



## IN THIS EDITION

We highlight two reports: one presenting how investing in better data can help manage migration more effectively; and one looking at improving the access and appropriateness of health services in EU/EEA. In addition, we present two journal articles: one focusing on evaluating the feasibility and health impact of diagnosis and management of certain medical conditions before travel; and one centering on the health inequities faced by Roma population in Europe.



### Featured Book

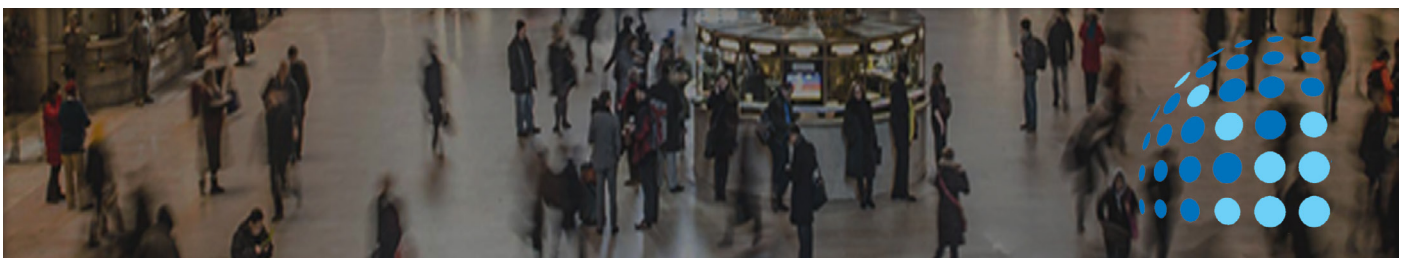
International Organization for Migration (IOM) and McKinsey & Company. *More than Numbers: How migration data can deliver real-life benefits.* 2018.

### Featured Report

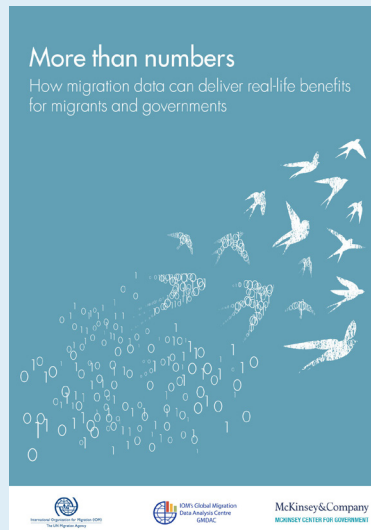
International Organization for Migration – Regional Office Brussels. *Equi-Health Final Report.* 2018.

### Featured Research Articles

- 1 Tarissa Mitchell, Deborah Lee, Michelle Weinberg, Christina Phares, Nicola James, Kittisak Amornpaisarnloet, Lalita Aumpipat, Gretchen Cooley, Anita Davies, Valerie Daw Tin Shwe, Vasil Gajdaziev, Olga Gorbacheva, Chutharat Khwan-Niam, Alexander Klosovsky, Waritorn Madilokkowitz, Diana Martin, Naing Zaw Htun Myint, Thi Ngoc Yen Nguyen, Thomas B. Nutman, Elise M. O’Connell, Luis Ortega, Sugunya Prayadsab, Chetdanai Srimanee, Wasant Supakunatom, Vattanachai Vesessmith and William M. Stauffer. *“Impact of Enhanced Health Interventions for United States–Bound Refugees: Evaluating Best Practices in Migration Health.”* The American Journal of Tropical Medicine and Hygiene, (Dec 2017).
- 2 Marta Escobar-Ballesta, Manuel García-Ramírez, Daniela Miranda and Roumyana Petrova-Benedict. *“Shedding light on governance for Roma health inequities.”* Journal of Prevention & Intervention in the Community, 46, no. 1 (2018): 84-99.



## Featured Book



International Organization for Migration (IOM) and McKinsey & Company. *More than Numbers: How migration data can deliver real-life benefits*. 2018.

### Description

Migration is a complex global challenge. Around 258 million people are currently estimated to be residing outside their country of birth – a number that has almost tripled in the past 50 years. This has policy implications across a myriad of dimensions ranging from border management to labour market participation and integration.

