Welcome

to the first issue of the Public Health Aspects of Migration in Europe (PHAME) newsletter. As part of the PHAME project, this quarterly newsletter will bring you news, know-how and best practices, and encourage a cross-national political dialogue on migration.

This initiative is a partnership between the WHO Regional Office for Europe (WHO/Europe) and the University of Pécs. The Editorial Board, consisting of 20 leading European experts on health and migration and related subjects will guide the content and development of the newsletter.

Editorial: The WHO Public Health Aspects of Migration in Europe (PHAME) project launches its newsletter

Agis Tsouros, Director of Division of Policy and Governance for Health and Well-being, WHO/Europe,

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István Szilárd, Chief Scientific Adviser, University of Pécs Medical School

The overall health of the population across the WHO European Region has improved during recent years. However, these improvements and the conditions that foster them have not been equally shared within and among the different European countries. Substantial differences persist, and health inequalities and their determinants continue to widen in many parts of the Region.
Migration is a key factor influencing these avoidable and unfair inequalities in Europe. The main contributing causes of migration are natural and man-made disasters, as well as social, economic and political disruptions. An estimated 8% of the total population are migrants, with women accounting for 52% of the overall migrant population. This influx to the WHO European Region represents an increase in population of 5 million since 2005 and accounts for nearly 70% of the population growth between 2005 and 2010.

Migration has also become one of the most frequently discussed and sensitive issues in the daily press. Since 2011, the crises in North Africa are posing significant challenges, not only to the countries of origin but also to those receiving massive influxes of immigrants on a regular basis. This dramatic situation has already caused many tragedies in the Mediterranean countries. In October 2013, over 350 migrants died when a ship sank off Lampedusa. More recently, in March 2014, 15 African migrants drowned trying to cross the Ceuta border. Against the background of this complex scenario, the WHO PHAME project launches its newsletter with the aim of contributing to a productive debate on migration at all levels within and outside government, as well as sharing knowledge and increasing awareness throughout the WHO European Region.

Although the dramatic episodes described above took place in different countries and years, they both form part of the same phenomenon: migration. For this reason, they need to be understood and addressed in a systematic way. Due to the complexity of the topic, the health challenges posed by migration sometimes lie outside the health sector, and are therefore also part of other ministerial remits and responsibilities. In this scenario, an intersectoral approach from both within and outside of government is needed. Migration must be addressed through whole-of-government and whole-of-society approaches, which should guarantee access to adequate capacity and know-how, allow for implementation of cohesive and coordinated policies and programmes, and consequently bring about the required systematic changes.

The WHO PHAME project was created as a response to the growing awareness that the health challenges that migration poses at national, subnational and local levels cannot be solved by traditional approaches in medicine. Despite the fact that universal health is recognized as a fundamental human right, it is often subject to heterogeneous regulations that change throughout Europe and over time, impacting negatively on migrants, who are emerging as one of the most vulnerable groups in society.

By promoting an intersectoral and intergovernmental approach to migration, the PHAME project contributes to the 2 main strategic objectives of the new European health policy framework, Health 2020: (1) the reduction of health inequalities and (2) the improvement of governance for health. In this regard, special priority must be given to creating resilient communities, as migrants constitute one of the most vulnerable groups across the entire WHO European Region.

This priority has been recognized and included not only in Health 2020, but also in (among others) the resolution on the “Health of Migrants” endorsed in the World Health Assembly in 2008 (WHA61.17), and the Global Consultation on Migrant Health held in Madrid in March 2010.
The newsletter

The objective of this newsletter is to further contribute to the sharing of knowledge and best practices among the various stakeholders, thus increasing awareness of migration as one of the most important challenges faced by the WHO European Region today. The newsletter is produced by the WHO European Office for Investment for Health and Development, located in Venice, Italy (forming part of the Division of Policy and Governance of Health and Well-being of the WHO Regional Office for Europe (WHO/Europe)), in collaboration with the University of Pécs in Hungary.

