

Emergency appeal №: MDR65003 ¹ First launched on: 13 March 2020	Glide №: CE-2020-000036-GRC
Final report issued on: 31/01/2023	Timeframe covered by final report: From 13 March 2020 to 30 September 2022
Number of people targeted: 73,000	Number of people assisted: 270,886
Funding coverage: CHF 7.4 million (Greece CHF 7.0 million; Turkey CHF 0.4 million; for further details, please see here .	DREF amount initially allocated: 500,000 Swiss francs (fully reimbursed)



Hellenic Red Cross Mobile Health Team at Lesvos / Kara Tepe II Migrants Site - Photo Credit: IFRC Greece

¹ The name of the operation has been revised through the revision no.03 from "Turkey-Greece and other countries: Population Movement" to "Greece: Population Movement".

While the MDR65003 appeal was initially tied to activities in Turkey and Greece, the Turkey components were completed prior to the 18-month Operations Update, and the operation name was revised to the *Greece Population Movement*. As such, the [18-month Operations Update](#) serves as the final report for the operations in Turkey and this final report follows only those activities conducted in Greece.

Red Cross Red Crescent Movement partners involved in the operation: IFRC, ICRC, Austrian Red Cross, British Red Cross, Canadian Red Cross, Danish Red Cross, Finnish Red Cross, German Red Cross, Iraqi Red Crescent, Italian Red Cross, Japanese Red Cross, Monaco Red Cross, Netherlands Red Cross, Norwegian Red Cross, Spanish Red Cross, Swedish Red Cross, Swiss Red Cross.

Other partner organizations actively involved in the operation:

UNHCR, IOM, UNICEF, WHO, AFAD, International Rescue Committee, Watershed, Starfish Foundation, Refugee 4 Refugees, Remar, EuroRelief, Swiss Humanitarian Aid SHA.

Other donors to this operation:

An updated list with details of all donor contributions to this EA can be found [here](#).

In addition to the National Societies referred to above, the HRC and IFRC remain very grateful for the support of the Regional Governments of Austria (Governments of Burgenland, Lower Austria, Upper Austria, Styria, Tyrol, Vorarlberg – via Austrian RC), the Netherlands Government (via the Netherlands RC), the Swiss Government (Swiss Development Agency and the State Secretariat for Migration), as well as to corporates (Siemens AG and Volkswagen Group – via German RC) and other private and online donors.

Summary of the Greece Population Movement EA Response

March 2020 – September 2022



The International Red Cross and Red Crescent Movement has a longstanding commitment to reduce vulnerabilities and enhance the resilience of migrants and displaced people. These commitments are contained in various Resolutions and Policies of the Movement, including the IFRC Policy on Migration (2009) and the Movement Policy on Internal Displacement (2009). In Greece, the IFRC Country Office continued to support the Hellenic Red Cross in their response to the migration crisis since 2015, through multiple large-scale response operations, including the Population Movement Emergency Appeal. The operation launched on 13 March 2020 to enable IFRC to support the Hellenic Red Cross and the Turkish Red Crescent to support the response activities and meet the humanitarian needs of the most vulnerable refugees, asylum seekers and migrants, as well as the host community. The operation has been supported by multiple Movement partners in the form of technical, financial, and in-kind support. With the generous support of our donors and Partner National Societies (PNS), the Hellenic Red Cross has been operating in various migration centres both on the mainland and on the islands as well as on urban settings since the operation began in March 2020.

Beyond this operation, the Movement cooperation in Greece is well-established with regular meetings between HRC, ICRC and IFRC at strategic, operational, and technical levels. Since 2020, IFRC has worked on strengthening the cooperation with other Partner National Societies (PNS), interested in migration.

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270,886
people
reached



5,500+
HRC staff and
active volunteers

This number is showing staff and active volunteers engaged across Greece



12
non - RCRC partner
organization involved



17
RCRC partners contributed

SITUATION ANALYSIS

Description of the crisis

Over the past decade, Greece has faced continuous pressure on its national asylum and reception systems because of its geographic proximity to key migratory routes. However, this pressure peaked in 2015-16, with the large-scale arrivals of migrants and refugees from Syria and the broader Middle East and North Africa region.

In March 2016, the EU-Turkey Statement was agreed, which stipulated that people crossing irregularly to the Greek islands from Turkey, would be returned. However, four years after the signing of the EU-Turkey Statement², Turkey stopped accepting returns from Greece³. This means that for the past two years people deemed “inadmissible” have been stranded in Greece in a situation of legal limbo⁴: they have no access to asylum or documents indicating their legal status, and no right to housing, cash assistance, work, or catering services in the migrant sites where many reside.

² <https://www.consilium.europa.eu/en/press/press-releases/2016/03/18/eu-turkey-statement/>

³ <https://reliefweb.int/report/greece/greece-deems-turkey-safe-refugees-are-not-substantive-examination-asylum-applications>

⁴ https://asylumineurope.org/reports/country/greece/asylum-procedure/the-safe-country-concepts/safe-third-country/#_ftn14

While the EU-Turkey Statement has been used as a tool for migration management, in reality, it has contributed to new humanitarian challenges while many pre-existing needs have also remained unmet. As a result of the combination of different migration policy choices, migration arrivals have drastically reduced to Greece in recent years.

Greece faces plenty of humanitarian challenges, ranging from environmental crises and the COVID-19 pandemic, as well as a decade-long economic crisis that has resulted in austerity measures that had a negative impact on the provision of social services, including primary health care, which are still felt today. The impacts of these challenges are compounded when intersecting with the vast numbers of migrants and refugees living and transiting through the country.

People reached through Greece | Population Movement Operation



Health

61,699
People reached

Water, sanitation and hygiene

14,836
People reached*

* Supported and led by German Red Cross

Shelter

1,440
People reached

Multi-purpose Cash

636
People reached*

* People reached with Cash support

Health Services

- 10,630** People vaccinated
- 61,361** Visits to Health services
- 16,509** Participants in the Health/Hygiene promotion sessions
- 19,887** Beneficiaries assisted with medical interpretation services through Accompaniment Referral Programme

Multi-Functional Centres (MFC) in Athens and Thessaloniki

94,827
Number of people assisted with Protection, Gender and Inclusion (PGI) services

Male > 18	45,867
Female > 18	43,351
Male < 18	2,811
Female < 18	2,798

Restoring Family Links (RFL)

895
Requests received

MFC Hotline

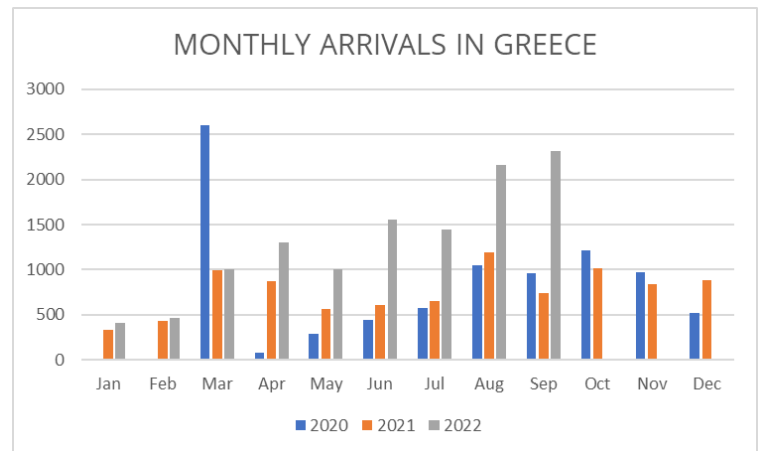
168,721
Calls received

5 Unaccompanied Minors Centres

872
Total number of minors assisted

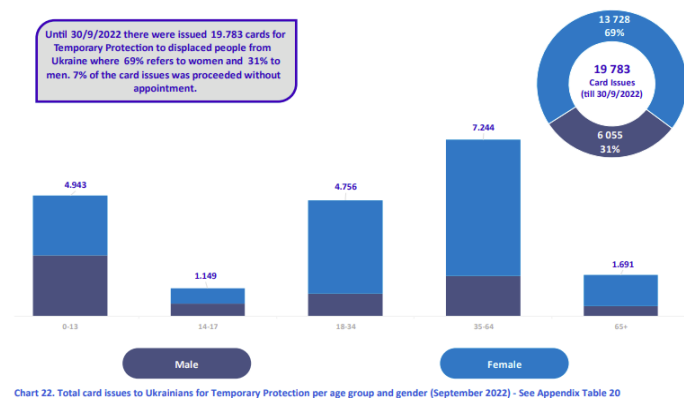
Migration context in country

After a spike of arrivals before the start of this appeal in 2020, the number of migrants seeking asylum in Greece significantly reduced, both in the mainland as well as the Aegean islands. According to the Ministry of Migration and Asylum (MoMA), the total number of residents in official migrant-hosting centres decreased by 54% in September 2022 compared to the corresponding month in 2021.⁵ Similarly, a 14% decrease in migrant population was noted in the Aegean islands during the same period.⁶ However, a slight increase in the total numbers of sea and land arrivals has been noted until November 2022.⁷



This trend can be explained by a combination of policies driven by both Greece and the broader European Union significantly curtailing access to asylum in Greece, alleged push backs, increase of returns, deportations, relocations, and transfers, as well as the acceleration of the asylum procedures, and a reduction of pending cases, which has led to a significant decongestion of the Aegean islands and site population on the mainland.

While the country's migration management strategies have resulted in fewer arrivals of migrants and refugees, Greece still experiences significant humanitarian challenges, with persistent unmet needs and gaps in services. In some cases, the vulnerabilities of migrants and refugees in Greece increased due to various factors such as COVID-19 and National migration policy, despite improvements in overall capacity to receive new arrivals due to decreasing demand in absolute numbers.



Total card issued to Ukrainians for Temporary Protection per age, group, and gender (September 2022)

In parallel, Greece has seen a new wave of arrivals from Ukraine, fleeing the conflict with a different legal status in Greece and different needs. According to the data published by the Greek Ministry of Civil Protection on people arriving from Ukraine, in total, since the beginning of the war in Ukraine, 75,942 Ukrainian nationals had crossed the border into Greece, of which 19,760 were minors⁸. By October 2022, 21,039 applications were filed online, and 19,783 temporary protection permits issued, according to the same MoMA report in September 2022. The differentiation in legal status and need profiles between migrant communities has added an additional layer of complexity in the humanitarian sector's response.

While it is evident that migration will be a permanent and long-term feature of the Greek social and humanitarian landscape, current policies, both in Greece and at the European Union level, are restricting rights, limiting access to asylum, and are ultimately driving a decrease in overall numbers and an increase in the vulnerability of migrants in

⁵ https://migration.gov.gr/wp-content/uploads/2022/10/Report_A_September-2022_International-Protection-1.pdf

⁶ *Ibidem*.

