



Programme co-funded by the  
EUROPEAN UNION

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



### 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 Spain. 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](mailto:ainhoa.ruiz.easp@juntadeandalucia.es) with copy to [birgit.kerstens@gmail.com](mailto:birgit.kerstens@gmail.com) and [daniel.lopez.acuna.ext@juntadeandalucia.es](mailto: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](http://www.easp.es/sh-capac).*

### Sources consulted:

Eurostat, 2/02/2016.

MdM, Médecins du Monde. 8 NGOs for migrants/refugees' health in 11 countries. Project 717307. Annex I (part B), 2016.

UNHCR. Refugees/Migrants Emergency Response - Mediterranean

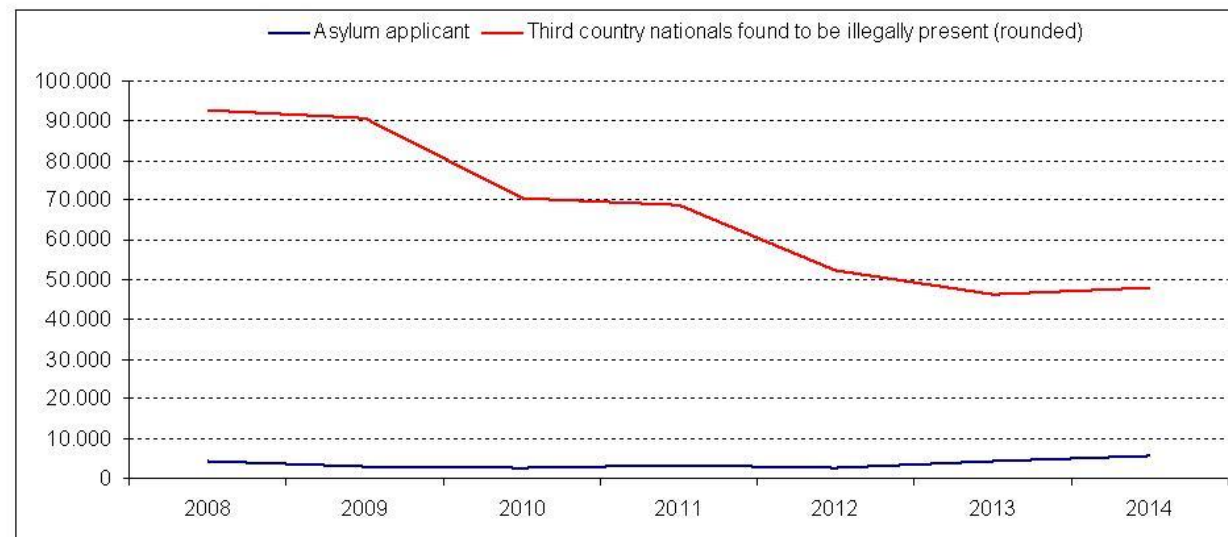
<http://data.unhcr.org/mediterranean/regional.php> / <http://www.unhcr.org/pages/4a02d9346.html>

<http://www.unhcr.org/cgi-bin/texis/vtx/page?page=49e48eed6&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)*



	<p>Eurostat, 2/02/2016.</p> <p><i>(please complete or correct)</i></p>
<p><b>Current number as of Feb 1 (AS/ REF/ UDM/ unaccompanied minors)</b></p>	<p><b>A. Most recent data per category</b></p> <p>June 2015 Residing in Spain:</p> <p>Refugees: 5,798</p> <p>Asylum Seekers: 11,020</p> <p>Returned Refugees: 0</p> <p>Internally Displaced Persons (IDPs): 0</p> <p>Returned IDPs: 0</p> <p>Stateless Persons: 440</p> <p>Various: 0</p> <p>Total Population of Concern: 17,258</p> <p>Originating from Spain R</p> <p>Refugees: 60</p> <p>Asylum Seekers: 87</p> <p>Returned Refugees: 0</p> <p>Internally Displaced Persons (IDPs): 0</p> <p>Returned IDPs: 0</p> <p>Various: 0</p> <p>Total Population of Concern: 147.</p> <p>(Source: <a href="http://www.unhcr.org/cgi-bin/texis/vtx/page?page=49e48eed6&amp;submit=GO">http://www.unhcr.org/cgi-bin/texis/vtx/page?page=49e48eed6&amp;submit=GO</a>)</p> <p><b>B. Most recent data on total number:</b></p> <p>Arrivals in 2015: 15,422</p> <p>source: <a href="http://data.unhcr.org/mediterranean/regional.php">http://data.unhcr.org/mediterranean/regional.php</a></p> <p>Following the Commission’s relocation scheme, Spain accepted to welcome about 17,680 refugees mainly from Syria and other war and conflicts countries, thereby making it one of the countries accepting the highest number of refugees after Germany and France. Spain has already received 2,797 migrants arriving from Ceuta, Melilla and in</p>

