

Article

Migrants, asylum seekers and refugees in Greece in the midst of the COVID-19 pandemic

THEODOROS FOUSKAS

Department of Public Health Policy, School of Public Health, University of West Attica

E-mail: tfouskas@uniwa.gr

Abstract. COVID-19 cases detected in accommodation centers in mainland Greece, while thousands of asylum seekers, refugees, and migrants are living under unsafe and degrading conditions at the camps on the Aegean islands and others in the mainland. They live mostly in overcrowded Reception and Identification Centers (RICs) and accommodation centers under deplorable conditions, the lack of proper shelter, the extremely unhygienic living conditions. Migrants, asylum seekers and refugees living in the RICs faced multiple challenges and vulnerabilities that must be considered when responding to the COVID-19 pandemic.

Keywords: migrants, refugees, asylum seekers, health, COVID-19, Greece.

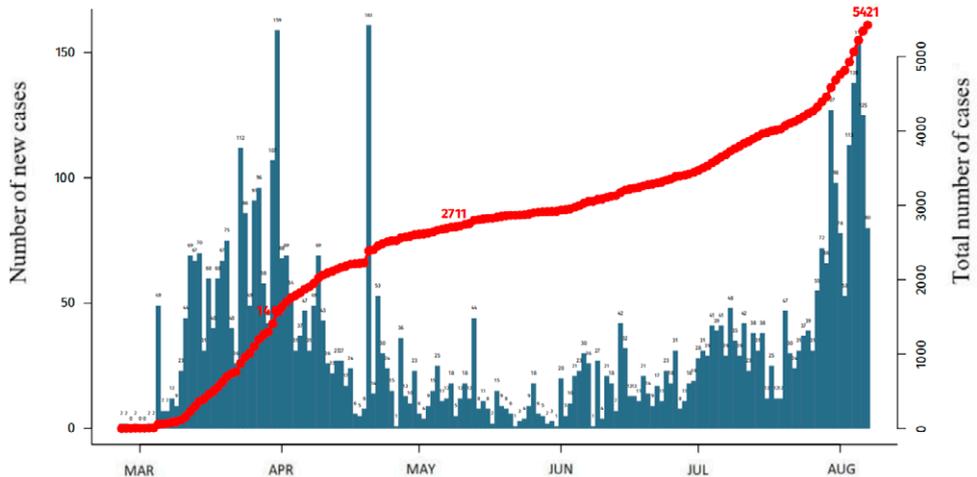
Riassunto. Alcuni casi di COVID-19 sono stati individuati nei centri di accoglienza della terraferma della Grecia, mentre migliaia di richiedenti asilo, profughi e migranti continuano a vivere in condizioni non salutari e degradanti nei campi delle isole egee e altri nella terraferma. Per lo più, essi vivono nei sovraffollati Centri di Identificazione e di Recezione (RIC) e in centri di accoglienza in condizioni deprecabili, senza un vero e proprio rifugio, in condizioni di vita estremamente non igieniche. I migranti, i richiedenti asilo e i profughi che vivono nei RIC devono far fronte a diverse sfide e vulnerabilità che devono essere prese in considerazione nel momento di affrontare la pandemia del COVID-19.

Parole chiave: COVID-19, Grecia, migranti, profughi, richiedenti asilo, sanità.

1. Introduction: The COVID-19 pandemic in Greece

As part of the worldwide pandemic of the COVID-19 caused by severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2), the first COVID-19 case diagnosed in Greece on 26th February 2020 (National Public Health Organization, 2020a). As subsequent cases in late February and early March confirmed the Government began to implement lockdown measures. Between 10th and 18th March, educational institutions and shops nationwide suspended operations, along with cinemas, gyms, courtrooms, shopping malls, cafés, restaurants, bars, beauty salons, museums and archaeological sites, beaches and ski resorts. On 23rd March, with 695 confirmed cases and 17 deaths, a nationwide

Figure 1. Number of laboratory-confirmed COVID-19 cases in Greece by 8th August 2020.



Source: National Public Health Organization, 2020b.

