

European Court of Human Rights recognises Greek authorities' persistent disregard for migrants' health and lives in Mavrovouni camp

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Wheelchairs outside of a tent in the "Blue Zone" of Mavrovouni camp, where persons with physical disabilities are hosted in tents shared among 8 persons. Photo by a resident of the camp.

Since June 2021, the Legal Centre Lesbos (LCL) has submitted eight applications for interim measures to the European Court of Human Rights (ECtHR) **requesting the urgent transfer of nine individuals and their families out of Mavrovouni hotspot camp** into safer accommodation and their immediate access to urgently needed health care on mainland Greece.*

In seven of these cases, the ECtHR **granted an interim measure within 48 hours of submission**, instructing Greece to fulfill its obligations under the European Convention on Human Rights (ECHR) and ensure that the applicants' living conditions be compatible with Article 3 ECHR, the prohibition on torture, inhuman and degrading treatment, having regard to their state of health, and to provide them with adequate healthcare. In response to the eighth case, the Court ultimately refused the interim measure, as Greece scheduled the individual's transfer to Athens while the case was pending.

These seven successful applications for interim measures follow an **earlier set of three granted applications** submitted by LCL in March 2021. They constitute **another damning indictment on the immiserating reception conditions imposed on migrants effectively contained in the EU hotspot of Lesbos** and a reiterated recognition by the ECtHR that **people with severe health situations left in Mavrovouni camp for months without attention are at imminent risk of irreparable harm.**

CASES FOR WHICH INTERIM MEASURES WERE GRANTED BY THE EUROPEAN COURT OF HUMAN RIGHTS

The following persons were all granted interim measures by the European Court of Human Rights, on the grounds that the Greek authorities' persistent denial of their access to adequate healthcare and their living conditions put them at imminent risk of irreparable harm:

- A young woman who suffers from severe, frequent and treatment-resistant epileptic seizures as a result of a major head trauma following an airstrike and had been **living for 21 months first in Moria and then in Mavrovouni camps**, during which time her health deteriorated to the extent that she became wholly dependent on the care of her brother.
- A heavily pregnant woman at that time who suffers from a degenerative condition in her shoulders, chronic asthma and, owing to her living conditions, inflammation and a lung infection. She and her family **were forced to reside in Moria and then Mavrovouni camp for the past 17 months.**
- A four year old child who suffers from severe epilepsy (the result of various head traumas), plagiocephaly (also known as flat head syndrome) and undiagnosed developmental and neurological complexities. She and her family were **confined to Lesbos for 16 months.**
- A woman who suffers from a lump in her breast, for which she received no proper diagnosis or treatment on Lesbos, resulting in inflammation and severe pain. Her daughter suffers from arteriovenous dysplasia of the spinal cord, resulting in acute mobility issues. Together with their relatives, both the mother and the daughter were **held in quarantine for two months upon arrival and after that spent around 10 months in Mavrovouni camp.**
- A seven months pregnant woman who is into a high risk pregnancy with a history of premature and traumatic embryo births and was already forced to **spend 12 months in Mavrovouni camp** with her family. She suffers from acute psychological issues and her young son also suffers from psychological issues in addition to seizures, severe sleep disturbances and psychosomatic symptoms of anxiety.

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– A man who suffers from several chronic conditions as a result of airstrike and gunshot injuries, in addition to other illnesses, including rectal bleeding, haemorrhoids, abdominal pain and bladder stones. He and his family **have been in Lesvos for 20 months**. His minor son also suffers from severe medical issues including ‘attacks’ during which he experiences seizures, loses his vision and hearing, and falls down. The Court refused the interim measure regarding the son, while granting that of his father.

– A man who suffers from Hepatitis B, a potentially life-threatening condition for which he has received no treatment on Lesvos. He experiences severe symptoms and is at heightened risk of severe illness from the COVID-19 virus. Nevertheless, **he spent the past 19 months in Moria and then Mavrovouni camp**.

As with the previous set of interim measure applications, LCL’s decision to seek redress before the ECtHR followed **months of inaction by the Greek authorities and fruitless communication with the United Nations High Commissioner for Refugees (UNHCR), the Head of Mavrovouni Reception and Identification Centre (RIC), and the Vulnerability Focal Point (VFP) of the RIC** – all of whom are responsible for the identification and transfer of people with vulnerabilities and specific medical needs as provided under Greek law.

– In all of the thirteen interim measure applications filed by LCL before the ECtHR in 2021, the Greek authorities **knew or should have known of the applicants’ urgent medical needs and situation** since their first medical screening upon arrival to Greece by the National Public Health Organisation in charge, EODY, or, at the latest after the applicants’ explicit referrals to the VFP of the RIC, or their official diagnosis and referral for urgent medical treatment or transfer to the mainland by Greek public health institutions.

– In eleven of those cases, **the individuals had expressly been referred by Greek public health institutions for urgent medical treatment on mainland Greece**, given the lack of adapted medical care available in Lesvos island. And ten of these applicants had been waiting for **more than six months** since their first urgent referral to a specialised hospital in Athens (including for twelve months in one case, and for over eighteen months in another case). One applicant’s colon cancer diagnosis had been recognised by the Greek National Public Health Organisation (EODY) **nineteen months** prior to his application before the ECtHR. Ultimately he was in fact transferred to Athens but without his carers upon whom he depends entirely.