As part of the PHAME project, the newsletter will be published quarterly and will be available on the website (will be archived on the Migration and health site under the WHO/Europe website). This is the first issue of the newsletter, and we would like to emphasize that it is an important initiative for sharing news, know-how and best practices, and engaging in a cross-national political dialogue on migration. A vital feature of this initiative is the project’s partnership with Hungary’s University of Pécs, which is providing key staff to ensure its realization. 20 leading European experts on health and migration and related subjects are now members of the Editorial Board of this electronic periodical. The newsletter will include editorials, news, upcoming events, training possibilities, research calls/grants, reviews of recent scientific publications, a database of relevant scientific literature with search engine functionality, original articles, reports, migration health policy and position papers – even those intending to provoke response, comment or criticism. Sharing the latest know-how (“breaking news”) and disseminating results will also be a distinctive feature of the electronic quarterly newsletter.
Overview: WHO Public Health Aspects of Migration in Europe (PHAME) project

Santino Severoni, Coordinator Public Health and Migration, WHO European Office for Investment for Health and Development, Venice, Italy, Division of Policy and Governance for Health and Well-being, WHO/Europe

The WHO PHAME project is based on a memorandum of understanding between the Italian Ministry of Health and WHO, and aims to strengthen countries’ capacity to manage large influxes of migrants.

The project aims to provide technical assistance to Member States in order to fill potential gaps in health service delivery, including in prevention, diagnostics, monitoring and management of disease, and to provide policy recommendations for enhanced preparedness and response, with special attention to emergency-related influxes of migrants to different European countries.

The first phase of the PHAME project implementation focuses on the Mediterranean countries of the WHO European Region most affected by the large influx of migrants during the northern African crisis, as defined by the Rome Action Plan. The Action Plan is based on the conclusions of an international meeting held in Rome in April 2011 upon the invitation of the Italian Government and pledged by the WHO Regional Director for Europe.

During the second phase, the project focuses on migrant health information management and migrant health capacity building, and will be extended to other countries in the WHO European Region that could be interested in how to manage the health of large influxes of migrants.

The project addresses the call for WHO action present in the 2008 resolution WHA61.17 and the recommendations of the International Organization for Migration (IOM)/WHO Global consultation on Migrant Health held in Madrid in 2010. It has been aligned with the work of the WHO Regional Office for Europe (WHO/Europe)’s Division of Policy and Governance for Health and Well-being as well as that of the WHO European Office for Investment for Health and Development in Venice, and the project is implemented as part of ‘Health 2020’, paying particular attention to reducing health inequalities and ensuring people-centred health systems. Health 2020 is the new European policy framework for health and well-being promoted by WHO/Europe and adopted by its 53 Member States during the WHO Regional Committee in 2012.
Overview: CHANCE – MSc Curriculum in Migrant Health: Addressing New Challenges

István Szilárd, Chief Scientific Adviser and coordinator of the ERASMUS Lifelong Learning Program co-financed CHANCE project, University of Pécs Medical School

The influx of migrants to the European Union (EU) is continuously increasing, creating challenges for all the health, public health, social and economic sectors of Europe. The CHANCE programme aims to address this complex issue from the health angle, focusing on the alarming lack of human resource capacity. In spite of this, at present there is a significant shortage of formal higher education programmes in Europe aiming to provide professionals with the training, knowledge and skills to address this new challenge.

The main objective of the CHANCE programme is in synergy with the WHO Public Health Aspects of Migration in Europe (PHAME) project, aiming to strengthen countries’ capacity to manage large and sudden influxes of migrants. The CHANCE consortium of 6 EU academic institutions is coordinated by the University of Pécs, with co-financing from the EU ERASMUS Lifelong Learning Program in order to address this human resources need.

The curriculum provides motivation and orientation, knowledge and skills to postgraduate students, health, public health and social care professionals. These are all individuals who (aim to): assist, treat, and provide care and referral services to migrating individuals; and/or design, plan and implement health and social care programmes for migrating populations (including addressing their integration needs); and/or participate in health-related research for migrants. The academic content is built around 6 core competencies (C):

- C2: environmental medicine and occupational health (University of Pécs, Hungary)
- C3: economic/health economic impact of migration (University of Pécs, Hungary)
- C4: organization and systems management (University of Krems, Austria)
- C5: clinical and public health assessment (University of Kosice, Slovakia)
- C6: social and behavioral aspects of migration including multicultural, multireligious aspects and their health/mental health impact (University of Greifswald, Germany).