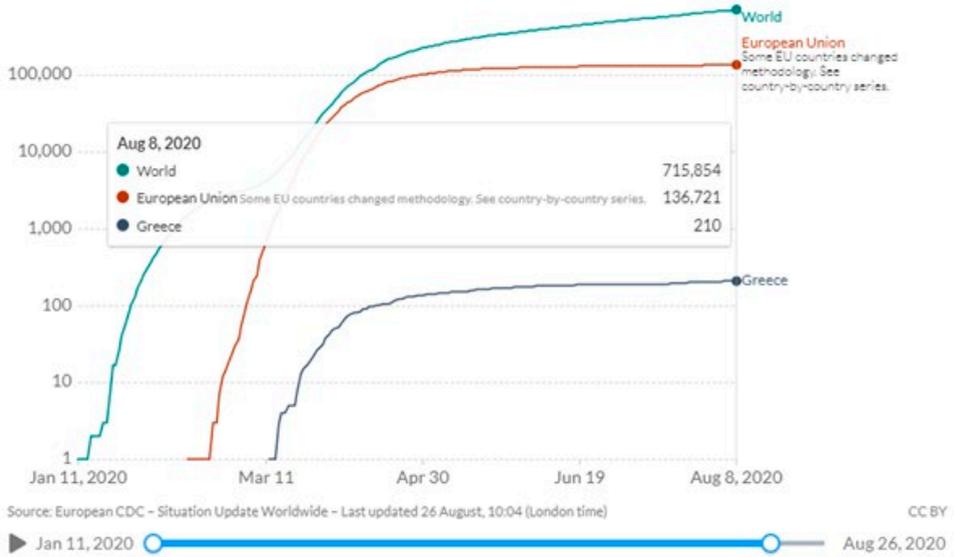
restriction on movement was enforced, whereby citizens could only leave their homes for specific reasons and with a special permit. The gradual reduction of these measures began on 4th May. The data below (Figure 1) show cases from the epidemiological surveillance of the disease of the novel coronavirus, based on statistics of the National Public Health Organization and recorded up to 8th August. The latest confirmed laboratory cases of the disease numbered 152, of which 22 were identified at the country's entry points. The total number of cases is 5,421 (daily change +2.9%), of which 54.7% were men. The latest recorded daily deaths of COVID-19 patients were 1, while a total of 211 deaths have been reported since the outbreak began. The average age of patients who have died was 76 years. The number of patients hospitalized and intubated was 17 (76.5% men) (National Public Health Organization, 2020b).

Deaths connected with the COVID-19 are low since the outbreak of the pandemic (see Figure 2) that Greece is not comparable with other EU countries. Excess deaths statistics are also negative with low excess mortality (see Figure 3), compared with the last decade as fewer people died of all diseases this year than usual, and the ratio of COVID-19 related deaths to 100,000 population is one of the world's lowest.

Week 2020-34 from all 24 countries: Austria, Belgium, Denmark, Estonia, Finland, France, Germany (Berlin), Germany (Hesse), Greece, Hungary, Ireland, Italy, Luxembourg, Malta, Netherlands, Norway, Portugal, Spain, Sweden, Switzerland, UK (England), UK (Northern Ireland), UK (Scotland), UK (Wales). Source: Mølbak, K., Vestergaard, L. Nielsen, Bang, H. and Krause, T., 2020/EuroMOMO Project Hub (2020). <https://euromomo.eu/graphs-and-maps#excess-mortality>

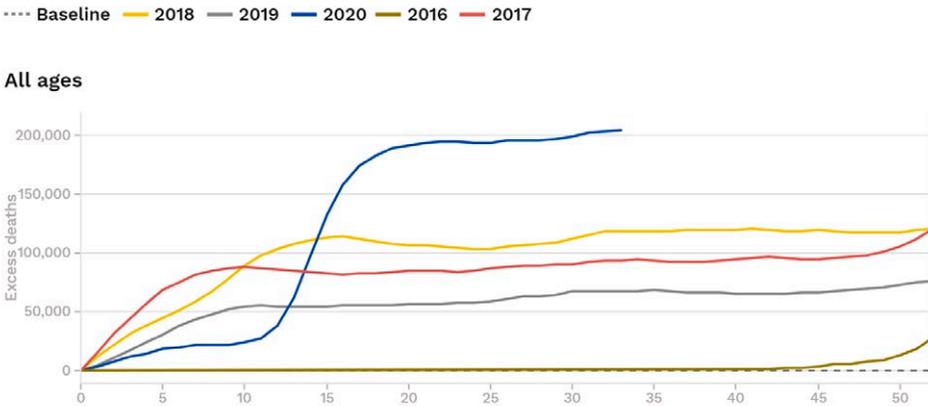
According to the Asylum Service/Ministry of Migration and Asylum (2020), the number of asylum applications by third-country nationals (TCNs) within the Greek territory over-multiplied between 2013 and 2019, reaching 299,620 applications: from 4,814 appli-

Figure 2. Cumulative confirmed COVID-19 deaths.



