

*Istituto Nazionale per la
Salute, i Migranti e la Povertà
Roma, Italia*



*National Institute for
Health, Migrants and Poverty
Rome, Italy*

INMP

THE ITALIAN NATIONAL INSTITUTE FOR HEALTH, MIGRANTS AND POVERTY (INMP)

**Aldo Morrone
Director General**

***National Institute for the promotion of migrants' health and the
control of poverty-related diseases, Rome - Italy***

THE ITALIAN NATIONAL INSTITUTE FOR HEALTH, MIGRANTS AND POVERTY (INMP)

- **INMP was established in Rome through Financial Bill for Year 2007 and began to function on 29 October 2007**
- **INMP consists of the new National Institute in Rome working with three Regional Centres in Lazio, Apulia and Sicily**
- **INMP will seek enlarged co-operation with all the Italian Regions.**



THE ITALIAN NATIONAL INSTITUTE FOR HEALTH, MIGRANTS AND POVERTY (INMP)

- **INMP builds on 25 years of research, training and clinical services experience at the Department of Preventive Medicine for Migrations, Tourism and Tropical Diseases of the S. Gallicano Institute (IRCCS) in Rome**



1722 -
*Chiesa ed Ospedale di S. Gallicano
1. Parte dello Spedale per gl' uomini, 2. Spedale per le donne, 3. Tribuna della Chiesa di S. Grisogono in Trastevere*



BENEDICTUS XIII.

P. O. M.

NEGLECTIS REJECTISQUE AB OMNIBVS
PRVRIGINE LEPRO ET SCABIE

IN CAPITE LABORANTIBVS CVRANDIS MORTISQUE
IMMATVRAE FAUCIBVS ERIPIENDIS

XENODOCHIVM HOC AMPLVM ET MOLE EXIMIVM
ANNVOQUE CENSV DITATVM

PAVPERVM PATER A FVNDAMENTIS EREXIT

ANNO SALVTIS MDCCXXV.

For over twenty five years we have been welcoming, examining and studying an extremely varied population consisting of:

Undocumented immigrants

Refugees and Asylum seekers

The homeless

Female victims of the prostitution trade

Abandoned children and adolescents

Roma

Retired poor people



Women and girls with FGM

Victims of torture

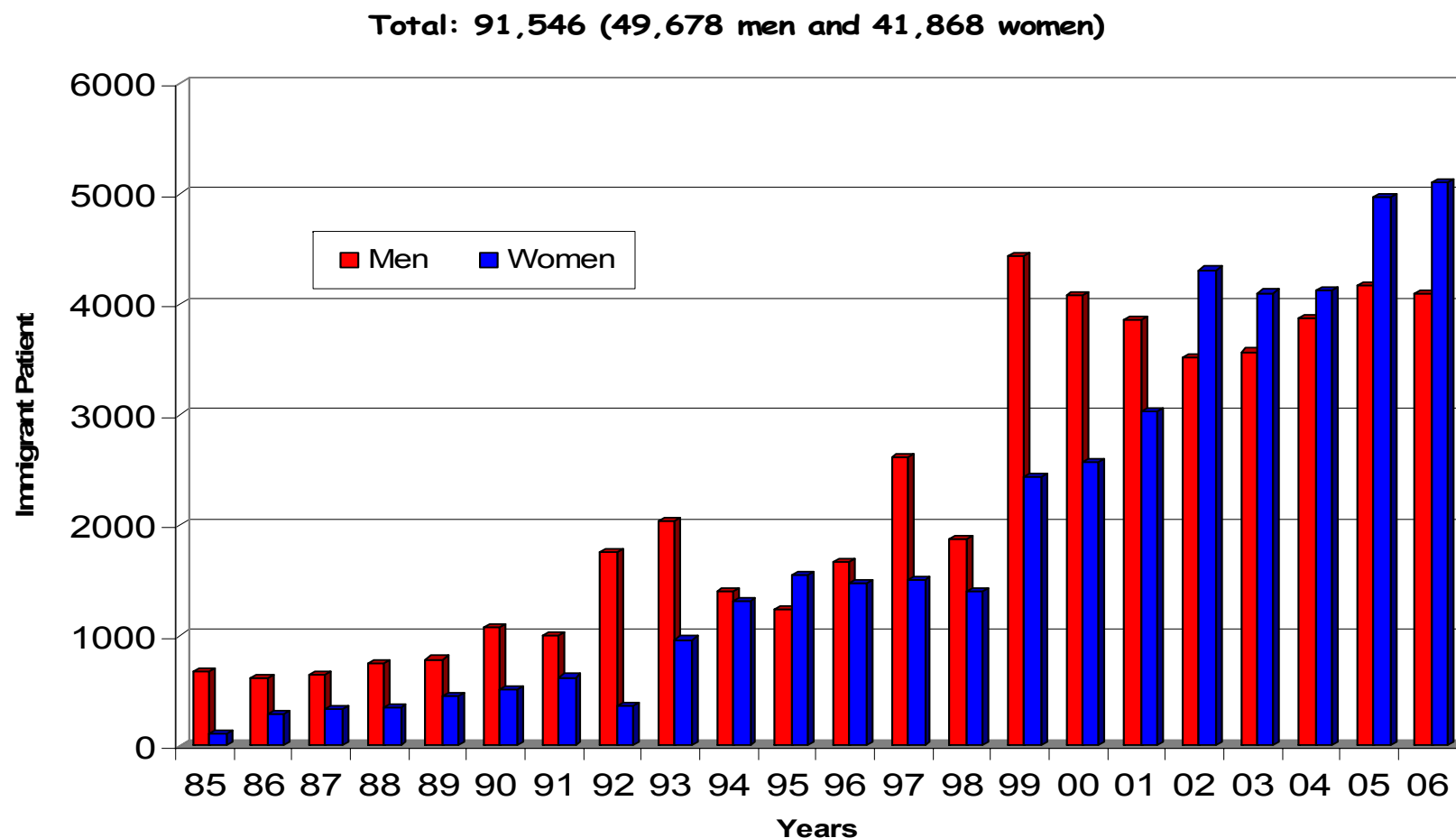
Dept. of Preventive Medicine of Migration, Tourism and Tropical Dermatology Istituto San Gallicano (IRCCS) Roma

