UNHCR
The UN Refugee Agency

2022 INTER-AGENCY PARTICIPATORY ASSESSMENT FOCUSED ON PEOPLE WITH SPECIFIC NEEDS IN GREECE

Asylum-seekers in Lesvos camp participate in an information session with UNHCR staff. © UNHCR/Socrates Baltagiannis

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With acknowledgement to all contributors

Introduction

UNHCR, the UN Refugee Agency, as part of its regular programming, conducted an annual Participatory Assessment (PA) in Greece by undertaking series of Focus Group Discussions with asylum-seekers, recognized refugees and other persons benefiting international protection in order to have an opportunity for UNHCR and others working with refugees to assess the existing humanitarian programmes and adjust future initiatives as well as advocacy interventions by hearing their voices and recommendations.

In 2022, UNHCR, together with the Greek authorities, IOM and NGO partners, focused on refugees and asylum-seekers with specific needs across the country. The exercise was conducted from 1 October to 31 December 2022. In total, 161 asylum-seekers and refugees with specific needs, namely **older persons, people living with disabilities and people who self-identified as LGBTQI+**[1], residing in the Closed and Controlled Access Centres (CCACs) on the islands, sites and urban areas in mainland, participated in the discussions.

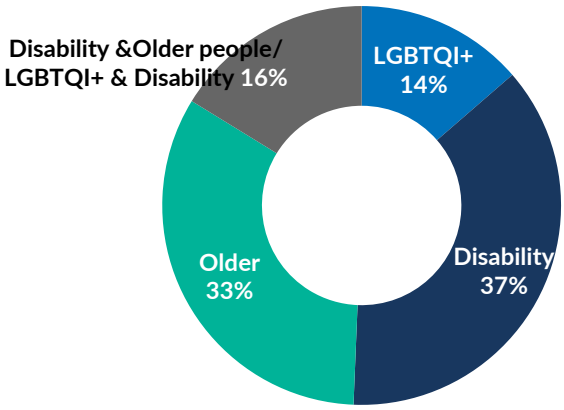
Intersectionality (overlap of several specific needs) was observed across 16% of participants, suggesting even higher protection risks experienced by these groups.

Sessions conducted:

LGBTQI+:
15 sessions with a total of **23 LGBTQI+ persons.**

Older people:
30 sessions with a total of **68 older people.**

People living with disabilities:
36 sessions with a total of **70 people living with disabilities.**



[1] *An older person is defined by the United Nations as someone over 60 years of age. According to the UN Convention of the Rights of Persons with Disabilities, persons with disabilities include those who have long-term physical, mental, intellectual or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others. LGBTQI+ persons include lesbian, gay, bisexual, transgender queer or intersex.*

Operational context

UNHCR has been present in Greece since 1952. We work with the Greek authorities, non-governmental and other organizations, volunteer networks and refugee communities to ensure the protection and integration of refugees and asylum-seekers in the country.

By the end of 2022, according to the estimates by UNHCR 87,000 refugees and asylum-seekers were present in Greece, of which 61,000 were refugees. In 2022, sea and land arrivals saw an increase, totalling 19,000 arrivals, compared to 9,200 in 2021. Most arrivals in Greece were of a refugee profile, such as Syria, Palestine, Afghanistan and Somalia. In 2022, 21,500 refugees from Ukraine received temporary protection.

The ESTIA, a state-run urban accommodation programme hosting asylum-seekers and refugees in apartments in cities and towns was announced to end at the end of 2022. The programme primarily hosted vulnerable asylum-seekers and refugees, including people living with disabilities, chronic illnesses and older refugees who were moved to camps after the programme's closure. The PA tried to partially address the concerns and recommendations by people with specific needs to be impacted by the closure of this programme.

Syrian refugee family on Samos island. © UNHCR/Achilleas Zavallis

Key findings and recommendations as raised by refugees and asylum-seekers:

- **LGBTQI+ people** reported facing greater security challenges and discrimination overall, and do not feel safe in camp settings.
- **Older people** reported relying entirely on family members for support and single older people cannot meet basic needs and request cash assistance.
- **People living with disabilities** reported facing mobility challenges, particularlyin camp settings, and struggling to access assistance devices and rehabilitation.

