COMMUNITY PEACEMAKER TEAMS
AEGEAN MIGRANT SOLIDARITY

DEADLY END

DEATHS OF MIGRANTS IN MORIA RECEPTION
AND IDENTIFICATION CENTRE / 2016-2020

LESVOS 2023
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LEASEOS 2023
Cover photo: Elias Marcou
Aegean Migrant Solidarity

Aegean Migrant Solidarity is a regional group of the Community Peacemaker Teams organisation, which places teams in areas of conflict at the invitation of local peacemaking communities. AMS has been active in Lesvos island, Greece since 2014. The team supports and amplifies the voices of local peacemakers who risk injury and death by waging non-violent direct actions to confront systems of violence and oppression.

The work of Aegean Migrant Solidarity includes:
• Human rights observation and reporting
• Accompanying partners as they work non-violently to defend their rights and their communities
• Advocacy: amplifying the stories and voices of those experiencing violent oppressions
• Solidarity networking: collaborating with individuals and organisations to work toward change.

AMS understands that violence is rooted in systemic structures of oppression. It is committed to undoing oppressions, starting within our own lives and in the practices of our organisation.

Acknowledgement

The report is dedicated to the memory of those who lost their lives in Moria and to those who managed to survive. The authors wish to express their sincere thanks to all persons who have contributed, in various ways, to the research for this report. Special thanks go to all the volunteers who have worked with the AMS of Community Peacemaker Teams.
Your efforts, commitment and solidarity have not been forgotten.

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Introduction

This report is published in a liminal era, when its subject, Moria Reception and Identification Center (RIC) in Lesvos, Greece, is a thing of the past, but while migration detention centres remain the present and the future of Greek and European migration policy (see Photo 1 in the Appendix).

Countless journalistic and academic articles in the local and international press have been written about Moria RIC. Intense and charged discourses have made attempts to portray the stories of suffering and trauma associated with its name. Following its demise, there have been numerous appeals for there to be no more ‘Morias’. Nevertheless, apart from the general acknowledgement that Moria RIC was a ‘hell on earth’, we have found no serious admission of responsibility for the construction of this ‘hell’, nor restorative action for those who suffered there and tragically few investigations into the deaths that occurred during its operation.

This report focuses on the last point, namely the deaths of
people residing in Moria RIC\(^1\) starting from the implementation of the ‘EU-Turkey Deal’ on 20 March 2016 until the RIC’s permanent closure on 9 September 2020.

Despite the extensive production of discourse on detention centres and Moria RIC in particular, we identify a research gap regarding the deaths in these camps in published reports and statistics. Within this discourse, the deaths that occurred within the RIC are perceived as ‘tragic’ but ‘isolated incidents’, often completely disconnected from the existence and functioning of the RIC. This perspective – for anyone who has been involved in any way with the RIC’s environment – is disconnected from reality.

On the other hand, among theoretical approaches to detention centres, Giorgio Agamben’s theory tends to prevail, which describes a totalitarian power over both life and death, as well as a non-value in social life. The notion of ‘bare life’,\(^2\) i.e. a life limited solely to biological existence, deprived of socio-political dimensions and values, often serves as a metaphor for the lives of migrants in detention centres. However, the experiences of migrants, and our own experiences, do not confirm this approach. Solidarity with migrants is expressed by thousands of people, and the struggles against detention centres (from inside and outside), are a clear message that migrants’ lives are far from ‘bare’ and invisible.

Despite the rhetoric of a ‘humanitarian crisis’, the involvement of civil society through the presence of dozens of NGOs

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1. With the exception of one death in the municipal camp of Kara Tepe, for which we were unable to collect more data.
working inside detention centres, have failed to make them either ‘humane’ or sustainable. From our point of view, the way detention centres were built and operated implicitly foretold of the migrant deaths that followed. In other words, and according to the testimonies of the people we spoke to, the distance between life and death becomes dangerously close inside the detention centre. It is precisely this liminal space that we try to describe in this report.

This report attempts to present both quantitative and qualitative data on the deaths that occurred in the detention centres of Lesvos, in particular after their conversion into ‘hotspots’ in March 2016. After the EU-Turkey Deal, the ‘hotspot’ model became the ‘EU’s main approach to migration management’, ‘allowing the hosting in one place of all the relevant European agencies in order to bolster their cooperation and to centralise control over the common external border’. According to its critics, this model ‘has been marked by endless waiting, uncertainty and the erosion of whatever meagre rights were previously in place. Its introduction marked the degradation of asylum procedures in Greece.’

This report further attempts to preserve memories that the architects of migration policies have every reason to want to erase. We hope that the records within this report, together with the descriptions that accompany them, will be considered not only as inextricable from Greek and European management of migration but also as a part of the history of Lesvos.

Two and a half years after Moria RIC’s destruction, the overall account of its operation has not yet been written. This report, with all its imperfections and shortcomings, attempts to make a contribution to that account.

1.1. Moria RIC

The predecessor of Moria RIC was EHPA (Special Area for the Stay of Foreigners) in Pagani, Mytilene, which was permanently closed in 2009 after repeated revolts by migrant detainees and after local and international outcry over detention conditions. After 2009, the main migration route was located at the Turkish land border of Evros, resulting in a decrease in the number of arrivals by sea to Lesvos, with local police stations used as informal detention facilities for new arrivals. The KEPY (First Reception Centre) of Moria, as it was originally called, began construction in early 2013 and started to operate semi-formally within the same year. In 2015 it was renamed as a RIC (Reception and Identification Centre)/Hotspot.

In March 2016, two important events took place that changed the management of the migration issue at the Eu-

ropean level. Their consequences became clear both on the island of Lesvos in general, and in Moria RIC specifically. The first was the shutdown of the so-called ‘Balkan Route’, which immobilized thousands of people who were aiming to move to central Europe, passing through the Balkan countries. The second was the Joint Declaration of the European Union and Turkey on 18 March 2016, which, with regard to Lesvos, brought about both a decrease in asylum seeker arrivals compared to the previous year, through the intensification of the border control regime, as well as the transformation of Moria RIC/Hotspot into a place of spatial and temporal confinement for large categories of new arrivals. In short, the European Union gave funds to Turkey and Greece to keep migrants confined first to Turkey and then, if they arrived in Europe, to contain them to specific Aegean islands for asylum processing.

There were various gradations of spatial confinement. The one most closely adhering to the prison model is that of the PRO.KE.K.A (Pre-Removal Detention Centre) (see Map 1 in the Appendix). The PRO.KE.K.A was a specially designed and guarded area within the RIC where those in deportation confinement

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proceedings were held. This category included: (a) migrants of nationalities whose asylum rates were below 25%; (b) migrants whose asylum claims had been rejected in the second and/or third instance; (c) informal detention of migrants who had been arrested for an offence, but who had not been given a prison sentence or pre-trial detention in one of the country’s penitentiaries; (d) those who had been placed in a ‘voluntary return’ procedure through IOM (International Organisation for Migration) programmes. The PRO.KE.K.A was under the jurisdiction of the Lesvos Police Department (under the Ministry of Citizen Protection) but the framework of its operation and implementation is quite blurry. That is to say, it functioned as a ‘prison’ (‘deprivation of liberty status’) for


11. The International Organization for Migration runs the Assisted Voluntary Return programme to migrants’ countries of origin. For more information, see its website: https://greece.iom.int/assisted-voluntary-return-and-reintegration-migrants-situations-vulnerability.

12. The establishment and operation of the PRO.KE.K.A. was determined by the FEK 118/B/21-1-2015. In 2018 the Greek Council for Refugees published an investigation on administrative detention in Greece, where it discovered a number of problems and violations of the current legislation. See Greek Council for Refugees, Administrative detention in Greece: findings from the field (2018), available online at: https://www.
people who had not been tried or sentenced to imprisonment but were placed under the category of ‘administrative detention’ with the purpose of deportation. Most detainees did not know how long they would stay in detention.

Moria RIC itself was yet another area of migrant detention, although it was not formally a closed detention centre. While waiting for the bureaucratic procedures (described below) to be completed, migrants had the right to move outside the RIC, but the obstacles and restrictions were often overwhelming, resulting in their confinement there for an unknown period of time. From 2016 onwards, restrictions of all kinds were gradually intensified, culminating in 2020 when the mobility of migrants outside the RIC was only allowed in exceptional cases.

Given that the RIC was about 7 km away from the city of Mytilene, transportation could be done by bus with a ticket, which in many cases the migrants were unable to pay. In addition, the town of Mytilene became, over time, an extremely hostile environment for newly arrived migrants due to increasing racism. During the winter months, there were few indoor spaces (public or private) that allowed migrants to enter. During the summer months, access to public spaces (parks, beaches, etc.) often meant harassment by the police and racist local residents.

Spatial segregation can also be understood by taking into account the island factor. The choice of certain Aegean is-

lands bordering Turkey for the construction of RICs/hotspots was not coincidental. The border islands themselves place natural limits on movement to mainland Greece, as this can only be done from the islands’ ports or the airports, which are under strict surveillance by the security forces. In addition to the special ‘prison’ of the RIC, the islands themselves have been named ‘prison islands’.

The various levels of spatial confinement described above worked in parallel with temporal traps and confinements related to legal procedures implemented for each individual migrant. The first stage, common to all, was the registration process upon arrival in Moria. The process of the first registration was carried out in a relatively short time (within a few days) for people of Syrian origin and longer for other nationalities. This was followed by a screening and classification process in which profile, gender, and nationality determined the ‘sub-groups’ to which a person could be assigned. Depending on the ‘sub-group’, some left the island for central Greece quickly, while others were stranded on the islands for months or even years, and others returned to Turkey or their countries of origin.

An important stage in this whole process was the recognition of ‘vulnerability’\textsuperscript{14}. This process involved waiting to be interviewed and, meanwhile, collecting medical reports

\textsuperscript{14} According to Article 14, paragraph 8 of Law no. 4375/2016, vulnerable groups are: a) unaccompanied minors; b) persons who are disabled or suffering from an incurable/serious illness; c) the elderly; d) pregnant/postpartum women; e) single-parent families with minor children; f) victims of torture, rape or other serious forms of psychological, physical or sexual violence or exploitation, persons with post-trau-
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demonstrating their vulnerable situation. Obtaining ‘vulnerability’ status ensured that they would be kept in special rooms within the RIC, that their asylum claim could not be considered ‘inadmissible’ based on nationality, meaning they could not be returned to Turkey as a ‘safe third country’, and that the geographical restriction limiting them to the island of their arrival would be lifted.

For those who did not belong to one of the vulnerable groups and who managed to submit an asylum application, the procedure was: asylum application > (long) wait for interview > interview > (long) wait for decision > decision. In the case of a negative first decision > legal challenge to the decision (appeal) > (several months) waiting for a second interview > second interview > (several months) waiting for the second decision. In the case of a second negative decision, some would be subject to deportation proceedings and some would make a subsequent asylum claim.

At this point, it should be stressed that the criteria, the actors involved in the procedures mentioned above, and the time needed to complete them were constantly changing without any rule or justification. The wait time for migrants to complete the asylum procedures was compounded by other daily ‘waits’. The endless queues for the distribution of food, water and clothing, as well as access to absolutely inadequate sanitary facilities, were part of the mosaic of immobi-

mastic stress disorder syndrome, in particular survivors and relatives of shipwreck victims; and (g) victims of trafficking in humans. For these persons, an obligation of special care is provided for at all stages of the procedure from their entry into the country, including the registration and examination of the application for international protection.
sation and imprisonment.

How the RIC functioned can only be understood by recognizing the actors involved in its operation. Here, we find a matrix where criminalisation and repression coexist with humanitarian intervention; we find national and international military/police forces, Greek, European and international actors involved in the various legal stages mentioned above, and finally, dozens of NGOs, with many different areas of responsibility.
Methodology

The EU-Turkey Deal of March 2016 and its incorporation into Greek law brought radical changes in terms of ‘migration management’. The RICs, or as they were originally called ‘hotspots’, are the epitome of the new Greek and European approach to migration, characterised by ‘the full institutionalisation and control of mobility’. That is why we have chosen this as the starting point of this report.

With the exception of one death recorded in the municipal camp of Kara Tepe, all cases concern people living in Moria RIC. The reason why we could not extend the same research to other camps is related to the limited capacities of the writing team. Some of the identities of the dead are known, others not. Nevertheless, we have chosen to protect the privacy

16. Kara Tepe was a municipality-run refugee camp, managed in collaboration with the UNHCR, which operated from 2016 until it was evicted and closed down on 29 April 2021.
of these people, and where their identity is known we refer only to their initials.

This report is structured along three axes. First, it is the product of systematic press monitoring and research from March 2016 to September 2020. The 26 instances of death presented have been published in the local and/or national and/or international press. In some cases, the news stories were a few lines long, announcing the death without further information, while others were more extensive reports on the circumstances under which the incidents took place. In those four and a half years inside the RIC, there were rumours of deaths that were not reported in the press and are not presented in the report. We cannot rule out the possibility of other incidents, but we have not been able to confirm these from reliable sources.

Secondly, we talked to and interviewed people who were directly or indirectly related to the events described. We conducted 12 interviews under the condition of anonymity with migrants, lawyers, doctors and NGO workers, and in some cases, spoke to others who knew the people that lost their lives. For each case, we tried to find testimonies and evidence to contextualise the events. The testimonies of our interviewees are part of their personal experiences and we would like them to be read as their subjective perspective.

Thirdly, we extended the research to both the relevant academic literature and journalistic articles. At the same time, we tried to keep track of existing legislation and the changes that have taken place over the years.

Our intention in this report is not to assign blame for the deaths included here, as this is an area for the justice system
and the judiciary. We intend to shed light, where possible, on the circumstances in which many people lived and died.
In at least seven cases, the conditions of Moria RIC contributed to, if not directly caused, death in the camp. A combination of overcrowding, poor protection from extreme weather, dangerously insufficient infrastructure and politically-expedient abandonment were all aspects of the circumstances surrounding these deaths. Alongside these circumstances, the ‘matrix’ of actors described in the introduction – a mix of state, private, and NGO actors – allowed for a vaguely-defined map of responsibility; responsibility for various provisions (Water, Sanitation And Hygiene, electricity, Non-Food Item distribution) and zones in and outside the RIC being devolved, sub-contracted, or left only informally met by one of the numerous NGOs.