Decision makers absolutely need one thing to devise appropriate policies: reliable information. Relevant, high-quality data is critical for designing, implementing and evaluating policies that can generate substantial economic, social and humanitarian benefits for countries and migrants alike.

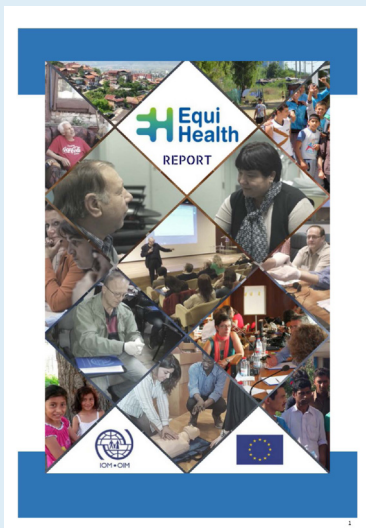
Despite widespread consensus on the importance of data to manage migration effectively, the current availability of relevant and reliable data is still very limited. Even when data is available, it is often not used to its full potential (including new data which is being produced in abundance from digital devices). Unfortunately, the current debate focuses far too much on how to get more and better data – a technical debate for experts in the engine room of politics. This report aims to shift this debate from theory into practice. Decision makers need to be convinced of the value that migration data can deliver.

This report is intended to support decision makers in capturing concrete economic, social and humanitarian benefits in line with targets they choose to prioritize – by leveraging the data that matters.

Download a copy of report:

[http://publications.iom.int/system/files/pdf/more\\_than\\_numbers.pdf](http://publications.iom.int/system/files/pdf/more_than_numbers.pdf)

## Featured Report



International Organization for Migration – Regional Office Brussels. *Equi-Health Final Report*. 2018.

### Description

The Equi-Health project's goal was to improve the access and appropriateness of health services, health promotion and prevention to meet the needs of migrants, the Roma and other vulnerable ethnic minority groups, including irregular migrants in the European Union (EU) and European Economic Area (EEA).

The project activities were divided into three distinct but interrelated sub-actions:

- 1 build a comprehensive multisectoral approach in upholding migrant, occupational and public health in open and/or closed centres/border facilities, and enhance the capacity of public health authorities, law enforcement services and healthcare providers in the region;
- 2 promote dialogue among key stakeholders in governments and civil society organizations in support of the implementation of the health pillar of the National Roma Integration Strategies (NRIS) to allow EU Members States to better monitor, share and strengthen their respective national approaches; and
- 3 support the development of a harmonized EU approach for access to and appropriate provision of healthcare for migrants and ethnic minorities.

The Equi-Health project, designed and managed by IOM Regional Office Brussels, Migration Health Division, was the first direct grant agreement signed with the European Commission's DG SANTE, acknowledging IOM as a strategic long term partner ("Direct grants are based on effective collaboration with the Commission") and furthermore working directly with Member States and contributing to the implementation of EU policies.

The report details the outputs and accomplishments of the project.

Download a copy of report:

<http://equi-health.eea.iom.int/images/Pubs/D3%20-%20Final%20public%20report.pdf>

## Featured Article



Tarissa Mitchell, Deborah Lee, Michelle Weinberg, Christina Phares, Nicola James, Kittisak Amornpaisarnloet, Lalita Aumpipat, Gretchen Cooley, Anita Davies, Valerie Daw Tin Shwe, Vasil Gajdadziev, Olga Gorbacheva, Chutharat Khwan-Niam, Alexander Klosovsky, Waritorn Madilokkowitz, Diana Martin, Naing Zaw Htun Myint, Thi Ngoc Yen Nguyen, Thomas B. Nutman, Elise M. O’Connell, Luis Ortega, Sugunya Prayadsab, Chetdanai Srimanee, Wasant Supakunatom, Vattanachai Vesessmith and William M. Stauffer. *“Impact of Enhanced Health Interventions for United States–Bound Refugees: Evaluating Best Practices in Migration Health.”* The American Journal of Tropical Medicine and Hygiene, (Dec 2017).

