NATIONAL AND KAPODISTRIAN UNIVERSITY OF ATHENS
DEPARTMENT OF MEDICINE

MSc «INTERNATIONAL MEDICINE – HEALTH CRISIS MANAGEMENT»

Master's Thesis

Immigration in Greece following the closure of the Balkan route in March 2018. A critical review of the response in Health and Protection needs of refugees and migrants

POSTGRADUATE STUDENT

LIANDRI MARIA - A.M: 20160139

ATHENS, 20 January 2019

NATIONAL AND KAPODISTRIAN UNIVERSITY OF ATHENS

DEPARTMENT OF MEDICINE

MSc «INTERNATIONAL MEDICINE – HEALTH CRISIS MANAGEMENT»

MASTER'S THESIS

SUBJECT: Immigration in Greece following the closure of the Balkan route in March 2018. A critical review of the response in health and protection needs of refugees and migrants

POSTGRADUATE STUDENTS

LIANDRI MARIA A.M: 20160139

PART A' – Critical Review

KARAGIANNIS GEORGIOS A.M.: 20160128

PART B' – Research

ATHENS

20 January 2019

ΕΘΝΙΚΟ ΚΑΙ ΚΑΠΟΔΙΣΤΡΙΑΚΟ ΠΑΝΕΠΙΣΤΗΜΙΟ ΑΘΗΝΩΝ

ΙΑΤΡΙΚΗ ΣΧΟΛΗ

ΜΕΤΑΠΤΥΧΙΑΚΟ ΠΡΟΓΡΑΜΜΑ ΣΠΟΥΔΩΝ

«ΔΙΕΘΝΗΣ ΙΑΤΡΙΚΗ-ΔΙΑΧΕΙΡΙΣΗ ΚΡΙΣΕΩΝ ΥΓΕΙΑΣ»

ΔΙΠΛΩΜΑΤΙΚΗ ΕΡΓΑΣΙΑ

ΘΕΜΑ: Η Μετανάστευση στην Ελλάδα μετά το κλείσιμο της Βαλκανικής οδού, το Μάρτιο του 2016. Κριτική ανάλυση της απόκρισης στις ανάγκες υγείας και προστασίας προσφύγων και μεταναστών.

ΜΕΤΑΠΤΥΧ. ΦΟΙΤΗΤΕΣ

Λιανδρή Μαρία - Α.Μ: 20160139

Μέρος Α': Κριτική ανασκόπηση

Καραγιάννης Γεώργιος - Α.Μ: 20160128

Μέρος Β' - Έρευνα

ΑΘΗΝΑ

20 Ιανουαρίου 2019

ΠΡΑΚΤΙΚΟ ΚΡΙΣΕΩΣ

ΤΗΣ ΣΥΝΕΔΡΙΑΣΗΣ ΤΗΣ ΤΡΙΜΕΛΟΥΣ ΕΞΕΤΑΣΤΙΚΗΣ ΕΠΙΤΡΟΠΗΣ ΓΙΑ ΤΗΝ ΑΞΙΟΛΟΓΗΣΗ ΤΗΣ ΔΙΠΛΩΜΑΤΙΚΗΣ ΕΡΓΑΣΙΑΣ

Της Μεταπτυχιακής Φοιτήτριας Λιανδρή Μαρίας

Εξεταστική Επιτροπή

- ....., Επιβλέπων
- ....., Μέλος
- .....,Μέλος

Η Τριμελής Εξεταστική Επιτροπή η οποία ορίσθηκε απο την ΓΣΕΣ της Ιατρικής Σχολής του Παν. Αθηνών Συνεδρίαση της .....ης ..... 20... για την αξιολόγηση και εξέταση τ... υποψηφίου κ... ....., συνεδρίασε σήμερα .../.../....

Η Επιτροπή **διαπίστωσε** ότι η Διπλωματική Εργασία τ. Κ... ..... με τίτλο

….....

.....……...

……

……., είναι πρωτότυπη, επιστημονικά και τεχνικά άρτια και η βιβλιογραφική πληροφορία ολοκληρωμένη και εμπεριστατωμένη.

Η εξεταστική επιτροπή αφού έλαβε υπ' όψιν το περιεχόμενο της εργασίας και τη συμβολή της στην επιστήμη, με ψήφους ..... προτείνει την απονομή στον παραπάνω Μεταπτυχιακό Φοιτητή την απονομή του Μεταπτυχιακού Διπλώματος Ειδίκευσης (Master's).

Στην ψηφοφορία για την βαθμολογία ο υποψήφιος έλαβε για τον βαθμό «ΑΡΙΣΤΑ» ψήφους ....., για τον βαθμό «ΛΙΑΝ ΚΑΛΩΣ» ψήφους ....., και για τον

βαθμό «ΚΑΛΩΣ» ψήφους ..... Κατά συνέπεια, απονέμεται ο βαθμός «(Αριστα/Λίαν Καλώς/Καλώς)& (Βαθμός).....».

Τα Μέλη της Εξεταστικής Επιτροπής

- ....., Επιβλέπων (Υπογραφή) _____
- ....., Μέλος (Υπογραφή) _____
- ....., Μέλος (Υπογραφή) _____

ABSTRACT

The study thesis in consideration attempts a critical analysis on the effectiveness of the humanitarian response in Greece in the period following the closure of the Western Balkan route and the EU-Turkey Agreement in March 2016 and up to November 2017 -a period when Greece had been forced to re-gear its migration approach- targeting protection and health for migrants. It reveals that, although the number of beneficiaries was relatively small and Greece, with the assistance of the EU and other stakeholders, had invested a lot of resources on the relative response, there had been serious drawbacks and failures in terms of coherence of assistance and capacity of services, while migrants had been exposed to health and life-threatening risks and violations of their human and legal rights. Insufficiency of response, further to deficiencies inherent in the Greek system, reflects the impact of internalization and EU-migration governance on national planning and migration policy.

Key words: *migration, Greece, health, protection, humanitarian response, migration policy, EU*

ΠΕΡΙΛΗΨΗ

Η παρούσα μελέτη διερευνά και αξιολογεί την αποτελεσματικότητα της ανθρωπιστικής δράσης στην Ελλάδα, κατά την περίοδο μετά το κλείσιμο της Βαλκανικής οδού και τη Συμφωνία Ε.Ε.-Τουρκίας το Μάρτιο του 2016 έως και το 2017 - περίοδο κατά την οποία η Ελλάδα αναγκάστηκε να επαναπροσδιορίσει την μεταναστευτική της πολιτική - ενώ επικεντρώνει το ενδιαφέρον της στους τομείς της υγείας και της προστασίας. Αποκαλύπτει δε ότι, παρά το σχετικά μικρό αριθμό των ωφελούμενων, υπήρξαν σημαντικά κενά ως προς τη συνάφεια και τις δυνατότητες της απόκρισης, και πως οι ίδιοι οι μετανάστες βρέθηκαν εκτεθειμένοι σε επισφαλείς για την υγεία και τη ζωή τους συνθήκες και αντιμέτωποι με παραβιάσεις των ανθρωπίνων και νομικών τους δικαιωμάτων. Η ανεπάρκεια στην απόκρισης, πέρα από τις σύμφυτες αδυναμίες του Ελληνικού συστήματος, ανακλά την επιρροή του Διεθνισμού και της κοινής Ευρωπαϊκής μεταναστευτικής διακυβέρνησης στον εθνικό σχεδιασμό και στην εθνική μεταναστευτική πολιτική.

Λέξεις κλειδιά: *μετανάστευση, Ελλάδα, υγεία, προστασία, ανθρωπιστική δράση, μεταναστευτική πολιτική, Ε.Ε.*

Photo 1: Waiting – Skaramagas site, 2017

@Fragiska Megaloudi,

Σε όλους εκείνους,

που σε αντίξοους καιρούς και συνθήκες,

επιλέγουν να αγαπούν

και να υπηρετούν τον άνθρωπο

Ένα ιδιαίτερο ευχαριστώ σε όλους όσοι συμμετείχαν στην έρευνα και ειδικότερα στους μετανάστες, που δεν μοιράστηκαν μαζί μας μόνο την άποψη τους, αλλά και τις ανθρώπινες ιστορίες τους. Ένα ξεχωριστό ευχαριστώ στις κ.κ. Ειρήνη Βλάχου, που βοήθησε στο νομικό κομμάτι και Φραγκίσκα Μεγαλούδη, που διέθεσε τις φωτογραφίες της, οι οποίες αποτυπώνουν μοναδικά τη μεταναστευτική πραγματικότητα, για τη συμβολή και την ευαίσθητη ματιά τους. Ένα μεγάλο ευχαριστώ τέλος, στην κα Ελένη Κάκαλου, επιβλέπουσα της μελέτης, για την εμπιστοσύνη, τη στήριξη και κυρίως το ανοιχτό ανθρωπιστικό της πνεύμα, μα και σε όλους τους ανθρώπους του ΠΜΣ, για τις ευκαιρίες και τις στιγμές που μου χάρισαν.

Table of Contents

_Toc520169

Introduction 14

Overview of the Study 16

Chapter 1: International Migration 18

1.1 International Migration in the 21st Century – Facts and Realities 19

1.2 Migrant Categories – Marginalization and Vulnerabilities 24

1.2.1 Basics of Migrant Protection 27

1.2.2 Migration as a Health Factor 30

1.3 Internatiolization and Migration Governance – An EU Perspective 34

Chapter 2: Migration in Greece - A Eurocentric Approach 38

2.1 The EU-Reaction to the Humanitarian Emergency 40

2.1.1 EU-Funding for the Common Migration Governance 43

2.2 The Impact of the EU-Migration Governance 46

2.3 Migration Policy in Greece - Developments and Challenges 53

Chapter 3: Migration Response in Greece (2016-2017) 57

3.1 A Multispeed Approach 58

3.1.1 Funding and Actors 58

3.1.2 The Development of the Humanitarian Response in 2016-2017 60

3.2 Results and Discussion 68

3.2.1 Protection and Health Deficiencies and Concerns 68

3.2.2 Commenting on the Drawbacks of the Response 78

Limitations (Part A) 83

Conclusions 84

References 85

Annex I: Synopsis in Greek

Annex II: Observational Field Visits

Annex III: Asylum Service

Annex IV: Part B

Abbreviations

A

AMIF: Asylum Migration and integration Fund

C

CEAS: Common European Asylum System

CD: Communicable Disease

CNN: Cable News Network

CTP: Cash Transfer Program

CRRF: Comprehensive Refugee Response Framework

D

DP: Displaced Person

DG-ECHO: Directorate General for European Civil Protection Emergency Funding

DG-HOME: Directorate General for migration and Home Affairs

DG-SANTE: Directorate General for Health and Food Safety

E

EASO: EU-Asylum Support Office

EC: European Committee

EMSC: European Migrant Smuggling Center

ERU: Emergency Response Unit

ESTIA: Emergency Support to Integration and Accommodation Program

EU: European Union

EUNAVFOR MED: EU-Naval Force Mediterranean

EURODAC: European Dactyloscopy (Fingerprinting)

EUROJUST: EU-Judicial Cooperation Agency

EUROPOL: EU-Agency for Law Enforcement Cooperation

EUROSUR: EU-Border Surveillance System

EUTF: EU-Emergency Trust Fund

F

FRONTEX: Frontières extérieures (French)

FYROM: Former Yugoslavian Republic of Macedonia (North Macedonia)

G

G20: The twenty most Developed Countries in the World

GCR: Greek Council for Refugees

GPR: General Data Protection Regulation

H

HCDC: Hellenic Center for Disease Control and Prevention (in Greek Κ.Ε.ΕΛ.Π.ΝΟ.)

NHOC: National Health Operations Center (in Greek Ε.Κ.ΕΠ.Υ)

HIV: Human Immunodeficiency Virus

I

ICCPR: International Covenant on Civil and Political Rights

ICRC: International Committee of the Red Cross

IDP: Internationally Displaced Person

IFRC: International Federation of the Red Cross/Red Crescent

IHL: International Humanitarian Law

ILO: International Labor Organization

INGO: International Non-Governmental Organization

International Law: IHL, Human Rights Law, Refugee and Customary Law

IO: International Organization

IOM: International Organization for Migration

IRC: International Rescue Committee

ISF: Internal Security Fund

M

MISP: Minimum Initial Service Package

MMR Vaccine: Measles, Mumps, Rubella

MoH: Ministry of Health

MoMp: Ministry of Migration Policy

MDM: Médecins du Monde (French)

MSF: Médecins Sans Frontières (French)

N

NATO: North Atlantic Treaty Organization

NCD: Non-communicable Disease

NCEC: National Center for Emergency Care (in Greek Ε.Κ.Α.Β)

NCSS: National Center for Social Solidarity (in Greek Ε.Κ.Κ.Α)

NGO: Non-Governmental Organization

NVAC: National Vaccination Committee

P

PFA: Psychological First Aid

PHC: Primary Health Care

PRC: Pre-removal Centers

PSS: Psycho-Social Support

R

RIC: Reception & Identification Center

RC: Red Cross

RC/RC: Red Cross/Red Crescent

S

SDG: Sustainable Development Goal

SGBV: Sex & gender based violence

SRHC: Sexual & Reproductive Health Care

SSMRN: Social Security Member Registration Number (in Greek A.M.K.A.)

STIs: Sexually Transmitted Infections

T

TB: Tuberculosis

U

UASC: Unaccompanied/Separated Children

UDHR: Universal Declaration of Human Rights

UN: United Nations

UNCAT: UN Convention against Torture

UNCRC: UN Convention on the Rights of the Child

UNCTOC: UN Convention against Transnational Organized Crime

UNHCR: United Nations High Commission for Refugees

V

V4: Visegard countries

VoT: Victims of Torture

W

WASH: Water Sanitation and Hygiene

WHO: World Health Organization

Introduction

Throughout time, the global and perplex phenomenon of migration holds a significant role in shaping the world the way we know it. Indispensable part of human history and civilization since the very beginning, migration encompasses all kinds of movement of people from their habitual place to a new settlement, whatever its length, composition and causes.

In recent era, ongoing wars and persecutions, inadequacy of protection systems and violation of human rights, statelessness, poverty, climate change, environmental degradation and disasters keep people on the move, while the geographical distance arrays between countries of destination and origin have tremendously increased and diverse, leading migrants from Africa, the Mid-East and Asia to distant Europe.(1)

Being away from their homes and families, lacking a community support mechanism and having to live in countries where they do not speak the language and might not be familiar with the culture, migrants are by definition vulnerable. Unable to always enter legally the European Union (EU), a lot of migrants try irregular ways and are smuggled to host countries. Coming from war-torn countries, having suffered abuses and/or having been forced to travel exhausting and fatal migratory routes, migrants get further traumatized. Moreover, they are often exposed to unfriendly, hostile environments, marginalization and detention, discrimination and xenophobia, exploitation, trafficking and criminal networks with little access to rights and assistance.(2)

Addressing the needs of migrants on one hand, and managing migration on the other, are two major concerns on national and international level. Interconnectivity and interdependence of states and societies call for international cooperation and coordination to balance and equally share the burden of migration and on the same time improve response to the needs of the migrants. While global and regional cooperation give great potential to common problem solving and international assistance, international interdependence has a huge impact on domestic affairs. Common policies and agreements, financing and solidarity, influence national planning and enable a variety of international actors to act in the territory of a country affecting decision making, allocation of resources, capacity and flexibility to adapt; indicative being, in this regard, the case of migration in Greece.

For almost a decade now, Europe receives immense inflows of migrants; that have put extra pressure on its structures challenging its resilience. Migration to Greece is interconnected to migration to Europe both because of its key geographical position on one of the three main entrances to the EU and because management and response to migration is interdepended to common policies and strategies on EU-level.

In March 2016, the Western Balkan route from Greece to other European countries closed and the route between Turkey and Greece on the East Mediterranean corridor to Europe largely shut by an Agreement between the EU and Turkey, also known as the EU-Turkey Statement or Deal.(3) A year and a half later, in October 2017, close to 62.000 persons remained stranded in Greece.(47) Despite the fact that the number of migrants had tremendously decreased and Greece with the assistance of the EU and other actors had invested a lot of resources on relative response, migrants had limited access to legal rights and assistance, while in bigger proportion they were living under bad conditions in overcrowded Hot-Spots on the Greek islands.

The study thesis in consideration examines immigration in Greece in the period following the EU-Turkey Agreement and the closure of the Western Balkan route, in March 2016 and up to November 2017, attempting a critical analysis on the relative response. The main targets of the study therefore, are irregular migration and humanitarian assistance in the EU-framework. The scope of the study is to evaluate the level and the efficiency of the response to migrant needs, having as a measure the right of all humans to life and dignity and focusing on health and protection; as well as to reveal the political, legal and economic implications involved and their impact on the humanitarian response. The space of the study by no means allows for an in depth analysis of the migratory phenomenon in Greece, while answering migration is beyond the aims of the authors. It tackles however, critical issues and draws useful conclusions in regards to migration response in Greece that might contribute in the synthesis of realistic proposals for improvement.

Important Note: Although the general terms immigration and migrant are used, the group of interest is third country nationals (non-EU and non-Europeans), who are (irregular) migrants in the EU.

Overview of the Study

For academic reasons, the present study is organized in two parts. It compiles however, as a whole, the results of a critical review and field observations (a retrospective analysis), as well as of a qualitative research, to which both students involved have contributed. In this regard, introduction and conclusions have been commonly prepared and are the same for both parts.

INTRODUCTION (Maria Liandri & Georgios Karagiannis)

MAIN PART

PART A-Critical Analysis

Chapter 1: International Migration

1.1 International Migration in the 21st Century – Facts and Realities

1.2 Migrant Categories – Marginalization and Vulnerabilities

1.3 Internatiolization and Migration Governance – An EU Perspective

Chapter 2: Migration in Greece - A Eurocentric Approach

2.1 The EU-Reaction to the Humanitarian Emergency

2.2 The Impact of the EU-Migration Governance

2.3 Migration Policy in Greece - Developments and Challenges

Chapter 3: Migration Response in Greece (2016-2017)

3.1 A Multispeed Approach

3.2 Results and Discussion

PART B - Research (Georgios Karagiannis) - **Annex IV**

Essential of Humanitarian Response (Int,l and in Greece)

Essentials on Building a Response

Realities and Challenges in Greece

Research

Background and Methodology

Checking the Parameters of the Report Effectiveness

Effectiveness Analysis Based on Quantitative and Qualitative Data

Analysis of the Main Findings of the Research

Conclusions

CONCLUSIONS (authors: Maria Liandri & Georgios Karagiannis)

PART A- Methodology

For the critical review PubMed, Scholars Google and Google have been searched for the period after 2013 and up to 2018 with compilations of the key words: “migration” “Greece”, “EU”, “migrant/refugee” “health”, “protection”, “policy”, “asylum” “reception” “humanitarian response” “EU-funding”, “statistics” “sovereignty” and “internalization”. There has also been extensively used grey literature, factsheets and updates from Governmental, Non-Governmental (NGOs) and International Organizations (IOs), minutes of meetings and operational updates and articles.

Resources and references have been selected from a total of a 210, on grounds of:

A. Relevance – filters:

- Response period: 2015-2018
- Place of interest: Europe, EU, Greece, Eastern Mediterranean Corridor and Balkan route

B. Credibility and ability to cross check and verify the information provided.

(The protocol of the study is included in Annex IV)

Information gathered had been supplemented by observational field visits in reception and accommodation centers both on North Aegean islands and the mainland, as well as different settings assisting migrants in Attica. The visits were much facilitated by the professional engagement of both students in the domain of migration with notable humanitarian organizations. Annex II: List of field visits and photographic material.

The paramount term (humanitarian) response concerns overall policies, projects, actions and aid developed by stakeholders aiming to address migration related needs, protect migrants and alleviate their suffering. The effectiveness of the response has been evaluated on grounds of designing (analysis and planning), relevance, flexibility accessibility, quality of performance and success.

Under the title *International Migration*, Chapter 1 sets grounds of the study by: introducing the terminology used and making all necessary clarifications; identifying the protection and health needs of migrants worldwide; presenting the basic international principles and standards for adequate humanitarian response (against which humanitarian response in Greece for the period 2016-2017 is checked in the discussion part 3.2); tackling key issues in regards to the impact of EU-policies and internationalization on domestic affairs and humanitarian response.

All protection and health needs presented in Chapter 1 have been positively checked as relevant to the Greek context by means of the research contacted on the effectiveness of migrant related protection and health response for 2016-2017 (Part B), bibliography and observation.

Chapter 1: International Migration

"Society only has form, and that form only has effects on people, insofar as structure is produced and reproduced in what people do"

Anthony Giddens

Migration trends and patterns, as well as the numbers and the profile of migrants alter over time. In recent times, globalization, world interconnectivity, literacy and education, technology, transportation and communications facilitated economic, social and cultural exchanges and the development of extended international networks.(2) Space and time have compressed, the western model of life has been diffused and thanks to consumerism the exotic and the unfamiliar became enticing.(4) While however, free movement of products and ideas is welcomed and promoted, this is not always the case for human beings. Especially immigrants travelling irregular routes, no matter their background and origin tend to homogenously symbolize a threat and that is reflected on discriminatory and restrictive migration policies, depriving them of their fundamental human rights.

Photo 2: Idomeni site - Health Services, 2016

@Maria Liandri

1.1 International Migration in the 21st Century – Facts and Realities

In the 21st century, the number of international migrants has been growing worldwide. By United Nations (UN) reports, international migrants from 173 million in 2000, in 2017 had climbed to 257.7 million.(5)

For the Period 2015-2017:

- The persentage of migrants to the overall world population remained around 3% (with slight fluctuations from 2.8 % to 3.4%)
- The intensity of international migration had declined to 2.0% per year (fom 2.4% in the period 2010-2015).(5)

There is however, an overall significant increase in both internal and across borders forced displacement. According to the United Nations High Commission for Refugees (UNHCR), in 2017, "31 people are newly displaced every minute of the day".(1,6)

International Migrant

is "any person who is outside a State of which she or he is a citizen or national, or in the case of a stateless person, her or his State of birth or habitual residence."

International migration encompass both emigration & immigration

Source: United Nations Office of the High Commissioner for Human Rights (OHCHR) at *Recommended Principles and Guidelines on Human Rights at International Borders (2014)*

Forced Migrant

is "a person person subject to a migratory movement in which an element of coercion exists, including threats to life and livelihood, whether arising from natural or man-made causes (e.g. movements of **refugees** and **internally displaced persons** as well as people displaced by natural or environmental disasters, chemical or nuclear disasters, famine or development projects)"

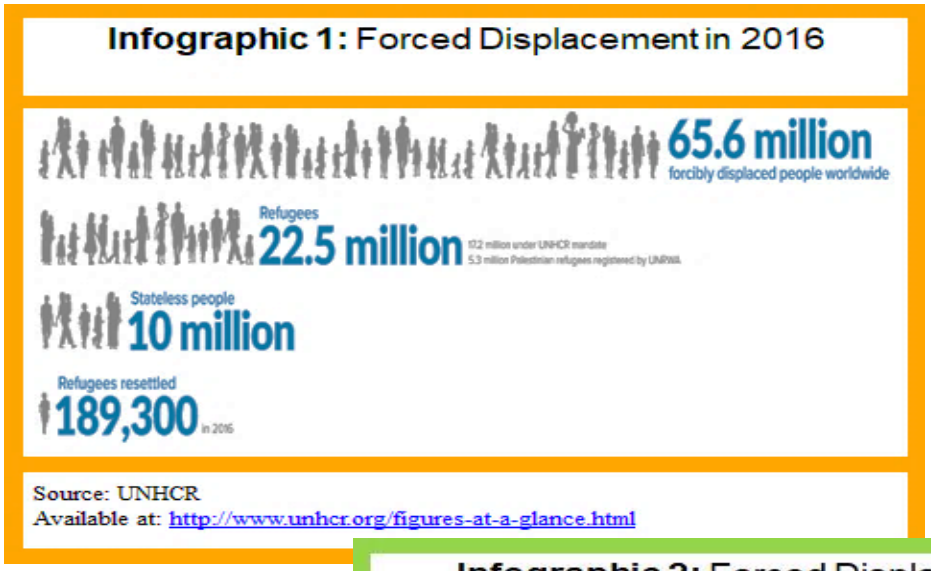
Source: IOM
Available at: https://ec.europa.eu/home-affairs/content/forced-migrant_en

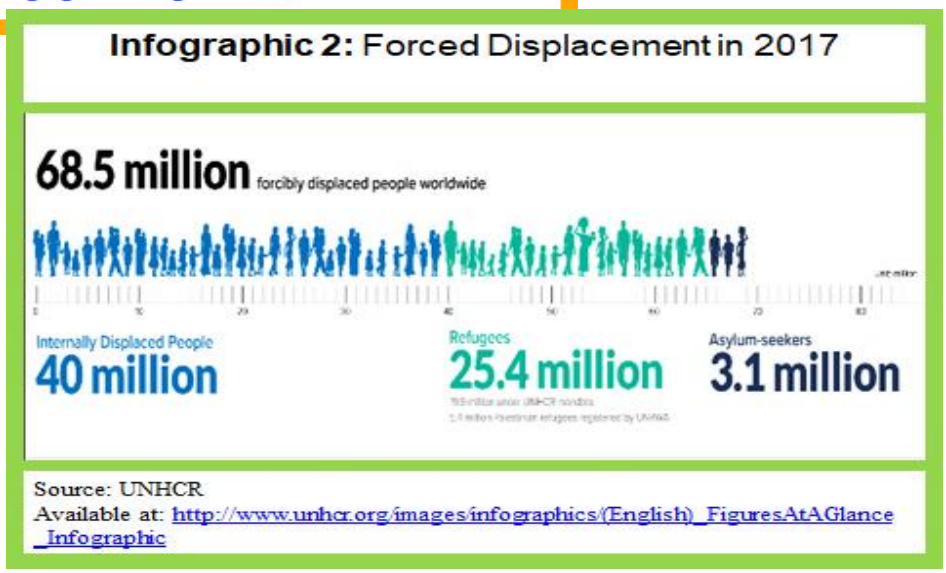
It has been estimated that, throughout 2016, 226 armed conflicts were ongoing worldwide. Most of them, such as the fatal wars in Syria, Iraq, Mexico, Afghanistan and sub-Saharan Africa continued and in 2017.

Natural disasters, climate change and unsustainable use of natural resources leading to environmental degradation had also been the case.(1) People worldwide had been forced to move due to sudden natural events or because of slow-onset deteriorating environmental conditions affecting their livelihood and exposing them to famine, unsafe water and high risk.

Inforgraphics 1 & 2 illustrate that the forcibly Displaced Persons (DPs) from 65.6 million, in 2016,

had reached the 68.5 million, in 2017[1].(1,6)





In the period 2016-2017, the 55% of all DPs had been Syrians, Afghans and South Sudanese, however only the 10.1% of all DPs were refugees or in refugee like situation.(1,6) Moreover, the 51% in 2016 and the 52% in 2017 of all DPs is estimated to have been underage[2].(1,6)

According to UNHCR there had been:

- 75.000 Unaccomanied and Separated Children (UASC) in 2016

- 138.7000 UASC in 2017

* The above-mentioned numbers cannot be confirmed, because UASC are underscreened and ~~underreported.(1,6)~~

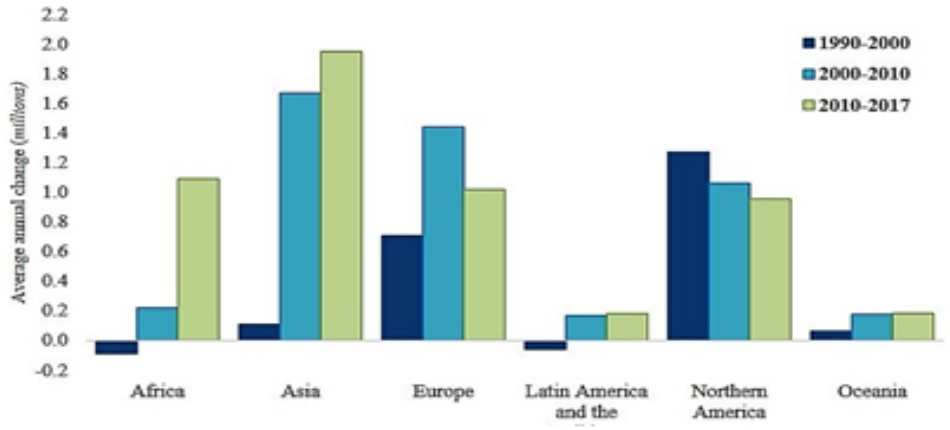
[1] *Trends for 2017 had increased because of 5.1 million displaced Congolese and the exodus of 655.500 Rohingya people from Myanmar to Bangladesh.(6)*

[2] *Below the age of 18 years old according to EU-standards*

Given the diversity of people on the move and prevailing dynamics, the "geography of migration" provides accurate insight about the impact of migration on countries and regions, as well as about future trends. According to the UNHCR and to the International Organization for Migration (IOM), in 2016-2017, the 60% of all migrants was shared between Asia (+/-80 million) and Europe (+/-78 million) (Chart 1).(1,2) In the second decade of the 21st century, Europe's share of the world's migrants has increased. At the same time however, EU-share of world's refugees has been lower than in the previous two decades; what differ is the increased numbers of non-EU non-Europeans among them.