The participants made recommendations to the State as a responsible body for reception and asylum, including asylum, healthcare, and safety, as well as issuance of documentation granting access to work, medicine, accommodation, and social allowances. Refugee respondents viewed the UN role as limited to information provision, community activities, and advocacy and NGOs' role comprising of vocational training, employability, asylum support, medical cost coverage, case management and psychosocial support.

> ***"The state should provide us with disability allowance to cover medical care."***
> *Father of displaced children living with disabilities, Kos*

Top needs

People living with disabilities reported as their top needs accommodation accessible to water and sanitation (WASH) facilities, access to healthcare and assistive devices. Older refugees said that their top needs were assistance to cover basic and medical needs including transportation and accommodation. For respondents who self-identified as LGBTQI+, their top concerns were security and safe accommodation, and self-reliance including access to work which would allow them to meet their basic needs.

All refugees with specific needs expressed a desire to work, while those who could not due to their conditions requested social cash support. All groups emphasized the importance of having legal status and the required documentation as well as opportunities to learn Greek which they identified as prerequisites to finding work and accessing services like healthcare.

Ahed, refugee from Palestine, during an individualized psychosocial support session. © UNHCR/Socrates Baltagiannis

SUMMARY REFUGEES' RECOMMENDATIONS

- Provision of appropriate accommodation during the reception of asylum-seekers taking into consideration their specific needs, namely mobility, age-appropriateness and safety.
- Uninterrupted access to healthcare, assistive devices, medication and rehabilitation services, specifically for displaced older people and those living with disabilities.
- Provision of state caretakers to people living with severe disabilities who need 24-hour care.
- Provision of information provision for older people relevant to their situation.
- Inform people living with disabilities about their right to social allowances and support their access to these allowances.
- Prioritization of displaced people with specific needs in food/NFI distribution, asylum procedures, family reunification, and relocation to other EU states.
- Provision of targeted support to older people and refugees living with disabilities for transportation.

Safety and security, including freedom from discrimination

The participants, especially LGBTQI+ people, **expressed security concerns, linked to their specific profiles.** LGBTQI+ people stated that they faced risks including verbal, physical, and sexual violence due to their profile; with many stating that they had to hide their LGBTQI+ identity to avoid harassment and violence. Older people and refugees living with disabilities were especially affected by the ESTIA closure and worried about relocating to sites where they would lose access to the specific medical care they received for their needs. Some reported that the use of alcohol by youth in the sites, in particular, in the mainland, as disruptive, resulting in fights. People living with disabilities mentioned some discrimination by refugee community members, and the inability to escape from their accommodation in case of a fire, earthquake, or other disaster.

> ***"Life is very difficult in the camp. One time, a man tried to assault me in the bathroom because he knows that I am bisexual. I cannot speak about that to anyone. I am keeping a low profile; I stay in my container since people talk about me."***
> *Female, Mavrovouni CCAC*

Challenges

- Exploitation within the refugee community (sub-renting apartment rooms at high costs).
- Stigma and discrimination around disability and LGBTQI+. Age discrimination of older people seeking to work.
- Insecurity in camps due to alcohol abuse.

Opportunities

- Older refugee community members mitigate fights between youth.
- LGBTQI+ females are referred to state Safe Shelters for temporary safe accommodation.

REFUGEES' RECOMMENDATIONS

- Greater controls of alcohol use in camps;
- People with specific needs to be provided safe accommodation, especially LGBTQI+ profiles.

Refugee woman on Lesvos island. © UNHCR/Angelina Tsoukala

Community networks

Most older refugees and those living with disabilities stated that they receive help from community members. People with severe disabilities rely mostly on community support, as they face challenges in accessing both the disability allowance services as well as the "Personal Assistant for Persons with Disabilities" programme, a service offered by the State aiming at improving the quality of life of personal with disabilities and their families. Strangers often provide support to people living with disabilities with day-to-day tasks, often free of charge. Some however may ask for something in return for the support they provide. In urban areas, community-based organizations (CBOs) are crucial in providing food and non-food items for older and people with disabilities to meet their basic needs. CBOs are also a key source of information for accommodation and job search. In camps, it was reported that site management limits community activities and does not support meetings. Nevertheless, communities reported sharing food and NFIs amongst each other and helping people with mobility challenges with their daily tasks.

