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Covid-19 pandemic in Greece

Covid 19: Greek government boasts hide reality

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On 22 April Greece had 2408 cases and 121 deaths from Coronavirus. Media coverage has tended to concentrate on how it has come out well from the crisis. [1] Nevertheless it is also home to refugee camps where the situation is catastrophic, provoking strong protests by the refugees in them. [2] Thanasis Antoniou is a junior doctor in a psychiatric hospital in Athens dealing with coronavirus cases.

IVP: What measures has the Greek government taken against coronavirus? Do you think it is enough?

Thanasis Antoniou: There are two ways to address this question. The first is the official one. That includes schools and university lockdowns, the ban on "pointless wandering" (unnecessary travel) in the whole Greek state, the strict quarantine (no one allowed to go out of his/her house, mainly in some villages in the countryside with a lot of cases), travel bans etc. The second one is the "laissez-faire" for some parts of the economy, like supermarkets, food, transports, industry, parts of the public sector and private companies.

In these sectors working conditions have deteriorated significantly (longer working hours, less wages, lay-offs, insufficient protective equipment-if any) etc. It is striking that many of the private companies, start-ups etc ,which were awarded prizes for the working conditions they were supposedly offering during the previous years are now considered to be the worst employers around, laying people off or changing terms of contracts on a daily basis. The most striking examples are Teleperformance [3] and TaxiBeat [4], whose examples are being followed by a significant (and rising) number of employers.

As well as that, the State has done little to press the Orthodox Church to shut down its public activities, as they refuse that the Holy Communion can help spread the virus. Churches shut down after repeated public outcry and much later than most other public spaces, although there were virus victims in people going regularly to churches from early March on. This scandalous tactic included priests giving the Holy Communion in some places to as many people as they could before the ban, even inside a Child Cancer Treatment Center in one of the biggest pediatric hospitals in Athens.

The government is boasting that it has followed a "fearless" and "successful" tactic, implying that they were not afraid to close down big parts of the economy, hire people for the public health care sector and subsidize both companies and workers which were struck by the paralysis of the economy. The truth is that some governmental members have diverted public money for highly debatable purposes, for example the Ministry of Health (MoH) gave 11m Euros for the advertising of the quarantine campaign "Stay home", despite the fact that the Constitution obliges all media companies to advertise such events for free. A similar tactic was followed by the Ministry of Education and Religious Matters (yes, we do have one in Greece, as there has been no State-Church differentiation), with diverting big sums to start-ups (founded a few days before) for advertising or e-education planning.

In February, the Minister of Health blocked the hiring of almost 500 doctors which was prepared by the previous government by not signing some essential documents on time, on the pretext of arguing on the planning of this move and its addressing to "false needs" in the health care systems (note that most of the were emergency doctors). Then, in early March the MoH called for 2000(!) positions in the health care system and they boast every now and then that they hired so many people. The truth is that most of the 2000 are administrative and nurse staff, who are much needed, but no doctors. In the central coronavirus center of Athens, Sotiria Hospital, only a couple of doctors have been hired so far, and their specialties are not directly linked to the needs. There has been a second call for doctor positions, but this contains 4-month contracts on a self-insured basis and no further motives, like long-term contracts

or bonuses for a future public health care position contract, thus producing little outcome. [5]

So, the government forced doctors from the primary health care and smaller hospitals to move to emergency departments, especially in regions with many cases and a lot of the medical staff exposed to the virus and in quarantine, like Kastoria hospital. This move has stripped primary and secondary health care of doctors, leaving a big part of the population unattended. Lastly, they voted for a much faster way to hire junior doctors (trainees), though this also did not produce much, as most of the medical school graduates work in the primary health care sector with yearly contracts or are abroad.

The hardest part of the measures has to do with the quarantine tactic and special populations. First, the MoH used a public organization called National Organization of Public Health (NOPH - Εθνική Οργάνωση Δημόσιας Υγείας) and founded a telephone line for information. This line was manned by 10 people at first, 20-30 later, which gave info on an algorithm basis, without medical training or supervision. Night shifts were even covered at first by bank telephone support centers! Their tactic called for everyone to stay at home and not go to the emergency unless they had serious symptoms or medical history. The line actually collapsed (people waited for hours for counsel) and a lot of patients deteriorated or even died because no private doctor went to see a suspected case at home and the NOPH did not allow them to go to hospital. Public outcry led to a better organization, but the line is now infamous.

