

KOSOVO ROMA REFUGEE FOUNDATION



REPORT 2 FROM ROMA MAHALA AND TOXIC CAMPS IN MITROVICA, KOSOVO

DATE: 22 October 2010

On October 22, our monitoring team (Miradija Jovanovic--her married name--and Paul Polansky) carried out the second visit to Mitrovica to ascertain the situation regarding the medical treatment of the camp Roma who have been relocated/resettled in the Roma Mahala of south Mitrovica.

This is their report.

Before making a second visit, we emailed Dr. Dorit Nitzan the head of the World Health Organisation in Belgrade and asked if she wanted to join us since she had expressed an interest to accompany us on a visit. However, she called saying she needed a month's notice before making any travel arrangements.

Before going to the Roma Mahala in south Mitrovica, we first visited the demolished camp site of Cesmin Lug to see if anything had been done to clean up the highly dangerous "glass wool" insulation we found children playing with on our first visit. It was a cold wet day after a night of rain. We arrived at 9:30 am and found no one on site. But the yellow "glass wool" was still there in abundance. We took several photos and again collected samples in a plastic bag. Since our first monitoring report has reached most decision makers and stakeholders involved in the nearby Camp Osterode, I am at a loss as to why nothing has not been done in the past two weeks to prevent children coming into contact with this highly dangerous material. UNHCR and the EU both took credit in a recent BIRN article (which can be seen Online) for closing and demolishing Cesmin Lug. Yet neither seem to care about the disaster they left behind, once again poisoning young children.

After our visit to Cesmin Lug, we walked over to Camp Osterode, fifty meters away. In our last report we mentioned that there was no longer any security at the camp gate. Today we found a middle-aged woman in the command hut who told us there is always security at the gate but last week they must have been in the camp yard when we visited. She then informed us that the camp leaders and some Romani workers paid by Kosova Agency for Advocacy and Development (KAAD) had today refused to allow KAAD staff to enter their offices in Camp Osterode because the workers had not been paid for several months.¹

¹ Later we learned that KAAD had not been paid by the Kosovo government for two months.

Since it was now impossible to interview KAAD staff, we walked up the road to the UNMIK headquarters to see if we could find Ilija Elezovic who has been informing us over the years about the situation of the Roma in Mitrovica. He has worked closely with Roma for years (even before the 1998-99 war) and was also on the UN/WHO team that took soil samples in and around the camps back in 2006.

We found Ilija at his desk. He was very happy to see us. However, he did have sad news for us. He told us that Miljana Stojanovic had died in June. She was the doctor who took the blood tests of all the camp children from 2004 to 2006 before being forced out by the Institute of Public Health (north Mitrovica) for revealing to us and the media the high lead levels in the camp children's blood. According to Ilija she had succumbed to heavy metal poisoning because in collecting soil samples she never wore protective clothing and dug out the samples with her bare hands. She was about 45 years old and left behind a 15 year old daughter. Miljana featured in our 2005 film *Gypsy Blood*.

During our meeting, we told Ilija about the "glass wool" insulation covering the demolished Cesmin Lug camp site and asked who was responsible for removing it. He said UNMIK. The UN administrators for north Mitrovica were one floor up in the same building. They are Vladimir Ahokhin, a Russian, and Kerim Daidj-Bardad, an Algerian. We went to find them.

The security guard took us to a meeting in which Vladimir was participating. When Vladimir heard who we were, he excused himself from the meeting and listened to our complaint in the hallway. He then told us that UNMIK had already gone out to tender to remove the rubbish from the Cesmin Lug site and it should be cleared by the end of the year. Their plan is to gravel over the site and make it a parking lot. We left a bit confused as to why anyone would want to put a parking lot on a toxic site and why no one wants to remove the "glass wool" immediately to prevent the Camp Osterode children from playing with it.

Our next visit was to RADC (Roma/Ashkali Documentation Center). When Mercy Corps applied for the USAID project to resettle the camp Roma they used RADC as their implementing partner. At the time we presumed it was a necessity to have a Romani partner for a Romani project but not long afterwards MC dumped RADC as their implementing partner and took on KAAD, the Albanian NGO, run by Albertina Binaku. RADC still has the best connections and cooperation with the camp Roma so we wanted to discuss with them the progress or lack of it in moving the camp Roma from Osterode. Unfortunately, we found the RADC office locked and no one in sight.

