

Findings from consultations with refugee and migrant women, men, girls and boys in Moria, Kara-Tepe and surrounding areas

Participatory assessments: Refugees at the center of decision-making

Lesvos, Greece
17 -21 November 2015

Outline

I. Executive summary	2
II. Background and context	2
III. Rationale and objectives	3
IV. Methodology	3
V. Challenges	4
VI. Protection and assistance gaps and associated risks identified per sector	4
A. Protection	4
B. Shelter and Non-food items (NFI)	9
C. Food	10
D. Water, sanitation and hygiene (WASH)	11
E. Health	12
VII. Recommendations	13



I. Executive summary

From 17 to 21 November 2015, UNHCR Lesvos held consultations with 128 refugee men, women, boys and girls of diverse ages and backgrounds in Kara-Tepe, Moria and PIKPA. The aim was to identify priority concerns, protection and assistance gaps, as well as obtain feedback from refugees on solutions. The results are expected to inform current activities and future programmes, including for contingency planning purposes. Consultations remain pending for northern Lesvos.

The overall findings revealed the need to strengthen access to basic services, as well provide more targeted support to persons with specific needs. The broad recommendations based on the findings are outlined below:

- Enhance and revise reception conditions, while focusing on those who are most vulnerable
- Support in the organization of services related to food, shelter in coordination other actors; ensure that they are in line with minimum standards, including protection
- Establish systematic referral and response pathways or systems for persons at risk
- Explore greater involvement of refugees in activities around the site, even if short-lived e.g. in cleaning, cooking, translating, etc.
- Advocate for enhanced reception conditions for unaccompanied children and work with authorities on durable solutions for them based on best interest principles
- Enhance messaging and communication to refugees on services, rights, responsibilities and contact information to report fraud, abuse, etc.
- Strengthen protection outreach and presence in and around the sites, also for those living out-of-camp (urban) and around the island
- Strengthen outreach and coordination with local organizations, including volunteers, assisting refugees; provide institutional support and build on their capacities

Urgent follow-up is needed in relation to reports of money being requested for refugees to access Moria, as well as an increase in unregulated medication provided by volunteers and in tents being set up outside the site. Issues related to SGBV in Moria and Kara-Tepe also require follow-up. Food, warm water and winterization are also priorities ahead of the cold and wet winter.

Detailed recommendations found on page 13 of this report.

II. Background and context

By 17 November 2015, the number of arrivals by sea to Greece had reached close to 700,000 persons. Almost all register on the islands and are issued a police note which allows freedom of movement in Greece (6 months for Syrians and 1 month for non-Syrians) and specifies a date to seek asylum. However, the vast majority, including the most vulnerable, quickly move onwards through Athens to countries like Germany, Holland and Sweden. This renders the island of Lesvos, as other islands, as a transit site or midway point into people's journey.

On the other hand, unaccompanied children, female-headed households, survivors of shipwrecks, unaccompanied older persons and others at risk are often among those who remain longer on the island. These groups require greater and more targeted attention and support when it comes to assistance and durable solutions, especially as onward movement exposes them to increased risk and harm.

Recent figures from police authorities estimate that the number of persons staying on Lesvos at any given point in time ranges from 5,000 to 7,000 persons; with around 3 out of 4 registering. In terms of shelter, less than 300 persons remained at the Kara-Tepe and Moria sites during the past two days which

III. Rationale and objectives

The current report outlines the preliminary findings and recommendations from participatory assessments or structured dialogues with 128 refugee men, women, boys and girls of diverse ages and backgrounds who had either recently registered, stayed for a few days in Kara-Tepe and Moria or were residing at the PIKPA shelter. The exercise took place from 17 to 21 November, and was coordinated between UNHCR and other humanitarian agencies.

Since the start of the crisis, UNHCR and others have been interacting with individuals and groups of persons of concerns. Therefore, the aim of the PA was to have more structured and consolidated dialogues with the different groups to help:

- analyze the priority protection and assistance gaps facing refugees and understand the causes
- identify local and refugee community capacities to respond to these gaps, as well as listen to proposed solutions
- identify groups at risk which need further support

The outcomes of the structured discussion, as a protection snapshot, will then be used to address identified violations and gaps, redesign 2015 activities and plan for 2016.

