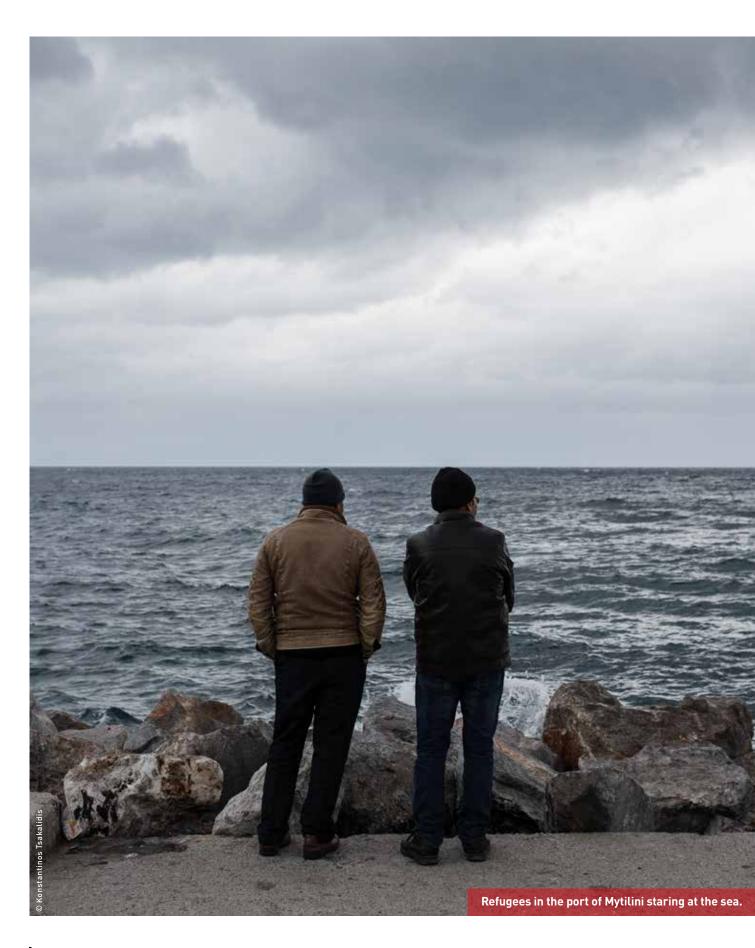
GREECE ———

Confronting the mental health emergency on Samos and Lesvos

Why the containment of asylum seekers on the Greek islands must end







Executive summary

Asylum seekers held on Greece's islands are in the midst of a mental health emergency. Many have lived through extreme violence and traumatic events. But it is the conditions they face in Greece, including the continued violence and the lack of appropriate services, which are pushing them into hopelessness and are greatly compounding their mental health suffering.

PEOPLE FLEEING WAR AND VIOLENCE...

- On Samos, a survey¹ conducted by MSF and Epicentre² in late 2016 and early 2017 found that 95% of the people surveyed had fled from war.
- 80% of our new mental health patients treated in July and August 2017 on Lesvos reported experiencing violence³ (47 out of 59 patients), just over a quarter reported experiencing torture (16 out of 59 patients) and 19% reported experiencing sexual violence (11 out of 59 patients). This violence was experienced in people's country of origin, in transit and in Greece.

FACE CONTINUED VIOLENCE...

- On Samos, close to half of the people surveyed reported having experienced violence⁴ while passing through Turkey and close to a quarter said they had experienced violence since arriving in Greece. Half to 70% of that violence was allegedly committed by state authorities. The survey also found that people who arrived on Samos after the EU-Turkey deal reported more violence in Turkey and Greece than people who had arrived before the deal.
- Our medical teams on Lesvos have treated the medical and mental health consequences of exposure to violence along people's journey and in Greece. Following a riot in Moria Reception and Identification Centre (RIC) on 18 July 2017, MSF medical teams treated 14 people for injuries ranging from bruises to broken bones and internal organ damage. All patients reported violence at the hands of the police.
- This continued exposure to violence increases the risk that people's existing mild or moderate mental health symptoms will develop into much more severe ones.

AND A DETERIORATION OF THEIR MENTAL HEALTH.

