

MEDECINS SANS FRONTIERES: UPDATE EU/BELARUS BORDERS

December 2021

This update includes three briefing notes, highlighting MSF's initial findings in Lithuania, Poland and Belarus. The information is based on the observations of MSF staff in-country, as well as on testimonies from affected people. MSF is present in Lithuania since September and Poland since beginning of October. In November we have sent additional emergency teams to Belarus, where we were already working with long-term medical programs. With this update, we intend to contribute to documenting the stunning lack of access for humanitarian actors, the level of exposure to unacceptable conditions, violence and human rights violations of the people trapped at the EU-Belarus borders, the violent and systematic pushbacks from Poland and Lithuania Border Guards and the forced movements by Belarusian Border Guards.

With this update, we make an urgent call to act. If EU and Belarussian leaders continue on this course, more people will die, especially with temperature reaching below -10 degrees in the coming days. On 7th November another body was found in the forest in Poland, bringing the number of documented deaths up to 16. Keeping people effectively trapped between Belarussian and EU border guards will only exacerbate this situation and increase the likelihood that this political standoff will lead to more people losing their lives. There is an urgent need for a dialogue to negotiate a humanitarian space, to stop the violence at both sides of the border and to create a safe and unconditional pathway for the people out of the forest. All states involved have a responsibility to urgently ensure that people in need within the forest at the borders of Poland/Lithuania/Belarus and those de-facto detained in border posts, registration centres or detention facilities have access to unrestricted and independent humanitarian assistance to meet their basic needs and to protect their lives.

At present, MSF has only been given limited access in Lithuania to provide mental health activities in the Border Posts. Access to the forest area within the security zone is not granted. In Poland, the extension of the state of emergency by the amendments to Poland's Border Protection Act, adopted 30 November, continues to restrict our access as a humanitarian organization as well as access for media to document the situation. MSF has several times requested access to the border "secure zone", but access was denied. Although we were recently authorized to visit two detention centres outside of the secure zone the actual permit has only been provided for one of them, while the other is still under discussion. In Belarus, on 24 November, MSF was informed by the State Border Committee that no access to any organization would be granted to border areas or the so called buffer zone. However, we have submitted a request to the Ministry of Health which could potentially unblock the situation.

On the EU side, the Commission's proposal for a Council Decision to put temporary emergency measures in place for the benefit of Latvia, Lithuania and Poland, falls short of demanding that EU member states increase and strengthen the response capacity for the provision of assistance and protection. Independent access for humanitarian actors is not mentioned in the proposal. On the contrary, assistance within the de facto detention facilities at the border or transit zone is restricted to the most basic needs and the protection safeguards in border procedures are reduced to the bare minimum. The proposed measures do not include a credible or effective mechanism that will ensure basic rights are upheld. It is particularly worrying that the only exemption to the proposed border procedures is an acute state of health, without considering other key vulnerabilities that need to be assessed. The call for a "close cooperation with UNHCR and relevant partners organizations" is too vague and will not be sufficient to grant independent and impartial humanitarian access.



The people that have died at the EU/Belarus border are not fatalities of "a hybrid attack" (terms used in the Commission's proposal). They have died because they did not receive the assistance and protection they needed. The people trapped at the border are victims, forcibly pushed back and forth by Belarus' forced movements to the EU borders and the EU's systematic and violent pushbacks to Belarus. Instead of putting the accent on the responsibilities of the EU member states, to protect the most vulnerable, safe lives and preserve or restore the dignity of people suffering at the EU border, the Commission's proposal sets a dangerous precedent in which the hybrid war narrative is used to justify emergency measures that restrict assistance and protection for the victims.



Briefing Note - People detention in Border Guards' Posts in Lithuania

MSF Holland – 07 December 2021

Introduction:

From 11 October, 2021, MSF was granted access by the Lithuanian authorities to provide mental health care to people who crossed the border of Lithuania from Belarus and are detained in State Border Guard Posts. Although the Government of Lithuania had planned by 01 October 2021 to accommodate all people to five permanent accommodation sites (Reception and Registration Centers), to date estimated 104 people, including 73 women, remain detained in 4 Border Guard Posts and 1 Border Control Point¹.

In this briefing note, MSF highlights its findings on psychological and humanitarian consequences of de facto detention for the people in the State Border Guard Posts, based on professional observations by the MSF mental healthcare team as well as direct observations and accounts from people. MSF acknowledges that facilitation of humanitarian access to the State Border Guard Posts by the Lithuanian authorities has allowed MSF to support the mental health needs of the people and alleviate their suffering.

