# SITUATIONAL BRIEF: ASYLUM SEEKERS & REFUGEES IN GREECE DURING COVID-19

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#### CONTEXT

Aligned to the Lancet Migration Global Statement to include migrants and refugees in countries' response to COVID-19<sup>2</sup>, this brief focuses on Greece's challenges and opportunities to build an inclusive response. Asylum seekers and refugees in Greece are currently placed by the Greek governments in Reception and Identification Centres (RICs), apartments, hotels and camps across the Greek islands and the mainland, along with a proportion who are homeless. Currently there are six RICs on the Greek islands: Vial on Chios island; Pyli on Kos island; Lepida on Leros island; Moria on Lesvos island; and Vathy on Samos, as well as an unofficial camp on Rhodes. In addition there are 18 camps in the northern mainland of Greece; 13 camps in the southern peninsula (Peloponnese).

## Greek Islands

- 1.1 About 37,000 asylum seekers and migrants are currently living in Greece's Eastern Aegean islands, concentrated on the islands of Lesvos (19,503), Samos (6985) and Chios (5132), with smaller numbers on Leros, Kos and others.<sup>3</sup>
- 1.2 Most live in overcrowded camps, known as Reception and Identification Centres (RICs) or 'hotspots', which only have the capacity to host 6095 people.<sup>4</sup> Others are housed in facilities run by UNHCR, or international organisations. Many are under administrative detention in police stations or so-called 'pre-departure centres', sometimes detained for the length of their asylum procedures.<sup>5</sup> As per Greek law, vulnerable individuals should be housed in suitable accommodation and given access to appropriate healthcare, but many remain in dire conditions in the RICs.<sup>6</sup>
- 1.3 The Eastern Aegean islands constitute one of the two main migration routes into Greece from Turkey, the other being the Edirne land border. Between January-May 2020 there have been over 7600 sea arrivals from Turkey to the Aegean islands.<sup>7</sup>
- 1.4 Most asylum seekers in the island RICs are from Afghanistan, Syria, Palestine and DRC. Children make up 33% of inhabitants of the RICs, and around 13% of children are unaccompanied.<sup>8</sup>
- 1.5 As of 18<sup>th</sup> May, there have been no confirmed cases of COVID-19 among the migrant population residing in the RICs on the Greek islands, but four cases have been identified among recent arrivals to Lesvos now held in a temporary quarantine facility.<sup>9</sup> There have been 9 reported local Greek population cases across all the Aegean islands where RICs are located.

#### **Greek Mainland**

- 1.6 Approximately 76,000 refugees and migrants are currently living on the Greek mainland.<sup>10</sup> They are housed in open accommodation centres, the Filoxenia Program of accommodation run by the IOM, ESTIA accommodation provided by UNCHR, and shelters for unaccompanied minors run by the IOM and other NGOs; many are homeless or in detention.
- 1.7 From February 26<sup>th</sup> until May 3<sup>rd</sup> 212 cases of COVID-19 were reported among refugee and asylum seeker populations on the Greek mainland (*Figure 1*):
- On the 2nd April, a woman living in the Ritsona camp north of Athens tested positive for COVID-19 after giving birth in Athens University Hospital; the camp was subsequently placed in quarantine.<sup>11</sup> Over a period of three weeks 41 more migrants and asylum seekers tested positive for COVID-19 in the Ritsona camp.
- On the 5th April, a man living in the Malakasa camp north of Athens also tested positive for COVID-19, and the camp was quarantined.<sup>12</sup> Over a period of four weeks 23 more migrants tested positive for COVID-19 in the Malakasa camp.

https://www.migrationandhealth.org/migration-covid19

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<sup>&</sup>lt;sup>2</sup> Lancet Migration. Lancet Migration Global Statement on Covid-19. Lancet Migration Global Collaboration to Advance Migration Health. 2020.

