Reportage

Caring for ethnic Albanians in Macedonia's refugee camps

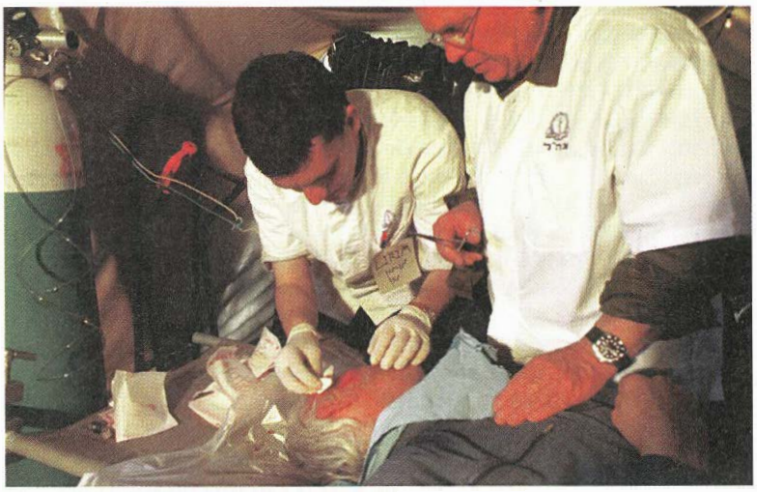
Theresa Agovino

Giota Koutsoukou is haunted by the memory of a 7-year-old boy. When I visited Macedonia in mid-April, 1999, the nurse had spent 5 days working in hellish circumstances treating refugees from Kosovo who were violently forced to leave their homes by Serbian police only to be kept waiting in a no-man's land at the Macedonian border. About 45 000 traumatised people spent as long as a week interned in a freezing, muddy makeshift camp known as Blace with little food, water, or shelter and no proper sanitation. Koutsoukou tended to hundreds of people suffering from exhaustion, bruises inflicted by Serbian and/or Macedonian police, convulsions, hysteria, frostbite, and respiratory infections. People with diabetes went into shock from a lack of insulin. Others emerged needing to have stitches removed or dressings changed from previous operations. Dozens died.

But it is the 7-year-old who dwells in Koutsoukou's thoughts. "The 7-year-old was just hysterical. It was incredible", says Koutsoukou, who works for Médecins Sans Frontières. "It was an adult hysteria, and children just aren't supposed to get that hysterical. I was shocked. The people were shocked. These people just couldn't understand what was happening to them."

The ethnic Albanians who comprise the overwhelming majority of the population in the Serbian province of Kosovo are the victims of the worst ethnic cleansing in Europe since World War II. The Kosovo Liberation Army has been fighting for the province's independence for over a year. The Yugoslav authorities have attempted to eradicate the rebels by burning villages and massacring civilians in its quest to keep Kosovo within Serbia. (Serbia and Montenegro are the two remaining republics in Yugoslavia.) About 800 000 Kosovars had been displaced within the province. But when NATO began bombing Yugoslavia in late March, the country began a systematic expulsion of ethnic Albanians which has created a humanitarian nightmare. More than 600 000 have fled into Macedonia, Montenegro, and Albania, catching humanitarian relief organisations by surprise. And there is little rest for the overworked aid agencies as refugees continue to flee. The situation is the worst in Albania, Europe's poorest country, which is hosting more than 350 000 refugees (updated estimates available at http://unhcr.ch/news/media/kosovo/htm). A combination of the vast number of refugees, poor infrastructure, and mountainous terrain has made delivering aid very difficult.

The situation is better in Macedonia, which is hosting about 120 000 refugees. But reports that another 50 000 people could be heading for the Macedonian border are causing a panic in overcrowded refugee camps. Doctors say is nothing short of a miracle that the camps have escaped epidemics but now staff are concerned that their luck could run out. Brazda, the largest camp in Macedonia, holds about 24 000 people—25% more than it was planned to house. About 6000 new refugees entered the camp in the span of 4 days causing obvious pressure. The food lines snaking around the camp have extended into giant, coiling cobras. Rubbish piles have multiplied and broadened. Blankets are scarce. And attempting to sidestep the results of children opting not to use the latrines has created an obstacle course. "I don't know what I would do (with more refugees)", says Ed Joseph, a manager of the Brazda camp who works for Catholic Relief Services. "We are already starting to see the social ills from overcrowding: the fights, the thefts. This place is a tinderbox that could really explode."



