



**UK APPG on Population, Development and
Reproductive Health study tour to Athens, Greece
3rd- 4th December 2016**



*Greece study tour delegation:
Baroness Northover, Baroness Tonge, Baroness Jenkin, Baroness Hodgson,
Lord Purvis, Baroness Uddin and Baroness Barker,
Acropolis, Athens, Greece*

Executive Summary

The UK All-Party Parliamentary Group on Population, Development and Reproductive Health (APPG on PDRH) organised a study tour to Athens, Greece 3rd- 4th December 2016, with a cross party UK parliament delegation. The delegation included: Baroness Jenny Tonge, Baroness Jenkin, Baroness Barker, Baroness Uddin, Baroness Northover, Baroness Hodgson and Lord Purvis.

The study tour was co-hosted by UNFPA with support from Merck & Co (MSD) Greece.

The aim of the study tour was to strengthen UK Parliamentarians knowledge of family planning (FP), sexual and reproductive health and rights (SRHR) service provisions in refugee settings and enhance the membership of the UK APPG on PDRH.



UK delegation at the Migrant and Refugee Accommodation facility (refugee camp) in Oenofyta

The UK delegation visited the Migrant and Refugee Accommodation facility (refugee camp) at the old Hellenic air-force base on the outskirts of Athens Saturday morning. At the camp, delegates noted the living conditions, met and spoke to refugees whom were mainly from Afghanistan and were briefed by the Doctors of the World Greece (MDM) staff on health service provisions in the camp.

In the afternoon delegates were briefed and met with a large group of organisations working and supporting refugees in camps in Greece.



UK delegation NGO briefing, Hydra Restaurant, Athens

Saturday evening the delegation visited Victoria Square in the center of Athens, where many refugees congregate. They also visited the Faros 'blue dot' center for women and children, an unaccompanied minors (boys) drop-in center and a hostel near the square where they had the opportunity to note and meet with staff supporting the vulnerable women and young boys living in and around the square.



UK delegation, Victoria Square, Athens



UK delegation, 'blue dot' center, Victoria Square, Athens

Sunday morning, delegates visited the Alexandra Central Government Hospital maternity unit, which was a referral hospital for refugees needing delivery and specialised health service provisions.



UK parliamentary delegation at the Alexandra Central Government Hospital, Athens

The UK parliamentary delegation wish to thank UNFPA, MDM and MSD and in particular Doina Bologa (UNFPA's Senior Emergency Coordinator for Greece) and Dr Emmanuel

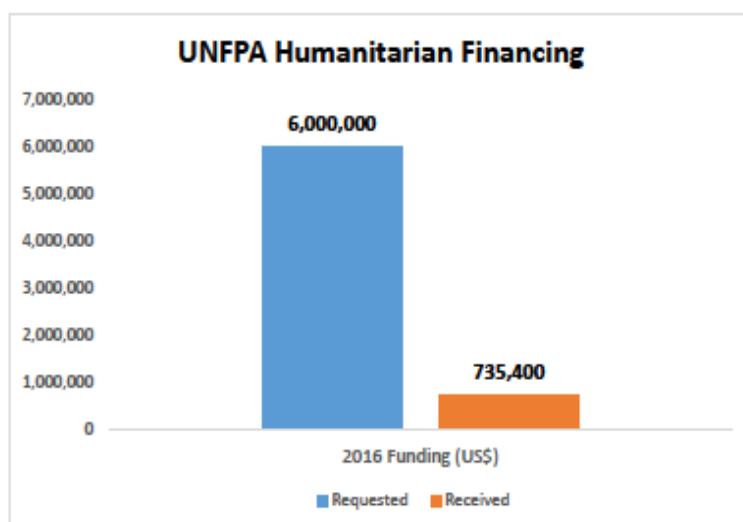
Alexandrakis (Associate Director, Policy & Communications for MSD Greece), for their generous support and organising the APPG on PDRH study tour in Greece, and Ann Mette Kjaerby (Parliamentary and Policy Advisor APPG on PDRH) for her advice and organisational skills.

