

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



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.

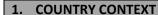
This working document summarizes the latest information on the influx of the different categories (see box 1 on Country Context) and on the coordination of the health care responses (see box 2) in Austria. It also maps the available information on the WHERE-WHAT-WHO of these health care responses (see 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:

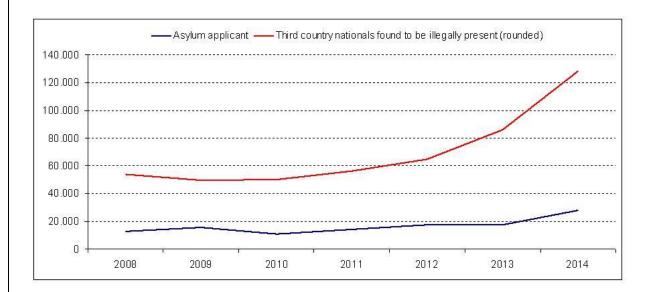
- http://www.unhcr.org/pages/4a02d9346.html
- UNHCR. Refugees/Migrants Emergency Response Mediterranean
- FRA, European Union Agency for Fundamental Rights. Monthly data collection on the current migration situation in the EU. December 2015 monthly report. 23 November 31 December 2015. http://fra.europa.eu/sites/default/files/fra_uploads/fra-2016-monthly-compilation-com-update-1_en.pdf

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

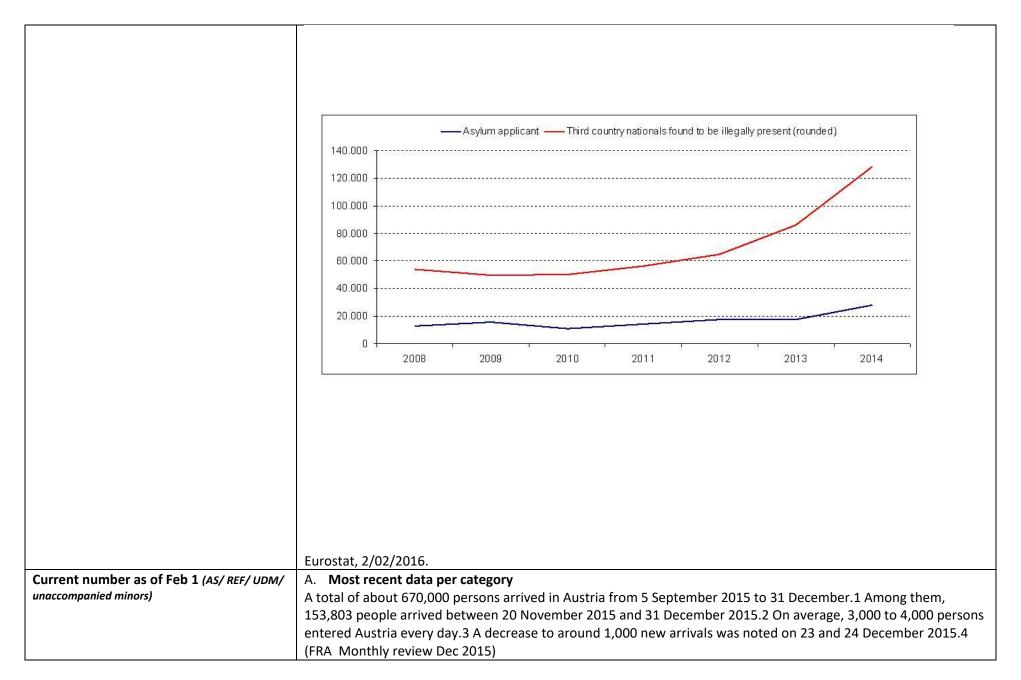


When influx started

(by year up till 2015, month since 2015)



Eurostat, 2/02/2016.



D . II	
Residing in Austria [1]	
Refugees [2]	60,747
	Refers to the end of 2014 in the absence of updated data available.
Asylum Seekers [3]	30,900
	Refers to the end of 2014 in the absence of updated data available.
Returned Refugees [4]	0
Internally Displaced Persons (IDPs) [5]	0
Returned IDPs [6]	0
Stateless Persons [7]	570
Various [8]	0
Total Population of Concern	92,217
Originating from Austria [1]	
Refugees [2]	9
Asylum Seekers [3]	12
Returned Refugees [4]	0
Internally Displaced Persons (IDPs) [5]	0
Returned IDPs [6]	0
Various [8]	0
Total Population of Concern	21

source: http://www.unhcr.org/cgi-bin/texis/vtx/page?page=49e48e256&submit=GO

B. Most recent data on total number:

After re-introduced border controls in EU countries, Austria announced on 20 January 2016 a cap on asylum-seekers and warned that it would take only 37,500 in 2016.

There were hopes that the relocation scheme would result in a more even distribution of asylum seekers across the 28 EU member states. Since the agreements by the European Council in September 2015 to relocate a total of 160,000 asylum seekers from the "front-line" states of Greece and Italy to other EU states over two years, only

414 asylum seekers have been relocated in the past four months.* Austria has recently suspended its participation in the relocation scheme.