- The scale of people's mental health needs is overwhelming: on Lesvos, 110 patients were referred to us by other actors between early July and 21 August 2017 which represents a 50% increase compared to the period April-June 2017. In addition to that, an average of six to seven people have presented to our clinic each week since July, requiring immediate and urgent care linked to attempted suicide, self-harm, psychosis and other emergencies.
- People's mental health condition is worsening: the percentage of mental health patients on Lesvos that need to be referred to a psychiatrist increased from just over a third of new mental health patients in late 2016 and the first half of 2017 (35 out of 99 patients in a period of nine months), to close to three quarters of our new mental health patients in August 2017 (22 out of 30 patients in a period of one month).

We are concerned that this deterioration will continue as extremely vulnerable people from formerly besieged areas of Iraq and Syria continue arriving, and as the identification of vulnerable people and the provision of medical, legal and other support are critically lacking.

MSF CALLS FOR THE FOLLOWING IMMEDIATE ACTION

- Asylum seekers arriving on Greek shores must be able to move to the Greek mainland. It is a humanitarian imperative. The EU-Turkey deal's policy of containing asylum seekers on the islands pending a decision on their fate is untenable and inhumane. Their extreme vulnerability and high needs for protection and specialised care render their processing on the island illusory and dangerous.
- In parallel, the provision of mental health care, including psychiatric care and other crucial services, must be urgently stepped up on the islands to meet the needs of this extremely traumatised population.

A high exposure to violence and traumatic events

FLEEING FROM AND THROUGH VIOLENCE

Asylum seekers arriving on Greece's shores have been widely exposed to traumatic events, which increases their vulnerability to mental health disorders, including depression, anxiety and post-traumatic stress disorder.

In late 2016 and early 2017, the study conducted by Epicentre and MSF found that just under half of the people surveyed in Ritsona⁵ and 95% of people surveyed in Samos said that they had fled from war. The qualitative part of the survey confirmed this high prevalence of violence and highlighted how leaving their country was seen as the only possible alternative to avoid death.

80% of our new mental health patients treated in July and August 2017 on Lesvos reported experiencing violence (47 out of 59 patients), just over a quarter reported experiencing torture (16 out of 59 patients) and 19% reported experiencing sexual violence (11 out of 59 patients).

Having fled from violence, many patients explained that they faced further violence and trauma during their journey to Greece. In Samos, close to half (45%) of people surveyed reported having experienced violence in Turkey.⁶ 60% of that violence was beatings, 70% of which was committed by the police or army and 18.7% by smugglers. The survey also found that people who had arrived on Samos after the EUTurkey deal reported more violence in Turkey than people who had arrived before the deal.

My wife, two children and I had to leave our lives in Mosul behind. We left one day, with nothing, so that no one would be suspicious and target us. People were looking for us, they killed my brother and father. We had no choice.

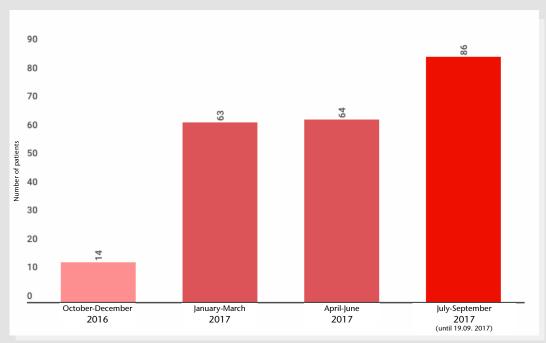
42-year-old man from Iraq, Samos, September 2017



A HIGH INCIDENCE OF SEXUAL VIOLENCE

In Lesvos, MSF teams treated 213 survivors of sexual violence between January and mid-September 2017. Between 1 and 19 September alone, our Lesvos medical team treated 30 patients for such violence. Overall, half of these patients experienced the sexual violence in their country of origin (112 patients), a quarter in Turkey (61 patients) and ten percent were raped multiple times (21 patients). Close to 80% of the survivors of sexual violence we treated were from the Democratic Republic of Congo, Eritrea, Ethiopia and Cameroon.

Number of survivors of sexual violence treated in MSF's Lesvos clinic (October 2016 - September 2017)



Note: The increase in sexual violence cases treated by our Lesvos team is partly linked to the growing knowledge of our services.

