



# ANNUAL REPORT 2019

UNIVERSAL HEALTH  
COVERAGE AND MIGRATION

Cover Photo: Ivor Prickett/UNHCR

**International Centre for Migration, Health and  
Development (ICMHD)**

11 Route du Nant d'Avril  
1214 Geneva, Switzerland

☎ +41 22 783 10 80

✉ [admin@icmhd.ch](mailto:admin@icmhd.ch)

🌐 [www.icmhd.ch](http://www.icmhd.ch)



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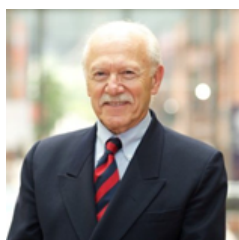
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# MESSAGE FROM THE EXECUTIVE DIRECTOR



The goal of Universal Health Coverage by 2030 promises to open a new era of international and national investment

in public health development. Primary health care will be at the centre of this exciting initiative, and at a time of new communications technology and IT innovation, vastly improved literacy rates and increasing gender equality, the world may well be more ready than ever to move into a vibrant Primary Health Care mode.

Achieving UHC by 2030 will not be easy, however. Vast inequalities continue to exist between and within countries and communities everywhere in the world, and in many cases, these inequalities are becoming more acute, evident and socio-politically problematic.

At the same time, a pernicious mix of natural and man-made disasters, chronic economic instability, and lack of good governance is constraining health and social development, and in many parts of the world is threatening to negate many of the health gains that were made over previous decades.

In 2018, OECD estimated that 27 countries met its definition of fragility, and the World Bank reported that approximately 2 billion were living in

fragile settings. Fragility affects everyone, but it impacts some people more than others. Women, children and adolescents are typically among the most vulnerable in all resource-poor countries, and in all fragile settings their vulnerability is further exacerbated. More than half of the world's children who die before the age of five, and one-third of women who die in pregnancy or delivery, do so in these fragile settings.

Fragility also forces people to move and in doing so, often exposes them to traumatic events and further threats to their health and wellbeing.

Over the past twelve months, ICMHD increased its focus on this issue and worked closely with WHO and the Partnership for Maternal, Newborn and Child Health to develop a new initiative on the needs of women, children and adolescents caught in humanitarian and fragile settings.

We believe this initiative will contribute to achieving the goal of UHC by highlighting and promoting more aligned health action for women, children and adolescents in the many humanitarian and fragile settings that have come to characterize the world in 2019.

A handwritten signature in black ink that reads "Manuel Carballo".

MANUEL CARBALLO





## ABOUT ICMHD

The International Centre for Migration, Health and Development (ICMHD) is a non-for-profit organization based in Geneva, Switzerland. It was established in 1995 in response to the need for more research, training and policy advocacy in the area of social and economic change, conflict, natural disasters, forced displacement, migration, and public health.

ICMHD is represented in many parts of the world, including Albania, Belgium, Bosnia, Canada, Côte d'Ivoire, DRC, Italy, Lebanon, Liberia, Malta, Spain, and the USA. Since 1998, ICMHD has been designated a WHO Collaborating Centre and an Implementing Partner for UNFPA. It also has a MoU with UNAIDS and an ongoing collaboration with ECDC and IFRC. ICMHD is a founding member of the Hepatitis B and C Public Policy Association.

ICMHD ANNUAL REPORT 2019

ICMHD believes that the Sustainable Development Goal 3.8 on universal health coverage will not be attained unless more attention is given to the health needs of people on the move. ICMHD is thus committed to providing governments, UN agencies, national and international NGOs, and private sector groups with advocacy and technical support on all aspects of population movement and health. It also helps countries and institutions to set priorities, identify gaps and solutions, and implement evidence-based policies on displacement, migration, and public health. In addition to its extensive experience in research, situation assessments, monitoring and evaluation, and policy development, ICMHD also organizes training courses on the management of migration, implications for national health and healthcare services, and country preparedness on public health in emergencies and mass arrival of migrants and refugees.

## THE BIG PICTURE

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*2019 has seen a record number of people on the move for a mix of economic, climate change, political and/or conflict reasons. The goal of Universal Health Coverage will not be attained unless more attention is paid to the health needs of this population on the move.*

**763 MM**

**INTERNAL MIGRANTS**

**272 MM**

**INTL. MIGRANTS**

.....

**41.3 MM**

**INTERNALLY DISPLACED**

**25.9 MM**

**REFUGEES**

.....

**3.5 MM**

**ASYLUM SEEKERS**

**10.1 MM**

**STATELESS**

.....



