



IOM nurse during medical consultation in remote Brazil areas. © IOM 2023/Gema CORTÉS

Everyone has a right to a standard of living adequate for health and well-being, including medical care and necessary social services, according to the Universal Declaration of Human Rights. The right of migrants to the highest attainable standard of health is recognized in the Constitution of the World Health Organization (WHO) as a fundamental right of every human being. The right to health care is an essential precondition for migrants to work, be productive, and contribute to development. During the COVID-19 pandemic, many countries responded by restricting access to travel and regular migration pathways. Pandemic restrictions had a disproportionate, devastating and unprecedented impact on migration, and many migrants were excluded from accessing basic services or became targets of discrimination.

Migrants were highly visible as frontline health and care workers during the COVID-19 pandemic. Migrants were also on the economic frontline, sending remittances home to families and communities, and helping them cope with the pandemic's economic impacts. The COVID-19 pandemic demonstrated that no-one is safe until everyone is safe, and that health policies that are inclusive of migrants are necessary to ensure healthy societies.

The **Global Compact for Safe, Orderly and Regular Migration (GCM)** is the first inter-governmentally negotiated agreement on migration in all its aspects. The GCM features health as a cross-cutting priority in several objectives, and provides an opportunity to promote the health of migrants in many related sectors. The implementation and review of the GCM recognizes the importance of global coordination of comprehensive, rights-based migration policy to effectively govern migration.

The **United Nations (UN) Network on Migration** provides effective, timely and coordinated support to Member States in their commitments to implement, follow up and review the GCM. As the UN Migration Agency and Secretariat and coordinator of the UN Network on Migration, IOM

supports Member States in developing integrated policy and programme-oriented solutions to achieve health-related GCM outcomes.

The **International Migration Review Forum (IMRF)** is the primary intergovernmental global platform for Member States, UN agencies, civil society organizations and other stakeholders to share progress and plan next steps to implement the GCM. The **Progress Declaration of the inaugural IMRF** in May 2022 emphasized (i) ensuring a whole-of-society approach for access to basic services, (ii) addressing barriers for equal access to basic services through international cooperation which recognizes amplified inequalities for migrants, and (iii) using rights-based policies to ensure access to health services for all migrants regardless of their status, within the principles of Universal Health Coverage (UHC). Member States committed to providing all migrants with safe access to basic services, regardless of their migration status, and accelerating integration of health considerations into migration policies and of the health needs of migrants into national and local health services, policies and plans.

The **WHO Global Action Plan (GAP)** on promoting the health of refugees and migrants, which addresses the complex health needs of refugees and migrants, was extended through 2030 by Member States at the 76th World Health Assembly in May 2023.

Only weeks later in June 2023, the **Third Global Consultation on the Health of Refugees and Migrants** in Rabat, Morocco will assess progress, build further political commitment on refugee and migrant health and inform future policy deliberations.

The UN General Assembly High-level Meetings on Universal Health Coverage; pandemic prevention, preparedness and response; and tuberculosis in September 2023 convey an unprecedented political signal about the importance of health to global prosperity and the **2030 Agenda**. The inclusion of migrants and human mobility in the associated political declarations as well as the **SDG Summit** for SDG mid-term review will be essential to achieving Health for All and sustainable development.

# TRACING MIGRATION HEALTH IN THE GCM

## OBJECTIVE 1

### Collect and utilize accurate and disaggregated data as a basis for evidence based policies

The action on developing country-specific migration profiles with disaggregated data in a national context should include health data to develop migration-inclusive health policies. This can begin with strengthened health information systems to analyse trends in migration health; disaggregate health information; facilitate development, implementation and monitoring of migration and health policies; and promote the exchange of lessons learned.

## OBJECTIVE 2

### Minimize the adverse drivers and structural factors that compel people to leave their country of origin

Addressing adverse drivers of migration, reducing risks during migration, and leveraging the contributions of migrants and human mobility are needed to achieve this objective and implement the 2030 Agenda. Strategies including climate change mitigation and adaptation, and resilience and disaster risk reduction will reduce adverse drivers of migration as well as vulnerabilities of migrants relating to unsafe water, inadequate sanitation and hygiene, malnutrition, and weakened health systems and infrastructure. Migration health must be included in environmental, climate change, and economic development policies through a Whole-of-Government and Whole-of-Society approach.

## OBJECTIVE 6

### Facilitate fair and ethical recruitment and safeguard conditions that ensure decent work

Mainstreaming migration health issues within bilateral and regional labour agreements and dialogues is critical to ensuring that migrant workers have health-related rights and protections. These policies should consider enhancing skills recognition and mobility of migrant health workers and diaspora engagement. Guidelines such as the WHO Global Code of Practice on the International Recruitment of Health Personnel are essential to reflect the rights of health workers and the impact of their migration on health systems of countries of origin.

## OBJECTIVE 15

### Provide access to basic services for migrants

According to IOM's Migration Governance Indicators (MGI) assessments conducted between 2018 and 2021 in 84 countries, in half of the countries surveyed, equal access to health care was contingent on migratory status. Countries spending more than 5% of GDP on health, and those enhancing vertical coherence of their migration policy, are more likely to grant all migrants equal access as citizens to all government-funded health services. In March 2022, IOM reported that 93% of countries provided access to COVID-19 vaccines for regular migrants, while only 56% did so for irregular migrants. IOM serves as the Secretariat and coordinator of the UN Migration Network, which has shared promising practices and issued guidance including *Enhancing Access to Services for Migrants in the Context of COVID-19 Preparedness, Prevention, Response and Beyond* to support Member States in achieving Objective 15.