Mental health deterioration:

- Between 11 Oct and 23 Nov, the MSF psychologist provided individual and group consultations to 121 individuals in 9 different State Border Guard Posts and 1 Border Control Point.
- Among the 65 patients individually consulted by the MSF psychologist in this period:
 - o more than 48% presents anxiety-related complaints;
 - o 18% have presented with mood related problems (depressive symptoms, sadness, suicidal thoughts, etc.);
 - o 8% of patients suffer from serious mental health conditions, including psychosis, severe depression and conversion disorder;
 - o for 48% of those consulted, the precipitating event has been reported to be displacement and displacement associated events, e.g. having to flee their home because of danger, separation from their families and/or fear of deportation.
 - o For 18% of patients their mental health problems are exacerbated by their current situation (uncertainty about the future, lack of communication with family and their general living conditions in detention)
- The MSF psychologist provided consultations to five adults who said they had attempted suicide in the Border Guard Posts; all had physically injured themselves and two needed hospitalization (Tverečius 1 hospitalization), Švenčionėlia (1 hospitalization, 3 self-harm).
- One of the main issues having a negative impact on mental health is linked to the conditions of
 detention; recurrent themes emerging from the consultations is the distress of having lack of
 information on the future procedure, length of detention and their rights, limited access to
 communication possibilities with families and friends and legal counselling, feelings of receiving
 degrading treatment, as well as the threat and fear of return to their home country.
- The mental health conditions noted by the MSF team demonstrates the psychological impact of undignified conditions of detention, prolonged deprivation of liberty, and limited transparency on the procedures. MSF anticipates the mental health of people de facto detained will continue to deteriorate if their conditions remain unchanged.

¹ On November 8, MSF was providing support in 9 Border Guards Posts (295 people, including 85 women). Some Border Posts started to transfer people to the five permanent accommodation sites.



- Many people who are seeking protection and arriving in Lithuania have already been exposed to traumatic events in their home countries and along the way. Most of the people treated by MSF reported one or more traumatic events in their country of origin, including people who have experienced psychological, physical and sexual violence. Current conditions of detention are noted to aggravate previous trauma, create risks of additional trauma, and increased mental distress and vulnerabilities.
- Criminalization of people on the move will continue to inflict immediate and long-term harm, and denies people their basic human rights and to be treated with dignity.

Conditions of detention in the Border Guard Posts:

- Most people in the Border Guard Posts have been de facto detained for 3-4 months². All people
 who spoke with MSF explained they have not yet received information on the length of detention,
 as well as their rights and obligations.
- In seven facilities where MSF works, personal mobile phones were confiscated upon arrival, and in some of these facilities no adequate alternative has been provided for communication with their family, friends, or organizations that could provide information and legal or other assistance. Some people have no access to the copies of documents they have been storing in their phones (e.g. proof of asylum applications). Limited access to external communication and very limited opportunities to contact family, has a severe impact on people's mental health.
 - o In Kenos and Lavoriskiu, personal phones were allowed (sites for single women);
 - o In G.Žaguni and A.Barausko, one phone from the Lithuanian Red Cross has been provided, however for G.Žaguni, they were only allowed to call within EU and for A.Barausko, credit is insufficient;
 - o In Kapciamiesci, phone of the Border Guards was available on demand;
 - o In Adutiški, people could access a Red Cross phone once a month for 5 minutes. In Tribonys, no communication option is available, the Lithuanian Red Cross (LRC) was able to provide a phone for one day in mid-November and people for the first time in months could speak with the loved ones but only for 5 minutes.
- Verbal and physical threats, intimidation, and hate speech from certain individual border guards have been reported by some people, causing distress and anxiety. Some people who spoke to MSF explained being repetitively called criminals and intimidated to be "sent back" by some border guards. These incidents reportedly occurred both on an ad hoc basis and also at times when requesting basic necessities e.g. clothes or soap: "The guard told me, if you have complaints, you can go back to your country" detained man. In two facilities, people reported that certain guards are often waking them up in the middle of the night to count them, a practice contributing to mental distress. There were at least 3 different incidents where some individual border guards employed excessive use of force (use of taser).
- Humanitarian aid is insufficient to ensure basic needs and human rights are met. Specific gaps include winter clothes, underwear, shoes, especially where people are accommodated in container rooms outside such as in Adutiški, Tribonys, and A.Barausko. Some people have expressed concerns that they are running out of money, cannot buy necessities and are not allowed to receive money from their relatives, or they cannot access it because their mobile phones have been confiscated.
- Healthcare is accessible in most of the Border Guard Posts, although not all locations, and without assistance of professional interpreters:

² Majority of the people arrived in the Border Guards Posts at the end of July 2021, with few more new arrivals in August 2021.



