



**MSF emergency intervention in Lesvos (Mytilini) island  
June 2 – 25 September 2008**



**Primary Healthcare, Mental health and improving living conditions  
for undocumented migrants in Greece**

**Findings - Results - Concerns - Challenges**

### **Intervention Background**

In February 2008 MSF carried out an exploratory mission in the Detention Centers of Peplo, Vrysika and Filakio in the Evros Region, in the islands of Chios, Samos, Lesbos and in the temporary migrant's settlements of Patra and Igoumenitsa.

The results and findings, which were also communicated to Ministry of Health (MoH), and Ministry of Interior (MoI) and in Prefectures and Municipalities, indicated the following:

- 1. Limited access for undocumented migrants to the national Health Care System**
- 2. Inefficient medical procedures of diagnosis and follow up of chronic and contagious diseases**
- 3. Absence of mental health services in all detention centers**
- 4. Absence of care for the vulnerable groups of the detained population**
- 5. Extremely poor living conditions especially in the Detention Centers of Lesbos, and Peplo (Evros region) and in Patra's temporary settlement, and inefficient medical care**
- 6. No common medical screening and follow up; no vaccination processes on the arrivals of undocumented migrants**

### **Planning**

MSF, considering the above mentioned situation as an emergency, developed an intervention in order to provide primary health and mental health care, and to improve living conditions in the detention Centers of Lesbos, Peplo and in the temporary migrants' settlement in Patras. Peplo's Detention Center remains closed until today. The permission (by the MoI) to enter and work in the Lesbos Detention Center was granted by the end of May.

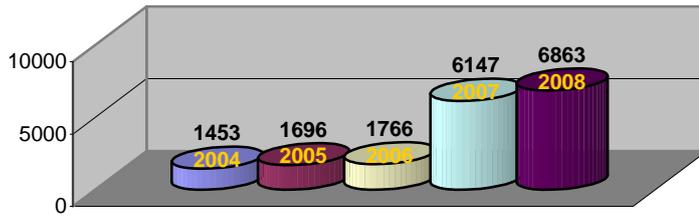
### **MSF Intervention in Lesbos**

Since June 2<sup>nd</sup> 2008 the MSF team was working on daily basis in Lesbos Detention Center. The team started working simultaneously in two levels: providing medical and humanitarian assistance in the landings of undocumented migrants in the Port of Lesbos and in the facility for unaccompanied minors in Agiassos, a structure supervised by MoH which was in the meantime created.

#### **A. Detention Center of Lesbos**

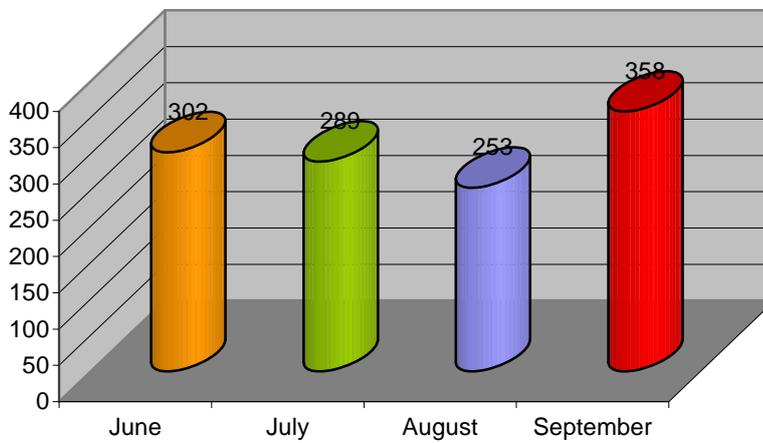
The number of undocumented migrants arrested by the Police and Coast Guard (and consequently number of detainees) increased dramatically during 2008 – even by the end of August 2008, the total numbers already exceeded the ones of the previous year.

