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Greece: Refugees with Disabilities Overlooked, Underserved (Report)

Identify People with Disabilities; Ensure Access to Services

January 18, 2017

<https://www.hrw.org/news/2017/01/18/greece-refugees-disabilities-overlooked-underserved>

Greece: Refugees with Disabilities Overlooked, Underserved (Video)

January 18, 2017

<https://www.youtube.com/watch?v=7CZoWxtsf6c>

EU/Greece: Asylum Seekers' Silent Mental Health Crisis (Report)

Identify Those Most at Risk; Ensure Fair Hearings

July 12, 2017

<https://www.hrw.org/news/2017/07/12/eu/greece-asylum-seekers-silent-mental-health-crisis>

EU/Greece: Pressure to Minimize Numbers of Migrants Identified As 'Vulnerable' (Press Release)

European Pressure Affecting People with Disabilities, Others at Risk

June 1, 2017-10-30

<https://www.hrw.org/news/2017/06/01/eu/greece-pressure-minimize-numbers-migrants-identified-vulnerable>

Til: fln@fln.dk (fln@fln.dk)
Cc:

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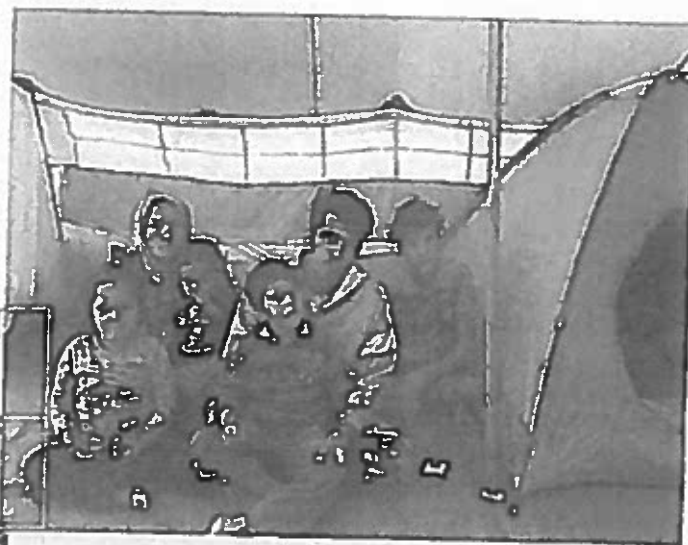
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Greece: Refugees with Disabilities Overlooked, Underserved

Identify People with Disabilities; Ensure Access to Services



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Yasami and Ali Habibi from Afghanistan, their 6 year-old twins and 2-year old son, and Ali's 14-year-old brother, have all lived in this tent at Eliniko camp in Athens when Human Rights Watch visited them in October 2016. Their 6 year old son has a learning disability and difficulties walking. Photograph by Emina Cerimovic. © 2016 Human Rights Watch

(Brussels, January 18, 2017) – Refugees, asylum seekers, and other migrants with disabilities are not properly identified and do not enjoy equal access to services in reception centers in Greece, Human Rights Watch said today. Together with

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thousands of other migrants and asylum seekers, they remain unprotected from freezing temperatures.

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3+ The European Union has provided significant funding to the Greek government, and to United Nations and nongovernmental agencies, to operate the centers on the Greek eastern Aegean islands, known as "hotspots," and camps on the mainland. But asylum seekers and other migrants with disabilities have particular difficulties getting basic services such as shelter, sanitation, and medical care, and like other vulnerable migrants, have limited access to mental health care. For example, one older woman who uses a wheelchair had not been able to take a shower for a month.

"People with disabilities are being overlooked in getting basic services, even though they are among the refugees and migrants most at-risk," said Shantha Rau Barriga, disability rights director at Human Rights Watch. "Greek authorities, the EU, the UN, and aid organizations should make sure that people with disabilities are no longer an afterthought."

Greece: Refugees with Disabilities Overlo...



Refugees, asylum seekers, and other migrants with disabilities are not properly identified and do not enjoy equal access to services in reception centers in Greece, Human Rights Watch said today. Together with thousands of other migrants and asylum seekers, they remain unprotected from freezing temperatures.

-  The UN refugee agency (UNHCR), eight international aid organizations, and one local group operating in refugee sites in Greece all told Human Rights Watch they have little to no targeted programs to respond to the rights and needs of asylum seekers, refugees, and other migrants with disabilities.

The deeply flawed EU deal with Turkey to return asylum seekers there, border closures along the Balkan route, mismanagement, and a lack of coordination among EU governments have left approximately 62,700 asylum seekers

and other migrants bottle-necked in Greece. According to the European Commission, as of January 12, 2017, only 7,448 people have been relocated or are scheduled to relocate under the EU Relocation Mechanism – about 12 percent of the 66,400 places agreed upon in 2015. Those left in Greece live in deplorable and volatile conditions, without access to adequate services and accommodation. Thousands of refugees are enduring extremely harsh winter conditions in flimsy tents across Greece with temperatures as low as -14 degrees Celsius. Those with disabilities are among those at particular risk.

People with disabilities are being overlooked in getting basic services, even though they are among the refugees and migrants most at-risk. Greek authorities, the EU, the UN, and aid organizations should make sure that people with disabilities are no longer an afterthought. ”

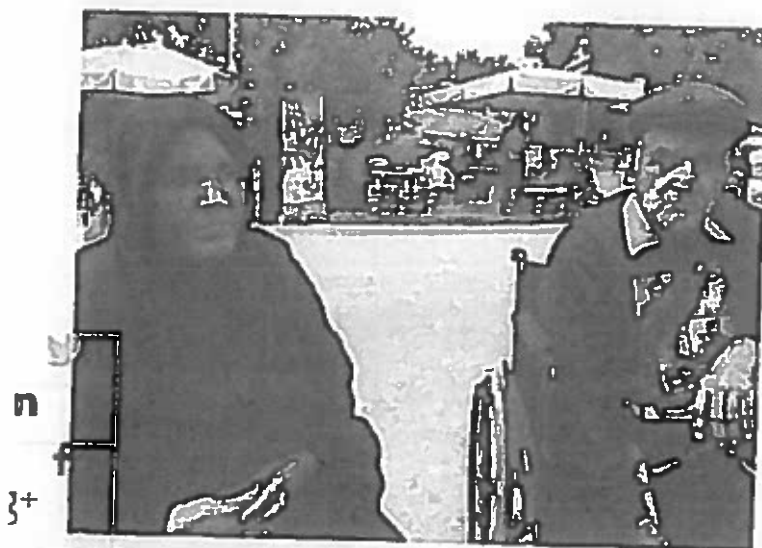


Shantha Rau Barriga
Disability Rights Director

On the basis of research carried out in mainland Greece and on the Greek islands in October 2016 and January 2017, and follow-up phone interviews in December 2016 and January 2017, Human Rights Watch found that asylum seekers and refugees with disabilities are not properly identified in Greece, in part because of a rushed registration process and the need for better

guidance for staff. Without an adequate understanding of the scale and needs, aid agencies cannot respond effectively.

