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BUILDING IN MEMBER STATES UNDER PARTICULAR MIGRATORY PRESSURE
717275/SH-CAPAC

Guidelines for trainees

Module 1. Refugees and migrants' health policies



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Module 1. Refugees and migrants' health policies

Module 1 contains four units. The estimated time required for each unit is 60 minutes, including contents and the compulsory activities.

The following sections provide the details of the learning objectives and activities for each unit. A work plan for navigating the unit is suggested as well.

Unit 1: The challenges of the health response to refugees, asylum seekers and other migrants and the nature of the recent migratory influx.

This unit has been prepared by Daniel Lopez-Acuna (Andalusian School of Public Health). It is based on an SH-CAPAC document, produced by Ines Keygnaert, Birgit Kerstens (International Center for Reproductive Health, University of Ghent), Jacqueline Gernay and Daniel Lopez-Acuna (Andalusian School of Public Health), and on the mapping of the health response to the recent migratory influx conducted in 19 EU countries as part of the initial activities of the SH-CAPAC project. It covers three topics, including three compulsory activities, and some optional readings.

- Topic A – Major trends of the recent migratory influx into the EU.
- Topic B – The nature of the current health response to the recent migratory influx.
- Topic C – The challenges of the health response to refugees, asylum seekers and other migrants and the need for a public health and health systems approach.

1. Learning objectives

1. To familiarise the participants with the major trends characterizing the recent massive migratory influx into the EU, to understand its magnitude and dynamic, and to contextualize the issue within the wider perspective of forced displacement in the world.
2. To take stock of empirical information on how EU countries are responding in the field of health to this massive influx and to provide a framework for understanding the differential response by country and by type of migrant population.
3. To reflect critically on the main challenges associated to the health response to refugees, asylum seekers and other migrants. To discuss the need for a public health and health systems approach.

2. Learning activities

COMPULSORY ACTIVITY 1: Reading the power point presentation on the challenges of the health response to refugees, asylum seekers and other migrants and the nature of the recent migratory influx (Reading 1). Reading as well the SH-CAPAC “Umbrella document” which characterizes the salient aspects of the current health response in the EU countries (Reading 2).

Description: Participants read these two documents encompassing the three topics covered in this unit.

COMPULSORY ACTIVITY 2: Reflecting on the different dimensions of the health response to the different scenarios of arrival, transit and destination as well as the vulnerable group of the stranded migrants.

Description: Participants answers a set of questions to demonstrate understanding of the concepts explained in the readings indicated in Compulsory Activity 1.

COMPULSORY ACTIVITY 3: Discussion: *Is there one single type of health response to the recent migratory influx into the EU?*

Which are the main health priorities of these vulnerable groups that ought to be addressed from a public health and health systems perspective?

Description: Participants post at least one contribution on these questions to the discussion forum.

3. Work planning suggested

Time	Objectives	Content
30 minutes	To familiarise the participants with the major trends characterizing the recent massive migratory influx into the EU, to understand its magnitude and dynamic, and to contextualize the issue within the wider perspective of forced displacement in the world. To take stock of empirical information on how EU countries are responding in the field of health to this massive influx and to provide a framework for understanding the differential response by country and by type of migrant population.	CA1: Reading 1 and 2
10 minutes	To reflect critically on the main challenges associated to the health response to refugees, asylum seekers and other migrants. To discuss the need for a public health and health systems approach.	CA2: Answering key questions
20 minutes	To introduce questions for reflection and/or discussion online: Is there one single type of health response to the recent migratory influx into the EU? Which are the main health priorities of these vulnerable groups that ought to be addressed from a public health and health systems perspective?	CA3: Discussion in online forum

4. Complementary activities

Recommended readings

World Health Organization. Regional Office for Europe. *Strategy and action plan for refugee and migrant health in the WHO European Region*. Regional Committee for Europe .66th Session. Copenhagen, Denmark 12-15 September 2016.

European Commission. Humanitarian Aid and Civil protection. *Refugees and internally displaced persons*. ECHO factsheets. Brussels. June 2015.

ACAPS. *European Asylum-Seeker Crisis: Scenarios. Possible developments in transit countries over the next 6-9 months*. <http://www.acaps.org> 4 November 2015.

SH-CAPAC. Mapping of the health response to the recent refugee influx into the EU. <http://www.easp.es/sh-capac/> March 2016.

Unit 2: Health policies and provision of health services in the EU.

This unit has been prepared by: David Ingleby, Allan Krasnik and Mette Tørslev (University of Copenhagen, Faculty of Health and Medical Sciences). It is structured on three topics, including three compulsory activities and three optional ones. Optional readings recommended readings are recommended.

