



Advisory Group on Health and Migration

25-26 February 2008, Luxembourg

■ Increasing Public Health Safety
Alongside the New Eastern European
Border Line Project

(PHBMM)



IOM.... is:

- Intergovernmental body with 122 Member States & 340 offices globally, committed to the principle that humane and orderly migration benefits migrants & societies
- 5500 employees working on >1600 projects, on policy and on research
- The Migration Health Department promotes migrants' health, advises states and partners, designs & implements projects
- IOM Brussels is the Regional office for Europe



PHBMM is a 30-month Project co-funded at 60% by the DG SANCO,
EC 2006 Public Health Programme

Managed by IOM

*Implemented in cooperation with:
the Governments of Hungary, Poland, Romania and Slovakia;
WHO EURO, ECDC, FRONTEX, and;
the associated partnership of the University of Pecs*

Project Goal:

*To increase the **public health safety** of all EU member states by
appropriate health care provision to all type of migrants in the
border area as fundamental **human right**, and
through completion of the **border** management procedures with an
included Human Public Health module.*



Migration Health



Background/context

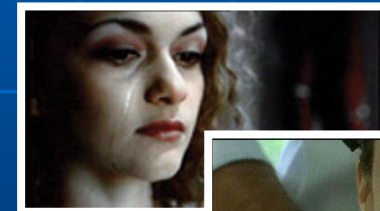
44.1 million registered migrants represent approximately **8.9%** of the total population of the EU

~**2.3 to 6 M** irregular migrants in the EU

~ 400,000 border apprehensions each year in the EU-25 zone

~**0.5 M** of trafficked women in the EU alone, 2/3 of which have entered through the new Eastern external borders of EU