Mental health services, much-needed by asylum seekers and other migrants, are also seriously inadequate. Half of the 40 migrants Human Rights Watch interviewed said they or family members are coping with trauma, anxiety, or depression as a result of the violence in their home countries, their treacherous journeys, family separation, or the uncertainty and insecurity in the camps.



✕ An older woman and man from Afghanistan, both with physical disabilities, live in Kara Tepe camp, on Lesbos and were unaware of the housing scheme for "vulnerable" groups. Both have had difficulty getting medical care. Photograph by Shantha Rau Barriga. © October 2016 Human Rights Watch

"Amra," a 19-year-old woman from Afghanistan, said she had asked to see a doctor in the Kara Tepe camp in Lesbos about her suicidal thoughts. "I don't want to hurt myself, I struggle myself," she said. An aid group working in the camp counseled her twice, she said, then told her they

couldn't help her further. She had a couple of sessions with a psychologist after the Human Rights Watch visit.

Since 2015, the European Commission has provided over €125 million to the Greek government and almost €370 million to aid agencies and international organizations to assist refugees, including the UNHCR. The Greek government and the UNHCR have been criticized for failing to use the EU funding to adequately improve conditions at the camps before the onset of winter, leaving thousands sleeping in freezing conditions.

The UNHCR and the Greek government should ensure that the allocated funds benefit all refugees without discrimination, including people with disabilities, Human Rights Watch said. The EU should request information from its implementing partners to ensure that programs it funds benefit people with disabilities and other at-risk groups. The EU and its member states should step up its efforts and provide additional resources to Greece, which is also coping with economic problems, and ensure that the aid is spread equitably across the camps.

Greek authorities, with support from other EU member states, the UNHCR, and aid groups, should immediately ensure that people with disabilities and other at-risk groups, including children, have equal access to assistance provided in refugee and migrant centers and camps – including water and sanitation services, food distribution, shelter, and health care including

mental health and psychosocial support. Failure to do so is discriminatory and violates the UN Convention on the Rights of Persons with Disabilities and EU law.

The UNHCR and the Greek government should issue clear guidance to field staff on identifying and registering people with disabilities, including disabilities that are not readily identifiable, such as intellectual disabilities or mental health conditions. The Reception and Identification Services and officials conducting asylum procedures should be trained on how to identify and respond appropriately to the needs of people with disabilities and to ensure access to services throughout the process. Refugees, asylum seekers, and migrants with disabilities should be included and consulted in these efforts.

With current winter conditions, the Greek government, with the support of the UNHCR, should prioritize urgently moving anyone with a disability, along with other at-risk groups such as pregnant women, children, and older people, who are still in tents to heated prefabricated housing units with hot water. All persons currently living in tents should be moved to appropriate accommodation as soon as possible.

In the long-term, the Greek authorities, with the support of the EU and the UNHCR, should end encampment for everyone and provide accommodation in the community. Living in camps can perpetuate the trauma of

displacement and increase other critical protection risks, including physical and sexual violence and health concerns.

“According to the UN, people with disabilities make up one-seventh of the world’s population, yet the UN and others have overlooked people with disabilities when it comes to responding to humanitarian crises,” Barriga said. “The dire situation for asylum seekers and migrants with disabilities in Greece is a wake-up call for the UN and the EU to start taking the issue more seriously.”

Identifying People With Disabilities

The Greek Reception and Identification Service (RIS) is required to provide for the reception of third-country nationals entering the islands under conditions that guarantee human rights and dignity in accordance with international standards. The service is responsible for referring asylum seekers to social services and providing psychosocial support and information on the rights of migrants and asylum seekers. The RIS, supported by EU agencies such as Frontex and the European Asylum Support Office (EASO), as well as by the UNHCR, is also responsible for identifying and registering people who belong to “vulnerable” groups upon their arrival, which should include people with disabilities, including mental health conditions.



Amin, 24, a Syrian deaf man in front of his tent in Lagkadikia camp, Thessaloniki. Amin rarely left this tent for months because he did not have his hearing aids, which were damaged on his journey to Greece. Photograph by Emina Cerimovic.
October 2016 Human Rights Watch

A number of aid organizations told Human Rights Watch, however, that the registration process fails to systematically identify people with disabilities. A medical professional working for Médecins Sans Frontières (MSF) in Greece said:

"There is a lack of resources, time, and expertise dedicated to the identification of vulnerable people. During the registration, if you don't say it yourself, no one will ask you. If it is a disability that is not obvious, visible, even if a refugee reports it – it won't be registered."

A large-scale exercise to pre-register asylum seekers on mainland Greece by the Greek Asylum Service, with the assistance of the UNHCR and the European Asylum Support Office, in June and July found that only one percent of the over 27,000 people had a disability – which the UNHCR officials acknowledged to Human Rights Watch is an underestimate. The horrific violence in Syria and Afghanistan, which

accounts for 47 and 24 percent of refugees in Greece, respectively, has caused physical disabilities and mental health conditions, in addition to the normal expectation of 15 percent.

Under Greek law, people such as pregnant women, children, victims of torture, and people with disabilities are considered “vulnerable” or at-risk, requiring access to special protection. This includes being exempted from the accelerated border process under the EU-Turkey deal, which is intended to send most asylum seekers back to Turkey. Furthermore, they should be given priority in the regular Greek asylum system and issued an asylum card while their case is being considered to allow them to move freely within Greek territory, including to the mainland, where they could have easier access to services.

n However, in early December, the EU suggested
f measures that aimed to increase the number of
}+ returns to Turkey, including abolishing the
exemption of “vulnerable” people from
admissibility assessment.