- o In Adutiški, Padvarionio mobile medical team provides primary healthcare at the facility on a regular basis (once per week);
- In Lavoriskiu and Tribonys, the mobile medical teams are not providing primary healthcare at the facility. People can be transported when needed to the closest healthcare center.
- The decision on the need to be consulted by a health professional or to be transferred to a health center is currently made by a non-medical person (guards). People have started reporting their health issues to MSF during mental health activity visits, and MSF facilitated 19 referrals although our medical team members are not yet permitted to practice healthcare in these facilities. Referrals included medical follow-up for pregnant women, patient with sleeping problems, and patient with psychotic symptoms.
- People reported that due to language barriers, they could not explain properly their health concerns. For sensitive issues, people are shy or hesitant to ask other people's help with interpretation. Many also did not understand treatments or diagnosis provided to them or which medication they received respectively why they did not receive medication.

There is a common opinion amongst the guards that people are often "faking" trauma and mental distress. In one location, after a suicide attempt, the detained people were threatened that an ambulance would not be called if another suicide attempt occurred. In another location, some detainees reported that the guards and local healthcare staff did not believe them, when they requested medical attention for sexual and reproductive health conditions; for one person as a result of sexual violence in their country of origin. Basic analgesics for headaches or body pain are not readily available or accessible to people when requested, as border guards do not have the authority to provide medication.

Access to legal support and aid

- People in detention at the Border Guard Posts have extremely limited access to legal counsel. All the people who spoke to MSF felt that during their interview with the migration department they did not have the chance to properly defend their asylum claim. Many people reported receiving a negative decision on their asylum claim, most of which was in the Lithuanian language. People do not fully comprehend the reasons for the negative decision, and while some reported to MSF having expressed their intention to appeal and their need for a lawyer, there has reportedly been no response from the authorities³. Translation services are not available and absence of internet access does not allow online translation, the search for lawyers, or receiving document necessary to support their asylum claim. MSF also spoke to people who didn't know if they actually had applied for asylum and received a deportation order.
- Most people who spoke to MSF reported that the information repeatedly provided by the Migration Department in all facilities is only on voluntary return (e.g leaflets in the Border Guard Posts).
- Opportunity for accessing legal aid in a person's native language is limited. A legal counselor of LRC, the only organization providing legal support in these locations, is visiting some of the sites. However, the organization has insufficient capacity to support all people who require legal assistance – with more than 300 people detained at the peak. Those who do have access to legal support from LRC report that the amount of time allocated is limited and language barriers exist, leading to a continued lack of understanding of the process for some people. Many people reported receiving a letter in Lithuanian by the Migration Department with a rejection decision, and were required to sign while not understanding the content of the letter. One woman described also that the interview consisted of the migration officer passing information about return and that there was no opportunity to explain her reason for seeking asylum. This seems to be a common situation

³ As per the recently amended Alien Law (July 2021), the Migration Department should provide a decision on the appeal in 7 days.



that many people reportedly face. The general impression is that people in detention experience a lack of transparency in the asylum process.

Conditions of detention in registration centre:

- On 30 Nov, MSF team visited Medininkai Registration Centre, one of the five registration/reception centres de facto detaining the majority of people who have crossed the Belarus-Lithuania border.
 In Medinikai, 888 people, including 375 women and 156 children are detained, many of them since August 2021.
- People are accommodated in containers located outside, which are divided into five zones that are
 fenced off: families with children; families; single women; single men; LGBTQ+ community. The
 zones are guarded by armed border guards, and people are only allowed to move outside in a very
 restricted and small area.
- Provision of humanitarian assistance is insufficient to ensure people's basic needs are met, specifically with regard to winter clothes and shoes, which is particularly pressing given the winter temperatures.
- Access to healthcare is extremely limited:
 - o The mobile health clinic is not allowed to enter the centre and remains outside the facility. To reach the clinic, patients are escorted by border guards.
 - o People need to request the permission to a non-medical person (border guard) in order to access healthcare, by requesting a paper form through the fence and filling the form in English, which is handed over by the border guard to the mobile health clinic.

