

MÉDECINS DU MONDE 世界医生组织 DOCTORS OF THE WORLD منظمة أطباء العالم العالم LÄKARE I VÄRLDEN MEDICI DEL MONDO ΓΙαΤροί ΤΟυ Κόσμου DOKTERS VAN DE WERELD MÉDICOS DO MUNDO MÉDICOS DEL MUNDO 世界の 医療団 ÄRZTE DER WELT द्विया के डॉक्टर MÉDECINS DU MONDE 世界医生组织 DOCTORS OF THE WORLD أطباء العالم المكلمة LÄKARE I VÄRLDEN MEDICI DEL MONDO ΓΙαΤροί ΤΟυ Κόσμου DOKTERS VAN DE WERELD MÉDICOS DO



# KARA TEPE MANROVOUNIRIC

## LESVOS ISLAND / GREECE UPDATES

November, 2020



MÉDECINS DU MONDE 世界医生组织 DOCTORS OF THE WORLD منظمة أطباء العالم العالم الملكم LÄKARE I VÄRLDEN MEDICI DEL MONDO ГІАТРОІ́ ТОИ КО́ФНОИ DOKTERS VAN DE WERELD MÉDICOS DO MUNDO MÉDICOS DEL MUNDO 世界の 医療団 ÄRZTE DER WELT द्विया के डोक्टर MÉDECINS DU MONDE 世界医生组织 DOCTORS OF THE WORLD أطباء السالم LÄKARE I VÄRLDEN MEDICI DEL MONDO ГІАТРОІ́ ТОИ КО́ФНОИ DOKTERS VAN DE WERELD MÉDICOS DO



### INTRODUCTION

As of 30 September 2020, Greece counts 121,100 migrants and refugees – 98,200 in the mainland and 22,900 on the islands. Reception centers on the islands are overcrowded and conditions are dire with many refugees living in unsuitable tents or makeshift shelters. Medical assistance and WASH facilities are lacking. Women and girls face difficulties in safely accessing services. The five reception centres on the Greek islands designed for 5,400 people hosted more than 30,000 people during the summer.

Moria's Reception and Identification Center and the olive grove sites around it were burned to the ground after 6 hours of wildfire on 08.09.2020. More than 12,000 individuals - the majority of them families and children - remained homeless. Thousands, including women with babies, children, the elderly, the sick, the disabled, fled in panic.

A new temporary site was set-up by Greek authorities that undertook the overall responsibility for the management and coordination of the humanitarian response, with the support of UNHCR and other international organizations. The new Kara Tepe site is located in an army's former shooting range, next to the sea, on the main road that connects the city of Mytilene with Panagiouda village. The new camp was set in record time and it's massive: its hosting capacity exceeds 10,000 people (the biggest in Europe). Still, there are grave shotfalls such as regular electricity and water supply issues that have not yet been resolved, resulting into the camp's conditions being extremelly challenging, especially in view of the upcoming winter.





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In terms of infrastructure, there is a big medical area in the front after the main entrance of the camp.

The camp has 6 different zones:

- The entrance and the medical area;
- The two quarantine/isolation zones (for Covid 19 cases). Newcomers that are positive are held there for seven days;
- Four zones for accommodation, the blue, the green, the yellow, and the red.

People staying in tents need all sorts of NFIs in order to set up their households. Most carried few belongings with them, other nothing. Women and children in particular, that amount to approximately half of this population, are in dire need of gender and age sensitive health support.



People's health is already challenging. There are a lot of vulnerable people, among them pregnant women, young children and infants, the elderly, positive or suspected COVID-19 cases, chronic patients, people in shock, people having experienced physical and/or psychological trauma. At the same time, Public Health System in Greece and Lesvos has its own limitations exacerbated by Greece's socioeconomic crisis and Greece's and Europe's reception crisis. The second wave of COVID-19 has only worsened things. Cases have spiked country-wide while a total of 243 confirmed cases of coronvirus have been detected among refugees and asylum-seekers of Kara Tepe tent city, government spokesman Stelios Petsas said on 21.09.2020.