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5 On January 6, at a media briefing in Geneva, the
UNHCR said that the slow registration and
5 identification of “vulnerable” individuals has
delayed transfers of asylum seekers from the
islands to the Greek mainland before the onset
of freezing temperatures.

In the fall of 2016, the UNHCR adopted a policy to provide 20 percent of its housing for asylum seekers on track for relocation within the EU in

private apartments and hotels to “vulnerable” people. According to the UNHCR representative in Greece, as of December, 30 percent of this housing had been provided to “vulnerable” refugees. As many people with disabilities remain unidentified, according to aid organizations, they cannot benefit from this housing and continue instead to live in deplorable conditions in camps.

Yasami Habibi and her husband, Ali, from Afghanistan, arrived in Greece in March 2016 and were living in the Elliniko camp in Athens at the time of the interview. She said they had tried to register their 6-year-old son, who cannot speak and has difficulty walking, to no avail. Their son had not received any services, including much-needed medical care and rehabilitation services. With his two siblings, he sleeps on thin blankets inside one of the hundreds of tents that fill a baseball stadium in Elliniko camp.

 **n** Lack of identification particularly affects people with invisible disabilities, such as intellectual or **f** psychosocial disabilities, but even some people **3+** with visible disabilities had difficulties

 **5**  Registering. Ahmed and Fatima, an Iraqi couple in their late twenties, both have physical disabilities **5** that make it very difficult for them to stand or **5** walk. They said they were not allowed to register their disabilities because they did not have a medical certificate for proof. “When we went to register [on Samos Island] they asked us for proof that we have disabilities even though they can see we do,” said Fatima, who now uses a wheelchair.

A Norwegian Refugee Council representative said: "One of the problems is that inexperienced humanitarian staff are not fully trained in identifying disability. I was present when one unaccompanied child asked if he should be registered as disabled because he had severe burn injuries that affected his movement, and the person doing registration had not considered this as a disability and said, 'He is not in wheelchair, he is not disabled.'" The representative said the boy said he had received painkillers from medical staff, but no other medication.

Mental Health and Psychosocial Support

Human Rights Watch found a lack of access to adequate and appropriate mental health care across the camps in Greece. Nearly all refugees and asylum seekers interviewed reported having headaches, losing sleep and appetite, and feeling depressed. Children had regressed to bed-wetting.

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}+ Only three of 20 people interviewed who reported being in urgent need of psychosocial support could get it.



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about The conditions in the camp and uncertainty about their future are key factors in the high numbers of people in need of mental health services. "What is worrying is that the needs are increasing every day," a representative of Médecins Sans Frontières (MSF) in Greece said. "The main daily stressors of the individuals that we meet are the lack of certainty over the future,

the access to asylum procedures, which is stalled, the living conditions. Concretely if there are no improvements, the needs will be even bigger.”

Eleni Perraki, a psychologist with the humanitarian organization Doctors of the World (MdM), working in Lagkadikia camp in the Thessaloniki region, said: “We see many people with post-traumatic stress disorder, people who are traumatized, stressed [...] Some mental health conditions are the result of nothing else but daily life in the camp.”

Amer Omar, a psychologist with the humanitarian organization WAHA, Women and Health Alliance, has been working at Souda camp on Chios since March 2016. He said he thought nearly all of the 1,150 people there needed psychological support and mental health care: “Because life is very hard here... They have been in the camp for more than eight months – suffering the cold in winter, the heat in summer. They have their problems already from back home and journey – we have had several situations of nervous breakdowns.”

On several occasions, Human Rights Watch witnessed children, women, and men crying uncontrollably, or appearing agitated or distressed. Some said they had suicidal thoughts. A father of an 8-year-old boy with kidney disease said: “We are stuck in a place worse than Afghanistan. With the conditions like this, they push you to go back to Afghanistan. I would go,

but I can't because of security issues. Maybe at the end I will take my family and die in the sea in the same way as we came here."

In Athens, "Hadad" a 16-year-old boy, and his 55-year-old mother "Afia," from Afghanistan have been living in Schisto camp since March 2016. Hadad said: "We live trapped here. Like inside a prison. We cannot move, no one is saying what will happen to us." Afia said that her son had disappeared for six days and was found by the police and the UNHCR in the nearby forest. "He has so much anger," she said. "Sometimes he starts beating himself against the wall, causing himself injuries."

Afia said that the only help her son received was medicine "that makes him sleep a lot." She said that he had not been able to see a psychologist and that the situation was too much for her to bear: "Where? Who? Where are people to speak with?"

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f In contrast, "Suzan," a 50-year-old woman from Syria at Softex camp in Thessaloniki, was able to access help from a mental health professional and said that it had helped her greatly: "I went to a doctor for my back, and told him that we were dying in Syria and how tired I am of life. When he heard this, he took me to a psychiatrist here in the camp. The doctor was very kind, gave me advice, and I am better now."

Suzan said that the unsafe conditions in the camp and the daily worry of whether someone may harass her and her two children is the source of her depression.

For some, the trauma of what they experienced or witnessed in their war-torn home countries was the catalyst for mental health conditions.

"Hannah," a 47-year-old single mother of three, who together with her children was detained by ISIS in Syria for a week in September 2015, said: "My 11-year-old son still has psychological problems... [He] pees his pants. He is tall and robust but from the shock he is peeing his pants."

Her daughter "Lamye," 24, who was in her fourth year of medical school back in Syria, said she is having panic attacks: "I can't sleep. When I got to bed I feel like I am in a tomb. I feel like I'm choking and dying. I hear discussions about the war and I run away." Lamye said she now has an irregular menstrual cycle, which she attributes to the stress. She is one of only three people interviewed who reported seeing a psychiatrist or a psychologist twice a week.

