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# Emergency appeal operations update

## Greece: Population Movement

 International Federation  
of Red Cross and Red Crescent Societies

<b>Emergency appeal n° MDRGR001</b>	<b>GLIDE n° <a href="#">OT-2015-000050-GRC</a></b>
<b>Operations update n° 3</b>	<b>Timeframe covered by this update: 9 January – 2 June 2016</b>
<b>Date of issue: 1 July 2016</b>	<b>Date of disaster: since January 2015</b>
<b>Operation manager responsible for this EPoA: Ruben Cano, Head of IFRC Country Office</b>	<b>Point of contact at the Hellenic Red Cross: Zefi Thanasoula, Head of Operations</b>
<b>Operation start date: 2 September 2015</b>	<b>Operation end date: January 2017</b>
<b>Operation budget: CHF 28,667,500 DREF allocation: CHF 296,549</b>	<b>Appeal's coverage: 100%</b>
<b>Number of people being assisted:</b> 304,000 people (249,000 <sup>1</sup> "transit" phase, 55,000 <sup>2</sup> "stranded" phase)	
<b>Host National Society's presence (n° of volunteers, staff, branches):</b> The Hellenic Red Cross's 952 volunteers and 30 staff from its HQ and the branches are involved in the operation.	
<b>Red Cross Red Crescent Movement partners actively involved in the operation:</b> American Red Cross, Austrian Red Cross, Belgian Red Cross (Flanders), British Red Cross, Canadian Red Cross, Croatian Red Cross, Cyprus Red Cross, Danish Red Cross, Finnish Red Cross, French Red Cross, German Red Cross, Hungarian Red Cross, Hong Kong Red Cross, Icelandic Red Cross, Irish Red Cross, Italian Red Cross, Japanese Red Cross Society, the Netherlands Red Cross, Norwegian Red Cross, Red Cross of Monaco, Spanish Red Cross, Swedish Red Cross, Swiss Red Cross, UAE Red Cross. The British, Icelandic, Luxembourg, Netherlands, Norwegian, Swiss, United States of America Government, and several private and corporate donors also contributed to the emergency appeal.	
<b>Other partners actively involved in the operation:</b> European Commission's Humanitarian Aid and Civil Protection department (ECHO), Ministry of Internal Affairs, Ministry of Migration, Ministry of Health, Ministry of Defence and other Greek authorities, IOM, UNHCR, UNICEF, WHO, Médecins Sans Frontières (MSF), Médecins du Monde (MDM), Save the Children, International Medical Corps, Mercy Corps, WAHA, Praksis, IsraAid as well as local associations and groups of volunteers.	

### Summary of the appeal

***This Operations Update no. 3 is to report on the implementation progress of activities from 9 January – 2 June. A [revised Emergency Appeal](#) was published in May 2016 to reflect the current situation, focusing on providing assistance to the migrants stranded as well as the host communities in Greece, while supporting and strengthening the efforts of the Hellenic Red Cross. This appeal ends in January 2017, with a final report due by 30 April 2017.***

<sup>1</sup> Given the response context in Greece during the "transit" phase, the National Society could only gather figures of services provided up to 29 February. Therefore, the figure of people reached is a rough estimate that could include some double counting.

<sup>2</sup> This is the estimated number of migrants stranded in Greece, and differs depending on sources, also taking into consideration continued migrant arrivals (although decreased). While the revised emergency appeal is targeting the stranded migrants according to respective sectoral targets, not all 55,000 migrants will be reached but coverage of the migrant population will be based on the camps with RC operations. It is not possible to provide a total number being assisted as the migrant population in the various camps change on a daily basis and as of reporting date, there is no formal registration process taking place in migrant camps.



The Hellenic Red Cross, supported by IFRC, is working for better living conditions in the camps, including health care, psychosocial support, adequate hygiene and sanitation, and basic necessities. An innovative cooperation with Red Noses Clowns helps teach children the importance of good hygiene amid fun and laughter.

*Photo: Caroline Haga/IFRC*

**From January 2015 onwards: increasing numbers of people arriving to Greece.**

**22 May 2015:** CHF 296,549 is released from the IFRC's Disaster Relief Emergency Fund (DREF).

**August 2015** 200,000 migrants arrived in Greece by boat from Turkey.

**2 September 2015:** Emergency Appeal launched for CHF 3.03 million for 45,000 beneficiaries.

**From 26 August to September 2015:** IFRC Surge Capacity deployed - Field Assessment and Coordination Team (FACT) and IFRC Emergency Response Units (ERUs).

**21 October 2015:** Based on new assessments a Revised Emergency Appeal is launched for CHF 12.67 million for 200,000 beneficiaries.

**7 December 2015:** Operations Update published with a revised budget increased to CHF 13,172,336 based on needs identified - mainly changes to IFRC staff structure for this operation and budget revisions for beneficiary communications.

**20 January 2016:** Operations Update no.2 published reporting on the implementation progress of activities, as well as to extend the timeframe of the Operation from April to September 2016.

**March 2016:** IFRC Surge Capacity deployed - Field Assessment and Coordination Team (FACT) and IFRC Emergency Response Units (ERUs), to support the rapidly changing emergency operation when the borders closed, stranding people in Greece.

**11 May 2016:** The Emergency Appeal is revised for a second time as a result in the changed situation of stranded migrants in Greece for an unknown amount of time. The revision includes an increase in the budget to CHF 28,667,500 and a timeframe up to 31 January (allowing a period of transition or handover to take place until 31 March 2017).

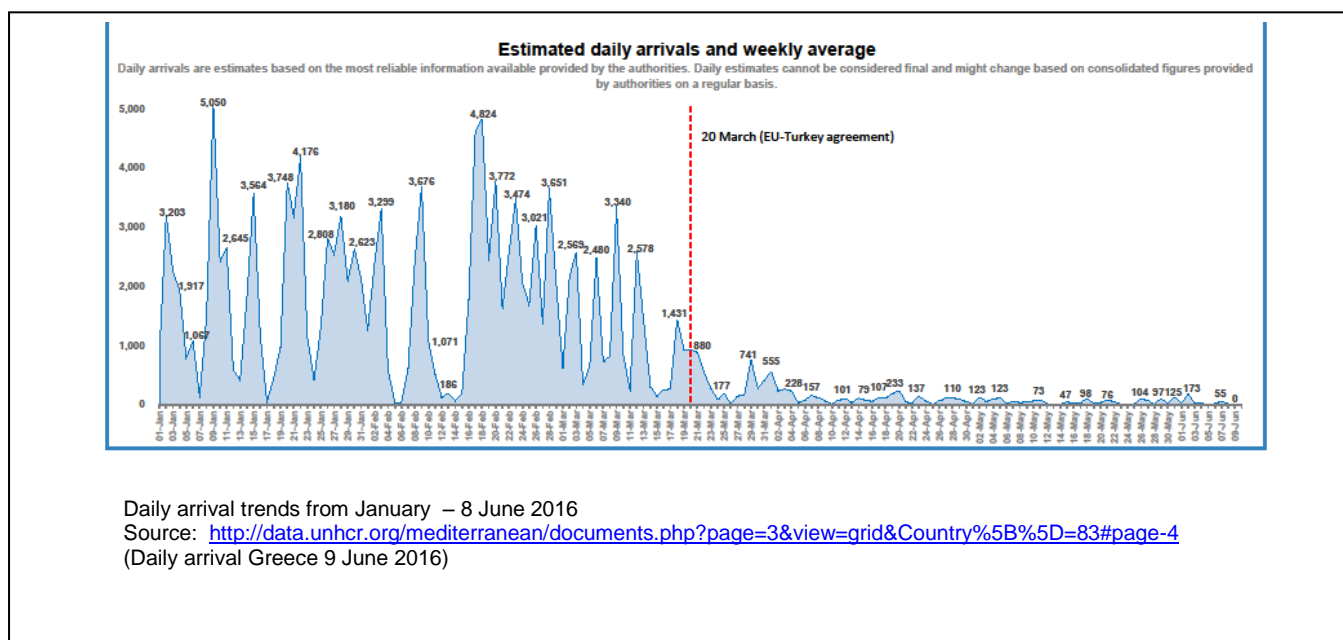
## Situation

In 2015, Greece became the primary entry point for migrants coming into Europe. In one year alone, a total of **856,723 people**<sup>3</sup> arrived by sea, undertaking the crossing from Turkey in makeshift and often inadequate boats.

The EU and Turkey's officials reached an agreement on 18 March to address the increasing influx of migrants entering Europe since 2015. Under the agreement, effective 20 March onwards, migrants entering Greece will be returned to Turkey if they do not apply for asylum within 48 hours of arrival or if their claims are rejected. Thousands of migrants already in Greece could be resettled in Europe if their asylum claims are accepted. As of reporting date the legal and logistical infrastructure to implement this agreement is being put in place but the time needed for the process to be completed is unclear. On the evening of 19 March the Greek Government began to evacuate the islands in an effort to make a clear distinction between migrants arriving before and after the deadline under the agreement. As a result, the hotspots on Lesbos, Chios and Samos were turned into administrative detention centres. Consequently, several humanitarian actors pulled back on providing services directly in the detention camps citing violations of International Law as the reason and being unwilling to be associated with a process they regard as illegal and unfair.

The nature of the humanitarian operation has therefore changed going from a situation in which people needed assistance aimed at aiding their transit through Greece, to one where they have become static and camp-based for an as yet undetermined time. The number of migrant arriving to the islands, has decreased and is expected to decrease further, assuming no other intervening external factors.

**Fig 1. Daily arrivals from January – June 2016**



In the meantime, to manage the situation the Greek government opened new migrant sites in the north and around Athens, and more sites are in the process of being established on the mainland ([current number of sites established is estimated to be over 40](#)<sup>4</sup>). Idomeni, the informal settlement near the former Yugoslav Republic of Macedonia-Greece border formerly home to some 11,000 migrants was finally evacuated in May. Migrants were sent in busloads to newly established camps opened in the north. However not all the migrants formerly in Idomeni had been accounted for, and it is unclear where the migrants who were not transferred to those camps are. In addition, the conditions in those camps have been described as “dire” and the Greek government is under immense pressure to improve conditions there. UNHCR will work with the Greek government on improving conditions at those camps in addition to identifying and setting up new places during the summer when some of the sites close in September.

In order to speed up access to solutions for the migrants, the Greek Asylum Service is currently conducting a pre-registration exercise in the camps on the mainland starting from the beginning of June to end of July with the financial support of the European Commission, further supported by the United Nations High Commissioner for

<sup>3</sup> Source: <http://data.unhcr.org/mediterranean/country.php?id=83>

<sup>4</sup> UNHCR – site profiles, Greece

Refugees (UNHCR) and the European Asylum Support Office (EASO). The pre-registration exercise will take several weeks to conclude, but all those who arrived in Greece before 20 March wishing to apply for international protection in Greece and are currently residing on the mainland will be able to pre-register.

So far 13,583 people have applied for asylum in Greece in 2016<sup>5</sup> as of May 2016.

Greece's volatile economic situation, and having to deal with the migrant crisis is putting severe strain on the country. Currently there are more than 55,000 migrants in the country, among whom many are families, unaccompanied minors and separated children in need of protection. According to data from UNHCR, from January 2015 to 12 June 2016, the number of arrivals into Greece have reached a total of 1,014,119.







Northern Greece camp, 2-8 June 2016.

Idomeni, Greece, 15 March 2016. Over 12,000 people, predominantly families, have been stranded by the border in Greece for over three weeks in appalling conditions.

Photo IFRC

## Red Cross response

As of 2 June, Red Cross has provided services in the following locations: Chios, Samos, Kos, Lesvos, Athens and Attica (Piraeus, Ritsona, Skaramagas), Nea Kavala, Idomeni, Cherso, Diavata, and Softex, Kordelio.

 <p><b>952,889</b> food and non-food items distributed (including hygiene items)</p>	 <p><b>61,753</b> people assisted with basic health care and first aid services; <b>64,776</b> people reached with PSS services (counselling and child friendly spaces)</p>	 <p><b>82,792</b> hours of volunteer service</p>	 <p><b>15,714</b> people assisted by RFL / tracing activities</p>
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The EU-Turkey implementation in March effected a change of situational context which led to the revision of IFRC/HRC plans of action, scaling up its interventions and currently focusing on these **main operational sites**<sup>6</sup>.

<sup>5</sup> Source: Ministry of Interior (in Greek) – <http://gov/asylo>

<sup>6</sup> The number of people on the sites is taken from UNHCR website: <http://data.unhcr.org/mediterranean/country.php?id=83> – Greece sites as of 10 June.

