

INTRODUCTION

The Associazione Comunità Papa Giovanni XXIII (APG23) is a catholic international association founded in Italy.¹ The Association has Special Consultative Status with the United Nations Economic and Social Council (ECOSOC)². The presence of APG23 in Greece, dates back to 2011. In 2014 it opened a permanent home family in Athens for the assistance of refugees and Greek families in poverty. Volunteers of APG23 Civil Service carry out activities for homeless people of Neos Kosmos; the street teams have also carried out monitoring in the refugee camps of Eleonas and Malakasa³. Since 2019, APG23 is periodically present on the island of Lesbos. The information provided in this document are from APG23 members and volunteers, direct interviews, discussions with stakeholders in the field, monitoring activities and from public documents. In the last four years, we have welcomed 100 people; in 2020, we have been able to help and support 135 migrants and we have contacted about 150 people on the street. (See: ANNEX I and ANNEX II)

1.MIGRANTS

FOCUS ON: Recommendations n.134.124 up to 134.154⁴

1.1 Sources

Greece's chronic asylum failures go back many years: extreme limitation of access to the system, a significant backlog in processing applications, the lowest refugee recognition rate in the EU, and poor reception conditions. Between 2015 and early 2016, more than 1 million refugees and migrants had come to Greece mainly from Syria, but also from Afghanistan, Iraq, and Pakistan (UNHCR, 2016: 3).

The EU-Turkey agreement of March 18, 2016, was then the result of a complex framework of cooperation between the EU and Turkey: the number of entries from Turkey to Greece, as a result of this agreement, was drastically reduced through the land and naval blockade operated by the Turkish government. The agreement led to the establishment and expansion on Greek islands (Moria in Lesbos the largest) of a number of hotspots (identification centres). This already critical situation changed, however, on February 27, 2020, when Turkish President Erdoğan announced that he had opened the country's borders to migrants intending to reach Europe. The news of the border opening mainly affected the 3.6 million migrants already living in Turkey, which since late 2016 acted as a cap for people trying to get to Europe mainly from the Middle East.

For several days, a part of the migrants clashed with Greek policemen and soldiers deployed to defend the border, even in a violent manner: tear gas - which also hit children - and various bullets were thrown at the migrants. In conjunction with these events, the Greek Prime Minister suspended the examination of asylum requests invoking paragraph 3 of article 78 of the Treaty on the Functioning of the European Union which, however, if it justified the EU relocation, did not justify the suspension of applications. Greece subsequently cancelled the controversial stop on asylum requests adopted in March.

As of mid-June 2020, some 229 unaccompanied migrant minors were being detained in Greece, while in all hotspots on the islands some 38,000 migrants were being held in inhumane conditions and in the midst of a pandemic, in spaces built to house fewer than 6,200. On September 8, 2020 the migrant camp of Moria (Lesbos), in which 12,700 migrants were crowded, was destroyed by a series of fires and the government declared a state of emergency. A tragedy foretold of what more than a hotspot was defined by many as an open-air prison where thousands of refugees found themselves without shelter and in dramatic conditions.

1.2 Legal framework

¹The Community is present in 40 countries of the five continents. Its activities in the world of poverty and marginalization brought to the direct sharing of the life with the poor in 1973 when the first family-home was opened. See: www.apg23.org

²Its commitment at the UN is the result of sharing the life with the poor and is the fruit of the international elaboration and synthesis of the action for the removal of the root causes which create injustice.

³ These are located not far from Athens

⁴ Referal document A/HRC/33/7 Human Rights Council Thirty-third session Agenda item 6 Universal periodic review- Report of the Working Group on the Universal Periodic Review* Greece

Following the agreements with Turkey, Greece had quickly adopted a law amending the organization of asylum and migration institutions and the asylum procedure, L 4375/2016", which effectively introduced the restriction of freedom of movement within Reception and Identification Centres placed in border locations on the Eastern Aegean islands and in the Evros region. This law has undergone further reforms. The Parliament passed a controversial new law on the right to asylum, which allowed for the speeding up of the procedure for assessing applications L 4636/2019 harshly criticized by national and international human rights bodies including the Greek Ombudsman, the Greek National Commission for Human Rights (GNCHR), and civil society organizations, for lowering the standards of protection and creating unjustified procedural and substantive obstacles for people seeking international protection.

In May 2020, a series of further amendments were also made by L 4686/2020. These amendments were significant and further censured as further weakening of basic guarantees for persons in need of protection. It established the dismantling of reception and identification centres and the creation of new closed identification centres, located not only on the islands but also on the Greek mainland, increased time of confinement, reducing for recognized refugees the grace period to vacate care housing and organize independently, from six months to 30 days. So many people were put on the street. Most of the refugees affected by this latest rule had no regular income, they were families with school-age children, single parents, survivors of violence, and others with many vulnerabilities.

The ongoing COVID-19 pandemic and measures to reduce its spread have created additional crises and challenges, further limiting migrants' freedom of movement and ability to find work or housing. The new asylum law looks more like a defensive and punitive strategy than a long-term plan.

