WHO REGIONAL COMMITTEE FOR EUROPE
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Agenda item 5 (f) – Policy and technical topics

Strategy and action plan for refugee and migrant health in the WHO European Region

(Dr Ranieri Guerra, chair SCRC subgroup on migration and health)

- At the second meeting of the 23rd Standing Committee of the Regional Committee (SCRC) in November 2015 held in Paris, France, the development of a European strategy and action plan for refugee and migrant health was approved, and requested to be submitted along with an accompanying resolution to this Regional Committee.

- A new subgroup on migration and health was then established in order to guide the work of the Secretariat in producing these Regional Committee papers and overseeing the process of consultations. The subgroup is chaired by Italy, and composed of the following SCRC members: Belarus, Estonia, Portugal, Romania, Finland and Sweden (as link to the Executive Board).

- The following meetings and consultations were organized on-line and in person in order to prepare, discuss and finalize the RC documentation:
  - 10 February: first teleconference of the subgroup.
  - 8 March: first in-person meeting of the subgroup in Copenhagen.
  - 9 March: first presentation of the draft strategy and action plan to the SCRC at its third meeting in Copenhagen.
  - While integrating the inputs from the SCRC, the Secretariat also organized:
    1) an online consultation on the draft strategy and action plan with Headquarters and the other WHO Regions – given the need for close inter-regional collaboration in this area.
    2) an in-person consultation with the UN Agencies and other international organizations in Copenhagen on 14 April – following the discussions at the High-level meeting in Rome on the need to closely collaborate on this topic with other key stakeholders.
  - end of April: first online consultation on the draft strategy and action plan with all 53 Member States.
  - 21 May, at the 4th SCRC meeting prior to WHA in Geneva: in-person consultation on the draft strategy and action plan with all 53 Member States invited.
  - end of May: last two-week online consultation with all 53 Member States.

- Migration and health is a complex area. We must acknowledge that we are dealing with an issue of great political sensitiveness and where the scenario is constantly changing. For this
reason, coming up with an agreed document that is relevant today and will remain relevant in the years to come was not an easy task, and I would like to thank all countries who have actively and extensively contributed throughout this process.

- We cannot address the public health challenges of migration without acting in coordination with other regions and at the global level. We must use all opportunities to bring vertical and horizontal coherence to this area, working side by side with the countries of origin, transit and destination, but also with all other key actors in the field. In this regard, I want to thank the Regional Director and the Secretariat for their efforts to organize an exhaustive consultation process despite the time constrains, and bring to this Regional Committee a document widely discussed across the international community.

- Lastly, migration health is a highly multi-faceted and inter-sectoral area. The nine priority areas identified in the action plan demonstrate the need for coordinated action in a variety of fields if we wish to make progress. The response to the health needs of refugees, asylum seekers and migrants need to be integrated into the existing structures and capacities. In this regard, ensuring an appropriate response to the health needs of this population in the move will necessitate of strong health systems, public health capacities, and close collaboration with other sectors such as education, employment, housing or social security.

- As mentioned yesterday by the Regional Director in her address, the experience and knowledge gathered by our European Region in this area has triggered discussions at the global level. The European strategy and action plan that we are discussing today, first of its kind in WHO, may well set the basis for further action in other WHO Regions and HQ.