

## EXECUTIVE SUMMARY

### Research aims

The research on the living conditions and patterns of social relations within the reception centres has focused on single women, single mothers and separated children. It has applied a Participatory Research Needs and Resource Assessment Model in all the main reception centres in Greece during the field research period from August 2001 to October 2003.

### Legal framework

Existing Greek legislation does not guarantee asylum seekers the right to accommodation and there are no legally binding minimum standards on the operation and services of the reception centres administered by NGOs.

### Reception centres

- The centre in **Anogeia** hosts only separated children and constitutes an ‘example of good practice’ as it meets almost all the basic criteria set by its administration. Greek language lessons are provided four times a week and access to health-care is provided through co-operation with the local hospitals. The interaction of the residents with the local community has been encouraged, but some problems arise due to the limited educational, recreational and employment opportunities offered in the small town.
- The residents in the centre of **Aspropyrgos**, during the time of research, do not fall into any of the ‘vulnerable’ categories. The centre’s major problem is its relative isolation, which hinders access to education, employment and recreation.
- The centre of **Lavrion** is the only permanently funded centre in Greece and has the largest accommodation capacity. The living conditions of the residents, especially of the separated children are dire since they have to share rooms with many adults of the same sex due to lack of space. Most separated children work outside the centre but single women and mothers do not seek employment. There are no separate authorities led by women and only some Kurdish women participate in a women’s social group organised by Kurdish Communist Party (P.K.K). Residents of Kurdish origin can generally rely on the support of P.K.K., but the other residents have no such self-organised structures. It is recommended that the administration of the centre assumes control from the informal networks of co ordination within the centre, the accommodation of residents and security issues, so that these services may benefit all residents.
- The **Nafsika** shelter is located in the centre of Athens, therefore, access to employment, recreation, health and educational services are facilitated. It functions as a temporary shelter for homeless asylum seekers and there is a restriction in place to determine when residents can stay in the building. The rationale behind this is to encourage residents to seek employment, but as the research revealed, these restrictions were especially harsh on single mothers and women and it is recommended that the administration adapts them to individual needs.
- The reception centre in **Nea Makri** consists of 20 barracks and has a capacity of accommodating 150 people. A Greek language teacher and a nurse visit the centre daily but women are not actively encouraged to seek employment and participate in educational courses outside the centre. Transportation to the town

centre is quite problematic for the residents. It is recommended that the use of the rigid surveillance system with cameras be avoided. [Note: The centre closed in early 2004]

- The **Penteli camp** was under the administration of Doctors of the World from 1999 until June 2001. Since then it functions mainly as a “settlement” under a ‘laissez faire’ resident administration. Approximately 80 people lived there in November 2003. [Note: The Centre officially closed in 2003 but still accommodates some asylum seekers].
- The **Pikermi** reception centre begun operating on October 2002. Despite its location within a local community it remained isolated given the lack of public transportation. This, according to the residents, was the main obstacle for their employment and educational opportunities. Formally the centre closed down in December 2003. While in operation, the centre’s administration considered “vulnerable groups” (single women, single parent families, pregnant women and separated children) as a priority. At the time of the research, the separated children interviewed expressed dissatisfaction with the poor quality of health-care provided.[Note: The centre officially closed at the end of 2003].
- The **Nefeli project** consists of four (4) apartments in different areas of Athens where asylum seekers are accommodated and receive a monthly allowance of ten (10) euros. All residents are obliged to take Greek language lessons and receive a monthly bus ticket as an incentive to move around the city, seek employment and integrate with the locals. The project is highly appreciated by the residents.
- The guesthouse of **Ios** is located in the centre of Athens and its operation depends exclusively on volunteers and residents themselves. The latter have to pay for their expenses (bills and food) and therefore must have some sort of income. Education is one of the centre’s most efficient provisions since there are Greek and English language courses offered in a building next to the guesthouse. The most serious problem that the centre seems to face is lack of funding which leads to the deterioration of the services provided.
- The centre in **Kokkinopilos** hosts only single men and is very isolated. Recognising this particularity, the researchers recommend that the centre may also be used as a summer school/camp for asylum seeking children in Northern Greece, in view of its location and its existing infra-structure.
- The centre in **Sperchiada** usually hosts single men and families and none of the ‘vulnerable’ groups studied in this research were residents there at the time of the research except for one single woman. Some tentative recommendations include the improved accessibility and public transportation to the centre, which will offer more educational and employment opportunities to the residents.
- The **Social Solidarity Centre** in Thessaloniki is located in the centre of the city thus facilitating residents’ transportation and access to marketplaces and other services. Separated children are usually accommodated with co-ethnic adults and single women and single mothers have to share rooms regardless of their origin. The centre managed to survive without any formal funding for several years and only since March 2003 was able to access short term funding through participation in EU programs. Most of the problems encountered in the centre are related to lack of resources. Given its relatively large number of female residents it is recommended that a more proactive and gender sensitive approach be adopted in order to facilitate integration of the residents in the local community.

### **Comprehensive research data**

The overall numbers of the target group populations referred to the reception centres during the period January 2001-August 2003 are as follows

-**Separated Children** : 323 (Anogeia: 45, Lavrion: 43, Nafsika: 208, Nefeli: 1, Pikermi: 8, Social Solidarity Centre: 18)

-**Single-Parent Families** : 82 (Aspropyrgos: 3, Lavrion: 32, Nafsika: 17, Nea Makri: 6, Pikermi: 8, Social Solidarity Centre: 12, Voluntary Work: 4)

-**Single Women**: 106 (Aspropyrgos: 5, Lavrion:27, Nafsika: 27, Nea Makri: 4, Nefeli:22, Pikermi:5, Social Solidarity Centre: 13, Voluntary Work:3)

During the time of research 24 **separated children**, 9 **single parent families** and 11 **single women** were traced and interviewed.

### **Conclusions**

One of the main findings of the research concerns the pre-reception centre living conditions of the asylum seekers. For most interviewees detention ranged from a few days to three months.

Another finding concerns the accuracy of personal data contained in the identity documents (pink cards). This observation is relevant since it relates to the general inadequacies of the referral system of registered asylum seekers to reception centres.

On the basis of comparative analysis of service provisions of reception centres the research has concluded that:

- a) no mental health-care is provided by any centre,
- b) legal aid is not included in most reception centres' own provisions. It is provided in collaboration with expert NGO's on a case by case basis,
- c) none of the centres provides medical check-ups, preventive medicine and dental hygiene. They only operate a referral system to nearby clinics and hospitals for medical incidents.

The most important issue faced by all centres is the lack of stable and sustainable funding, which impacts on the centres' service provisions. Geographical isolation is a common feature of most reception centres; the research has shown that this isolation hinders the residents' access to employment and educational opportunities. Other shortcomings of the centres include lack of educational courses, no active encouragement for the employment of residents and lack of culturally sensitive programmes or intercultural courses.

Vis-à-vis the basic needs of the specific target groups, the research has shown that the participation of women in decision-making processes is non-existent and women's special health needs (e.g. gynaecologist) are accommodated in a rudimentary fashion.

There are no uniform practices regarding the accommodation of separated children, single women and mothers at the different reception centres. These groups are accommodated rather randomly depending on the availability of space and the co operation among administering NGO's. An unexpected finding of this research has been the positive role of informal reception centres, usually church-affiliated institutions, which provide services ranging from accommodation to educational courses.

Examples of good practice (model cases to be emulated by other centres) include the centre in Anogeia, the ‘Nefeli’ project and some practices at Ios and at the Social Solidarity Centre.

### **Recommendations**

**General recommendations** aiming at changing approaches and attitudes in the provision of assistance include:

- a shift from basic needs approach to a human rights approach,
- the adoption of a gender sensitive and participatory approach in needs assessments,
- the consideration of gender and age sensitivity as part of child care and,
- the inclusion of entries on education religion in all social history files registered at the entry points.

**An increased role of the UNHCR office in Greece** is recommended;

- UNHCR should act as a facilitator among Greek state and NGOs,
- train competent authorities and NGO’s staff on refugee rights and reception standards,
- encourage information dissemination among the state and NGOs
- supply information on the role of UNHCR at entry points, reception and detention centres
- UNHCR should incorporate in its annual training plan at least one training event involving NGO staff /administrators working in reception facilities
- Continued lobbying of Greek State authorities to increase the number of reception centres and set up permanent state reception centres for asylum-seekers, based on regular and sustainable funding.
- Continued lobbying of Greek state authorities to establish an adequate infrastructure for the provision of basic medical and social services and for the screening by the competent organs of the Ministry of Public Order, to identify asylum-seekers, including separated children, and to ensure their access to the asylum-procedure
- Continued lobbying of Greek state authorities to enforce the application of minimum reception standards in the detention and reception centres.
- Continued lobbying of Greek state authorities and the Red Cross administration of the reception Centre at Lavrion to a thorough review of operations and service provision at the site. Specifically, renegotiate the power structures between the main actors (State, Red Cross, the P.K.K. and the rest of the group leaders) in order to guarantee that basic needs are met and services provided on an equitable basis.
- Promote further research, including follow up studies, in order to generate a constructive understanding of the functions and “best practices” at detention centres.

**Recommendations to the Greek state include:**

- the implementation of the European Commission standards on provisions to asylum seekers,
- Consider the appointment of a Legal Guardian for separated children by the Office of the Greek Ombudsman as the legal protector in the best interest of the child,
- avoid the detention of separated children,

- always inform asylum seekers at the entry points (and in detention centres) of their right to apply for asylum and have legal assistance,
- recruit staff specifically trained and educated on refugee issues (legal, social and psychological issues) in the detention and reception centres.

**Minimum standards of operation for all reception centres administered by NGOs should be:**

- the provision of accommodation and food for all residents
- employment of a social worker, a nurse, a psychologist,
- access to education, recreation and health (including mental health and dental hygiene) services.
- NGOs should train personnel in fund-raising to aim at stable and sustainable funding
- keep a gender balance among the staff and the ‘clients’ and establish an ethic of professionalism among the staff of reception centres.
- Professional translators (both male and female) should be attached to the centres
- mental health support structures should be put in place as a basic human need.
- Emphasis should be given to encourage single women and mothers’ employment and counselling should aim at providing support and practical solutions to women’s future plans.
- Collaboration among NGOs would enhance women’s participation into groups across centres, in educational and recreational activities or professional and vocational training. Finally, it is important that if the centre itself cannot provide legal support, a legal representative (from UNHCR or GCR) visits the centres on a regular basis.

## TABLE OF CONTENTS

EXECUTIVE SUMMARY .....	<b>Σφάλμα! Δεν έχει οριστεί σελιδοδείκτης.</b>
ACKNOWLEDGEMENTS .....	8
ABBREVIATIONS .....	9
I. INTRODUCTION.....	10
Methodology .....	10
Implementation methodology.....	11
Methodological caveats and limitations of the research .....	12
II. LEGISLATIVE FRAMEWORK & ADMINISTRATIVE ARRANGEMENTS .....	13
III. RESEARCH RESULTS .....	15
Summary quantitative data concerning the target groups covering the period from January 2001 to August 2003 .....	15
1) Athens area and Southern Greece .....	15
2) Thessaloniki area and Northern Greece .....	16
Summary Qualitative Data on Reception Centres .....	17
ANOGEIA.....	17
ASPROPYRGOS .....	18
IOS .....	19
KOKKINOPILOS .....	20
LAVRION .....	20
NAFSIKA shelter .....	22
NEA MAKRI .....	23
NEFELI .....	24
PENTELI.....	24
PIKERMI.....	25
SOCIAL SOLIDARITY CENTRE IN THESSALONIKI .....	25
SPERCHIADA.....	26
IV. CONCLUSIONS & EVALUATION .....	28
Quantitative data.....	28
General Data.....	28
Issues related to data collection .....	28
a) No centrally administered database.....	28
b) Two important variables seem to be ignored.....	29
c) Accuracy of data on pink cards .....	29
Qualitative data.....	29
1) Background of referral to reception centres .....	29
2) The referral mechanism.....	30
3) Service Provision .....	30
4) Basic needs for all asylum seekers:.....	33
5) Basic needs for the specific target groups (single women, single mothers and separated children): .....	34
6) Pattern of Residence.....	34
7) Informal reception facilities .....	35
Examples of good practice .....	36
V. RECOMMENDATIONS ON INSTITUTIONAL REFORMS AND SERVICE PROVISIONS.....	38
Recommendations to UNHCR: .....	39
Recommendations to the Greek state: .....	39
Specific recommendations to NGOs: .....	41
Institutional requirements for all centres: .....	43
APPENDICES.....	45
APPENDIX A .....	46
UNHCR Questionnaire.....	46
APPENDIX B.....	55
UNHCR Interview Form .....	55
APPENDIX C.....	<b>Σφάλμα! Δεν έχει οριστεί σελιδοδείκτης.</b>
Graphs for the quantitative data of Athens and Southern Greece.....	<b>Σφάλμα! Δεν έχει οριστεί σελιδοδείκτης.</b>
APPENDIX D .....	<b>Σφάλμα! Δεν έχει οριστεί σελιδοδείκτης.</b>
Graphs for the quantitative data of Thessaloniki and Northern Greece.	



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## ABBREVIATIONS

CRC	Convention on the Rights of the Child
ECRE	European Council of Refugees and Exiles
EU	European Union
GCR	Greek Council for Refugees
ISS	International Social Service
NGO	Non Governmental Organisation(s)
PD	Presidential Decree
PKK	Kurdish Communist Party
SSC	Social Solidarity Centre
UAM	Unaccompanied Minor(s)
UN	United Nations
UNHCR	United Nations High Commissioner for Refugees

## I. INTRODUCTION

Conventional approaches to the study of host state reception policies have focused on sex and age discrimination as social phenomena inherent in all refugee situations. In their majority these accounts tend to be based on sociological surveys concerning social attitudes vis-à-vis foreigners and minorities. Similarly, socio-legal research undertaken by legal experts who write on issues of human rights compliance in a given State, tend to rest on judicial decisions and on other instances of state practice (e.g. administrative decisions, official statements, policy statements) rather than on *real practice*. By ‘real practice’ is meant what states and NGOs, as their implementing partners, *do* as opposed to *what they say they do*, both of which have relevance in developing a plan of action concerning the particular vulnerable groups in respect of which Greek policy has only recently started being formulated.