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LGBTQI+ individuals have highlighted the significance of belonging to an LGBTQI+ community, as they frequently encountered isolation and stigmatization in the broader camp environment.

"My brother always does everything for me, prepares food, takes me to the bathroom, changes my clothes, and feeds me because I cannot do it by myself. My brother asks other Somali refugees to help him take me to the bathroom for a shower, because three or four people are needed to move me to the bathroom."

Somali refugee urban Athens

Challenges

- Locations with smaller or isolated populations do not have active community members to provide support to people with specific needs.
- Limited refugee community participation and assistance to people living with disabilities – for a few hours or in exchange of payment.
- Low awareness and prejudice within communities about disability/disease.
- Limited interaction between community members.
- Lack of activities involving older people or people with disabilities.

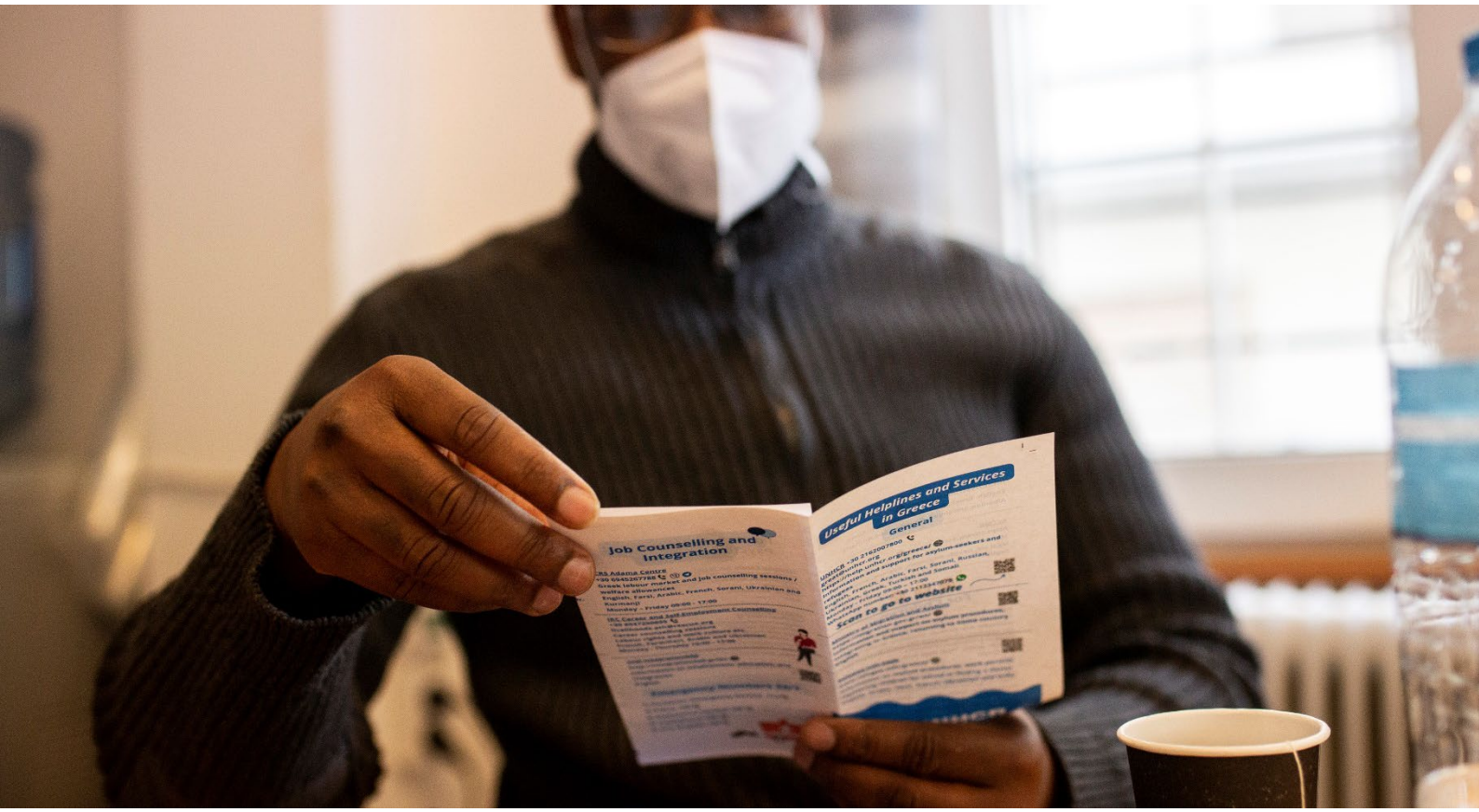
Opportunities

- Refugees provide physical assistance by carrying or supporting people with mobility difficulties with daily tasks.
- Communities share information, food, and materials.
- Families support people with disabilities and older refugees.
- LGBTQI+ associations exist in some locations and support displaced LGBTQI+ refugees.
- Older people provide guidance.
- Refugee and community-based organizations help newly arrived families in need.
- Refugees work as caretakers of Greek older people and people with mobility issues.

REFUGEES' RECOMMENDATIONS

- Recognize and support existing self-organized refugee communities that already provide help to displaced refugees. This support can be in the form of grants, or through frequent in-person meetings between refugee communities and camp management or municipal authorities.
- Assign separate or dedicated spaces for community meetings and activities in CCACs, camps, municipalities.
- UNHCR and NGOs to support community-based activities for older people, LGBTQI+, and refugees living with disabilities.
- Recognize refugee community capacity at conflict management, protection identification and referral, and solutions.
- Support the official employment of refugees as caretakers, with health insurance provided.

A couple of refugee women on Lesvos island. © UNHCR/Marios Andriotis.



Refugee at a refugee community centre in downtown Athens reading a UNHCR information leaflet. © UNHCR/Socrates Baltagiannis

Information to refugee communities

