



Training packages for health professionals to improve access and quality of health services for migrants and ethnic minorities, including the Roma
MEM-TP

ADDITIONAL MODULE 1:

Target Groups

Unit 2: Migrants in an 'Irregular' Situation

Guidelines

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Migrants & Ethnic Minorities
Training Packages



Escuela Andaluza de Salud Pública
CONSEJERÍA DE IGUALDAD, SALUD Y POLÍTICAS SOCIALES



SERVIZIO SANITARIO REGIONALE
EMILIA-ROMAGNA
Azienda Unità Sanitaria Locale di Reggio Emilia



JAGIELLONIAN UNIVERSITY
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ADDITIONAL MODULE 1: Target Groups

Unit 2: Migrants in an ‘Irregular’ Situation

1. Objectives and Methods

1. Objectives

Objectives of the Presentation:

- To introduce the concept of “migrants in an ‘irregular’ situation” and to present recent comparative studies on the access to health and health of migrants in an ‘irregular’ situation, including case studies and recommendations.

Objectives of the Activities:

- To identify strategies for improving access to health care for migrants in an ‘irregular’ situation in the own region / country, and prioritize these strategies according to their perceived relevance.

Time	Objectives	Activities	Sources
20 minutes	To introduce the concept of “migrants in an ‘irregular’ situation” and to present recent comparative studies on the access to health and health of migrants in an ‘irregular’ situation, including case studies and recommendations	Presentation “Migrants in an ‘irregular’ situation” and questions <i>(Slides 1-9)</i>	Projector, laptop, screen. AM1_U2_Presentation
40 minutes	<ul style="list-style-type: none"> • To identify strategies for improving access to health care for migrants in an ‘irregular’ situation in the own region / country, and prioritize these strategies according to their perceived relevance. 	Activity “Strategies for Improving Access to Health Care for Migrants in an ‘Irregular’ Situation” in three parts: <ul style="list-style-type: none"> • Presentation of the methodology • Small Groups: Nominal group technique • Plenary: Wrap up and discussion <i>(Slide 10)</i>	Projector, laptop, screen. Cards, markers, flip chart, adhesive (spray), self-adhesive dots.

2. Presentation

Slide 1: Title page

Slide 2: Outline of the session

Slide 3: In recent research and strategic documents, different **terminologies and concepts** can be observed, including terms such as “illegal migrants”, “undocumented migrants”, “irregular migrants”, “migrants with irregular status”, “migrants in an ‘irregular’ situation” or “migrants in an irregularized situation”. This terminology use is accompanied by a theoretical and political discussion which highlights the underlying assumptions inherent to each concept and the complex character of migration status^{1,2,3,4,5}. In the framework of the MEM-TP project, the term “migrants in an ‘irregular’ situation” has been chosen^{6,7}, based on the idea that the person is not “illegal” or “irregular”, but the legal framework “irregularizes” the migrant’s administrative status.

Slide 4: A broad range of **comparative studies** on the situation of access to health care and health of migrants in an ‘irregular’ situation **in the European context** can be identified, published by individual authors, European agencies, professional associations and civil society organizations^{8,9,10,11,12,13,14,15,16,17,18,19,20,21,22,23,24,25,26,27,28,29,30,31,32,33,34, 35,36,37,38,39,40,41}.

¹ Vollmer B. Briefing. Irregular Migration in the UK: Definitions, Pathways and Scale. Oxford: The Migration Observatory, University of Oxford, 2011. Available at: http://www.migrationobservatory.ox.ac.uk/sites/files/migobs/Briefing%20-%20Irregular%20Migration_0.pdf (retrieved: March 5, 2015).

² Morehouse C, Blomfield M. Irregular Migration in Europe. Washington DC: Migration Policy Institute, 2011. Available at: <http://www.migrationpolicy.org/research/TCM-irregular-migration-europe> (retrieved: March 5, 2015).

