



Medical Solidarity  
International

# ADVOCACY REPORT GREECE JANUARY 2025 - MARCH 2025



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# INTRODUCTION

Since the so-called “refugee crisis” in 2015, Greece has been at the center of European migration policy. Due to the implementation of the EU-Turkey deal in 2016—which later became a blueprint for future EU migration agreements—the number of new arrivals to Greece decreased significantly. While over 175,000 people arrived in Greece in the year of the agreement, this number had fallen to approximately 75,000 by 2019. During the COVID-19 pandemic, arrivals declined even further: in 2021, fewer than 10,000 individuals reached Greece.

This reduction stems from multiple factors. Following the electoral victory of the conservative Nea Dimokratia party in 2019, Greece adopted a notably more restrictive migration policy. New camps—referred to as Closed Controlled Access Centres (CCACs)—were constructed, often far from urban centers. Access to healthcare was tightened through new legislation, and illegal pushbacks at land and sea borders became more common.

Despite these measures, the number of people arriving in Greece began increasing again after the pandemic. While the EU boasted a 59% reduction in irregular migration across the central Mediterranean route in 2024, over 60,000 people reached Greece via the eastern Mediterranean route during the same period—up from 48,000 in 2023 and 18,000 in 2022.

Simultaneously, support systems for refugees in Greece deteriorated. Many NGOs closed or withdrew due to the pandemic and shifting geopolitical dynamics. Essential services such as case management for single men in Athens, food and non-food item (NFI) distributions on the islands, free shops, and support for torture survivors have disappeared. This report seeks to document the impacts of these changes on refugees living in Greece.

## MAINLAND

### **A Landscape of Precarity**

For most refugees arriving in Greece, the mainland represents the second step of their journey after arrivals on the islands. However, their living conditions vary dramatically depending on their legal status: whether they are still in the asylum process, have received a decision, or finally, have had their applications rejected and now live undocumented.

The first weeks on the mainland are often marked by severe hardship. Asylum seekers are theoretically entitled to accommodations and a monthly financial allowance—€75 per person, up to €210 for families with more than four children. In reality, these payments have not been issued since May 2024, worsening an already dire situation. Though modest in amount, this support is crucial in camps that lack basic provisions, from food to medicine.

Living conditions in refugee camps across mainland Greece remain deeply problematic. These facilities are often situated in remote areas without access to public transportation, isolating residents from healthcare, education, and legal support. To give an instance, a trip from Ritsona camp to Athens often requires a private taxi—an expense out of reach for most.

The camps themselves rely heavily on temporary container housing, much of which is in disrepair and poorly maintained. Overcrowding is common, and many units lack basic weatherproofing. Reports from recent months detail containers missing windows and doors, exposing residents to cold and damp conditions that lead to illness. Sanitation infrastructure is often outdated, insufficient, or unhygienic.

Even after receiving a decision on their asylum applications, the situation does not improve. Rejected asylum seekers lose all access to housing, food, and medical support and are forced to leave the camps—many end up homeless. NGOs become their only lifeline.



# MAINLAND

## A Landscape of Precarity

Legal uncertainty compounds these challenges. Greece continues to designate Turkey as a “safe third country,” a classification criticized as unlawful by national courts. Nevertheless, the policy remains unchanged, deepening insecurity for rejected applicants. These individuals are also at risk of detention, even in cases where deportation is not legally feasible.



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A growing concern in 2025 is the rise in alleged “Dublin returns” to Greece from other EU countries. These individuals, often deported from Germany, Belgium, or Switzerland, are documented but receive little to no support upon return. While theoretically eligible for services, bureaucratic obstacles and lack of coordination leave them destitute. This too often results in homelessness.

Despite documented concerns, Germany’s Federal Administrative Court ruled in November 2022 that returns of single, healthy, and employable protection beneficiaries to Greece were lawful, asserting that access to basic services is “generally available.” This ruling has led to an increase in deportations to Greece, where people are returned to homelessness, poverty, and isolation. Without EU-wide solidarity or targeted integration measures, the humanitarian crisis continues to magnify.

