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 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.
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
'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
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
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.

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

- Assessment
- PH & BM Module
- Dissemination
- Training module tested
- Proposal for structural change

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.
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.

Assessment Component- Months 2-16th

Migration Health Department
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.
“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.
Thank you for your attention