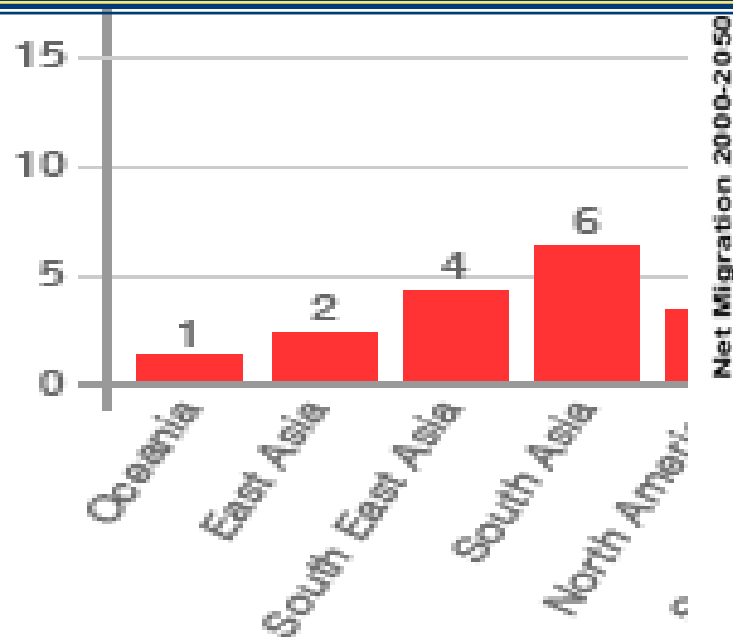
1.7 M of refugees and asylum seekers



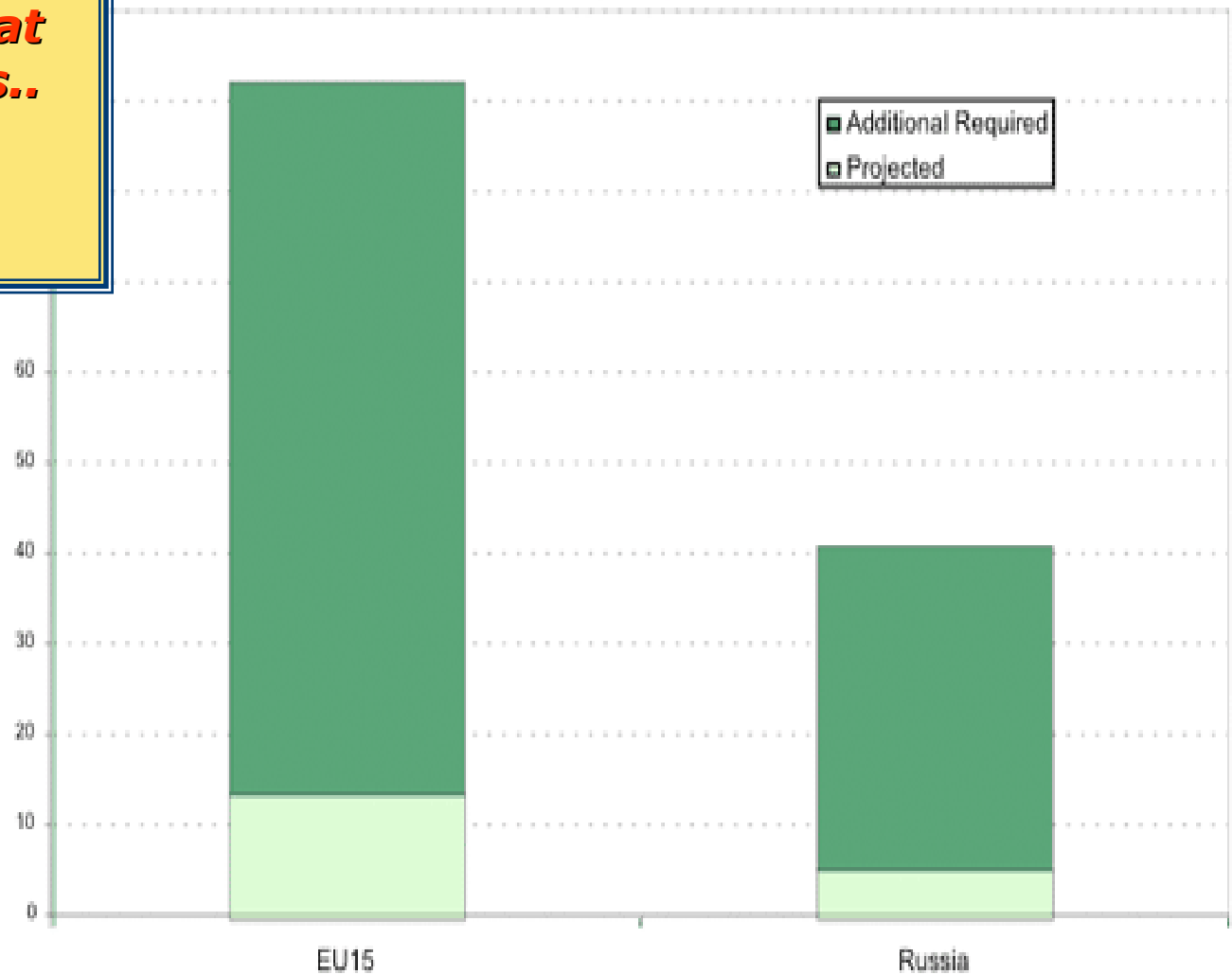
Background/context: why.... migrants?

***'Europe needs more migrant workers....It will be facing increasing labour shortage at least over the next 20 years..
EC president Jose Manuel Barroso***

07-11-2007



Additional Net Migration Required to Hold Working Age Population Constant at 1995 Levels in 2050



Source: World Bank Staff Estimates.

Background/context: *Migration.... and Health ?*

Migration connects individuals, their environments, and their communities

Many of the same inequalities that drive the spread of disease, also drive migration

Migration is in and of itself is not a risk-factor to health: the **circumstances** surrounding the migration process can pose & increase risks to health



***No harmonized
EU
migration health
policy***



Background/context



- Following the latest EU enlargement, the Eastern/ North-eastern border line has been redefined;

- In addition to the still increasing concerns alongside the Western Mediterranean sea border, the new Eastern border line poses new challenges in the area of border management and migration, particularly in relation to public health issues and migration health;



Background/context



➤ The new Eastern border provides a significant entry space for irregular migrants (including in terms of smuggling and trafficking in human beings)

➤ Current protocols of border management do not address the human public health aspects (nor do the Schengen criteria).