Among the deaths, two broad and interlinking categories emerge: deaths resulting from weather conditions; and deaths resulting from fire; both exacerbated by overcrowding.
Despite repeated deaths under similar circumstances over the years, it seems clear that camp management failed to learn its lessons. Hence the repeated deaths from conditions of extreme cold weather, the warnings of local campaigners going unheeded for a need to ‘winterize’ the camp, and the multiple fires breaking out without clear evacuation plans.

The following chapter attempts to analyse these failings through seven instances of death.

### 3.1. Capacity

The official capacity of Moria Reception and Identification Centre (RIC) was 2,757 persons. In September 2019, a major fire broke out resulting in the death of a person and the destruction of some housing containers, reducing the capacity to 2,440 people (we will return to this fire later in the chapter). After the EU-Turkey Deal, which restricted the movement of migrants crossing from Turkey by sea to the five ‘hotspot’ islands of Lesvos, Chios, Samos, Kos and Leros, the population in the RICs on all islands, and especially in Lesvos, increased dramatically. This led to migrants living in deplorable conditions as their needs could not be met. In January 2020, 21,000 migrants were stranded on Lesvos. According to records, three quarters of the population were staying in the so-called ‘jungle’, an olive-grove overspill area around the

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17. Greek Council for Refugees, *The ‘jungle’ of Lesvos: people trapped in danger* (October 2019), available online at: https://www.gcr.gr/el/ekdoseis-media/reports/item/download/629_ca1e41bc7cc11523816a077b40515a4f.
Moria RIC with makeshift facilities (see Photo 2 in the Appendix). People were living in thin tents, unsuited to cold weather, in inhumane living conditions. Meanwhile inside the RIC, people were living in overcrowded containers. Electricity in the ‘jungle’ area was carried through cables that were literally overhanging peoples’ tents. Power cuts were frequent, as the overcrowding in the camp meant that the electricity grid was overloaded. This carried with it the risk of fire, as reportedly happened in the fire of September 2019. By 2020, according to information from people staying in the RIC and NGO workers, there was one toilet for every 200 people and one shower for every 506 people.\(^{19}\) People were forced to wait endless hours in queues for their daily needs, in appalling unsanitary conditions without any provision for disabled people. In addition, residents were forced to wait in line for hours on end for food, receiving an inadequate portion that did not meet basic nutritional needs.\(^{20}\)

At the same time, throughout the wider area of Moria, the water supply was insufficient for the whole population and many times people did not even have access to drinking water. They could not take a shower or use the toilet as the water was cut off at regular intervals, resulting in outbreaks of infectious diseases as even basic hygiene measures were not in place.\(^{21}\)

According to Médecins Sans Frontières, the constant trau-

\(^{19}\) Ibid.
\(^{21}\) Ibid.
matic stress experienced by the people living in the Moria RIC was due to the living conditions and the constant danger people faced. In September 2018, MSF reported an increase in children attempting suicide. The poor living conditions, the failure to meet their medical needs, the complex bureaucratic procedures for asylum applications and the risk of deportation were all factors that took a physical and mental toll on all people living in the Moria RIC.\textsuperscript{22}

In this chapter, we document seven cases of death that were a consequence of the living conditions of the people in the Moria RIC: due to overcrowding, cold weather, infrastructural failures, and fires. In addition, we will attempt to identify various institutional and structural failings that contributed to these deaths.

3.2. Winter 2016-17: Deaths from the cold

On 24 November 2016, two people, a 66-year-old woman and a six-year-old boy – her grandchild – died after a fire broke out while they were cooking. Their gas stove exploded, resulting in their deaths, injuries to others, as well as completely destroying 20 large tents, 100 smaller tents and a housing container.\textsuperscript{23}

These deaths were followed soon after by a series of

\begin{itemize}
\item \textsuperscript{22} Medecins Sans Frontieres, ‘Self harm and attempted suicides increasing for child refugees in Lesbos’ (17 September 2018), available online at: https://www.msf.org/child-refugees-lesbos-are-increasingly-self-harming-and-attempting-suicide.
\item \textsuperscript{23} Vithoulkas Dionyssis, ‘Tension eased after Moria fire - two refugees dead’, \emph{To Vima} (25 November 2016), available online at: https://www.tovima.gr/2016/11/25/society/ektonwthike-i-entasi-meta-tin-pyrgka-
deaths as a result of the cold weather.24 The winter of 2016-17 was extremely cold, covering Moria camp in a blanket of snow for many days.25 In January 2017, there was a deviation of 2.2 degrees Celsius in the average temperature in Mytilene and a 203% deviation in the average snowfall.26 In an effort to heat up poorly-suited containers and tents, people began using makeshift stoves. It is now believed that these stoves led to three deaths in one week by carbon monoxide poisoning. On 24 January 2017, A.M.A.E, a 22-year-old man from Egypt, died in his tent in Moria camp. On 28 January 2017, 46-year-old M.M. from Syria died in the same circumstances – crucially – in the same tent as A.M.A.E. On 30 January 2017, 20-year-old J.G.A from Pakistan also died from carbon monoxide poisoning.

3.2.1. An administrative grey-zone and the failure to investigate

Following these deaths, it was clear that no institution or agency took responsibility for an adequate and timely investigation—st-moria-dyo-nekroi-prosfyges/.


igation. According to a 2017 report by PRO ASYL and Refugee Support Aegean, ‘the Ministry of Migration has not pursued vigorously the investigation of these important cases in a timely and persistent manner. In most instances, investigations have been pending for a long period of time or have simply ground to a halt due to administrative red tape.’\textsuperscript{27} This failure to act was exacerbated by the complex matrix of institutional partners and vaguely defined allocation of administrative responsibility as described in the introduction.

One of the factors contributing to these deaths was that officials denied there was a problem in the first place. According to PRO ASYL/RSA, ‘On January 5th, the Minister of Migration, Giannis Mouzalas, confidently declared that no refugees were any longer “sleeping in the cold”’. After the deaths, he ‘responded aggressively to criticism following these serious incidents, deflecting responsibility to various factors that had allegedly obstructed better winterisation procedures’.\textsuperscript{28}

Alongside denial and deflection, there appears to have been little effort to conduct further investigation into the cause of death. By June 2017, no official cause of death had been established, and technical examinations required for the forensic reports were still pending. Therefore no prosecutorial investigation had been possible. The indeterminate administrative status of Moria RIC meant that various agencies refused to consider it within their mandate to investigate the

\textsuperscript{27} PRO ASYL and Refugee Support Aegean, ‘Greek Hotspots: deaths not to be forgotten’ (14 June 2017), available online at: https://www.proasyl.de/wp-content/uploads/2015/12/2017-06-14-RSA-Policy-Paper_Greek-Hotspots_Deaths-not-to-be-forgotten.pdf.

\textsuperscript{28} Ibid.
deaths. The Hellenic Centre for Disease Control and Prevention (KEELPNO) stated that the circumstances of each death did not fall within its remit and it could therefore not launch an inquiry. So too did the Hellenic Centre for Health Operations and the Public Health Director of the Northern Aegean Prefecture. After a request from RSA, the General Inspector of Public Administration stated that she would open an investigation only ‘after a complaint or a request made by a competent authority or government representative’. Meanwhile, no authority attempted to investigate reports that insulation provided to tents by a humanitarian NGO may have contributed to the inhalation poisoning. Although Minister Mouzalas stated that he ‘hoped these deaths made all of us wiser’, it is difficult to see how this would have been possible with no attempt to learn lessons from the failures of the camp’s infrastructure.

The surviving family members of Egyptian A.M.A.E. and Syrian M.M. brought a lawsuit against the Greek state for the death of their relatives. In June 2021, the Athens Administrative Court of First Instance made two landmark decisions against the Greek state and awarded compensation of 85,000 Euros to the family of the Egyptian man, and 250,000 Euros to the family of the Syrian, acknowledging that they had died from carbon monoxide inhalation after lighting improvised stoves in their tents to protect themselves from the severe cold. The court acknowledged the deplorable conditions at Moria RIC and pointed to the inaction of the authorities to

29. Ibid.
30. Ibid.
provide decent housing or adequate information to the residents about the risks they faced.\(^{31}\)

### 3.3. Another death from the cold

As the winter of 2017-2018 approached, camp management had again failed to plan and prepare the camp for the cold weather. Under the banner of the Open the Islands Campaign, civil society groups and grassroots collectives based in the Aegean islands – supported by 121 pan-European signatories – demanded that there should be no more deaths from the cold. Their opening statement, addressed to then-Prime Minister Alexis Tsipras, the European Commission and EU member states, outlines the obstacles to an efficient ‘winterisation’ plan: the lack of clear allocation of responsibility to local and international actors in doing so, and a lack of oversight around the spending of 70 million Euros granted to the Greek government to ‘manage’ the situation.\(^{32}\)

The call went unheeded, and although that winter saw no deaths resulting from weather conditions (the result of a particularly mild winter), still the population in the camp continued to escalate. By January 2019, the population had reached to 5000 people\(^{33}\). On 8 January 2019, 24-year-old J.P.A from Cameroon died. He had landed in Greece just 48 days earlier.

NGO workers in Moria RIC reported:

\(^{31}\) Yannis Papadopoulos, ‘Justice for Moria deaths’, op. cit.
\(^{32}\) Open the Islands Campaign, ‘No more dead from the cold’ (12 October 2017), available online at: [https://opentheislands.wordpress.com/statement/](https://opentheislands.wordpress.com/statement/).
\(^{33}\) Refugee Support Aegean, ‘Moria nightmare’, op. cit.
“There have been power cuts in Moria and the Olive Grove since 27th December 2018, with the frequency of those cuts increasing and for longer periods. Those who live inside Moria camp have described conditions in which the electricity works only sporadically. Some report to have had no access to electricity for three days. The power network is rumoured to be overloaded leaving heating units useless.”\(^{34}\)

Facing criticism, Migration Minister Dimitris Vitsas claimed that J.P.A had been living in an Isobox container, equipped with heaters and blankets.\(^{35}\) His friends, however, stated that he had been living in a tent in the Olive Grove over-spill area, and had sometimes been hosted in their container. On the night he died, he had left his tent in the Olive Grove and come to their container. He had been complaining about the cold for three weeks.\(^{36}\) Meanwhile, a coroner’s report judged that he had died of a ‘heart attack’ caused by an ‘ischaemic cardiac episode’.\(^{37}\)

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34. Lesvos Solidarity – Pikpa, ‘Another death from the cold?’ (9 January 2017), available online at: https://www.facebook.com/notes/363042088382774/.
37. ‘Cameroonian man from Moria may have died of a heart attack, coroner says’, Athens-Macedonian News Agency (8 January 2019), available online at: https://www.amna.gr/en/article/323246/Cameroonian-from-Moria-may-have-died-of-a-heart-attack-coroner-says.
3.4. Administrative pressure on NGOs for makeshift responses

On 24 September 2019, a five-year-old boy from Afghanistan died after being run over by a truck. The incident occurred in a private area outside the Moria RIC, which was used by an NGO for distributing emergency supplies to migrants living in the camp. The five-year-old boy was playing in a cardboard box in an outdoor area. The driver of a truck passing through the area did not see the child inside the box and ran him over, resulting in the boy’s fatal injury. When the ambulance and medical staff arrived, they saw the child with severe head injuries and by the time he was taken to the hospital he had already died. Volunteers and NGO workers who were present at the event report that they experienced it ‘as an accident’. The driver of the truck was charged with manslaughter by negligence and it is unclear how this case has legally progressed. After pressure from humanitarian organisations, the boy’s parents were moved out of the camp to an apartment. ³⁸

This incident sheds more light on the role of NGOs within the RIC. As of September 2019, the population of migrants in Lesvos was 14,900 according to official UNHCR data, of which 42% were children. 12,650 of them lived in the Moria RIC and the informal surrounding extensions. ³⁹

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³⁹ Statistics taken from UNHCR Inter-Agency Consultation Forum,
at the time was described by migrants and NGO workers and volunteers as chaotic to say the least, with the daily risk of all kinds of ‘accidents’ as a result of the overcrowding. According to a worker at an NGO active in the camp:

“The streets in the vicinity of Moria were full of people walking in any direction, it was almost expected that there would be an accident. Even in the Olive Grove the risks of any kind of accident were always very high. From the simplest, such as someone slipping because the ground was in poor condition, to someone getting electrocuted trying to get high voltage current from the cables.”

- E. working, at the time, for an organisation active in the RIC.

With the RIC constantly expanding beyond its original dimensions and boundaries, there was a huge need for housing with no infrastructure. According to migrants, workers and volunteers, zones 10, 11 and 12 faced the biggest problem as, among other things, they lacked access to electricity and water (see Map 2 in the Appendix). At the same time, the extension of the RIC created tensions with the villagers and those who owned property in the vicinity as they saw their properties either threatened or encroached upon. According to E., the RIC administration did not want to install any permanent infrastructure necessary for the survival of the migrants in the RIC, so as not to come into conflict with the local residents in the area. As a result, the NGOs operating in the infrastructure of the RIC were pressured by the administration to

Meeting Minutes (4 July 2019 and 3 October 2019).
meet the needs in makeshift ways.

Migrants’ living conditions of deprivation created great tensions between communities, but also towards the RIC administration. Various kinds of mafias, as well as informal small shops, found a fertile ground to develop by meeting everyday needs that were almost always left unmet.

“The RIC used us [the NGO where E. was working] to gather tensions […], between the RIC and the locals, between the police and the migrants, we were a constant buffer zone between everybody, trying to make alliances. It was an extortionate condition for both workers and volunteers because we understood that if we weren’t there, no one would be there and maybe things would get even worse. It was all a constant dilemma with no good answer. I remember one incident in which the police asked the RIC to send an NGO to the migrants to threaten them that the police would come (!) Because there was an angry owner [a local].”