Chart 1: Migration Trends by Region of Destination

Average annual change in the number of international migrants by region of destination, 1990-2017 (in million)

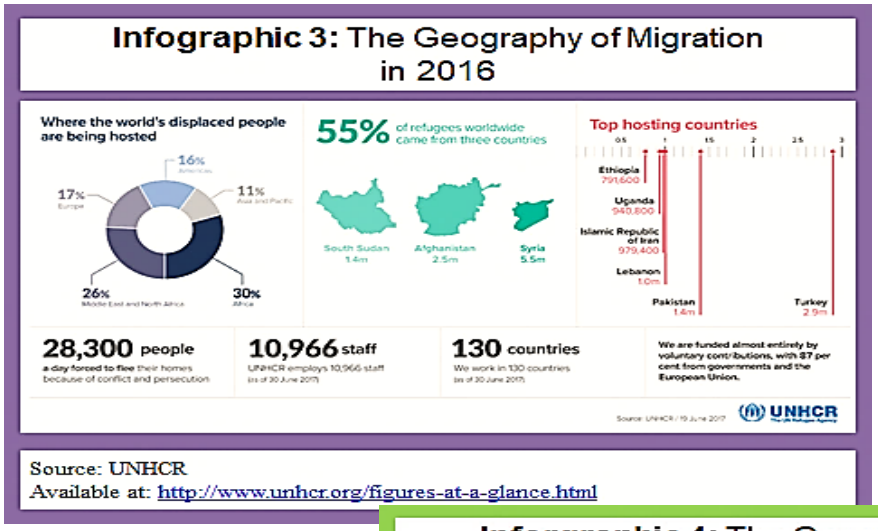


Source: UN
Available at: http://www.un.org/en/development/desa/population/migration/publications/migrationreport/migreport.shtml

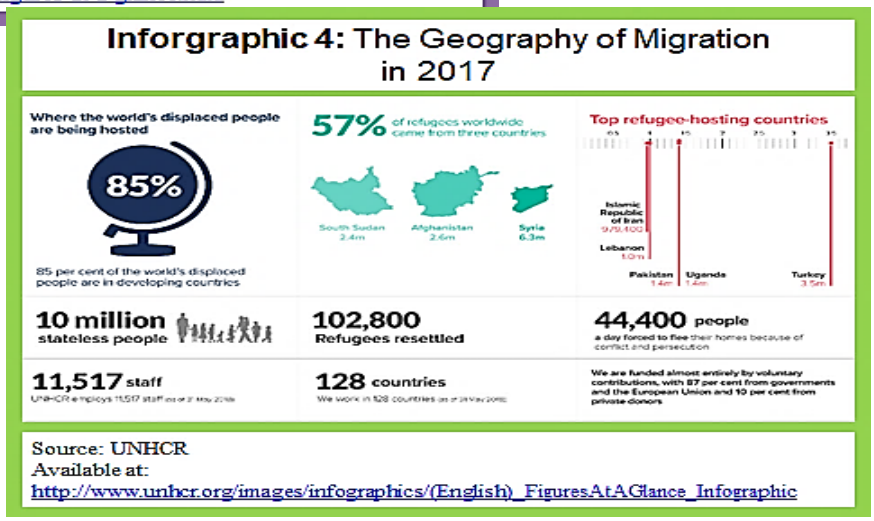
Prosperous and political stable countries, such as Germany and South Asia had attracted an increasing number of migrants; statistics reveal however, that in a majority DPs stayed within their region:

- Developed countries hosted the 64% of all the international migrants
- The 84% (in 2016) and the 85% (in 2017) of the DPs remained in developing countries(2)

In this regard, although Germany had been the greater pull for Syrian refugees within the EU, Syrians in great majority stayed in Turkey, Lebanon and Jordan. Turkey alone hosted 2.9 million refugees and asylum seekers, in 2016 and 3.5 million, in 2017 (Infographics 3&4). Migration burden had been higher for Lebanon (1 migrant/6 inhabitants) and Jordan (1 migrant/11 inhabitants), while Turkey was only third in rank (1 migrant/28 inhabitants).(1)

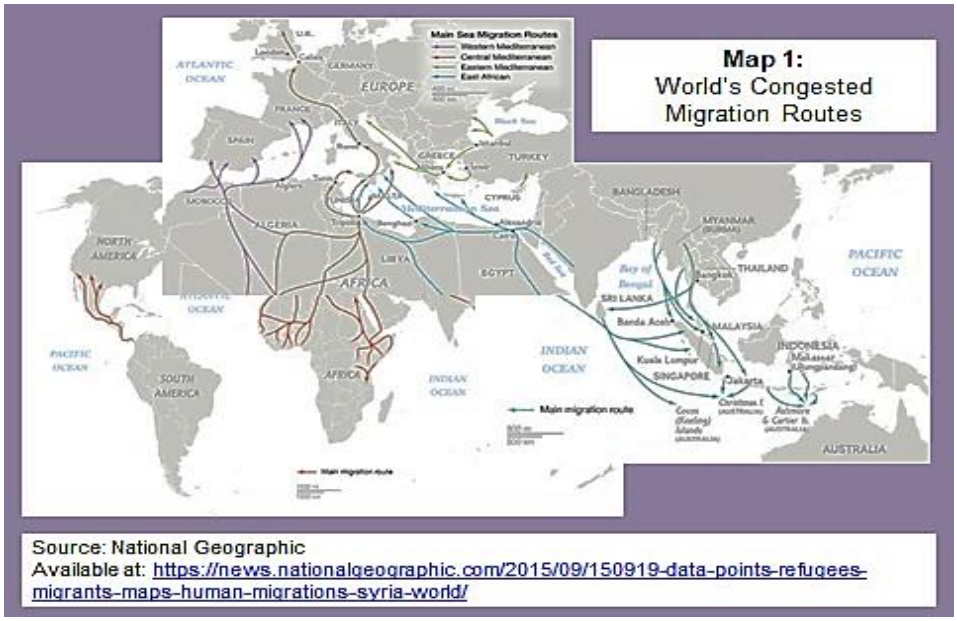


Source: UNHCR
Available at: http://www.unhcr.org/figures-at-a-glance.html



Source: UNHCR
Available at:
http://www.unhcr.org/images/infographics/(English)_FiguresAtAGlance_Infographic

Both within a region and internationally, migrants tend to follow certain migratory routes, because of geographical accessibility, developed networks, tradition or historical bonds (Map 1). Such a route is the one liaising Algeria and Morocco with Spain much reflecting their colonial connection.(2,22)



Source: National Geographic
Available at: https://news.nationalgeographic.com/2015/09/150919-data-points-refugees-migrants-maps-human-migrations-syria-world/

Migration from developing countries in Asia and Africa to Europe is organized in three main corridors (Map 2):

- The West Mediterranean route liaising Senegal, Mauritania and Morocco to Spain. Almost sealed for years because of bilateral agreements of Spain with Senegal and Mauritania and reinforced border controls, recently, that route became busy again. Even that being the case, for the period 2016-2017, the 93% of migrant influxes to -the EU had been shared between:
- The Central Mediterranean route leading from Africa to Italy and Malta
- The East Mediterranean route, passing through Greece and liaising EU with the Middle East and Africa via Turkey by both land and sea.

Because of the enforcement of a stricter EU migration policy aiming to control and better manage migration influx through the Mediterranean Basin, in 2016-2017 relative inflows had been significantly reduced in comparison to 2015.

Map 2: Migratory Routes to the EU

Source: Missing Migrants Project – IOM
Available at: http://missingmigrants.iom.int/mixed-migration-routes-europe

The number of migrants is relatively small but the burden of migration is not fairly shared. Moreover, given the number of people on the move and their humanitarian needs, as well as the dire conditions prevailing in many of the host countries and at the transit points where migrants get often stranded, it is common for migration to go along hand with accommodation deficiency and humanitarian emergency. Along the migratory routes, migration affects a number of countries to whole regions and societies; still, those most affected are migrants themselves.

1.2 Migrant Categories – Marginalization and Vulnerabilities

There is a great diversity in migrant origin and categories: labors, students, refugees, asylum seekers, etc.; moreover, the diversification of migrant composition within a country, especially when a migrant-pull or transit, can be extended. Some migrants finally, are more vulnerable, because of their category, background, country of origin, mode of travelling, difficulty to integrate, etc..

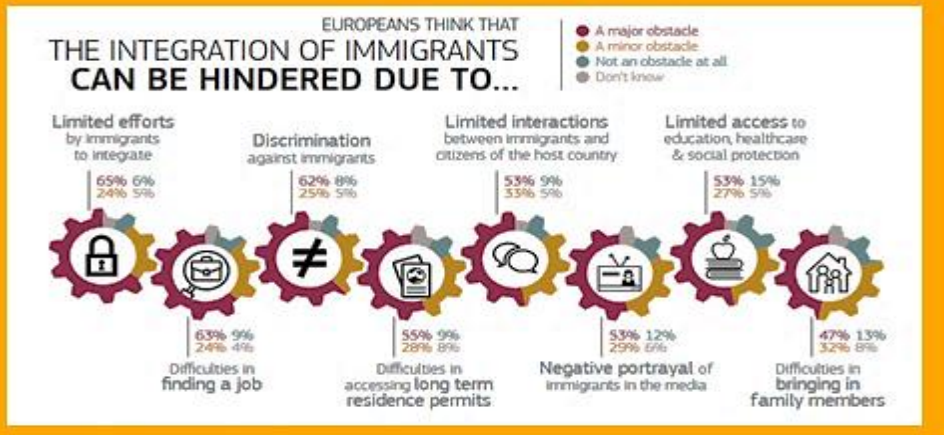
Inclusion of migrants is essential for the well-being of both migrants and their hosting society. In this regard, the economic situation and the skills of migrants play an important role. Countries in need of workers tend to be more open, while those talented or skilled and students are welcomed in a majority of countries. The 20 more Developed Countries in the World (G20) in their 2017 report on migration refer that "when supported by appropriate policies, migration can contribute to inclusive and sustainable economic growth and development in both home and host communities";(10) indicating the developmental elements involved in migration for both the developing countries of origin, where migrants send remittances, and for host countries, where migrants fill labor gaps, pay taxes and social security contributions, improve demographics and enrich cultural diversity.(10) Conditions remain difficult for those unskilled and options to find a job vague; the International Labor Organization(ILO) and IOM underline that even when get a job, migrants are usually underpaid, overworked and overlooked.(2)

Austerity and inability of countries to absorb and integrate migrants, lack of supportive networks, such as family and friends and alienation, contribute to the marginalization of migrants and their exposure to exploitation and criminal networks, as well as to increasing racism and xenophobia. Cultural, religious, social and spatial barriers between immigrant and host communities often result in the development of parallel worlds (ghettos) even within a neighborhood.

It is common for hosting societies to feel that migrants should be the ones culturally adapted.(12) Migration policies however, should take into account that it usually takes years before migrants can fully integrate and that potentials increase only with the second generation.(12) In the meantime, even when there is provision for migrant inclusion in public services and health systems, relative access remains restricted. In this regard, cultural mediation is an important prerequisite. Furthermore, education, further to being important for the dignity and the self-reliance of migrants, can contribute to breach gaps, even in countries like Greece, where cultural, religious and language differences amongst native-born, non-native born and long-established non-native born population are sharp.

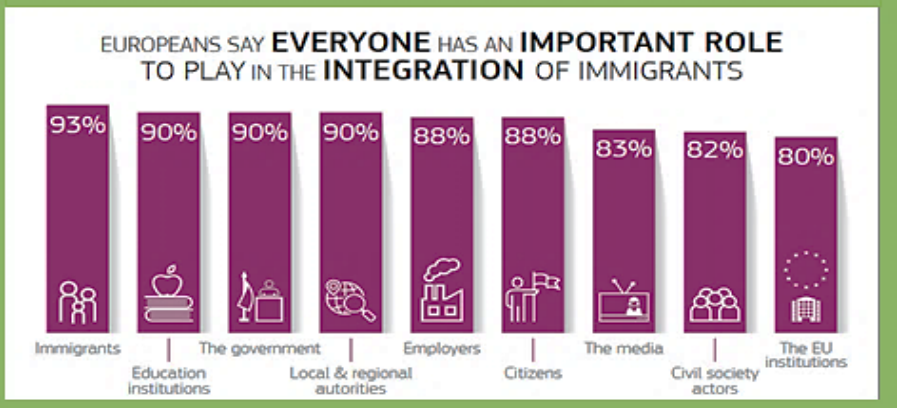
In a survey contacted among EU-citizens on the integration of non-EU migrants in the EU, a 59% admitted to have no-relation to migrant; that although in a high percentage EU-citizens viewed integration as a common responsibility for both the migrants and their hosting societies (Infographic5&6).(11)

Infographic 5: Factors Hindering the Integration of Immigrants in the EU



Source: European Commission – Eurobatometer
Available at: file:///C:/Users/07CE~1/AppData/Local/Temp/ebs_469_infographics_en.pdf

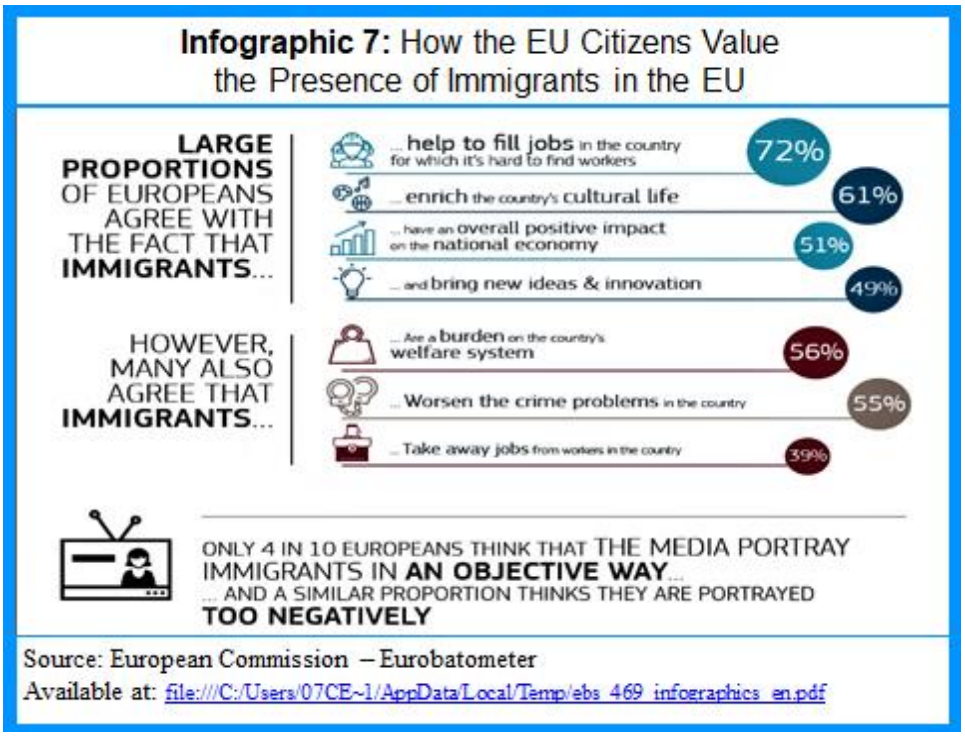
Infographic 6: Integration of Immigrants in the EU Who is responsible?



Source: European Commission – Eurobatometer
Available at: file:///C:/Users/07CE~1/AppData/Local/Temp/ebs_469_infographics_en.pdf

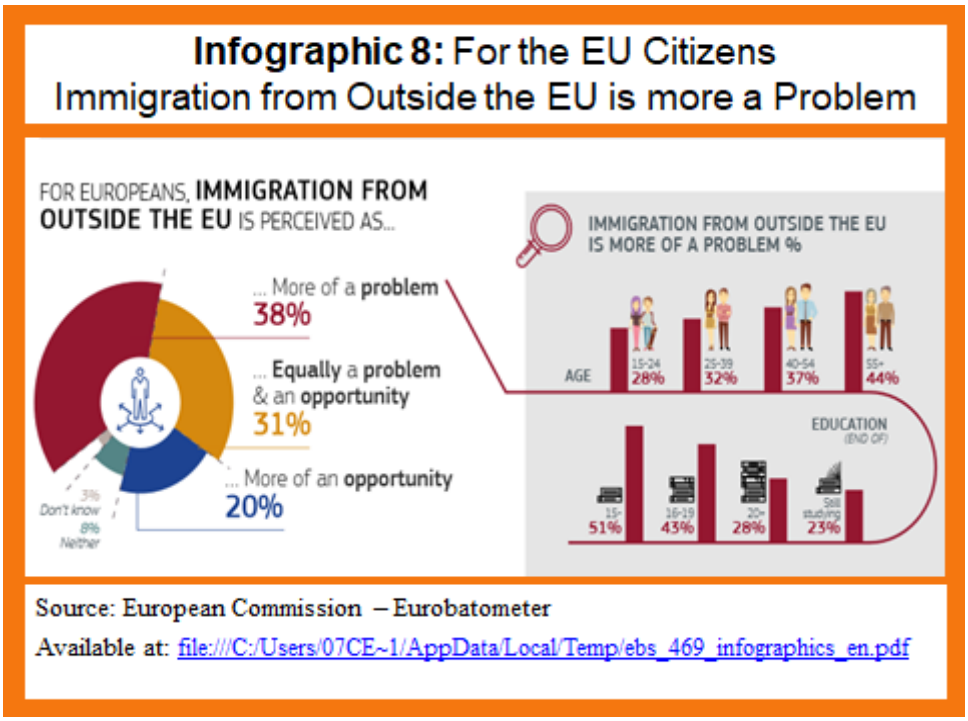
Migration sparks debates about an extended range of issues: citizenship, sovereignty, austerity, employment and social security, education, criminality, human rights, etc.. False dichotomies can be endless: migrants-native born, EU-non-EU, regular-unauthorized, government-civil society, right wing-left wing, and so on. Moreover, migration, especially when irregular, is often accused of its impact on culture, national identity, social coherence and of threatening security and stability.(2)

Politicized propaganda, fake news and overwhelming communication, along hand with well-established fears, such as terrorism and economic depression, sharpen differences with challenging structural results.(2). In this regard, EU- citizens feel that migration is a problem and such a feeling is increasing with age.(Infographic 6&7).(12)



Infographic 7: How the EU Citizens Value the Presence of Immigrants in the EU

Source: European Commission – Eurobatometer
Available at: file:///C:/Users/07CE~1/AppData/Local/Temp/ebs_469_infographics_en.pdf



Infographic 8: For the EU Citizens Immigration from Outside the EU is more a Problem

Source: European Commission – Eurobatometer
Available at: file:///C:/Users/07CE~1/AppData/Local/Temp/ebs_469_infographics_en.pdf

1.2.1 Basics of Migrant Protection

Under the *Universal Declaration of Human Rights (UDHR)*, one has the right to freely move within his/her State and even leave it. On the other hand, to enter and stay in a country one needs to have a relative authorization (citizenship, visa, etc.), otherwise is violating the respective migration policy.(13)

To avoid the by default characterization of a person as illegal and taking into consideration that among migrants are many in need of protection, the political correct terms irregular, unauthorized and non-documented migrant are used in the framework of the study in consideration. Moreover, migration is considered a paramount term "covering all kind of population movement, no matter the length, the composition and the causes, including refugees, DPs, asylum seekers, stateless, economic and environmental migrants, UASC, etc.".(14)

The terms immigrant or migrant are used for all categories of people on the move because:
- Causes of migration are mixed; forced and other forms of migration often overlap
- The legal status of migrants when first arriving in a country has not been defined
- Even if not eligible of international protection, migrants, such as environmental ones, might be in need of humanitarian assistance
- Under the humanitarian mandate everyone is eligible for assistance and protection irrespectively from his/her beliefs, nationality and status

Refugee

is a person who "owning to a well-founded fear of persecution for reasons of race, religion, nationality, membership of a particular social group or political opinions, is outside the country of his nationality and is unable or, owing to such fear, is unwilling to avail himself of the protection of that country".

Source: *Refugee Convention of 1951*, as modified by the 1967 Protocol

Asylum seeker

is a person who "seeks safety from persecution or serious harm in a country other than their own and awaits a decision on the application for refugee status under relevant international and national instruments" & in the EU context:

"a person who has made an application for protection under the Geneva Convention in respect of which a final decision has not yet been taken."

Source: EU Home Affairs
Available from: https://ec.europa.eu/home-affairs/sites/homeaffairs

It is not overlooked however, that refugees constitute a distinct legal category in need of international protection[3].(16) Asylum seekers form a separate group, as one might not qualify as a refugee but be eligible for *subsidiary protection*[4].(15)

[3] *The 1951 Refugee Convection; available at: www.unhcr.org/1951-refugee-convention.html*

[4] *In the EU, eligible for subsidiary protection are third country nationals or stateless persons who would face a risk of suffering serious harm if returned to their country of origin. EU Directives 2004/83/EC & 2011/95/EC*

States are not obliged to admit all asylum requests and an asylum seeker might need to wait for years before his/her status is defined.(2) The responsible State should/may return asylum seekers whose requests are rejected back to their home countries or to a safe country they have passed from. Under *International Law* (International Humanitarian Law/IHL, Human Rights Law, Refugee and customary law) however, *the principle of non-refoulement* prohibits the transfer of one person from one country to another "when there is substantial ground that the person will be in danger of being subject to violations of fundamental rights".(16)

Limited available -if any- legal ways to reach desired destinations force migrants, amongst whom many in need of protection because of their legal or physical vulnerability: pregnant, disable, injured, etc., to turn to smuggling networks and expose themselves and their families at life-threating travelling. Rather than a personal decision, the final destination and the road to be travelled are subject to various factors, such as: open routes and means to travel, information available, existing regular and irregular networks, geopolitics and international policies, while there is reasonable fear for migrants to become stranded at transit points.(3)

Vulnerability

there is no official definition for vulnerability, it has been well observed however, that factors such as age, gender, physical and mental status, past experience, among others, impact the way someone can respond to their environment.

Source: IOM

In the EU environment under *Directive 2013/33/EU* for *First Reception*, as persons with vulnerability are considered: unaccompanied children, persons with disabilities, pregnant women, elderly persons, one parent families, victims of trafficking, mentally ill, very sick persons, victims of torture, persons exposed to SGBV, etc.

Unaccompanied Children

"are children who have been separated from both parents and other relatives and are not being cared for by an adult who, by law or custom, is responsible for doing so."

Separated children

"are those separated from both parents, or from their previous legal or customary primary care-giver, but not necessarily from other relatives. These may, therefore, include children accompanied by other adult family members."

Source: UNHCR
Available at: https://www.unicef.org/protection/IAG_UASCs.pdf

Among the most vulnerable travelling irregular routes are children, a lot of whom UASC. Coming in a majority from war-torn countries, poor living conditions and being deprived of a supportive environment, UASC are exposed to increased protection and life-threatening risks along the migration route and in host countries. International Law indicates that UASC are entitled to legal and physical protection and assistance relevant to their age, gender and needs[5]. Inter-agency guidelines suggest for decisions and actions in support to UASC to be fast and on grounds of a best interest of the child assessment and determination.(9)

The UN claim further that between the migrants there are many Victims of Torture (VoT), but No accurate numbers are available, because VoT are under-screened and under-reported.(5) Although

[5] *With main instrument the UN Convention on the Rights of the Child (UNCRC)*

not necessarily qualifying for refugees, VoT if legally identified can be eligible for *subsidiary protection*. One of the main instruments in this regard, is *The Manual on Effective Investigation and Documentation of Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment (*the *Istanbul Protocol)*.(17, 18) By the *1984 UN Convention against Torture (UNCAT),* VoT should not be returned to torture.(18) Further to torture, the *International Covenant on Civil and Political Rights (ICCPR)* prohibits the return to other forms of ill-treatment and provides guidelines for relative treatment and assistance[6].(5)

Torture

"any act by which severe pain or suffering, whether physical or mental, is intentionally inflicted on a person for such purposes as obtaining from him, or a third person, information or a confession, punishing him for an act he or a third person has committed or is suspected of having committed, or intimidating or coercing him or a third person, or for any reason based on discrimination of any kind, when such pain or suffering is inflicted by or at the instigation of or with the consent or acquiescence of a public official or other person acting in an official capacity.

It does not include pain or suffering arising only from, inherent in, or incidental to, lawful sanctions"

Source: Article 1.1 *Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment* (commonly known as the United Nations Convention against Torture (UNCAT)

People on the move are subject to life-threatening risks and protection challenges, such as human rights violations, family separation, arbitrary detention, abductions, forced labor, abuses, exploitation, Sexual and Gender-Based Violence (SGBV), trafficking, and smuggling.

Sexual and Gender-Based Violence (SGBV)

is considered any act that is perpetrated "against a person's will and is based on gender norms and unequal power relationships. It encompasses threats of violence and coercion.

It can be physical, emotional, psychological, or sexual in nature, and can take the form of a denial of resources or access to services.

It inflicts harm on women, girls, men and boys."

Source UNHCR

Available at: www.unhcr.org/sexual-and-gender-based-violence.htm

Trafficking in persons

"shall mean the recruitment, transportation, transfer, harboring or receipt of persons, by means of the threat or use of force or other forms of coercion, of abduction, of fraud, of deception, of the abuse of power or of a position of vulnerability or of the giving or receiving of payments or benefits to achieve the consent of a person having control over another person, for the purpose of exploitation. Exploitation shall include, at a minimum, the exploitation of the prostitution of others or other forms of sexual exploitation, forced labor or services, slavery or practices similar to slavery, servitude or the removal of organs... The consent of a victim of trafficking in persons to the intended exploitation set forth [above] shall be irrelevant where any of the means set forth [above] have been used."

Source: The *Protocol to Prevent, Suppress and Punish Trafficking in Persons Especially Women and Children*, supplementing the 2000 UN Convention against Transnational Organized Crime (the Palermo Convention)

Migrant Smuggling

"the procurement, in order [the smuggler] to obtain, directly or indirectly, a financial or other material benefit, of the illegal entry of a person into a state party of which the person is not a national"

Source: *The Protocol Against the Smuggling of Migrants by Land, Sea* supplementing the 2000 UN Convention against Transnational Organized Crime (the Palermo Convention)

[6] *The physical and psychological consequences of torture: disabilities, post-traumatic stress disorder, anxiety, depression, insomnia, feelings of humiliation, etc. are long lasting and require individual and specialized treatment for rehabilitation.(18)*

For 2016-2017, UNHCR reported that many migrants claimed to have been apprehended and mistreated in Libya and Turkey.(3) In November 2017, a CNN channel exclusive report brought into light the slave trade in Libya.(19) In line to the above, during the group discussions contacted in the framework to the study, migrants of different background shared stories of involuntary family separation, abductions, rapes, deaths or disappearance of relatives, shipwrecks, attacks. Moreover, they confessed feelings of guilt and despair, because they fled, run to escape, were forced to embarked on a different boat leaving their family behind, or trusted their children to smugglers and never heard of them again.

Further to violating human rights, smuggling and trafficking are rather prosperous business for the criminal networks. Combating migration related crime is an international priority and there have been developed many relative legal instruments, more relevant being the two *2000 Palermo Protocols,* supplemental to the *UN Convention against Transnational Organized Crime (UNCTOC)*:(20)

- The *Protocol Against the Smuggling of Migrants by Land, Sea and Air*
- *The Protocol to Prevent, Suppress and Punish Trafficking in Persons, especially women and children (34)*

Irregular migration context: mixed migration, travelling in shadow and non- registration of travelers makes unclear how many have died or went missing because of migration. The two categories overlap, because in most cases it is difficult to locate, retreat and even then to identify dead bodies[7]. Death trends depend on the number of people on the move, the season and the travel mode: by boat, on foot, crossing conflict zones/seas/deserts/forests/rivers.(3) The huge numbers of deaths after shipwrecks in the Mediterranean Basin, along with the initiatives of the international community and civil society, including organizations with an institutional role, such as UNHCR, IOM and the International Committee of the Red Cross (ICRC) have pushed migration and protection at sea among the priorities of the *2030 World Agenda* and its *Sustainable Development Goals* (SDG).(45)

1.2.2 Migration as a Health Factor

Because of the social, psychological and environmental derivatives involved, migration constitutes a critical health factor.(21) Access to health is of major importance for both migrants and their hosting societies.(21)World Health Organization (WHO) recognizes health as “a fundamental right that should be available for all individuals, with non-discrimination” and irrespectively of status,

[7]*EUROPOL provides to EU-Member States support in regards to the identification of the dead.*

while urges States to "ensure access to timely, acceptable, and affordable health care of appropriate quality as well as to providing for the underlying determinants of health, such as safe and potable water, sanitation, food, housing, health-related information and education, and gender equality".(21)

Migrant health patterns are considered similar to general population, but migrants face implications because of: the hardship of their journey, exposure to environmental conditions, mass accommodation, poor hygiene, detention, violence and abuses. In this regard, "injuries burns or hypothermia and gastrointestinal illnesses, respiratory problems, fungal diseases and skin infections, like scabies are common".(21) Moreover, migrants with non-communicable diseases (NCDs), including chronic ones, such as diabetes, may face implication because of malnutrition, lifestyle problems (drugs, alcohol) and limited access to uninterrupted long-term treatment.(21)

Depending on their country of origin and/or the route they had followed, migrants might have been exposed to communicable diseases (CDs), but risk to be contiguous is similar to that for medical personnel and tourists. Proximity and inadequate housing however, increase health and security risks.(21) Vaccination is consequently, a priority with the vaccine for measles coming first, while epidemiological surveillance, Primary Health Care (PHC) and mass sanitation/hygiene promotion are considered essential. In addition, medical examination and official documentation are in most cases a prerequisite for access to legal protection (age assessment, identification of torture, etc.), which requires multidiscipline expertise and mechanisms.

Mother-Child and **S**exual and Reproductive (SRH) Healthcare needs are rather extended within migrant groups[8].(23.24) Minimum Initial Service Package (MISP) for migrants, should include: SRH in crisis, prevention of SGBV and assistance, STIs prevention, identification and treatment, continuing HIV care, prevention of maternal mortality and morbidity, family planning, menstrual protection materials, hygiene promotion and gender and age relevant hygiene kits.(23) MISP should also involve the development of relevant protocols (optimum modalities) and promote the cooperation among relevant stakeholders to enable increased coverage.(21,23)

Mental health and psychosocial support services (PSS) finally, are crucial. Human rights violations, traumatic experiences, detention and fear of deportation, ambiguity and marginalization affect the

[8] *The International Agency Working Group (IAWG) suggests for MISP to consider "a 25% of the population of reproductive age, a 4% of women pregnant and a 20% of male sexually active" Source and calculator available at: http://iawg.net/resource/misp-rh-kit-calculators/*

psychological condition of the migrants threatening their serenity, which can be harmful both to themselves and to others.

An important need for migrants is access to adequate and uninterrupted treatment, which requires access to their medical history. Different solutions have been tried ad hoc. IOM Re-Health program is piloting a unified tool for the electronic registration of personal health records (e-PHR) enabling retrieving medical history at different destinations to ease integration to different health systems and assessments at transnational level [9].(25)

Migration related humanitarian response, especially under emergency conditions of mass reception arrival and/or accommodation, is a demanding and expensive multidisciplinary process, requiring advanced skills, specialized methods and tools, emergency mechanisms, (logistic chains, mobile clinics, emergency response units, etc.), extended networks, adequate preparation, mobility and flexibility. Therefore, it usually involves multiple State and non-State actors, some with an institutional role, like International Organizations (IOs), such as UNHCR and IOM (with an institutional role since 2016) and others with sound experience, as the Red Cross/Red Crescent (RC/RC) Movement and Non-Governmental Organizations (NGOs).

Civil society consists of NGOs, such as associations, federations, unions, institutes and other groups that are not established by a government or by intergovernmental agreement; they can however, play a role in international affairs by virtue of their activities and not necessarily because they have an official mandate.

Intergovernmental/ international organizations, are associations established by States through a treaty, share aims with the States and have special organs for their functioning.

Moving in-between the **Red Cross Movement** compass of the National Red Cross/Red Crescent (RC/RC) Societies that are subject to national law and auxiliaries to their governments, the international Federation of the RC/RC (IFRC) and the International Committee of the Red Cross (ICRC) that is of hybrid nature being a private association founded under the Swiss Civil Code. **ICRC** existence is not mandated by states however, as its activities are deprived form International Humanitarian Law (IHL) ICRC enjoys privileges similar to UNHCR.

Source: ICRC
Available at: https://campus.ext.icrc.org/Files/Applications/98304/Packages/6dd375d)-7261-43fd

Further to State-policies and State-bounded stakeholders, IOs, the RC/RC Movement and civil society play an important role into the shaping of migration related picture.