Significantly, only a third of our patients on Lesvos that have been survivors of sexual violence have been identified as vulnerable⁷ – despite such violence clearly being in the list of officially recognized vulnerabilities. This critical gap in identification⁸ means that most patients will not get access to the protection and care that they need, and will not be transferred to the mainland. In addition to this, lack of appropriate medical care and services for survivors of sexual violence on Lesvos means that those that require urgent care in the critical 72 hours after an attack on the island are unlikely to have access to it.

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I arrived in Turkey on 1 March and someone was waiting for me at the airport with a sign with my name written on it. When he took my bag I knew something was wrong. [....] He told me that they wanted to get their money back [...]. In the basement where he took me there was only a little mattress and barely any light. The place was condemned and it was impossible to get out [...] one white man entered the room. [...] I tried to fight him. He strangled me while I was shouting, I cried so much. They forced me with five to seven men per day [...] sometimes it was two men at a time. [....] I have a respiratory problem so one day, I faked a breathing crisis and managed to escape. [...] When I saw the water of the sea I felt so relieved...

27-year-old woman from Cameroon, Lesvos, September 2017

CONTINUED VIOLENCE IN GREECE

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They told us we would be safe in Europe but I don't feel safe. I am scared that if I receive a second rejection [on my asylum claim], the police will arrest me. [...] Sometimes people come back from the police station with a broken arm or leg, and with their face swollen. My friend was pushed on the floor and they stepped on his head.

31-year-old man victim of torture from Syria, Samos, September 2017

As of late September 2017, an estimated 15 000 asylum seekers remained stranded on the Greek islands, including on Lesvos and Samos. MSF medical teams based there have witnessed a worrying prevalence of violence affecting our patients.

In Samos, close to a quarter (23.1%) of people surveyed had experienced violence in Greece. Half of that violence was described as beatings, 45% of which was committed by the police or army. The survey found that people who had arrived on Samos after the EU-Turkey deal reported more violence in Greece than people on the mainland who had arrived in Greece before the deal.9

In recent months, our patients in Samos have spoken about a growing concern for their safety, and reported increased tensions over the summer. General insecurity and police violence are regularly brought up during mental health consultations as a great source of anguish.



We were complaining because there were too many people in our tent. I walked out and they [the police] took me to their office. [...] They handcuffed me and pushed my head down in their car. In their office, they kept pressing my head down and they switched the light off. They tightened the handcuffs until my wrists were bleeding [shows scars] and they jumped on my back and kicked me. They broke my ribs and I have an X-Ray proving it. [...]I came to seek asylum because I was in danger back home, but now I am in danger again. Police here are like Syrian security. They come with sticks and beat people up. This is not humane. I feel like a prisoner of war, not a refugee.

30-year-old man from Syria, Samos, September 2017



In Lesvos, our psychologists have also reported patients being increasingly concerned for their safety – both because of the general lack of security in Moria, and linked to police violence.

On 18 July 2017, clashes between the police and protesting asylum seekers took place in Lesvos' Moria camp, following the detention of an asylum seeker. 35 people were arrested that day by the police – and MSF visited 14 of them on 21 July. All 14 people treated by MSF had experienced violence, yet none had been able to access medical care before our arrival. Most of these were previous patients of MSF, and included patients who were victims of torture and had severe mental health conditions. Their acute injuries ranged from bruises to broken bones and one victim of torture patient sustained internal organ damage as a result of the violence.



Last Monday, there were many policemen [in Moria]. I was walking [...] and a policeman wearing a helmet with dark blue clothes hit me on the head with his baton. He started to put handcuffs on me when four more policemen came. One of them kicked me in the belly. I then fainted and when I woke up, I was in the hospital wearing different clothes. Since then I have difficulty to urinate and in the night I cannot sleep. [...] I feel my life is in danger inside Moria and that I might become a victim of retaliations.