<sup>&</sup>lt;sup>3</sup>https://infocrisis.gov.gr/9040/national-situational-picture-regarding-the-islands-at-eastern-aegean-sea-25-5-2020/?lang=en <sup>4</sup>https://www.hrw.org/news/2020/03/24/greece-move-asylum-seekers-migrants-safety

<sup>&</sup>lt;sup>5</sup> <u>https://www.globaldetentionproject.org/countries/europe/greece</u>

<sup>&</sup>lt;sup>6</sup> https://rsaegean.org/en/evacuation-of-overcrowded-island-camps-a-legal-imperative/

<sup>&</sup>lt;sup>7</sup>https://data2.unhcr.org/en/situations/mediterranean/location/5179

<sup>&</sup>lt;sup>8</sup>https://data2.unhcr.org/en/documents/download/75682

<sup>&</sup>lt;sup>9</sup> https://www.aljazeera.com/news/2020/05/asylum-seekers-lesbos-diagnosed-coronavirus-200515160954523.html

<sup>&</sup>lt;sup>10</sup>https://data2.unhcr.org/en/documents/download/74972

<sup>&</sup>lt;sup>11</sup>https://www.aljazeera.com/news/2020/04/greece-148-refugees-test-positive-COVID-19-asymptomatic-200421134039733.html

<sup>&</sup>lt;sup>12</sup>https://www.aljazeera.com/news/2020/04/greece-148-refugees-test-positive-COVID-19-asymptomatic-200421134039733.html

- On the 21st April, 148 migrants living in a hotel in Kranidi in southern Greece tested positive for COVID-19; testing took place after a 28-year-old pregnant woman living at the hotel was found to be positive. A 39-year-old woman from DRC who was a hotel resident died on 19th April, although the Greek government announced the death was not connected to the virus.<sup>13</sup>
- In all three cases the detection of these outbreaks was accidental and late.<sup>14</sup> By May 3<sup>rd,</sup> the 212 confirmed cases of COVID-19 among migrants residing in open camps and facilities on the mainland represented 8% of the total confirmed cases of COVID-19 in Greece (total of 2,632 cases).
  - 1.8 As of May 3<sup>rd</sup> the prevalence of COVID-19 cases among migrants living in camps and facilities in Greece was eight times the prevalence of COVID-19 in the general population (18.8 cases per 100,000 population; and 2.45 cases per 100,000 population respectively).



**Source**: Produced by Elias Kondilis (Associate Professor of Health Policy, Department of Medicine, Aristotle University of Thessaloniki). Calculations based on National Public Health Organisation's (1) daily COVID-19 epidemiological surveillance report<sup>15</sup> (2) weekly epidemiological surveillance report in points of care for refugees/migrants.<sup>16</sup> This does not take into account the most recent cases on Lesvos just prior to May 18<sup>th</sup> 2020.

# COVID-19 RISK

- 2.1 Asylum seekers and migrants on the Eastern Aegean islands are at high risk of infection from COVID-19 due to overcrowding and poor sanitation, as well as limited access to healthcare. Accommodation facilities on the mainland are also frequently overcrowded and suffer from inadequate or no healthcare provision. Healthcare infrastructure on the islands is inadequate to deal with a major outbreak of COVID-19.
- 2.2 Conditions in the island RICs are overcrowded and unhygienic, putting residents at risk from communicable disease and making it all but impossible to follow public health guidance around prevention of COVID-19. The RICs are currently several times over capacity, and many residents are living in informal areas around the official camps. The provision of water and sanitation services are not sufficient for the population, thereby presenting significant risks to health and safety. In some parts of the settlement in Moria, there are 167 people per toilet and more than 242 per shower. Around 5000 people live in an informal extension to the Moria camp known as the 'Olive Grove' who have no access to water, showers or toilets.<sup>17</sup> Residents of island RICs must frequently queue in close proximity to each other for food, medical assistance, and washing. In such conditions, regular handwashing and social distancing are impossible.
- 2.3 Access to healthcare for migrants on the islands is extremely limited. Healthcare provision by the Greek government is not enough to meet the needs of the large numbers living in the RICs, and does not meet the stated provisions of the Ministry of Health's PHILOS II program for refugee healthcare.<sup>18</sup> For example, there is only one doctor from the National Public