[9] *Funded by IOM migration health program Re-Health and EU Directorate General for Health and Food Safety (DG-SANTE)*

Core principles for humanitarian response entail:(26)

The right to life with dignity, encompassing adequate standard of living, freedom from torture, cruelty or mistreatment and punishment, respect for the person and human rights, as well as for individual and community values and beliefs, including the liberty to exercise their religious duties.(26,p:21)

Access to humanitarian assistance, including adequate food, water, clothing, shelter and the requirements for good health. Assistance should be delivered according to the principle of impartiality and with non-discrimination on grounds of status, age, gender, race, color, ethnicity, sexual orientation, language, religion, disability, health status, political or other opinion, national or social origin.(26,p:22)

The right to protection and security. That involves the **principle of non-refoulement**.(26,p.22)

Protecting migrants and reducing the impact of migration at both home and host countries are two major concerns that call for international cooperation. In the framework of the *2030 World Agenda*, States have mutually agreed to "facilitate orderly, safe, regular and responsible migration and mobility of people, including through the implementation of planned and well-managed migration policies"(SDG 10.7).(2,5,45) In addition, in 2016, the UN General Assembly adopted *the New York Declaration for Refugees and Migrants*, calling for the development of two global compacts in 2018:

a) A global refugee compact, building upon the *Comprehensive Refugee Response Framework (CRRF)* and

b) A global compact for safe, regular and orderly migration; reaffirming however, the commitment of UN Member States to protect the human rights of all migrants, regardless of status.(2,5)

In the same spirit, EU-Member States agreed to abolish discriminatory policies and reflect those commitments into the EU-migration governance policy targeting management of migration and a coherent coordinated response "that leaves none behind".

1.3 Internationalization and Migration Governance – An EU Perspective

It is "in the sovereign responsibility" of States to ensure safety, health and protection of all people within their jurisdiction; and it is "within the prerogative of a country" to control its borders and territory and adopt a national migration policy determining the conditions of residence, naturalization, or expulsion of aliens; without however, violating human rights.(2,27) In recent years, many countries aiming to reduce migration enforce stricter migration policies, increase controls and close their borders. Inherent in that observed practice are aspect, such as:

- The framing of unauthorized migration as illegal and as a threat.
- Increased State-authority over human affairs
- The dehumanization of migration governance
- Border imperialism

Focusing on the socio-cultural differences of migrants and liaising migration to austerity and crime serves as a justification to challenging -in terms of impact on human life and societal coherence- practices, such as the underestimation of migrants, their restriction and /or the isolation ("out of sight out of mind") and the strengthening of mechanisms aiming to stop or keep migrants away. While however, fear, hate speech and radicalized ideas advance[10], independency of national policies is much questioned.

Interconnectivity and interdependence of States in the framework of internationalization has as a consequence, national migration policies to intersect with many sectors of concern (employment and social security, terrorism, crime, etc.) and to need to comply with many layers of policies, regulations, laws, agreements and treaties on national and international level.(2) Regional policies are, by their turn, subject to international relations, coalitions and geopolitics. Further to internationalization, the world has moved towards an international community within which interact diverse stakeholders: natural and international structures -like the EU- institutions, State-actors, business, IOs, civil society, solidarity groups, activists, and so on, all contributing in pluralism of perspectives and approaches.(27) In this regard, international and domestic affairs are not only interconnected, but also much subject to "the turbulence effect" of perplex and often contradicting dynamics.(27)

[10] *In 2017, the percentages of radical right parties in the EU were increased: 46.2% in Austria, 33,9% in France, 21,1% in Denmark, etc..*

Under joined sovereignty and/or coalition States consent to restrict their authority and reshape their policies to serve common values, objectives and pledges. EU-Member States do benefit from common migration governance and international cooperation, in terms of common initiative, financing, allocation of human resources, advanced synergies and coordination, coherent and collective response and increased capacity along the migratory routes. In shadow of consensus and cooperation however, the EU is challenged by imbalances in power among EU-Member States undermining State-equity. With some EU-Member States taking the lion's share in decision making and strategic planning and/or neglecting their obligations towards fair sharing of responsibility and common pledges, migration burden is in reality pushed and locked to southern EU, putting extra pressure on transit/recipient countries like Italy and Greece.(2)

EU-consensus is not free of charge. EU-funding is available to all willing to serve EU-objectives: non-EU and EU-Member States, humanitarian partners, such as UN agencies, IOs, RC/RC Movement, civil society, research organizations, private entities, etc.. Dialogue, cooperation, partnership and synergy amongst interlocutors are much promoted, while the EU urges stakeholders to see investment opportunities in the emerging markets. That way the EU, State and non-State actors can intervene outside their territory, implementing transnational and international programs and/or be present in other countries, especially when in strain, as per individual mandate and plan. The EU has been openly accused of interfering to domestic affairs and of manipulating international relations to regularize migration, keep unwanted migrants away and promote EU-Member States' and private interests within and outside the EU.(30) Indicative in this regard, are: the EU-support to UN efforts for the transformation of the political situation in Libya; and the *Joint Initiative for Migrant Protection and Reintegration in Africa* aiming for better management of migration along the Central Mediterranean route that is funded by the EU-Emergency Trust Fund for Africa (EUTF) with contributions from Germany and Italy.(40)

The EU continuously increases its investment on common EU-border reinforcement and control.(see Chpt.2.1) State-authority and border-control involve by default an element of power that is translated in: guarding (police, coastguard, surveillance) - including biometrics (Schengen Information System-SIS, EURO-DAC); restriction and punishment (detention, push-back, readmission) mechanisms; human life regularization (mandatory returns, relocations); military technology and risk of conflict.(59) In this regard, the EU has developed a long range of migration related bodies and mechanisms, such as: the *EU-Agency for the Management of Operational Cooperation at the External Borders of the EU (FRONTEX), the EU-Border Surveillance System (EUROSUR), the EU-Agency for Law Enforcement Cooperation (EUROPOL), the military EU-*

Naval Force Mediterranean (EUNAVFOR MED) and the EU-Asylum Support Office (EASO) established to support national authorities with the registration of asylum seekers.(29) In addition, with the rational of unauthorized migration, migration related crime and terrorism, the EU has externalized its borders by extending "guarding" and "defending" mechanisms to its neighbor countries.(30)

In her book *Undoing Border Imperialism* Harsha Walia's argues that border-control and externalization of borders reflects systems of power, radicalized hierarchies having their roots in colonization and slavery.(30) In the same spirit, Transnational Institute and Stop Wapenhandel accuse the EU that "embraces authoritarian regimes and provides equipment and funding to repressive police and security forces", like in Libya Sudan and Nigeria.(30) Moreover, EU migration governance and border policy have been openly criticized for violating human rights by restricting migrant access to protection,(2,59) and keeping migrants in countries with poor resources and limited protection capacity, offering in parallel, a thriving market to giant corporations such as Airbus, Thales, Leonardo , etc..(30) Even further, Transnational Institute raised concerns about the relations and influence of such private companies to State and EU policy makers.(30)

As migration intersects with a spectrum of aspects: conflict, climate change, humanitarian action, cooperation, economy, integration, human rights, cross-border crime, migration governance is rather complicated and much affected by and affecting prevailing conditions and dynamics, geopolitics, national and international laws and objectives. On the other hand, the example of the EU-migration governance is indicative of the impact of individual interest (national/organizational institutional, etc.) on common objectives and measures, as well as of the EU-Member States tendency to shift from sharing responsibility to locking migration pressure away. In addition, it is indicative of how common policies, bilateral and international agreements, financing and solidarity can allow for a variety of national and international stakeholders to interfere in the domestic and international affairs of a country, especially when in strain, like Greece, affecting migration and asylum policy, decision making, allocation of resources, capacity and flexibility and therefore the life of people already present or trying to enter it. Paraphrasing Giddens' Juggernaut concept for post-modernity, the EU might be considered as a giant Juggernaut with great potentials. It looks like a solid construction but in reality it compasses of different parts. The most powerful parts can shift its direction; however, it remains safe only if movement is uninterrupted and well-orchestrated, otherwise, it can change direction and smashing both people and its components.

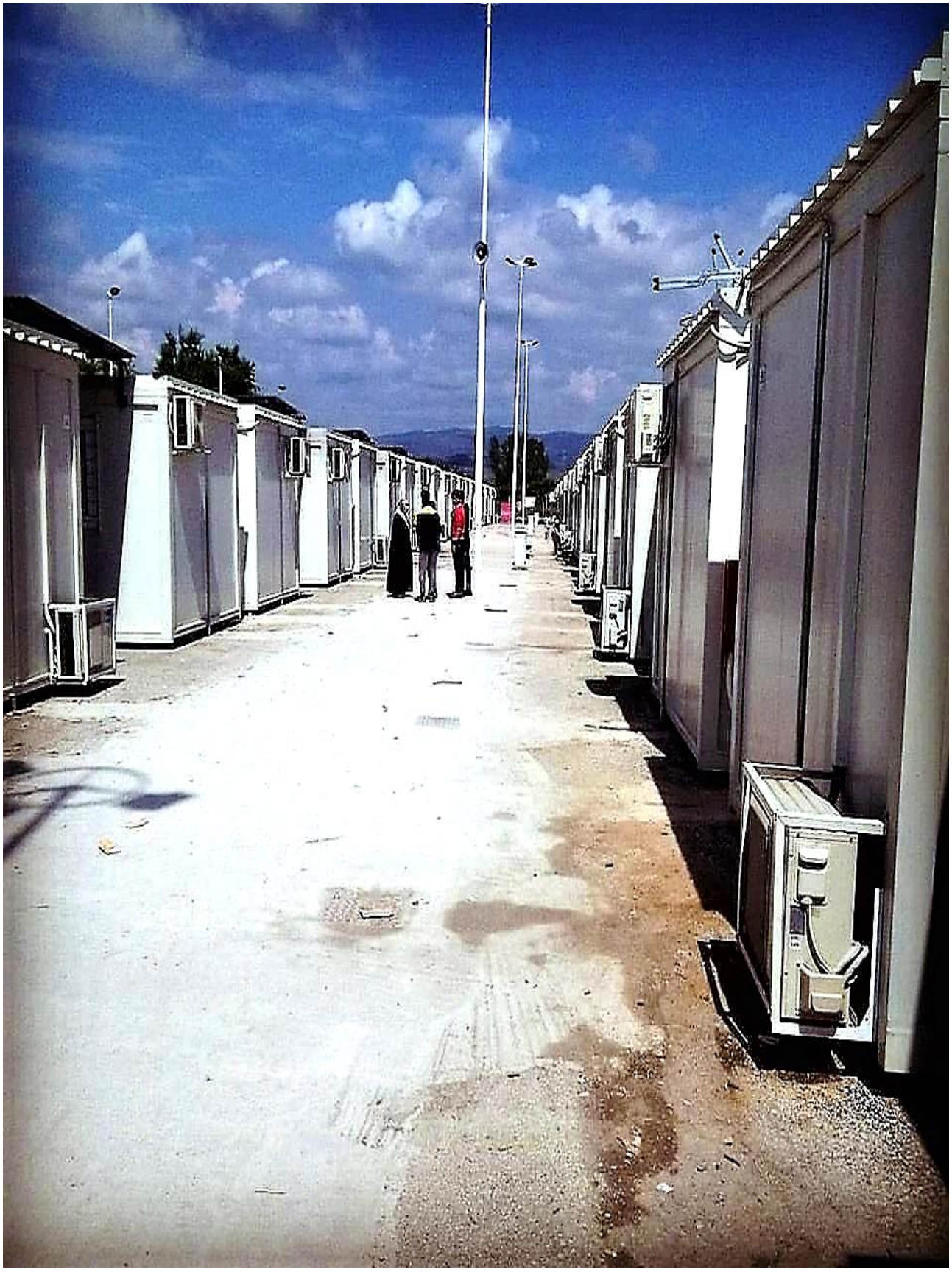


Photo 3: Greece - Open Site

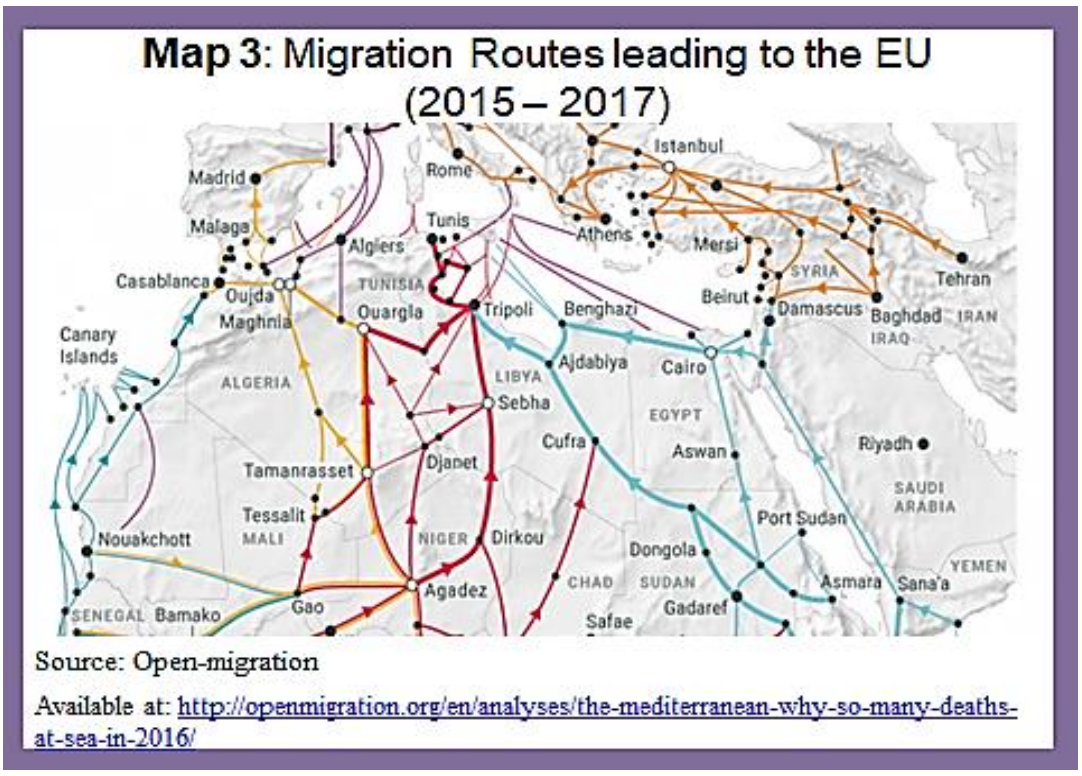
@Fragiska Megaloudi, 2017

Chapter 2: Migration in Greece - A Eurocentric Approach

"People only accept change in necessity and see necessity only in crisis"

Jean Monnet

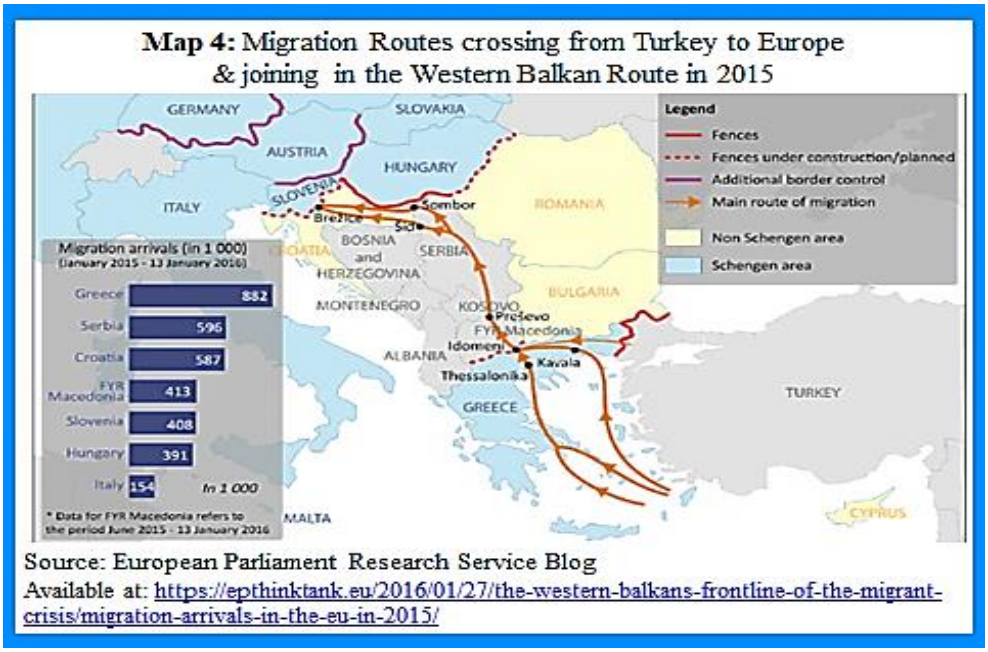
In 2015, the EU suffered a humanitarian emergency -often analyzed as an accommodation deficiency- as huge numbers of migrants entering from the Mediterranean Basin were travelling onwards to prosperous Northern EU-Member States. Migrant influx picked up to over 1.2 million persons, of whom close to 900.000 entered from Greece.



Source: Open-migration

Available at: http://openmigration.org/en/analyses/the-mediterranean-why-so-many-deaths-at-sea-in-2016/

In summer 2015, EU-Member States opened a corridor, known as *the Western Balkan route* (Map 4) that crossed Greece, the Former Yugoslav Republic of Macedonia (FYROM), Serbia, Slovenia, Croatia, and Hungary. Lacking the required capacity to properly receive and host the migrant flows, countries along the way just facilitated their transit to desired destinations with the support of IOs, civil society and activists.(31) Only later, in 2017, the *Court of Justice* concluded that "the open doors policy was not complying with the EU legislation".(31)



Source: European Parliament Research Service Blog
Available at: https://epthinktank.eu/2016/01/27/the-western-balkans-frontline-of-the-migrant-crisis/migration-arrivals-in-the-eu-in-2015/

One of the reasons for the increased migrant flows towards Northern EU has been considered to be the in public promise of Germany to examine the asylum requests of all Syrians present in the country. That had followed -at least chronically- the death of little Aylan Kurdi at a shipwreck offshore Turkey[11]. Aylan's story had extensively been used by Media and different stakeholders to expose the incapacity of the EU to protect refugees.(31) It is rather characteristic that, by the end of 2015, Germany had received alone 442.000 first-asylum requests from Syrians.(2,3)

Under the increased and unbalanced migration pressure, EU-Member States reaffirmed their commitment to the common migration governance and proceeded on relative measures, starting by giving Greece warnings about not fulfilling its obligations to *Schengen Regulation*. In February 2016, NATO together with Greek and Turkish coastguards started monitoring the East Mediterranean corridor; while Austria, Croatia, FYROM, Serbia and Slovenia agreed to collectively register and profile migrants at the Greek-FYROM borders and facilitated the transfer of those "selected" directly to Austria.(31)

In March 2016, the Western Balkan route closed and migrants remained stranded in transit countries along the way. Cross-border family separation, migrant detention, deportations and many implications in regards to defining which country was responsible to host migrants and accept their first-time asylum requests -because during the "open doors" practice EU-Member States had not

[11] *Three (3) years old Aylan or Alan Kurdi of Syrian-Kurdish origin had drowned on the 2 September, 2015 after a shipwreck offshore Turkey. Aylan and his family wanted to reach Canada. The photos of Aylan Kurdi's body exposed EU inability to protect migrants and had a great impact on international politics.*

fully applied Dublin III and EURODAC Regulations- had been only a few of the many humanitarian consequences of the closure involving serious protection and health concerns.

2.1 The EU-Reaction to the Humanitarian Emergency

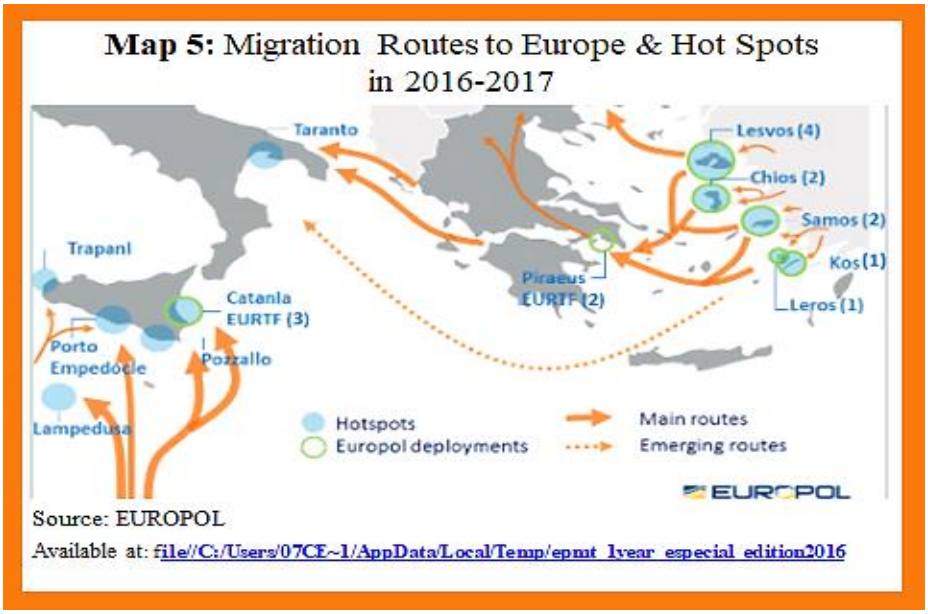
Reacting to the so be called "humanitarian emergency", the EU advanced investments, cooperation and efforts towards increased control of common-borders and better management and balanced allocation of migration; while urged EU Members States to enforce harmonized migration policies in line with the EU-commitment to "orderly, safe, regular and responsible migration", also reflected in the 2014-2020 EU-Agenda "for an open and safe EU of solidarity".(32)

The EU-strategy in regards to migration might be summarized in four points:

A. Increased Border Management

The EU strengthened its relevant Agencies (FRONTEX, EUROSUR, EUROPOL, EASO),(39) promoted cooperation in and outside the EU and supported national authorities -financially, technically and with the direct deployment of specialized EU-personnel- to advance Search and Rescue (SAR) and control capacity at EU-borders, targeting:

- Increased efficiency in detecting and preventing unauthorized migration
- Protection of migrants: saving lives and eliminating deaths at sea
- Combating cross-border migration related crime (39)



With the EU support a "Hot-Spot approach" was adopted by both Italy and Greece that established reception centers at overwhelmed entry points: on Sicily in Italy and on the Eastern Aegean Islands in Greece (Map 5). Hot-Spots aimed for an on the spot "fair and speedy" asylum process.(29) A

new European Regional Task Force (EURTF) -FRONTEX, EUROPOL, EASO and EUROJUST- had been developed and established in Catania, Italy, for the coordination of EU-Agencies and cooperation to the Italian authorities and EUNAVFOR MED (operation *Sophia*: focusing on anti-smuggling and training of the Libyan coastguard) and in the FRONTEX liaison office at Piraeus in Greece.(29)

The EU intensified its anti-trafficking and anti-smuggling efforts. Further to the already existing instruments[12], in 2015, the EU adopted an action plan against migrant smuggling and in 2016, established the European Migrant Smuggling Centre (EMSC) to "increase police and judicial response, advance information sharing, prevent smuggling, protect migrants and promote cooperation with third countries".(34)

B. Advanced Cooperation – Building Partnerships

The EU promoted dialogue and cooperation seeking to engage stakeholders and third countries in an EU-objectives oriented coherent response within and outside the EU-territory targeting:

- **Solidarity and fair sharing** of migration burden within the EU
- **Reduced numbers** of unauthorized migrants in the EU; by addressing the roots of migration, delivering humanitarian aid, increasing community resilience and strengthening protection and migration control capacity on local level.
- **More protection** on grounds of common standards in the EU and less irregular and life-threatening travelling
- **Integration** of authorized migrants (32)

C. Establishing "Safe and Legal Pathways"

Through relevant agreements and by supporting specialized programs, the EU tried to establish official routes within the EU and with third countries, to enable the:

- **Resettlement** of asylum seekers and refugees within the EU
- **Relocation** of people in need of protection from third countries to the EU
- **Return** of migrants not qualifying for international protection to their home country or in a safe-country where they have passed from**.** EU-Returns are regulated by the *Return Directive*[13]

[12] *Anti-Trafficking Directive 2011/36/EU, Post-Stockholm discussions, the 2012-2016 EU Strategy towards the Eradiation of Trafficking in Human Beings, Anti-trafficking EU coordinator, etc..(15)*

[13] *EU Directive 2008/115/EC*

and *Schengen Border Regulation* (2016). By such a policy, the EU wished to also merely tackle the issue of the many migrants that, although not eligible for international protection, could not be returned to their countries of origin, because of technical, political or other reasons

D. Harmonized Migration Policies

To facilitate the accomplishment of the aforementioned objectives, in April 2016, the EU adopted a Resolution launching the reform of the CEAS to provide a simpler reference for the full harmonization of the EU-Member States migration policies, which was due within a 3years period.(36)

Changes in CEAS involve:

a. The **reform of *Dublin Regulation III*** aiming to improve the determination of EU-Member State responsible to receive an asylum request and enable quicker family reunification and better allocation of migration responsibility within the EU (36)

b. **Reform of the *Asylum and Qualifications Directives***

c. **Revision of the reception system and the Hot-Spot approach**

e. **Reinforcement of the *EURODAC Regulation*** in line with the *General Data Protection Regulation* (GDPR) with exceptions for serious crime investigation (32)

In parallel, in 2016 *Schengen Border Regulation had also* changed[14].(15)

Indicative of the EU-migration governance spirit had been the two bilateral agreements the EU signed in 2016-2017, respectively with Turkey and Libya, both meant for: advanced sea-border control, reduction of unauthorized migration and deaths at sea, safe-pathways and improved protection in the territory of the two countries. The EU-Libya Agreement that came on effect in middle 2017, focused on EU-support for migrant protection and accommodation in Libya, assistance to voluntary returns, evacuations from Libya to safer countries and strengthening of the relevant capacity of local authorities, involving training and better equipping the Libyan coastguard and promoting cooperation to Algeria, Tunisia and Egypt.(37) The EU-Turkey Agreement that came on effect in March 2016, was supposed to establish a legal pathway with Turkey: “asylum seekers arriving in the EU from Turkey could be returned to it; for every migrant not qualifying for asylum re-admitted to Turkey from Greece, an eligible for international protection Syrian from Turkey would be resettled in an EU-Member State”.(28)

[14] *New EC Regulation 2016/399*

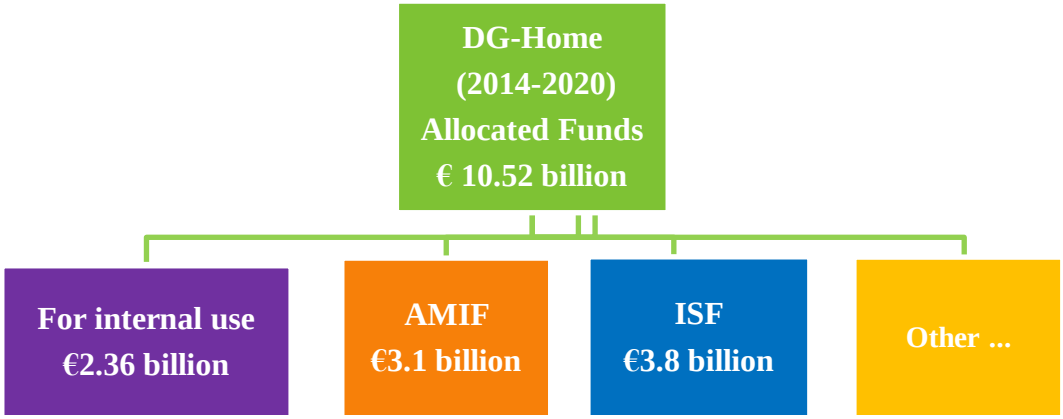
In regards to both Agreements, the EU was accused of taking no consideration of the humanitarian conditions prevailing in Turkey and Libya and of the impact of the Agreements on migrants' lives, rights and dignity.(28,37) Moreover, in the framework of the EU-Turkey Agreement, Turkey was considered a safe-third country; that had been much challenged by legal and humanitarian actors and scholars in Greece, on grounds of the non-refoulement principle, given, among others, that Turkey maintains a geographical limitation to the 1951 Geneva Convention.(50) Furthermore, the agreement was targeting the selection of migrants for the EU. As long as it had been active there had been readmitted from Greece to Turkey mainly migrants from Pakistan, Syria, Afghanistan, Algeria and Bangladesh. In return, 2,614 Syrian refugees from Turkey had been resettled to the EU; when maximum EU-resettlement capacity by EU-Member States pledges did not exceed the 72.000 persons.(28)

2.1.1 EU-Funding for the Common Migration Governance

To serve and further support the development and the implementation of the common migration governance, the EU reformed and simplified its funding mechanisms. A special funding-mechanism dedicated to migration and asylum policy was included under the *EU-Home Affairs Budget* (DG-Home) managed by the *Directorate General for Migration and Home Affairs and* channeled through two instruments[15]:(38)

1. The Asylum Migration and Integration Found (AMIF) for the efficient management of migration, the development and implementation of a common EU asylum and migration policy and the integration of "legally present" migrants(38)
2. The Internal Security Fund (ISF) allocated to enable the implementation of the Internal EU Security Strategy(39)

Table 1:



Schematic illustration 1: DG-Home (2014-22020)

*Source: the EU (38,39)

[15] *Replacing PRIAMOS mechanism (up to 2015) (35)*

Explaining AMIF and ISF

AMIF

Long-term funding

- "channeled through calls of proposals (thematic allocation)
- on grounds of a pre-validated national plan (specific objectives and activities) in line with the common EU asylum and migration policy
- targeting certain areas of activities (i.e. reception capacity, integration, etc.) to cover gaps for the actualization of the pre-set common EU asylum and migration policy objectives
- requires predefined implanting and auditing actors

EU (Union) transnational activity, such as cooperation for returns".

Emergency assistance directly managed by the EU

ISF has two components:

ISF-Borders & Visa

- to increase cooperation for advanced safety, security and control at external EU borders
- for the effective processing of visa policy

ISF-Police

- to combat cross-border crime
- to reinforcing coordination and cooperation among law enforcement and other national authorities of EU-Member States, EU Agencies, IOs, etc. "

*Information on this page has been copied from EC.Europa: EU-Home Affairs(38,39)

Funding and in material assistance for migration emergencies are also available from the *EU-Civil Protection and Humanitarian Aid* mechanism. The responsible *Directorate General for European Civil Protection Emergency Funding* (DG-ECHO) supports fast and targeted response to crises, such as the reception of large numbers of migrants.(40)

EU-migration governance and related funding have been openly criticized about interfering to domestic affairs and attempting to regularize human life. Rather than investing directly on the coverage of the needs of the migrants on grounds of evidence based aid, EU-investments target: migration management and common-border control to prevent unauthorized migration and combat cross-border crime, as well as the selection of migrants; the side effect being restrictions, detention and mandatory returns for those "not-wanted".(2) Moreover, being oriented towards predetermined EU-objectives, EU-funding often fails to meet context specificities. In this regard, exhausting administrative burden, irrelevance of EU-objectives, and unrealistic or hard to achieve goals, such as relocations and sharing of responsibility within the EU, often result in irrelevant to context response, directing action and resources towards no-needed target, and/or in failing to absorb allocated funds. That contributes to false perception of both the actual investment on the humanitarian assistance and of the prevailing dynamics and does not allow to identifying and curing incapacity, affecting the resilience of the country concerned (e.g. Greece). EU-Member States on the other hand, have often been accused of using EU-funding to cover national gaps on different sectors, failing in reality to support and deliver service to migrants. EU-funding finally, is used for the better positioning of individual EU-Member States and stakeholders both within and outside the EU.