On the occasion of the recent report on the implementation of **the Directive laying down minimum standards for the reception of asylum seekers**, Commissioner Frattini noted that he will "propose amendments in order to **limit the discretion allowed with regard to ..the ..reception conditions, access to employment, health care, free movement rights and identification and care of vulnerable persons**



PHBMM Project Objectives

- To minimise the public health risks posed by migration along the borders of an enlarged European Union
- Analyse and document the current public health situation regarding border management in the EU countries forming the new eastern Schengen border
- Promote the human rights-based provision of appropriate and adequate healthcare to migrants as well as occupational health assistance to border management personnel through training, minimum public health standards and structural changes
- Disseminate the core PHBMM and experiences gained, in order to facilitate increased public health security along the entire external borders of the enlarged EU



Rationale: Public health dimension of migration

- The provision of appropriate health care for irregular migrants is a **humanitarian obligation**, and it also addresses **public health** concern for countries of transit and destination alike:

The health status diversity (morbidity profile, beliefs, attitudes) of source, transiting and target countries, as well as migrants' vulnerability increases the risk of:

i/ infectious diseases such as the (re)-emerging problems of TB, including MDR, of HIV/AIDS & other STIs, Hepatitis B , C and, pandemic influenza, but also

ii/ vaccine preventable diseases , consequence of the underdeveloped or demolished public health system of the majority of countries of origin, and

iii/the possible appearance of some tropical diseases that require special attention & preparation



Rationale... the 3-dimensional nature of health concerns related to border management