³ Duvell F, Triandafyllidou A, Vollmer B. Ethical issues in irregular migration research. Report on Ethical Issues, Deliverable D2 prepared for Work Package 2 of the research project CLANDESTINO Undocumented Migration: Counting the Uncountable. Data and Trends Across Europe, funded by the 6th Framework Programme for Research and Technological Development Research DG, European Commission, 2008. Available at: http://irregular-migration.net/typo3_upload/groups/31/4.Background_Information/4.1.Methodology/EthicalIssuesIrregularMigration_Clandestino_Report_Nov09.pdf (retrieved: March 5, 2015).

⁴ GCIM, Global Commission on International Migration. Migration in an interconnected world: New directions for action. Report of the Global Commission on International Migration. Geneva: GCIM, 2005. Available at: <http://www.queensu.ca/samp/migrationresources/reports/gcim-complete-report-2005.pdf> (retrieved: March 5, 2015).

⁵ PICUM, Platform for International Cooperation on Undocumented Migrants. Why ‘Undocumented’ or ‘Irregular’? Brussels: PICUM, S.A. Available at: http://picum.org/picum.org/uploads/file_/TerminologyLeaflet_reprint_FINAL.pdf (retrieved: March 5, 2015).

⁶ Mock-Muñoz de Luna C, Ingleby D, Graval E, Krasnik A. Synthesis Report. MEM-TP, Training packages for health professionals to improve access and quality of health services for migrants and ethnic minorities, including the Roma. Granada, Copenhagen: Andalusian School of Public Health, University of Copenhagen, 2015.

⁷ Chiarenza A, Horvat L, Ciannameo A, Vaccaro G, Lanting K, Bodewes A, Suurmond J. Final Report Review of existing training materials. MEM-TP, Training packages for health professionals to improve access and quality of health services for migrants and ethnic minorities, including the Roma. Granada, Reggio Emilia, Amsterdam: Andalusian School of Public Health, AYSL of Reggio Emilia, University of Amsterdam, 2015.

⁸ Biswas D, Toebes B, Hjern A, Ascher H, Norredam M. Access to health care for undocumented migrants from a human rights perspective: a comparative study of Denmark, Sweden, and the Netherlands. *Health and Human Rights* 2012; 14(2):49-60.

⁹ Cuadra BC. Right of access to health care for undocumented migrants in EU: a comparative study of national policies. *Eur J Public Health* 2011; 22:267–271.

¹⁰ Davrin M, Lorant V, Sandhu S, et al. Health care for irregular migrants: pragmatism across Europe. A qualitative study. *BMC Res Notes* 2012; 5:99.

¹¹ Duvell, Triandafyllidou, Vollmer, 2008, op. cit.

¹² FRA, European Union Agency for Fundamental Rights. Fundamental Rights of Migrants in an Irregular Situation in the European Union. Luxembourg: Publications Office of the European Union, 2011a. Available at:

http://fra.europa.eu/sites/default/files/fra_uploads/1827-FRA_2011_Migrants_in_an_irregular_situation_EN.pdf (retrieved: March 5, 2015).

¹³ FRA, European Union Agency for Fundamental Rights. Migrants in an Irregular Situation: Access to Health Care in 10 European Union Member States. Luxembourg: Publications Office of the European Union, 2011b. Available at: http://fra.europa.eu/sites/default/files/fra_uploads/1771-FRA-2011-fundamental-rights-for-irregular-migrants-healthcare_EN.pdf (retrieved: March 5, 2015).

¹⁴ HUMA Network, Health for Undocumented Migrants and Asylum Seekers, Collantes S. Access to Health Care for Undocumented Migrants and Asylum Seekers in 10 EU Countries. Law and Practice. Paris, Brussels, Madrid: HUMA Network, 2009. Available at: http://www.episouth.org/doc/r_documents/Rapport_huma-network.pdf (retrieved: March 5, 2015).

¹⁵ HUMA Network, Health for Undocumented Migrants and Asylum Seekers, Collantes S. Are Undocumented Migrants and Asylum Seekers Entitled to Access Health Care in the EU? A Comparative Overview in 16 Countries. Paris, Brussels, Madrid: HUMA Network, 2010. Available at: <http://www.epim.info/wp-content/uploads/2011/02/HUMA-Publication-Comparative-Overview-16-Countries-2010.pdf> (retrieved: March 5, 2015).