37-year-old man victim of torture from Senegal, Lesvos, July 2017





A dramatic mental health emergency

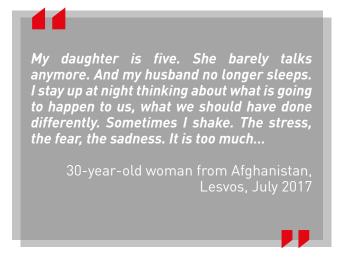
THE OVERWHELMING SCALE AND INCREDIBLE DEPTH OF PEOPLE'S SUFFERING

In Greece, and in particular on the islands, our medical teams face a dramatic mental health emergency. Both the scale of the needs for mental health care and the severity of the patients treated by our psychologists and psychiatrists have overwhelmed the capacity of our mental health services.

In late 2016 and early 2017, three quarters of the people surveyed by the MSF and Epicentre team showed as positive with the anxiety disorder screening tool.¹⁰ This percentage rose to 97% for people held on Samos.

On Lesvos, our psychologists have to prioritise mental health care to patients with severe symptoms. Yet, despite being this selective, our medical team still receives an ever growing number of referrals from other actors. 110 patients were added to our waiting list between early July and 21 August 2017 – which represents a 50% increase as compared to the period April-June 2017. Over the summer, an average of six to seven patients per week presented to our clinic with acute mental health needs, such as suicidal attempts, self-harm, and psychotic episodes. In late August, the MSF Lesvos clinic had to stop taking new referrals, except for emergencies, as its waiting list had reached 146 people. However large the number, we unfortunately know the true need is far greater still.

As well as the extremely high demand for our mental health services on Samos and Lesvos, a number of medical indicators point to the worsening of people's mental health condition. On Lesvos, the percentage of our mental health patients that need to be referred to a psychiatrist increased from just over a third of our mental health patients in late 2016 and the first half of 2017 (35 out of 99 patients in a period of nine months), to close to three quarters of our patients in August 2017 (22 out of 30 patients in a period of one month). In the last guarter of 2016, 4 of our patients with severe psychological disorders had self-harmed or seriously considered/attempted suicide (11% of those patients). This increased to 19 patients in the single month of August 2017 (86% of patients with severe psychological problems during that month). This included patients that had recently arrived on the island, as well as people who had been there for many months (range of 6 to 20 months).



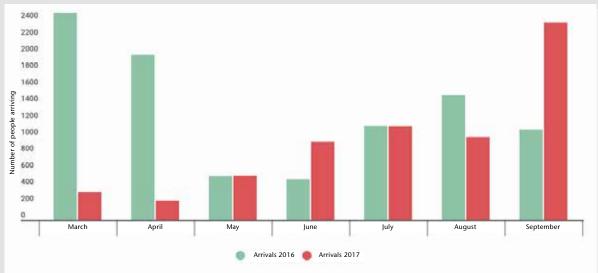
Another indication of the severity of people's mental health status relates to the symptoms treated by our psychologists. In late 2016 and in the first half of 2017, the three key symptoms of our mental health patients in Lesvos were depression, anxiety and post-traumatic stress disorder. Yet in August 2017, psychotic symptoms represented a quarter of our patients' symptoms, which is likely due to a lack of access to care early on, leading to people developing more severe symptoms.



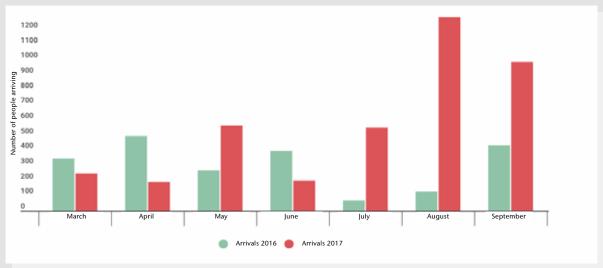
INCREASED ARRIVALS OF EXTREMELY VULNERABLE FAMILIES FROM SYRIA AND IRAQ

In recent months, there has been an increase and a change in the demographics of people arriving on Lesvos and Samos.

Arrivals of asylum seekers on Lesvos, March 2016 - September 2017



Arrivals of asylum seekers on Samos, March 2016 - September 2017



In July 2017, 40% of people arriving on the Greek islands were children, and more than half came from Syria.¹¹ Our psychologists both in Samos and Lesvos confirmed this trend and explained that the newly arrived families from Iraq and Syria report coming from newly freed areas, and were particularly traumatized and vulnerable.