The curriculum will start at the beginning of the next academic year (second half of 2014). The University of Pécs Migrant Health Programs (http://www.mighealth-unipecs.eu/) and the CHANCE (http://www.migranthealthmsc.eu/) websites provide more detailed information about the programme. Interested people can register in order to receive up-to-date information.

The University of Pécs is proud to contribute its experience and scientific capacity to the WHO PHAME project. Its training and research profile is in synergy with the project objectives and this newsletter is an opportunity to assist in strengthening the response capability via advocacy, information sharing and training provision.

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News

5th European Conference on Migrant and Ethnic Minority Health and Healthcare

GRANADA, 10-12 APRIL 2014

Allan Krasnik, President of the Scientific Committee
Maria Luisa Vázquez, Deputy President of the Scientific Committee
Carlos Artundo, President of the Organizing Committee

The health of migrants and ethnic minorities has become a major issue with huge implications for international, national, regional and local policies and practice. Research in this area is therefore clearly receiving more attention at national as well as European levels as a result of the growing recognition of the need for documentation on patterns of disease, causes and effects, as well as potential interventions to take into account the increasing ethnic diversity of European populations. The Section for Migrant and Ethnic Minority Health within the European Public Health Association (EUPHA) has over 600 members and aims to promote the basis for evidence-based policy and practice within this area in different ways – not least by organizing European conferences at which researchers, policy-makers and practitioners meet, present and discuss new research, practical experiences, challenges and solutions.

The Conference paid special attention to the European economic and systemic crisis, which has many serious implications for the health of migrants and ethnic minorities. Across the 3 days, the participants discussed challenges and solutions during 5 plenary sessions with distinguished international key-note speakers and panels, as well as 12 workshops and a series of parallel oral and poster sessions (96 oral presentations and 120 poster presentations) covering a range of subjects related to the theme of the Conference. The main themes included issues relating to health and human rights, health promotion and prevention, access to health care, mental health, reproductive health, occupational health, infectious and chronic diseases and threats to health and well-being, which all have special implications for migrants and ethnic minorities. We have received over 300 abstract and 14 workshop submissions from 29 countries, mainly within Europe, but also including participants from Canada, the United States, Turkey, Qatar and Australia.

An important effort to involve civil society organizations has been made. As a result a number of pre-conference activities took place, particularly addressing civil society’s perspectives on migrants’ and ethnic minorities’ health and health care access in the context of the current systemic crisis; strategies to increase the communication between civil society, the academic context and policy-makers; and reflections on research practices and ethics. Furthermore, a field visit was planned, guided by Doctors of the World and professionals from the Public Healthcare System, to one of the greenhouse areas in Andalusia that is characterized by a high migrant population. An Advisory and Participatory Committee composed of civil society representatives has been constituted in order to enhance civil society participation and exchange between different stakeholders at the Conference.

The number of participants was about 300-400, representing most European countries and European centres in the field of migrant and ethnic minority health, as well as participants from other parts of the world.

Events

Annual Meeting of the European Network on Intercultural Elderly Care (ENIEC)

OSLO, 23-25 APRIL 2014

Kristel Logghe, ENIEC Board member

In April the ENIEC (www.eniec.eu) will hold its 8th Annual Meeting, which is held in a different country and city each year. On this occasion it will take place in Oslo, Norway.

The ENIEC is a non-profit-making association with members across Europe. Around 80-100 members come from Belgium, Estonia, Finland, France, Germany, Iceland, Italy, the Netherlands, Norway, Sweden and Turkey. The members are professionals working towards achieving good health, welfare, care and housing facilities for elderly migrants in Europe, through their positions as care professionals, directors of health care institutes, researchers, policy-makers or consultants.