The hospitals have strict instructions not to test people for coronavirus unless absolutely needed, so no quarantine can be actually imposed. We actually face a "Catch-22" condition. If you have symptoms, you have to stay at home. If you are too bad, you won't be admitted to the hospital, so you won't be tested. If so, you have to go to work after 3 days (that's the maximum duration of recovery leave without doctor's notice, and no doctor signs without positive testing). Private testing costs around 150Euros, while basic salary is around 450-500Euros.

So working people have to answer the question "will I go to work and possibly contaminate everyone or should I stay at home more and possibly get fired?". The latter has led to a serious spread of the virus, all repercussions of it as well. This is a very common problem, but not the only. Banking loan payments, rents etc continue and in May there will even be auctions for non-performing loans! [6]

Students staying in student residences have been evicted from them and sent to their families (if they have any) and hotels (if they do not have). This move was conducted because the MoH copied strategies from other countries, which transformed student dormitories into hospital beds. In Greece they did not do that though, so they evicted the students for no reason, as high-ranking public officers admitted recently. This not so sane move has created outrage among students, many of which were working at the time (e.g. delivery or other). Things became worse when they completed their relocation to hotels (sometimes under treat of police taking action), which proved to be of extremely low quality, having bed insects etc. The fact that the government forced the students to move from their cities of studying to their home cities actually helped the spreading of the virus has been a main point of criticism.

The worst though is now appearing in prisons and refugee camps. There has been at least one death so far, in a female prison in Thiva, of a relatively young person (40y) who was deprived of the right to medical care although she appealed for it repeatedly. Refugee camps have started to have also cases, and stricter (if possible) quarantine has been imposed. Lastly, Rom populations have also cases and have started to be victims of racism, although the MoH tried to protect them by sending there some high-ranking officers and doctors to organize the quarantine. And of course we have to keep in mind that the "pointless wandering ban" means 150Euros fines to those arrested, which almost always are low-class people, old people, immigrants, refugees etc. There have been reports on fines on shepherds in small villages for instance. The general idea is that the police has been working "too well", giving fines to people that should not be fined for a series of reasons (psychiatric conditions, age, lack of cell phones), while the media distort videos of public places to seem crowded so as to create a feeling of public rage against the "pointless wanderers" who spread the virus.

For the moment, the victims are not many, so the government can continue boasting about how effectively they treated the pandemic so far. However, most people now know that without testing, the case number is false, and that the tactic has some of the above mentioned problems. Of course, we have to keep in mind that Greece has been exposed to much less virus cases than Italy or other European countries, as only few people travel during winter time and there is not so much winter tourism. This is the reason that most Balkan countries, with different levels of strict measures, have much fewer cases than the rest of Europe. And we have to keep in mind that most people have treated the situation in a serious way, helping reduce the possibility of virus spreading. The true question lies ahead: if they applied a strict quarantine and thorough population testing, having those positive stay at hotels for 14 days for instance, there would be a practical elimination of the threat for the moment.

Now we do not know how many people are infected and can spread to others, so when the pressure of the economic disaster becomes obvious, the government will have to lift the ban. This will lead to a further spreading, be it through the tourist sector or else, leading to a second wave of mass infections. The government has no solution for this possibility, leaving its hope on the discovery of a cure. The working class though cannot support such a tactic, for it is they who will bear the burden of it.

IVP: What are the reaction towards the epidemic across the political spectrum?

TA: There are no significant differentiations for the moment for most parties. Nea Dimokratia (the right in power) has been running a mainly moral campaign, calling doctors and nurses "heroes" and so on. The wife of the Prime Minister, Mareva Grapowskis-Mitsotakis, even called for a balcony applause for the health care workers. Doctors who posted on their facebook pages that "we don't want to be heroes, we want equipment to do our job correctly," were laughed at by government affiliated media. SYRIZA former health ministers are making constructive criticism to the MoH tactic, while one of them volunteered for the task force or the front line if needed, as he is an Intensive Care specialist doctor.