*As of 25 January 2016: 14 to Belgium, 140 to Finland, 62 to France, 21 to Germany, 10 to Ireland, 4 to Lithuania, 30 to Luxembourg, 50 to Netherlands, 26 to Portugal, 18 to Spain and 39 to Sweden)

The Austrian Red Cross supports migrants each day at border crossings and major train stations with food, water, non-food items, and **emergency medical services**. The NS also manages transit shelters across the country as well as permanent and temporary facilities. Altogether, some 12,000 Red Cross volunteers and staff have been mobilized since 5 September 2015 (on average 80 staff members and 450 volunteers daily).

source: Information bulletin IFRC Regional Office for Europe Migration response. IFRC. http://www.ifrc.org/docs/Appeals/16/IB6 Migration%20response Europe 010216.pdf

IOM Austria reports that in 2014, the country received around 28,000 applications for international protection (asylum), a number that was reached this year by the end of June. Kratzmann said projections for this year (2015) are for 80,000 asylum applications. (**Posted:** 08/28/15 IOM-Austria http://www.iom.int/news/iom-latest-austrian-truck-tragedy)

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

A. Most recent data per category:

B. Most recent data by gender, age group, origin:

ASYLUM APPLICANT	2014
Total	28.035
Males	75,8%
Females	24,2%
Less than 18 years	30,2%
18 - 64 years	69,3%
65 years or over	0,5%
Unaccompanied minors (Asylum applicant)	1.975
Males	95,2%

Females	4,8%
IRREGULAR MIGRANT	33.055
Males	81,4%
Females	18,6%
Less than 18 years	21,4%
18 years or over	78,6%

Source: Eurostat, 02.02.16

The new arrivals still come mainly from Afghanistan, Syria, and Iraq.7 Caritas Styria reported a rising number of people from Pakistan and Northern Africa (Maghreb).8

On average, 250 to 350 asylum applications are filed in Austria every day.10 Persons applying for asylum mainly come from Afghanistan, Syria, Iraq and Iran.11 In November the portion of those requesting asylum in Austria increased considerably with some 20 % of arrivals lodging an asylum claim in Salzburg – in particular, Iraqis, Iranians and Afghans.

(FRA Monthly review Dec 2015)

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 : (if yes, please describe how the mechanism works and who participates; if no, please describe why there is no coordination)			
	Coordination)			
	The changed constitution, which entered into force on 1 October 2015, has allowed the federal state to set up 3,000 additional reception places without the permission of local mayors.29 The federal government repeatedly made use of the new possibility to establish accommodation facilities in the municipalities (<i>Durchgriffsrecht</i>).30 At the end of November, 1,138 of 2,100 Austrian municipalities were housing asylum seekers. This is a considerable increase compared to only 683 municipalities in June.31 Providing shelter to asylum seekers and people in transit continues to be the main challenge in Austria,32 with overstretched reception and accommodation facilities. There are not enough places for asylum seekers.33 More than 4,000 asylum seekers are not taken over by the provinces – which are responsible for the reception of asylum seekers – and they are thus blocking the capacities in the transit quarters.34 About 2,500 of these 4,000 asylum seekers are unaccompanied children.35 (FRA Monthly review dec 2015)			
First entry assistance services				
		100' 111. 10 1	2045	
	eed during the High Level Meeting on Refuge no information available' option in the blue l			
Integration of the health care services	no injormation available option in the blue t	ooxes. Additional injormation of sources can b	be mentioned underneuth the box.	
for refugees, asylum seekers end		w.		
migrants into the existing national	<u> </u>	X	There is no	
health systems	Yes	No	information available	
Limit initial screening upon arrival to			oavailable	
relevant risk assessment				
	Yes	No	There is no	
	163	INO	information available	

Non Communicable Diseases included in the provision of services			
	Yes	No	There is no information available
Active participation and empowerment of the refugees and migrants throughout all stages of health service provision, including design and planning	Yes	No	There is no information available
Training of health professionals involved in the provision of health care	Yes	No	There is no information available

3. WHERE-WHAT-WHO	3. WHERE-WHAT-WHO			
Please correct or complete the information	Please correct or complete the information where possible.			
Migrant group	WHERE are they receiving the health care?	WHAT type of health care provision are they receiving?	WHO is the actor/agency providing the health care?	
(1) Recent arrivals				
(2) People in transit				
(3) Asylum seekers		Asylum seekers receiving basic care (Grundversorgung) also have health insurance and may seek medical advice at any medical doctor or hospital.58 (FRA Monthly Report DEc 2015)		
(4) Refugee status granted				
(5) Undocumented migrants		The Federal State carries out special training on child protection to ensure that due attention is given to the best interests of the child in basic care facilities (Grundversorgung).50 (FRA Monthly Report DEc 2015)		
		Since September 2015, IOM Austria offers legal guardians of UMC in Austria the possibility to conduct a family assessment		

Migrant group	WHERE are they receiving the health care?	WHAT type of health care provision are they receiving?	WHO is the actor/agency providing the health care?
		in the minors' country of origin. IOM can collect current information on the minor's family, their socio-economic situation and living conditions as well as access to education and health care. A family assessment can only be carried out at the request of a legal guardian and the minor and its results remain confidential. In case voluntary return is in the best interest of the child, IOM can ar- 2 range the UMC's return in accordance with IOM standards.	
(6) Unaccompanied minors			

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.

Migrant group	Funding source	Funding mechanism	Funding amount	Comments
(1) Recent arrivals				
(2) People in transit				
(3) Asylum seekers				
(4) Refugee status granted				
(5) Undocumented migrants				