IOM’S MIGRATION HEALTH ASSESSMENT PROGRAMMES (HAP)

IOM’s Migration Health Division (MHD) contributes to global migration health priorities as outlined in the World Health Assembly Resolutions 61.17 and 70.15 on the health of migrants and refugees through the provision of comprehensive health services and the promotion of safe, dignified and healthy migration. Health, as a basic human right, is a fundamental precondition for migrants to be productive and contribute to the social and economic development of their communities of origin and destination.

WHAT ARE MIGRATION HEALTH ASSESSMENTS?

Migration health assessments (MHAs) are one of IOM’s most well-established migration management services. At the request of receiving country governments, IOM provides migrants with physical and mental health evaluations for the purpose of assisting them with resettlement, international employment, obtainment of temporary or permanent visas, or enrolment in specific migrant assistance programmes. Reflecting national differences in immigration policies and practices, health assessment requirements and protocols vary among receiving countries. These requirements may be specific to certain diseases of public health concern, such as tuberculosis (TB), or they may be much broader.

Health assessments are a valuable tool to promote individual and public health. As such, they positively impact a migrant’s capacity to integrate fully into receiving societies.

HAP contributes to global health goals through the provision of health services to migrant populations and through capacity building of national partners and providers. In particular, health assessment services promote progress on the WHO End-TB Strategy and SDG 3 on ensuring healthy lives and promoting well-being for people of all ages.

Despite differences in health assessment requirements among countries, one thing remains constant: the need to ensure that the migration process does not endanger the health of either the migrant or the host population.

As an international organization engaged in the promotion of the health and well-being of migrants, IOM’s primary stakeholders in the provision of MHA services are the migrants served, the organization, its Member States, and the international health community. IOM is accountable to its stakeholders for the delivery of health assessments that are technically sound, uphold national and international health legislation, are delivered in a timely and efficient manner, and are beneficial, equitable, and accessible for migrants. The migrant is at the center of the health assessment process, which is adapted to specific migrant profiles and individual risk exposures.

IOM aims to integrate its health assessment services with existing national disease control and prevention programmes by collaborating with national partners, training local providers and employing local personnel.
WHAT DOES A HEALTH ASSESSMENT INCLUDE?

Depending on the situation, the type of migrant and country-specific guidelines, MHAs may include some or all of the following components:

- Review of medical and immunization history
- Detailed physical examination
- Mental health evaluation
- Radiological or laboratory investigations
- Pre- and post-test counselling
- Referral for consultation with a specialist
- Health education
- Pre-embarkation/fitness-to-travel checks (PECs)
- Pre-departure medical procedures (PDMPs)
- Administration of vaccines
- Provision of, or referral for, directly observed treatment (DOT) for tuberculosis
- Detailed documentation of findings and preparation of required immigration health forms documents
- Confidential transfer of relevant information or documentation to appropriate immigration or public health authorities
- Disease surveillance and outbreak response
- Provision of medical escorts and arrangements for travel

WHY ARE HEALTH ASSESSMENTS VALUABLE?

MHA services provide an opportunity to promote the health of refugees and immigrants through the initiation of preventative and curative health interventions for conditions that, if left untreated, could have a negative impact on the migrants’ overall health status and on the public health of receiving communities.

MHAs aim to prevent negative health events during travel or on arrival to host communities through assessing a migrant’s fitness to travel, by providing stabilization treatment and pre-departure care where needed, by making special travel arrangements, such as medical escorts, and through facilitating continuity of care upon arrival.

Pre-departure health assessments also promote migrant integration in the receiving health system, particularly when supported by adequate pre- and post-arrival health services and community-based interventions. For example, with the patient’s permission, IOM confidentially transfers medical information to the receiving health and resettlement authorities prior to arrival. This measure promotes continuity of care for migrants, as it ensures that they can be referred to appropriate medical services and receive the necessary assistance once they arrive at their destination countries.

Pre-departure health assessments also encourage positive health-seeking behaviours through health education and counselling that aim to empower migrants to take preventative and curative actions to improve their health.
HAP employs advanced technologies in the provision of health assessment services, particularly in the provision of radiology and laboratory diagnostics.

