



International Organization for Migration (IOM)
The UN Migration Agency

Migration Health Research Bulletin



A bi-monthly update on migration health research from IOM programs globally

12th Edition | Sep 2018

IN THIS EDITION

We feature three journal articles, namely: (1) a bibliometric analysis of migration health research in peer-reviewed publications from 2000 to 2016; (2) the role of research in supporting evidence-informed health responses related to migration; and (3) assessment of the health impact of medical examination of US-bound refugees. We also present poster presentations presented at the North American Refugee Health Conference and at the 22nd International AIDS Conference.



Articles

- ❶ Waleed M. Sweileh, Kolitha Wickramage, Kevin Pottie, Charles Hui, Bayard Roberts, Ansam F. Sawalha, and Saed H. Zyoud. "Bibliometric analysis of global migration health research in peer-reviewed literature (2000–2016)." *BMC Public Health*, 2018, 18:777.
- ❷ Kolitha Wickramage, Jo Vearey, Anthony B. Zwi, Courtland Robinson, and Michael Knipper. "Migration and health: a global public health research priority." *BMC Public Health*, 2018, 18:987.
- ❸ Tarissa Mitchell, Deborah Lee, Michelle Weinberg, Christina Phares, Nicola James, Kittisak Amornpaisarnloet, et al. "Impact of Enhanced Health Interventions for United States–Bound Refugees: Evaluating Best Practices in Migration Health." *The American Society of Tropical Medicine and Hygiene*, 2018, 98(3): 92-928.

Poster Presentations

- ❶ Kipsang Melly, Dhillon Nyachieco, and Miriti Damaris (IOM Kenya). *100% TB treatment success is possible: Championing the International Organization for Migration (IOM) tuberculosis DOT and patient-centered care among refugees and other migrants undergoing pre-immigration medical examinations.* Poster presented at the North American Refugee Health Conference, Oregon, USA on 7-9 June 2018.
- ❷ Beldina Gikundi, Marian Solangon, Kelsi Kriitmaa, Phineas Jasi, Forward Makonese, Saul Akandwanaho, Benson Otieno, and Salma Taher (IOM South Sudan). *Provision of comprehensive HIV/AIDS and TB Services in Protection of Civilian (PoC) Sites in South Sudan.* Poster presented at the 22nd International AIDS Conference (AIDS 2018), Amsterdam, Netherlands on 23-27 July 2018.
- ❸ Abdikadir Omar Ismaili (IOM Somaliland). *Results of a third round of HIV surveillance amongst female sex workers in Hargeisa, Somaliland.* Poster presented at the 22nd International AIDS Conference (AIDS 2018), Amsterdam, Netherlands on 23-27 July 2018.
- ❹ Rukhshona Kurbonova (IOM Tajikistan). *Foreign nationals' access to HIV services in the Republic of Tajikistan: achievements and challenges.* Poster presented at the 22nd International AIDS Conference (AIDS 2018), Amsterdam, Netherlands on 23-27 July 2018.



Featured Article



Waleed M. Sweileh, Kolitha Wickramage, Kevin Pottie, Charles Hui, Bayard Roberts, Ansam F. Sawalha, and Saed H. Zyoud. "Bibliometric analysis of global migration health research in peer-reviewed literature (2000–2016)." BMC Public Health, 2018, 18:777.

Abstract

Background

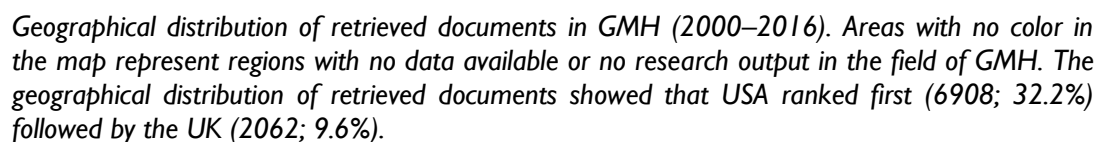
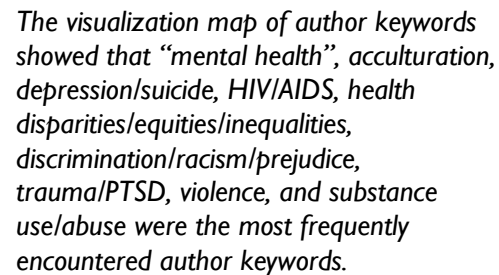
The health of migrants has become an important issue in global health and foreign policy. Assessing the current status of research activity and identifying gaps in global migration health (GMH) is an important step in mapping the evidence-base and on advocating health needs of migrants and mobile populations. The aim of this study was to analyze globally published peer-reviewed literature in GMH.