IV. Methodology

During the timeframe indicated above, UNHCR, Save the Children, ActionAid, International Rescue Committee (IRC), Lesvos Volunteer Coordination Agency, Medecins du Monde (MDM), Human Appeal and Mercy Corps conducted some 20 focus group discussions and semi-structured interviews. Child participatory assessment methods were also used under the guidance of Save the Children. UNHCR and others also conducted many observations and spot checks at the two sites. In preparation, UNHCR and Save the Children trained more than 20 people on participatory assessment methods.

Groups and subgroups consulted with were identified based on population mapping, and were generally divided, as follows:

- Men (married, single/youth, and single headed households)
- Women (married and female headed households)
- Older persons
- Persons with disabilities
- Children, including adolescents
- Unaccompanied children
- Other groups: Christian Syrians, Pakistanis, Eritreans, Kurds from Syria and Iraqis

Within each focus group discussion held with adults, up to three themes of their preference were discussed e.g., health, food, non-food items or basic needs, shelter, safety/security etc. The majority of informants were of Syrian and Afghan nationality, as well as Pakistanis. The information gathered was then analyzed and reviewed by humanitarian actors who conducted the assessments.

V. Challenges

Certain challenges were noted during the assessment period. They impacted the ability to meet with more groups at risk, have more detailed discussions and identify other protection challenges. The challenges include:

- Constantly changing and highly transitory nature of the population
- Difficulties finding adolescents (children over 15 years of age), especially adolescent girls¹

Mostly vacant sites: Sites were generally empty at the time of the assessments which made it difficult to come across subgroups such as older persons and persons with disabilities. When present, these groups are often prioritized for registration and quickly offered more appropriate shelter solutions outside the sites. Fewer people were reportedly unable to reach Greece from Turkey due to tighter Turkish patrols along the coast and borders and due to windy weather conditions.

The constantly changing and unpredictable nature of the operation makes it difficult to determine the extent and the nature of the response. It also makes it difficult to set up and solidify structures and systems. However, the findings in this report could help when setting up contingency plans.

VI. Protection and assistance gaps and associated risks identified per sector

Below is a summary of the main protection and assistance gaps expressed by refugees. How these gaps affect the different groups and sub-groups is duly reflected. **In short**, the main concerns for refugees of all ages and backgrounds were mostly around shelter, water sanitation and hygiene (WASH) and food. This indicates the importance of ensuring that basic needs are available and accessible, as well as meeting minimum standards. Concerns around reception conditions in Moria were also noted and require urgent interventions.

A. Protection

Reception and registration

- Refugees commended the treatment by humanitarian workers who were always available, especially in Kara-Tepe. Persons with disabilities felt satisfied with the welcome at reception by staff and volunteers at shores and sites.
- They reported that interpreters were not respectful and were not translating properly, both in Moria and Kara-Tepe.
- Afghan men expressed concerns over the long registration period and absence of a system. They considered it as putting people at risk and increasing frustration, fights and increasing the risk of losing belongings. Men feared border closures and were becoming agitated. They suggested increasing registration points and police abiding by the number sequence. They consider the numbering system too loose and are interested in ensuring a properly working system.

¹ It should be noted that during the week prior to the assessment, adolescent boys were mostly arriving separated, with relatives other than parents, and quickly moving onwards.

- Afghan men were concerned about the increased fraud. They reported that they were “forced” to buy numbers outside just to enter the site. They indicated that they did not know who to report this to and how to avoid it.
- At the time of the assessment, Syrians and others had to queue alongside persons from other nationalities. This resulted in long waiting period and under difficult weather and reception conditions. Syrian couples were requested to register in Moria. They complained about the long waiting hours without consideration for their special circumstances. For example, a separated child, an unaccompanied man with intellectual challenges and 3 pregnant women were among those who were reportedly waiting more than 12 hours for registration at Moria in the open and during nightfall. A few Syrian families with children had wrongly reached Moria instead of Kara-Tepe at night.
- Refugees, especially male youth, reported being “surprised at how unorganized” everything was. This was reported both in Kara-Tepe and Moria.

