TRAPPED BETWEEN BORDERS:

THE LIFE-THREATENING
CONSEQUENCES OF INCREASED
MILITARIZATION AND VIOLENCE
AT THE POLAND-BELARUS BORDER





MSF BRIEFING NOTE

JANUARY 2025

TRAPPED BETWEEN BORDERS:

THE LIFE-THREATENING CONSEQUENCES
OF INCREASED MILITARIZATION AND VIOLENCE
AT THE POLAND-BELARUS BORDER



The Cycle of Violence Between Borders

This image is a simplified depiction of the Poland-Belarus border dynamics.

Stranded in the Forbidden Zone

People seeking protection in Europe spend, on average, 3 weeks stranded in the forest, facing injuries from violence and medical conditions related to the environment.

Crossing the Border Fence

One-third of MSF patients reported injuries and fractures from climbing or falling from the fence. Vulnerable individuals (e.g. pregnant women, children, people with chronic diseases or disabilities) face additional barriers to crossing.

Movement in the Buffer Zone

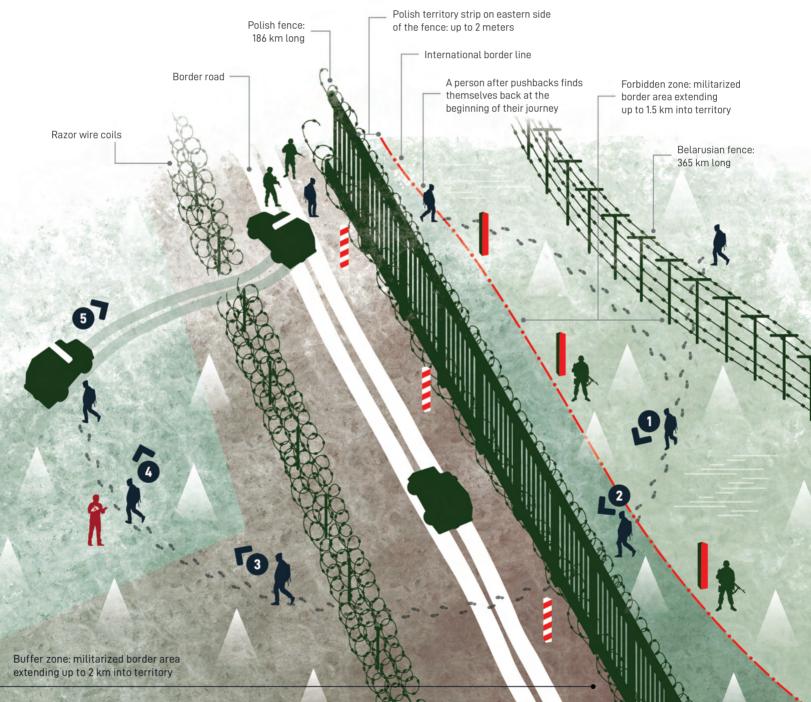
Exposure to violence increases due to limited civil society monitoring and humanitarian access, with reports of humiliating treatment, tear gassing, beatings, rubber bullets, and the destruction of personal belongings.

Exposure to Pushbacks

People who manage to cross the border often are forced to hide from authorities, fearing forced return to the eastern side of the fence.

Suffering Pushbacks

In 2024, pushback reports among MSF patients significantly increased, with nearly half of all patients reporting being pushed back, 72% of them at least twice.



Background

Since 2021, individuals seeking sanctuary in the European Union (EU) have attempted to cross the border from Belarus only to face severe violence in the remote and densely forested border area. While the Belarusian government is alleged to have orchestrated the increase in people attempting the crossing since 2021, the absence of safe pathways to the EU has left people needing refuge with no other option than to take perilous journeys, including across the Belarusian-EU green border. People crossing this border have, as a result, been depicted as threats and weapons in a supposed "hybrid war" directed by Belarus and Russia. This rhetoric has justified increasingly repressive, violent and militarised means against people seeking protection in the EU.

