



IOM International Organization for Migration
OIM Organisation Internationale pour les Migrations
OIM Organización Internacional para las Migraciones

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**STATEMENT BY MR. LUCA DALL'OGGIO, PERMANENT
OBSERVER, AT THE FORTY-THIRD SESSION OF THE
COMMISSION ON POPULATION AND DEVELOPMENT
UNITED NATIONS**

**Agenda Item 4: General debate on national experience in population
matters: health, morbidity, mortality and development**

New York, 13 April 2009

Mr. Chairman, Distinguished Delegates, Ladies and Gentlemen,

The International Organization for Migration (IOM) appreciates the opportunity to address this forty-third session of the Commission and will focus this brief statement on the need for a paradigm shift in thinking about health and migration and the way health systems and related policies address migrants' health. Addressing the health needs of migrants improves migrants' health, avoids stigma and long term health and social costs, protects global public health, facilitates integration, and contributes to social and economic development.

With global population growth we have seen growing numbers of migrants and increasingly complex patterns of human mobility comprising a heterogeneous group of individuals with different health determinants, needs and levels of vulnerabilities. Although migration is not in and of itself a risk to health, conditions surrounding the migration process and lack of, or limited access to, health and social services can increase vulnerability of migrants to ill health. Risk factors including poverty, stigma, discrimination, social exclusion, language and cultural differences, separation from family and socio-cultural norms, administrative hurdles and legal status often determine the level of access to health and social services and acceptability thereof.

Against this background, and as a follow up to a Resolution on the health of migrants approved by the Sixty-first World Health Assembly (WHA) in May 2008, WHO, IOM and the Ministry of Health and Social Policy of Spain, organized the Global Consultation on Migrant Health in Madrid in March 2010. The objectives of the consultation were on the one hand to take stock of the actions taken by Member States in key migrant health areas such as policy and legal frameworks on migrants' health, and on the other hand to agree on an operational context to facilitate monitoring and reporting, making use of agreed progress indicators. The Consultation reached consensus on the following four main priority areas and strategies to improve the health of migrants:

Permanent Observer to the United Nations

122 East 42nd Street • Chanin Building • Suite 1610 • New York, NY 10168-1610

Tel: (212) 681-7000 • Fax: (212) 867-5887 • E-mail: unobserver@iom.int • Internet: www.iom.int; www.un.int/iom

First, an agreement on the need to improve the monitoring of migrants' health through standardized, comparable aggregated and disaggregated data to better capture the status of migrant populations. In this context the Consultation also recognized the crucial relevance of identifying and mapping monitoring models, including monitoring migrants' health seeking behaviours, access to health services, health care utilization and health outcomes.

Second, the Conference recognized that policies and legal frameworks affecting migrants' health must adopt and implement relevant international standards on protection of migrants and respect for rights to health in national law and practice. This includes promoting policy inclusiveness and policy coherence among the different sectors that may affect migrants' ability to access health services. The goal should be to extend social protections in health and improve social security for all migrants.

Third, the Consultation highlighted the importance of delivering health services to migrants in a culturally and linguistically appropriate manner, and enforcing laws and regulations that promote inclusiveness and stem discrimination. Overall, health systems need to enhance the quality of care received by migrants and become more migrant sensitive.

Finally, the Consultation recognized the importance of broadening and strengthening partnerships, networks and multi-country frameworks through the establishment and support of on-going migration health dialogues and cooperation across sectors and among constituencies in large cities and countries of origin, transit and destination. To this end, the harnessing of capacities of existing practitioners and policy making networks to promote the migrant health agenda was also seen as particularly important; this included addressing migrant health matters in global and regional consultative processes, international dialogues on migration, the Global Forum on Migration and Development (GFMD), the UN High Level Dialogue on International Migration and Development (HLD) and other forthcoming global related initiatives.

In conclusion, Mr. Chairman, as a follow up to the Consultation, IOM, in close partnership with WHO and other partners, will work to ensure that these priority areas are being translated into actionable outputs. Primary actions by IOM include the setting up of a clearinghouse on migration health information, the development of international minimum standards on health for migrants, the identification and distribution of best practices with regard to inclusive migrant health policies and continuing global advocacy efforts to bring migrant health on the agenda of relevant health and non-health events. IOM is working with a number of "Champion" countries that have made great progress in addressing migrants' health. As an intergovernmental organization, IOM stresses the importance of government leadership, and the need to build migration health capacities within public health systems at source, transit and destination countries to better manage the transmission of disease and to promote the health of migrants.

Thank you Mr. Chairman.