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DOCTORS WITHOUT BORDERS (MSF) ISSUES REPORT ON DEPORTATION OF ALBANIAN POPULATION OF KOSOVO

(New York/Paris, April 30, 1999) -- The ongoing forced deportation of the Albanian population of Kosovo is planned, systematic, and constitutes a crime against humanity, according to a report issued today by the international medical relief agency Doctors Without Borders/Médecins Sans Frontières (MSF).

The report is based on witness accounts collected from 639 Kosovar deportees in Albania, Macedonia, and Montenegro and an epidemiological study carried out on 1,537 Kosovars (201 families) who arrived in Rozaje, Montenegro, on or before April 15, 1999. Teams of Doctors Without Borders' epidemiological and legal experts investigated the characteristics of refugee families, the conditions surrounding their departures, and the fate of their family members in order to evaluate the most urgent humanitarian needs of the Kosovar deportees.

The epidemiological survey shows that 91% of the displaced Kosovars in Rozaje, Montenegro, were forced to leave their homes after direct threats or attacks by Serb policy, military, or paramilitary forces. In the majority of cases, threats and physical violence have been used to empty entire villages and towns, destroy or steal deportee homes and possessions, and confiscate identity papers. The epidemiological survey also found that the male/female ratio among refugees in Montenegro is unbalanced with a 13% lack of males in the 15-55 age group, and that 28% of families have left at least one member of the family in Kosovo.

"The witness accounts reflect a high degree of physical threats and violence against men, women, and children in Kosovo. Refugees we interviewed are clearly victims of a well-organized and carefully orchestrated forced deportation," said Joelle Tanguy, executive director of Doctors Without Borders.

Based on the findings in this report, Doctors Without Borders/Médecins Sans Frontières strongly recommends that relief efforts take into account the violence already inflicted upon the deported Kosovar population. In the context of the criminal deportation of the population of Kosovo, the international community must seek to mitigate the most harmful consequences of crimes already perpetrated on deportees by properly and systematically registering all deportees under the international authority of the UNHCR, and by carrying out only voluntary relocations of deportees.

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Doctors Without Borders/Médecins Sans Frontières (MSF) is the world's largest independent emergency medical relief organization, providing aid to victims of armed conflict, natural and man-made disasters, and epidemic diseases, and to populations who lack access to health care. Nearly 2,500 volunteers from 45 countries currently work with Doctors Without Borders, providing medical aid in more than 80 countries.

More than 100 Doctors Without Borders volunteers are currently carrying out medical, mental health, water and sanitation, and epidemiological work in Albania, Montenegro, and Macedonia. Since the Kosovar refugee crisis began in late March, Doctors Without Borders has flown in 22 air charters containing 588 tons of relief materials for distribution in the region.

For additional copies of the report or to arrange interviews on the report findings, please contact Kris Torgeson at 212-655-3764.

To make a donation to the Kosovo Crisis Relief Effort, call toll-free: 1-888-392-0392, or visit our webpage at www.doctorswithoutborders.org

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INTERPRETATION AND ANALYSIS OF RESULTS

The sample selected for the survey can be considered as quite representative of the refugee population the most in need, however the survey could not take into account the most recent arrivals who were settled under tents in difficult conditions (night temperatures hovering at close to 0° C, windy area, lack of basic necessities,..).

The overall sex distribution within the sample appears to be “normal”, although the figure for males in the 15 to 55 age group is under-represented. This may indicate that a proportion of men have stayed on to fight, or are dead. A further possibility is that they were taken prisoner. During the survey it was reported that some civilians were taken prisoner. The proportion of children aged under 15 (36%) seems higher than the expected figure for this type of population in peace time. Due to a lack of reliable reference data, no conclusions can be drawn for the moment.

Nearly 46% of the families surveyed no longer have their Kosovar identity papers. Neither did they receive papers when they were recorded on the lists maintained by “Mother Theresa” (NGO) or by the local police. Given that this population is officially considered to be displaced in Montenegro (Republic of Serbia), and given that under current conditions the UNHCR is unable to grant them the status of refugees, official recognition of their identity and status is now a serious problem.

More than half of the surveyed population arrived in Rosaye less than five days ago. They had fled to avoid the recent series of exactions which took place in the villages around Ishtok. Now that a list of the names of the villages which produced this wave of refugees has been established, it is possible to determine the order of successive attacks launched by Serbian forces.

The survey has also facilitated the documentation of military strategies used against villages: mortar or grenade attacks, followed by heavy gunfire or firebomb attacks, and then the pursuit of the fleeing population (direct fire on civilians, including women and children). The reports of this kind of attack are corroborated by accounts of shootings and wounded civilians which were reported in the survey. Furthermore, almost half of the refugee families questioned in the course of the survey report having their lives threatened in their own homes.

If we extrapolate the results of the survey to the entire refugee population of Rosaye (at least 25,000 people), almost one hundred violent deaths are likely to have occurred in this population, over the period from 24 March to 15 April 1999. In the same period, the number of those wounded by bullets and mortar grenade shrapnel is likely to represent more than 200 cases.

Since 24 March 1999, the refugee population has also been affected by the separation of families. About a third of families report being separated from at least one close family member - either “left behind” in Kosovo (28.0%), or “missing” (5.0%). Extrapolating from this data, the figure for those left behind or missing for the 25,000 refugee population in Rosaye may be as high as 3,000.