Community participation

- Women of all nationalities reported making friends with other families and women while en route and in Greece. They spent time at each other’s shelter units/tents.
- Women reported trying to talk to Greek nationals, but faced language barriers. They reported feeling supported by locals and provided with basic facilities and assistance.
- Some men reported that they knew a number of Syrians who remained on the island, applied for asylum and started working.
- Local residents and organizations are providing support and have reportedly been doing so for a long time e.g. shelter, food, clothes, etc. They reported feeling side-lined, with their work being undermined and taken over by international actors.

Suggestions to improve this include to:

- In coordination with authorities, review and enhance queues and reception in Moria to limit waiting period, prioritize the most vulnerable
- Address registration fraud and ensure people know where and how to report (see communication)
- Conduct mapping of local organizations and their activities; explore ways to coordinate with them and provide support. Invite them to general coordination meetings.
- Identify entry points to bring both local and refugee communities together.
- Provide training on basic protection principles to all actors on site

Safety and security

- Women, men and children of all nationalities mostly felt safe on Lesvos, whether at Moria, Kara-Tepe or PIKPA shelter. No cross or inter-nationality problems were reported. Overall, refugees felt safe moving around, including to latrines, shops, wash rooms, etc. Unlike other women, those in Moria knew that they could report incidents of violence to the police. Women requested contact information of UN, NGOs and the police while they were in transit.
- Feelings of safety were slightly less felt among female-headed households and minorities e.g. Kurds, Christians, etc., as well as during the night. Female headed households without relatives felt less safe than others both in transit and on site. They were more likely to be seen supported by single men with whom they had no links. Most female-headed households

befriended families with children as a safety strategy, while minority groups mostly kept to themselves and had less support networks.

- Women living in the more remote housing units in Kara-Tepe reported feeling unsafe to walk to the showers alone at night. The same was the case in Moria where the area outside the site (olive plantation) was reported as very dark at nightfall. Women therefore opted to remain instead their tents at night.
- Women in Kara-Tepe reported feeling unable to take off their veils and clothes at night in the housing units. Due to lack of lights, they were keeping the doors open to bring in light from the outside. They reported that some men were looking into the tents which made them feel uncomfortable.
- Women headed households left their children unattended unit in the shelter units in order to access food, clothes and WASH facilities.
- Adolescent girls and boys reported feeling hopeful about their new life in Europe, particularly keen to continue their education. However, they experienced fear, anxiety and physical deprivations before arriving to the island. For example, their journey entailed a lot of walking in woods and being without food/water for a long time (12 hours). While on the boat and without food, they feared having to jump into the sea in case the boat engines gave up. They reported that boats were packed, with people on top of each other. They recalled people screaming and becoming sea sick as the waves became higher. Adolescent girls also reported feeling sad, isolated and lonely due to being homesick.
- Adolescent girls felt increasingly responsible for looking after their younger siblings from getting lost and being safe. The adolescent girls interviewed had had a sibling accidentally separated from the family group or knew of someone whose child had been accidentally separated. These extra responsibilities resulted in the adolescent girls reporting feeling exhausted.²
- Anecdotal information of women being raped was reported. Women were allegedly approaching social workers or staff requesting contraception to prevent associated pregnancy. They were referred to doctors, but preferred not to approach them. Anecdotal information of domestic violence and harsh child rearing was also reported. Adolescent girls reported rape, drugs and children kidnapping in Marsin, Turkey. Children also spoke of being drugged by smugglers in Turkey when passing police checkpoints. URGENT FOLLOW-UP NEEDED).
- Persons with physical disability found it difficult to manoeuvre with their wheelchair on their own due to the stony ground in Kara-Tepe and steep/uneven settings at Moria.

