

**Support systems for irregular migrants
instruments to ensure the right to health in
Europe**

**M- Care training – module 2
Sitges Spain
Session 4
Thursday 11th December 2019
14.15 – 15.15**

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Purpose of Session

To allow participants to

- Come to a common definition on what 'we' mean by the phrase 'irregular migrants'
- Identify some of the accepted norms and standards that can support advocacy for this group
- Share from their own countries' examples of how this group are served and services provided to them

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Method of Session and timings

- PowerPoint presentation – recap and definitions 10 mins
- Brainstorm – group input and review 5 mins
- Work in pairs 15 mins
- Plenary report back 30 mins

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Expected Learning

- **Participants have identified possible similarities and differences across countries**
- **Participants have created an exemplative' case study to inform future sessions and possible action planning overcome barriers**

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Recap of session Scoping out the issues from module 1

Is testing available to Migrants?

Country (of participants)	REFUGEES	ASYLUM SEEKERS	UNDOC - IN A IRREGULAR SITUATION	Settled migrants	ISSUES
Austria	YES	YES	YES	YES	Education – mobile testing – reaching out to marginalised populations
Belgium	YE	YES, BUT EXCEPTIONS	NO,	yes	Access to testing for those excluded by state provision does happen at community-based services and outreach events
Switzerland	YESY	YES	YES but exceptions	YES	Migrants themselves have not taken control of the services provided
France	YES	YES	YES	YES	
Germany	YES but exceptions	YES but exceptions	YES but exceptions	YES	Testing services are not universal -and not always 'voluntary' There is a lack of knowledge about testing services and benefits of knowing status – also language barriers
Greece	YES, but exceptions	YES but changing	Yes but changing	YES	Proposed annulments of protecting; legislation allowing all migrants to get social security number – and without this No-one can get treatment. Control of migrants being put under POLICE force and restrictions on movement being imposed , including 'forced' movement
Ireland	YES,	YES	NO	YES	
Italy	YES	YES	YES	YES	Proof of residency of at least three months necessary before e one can access any care and treatment
Netherlands	YES	YES	YES but exceptions	YES	Fear of disclosure , - lack of information – language barriers
Portugal	YES	YES	DON'T KNOWS	YES	Language barriers – very slow government processes when trying to access services – NGO's filling gaps
Spain	YES	YES	YES	YES	
Sweden	YES	YES	YES	YES	
UK	YES	YES	YES	YES	Stigma – fear of others knowing status – gatekeeping by group leaders – lack of of trust of ??? – Immigration challenges

Recap of session Scoping out the issues from module 1

Is treatment and care available to MIGRANTS?

Country (of participants)	REFUGEES	ASYLUM SEEKERS	UNDOC - IN A IRREGULAR SITUATION	Settled migrants	ISSUES
Austria	YES	YES	NO	YES	Community based /led services. Outreach work/Education Involving marginalised communities
Belgium	YE	YES, BUT EXCEPTION S	NO, BUT EXCEPTION S	YES	Undocumented migrants are sometimes able to access treatment and care
Switzerland	YESY	YES	YES but exceptions	YES	Ownership of migrants of process limited
France	YES	YES	YES but exceptions	YES	???
Germany	YES but exceptions	YES but exceptions	NO	YES	Health care coverage not universal – different in different states. Legal right to care and treatment not universal
Greece	YES, but exceptions	NO	NO	YES but exceptions	No AMKA (social security number) = no access
Ireland	YES,	YES	NO	YES	Services only provided if a person is 'registered'
Italy	YES	YES	YES	YES	???
Netherlands	YES	YES	NO but exceptions	YES	???
Portugal	YES	YES	DON'T KNOWS	YES	Stigma, accessibility, discrepancies between cities – i.e. Cascais v. Lisbon
Spain	YES	YES	YES	YES	Need to be registered at municipality – we have fast access
Sweden	YES	YES	YES	YES	??
UK	YES	YES	YES	YES	Adherence, GP challenges, Socio economic challenges such as finances education , childcare



Some over-arching definitions

IOM Definition.

There is no universally accepted definition of **irregular migration**. The International Organization for **Migration** (IOM) defines it as “movement that takes place outside the regulatory norms of the sending, transit and receiving country”





EU – definitions, approach and policy initiatives

From

https://ec.europa.eu/home-affairs/what-we-do/policies/irregular-migration-return-policy_en

Asylum is granted to people fleeing persecution or serious harm in their own country and therefore in need of international protection. Asylum is a fundamental right; granting it is an international obligation, first recognised in the [1951 Geneva Convention on the protection of refugees](#). In the EU, an area of open borders and freedom of movement, countries share the same fundamental values and States need to have a joint approach to guarantee high standards of protection for refugees. Procedures must at the same time be fair and effective throughout the EU and impervious to abuse. With this in mind, the EU States have committed to establishing a Common European Asylum System.





definitions, approach and policy initiatives

What is a refugee

Definition: Refugees are people fleeing armed conflicts or persecution.

