



International Organization for Migration (IOM)
The UN Migration Agency

IOM Regional Office for South-Eastern Europe, Eastern Europe and Central Asia

Migration Health Division

Annual Newsletter 2016



*An IOM-supported health clinic in Fatih, Istanbul, providing primary health consultations to Syrian refugees,
© IOM Turkey 2016*

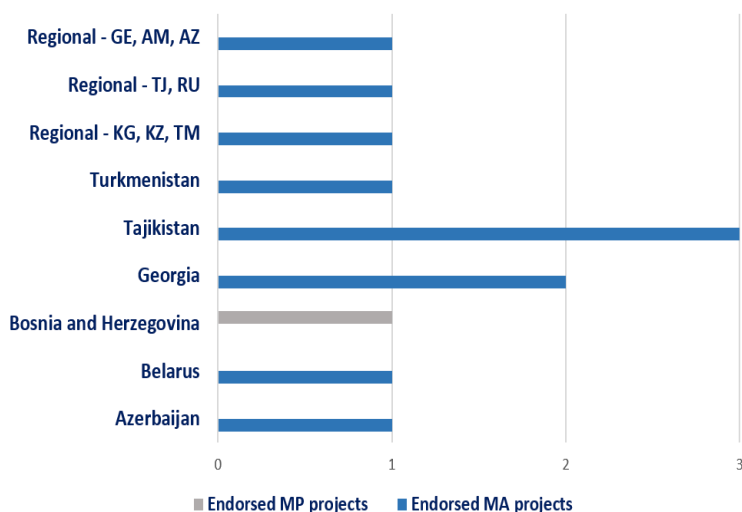
IN THIS ISSUE: *Overview of projects implemented in 2016 and next steps, Regional Migration Strategy Development Workshop, events, publications and much more...*

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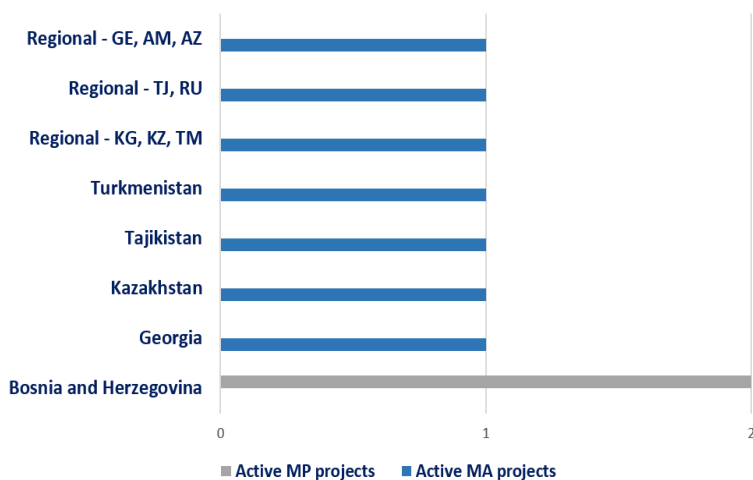
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OVERVIEW OF PROJECTS IN THE REGION

Endorsed Projects by Country, 2016



Active Projects by Country, 2016



FOREWORD

Welcome to the first issue of the Regional Migration Health Division for South-Eastern Europe, Eastern Europe and Central Asia's Annual Newsletter for 2016!

The newsletter provides an overview of selected migration health projects, events and activities of country missions and the regional office in the first year after the official establishment of the migration health specialist for the region. It also lists down the links to publications, abstracts and materials on migration health that can provide useful references for our work in the region. Picked from among several health projects produced and implemented in the region, the projects presented were chosen for their unique and venturous way of tackling migration and health based on the context and concerns of the country where they are implemented. They are described in short briefs to inspire and provide some project ideas for country missions in the region facing similar issues and concerns on migration and health.

In 2016, the Regional Migration Health Division have reviewed a total of 15 project proposals on migration health. Out of these 15 projects, 12 were endorsed for submission to the donor and 9 were successfully funded. By the end of the year, the region has 9 active migration health projects – of which 7 are on Health Promotion & Assistance for Migrants (MA/H2) and 2 on Migration Health Assistance for Crisis Affected Populations (MP/H3). Two DOE projects in Turkey have health components, and they are featured in this report.

Lastly, I would like to take this opportunity to thank Ms. Elena Imberti for consolidating and producing this newsletter, and for her valuable support first an Intern in August 2016 and now as our Regional Migration Health Assistant (Consultant). Elena is moving on to IOM Rome to further her career in migration health and she leaves behind “a big shoe to fill”, but most importantly, she has initiated and left behind this newsletter that will now be updated annually. **Arrivederci** Elena, and welcome to the first MHD Annual Newsletter!

Dr. Jaime Calderon, Regional Migration Health Advisor



The RO Vienna MHD team:
Dr. Jaime Calderon (Regional Thematic Specialist) and Ms. Elena Imberti (Consultant)

Building the Capacity of the BiH Institutions to Address and Respond to Mental Health Issues amongst Defence Personnel - PREVENTIVA

IOM Office: Sarajevo, Bosnia and Herzegovina	PRISM ID: MP.0156	Programme area: H3, Migration Health Assistance for Crisis Affected Populations
Project Duration: 24 months	Budget: 842,467 EUR	Donor: Kingdom of Norway, Kingdom of Denmark
Project Dates: 1 October 2013—30 September 2015 (No-cost extension 1 October 2015-30 June 2017)		

BACKGROUND

The overall objective of this Project is to enhance the capacities of the Ministry of Defence (MoD), and the Ministry of Health (MoH) of Federation of Bosnia and Herzegovina (FBiH), and the Ministry of Health and Social Welfare of Republika Srpska (RS) in providing a systematic response to mental health issues of current and discharged personnel of the Armed Forces of Bosnia and Herzegovina (AFBiH), as well as in the context of their participation in peacekeeping missions. This action has been initiated by relevant Bosnia and Herzegovina (BiH) authorities, facilitated by IOM and supported by the Nordic Baltic Initiative (NBI) countries.

