



KEY FACTS *



14,387
Sea arrivals
in 2018



Arrivals during the first
six months of 2018
are **48% higher** than
those of 2017



17,924
migrants and refugees on
the islands



More than 50% of
the arrivals are women
and children



Almost **7 out of 10**
Children
are below the age
of 12

77% of total arrivals from refugee
producing countries
Syria, Iraq, Afghanistan, DRC

KEY INFORMATION

Greece is one of the main gateways to Europe, together with Italy and Spain in the Mediterranean region. Refugees and migrants reach Greece both through its land border with Turkey in the North and, mainly, through the Greek-Turkish sea frontier in the Aegean. During 2015, almost one million refugees and migrants arrived in Greece, in their majority viewing Greece as their first stop and as a transit country towards their final destination to central and northern European states.

The EU-Turkey agreement on migration had further significant consequences in the refugee response in Greece. Since March 2016, when the deal went into effect, the vast majority of asylum seekers and migrants that arrived on the Greek islands have been restricted to the islands, often held in the “hotspots”, in places where they were designed for transit and not for long term periods of stay.

Only migrants who are considered to be “vulnerable” such as unaccompanied minors, disabled persons or persons with serious health problems, seniors, pregnant women and victims of trafficking, torture, violence or abuse, family reunification cases and those admitted to the Greek asylum system following admissibility interviews, are excluded from the scope of the EU-Turkey Agreement, so that they can ultimately be transported to mainland Greece where their special needs can actually be addressed.

However, due to the increased number of arrivals and gaps in healthcare services on the islands there is often a backlog in vulnerability assessments. As a result many migrants undergo their asylum procedure without having their vulnerability properly assessed and identified.

Arrivals during the first six months of 2018 are 48% higher than those of 2017. 17,924 refugees and migrants are currently residing on the Aegean islands, i.e. mostly on 5 islands (Lesvos, Chios, Kos, Samos and Leros). Lesvos continues to shoulder the biggest number of arrivals, having received more 53% of total sea arrivals on Lesvos in 2018. The number is significant and continues to put pressure on the already overwhelmed Greek reception and asylum system. Overcrowding, inadequate and insufficient living conditions, lack of protection and insecurity, are some of the problems refugees face.



MDM ACTION

MdM aims to guarantee access to basic health services migrants in Mavrovouni - Kara Tepe Hospitality Center of the Municipality of Lesvos (overall accommodation capacity ~ 1.300 persons) and to Alternative Accommodation Facilities in Chios in collaboration with UNHCR, focusing on the needs of the most vulnerable populations (such as women and people in need of psychosocial support, SGBV survivors as well as people with chronic medical condition).

This goal has been met through the maintenance and adaptation of community based health services offered by MdM teams (including primary health care, sexual and reproductive health/SRH planning, psycho-social support and referral to the National Health System).

At the same time, MdM - Greece aside from the emphasis on the quality and decency of services provided, strives to support its beneficiaries in all ways possible, including linking them to other projects of MdM - Greece (such as shelters, emergency projects for most vulnerable cases etc.) and refer them to other stakeholders. MdM action has a significant and long-term impact with regards to the quality of life of its beneficiaries and the promotion of the right of access to humanitarian services for all.