Source:

<https://rsaegian.org/en/refugee-camps-in-mainland-greece/>  
<https://refugeelegalsupport.org/people-continue-to-suffer-in-greeces-mainland-refugee-camps/>  
<https://rsaegian.org/en/suspension-of-financial-assistance-to-asylum-seekers-in-greece-since-may-2024/>  
<https://refugees.org/wp-content/uploads/2023/12/Greece-Report-Web-Final.pdf>  
<https://www.welt.de/politik/deutschland/article255957154/Migration-und-Asyl-Gericht-erlaubt-Abschiebungen-alleinstehender-Migranten-nach-Griechenland.html>  
<https://www.proasyl.de/pressemitteilung/bericht-fluechtlinge-in-griechenland-stehen-weiterhin-vor-dem-nichts-bundesverwaltungsgericht-verhandelt-ueber-elende-situation/>





## HEALTHCARE ACCESS

### **A System at Breaking Point**

Access to Greece's public healthcare system is one of the most significant barriers faced by refugees—whether they are legally recognized, in the asylum process, or undocumented. Medical care, especially within camps, is grossly inadequate or entirely absent.

The transition from the Greek healthcare program PHILOS II to the new HIPPOKRATES program in June 2024 led to serious disruptions. PHILOS II, operated by the National Public Health Organization (EODY) since 2017, had provided limited but vital medical and psychosocial services in camps. With its sudden termination in June 2024, more than 400 medical professionals were dismissed, creating an acute service vacuum.

The new HIPPOKRATES program, led by the International Organization for Migration (IOM), was launched in July 2024 and aimed to continue PHILOS II's work. However, implementation was delayed due to unprepared partner organizations. As a result, medical screenings, psychological assessments, and registration of new arrivals were interrupted, severely limiting access to critical health services.

Though asylum seekers in Greece are theoretically entitled to healthcare via the PAAYPA social security number system, in practice, they encounter overloaded hospitals, language barriers, unclear procedures, and administrative red tape. Many are turned away at hospital reception desks.

In EU-funded CCACs on islands like Samos and Lesbos, and on the mainland, medical conditions are particularly alarming. In April 2025, Médecins Sans Frontières (MSF) documented cases of acute malnutrition among infants in the Samos camp.

## HEALTHCARE ACCESS

### A System at Breaking Point

Undocumented individuals, including those whose asylum claims were rejected, are effectively excluded from healthcare access. Without a social security number, even emergency care is frequently denied—a situation that violates basic human rights standards.

Mental health services are also nearly nonexistent. Many refugees suffer from trauma, poor living conditions, and violence. However, qualified psychosocial support is rarely available.



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## IMPRESSIONS ATHENS



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Source:

<https://www.reuters.com/world/europe/children-found-malnourished-greek-migrant-camp-msf-charity-says-2025-04-07/>  
[https://rsaegean.org/wp-content/uploads/2024/05/RSA\\_RefugeeCampsMainland.pdf](https://rsaegean.org/wp-content/uploads/2024/05/RSA_RefugeeCampsMainland.pdf)

## ISLANDS

Following our update on the Greek mainland, we now highlight conditions on the so-called “Hotspot” islands — Lesbos, Chios, Samos, Leros, and Kos — with a focus on four main areas: Housing, Medical Access, Food, and WASH.



© Lesbos 2024, Arno Tanner

## CCAC CONDITIONS

The Closed Controlled Access Centres (CCACs), introduced as part of the EU-funded “Multi-Purpose Reception and Identification Centres” initiative, were intended to replace former camps like Moria (Lesvos) and the Jungle (Samos). In practice, they represent a new form of detention infrastructure at Europe’s external borders.

These remote, prison-like structures are heavily surveillance, enclosed by double fences with barbed wire, as well as controlled by magnetic gates, biometric checkpoints, and 24/7 CCTV under constant floodlights. They symbolize a policy of detention, dehumanization, and militarization, raising serious concerns about the erosion of rights and dignity for people on the move.

Despite being presented as “reception facilities,” CCACs effectively function as detention centres. They are often inaccessible, far from towns, hospitals, and civil society. Inside, residents face restrictions on freedom of movement, inadequate healthcare access, deteriorating mental health, and overall inhumane living conditions. On Lesbos, the Vastria CCAC is still under construction amid strong local resistance and legal challenges.



To exit CCACs during the day, residents must possess an "Asylum Seeker Card." At night, or during public holidays, camps may close entirely, restricting any exit. The pre-removal detention area inside the Kos CCAC enforces de facto detention, same as the so-called "Safe Areas" for unaccompanied minors.