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The Macedonian Government has been slow to allow new camps to be constructed or existing ones to expand for fear of upsetting the country's delicate ethnic balance. Between 23% and 40% of Macedonia's 2 million people are ethnic Albanian. Existing tensions between the country's ethnic groups have been exacerbated by the refugee crisis. Macedonians fear that if even a fraction of the refugees remain in the country, an Albanian separatist movement could ignite. Macedonia was widely criticised for clearing the Blace

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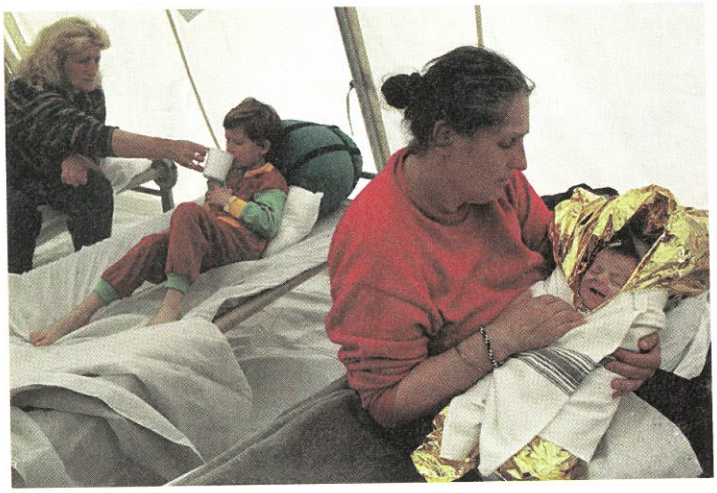

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camp in the middle of the night, sending most of its residents to Albania and Turkey. The UNHCR is working to move some refugees to other countries to relieve the strain on Macedonia. In addition, there are discussions about building more camps. But fire and disease remain enormous concerns in the existing camps. Some of the tents at Brazda are only about 6 inches apart, and refugees often start small fires to heat food dangerously close to their temporary homes in windy weather. Doctors also fear the combination of rubbish, inadequate hygiene, and the upcoming warm summer months could lead to epidemics. There are no showers or hot water at Brazda, and there are not enough latrines. "You have to be worried about epidemics when there are this many people crammed into small spaces", says Michael Qualls, a health coordinator with UNHCR. "And when there is an influx you only get more concerned."

A tell-tale sign of the recent surge in the refugee population is the forlorn expressions on the medical staff who treat them. At 14 00 h one Saturday, the clinic run by International Medical Corporation at the Stenkovic camp had already seen 100 patients, its usual total for a full day. About 30 people, all of whom seem to be either crying or coughing, are in a big white, plastic tent waiting to see a doctor. "It is so depressing. It is so draining", says Nicola Boyle, who coordinates the clinic run by IMC. "They just keep coming." The aid workers are as stretched as the camp's capacity. Boyle has been working non-stop since she arrived 3 weeks ago because, like other charitable organisations, IMC, could not anticipate the needs of the crisis and is still waiting for more staff. IMC is expecting five doctors and four nurses. It remains to be seen whether that will be enough. Non-governmental organisations are still trying to establish priorities and systems, and were using the short lull in the refugee influx to get organised after the initial shock. The NATO troops in Macedonia that were waiting to enter Kosovo as part of a peacekeeping mission saved the refugee situation in the country from total disaster. After the debacle at Blace, the Macedonian Government asked the troops to set up camps. Within 24 hours, camps had been set up and hospitals were established.

Peter Beichl, a lieutenant colonel in the German Army, remembers waiting for the buses of refugees to enter the camp after it was established. "It was difficult to imagine how it would be, but then these people just kept coming off the buses and they had nothing. We just stood looking for the people in the worst condition and treated them first", says Beichl. "At the beginning we were seeing 250 people an hour."

The German military operates a camp that is home to 3200 refugees. Its hospital is a maze of eight tents that includes an operating room, emergency room, and separate wards for men and woman that is staffed by 20 medical professionals, including four doctors. Refugees and local people volunteer as translators. But even when the language barrier has been surmounted, problems remain. These doctors know nothing of their patients' medical histories. Beichl says one patient at the camp entered the hospital with an indwelling catheter and a prescription for insulin. The doctors determined that the 45-year-old woman did not have diabetes, and could find no reason for the catheter. Her family could offer no insight into her condition. "It is hard to get information from people who are so traumatised", says Beichl. "You need to make treatment decisions quickly and you don't always know everything."