Whatever I will tell you, you will not understand. The death in Madaya... People were dying of hunger in front of me [...]. I still remember the taste of the leaves and the smell of death. I was imprisoned [in Lesvos] for four months. I can't forget at 04:45 in the morning when the two ghosts visited me. Since then I constantly see ghosts. [...] I know I need to find hope, but when the night falls and I see where I am, I feel like I'm going crazy.

25-year-old Syrian man, Lesvos, July 2017



As the scale and severity of people's mental health condition worsen, there is little capacity to respond to these needs, itself contributing to a deterioration of people's health. Whilst the Ministry of Health has been scaling up its coordination role and capacity on both islands, this remains insufficient to meet the extremely high health and in particular mental health needs of the extremely vulnerable population. Patients on the islands can wait three to six months for appointments with the psychiatrist and in August 2017, the hospital on Lesvos stopped taking new appointments for the psychiatrist all together. On Samos, severe patients that constitute a risk to others or themselves are kept in the police station's jail, again without appropriate access to healthcare, and without staff technically equipped to respond to their needs.



I was tortured in a Syrian prison for months. I came here and went to the hospital, as I was feeling traumatised. They said I had to wait eight months to see a psychiatrist. When I heard that, I felt like dying.

41-year-old man from Syria, Lesvos, July 2017



A POLICY-MADE SUFFERING

The war and violence they fled from, and harsh conditions and violence during the journey stand out as traumatic experiences for most of our patients on the islands. Yet it is their current living conditions in Greece - the uncertainty about their futures, the threat of deportation, and the lack of access to appropriate healthcare that they emphasise during consultations as negatively affecting their mental wellbeing.



THE EVERYDAY REALITY FOR ASYLUM SEEKERS ON LESVOS AND SAMOS

Inadequate living conditions: In recent weeks, living conditions in Samos' Vathy camp and in Lesvos' Moria camp have once again sunk to critical levels. New arrivals are sleeping in small tents, or on a piece of cardboard in the woods. With winter rapidly approaching, we are extremely concerned for the health and the well-being of asylum seekers on the islands.

I have been under a sheet in the woods for 10 days now. I have three small children. They get bitten by the insects at night and can't sleep. I had protected them until now from the war, but I can no longer protect them here. It makes me want to scream, but I can't, not in front of the children.



Failure to identify and care for vulnerable people: Over the last 18 months, MSF has continuously documented the failure of the authorities to adequately identify vulnerable people and move them to the mainland. In recent months, this has worsened, as the capacity for such screenings has reduced and the number of people arriving on the islands has increased. Significantly, only a third of our patients on Lesvos that are victims of sexual violence have been identified as vulnerable.



I was raped. It happened in Turkey. It was a group of men, one of those gangs. I spoke to a psychologist here, but the interpreter was there and I didn't trust him.

20-year-old man from the Democratic Republic of Congo, Samos, September 2017



Protracted asylum procedures putting people at risk of violence, detention and deportation: For over a year, our psychologists on Samos and Lesvos have witnessed how a lack of clarity, repeated delays and perceived unfairness in the asylum procedure on the islands are a major source of distress for our patients. More recently, they have also seen an increase in suicidal thoughts among our patients, many of whom have received second rejections on their asylum claims. They explain that the risk they face of detention and deportation causes them huge anxiety.



The fear of not knowing what will happen to me, to my family, is crushing us. It is killing us inside. I tell my children that everything will be okay. But I hear that they want to send us back to Turkey, to Syria, that they say we are safe there. We would not have put our lives at risk to come here if it was safe there.