People with specific needs often have less access to information than other refugees. Most reported that they had no access toadequate information about the general procedures and services in Greece, or about LGBTQI+-specific or disability-specific services. People living with disabilities reported receiving basic information from the authorities, but not related to their specific needs and disabilities. Many living with disabilities did not access education in their countries of origin and thus are often illiterate. Older people and persons living with disabilities reported that they mainly received information from immediate family members and friends, while several shared that they received information from CBOs via phone or social media. Those living in CCACs and camps said they received information from service providers or at the information point.

"I think someone needs to explain to me with details. But still, I don't know if I will be able to remember all the information. I had a serious accident and I have memory loss, so I don't remember well. Also, I am illiterate; I cannot read or write."

An asylum-seeker living with severe disability, Kos

Challenges

- No provision of information tailored to people living with disabilities on disability certification and allowance.
- Information not accessible to people with hearing or visual impairments and people who are illiterate.
- Limited access to direct information by people living with disabilities and older people due to a medical condition, a language barrier and mobility restrictions.

Opportunities

- Trusted community focal points serve as reference points, and information-sharing within refugee communities works well.
- Refugee community organizations have information points for refugees.
- Refugees who speak Greek have a better understanding of their rights and they share information with others.

REFUGEES' RECOMMENDATIONS

- Information tailored to the specific needs of people with disabilities, older people, LGBTQI+ to be developed and available in languages of origin of refugees and asylum-seekers.
- Counselling services to be accessible, providing information about the administrative and integration procedures.
- Service mapping information to be updated and to be displayed in camps and municipalities.
- Access to accurate information on the national social welfare system should be facilitated for people living with disabilities.
- Raise awareness and organize sessions for other refugees on the rights of people with disabilities.
- Specialized programs/services for people with disabilities and dissemination of information about recreational activities.
- Provision of interpretation services in public services.

Refugee women during an information and awareness session at a refugee community centre in Athens. © UNHCR/ Giota Moschou

Livelihoods

Despite restraints due to age, disability and language, most respondents expressed a desire to work. Some worked informally, while a few could not work due to their condition. Older people mentioned that age discrimination was the main obstacle they faced in finding work. Often, the family members of people with disabilities could not work, as they had to provide 24-hour care. Refugees with a severe disability, older people and their caretakers were those most in need of state social allowance to meet their basic needs.

