"Public Health aspects of Migration"

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Objectives

- Migration trends and linkages to health
- Challenges for migrants' health and health systems
- Cooperation and partnership



Health system access

- Health systems have to be responsive to their respective populations
- World's population becoming increasingly diverse, health systems need to find ways of responding adequately to this diversity.
- This is particularly relevant with regard to migrants, who comprise in example a growing share of European populations



Health system access

In 2010, nine of 27 EU countries denied free emergency care to undocumented migrants, while in 2004, ten of 25 EU countries provided only emergency care to asylum-seekers



Strategic approach for control of migration

While there has been an increasing harmonization of immigration policies in most of WHO member states, the dominant emphasis has been on restriction, control and expulsion



Migration & Health link

- Migrants connect individual and environmental health factors between communities
- Migrants bring their health profiles, beliefs, prevalences, socio-economic and cultural background
- Migrants acquire the health profiles and behaviours of the host community over time.



Some myths and facts

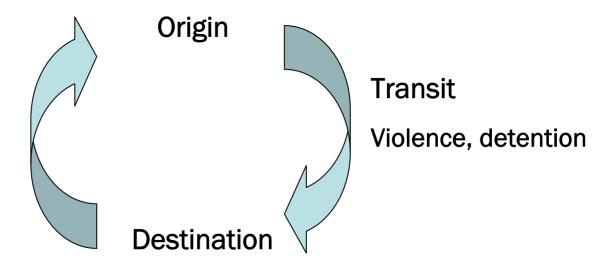
- Migrants are disease carriers
- Most migrants are young and healthy ('healthy migrant effect')
- Migrant are a burden to health systems
- Migrants under utilize health services
- Migrants contribute to economies and development



Challenges for migrants' health

Pre migration experiences, e.g. conflict, disasters, epidemiological profile

Return
Loss of previous ties,
exposure to risk
factors at place of
origin (VFR),
Introduction of
acquired conditions



Linguistic, cultural, legal barriers to access health services, social exclusion, discrimination, isolation, exploitation, dangerous working conditions, no social protection, lack of information on entitlements



Challenges for health systems: paradigm shift

Traditional approach of exclusion:

Security

Disease control, quarantine,

National focus

Multi-dimensional approach of inclusion:

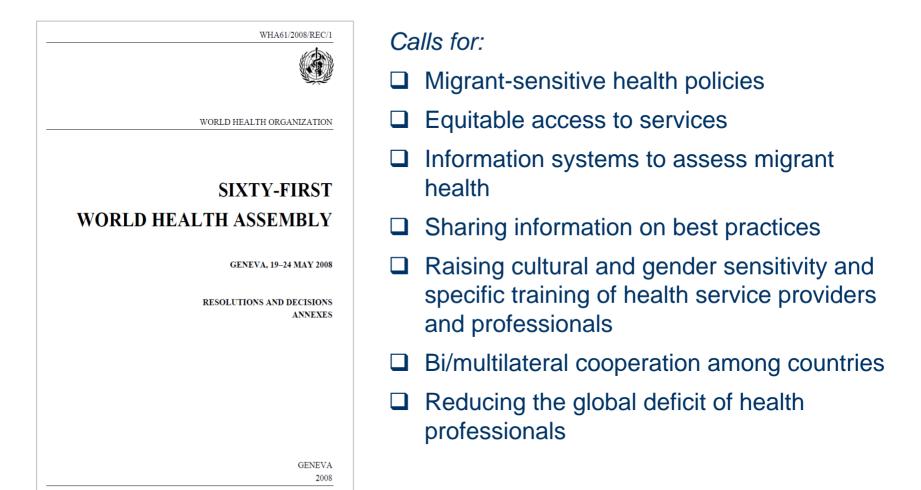
Reduction of inequities

Social protection in health, health determinants, NCDs

Multi country & inter-sectoral, IHR



Resolution WHA 61.17







Operational Framework: Priorities

Monitoring Migrant Health

To identify key indicators useable across countries

To ensure the standardization and comparability of data on migrant health

To support the appropriate aggregation and assembling of migrant health information

To map good practices in monitoring migrant health, policy models, health system models[...]

Policy- legal frameworks

To implement international standards that protect migrants' right to health

To develop and implement policies that promote equal access to health services for all migrants

To promote coherence among policies of different sectors

To extend social protection in health and improve social security for all migrants and family members[...]

Migrant sensitive health systems

To ensure continuity and quality of care in all settings

To enhance the capacity of the health and relevant non-health workforce to address the health issues associated with migration

To ensure health services are culturally, linguistically and epidemiologically appropriate[..]

Partnerships, multi country framework

To establish and support migration/ health dialogues and cooperation across sectors and countries of origin, transit and destination

To address migrant health in global and regional processes (e.g. GMG, GFMD)

To develop an information clearing house of good

Media reports









WHO/Europe, Rome Action Plan (1)

- Support preparedness efforts of local health systems (emergency preparedness plans, contingency plans of health facilities, assessment of health needs of migrants with different diseases patterns than the host population)
- Support coordination of preparedness and health response actions between Ministries and health partners
- Technical support on environmental health aspects (water and sanitation, food safety, waste management)



WHO/Europe, Rome Action Plan (2)

 Expert advise on public health operations – disease surveillance, early warning and response system, chronic disease and psychosocial support.

 Health information, community mobilization, targeting public health messages to migrants



conclusions 1

Most migrants are healthy but conditions surrounding the migration process and the new life in the host community can pose health risks

- Vulnerable to determinants of ill-health
- Inequalities in accessing health services
- Sub-standard quality of care
- Negative impact for migrants and communities



Conclusion 2 Coordinated multi-sector strategy (Ministry of Health, Interior, Labor.....) for effective health system and services provision

- WHA 2008
- Ideally, the needs of migrants should be incorporated in all elements of health systems, including regulation, organization, financing, and planning, ensuring non-discrimination and equal entitlement to health services

Conclusion 3

transfer of know-how and health policies sensitive to migration

However, more needs to be done to evaluate and replicate the effectiveness of "best practices" that are rarely, if ever, subject to rigorous assessment.

Furthermore, good practices "do not fix the system" and for long-term sustainability, structural changes are required that embed good practices in health policy and practice