- Topic A – Framework for analysing health policies affecting migrants
- Topic B – Overview of policies in Europe
- Topic C – International bodies: human rights, legal instruments, standards and recommendations

1. Learning objectives

1. To make acquaintance with a framework for analysing the policies governing service delivery which can make health services either “migrant-friendly” or inequitable. Different ways in which barriers to access can arise and services may need to be made more responsive to the needs of migrants.
2. To use this framework to explore policies on migrant health in Europe, distinguishing between policies applying to migrant workers, asylum seekers and undocumented migrants. The different policies that may apply in different phases of a refugee’s trajectory will be identified.
3. To understand how international bodies (at global and European levels) have tried to influence policies on migrant health. What are the possibilities and limitations of these standards, recommendations and human rights conventions?
4. To reflect critically on the gap between international standards and national policies affecting refugees and other migrants, the obstacles this gap creates to providing good care, and what can be done to overcome these.

Specific concerns for different profiles of course participants:

Health professionals need to be aware of the limitations and obligations that policies impose on them. They will not be in a position to get the policies changed, except through advocacy and lobbying – but they can ensure that they take good account of them in their work (for example, by trying to find solutions for patients who lack adequate coverage for health care).

Managers: if they are sufficiently senior, may be in a position to change policies; those less senior can learn to implement existing policies in a way that makes them more responsive to migrants’ needs. For example, in countries where there is a policy to provide interpreters where needed, a manager must ensure that there is an efficient system for deploying them and for training professionals to work with them. The extra time needed for such consultations should be allowed for. If there is no policy to provide interpreters, the manager can take whatever measures can be devised to alleviate the problem (e.g. by recruiting bilingual staff).

Administrative staff need to know the entitlements and rights of patients in order to make correct decisions and give accurate information to the patients and health workers.

2. Learning activities

COMPULSORY ACTIVITY 1: *Reading activity.* Study the Basic Reading for the three topics, as well as the following reading:

Condensed version of Sections 1C and 1D from IOM (2016), *Summary Report on the MIPEX Health Strand & Country Reports*. Brussels: International Organization for Migration (IOM) Regional Office Brussels, Migration Health Division (MHD) (mainly relevant to Topic A).

COMPULSORY ACTIVITY 2: *Reflection and discussion activity.* Describe ways in which an individual health worker needs support from their organisation in order to work in a “migrant-friendly” way. Post your reflections in the on-line discussion forum while consulting other participants’ posts.

What are the common experiences in relation to organisational support for “migrant-friendly” working?

COMPULSORY ACTIVITY 3: *Reflection and discussion activity.* Make a discussion entry (or engage in an established discussion) in the online discussion forum. Here you will discuss the different roles of actors involved in policy making and implementation, affecting the health service provision for migrants in your country. Reflect on the different institutions and agents involved (local, national and international):

What powers do they have and what do they prescribe? Why is the gap between ideals and reality so wide?

What effect does it have on your work with health provision for migrants?

3. Work planning suggested

Time*	Objectives	Content
20 minutes	To describe the main dimensions of policies on service delivery that can help or hinder migrants needing health care: entitlement, accessibility, responsiveness and supporting measures.	CA1: Reading Topic A and the IOM (2016) reading. CA2: Answering key questions
		<i>Optional activity 1: Writing case examples from own work experience</i>
15 minutes	To describe policies applying in European countries to migrant workers, asylum seekers and undocumented migrants. Presentation of the main inequities found in the MIPEX report. Relevance to different phases of migration.	CA1: Reading Topic B
		<i>Optional activity 2: Reflect on your country's MIPEX scores</i>
15 minutes	To describe the major international organisations and institutions involved in migrant health policy making and health services, including standards and recommendations put forward by these international bodies.	CA1: Reading Topic C
		<i>Optional activity 3: Reflect on role of international organisations in your country</i>
10 minutes	To introduce questions for reflection and/or discussion online Where are the main gaps between ideals and reality, how could they be bridged?	CA3: Discussion in online forum

* Optional activities require supplementary time (See section 4)

4. Complementary activities

Recommended readings

- Executive Summary and Section III from IOM (2016), Summary Report on the MIPEX Health Strand & Country Reports. Brussels: International Organization for Migration (IOM) Regional Office Brussels, Migration Health Division (MHD).

http://members.costadapt.eu/images/7/7e/MIPEX_august.pdf

- Chapter 3 from MEM-TP Synthesis Report (2015), Training packages for health professionals to improve access and quality of health services for migrants and ethnic minorities, including the Roma - Synthesis Report. European Commission.

http://www.mem-tp.org/pluginfile.php/1104/mod_resource/content/3/WP1%20Report.pdf

Optional activities

Optional activity 1: Illustrate, using case studies from your own experience, the various barriers to access that migrants can experience and the problems that arise from failure to adapt to their needs. Post your reflections in the online forum.

Time: 20 minutes

Optional activity 2: Look up your country's position on the map and the graph in the IOM (2016) Reading. *Does this reflect your experience of the policies in place? What factors do you think may have influenced these scores?*

Time: 20 minutes

Optional activity 3: Write down your ideas on the following questions:

- *How much influence on health policy do international organisations seem to have had in your country?*
- *What do you notice of their activities?*
- *Do you think legal compulsion or argument and persuasion are more likely to lead to change in your country?*

Post your reflections in the online forum and engage in discussion with other participants

Time: 30 minutes

Unit 3: Migrants in an irregular situation

This unit has been prepared by Amets Suess Schwend (Andalusian School of Public Health). It includes three compulsory activities, one presentation, one optional activity and four recommended readings (among them, one compulsory reading).