Methods

A bibliometric analysis methodology was used. The Scopus database was used to retrieve documents in peer-reviewed journals in GMH for the study period from 2000 to 2016. A group of experts in GMH developed the needed keywords and validated the final search strategy.

Results

The number of retrieved documents was 21,457. Approximately one third (6878; 32.1%) of the retrieved documents were published in the last three years of the study period. In total, 5451 (25.4%) documents were about refugees and asylum seekers, while 1328 (6.2%) were about migrant workers, 440 (2.1%) were about international students, 679 (3.2%) were about victims of human trafficking/smuggling, 26 (0.1%) were about patients' mobility across international borders, and the remaining documents were about unspecified categories of migrants. The majority of the retrieved documents (10,086; 47.0%) were in psychosocial and mental health domain, while 2945 (13.7%) documents were in infectious diseases, 6819 (31.8%) documents were in health policy and systems, 2759 (12.8%) documents were in maternal and reproductive health, and 1918 (8.9%) were in non-communicable diseases. The contribution of authors and institutions in Asian countries, Latin America, Africa, Middle East, and Eastern European countries was relatively low despite the significant migration flows within these regions. Literature in GMH represents the perspectives of high-income migrant destination countries with little representation from countries of origin.



Conclusion

This is the first bibliometric analysis of the peer-reviewed literature in GMH pertaining to international migrants. The findings of this paper may be useful for health authorities, funding agencies, donors and UN agencies interested in mapping research domains and identifying the gaps within the GMH research landscape. The recent Global Compact on Migrants and Refugees that seeks to set global foreign policy agendas and action plans on migration needs to account for gaps in the evidence base for advancing an evidence-informed migration and health research agenda. Our heat map of research output shows that despite the ever-growing prominence of human mobility across the globe, and Sustainable Development Goals of leaving no one behind, research output on migrants' health is not consistent with the global migration pattern. A stronger evidence base is needed to enable authorities to make evidence-informed decisions on migration health policy and practice. Research collaboration and networks should be encouraged to prioritize research in GMH.

See full article:

<https://bmcpublichealth.biomedcentral.com/articles/10.1186/s12889-018-5689-x>

IOM Contributor:

- Kolitha Wickramage (Manila)

