AN ISLAND IN DESPAIR
DOCUMENTING THE SITUATION FOR REFUGEES AND DISPLACED PEOPLE IN LESVOS, GREECE
ACKNOWLEDGEMENTS

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STATISTICAL ANALYST
Mohamad Alhussein Saoud

RESEARCH COORDINATORS
Nahzley Anvarian
Mohamad Alhussein Saoud

FIELD RESEARCHERS
Lubana Al-sayed
Nahzley Anvarian
Alice Lucas
Mohamad Alhussein Saoud

REPORT AUTHORS
Charlotte Gallagher
Alice Lucas
Marta Welander

REPORT EDITOR
Helena Eynon

GRAPHIC DESIGN
Pippa Stanton
Me And You Create
www.meandyoucreate.com
hello@meandyoucreate.com

PHOTO CREDITS
Nahzley Anvarian
Alice Lucas
Mohamad Alhussein Saoud
With special thanks to the individuals in displacement who provided photos

TRANSLATORS
ARABIC
Mohamad Alhussein Saoud
Farsi/Dari
Nahzley Anvarian
French
Diaa Nammour
Kurmanji Kurdish
Muhammad Al Jomaa
Pashto
Usama Khilji

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The research findings are outlined in this report and paint a harrowing picture of the current situation on the island.

Located across the sea from Turkey, Lesvos receives large numbers of refugees and displaced people hoping to seek asylum within the European Union. Since the so-called EU-Turkey Statement was signed in March 2016, thousands have found themselves trapped in Lesvos – and on several other Greek islands – whilst overcrowding intensifies and living conditions worsen, despite the tireless efforts of NGOs, volunteers and local and international initiatives working relentlessly to address the situation.

As part of the EU-Turkey Statement, asylum seekers are banned from travelling to mainland Greece, where better conditions and services are available, under what is known as the ‘admissibility procedure’ 1. Under this procedure, a person is assessed as to whether he or she can be returned to Turkey.

The most well-known and largest of these is the government-run Moria camp. Moria was officially set up as part of the ‘hotspot’ approach adopted by the European Union, and is severely overcrowded, with current estimates suggesting that the camp currently houses 5,500 displaced people, despite only having a capacity of 2,500 2. It is worth noting that aid workers on the ground estimate an even higher number in the camp. The camp is so overcrowded and plagued with tension and anxiety that it has been described as an ‘open-air detention centre’ 3.

Displaced people also reside in several other camps on the island. Kara Tepe, run by the local Municipality, is a make-shift detention centre some 2.5 kilometres from the capital of Lesvos, Mytilene. Others reside in PIKPA, an informal, open refugee camp run by volunteers and refugees, which houses some of the island’s most vulnerable individuals, including many families. At the time of writing, PIKPA is facing closure by the Greek authorities 4.

Under the EU-Turkey Statement, displaced people who are considered ‘vulnerable’ are exempt from the admissibility procedure and from being returned to Turkey, thus enabling them to move to the mainland to claim asylum in Greece 5. However, according to interviews conducted by the Refugee Info Bus and Koosh, this is far from always the case, with one of their respondents having waited eight months to be transferred from Moria to the mainland, despite having been recognised as a vulnerable person: “They told me they would call me, but I’m still sitting here looking at my phone.”

In April 2018, UNHCR estimated that there were 7,500 refugees and displaced people on the island 6. In April 2018, UNHCR estimated that there were 7,500 refugees and displaced people on the island 6. At the time of this study, local groups reported that this number was closer to 8,000 or even 9,000. This makes Lesvos the largest host out of all the Greek islands 7, and the steady flow of new arrivals and departures makes it difficult to establish the exact number of residents at any given moment.

Within this context, and following reports of a deteriorating situation on the ground, Refugee Rights Europe sent a field delegation to the island from 18-22 June 2018, to investigate and document the human rights situation. The study is based on surveys and interviews with 311 individuals in their native languages, or nearly 4% of the estimated 8,000 refugees and displaced people thought to be on the island at the time of the study. Among those interviewed were 23 children – or 7.4% of the research sample. As a result, this is one of the largest independent studies to be conducted with refugees and displaced people in Lesvos.

The purpose of our first-hand research is to provide policymakers, advocacy groups and the wider public with a clear insight into the human rights infringements and unsustainable conditions faced by refugees and displaced people on European soil.

In contrast to the United Nations Refugee Agency (UNHCR) and the International Organisation for Migration (IOM) who are responsible for demographic data collection in many of the state-run camps across Europe, our research data are independently collected, with the specific aim of encouraging policy development rooted in the Universal Declaration of Human Rights.

Refugee Rights Europe’s researchers conducted 311 surveys in Arabic, Dari/Farsi, English, French, Kurmanji Kurdish and Pashto. We estimate having surveyed approximately 4% of the individuals on the island at the time of the study.

The research presented in this report was carried out in Lesvos from 18 to 22 June 2018. Over this period, Refugee Rights Europe’s researchers conducted 311 surveys in Arabic, Dari/Farsi, English, French, Kurmanji Kurdish and Pashto. The format was semi-structured and captured the lived experiences of individuals ranging from 13 to 60 years of age.