OBJECTIVE

To design and implement a systematic response to the potential negative impacts of past and present conflict-related experiences on the mental health and psychosocial well-being of new recruits, discharged and active duty staff of the MoD, as well as those involved in peacekeeping missions and their family members. These peacekeeping missions include around 670 members of the Armed Forces of BiH that have participated participating in peacekeeping

missions in Afghanistan and Iraq, as well as UN Missions in Congo and Eritrea.

ACHIEVEMENTS IN 2016

- 6 workshops conducted by MoD/AF BiH psychologists covering different topics, reaching more than 3,000 members of Armed forces BiH at different locations.
- MoD/AF BiH system was presented in 19 centres for mental health aiming to present mental health difficulties faced by military personnel.
- Standard Operative Procedures for MoD/AF BiH psychologists were developed and approved.
- Two study visits to the Kingdom of Norway were organized with MoD/AF BiH psychologists learning about the work of military psychologists in the Kingdom of Norway in the field of selection of soldiers, officers and pilots.

NEXT STEPS

- 11th Steering Committee meeting in February 2017;
- Capacity building trainings for psychologists. The next workshop will be held in March and related to Communication skills.
- Organisation of Symposium of military psychology

- A training on the selection of soldiers for specific professions, such as Snipers, Deminers, etc., will be organised with Norwegian experts.

Following the implementation of the workshop “Psychological and physiological basics of lying and nonverbal communication”, an advanced training will be organised for selected MoD/AF BiH personnel.



Psychological selection of officers and NCOs, September 2016, Photo by Vesna LEZAJA

IOM Tajikistan's engagement for the health of migrants

BACKGROUND

The Republic of Tajikistan has an extremely high level of out-migration compared to other central Asian countries. Every third household is reported to have at least one family member who works abroad. The vast majority (98 per cent) work in the Russian Federation.

The movement of people across borders, coupled with variable access to health care and health seeking behaviour, makes migrants a particularly vulnerable group.

The population faces double the burden of high communicable and high non-communicable diseases compared to the rest of the region. Infant and maternal mortality also remain comparatively high, although major improvements have been made in recent years.

Tuberculosis remains a key health challenge, with the country being among the 27 high MDR-TB burden countries in the world. The highest morbidity rates of tuberculosis are registered in Gorno-Badakhshan Autonomous Region and Khatlon Provinces, the lowest is registered in Sughd Province. From the number of new registered TB cases around 55 per cent are male and 45 per cent are women (male and female ratio is 1.2). The disease mainly affects the young and working part of the population: 70% of all new TB cases are people aged 15 to 44 years old.

Among patients registered with TB in Tajikistan, 11 per cent are diagnosed with multidrug-resistant (MDR) TB. There is a lack of drug-supply management and there are problems with the procurement of quality-assured anti-TB drugs.

The TB detection rate is very low and the TB information system is weak and unreliable. IOM found that diagnostic delays, poor community support for TB control, and issues of accessibility in receiving TB services in remote areas were found to be the most significant reasons for tuberculosis prevalence among migrant workers in Tajikistan. Returned migrant workers to the community with undiagnosed pulmonary tuberculosis pose the greatest

source of transmission and in settings where TB is endemic, may result in more than 20 secondary infections.

IOM'S MIGRATION HEALTH WORK IN TAJIKISTAN

IOM has been cooperating with the government of the Republic of Tajikistan to develop a multi-sectoral approach for migrants' health promotion through capacity building among the state migration service and by involving them in implementing health interventions in the field. Local migration services, in collaboration with the health providers, contribute to active TB detection among migrants. In cooperation with the Ministry of Transport and the Republic Healthy Lifestyle Promotion Center, the migration service distributes informational brochures on prevention of STIs, HIV and TB among migrants in Tajik railway stations, airport and bus terminals.

IOM has built a local NGO network consisting of more than 30 non-governmental organizations working on the promotion of migrants' health. Local NGOs from the rural communities strengthened their capacity in the prevention of sexually transmitted infections, HIV and Tuberculosis among migrants and their families. Currently, many of them have extended their target groups and are actively working among other vulnerable sectors of the population, such as injection drug users, men who have sex with men, and commercial sex workers.

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Working group discussion among community leaders, Kulob, August 2016, IOM Tajikistan

PROJECTS UNDER IMPLEMENTATION

Currently, IOM is implementing the migration component of the USAID TB Control Program as part of the work of Project HOPE. Within the USAID TB Control Program, IOM has piloted innovative activities for TB prevention and care among migrants through multi-sectoral approaches, community mobilization, empowering migrants through peer education, providing services for TB treatment adherence (including social support via income generation grants), promoting a tolerant attitude against stigma, and limiting discrimination by conducting public events. As a result, from February to August 2016, 56 TB cases were detected including 36 TB cases among migrants in the four target districts Danghara, Boljuvon, Temurmaliq, Farhor. This exceeded the target of detection of 23 TB cases among migrants.