Specific Recommendations

- Process the influx of people crossing the borders in a more dignified way, without extended detention, and with close attention paid to vulnerable people who have special needs, including people with a history of trauma or severe mental disorders.
- Immediate transfer of all people in de facto detention in the Border Guard Posts to an alternative safe location is required. Locations of transfer must ensure that people are provided with sufficient and adequate humanitarian assistance, protection mechanisms and have freedom of movement. Detention is a measure of last resort and should be imposed on the basis of an individual assessment.
- Prevent increasing and alarming mental distress, directly linked to the conditions of detention that MSF has observed. Some stressors can be reduced through changes of the procedures at the Border Guard Posts. This includes improving access to adequate means of communication, ideally through the provision of individual phones or alternatively through increasing time and privacy allocated for shared phone use.
- Ensure all people in de facto detention have access to free of charge legal counsel and legal aid in a language they understand, and transparent information on asylum procedure, including information on the evaluation process of the asylum applications.
- Ensure unhindered, unconditional, timely access to health care for people detained at the Border Guard Posts and reception and registration centre. This should include regular visits from medical units, judgement of requests to seek care by a medically trained person and timely facilitation of referrals to health centres. Professional interpreters who understand medical language and patient confidentiality should be made available.
- Cater for basic needs such as food, drinking water, access to warm showers, winter clothes, shoes, and hygiene products to those who are kept in prolonged de facto detention.
- Ensure that safety and security is guaranteed for all detained people, and people are treated with the dignity and respect to which they are fundamentally entitled.
- Allow and facilitate unhindered and unconditional independent humanitarian access to all areas and all people at all times, including the restricted 5km border area.



Briefing Note – Humanitarian crisis at the Polish border

MSF Holland - December 2021

Poland's implementation of restrictive, militarized and violent border control policies and practices under the state of emergency decree, amendment to the *Act on Foreign Nationals* and *Act on Granting Protection to Foreign Nationals* denies people humane and dignified treatment within the territory of the European Union. People are left with the choice to seek help and likely be forcibly pushed back into Belarus with the risk of violence from Belarusian authorities, or to hide in the forest, putting their health and lives at risk in extreme weather conditions with temperatures already reaching minus 10 degree at night. People on the move at the border between Poland and Belarus cannot continue to be left behind, trapped between borders, with their basic needs for shelter, food, water and health care ignored and any assistance to them being blocked, creating additional vulnerabilities such as risks of exploitation, exposure to violence, and mental and physical health risks.

Background:

In May 2021, Belarusian authorities publicly announced they would stop preventing irregular border crossings into the EU and subsequently proceeded to ease irregular migration to Lithuania, Latvia and Poland. Since July 2021, Polish authorities — under the official justification of the protection of external EU borders — have been violently deterring the influx of people on the move, violating both EU and international legal frameworks, and putting peoples' lives at risk in several ways:

- Legalization of pushbacks and collective expulsion by Poland, through amending laws⁴: all people entering illegally into the territory can be automatically returned to the border, even if a claim for asylum has been made. Polish border guards reported 7'700 attempts to cross illegally in September, 16'745 in October and 8'586 in November and 411 from Dec1 to Dec7. Since 27 Oct according to their own reports they issued 1'957 letter of refusal of entry.
- Based on statements MSF teams have received from people undergoing this journey, the procedures used generally entail direct pushbacks to the Belarusian border, where previously they may have encountered violence or ill-treatment. This policy forces people to remain in the middle of the forest, in need of food, water, shelter and often health care as well as other protection needs.
- The pushback or expulsion often involves violence from the Polish state authorities, with people describing being beaten with guns and other objects, kicked in the ribs and having their belongings taken or destroyed.
- Implementation of a state of emergency in September, which includes restrictions on all access, including humanitarian access within an approximately 3km zone. This creates an area of secrecy and impunity where pushbacks can happen rapidly and without oversight, even when individuals have made their requests for international protection clear and asked for asylum. These pushbacks also occur from outside the secure zone. De facto extension of the state of emergency by the amendments to Poland's Border Protection Act, adopted 30 Nov, continue to restrict independent humanitarian aid and independent media presence in the security zone.
- Heavy militarization of the border zone (~20,000 military) and military rhetoric of "hybrid war" by Poland and the EU, obscures the humanitarian crisis and reinforces a militarized approach to people congregating at the border which includes violent and forceful tactics with vulnerable groups.
- As of 7 December, at least sixteen deaths have been reported along the border since August in Polish territory, although this does not seem likely to represent all people who have died.

⁴ Amendment to COVID laws in August 2021, Amendment to Act on Foreigner Nationals and Act on Granting Protection to Foreign Nationals; state of emergency extension in November 2021 reinforced access restrictions.