¹⁶ HUMA Network Health for Undocumented Migrants and Asylum Seekers, Collantes S, Soler A, Klorek N, Maśliński K. Access to Health Care and Living Conditions of Asylum Seekers and Undocumented Migrants in Cyprus, Malta, Poland and Romania. Paris, Brussels, Madrid: HUMA Network, 2011. Available at: http://ec.europa.eu/ewsi/UDRW/images/items/docl_20498_605665099.pdf (retrieved: March 5, 2015).

¹⁷ Karl-Trummer U, Novak-Zezula S. Health Care in Nowhereland, Improving Services for Undocumented Migrants in the EU. Vienna: Centre for Health and Migration, 2010.

¹⁸ Médecins du Monde (Doctors of the World), European Observatory on Access to Health Care, Chauvin P, Parizot I, Simonnot N. Access to Health Care for Undocumented Migrants in 11 European Countries. Paris: Médecins du Monde, 2009. Available at: http://mdmgreece.gr/attachments/283_huma%20en.pdf (retrieved: March 5, 2015).

¹⁹ Médecins du Monde (Doctors of the World), Chauvin P, Mestre MC, Simonnot N. Access to Health Care for Vulnerable Groups in the European Union in 2012. An Overview of the Condition of Persons Excluded from Health Care Systems in the EU. Paris: Médecins du Monde, 2012. Available at: http://www.doktersvandewereld.be/sites/www.doktersvandewereld.be/files/publicatie/attachments/eu_vulnerable_groups_2012_mdm.pdf (retrieved: March 5, 2015).

²⁰ Médecins du Monde (Doctors of the World), Chauvin D, Simonnot N, Vanbiervliet F, et al. Access to Health Care in Europe in Times of Crisis and Rising Xenophobia: An Overview of the Situation of People Excluded from Health Care Systems. Paris: Médecins du Monde, 2013. Available at: http://b.3cdn.net/drofttheworld/d137240498b91ca33e_jhm62yig1.pdf

²¹ PICUM, Platform for International Cooperation on Undocumented Migrants, Bicocchi L, LeVoy M. Undocumented Children in Europe: Invisible Victims of Immigration Restrictions. Brussels: PICUM, 2009. Available at: <http://picum.org/picum.org/uploads/publication/Undocumented%20Children%20in%20Europe%20EN.pdf> (retrieved: March 5, 2015).

²² PICUM, Platform for International Cooperation on Undocumented Migrants. PICUM's Main Concerns about the Fundamental Rights of Undocumented Migrants in Europe. Brussels: PICUM, 2010. Available at: <http://picum.org/picum.org/uploads/publication/Annual%20Concerns%202010%20EN.pdf> (retrieved: March 5, 2015).

²³ PICUM, Platform for International Cooperation on Undocumented Migrants, Geddie E, LeVoy M, Nguyen KA, Mateos M, Lengar S. Strategies to End Double Violence Against Undocumented Women – Protecting Rights and Ensuring Justice. Brussels: PICUM, 2012. Available at: <http://picum.org/picum.org/uploads/publication/Double%20Violence%20Against%20Undocumented%20Women%20-%20Protecting%20Rights%20and%20Ensuring%20Justice.pdf> (retrieved: March 5, 2015).

²⁴ PICUM, Platform for International Cooperation on Undocumented Migrants, Keith L, Stricker B, Mateos M. Children First and Foremost. A guide to realising the rights of children and families in an irregular migration situation. Brussels: PICUM, 2013a. Available at: http://picum.org/picum.org/uploads/publication/Children%20Conference%20report_26%20February%202013_EN.pdf (retrieved: March 5, 2015).