Image 1: Greek cartoonist Tasos Anastasiou comments on fortress EU welcoming unauthorized non-European migrants

2.2 The Impact of the EU-Migration Governance

1. Reduced Migrant Influxες

Table 2: Sea Arrivals/Year

Year	Sea arrivals
2015	1.015.078
2016	362.753
2017	172.301

In 2016, the influx of migrants, reduced significantly, in comparison to 2015, to bottom down in 2017.(2) Migration reality however, across the three Mediterranean Corridors differed. Arrivals from the Western Corridor to Spain increased by 96%; that amounted for 14,094 persons in 2016 and 28.349 persons in 2017, being in a high majority men from Morocco and Algeria, who entered Spain by both sea and its land-borders on Africa (at Ceuta and Melilla).(3)

In 2016, the 93% of overall arrivals to the EU were almost equally shared between Italy and Greece. Relative trends however, had been increasing in Italy and decreasing in Greece, because after the closure of the Western Balkan route and the EU-Turkey Agreement migration influx was shifted towards the Central Corridor.

In 2017, inflow to Greece was reduced by almost 90% in comparison to 2015. In Italy trends had been increasing till the EU-Libya Agreement, when arrivals dropped significantly; Italy continued to be the main entrance to the EU.(2,3)

Migrant profiles and demographics along the two sea- routes differed:

Table 3: Arrivals in Italy & Greece (2016-2017)

Total Arrivals in Persons /per Year	Arrivals in Persons to Italy	Arrivals in Persons to Greece
2016 +/- 388.000	+/- 181.500	+/- 177.000
2017 +/-178.000	+/-119.500	+/- 35.000

*Figures have been rounded up

In both 2016-2017, Italy received mostly men from sub-Saharan counties; among them the 15% were children of whom the 91% (>15.000) UASC.(3)

Along the Eastern Mediterranean route migration was mixed and concerned mainly families with small children. The top countries of origin for migrants in Greece had been Syria, Iraq and Afghanistan.(3) Amongst them the +/- 22% were adult women and the +/- 31% children out of whom the 13% UASC.(3)

2. Altered Trends in First-Asylum Requests

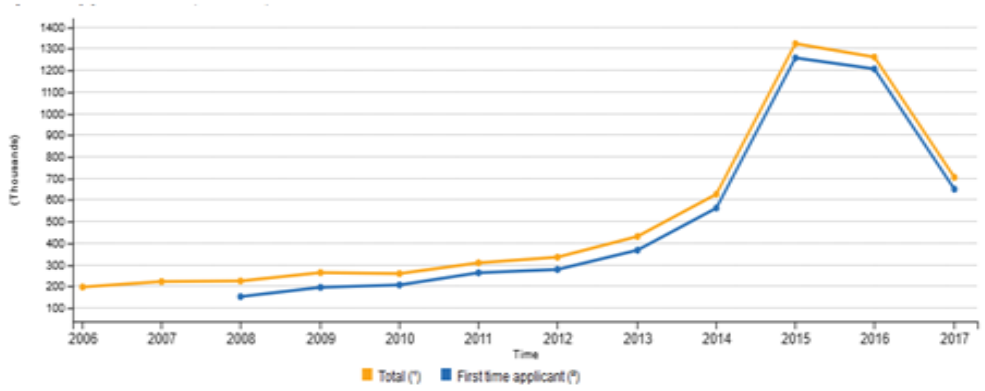
Statistics on first-asylum requests between 2015 and 2016 portray how EU-migration governance affected migrants and pushed and almost "locked" migration pressure to Southern EU. (2,26)

In 2015, the 75% of all first-asylum requests that exceeded the 1.2 million, had been shared among Germany Hungary, Sweden, and Austria, with Germany coming first in rank.

In 2016, despite reduced inflows, the total number of first-asylum requests remained close to 1.2 million.

In 2017, first-asylum claims dropped to 650.000 claims. Relative trends however, in Spain, France, Italy and Greece remained increased.(26)

Chart 2: Asylum Applications (Non-EU) in the EU Member States (2006-2017)



Source: EU-Eurostat
Available at: https://bit.ly/2u9hZMU

Asylum requests in Greece
(2013- end of April 2018)

Chart 3: Asylum requests in Greece Per year
(2013- end of April 2018)

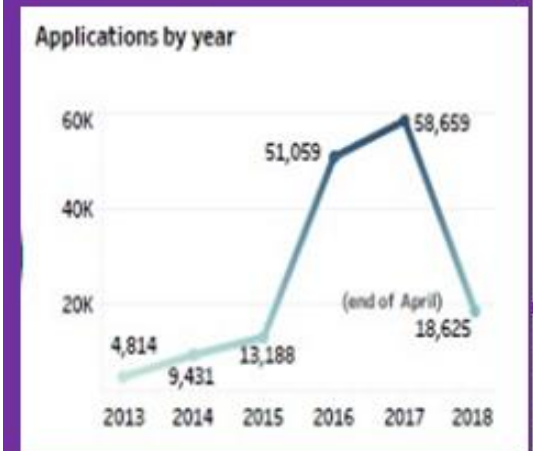
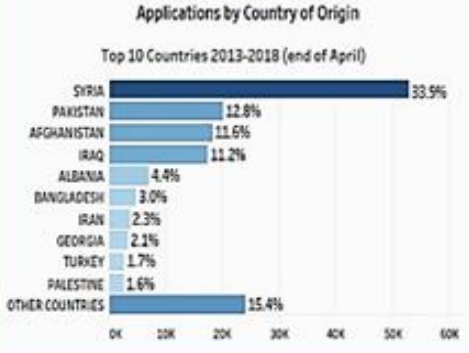


Chart 4: Asylum requests in Greece By country of Origin
(2013- end of April 2018)



Source: Asylum Service, MoMp (Dashboard snapshots)
Availbale at: www.asylo.gov.gr

In Greece, overall first-asylum requests increased by 264%: from 13.188, in 2015, to 51.059, in 2016 and 58.659, in 2017, to fall again to prior to 2015 levels in 2018.(41)

Increased trends were due to the enforcement of stricter migration policies in the EU; applying for asylum became the only option for unauthorized third country nationals to have access to humanitarian aid and to avoid detention and deportation. That might be confirmed by the number of those irregularly present in the EU, which dropped from 2.2 million, in 2015 to 983.860 persons, in 2016.(42)

The higher numbers of non-EU citizens apprehended because of irregular presence in 2016 had been in Germany (370.555 persons) and Greece (204.820 persons).(42) In Greece however, the number of those apprehended because of irregular entrance and presence in the country had dropped in comparison to 2015, because also of the significant decrease in arrivals.(44)

3. Fortress Europe and Unsafe Pathways

Table 4: Fortress EU Statistics

+/- 500.000 orders to leave the EU
+/- 388.280 denyals of entry in the EU
+/- 230.000 forced returns

source: Eurostat

The shared vision for an "open EU" applied only for authorized migrants, who either were already present or were arriving through the newly established "legal pathways". For the rest the enforcement of harmonized migration policies enchained denial to entry, orders to leave, apprehension and removal.(42)

Almost half of entry denials due to lacking authorization concerned Spain, far behind followed France, while Greece amounted for the 4.7% of all refusals.(39) Further to entry refusals, UNHCR reported push-backs from the authorities of Spain, Hungary, Montenegro, Romania, Slovenia, Croatia, Albania, FYROM, Bulgaria and Greece.(3) Considering the protection needs and the vulnerability of third countries nationals, denying entrance without screening and push-backs equal depriving them from access to legal rights and violation of the do no harm principle by exposition to life-threating risks.(3)

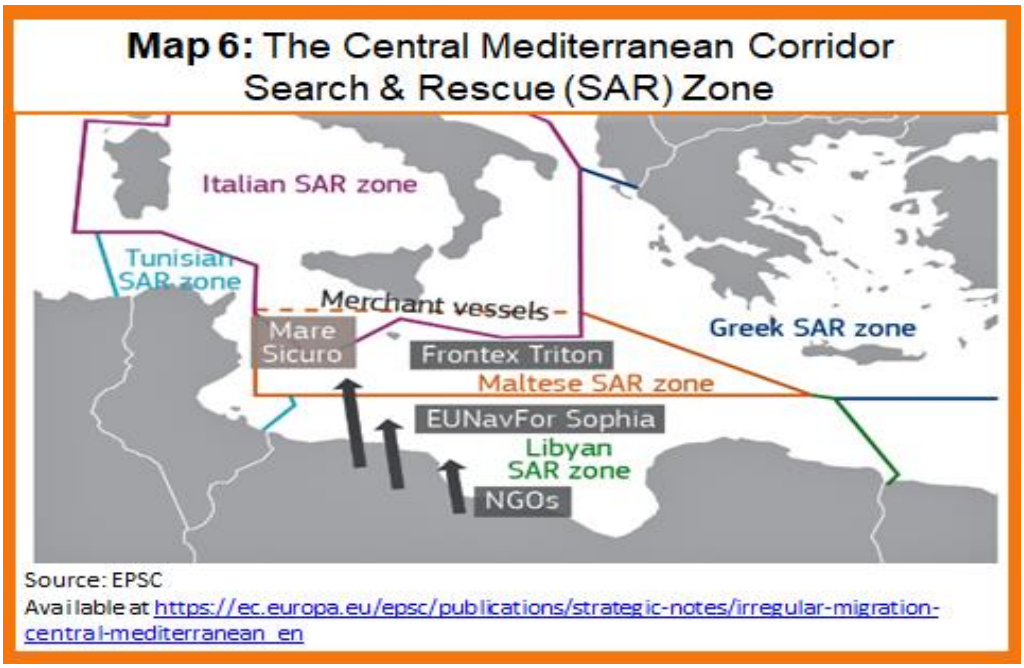
In addition, as FRONTEX reported, the Mediterranean Corridors were patrolled and almost sealed:

"The Turkish Coast Guard rescued and apprehended some 36,649 migrants in 2016

The Italian Coast Guard, Italian Navy and other Italian authorities rescued 29.200 persons

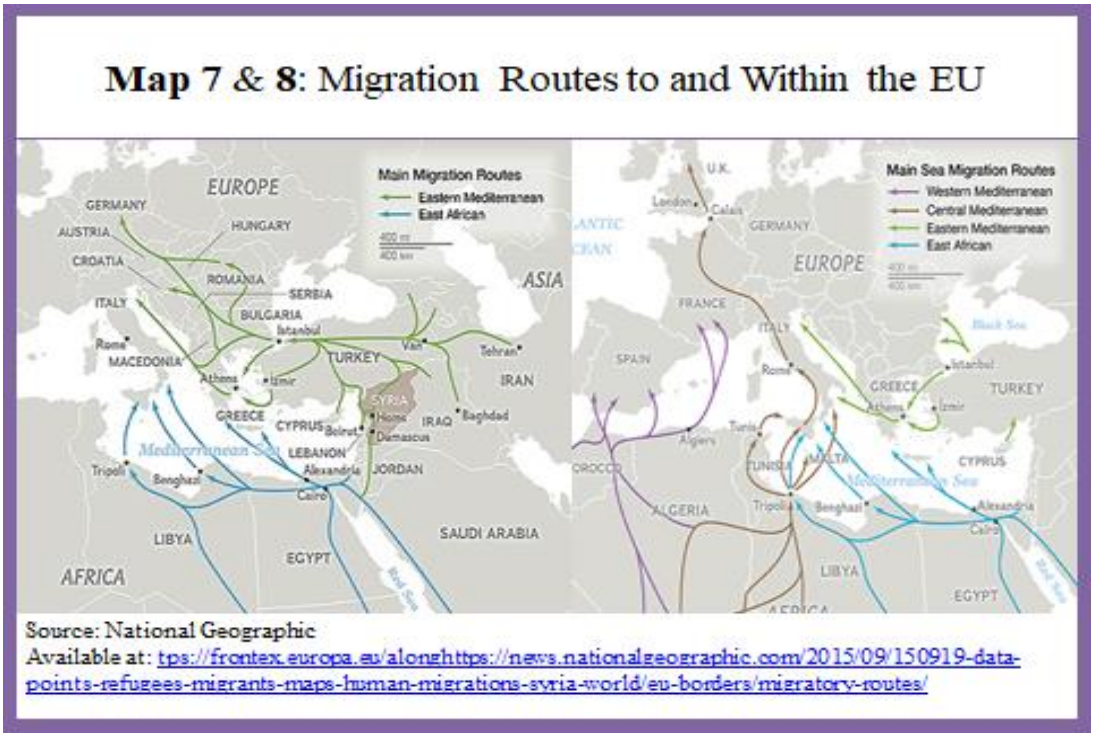
Libyan Coast Guard reported rescuing or intercepting close 15,400 persons (in 2017)"

In both 2016 and2017, several groups of migrants found and/or rescued on the Central corridor, had been transferred to Greece, mainly to Crete Island and Peloponnese, for emergency reception.



To reach desired destinations, migrants turned to alternative and more dangerous routes, usually with the assistance of smugglers, who by migrants' testimonies had increased prices and abuses.(3) Emerging routes included routes from Turkey to:

a) Cyprus, Italy or Spain (the option of establishing a Hot-Spot on Ikaria or another island within the Dodecanese complex is considered) b) The Black Sea and Romania

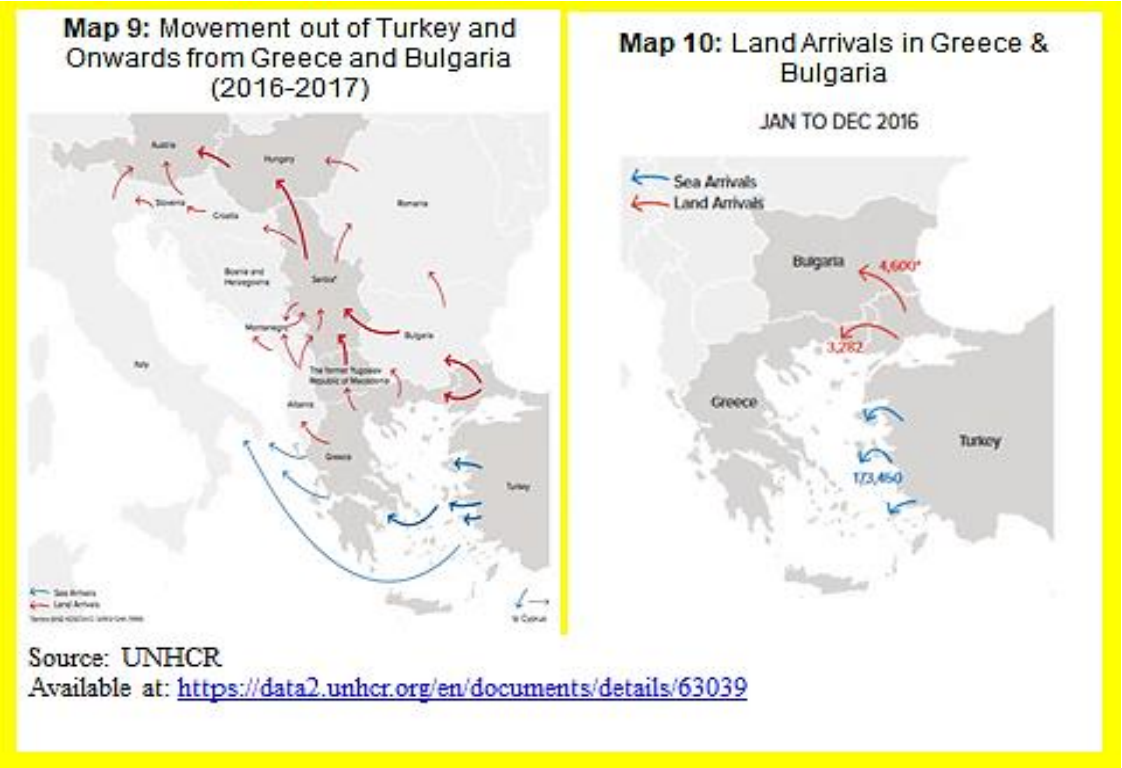


There had been observed in addition, an increase in arrivals by land. In greater percentage increase in by land arrivals (63%) concerned Spain (63%), EU-land-borders to Turkey however, also became busy again[16] (Map 10):

- In 2016, by the landborders to Turkey, 4.600 migrants crossed to Bulgaria and 3.292 to Greece

- In 2017, arrivals to Greece by land almost doubled reaching the 5,677 persons. Turkish authorities had reported for the same year that they had intercepted over 28,400 migrants attempting to cross to Greece.(3)

New routes had equally emerged within the EU: from Spain or Italy to France, crossing Serbia and Croatia or Bosnia Herzegovina, from Serbia to Greece, from Greece to Albania or Italy, etc.(Map9).(3)

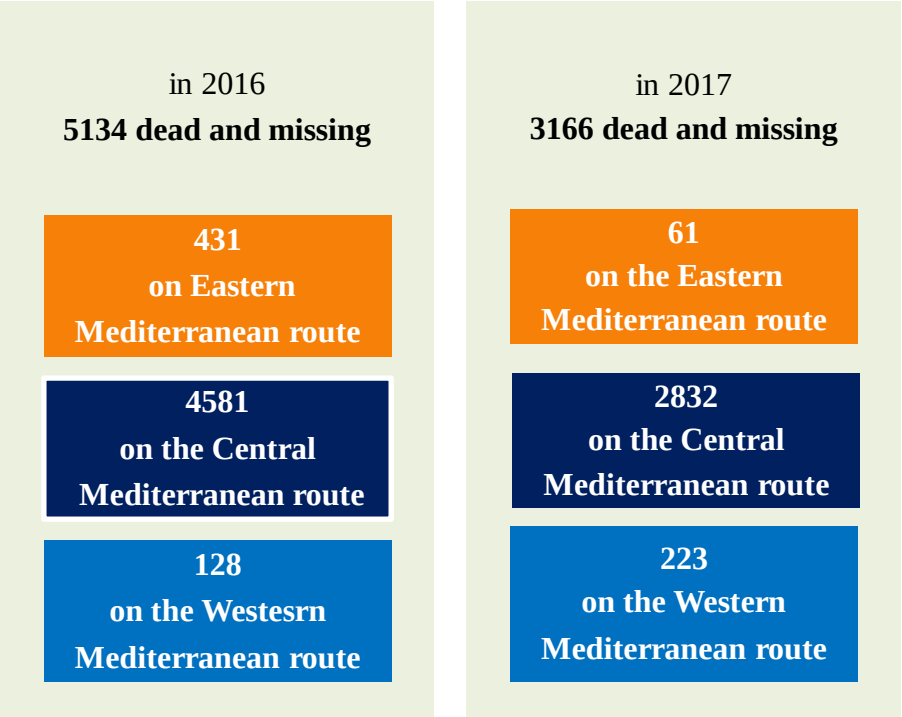


The closure of the Western Balkan route and the EU-Turkey Agreement had shifted migrant flows towards the deadly Central Mediterranean route. In spite increased patrolling, from close to 3700 in 2015, dead and missing in 2016 exceeded the 5.000 (Chart 5).(45)

In 2017, following the EU-Libya Agreement, trends had been reduced but not eliminated, while concerns were raised about human rights violations in Libya.(3)

[16] *After the construction of fences by Greece in 2012 and by Bulgaria in 2014, migrant inflows had been mainstreamed to the Mediterranean Sea.*

Table 5: Dead & Missing per Mediterranean Corridor



*Source: IOM

UNHCR additionally reported, that almost 100 more persons had died and many more had been injured because of travelling in shadow in the EU or while trying to cross land-borders. Most fatal were crossings form Turkey to Greece, from Greece or Bulgaria towards the Western Balkans and the way from Italy onwards through the Alps.(3) On top of the above, migrants had lost their lives because of unsafe accommodation and/or exposure to weather conditions.

4. Insufficient Legal Pathways

Despite the trust placed on EU-solidarity, EU-Member States remained reluctant towards their relevant obligations, while the Visegrad countries (V4) challenged the mandatory role of the relocation scheme and had been referred to the Court of Justice.(46) Both relocation and resettlement rates remained slow and low.

Launched in September 2015, the Relocation program planned for the relocation of 160.000 migrants from Greece and Italy.(3) As of December 2017 however, there had been reallocated to other EU-Member States only:

- 26.700 asylum-seekers from Greece; that is the 33% of the in total 66.000 relocations initialy promised
- 12,300 from Italy; that is the 31% of the in total reloactions agreed for Italy(3)

Resettlement from third countries was equally slow and of limited capacity. It is indicative in this regard that in 2017, only 26.400 migrants had been resettled to EU-Member States, the 84% of whom Syrians.(2,3)

Family reunification, although being a fundamental right under the International Law, was actually violated, because of slow and complicated procedures, mandatory waiting periods imposed by EU-Member States before beneficiaries could place a relative request and under the table "negotiations" between EU-Member States. Family reunification under Dublin III not only failed to meet the needs of UASC but also trapped them in reception countries. Dublin III indication, for example that it might not be at the best interest of the child to be reunited with his/her family, provided to EU-Member States an excuse for putting more barriers to family reunification by questioning the credibility of parents trusting smugglers with their children.

Last but not least, further to EU-Returns that had been much challenged on grounds of human rights violations, voluntary Returns supported by the UNHCR and IOM, although constituting a human right and should not be confused with those forced, were questioned. Following the enforcement of stricter migration policies and challenging agreements with third countries, like Turkey, Returns might appear as the only alternative to detention and deportation. .

As of December 2016 however, the EU-Turkey Agreement -the ownership of which has been anticipated within the EU- had been frozen, because of geopolitics. In the meantime, it had become the intricate factor to the reform of the asylum and migration policy in Greece.

Image 2: Universal Declaration of Human Rights

2.3 Migration Policy in Greece - Developments and Challenges

In late 2015, Greece reformed its reception system by introducing the Hot-Spot approach, as a remedy for the management of the mass migrant inflows arriving to Greek islands. Five Hot-Spots operating under the responsibility of the Greek State, with the support of EU-Agencies and funding, were established within the Reception and Identifications Centers (RIC) on the islands of Lesvos, Samos, Chios Kos and Leros.

Reception and Identification Centers (RICs)

are centers responsible for the reception procedures of the unauthorized third country nationals at first arrival.

Migrants further to identification, can receive within the RICs information about their legal rights and the relevant procedures, as well as health care.

RICs operate under the responsibility of the Reception and the Identification Service (RIS) of the Ministry of Migration Policy

Source: MoMp

Just before the EU-Turkey Agreement came on effect, on the 18 of March 2016, the Greek government evacuated migrants from the Hot-Spot islands, in an effort to distinguish those already present in the country to those arriving after the deadline defined under the agreement.(47) In parallel, several humanitarian actors pulled out from the RICs, denouncing the introduction of pre-removal administrative detention and questioning the procedures imposed by the EU-Turkey Agreement as unfair and violating International Law.

As of April 2016, a reformed asylum and migration policy in line with the CEAS came into force, with main instrument *law 4375/2016* and its subsidiary amendments[17].(48) In the framework of the new asylum and migration policy, protection and vulnerability criteria for Greece complied with EU-standards, with only addition those suffering post-trauma disorder; more specifically, the victims of shipwrecks. That had been the result of the common advocacy and initiative of stakeholders that had experienced chaos and huge protection gaps, while addressing humanitarian needs after fatal shipwrecks in the Aegean Sea back in 2014 and 2015. On EU-level however, there were many concerns about this addition and the relative implications of the protection rights involved to the operation of the RICs on Hot-Spot islands and protection obligations on EU-level.(49)

To enable a "fair and speedy" procedure for those arriving on the East Aegean Islands, the new policy introduced:

[17] *Amended by: Law 4399/2016, Gazette 117/A/22-6-2016, Law 4461/2017, Gazette 38/A/28-3-2017, Law 4485/2017, Gazette 114/A/4-8-2017*

a. A fast track asylum procedure on exceptional basis and only for the RICs on Hot-Spots islands and before the *Regional Asylum Office* of Rhodes
b. Short deadlines
c. The involvement of EASO personnel in the asylum procedure: "EASO can conduct interviews, draft recommendations on admissibility, conduct the vulnerability assessment and assist the Appeals Committees in the examination of asylum request".(35)
d. The amendment of Appeals Committee

The "fast track" procedure targeted quick screening of vulnerability to enable immediate transfer of those vulnerable to safer and more dissent places; it has been accused however, by many stakeholders of focusing on the admissibility of migrants. Equally, the lawfulness of EASO's involvement in asylum interviews and assessing vulnerability had been much questioned, because it could jeopardise fair hearing of the asylum case (insufficient reports, usage of English language, influencing Appeals Committee's decisions, etc.).(32) Moreover, delays and short deadlines did not allow the on time screening and identification of vulnerability that is a prerequisite for access to protection and to treatment[18], depriving migrants of their rights to protection and health.

In addition, a "pre-registration approach" had been introduced to meet the increased numbers of first-asylum requests; only in June and July 2016, 27.592 migrants had been registered, on top of the 33.000 more registered already before June.(46) To enable mass treatment of cases, the Asylum Service increased its personnel, but processing of asylum cases remained 1.5-2 years slow, unless if beneficiaries qualified for relocation, when a few weeks procedure could apply. Equally, family reunification under Dublin III lasted in average 6 months or even more, when mandatory delays were imposed from receiving EU-Member States.(41)

Access to asylum remained a complicated and discriminatory procedure. In 2015, with the assistance of UNHCR, there was introduced the via Skype arrangement of appointments with the Asylum Service, as a remedy to both queuing and long distances. Given the profile and the resources of migrants however, as well as the spatial arrangement of their settlement (see chapt.3), access of migrants to Wi-Fi was restricted and Skype remedy turned out to being overwhelming. Only in urgent/vulnerable cases the respective Asylum office could exceptionally accept and prioritize direct referrals from IOs and civil society.(47)

[18] *EU Vulnerability Directive*

Furthermore, different asylum procedures were possible across the country, involving also a diversity of interlocutors. More specifically, on grounds of exceptional circumstances, such as mass arrivals, overwhelmed Asylum Services, reception of rescued migrants, etc., registration of asylum seekers, receipts of appeals, notification of decisions and other procedural documents, could be done by the Hellenic Police and the Armed Forces.

Provision for free legal advice was available only at second instance; with the excuse that personnel involved in first instance were fully skilled (expertise). Civil society offered free legal assistance at first instance, but relative capacity was limited, especially on the Hot-Spot islands, because of insufficient human resources. Human resources became more restricted with the involvement of EASO in the asylum procedure; EASO reports in English and as a result, advanced English language skills became a prerequisite for optimum legal support.(32,47)

As explained in chpt.2.2, the numbers of migrants apprehended because of irregular presence in Greece were amongst the higher in the EU. Further to the 20days administrative restriction for registration that was usually much prolonged because of limited capacity, there were established 8 pre-removal centers (PRC) within equal police departments across Greece. It is indicative in this regard, that after 3 years of observatory presence in the country, in 2016, ICRC opened a Mission in Greece focusing on the access of refugees and asylum seekers to protection and on dead and missing migrants. In this framework, the ICRC performs regular detention visits to RICs and PRCs assessing living conditions and access to legal rights and family contact. Given the IHL linked mandate of the ICRC, its operation in detention in an EU-Member State at peace, although observatory and not with a relative status, is of particular importance for both Greece and the EU.

Challenging had also been the case of many migrants and even humanitarian actors who had been imprisoned accused of criminal act, such as smuggling[19]. Because of relative restrictions under Greek law and given the specificities of the context: a. need for rescues at sea and/or need to transferred migrants to the mainland for assistance and b. smugglers tending to manipulate migrants to smuggling posts, such an accusation was easy, while defending and dropping the relative case entailed a long juridical adventure.

Although much reduced, in 2016-2017 migrant inflows to Eastern Aegean islands were still ongoing, while Relocations and Returns were slow to frozen. It is indicative that, in 2017 migrant

[19] *Members of the Spanish NGO PROEM-AID and the Danish NGO TEAM HUMANITY that operated at Molivos, on Lesvos island, during 2015, rescuing migrants arriving to the island on rubber boats, had been arrested with the accusations that they facilitated irregular migration and had guns in their possession.*

arrivals had reached: the 11,570 persons on Lesvos, the 6.294 persons on Chios and the 4.840 on Samos. UNHCR reported moreover, that in the late part of 2017, many of the newcomers had recently left escalating conflicts in Syria and Iraq and were extremely vulnerable. Migrants soon exceeded the capacity of the RICs. Accommodation, screening of vulnerability and access to international protection became problematic. UNHCR supported the transfer of migrants to open sites in the mainland, however on one hand the number of those eligible was small and on the other, migrants were reluctant to move there due to isolation and/or security concerns. In late January 2017, migrants were allowed to stay outside the RICs that in some cases extended to nearby private properties, such as the Olive Groove next to Moria RIC on Lesvos.

In May 2017, on grounds of the migration law which underlines that asylum seekers should remain at the availability of the Asylum Office that registers them and given the increased fluidity of migrants who tried to find a way out of Greece, under the order of the *Director of the Asylum Service* asylum seekers on the Hot-Spot islands and Rhodes were obliged to remain in place till their asylum process was completed. Gradually, conditions on the Hot-Spots islands and in the RICs became from overcrowded and deteriorating to harmful and life-threating.

Evaluating the overall reform of the migration and asylum policy in Greece, it is obvious that in line with the CEAS and EU-objectives, it targeted border control, management of migrant inflows and mass treatment of asylum cases focusing on admissibility. It therefore exposed migrants at:

- A well-founded fear of deportation
- Extended administrative detention
- A complicated, discriminatory and context related asylum process
- Ambiguity and frustration
- Geographical restriction and accommodation in overcrowded Hot-Spots on the islands
- Increased health and protection risks

raising concerns about the access of migrant to asylum, protection and dignity in Greece.

