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Improving the health of migrants in Europe

*Check Against Delivery
Seul le texte prononcé fait foi
Es gilt das gesprochene Wort*

Portuguese Presidency Conference on 'Health and Migration'

Lisbon, 27 September

Minister, Ladies and Gentlemen,

It is most appropriate that we should be discussing health and migration here in this great port city of Lisbon where we are reminded of how the discoveries of Portuguese explorers were followed by migrations of Europeans to America and other parts of the world.

Today Portugal is an important destination for migrants coming to Europe from other continents.

Around 5% of the EU population was born in a third country and as many as one in 12 are living in a country different to the one in which they grew up.

Health is perhaps not the first issue that springs to mind when considering migration. However, migration has a significant impact on:

- the health of migrants themselves;
- on public health systems;
- and indeed on the health of the whole population.

I warmly applaud the Portuguese initiative to identify migration related issues as a priority for discussion and I would like to thank the Minister and his colleagues for all their hard work in preparing this conference and for bringing us all together here today.

Health and migration are closely interlinked. There are three key reasons why we need to pay more attention to the health aspects of migration.

First, because of our values.

The EU is founded on principles of solidarity, democracy, non-discrimination and respect for human rights. Health plays a major role by underpinning these principles.

We value health as a human right. Everyone coming to the European Union should benefit from a high level of protection of their health regardless of who they are or where they come from - be they highly skilled workers or professionals, asylum seekers, or people arriving without legal status.

Public policies must protect the health of everyone and not harm or compromise a person's health. Thus, tackling health inequalities represents a major challenge in the context of migration.

Second, the health of our population is critical to our economic performance. We need health policies that maximise the health and productivity of all of our population.

Migrants form an important part of our population, and they require policies tailored to their specific needs, just as other groups do.

Third, we need to recognise that while migrants tend to have a better level of health than the citizens in their country of origin, at the same time they are generally more vulnerable and exposed to diseases in the host country, while possibly carrying new diseases. This constitutes a major challenge in terms of health policy.

Therefore, in order to tackle domestic health challenges, we need to also bear in mind the health situation abroad and assist in fighting major diseases globally.

Some countries report two to three times the risk of serious mental health disorders; twice the level of chronic illnesses such as heart disease and diabetes; and 50% higher levels of infant mortality.

Infectious diseases are also a particular problem.

Sadly, it is clear that while part of the explanation for this situation relates to risks which migrants bring with them, many of the causes of poor health among migrants arise from the conditions in which they live **within the EU**.

Poor living conditions are associated with higher levels of infant mortality, infectious and chronic diseases.

Poor working conditions where health and safety laws are not respected, lead to higher accident rates.

Poorer access to health services results in higher levels of preventable illness, and poor social integration often provokes mental health problems.

I believe that a lot more can be done by the EU, the Member States and other parties, to address migrant health issues both domestically and through support abroad.

In doing so we would not only achieve better health for migrants but better health for the whole of our population because many of the health issues which migrants face are also common to other people.

Our ultimate objective is to achieve better health for all in an inclusive society.

In this sense, I would like to briefly mention some of the **actions** we are taking.

Because it is not possible to isolate the domestic health situation from the international health challenges, the actions at EU level tackle both the internal and the external dimensions. Both public health and migration are becoming more and more important components of the EU's external policies.

Public health is an important objective of development aid and a focus for programmes with European Neighbourhood Countries in Eastern Europe and North Africa.

These activities aim at strengthening public health infrastructure as part of overall economic development as well as at combating diseases related to poverty.

In the **new EU Health Strategy** – to be launched later this year – I intend to propose an expansion of our global activities on Public Health.

The **new Community Health Programme** (2008-2013) will also include improved opportunities for participation from third countries, particularly those in the European neighbourhood.

Border issues are another key area for action. Health is a key consideration in proposals brought forward by the Commission for managing the Union's borders.

In relation to the migration of health professionals the Commission intends to make a new proposal in 2008 in order to ensure that Member States and the Union as a whole can meet the objective of providing high-quality healthcare, without undermining health systems in developing countries.

As far as action regarding specific diseases is concerned, **tuberculosis (TB)** and especially "resistant" tuberculosis is of particular concern among migrants.

Of the 91 845 total TB cases notified in 2005 in the EU, 19% were observed in persons born outside the EU, or in non-EU citizens.

The Commission has invited the European Centre for Disease Prevention and Control (ECDC) to develop proposals for an **action plan to fight tuberculosis in the EU**.

Forging an effective response to TB will require cooperation between EU and national bodies, as well as with other international stakeholders and with neighbouring countries.

AIDS and HIV is another issue of great importance, especially as regards migrants coming from areas of high prevalence.

Of the estimated 700,000 cases of HIV/AIDS in the EU at the end of 2005, around 170,000 (24%) occurred in non-EU citizens or had originated in a non-EU country.

The **EU Strategy on HIV AIDS** has a particular focus on collaboration with European Neighbourhood countries and we have funded a number of projects related to prevention of HIV in high-risk migrant groups.

Strengthening and adapting health services is needed to address better the health needs of migrants.

One aspect of this is better information about the health of migrants. We recently agreed to fund a project on monitoring the health status of migrants within Europe and the development of indicators. Only on the basis of systematic information will policymakers throughout the EU be in a position to identify the most suitable actions.

We are also providing funding for a network looking at services for undocumented migrants.

We have agreed to support the development of interactive websites in 16 countries, containing information about individuals, organisations and resources dealing with migrant and minority health.

This work will also bring migrant and minority health stakeholders together, and stimulate the formation of networks of individuals and organisations.

Finally, as mentioned earlier, addressing migrants' health needs is a key aspect of the wider issue of addressing **equity in health**, which will be a fundamental principle underpinning actions in the new EU Health Strategy.

Ladies and Gentlemen,

I am very much looking forward to the discussions which will take place during this conference and to subsequent initiatives in this area.

I pledge my full support and commitment to actions to improve the health situation of migrants in Europe and to strive to reduce inequalities in health with the ultimate goal of better health for all in an inclusive society.

Thank you.