- **28 doctors** (7 dermatologists, 6 physicians, 2 surgeon, 3 paediatricians, 2 gynaecologists, 3 psychiatrists, 2 dentists)
- **6 nurses**
- **4 psychologists**
- **1 semiologist**
- **6 biologists**
- **5 anthropologists**
- **4 social assistants**
- **35 cultural mediators**
- **2 Lawyers**





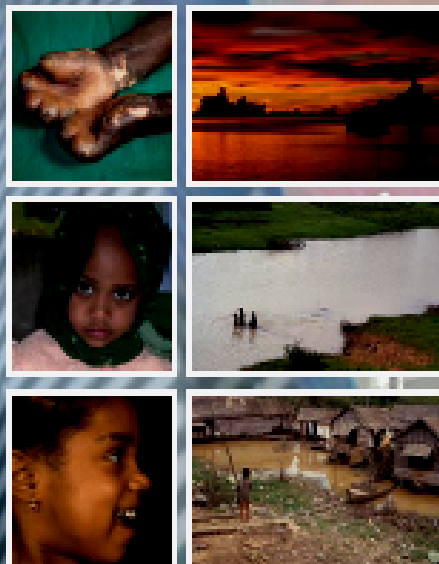
Migrant people observed from January 1985 to December 2006



until 31 December 2006

Aldo Morrone
Jana Hercogová Torello Lotti

Dermatology of Human Mobile Populations



The proceeds of the
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book will be donated to the
Non Governmental Organisation
"International Institute of Medical
Anthropology and a Medical Museum"
(IIMMAMM) for the realization of
medical research projects in favour of
the poorest populations in the
developing countries.

MNL

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A CARATTERE
SCIENTIFICO
DELL'ISTITUTO
INTERNAZIONALE
DI SCIENZE
MEDICHE
ANTROPOLOGICHE
E SOCIALI
(IISMAS)

International Journal of Migration and Transcultural Medicine



ISSN 1826-1329

VOL 1
N° 1

OTTOBRE/DICEMBRE 2005
RIVISTA QUADRIMESTRALE

Medical Network
Liaison Srl

Scientific Publishing
& Communication

mnlpublmed.com

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Scientific Publishing & Communication

Poste Italiane SPA Spedizione in abbonamento postale - 45% - art. 2 comma 20/b legge 662/96 aut. DC/ER/BO - Finito di stampare nel mese di Ottobre 2005

TASKS OF INMP

INMP's mandate is to develop and implement:

- **research**
- **training, education and health communication**
- **promotion of treatment of poverty-related diseases in Italy and developing countries through clinical research and other tools**
- **clinical and health services research on poverty-related diseases;**
- **networking National, European and International Organizations competent for migrants' and poverty health**



Z59.5 - EXTREME POVERTY



*(World Health Report 1995 –
The state of world health - WHO: Geneva)*

The world's biggest killer and the greatest cause of ill-health and suffering across the globe is listed almost at the end of the International Classification of Diseases. It is given the code Z59.5 – “**Extreme poverty...**”

THE ITALIAN NATIONAL INSTITUTE FOR HEALTH, MIGRANTS AND POVERTY (INMP)

- The mission of INMP is to strengthen TRANSLATIONAL RESEARCH building on research in improving health care for migrants and other disadvantaged people



TRANSLATIONAL RESEARCH

- **Translational research refers to translating research into practice: ensuring that new treatments and research knowledge reach the patients and/or populations for whom they are intended and are implemented correctly**
- **Translational research seeks to close the gap between research and services and improve access to care, reorganize and coordinate systems of care, help clinicians and patients to change behaviors and make more informed choices, provide reminders and point-of-care decision support tools, and strengthen the patient clinician relationship.**



Wolf SH. JAMA 2008;299(2):211-213

Proposal of a European Collaboration for the benefit of migrants

- **It is proposed to establish a European scientific and technical network to facilitate early diagnosis, proper treatment and rehabilitation of migrants**
- **The main tasks of the network will be to:**
 - 1- share and build consensus on diagnostic and treatment protocols for diseases that are more frequent among migrants and assess their cost-effectiveness**



Proposal of a European Collaboration for the benefit of migrants

2- share and build consensus on ways of supporting migrant mental health in a trans-cultural perspective

3- share and build consensus on ways of supporting mother and child care

4- promoting the development of dynamic migrant friendly health systems



Proposal of a European Collaboration for the benefit of migrants

- 5- sharing manpower development and training tools for medical doctors, nurses and mid-wives, cultural mediators, psychologists and anthropologists.**
- 6- organizing training of trainers.**



If you consider this proposal interesting,

- **I would like to invite you to a technical Conference, to be held in Rome in the second half of this year to jointly define contents and procedures to establish the above-mentioned network**
- **INMP will host a two-day Conference in Rome, taking care of the hospitality of all delegates while in Rome and offering an *ad hoc* Secretariat for the organization and implementing the Conference.**

