

Greece

Screening practices for infectious diseases among newly arrived migrants in Greece

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The main reasons of migration in Greece



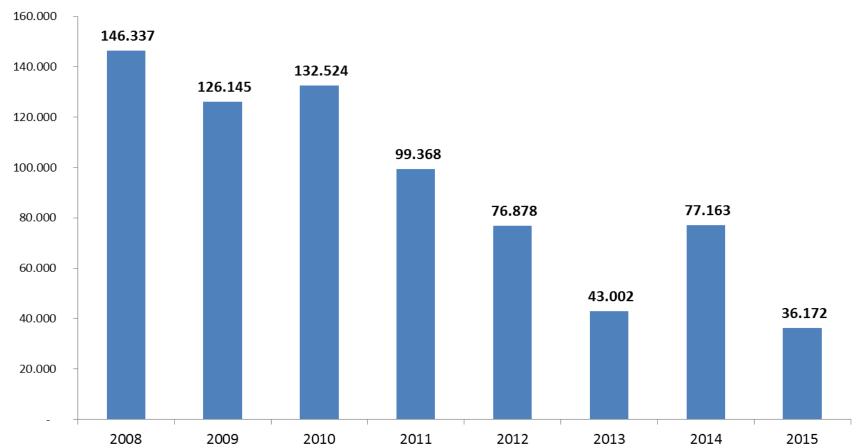
The reasons can be summarized as follows:

- □ the geographical position of Greece at the gateway among three continents
- the length of both land and sea borders
- the fact that it is close to countries which are home to conflicts and still in greater poverty than Europe
- the continuous shift of migration flows, which requires that the Greek state should always be prepared and on alert
- the fact that a substantial number of migrants enter the country with the prospect of reaching another EU Member State.



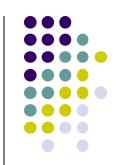
Arrested Migrants in Greece (2008 – 2015)







Arrested migrants per area in Greece

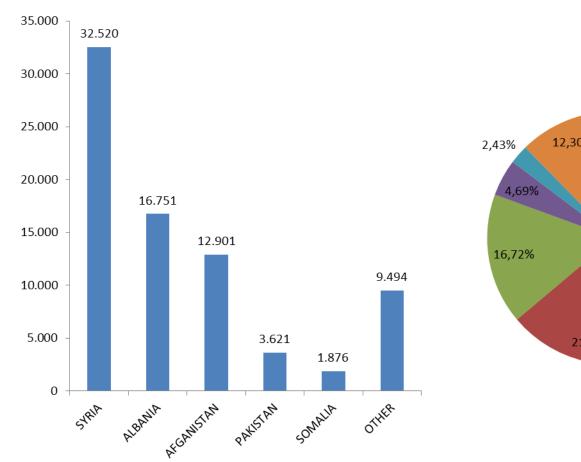


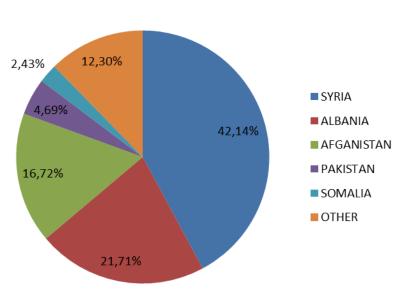
	JAN-APR 2014	JAN-APR 2015	%
GREECE - ALBANIA BORDERS	2.154	2.961	37,47%
GREECE - FYROM BORDERS	282	252	-10,64%
GREECE - BULGARIA BORDERS	169	177	4,73%
GREECE - TURKEY (EVROS BORDERS)	445	869	95,28%
LESVOS	2.141	10.624	396,22%
SAMOS	976	2.928	200,00%
CHIOS	545	3.963	627,16%
DODEKANISA A'	496	1.695	241,73%
DODEKANISA B'	503	6.796	1251,09%
CRETE	820	559	-31,83%
OTHER	4.768	5.312	11,41%
TOTAL	13.353	36.172	170,89%