Kinima Allagis (formerly PASOK) has not said much different than ND, while the far right is mainly spreading conspiracy theories and fake news on Erdogan spreading the virus, the virus being fake and so on. KKE has called for increased staffing of the public health care sector, though they are considering the national unity tactic for the pandemic to be the only way for the moment. They were the only political organization which made public appearances on the World Health Care Day on 7 April, with Dimitris Koutsoumbas, the General Secretary of the party, to appear with KKE member and unionist doctors in a big public hospital of Western Attica. The radical left has some significant forces in the public health care and has been trying to force its agenda against government propaganda, creating some serious debates, sometimes with KKE unionists and sometimes without.

KKE and ANTARSYA hold the leadership of the Federation of Public Hospital Doctors and called for small rallies on 7 April 7 in support of health care workers and for an increase in public spending on the health care system, which has been degrading seriously in the last two decades. Activist action on 7 April was massive in some hospitals, although it was faced with mixed feeling by many health care workers who considered the rallies a possible way to spread the virus. Doctor activists argued that the lack of protective equipment even in emergency departments is of course a much more serious threat.

Anarchist and autonomous groups have been trying to organize some solidarity groups in neighborhoods along with the radical left or on their own, some of them have managed to do some important solidarity work. It is notable that even footballs ultras fans have been carrying their banners of support to hospital workers, showing that the health care question is becoming important to a lot of people. Some examples of solidarity work include "solidarity boxes" in flea markets (which are very common in Greece and are organized on a weekly basis in every neighborhood). The concept is to leave to the box (or take from it) things for passer-byes who need them. Other examples are networks distributing food or medication around the center of the city, although the prohibition has hindered this significantly,

whereas other groups use to post stickers with emergency phones or deliver fliers with contact detail for people in need of anything, ranging from alimentation to psychological support or counsel. Radical networks are struggling with internet coordination, as activists may have internet connections and time to discuss, but people in need do not. Note that activism like hanging banners or giving away leaflets which criticize the government can easily be fined with 150Euros for "pointless wandering", if not worse, as rallies have been banned and their organization is considered a serious offence.

One thing is that the "explosive" working conditions imposed on the private sector have proved to a lot of employees the need to unionize, thus helping to create new unions and even bringing about some successful strikes (as in TaxiBeat as mentioned above). The radical left has been playing a role in this effort, as well as the effort to prove how the neoliberal policies which have been applied in the past decades have created such a dysfunctional system. Internet use has been central in the diffusing of all kinds of ideas at present and ideological battles are raging. Due to the ban, though, it is really difficult to make an assessment of the depth of the radicalization brought about by the crisis at the moment.

IVP: What are the conditions in your hospital? Does the staff have enough Personal Protective Equipment?

TA: My hospital is supposed to treat only confirmed coronavirus cases, so most clinics have been reformed in this way. For the moment, some departments are burdened and some are not, and there are even a few available ICU beds. Colleagues have been wondering why, because most expected a rise in the pandemic victims, but as I said before Greece has less cases for a variety of reasons, and since surgical operations rooms shut down, emergency operations and cardiology emergencies are much less (heart attacks are rare these days, as are vehicle accidents) so ICU admissions for other causes are few and cases may not be transported to other hospitals than the ones they were admitted at first for further treatment. Of course, the situation is dynamic and can change any time. As far as PPE is concerned, there have been serious allegations by staff members that the masks distributed are not suitable for ICU use, as they were distributed in PPO2 boxes, but their serial numbers indicated other, non-medical use. The MoH addressed these accusations indirectly as "fake news", although they match similar accusations made by colleagues throughout Europe. Note that the State has issued a statement recently (9 April) saying that the PPE suggested are much less than what is proposed by international guidelines.

A few days after the accusations, Mitsotakis himself made a brief appearance at the hospital, to show support and supposedly brought with him some donated equipment. We still however have only one surgical mask per person for 7 hours of duty for doctors and 8 hours of duty for nurses. We are supposed not to have quarantined colleagues yet because the hospital is spread in many small buildings, making it difficult for staff to interact and cases, if any, are contained. All around Greece, however, the tactic imposed by the MoH allowed for a serious spread of unconfirmed cases in hospitals, which were not tested and thus contaminated a lot of health care workers, with more than a hundred of them being quarantined so far. The problem is that our lines are thin: most senior doctors are older and thus, if infected, could be in grave danger, junior doctors are also few and less than a handful of new colleagues have appeared for service so far. Imagine that for 120 pneumonologist trainee positions (the hospital used to be a tuberculosis center in the past and still has 12 pneumonologist clinics, including a university clinic), only 20 are covered at the moment. So, if the situation worsens, there are no serious doctor reserves.