Unlike earlier tent-based camps, residents now live in containers. While this is an improvement in theory, in practice, containers are overcrowded, badly protected from wind and weather, sometimes flooded by waste water and lack privacy. People from different backgrounds, including survivors of violence or members of the LGBTIQA+ community, are housed without protection measures. The absence of daily structure contributes to mental health deterioration and re-traumatization.



© CCAC Zervou, Samos, Arno Tanner

Source:

<https://rsaegean.org/en/refugee-facilities-on-the-aegean-islands/>

<https://glocalroots.org/en/they-dont-care-about-us-voices-from-kos-exposing-inhumane-migration-policies/>

<https://www.republik.ch/2025/03/28/lager-auf-samos-haft-fuer-kinder-bezahlt-von-der-schweiz>

## MEDICAL ACCESS

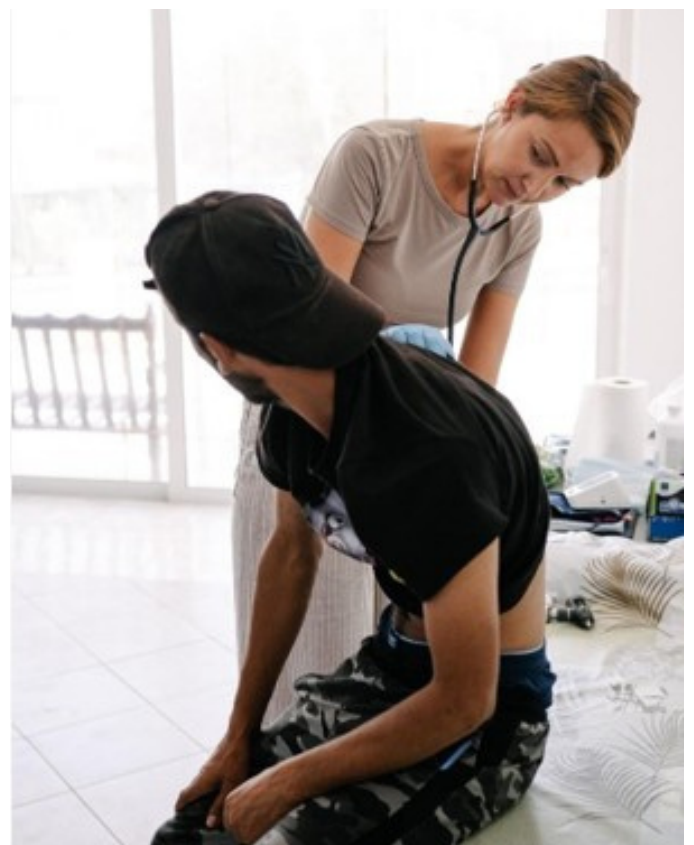
Access to primary healthcare and psychosocial support (MHPSS) varies widely across the islands. While Lesbos hosts multiple medical and MHPSS actors, Kos remains critically underserved.

On Kos, Medical Volunteers International (MVI) runs the only independent clinic providing free care to CCAC residents. Inside the camp, just one IOM doctor is available under the underperforming "Hippocrates Project." There is no MHPSS provider active on the island. For residents, geographic isolation and lack of funds make access to private practitioners nearly impossible.

Common conditions treated at our clinic include scabies, untreated dental issues, UTIs, gastric disorders linked to poor nutrition, wounds, as well as both viral and bacterial infections. Pregnant women and people with chronic illnesses also rely on our care. We face severe difficulties referring patients to specialist or emergency care, particularly for dental needs.

In 2024, we treated over 3,000 patients in our Kos clinic. By April 2025, over 770 patients from the CCAC had already accessed our services. Reports of racist behavior and discrimination in local healthcare settings further discourage residents from seeking help.

Kos, an island of 37,000 permanent residents, hosts over 1 million tourists annually. Yet it operates with only one ambulance in off-season and two in summer — a stark illustration of the healthcare system's collapse, impacting both locals and displaced people.



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Source:

<https://rsaegean.org/en/refugee-facilities-on-the-aegean-islands/>

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Since the establishment of CCACs, concerns around food quality and nutrition have been consistent. Meals are outsourced to private contractors, served in pre-packed rations, and often lack nutritional value.

