

HEALTH AND WELLBEING IMPACT OF DETENTION ON CHILDREN



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HUMANITARIAN RESPONSE IN DETENTION

MSF experience in immigration
detention in Europe since 2004
including Malta, Belgium, Greece and
Italy

Humanitarian dilemma:

- heavily securitized environment
 - lack of free access to populations and patients
 - patient privacy
 - continued care
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- humanitarian impact and role in the detention system



APPALLING CONDITIONS AND LACK OF ACCESS TO HEALTH CARE

- Overcrowding
- Lack of hygiene
- Inappropriate isolation areas for infectious disease patients
- Inadequate assessment of vulnerabilities; victims of torture, chronic illness etc.
- Limited presence of medical personnel and delays in transfers to secondary care
- Family separations



“ In October it started getting cold. There were three of us sleeping on two mattresses, but in our room it was still too cold because of the broken windows. Then I decided to go and sleep with the other two people from Ethiopia: their room was very small and had no windows, so it was not too cold. But this room was inside the toilets area, and when I wanted to go there I had to walk across the floor which always full of water. And it was always stinky. At the end of October I became very sick, I had a serious infection in my lungs. They brought me to the hospital where they kept me for more than ten days. When I recovered, I cried because I didn't want to go back to prison.”

9 year old boy from Ethiopia, Malta, 2010

ILLNESS RELATED TO DETENTION

Common physiological symptoms diagnoses were caused or exacerbated by conditions in detention. They included:

- upper and lower respiratory tract infections.
- musculo-skeletal problems; related to the cold, uncomfortable environment and lack of exercise
- diarrhoea and gastro-intestinal disorders; related to sanitation and hygiene, food quality and lack of exercise.
- skin diseases
- accidental and intentional trauma
- mental health symptoms

IMPACT ON MENTAL HEALTH

- psychosomatic disturbances
- depression
- anxiety
- PTSD
- adjustment disorders
- mutism



LIBYA: ROLE OF EU IN ARBITRARY DETENTION?

- EU supported Libyan Coastguard interceptions
- Migrants sent to detention centers in Libya coast
- No monitoring of people in detention
- Detainees have no option to challenge their detention or treatment
- Poor conditions: heat, ventilation, water, overcrowding
- Exposure to abuse and exploitation
- Lack of access to care



GREECE HOTSPOTS: CHILD MENTAL HEALTH CRISIS

- Severe and acute MH symptoms: self-harm, panic attacks, mutism, nightmare and insomnia

Moria Hotspot:

- Referrals for children aged 6-18 , presenting with severe mental health
- MSF team respond to multiple cases of child suicide
- Quarter of children in MSF group therapy – self harm, suicide attempts or idealization
- Half of SV cases have involved a child victim

“Life in the camp is not good. The environment in Moria makes people sick, even the kids, if you miss your turn in the food line, you do not get food or water. All the children in Moria, they are always sick, coughing, when they eat they vomit all time, for me it makes me angry because my little sisters and brothers are always sick because of this place, I am always angry. We sleep in a dark and small place with many people, I get nightmares, my little brother gets nightmares”

- 12 year old girl from Syria, Greece, Lesbos 2018.