Featured Article

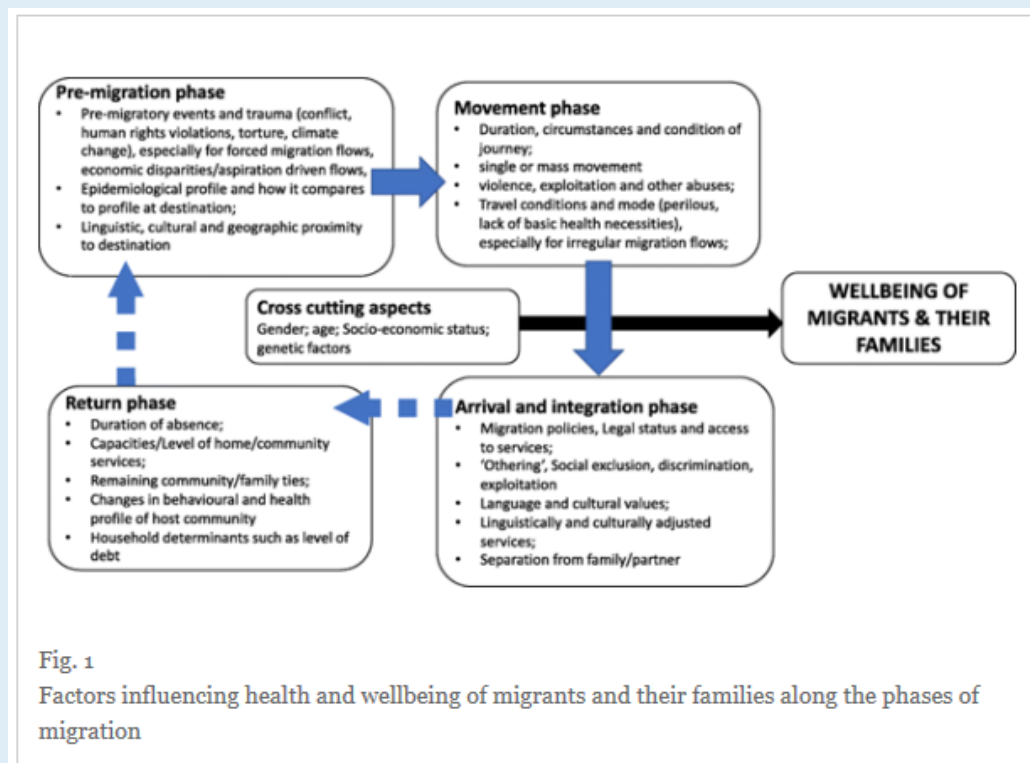


Kolitha Wickramage, Jo Vearey, Anthony B. Zwi, Courtland Robinson, and Michael Knipper. "Migration and health: a global public health research priority." BMC Public Health, 2018, 18:987.

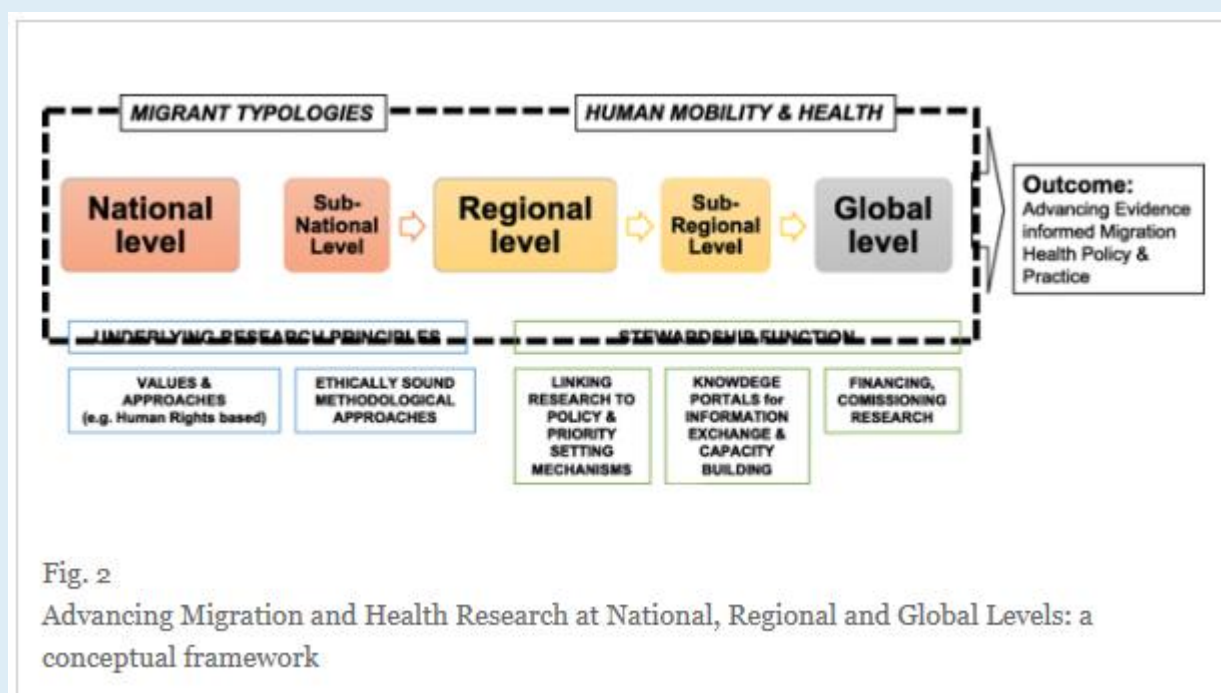
Abstract

Background

With 244 million international migrants, and significantly more people moving within their country of birth, there is an urgent need to engage with migration at all levels in order to support progress towards global health and development targets. In response to this, the 2nd Global Consultation on Migration and Health – held in Colombo, Sri Lanka in February 2017 – facilitated discussions concerning the role of research in supporting evidence-informed health responses that engage with migration.