<sup>14</sup>https://www.bmj.com/content/369/bmj.m1557/rr-6

 $<sup>^{13} \</sup>underline{https://www.reuters.com/article/us-health-coronavirus-greece/coronavirus-hits-migrant-hostel-as-greece-plans-to-ease-lockdown-idUSKCN2231Y2$ 

<sup>&</sup>lt;sup>15</sup>https://eody.gov.gr/wp-content/uploads/2020/05/COVID-gr-daily-report-20200517.pdf

 $<sup>{}^{16}</sup> https://eody.gov.gr/wp-content/uploads/2020/05/Surveillance-refugees-weekly-EN-2020-18.pdf$ 

<sup>&</sup>lt;sup>17</sup>https://onlinelibrary.wiley.com/doi/full/10.1111/imig.12721?af=R

<sup>&</sup>lt;sup>18</sup> https://rsaegean.org/en/why-greece%CE%84s-reception-systems-failed-to-provide-durable-solutions/

Health Organisation serving the RIC on Samos. The severe overcrowding in the camps makes accessing care even more difficult, with camp residents reporting waiting times of hours or days to see a doctor.<sup>19</sup> Access to healthcare is also challenging in camps on the mainland, which are known as Open Accommodation Centres. For example, residents of camps in northern Greece report long queues to see health workers, and the remoteness of some camps makes the timely transfer of unwell residents to hospital difficult.<sup>20</sup>

- 2.4 There are also legal and administrative barriers to healthcare: in July 2019 the Greek government withdrew access to public healthcare from migrants and asylum seekers, and although there has been a partial reversal of this decision, implementation is still lacking and consequently administrative barriers still remain for certain groups of migrants.<sup>21</sup>
- 2.5 The Greek government continues to evict thousands of refugees from their current accommodation. By the end of May more than 8,200 are expected to be evicted, potentially facing homelessness and increased susceptibility to COVID-19.
- 2.6 Certain groups of migrants have specific vulnerabilities which could make them particularly susceptible to the impact of COVID-19. Early epidemiological data on COVID-19 suggests that those aged 65 and older or with high-risk conditions such as chronic respiratory disease, cardiovascular disease, diabetes and hypertension are at higher risk for severe illness.<sup>22</sup> Medecins du Monde have reported a non-communicable disease burden of up to 40% among their patient population on the Greek islands.<sup>23</sup> The WHO has also reported refugee and migrant populations in Europe have higher rates of diabetes and ischaemic heart disease than host populations.<sup>24</sup>
- 2.7 Concerns have been raised regarding the Greek health system's ability to cope if COVID-19 infections do increase, as the public health system has been severely affected by austerity measures following Greece's recent debt crisis.<sup>25</sup> Greece had among the lowest numbers of critical care beds in Europe, with 6.0 beds per 100,000 people, however the Greek National Health Service made progress since the beginning of the pandemic in increasing this towards the European average of 12 beds per 100,000.<sup>26</sup> Health infrastructure on the islands would particularly struggle to cope with a major outbreak of COVID-19. The Greek medical system has a large urban-rural gap, with healthcare services concentrated in major cities.<sup>27</sup> There are fewer than 2000 hospital beds across the the Aegean island region.<sup>28</sup> According to Human Rights Watch, there are six intensive care beds on Lesvos, three on Chios and two on Samos, with no intensive care facilities on Leros or Kos.<sup>29</sup>