⁷ <https://data.unhcr.org/en/situations/mediterranean/location/5179>

⁸ Report by Ministry of Civil Protection on people arriving to Greece from Ukraine (8th August 2022) <https://www.minocp.gov.gr/2022/08/08/08-08-2022-anakoinosi-ypourgeiou-prostasias-tou-politi-schetika-me-arithmo-prosfygon-oukranias-pou-perasan-stin-ellada-to-teleftaio-24oro/>

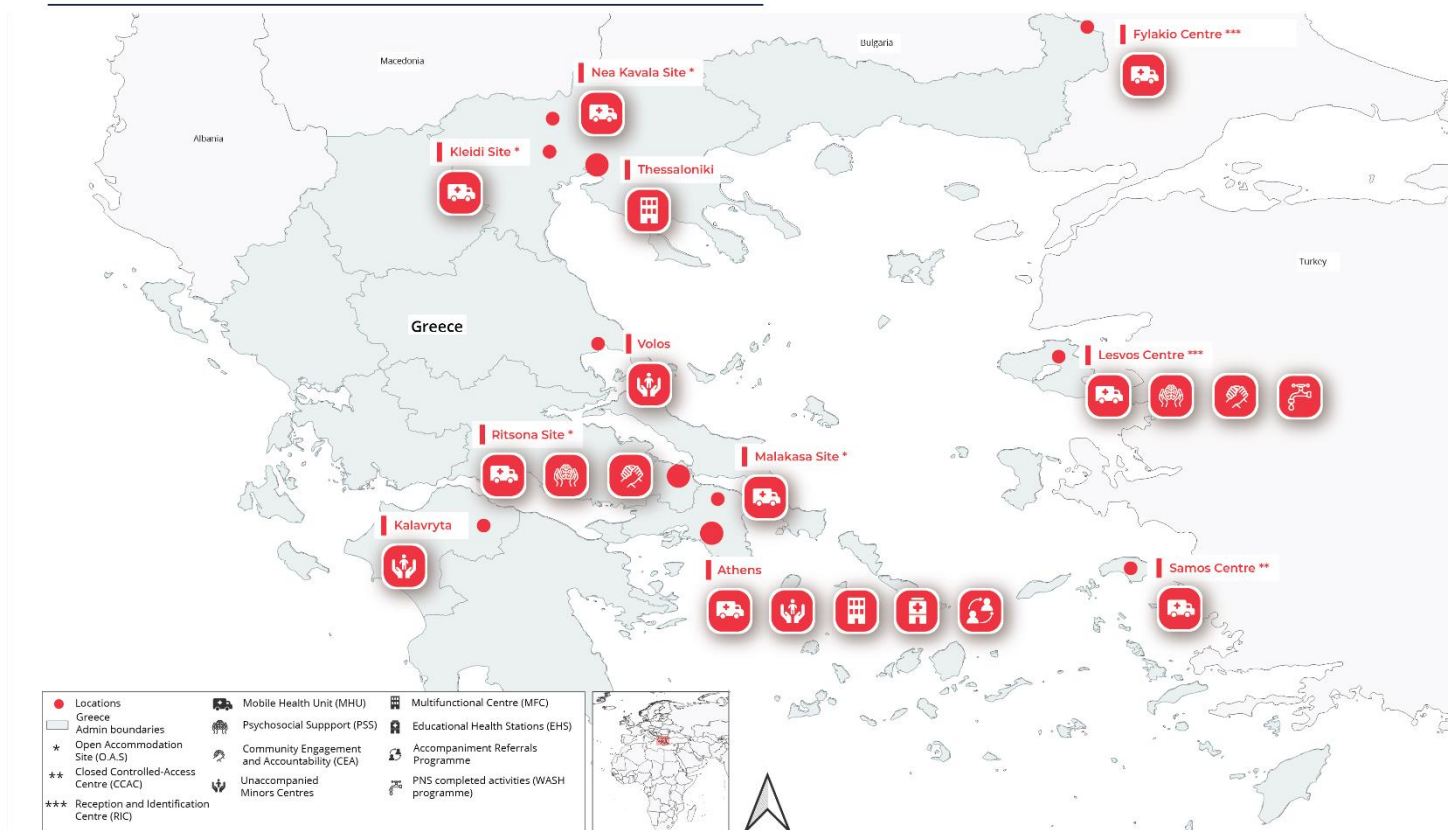
Greece. With refugee and migration policy now squarely driven by the Greek authorities, policy choices can and will determine if needs and rights of migrants in Greece are met.

Summary of response

Overview of the host National Society and ongoing response

Established in 1877, Hellenic Red Cross (HRC) is the largest humanitarian organization in Greece, with 86 branches throughout the country, with 556 staff (including 404 core staff and 152 short-term staff in programmes) and more than 5000 active volunteers. It has a wide range of activities in the areas of health, social care, migration, search and rescue, disaster preparedness and response, restoring family links, first aid and volunteer training. In March 2020, the HRC formally adopted its Strategy 2020-2025 which sets out objectives and priorities for the next period. It focuses on humanitarian work across programme areas such as primary health care, social care, migration, crisis & disaster management, protection, and community engagement and accountability, as well as organizational development including structural reorganization, operational strengthening, capacity building and financial sustainability.

Services provided by Hellenic Red Cross Greece | Population Movement



The maps used do not imply the expression of any opinion on the part of the International Federation of Red Cross and Red Crescent Societies or National Societies concerning the legal status of a territory or of its authorities.
 Last updated: 12/19/2022
 Data sources: OCHA FISS, Humanitarian Data Exchange, Hellenic Red Cross, IFRC.
 Produced by Information Management team - IFRC Europe.

The HRC has been operating **Mobile Health Teams (MHT)** in various migration centres both on the mainland and on the islands since March 2020, running three **Educational Health stations (EHS)** in Athens area, five **Accommodation Centres for Unaccompanied Minors** and the **Accompanied Referrals Programme (ACCREF)** as a health component as well as two **Multifunctional Centres (MFC)** in Athens and Thessaloniki.

At the beginning of the Population Movement operation, the HRC set up three **MHTs** at Fylakio Centre, near the Kastanies border in Evros, to provide first aid and health-related services during the initial phase of the operation in March 2020. During the 30 months of this operation, HRC's MHT was present at different migrants' sites around

mainland Greece and the islands providing general medical services and adequate medicines on a daily basis to all vulnerable refugees and migrants.

The MHT services include a clinic with a general practitioner and nurses, a nursing station for the triage and monitoring of chronic patients, a paediatric clinic staffed with a paediatrician and nurses, a gynaecology clinic and in some locations, it ran a dental clinic. The medical teams are supported by interpreters in key languages including Arabic, Farsi and French. Clear protocols have been established with the Ministry of Health for the referral of more serious or urgent cases to public hospitals and health care services.



Mobile Health Team in Ritsona Migrants Site - Photo Credit: IFRC

In the first quarter of 2020, HRC extended its existing core migration services to cope with the increased demand from new arrivals and transfers from the islands to the mainland. The **Educational Health Stations (EHS)** in Ambelokipoi and Kallithea, and the **Multifunctional Centres (MFC)** in Athens and Thessaloniki and the ACCREF programme were thus complemented by Mobile Health Teams.

The MFCs are Humanitarian Service Points (HSP) with a goal to support migrants and refugees to feel safe, connected, informed, and to facilitate their integration into Greek society. It takes into consideration the aspect of gender balance and diversity composition of staff and volunteers to support migrants in coping with their current situation. This includes obtaining the necessary registration and documentation for migrants in order to be eligible for employment, have access to social services, education and medical care in Greece. The MFCs adopts a holistic approach aiming to build resilience and empower migrants to regain autonomy in their everyday life, create new networks with those in similar situations, providing them with a sense of belonging to a community, which may

otherwise be difficult to achieve in an urban setting. The MFC's additionally arrange learning and recreational activities that help migrants to feel confident and capable in integrating into a new society. The MFCs provide a centrally located and accessible entry point to Red Cross services for migrant communities; these include orientation sessions, help desk, social and protection case management services, support in restoring family links, accompaniment in accessing public services, multi-cultural dialogue and exchange, and language training. It also provides up-to-date information, guidance, support and advice for the asylum procedure, acquiring residence permit, legal issues and more, in commonly spoken languages among migrants in Greece.

The philosophy of a multi-functional social centre targeting refugees and migrants has existed for more than 20 years, with MFC Athens functioning since 1997. The MFC in Thessaloniki was established as an aftermath of the "refugee crisis" of 2015 and has been operational since the end of November 2017. Both Centres support longer-term integration efforts ensuring that people of all ages access and benefit from the MFC activities and contribute to maintenance and promotion of dignity of everyone of all ages including protection, there is also a great emphasis on psychosocial well-being, ensuring that specific cultural needs are met. MFCs activities include:

- 1) **Social Services** providing information in an individual or group support settings as well as making referrals, and case management for people at risk, through a network of protection and social support services. Through its holistic approach, the service evaluates and supports cases with material provisions, housing, health, education, psychosocial and protection issues. The case management is developed in collaboration with the beneficiary by setting together the intervention plan and goals.
- 2) **Legal Services** provide information and mediation on the various stages of the asylum procedures, the rights and obligations of refugees and migrants in Greece, the family reunification process (Dublin III), documentation for public services, etc. The aim of the Service is to facilitate the procedures for the beneficiaries and to help them make their own decisions about their lives. Depending on the case, referrals can be made to organizations that undertake legal representation.
- 3) **The Hotline** team makes the first contact with the beneficiaries; therefore, providing most of the information needed about the MHC's services and other related programmes. Moreover, the hotline staff refers people to other NGOs or public services with the guidance of the Social and Legal Services of the MFC. The Hotline handles the first reception and registration of the applications in collaboration with specialized volunteers. There was an increase in demand of the tele-translations, offering interpretation services as usual to Red Cross services, hospitals and other public services and NGOs, either by appointment or on the spot interpretation if less than 20 minutes.
- 4) **The Employability Programme** which consists of two pillars:
Employers Project: Providing information, raising awareness, and networking with employers, employment agencies, unions, associations, chambers, and services with respective programmes (usually NGOs), interconnect the beneficiaries with job opportunities and vocational training programmes
Beneficiaries Project: providing job counselling to beneficiaries including training activities that aim at boosting the beneficiaries' vocational and social skills to achieve social inclusion and encourage autonomy in a smooth, efficient, and solid way. The vocational training programme includes CV, cover letter, job application writing skills, job interview preparation as well as preparing beneficiaries in accessing Greek labour market
- 5) **Language courses** in Greek and English are implemented, in beginners, intermediate and advanced levels. Additionally, there are supportive courses for English and Greek for school students. Majority of students would like to find a job or attend school in Greece. Priority is given to beneficiaries who consider attending classes to find a job, continue their studies in Greece, or for people who want to start learning a new language with the aim to settle in the European Union.

- 6) **Psychosocial Support (PSS) activities for adults:** The purpose is to support an individual through their creative engagement with the workshop object, the acquisition of skills on those, socialization and ultimately the development of their resilience. Activates are supported by the Centre's team of interpreters, whenever needed.
- 7) **Social Inclusion activities for Children and Teens**, which includes:
- Kindergarten: all activities aimed to prepare refugee children to easily adapt into the Greek public educational system, and the society while learning and practicing a new language.
 - Greek Lessons: offered to children whose access to public educational system is pending
 - Youth Club: is a project of the MFC focusing on the preparation for social inclusion of migrant youth by giving them a sense of belonging. The concept of the club is based on "Identity" and how that is shaped and formed by the youth in their specific situation. It covers subjects such as Gender, Race, Multiculturalism, Migration, Interpersonal Relations, Friendship, and more. It follows a non-formal educational method, mixed with the use of art, outdoor spaces and educational excursions.



*HRC Unaccompanied Minors Shelter – Athens
Photo Credit: IFRC Greece*

Apart from the MFCs, the HRC also runs five **Accommodation Centres for UAMs**, three in Athens, one in Volos and one in Kalavryta with an average capacity of 30 unaccompanied minors per centre (total capacity 154 spaces). In September 2022 the HRC hosted 169 boys aged between 15 to 18 years old. The centres provide accommodation, catering, personal hygiene items, clothing and footwear, as well as access to health and education services, psychosocial support, counselling and legal assistance, remedial teaching, Greek language lessons, and interpretation.

And lastly, the **Accompanied Referrals Programme (ACCREF)**, provides a team of cultural mediators trained on the structure and procedures of the Greek public health system, health terminology, interpretation, and cultural mediation skills. They support refugees and migrants by accompanying them to their medical appointments, guiding them through the relevant processes, reducing language barriers and building self-confidence and independence. The staff are also trained in the detection of protection cases. The ACCREF Service of the Health Division also adapted its operation to the new needs of the pandemic with the provision of telephone follow-up interpretation to the hospitalized refugees and migrants, if and when requested.