KEY ACTIVITIES IN 2016

- Improving health seeking behavior of migrants through informational campaign and community mobilization, as well as peer education;
- Strengthening the multi-sectoral approach for TB prevention and care (sensitizing migration service, non-health staff within USAID TB Control Program, IDF project and cross border project with Afghanistan);
- Enhancing cross-border cooperation for TB control and care among migrants: jointly with health specialists of the Ministry of Health of Afghanistan and Tajikistan, IOM has developed a brochure on TB prevention among women; extended activities on TB cross-border control and care, in cooperation with the migration and health authorities of the Russian Federation and the Republic of Tajikistan (“Technical Support & Capacity Building To Improve Cross Border TB Control And Care Of Tajik Migrant Workers”);
- Increasing TB treatment adherence by providing psychosocial services including livelihood support (USAID TB Control Program and Norway project); building capacity of the migration and health agencies, as well as local NGOs for TB prevention and active TB detection: staff of the migration services and Healthy Lifestyle Promotion Centers, Republic Clinical Center on Family Medicine, Republic TB Control Center regularly take part in IOM trainings on migration and health. IOM provides technical support to Migration Health Department of the Republic Healthy Lifestyle Promotion Center through on the job consultations and trainings through the operating website www.rec.tj, and the active Hotline 935 600 500 (seven NGOs trained on TB prevention among migrants in 2016 as a part of the project “Tajik-Afghan Integration, Resilience and Reform Building”; and
- Developing informational, educational and communication materials on prevention sexually transmitted infections, tuberculosis and HIV among migrants.



Migrant reading a brochure distributed during World TB Day, IOM Tajikistan

Addressing TB, MDR/XDR-TB and TB-HIV among Migrant Workers In Kazakhstan

IOM Office: Astana, Kazakhstan	PRISM ID: MA.0349	Programme area: H2, Health Promotion & Assistance for
Project Duration: 36 months	Budget: USD 146,659	Project Partner or Donor: Project Hope
Project Dates: July 2015—September 2017 (no-cost extension till Dec17)		

BACKGROUND

The high incidence of TB and drug-resistant TB in Kazakhstan (KZ) poses a serious threat to the public health of its population. According to WHO in 2013, TB incidence is 115 cases of morbidity per 100,000, positioning Kazakhstan the fifth highest among the 53 countries of the WHO European Region.

The conditions in which migrants move, work and live can increase their vulnerability to TB infection. With over a million registered migrants and an equally high estimated number of undocumented migrants from Uzbekistan, Kyrgyzstan, Tajikistan and China, access to treatment of TB is of fundamental importance. Over the last 10 years, the incidence of TB in the country has decreased by 49.1%, and the mortality rate by 67%. Currently migrants fail to access health care services since the legal framework does not provide full medical treatment to migrants with TB.

The project is enhancing the Government of Kazakhstan's operational and institutional established mechanisms to fully deliver TB related health services to migrants referring to the 'Minimum Package for Cross-border TB Control and Care in the WHO European Region: a Wolfheze Consensus Statement'. IOM is providing technical assistance to develop a legal framework, to ensure migrants' health and wellbeing in Kazakhstan, with a focus on accessing health services for TB diagnosis and treatment.

OBJECTIVES

IOM's role in this project focuses on the following areas:

- Provide technical assistance for the development of a legal framework on migrants' access to health services, with a focus on TB services as recommended in the 'Minimum Package for Cross-border TB Control and Care in the WHO European Region: a Wolfheze Consensus Statement'.
- Provide technical assistance for the development of training materials on health/TB and migration for immigration officers, including border guards, as well as facilitate training sessions.
- Participate and provide expert assistance during inter-sectorial coordinating meetings organized by Project Hope at the national level with interested parties and relevant

organizations.

- Share materials from IOM KZ database (e.g. reports, international and national laws on human rights, etc.) with the Government of Kazakhstan to develop a legal and procedural framework for the TB control among migrants referring to minimal service package recommended by WHO.
- Participate in high-level meetings to exchange experiences on prevention, infection control, contact management, diagnosis and treatment of TB.
- Disseminate information about the project through IOM's website for Kazakhstan and Central Asia as well as through other available channels globally.
- Participate in public information campaigns on World TB Day and International Migrants Day.
- Coordinate with IOM country offices in Central Asia to ensure close collaboration with IOM country offices to disseminate information about the program and advocate for regional cooperation
- Support Project Hope in the development of pre-departure orientation package for migrants with a focus on migrants' health (through oral advice; participation at meetings; and making IOM publications available).

ACHIEVEMENTS IN 2016

- Contributed to the development of the protocol for medical escorting of migrants with TB during their return to the countries of origin;
- Shared with the project partners on the Pre-departure orientation of migrants in the area of receiving medical services in the countries of destinations;
- Contributed to the capacity building of representatives of state officials and medical services in the Pre-departure orientation of migrants;
- Contributed to the capacity building of NGOs working with migrants in the migration legislation and migrants' rights in Kazakhstan;
- Contributed to the development of two Bilateral agreements on cross-border

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PROJECTS UNDER IMPLEMENTATION

control, prevention and treatment of tuberculosis in the Central Asian region;

- Increased project's visibility in public through distribution of 20,000 information materials in 12 regions in Kazakhstan via NGOs partners;
- Information campaign devoted to the International TB Day organized through dissemination of the materials among stakeholder organized ;
- Contributed to enhance partnership with governmental partners, through the Thematic Working Group on developing a new Concept on Migration in Kazakhstan; and
- Direct assistance to 10 migrants with TB (legal, humanitarian, AVR).



Focus on: High level regional meeting on TB control among migrants Astana, Kazakhstan, 7-8 Dec 2016

The International Organization for Migration (IOM) participated to a high-level meeting on Tuberculosis control and care among migrants, organized by Project HOPE and held in Astana, Kazakhstan, on 7-8 December.

The meeting was also attended by the Ministry of Health and Social Development of the Republic of Kazakhstan, the World Health Organization (WHO), the Global Fund and USAID. It was meant to offer the participants a ground to discuss the ongoing progress in Tuberculosis control among migrants and to develop an Action Plan or Road Map for the next 12-months period.

