



Report on the health of refugees and migrants in the WHO European Region

No PUBLIC HEALTH without REFUGEE and MIGRANT HEALTH

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The WHO Regional Office for Europe is one of six regional offices throughout the world, each with its own programme geared to the particular health problems of the countries it serves.

The WHO European Region embraces nearly 920 million people living in an area stretching from the Arctic Ocean in the north to the Mediterranean Sea in the south and from the Atlantic Ocean in the west to the Pacific Ocean in the east. Approximately 10% of the population is currently estimated to be migrants (3.9% in 1990). The European programme of WHO supports all countries in the Region in developing and sustaining their own health policies, systems and programmes; preventing and overcoming threats to health; preparing for future health challenges; and advocating and implementing public health activities. According to the universal health coverage approach, WHO is fully committed to leave no one behind. Also for this, there is no public health without refugee and migrant health.

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Contents

Foreword	V
A note from the Programme Coordinator	vi
Acknowledgements	vii
Abbreviations	viii
Executive summary	ix
CHAPTER 1 – OVERVIEW OF REFUGEE AND MIGRANT TRENDS AND HEALTH POLICIES IN THE WHO EUROPEAN REGION	1
Introduction	2
Heterogeneity in terminology regarding migrants unlike in the case of refugees	3
Opportunities and challenges from global displacement and migration	4
Measures to support health for all	6
Measures to promote the health of refugees and migrants	7
Strategies for refugee and migrant health in the WHO European Region	9
Public health aspects of refugee and migrant health	10
Conclusions	12
References	13
Annex 1.1. Population and international migrant stock in the 53 Member States of the WHO European Region	19
CHAPTER 2 – EVIDENCE ON THE HEALTH OF REFUGEES AND MIGRANTS IN THE WHO EUROPEAN REGION	21
Introduction	22
Methodology	24
Health profile	24
Communicable diseases	24
Noncommunicable diseases	32
Other diseases	35
Mental health	35
Occupational health	37
Maternal and child health	38
Sexual and reproductive health	
Health care organization and delivery	
Entitlement to services	
Primary care	
Preventive care	
Preparedness and contingency planning	49
Health information systems	51

Gaps in coverage and discrepancies	53
Accessibility of health care services	53
Migration detention	55
Culturally sensitive health systems	55
Conclusions	57
Overall gaps	57
References	58
CHAPTER 3 – TOWARDS A REFUGEE AND MIGRANT-FRIENDLY HEALTH SYSTEM AND UNIVERSA HEALTH CARE IN THE WHO EUROPEAN REGION	
Refugee and migrant health and Health 2020	78
Health aspects of large-scale movements of refugees and migrants to Europe	78
Provision of health care at the arrival phase	79
Longer-term challenges for both refugee and migrant health and the public health system	า80
Stepping up action on refugee and migrant health in the WHO European Region: towards a common strategy and action plan	80
The WHO Regional Office for Europe's Migration and Health programme	82
First survey to assess implementation of the Strategy and Action Plan	83
Strategic areas covered	83
Indicators covered	83
Summary	88
Conclusions	89
References	89
CHAPTER 4 – THE WAY FORWARD: A VISION FOR HEALTH OF REFUGEES AND MIGRANTS IN THE WHO EUROPEAN REGION	91
What we have learned	92
Advancing the implementation of the Strategy and Action Plan	94
Strengthening governance	95
Strengthening evidence, evaluating coverage, assessing needs and effective communic	ation95
Strengthening policy	95
Strengthening grassroot participation and partnership	96
Strengthening health financing and human resources	96
Strengthening national data collection systems	96
Maintaining traction and enhancing political leadership	97
The Migration and Health programme: a collaborative way forward	97
References	98

Foreword



Population movement is one of the defining phenomena of our time. In today's world, marked by economic inequalities, easily transmissible information and ease of travel, more people readily move in search of better living conditions for themselves and their families.

There is a steady increase in the global number of refugees and migrants, including in the WHO European Region. Globally, in 2017, 258 million people (approximately one in every 30) lived outside their country of origin. In the WHO European Region, almost 10% of the population of almost 920 million are international migrants, accounting for 35% of the global international migrant population.

Work is a major reason that people migrate internationally, and migrant workers constitute a large majority of the world's international migrants. Violence, conflicts, natural disasters and human rights abuses also force many to move from their normal place of residence. The Office of the United Nations High Commissioner for Refugees (UNHCR) reports the highest level of human displacement ever, with some 68.5 million people being forced from their homes. The number of refugees is estimated to be more than 25 million.