HRC Accompanied Referrals Programme (ACCREF) – Athens - Photo Credit: IFRC Greece

ACCREF receives requests from other HRC Health Services, NGO's and Ministry of Health departments (secondary & primary health care units). Languages that were covered during the operation were Farsi/Dari, Arabic, French and Kurmanji. In addition to the operational component, ACCREF also offers an educational component with 2 training programmes:

1. Cultural Mediation and Interpreting Services - addressed to people who want to become interpreters / cultural mediators. The aim of the programme is to train interpreters in Cultural Mediation, acquiring knowledge and developing skills of successful accompaniment of refugees and migrants in public services, with particular emphasis on health sector.

2. Professional Management of Diversity - addressed to health professionals (doctors, nurses, social workers, psychologists, etc.) and to all professionals in hospitals who encounter refugees or migrants. The aim is to promote intercultural competences among members of the staff of health care institutions. Therefore, to overcome cultural barriers, recognizing social diversity and promoting equality in the Public Health System.

The accompanying service is offered exclusively with physical presence both in primary health care units and in secondary health care units in the Public Hospitals of Athens. There is also the possibility of follow-up telephone interpretation, in case of need.



HRC MHT at Nea Kavala - Photo Credit: IFRC Greece

The last of the 3 core services, the HRC is running in total three **Educational Health Stations (EHS)** in Athens area, two of them located at Ambelokipoi & Kallithea were operating under the current appeal. EHSs are primary health care centres that aim to reduce inequalities in health, ensuring access to primary health care by the vulnerable members of the community within the urban area of Attica, such as refugees and migrants, including unaccompanied minors and migrants without social security number (such as AMKA or PSSHCN - Provisional Social Security and Health Care Number - giving full access to an individual to the public health system), as well as Greeks who are unemployed or with low income (such as pensioners and people living on social benefits). Their services include routine vaccinations, medical consultations with a GP, paediatrician, gynaecologist and dentist, nursing consultations, mother and childcare (covering also maternity care, pregnancy monitoring, child development monitoring), provision of medicines, referrals to medical specialists and facilitation of access to health care units. Moreover, educational activities are held daily that include training mothers on how to care for their infants and babies, training women how to perform self-examination for breast cancer and a variety of interactive sessions on health and hygiene promotion issues to children, women and men. The educational activities were adapted to the COVID-19 context, so included sessions on personal protection measures, recognition of COVID-19 symptoms, COVID-19 vaccination awareness and protocols to access health services. In addition, different delivery modalities were used based on the national health authorities' respective guidelines, like holding sessions only for family members or very small groups taking all necessary precaution measures and ensuring time for disinfection between appointments. EHS also provides information to migrants and refugees on the health system in Greece, as well as on the available health resources in the urban area of Attica. Cultural mediators facilitate communication with migrants and refugees in their mother language during all service delivery interactions (medical, educational, informative).

ACCREF as well as MFCs implemented COVID-19 related topics in the information they provided (e.g. the precaution measures and the protocols in accessing public services, where to have rapid diagnostic tests and how to get vaccinated, etc). Similarly, they adapted their service delivery to respective national protocols, so they employed different modalities such as e-learning, e-tutoring, e-training and Hotline service.

Overview of Red Cross Red Crescent Movement in Country

The **IFRC Country Office in Greece** has supported the HRC in the implementation of this emergency operation since it was launched in 2020. The office was established in response to the 2015 migration crisis, as part of a large-scale response operation. In addition, it has contributed to the capacity building and organisational development of the HRC as part of their comprehensive organisational recovery plan, in close collaboration with Red Cross Red Crescent Movement partners involved in Greece. Prior to August/September 2021, IFRC office had 40 staff in total, consisting of 37 national staff, 2 International and 1 staff on loan who provided remote technical and management support to the Cash Transfer Programme (CTP) in North Greece. As the CTP came to an end at the end of September 2021, the IFRC office has had 10 staff in total consisting of 8 national and 2 international.

German Red Cross (GRC) mobilised a WASH team and a relief delegate to support the response operations following the Moria migration site fire in September 2020. In March 2021, most of the WASH GRC team left Lesbos, with one delegate remaining to conclude some construction works and to finalize the ongoing shelter operation. At the same time the GRC contributed to the majority of the programmes and services included under this appeal in 2021. All activities were closely coordinated with the HRC and IFRC and carried out as integral part of the wider Population Movement Emergency Appeal for Greece. German Red Cross ended its operation in Greece at the end of 2021.

The Movement cooperation in Greece is well-established, with bi-weekly meetings between HRC, ICRC and IFRC at strategic and operational level, and very regular cooperation at the technical level. There is also close technical cooperation during disasters and crises, ensuring complementarity and avoiding any duplication of efforts. Since 2020, IFRC has worked on strengthening the cooperation with other Partner National Society (PNS), interested in thematic areas such as Migration, via a Migration Working Group, that was established and functional since the beginning of 2022.

Overview of non-RCRC actors in country

In its auxiliary role, the HRC works closely with government agencies and local authorities, and during 2021, it has signed MoUs with several line Ministries, the Municipality of Athens and other public entities. The auxiliary role of the National Society has been strengthened both in response to the pandemic, as well as in response to a number of natural disasters, such as the 2021 Wildfires and the Crete Earthquake. The National Society participated in a large-scale preparedness simulation linked to a large-scale refugee arrival on Samos Island in October 2021, further reinforcing the National Society's critical auxiliary role in the migration field. During 2021, HRC and the IFRC have worked with other humanitarian agencies such as IOM and UNHCR, especially in the area of migration, and is planning to strengthen its collaboration with WHO and UNICEF in the year ahead.

At country level, all migration services provided by the HRC are closely coordinated with the Greek authorities at national and local level, and MHTs are deployed to migrant centres at the explicit request of MoMA. Throughout this programme, IFRC and HRC have strengthened the collaboration with the MoMA, as well as with the DEYAL (Water Authority of Lesbos), and the municipality of Mytilene, improving the RCRC image towards the governmental authorities, supporting the needs and strengthening the auxiliary role. And at the operational level, activities in most sites are closely coordinated with IOM, which is supporting the Greek authorities in providing site management support with several partner organizations.

In addition, formal and informal sector coordination meetings are organised with the support of major humanitarian actors active in each sector. HRC is also an active participant in several coordination mechanisms and networks that function on a national or regional basis, such as the national Protection Working Group, the Communication with Communities Working Group, the Child Protection sub-Working Group as well as in local coordination working groups that take place in the sites where HRC is operational.

In addition, there has been a close cooperation with UNHCR, especially in the framework of the cash programme across all sites in Northern Greece and urban Thessaloniki that ended on 30 September 2021, and which has allowed IFRC to strengthen the coordination mechanism with other humanitarian organisations working with refugees, asylum seekers and migrants including the Catholic Relief Services (CRS), METAdrasi, the Danish Refugee Council (DRC), the International Rescue Committee (IRC) and UNICEF among others.

Operational risk assessment

Identified Risks during the operation	Probability	Mitigation Measures
Big Influx of Ukrainian migrants into Greece due to the historical and cultural ties between Greece and Ukraine	High	Dialogue with Government authorities and key line ministries, and other actors in Greece has been ensured throughout the operation timeframe. Eventually, the influx was manageable and didn't put enormous pressure on the authorities or NS
The spread of the different variants of COVID-19 pandemic, resulted in further curbed movement of people by authorities	Medium	HRC conducted risk communication and community engagement measures and distributed protective equipment and essential supplies to vulnerable groups. HRC continued to monitor and adjust its operations to address emerging needs till the very end of the appeal.
The need for medical staff in the field and the difficulties in recruitment due to the forced recruitments ordered by the Ministry of Health in the fight of the pandemic COVID-19	High	The HRC covered the gaps in general doctors with other specialties who apart from their duties functioned as general doctors as well, i.e. paediatricians
The need for the HRC to support the National COVID-19 Vaccination Programme with specialized nurses after a request by the Ministry of Health	High	The HRC managed to reallocate resources from the field positions to the national vaccination centers, reorganising the field teams and bringing more short-term staff to cover the MHT needs limiting at the same time the gaps.
Increase of irregular migration, particularly from Afghanistan and its neighbouring countries	Medium	Prepared for new arrivals through proper contingency planning with local actors in Greece. Increasing the focus on PGI across all efforts.
Rise in community tensions, violence and increased security risks.	Medium	Scale up CEA activities and information & awareness sessions with migrant and host communities. Cash activities for host communities and establishment of Humanitarian Service Points. PGI activities are scaled up and tailored to those most at risk of the increased violence.

A. OPERATIONAL STRATEGY

Implemented strategy

In Greece, the following focus areas guided the operational response to address the ongoing needs of the most vulnerable refugees, asylum seekers and migrants in Greece islands and mainland:

1. Ensured the continuation of migrants' support activities funded by the EA since 2020 in 6 sites: Kara Tepe II Centre in Lesvos Island, Ritsona, Nea Malakasa, Korinthos, Kleidi and Nea Kavala Sites in the mainland.
2. Ensured the continuation of the MFCs in Athens and Thessaloniki, 2 Educational Health Stations (EHSs) in Athens (Ambelokipoi and Kallithea) and the Accompanied Referrals Programme (ACCREF).
3. Ensured the support of 5 HRC Unaccompanied Minors Centres in Athens, Volos and Kalavryta,
4. Ensured the continuation of the provision of health services through MHT: in migrant sites in mainland Greece and in the islands as well as in the urban setting in Attica region.
5. Allowed to develop a comprehensive programmatic and resourcing strategy to address the protracted nature of the situation.
6. Enabled analysis, contingency planning and prepositioning of relief items to anticipate a humanitarian response in relation to the deteriorating humanitarian situation in Afghanistan and recently in Ukraine.
7. Supported the livelihoods of the low-income households of the host community in Lesvos Island to cover their basic needs through multipurpose cash grants
8. Ensured the continuation of the provision of PSS services through the operation of PSS Units in Lesvos/Kara Tepe II Centre as well as in Ritsona Site.
9. Ensured the continuity and strengthening of the range of different key services on PGI and CEA provided in all operational sites around the country.

The operation is considering different measures to mitigate the risks of COVID-19 transmission, including providing PPEs for the staff and volunteers, respecting physical distancing during the activities as per global standard recommendations.

The **main objectives** for assistance to vulnerable refugees, asylum seekers and migrants were the following:

1. To Provide ongoing health/ WASH/ MHPSS/ Vaccination services to refugees and migrants

- a. To provide basic services to refugees and migrants at Kara Tepe II Centre in Lesvos: WASH, health and hygiene promotion, psychosocial support and ongoing health through the HRC MHT.
- b. To deploy MHT in the following sites: **Korinthos, Kara Tepe II Centre, Nea Malakasa, Kleidi, and Ritsona Sites**, along with health and hygiene promotion activities, including COVID-19 control and prevention and the distribution of hygiene kits.
- c. To respond to MoMA's (Ministry of Migration and Asylum) urgent request for support. Additional locations needed provision of health services for which HRC responded by deploying or recruiting HRC staff according to the needs such as a MHT in **Samos Island**, for a short period of time (mid-September to December 2021), since the opening of the new Reception and Identification Centre in the site. Later in 2022, HRC extended the provision of health services from Kleidi site to include Nea Kavala site introducing the model of a roving MHT. As part of this set-up, in March 2022, the HRC started covering 2 sites in Northern Greece, based on a weekly schedule using the same resources.
- d. To support two Educational Health Stations, as well as a MHT in urban Athens. Educational Health Stations (EHS) are primary health care centres in Attica for refugees and migrants, unaccompanied minors and those without social security. They also assist the local population, including those on low incomes like pensioners. The HRC EHS provide regular children vaccination as part of their basic set of activities. Following the HRC active support to the Greek Governments' national COVID-19 vaccination programme through HRC nurses' deployments and relevant discussions with the Ministry of Health, the EHSs of the HRC has been actively participating in the COVID-19 vaccination programme for asylum seekers, refugees and migrants in Greece since the 2nd quarter of 2022.

