OUTLINE

- International Organization for Migration
- Global Compact on Migration
- IOM labour policies (health)
- Premigration health assessments (IOM)
- Summation and questions
INTERNATIONAL ORGANIZATION FOR MIGRATION (IOM)

Seven decades of growth

- UN related organization
- 172 Member States, 10 Observers
- Headquarters in Geneva
- More than 480 offices in 150 countries
- Over 10,000 employees
- Committed to the principle that humane and orderly migration benefits migrants and societies

The only agency with a global footprint dealing with all aspects of migration for 67 years
“Dignified, orderly, and safe migration for the benefit of all”

As the leading international organisation for migration, IOM acts with its partners in the international community to:

• Assist in meeting the growing operational challenges of migration management
• Advance understanding of migration issues
• Encourage social and economic development through migration
• Uphold the human dignity and well-being of migrants
GLOBAL MIGRATION HEALTH POLICIES
GLOBAL (MIGRATION) HEALTH POLICIES

- WHA 61.17 Resolution on the Health of Migrants (2008)
- First global consultation on migration health (Spain 2010)
- UN General Assembly adopted the 2030 Development Agenda titled “Transforming our world: the 2030 Agenda for Sustainable Development” (2015)
- WHO Executive Board Decision 140(9) on Promoting the health of refugees and migrants (2017)
- Second global consultation on migration health (Sri Lanka 2017)
- WHA 70.15 Resolution on Promoting the health of refugees & migrants (2017)

Migrant-sensitive health policies, equitable access to services;
Capacity building of health service providers and professionals;
Bi- and multi-lateral cooperation, intersectional action

Health of migrants

The Sixth-first World Health Assembly,
Having considered the report on health of migrants,1
Recalling the United Nations General Assembly resolution 58/208 underscoring the need for a high-level dialogue on the multidimensional aspects of international migration and development (New York, 23 December 2003);
Recalling the first plenary session of the United Nations General Assembly on migration issues and the conclusions of the High-level Dialogue on Migration and Development (New York, 14-15 September 2006) with their focus on ways to maximize the development benefits of migration and to minimize its negative impacts;
Recognizing that the revised International Health Regulations (2005) include provisions relating to Protection of Migrants’ Health, including in the context of national responsibilities to protect the health of migrants;

1. Taking into account the determinants of migrants’ health in developing intersectional policies to protect their health;
Mindful of the role of health in promoting social inclusion;
First global consultation on migration health (Spain 2010)

Defined an implementation framework, which was presented to the Sixty-third World Health Assembly and has since been adopted by a number of governments, including the Governments of Thailand and Sri Lanka, both of which undertook exceptional policy reform.
UN General Assembly adopted the 2030 Development Agenda titled "Transforming our world: the 2030 Agenda for Sustainable Development“ (2015) – SDG’s
GLOBAL (MIGRATION) HEALTH POLICIES

- WHO Executive Board Decision 140(9) on Promoting the health of refugees and migrants (2017)

- WHA 61.17 Resolution on the Health of Migrants (2008)

- First global consultation on migration health (Spain 2010)

- UN General Assembly adopted the 2030 Development Agenda titled “Transforming our world: the 2030 Agenda for Sustainable Development” (2015)

- WHO Executive Board Decision 140(9) on Promoting the health of refugees and migrants (2017)

- Second global consultation on migration health (Sri Lanka 2017)

- WHA 70.15 Resolution on Promoting the health of refugees & migrants (2017)

- Note with appreciation the framework of priorities and guiding principles to promote the health of refugees and migrants

- Urges Member States, in accordance with their national context, priorities and legal frameworks…
GLOBAL (MIGRATION) HEALTH POLICIES

- Second global consultation on migrant health (Sri Lanka 2017)
GLOBAL (MIGRATION) HEALTH POLICIES

Requests WHO DG to:

• in cooperation with Member States, IOM, UNHCR and other relevant stakeholders, draft framework of priorities and guiding principles
• Ensure health is a priority in the Global Compact for Safe, Orderly, and Regular Migration
• Conduct Situational Analysis
• Draft a Global Action Plan