Each member of the research team had field experience of working with refugees and displaced people or similar groups. The researchers were recruited from Refugee Rights Europe’s pool of researchers and included native speakers of all key languages. The study was guided by ethical checklists that were underpinned by data protection policies, child safeguarding policies and a robust risk register, to ensure the security and dignity of all participants. Researchers were expected to observe strict adherence to all of Refugee Rights Europe’s data protection policies, referral policies, child safeguarding and principles of full and informed consent.

Wherever possible, Refugee Rights Europe adopts a methodology of random selection - using stratification and continuously monitoring the breakdown of demographic groups within the sample throughout its research studies, to ensure that the final data is representative of a given situation. In the current context of Lesvos, given the volatility of the situation and the overcrowding of the formal camps, it was necessary for us to be flexible in our approach. Rather than using stratification and random selection, we surveyed as many individuals as possible, through so-called snowball sampling, across different research locations on the island. As a result, selection bias could not always be avoided, and we were at times unable to steer the sample and stratification as much as we would ideally have liked.

There is uncertainty about the exact population size since it is in constant flux. This means that it is not possible to determine exactly how large a sample we obtained, and how representative it is of the demographic groups in the area. However, based on approximate figures available, we estimate having surveyed approximately 4% of the individuals in the area at the time of the study. This allows us to present a number of useful insights into the current situation on the ground in Lesvos during the summer of 2018.

*Refugee Rights Europe relays the voices of displaced people in Europe, reporting what respondents tell us. Meanwhile, we have not been able to verify claims through official sources. Throughout the report, wording such as “30% had experienced police violence” means that 30% of respondents said they had experienced police violence, but such claims have not been possible to verify.*

Universal Declaration Of Human Rights, Preamble
All human beings are born free and equal in dignity and rights. They are endowed with reason and conscience and should act towards one another in a spirit of brotherhood.

Among the respondents in Lesvos, 82.4% were male and 17.3% were female, with one person identifying as ‘other’. 7.4% of our respondents said they were under the age of 18 and therefore considered minors; 91.3% of the minors we interviewed were male.

The majority, (75.6%), of respondents were between the ages of 18 and 35, whilst the average age of all respondents was 28.
At the time of the study, most respondents were country nationals of Syria, Afghanistan and Iraq. These were followed by people largely from African states, namely but not limited to the Democratic Republic of Congo (DRC), Somalia and Cameroon. It is worth noting that the demographics on the island fluctuate heavily over time.

The 6.4% of respondents categorised as ‘other’ were from Algeria, Benin, Cote d’Ivoire, Eritrea, Ghana, Guinea, Mali, Morocco, Pakistan, Sudan, Tajikistan, Togo and Uganda.

More than half of the minors interviewed were from Afghanistan, whilst a substantial 30.4% were from Syria. The remaining children identified as Iraqi, Congolese and Egyptian.

Exactly half of all respondents identified as being alone in Lesvos and 47.1% stated that they were with family.
The lack of safety and security was a major concern in Lesvos. Among our respondents, a very concerning 65.7% said that they ‘never feel safe’ inside the camp, while another 22.4% said that they ‘don’t feel very safe’. A 27-year-old man from Afghanistan expressed the following perception of the Moria camp: “Moria is ten-times more dangerous than Afghanistan. At least in Afghanistan sometimes you can run away from the Taliban, here you are trapped.”

The risks for those travelling unaccompanied can be particularly acute. One respondent told the research team that unknown gangs were thought to be roaming around, trying to kidnap people from their tents at night: “I stay awake with a stick to protect my children and my wife from any potential attack.”

One respondent told researchers: “Yesterday at night we were attacked by two men who had knives with them. No-one can walk alone, we always try to be three or four together. Here is hell. If someone wants to sleep, the other should do guarding. We thought there is a state here and humanity.”

“MORIA IS TEN-TIMES MORE DANGEROUS THAN AFGHANISTAN. AT LEAST IN AFGHANISTAN SOMETIMES YOU CAN RUN AWAY FROM THE TALIBAN, HERE YOU ARE TRAPPED.”

24-YEAR-OLD AFGHAN MAN
An alarming 48.2% of respondents had witnessed another camp resident die.

Of those who had witnessed a death, 53.4% said that the fatality occurred as a result of violence. A 25-year-old man from Somalia told us, “I saw a refugee die. There was a fight and they beat him with a metal pole.” Meanwhile, 40.5% believed that a death had resulted from untreated health problems.

Other causes of death included suicides and the cold weather conditions. One respondent described the death of a child: “There is a little girl who died because of the heavy rain, she drowned under the tent.” Another camp resident said: “You want to die, you really want to have a special case and to die... [if I receive] a rejection, I will kill myself.”
27.3% of respondents had experienced citizen violence in Greece. Whilst the majority of this abuse was verbal, there were also numerous reports of physical violence.

A 23-year-old man from Afghanistan explained that he had been attacked by citizens a little while back: “I was walking on the road and citizens assaulted us.”

In April 2018, a group protesting against the conditions inside Moria camp were attacked by a far-right group in the centre of Mytilene 8. Refugees formed a circle to protect vulnerable women and children as the violence escalated, and the situation was eventually broken up by police using tear gas.