3.5. Multiple fires

Alongside the two deaths by fires documented earlier in this chapter, we have documented another three instances of death caused by fires. On 29 September 2019, 49-year-old F.T. from Afghanistan died in a fire in Moria camp. On

40. Anthi Pazianou, “Burnt hearts” are protesting’, Sto Nisi (30 September 2019), available online at: https://www.stonisi.gr/post/4347/kamenes-kardies-diadhlnwoyn-.
5 December 2019, 27-year-old N. from Afghanistan died in a fire in a container in Kara Tepe camp, a former municipality-run camp hosting 1300 migrants. And on 16 March 2020, a 6-year-old girl died again in Moria camp as a result of fire.

F.T. died on 29 September 2019 in a fire that destroyed at least eight Isobox housing containers. The fire left many injured and many more without warm clothes or shelter. An investigation by the fire department later found the cause to be a faulty and overloaded electricity system. In less than three months, the camp’s population had more than doubled from 5,450 in July 2019 to 12,650 at the time of the fire.

On 8 July, the New Democracy government came to power in Greece with a mandate to start a new chapter of migration management. Despite promises to decongest the islands of migrants, the number of migrant transfers from Lesvos to mainland Greece initially reduced under the new government.

44. Figures from the UNHCR Inter-Agency Consultation Forum, Meeting Minutes (4 July 2019 and 3 October 2019).
Between 1 July and 30 September, 11,021 migrants arrived on the island, while only 5,182 were transferred to mainland Greece. This led to a huge increase in Moria camp’s population, putting its already stretched infrastructure under increased pressure. At the UNHCR’s Lesvos Inter-Agency Consultation Forum on 3 October 2019, NGOs working on shelter infrastructure spoke of ‘several problems in Moria RIC due to the overcrowded conditions’ stating that ‘the existing facilities are not enough to meet the needs of the residents regarding electricity’.  

3.5.1. Manufacturing a crisis of public order

In response to the fire, the loss of life, and the protests of now-displaced communities living in Moria RIC, local and national police attempted to justify a heavy-handed, rather than humanitarian, response. Police gave a distorted picture of the events to the media during the fire. A spokesman from the Greek police force, Theodoros Chronopoulos, told the Associated Press that migrants had set two fires themselves, one outside the camp and one inside. However this statement came in the immediate aftermath of the fire, before any official investigation had been carried out into the cause of the fire.

The lack of a fire escape plan in the camp led to chaos

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46. UNHCR Inter-Agency Consultation Forum, Meeting Minutes (3 October 2019).
47. ‘Migrants in Greece set fires in camp, at least 1 killed’, Associated Press (29 September 2019), available online at: https://apnews.com/article/92a15950e8f948ef99ebdbcb5df2f966.
as those living in the camp would to break down fences to make emergency exits, while at the same time a group attempted to put out the fire themselves. Video footage shows widespread panic as the wire mesh fence surrounding the RIC blocked people from attempting to flee. In the press, police spokespeople portrayed the crowd as being ideologically anti-police, preventing officers and the fire service from helping with the evacuation. The Association of Police Officers of Lesvos described ‘horrible and fanatical attacks against police officers’, during which migrants threw rocks at officers and chanted ‘kill police’. Images also circulated of a fire truck, which had been attacked as it tried to put out the flames. However, members of NGOs working in the camp described a different picture. The Assembly of NGO Workers in Lesvos claimed that police had attacked migrants with CS gas as they were attempting to put out the fire, leading to rising tension and clashes with the fire service.

Hundreds were displaced throughout the night as a result of the fire. Many aid workers reported that police roadblocks were set up at both major entrance points to the camp in order to turn people back. Instead of responding with a plan to deliver aid, Ministers of the New Democracy government saw the incident as an issue of restoring public order. The

49. ‘NGO workers at Moria RIC: the police are to blame for the incidents’, Lesvos News (29 September 2019), available online at: https://www.lesvosnews.net/articles/news-categories/anakoinoseis-foreon/ergazomenoi-mko-sto-kyt-tis-morias-i-astynomia-ftaiei.
Chief of Hellenic Police, the Deputy Minister of Civil Protection, and the Secretary General of Migration Policy arrived in Lesvos soon after, bringing with them riot police units. F.T. ‘s death provoked large demonstrations of migrants living in the camp, as well as a significant wave of solidarity from people outside the camp, over the following days. Riot police implemented a lockdown of the camp by blocking the exit routes. This was not the first time that police had blocked protests in the camp from reaching the city of Mytilene, but the death of F.T. marked the start of a new period of migrant protest, during which police used roadblocks and CS tear gas as a standard practice in preventing free assembly in Mytilene.

It is clear that, despite repeated fires in the camps, the RIC administration still had no fire evacuation plan; none, at least, that was made available to the population or the workers there. Over the next five months, another two fires claimed lives, one in Kara Tepe and another in Moria camp. On 16 March 2020, a 6-year-old child died in a container in Moria from a fire outbreak. According to reports, the fire was an accident and not arson. At the time of the fire, the population in and around Moria RIC was 19,343 people, according to official records from the Ministry of Migration.

50. ‘The uprising in Moria is underway - reinforcements are coming’, Lesvos News (29 September 2019), available online at: https://www.lesvosnews.net/articles/news-categories/astynomiko-reportaz/se-exelixi-i-exegersi-sti-moria-erhontai-enishyseis.
52. Katy Fallon, ‘Child killed in Lesbos refugee camp fire’, Guardian (16 March 2020), available online at: https://www.theguardian.com/
3.6. Conclusion

The deaths analyzed above occurred because of exposure to the cold, fires, and a lack of sufficient infrastructure. We can see a pattern: that the conditions of Moria RIC contributed directly to death; that, in most cases, neither the Greek state nor the camp management took responsibility for these deaths; that investigations into the circumstances of the deaths did not take place in a timely manner; that, if they happened, their results were not made public; and that no lessons were learned and no plans put in place to prevent the next death. In some cases Greek Ministers and police officers responded by spreading misinformation about the circumstances of a death which tried to lessen state responsibility. Many deaths provoked resistance in the camp, with people demanding accountability and the right to leave Moria RIC. The Greek state used these protests as a pretext to justify heavier police control, with the stated aim of restoring public order. In practice, this was an attempt to prevent the international press from reporting on migrants’ protests and to keep them out of sight of the general population living in the island’s capital city. It is clear that Greece’s priority was not to prevent further death, but to prevent public scrutiny of its migration management.

On the weekend of 8-9 September 2020, Moria RIC burned down completely. The proposed new camp, rebranded as a ‘Closed Controlled Access Centre’ (CCAC) is set to open some time in 2023. It is located at the ‘Vastria’ site in West
Lesvos, set in the middle of a pine forest, without easy access to any nearby village or town. The area is at great risk of forest fires which, as we have seen, are again increased by the conditions of migrant camps. It is clear that Vastria CCAC will pose a huge risk to the lives of those detained there.
Deaths as a result of medical issues

Over the period of study, there are indications that eight people's deaths were the result of possible medical neglect. One of these deaths, which was a suicide, occurred within Moria’s Pre-Removal Detention Centre, an area with a different administrative jurisdiction, and will be covered in the next chapter. Due to the lack of publicly available coroner’s reports, it is impossible to say with certainty in each case whether medical failures contributed to the death. However, from the reports and interviews with those working in the structure we are able to describe indications of such failures.

As an initial matter, we must clarify what we mean by deaths as a result of ‘medical issues’. Within this category we include cases related to denied or partial access to the constitutionally guaranteed right to healthcare. The term ‘medical neglect’ is the legally accepted term for these cases, but because this has not been proven in court, in any of these cases, we will not use it here. In most cases the responsibility
does not arise from individual actors (for example medical or paramedical staff) but from institutional decisions and structures. Therefore the term ‘state medical neglect’ is more appropriate. For example, there were only three doctors working in Moria RIC to cover the needs of 15,000 migrants in the autumn of 2019, with a higher risk of compromised health due to the conditions of the RIC. This is an institutional choice, which increases the risk to the lives and health of those staying in the RIC. As has already been mentioned, the aim of this report is to shed light on the conditions that prevailed in the RIC over the years and not to assign blame for the deaths; however, we attempt to point out the structural and institutional failures that could have contributed to loss of life in a number of cases.

With the EU-Turkey deal in 2016, access to healthcare for migrants at Moria RIC was problematic, to say the least. From 2016 until March 2017, the provision of health services at the Aegean islands’ RICs was contracted to NGOs. After this period, it was transferred to the control of the state and specifically to the Center for Disease Control and Prevention (KEELPNO). KEELPNO was not staffed in time with the nec-

53. It is worth noting that the organisation Médecins Sans Frontières, in its signature report, stated: ‘We will not allow our assistance to be used for a mass deportation operation and we refuse to be part of a system that has nothing to do with humanitarian needs or the protection of asylum seekers and migrants.’ Despite this they continue to provide services outside Moria RIC. See ‘Greece: Médecins Sans Frontières stops its action in the hotspots’ (23 March 2016), available online at: https://www.msf.gr/magazine/ellada-oi-giatroi-horis-synora-stamatoyn-ti-drasi-toys-sta-hotspot.

54. This is the PHILOS programme, operating with European funds,
ecessary personnel to take over the provision of health services and, in the summer of 2017, asked for the assistance of the Hellenic Red Cross.\textsuperscript{55} Some NGOs providing health care remained in the RIC and their coordination was undertaken by KEELPNO,\textsuperscript{56} which was in charge of identifying the vulnerability (from a medical point of view) of migrants, a process which largely determined the outcome of asylum applications. In December 2017, an announcement signed by 14 NGOs highlighted the problems of the transition to a state-type management. Among them was ‘insufficient access to medical services’.\textsuperscript{57}

The General Hospital of Mytilene ‘Vostaneio’ (GNMV) was, in turn, under great pressure over these years as it was burdened with many more cases in the regular and emergency clinics due to the increase in the population of the island and which has been running until today. Now it runs under a different implementing body, as the KEELPNO, which was involved in financial scandals, has been replaced with an upgraded role by EODY (National Organization of Public Health).

\textsuperscript{55} See, for example, Refugee Support Aegean, ‘Significant gaps in refugee care in hot spots, vulnerability assessment system collapses’ (7 July 2017), available online at: https://rsaegan.org/el/σημαντικά-κενά-στην-περίθαλψη-προσφύ/; and Tania Georgiopoulou, ‘Camps without doctors’, \textit{Kathimerini} (21 May 2017), available online at: https://www.kathimerini.gr/society/910471/kataylismoi-choris-giatroys/.

\textsuperscript{56} Some of them were ERCI (Emergency Response Centre International), Health Point Foundation, Boat Refugee Foundation (BRF), and shortly afterwards the organisation KITRINOS, while the organisation Doctors of the World was exclusively in the Kara Tepe municipal camp.

the particularly acute needs of this population. In many cases, the RIC conditions themselves were the cause of the illnesses of people seeking treatment at the hospital, who were in many cases not treated to the same standard as the general population.

For example, C., a doctor at the GNMV states:

“We saw cases where a very small, simple infection under these conditions, because the patient was not receiving care, developed into complex and serious health conditions. Not life-threatening, I would say, but certainly very serious. Which, if left like this, without care, in the future could even become life-threatening.”

At the same time, the relations between the GNMV, KEELP-NO and the NGOs were more competitive in nature, or at least poorly coordinated rather than cooperative. Typical of the situation is the resignation of the entire staff of KEELPNO – three personnel, a coordinator, doctor and midwife – at the

58. It is worth noting at this point that the National Health System of Greece suffers from many underlying ‘sicknesses’, regardless of the added arrivals of migrants. Access to public health services is an issue of concern for Greek citizens as well. Too often there is a lack of funding and staff, lack of necessary technological equipment, lack of consumables.

Lesvos RIC in November 2018.  

From the summer of 2019 onwards, with the change of government, transfers to the mainland stopped while the number of migrant arrivals increased again. On 1 October 2019, the then-Deputy Minister of Labour and Social Affairs (now Minister of Immigration and Asylum) Notis Mitarakis signed a Circular stating that ‘minor aliens from third countries born in Greece to irregularly residing parents’ and ‘third country nationals holding valid residence permits that do not provide access to the labour market’, among others, were no longer entitled to an AMKA, Greece’s Social Security Number. This change in the law essentially meant that a large number of asylum seekers lost access to healthcare in public hospitals, with the exception of emergency cases. However, according to the EU Charter of Fundamental Rights (Article 35) and the Greek Constitution (Article 5) ‘Everyone has the right to the protection of his health [...]’.

The AMKA number for migrants was replaced on 31 January 2020 with the PAAYPA, a Temporary Insurance and


62. Even more specifically, Greece’s obligations towards asylum seekers are described in Directive 2013/33/EU of the European Parliament, available at: https://eur-lex.europa.eu/eli/dir/2013/33/oj
Health Care Number for Foreigners.\textsuperscript{63} It is unknown what the consequences were for the health of asylum seekers between 1 October 2019 and 1 February 2020, during the period in which they lost regular access to health facilities outside of detention centres. E., a doctor at the GNMV\textsuperscript{64} remembers that period as being particularly stressful for the GNMV, with dangerous implications for the health of many people:

“Perhaps the main problem at that time, among other things such as access to regular clinics, was the cessation of prescribing medicines. For patients with chronic health problems this was particularly burdensome. Particularly for patients with diabetes, who suffer an immediate and rapid deterioration if they do not take their medication, even for a few days. The other peculiarity is that the medication of diabetics needs special maintenance conditions, which could not exist inside the RIC. So at that time, I remember that we hospitalised many people for three or four days just to ensure that their health was stabilised and that they had access to the necessary medication within the hospital, to which they had been denied access.”