1.3 Concerns

The implementation of the 2016 EU-Turkey declaration and subsequent implementation in various Greek laws and practices have turned the islands into one of the worst human rights disasters in Europe. The situation created by the entrapment of asylum seekers in camps has laid the groundwork for increasingly severe restrictions on their rights. In these hotspots, there are severe and chronic shortages of doctors and professionals for identification and assistance. Shortened timeframes for new arrivals, lengthened timeframes for others, and repatriations are at the heart of this failed strategy. Priority was given to registering and processing the applications of those who arrived in Greece in 2020 and were often completed within days of arrival, denying the opportunity to prepare or even understand the extremely complicated procedures.

Asylum seekers who arrived before January 2020 were effectively left in limbo, forced to reside for increasingly extended periods on the islands. Their asylum interviews have been repeatedly postponed. It is more difficult to qualify as vulnerable and therefore have access to special and more protective procedures. Those suffering from Post-Traumatic Disorders, for example, are no longer considered as such. Furthermore, torture certifications can only be certified by staff of public hospitals and no longer by specialized members of NGOs. Members of the police and the army can conduct interviews for the recognition of asylum status, however, in most cases they do not have adequate training in this area.

In September 2020, more than 700 people - particularly vulnerable people, including single or pregnant women, disabled and elderly people - were relocated from Lesbos to mainland Greece with the aim of alleviating the presence of asylum seekers and migrants on the island, but about 7,700 displaced people from Moria remained on Lesbos Island, now housed in the temporary camp of Kara Tepe, hastily (and poorly) pulled up after the fires. Despite the fact that the coronavirus is circulating there too, there is no connection to the municipal water supply and migrants are without running water. Access to the new camps is strictly regularized and only the associations enrolled in a special register held by the Ministry of Immigration and Asylum can possibly access them. In fact, access is then conditioned to government directives with little possibility of independence.

Lately, further norms have been introduced that require the associations present in the camps to share with the Ministry of Immigration all information on the people to whom services are provided. In this way, all regulations regarding privacy and professional secrecy are ignored. The migrants are confined and with no possibility of exit except with complicated police authorizations. Masks have been distributed against the virus, but everything else is lacking: after months spent in the unhealthy camp of Moria, no one would have

expected to live in even worse conditions. The recent winter rains have seen rivers of water pouring into the tents of the camps on the islands, making the situation even more unliveable. A true humanitarian tragedy is still unfolding.

1.4 Recommendations:

- Ensure that the human rights of all migrants, asylum seekers and refugees are the basis and primary concern of all negotiations in Europe and with third countries.
- Develop new clear and simplified procedural and legislative safeguards to protect human rights and ensure that seriously vulnerable and endangered persons are provided with adequate accommodation.
- Establishment of an independent authority to monitor and collect accurate data on border and immigration issues.
- Increased staffing of relevant Greek authorities under the Ministry of Immigration Policy.
- Guarantee free access to legal assistance/support - early legal advice, preferably through personal contact with appointed social workers and lawyers.
- Promote viable alternatives to detention and administrative confinement by developing open reception, adequate infrastructure, for migrants, asylum seekers, and beneficiaries of international protection.
- Ensure that procedural safeguards, including access to legal representation and legal aid, in decisions regarding any deprivation of liberty are fully implemented.
- Ensure the non-detention of vulnerable groups, including children, in line with the guidance of the UN Committee on the Rights of the Child.
- Establish measures for better identification of migrants with special needs, including children, with referral to appropriate services.
- Ensure relevant, appropriate and increased use of interpretation.
- Guarantee foster collaboration between relevant government services and non-governmental actors, ensuring support of technical and organizational requirements by ensuring access to NGOs in the camps
- Strongly promote in every way the opening of humanitarian corridors to other European countries with private sponsorship

2. CHILDREN RIGHTS

FOCUS ON: Recommendations N.134.11 up to N.134.20

1.1 Sources

Greece has ratified the UN-CRPD and adopted a reform of the general system with various regulations and ministerial indications in particular co-education programs between ordinary and special schools (paragraph 3a, article 82, Law 4368/2016), which aim to raise awareness and eliminate the gap between ordinary and special schools. Regarding the reception and protection of unaccompanied foreign minors (MISNAs), the "No Child Alone" strategy was adopted in 2019 and a Special Secretary for the Protection of MISNAs was appointed in the year 2020 (Ministry of Migration and Asylum). A very weak increase in housing capacity for MISNAs and significant efforts to implement the protection system provided by Law 4554/2018 were noted.

2.2. Concerns

Despite positive steps, a sharp increase in "protective custody" of MISNA at police stations and in "pre-departure detention centres", confusing and disparate practices for age assessment, over 1,200 migrant children without housing or living in insecure conditions, and significant delays in the access of migrant children to the Asylum Service are observed. The situation of minors in the camps on the Greek islands is

desperate and extremely serious, in particular for those with disabilities. In general, the management of MISNA is very poor; in fact, in many cases a guardian is not appointed and adequate protection is not guaranteed, leaving many minors in a state of abandonment on the streets. There is also a widespread practice of registering asylum-seeking children as of age and even in cases of uncertainty about age they are often not given the opportunity to conduct relevant and probative clinical examinations. Most children living in refugee camps do not have access to education.