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An extreme shortage of resources due to the overcrowded conditions in the camps contributes to high levels of desperation, frustration and in some cases mental ill-health. This, in turn, risks leading to rising tensions among camp residents. Indeed, uncertainty and worsening living conditions create a desperate environment where tensions that exist between different nationalities are becoming increasingly more acute. As such, 47.1% of respondents had experienced violence from other refugees in Lesvos; 77.5% of these were verbally abused and 53.5% had experienced physical abuse.

One camp resident explained that fights often break out during weekly food distributions. On one occasion, the desperation of two women waiting for nappies for their babies resulted in a brawl which in turn led to one of the women being taken to the hospital.
47.4% of respondents had experienced some form of police violence. A worrying 84.9% of those had been exposed to tear gas. 34.3% had been physically abused, while 35.6% had experienced verbal abuse. There were also reports of sexual abuse, although it should be noted that it has not been possible to verify these accounts.

An Afghan man, aged 27, spoke about the police violence that often occurred after protests among camp residents. He told the research team that the police would typically use tear gas and arrest people, including women and children. Many of the respondents told the researchers about alleged police misconduct and physical abuse during such instances. Such accounts are corroborated by interviews conducted by the grassroots groups Koosh and Refugee Info Bus, that gathered a number of testimonies such as the following statement by an Afghan man: “Once a month, police surround us, and behave so aggressively. They wouldn’t let us put our shoes on, they were beating everyone”.

Another refugee told researchers that a fight had broken out nearby whilst both he and his wife were attending the clinic as they were both sick. He recounted that the police immediately entered the clinic and beat the man without warning. The man then fell over, felt dizzy and started vomiting. When his wife questioned the policeman she was allegedly also beaten across the chest. The man was taken to the hospital in Mytilene and recounted having to walk back to the camp for one hour without shoes.

Regarding the use of tear gas, one respondent recounted fainting when a tear gas canister dropped between his legs. People tried to help him, however the police allegedly did not allow any assistance which meant that he was left on the ground for a considerable length of time. He explained: “I felt I was an insect when I was laying down there.”
Immigration detention in Greece has been criticised by leading human rights organisations on several occasions, while also being described as taking ‘arbitrary and prolonged’ forms.\(^9\) 23.2% of respondents in this study by Refugee Rights Europe had been detained by the police at some stage in Lesvos. A Syrian man, aged 21, recounted having been in prison for 51 days on the grounds of ‘illegal entry’.

Others explained that they had been arrested whilst finding themselves in the near vicinity of brawls between other refugees. For instance, a 20-year-old man from Afghanistan explained: “Police arrested loads after a fight. I wasn’t fighting.” Another 31-year-old Afghan man added: “I was in the food line and people were pushing and the police came and arrested me.”

One young refugee explained that he had been detained for three months inside Moria camp. There he told researchers that he had been regularly beaten. When he tried to explain to the guards that he was sick as a result of the violence he had suffered in his country of origin, he was told that he should ‘go home’ if he didn’t like his treatment there.

Many respondents also explained that if asylum seekers decide to go back to Turkey or to their country of origin through the voluntary return process, they risk being detained for three-to-four months before being deported.\(^11\)

\(^9\) https://www.amnesty.org/download/Documents/EUR2556642017ENGLISH-PDF
\(^11\) https://www.amnesty.org/download/Documents/EUR2556642017ENGLISH-PDF
ARTICLE TWENTY-FIVE (1)

Everyone has the right to a standard of living adequate for the health and well-being of himself and of his family, including food, clothing, housing and medical care and necessary social services, and the right to security in the event of unemployment, sickness, disability, widowhood, old age or other lack of livelihood in circumstances beyond his control.

SHELTER AND ENVIRONMENT

As a result of the containment policy on the island, overcrowding has become a severe and urgent issue. People live in tents and shipping containers, lacking privacy and security. A displaced person explained: “There is no place to sleep. We are three persons in a very small space. We are afraid at night, we cannot go out of our tent.”

Overcrowding has also led people to pitch tents in other areas where they risk being bitten by reptiles. One respondent explained: “I live in the olive groves and the situation is bad: snakes, scorpions, thefts. If you get bitten by a snake or a scorpion, they do not give you medicine because they say that snakes and scorpions in Greece are non-toxic. They will only give you paracetamol.”

For others, sanitation is an issue leading to worsened living conditions. For instance, one family with two young children live in a tent that is close to the showers, and when these are in use, dirty water leaks into their tent, ruining their limited possessions and creating an unhygienic sleeping space.

SANITATION

Access to water in the camp for bathing and using the toilets is limited. Despite new toilets having been installed one month prior to the research study, water in the toilets is cut off during the night-time and for several hours in the afternoon, raising serious concerns regarding hygiene standards.

The unsanitary conditions in the camps on Lesvos risk contributing to the spread of disease, inflammation, scabies and skin infections. One Moria camp resident said: “Before we were swimming in small spring which is full of dirt to spend our need [to get rid of our waste], even in the cold weather. This has caused us a lot of infectious skin diseases.”