Chapter 3: Migration Response in Greece (2016-2017)

"We have chains, though no eye beholds them, and are slaves, though men call as free"
The King and the Remarkable Rock by Oscar Wilde

Back in 2015 and even up to early 2016, migrants entering Greece wanted in a majority to cross the country and move onwards to third European countries. Humanitarian assistance had thus been directed towards emergency response, facilitating mass reception and transit accommodation. Following the closure of the Western Balkan route the picture altered; by estimations, close to 62.000 persons remained strained in Greece.(47) Most of the structures and mechanisms in place, such as the expensive transit camps constructed at busy entry points on the Eastern Aegean islands, became obsolete; e.g. the Windy Ridge camp constructed by the International Refugee Council (IRC) at the North of Lesvos island that had received thousands of migrants back in 2015.(47,51)

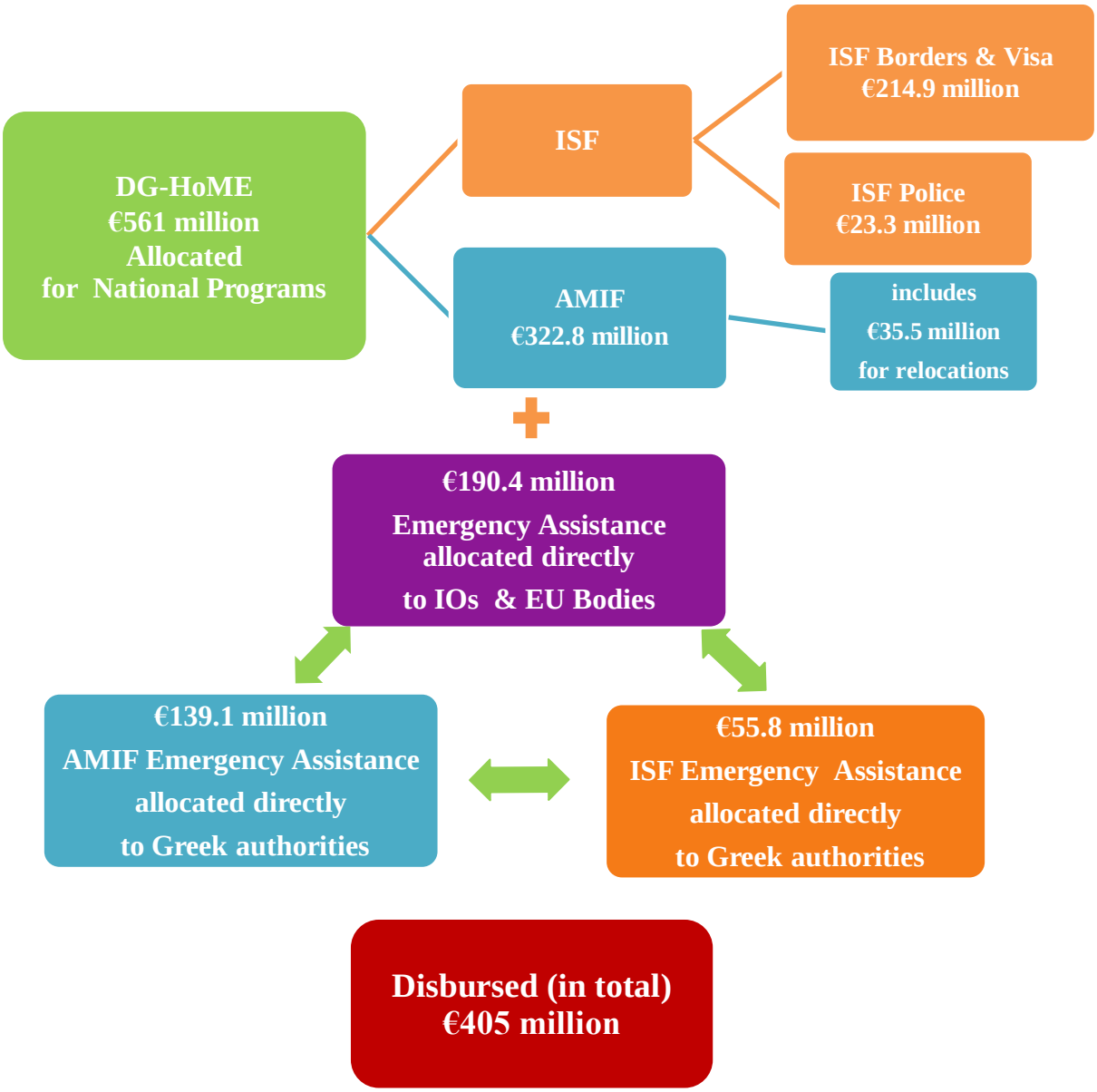
2016-2017 had been a time of transition, migrant distress and demanding humanitarian response. Humanitarian operation had to adapt to the new reality by setting up, almost from scratch, a system able to address the needs of migrants -amongst whom many families and UASC- who had become "static and camp based".(47) In parallel, the national migration and asylum policy had to go under revision in line with the CEAS. Extra pressure had been imposed on Greece to increase common EU-border control and to change its reception and hosting system to meet EU-objectives. Being in strain, Greece had to rely for changes and humanitarian response on EU-funding, international cooperation, IOs and civil society support.

3.1 A Multispeed Approach

3.1.1 Funding and Actors

The main financial source for Greece, in regards to migration, had been the DG-Home and DG-ECHO funding mechanism. For 2014-2020 DG-Home has allocated to Greece: €561 million for long-term national programs and €385million for emergency assistance, while EU-funding is available to all: Greek authorities, EU Bodies and humanitarian partners, such as IOs, NGOs, etc.(58) As of the end of 2017 however, out of the overall amount only €405 million had been disbursed.(58)

Schematic Illustration 2: DG-HOME Allocated Funds for Greece (2014-2020)

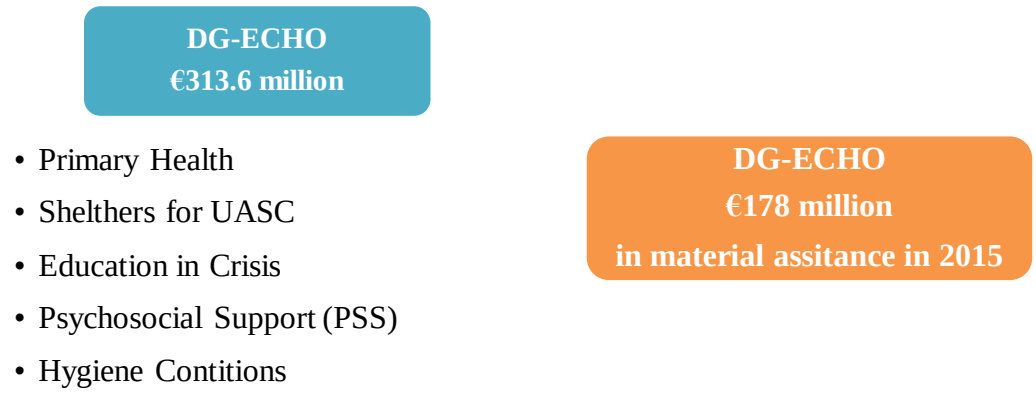


* Source: the EU-EC.Europa(47) – The Schematic illustration has been reproduced from the original

Only a part of the funds allocated through the DG-Home mechanism concerned direct support to migrant beneficiaries. A big portion was designated to security, common-border control and to increase relevant capacities of the relevant Greek bodies and agencies, e.g. the coastguard. Equally, €35.5 million from the total AMIF budget were designed for relocations and resettlements.(47)

In addition, since 2015 and as of July 2017, another €401 million, this time from DG-ECHO mechanism, had been channeled to Greece, mainly through humanitarian partners (UNHCR, RC/RC, etc).(40,47,58) For 2016-2018, DG-ECHO has allocated for Greece €700million, in total.

Schematic Illustration 3: DG-HOME Funding allocated to Greece **(**2015-2017)



*Source: Greek government/Ministry of Migration;(46) The Schematic Illustration has been reproduced from the original

Further to strictly migration designated and emergency funds, EU-funding perspectives also involved different programs under DG-Home mechanism, such as the Horizon 2020, as well as completely different EU-funding mechanisms, such as the Directorate General for Health and Food Safety (DG-SANTE) that in line to SDG3.8 for "Universal and Sustainable Health Coverage" allocates funds for the provision of healthcare to migrants in places where needs are intense. In this regard, a research contacted by the European Green Party revealed that migration funding is possible through 17 different EU-funding programs.

Extra funding on migration, had also become available through different categories of international and national programs; directly by other EU-Member States through their own funding mechanisms (e.g. the British Foreign Office funding mechanism DEFIT) and channeled to Greece through respective embassies or immediate partners (e.g. the British Red Cross). Finally, independent -non-EU and non-State bounded- funding from both public and private sector, including big foundations,

such as Rockefeller and Niarchos, had also been the case. Donors' funding was preferred by certain actors, such as the MSF, because it is more flexible and non EU-objectives bounded, as a result it can be more easily allocated for evidence based response as per mandate.

Absorbing EU-funding had been a difficult and not always successful exercise for Greece, because of:

- The sophisticated procedure and the administrative burn involved
- The irrelevance of the preset EU-objectives to the Greek context and specificities
- The reluctance of interlocutors, especially NGOs, to participate in the EU-procedure that they deemed unfair and contradicting to their mandate
- The long existing deficiencies and malapractices in the Greek administrative system; including the lack of a specific migration strategy and relative planning, etc..

To even estimate the amount of money available and/or invested on migration in Greece is a difficult exercise that, due to fragmentations on different layers, requires access to a variety of actors and sources, in depth research and advanced accounting. Such an auditing far exceeds the scopes of the study in consideration; however, considering that accounting and accountability are essential to domestic affairs and to State credibility and positioning in the international terrene, it needs to be due as soon as possible.

3.1.2 The Development of the Humanitarian Response in 2016-2017

Pre-set EU-objectives together with the urgent transitional nature of the humanitarian operations and the intense humanitarian demands involved, had as a consequence, the humanitarian response to its greater extend to rely on the emergency instruments of both DG-ECHO and DG-HOME, which allowed for faster and more flexible funding.(46) Instead of being directly channeled to migrant needs coverage, a considerable part of the available funding was spent on the development of a relative system and structures and on administrative costs,(46) while a big amount has since the beginning been designated to border-control and to facilitate relocations and returns.

Governmental decisions and coordination were the ones determining the overall organization of the humanitarian operation. Given however, their long and sound experience in delivering humanitarian aid and having already the required competencies, tools and mechanisms to address humanitarian needs in mass reception and accommodation conditions (emergency response units, mobile clinics, assessment and planning tools, training modules, etc.), long-experienced

humanitarian partners, such as IOs and NGOs had been, since the very beginning, the cornerstone of the humanitarian response in Greece; being auxiliary to the State and covering gaps in the relative response, together with solidarity groups and activists. Both observation and the research, contacted in the framework of this study for the period in consideration, revealed that NGOs and IOs were more trusted both among migrant beneficiaries -especially when already familiar with them form other contexts- and within humanitarian actors.(Annex IV) It should not however, be neglected that IOs and NGOs have their own mandates and objectives and therefore, their action affected directly both domestic affairs and the shaping of the response, although not necessarily with a negative result.

EU-funding on the other hand, entailed a mandatory policy reform that called for ownership, or at least leadership within an advanced coordinated scheme, on State level. Only in late 2015 however, the Greek State had started taking solid steps from chaos towards ownership of migration governance and was not comfortable in the new shoes. Greek Ministries joined forces with the Ministry of Domestic Affairs and its General Secretariat for Migration Policy to facilitate relevant strategic planning; an inter-ministerial coordination body was established to coordinate sharing of information, responsibility and action of (State and non-State bounded) stakeholders. The positioning of the State-actors in the humanitarian operation gradually improved and so did transparency and reporting on relative accomplishments; plans for the future however, if any, remained in shadow.

In November 2016, a Ministry of Migration Policy (MoMp) was established. In the meantime, a national registry of humanitarian actors and NGOs had opened to better frame the humanitarian operations environment. In 2016-2017, thanks to funding and partnerships, humanitarian response became paramount, encompassing with an official role, further to long established IOs and NGOs, a long series of actors: activists, solidarity groups, private individuals, alternative accommodation schemes, such as PIKPA on Lesvos and Leros, etc., many of which had jumped into the migration scene only recently, because of the humanitarian emergency. In Greece migration had turned out to an important business and in its melting pot solidarity, public and private sector, humanism and "humanaucracy" blended together shaping humanitarian response into extended programs and sub-projects. In addition, rather extended and mixed partnership schemes developed under the auspice of UNHCR and in close consultation and collaboration to the Greek government, as humanitarian actors and State were moving towards mutual implementation.

The main axes of the humanitarian response involved:

- First reception and screening in regards to vulnerability and admissibility for relocation
- Transitional accommodation for the ones qualified for relocation
- Integration for those authorized and
- Health provision for all

Migrants' life and relative humanitarian work were organized and shared among:

- RICs on Hot-Spot islands (see Chpt. 2.3)
- Open hosting facilities or else, open sites (sites) for asylum seekers
- Urban Settings

Living in sites

In February 2016, in light of the closure of the Western Balkan route, the Greek government with EU-funding and the dynamic contribution of the Ministry of Defense, which cost €14.2 million, opened within a few weeks 42 open sites for asylum seekers (Maps 11 & 12).(51) Sites were dispersed all over the country, with the rational to fairly balance migration burden among different regions. Moreover, in absence of a coherent site-module, they had been equally established in former-military and navy bases, old factories, private properties, etc..(47) RICs for the most vulnerable had been included in 3 of them: Diavata in Thessaloniki, Schisto and Elaionas in Attika. It was decided for sites to be co-managed by those State-actors present in place (that was depending on whose property the site was established: ex-military base-army, ex-navy base-navy, etc.), who would hold an administrative role, and humanitarian-actors, who would have an operational role, till the government was ready to take over; which had finally been postponed for 2018. Infrastructure and life within the different sites varied a lot, depending on their location and accessibility, the number of beneficiaries and their fluidity, the availability of local staff and of course the stakeholders involved.

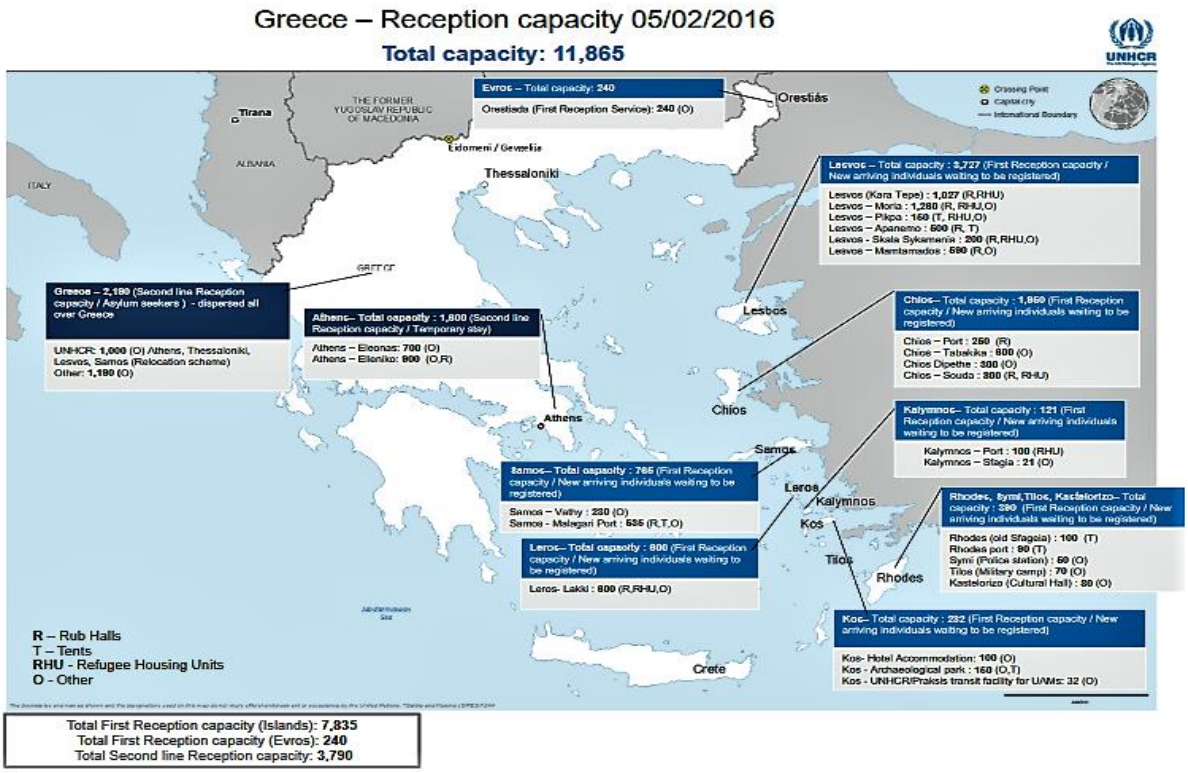
In the beginning, humanitarian needs in sites were intense requiring huge interventions, such as access to safe water and mass sanitation (WASH), in site or mobile healthcare settings, extended relief distribution, including both food and non-food items and so on. In spite the many draw backs (logistics, administration, coordination, isolation, mixed accommodation, security, safety, etc.) life in sites gradually regularized. Although in different capacity and quality, life in most sites enchained the whole package of humanitarian assistance: PHC and PSS, protection activities, such as children and women friendly spaces, catering, relief, etc..(47) The number of beneficiaries remained within their hosting capacity and following a hectic 2016, in site contingency plans enabled better coordination of the actors involved improving the potentials for health and protection

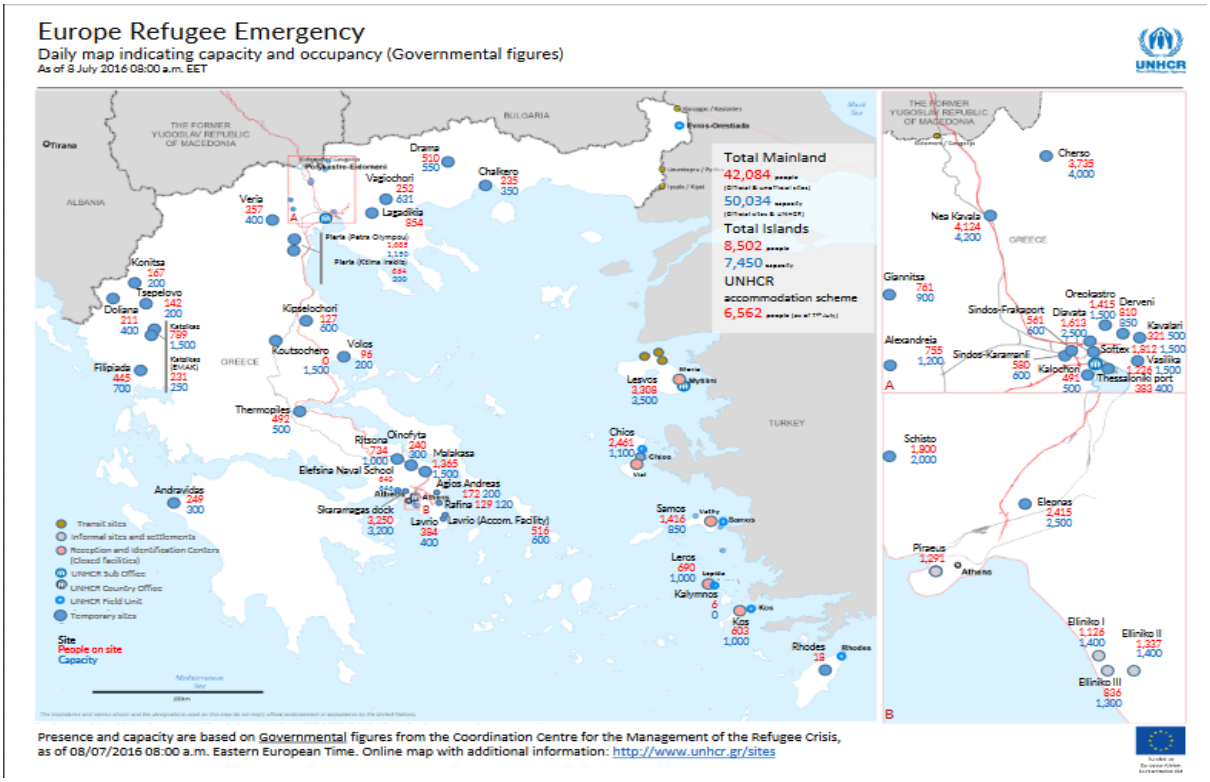
by the end of 2017. An essential factor in this regard, had been the introduction of activities enabling the self-resilience of migrants, such as community engagement and community outreach, community kitchen and above all in cash assistance that with the Cash Transfer Program (CTP) enabled the access of migrants to the Greek market.(53)

Photo 4: Open Site – ex-Factory Softex in Thessaloniki, 2017
@Fragiska Megaloudi

Reception and Accommodation Capacity in Greece

in February 2016 (Map 11) versus in July 2016 (Map 12)





*Source: UNHCR Greece; Available from: www.unchr.gr/sites

Urban approach

Urban approach had been introduced by the UNHCR in November 2015, in cooperation to the Greek government, municipalities, local authorities and NGOs to cover accommodation, health and protection needs of refugees, family reunification and relocation candidates and asylum seekers - with priority to those most vulnerable- within the urban environment. The cornerstone of the urban approach has been the Emergency Support to Integration and Accommodation program (ESTIA) involving accommodation and access to services and education and implemented by an extended list of UNHCR partners among who: METACTION, NOSTOS, ARSIS, ILIACTIDA, FAROS, SOLIDARITY, PRAKSIS, MDM, GCR, Municipalities and many other.(54) Indispensable part of ESTIA, UNHCR and partners accommodation initiative started as "Accommodation for Relocation" program funded by DG-HOME in 2016 and continued, after July 2017, as "Accommodation and Services Scheme for Asylum Seekers" funded by DG-ECHO[20]. With a 290 million cost for rental accommodation, since its beginning and till the end of 2017, ESTIA had hosted close to 40.000 persons: 89.9% in apartments and 10.1% in buildings; the 58% in Attica, the 6% on East Aegean islands and the rest in different locations in Greece. (54)

In November 2017, in total urban accommodation capacity was close to 20.000 places (apartments, buildings, hosting families, hotels, UASC shelters) (see also Map 13).

Cash Transfer (Integration) Program - CTP

Concerns a predefined monthly cash transfer to asylum seekers, through a special cash card

The cash amount is defined according to Social Security standards for Social Solidarity income for families and is allocated per household; the number of beneficiaries

CTP is realized by UNHCR and partners (State actors, organizations)

Source: UNHCR
Available at: http://reliefweb.int/reporting/Greece/unhcr-creece-cash-assistance-december-2017

ESTIA – What is provided

- ✓ Fully furnished and equipped apartment/accommodation place
- ✓ Utility bills and rent covered by UNHCR through partners
- ✓ Complemented with cash transfer assistance
- ✓ Supported by social scientists, interpreter and accommodation supervisors
- ✓ Basic medical care and legal assistance through referrals to the national system

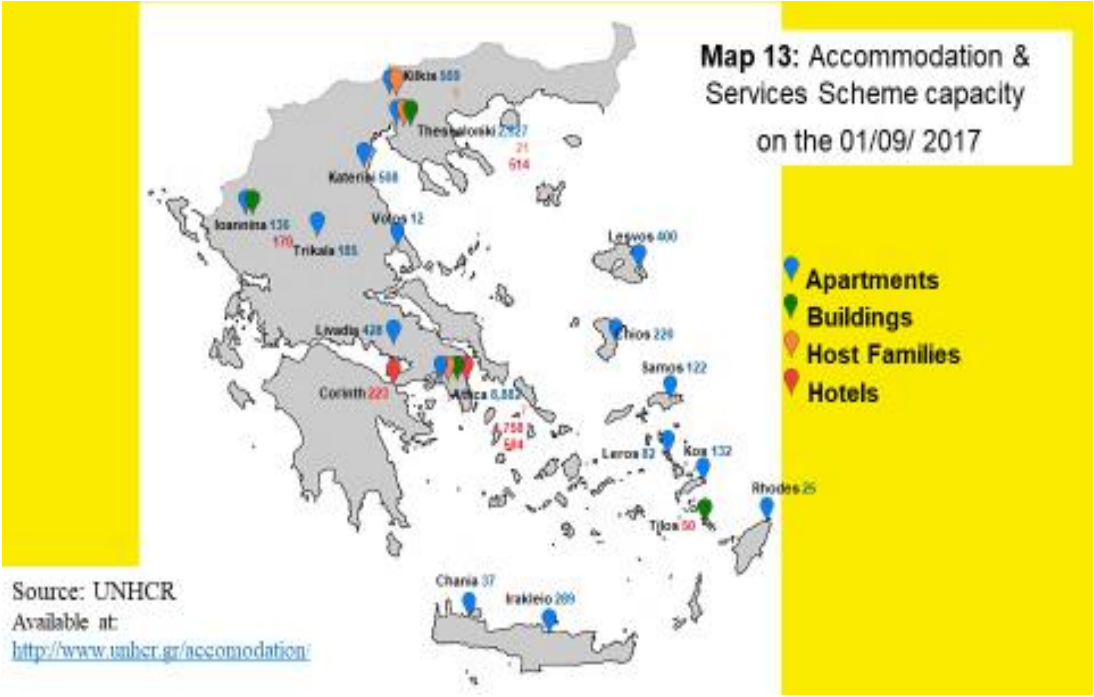
Beneficiaries may stay in the accommodation up to 6 months after they are granted refugee or protection subsidiary status

Source: UNHCR
Available at: http://www.unhcr.gr/accomodation

Further to access to accommodation and basics, urban approach targeted resilience, dignity and integration for asylum seekers by enabling access to public health care, protection, education and inclusion to the Greek society. In this regard, and because relative needs exceeded the capacity of the already existing mechanisms and structures, different actors, both EU-fund bounded and non-

[20] *Data portal (Log in required)* *http://www.unhcr.gr/accomodation/database/login.php*

EU-fund bounded, operated in urban areas clinics and day or multifunctional centers providing PHC, PSS, counseling, language lessons and support classes for children, interpretation and cultural mediation, escorting to public hospitals, employment information, projects enabling building bridges with the hosting society and other programs.



In parallel, self-organized settlers in occupied abandoned buildings supported by solidarity groups, such as the City Plaza in Athens, remained an option; while, insufficient capacity in urban settlers, delays in registration and unwillingness to apply for asylum leaded a lot of migrants and between them UASC, to live on the streets and be only merely supported by drop in visits in day clinics and multifunctional centers and street work.

Hosting UASC

By Greek law, when identified UASC should be registered and placed in hosting facilities by the National Center for Social Solidarity (NCSS/in Greek E.K.K.A.) by order of the local prosecutor.

For the period 1/1/2016 - 15/9/2017, the NCSS has reported a total of 8.704 referrals of UMC; origin in majority from Pakistan, Afghanistan, Syria, Bangladesh and Iraq. In that period, overall hosting capacity was 52 specialized hosting facilities supported by UNHCR, UNISEF, IOM and partners and funded by DG-Home, AMIF providing in total 1,191 places. In addition, a foster families program of limited however capacity was run by METACTION NGO. NCSS reported in

this regard to have >1.500 UASC on a waiting list[21]. As a result, many children ended up being hosted with adults or even living on the street and being exposed to risks such as smuggling and fear of disappearance and trafficking.

To cover the hosting capacity gap, Greek governance and IOM introduced the "Safe Zone" approach funded by DG-ECHO emergency accommodation funds and operated by IOM and partners.(55) Safe zones are designated supervised spaces within accommodation sites and Hot-Spots aiming to meet the basic needs of UASC providing emergency protection (safety, educational and creative activities, legal support in cooperation with IOM, cultural mediation/interpretation, etc.) and health care (vaccination, food, hygiene medical check-up, escorting to the hospitals). In the given period, there had been operating 7 Safe Zones offering in total 204 additional accommodation places.

Education

MoMp in cooperation to the Ministry of Education promoted the gradual inclusion of all migrant children in the national educational system by 2017-2018; there was however, some resistance from the Greek society, especially in places where mass accommodation of asylum seekers was the case. Education initiatives included the introduction of reception classes within the Greek schools for the children accommodated in apartments and school and preschool classes in sites or in the nearby schools.(46) Relative action was covered by the AMIF and by DG-ECHO funding for emergency education channeled through the MoH and IOM.

Health Provision – under the competency of the Ministry of Health (MoH)

A first priority for the MoH had been vaccination that however was delayed, because of overcrowded conditions, limited capacity and spatial arrangement that required a long cold chain. In greater part, vaccination was facilitated by specialized humanitarian actors, who followed the relative decision of the National Vaccination Committee (NVAC) under the instructions and the coordination of the Hellenic Center for Diseases Control and Prevention (HCDC/in Greek ΚΕΕΛΠΝΟ), that also hold also the responsibility for epidemiological surveillance and epidemics.(56) Vaccination had been a prerequisite for migrant children to register to school. The first circle of children vaccinations started in November 2016, with vaccines donated by UNISEF and with the support of organizations and NGOs.(46)

[21] *Relevant information was provided directly by NCSS during an in person meeting*

Under the coordination of the National Health Operations Center (NHOC/in Greek Ε.Κ.Ε.Π.Υ.), HCDC introduced the specialized *Emergency Health Response for Refugees program*-PHILOS focused on vulnerability screening and health care provision in mass accommodation -Hot-Spots and sites.

In the framework of PHILOS, a protocol had been developed for the identification, the classification and the mitigation of vulnerability in RICs, addressing "…issues related to sexual and reproductive health, trafficking, gender based violence, as well as to the recognition, clinical management and treatment of victims of torture and of vulnerable group's members".(56) Moreover, PHILOS worked for the development of 10 (one per national health district) multidisciplinary mobile health teams (doctor, midwife, nurse, psychologist, social worker and cultural mediator) to assist those migrants living in sites in the mainland. PHC focused on the identification and prioritization of health needs and referrals to public health structures. The major areas of intervention had been vulnerable groups and SRHC, with increased numbers of pregnancies and SGBV. Moreover, training of health professionals on migrant related health issues, such as CDs, age assessment, identification of VoT and intra-cultural treatment had been the case.(51)

A major concern had been the gradual transition from emergency medicines to the inclusion of asylum seekers in the National Health System. Asylum seekers became eligible to receive a Social Security Member Registration Number (SSMRN/in Greek AMKA), while in parallel a set of actions had been decided for the reinforcement of the National Health System, the decongestion of the peripheral healthcare structures, especially in areas with Hot-Spots and sites and the advancement of the National Center for Emergency Care (NCEC/in Greek EKAB) with additional staff.(43) In this regard, €27million DG-ECHO funds had been allocated alone for the reinforcement of the healthcare system on North Eastern Aegean Islands.(51) Moreover, the MoH and HCDC promoted the cooperation and the collaboration with different stakeholders, such as public hospitals, IOs and NGOs that covered healthcare and hygiene promotion in mass accommodation and operated mobile or open clinics in urban settings covering relative gaps.

Photo 5: Open Site – WASH

@Fragiska Megaloudi

3.2 Results and Discussion

In 2016-2017 migration response had been characterized by reform and transition, EU-objectives driven funding and orientation, lack of coherence, deficiencies, isolation and restrictions. Throughout the period, it made great difference if someone was an asylum seeker, had arrived before or after March 2016, had entered through the Eastern Aegean islands or the land-borders to Turkey, was in Attica or in the mainland, was living in an open site or in an apartment, had access to a humanitarian organization or needed to be treated in an overwhelmed hospital of an island and so on. Further to being discriminatory and overwhelming, such a confusing reality enchained serious health and protection concerns for both the migrants and the hosting society.

3.2.1 Protection and Health Deficiencies and Concerns

Sphere Project suggests four protection principles to be the cornerstone of all humanitarian response:(26)

Avoid exposing people to further harm as a result of your actions
Ensure people's access to impartial assistance in proportion to need and without discrimination
Protect people from physical and psychological harm arising from violence and coercion
Assist people to claim their rights, access available remedies and recover from the effects of abuse

Humanitarian response in Greece during 2016-2017 hardly met the aforementioned standards.

State-authority over human affairs had increased and migration policies dehumanized, taking little if any consideration of the will and the actual needs of migrants, undervaluing their life and dignity and leaving them exposed to advanced border controls, apprehension and deportation, isolation and life-threatening risks.

People had been strained in Greece. The first months after the closure of the Western Balkan route had been rather intense, as migrants did not believe they were trapped. Almost 11.000 persons remained gathered at the northern border of Greece with FYROM, at Idomeni site that before had

been a busy transit point to Northern EU, hoping that they would be able to cross the border and move onwards.(46) The site had finally been evacuated, after a police intervention in May 2016; all migrants in place were relocated to the newly establish sites in the mainland.(44)

In parallel, in light of the EU-Turkey Agreement, in order to distinguish those already present to those arriving in Greece after the deadline set on the agreement, the Greek government transferred migrants from the Hot-Spots islands to Piraeus aiming to relocate them to sites in the mainland.(53) Being afraid that they would be further trapped, over 2.500 persons refused to move and remained to the port for almost two months living under inadequate and health threatening conditions, while tried, usually in vain, to find a way out of Greece exposing themselves to further risk. At the end, as high season was approaching and the port was of private interest, migrants were persuaded to be transferred to sites.