According to European Observatory of WHO on Health Systems and Policies, Greece ranks very low in health system surge capacity<sup>1</sup>, lacks a balanced distribution of health care resources and personnel, and adequate mechanisms for planning and managing it<sup>2</sup>. Mytilene's hospital with the existing ICU capacity are already having difficulty to manage.



<sup>1</sup> The ability of the healthcare system to triage and treat patients at times of large-scale surge in demand for services. Surge capacity has four elements: 1) staff (medical personnel, doctors, nurses, pharmacists), stuff (equipment, supplies), structures (hospitals) and systems (successful coordination and management of various levels of the healthcare system).

<sup>2</sup> OECD: Greece: Country Health Profile 2019, State of Health in the EU, OECD Publishing, Paris, https://doi.org/10.1787/d87da56aen. Available at: https://ec.europa.eu/health/sites/health/files/state/docs/2019\_chp\_gr\_greece.pdf





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### **MDM'S RESPONSE**

MdM Greece is operating on the island of Lesvos as a main medical actor, since 2012. The day after the fire, an emergency medical team was formed with medical staff, already on the ground and active in Kara Tepe camp performed consultations and provided medical care and sypport to people fleeing Moria. Several cases of pregnant women that were in immediate need of assistance were among the people that needed emergency medical support and referals.

MdM-Greece was among the first actors to enter the new camp. Initally operating in Medical Mobile Units, the medical team on the ground provided PHC services to people in need, performed medical screening for COVID-19 cases in close collaboration with MoH/EODY colleagues, referals and case management of the most complicated cases. MdM-Greece also seconded MDs to MoH/EODY in order to cover necessary daily shifts (also within the weekends).

After a couple of days, space was provided to MdM-Greece by the camp's management inside the designated medical area and tend in order to perform health operations.

More specifically, MdM-Greece is now responsible for the emergency medical coverage of 2 residential zones of the camp -amounting to ~ 3,000 people- while we continue mainsteaming referals and outreach in view of reaching the ones that are most in need.

Case management and tailored support is provided to the most complicated cases through collaboration with other actors. Moreover, MdM-Greece continues to second medical to MoH/EODY -a midwife and a gynecologist- in order to cover necessary medical shifts in the camp.

Viewing health and well being as socially determined, MdM implements an enhanced approach to health that also takes into consideration and complements issues interconnected with other sectors of intervention and support.

The "standard" package of PHC services MdM-Greece offers includes medical screeing and diagnosis, triage (i.e. prioritization) outreach, referrals to other necessary medical services (e.g. labs) inside and outside the camp and provision of necessary medication for chronic patients. SRH services are also part of this package.

MdM's SRH team are familiar with the mentality of refugees/migrants, having worked in their countries of origin as well as with the medical techniques (e.g. contraceptive implants) used there. Moreover, MdM medical staff is familiar with the specificities and management of special groups of population such as SGBV survivors, people with stress and mental health issues, drug-users, etc.



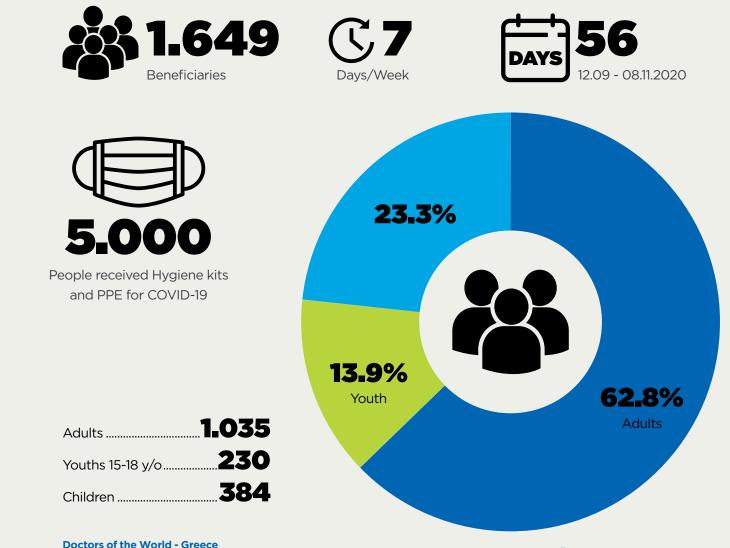
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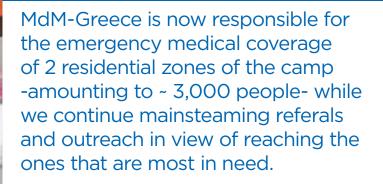
Our medical doctors interconnect (chronic) patients with other necessary diagnostic health services -e.g. with labs performing biochemical blood tests in adult patients with chronic conditions such as diabetes mellitus, hypertension, coronary heart disease etc. The same approach is followed in regards to pregnant women, mainly of African origin, with advanced pregnancy, who have not undergone any prenatal or ultrasound screening.