A refugee who had been in Lesvos for more than seven months told researchers that he was only able to have a shower every 15-20 days: “I crave having a shower. I beg to have a shower, we are human not animals.” A Syrian refugee said: “I lived in Syria without water, electricity and other services. However, the situation was better than here.”

The vast majority of respondents had experienced a health problem since arriving in Greece; only 13.8% said that they had remained healthy whilst on the island. 57.1% of those who reported health problems believed that these had been brought on by the unhealthy camp environment, and an alarming 61.1% of those with a health problem said that they had not received medical care.

Medical treatment from the hospital of Mytilene has to be paid for by residents, as well as the transport to get there, which makes it inaccessible for many.

There are significant obstacles preventing people from accessing medical care. Medical treatment from the hospital of Mytilene has to be paid for by residents, as well as the transport to get there, which makes it inaccessible for many.

One man explained that his son had fallen over and hit his head. He had to wait for half-an-hour for an ambulance for his son, who was bleeding profusely. The man told researchers that the ambulance driver appeared to drive very slowly on purpose. He told researchers that he had to wait again when he reached the hospital, where they eventually sutured the wound but did not give them any medicine, painkillers or bandages to keep the wound clean. They were instead given a list of medicines that the father had to buy, costing 22 euros. The man told researchers that the next day his son was crying and vomiting but they could not afford to take him to the hospital.

Have you experienced any health problems since you arrived in Lesvos? All respondents

<table>
<thead>
<tr>
<th>Health Problem Description</th>
<th>Percentage</th>
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<tbody>
<tr>
<td>I think it started because of violence or tear gas</td>
<td>4.9%</td>
</tr>
<tr>
<td>Other</td>
<td>9.3%</td>
</tr>
<tr>
<td>It is a common health problem which could happen anywhere</td>
<td>45.5%</td>
</tr>
<tr>
<td>It's not a physical health problem. I am feeling extremely sad and unwell mentally</td>
<td>45.9%</td>
</tr>
<tr>
<td>I think it started because of the unhealthy environment in the camp</td>
<td>57.1%</td>
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</tbody>
</table>
An Afghan man with diabetes also explained that he was struggling to purchase his medication, given the low levels of financial aid available. Having recently spent around 100 euros on insulin, he hardly had any money left to provide for himself and his son.

Other respondents raised concerns regarding the sub-standard response from medical professionals. One refugee explained: “Whatever your disease, you will get the same medicine which is a painkiller only.” This was corroborated by research from Koosh and Refugee Info Bus, whose Afghan respondent explained: “There is not enough of anything here. The doctors don’t treat people properly. For any pain or problem they give only paracetamol.” Many refugees also reported receiving different treatment in the hospital, including sub-standard food and being left on a ward with many other refugees without any blinds or curtains for privacy.

Of the 86.2% who reported experiencing a health problem since arriving on the island, 45.9% stated that their health concern was a mental health problem, as opposed to a physical ailment.

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Mental Health

Of these, 61.1% reported that they had not received medical care. The extreme and worsening conditions on the island, and the length of time spent there, appear to have contributed to an exacerbation of mental health concerns among camp residents. A woman told researchers of her sister who had been on the island for some three months: “I lost my sister, she was totally fine and now she is crazy, she yells all the time and sometimes she tries to beat me.”

For many, the reality that they will be living in these conditions for a long time has caused them to lose all hope. One respondent said: “I cannot explain how much the situation is miserable... I have no hope.” Indeed, many respondents appeared to suffer from severe depression and some expressed suicidal thoughts. One respondent exclaimed: “I prefer to die than to be here.”

In accordance with Refugee Rights Europe’s referral policy, the research team refers at-risk respondents to appropriate services, wherever possible.
ARTICLE TWENTY-FIVE (2)

Motherhood and childhood are entitled to special care and assistance. All children, whether born in or out of wedlock, shall enjoy the same social protection.

WOMEN AND MOTHERS IN DISPLACEMENT

The average age of the women interviewed was 31 years, with one girl being under the age of 17 and the oldest woman aged 60. 70.4% were aged 18 to 35. The majority of 42.6%, were from Syria and a substantial 20.4% were from Afghanistan. 11.1% reported being alone in Lesvos.

WITH WHOM ARE YOU IN LESVOS?

**WOMEN ONLY**

With family: 88.89%

Alone: 11.11%

**DO YOU FEEL THAT YOU ARE SAFE INSIDE THE CAMP?**

**WOMEN ONLY**

Yes, I feel perfectly safe: 1.85%

Yes, I feel quite safe: 3.70%

It’s ok: 1.85%

No, I do not feel very safe: 22.22%

No, I never feel safe: 70.37%

Despite the majority of women travelling in a family group, an alarming 92.6% stated that they either ‘do not feel very safe’ or ‘never feel safe’. For instance, an Iranian woman spoke about the lack of security in the camp. She explained how a male refugee had tried to push the door open whilst she was in the female changing room, which is located next to the male changing room. She told researchers that this made her feel anxious because it brought back dark memories of sexual abuse in Iran.

