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

# IMPROVING THE HEALTH RESPONSE TO REFUGEES, ASYLUM SEEKERS AND OTHER MIGRANTS IN EU COUNTRIES THROUGH THE SH-CAPAC PROJECT

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# MEMBERS OF THE SH CAPAC CONSORTIUM

The Consortium is comprised of the following seven institutions:

- Escuela Andaluza de Salud Pública (EASP) (Spain),
- Azienda Unità Sanitaria Locale di Reggio Emilia (Italy),
- Trnava University in Trnava (Slovakia),
- Jagiellonian University Medical College ( Poland),
- International Centre for Reproductive Health/ University of Ghent (Belgium),
- Academic Medical Centre/ University of Amsterdam (The Netherlands),
- University of Copenhagen (Denmark).

# GENERAL OBJECTIVE OF THE SH-CAPAC PROJECT

The general objective of the project is to:

**Support** Member States under particular migratory pressure in their response to health related challenges

# SPECIFIC OBJECTIVES I

**SO1:** Support Member States, in the establishment of national and international **health sector coordination mechanisms.**

**SO2:**Support Member States S in the **analysis of health challenges and unmet health needs** of the recent migrant flow as well as developing tools for periodic **assessments of the health care response and public health interventions needed**

**SO3:**Support Member States in **developing action plans** for implementing a public health response and for reinforcing their health systems to respond to the challenges of the migrants' influx

## SPECIFIC OBJECTIVES II

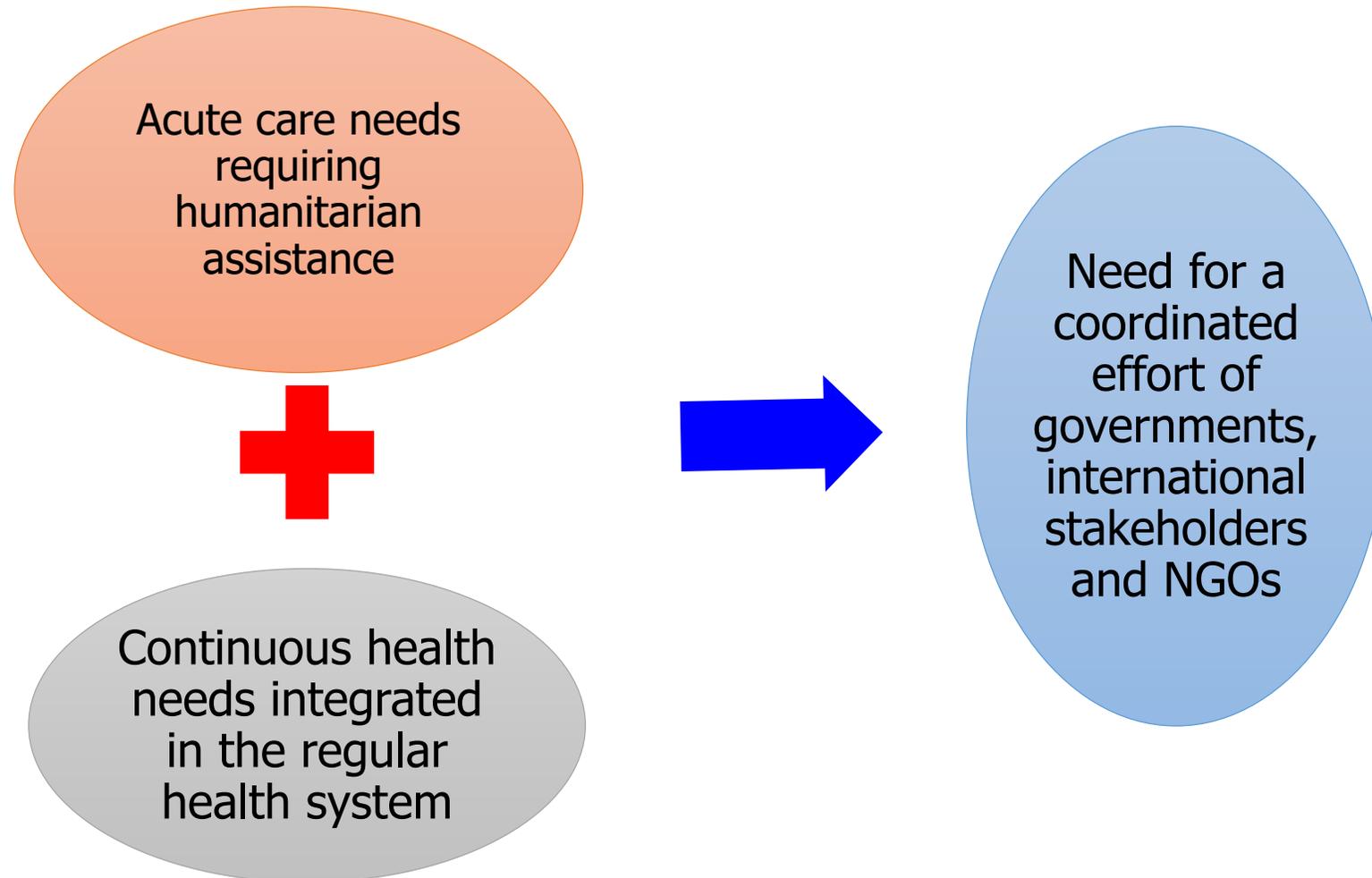
**SO4:** Support Member States in **promoting and ensuring access** of the refugee, asylum seekers and other migrants populations to health care and public health interventions through the development and dissemination of a **resource package** to reorient local strategies and plans.