Accordingly, the present research on the living conditions and existing patterns of social relations within the reception centres with special reference to **single women, single mothers** and **separated children** aimed to provide documentation and evidence concerning current practices vis-à-vis these particular vulnerable groups who remain somewhat *invisible*, relying to a large extent for their survival on individual initiatives and unorganized ‘hand-outs’.

The data collected on current reception practices concerned separated children<sup>1</sup>, single women and single mother headed households who were referred to the official reception centres in the period from January 2001 to August 2003. To date there was practically no baseline data concerning these ‘vulnerable groups’ in the existing reception centres in Greece. Thus, the realisation of this primary research constituted a minimal prerequisite for the development of a humane reception policy by Greece as a EU member state.

An additional reason warranting the urgency of this research was the need to identify the living conditions relating to the particular vulnerable groups in order to offer policy recommendations in compliance with the minimum standards for the reception of asylum seekers as recommended by the Council of the European Union<sup>2</sup>.

### *Methodology*

The research applied a Participatory Research Needs and Resource Assessment Model (UNHCR, Social Services in Refugee Emergencies, PTSS, Geneva: 1991), in all the main reception centres<sup>3</sup> in operation until August 2003 (with the exception of Penteli reception centre) in Greece:

Centre for UAMs in Anogeia, Crete, National Youth Foundation  
Aspropyrgos Camp, Hellenic Institute of Solidarity and Cooperation  
Lavrion Centre, Hellenic Red Cross

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<sup>1</sup> According to UNHCR’s definition, ‘separated children’ are those persons ‘under 18 years who are separated from both parents or from their previous legal or customary primary caregiver.’ *EC/50/SC/CRP*. February 2000.

<sup>2</sup> Council Directive of 27/01/2003, *Official Journal of The European Union*, 6.2.2003, L. 31/18-31/24

<sup>3</sup> The authors of this research refer to the reception centres by using their acronyms (i.e. “Nefeli”) or the name of the location they are situated (i.e. “Pikermi”) rather than their official/full titles.

'Nafsika' Night Shelter, Medecines of the World  
Nea Makri Centre, Hellenic Red Cross  
'Nefeli' Pilot Project, Social Work Foundation  
Reception Centre for Vulnerable Cases of Asylum Seekers (Pikermi Centre, closed on 31 December 2003)  
Penteli Camp, Doctors of the World (closed in April 2003)  
Voluntary Work, Voluntary Work of Athens.

Social Solidarity Centre for Asylum Seekers, Thessaloniki  
Sperhiada Camp, Hellenic Red Cross  
Kokkinopilos Camp, Hellenic Red Cross

More specifically, the researchers adopted a combination of methodologies including library and archival research, as well as field research methods involving the collection of both quantitative and qualitative data, including interviews with key actors (administrators, professional employees and asylum-seekers ).

### *Implementation methodology*

The Ministry of Health & Social Solidarity was informed on the aims and the procedure of the research in July 2003 and consented to facilitate the carrying out of the research. The UNHCR Branch Office for Greece also solicited the co-operation of all NGO's involved in the research.

In each reception centre during the period from September to November 2003:

- An interview was conducted with the director of the centre who was also requested to gather the statistical data concerning the target groups hosted at the centre during the period January 2001 to August 2003. The UNHCR Questionnaire (Appendix A), which was specifically designed for this research according to the UNHCR Guidelines on the protection of Refugee Children and Women, was used.
- An interview was also conducted with the social worker of each centre. If more than one social worker was employed in the reception centre, the interview was conducted with the longest serving one.
- An organogram and a blank sample of the social history form in use, were provided so that researchers formulate a more comprehensive picture for each reception centre.
- Photos of the internal and external space of the reception centre were taken with the consent of administrators.
- The separated children, single women and single mothers hosted at the reception centres on the day of the researchers' visit, were traced and explained the modalities and purpose of the research. Only those who gave their consent were included in the sample of the research<sup>4</sup>.
- An interview was conducted with each one of the above asylum seekers with the use of the UNHCR Interview Form (Appendix B), designed in the same way as the UNHCR Questionnaire.

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<sup>4</sup> For reasons of anonymity, participating asylum seekers are referred to in the research with code numbers [i.e. : sepchild 5 (separated child 5 ), sw4 (single woman 4), sm2 (single mother 2) etc]

The research team was also supported with library facilities and documentation resources of UNHCR Greece and its implementing and operational partners; including the Greek Council for Refugees, Social Work Foundation- the Department of Balkan, Slavic & Oriental Studies, University of Macedonia in Thessaloniki, International Social Services (I.S.S.) and other governmental and non-governmental bodies involved in the research.

#### *Methodological caveats and limitations of the research*

During fieldwork the researchers encountered particular difficulties concerning the type of knowledge members of organization /staff displayed and types of information they divulged. A common observation was that most interviewees (administrators) had partial and fragmentary information concerning the whole asylum procedure. Similar fragmentary information is reflected in the asylum seekers' interviews (some were hesitant and vague in their responses although the information requested concerned their own daily lives and "priorities")<sup>5</sup>. Another caveat concerns information acquired that eschewed issues concerning the division of responsibility, allocation of tasks, case follow up, information sharing among the different actors (ministries, NGO's, including "invisible" actors such as the informal reception centres).

Specifically, it was found that most reception centres lack a comprehensive data base concerning the individuals' case histories, social profile and cultural background. This makes the whole process of family tracing particularly in the case of separated children, difficult to undertake. This was exacerbated by the lack of systematic archives and statistical data particularly concerning pink card information and the referral system. . One dramatic example of this type of "untidy" record keeping concerns data collected according to existing records and fieldwork findings in the Nafsika centre. 208 separated children were registered in the records covering the period January 2001 to August 2003 while at the time of actual field research only two separated children were located in the centre and interviewed.

During the interviews at the reception centres, the most serious methodological difficulty encountered was the hesitancy, sometimes unwillingness, of some members of staff interviewed to supply certain kinds of information. Few were willing to articulate a coherent and concise account of their activities in the context of the asylum determination procedure or were able to provide an overall account of the processes of status acquisition in practice in a manner that would situate their activities within an operational framework. This, by implication, had as a result the quality of information being fragmentary and partial. The inability to provide an explanation for why a particular method is thought to 'work', tips the scales in favour of a 'know-how' or intuitive type of knowledge which is particularly difficult to document.

As a result, the data collected and assessments made on this basis are limited by the time frame and the particular caveats outlined above. Arguably, longer term research would have produced a different and more comprehensive picture and, by implication, different results.

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<sup>5</sup> The wider issue that is not addressed by this research is whether knowledge concerning asylum seekers' rights, inclusive of the human rights' framework presupposed, should be included as a prerequisite for all people working in reception centres.

## II. LEGISLATIVE FRAMEWORK & ADMINISTRATIVE ARRANGEMENTS

Greece is a party to the 1951 Geneva Convention and the 1967 New York Protocol. Its main asylum specific instruments also include Law 2452/1996 , Presidential Decrees 189/1998 (issue of work permits), 61/1999 (on the asylum procedure, family reunification for refugees etc) and 266/1999 (on Lavrion Reception Centre and access to medical & hospital care of refugees and asylum seekers).

The following provisions of legislation in force are pertinent to asylum seeking women, Separated children as well as the reception and accommodation of those two groups:

- (1) Paragraph 4 of Article 1 (PD 61/1999) stipulates that in case an asylum application is submitted by an unaccompanied minor, then the Minor's Public Prosecutor or, if there is no such prosecutor in the region, the General Public Prosecutor, act as Temporary Special Legal Guardian until the application is decided upon in a definite manner. The same provision also stipulates that if the minor is older than 14 years of age, and enough mature, then he may pursue his/her case on his own.
- (2) Paragraph 3 of Article 2 (PD 61/1999) foresees the possibility for asylum seeking women to have an asylum interview with a female police officer and a female interpreter.
- (3) Paragraph 13 of Article 2 (PD 61/1999) stipulates that holders of a valid 'asylum seeker' card (pink card), may benefit from reception measures specified in Article 24 Paragraphs 2(c) and 4(b) of Law 1975 / 1991 as modified by Law 2452/1996. These measures are (i) free medical, pharmaceutical and hospital care, (ii) economic and social assistance so that urgent and serious situations are faced (iii) temporary employment for the coverage of immediate needs.
- (4) Although accommodation is not included in the reception measures enumerated in the previously mentioned proviso, Article 24, paragraph 2 (a) of Law 1975 / 1991 as modified by Law 2452/1996 stipulates that temporary accommodation centres for asylum seekers may be established through Presidential Decrees upon the joint proposal of the Ministry of Public Order and the Ministry of Health & Welfare.
- (5) Paragraph 8 of Article 2 (PD 61/1999) stipulates that the asylum seeker is obliged to remain at the address he has declared to the police authorities or in the place of residence as set by the police authorities. On the basis of this proviso, the police authorities usually define the place of residence (in one of the reception centres) after consultation and co-ordination with the Ministry of Health & Welfare. If no such consultation occurs or when no places are available, the persons concerned simply declare a friend's address or even the address of the Greek Council for Refugees (GCR) or of other NGO's.
- (6) Paragraphs 1 and 2 of Article 7 (PD 266/1999) set the order of priority according to which, asylum seekers may be accommodated in Lavrion Reception Centre :
  - Asylum seekers whose case is examined under the standard procedure
  - Asylum seekers whose case is examined under the accelerated procedure
  - The elderly
  - Single headed families
  - Large families
  - Families with minor children

- (7) Paragraph 3 of Article 7 (PD 266/1999) enumerates the categories of asylum seekers who can be admitted in existing institutions for Greek nationals :
- Persons with psychological problems
  - Persons under 15 years of age who are not accompanied by a parent or guardian
  - Very old or disabled persons

On the basis of this brief presentation of pertinent legislation, the following observations concerning these legal provisions could be made:

- (a) Greek legislation does not provide asylum seekers a right to accommodation.
- (b) Existing legislation does not include accommodation in the spectre of reception measures envisaged for asylum seekers in general (see point 3 above). However PD 266/1999, specifically referring to the Lavrion Reception Centre, stipulates that certain categories of asylum seekers may benefit from accommodation in this centre . The provision analysed in point 4 above, has not yet been implemented
- (c) As far as reception measures are concerned (see point 3 above), only some have been put in practice. There is no specific provision that asylum-seekers arriving in Greece are entitled to pay-benefits or handouts.
- (d) In the same spirit, provisions on the possibility for certain categories of asylum seekers to be admitted at already existing institutions for nationals, have rarely been used and whenever they were actually invoked, it was realised that the institutions concerned disposed neither the capacity nor the resources required. A characteristic example is that none of the over 300 asylum seeking separated children identified in the period January 2001-August 2003 was ever referred to one of the Greek children institutions<sup>6</sup>.
- (e) There is no governmental or other authority bearing overall responsibility for the guardianship of asylum seeking separated children. The Temporary Special Legal Guardian only deals with issues related to the status determination procedure
- (f) There are no legally binding minimum standards on the operation and services of reception centres, which are administered by NGOs under the overall supervision of the Ministry of Health and Social Solidarity.
- (g) There is no legally binding instrument regulating the modalities of referral of asylum seekers to the various reception facilities.

In terms of administrative arrangements, the Ministry of Public Order (the Police Force) are responsible for all issues related to registration of asylum seekers and status determination while the Ministry of Health & Welfare are responsible for accommodation and most reception issues<sup>7</sup>.

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<sup>6</sup> One may speculate on the reasons for this lack of action. Possibly it is the lack of infrastructure to support referral (e.g. lack of translators and/ or legally informed administrative staff in existing children's homes).

<sup>7</sup> For instance, child education is under the responsibility of the Ministry of Education while vocational training for adults is under the responsibility of Ministry of Labour

### III. RESEARCH RESULTS

The data from this study are analysed in two sections. The first section presents quantitative data concerning the target groups (separated children, single parent families with the mother head of the family, unaccompanied women<sup>8</sup>) and covering the period January 2001-August 2003 as registered and reported by the administrators of the reception centres. This data analysis is presented separately for the Athens area and Southern Greece<sup>9</sup> and for the Thessaloniki area and Northern Greece<sup>10</sup>.

The second section presents data with special reference to the living conditions and service provisions offered in each of the reception centres. The collection and analysis of data for each centre were based on the following criteria applied systematically in order to allow for the particularities of each centre to emerge and comparability in the overall sample:

- a) observations of the research assistants on the day of the visit at the centre
- b) official organograms/brochures of the reception centres,
- c) research questionnaires used to obtain information from the administrators (directors and social workers) on the implementation practices with regard to the target groups (Appendix A), and
- d) interviews with the asylum seekers (Appendix B) who were or used to stay at the reception/accommodation facilities concerned.

The data were organised according to a set of specific research questions that guided the study and were subsequently used to provide an assessment for each reception centre. Specifically, the study sought to answer the following questions:

1. What is the overall description of each reception centre?
2. Which services do the administrators offer to the asylum seekers accommodated in their centres according to their official brochures?
3. Which are the services provided to the target groups in each reception centre according to the administrators?
4. What do the interviewees (separated children, single parent families with the mother as head of family, single women) think about and assess their livelihood in the reception centres?

#### **Summary quantitative data concerning the target groups covering the period from January 2001 to August 2003**

##### *1) Athens area and Southern Greece*

The administrators of the reception centres falling into Athens Area and Southern Greece registered 468 persons. More specifically, 305 of them were separated children

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<sup>8</sup> The term 'unaccompanied women', where used, refers to single women who were in the reception centres without any relatives.

<sup>9</sup> Aspropyrgos Camp, Lavrion Centre, 'Nafsika' Night Shelter, Nea Makri Centre, 'Nefeli' Pilot Project, Pikermi Centre, Penteli Camp, Voluntary Work, Center for UAMs in Anogeia, Crete

<sup>10</sup> Sperhiada Camp, Kokkinopilos Camp, Social Solidarity: Thessaloniki Centre for Asylum Seekers

(Appendix C-Graph 1), 70 were women head of families (Appendix C- Graph 2), and 93 were single women (Appendix C- Graph 3).