Residents frequently report meals being cold, repetitive, moldy, or expired, with no accommodation for dietary needs — including for children, pregnant people, or those with medical conditions like diabetes. As a result, many experiences gastrointestinal illnesses, while others avoid eating entirely due to the food's condition.

Cooking is forbidden inside CCACs, removing basic autonomy and dignity. Some residents resort to unsafe cooking methods such as open fires or kettles. During Ramadan, many cooked outdoors to break their fast with traditional meals — increasing the risk of accidents in an already fragile environment.

## WASH

Despite its recent construction, the Kos CCAC shows severe deterioration in water, sanitation, and hygiene (WASH) infrastructure. Structural flaws have caused repeated failures of the sewage and wastewater systems, especially when the facility exceeds capacity — a frequent occurrence.

Several times, residential floors were flooded with sewage, leaving the area uninhabitable. Residents reported damp conditions, leaking dirty water, and subsequent skin conditions like foot blisters. Tap water is occasionally cloudy, and hygiene items are typically distributed only once upon arrival.

Until late March 2025, there was no access to laundry facilities in the camp. This contributed directly to a scabies outbreak, as residents couldn't clean bedding or clothing — a critical step in successful treatment. Re-infections were frequent due to inadequate isolation and disinfection procedures. These failures reflect broader systemic neglect, compromising both the health and dignity of CCAC residents.

Source:

<https://rsaegean.org/en/refugee-facilities-on-the-aegean-islands/>

<https://glocalroots.org/en/they-dont-care-about-us-voices-from-kos-exposing-inhumane-migration-policies/>

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## DETENTION FOR UNACCOMPANIED MINORS

Despite the European Union's commitment to protecting vulnerable asylum seekers, the reality for unaccompanied minors on the Greek "Hotspot" islands paints a starkly different picture. Children and adolescents—some as young as 10—are being held in so-called "Safe Areas" within Closed Controlled Access Centres (CCACs), such as on Samos, Leros, Chios and Kos. However, these "protected spaces" are often overcrowded, under-resourced, and anything but safe.

Recent investigations, including a 2024 report by Solomon, reveal disturbing conditions: in the Safe Area of the Samos CCAC, children were forced to sleep on the floor in shifts, due to lack of beds and proper space allocation. Up to 96 minors were housed in a space meant for just 40. Access to education, mental health support, and appropriate nutrition is minimal. The term "Safe Area" is misleading—a euphemism that conceals prolonged detention and inadequate care for some of the most vulnerable people in the European asylum system.

## DETENTION FOR UNACCOMPANIED MINORS

This crisis is not isolated. On Kos, similar patterns emerge. While our medical team currently lacks access to the Safe Area within the Kos CCAC, indirect reports from people on the move and partner organizations confirm persistent issues: overcrowded housing areas, lack of psychosocial support, no access to recreational activities and insufficient access to healthcare.

The consequences of such neglect are not merely institutional—they are physiological and psychological. In April 2025 an alert from Médecins Sans Frontières (MSF) on Samos documented severe acute malnutrition in six children between 6 months and 6 years old. This is a medical red flag usually reserved for conflict zones or disaster areas. That it is occurring within Switzerland and EU-funded, state-run facilities is indefensible.

Unaccompanied minors, by definition, have already lost their primary source of protection: their family. They should be surrounded by safety, support, and community. Instead, they are being detained, isolated, and invisibilized.

### **We call on EU institutions, national authorities, and civil society to:**

- Guarantee access to independent medical providers and child protection actors in all Safe Areas.
- Provide real safe housing options instead of detention.
- Ensure appropriate nutrition, education, and mental health support for all unaccompanied minors and people on the move in Greece.

## ISLANDS

# DEATH ON THE BORDER

Regarding the monitoring of the “**Missing Migrant Project**” by the International Organisation of Migration (IOM), at least 59 people died/got lost in the Aegean Sea between January 2025 and today (20st of April 2025). At least four of them were children.

- **January 2025:** **9 people**
- **February 2025:** **7 people**
- **March 2025:** **22 people**
- **April 2025:** **21 people**

While civil society organizations are calling again and again for Safe Passages towards Europe, people are drowning in front of our eyes on a regular basis. The European Union and its partners such as Switzerland are failing their responsibilities in full knowledge of the situation, without any interest in changing something.