Du'aa, a 56-year-old Syrian mother of three, witnessed a bombing in front of her home in 2013 that injured two boys. Du'aa and her daughter tried to rescue them but didn't succeed and both boys died. Her son, Tarek, 25, told us, "She now has psychological problems because she couldn't rescue them." Following this incident, Du'aa began to display symptoms which were later diagnosed as Parkinson's. She lost the ability to speak and has difficulties walking.

Since then, Duaa's physical and mental health have deteriorated. Tarek said Du'aa did not receive any psychosocial support in Kara Tepe camp on Lesbos, where they were living until December 2016. "I am obliged to help her, talk to her, make her laugh, otherwise she would have negative thoughts all of the time," Tarek said.

A representative of an international aid organization confirmed that because Du'aa can't speak, they were unable to provide her psychosocial support. In December, Tarek told a Human Rights Watch researcher that the UNHCR has moved him and Du'aa to an apartment on Lesbos.

Omar, the psychologist from WAHA, explained how difficult it was to provide psychological support to people who need it: "The basic rule in psychology is that the patient must change the environment around him and oblige himself to change his way of thinking. Here it is very difficult. I can't make refugees accept the life under sun, rain, hot, cold..."

Perraki, the psychologist with MdM in Lagkadikia camp in Thessaloniki, described some of the practical difficulties in providing adequate mental health care to people in need: "We did not even have a safe space where people would come to and speak about their problems. We were working outside for five months, in the heat, flies flying around. Now, we finally received a [transport] container which provides us with a place where people can feel safe behind closed doors."

A representative of one international organization said that some safe spaces in camps where women and children can receive psychosocial support are not accessible to people with physical disabilities: "For example there are no ramps to make them accessible," she said.

While some aid agencies assert that mental health services have increasingly been made available in refugee sites across Greece since June 2016, they recognized that it is not sufficient.

Omar, who is working at Souda camp in Chios, which held 1,150 people when Human Rights Watch visited, said that the mental health of people in the camp is getting worse every day and that violence, inadequate food, and lack of access to education affects the mental well-being of migrants and asylum seekers: "The situation is getting worse and violence is everywhere, even against women and children. It is traumatic for all children here because every day there are fights." Severe overcrowding, appalling conditions, lack of access to basic services, insecurity, and the failure of police to protect, are all reasons behind violence and harassment in the camps.

Access to Water, Sanitation, Hygiene Facilities



Lagkadika camp, Thessaloniki, home to 234 asylum seekers and other migrants, as of January 5, 2017. The rocky terrain in many camps makes it difficult for people who use wheelchairs to move independently, including to access basic services such as toilets or showers. Photograph by Emina Cerimovic. © October 2016 Human Rights Watch

The availability of accessible toilets is one need that aid groups have focused on, but even then only two of 15 camps of which Human Rights Watch has direct knowledge has ramps to the toilets, and uneven, rocky terrain and long distances prevented some people with disabilities from reaching these “accessible” toilets. One of the two camps that has ramps is a volunteer-run camp, PIKPA, on Chios.

“We have this wheelchair [for my 75-year-old father] but we cannot use it because of the terrain,” said a 25-year-old woman from Afghanistan in Moria camp.

The outdoor taps and showers in camps that Human Rights Watch visited were also not accessible for people who use a wheelchair. In one case, an older woman who uses a wheelchair had not taken a shower for a month.

Seven people with physical disabilities said they relied on family members or friends to bring them food and other items, such as hygiene items, from the distribution sites because of the inaccessible terrain.

Fifteen asylum seekers and migrants with disabilities told Human Rights Watch that they or their family members were not able to use toilets and other hygiene facilities because they were not accessible.

Naima, a 70-year-old-woman from Aleppo, Syria, who has diabetes and uses a wheelchair, has difficulty accessing the toilet and wash area in Cherso camp in Thessaloniki. Her daughter Hasne said: "It is very difficult to take my mother to the toilet. She crawls from the tent to the wheelchair – she can't take one step. I put her in the wheelchair, I fill the bag with bottles that I use to help her wash her hands and take ablutions [the Islamic practice of washing before prayer] because she can't reach the existing taps in camps from the wheelchair nor can she stand up."

Naima and Hasne said that accessing showers is no easier as there is a step at the entrance to the shower area: "My son helps us," Hasne said. "He puts another chair in the shower and helps me carry in my mother. He then waits outside. Every time I help her shower I get all wet so I also have to take a shower. We never have warm water and now it is very cold here so it is very difficult. And my mother, she is heavy."



Naima, 70, an older woman with a disability from Aleppo, Syria, with her daughter Hasne, in front of the shower area in Cherso camp, Thessaloniki. The showers are not accessible for people who use a wheelchair. Photograph by Lmina Cerimovic. © October 2016 Human Rights Watch

In Oreokastro camp in Thessaloniki, an 85-year-old Syrian woman in a wheelchair said she hadn't taken a shower in a month because of the difficulties in accessing the shower area and there is no warm water. Human Rights Watch

researchers observed a barrier to the entrance to the women's shower area and steps in front of each shower.

The Schisto and Eilniko camps in Athens and Lagkadikia camp in Thessaloniki had no accessible toilets or shower areas when Human Rights Watch visited in October.

Eight-year-old Ali from Afghanistan, who uses a wheelchair and lives in the Elliniko camp in Athens, did not have access to an accessible toilet. "It is very difficult for us to take him to the toilets," said Ayesha, Ali's mother. "I cannot do it by myself and other women in the camp protest if my husband enters the female toilet to help me

with Ali. So we finally decided I would go to the men's toilet, with Ali and my husband helping. Then, men got angry and protested, 'Why is a woman inside a men's toilet?'"

She said the toilets are also dirty and unsanitary. "We always have to first clean them before allowing Ali to use it." Because of these problems, they made a difficult decision to put Ali in diapers when they can get them.

While families of people with disabilities play a crucial support role, people with disabilities have an equal right to access water, sanitation, and hygiene facilities in the camps, independently and with dignity.

Guardian analysis of data provided by the EU shows also that 19 camps receive no designated EU funding for water-related infrastructure such as toilets and showers.

n Lack of Adequate Housing, Winterization

f In January, temperatures in Greece have dropped to -5 degrees Celsius on Lesbos, and to -20 degrees Celsius in other parts of Greece. Heavy snowfall covered the tents in the Moria refugee camps on Lesbos on January 9, where thousands of asylum seekers lived, according to aid organizations. Media have reported that refugees, including children and people with disabilities, are freezing in flimsy tents.

