

## NEWS

### Migration and health at the 2014 European Public Health (EPH) Conference

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**Pre-conference “Adaptation of health promotion and disease prevention interventions for migrant and ethnic minority populations: policy, practice and research”**



This meeting was held in Glasgow on 19–20 November 2014 as a pre-conference event within the annual EPH Conference organized by the European Public Health Association (EUPHA). The meeting enjoyed the participation of more than 60 health care professionals from 22 countries and was planned by 3 EUPHA sections: the Migrant and Ethnic Minority Health Section, led in partnership with the sections for Chronic Diseases and Health Promotion. The pre-conference meeting was organized in collaboration with the Scottish Health Migration and Ethnicity Research Strategy Steering Group, West of Scotland Health and Ethnicity, and the Edinburgh Ethnicity and Health Research Group. It was financially supported by the EUPHA Migrant and Ethnic Minority Health Section and NHS Health Scotland.

The meeting had 2 major goals. First, in the tradition of past Migrant and Ethnic Minority Health Section pre-conferences and with reference to the theme of the meeting, to provide an overview of national policy on migration, ethnicity and health in the hosting nation (Scotland); and second, to share experience on the pre-conference theme, with the intention of furthering a common agenda across European countries and EUPHA sections.

During the first day's presentations the participants were provided with detailed overviews of the current situation as regards migration, ethnicity and health in Scotland, concerning the recent changes in ethnic health policies, improvements in service delivery, current research strategies and ongoing research, and also the situation and challenges in terms of the availability of health data on migration and ethnicity.

As the adaptation of health promotion and disease prevention interventions for migrant and ethnic minority populations was the main focus of the meeting, during these 2 days, 9 invited presenters shared the experiences of their various national and international research projects and interventions, with special reference to the pre-conference theme; namely, how these health promotion interventions might be adapted for migrant and ethnic minority populations, and what obstacles and challenges the adaptation process could face. These shared experiences encouraged joint thinking and discussions among the participants of the meeting. By the end of the second day some thought-provoking lessons and conclusions were defined, as detailed here.

- A strong need exists for common, international definitions of the main concepts regarding ethnicity and migrants, as well as methodologies, such as patient-centered care, health inequality impact assessment, etc.
- The terminology for adaption of interventions needs further development and refinement in order to establish common grounds for discussions and actions. This includes agreements on a clear typology for relevant adaption approaches and the main elements involved.
- It is important to document which kinds of adaptations contribute to the effectiveness of health promotion among migrants and ethnic minorities; for example, whether interventions are related to surface versus deep structures; targeting individuals versus communities; focusing on commonalities across groups versus specificities within groups, and on observable behaviours versus cultural values, etc. This will also provide an opportunity for learning in order to increase the quality of programmes for health promotion and prevention in the entire population.
- Ineffective programmes should not be adapted. Interventions which are not proven effective in the first place are no more likely to be successful among migrants and ethnic minorities after adaption. More research is needed to study the contribution of specific cultural adaptations to interventions that are known to be effective and to find out which components of the programmes are the most important for effectiveness.
- It is crucial to include cultural and broader diversity competencies in the training of medical and health promotion staff, and ensure relevant training curricula are developed. Interventions should be adapted as much as possible to the existing working method of health care providers in order to provide diversity-appropriate care in multi-ethnic practice.

The efforts to develop well-adapted health promotion programmes should build on partnerships between government agencies, public and private institutions and organizations aiming to promote equity and justice at international, national and local levels.

Further information and the detailed programme are available on the EPH Conference website (<http://www.ephconference.org/pre-conferences-75>) and the presentations will be made available on the EUPHA website in due course (<http://www.eupha.org>).

### **Conference session “Population-group challenges in public health: migrant and ethnic minority health”**

The plenary session on migrant and ethnic minority health took place on 22 November 2014 at the EUPHA Conference. It was organized in collaboration with the European Observatory on Health Systems and Policies and moderated by the Director of the Observatory, Josep Figueras. The session was attended by keynote speakers, such as: Raj Bhopal, Professor of Public Health, who addressed the audience on the issue of reducing the inequity gap by focusing on the matter from the point of view of ethnicity and migration and gave examples relating to cancer, heart disease and diabetes; and Marine Buissonnière, Director of the Open Society Foundations Public Health Program, who presented on Roma health in Europe, the political diagnosis and community care. The 2 main presentations were followed by a discussion in which Karl Ekdahl (Head of the Public Health Capacity and Communication Unit at the European Centre for Disease Prevention and Control (ECDC)) and Santino Severoni (Coordinator of the WHO/Europe Public Health Aspects of Migration in Europe (PHAME) project) participated as panelists and shared with the audience their work in this field.

Discussions focused on the public health aspects of migration and, more specifically, on tackling both communicable and noncommunicable diseases among this population group, which is often faced with vulnerable situations. The economic impact of health and migration was also discussed, highlighting the benefits of addressing adequately this area of work in order to minimize its negative impact on national economies and improve migrants' potential to contribute socially and economically to recipient societies.

## Healthy ageing of Roma communities

**István Szilárd**, Chief Scientific Adviser, University of Pécs Medical School

On 27–29 October 2014 the University of Pécs Medical School, in cooperation with the WHO/Europe Vulnerability and Health Programme, held a European-level expert symposium entitled “Healthy ageing of Roma communities: endowers – realities – perspectives”.