Suggestions to improve this include to:

- Fast track persons with specific needs e.g. pregnant women, disabled, older persons, etc. for registration to prevent delays
- Revise bussing routes to identify and address pitfalls and gaps
- Provide messaging around positive parenting, hygiene, violence etc. in accordance with laws.
- Explore the issue of SGBV further.

Access to information and communication

² There were challenges finding adolescent girls. Anecdotal information was that they remained in Syria due to the high costs associated with the flight to Europe and preference for sending male siblings off.

- None of the refugees consulted knew who to approach on Lesvos for help or to report issues.
- Most reported not having any information at first point of contact before registering. After registration, men and women in Kara-Tepe reported regularly being approach by different actors who were asking about their situation. Refugees did not know who the agencies were but could identify the different colours they saw. This was not the case in Moria.
- Women and men in Moria reported that they were unaware of what services were available on site, where and at what times. They were also not aware of the women and child friendly spaces, food distribution and where to charge their phones.
- Children who were consulted as a part of group discussions were aware of the child friendly spaces as they had seen other children sing and play with toys which attracted their attention. However there was a need for better information around opening hours of the child friendly spaces.
- Women arriving in Moria during the evening do not walk around the site due to lack of light and end up staying in the tents. Afghan women reported that they only received information from each other. They added that the information was not always accurate.
- Refugees, including minority groups, noted a lack of information on the services or activities onsite. They had no information about who could help and with what. However, those in Kara-Tepe were aware that there were organizations around who could help in some way.
- Due to the severe weather conditions over the consultation days, many families and children reported staying indoors and not walking around Moria camp to see what is available. During this period they remarked on the lack of staff members present, including police and humanitarian actors.
- Those living further from the registration area and other services/safe spaces e.g. the outside area around Moria and the more remote housing units in Kara-Tepe felt isolated and reported not being visited. They did not know about the services in place and remained long hours without any food.
- Refugees reported lack of coordinated and organized systems around registration, food, assistance etc. They were concerned that this could lead families and groups to lose each other whilst they were scouting around for the info/service.
- Lack of information and/or clear signage was noted by single and married men. Male youth, reported being “surprised at how unorganized” everything was and how often it changed. This affected their access to registration and basic needs e.g. food. This was reported on both sites.
- Due to lack of electricity in the housing units, refugees had to spend a long time standing outside charging their phones at night in the cold. Older persons reported “suffering” from prolonged standing at the phone charging point. No women or girls were found at the charging stations.
- Refugees arriving to the island had heard from others on the route that there would be organizations who could take care of them, especially their basic needs. Adults and children were especially grateful for those who helped them upon arrival at the shore (volunteers?). This was reported by the vast majority.
- Afghan and Iraqi men reported that they were not aware about the registration process, next steps and how the asylum systems worked in Europe. They felt insecure and overburdened with responsibilities for their families. The only information they have was from relatives. They requested more information about asylum procedures in Europe and close to the registration area where they spend a lot of time. This will help them be better prepared.
- Iraqi men found the signs misleading and remained unaware of what they were supposed to do on the site. They reported receiving different information from different people.
- Refugees were receiving information mostly from others, Facebook groups and pages and WhatsApp.

Suggestions to improve this include to:

- Provide map of sites and a booklet of services and timetables at entrance. Post online at commonly accessed sites and social media. Provide group orientation and counseling sessions. Place information on signboards
- Expand outreach and regular contacts with refugees in and around sites for information sharing, regular contacts and gap/risk identification
- Provide more chairs or benches in the charging areas
- Increase information about the registration process, what it means and next steps to be provided by big signs and through group counselling
- Put in place benches away from the tents so people can sit together, eat without getting their shelters dirty and speak freely. Create communal areas with seating
- Provide more chairs in the phone charging area
- Ensure that Vodafone provides correct information

Unaccompanied Afghan and Syrian adolescent boys at first reception in Moria and at Kara-Tepe