In December 2016, the EU, the UNHCR, aid groups, and the Greek government were accused of failing to use €90 million worth of EU funding to “winterize” the camps before the first snowfall.

On December 22, the UNHCR told Human Rights Watch it had provided heated containers to eight government-run sites for refugees in Greece and that 21,000 people have been accommodated in apartments, hotels, or other buildings. The UNHCR confirmed, however, that many people continue to live in tents.

According to the UNHCR website, as of January 10, more than 33,000 asylum seekers and migrants continued to live in informal and formal refugee sites.

Winter and the freezing temperatures are a source of anxiety and stress for camp residents.

The weather affects everyone, but particularly at-risk groups such as pregnant women, children, older people, and people with disabilities. Cold weather can also affect respiratory and circulatory systems, and it is especially hard for some people with disabilities to maintain body heat.

Mohammed, father of five children, including a 2-year-old boy and 13-year-old daughter with diabetes, have lived in Lagkadika camp in Thessaloniki since May 2016. In October, he expressed deep concern that despite dropping temperatures then, they had not yet been transferred from tents to containers. “We need

[transport] containers now,” he said. “When my children wake up in the morning, their little hands are blue, like ice from the cold.” In a phone conversation with Human Rights Watch on December 21, a UNHCR representative said the Lagadikia camp tents have been replaced by containers.

Delayed Access to Health Care, Lack of Adequate Medical Services

Among the biggest problems all refugees, asylum seekers, and other migrants face in Greece is access to timely and adequate health care.

Hospitals even struggle to provide adequate health care for Greek citizens, due to the general breakdown of the health care system, and a lack of resources amid the economic crisis. For example, on Lesbos, there is only one permanent psychiatrist in the public healthcare system for the entire island population.

However, asylum seekers and migrants with disabilities, who might require specific health or rehabilitation services or assistive devices, face particular obstacles and often struggle to get medical treatment or specialized care. Those interviewed described prolonged delays in seeing a primary care physician in the camp, high transport costs to local hospitals, administrative barriers, lack of information, and general lack of availability of specialized services, including rehabilitation centers.

While Greek law has extended the right to free health care, including in local hospitals, to asylum seekers, Human Rights Watch found that

asylum seekers, refugees, and other migrants with disabilities who need both primary and specialized medical attention are not able to access it. People who require orthopedic surgery, rehabilitation services, or medicines for chronic physical and mental health conditions such as epilepsy are particularly affected.

Five asylum seekers interviewed said they or their family members with disabilities had to wait up to a month to see a doctor in the camp. Tarek, the 25-year-old man from Syria who is supporting his mother Du'aa, 56, who has multiple disabilities, told us at the time of the interview that his mother had seen a doctor only once since they arrived in Greece in late August. "When we asked to see a doctor in Kara Tepe [camp where they are living] we were told to come in a month... Even the medicine she needs - I got it with so many difficulties."

     Davud, a 45-year-old man from Afghanistan in Schisto camp in Athens, has tremendous pain in his leg that keeps him awake most nights. He requires crutches to walk. He had been living in Greece for eight months but had not seen a doctor in a hospital yet. He said that doctors at the camp give him painkillers:

I went to doctors in the camp and they told me to speak with officials in the camp to get permission to go to the hospital but it has been three months since and nothing has happened. I went to ask again one month ago, then 15 days ago - nothing. Lately I've not been to doctors. It is crowded,

they don't see me easily. They only do painkiller injection, nothing else. I will end up having a permanent disability.

Twelve other people interviewed said that doctors in hotspots and camps just provide painkillers. A 25-year-old woman from Afghanistan said: "When I go to see doctors here, they just give some painkillers. Nothing else. Whatever problem you have, they give you painkillers."

At Schisto camp in Athens, the father of Mahmud, an 8-year-old boy from Afghanistan, said that camp doctors had diagnosed the boy with kidney disease and said he needs treatment he cannot get in the camp. "I just want him to get well," his father said in a trembling voice.

 Human Rights Watch did not have an opportunity to investigate with medical staff the issue of available treatment in the camps.

 International aid organizations on the ground confirmed the hurdles people face in accessing health care, including specialized care in local hospitals, partly due to administrative barriers. To get health care in the community, people have to obtain tax registration and social security numbers, but they are not told in the camps how and where to get the required documents. Some refugees with disabilities said that the lack of

affordable transportation or access to information on where to get the needed treatment are other obstacles.

Getting assistive devices is hard for some people. Amin, a 24-year-old deaf man from Syria, in Lagkadikia refugee camp in Thessaloniki area, said that his hearing aids from Syria were damaged by water in the rubber boat when he crossed the Aegean Sea in February 2016, and later by rain in Idomeni, on the border with Macedonia. Amin had received new hearing aids only two days earlier, in October. "The most difficult thing about the camp is that Amin feels isolated from everyone else," his father said. "He prefers to sit in the tent alone or go around the camp alone because no one can understand him."

Many chronic health conditions of people living in camps, such as hypertension, diabetes, epilepsy, and cancer, can lead to disability, increasing the number of people with disabilities.

n Access to rehabilitation services is particularly
f important to maintain physical functioning and
}+ to prevent deterioration from failure of early
✉ treatment and developmental disabilities among
§ children.

< Legal Obligations

The UN Convention on the Rights of Persons with Disabilities (CRPD) requires countries such as Greece, which became a party to the treaty in 2012, to ensure equal access to basic services such as sanitation, housing, schools, and medical facilities in the camps, including in emergency situations. Failure to do so is a form of

discrimination. The treaty states that countries should ensure the protection and safety of people with disabilities in situations of risk, including situations of armed conflict, humanitarian emergencies, and natural disasters.

The European Council and Parliament Directive 2013/33/EU, which was transposed into law 4375/2016, sets out minimum standards for the reception of asylum seekers. It states that “the reception of persons with special needs should be a primary concern for national authorities in order to ensure that such reception is specifically designed to meet their special reception needs.”