Obtaining a true picture of the health profile of refugees and migrants and of the health system responses through regional standardized data collection and sharing, open policy dialogue and commitment is paramount in achieving the vision of Health 2020, the Sustainable Development Goals and universal health coverage.

The Report on the Health of Refugees and Migrants in the WHO European Region is the first WHO report of its kind, creating an evidence base with the aim of supporting evidence-informed policy-making to meet

the health needs of refugees and migrants and the health needs of the host populations.

Today, our political and social structures often struggle to rise to the challenge of responding to displacement and migration in a humane and positive way. Yet the relationship between displacement, migration and development, including health, has become more prominent recently in international and regional policy agendas, and it has emerged as a theme of common interest for all Member States.

In 2016, the WHO Regional Committee for Europe adopted the Strategy and Action Plan for Refugee and Migrant Health in the WHO European Region to help to guide progress on the health aspects of population movement. Globally, the WHO Executive Board in 2017 adopted the WHO Framework of Priorities and Guiding Principles to Promote the Health of Refugees and Migrants.

In addition, and with the aim of harmonizing refugee and migrant health policy globally, WHO is now preparing a global action plan on the health of refugees and migrants, in line with the health dimensions of the United Nations Global Compact on Safe, Regular and Orderly Migration and the Global Compact for Refugees, in close collaboration with the International Organization for Migration, UNHCR, other partner international organizations, Member States and other relevant stakeholders, as well as refugees and migrants themselves.

Refugees and migrants enjoy the same human right to health as everyone else. One key priority is enhancing social protection for refugees and migrants, including developing sustainable financial mechanisms, both nationally and internationally, to provide for universal health coverage and social protection. Another key priority is reducing the xenophobia, discrimination and stigma often experienced by refugees and migrants, through actions such as advocacy and evidence-informed communication with both refugee and migrant communities and host populations.

These high principles provide the background to this report, which shows the progress made so far in responding to these health challenges, and what more needs to be done. I am delighted that the WHO European Region has led the way, and I hope that this report will inspire yet more progress in the coming months and years.

Zsuzsanna Jakab WHO Regional Director for Europe

A note from the Programme Coordinator

Displacement and migration has always been a reality for the WHO European Region and the contribution of refugees and migrants, alongside host populations, in developing the societies in which we currently live should not be forgotten. At the same time, the challenges faced by refugees and migrants must also be acknowledged. The lives that are being lost in the Mediterranean Sea and other places in the Region are a painful and constant reminder of the many challenges that refugees and migrants face on a daily basis.

The WHO Regional Office for Europe is very much aware of these challenges and is taking preventive and proactive measures to address the public health aspects of migration. By establishing the first WHO Migration and Health programme, the Regional Office has increased its support for its Member States in developing robust and refugee and migrant-sensitive health systems to make migration a positive experience for all stakeholders involved. New ground has been broken in many ways by the programme to support Member States. Joint assessments with Member States have examined health system capacity to manage influxes of refugees and migrants. Evidence overviews have been produced to inform policy-making, and high level meetings and schools have disseminated knowledge and raised awareness. All these activities have led to the development and adoption of the first ever WHO regional strategy and action plan for refugee and migrant health. This is helping the Region to have a common framework to promote refugee and migrant health using high-qualOne of the main challenges faced by the Migration and Health programme and the Member States in developing a robust refugee and migrant-sensitive health system was the lack of an overview of refugee and migrant health in the Region. The decision to produce this report was one of several measures taken to address this challenge. It is of paramount importance to consolidate and disseminate evidence not only to inform policies but also to counter myths. For example, it is often said that there are "a lot of refugees in the Region". Data presented in the report show that international migrants make up only 10% of the total population residing in the Region and less than 7.4% of these international migrants are refugees. Another so-called fact often stated is that the refugees and migrants bring communicable diseases to the Region. However, this is not always true. For example, evidence presented in the report shows that a significant proportion of the refugees and migrants who are HIV positive acquire infection after they have arrived in the Region, including those who have moved from countries with high HIV endemicity.

The fruitful partnership with the Italian National Institute for Health, Migration and Poverty (INMP) has enabled us to produce the report with the best available data. The data collection process for developing the report was revealing as it showed the extent of data on refugee and migrant health that is available and not available, providing further impetus to progress implementation of the Strategy and Action Plan.

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