Background:



A pregnant woman receives a check-up from a UNFPA-supported reproductive health clinic in Skaramagos refugee camp in Greece. Credit: Crystal Wells/IMC

Since the EU-Turkey Agreement in March 2016, over 60,000 refugees remain stranded in Greece. Over half are women and children, with women comprising 22% of new arrivals. Many women are pregnant, have infants or young children, or are traveling on their own. The lack of protection and promotion of women's health, safety, and rights is a major challenge for these women and a feature of the crisis. The level of security and service provision in the camps falls short of minimum international standards. Women are exposed to gender based violence (GBV), including domestic violence, sexual assault, and exploitation, and lack adequate access to sexual and reproductive health care. UNFPA focuses its efforts on providing sexual and reproductive health (SRH) services and protecting women and adolescents through the prevention and response to gender based violence.



61,000
Total People in Need

**Populations of
Concern**

7,000
**Women of
Reproductive Age**

2,440
Pregnant Women

2,480
Young People

US\$ 5.3 Million
2016 Funding Gap

US\$ 2.8 Million
2017 Requested

KEY RESULTS 2016*

HIGHLIGHTS



250

Individuals Reached with
Family Planning Services



100

Adolescents Reached
with SRH Services



28,300

Dignity Kits



5

Safe Spaces



66

Health Personnel Trained
on Reproductive Health
Kits - MISP

People Reached	
Total reached with SRH & GBV services in humanitarian settings	350
Adolescents reached with SRH services	100
Women and girls reached with GBV services, counseling, and information	25
Dignity Kits distributed	28,300
Individuals reached with Family Planning services	250

Services Delivered	
Mobile Clinics	1
Safe Spaces	5

Personnel Trained	
Health personnel trained on Reproductive Health Kits – Minimum Initial Service Package	66
Health personnel trained on Emergency Obstetric and Newborn Care	17
Health personnel trained on GBV Case Management	27
Youth facilitators and volunteers trained on SRH	10

Coordination		
Area of Coordination	National	Subnational
GBV Sub-Cluster Co-Lead	No	No
GBV Coordinator	Yes	Yes
SRH Coordinator	Yes	No
SRH Working Group	Yes	Yes

Targets 2017

With increased funding, UNFPA in Greece plans to reach upwards of 10,000 individuals with SRH and GBV services in 2017, including:

- 2,000 adolescents with SRH services
- 6,000 women and girls with GBV services, counseling, and information
- 2,300 individuals with family planning services

UNFPA also plans to distribute 30,000 Dignity Kits, provide a total of 15 Safe Spaces, and train 700 health personnel on Reproductive Health Kits, Emergency Obstetric Care, GBV Case Management, as well as 50 additional youth facilitators and volunteers.

*Data received as of October 2016

Doctors of the World intervention in refugee/migrant hosting facilities

MDM Greece offers Third Country Nationals access to free and qualitative healthcare when they arrive on the Aegean islands and mainland Greece, in accordance to their changing

needs and the islands newly created sites. The needs of refugees are covered by ensuring access to free first aid kits, and in some cases providing food, clothing, blankets and sleeping bags. MDM Greece's duties in all interventions, include:

- Medical examinations
- Provision of healthcare services and medicines
- Psychosocial support
- Identification of vulnerable groups
- Referral of vulnerable groups to social welfare bodies
- Distribution of first aid items
- Language interpretation

All sites consists of a doctor, a nurse, a midwife, a psychologist, a social worker and an interpreter. In parallel, dental and gynecological mobile units visit all the camps. A pediatrician may accompany the team if needed, providing: Lg essential needs.

Currently MDM intervene in 33 sites in Greece, including

Attica:

- Elliniko (I, II, III), Malakasa, Schisto, Lavrio, Nea Makri
- Evoia
- Ritsona
- Voiotia
- Oinofyta
- Fthiotida
- Thermopyles

Central Greece:

- Larissa (Kipselochori)
- Trikala (Atlantic)
- Volos

Central Macedonia:

- Diavata
- Lagkadikia
- Oreokastro
- Redestos (Vasilika)
- Hope Camp
- Serres

Eastern Macedonia:

- Kavala (Perigiali)

Epirus:

- Faneromeni (Ioannina)
- Katsikas (Ioannina)
- Konitsa
- Filippiada
- Tsepelovo (Ioannina)
- Doliana (Ioannina)

Peloponnese:

- Andravida- Myrsini

Chios:

- Souda

Lesvos:

- Moria
- Kara Tepe

Refugee camp at Oenofyta (ex Hellenic air-force base), Saturday 09:00 – 13:00

The Parliamentary delegation were met by Doina Bologa (Senior Emergency Coordinator for UNFPA Greece) and Dr Emmanuel Alexandrakis (Associate Director for Policy & Communications at MSD Greece) at the Divani Palace Acropolis Hotel.



UK delegation in hotel lobby being briefed on study tour, Divani Palace Acropolis Hotel, Athens

Delegates received a brief introduction to UNFPA's missions and MSD's 2-year Programme "Mother & Child", an initiative that is implemented by MDM Greece and funded by the "MSD for Mothers" Global Giving Programme. Its main objective is to support the health needs of women related to pregnancy and birth, ensuring safe deliveries and appropriate pre and post-natal healthcare of women and babies that need it.

The refugee situation in Greece and its challenges were discussed in that context.

The fact that the refugee crises coincided with Greece's own national crises was highlighted as a particular concern and migrants arriving into Greece originated from different countries with different cultures has also posed challenges.

Business interests were referenced, with Greece's tourism suffering major setbacks, with 70% less tourist visiting some of the islands, due to the negative publicity that the refugee situation and crises had triggered.

The final study tour programme was circulated, presented and discussed at the hotel prior to departure to the refugee camp.

Due to the sensitivity and security situation in the country and in the refugee camps, delegates visited one camp as opposed to the three planned camps. Parliamentarians were asked to split into two groups and when visiting the refugee camp at the old Hellenic air-force base, they were asked to refrain from taking photos of refugees in the facility. (Group 1: Baroness Jenny Tonge, Baroness Northover, Baroness Hodgson and Baroness Uddin; Group 2: Baroness Jenkin, Baroness Barker and Lord Purvis).



UK delegation at the refugee camp in Oenofyta

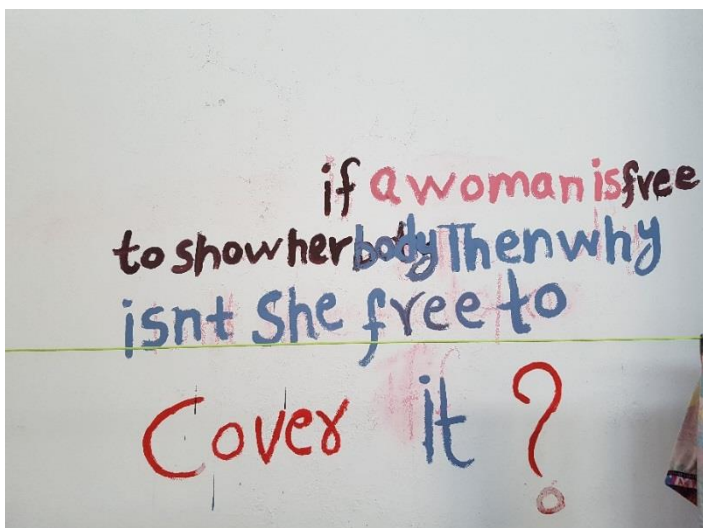
The site held 600 refugees, mainly economic migrants from Afghanistan, of which 80 were single men, 16 were minors and the rest were families.

Families and minors were accommodated in the large hangar building. The single men were in the erected white tents surrounding the hangar, but all within the gated old air-force base.



Refugee camp accommodation in the ex Hellenic air-force hangar

The family rooms in the large hangar had concrete walls, doors with curtains and were open towards the sealing. The rooms had mattresses and blankets and were approximately 3x4 meter square. Electricity was available and new heating installations appeared to be 'works in-progress'. A common room and wash rooms/toilets were noted, as was a large kitchen with gas cookers on the floor and a small prayer area at the back of the building.



Large bins were noted outside with some food wastage. A school building was seen in the corner of the site along with a volleyball court.