- e. To increase PGI awareness and mainstreaming to prevent, mitigate, identify and respond to protection concerns, including safe and timely referrals to specialized services.
 - f. To mainstream basic mental health psychosocial support in the form of psychological first aid provision with all other services, and minimum standards for protection, gender and inclusion.
 - g. To reinforce and establish core CEA mechanisms in all operational areas, including the implementation of relevant feedback mechanisms, PDM surveys, focus group discussions, trainings of staff & volunteers etc.
- 2. To sustain and support well-established core HRC migration activities including**
- a. The MFCs in Athens and Thessaloniki: These centres provide services to those seeking asylum or those under international protection. The main services include psychosocial support, counselling, facilitation, referral to other services, Restoring Family Links (RFL), food and non-food items, interpretation/translation, educational activities, and paralegal support.
 - b. Five HRC accommodation centres for unaccompanied minors (UAM): one in Volos, 3 in Athens and one in Kalavryta.
 - c. The Accompanied Referrals Programme (ACCREF): A team of cultural mediators who accompany refugees and migrants to medical appointments. The accompanying service is offered mainly with physical presence both in primary health care units and in secondary health care units in the Public Hospitals of Athens. There is also the possibility of telephone follow-up interpretation, in the case of remote areas.
- 3. To prepare for a possible future influx of refugees and migrants** through Contingency planning, capacity building and training branches and volunteers, and pre-positioning of relief items (mainly NFI kits).

IFRC Country Delegation in Greece worked closely with the National Society to ensure preparedness measures are in place in the event of a new large-scale migration movement to Greece.

- a. Monitor for a possible future influx of refugees and migrants to neighbouring islands.
- b. Strengthening National Society capacities. The focus is on supporting the HRC in utilizing its capacity to foster its own National Society Development, with the possibility of undergoing a Branch Organisational Capacity Assessment (BOCA) exercise.

Exit and transition strategy:

Although there are fewer arrivals, migrants and refugees in Greece today compared to the start of the Emergency Appeal, the country is still experiencing significant humanitarian challenges, with persistent unmet needs and gaps a reality for migrants in Greece. In some cases, the vulnerabilities of migrants and refugees in Greece have increased, despite improvements in overall capacity to receive new arrivals. All too often, those granted international protection find themselves in an even more precarious situation than those newly arrived, due to limited entitlements for this population and insufficient integration services in place to enable self-sufficiency and successful inclusion in Greek society. Furthermore, the number of arrivals is on the rise again from a low point in May 2022, with an overall increase in land and sea arrivals and a new wave of people fleeing the conflict in Ukraine.

Recognizing that migration is a permanent and long-term feature of Greek society and acknowledging that the situation has shifted from that of an acute crisis to a more protracted situation, the HRC is transitioning the migration program in Greece to a longer-term programmatic approach focussed on responding to unmet needs, supporting not just immediate reception, but also longer-term integration and ensuring preparedness for future migration emergencies in Greece.

The Global route-based migration program has offered a valuable programmatic framework to take this work forward on a multi-year basis. The context is changing, with new arrivals from Ukraine in need of different and new supports alongside a protracted caseload from other parts of the world still in need of assistance. With funding increasingly

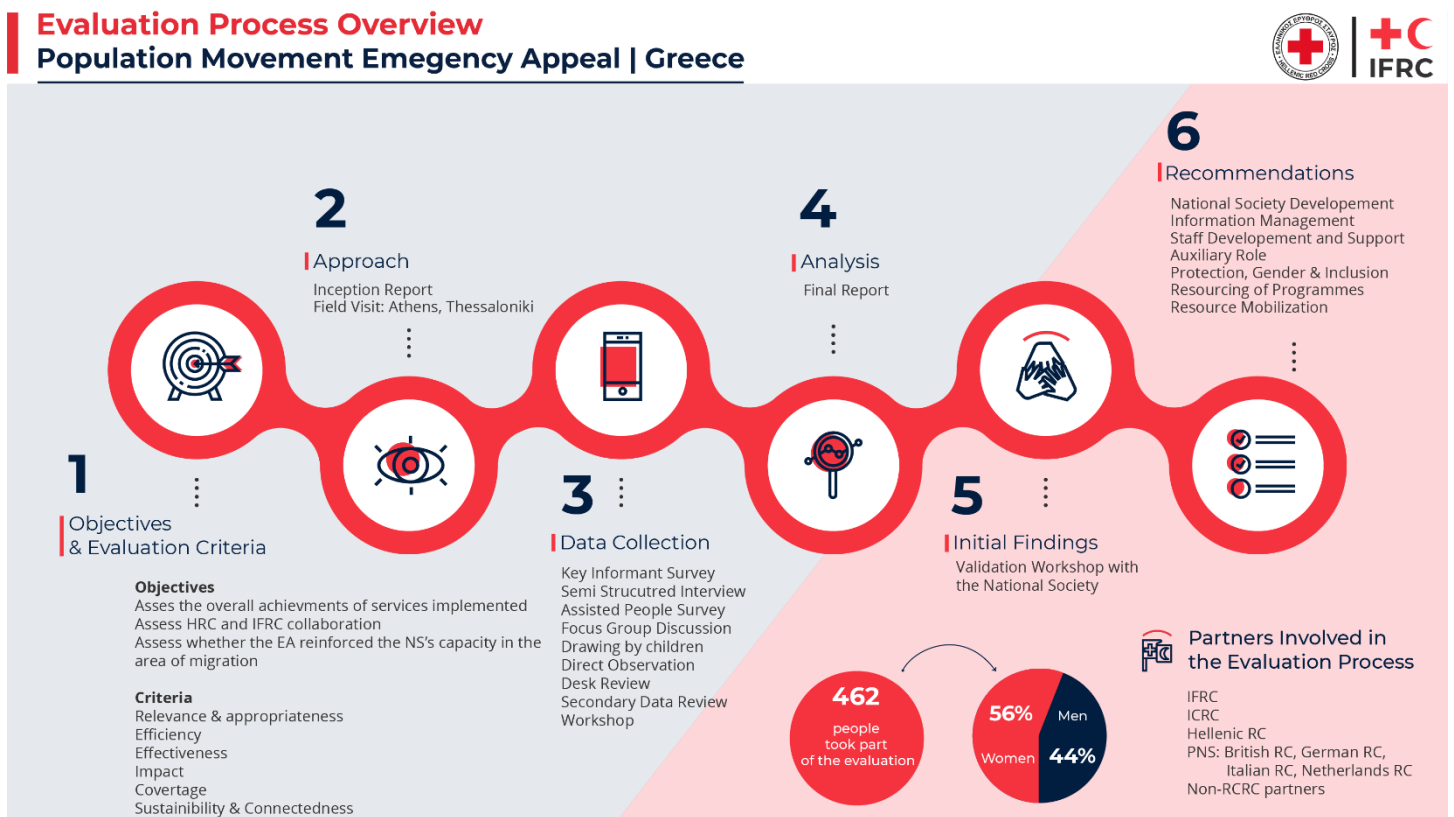
limited for the migration program in Greece, we're seeking to find creative solutions to fund the migration program, leveraging funding for the Ukrainian arrivals in a way that not only supports this caseload, but also seeks to bring much needed services to others in the same areas. The HRC is also seeking to ensure that building on long-standing investments of the Hellenic Red Cross and co-financing activities alongside the National Society's core programs in prioritized in the interest of sustainability and long-term impact.

Finally, as the Greek authorities and EU decision-makers, are driving policy decisions regarding migration, and as these decisions have and will continue to have humanitarian consequences for migrants, the HRC is increasing our collective focus on humanitarian diplomacy in Greece. As the HRC is a recognised and trusted partner by migrants, government officials and other humanitarian actors, the IFRC and the HRC have a key role to play in highlighting the needs of the most vulnerable and influencing powerholders to bring about positive change for migrants in Greece and the Region.

Summary of the external final evaluation Findings AND Recommendations:

One of the IFRC requirements for an Emergency Appeal of this size is a final external evaluation. The final evaluation, for the Greece component only, assessed the relevance, effectiveness, efficiency, and sustainability of the Emergency Appeal Operation from March 2020 to September 2022. The findings are intended to inform planning and response preparedness for similar operations in the future.

Data collection for the evaluation was carried out through 61 KIIs, 425 responses to 2 surveys (one addressed to staff related to the Operation (45 responses) and the second to assisted population (380 responses) and a 9-day field trip to Greece where project sites were visited in Athens, Thessaloniki and Ritsona.



A Unique Context

The Final Evaluation found that the context of IFRC Population Movement Emergency Appeal Greece was very unusual and it is unlikely that a similar set of circumstances will occur again. It encompassed:

- A worldwide pandemic – the first Greece lockdown was announced 10 days after the appeal was launched
- Hellenic Red Cross re-joining the International Federation
- Migration fatigue from donors – this was the second Greece Population Movement appeal this decade
- A joint appeal with Turkish Red Crescent (TRC) and other countries.

Key Findings and Recommendations


According to the Evaluation, both Red Cross and external key informants were very positive about the good quality services HRC provided and it was clear that in Greece, HRC services were key to providing support to the migrant/refugee population. This finding was backed up in the assisted population survey where 83% of people questioned would recommend the HRC service they had used. It was also widely felt that because of this appeal, HRC is strengthened and is now better prepared to respond to migration in Greece. Good RCRC Movement coordination and collaboration, including between IFRC and HRC, was also demonstrated in the appeal.

To further enhance HRC's capabilities in migration, the Evaluation recommended that preparedness planning at HRC branches (as a minimum Lesvos and Thessaloniki and other branches along the migration routes) be carried out. The Evaluation also recommended that this be reinforced by having the right resources (people and skills) in place in a timely manner.

However, the Evaluation found that HRC data collection systems were not fully in place and therefore the real picture of the tremendous amount of work being done by HRC is not being reflected in reporting. The Evaluation recommended that a digital assessment be conducted to help develop a digitalization strategy and investment plan for the HRC's digital transformation. As well as improving management information, the Evaluation concluded that digital transformation would also support resource mobilization efforts, as information would be readily available for donors.

Lastly, the Evaluation found that the appeal has helped to strengthen dialogue with the Government but recommended that this be developed further.

B. DETAILED OPERATIONAL REPORT

		Shelter, Housing and Settlements	People Reached 1,440	Female > 18: 700 Male > 18: 740
Objective:	<i>Communities in disaster and crisis affected areas restore and strengthen their safety, wellbeing and longer-term recovery through shelter and settlement solutions</i>			
Key indicators:	Indicator		Actual	Target
	<i># of people who have received emergency shelter assistance</i>		1,440	4,440

Following the fire in Moria site, and as part of the RC response, The German Red Cross (GRC) provided 500 family tents⁹ following a request from authorities managing the new Kara Tepe II Centre. In the initial phase of establishing the site, 240 tents were erected until all needs were covered and the site reached its full capacity. Due to the evolving needs at that time, support for shelters were covered by both GRC and UNHCR tents after MoMa's request and relevant prior commitments. The Red Cross tents were upgraded with tailored wooden pallet floor to improve thermal insulation and comfort, In addition, 19 additional tents were used to replace tents elsewhere in the site which were damaged by storms and heavy rains, while a small number were used to support other agencies active in the site. The remaining 141 tents were transported to Croatia to support the immediate emergency response following an earthquake on 29 December.

Due to dire living conditions in the site, especially during cold season, and with the accumulated delays in the construction of a new site, which would extend the opening past the winter season, authorities decided to undergo construction works aiming at improving the infrastructure of the current site to offer better living conditions for the population that will be there for another winter.