**Fig 2: Operational sites with RC services as of 10 June 2016**

Region	Sites	Migrant population <sup>7</sup>	Activities planned	Active RC partners
Central Greece, Thessaly	Ritsona	734	Health, PSS, Relief and Cash, WASH,	HRC, IFRC, Spanish RC, French RC
Attica	Skaramagas	3,050	Health, PSS, Relief and Cash, WASH,	HRC, IFRC, Spanish RC, French RC
Attica	Piraeus	1,479	Health	HRC
Attica	Eleonas	2,285	PSS	HRC
Central Macedonia	Oreokastro	1,433	Relief and Cash	HRC, IFRC
Central Macedonia	Nea Kavala	4,127	Relief and Cash Health, WASH, PSS	HRC, IFRC, Austrian RC, British RC, Finnish RC, German RC
Central Macedonia	Cherso	3,987	Relief and Cash Health, WASH, PSS	HRC, IFRC, Finnish RC, German RC
Central Macedonia	Diavata	1,802	Relief and Cash, Health, PSS	HRC, IFRC
Central Macedonia	Softex, Kordelio	1,454	Relief and Cash Health, PSS, WASH	HRC, IFRC, Austrian RC, British RC, Finnish RC, German RC,
Island	Samos	1,221	Health, PSS, Relief, RFL	HRC, IFRC
Island	Kos	532	Relief, PSS, RFL	HRC, IFRC,
Island	Lesvos	3,429	PSS, Relief , RFL	HRC, IFRC, Danish RC, Swiss RC
Island	Chios	2,458	Relief Health, PSS, RFL	HRC, IFRC, Spanish RC

IFRC/HRC is continuously adapting according to the changing needs on the ground, in line with the government and coordinating authorities. The challenges in this operation remain significant, some of which are listed below:

- While overall coordination, information sharing and contingency planning has improved it still remains a challenge among the stakeholders involved.
- Lack of information from the government on overall plan and/or new sites makes planning challenging. For example, some of the current established camps are only temporary and are anticipated to close in September. While transition plans are in progress but there is no definite outcome on this as yet.
- Lack of adequate interpreters fluent in Arabic and especially Farsi.
- After 20 March under the EU-Turkey deal, some hot spots were turned into “administrative detention centres”. Since then there has been a significant number of security incidents reported, putting IFRC/HRC staff and volunteers at risk and disrupting operations.
- While the migrants are no longer “in transit”, their movements remain fluid within Greece as people enter and leave camps spontaneously, with no formal registration in place. Systems differ from one camp to another depending on the authorities managing them. This makes targeting and counting of beneficiaries extremely challenging.

<sup>7</sup> <http://data.unhcr.org/mediterranean/documents.php?page=4&view=grid#page-5> – Greece sites 10 June 2016

## Coordination and partnerships

The International Relations Division of Hellenic Red Cross (HRC) is leading the coordination of response with support from the Red Cross Red Crescent Movement in the form of the deployment of RDRT members, FACT, emergency response units (ERUs) and delegates from different National Societies with specific technical skills. The Red Cross National Societies who have contributed so far to the deployment of the required profiles includes the Austrian, British, Bulgarian, Canadian, Danish, Finnish, French, German, Norwegian, Serbian, Spanish and Swiss Red Cross Societies.

The HRC has worked with the British Red Cross and the German Red Cross on a bilateral basis since the beginning of the operation. The HRC is currently working bilaterally with three Partner National Societies, namely, the Danish Red Cross and Swiss Red Cross. In addition the Spanish Red Cross is still in-country to give technical support (doctor and two nurses) on Chios.

The IFRC and the HRC are actively involved in the coordination platforms being set up for partners that have ECHO funding alongside other organisations such as UNHCR, IRC, SCUUK, Oxfam and Danish Refugee Council. These bodies will also hold regular meetings with the Ministry of the Interior (First Identification and Reception Service.). There are weekly general coordination meetings held by UNHCR in Athens and technical working groups for various sectors. An operational partnership meeting between Movement partners receiving ECHO funding took place in Athens from the 11-12 May. ECHO organises weekly coordination and update sharing meetings with partner agencies and the Ministry of Interior to which IFRC and HRC also attend.

The IFRC Regional Office for Europe regularly shares information with Partner National Societies on the situation and progress on the operation in addition to providing technical and surge support to the Greece operations team when necessary.

While the overall coordination responsibility lies with the Government of Greece, UNHCR has set up coordination structures at both field and central level, in collaboration with national authorities and partners, upon request by the Government. Regular participation on weekly coordination in these interagency meetings organized by UNHCR, provide more clarity and coordinated approach of the response to the most urgent needs of people stranded in Greece.

The ICRC coordinates its activities in Greece with the larger emergency response led by the Hellenic Red Cross and International Federation of Red Cross and Red Crescent Societies. ICRC's operations in Greece are part of the global Red Cross Movement response. In March 2016, the ICRC opened a mission in Athens to reinforce the ICRC cooperation with Greek authorities and the Hellenic Red Cross. Since May 2016 the ICRC fully supports the core costs of the HRC Tracing Service for their RFL response to migration and continues its technical guidance and training support in order to ensure connectivity along the migratory route and avoid disruption of family links. The ICRC strengthened its support to Greek authorities through monitoring visits of detention facilities. In this framework, a round table was held with directors and sub-directors of all pre-removal centres in Greece in March 2016. The workshop covered a wide range of topics including provision of information, organization of recreational activities and provision of healthcare. The ICRC has also strengthened its support to local forensic authorities and the Hellenic Coast Guard with a focus on appropriate identification procedures, training for first responders, provision of ad hoc material support and the dignified management of deceased migrants. In the first half of 2016, ICRC forensic specialist assisted in the response of two shipwrecks off the coast of Greece.

The HRC has coordinated with authorities including the Hellenic Police, Coast Guard, First Reception Service (FRS), Asylum Service, Regional Asylum Offices and Units as well as the Government of Greece Coordination Mechanism and Ministry of Health. At camp level, the coordination is maintained between the camp management (Military or Navy, MoH, MoM and the RC).

Lastly, the HRC and the IFRC have coordinated with the Assessment Capacities Project (ACAPS) which is a consortium of three NGOs who supports the humanitarian community with assessments. On 16 March, the HRC hosted a planning workshop which was facilitated by ACAPS to discuss possible scenarios and resulting humanitarian impact of the migrant crisis. The HRC and IFRC representatives, together with other humanitarian actors participated in the discussions. A report has been shared and will be useful during contingency planning. ACAPS published its [analysis](#) on 23 March.

The IFRC and HRC technical counterparts regularly attend technical working groups held in Athens (e.g. Health, WASH, Cash Working Group and CEA).

## Operational implementation

FOOD AND NON-FOOD DISTRIBUTIONS			
Outcome 1: The immediate food needs of the most vulnerable migrants are met			
Activities	Is implementation on time?		Comments/Status
	Yes (x)	No (x)	
<b>Output 1.1</b> <i>Migrants have access to appropriate food rations and cooking utensils</i>			
Procurement and distribution of individual food kits to migrants on the move (first phase) and as complement to food catering in camps	x		Ongoing
Procurement and distribution of household food parcels	x		In progress - to be procured and distributed from July monthly until January 2017
Procurement and distribution of kitchen sets	x		In progress. Distribution will start in August 16
In coordination with all agencies, contribute with cooking stoves for community kitchens (2,100 from Luxemburg RC bilateral contribution + 2,067 from Appeal)	x		In consultation with other agencies
Monitor and evaluate the distribution activities and provide reporting on distributions	x		Ongoing – assessment was done in May
<b>Outcome 2: Non-food items are provided to migrants in transit and stranded in Greece</b>			
<b>Output 2.1:</b> <i>Migrants receive essential non-food items such as baby kits, blankets, camping mats, sleeping bags, aluminium blankets, and duffle bags/back packs and storage boxes from the Hellenic Red Cross</i>			
Non-food items distributed (bed linens, blankets and sleeping bags)	x		Ongoing
Maintain a contingency stock of F/ NFIs: food kits; blankets and camping mats for 50,000 people to distribute in case of a new sudden surge of arrivals.	x		Procurement in progress

### Progress towards outcomes

From the beginning of the operation until as of 2 June, Hellenic Red Cross has distributed the following items in support of the migrants in Athens and the Attica region (Victoria Square, Eliniko, Eleonas, Piraeus, Skaramagas, Ritsona), islands (Rhodes, Crete, Samos, Kos, Lesbos, Chios) and northern Greece (Nea Kavala, Cherso, Idomeni, Diavata, Softex Kordelio).

**Fig 3: Total items distributed as of 2 June**

Distributions	
Beneficiaries	471,764
Water Bottles	292,524
Total Food	161,524
Total Hygiene items	165,536
Sleeping bags, mats and blankets	63,270
Clothing	19,484
Total NFI Other	223,551
Total all distributions	925,889



Skaramagas, Greece, 12 May 2016. Skaramagas is a relocation centre in Athens, which currently houses almost 3000 migrants. The Hellenic Red Cross, supported by IFRC and a Spanish Red Cross medical team, provides people with basic health care including paediatricians and midwives, psychosocial support,  
*Photo: Caroline Haga/IFRC*

During April, relief activities had to be suspended in most of the camps on the islands due to the social unrest among the migrant population, in particular at the detention centres after the EU-Turkey deal came into effect. A relief assessment on the main operational sites was conducted in May to plan for the provision of adequate, appropriate and timely support to refugees and migrants stranded in the country in accordance with humanitarian standards.

The relief plan of action was revised based on the following findings. Given the need to provide the refugees the right to determine what and when they eat, respect their cultural habits, humanitarian agencies are developing a communal kitchen strategy. This communal cooking space will permit migrants to continue to cook, maintain a level of self-determination, and provide an additional activity during the day, but in a way that reduces current fire risks (which is currently high, for example in Ritsona camp where the migrants are lighting fires for cooking in close proximity with their tents).

Part of the relief plan of action is to join this interagency effort to work within and through the communal kitchens which will slowly replace the catering currently done by the governmental authorities<sup>8</sup>. Therefore HRC would be distributing one-month food parcels for six months (August-January) with Cash Transfer Assistance as a supplement in order to procure fresh products (not part of the food parcel) and cover other basic needs such as clothing. To ensure that the items are culturally appropriate, the specifications of the parcel will follow those designed for the Syria Operation (below).

Related to the food strategy, the current plan includes the distribution of kitchen sets to facilitate the preparation of meals. At the moment, the HRC is working with the Luxemburg RC to procure 2,100 kitchen sets and stoves. In order to reach the total population targeted (2,900 HH), additional stoves and kitchen sets will be procured through the appeal to complement those from Luxemburg RC.

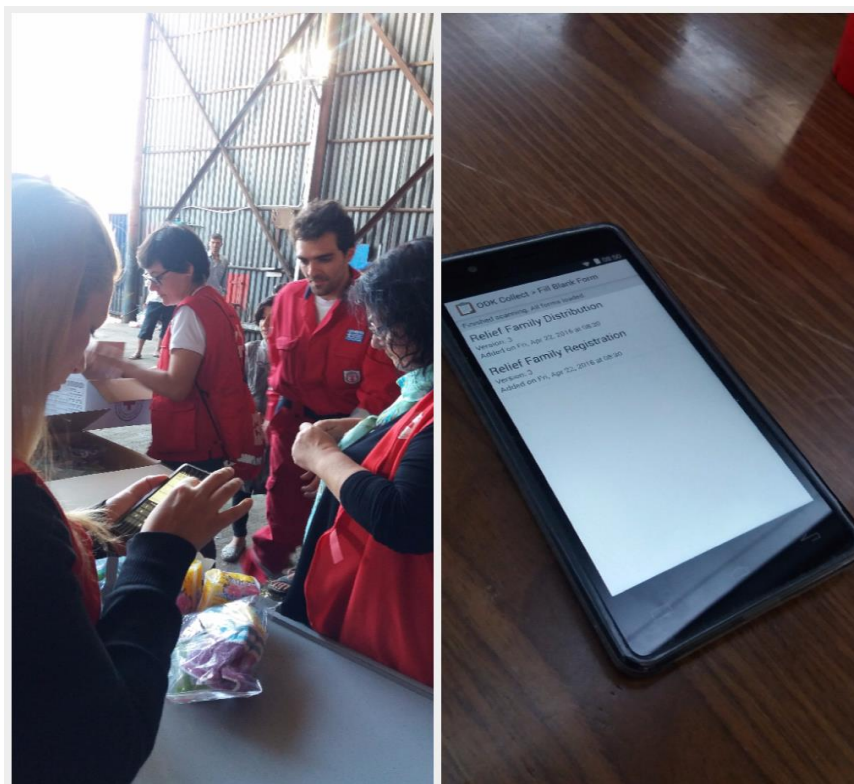
In addition, one of the main needs mentioned by refugees is the lack of sufficient clothing, particularly underwear, as well as items appropriate for the changing weather. However, the distribution of clothing in-kind is problematic as size, gender, age as well as cultural preference will need to be accounted for. For this reason the proposed approach is to satisfy this need through the cash transfer program to allow refugees to choose what they need (see progress on cash transfer programme below). The relief plan is now targeting 17,500 beneficiaries (3,500 households). The

Also, during the assessment several migrants mentioned the need for bed linen, some of it that could be used for privacy in addition to better sleeping conditions so the HRC will support with the distribution on some bed sheets.

As part of the relief strategy, the HRC will continue to distribute the food and non-food items currently procured and stored in the warehouse, ensuring that an amount is left for contingency, and procuring some additional sleeping bags (as stock is depleted), mid-term blankets, food kits to go and camping mats to be distributed during the coming winter months.

With the support of Spanish RC, the open data kit (ODK) system for the purpose of improved data collection was piloted during HRC's first distribution exercise in Skaramagas on 22 April. An hour-long training for HRC staff and volunteers was held at the HRC headquarters in the morning prior to the distribution. The pilot was a success and it is planned to use ODK for relief distributions in all sites.

<sup>8</sup> Danish Refugee Council did a cost analysis comparing the current cost of catering vs those of installing kitchens and providing food. It concludes that the change will reduce overall costs by approximately 2 million Euros, in addition to the psychological and social benefits



ODK - mobile phones being used to collect information during a distribution exercise in Skaramagas  
Photo: IFRC

#### Challenges:

The amount of resources and actors currently involved in the response is quite high for the number of people stranded in the country, which requires a conservative approach in terms of relief items to be procured to avoid accumulation of stock in the warehouse. However, the possibility of the EU-Turkey deal failing cannot be ignored as it can represent a drastic increase of refugees stranded in Greece.

