Recommendations for improving access to immunizations and exchanging data on vaccine preventable diseases

(included in the: EpiSouth Project - WP7 Strategic Documents “Vaccine Preventable Diseases and Migration Population in the Mediterranean Countries and Balkan”)
**Recommendations**

Guidelines on vaccine preventable diseases and migrant populations (general recommendations for improving the access to immunizations of migrant groups and easy VPD data exchange) could be produced in collaboration with the international organizations concerned with migration and VPD prevention (WHO, ECDC and IMO).

Based on a careful analysis of the data, obtained by the performed survey for vaccine preventable diseases and migrant population in the region, the Guidelines could be used for elaboration of National programmes for immunization and surveillance of VPD in migrants and other hard-to-reach population groups. These National programmes should also be adapted to the specific country’s characteristics, conditions and needs.

The Guidelines should be focused on the improvement of the immunization coverage and surveillance of VPD of migrants and other hard-to-reach population groups through various approaches, such as:

- Availability of an appropriate legislative framework for effective prevention and response to communicable diseases, included into the national public health law. The health prevention should be detached from immigration policy and the necessary measures should be undertaken to ensure that access to immunization of undocumented migrants is uniformly implemented by the national and local authorities. The medical confidentiality should guarantee that at least children up to 18 years of age can access the immunization services irrespectively of the migration status of their families.

- Political agreement for mobilization of alternative resources needed for additional incentives and combined multi-sectoral efforts for a common and coordinated national, sub-national and at local level approach to strengthen the immunisation programme at place.

- National team’s activities: planning, discussion and resource mobilization; involvement of the sub-national and local levels; partnership (important regional and national partners, involvement of the NGOs); taking every opportunity to advice on vaccination; vaccination programme for immigrants to be implement with short time of their arrival.

- Active involvement of minority/marginalised groups/associations (e.g. co-coordinators of medical care for Roma/Sinti communities) to address hard-to-reach populations; to ensure equal opportunities and access to health care and free vaccination for all migrants (regardless of residential status) and to address the language barrier.

- Research on public perception towards vaccination and on social factors influencing vaccination coverage as well reasons for non-vaccination.

- Raising the awareness of the general population and health care workers about the existing problems in the field of migrant’s immunizations and about the recognized need and right of every child to be protected against vaccine-preventable diseases; establishment of a framework for advocacy and communication at all country levels to raise awareness and join forces to mobilize resources for high immunization coverage of the general population and of the migrant population. Elaboration of a comprehensive communication strategy and further training of advocates in the field of immunization.

- Coordination at all levels (local, regional, central, European – WHO, ECDC) in case of significant decrease of the immunization coverage, that could lead to disease outbreaks and increased risk for all non-immunized individuals.
- Establishment of a network of experts on public health and migration as a basis for sharing of information on policies, successful vaccination strategies and best practices and for developing adequate actions that protect migrant’s health from communicable diseases; establishment of mechanisms for routine inter-country exchange of knowledge and experiences regarding immunization of the vulnerable population, including exchange of experts in the field; regular meetings on vaccination policy in order to enhance cooperation and to share information.

- Strengthening VPD surveillance (staff, education, laboratory capacity, outbreak investigations, and monitoring and evaluation systems). Appropriate outbreak investigations can help to define susceptible risk groups such as hard-to-reach-communities and immigrants, needing special attention, to identify the reasons for non-vaccination and to inform decision makers.

- Development of a national vaccination registers (information system for case-based data including vaccines given, batch numbers, dates of vaccination).

- Continuous stakeholder seminars, bringing together the concerned population, healthcare providers and authorities as a part of iterative consultations and meetings on vaccination policy in order to enhance cooperation and sharing of information on the best ways to increase/maintain the vaccination coverage.

- The public health services with its wide range of technical and organizational efficiency can play a key role, especially in the municipal sector, for an effective organization of immunizations for those who have difficulties in gaining access to the system, as well as for developing municipal networks, cooperating with a maximum number of medical service providers, organizations, and regarding specific migrant lifestyles.

- Methods and arrangements should make use of already existing resources of the health care system, but in some cases the acceptance of immunizations could be improved by direct cooperation with migrant communities and the organization of a flexible and economic complementary system, adapted to the needs of not optimally integrated immigrant populations and small ethnic groups (migrant or not).