The directive also obliges member states to ensure that asylum seekers have access to necessary health care, including “at least, emergency care and essential treatment of illnesses and of serious mental disorders.” and “appropriate mental health care where needed.”

EU member states also are responsible for taking into account the specific situation of vulnerable people, which includes people with disabilities and mental health conditions.

Methodology

-  The research presented here is based on interviews Human Rights Watch conducted between October 16 and October 23, 2016, with 40 refugees, asylum seekers, and other migrants, including two children, in five facilities on the islands of Lesbos and Chios, which at the time was accommodating more than 10,500 asylum seekers and other migrants, as well as in four facilities in Athens and the Attica region, four in Thessaloniki and the surrounding area, and two in the western Epirus region. The interviewees

included 34 people with physical, sensory, intellectual, developmental, and psychosocial disabilities, or health conditions that might lead to disabilities, along with their families.

Each interviewee consented voluntarily to be interviewed by Human Rights Watch and none received any payment or other personal service or benefit in return for the interview. Names of some of the interviewees have been withheld to protect their privacy and security.

This report uses the term “person with disability” inclusively to describe those with long-term physical, intellectual, developmental, psychosocial, or sensory disabilities and those with mental health conditions.

Human Rights Watch also interviewed representatives from the office of the Greek ombudsperson, UNHCR officials, a camp manager, and representatives of the nine aid organizations.

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Region / Country Europe/Central Asia, Greece



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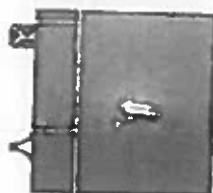
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Souda refugee camp on the island of Chios. Poor living conditions in the camp and overcrowded hotspots, with little to no access to basic services, such as sanitation and proper shelter is key factor that contributes to psychological distress. April 2017 Private/Human Rights Watch

(Brussels) – The EU-Turkey deal designed to stem migration and refugee flows to Greece has had a devastating impact on the mental well-being of thousands of women, men, and children trapped on Greek islands since March 2016, Human Rights Watch said today.

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May 23, 2017
Report

In research conducted in May and June 2017 on the island of Lesbos, Human Rights Watch documented the deteriorating mental health of asylum seekers and migrants – including incidents of self-harm, suicide attempts, aggression, anxiety, and depression – caused by the Greek policy of “containing” them on islands, often in horrifying conditions, to facilitate speedy processing and return to Turkey.

**EU: Older
Refugees
Stranded
in Greece**

“The psychological impact of years of conflict, exacerbated by harsh conditions on the Greek islands and the uncertainty of inhumane policies, may not be as visible as physical wounds, but is no less life-threatening,” said Emina Ćerimović, disability rights researcher at Human Rights Watch. “The European Union and Greece should take immediate action to address this silent crisis and prevent further harm.”



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The psychological impact of years of conflict, exacerbated by harsh conditions on the Greek islands and the uncertainty of inhumane policies, may not be as visible as physical wounds, but is no less life-threatening ”

Emina Ćerimović
Researcher, Disability Rights Division

Thousands of asylum seekers, including women and children, are trapped in worsening conditions in EU-sponsored processing centers –

so-called hotspots – and other facilities, amid an ongoing flow of new arrivals and slow decision-making on the part of the Greek government. In December 2016, the EU and the Greek authorities ended exemptions for vulnerable groups protected by Greek law from the requirement to remain on the islands.

The EU-Turkey deal, signed in March 2016, commits Turkey to accept the return from Greece of most asylum seekers who traveled through its territory and arrived on the Greek islands, in exchange for billions of euro in aid, visa liberalization for Turkish citizens, and revived negotiations for Turkish accession to the EU.

Human Rights Watch met in Greece with representatives from the United Nations refugee agency (UNHCR), International Organization for Migration (IOM), European Commission, Greek Asylum Service, local and international nongovernmental organizations (including disabled persons organizations and aid organizations), lawyers, and volunteers. Human Rights Watch also interviewed 37 refugees, asylum seekers, and other migrants on Lesbos, including unaccompanied migrant children. The vast majority of interviewees described the deteriorating mental health among asylum seekers and other migrants trapped on Greek islands.

“Camps are places where vulnerabilities are created,” one IOM official said.

Médecins Sans Frontières (MSF), which provides medical care on the islands of Samos and Lesbos, reported a high prevalence of depression, anxiety, and psychosis, and a significant increase in suicide attempts and incidents of self-harm, particularly since January 2017.

The trauma of war or forcibly leaving homes is enough to trigger anxiety and post-traumatic stress disorder (PTSD) in asylum seekers and migrants. But medical personnel interviewed said that mental health of asylum seekers and migrants has been impacted by factors related to the EU-Turkey deal. These include insecurity; harsh camp conditions; lack of access to services and information about the asylum process and their prospects for the future; delays in the asylum procedure; detention and fears of being detained and deported to Turkey; and feelings of hopelessness.

Rahiha Hadji, a 33-year-old Kurdish mother of four children from Syria who was detained at the Moria hotspot on Lesbos, was refused asylum protection in Greece on the basis that Turkey is a safe third country for her and her family. "My hope is dead since they brought me here," she said. "We saw all the terrible miseries [in Syria] but me and my children haven't seen a jail [until coming to Greece]." She was awaiting deportation to Turkey.

An EU official in Athens confirmed the negative impact that prolonged uncertainty has had on people's mental health on the islands. Asked what steps the EU will take to address the issue, the

official said the aim is to speed up the asylum process and to increase returns to Turkey in a timely manner, thus preventing people from being trapped on the islands for longer than needed.

While length of the asylum procedure is one factor contributing to people's distress, speeding up the process could undermine the effective exercise of asylum seekers' rights. The length of asylum procedures should not be reduced at the expense of the quality of the process. Human Rights Watch has documented cases since the EU-Turkey agreement entered into force in which there were no interpreters, or inadequate ones, during asylum and admissibility interviews and serious gaps in access to information and legal assistance.

Registration and examination of asylum claims on the islands are prioritized based on nationality, resulting in severe delays for people of some nationalities, including for people from Afghanistan and Iraq. Asylum seekers from countries with a relatively low claim recognition rate, such as Algeria and Morocco, are often detained because Greek authorities allege that they apply for asylum merely to delay or frustrate returns to Turkey, raising concerns about the use of arbitrary detention based on nationality.