### Abstract

With an unprecedented number of displaced persons worldwide, strategies for improving the health of migrating populations are critical. United States–bound refugees undergo a required overseas medical examination to identify inadmissible conditions (e.g., tuberculosis) 2–6 months before resettlement, but it is limited in scope and may miss important, preventable infectious, chronic, or nutritional causes of morbidity. We sought to evaluate the feasibility and health impact of diagnosis and management of such conditions before travel. We offered voluntary testing for intestinal parasites, anemia, and hepatitis B virus infection, to U.S.-bound refugees from three Thailand–Burma border camps. Treatment and preventive measures (e.g., anemia and parasite treatment, vaccination) were initiated before resettlement. United States refugee health partners received overseas results and provided post-arrival medical examination findings. During July 9, 2012 to November 29, 2013, 2,004 refugees aged 0.5–89 years enrolled. Among 463 participants screened for seven intestinal parasites overseas and after arrival, helminthic infections decreased from 67% to 12%. Among 118 with positive *Strongyloides*-specific antibody responses, the median fluorescent intensity decreased by an average of 81% after treatment. The prevalence of moderate-to-severe anemia (hemoglobin < 10 g/dL) was halved from 14% at baseline to 7% at departure (McNemar  $P = 0.001$ ). All 191 (10%) hepatitis B–infected participants received counseling and evaluation; uninfected participants were offered vaccination. This evaluation demonstrates that targeted screening, treatment, and prevention services can be conducted during the migration process to improve the health of refugees before resettlement. With more than 250 million migrants globally, this model may offer insights into healthier migration strategies.

See full article:

<https://doi.org/10.4269/ajtmh.17-0725>

### IOM Contributors:

- Kittisak Amornpaisarnloet (Maesot)
- Lalita Aumpipat (Bangkok)
- Anita Davies (Accra)
- Vasil Gajdadziev (Nairobi)
- Olga Gorbacheva (Geneva)
- Chutharat Khwan-Niam (Maesot)
- Alexander Klosovsky (Washington, D.C.)
- Naing Zaw Htun Myint (Nairobi)
- Thi Ngoc Yen Nguyen (Ho Chi Minh)
- Sugunya Prayadsab (Bangkok)
- Chetdanai Srimanee (Amman)
- Wasant Supakunatom (Maesot)

## Featured Article



Marta Escobar-Ballesta, Manuel García-Ramírez, Daniela Miranda and Roumyana Petrova-Benedict. “*Shedding light on governance for Roma health inequities.*” *Journal of Prevention & Intervention in the Community*, 46, no. 1 (2018): 84-99.

---

### Abstract

The health inequities suffered by the Roma population in Europe represent an alarming and unacceptable source of injustice. As the main ethnic minority in Europe, the gap between the health conditions of the Roma and the rest of the population poses a challenge to human rights and public health. Many political efforts have been deployed in Europe to tackle these inequities. However, they have fallen short, even causing paradoxical consequences.

In this paper, we argue that previous political efforts have failed because they were developed from a neoliberal perspective, which perceives Roma health inequities as isolated ethnic problems for which there is no political accountability. Hence, there is a need for transformative political change that results in the protection of rights and self-governance to address health inequities experienced by Roma people. We propose a framework of health governance guided by the following principles: (a) effective involvement of multiple stakeholders by building collaborative capacity; (b) infusion of health perspectives in all policies and multisectoral actions; (c) transparent monitoring and evaluation; (d) role redefinition of policy promoters; (e) prevention of institutional discrimination; and (f) assuring cultural competence among policy promoters.

See full article:

<https://doi.org/10.1080/10852352.2018.1386340>

IOM Contributor:

- Roumyana Petrova-Benedict (Brussels)

*Comments or Questions*

Migration Health Division  
Manila (Global) Administrative Centre  
International Organization for Migration  
28th Floor, Citibank Tower,  
8741 Paseo de Roxas,  
Makati City, Philippines 1226

E-mail: MHD Research and Publications <[mhdrap@iom.int](mailto:mhdrap@iom.int)>



International Organization for Migration (IOM)

The UN Migration Agency