Inaccessible area:

- In Poland, the state of emergency decree established an approx. 3km zone (varying between approx. 1 and 4km with areas up to 15km) only accessible to residents, military and border guards. Even for residents, movements within the zone are restricted to their area of residency and even then limited.
- In Belarus, a varied zone (100m to 5km) from the border is only accessible by the Belarusian nationals.
 - Between Poland and Belarus, in several areas the border fences are up to 100m or more apart, an area mostly covered by forest, into which people are pushed back, and often remain caught between the border fences or between Polish fences and Belarusian border guards.

MSF activity:

From October 26, an MSF team started assessments in Poland to identify unmet medical and humanitarian needs, and prepare for a response to the unfolding humanitarian crisis. MSF accompanied and supported local NGOs to provide humanitarian support and medical care to people on the move, who found themselves outside of the restricted zone. In October and November, MSF has engaged with the Ministry of Interior, as well as the Ministry of Health and Commander of Border Guards to request humanitarian access to the secure zone along the border area. MSF has also been requesting access to the Detention Centres and Border Posts and are prepared to respond to gaps in medical, mental health and humanitarian needs in the Border Posts. These discussions continue and as of 7 December, MSF has received permission to access at least one detention centre for assessment, but access to the Border Posts and the security zone remains denied.

Urgent need for independent humanitarian access and assistance:

- People on the move who find themselves inside the security zone in Poland, as well as outside the security zone, hiding within the forest area, are often afraid to come forward and request water, food, shelter, medical care or asylum to state authorities. They fear forcible return to Belarus, violence from the Belarusian border guards, or mistreatment by the Polish border guards. While providing basic items (food, water, clothes, blankets) and medical care to 13 Syrian women and men, people explained to MSF their fear of being found by Polish authorities and to face again Belarusian border guards, and they rapidly left the location of assistance after 20 minutes. A woman in need of urgent medical care refused to be referred to the hospital, in fear that the Polish authorities would return her to Belarus after receiving care at a hospital.
- People who are forcibly returned by Polish border guards, often find themselves blocked, sometimes violently, by Belarusian border guards from leaving the security zone within Belarus. Caught in the middle, people are enduring extreme, cold temperatures, with no access to shelter, food, water and medical care. MSF have spoken to people on both sides of the border who report hundreds of people stuck in the forest, fearing for their lives, with no regard from both Belarusian and Polish authorities for their lives, protection and assistance needs. This is unacceptable and people must be treated as human beings and with dignity.
- Registration to enter an asylum procedure or 'regular' return procedure in Poland is arbitrarily done by the Border Guards according to local humanitarian organizations and lawyers. It usually seems successful when Border Guards acknowledge someone as an extremely vulnerable person (e.g. based on their country of origin; but this as criteria is not applied consistently leading to arbitrary decisions taken by individual border guards). Registered people are then taken to a Border Guard Post along the border, and remain up to 20 days in the Border Guard Posts until they are transferred to a detention center. Conditions in the Border Guard Posts are reportedly poor and "below



European standards", with extremely limited access by humanitarian actors or legal counsel. Access to medical care is limited and access to Mental Health or psychological services has not been reported by anyone.

Unlawful, unsafe and violent pushback policy:

- People irregularly entering Poland are currently prevented from seeking protection and request asylum in Poland by different practices:
 - o Physical military deterrence: heavy militarization forming row of soldier blocking safe passage, instead of redirecting people into a safe and legal pathway to request asylum;
 - o Ad hoc and undocumented: direct return of people at the border without any formal registration or record, using change in COVID legislation as justification passed in August⁵,
 - Systematic and documented pushback: registration of identification document in a border guard post and delivery of "decision to leave the territory" document, prohibiting entry for 3 years into Schengen area, in compliance with the national acts passed on October 14⁶ and in violation of EU and International laws. People are then brought back to the border to leave Poland immediately. From 28 Oct to 7 Dec , 1,957 decision to leave the territory were reportedly delivered by Polish border guards, representing 1,957 people forcibly returned to the forest in Belarus without any examination of their application for international protection or the risks they may face.
- Recently amended Polish laws (COVID, *Act on Foreign Nationals* and *Act on Granting Protection to Foreign Nationals*) provide borders guards with "legal" grounds for systematic expulsion of people who crossed the border irregularly, neglecting their right to apply for international protection, neglecting their right of an examination of exposure to risks and neglecting their right to be protected against principle of *non-refoulement*. This constitutes a serious violation of the EU Charter of Fundamental Rights and EU asylum law⁷.
- MSF teams received first-hand accounts of people who have been physically assaulted by Belarusian border guards, who blocked them from retreating into Belarus and forced them back to Poland. People reported being beaten with sticks, harassed by dogs, separated from family members or forcibly moved to different areas along the border. People were left without any food or water, any shelter, any protection from the weather conditions, any humanitarian assistance or healthcare. People forcibly returned to Belarus are at a risk of physical violence, inhumane and degrading treatment.
- The practice and policy of pushbacks occur in a systematic structure and legalized way. All 16 people MSF spoke to in Poland, reported having been forcibly returned by Polish authorities before, often more than one time. MSF witnessed a group of 13 people being forcibly returned by border guards to the border, though all of them had requested international protection. MSF teams observed violence-related injuries people experienced reportedly when assaulted by the border guards from Poland, Belarus and Lithuania.
- Practice of pushbacks has led in several cases to family separation. MSF has encountered two women at a hospital who were separated from their husbands and children, due to their need to access health care. The family of one has been pushed back to Belarus. One man explained to MSF,