**SO5: Build national capacity through training of trainers** in affected countries who can implement training activities for health workers, so they can develop intercultural competences and have a clear understanding of a migrant sensitive health care delivery model, respecting human rights and dignity

# THE NATURE OF THE PROJECT I

- Seeks to address the **compounded effect** of acute critical health needs that warrant humanitarian interventions as well as continuous health needs that require access to regular comprehensive health care and public health interventions provided by the countries' health systems.
- This requires a coordinated effort of Governments, Red Cross societies (IFRC), NGOs, the European Commission (DG Santé, CHAFEA, ECHO,UCPM,ECDC), the IOM and the UN agencies, especially UNHCR, WHO, UNICEF,UNFPA and OCHA.

# THE NATURE OF THE SH-CAPAC PROJECT(II)



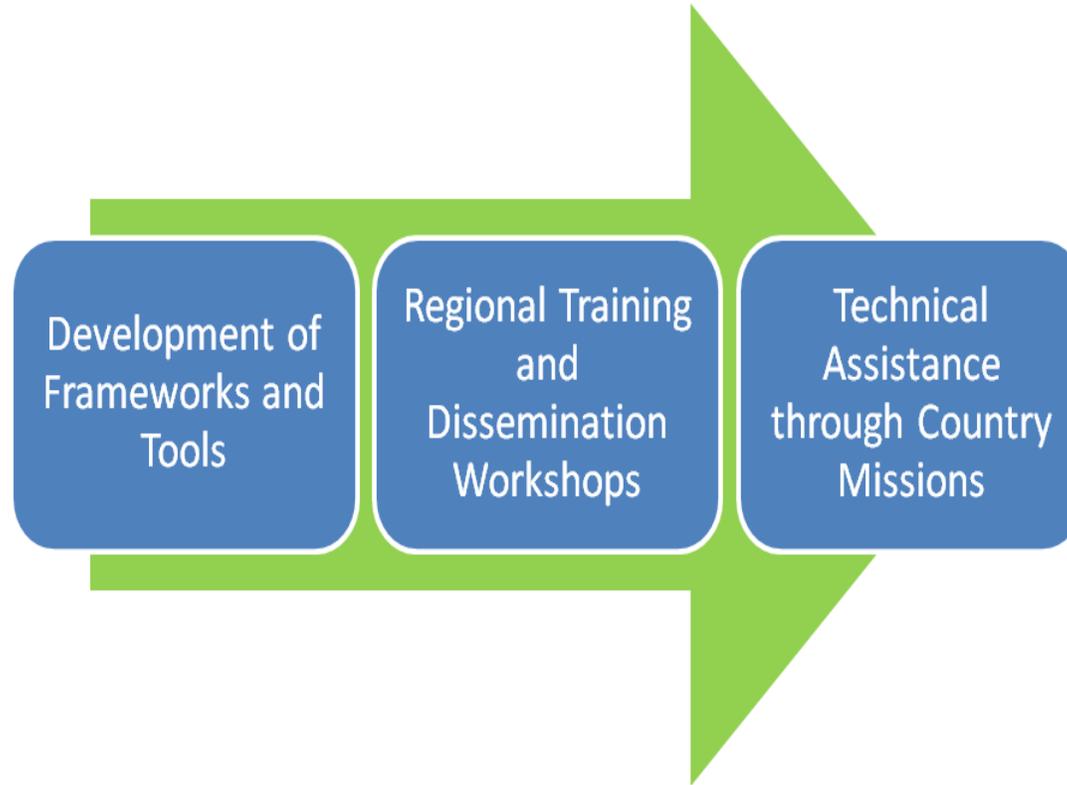
## THE NATURE OF THE SH-CAPAC PROJECT ( III)