In Poland, the erection of border barriers, domestic "legalisation" of pushbacks, large-scale deployment of military troops, and the systematic denial of access to territory and assistance for those seeking sanctuary in the EU since 2021 have left people stranded in wild forests. exposed to violence and indefinitely rebuffed across the border between Belarus and Poland. These policies have led to a continuous cycle of violence, trapping individuals seeking protection in the EU between fences while they struggle to survive amidst physical assaults ce the spring of 2024, a perception of increasingly organised crossings from Belarus and the fatal stabbing of a Polish soldier at the border have triggered a further escalation of violence. A Buffer Zone imposed to prevent civil society and humanitarian access to the border area, legal amendments regarding the use of firearms by Polish state authorities, the introduction of smoothbore weapons with rubber ammunition all put people at increased risk of violence and poor health. Alarmingly, the EU Commission has endorsed Poland's war-like response to people seeking protection, including backing Poland's announced plans to formally temporarily suspend asylum. Since 2021, independent human rights organisations recorded 89 deaths among the people who tried to cross the border: 47 of them on the Belarus side and 42 on the Polish side.2

This briefing note draws from two years of MSF interventions and data at the Polish-Belarusian border between November 2022 and November 2024. It highlights key medical-humanitarian consequences of Poland's EU-backed militarised responses to people seeking protection. It calls upon Poland and the EU to end the use of violence and brutal pushbacks at the border, grant people access to asylum procedures and assistance, and safeguard independent and unhindered humanitarian and civil society access to the border area.

¹ European Commission, *Commission proposes measures to strengthen border security and counter hybrid threats*, December 11, 2024, https://commission.europa.eu/news/commission-proposes-measures-strengthen-border-security-and-counter-hybrid-threats-2024-12-11_en (access: 26/01/2025).

² We Are Monitoring, Lista Zmarłych, https://wearemonitoring.org.pl/lista-zmarlych/ (access: 28/01/2025).

MSF medical-humanitarian response

MSF initially launched responses in Latvia, Lithuania, Poland and Belarus in 2021 as reports of refugees and migrants stranded at the border first emerged. In Poland, the 2021 application of emergency measures restricted independent humanitarian assistance and limited MSF's ability to provide needed medical assistance at the militarised border area, which led the organisation to leave the country at the end of 2021.³ A year after, in November 2022, MSF returned to the Polish border area and launched medical activities.

Since then, MSF teams, in line with the he-

althcare provision framework of Poland, have offered emergency medical assistance to people stranded in remote forest areas of the Polish border region. Over the past two years, between November 2022 and November 2024, MSF teams received 410 requests for intervention and provided care to 442 migrants, with women and children comprising nearly one third of patients with the youngest being three years old. Equipped with medical backpacks, our teams respond to individuals in distress and address their medical needs through medical assistance response and referrals to state hospitals.

<u>Timeline of events (2021 - 2024)</u>

OCTOBER 2021	SEPTEMBER 2021	AUGUST 2021
Pushbacks "legalised". MSF starts operations	State of emergency introduced	sharp increase in arrivals start the narrative of "hybrid war"
DECEMBER 2021	JUNE 2022	DECEMBER 2023
Access restricted to crucial areas. MSF suspends operations	Completion of the construction of the border fence in Poland	New political leadership
JUNE 2024	MAY 2024	MAY 2024
Increased militarisation and introduction of buffer zone	Fatal stabbing of Polish soldier	Eastern Shield - a national defense initiative - announced
JULY 2024	OCTOBER 2024	
Legal changes legitimising use of firearms and increased pushbacks	New Migration Strategy with suspension of asylum rights	

³ Lekarze bez Granic, Kryzys na granicy, 2021, https://lekarze-bez-granic.pl/kryzys-na-granicy/ (access: 26/01/2025).

Key medical-humanitarian concerns

- 1. People stranded in the forest at risk Most patients seen by MSF have been repeatedly rebuffed back and forth across the border and spend weeks stranded in the border area. The consequences are dire: over half of MSF patients suffered conditions such as frostbite, trench foot, hypothermia, and extreme exhaustion, while 24 per cent suffered from gastrointestinal infections and dehydration related to limited access to water and food from being stranded in harsh conditions between Poland and Belarus.
- 2. Sharp escalation of violence and brutal pushbacks at the border The increasing militarisation of the border has led to a sharp rise in violence and brutal pushbacks, with nearly half of MSF patients suffering from physical trauma. As security measures are intensified, the level of violence against people seeking refuge both in Poland and Belarus has also escalated, worsening their physical and mental health. The numbers of reported incidents related to intentional violence doubled in 2024 compared to 2023. The majority of