²⁵ PICUM, Platform for International Cooperation on Undocumented Migrants, Geddie E, LeVoy M, Soova K, Manieri MG. Advocating for the Rights of Undocumented Migrants: An Overview of PICUM's Work Since 2001. Brussels: PICUM, 2013b. Available at: <http://picum.org/picum.org/uploads/publication/PICUM%2010%20Year%20report%20EN.pdf> (retrieved: March 5, 2015).

²⁶ PICUM, Platform for International Cooperation on Undocumented Migrants, Cortina J, Raphael A, Elie J. Human Rights of Undocumented Adolescents and Youth. Brussels: PICUM, 2014a. Available at: <http://www.globalmigrationgroup.org/sites/default/files/uploads/gmg-topics/mig-data/Human-Rights-of-Undocumented-Adolescents-Youth.pdf> (retrieved: March 5, 2015).

²⁷ PICUM, Platform for International Cooperation on Undocumented Migrants. Access to Health Care for undocumented Migrants in Europe: The Key Role of Local and Regional Authorities. Brussels: PICUM, 2014b.

The studies analyse the level of fulfilment of Human Rights principles established in international covenants and European regulations, detecting an uneven access to health care for migrants in an ‘irregular’ situation throughout Europe, with a frequent limitation or exclusion of this population group from public health care services. Furthermore, the studies identify multiple barriers in the effective access to health care for migrants in an ‘irregular’ situation, including cultural, idiomatic, social and structural barriers. The authors highlight the health risks related to a limitation or absence of access to health care, both for individual and public health. Furthermore, the role of local and regional policies and interventions in providing health care services for migrants in an ‘irregular’ situation is stressed. Some of the reviewed studies analyse the impact of the current economic and systemic crisis on access to

Available at:

http://picum.org/picum.org/uploads/publication/PolicyBrief_Local%20and%20Regional%20Authorities_AccessHealthCare_UndocumentedMigrants_Oct.2014.pdf (retrieved: March 5, 2015).

²⁸ Ruiz-Casares M, Rousseau C, Derluyn I, Watters C, Crépeau F. Right and access to healthcare for undocumented children: Addressing the gap between international conventions and disparate implementations in North America and Europe. *Social Science & Medicine* 2010;70:329-336.

²⁹ Suess A, Ruiz Pérez I, Ruiz Azarola A, March Cerdà JC. The right of access to health care for undocumented migrants: a revision of comparative analysis in the European context. *European Journal of Public Health* 2014;24(5):712-720. doi: 10.1093/eurpub/cku036.

³⁰ Woodward A, Howard N, Wolffers I. Health and access to care for undocumented migrants living in the European Union: a scoping review. *Health Policy and Planning* 2014;29:818-830.

³¹ JRS-Europe, Jesuit Refugee Service-Europe. Civil Society Report on the Detention of Vulnerable Asylum Seekers and Irregular Migrants in the European Union (The Devas Project). Brussels: JRS-Europe, 2010. Available at: http://www.detention-in-europe.org/images/stories/DEVAS/jrs-europe_becoming%20vulnerable%20in%20detention_june%202010_public_updated%20on%2012july10.pdf (retrieved : December 8, 2014).

³² Médecins Sans Frontières. Migrants, refugees and asylum seekers: Vulnerable people at Europe’s doorstep, s.a. Available at: <http://www.doctorswithoutborders.org/sites/usa/files/MSF-Migrants-Refugees-AsslymSeekers.pdf> (retrieved: March 5, 2015).

³³ Amnesty International. Migration-Related Detention: A research guide on human rights standards relevant to the detention of migrants, asylum-seekers and refugees. London: AI, 2007. Available at: <http://www.refworld.org/pdfid/476b7d322.pdf> (retrieved: March 5, 2015).

³⁴ UN, United Nations, Human Rights Council. Report of the Special Rapporteur on the human rights of migrants, Detention of migrants in an irregular situation. François Crépeau, 2012. Available at: http://www.ohchr.org/Documents/HRBodies/HRCouncil/RegularSession/Session20/A-HRC-20-24_en.pdf (retrieved: March 5, 2015).