Country of origin of newly arrived migrants (2014)



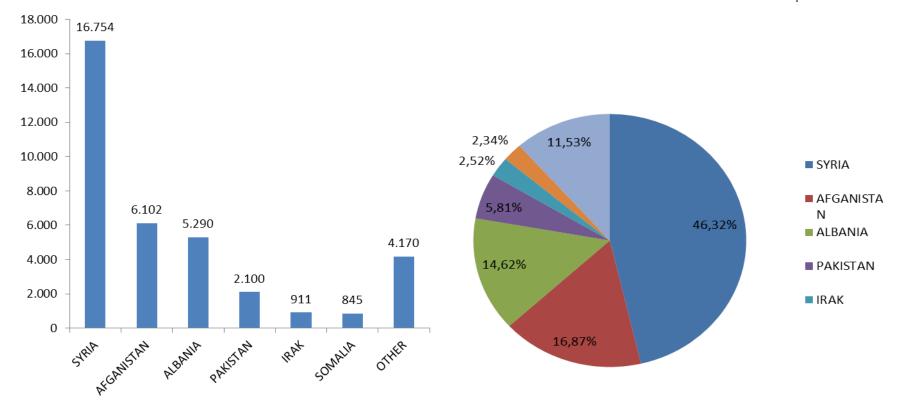






Country of origin of newly arrived migrants (01/01/2015-30/04/2015)



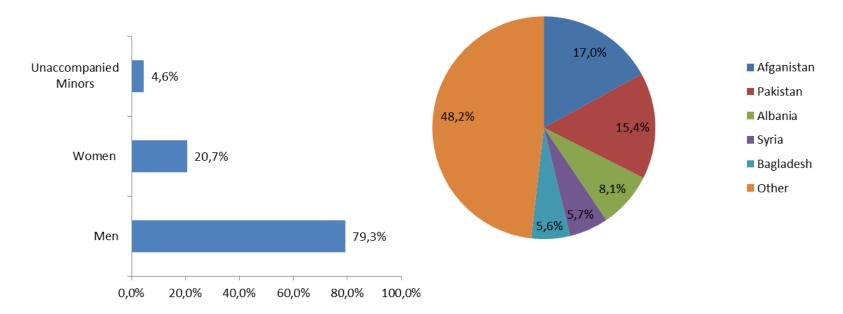




The New Greek Asylum Service



- □ Establishment: 21 January 2011
- Statistics period: 7.06.2013 31.08.2014
- Asylum Units: Attica, Thessaloniki, Patra, North & South Evros, Lesvos,
 Rhodes, and Chios

