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## **Refugees and Health Management in Greece**

The high refugee migration in Greece and the rising problems which derive from this continuous influx have been met with complete disregard by both the media and the government. As one would expect, in addition to host inadequacy, the country has to deal with a second critical and complex issue, the health management.

The vulnerability, marginalization and poverty, as well as the high stress of displacement that refugees experience, pose a serious threat to their health. Evidence shows that severe mental health problems and trauma symptoms, primarily depression and posttraumatic stress disorders (PTSD) are prevalent in refugee populations as a result of organized violence, torture, human rights violations, resettlement and traumatic migration experience. Refugees also suffer from malnutrition and anemia, treatable non-communicable diseases aggravated by the lack of access to regular medication, infectious diseases including hepatitis A and B and parasitic diseases. Moreover, refugees are particularly vulnerable to sexual and gender-based violence. The access to maternal and obstetric care is also impeded by displacement, resulting in an increased risk of unsafe childbirth and maternal and neonatal morbidity and mortality.

In spite of the high rates of disease, host countries have great restrictions on the access of refugees to the Healthcare System and great variations in entitlements. Although generally, upon arrival in most welcoming countries some kind of medical screening is provided, this service is not accessible to a large percentage of refugees and the quality of the procedure is questionable and often omits mental health problems. Asylum seekers are usually granted limited access to healthcare, typically restricted to emergency medical care, pregnancy and childbirth care and immunization services. Furthermore, their fertility rates and unregulated infernal in hospitals result in major financial loses in an already crisis-ridden country. However the question of who is responsible for the financial sustaining and nursing of this wave of people, still remains.

It is vital that more effort must be set into the enhancement of the Healthcare System, so as to promote equity and efficiency in refuge health management. As the global community takes up this great task, we should collectively aim towards, providing refugees with access to timely, proper and high-standard healthcare services, while still looking out for the protection of citizen rights, ethics and finances.

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