**Undocumented Migrants arrived in Mitilini /arrested**

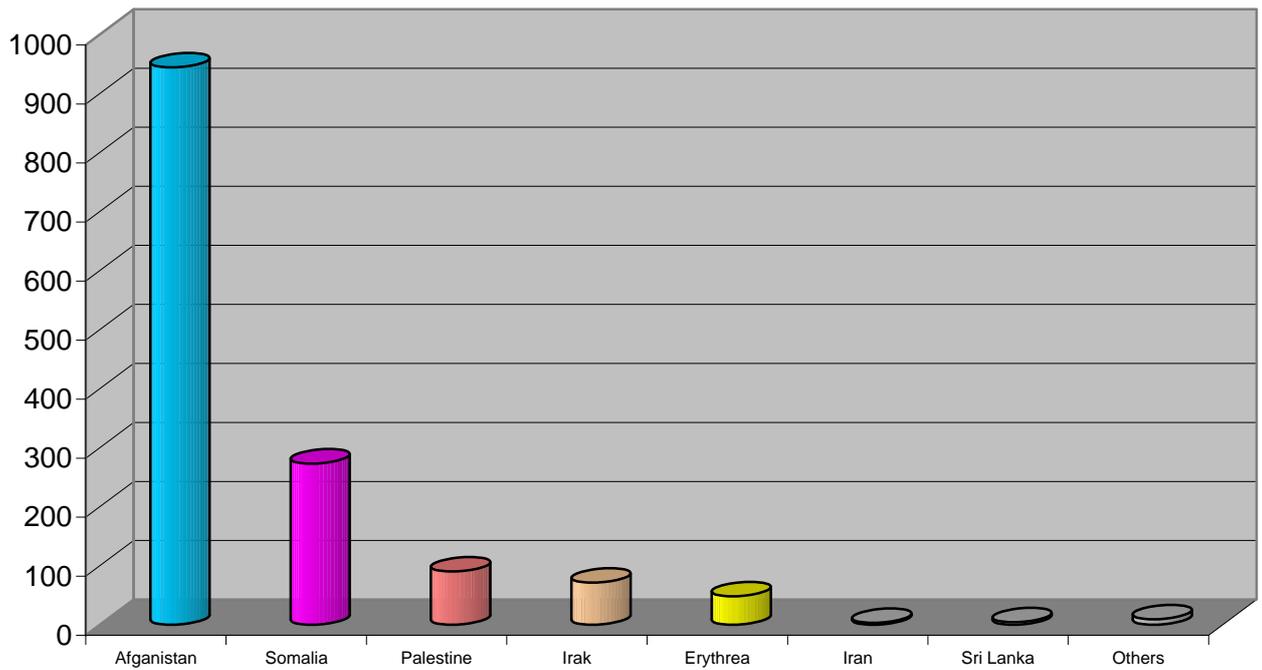


*From June 2 to September 25, MSF teams provided primary healthcare and psychosocial support to more than 1.700 cases of undocumented migrants*

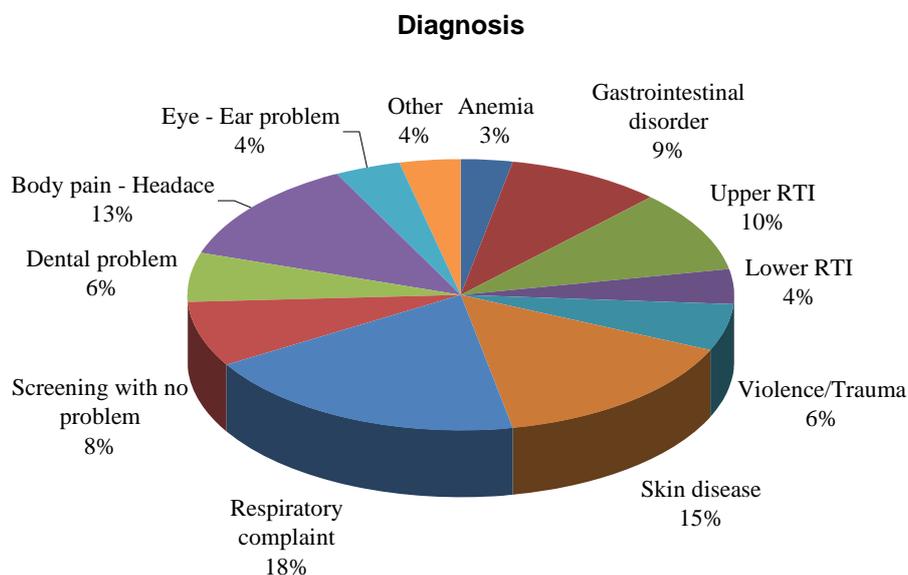
**1202 migrants received medical consultation in Detention Center**