**SHE EXPLAINED HOW A MALE REFUGEE HAD TRIED TO PUSH THE DOOR OPEN WHILST SHE WAS IN THE FEMALE CHANGING ROOM**

Such incidents signal an urgent need to ensure a gendered approach to camp design and security; which is currently lacking entirely in Lesvos, leaving women at a heightened risk.
Alarmingly, one displaced person living on the island explained that he had seen a Greek man attempting to rape a 10-year-old girl. However, it was noticed and prevented when the girl began to shout. The Greek man was allegedly taken to the police but was later released.

35.2% of displaced women interviewed said they had experienced violence by other refugees; all of which consisted of verbal abuse.
64.8% of female respondents said that they had experienced police violence. 94.7% of these respondents had been exposed to tear gas, 21.1% to verbal abuse, 21.1% to physical abuse and 2.3% spoke about sexual abuse.

The research findings moreover highlight the acute vulnerability of pregnant women living in Lesvos. One woman said she had lost her baby in the second month of pregnancy due to the effects of tear gas. Another respondent explained: “My wife was pregnant and someone pushed her and she fell down and lost her baby. There is no government here and the police don’t care.”
Have you experienced any health problems since you arrived in Lesvos?

<table>
<thead>
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<th>Women Only</th>
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<tr>
<td><strong>Yes</strong></td>
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<td><strong>No</strong></td>
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Did you receive medical care for your health problem?

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<th>Women Only</th>
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<td><strong>Yes</strong></td>
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<td><strong>No</strong></td>
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Worryingly, 92.6% of female respondents had experienced health problems whilst in Lesvos, although only 30% of these women had received medical care. A striking 67.3% attributed these health concerns to the camp environment.

She had lumps in her breasts, was coughing blood and had a fever, amongst other symptoms.

An Iraqi man told us that his wife was sick but that no attention was given to her condition. She had lumps in her breasts, was coughing blood and had a fever, amongst other symptoms. One night she went to the toilet where there was broken glass on the seat and a piece of glass was lodged in her leg. He said doctors only gave her plasters.

In one particularly harrowing example of the lack of medical care available to pregnant women on the island, one newly-married couple explained to researchers that, when regular delivery was not possible, doctors had postponed the delivery of their baby rather than performing a cesarean section, leading to delivery in the tenth month of pregnancy. The overdue baby had therefore swallowed amniotic fluid and suffered from serious respiratory problems and was sent to intensive care. Tragically, the couple were unable to regularly visit the hospital to be with their 18-day-old child due to financial constraints.
Whilst trapped on the island of Lesvos, children typically spend a significant part of their childhood and psychologically formative years in dangerous and highly stressful conditions. The unhealthy and violent living conditions are particularly harmful for children, who require special care and heightened protection. A worrying 43.8% of minors interviewed reported that they were on their own in Lesvos.

At the time of the study, 69.6% of child respondents had been in Lesvos for four months or less. However, a number of the children interviewed had been in the camp since June 2017.
Do you feel that you are safe inside the camp?

MINORS ONLY

Yes, I feel perfectly safe. 0.00%
Yes, I feel quite safe. 8.70%
It’s ok. 8.70%
No, I do not feel very safe. 4.35%

No, I never feel safe. 78.26%

Have you ever experienced violence by Greek citizens in Lesvos?

MINORS ONLY

Yes 30.4%
No 69.6%

78.3% of the minors interviewed told us that they ‘never feel safe’. Much of this feeling appeared to be caused by instances of violence against them by local citizens, the police and other refugees.

69.6% of minors told researchers that they had experienced citizen violence, nearly half of whom had encountered verbal abuse, whilst 42.9% had experienced physical abuse. A 16-year-old boy from Afghanistan said: “They [citizens] throw eggs at us.”

What kind of citizen violence have you experienced in Lesvos?

MINORS ONLY

Verbal abuse 57.14%
Physical abuse 42.86%
Sexual abuse 0.00%
39.1% of minors reported that they had experienced police violence in Lesvos. An alarming 85.7% of these children reported that this violence took the form of tear gas, with 42.9% reporting verbal abuse and physical abuse.

An alarming 26.1% of the minors interviewed said that they had been arrested or detained in Greece. This appears to be in direct contravention with Article 37 of the Convention of the Rights of the Child, which prohibits arrests, detentions and imprisonment of children except as a ‘measure of last resort’.

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A staggering 73.9% of children had suffered from a health problem whilst in Lesvos. 47.3% of children believed that their health issues were caused by the unhealthy conditions on the island.

23.5% mentioned that they were suffering from mental health issues rather than a physical ailment. Worryingly, 41.2% also told us that they had not received medical care to treat their health problem.

One camp resident told us of a young girl, aged 16, who had been bitten on her back and shoulder by a scorpion. She was not sent to the hospital but to the camp clinic, where she was not treated as an emergency patient. She was crying and had to wait for more than three hours before her father borrowed 50 euros to take her to the hospital and pay for the medication needed.
74.2% of all respondents indicated that they did not have access to any form of education in Lesvos.

A striking 81.5% of female respondents also said that they did not have access to any education.

65.2% of child respondents said that they had access to educational opportunities in Lesvos. Greek law states that education is compulsory for all children between the ages of five and 15, including asylum seekers, even if they lack any formal papers. They should have access to public education “for so long as an expulsion measure against them or their parents is not actually enforced”.

