

National coordination of the health care response to refugees, asylum seekers and other migrants: Working document



SLOVAKIA

READER'S GUIDE:

The SH-CAPAC consortium is conducting a mapping of the European Union Member States' health response to the refugees, asylum seekers and other migrants entering, transiting or staying in their territories.

This working document summarizes the latest information on the influx of the different categories (see box 1 on Country Context) and on the coordination of the health care responses (see box 2) in Slovakia. It also maps the available information on the WHERE-WHAT-WHO of these health care responses (see box 3). This is done for different categories: (1) recent arrivals, (2) people in transit, (3) asylum seekers, (4) refugee status granted persons, (5) undocumented migrants, and where relevant, also for (6) unaccompanied minors. Lastly we would like to map the funding sources for which the Member State's input is appreciated (see box 4 on Funding of health care responses).

The information already completed below is based on different sources which were consulted online between January 20 and February 8 2016 and which is meant to give a first snapshot. We would like to ask you to verify the information, to correct and amend where necessary and to complete where possible. This mapping exercise will help the SH-CAPAC consortium to define a framework for effective health sector coordination for addressing the needs of the refugees, asylum seekers and other migrants in the European Union. Please reply before February 16 2016 to ainhoa.ruiz.easp@juntadeandalucia.es with copy to birgit.kerstens@gmail.com and daniel.lopez.acuna.ext@juntadeandalucia.es. More information on the SH-CAPAC project can be found in the leaflet in attachment and on www.easp.es/sh-capac.

Sources consulted:

- http://www.unhcr.org/pages/4a02d9346.html
- UNHCR. Refugees/Migrants Emergency Response http://www.unhcr.org/cgi-bin/texis/vtx/page?page=49e48e016&submit=GO

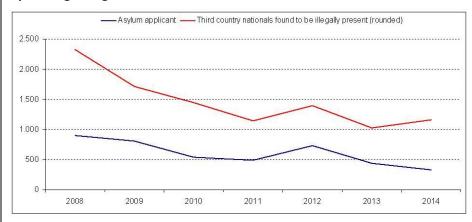
Please provide us with any other sources that you deem appropriate for your country.

1. COUNTRY CONTEXT

When influx started

(by year up till 2015, month since 2015)

Up till beginning of 2015: 2012



Source: Eurostat: 2/2/2016.

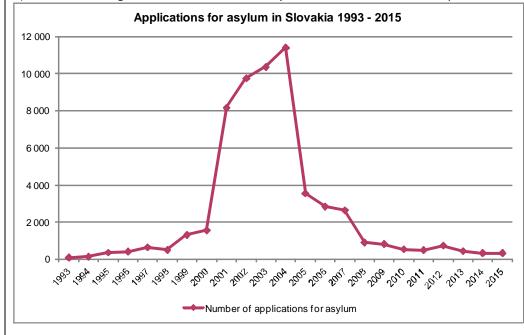
Since beginning of 2015: In the year 2015 there were 330 asylum seekers in Slovakia. An asylum has been granted to 8 people. The biggest number of migrants in Slovakia was recorded among years 2001 – 2005 with the highest peak in 2004, when total amount of the migrants were 11 395. The next years were: 2003 – 10 358 migrants, 2002 – 9 743 migrants, 2001 – 8 151 migrants and 2005 – 3 549 migrants. Statistic information about migrant flow is shown in the table and the picture below. This information describes migrants' trends in Slovakia from 1993 when the Slovak Republic was established as a sovereign country.1)

Year	Applications for asylum*	Asylum granted	Asylum denied	Citizenship granted
1993	96	41	20	0
1994	140	58	32	0
1995	359	80	57	0
1996	415	72	62	4
1997	645	69	84	14
1998	506	53	36	22
1999	1320	26	176	2
2000	1556	11	123	0
2001	8151	18	130	11
2002	9743	20	309	59
2003	10358	11	531	42

2004	11395	15	1592	20
2005	3549	25	827	2
2006	2849	8	861	5
2007	2642	14	1177	18
2008	909	22	416	4
2009	822	14	330	1
2010	541	15	180	3
2011	491	12	186	7
2012	732	32	334	0
2013	441	15	124	7
2014	331	14	197	12
2015	330	8	124	5
Total	58 321	653	7 908	238

^{*}Total number

1) Source: The Migrants Office of the Ministry of Interior of the Slovak Republic



Current number as of Feb 1 (AS/ REF/ UDM/

A. Most recent data per category:

unaccompanied minors)

Residing in Slovakia	June 2015
Refugees	799 (2014)
Asylum Seekers	61
Returned Refugees	0
Internally Displaced Persons (IDPs)	0
Returned IDPs	0
Stateless Persons	1,523
Various	48
Total Population of Concern	2,531
Originating from Slovakia	
Refugees	305
Asylum Seekers	498
Returned Refugees	0
Internally Displaced Persons (IDPs)	0
Returned IDPs	0
Various	0
Total Population of Concern	803

Source: http://www.unhcr.org/cgi-bin/texis/vtx/page?page=49e48e016&submit=GO

B. Most recent data on total number: Migrants flow in Slovakia in the year 2015

Month	Applications for asylum	Asylum granted	Asylum denied	Citizenship granted
February	12	1	9	0
March	36	3	20	0
April	10	1	15	0
May	23	0	5	0
Jun	12	1	19	0
July	13	0	6	0
August	8	0	12	0
September	10	1	7	2
October	14	1	8	0
November	15	0	6	0
December	161	0	5	3
Total	330	8	125	5

Percentage of F/M/T, age groups and origin

A. Most recent data per category: ?

ASYLUM APPLICANT	2014
Total	330
Males	78,8%
Females	21,2%
Less than 18 years	19,7%
18 - 64 years	80,3%
65 years or over	0,0%
Unaccompanied minors (Asylum applicant)	10
Males	100,0%
Females	0,0%
IRREGULAR MIGRANT	1.155
Males	74,0%
Females	26,0%
Less than 18 years	8,2%
18 years or over	91,8%

Source: Eurostat: 2/2/2016.