Following the revision on the emergency appeal in October 2020, German RC GRC provided an in-kind contribution to the IFRC Emergency Appeal through a bilateral coordinated response model between GRC and IFRC, where GRC was in charge of organizing the deployments of experts for the GRC WASH Team and managing the procurements with local suppliers providing the financial resources. The role of the IFRC was to coordinate the GRC-led response with the Hellenic Red Cross (HRC), public authorities and WASH Cluster and to represent the RCRC Movement. The planned timeframe for this response was from October 2020 to the end of March 2021.

In March 2021, the site management started the rehabilitation works in Kara Tepe II Centre, including water access, electricity access, levelling and gravelling of the space, which required the removal of all the tents in the site. IFRC subcontracted a service provider (Agritelis) and with the support of German RC Wash and Logistics Delegates, supervised the operation of dismantling, cleaning, evaluating their condition and repacking and storing the tents. As a result, 126 complete tents including winterisation kits that were in appropriate conditions to be re-erected have been donated to the Ministry of Migration and Asylum. The damaged tents have been donated to the local NGO Lesvos Solidarity for upcycling purposes (a team of migrant tailors are upcycling the materials of lifesaving vests or other items to design other items like bags).



*Volunteers from HRC are helping to set up tents for migrants and refugees at Kara Tepe II, Photo Credits: IFRC Greece
Photo Credit: HRC*

With this, the Shelter activities were concluded in Lesvos as of end of September 2021 with no further plans to continue the support on shelter from IFRC side or with German RC presence in the site.

Challenges/constraints

Evolving situation and needs in the field affected the coordination and the communication among all involved stakeholders (including between MoMA and the Movement), impacting the implementation of planned activities. As a result, the initial set target for the programme was not reached.

⁹ As a bilateral contribution, based on the needs originally identified through the EA



Multi-purpose Cash

Female > 18: **331**

Male > 18: **305**

Objective:

Households are provided with unconditional/multipurpose cash grants to address their basic needs

Key indicators:

Indicator

Actual

Target

of people from host community who have received multipurpose cash assistance

636 people (262 households)

1,000 people (400 households)

Distribution of multipurpose cash grants (MPGs) was planned initially for 400 most vulnerable local households (HH) (1,000 people) in the host community in and around Mytilene on the Lesvos Island. The objective of the activity was to assist the most vulnerable households to cover basic needs such as supplementing to the cost of the electricity bill, food items, pharmacy items, communication costs and at the same time assist them to overcome the socio-economic impact of the COVID-19 pandemic. The modality used was bank transfers. Lesvos island was selected as the area of implementation taking into consideration the number of migrants and refugees assisted. Due to inadequate funds to undertake the cash assistance programme in another location, the remaining amount was reallocated to cover other services provided under the migration Emergency Appeal operation.

Selection criteria was built with a clear priority to those with the lowest annual income. The selection criteria included: Unemployed, households receiving the Social Solidarity Income (Safety Net Programme addressed to households below the poverty line), households paying rental or mortgage for their house, family members with vulnerabilities and protection cases such as single-headed families, people with disabilities or chronic diseases. For the identification of the most vulnerable, the HRC suggested annual income thresholds, as part of the set of criteria, based on the family size

The initiative was officially communicated in all Municipal Authorities and was announced on the local media of the island. The number of applications received was lower than initially planned and the cash assistance project concluded for 262 households / 636 individuals, out of 400 HHs. The transfer value was built based on the HH size and the amounts (ranging from 120 to 320 euros) were distributed in three instalments in September, October and November 2021. The total amount of the cash grants was 149.670 euros.

The HRC conducted a Post Distribution Monitoring (PDM) survey after the completion of the project to assess the results of the cash assistance intervention and to use the beneficiaries' feedback for future improvements. Based on the responses received by 73 beneficiaries of the cash program in Lesvos, the overall findings were: : 1) all responders were satisfied with the cash assistance program: 85% responded to be totally satisfied and 15% enough satisfied, 2) the main needs that the cash assistance covered were food (39%) and electricity (32%), followed by rent (11%) and medical expenses (7%).

Challenges/constraints

The main challenges were related to COVID-19 restrictions (digital data collection, no paper used) and the demand of several cross-checks that the verification team needed to do electronically. Despite this, HRC has highlighted the need for the face-to-face assistance as a preferred option in some cases. Taking into consideration the need for social distancing and the new COVID-19 restriction of movement measures (local lockdowns), the HRC implemented a fully digitalized set-up, including digitized and remote registrations, as well as a remote HelpDesk via telephone, Viber and email. This was materialized with the support of the Netherlands Red Cross and the 510 initiative.



Health & Care

(Mental Health and psychosocial support / Community Health / Medical Services)

Female > 18: **27,958**

Male > 18: **33,741**

Objective:

Strengthening holistic individual and community health of the population impacted through community level interventions and health system strengthening

Key indicators:

Indicator	Actual	Target
# of people supported with first aid and PSS services (including primary health activities, PSS services and FA kits)	61,699	30,775
# migrants who receive primary health care services through Mobile Health Teams & Educational Health Stations	37,667	18,000
# migrants who are reached with PSS activities	24,032	9,000



Health Team Conducting Face-to-Face Information Session at Korinthos Migrants Site
Photo Credit: HRC

At the request of the authorities, the HRC's MHT operated in several migration sites on the mainland, urban settings, and the islands, to cover the health needs of newly arrived migrants. In addition, ACCREF and EHS services in Athens provided health services to the migrants living in the urban area of Athens.

Services typically include clinics with general physician, pediatrician, gynecologist and a nursing station with nurses and assistant nurses for triage, nursing consultation and monitoring of the patients with chronic diseases. More specifically, in the context of a **holistic Health Care approach**, the HRC medical teams are providing the following services: medical & nursing consultation, follow up of the patients with chronic diseases, medical first aid, psychosocial first aid (PFA), infants and toddlers' development monitoring, maternity care, prenatal & postnatal care, vaccinations of children (and adults, if required), gynecological & sexual health monitoring, community mobilization for Covid19 vaccination, mediation and facilitation of access to the public health care units or other

NGOs', regular & emergency referrals including for **PSS & Protection issues**.



Mobile Health Team in Kara Tepe II - Photo Credit: IFRC

Additionally, **Health and Hygiene promotion sessions** in various topics held, tailored to the age and gender of the participants, as well as the specific health needs of the population. The topics included prevention and management of scabies, protection from heatwave/cold, family planning, healthy nutrition habits, menstrual hygiene, hand washing, oral and dental hygiene, prevention of breast cancer, smoking and alcohol consumption and sexually transmitted diseases as well as protective measures and practices against COVID-19 and other transmittable diseases. 1,032 sessions were held by the MHT nurses, having reached 11,213 people (of which 31% were men, 35% were women, 21% were boys and 13% were girls).

Mobile Health Teams:

Through MHTs which offered services in migrants sites 11,561 unique beneficiaries made 42,087 visits to the MHT's clinics. The breakdown of the migrants who received health services by the MHTs is: 36% men, 26% women, 21% boys and 17% girls. In addition, 5,145 minors were vaccinated with first-line vaccines and 786 children issued the student health cards (SIHC/ADYM) for school enrolment.

The main health concerns reported are upper respiratory symptoms, acute abdominal pains, mild infections, as well as follow-up of patients with chronic diseases, mental disorders, reproductive health care which includes prenatal, post-natal and Family Planning and monitoring of children's health. Health and hygiene promotion activities for adults and children are organized on a regular basis and tailored hygiene kits are distributed in the sites according to the needs.

Also, to respond to the health needs of migrants in the urban setting, **the MHT for Urban Athens** started operating providing **primary health care services** (GP, paediatrician & nursing consultations, regular vaccinations, health & hygiene promotion sessions) to refugees and migrants housed and living in the urban setting of Attica region. This includes vulnerable groups within the migrant community such as unaccompanied minors accommodated in shelters, refugees and migrants being in a state of homelessness, one-parent families or single women with children hosted in shelters. Additionally, the MHT **organizes & implements outreach activities** in central points of Attica region targeting at the local vulnerable population and the migrant population (especially the undocumented migrants & third country nationals) in order to raise awareness in prevention and early screening, to empower women & adolescent girls and to mobilize and sensitize the communities in general about COVID-19 vaccination. Through the MHT urban, 777 unique beneficiaries received health related services, 2,327 visits were conducted in shelters, 1,101 doses of vaccines were administered, 322 student individual health cards (SIHC/ADYM) were issued for school enrolment, 1,520 people reached with health & hygiene promotion sessions, 331 people reached by social mobilization for COVID19 vaccination and 718 people reached by MHT outreach activities and risk communication. MHTs are supported by **cultural mediators** in Arabic, Farsi & French language.

During the HRC/IFRC assessment visit in April 2022, one of the residents of the Lesvos Kara Tepe II Migrant site told the team that he had been suffering from mental health issues due to being in the site for a long time. He was advised by someone to seek help from the HRC's PSS team on the site. He told us:

"The psychologist and the interpreter spoke to me for months, for an hour a week. They listened and supported me. I had bad thoughts but with their kind support, I stayed sane."

Another resident told us:

"Every time I pass the HRC container, I always look towards the entrance door which is always open. I feel supported and cared for. I thank the staff for being there for me."

Educational health Stations (EHS):

Both EHSs in Athens & Kallithea, provide primary health care services to the local vulnerable population, including the Roma community, as well as to documented and undocumented migrants (with or without social security number/AMKA or PAMKA or PAAYPA) and unaccompanied minors, in an effort to reduce health inequalities, to ensure equal access to information, while empowering individuals to adopt healthy behaviors in their daily life.

The two EHSs provided primary health care services to a total of 6,219 unique individuals and 19,274 visits were conducted. The breakdown of the migrants received health related services is: 18% men, 33% women, 29% boys and 20% girls. Moreover, 6,444 people were vaccinated with 7,143 doses of first line vaccines & COVID-19 vaccines, 581 student individual health cards (SIHC/ADYM) were issued for school enrolment, in addition, 1,694 health & hygiene sessions were held reaching 6,381 people in total. EHSs are supported by **cultural mediators** in Arabic and Farsi.

ACCREF:

The services by ACCREF were provided to migrants mainly during their



A patient with a HRC Health Booklet at the MHT clinic at Ritsona Migrants Site. Photo Credit: IFRC Greece

	# of unique beneficiaries received health related services	# of visits	# of health/hygiene promotion sessions held	# of participants in health & hygiene promotion sessions	# of people vaccinated (regular vaccinations & COVID-19 vaccinations)	# of student individual health cards issued	# of people assisted with accompanied interpretation	# of people assisted with follow-up/on call interpretation
MHTs	11,561	42,087	908	10,128	4,186	644	0	0
EHSs	6,219	19,274	1,694	6,381	6,444	581	0	0
ACCREF	0	0	0	0	0	0	17,888	1,999
TOTAL	17,780	61,361	2,602	16,509	10,630	1,225	17,888	1,999

regular medical appointments with various specialties in the outpatient department of hospitals and in primary health care centers in urban, and sometimes during visits as an emergency case or as follow-up interpretations. During this operation, the total number of **19,887 requests** were received by the NGOs that host migrants or provide services to migrants, HRC EHSs & MHTs of Ritsona & Korinthos. **17,888 requests** (90%) were for accompanied interpretation and **1,999** (10%) for follow-up/on call interpretation. In addition, 3 training sessions were held for **1,328** professional cultural mediators and health providers.

The following table provides an overview of the HRC's Health services:

Psychosocial Support (PSS) Services:

Direct PSS in groups and individually have been provided to a total of **24,032** beneficiaries in the MFCs in Athens and Thessaloniki, the 5 UAM centers in Athens, Volos & Kalavryta and the migration centers (sites & RICs). The beneficiaries were 37% men, 31% women, 25% boys and 7% girls. Sessions include counselling, psychological support,

emotional relief, information provision, directives, case management and referrals. A total number of **246** referrals were made to agencies with specialized PSS services.