The researchers considered the variables of education and religion extremely important as they are rarely noted and registered. For this reason they included graphs of these two variables for each of the target groups: separated children x education (Appendix C- Graph 4), women head of families x education (Appendix C- Graph 5), single women x education (Appendix C- Graph 6), separated children x religion (Appendix C- Graph 7), women head of families x religion (Appendix C- Graph 8), single women x education (Appendix C- Graph 9).

The following numbers were registered per reception centre <sup>11</sup>:

Centre for UAMs in Anogeia, Crete, National Youth Foundation : 45 persons (Appendix C- Graph 10).

Aspropyrgos Camp, Hellenic Institute of Solidarity and Cooperation: 8 persons (Appendix C- Graph 11).

Lavrion Centre, Hellenic Red Cross (Lavrion was under the auspices of International Social Services until February 2003. The related data was added): 102 persons (86 from ISS administrators and 16 from Lavrion administrators) (Appendix C- Graph 12).

‘Nafsika’ Night Shelter, Medecines of the World: 252 persons (Appendix C- Graphs 13, 14,15).

Nea Makri Centre, Hellenic Red Cross: 10 persons (Appendix C- Graph 16).

‘Nefeli’ Pilot Project, Social Work Foundation: 23 persons (Appendix C- Graph 17).

Reception Centre for Vulnerable Cases of Asylum Seekers (Pikermi Centre), Greek Council for Refugees: 21 persons (Appendix C- Graph 18)<sup>12</sup>.

Penteli Camp, Doctors of the World: 0 persons<sup>13</sup>

Voluntary Work, Voluntary Work of Athens: 7 persons (Appendix C- Graph 19).

## *2) Thessaloniki area and Northern Greece*

The administrators of the reception centres falling into Thessaloniki Area and Northern Greece registered 43 persons. More specifically, 18 of them were separated children (Appendix D-Graph 1), 12 were women head of families (Appendix D-Graph 2), and 13 were single women (Appendix D-Graph 3).

As in the case of Athens and Southern Greece, the researchers considered the variables of education and religion extremely important despite the fact that they are rarely noted and registered. For this reason they included graphs of these two variables for each of the target groups: separated children x education (Appendix D-Graph 4), women head of families x education (Appendix D-Graph 5), single women x education (Appendix D-Graph 6), separated children x religion (Appendix D-Graph 7), women head of families x religion (Appendix D-Graph 8), single women x education (Appendix D-Graph 9).

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<sup>11</sup> For a breakdown according to target group, nationality and age, see the corresponding graphs indicated in the parenthesis.

<sup>12</sup> Collection of data was completed prior to the closing of this facility

<sup>13</sup> Data presented further below was based on information provided by a separated child who was traced in Anogeia but had spent some time in the Penteli facility.



One of the particularities of research in Northern Greece and specifically in Thessaloniki is that the researchers adopted a *participatory approach*; they were working as volunteers in the Social Solidarity Centre (S.S.C.) since August 2003. Consequently, the results acquired were more qualitative rather than quantitative. Working as part of the S.S.C. the researchers were able to observe the daily functioning of the centre over a long period of time, record the issues as they arose and were resolved and assess the relative priorities that emerged both on an organisational and managerial level. Accordingly, the sections describing the observations of the research assistants, the administrators' views and those of the residents, and their assessments of the organisation are the result of multiple assessments arrived at through a long period of interaction with the members of the organisation. This process included what is normally part of intensive ethnographic fieldwork, involving 'continual analysis', which affects the direction of research and allows the researcher to be taken by surprise. It is a process of "collecting data, doing analysis, returning to the site for more collection to see if what was concluded makes sense"<sup>14</sup>. Furthermore, the evidence concerning the disparities between the public image of the organisation and the actual practices concerning service provisions emerged in greater detail.

By contrast, in the other two centres of Northern Greece (as a geographical category); i.e. Sperchiada and Kokkinos Pilos, where no individuals belonging to the target groups were present at the time of research, the relevant questionnaires were sent in and received by fax. A series of phone interviews were subsequently conducted in order to acquire the relevant data from the administration concerning the activities and service provision practices of each centre. Thus, despite the fact that the particular centres did not include any of the relevant target groups, data concerning their activities are included in the comparative analysis of service provisions, in the interest of maintaining consistency of presentation and completing a comprehensive view of the reception centres at the national level.

## **Summary Qualitative Data on Reception Centres**

### *ANOGEIA*

- The reception centre in Anogeia constitutes an example of 'good practice' for Greece. Located in a rather isolated town of Crete, it hosts only separated children who are referred to the centre usually through the Greek Council for Refugees (G.C.R.).
- Residents in the centre and the local community seem to have achieved a significant degree of familiarity. Some problems arise due to the limited recreational and employment possibilities offered in the small town. Residents enjoy complete freedom of movement and they are given a monthly allowance for their personal expenses, mostly spent by the children to contact members of their family through phone calls. Recreation facilities include a living room with a television and stereo, and a football court close to the centre.
- The centre provides three meals per day and the food is considered of good quality. As far as access to health services is concerned, residents can visit the

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<sup>14</sup> Patricia Omidian, 'Qualitative Measures and Refugee Research. The Case of Afghan Refugees' in *Psychosocial Wellness of Refugees. Issues in Qualitative and Quantitative Research*, F.Ahearn, ed. Berghahn Books, New York, Oxford 2000: p59.

local medical centre and the hospitals of Irakleio and Rethymno (only for dental care) through collaboration achieved by the staff administration with these hospitals. Hygiene products are provided to the residents by the administration as well as clothes and shoes on the basis of donations to the centre, though these are sometimes not enough for the residents.

- Greek language lessons are provided four times a week by the centre and are attended by a number of residents, but some of them did not consider these important because they were uncertain about the duration of their stay in Greece. Only one of the residents was attending classes at a Greek school but his enrolment had been problematic due to legal barriers. The children speak their native languages with one another. Older residents with satisfactory knowledge of Greek do most of the translating.
- Apart from one child that works as a cook and another that assists in giving art lessons, most of the residents do not work within the reception centre. A number of the children have done seasonal work in the area but some of the respondents mentioned the scarcity of employment opportunities in Anogeia as a significant barrier.
- Most of the children resident in the centre expressed the sense of security they feel in Anogeia but all of them stated that the main source of their psychological anxiety was the temporary and uncertain nature of their asylum situation. As mentioned, the temporary pink card made their lives within this period also ‘temporary’, acting as an obstacle to their plans for the future.
- Legal issues and the limited educational opportunities available are the most important factors to be discussed in the case of the centre in Anogeia. The legal and bureaucratic barriers for the enrolment of separated children in Greek schools have to be resolved in order for the children to enjoy their rights to education. The children’s primary concern is the temporary nature of their asylum situation, which hinders their plans for the future and has negative effects on their self-assurance.

### *ASPROPYRGOS*

- The centre in Aspropyrgos, located in a rather isolated area outside Athens, functions under the direction of the Hellenic Institute of Solidarity and Co-operation. The centre does not admit separated children and during the time of research there were no residents falling into the target groups of single women mothers. Access to hospitals, schools and central NGO offices is somewhat difficult due to the rather inaccessible location of the centre.
- It was not clarified whether a social worker visits the centre on a regular basis; the administrator is responsible for taking the personal history records of the residents. Greek language lessons only take place when the residents request it and the centre does not seem to actively encourage the employment of asylum seekers. Some basic security measures have been taken but according to the researchers they do not seem adequate to create a feeling of safety, particularly among women and children.
- Some positive steps towards the enhancement of the living conditions in the centre include a bus that transports the residents and the fact that the majority of the centre’s staff is female, thus facilitating the relationships with women residents. The centre’s major problem is its relative isolation and distance from

the centre of Athens, which hinders access to education, employment, health services, and recreational activities for the residents. Transportation to and from the centre on a more frequent basis would facilitate access to all the above as well as the integration of the residents into the local community. Other recommendations include the engagement of a social worker by the centre and a more active collaboration with other NGOs in the area.

### *IOS*

- The guest house Ios is located in the centre of Athens and operates under the auspices of the Voluntary Work of Athens. At the time of the research, the centre hosted very few women and no separated children. The researchers carried out only one interview with a single mother. The administration of the centre depends exclusively on volunteers and asylum seekers themselves; the residents have to pay for their expenses (bills and food) and therefore must have some short of income. Among the centres studied in this research, the Ios guesthouse is the only one that considers asylum seekers' active participation as a necessary element in order to reach its objectives.
- The three-storey building contains three independent flats with a common kitchen, bathroom and living room. The administration tried to ensure that separate apartments were allocated to single women and mothers for reasons of security. Apart from that measure, there were no other security provisions in place and the interviewee reported feeling quite insecure in the building. All residents had to cook and clean the apartment for themselves and there was a rotation system for the cleaning of common spaces. Given the self-management of the centre, all residents had to participate in the decision-making processes and there was a weekly meeting with the volunteers for all issues to be discussed. The researchers however fear that if few single women and mothers are hosted in the centre (as was the case when research was carried out) their voice and special needs will not be heard. The efficiency of the centre's provisions depends on the participation and commitment of different volunteers working at different periods. There was no adequate information about women's legal rights in the guesthouse and no mechanisms in place to care for women's special health needs. Educational planning is one of the centre's most efficient provisions, since there are Greek and English language classes taking place in the building next to the guesthouse, a factor that facilitates the residents' participation in them. Women were not able to join these, however, because they had to work and take care of their children.
- Lack of funding was the most serious problem that the Ios guesthouse faced and this resulted in the deterioration of the services provided, namely the security of the building, the presence of a social worker on a permanent basis, employment assistance, and educational planning. The centre seemed to be suitable only for asylum seekers who had been in Greece for some time and were employed and definitely not for more 'vulnerable' groups. Volunteers should have access to further training so that they can offer the residents some basic advice on legal issues and employment opportunities. Collaboration with other national and international NGOs as well as municipal authorities could enhance the services' quality and facilitate the residents' integration into the local community.

## *KOKKINOPILOS*

- The reception centre of Kokkinopilos operates under the auspices of the Hellenic Red Cross and hosts only single men (4 at the time of research), most of whom are referred to the centre through the G.C.R. Its geographical location is very isolated and residents are offered accommodation and three meals per day. No English or Greek language courses take place and the residents usually find seasonal employment in the agricultural and construction sector. The researchers recommend that the centre could also be used as a summer school/camp for asylum seeking children in Northern Greece.

## *LAVRION*

- The reception centre in Lavrion, the only permanently funded one in Greece, has the largest accommodation capacity. Working under the auspices of International Social Service until 2002, it now operates under the direction of the Hellenic Red Cross. Resident in the centre at the time of research were 2 single women, 1 single mother and about 10 separated children, from among whom the researchers contacted interviews with the single mother and 7 separated children.
- It appears that no leading organisation, not even the Hellenic Red Cross, is really involved in deciding who can be accommodated in the centre, as evident from the cases of the interviewees, almost all of whom found out about the centre through informal ethnic or other networks. The centre is composed of three-storey buildings with collective bathrooms and kitchens, which the researchers were not allowed to visit.
- The living situation in the centre, especially that of the separated children interviewed, seems quite difficult. The children interviewed reported that they had to share rooms with 6-13 adults of the same sex, not all of them had a bed, and some had to sleep in the balcony due to lack of space. They generally did not feel that there is someone to take care of them, a problem reinforced by the absence of a legal framework for the protection of separated children<sup>15</sup>. There have been no reported cases of detention or refoulement, voluntary repatriation or family reunification, nor any formal attempts by the centre to trace family members of residents. The only group in which women appeared to participate in the centre is that of Kurdish women organised by the P.K.K. for political and social discussions. There were no separate authorities led by women, a fact that according to the administration of the centre was attributed to the social and religious organisation of the specific ethnic groups resident there. No sports or recreational activities took place and the practice of organising children's groups for various activities was abandoned at the time of the research. It is evident from the children's interviews that their everyday life is quite monotonous and uninteresting due to the lack of activities.
- Food was provided three times a day but the interviewees were not satisfied with its quality and some tried to cook for themselves. As far as health and medical issues are concerned, the residents had access to treatment upon request, and a doctor and nurse visited the centre daily. In many cases, residents were referred

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<sup>15</sup> See points (d) and (e) under II.

to the Health Centre of Lavrion and Alexandra Hospital in Athens. Cases with psychological problems were referred to the Centre for the Rehabilitation of Torture Victims and GCR. The centre provided basic hygienic products but hot water was available only during morning hours. Many residents complained that it was very cold in the winter because the rooms had no heating. Finally, the centre gave out some clothes and shoes, but most of the residents preferred not to wear them because of their poor quality.

- During the period of the I.S.S. administration there was a focus on children's education. There used to be Greek language classes as well as two classes in Farsi and Kurdish. However, problems had occurred with the P.K.K. leadership in the centre, who wanted to appoint their own teacher in the Kurdish classes. Under the new administration, there seems to be limited access to education and only two children were attending the local school in 2003. Greek language lessons are provided, but according to the children they cannot always participate in them because they have to look for employment to earn a living. There is a program providing minors with vocational training but in general the children interviewed expressed their disappointment with the lack of educational services within the centre.
- Most separated children were working outside the centre, or at least, trying to find employment. According to the social worker, employment was the main reason they did not attend school. Further to this, working under the age of 18 is not permitted in Greece except in specific cases, not applicable to separated children. As a result children worked without official work permits. This lack of legal status, on many occasions, resulted in the employers' refusal to pay children who had worked for them.
- Most women did not work or seek employment. According to the single mother interviewed this lack of interest in seeking employment was due to religious reasons. There was no day care service in the centre but the social worker pointed out that women could send their children to the municipal kindergarten if they wanted to work.
- There was a general feeling of safety among all interviewees; regarding single women and mothers, both the staff and the single mother interviewed noted that they felt informally protected, deriving support from the ethnic networks operating in the centre. According to the administrator, cultural values and the strong organisation of P.K.K. prevented any conflicts and tensions in the centre. Few children mentioned having Greek friends while for the majority not knowing the language remained a barrier to integration into the local community or access to employment. Interviewees reported that G.C.R. sent a legal representative to the centre once a week, but most of them claimed that they were not fully aware of their legal rights or the process of their asylum application.
- The research findings suggest that residents in the Lavrion centre have to cope with many problems in their everyday lives. Residents of Kurdish origin can rely on the support of the political party in charge (P.K.K.) but the others have no such self-organised assistance.
- It is recommended that the administration of the centre resume control from the informal networks of the coordination within the centre, the accommodation of residents, and security issues, in order for these services to operate for the benefit of all residents. Additional recommendations include an increase in the number of staff, more attention to educational planning, and collaboration with other

NGOs for the encouragement of women to participate in educational and training groups and in seeking employment with a view to promoting, wherever possible, their economic self-sufficiency and improved self-esteem.