Members working at the Norwegian Centre for Minority Health Research (NAKMI) play an important role in the organization of this meeting, which has as its main theme “Ageing in an unfamiliar landscape. Dementia and elderly immigrants – equity in health and care services”.


Symposium on “Engaging Multi-stakeholder Communities in Sustainable Migration & TB policies: Review of Evidence & Experience”

at the 45th Union World Conference on Lung Health: Community-driven solutions for the next generation,

BARCELONA, 28 OCTOBER – 1 NOVEMBER 2014

http://barcelona.worldlunghealth.org/
Publications

International Migration, Health and Human Rights

(http://publications.iom.int/bookstore/index.php?main_page=product_info&cPath=41_7&products_id=976)

In this publication, WHO, the Office of the High Commissioner for Human Rights (OHCHR) and the International Organization for Migration (IOM) explore the multifaceted health and human rights challenges that migrants face and report on recent developments in this area.

The aim of this publication is to provide all stakeholders with a reference on key health and human rights issues in the context of international migration. It is meant to provide inspiration to policymakers to devise migration policies and programmes that are guided by public health considerations and human rights imperatives, with a view to protecting the human rights and improving the health of both migrants and the communities in which they live. The publication is available in English, French and Spanish.

World Migration Report 2013: Migrant Well-being and Development

(http://www.iom.int/cms/wmr2013)

The World Migration Report 2013 contributes to the global debate on migration and development in 3 ways.

First, the focus of the report is on the migrant, and on how migration affects a person’s well-being. Many reports on migration and development focus on the impact of remittances, the money that migrants send back home.

This report takes a different approach, exploring how migration affects a person’s quality of life and their human development across a broad range of dimensions.

Second, the report draws upon the findings of a unique source of data – the Gallup World Poll surveys, conducted in more than 150 countries, to assess the well-being of migrants worldwide for the first time.

Third, the report sheds new light on how migrants rate their lives, whether they live in a high-income country in the North, or a low- or middle-income country in the South. Traditionally the focus has been on those migrating from lower income countries to more affluent ones; this report considers movements in all four migration pathways and their implications for development; i.e. migration from the South to North, between countries of the South or between countries of the North, as well as movements from the North to the South.
Recommended reading

Winkler et al. 2014

Abebe, Lien & Hjelde 2014

Alvarez-del Arco et al. 2014

Opinion

The following articles represent the opinion of the author(s) and publications and do not necessarily represent the view of WHO, University of Pécs or the Editorial Board of this newsletter.

Ehrenfeld, 2014

Mosca, Rijks & Schultz, 2013a

Mosca, Rijks & Schultz, 2013b

International Organization for Migration, 2012

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Information sources

EQUI-HEALTH
(http://equi-health.eea.iom.int/)

EQUI-HEALTH is a regional project managed by the International Organization for Migration (IOM)’s Regional Office for Europe, in Brussels, aiming to improve the access to and appropriateness of health care services, health promotion and prevention in order to meet the needs of migrants, Roma and other vulnerable ethnic minority groups, including irregular migrants residing in the European Union (EU)/European Economic Area (EEA). The project, launched in February 2013, is co-financed by a direct grant from the European Commission’s Directorate General for Health and Consumers (DG SANCO) through the Consumers, Health and Food Executive Agency (CHAFEA).

AIDSMAP (NAM). Social and legal issues for people living with HIV.
Immigration and Asylum
(http://www.aidsmap.com/immigration-and-asylum/page/1497500/)

NAM (National AIDS Manual)’s AIDSMAP website includes a regularly updated worldwide map of HIV services provided in each country across the world, including the United Kingdom. Its chapter on immigration and asylum presents an overview of the main features of immigration and asylum law which are likely to affect people living with HIV in the United Kingdom and who are recent migrants, whose immigration status is uncertain, or who have conditions attached to their leave to remain, particularly with regard to their (or their dependents’) rights to access public funds. The immigration rules in the United Kingdom are complex and liable to frequent change. In the case of people living with HIV, it is important to know the entitlements of different categories of migrants to HIV treatment and welfare provision, and the guidance and rules governing procedures involved in processing an individual’s asylum claim in relation to their care and treatment.

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