FIRST SIX MONTHS OF 2018 MAIN ACTIVITIES



28

Employees



8,031

Total Number of People



11,815

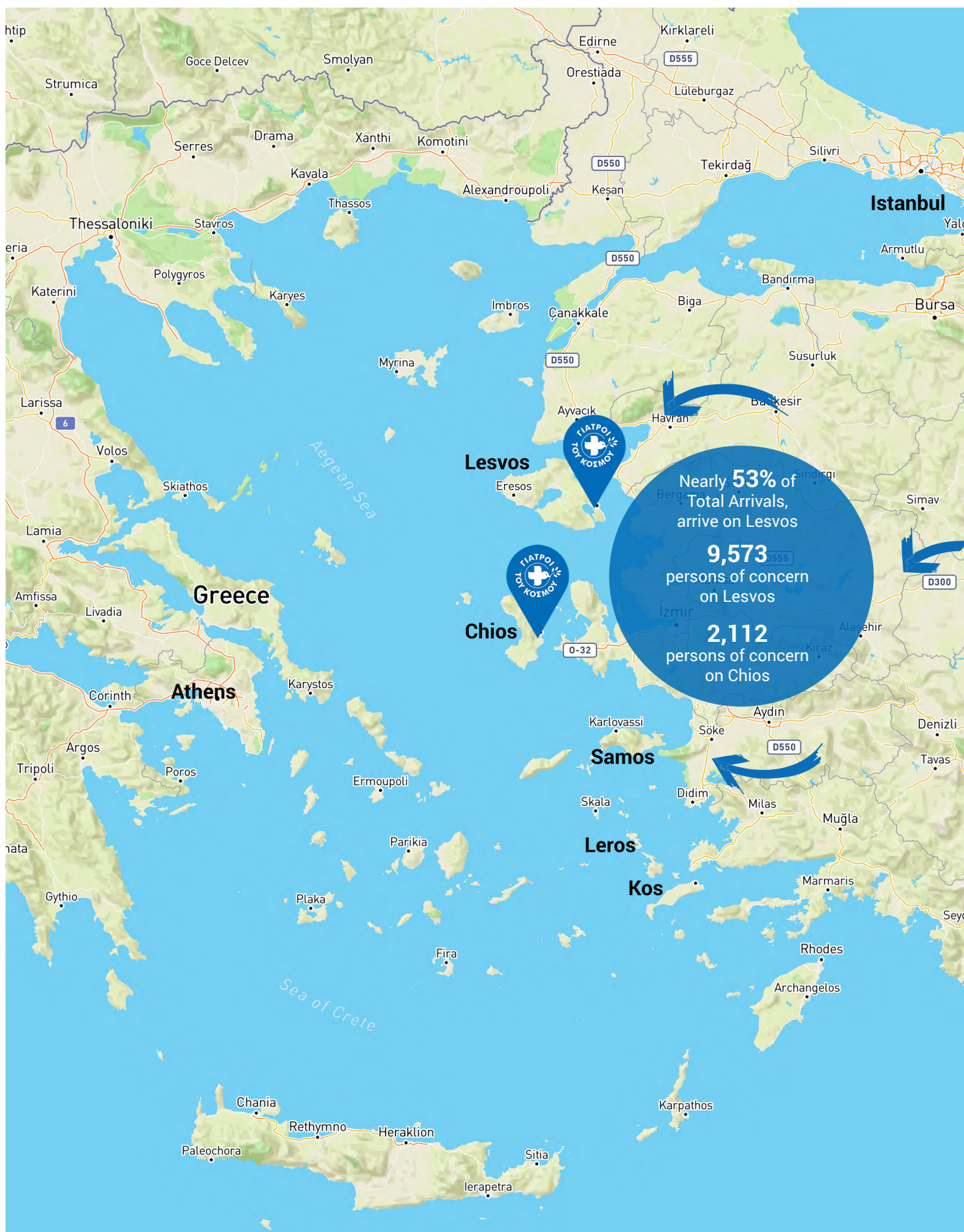
Total Number of Medical consultations



11,366

Total Number of MHPSS actions

DOCTORS OF THE WORLD GREECE: REFUGEE RESPONSE-GREEK ISLANDS





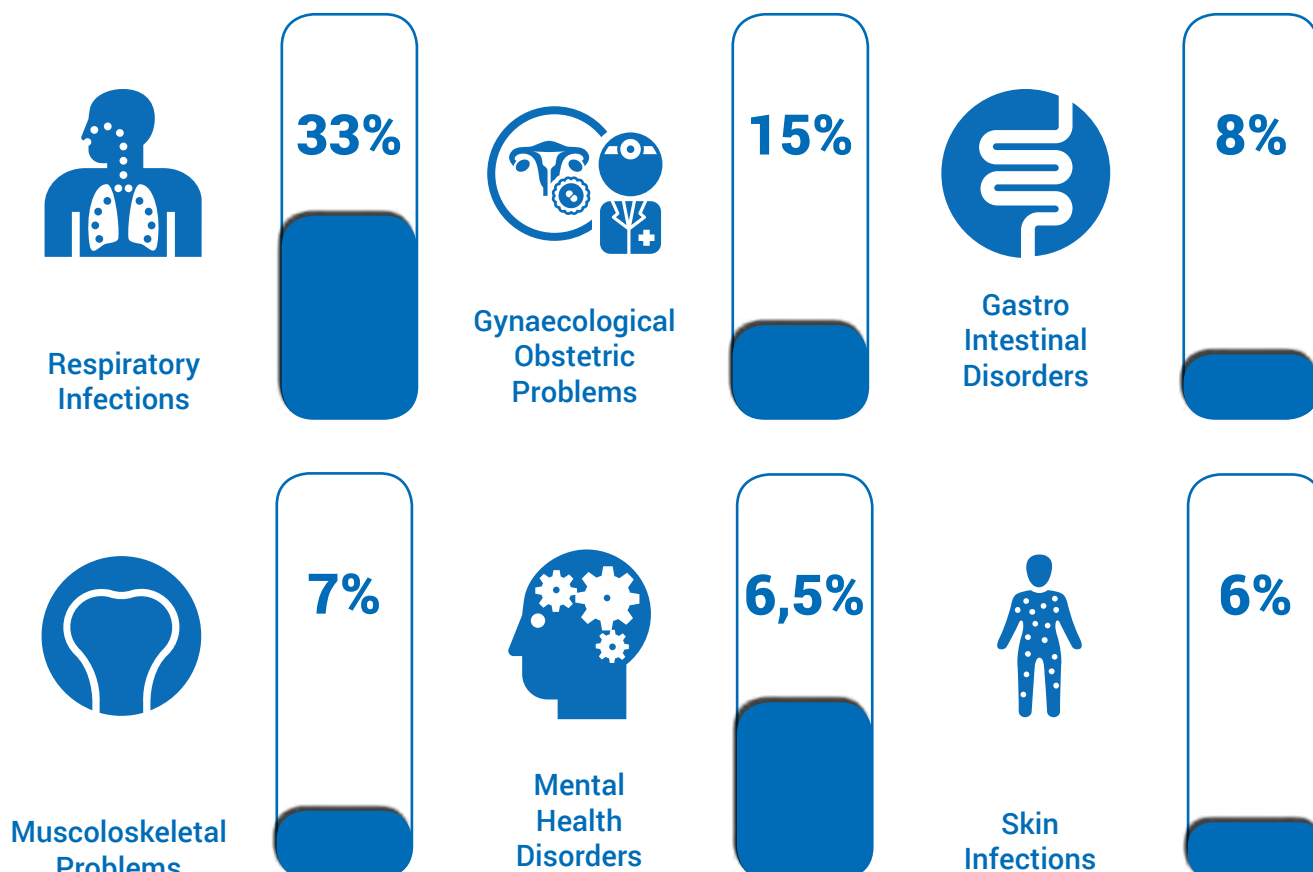
HEALTH SITUATION

A direct consequence of the camp based accommodation is the cross-cutting deterioration of the health status & psychological condition of all different groups of population. People live in limbo and uncertainty, they feel de-motivated, and their morale is low.

According to MdM data gathered and field assessment activities, there is a significant deterioration in mental health for refugees and migrants due to the harsh living conditions and their restriction of movement on the islands, following the implementation of the EU-Turkey statement on migration. Fear, use of alcohol and drugs, Sexual and Gender Based Violence (SBGV) in camps are also aspects of the refugee's deteriorating everyday life on the islands.

When coming to women and Sexual and Reproductive Health Services (SRH), the complexity faced is even bigger: pregnant women, need for pre-natal and ante-natal care & family planning, pro-existing gynecological problems and cultural constraints. And while Alternative Accommodation Facilities (AAF) schemes do offer better living conditions and –in theory- easier access to services, PHC, PSS and SRH needs still remain high and largely uncovered for a variety of reasons spanning from the inability of the National Health System (NHS) facilities AAF on islands to correspond to the need for PSS in particular, to the complex vulnerabilities people residing in AAF.

MOST COMMON HEALTH ISSUES



VOICES FROM THE FIELD



“Having completed almost 3 years working as field doctor for Doctors of the World, mixed feelings and memories emerge. It was then that we first spotted desperate people washed up on the shore, kissing the soil with babies wrapped in wet blankets and carefully hidden in travel bags,

children who looked at you with eyes reflecting the terror and pain of what they had experienced, people of all ages having to leave their home country and their livelihoods.

In those times, we all felt that our intervention was the hand they had to grab to pull them into their new lives, the impetus they needed after such an exhausting and dangerous journey as to continue until they reached the final destination.