B. **Most recent data by gender, age group, origin**: Total number of migrants in Slovakia in December 2015 (origin, age, gender)

State of origin	0-	14	15-	17	18	-25	26-	-39	40	-49	50)+	То	tal
State of origin	М	F	М	F	М	F	М	F	M	F	М	F	M	F
Georgia											1		1	0
India					3								3	0
Iraqi	16	29	10	5	8	13	14	12	12	13	10	8	70	80
Pakistan			1				2						3	0
Turkey							1						1	0
Ukraine											1		1	0
Vietnam				2									0	2
Total	16	29	11	7	11	13	17	12	12	13	12	8	79	82

2. HEALTH CARE RESPONSES Please correct or complete the information where possible. Health care coordination at A. Existence of a national coordination mechanism of the health response: YES/NO national/regional level B. Explanation: Although, there is no official state regulation in the field of health care that has been laid by act only for the case of migrants' crisis or massive influx of migrants, the ministry of health initiated meeting with emergency health care providers and public health officers in the last September. The migrant crisis is understood as the one from public health threats. The aim of the meeting was to set up measures for emergency health care in the case of huge migrants' wave that might have come from Hungary. The measures for emergency care and transport of sick migrants have been set. In the field of public health has been prepared list of countries with high risk of contagious diseases, three local hospitals with isolation ward have been selected and vaccinations scheme has been supplemented on special vaccination routine in the migrants who don't have any vaccination certificate from mother country or international organisation (especially for children in with specific age clusters). The public health measures will be executed by GPs and public health authorities. The primary health care is provided in the migrants facilities that are governed by the Ministry of Interior. These facilities have First entry assistance services contracts with GPs who provide health care for local residents too. If there are serious life threatening conditions emergency care is provided under national regulations and standards in the same quality as for citizens. Expenditures for health care are refund from the state budget and the health insurance company does audit of the expenditures. All these measures are executed under the state regulation (act no. 480/2002). Response to 'An Agenda for Action' as agreed during the High Level Meeting on Refugee and Migrant Health in Rome in November 2015: Cross the appropriate 'Yes', 'No' or 'There is no information available' option in the blue boxes. Additional information or sources can be mentioned underneath the box. Integration of the health care services for refugees, asylum Yes seekers end migrants into the There is no information available Yes No existing national health systems Limit initial screening upon arrival to relevant risk assessment Yes (TBC, hepatitis B, HIV...) There is no information available Yes No **Non Communicable Diseases** included in the provision of services Yes There is no information available Yes No Active participation and empowerment of the refugees and No. official information available migrants throughout all stages of There is no information available Yes No health service provision, including design and planning **Training of health professionals** involved in the provision of health Yes, but very limited now care There is no information available Yes

3. WHERE-WHAT-WHO

Please correct or complete the information where possible.

Migrant group	WHERE are they receiving the health	WHAT type of health care provision are	WHO is the actor/agency providing the		
	care?	they receiving?	health care?		
(1) Recent arrivals	In the facility or in a hospital	GPs, emergency care if needed	GP, physician in the hospital		
(2) People in transit	In the facility or in a hospital	GPs, emergency care if needed	GP, physician in the hospital		
(3) Asylum seekers	In the facility or in a hospital	GPs, emergency care if needed	GP, physician in the hospital		
(4) Refugee status granted	In the facility or in a hospital	GPs, emergency care if needed	GP, physician in the hospital		
(5) Undocumented migrants	In the facility or in a hospital	GPs, emergency care if needed	GP, physician in the hospital		
(6) Unaccompanied minors	In the facility or in a hospital	GPs, emergency care if needed	GP, physician in the hospital		

4. FUNDING OF THE HEALTH CARE RESPONSES

Please provide us with any relevant information of funding made available by your country or other partners for health care responses:

- FUNDING SOURCES: where does the funding come from? e.g. Government, UN agency (UNHCR, IOM, WHO Euro,...), EU, NGO, civil society organisation, faith-based organisation, private organisation, international donor, (public/private) health insurance, other (please specify)
- FUNDING MECHANISM: how is the health care delivery being funded? e.g. envelope (for whole year/project), lump sum amount per asylum seeker/refugee, out-of-pocket expenses, third payer mechanism, emergency/contingency budget.
- FUNDING AMOUNT: Give the amount spent on health care responses, in Euros, per year/month; if available also provide the pledged amount.
- COMMENTS.

	COMMENTS.							
	Migrant group	Funding source	Funding mechanism	Funding amount	Comments			
(1)	Recent arrivals	State Budget	State budget pays expenditures for health care	No available				
			providers. The health insurance control payments.					
(2)	People in transit	State Budget	State budget pays expenditures for health care	No available				
			providers. The health insurance control payments.					
(3)	Asylum seekers	State Budget	State budget pays expenditures for health care	No available				
			providers. The health insurance control payments.					
(4)	Refugee status granted	State Budget	State budget pays expenditures for health care	No available				
			providers. The health insurance control payments.					
(5)	Undocumented migrants	State Budget	State budget pays expenditures for health care	No available				
			providers. The health insurance control payments.					