IOM provided the international expertise on applicable international standards and best practices concerning Migration Health and Tuberculosis. IOM's experience on counting the incidence rate (notification rate and morbidity between non-registered migrants) were shared with the participants.

The Action Plan or Road Map was elaborated in the framework of the Comprehensive Plan on Tuberculosis (TB) Control in the Republic of Kazakhstan for 2014-2020, calling for activities to address TB among migrants and improve their access to medical services.

"For the second year running we gather for the joint struggle against tuberculosis at the regional level," said Linda Heitzman, Executive Vice President at Project HOPE. "This meeting shows the effective cooperation in the fight against TB both at the regional level, and between government agencies, international organizations and civil society. We are pleased to note that during the year, thanks to effective dialogue, practical steps were taken for the conclusion of bilateral agreements on cross-border TB control. It will allow to implement long-term mechanisms in the fight against tuberculosis".



High-level regional meeting on TB control among migrants on 7-9 December, IOM Kazakhstan 2016

Awareness Raising on the Dangers of Drug Abuse among At-Risk Vulnerable Groups in Georgia

IOM Office: Tbilisi, Georgia	PRISM ID: MA.0367	Programme area: H2, Health Promotion & Assistance for Migrants
Project Duration: 12 months	Budget: USD 70,000	Donor: Bureau of Int. Narcotics and Law Enforcement Affairs (INL)
Project Dates: June 2016—June 2017		

BACKGROUND

While there has been significant progress in the Government of Georgia's collective efforts on drug demand reduction, challenges remain in addressing this issue. The key obstacles include the weak capacities among local actors and community leaders to sustain mechanisms for primary prevention of drug abuse and targeting young people in particular, and the lack of relevant information campaigns to address the issue, especially with regards to vulnerable groups at risk as internally displaced persons (IDPs), migrants and ethnic minorities.

Parents and professionals working with young people lack relevant knowledge and capacities for mainstreaming substance abuse prevention, while initiation into drugs begins often during adolescent/teenage years and usually peaks between 18 to 25 years. Peer pressure, curiosity and lack of awareness are often cited as the main reasons for youth getting involved into substance abuse.

IOM Georgia is addressing the issue by promoting effective awareness raising efforts, and organizing sustainable community-based information campaigns on prevention of substance abuse and addiction, focusing on young people and targeting vulnerable groups at risk through mobile outreach by promoting healthy lifestyles and alternative behaviour models.

In pursuit of this objective, IOM in collaboration with partners will launch a National Drug Demand Reduction Campaign through mobile outreach and based on participatory approaches. Three consecutive processes will be initiated:

- 1) the working groups comprised of local multi-disciplinary teams will be established to identify region-specific communication strategies of the Campaign.
- 2) commitment of local actors will be cultivated to mainstream primary prevention in their routine activities.
- 3) a countrywide Campaign will be conducted in key three regions of Georgia by combining traditional mass-media, social media and community-based participatory interventions.



ACHIEVEMENTS IN 2016

In 2016, the required preparatory work was performed to conduct the baseline and follow-up survey aimed at measuring the impact of the drug abuse prevention campaign. Key experts of the National Anti-Drug System were contracted representing the National Center for Disease Control and Public Health (NCDC) and Ilia State University to ensure qualified implementation of the survey, as well as the sustainability of the intervention. The survey design document was elaborated, revised and approved. The Ministry of Education and Science (MoES) of Georgia gave the final clearance of the survey design and granted permission to IOM to enter randomly selected seven secondary schools located in three target regions. To ensure high visibility and sustainability of the project, its activities are mainstreamed within the 2017-2018 National Action Plan on Combatting Drug Abuse. Relevant partnership frameworks have been established with governmental and non-governmental sector representatives: 26 officials were outreached and engaged in 2016. In addition, dialogue was established with the State Prosecutor's Office of Georgia and the Ministry of Youth and Sports Affairs, which also have their own, national information sessions relating to risks of psychoactive substances' abuse as well as aimed at promotion of healthy lifestyle and sport activity among youth to take place throughout Georgia within secondary school settings. A good cooperation rapport has been established with local self-governing structures in all target regions of the project, by hosting official project launch meetings in Tbilisi, Poti, Anaklia, Zugdidi and Mestia, which laid solid foundations for successful implementation of the campaign throughout 2017.

Phase 2: Contribute and extend the Drug reduction efforts among Internal and International Migrants in Turkmenistan

IOM Office: Ashgabat, Turkmenistan	PRISM ID: MA.0347	Programme area: H2, Health Promotion & Assistance for Migrants
Project Duration: 18 months	Budget: USD 100,000	Donor: Bureau of Int. Narcotics and Law Enforcement Affairs (INL)
Project Dates: September 2015—February 2017		

BACKGROUND

The IOM Mission in Turkmenistan, in partnership with Turkmenistan's Ministry of Health and Medical Industry, is implementing the project: "Phase 2: Contribute and Extend the Drug Reduction efforts among Internal and International Migrants in Turkmenistan" funded by US Department of State's Bureau of International Narcotics and Law Enforcement Affairs.

The present project is a follow-up of the previous INL funded project (2014-2015) on reducing drug use and focuses on extending the drug reduction efforts among internal and international migrants in the regions (*velayats*) of Turkmenistan. The objective of this 18-month project is to contribute to the drug reduction efforts of the Government of Turkmenistan by preventing substance abuse and identifying and referring drug users among external and internal migrants to relevant services. In the implementation of the project IOM will primarily partner with the Ministry of Health, but also with law enforcement authorities, migration authorities as well as the representatives from local government and NGOs and public organizations.