The two mobile health clinics were in the center of the camp, located immediately as one entered the camp and next to the hangar. Next to the clinics there was an Advent Help mobile home.



UK delegation outside the MDM Greece health clinic at Oenofyta refugee camp

Men and young boys were noted sitting outside their tents tapping on their mobile phones. Some women and young girls were waiting for medical consultations outside the mobile clinics.

The delegation was briefed upon arrival by the hosts and medical staff on the MSD project, and was subsequently escorted around the camps where they had the opportunity to ask questions.

MDM Greece, ensures medical services through their medical facilities in 33 refugee camps in Greece. “MSD for Mothers” supports their maternal healthcare services, through an innovative volunteer training programme and through their mobile health clinics throughout Greece.

The mobile clinics all function as primary health care centers for the refugees, but also offer a variety of psycho-social support to the most vulnerable migrants. They have a mix of volunteer doctors, -nurses, -social workers, -psychologists and administrators.

The mobile primary health care clinics are usually open Monday – Friday and closed at weekends, but the site staff had kindly agreed to be available to see clients and the parliamentary delegation this particular Saturday.



Paediatrician inside mobile consultation room, refugee camp in Oenofyta

The mobile clinics appeared well staffed, clean with some basic medical equipment and medication. Condoms and oral contraceptive pills were available, as were ante-natal check-ups along with elementary pregnancy medication. All ante-natal women were referred to the polyclinics and hospitals in Athens for deliveries. Other limited options of family planning methods were also available at these polyclinics. The most common ailments seen in this particular mobile clinic according to staff were: respiratory and skin problems, Hepatitis A and malaria. Insulin and heart medication were noted on the shelves along with various antibiotics and pain killers.

Buses were passing the camp gate twice a day into Athens center.

Some of the main challenges experienced by MDM Greece volunteers and staff included, difficulties in obtaining appropriate shelter, food and medication, as well as accommodating the mixed populations, getting translators, and supporting the young minors. Sexual exploitation remains of concern and a challenging problem in camps.

Hydra Restaurant briefing and meeting with FP/SRHR stakeholders working with refugees in Greece, 14:00 – 15:30



UK delegation in Hydra hotel lobby, Athens

The parliamentary delegation was briefed and met with a large group of stakeholders (approx. 30) working and supporting refugee's in Greece including representatives from: UK FCO, UNFPA, MSD, ActionAid, International Medical Corps (IMC), Oxfam, Women's Refugee's Commission, Hellenic CDC (KEELPNO), Faros NGO, MSF, Diotima NGO, UNHCR, and MDM.





UK delegation briefing with NGOs, Hydra Restaurant, Athens

Short programme overviews were presented by UNFPA, MDM Greece, MSD Greece, IMC (International Medical Corps), Oxfam and Faros prior to luncheon with discussions and networking.



UNFPA presentation, Hydra Restaurant, Athens

UNFPA highlighted the sexual and reproductive health needs and the problem of gender based violence in camps, including the problems of unaccompanied minors and their risk of sexual exploitation, trafficking and the support provided to pregnant women in the camps and in the Greek referral hospitals.



MDM Greece President of the BoD, Dr Nikitas Kanakis – presentation at Hydra Restaurant, Athens

MSD outlined their “MSD for Mothers”, a 500 million US\$ and 10 year programme. Together with the MDM Greece partnership, the programme supports maternal health and refugees along with other population and maternal health needs. The overarching goal of the project is to reduce maternal death rates and assure that every pregnant woman has quality healthcare.

IMC presented their latest research findings on urban refugees. Oxfam circulated a summary report of their activities and a call for actions on refugee and migrant women’s rights in Greece.

Faros, a local NGO, gave presentations with an overview of their work mainly with unaccompanied minor boys, which the parliamentary delegation would observe later in the afternoon/evening.

Faros work in Athens’ urban area with unaccompanied boys ranging from 12 and 17 years of age. They operate an emergency shelter for the boys to stay overnight and also a day center frequented mainly by mothers and their young children for support, indoor play, and daily showers. This day center also conducted workshops for the women and children, and the unaccompanied boys to improve language skills, update them on various processes relating to immigration and travel.