We then took a taxi to the Medical Clinic in the Roma Mahala in south Mitrovica.

We had been told that the Institute of Public Health of south Mitrovica had sent one doctor and four nurses to the United States for training to medically treat lead poisoning. We now hoped to find them in this clinic and discuss with them when they were going to start the medical treatment of the returnees from Osterode and Cesmin Lug.

The first staff member to receive us couldn't understand Serbian or English. After more staff appeared, we persisted and finally they produced a doctor who was willing to speak to us in Serbian. His name was Dr. Sylja Hajchni, an internist. He did not know about medically treating the Romani children for lead poisoning. He said if we wanted information we should contact Dr. Fevzi Sylejmani who was in charge of the program to medically treat all people suffering from lead poisoning. Dr. Fevzi had been in the States for training. One of the nurses standing there said in English she too had been trained in the States, in NY. We then asked her if any of the Romani children returned from Cesmin Lug and Osterode were being tested for lead poisoning. She said no. Both she and Dr. Sylja referred us to Dr. Fevzi at the Main Family Medical Center for any questions we had concerning testing and medical treatment for lead poisoning.

Before going to find Dr. Fevzi, we went to check on Ergin and his family. We found nine-year-old Ergin at home. He had not gone to school today. His face was more swollen than on our last visit. We asked if he felt all right. He said yes, but it was obvious he was not as bright as on our last visit. His mother was not there to ask her about him. She was at the doctor's having a regular check up for her pregnancy. Six of her eight children were at home so I got them in a group and took their photo. Then Ergin's father arrived. We spoke to him for a few minutes. He was waiting for Mercy Corps to bring firewood. It was now being delivered to all the families resettled by Mercy Corps; 3m3, which we hope will be enough to give them heating for the winter.

Since every Romani family knew Dija, it took us a long time to leave the mahala since everyone who saw Dija had to talk with her and congratulate her on her marriage. Most asked why she was no longer working for MC, their only contact with a Romani woman at MC.

Before leaving the mahala we ran into a MC team assessing the situation. We congratulated them on bringing firewood to all the homes and asked what was going to happen when the Roma had to pay for their electricity, since they had no jobs, no income. One of the team told us that MC was working on it.

We then spoke to several Romani women who said that they were very satisfied to have a proper kitchen and proper bathroom in their new homes.

When we finally departed from the Roma Mahala, we couldn't find a taxi so we walked back into town. There we got a taxi but instead of taking us to the Main Family Medical Center the driver took us to the main hospital a few kilometers out of town. But there they redirected us/him back to the Medical Center in the middle of town.

When we got in the Medical Center we stopped the first person wearing a white coat and asked to speak to Dr. Fevzi. Within a few minutes Dr. Fevzi appeared.

He took us upstairs to his private office which he had to unlock before inviting us in. Paul had met him once before as part of the WHO team.

Dr. Fevzi was completely frank about the situation of screening/testing the Romani children for lead poisoning. These are the points he made:

1. No one would be medically treated until Osterode was closed. He had been told by Mercy Corps that Cesmin Lug and Osterode would be closed by the end of 2010, but obviously this wasn't going to happen until sometime in 2011.
2. He would not medically treat anyone until he had their blood results and medical records from the north. WHO had promised to produce them but up until now he had nothing.
3. He could not begin screening (taking blood tests) because MC had not provided him with all the equipment he needed. He was especially missing capillary tubes. He had been promised everything he needed by mid-October but they had still not arrived. He said he would begin testing today if he had the capillary tubes.
4. He has a list of Romani kids (about 100) from the age of 0 to 6 years that he will test first when the equipment arrives.
5. After that he will test the rest of the children and adults.
6. But once again he stipulated that he would not medically treat any child, any Roma, until Camp Osterode was closed. He said with the camp still open the Roma often went back to visit relatives and if he was medically treating them then they would get re-infected by going back to the north.
7. WHO had recommended in a September meeting with him not to treat any Roma for three months after they had been screened. (This is not what WHO has in their Protocol² for lead treatment, which

² [DMSA WHO Treatment Protocol 26 07 2009.doc](#)

states that children with high lead levels should be hospitalized "immediately.")

