



PRE-MIGRATION HEALTH ACTIVITIES OVERVIEW

Last updated September 2020

PRE-MIGRATION HEALTH ACTIVITIES

1. IOM'S Migration Health Division (MHD)

2. 2019: IOM Migration Health in numbers

3. Health in Resettlement

4. Migration Health in the Time of COVID-





IOM'S MIGRATION HEALTH DIVISION (MHD): 3 CORE AREAS







Migration health assessments and travel health assistance for migrants and refugees (Premigration health activities)

•Health response to crisis situations (public health and humanitarian emergencies)

Health promotion and assistance for migrants





USD 242 million spent on health operations



208 projects implemented worldwide



112 countries covered

with pre-migration, health promotion or emergency health operations



1,310 health staff worldwide



66 health publications

including 21 peer-reviewed scientific articles



71 migration health assessment centres

operating across the world



185,150 ante-natal care consultations

in crisis contexts



620 tuberculosis diagnoses

through pre-migration health assessments



3.66 million primary health care consultations

in crisis contexts



429,000 migration health assessments

for refugees (26 per cent) and immigrants (74 per cent)



in communicable diseases and outbreaks





141,343 immigrants vaccinated

through pre-migration health activities

380,760 children vaccinated

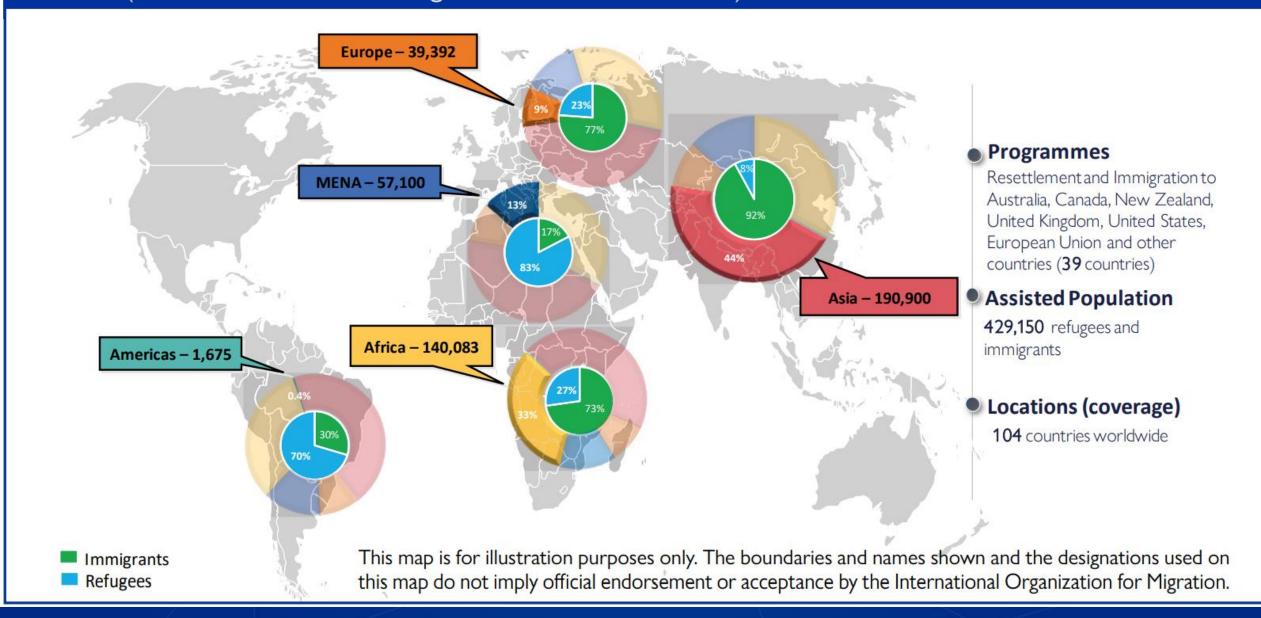
against polio and/or measles





(mental health and psychosocial support)

Figure 1: IOM global migration health assessment programme global footprint (IOM and IOM-assisted migration health assessments)



HEALTH IN RESETTLEMENT.... WHY?

- To address certain public health issues related to mobility;
- To facilitate integration of refugees into communities and health systems of the receiving countries and to ensure continuity of care for refugees with significant medical conditions;
- To promote health of refugees;
- To ensure that the refugees traveling under the IOM's auspices do so in a safe and dignified manner;
- To address biases and dispel myths about migrant health



PRE-MIGRATION HEALTH ACTIVITIES (PMHA)

• PMHA is an array of procedures in context of regular migration, consisted of:

MHA (Migration health assessment)

- Identify health conditions of public health importance (communicable and non-communicable) in relation to International Health Regulations (IHR)
- Recording and transmitting completed health records to ensure continuity of care for beneficiaries with SMC (Significant Medical Condition) linking pre-departure, travel and post-arrival phases
- Improve the health of migrants before departure to another country through the provision of preventative or curative care;

PDMP (Pre-departure medical procedures) - PDE (Pre-departure evaluation) & PEC (Pre-embarkation check)

- Minimize or mitigate public health risks and risk associated with SMC in relation to mobility
 - **PDE** reassessment, stabilization and travel requirements adjustment for beneficiaries with SMCs
 - PEC final assertion of fitness to travel.



EXAMPLE OF PRE-MIGRATION HEALTH ACTIVITIES - STAGES AND TIMELINES

Start

 Initial health assessment: history, physical exam, assessment of mental status, screening for TB/STIs

1-5 months

 Follow-up phase: vaccination, TB treatment, specialist referrals, management of chronic diseases

1-3 weeks before departure

Pre-departure medical procedures – Pre-departure evaluation

24-72hrs before departure

• Pre-embarkation check.



RESETTLEMENT HEALTH SUPPORT IN THE CONTEXT OF COVID-19



Identify refugees at risk for COVID-19: special preparations for travel, post-arrival arrangements



Importance of health assessments.

- Identify and isolate/refer symptomatic individuals
 - Importance of thorough pre-departure checks;



- Minimize risk of transmission before and during travel
 - Physical distancing between Carrier capacity, accommodation;
 - Hand and respiratory hygiene -- enhancement of hygiene measures, distribution
 of hand sanitizers and masks;
 - Provide access to and proper use of personal protective equipment (PPE).



Provide information and health education



COVID-19 TESTING AND VACCINE

- RT PCR test is widely used as the most recognized test to detect acute infection
 - Negative test does not mean absence of infection

Rapid tests currently available, detecting IgG, IgM antibodies, - not suitable stand alone to diagnose active infection, while C19 antigen – useful in symptomatic, within the first week, individuals where PCR is not available.

- IOM does not recommend a routine pre-departure testing outside of the WHO/CDC and national testing algorithm:
 - Possibility of infection after testing
 - Waste of precious resources
 - False assurance
 - Stigmatization if applied only to refugees

COVID-19 vaccine - once available concern that refugees, migrants and other vulnerable groups may have issues with access and emphasize on importance of universal health coverage