In order to account for immediate, long-term and inter-generational impacts on health outcomes, migration and health research should: (1) incorporate the different phases of migration (Fig. 1); (2) adopt a life-course approach; and, (3) integrate a social determinants of health (SDH) approach.



Above shows a framework that brings together the identified key components for advancing a global, multi-level, migration and health research agenda (Fig. 2). Two areas of focus to advance the migration and health research agenda were identified: (1) exploring health issues across various migrant typologies, and (2) improving our understanding of the interactions between migration and health. Advancing research in both areas is essential if we are to improve our understanding of how to respond to the complex linkages between both international and internal migration and health.

Conclusions

Drawing on discussions with policy makers, research scholars, civil society, and United Nations agencies held in Colombo, we emphasize the urgent need for quality research on international and domestic (in-country) migration and health to support efforts to achieve the Sustainable Development Goals (SDGs). The SDGs aim to 'leave no-one behind' irrespective of their legal status. An ethically sound human rights approach to research that involves engagement across multiple disciplines is required. Researchers need to be sensitive when designing and disseminating research findings as data on migration and health may be misused, both at an individual and population level. We emphasize the importance of creating an 'enabling environment' for migration and health research at national, regional and global levels, and call for the development of meaningful linkages – such as through research reference groups – to support evidence-informed inter-sectoral policy and priority setting processes.

See full article:

<https://bmcpublichealth.biomedcentral.com/articles/10.1186/s12889-018-5932-5>

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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 Society of Tropical Medicine and Hygiene*, 2018, 98(3): 92-928.

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://www.ajtmh.org/content/journals/10.4269/ajtmh.17-0725>

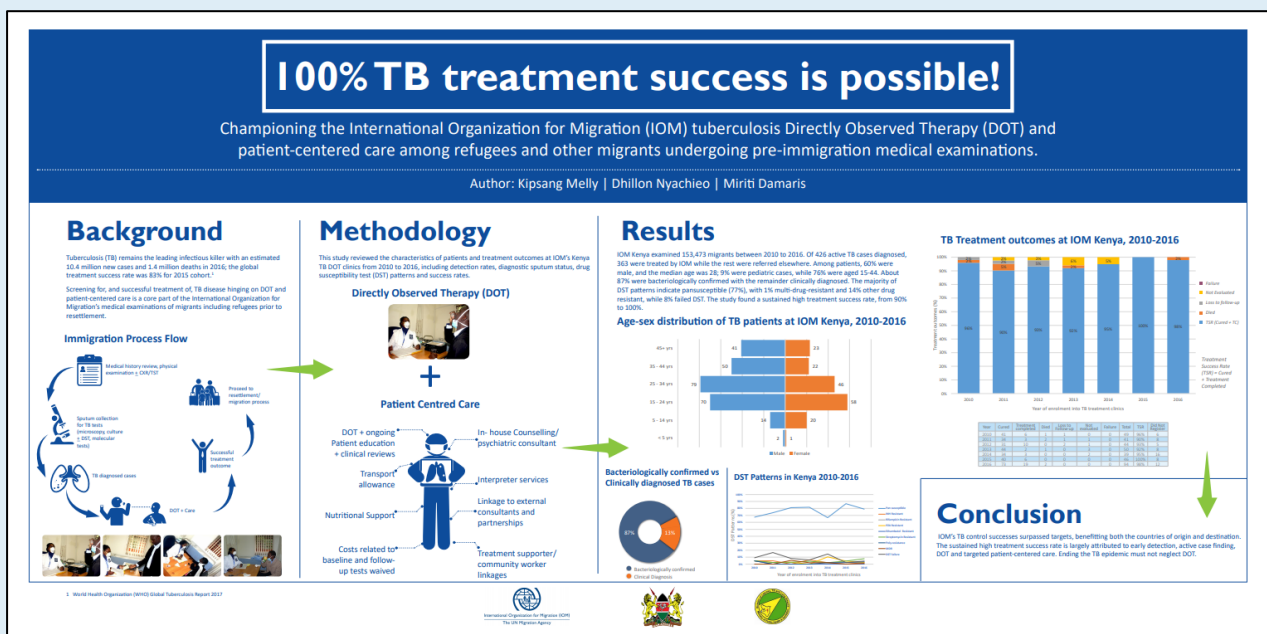
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Poster Presentation

Kipsang Melly, Dhillon Nyachieo, and Miriti Damaris (IOM Kenya). *100% TB treatment success is possible: Championing the International Organization for Migration (IOM) tuberculosis DOT and patient-centered care among refugees and other migrants undergoing pre-immigration medical examinations.* Poster presented at the North American Refugee Health Conference, Oregon, USA on 7-9 June 2018.