Looking towards prevention and access to education, MdM-Greece performs necessary vaccination coverage to pre-school and school-age children in order for their Idividual Health Bokklets (ADYM) to be issued in cooperation with the Ministry of Education thus allowing refugee and migrant children to be registered and attend schools.

The team on the ground provides services 7 days/week. 1,649 people have been benefited by the team's medical intervention from 12.09.2020 to 08.11.2020 (56 days) (1035 adults, 230 youth: 15-18 y/o and 384 children). 5.000 camp's residents have received Hygiene kits and PPE for COVID-19.



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THOTCLIMATE



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## **COLLABORATION WITH OTHER ACTORS**

MdM-Greece is an MoH/EODY partner regarding COVID-19 response and a UNHCR partner implementing health services in the (old) Kara Tepe facility in Lesvos. It is also in contact and collaboration with the Ministry of Migration and Asylum and the General Secretariat of Reception of Asylum Seekers. Inside the new Kara Tepe camp, MdM-Greece medical team is in contact and collaboration with all partners invloved in the response.

## **STRATEGY**

MdM-Greece implements a coherent plan that combines the operation of static health structures - i.e. open polyclinics- and the deployment of medical mobile units (MMUs) in view of timely and systematically responding to the health and wellbeing challenges faced by refugees and migrants in Greece today and at the course of their migratory routes in general. The overarching strategic priorities of the organisation in this regard, are to strengthen the resilience of the most vulnerable asylum seekers to deal with the current situation and to offer access to a comprehensive package of Primary Health Care Services (PHC) to the most vulnerable asylum seekers and refugees.

MdM-Greece perceives health through the broader prism of personal and social well-being. With this in mind, it also recognises and intervenes on the basis of social determinants of health but also on issues relating to the concept of health as a human right for all. In its effort to achieve Universal Health Coverage, in line with WHO and the 2030 Agenda for Sustainable Development, we focus on the most underprivilledged and marginalized: «As we embark on this journey, we pledge that no one will be left behind»<sup>3</sup>.

#### GENDER

MdM mainstreams a gender sensitive approach throughout its operations. Respecting Diversity, Gender and Age is one of our fundamental principles, in order to best reach affected populations — often the most vulnerable — and respond adequately to their specific needs.

#### **DO NO HARM & HUMANITARIAN STANDARDS**

MdM follows a person-centered approach always putting beneficiaries first and observing the humanitarian principle of "Do No Harm". The Organization maintains sets of elaborated safeguarding policies (e.g. Children protection, Vulnerable adults, PSEA etc.) that are updated, according to need; MdM-Greece medical and MHPSS protocols follow UN, WHO, IASC and ECDC standards; the Organization's Code of Conduct is based on the universal declaration of human rights. In terms of quality programming, MdM-Greece follows and adjusts sphere standards, according to the field realities.

3 https://www.uhc2030.org/fileadmin/uploads/uhc2030/Documents/Key\_Issues/UHC2030\_civil\_society\_engagement/CSEM\_ GMR\_Commentary\_2019\_EN\_WEB.pdf



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