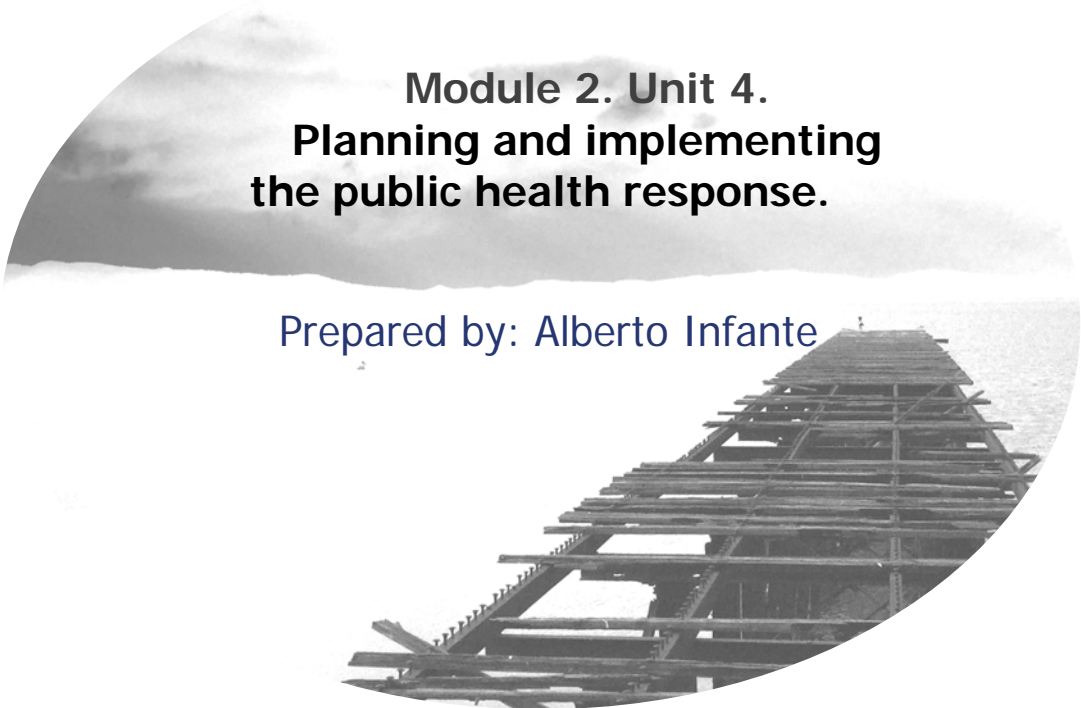




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**SUPPORTING HEALTH COORDINATION, ASSESSMENTS, PLANNING, ACCESS TO
HEALTH CARE AND CAPACITY BUILDING IN MEMBER STATES UNDER PARTICULAR
MIGRATORY PRESSURE — 717275/SH-CAPAC**



**Module 2. Unit 4.
Planning and implementing
the public health response.**

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Module 2. Unit 4: Planning and implementing the public health response.

M2U4_CA2: Test

1. Even though the responsibilities in the EU Member States are shared by different ministries, law enforcement agencies and governmental and non-governmental organizations, the driving force for the public health and health systems response should be the:
 - a. Health Authorities at different levels
 - b. Ministry of Interior
 - c. Immigration Affairs Department
 - d. Red Cross

2. Classically, health need assessments identify and prioritize:
 - a. Challenges
 - b. Risks
 - c. Gaps and unmet health needs
 - d. All of them

3. What of the following is not a leit-motif for a public health and health system action plan?
 - a. Improving access to health care and public health interventions
 - b. Ensuring the continuity of care
 - c. Processing demands for asylum
 - d. Guaranteeing health entitlements for the target population.

4. What of the following statements is right?
 - a. An action plan usually integrates both, a response plan and a contingency plan
 - b. When you prepare a response plan you do not need to think on a contingency plan
 - c. Contingency planning is not needed in case of refugees, asylum seekers and migrants influx
 - d. Elaborating a response plan is an exclusive health authority responsibility

5. Elaborating contingency plans does not involve making decisions in advance on:

- a. What is going to happen
 - b. What are we going to do about it
 - c. What can we do ahead of time to get prepared
 - d. The most unpredictable sort of circumstances
6. What of the following dimensions is not required to be identified when a public health and health system response action plan is going to be implemented:
- a. type of country (arrival, transit, destination)
 - b. type of health problems and risks to cope with
 - c. type of migrants and vulnerable groups
 - d. type of political relations between the country of origin and destination.
7. The team in charge of preparing an action plan must:
- a. Define priority areas, location of response, health problems, vulnerable sub-groups and potential health risks
 - b. Define objectives that are SMART: Specific, Measurable, Agreed upon, Realistic and Time-based
 - c. Adjust the resources (material, human, financial) for each activity, decide on what can be fit into the budget, and work for them to be available
 - d. All of them
8. What of the following statements is not right?
- a. Unaccompanied minors is a priority issues
 - b. The number of the so-called stranded migrants tend to increase
 - c. Contingency plans require to be tested
 - d. Migrants's human rights are being properly taken into account in most countries and regions
9. When you are prepare an action plan:
- a. Human resources for health require be properly trained and motivated.
 - b. Mental health needs to be carefully considered.
 - c. The best way to make the effort sustainable is to channel most of the financial resources through the regular public health and health services national and/or regional systems
 - d. All of them
10. What of the following statements is not right?
- a. Isoleting migrants from the society is the main objective of an action plan
 - b. An action plan is a short, practical, multisectoral document that is periodically revised

- c. Coordination mechanisms and models of care should be revisited periodically and the results disseminated
- d. A good communication strategy with local populations is essential in order to avoid fears and misunderstandings.