- Afghan boys reported feeling respected and welcomed by Greek nationals, especially upon arriving on the island.
- The adolescents now feel deprived of freedom. At first they felt special to be selected to be brought to a different place than the other people they were travelling with. Now they are disappointed, because they are locked up. They requested to be taken out of the detention facility for a short while during the day. They all emphasised that they feel they are being kept there for too long and are not aware of why it takes a long time.
- They fear that their onward journey is being delayed and becoming more difficult e.g. borders closing, colder weather, etc. They requested support when moving onwards: money, map, etc.
- Few reported harsh treatment, mostly verbal, by police. They claimed to have reported it to different actors without any improvements.
- All the unaccompanied children reported boredom and lack of activities which was affecting their bodies. Most boys felt healthy and strong.
- All knew how to access medical services.
- All the adolescent boys were able to write their feedback down in Farsi and wrote extensively about missing family, feeling lonely and feelings of 'suffocation', 'being inside a prison' and crying for all these reasons. They mention relying on each other to escape boredom but there is insufficient activities in place for them on a daily basis.
- They all mentioned access to Wi-Fi as something crucial. They reported depleting their funds based on topping up their Vodafone SIM cards for data and lack of signal at times for data. Due to this they requested Wi-Fi set up in the area for them to contact family and friends which would make them feel less lonely, isolated and afraid.
- Their recommendations around activities range from having footballs, films, and learning materials such as basic language books.
- Access to warm water for showers varied between rooms.
- They found the breakfast too small and the tea, too cold and sweet. The portions of lunch and dinner were fine. They requested soup and earlier lunches. Those that considered the food insufficient were buying some from moving vendors, which was depleting their remaining financial resources.
- There was feedback around there not being enough water distributed throughout the day.

- Two unaccompanied adolescent boys were reportedly driving the boats/yachts bringing in refugees and migrants. In return, the unaccompanied boys did not have to pay the hefty smuggler fees which ranged between 1,200 and 2,500 USD.

Suggestions to improve this include to:

- Enhance reception conditions: decorate the rooms and outside area
- Provide more recreational activities
- Provide language classes; including geographical information
- Provide internet to access information and communicate more with their families
- Increase talk time with families to 20-30 minutes (now only 2-3 minutes)
- Increase food portions
- Advocate for alternative forms of accommodation and identify durable solutions with the authorities to prevent further risk associated with unsafe onward movement

B. Shelter and Non-food items (NFI)

In Moria and Kara-Tepe sites

- Adequate and decent shelter was considered as a main concern and priority for all.
- Most refugees, including older persons, reported that sleeping at night was uncomfortable due to lack of mattresses or pillows. They reported that the ground was cold and one could feel the stones beneath the tarpaulin. All men and women complained about the cold and lack of protection against the elements, especially at night. They attributed it to the lack of proper flooring and limited blankets. All, including children, were not able to sleep at night. Children were reportedly having stomach cramps because of the cold. One Afghan youth was so frustrated that he could not sleep that he started punching the floor. In addition to children, those most affected include arrivals especially those who arrive at night with wet clothes. The lack of warm water exacerbates their situation.
- Youth and women complained that distribution was not fair e.g. some persons received 7 blankets, while others received only 1 per family. The same went for clothes. They reported that undeserving families were leaving the clothes behind or burning them.
- Refugees reported that some large families had only 1 blanket which was not enough. On the other hand, those coming from Oxy had one blanket and then received another one on site.
- All were concerned about the lack of lights in the housing units, especially women and children. Parents were concerned that could not see their kids. They also added that mothers could not see their babies in order to breastfeed. Families reported that could not talk while in the housing unit because they could not see each other. Children could not play.
- An increase number of tents were being set up in Moria outside of the registration area by Afghans. Many housing units close to registration offices therefore remained empty. Afghan refugee women reported that they opted for this due to lack of lights inside, as well as to being more aware of food distribution times (which are random) and being given more medication by volunteers. The women reported that they did not know where to get food inside the camp and they also felt closer to the police outside and thereby safer. (URGENT FOLLOW-UP NEEDED).