The reception and asylum system was proven inadequate, complex and discriminatory. The significant increase in asylum requests, that had been the only option to access protection and assistance, and also to avoid detention and mandatory returns, overwhelmed the reception and asylum system with severe consequences. In spite efforts for a "speedy and fair" procedure, reception and asylum policy had been slow, discriminatory and context related, focusing on mass registration and admissibility, while entailed prolonged administrative detention. Moreover, incoherence and mistakes in registration, such as in the spelling of names, put an extra burn to the whole spectrum of the humanitarian assistance (referrals, smooth processing of cases, etc.).

Further to being trapped to ambiguity with little and often inconsistent information, migrant access to legal aid was restricted and they received scarce if any feedback on their case; while certain migrant categories, such as Africans and Iranians, but also LGBTI, felt further discriminated.(3) Lack of coherence, discriminatory practices and overall constrains in asylum procedure, as well as the increased protection and health risks involved in reception and accommodation raised concerns about the access of migrants to human and legal rights.

Legal pathways had been restricted; migrants turned to smuggling and tried new irregular routes exposing themselves to high protection and health risks. For those eligible for relocation, procedures were slow to frozen. Equally, family reunifications under Dublin Regulation III lasted in average 6 months if not further prolonged, because of relative agreements among EU-Member States and/or mandatory waiting periods imposed. With their future being uncertain and their life being on hold, migrants started to explore irregular routes, exposing themselves to further risk.

Families had been separated and family contact was limited. It is indicative of the violation of the fundamental right to family unity that following the Western Balkan route closure, families that had split to facilitate irregular travelling remained trapped across borders, facing great difficulties in relocating their members and re-establishing and maintaining contact. Moreover, procedures to be followed for families to be reunited were unclear because of Dublin III implications involved.

Many had been separated to their families or disappeared because of:

- Smugglers splitting families along migratory route or running to escape push backs and attacks
- Shipwrecks and fatal crossings of Evros River
- Secondary separation in Greece due to reception and asylum procedures and administrative detention (e.g. separated children placed in different accommodation schemes than the persons accompanying them, because of lacking sufficient documentation to prove of their relationship; family members entering on different Hot-Spot islands needing to go complete the registration procedure before being able to be reunited, etc.)

Furthermore, family contact was lost or restricted because of: cost involved; detention; restricted access to Wi-Fi and poor connectivity in RICs, sites and in urban accommodation places, which also troubled access to asylum and information; loss of contact details or contact means (e.g. destroyed or lost mobile phones)

Inadequate screening and addressing of vulnerability. Screening protocols had to be developed from scratch. Screening of vulnerability had been on grounds of categorization into vulnerable groups failing to see the individual needs of the migrants.(35) Furthermore, UNHCR reported that vulnerability had been under-screened, because of both overcrowded conditions and limited capacity, especially in human resources.(3) Screening and access to identification and official certification of a vulnerability, especially for torture, or age assessment, although a prerequisite for legal protection had been complicated to restricted, because of limited expertise capacity and deficiencies in the Greece system, such as centralization of services entailing transportation (for the migrants or the expertise), escorting and cultural mediation needs. Even when identified, in place capacity failed to adequately address vulnerability.

UASC had no access to adequate protection. The guardianship system in Greece proved insufficient to support adequate protection. Under Greek law, guardianship of all UASC remains with the local prosecutor (district attorney), however each UASC is placed under the protective causticity of their care-takers -if one- being in a majority social workers working with humanitarian organizations operating hosting facilities.

Age assessment and registration were delayed and strict deadlines along hand with insufficient accommodation limited UASC access to adequate protection and family reunification.(3) Accommodation is safe zones had been criticized for entailing protective restriction, while on the other hand, many UASC being unable to enter the system had to stay with adults or live on the streets and be merely supported by organization during drop-in visits (in the best case scenario).

In hosting facilities, tension among children, especially Pakistanis and Syrians, and life-style related problems, such as drug usage had been observed.(3) Children accommodate in open centers run-away, especially when disappointed by delayed procedures making an easy prey for criminal networks. In the framework of an UNHCR participatory survey[22], UASC complained about strict rules and for feeling lonely and neglected, not supported by their respective community and with little contact to their families.

Although there had been much improvement in regards to screening **Victims of Torture** and addressing relative needs in comparison to the previous period, still **VoT were under-screened and had limited access to long-term treatment and rehabilitation.** Access to rehabilitation was possible only in the frameworks of a few specialized programs that although providing quality services had limited capacity, such as:

-METACTION NGO with a multidiscipline scientific team (social worker, doctor, psychologs, legal councelors) that examines, identifies and certifies torture according to Istanbul Protocol standards(57)
-Promitheas program, a partnership of GRC MSF and BABEL NGOs[23].(17)

Victims of trafficking and SGBV were underreported and had limited access to protection, legal assistance and recovery support on State level, even under the "reflection period"[24]. Some assistance was provided by specialized organizations such as A21[25] , Diotima, PRAXIS, etc., however information for services especially to survivors of SGBV and options for boys and young

[22] *UNHCR and partners made a participatory survey about migration response in Greece in late 2017 (in house presentation)*
[23] *Operating since September 2011 and up to early 2018 Promitheas had assisted 430 victims of torture from 44 countries.*
[24] *Council Directive 2004/81/EC there is the provision for a "reflection period" for third-country nationals who are victims of trafficking or who have been the subject of an action to facilitate illegal immigration, giving them a temporary residence permit enabling them to recover, have access to medical care and "establish an independent existence", with prerequisite to cooperate with relevant authorities[40]*
[25] *A21 was introduced in 2013 and offers accommodation, sensitization campaigns and legal advice to migrant victims of trafficking*

adults were restricted[26]. Humanitarian organizations reported for 2016-2017 that SGBV had been increased, as a result of ambiguity and frustration, involving and in family violence, it had however, been highly under-reported.(3)

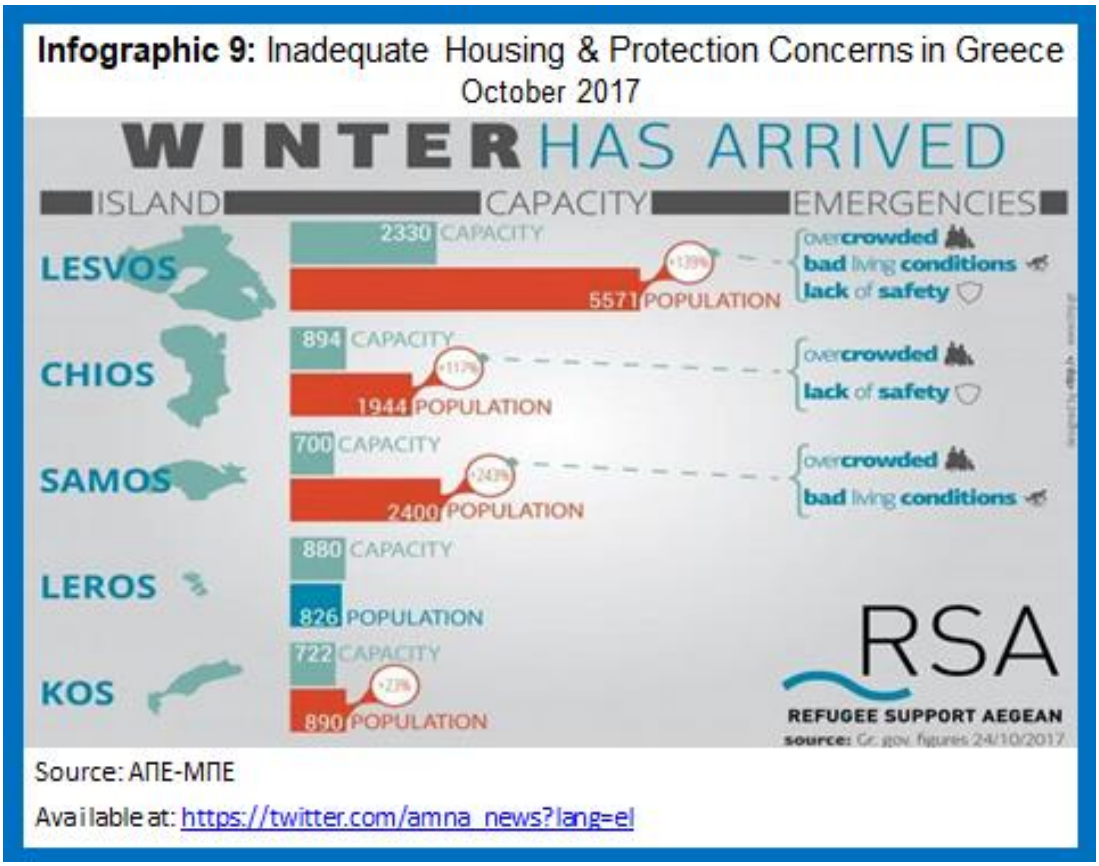
In parallel, economic constrains and inability to integrate advanced the **risk for survival sex** for all migrant categories and sexes.(3)

Support to victims of shipwrecks and to the families of the dead/missing had been inadequate, especially in the long-run. Investigation on dead and missing had been restricted. Holding a relative humanitarian mandate, ICRC mission in Greece, worked both by advocacy and trainings to further advance relevant capacity (EUROPOL also supports Greek authorities in this regard). Structural insufficiencies however, are inherent to the Greek system: centralized data is available only for DNA; investigation information is kept locally with little security; fingerprints are stored centrally in Athens and in Thessaloniki and the two data bases are not connected; pictures taken in crime and incident scenes and during autopsies are stored in the Forensic Science Division of the Hellenic police Ministry of Civil Protection were access for migrants is complicated, etc..

Further to the psychological implications, the families of dead/missing are in need of practical support (escorting, referrals, liaising to responsible stakeholders, transportation, economic support and cultural mediation) throughout the complicated investigation and identification procedure. A number of organizations and solidarity groups offer assistance to survivors; however, options for long-run support are limited. The same organizations more or less support and the families of the dead/missing that in many occasions are survivors themselves, but gaps in this regard, are sharp

Accommodation had been incoherent, discriminatory, mixed, isolated and unsafe. RICs, for the greater part of the period 2016-2017, had been overcrowded. In November 2016, RICs on Lesvos and Samos operated at 200% of capacity. Migrants were improperly accommodated in overcrowded conditions, even in extra tents and with little access to WASH. Moreover, riots and situations of violence became rather common, in late 2017, and much of the investment on humanitarian assistance had been destroyed, while people had been severely injured. The situation had been overwhelming to all: migrants, actors and hosting societies, while local societies on Hot-Spot islands became frustrated and at occasions, like on Lesvos Island, radicalized against the migrants.

[26] *UNHCR participatory Survey*



Great delay in the winterization of RICs and sites exposed migrants to cold and health and security risks both in 2016 and 2017. A budget exhausting operation had been organized at the end, to transfer migrants from sites to appropriate accommodation with heat. Situation in RICs was more challenging. In November 2016, a grandmother and her grandson burned to death while trying to warm themselves in an inappropriate accommodation setting in Moria camp, on Lesvos island[27].

There had been serious safety and security concerns. Inter-migrant (mainly between Yazidi-Arabs, Arabs-Afghans, Farsi-Dari speaking) conflicting situations, because of cultural and religious differences, fueled by discriminatory policies, had been the case; especially during the first months after the EU-Turkey Agreement.

While in some sites life regularized as time went by, in others, such as Softex in Thessaloniki, trafficking, abuses and a black-market put everyone at risk. Humanitarian actors reported that alcohol, thefts, abuses, sexual harassments and SGBV were common (even within families) but underreported, while women and children felt unsafe being at public spaces and to approach WASH facilities that were located away from the ISO Boxes or tends.(47,52)

[27] *http://www.kathimerini.gr/885150/article/epikairothta/ellada/to-xroniko-kai-o-apologismos-ths-tragwdias-sth-moria---mia-66xronh-gynaika-kai-o-e3axronos-eggonos-ths-nekroi*

Gender, age and disability sensitive assistance had been inadequate. Access to services such as electricity and Wi-Fi had been insufficient and less accessible by women, as men dominated outdoor spaces. Depending on their origin –e.g. Afghan- women had been much depended on men, because of culture, literacy and language issues and that restricted their access to aid. Men were also the ones managing cash assistance for the family.

Younger women and teenage girls felt isolated. Children were exposed to health threats and violence and had limited access to education. Further to being discriminated at school, their parents did not valid enrolling school as important, with the rational that they would move[28].

Mobility for older persons and persons with disabilities had been restricted, mainly because of the way facilities and transfers were organized; consequently, their access to information, support and healthcare was limited.

LGBTI felt discriminated by both stakeholders and by their communities.(3) Single men felt also alone and discriminated. Young adults faced serious employment and integration drawbacks and being neglected by organizations and State they faced survival issues.

Migration policies failed to meet the cultural and religious needs of the migrants. As they had little opportunities to exercise their cultural and religious duties, especially in urban environment, migrants organized themselves in informal networks alienating even further to the Greek society.

Migrants felt untrusted and claimed stakeholders were disrespectful. Community engagement, although much welcomed as a dignity and integration mechanism, had been proven challenging, because of the mixed accommodation conditions. Favoritism and leadership among migrants and migrant communities/ethnicities had been promoted and certain communities, such as Africans, felt further discriminated. That was obvious during NFIs distribution, when quantities were not sufficient.(47)

The major problem however, had been **shortage in cultural mediation**; especially as the greater need for migrants had been access to information and understanding the system. Capacity in rare languages such as Dari, Urdu, Pashtu, sohrani, etc was limited to zero. Communication problems restricted access to assistance, especially to services such as legal aid, PSS and healthcare, required fluent communication and good understanding.

Healthcare had been inadequate. As in high percentage migrants were families with children and young adults, trends in health care for children and SRHC, especially in pregnancy (adolescence

[28] *UNHCR participatory survey on migration response*

pregnancy included) and delivery were increased. Shortage of female health professionals and interpreters restricted access of women to SRHC.(47,52)

Health problems (CDs, scabies, burns, etc), occurred and because of inadequate housing, while migrants had also been subject to health risks related to conflict situations (e.g. injuries) abuses and SGBV.(47,52)

Needs for mental health and PSS were also advanced, due to ambiguity and frustration. Humanitarian actors reported increased cases of depression and suicide attempts among the migrants on Hot-Spot islands.(MSF) .

There had been observed insufficient capacity for NCDs treatment, especially those affected by migration (e.g. cardiovascular diseases and diabetes) and shortage of dentists, ophthalmologists and gynecologists (especially women).(IFRC)

Access to medicines was equally restricted. Only in seldom cases migrants received their prescript medicine from the hospitals, while it had not always been possible for them to cover medicine and health expenses by their cash allowance. UNHCR and NGOs tried to cover the gap, but access to uninterrupted treatment, had been generally restricted.

Diary options were also limited. Food depended a lot on catering; often it was not properly prepared and served or with respect to cultural differences. Especially health related nutrition needs could difficulty be covered.

Duplications and gaps or limited capacity had been equally the case for health services at all levels.

The National Health System had been overwhelmed with referrals.

Healthcare and transport to hospitals had been more difficult in late evenings and in the weekends.

Last but not least, incidents of CDs such as measles, meningitis and TB alarmed local societies fueling xenophobia and reluctance toward the migrant community.

Protection and health concerns were more or less the same for all migrants in Greece, in spite their place of accommodation, as even in urban accommodation migrants had been feeling neglected. The mistreatment of migrants their undervalue and their consequent ambiguity and despair trapped both migrants and their hosting Greek society in a loop of human right violations, increased humanitarian demands, health risks, riots and xenophobia threatening societal coherence and human life and had a direct impact on local and country resilience.

3.2.2 Commenting on the Drawbacks of the Response

Evaluating the overall humanitarian response in regards to protection and health needs of migrants in Greece in 2016-2017, one may easily conclude that there had been serious drawbacks and failures in regards to coherence, quality and capacity (quantity) of services, but also in the access of migrants to legal rights and human dignity. The kicker is that:

- The actual number of migrants present and in need of assistance remained relatively small
- Relative funding and in material assistance had been allocated by the EU and other resources
- There were present operating IOs and NGOs with long and sound experience in humanitarian assistance

To better identify the roots of that irresistible logic, where everyone performs the task but the job is not done, the overall response to protection and health needs of the migrants is checked below against qualitative standardized parameters of efficient humanitarian response, as they appear –with different names- in most of relative manuals.(26)

Designing and Developing the Response

Analysis and Planning

Migration related humanitarian response had been much subject to and driven by the common EU migration governance and its objectives. In this regard, EU-funding had contributed in the shaping of the response into projects targeting pre-determined EU-objectives that were implemented by extended partnership schemes, within which different actors, tried to fit in their mandates, scopes, experiences and trade-names. In parallel, there were developed and implemented projects by non-EU bounded actors, who however, had to also adapt to the way the humanitarian operation was already shaped. In most cases, their contribution was narrowed to targeting gaps in humanitarian response as per mandate and within the framework of their broader regional or international strategy (e.g. MSF Greece, MSF Belgium, etc.).

In this regard, analysis and planning had been equally common EU-objective and funding driven and fragmented per area of interest or per objective: integration, urban accommodation, etc.. On the other hand, IOs and NGOs promoted already tried remedies that however, have often been proven irrelevant to the Greek context. Resulting malpractices, along hand with the arrogance of long-established international stakeholders had been among the determining factors for irrelevant, and at certain cases risky and harmful response.

By their turn, government-bounded actors not only failed to provide a strategy and long-term sustainable plans, but also troubled the effectiveness and the efficiency of the response with confusing and/or scarce information and by changing organograms, priorities, spatial arrangement, plans and deadlines. Limited or confused information from the side of the government about long-term plans, the duration of the sites (some were supposed to close since the beginning and some others were expected to open) and the future of the different services within them, challenged the sustainability and the quality of the response, with delayed contracts, frequent changes in deadlines prolonged periods of activity, unorganized handovers and many revisions of activities.(45,49)

Ownership and meaningful participation

Given the above, ownership and meaningful participation, at least to greater part of the response, reached only up to a certain level (usually the operational); while responsibility and leadership had been anticipated at higher levels (e.g. UNHCR-Governmental Stakeholder-Central Governance-EU).

The intriguing factor in this regard, had been the participation of the same partners in multiple partner-schemes and projects, sometimes even with different hats. In addition, despite the many working groups and coordination teams developed duplications and overlapping were often the case. That was due to specific funding orientation, individual mandates and specialization of the actors involved, and trade-mark conflicts, as wells as due to lack of strategic planning and fragmentations.

Ensuring a People Centered Response

Assessment and Evidence Based Response

No assessment of the overall protection and health needs of migrants had been performed; in the sense of an in depth assessment identifying the actual needs of the persons present, existing capacity and the prerequisites for adequately addressing their needs in the framework of coherent, holistic and coordinated response. Concrete information about the beneficiaries, their profiles, individual needs and preferences when available was fragmented (area of interest, source or location, etc) and hard to compile. Moreover, it appeared mostly in the later part of the period in consideration, when a more community sensitive approach had been introduced, especially in sites, trying to increase migrant self-resilience by involving them in decision making.

As a consequence, evidence based services were seldom. On the contrary, in most of cases, especially, when it came to gender, age and vulnerability sensitive response, humanitarian operation followed a by group approach, on grounds of: a. the international experience about the protection

and health needs of people on the move and in mass reception and accommodation conditions; b. the relative know-how, the capacity and the ad hoc and usually fragmented by area of interest individual assessments of the actors involved; c. available resources; d. estimations based on the numbers and demographics of migrants registered and already in the system.

In sites specifically, registration of migrants had been scarce and much depending on camp/site management, unless for health registration. As sites were open and presence of the migrants fluid, it was hard to estimate each time the number of beneficiaries in place, their culture and religious preferences or gender and age based needs putting an extra assessment burden to each operation, relief activities included.(47) Moreover, it was almost impossible to monitor hosting capacity and conditions (free space, non-site beneficiaries, rented spaces, forced hospitality and so on).

Quality Services and on Time Full Coverage of Needs

Full coverage of needs had been by no means the case, as needs had never been fully identified for the specific context. On the contrary, research in Part B revealed that there had been many duplications and overlapping in areas such as PSS and PHC, while on the other hand there were big gaps in addressing disabilities, treatment for CDIs, medication, etc. Such needs were either addressed as appeared, or in most of cases where referred to public sector overwhelming social-welfare and public health structures that especially in rural areas and on the islands were anyways of limited capacity.

The overall system failed to provide long-term sustainable solutions and support. On the other hand, quality of available services had generally been good to high, taking into consideration the specificities (gender, age, vulnerability) and the preferences of the population involved. In this regard, the research also revealed that IOs and NGOs were more trusted than State-actors. However, their limited capacity and troubled planning, also resulted to shortages and delays.

Accessibility: Beneficiaries Access to Services and Access of Actors to Beneficiaries; Safety and Security

Complicated and discriminatory context related procedures, congestion in RICs, spread spatial arrangement of sites and location in isolated areas, limited human resources and cultural differences constrained the access of migrants to services and assistance. In most of cases transportation, escorting and cultural mediation were mandatory. Access to information, legal rights, protection

and heath had been constrained, while limited capacity let the migrants exposed to gender, age and disability discrimination.

Quality of Performance

H**uman Resources – Availability, training and performance**

Although trainings were not missing, resources in skilled staff able to deliver service had been restricted. Shortage in human resources had been the case, especially in certain contexts, such as on the Hot-Spot islands and in places located far away from big towns, since the very beginning. It has been observed in this regard, that although programs and stakeholders where altering over time, people delivering service remained more or less the same, just changing employers and hats.

Furthermore, compassion fatigue was obvious across all layers of the response. One of the side effects of the response had been overwhelmed and burnout humanitarian workers who, given the limited human resources available, had been sharing their lives between meetings, travelling and delivering service.

Administration and Logistics

The lack of coherence in hosting schemes, dispersed spatial arrangement (Hot-Spots, sites, urban approach) and the need to make humanitarian response accessible in different contexts enchained extra burden in terms of administration and logistics. Mobility of services and/or huge in site installation and operation (WASH, PHC clinics, children friendly spaces, etc.), vaccination and relief activities required infrastructures and advanced logistics involving long supply chains and increased storage capacity.(47,52) Delays and shortages had been often, given that lack of a sustainable plan was a constant drawback.

Administration had been equally heavy and expensive, requiring extensive coordination, frequent travelling and accommodation costs. Extended deployment of international staff was translated also in huge salaries. Exhausting coordination, diversity of projects and limited cooperation and coordination on practical issues, multiplied relative burden for each site by the number of actors in place. Moreover, taking into account that most humanitarian actors were present to more than one site and participated to more than one project and each project had many partners burden was further multiplied and both actors and relative budgets were exhausted.

Monitoring and Evaluating

Due to spatial arrangement and discrepancy of activities there had been gaps between monitoring and/or evaluating at local and central level. Moreover there had been little feedback on lessons learned and corrective action. The coordination efforts among stakeholders resulted -further to overall coordination mechanisms- in the creation of too many specialized coordination working

groups (e.g. for SGBV, UASC, etc.). On the other hand, efforts for contingency planning on local level worked out well in 2017.

Accountability and Transparency

Reporting in regards to targeted project objectives had been exhausting, however concentrated on targeted indicators of accomplishment as it was a budget-bound obligation. Both accountability and reporting had been fragmented by actor, project and sector and provided little input for improvement. Auditing of the overall response and relative responses invested is one of the main recommendations of the study in consideration.

Conclusion

In 2016-2017, Greece missed a clear strategy and pre-defined minimum quality standards for humanitarian intervention, that would allow the identification of the needs of migrant and enable meaningful participation for all stakeholders -State and non-State- in the framework of an accessible, effective, evidence based quality response to address those needs on time, in the best possible way and with compassion, empathy and full respect to individual life and dignity.

Limitations (for Part A)

The first conclusion of the study is the need for further research, as lack of reliable and updated resources had been a major limitation. Bibliography for the period under examination is restricted. The main sources of information are data published by actors, such as governmental and public sector, IOs and NGOs, specific portfolio reports, and a highly politicized think tank -including social media- revealing the obvious tragedy of migrants. Even in this case, information for 2017 had been limited within the period defined initially and inevitably time filter has been extended to early 2018, when most organizations and State stakeholders issued their reports for the previous year.

Information on context specific funding and human resources is both limited and fragmented by donor or actor, while the reliability of comments in various sources is questionable as they are often copy pasted. It is too difficult thus, to figure out the actual amount and the efficiency of the investment involved making the need for transparency and accountability the second important outcome of the study.

A key limitation is the authors themselves, both being long employed in the humanitarian sector in different posts and organizations and having been professionally active in migration response in Greece, since the very beginning, they have good knowledge of the environment, good analytical skills and easy access to different sources of information; it came however, along hand with solid -although not always identical- perspectives on migration that might be analyzed as bias of attribution and also constitute a subjective bias to observation. As a consequence, many information and analysis in the study is anecdotal coming from empirical experience and also, the parameter of failure is already included in the initial hypothesis of the research about the response to health and protection needs for migrants, being obviously the result of the challenges observed during field visits. In this regard, authors have chosen to be two, to filter and verify each other's input.

As a result, although separated in two distinct parts, the study as a whole is the result of mutual cooperation.

Disclaimer: Measuring irregular migration is hard to impossible, because undocumented migrants tend to stay on the shadow. Any fluctuations or inconsistences in the numbers of people and trends are due to the variety of sources used; being unable to verify relevant data, authors chose to relay more on sources holding an institutional role or being officially involved with migration.

Conclusions

The main characteristics of migration-related response in Greece period 2016-2017 had been:

- The humanitarian consequences of the common EU migration governance
- The reform of the national migration and asylum policy and the consequent transformation of the migration environment and the relative humanitarian response.
- The better positioning of the state holders in regards to migration response in comparison to 2015 and the advancement of the cooperation among state and humanitarian actors.
- The shaping of the humanitarian response into main areas of concern according to EU-objectives and national wide programs and the development of extended partnership schemes among IOs their humanitarian partners and public sector to facilitate their implementation.
- The ineffectiveness of the overall humanitarian response and the rise of awareness in regards to access to legal and human rights and dignity.

Rather than answering the needs of people, response in Greece actually reflected EU perspective in migration, while administrative burden had probably been the second most important factor for response ineffectiveness.

A research targeted on the overall effectiveness of the response to protection and health needs of migrants conducted both among actors and beneficiaries revealed what had already been well observed: the response had been lower than the needs of migrants and not effective in regards to needs of people. The effectiveness level of the response was not linear to the needs of the refugees and migrants, while deployment of humanitarian aid in the areas of health and protection had been overlapping. Moreover, response was not framed according to the need as emerged; it had been formulated and evolved in national (Greece) and regional level (islands, mainland). Furthermore, it was mainly based on NGOs, that were better trusted by participants of the research. In a majority response was linked to the limitation of relevant planning and on time deployment, as well as to the non-adaptability of the programs deployed lack of coordination – problematic communication and duplications of efforts.

While Greece needs to work on a migration strategy stemming from the needs of migrants and in consolidation to all actors involved, the EU has to re-activate its humanitarian reflexes and adapt EU migration governance, because as States pledged in 2030 Agenda, nobody should be left behind.

References

.

1 UNHCR Global Trends - Forced displacement in 2016 [Internet]. UNHCR Global Trends - Forced displacement in 2016. [cited 2019 Jan 19]. Available from: https://www.unhcr.org/globaltrends2016/

2. IOM. World Migration Report 2018 [Internet]. International Organization for Migration. 2017 [cited 2019 Jan 14]. Available from: https://www.iom.int/wmr/world-migration-report-2018

3. UNHCR. Desperate Journeys - January 2017 to March 2018 [Internet]. 2018 [cited 2019 Jan 14] p. 1–11. Report No.: 63039. Available from: https://data2.unhcr.org/en/documents/details/63039

4. Czaika M, Haas H de. The Globalization of Migration: Has the World Become More Migratory? Int Migr Rev. 2014 Jun 1;48(2):283–323.

5. MigrationReport2017_Highlights.pdf [Internet]. [cited 2019 Jan 19]. Available from: http://www.un.org/en/development/desa/population/migration/publications/migrationreport/docs/MigrationReport2017_Highlights.pdf

6. UNHCR Global Trends - Forced Displacement in 2017 [Internet]. UNHCR Global Trends - Forced displacement in 2017. [cited 2019 Jan 14]. Available from: https://www.unhcr.org/globaltrends2017/

7. Eastern Mediterranean Route [Internet]. [cited 2019 Jan 20]. Available from: https://frontex.europa.eu/along-eu-borders/migratory-routes/eastern-mediterranean-route/

8. IOM. Missing Migrants Project [Internet]. Missing Migrants Project. 2018 [cited 2019 Jan 14]. Available from: https://missingmigrants.iom.int/

9. Kellenberger J, Rupp G, Aaronson M, Bellamy C, Lubbers R, Hirsch D. Inter-agency Guiding Principles on Unaccompanied and Separated Children :72.

10. G20-OECD-migration.pdf [Internet]. [cited 2019 Jan 19]. Available from: https://www.oecd.org/g20/topics/employment-and-social-policy/G20-OECD-migration.pdf

11. How Europeans perceive migration from outside the EU [Internet].EC 2017. Available from: file:///C:/Users/07CE~1/AppData/Local/Temp/ebs_469_infographics_en.pdf

12. JAEGER S. Results of special Eurobarometer on integration of immigrants in the European Union [Internet]. Migration and Home Affairs - EC. 2018 [cited 2019 Jan 14]. Available from: https://ec.europa.eu/home-affairs/news/results-special-eurobarometer-integration-immigrants-european-union_en

13. Universal Declaration of Human Rights [Internet]. 2015 [cited 2019 Jan 22]. Available from: http://www.un.org/en/universal-declaration-human-rights/index.html

14.Migration-policy-en.pdf [Internet]. [cited 2019 Jan 19]. Available from: https://www.ifrc.org/Global/Governance/Policies/migration-policy-en.pdf

15. Regulations, Directives and other acts - EUROPA [Internet]. EC. 2016 [cited 2019 Jan 14]. Available from: https://europa.eu/european-union/eu-law/legal-acts_en

16. Refugees UNHC for. The 1951 Refugee Convention [Internet]. UNHCR. [cited 2019 Jan 14]. Available from: https://www.unhcr.org/1951-refugee-convention.html

17. Τι κάνουμε : Prometheus [Internet]. [cited 2019 Jan 14]. Available from: https://www.projectprometheus.gr/el/about/what-we-do/

18.UNVFVT_ExpertWorkshop2017.pdf [Internet]. [cited 2019 Jan 19]. Available from: https://www.ohchr.org/Documents/Issues/Torture/UNVFVT/UNVFVT_ExpertWorkshop2017.pdf

19 Libya slave trade - CNN [Internet]. [cited 2019 Jan 19]. Available from: https://edition.cnn.com/specials/africa/libya-slave-auctions

20. United Nations Treaty Collection [Internet]. [cited 2019 Jan 19]. Available from: https://treaties.un.org/pages/ViewDetails.aspx?src=IND&mtdsg_no=XVIII-12-b&chapter=18&clang=_en

21. WHO | Refugee and migrant health [Internet]. WHO. [cited 2019 Jan 14]. Available from: http://www.who.int/migrants/en/

22. The World's Congested Human Migration Routes in 5 Maps [Internet]. National Geographic News. 2015 [cited 2019 Jan 19]. Available from: https://news.nationalgeographic.com/2015/09/150919-data-points-refugees-migrants-maps-human-migrations-syria-world/

23. MISP Calculators [Internet]. Welcome to the Inter-agency Working Group (IAWG). [cited 2019 Jan 19]. Available from: http://iawg.net/resource/misp-rh-kit-calculators/

24. Sexual_reproductive_health_protractedcrises_and_recovery.pdf [Internet]. [cited 2019 Jan 19]. Available from: http://www.searo.who.int/entity/emergencies/documents/sexual_reproductive_health_protractedcrises_and_recovery.pdf?ua=1

25. E-PHR | Re-health [Internet]. [cited 2019 Jan 19]. Available from: http://re-health.eea.iom.int/e-phr

26. The Sphere Project. Humanitarian Charter and Minimum Standards in Humanitarian Response [Internet]. 3rd ed. 2011. 1–402 p. Available from: file:///C:/Users/07CE~1/AppData/Local/Temp/Sphere_Handbook_2011_English.pdf

27. Hall S., Held D., Mc Crew T. Η Νεοτερικότητα Σήμερα: Οικονομία, Κοινωνία, Πολιτισμός. 2nd ed. Αθήνα: Σαβάλας; 2003. 570 p.