# PROMOTING AND PROTECTING THE HEALTH OF REFUGEES AND MIGRANTS

During the first months of 2019, ICMHD collaborated closely with WHO in preparing the Draft Global Action Plan (GAP) that was presented to the 72nd World Health Assembly in May of that year. The Draft GAP was prepared as a guide for Member States, partner agencies, and WHO itself, on how best to take up what are often complex and chronically unmet health needs of millions of people on the move around the world.

The GAP sets out a number of key themes and options for action by WHO, Member States and partner organizations. It highlights the advantages of mainstreaming refugee and migrant health into global, regional and country agendas, ensuring continuity and quality of health care, reinforcing occupational health and safety, creating refugee- and migrant-sensitive health policies, providing legal and social protection, and partnering with other sectors.

The GAP also emphasizes the need to protect the health and wellbeing of refugee/migrant women, children and adolescents and promote gender equality and empowerment of refugee/migrant women and girls. It

contextualizes these and other steps within the principle of UHC and UN Sustainable Development Goals, and the need for strengthened health monitoring and information systems, and improved evidence-based information to counter misperceptions about refugee and migrant health.

ICMHD also participated in the organization of a WHA Side Event on "Universal Health Coverage and Migration: leaving no one behind". The Side Event was convened by the delegations of Colombia, Ecuador, Luxembourg, Mexico, Panama, Peru, Portugal and Sudan. It brought together government leaders, academics, and other professionals to look for ways of strengthening global commitment to migration and health through the exchange of national experiences and good practices.

On 25 September, ICMHD made a key presentation at a high level side event organized by WHO at the 74th UN General Assembly in New York. The meeting focused on migrant health and achieving the goal of UHC, and called for greater equity in accessing health services and financial risk protection for migrants and refugees.



## **WOMEN'S, CHILDREN'S AND ADOLESCENTS' HEALTH IN HUMANITARIAN AND FRAGILE SETTINGS**

Over two billion people are estimated to be currently living in countries that are affected by acute and protracted emergencies, conflict and fragility. Over 60% of all maternal deaths, 53% of all under-five deaths and 45% of all neonatal deaths occur in these fragile countries. In response to the growing number of humanitarian and fragile settings (HFS) around the world, and in light of the adverse impact these are having on the health and wellbeing of women, children and adolescents, a decision was taken by the Partnership for Maternal, Newborn and Child Health (PMNCH) in 2018 to create a new Workstream addressing HFS.

In 2019, ICMHD was invited to collaborate with PMNCH in establishing the HFS Workstream and bringing it to the attention of the full membership of the PMNCH partnership, WHO Member States and other stakeholders in both the public and private sectors. As part of this, ICMHD helped to develop and conduct a series of desktop, self-completed and personal interview surveys on how individuals and organizations working in the humanitarian area see the problem of women, mothers, newborns, children and adolescents in HFS and what they see as needed to enhance the response. The results of the surveys



were presented at the first PMNCH HFS meeting held in Geneva on 27 May. The meeting concluded that attention to the health and wellbeing of women, children and adolescents in HFS has been variable at best, and at worst has been almost non-existent. It further observed that even where actions around the health of women and children have been taken, these have tended to be vertical and have failed to take a continuum-of-care and life course approach.

On the occasion of the 72nd World Health Assembly in May 2019, PMNCH and ICMHD organized a High-Level Briefing for WHO Member States and other stakeholders, and issued a Call to Action on Aligning Women's, Children's and Adolescents' Health and Wellbeing in Humanitarian and Fragile Settings. It also launched two "knowledge pieces" on the health and wellbeing of women, children and adolescents on the move.

Over the course of 2019, ICMHD represented the PMNCH HFS Workstream at a number of national and international conferences, including the meeting on Reproductive, Maternal, Newborn, Child and Adolescent Health and Nutrition in Conflict Settings (London), the Newborn Health in Humanitarian Settings meeting (Geneva), and the IBP Regional Partners meeting (Istanbul), and at two PMNCH Board meetings (Hague and Nairobi).

ICMHD made a presentation on behalf of PMNCH HFS at the Side Event on "Migration Health and the Universal Health Coverage targets: Promoting equity in access to health services with financial protection" held in New York. The presentation highlighted the urgent need for more attention to be given to the health needs of refugee and migrant women, children and adolescents.