Suggestions to improve this include to:

- Winterize shelters
- Equip shelter with lights and phone charging options

- Provide clothes and blankets in more targeted way, with priority to persons with specific needs (develop criteria)
- Revise blanket distribution strategy for the island. Harmonize distribution criteria and modality
- Allocate a number of houses to persons with specific needs e.g. those nearby WASH and health facilities, social support, etc. and make them suitable for them (flooring, etc.)
- Explore more suitable pathways around the sites for older persons and those living with disabilities
- Increase access to food, doctors and police inside the Moria sites, as well as communicating where services are.

Alternative shelter facilities for the most vulnerable (PIKPA)

- Men and women living in alternative housing options (other than in Kara-Tepe and Moria) were satisfied with food and health services. They also reported enjoying good relations with the volunteers. Everyone reported feeling safe and that security was not an issue.
- Women sometimes felt that it was becoming overcrowded.
- However, as others, they were concerned with their hygiene situation. In specific, they reported lack of hot water and lack of privacy. Bathrooms were considered to be far from the sleeping rooms, which mostly affected older persons with mobility and other challenges. They required caretakers to regularly take them to and fro the toilets each night.
- Because of this (cold and lack of privacy), men, women and children reported not having taken a shower for the past 5 days.

Suggestions to improve this include to:

- Set up heating system so to have hot water for the shower
- Put in place doors rather than shower curtains
- Allow the residents to cook their own food and clean utensils (sinks and cookers needed)

C. Food

- Food was another common issue of concern for all persons of concern, across all ages and backgrounds.
- Not all the refugees consulted with were aware of the timings and locations of the food distributions in the sites. This was especially the case for newcomers and persons with disabilities who were unable to move around freely. Due to lack of information, women in Moria reportedly lived off biscuits.
- Refugees in Moria claimed that they were only aware that food was being distributed when they saw someone carrying it. They then asked where they got it from.
- Refugees who arrived after 8 pm reported not having food until 2 pm or later the following day. This was either because it was not being distributed and/or they were not informed.
- Refugees reported that many people - especially those with children and those who have made the crossing from Turkey on the cheaper rafts rather than boats - do not get food for a long time. In relation to this, adolescent girls reported that the smugglers recommended that they not eat in order to prevent vomiting (sea sickness). Most had therefore not eaten for 12 hours.
- Men, women and children complained about the type of food. They were unhappy with the breakfast. They considered it as unsuitable, e.g. foul smelling cheese, they are not used to

baguette/sandwiches, stale/soggy bread, etc. As a result, whole sandwiches were left uneaten and discarded. Lunch, which was mostly rice and lentil based, was reportedly hard to chew (not properly cooked) and cold. They also reported that portions and quantities were not enough.

- Refugee men and women requested milk for their children. They requested nutritionally adequate food for children. Fruits and biscuits were welcome.
- Women reported having less breast milk and requested supplementary milk for their children.

Suggestions to improve this include to:

- Consult with members of the community on food preferences, as well as solicit their help in preparation – if possible
- Set up known food distribution points and at regular times; communicate this through outreach information, leaflets, signs, etc. Ensure regular coordination with all food providers to ensure same timings, menus meet cultural and nutritional needs, etc.
- Ensure targeted food support for those who are shelter bound or face mobility challenges; facilitate eating with others to prevent isolation

D. Water, sanitation and hygiene (WASH)

Water

- Despite the signs, it was not clear to all that the water was potable.
- Mothers often kept their children without water to prevent them from becoming sick.
- Even when the sign was visible, refugees did not believe that this was enough to make them drink the water. This was due to previous bad experience and that the taps around the water were dirty. Older women felt uncomfortable drinking from water next to latrines.
- Children, both in the sites and in the first reception (unaccompanied children), reported that the water did not taste good.

Sanitation and hygiene

- Women requested sanitary material. They reported not knowing where to receive it.
- Persons with physical disabilities reported that access to toilets and showers was difficult.
- Older persons, men and youth reported that taking care of personal hygiene and appearance was difficult. They requested mirrors in the washing space for shaving.
- Men and women reported that hosing in toilets was too short for them to be able to wash properly.
- Due to cold, lack of warm water and dirty shower areas, refugee men, women and adolescents were not washing often for more than 5 days. Some reported that they still had salt water on them. This was also mentioned in shelters for vulnerable groups. Some added that they could not engage in religious rituals because of this.
- Women added that there were no places for washing clothes and requested sinks.
- Toilet facilities were reported as very filthy and lacked lighting. Therefore, women and others were delaying going to the toilets for more than a day. They attributed it to culture and the fact that most of persons were used to traditional Arabic toilets. On the other hand, persons with disabilities cannot use the traditional toilets.
- Refugees complained about garbage and poor sanitation conditions in and around the housing units.