### *NAFSIKA shelter*

- This reception centre is located in the centre of Athens and operates under the auspices of Doctors of the World. Access to employment, recreation, health and educational services, as well as, transportation to and from the centre is readily available due to its location. Nafsika functions as a temporary shelter for homeless asylum seekers who are expected to find their own employment and accommodation soon after arrival. Residents in the centre are referred there through G.C.R. but their policy is to send all children to Anogeia due to their lack of facilities for minors. There were no reported cases of family reunification, voluntary repatriation, or refoulement involving separated children. All residents enjoy the same freedom of movement in the centre but have to comply with the rigid rules in place: they are expected to leave the building at 8:30 a.m. and return at 5:00 p.m. The rationale behind these restrictions, according to the administration, is to motivate the asylum seekers to seek employment and become independent. However, the interviews revealed that it is doubtful whether the rules of the centre indeed provide an incentive to single women and mothers to look for jobs. In some reported cases, they resulted in exactly what the administration wished to avoid, namely residents sitting in a park and simply waiting for the time to pass to return to the centre.
- Similar to all other centres studied, there is in principle freedom of religious worship in Nafsika, but no allocated space for religious activities or ceremonial practices in the centre. Given the restrictive 'house rules' concerning the times of entry and exit from the centre, the issue of religious observance has some relevance for Muslim asylum seekers, particularly if they not allowed to enter their rooms during praying times.
- All interviewees perceived the meal provision as inadequate and of poor quality and reported inadequate access to hygiene products and hot water. The residents' health needs were met through the general clinic of the Doctors of the World, but no counselling or training sessions on hygiene and women's special health care were provided. The centre's administration did not admit asylum seekers with serious psychological problems or serious physical disabilities because they did not have the necessary facilities to accommodate them. Cases of psychological disorders were referred to national hospitals and GCR.
- At the time the research was conducted, Greek language lessons by volunteers were offered in the centre only for the younger children; there was no provision for access to higher education or vocational training. None of the residents reported working within the centre apart from cleaning their own rooms. Single women could leave their children in the day care centre, situated in the same building, in order to look for employment; a few cases of single women working as street vendors and cleaners were reported by the administrators. All the residents interviewed mentioned a feeling of safety, given that there is a 24-hour guard, the rooms can be locked, and each room has its own bathroom. Regarding women's legal rights, the centre was meant to provide legal services, but in

practice they were not offered. Most women interviewed confirmed their lack of information about their rights and their asylum application procedure.

- Basic recommendations for the Nafsika shelter include the reconsideration of the rules that restrict the residents' free movement, the employment of a social worker on a full time basis, the creation of a common room for the residents, the improvement of food and hygiene products' provision, the collaboration with other NGOs in order to encourage the participation of women in discussion and activities groups, more concrete educational planning with emphasis on the enrolment of children in Greek schools, and programmes for the local integration of asylum seekers.

### *NEA MAKRI*

- The reception centre in Nea Makri operates under the auspices of the Hellenic Red Cross and is located in a residential area of the town, quite distant from the centre of Athens. It consisted of 20 barracks and had an accommodation capacity of 150 people. At the time of the research, 41 people were resident in the centre but there was only one single mother falling under the specific target groups studied in this research. There were 10 communal bathrooms, one kitchen, a laundry and a kindergarten. The Hellenic Red Cross did not operate any programmes of voluntary repatriation or family reunification and there were therefore no such cases reported in the centre. Women did not hold any authority positions in the centre and their duties can be described as stereotypically female: cleaning, cooking, childcare and organisation of familial celebrations. Regarding residents' health needs, there was a nurse that visited the centre daily and also informed them about hygiene and family planning issues. More serious incidents and psychological disorders were referred to G.C.R. and the local Health Centre. Residents were provided with hygiene products and some shoes and clothing, but the accommodation in barracks suggested that it could get very cold in winter and very hot in summer.
- Greek language classes took place on a daily basis in the centre, both for children and adults. The single mother interviewed reported not being able to work because she had to take care of her children but according to the administration some women were working in local stores and some children and men in the construction sector. There were some basic security safeguards provided in the centre and the administrators reported the use of a surveillance system with cameras, which in the researchers' view, should better be avoided. There was freedom of movement in and out of the centre but the residents had to arrange their own transportation to the town and to Athens, thus making it difficult to participate in any groups or activities organised by other NGOs in the region. For all legal issues the centre cooperated with G.C.R., yet, the single mother interviewed mentioned that she was not aware of her rights as an asylum seeker.
- The researchers recommend that the administrators of the centre focus more on educational planning, which should include both Greek language lessons and vocational training. They should encourage women, especially single women and single mothers, to seek employment, and a more efficient means of transportation to and from the centre should be devised in order to minimise the centre's relative isolation. Finally, collaboration with other NGOs would enhance women's participation in groups with educational and recreational activities.

## *NEFELI*

- The Nefeli project has been active since November 2001 and is directed by the Social Work Foundation. The reception centre consisted at the time of the research of 4 apartments in different areas of Athens, situated in blocks of flats and thus facilitating contact between the asylum seekers and the local community. Participants in the project may be single women, men and families and they have to pass through 3 interviews in order to be accepted. The rooms have a common kitchen, bathroom and living room. Women resident there used to have access to counselling, family planning seminars, self-defence through the EVA women's empowerment project, developed under the auspices of UNHCR.
- The single women interviewed mentioned that they received a monthly allowance of 10 euros for their living expenses, which was regarded as inadequate. The residents' healthcare needs were met through referrals to local hospitals, Doctors of the World and Doctors without Borders. The interviewees were generally satisfied with the health provisions.
- All participants in the project were obliged to take Greek language lessons organised by various organisations and the interviewees were quite satisfied with these classes. The project focused on encouraging participants to seek employment, but due to their inability to speak the language well, they usually had a hard time finding a job. There was no guard in the apartments but for safety reasons, no visitors were allowed stay overnight. All apartments were situated in fairly safe and central areas and the administrators located women and families in separate apartments from single men. All residents received a monthly bus ticket as an incentive to move around the city, integrate with the locals and seek employment. The project's policy was to refer all separated children to Anogeia due to lack of infrastructure to host them. Nefeli had therefore not developed any educational and training planning specific to children.
- The Nefeli project appeared to be highly appreciated by all the interviewees. In the researchers' view it is as a well-structured project that could facilitate social and economic integration into Greek society. There seemed to be a close relationship between residents and staff and the whole project provided women with incentives to seek employment and empower themselves. There should however be a greater focus on assisting single women and mothers in their efforts to access employment and some additional security measures should be taken for the safety of the female residents.

## *PENTELEI*

- The Penteli camp functioned under the responsibility of Doctors of the World for 7 years, until June 2003, when due to financial problems they left the administration of the place to the hands of the asylum seekers resident there. According to a former administrator, there was information that around 70-80 people were still resident in the camp in November 2003. One of the interviewees in the Anogeia centre reported that he was hosted in the Penteli camp for more than a year and all the information presented originates from his interview. He was referred to the Penteli camp through G.C.R. and was sharing a



tent with four people. A resident of Afghan origin was doing the cooking, while all hygiene products and clothes had to be purchased by the residents. There were no educational courses in the camp, but the interviewee reported doing some construction work within the camp and being paid some money for it.

### *PIKERMI<sup>16</sup>*

- The reception centre in Pikermi has been functioning since October 2002 under the auspices of G.C.R. It is located in the Pikermi area outside Athens and is relatively isolated. Only ‘vulnerable cases’ of asylum seekers, namely families, single women and children can be hosted in the centre. There had been two cases of family reunification of separated children, but no reported cases of voluntary repatriation or adoption of children. Regarding women’s participation, the administrators claimed that there was a women’s group on a weekly basis and an informal self-help group for women in the centre but the interviews with single women and mothers at Pikermi reported no such participation in any group either within or outside the centre.
- Three meals were provided per day. Women and children with health needs were referred to the hospitals of Athens and Nea Makri. Many of the children interviewed expressed dissatisfaction with the poor quality of health care provided. Some Greek language classes used to be offered in the centre but these had ceased at the time of the research, while none of the resident children reported attending the local school. All residents were responsible for the cleaning of their rooms. Some women and children worked as cleaners or in the construction industry. It was evident though from the interviews that inadequate bus services acted as an obstacle to finding employment.
- The interviewees reported that due to reductions in funding a number of provisions in the Pikermi centre had either been terminated or deteriorated. These included a deterioration in the quality and variety of food, reduced access to hot water, and the termination of Greek language lessons. Interviewees considered the insufficient bus service connection of the centre as a significant problem, since it hindered their access to employment, recreation, and also educational and training programmes carried out by other NGOs. Improving transportation services and collaboration with other organisations in the area, allocating a professional teacher for Greek classes, and encouraging residents to seek employment are considered measures that would make a significant difference in the everyday life of the residents in the centre.

### *SOCIAL SOLIDARITY CENTRE IN THESSALONIKI*

- The centre has been operating since August 2000 under the direction of a local NGO called Social Solidarity. Its functioning was reinforced in March 2003, when a series of provisions were put in place (employment of a sociologist and a psychologist) through the centre’s participation in EU programmes. It is located in the centre of the city, a fact that facilitates the transportation of the residents and their access to important services, marketplaces, etc. The ground floor is

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<sup>16</sup> Ceased its operation on 31 December 2003

used by the Thessaloniki Municipality to host the homeless, while the rest of the building is used for the accommodation of asylum seekers.<sup>17</sup>

- Most residents are referred to the centre through G.C.R. Separated children shared the same room with co-ethnic adults and single women had to share rooms with single mothers and women regardless of their origin. Three meals were offered per day and a homeless woman living in the centre was responsible for cooking and keeping the storage. The absence of a legal guardian for separated children was stressed by the administrator, who considered the education of children in S.S.C. a priority.
- There were no authority structures led by women resident in the centre and their duties included stereotypically female activities such as cleaning and assisting in cooking (according to a weekly rotation schedule). A nurse and a psychologist worked on a permanent basis in the centre and some intercultural and group therapy seminars took place in September and October 2003. Greek language lessons were provided and some resident children attended the city's intercultural high school. Though working for minors is illegal in Greece, most children were working or trying to find a job (mostly as street vendors) in order to cover their expenses. Most interviewees reported feeling physically safe in the centre but some mentioned being nervous when they encountered policemen.
- Most of the problems encountered in the centre were related to lack of resources; the administration had, at the time of the research, the capacity to employ specialised personnel through EU funds but the sustainability of this funding remained uncertain. A formal infrastructure of psychological support was still lacking and there was a need for professional male and female translators. Other recommendations include the employment of a child psychologist. A more gender-sensitive and participatory approach should be adopted in order to facilitate integration and the administration should consider allocating an allowance to single mothers and women so as to accommodate their special needs.

### *SPERCHIADA*

- Operating under the direction of Hellenic Red Cross, the centre accommodates single men and families and during the time of research only one single woman was resident there. Three meals per day were provided and there was space for sports activities, a common living room, a school, and an infirmary. The social worker offered residents counselling and basic information on legal issues, while according to the administration there was a women's group and some intercultural activities. A teacher conducted Greek language lessons for children and adults and two children resident in the centre attended the local Greek school. Concerning employment, most residents worked seasonally in agricultural and construction jobs. The administration had terminated its role of

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<sup>17</sup> One of salient issues identified by the interviewees is the daily interference of the volunteer, homeless, resident woman who is engaged in multiple activities in daily running of the centre, largely by default. She acts as a concierge, a storehouse-keeper, kitchen supervisor, etc. Participant observations and further interviews disclosed that the multiple task-role and personal manner often become a source of tension in the centre as a whole. It is possible that some type of mediation would be useful at this level of improving interpersonal communication among all residents.

“facilitator” for the residents’ employment in local factories previously undertaken. The Sperchiada centre is fenced and guarded on a 24-hour basis.

- Though only tentative conclusions can be drawn for the Sperchiada centre due to the absence of the ‘vulnerable’ groups studied in this research, some basic recommendations include the following: (a) accessibility of the centre should be increased thus offering residents more employment and recreational opportunities; (b) the administration should resume its previous role as an information broker between employers and asylum seekers and adopt a more participatory and gender-sensitive approach.

## IV. CONCLUSIONS & EVALUATION

### Quantitative data

#### *General Data*

The overall numbers of the target group populations referred to the reception centres included in the research in the period January 2001-August 2003 are as follows

-Separated Children : 323 (Anogeia: 45, Lavrion: 43, Nafsika: 208, Nefeli: 1, Pikermi: 8, Social Solidarity Centre: 18)

-Single-Parent Families : 82 (Aspropyrgos: 3, Lavrion: 32, Nafsika: 17, Nea Makri: 6, Pikermi: 8, Social Solidarity Centre: 12, Voluntary Work: 4)

-Single Women: 106 (Aspropyrgos: 5, Lavrion:27, Nafsika: 27, Nea Makri: 4, Nefeli:22, Pikermi:5, Social Solidarity Centre: 13, Voluntary Work:3)

Breakdown of nationalities in the case of separated children and single parent families follows the general trend of asylum statistics in Greece, according to which the majority of asylum seekers originate from Iraq and Afghanistan. However, in the case of single women, the majority arrived from African countries, in particular Eritrea, Ethiopia, Sudan and Nigeria.