28. EU-Turkey Stament, Two years on, April 2018 [Internet]. 2018. Report No.: 20180314. Available from: https://ec.europa.eu/home-affairs/sites/homeaffairs/files/what-we-do/policies/european-agenda-migration/20180314_eu-turkey-two-years-on_en.pdf

29. Statewatch. eu-com-hotsposts.pdf [Internet]. [cited 2019 Jan 19]. Available from: http://www.statewatch.org/news/2015/jul/eu-com-hotsposts.pdf

30. The Rise of Border Imperialism [Internet]. Transnational Institute. 2018 [cited 2019 Jan 19]. Available from: https://www.tni.org/en/article/the-rise-of-border-imperialism

31. The Western Balkan Route: A New Form of Forced Migration Governance in Europe? [Internet]. Green European Journal. [cited 2019 Jan 14]. Available from: https://www.greeneuropeanjournal.eu/the-western-balkan-route-a-new-form-of-forced-migration-governance-in-europe/

32. E. European Agenda on Migration – Factsheets [Internet]. Migration and Home Affairs - European Commission. 2016 [cited 2019 Jan 18]. Available from: https://ec.europa.eu/home-affairs/what-we-do/policies/european-agenda-migration/background-information_en

33. European Comission - Eurostat. Asylum in the EU Member States [Internet]. European Comission; 2018 p. 1–6. Report No.: 47. Available from: https://ec.europa.eu/eurostat/documents/2995521/8754388/3-20032018-AP-EN.pdf/50c2b5a5-3e6a-4732-82d0-1caf244549e3

34. EC. Trafficking in human beings [Internet]. Migration and Home Affairs - European Commission. 2016 [cited 2019 Jan 14]. Available from: https://ec.europa.eu/home-affairs/what-we-do/policies/organized-crime-and-human-trafficking/trafficking-in-human-beings_en

35. Tsourdi E. Bottom-up Salvation? From Practical Cooperation Towards Joint Implementation Through the European Asylum Support Office. Eur Pap Vol 1. 2016;2016:No 3; http://www.europeanpapers.eu; pages 997–1031; ISSN 2499.

36. EC. factsheet_the_common_european_asylum_system_en.pdf [Internet]. [cited 2019 Jan 19]. Available from: https://ec.europa.eu/home-affairs/sites/homeaffairs/files/what-we-do/policies/european-agenda-migration/background-information/docs/20160713/factsheet_the_common_european_asylum_system_en.pdf

37. The EU-Libya Migrant Deal: A Deal of Convenience [Internet]. E-International Relations. [cited 2019 Jan 14]. Available from: https://www.e-ir.info/2017/04/11/the-eu-libya-migrant-deal-a-deal-of-convenience/

38. EC. Asylum, Migration and Integration Fund (AMIF) [Internet]. Migration and Home Affairs - European Commission. 2016 [cited 2019 Jan 18]. Available from: https://ec.europa.eu/home-affairs/financing/fundings/migration-asylum-borders/asylum-migration-integration-fund_en

39. Security, Borders, Police [Internet]. Migration and Home Affairs - European Commission. 2016 [cited 2019 Jan 18]. Available from: https://ec.europa.eu/home-affairs/financing/fundings/security-and-safeguarding-liberties_en

40.Overview of funding programmes [Internet]. European Commission - European Commission. [cited 2019 Jan 19]. Available from: https://ec.europa.eu/info/funding-tenders/funding-opportunities/funding-programmes/overview-funding-programmes_en

41. Country Report - Greece | Asylum Information Database [Internet]. [cited 2019 Jan 14]. Available from: http://www.asylumineurope.org/reports/country/greece/

42. Statistics on enforcement of immigration legislation - Statistics Explained [Internet]. Eurostat. 2018 [cited 2019 Jan 14]. Available from: https://ec.europa.eu/eurostat/statistics-explained/index.php/Statistics_on_enforcement_of_immigration_legislation

43. Στατιστικά στοιχεία παράνομης μετανάστευσης 2017 - Υπ. Εσωτερικών και Διοικητικής Ανασυγκρότησης - Ελληνική Αστυνομία [Internet]. [cited 2019 Jan 14]. Available from: http://www.astynomia.gr/index.php?option=ozo_content&lang=%27..%27&perform=view&id=70776&Itemid=1240&lang=

44. Asylum Service. Two years since the Common Statment between European Union and Turkey, March 2016-March 2018. Ministry of Migration Policy; 2018 p. 4

45. Transforming our world: the 2030 Agenda for Sustainable Development:. Sustainable Development Knowledge Platform [Internet]. [cited 2019 Jan 18]. Available from: https://sustainabledevelopment.un.org/post2015/transformingourworld

46. gr_fact_sheet_refugee_print_19_01_2017-2.pdf [Internet]. [cited 2019 Jan 15]. Available from: https://government.gov.gr/wp-content/uploads/2017/04/gr_fact_sheet_refugee_print_19_01_2017-2.pdf

47. Greece: Population Movement - Emergency Appeal (MDRGR001) Operations update n° 6 - Greece [Internet]. ReliefWeb. [cited 2019 Jan 17]. Available from: https://reliefweb.int/report/greece/greece-population-movement-emergency-appeal-mdrgr001-operations-update-n-6

48. Overview of the legal framework - Greece | Asylum Information Database [Internet]. [cited 2019 Jan 17]. Available from: https://www.asylumineurope.org/reports/country/greece/overview-legal-framework

49. ΠΟΥΛΑΡΑΚΗΣ Α από Σ. Η έννοια της ευαλωτότητας στις ευρωπαϊκές διαδικασίες ασύλου [Internet]. Immigration.gr. 2017 [cited 2019 Jan 14]. Available from: http://www.immigration.gr/2017/10/blog-post_3.html

50. Aitima N. Asylum Seekers on Hold: Aspects of the Asylum Procedure in Greece. SSRN Electron J [Internet]. 2017 [cited 2019 Jan 18]; Available from: http://www.ssrn.com/abstract=2957727

51. Fotiadis A. HD. The Refugee Archipelago: The Inside Story of What Went Wrong in Greece [Internet]. NewsDeeply. 2017 [cited 2019 Jan 14]. Available from: https://www.newsdeeply.com/refugees/articles/2017/03/06/the-refugee-archipelago-the-inside-story-of-what-went-wrong-in-greece

52.Greece: Population Movement - Emergency Appeal (MDRGR001) Operations update n° 7 - Greece [Internet]. ReliefWeb. [cited 2019 Jan 10]. Available from: https://reliefweb.int/report/greece/greece-population-movement-emergency-appeal-mdrgr001-operations-update-n-7

53.UNHCR Greece Cash Assistance (December 2017) - Greece [Internet]. ReliefWeb. [cited 2019 Jan 14]. Available from: https://reliefweb.int/report/greece/unhcr-greece-cash-assistance-december-2017

54. ΕΣΤΙΑ [Internet]. ESTIA. [cited 2019 Jan 14]. Available from: http://estia.unhcr.gr/el/home_page/

55. Safe Zones: Hosting Unaccompanied Migrant Children in Mainland Greece [Internet]. International Organization for Migration. 2018 [cited 2019 Jan 18]. Available from: https://greece.iom.int/en/safe-zones-hosting-unaccompanied-migrant-children-mainland-greece

56. PHILOS Greece [Internet]. PHILOS Greece. [cited 2019 Jan 14]. Available from: https://philosgreece.eu/el/home/about

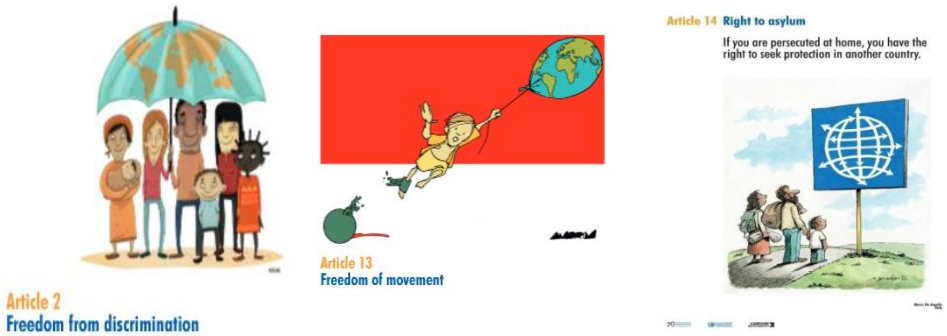
57. Απροστάτευτοι και απομονωμένοι οι ευάλωτοι πρόσφυγες στην Ελλάδα [Internet]. [cited 2019 Jan 19]. Available from: https://www.news247.gr/koinonia/aprostateytoi-kai-apomonomenoi-oi-eyalotoi-prosfyges-stin-ellada.6483844.html

58. 171222_eu_budget_financial_support_to_greece_en.pdf [Internet]. [cited 2019 Jan 14]. Available from: https://ec.europa.eu/home-affairs/sites/homeaffairs/files/what-we-do/policies/european-agenda-migration/20171222_eu_budget_financial_support_to_greece_en.pdf

59. Complaint Mechanisms in Border Management and Expulsion Operations in Europe: Effective Remedies for Victims of Human Rights Violations? | Irregular Migration Research Database: Europe [Internet]. [cited 2019 Jan 22]. Available from: https://gmdac.iom.int/research-database/complaint-mechanisms-border-management-and-expulsion-operations-europe-effective-remedies-victims

60. Ministry of Migration Policy - Asylum Service. The Work of the Asylum Service in 2017 [Internet]. Hellenic Republic Ministry Of Migration Policy; 2018. Available from: http://asylo.gov.gr/en/wp-content/uploads/2018/01/Press-Release-25.1.2018.pdf

On the front-page and page 50: Universal Declaration of Human Rights in Cartoon Paintings; articles 2, 13 and 14



Available at: https://www.cartoonmovement.com/files/ideasthatmatter/call-to-action.pdf

ANNEXES

Photograph 6: PIKPA Accommodation – Lesvos, 2017

@Fragiska Megaloudi

ΕΘΝΙΚΟ ΚΑΙ ΚΑΠΟΔΙΣΤΡΙΑΚΟ ΠΑΝΕΠΙΣΤΗΜΙΟ ΑΘΗΝΩΝ

ΙΑΤΡΙΚΗ ΣΧΟΛΗ

ΜΕΤΑΠΤΥΧΙΑΚΟ ΠΡΟΓΡΑΜΜΑ ΣΠΟΥΔΩΝ:

«ΔΙΕΘΝΗΣ ΙΑΤΡΙΚΗ-ΔΙΑΧΕΙΡΙΣΗ ΚΡΙΣΕΩΝ ΥΓΕΙΑΣ»

ΔΙΠΛΩΜΑΤΙΚΗ ΕΡΓΑΣΙΑ

ΠΕΡΙΛΗΨΗ ΣΤΑ ΕΛΛΗΝΙΚΑ

ΘΕΜΑ: Η Μετανάστευση στην Ελλάδα μετά το κλείσιμο της Βαλκανικής οδού τον Μάρτιο του 2016. Κριτική ανάλυση της απόκρισης στις ανάγκες υγείας και της προστασίας μεταναστών και προσφύγων - Μέρος Α': Κριτική ανασκόπηση

Λιανδρή Μαρία - Α.Μ: 20160139

Μεταπτυχιακή Φοιτήτρια

ΑΘΗΝΑ, 20 Ιανουαρίου 2019

Περιεχόμενα

Κυρίως Μέρος – Κριτική Ανασκόπηση 942

Κεφάλαιο 1: Διεθνής Μετανάστευση 94

1.1. Η Μετανάστευση τον 21ο Αιώνα - Δεδομένα και Πραγματικότητα.....94

1.2. Κατηγορίες Μεταναστών – Περιθωριοποίηση και Ευπάθεια.....94

1.3. Διεθνοποίηση και Μεταναστευτική Πολιτική 94

Ειδικό Μέρος.....95

Κεφάλαιο 2: Η Μετανάστευση στην Ελλάδα – Η Ευρωπαϊκή Οπτική.....95

2.1. Οι Επιπτώσεις της Μεταναστευτικής Πολιτικής της Ε.Ε. 975

2.3. Η Μεταναστευτική Πολιτική στην Ελλάδα.....986

Κεφάλαιο 3: Η Απόκριση στην Ελλάδα 99

3.1 Μια Προσέγγιση πολλών Ταχυτήτων.....99

3.2 Αποτελέσματα και Συζήτηση.....101

Εισαγωγή

Η μετανάστευση στην Ελλάδα είναι άρρηκτα συνδεδεμένη με την ευρωπαϊκή πραγματικότητα, καθώς η γεωγραφική θέση της χώρας την καθιστά μία από τις τρεις πύλες εισόδου στην Ε.Ε.. Επιπρόσθετα, η εφαρμοζόμενη πολιτική και η διαχείριση της μετανάστευσης σε εθνικό επίπεδο συνδέονται -έως και εξαρτώνται- δεδομένης και της οικονομικής κατάστασης της χώρας, από την πολιτική, τη στρατηγική, αλλά και τη χρηματοδότηση σε επίπεδο Ε.Ε..

Εστιάζοντας στην περίοδο που ακολούθησε το κλείσιμο της Βαλκανικής οδού προς την Ευρώπη και την υπογραφή της Συμφωνίας Ε.Ε.-Τουρκίας, από το Μάρτιο δηλαδή, του 2016 και έως και το Νοέμβριο του 2017, η παρούσα μελέτη εξετάζει την ανθρωπιστική απόκριση/δράση στην Ελλάδα, επικεντρώνοντας το ενδιαφέρον της στους τομείς της υγείας και της προστασίας των μεταναστών και με γνώμονα το δικαίωμα όλων στη ζωή και την αξιοπρέπεια. Επιχειρεί επιπρόσθετα, την αξιολόγηση της απόκρισης, με κριτήρια τις διαθέσιμες επενδύσεις, το σχεδιασμό, το πλαίσιο δράσης, την ευελιξία της και κυρίως την προσαρμοστικότητα της στις αντίστοιχες ανάγκες και την κάλυψης τους.

Μεθοδολογία

Η μελέτη αποτελείται από δύο διακριτά μέρη, Α' και Β', καθώς είναι το συνολικό αποτέλεσμα του συνδυασμού κριτικής ανασκόπησης, (Μέρος Α' - Μαρία Λιανδρή), η οποία έχει αναφορές στην πρωτογενή έρευνα (Μέρος Β' - Γεώργιος Καραγιάννης), που με τη σειρά της αντλεί από την κριτική ανασκόπηση.

Για το παρόν Α' Μέρος, χρησιμοποιήθηκε πέρα από τη συστηματική βιβλιογραφική ανασκόπηση και ετεροχρονισμένη ανάλυση επιτόπου παρατηρήσεων σε χώρους που εξυπηρετούν ή στεγάζουν μετανάστες σε διάφορα σημεία της χώρας. Για τη κριτική ανασκόπηση έγινε εκτενής χρήση των δικτυακών μηχανών αναζήτησης PubMed, Scholars Google και Google, με χρονικό εύρος αναζήτησης 2013-2018. Χρησιμοποιήθηκε δε εκτεταμένα γκρίζα βιβλιογραφία, δημοσιεύσεις Διεθνών Οργανισμών (ΔΟ), Μη Κυβερνητικών Οργανώσεων (ΜΚΟ), ενημερωτικά δελτία, πρακτικά συναντήσεων, κ.ο.κ..

Επισήμανση: παρόλο που χρησιμοποιούνται οι ευρύτεροι όροι μετανάστευση και μετανάστης, ο πληθυσμός ενδιαφέροντος είναι οι πολίτες τρίτων χωρών (εκτός Ε.Ε. και

Ευρώπης), οι οποίοι εισέρχονται στην Ε.Ε. μέσω της Ελλάδα παράτυπα, χωρίς δηλαδή τα απαραίτητα νομιμοποιητικά έγγραφα.

Ως απόκριση ορίζεται το σύνολο των δράσεων (σχεδιασμός, οργάνωση και εφαρμογή) για την κάλυψη των αναγκών τους στους τομείς υγείας και προστασίας.

Κυρίως Μέρος – Κριτική Ανασκόπηση

Κεφάλαιο 1: Διεθνής Μετανάστευση

Υπό τους επιμέρους τίτλους:

1.1. Η Μετανάστευση τον 21^{ο} Αιώνα - Δεδομένα και Πραγματικότητα

1.2. Κατηγορίες Μεταναστών – Περιθωριοποίηση και Ευπάθεια

1.3. Διεθνοποίηση και Μεταναστευτική Πολιτική

στο γενικό αυτό μέρος, αποσαφηνίζεται η ορολογία που χρησιμοποιείται στη μελέτη, ενώ επεξηγούνται οι έννοιες της προστασίας και της υγείας, όπως αυτές αναγνωρίζονται στο διεθνές μεταναστευτικό περιβάλλον. Παρουσιάζονται επίσης, οι θεμελιώδεις αρχές (σεβασμός στο δικαίωμα για τη ζωή και στην αξιοπρέπεια, αμερόληπτη και χωρίς διακρίσεις πρόσβαση στη βοήθεια και στην αξιοπρεπή διαβίωση και το δικαίωμα στην προστασία) και τα διεθνή στάνταρ ανθρωπιστικής δράσης, τα οποία στη συζήτηση του ειδικού μέρους αντιπαραβάλλονται στην ανθρωπιστική απόκριση, όπως αυτή διαμορφώθηκε στην Ελλάδα, κατά την περίοδο 2016-2017.

Παράλληλα, τίθενται οι πρώτοι προβληματισμοί, σχετικά με την επιρροή της πολιτικής της Ε.Ε. και του Διεθνισμού στη διαμόρφωση της ανθρωπιστικής απόκρισης, αλλά και γενικότερα της μεταναστευτικής πολιτικής των κρατών. Επιχειρήματα για την ορθότητα του ισχυρισμού αντλούνται εξάλλου, από το ειδικό μέρος, που εστιάζει στην απόκριση στην Ελλάδα, η οποία και αποτελεί χαρακτηριστικό παράδειγμα/απόδειξη προς αυτή την κατεύθυνση.

Περισσότερο από τον αριθμό των μεταναστών, τα ιδιαίτερα ζητήματα που σχετίζονται με τη σύγχρονη μετανάστευση είναι:

- Η σύνδεση της με συνθήκες επείγουσας υποδοχής, στέγασης και περίθαλψης, εξαιτίας του τρόπου μετακίνησης και της ευπάθειας των παράτυπα μετακινούμενων

μεταναστών, που απαιτούν ενισχυμένη ανθρωπιστική δράση και την παρουσία διεθνών οργανισμών και ανθρωπιστικών οργανισμών

- Η ανισόρροπη κατανομή της μεταναστευτικής επιβάρυνσης και η συνεπαγόμενη καταπόνηση κρατών και κοινωνιών
- Η περαιτέρω καταπόνηση και επιβάρυνση των ήδη ευάλωτων μεταναστών, η περιορισμένη πρόσβαση τους στα Δικαιώματα και η αδυναμία ενσωμάτωσης τους

Η κάλυψη των αναγκών των μετακινούμενων, αλλά και η επιθυμία ελέγχου και διαχείρισης της μετανάστευσης, αποτελούν κύριο μέλημα σε παγκόσμιο επίπεδο. Η «νόμιμη, οργανωμένη, και ασφαλής μετανάστευση» και η ενίσχυση των ευκαιριών που προσφέρει για τις αναπτυσσόμενες χώρες αποτελούν εξάλλου, βασικούς στόχους της Παγκόσμιας Ατζέντας για Βιώσιμη ανάπτυξη, μέχρι το 2030.(2)

Τα κράτη μέλη της Ε.Ε., επωφελούνται, γενικότερα, από την κοινή μεταναστευτική πολιτική και τις διεθνείς συνεργασίες. Στον αντίποδα ωστόσο, της εθνικής κυριαρχίας, οι διεθνείς σχέσεις και η κοινή στρατηγική καθορίζουν τη διαμόρφωση της εθνικής πολικής και την κατανομή των πόρων, ενώ το ευρωπαϊκό όραμα οδηγούν τα ισχυρότερα κράτη.(27) Επιπρόσθετα, η παγίωση της μετανάστευσης σε «απειλή», σε συνδυασμό με εγκαθιδρυμένους φόβους, όπως αυτόν της τρομοκρατίας, παρέχουν άλλοθι για την εφαρμογή αυστηρότερων πολιτικών, ιμπεριαλιστικών πρακτικών και αυξημένη κρατική παρέμβαση στη ζωή των ανθρώπων.(30) Αυτό επηρεάζει τη ζωή όλων, μιας και από τη φύση της η μετανάστευση διαπλέκεται και αλληλοεπιδρά με όλο το φάσμα της ανθρώπινης ζωής.

Ειδικό Μέρος

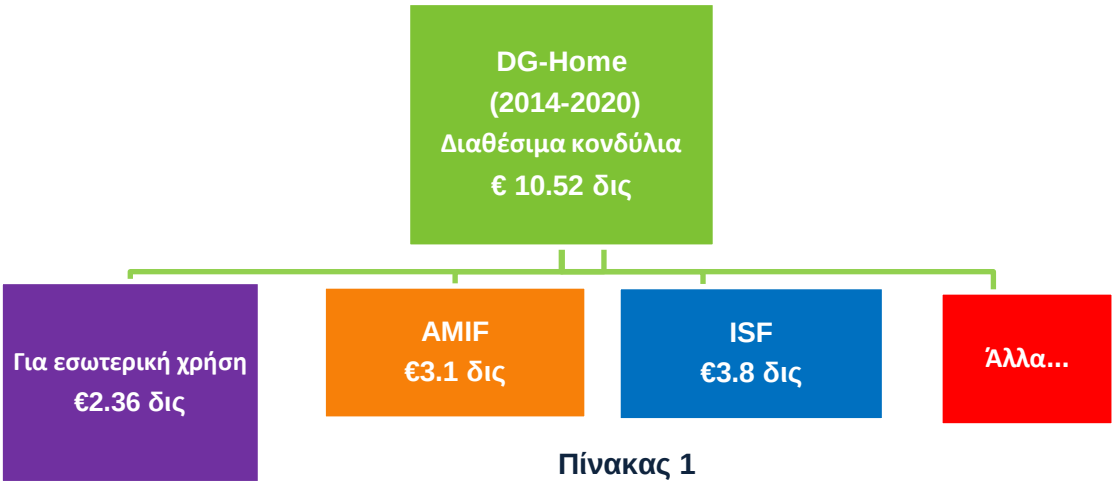
Κεφάλαιο 2: Η Μετανάστευση στην Ελλάδα – Η Ευρωπαϊκή Οπτική

1.1. Η Αντίδραση της Ε.Ε. στη Μεταναστευτική Κρίση

Το Ευρωπαϊκό πρόγραμμα, για το 2014-2020, αποτελεί ουσιαστικά αντίμετρο για τη μεταναστευτική πίεση, αλλά και εκπλήρωση της δέσμευσης για κοινή μεταναστευτική πολιτική που να εξυπηρετεί τη «νόμιμη, ελεγχόμενη και ασφαλή μετανάστευση».(32) Προσβλέπει δε, για την υλοποίηση του, στη σύμπνοια και στην αλληλεγγύη των ευρωπαϊκών χωρών. Μέσα από αυτό, οι κοινοί ευρωπαϊκοί στόχοι στρέφονται:

- ✓ Στην ενίσχυση της φύλαξης των κοινών συνόρων και την καταπολέμηση του διασυνοριακού εγκλήματος. Στην Ελλάδα (όπως και στην Ιταλία) αυτό σηματοδοτήθηκε και από την προσέγγιση των Hot-Spot: κέντρων υποδοχής και γρήγορης διαχείριση των εισερχόμενων μεταναστών στα κύρια σημεία εισόδου(39)
- ✓ Στην προώθηση συνεργασιών και συμπράξεων εντός και εκτός συνόρων της Ε.Ε., με σκοπό την καταπολέμιση των αιτιών της μετανάστευσης, τον έλεγχο της, αλλά και την καλύτερη προστασία και ένταξη των μεταναστών
- ✓ Στη δικαιότερη ανακατανομή της μεταναστευτικής επιβάρυνσης, με το άνοιγμα νόμιμων και ασφαλών οδών μετανάστευσης, όπως οι επανεγκαταστάσεις και οι επαναπροωθήσεις
- ✓ Στην μεταρρύθμιση του κοινού Ευρωπαικού πλαισίου για το άστυλο (ΚΕΣΑ/CEAS), ώστε να διευκολύνει την εναρμόνιση των μεταστευτικών πολιτκών των χωρών της Ε.Ε[29].

Για την υλοποίηση του ευρωπαϊκού προγράμματος, η σχετική χρηματοδότηση τριπλασιάστηκε και οργανώθηκε/μοιράστηκε, σε αντιστοιχία με τους προγραμματικούς στόχους, στο Ταμείο Ασύλου Μετανάστευσης και Ένταξης (AMIF) και στο Ταμείο Εσωτερικής Ασφάλειας (ISF), κάτω από τον ευρύτερο μηχανισμό χρηματοδότησης εσωτερικών υποθέσεων (DG-HOME).(πίνακας 1) Η χρηματοδότηση είναι διαθέσιμη σε κάθε εμπλεκόμενο που πληροί τις προϋποθέσεις και ευνοεί τις συνεργασίες.(38)



Πίνακας 1

[29] Παράλληλα, άλλαξε και ο κοινός κώδικας Σέγκεν (το 2016).

Η κοινή μεταναστευτική πολιτική και χρηματοδότηση έχουν επικριθεί ανοιχτά, ότι δεν εστιάζουν στις ανάγκες των ανθρώπων και την εξυπηρέτηση τους, αντίθετα επενδύουν στο κλείσιμο των συνόρων, τον έλεγχο και τον περιορισμό της μετανάστευσης και τη διαλογή μεταναστών. Αυτό συνεπάγεται και ενέχει ιδιαίτερους κινδύνους για την υγεία και τη ζωή των μεταναστών, ενώ περιορίζει την πρόσβαση στην προστασία και τα Δικαιώματα, εγκλωβίζοντας τους σε χώρες με σαθρό υποστηρικτικό σύστημα και προβλήματα ασφάλειας και εκμετάλλευσης. Παράλληλα, η Ε.Ε. επεκτείνει τα σύνορα της δικαιοδοσίας της μέσω συμφωνιών και πριμοδοτεί ιδιωτικά συμφέροντα (κρατών, οργανισμών, εταιρειών, κ.ο.κ).(27)

Όλες αυτές οι προκλήσεις διαφαίνονται στις αμφιλεγόμενες συμφωνίες της Ε.Ε., με τη Λιβύη και την Τουρκία αντίστοιχα, που εντάχθηκαν στο ευρωπαϊκό πρόγραμμα το 2016. Η συμφωνία Ε.Ε.-Τουρκίας στηρίχτηκε στη «διαλογή» και την εξυπηρέτηση της, με την «ανταλλαγή» μεταναστών. Παράλληλα, σήμαινε την αναγνώριση της Τουρκίας ως ασφαλούς τρίτης χώρας, παρά το ότι έχει θέσει γεωγραφικό περιορισμό στην προσφυγική αναγνώριση, επιφέροντας ενστάσεις για παραβίαση της αρχής της μη-επανεισδοχής. Αν και πάγωσε σχετικά σύντομα, υπό το βάρος της γεωπολιτικής, η Συμφωνία Ε.Ε.-Τουρκίας και το κλείσιμο της Βαλκανικής οδού υπήρξαν καθοριστικοί παράγοντες για τη διαμόρφωση της μεταναστευτικής πολιτικής στην Ελλάδα.

2.1. Οι Επιπτώσεις της Μεταναστευτικής Πολιτικής της Ε.Ε.

Έτος	Αφίξεις στα Θαλάσσια Σύνορα της Ε.Ε.
2015	1.015.078
2016	362.753
2017	172.301

Συνολικές Αφίξεις στην Ε.Ε./Έτος	Αφίξεις στην Ιταλία	Αφίξεις στην Ελλάδα
2016 +/- 388.000	+/- 181.500	+/- 177.000
2017 +/- 178.000	+/- 119.500	+/- 35.000

Πίνακες 2 & 3: Αφίξεις στην Ε.Ε. πηγή στοιχείων: ΔΟΜ, UNHCR)

Με την εφαρμογή του Ευρωπαϊκού προγράμματος οι ροές στην Κεντρική και Ανατολική μεταναστευτική οδό της Μεσογείου μειώθηκαν κατακόρυφα, ωστόσο αυτό δεν διασφάλισε την ανθρώπινη ζωή. Απαγορεύσεις εισόδου, περιπολίες και κράτηση, άτυπες επιστροφές (push-backs) και παραβιάσεις δικαιωμάτων, έγιναν μόνιμη πρακτική περιορίζοντας την πρόσβαση στην προστασία και στη βοήθεια. Επιπρόσθετα, η παράτυπη μετακίνηση έγινε πιο ακριβή και επικίνδυνη, καθώς διερευνήθηκαν νέοι, περισσότερο επισφαλείς δρόμοι εκτός και εντός Ευρώπης. Συγκεκριμένα στην Ελλάδα παρουσιάστηκαν ξανά αφίξεις από τα χερσαία σύνορα με την Τουρκία, όπου δημιουργήθηκε υπόβαθρο επείγοντος, ενώ παράλληλα διερευνήθηκαν νέοι δίοδοι προς την Ε.Ε..(3)

+/- 500.000 εντολές διοικητικής απέλασης
+/- 388.280 αρνήσεις εισόδου
+/- 230.000 επανεισδοχές

Πίνακας 4 - πηγή: Ε.Ε. - Eurostat

Το όραμα της ευρωπαϊκής αλληλεγγύης δεν ευοδώθηκε, καθώς τα ευρωπαϊκά κράτη απέφυγαν εντέχνως - με καθυστερήσεις και άτυπες συμφωνίες - τις υποχρεώσεις τους απέναντι στην Οικογενειακή Επανένωση και την Μετεγκατάσταση, εγείροντας ενδο-ευρωπαϊκές ενστάσεις και εντάσεις. Αντί λοιπόν, για τη δίκαιη ανακατανομή της, η μετανάστευση εγκλωβίστηκε και κλειδώθηκε τελικά, στον Ευρωπαϊκό Νότο, όπως καταδεικνύει και η αύξηση των αιτημάτων ασύλου στην Ισπανία την Ιταλία και την Ελλάδα, παρά τη γενικότερη πτωτική τάση τους στην Ευρώπη. Στην Ελλάδα εξάλλου, αν και η πτώση στις εισροές υπήρξε κατακόρυφη, ο αριθμός των αιτημάτων ασύλου ξεπέρασε τις 51.000 (+264% σε σχέση με το 2015), ως η μόνη επιλογή για πρόσβαση στην προστασία και τη φροντίδα και την αποφυγή της κράτησης ή της απέλασης.