\textsuperscript{63} For more details see ‘Temporary insurance and healthcare numbers for asylum seekers’, \textit{e-nomothesia} (3 February 2020), available online at: https://www.e-nomothesia.gr/law-news/prosorinos-arithmos-asfalisis-perithalpsis-gia-aitoyntes-asylo.html.

\textsuperscript{64} The General Hospital of Mytilene Vostaneio is a secondary health structure and the only such hospital on the island. The other health structures that exist are classed as ‘Health Centres’, which are primary health structures with limited capacities.
In the case of Lesvos, we identified three deaths during these four months, out of the eight deaths in total (for the period 2016-2021) for which there is an indication of medical negligence, and which the deprivation of access to public health structures may have been a factor.\(^\text{65}\)

According to our sources, migrants and NGO workers active in Lesvos over the years, there have been frequent refusals to send ambulances to migrants, inside and outside of the RIC. R., an NGO worker, reported:

“In several cases I was calling an ambulance for migrants because I am a Greek speaker and I was trying to help. The first question that I received from the call centre was if the person was a migrant, and not about the medical condition of the person. In one case I was 2km from Moria RIC calling an ambulance for an unconscious woman and they refused to come and told me to carry her to the NGO doctors in the camp.”

At this point it is worth noting that although there were no deaths from Covid-19 among residents in Moria, the pandemic and the consequent public health protection measures had a negative impact on the living conditions of the residents. Residents of Moria RIC were put under exceptional entry and exit restrictions from 16 March 2020 until the structure finally burned down, while, according to the coordinator of MSF Greece, ‘recommended measures such as frequent hand

\(^{65}\) It would be useful for future research to examine similar data at the national level.
washing and social distancing to prevent the spread of the virus are just impossible’.  

The above review of health services and providers is certainly not exhaustive. However, we have tried to show a snapshot of medical conditions during these years. Below we describe case studies for which we have been able to gather information.

4.1. Geographical restrictions and the lack of treatment for serious medical conditions

On 8 October 2017, a five-year-old girl from Syria was transported from Moria RIC to the GNMV. According to news reports, she had died of a serious health condition which was the reason for her parents’ decision to travel to Europe. She had arrived in Lesvos with her parents a few days earlier on 3 October 2017. According to C, a worker in the GNMV:

“*She was brought to the hospital early in the morning, she was found dead in her tent, when she arrived at the hospital she had been dead for more than a few hours and her father was holding some MRI scans from a Turkish or Iranian hospital, I’m not sure. But she definitely had brain damage from a tumour that showed up on the MRIs, had developed neurological* 

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67. ‘Dead 5-year-old girl in Moria - she was facing serious health problems’, *To Vima* (8 October 2017), available online at: https://www.tovima.gr/2017/10/08/society/nekro-5xrono-koritsaki-sti-moria-antimetwpize-sobara-problimata-ygeias/.
symptoms and apparently had growth problems. As I recall, her father told us they had come to camp around 10 days before. Then I remember at the hospital, the child came, his family came, [a doctor] came, the commander of the camp also came. We were looking at the MRIs and [the doctor] was persistently asking us what we were looking at and we got into a fight because it looked like he was trying to cover up medical negligence. The girl had very serious health issues that, yes, were leading to death, but she should have received better medical care. It was obviously a chronic health issue that she had, as shown from the MRIs at least a year ago maybe more. Her father told us that one of the reasons they came [to Greece] was precisely to seek treatment.”

When we asked C. what exactly was the procedure for people living in the camp requiring immediate help, and the potential obstacles that prevented them from receiving assistance, he told us the following:

“At that time, if I remember correctly, they [the family of the five year old girl who died] were going through the first registration. Within that process they should have also had a first medical evaluation, and if the condition had been detected, they should have been immediately referred to the hospital, so that we from the hospital could arrange the transfer to Athens, because the hospital in Mytilene could not handle such cases. So very immediate action should have been taken. Even on a legal level, in or-
der that geographical restriction could be lifted, so that [the girl] could go to Athens, at least so that her health condition could be assessed there. [...] However, I know that these are complex procedures that I think the family that had just arrived could not have been aware of, so that they could have followed them. I don’t know if they had even gone through the first registration, even if they had already been here for a few days.

Afterwards I don’t know what happened. I mean that in the case of the death of a minor, the body must be examined by a coroner and the coroner must make a conclusion. However, the finding is not passed on to the family, the family has to request it through a lawyer.”

The geographical restrictions which restricted asylum seekers to the islands of their first arrival – a direct outcome of the EU-Turkey Deal – seriously limited the ability of people with existing medical conditions to access specific necessary healthcare. There are many conditions that the hospitals in the islands were unable to treat. For these cases, geographical restrictions were not lifted in a reasonable timeframe, or not lifted at all. In 2020, several organisations including HIAS Greece, took similar cases to the European Court of Human Rights, arguing that the conditions in the hotpot camps ‘do not meet basic human needs and that the measure of geographical restrictions puts the lives of vulnerable people at serious risk’.

68. ‘Press release: European Court of Human Rights examines living
Another case that may have been affected by the geographical restrictions is that of H.W. On 15 April 2020, H.W., an 82-day-old girl from Afghanistan, died. She was born on 25 January 2020 at the GNMV with a serious genetic problem in her heart. Her family was given a report on her medical problem and a referral that she would have to go to the capital, Athens, for further treatment. Shortly after being transferred she died of a pulmonary edema.

The transfer of the girl and her accompanying parents required a complex bureaucratic process involving several stages. The family was waiting for these procedures to progress while at the same time staying with H.W. in a tent in Moria’s RIC without heating during the winter and spring of 2020. H.W. fell ill with a lung infection, developed fever. Only then was she evaluated, in early April, as an emergency case. She was then transferred with her mother to a hospital in Athens. Following the transfer, the mother lost contact with her husband, who remained in Moria RIC without any information on the progress of his child. On 15 April 2020 the infant died.  

It is interesting to note the procedure for referrals in sim-

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ilar cases according to the experience of hospital worker C:

“A person who has a congenital medical problem does not constitute an emergency situation for which you can request air transport to Athens or elsewhere. This applies to both Greeks and migrants. In the case of Greeks, this is done either at their own expense or through insurance companies. Especially for migrant families who, in addition to covering the costs, also have geographical restrictions that need to be lifted, it becomes even more difficult or even unlikely that they will receive appropriate medical care, as the hospital in Mytilene does not have the capacity to deal with such cases. That is, it is possible that this infant would have needed a specialised paediatric cardiologist, which is not available on the island.”

According to the girl’s father, the family was confronted with an institutional brick wall when attempting to arrange their transfer. Like all migrants newly-arrived to the Aegean islands, they were subjected to geographic restrictions prohibiting their movement to mainland Greece. According to the German-language magazine Stern, ‘the authorities were overloaded. They just sent him away again [...] “They said there were many cases like ours.”’ According to the girl’s mother, her child died of ‘carelessness’.70

70. Ibid.
4.2. Lack of adequate medical staff

On 10 November 2019, a nine-month-old infant from the Democratic Republic of Congo died after suffering from a fever and dehydration. By 16 November, there had been no official announcement from the GNMV or Moria RIC. After cross-checking information with the general hospital, the NGO Médecins Sans Frontières (MSF) denounced the death:

“9-month-old baby died in Moria from dehydration. MSF team confirmed the information with the hospital. We are devastated by this new tragedy. Children are dying in Europe due to neglect of healthcare & unacceptable living conditions. Nothing has improved almost 4 years after the EU-Turkey agreement. It is outrageous & cannot continue.”

According to the Director General of the MSF Greece, Vassilis Stravaridis, the family and the infant had visited the MSF clinic earlier that year, in September and October. On 7 November, the family visited one of the medical organisations operating inside Moria RIC and received instructions for the care of the infant. The next day, Friday 8 November, the family tried to go to the MSF clinic, which was located a short distance from the RIC’s main entrance and found the clinic closed as 8 November was a local holiday in Lesvos. On one of the following days, 9 or 10 November (a weekend), the family went to the police station located in the RIC and

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asked for an ambulance to be called. When the ambulance arrived, it was already too late.\footnote{‘Dead infant in Moria’, \textit{Newsit} (17 November 2019), full interview available at: \url{https://www.youtube.com/watch?v=9TbgRX5QmwM}.}

At that time there were roughly 15,000 people living in Moria and there were only three doctors inside the camp, who were mainly in charge of assessing the vulnerability of the migrants. Another issue that arises is the question of interpretation, and whether there was a translator present so that the instructions given for the treatment of the child were understood by the child’s guardians. As C. states, ‘On weekends and holidays, there were no translators working at the RIC, in the medical structures that operated there’.

This incident caused uproar from the organisations of the RIC and in the public discourse, as it was considered a preventable death. It is unclear whether any legal proceedings were initiated.

### 4.3. Reports of possible racially-motivated medical neglect

On 29 April 2020, a man of African origin, between 30 and 40 years old, died after falling ill in Moria RIC. One of the difficulties in accounting for the deaths of migrants in Moria RIC is the lack of publicly available information. Here, not even local news agencies reported on his death. However, the ‘Initiative of Doctors of Lesvos’, a self-organised collective of junior doctors working on the island, denounced racist practices in healthcare as a major factor contributing to his death:

\begin{quote}
\textit{“On the evening of 29/04/2020, a young adult...\textquoteleft}
\end{quote}
male of African origin was brought dead by the ambulance to the Emergency Department of the Vostaneio Hospital of Mytilene. The paradox is that the ambulance crew delivered the case with vital signs compatible with life, even reporting substance abuse, without the slightest suspicion that the person had already died before arriving at the hospital. Typical is the absence of any first aid provision that might have changed the outcome of the incident.

The ambulance picked up the patient from Moria RIC, in the presence of an escort, who spoke English and brought medical certificates from the GNMV in Greek, which indicated that he had a known cardiac problem and frequent hospitalizations. The ambulance crew reported an intermediate stop at the Mytilene PEDY (National Primary Healthcare Network, health structures with limited capacity), where no medical intervention was made with the patient and he was referred to the hospital. The first time he was given first aid was in the ED (Emergency Department of the hospital), where an attempt was made to resuscitate him to no avail, since it was probably an hour after his death. It is easy to see that there was no assessment of the case at Moria RIC, no follow-up during his evacuation and there was a crucial absence of medical assessment by a doctor of the PEDY, with known racist practices in his workplace.

The criminal negligence and indifference, which is especially intensified when it comes to migrants, by a known group of ambulance rescuers and doctors
does not surprise us, as it is a frequent phenomenon and the extreme right-wing views of these rescuers are well known. What surprises us strongly is that the event was completely suppressed by the local media, at a time when government officials are aware of the event and dubious phone calls have already been made to the hospital from their side.

We denounce behaviors that undermine the value of human life and put it at risk and we expect the appropriate procedures to be initiated immediately to investigate the incident.”

As far as we have been able to ascertain, no legal proceedings have been initiated in the case, although the accusations made in the doctors’ complaint are very serious. Speaking to E., a doctor at the GNMV at the time, who was aware of the incident, he commented the following:

“It was obvious that in this incident many mistakes and omissions were made which can be described as criminal. That is, this man was picked up alive by the ambulance from the RIC and arrived dead from cardiac arrest in the hospital’s ED without anyone confirming when he died. Which means that either one of the two ambulance rescuers was not in the cabin with the patient as he should have been, or that he was in the cabin and did not do what he should have done when the patient’s life is in danger, as in

the case of cardiac arrest. This man had a cardiac medical history and had visited the hospital several times because of this. When he was picked up by the ambulance he had medical documents with him in Greek related to his health problem. As stated in the doctors’ text, the ambulance first stopped at the PEDY, as it was supposed to do according to the protocol, at which point the doctor who was there saw the patient in the ambulance and without giving him any of the necessary first aid referred him to the ED of the GNMV. In other words, from the moment the ambulance picked him up from the RIC until the moment he came to the ED, no one realised that the man was in cardiac arrest and did not give him first aid. To understand how critical immediate help is for a man in cardiac arrest, every second that goes by without resuscitation equals 1% less chance of survival.”

It is worth noting that in March 2019, racist attitudes of paramedical staff and emergency service phone operators came to light after a migrant attempted to call an ambulance. According to the complainant, ‘He asked me what my name was. I told him my name. As soon as he found out that I'm a foreigner he starts telling me, “what have you been drinking. Drugs. We don’t serve foreigners! Go to your country...We have other obligations! Take a taxi!” He refused to come.’

74. ‘Complaint of racist behaviour by a Mytilene ambulance telephone operator’, Lesvos News (28 March 2019), available online at: https://
4.4. Conclusion

The health services within the RIC almost never met the needs of the population. The situation became even more difficult when the population in the shelter increased and when people were forced to live for a long time in the conditions of the shelter. Infants and children were particularly vulnerable. This category also includes a death that could clearly have been prevented, that of a nine-month-old infant who died of dehydration. Patients with chronic diseases faced great difficulties, as their health was deteriorating due to the conditions of the RIC and they did not receive the care that the general population receives. Added to the lack of health services in the RIC, are the institutional barriers such as that of deprivation of medical care between 1 October 2019 and 1 February 2020, which can only be perceived as institutional racism. The case denounced by the ‘Initiative of Doctors of Lesvos’ can also be described as racist, this time acted out by members of the medical and paramedical staff.

Suicide attempts and self-harm

From March 2016 to September 2020, tens of thousands of people arrived and stayed in Moria RIC. People embarked from places and situations that were often particularly traumatic and put their lives at risk. Whatever conditions these people left, it is certain that they left for ‘something better’. Their journeys to Europe had incalculable costs and risks, but in most cases travelling to Europe was not an option: it was the only way to continue living.

Arriving at the borders of Europe, on the island of Lesvos, they encountered something that sometimes seemed even worse than what they had left behind. Inside Moria RIC, hope was gradually dying, giving way to despair.