Furthermore, Article 2 of the European Convention on Human Rights states that no person should be denied the right to an education. However, our research found that many children appear to have fallen through the gap in Lesvos. One young boy said: “my mother died in Iraq by an explosion, and my father is in Iraq. I am 16 years old and I work here, I do [grocery] shopping for people and I receive money for this. Sometimes I sleep hungry because I don’t have enough money to buy food. I want to go to school, but they don’t allow me, they told me I am too old for going to school.”

“THEY DON’T ALLOW ME, THEY TOLD ME I AM TOO OLD FOR GOING TO SCHOOL.”
16-YEAR-OLD IRAQI BOY

Whilst more than 68% of respondents had arrived in the Moria camp during 2018, there were actually ten respondents who had been there since December 2016 or for even longer. Extensive time spent on the island and sustained exposure to the challenging conditions appear to be contributing to, and exacerbating, mental and physical health problems experienced on the island. A young Afghan man, who has been on the island for over 20 months, said: “I am going mad on this island.”

Under the EU-Turkey Statement, vulnerable displaced people are exempt from the geographical restrictions imposed on new arrivals and are not subject to the so-called ‘admissibility’ procedure. In theory, they are able to move to the mainland to claim asylum. Exemptions are also in effect for those eligible for family reunification under Dublin Regulations. However, according to local NGOs and camp residents alike, most new arrivals appear to have been told that they will have to wait until 2019 or even 2020 for an admissibility or vulnerability assessment. Aid organisations working on the ground also told researchers that even those who have been identified as vulnerable face a significant wait until they are transferred to the mainland. Moreover, those considered vulnerable are supposed to be moved to safe accommodation provided in Mytilene. However, Refugee Rights Europe were led to understand that this accommodation is now full, meaning that many vulnerable displaced people are left in unsafe conditions in Moria camp awaiting transfer.

One issue of specific concern is the separation of families due to vulnerability status and illness. In many cases where individuals are assessed as eligible for transfer to the mainland in accordance with a vulnerability assessment or diagnosed illness, their family members cannot join them. “They are separating families here,” one man from Afghanistan said. Indeed, when a child or spouse is accepted to the mainland due to ill-health, the rest have to stay behind, still trapped on the islands.

Another respondent spoke about his elderly parents who need him to assist them in daily activities. His parents were permitted to go to Athens but he was not: “My parents cannot live without me and they cannot go to Athens alone. We have to pay to get a medical report for me to be able to leave.”

The process by which vulnerability assessments are conducted remains a source of serious concern. Currently, assessments are carried out by the Greek Reception and Identification Service (RIS), with support from the European and Asylum Support Office (EASO). NGOs working on the ground and human rights groups have raised concerns regarding the significant delays to vulnerability assessments due to a lack of staff and expertise. In July 2017 on Lesvos, there were only seven vulnerability experts with a severe backlog and a three-month wait for an opinion. Worryingly, reports indicate that vulnerabilities are often missed, with individuals going through the asylum procedure without having their vulnerability assessment completed first. Medecins Sans Frontieres (MSF) report that, out of the total number referred to its clinic on Lesvos, almost 70% belonged to a vulnerable group that had not been recognised, including victims of sexual violence, torture or those with serious mental health disorders.

When asked how they feel about being in Europe, 66.2% of respondents said they felt ‘bad’ or ‘very bad.’ Only 5.4% said they felt ‘very good’ about being in Europe.

One woman explained: “We escaped from death however, we found a different kind of death.”

**“WE ESCAPED FROM DEATH HOWEVER, WE FOUND A DIFFERENT KIND OF DEATH.”**
ANONYMOUS WOMAN
Over 25% of all respondents said they were trying to reach Germany, but a majority of 32.4% said that they just wanted to get to any safe country. Respondents intending to reach particular countries spoke about their reasons concerning lifestyle and education opportunities. However, the majority wanted to be reunited with family, friends and support networks.

63.1% of all respondents stated that they had family elsewhere in Europe. Most people told us that they had siblings in other areas of Europe. Even more women, 72.2%, reported having family in Europe at the time of the study.
The respondents had family members across Europe; the most frequent responses included Germany, Sweden and the Netherlands. However, Greece, the United Kingdom, France, Switzerland, Belgium, Austria, Norway, Denmark and Italy were also hosting family members of people living in the camps of Lesvos.

**Which family members do you have in Europe?**

- **Brother(s) / sister(s):** 49.2%
- **Cousin:** 41.5%
- **Uncle / Aunt:** 31.3%
- **Other:** 11.3%
- **Father / mother:** 6.7%
- **Child:** 5.6%
- **Husband / wife:** 4.1%
- **Grandmother / Grandfather:** 0.5%