<b>Outcome 3: Crisis affected households and host population are able to consume sufficient quantity and quality of food and have access to other essential basic needs without having to adopt harmful coping strategies.</b>			
Activities	Is implementation on time?		Comments/Status
	Yes (x)	No (x)	
<b>Output 3.1: Crisis affected households and vulnerable host population receive unconditional HRC cash transfer assistance for three months to meet essential basic needs</b>			
Assessment (including market): this has been informally done for the first distribution in Ritsona, but needs to also be done for other camp sites we plan to work in, particularly in the north	x		Completed for Ritsona as pilot project but need to continue with the other camps
Coordination with INGOs and Greek Government	x		Ongoing activity
Identification of Financial Service Provider		x	Finalising in mid-June
Risk assessment	x		Done early in 2016 but needs to be updated
Finalised MOU		x	Ongoing, expected to be completed by the end of June
Piloting of selected FSP and CTP approach		x	Will start in July
Production of vouchers/cash cards		x	Expected to start as soon as contract is

			finalised, but may spill over to July
Other activities		x	Will begin after CTP pilot commences in July

### Progress towards outcomes

The proposed CTP approach for this operation aims to provide a harmonized, scalable approach that can be implemented for this operation. This approach is to blanket distribute unconditional cash grants to all refugees/migrants registered in the selected camps to meet their specific basic needs for six months. The calculated monthly cash grant value is 250 euros for a family or 90 euros for an individual. Though calculated to cover procurement of fresh food products, clothing items, non-prescriptive medicines, communications and transportation costs, the cash grant will be unconditional for each individual to determine how best to spend the grant. This cash grant value is also comparable and in line with what the Greek government provides as part of their social programmes so as to not create feelings of inequality with the local population.

A pilot will be implemented to test this approach in order to replicate in other camps and to test the selected FSP as a viable delivery mechanism to go to scale. Any learnings and adjustments from this pilot will be made and shared to propose as the way to implement CTP to meet basic needs in camps in Greece.

Since this is supplementing the food parcel, CTP will be implemented in the same camps where relief activities take place. Considering the situational context and the set-up needed for CTP to go to scale, this will be done in a phased approach to reach 3,500 migrant households or an equivalent to 17,500 people. Once the system is in place, this programme can be expended rapidly if needed.

An international tender process for prepaid cards has been launched with the support of IFRC's Global Logistics Service. The process is anticipated to be completed by the end of June in order to begin implementing CTP as soon as possible. The first distribution in Ritsona camp is being prepared for July as soon as the service provider is finalised. The cash distribution will be a blanket distribution to everyone registered in the camp with families receiving EUR 250 and individuals receiving EUR 90. Activities such as registration, training volunteers and staff, as well as setting up the complaint/feedback mechanism is now underway. It is planned that this process will then be replicated in six other camps.

In the meantime, HRC/IFRC are also looking to begin cash distributions to the vulnerable host population in Greece. The selection process will be coordinated with HRC's social welfare and nursing divisions and other means of delivery mechanisms such as direct bank transfers are being explored while the international tender is continuing.

IFRC/HRC has been participating in the Athens' cash working group and ECHO partners meetings in coming up with a harmonised and coordinated approach to implement CTP in Greece.

The programme has been delayed due to the absence of a CTP coordinator. IFRC/HRC is in the process of recruiting a long-term CTP delegate. Meanwhile, temporary technical support have been received from the British Red Cross, Danish Red Cross and IFRC Geneva.

### Challenges/Risk

There is a risk of political acceptance and potential tension in the camps/host population from the cash distribution. However, the Ministry of Migration is well aware of agencies' plans and are included in the discussions. As other agencies are also beginning to distribute cash, this should not be an issue as this is unanimously seen as the way forward for a potentially long-term support. HRC/IFRC will also blanket distribute cash grants within the camp to reduce any tensions and continue to support some vulnerable host population for increased acceptance as part of the plan in the appeal.

HEALTH – First Aid			
Outcome 1: The immediate risks to the health of migrant population are reduced through provision of basic health care, first aid and referral services (first aid)			
Activities	Is implementation on time?		Comments/Status
	Yes	No	
<b>Output 1.1: Target population is provided with rapid management of injuries</b>			
HRC Samaritans, nurses and volunteers carry out rescue and first aid activities	x		Ongoing activity
Procure and distribute the first aid kits	x		Done

### Progress towards outcomes

The Rescue Team of the Hellenic Red Cross (as part of the Samaritans, Rescuers and Lifeguards Sector of the HRC) operates 24/7 all over Greece and consists of certified volunteers in specialties such as first aid support and rescue services, lifeguard services, transportation and distribution of relief items.

The greatest need was presented in Lesbos from early October until March-April (when the arrivals started to decrease) particularly on the coastline of Molyvos which was the main migration portal where the HRC Samaritans covered shifts from 6 a.m. to 12 p.m. The Rescuers there were covering daily a 16 km stretch from Limantziki beach up to Skala Sykamnias beach, on standby to provide rescue and first aid assistance to the migrants that were arriving on boats.

Also since December 2015, four HRC Rescuers covered the Apanemo camp in Molyvos within the bilateral project in cooperation with the Danish Red Cross, providing first aid. From February 2016 onwards, Piraeus became an informal settlement for the migrants despite the government's continuous efforts to evacuate the port. The Samaritans have been providing first aid services there on a daily basis.

First aid kits were procured for Samaritans, who provided rescue and first aid in Lesbos and Kos islands, Idomeni in the North and in Athens. First aid kits were also procured for nurses and volunteers in Chios (in the health camps), Samos, Idomeni, Athens and Diavata, who were providing first aid on an ad hoc basis.

As of 2 June, 3,437 first aid and 38,931 rescue services have been provided. The Samaritans continue to be active in all sites where RC operates, providing services in a shifts.

**Fig 4: Total first aid and rescue service provide**

Locations	Athens	Chios	Crete	Idomeni	Kos	Lesvos	Ritsona	Samos
<b>First Aid</b>	610	13		657	716	1,421	2	18
<b>Rescue</b>			457			38,474		

HEALTH – Basic Health Care			
Outcome 1: The immediate risks to the health of migrant population are reduced through provision of basic health care, first aid and referral services			
Activities	Is implementation on time?		Comments/Status
	Yes	No	
<b>Output 1.2: Target population is provided with Basic Health Care services in established facilities</b>			
<b>Providing basic health care</b>	x		Done
Review and implement MSF clinical treatment guidelines (switch to Hellenic MoH Guidelines once available)	x		In progress
Develop medication procurement standard list and consultation process with teams	x		Being finalised
Work with logistics to procure standard drug list	x		In progress
BHU transition process (Deadline 16 September 2016)	x		Deadline in September; preparation in progress
<b>Establishing referral mechanism</b>	x		Patients are being referred but further work is needed for an efficient system in place
Recruitment of a local referral officer Work with MoH for approved transportation via local municipalities Health Mapping and RC referral network Implementation of CTP for agreed chronic health conditions (transportation, appointment and medicines) Undertake health education and activities at each site (chronic diseases, ANC etc)	x		In progress
<b>Provide reproductive health services</b>	x		In progress
Provide antenatal care to pregnant women; Establish baby tents for breastfeed support; Family planning support (gynecologist); Referral for delivery services	x		In progress
MUAC screening of every patient attending the clinic aged < 5 years Facilitate referral and support of malnourished children on a case by case basis	x		In progress
Procure and distribute the medicines and medical kits to all health clinics as needed	x		Ongoing
<b>Output 1.3: Disease prevention and health promotion is provided in accommodation facilities</b>			
Collect the health data through the ODK information system and follow up the health trends for early detection of infectious diseases and outbreaks	x		Ongoing process
Prepare and distribute the health education material including breastfeeding in Arabic and Farsi		x	Ongoing
Mobilize the migrants for vaccination following the Government request and guidelines; Carry out the vaccination campaign in cooperation with the MoH and coordination with other agencies		x	Following the MoH time-schedule – to begin late June.

Since September 2015, the emergency response units (ERUs) were mobilized to support HRC in providing basic health care (BHC) to the stream of migrants entering Greece – Spanish RC (ERU) in Samos and Chios islands (entry points), and Norwegian/French/Canadian Red Cross ERU in Idomeni in the north, close to the border (exit point).

From October-December 2015, a total of 27,499 consultations were provided by the ERU teams working in close collaboration with the staff from HRC's Nursing Division to ensure continuity of health services after the deployment of the global response tools. A referral path was established through the border in Idomeni with support of the Macedonian Red Cross from the other side, considering that the medical facility in the former Yugoslav Republic of Macedonia was nearer to Idomeni (this eventually stopped after the closing of borders).

In January 2016, the SRC ERU handed over its services, medical supplies and equipment to the HRC in Samos and Chios, but continued supporting the BHC unit in Chios with medical staffing. In Idomeni, the Norwegian/French/Canadian Red Cross ERU team ended its mission and handed over activities to the HRC, as well as medical supplies and equipment. During the last week of February, the Hungarian Red Cross medical team (and later Austrian Red Cross) started supporting HRC, covering Idomeni. The HRC medical staff also began providing BHC services in Diavata (with support from Italian Red Cross), which was newly established in northern Greece.

During the reporting period, HRC also provided BHC services to the migrants in Athens – Eleonas and Piraeus (from February onwards) as well as on various squares and streets on an ad hoc basis.

Following the closure of borders in February and subsequent complete closure in March, new camps began opening in various parts of the mainland to accommodate the migrants stranded in the country. The FACT health and WASH teams were invited to conduct further assessments due to the changing situation, which resulted in the much needed scaling up of health services in existing and new camps. Subsequently, two additional ERU teams arrived in the country to support the HRC in Cherso and Nea Kavala camps in northern Greece (Finnish-German RC for Health and Austrian-British RC for WASH) by mid-March, and further, Skaramagas and Ritsona camps (Spanish RC/French RC) in Attika and Central Greece in April.

With migrants now staying longer in Greece, the Basic Health Care team started offering a wider list of services based on needs, while maintaining the flexibility to respond to unmet humanitarian needs, continuing with consultations and referrals, and including reproductive health services and screening of nutritional status of children under 5. It is also planned to participate in vaccination campaigns (end of June) in cooperation with the Ministry of health and other stakeholders, and carry out health education/promotion activities in a camp through the community-based approach. In agreement with the leadership of HRC, it was decided to continue implementing BHC activities in eight camps, and no expansion is foreseen at the moment. In Piraeus, The assistance involves the Samaritans providing the first aid, and nurses that carry out referrals to the medical facilities. There is no Red Cross BHC facility there, as number of patients is considerably low. A mobile health unit (MHU) started operating by the end of May with two vehicles being used up north. With the opening of Kordelio-Softex camp during the end of May, the ERU team started providing services there through the MHU.



Finnish pediatric surgeon Kari Vanamo taking the blood pressure of its first patient at the Finnish Red Cross clinic at Cherso refugee camp. The child had lost her father 40 days ago and was suffering from stomach aches.

*Photo: Maria Santto*

**Fig 5. Basic health facilities established and implementing actors**

Locations	Chios	Samos	Idomeni <sup>9</sup>	Diavata	Nea Kavala	Cherso	Ritsona	Skaramagas	Athens/ Piraeus	Kordelio
Red Cross	HRC/ Spanis hRC	HRC	HRC/ HungRC AustRC	HRC/ ItaRC	ERU FinRC/GRC		ERU SpRC/FrRC		HRC (nurse s)	ERU FinRC/Ge RC

**Fig 6. Basic health facilities services provided as of 2 June 2016**

Locations	Chios	Samos	Idomeni	Diavata	Nea Kavala	Ritsona	Cherso	Skaramagas	Athens	Kordelio	Total
Basic health care (incl. ERU and nursing)	11,140	8,823	16,876	4,112	5,944	1,815	4,631	1,549	6,418	398	<b>61,753</b>

Out of the total health visits, 969 cases were referred to external health facilities (hospitals, and other specialized medical facilities). In urgent cases the MoH avails its ambulance services to provide transportation. However, there is an issue of transportation of non-urgent cases to the external medical facilities for further tests, consultation or/and treatment. The EKEPY, the National Health Operations Centre of the MoH is trying to establish a mechanism for transportation, but this takes time. This remains an issue for consideration for the HRC/IFRC.

From January 2016, the Spanish RC ODK team developed the Open Data Kit (ODK) for data collection and reporting. For health, HRC started using the ODK in Samos, Chios and Idomeni BHC centres. HRC medical teams were trained on data entry, and the HRC managers – on reporting. In March 2016, after the number of BHC facilities increased from three to eight, the ODK team trained all implementing RC actors in all targeted camps, in consultation with the HRC, the IFRC and other participating PNSs updated the ODK forms, simplified it and made more user-friendly.

In April, the KEELPNO, which is a centre for disease control of the MoH, started piloting the use of surveillance forms to collect the health data in camps and follow up on health trends for early detection of infectious diseases and outbreaks. From the end of May all camps (including RC targeted ones) are involved in disease surveillance, reporting on the cases according to the final form on a daily basis.