With regard to children in general while the principles of inclusive education have been further strengthened and a number of relevant measures and initiatives have been taken, there is no reliable data on the actual impact on both home-based and residential and other support services, including personal care; it is not possible to assess whether there has been an effective deinstitutionalization of persons with disabilities, including for the support of independent living and community inclusion. There is a lack of more precise data on the number of people with disabilities, particularly children with disabilities and still living in institutions. Foster care and adoption, though present in legislation, are poorly implemented.

2.3 Recommendations

- Adopt urgent measures for the prevention and cessation of all violations of the rights of migrant children in administrative confinement camps, in any other asylum and reception procedure, and any other practice contrary to the CPRD and CRC
- Strengthen the process of deinstitutionalization of children with disabilities take effective measures to ensure their right to be cared for by their parents, extended family, secure foster or adoptive family.
- Provide quality early intervention for children with disabilities, as well as other health and educational services, in all urban and rural areas in close consultation with children with disabilities and their parents, through their representative organizations, and their active involvement;
- Provide in the national strategy and action plan for the development of services in the community that support families and children to prevent the institutionalization of children and their separation from families.
- Introduce quality standards based on internationally recognized guidelines for the protection of children and young people with disabilities with the design of individualized plans for independent living support.
- Promote and encourage the collection of timely and accessible national data on disability.
- Take the necessary measures to ensure the removal of architectural barriers and accessibility to public goods and services, particularly the transportation system in urban and rural areas.

3. RIGHTS TO HEALTH - DRUG ADDICTION

FOCUS ON: International Covenant on Economic, Social and Cultural Rights, art. 12.⁵

3.1 Sources

The crisis of 2009 was not only an economic but also a social drama. The Greek population has become impoverished and the number of homeless has increased dramatically. This has caused a sharp increase in psychiatric pathologies and the abuse of legal and illegal substances. This context was compounded a few years later by the migration crisis. Individuals often in extreme living conditions, in loneliness and distance from family, have developed drug addictions.

In Greece, Law 4139/2013 regulates drug-related offenses and aiming to reduce the spread of drugs. At the same time a "National Strategic Plan" 2014 - 2020 has been drafted⁶ and dictates the guidelines to be followed to deal with the problem of addiction in the state territory. This plan is inspired by the "Action Plan on Drugs" of the European Union for 2013-2016. The Ministry of Health drafted in 2018 the document "Strategic Priorities in Response to Substance Dependence", containing prevention and treatment policies.

⁵ For the definition of the right to health [General Comment No. 14](#) of the Committee on Economic, Social and Cultural Rights. And Declaration of Alma-Ata, International Conference on Primary Health Care (1978) - Resolutions 2002/31 and 2003/28 on the right of everyone to the enjoyment of the highest attainable standard of physical and mental health

⁶ Although not officially approved by the parliament

The drug addiction treatment system is provided by public entities or private law companies, almost all of which are funded in whole or in part by the government. The main treatment modalities available are psychosocial interventions and opioid substitution treatment (OST), which are mostly provided on an outpatient basis. Treatment with methadone or buprenorphine, however, is the most frequently offered treatment option and is currently available in most Greek cities. The Organization Against Drugs (OKANA) is the only organization with legal permission to establish, operate, and monitor OST programs.

3.2 Concerns

While there are many predictions on paper, the actual system struggles to provide answers. Law enforcement officers only clear certain areas, resulting in the occupation by drug dealers and users of other areas of the city; moreover, police officers often exert their force on individuals who are unable to defend themselves. Even the right to medical care is not properly protected, since in practice, those who seek health services are often ignored because of their drug addiction. Often the catchment area is limited and there are some particularly marginalized groups who do not have the effective possibility to enjoy services. Moreover, places in therapeutic communities are very limited and, in most cases, admission occurs when the gradual reduction of substitution drugs (such as methadone) has already been completed. The IOM had also implemented the REFRAM program to support refugees through both preventive and treatment actions, but the difficulty in following a treatment pathway in contexts such as refugee camps made it scarcely effective.

3.3 Recommendations

- Adopt every measure to guarantee effective access to therapeutic facilities
- Ensuring that therapeutic paths are new ways of experiencing human relationships, respecting the authentic identity of recovery from drug addiction and avoiding the mere medical approach that distorts its therapeutic value.
- Promote treatment for pathological addiction, understood as care for the individual in all its aspects, flexible with the personalization of interventions.
- Encourage placement in residential and semi-residential settings as an alternative to the classic medical facilities as the treatment pathways evolve; for example, family homes, low-threshold centres, day care centres for the disabled, etc., with the necessary definition of economic support methods.

We would like also to recommend to ensure the effective implementation of UPR recommendations through the establishment **of a permanent governmental mechanism** to liaise with relevant ministries and consult with civil society, National Human Rights Institutions (NHRIs) and all relevant stakeholders.