# **RESPONSE TO COVID-19**

- 3.1 The Greek government announced a number of restrictive health protection measures for the RICs on March 18<sup>th</sup> 2020, prior to the country-wide 'lockdown' announced on March 23<sup>rd</sup> 2020. Residents would only be allowed to leave the camp between 7am and 7pm, with 100 people permitted to leave per hour and only one person per family permitted to leave at a time. Visits to the camp by individuals and organisations were suspended for at least 14 days. It was announced that medical teams would be sent to the camps to create isolation zones and conduct compulsory temperature checks. Subsequently, on March 23<sup>rd</sup> 2020, the government announced a country-wide lockdown similar to those enacted in other European countries, restricting movement to essential activities only.<sup>30</sup> The general population in Greece remained in lockdown for 43 days, ending on the 4th May, whereas the restrictions on movement in migrant camps have been extended until the 7<sup>th</sup> June. Asylum procedures were also been suspended until May 15<sup>th</sup> due to COVID-19 restrictions.<sup>31</sup>
- 3.2 On March 18<sup>th</sup>, the government announced a 14-day quarantine period for all new arrivals to Greece: migrants arriving on the islands would remain outside the RICs before being transferred to closed facilities on the mainland.<sup>32</sup> This has caused

<sup>22</sup>https://www.cdc.gov/mmwr/volumes/69/wr/mm6913e2.htm?s\_cid=mm6913e2\_w

<sup>26</sup>https://www.politico.eu/article/charting-europes-capacity-to-deal-with-the-coronavirus-crisis/

<sup>32</sup>https://help.unhcr.org/greece/coronavirus/

<sup>&</sup>lt;sup>19</sup>https://www.hrw.org/news/2020/04/22/greece-island-camps-not-prepared-COVID-19

<sup>&</sup>lt;sup>20</sup>https://rsaegean.org/en/diavata-camp/

https://rsaegean.org/en/koutsochero-camp/

<sup>&</sup>lt;sup>21</sup>https://www.amnesty.org/en/documents/eur25/1801/2020/en/

<sup>&</sup>lt;sup>23</sup><u>https://academic.oup.com/inthealth/article/9/5/272/4104521</u>

<sup>&</sup>lt;sup>24</sup><u>http://www.euro.who.int/en/publications/html/report-on-the-health-of-refugees-and-migrants-in-the-who-european-region-no-public-health-without-refugee-and-migrant-health-2018/en/index.html</u>

<sup>&</sup>lt;sup>25</sup>https://www.theguardian.com/world/2020/apr/14/how-greece-is-beating-coronavirus-despite-a-decade-of-debt

<sup>&</sup>lt;sup>27</sup><u>https://www.oecd-ilibrary.org/docserver/d87da56a-en.pdf?expires=1587654691&id=id&accname=guest&checksum=43AC2BC5D02C964035EF74D745C62E5A</u>

<sup>&</sup>lt;sup>28</sup>http://www.euro.who.int/ data/assets/pdf file/0006/373695/hit-greece-eng.pdf

<sup>&</sup>lt;sup>29</sup>https://www.hrw.org/news/2020/04/22/greece-island-camps-not-prepared-COVID-19

<sup>&</sup>lt;sup>30</sup><u>https://www.COVID19healthsystem.org/countries/greece/countrypage.aspx</u>

<sup>&</sup>lt;sup>31</sup>https://www.ecre.org/greece-1000-vulnerable-people-evacuated-relocation-of-children-started-asylum-procedures-suspended-renewed-tensions-at-turkish-border/

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challenge due to limited suitable facilities for isolating new arrivals on the islands: for example over 150 new arrivals on Lesvos in late March and early April were left without shelter.<sup>33</sup> The Greek government has also stated that it will institute regular disinfection and establish quarantine areas in the camps, along with providing linguistically appropriate information to camp residents.<sup>34</sup> Despite the quarantine measures in the two camps and one hotel where cases have been detected, and the one camp which has been quarantined preventatively, the number of cases have been increasing and quarantine extended.