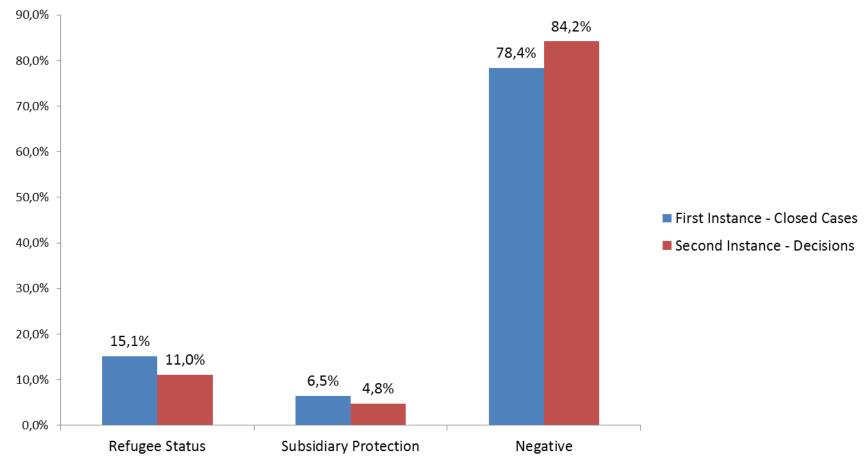


Source: Greek Asylum Service, 2015



The results of the Asylum Seekers applications

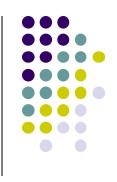




Source: Greek Asylum Service, 2015



Legal Framework



- ✓ L. 3907/2011 & L. 3365/2005: the function of detention centres established by the action plan for irregular migration. There are two types of centres for
 - first reception &
 - pre-repatriation (closed facilities)
- Nowadays, the Greek Government has established:
 - 4 first reception centres (Orestiada, Samos, Chios, Lesvos)
 - 6 pre-repatriation centres (Ferres, Fylakio Orestiada, Xanthi, Drama, Amygdaleza, Korinthos).



Hellenic Centre for Disease Control and Prevention



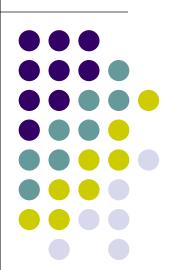
- ✓ Greek public health agency
- ✓ Major operating component of the Ministry of Health

HCDCP works with partners to:

- ✓ monitor health
- ✓ detect and investigate health problems
- ✓ support research
- √ implement prevention strategies
- advocate sound public health policies



Newly arrived migrants and infectious diseases





Malaria in Greece

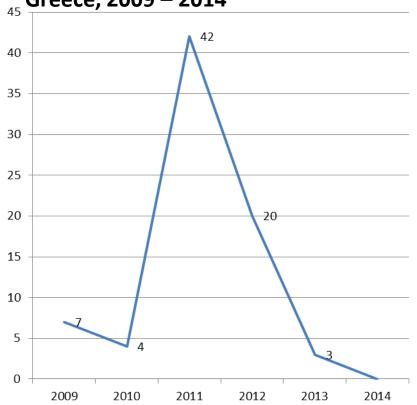
Greece has been malaria-free since 1974

- ✓ 2011: P. vivax malaria re-emerged with42 locally acquired cases
- ✓ 2012: 20 locally acquired P. vivax cases
- ✓ 2013: 3 locally acquired P. vivax
- ✓ 2014: 0 locally acquired P. vivax

PH Response:

- Enhanced surveillance & diagnosis
- Targeted mass drug administration of antimalarials
- Communication activities
- Coordination of vector control activities

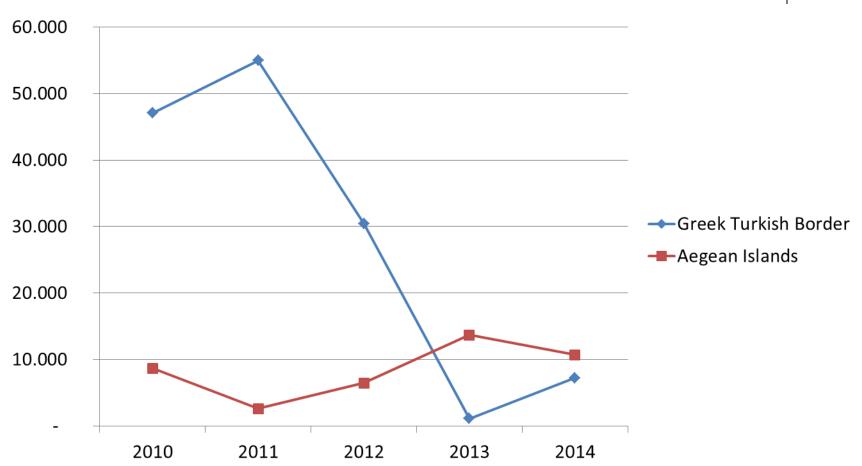
P. vivax locally acquired malaria cases, Greece, 2009 – 2014