A wide range of PSS services were provided to the minors hosted in the five respective Unaccompanied Minors' Centres of the HRC located in Athens, Volos & Kalavryta. Furthermore, **734** visits were made by children to the child friendly spaces in the social areas of the two MFCs (in Athens & Thessaloniki) and in Kara Tepe II Centre, where children were offered recreational and creative activities, as part of PSS interventions. Also, a total number of **204,347** Psychological First Aid sessions were provided to migrants in the sites, the UAM Centers and through the MFC hotline. Moreover, **25** PSS sessions were held for the psychological wellbeing of the HRC staff and volunteers involved in the operation.

Challenges/constraints

- The COVID-19 pandemic and the related lockdown measures further exacerbated the situation of migrants living in already difficult conditions
- HRC nurses to support the national COVID-19 vaccination operation, creating a gap in medical and nursing staff in relation to the actual daily needs
- Difficulties in referrals of patients and booking of appointments to Public Health Services due to most of them are operating as COVID-19 referral centres, and thus few regular appointments could be fixed. Delays in the supply of the medical stock due to the long procurement procedures in place as well disruption caused by the COVID-19 pandemic
- Technical difficulties in the implementation of e-prescription due to delays for the Government in issuing social security number (AMKA, PAAYPA or PSSHCN) for migrants.
- Unaccompanied minors not regularly attending their scheduled PSS appointments, as they were preoccupied with their legal issues and the application process
- Frequent signs & symptoms of staff burnout due to the highly demanding positions and high workload.
- Limited training time for staff recruited mainly for the MHT, due to them working away in the field



Water, Sanitation and Hygiene

Female: **7,434**

Male: **7,402**

Objective:	<i>Ensure safe drinking water, proper sanitation, and adequate hygiene awareness of the communities during relief and recovery phases of the Emergency Operation, through community and organizational interventions</i>		
Key indicators:	Indicator	Actual	Target
	<i># people who have received a hygiene kit</i>	7,186	12,900
	<i># of hygiene kits purchased for contingency stock</i>	Cancelled	10,000
	<i># of litres safe water distributed per person per day</i>	30	23

% of target population with access to an improved water source	100%	100%
# of people provided with safe water (according to WHO standards)	7,650	7,650
% of facilities that are regularly cleaned and maintained	100%	100%
# people reached directly and indirectly with key messages to promote personal and community hygiene	7,650	7,650
# of people with access to improved health conditions	7,650	7,650

HRC together with German and Danish Red Cross provided relief items, hygiene kits and tents to accommodate people in the new site. HRC deployed a MHT to provide medical support and immediate first aid to the residents of Kara Tepe II as well as a Restoring Family Links (RFL) team in coordination with ICRC, to assist those affected in communicating with their loved ones.



Hand-washing activity before entering the school at Kara Tepe II Centre. Photo credits: IFRC Greece

Water and hygiene provision at Kara Tepe II Centre:

A total of 9,390 m³ of cold water, 3,600 of hot water was trucked to the Centre between Nov-Dec 2020, to supply site residents with sufficient water.

Grey water has been trucked out of the site daily. The amount varied due to various circumstances, such as weather condition, number of people using the showers etc.

Four gender segregated shower facilities have been implemented and are operational with a total of 119 Showers. They are managed by 80 site residents volunteering for the task.

Hygiene promotion activities have been implemented and are ongoing. Sessions were conducted by site residents volunteering for the RC.

Standard hygiene kits donated by German and Danish Red Cross were distributed to 5,148 people, mainly families and single women. Four volunteers from the Lesvos branch and four Samaritans assisted in the distribution which took place over three days in early December. A final distribution targeting single men was done on April 2021.

Distributions were organised in a staggered schedule as several agencies contributed towards hygiene items; there is no need for further Red Cross distributions beyond April 2021. A technical company was contracted to develop 3 Studies for 'water to the site', 'sewage network onsite' and 'sewage network to the biological treatment plant'.

Red Cross water trucking Kara Tepe II Centre, Nov-Dec 2020

Type	m ³
Cold water	9,390

Hot water	3,600
Grey water	3,833

In Kara Tepe II RIC, between 2-4 of December 2020, **1,361** family hygiene kits and **318** hygiene kits for single women were distributed. A similar distribution of **2,038** hygiene kits to single men also took place between 20 and 23 of April 2021 in Lesvos. Additionally, **1,909** people had received relief hygiene kits in the Migration Centres in Northern Greece (Kleidi) and in New Malakasa in May 2020. Hygiene kits were also accompanied by ongoing general hygiene promotion and awareness for adults and children, as well as COVID-19 related messaging.

Distribution of hygiene kits:

Location	Men	Women	Boys	Girls	Total
Kara Tepe II /Lesvos	1,350	1,527	1,254	1,146	5,277
Mainland	981	928			1,909
TOTAL					7,186

German Red Cross WASH team together with IFRC Delegates were jointly coordinating the WASH interventions in Lesvos to improve the living conditions of the residents until the end of March 2021, when works were handed over to other humanitarian actors on the site, Water trucking for drinking water and warm water to be trunked into the site daily, hot shower facilities to support people to overcome the winter, shower facilities for people with special needs, baby bathing in the female and male shower facilities, handwashing stations

For the shower facility management, up to 104 residents volunteering for the Red Cross were trained to run the shower facilities (providing beneficiaries with basic hygiene products, ensuring the showers are clean and function properly, etc.).

For the Handwashing stations, 8 residents volunteers were trained to maintain, refill, monitor and run the handwashing stations around the site and regular handwashing sessions were conducted especially for children.

For the hygiene promotion, up to 30 site residents volunteering for the Red Cross were trained as hygiene promoters covering the different communities in the site.

Red Cross WASH interventions and hygiene promotion activities significantly improved the living conditions of the refugee population in Kara Tepe II Centre.

The MHT of the HRC remain at the site is continuing to provide its residents with essential primary health services.

The German Red Cross continued to provide substantial support to the operation on Lesvos through the construction of the pipeline to Kara Tepe II Centre, following the discussions with Greek authorities to construct a permanent water supply in the temporary site, German Red Cross signed an MoU with the Municipal Water and Sewerage Company of Lesvos to set up water and sewerage connections. The works started in July 2021. The project is estimated to be finalized by the end of 2021.



WASH facilities in Kara Tepe II Centre

Although UNICEF was leading the WASH response, IFRC/GRC has been recognized as main WASH actor in Kara Tepe II Centre, making significant contributions to the improvement of living conditions in the site. GRC/IFRC was perceived as a technical innovator in developing WASH solutions and quality HP tools, especially regarding PGI and CEA. This strategy of merging PGI and WASH was a successful approach to the needs of PoC. Vulnerable groups were broadly defined as women, adolescents, and girls and the aid provided has been proportionate to the needs as the outcomes and outputs were defined according to local needs, IFRC/GRC needs assessment, EPoA 2020 and UN Humanitarian Response Plans. The objectives were achieved based on the number of people targeted and who received the service, aiming to cover the whole site.

The initial plan to purchase 10,000 hygiene kits for contingency was cancelled due to new operational needs (to increase the number of staff/specialities in the MHTs based on health needs and of the MHTs to cover new sites – in Samos & Lesvos,) and restricted funding. Thus, decision was taken to reallocate the amount for the hygiene kits to respond to these needs.

Challenges/constraints

COVID-19 challenged the team and the entire operation. Due to this fact, strict rules amongst the team and onsite had to be implemented.

The Kara Tepe II Centre is located on an archaeological site. A lot of the planned interventions were not permitted or needed approvals. Some of the interventions were implemented only on the surface.

A big number of actors have been active onsite which made coordination challenging and resulted sometimes in unusual cooperation. Regular and strong sector meetings helped to overcome challenges.



Protection, Gender and Inclusion

Female: **46,149**

Male: **49,550**

Objective:

Communities identify the needs of the most at risk and particularly disadvantaged and marginalized groups, due to inequality, discrimination and other non-respect of their human rights and address their distinct needs

Key indicators:	Indicator	Actual	Target
	<i>Targeted people's needs and rights are met and PGI are included in all stages.</i>	Yes	Yes
	<i>Initial assessments include key PGI areas</i>	Yes	Yes
	<i>Sex, age and disability disaggregated data is collected</i>	Yes	Yes
	<i># of staff and volunteers trained on minimum standards</i>	584	50
	<i># of people reached with essential PGI services (target: TBD)</i>	95,699	-
	<i># of Unaccompanied minors receiving support in Greece</i>	872	-

# of migrants assisted in Multi-functional centres through information or referrals	94,827	-
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The government formally abolished the provisions which allowed unaccompanied minors to be detained in police custody. In addition, following government's decision all unaccompanied minors on the islands were transferred to safe accommodation structures on the mainland while transfers to other EU countries also continue¹⁰.

In **Lesvos**, a comprehensive PGI assessment was conducted in October 2020, including concrete recommendations on integrating PGI safeguards into the various areas of the operation (WASH/hygiene promotion, Health, NFIs). RC delegates have been continuously provided with PGI-related technical support on the treatment of sensitive cases, including the identification, proper response and referral of protection cases and individual requests. Capacity building and awareness raising activities, addressed to RC delegates and community volunteers, delivered in January – February 2021, with the aim to strengthen capacity of field staff and volunteers on PGI standards, procedures and safeguards. Additionally, the overall protection situation in the new site is closely monitored, in liaison and through networking with other NGOs and International Organisations, and recommendations are developed on the improvement of services, with a special focus on the protection of women, children, older persons, persons with disabilities and other vulnerable people at risk.

According to assessments by IFRC and other humanitarian actors, living conditions in the new sites were particularly challenging for vulnerable persons and persons with specific needs, such as children, single women, older persons, persons with serious/chronic illnesses and persons with disabilities. Several MHPSS and SGBV-specialized actors have been suspending admission of new cases as they reached the limits of their capacity. As a result, extremely high numbers of people in need of MHPSS and tailored SGBV-related support remained unsupported.

The HRC continued to provide full-time accommodation and support to unaccompanied migrants through its five **UAM accommodation centres**. During the two years of the operation, a total of 875 minors were supported through a variety of services including: shelter, clothing, facilitating access to school and educational activities, counselling, health care, information, social support, legal advice, booking and accompaniment to appointments for medical and legal services, etc.

In **Ritsona** Site, a comprehensive PGI assessment was conducted in June 2021, including concrete recommendations on integrating PGI safeguards into the various areas of the operation (PSS, CEA, Health). Additionally, the overall protection situation in Ritsona was closely monitored, in liaison and through networking with other NGOs and IOs, and recommendations were developed on the improvement of services, with a special focus on the protection of women, children, older persons, persons with disabilities and other vulnerable people at risk. All HRC field coordinators in sites, including in Ritsona Site, attended the on-site protection meetings held with all relevant actors to identify and address protection issues.

In all HRC programmes and activities, staff were continuously provided with PGI-related technical support on the treatment of sensitive cases, including the identification, proper response and referral of protection cases and individual requests. Capacity building and awareness raising activities, addressed to the HRC staff and volunteers, with the aim to strengthen the capacity of field staff and volunteers on PGI standards, procedures and safeguards and PSEA principles and tools. For this purpose, 584 HRC staff & volunteers (203 staff, 381 volunteers) were trained on the IFRC minimum standards for PGI in emergencies, and 18 SGBV trainings were delivered to 230 HRC staff and volunteers. In addition, 350 supervise and technical support sessions were held by the HRC Protection coordinator on a regular basis, approximately every two months, and on an ad hoc basis, whenever a staff member

¹⁰ <https://asylumineurope.org/reports/country/greece/reception-conditions/special-reception-needs-vulnerable-groups/>

needed guidance on managing a SGBV/protection case. Moreover, a guide for first-line practitioners on how to support survivors of GBV were distributed to the staff of all HRC Services and programmes.