OBJECTIVES

Activities envisaged during the course of this project will aim to:

- Increase the knowledge and capacity of the regional health workers, relevant law enforcement officers and representatives of the local authorities on migrants' right to health, preventing substance abuse and drug trafficking, and identifying and referring migrants with substance abuse problems to relevant services;
- Extend the knowledge of central and regional level health workers, relevant law enforcement agencies and local governance authorities on a comprehensive approach to countering-drugs and sustain interest in applying the good practices in the country context; and
- Increase the awareness of international and internal migrants on the harmful effects of drug use and abuse as well as on existing treatment possibilities and referral systems in the regions of the country.

ACHIEVEMENTS IN 2016

- Trainings on migration, health and substance for the regional health workers, relevant law enforcement officers, and local authorities were conducted on 4-5 July 2016 in Mary, on 7-8 July 2016 in Ashgabat and on 22-23 August in Turkmenbashi. The trainings conducted strengthened their knowledge and understanding of the Migrants' Right to Health, Comprehensive Approach to Protection of the Migrants' Health including Prevention of Substance Abuse among Migrants.
- Awareness-raising campaign activities implemented within this project in the second semester of 2016 increased the awareness of international and internal migrants of the harmful effect of drug use and abuse and brought attention to the availability of treatments.
- A regional workshop held in December facilitated the discussion focusing on finding the effective ways of preventing substance abuse among youth, mobile groups of the population including migrants and refugees. In this regard, the best practices of Finland, Georgia, Norway, Russian Federation, Turkey and Turkmenistan were enriching and complimentary at the same time.



Picture from www.healthtap.com

PROJECTS UNDER IMPLEMENTATION

Focus on: Regional Workshop on Migration, Health and Prevention of Substance Abuse among Migrants - Ashgabat, Turkmenistan 5-6 December 2016



IOM Turkmenistan, in coordination with the IOM Regional Office in Vienna, the Ministry of Health and Medical Industry and the Ministry of Internal Affairs, organized a “Regional Workshop on Migrants’ Right to Health, Comprehensive Approach to Protection of the Migrants’ Health, Including Prevention of Substance Abuse”, on 5-6 December in Ashgabat, Turkmenistan.

During the Regional Workshop, interlinkages between migration and substance abuse were widely discussed and relevant experiences of different countries, such as Finland, Georgia, Norway, Russian Federation and Turkey, were presented, with the objective to exchange best practices to address the challenges of migration and substance abuse.

The Regional Workshop provided an opportunity to better apprehend the linkages between migration and substance abuse globally. The overview initiated in the frame of the regional workshop, increased the institutional knowledge and understanding within IOM globally on the linkage between migration processes and substance abuse. The final findings of the working paper on the overview of the linkage between migration processes and substance abuse were captured in the final report on the regional workshop along with the best practices and experiences of participating countries of the regional workshop.



Group work on challenges and the way forward for prevention of drugs/substance abuse , IOM Turkmenistan 2016

Health component of DOE projects in Turkey

Project title: Enhancing Access to Services, Strengthening Resilience of Host Communities, and Facilitating Integration of Refugees

IOM Office: Ankara, Turkey

PRISM ID: CS.0711

Programme area: H3, Migration Health Assistance for Crisis-Affected Populations

Project Duration: 18 months

Budget: USD 6,700,000

Donor: European Union

Project Dates: July 2015—January 2017

BACKGROUND

Since the beginning of the crisis, the Government of Turkey, with the support of the international community, has been providing comprehensive assistance to Syrians living inside the camps. Assistance and services for those living outside of the camps has been less extensive with variations between provinces and cities as to the availability and access to services and assistance.

The adoption of the Temporary Protection (TP) Regulation in October 2014 extends protection and assistance to all Syrians in Turkey and provides refugees with rights and duties and the framework to access health care, education, the labour market and social assistance (the latter two of which to be further refined by the relevant ministries). Despite the regulation, the large number of refugees has stretched national structures and capacity to the utmost, particularly in those areas which host a high proportion of Syrians, including the border provinces as well as the city of Istanbul.

In light of this, IOM's strategy for 2015 as indicated in the Regional Refugee Resilience Plan (3RP) is two-pronged; firstly, i) provision of urgent humanitarian assistance focusing on the distribution of food, non-food items, cash vouchers, winterization and provision

of transportation and ii) to ease the burden on national and local structures through the establishment of multi-service centers offering assistance in psychosocial and legal support, education, vocational training and health care. IOM has been working in coordination and partnership with the Government of Turkey and relevant line-ministries, as outlined in the 3RP.

ACHIEVEMENTS IN 2016

In 2016, IOM Turkey assisted a total of 43,794 refugees and vulnerable migrants with primary health consultations at a health clinic in Fatih, Istanbul.

The clinic provided consultation services in five medical domains: namely, General Practice and Consultation, Paediatrics, Gynaecology, Internal Diseases, and General Surgery. IOM also provided the beneficiaries with medical laboratory and free pharmacy services.



On the left: A pediatrician examining a Syrian boy at a primary health clinic in Fatih, Istanbul

On the right: An IOM-supported health clinic in Fatih, Istanbul, providing primary health consultations to Syrian refugees,

© IOM Turkey 2016

PROJECTS UNDER IMPLEMENTATION

Project title: Humanitarian Assistance and Social Stabilization for Syrian Refugees in Turkey

IOM Office: Ankara, Turkey

PRISM ID: DP.1424

Programme area: H3, Migration Health Assistance for Crisis-Affected Populations

Project Duration: 12 months

Budget: USD 1,500,000

Donor: European Union

Project Dates: March 2016—February 2017

A Syrian refugee being assisted with transportation to a health facility from Adiyaman Camp, © IOM Turkey 2016

BACKGROUND

With this project, IOM proposes to ensure the sustainability of the activities previously funded by the Government of Japan through the provision of transportation services from camps to health facilities and between camps as needed, provision of transportation assistance for children to access schools. IOM is also proposing to continue supporting the Support to Life (STL) community center in Urfa that is providing a range of recreational, educational and psychosocial support to refugees and the host community.