### 2018 Key Figures

**Travel Assistance**
- 1,516 migrants escorted in 2018
- Services include:
  - Medical escorts
  - Mobility assistance
  - Supplemental oxygen
  - Coordination with receiving service providers

**Health Assessments Conducted**
- More than 376,000 health assessments in 2018

**HAP Staff and Infrastructure**
- As of 2018 approximately:
  - 170 physicians
  - 250 nurses
  - 390 other health staff*
  - Over 60 clinics
- *Other health staff includes lab, radiology, medical IT, etc.

**TB Detection**
- 621 active TB cases diagnosed by IOM in 2018
- 490 active TB cases (78.9%) laboratory-confirmed with positive sputum culture
- 16 multidrug-resistant (MDR) TB cases (3.3%)
- TB cases also diagnosed by radiological investigations

**Treatment/Referrals for Treatment**
- IOM provides or refers for:
  - TB DOT
  - Malaria treatment
  - Treatment of intestinal parasites
  - Treatment for other conditions detected by health assessment
- IOM also provides referrals for specialist consultations and stabilization care.

**Vaccination Programme**
- 360,039 vaccine doses provided in 2018
- Approximately 50 operations provided pre-departure vaccinations for over 118,000 beneficiaries against more than 15 vaccine-preventable diseases
Migration health informatics (MHI) has transformed the way migrant health data are generated, reviewed and processed by systematically applying new technologies and computer science to global information service provision in IOM resettlement and immigration programmes. MHI features prominently in the Migrant Management Operational Systems Application (MiMOSA), IOM’s Web-based migrant management software. MiMOSA is used in over 40 IOM country offices to capture data on health assessment, pre-departure procedures and health-related travel requirements. IOM also employs a dedicated system for its vaccination activities, the Immunization Management System, which is an interface for tracking vaccine inventory levels, stock movement and lot details.

Data generated by IOM health assessment services are employed internally within IOM resettlement and immigration programmes to decrease processing time, conserve resources, conduct quality control, for programme planning and operational research, and to integrate all migration health assessment activities at the country level. By standardizing and centralizing data collection among country offices, IOM has produced a unique repository of migrant health information, governed by IOM’s data protection principles.

Anonymized information can be analyzed to support the development of evidence-based policy and practices, to raise awareness of migrant health priorities and to contribute to the evidence base on refugee and migrant health.

2018 MIGRANT DEMOGRAPHICS

In 2018, IOM conducted approximately 376,000 health assessments, covering both immigrants (75.8%) and refugees (24.2%) in more than 60 countries. The geographical distribution of health assessments is shown below.

Immigrant Health Assessments

<table>
<thead>
<tr>
<th>Region</th>
<th>Number of Assessments</th>
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<tbody>
<tr>
<td>Africa</td>
<td>26% 75,108</td>
</tr>
<tr>
<td>Asia</td>
<td>58% 162,972</td>
</tr>
<tr>
<td>Europe &amp; Central Asia</td>
<td>12% 32,918</td>
</tr>
<tr>
<td>Middle East &amp; North Africa</td>
<td>4% 10,650</td>
</tr>
</tbody>
</table>

Refugee Health Assessments

<table>
<thead>
<tr>
<th>Region</th>
<th>Number of Assessments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Africa</td>
<td>39% 34,785</td>
</tr>
<tr>
<td>Asia</td>
<td>15% 12,900</td>
</tr>
<tr>
<td>Europe &amp; Central Asia</td>
<td>7% 6,891</td>
</tr>
<tr>
<td>Middle East &amp; North Africa</td>
<td>39% 35,048</td>
</tr>
</tbody>
</table>

* Immigrants include various categories of visa applicants, labour migrants and others moving on a voluntary basis, while refugees fall under the definition of the 1951 UN Refugee Convention.

The United States, United Kingdom, Canada and Australia are the most common destination countries for migrants assisted by IOM.

For more information on the above activities please contact the Migration Health Division (MHD) at: mhddpt@iom.int