Undocumented Migrants from malaria endemic countries





SOURCE: Hellenic Police

P. vivax malaria endemic countries in this case = Afghanistan, Pakistan, Bangladesh, India



Screening of migrants for malaria



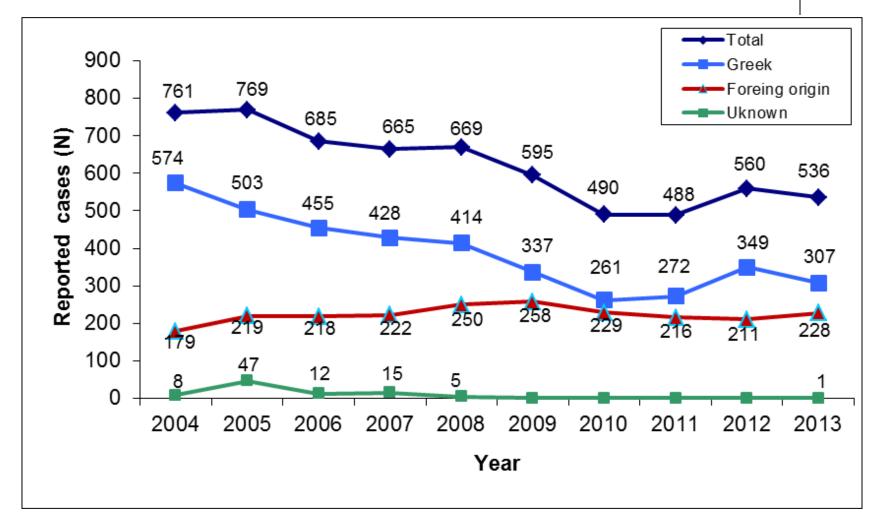
HCDCP, in collaboration with the national project "MALWEST", advised for screening the migrants from malaria endemic countries with Rapid Diagnostic Tests (RDTs) in reception centers:

- ✓ RDTs were procured by KEELPNO and MSF-GR
- ✓ 2012: 2.465 RDTs in high risk areas & 8 reception/detention centres (73 positive)
- ✓ 2013: 554 RDTs in health care facilities on the Aegean islands (22 positive)
- ✓ 2014: 3.000 RDTs in health care facilities on the Aegean islands, Crete, in high risk areas & reception/detention centres (12 positive).



Reported TB cases per year and nationality, Greece, 2004-2013



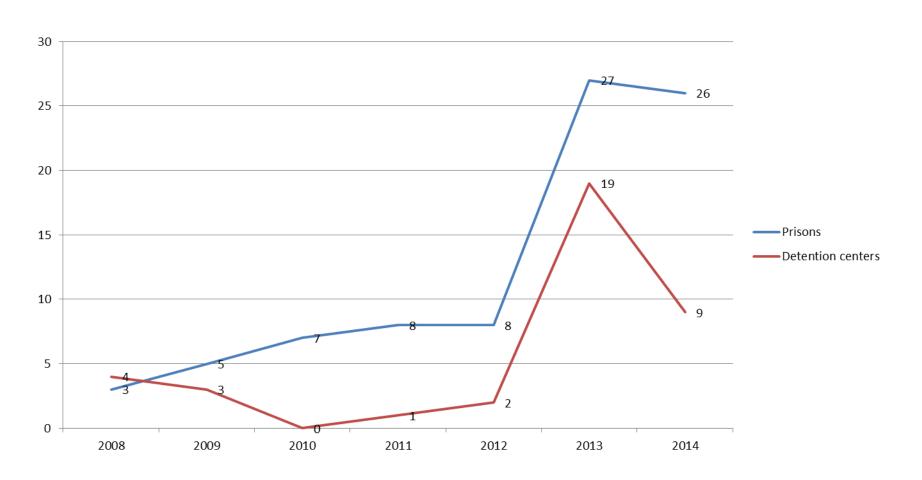


Source: HCDCP



TB cases reported in prisons & detention settings (2008 – 2014)

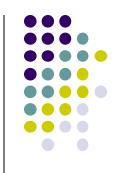




Source: HCDCP



PH Response to Poliomyelitis - Greece



2013: 17 cases of paralytic polio in 3 governorates in Syria

✓ This cluster of cases of acute flaccid paralysis among Syrian citizens increases the risk for the importation of wild polio virus to the EU/EEA and further reestablishment and transmission in the Member States.