Source: Roser, Ritchie, Ortiz-Ospina and Hasell/Our World In Data, 2020 <https://bit.ly/3grWuK9>.

Figure 3. Excess mortality.



cations in 2013 (a monthly average of 688 applications), to i.e., a 14.3% rise between 2013 and 2014. In 2014, there were 9,431 applications at a monthly average of 786, a rise of 39.8% between 2014 and 2015. In 2015, there were 13,187 applications at a monthly average of 1,099, an increase of 287, 1% between 2013 and 2014. In 2016, there were 51,053 applications at a monthly average of 4,254, an increase of 14.9% between 2016 and 2017.

Table 1. Asylum Applications.

	Difference		Difference		Difference		Difference		Difference		Difference	
	2013	2014	2015	2016	2017	2018	2019	2020*	Total	2013	2014	Total
	%	%	%	%	%	%	%	%		%	%	%
Total	4,814	9,431	13,187	51,053	58,642	66,960	77,285	18,255	299,620			
Monthly average	688	786	1,099	4,254	4,887	5,580	6,440	9,128	4,108	14.3%	39.8%	66.2%
	↑	↑	↑	↑	↑	↑	↑	↑	↑			↑

* Until 29.02.2020.

Source: Asylum Service/Ministry of Migration and Asylum (2020).

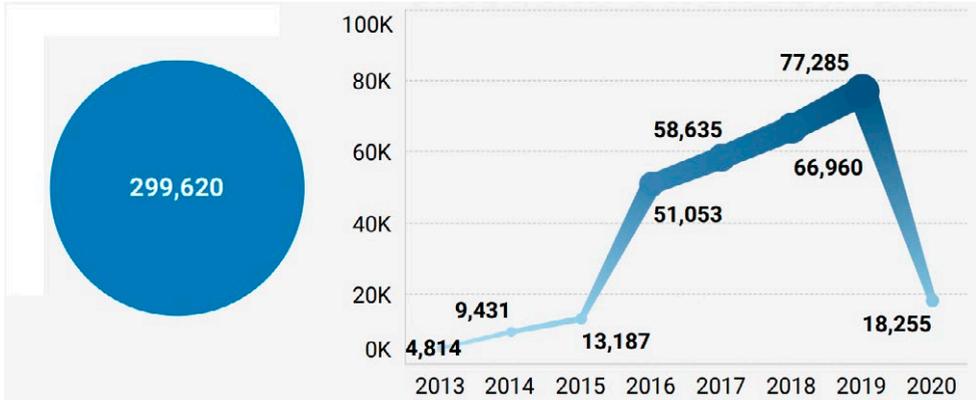
In 2017, there were 58,637 applications at a monthly average of 4,886, marking an increase of 14.2% between 2017 and 2018. In 2018, there were 66,960 applications at a monthly average of 5,580. In 2019, there were 77,285 applications at a monthly average of 6,440 applications, an increase of 15.4% between 2018 and 2019. In 2020 (until 29.02.2020), there have been 18,255 applications at a monthly average of 9,128 applications, an increase of 66.2% between 2019 and 2020 (see Figure 4 and Table 1).

The above demonstrates the pressure on the state mechanism, the competent services, and the Greek society, in the management of the flows mentioned above, in receiving, identifying, treating, and rendering the statutory status, etc.

2. Deplorable conditions in the Reception and Identification Centers and Accommodation Centers

As the World Health Organization (WHO) (2020) states, asylum seekers, refugees, and migrants are exposed to increased risks of contracting diseases, such as COVID-19, as they live mostly in overcrowded facilities and conditions without necessary public health conditions as they lack the relevant means (WHO, 2020). Also, the lack of sufficient crucial services (Jalbout, 2020), overcrowded accommodation centers, along with deplorable conditions, the lack of proper shelter, the extremely unhygienic living conditions (including lack of water and sanitation) with improper sewage system (Veizis, 2020) deteriorated by insufficient health services (Jalbout, 2020) (including medical doctors, social workers, psychologists). The daily routine of asylum seekers, refugees, and migrants includes 2-3 hours waiting in queues receiving food and meals, often described as a low quality, which leads some to abandon the wait or not to eat due to distastefulness (Jalbout, 2020). Shortages of medicines and lack of healthcare facilities compromise the capacity of asylum seekers, refugees, and migrants to access healthcare services in humanitarian settings (WHO, 2020). In Greece, thousands of asylum seekers, refugees and migrants live under inhuman, unsafe and degrading conditions at the camps on the Aegean islands and several others in the mainland Greece (Kathimerini, 2019; Oxfam, 2019). Camps are severely overcrowded (see Table 2). Multiple deficiencies and lack of medical doctors resulting in

Figure 4. Asylum Applications by year.