2.3. Η Μεταναστευτική Πολιτική στην Ελλάδα

Η μεταναστευτική πολιτική στην Ελλάδα την περίοδο αυτή, σηματοδοτήθηκε από την αναδιάρθρωση του νομικού πλαισίου για τη μετανάστευση, με την υιοθέτηση του εναρμονισμένου με τον ΚΕΣΑ μεταναστευτικού νόμου *4375/2016* - που στη συνέχεια αναθεωρήθηκε συχνά - και την αναδιάρθρωση του συστήματος Υποδοχής και Ασύλου:

- **Υιοθέτηση της πρακτικής των Hot-Spots:** αναδιάρθρωση της Υπηρεσίας Πρώτης Υποδοχής και Ταυτοποίησης και εγκατάσταση - με τη συνδρομή και την παράλληλη παρουσία μηχανισμών της Ε.Ε. - 5 Κέντρων Υποδοχής και Ταυτοποίησης (Κ.Υ.Τ), σε Λέσβο, Σάμο, Χίο, Κω και Λέρο.

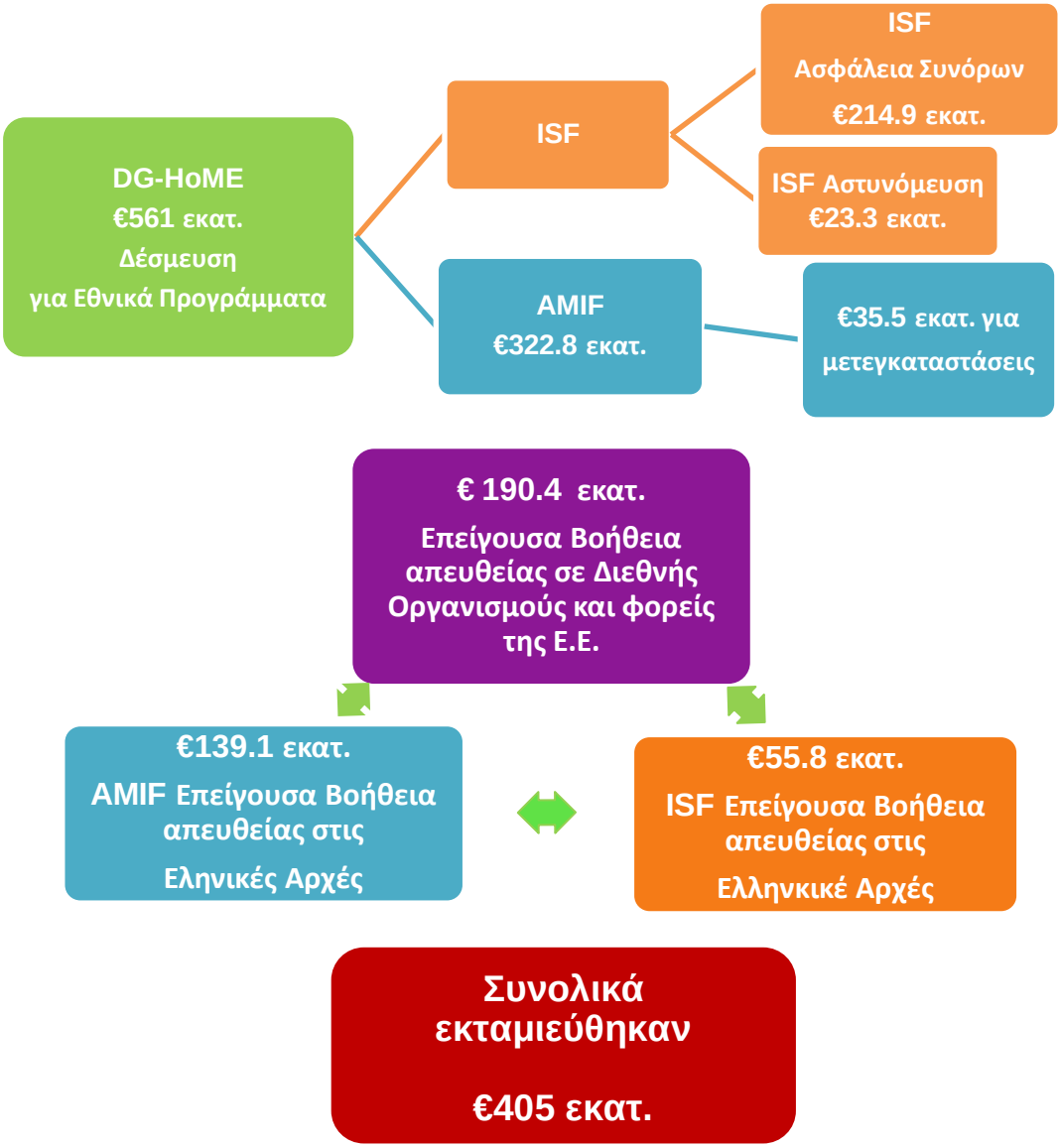
- **Αναδιάρθρωση της υποδοχής και της διαδικασίας Ασύλου**:
  - Υιοθέτηση ταχείας διαδικασίας διαχείρισης στα Hot-Spot
  - Σύνταξη πρωτοκόλλων για τη διαπίστευση «ευαλωτότητας»/ευπάθειας, στις οποίες εντάχθηκαν και τα θύματα ναυαγίων, προβληματίζοντας ιδιαίτερα την Ε.Ε..(49)

Από την αρχή, η διαδικασία υποδοχής και ασύλου υπήρξε πολύπλοκη και δυσνόητη για τους επωφελούμενους και συνδέθηκε με κακές πρακτικές, μεροληπτικές διαδικασίες, έλλειψη συνάφειας, περιορισμένη πρόσβαση, ελλείψεις προσωπικού και τεράστιες καθυστερήσεις στον αντίποδα αυστηρών προθεσμιών. Ιδιαίτερες προκλήσεις αποτέλεσαν:

- Ο υπερκορεσμός του συστήματος κ η μακροχρόνια διαχείριση υποθέσεων
- Η εμπλοκή του EASO στη διαδικασία καταγραφής
- Η περιορισμένη πρόσβαση στη νομική συνδρομή
- Η εκτεταμένη και παρατεταμένη διοικητική κράτηση[30]
- Η καθυστέρηση στη διαπίστευση της «ευαλοτώτητας»/ευπάθειας, σε αντιδιαστολή προς τις αυστηρές προθεσμίες
- Ο γεωγραφικός περιορισμός των αιτουμένων ασύλου και τελικά, ο υπερκορεσμός των Hot-Spot

Όλα αυτά σήμαναν σοβαρές απειλές για την υγεία, τη ζωή και την ακεραιότητα των μεταναστών. Η Ελλάδα επικρίθηκε για τη αδυναμία εξασφάλισης της πρόσβασης των μεταναστών στα ανθρώπινα και νομικά τους δικαιώματα και για καταστρατήγηση του δικαιώματος στη ζωή και την αξιοπρέπεια.

[30] Σημειολογικά αναφέρεται η παρουσία της Διεθνούς Επιτροπής του Ερυθρού Σταυρού στην Ελλάδα, για την κράτηση και για τους αγνοούμενους των ναυαγίων



Πίνακας 5: Χρηματοδότηση DG-HOME για την Ελλάδα (2014-2017)

*from EC.e.europa(47) reproduced

DG-ECHO
€313.6 εκατ.

- Πρωτοβάθμια
- Στέγαση Ασυνόδευτων Ανήλικων
- Επείγουσα Εκπαίδευση
- Ψυχοκοινωνική Στήριξη (PSS)
- Υγιεινή

DG-ECHO
€178 εκατ.
Σε πράγματα το 2015

Πίνακας 6: DG-ECHO Greece for 2015-2017

*Στοιχεία του Υπουργείου Μεταναστευτικής Πολιτικής (αναπαραγωγή)(46)

Κεφάλαιο 3: Η Απόκριση στην Ελλάδα

3.1 Μια προσέγγιση πολλών ταχυτήτων

Κύριο χαρακτηριστικό της απόκρισης την εξεταζόμενη περιόδου αποτέλεσε η μετάβαση από την εποχή των ανθρωπιστικών οργανισμών και του επείγοντος προς την ομαλότητα και την ένταξη - τουλάχιστον θεωρητικά - με την ενεργή συμμετοχή του κράτους και τη «σύμπραξη». Αυτό σηματοδοτήθηκε από:

- ✓ Τη σύσταση του Υπουργείου Μεταναστευτικής Πολιτικής και
- ✓ Την πλαισίωση της ανθρωπιστικής δράσης, στην οποία εντάχθηκαν και νεοσύστατες οργανώσεις, οι οποίες είχαν εμφανιστεί την αμέσως προηγούμενη περίοδο με την ευκαιρία τους επείγοντος
- ✓ Τους κοινούς ευρωπαϊκούς στόχους

Οι ενδογενείς αδυναμίες του ελληνικού συστήματος, όπως η γραφειοκρατία και η έλλειψη σχεδιασμού και η διάσταση των ευρωπαϊκών στόχων με την ελληνική πραγματικότητα, δεν επέτρεψαν την πλήρη απορρόφηση των κονδυλίων. Παρά την ύπαρξη και άλλων μορφών χρηματοδότησης, το μεγαλύτερο μέρος της παρέμβασης χρηματοδοτήθηκε από τους επείγοντες μηχανισμούς χρηματοδότησης του DG-Home και του DG-ECHO (χρηματοδότηση για την πολιτική προστασία).

Με όχημα και συνδετικό κρίκο τη χρηματοδότηση και κατεύθυνση τους στόχους της κοινής Ε.Ε., αναπτύχθηκαν εκτεταμένα δίκτυα συνεργασίας (κρατικών και μη κρατικών φορέων) και πραγματοποιηθήκαν παρεμβάσεις μεγάλης κλίμακας, όπως η δημιουργία ανοιχτών δομών φιλοξενίας σε όλη τη χώρα και μακροπρόθεσμα προγράμματα που εστίαζαν στην ένταξη (π.χ. τα πρόγραμμα ΕΣΤΙΑ, Cash Transfer/CTP), ενώ δεν έλειψαν και τα μικρότερα προγράμματα ή και οι πρωτοβουλίες των οργανώσεων που δε είχαν την ευρωπαϊκή δέσμευση (π.χ.MSF). Ως αποτέλεσμα της παρέμβασης η ζωή των μεταναστών οργανώθηκε μεταξύ

- 5 Hot-Spot
- Πλέον των 40 νεοσύστατων ανοιχτών κέντρων φιλοξενίας και του
- Αστικού ιστού (διαμερίσματα/δομές/καταλήψειςς και Κέντρα Ημέρας)

Η φροντίδα Υγείας, με το συντονισμό του Υπουργείου Υγείας (Ε.Κ.Ε.Π.Υ), εναρμονίστηκε επίσης, με την Ε.Ε. πολιτική. Κινήθηκε μεταξύ της προσπάθειας ένταξης των μεταναστών στο Εθνικό Σύστημα Υγείας και του προγράμματος επείγουσα ιατρική (PHILOS). Το

PHILOS εστίασε στη διαπίστευση της ευπάθειας, την επιδημιολογική επιτήρηση και την κάλυψη της πρωτοβάθμιας υγείας στα σημεία μαζικής στέγασης μεταναστών (Hot-Spot και ανοιχτές δομές). Η απόκριση κινήθηκε γενικότερα, γύρω από τον εμβολιασμό - απαραίτητο και για τη σχολική ένταξη των παιδιών- τη διαπίστευση της ευπάθειας, εκπαιδεύσεων, πρωτοβάθμιας υγείας και επείγουσας εκπαίδευσης ανηλίκων.

3.2. Αποτελέσματα και Συζήτηση

Η περίοδος 2014-2016 υπήρξε μεταβατική. Η Ελλάδα κλήθηκε να επαναπροσδιορίσει την πολιτική και τη δράσης της, καθώς, θεωρητικά, οι συνθήκες επείγοντος είχαν εκπνεύσει, χωρίς ωστόσο να έχει επιτευχθεί η κανονικότητα. Οι υποδομές της προηγούμενης περιόδου απαξιώθηκαν και σχεδόν όλα έπρεπε να σχεδιαστούν από την αρχή. Σε αντίθεση με τους πάνω από 50.000 μετανάστες που ήταν εγκλωβισμένοι και στατικοί, οι συνθήκες παρέμεναν δυναμικές, ενώ ελλόχευαν σημαντικοί κίνδυνοι για την προστασία, την υγεία και τη ζωή των μεταναστών.

3.2.1 Προκλήσεις στους Τομείς της Προστασίας και της Υγείας

Ευρήματα:

Στον τομέα της προστασίας τα προβλήματα ήταν εκτεταμένα, με κυριότερα

- **Περιορισμένη πρόσβαση και την καταστρατήγηση των Δικαιωμάτων**

- Παραβίαση της βούλησης των μεταναστών και εγκλωβισμός τους στην Ελλάδα, για άγνωστο χρονικό διάστημα
- Μεροληπτικό και ανεπαρκές σύστημα ασύλου
- Παρατεταμένη και εκτεταμένη κράτηση
- Περιορισμένη πρόσβαση στη νομική βοήθεια
- Ελλιπή και συγκεχυμένη πληροφόρηση και προβληματική πρόσβαση σε αυτήν
- Περιορισμένη πρόσβαση στην Οικογενειακή Συνοχή και Επανασύνδεση
- Έκθεση σε κινδύνους και αποστέρηση ζωής (πχ. διάσχιση του ποταμού Έβρου)
- Ανεπαρκής έρευνα για την αναζήτηση αγνοούμενων και ταυτοποίηση νεκρών. Ανεπαρκής στήριξη των οικογενειών των θυμάτων ναυαγίων
- Καθυστερήσεις στη διαπίστευση της ευπάθειας, πλημμελή καταγραφή της, ανεπαρκής και βραχυπρόθεσμη φροντίδα
- Ακατάλληλο πλαίσιο κηδεμονίας και προστασίας για τους ασυνόδευτους ανηλίκους, ανεπαρκής στέγαση και περιορισμένη πρόσβαση στα Δικαιώματα, έκθεση σε κίνδυνο

- Παρεμπόδιση της εκπαίδευσης των ανηλίκων
- Ιδιαίτερα προβλήματα αγοριών και νεαρών ανδρών, προβλήματα παραμέλησης
- Εκπόρνευση
- Προβλήματα ένταξης, απομόνωση και πρόσβασης στην αγορά εργασίας

➢ **Ανεπαρκή και μεροληπτική μικτή φιλοξενία πολλών ταχυτήτων. Προβλήματα Δικαιωμάτων, διακρίσεων, απομόνωσης, ασφάλειας και εγκατάλειψης και επιβάρυνσης της υγείας**

- Συνωστισμός, πλημμελής υγιεινή και αναταραχές στα Hot-Spot
- Άναρχα και πρόχειρα δομημένα ανοιχτά κέντρα φιλοξενίας, συχνά απομονωμένα, με μεγάλες αποκλείσεις μεταξύ τους
- Προβλήματα εξεύρεσης αξιοπρεπούς καταλύματος για μετανάστες, ένταξης και αποδοχής/αφομοίωσης στον αστικό ιστό

➢ **Σοβαρά ζητήματα ασφάλειας**

- Ανεπαρκής προετοιμασία για το χειμώνα, έκθεση σε κίνδυνο θανάτου
- Επικίνδυνες διενέξεις μεταξύ εθνοτήτων - τραυματισμοί
- Μεροληπτική συμπεριφορά – πυροδότηση διενέξεων-εξεγέρσεων
- Εξεγέρσεις και καταστροφές
- Πλημμελής αναφορά παραβιάσεων, κακοποιήσεων και έμφυλης βίας
- Εμπορία και διακίνηση ανθρώπων – ενίσχυση εγκληματικών δικτύων
- Σεξουαλικές παρενοχλήσεις, χρήση αλκοόλ και ουσιών, μαύρη αγορά, κλοπές
- Αδυναμία προστασίας παιδιών, γυναικών και ευπαθών ομάδων

Προβλήματα στη Φροντίδα Υγείας

- Εκτεταμένες ανάγκες την αναπαραγωγική υγεία, δεδομένου του δημογραφικού προφίλ του πληθυσμού (>50% γυναίκες και παιδιά) και της έμφυλης βίας
- Πολιτισμικά προβλήματα πρόσβασης στην υγεία, ειδικά των γυναικών
- Αυξημένη ανάγκη για φροντίδα ψυχικής υγείας, επιβάρυνση λόγω συνθηκών
- Απόπειρες αυτοκτονίας ειδικά στα Hot-spot
- Ανάγκη επείγουσας ιατρικής λόγω διενέξεων, εξεγέρσεων και έκθεσης σε κινδύνους (τραυματισμοί/εγκαύματα)
- Προβλήματα από το ακατάλληλη στέγαση συνωστισμό και την κακή υγιεινή (π.χ. ψώρα, μεταδιδόμενα)

- Περιστατικά μεταδιδόμενων νοσημάτων και αναστάτωση κοινωνίας υποδοχής
- Ανεπάρκεια ειδικοτήτων, όπως οδοντίατροι, οφθαλμίατροι και γυναικολόγοι .
- Περιορισμένη πρόσβαση σε φάρμακα
- Πρόσβαση σε φαγητό μέσω εταιρειών/ όχι ενιαίο σύστημα, με καθυστερήσεις και πλημμελή κάλυψη, χωρίς δυνατότητα κλινικής δίαιτας (κοινή κουζίνα)
- Ελλείψεις σε είδη πρώτης ανάγκης – υγιεινής ειδικά για γυναίκες και ευπαθείς ομάδες
- Παρά την προσπάθεια ένταξης των μεταναστών στο Εθνικό Σύστημα Υγείας η πρόσβαση τους στην φροντίδα υγείας υπήρξε περιορισμένη
- Περιορισμένης δυναμικής και υπερφορτωμένη, ιδιαίτερα τοπικά, Δημόσια Υγεία
- Προβληματική διασύνδεση πρωτοβάθμιας και δευτεροβάθμιας φροντίδας
- Ανεπαρκής φροντίδα για τα χρόνια νοσήματα
- Προβλήματα προσβασιμότητας - μεταφοράς μετά το απόγευμα και τα Σαββατοκύριακα/αργίες (μεταφορά στα νοσοκομεία)
- Επείγουσα εκπαίδευση

Κοινά προβλήματα στη διασφάλιση προστασίας και τη φροντίδα υγείας:

- Προβλήματα πρόσβασης σε ποιοτικές και έγκυρες υπηρεσίες (ελλείψεις και καθυστερήσεις). Υπήρχαν ωστόσο, προγράμματα υψηλής ποιότητας, αλλά ήταν περιορισμένης δυναμικής
- Επικαλύψεις και ελλείψεις υπηρεσιών
- Ελάχιστα πολιτισμικά προσαρμοσμένη απόκριση (βελτίωση με το χρόνο)
- Ανεπαρκής εξυπηρέτηση ιδιαιτεροτήτων (φύλλου, ηλικίας, εθνικότητας, ευπάθειας)
- Ανεπαρκής πρόσβαση στη βοήθεια/υπηρεσίες, ιδιαίτερα για τις ευπαθείς ομάδες: γυναίκες, παιδιά, άτομα με αναπηρίες
- Μονοπώληση των εξωτερικών χώρων και των παροχών από τους άνδρες
- Προβλήματα μεταφοράς και προσβασιμότητας
- Μεγάλα προβλήματα στην επικοινωνία – ανάγκη συνοδείας
- Έλλειψη διερμηνέων σε κάποιες γλώσσες
- Ανεπαρκής διαπολιτισμική διαμεσολάβηση, ειδικά για θέματα υγείας, με αποτέλεσμα αδυναμία πρόσβασης στην παροχή βοήθειας (π.χ. ψυχοκοινωνική στήριξη)
- Ελλείψεις στη διερμηνεία ειδικά κάποιων γλωσσών
- Κόπωση συμπόνιας επαγγελματιών
- Παραβίαση της αξιοπρέπειας -ασέβεια

- Αδυναμία απορρόφησης και διάσταση με την Ελληνική κοινωνία (αίσθημα επιβολής – δεν ερωτηθήκαμε)
- Ιδρυματοποίηση των μεταναστών (εξάρτηση)

Η ευπάθεια των μεταναστών και τα προβλήματα υγείας τους πολλαπλασιάζονται με την πλημμελή φροντίδα και τις κακουχίες, αλλά και με την αδυναμία ένταξης τους. Παρότι η απορρόφηση των μεταναστών είναι θεμελιώδης και για τους ίδιους, και για τις κοινωνίες υποδοχής, αυτή βρίσκει αντιστάσεις στις πολιτισμικές διαφορές και στην πολιτική. Η υποτίμηση της ανθρώπινης αξίας τους ωστόσο, και η κακομεταχείριση τους έχει αποτέλεσμα οι ίδιοι και η κοινωνία υποδοχής να εγκλωβίζοντας εξίσου σε ένα φαύλο κύκλο επισφάλειας, βίας, ρατσισμού, και παραβιάσεων, υποσκάπτοντας την ανθεκτικότητα των κοινωνιών.

3.2.2. Σχολιασμός Απόκρισης – Αδυναμίες

Δεδομένου ότι:

- Ο αριθμός των εξυπηρετούμενων μεταναστών υπήρξε συγκριτικά περιορισμένος
- Έγινα επενδύσεις μεγάλης κλίμακας και
- Οι εμπλεκόμενοι/πάροχοι είχαν μεγάλη εμπειρία στην ανθρωπιστική δράση

Μοιάζει περίεργο το ότι, η απόκριση δεν κατάφερε να ανταποκριθεί στις ανάγκες των μεταναστών.

Μέσα ωστόσο, από την αναφορά σε διεθνείς οδηγούς, για τα προ-απαιτούμενα στην παροχή ανθρωπιστικής βοήθειας, εντοπίζονται οι αιτίες και οι κύριες προκλήσεις σε σχέση με την απόκριση στην Ελλάδα:

- ✓ Έλλειψη – αδυναμία κεντρικού σχεδιασμού και στρατηγικής
- ✓ Η δράση εξαρτήθηκε από την Ευρωπαϊκή πολιτική και ήταν προσανατολισμένη στους αντίστοιχους στόχους και όχι στις πραγματικές ανάγκες των μεταναστών.
- ✓ Πλημμελής διερεύνηση αναγκών και διάσταση αναγκών - στόχων απόκρισης
- ✓ Πλημμελής και αποσπασματική καταγραφή και ελλιπής αναγνώριση εξυπηρετούμενων
- ✓ Δυναμικές συνθήκες και μεταβλητό περιβάλλον
- ✓ Ελλείψεις σχεδιασμού και συχνή αλλαγή πλάνου
- ✓ Προβλήματα κυριότητας, ευελιξίας και ουσιαστικής συμμετοχής εμπλεκομένων, που αλλάζει με το επίπεδο δράσης – ελλιπής αναγνώριση του περιβάλλοντος και αποποίηση ευθυνών
- ✓ Αλαζονεία εμπλεκομένων

- ✓ Δοκιμασμένες λύσεις – όχι απαραίτητα συναφής με την ελληνική πραγματικότητα
- ✓ Προβλήματα πρωτοβουλίας, ευελιξίας και προσαρμογής προγραμμάτων
- ✓ Προβλήματα συντονισμού και επικοινωνίας μεταξύ των φορέων (βελτιώνεται προς το τέλος της περιόδου)
- ✓ Επικαλύψεις, επαναλήψεις και ελλείψεις
- ✓ Προβλήματα ποιότητας, τήρησης προθεσμιών και προσβασιμότητας στις υπηρεσίες (σχεδιασμός – επικοινωνία – κατανομή πόρων)
- ✓ Έλλειψη διαθέσιμου και κατάλληλου προσωπικού, ειδικά σε απομακρυσμένες περιοχές και στα νησιά, παρά τις εκπαιδεύσεις
- ✓ Ανακύκλωση φορέων υλοποίησης
- ✓ Ανακύκλωση επαγγελματιών μεταξύ φορέων
- ✓ Προβληματική, εκτεταμένη, ακριβή και αναποτελεσματική διοίκηση
- ✓ Προβληματικής χωρική οργάνωση της απόκρισης - εξαντλητικές και ακριβές προμήθειες και μετακινήσεις
- ✓ Ανάγκη για υποδομές και υλικοτεχνική υποστήριξη - εξάντληση προϋπολογισμών
- ✓ Πολλαπλασιασμός του κόστους και υψηλά μισθολόγια
- ✓ Προβλήματα παρακολούθησης και αξιολόγησης προγραμμάτων – αποσπασματικές εκθέσεις και εκτιμήσεις
- ✓ Προβλήματα λογοδοσίας και τη διαφάνειας

Συμπεράσματα

Κατά την περίοδο 2016 - 2107, η απόκριση στις ανάγκες προστασίας και υγείας των μεταναστών, δεν υπήρξε αποτελεσματική. Το κόστος της ήταν ιδιαίτερα υψηλό σε σχέση με την παρεχόμενη τελικά βοήθεια, θέτοντας ζητήματα λογοδοσίας και διαφάνειας. Επιπρόσθετα, η απόκριση επηρεάστηκε από την Ευρωπαϊκή πολιτική και τα προγράμματα των οργανισμών και λιγότερο από τις ανάγκες των ωφελούμενων. Όχι μόνο ήταν κατώτερη των αντίστοιχων αναγκών, αλλά και ενείχε σημαντικές προκλήσεις και κινδύνους, τόσο για την υγεία, όσο και για την προστασία των μεταναστών, σε τέτοιο βαθμό, ώστε να τίθεται ζήτημα πρόσβασης τους στα ανθρώπινα και νομικά τους δικαιώματα και κινδύνου της ακεραιότητας και της ζωής τους.

Η Ελλάδα οφείλει να προβεί στον προσδιορισμό ελαχίστων ποιοτικών όρων για την ανθρωπιστική δράση, πάνω στους οποίους να θεμελιώνεται μια στρατηγική ουσιαστικής

αρωγής και απόκρισης στις ανάγκες των μεταναστών, που να ενσωματώνει όλους τους εμπλεκομένους. Η Ευρώπη από την άλλη, καλείται να επαναπροσδιορίσει την κοινή μεταναστευτική πολιτική και να ενεργοποιήσει τα ανθρωπιστικά ιδεώδη και αντανακλαστικά της.

ANNEX II: Observational Field Visits

List of places visited and photographic material

Open Sites

Skaramagas open site - Attika, October 2017

Ritsona open site - Viotia (Chalkida), June 2017

Koutsochero - Larissa, June 2017

Nea Kavalla – Kilkis, June 2017

Softex and Diavata – Thessaloniki, July 2017

Armatolou Kokkini – Ag. Georgios, Veria, July 2017

PIKPA – Lesvos November 2017

RICs

Moria – Lesvos, October 2017

Via – Chios, October 2017

Pyli – Ag. Georgios, Kos, September 2017

Photo 7: PIKPA – Lesvos, 2017

@Fragiska Megaloudi

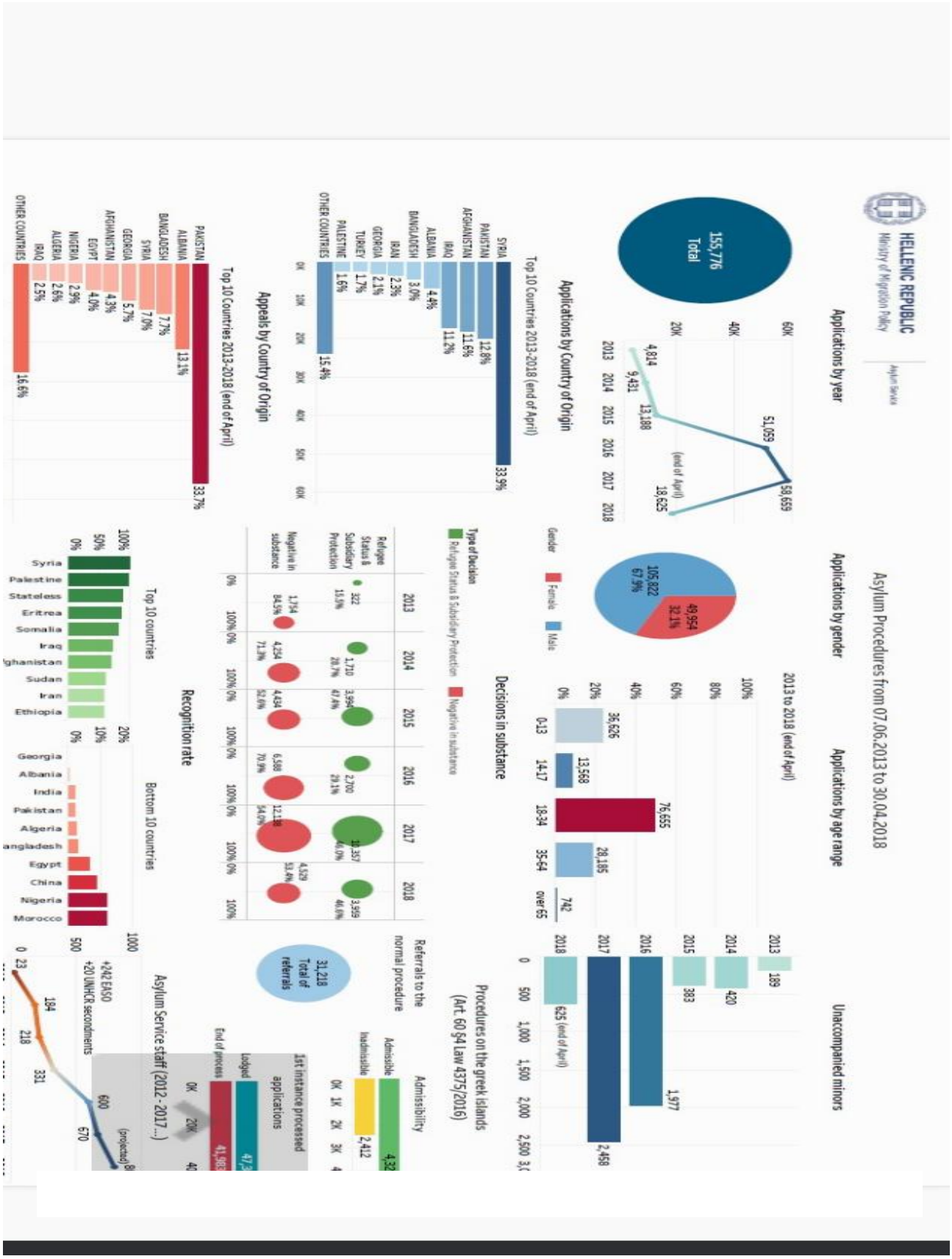
Nea Kavalla- Kilkis

Armatolou Kokkini – Veria

Koutsochero – Larissa

@Maria Liandri

ANNEX III: Asylum Service Statistics 2013-2018



ANNEX IV

PART B - Research