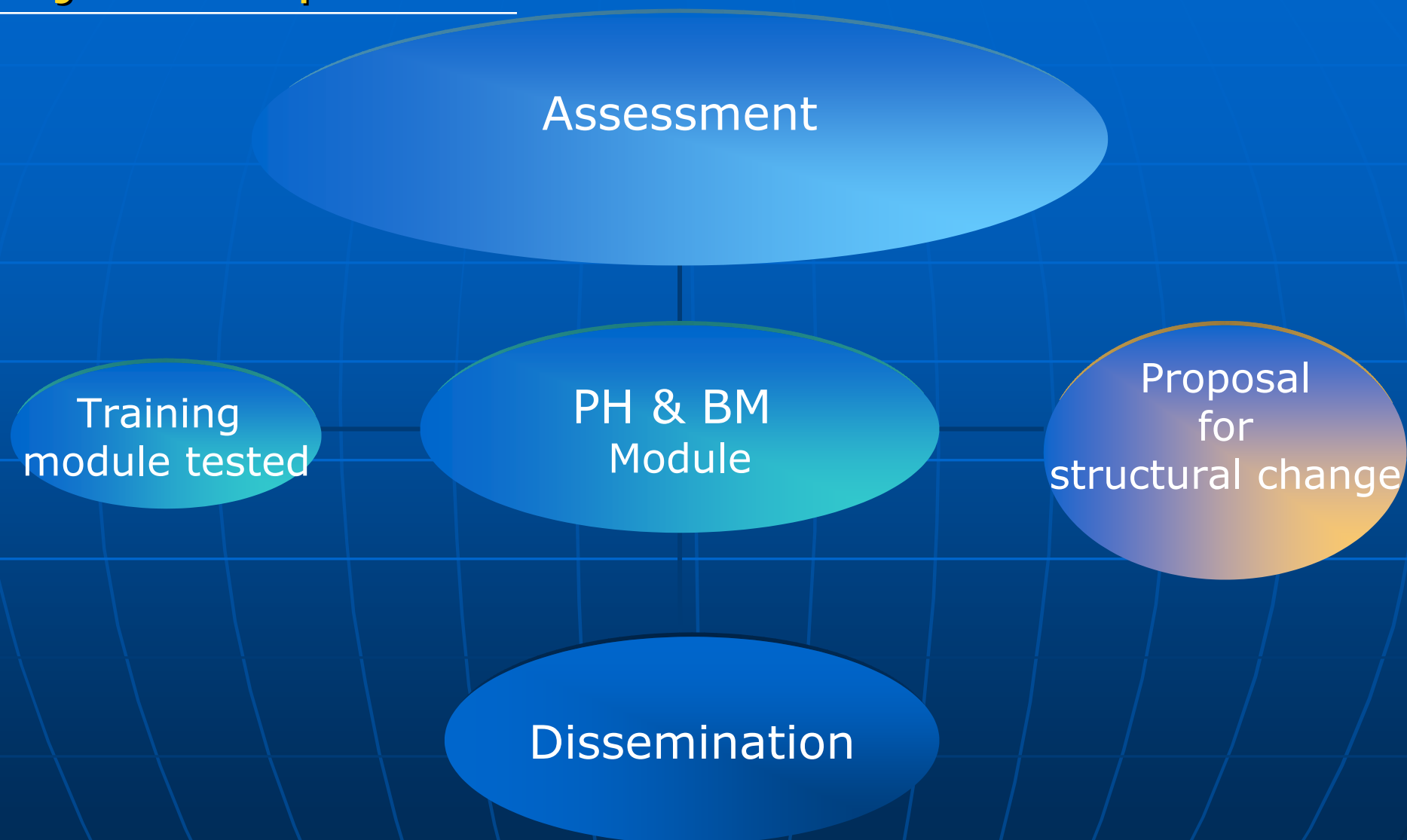


- Provision of appropriate and adequate care at the first line of entry and in the first line service- the border area - is the best and most cost effective and efficient strategy;
- The task of being on the front-line of possible disease notification and control also offers occupational health hazards to border personnel and their community of residence;
- Human rights-based client oriented **health/ mental health assistance is essential**



Project components

Start: June 2007



Assessment Component: scope

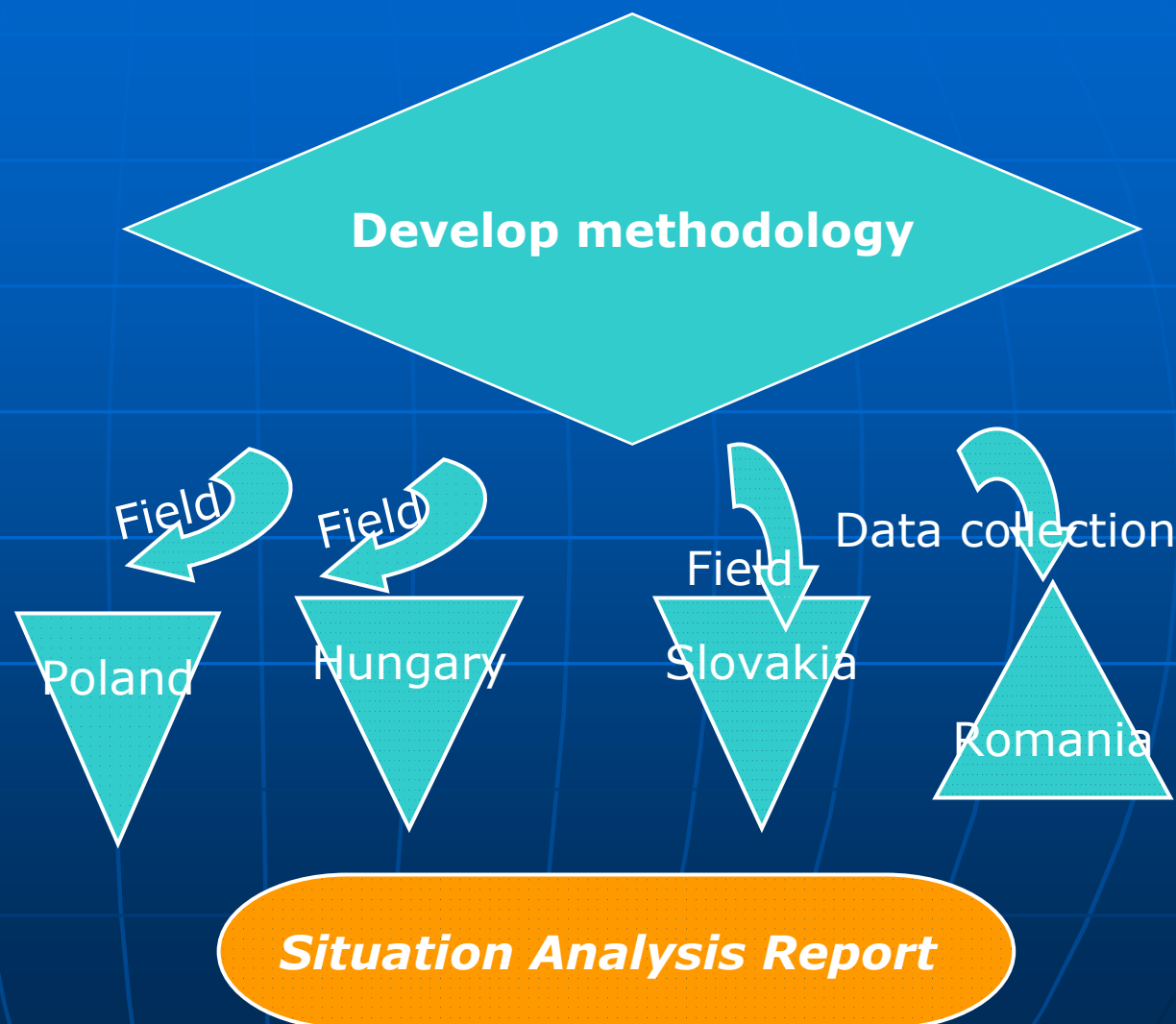
- Magnitude and nature of current health/public health hazards in the target border regions;
- Knowledge, attitude and practice (KAP) of the border management and the health personnel;
- Physical environment and hygienic conditions of the border crossing points' facilities and reception/detention centres;
- Accessibility and capacity of health/public health services in the border region;
- Health-related aspects of the border crossing procedures, and;
- Protocol and checklist for ongoing longitudinal registration of new events , to serve as a model for the systematic collection of irregular migration-related health data in the border region