ACHIEVEMENTS IN 2016

In 2016, IOM provided transportation assistance to 12,085 Syrian refugees in Adiyaman Camp to enable them to access health facilities.

The transportation runs between the Camp and hospitals in Adiyaman's city centre every day on a regular basis. For patients with chronic and/or severe illness, IOM also organized transportation between the Camp and the larger neighbouring cities, including Gaziantep, Adana, Diyarbakir and Malatya, where general hospitals are located. In case of emergency medical cases, IOM immediately provided transportation assistance regardless of date and time.



Little Emel Will Sing

Emel is a five-year-old girl from Syria, living in Gaziantep with her mother, grandmother and older sister. Little Emel suffered from a congenital cleft palate and was in need of surgery to be able to speak and eat freely. Her mother took Emel to a hospital one year ago but was not able to receive an operation as the surgery schedule was full.

After receiving Emel's case from WFP, IOM Turkey's **Emergency Case Management (ECM)** team closely followed up on her condition at a hospital in Gaziantep, but had to face the issue of a long queue for surgery once again. To provide Emel timely assistance, IOM examined the possibility of referring her case to a hospital in another city. This worked and Emel was eventually able to undergo surgery at a hospital in Ankara. IOM provided Emel's family full support throughout the whole period, including transportation assistance between their home in Gaziantep and the hospital in Ankara.



The operation was successful and now Emel can eat liquid food without any pain. When IOM visited Emel's house, she greeted the ECM team with a big smile and proudly said, "I was never afraid of the surgery and I didn't cry at all during the operation!" A folk song lover, Emel is looking forward to the moment she can sing together with her sister as soon as her follow-up treatment is completed. IOM's ECM team will continue to monitor and assist this case until Emel has fully recovered.

Regional Migration Health Strategy Development Workshop

Regional Office Vienna, 26-27 September 2016

The International Organization for Migration (IOM) Regional Office in Vienna organized a regional workshop on Migration Health Strategy Development, held on 26-27 September 2016 in Vienna, Austria.

The overall objective of the workshop was to strengthen the capacity of Country Missions, covered by the IOM Regional Office in Vienna, to develop projects and engage government counterparts, donors and other partners in addressing the national and regional migration health issues and concerns.

The Country Missions responded very positively, with 16 migration health focal points from 14 different countries joining and providing useful. IOM staff from the field, the Regional Office in Vienna, and the HQ in Geneva discussed current frameworks, experiences and lessons learned in a number of fields related to migration health, including communicable and non-communicable diseases, sexual and reproductive health, migration health in emergencies and mental health and psychosocial support.

A special session was dedicated to cross-cutting programmes and areas of cooperation with the [Migrant Assistance Division \(MAD\)](#), the [Labour Mobility and Human Development Division \(LHD\)](#) and the [Immigration and Border Management Division \(IBM\)](#), to underline the importance of an integrated approach to health issues in connection with migration, as well as multi-sectoral coordination and cooperation.

The participants also had the chance to elaborate and present a draft migration health country strategy for 2017-2020, identifying priorities and stakeholders and laying the basis for further strategy consolidation and project development in the next few months.

The workshop provided an outstanding opportunity to share knowledge and good practices with a participatory approach, and paved the way for important cooperation and joint programming on migration health between different thematic areas, at a local, regional and global level.



The participants of the Regional Migration Health Strategy Development Workshop , IOM RO Vienna 2016

Addressing migrants' access to health, HIV/AIDS and TB services in Eastern Europe and Central Asia

Attended by: | Dr. Jaime Calderon | 17 June 2016 | Geneva, Switzerland

During the 32nd session of the Human Rights Council, the office of the UN Secretary General's Special Envoy on HIV/AIDS in Eastern Europe and Central Asia, together with the Permanent Missions of the Republic of Kazakhstan and the Kyrgyz Republic, organized a side event on migrants' right to health and access to HIV and TB services in Eastern Europe and Central Asia.

The side event was held on June 17, 2016 and featured the following panelists:

- **Jaime Calderon** Senior Regional Migration and Health Specialist, Regional Office, IOM
- **Pierpaolo de Colombani** Medical Officer, Joint Tuberculosis, HIV/AIDS and Hepatitis Programme, WHO Europe
- **Julie Hall** Head of Health Department, IFRC
- **Mariam Sianozova** Senior Regional Director for Europe/Eurasia, Project HOPE

The meeting was co-chaired by Prof. Michel Kazatchkine, UN Secretary General's Special Envoy on HIV/AIDS in Eastern Europe and Central Asia, and Ambassador Daniar Mukashev, Permanent Representative of the Kyrgyz Republic to the UN and other international organizations in Geneva.

Recognized previously by the Constitution of the World Health Organization and the Universal Declaration of Human Rights, the right to health has been reaffirmed internationally by the International Covenant on Economic, Social and Cultural Rights, followed by other international and regional instruments. Considering health as a human right implies that health services must be provided to all without discrimination and regardless of nationality or legal status. Migrants, particularly undocumented migrants, face major barriers to access health services in the host countries and are often exposed to poor living and working conditions, inadequate sanitation, discrimination and stigma.