- Significant **engagement and support from Member States** and from the International community is of the essence .
- It is critical to **support and build capacity** of the EU Member States to respond to the challenge of increased migratory pressure and refugees and asylum seekers influx
- The project has a **predominantly regional approach** developing tools and instruments, convening multi-country workshops to disseminate them and promote the engagement of Member States
- It has also a small component of **individual technical support missions to EU Member States** who are willing to receive the project support

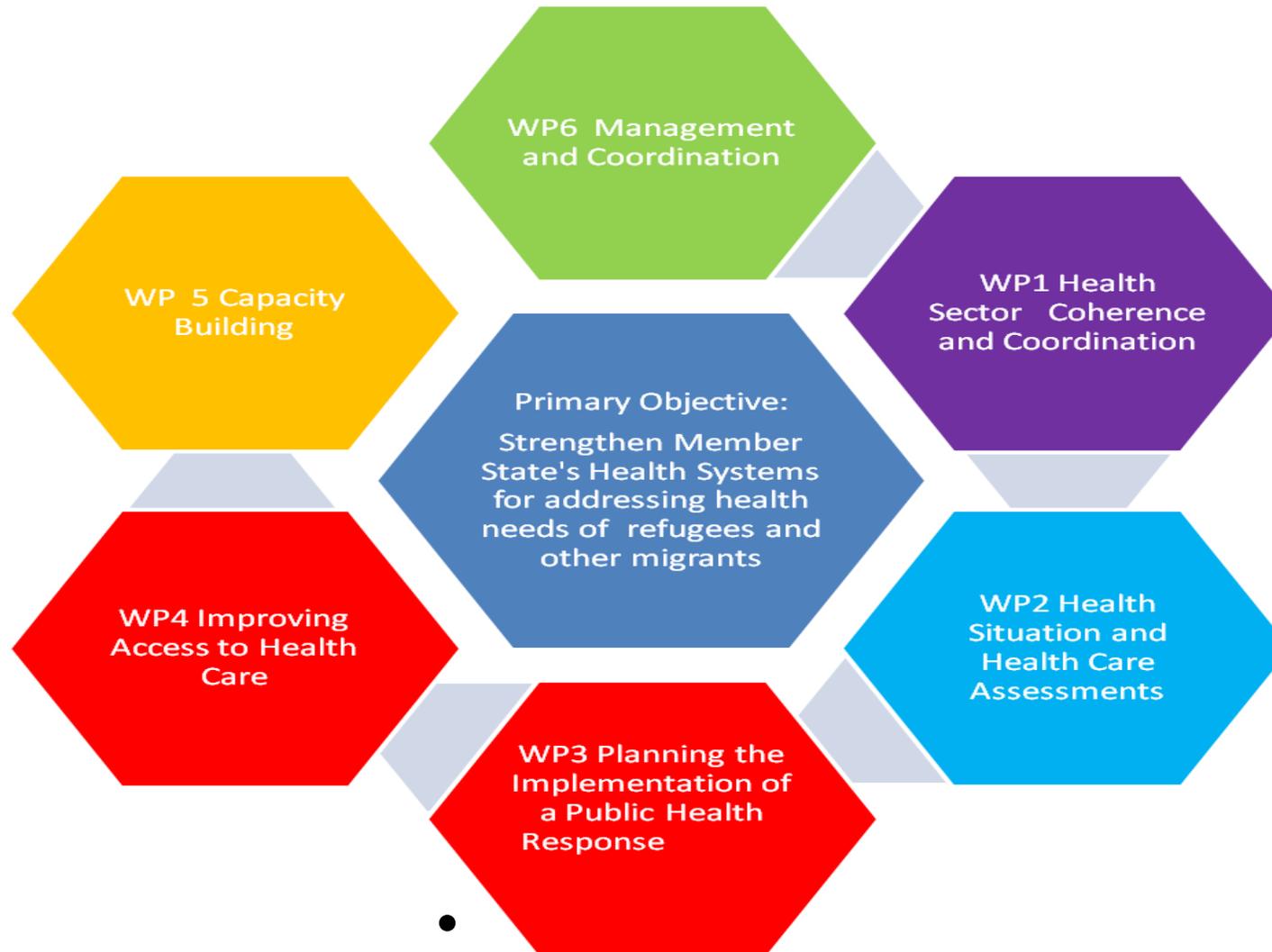
# TARGETCOUNTRIES

Austria	Belgium	Bulgaria	Croatia	Denmark	France
Germany	Greece	Hungary	Italy	Malta	Netherlands
Poland	Portugal	Roumania	Slovakia	Slovenia	Spain
Sweden					