Figures for dead and wounded as well as "missing persons" and persons "left behind" were also reported for the period from 28 February 1998 (attacks on Drenica) to 23 March 1999. These 1998 figures are lower than those reported for the period from 24 March to 15 April 1999, and they are not analysed in this report.
Regarding basic needs, the refugees living in the factories, under tents or in the mosques brought virtually nothing with them to Rosaye, and sanitary conditions are very precarious (before the survey was conducted a rapid evaluation of basic needs in the three refugee sites was undertaken). The results of the survey confirm the findings of the rapid evaluation particularly with regard to food and bedding (blankets and mattresses). The survey attempted to establish the effectiveness of the last distribution of bread rations on the preceding day. The survey found that the average individual bread ration per refugee was around 200g (instead of the 300g officially announced planned).

It is possible that some families are still living on their meagre savings, but from now on it is important to envision that the nutritional situation could deteriorate. With the constant influx of new arrivals, the limited resources of NGOs and the local community may soon prove to be insufficient.

In terms of basic needs, the question of the living conditions of the refugee population must be addressed immediately. Sanitary problems pose a serious threat in the short term. Usual indicators (number of square metres/person, number of litres of water/day, the ratio of refugees/latrines) show that recommended norms are not being respected and that there is a real risk of epidemics.

Despite registered departures for Albania (over 20 000 departures registered at the border post in Tuzi, for the period 24 March to 22 April 1999), it is likely that the global needs of refugees will remain more or less constant in the following weeks. The influx of refugees arriving from Kosovo to Rosaye can reach 1000 - 2000 per day (confirmed from 13 to 20 April 1999). One must keep in mind that thousands of other refugees, blocked in Kosovo because of security reasons, can still arrive.

Given that Rosaye is only 20km from a war zone, the question of security is one of the most urgent issues. Since its arrival in the municipality of Rosaye, Montenegro, the Kosovar refugee community has lived in fear. Refugees are frightened by the possibility of exactions perpetrated by groups of armed men crossing the border from Kosovo (since 15 April, non-identified cars with armed men were met on several occasions between Rosaye and the border). On 20 April 1999, two refugees were killed only 7km south east of Rosaye. Others have reported being insulted and beaten by paramilitaries, the Serbian army or the special police. The wounded avoid seeking treatment in Rosaye because they are afraid of drawing attention to themselves. All of these facts confirm the existence of the current repressive policy which has been adopted with regard to the Kosovar refugees.

RECOMMENDATIONS

Obviously a long term solution to the problem of the Kosovar refugees in Montenegro will be some time in the making. In the interim, it is imperative that they should be provided with living conditions which correspond to acceptable levels of security and sanitation. Urgent measures to be taken are as follows:

1. Take measures ensuring usual security conditions in refugee situation
• Register each family and provide them with an individual registration document.
• Inform the international community of any exactions perpetrated on refugees.
• Relocate refugees to sites which are at a sufficient distance from the border (the usual recommended distance = at least 50km from the border).
• Settle a security perimeter around the sites.
• Maintain security during transport of refugees from one site to another.
• Monitor and defend cases of murdered, missing, imprisoned and wounded refugees.

2. Ensure a minimum scale of decent living conditions for refugees in exile in Montenegro:

• Install refugees in accommodation providing a minimum of 3.5 square metres per person (at the moment, this figure is usually < 1 square metre per person).
• Set up a water supply system. It is recommended in refugee situations to provide a minimum of twenty litres per person per day, the usual recommended level, and at least one tap for every 250 people. (At the moment the refugees in Montenegro have less than 10 litres / person / day ; and a tap of water for several hundred refugees).
• Ensure a minimal individual ration of 2300 Kcal / person / day "during cold weather". (At the moment there is no reliable data on the refugees' diet).
• Provide a sufficient number of WCs and latrines ; the norm is 1 WC / 20 people (the current estimate = 1 WC / 200 - 300 people).
• Ensure a minimal provision for protection from the cold (mattresses, blankets and clothing).
• Ensure minimal conditions for personal hygiene and group hygiene are maintained (soap, hot water, privacy/showers, diapers, sanitary towels, flea treatment...).

3. Medical services: as access to medical services is complicated by security issues, overworked staff and lack of means, the following must be monitored closely:

• Ensure basic treatments are available (necessary means should be given to Kosovar doctors working on the refugee sites, and support of the Montenegrin health service should be encouraged).
• Ensure the management of medical and surgical cases (heart problems/HTA, endocrinous problems/diabetes, war wounds..).
• Vaccinate children under five with the five antigens (children under five are known to have low vaccine coverage in Kosovo).
• Evaluate the extent of psychiatric problems so that the management of particular cases can be envisioned.
• Set up the surveillance of common diseases, and also monitor "deaths" and "wounded" (c.f. appendix), alert in case of any outbreak.

CONCLUSION

The survey has allowed to describe the drama suffered by Kosovar refugees since 24 March. It also sheds light on the particular difficulties the refugees face in Montenegro, particularly in the Rosaye municipal area.

When the refugees are asked about their immediate plans (see Survey), only a small percentage of families envision to leave Rosaye for another Montenegrin town (e.g. Ulcinj) or to move on to another country (Albania).