8. WHO insisted that he follow their Protocol on medical treatment for lead although there was also the CDC Protocol (produced by the US "Centres for Disease Control")
9. MC had procured a Care Analyzer 1 for screening but since his training in NY he now preferred Care Analyzer 2 and wouldn't start screening until he had that machine.
10. He was reluctant to medically treat Roma until the "political problem" of treating all citizens was solved. He was under a lot of pressure to treat local Albanians also so he couldn't put Roma first (despite some camp Roma having the highest lead levels in medical literature). He said he was facing a real legal problem and he could not break the law.
11. He said the Kosovo Ministry of Health had still not approved the WHO Protocol for lead treatment so until they did no treatment could be carried out.
12. He was in New York for ten days of training with four nurses. But lead treatment was a sensitive issue. There could be serious side effects. Who would protect him and his staff if there were complications? This was a big political and legal issue for him and his staff.
13. He kept repeating that the Ministry of Health had to approve the WHO and CDC Protocols before he could do anything.
14. He kept repeating that he had been promised the results of testing in the north but he still didn't have them. He could not start treatment without these results.
15. He said treatment of the Romani children would take three to five years. But Albanians had to be treated also. Children with lead poisoning also needed proper food, calcium, and good hygiene. The camp Roma had poor hygiene. Who was going to educate them? This was really necessary if medical treatment was going to work. Someone had to change their poor hygiene habits.
16. He said a meeting between the Institutes for Public Health (north and south) was necessary. They hoped to meet in another country; in either Macedonia or Montenegro since the political tensions were still too high to get together in Kosovo. Until they had this meeting abroad and exchanged info, all treatment had to wait.

17. The decision makers and stakeholders (such as USAID, EU, MC, WHO, CDC) had to sort out these problems. He couldn't.
18. He spoke about Ergin's case. He had all Ergin's hospital reports and had asked MC to buy the expensive medicine needed to treat Ergin's kidney disease. He was sending a nurse to Ergin's home every other day to make sure he took his medicine. He presumed that MC would pay in the future also for Ergin's special diet. He said that he also sent a paediatrician to check on Ergin every Monday.
19. As a penultimate statement Dr. Favzi said that he did not have time to go to the clinic in the Roma mahala to treat kids when the lead poisoning treatment would started. He wanted them to come to his Medical Center so he could spend time with them and discuss their symptoms and progress with their families, while at the same time treating the local Albs also for lead poisoning. However, the Roma families refused to come to the center of town (they are afraid) so he didn't know how he was going to treat them in the future. He said sooner or later the Roma had to integrate into Albanian society if they wanted to be treated.
20. As a final statement he said that MC was very supportive and very cooperative. Kosovo was a very poor country without much medical equipment. MC had funds which he didn't have. It was easier to achieve objectives when you had funds.

At 3 pm Paul had a meeting with Iveta Ouvry, the head of mission for Mercy Corps. This is his report:

Iveta received me in her office on the 4th floor. I related to her my meeting with Dr. Fevzi. She then elaborated on his comments. She said:

1. MC only found out a few weeks ago that the capillary tubes needed for screening had expired. MC had now ordered new ones. She thought they would arrive next week.
2. After his training in NY, Dr. Fevzi had preferred the Lead Care Analyzer 2 to model 1 so that was now being ordered. Since the EU was funding the purchase of this machine it had to come through EU channels which took longer. MC had ordered three machines.
3. MC hoped that Dr. Fevzi could begin screening (taking blood tests) by mid-November.
4. The WHO Protocol for treatment of lead poisoning has yet to be approved by the Kosovo Ministry of Health but Dr. Luzim Celaj an advisor to the Health Ministry will now endorse the WHO Protocol next week for the treatment of the Romani children.