The symposium of researchers, academics, representatives of Roma and civil organizations from 11 countries was sponsored by the Hungarian State Secretariat for Social Affairs and Social Inclusion. Participants had already adopted the Pécs Declaration on Healthy Ageing of Roma Communities, which provides an

overview of the current health conditions of Roma in Europe and lists essential recommendations for improving their health both at individual and community levels.

The Declaration is available on the WHO/Europe website (<http://www.euro.who.int/en/health-topics/health-determinants/roma-health/news/news/2014/11/european-experts-adopt-declaration-on-healthy-ageing-of-roma-communities>).

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## Memorandum of understanding signed between WHO/Europe and the University of Pécs on migration and health

**István Szilárd**, Chief Scientific Adviser, University of Pécs Medical School

Dr Zsuzsanna Jakab, WHO Regional Director for Europe visited the University of Pécs on 10 November 2014, giving a presentation as part of the Szentágothai memorial scientific conference, entitled “WHO results, tasks and challenges in the European Region within the context of Health 2020”. During her visit she signed a memorandum of understanding between WHO and the University of Pécs, with migrant health as the focus.

More information about the Regional Director’s visit is available on the WHO/Europe website (<http://www.euro.who.int/en/countries/hungary/news/news/2014/11/new-collaboration-on-migrant-health-with-university-of-pecs,-hungary>).



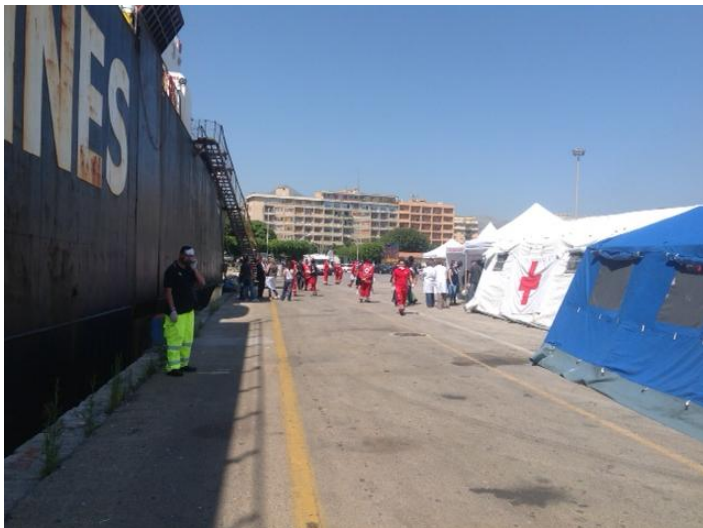
**Zsuzsanna Jakab, WHO Regional Director for Europe and Attila Miseta, Dean of the University of Pécs Medical School, signed a Memorandum of Understanding on 10 November 2014, establishing closer collaboration between WHO/Europe and the University on migrant health issues © University of Pécs**

## Data on health behaviours in the migrant population to inform policy-making: WHO, Ca' Foscari University and the Italian National Institute of Health (ISS) "Immigrants and health in Italy" report

**Stefano Campostrini**, Dean, Ca' Foscari Graduate School  
**Santino Severoni**, Coordinator, WHO/Europe PHAME project  
**Matteo Dembech**, WHO consultant on health and migration

When one thinks about the health status of migrants, the focus is almost exclusively on health threats posed by dangerous infectious diseases being imported. Even in technical settings, there is a tendency to focus on the health problems of the undocumented migrants who arrive at the coast in grave condition after perilous trips across the Mediterranean. Without denying the importance of these concerns, the reality of migrant health is far more complex and nuanced.

The WHO/Europe PHAME project collaborates with the University of Ca' Foscari in Venice, Italy and the ISS on the production of scientific evidence that will inform the policies of WHO/Europe Member States. This collaboration led to a study examining the various health behaviours displayed by the resident migrant population in Italy.



Point of arrival for migrants in Sicily after being rescued in the sea © WHO/Europe

Migrants account for approximately 8% of the population in Italy (almost 5 million people), although this figure varies by age group and region. Migrants often have different health beliefs, attitudes and behaviours, formed in their countries of origin, and their disease patterns may also differ from those of the local population. Understanding these factors is critical to providing adequate preventive and curative services and essential for the targeting of health promotion and prevention activities.

The WHO report "Immigrants and health in Italy" is based on data from the Italian Behavioural Risk Factor Surveillance System (PASSI) for which, under the guidance of the ISS, the Italian local health units conducted more than 230 000 interviews that provided the opportunity to examine various health behaviours in the resident migrant population. These data will serve to stimulate discussion in Italy and other European countries concerning the complex reality of the health status and health behaviors of migrants.

The report, in line with the WHO Health 2020 policy framework, collects evidence on health inequities. The data collected demonstrate a set of differences and inequities between citizens and migrants, and between migrants, depending on their origins. In many cases, the migrants exhibit more positive health behaviours than the Italian population – a finding that suggests the need to emphasize the positive aspects of migrant health care status, while not losing sight of the negatives that can be improved upon, and to build on or maintain current levels of health care as integration takes place. The report is expected to be released early in 2015.