* Until 29.02.2020.

Source: Asylum Service/Ministry of Migration and Asylum (2020).

numerous health issues, deterioration of health due to weather changes, for example, there is no insulation or heated accommodation in the winter. Many TCNs feel insecure under these precarious conditions, while many have suffered sexual abuse or traumas.

In the RICs, there are frequent outbreaks of violence and fires, for example in Lesbos (March 2020) (Kathimerini, 2020a) and Samos (April 2020) (Kathimerini, 2020b), where the fire spread quickly due to the flammable materials in the camp used for cooking inside the tents. Reasons for these outbreaks are the clashes that broke out between migrant groups (for example African and Afghan migrants residing in the camp), poor living conditions, lack of health care and overcrowding as multiple different nationalities are living in the same area and the psychological breakdown and tensions due to the ongoing limbo/immobility and uncertainty. The RICs have been operating inappropriately. They are mostly set up on old facilities such as abandoned army camps and factories, which are extended beyond their intended borders. Newcomers set up tents wherever they can find available space, in the surrounding area, with no safety and exposure to the weather condition (see Figure 5). TCNs inside the RICs are crammed into small individual tents or separated makeshift spaces (see Figure 6) made by wooden walls under a larger umbrella tent. These spaces offer little or no privacy, use a blanket for the door and mats for the ground, and provide insufficient insulation from weather conditions and temperature changes (summer heat/winter cold). There is no segregation between men, women and children (including unaccompanied minors). At the same time, there are some containers used as living spaces. The RICs, in general, provide inadequate facilities, water and sanitation. Also, there is insufficient access to electricity and lighting. These conditions have contributed to an environment that is unsafe and full of health risks for TCNs. In general, a worrying reduction in healthcare provision in all RICs in the islands is observed (MSF, 2017a). TCNs’ current squalid living conditions in Greece are inadequate (for example, in Samos’ Vathy camp, in Chios’ Vial camp, in Lesbos’ Moria camp). The uncertainty about their futures, the threat of deportation, and the lack of access to

Table 3. National Situational Picture Regarding the Islands at Eastern Aegean Sea (04/08/2020)

Place/Location	Lesvos		Chios		Samos		Leros		Kos		Other Islands		Total	
	Occ.	Cap.	Occ.	Cap.	Occ.	Cap.	Occ.	Cap.	Occ.	Cap.	Occ.	Cap.		
Reception and Identification Centre	13,754	2,757	3,901	1,014	5,191	648	1,245	860	1,630	816			25,721	6,095
Other Accommodation Facilities	929						44	120					973	
Predeparture Detention Centre	179	210							459	474			638	684
Detention Facilities	12		18		23		0		4		52		109	
Hellenic Police Facilities	638	752	263	297	279	282	111	136	151	216	37	81	1,479	1,764
UNHCR	137	148	16	18	16	17							169	183
NCSS	95	99											95	
Other NGOs	0		0		0		0		0		0		0	
Makeshift Camps														
Migrants present on the island	15,744	4,198	5,509	1,400	2,244	89	29,184							
Arrivals	32	0	0	0	0	0	32							
Transports to the Mainland	127	13	0	14	1	10	165							
Departures (EU-Turkey Statement)	0	0	0	0	0	0	0							
Departures (IOM)	0	0	0	0	0	0	0							
Total departures from the island	0	0	0	0	0	0	0							

Source: Ministry of Citizen Protection National Coordination Center for Border Control, Immigration and Asylum (2020).

Figure 5. 'Vial' RIC, Chios island, Greece.



Image: T. Fouskas, December 2019.

appropriate healthcare that they emphasize during consultations negatively affect their mental well-being (MSF, 2017b).

3. Migrants, asylum seekers and refugees in Greece during the COVID-19 pandemic

Multiple COVID-19 cases were detected in accommodation centers in mainland Greece (see Table 4). During the first case of COVID-19 multiple attempts to enter via the Greek-Turkish land borders recorded leading to the prevention of entry and border sealing policy (Ministry of Migration and Asylum, 2020a) and the suspension of asylum applications due to the instrumentalization of migrant flows and securitization to limit the spread of COVID-19 respectively (Asylum Service/Ministry of Migration and Asylum, 2020b) for migrants who arrived in Greece from Turkey. A total of 26,532 people were prevented from entering the country illegally, and 218 individuals were arrested by March 3, 2020 (Kathimerini, 2020c). Since March 13, 2020 (Asylum Service/Ministry of Migration and Asylum, 2020b) which extended to April 10, 2020, the suspension of reception and public service by the Asylum Service was extended until Friday, May 15, 2020 in order to limit the spread of COVID-19 virus and protect public health. All administrative

Figure 6. ‘Moria’ RIC, Lesvos island, Greece.