IVP: What are the conditions in your service? What is the future of your service?

TA: I am an intern in the psychiatric clinic, which for the moment is free of coronavirus cases. All staff members have been listed by the hospital administration for emergency plans and some of the nurse staff has already volunteered and moved temporarily to the ICU. Our clinical psychologists have formed a plan of answering to other staff members' possible need of support, which has started to have its first meetings with colleagues of other clinics. We are considered second-line for the moment and it seems that our work will be significantly increased in the next

months, as the repercussions of the crisis will start to be clearer.

For the moment our main work is focused on our pool of patients, as our clinic has multiple external patient treatment units which are not allowed to function. We have to tend to a lot of their needs, from more basic ones (like linking them to social services if they need ready meals or medication for instance) or changing medication schemes, to simpler ones, like helping them adjust to the "pointless wandering" ban and so on.

The sad thing is that the way the media handle the condition creates a climate of general anxiety and, given the ban, a lot of people are exposed to much more stress than they should be, so some conditions relapse faster. It is not the time to discuss these trends though.

PS:

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[1] *Al Jazeera* 7 April "[How Greece flattened the coronavirus curve](#)" and *Time* "[Greece Has an Elderly Population and a Fragile Economy. How Has It Escaped the Worst of the Coronavirus So Far?](#)".

[2] *Al Jazeera* 19 April 2020 "[Fire tears through Greece refugee camp after coronavirus protest](#)".

[3] Teleperformance company has been repeatedly honoured by employer unions as "Employer of the Year", "Best place to work" and so on. They run a telephone and e-support center for other firms, like Apple and so-on, with a 24h international call center and 8500 employees. They were criticized repeatedly by their employees for not taking almost any precautions for the virus spread, as they only brought a few bottles of hand sanitizer per building floor, that is one bottle for 100 employees in each shift. Note that their buildings do not have windows and desk distances are 0.5m. They did not allow for their employees to take proper sick leaves in case of coronavirus infection, or allow for remote work for high-risk groups, forcing people to come to work every day even after the first cases of sick employees. Instead, they prepared a second building, where the possible virus-infected employees could supposedly work. This brought about a huge outcry, forcing them to adapt to longer leaves and remote work function.

[4] The TaxiBeat startup (taxi finding app) has been deemed "Google of Greece", being extremely lucrative since its launch and recently (2017) bought by the Daimler Group. They used to boast of their high interests and have even rented one of the most expensive buildings of the historical center. That did not hinder them from laying off 15 employees in Greece (due to performance issues!), some more in Latin America and cutting all remaining employees' salary down to 50%, on the 7th of April. This led the employees to coordinate on an internet-based assembly, where they took the decision to form a union and battle the cuts and layoffs. On April 9th they made their first (massive) work stoppage and asked for state protection due to employment law violations. The union is planning further actions in the next days.

[5] That means doctors and not the state pay their insurance, that is 250+Euros monthly, plus increased tax, for a salary of 1300Euros approximately for a specialty doctor in the public health care system.

[6] As you may know, an important percentage of Greek bank loans are not being paid back and there has been a demand from hedge funds to auction the bails, as well as an important movement in the past years that blocked auctions by blockading the courts where they were supposed to happen. Members of the movement (radical left activists, mainly, like members of NAR-ANTARSYA and Panagiotis Lafazanis from Popular Unity) have been accused of serious offences and are sent to trial, while most governments of the last years tried to protect the families losing their only house to auction. Auctions had stopped for some months, but are due to start again in May by means of e-auction platforms, including auctions of only-house cases. This is huge, as in Greece a lot of people actually own the house they own and this used to be protected by law (for instance if it was the only house a family owned it could not be lost to banks, or if a road was supposed to pass from the place and the house had to be torn

down, this was not allowed). The memoranda laws changed that, due to hedge fund and banking pressures.