> ***"I cannot find a job. I am still an asylum-seeker, and I cannot be employed. Even if I get recognized, how can I work if I have to take care of my brother?"***
> *Yemeni, caretaker of brother with severe disability, Kos*

Challenges

- Limited knowledge of Greek.
- Age/disability discrimination and racism.
- Lack of opportunities and certifications for refugees to work in their own profession.
- Lack of documentation for legal work.
- Lack of network to help find work.
- Lack of vocational training opportunities.
- Lack of information on labour rights and obligations and available jobs.
- No specific welfare benefits for older refugees.

Opportunities

- Refugees and asylum-seekers are willing to work and become self-reliant.
- There are Greek lessons in some locations which facilitate access to work.
- Refugee community members can help other refugees find employment.
- Refugee community organizations and individuals can support with food and non-food items.

REFUGEES' RECOMMENDATIONS

- Provision of specialized programmes and cognitive skills training centres with a focus to education and employability for persons with disabilities.
- Support to persons with disabilities to have effective access to general technical and vocational guidance programmes
- Provision of cash assistance to persons with specific needs who cannot work due to their conditions.
- Provision of a basic pension for elderly, or other kind of multipurpose financial assistance to ensure they can cover their basic needs, including food and medication.

Seventy-one-year-old Afghan asylum-seeker Abdul clears weeds at the site where he resides. © UNHCR/ Achilleas Zavallis

Refugee with a social worker at Adama Integration Centre assisting him to register at the social welfare system. © UNHCR/ Socrates Baltagiannis

Documentation and Social Benefits

Participants were mostly – but not always – aware that they would need some basic documentation in order to access healthcare, such as the tax registration number (AFM), residence permit and the social security number (AMKA) or the Temporary Insurance and Healthcare Number for Foreigners (PAAYPA).

However, they were largely unaware of state social benefits and their rights or procedures that would allow them to access them. The main barriers that keep refugees from accessing the disability and social allowances were the lack of a physical address, their refugee status, the lack of knowledge of the Greek language, and other issues. Older refugees in Greece are not eligible for a pension, while only Ukrainian temporary protection holders reported receiving a pension from their country of origin. Among the groups interviewed, older people with medical conditions and without family support were those most in need of financial support to meet their basic needs.

"There is no money and no medication. There should be cash assistance for recognized refugees. Now I cannot even buy a fruit. I need assistance to access social benefits. There should be a solidarity fund to provide support to people like me or assistance in accessing work".