**Nationalities**



## Main findings of consultations



*Respiratory infections, upper and lower RTI and dermatological diseases were the main medical findings during the consultations*

The psychosocial care was mainly focused to vulnerable groups of the population: families and children. Individual and group counseling together with play-therapy sessions were the main tools used to minimize the observed anxiety and depression. This clinical picture was also reinforced by the difficulties, insecurity and agony of the journey to Europe and the difficulties faced in the country of origin.

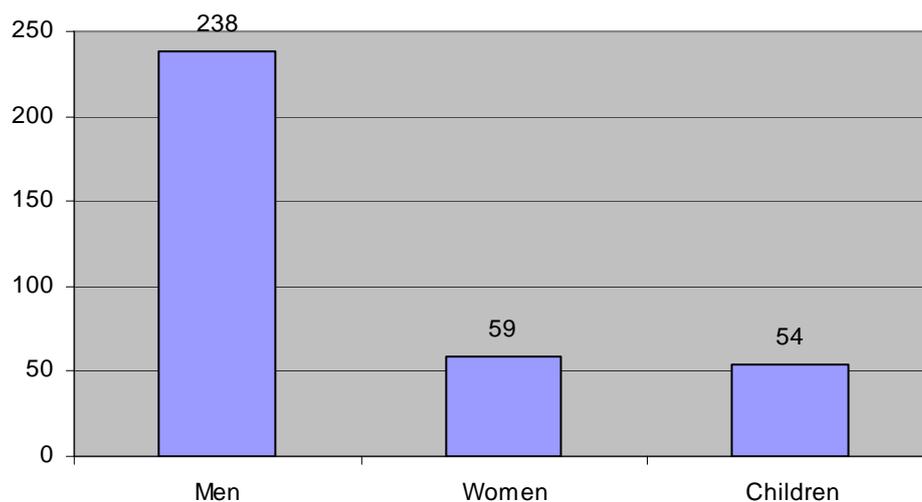
By the middle of August, MSF finalized some additional constructions within the Center (latrines, showers, pumps and minor rehabilitation works) as a response to the critical situation faced by the end of July. MSF also distributed necessary cleaning material to detainees.

### **B. Agiassos Facility – a new structure for Unaccompanied Minors**

Since the creation of the structure MSF doctors and psychologists paid regular visits to the structure in order to provide necessary medical assistance to the population. A total of 23 minors were examined during these visits. MSF underlines the need for a more concrete plan of supervision and role organization for the Facility by Ministry of Health and Social Solidarity.

### **C. Mitilini's Port –Landings**

MSF provides basic humanitarian and medical assistance to 351 migrants (see chart below). A tent to protect the population was set up in the Port. MSF also suggested the establishment of chemical toilets as well but the local Coast Guard Authority declined and our official application is still pending.



### **Collaboration with Authorities**

The access of MSF doctors and psychologists to the patients was since the beginning limited “for security reasons”. MSF doctors often had to examine patients through the fences and bars. Although gradually improving, the free access to patients remained very limited.