Eastern European and Central Asian countries face a number of public health challenges associated with intra-regional migration and high levels of irregular and temporary labour mobility. Regional mobility contributes to widening the gap of access to tuberculosis treatment in a region that has one of the highest levels of multi-resistant tuberculosis in the world, while gaps in surveillance data prevent having a clear understanding of HIV/AIDS burden among this group of the population. In order to address the current gaps of HIV and TB response in the region and provide migrants with equal health treatment and access to HIV and TB services, countries are working to improve cross-border collaboration and adopt national and regional policies that remove legal and framework barriers.

As a result of the side event, the participants called for increased political commitment from countries and for the continuity of partnerships that are already in place to improve cross-border coordination in the region.

"Human rights are universal. They are also the rights of migrants. The right to health and decent care. The right to freedom from discrimination. The rights to equality before the law, to privacy, to work and education. The right to share in the advances of science."

Prof. Michel Kazatchkine



Addressing Health Vulnerabilities of Migrants in Large Migration Flows

Attended by: Dr. Jaime Calderon | 25 April 2016 | Geneva, Switzerland

The Asia-Europe Foundation (ASEF) and the International Organization for Migration (IOM) Regional Office for South Eastern Europe, Eastern Europe and Central Asia organized the Inter-Regional Roundtable Discussion on Addressing Health Vulnerabilities of Migrants in Large Migration Flows, held on 25 April 2016 in Geneva, Switzerland.

The primary concern of this inter-regional roundtable discussion was to address health aspects of the Andaman Sea Refugee Crisis and the European Migration Crisis as well as to build bridges between key stakeholders of migration and health in Europe and Asia through the sharing of knowledge and best practices on migrants' health issues.

The Roundtable brought together 40 participants, experts and representatives from the governments, UN agencies, inter- and non-governmental organizations and the academia to share their

expertise on the challenges and interventions made by countries and humanitarian actors to address the recent migration crises in Asia and Europe. The participants agreed on a set of recommendations categorized into three broad areas: increased state responsibility, structured healthcare response and social integration strategies in receiving countries, and seamless inter-sectoral collaboration among international and national institutions. Recommendations were developed with the underlying understanding that there should be long-term and all-rounded healthcare services focused on irregular migrants. In addition, these services should build on the 2030 Sustainable Development target of attaining universal health coverage and 'leave no one behind'. The meeting report of the proceedings is available on ASEF's website at: <http://www.asef.org/pubs/asef-publications/3897-report-of-an-inter-regional-roundtable-discussion>

Iran-Azerbaijan bilateral meeting to advance cross-border management of communicable diseases

Attended by: Serhan Aktoprak, CoM IOM Azerbaijan, Mazen Aboulhosn, IOM Turkey, Mehran Razhmer, IOM Iran | 25-27 September 2016 | Tabriz, Islamic Republic of Iran

The International Organization for Migration (IOM) Country Missions to Iran and Azerbaijan participated on 25-27 September 2016 to a bilateral meeting to advance cross-border multi-sectoral collaboration in the management of communicable diseases between Iran and Azerbaijan in Tabriz, the Islamic Republic of Iran. The meeting was organized by the World Health Organization Eastern Mediterranean Regional Office (WHO EMRO) and World Health Organization country offices in collaboration with the Iranian Ministry of Health.

The meeting looked into the implementation stage of the International Health Regulations (IHR) in both countries, tracked progress and gaps to identify mutual areas of collaboration in the health area. The meeting included a field visit to the Jolfa border crossing point between Iran and Azerbaijan to observe the health surveillance system. High level officials from the Ministry of Health, the Ministry of Justice, the State Customs Committee, the State Border Service, WHO and IOM participated.

The two countries adopted a set of recommendations to improve cooperation, including information sharing, additional study visits to deepen the knowledge of specific health issues and sharing of

best practices.

"We are extremely grateful to the WHO for supporting this bilateral meeting between Azerbaijan and the Islamic Republic of Iran. The meeting is timely as it is the first occasion of cooperation between IOM and the WHO in Azerbaijan and Iran since IOM has become a UN related organization. Both migration and health are extremely complex issues that cannot be managed without a coordinated approach. All organizations in the UN system must effectively support governments with synergy. The meeting has been an important step in this direction," said IOM Azerbaijan Chief of Mission Serhan Aktoprak.



66th session of the WHO Regional Committee for Europe

Attended by: Dr. Jaime Calderon, | 12-15 September 2016 | Copenhagen, Denmark

Health ministers and high-level representatives of the 53 Member States of the WHO European Region, partner organizations and civil society took part in the 66th session of the WHO Regional Committee for Europe, held in Copenhagen, Denmark, on 12–15 September 2016.

The 66th Session of the WHO Regional Committee Meeting EURO, 12-15 September in Copenhagen included an agenda item on refugee and migrant health. In particular, the EURO ‘*Strategy and action plan for refugee and migrant health in the WHO European region*’ and a related *draft Resolution*, were presented and discussed. The Resolution holds MS and WHO accountable by asking the Regional Director to monitor implementation of national policies and regulations and the Strategy and action plan for refugee and migrant health in the WHO European Region, and to report to the 68th, 70th and 72nd sessions of the Regional Committee for Europe in 2018, 2020 and 2022.

IOM along with other partners had been involved in the drafting of mentioned Strat-

egy and action plan. The interagency coordination was followed by extensive coordination among MS.

Dr. Davide Mosca, Director of MHD, delivered a keynote speech on behalf of the Director General, followed by a Key note speech by Steven Corliss, Director programme Support an Management UNHCR.



47th Union World Conference on Lung Health

Attended by: Rukhshona Qurbonova, IOM Tajikistan | 26-29 October 2016 | Liverpool, UK

The 47th Union World Conference on Lung Health was held in Liverpool, UK, from 26 to 29 October 2016. Over 3,000 participants came together from 126 countries for the world’s largest gathering of clinicians and public health workers, health programme managers, policymakers, researchers and advocates working to end the suffering caused by lung disease.