⁵ In August, the Polish Parliament passed an amendment of the previous COVID-related law (on the regulation on temporary suspension or restriction of border traffic at certain crossings) with the effect that persons who are not authorized to enter Poland are instructed to leave the territory immediately and returned to the state border line.

⁶ Act of 14 October 2021, amending the Act on foreigners and the Act on granting protection to foreigners in Poland, that introduce a provision that mandates issuing orders of illegal entry, for a foreigners that is apprehended immediately after crossing the external border of the EU in an irregular manner. The law does not require authorities to examine applications for international protection submitted by foreigners.

⁷ Poland is violating EU Returns Directive, which provides in article 6 and 8 that expulsion can only occurs if a return decision has been issued. Applicants shall also be allowed to remain in the Member State for the sole purpose of the procedure, and applicants for international protection must be protected against forcible return to the country.



that after eight pushbacks, his wife was brought to the hospital while he was sent back to Belarus with his son.

Dehumanization of people on the move

- The Polish authorities' rhetoric has never been one of a human and humanitarian crisis. Military and xenophobic narratives, threats of attacks, hybrid war/attack, has been the language used to describe people on the move stranded in the forest, with no regard for their fundamental rights as human beings. This harmful narrative of irregular migrants being pawns in a war leads to a dehumanization of the people stuck in this situation and underpins the harmful policies and practices violating their human rights.
- Poland's political discourse and narrative is consistently supported by EU Member institutions and European States, who label this crisis as an attack on EU borders. While this narrative continues to risk people's lives and deprive them from assistance and medical care, it validates the violent approach to border management practices and policies implemented in contravention of European law and convention by Poland and other EU member states.



Briefing Note – Belarus

MSF Holland – 07 December 2021

"Once you pass the fence, you're in the place of no return" – Iraqi man on Nov22.

Executive summary:

Considerable levels of **violence**, **abuse**, **and neglect** from Belarusian border guards continue to be documented, with limited access being permitted to humanitarian actors along the border on both sides. In order to halt the number of deaths already reported⁸ and to safeguard the physical and psychological health of people on the move, they must be granted - at a bare minimum - access to their fundamental basic needs including access to shelter, food, emergency services and healthcare. They must also be afforded protection and safe and legal pathway to access their right to seek asylum as enshrined in EU and international refugee law.

Background information

- Although estimates vary considerably, some **3,000-7,000 people** are believed to be on the move in Belarus. Since Aleksandr Lukashenko eased visa restrictions for many nationalities, it's reported that around 8,000 women, children, and men have flown into Belarus⁹, trying to reach European Union countries, and facing systematic pushbacks from Polish and Lithuanian border guards¹⁰.
- An estimated **1,000-2,000 people¹¹ are de facto detained** in a facility close to the Bruzgi-Kuznica border point, opened by authorities on 17 November to provide basic shelter and rudimentary access to services, mainly to families with children¹².
- An unknown number of people remains in other locations along Belarus' 1,000+km border with Poland and Lithuania, highly vulnerable to freezing temperatures, restricted and forced movements, violent pushbacks, caught in a militarized zone without access to humanitarian assistance.

MSF Activity: In early November an MSF exploration team arrived in Belarus to assess the unmet medical-humanitarian needs of vulnerable people on the move seeking to cross the Belarusian border into the European Union (EU), and to identify the opportunities for MSF to provide meaningful assistance to reduce the suffering of the affected population. On November 25, MSF team was allowed only on this day to access the restricted zone (not the so-called buffer zone), while waiting for formal approval from the Ministry of Health.