75. Christos Eleftherakos et al., “I prefer dying fast than slowly”: how institutional abuse worsens the mental health of stranded Syrian, Afghan and Congolese migrants on Lesbos island following the implementation of EU-Turkey deal, *Conflict and Health* (Vol. 12, art. 38, September 2018).
Life in Moria RIC, or the ‘Worst Refugee Camp on Earth’,\textsuperscript{76} as some have called it, felt like a liminal point between life and death. People were living in a condition of prolonged and long-term confinement\textsuperscript{77}, not knowing when it would end due to the arbitrary processing speeds of the asylum service, with no control over their own lives. Inhumane living conditions,\textsuperscript{78} inadequate facilities,\textsuperscript{79} overcrowding,\textsuperscript{80} daily exposure to violence (either as witness or victim),\textsuperscript{81} a climate of constant insecurity and fear,\textsuperscript{82} precariousness and anxiety about the course of their ‘case’, which would determine their future.\textsuperscript{83} These were only a part of all the ‘particularly aggravating factors for the mental health of the individuals’ associated with

\textsuperscript{76} Catrin Nye, ‘The worst refugee camp on earth’, \textit{BBC News} (28 August 2018), available online at: https://www.youtube.com/watch?v=8v-OHi3iGQI.


\textsuperscript{78} Médecins Sans Frontières, ‘One year after the EU-Turkey deal, migrants and asylum seekers are paying the price with their health’ (14 March 2017); Médecins Sans Frontières, ‘Confinement, violence and chaos: How a European refugee camp is traumatising people on Lesbos’ (18 July 2018), Willemine van de Wiel et al., op. cit.

\textsuperscript{79} International Rescue Committee, \textit{Unprotected, unsupported, uncertain} (September 2018).

\textsuperscript{80} ‘Willemine van de Wiel et al., op. cit.


\textsuperscript{82} Médecins Sans Frontières, ‘Confinement, violence and chaos’, ibid; International Rescue Committee, \textit{Unprotected, unsupported, uncertain}, op. cit.

\textsuperscript{83} Ibid.
life in Moria RIC.

With life under such circumstances, the thought of death became normalised and widespread, and with which a large number of those living in the RIC were confronted.

M., who was working from 2019-2020 as a psychologist in an NGO operating in Moria RIC providing mental health services, agreed to talk to us about the issue:

“...I think that in general the desire to die was so generalised in the camp that it was kind of the norm; that is, what you expect to hear and what you hear most of the time is ‘I want to die’. (...) All the people were very, very mentally weakened in one way or another for clear reasons, because most of them already brought something with them in their “luggage” from their journey, or from the place where they lived before, some of them still carried was difficult for them in the camp, on a personal level, family relationships, etc. The miserable condition of Moria added up to all this, and created a situation that brought people to the brink of explosion. (...) Somehow the thought of death was present in too many cases. And in general people were talking about it. At least to us. They talked about death, they talked about thinking about death, or they said ‘If this doesn’t happen I’ll die, this is as much as I can take’, ‘I want to die’, ‘I can’t stand it here any longer’, ‘if I don’t get out of here I’ll kill myself’.

When death seems like the ‘only way out’ for so many people at once, one understands the extent of the deadlock and
the tragedy of Moria; after all, the phrases ‘Moria is a hell’ and ‘Moria no good’, which were often heard inside and outside the camp, were not used for nothing.

To see this in more detail, we can find a detailed picture through the annual reports and articles by NGOs that were active in Moria RIC providing mental health services, journalistic reports in local and European media, as well as through academic research. Specifically, we see the levels of suicidal ideation and self-harm of the RIC’s residents over the years.

The first reports in relation to the ‘mental health emergency’ as it was called – that had ‘erupted’ in Moria, occurred in 2017, almost a year after the 2016 EU-Turkey deal. In reports by Médecins Sans Frontières (MSF), it is clear that from the beginning of 2017 there was a significant deterioration in the mental health of people staying at the RIC, with self-harm and suicide attempts on the rise, as well as a 50% increase of attendance at mental health services. At that time, MSF appears to have been receiving an average of 6-7 people per week who had attempted suicide or were self-harming, and there were also cases of people experiencing suicidal ideation following the second rejection of their asylum claims, due to associated high levels of anxiety and fear of the possi-

84. Médecins Sans Frontières, Confronting the mental health emergency on Samos and Lesvos (Greece: October 2017), available online at: https://www.msf.org/sites/default/files/2018-06/confronting-the-mental-health-emergency-on-samos-and-lesvos.pdf.
85. Médecins Sans Frontières, ‘One year after the EU-Turkey deal, migrants and asylum seekers are paying the price with their health’, op. cit.
86. Médecins Sans Frontières, Confronting the mental health emergency on Samos and Lesvos, op. cit.
bility of detention and deportation.\textsuperscript{87}

In relation to minors, Save the Children stated in 2017 that self-harm, substance abuse and depression were now issues that many children (up to the age of nine) experienced, and there had been cases of attempted suicide.\textsuperscript{88} The reasons behind this phenomenon vary: usually despair, hopelessness and sadness.\textsuperscript{89} But often children’s self-harm can also signal their attempt to regain control over themselves and their bodies.\textsuperscript{90}

In general, organisations warned at the time that the EU-Turkey deal, which resulted in thousands of people being trapped in the camps, appeared to be ‘seriously damaging for the mental health of refugees’,\textsuperscript{91} warning that without swift changes people’s mental health would deteriorate rapidly.\textsuperscript{92}

In 2018, the negative impact of the prolonged confinement of many people in Moria RIC was reflected in an overall picture of deteriorating mental health. According to the results of research conducted in Lesvos, the main factors that affected the deteriorating mental health of migrants were: a) systemic and institutional abuse, b) continuous traumatic

\textsuperscript{87} Ibid.
\textsuperscript{88} Sacha Myers and Imad Aoun, \textit{A tide of self-harm and depression: the EU-Turkey Deal’s devastating impact on child refugees and migrants} (Greece: Save the Children, 2017).
\textsuperscript{89} Ibid.
\textsuperscript{90} Ibid.
\textsuperscript{91} Médecins Sans Frontières, ‘One year after the EU-Turkey deal, migrants and asylum seekers are paying the price with their health’, op. cit.
\textsuperscript{92} Sacha Myers and Imad Aoun, \textit{A tide of self-harm and depression}, op. cit.
stress and c) inadequate mental health service provision.\textsuperscript{93}

According to data from the International Rescue Committee (IRC), in 2018, rates of suicidal ideation among the organisation’s ‘beneficiaries’ in Moria RIC increased dramatically: 30\% of IRC’s beneficiaries had attempted suicide, while 60\% had considered the possibility of suicide.\textsuperscript{94} IRC argues that the living conditions in Moria RIC were capable of creating new mental health problems and exacerbating existing ones. Furthermore, according to IRC, the main factors that negatively impacted the mental health of those residing in the RIC were a) lack of protection, b) lack of support and c) lack of any certainty about their future.\textsuperscript{95}

Also in 2018, we note that the issue of the alarming deterioration of minors within the RIC was repeatedly highlighted. MSF reported a new increase in suicidal ideation and attempts, as well as self-harm practices, among the adolescent population in particular (one in four adolescents).\textsuperscript{96} It is also important to mention here that unaccompanied minors who lived in Moria RIC in precarious conditions showed particularly high rates of suicidal ideation, suicide attempts and self-harm.\textsuperscript{97}

During the period 2019-2020, and until its destruction in

\begin{itemize}
\item \textsuperscript{93} Christos Eleftherakos et al., “I prefer dying fast than slowly”, op. cit.
\item \textsuperscript{94} Sacha Myers and Imad Aoun, A tide of self-harm and depression, op. cit.
\item \textsuperscript{95} Ibid.
\item \textsuperscript{96} Médecins Sans Frontières, ‘Self-harm and attempted suicides increasing for child refugees in Lesbos’ (17 September 2018), available online at: https://www.msf.org/child-refugees-lesbos-are-increasingly-self-harming-and-attempting-suicide.
\item \textsuperscript{97} Refugee Support Aegean, ‘Moria nightmare’, op. cit.
\end{itemize}
September 2020, Moria RIC reached its overpopulation peak, reaching approximately 22,000 residents in mid-2020. M. reports:

“There has been a rapid increase in the population. When I started with the NGO I was working for, in May 2019, the camp had about 6,000 to 8,000 people, as I recall. And in just a few months it went up to 19,000 to 22,000. So somehow the situation had gotten very, very out of control. (...) The conditions in the camp seemed worse than ever.”

M. gives us a picture of ‘mental health services in crisis’ in the last months of 2019 and the first months of 2020, which also indicates the rapid and drastic deterioration of the mental health of those staying in the camp during this period:

“I was going to work at 8:00 and there were 100 people waiting outside from seven in the morning to get into the clinic. And too many emergencies. I mean, I remember you had your regular appointments and, at the same time, there were four emergencies popping up: a rape case, a suicide attempt case, a case of someone that saw a beating in front of them earlier. A mess.”

The last period of Moria RIC’s existence brought all its underlying ‘sicknesses’ to the surface for one last time, all of them aggravated and reaching their peak. M. describes the deadlock and futility that characterised that period:

“About this ‘in between life and death situation,’ (...) I think that the condition of the camp itself is
a fatal one, and even if one manages momentarily to get out of it, to enjoy something for a while, then one will fall apart again. As long as they are in there, they will fall apart. And let’s just say this: there has never been anyone who has been in the camp and said ‘okay I was depressed, but I’m not depressed anymore.’ (...) Nobody has ever recovered from camp conditions while living inside the camp. Whatever the camp caused you while you were living in it remained until you left it. This thing could not be ‘cured’. We did sessions with people, and we knew that if their main issue was created by the fact that they were living there, we wouldn’t be able to help them in any way, because they would continue to live there (...) What could we do? I think in the end we were just keeping them company in their pain.”

5.1. Suicides in Moria RIC

A total of two suicides were documented during the whole period of Moria’s existence. The first is that of a 31-year-old Iranian man who was found hanging in a cell in Moria camp’s Pre-Removal Detention Center (PRO.KE.K.A) on 6 January 2020.98 This case is elaborated in detail below.

The second suicide is that of a 20-year-old unidentified man, who, on 26 March 2020, was found unconscious inside Moria RIC, and was taken to the RIC’s infirmary and then to the hospital in Mytilene, where he was declared dead. His death is presumed to have been a suicide due to an overdose of sedative pills. However, no further information or forensic report confirming or rejecting the presumed cause of death was ever released.

5.2. 31-year-old Iranian man, PRO.KE.K.A, 6 January 2020

On 6 January 2020, a 31-year-old Iranian man was found hanging in a cell in Moria camp’s Pre-Removal Detention Center (Moria PRO.KE.K.A). At the time, news reports contained little information about the circumstances surrounding his death. However, refugees – some of them who had survived the Greek incarceration system – and members of the solidarity community from different countries (see Photos 3 and 4 in the Appendix), were able to form a fairly detailed timeline of events.

Detainees who were in Moria PRO.KE.K.A at the time spoke of detention practices that could have contributed to

the death. In particular, they highlighted the fact that he had been held in an isolated room despite showing clear signs of mental distress. Detainees were held in shared containers which were kept locked apart from limited time in a common yard. The Iranian national was placed among the general population for a short time before being moved into isolation for approximately two weeks. Some detainees said that they didn’t see him outside of his container for days at a time. At other times he was allowed to leave his container, however even then he was taken to the common yard alone, while other detainees were back in their own containers. His mental distress was obvious as detainees heard him crying through the nights and banging on the door, and he had previously threatened to harm himself. During this time he received no psychological support.\(^\text{101}\)

According to Deportation Monitoring Aegean, following this death, from January until April of 2020, there had been numerous suicide attempts inside PRO.K.E.K.A., frequently preceded and followed by police harassment and violence.\(^\text{102}\)

5.3. PRO.K.E.K.A conditions

Moria PRO.K.E.K.A was a closed detention facility operating within Moria camp. Its official capacity was for 180 men, although a 2018 inspection from the Council of Europe's

\(^{101}\) Ibid.

\(^{102}\) Deportation Monitoring Aegean, “We are here to die, or to obtain freedom: Hunger strike in Moria pre-removal detention centre’ (8 April 2020), available online at: https://dm-aegan.bordermonitoring.eu/2020/04/08/we-are-here-to-die-or-to-obtain-freedom-hunger-strike-in-moria-pre-removal-detention-centre-2/.
Committee for the Prevention of Torture found that the structure had inadequate facilities. The centre held people who had reached the end of their asylum procedure and were scheduled for deportation, as well as people who had been arrested in a pilot project targeting third-country nationals from countries with low asylum acceptance rates for a fast-track procedure. Detainees had roughly one hour of yard time per day, and were denied access to their phones from Monday to Friday, meaning they had limited capacity to contact legal or support networks.

Medical care in the facility was inadequate. Medical services were run by AEMY, a private company whose only shareholder was the Greek state, which was contracted to run such services in other pre-removal detention centres around Greece. At full capacity in Lesvos, it consisted of one psychologist and one social worker to provide service for up to 180 detainees. However the social worker position was vacant from April 2019 until the time of the death of the Iranian national. Detainees regularly reported lack of access to life-saving medication or a reluctance to schedule hospital appointments for urgent medical matters. In many cases police officers on duty in PRO.KE.K.A filtered requests for medical attention before detainees could go through the official procedure with AEMY staff, a fact noted by detainees themselves and also in the Committee for Prevention of Torture’s April 2018 audit.

At the time of the death of the 31-year-old Iranian national there were 83 people detained in Moria PRO.KE.K.A. At the UNHCR’s Lesvos Inter-Agency Consultation Forum, NGOs working on protection issues raised concerns that, in
general, ‘detainees have very limited access to physical and mental health services’. In the days leading up to the death, ‘the AEMY psychologist was on leave from the period of 19 December to 3 January and (...) detainees had no access to psychological support during this period.’\textsuperscript{103} The man was detained on 18 December 2019,\textsuperscript{104} meaning that there were only three working days during his detention in which he had the possibility of speaking with a psychologist.

