

IOM Ninety Eight Council, November 2009

Distinguished guests, dear colleagues, ladies and gentlemen,

I would like to take this opportunity to address the IOM council on behalf of the World Health Organization. In a world defined by profound disparities and intimately linked complex human mobility patterns, along with competing demands, Governments are faced with the challenge of integrating the health needs of migrants into national plans, policies and strategies. Success in this arena will ensure advancement of public health goals and avoid/reduce marginalization of certain groups in society and infringements on migrants' rights. We recognize that approaches to managing the health consequences of migration, and health needs of migrants, have not kept pace with growing challenges associated with the volume, speed, diversity and disparity of modern human global movements. Similarly, existing health inequities and determining factors of migrant health including barriers to access health services have not been sufficiently addressed.

During last year's session of the IOM council, WHO addressed the IOM membership elaborating on the background to the May 2008 World Health Assembly Resolution 61.17 on the Health of Migrants. This Resolution was a testimony that Governments increasingly recognize the need for a paradigm shift in the way to think about health and migration and consequently, the way health system and related policies account for migrants' health. The Resolution upholds that the health of migrants is an important public health matter and asks Member States and WHO to promote migrant sensitive

health policies and practices, in collaboration with other relevant partners and, moreover, stresses the need for interregional and intersectoral cooperation.

Since the adoption of this Resolution on the health of migrants, the world has experienced the global economic crisis. WHO has articulated the need to protect the most vulnerable populations in countries, including concern for migrants and their health. Reduced employment, reductions in wages and poorer working conditions negatively affect migrants' health. We have also seen how unauthorized migration flows, triggered by poverty and lack of employment, can have considerable health consequences which are often poorly managed if at all. Indeed, many migrants in an undocumented or irregular situation, lack access to health services despite precarious living and working conditions. Disasters, armed conflict and food insecurities have continued to threaten the health of millions of those forcibly displaced. And of course, the H1N1 pandemic has reiterated linkages between population mobility and disease spread and called for solidarity, universal access to preventive measures and care irrespective of a person's migrant status. Many countries are now vaccinating their populations against H1N1 following technical recommendations for risk groups. Are they including vulnerable migrant groups in their vaccination campaigns? Not to do so undermines the health of these migrants as well as the effectiveness of these major public health efforts.

Following the aforementioned Resolution, IOM and WHO entered into a closer collaboration which has resulted in the organization of joint events and platforms to share experiences and reach consensus on aspects of migration and health intersection.

Examples include the Migration Dialogue for Southern Africa on migration and health; an ECOSOC Ministerial Roundtable Breakfast on migrant women's health needs; and a migrant health session at the seventh Global Conference on Health Promotion. WHO was also pleased to take active part in the International Dialogue on Migration, which focused on Human Rights and migration. Overarching recommendations from these various platforms include the need to reinforce migrants' access to health and social services; multi- regional and -sectoral collaborations, integration of health into policy dialogues on migration, such as the Global Forum on Migration and Development, and inclusion of migration issues as part of the recent Secretary General's Report to the UN General Assembly on Global Health and Foreign Policy and Global Health debates.

The good news is that progress has been made since the WHA Resolution was adopted, especially in the domain of promoting the health of migrants and many countries and agencies are working at improved health services for migrant populations. However, there are also ample examples that illustrate trends that fuel social exclusion of vulnerable migrant groups and leave their health needs unattended. This is particularly the case for undocumented migrants. There is much work ahead before we reach the recommended evidence-based policies, long term multi country and multi-sector cooperation, and health systems and services in all regions that are responsive to the needs of today's diverse and highly mobile societies. We have not yet achieved the goal that countries are equipped to provide equal access to health services to all migrant groups.

To further implement actions requested of WHO in the WHA resolution, WHO, with the collaborative support of the IOM and the Ministry of Health of the Government of Spain, is organizing a multi stakeholder Global Consultation to take place in early 2010 to map actions, good practices and policy recommendations from all regions in the migrant health domain, and consolidate a technical network across sectors. Consultation outcomes will be reported to the WHA and provide the basis for a framework for action for Member States and partners towards migrant sensitive health policies and -systems. WHO will continue its effort to work with its partners like the IOM to address the health needs of ever-changing national and international contexts. We look forward taking part in the debates of the coming days.

Thank you.