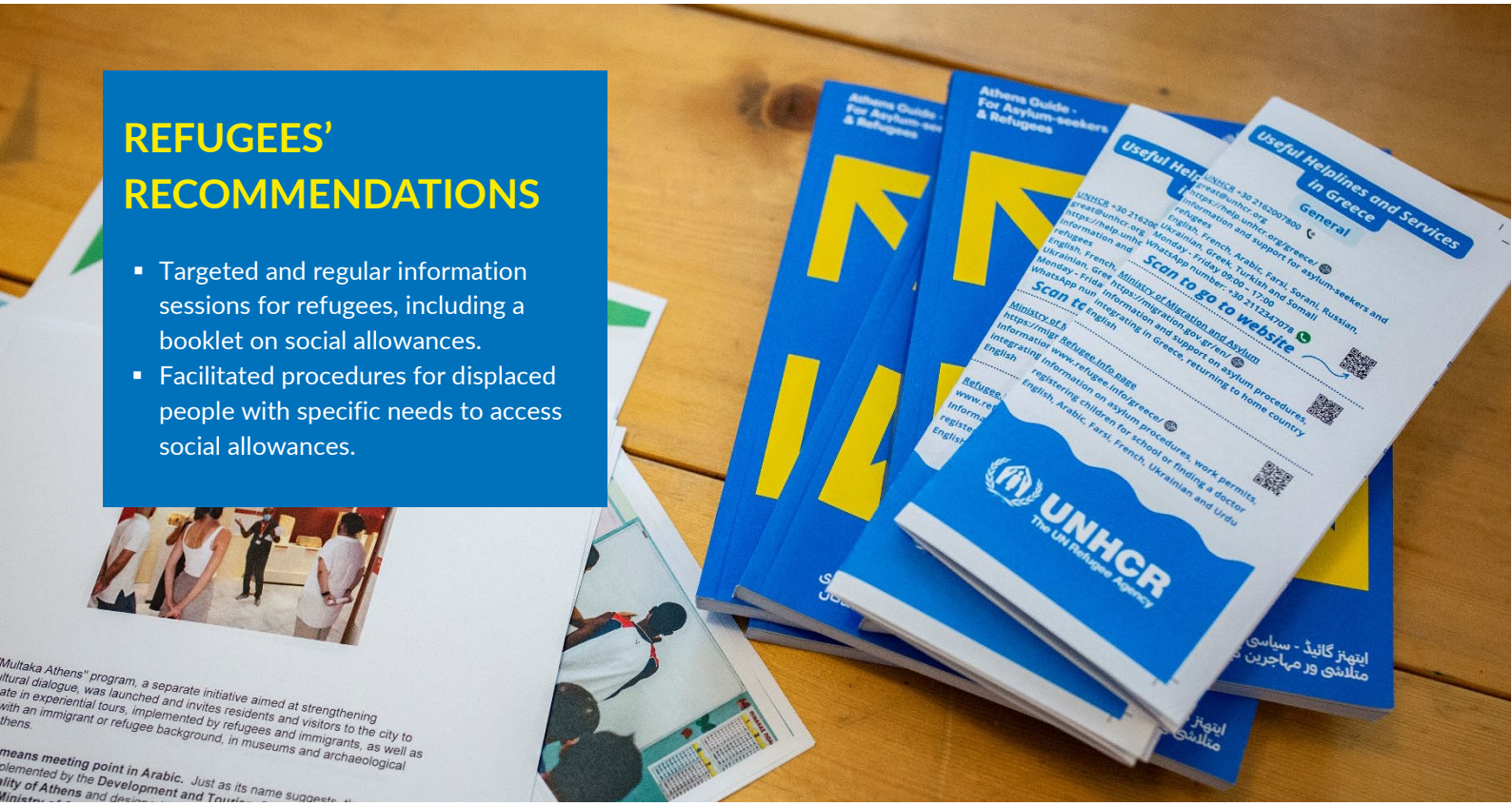
Iraqi older female refugee, Koutsochero, Central Greece

Challenges

- Language barrier at public services.
- Lack of a physical address.
- Lack of information on administrative and other procedures and services (OAED card, AFM, bank account).
- Asylum-seekers cannot apply for social allowance and once recognized there is a long procedure to access their residence permit, travel documents and state benefits, which affects access to medicine and rehabilitation for older people and those with disabilities.

Opportunities

- Specialized support to access the disability allowance is provided through the Disabilities Inclusive project at Athens Municipality.



REFUGEES' RECOMMENDATIONS

- Targeted and regular information sessions for refugees, including a booklet on social allowances.
- Facilitated procedures for displaced people with specific needs to access social allowances.

Information material distributed to refugees and asylum-seekers for their living in Greece. © UNHCR/ Socrates Baltagiannis

An Afghan asylum-seeker with a broken foot stands near a cluster of tents in the Mavrovouni site on Lesvos. ©UNHCR/Achilleas Zavallis

Reception

People with specific needs living in sites faced various challenges that had to do with mobility and accessibility which prevented their access to services, basic information and kept them from fulfilling their social needs. Many were reliant on the support of family members, while those who were alone relied on neighbours or strangers to help them with their daily tasks. Older people and those living with disabilities could not easily stand in NFI or food lines and are impeded from accessing medical care including medication and rehabilitation. Accommodation is a major challenge for vulnerable households. Following the closure of ESTIA accommodation in apartments in towns and cities, they often had no choice but to move to sites where facilities were mostly not customized to accommodate the specific needs of people with mobility or safety concerns.

"Returning to the camp and living in a container is a nightmare. The door of the toilet is so small that the wheelchair does not fit so my family has to carry me inside. I have not had a shower for almost a month".

Iraqi with severe disability, Koutsochero, Central Greece

Challenges

- Isolation for people with specific needs who spend most of their time in containers/at home due to their limited mobility.
- Loss of access to specialised services for people with disabilities and older people due to relocation from ESTIA apartments to sites.
- People with mental disabilities and their caretakers expressed fear for being transferred to a site, following the closure of ESTIA, as mental health issues can be triggered by crowded places and cause disturbance to both the individual person and the community.
- Lack of personal space to express oneself freely, and frequent harassment by roommates and other community members (LGBTQI+).