It is worth noting that at the time the research was conducted, the following numbers of the target groups were traced:

- Separated Children : 24

-Single-Parent Families: 9

-Single Women: 11

The difference between official referrals and the actual presence may be attributed to the following factors

- (a) referred individuals never appeared at the reception centres
- (b) referred individuals presented themselves at the reception centres but subsequently left on their own initiative
- (c) referred individuals left the reception centres after they had completed the maximum time allowed to stay there without due follow-up by the competent authorities and/or prospects of alternative solutions.
- (d) potential deficiencies in the referral mechanism/co-ordination of competent authorities

#### *Issues related to data collection*

##### *a) No centrally administered database*

The competent authority, Ministry of Health and Social Solidarity, does not seem to avail of a regularly updated and easily accessible database with information on the services provided at the various reception centres it supervises and the populations they serve at any given moment. Although all the administrators of reception centres reported sharing statistic information with the Ministry, neither they nor the researchers were able to identify a comprehensive source of relevant information to which they could have access and retrieve data. Some of the social workers interviewed mentioned a database

on asylum seekers created under the EQUAL project however, it was not clear to which extent this was related to reception centres. (Meanwhile, at the time of completion of this report, the “ISTOS database” has become operational, to which many NGOs and some their reception centres are connected).

*b) Two important variables seem to be ignored*

The statistical data provided to the researchers by the administrators of reception centres involved reveal that only some of the centres keep a record of characteristics such as religion and educational level. The main reasons provided by the administrators concerned for not registering this information, were the following: lack of relevance to the mission of the reception centre, time limitations not allowing for proper social background intake.

The qualitative analysis of the data collected revealed however, that religion and educational background may determine to a considerable extent both the personal needs of the individuals and their perception of how these needs are best covered. On this basis, these two variables might therefore prove invaluable to reception centres administrators in their effort to assist their beneficiaries.

*c) Accuracy of data on pink cards*

Another issue relating to the statistical data available, is their accuracy. On a considerable number of cases, asylum seekers reported that their names or /and nationalities and dates of birth, mentioned on the identity documents (pink cards) issued by the authorities, were completely wrong or inaccurate. On other occasions the competent authorities did not keep track of couples or/and children and this resulted in their being issued different documents and treated individually rather than families. The occurrence of such inaccuracies as well as the negative consequences for the asylum seekers concerned were confirmed by the NGO (GCR), which is responsible for the referral of registered asylum seekers to reception centres.

## **Qualitative data**

*1) Background of referral to reception centres*

A considerable number of the individuals interviewed, including separated children stated that they were arrested and detained upon entry into Greek territory. Detention ranged from a few days up to three months and was mainly in police departments and ad hoc detention centres, which in the vast majority of cases were of substandard living conditions.

Another issue of concern is the general reluctance of competent police authorities, mainly at border areas, to register concrete data of the asylum seekers in detention. This has often resulted in couples being registered separately (and therefore referred to different centres) or new-born babies (i.e. while mother in detention) not being registered at all.

None of the persons detained mentioned asylum screening by the authorities prior to detention although most of them explained that access to the asylum procedure, when requested, was given to them with priority. Those who had not been detained mentioned

problems emanating from the police note (white paper), especially regarding access to medical care and harassment by patrolling police officers, who stopped them for identity checking.

The competent police authorities either provided persons released from detention with information about the reception centre they had to go or instructed them to present themselves at the Greek Council for Refugees for further action.

In the specific case of minors, the role of the Special Temporary Legal Guardian (when appointed) was almost non-existent as there was no substantial involvement in the issues pertinent to referral (i.e. travel, interpretation and best interest of the child).

## *2) The referral mechanism*

The asylum seekers interviewed mentioned different mechanisms of referral to the reception centre they were living.

The majority were instructed by the competent police authority to approach the Greek Council for Refugees (GCR), which was to direct them to a reception centre after due consultation and co-ordination with the Ministry of Health & Welfare and the Reception Centres concerned. In this case, individuals had to find the way to GCR premises on their own and without money to pay for their transportation. This proved to be extremely difficult and complicated in the cases of persons detained at border areas far away from Athens where GCR is located. GCR confirmed that quite a few people (including separated children) never appeared at their premises although they were expected and places were available for them at reception centres. From an interview with the GCR referral unit, it appears that there is lack of co-ordination between the Ministry of Health and Social Solidarity and the Ministry of Public Order as to the responsibility over this issue.

In other cases, individuals interviewed reported that they received information about available places at reception centres from informal networks of fellow countrymen or / and political parties, which actually arranged for admission. This was particularly the case for those interviewed in Lavrion Reception Centre.

## *3) Service Provision*

The following assessment of comparative data collected from 12 reception centres is based on the service provision, for each of the reception centres according to the following criteria:

- a) observations of the researchers based on visits to the centres,
- b) official organograms/brochures of the reception centres,
- c) research questionnaires used to obtain information from the administrators (directors and social workers) on the implementation practices with regard to the target groups (Appendix A), and
- d) interviews (Appendix B) with the asylum seekers present or past residents in the particular reception/accommodation centre.

The summary tables below compare reception centres (in an alphabetical order) on the basis of service provisions actually provided and emerging from observations and interviews with administrators, employees and residents at the centres.

All entries need to be qualified and contextualised on the basis of the summary of the qualitative data, concerning the particularities of each centre.

#### SERVICES PROVIDED AT EACH RECEPTION CENTRE

	Anogeia	Aspropyrgos	Kokkinos pilos	Ios	Lavrion
Accommodation	Yes	Yes	Yes	Yes	Yes
Nutrition	Yes	Yes	Yes	No	Yes
Physical health	Yes	Yes (limited)	No	No	Yes
Mental health	No <sup>18</sup>	No	No	No	No
Security	Yes	Yes	Yes	Yes	Yes
Education Vocational Training	Yes (limited programs offered)	Available upon request	No	No (only through volunteers)	No (since May 2003 no education provided) verify: HRC providing supportive tutoring (Greek language) to children
Employment	Non applicable <sup>19</sup>	Not actively encouraged	Not actively encouraged	Non applicable <sup>20</sup>	Mostly informal job placement assistance
Legal aid	No (only through GCR)	No	No (only through GCR)	No(only through GCR)	Yes(through GCR)
Recreation	Yes	No	No	No	No
Freedom of movement	Yes	Yes	Yes	Yes	Yes

<sup>18</sup> There is no mental health provision in the centre. There is however a collaborative structure in place so that mental health issues are may be directly referred to the Centre of Psychiatric Health in Irakleio.

<sup>19</sup> Members of the centre provide informal assistance to increase employment opportunities, given the restrictions in Greek legislation about employment of minors.

<sup>20</sup> Employment in this case is an implicit prerequisite for residents. The particularity of the centre is that residents must contribute to cover their own living expenses and running costs of the centre.

	Nafsika	Nea Makri	Nefeli	Pikermi
Accommodation	Yes	Tents	Yes	Yes
Nutrition	Yes (severe limitations)	Collective kitchens	Non applicable	Yes
Physical health	Yes (limited)	Yes	Non applicable	No (referral to local Hospital)
Mental health	No verify: MDM offers psycho-social counselling at their multi-functional medical centre	No	Non applicable	No
Security	Excessive	Excessive	Not sufficient	Yes
Education	No (only through volunteers) verify: Greek and English language training for children and adults	Yes	Yes	No
Employment	Non applicable	No	Encouraged	Not actively encouraged
Legal aid	No	No	Through referrals to GCR	Yes (Pikermi is run by GCR)
Recreation	No	No	Non applicable	Yes
Freedom of movement	No	Yes	Yes	Yes

	Penteli	Social Solidarity	Sperchiada
Accommodation	Tents	Yes	Yes
Nutrition	No	Yes	Yes
Physical health	No	Yes	Yes
Mental health	No	No sufficient support	No
Security	No	No	Yes
Education	No	Yes	No
Employment	No	No active encouragement	No active encouragement
Legal aid	No	No	Once a month(through GCR)
Recreation	No	No	Yes
Freedom of movement	Yes	Yes	Yes



On the basis of the above comparative presentation of service provision by centre it follows that

1. No mental health (psycho-social counselling) is provided at ANY centre, except at Nafsika (MDM).
2. Legal aid is not provided except through G.C.R at some of the centres (e.g. Lavrion) .
3. No centre provides medical check-up examinations (including physical and dental care)

Given that these needs are **primary** in asylum seeker protection, their lack needs to be urgently addressed.

In general terms, the research identified **two types of weaknesses** on the level of service provision for asylum seekers:

- a) **structural weaknesses** (ie. basic services not provided)
- b) **organisational weaknesses** (ie. basic services not implemented)

#### *4) Basic needs for all asylum seekers:*

- By far the most serious issue faced by all centres is the lack or scarcity of stable, reliable and sustainable funding. In most cases, fluctuations in funding cause fluctuation in the quality of service provisions. For example, in the case of Pikermi it resulted in the termination of Greek language classes, a reduction in the quality and variety of food and access to hot water. Therefore, given that fluctuations in funding have direct effects on service provision at reception centres, it is important to highlight the need for strategies aiming at sustainable resources.
- Some of the reception centres in Attica and beyond remain in isolated locations. Geographical isolation results in limited access to employment, educational, recreational opportunities and to integration with local community. Distance from city centres and difficulties in transportation is a disincentive for residents' decision to follow educational courses (outside the centre when these are not provided) as opposed to finding a job. To those employed or to single women who have no one to look after their children, such programmes are not even an option unless they are done within the centre.
- Despite the collaboration of some centres with local hospitals etc, the residents' perceptions of the health treatment provided are not always positive.
- There is a marked lack of psychosocial support in most centres researched. Material and human resources aim at targeting daily subsistence but no provisions are in place to secure support and treatment for those in need of mental health, which remains the most well-known and recognised asylum seeker need.
- Provision of education programmes and Greek language classes are very often lacking in reception centres.
- Most centres demonstrate a lack of legal support for the residents and it was evident from the research findings that many of the interviewees did not seem to be aware of their rights as asylum seekers.
- In all centres there are no significant restrictions to practicing religion but also no special rooms allocated for religious worship.

- There is no participatory approach in the everyday functioning of the centres and due to that, asylum seekers feel both uncomfortable and excluded from the space in which they live.
- Apart from few exceptions, no centre exhibits any culturally sensitive programme or intercultural courses aiming at the participation of all residents.

5) *Basic needs for the specific target groups (single women, single mothers and separated children):*

- Participation of women in decision-making processes is virtually non-existent in all centres researched, except for Ios (Voluntary Work Athens) and Nefeli (SWF). Usually women residents' responsibilities fulfil their 'stereotypical' female role: childcare, cooking and cleaning. As a common practice, they are not encouraged to take decisions and hold authority positions in other areas that are equally important for their lives, such as their own education and their children's, employment opportunities, transportation problems, legal rights' issues and participation in programs with other women organised by international organisations or NGO's.
- Women's special health needs (gynaecologist, psychologist) are generally only reactively accommodated, i.e. when a resident requires a doctor or a nurse. No information material or training courses on health and hygiene issues is available for single women and mothers.
- It is a common feature of all centres not to actively encourage single women's employment. The separated children in Anogeia and Lavrion as well as single mothers and women interviewed have expressed their will to find a job instead of attending school or, if possible, combine both.
- Women and children do not generally have access to high education or training-professional programmes. The lack of day-care facilities significantly contributes to deterring single mothers from joining language classes or other educational and training programmes.
- In most cases the basic needs of children for recreation, play and exercise are lacking.
- Although the aim of the current research has been to assess and offer policy recommendations for 'vulnerable' groups, the findings suggest that existing reception practices in four reception centres (Pikermi, Nafsika, Nefeli, and Anogeia) do to some extent already prioritise the needs of these particular groups.

6) *Pattern of Residence*

It appears from the field research that there are no general guidelines or uniform practices with regard to the reception of single mothers, single women or separated children. With the exception of separated children, asylum seekers seem to be referred at random, according to the places available and the willingness of NGOs concerned to co-operate with GCR.

The separated children should normally be offered accommodation in the reception centre of Anogeia in Crete. The majority of the separated children interviewed (namely 13 out of 24) were or had been staying there in the period 2001-2003. It is not clear

whether those who never lived at Anogeia were not proposed to go there or they simply refused to reside in the centre e.g. because they wanted to find a job.

However, among those interviewed, employment was a motive for several children not to stay in Anogeia or other centres but rather to go and live on their own<sup>21</sup>. Striking is that many children were living outside, on the streets or in the parks for quite some time prior to finding a place at a reception centre<sup>22</sup>. This is possible to happen in cases where the existence of the separated child is not yet known to any organization or official institution, e.g. when he/she has not yet applied for asylum. However, it appears from the research that even some of the children who were detained upon arrival and were therefore known to the authorities, ended on the street without shelter or assistance once they were released.

Interviewees' life in reception centres appeared to be largely affected by their anxiety and disappointment over delays or negative decision on their asylum claim. They seemed to lack correct information concerning the asylum procedure and the legal status they're in or about to receive. Many, if not most people felt being in a limbo, angry and upset with their unclear and insecure situation. A lot of them had great expectations but were disappointed and dissatisfied with the little assistance they received from several organisations that, in their view, did not keep their promises.

However, one has to take into account that many of the people interviewed in the framework of the research might have particular expectations and wishes that do not necessarily correspond or square with the asylum procedure (e.g. the majority of the separated children that were interviewed explicitly stated that they came to Greece for economic reasons and not because they were victims of individual persecution in their country of origin). In such cases, it is understandable that the people in question have rather negative feelings about the way in which they are assisted.

### *7) Informal reception facilities*

An unexpected finding of the research was the role of private, usually church-affiliated institutions, providing reception services to asylum seekers and also other categories of needy individuals, irrespectively of race, nationality or religion. These institutions are named 'informal' or 'secondary' centres not because they are of lesser significance but rather because they have a broader scope of activity.

In fact they offer a broad range of services from the possibility to have a hot shower and a meal to Greek language courses and accommodation. They have proved to constitute a safety net for a number of persons interviewed during the research<sup>23</sup>.

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<sup>21</sup> Sepchild1 decided to leave the Pikermi-centre and to live on his own in the city of Nea Makri, because he needed to find a job, which he couldn't while staying at Pikermi. Finally he ended up living in the camp of Lavrion. Sepchild11, 18 and 19 left Anogeia for the same reason and so did sepchild10 when leaving the camp of Spheriade.

<sup>22</sup> In such cases Informal networks of fellow countrymen, church institutions or political parties, play an important role in providing guidance and assistance by actually identifying temporary accommodation solutions.