- WHA 70.15 Resolution on Promoting the health of refugees & migrants (2017)
There are two Global Compacts:

- **Global Compact for Safe, Orderly and Regular Migration (GCM):**
  IOM has an active role in developing the process
  **GOVERNMENT LEAD**

- **Global Compact for Refugees (GCR):**
  UNHCR has an active role in developing the process
The New York Declaration for Refugees and Migrants & Global Compact for Safe, Orderly, and Regular Migration (GCM)

- The NY Declaration (September 2016) set out a preliminary process and elements for the GCM and GCR
- GCM is an opportunity to:
  - Improve the governance of migration
  - Address the challenges associated with today’s migration
  - Strengthen the contribution of migrants and migration to sustainable development
- GCM Phases
  - Consultation Phase - April – Nov 2017
  - Stocktaking Phase - Nov 2017 – Feb 2018
  - Negotiation Phase - Feb – July 2018
  - UN Framing Conference October 2018
  - Intergovernmental Conference to Adopt the Global Compact for Safe, Orderly and Regular Migration - 10-11 December 2018, Morocco
Health included under several objectives, primarily Objective 15 (provide access to basic services for migrants) as well as other relevant objectives (1, 2, 6, 7, 13, 17, 22).

- Country-specific migration profiles with data on health (Objective 1)
- Eliminate adverse “push factors” that compel migration including health (Objective 2)
- Guaranteed access to basic services, regardless of status (Objective 15)
- Promote the implementation of the WHO Framework (Objective 15)
- Portability of medical insurance (Objective 22)
WHY PROMOTING LABOUR MOBILITY MATTERS?

Benefits

- In 2015, worldwide remittance flows are estimated to have exceeded $601 billion. Of that amount, developing countries are estimated to receive about $441 billion, nearly three times the amount of official development assistance (ILO).

- Migrants increase GDP per person and productivity: one percentage point increase in the share of migrants in the adult population increases GDP per person in advanced economies by up to 2 percent in the longer term.

- Australia’s data shows migration will be contributing $1,625 billion (1.6 trillion) to Australia’s GDP by 2050:  
  - increased workforce participation by 15.7%
  - increased real wages for low skilled workers by 21.9%
  - 5.9% in GDP per capita growth

WHY PROMOTING LABOUR MOBILITY MATTERS?

Concerns
- Response to employment, demographic, social, environmental challenges
- Security
- Sovereignty
- National identity
- Social services
- Impact on domestic labour markets:
  - wages
  - job categories
TREATMENT OF LABOUR MIGRANTS

It is not always managed well......

- Unethical medical screenings for prospective migrant workers
- Pre-departure forced contraception; deportation of pregnant migrant workers
- Refusal of visa to dependents for temporary labour migrants
- Deportation of migrants with treatable infectious diseases (TB) and health conditions (pregnancy)
- Exploitation, poor living and working conditions
IOM AND LABOUR MIGRATION

As the leading international organisation for migration, IOM acts with its partners in the international community to:

- to facilitate the development of policies and programmes on labour migration that can individually and mutually benefit the concerned governments, migrants and societies

Approach:

- A dignified and orderly migration process
- Keep migrants well informed of the migration process from the beginning and throughout
- Protect the human rights of migrants throughout the process
- Adhere to an open, fair and transparent process that benefits all stakeholders
Facilitate the development of policies and programmes that can individually and mutually benefit the concerned governments, migrants and society by:

• Providing effective protection and services to labour migrants and their dependents;
• Promoting economic and social development;
• Promoting forms of labour mobility as an alternative to irregular migration
MHD within IOM

IOM Staff: 10,184

1,223 on Health Projects

One in eight IOM Staff
MIGRATION HEALTH ASSESSMENT

The evaluation of the physical and mental status of migrants, made prior to departure or upon arrival, for the purpose of resettlement, international employment, enrolment in specific migrant assistance programmes, or for obtaining a temporary or permanent visa.