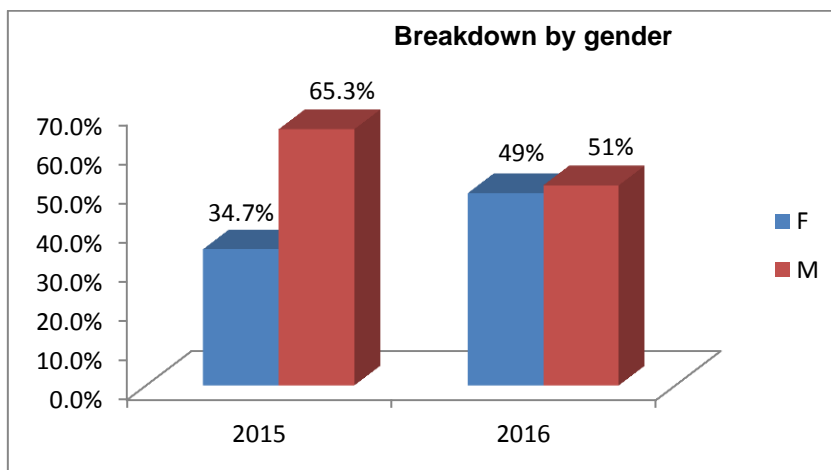
In terms of Red Cross reporting and monitoring, besides using ODK, weekly situation reports are prepared and shared by the field coordinators of the respective areas. Field trips serving as monitoring visits are also scheduled to observe the situation on the ground and improve the delivery of services.

### **Analysis of consultations**

The ratio of children under five receiving health services is almost the same in 2015 (17.5%) as in 2016 (18.8%). The age breakdown by other age categories started in 2016, and it shows that the highest number of visits (50.7%) were by migrants within the age range of 18-49.

Among the 82.5% migrant population over 5 years of age, females were a minority (34.7%) in 2015. As of the end of May 2016, the ratio of female patients showed a significant increase. Please refer to the graph below.

<sup>9</sup> Idomeni was evacuated in May

**Fig 7: Breakdown by gender and ratio of female and male among over 5.**

The spectrum of the most frequently diagnosed diseases was the same in 2016 comparing with 2015 - upper respiratory diseases were the highest (7,961), followed by wounds, burns and trauma (2,997) and musculoskeletal problems (2,294). It should be noted that the rate of upper respiratory diseases in Jan-May 2016 reduced from the high number reported in Oct-Dec 2015.

Also, gynaeco-obstetric support was provided in 941 cases and antenatal care in 270 cases. Pregnant women were referred to the external facilities for delivery. There was a high number of toothache cases (1,241 – 4%) which confirmed a need for establishing dental care services in the camps. Health Point Foundation (HPF), specialising in dental care recently started visiting Red Cross targeted camps in the north on a weekly basis, seeing some 50-70 patients each time. Since then, the number of dental cases reported in the BHC facilities have reduced.

The standard list of medicines for procurement has been prepared and shared with logistics; medical kits and consumables are also in the procurement pipeline.

In addition the operation also focuses on strengthening and scaling-up the key intervention areas where HRC is already playing an active role in providing assistance not only to the migrant population but to the host communities as well. This is achieved by absorbing some of HRC's current programming costs under this appeal, namely the operation costs of two primary health care centres in Athens and the Attica region (Ampelokipi and Aneliosia) which have been in operation for a long time. These centres, with services provided by nurses, paediatricians and gynaecologists, target persons and families with low social and financial status as well as a diverse population of migrants, Roma and unemployed persons; offering services such as mother and child healthcare and consultation services, home visits for health checks, school hygiene and health education activities, vaccination programmes and diseases surveillance with collaboration with the Ministry of Health. A total of 2,897 beneficiaries were assisted in Aneliosia and 2,507 in Ampelokipi during the reporting period.

### Challenges

With the ongoing BHC services in all targeted locations, recruitment is still needed to cover the needs of beneficiaries, as well as for continuity of the activities after the ERUs leave. This process has been in progress since January 2016, but is taking a long time due to two issues that are not supporting this process – the challenge of finding the professionals, and the legal process needed for contracting staff. Fortunately, this later issue has been resolved in mid-June as the IFRC signed a contract with a recruitment/hiring company in Greece to hire staff on behalf of the IFRC/HRC.

HEALTH – Psychosocial Support			
Outcome 2: Migrants and HRC staff and volunteers in the operation have access to PSS			
Activities	Is implementation on time?		Comments/Status
	Yes	No	
<b>Output 2.1: Migrants are provided with Psycho Social Support</b>			
PSS/PFA services to the migrants are provided	x		Ongoing
Provide basic first aid training for migrants Review and implement MSF clinical treatment guidelines (switch to Hellenic MoH Guidelines once available)	x		In progress
Develop key messages, methodologies and material for PSS	x		Being finalised
Establish Female Friendly Spaces and carry out tailored activities	x		In progress
Provide basic first aid training for migrants		x	In progress
<b>Output 2.2: Child friendly spaces provided</b>			
Establish new child friendly spaces as needed	x		In progress
Procure and replenish the material for CFS	x		In progress
<b>Output 2.3: HRC staff and volunteers receive PSS sessions</b>			
PSS/PFA services to the migrants are provided	x		In progress
Carry out on-the-job training and coaching of PSS officers and volunteers	x		In progress
<b>Output 2.4: HRC staff and volunteers receive PSS sessions</b>			
Provide PSS support to the HRC staff and volunteers engaged in the operation, including referrals if need		x	Delayed due to staffing issues. In progress

### Progress towards outcomes

As of 2 June, the number of PSS services to both adults and children are as follows:

**Fig 8: Total PSS services provided**

Locations	Chios	Samos	Kos	Lesvos	Athens	Ritsona	Idomeni	Diavata	Nea Kavala	Cherso	Total
<b>PSS and counselling: # of services provided</b>	17,879	9,338	131	3,722	10,069	25	1,316	521	34	24	43,059
<b>Children's activities: # of visits</b>	6,337	5,258	266	581	4,146	564	2,159	1,918	11	33	21,273

*Psychosocial support* is a process of facilitating resilience within individuals, families and communities through the provision of basic services and security, community and family supports, focused non-specialized supports and specialized services. The focused non-specialized aspect includes *psychological first aid*, as a practical method for providing initial support to people in crisis situations that aims to reduce their distress.

From the beginning of the operation to reporting date, psychosocial support (PSS) services have been provided in Chios, Samos, Kos, Lesvos, Idomeni, Cherso, Nea Kavala, Diavata, Piraeus, Eleonas, Skaramagas and Ritsona. This consists primarily of direct PSS services provided to migrants, including Psychological First Aid (PFA) and meaningful activities (education, women groups, etc.) and the creation of child-friendly spaces with recreational activities on site. While the creation of child-friendly spaces were the core activity of PSS targeting children the focus is starting to shift to adults identified as vulnerable.

The Spanish Red Cross ERU is providing PSS services in Ritsona and Skaramagas in collaboration with the HRC. In Ritsona a child-friendly space is offering services to children daily from 10:30 to 13:00 and female-friendly space is in place for activities targeting teenage girls two evenings per week. Both activities count on the support of volunteers from the migrant community. The team is also engaging with community leaders and other organizations to provide activities for children and adults. For instance, during the reporting period there has been collaborations with the Red Noses Clown Doctors International who are now going to Ritsona every Friday morning to raise awareness on educational values. Other activities currently being planned in this camp include creating a garden with children, offering activities for families and treasure hunt.

In Skaramagas, ERU delegates and HRC staff are providing individual support through a social worker five days per week and meaningful activities for adults. At the moment the activities include:

- **Physical activities:** Spaces to play Football, Basketball and Volleyball have been determined in the camp and migrants received information about the activities, how to organize and materials to play.
- **Movie nights:** This activity has just started and the current plan is screening movies for adults two days per week, one in Arabic and the other in English with Arabic subtitles, and family movies two days per week.
- **Folk tales event:** Migrants from different communities within the camp reunited to share folk tales from their countries.

Other planned activities in Skaramagas include wall painting, a child-friendly space for adolescents every morning, activities for vulnerable groups like women and young people as well as workshops for different activities, regular meetings with camp coordinators as well as establishing an information board.

In the north, the Norwegian/French/Canadian RC ERU was the only organization offering PFA and PSS activities in Idomeni. The Finnish Red Cross started providing PSS services in Cherso and Nea Kavala in May. So far in Cherso a series of activities are in place:

- A group for women community leaders has been established. They reinforce their circle and plan ways to offer their support to others when needed. They have also begun teaching children.



Children's drawings in Ritsona camp.  
Photo: IFRC, May 2016



Piraeus port, Athens, Greece, 17 March 2016. With the support of the International Federation of the Red Cross and Red Crescent Societies and National Societies around the world, Hellenic Red Cross provided child-friendly space in Piraeus. Photo: IFRC

- A group for young men reunites regularly to speak about their concerns, fears and personal issues. Besides that, the same group has been gathering daily for English lessons and support with an identified leader and teacher. An English teacher will be hired to continue supporting this group.
- A Child Friendly Space has been active twice, the first time with 20 children and the second time with 13 children, assisted by 2 volunteers.
- Counseling for vulnerable cases referred by medical staff.

In Nea Kavala the activities in place are as follows:

- A group for women community leaders in collaboration with UNHCR to discuss current issues they are facing and look at possible solutions.
- A Child Friendly Space was activated twice, the first time with 6 children and the second time with 5 children.
- Counseling for vulnerable cases referred by medical staff.

In Diavata the HRC runs a child friendly space three times per week and offers PSS services four times per week in collaboration with other organizations.

An IFRC and HRC PSS coordinators were appointed in May to oversee and coordinate all activities. The PSS coordinators started working in May and has initiated supporting the coordination of activities in all sites. The Spanish Red Cross has started training volunteers in the Attica region. So far they have been trained in psychosocial support, psychological first aid and stress management. Further training sessions addressing interventions with children and training of trainers are already being planned. A series of trainings developed by the HRC will follow in the coming months, along with PSS services for HRC volunteers and staff working in the operation. This activity has been delayed due to current challenges in personnel recruitment, but will shortly be in place.

WASH			
Outcome 1:: Immediate reduction in risk of waterborne and water related diseases in targeted camps and improvement of the hygiene situation of the population			
Activities	Is implementation on time?		Comments/Status
	Yes	No	
<b>Output 1.1:</b> Continuous assessment of water, sanitation, and hygiene situation is carried out			
<ul style="list-style-type: none"> <li>• Assessment of the existing situation</li> <li>• Sharing and discussion on assessment results</li> <li>• Adaptation of all WASH related issues according to assessment results</li> <li>• Adaptation of HP approach according to assessment results and hardware adapted</li> </ul>	x		Ongoing activity
<b>Output 1.2:</b> Adequate water and sanitation which meets Sphere standards in terms of quantity and quality is provided to target population.			
<ul style="list-style-type: none"> <li>• Baseline survey carried out</li> <li>• Surveys every 3 months</li> <li>• Latrine, shower and laundry facilities construction, improvement and/or contracted</li> <li>• Environmental management activities (solid waste, drainage and vector control)</li> </ul>	x		Ongoing activity
<b>Output 1.3:</b> Hygiene promotion activities which meet Sphere standards provided to target population.			
<u>HP activities around:</u> <ul style="list-style-type: none"> <li>• Provision and use of water and sanitation</li> </ul>	x		Ongoing activity

<ul style="list-style-type: none"> <li>facilities</li> <li>Environmental sanitation campaigns</li> <li>Menstrual Hygiene Management MHM taking in consideration different culture of beneficiaries</li> <li>Creation of IE material for the different activities</li> <li>Interventions in cooperation with Red Noses Clowns</li> </ul>			
<b>Output 1.4: All women and girls of menstruating age are provided with the necessary privacy and appropriate material for Menstrual Hygiene Management</b>			
<ul style="list-style-type: none"> <li>Ensure that proper facilities are provided with respect to privacy and hygiene</li> <li>Distribution of MHM items according to needs</li> <li>HP around MHM taking in consideration different culture of beneficiary groups</li> </ul>	x		Ongoing activity
<b>Output 1.5: Hygiene-related goods (NFIs) which meet Sphere standards are provided to the target population</b>			
<ul style="list-style-type: none"> <li>Distribution of hygiene items according to needs assessment</li> <li>Set up of community kiosks for hygiene item distribution</li> </ul>	x		Ongoing activity
<b>Output 1.6: HP training of trainers conducted according to RC standard and HP messages passed to National Society HP volunteers</b>			
<ul style="list-style-type: none"> <li>Conduct HP Training of Trainers ToT</li> <li>Conduct HP training in HRC branches</li> <li>Preparation of ToT material to be used in trainings</li> </ul>	x		Ongoing activity

### Progress towards outcomes

From January to March 2016, water and sanitation and hygiene (WASH) activities were limited primarily to distribution of hygiene items and minimal hygiene promotion activities. When the borders eventually closed in March, and camps to accommodate the stranded migrants started opening around mainland Greece, it was apparent that the plan of action for WASH needed to be scaled up to cater to the urgent needs on the ground.

With WASH identified as an urgent need in the assessment carried in March 2016, the initial strategy was drafted and logframe defined. In mid-April, a FACT WASH delegate joined the IFRC team and in May 2016 the plan of action for WASH was revised and modified according to the evolution of events on the ground.

Similarly to other relief items, the HRC has been distributing personal hygiene kits and items since the start of the operation. A standard hygiene kit includes toothbrush, toothpaste, soap bar, shampoo, towels, band aid, zip lock bag and moist tissue. However the delivery of the hygiene kits have been reconfigured to suit a longer-term approach. This approach is based on the provision of a camp kiosk where hygiene items (with more items included) are distributed on a needs basis, and will be implemented in the coming months.

**Fig 9: Total hygiene items distributed as of 2 June 2016.**

Locations	Athens	Chios	Diavata	Idomeni	Kos	Lesvos	Nea Kavala	Ritsona	Samos	Skaramagas	Total
Hygiene items	22,830	1,847	46,695	40,799	4,678	28,479	5,359	1,746	4,445	8,658	165,536

The Spanish-French Red Cross health emergency response unit (ERU) was mobilized in supporting the HRC in providing basic health care and WASH (with focus on hygiene promotion) services in Ritsona and Skaramagas in Attica. Ten migrants at the Skaramagas camp were trained on waste and garbage collection and were also provided with cleaning equipment.

