, continues to be in the front line aiming at supporting the population and especially the vulnerable groups, despite the highly adverse conditions.

Besides the efforts for identification of vulnerable groups, according to the existing legislation and the collaboration with the First Reception and Identification Service, the biggest challenge to which the team is called to respond is the support of the population in collaboration with Public Services, Institutions and Organizations as well as other NGOs and referring cases when this is possible for a better handling of their needs.

In this context, during weekdays, primary health services are offered, covering the entire population, while referrals to structures of secondary care when this is deemed necessary. Apart from the immediate provision of healthcare to the TCNs in need and at the same time the decongestion of the peripheral hospital, the role of the medical team is crucial in relation to the prevention and/or dealing with transmissible diseases, contributing significantly to ensuring public health. In the current situation, for reasons that have been mentioned in detail above and deal with the living conditions and the overconcentration of population, the work of the team becomes difficult as far as prevention and dealing with infections and transmissible diseases.

Despite the above mentioned objective difficulties the MDM team is facing, admitting the need to take initiatives, at least in terms of prevention, plans and puts into action interventions for information and sensibilization of the population for medical issues, giving emphasis to the ways of avoiding transmissible diseases.

In addition, it is underlined that there is a need for a national vaccination plan of the refugee-migrant population, including the TCNs residing in Lesvos.

Finally, as far as the Medical Department is concerned, during November, there were two major health programs put into action:

1. The first one concerns Free Prenatal Control, it is implemented following the guidelines of the national plan and is combined with the provision of services from a (female) gynecologist inside the Centre and
2. The second concerns the provision of primary dental care through the presence of a dentist inside the Centre.

The psychosocial department of the team continues to cover on a daily basis the biggest possible number of beneficiaries, giving emphasis on vulnerable groups. Besides the identification of these groups amongst the population, the Department offers the necessary support when needed, but also refers cases, when possible, for a specialized treatment.

Due to the current condition the work of psychologists and social workers is deemed especially difficult and multifaceted, since the problems of the population that they are called to handle are transmuted and worsened, as long as the living conditions of the TCNs in the Centre, under the current conditions, does not only constitute a one way option, but to their eyes also seems like a dead end.

More especially, the role of the social workers has been crucial all this time, especially as far as the support of unaccompanied minors is concerned on a daily basis, during their stay in the Centre, but also during the handling of the necessary procedures for their referral to open

structures, preventing in this way the further deterioration of their situation, which is caused by their living conditions under restriction of liberty.

For the psychologists team and constant offer of services from their part to conditions of great pressure, indicatively we only mention that they were called to support the people that had witnessed the tragedy of November 24, helping them to manage, the especially aggravating for their psychology consequences.

In the sector of mental health and especially in the cases that a psychiatric evaluation and specialized treatment is needed, the lack of staff in the local hospital, where only one psychiatrist is called to handle the total number of cases, the identified gap is important and raises serious concern.

An additional problem concerning the function of secondary health structures that has arisen in the last period is the lack of appropriate interpretation both in the General Hospital of Mytilini as well as the PEDY Clinic.

It is worth mentioning that to the offered services of MDM two educators have been added in order to plan and put into action educational and recreational activities for the minors.

ADVOCACY

The MDM team remains loyal to the dual commitment of the Organization:

- a) to remain in the refugee center of Moria, despite its transformation into a Detention Center (due to the implementation of the joint EU–Turkey statement) in order to provide medical and psychosocial support to refugees whose health was at direct risk and
- b) to report, monitor and document any incident affecting directly or indirectly the human rights of refugees,

This commitment has resulted during November in

- Contributing to the emission of a press release on 25/11/2016 entitled “People living in safe and dignified conditions, far and above every Agreement EU-Turkey”
- Collaborating with representatives of the “Office of the United Nations High Commissioner for Human Rights” offering useful information to be sent.

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