	<p>the Canaries. At least the same number of arrivals are expected in 2016. (UNHCR data on 11 November 2015, <a href="http://data.unhcr.org/mediterranean/regional.php">http://data.unhcr.org/mediterranean/regional.php</a>, MdM, Annex 1)</p>
<p><b>Percentage of F/M/T, age groups and origin</b></p>	<p><b>A. Most recent data per category:</b></p> <p>Data based on figures from the Spanish Ministry of the Interior and the Spanish Police. Arrivals to the Canary Islands have been excluded from this analysis, as they are not part of the Mediterranean refugee movement. Land arrivals to the enclaves of Ceuta and Melilla are included. (Source: <a href="http://data.unhcr.org/mediterranean/regional.php">http://data.unhcr.org/mediterranean/regional.php</a>)</p> <p>A year ago, about half of the residents of the Center for Temporary Stay of Immigrants (CETI) in Melilla were Sub Saharan Africans, but now they predominantly come from Syria. Moroccan border police has been making it increasingly difficult for Sub Saharan African migrants to seek asylum, making them more vulnerable to local trafficking networks. (MdM, Annex 1)</p> <p><b>B. Most recent data by gender, age group, origin:</b></p> <p>Syria: 44%  Guinea Conakry: 13,6%  Algeria 10,6%  Morocco 5,7%  Cameroon 5,0%  Côte d'Ivoire 4,5%  Occupied palestinian Territory 3,7%  Burkina Faso 2,0%  Gambia 1,6%  Guinea Bissau 11%  Other countries of top 7 nationalities 0,7%.</p>

Eurostat, 2/02/2016

<b>ASYLUM APPLICANT</b>	<b>2014</b>
<b>Total</b>	5.615
Males	68,2%
Females	31,8%
Less than 18 years	20,4%
18 - 64 years	78,3%
65 years or over	1,3%
<b>Unaccompanied minors (Asylum applicant)</b>	15
Males	100,0%
Females	0,0%
<b>IRREGULAR MIGRANT</b>	47.685
Males	81,1%
Females	18,9%
Less than 18 years	2,5%
18 years or over	97,5%

2. HEALTH CARE RESPONSES			
<i>Please correct or complete the information where possible.</i>			
<b>Health care coordination at national/regional level</b>	<p>A. <b>Existence of a national coordination mechanism of the health response:</b> YES/NO (<i>Please complete</i>)</p> <p>B. <b>Explanation:</b> (<i>if yes, please describe how the mechanism works and who participates; if no, please describe why there is no coordination</i>)</p> <p>In Spain there are 18 Administrative Regional Governments, each one of them autonomous in terms of a number of social competencies (Social Services, Education, Health, etc.). MdM Spain develops its work through programmes carried out in 12 out of the existing 18 Autonomous Communities. Some of those programmes through our own offices, and others implemented without a physical office. The local delegations of MdM Spain have been preparing with different local and regional public administrations, as well as with recipient organizations of refugees (Comisión Española de Ayuda al Refugiado or CEAR, Spanish Red Cross and ACCEM), strategies to host, support and assist these groups, expected to arrive in the coming weeks. (Mdm, Annex 1)</p> <p><b>The Spanish Red Cross</b> is working to increase the hosting capacity in preparation of the vulnerable migrants to be resettled in the country. The Red Cross is also actively supporting main arrival and transit countries (12 interventions in six countries) including shipments of medicines, raincoats, hygiene kits, mobile units, and kits for psychosocial support.</p>		
<b>First entry assistance services</b>			
Response to 'An Agenda for Action' as agreed during the High Level Meeting on Refugee and Migrant Health in Rome in November 2015:			
<i>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.</i>			
<b>Integration of the health care services for refugees, asylum seekers and migrants into the existing national health systems</b>	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> <b>x</b> No	<input type="checkbox"/> There is no information available
<b>Limit initial screening upon arrival to relevant risk assessment</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> There is no information available
<b>Non Communicable Diseases included in the provision of services</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> There is no

			information available
<b>Active participation and empowerment of the refugees and migrants throughout all stages of health service provision, including design and planning</b>	<input type="text"/> Yes	<input type="text"/> No	<input type="text"/> There is no information available
<b>Training of health professionals involved in the provision of health care</b>	<input type="text"/> Yes	<input type="text"/> No	<input type="text"/> There is no information available

<b>3. WHERE-WHAT-WHO</b>			
<i>Please correct or complete the information where possible.</i>			
<b>Migrant group</b>	<b>WHERE are they receiving the health care?</b>	<b>WHAT type of health care provision are they receiving?</b>	<b>WHO is the actor/agency providing the health care?</b>
<b>(1) Recent arrivals</b>	The Red Cross is also actively supporting main arrival and transit countries (12 interventions in six countries) including shipments of medicines, raincoats, hygiene kits, mobile units, and kits for psychosocial support.	shipments of medicines, raincoats, hygiene kits, mobile units, and kits for psychosocial support.	Spanish Red Cross
<b>(2) People in transit</b>			
<b>(3) Asylum seekers</b>			
<b>(4) Refugee status granted</b>			
<b>(5) Undocumented migrants</b>			
<b>(6) Unaccompanied minors</b>			

<b>4. FUNDING OF THE HEALTH CARE RESPONSES</b>
<i>Please provide us with any relevant information of funding made available by your country or other partners for health care responses:</i>
<ul style="list-style-type: none"> <li><i>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)</i></li> </ul>

- *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.*

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