During the reporting period the British-Austrian Red Cross ERU teams have also been based in Cherso and Nea Kavala to improve WASH related matters with a focus on hygiene promotion. Activities include weekly distribution of soap and waste bags to each tent (460 tents) by the hygiene promotion teams.

In addition, clown shows in cooperation with 'Save the Children' were conducted on the proper usage of toilets and safe disposal of plastic bags. Weekly hygiene promotion games with children have also been organised. As a result, improvements to hygiene practices have been noticeable in Cherso and Nea Kavala as well as to sanitation hardware in both camps. Further, WASH activities contributed to the overall improvement of the situation in the camps with the distribution of hygiene kits, scale up of migrant volunteers, increase of privacy in sanitary facilities, Red Noses clowns with HP messaging, clean up campaigns, provision of water points and sanitary facilities, set up of community kiosks for hygiene items distribution, hygiene promotion activities, information boards and mapping. A baseline assessment was carried out in all the camps in order to monitor the evolution of services and perception of the migrant population related to WASH interventions. A lot of work remains to bring all camps to Sphere standards and the WASH team continues increasing its support to authorities and other agencies in order to cover the gaps and provide a dignifying service to the migrant population.



Nea Kavala, Greece. Clown show organized by community volunteers to disseminate hygiene promotion messages.

Photo: IFRC

On the islands interactive and fun hygiene promotion activities for children were conducted to educate them on the correct techniques of hand washing, and oral and personal hygiene. For women with babies, demonstrations were conducted on the correct way of changing diapers and taking care of babies. In Chios, distribution of leaflets and dissemination of health messages, and handwashing demonstrations were carried out in the hosting camp in Souda by the HRC nurses and volunteers. In Lesbos, hygiene leaflet distribution and brief sessions (15 minutes) on personal hygiene by volunteers were implemented.

In April a training of trainers (ToT) on hygiene promotion was conducted on the premises of Thessaloniki Red Cross offices with the aim of strengthening the HRC on conducting hygiene promotion. A total of 19 staff and volunteers from HRC, including nurses, social workers, Samaritans, who are based in various parts of Greece, and cascading of training at branch level has already started.

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### Challenges

Internal drawbacks in terms of cash flow and ERU/IFRC/HRC procedures have been worked out and are presently aligned with the needs in the field. However, an important limitation is the lack of information shared by the authorities and uncertain future of the camps and migrant population. In addition, the living conditions for the beneficiaries remain still relatively poor. The sanitation facilities are lacking on all three sites and can be described still below SPHERE standards.

RESTORING FAMILY LINKS			
Outcome 1: Families are kept united and family links are restored wherever people are separated from, or are without news of, their families			
Activities	Is implementation on time?		Comments/Status
	Yes	No	

<b>Output 1.1: Families and vulnerable groups (UAM) have access to RFL services</b>			
<ul style="list-style-type: none"> <li>• Prepositioning of RFL equipment and services in most affected areas of entry as well as migrant camps (including detention camps).</li> <li>• Identification of families in need of RFL and UAM tracing requests registered</li> <li>• Tracing requests monitored.</li> </ul>	x		Ongoing activity
<b>Output 1.2: People in affected areas and relatives outside these areas have access to appropriate means of communication<sup>10</sup> to re-establish and maintain contact with loved ones</b>			
<ul style="list-style-type: none"> <li>• Providing free telephone calls for new arrivals</li> <li>• Distribution of prepaid cards</li> <li>• Mobile charging stations and Wi-Fi services provided</li> </ul>	x		Ongoing activity
<b>Output 1.3: Prevention of secondary separation</b>			
<ul style="list-style-type: none"> <li>• Advocacy of RFL services to authorities and interlocutors</li> <li>• Dissemination of RFL services to migrants</li> </ul>	x		Ongoing activity

### Progress towards outcomes

As per mandate the Tracing Service of the HRC aims to keep families united by making RFL services available to all migrants in need. From September up to March 2016 the Tracing Service struggled to cover the RFL needs of the many migrants on the move who considered Greece as a transit point on their way to Europe. The Tracing Service had elaborated and implemented an operational plan focusing on the key areas which included meeting RFL needs with RFL staff field visits and the expansion of RFL volunteers. In addition to planned actions, RFL teams cooperated closely with ICRC on forensic matters, as the migration route passing through Greece has been proven fatal. RFL teams responded to 14 tragic shipwrecks and sea incidents that happened in the period September 2015 – May 2016, collected tracing requests, conducted lists of missing and provided communication means to survivors.



Mobile charging station offered as part of the RFL service. Photo: HRC

HRC registers and traces missing family members globally (i.e. cross-border tracing), in cooperation with the International Family Links Network. Migrants in Greece are helped to establish contacts with their families through the Red Cross via mobile Wi-Fi communication sets and battery charging units for recharging mobile phones wherever it is needed. In addition to the traditional Red Cross Messages and salamats, three minute phone calls are provided to migrants wishing to restore and maintain family contact with emphasis to unaccompanied minors and vulnerable. The RFL team also provides information to prevent family separation during the migrant transits.

RFL volunteers are equipped with mobile phones, pre-paid phone cards and RFL USBs containing basic RFL instructions and forms. They are able and ready to provide brief phone calls, take photos for the Trace the Face program, register separated and unaccompanied minors for RFL purposes, and collect tracing requests. All their actions are coordinated by the HRC Tracing Service in Athens, and it is at the tracing service where all RFL information has been centralized.

<sup>10</sup> E.g., telephones, safe and well messages, call centre notifications, media and web publications of safe and well lists

As of 31 May, HRC reported that 6,500 migrants have been assisted directly through HRC tracing Services, and overall, more than 15,000 migrants had been helped by RFL and tracing services across all locations; In addition, more than 3000 three-minute calls have been offered.

In February 2016, the employment of an RFL officer for northern Greece attached to the Thessaloniki Branch aimed to boost RFL activity in the region. The whole of March was spent training the field officer and the development of a local RFL volunteer-team. Since late March, the RFL teams covered Idomeni and Diavata and expanded activities to Cherso and Nea Kavala in Kilkis prefecture. Moreover, ad hoc presence at Orestiada has been the case with main activity the installation in cooperation to ICRC of Wi-Fi to the First Reception Center in order to cover migrants' communication needs.

In Attika, further to regular RFL activities, a weekly presence at Elliniko Transit Centre I, II and III and Schisto is ongoing and ad hoc visits to Eleonas Camp are organized upon request. RFL volunteers also visit Amygdaleza pre-removal center for minors each Monday offering three minutes phone calls and distributing telephone cards to minors.

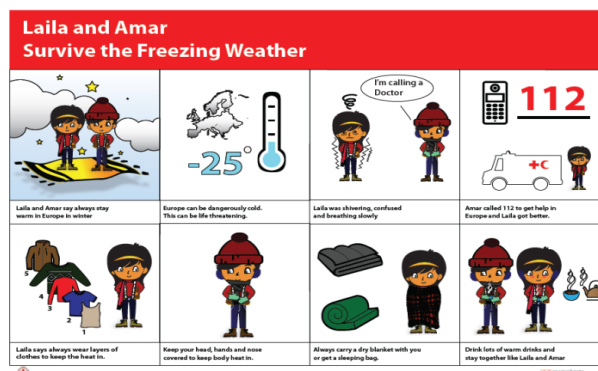
IFRC is supporting HRC RFL activities through this Emergency Appeal, in close coordination with ICRC. Currently the costs for the various activities are shared between ICRC and IFRC, with ICRC also providing technical support to HRC.

COMMUNITY ENGAGEMENT AND ACCOUNTABILITY			
Outcome 1: Red Cross contributes to better informed migrant populations in Greece and to sensitize host communities			
Activities	Is implementation on time?		Comments/status
	Yes	No	
<b>Output 1.1</b> Red Cross provides relevant, timely and reliable information connected to the main information needs of migrants communities			
CEA initial assessment	x		Completed
FAQ and response guides	x		In progress
Provision of information through the IFRC-HRC Migration Platform portal	x		In progress. To pilot in July.
Production of audio recorded information programs	x		In progress
Production of posters and other graphic material	x		In progress
Set up mobile phones charging stations and Wi-Fi spots	x		In progress
<b>Outcome 2: Implementation of RC programming is improved by taking into account migrants' feedback engaging them actively in the definition and implementation of Red Cross activities.</b>			
<b>Output 2.1:</b> Migrants are engaged in two-way communication, incorporating migrants' opinions and needs to improve the definition and implementation of RC programs			
Conduct periodic surveys and FGD among migrant population	x		Ongoing activity
<b>Output 2.2:</b> Promotion of the active participation of migrant population in the improvement of the living conditions of the reception sites			
Identification of key community leaders and volunteers from migrant communities	x		In progress
<b>Outcome 3: CEA is integrated in all the programs as a transversal cutting approach</b>			
<b>Output 3.1:</b> Hellenic Red Cross and Participating National Societies incorporate CEA approach within their programs			

Identification and training of focal CEA persons at sector (Basic Health, WASH, Relief Distribution, PSS, Cash Transfer Program, etc.) and geographic level (HRC branches)		x	In progress
Define Standard Operational Procedures, methodologies and guidelines to develop CEA as a cross-cutting approach to all programs	x		In progress

### Progress towards outcomes

From the beginning of the operation to March 2016, most of the community engagement and accountability (CEA) activities were targeted on Lesbos island in the form of one-way information provision to the migrants. Audio recorded programs and messages (“The Red Cross Walkie-Talkie information service”) were produced and played on mobile loudspeakers in Lesbos informing migrants on administrative procedures to facilitate their registration and their access to basic services at transit and reception sites. This information was complemented with the production of other more in depth thematic programs aimed to provide practical advice regarding migrants’ wellbeing and safety concerns. These programs have been done incorporating migrant voices to illustrate the program contents. In this line, it was produced a program in Arabic and Farsi aimed to provide psychosocial support on the ways to cope with the stressful conditions faced during the migrants’ journey. In addition FAQ guides were developed and provided to the volunteers to facilitate better engagement with the migrants.



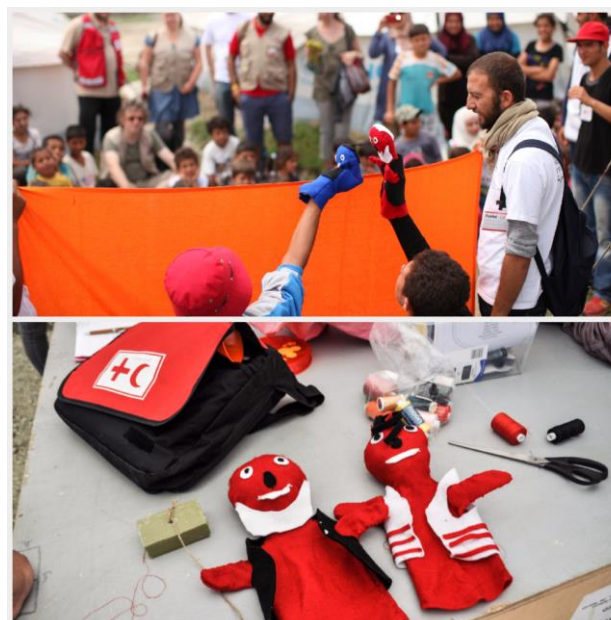
Since the closing of the “Balkan route” in March, the new context required a change in the CEA operational strategy basing more on strengthening two-way communication, collecting and responding to migrant feedback and facilitating an increased community engagement in the provision of Red Cross services and in the improvement of the living conditions in the camps.

A multi-sectoral assessment, taking into account a CEA perspective was conducted during March-April 2016. The assessment identified huge gaps of available information flow to the migrants as well as their voice being heard. Therefore, one of the main recommendations from the assessment was the need to incorporate CEA as a transversal approach within the different technical sectors of the Migrant Population Response Program.

In order to facilitate the integration of CEA as a cross-cutting approach within the different programs and within the structure of the Hellenic Red Cross, a CEA focal person from the Hellenic Red Cross was identified in May to be integrated in the program operational structure. Similarly, to reinforce the integration of CEA activities in the daily work of Red Cross teams at site level, CEA site-level focal points will also be recruited.

### Virtual migrant platform

IFRC is jointly working with HRC on the development of a virtual migrant information platform. The web application is meant to provide information to migrants to support them at times of vulnerabilities or when in need. It will be the entry point to share with migrants useful information, provide answers to common questions, provide information on services offered by the Red Cross where they live – whether in camps or in urban settings – link them to news services and link in existing applications developed by National Red Cross and Red Crescent Societies, partner organizations or other actors. This information will be



Migrants involved in puppet show in Nea Kavala.  
Photo cred: IFRC

accessible to the migrant communities via a virtual platform (the IFRC Virtual Volunteer platform) which will be tested in July.

The virtual platform is to be initially piloted in Greece and Sweden and to be progressively extended to other European and non-European countries within the migration trail of migrant and refugee communities. The initial pilot phase will be launched in July 2016.