- patients showed the signs of psychological distress with 22 of them in a state of severe mental health trauma.
- 3. The border fence prevents the most vulnerable from accessing protection and assistance One third of patients sustained injuries from climbing or falling from the border fence, in 2024 mainly from razor wire deep cuts. The border fence is preventing vulnerable individuals, particularly women and minors (60 per cent of those requesting assistance), from accessing needed protection and medical care. They remain stranded on the eastern side of the fence at risk of violence and declining health.
- 4. Lack of humanitarian access exacerbates needs and risks to people's health Humanitarian and civil society organisations face significant obstacles in accessing the border zone due to disproportionate restrictions. Without full access to this area, the suffering of individuals caught in these zones continues to worsen.

1 Stranded in the Forbidden Zone

Almost immediately, when we reached the forest close to the border with Poland, we were stopped by Belarusian police, beaten up and taken to the forest prison. The prison was underground, there was wood storage inside, and they took from us all our personal belongings, including food and water. They forced us to work there, digging holes in the ground. There were multiple people inside, including young women. We were all beaten up, including women. They complained to me a lot about pain. When I tried to stop them from beating women, they started to beat me even more. It is a very painful memory for me. After several hours, they told us to leave.

WITNESS OF MSF PATIENT

The first challenge experienced by people seeking protection in the European Union and crossing its border in Poland is crossing and surviving the *Forbidden Zone* (as referred to by people seeking protection) a strip of land situated between the Polish border fence and the Belarusian barrier (Sistiema).⁴

This area is a hyper-militarised space that is entirely inaccessible to civil society and humanitarian organisations from both sides. In this zone, individuals attempting to seek refuge in the EU find themselves trapped for prolonged periods. While most of this area belongs to Belarus, the section of land adjacent to the Polish fence, extending up to two meters to the east of the Polish barrier, has been recognized as Polish territory.⁵

Individuals stuck in the Forbidden Zone suffer from medical conditions resulting from protracted exposure to hostile conditions and complete lack of medical assistance. Most patients seen by MSF following their crossing into Poland report having been trapped in this wild area for an average of three weeks, with limited access to water, food and shelter.

Prolonged exposure to cold and wet conditions, coupled with stress and being on the constant move, leads to complications such as infections, long-term pain or even disability. Since November 2022, half of MSF patients suffered cold-related injuries such as hypothermia, frostbite and trench foot, primarily due to the low temperatures and high humidity levels in the marshlands and forests of the border area.

Meanwhile, a quarter of patients suffered from gastrointestinal infections caused by drinking contaminated water from swamps and rivers and the lack of access to adequate nutrition.

While violence is often encountered on both sides of the border, a vast majority of people treated by MSF reported having experienced abuses in Belarus, highlighting the direct risk of further exposure to cruelty linked to Poland's systematic pushback practices. According to multiple accounts of MSF patients, people experienced having been assaulted and confined in detention facilities by the Belarusian state authorities. In some occurrences, patients also reported that they have been violently forced to undertake crossing attempts into the EU. Among the forms of violence perpetrated by Belarusian officers, individuals treated by MSF describe beating with hands or metal sticks, kicks, use of pepper spray, threats with guns and dogs, humiliating treatments, denial of food and water, confiscation and destruction of personal belongings. Other persons were threatened with either imprisonment or forced conscription. For this reason, when people finally reach Poland, they often express a strong fear of being pushed back to Belarus, due to the risk of facing further violence and abuse.

Not everyone is able to escape the *Forbidden Zone*. Reports indicate that at least 47 individuals have been confirmed dead in Belarus.⁶ However, this number remains most likely an underestimation.

 $^{^4}$ System of border fortifications build in the years 1980s and spanning 365 km in Belarus.

⁵ Helsińska Fundacja Praw Człowieka, *Za murem na granicy. Jest pas polskiego terytorium*, https://hfhr.pl/aktualnosci/za-murem-na-granicy-jest-pas-polskiego-terytorium (access: 26/01/2025).

⁶ We Are Monitoring, Lista Zmarłych, 28 January 2025, https://wearemonitoring.org.pl/lista-zmarlych/ (access: 28/01/2025).