- 3.3 A plan to transfer vulnerable asylum seekers out of the RICs was also announced in March 2020, and as of May 15<sup>th</sup> 2020, 1400 people had been transferred. There plan to move vulnerable asylum seekers out of the RICs was supported by NGOs and the UN; on the 13<sup>th</sup> April, the IOM mission chief for Greece, announced that the IOM planned to accommodate over 2000 asylum seekers in hotels and apartments, both on the islands and mainland; this group would include everyone aged 65 in the RICs.<sup>35</sup> However, subsequently the government announced that during 2020 hotels hosting refugees on the mainland (IOM Filoxenia Program) would discontinue.<sup>36</sup> On the 24th April, the Migration & Asylum Minister announced the transfer of 1500 vulnerable people from Moria camp to the mainland would be postponed, and declared that the government would transfer them more gradually and in smaller groups. Tensions had been evident in Mesolloggi city, where the local community protested against the transfer of the population from Moria to their area, while in the north of Greece locals set fire to a hotel for asylum seekers transferred from Lesvos.<sup>37</sup> The delays have also resulted from broader challenges due to geographical restrictions, lack of appropriate accommodation facilities, and limited coordination between the asylum service and public health authorities.
- 3.4 Management of COVID-19 outbreaks in camps and facilities by the Greek authorities follows a different protocol compared to the one used in cases of outbreaks in other enclosed population groups.<sup>38</sup> The Greek government protocol for managing an outbreak in a refugee camp, known as the 'Agnodiki Plan', details that the facility should be quarantined and all cases (confirmed and suspected) are isolated and treated in situ.<sup>39</sup> In similar cases of outbreaks in enclosed population groups (such as nursing homes or private haemodialysis centres) vulnerable individuals were immediately moved from the site to safe accommodation, while all confirmed and suspected cases were isolated off-site in a separate facility.
- 3.5 The Greek government's national testing policy has been to test only those admitted to hospital with pneumonia or members of 'vulnerable groups'.<sup>40</sup> According to Sotiris Tsiodras, head of the Greek government's coronavirus taskforce, there are plans to introduce mass testing and for residents of the islands such as 'vulnerable groups' to be prioritised.<sup>41</sup> Residents of RICs interviewed by Human Rights Watch stated that to their knowledge there was no testing available in the camps<sup>42</sup> and NGOs report that testing strategy has not yet been tailored to camp-settings.
- 3.6 Humanitarian organisations operating in the Eastern Aegean have announced plans to mitigate the risk of an outbreak of COVID-19 among asylum seekers and refugees. UNHCR plans to distribute hygiene and sanitation kits, provide core relief items such as tents and blankets, improve water, sanitation and hygiene (WASH) facilities, disseminate health information and support the establishment of screening and isolation areas; however, it states that more resources are needed to implement these plans.<sup>43</sup> MSF's COVID-19 activities on Lesvos include health promotion to RIC residents, referral procedures for suspected cases of COVID-19, and preparation of sites to isolate cases, as well as increasing water and sanitation services in Moria. The IRC plan to deliver COVID-19 information to refugees in Greece via its online engagement platform.<sup>44</sup> Medicins du Monde is developing a public health strategy for its health centre in Kara Tepe on Lesvos, and has identified hotels on the islands for shielding vulnerable people.<sup>45</sup> Smaller NGOs such as Movement on the Ground have set

<sup>36</sup>https://www.stonisi.gr/post/8554/akyrwnetai-h-metafora-1500-to-savvato#.XqKlDrvUUU0.facebook

<sup>39</sup>http://www.et.gr/idocs-nph/search/pdfViewerForm.html?args=5C7QrtC22wHUdWr4xouZundtvSoClrL81A0Jyv-wlgjuFUDqazHcNeJlnJ48\_97uHrMtszFzeyCiBSQOpYnTy36MacmUFCx2ppFvBej56Mmc8Qdb8ZfRJqZnsIAdk8Lv\_e6czmhEembNmZCMxLMtT1tM2YS-72Z1VhM9-OHcdlLsnnJURW\_AlaTkR2SddbR