Although these institutions receive no funding from asylum related sources, they seem to be fully integrated into the overall protection system having a complementary role to the ‘main’ facilities and providing solutions when all other alternatives have been exhausted.

### Examples of good practice

- **The case of Anogeia** can be considered an example of good practice in terms of service provision to the target group as evident from the views of the residents and the researchers’ findings. It constitutes a model case, which should be emulated by other centres that target separated children.
- **‘Nefeli’ project** appears to be a well structured project through which women asylum seekers might be more easily integrated into the society and empowered to build on their own lives in Greece. Because of its small size and the dispersion of its residences in different residential areas of Athens, it appears that the project has significant advantages in comparison both with the centres located outside the city centre and the ones located in areas like Omonia Square. Because the asylum seekers share the responsibility of the apartments they stay in, they also get an opportunity to become more mobilised. For these reasons it is more suitable for single women and mothers, who need encouragement and support in order to become independent, rather than for separated children, who require closer attention and protection.
- The **Eva project**, a women’s empowerment project, related to Nefeli, was rather unique and could be enhanced to serve the needs of other centres as well establishing a meeting point for single women, mothers and children from

Target group	Type of secondary reception centre, name and location	Approximate duration of stay at the secondary reception centre	Approximate date of entry into the secondary reception centre
Sm5	Hotel in Athens	One and a half months	November/December 2001
Sw3	African church, ‘Jesus is the Answer’	One month	
Sw4	‘Mother Theresa’, guest house for women/Catholic convent	Two months	End of February 2003
Sw5	Hotel in Crete	One month	
Sep child1	1. Guest house, ‘Smile of the Child’. Two different guesthouses, one in Nikia and one in Corfu. 2. Guest house, ‘Organisation for the Protection of Minors’	1. One year	1. December 2001

different centres to participate in creative activities and the learning of new skills.

- **The case of Ios:** Refugees' and asylum seekers' participation in the decision making processes is one of the means by which the objectives of Ios are met. This is the only centre that actually mentions refugees' participation as a necessary means by which the goals of the centre can be established. Single women and mothers actively participate in the running of the guesthouse because they are responsible for almost every aspect of their everyday living.
- Some **Voluntary Work** projects, such as the identification and protection of the homeless asylum seekers, the establishment of lists of employers, willing to hire refugees/asylum seekers and property owners offering accommodation to refugees/asylum seekers, are quite unique. They could become quite effective if they received more financial and state/community administrative support.
- The **Social Solidarity Centre**, has initiated, on an *ad hoc* basis, family tracing. During the interviews a particular case of family reunification was cited. It was an isolated case, serendipitously undertaken by one of the volunteers who had access to Germany based NGO specialising in family-tracing. This incident of international NGO collaboration may be considered as an example of 'good practice' worth investigating further. Such attempts of information sharing and collaboration should be further pursued and possibly established as a standard provision of all reception centres.

## V. RECOMMENDATIONS ON INSTITUTIONAL REFORMS AND SERVICE PROVISIONS

This part of the report should be read as the normative framework within which specific actor directed (UNHCR, Greek state, NGOs) recommendations are proposed.

**General recommendations** aiming at changing approaches and attitudes in the provision of assistance.

- Shift from basic needs approach to human rights approach. There is a need for an **improved human rights approach** and a further need for improved professional standards that would enhance reception practices. These include the handling of asylum seeker cases and their daily life in the reception centres. Typically the pattern of engagement, particularly among the volunteers and the local community at large, is that of **pity and compassion**. This attitude, though commendable, makes the beneficiaries feel victimised and undignified. At the same time, though it allows for the maintenance of the basic functions of the centre in times of financial crises, it reinforces the lack of professionalism, characteristic of charity work on the national level. There is a need for increased professionalism vis-à-vis the handling of asylum seeker cases and their daily lives in the centres.
- Adopt a **participatory approach** in needs assessment exercises. Namely, the priorities of the recipients should be reflected in the whole process of interviewing and assessment.
- Adopt a **gender and age sensitive approach** in needs assessment missions and service provisions for all asylum seekers.
- **Consider gender sensitivity as part of child care** including physical and mental health care according to the recommendations of the programme: ‘Separated Children in Europe: Policies and Practices in European Union Member States: A Comparative Analysis’<sup>24</sup>. Specifically:
  1. Programmes and procedures should be developed to facilitate the integration of separated children.
  2. All separated children should have a long-term care plan to address the specific areas and steps necessary for effective solutions.
  3. Access to all welfare services should not be restricted and should be available to all separated children regardless of their immigration status.
  4. Separated Children whose temporary status expires upon their 18th birthday should be treated in a generous manner with full regard to their vulnerable status. Their current situation regarding work or study should be given considerable weight in decisions around whether they remain in the host country or return to country of origin.
  5. Within the limits of national legislation on the employment of children, separated children should have the right to engage in paid work if they wish to.
  6. **Include data entries on education and religious confession in all social history files registered at the entry points.** This implies construing the concept of ‘vulnerability’ in relative rather than in categorical terms.

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<sup>24</sup> [www.separated-children-europe-programme.org/Global/Documents/Eng/CompAna1.pdf](http://www.separated-children-europe-programme.org/Global/Documents/Eng/CompAna1.pdf)

Accordingly, vulnerability in the context of service provision for asylum seekers should be flexible enough to include not only the specific target groups studied in the present research but also allow for the inclusion of other cross-cutting factors (eg. education and religious affiliation) that make certain members of these target groups and/or the rest asylum seekers vulnerable viz-a-viz others, and hence in more urgent need of formal care provision, than others. Programmes that target assistance exclusively to women tend to marginalise men. The failure to attend to the differential losses of *both* men and women may thus result in greater suffering for women and end up having negative impact on both women and children.

### **Recommendations to UNHCR:**

- UNHCR’s mandate is to protect asylum seekers and refugees and seek permanent solutions to their problems. Accordingly, this report recommends an increased role of the UNHCR office in Greece. Specifically:
- Continue to act as a facilitator among Greek state actors and NGOs.
- Continue to promote asylum seeker rights as upheld in international legal instruments and standards of the UN system (UNHCR, Reception Standards for Asylum Seekers in the European Union, July 2000).
- Train competent authorities and NGO staff on refugee rights and reception standards.
- Supply information on UNHCR’s role to competent authorities and service providers at the entry points and in the detention and reception centres.
- Encourage information dissemination and cooperation among state authorities and NGOs.
- Incorporate in its annual training plan at least one training event involving NGO staff/administrators working in reception facilities.
- **Lobby Greek State authorities to increase the number of reception centres and set up permanent state reception centres** for asylum-seekers.
- **Lobby Greek state authorities** to establish an adequate infrastructure for the provision of basic medical and social services and for the screening by the competent organs of the Ministry of Public Order, to identify asylum-seekers, including separated children, and to ensure their access to the asylum-procedure
- **Lobby Greek state authorities to enforce** the application of minimum reception standards in the detention and reception centres.
- **Lobby Greek state authorities and the Red Cross administration of the reception Centre at Lavrion to a thorough review of operations and service provision** at the site. Specifically, renegotiate the power structures between the main actors (State, Red Cross, the P.K.K. and the rest of the group leaders) in order to guarantee that basic needs are met and services provided on an equitable basis.
- Promote further research, including follow up studies, in order to generate a constructive understanding of the functions and “best practices” at reception and detention centres.

### **Recommendations to the Greek state:**

- The Ministry of Public Order and the Ministry of Health and Social Solidarity, specifically, should take into account and transpose into national legislation the relevant minimum standards for the reception of asylum-seekers as adopted in the EU Directive on the *minimum standards for the reception of asylum-seekers in the Member States*.
- Co-ordination between the Ministry of Public Order and the Ministry of Health & Social Solidarity should be strengthened and enhanced
- Uphold and eventually implement the relevant European Commission standards and guarantee that asylum seeker detention and reception processes conform with the internationally recognized standards and in accordance with the Greek law.
- Utilise existing legal provisions in order to introduce measures such as granting of social and financial assistance to needy asylum seekers and admission of special categories/vulnerable groups at institutions for Greek nationals.
- Compliance with international instruments for human rights protection. Implementation of binding obligations including the right to food, medical care, legal aid and access to interpretation services for all asylum seekers.
- Guarantee follow-up activity to be implemented on a national level: information and training of local staff on reception standards in all entry points and reception centres.
- Engage all relevant Greek state actors (i.e. Ministry of Public Order, Ministry of Health and Social Solidarity, Ministry of the Interior) in adopting specific policies concerning separated children's asylum applications within the framework of European Union good practices, with special reference to the Statement of Good Practice of the Separated Children in Europe Programme (see footnote 23).
- Consider the appointment of a Legal Guardian for Separated Children by the Office of the Greek Ombudsman (Department of the Rights of the Child, Law 3094/2003) although this is not included in its current responsibilities. This is a proactive suggestion with the explicit purpose to assign the Office of the Ombudsman the role of overseeing separated children's complaints and act as a mediator in handling their cases not only in the context of their asylum applications but also on the basis of their individual priority of needs according to their age, ethnicity, religion and culture.
- Provide systematic assessment and evaluation of reception conditions at all detention centres at the entry points and reception centres in Greece.
- Institute asylum seeker needs assessments at the entry points including collection of education and religion data .
- In view of the positive attempts made by the Ministry of Labour to introduce seminars on intercultural sensitivity for the unemployed, attempts should be made to extend participation to these seminars so as to include **all women asylum seekers**; even those without pink cards or unemployment cards, which currently, constitute the basic prerequisites for participating in such programs.
- Extreme care should be demonstrated towards the continuous increase of the number of African and other single women asylum seekers. Their needs should be systematically assessed and the individuals supported in all ways in order to avoid cases of sexual exploitation and trafficking.



- **Separated children and adolescents** should not be detained but protected and hosted immediately after their arrival in reception centres that are in a position to cover their needs.
- A regularly updated and easily accessible (by NGOs concerned) central database with comprehensive information on reception facilities should be created. To the extent that the EQUAL database is related to the issue of reception services provision, full use should be made by NGOs concerned.
- The referral mechanism of asylum-seekers to reception centres, as implemented by the Ministry of Health & Social Solidarity and administered by GCR, should be further reinforced and expanded so that it becomes the central referral mechanism in Greece.
- The research findings also suggest that services available to asylum seekers are not restricted to reception centres. Services provided outside the official reception centres, for instance by major NGOs such as G.C.R. in Greece, should also be evaluated by the Government against applicable minimum standards of reception.
- *Staff specifically* trained and educated on asylum seekers issues (including legal, social and psychological aspects), should be employed in all reception and detention centres. The Police should be responsible only for the security in the detention centres and for receiving asylum-applications, and need to be properly trained in dealing with asylum seekers at detention centres.

#### **Specific recommendations to NGOs:**

- Minimum standards of operation for all centres should be: provision of accommodation, food, employment of a social worker, a nurse, a psychologist, access to education, recreation and health services (including the provision of dental hygiene).
- Mental health support structures should be put in place as a basic human need.
- Aim at stable and sustainable funding, including through enhanced fundraising efforts from the private sector.
- Collaborate with other NGOs and encourage inter-agency flow of information, especially in cases of non-appearance or voluntary departure from the facility where accommodated.
- Encourage information dissemination within NGOs and among state authorities and NGOs.
- Broaden the meaning of **education** to include not only language skills acquisition targeted to the asylum seekers. Promote ‘local integration’ as an education based interactive relation between asylum seekers and host population. Programmes of cultural sensitivity should be put in place and be all-inclusive.
- Organise seminars and distribute information material on health issues-with emphasis on women and children special health problems- in collaboration with other centres and the Ministry of Health and Social Solidarity. This can be done by the Doctors of the World who are in a particularly advantageous position to do so, since a lot of their volunteers and employees are associated with the medical profession.
- Freedom of movement is an important right that should be granted to residents of all centres as it facilitates their access to employment, educational programmes and recreation opportunities.

- Increase the centres' visibility concerning contacts with local community in order to improve accessibility to the labour market, attract more volunteers to work in the centre and facilitate the residents' integration in the local community.
- Streamline the needs of vulnerable groups with referrals to reception centres that offer special services. If some centres cannot, due to infrastructure/available services, accommodate the needs of vulnerable groups this should be made known to the NGO community and the competent authorities.
- In the case of Lavrion no political party interference should be allowed by the administration. Admission of new residents should be made so that population will be more ethnically diverse. Allocation of rooms to newcomers, attendance to school classes and security issues should be organised by the administration and not by informal networks, in order to provide more stable and reliable support to residents, especially women and children.
- NGOs should try to sensitise hospitals towards the rights of asylum seekers to physical and mental health care.
- The possibility of providing residents of reception centres with a weekly financial allowance (as in the case of the Nefeli project) should be explored as it would provide asylum seekers with a sense of independence and self-dignity .
- In view of the difficulties generated by the working schedules of single-women and distribution of baby food and pampers to single mothers, the administration should consider allocating an allowance to these two groups in order to accommodate their specific needs.
- There is a need for professional translators to be attached to the centres. Given the gender composition of the residents, both male and female translators should be recruited.
- The geographical isolation seems to significantly hinder the access of asylum seekers to education, employment, and recreation. Ways of transportation to and from the centres should be further explored in order to facilitate integration in the local community.
- Considering the lack of a space for religious worship in all reception centres, a special room should be allocated for this purpose, particularly during collective feasting (Ramadan). Such practices would be consistent with a more culturally sensitive approach to the asylum seekers' existence.
- More attention should be paid to educational planning, starting with Greek language learning. The establishment of information seminars on educational opportunities would be a positive step in order to encourage single women and mothers to participate in courses outside the centre. Separated children should be encouraged to attend school, and join training seminars
- Encourage programmes for asylum seekers' local integration in to the host society through participation in the social activities of the local community. Collaboration with municipality and other local organisations. Strengthening the ties with the municipal authorities and other local groups could also enhance the functioning of the centres and improve the integration of asylum seekers in the local community in order to improve their social life as well as employment and educational opportunities.
- It is important that if the centre itself cannot offer legal support, an NGO legal counselor (e.g. from G.C.R.) visits the centres on a regular basis to inform residents on the process of their asylum applications and brief the staff on legal

issues and new developments in Greek refugee law. A more stable pattern of regular information and briefing on Greek and international refugee legislation should be established within the auspices of each centre, in order to guarantee regular information dissemination relevant to the asylum seeker's situation.