1. Learning Objectives

The unit aims at:

- Contributing a reflection on terminology use related to the topic.
- Learning about the current situation of access to health and health of migrants in an irregular situation in the European context.
- Identifying strategies and Best Practices examples for improving access to health care for migrants in an irregular situation.

2. Learning Activities

COMPULSORY ACTIVITY 1: Presentation on migrants in an irregular situation.

- **Method:** Watch a slide presentation.

COMPULSORY ACTIVITY 2: Reading on access to health care for migrants in an irregular situation in European Union Member States.

- **Method:** In the following document, read the chapter on health care, p. 71-84:
FRA, European Union Agency for Fundamental Rights. Fundamental Rights of Migrants in an Irregular Situation in the European Union. Luxembourg: Publications Office of the European Union, 2011a.
http://fra.europa.eu/sites/default/files/fra_uploads/1827-FRA_2011_Migrants_in_an_irregular_situation_EN.pdf (retrieved: August 9, 2016).

COMPULSORY ACTIVITY 3: Strategies for improving access to health care for migrants in an irregular situation.

- **Description:** Contribution in the online forum identifying strategies for improving access to health care for migrants in an irregular situation in your region / country.
- **Method:** Individual contributions to the online forum and discussion.

3. Work planning suggested

Time	Objetives	Content
20 minutes	<ul style="list-style-type: none"> • To introduce the concept “migrants in an irregular situation”. • To present recent comparative studies on the access to health and health of migrants in an irregular situation, including case studies and recommendations. 	Compulsory activity 1: Presentation
10 minutes	<ul style="list-style-type: none"> • To learn about the situation of access to health care for undocumented migrants in European Union Member States. 	Compulsory activity 2: European Union Agency for Fundamental Rights (2011) reading (p. 71-84).
30 minutes	<ul style="list-style-type: none"> • To identify strategies for improving access to health care for migrants in an irregular situation in the own region / country, and prioritize these strategies according to their perceived relevance. 	Compulsory activity 3: Uploading a post in the online forum identifying strategies for improving access to health care for migrants in an irregular situation.

4. Complementary activities

Recommended readings

- Phillips AL, Kumar D, Patel S, Arya M. Using text messages to improve patient-doctor communication among racial and ethnic minority adults: An innovative solution to increase influenza vaccinations. *Preventive Medicine* 2014;69:117-119.
- FRA, European Union Agency for Fundamental Rights. *Migrants in an Irregular Situation: Access to Health Care in 10 European Union Member States*. Luxembourg: Publications Office of the European Union, 2011b.
http://fra.europa.eu/sites/default/files/fra_uploads/1771-FRA-2011-fundamental-rights-for-irregular-migrants-healthcare_EN.pdf (retrieved: August 9, 2016).
- Médecins du Monde (Doctors of the World), Chauvin P, Mestre MC, Simonnot N. *Access to Health Care for Vulnerable Groups in the European Union in 2012. An Overview of the Condition of Persons Excluded from Health Care Systems in the EU*. Paris: Médecins du Monde, 2012.
http://www.doktersvandewereld.be/sites/www.doktersvandewereld.be/files/publicatie/attachments/eu_vulnerable_groups_2012_mdm.pdf (retrieved: August 9, 2016).
- Médecins du Monde (Doctors of the World), Chauvin D, Simonnot N, Vanbiervliet F, et al. *Access to Health Care in Europe in Times of Crisis and Rising Xenophobia: An Overview of the Situation of People Excluded from Health Care Systems*. Paris: Médecins du Monde, 2013.
http://b.3cdn.net/drofttheworld/d137240498b91ca33e_jhm62yig1.pdf (retrieved: August 9, 2016).

Optional activities

OPTIONAL ACTIVITY 1: Mapping intersectoral actions for facilitating access to health care for migrants in an irregular situation

- **Method:** Mapping technique.
- **Time:** 30 minutes.
- **Description:**
- Individual assignment: Draft a map describing an intersectoral action for facilitating access to health care for migrants in an irregular situation, in your own institutional, local, regional or national context, including:
 - Relevant stakeholders and resources
 - Existing interactions and barriers
 - Aspects and strategies for an ideal intersectoral coordination
- **Post in the online forum:** Upload the map indicating the most relevant aspects.

Evaluation activities

According to the piloting objectives of this course, you will be asked to complete some surveys and participate in other ways of collecting information about the learning process (Forum, private messaging, teleconferencing, etc.). For module 1, evaluation activities are:

- 1) At the beginning of module:
 - A prior self-assessment about the degree of knowledge regarding the course's objectives (**Knowledge pre test**).
- 2) At the end of module:
 - A self-assessment about the knowledge outcomes after the course (**Knowledge post test**).
 - A survey on quality, usability and usefulness of training materials (**Materials assessment**).