After ECDC recommendations, the actions of HCDCP in order to avoid polio outbreak included:

- ✓ Updating National Plan to maintain Polio-free status
- ✓ Strengthening AFP surveillance, intensifying enterovirus surveillance, and intensifying environmental surveillance
- Migrant screening and immunization in collaboration with local PH depts and NGOs deployed at the first reception/pre-removal centers
- 1. Lesvos island: 54 stool samples & 186 IPV doses
- 2. Samos island: 92 stool samples & 211 IPV doses
- 3. Evros: 80 stool samples & 135 IPV doses

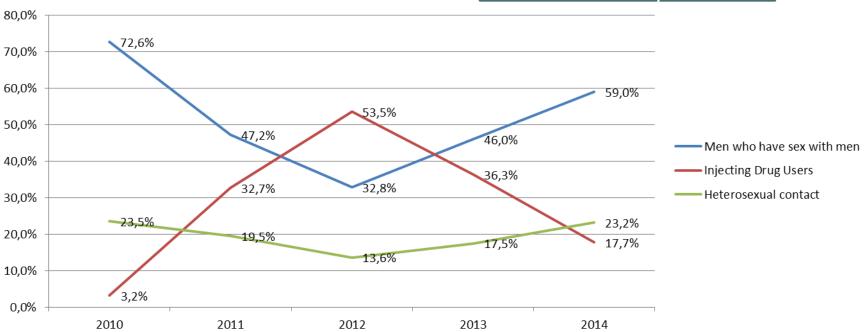


HIV infection in Greece



Incidence new HIV infections, Greece (2014): 7

33,0% of Heterosexually –
infected by HIV/AIDS in
Greece originating from an
HIV – highly endemic
country

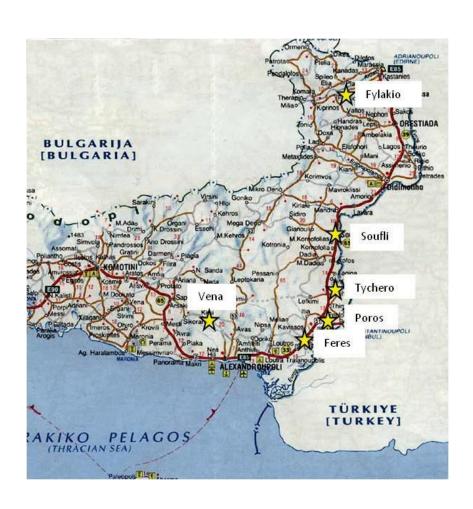


Source: HCDCP (2015), HIV infections reported in Greece by transmission group and year of report



Migrant health care project - Evros (2011)





Aim of the Project:

- To provide medical and psychosocial support to detained migrants
- ✓ To protect public health through vaccination and screening of the newcomers

<u>Time period</u>: March - July 2011 6 stations and detention centres at <u>Evros</u>

*Funded by the **ERF** (80%)



Migrant Health Care Project – Results (2011)



Demographical Data:

- √ 6899 immigrants were screened
- √ 6278 (91%) were male, 258 minors
- ✓ Average age: males (25,31) & females (44,0)

TB Screening

√ 1.132 Mantoux tests were performed from which 88 (7.8%) were positive.

Vaccinations

- ✓ adults migrants were vaccinated against Poliomyelitis
- children against Diphteria, Tetanus, Pertussis and Poliomyelitis and against Measles, Mumps and Rubella

Psychosocial evaluation



Migrant health care project - Eastern Macedonia & Thrace (2013)



Aim of the Project:

- ✓ To provide medical and psychosocial support to detained migrants
- ✓ To protect public health through vaccination and screening of the newcomers

Time period: February – April 2013

6 stations and detention centres at Evros, Rodopi and Xanthi

*Funded by the ERF (80%)



Migrant Health Care Project – Results (2013)



Screened population: 3.615 migrants

TB Screening

√ 48 Mantoux tests were performed from which 2 (4,1%) were positive.