³⁵ UN, United Nations, Human Rights Council. Report of the Special Rapporteur on the human rights of migrants, François Crépeau, Regional study: management of the external borders of the European Union and its impact on the human rights of migrants, 2012. Available at: http://www.ohchr.org/Documents/HRBodies/HRCouncil/RegularSession/Session23/A.HRC.23.46_en.pdf (retrieved: March 5, 2015).

³⁶ Committee on Civil Liberties, Justice and Home Affairs, Directorate General Internal Policies of the Union, European Parliament. The conditions in centres for third country national (detention camps, open centres as well as transit centres and transit zones) with a particular focus on provisions and facilities for persons with special needs in the 25 EU member states. Study. Brussels: European Parliament, 2007. Available at: http://www.aedh.eu/plugins/fckeditor/userfiles/file/Asile%20et%20immigration/Study_of_European_Parliament_about_detention_and_enferment_in_Europe.pdf (retrieved: March 5, 2015).

³⁷ Mock-Muñoz de Luna, et al. 2015, op. cit.

³⁸ Chiarenza, et al. 2015, op. cit.

³⁹ European Commission. Migrant access to social security and healthcare: policies and practice. European Migration Network Study 2014. Brussels: European Commission, 2014. Available at: http://ec.europa.eu/dgs/home-affairs/what-we-do/networks/european_migration_network/reports/docs/emn-studies/emn_synthesis_report_migrant_access_to_social_security_2014_en.pdf (retrieved: March 5, 2015).

⁴⁰ IOM, International Organization for Migration. EQUI-Health, Fostering health provision for migrants, the Roma, and other vulnerable groups, 2015. Available at: <http://equi-health.eea.iom.int/> (retrieved: March 5, 2015).

⁴¹ Petrova-Benedict R, Samuilova M. Guidelines for Border Management and Detention Procedures Involving Migrants: A Public Health Perspective. PHBLM Project. Increasing Public Health Safety alongside the New Eastern European Border Line. Brussels: IOM, International Organization for Migration, 2010. Available at: <http://www.iom.int/jahia/webdav/shared/shared/mainsite/activities/health/Guidelines-Border-Management-and-Detention-Procedures-Public-Health-Perspective.pdf> (retrieved: March 5, 2015).

health care and health of migrants in an ‘irregular’ situation. Most of the reviewed reports and papers include recommendations for policies and interventions focused on migrants in an ‘irregular’ situation.

Slide 5: Two recent studies published by Médecins du Monde (Doctors of the World) analyze the **impact of the current economic crisis** on population groups in situation of social vulnerability, among them migrants in an ‘irregular’ situation, in 5 European cities in 2012 and 14 cities of 7 European countries in 2013. An increase of unemployment and xenophobic attitudes against migrants is observed, as well as a frequent limitation of health care entitlements, an introduction of fees and increased barriers in the effective access to health care. The respondents reflect a deterioration of their self-perceived health.

Slide 6: This figure, published by FRA, European Union Agency for Fundamental Rights, shows the situation of **health care entitlements** for migrants in an ‘irregular’ situation in the EU-27 countries in 2011⁴². The figure differentiates between five situations: 1. Countries which only provide access to emergency care for migrants in an ‘irregular’ situation, 2. Countries which provide access beyond emergency, but duty to report to the police, 3. Countries which provide access to emergency and primary care, 4. Countries which provide access to emergency and secondary care, and 5. Countries which provide access to emergency, primary and secondary care to this population group. During the last years, health care entitlements for migrants in an ‘irregular’ situation changed in several European countries⁴³.

As an example for an improvement of the situation, **Sweden** can be highlighted.

The limitation of health care for migrants in an ‘irregular’ situation in 2012 in **Spain** can be mentioned as an example for recent restrictions in migrants’ health entitlements.

Additional information (not included in the presentation):

In **Sweden**, the Law on Health and Medical Care for Asylum Seekers and Others adopted in 2008⁴⁴ restricted health care entitlements for adult migrants in an ‘irregular’ situation to emergency care, including the requirement of paying the full costs after receiving the care. Only minors received full access to health care, regardless of their nationality or administrative status. In 2013, a new law was approved⁴⁵, which permits adult migrants in an

⁴² FRA 2011a, op. cit.