**In which country are your family members?**

- **Germany:** 55.9%
- **Sweden:** 22.6%
- **Netherlands:** 12.3%
- **Greece:** 11.8%
- **United Kingdom:** 11.3%
- **France:** 9.7%
- **Switzerland:** 9.7%
- **Belgium:** 9.7%
- **Other:** 6.2%
- **Australia:** 4.1%
- **Austria:** 4.1%
- **Norway:** 2.1%
- **Denmark:** 2.6%
- **Italy:** 2.1%
Amongst the female respondents, 46.2% had brothers or sisters in Europe. However, 5.1% had parents, 10.3% had children and 7.7% had their husband or wife living elsewhere in Europe.
60.9% of the children interviewed said that they had family members in Europe. Nearly half of these respondents said that they had siblings or an aunt or uncle in another European country. 7.1% said they had a mother or father in another European country and therefore may be eligible for family reunification under European law.
Do you have access to information about your legal rights and opportunities to change your situation? All respondents

- Yes: 16.7%
- No: 76.5%
- I don’t know: 6.8%

Do you have access to information about European immigration and asylum rules? All respondents

- Yes: 15.1%
- No: 76.2%
- I don’t know: 8.7%

The study found that access to information concerning legal rights and opportunities was significantly lacking. 75.5% of respondents said they did not have access to information concerning their legal rights and a similar 76.2% said they did not have access to information concerning immigration rules and European asylum law.

Do you have access to information about your legal rights and opportunities to change your situation? Women only

- Yes: 5.6%
- No: 85.2%
- I don’t know: 9.3%

Do you have access to information about European immigration and asylum rules? Women only

- Yes: 13.0%
- No: 77.8%
- I don’t know: 9.3%

Only 5.6% of women said that they knew where to get legal advice to help them change their situation. A slightly higher, but still inadequate, 13% of women said that they had access to information about European asylum law and immigration rules.
59.1% of child respondents told us that they felt ‘bad’ or ‘very bad’ in Europe with the vast majority of 83.3% attempting to reach another European country, because they had family members or friends, and therefore a support network, in those countries.

NEARLY 95% OF ALL RESPONDENTS SAID THAT THEY COULD NOT GO BACK TO THEIR COUNTRY OF ORIGIN.

Given the substantial challenges of survival on the island of Lesvos and the difficulties in accessing legal knowledge and aid, the vast majority remain stuck. Nearly 95% of all respondents said that they could not go back to their country of origin, leaving them with limited alternatives to life in Greece and waiting on their status determination interviews or results.

None of the female respondents said that they would be able to return to their country of origin with certainty. An overwhelming 91.3% of children told us that they could not go back to their country of origin or that they did not know if they would be able to do so.

NONE OF THE FEMALE RESPONDENTS SAID THAT THEY WOULD BE ABLE TO RETURN TO THEIR COUNTRY OF ORIGIN WITH CERTAINTY.
NOTHING IN THIS DECLARATION MAY BE INTERPRETED AS IMPLYING FOR ANY STATE, GROUP OR PERSON ANY RIGHT TO ENGAGE IN ANY ACTIVITY OR TO PERFORM ANY ACT AIMED AT THE DESTRUCTION OF ANY OF THE RIGHTS AND FREEDOMS SET FORTH HEREIN.

Article Thirty
CONCLUSION

Our research in Lesvos in June 2018 found that the EU-Turkey Statement has contributed towards an urgent and tense environment on the island due to overcrowding, lack of capacity and resources, and unauthorised mobility. A series of overwhelmingly unmet needs and serious human rights infringements are suffered by the people in displacement on the island.

Limitations placed on refugees – many of whom have come from conflict-ridden countries or from places experiencing other forms of protracted emergencies – that prohibit them from moving onto the Greek mainland and onward, has led to chronic overcrowding. Meanwhile, charities, NGOs are working relentlessly and tirelessly to provide some of the most basic services required, but many find themselves lacking sufficient resources.

Violence against displaced people in Lesvos is commonplace. This violence includes police violence, citizen abuse and violent brawls between refugees themselves – largely due to heightened desperation amongst individuals trapped on the islands in sub-par conditions.

Instances of arbitrary detention and the detention of children are taking place on the island. The study found that a high percentage of the sample group had been detained, including children, allegedly for the sole reason of having found themselves in the near vicinity of a violent brawl between other refugees.

The living conditions of the camps are a significant challenge and appear to be deteriorating with time. Due to the lack of space for new arrivals, some people are forced to live outside the camp, leaving them at a heightened risk of environmental harm such as scorpion bites or flooding.

Access to food and water is limited or sub-standard. The food appears to have made residents ill and the water allocation is insufficient, particularly in the high temperatures of the summer months.

Both physical and mental health problems are rife on the island, and the treatment of health issues is particularly under-resourced. Access to services at the main hospital, as well as the transport required to get there, are costly, which restricts access for the majority of displaced people. Sanitation and access to shower facilities in order to maintain hygiene are inadequate, thus risking the spread of disease and contributing to the prevalent physical health problems. In addition, the mental health situation on the island is particularly worrying, with insufficient medical or psycho-social services.

THE RESEARCH FINDINGS HIGHLIGHT THE FOLLOWING SPECIFIC CONCERNS:
The Greek Government should:
Ensure the urgent provision of basic shelter to all refugees and displaced people arriving on the islands, regardless of admissibility, in line with international human rights provisions, in particular the UN Declaration of Human Rights, Article 25, and fully implement the 2013/33/EU Directive on reception conditions for asylum seekers, recently transposed into Greek law, to improve the living conditions for displaced people on the islands.