- Emphasis should be given to encouraging single women and mothers to find employment. Also counselling should aim at providing support and practical solutions to women's (for example taking care of the children while working, local kindergarten, part-time work, funded seminars etc) future plans. All residents should have access to every possible means of information, such as the Internet, newspapers etc, where they could search for employment. Integration of women in the local market should be an explicit objective and this could be facilitated by the practice of the centres' administration acting as an information broker between local employment providers and asylum seeker residents.
- Collaboration with other NGOs could enhance women's participation into groups across centres in educational-recreational activities (like the Eva project) or programmes of professional or vocational training offered by governmental and non-governmental bodies. Single women and mothers should also be encouraged through access to such programmes to meet with other asylum-seeking women (of the same ethnic origin, background) inside and outside the centre.
- Keep a gender balance between the staff and the 'clients'. As evident from the research, in many centres the majority of the staff is female and this would most likely work positively for single women and mothers. Nevertheless, this gender should also reflect the relevant needs of the asylum seeker population in a reception centre as a whole.

Caution in the application of EU minimum standards is needed to ensure that:

1. The application of EU minimum standards does not stifle or reduce the effectiveness of existing services by being overly prescriptive and regulatory, hence compromising the flexibility of centres to meet the specific needs of specific asylum seekers.
2. Where minimum standards are applied, it should be ensured that centres have adequate resources to adhere to these standards.
3. Reception centres should be encouraged to not only meet but also exceed minimum standards, so as to ensure the application of standards does not generate a ceiling on the provision of services that under different circumstances would have been exceeded.
4. Informal reception centres should be further integrated into the overall asylum seeker reception system in Greece to ensure maximum utilisation of available resources and capacities.

#### **Institutional requirements for all centres:**

- Establish a code of conduct and standard operating procedures (SOPS) for NGO staff at reception centres
- Provide information (e.g through a leaflet) on services provided as well as a complaint procedure for residents at reception centres. Set mechanisms in place

to cope with tensions and conflict resolution between administration and residents.

- With the exception of Lavrion where informal ethnic networks **compete** with the formal administration, all centres need to mobilise informal networks and use self-help assistance to protect and care for women and children, where no formal protection mechanisms exist.
- Establish an active policy for the dissemination of information and promote family reunification and local integration.
- Establish a systematic record keeping (database) sector in every centre with resident profiles on incoming residents.
- Tentatively it is suggested that assistance is also provided on the basis of a self definition of “vulnerability” and not strictly according to top-down, rigid categorisations such as the ones used to define the target groups of this research. Therefore, achieving a balance between groups that *perceive of themselves* as vulnerable and in need, and the frameworks of vulnerability used by organisations and the people who provide assistance, could therefore be a crucial challenge in shaping reception practices in Greece. The current research findings that challenge the three categorisations that this research has been based on, namely single women, single mothers and separated children, may be a step in this direction.

## APPENDICES

## APPENDIX A

### UNHCR Questionnaire

#### Questionnaire for administrators of reception centres for those seeking asylum\*

Thank you for your valuable contribution to this research. Please be assured that the information with which you entrust us will be treated in strict confidentiality.

#### PART ONE

1. Please provide numbers for each year during the period from 01/01/2001 through 31/08/2003

a) separated children seeking asylum

2001	2002	2003
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-----  
b) single women seeking asylum

2001	2002	2003
------	------	------

-----  
c) female heads of household seeking asylum

2001	2002	2003
------	------	------

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who were hosted/received at the Center for which you are responsible.

2. Please provide detailed characteristics for each of the groups identified above \*\*:

*A) Separated children*

CASE 1:

Country of birth

Country of residence

Sex

Age

Nationality

Religion & Or religious confession

---

\* This questionnaire is accompanied by a definition of the concept "separated children" in place of which the concept "unaccompanied children" is proposed for the Greek language. "In English the term 'separated children' is preferred to the term 'unaccompanied children' because it accords better with the basic problem encountered by these children, i.e., that they receive no care and protection from their parents or legal guardian, and for this reason suffer, from the social and psychological standpoint, from separation" (*Separated Children in Europe Programme: Report on Best Practices*, 1999).

\*\* Attach additional records if you consider necessary.

b

## B) Single women

CASE 1:

Country of birth

Country of residence

Sex

Age

Nationality

Religion & Or religious confession

## C) Female heads of household

CASE 1:

Country of birth

Country of residence

Sex

Age

Nationality

Religion & Or religious confession

### **DEFINITION:**

“Separated children and youth” are considered to be children below the age of 18 living outside their country of origin, far from both of their parents or legal/customary guardians/main caretakers. Some children are entirely alone, while others live with distant relations. All these children are considered to be separated, and to have the right to international protection within the wider framework of international and national legislation. Separated children can request asylum by reason of fear of expulsions or of armed conflicts or disturbances in their country either because they may become subject to human trade for sexual or other types of exploitation, or they may have come to Europe to flee conditions of particularly severe deprivation.

(CRC, Articles 1 & 22. Hague Convention on the Protection of Children, 1996, Article 6. UNHCR, Guidelines, para. 3.1 ECRE para. 8 & 11. Resolution on Unaccompanied/Separated Minors, Article 1).

## **PART TWO**

### **A) SEPARATED CHILDREN**

**Please respond to the following questions for the period 01/01/2001 through 31/08/2003**

1. Does your center cooperate with any international or state service to/from which information is provided regarding the protection of separated children?
2. In how many cases was a guardian or advisor appointed for protection of separated children hosted at your center? Provide details by year/case (country of birth, country of residence, sex, age, nationality, religion & or religious confession ). If there were no such cases, please skip questions 3-6.

3. In these cases, the guardian undertook to ensure:  
(Circle as appropriate)

- A) decisions in accordance with the child's best interests,
- B) appropriate care, place of residence,
- C) education, language support,
- D) health care,
- E) legal representation as regards the request for granting asylum,
- F) provision of counseling,
- G) provision of services by various organizations,
- H) advocacy in the child's name,
- I) search for the child's family and its reuniting,

4. Which was the professional specialization of the persons appointed guardians?

5. Did they receive professional support?

6. (If so), what type of professional support?

7. Who was responsible at your center for the recording of the children's social histories?

8. In how many cases was a child's age estimated with the help of a pediatrician?

9. Was the pediatrician knowledgeable concerning the racial/cultural background of the child?

10. In how many cases did you contribute to locating the child's parents and family? Please provide the year and country of origin for each case.

11. In what way(s) did you contribute?

12. In how many cases was the family of a child hosted at your Center reunited? Please provide year and country of origin.

13. Were there cases of separation of separated step-brothers/sisters? If yes, please provide the number of such cases and countries of origin.

14. Were there cases in which the children were placed in the families of relatives? Please provide the year and country of origin for each such case.

15. Were there cases in which the children were placed in families within the community where your Center is located? Please provide the year and country of origin for each such case.

16. In how many cases were children placed in foster families? Please provide the year and country of origin for each case.

17. In how many cases were children placed in institutions such as orphanage/asylum. Please provide the year and country of origin for each case.

18. In the above cases, was there a member of the staff from your Center who evaluated the conditions under which care was provided?



19. Were there cases in which separated children hosted at your Center were placed in custody or returned to the point of entry? If yes, please provide year and country of origin.
20. Were there any cases of voluntary return/ resettlement of an unaccompanied child? How did you deal with these? Please provide year and details for each case (country of birth, country of residence, sex, age, nationality, religion and or religious confession).
21. To what type of health care did separated children hosted at your Center have access? Please provide year and details for each case (country of birth, country of residence, sex, age, nationality, religion and or religious confession).
22. In how many cases did children attend classes at a Greek school? Please provide year and details for each case (country of birth, country of residence, sex, age, nationality, religion and or religious confession).
23. In your opinion, what are the reasons why some of the separated children hosted at your Center did not attend school?
  - A) Inability to enroll
  - B) Inability to attend for language or other reasons. Please explain.
  - C) Child refused to attend school
24. Are Greek classes offered at your Center? If so, by whom?
25. Has educational planning been undertaken?
26. Are certificates of study issued for demonstration of academic achievements?
27. Do the children have access to their mother tongue? In what way?
28. Does your Center provide professional or vocational training to separated youths?
29. Does your Center provide separated youths with educational or career counseling?
30. In how many cases did separated children and youths work during the period they were hosted at your Center? Please provide year and details for each case (country of birth, country of residence, sex, age, nationality, religion and or religious confession).
31. Did the children have a legal representative to assist them in submitting requests for asylum? From which public services the legal representatives come from, and how many cases of separated children at your Center were undertaken by each?
32. According to what criteria was a legal representative chosen in each case?
33. Do you know how long each child waited for the decision regarding its request for asylum? Please provide year and details for each case (country of birth, country of residence, sex, age, nationality, religion and or religious confession).
34. In cases where an interview regarding asylum was conducted, who accompanied the separated child/youth to the interview? Please provide year and details for each case (country of birth, country of residence, sex, age, nationality, religion and or religious confession).
35. Are you aware of any cases where separated youths came of age in the course of the process of requesting asylum? Please provide year and details for each case (country of birth, country of residence, sex, age, nationality, religion and or religious confession).
36. How were these cases treated?
37. Were the children informed about the asylum process, about decisions taken regarding their future, and about possible consequences?

38. Does your Center provide opportunities for sports, games, or other recreational activities to separated children/youths? Please provide details.
39. Are there safe areas for children to play at your Center? Are there games or simple materials for construction of games? Please provide details.
40. Is there the possibility for a separated child hosted at your Center to practice his/her religion? If yes, in what way is this provided?
41. If counseling is offered to separated children at your Center, please list three of the goals for counseling you have established.
42. Are support groups for separated children in operation at your Center? If yes, in what way?
43. In cases of children with serious psychosocial disturbances, how do specialists ensure the participation of both the children as well as the Center's staff?
44. If you cooperate with mental health services, with which services do you cooperate?
45. Were there separated children/youths who behaved in an aggressive and/or violent manner? Please provide details by year and case.
46. Describe the daily and weekly program of activities for separated children/youth (if available, please attach programs, schedules, etc.)
47. Do separated children have access to the "outside world"? In what way is their freedom of movement outside the settlement ensured?
48. Has your Center hosted disabled children? Please provide year and details for each case (country of birth, country of residence, sex, age, nationality, religion and or religious confession).
49. What was the nature and extent of their disabilities?
50. Were the disabled children included in the normal services offered by your Center and in the life of the community? In what way?
51. What complementary measures were implemented to guarantee the rehabilitation and well being of separated disabled children?
52. Were there cases reported relating to sexual exploitation? Please provide year and details for each case (country of birth, country of residence, sex, age, nationality, religion and or religious confession).
53. Were there cases related of child labor or military service? Please provide year and details for each case (country of birth, country of residence, sex, age, nationality, religion and or religious confession).
54. Were all the above instances of child abuse reported and followed up by the appropriate officials?
55. Has your Center hosted separated stateless children? Please provide year and details for each case (country of birth, country of residence, sex, age, nationality, religion and or religious confession)
56. What measures are taken so that these children can obtain citizenship or identity papers, according to case (country of birth, country of residence, race, age, nationality, religion and or religious confession)?
57. Is the exercise of the right to active participation in every decision taken regarding him/her recognized for every separated child?
58. When the Center has responsibility for a separated child or youth, which of the following information does it collect?

- 1  Information about the child's family (in the native country and elsewhere)
- 2  Information about family members who are important to the child
- 3  Conditions under which the child was found/recognized
- 4  Information relating to the reason the child was separated from its family
- 5  Information relating to the child's life before and after being separated from its family
- 6  The physical condition of the child, its state of health and medical history
- 7  Educational level (formal and informal)
- 8  Current measures being taken for the child's care
- 9  The child's wishes and plans for their future
- 10  Preliminary assessment of the child's intellectual and emotional development, and maturity
- 11  Estimate of age

(If available, please attach a sample of the document employed for taking the child's social history)

59. Is there a separate archive for separated children hosted at your Center?
60. What are the three most common problems you encounter in relation to separated children at your Center?

A

B

C

### **B) SINGLE WOMEN & FEMALE HEADS OF HOUSEHOLD**

**Please answer the following questions for the period from 01/01/2001 through 31/08/2003**

1. Do women hosted at your Center participate in planning and providing assistance, services, and security measures relating to them? In what way?
2. Is there any case in which you have hired and trained as staff women hosted at your Center so that they could contribute to matters of concern to them during the planning and implementation of programs?
3. Are there cases in which your Center has taken care of the issuing of separate documents for women separated or divorced from their spouses?
4. Describe the living arrangement/lay-out at your Center that ensures the protection and safety of single women and female heads of household.

5. Do single women and female heads of household have access to programs of voluntary repatriation, resettlement, being reunited with their families, being integrated into the local community, and to information required for making choices regarding long-term solutions? In what way?
6. In which cases were there questions of families being reunited? Please provide details including year and country of origin.
7. In what ways did your Center contribute?
8. Are single women and female heads of household able to circulate freely inside and outside your Center? If there are limitations on their free movement, what are they?
9. Do single women and female heads of household enjoy the same freedom of movement as the men hosted at your Center?
10. If your Center is guarded, have the guards been informed of the rights of women and their responsibilities in regards of the protection of single women and female heads of household? Describe the regulations the guards enforce.
11. Is your Center lighted at night? If yes, by what means? Are all parts of the Center lighted?
12. Where are the toilets located in relation to living quarters?
13. Do women have access to these at specific hours?
14. Is access to these safe for women, especially at night?
15. If there are leadership structures, are single women and female heads of household included in these?
16. Are there separate social structures led by women?
17. When there are tensions and conflict among those living at the Center, to what extent are security problems created for single and female heads of household?
18. Describe any other measures your Center employs to ensure the protection of single women and female heads of household.
19. Have single women and female heads of household reported, or have you noticed, any of the following security problems?
  - physical attack
  - rape
  - abduction
  - threats
  - sexual harassment
  - obligation to offer sexual services in return for receiving documents and/or other assistance
    - compulsory prostitution
    - compulsory sale of children
    - other
20. Please relate every example of the above by year and case (country of birth, country of residence, race, age, nationality, religion and or religious confession). Note as well the perpetrators.
21. Are there rumors of incidents, which have not been reported? Please relate by year and case (country of birth, country of residence, race, age, nationality, religion and or religious confession). Note as well who the perpetrators are rumored to be.
22. How is information relayed through rumor evaluated?
23. Who is responsible for dealing with such cases? Are single women and female heads of household aware of who is responsible?