<sup>&</sup>lt;sup>33</sup>https://uk.reuters.com/article/us-health-coronavirus-greece-camp/greece-quarantines-second-migrant-camp-after-COVID-19-case-confirmed-idUKKBN21N06B <sup>34</sup>https://www.hrw.org/news/2020/04/22/greece-island-camps-not-prepared-COVID-19

<sup>&</sup>lt;sup>35</sup>https://www.amna.gr/en/article/449515/IOM-Over-2-000-vulnerable-asylum-applicants-will-be-transferred-off-hotspots-preventatively

<sup>&</sup>lt;sup>37</sup> https://www.infomigrants.net/en/post/24586/greece-locals-set-fire-to-hotel-for-asylum-seekers

<sup>&</sup>lt;sup>38</sup>https://www.bmj.com/content/369/bmj.m1557/rr-6

<sup>&</sup>lt;sup>40</sup>https://eody.gov.gr/enimerosi-diapisteymenon-syntakton-ygeias-apo-ton-ekprosopo-toy-ypoyrgeioy-ygeias-gia-to-neo-koronoio-kathigiti-sotiri-tsiodra/

<sup>&</sup>lt;sup>41</sup>https://eody.gov.gr/0423 briefing COVID19/

<sup>&</sup>lt;sup>42</sup>https://www.hrw.org/news/2020/04/22/greece-island-camps-not-prepared-COVID-19

<sup>&</sup>lt;sup>43</sup> http://reporting.unhcr.org/sites/default/files/UNHCR%20support%20to%20COVID-19%20response%20in%20Greece-Update.pdf

<sup>&</sup>lt;sup>44</sup>https://www.rescue.org/article/refugees-do-not-have-luxury-social-distancing

<sup>&</sup>lt;sup>45</sup>https://mdmgreece.gr/en/COVID19-response-briefing-note-march-2020doctors-world-greek-delegation/

up hand sanitiser stations, distributed hygiene items and increased provision of waste management and cleaning services.<sup>46</sup>

## RECOMMENDATIONS

Drawing on the Lancet Migration call for urgent global action to include migrants and refugees in the COVID-19 response<sup>47</sup> we make the following specific recommendations for the Greek islands and mainland to build an inclusive COVID-19 response:

## **1. ENSURE URGENT ACCESS TO HEALTHCARE FOR ALL MIGRANTS AND REFUGEES**

**R1. Ending restrictive measures which are not proportionate to public health need:** Greek authorities must consider the potential adverse impact of current restrictions on movement in RICs where no cases of COVID-19 have been reported. Placing RICs and camps on 'lockdown' confines residents in overcrowded unsanitary conditions and limits their ability to access healthcare and other essential services; it may also have adverse consequences for mental health, and contribute to SGBV and domestic violence. Quarantine is a safe public health measure, provided it is implemented with the necessary precautions and proportionate to public health need. People in quarantine must have the space to be able to practice physical distancing; have access to food, WASH, and health services, and be tested for COVID-19 regularly. Keeping people together in substandard conditions where they are predisposed to contracting COVID-19 due to inability of individuals to effectively self-isolate, or where there is insufficient food or water supply, is not an appropriate public health response.

**R2.** Removing legal and administrative barriers to healthcare: asylum seekers have now been granted temporary access to public health care, but this should be extended to all migrants and adequate implementation should be ensured Collaboration between all actors is needed to enact guidelines on the COVID-19 pathway to care for all migrant populations.

**R3.** Supporting action beyond the nation-state level: Greece and the European Commission (EC) should continue to contribute to the global refugee response, for example by supporting international actors like UNHCR in their call for funding to support refugees during COVID-19. The EC, WHO, UNHCR and IOM should implement and monitor all measures recommended in their guidelines.