Suicide attempts in Moria PRO.KE.K.A were frequent, however, according to legal-aid NGO HIAS Greece, ‘There is no presence of AEMY staff at the [Pre-Removal Detention Centre] during the weekends. Therefore, serious medical conditions often go unnoticed’.\textsuperscript{105} HIAS describes a case illustrating a series of failures leading to the urgent hospitalisation of a 38-year-old detainee. After initial diagnostic failures at the medical screening in the Moria RIC, the man was detained in PRO.KE.K.A while suffering from end-stage renal disease. Despite informing AEMY staff and police officers daily about his condition, no attempt was made to transfer him to either

\begin{footnotes}
\begin{itemize}
\item \textsuperscript{103} UNHCR Lesvos, Inter-Agency Consultation Forum meeting minutes, 9 January 2020.
\item \textsuperscript{104} ‘Criminal complaint filed regarding the death of a 31-year-old Iranian national’, HIAS Greece, Fenix Humanitarian Legal Aid, Refugee Support Aegean, Legal Center Lesvos, DIOTIMA (6 February 2020), available online at: https://www.facebook.com/HIASGreece/posts/822812381464052/.
\item \textsuperscript{105} HIAS Greece, Communication in accordance with Rule 9.2 in the M.S.S. and Rahimi groups v. Greece (Applications No. 30696/09, 8687/08), Council of Europe (24 August 2018), https://rm.coe.int/CoERMPublicCommonSearchServices/DisplayDCTMContent?documentId=09000016809f5212.
\end{itemize}
\end{footnotes}
EODY (the National Public Health Organisation providing medical care at Moria RIC) or to the public hospital until he lost consciousness and was in critical condition for six days. He was diagnosed with kidney failure.\textsuperscript{106}

The role of AEMY has been called into question in other deaths in pre-removal detention centres around Greece. AEMY is subcontracted to run healthcare programmes in each of Greece’s Pre-Removal Detention Centres. On 25 March 2021, 44-year-old Guinean national M.D. died in Kos PRO.KE.K.A after three days of begging guards to take him to hospital.\textsuperscript{107} He died of appendicitis.\textsuperscript{108} According to his fellow detainees, ‘The man even lifted up his shirt and showed the policeman that he had already been operated on twice.’ According to Deportation Monitoring Aegean, M.D. was subject to the same failure of the initial screening to recognise his health condition upon arrival in Kos island, which should have prevented his detention in the Pre-Removal Detention Centre. According to detainees at the time, only one AEMY doctor served over 250 detainees.\textsuperscript{109}

\begin{flushright}
106. Ibid.
\end{flushright}
5.4. Conclusion

The suicide in Moria PRO.KE.K.A occurred within state custody. After pressure from legal aid NGOs in Lesvos, the public prosecutor opened an investigation into the circumstances of the death. Although actors from these organisations were called to testify before the investigating judge, there has been no public pronouncement of the verdict of this investigation, and it is unclear whether charges were ever brought against any member of PRO.KE.K.A staff. What is clear is that the scope of this prosecution was too narrow to investigate the structural causes of the death. The purpose of the investigating judge’s interrogations was to assign criminal responsibility to an individual member of staff, i.e. to prove that an on-duty staff member had criminally failed to carry out their duties, and not to question the failures of the corporation contracted to provide psycho-social and medical services. However, it is clear a structure whose services were so permanently under-developed could not provide adequate duty of care to a mentally disturbed person.
Murders

Violence, delinquency and criminality have always been present in Moria RIC, as can be seen both from the years of literature published on the subject, as well as from the interviews we have collected for this report.

In particular, Nikos Xypolytas identifies three dominant forms of delinquency: a) conflicts within the RIC; b) alcohol and drug abuse; and c) prostitution and sexual abuse. The cases we examine here concern the most severe form of violence, which is homicide with intent (malice aforethought), and came as a result of the first of Xypolytas’ categories, namely that of conflicts within the RIC.

Clearly, in cases such as murder, the intention of the per-

The role of the police force is also particularly problematic in the case of the minor R.E., who was in protective
custody at the time of his murder.

In the period examined in this report (2016-2020), there were seven cases of death in and around Moria RIC that could be attributed to homicide with intent, i.e. the result of a clash with a deadly weapon. Both the victims and perpetrators are all men or boys, and two of the victims were identified minors. Five of the seven homicides occurred in 2020, while the remaining two occurred in 2018 and 2019.

6.1. 15-year-old R.E. from Afghanistan died in the ‘safe-zone’ of Moria on 25 August 2019

The operation of the ‘safe zone’ at Moria RIC started at the end of spring 2018. Those responsible for its operation were the RIC administration, the International Organization for Migration (IOM) and the Civil Non-Profit Company, Iliaktida, which is based in Lesvos. The unaccompanied minors in the ‘safe zone’ were officially in the custody of the public prosecutor. The official capacity of this space was 160 people, but it was always overcrowded. In particular, at the time of the death of R.E. and the serious injury of two other minors, there were 600 children in the safe zone.111

According to European Union regulations,112 the environment of the RICs in general, Moria RIC in particular, was deemed not to meet the safety requirements for unaccompanied minor refugee children. Therefore, this separate struc-

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112. See footnote 15.
ture was created within the RIC in order to fill this gap. Unaccompanied children, boys and girls up to 13-years-old, stayed in the safe zone until accommodation was found for them in other facilities outside the RIC or until family reunification procedures were implemented, during which either other members of their extended family living in the RIC took custody of them, or the children were transferred to other countries for family reunification. In some cases, older unaccompanied children stayed in the safe zone when their stay in other areas of the RIC was considered dangerous for them, as well as adults accompanying children in a particularly vulnerable situation (e.g. shipwreck survivors).

The legal form governing the stay of unaccompanied minors in the safe zone falls under the 1991 law on ‘protective custody’, which comprises a set of contradictions that can be described, according to Didier Fassin, as ‘compassionate repression’. The time of a person’s detention in the ‘safe zone’ structure ranged anywhere from a few months to more than a year, and in any case the length of stay inside was in any case indefinite, as it was for the other asylum seekers in the RIC. The possibility to leave the ‘safe zone’ and Moria was extremely limited, especially for children under 13-years-old, as it was limited to one exit per week facilitated by an NGO.

N., who worked in the safe zone in 2019, says:

“Generally we try not to send children to the safe zone, because they are trapped and desperate there, but it is a necessary step in the process of finding them a shelter in another structure outside Moria. [...] There are many cases where children stay in this temporary situation longer than the workers who are responsible for them, they see the workers coming and going while they are still staying there.”

Although unaccompanied minors are automatically considered refugees who are not to be deported (at least until they reach adulthood when their cases are reviewed), and while their stay in the safe zone was theoretically considered part of the process of their integration, they remained excluded from the activities and daily life of their peers. For example, they did not have access to education, which in Greece is constitutionally guaranteed for all children. As X., also working for an NGO, says ‘There was a container called “the school”, it worked for a while at the beginning, but then because Moria was full, they sent children to sleep there, so there were no classes’.

The location of the safe zone was also problematic. According to X:

“*The place where the safe zone was located was the worst possible place in Moria to put children. First of all it was next to the jungle and it was not guarded, the police were far away [...] Most of the incidents that took place inside started from outside, because the children were given clothes, shoes, things and people [from outside] would go and*
make threats for them, and the children would either get scared and give their things, leaving themselves without clothes and shoes, or they would try to defend themselves and get into fights, usually with disastrous consequences for them. Because they were then labelled delinquent and sent away.”

But it was not only the location of the safe zone that was problematic. The incident book of the structure was discovered after the total destruction of Moria RIC in the fire of 2020, and excerpts of it were published in Solomon Magazine. The entries in this incident book, written by the safe zone’s workers, describe something closer to a death trap than a safe place for unaccompanied minors. Dead mice next to food, power cuts due to short circuits, risk of electrocution for workers and beneficiaries, and insufficient lighting for many days, along with inadequate medical care.

A 15-year-old boy, who was also living in the safe zone, was arrested for the murder of R.E. When he was arrested, he admitted to the crime. He was found guilty at both first instance and appeal courts of homicide with intent, dangerous bodily harm, possession weapons and using weapons, and is currently being held in a juvenile prison. As he stated, the victim’s companion was disturbing him and stole his speaker where he was listening to music. The next day he was afraid that he would be beaten, so he asked the police for help, but no one intervened. Finally in the scuffle, he fatally stabbed

R.E. and injured two other boys. According to Solomon Magazine: ‘Two witnesses who were present at the time of the incident told us that they called the riot police officers who were on the other side of the barbed wire when the fight started. The latter answered that they “could not intervene without having received orders from Athens”’.115

6.2. 19-year-old Y.M from the Democratic Republic of Congo died on 14 January 2020 after 14 days of hospitalisation in the Intensive Care Unit of the GNMV

Y.M., of Congolese origin, arrived in Mytilene on 11 June 2019, and was among 57 survivors of a shipwreck in which seven people died, two of them children.116 Y.M. was not staying at the RIC but at a hostel in the city of Mytilene. On New Year’s Eve he went to Moria RIC to celebrate the new year with his compatriots. Later that evening, on his way back to the town, he was found stabbed in the leg, having lost a lot of blood. He was hospitalised in the ICU of the GNMV for 14 days and passed away on January 14, 2020.117

6.3. 20-year-old from Yemen who died on 16 January 2020

Two days later on 16 January 2020, a few minutes before 23:00, a 20-year-old Yemeni man was stabbed and killed.\(^{118}\) The incident involved an altercation between asylum seekers from Sub-Saharan Africa and from Afghanistan, which took place in Zone 12, near where the European Asylum Support Office (EASO) premises are located. In the same incident, a minor passing by the site was injured, fortunately with minor injuries. A 27-year-old man from Afghanistan was arrested in relation to the case.\(^{119}\)

6.4. 16-year-old Afghan national died on 8 April 2020

The 16-year-old Afghan boy was staying with the rest of his family members, five people, outside the official boundaries of the RIC, in a tent in the Olive Grove near the north gate. In a fight that broke out on the evening of 7 April 2020 for an unknown reason, the 16-year-old was found stabbed and unconscious. The ambulance was called to pick him up, and the child recovered after 14 cycles of resuscitation and underwent surgery. The next day, on 8 April 2020, he died.\(^{120}\)

One of the two paramedics who picked up the child from the


RIC described in a post on his personal social media page the whole process of the transfer to the hospital and denounced the second paramedic for racist behaviour. After the ambulance arrived, the first paramedic laid out a bed sheet on the stretcher. He describes his colleague’s behaviour:

““Colleague’s” intervention no. 1: “why did you put a bedsheet on the stretcher? If the mattress gets dirty, who’s going to clean it? I’m not in the mood to clean blood.” [...] While we were receiving the kid, the parents were next to us. The mother was crying next to him and the father was saying to us “please fast my friend”. “Colleague’s” intervention no. 2: “YEAH RIGHT, WOULD IT BE FAST IN AFGHANISTAN?” [...] As important as the reasons are why trapped children are stabbed every day in Moria, it is equally important to understand that the ambulance crew is there to rescue, not to make racist interventions.”

6.5. ‘The knife was not the only murder weapon’: K.N., 19-year-old from Ivory Coast who died on 5 July 2020

Late on the evening of 5 July 2020, K.N., a 19-year-old man from Ivory Coast, was murdered in Moria camp. The circum-

121. As described in a private post on social media.
122. The following section is reproduced from Community Peacemaker Teams - Aegean Migrant Solidarity (6 August 2020), available at: https://cpt.org/2020/08/06/aegean-migrant-solidarity-knife-was-not-only-murder-weapon. It was written by team-members working closely with the deceased and, in the following months, with his friends and survivors of the attack.
stances of his death raise serious questions about policing priorities and the refusal of officers to protect lives in the camp.

6.5.1. K.N.’s life in Europe

In late January 2020, K.N. first arrived on Lesvos. Upon his arrival, police arrested him and held him in PRO.KE.K.A, Moria camp’s pre-removal detention centre. He was detained for nothing more than coming from the wrong place, as nationals of his country have an asylum acceptance rate of less than 25%, and are subjected to arbitrary detention. Here, the European Asylum Support Office forces detainees through the asylum procedure at breakneck speed, where detention blocks access to basic legal aid, in a closed-loop process that creates the low acceptance rate justifying detention.

Three months later in April, and with the help of a lawyer, K.N. was released. He found himself in another prison. The Greek government had enforced a strict lockdown for those in Moria camp, segregated from the island’s general population with over 20,000 people living, overcrowded, with limited access to clean water, food, support services, and public space. The camp would remain in this condition until K.N.’s death, just over six months after arriving in Europe.

6.5.2. Police brutality, a lack of investigation and an arbitrary arrest?

After a fight between communities, in which an armed gang attacked people from African states, K.N. and two others sustained knife wounds and at least four others were in-
jured. After 40 minutes, an ambulance came to take K.N. to Mytilene public hospital. He was pronounced dead on arrival.

Crucially, police failed to intervene, even beating those who reported the violence. The fight lasted from 10.30pm until 12.30am. According to those on the scene, the police arrived at the attack’s outbreak and left shortly after, making no effort to stop it. After police left the scene, with the fight ongoing, some of the community went to speak with the camp’s police officers to demand that they intervene. According to those present, police officers beat them back and told them to go away.

The following day, the Office of the Ivorian Community in Greece released a statement demanding that the Greek authorities launch an investigation into K.N.’s death. Police, however, made no effort to interview the victims of the attack. Police asked those in the hospital to identify photographs of suspects, but did not arrest at least two suspects who were positively identified. Despite making no serious investigation, the next day Mytilene police announced that they had arrested a separate 20-year-old Afghan man on suspicion of K.N.’s murder.

As news spread that a suspect had been arrested, witnesses claimed that the man was not the perpetrator, and that those responsible for the attack had been seen walking around Moria camp at 17:00 on the evening of the 7 July, over 24 hours after the arrest. The community delegated two witnesses to testify this to the police on 7 July, but police refused to take their statement. Police also failed to take testimony from the two critically injured people in the hospital. Some in the community suspected that the arrest had been
made arbitrarily, in order to dampen the tension in the aftermath of K.N.’s death. After being discharged from Mytilene hospital, one of the injured people attempted to testify at the police station one week later. Police again refused to take his statement. There are now serious questions about the evidential basis on which the suspect was arrested.

