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MEDICAL VOLUNTEERS  
INTERNATIONAL

# REPORT FROM THE GROUND

SERBIA



Serbia was assessed by MVI as being a possible new location in November 2021. At the beginning of 2022, a new team started in a location in the North of Serbia consisting of a coordinator/nurse, and another two volunteers, one doctor, and one nurse. Their identities are hidden in this report due to the consequences of those giving medical care to humans who have been forced to flee their homes. However, as “health care is a human right”, MVI will continue to help those in medical needs for as long as possible.

The team wanted to give an overview of what their first working week has been like so you can better understand why a team is needed in an area such as northern Serbia, one of several gateways to the European Union.

### **Monday 10.1.22**

There were just two team members on the ground today, the coordinator and the doctor. Our third team member arrives this evening. We do not know what to expect as this is our first location. We visit an area right next to a land border crossing. There is one main squat here and we work alongside another organisation who are providing other services to the “People on the move” (POMs) here. We found this worked really well as the POMs, who have been let down by so many people on their long and difficult journey to this point, trusted us straight away. We treated 31 people at this location mostly from Morocco. One man has a bad burn on his foot that had happened whilst trying to stay warm a few nights ago. This is something that in the poor living conditions can quickly become infected. It is so important that he has access to clean dressings and is seen by the team until this is healed.

We moved on to the next location. This was a little more tricky due to the high number of people living in scattered squats. We were soon surrounded by crowds of people needing medical care with the nurse crouched in the snow dressing people’s feet and the doctor trying to work from the boot of the car. There was a high prevalence of scabies in this area and these were most of the wounds that the nurse was treating as well as injuries from the

fence between Serbia and Hungary. The doctor was treating a lot of people due to exposure to the cold and some police brutality injuries. It was quite intimidating being surrounded by so many people needing help, but everyone stayed patient and was thankful for the team's help.

Here there were a lot of Afghans, few people from India and Pakistan. All single men. Mostly aged 18 - 30 but a few minors. We treated 56 people in this area.

The total number of patients treated: 87

## **Tuesday 11.1.22**

Last night, the team was joined by another Nurse. We used this day to buy supplies, arrange a strategy for crowd control, and communicate with other organisations about different locations to go to. We also bought things like folding stools, footrests and other things we needed for the project.

## **Wednesday 12.1.22**



All three team members were on the ground today. We hiked in the snow to reach an area where people were living in the forest in their tents. The temperature was as low as -10 degrees C last night. The conditions here are very harsh and we heard that quite a lot of people had left due to the cold. We treated 6 single men here from a range of nationalities. Morocco, Afghan, Syria, Palestine, Tunisia. Seems like most are over 30 years old.



The next location was an abandoned house where there were many families. It took us a while to be accepted here. We treated a few patients outside in a ruin however we were eventually invited in to see an 18 month old baby who the family was concerned about. She clearly had Down Syndrome and her development was slow. Her medical papers showed she was diagnosed with this at birth however her mother seemed unaware. We treated her for some medical conditions.

However whilst inside, the nurse noticed a malnourished baby boy. Just 20 days old. He was assessed by our pediatric Emergency nurse and it was decided that with close follow-up, education to the mother about the frequency of feeding etc. we should be able to avoid a hospital admission.



In total, we treated seven patients here, most of which were from Syria and three of which were children.

### **Thursday 13.1.22**

We returned to the same two locations as we did on Monday. We saw a few of the same people but the changeover of patients was high. This is very clearly a transient place. We treated 33 patients at the first location and 37 patients at the second location.

This time we had a better system going with one person triaging the patients and ensuring they saw the correct medic (doctor or nurse) depending on their conditions. We gave each person numbers so they would be seen in order. This worked really well.



We also returned to see the malnourished baby from yesterday with weighing scales to weigh and measure the baby to get more idea of the grade of malnutrition. Additionally to provide vitamins to the mother.

The team was very cold by the end of this day. It made them even more aware of what the POM's went through on their nightly "game" of trying to cross the border into the EU.

The total number of patients treated today was 71

### **Friday 14.1.22**

This location was a high-risk one due to the added security on the railway lines. Many POM's call the railway their temporary home as they try and cross the border. The abandoned train carriages and buildings have become squats. However, there are sometimes serious injuries and deaths from these living conditions with reports of a POM being killed by a train just a few months ago near this location.



We treated 22 people and most people were from Afghanistan and all single men. Mostly aged 18 - 30 years old but 9 were minors. Again here is a very transient population.

### **Saturday 15.1.22**

We were back on the railway lines in a different location today. There are a lot of abandoned train carriages in poor repair. There was many people living here however the police evicted it and smashed most of the carriages up so they are too exposed to live inside. We searched between the carriages and found at least 6 tents however we felt it was too early in the day and perhaps the occupants were still on the game. We didn't find any patients to treat in this location.



The next location is an old abandoned factory. Sometimes there are many people here but today the numbers were lower than what we heard they usually are. Mostly Syrian population but we treated one man from Turkey. Single men mostly 18 - 30 years old and one minor. Quite a few were treated for wounds due to scabies. We treated 6 patients here.



We entered another squat where there were men from India and Pakistan. Here we had quite a few patients, mostly due to scabies and displaying symptoms of viral infections and exposure to the cold. This squat is very central so we had to be careful when entering and exiting here.

Today we managed to find a location where there are a lot of people staying at one of the hotels that accept POMs. We were welcomed in by the owners and allowed to treat the people there. Most people in the hotel were Syrian apart from one Egyptian that we treated. We treated 41 patients in this location, all were single men and one was a minor.

### **Sunday 16.1.22**

A well-deserved day off for the team.



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