## OBJECTIVE 10

### Prevent, combat and eradicate trafficking in persons in the context of international migration

Protection and assistance for trafficked persons should include the integration of measures for health, including mental health and psychosocial support. Cross-border cooperation and partnerships will enable harmonization of intersectoral policies and practices and ensure continuity of care and responses to health needs of migrants across the life course.

## OBJECTIVE 16

### Empower migrants and societies to realize full inclusion and social cohesion

Local and national health system capacity development is needed to provide migrant-inclusive health services that are rights-based and participatory with inputs from migrants and communities, to enable full inclusion of migrants. Universal Health Coverage (UHC) and social protection floors should include all migrants, irrespective of migration status. According to mapping by WHO, several Member States extended the residence permits of migrants to ensure access to health services during the COVID-19 pandemic, including testing and treatment for COVID-19.

## OBJECTIVE 22

### Establish mechanisms for the portability of social security entitlements and earned benefits

Assessment and enhancement of financial risk protection is needed to reduce the burden of catastrophic health expenditure on migrants. Social protection in health should be an integral component of reciprocal social security agreements on the portability of earned benefits for migrant workers at all skill levels, for both temporary and long-term migration. The Governments of Costa Rica and Panama, with the support of IOM, have facilitated the movement of thousands of indigenous Ngäbe-Buglé to participate in the coffee harvest season thanks to a digitalized worker permit, which incorporates health data.

Photo: © IOM 2017/Benjamin SUOMELA

## Providing protection and assistance for trafficked persons

Since 2020, IOM has collaborated with the Government of Malaysia in combatting trafficking in persons, supporting the implementation of the National Action Plan on Anti-Trafficking in Persons (Objective 10). IOM has conducted capacity building for government officials on psychosocial counselling, mental health, and communicable diseases (Objective 7).

## Tackling health risks through regional coordination

IOM, with funding support from the Government of Finland, has enabled “Fostering health and protection of migrants in vulnerable situations in Morocco, Tunisia, Libya, Egypt, Yemen, and Sudan”. Through development and implementation of migrant-inclusive health policies, enhancement of health services and protection for migrants, and strengthening partnerships, this program has advanced migration health and taken steps towards inclusion of migrants in Universal Health Coverage (Objective 23). In 2021, this program led to the inclusion of regular and irregular migrants in COVID-19 national vaccination campaigns in all six countries; the launch of the National Strategic Plan of Migration Health 2021-2025 in Morocco; and incorporation of migrants into the national AIDS programme in Egypt (Objective 15).

## Addressing the nexus of climate change, migration and health

During the first IMRF, the Mayors Mechanism, in partnership with UNHCR, launched a Call to Local Action for Migrants and Refugees and issued a report on Localization of the Global Compacts on Migration and Refugees. The report showcases actions from local governments and organizations that contribute to these Compacts, and outlines progress towards more inclusive multilateral governance of migration and forced displacement. The Mayors Mechanism supports an ongoing and iterative program to localize aspects of the SDGs such as access to basic services (Objective 15) and steps to achieve the Paris Agreement on climate change (Objective 2). The report highlights local actions that expand access to services for migrants and refugees and address the impact of the climate crisis on mitigation and displacement. One of the local actions developed through government, private sector, and international cooperation is Bogotá, Colombia’s Nutrition Reception Center for Migrant and Refugee Children and Mothers, which ensures food security for vulnerable children, pregnant women, and breastfeeding mothers.



Responding to the crisis in Ethiopia, IOM’s health, nutrition and MHPSS teams have been providing life-saving services and support in IDP sites across the country. © IOM 2022/Hiyas BAGABALDO

## Access to knowledge and sharing of solutions to improve migration health

The Migration Network Hub serves as a knowledge platform allowing users to explore and access key resources relating to the GCM, disaggregated by objective, country and region (Objective 1). The Hub includes projects, documents, and initiatives which highlight the cross-cutting nature of the GCM. For example, the E-PHR Handbook for Health Professionals provides medical examiners with an overview of migration health assessment, guidance on important medical conditions, and a standardized process to obtain appropriate, accurate and comprehensive information (Objective 15). The Handbook aims to enhance understanding of refugees’ and migrants’ health needs and strengthen national and cross-border disease surveillance and response capacities.

In partnership with the WHO, IOM performed a study of emigration of health professionals and the medical diaspora originating from the Eastern Mediterranean and the Middle East and North Africa regions. The study provided insights from their home countries and mapped government institutions and international organizations engaged with diaspora in both countries of origin and countries of destination. The study includes examples of how health professionals have been meaningfully engaged in the Middle East and North Africa and other regions, and how engagement has been critical to supporting the needs of overstretched public health systems on the ground. Diaspora engagement involves comprehensive data collection, including location mapping, compiling inventories of diaspora skills and experiences, and engaging a wide range of diaspora members in listening exercises to understand what the diaspora is willing and able to offer, and what it expects from the government in return.

## Addressing holistic health needs of migrants into policies and plans

In Argentina, IOM supported capacity development to promote basic health support for migrants (Objective 15). This was implemented in seven cities across the country to migrants stranded due to mobility restrictions and border closures, as well as migrants in transit. Mental Health and Psychosocial Support Services (MHPSS), which were increasingly in need during the COVID-19 pandemic, were provided by jointly carrying out activities with civil society organizations (Objective 7). IOM adapted its global MHPSS services to pandemic restrictions by offering counselling via telephone and virtual platforms for all migrants regardless of their status. Vaccinations and access to health services for migrants were made possible through coordination with Gavi, the Vaccine Alliance. (Objective 5).

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