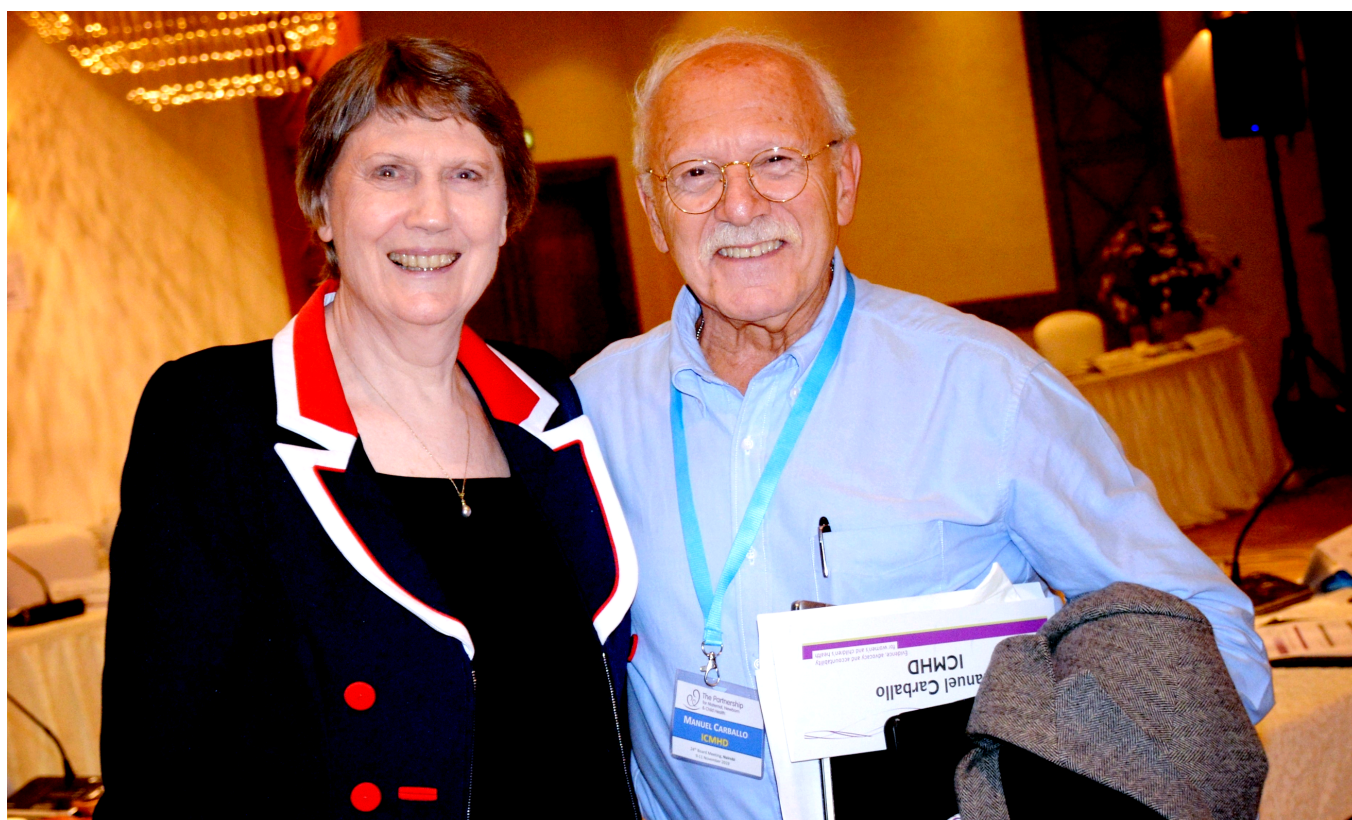


Photo Credit: PMNCH

Dr Carballo with Rt. Hon. Helen Clark at the PMNCH Board Meeting in Nairobi

# CARE OF THE NEWBORN IN HUMANITARIAN AND FRAGILE SETTINGS

Despite the significant progress that has been made in promoting and protecting safe motherhood and neonatal care, neonatal and early infant mortality rates remain unacceptably high in many parts of the world. This is especially the case in humanitarian and fragile settings where environmental conditions are poor and the risk of infection is high. Neonatal morbidity and mortality, however, is the consequence of many other factors, and vigilance is called for to avoid these factors proactively.

In 2019, ICMHD collaborated with an initiative organized by Save the Children, UNICEF and WHO to create a Roadmap to Accelerate Progress for Every Newborn in Humanitarian Settings 2020-2025.

ICMHD also signed the Declaration to Accelerate Newborn Health in Humanitarian Settings, which was developed following a meeting co-convened by Save the Children, UNICEF, WHO, UNHCR, and HRH Princess Sarah Zeid in February in Geneva. ICMHD will continue to work with these and other key stakeholders in taking the newborn in humanitarian and fragile settings initiative forward.