• IME = Immigration Medical Examination
Screening for the purpose of **excluding**

- Detection of inadmissible conditions
  - Tuberculosis, infectious
  - STIs, untreated
  - Mental health conditions *(associated with harmful behaviour)*
  - HIV

- Detection of conditions presenting excessive demand on health care systems

Screening for the purpose of **integrating**

(Exclusionary or integrationist approaches (particularly in cases of NCDs) often **depend upon the characteristics of the health care system** in the receiving country, i.e. public social security service, vs. private, insurance-based, etc.)
PUBLIC HEALTH BENEFIT

Or…….

Screening for the purpose of integrating

Can migration health assessments be used to enhance the safety and protection of migrant workers?
THE EVOLVING NATURE OF MHA’s

- Core Health Assessment
- Expanded Activities
- Knowledge Management
- Partnership and collaboration
IOM HEALTH ASSESSMENT PROGRAMMES

• One of IOM’s most well-established migration management services
• Provided at the request of receiving country governments, they consist of physical and mental health evaluations for the purpose of resettlement, international employment, temporary or permanent visas,
• Reflecting national differences in immigration policies and practices, HA requirements and protocols vary among receiving countries

Health assessments (HAs) may include some or all of the following:

- Review of medical history
- Detailed physical examination
- Mental health evaluation
- Clinical or laboratory investigations
- Pre- and post-test counselling
- Referral for consultation with a specialist
- Health education
- Pre-embarkation/fitness-to-travel checks (PECs)
- Pre-departure medical procedures (PDMPs)
- Vaccinations

• Provision of, or referral for treatment
• Documentation of findings and preparation of required immigration health documentation
• Confidential transfer of relevant information or documentation to appropriate receiving authorities
• Disease surveillance and outbreak response
• Provision of medical escorts and special arrangements for travel
EXPANDED HA ACTIVITIES

- **Prevention**
  - Targeting Surrounding Community
  - Capacity Building

- **Surveillance**
  - Diagnostics, Treatment, Data Management, Counseling

- **Advanced Technologies**
  - Digital Radiology
  - New Laboratory Techniques
  - Health Informatics

- **Knowledge Management**
  - Protocol Harmonisation
  - TB reach projects
  - DOTs centers
  - Community Health Clinics

- **Surveillance and Response**
  - Vaccination,
  - Health Education
  - Outbreak surveillance and response

- **Nutritional Surveillance**
  - Nutritional Surveillance
  - Mental Health
  - Tuberculosis

- **Laboratories**
  - Laboratories
  - TB clinics
IOM HEALTH ASSESSMENT PROGRAMMES – VALUE ADDS

- Vaccines
- TB diagnostics
- TB management
- Health profiles and knowledge management
- Teleradiology
- Capacity building
CARING FOR THE MIGRANT BEFORE ARRIVAL

Benefits of IOM Health Assessments

 Early detection and treatment of conditions of individual and public health concern
 Safe travel; prevention of negative health events during travel or on arrival
 Protect the public health of both migrants and host communities
 Reduce expected demand on domestic health and/or social services
 Allow post-arrival agencies to prepare adequately by providing important medical information prior to arrival
 Positively impact on the migrant’s capacity to integrate fully in the receiving society and accessing healthcare
 Coherent with the IOM’s goal of promoting “healthy migrants in healthy communities”
CARING FOR THE MIGRANT BEFORE ARRIVAL – KEY POINTS

- Migration is a process starting overseas (host community); through transit (“pipe-line” and travel) to the post-arrival domestic (Reception and Integration)

- Continuum of Care is essential through clear role definitions (avoiding “falling through the cracks”); ensuring exchange of information (electronic systems!); and better partnerships (for better use of resources)

- Health assessments should be considered within the overall framework of national and international public health measures.
  - information generated from health assessments should be used more widely by the health sector, not just the immigration authorities.
  - information on health conditions of various migrant groups should be disseminated to and integrated within health systems of receiving communities
  - detection and treatment of infectious diseases such as Tuberculosis should be closely linked with national and regional TB control programs.
  - screening programs need to be integrated with domestic disease control programs and linked to international partners to ensure quality standards and coordinated patient care across borders

- Technological advances in diagnostics and treatment should be applied for improved quality in migration health assessments
Thank you