Image: T. Fouskas, December 2019.

actions were suspended (recordings, interviews, filing of an appeal, etc.). The validity of Asylum Seekers' Certificates and Residence Permits expiring before May 15 was extended (Asylum Service/Ministry of Migration and Asylum, 2020c, 2020d). The Greek Government and the relevant ministries aimed to prevent the dispersion of the COVID-19 and protect employees at Migration Services and the public (European Migration Network, 2020). Remedying subsequent dysfunctions concerning legal migration procedures and legality of stay for TCNs was necessary (European Migration Network, 2020). The Ministerial Decision regarding the extension of residence titles of TCNs to ensure their legal status of residence, was issued on March 30, 2020 (European Migration Network, 2020; Government Gazette, 2020).

In the camp of Ritsona, 23 patients were among 63 residents of who were tested immediately on March 31, 2020 after a woman was found to be infected at a hospital in

Table 4. COVID-19 cases among migrants, asylum seekers and refugees in Greece.

Area	Date	Cases
Ritsona	31 March, 2020	23
Malakasa, East Attica	5 April, 2020	1
Koutsohero, Larissa	10 April, 2020	Quarantined after tracing a Roma case
Porto Heli, Argolida	19 April, 2020	
Kranidi, Argolida	20 April, 2020	150
Megala Therma, Lesvos	12 May, 2020	2
Efthalou beach, Southern Lesvos	15 May, 2020	2
Kranidi, Argolida	26 May, 2020	3
Nea Kavala, Kilkis	3 June, 2020	1
Northwest coast of Lesvos	27 June, 2020	3
Thessaloniki	8 August, 2020	1
Plomari, Lesvos,	9 August, 2020	17
Chios	12 August, 2020	1
Lesvos	12 August, 2020	1

Athens after giving birth. Greek health officials had placed a refugee and migrant camp northeast of the capital in quarantine after 23 of its residents tested positive for Covid-19 (Kathimerini, 2020d; NPHO/EODY, 2020a).

Moreover, the accommodation centers in Malakasa placed under total sanitary isolation for 14 days following the detection of a case of COVID-19 on an individual who is a resident of the structure (NPHO/EODY, 2020b; Kathimerini, 2020e). Confinement measures in his/her family member and tracing procedures of identifying individuals who came in contact with him/her were implemented, including staff and army personnel. However, later within the same month, five TCNs broke quarantine rules and went missing from the Malakasa center and arrested later (Kathimerini, 2020f). Following the detection of a COVID-19 case of a Roma in Koutsohero of Larissa, apart from the Roma settlement where 20 cases identified by the National Public Health Organization (NPHO/EODY) checks, the facility of migrants in Koutsohero of Larissa was also quarantined, as the tracking revealed that the 32-year-old Roma who was the first identified case had contacts with refugees residing in this facility (ANA-MPA, 2020a).

In addition, a positive COVID-19 case in the temporary facility outside Porto Heli (IOM Office in Greece, 2020a, 2020b) discovered on April 19, 2020. A 6-month pregnant woman from Africa who hosted at the temporary facility for asylum seekers in Porto Heli, Southern Greece, required hospitalization concerning her pregnancy and was transferred with an ambulance to the hospital of Nafplio (IOM Office in Greece, 2020a, 2020b). According to the measures developed by the Greek Authorities and through relevant health checks and medical examinations, the woman was found positive to COVID-19 (IOM Office in Greece, 2020a, 2020b). A total of 150 migrants in an accommodation center tested positive for the new coronavirus (COVID-19) on April 20, 2020 (Kathimerini, 2020g; NPHO/EODY, 2020c) in Kranidi of Argolida. Greek health officials concerned about outbreaks in the migrant community (Kathimerini, 2020i). The residents of Kranidi

expressed alarm and demanded widespread testing in the community as the migrants regularly visited supermarkets, banks, and other venues (To Vima, 2020a).