## PUSHBACKS 2025

- **People arrived on the Greek Islands:** **6'727**
- **People stopped/pushed back:** **7'190**
- **People drowned:** **59**

Source:

<https://rsaegean.org/en/refugee-facilities-on-the-aegean-islands/>

<https://glocalroots.org/en/they-dont-care-about-us-voices-from-kos-exposing-inhumane-migration-policies/>

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## POLITICAL SITUATION

# COMMON EUROPEAN ASYLUM SYSTEM (CEAS)

The reform of the Common European Asylum System (CEAS) marks a turning point in European migration governance — one that risks institutionalizing exclusion and containment over protection. Under the new regulations, border procedures will become faster and harsher, increasing the use of closed camps like those in Greece. Asylum applications will often be processed before people even leave these isolated, prison-like facilities. Vulnerable groups risk being swept into expedited procedures without proper safeguards, and responsibility for asylum will remain disproportionately on front-line states like Greece.

This shift prioritizes deterrence over dignity — reinforcing external borders at the cost of fundamental rights. For people on the move in Greece, it likely means longer stays in degrading conditions, less access to support, and an even more fractured system of protection.

One of the most controversial aspects of the CEAS reform is the introduction of mandatory fast-track border asylum procedures. People arriving at the EU's external borders may be processed within just 12 weeks — often while being held in closed facilities. This approach severely limits access to legal aid, proper case assessment, and appeal mechanisms. For those from countries with low recognition rates, it can mean almost automatic rejection and swift return, regardless of individual protection needs or vulnerabilities.

Source:

<https://rsaegian.org/en/refugee-facilities-on-the-aegean-islands/>

<https://glocalroots.org/en/they-dont-care-about-us-voices-from-kos-exposing-inhumane-migration-policies/>

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## POLITICAL SITUATION

### TEMPI STRIKE

To mark the two years anniversary of the tragic train wreck in Tempi, hundreds of thousands of Greek citizens participated in a national strike day on the 28<sup>th</sup> of February. All around the country, people protested against the severe level of corruption within the Greek system and to raise their mistrust in the government. Member of the opposition in the parliament raised a vote of mistrust against Premier Mitsotakis and his leading party “Néa Demokratia”. Due to the conservative majority inside the Greek Parliament, the vote of mistrust against the government was not able to find a majority.

### NEW MINISTER FOR MIGRATION

Under the turbulent times for the government with the protests, it was nearby unnoticed that Greece pointed out a new Minister of Migration. With Makis Voridis, a former far-right student activist and self-named nationalist holds the responsibility over the Ministry for Migration and Asylum. So far, the outcomes of this change can only be predicted but it is pretty sure that the situation for asylum seekers in Greece will not get better with a Minister which was actively involved in far-right activism.

Source:

<https://rsaegian.org/en/refugee-facilities-on-the-aegean-islands/>

<https://glocalroots.org/en/they-dont-care-about-us-voices-from-kos-exposing-inhumane-migration-policies/>

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## POLITICAL SITUATION

# SWISS FUNDING FOR CHILD DETENTION

Since January 2024, the Swiss Federal Department of Foreign Affairs co-funds the so-called “Safe Areas” inside the CCAC facilities on Chios, Samos, Leros, and Kos. With a funding agreement over 4'106'656 Euros between January 2024 and mid of June 2025, Switzerland claims to take responsibility over the situation for unaccompanied minors on the Greek Islands.

In April this year, the Swiss independent magazine “Republik” published a report about the terrible conditions for unaccompanied minors inside the CCAC on Samos, highlighting the financial complicity by the Swiss Government. A few days after this report was published, the MSF Team on Samos published a Press Release highlighting that their doctors have registered six cases of severe malnutrition with children between 6 months and 6 years living in the alleged “Safe Area” inside the CCAC Samos.

The funding agreement between Switzerland and Greece runs out mid of June and might be extended. We call for a clear role of responsibility regarding monitoring and fundamental rights access towards Switzerland and EU Member States.

Source:

<https://rsaegean.org/en/refugee-facilities-on-the-aegean-islands/>

<https://glocalroots.org/en/they-dont-care-about-us-voices-from-kos-exposing-inhumane-migration-policies/>

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