An important piece of this is that refugees are protected by international law, specifically the 1951 Refugee Convention. But even the terms [refugee and asylum seeker](#) are often confused.

What is an asylum seeker

Definition: An asylum seeker is someone who claims to be a refugee but whose claim hasn't been evaluated. This person would have applied for asylum on the grounds that returning to his or her country would lead to persecution on account of race, religion, sexuality, nationality or political beliefs.

Someone is an asylum seeker for so long as their application is pending. So not every asylum seeker will be recognised as a refugee, but every refugee is initially an asylum seeker.





So within our countries who are the people who fall into the category of irregular migrants ?

Flip chart exercise





Group Work -15 minutes



- Working in pairs – for each of your countries

Profile a ‘typical’ irregular migrant that you work with

- What services are able to be provided to them and which services are not on the same basis as other ‘citizens? (if any) – i.e what is the ‘entitlement’ of those in this situation
 - Who provides the services that they receive – and on what basis: purely charitable ? Via an NGO charged/funded with providing the service , or just doing it anyway? As part of a local initiative run by a municipality / health service? As part of a wider initiative ?
 - Is there any successful example of advocacy in your country which has ‘bettered’ the situation of ‘irregular ‘ migrants ?
- 



Report back to plenary

Each participant will have written up their case study

Due to time

We will only pick out 5 of these to share in plenary by presentation

3 minutes for presentation and a few minutes for questions for clarity

All of the case studies will be shared with all participants
And used to inform the work and presentations made in sessions 7 8 9 14

It is in these presentations that we will further identify the initiatives and organisations that support irregular migrants , and instruments that might be useful tools to change the policy landscape and form part of an individual or collective 'action plan'.





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Resources and further Reading

PICUM

https://ec.europa.eu/knowledge4policy/organisation/picum-platform-international-cooperation-undocumented-migrants_en

PICUM is a network of individuals and organisations working to ensure social justice and human rights for undocumented migrants.

Grounded in principles of social justice, anti-racism and equality, PICUM works to ensure that all migrants are entitled to a dignified standard of living and respect. Bringing together the experiences and expertise of its members, PICUM generates and coordinates a humane and informed response to undocumented migrants' realities and provides a platform to engage policy makers and the general public in the full realisation of their rights.

The PICUM website is at <https://picum.org/>

Lots of good information about , and to inform, HIGH- LEVEL policy work



PICUM

About Us News

Members Publications

Campaigns Press

Undocumented And Need Help?



EN- Firewall and Health: Creating safe spaces, addressing health inequalities



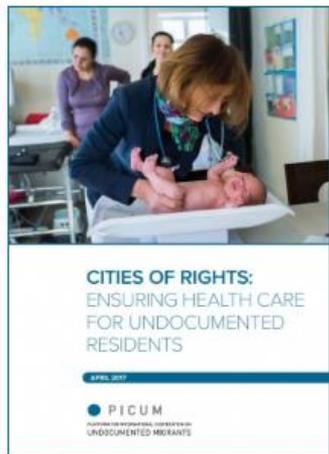
FR- Le Pare-feu et la Santé: Créer des espaces sécurisés, résoudre les inégalités sanitaires



DE- Die 'Firewall' Und Gesundheit: Ein sicheres Umfeld schaffen, gesundheitlicher Ungleichheit entgegenwirken



EU Health Policy Platform – Thematic Network on "Migration and Health"





https://ec.europa.eu/health/social_determinants/migrants_en

<http://www.euro.who.int/en/publications/abstracts/report-on-the-health-of-refugees-and-migrants-in-the-who-european-region-no-public-health-without-refugee-and-migrant-health-2018>

Working Together for Local Integration of Migrants and Refugees – OECD publications An example from ROME can be found here <https://www.oecd.org/migration/working-together-for-local-integration-of-migrants-and-refugees-in-rome-ca4d491e-en.htm>

https://ec.europa.eu/home-affairs/what-we-do/policies/irregular-migration-return-policy_en



HEALTH DIPLOMACY:
spotlight on refugees
and migrants
WHO PUBLICATION

<https://apps.who.int/iris/bitstream/handle/10665/326918/9789289054331-eng.pdf?sequence=1&isAllowed=y>



90% of people living with HIV
knowing their HIV status.

90% of people who know their
HIV-positive status on
treatment.

90% of people on treatment
with suppressed viral
loads.





Other entry points ...

PARIS DECLARATION

1 December 2014
(amended 24 July 2018)

**FAST-TRACK CITIES:
ENDING THE
AIDS EPIDEMIC**

Cities achieving the 90–90–90 targets by 2020