Assessment Component- Months 2-16th

Objectives

1. Develop the methodology for the comprehensive assessment;
2. In cooperation with partner governments, select the border crossing points and do field assessments
3. Evaluate the results and compile the Situation Analysis Report.



II/ Public Health Border Management Module (PHBMM) Component

Based on the Situational analysis development of:

1/Training materials for guard staff and health professionals on public health and border management

2/Sets of Minimum Standards for PHBMM including management procedures , hygienic conditions and environment sanitation of the border crossing points' facilities and for health services/facilities in the border regions.

3/Template of Health Database of irregular migration



III/ Component- proposal for the implementation of structural changes

The proposal might include recommendations re:

- changes to hygiene-related construction regulations;
- detainment conditions;
- communication channels;
- public health services, and;
- changes in the border management procedures: border crossing check list, questioning, interviewing irregular migrants.



IV/ Component - Dissemination

Disseminate the core PHBMM through country-level consultations with relevant governmental bodies of EU Member States and the organisation of a one-day EU level seminar

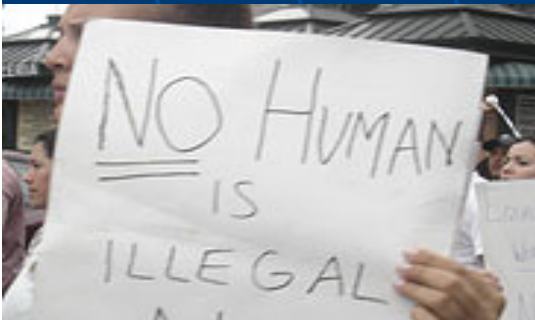


Project...Guiding principles

Border guard facilities where irregular migrants are detained to meet *specific minimum hygienic standards*;



All irregular migrants moved inland to detention, and refugee, asylum seekers to receive *medical assessment and care according to a standardized protocol* ;



During the process the human angle/the migrant's position be taken into foremost consideration and *health assistance offered on fundamental human rights basis.*



Project...Guiding principles

“First line” border personnel be provided with the basic skill set needed to **protect themselves, assess health risks** and **migrants’ vulnerability**, and be sensitized towards the mental health and transcultural aspects of migration;

If further health assessment/assistance for migrants is necessary, border personnel to have **direct and fast access to referral services and specially trained health professionals** so as to reduce the possible extents of spread of infections and to provide appropriate health care.



Expected results

- **An innovative, comprehensive model** developed and used to analyse the migration-related public health hazards and the conditions and capacity of the border management and health staff to respond to and control these challenges. ***This model could be easily adapted for situational analysis in any State***
- **A core Public Health Border Management Module, including** Minimum public health standards for border regions, ***adaptable for application*** in other States and which will also facilitate the implementation of ***the International Health Regulations (IHR)***
- Through the EU-wide **dissemination of its results**, increased awareness of Member States' governments to the **health impact of migration** and ***support the development of EU migration health policy***
- **Increased public health safety** in the target region of the new eastern Schengen border (and, thus, for the entire EU), providing an ***impetus for implementing the PHBMM along the entire external border***

Questions?



Thank you for your attention

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