Refugee Crisis

Situation Update
17 SEPTEMBER 2015

Refugee crisis

Highlights

- 411 567 refugees and migrants have reached Europe by sea so far in 2015, and a total of 2900 refugees and migrants have lost their lives in the Mediterranean in 2015 (estimates the Office of the United Nations High Commissioner for Refugees (UNHCR)).
- Refugees and migrants have similar health problems to those of the European Region’s resident population, but the conditions in which they travel can acutely exacerbate or cause a life-threatening deterioration in the health of people with chronic conditions.
- The most frequent health problems in refugees and migrants include injuries, burns, psychological trauma and diseases such as cardiovascular diseases, diabetes and hypertension, often worsened by the interruption of treatment. Acute respiratory infections, diarrhoea and head lice may also occur, associated with poor hygiene conditions during the journey. Infectious diseases already endemic in the European Region, such as tuberculosis (TB), HIV/AIDS, viral hepatitis, measles and rubella, can also be reported.
- Emergency care for injuries, access to care during pregnancy and childbirth, children’s access to medical care in case of fever or childhood diseases, medication and care for those who have chronic conditions, as well as psychosocial care, need to be ensured.
- The WHO Regional Office for Europe established a migration and health task force to support Member States and country offices in dealing with the challenges posed by the recent large influx of refugees and migrants.
- A ministerial lunch at the 65th session of the WHO Regional Committee for Europe was held to discuss the health implications of migration.

Situation update

The large and growing influx of refugees and migrants to countries in the WHO European Region necessitates an urgent response to these people’s health needs. About 2 million people have taken shelter in Turkey, which is now hosting the biggest number of refugees in the world. UNHCR estimates that over 410 000 refugees and migrants have reached Europe by sea in 2015. Over 120 000 arrived in Italy, and over 280 000 in Greece: 50 000 since the beginning of September alone. A total of 2900 refugees and migrants lost their lives in the Mediterranean sea in 2015 during their dangerous journey.

The vast majority of people travelling along the eastern European route are refugees and migrants from the Syrian Arab Republic, followed by Afghans, Pakistanis and Iraqis. Countries of origin for people reaching Italy through the western route include Eritrea, Gambia, Mali, Nigeria, Somalia and Sudan.
Increases in the number of vulnerable people – such as families with small children, unaccompanied children, pregnant women and elderly people – arriving are being registered. The number of refugees reaching Greek islands, many of them from Turkey, has increased to around 5 000 daily, with peaks of 10 000. The authorities transfer these people to the mainland, where most continue travelling through the former Yugoslav Republic of Macedonia, Serbia, Hungary and Austria, heading towards Germany and other northern European countries, such as Sweden.

Public health concerns, needs and gaps
Refugees and migrants have similar health problems to those of the resident population of the WHO European Region, but the conditions in which they travel can acutely exacerbate or cause a life-threatening deterioration in the health of people with chronic conditions. Many arrive exhausted and traumatized by experiences in their countries of origin and during the journey.

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Some refugees and migrants are exposed to substandard shelter and living conditions, owing to overcrowded receiving facilities, particularly when they arrive in places that are unprepared/unfit to cope with sudden large influxes. In these circumstances, outbreaks of food- and waterborne disease seem to be a higher risk for people on the move than for the receiving population. Living conditions can disrupt supplies of safe food and drinking-water, limit access to adequate and sufficient sanitation facilities and compromise personal and food hygiene practices. Diarrhoea is the most common symptom, but can be accompanied by nausea, vomiting or fever. The main concerns include insufficient disinfection and sanitation measures, poor hygiene conditions and inadequate provision of water and food, including milk and baby formula.

As autumn nears and the weather worsens, appropriate shelter must be ensured. Many people on the move do not have clothes or shoes appropriate for cold weather and cannot find dry accommodation. Medical staff in the receiving countries already report a rise in fevers, acute respiratory infections and colds.

WHO action, working closely with United Nations country teams and humanitarian partners
WHO established a field presence in Gaziantep, Turkey in October 2013 to scale up its capacity to support the Government of Turkey in responding to the public health needs of Syrian refugees. Here WHO supports the assessment of refugees’ needs, strengthens the capacity of Syrian medical staff, provides technical and financial assistance to outbreak response and immunization campaigns, supplies medical equipment and drugs, and disseminates information to refugees.

WHO also ensures that countries have adequate medical supplies when needed, through the procurement of interagency emergency health kits containing essential medicines and equipment, each catering to the medical needs of a population of 10 000 for three months. Two of these kits are currently being delivered to Greece and other requests are being processed.

In the former Yugoslav Republic of Macedonia, WHO will provide training in September on managing the public health aspects of migration, including standard operating procedures, to health-care workers providing medical care for people reaching entry points into the country.

WHO and the Ministry of Health of Hungary agreed to rapidly conduct a joint assessment of the health system’s capacity to respond to large influxes of refugees and migrants, in order to identify areas of collaboration for strengthening the system.
The United Nations Thematic Group on Health, chaired by WHO Country Office, Serbia, started regular meetings with the Ministry of Health to coordinate support to the national health system. As requested by the Ministry, WHO is procuring medical supplies.

As a regional response, the WHO Regional Office for Europe established a migration and health task force to support Member States and country offices in dealing with the challenges posed by the recent large influx of refugees and migrants.

On 14 September, senior government officials of the 53 Member States in the WHO European Region discussed the public health impact of large-scale migration during the 65th session of the WHO Regional Committee for Europe, held in Vilnius, Lithuania. They called for WHO to continue to support countries seeking to respond adequately to the public health implications of large influxes of people, by conducting additional assessments in countries and providing policy advice on contingency planning, the training of health personnel and the delivery of supplies. The regional Committee agreed that the Government of Italy, with WHO support, would organize a high-level meeting on health and migration before the end of 2015 to help countries agree on a common public health approach to large-scale migration in the Region.

**Background of the crisis**

The instability in Africa and the Middle East triggered an unprecedented migratory influx to neighbouring countries such as Turkey and is now posing a serious challenge to other European countries and their health systems. Refugees and migrants comprise a heterogeneous group.

Evidence suggests that migration does not imply the importation of infectious diseases, which are mainly associated with poverty. The infectious diseases that affect refugees and migrants are similar to those that affect the resident European population.

The WHO Regional Office for Europe, with the financial help of the Government of Italy, established a project to tackle the health implications of migration influxes in 2012. The Public Health Aspects of Migration in Europe (PHAME) project has conducted missions to assess health systems’ capacity and preparedness to deal with large migratory influxes in eight European countries, helped to develop contingency plans and furthered research on health and migration.

**For further information, contact:**

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Further information can be found on the WHO Regional Office for Europe website ([Frequently asked questions on migration and health](https://www.euro.who.int/)).

This document uses UNHCR terminology, defining refugees as people fleeing war, persecution, etc. and migrants as those moving to improve their lives by finding work, to seek for education or family reunion, or for other reasons.