This poster won the "Best Scientific Poster, 2018 North American Refugee Health Conference."

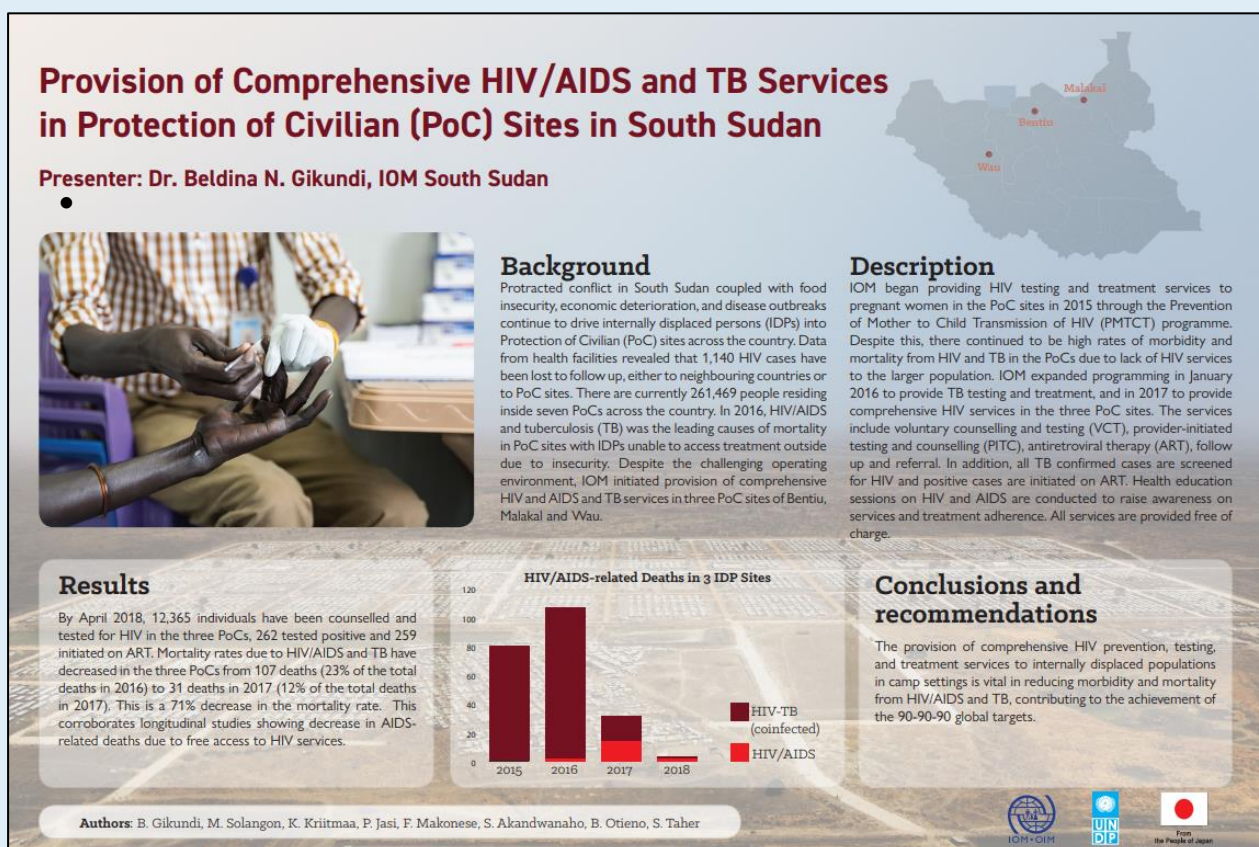


Download a copy of the poster presentation:

<https://migrationhealthresearch.iom.int/100-tb-treatment-success-possible-championing-international-organization-migration-iom-tuberculosis>

Poster Presentation

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Download a copy of the poster presentation:

<https://migrationhealthresearch.iom.int/provision-comprehensive-hiv-aids-and-tb-services-protection-civilian-poc-sites-south-sudan>

Poster Presentation

Abdikadir Omar Ismail (IOM Somaliland). *Results of a third round of HIV surveillance amongst female sex workers in Hargeisa, Somaliland.* Poster presented at the 22nd International AIDS Conference (AIDS 2018), Amsterdam, Netherlands on 23-27 July 2018.