2 Crossing the Border Fence

In the absence of safe and effective protection pathways to seek asylum in Poland, people seeking protection are left with no other option than attempting to cross the massive fence built by Poland in 2022. Since its construction, the 5m-high, 186 km-long razor-wired and electronically surveyed fence along the Belarusian border had critical consequences on the health of migrants. Over the past two years, one-third of the patients treated by MSF sustained injuries from climbing or falling off the border fence, including cases of fractures or deep cuts. In total, nearly half of the hospital referrals were for wounds and orthopaedic injuries incurred because of the fence, which required inpatient care or surgery.

While the fence represents a direct risk to those attempting to cross, many individuals remain stranded directly at its eastern side, unable to cross due to the border infrastructure, surveillance technology and Polish forced pushbacks. In the past two years, MSF received 64 medical alerts concerning people stranded directly at the eastern side of the fence (reportedly on Polish territory), representing at least 123 people. Sixty per cent of

the people blocked by the fence and requesting assistance were women and children. The request for help included individuals reporting complications related to pregnancy, asthma, diabetes, and trauma cases such as suspected fractures and head injuries. Despite the potential gravity of people's condition, MSF has almost systematically been blocked from delivering assistance to people in need stranded on the east side of the Polish fence. Unable to directly access people, MSF has instead advocated to border authorities for them to assist and ensure that individuals reach safety, as per their mandate. Yet only a quarter of requests to state authorities led to hospital transfers (in total 31 people). In comparison, the rest—over 90 people—remained trapped, often in potentially critical condition, on the east side of the fence, unable to receive urgent care.

We are concerned that despite the strip of land adjacent to the east side of the fence constituting Polish territory and, therefore, the migrants' physical presence on EU territory, people stranded directly at the fence are systematically denied access to asylum procedures and humanitarian assistance.

POLISH BORDER INFRASTRUCTURE TRAPPING THE MOST VULNERABLE IN THE *FORBIDDEN ZONE*: CASE EXAMPLES

In one instance, MSF was alerted of the presence of a group of people trapped directly at the Polish fence, on its east side. From the west (Polish) side of the fence, MSF team assessed that approximately half of them were minors. The group was reportedly in distress, hungry and dehydrated. While some were identified as being in a severe condition and requiring appropriate medical care, others showed infected wounds and bruises and expressed diverse medical complaints. Calls to the Border Guards for the medical evacuation of those in the most critical condition went unanswered. MSF personnel were forced to leave the border zone without delivering the necessary care.

Being myself a parent, it was incredibly difficult for me to witness children on the eastern side of the fence, asking for help. I was not allowed to provide them with any assistance, and they were not permitted to cross to the other side of the fence.

MSF MEDIC

3 Movement in the Buffer Zone

In June 2024, the Polish Ministry of Interior introduced a *Buffer Zone*, effectively banning access to a critical part of the Polish-Belarusian border. The *Buffer Zone*, spanning up to two kilometres into Polish territory along 60 km of the border, echoes the measures imposed in December 2021.7 As a result, a large portion of the area remains off-limits to humanitarian and medical assistance, potentially resulting in an unchecked violence by Polish state authorities.

Since the introduction of the *Buffer Zone*, MSF identified for the first time injuries related to rubber bullets, a condition not seen previously among the patients.

As of January 2025, MSF has secured access to three border post areas but continues to face administrative inconsistencies and barriers in obtaining authorisations and access to the full area remains restricted. Meanwhile, grassroots humanitarian workers and volunteers, who play a crucial role in the humanitarian response, are barred from accessing the buffer zone and face increasing risks of criminalisation, despite a recent administrative court decision recognising that restrictions limited fundamental constitutional freedoms such as

the freedom to move within the territory of the Republic of Poland.8 On the ground, humanitarian operations are obstructed by time-consuming identity verification processes, with vehicles being repeatedly stopped for checks. These delays hinder MSF's ability to respond quickly, which, given the critical needs in the border areas, puts lives at unnecessary risk.

Despite MSF's limited access to the border area, authorities have repeatedly referred to MSF's presence to justify the continuation of the buffer zone policy that has severely hindered civil society's ability to assist people in need. Indeed, MSF's limited access has been publicly used to imply that humanitarian needs are already being met at the border and to rationalize restricting access to local organisations, despite MSF's consistent calls for unhindered access.9

Further, in March 2024, the Border Guard instituted "Search & Rescue Teams" and have also seized upon their existence to justify restricting access to civil society groups. Nonetheless, the data from MSF shows some concerning issues. For example, more than 75 per cent of critical cases

⁷ Ministry of the Interior and Administration of Poland, *Minister Spraw Wewnętrznych i Administracji podpisał rozporządzenie w sprawie utworzenia tzw. strefy buforowej*, https://www.gov.pl/web/mswia/minister-spraw-wewnetrznych-i-administracji-podpisal-rozporzadzenie-w-sprawie-utworzenia-tzw-strefy-buforowej (access: 26/01/2025).

