'WHAT WE ARE WITNESSING IS NOT A REFUGEE CRISIS, BUT A CRISIS OF CARE'

UK practitioner **Lauren Wroe** explains what she learned after a month at a refugee camp on the Greek island of Leros



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feature

eros is a tiny Greek island just
20 kilometres from the Turkish
mainland. As such, it is a
popular entry point to the EU, a
'hotspot' for people fleeing war
or social and political instability in Syria,
Iran, Iraq, Afghanistan, Algeria, Morroco and
Tunisia amongst other places.

I arrived in Leros at the start of February as a volunteer. On my first morning we were shown around the camp, starting in semiderelict buildings sandwiched between rows of shelters supplied by furniture company IKEA on behalf of the United Nations High Commissioner for Refugees (UNHCR).

From these buildings clothes are collected, sorted and distributed; baby bottles are made up, nappies supplied, eggs boiled and tea brewed to supplement the food provided by non governmental organisations (NGOs). All of this was coordinated by international

volunteers running alongside the UNHCR facilities.

By my second day I was speaking broken Arabic and inducting a new volunteer to the baby milk room, neither of which I had ever done before. But due to the well coordinated volunteer pool in Leros, it is easy to be effective very quickly.

At the end of my first week I met a fellow social worker who had been working at another camp on the island of Kos. We started talking about the protection risks posed to women in the transit camps.

This year there are more women and children than men making the dangerous sea crossing to the EU border. Mothers at the camp showed me phone videos of their children's head poking out of the top of life jackets on crowded rubber dinghies. They laughed with a mixture of disbelief and relief as they reflected on the absurdity of the situation.

There is, however, a more serious side to their plight. On International Women' Day Mary Honeyball, Member of the European Parliament for London, tabled a resolution in the EU Parliament calling for "gender sensitive asylum policies". She highlighted how "women refugees not only face threats to their personal safety (long and dangerous journeys into exile, harassment, official indifference and, frequently, sexual abuse and violence, with resulting social stigmatisation, even once they have reached a place that seems safe), but are also responsible for the physical safety, welfare and survival of their families".

The resolution outlined the need for segregated sleeping areas and specialist

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advice and health services. With reports from the ground indicating the situation at the Greek border is getting far worse, it's hard to imagine how such resolutions will be implemented when the most basic facilities are currently not available. And this is where there is a role for social workers on the ground. We can act with immediate effect.

With support from the Mercy Corp NGO, I worked with a handful of volunteers to transform a dusty tool cupboard into a quiet women's space. Mercy Corp together with Women and Health Alliance International had already set up a similar space in Kos that had proved hugely popular.

It took us just two days and 150 euros to transform the space, equipped with carpet, tea and coffee and safeguarding instructions for volunteers. The area contains phone charging and coffee-making facilities, sanitary items and a mirror. More importantly, it provides a place for women to share stories about family, their journeys and the war.

At times the space was bustling with energy – Arabic music playing, hijabs being

removed, there was even dancing. Other times it was very quiet with children sleeping, women breast-feeding, talking softly and drinking tea. One ten-year-old girl sat painting her nails and speaking eloquently about the war in Syria, clothing, religion and enquired curiously about my cultural traditions. Another woman in her 20s showed pictures of a nephew who had passed away in Turkey. Although we were speaking across language barriers, there was a wealth of communication taking place.

As social workers we know the importance of such communication channels. In the busy camps these quiet (or not so quiet) moments could be utilised to identify vulnerable women and girls to refer to specialist services.

Spaces like this can also be used to introduce safeguarding messages about domestic violence and sexual exploitation.

Credit to profession

Arriving back in the UK, I heard about a group of social workers in Kent who have established a project called Social Work First to conduct assessments of unaccompanied asylum seeking children at the UK/French border. This is fantastic work and a credit to our profession, and I hope to join them. In the meantime, I have set up a forum, 'Social Workers Without Borders', to contribute to discussions about what action social workers can take to promote the rights of people at the borders.

We will be partnering with Social Work Action Network and the European Association of Schools of Social Work on 5 June for International Social Work Day of Solidarity with Refugees. This is an opportunity for members of the profession to come together alongside our international colleagues to promote beneficiary led, social solutions to social problems. As a group we would like to seek answers from those at the borders to inform our action on the day. We hope as many of you as possible will join us.

What we are witnessing is not a refugee crisis, but a crisis of care. As such, we do not need security solutions, but solutions that protect the human rights, dignity and wellbeing of people. As a profession this is what we do best.

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