Results of a third round of HIV surveillance amongst female sex workers in Hargeisa, Somaliland

Presenter: Dr. Abdikadir Omar Ismail, IOM Somaliland

Background

Previous rounds of HIV surveillance conducted in Hargeisa, Somaliland in 2008 and 2014 indicate a concentrated HIV epidemic among key populations, particularly female sex workers (FSW). HIV prevalence among FSW was 5.2% in 2008 and 4.8% in 2014. A third round of surveillance was conducted in 2017.

Methodology

A cross-sectional integrated biological and behavioural surveillance survey among FSW was undertaken between April and June 2017. A total of 238 FSW participated in the study. A face-to-face, structured interview using electronic data collection was completed and blood samples collected for serological testing. All three surveillance surveys used respondent driven sampling and data was analysed using RDS Analysis for comparing results.

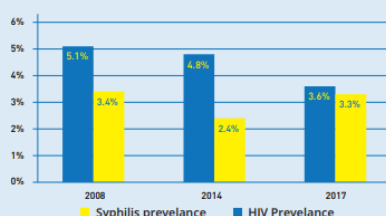
Results

The 2017 IBS survey showed a steady decline in HIV prevalence among FSW in Somaliland. However, while prevalence of active syphilis among FSW decreased from 2008 to 2014, it rose again in 2017.

FSW use of condoms with their most recent transactional or non-transactional client has increased steadily from 25.6% (2008) to 31.5% (2014) to 36.6% (2017). The proportion of FSW who know their HIV status from an HIV test in the previous 12 months is also trending upward.

HIV knowledge among FSW has improved significantly: 48.9% of FSW in 2017 correctly identified ways of preventing sexual transmission of HIV and rejected major misconceptions, comparing to 10.4% in 2014 and 6.4% in 2008. However, key indicators around stigma and discrimination remain sub-optimal: 30.7% of FSW avoid accessing services because of stigma, and prevention programmes are only reaching 23.1% of the population.

HIV/Syphilis Prevalence



Note: The CIs for HIV & syphilis prevalence overlapped in all 3 surveys. Thus the observed differences may be due to sampling variation.

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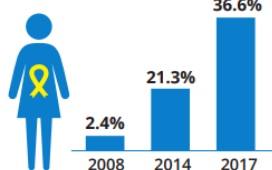
238

Number of female sex workers (FSW) that participated in the study

CONDOM USAGE

2008 - 25.6% | 2014 - 31.5% | 2017 - 36.6%

FEMALE SEX WORKERS THAT KNOW THEIR STATUS



Conclusion

HIV prevalence among FSW remains five times higher than in the general population, highlighting the need for targeted prevention, care and treatment programming. The 2017 survey revealed improvements in condom usage, HIV testing, and HIV knowledge. However, high stigma and discrimination of FSW persist, reducing access and utilization of HIV services, while limiting the effectiveness and impact of broader prevention and treatment initiatives.

There is critical need for HIV stakeholders in Somaliland to develop and implement targeted programs that address the underlying gaps driving high HIV prevalence among FSW.