⁸ Judgment of December 10, 2024 in case number II SA/Bk 648/24 from the complaint against the decisions of August 22, 2024.

⁹ Transcript of Radio Conversation in TOK FM on December 5, 2024: Tomasz Siemoniak to Ostatnie Pokolenie: "You are losing citizens' sympathy," *Poranek - Karolina Lewicka*, TOK FM, https://www.tokfm.pl, (accessed: 26/01/2025).

¹⁰ Straż Graniczna, "Zespoły o charakterze poszukiwawczo-ratowniczym w Straży Granicznej", 2024, https://www.strazgraniczna.pl/pl/aktualnosci/13042,Zespoly-o-charakterze-poszukiwawczo-ratowniczym-w-Strazy-Granicznej.html, (accessed: 26/01/2025).

MSF reported to Border Guards for urgent help were left without timely assistance on the eastern side of the fence. Additionally, the involvement of Border Guards in regular pushback practices raises serious questions about whether the response to people's needs at the border is appropriate and sufficient.

In conclusion, the buffer zone remains profoundly unsafe for individuals seeking protection, with life-threatening consequences for those unable to receive timely assistance. Disturbingly, the ban further enables much of the violence reported by MSF patients to occur out of sight.

4 Exposure to Pushbacks

I tried to cross the fence two times. At first time when we crossed, we were running the fastest we could, but the Polish police caught us anyway. When they stopped us, they beat my friends and used pepper spray in his face. I said, "I want asylum in Poland" but they put all of us into the car, brought to the fence again, opened the gate and pushed us back to Belarus.

WITNESS OF MSF PATIENT

Individuals who manage to escape the Forbidden Zone in Belarus and cross the border are often forced to hide in dense forests due to fears of being violently pushed back by Polish authorities. After enduring weeks on the eastern side of the border cut off from medical assistance, they finally can seek medical humanitarian aid.

To reach the migrants in remote and inaccessible areas, the MSF medical teams frequently trek on foot through dense marshes and rivers, carrying medical backpacks. When the MSF medics finally reach the people with medical needs, they are faced with the physical and mental health consequences of perilous journeys. The medical conditions our teams see are primarily the result of prolonged exposure to harsh environments, dangerous border infrastructure, and violence from state authorities. Specifically:

- Among 442 patients treated by MSF, over 50 per cent suffered from frostbite, trench foot, or hypothermia.
- 24 per cent suffered from gastrointestinal infections and dehydration related to

- limited access to water and food. Almost half of patients suffered from extreme exhaustion due to this long and challenging journey.
- A third of patients were treated for injuries, including deep cuts and fractures related to climbing or falling from the border fence.
- Almost 50 per cent of the patients suffered from different forms of physical trauma related to violence. Most patients showed signs of psychological distress, with 22 of them in severe mental health trauma form.
- MSF referred 39 patients in urgent need of specialized medical care to Polish hospitals.

At this stage of their journey, people seeking protection are not yet safe, as they are still exposed to the very real risk of being intercepted by Polish state authorities and being pushed back into the Forbidden Zone, where they will experience the same circle of violence and suffering from which they had just escaped.

5 Suffering Pushbacks

Multiple of our patients clearly expressed the willingness to apply for asylum in Poland. When I reach them, they are usually very scared, panic-stricken, fearing being pushed back to Belarus. Once taken to the border guards' facility, people undergo different administrative processes, at the end of which they can be pushed back under argument that "they wanted themselves to return to Belarus". I know this was not true. During interventions, many patients beg not to be pushed back, with some saying that otherwise they would be killed in Belarus.