### Collection of community feedback

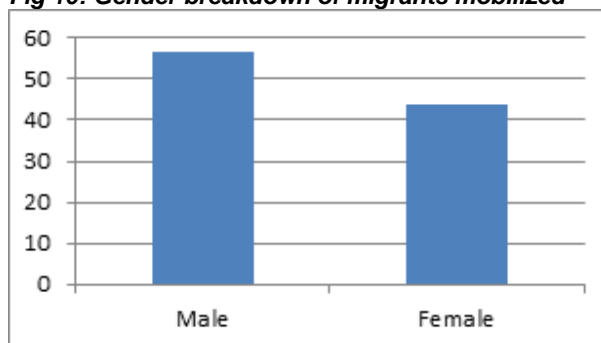
In order to collect community feedback on Red Cross services provided at site level, a community-based assessment was conducted from 5-10 May to identify migrants' needs and perspectives regarding the distribution of food and NFI items. The assessment covered sites where the HRC/IFRC/PNS conducted their operations in Central Macedonia and Thessaloniki (Diavata, Idomeni, EKO gas station, Nea Kavala, Oreokastro and Cherso), Attica region (Skaramagas) and Central Greece/Thessaly area (Ritsona). Migrants from different nationalities, ethnic background and gender characteristics were selected to give their opinions.

### Community Engagement

The Red Cross technical sector teams operating at site level have started to identify relevant community leaders and migrants willing to support and be actively engaged in the different services and activities of the program. This active engagement of migrant community members is especially relevant as interpreters in community-based services such as health and hygiene promotion, and PSS activities (child friendly space, women safe space and education and recreational activities with young and adults). They are also supporting the maintenance and cleanliness of the BHC units at site level.

At the end of May 2016 a community engagement profile assessment was conducted in the sites where Red Cross has a more permanent presence (Skaramagas, Ritsona, Nea Kavala, Cherso, Diavata, Kordelio and Chios). The profile collected disaggregated information to identify the number and demographic profile of the migrant population living in those sites who are collaborating in supporting Red Cross services and activities. The figure of this profile shows a total of **94 migrant persons supporting the activities of Red Cross** and contributing actively to the improvement of the living conditions of the sites where they are living, namely Nea Kavala and Cherso (Central Macedonia and Thessaloniki area) in Ritsona (Central Greece/Thessaly area) and Skaramagas (Attica) sites. From this total **56.4% are men and 43.6% women.**

Fig 10: Gender breakdown of migrants mobilized

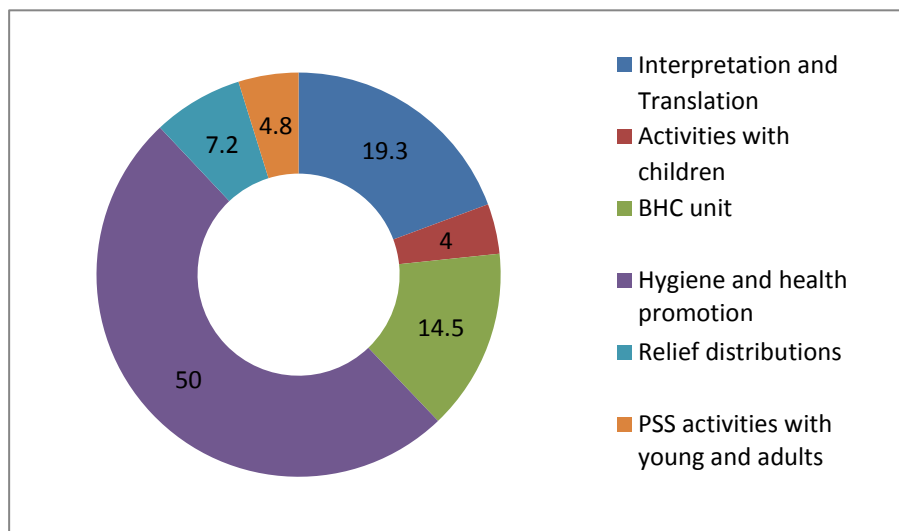


The age distribution of these migrants show a similar distribution between those aged **below 25 years old (46%)** and those **more than 25 years old (48%)**.

In relation to the distribution by nationalities of these migrants a significant majority are **Syrians (70.2%)**, followed by **Iraqis (27.6%)** and only **2.1% Afghans**. This distribution also reflects the demographic composition of the sites, where the majority of refugees are coming from Syria, although the low number of persons from Afghanistan collaborating in our activities may be also influenced by the lack of interpreters in our teams, which makes more difficult the interaction with Afghan community members.

The sectoral activities where the migrants are actively engaged are principally related to hygiene and health promotion (50%), followed by support in interpretation and communication with camp residents (19.3%), the operations of the Red Cross Basic Health Centres (14.5%), support to PSS activities with children, young and adults (8.8%) and support to relief distributions (7.2%).

Fig 11. Breakdown of activities (%) where migrants are currently being engaged



## Hotline

Among the designed and implemented actions of the Multifunctional Center of refugees, is the telephone Information and support line for refugees. At the present time, the IFRC is funding the operation of the line through the Emergency Appeal. However, the HRC constantly endeavors to involve other actors for the implementation of the overall project.

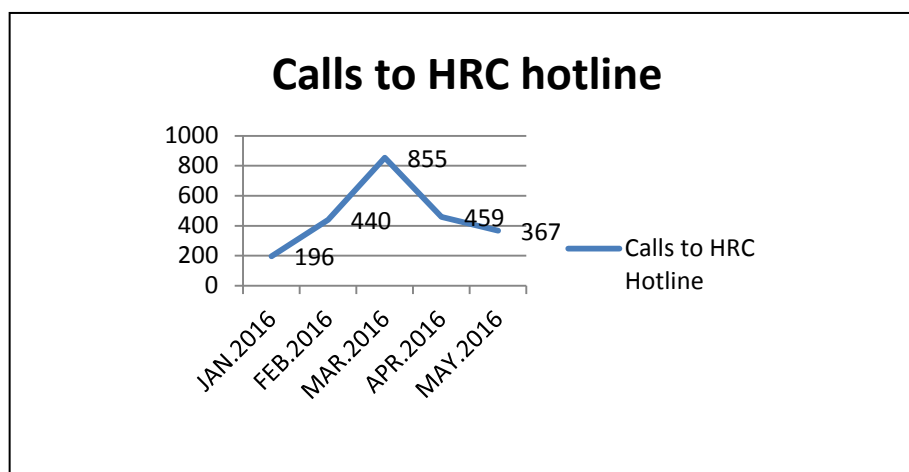
The main objective of the function of this particular line is: The prompt response to refugee claims and the provision of accurate and correct information directly in their native language, in areas such as housing, means of subsistence, access to education, the process of granting legal documents, and promotion to the labor market. The Hotline is open weekdays, between 8h00 and 20h00, and currently operates with three staff, working in shifts, covering 11 different languages (Arabic, Farsi, Pastu, Dari, Russian, French, English, Greek, Swahili, Kinyarwanda, Kirundi).

Between January and May 2016, the Hotline fielded calls from **1,963 beneficiaries and 354 institutions** while **12,336** people have taken advantage of the services provided over phone and Skype. As far as the incompatibility between the number of the calls and the beneficiaries availed by the services provided through the line is concerned, this occurs given that several times someone calls on behalf of his family or a group of people. In other words, although there is one caller, the information is diffused among the other members of the families/groups.

Fig 12. Breakdown of information provision to migrants via hotline

Month/ HRC Hotline Service	January 2016	February 2016	March 2016	April 2016	May 2016
Mediation	0	8	3	6	2
Interpretation	43	162	174	123	159
Referrals	42	121	472	182	78
Information provision/counselling	111	149	206	148	128
<b>TOTAL</b>	<b>196</b>	<b>440</b>	<b>855</b>	<b>459</b>	<b>367</b>

Fig 13. Number of calls to HRC hotline from Jan- May 2016



### Challenges:

There continues to be lack of clear camp management coordination structures and process, as well as information on asylum seeking process and administrative procedure for family reunification and relocation of migrants stranded in Greece to other countries. That situation has created deep feelings of anxiety and frustration and subsequently followed by a loss of trust from migrant communities towards humanitarian aid agencies, also connected to the fact that their living conditions in reception centres have not improved since the camps were opened.

The complexities of language with both Red Cross volunteers and staff and many of the migrants, who are not able to use English as a common medium for information exchange creates a barrier of communication between the migrants and aid agencies.

QUALITY PROGRAMMING			
Outcome 1: Effective response to the operation is ensured			
Activities	Is implementation on time?		Comments/Status
	Yes	No	
<b>Output 1.1:</b> Ongoing operation is informed by continuous and detailed assessment and analysis is conducted to identify needs and gaps and select beneficiaries for rendering relief services; plan is revised accordingly			
Ongoing assessments - FGDs, FACT, Sectoral	x		FACT assessments for health and WASH in March 2016 and relief assessments in May 2016
Revision of operation plans and/or relief items as a result of assessments	x		Process of EpoA revision took place from March - April
On-the-job-training on PMER on national and key branch level		x	Ongoing Identification of HRC PMER counterpart is still taking place
Mobilization of volunteers for the implementation of activities	x		Ongoing process
<b>Output 1.2:</b> The management of the operation is informed by a comprehensive monitoring and evaluation system			
Conducting a Lessons Learned workshop and final evaluation on national level	NA	NA	Will take place later this year
Monitoring visits by HRC and IFRC (Europe regional team and Greece team)			Ongoing
Evaluations (RTE/mid-evaluation/final evaluation)			In progress (RTE)

Collaboration with IM in regional office on improving data collection system			In progress
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### Progress towards outcomes

Assessments were conducted by health, WASH FACT teams and ERUs in BHC and Mass Sanitation Module (MSM) in March 2016 with focus on health, WASH, logistics, CTP and CEA.

- Since January 2016 a cash transfer specialist was based in Greece developing the programme and constantly reviewing the situation on the ground to ensure the appropriateness of eventual cash programming.
- A Scoping Study was conducted in February 2016. Relief/shelter and assessments were conducted in Thessaloníki (Diavata, Nea Kavala and Cherso) and Athens (Skaramagas and Ritsona) and some of the islands in May 2016 to plan for the provision of adequate support to migrants stranded in the country.
- Following the social unrest among the migrant populations after the EU-Turkey deal came into effect, an IFRC security consultant conducted security and risk assessments on all the camps where Red Cross was present. Implementation of security protocols on the field is currently ongoing.
- The EPoA was revised in April- May, taking into account key findings from the assessments. Subsequently, with the revised plans, PMER with technical support from the Europe regional office discussed the way forward in improving current data collection content and system. Piloting of the amended template and systems is currently in place.
- The ECHO proposal was revised, first through a workshop in early May with participation of all partners and then with sectorial assessment and revision of outputs and targets. The final ECHO proposal was submitted to ECHO on the 31 May.
- The implementation of open data toolkit (ODK) is currently in progress for all sectors in all sites.
- A global tools review is being conducted and led by the Secretariat in Geneva to evaluate and review the IFRC response tools, to improve its efficiency where able. As part of the review, a member of the evaluation team visited the Greece operations as a sample of the evolving humanitarian needs and trends in recent years, especially linked to slow onset and manmade crises.
- During the reporting period, agreements and scheduling of a Real Time Evaluation has been finalized and preliminary teleconferences have been held.
- Monitoring visits by HRC, and IFRC country and regional teams to the field happen on a regular basis.

NATIONAL SOCIETY CAPACITY BUILDING			
Outcome 1: The HRC has improved capacities to respond during emergencies and crisis			
Activities	Is implementation on time?		Comments/Status
	Yes	No	
<b>Output 1.1:</b> HRC has more active and skilled volunteers for emergency response.			
Recruitment and mobilization of volunteers	x		Ongoing
<b>Output 1.2:</b> HRC volunteers and staff receive relevant training			
Relevant training are provided to HRC volunteers and staff to strengthen response	x		Ongoing
<b>Output 1.3:</b> Hellenic RC Headquarters and operational branches get the necessary equipment to conduct emergency response.			
Necessary equipment, infrastructure and resources are obtained to carry out the emergency response	x		Ongoing

## Progress towards outcomes

With the continuous expansion of the operation to provide services in additional sites, HRC has delivered over and above its capacity, and this, despite long-standing governance and internal issues which are still in the process of being addressed and resolved. Staff at HQ have taken on various new responsibilities – particularly in relief coordination, logistics, and the provision of basic health, first aid and psychological first aid, in an emergency context. Capacity of both HRC staff and volunteers are continuously increasing through on-the-job experience, Fast Track Training and other relevant sectoral trainings to equip them in their role.

Noteworthy is that during the evolution of the operation the necessity which emerged was to implement a more harmonized IFRC-HRC structure and organigram by appointing specific HRC operational sectors at the HQ and on site (hygiene promotion, PSS, CEA, ODK, CTP, WASH, relief, warehouse management, logistics etc) where specialized officers will undertake the responsibility to create and manage specialized voluntary groups in order to provide the relevant services. IFRC delegates involved in the operation are working in close collaboration with their HRC counterparts, building capacity while supporting them in taking the lead in the response.

Currently there are 1,032 registered (however only 952 insured, the rest will follow) HRC volunteers engaged across all EA-operational sites, showing a significant increase from the 300 reported in January.

Some of the key challenges:

- Need to continuously reinforce the existing voluntary teams operating in the field, in order to cover the existing needs, especially for the summer period, where volunteers are on holiday.
- As many of the volunteers have been engaged since May 2015, it is crucial to offer them psychosocial support by implementing supervision-support meetings /debriefings by professionals on the topic. Prevention of burn-out for HRC staff and volunteers are also important. Access to PSS support for both HRC staff and volunteers is in the plan.

Initial discussions have been held between the HRC and the IFRC to develop a long term support plan for the Hellenic RC around three pillars:

- Disaster management capacity building to better respond to another mayor influx of refugees or a disaster
- Social inclusion services for the migrants and the most vulnerable Greek population
- Capacity building of the Hellenic RC in Governance, Finance, HR, Reporting, etc.

