

## AMNESTY INTERNATIONAL PUBLIC STATEMENT

17 July 2020 EUR 25/2776/2020

# GREECE: ORGANISATIONS IN GREECE, LOCAL AND INTERNATIONAL HEALTH BODIES WARN: “DISCRIMINATION DOES NOT PROTECT AGAINST COVID-19”

Following the letter sent to the Greek authorities in early July, these organisations which work with refugees and immigrants in Greece would like to express their concern and opposition to the decision of the government to once again impose confinement measures on all the accommodation facilities for asylum-seekers in Greece, in the general context of preventing the emergence and spread of cases of the coronavirus COVID-19.

Although restrictions on free movement aimed at the protection of public health can be necessary and justified, these organisations argue that they should nevertheless be based on scientific evidence, and that they should not be imposed on the basis of arbitrary criteria which reflect social discrimination, considering the fact that restrictions on movement have been lifted for other residents of the country. Public health reasons can in no way be invoked in order to take measures restricting free movement for residents in the relevant accommodation facilities, as they would not be implemented on the basis of any scientific reasoning. In fact, in some cases the measures would violate the EU directive on the standards for the reception of applicants for international protection (2013/33 article 8 on detention).

In particular, as highlighted in communiqués and guidelines from international organisations, academia and civil society organisations - some of which are listed at the end of this statement - there is no evidence that isolating entire accommodation facilities or the applying restrictive measures on movement will actually affect the transmission of the virus in accommodation facilities for asylum-seekers and immigrants, or result in additional protective effects for the general population, other than those achieved by conventional containment and protection measures which apply to the population as a whole. Therefore, a sensible strategy for the prevention of the spreading of COVID-19 and the protection of the refugee population should focus on the improvement of precarious housing conditions, which make social distancing impossible in the overcrowded accommodation centres. To date, however, the efforts made to this effect have been insufficient. In fact, many organisations which work in centres where measures limiting free movement have been applied, have identified an increase in psychological pressure and stress which can lead to the general deterioration of the health of asylum-seekers. Moreover, movement restrictions impede asylum-seekers' access to vital services (medical, legal etc.) which are located outside of the camps where they reside.

According to the signatories of this statement, the government should rigorously evaluate any public health policies it adopts in light of the principles of necessity, proportionality and of respect with the principle of non-discrimination, and the government should refrain from keeping in place interim measures by making unreasonable appeals to pressing needs. Equally, measures should be implemented which actually protect the health of the refugee population and as a result the population of the country as whole, namely:

- Decongestion of overcrowded facilities
- Proper and flexible use of available EU funds for the improvement of living conditions with the utmost transparency
- Inclusion in primary health care of all immigrant populations, including un-registered asylum-seekers and those in “limbo”
- Secure the provision of water, disinfection, and health services (WASH)
- Distribution of personal hygiene items
- Provision of comprehensive and comprehensible information to refugee communities
- Promote the public understanding of public health issues, especially in relation to accommodation of the immigrant population.

There has to be a more general understanding that there can be no public health without the protection of the health of refugees and immigrants. The demonisation of the refugee population which has been observed lately - especially at a time when efforts should be made for their smooth integration into the social fabric and labour market of the country - does not defend the real interests of citizens and irreparably harms the democratic principles of the country.

## **WORLD HEALTH ORGANISATION**

“The right to COVID-19 preparedness, prevention and control for refugees and migrants should be exercised through non-discriminatory, child- and gender- sensitive comprehensive laws and national policies and practices. The health conditions experienced by refugees and migrants, including those with COVID-19 infections, should not be used as an excuse for imposing arbitrary restrictions, stigmatization, detention, deportation and other forms of discriminatory practices.” (Excerpt from WHO interim guidance, 17 April 2020).

## **EUROPEAN CENTRE FOR DISEASE PREVENTION AND CONTROL**

“Whilst there is no evidence to suggest that SARS-CoV-2 transmission is higher amongst migrants and refugees, environmental factors such as overcrowding in reception and detention centres may increase their exposure to the disease. Outbreaks in reception and detention centres can also spread quickly in the absence of adequate prevention measures.”