Baroness Jenny Tonge thanking organisations for their project presentations, Hydra Restaurant, Athens

Visit to Faros day center and shelter, Victoria Square, Athens, 16:00 – 19:00



UK delegation at Victoria Square, Athens

The UK delegation walked around Victoria Square in the center of Athens, and area frequented by many refugees. At the height of the refugee crisis two years ago, this particular square was swamped by migrants of all ages, living in rough conditions. In the evenings the majority of the people in the squares sell sex. In the daytime, the square sees women and their children from outlying camps visiting central Athens for shopping, information and workshops. The square had numerous currency exchange offices, which was the initial attraction and reason for migrants arriving/living at this particular square.



Faros children and family protection support hub 'blue dot' day center, Victoria Square, Athens

Delegates visited the Faros 'blue dot' day center near Victoria Square. It was a very welcoming day center, resembling UK 'sure start' centers with a reception for registration, large tables and chairs and some sofas for meetings.

A nice clean shower area was noted off the main room with toilets, along with washing machines. At the back of the main room was a lovely children's play area with toys and kids pictures on the walls.



Baroness Uddin, 'blue dot' main room, Athens

Staff highlighted the fact that the center had been opened at the height of the migration influx, serving as a rest and recuperation place for many women, their children and young unaccompanied minors. Help and advice with translation was available during the day to assist the refugees with any concerns they may have, including completion of legal papers, accommodation and communication with relatives in Europe. Workshops were held regularly on various topical issues including gender based violence and masculinity, other SRHR topics and psychosocial problems.

Medical help was also available in a small clinic attached to the 'blue dot' center.

A discussions followed the site visit to give delegates an opportunity to discuss any specific questions including nationalities frequenting the center and reason for migration, length of visits and stays in Greece, main migrant concerns and funding for the project.

The delegation then walked to Faros shelter/day care for unaccompanied minors (boys).



UK delegation in one of the main rooms, Faros shelter, Athens

Fortunately for the boys, but unfortunately for the delegates, all the young boys were out visiting a park with a staff member. Two other staff were present to answer questions. Delegates had the opportunity to look around the shelter and obtain a good impression of the project.

Faros had been fortunate to rent this old and very large and beautiful house in the center of Athens for a reasonable price from an old Greek man to provide day services and a small shelter. The building had many large rooms for daily activities and rooms with 4 bunk beds in each room. In total it can accommodate approximately 20 young boys per night. It had large communal areas with tables and chairs, a table tennis table and working area. It also had a large kitchen and nice wash and toilet facilities.

The boys in the shelter were usually found at Victoria Square selling sex for survival, and taken in to the shelter to help them revert to a better life. The shelter was clean and appeared very well run and organised. Support was given to all the young boys residing there, some only for a few days and others for many months. Some were helped to contact relatives in Europe and travel to their originally intended destinations. Others were helped with languages and others needed support with confidence and life skills.

Alexandra Central Government Hospital, Athens, Sunday 10:00 – 12:30:

The delegation visited the Government Alexandra Hospital, which was a general public health hospital with maternity/obstetric services.



UK delegation outside Alexandra General Hospital, Athens

The delegation was met by the Hospital Manager, Dr Dimitrios Vezirakis, Dr Evelina Pappa, Deputy Hospital Manager, Alexandra Hospital and Permanthia Panani, Head Midwife upon arrival and escorted to the delivery suite.





UK delegation in the labour ward, Alexandra General Hospital, Athens

The obstetrician presented a short overview of the hospital obstetric and maternity service provisions. Delegates had to opportunity to ask questions and speak with staff.



UK delegation on the labour ward, Alexandra General Hospital, Athens

The hospital was a general public hospital for the Greek population as well as a referral and maternity hospital for migrants.