These initial discussions will continue during the summer to develop a long term support plan before the end of 2016.

## Operational support services

### Communications

All communication activities directly support the Emergency Appeal and aim to raise awareness and sensitize the public, media and donors on the emergency situation, humanitarian needs and Red Cross Red Crescent response. Continuous communication activities include:

- Regularly updated key messages, talking points, facts & figures, questions & answers documents and other background information for the Greece operational team, IFRC offices and National Societies.
- Responding to all international media requests received, providing regular interviews about the Red Cross response, pitching story ideas and connecting with media in the field, and hosting visiting journalists. Supporting the HRC communications team in media relations and field staff in media handling.
- Regular news stories about migrants and volunteers, blog postings and other communications content are drafted on a weekly basis for use by the IFRC and National Societies. The communications delegate tweets and retweets daily about the situation in Greece (over 550 tweets since November 2015). The Hellenic Red Cross sends press releases to the national media on a regular basis. All news stories on the operation can also be found on the IFRC website: <http://www.ifrc.org/en/news-and-media/news-stories/europe-central-asia/greece/>.
- Fresh photos and short video clips are made available on average on a weekly basis from the various operational sites.
- A press review compiled weekly detailing all media coverage and interviews regarding the operation.

- Support in the development of the HRC communications capacities by providing advice and short trainings.

Due to the continued need for communications support, the IFRC emergency communications delegate has stayed in country since November 2015. The communications delegate has regularly travelled to where needed, including in the Athens region, Lesvos island and northern Greece. When the border closures worsened the situation in the northern border area the communications delegate deployed there to ensure broad and accurate media coverage giving more than 40 interviews in a few weeks.

Overall the IFRC Head of Operations, the communications delegate and other relevant IFRC staff members regularly give interviews to international media (more than 70 between January-May). The Hellenic Red Cross President, Head of Operations and other staff have been equally active on Greek national media. Live TV interviews have included BBC World, AlJazeera English, TRT World, Sky Live News, Euronews and all the major TV channels in Greece.

### **Human Resources**

The operation is currently involving some 952 (insured) Red Cross volunteers and 80 staff from the headquarters, the existing branches and new locally recruited and trained volunteers since not all the operational islands had former presence of the HRC or up-to-scale volunteering members. Currently approximately 150 staff recruitment (HRC and IFRC) is in process. IFRC is in contract with a company to provide the contract to the staff. IFRC HR focal person is processing the needs assessment, job descriptions, local advertisement and subsequent recruitment to support the project. The IFRC Secretariat in the Regional Office for Europe continues to provide surge support through its Regional Disaster Management Unit and other specialized staff such as PMER, HR, IM, communications, logistics, finance, many of which supported the Greece team during the reporting period. In order for the intervention to meet its objectives, a full operational IFRC Secretariat team continues to be established and be reinforced with human resource for both IFRC and the HRC.

### **Administration and Finance**

Due to the current status of affairs of the HRC, the challenging financial situation in the country, and the possibility of restrictive interventions by the Greek tax and finance authorities, the risk associated with HRC managing the whole operation is considered a significant challenge. Despite HRC's efforts in mobilizing key personnel in supporting this operation, still this support is not enough to cope with the current work load of the operation. IFRC is now allocating more personnel support staff in finance, admin and HR which is critical in sustaining this operation. The following administrative and financial management updates during the reporting period:

- (i) Finance delegate is in place to provide support to HRC in ensuring compliance and timely reports as per IFRC standards. Finance and admin support will be mobilized to different geographical areas as needed.
- (ii) IFRC administration is contact with HRC IT to have an overall assessment of the IT capacity and needs assessment to provide support on hardware and software.
- (iii) Due to the absence of IFRC's legal status in-country, the operation faced multiple challenges on processing working visas for international staff. The admin team is working as best as they can to support this process.
- (iv) Ensuring all donors' contribution are spent as per commitments and reports issued on time.
- (v) Working in tandem with the legal department relating to contractual matters with relevant parties and the possibility of opening a bank account in Greece.
- (vi) IFRC Athens is now fully operational on bank payment with the signatories and authorization from Athens through its bank account in Budapest.
- (vii) Support from the regional office in Europe on cash flows and technical support.

### **Logistics**

The IFRC Secretariat support the National Society operations and carries out the procurement of some of relief items through the IFRC Global Logistic System (GLS), providing standardization and achieving efficiency through purchase of such items from the region. Since the beginning of the operation, the International Procurement is managed by GLS in coordination with the team in country. Local procurement is managed through HRC with IFRC Procurement Delegate support since March 2016. Prior to this deployment support was provided by Country Logistics Coordinator and GLS in Budapest. In addition, Danish and Swiss Red Cross also provided surge support for field logistic delegates who were based in Lesvos and Thessaloniki during the reporting period.

During the reporting period, storage services continued to be managed by HRC through the main warehouse in Athens – Kamatero and three sub-warehouses in Samos, Lesvos and Kos Island. Field activities are supported by container storage facilities provided as required, ensuring safe storage locations. Further support is provided from transport service providers. An upscaling plan is in place as activities are increasing and there is potential need to increase warehouse capacities (space, staffing, etc.) in Athens.

Throughout the operation with experiences gained, the National Society warehouse was brought up to standard, organized and maintained. HRC is now successfully implementing an inventory system (stock control) with daily reporting capabilities. Agreements were put in place in late period with transport companies for transport to all hub locations. Agreements are in place for warehousing services in all hub locations (some paid and some for free). Daily departure (Monday-Sunday) to all hub locations are conducted. National Society, with support of IFRC delegates have undertaken several local procurements (quality of service improving by day – compatible with IFRC standards).

On the job training of three people at the HRC HQ has been continuously carried out. Training of Kamatero warehouse staff (five persons) was conducted, increasing quality of work, enabling staff to carry out operational demand as required. Continuous training of volunteers and staff who act as store keepers in all the hub locations (Lesvos, Chios, Samos, Kos + North) are carried out by IFRC delegates in coordination with ERSCG.

A number of challenges were faced during the period. The constant changes and nature of intervention is stretching National Society capacities. This factor is further combined with fact that there are restrictions of local market conditions with consequent implication on items availability. Despite all difficulties operations is carried out with maximum compliance HRC/IFRC regulations Implementation of fully planned logistics / procurement intervention in given circumstances was extremely hard in situation which by nature requires constant adaptation to possible changes of relief materials. All of above is having heavy impact on operation and is rectified by international procurement.

### **Planning, monitoring, evaluation and reporting (PMER)**

PMER support during this reporting period was provided by PMER staff on loan from the Asia Pacific regional office, with assistance from IFRC regional office for Europe, pending the recruitment of a longer-term delegate. During the reporting period, the PMER officer supported the IFRC sectoral leads on planning and drafting M&E plans, in addition to producing various reports (situation reports, operations update, and donor reports). The PMER officer also worked on the revision of the emergency appeal, as well as supported the process of proposal submissions as needed. Managing information flow (within the Movement as well as providing updates to external agencies), and improving reporting on beneficiary data were also part of PMER activities.

The limited PMER functions within the National Society will be strengthened through the presence of an IFRC PMER staff. Internal HRC candidates are being identified to take on PMER functions over the longer-term, who would be trained on IFRC reporting formats, data collection, communication lines, monitoring visits etc. Monitoring visits will be performed by the IFRC Regional Office for Europe's PMER and other operational units.

A real time evaluation, mid-term and final evaluation of this EA operation will be conducted with technical support from the IFRC Secretariat and the involvement of the National Society's staff and volunteers, with special emphasis on the personnel in the branches to allow the building-up of this capacity as widely as possible.

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2. Click [here](#) to return to the title page

## How we work

All IFRC assistance seeks to adhere to the **Code of Conduct** for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations (NGO's) in Disaster Relief and the **Humanitarian Charter and Minimum Standards in Humanitarian Response (Sphere)** in delivering assistance to the most vulnerable. 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.

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The IFRC's work is guided by Strategy 2020 which puts forward three strategic aims:



**Save lives.**  
protect livelihoods,  
and strengthen recovery  
from disaster and crises.



Enable **healthy**  
and **safe** living.



Promote **social inclusion**  
and a culture of  
**non-violence and peace.**

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## Disaster Response Financial Report

## MDRGR001 - Greece - Population Movement

Timeframe: 22 May 15 to 31 Mar 17

Appeal Launch Date: 02 Sep 15

## Interim Report

## Selected Parameters

Reporting Timeframe	2015/5-2016/5	Programme	MDRGR001
Budget Timeframe	2015/5-2017/3	Budget	APPROVED
Split by funding source	Y	Project	*
Subsector:	*		

All figures are in Swiss Francs (CHF)

## I. Funding

	Raise humanitarian standards	Grow RC/RC services for vulnerable people	Strengthen RC/RC contribution to development	Heighten influence and support for RC/RC work	Joint working and accountability	TOTAL	Deferred Income
<b>A. Budget</b>			<b>26,558,921</b>			<b>26,558,921</b>	
<b>B. Opening Balance</b>							
<b>Income</b>							
<b>Cash contributions</b>							
American Red Cross			293,249			293,249	
BG Group			200			200	
Bloomberg			9,919			9,919	
British Red Cross			218,082			218,082	
British Red Cross (from British Government*)			3,597,133			3,597,133	
Cartier Charitable Foundation			100,000			100,000	
Celesio			41,888			41,888	
CERN Staff Association			14,710			14,710	
Coca Cola Foundation			99,674			99,674	
Croatian Red Cross			5,459			5,459	
Cyprus Red Cross			11,074			11,074	
Danish Red Cross (from Denmark - Private Donors*)			50,000			50,000	
European Commission - DG ECHO			16,638,989			16,638,989	
Experian			121			121	
FedEx Services			191,275			191,275	
Finnish Red Cross			86,155			86,155	
France - Private Donors			1,794			1,794	
Give Eur-Hope ASBL			89,305			89,305	
Google			11,046			11,046	
Icelandic Red Cross			109,724			109,724	
Icelandic Red Cross (from Icelandic Government*)			184,753			184,753	
Informa			1,526			1,526	
Ireland - Private Donors			110			110	
Irish Red Cross Society			153,855			153,855	
Japanese Red Cross Society			43,258			43,258	
Lars Amundsen Foundation			200,000			200,000	
Luxembourg Government			27,084			27,084	
Medtronic Foundation			100,499			100,499	
Metro AG			98,128			98,128	
Mondelez International Foundation			7,574			7,574	
Nestle			38,976			38,976	
Norwegian Red Cross			554,569			554,569	
Norwegian Red Cross (from Norwegian Government*)			356,589			356,589	
Novartis			24,531			24,531	
On Line donations (from Aland Islands - Private donors*)			64			64	
On Line donations (from Albania - Private donors*)			2			2	
On Line donations (from Andorra - Private Donors*)			8			8	
On Line donations (from Antigua And Barbuda - Private donors*)			3			3	
On Line donations (from Argentina - Private Donors*)			5			5	
On Line donations (from Australia - Private Donors*)			847			847	
On Line donations (from Austria - Private Donors*)			31			31	
On Line donations (from Azerbaijan Private Donors*)			11			11	
On Line donations (from Bahrain - Private Donors*)			297			297	
On Line donations (from Bangladesh - Private Donors*)			3			3	
On Line donations (from Belarus - Private Donors*)			2			2	
On Line donations (from Belgium - Private Donors*)			169			169	
On Line donations (from Bermuda - Private Donors*)			36			36	
On Line donations (from Bhutan - Private donors*)			16			16	

## Disaster Response Financial Report

### MDRGR001 - Greece - Population Movement

Timeframe: 22 May 15 to 31 Mar 17

Appeal Launch Date: 02 Sep 15

#### Interim Report

		Selected Parameters	
Reporting Timeframe	2015/5-2016/5	Programme	MDRGR001
Budget Timeframe	2015/5-2017/3	Budget	APPROVED
Split by funding source	Y	Project	*
Subsector:	*		
All figures are in Swiss Francs (CHF)			
On Line donations (from Botswana - Private donors*)	5		5
On Line donations (from Brazil - Private Donors*)	234		234
On Line donations (from British Indian Ocean Territory - Private donors*)	3		3
On Line donations (from Brunei - Private Donors*)	102		102
On Line donations (from Bulgaria - Private Donors*)	74		74
On Line donations (from Canada - Private Donors*)	1,194		1,194
On Line donations (from Chile Private Donors*)	9		9
On Line donations (from China - Private Donors*)	411		411
On Line donations (from Colombia - Private Donors*)	1		1
On Line donations (from Costa Rica - Private Donors*)	7		7
On Line donations (from Croatia - Private Donors*)	24		24
On Line donations (from Cuba - Private donors*)	1		1
On Line donations (from Cyprus - Private Donors*)	351		351
On Line donations (from Czech private donors*)	64		64
On Line donations (from Denmark - Private Donors*)	22		22
On Line donations (from Dominican Republic - Private Donor*)	4		4
On Line donations (from Dominica Private Donors*)	5		5
On Line donations (from Ecuador - Private Donors*)	59		59
On Line donations (from Egypt - Private Donors*)	6		6
On Line donations (from Falkland Islands (Malvinas) - Private donors*)	4		4
On Line donations (from Finland - Private Donors*)	103		103
On Line donations (from France - Private Donors*)	939		939
On Line donations (from French Guiana - Private donors*)	80		80
On Line donations (from Germany - Private Donors*)	269		269
On Line donations (from Gibraltar - Private donors*)	26		26
On Line donations (from Great Britain - Private Donors*)	3,631		3,631
On Line donations (from Greece - Private Donors*)	72		72
On Line donations (from Guam - Private donors*)	4		4
On Line donations (from Guatemala Private donors*)	1		1
On Line donations (from Guernsey - Private donors*)	11		11
On Line donations (from Hong Kong - Private Donors*)	377		377
On Line donations (from Hungarian - Private Donors*)	14		14
On Line donations (from Icelandic RC*)	1		1
On Line donations (from India - Private Donors*)	391		391
On Line donations (from Indonesia - Private Donors*)	90		90
On Line donations (from Ireland - Private Donors*)	79		79
On Line donations (from Isle Of Man - Private donors*)	2		2
On Line donations (from Israel - Private Donors*)	17		17
On Line donations (from Italy - Private Donors*)	101		101
On Line donations (from Japan - Private Donors*)	165		165
On Line donations (from Jersey - Private donors*)	2		2
On Line donations (from Jordan - Private Donors*)	23		23
On Line donations (from Kazakhstan - Private Donors*)	7		7
On Line donations (from Kuwait - Private Donors*)	204		204
On Line donations (from Latvia - Private Donors*)	4		4
On Line donations (from Lebanese - Private Donors*)	30		30
On Line donations (from Lithuania- Private Donors*)	32		32
On Line donations (from Luxembourg - Private Donors*)	87		87
On Line donations (from Malaysia - Private Donors*)	298		298
On Line donations (from Malta - Private Donors*)	94		94
On Line donations (from Mauritius Private Donors*)	4		4
On Line donations (from Mexico - Private Donors*)	70		70