24. What measures are taken to protect women from acts such as these?
25. Has your Center hosted specific groups of women whom you consider particularly vulnerable to prostitution? In your opinion, what is the reason?
26. Have there been single women and female heads of household who reported that they had been subjected to any of the following in the course of their escape?
- physical attack
  - rape
  - abduction
  - threats
  - sexual harassment
  - obligation to offer sexual services in return for receiving documents and/or other assistance
  - compulsory prostitution
  - compulsory sale of children
  - violence connected with the military and obligatory participation in military operations
  - other

Please provide details by year and case (country of birth, country of residence, race, age, nationality, religion and or religious confession)

27. Are the special health care needs (gynecological and other) of single women and female heads of household provided for? In what way?
28. Do they have access to counseling services? What are these, and how do such services work with the women?
29. Do single and female heads of household have an opportunity to receive instruction in matters of hygiene of (e.g., about nursing, family planning)?
30. How many women are currently employed at your Center in all services?
31. How many women are currently employed at your Center in its health care and counseling services?
32. What is the number of women seeking asylum currently being hosted at your Center?
33. Who has the responsibility (position) at your Center for taking the women's social histories?
34. Is instruction in Greek offered to women at your Center? By whom?
35. Has educational planning been carried out?
36. Do single women and female heads of household hosted at your Center have access to any of the following programs to ensure their ability to care for themselves and their families?
- a) secondary education
  - b) tertiary (university) education
  - c) vocational training
  - d) professional training

Specify the type of program, year, and provider of education/training.

37. Do girls have the same access as boys to educational programs? If not, what is the ratio of girls to boys?
38. How many of the single women and female heads of household you have hosted at your Center have declared they were illiterate? Please provide year and case (country of birth, country of residence, race, age, nationality, religion and or religious confession)

39. What educational and professional background was declared by the remaining single women and female heads of household you have hosted at your Center? Please provide year and case (country of birth, country of residence, race, age, nationality, religion and or religious confession)
40. Can women hosted at your Center who are seeking asylum participate on the same conditions as men seeking asylum in programs offered by international organizations and NGOs? Please provide year and case (country of birth, country of residence, race, age, nationality, religion and or religious confession).
41. Are women hosted at your Center who are seeking asylum informed of their rights according to international and national law? If yes, in what way?
42. Are men hosted at your Center who are seeking asylum informed of the rights of women and of their own responsibilities in cases where they commit an act of violence against the latter? If yes, in what way?
43. In cases where single women and female heads of household hosted at your Center worked, what type of services did they provide?
44. Have there been cases where single women and female heads of household sought assistance to deal with:
- psychological problems and problems with adjustment
  - serious psychological problems resulting from torture and/or sexual abuse

Please provide details by year and case (country of birth, country of residence, race, age, nationality, religion and or religious confession).

45. Have there been cases of single women and female heads of household who displayed:
- behavior associated with major depression
  - self-destructive behavior
  - violent behavior
  - dependency on alcohol or drugs

Please provide details by year and case (country of birth, country of residence, race, age, nationality, religion and or religious confession).

46. What are the three most common problems you encounter in relation to single women and female heads of household hosted at your Center?

A

B

C

47. Describe the daily and weekly program of activities for single women and female heads of household (if available, please attach programs, schedules, etc.)
48. Is it possible for women hosted at your Center to practice their religions? If yes, in what way?
49. Is there a women's group at your Center in the course of whose women meetings and social contact with one another are ensured? Do single women and female heads of household participate?
50. If not, what do you think are the reasons?
51. Are you aware if women who are hosted at your Center have contacts with other women who seek asylum as well and are residents of another reception center or are members of a community network/church?

## APPENDIX B

### UNHCR Interview Form

#### Notes and Topics to be covered by interviews/observations

The questions below give an idea of the kind of information that the researchers want to gain from the discussions. Discussion is unlikely to follow the order set out below. Not every question will be asked – it will depend on what the participant is interested in talking about. Many questions will be open ended (eg ‘Tell me about your school.’) to allow the participant to direct the conversation.

At the start of interviews, it will be reiterated that the participant does not have to answer any question if s/he does not want to. S/he can also stop the interview at any time if s/he feels tired or bored or for any reason, or take a break at any time.

### CHILD’S INTERVIEW SCHEDULE

#### Demographic data

Country of origin:

Country of residence:

Region:

City/village:

Sex:

Nationality:

Language & dialect:

Religion & confession:

#### Age and unaccompanied status

How old are you? How do you know your age? (also check school class, and observe physical development).

#### Arrival in Greece

When did you come to Greece (show it on the map and ask people to draw a plan of their itinerary).

How did you get here? (plane, boat etc). Did you know about Greece before? ( It is possible that they do not know much about Greece or that they are ‘in Greece’ so try to see how they perceive their external environment).

#### Experiences with immigration on arrival.

Did someone come with you on your journey to Greece? What happened to them?

What did you do when you got to the [airport/port etc] in Greece? Where did you spend your first night?

Did anyone at the airport/port talk to you or offer help to you?

#### Living situation

Who do you live with? [For participants who are over 18, questions will refer to their living situation as children].

How many different places have you lived from coming to Greece until coming ‘here’? [if more than one, then the following questions could be asked for each living situation]

How many different people have looked after you since coming ‘here’?

Do you share your room with anyone else?

Who looks after you? Are there any other children? Do their parents live here too?

How did you meet the person who looks after you? Did you know this person before you moved here?

How did you come to live here?

Have you tried to trace or reunite with members of your family?

Do the people you live with speak the same language as you? Can you understand them easily?

Do people in the reception centre practice any religion? If so, do they practice your religion? If they practice different religions, does this cause any problems?

Do you go to work, or do chores in the reception centre? What do you do? Are you expected to give money to anyone in the reception centre?

Are you ever punished and if so, how and for what?

Does you feel safe in the reception centre? If not, why?  
Are there any problems in the reception centre? If so, what?  
Do you have friends at your age? Where do they live? Who do you feel close to?  
When you are having any problem in life of any kind, who do you go to talk to?

#### Health/Hygiene/Nutrition

What do you eat on an average day? How many times do you eat?  
Do you feel hungry – more than just when your stomach is empty because its time to eat? How often?  
How often do you get sick? What kind of sicknesses you do get?  
Have you ever been to the doctor or dentist in Greece? What was done? Tell us about the visit(s). Who paid?  
Do you have access to soap, feminine products (if applicable), toothbrush/paste?  
How often do you take a shower/bath? Is there hot water in winter?  
How cold does your 'living space' get in the winter?  
Do you have shoes and clothing that fit properly? Do you have warm clothes for winter (jacket/sweater etc)  
Are you able to wash your clothes as often as you think is needed?  
What do you do for fun? What sports do you like playing? Are you able to play it 'here'? What kind of games do you like playing? Is there room in the house for that?

#### Education

Do you go to school? What is the school like? How long have you been in school? [If not in school] Why do you think you don't go to school?  
Do you get any food/water during the school day?  
Where is the school? How do you get to and from school?  
What do you learn at school?  
Does the school teach any religion? Is it the same as your religion? Does the school ask students to pray? If they practice a different religion, does this cause any problems for you?  
Are you in a class with children of your age? Are there any other students from your country there?  
What do you think about your teachers, and the other pupils?  
How do you get on with the Greek children? Do they ever talk about the fact that you are not? What kinds of things do they say? What about the teachers?  
Have you ever had any other problems with other students or teachers? Do the other foreign/refugee kids have problems?  
Do you participate in any housework (cleaning, washing) in the reception centre?

#### Security

Do you have a pink card? (Ask the social worker if the child does not know).  
How often do you leave your premises on a daily/weekly basis. Where do you normally go? Describe a typical day.  
Do you travel around Athens (the place he/she leaves) easily? Do you feel safe?  
Have you ever talked to a police man? What about? How did they act towards you?  
Have policemen in uniform, or other men ever stopped you on the street to ask for your i/d card, or asked you questions about where you are from or what you are doing here? If so what happened. Has this happened to anyone you live with?  
Have police men or other men ever come to your house to ask questions?  
Have you ever been made to wait somewhere by a police man, or someone else.  
Have you ever been taken to a police station. How long did you stay there? Has anyone you live with been taken to a police station? What happened?

Try to find out if the child had to face major\* problems in the past.

#### **If participant has been detained**

Place of detention:

Duration of detention:

How were you treated?

Did anyone talk to you or offer help you?



- Ask the questions mentioned before concerning the living conditions and the health/hygiene/nutrition.
- Try to find out if the children have been abused psychologically or physically.

### **Topics for all participants**

I will give you this piece of paper and some crayons. Would you like to draw me your family? You can use any colour you prefer. You are free to use the whole piece of paper.

---

Very good work! Thank you. Now I would like you to draw me the house you used to live in at home. You can draw it as you remember it. It is ok if you do not remember every detail.

---

I wonder how was your travel from your country to Greece. Can you help me understand this?

\*By major problem we mean physical assault, rape, abduction, threats, sexual harassment, obligation to offer sexual satisfaction as an exchange for the provision of money/help, being victims of trafficking etc

## **WOMEN'S INTERVIEW SCHEDULE**

### **Demographic data**

Country of origin:  
 Country of residence:  
 Region:  
 City/village:  
 Sex:  
 Age:  
 Nationality:  
 Language & dialect:  
 Religion & confession:  
 Education:  
 Work:  
 Transfer of the capacity in Greece:

### Arrival in Greece

When did you come to Greece (show it on the map and ask people to draw a plan of their itinerary). How did you get here? (plane, boat etc). Did you face any major\* problem during your journey to Greece? How did you cope with it? Did you know about Greece before? (It is possible that they do not know much about Greece or that they are 'in Greece' so try to see how they perceive their external environment).

### Experiences with immigration on arrival.

Did someone come with you on your journey to Greece? What happened to them?  
 What did you do when you got to the [airport/port etc] in Greece? Where did you spend your first night?  
 Did anyone at the airport/port talk to you or offer help to you?

### Living situation

How many children do you have?  
 How many different places have you lived from coming to Greece until coming 'here'? [if more than one, then the following questions could be asked for each living situation]  
 How many people do you live in your current setting? In how many rooms?  
 Do you have friends? Where do they live? Who do you feel close to?  
 When you are having any problem in life of any kind, who do you go to talk to?  
 Do you take part in the planning and the action taken for the protection and assistance provided by the reception centre?  
 Have you tried to trace or reunite with members of your family?  
 Do you relate to the other women who live in the reception centre? (If there is a women's group) Do you take part in the meetings of the women's group? (If not) Why do you think you do not go to these

meetings?

Do you relate with other women from other reception centres through a non-governmental organisation? (If yes) How? Which is the non-governmental organisation? What is your opinion of this non-governmental organisation?

Have you met any other non-governmental organisation? Which one? What is your opinion of this non-governmental organisation?

#### Health/Hygiene/Nutrition

[if there are children, then the following questions could be asked for the children as well]

What do you eat on an average day? How many times do you eat?

Do you feel hungry – more than just when your stomach is empty because its time to eat? How often?

How often do you get sick? What kind of sicknesses you do get?

Have you ever been to the doctor or dentist in Greece? What was done? Tell us about the visit(s). Who paid?

Is anyone in the household ill?

Do you have access to soap, feminine products (if applicable), toothbrush/paste?

How often do you take a shower/bath? Is there hot water in winter? (ask for the children as well)

How cold does your 'living space' get in the winter?

Do you have shoes and clothing that fit properly? Do you have warm clothes for winter (jacket/sweater etc)

Are you able to wash your clothes as often as you think is needed?

What do your children do for fun? What sports do they like playing? Are they able to play it 'here'? What kind of games do they like playing? Is there room in the house for that?

#### Education

Do you follow any course? (vocational training, language, empowerment, family planning, university) [If not] Why do you think you don't follow any course? Where do you follow the course? How do you get to and from this place?

What do you learn?

Are you in a class with women of your nationality? What do you think about your teachers, and the other women?

How do you get on with the Greek people? Do they ever talk about the fact that you are not Greek? What kinds of things do they say? What about the teachers?

Have you ever had any other problems with other women students or teachers? Do the other foreign/refugee women have problems?

Do you participate in any housework (cleaning, washing) in the reception centre?

Do you work? What kind of work do you do? Do you get a salary?

Have you ever been informed about projects in which you could participate? Who has informed you on that? What did you do?

Do you know what your rights are according to the Greek and international law? Who has informed you on that?

Do you exercise your religion? In what way?

#### Security

Do you have a pink card?

(If they are divorced) Have you separate documents from your husband?

Do you feel safe in the reception centre? If not, why?

Are there any problems in the reception centre? If so, what?

Have you faced any major\* problems in the reception centre? What did you do?

How often do you leave your premises on a daily/weekly basis. Where do you normally go? Describe a typical day.

Do you travel around Athens (the place he/she leaves) easily? Do you feel safe?

Have you ever talked to a police man,? What about? How did they act towards you?

Have policemen in uniform, or other men ever stopped you on the street to ask for your i/d card, or asked you questions about where you are from or what you are doing here? If so what happened. Has this happened to anyone you live with?

Have police men or other men ever come to your house to ask questions?

Have you ever been made to wait somewhere by a police man, or someone else.

Have you ever been taken to a police station. How long did you stay there? Has anyone you live with been taken to a police station? What happened?

**If participant has been detained**

Place of detention:

Duration of detention:

How were you treated?

Did anyone talk to you or offer help you?

- Ask the questions mentioned before concerning the living conditions and the health/hygiene/nutrition.
- Try to find out if the women have been abused psychologically or physically.

\*By major problem we mean physical assault, rape, abduction, threats, sexual harassment, obligation to offer sexual satisfaction as an exchange for the provision of money/help, being victims of trafficking etc