The EU and its member states should:
The European Commission must ensure that sufficient funding from the Asylum, Migration and Integration Fund (AMIF) is mobilised, to support the implementation of adequate living standards and human rights obligations.

Safety and Security

The Greek Government should:
Urgently address claims of police violence perpetrated against refugees and displaced people on the islands. The Government must provide unequivocal instructions to its police forces not to resort to the disproportionate use of force, the excessive use of tear gas and pepper spray, in particular against displaced people who are posing no threat, and ensure compliance with international human rights obligations.

Ensure that the detention of displaced people only takes place as a matter of last resort. Long periods of detention inside Moria camp, with reports of police violence and abuse, must end.

The detention of children must end under all circumstances.

Citizen violence enacted against the displaced population must be investigated and protection against such violence upheld.

Concerns around camp safety and camp design should be prioritised, in particular for vulnerable women and children in displacement who face a heightened risk of violence.

The EU and its member states should:
Ensure that all funding allocated to the Greek Government is conditional upon compliance with the aforementioned human rights obligations, to ensure that disproportionate violence against refugees and displaced people on the islands ends under all circumstances.

Access to Healthcare

The Greek Government, alongside the EU, should:
Ensure that sufficient resources are made available for the health needs of the displaced population on the islands, including increased resources for mental health care such as social works and psycho-social support.

The EU must make available sufficient funds to ensure that the Greek Government is providing adequate healthcare in line with its national and international obligations.
access to information and education

the greek government should:

Ensure that reception centres on the island provide new arrivals with transparent and clear guidance on asylum policy and procedures, in languages and formats that are accessible to displaced people in line with international, EU and national law.

The Greek Government must ensure that displaced children are able to access education during their time spent in displacement on the islands.

the eu and its member states should:

The European Commission, through the Asylum, Migration and Integration Fund (AMIF) and other relevant funding mechanisms, should ensure that sufficient resources are made available to front-line civil society organisations working to disseminate essential information quickly and effectively through translators and interpreters, including female-only interpreters where required.

The European Commission, through relevant bodies and funding sources, must work closely with Greece to ensure that reception centres provide essential information and work to streamline the provision of information for refugees and displaced people in Europe.

women in displacement

the greek government should:

Take urgent action to address the alarming situation for displaced women experiencing sexual and gender-based violence (SGBV) on the islands, including addressing concerns about camp design and sanitation facilities. GBV experts and social workers should be made available to support those who have suffered abuse.

Sexual and reproductive healthcare (SRH) must be made available for displaced women on the island in line with Minimum Initial Service Package (MISP) guidelines, including extending the variety in the provision of contraception, with discreet and private access, with a view to empowering women to be in charge of their reproductive rights; distributing culturally appropriate educational materials relating to pregnancy and sexual health; ensuring women have discreet and swift access to pregnancy tests and relevant referral pathways; and training and sufficiently resourcing the lead service providers handling SRH services in each camp to deliver the MISP for Reproductive Health, ensuring strong SRH coordination with a designated lead organisation/staff member in each camp and streamlined services.

the eu and its member states should:

Ensure that sufficient funding from the Asylum, Migration and Integration Fund (AMIF) is made available to support the implementation of the above recommendations for women in displacement and to ensure adequate resources.
The Greek Government should:

Ensure that displaced children are able to access safe, legal routes, including ensuring those eligible for family reunification under the Dublin Regulation are able to do so swiftly.

Make sure that displaced children are able to access education during their time on the island, in line with the Universal Declaration of Human Rights, Article 26 and Greece’s national commitments.

The EU and its member states should:

As a matter of priority, the European Commission, through the Asylum, Migration and Integration Fund (AMIF) and other relevant funding mechanisms, should contribute meaningfully to ensure that sufficient resources are in place for child protection with trained staff, social workers, therapists and sufficient overall capacity.

Work to ensure the effectiveness of the right to family reunification under the Dublin Regulations for unaccompanied children, ensuring that applications are processed swiftly and that all staff are sufficiently trained to deal with applications.

Vulnerability Assessments

The Greek Government should:

The Greek Government must take into account the specific situation of vulnerable persons in accordance with Article 22 of the 2013/33/EU Directive.

The Ministry of Health must ensure that the Reception and Identification Service (RIS) is properly funded and staffed, in order to carry out vulnerability assessments in the first instance upon arrival.

The Ministry of Health should ensure that RIS staff are adequately trained to conduct vulnerability assessments.

The EU and its member states should:

Ensure that all European Asylum Support Office (EASO) staff are adequately trained in order to deal with the complexity of the vulnerability cases present on the island and ensure that there is a sufficient number of vulnerability experts to deal with the high number of cases.

The EU must make available, through the Asylum, Migration and Integration Fund (AMIF) and other relevant mechanisms, sufficient funding for both RIS staff and EASO working on vulnerability assessments, including capacity-building and vulnerability training.

Conclusion

In conclusion, effective and long-lasting policy action by the European Union and the Greek Government is urgently needed, to secure the human rights of refugees and displaced people in Lesvos. The Universal Declaration of Human Rights must be at the centre of any policy initiative to ensure that refugees and displaced people are given the protection and opportunity expected by international standards.