Urgent need for independent humanitarian access

- Along the **border areas**, people have extremely limited access to humanitarian assistance while being subjected to forced population movements, degrading treatment and violent pushbacks, and enduring sub-zero temperatures and deprivation of shelter, food and water. Many people had described to MSF an increasingly dire situation. MSF has been requesting access to the population to the State Border Committee (SBC) since 14 October 2021. On 24 November, MSF's was informed

 $^{^{\}rm 8}$ As of 9 of December, 16 deaths have been documented.

https://www.trtworld.com/europe/eu-agency-migrant-crossings-into-europe-rise-sharply-51932

¹⁰ As of 7 December: Polish border guards have reportedly prevented 35'000 people from crossing, Lithuanian border guards have prevented 8'900 people from crossing.

¹¹ https://eng.belta.by/video/getRecord/1559/

 $^{^{12}\,\}underline{\text{https://eng.belta.by/president/view/refugee-women-children-stuck-at-belarusian-polish-border-to-get-shelter-food-at-logistics-hub-145159-2021/}$



by the State Border Committee that **no access to any organization would be granted to all border areas**¹³ (without MOH support which has at time of writing not been granted), however on

November 25 MSF team was able to access the non-restricted forested areas along the border. The Belarus Red Cross (BRC) is responsible for non-medical assistance and has been given partial humanitarian access, as well as state emergency services and the medical services of the military supported by MoH, to reach people when authorized by Belarusian authorities, on an ad hoc basis and discretionary basis, with food and non-food items.

"In the jungle you have to ration your food, as you only have what you take with you. Neither the Belarusian nor the Polish board guards will help or give you anything. Sometimes LIT BGs give food" – Kurdish man, 27yrs, Minsk, 22/11.

MSF, you need to go inside the zone, the situation is very very criticial. In the neutral zone (after Polish border, before Belarus border), there are hundreds and hundreds of people – families, children, pregnant women, dead bodies. – Malian man, Poland 30/10

- Approximately 2,000 people had been camping outdoors since November 8 at the **Bruzgi-Kuznica border crossing point**. IOM has estimated that women and children could account for 50% of the affected population there, including many pregnant women. Since an initial IOM and UNHCR visit and assessment, no independent humanitarian access has been granted.
- Access to humanitarian organization at the detention center at the Bruzgi-Kuznica crossing remains minimal, ad-hoc and tightly controlled. Despite this, local and international media have been permitted access to the population, and have described to MSF the high need for humanitarian assistance, including water and sanitation, food and non-food items and medical care. BRC are providing some in-kind distributions. For very urgent cases, the state emergency services are providing some ambulatory referrals to local hospitals. WHO were able to conduct a health assessment on 21-22 November and reported to MSF the facility's "inhumane conditions" including significant overcrowding, the foul smell, a lack of WASH facilities (19 toilets for 2,000 people), COVID-19 concerns, and the need for independent and accessible medical care¹⁴. There is limited healthcare services inside the detention center, with one mobile health clinic operating during the day. On 24 November MSF was informed that access to the detention center for humanitarian organisations, including UN agencies, will remain ad-hoc and by individual request only.

Barriers to access to healthcare

In addition to lack of access to independent medical humanitarian actors to the people who remains stranded at the border, ambulatory services for emergency cases are extremely limited. **MSF has only information of two stationed ambulance near the detention center**. Lack of access to emergency services has been equally highlighted by WHO, after their visit to the border area.

"Even if you are very sick or have been beaten very badly, the police [BGs] will not call an ambulance for you". Man from Iraq, 27yrs, Minsk. 22/11/21.

- MSF received two alerts from family members of patients in hospital, who were **concerned that they would be forced back into the forest along the border following discharge from hospital**, requesting repatriation to Iraq. One person interviewed also explained how he was taken from the border to a Lithuanian hospital by Lithuanian border guards to assist translation for a sick family.

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¹³ The State Border Committee explained however that access would be granted to MSF if the Ministry of Health would support MSF request.

¹⁴ MSF Notes from call with WHO, 24/11/21



"Once the family were treated at the hospital, they took us all back into the Belarusian forest".

Kurdish man from Iraq 27yrs, Minsk, 22/11.

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People are also afraid to reach out for healthcare, for fear of being reported to the authorities and deported to their country of origin. On 24 November MSF consulted a woman in her 8th month of pregnancy who required emergency and potentially lifesaving healthcare in Minsk. However, her fear of possible deportation if presenting at a state-run health facility was so great that she rejected the medical advice. Almost every person on the move that MSF has spoken to on this issue has cited such fears. Lack of an independent healthcare actor is having a markedly negative impact on health-seeking behaviour in Belarus, with potentially fatal consequences to the affected population.

"I can't go to a hospital here, with an expired visa they will deport me right away", Kurdish man from Iraq with dislocated shoulder, 30yrs, Minsk, 22/11.