5. MC has targeted 78 Romani children from ages 0 to 6 years for testing.
6. This testing will take nine working days. All testing should be done by the end of November.
7. Iveta said medical treatment would begin as soon as the testing is finished. However, Dr. Fevzi said he would not treat any Roma until Osterode is closed which will not be until summer 2011 at the earliest; and maybe not even until 2012. WHO in their Protocol also stated that treatment should be immediately for some cases but now had agreed with Dr. Fevzi to wait three months after testing, thus going against their own Protocol.
8. So far 50 families have been returned to the Roma mahala. MC hopes to return another 38 families by the end of Nov. That still leaves 40 families to be resettled. Iveta thought it was still possible to resettle all but 18 families by the end of Dec. At the moment there are still 83 Romani families comprising 354 individuals living in Camp Osterode (which recent tests showed is 10x times more toxic than for former camp of Cesmin Lug).
9. Iveta felt that Osterode could be closed by the summer of 2011.
10. MC will only be treating children up to the age of six years. MC does not have funds to treat children up to the age of ten years but they are looking for funds.
11. There are no plans to treat adults who have lead poisoning (which means that all babies conceived would be born with lead poisoning, received from their mother's womb).
12. Those children and families who moved from the camps to the Roma Mahala from 2006 to 2009 will not be treated but MC is looking into it.
13. Since Monday, MC has been delivering 3 cubic meters of firewood to each family resettled under the MC program (in our first report we criticized MC for not providing firewood for the winter thus forcing the families to return to Osterode during the day to keep warm).
14. Iveta said that under Kosovo law vulnerable families such as those in Roma mahala would not have to pay electricity bills or would have a special rate. She did not think those families would have problems paying for the electricity they used.

15. MC has no plans to pay for Ergin's special diet because it is not included in his medical reports from the Belgrade doctor. The doctor who has treated Ergin in Belgrade visited MC in Pristina and never mentioned a special diet. I said I would produce the medical request for him and his siblings needing a special diet, which was given to KAAD last year by the doctor in north Mitrovica.
16. Iveta was highly critical of Ergin's mother claiming Safeta did not take care of her children. According to Iveta when the local doctor wanted to send Ergin to hospital and he didn't want to go, his mother never forced him to go, only his father. I agreed that hygiene among some families such as Ergin's was low but for 11 years I have known this family and felt that Ergin's mother like all Romani mothers took good care of her children considering the circumstances. Iveta then questioned if Ergin was even getting his special diet, although we personally pay for it and the family (Ergin's mother) picks it up daily from the grocer.
17. Iveta said that WHO had promised to get all medical records from the north for the doctors in the south for the camp Roma.

Iveta then said she had some corrections to make to our first report. These were her corrections:

1. We said that MC never visited Ergin's family (quoting his parents); Iveta said her Health Team had visited Ergin's family 6 to 8 times.
2. WHO was working closely with MC and was a member of a local steering committee. We had quoted KAAD as saying WHO was not involved, only as a consultant.

Iveta said that Center for Disease Control (CDC) from Atlanta, Georgia, will be visiting Kosovo from Dec 2 to Dec 11 and suggested that I speak to them if I wanted clarification about the screening and medical treatment of the Roma children.

Our meeting lasted more than an hour. We agreed to keep in touch and work together.

SUMMARY

It appears that the stakeholders and decision makers involved in trying to treat these Roma for lead poisoning are not on the same page. The principle partners are: Mercy Corps (Iveta), Institute of Public Health south Mitrovica (Dr. Fevzi), WHO (Dr. Dorit Nitzan), and CDC (NY/Atlanta). All have their own opinion about when the Roma should be or will be medically treated.

To date no one from the former Roma camps is being tested or medically treated for lead poisoning. Although everyone likes to quote or make reference to the WHO Protocol for treating lead poisoning, that Protocol calls for immediate hospitalization for those with the highest lead levels. In eleven years of lead poisoning not one Rom has been hospitalized (even those with the highest lead levels in medical literature), although more than 90 have died in the camps without anyone keeping a list of their names except their own families and KRRF.

Paul Polansky
Representing KRRF

Miradija Jovanovic
reporting for JDC



Trench dug by children to extract electrical cable from toxic ground in Cesmin Lug camps



Ergin (left) with siblings



A returned family to the Roma Mahala from Osterode.



Firewood arriving at Roma mahala