6.5.3. Attacks on protest

On 6 July, the morning after the attack, the Black community was still waiting for answers about the fate of their friends. No police representative took responsibility for communicating to the community that one of their friends had died and that another two were in critical condition.

Faced with no answers, and concerned for the wellbeing of their friends, the community demonstrated. They protested their lack of protection, blaming – aside from the perpetrators themselves – the camp’s management and the police for the violence that they had endured. A group of 200 members of the community gathered outside the office of the European Asylum Support Office demanding to be moved to a safer place. An evacuation procedure for the camp’s management and NGO workers was implemented. Police simultaneously responded to the protesters with tear gas and flash and sound grenades. At least two among the crowd had to be carried from the scene, one on a stretcher, both struggling to breathe, to receive medical treatment. The demonstrations continued into the next day, with roughly 200 migrants from African states sleeping outside the Reception and Identification Centre, refusing to sleep in their designated area of the
camp, due to a lack of safer alternatives.

As the days passed, the Black community planned a demonstration on 14 July in order to unite behind the demand for justice for K.N., and to highlight the complicity of camp management and the police in his death. However, as is commonplace with migrant-led protests, police coerced the community into cancelling it. Informants leaked details of the planned demonstration to the police, who threatened members of the community against holding it.

It is not the first time that violent incidents, with the cost of human life, have taken place in Moria camp, and it seems that it will not be the last, given the fact that the border control model of detention centres is far from over in Greece. The attitude of the police is often limited to the role of the observer. This role is not accidental, it is politically designed to create more chaos and insecurity for the people trapped there. For migrants, the camp is an inhospitable and dangerous place, where all laws applying to the society outside have been suspended indefinitely inside, and where human life does not have the same value.

The purpose of police interventions in Moria camp is to restrict the migrants inside and violently suppress any attempt to protest against their detention conditions. The police force is there only to guarantee the safety of the camp workers, not the residents. There is no law for migrants; there is only an absolute deprivation of human rights, the law of the jungle, and social cannibalism. Finally, it is worth wondering in which of the societies we live, after a murder and two attempted murders, the police authorities would pay such little attention to a case like this?
6.6. Conclusion

Moria RIC has never been a safe place to live. The fear of life and battle for survival that accompanies asylum seekers throughout their journey to Europe continues with the same intensity even after their arrival on European territory. In 2020 in particular, in just eight months (January-September) we saw five murders and dozens of hospitalizations at the GNMV as a result of conflicts within the RIC.

The presence of police forces was no guarantee of the protection of life, nor the reduction of conflicts, nor the administration of any kind of justice. In fact, in October 2019, the Panhellenic Federation of Police Officers, in a statement said that the coexistence of so many people in so little space results in ‘the creation of an explosive situation, which will mathematically leave behind dead and injured, regardless of their occupational identity, origin, and religion’.  

It is clear that the last nine months of Moria RIC’s existence were also its most violent period. Ten of the 26 deaths took place during this period. At the same time, it was an extremely violent time in Lesvos in general where people living in the camp were attacked in the surrounding areas. On 22 April 2020, two migrants were shot in the region of the RIC by a local man.

During this period, migrants were frequently targeted in

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racist attacks, a reception centre in the north of Lesvos was burned down by locals, and people suspected of supporting migrants or working for NGOs were also systematically attacked. 125

Meanwhile, people living in the camp were subjected to extreme lockdown measures during the Covid-19 pandemic. From 16 March 2020 until the camp burned down, residents were under strict movement controls, while the population of the camp reached 17,351 in late May 2020. 126 People were forced to battle over limited resources, while violence and exploitation escalated. 127 The conditions exacerbated regional conflict and racist violence, with fights between Afghans and those from African states, 128 the Hazara and Tajik communi-


ties, and enabled domestic violence.\textsuperscript{129} \textsuperscript{130}

\footnotesize
\textsuperscript{129} Voices of Freedom, ‘Lesvos 2020 timeline’, op. cit.
The end of Moria RIC

In the evening of 8 September 2020, a large part of Moria RIC (about one third of the camp) burned down. The government announced that the RIC would remain and the burned part would be restored.\textsuperscript{131} The next night, 9 September 2020, new fires broke out and burned what was left. The fire was the result of widespread incidents in the camp, as police forces and the RIC’s management attempted to quarantine 35 Covid-19 positive people and their close contacts.\textsuperscript{132} Many of the migrants reacted, believing that under the pretext of the pandemic, the management was trying to further isolate or deport them. For the previous six months, Moria RIC had

\textsuperscript{131} Mitarakis: Moria as we knew it cannot continue’, \textit{I Efimerida} (9 September 2020), available online at: https://www.iefimerida.gr/ellada/moria-mitarakis-theodorikakos-arkoymaneas-lesbos.  
been squeezed to breaking point under a severe Covid lockdown. Those living in the camp had demonstrated repeatedly against the unsanitary conditions of the lockdown, against arbitrary detention, and against death and the lack of security. On 2 September, the first positive covid case was found in Moria RIC. The Ministry of Migration announced that until 15 September, ‘entry and exit from the hosting structure will be explicitly prohibited’, and that the Greek police ‘will have an enhanced presence in the area around the structure’ to enforce the ban ‘24 hours a day’.133 On 4 and 5 September, just three days before the fire, mass food boycotts took place against the inedible quality of the food and the fact that those living in the camp were crammed together while waiting in line to receive it.134

At the same time, tensions heightened between the Greek state and the locals of Moria village. As was described in Chapter 3, the negotiation over the permanence of the structure resurfaced. In May 2020 the government announced a plan to build a fence around the camp. A few days before Moria RIC burned down, it was contracted to the construction company AKTOR for 854,000 Euros.135

135. ‘Moria is fenced off and closed’, *Sto Nisi* (3 September 2020),
sentative of Moria region resisted the initial May announcement, stating that this would make the structure more permanent.\textsuperscript{136} Over the following months, local protest groups organised frequent demonstrations against the presence of Moria camp, during which an NGO vehicle was attacked and had to flee under police escort, and the cars of suspected NGO workers were smashed.\textsuperscript{137} On August 20, a demonstration of locals against the opening of a new medical facility in the RIC led to skirmishes in the camp during which far-right protesters threw stones at migrants and NGO workers.\textsuperscript{138}

Meanwhile, those living in the camp sometimes faced vigilante attacks from locals if they tried to leave. Even on the night of the fire itself, locals blocked the escape route through Moria village and turned migrants back to the burning camp.\textsuperscript{139} Rumours circulating in the village suggested

\begin{itemize}
\item available online at: https://www.stonisi.gr/post/11118/perifrasses-tai-kai-kleinei-h-moria.
\item 136. Anthi Pazianou, ‘Double fencing in Moria RIC proposed by the Ministry’, op. cit.
\item 139. ‘Moria migrants: fire destroys Greek camp leaving 13,000 without shelter’, \textit{BBC News} (9 September 2020), available online at: https://www.bbc.co.uk/news/world-europe-54082201; see also Community Peacemaker Teams - Aegean Migrant Solidarity, ‘Moria burns down. The crimes against migrants continue’ (10 September 2020), available online at: https://cpt.org/2020/09/10/aegean-migrant-solidarity-moria-burns-down-crimes-against-migrants-continue; see also Voices of
that locals were also involved in the fire, especially on the second day, although this remains unconfirmed and no legal proceedings have been initiated in this direction. However, on 10 September, a call was made by Dihala (meaning ‘fork in the road’), a citizens initiative with a far-right anti-migrant agenda, to block the entrance to Moria in order to prevent the access of reconstructive machinery to rebuild the RIC. Locals commandeered large Municipality-owned trucks to do so.\textsuperscript{140}

Six young migrants of Afghan origin were accused of setting fire to the RIC. Two of them were tried in a juvenile court and sentenced in the first instance to five years in prison,\textsuperscript{141} reduced to four years on appeal.\textsuperscript{142} The other four were tried and sentenced as adults, despite the fact that three of them produced documents proving their age as minors, to 10 years imprisonment.\textsuperscript{143} Their case is currently on appeal, which was due to take place on 6 March 2023 with new evidence about

\textsuperscript{140} Community Peacemaker Teams - Aegean Migrant Solidarity, ‘Moria burns down. The crimes against migrants continue’, op. cit.; original post via Dihala’s Facebook page (10 September 2020), available online at: https://www.facebook.com/fcdixala/posts/pfbid0126pf1aASoqfgXNJoDU6jHrC6aC7sc1KRse2kDN5C4gpLg6ozgTuy6JCFYZv2PSml.

\textsuperscript{141} Legal Centre Lesvos, ‘Justice for the Moria 6’ (9 March 2021), available online at: https://legalcentrelesvos.org/2021/03/09/justice-for-the-moria-6/.

\textsuperscript{142} Free the Moria 6 campaign, ‘Press statement: still no justice for the Moria 6’ (7 June 2022), available online at: https://freethemoria6.noblogs.org/post/2022/06/07/343/.

\textsuperscript{143} Community Peacemaker Teams - Aegean Migrant Solidarity, ‘Moria 6 sentenced to 10 years imprisonment after fire in Moria camp’ (13 June 2021), available online at: https://cpt.org/2021/06/13/ams-moria-6-sentenced-10-years-imprisonment-after-fire-moria-camp.
putting the original verdict in very serious doubt. But the trial has been postponed to 4 March 2024. Meanwhile all trials against the six accused have been described by both their lawyers and observers as ‘miscarriages of justice’.

The issue of the new RIC continues to dominate the public debate on the island of Lesvos with the majority of islanders opposing the construction of any other structure, either open or closed. One of the few communities officially in favour of the construction of a new closed structure is that of the local residents of Moria, the village in which the RIC was located.

Some compensation has been given by the state to those whose land was affected, while some more is expected to be distributed. The discussion is still open about redeveloping the site where the RIC was located into something else. The grey area, between the olive groves where the RIC once


stretched, with its scattered remaining fences and barbed wire, is being transformed from month to month, imaginatively, into sports facilities, infrastructure for the University of the Aegean, a dairy school, and more recently into a school for children with special educational needs.\textsuperscript{147}

\textsuperscript{147} Ministry of Migration and Asylum, ‘The decision to approve the funding of the Municipality of Mytilene for the purchase and rehabilitation of the former Moria RIC site was signed’ (23 November 2022), available online at: https://migration.gov.gr/ypegrafi-i-apofasi-egkrisis-chrimatodotisis-toy-dimoy-mytilinis-gia-tin-agora-kai-tin-apokatastasi-toy-choroy-toy-proin-kyt-morias/.
Conclusion

This report examines in as much depth as possible the deaths of people inside Moria RIC. These deaths are, to varying degrees, directly related to the living conditions in the RIC and European migration policies. The EU-Turkey Deal, announced on 18 March 2016, remains a landmark in the response to and management of the so-called ‘refugee crisis’, until Moria RIC was completely destroyed by a fire. The last official record from UNHCR is that, as of August 2020, the island of Lesvos was home to 14,007 migrants, with 11,901 registered at Moria RIC.\(^\text{148}\) Another source shows that on the day of the destruction of Moria RIC, on 8 September 2020, more than 12,767 people were living in Moria RIC.\(^\text{149}\)

\(^{148}\) Figures from the UNHCR Greece, Weekly Snapshot 24 - 30 August 2020 (31 August 2020).

\(^{149}\) Stavros Malichudis, ‘Moria’s “missing migrants”’, Solomon (7 December 2020), available online at: https://wearesolomon.com/mag/focus-area/migration/morias-missing-migrants/.
During the time frame covered by this report, the period with the most deaths was in the last stage of the RIC’s existence, specifically from August 2019 to September 2020. During this period, we found records for 16 deaths, out of the 26 deaths in Moria RIC. We believe that the increase in fatalities cannot be attributed solely to the increase in the enclosed population of Moria RIC. According to a February 2020 article from *Time Magazine*, ‘Since July 2019, the Moria camp has quadrupled in size and now hosts 18,342 people’.\(^{150}\) As has been pointed out in the preceding chapters, the increase in the population during that period was not accompanied by further infrastructure for the increased needs of the larger population, which exacerbated the lack of access to healthcare, and the lack of measures that guaranteed security. Moreover, this last period of the RIC coincides with the change of government in Greece. The New Democracy government, from the very beginning, had a tougher anti-immigration agenda compared with the previous government, which it implemented. The rapid increase in the number of trapped migrants on the border islands is directly linked to the political decisions of that era (see Photo 5 in the Appendix).

To talk about the extensive violation of children’s rights within Moria RIC is an understatement; there is no need to talk about rights in a place where the lives of children were actively endangered and threatened on a daily basis. The minors – always considered among the most vulnerable of

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any population – were facing the same inhumane conditions that every person living inside Moria RIC experienced. Those conditions proved fatal in many instances, as indicated by the recorded number of child fatalities: eight of the 26 cases were those of minors, two of those being infants under one year old. Furthermore, it is important to stress that even the attempt to create supposedly ‘safe spaces’ for minors fell far from providing the safety it promised (as was demonstrated in Chapter 6 with the case of the minor R.E. who was murdered inside the so-called ‘safe zone’).

As reported in detail in Chapter 5, living in Moria RIC caused extensive damage to the mental health of the vast majority of the children living there. Despair, hopelessness, constant exposure to violence, a climate of insecurity and fear were just some of the aggravating factors that, in many cases, led to a severe deterioration in the mental health of children and adolescents and, consequently, to particularly high rates of substance abuse, depression, self-harm, suicidal ideation and suicide attempts among this population.