To date, the authorities are still unable to guarantee humane living conditions for the detained population. All the improvements and actions undertaken by authorities were always after pressure from MSF and other actors as the conditions worsened. For instance, in July more than 800 people were locked all day in dirty chambers with limited access to functioning toilets and showers.

Even the function of new latrines, taps, showers and minor rehabilitation works carried out by MSF was severely affected by the lack of proper and regular maintenance.

During our intervention in Lesbos, MSF sent tens of documentations and proposals to the authorities regarding the project evolution and our concerns on the problems that the migrants face. MSF brought up specific written suggestions having also regular meetings in regional (Prefecture, Police, Coast Guard Authority, Hospital ecc) and central level (MoH , MoI, Center for Disease Control and Prevention) underlining issues of collaboration and the priorities aiming to mobilize in efficiently the existing governmental mechanism.

### **Concerns**

#### Living Conditions in Lesbos (Mitilini) Detention Center

The present conditions within the structure cannot guarantee the minimum of acceptable living conditions, which is an aggravating factor for the migrants – especially for vulnerable groups of the population like children and people in need of medical and psychological assistance.

If the structure continues to function as a detention center, the authorities have to proceed in the following actions, guaranteeing sustainability and effective coordination

- Installation of heating system, creation of a properly equipped dining room, construction of additional latrines and showers, proper and regular maintenance of the existing ones.

- Implementation of regular cleaning processes not anymore based to the “good willingness” of the detainees. It has to be mentioned that for more than 3 months there was not even basic cleaning of the chambers.
- Replacement of the existing dirty mattresses with new ones, regular distribution of bedcovers, blankets and personal hygiene materials in amounts that correspond to the needs of the population
- Daily access to yard for all the detainees

#### Medical Coverage of the population needs - relevant procedures

- In many cases the observed symptomatology is directly connected or aggravated by the living conditions of detainees.
- Therapy and follow up of the chronic diseases often requires more than a few weeks (period that most of the migrants are detained) and in these cases there is no practical access to the healthcare system for the undocumented migrants. The relevant therapy of diagnosed Tuberculosis (TB) cases is also not properly followed up.
- Very often patients are kept isolated for more than 1 month, awaiting medical processes of diagnosis to be completed. This situation is a direct result of a poorly organized and inefficient follow up mechanism of contagious diseases.
- Defined and precise vaccinations procedures for children and necessary medical screening and assistance provided to pregnant women are high priorities.
- It is essential for a psychologist or mental health professional to work in the Detention Center in collaboration with a trained translator, under conditions that could guarantee the necessary privacy and confidentiality.
- Appropriate medical screening processes have to be implemented for undocumented migrants upon arrival, with special focus to vulnerable groups (women, children, pregnant women etc.). The involvement of the Ministry of Health and Social Solidarity in the planning and supervision of such processes is necessary and could guarantee a more effective implementation of any measures.

#### Special care for vulnerable groups of the population

- Families with children and babies are detained for more than 10 days in unacceptable conditions. There is limited flexibility in the actions of authorities to deal with the issue and a legal gap for the detention of children and infants accompanied by their mothers.
- For people with special needs and psychiatric patients the system is until now based on the good willingness of the employees in the detention Center, as far as there are no practical or well defined official procedures concerning these cases.

#### Coordination between the involved authorities

- The responsibilities of involved authorities during arrival and detention of the undocumented migrants are distributed between the Police (MoI), the Prefecture and the Coast Guard and this leads to the basic inefficiency of the system, which was also confirmed by the situations MSF observed during the whole intervention.

#### **MSF continues it's intervention for undocumented migrants in Greece**

Patra: since May 12, 2008, MSF has provided medical and psychological assistance to more than 2.700 individuals in the temporary migrants' settlement and contributed to the improvement of living conditions. Exploratory missions were carried out during July in the detention centers in Evros and Rodopi and by the end of August in Ilia (Peloponnesus).

MSF's assistance to undocumented migrants in the Mediterranean includes projects in Italy, Malta and Morocco.