During COVID-19 and the restrictions imposed, the UAM Centres and the MFCs quickly adapted their operation so as no refugee minors and other vulnerable groups be excluded from any needed service. The aim was to maintain safe living conditions and meet the psychosocial needs especially of the most vulnerable within a protected, safe framework.

The Social Services continue to provide case management to minors, people at high risk of homelessness, people malnourished or affected by other vulnerabilities, while ensuring referrals for health and medication for chronic patients. The **MFC Hotline**, one important means of communication for the support of the migrant population, received a total of 168,721 calls. The services offered were:

- Mediation and facilitation of the communication between migrants and authorities/non-governmental organizations/public services (through telephone interpretation), legal support, information and facilitation regarding family reunification issues
- Up to date information on the current refugee situation and their rights, on issues concerning material support, housing, medical issues, including regarding the COVID-19 precaution protocols and Vaccination process, and on the Cash Transfer Program
- Telephone interpretation to Public Health Institutions & COVID-19 Clinics of the mainland and the islands
- Translation for other HRC services in the mainland and the islands

The smooth and effective collaboration of both Social Services and the Hotline ensures that all the beneficiaries had the necessary documentation to access services, facilitated the procedure of appointments booking and provided tele-interpretation during their appointments.

The legal services of the Shelters and the paralegal service of the MFCs assisted beneficiaries regarding asylum requests, provided information about their rights and procedures, and facilitated family reunification processes under Dublin regulations.

Finally, the implementation of non-formal education and PSS activities (regarding identity, gender, migration, diversity) for unaccompanied minors, children of different group ages and adults was increased to compensate the lack of outdoor activities due to COVID-19 restrictions. All the activities took place in line with the measures against the pandemic: remotely or face to face following relevant rapid tests.

# of people assisted since the beginning of the operation with PGI services		
	# of people assisted in MFCs	# of UAMs assisted
Male > 18	45,867	
Female > 18	43,351	
Male < 18	2,811	872
Female < 18	2,798	
TOTAL	94,827	872
GRAND TOTAL ASSISTED	95,699	

From the total of 94,827 people assisted by the services of the MFCs, 48% were men, 46% were women, 3% were boys and 3% were girls.

Challenges/constraints

- Increase in violence especially against women and children, due to COVID-19 pandemic and restriction with HRC intensifying their protection work in responding to incidents and working with the communities and strengthening collaboration with the agencies involved, based on the survivor-centred approach
- Limited access to education, PSS activities and Social Services sessions due to them being held remotely, following COVID-19 restrictions
- Challenges with the enrolment of children in the public education system mainly due to lack of required documentation and schools' capacity, resulting in a number of children being excluded
- Gaps in providing effective protection to survivors of violence by the Authorities.
- Referral pathways have been a regularly changing process due to the many actors who have been in and out of Greece over this period, so it has been a challenge for all involved to keep up with who is doing what.
- Lack of guidelines with the new registration procedure of the Asylum Service as well as the platform being in English and Greek only
- Pending housing requests from undocumented people, mostly from single mothers
- Lack of general support with food and non-food items in the urban area such as Thessaloniki and other areas of Northern Greece
- Slight increase in homeless single men visiting the MFCs in need of shelter, food and clothes as well as health care, some without the AMKA (Social Security number), limiting them in accessing public hospitals
- Refugees who have been granted asylum are obligated to leave the accommodation schemes of the Ministry. On refusal, the eviction has been enforced by the responsible organizations along with the police
- Recognized refugees being forced to leave the migration site due to its closure, such as Elaionas
- Undocumented migrants have limited access to healthcare. Chronic patients with complex medical needs strive to find their medication.



Migration

Female: **46,579**

Male: **49,997**

Objective:

Communities support the needs of migrants and their families and those assisting migrants at all stages of migration (origin, transit and destination)

Key indicators:

Indicator

Actual

Target

Dialogue platforms are established, allowing host communities and migrants to engage

N/A

Yes

% of people seeking RFL services, who are assisted

100%

100%

Community Engagement and Accountability (CEA), a way of working that values all community members as equal partners and recognizes their diverse needs, priorities, and preferences– is achieved by integrating meaningful community participation, open and honest communication and feedback mechanisms within HRC programmes in order to ensure high level performance, quality, sustainability and accountability.

- Coordination and technical support meetings, trainings and sensitization sessions for HRC staff on CEA issues take place on a bi-weekly basis and once a month in regional level.

Achievements:

- 711 HRC staff and volunteers have been trained in the CEA core components
- 1.982 feedbacks in total have been collected and analyzed and shared within the respective teams
- Innovative ways of collecting feedback have been designed and implemented in the UMS (e.g., receiving feedback through drawings, using videos and apps)
- CEA equipment has been purchased (e.g., information boards, SB's, lamination machines) facilitating the CEA activities
- New tools have been developed and are available to the HRC staff and volunteers (tool on how to track rumors, Ritsona case study on CEA activities etc)
- The HRC CEA coordinator and the NS's CEA focal persons have participated in community networks (CwC, ACCMR) and community meetings on the field
- Field visits in Lesvos and Ritsona took place by both the HRC CEA coordinator and the CEA focal person Health Sector in order to monitor and support the teams on the field
- Information material has been designed and disseminated through outreach activities in communities and persons of concern (service maps, leaflets in hygiene issues, announcements with key messages, posters of what is provided and what is not)

The full integration of the CEA approach in all the EA's programs has contributed to:

- enable greater participation of the communities in planning, designing and implementing HRC services
- understand better people's needs, capacities and communities' context and trends
- listen and act upon community feedback so as to managing expectations and community tensions
- maintain quality and a high satisfaction level of the HRC delivering services



Feedback collection through a child-friendly questionnaire for the minors PSS activities, Lesvos. Photo Credit: HRC

Regarding the migrant communities and the vulnerable population HRC has developed as aforementioned its CEA capabilities in order to receive vital information for its activities. The information gathered informs us about the relativeness of the services in relationship with the needs of the beneficiaries, the satisfactory rates for the services provided and the priorities in which the HRC should focus on amongst others.

The two multifunctional centres in Athens and Thessaloniki provide a centrally located and accessible entry point to Red Cross services for migrant communities; these include orientation sessions, help desk, social case work services, support in restoring family links, accompaniment in accessing public services, multi-cultural dialogue and exchange, and language training and employability sessions.

The HRC manages five accommodation centres for unaccompanied minors between 15 to 18 years old – one in Volos, three in Athens and one in Kalavryta – with a total capacity of 154 spaces. The centres provide accommodation, catering, personal hygiene items, clothing and footwear, as well as access to health and education services, psychosocial support, counselling and

legal assistance, remedial teaching, learning Greek, and interpretation.

The overall approach of the **MFCs in Athens and Thessaloniki**, as well as of the 5 centres for the UAMs were to provide services and guidance to support migrants on their journey to more effectively integrate into Greek society, to contribute to the reduction of vulnerabilities, the enhancement of the resilience of the refugee population and the shaping of a positive impact on the host society regarding migration. The approach of the services provided by the MFC aims to empower them to reassess their individual needs and make their own choices; in order to regain their own autonomy in everyday life. The operation of these centres is significant as they provide refugees with an opportunity to rebuild a shattered life, reinstall hope and initiative. Meeting multiple and complex needs through their interdisciplinary approach is at the core of their operation. MFCs and UAM Centres provide a holistic range of services and support to third-country nationals to help them being socially included and autonomous by rebuilding skills, resources, encouragement and responsibility. Their overall approach, along with their location in urban areas, provides refugees with a sense of community.



PSS activity for children in MFC at Athens. Photo credits: HRC

Since the beginning of the operation, 94,827 beneficiaries of the two MFCs and 872 beneficiaries in total of the 5 UAMs were assisted, while some 54,644 visits were conducted in the two MFCs of Athens and Thessaloniki as well as 168,721 calls/requests received by the MFC Helpline.

HRC **Tracing & RFL** Division is covering the needs at entry points and accommodation centres, ad hoc, remotely and with the support of other HRC actors when present. Gender accessibility remains an issue, while on the same time victims of torture that have received international protection approach more and more the Tracing & RFL Division looking for their families. A total of 895 RFL requests were received by the HRC Division for tracing 2,582 people (in Greece and abroad) and 6 Reunification requests concerning family members who have already been living abroad. Out of the 895 RFL requests, 579 people were located: 558 persons located alive and were reconnected to their family and 21 persons were located deceased. In addition, a total of 2,147 persons maintained contact with their family, including 1,048 migrants in Kara Tepe II Centre in Lesbos, through the distribution of phone cards and Wi-Fi access. The direct beneficiaries of the Division were 1092 people (41% men, 25% women, 20% boys and 14% girls).

Enabling approaches



National Society Strengthening

Objective:	<i>National Society capacity building and organizational development objectives are facilitated to ensure that National Societies have the necessary legal, ethical and financial foundations, systems and structures, competences and capacities to plan and perform</i>		
Key indicators:	Indicator	Actual	Target
	<i>% of Red Cross volunteers involved in the operation who are insured</i>	100%	100%
	<i># of staff and volunteers trained in DRR</i>	160	100

The DM Unit of HRC performed trainings on Basic Disaster Management to staff (16) and volunteers (104) of the HRC local branches of Alexandroupolis, Karditsa, Kerkira, Ioannina and Kalamata. It is a basic level training for all HRC's staff and volunteers in which trainees acquire basic knowledge of disaster risk management, disaster response mechanism, the relationship between HRC and civil protection as well as field evaluation tools. The training also consists of risk analysis methods and tools. The trainees learn how to apply them on their local context to classify the risks of their communities and how to find ways to mitigate and prepare to respond to them.

A training of 17 new volunteers in the Nursing Department was also held, covering the thematic units "Disaster Risk Analysis and Management" and "Disaster Management Mechanism" and a training of 85 volunteer trainers (2 cohorts of 45 and 40) of the Volunteering Sector on the sections: "Introduction to Disaster Management - The Strategy of the Movement" and "Field security".

IFRC has been able to influence other as strategic partners by providing new tools, planning, revising indicators and improving programming for migration in the following key areas:

- A protection roadmap (in the form of a matrix) for 2021-2025 was developed and shared with HRC; the roadmap was developed in line with the HRC Strategy.
- Ad hoc provision of technical advice to MFC and site's CTP on several emerging issues (e.g., data collection and reporting templates, asylum seekers' handing in cash cards to RIS staff for ATM withdrawal, PSEA matters, introduction to the RFL program).
- Development and roll- out of a PGI Pocket Guide for RC Community Volunteers in Lesvos, in the form of a booklet hanged on badges, translated into 5 languages (English, French, Somali, Farsi, Arabic).
- A review of the health operational portfolio was conducted, and recommendations were shared with the HRC Health teams.
- Training sessions delivered and capacity development initiatives taken: a) a short (1 hour) PGI session addressed to CTP teams in July 2020, b) Two comprehensive one-day trainings on PGI, including identification and referrals and a PSEA session were conducted in September, targeting CTP/MFC staff (30

participants), c) a PGI Induction training was developed and presented to GRC WASH delegates in Lesvos, d) an advanced “making referrals” training was delivered to selected GRC delegates in Lesvos.