⁴³ PICUM 2014b, op. cit.

⁴⁴ Svensk författningssamling. Lag (2008:344) om hälso- och sjukvård åt asylsökande m. fl. Available at: <http://www.notisum.se/rnp/sls/sfs/20080344.pdf> (retrieved: March 5, 2015).

⁴⁵ Svensk författningssamling. Lag (2013:407) om hälso- och sjukvård till vissa utlänningar som vistas i Sverige utan nödvändiga tillstånd. Available at: <http://rkrattsdb.gov.se/SFSdoc/13/130407.pdf> (retrieved: March 5, 2015).

⁴⁶ PICUM 2014b, op. cit.

⁴⁷ Jefatura del Estado. Real Decreto-ley 16/2012, de 20 de abril, de medidas urgentes para garantizar la sostenibilidad del Sistema Nacional de Salud y mejorar la calidad y seguridad de sus prestaciones. BOE, Boletín Oficial del Estado Nº 98, 24 de abril de 2012.

‘irregular’ situation access to “acute health care” and “health care that can not be postponed”, at the same level as asylum seekers. Minors in an ‘irregular’ situation maintain full access to health care⁴⁶.

In **Spain**, over the last decades an increased level of universality in the access to health care had been achieved, with equal health care entitlements for all people living in Spain, regardless of their nationality or administrative status, regulated by means of the inscription in the register of inhabitants. The Royal Decree-law 16/2012 (RDL 16/2012)⁴⁷, published in April 2012, changes the former health care model, based on the principle of universality, towards a model based on the principle of assurance. By means of the RDL 16/2012, access to health care of migrants in an ‘irregular’ situation has been limited to emergencies, pregnancy, birth and afterbirth care. Minors maintain full access to health care, regardless of their nationality or administrative status.

The changes in Sweden and Spain are underlined as example for recent changes in health care entitlements in the European context, for an information about the situation in other European countries, see the recent PICUM report⁴⁸.

Slide 7: Apart from a review of the legal health care entitlements for migrants in an ‘irregular’ situation, the comparative reports quoted above refer to multiple **barriers** for this population group in the **effective access to health care**, among them a lack of awareness of existing entitlements by professionals, administrative staff and migrants, the complexity of administrative procedures, an obligation of reimbursement in co-payment systems, as well as a fear of denunciation.

Slide 8: As **further barriers in the access to health care** for migrants in an ‘irregular’ situation, the studies mention cultural and idiomatic aspects, previous experiences of discrimination, the precarious socioeconomic situation of many migrants in an ‘irregular’ situation, with frequent changes or absence of a permanent residence, as well as cases of denied access despite of being entitled. The fear of a negative impact of an HIV+ diagnosis on the residence authorization process is named as a potential barrier for accessing testing or treatment services. Furthermore, the studies observe difficulties in accessing appropriate health care in detention centers.

Slide 9: The comparative reports include a broad list of **recommendations** which underline the relevance of guaranteeing **health care entitlements** for all people residing in a country, regardless of the nationality, administrative status or employment situation, in equality of conditions in relation to public coverage, reimbursement or co-payment. The importance of an access to all health care levels, not only emergency care, the relevance of ceasing practices of migration control during the health care delivery, and the importance of maintaining health care entitlements in the current situation of economic crisis is stressed.

Slide 10: Furthermore, the authors recommend an **improvement of the effective access to health care**, removing cultural, idiomatic, social and structural barriers, the promotion of a health care delivery without discrimination and the improvement of the health care services in the detention centers, highlighting the important role of local and regional policies and interventions.

⁴⁸ PICUM 2014b, op. cit.