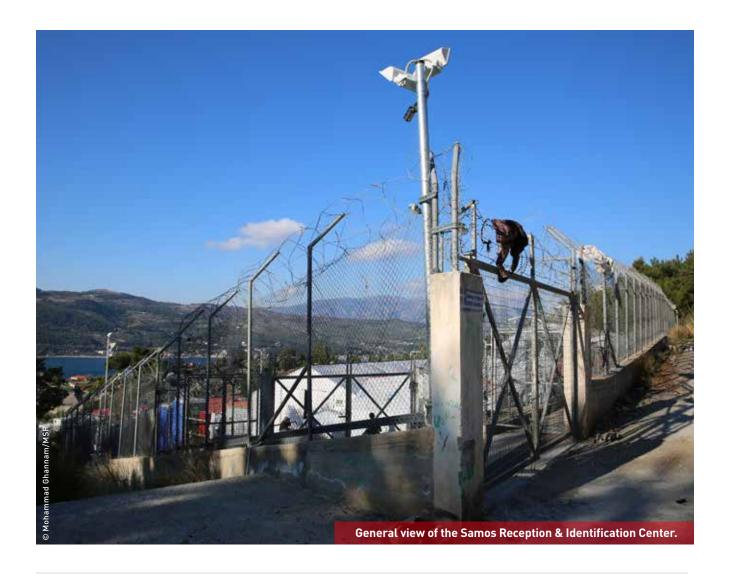


The conditions asylum seekers are living in on the Greek islands constitute continuous traumatic stress. It is therefore inevitable that people with mild or moderate mental health symptoms will develop much more severe ones.



It is harrowing and incredibly disempowering to see the mental health status of the asylum seekers in Lesvos progressively getting worse. We do our best to help those that we can, but the situation they are in is so horrendous. We hear of 15 suicide attempts every month in Moria – it's an unbearable situation.





ADMINISTRATIVE DETENTION 12 AS A FIRST RATHER THAN LAST RESORT, WITH DRAMATIC HEALTH AND PROTECTION IMPLICATIONS

In recent months, our medical teams have treated a number of severely ill patients on Samos and Lesvos who had been or were subsequently put into administrative detention – most often following a refusal of their asylum claim on second instance and whilst they await a third appeal.

Administrative detention should remain an absolute last resort, but it is widely resorted to on Lesvos and Samos – with few to no safeguards to prevent the detention of someone with a serious medical condition. As a result, many people continue to be detained despite this detention putting their health and lives at risk.

Since August 2017, we have been treating on Lesvos a 25-year-old man who was evacuated from the besieged town of Madaya, Syria, who suffers from post-traumatic stress disorder and hallucinations. When he arrived in Greece in 2016, his vulnerability was not recognized, despite a clear diagnosis from Lesvos hospital.

He was detained for at least four months on the island following a second negative decision on his asylum claim. He did not have access to his psychiatric drugs, and his condition deteriorated. Only after many interventions from MSF and other actors was he finally released.

On 9 September 2017, another Syrian patient of ours on Lesvos was detained following a police operation in Moria. Despite this patient still awaiting a final decision on his asylum claim, our having issued a certificate regarding his very serious health condition which is incompatible with detention, having engaged with the authorities at Lesvos and Athens level, and our having warned key other actors, this patient remained in detention as of 26 September.

Conclusion

A dramatic mental health emergency is unfolding on the islands of Samos and Lesvos, as the EU and the Greek Government attempt at all cost to prevent arrivals of asylum seekers on Greek shores, to contain those that are there and ensure their readmission to Turkey.

Having survived violence and conflict in their home country, asylum seekers are now victims to the institutional violence generated by the EU and Greece's deterrence policies. They are being crushed by a system that disregards their needs, vulnerabilities and rights.

As Greece's highest administrative court issued its decision in late September that Syrian asylum seekers could be returned to Turkey, there is growing concern this could lead to further riots, violence, trauma and detention.

Unless new vulnerability assessments are carried out before forced returns to Turkey, medical conditions and vulnerabilities that developed over time may be missed, and the returns could jeopardise the health, lives and dignity of returnees.

It is a humanitarian imperative to move asylum seekers from the islands to the Greek mainland, where there is greater likelihood of access to services and where conditions are less critical. People's extreme vulnerability and the complete failure of systems put in place on the islands leave no other choice.



