





REGIONAL COMMITTEE FOR THE EASTERN MEDITERRANEAN Sixty-eighth Session Cairo, Egypt, 11–14 October 2021

October 2021

STRATEGY TO PROMOTE THE HEALTH OF REFUGEES AND MIGRANTS IN THE EASTERN MEDITERRANEAN REGION

Objectives of the event

The objectives of the event are to:

- present the strategy to promote the health of refugees and migrants in the Eastern Mediterranean Region;
- discuss the strategic objectives and priority actions for Member States, WHO and partners;
- advocate for addressing the health and well-being of refugees and migrants in an inclusive and comprehensive manner and as part of holistic efforts to respond to the health needs of the overall population in any given setting.

Background

The number of internally displaced persons (IDPs) in the Eastern Mediterranean Region has been growing steadily in recent decades, rising to 20.7 million in 2020 which is 43% of the world's total number of IDPs. The number of refugees (including Palestinians) reached 17.5 million in 2019 (66% of the world's total) and almost 49% (11.4 million) of those refugees remain in the Region. In addition, in 2019 there were 46 million professional and low-income labour migrants in the Region (of which 22 million are from the Region), mainly in Gulf Cooperation Council countries.

In October 2017, the WHO Regional Office for the Eastern Mediterranean initiated a consultative process with national and international stakeholders on how to regionalize resolution WHA70.15 on Promoting the health of refugees and migrants, and to determine how to implement the framework of priorities and guiding principles. During the 65th session of the Regional Committee in October 2018, the draft global action plan for promoting the health of refugees and migrants 2019–2023 was discussed, and Member States requested WHO to develop a regional approach for implementation of the global plan. In March 2019, the Regional Office held a consultation with stakeholders to develop a regional action plan. A modified version of the plan was further shared with stakeholders for feedback and the final version was presented to the 66th session of the Regional Committee in October 2019. In May 2019, the global action plan for promoting the health of refugees and migrants, 2019–2023, was noted during the Seventy-second World Health Assembly. The proposed regional strategy was accepted by the Programme Subcommittee to be discussed in the 67th session of the Regional Committee in October 2020; however, due to the COVID-19 pandemic it was postponed.

Challenges

Refugees and migrants are often vulnerable to poor health due to the conditions in which they live and their limited access to quality health care. They have differential access to health services and health insurance

coverage schemes. Many forcibly displaced populations, especially refugees without documentation as well as irregular migrants that work in the informal sector, are often excluded from national health programmes including disease prevention, treatment and care, as well as from financial protection schemes for health, social services and social protection. Since the beginning of the COVID-19 pandemic, this exclusion has made early detection, testing, diagnosis, contact tracing and treatment more difficult among these populations. This was at the cost of potential outbreaks remaining undetected among refugees and migrants, putting them and the host communities at high risk of spreading COVID-19.

In the Eastern Mediterranean Region, around 40% of health expenditure comes directly out of people's pockets. In some countries, out-of-pocket payments make up over 70% of total national spending on health. Those with low incomes and without social protection, including refugees and migrants, are the most affected. As such, it is important to address refugees and migrants through the framework of universal health coverage to ensure they receive the health services they need of sufficient quality and without suffering financial hardship.

Countries in the Region have adopted different models to promote the health of refugees and migrants. However, innovative approaches are needed to tackle the complex issues related to refugee and migrant health; for example, workforce shortages in transit countries require enabling refugee health workers to serve their communities and also to practice their profession. In countries that rely heavily on external funding, vulnerable populations may face hardships should funding stop; this can result in a significant decrease in service utilization and rationing of essential medicines by patients. Therefore, where possible, support for refugees and migrants should be provided through existing national health care financing schemes whereby these vulnerable groups receive equitable entitlements to those of the host communities.

To achieve the goal of 1 billion more people enjoying better health and well-being, it is necessary to address the social determinants of health. Many socioeconomic, environmental and lifestyle factors that determine health such as where people live, access to public transportation, the ability to be included in the job market, access to quality education, availability of affordable housing and so on, are services that are lacking among refugees and migrants. During transit, refugees and migrants often experience a lack of access and continuity of care due to their precarious status. Moreover, basic health services are only part of what may be denied to refugees and migrants; there are other basic needs (such as water, sanitation, nutrition, education, etc.) that these vulnerable communities require, which also determine their health outcomes.

Innovative approaches are needed to ensure that refugees and migrants can access integrated people-centred health services, particularly as underutilization of services is detected in these vulnerable communities. It is also important to ensure joint planning between health systems strengthening and humanitarian interventions within the humanitarian-development-peace nexus to ensure that humanitarian interventions feed into longer term health system development which is migrant sensitive and inclusive. This will advance work towards achieving the GPW 13's goals of 1 billion more people benefiting from universal health coverage and 1 billion more people better protected from health emergencies.

Expected outcomes

- Awareness raised on the regional strategy to promote the health of refugees and migrants.
- Stronger commitment of Member States to create a platform and binding agreement for inclusion of refugees and migrants within the framework of universal health coverage.