- Women stated that they preferred to stay in a tent instead of a housing unit due to the poor sanitation conditions in the former.

Suggestions to improve this include to:

- Increase information about potable water and render area around it more conducive to drinking e.g. stone construction
- Increase length of hose in bathrooms for cleaning the body
- Provide warm water
- Provide soap, tissues and garbage bins in bathrooms
- Increase messaging written and verbal about importance of hygiene and keeping the areas clean, all throughout the reception process and afterwards (set up and engage the community in activities around hygiene) – continue to monitor and ensure that housing units are clean before departure times (develop system)
- Set up conditions for using the sites
- Increase number of traditional toilets and look into standards for number of toilets needed per a certain number of persons
- Provide instructions on how to use western style toilets
- Monitor company cleaning the housing units
- Make a separate place for women to shower and a separate place for washing clothes (sinks). Both places should have supplies for cleaning and the women can be in charge of it.

E. Health

- There were no major complaints around health services. Refugees found medical services available around the clock. Some organizations provided health outreach services which were welcome.
- However, lack of access to information was reported. Some were not aware that there were doctors on site or where to go in case of any health problems.
- Pregnant women (9th month) are not aware of the fact that there is a doctor on site. They also do not know what to do in case of delivery.
- Refugees reported that volunteers outside the Moria site were providing them with more medications rather than MSF and MDM doctors. This was causing a pull factor for them to set up tents outside the Moria site. It can also increase protection risks. (URGENT FOLLOW-UP NEEDED).
- Women reported colds and coughs as general ailments. They were supported by health outreach workers and shared that the doctor is available all throughout night.
- The children that were consulted in Moria reported constantly thinking of their journey. They described physical and verbal abuse and intimidation from the Turkish police and smugglers. They said they were all given sleep medication by the smugglers once they had entered Turkish soil since they were told to be quiet and not attract any attention. Their parents were held at gunpoint and forced to give their children the sleep medication. When other areas and questions were discussed, many children went back to describing their journey and hardship.

Suggestions to improve this include to:

- Ensure that doctor schedule and clinic opening hours are clear and known to all; including

large, clear signage in relevant languages

- Ensure that last trimester and high risk pregnancies are targeted for medical counseling and attention
- Liaise with newly established medical services, out of site to ensure that health standards are met, to prevent duplication and to ensure that they are legal
- Provide institutional support to local medical facilities, as hospital and other medical services are provided free of charge; ensure refugees know these services are available free of charge

VII. Recommendations

Based on the aforementioned, it is therefore recommended in the coming period to focus on the following:

Enhance reception, outreach and community communication and mobilization

- Review reception conditions in Moria and Kara-Tepe (queuing, information), address fraud and ensure people know where and how to report
- Develop material around rights, responsibilities and protection and assistance services/contacts in and around the sites. This also includes information on registration and asylum procedures. This will include information on available hotlines, contact persons, etc. In addition to leaflets, group counselling should be explored. Ensure all materials are posted online. Explore usage of Facebook.
- Set up signage based on carefully thought through services, which will not change overnight.
- Develop information and awareness campaigns on hygiene, safe parenting, violence, etc. in accordance with European laws and international standards.
- Set up weather protected and seated communal areas for messaging, food, activities, seated access to internet/charging, etc. Ensure women friendly arrangements.
- Conduct mapping of local organizations and their activities; explore ways to coordinate with them and provide support. Invite them to general coordination meetings. Identify entry points to bring both local and refugee communities together.
- Expand outreach around the island to identify those who are remaining behind (outside of the reception sites) with the aim to better understand their protection and assistance situation, as well as provide the needed support.
- Ensure regular protection outreach to ensure presence, response and two-way information sharing at the sites, as well as around the island (urban or out-of-camp area). Conduct regular structured dialogue to understand/determine trends or explore protection gaps. This will also help build trust and increase knowledge around protection concerns and trends.
- Providing training to actors and NGOs on protection principles and policies. Mainstream protection across the sectors.