Of the 18 adult deaths recorded, three were women, 14 were men, and for one case there is no gender information. The population of men in Moria RIC has been much larger throughout the years than that of women (often more than double). This demographic difference is reflected in the recorded deaths. Through the interviews and data we have collected we believe that this difference is related to other factors. The large category of ‘single men’, i.e. men without a family whose profile did not fall into any of the categories of ‘vulnerability’, was the category that consistently lived in the areas with the worst conditions, and who were trapped for
longer on the island due to non-designation as vulnerable.151

8.1. A lack of accountability

It is certain that there has been almost no effort to find direct responsibility for the deaths of the people inside Moria RIC. The complex cluster of actors operating in the RIC makes it harder to get a clear picture of specific responsibilities and accountabilities. The administration of the camp itself, the Greek military, the Ministry of Immigration and Asylum, the Ministry of Public Order, the UNHCR and a plethora of NGOs were active in the RICs, each responsible for various aspects of camp management, some sub-contracting services to others, each able to point the finger at another when something went wrong.

In most cases, the deaths in Moria RIC were not followed by institutional accountability. In two cases the state was brought to court, for the 2017 deaths of A.E. and M.M.. In one other case the public prosecutor opened an investigation into the 2020 death of a man in PRO.KE.K.A., after pressure from legal-aid groups. These are the only instances in which the responsibility of the state was brought into question in relation to deaths in the camp.

One of the obstacles in holding the state accountable for deaths in Moria RIC is that the RIC existed in an administrative grey-zone. Despite its population being subject to various

restrictions of movement and freedom, those living there – with the exception of PRO.KE.K.A pre-removal detention centre – were not considered to be in state custody. Therefore state responsibility for the conditions is legally very limited (despite its clear responsibility). In most of the above cases, the investigations of the prosecutors have been closed, without a public announcement of the findings. The only way formal complaints could be filed against state entities, would be if the family of the deceased brought the case on the deceased's behalf. This presents serious challenges to legal aid organisations, especially when family members are outside of Europe, or are unknown. Investigations were opened in case of murders, however, RIC conditions and state responsibility did not fall within the scope of these prosecutions.

The Greek state clearly acted in bad faith with regard to the death of migrants in Moria RIC, actively spreading misinformation on more than one occasion that attempted to redirect blame onto those living in the camp. In the 2021 trial for the 2017 deaths of A.E. and M.M., not only did the state argue that it bore no responsibility on the basis that the deceased were not detained, but also claimed that the deceased were ‘contributorily negligent’ for their own deaths on the basis that they had willingly migrated. Further, the state claimed that the deceased knew the dangers of using improvised stoves on the basis of informational pamphlets being distributed in the camp – pamphlets which were distributed after they had died.152 Additionally, in the 2019 death of J.P.A,

152. Yannis Papadopoulos, ‘Justice for Moria deaths’, *Kathimerini* (25 June 2021), available online at: https://www.kathimerini.gr/socie-
the then-Minister of Migration made misleading statements about his living conditions at the time, claiming he stayed in a container with a heating unit, not the thin summer tent he had actually been residing in. Similarly, in the 2019 death of F.T. during a fire, a police spokesman made the false claim that migrants had set the fire, doing so crucially before the fire service had conducted any investigation.

8.2. Permanently temporary

Emerging from our investigation into these deaths is the notion that conditions in Moria RIC were deliberately kept in a state of underdevelopment. This was in order to appease local society, namely local landowners fearful of expansion of the camp onto their property, and an increasingly vocal right-wing population who objected to the presence of migrants in the island. In addition to the disastrous consequences that the EU-Turkey Deal had on migrant rights, the Deal also had symbolic value locally in the sense that it signified a double betrayal for the locals, first by Europe, then by Athens. Many local residents of Lesvos felt they had been abandoned to deal with the impact of the ‘migration crisis’. The testimony of NGO workers in Chapter 3 highlights the pressure the RIC


154. ‘Migrants in Greece set fires in camp, at least 1 killed’, Associated Press (29 September 2019), available online at: https://apnews.com/article/92a15950e8f948ef99ebdbcb5df2f966.
administration put on NGOs to find temporary solutions to permanent problems, increasing the risk of life-threatening injury. As is described in Chapters 3 and 7, the lack of proper infrastructure was influenced by local attitudes against turning the RIC into something resembling a permanent structure. This was accompanied by a lack of adequate staffing of already-inadequate services. The 2019 death of a nine-month-old infant occurred alongside reports of medical services being closed in the RIC and lack of interpretation to ensure medical instructions were fully understood. The 2020 suicide in PRO.KE.K.A, for example, occurred alongside allegations of a lack of will to properly staff medical and psycho-social services.

Over the years 2016-2020 that Moria RIC was transformed from a temporary hosting site for people in transit into something resembling a ghetto. It was a place whose conditions were certainly not designed to sustain life, as is clear from the manner in which people lived and died there. A population which was left without adequate shelter, healthcare or security. At its peak, Moria RIC was the second largest ‘city’ in Lesvos island, made up exclusively of those considered non-citizens – for whom ambulance services refused to respond, for whom police refused protection, and whose dead were not even given the respect of being remembered. Our research depended on local news reports, yet in 15 of the 26 cases we do not even know the name of the deceased – the final insult of the RIC’s potential to negate and erase.
8.3. Resistance and police power

There is another attempt to erase the agency of the people living in Moria RIC. Many times, a person’s death was followed by protest by the friends and relatives of the deceased. In 2018, what became known as the Mytilene ‘pogrom’ started as a protest against the death of A.K. Following his death, a group of Afghan migrants occupied Mytilene’s main square, Sappho Square, protesting the death and the conditions in which they were forced to live. The mayor at the time, Spyros Gallinos, stated that ‘they should respect the laws and rules of the country and above all the local community that hosts them’. On 22 April 2018, the protesters were attacked by a far-right mob. The police failed to intervene against the attackers, instead arresting 110 people (108 migrants and two Greek citizens), and charging them with occupying public property, revolting with physical force, and resisting arrest. The 2019 death of F.T. during the 29 September fire was also followed by days of protests. Police responded by, on the one hand, limiting access of volunteers coming to aid in the aftermath of the fire, and on the other containing any pro-

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155. ‘How many more people will die on the Aegean islands?’, *Are You Syrious* (19 April 2018), available online at: https://medium.com/are-you-syrious/ays-daily-digest-19-04-18-how-many-more-people-will-die-on-the-aegean-islands-3ec1132f00aa.
tests within the immediate vicinity of Moria RIC by creating roadblocks at both of its main road exits.\(^{158}\) On 16 January 2020, police again blocked protests following the death of a Congolese man the previous day, this time using tear gas and arresting three Somali men in the process, accusing them of disturbing public order, threatening the police and resisting arrest.\(^{159}\) And on 6 July 2020, migrants protesting the death on the previous day of K.N. were attacked by police with tear gas and stun grenades.

On at least two occasions, witnesses claimed that police were on the scene and failed to intervene in fights that led to death: that of R.E. in August 2019 and K.N. in July 2020. There were, however, frequent reports that ‘the police don’t intervene in fights, nor do they prevent them, but they sit and watch.’\(^{160}\) We see, then, that in the moment of need, police did not consider this population to fall within their jurisdiction. This seems to be due to a combination of factors. First, in the case of R.E. described in Chapter 6, there is evidence of an operational order against direct intervention in violent crime (police claimed they ‘could not intervene without hav-

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160. ‘Suffocation for over 7,382 people!’, Emprosnet, reposted on Refugee Observatory Aegean (16 May 2018), available online at: https://refugeeobservatory.aegean.gr/el/ασφυξία-για-πάνω-από-7382-ανθρώπους.
Another factor is understaffing, as police frequently claimed to be insufficient for the population in the camp. In October 2019, the Lesvos Police Officers Union claimed they faced ‘adverse conditions... due to their extremely increased workload, with the main reason being the large increase in refugee and migrant flows and the suffocating situation at the Moria RIC’.  

Finally there is evidence of a generally dismissive attitude running through the police force. In 2016, Human Rights Watch reported from Vathi RIC in Samos that ‘Camp fights are a daily occurrence at Vathi and (...) police withdraw when the fighting starts and do not intervene to protect people.’  The claim of a migrant woman interviewed by *Emprosnet* newspaper in May 2018 correspond with the experiences of many who tried to report violent crimes in Moria RIC: ‘she has repeatedly approached the police about incidents of aggression and the police officers reply “I will not intervene unless they bother me.”’  Again, as was described earlier in the case of the fatal stabbing of K.M., which occurred during a big fight, his friends and survivors of the attack reported that police were on scene, made no attempt to intervene, left shortly after, and beat those who tried to call them back to  

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163. ‘Suffocation for over 7,382 people!’, *Emprosnet*, op. cit.
the scene.\textsuperscript{164}

While the police were not there for migrants in the moment of need, they were certainly there for the aftermath. As described above, police handled the frequent demonstrations against real and potential loss of life with the tactics used against ‘insurgent’ populations. Demonstrations were controlled and isolated. Weaponry, such as tear gas and stun grenades, were regularly used. We would argue that, according to the unwritten code of Moria RIC, migrants were only to be policed \textit{against}, and not \textit{for}.

\begin{quote}

The reason why we undertook such a study was that, essentially, there is no other research concerning the deaths in the Greek RICs. The aim of this research is to contribute to a more comprehensive assessment of the crimes of European and Greek migration policy. While there is a plethora of research and reports that publish evidence of the dangerous migration management strategies of Greece and the European Union, there is no census of deaths in other RICs in Greece. We consider it important to record and investigate as much as possible to keep these incidents alive, and as a part of historical memory.

The so-called “refugee crisis” is no longer playing out on the same scale as it did from 2015 to 2020. Moria RIC no

\textsuperscript{164} Community Peacemaker Teams - Aegean Migrant Solidarity, ‘The knife was not the only murder weapon’ (6 August 2020), available online at: https://cpt.org/2020/08/06/aegean-migrant-solidarity-knife-was-not-only-murder-weapon.
longer exists, and the population of people living in the RICs has decreased significantly. Greece’s New Democracy government has, since 2019, put in place anti-migration strategies that have been successful in their own terms. Refugee and migrant arrivals to the camps are minimal, as the route from Turkey to the islands of the Northeast Aegean is almost impassable. It is an open secret that Greece’s main method of preventing migrant arrivals is the use of illegal pushbacks, as backed up by research and frequent reports. A pushback is a term referring to a set of state measures by which migrants are forced over a border – usually immediately after crossing – without consideration of their individual circumstances and with no possibility to apply for asylum.

At the same time, in Samos and Kos, the new Closed Controlled Access Centers (CCACs) have opened and are expected to open soon in Chios and Lesvos. The latest official announcement from the Minister of Migration and Asylum, Notis Mitarakis, was that the official opening of the new Vastria CCAC in Lesvos is due in 2023. The transformation of the RICs into CCACs has further deteriorated living conditions as CCACs function even more restrictively than RICs. From the example of Samos, we know that there are more intensive controls, the exit hours for migrants are very strict,

165. See, for example, Forensic Architecture investigation, ‘Drift-backs in the Aegean sea’ (15 July 2022), available online at: https://forensic-architecture.org/investigation/drift-backs-in-the-aegean-sea.
and the centre is monitored by an electronic surveillance system. Migrants are confined into isolated areas with reduced capacity to communicate with the outside world. The CCAC in Vastria will open a new chapter in Lesvos’ migration management, where refugees and migrants will be further isolated and cut off from the outside world.

# Glossary

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Full Name</th>
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<tbody>
<tr>
<td>AMKA</td>
<td>Arithmos Mitroou Koinonikis Asfalisis – Social Security Number</td>
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<tr>
<td>EASO</td>
<td>European Asylum Support Organization</td>
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<td>EHPA</td>
<td>Eidikos Choros Paramonis Allodapon – Special Immigration Residence Area</td>
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<tr>
<td>EODY</td>
<td>Ethnikos Organismos Dimosias Igeias – National Public Health Organization</td>
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<tr>
<td>GNMV</td>
<td>Genikos Nosokomeio Mytilinis ‘Vostaneio’ – General Hospital of Mytilene ‘Vostaneio’</td>
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<tr>
<td>KEELPNO</td>
<td>Kentro Elegxou kai Prolipsis Nosimaton – The Hellenic Centre for Disease Control and Prevention</td>
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<td>KEPY</td>
<td>Kentro Protis Ypodochis – First Reception Centre</td>
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<tr>
<td>Acronym</td>
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<td>MAT</td>
<td>Monades Apokatastasis Taksis – Order Restoration Units</td>
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<tr>
<td>PAAYPA</td>
<td>Prosorinos Arithmos Asfalisis Igionomikis Perithalpsis – Temporary Health Care Number</td>
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<tr>
<td>PEDI</td>
<td>Periferiaki Dieuthinsi of Ethnikos Organismos Paroxis Ypiresion Ygeias – National Primary Healthcare Network</td>
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<tr>
<td>PRO.KE.K.A</td>
<td>Proanachorisiako Kentro Krasis Allodapon – Pre-Removal Detention Centre</td>
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Appendix
Migrant deaths in Lesvos since 20 March 2016 (implementation of the EU – Turkey Deal)

<table>
<thead>
<tr>
<th>Date</th>
<th>Number</th>
<th>Name(s)</th>
<th>Gender</th>
<th>Age</th>
<th>Nationality</th>
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# Migrant deaths in Lesvos since 20 March 2016 (implementation of the EU – Turkey Deal)

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Description of the RIC.
Description of the zones in Moria.
Photo 1: Graffiti outside Moria RIC.
Photo 2: The so-called ‘jungle’ area (photographed by P. Karathanasis in June 2020, source: https://refugeeobservatory.aegean.gr/el/κυττάμοριας-2020-ανάμεσα-στο-«hotspot»-και-τον-«καταυλισμό-πόλη»?language_content_entity=und)
Photo 3: Call to demonstrate in the city centre of Mytilene (16 January 2020) with the slogan ‘Prisons Kill’, following the death of a 31-year-old Iranian man inside Moria PRO.KE.K.A.
Photo 4: Photo from the demonstration mentioned above (on 16 January 2020), in the city centre of Mytilene.
Photo 5: Graffiti inside Moria RIC