MSF in Greece



- 1 Athens Day Care Centre; Victoria Square Health Centre; Clinic for Victims of Torture
- **2 Attica & Central Greece** mobile units in camps (Malakasa, Lavrio, Rafina, Ritsona, Thermopyles)
- 3 Lesvos clinic in Mytilini
- 4 Samos mobile unit at the Registration & Identification Center; shelter in Vathy
- **5 Epirus** mobile units in refugee sites (Agia Eleni, Doliana, Filipiada, Konitsa); flats & OXFAM/ARSIS Service Center in Ioannina



MSF has been providing medical and humanitarian assistance to asylum seekers and migrants in Greece since 1996. In 2014, MSF expanded its activities in Greece to meet the needs of asylum seekers arriving on the Greek islands and mainland from Turkey. In 2016, MSF medical teams in Greece carried out more than 72,500 health consultations, covering primary health care, treatment for chronic diseases, sexual and reproductive health care, physiotherapy, as well as mental health care. In 2017, MSF teams have focused on the medical and mental health care needs of victims of violence, including torture and sexual violence. During January - August 2017, MSF medical teams in Greece carried out more than 21,600 health consultations, including 8,270 mental health consultations.

MSF offers clinical psychological care sessions both in care centres in Athens and through mobile units to asylum seekers and migrants in refugee camps and sites. Individual consultations are offered by a mix-gender team, in a safe space, to help people psychologically cope with their current situation, and with symptoms of depression, anxiety and post-traumatic stress disorder. Specialized psychiatric care is provided when needed, either internally or through referral to external partners. Group/family sessions are also held, according to their needs.

Notes

- 1 Epicentre and MSF, Migrants' journey, vulnerabilities, access to information and endured violence during the journey and in refugee camps in Ioannina, Attica, Athens and Samos, Greece, April 2017. Between November 2016 and February 2017, a team of experts from Epicentre conducted a quantitative survey and qualitative interviews with asylum seekers, 8 migrants and refugees in 7 sites (4 camps in loannina and Attica regions, 1 hotspot in Samos Island, 1 hotel for refugees in Athens and 1 hotel for refugees in Ioannina). The survey consisted of a structured questionnaire on 9 experience of violence and an interviewer-administered anxiety disorder screening tool (Refugee Health Screener 15). The team also collected data on demographics, health status and access to healthcare, access to legal 10 Refugee Health Screener 15. aid, crossed countries and plans for the future. In total, 1,293 individuals were included in the study.
- 2 Epicentre is a non-governmental organization created by MSF in 1988 to help improve the quality of its field interventions. In 1996, Epicentre was named a World 12 Administrative detention refers to the arrest and detention Health Organization collaborating center for research in epidemiology and response to emerging diseases. Epicentre conducts research responding to a wide range of operational and medical questions, while it also designs and conducts trainings in public health and epidemiology open to health staff in Europe as well as countries where MSF intervenes.
- The definition of violence used by our medical teams is the the one used by the World Health Organization, defined as "the intentional use of physical force or power, threatened or actual, against oneself, another person, or against a group or community, which either results in or has a high likelihood of resulting in injury, death, psychological harm, maldevelopment, or deprivation". Most of the people reporting violence to our medical teams reported direct physical harm.
- 4 The team conducting the survey used the term violence as covering events of different nature, including: war or conflict related violence (experience of bombings), physical attacks (sexual violence, beatings, torture), harassment and extortion, kidnapping.
- 5 Ritsona is a camp in North-Eastern Attica Region.
- 6 In the other camps surveyed, 9.9% to 26.7% of people reported violence in Turkey.
- 7 According to Greek law article 60 paragraph 4 of the law 4375/2016 - vulnerable persons are exempted from the border procedures. Article 14 paragraph 8 of the same law defines vulnerable people as 'Unaccompanied minors; persons who have a disability or suffering from an incurable or serious illness; the elderly; women in pregnancy or having recently given birth; single parents with minor children; victims of torture, rape or other

- serious forms of psychological, physical or sexual violence or exploitation; persons with a post-traumatic disorder, in particularly survivors and relatives of victims of shipwrecks; victims of trafficking in human beings'.
- See also: MSF, A Dramatic Deterioration for Asylum Seekers on Lesbos, July 2017; MSF, One Year On From The EU-Turkey Deal: Challenging The EU's Alternative Facts, March 2017.
- The survey found that 4.6% to 8.7% of people in other camps had experience violence in Greece, as compared to 23,1% in Samos.
- 11 In July 2017, 906 out of 2,249 people arriving on the Greek islands were children, and 1,168 were Syrian (Source: UNHCR).
- of individuals by the state without trial, usually for security reasons. It can be resorted to, inter alia, to control illegal immigration.







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