3. Activity

Strategies for Improving Access to Health Care for Migrants in an 'Irregular' Situation

The same activity is proposed in each of the 4 Units of Additional Module 1, focused on the specific target group. The trainer is proposed to choose the moment and thematic focus of the activity (strategies for improving access to health care for ethnic minorities, migrants in an 'irregular' situation, refugees and asylum seekers or vulnerable groups).

Slide 11: The activity consists of three parts:

1. Presentation of the methodology

2. Identification and prioritization of strategies for improving access to health care for migrants in an 'irregular' situation, in small groups (8-10 people)

Method: Nominal group technique.

Moderation: 1-2 facilitators / group.

Materials: Cards, markers, flip chart, adhesive (spray), self-adhesive dots.

Technique:

- The participants are invited to write down the 3 most relevant strategies they identify for improving access to health care for migrants in an 'irregular' situation in their region / country (*one idea / card*).
- The facilitators collect the cards, reading and arranging the named aspects by topics on a flip chart.
- The participants are asked to prioritize the most important strategies (*3 dots / person*).
- The participants choose a rapporteur, in charge of summarizing the most relevant aspects in the plenary.

3. Wrap up and discussion in plenary

- Wrap up: The rapporteur of each small group provides a summary of the results, in three sentences.
- Group discussion.

Slide 12: Thank you and questions.

Slide 13-16: References.

Slide 17: European Commission disclaimer.

4. Readings

Recommended readings

- FRA, European Union Agency for Fundamental Rights. Fundamental Rights of Migrants in an Irregular Situation in the European Union. Luxembourg: Publications Office of the European Union, 2011a. Available at: http://fra.europa.eu/sites/default/files/fra_uploads/1827-FRA_2011_Migrants_in_an_irregular_situation_EN.pdf (retrieved: March 5, 2015).
- FRA, European Union Agency for Fundamental Rights. Migrants in an Irregular Situation: Access to Health Care in 10 European Union Member States. Luxembourg: Publications Office of the European Union, 2011b. Available at: http://fra.europa.eu/sites/default/files/fra_uploads/1771-FRA-2011-fundamental-rights-for-irregular-migrants-healthcare_EN.pdf (retrieved: March 5, 2015).
- PICUM, Platform for International Cooperation on Undocumented Migrants. Why 'Undocumented' or 'Irregular'? Brussels: PICUM, s.a. Available at: http://picum.org/picum.org/uploads/file_/TerminologyLeaflet_reprint_FINAL.pdf (retrieved: March 5, 2015).
- Suess A, Ruiz Pérez I, Ruiz Azarola A, March Cerdà JC. The right of access to health care for undocumented migrants: a revision of comparative analysis in the European context. *European Journal of Public Health* 2014;24(5):712-720. doi: 10.1093/eurpub/cku036.

Recommended web resource

- PICUM, Platform for International Cooperation on Undocumented Migrants. Undocumentary. The Reality of Undocumented Migrants in Europe, 2014 Available at: <http://www.undocumentary.org/>, including a Teacher's Guide. Available at: http://picum.org/picum.org/uploads/publication/Educational%20guide_FINAL_EN.pdf (retrieved: March 5, 2015).

Complementary readings

- Amnesty International. Migration-Related Detention: A research guide on human rights standards relevant to the detention of migrants, asylum-seekers and refugees. London: AI, 2007. Available at: <http://www.refworld.org/pdfid/476b7d322.pdf> (retrieved: March 5, 2015).
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- Committee on Civil Liberties, Justice and Home Affairs, Directorate General Internal Policies of the Union, European Parliament. The conditions in centres for third country national (detention camps, open centres as well as transit centres and transit zones) with a particular focus on provisions and facilities for persons with special needs in the 25 EU member states. Study. Brussels: European Parliament, 2007. Available at: http://www.aedh.eu/plugins/fckeditor/userfiles/file/Asile%20et%20immigration/Study_of_European_Parliament_about_detention_and_enferment_in_Europe.pdf (retrieved: March 5, 2015).
- Cuadra BC. Right of access to health care for undocumented migrants in EU: a comparative study of national policies. *Eur J Public Health* 2011;22:267-271.
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