Still, doctors in all camps remark that for the most part the overall health of the refugees has been very good. Most of the treatment has revolved around problems such as dehydration, exhaustion, and complications from chronic diseases such as asthma and diabetes that were left untreated as the refugees fled. "We came expecting all kinds of epidemics. We brought small drills that we thought we would be using to dig latrines and graves. Luckily that hasn't been the case", says doctor Alkan Michael, a member of the Israeli Army. Though not a NATO member, Israel sent a mobile hospital to aid the refugees, which is located at Brazda. Ironically, the most natural of conditions was the one for which the hospital was least prepared: pregnancy. As a military unit designed to deal with war injuries, there were no incubators in the hospital's inventory. Two were eventually flown to Macedonia, but

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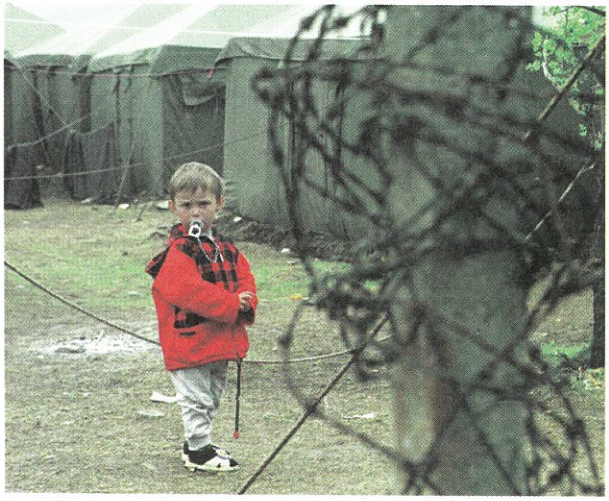

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for the first few days the hospital had to improvise with cartons and space heaters. The ninth baby delivered at the Israeli hospital left naked because the unit's staff had not thought to bring baby clothes and the mother had had no time to pack before she fled. During my visit, NATO was in the midst of handing over refugee-camp management to humanitarian organisations, so the military hospitals were preparing to close. The German Red Cross was setting up a hospital at Brazda. Meanwhile, the German non-governmental organisation Die Johanniter would replace the Germany military operation at Neprosteno camp.

NATO officials say they are confident that the non-governmental-organisation community is prepared to take over their rightful role in running the camps. And while the situation is stable, the non-governmental organisations will have some different challenges than their military counterparts. The next wave of refugees is expected to be much sicker than the initial arrivals since they have spent more time in Kosovo where food and medical care are believed to be in short supply. The non-governmental organisations are also going to try to develop medical records for the refugees so that chronic diseases can be treated more effectively. But the biggest challenge may be dealing with the psychological trauma suffered by the refugees, who usually fled under a firestorm of shelling, their exit path lined with hostile, gun-toting police. In the worst cases, refugees saw their homes burning behind them and their loved ones shot in front of them. Depression and anxiety is rampant in the camps. Children scamper around the camps during the day as though living behind barbed wire were normal. But their sleep is skewered by nightmares, their parents say. And for every refugee that sits outside their tent chatting with neighbours, there is another within staring blankly into space.

While I was in Macedonia, Doctors Without Borders was setting up an operation at Brazda to conduct both group and individual counselling. Even before it has officially opened it started, patients have trickled into the navy blue tent. Naxim Ymeri had spent three sessions trying to coax a man rendered mute by the horrors he witnessed to speak. In Albanian culture the family is paramount. Ymeri says the men suffer because they feel they have failed to protect their loved-one from harm. "The men tend to close themselves off. They are terrified for their families", says Ymeri. "I try to tell them they are strong just for having survived." Ymeri is also treating five children, aged 12 through 7, who were separated from their parents at Blace. They all fight with each other during the day and suffer nightmares while they sleep. The younger children wet the bed. He fears that the two older girls, aged 12 and 11, are becoming anorexic. He gives them medication to help them sleep, and tries to calm them with kind words during the day. "What I can't do is bring their parents here", says Ymeri. "And I fear that if they don't find their parents soon, the psychological trauma they suffer now will turn into a chronic psychosis."