Malaria Screening

✓ 134 RDTs were procured from which none were positive.

Vaccinations

√ 1.119 migrants were vaccinated against Poliomyelitis and DT

Dentist screening (69 migrants) & Psychosocial evaluation (618 cases).



The new Project of HCDCP



The main targets of the project are:

- □ To provide Health care and prevention services to migrants.
- To handle emergencies by providing appropriate treatment and, if needed, by referring cases to other NHS structures for further treatment.
- To ensure public health protection from communicable diseases and early detection of epidemics.
- To provide psychological support in the migrants population.
- □ To manage/ treat and, if needed, refer migrants suffering from chronic diseases.
- □ To ensure security during reception of migrants and set up a protective environment for the vulnerable group of unaccompanied minors.



Summary of the project

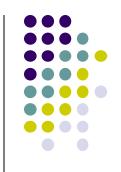


We propose to:

- □ Create **independent primary health care structures** at the entry points of Greece.
- Carry out activities in the field of prevention and health care for migrants in order to avoid epidemics in those populations & undertake actions for psychological support for this population, in order to eliminate mental health problems.
- Carry out education and training activities for the staff living with the population (Police staff, Coastguard staff, etc.), so that they can effectively assist in the timely detection and treatment of epidemics.
- Create an observatory to record and evaluate health care data, so that immediate decisions to be made at a political and operational level regarding health care standards in the facilities.
- Carry out information campaigns targeting local populations in order to raise awareness and inform them on the topic of migration and health.
- Provide the basic supplies of migrants (underwear, personal hygiene kit, sleeping bags, etc.).



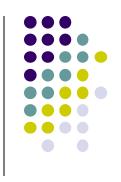
Prevention & health care for migrants



- ☐ General physical examination of the newly arriving populations and registration of findings in the migrants' medical records. Referral for further examination to secondary or tertiary health care structures, if it is necessary.
- Vaccination of the migrant population on the basis of an indicated protocol. The proposed vaccines are: DTaP-IPV and MMR for children, IPV (injectable) for children up to 14 years coming from Syria and DT for adults.
- Malaria screening of all migrants coming from malaria endemic countries using rapid diagnostic test (RDT).
- □ Tuberculosis screening by using Mantoux test.
- Recognition of probable suspected Ebola cases and any other hemorrhagic fever cases with a different etiology on the basis of the travel history, the country of origin and the clinical profile.
- Recognition/ diagnosis of chronic diseases.
- A health card provided to every migrant examined. The migrants' vaccination record, any chronic diseases diagnosed and any medication are marked on the health card.



Key questions (1)



Examples of best practices

✓ Screening for malaria in 2012/13 led to change the recommendation to use RDT only for symptomatic cases

Evidence of screening effectiveness in Greece

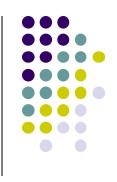
✓ The function of medical centers inside the detention centers and the prevention programmes dramatically reduced the referrals to hospitals and the treatment programmes for IDs. As a result, the local hospital structures operated effectively and Police stopped the unnecessary transports and focused on its work.

Which is the current situation for the newly arrived migrants in the first reception/detention centres?

✓ The health and psychological services are served by 3 NGOs.



Key questions (2)



What challenges are you facing in terms of screening for infectious diseases among migrants?

- Mainly legal framework and inter-sectoral collaboration
- ✓ Significant underreporting occurs for most communicable diseases, especially in these groups
- ✓ Need to strengthen surveillance systems in order to make prompt interventions
- ✓ Need for better communication between the health professionals and the public on the special issues regarding migrant health → public's increase awareness
- ✓ Lack of resources



Thank you for your attention

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