This differential treatment, and frustration at delayed procedures, has led to unrest in the hotspots and island detention facilities and psychological distress, Human Rights Watch found.

Greek authorities, with EU support, should ensure asylum seekers have meaningful access to a fair and efficient asylum procedure based on individual claims, not nationality. Asylum seekers should be admitted so that their claims for protection can be examined on their merits in Greece. The EU and the Greek government should work together to ensure that people receive timely and accessible information in a language they understand.

In addition, the Greek government should end the containment policy on the islands, including for at-risk groups, and, with EU and UNHCR support, transfer asylum seekers to the mainland and provide them with adequate accommodation. The Greek government should also enroll all children in schools, and provide adults with work visas and an opportunity to work.

"The European Union and the Greek government should work to restore the dignity and humanity of people seeking protection, not foster conditions that cause psychological harm,"

Ćerimović said.

inhumane Policies

The EU-Turkey deal aims to return most asylum seekers from the Greek islands to Turkey under the flawed assumption that Turkey is a safe country for asylum seekers, without considering the merits of their asylum claims in Greece. Since the deal entered into effect on March 20, 2016, tens of thousands of people have been bottlenecked in deplorable and volatile conditions on

Greek islands. According to governmental figures published by UNHCR, 12,873 asylum seekers are currently on the Greek islands. Thousands of them are living in extremely harsh conditions in overcrowded facilities while their protection claims are being processed.

An Action Plan between the European Commission and the Greek government published in December 2016 recommended that Greece take tougher measures aimed at increasing the number of returns to Turkey. Those measures included ending exemptions for vulnerable groups and people eligible for family reunification from the requirement to remain on the islands and requiring them to go through a fast-track admissibility process. The commission also recommended expanding detention on the islands and curbing appeal rights.

The Greek government is already carrying out some of these measures, including by increasing detention capacity, and by containing people identified as "vulnerable" on the islands until the first instance examination of their asylum claim under the regular procedure. In April, the government adopted a policy excluding asylum-seekers on the Greek islands who appeal negative asylum decisions from the possibility of participating later in the IOM Assisted Voluntary Return and Reintegration (AVRR) programme, which offers voluntary returns to the home countries of asylum seekers, and forcing those who wish to participate to forego their right to appeal.

In May 2017, Human Rights Watch documented that the EU is inappropriately pressing Greek authorities and medical aid organizations to reduce the number of asylum seekers identified as "vulnerable," including people with disabilities, torture victims, and other at-risk groups. As a result of not being identified, at-risk people struggle to get the protection and assistance to which they have a legal right.

Factors Causing Psychological Distress

Insecurity and Uncertainty

The insecurity in the camps and uncertain futures, including when the first asylum interview will take place or when the decision will be made, have increased the risk of distress among asylum seekers trapped on the Greek islands.

Nakibullah, a 16-year-old boy from Afghanistan, said: "I've been here for 10 months and I am worried about what will happen.... I am not well mentally because I live in insecurity."

"Hamid," an 18-year-old Bangladeshi stranded on Lesbos since November 2016, said, "It's been a while that I live here and every day that passes is worse.... My biggest stress is about what will happen the next day. What tomorrow will bring. Why are you keeping me here?"

Detention and the risk of deportation to Turkey is another catalyst for anxiety, depression, or self-harm. "This is especially the case since [increased] detention and deportations became a

reality in the last few weeks," a lawyer on Lesbos told Human Rights Watch in May. Twenty-two people were deported back to Turkey the week before Human Rights Watch's visit to Lesbos on May 18. A total of 1,210 people had been returned back to Turkey by June 13, since the deal entered into force in March 2016.

Greek authorities transferred "Ahmad," a 20-year-old Syrian, in May 2017 from Chios island, where he had lived since August 2016, to the Moria pre-removal detention center on Lesbos. "We came here and we don't know if we are going back to Turkey or whether we are going back to Chios," he said. "I'm in a nervous situation. Being between [other detainees] makes me nervous. Yesterday, an Algerian guy hurt himself.... My feelings are dead." Two other people in separate interviews confirmed that an Algerian man had harmed himself by cutting.

In response to EU prodding, Greece is taking some steps to speed up the asylum process. Authorities recently started to apply a fast-track procedure provided for in a Greek law adopted in April 2016 that entails examining the admissibility or eligibility of international protection claims within 15 days, including appeal.

"More frequently, new arrivals have their interviews scheduled in the first five days of their arrival," said Lorraine Leete, a lawyer from the Lesbos Legal Centre, which provides legal advice

to asylum seekers and other migrants on Lesbos.
"They are not given adequate time to prepare for interviews or meet with the lawyers."

MSF said that it takes time and expertise for experiences of abuse, torture, or persecution to come to light. Reducing the length of asylum procedure should go hand in hand with an improved capacity to detect people's "vulnerabilities" while maintaining their right to appeal.

Harsh Camp Conditions

Extremely bad living conditions in overcrowded hotspots with little to no access to services is another key factor that contributes to deteriorated mental health. An MSF representative said that on Samos, they see more and more refugees intentionally harming themselves.

   "Imran," a 15-year-old boy from Afghanistan who lived for more than 10 months in overcrowded and volatile conditions at Moria, said:



 I've been 10 months here [on Lesbos] and the situation is very difficult. I am not well at all here. I have 'psychological problems' that I also had in Afghanistan. During my time here, they have worsened because I live under these conditions. I've reached a point where I harmed myself three times. Now, I [get counseling and] am on medication.... I also have pain in my stomach. It

hurts. I don't sleep much. I don't fall asleep easily. I might fall asleep at 3 or 4 in the morning and wake up by 8. I feel awake all the time. I don't have an appetite and energy.

An MSF representative said that poor conditions in hotspots are especially harmful to people with mental health conditions or torture victims: "For persons who have experienced extreme violence in detention back in their countries of origin, a place surrounded by barbed wire, the presence of police, and violent clashes clearly cannot be a proper place for them."

Amir, a 26-year-old asylum seeker from Iran who has been detained on Lesbos since mid-April, including for 20 days at a police station cell, said: "I am not good because in Iran I was in a military prison and while I'm here I see the fences and I remember my past [...] During the first week I was here, I couldn't sleep all week [...] I had nightmares of the torture I've been through in the military prison."