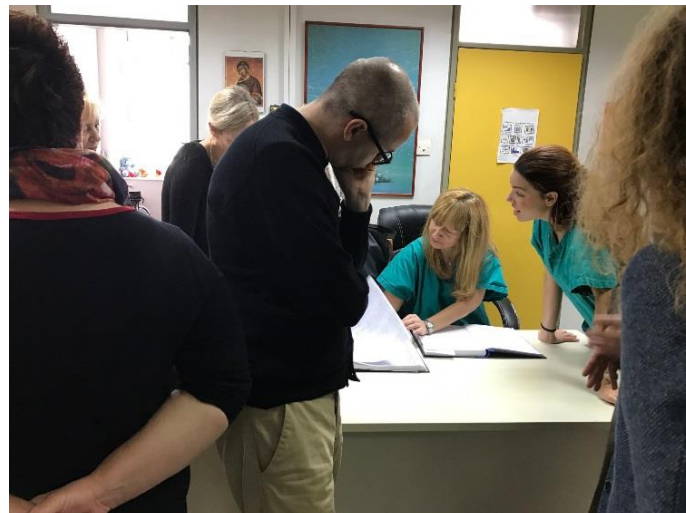
The hospital looked and appeared similar to a UK London general hospital. The midwifery staff would triage women arriving in labour and look after them during birth. Obstetricians would only be involved if concerns arose.



A labour room, Alexandra General Hospital, Athens

Women in labour would be in single bed rooms with closed doors. CTG monitors and neonatal resuscitaires were available in all labour rooms and an operating theatre was across the way. All the usual obstetric/maternity drugs were available. The hospital saw around 3500 births per year.





UK delegation speaking with staff, Alexandra General Hospital, Athens

The hospital birth register showed a mix of Greek women and migrants delivering at the hospital, with the majority of young girls being Greek travelers. Most migrants originating from Afghanistan and a few from Syria. The Lower Caesarian Section Rate appeared very high, but according to staff this was due to the fact that it was a referral hospital.



This is a photograph of an ancient Greek bas-relief on the wall of the reception area of the Maternity Wing



This is a photograph that shows a woman in labour with her attendants which was on the wall on the Maternity ward.



UK delegation speaking to on-call obstetrician, Alexandra General Hospital, Athens

A separate postnatal ward was also visited and delegates spoke with staff and the matron. It was noted that one midwife was in charge of one ward accommodating 16-20 post-natal women and babies, but no babies were heard crying. All staff's notes were on paper as opposed to being digital.



UK delegation with matron of the postnatal ward, Alexandra General Hospital, Athens

Midwifery staff as well as the obstetrician were unhappy about the shortage of staff and the low salaries. Grave concerns were also expressed with regards to the huge influx of refugees overloading the Greek healthcare and education system, as well as the lack of coordinated EU support and sharing of responsibilities with regards to housing and supporting the migrants within Europe.

A government obstetrician's monthly salary is around US\$2000 and the most senior midwife manager receives US\$ 1200 per month (qualified and worked in this hospital for 20 years). The majority of midwifery staff would earn around US\$800 per month.

Interestingly follow up discussions with the public revealed that the majority of Greek women would see GPs privately and receive a private maternity/obstetric package for around US\$4000-US\$5000. Few lower and middle income families would visit public hospitals for maternity care.

Summary highlights and comments were:

The aim of the UK APPG on PDRH study tour to introduce and deepen UK Parliamentarian's knowledge on Family Planning and SRHR service provisions for refugees in Greece, had been accomplished.

Over the weekend, delegates visited the Migrant and Refugee Accommodation facility in Oenofyta on the outskirts of Athens, they visited Faros' day center and shelter in Victoria

Square, and they also visited the Government's central Alexandra hospital and its maternity unit.

Delegates also met with family planning/SRHR stakeholders working with refugees in Greece, who presented their projects and challenges experienced in country.

The refugee camp appeared organised and well managed. The mobile health clinics were clean and offered refugees in the camp basic health services with good referral networks to polyclinics and Government central hospitals.

The Faros project was exemplary with regards to the provision of support including shelter and psychosocial support to women migrants and their children, as well as unaccompanied boys between the age of 12 and 16.

The Alexandra maternity hospital in central Athens provided good maternity care for both Greek and refugee women. Interestingly the majority of the young girls delivering at the hospital were Greek travelers.

Concerns were raised with regards to the huge workload and underpay of Greek government health workers with the combined national and refugee crises.