Identify and support persons with specific needs and those at heightened risk

- Identify and prioritize persons with specific needs for fast track registration. Monitor their situation in and out of the sites. Set criteria and provide support, as part of risk prevention.
- Develop case management systems (referral pathways) for persons at heightened risk (develop criteria), in coordination with the local authorities and entities. Ensure that refugees know who and how to contact the different actors e.g. set up hotlines, e-mails, addresses, etc..
- Enhance the situation of unaccompanied children e.g. identify alternative (more suitable) housing solutions, set up activities, advocate for more contact with families, food etc. Most importantly,

work closer with the authorities on durable solutions to prevent risk associated with their onward movement. Infuse best interest assessments into the procedures.

Ensure coverage of basic needs along minimum standards: shelter, food and WASH

- Enhance structure e.g. stone and cleanliness around water taps, in addition to signage.
- Develop predictable and systematic food distribution schedule in coordination with other actors. Revise nature of food in consultation with communities. Ensure that the type of food is based on WFP standard daily requirements for children and adults. Set known distribution points and engage refugees in the distribution. As much as possible, involve them in cooking. Be flexible by providing food suitable for persons with specific dietary needs/challenges e.g. disabled/older persons who are unable to chew, etc.
- Allocate and properly equip certain housing units for persons with specific needs. Ensure that they are near services, facilities and main roads.
- Provide light in and around housing units and winterize the units.
- Limit sprawling of tents outside the sites e.g. by enhancing conditions onsite or relocating families to other more suitable shelter options
- Provide targeted supported for certain groups for NFIs (blankets), develop criteria and distribution methods to ensure equity. This can include clothing. Revise core relief items being provided.
- Ensure warm water, soap and accessible – as well as private - latrines and showers. Explore setting up traditional and western style toilets. Develop simple messages around hygiene. Develop small activities during the day which aim to promote clean living and encourage involvement. This can be done at Moria, Kara-Tepe and in shelter options for vulnerable groups. Engage community in ensuring their own hygiene.
- Monitor cleaning company working in housing units at sites.

List of persons and agencies involved in the Lesvos participatory assessment

	Name	Title	Organization
1.	Ditte Bloch Noer	Capacity Building	Action Aid
2.	Hosein Ali	Cultural Mediator	Action Aid
3.	Clare Sikorska	On-site Assistant	Lesvos Volunteer Coordination Agency
4.	Ayisha Jessa	Team Leader	Lesvos Volunteer Coordination Agency
5.	Aiman El Arafi	Cultural Mediator	Action Aid
6.	Samer Al Haj Ahmad	Information Officer	International Rescue Committee (IRC)
7.	Ahmad Qader	Senior Information Officer	IRC
8.	Fotini Vogiatzoglou	Information Officer	IRC
9.	Jamil Hanna	-	Human Appeal
10.	Milad Arkian	Finance/Logistics	Human Appeal
11.	Mozam Hussain	Doctor	Human Appeal
12.	Isabelle-Risso-Gill	M&E + Accountability + Learning Adviser	Save the Children
13.	Diana Nassani	Volunteer Doctor	Human Appeal
14.	Sara Ahmed Al Houwidi	Translator	Human Appeal
15.	Elin Hofman	Volunteer Psychologist	MDM
16.	Erik Prins	Volunteer Social Worker	MDM
17.	Omar al Tal	Mobile Unit Officer	Mercy Corps
18.	Nota Kontou	Anthropologist	Praxis
19.	Maria Karpodini	Communication	Internews
20.	Manas Ghanem	Protection Officer (community- based)	UNHCR
21.	Carol El-Sayed	Field Officer	UNHCR