The 47th Conference offered a range of sessions and activities including abstract-related sessions, post-graduate courses, workshops, and satellite sessions.

In particular, during the session “MDR-TB and migration: from infection fundamentals to programme innovations” chaired by Anna Scardigly (Global Fund) and Dr. Poonam Dhavan (IOM), Rukhshona Qurbonova from IOM Tajikistan delivered the presentation “Accessing MDR-TB treatment: labour migration in Tajikistan, and the journey of a MDR-TB patient crossing borders to

access better care”. Among others, the need for policy changes with reference to the compensation of health providers serving foreign nationals was discussed, with an eye to guarantee improved access to TB services in the many countries of destination of Tajik migrants. Currently the Global Fund, jointly with Project HOPE, IOM and other counterparts working on cross-border cooperation policy on TB control and care and compensation of the health providers are included involved in the policy dialogue on this matter. The other presentations included “Overview of MDR-TB in migrants: epidemiology, increased risks and clinical specific issues to addressing MDR-TB in mobile populations” by Jose Caminero Luna (Spain), “Increased risk for MDR-TB for labour migrants in Southern Africa, especially miners” by Liang Bridget Maama (Lesotho) and “MDR-TB in migrants: a gender and children perspective” by Anna Scardigly.

Managing tuberculosis among labor migrants: exploring alternative organizational approach

By Boris Sergeyev, Igor Kazanets, Davron Mukhamadiev and Pavel Sergeyev

Managing tuberculosis among labor migrants: exploring alternative organizational approach

Boris Sergeyev, Igor Kazanets, Davron Mukhamadiev and Pavel Sergeyev

Boris Sergeyev is a Public Health Specialist and Igor Kazanets is a Chief Migration Health Physician, both at the Migration Health Department, IOM Bureau in Moscow, Moscow, Russia. Davron Mukhamadiev works with the International Federation of Red Cross and Red Crescent Societies, Moscow, Russia. Pavel Sergeyev is based at the Faculty of Law, University of Toronto, Toronto, Canada.

Abstract

Purpose – High volume of international migration calls for the establishment of financial and organizational mechanisms that would ensure provision of treatment for tuberculosis (TB) among migrants. In the case of countries like Russia where budget funding goes for TB treatment, the need is acute as delivery of these services is affected by social perception that they should be provided to taxpayers only. While official policies in Russia promote voluntary medical insurance as a way to cover their health care needs, the problem is that neither voluntary medical insurance, nor the National Medical Insurance Plan, extend to cover the treatment of infectious diseases, such as TB making proposal of possible alternatives to these delivery vehicles appropriate. The paper aims to discuss these issues.

Design/methodology/approach – The analysis includes review of survey results on the extent of medical insurance coverage among migrants as well as legal provisions concerning access to medical care among migrants in Russia and some other migrant-receiving countries.

Findings – This exercise illustrates the public health risks and economic consequences related to exclusion of access to medical help among migrants. Availability of medical insurance even among socially integrated segment of this group is limited. Also of note is that citizens of Belarus as opposed to others are granted access to the full range of TB services in Russia.

Originality/value – Using the precedent, the authors propose an alternative mechanism – Inter-State Medical Insurance Fund – to be established by governments of CIS countries, with national allocations covering the provision of medical help to labor migrants from the respective countries in Russia.

Keywords Health care management, CIS, Migration, Tuberculosis

Paper type Conceptual paper

Background

Since the 1990s the growing volume of cross-border migration including those who move to other countries in search of employment has become a steady trend. In 2013 there were 252 million migrants who had moved out of the countries where they had been born (UN, 2013). Russia is the second largest migrant-receiving country, with slightly over 8.550 million visitors registered as "migrants" in 2014 (Federal Migration Service, 2014). This is in addition to the so-called "undocumented migrants" who entered the country as visitors but then engaged in providing labor services without the proper paperwork. Official estimates put their number somewhere between three and five million (Ministry of Labor and Social Development, 2014). Even with some of them returning to their native countries in the wake of an economic downturn and depreciation of the Russian currency in early 2015, millions still reside in the country today (Tetault-Farber, 2015).

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ABSTRACT

Purpose

The high volume of international migration calls for the establishment of financial and organizational mechanisms that would ensure the provision of treatment for tuberculosis (TB) among migrants. In the case of countries like Russia, where budget funding is allocated for TB treatment, the need is acute as delivering these services is affected by the social perception that they should be provided to taxpayers only. While official policies in Russia promote voluntary medical insurance as a way to cover one's health care needs, the problem is that neither voluntary medical insurance, nor the National Medical Insurance Plan cover the treatment of infectious diseases, such as TB, thus raising the need to discuss possible alternatives. The paper aims to discuss these issues.

Design, methodology and approach

The analysis includes a review of survey results on the extent of medical insurance coverage among migrants, as well as legal provisions concerning access to medical care among migrants in Russia and some other migrant-receiving countries.

Findings

The paper provides an overview of the public health risks and economic consequences related to inadequate access to medical help among migrants. The availability of medical insurance, even among the socially integrated segment of this group, is limited. Also worthy of note is that citizens of Belarus, as opposed to others, are granted access to the full range of TB services in Russia.

Originality and value

Using this precedent, the authors propose an alternative mechanism – Inter-State Medical Insurance Fund – to be established by the governments of CIS countries, with national allocations covering the provision of medical help to labor migrants from the respective countries in Russia.

Keywords Health care management, CIS, Migration, Tuberculosis

Paper type Conceptual paper

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