The mixing of migrants from different countries and cultures was challenging in many camps. The service providers highlighted communication difficulties due to language and cultural barriers.

Many organisations were extremely unhappy about the lack of proportional sharing amongst European countries, with regards to hosting, accommodating and supporting refugees arriving in Greece.

The issue of financial support to projects and refugees having been in Greece more than one year, was of particular concern to many organisations.

The delegation commended organisations for their work in Greece and efforts to support refugees.

Individual parliamentarians said:

Baroness Jenny Tonge: *"I was concerned about the huge extra strain this refugee crisis has put upon the Greek health and social services which are already very short of resources because of the economic crisis in Greece."*

Baroness Jenkin said: *"I was shocked and saddened to see for myself the poverty in Athens itself, but at the same time heartened by their tremendous generosity and humanity towards the refugees. The Greek people deserve our support."*

Baroness Northover said: *"It is clear that these camps are not a long term solution either for the refugees or for Greece, and that further European and wider international action will be required. It is vital that young people being cared for in the centre of Athens do not become a lost generation. Women and girls' especial vulnerability was illustrated when meeting a woman in the maternity unit who had spent the last six months travelling across Africa"*

pregnant and alone. I am very grateful to all who contributed so much to informing us about the challenges faced, and the actions being taken to address those challenges.”

Baroness Hodgson said: *“I am very grateful to European Parliamentary Forum on Population and Development, UNFPA and MSD for enabling our visit which gave us an insight into the enormous challenges faced by refugees and Greece at this difficult time.”*

Baroness Barker said: *“The economic situation in Greece is devastating, as is the 70% unemployment rate amongst young people. In light of that, the Greek people have coped remarkably well, with an influx of people fleeing destruction and despair. The Faros day centre we visited was exemplary with its practical support to women who lack access to basic, safe hygiene facilities – lavatories and showers. When we were in Athens the weather was nice, however recently temperatures have been as low as -14 and -18, and people are living in tents. The Greek nation needs ongoing systematic support from international donors – including the UK and USA.”*

Baroness Uddin said: *“Greece’s efforts is to be applauded, albeit it was a brief glimpse into the intricacy of managing refugee families under strenuous circumstance. Seeing the actual camp condition and meeting the staff from MDM, UNFPA, British Embassy and the NGOs gave a more insightful depth to the study tour and afforded us greater understanding of the huge complexities and determinations required to provide a comprehensive response to the needs of families who flee wars, conflict and hope.”*

Lord Purvis said: *“Seeing first-hand the difficulties facing the Greek authorities, already suffering under considerable financial pressures, to manage the crisis was extremely useful. The result is that the provision of services to some of the most vulnerable girls and women relies much on the NGO community and goodwill of individual health staff. The lack of a rigorous electronic system of records and monitoring of pregnant women and young women refugees continues to be a concern and the ongoing vulnerability of young boys should be an issue of very major concern to the UK and EU governments. I was grateful to have the opportunity to see for myself the situation and it has informed my work in Parliament.”*

Conclusion and Acknowledgment

Participants felt the Greece APPG on PDRH study tour was informative, educational and successful in stimulating plans to engage in FP/SRHR parliamentary advocacy to further the International Conference on Population and Development Programme of Action and its integration in the Sustainable Development Goals agenda.

Delegates will promote and encourage continued ODA to refugees in Greece and elsewhere via questions and debates in the UK Parliament, as UK AID appears necessary to further improve women and girl’s health and situation in camps.

Delegates expressed their gratitude to the European Parliamentary Forum on Population and Development for its financial support to the study tour and UNFPA and MSD for agreeing to co-host the study tour. Delegates also thanked Faros for showcasing their ‘blue

dot' and day center and shelter projects and the Greek Government Alexandra Hospital and staff for accommodating the visit to their maternity unit on a Sunday morning.

A particular thank you to Doina Bologa (Senior Emergency Coordinator for UNFPA Greece) and Dr. Emmanuel Alexandrakis (Associate Director for Policy & Communications at MSD, Greece) for all their hard work on making it a successful study tour, and Ann Mette Kjaerby (Parliamentary and Policy Advisor APPG on PDRH) for her advice and organisational skills.