## Disaster Response Financial Report

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Timeframe: 22 May 15 to 31 Mar 17

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Subsector:	*		

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<i>On Line donations (from Netherlands Antilles - Private donors*)</i>	1	1
<i>On Line donations (from Netherlands - Private Donors*)</i>	68	68
<i>On Line donations (from New Caledonia Private Donors*)</i>	17	17
<i>On Line donations (from New Zealand - Private Donors*)</i>	224	224
<i>On Line donations (from Norway - Private Donors*)</i>	163	163
<i>On Line donations (from Oman - Private Donors*)</i>	25	25
<i>On Line donations (from Panama Private donors*)</i>	23	23
<i>On Line donations (from Peru - Private Donors*)</i>	16	16
<i>On Line donations (from Philippines - Private Donors*)</i>	72	72
<i>On Line donations (from Poland - Private Donors*)</i>	89	89
<i>On Line donations (from Portuguese - Private Donors*)</i>	109	109
<i>On Line donations (from Puerto Rico - Private donors*)</i>	73	73
<i>On Line donations (from Qatar Private Donors*)</i>	112	112
<i>On Line donations (from Republic of Korea - Private Donors*)</i>	30	30
<i>On Line donations (from Reunion - Private donors*)</i>	24	24
<i>On Line donations (from Romania Private Donors*)</i>	9	9
<i>On Line donations (from Russia - Private Donors*)</i>	154	154
<i>On Line donations (from Saudi Arabia - Private Donors*)</i>	126	126
<i>On Line donations (from Singapore - Private Donors*)</i>	1,240	1,240
<i>On Line donations (from Slovenia - Private Donors*)</i>	3	3
<i>On Line donations (from South Africa - Private Donors*)</i>	65	65
<i>On Line donations (from Spain - Private Donors*)</i>	115	115
<i>On Line donations (from Swedish - Private Donors*)</i>	44	44
<i>On Line donations (from Switzerland - Private Donors*)</i>	743	743
<i>On Line donations (from Syria Private Donors*)</i>	72	72
<i>On Line donations (from Taiwan - Private Donors*)</i>	190	190
<i>On Line donations (from Thailand - Private Donors*)</i>	134	134
<i>On Line donations (from Trinidad &amp; Tobago - Private Donors*)</i>	29	29
<i>On Line donations (from Turkey - Private Donors*)</i>	210	210
<i>On Line donations (from Ukraine private donors*)</i>	4	4
<i>On Line donations (from Unidentified donor*)</i>	1,212	1,212
<i>On Line donations (from United Arab Emirates - Private Donors*)</i>	2,109	2,109
<i>On Line donations (from United States - Private Donors*)</i>	26,375	26,375
<i>On Line donations (from Vietnam - Private Donors*)</i>	7	7
<i>Red Cross of Monaco</i>	16,192	16,192
<i>Regus</i>	22	22
<i>Sidley Austin LLP</i>	197	197
<i>Spanish Red Cross</i>	54,335	54,335
<i>supreme master ching hai international association</i>	87,805	87,805
<i>Swedish Red Cross</i>	457,105	457,105
<i>Swiss Red Cross</i>	194,254	194,254
<i>Swiss Red Cross (from Swiss Government*)</i>	109,278	109,278
<i>Switzerland - Private Donors</i>	2,310	2,310
<i>Taiwan - Private Donors</i>	28,939	28,939
<i>TeliaSonera</i>	1,160	1,160
<i>The Canadian Red Cross Society</i>	221,501	221,501
<i>The Netherlands Red Cross</i>	586,796	586,796
<i>The Netherlands Red Cross (from Netherlands Government*)</i>	1,084,690	1,084,690
<i>The Netherlands Red Cross (from Netherlands Red Cross Silent Emergency Fund*)</i>	55,298	55,298

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<i>Thomson Reuters</i>	479	479
<i>UL LLC -Underwriters Laboratories,LLC</i>	1,287	1,287
<i>United States - Private Donors</i>	1,881	1,881
<i>United Way</i>	19,730	19,730
<b>C1. Cash contributions</b>	<b>26,329,692</b>	<b>26,329,693</b>
<b>Inkind Goods &amp; Transport</b>		
<i>Finnish Red Cross</i>	56,087	56,087
<b>C2. Inkind Goods &amp; Transport</b>	<b>56,087</b>	<b>56,087</b>
<b>Inkind Personnel</b>		
<i>British Red Cross</i>	10,523	10,523
<i>Finnish Red Cross</i>	38,760	38,760
<i>Norwegian Red Cross</i>	57,858	57,858
<i>Other</i>	6,374	6,374
<i>Spanish Red Cross</i>	5,067	5,067
<i>Swiss Red Cross</i>	22,142	22,142
<b>C3. Inkind Personnel</b>	<b>140,724</b>	<b>140,724</b>
<b>Other Income</b>		
<i>Fundraising Fees</i>	-26,323	-26,323
<b>C4. Other Income</b>	<b>-26,323</b>	<b>-26,323</b>
<b>C. Total Income = SUM(C1..C4)</b>	<b>26,500,182</b>	<b>26,500,182</b>
<b>D. Total Funding = B +C</b>	<b>26,500,182</b>	<b>26,500,182</b>

\* Funding source data based on information provided by the donor

## II. Movement of Funds

	Raise humanitarian standards	Grow RC/RC services for vulnerable people	Strengthen RC/RC contribution to development	Heighten influence and support for RC/RC work	Joint working and accountability	TOTAL	Deferred Income
<b>B. Opening Balance</b>							
<b>C. Income</b>			26,500,182			26,500,182	
<b>E. Expenditure</b>			-6,850,175			-6,850,175	
<b>F. Closing Balance = (B + C + E)</b>			19,650,007			19,650,007	

## Disaster Response Financial Report

## MDRGR001 - Greece - Population Movement

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## Interim Report

## Selected Parameters

Reporting Timeframe	2015/5-2016/5	Programme	MDRGR001
Budget Timeframe	2015/5-2017/3	Budget	APPROVED
Split by funding source	Y	Project	*
Subsector:	*		

All figures are in Swiss Francs (CHF)

## III. Expenditure

Account Groups	Expenditure						TOTAL	Variance
	Budget	Raise humanitarian standards	Grow RC/RC services for vulnerable people	Strengthen RC/RC contribution to development	Heighten influence and support for RC/RC work	Joint working and accountability		
	A					B	A - B	
<b>BUDGET (C)</b>				<b>26,558,921</b>		<b>26,558,921</b>		
<b>Relief items, Construction, Supplies</b>								
Shelter - Relief	27,946			27,946		27,946	0	
Construction - Facilities	1,078			1,078		1,078	0	
Clothing & Textiles	1,929,113			768,716		768,716	1,160,397	
Food	4,017,377			1,538,054		1,538,054	2,479,323	
Water, Sanitation & Hygiene	2,840,654			770,826		770,826	2,069,828	
Medical & First Aid	495,511			28,260		28,260	467,251	
Teaching Materials				138		138	-138	
Utensils & Tools	710			710		710	0	
Other Supplies & Services	1,824,797			524,236		524,236	1,300,561	
Cash Disbursement	2,373,349						2,373,349	
<b>Total Relief items, Construction, Sup</b>	<b>13,510,535</b>			<b>3,659,964</b>		<b>3,659,964</b>	<b>9,850,571</b>	
<b>Land, vehicles &amp; equipment</b>								
Computers & Telecom	114,939			13,418		13,418	101,520	
Office & Household Equipment	744			8		8	736	
Others Machinery & Equipment	1,633						1,633	
<b>Total Land, vehicles &amp; equipment</b>	<b>117,316</b>			<b>13,426</b>		<b>13,426</b>	<b>103,889</b>	
<b>Logistics, Transport &amp; Storage</b>								
Storage	307,588			101,656		101,656	205,931	
Distribution & Monitoring	515,735			113,694		113,694	402,041	
Transport & Vehicles Costs	285,613			78,330		78,330	207,283	
Logistics Services	398,539			198,459		198,459	200,079	
<b>Total Logistics, Transport &amp; Storage</b>	<b>1,507,475</b>			<b>492,139</b>		<b>492,139</b>	<b>1,015,335</b>	
<b>Personnel</b>								
International Staff	3,653,743			541,528		541,528	3,112,216	
National Staff	167,527			16,147		16,147	151,380	
National Society Staff	3,560,303			540,463		540,463	3,019,840	
Volunteers	586,319			83,862		83,862	502,456	
<b>Total Personnel</b>	<b>7,967,892</b>			<b>1,181,999</b>		<b>1,181,999</b>	<b>6,785,892</b>	
<b>Consultants &amp; Professional Fees</b>								
Consultants	128,054			103,100		103,100	24,954	
Professional Fees	95,759			26,988		26,988	68,771	
<b>Total Consultants &amp; Professional Fees</b>	<b>223,813</b>			<b>130,088</b>		<b>130,088</b>	<b>93,725</b>	
<b>Workshops &amp; Training</b>								
Workshops & Training	380,159			17,203		17,203	362,956	
<b>Total Workshops &amp; Training</b>	<b>380,159</b>			<b>17,203</b>		<b>17,203</b>	<b>362,956</b>	
<b>General Expenditure</b>								
Travel	386,618			274,756		274,756	111,862	
Information & Public Relations	352,125			26,944		26,944	325,181	
Office Costs	266,750			62,926		62,926	203,824	
Communications	118,986			35,358		35,358	83,628	
Financial Charges	56,972			4,480		4,480	52,492	
Other General Expenses	2,293			1,068		1,068	1,226	
Shared Office and Services Costs	2,674			7,786		7,786	-5,112	
<b>Total General Expenditure</b>	<b>1,186,417</b>			<b>413,317</b>		<b>413,317</b>	<b>773,100</b>	
<b>Contributions &amp; Transfers</b>								
Cash Transfers National Societies	32			32		32	0	

## Disaster Response Financial Report

## MDRGR001 - Greece - Population Movement

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Budget Timeframe	2015/5-2017/3	Budget	APPROVED
Split by funding source	Y	Project	*
Subsector:	*		

All figures are in Swiss Francs (CHF)

## III. Expenditure

Account Groups	Budget	Expenditure					TOTAL	Variance
		Raise humanitarian standards	Grow RC/RC services for vulnerable people	Strengthen RC/RC contribution to development	Heighten influence and support for RC/RC work	Joint working and accountability		
	A					B	A - B	
<b>BUDGET (C)</b>				<b>26,558,921</b>			<b>26,558,921</b>	
<b>Total Contributions &amp; Transfers</b>	32			32			32	0
<b>Operational Provisions</b>								
Operational Provisions				472,501			472,501	-472,501
<b>Total Operational Provisions</b>				472,501			472,501	-472,501
<b>Indirect Costs</b>								
Programme & Services Support Recov	1,618,086			405,207			405,207	1,212,880
<b>Total Indirect Costs</b>	1,618,086			405,207			405,207	1,212,880
<b>Pledge Specific Costs</b>								
Pledge Earmarking Fee	43,697			54,999			54,999	-11,302
Pledge Reporting Fees	3,500			9,300			9,300	-5,800
<b>Total Pledge Specific Costs</b>	47,197			64,299			64,299	-17,102
<b>TOTAL EXPENDITURE (D)</b>	<b>26,558,921</b>			<b>6,850,175</b>			<b>6,850,175</b>	<b>19,708,746</b>
<b>VARIANCE (C - D)</b>				<b>19,708,746</b>			<b>19,708,746</b>	

**Disaster Response Financial Report****MDRGR001 - Greece - Population Movement**

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Split by funding source	Y	Project	*
Subsector:	*		

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**IV. Breakdown by subsector**

Business Line / Sub-sector	Budget	Opening Balance	Income	Funding	Expenditure	Closing Balance	Deferred Income
<b>BL3 - Strengthen RC/RC contribution to development</b>							
Migration	26,558,921		26,500,182	26,500,182	6,850,175	19,650,007	
Subtotal BL3	26,558,921		26,500,182	26,500,182	6,850,175	19,650,007	
<b>GRAND TOTAL</b>	<b>26,558,921</b>		<b>26,500,182</b>	<b>26,500,182</b>	<b>6,850,175</b>	<b>19,650,007</b>	