- Review and provision of practical and concrete recommendations on integrating CP Safeguarding and PSEA principles into the CoC of the newly established HRC Volunteering Department.
- Introduction of HRC PRT FP to IFRC PSEA team with the aim to integrate PSEA approach, accountability and commitments into the NS operations and modus operandi; it has been agreed that the PSEA Manual will be translated into Greek by the HRC with the aim to have it rolled- out nationwide.
- Ad hoc provision of technical support and advice on integrating PGI standards and indicators into the whole program planning, design and implementation cycle, through directly liaising with IFRC and HRC relevant focal points.
- Review of and provision of feedback and input to all financial agreements/ Appeals and reports develop and submitted by IFRC or HRC (e.g., Ops 1 and 2, UNHCR reports, IFRC OP).
- Review and provision of recommendations and suggestions on IFRC operational tools and documents, shared by the HQ/RoE (e.g., the PGI Guidance on WASH, the IFRC PGI Strategic Framework 2021-2025).
- Recommendation to make the “Child Protection at IFRC and the Protection from Sexual Exploitation and Abuse (PSEA)” courses mandatory to all IFRC Greece staff.

PSEA awareness raising initiatives taken in the operational framework of the CTP in the North (display of UNHCR and IFRC relevant posters in the MFC, development of leaflets on the use of cash cards to be distributed in the sites etc).



Coordination and Partnerships

Objective:	<i>Effective and coordinated international disaster response is ensured</i>		
Key indicators:	Indicator	Actual	Target
	<i>% of Surge requests with positive response</i>	100%	80%
	<i># of community feedback systems established</i>	1	2
	<i>Adequate supply chain and procurement systems and procedures in place</i>	Yes	Yes

In the immediate aftermath of the Moria fire in Lesvos, IFRC mobilized an operations manager as well as a WASH coordinator. In addition, the German Red Cross first deployed a delegate to oversee shelter activities, followed by dedicated WASH team which has gone through several rotations. Additional short-term technical support in-country was also made available by the German Red Cross and Danish Red Cross. German RC provided an in-kind contribution to the IFRC Emergency Appeal through a bilateral coordinated response model between GRC and IFRC, where GRC NHQ was in charge of organizing the deployments of experts for the GRC WASH Team and managing the procurements with local suppliers providing the financial resources. The role of the IFRC was to coordinate the GRC-led response with the HRC (HRC), public authorities and WASH Cluster and to represent the RCRC Movement. The planned timeframe for this response was from October 2020 to the end of March 2021. The construction of a water pipeline was completed by GRC in 2021.

Although UNICEF was leading the WaSH response, GRC/IFRC has been recognized as main WaSH actor in Kara Tepe II Centre making significant contributions to the improvement of living conditions in the site. GRC/IFRC was perceived as a technical innovator in developing WaSH solutions and quality HP tools, especially regarding PGI and CEA. This strategy of merging PGI and WASH was a successful approach to the needs of PoC (People of Concern). However, this complimentary was not implemented since the start of the operation and Fle took three months to include People with Special Needs (PWSN) in the WaSH services provided. Vulnerable groups were broadly defined as women, adolescents, and girls, with no detailed profile before January. The aid provided has been proportionate to the needs, as the outcomes and outputs were defined according to local needs, IFRC/GRC needs assessment, EPoA 2020 and UN Humanitarian Response Plans. The objectives were achieved based on the number of people targeted and who received the service, aiming to cover the whole site.



Shelter Cluster Coordination

Objective:	<i>The IFRC secretariat, together with National Societies uses their unique position to influence decisions at local, national and international levels that affect the most vulnerable.</i>		
Key indicators:	Indicator	Actual	Target
	<i># of materials produced for Communications newswire</i>	18	4
	<i># of assessments conducted by implementing NSs</i>	4	4
	<i>% of due reports and appeal documents published on time</i>	71%	100%

The IFRC comms officer made several trips to Lesvos to deal with international media, develop web stories, social media messages and audio-visual materials. Updated key messages and other communications materials were produced on a regular basis for use by IFRC and National Societies and shared through the weekly Communications Newswire and Slack.

A Migration and Displacement Assessment was conducted jointly with IFRC in April/May 2022 with the aim of identifying core areas of strength, programmatic priorities, as well as identifying ways in which the National Society can leverage its auxiliary role, offer insights into programmatic strategic direction and support resource mobilisation efforts with key donors.

During 2021, HRC ensured the visibility and communication on the operations using all NS social media channels. publishing photos, videos and other communication materials like newsletters and Infographics to promote the involvement of the HRC staff and volunteers in assisting the people in need, depicting the image of hope, and letting them know that the Red Cross is there to guide and support them, contributing to their success stories.

- Printing newsletters every 3 months and release them to media, Greek Government and to governing bodies, ministries
- Monthly reports about the activities of the ACCREF and MFCs
- Updating constantly the website

Uploading social media posts on weekly basis with HRC's actions, photos, and videos.



Secretariat Services

Objective:

The IFRC enhances its effectiveness, credibility and accountability.

Key indicators:

Indicator

Actual

Target

of Host NSs that have security SOPs in place covering activities in the operation

2

2

The IFRC country team in Greece worked closely with the HRC finance team to streamline financial tracking and reporting. Additional national staff in areas such as finance, administration and human resources were made available to support the operation.

Importantly, the HRC worked closely with an external audit company to clear its backlog, leading to the successful completion of its audited annual statements for previous years. Annual financial statements for the financial years 2018 and 2019 are now available on the HRC public website.

Specific security regulations were developed for operations on Lesbos by an experienced German Red Cross security delegate. This was based on a comprehensive risk and context analysis, taking into account both general security and COVID-19 related risks.

Challenges/constraints

While there have been no major security incidents during the reporting period, these have been isolated incidents of petty theft in some of the sites, including basic medical equipment and materials. In addition, the situation in some of the sites can remain volatile particularly in view of movement and other restrictions. The HRC is in regular dialogue with the authorities to address security risks while also reviewing additional measures to ensure the safety of staff at all times.

C. FINANCIAL REPORT

The Final Financial Report for this Emergency Appeal (MDR65003) is annexed to this report.

- The total Emergency Appeal income was **CHF 5,792,405**
- The total Funding received was **CHF 5,792,405**
- The total expenditure was **CHF 5,717,301**

The **remaining balance of funds CHF 75,104** will be transferred to the [2023 IFRC Unified Plan for Greece](#) to support planned activities under the migration and identity pillar, which aims to ensure continuity of as many HRC migration services as possible and support migrants and displaced people in need.

Partners or donors who have any questions in regards to this balance are kindly requested to contact Andrej Naricyn, Head of Partnerships and Resource Development at the IFRC Regional Office for Europe (email: andrej.naricyn@ifrc.org) within 30 days of publication of this final report.

Contact information

For further information, specifically related to this operation please contact:

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For Performance and Accountability support (planning, monitoring, evaluation and reporting enquiries):

- David Kohlmann, Regional Head of PMER and Quality Assurance a.i., David.KOHLMANN@ifrc.org

Reference documents



Click here for:

- [Previous Appeals and updates](#)
- Emergency Plan of Action (EPOA)

How we work

All IFRC assistance seeks to adhere the **Code of Conduct** for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations (NGO's) in Disaster Relief, the **Humanitarian Charter and Minimum Standards in Humanitarian Response (Sphere)** in delivering assistance to the most vulnerable, to **Principles of Humanitarian Action** and **IFRC policies and procedures**. The IFRC's vision is to inspire, encourage, facilitate and promote at all times all forms of humanitarian activities by National Societies, with a view to preventing and alleviating human suffering, and thereby contributing to the maintenance and promotion of human dignity and peace in the world.

Emergency Appeal

FINAL FINANCIAL REPORT

Selected Parameters			
Reporting Timeframe	2020/1-2022/12	Operation	MDR65003
Budget Timeframe	2020-2022	Budget	APPROVED

Prepared on 30 Jan 2023

All figures are in Swiss Francs (CHF)

MDR65003 - Turkey, Greece & Other Countries - Pop. Mvt

Operating Timeframe: 13 Mar 2020 to 30 Sep 2022; appeal launch date: 13 Mar 2020

I. Emergency Appeal Funding Requirements

Thematic Area Code	Requirements CHF
AOF1 - Disaster risk reduction	0
AOF2 - Shelter	1,000,000
AOF3 - Livelihoods and basic needs	310,000
AOF4 - Health	3,900,000
AOF5 - Water, sanitation and hygiene	3,000,000
AOF6 - Protection, Gender & Inclusion	150,000
AOF7 - Migration	2,100,000
SFI1 - Strengthen National Societies	700,000
SFI2 - Effective international disaster management	0
SFI3 - Influence others as leading strategic partners	220,000
SFI4 - Ensure a strong IFRC	620,000
Total Funding Requirements	12,000,000
Donor Response* as per 30 Jan 2023	5,688,024
Appeal Coverage	47.40%

II. IFRC Operating Budget Implementation

Thematic Area Code	Budget	Expenditure	Variance
AOF1 - Disaster risk reduction	0	0	0
AOF2 - Shelter	363,817	363,793	24
AOF3 - Livelihoods and basic needs	343,281	171,388	171,893
AOF4 - Health	3,496,950	2,302,164	1,194,786
AOF5 - Water, sanitation and hygiene	0	160,802	-160,802
AOF6 - Protection, Gender & Inclusion	1,372,889	984,329	388,560
AOF7 - Migration	1,673,515	1,023,628	649,886
SFI1 - Strengthen National Societies	549,776	433,481	116,295
SFI2 - Effective international disaster management	0	146,215	-146,215
SFI3 - Influence others as leading strategic partners	29,495	115,827	-86,332
SFI4 - Ensure a strong IFRC	11,860	15,675	-3,815
Grand Total	7,841,583	5,717,301	2,124,281

III. Operating Movement & Closing Balance per 2022/12

Opening Balance	0
Income (includes outstanding DREF Loan per IV.)	5,792,405
Expenditure	-5,717,301
Closing Balance	75,104
Deferred Income	0
Funds Available	75,104

IV. DREF Loan

* not included in Donor Response	Loan :	500,000	Reimbursed :	500,000	Outstanding :	0
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Emergency Appeal

FINAL FINANCIAL REPORT

Selected Parameters			
Reporting Timeframe	2020/1-2022/12	Operation	MDR65003
Budget Timeframe	2020-2022	Budget	APPROVED

Prepared on 30 Jan 2023

All figures are in Swiss Francs (CHF)

MDR65003 - Turkey, Greece & Other Countries - Pop. Mvt

Operating Timeframe: 13 Mar 2020 to 30 Sep 2022; appeal launch date: 13 Mar 2020

V. Contributions by Donor and Other Income

Opening Balance							0
Income Type	Cash	InKind Goods	InKind Personnel	Other Income	TOTAL	Deferred Income	
Austrian Red Cross	45,950		30,145		76,095		
Austrian Red Cross (from Austrian Government*)	919,011				919,011		
Austrian Red Cross (from Austria - Private Donors*)	228,460				228,460		
British Red Cross	169,600				169,600		
COFRA Foundation	100				100		
Danish Red Cross	36,192				36,192		
Finnish Red Cross	105,664				105,664		
German Red Cross	214,739				214,739		
German Red Cross (from Siemens AG*)	812,864				812,864		
German Red Cross (from Volkswagen Group*)	812,864				812,864		
Google	188				188		
Iraqi Red Crescent Society	891				891		
Italian Red Cross	159,732				159,732		
Japanese Red Cross Society	89,295				89,295		
Marsh & McLennan Companies, Inc.	238				238		
Norwegian Red Cross	280,347				280,347		
On Line donations	1,966				1,966		
Other	75		94,445		94,520		
Red Cross of Monaco	52,553				52,553		
Spanish Red Cross (from Spain - Private Donors*)	106,882				106,882		
Swedish Red Cross	95,451				95,451		
Swiss Government	600,000				600,000		
Swiss Red Cross	100,000				100,000		
The Canadian Red Cross Society	36,662				36,662		
The Netherlands Red Cross (from Netherlands Govern	798,073				798,073		
Western Union Foundation	18				18		
Total Contributions and Other Income	5,667,815	0	124,590	0	5,792,405	0	
Total Income and Deferred Income					5,792,405	0	