“There is no evidence that quarantining whole camps effectively limits transmission of SARS-CoV-2 in settings of reception and detention, or provides any additional protective effects for the general population, outside those that could be achieved by conventional containment and protection measures.” (Excerpts from Technical Report, 15 June 2020)

## **MÉDECINS SANS FRONTIÈRES**

“The extension of the measures restricting the movement of asylum-seekers who live in accommodation centres will further reduce their already limited access to basic services and medical care and, in the current phase of the COVID-19 epidemic, it cannot be justified from a public health perspective. So far, there have been no confirmed cases in any of the island reception facilities, a fact which means that their population is not a danger. On the contrary, it is in danger. This kind of discrimination stigmatises and marginalises refugees, asylum-seekers and immigrants, it is not justified from a public health perspective and it increases the vulnerability of this population in the face of the epidemic. Measures for public health should above all protect people, especially those in high-risk groups, such as the elderly and patients with chronic diseases. They should not trap them in overcrowded camps with limited access to water and toilets, where it is clearly impossible to implement prevention and protection measures for the COVID-19 virus. Médecins Sans Frontières continues to demand the transfer of people belonging to vulnerable groups (the elderly, people with chronic diseases) away from the reception centres to safe accommodation, where they can apply public health protection measures.”

## **MÉDECINS DU MONDE**

“Despite the widespread perception that there is a link between migrating populations and the introduction or spread of infectious diseases, there is no systematic correlation between the two. In “closed populations”, such as Reception and Identification Centres (RICs) or accommodation facilities, the virus can be transmitted very quickly relative to the rest of the population. This is due to concentration and bad health conditions and further highlights the need for decongestion and the transfer of those people to alternative forms of accommodation.”

## **ILIAS KONDILIS, ASSOCIATE PROFESSOR ΠΦΥ (PRIMARY HEALTH CARE) - PUBLIC HEALTH, AND ALEXIS BENOS, PROFESSOR OF HEALTH, SOCIAL AND ΠΦΥ - LABORATORY OF PRIMARY HEALTH CARE, GENERAL MEDICINE AND HEALTH SERVICES RESEARCH, FACULTY OF MEDICINE Α.Π.Θ (ARISTOTLE UNIVERSITY OF THESSALONIKI):**

“The ban on movement in reception centres and accommodation facilities for refugees, immigrants and asylum-seekers for a total of 125 days during the pandemic (the corresponding ban in the general population lasted 43 days) and its continuous extension without any scientific evidence is not an appropriate means for controlling the COVID-19 epidemic. On the contrary, it is a practice which inevitably increases the stigma, the marginalisation and isolation of those already heavily vulnerable refugee populations in our country, at the same time further increasing the risks of mass spread of the COVID-19 virus to those incarcerated populations. The fundamental means, on an individual level, for the prevention of COVID-19, remain the respect of hygiene rules and the observance of social distancing, by avoiding crowds. These basic rules of personal prevention are by nature impossible to comply with in RIC's, due to the living conditions. The removal of unjustified movement restrictions in RICs, or their decongestion and the immediate relocation of the more vulnerable refugees/immigrants to safe facilities in the community are the only scientifically proven policies to guard against COVID-19, both as concerns the protection of refugee/immigrant populations and the protection of the general population”.

## **DEMELZA HAURAT AND NOOR RIJNBERG, DOCTORS**

“Let’s try to imagine what will be the psychological state of someone who lives under confinement, together with 17.000 other people, in temperatures of 33 degrees, in camps like Moria, where tensions are already high. The limiting of free movement exacerbates psychological discomfort, despair and violence. We experience it everyday in our clinic where we record an increase in cases of panic disorder, sexual and domestic violence”

## **THE UNDERSIGNED ORGANISATIONS:**

1. Actionaid Hellas
2. Amnesty International
3. Are you Syrious?
4. ANTIGONE – Information and Documentation Centre on racism, ecology, peace and non-violence
5. ARSIS – Association for the Social Support of Youth
6. Babel Day Center
7. Symbiosis – School of Political Studies in Greece – affiliated to the Council of Europe
8. Defense for Children International – Greece
9. Doctors of the World Greece
10. Ecological Movement of Thessaloniki
11. Equal Rights Beyond Borders
12. Greek Helsinki Monitor
13. Greek Council for Refugees
14. Help Refugees
15. Hellenic League for Human Rights
16. HIAS Greece
17. HumanRights360
18. INTERSOS Hellas
19. Legal Centre Lesvos
20. MEDIN – Medical Intervention
21. Mobile Info Team Thessaloniki
22. Network for Children's Rights
23. Refugee Legal Support
24. SolidarityNow
25. Terre des hommes Hellas
26. Thalassa of Solidarity