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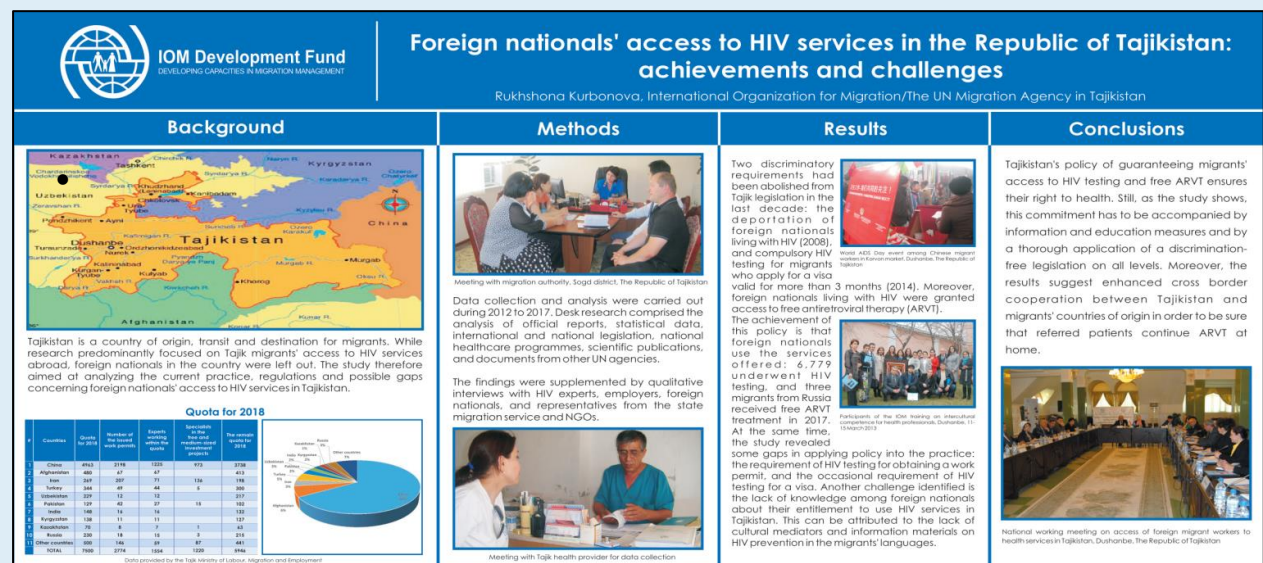


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<https://migrationhealthresearch.iom.int/results-third-round-hiv-surveillance-amongst-female-sex-workers-hargeisa-somaliland>

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<https://migrationhealthresearch.iom.int/foreign-nationals-access-hiv-services-republic-tajikistan-achievements-and-challenges>

Reflection

Data protection and ethics in research

Everyone who has ever engaged in research would know that adhering to data protection principles and ensuring ethics in research are of paramount importance. But what do we really mean when we say data protection and ethics in research?

As a researcher, you need to:

- ✓ Respect the privacy of research participants
- ✓ Protect the confidentiality of personal data
- ✓ Inform the research participants how the information that they consented to is shared, used and analyzed

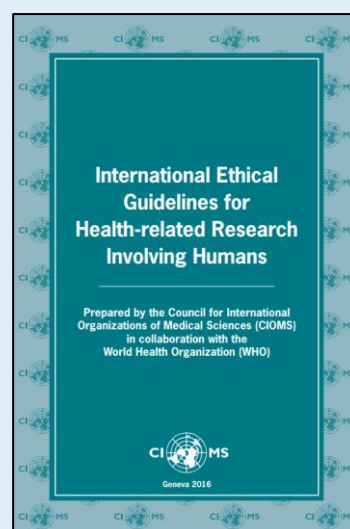
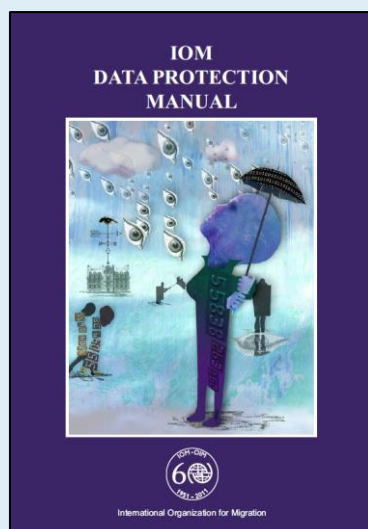
Data Protection

As a researcher, you need to:

- ✓ Ensure that the risk of harm to the research participants are minimized
- ✓ Obtain informed consent from research participants
- ✓ Avoid using deceptive practices

Ethics in Research

Below references aim to enlighten and guide researchers on these two principles.



To learn more, or to download a copy of the manuals:

<http://publications.iom.int/books/iom-data-protection-manual>

<https://cioms.ch/wp-content/uploads/2017/01/WEB-CIOMS-EthicalGuidelines.pdf>

Comments or Questions

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