#### 2. ENSURE INCLUSION OF MIGRANT AND REFUGEE POPULATIONS

**R1. Transfer of migrants, asylum seekers & refugees held in overcrowded facilities to safer living conditions**: there must be an expedited transfer from the overcrowded island RICs to safer facilities elsewhere, with a focus initially on vulnerable groups, such as the elderly or those with chronic conditions who are at higher risk of COVID-19.

**R2.** Inclusion and prioritisation of populations in active testing and contact tracing strategies: as Greece plans to scale up its mass testing and contact tracing strategy, refugees and migrants must be included without imposing unnecessarily restrictive measures on freedom of movement.

**R3. Deportations should be temporarily suspended**, while asylum procedures should continue according to the 1951 Refugee Convention, with no forced return (refoulement).

**R4.** Evictions of refugees from their accommodation should be halted: with a focus instead on longer term integration of refugees which will improve their health and access to healthcare.

**R5. Urgent relocation and reunification of unaccompanied minors,** who are particularly vulnerable due to aid and support services for migrants & refugees being negatively affected by the COVID-19 pandemic.

**R6. Ending administrative detention of refugees and asylum seekers,** especially during the COVID-19 pandemic. The UN has called for the release of refugees and migrants in detention, and for alternatives to detention, such as community-based care arrangements to be implemented<sup>48</sup>.

## 3. INTRODUCE MIGRANT-INCLUSIVE PUBLIC INFORMATION STRATEGIES

**R1.** Avoiding stigmatisation of asylum seekers and refugees, and actively countering the narrative that portrays asylum seekers and refugees as spreading the virus, which is likely to lead to further discrimination and prejudice.

**R2.** Providing culturally and linguistically appropriate public health information to all asylum seekers and refugees, with focus also on inclusion of more vulnerable groups, such as the elderly and unaccompanied children.

<sup>&</sup>lt;sup>46</sup> https://movementontheground.com/story/a-message-about-COVID-19-22036

<sup>&</sup>lt;sup>47</sup>https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(20)30971-5/fulltext\_37

<sup>&</sup>lt;sup>48</sup> https://migrationnetwork.un.org/sites/default/files/docs/un\_network\_on\_migration\_wg\_atd\_policy\_brief\_covid-19\_and\_immigration\_detention\_0.pdf

#### **Organisations and acknowledgements**

This situational brief was authored by Elspeth Carruthers (Research Fellow, Lancet Migration), Apostolos Veizis (Medical Operations Support Unit Director at MSF Greece), Elias Kondilis (Associate Professor of Health Policy, Department of Medicine, Aristotle University of Thessaloniki), and Miriam Orcutt (Senior Research Fellow, Institute for Global Health, University College London); and expert reviewed by Reem Mussa (Humanitarian Advisor for Migration, Analysis Department, MSF Operational Center in Brussels), and Vassiliki Danaskou (The American College of Greece). Overall direction and review on behalf of the Lancet Migration collaboration was provided by Miriam Orcutt and editorial review by Sophie McCann. This brief represents the views of the authors.

This series of situational and policy briefs summarises key aspects of the COVID-19 response in relation to migrants and refugees at country or regional level. They include public health and policy recommendations and perspectives and build on the <u>Lancet Migration Global Statement</u> recommendations to ensure migrants and refugees: have access to healthcare; are included in prevention, preparedness and response; and are part of responsible and transparent public information strategies, during the COVID-19 pandemic. Policy and situational briefs have been authored by experts working in academia, operational, or clinical areas of migration and COVID-19, and are hosted on the Lancet Migration website (<u>www.migrationandhealth.org</u>). Lancet Migration is a global collaboration between The Lancet and researchers, implementers, and others in the field of migration and health that aims to address evidence gaps and drive policy change building on the recommendations of the UCL-Lancet Commission on Migration and Health published in December 2018.