





FOSTERING
HEALTH
PROVISION
FOR MIGRANTS,
THE ROMA,
AND OTHER
VULNERABLE
GROUPS

# **OBJECTIVE**

The objective of the EQUI HEALTH action is to improve the access and appropriateness of health services, health promotion and prevention to meet the needs of migrants, the Roma and other vulnerable ethnic minority groups, including irregular migrants in the EU/EEA.

## **SUMMARY**

The EQUI HEALTH project is divided into three distinct but interrelated sub-actions: 1) Southern EU Borders, 2) Roma Health, 3) Migrant Health

Migration and ethnic minority health is a key topic in public and political debates across Europe focusing on the economic crisis, extensive migration from war-torn countries and the integration of the newcomers, the majority of whom remain unknown to any governmental and/or public registry and with limited access to social welfare systems, including health services. EQUI HEALTH is interested in the health of the migrants, their access to health services from the moment of arrival, during reception and throughout the different stages of the integration process.



## **METHODOLOGY**

- Established Regional Consultative Committees (RCCs) and National multi-stakeholders Consultative Committees (NCCs)
- Coordinated with DG SANTE, CHAFEA, ECDC, Frontex, FRA
- Convened Expert Working Groups
- Elaborated Assessment Reports on the basis of desk reviews, field visits and consultations
- Outlined priority areas to support in terms of strategies, procedures, studies and initiatives
- Capacity building activities

#### DISSEMINATION

- Project website & brochures
- Partner websites & networks
- Conferences participation
- Documentary
- Newsletters
- Policy briefs

#### **EVALUATION**

The strength of EQUI HEALTH as an action project lies in the fact that internal evaluation is built within the work packages. Monitoring takes place at the end of meetings, workshops, field visits and training sessions, and feedback from participants is analysed and recorded for internal review. The project underwent mid-term evaluation covering the implementation from its start on 1 February 2013 to 31 May 2015. The outcomes and outputs measured against indicators set out are efficiently achieved.



## **RESULTS**

## Southern EU Borders sub-action:

- 6 Situational Assessment Reports (Bulgaria, Croatia, Greece, Italy, Malta, Spain), including national and EU level recommendations on improving health services for migrants, health of staff and public health concerns
- Regional Peer Review & Training of Trainers (ToT). Modules on migration and health, well-being: public/individual health, intercultural competence piloted.
- Workshop for health professionals (HPs) (Lisbon 2014). Participants from Croatia, Greece, Italy, Malta, Portugal, Spain, Turkey
- Workshop for law enforcement officers (LEOs) (Rome 2015). Participants from Belgium, Bulgaria, Croatia, Cyprus, Greece, Italy, Luxembourg, Malta, Portugal, Romania, Spain
- 13 National Roll-out Training Sessions and 400 HPs and LEOs trained.

#### Roma Health Sub-action:

- 8 Progress Reports (Belgium, Bulgaria, Croatia, Czech Republic, Italy, Romania, Slovakia, Spain) on the implementation of the National Roma Integration Strategies and other national commitments in the field of health to allow EU Member States to better monitor, share and strengthen their national approaches
- Regional Intervention on "Health Mediation and the Roma" to share experiences, training curricula and discuss successes and challenges of the intercultural health mediation programmes.
- Documentary on Roma Health Mediation filmed in Bulgaria, Belgium and France.
- EU Community Health Mediators Network

## Migrant Health sub-action:

- Addition of Health Strand to the Migrant Integration Policy Index in collaboration with COST ADAPT research network and Migration Policy Group
- 31 country reviews on national legal and policy frameworks
- Thematic Study on cost analysis of nonprovision of health care. The target group is irregular migrants and ethnic minorities including the Roma. Austria, Belgium, Italy and Spain

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