– In nine of the thirteen cases, the individuals LCL represented **had already had their geographical restrictions lifted in recognition of their vulnerabilities** – meaning they had the right to leave the island of Lesvos – but the Greek authorities had failed to transfer them, resulting in many people having to self-finance the trip and arrange their own accommodation upon arrival to the mainland, which many people did not have the financial means to do. In many cases, the Greek authorities justified their failure by stating that the vulnerable persons in question had, in the meantime, received a negative asylum decision and were therefore no longer considered asylum seekers who were eligible for health care and housing provided by the Greek state.

This cruel and unfair policy prioritises immigration control and containment of migrants over all else, irrespective of the severity of people’s medical conditions. It also **ignores the fact that a person’s right to health and life are fundamental rights that must be guaranteed for all, regardless of legal status**.

The swiftness with which some of the “successful” applicants were transferred out of Mavrovouni camp demonstrates that **Greece’s persistent failure to ensure access to urgent, necessary and appropriate medical treatment** for migrants in need is more from lack of political will than lack of capacity.

However **the fulfilment of those transfers is not sufficient**: out of the “successful” cases granted by the ECtHR, only a few have in fact been given access to a safe accommodation and were supported in accessing health care once on the Greek mainland. **Most of them are either still waiting in Lesvos or were transferred by the Greek authorities but again forced to live in camps on the Greek mainland without specific reception conditions or medical attention**.

In particular, out of the ten successful applications filed by LCL this year, **four applicants are still awaiting transfer in Lesvos or had to leave the island on their own, whereas six were officially transferred or are scheduled to be transferred out of Mavrovouni camp with their close relatives by the Greek authorities**.

Out of those six cases, only three have been accommodated in non-camp spaces in Athens, and only one has obtained all of the medical examinations or treatment that they all so urgently require. One was then threatened with eviction from his new accommodation, without legal basis.

Since filing this latest set of interim measure applications, LCL observed a shift in the Greek authorities’ policy who have now started allowing individuals with severe medical conditions to leave the island, by their own means, when those individuals are able to show medical documentation recommending treatment unavailable on Lesvos and to obtain permission to leave the island from the Greek police – regardless of their legal status.

Although this **unofficial decongestion of Mavrovouni camp** is an improvement, it however is not being applied in a consistent manner, with many still denied permission to leave the island despite being issued with medical documents from the General Hospital of Mytilene recommending transfer to and treatment on the mainland. Moreover, these are not ‘official’ transfers and do not ensure that vulnerable people will ultimately access safe accommodation or health care on the mainland. For many, this could result in homelessness, destitution and continued lack of access to medical treatment. This also means that only those people who have the financial means and are in a physical and psychological state allowing them to move and travel, can risk leaving the island on their own. As a consequence the remaining 3500 people who are currently stuck in Mavrovouni camp are increasingly the people whose personal situation makes it difficult for them to travel easily, for example because they have physical disabilities, are older, have large families or do not have the financial means to support themselves.

The situations of the people LCL has represented before the ECtHR are unfortunately not unique, but illustrative of the dire situation faced by everyone trapped in the detention-like conditions of Mavrovouni RIC and on Lesvos in general.

The **living conditions** in the hastily constructed Mavrovouni de-facto detention centre are **unfit for human habitation**: the camp is built on a disused firing range with **dangerous levels** of lead contamination; public health measures to protect against the spread of COVID-19 have been grossly inadequate and discriminatory; the camp is chronically overcrowded; water, sanitation and hygiene facilities are insufficient; and none of the accommodation provided is suitable for harsh winter or summer conditions.

For every person forced to live in Mavrovouni RIC, the conditions in and of themselves constitute a

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For every person forced to live in Mavrovouni RIC, the conditions in and of themselves constitute a violation of the right not to be subjected to inhuman or degrading treatment under Article 3 ECHR. For all of the individuals on whose behalf LCL filed interim measures, the conditions in the camp exacerbated pre-existing medical conditions and in many cases caused secondary conditions, in particular psychological issues. There are countless analogous cases in which the denial of urgent and necessary medical treatment, in violation of fundamental rights, has no other objective than to enforce Europe's violent border regime.

The progressive concentration and confinement of migrants into a single, inhumane and degrading site in Lesvos – in full disregard of people's recognised vulnerabilities and specific needs – is in clear violation of their fundamental and human rights and will have fatal consequences. It is also a precursor to European and Greek authorities' aim of mass detention of migrants across the Aegean islands in "Multi-Purpose Reception and Identification Centres" outside urban areas, where migrants will be subjected to expedited processing of their asylum claims, swift rejections and deportations to countries where they are not safe.

LCL therefore once again calls on the Greek state to immediately:

1. Ensure the provision of medical examination and assistance for ALL people living in Mavrovouni RIC to prevent the risk of irreparable harm to their mental and physical health from arising in the future.
2. Facilitate the official transfer to the mainland and ensure access to health care for ALL individuals in analogous situations to those for whom interim measures were granted.
3. Ensure that accommodation compatible with human dignity, access to medical services and transfer to the mainland are accessible for ALL irrespective of immigration status in accordance with Article 5(2) of the Greek constitution and non-derogable rights under Articles 2 and 3 ECHR.
4. Implement non-discriminatory migration policies allowing people to travel through safe and legal routes to their destination of choice, to ensure the reestablishment of family and community links, and abolish prison camps and containment at Europe's borders.

** In some of the most recent cases, the Lesvos Legal Centre cooperated with a law firm based in Vienna (<http://www.messerschmidt.lawyer/>) and the Vienna Forum for Democracy and Human Rights (www.humanrights.at). Following the granting of an interim measure, a complaint was submitted to the ECtHR concerning a family that includes a survivor of torture, a woman with a high-risk pregnancy and a history of acute mental trauma, and a young child in psychological distress.*



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