Moreover, two cases of migrants with COVID-19 disease without symptoms detected in a temporary refugee accommodation center at Megala Therma, Lesvos island in a random sampling testing of the National Public Health Organisation (NPHO/EODY) on May 12, 2020 (ANA-MPA, 2020b; NPHO/EODY, 2020d). In addition, two more migrants who arrived in Lesvos on May 6, 2020 were found positive to COVID-19. Thus 4 out of the 70 migrants who arrived on the island from Turkey between May 11-15 were positive. The cases identified as part of a random sampling testing. All cases are not placed in the RIC in Moria, as from March 1, 2020, those irregular migrants who arrive at the Greek islands are not admitted to the RICs, but specific quarantine structures.

Three positive cases of coronavirus diagnosed in the residents in the accommodation structure in Kranidi, and the Ministry of Migration and Asylum, Ministry of Citizen Protection and Ministry of Health implemented measures of restriction of movement for the residents for 15 days (ANA-MPA, 2020c). A pregnant woman detected as a positive asymptomatic case of COVID-19 at the Refugee-Migrant Accommodation Center of Nea Kavala (Ethnos, 2020). The center placed in a preventive quarantine for 14 days, and the services of NPHO/EODY implemented relevant protocols. Primary and secondary schools in the area attended by migrant and refugee children closed as a precaution measure, and disinfections carried out.

Three positive cases of coronavirus COVID-19 cases detected in Lesvos island (Kathimerini, 2020j). These considered three asymptomatic sick refugees and migrants, who along with 33 others in total were rescued by the Coast Guard north of the northwest coast of Lesvos and transported to Petra's port. A migrant who was staying in a hotel in Thessaloniki (To Vima, 2020b) was found to be positive for COVID-19. As a result, the entire hotel was quarantined. The hotel was used as a residence for migrants and refugees diagnosed with various underlying diseases and therefore had to be removed from the accommodation facilities. Positive and asymptomatic for COVID-19 were detected 17 of the 38 refugees and migrants who arrived in Plomari of Lesvos and transferred to the quarantine facility in Kara Tepe of Lesvos (ERT, 2020a).

In Chios, a 35-year-old migrant hosted in the RIC of "Vial" with 30 more people was the first COVID-19 case in such structures on the islands of the eastern Aegean. He was transferred to the hospital and those who came in contact with him isolated at a quarantine structure (ANA-MPA, 2020e). The RIC was placed in quarantine until August 25, 2020 (Ministry of Migration and Asylum, 2020d). In Lesvos, a newly arrived third-country national was also found positive for COVID-19 and transferred to the quarantine facility in Kara Tepe of Lesvos (Sto Nisi, 2020).

Protection measures against COVID-19 in the RICS, in the accommodation centers, and the Asylum Service/Ministry of Migration and Asylum were implemented in mid-March 2020. The measures included the suspension of all special activities and facilities in the camp like schools, libraries, and exercise areas, while new arrivals should be checked for a fever and other symptoms of Covid-19 and confined to quarantine if found to be ailing (Kathimerini, 2020k). Sanitation measures implemented to ensure that all common-use areas are regularly cleaned and updated and instructions for the five island camps' residents twice a day in multiple languages including Arabic, Farsi, English, French,

and Greek were distributed (Kathimerini, 2020k). TCNs in camps were discouraged from strolling around the facilities or going outside the RICs, even for getting supplies. Moreover, controlled entry and exit in two camps in Malakasa and Sintiki of Serres were announced and expected to operate as the two centers set up to function as closed centers (Kathimerini, 2020l). In addition, preventive measures to avoid the spread of COVID-19 in RICs and accommodation centers of TCNs was launched, via a National Action Plan of Crisis Management in Refugee Structures entitled: AGNODIKI. It included delivery points by companies and the installation of ATMs within the structures (GOV.GR, 2020d).

The restriction on movement entitled “Measures against the occurrence and spread of cases of coronavirus COVID-19 in the Reception and Identification Centers, throughout the Territory, for the period from 21.3.2020 to 21.4.2020” extended via the relevant Joint Ministerial Decisions (Minister of Civil Protection, Minister of Health, Minister of Migration and Asylum) until 31st August (the measures apply to all types of accommodation structures throughout Greece, aiming at preventing the occurrence and spread of COVID-19) and on August 28, 2020 extended until 15th September 2020 (Ministry of Migration and Asylum, 2020c). This measure is problematic as there was concurrently a lifting of restrictions for the public (from 4th May) and for international visitors (from 15th June). In all cases, the staff of the Ministry of Migration and Asylum and National Public Health Organization (NPHO/EODY) deployed in the areas and attempted to track down TCNs, state employees, staff of international organizations and non-governmental organizations and others who were in contact with infected individuals. At the RICs of Moria (Lesvos), a medical evaluation space was created on the perimeter of the center (Athens-Macedonian News Agency, 2020d) and the operation of Outpatient Clinics in RIC of Chios launched, both in early May 2020 (Ministry of Migration and Asylum, 2020b).