Halid," a 16-year-old boy from Afghanistan who has been living in Moria since December 2016, said harsh camp conditions, uncertainty, and fear of deportation exacerbated psychological distress he felt while in Afghanistan:

When I first came here it was very hard because I didn't know anyone. Now I see a psychologist. I speak, and I feel a bit better. Back in Afghanistan I did not feel well with everything that happened. Here, the conditions didn't help. And now, the fact that I don't know what will happen in the future also makes me not feel well. I am afraid of being deported.

The hotspots were originally designed as registration and transit centers where people were supposed to stay for short periods, not as places of indefinite containment.

An MSF representative said that the treatment of refugees, including being contained on the islands and in camps, not only exacerbates existing mental health conditions but also creates new psychological distress:



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There are many people with PTSD, due to violence they have experienced in their home countries or because of trauma they have experienced during the treacherous journey, but the uncertainty of what is going to happen and the living conditions on the island [Lesbos and Samos] further exacerbates the symptoms and creates new mental health conditions. We have new cases of people with anxiety, depression, self-harm, and more people will most likely develop new forms of mental health conditions due to the conditions on the islands.

"Bilal," a 26-year-old asylum seeker from Syria with a mental health condition, has been detained on Lesbos for more than three months pending return to Turkey. He said he was held for more than two months at a police station cell, where he said he attempted suicide, before being moved to Moria. "All this time [at the police station] I had seen no doctor," he said. "Then I hurt myself in the police station, and then they [the police] brought me here [to Moria]."

"Anush," a boy from Afghanistan who was registered by Greek authorities as 20 but says he is 16 and is living with the general population in Moria since the end of August 2016, said:

I feel very bad. Whatever you do, even if you change it [Moria], it is not a place to be. Psychologically I feel very bad. I go to a psychologist and a psychiatrist, every week for a month now. It helps but when you live in Moria it doesn't help. From the moment I got here, my psychological well-being got worse because of all the situation and whatever happens in Moria. We came here because of a better life but there are lots of problems.

An NGO worker following Anush's case added: "[He] has lots of psychological 'problems'. We visited a psychiatrist, we visited a neurologist but

as he says, if the conditions don't change, this doesn't help. He has lots of anxiety and at least one panic attack per day. His fingers are trembling and he has severe headaches."

Discriminatory EU and Greek Policies

The discriminatory policy adopted by Greece that is based on nationality, not individual cases, is another source of mental anguish. An MSF representative said:

The procedure is different for nationalities of applicants within the recognition rate [granted protection] below 20 percent. Such discriminatory procedure is not comprehensible. The person rightly believes that their case should be assessed on the basis of their individual claim, not their nationality, but that is not happening on the islands. The system completely destroys the dignity of people.



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**Asylum Process Stress**

Two lawyers providing legal advice to asylum seekers on Lesbos said that the Greek Asylum Service (GAS) has taken some steps to schedule interviews and issue written notices for dates that, if kept, would allow for relatively prompt consideration of claims, but it has not been consistent in keeping those appointments.

For example, the interview for "Anar," a 27-year-old man from Afghanistan, has been postponed without explanation at least 5 times during the 10 months he has lived in Moria. "It's made me 'crazy,'" Anar said. "When I think of the person I was 10 months ago when I first arrived and the person I am today, it's not the same person."

Leete, the lawyer providing legal advice to Anar and other asylum seekers on Lesbos, confirmed that Anar's first interview was postponed without explanation. Leete added that Anar's experience is not unusual. "Many go there regularly on the scheduled day of the appointment, wait for hours, only to be told to come instead another day," Leete said. She added that Rohingya from Myanmar, who had been on Lesbos for nine months at the time of our interview, in mid-May, are repeatedly given new dates, because the asylum service says it cannot get interpreters.

Many people also fear having their asylum claim rejected. A member of a Syrian Kurdish family of five who were rejected on both first and second instance hearings said:

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We got rejected twice. We were in Kara Tepe [open camp on Lesbos] one month ago. My husband went to renew the [asylum] application card. He went inside the asylum office and the police arrested him. The police then came to my room, inside Kara Tepe and brought us here [Moria]. They didn't even let us take our stuff.

Later the police brought our stuff. For four days I didn't eat at all, I went on a hunger strike. And they took me to a hospital.

One of the lawyers interviewed and a representative of MSF confirmed that the family had been denied full examination of their claim in Greece on the basis that Turkey is a safe third country for them, and has been detained in a closed compound inside Moria since April 28. A family member said:

When we arrived here first, the lawyer told us, 'You will get out in 10 days.' But, we don't know how long we are going to stay here. They should tell us. Is it two months, three months? If you killed someone the court would say, 'you are going to be in jail for six years.' But to us, they don't say anything.

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- ✉ Leete said that one of the biggest tragedies of the declining mental health of refugees in Greece is that people who have a right to international protection and who are refugees under EU and Greek law are in fact being denied protection:

Many people have given up and are volunteering to go back to their home countries. They came to Europe seeking safety, they are not finding it here, and are instead trapped on the islands. They don't know if they will be allowed to stay, or returned back. Will they be rejected as other people who have had valid claims? That's the biggest tragedy: the system has come to the stage where people 'volunteer' to go back to the countries where their lives might be in danger. And when I say 'volunteer' that should be put in a quote as I think it is a forced departure. Everyone who came to Greece, and decided to risk their lives, came here for a reason.

A representative of Doctors of the World (MDM), an international organization which operated in Moria until end of June 2017, said: "Not only are we not meeting their needs, but [the system] is doing more harm."

n The feeling of helplessness and lack of activities
f are other factors that influence people's mental
}+ health. "They have fought for months, nothing
has changed," an MSF representative said. "It is
also the feeling of not being able to change
anything, of not having anything to do, the feeling
of hopelessness and uselessness."

Nakibullah, the 16-year-old boy from Afghanistan who has been trapped on Lesbos for 10 months, said: "I am losing my time here.... Here time goes by without anything happening."

Region / Country Europe/Central Asia, Greece
Topic Refugees and Migrants, Disability Rights,
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