MSF MEDIC

In 2021, Poland amended its domestic legislation, allowing Border Guards to push back to Belarus individuals crossing the border irregularly. Despite legal challenges, including court rulings highlighting national and international law violations, Polish authorities are reported to have carried out 53,670 forced returns at the border between November 2021 and November 2024. Poland's recently announced plan to formally temporarily suspend asylum raises serious concerns as it risks leading to more violent pushbacks and further exposure of people to physical and psychological harm. 12

In practice, pushbacks are processes where individuals are immediately apprehended in the border area and either directly forced through the fence or sometimes transported to Border Guard facilities before being returned to Belarusian territory. According to our patients' accounts and reports collected by human rights organisations, those pushbacks are characterised by high levels of unchecked violence used by Polish state authorities. Verbal and physical aggressions, beatings, reco-

urse to pepper spray, stripping people to their underwear, and destruction of essential survival belongings such as clothes or telephones have been consistently reported by those who managed to cross into Poland a second time.

MSF medical teams sometimes encountered patients in the forest multiple times, following yet another pushback, highlighting the cumulative and unrelenting nature of these practices. Concerningly, compared to 2023, the frequency of pushbacks reported among MSF patients surged significantly in 2024, with nearly half of all patients reporting having been pushed back, 72 per cent of them at least twice.

In some cases, patients have been summarily forced back to Belarus from hospitals in Poland, where they sought needed medical care. In June 2023, one patient previously treated and referred to a public hospital was pushed back to Belarus after receiving medical assistance. When MSF reencountered him in the Polish forest, his condition had worsened significantly,

¹¹ According to information obtained through a freedom of information request, between 1 of August 2021 and 30 of November 2024, the Polish Border Guards recorded approximately 108 148 attempted crossings and 'returned to the border line' 53 670 people.

¹² Polish Government, *Polish Migration Strategy for 2025-2030*, October 2024, https://www.gov.pl/web/mswia/rada-ministrow-przyjela-uchwale-w-sprawie-strategii-migracyjnej-polski-na-lata-2025-2030 (access: 26/01/2025).

¹³ Human Rights Watch, *Poland: Brutal Pushbacks at Belarus Border*, 10 December 2024, https://www.hrw.org/news/2024/12/10/poland-brutal-pushbacks-belarus-border (access: 26/01/2025).

requiring treatment in the intensive care unit. In 2024, civil society organisations documented at least 13 pushbacks from healthcare facilities in the border region. In May 2024, MSF received a request for assistance from the eastern side of the

fence from a female who was pushed back from a hospital after undergoing an age assessment test. Despite MSF's request to assess her needs and provide direct medical assistance, the MSF team was blocked from doing so.

An urgent call for change

The current political climate, marked by the rhetoric of "hybrid warfare" and "instrumentalisation" of migration, continues to dehumanise vulnerable individuals and portray them as existential threats rather than people fleeing conflict, persecution, and violence. The Polish government's militarised approach to people seeking protection, backed by the EU Commission, has resulted in severe harm to vulnerable individuals, including life-threatening pushbacks, deprivation of medical assistance and death.

MSF urges Polish and EU authorities to urgently abandon dehumanising rhetoric and policies that legitimise the use of violence on persons seeking protection into the EU.

MSF calls upon Polish and Belarusian authorities to immediately and permanently end all violent practices and pushbacks at the border area.

Additionally, MSF calls upon Polish authorities to:

- 1. Grant individuals' access to fair asylum procedures and assistance on arrival, in line with EU and international obligations: individuals seeking refuge must be granted access to fair asylum procedures and have access to humanitarian and medical assistance upon arrival, in full compliance with Poland's obligations under EU and international law.
- 2. Safeguard independent and unhindered humanitarian and civil society access to the border area, an imperative to delivering lifesaving assistance to people in need: Safeguard the ability of humanitarian organisations and civil society groups to operate freely in the border areas to provide lifesaving assistance and support to those in need.

¹³ Data sourced from humanitarian case workers actively engaged at the border.

Médecins Sans Frontières (MSF) is an international, independent medical humanitarian organisation that provides medical assistance to people affected by conflict, epidemics, disasters, or exclusion from healthcare in over 75 countries worldwide. MSF has been present in the border region of Poland with Belarus since November 2022 (after first being denied access in 2021), working in close cooperation with other organisations and civil society groups. Our teams respond to the most urgent medical needs of people seeking protection in Poland who find themselves stranded in the densely forested border area. Between November 2022 and November 2024, MSF received 410 requests for urgent medical assistance. Direct medical assistance was provided to 442 people.