4. Conclusion

How does the situation of refugees/asylum seekers/migrants compare with the native population with the COVID-19 policies? What areas are of particular concern in the future? These questions perplex the current situation in the midst of the COVID-19 pandemic in Greece. The islands’ conditions are precarious and the government aims to construct mass detention/closed centers that are strongly resisted both by locals and refugees/asylum seekers/migrants. The outbreak of the COVID-19 pandemic marked the multiplication of health needs, the declaration of a state of emergency has in many cases led to measures taken to discriminate against the rights of refugees, asylum seekers and migrants in the name of tackling the pandemic. Greece continues to apply the restriction of movement on asylum seekers, refugees, and migrants, in the reception and identification centers and the accommodation structures of the country, at a time when all these restrictions lifted throughout the country and measures such as the use of a mask is mandatory and in general, is recommended to implement hygiene measures for the COVID-19. According to the Ministry of Migration and Asylum, “the goal is to prevent the occurrence and spread of COVID-19 cases” (IN.GR, 2020a). However, despite government allegations, extending the restriction of movement on refugee/migrant identification centers and accommodation structures until 15 September is more like imposing social and racial discrimination between nationals and third-country nationals (TCNs) (migrants, asylum

seekers and refugees) and not an integrated scientific approach for the implementation of public health protection measures throughout Greece, for nationals and TCNs (IN.GR, 2020a). The continuously congested conditions in the reception and accommodation facilities make the necessary COVID-19 precautions problematic to be implemented as well as hygienic environments and physical distancing. Inclusion of all asylum seekers, refugee, and migrants in the national response measures should be instantaneous and considered not only as a humanitarian action, but also crucial to public health policy to better manage response to the spread of the virus in Greece. In this context, the contradictory policy of the Greek state which, on the one hand, promoted tourism quite aggressively with slogans such as “We stay safe, we enjoy Greece” and “Endless Greek Summer” emphasizing that Greece is the most COVID-19 safe Mediterranean country and on the other gradually imposing new measures for the general population throughout the country. Since August 14, 2020, the Government took measures since the new outbreak of cases in Greece (Ta Nea, 2020a; ERT, 2020b; IN.GR, 2020b; To Vima, 2020c). These include:

- i) 50 people limit for public and social events, except those to which special rules apply, such as restaurants, theaters, and movie theaters, until August 31, in epidemiologically affected areas (GOV.GR, 2020a).
- ii) Ban on the operation of restaurants and entertainment venues from 00:00 am until 07:00 am throughout Attica, until 31 August. Also, the ban applies to Crete and Eastern Macedonia and Thrace (GOV.GR, 2020b).
- iii) Special measures in the islands of Paros and Antiparos. Suspension of any kind of event, a limit of nine people in each public gathering. Limit of people at the tables of the shops, and mandatory use of facemasks everywhere.
- iv) The measures for the island of Poros extended until August 24, with the only difference being the closing of the stores at midnight instead of 11:00 pm.
- v) Implementation of mandatory use of a facemask in high-concentration areas, such as military camps, social solidarity structures, and accommodation structures for third-country nationals (GOV.GR, 2020c).
- vi) Preventive laboratory testing for the COVID-19 of all those returning from leave in nursing homes and those working in high-concentration spaces (e.g., inside military camps, social solidarity structures, and accommodation structures for refugees and migrants) under the responsibility of employers or supervisors.
- vii) Under the responsibility of employers, implementation of mandatory tests on returnees from summer vacations, at healthcare structures.

The abovementioned policy inconsistency shows that politicians are unconcerned about the COVID-19, which explains the detachment about hygiene and conditions in migrant/refugee accommodation centers. Simultaneously, the general population is also affected by this ambiguity (e.g., mandatory use of facemask in general, but not in restaurants, slackening concerning personal safety and hygiene), resulting in diverse attitudes and perceptions about the COVID-19 measures. Any public health protection policies adopted, such as local lockdowns, mandatory use of facemasks etc. should be implemented according to the principles of necessity, proportionality and respect for the principle of non-discrimination and refrain from perpetuating interim measures through the abusive invocation of emergency measures. The measures implemented have to ensure the health of the populations of refugees, asylum seekers, migrants and consequently the health of the country's overall population.

