

Proposal for Action in Health

EXPLICIT INCLUSION OF HEALTH IN THE GLOBAL COMPACT FOR SAFE, ORDERLY AND REGULAR MIGRATION

Migrants have the right to complete physical, mental and social well-being.

To ensure a comprehensive and humane approach to migration management, the inclusion of the health dimension is fundamental.

Migration contributes to the development of countries, both in communities of origin and destination. In the Americas, the number of people who migrated across international borders has increased by 36% throughout the last 15 years, reaching over 65 million people. A high proportion of these people neither have access to comprehensive health services,¹ nor do they have financial protection for issues concerning their health. Often, structural and social barriers such as non-inclusive health policies and systems for migrant populations and high healthcare costs, make it challenging to access these services. This is also compounded by cultural differences, different languages, stigmatization and discrimination, as well as migrants' fear of arrest and deportation. The region is also experiencing a constant flow of people who are returned to their communities of origin, and who are subject to added vulnerabilities associated with the migration cycle², along with challenges in the reintegration process; a population in transit that has been exposed to emerging diseases, sexual abuse and violence, as well as complex social and psychosocial processes that affect family members who were left behind.

In May 2017, the World Health Assembly endorsed resolution WHA70.15 on “**Promoting the Health of Refugees and Migrants**”, urging the 194 Member States of the World Health Organization (WHO) to strengthen international cooperation in health of refugees and migrants in alignment with the 2016 “**New York Declaration for Refugees and Migrants**”. In 2001, Heads of State within the Organization of American States (OAS) agreed to establish an Inter-American Program for promoting and protecting the human rights of all migrants, regardless of their migratory status. In 2016, the 55th Directing Council of the Pan American Health Organization (PAHO) endorsed resolution CD55.R13 on the “**Health of Migrants**”, urging Member States to generate policies and programs that address health inequities affecting migrants, and to promote actions on borders. Moreover, in November 2016 the Regional Conference on Migration (RCM) incorporated “**Migration and Health**” as a Human Rights’ thematic focus for the Regional Consultation Group on Migration. In April 2017, Ministers of Health of the Americas signed the “**Ministerial Declaration on Health and Migration in Mesoamerica**” where, as Member States of the United Nations System and the Inter-American System, they recognize the commitments made to improve the health of migrants, based on the recommendations of international framework instruments.

To provide health inputs to draft zero of the Global Compact for Safe, Orderly and Regular Migration (GCM), PAHO and the International Organization for Migration (IOM), along with Member States, other United Nations Agencies and relevant stakeholders, have developed the “Proposed Health Component for the GCM”³. In order to adapt this document to the Americas⁴, the Expert Group that conforms the Steering Committee of the Joint Initiative on the Health of Migrants developed this proposal for action, with technical support from IOM and PAHO/WHO. This **proposal for action** has been presented to partner organizations of the Joint Initiative, to the governments of countries in the Americas, and to different Regional Forums on health and migration, including the Council of Ministers of Health of Central America (COMISCA) and RCM.

¹Comprehensive health services are understood as individual and collective promotion, prevention, disease treatment, rehabilitation and palliative health services.

²The migration cycle is understood as the different stages during the migration process including: communities of origin, transit, destination and return.

³ See attached document in English “Proposed Health Component for the GCM”

⁴Details on the development process of this proposal are available at www.saludymigracion.org

GOAL: Explicit inclusion of the health dimension in the GCM

Proposed commitments in accordance with the six thematic consultations organized by the United Nations on the GCM.

Topic 1. Human rights of migrants

Effectively implement existing instruments, or develop harmonized local, national, binational and regional instruments, that facilitate the elimination of obstacles and generate evidence on the exercise of the right to health of migrants, such as standards, protocols, agreements and information systems, regardless of their migratory status.

Topic 2. Effects of irregular and regular migration

Develop national intersectoral mechanisms of healthcare and protection to ensure the rights of migrants in conditions of vulnerability, regardless of their migratory status and during all stages of the migration cycle, including the stages of return and social reintegration.

Topic 3. International cooperation and the governance of migration in all its dimensions

Develop a technical and financial international cooperation agenda on the health of migrants, that is prioritized and articulated, and that addresses all stages of the migration cycle.

Topic 4. Smuggling of migrants, trafficking in women, children and youth

Strengthen the capacities of the health sector to:

- detect, refer and provide comprehensive care, including psychosocial support, to victims of trafficking and other forms of slavery and kidnapping; and
- address the physical and emotional consequences linked to the smuggling/trafficking of migrants.

Topic 5: Contributions of migrants and diasporas in sustainable development

Promote mechanisms that enable diasporas to strengthen the health and social protection systems in the communities of origin, through mechanisms that facilitate the mobilization of human, technical and financial resources.

Topic 6: Migrations caused by the effects of climate change or crises contexts

Develop public policies that promote health equity in communities of origin, as response to factors that drive migration in vulnerable conditions.

Means of compliance and verification

The Ministries of Health are responsible for carrying out the necessary actions to fulfill any commitments agreed upon. IOM and WHO, in particular PAHO, would be responsible for promoting the implementation of these commitments in coordination with other Agencies of the United Nations System. These institutions are responsible for providing technical support, strengthening inter-institutional coordination and international collaboration mechanisms, providing advice to strengthen legal frameworks to ensure the exercise of the Right to Health, and facilitating the mobilization of human, technical, and financial resources to reinforce the social response in health for migrants and their families. Specific mechanisms should be created to monitor compliance with the goals and commitments adopted by the Ministries of Health, as well as to evaluate that the implemented actions have achieved the expected results. The proposed commitments should be implemented with the support of multilateral funds established in the context of the GCM.

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Escuela de Salud
Pública



Instituto Nacional
de Salud Pública



INSTITUTO DE CIENCIAS E INNOVACIÓN EN MEDICINA
Facultad de Medicina
Clínica Alemana - Universidad del Desarrollo

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