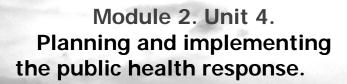
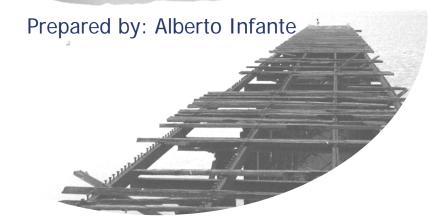


Co-funded by the Health Programme of the European Union

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







 $\odot$  – 2016 – Escuela Andaluza de Salud Pública. All rights reserved. Licensed to the Consumers, Health, Agriculture and Food Executive Agency (CHAFEA) under conditions.

This content is part of the project '717275 / SH-CAPAC' which has received funding from the European Union's Health Programme (2014-2020). The content of this report represents the views of the author only and is his/her sole responsibility; it can not be considered to reflect the views of the European Commission and/or the Consumers, Health, Agriculture and Food Executive Agency or any other body of the European Union. The European Commission and the Agency do not accept any responsibility for use that may be made of the information it contains.

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

## M2U4\_CA3: Open question

Respond the two following questions briefly (no more than six lines each)

1. Please, indicate three reasons for the public health national/regional authorities to be in the driving seat of the refugees, asylum seekers and other migrants' health response plans.

2. Please, indicate what are: a) the most likely and, b) the worst case scenario for your country/region in relation with the current refugees, asylum seekers and other migrants influx