After 2015, the arrival of refugees, asylum seekers, and migrants impacted heavily on the national landscape, revealing their incapacities regarding their reception mechanisms and (Fouskas, 2017, 2019) integration policies on employment, education, health care, social care and housing, and intercultural coexistence. Due to these inadequacies, it mobilized a great number of citizen initiatives, international and non-governmental organizations (Fouskas et al., 2019; Fouskas et al., 2019). Since 2015, Greece has faced the most massive flows of asylum seekers, refugees, and migrants of recent years as increased dramatically. Economic migrants and populations displaced from their origin countries entered Greece's territory to apply for asylum or passed through the country to continue their journey to their destination, towards other European countries (Fouskas, 2016, 2018, 2019). According to the statements of the Greek Minister of Migration and Asylum in the Parliament, the cases of COVID-19 in accommodation centers correspond to 0.2% of the total migrant population and are limited to 3 of the 93 total structures in Greece, underlying that "Our islands remain 'clean'" (Mitarakis, 2020). However, a possible COVID-19 outbreak could decimate this vulnerable population. However, it is challenging to take the necessary precautionary measures against the pandemic in the RICs and accommodation centers, such as maintaining social/physical distancing between individuals and implementing hygiene rules. The overcrowded structures on the islands urgently need decongesting while on the mainland, efforts to create new housing are crucial to contain the COVID-19 virus in a humane and dignified way. The RICs on the Greek islands are not adequately prepared for COVID-19 (HRW, 2020), and the situation is like a volcano waiting to explode as physical distancing is impossible and containment of an outbreak in such settings will be devastating. In this precarious context, local societies develop perception and attitudes of intolerance, fear towards migrants, asylum seekers, and refugees, while seeing them as a potential "health bomb". At the same time, pro-migrant mobilizations and solidarity that characterized the 2015-2018 reception crisis are led to the rarefaction and disappearances of such practices due to COVID-19 emergency and social distancing (Mazzola and Martiniello, 2020). On 4th August, a legal migrant from Cameroon was used as a scapegoat from some passengers while traveling by train on the route from Athens to Thessaloniki. During one of the stops, he was found in a check that he did not have a ticket to reach his destination, Karditsa, and was reportedly forced to disembark in Lianokladi station, due to complaints from passengers that it is a suspected case of COVID-19 (Naftemporiki, 2020). All passengers reacted with panic and aggressiveness towards the Cameronese and asked him to get off the train. The train inspector asked him to sit on the floor of the wagon until the next station, where the authorities were waiting. The 48-year-old was transported from Lianokladi station with an ambulance to the hospital of Lamia with police escort. Also, in Chios, on 12th August, a resident was arrested after a complaint about racist posting on social media a call to action against the refugees in which he stated that "they are destroying land properties and that are Wanted Dead or Alive" (Ta Nea, 2020b). There he was found that he did not have any relevant symptoms. 29,184, individuals on the five islands, including families with children, unaccompanied refugee minors and young children, pregnant women, new mothers, the elderly, others with chronic illnesses and disabilities, are particularly vulnerable under inhumane conditions, close quarters and limited access to sanitation. Providing information in multiple languages to stay healthy via quarantine guidelines is necessary. The

Hellenic police used loudspeakers to broadcast messages about related movement restrictions due to COVID-19 in 10 languages, including Arabic, Urdu, and Farsi. Such measures should be accompanied by information via social media and provision of free bottled water, sanitation, and hygiene products (masks, antiseptics, gloves) to vulnerable groups. The country's priority has to be the provision of support to migrants, asylum seekers, and refugees as various conditions and factors could have shaken their health by before and during their journey. They could suffer from physical exhaustion, extreme states of pain and misery, dehydration or cold, combined with other problems such as poor living conditions, unhealthy lifestyles or chronic illnesses that could impact their physical and mental health. The transfer of individuals from the RICs and accommodation centers to apartments and hotels will safeguard public health via alternative accommodation methods, providing solidarity, dignity and safety to asylum seeker, refugees and migrants. The urgent decongestion of the overcrowded RICs and accommodation centers is required to avoid the risk of the rapid spread of the infection. Forced lockdown of asylum seekers, refugees, and migrants on the grounds of public health cannot be justified as a supreme measure, as what should be guaranteed is that that no asylum seeker, refugee, and migrant is left behind amid the COVID-19 pandemic.

5. References

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