Violence and forced population movements

- Since mid-November there has been a marked increase in the brutality and degrading treatment exerted by BLR BGs in an effort to keep people trapped at the border, and pushed into Poland. Many people have described to MSF violence, theft and humiliation perpetrated by Belarusian border guards, whilst forcing people to cross EU borders or blocking them from retreating back into Belarus.

"Belarusian border guards will help you if you tell them you want to go to Poland or Lithuania. They gather 400-600 people and try to push them through. But if you are returned to Belarus, they will beat you. If you ask to go back to Belarus they will beat you." Kurdish man from Iraq, 27yrs, Minsk, 22/11.

In early November, MSF met 29 people near the border including two Kurdish women in their 7th months of pregnancy, just outside the restricted area. **They explained that they were forcibly moved by military vehicles in an attempt to make them cross a river at the Lithuania border, and then at the Polish border.**

"There was a police man with senior rank between them, he was drunk. He decided to throw us into water [river], but then because of the children they didn't do that. ... After that they put us into military truck. He was shouting and counting 1, 2, 3 and hitting us with the batons, not just me, but many people. They were laughing and humiliating us just so they could enjoy themselves." Kurdish woman from Iraq, 21yrs, Minsk, 20/11

- More than 20 people who spoke to MSF reported use of iron batons and fists, kicking and punching to the head, face and chest, and use of police dogs. One person explained that BLR BGs used chains on the arms and legs of someone in his group and that BLR BGs attempted to burn the men with the flames of lit camping stoves, whilst crying women and children tried to shield them. Drunken behavior, humiliation of people and theft of personal items including food, jewelry, money and the destruction of two passports by BLR BGs have all been reported.
- **People are also reporting family separation**, separation intentionally done by Belarusian border guards. One man explained to MSF that they forcibly take the young men to push them to undertake the more dangerous crossings at the Lithuanian border.
- MSF teams have also seen first-hand violence related injuries people experienced when assaulted by Polish and Lithuanian Border guards during pushback. People have explained being beaten with



the butt of a gun, kicked in the ribs, have all their belonging taken or destroyed by the border guards before being return back to the border.

'The police found us and put us in the back of a van, made us wait on knees. A woman from a hospital came but said that I was not pregnant – the police grabbed my arms, kicked my husband's legs, and made us get off the car. They told us to shut up. We could not collect our bags and were pushed back to the Belarusian border. On the Belarusian side, we were also pushed back – they told us to go back fast. The guard pointed a gun at us and said: 'Go back to Lithuania' - Afghan woman, 20s, Lithuania, 16/11

- Since the beginning of December, MSF started to receive reports of forced deportation. 15 people, including two families of respectively 4 and 6 persons described being forcibly taken to the airport by the police, and forcibly deported back to Iraq, with flights of the 4 and 7December. They explain to MSF being arrested in the street or in their home, brought to the airport and detained there for 2-3 days, with between 400-600 people, sleeping on the floor with no provision of food and water. From November 18, there has been 8 repatriation flights to Iraq, with a total of 3'132 people.

Cycle of vulnerability:

In an effort to reach Europe with the assistance of smuggling networks as well as BLR BGs, people on the move in Belarus are attempting border crossings multiple times. MSF staff have met people in Minsk who have tried crossing on up to nine occasions but were forcibly pushed back each time, and had difficulty to retreat.

"I've tried crossing 5 times, three times through LIT and twice by Poland. Every time it's failed, but BLR BGs make you stay and try again and again". Kurdish man from Iraq, 27yrs, Minsk, 22/11.

Those that have recently managed to return from the buffer zone speak of having paid BLR BGs between \$150 and \$2000 to secure their release. However it is reported that bribing one's way out is increasingly complicated. With reports of rising prices of hostels and taxis between the border and Minsk (\$250 most commonly reported), and increased reporting to the authorities of people on the move with expired documentation, even by hostel owners themselves, people are becoming increasingly physically, emotionally and financially exhausted.

"Some BLR BGs accept bribes, but not many. They steal money too. They took \$2,000 from one guy to get him from the border to Minsk" Kurdish man from Iraq, 27yrs, Minsk, 22/11

Whilst MSF have spoken to people who continue to suffer from violence-related injuries and chronic conditions, fears of deportation due to expired documentation persist. This is acting as a clear barrier to presenting at health structures. With the onset of winter, temperatures in Belarus have plummeting below freezing along with recent snowfall. Compounded by the obstruction of access to the border zones for humanitarian organisations, a bleak and very rapid deterioration in the health, wellbeing and vulnerability of this very exposed population can only be expected.