Opportunities

- The refugee community is already supporting people with specific needs to access food/NFIs and WASH facilities. They also help by cleaning their rooms, and by facilitating communication and access to information.

REFUGEES' RECOMMENDATIONS

- Ensure that people with mobility difficulties have access to basic services; create disability-friendly WASH facilities in the camps and ensure that assistive devices are provided according to specific needs.
- Targeted NFI distributions tailored to specific needs.
- Special nutrition considerations for persons with medical conditions to be supported at reception facilities.
- Improve infrastructure to ensure easier access to facilities by installing ramps, rails, paths, and accessible container doors for persons living with a disability.
- Older persons to be accommodated separately from single men and families.
- Older persons and persons with disabilities to be accommodated close to WASH facilities.
- LGBTQI to be accommodated in safe spaces.
- Empowerment of persons living with disabilities by providing more support and access to rights.
- Inform residents of accommodation rules and available services.

Asylum-seeker at the Mavrovouni site on Lesvos. ©UNHCR/Achilleas Zavallis

Refugee receives his portable oxygen concentrator thanks to UNHCR's 'Disabilities Inclusive' programme. ©ACCMR/Marina Tomara

Health

Access to healthcare remains a challenge for both asylum-seekers and refugees. Many recognized that some challenges are common also for Greeks, **while others perceived the cancellation of their appointments, delayed arrival of ambulances, and impolite behaviour of certain healthcare staff as discriminatory.**

Access to specialized services is particularly difficult, and interpretation remains a barrier to refugees' accessing any medical service.

"I buy the medicines myself for my eye condition and allergies, cutting from other expenses such as food. I don't know whether the medicine that I take is right for me since it was first prescribed to me back in my country of origin."

Afghan living with visual impairment, Alexandria

Challenges

- Delays in obtaining or renewing legal documents for AMKA and PAAYPA.
- Delays in assistance for urgent medical care (delay in ambulance, and in securing appointments)
- Limited information on one's own medical condition.
- Lack of assistive equipment.
- Difficulty to access specialized doctors.
- Lack of interpretation to access healthcare.
- Mobility/transport difficulties to access hospitals.
- Lack of state-sponsored caretakers.

Opportunities

- Information on available health services is shared between community members.

REFUGEES' RECOMMENDATIONS

- Ambulance availability in sites.
- Provision of interpretation in public hospitals (including remote interpretation).
- Provision of assistive devices and rehabilitation services.
- Orientation and support to book an appointment in public medical facilities.
- Efficient and direct access to public health services with the accompaniment of cultural mediators or interpreters in hospitals and other public services (regardless of legal status).

Syrian refugee, Linda, receives her COVID-19 vaccination in Athens. ©UNHCR/ Socrates Baltagiannis

Methodology

Participatory Assessments involve holding separate discussions with refugee and asylum-seeking women, men, and LGBTQI+ profiles, so as to gather accurate information on the specific protection risks they face and the underlying causes, to understand their capacities, and to hear their proposed solutions. The main methods used were household-level interviews as well as focus group discussions and key informant interviews. Participants represented different demographic profiles, including the following particular target groups that were covered through specific questionnaires:

- Persons living with disabilities
- Older people
- LGBTQI+ profiles

The findings of the participatory assessment are primarily qualitative. The focus of this Participatory Assessment was to generate recommendations from and for people living with specific physical and protection needs. Nevertheless, the findings also included references to information and basic needs, livelihoods, security and discrimination.