Unfortunately, political agreements, decisions and bureaucratic procedures have changed the fate of these people and our own role. Today we are faced with people trapped on the islands, suffering either from common health problems or chronic diseases neglected due to the difficulty of accessing appropriate healthcare in their troubled homelands.

Our current goal is to provide primary care, information on good hygiene conditions, health prevention and vaccination of children, family planning and prenatal care for women, as well as ensuring access to health structures for monitoring of chronic diseases health problems where necessary in a challenging context.

It is a daily struggle that requires enormous mental reserves, a daily struggle that all of us in the MDM team, we are engaging in to relieve these people; a continuous struggle for the smooth transition and integration into their new reality.”

Elli Katanou, Medical doctor, MDM team on Lesbos



I come from Syria and have witnessed with my own eyes ISS scattering death in my family. There is no greater pain in one’s life than a mother losing her children. Now I am living in safety in a refugee camp with many families on Lesbos. But I cannot be happy, because every day I see the faces of my own children on the children’s faces in the camp. From the first week we arrived at the camp, my husband urged me to visit a psychologist.

At first I was hesitant, but now after several sessions I understand how important it was and I thank the psychologist very much for this. Of course, no one and no “magic” pill can erase the pain that I experienced, but it was a gift for me to have a person right beside me to hear me and feel empathy for me. Most people when they hear such painful experiences, they try to find a way to wipe out the pain. This, however, causes more oppression than relief. The psychologist has let me freely express my negative feelings, mourn for the lost paradise, and feel that there is someone next to me to hear me with genuine empathy and interest.

Daanya, 23 years old, woman refugee from Syria

CONTACTS:

Konstantinos Troupakis, Head of Communication Department
communications@mdmgreece.gr , Tel: +30 210-3236225



Fotini Kokkinaki, Press Officer
press@mdmgreece.gr , Tel: +30 210-3236225



Stathis Poularakis, Advocacy Officer
advocacy@mdmgreece.gr , Tel: +30 210-3213150