# LOGIC OF THE PROJECT



# INTERRELATEDNESS OF THE WORK PACKAGES



# BENEFICIARIES

## Final

- **Registered and unregistered refugees, asylum seekers and other migrants** (currently 1,000,000 possibly rising to 2 million or more at the end of 2016) entering the European Union as a consequence of conflict, violence, or persecution in origin countries (mainly but not exclusively from Syria, Afghanistan and Iraq).as well as other migrants who are fleeing other kinds of hardship (poverty, climate change,,.) consequences of adverse life in “failed States”.

## Direct

- **National and regional health authorities** of health systems of each EU Member State faced with the challenge of providing a coordinated response to the current influx of refugee, asylum seekers and other migrant’s population, entering the EU space temporarily or permanently.
- **The health workers** of health districts, local health systems, community health centres and local hospitals in government institutions, NGOs and Red Crescent facilities, who are responsible for the provision of health services, the organisation and management of public health interventions, and the conduct of health assessments in connection with the refugee, asylum seekers and other migrants’ population.

# METHODS AND MEANS

- ❖ Developing of **tools and instruments** (division of labour among the members of the consortium):
- ❖ Carrying out **regional advocacy and capacity building activities** (seminars and workshops), with the relevant stakeholders from the target countries.
- ❖ Conducting **missions/site visits** to those target countries, which are interested in receiving technical assistance from the consortium, to develop country specific activities within the scope of the project,
- ❖ **Coordinate** with
  - the national health authorities as well as with other relevant national stakeholders (i.e. Red Cross and NGOs) involved in responding to the health needs of the refugee population,
  - the international organizations involved in the target countries, especially WHO, IOM, UNHCR, OCHA, IFRC and the EC
  - other grantees under this call for optimisation and coordination of resources and impact.

# MILESTONES OF THE PROJECT

- Start date: January 1<sup>st</sup> 2016
- Kick off meeting of the project January 2016. Granada, Spain
- Back to back meeting with key international stakeholders (as well in Granada, Spain in January 2016)
- Mapping of the Response to the Health Needs of Refugees, Asylum Seekers and Other Migrants in the 19 EU Target Member States in January and February 2016
- Regional meeting with the presence of representatives of EU Member States on the need for a health coordination framework in Ghent, Belgium on February 2016

## MILESTONES OF THE PROJECT (2)

- Internal Consortium Meeting for coordinating the different work packages in Trnava, Slovakia in April 2016
- Regional workshop on health needs assessments and planning health interventions in response to the migratory influx in May 2016 in Copenhagen
- Regional workshop on improving access to health care and defining a capacity building strategy for the health workforce in Reggio Emilia in June 2016
- Regional workshop for Adapting Training Strategy to National and Subnational Situations in Granada, Spain (15th and 16th September).
- Country Support Missions to Bulgaria in Sofia and Haskovo, June-July 2016 to the South Aegean Region in Greece, August-September 2016, to Barcelona in September 2016 and to Slovakia in October 2016

# UPCOMING ACTIVITIES

- Piloting on-line training modules on different aspects of the health response to refugees, asylum seekers and other migrants (October 20th to November 30th 2016).
- Evaluation of the online training tracks for health managers, health professionals and administrative staff (2016)
- Continuation of country support missions on the different streams of work of the project (October -December 2016)

# MAPPING THE RESPONSE TO THE HEALTH NEEDS OF REFUGEES, ASYLUM SEEKERS AND OTHER MIGRANTS

- Draft Country Profiles have been prepared by the SH-CAPAC Consortium for each of the 19 target countries of the project
- Information has been gathered through desk reviews and consultation of multiple sources
- Draft have been sent to national health authorities of all 19 Member states for review and validation
- A large number of Country Profiles have been reviewed by country officials and are available in final form
- A few more are still being reviewed by Member States
- A preliminary analysis of some of the major trends has been completed

# IMPLICATIONS OF THE MAPPING OF THE HEALTH RESPONSE

The mapping exercise has informed the development of a set of frameworks and tools which:

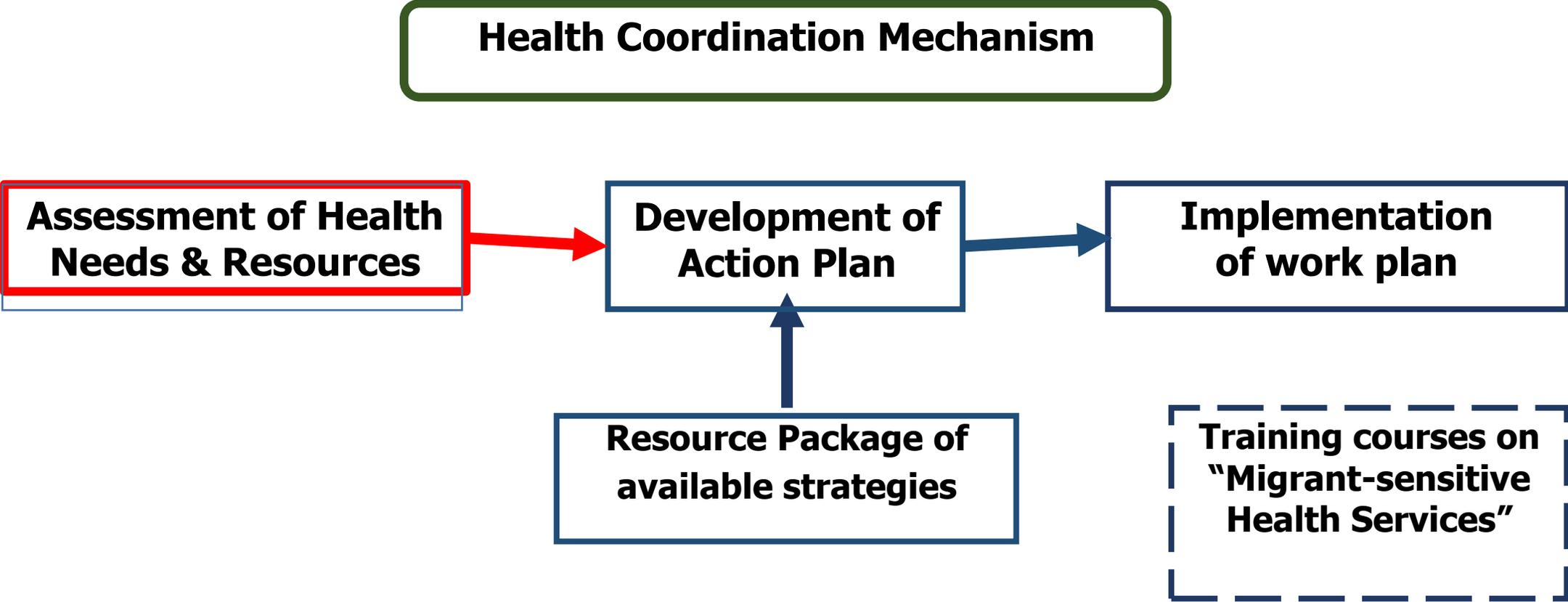
- address the need for a coordinated health response,
- help to conduct needs assessments,
- support the planning of appropriate actions,
- provide resource packages for increasing access to health care and
- training for improving the public health and health systems response and for more culturally-sensitive services.

These frameworks and tools are available and can be consulted and accessed as stand-alone guides, frameworks, resource packages and training materials produced by the SH-CAPAC project.

# THE APPROACH NEEDED

- A Public Health Approach
- A Health Systems Approach
- Relevance of Entitlements
- Importance of Continuity of Care
- Centrality of Access to Care
- Intercultural Considerations
- Coordination of multiple stakeholders
- **No** to dedicated, separate and second class services

# SH-CAPAC: Improving Health Services for Migrants



# EXPECTED OUTCOMES AT THE END OF 2016

Target countries that participate in the project :

- will have implemented a coordinated approach to organize the multi-stakeholder health sector response to the refugee influx in their territory
- will have comprehensive public health and health systems assessments of the situation of the impact of the migratory pressures and the response needed by the national health systems
- will have developed action plans for addressing the health needs of refugees, asylum seekers and other migrants.
- will have taken the necessary measures to improve access to health care and public health interventions for the refugees, asylum seekers and other migrants in their territories and health systems
- will have developed institutional capacity and workforce competence to provide migrant sensitive health services

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