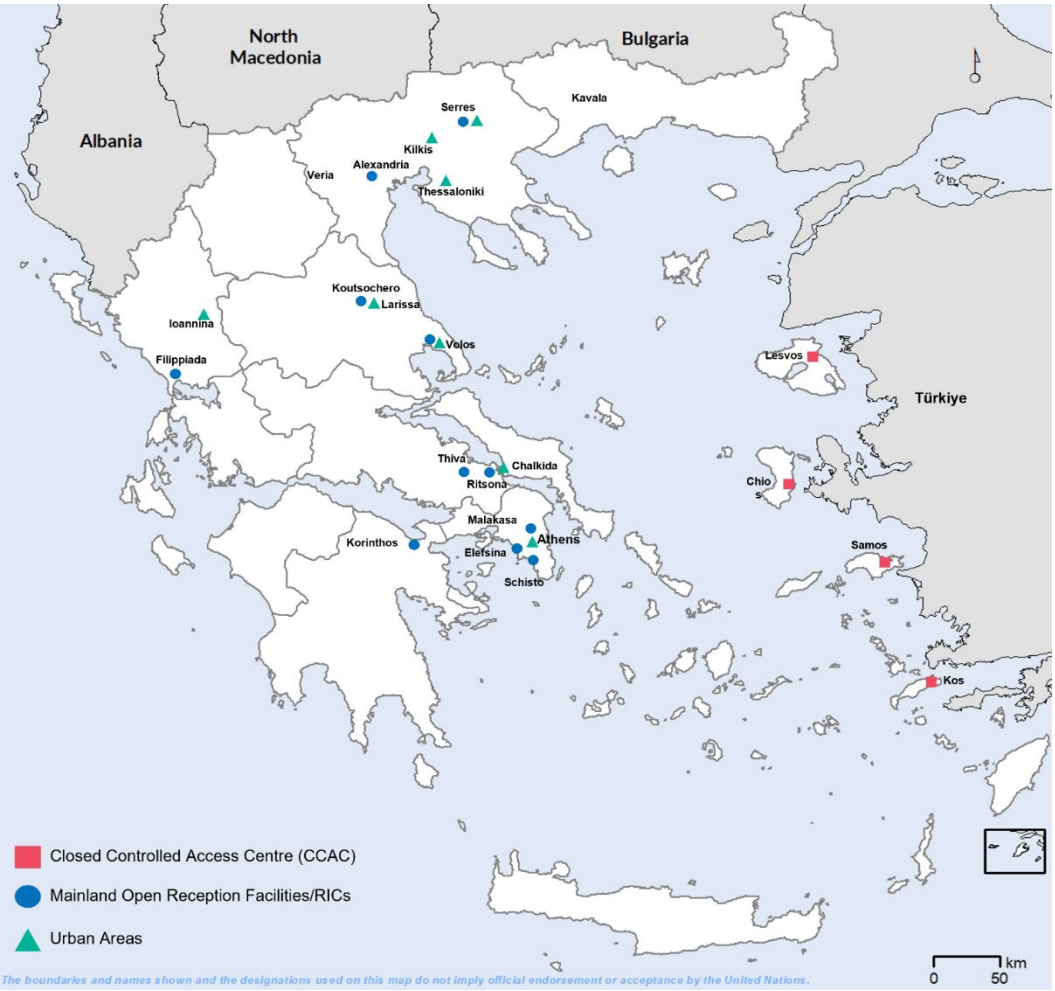
CHALLENGES AND LIMITATIONS:

- Limited number of participants.
- The limitations placed by the participants' mobility and their specific needs required a targeted household-level approach, rather than focus group discussions.
- The enumerators participating in this assessment were limited to protection staff with knowledge of the specific needs referral pathways so as to use the exercise as an opportunity to provide targeted information and referral to these groups.

Refugee women participate in an information and awareness session at a Women's safe space on Lesvos island. © UNHCR/Socrates Baltagiannis

Background and demographics

Focus group discussions were arranged to gather input per nationality, age, and gender. UNHCR and partners conducted a total of **81 sessions** involving a total of **161 participants**, disaggregated per location as follows:



Location	# Sessions	# Participants	# Male	# Female	# of Other
■ Athens	16	37	16	20	1
■ Thessaloniki	6	8	3	5	
■ Other urban areas in North Greece	7	19	10	9	
■ Mainland sites	26	57	33	19	5
■ Lesvos	12	13	6	7	
■ Samos	4	9	9		
■ Chios	2	2		2	
■ Kos	6	9	6	3	

Out of 81 sessions, two were organized and conducted in partnership with local municipalities in Athens and Thessaloniki.

2022 INTER-AGENCY PARTICIPATORY ASSESSMENT IN GREECE

1 October – 31 December 2022

UNHCR Office in Athens
great@unhcr.org
91 Michalakopoulou Street
GR-115 28, Athens, Greece

www.unhcr.org/gr