## Roadmap to Accelerate Progress for Every Newborn in Humanitarian Settings 2020 – 2025



Save the Children



World Health Organization



UNHCR  
The UN Refugee Agency



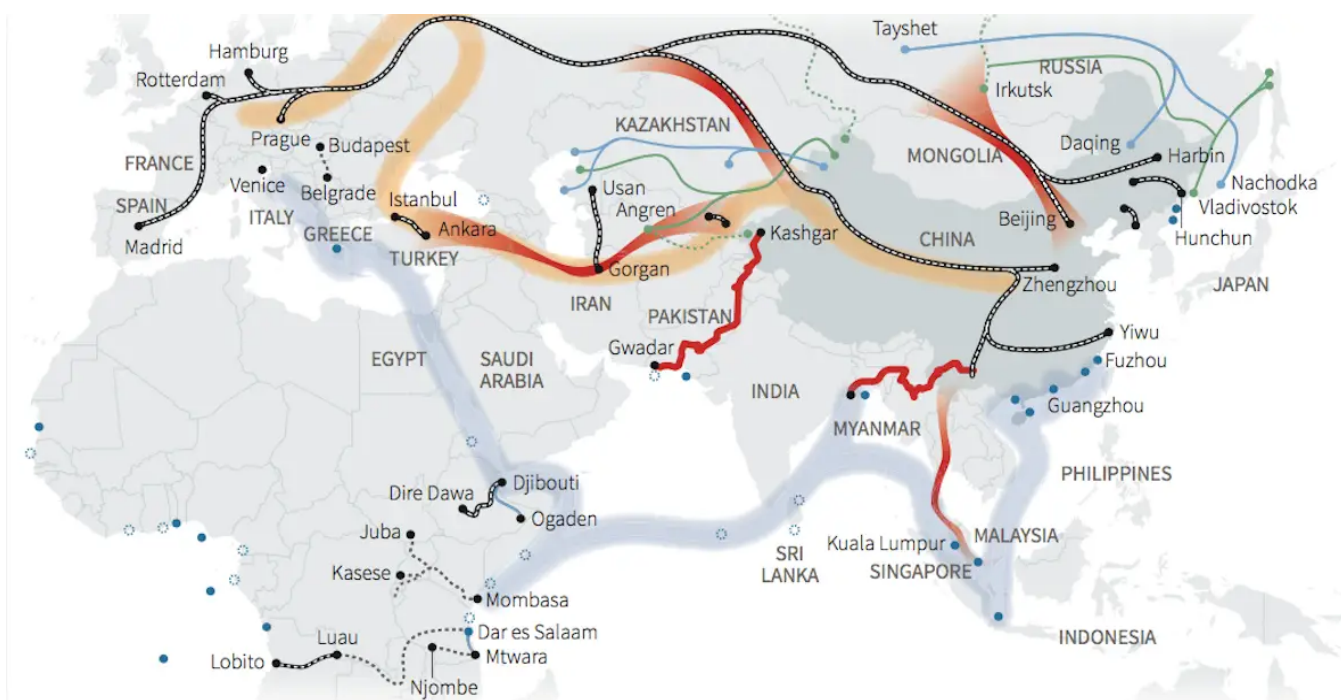
unicef



# PUBLIC HEALTH IN EMERGENCIES IN OMAN

Public health in emergencies remained a key priority for ICMHD in 2019, and in February, ICMHD worked with the Ministry of Health of Oman in assessing its experience in responding to public health emergencies and identifying how its capacity could be strengthened in the future. As part of the assessment, ICMHD staff met with representatives of the WHO Eastern Mediterranean Office (EMRO), the Oman Directorate General for Disease Surveillance and Control, and the Directorate General of Health Services. The assessment covered preparedness planning, capacity building and inter-sectoral collaboration on responding to public health emergencies. Preparedness planning has been given high priority by Oman and the country benefits from a comprehensive and effective public health surveillance system that gathers data from all districts in the country and makes the results available to all healthcare staff. As a result of the assessment, ICMHD was asked to design a national and regional training program on public health in emergencies. The training program and certification will aim to include key aspects of public health such as epidemiology, biostatistics, social determinants of health and disease, and disease prevention.





SOURCE: Business Insider Nov 11, 2019

## CHINA'S BELT AND ROAD INITIATIVES AND HEALTH DEVELOPMENT

Roads, waterways and railroads have always been key pull factors in the development of towns and cities. They not only attract people by holding out a promise of better things, but they also make their movement in search of a better life more feasible. Where these new settlements are unplanned, poorly serviced and heavily overcrowded, they can quickly become slums and new reservoirs of diseases and poor health. Around the world almost 1 billion people are living in such urban conditions, where access to clean running water, efficient sewage disposal, and quality health care is rare. Because China's Belt and Road Initiative (CBRI) can be expected to do

much the same as transportation routes have always done in the past, it is important that care be taken to plan rural-urban migration and design urban environments that are likely to protect health rather than threaten it. The CBRI has already 25 on-going projects. Most of them are in resource poor countries and will require consolidated planning and action to avert adverse urban outcomes of the kind that have been seen to date. To what extent the settlements that will emerge around the CBRI projects can be planned according to cutting-edge environmental health principles is not clear, however. ICMHD was invited to meet with a group of experts from the



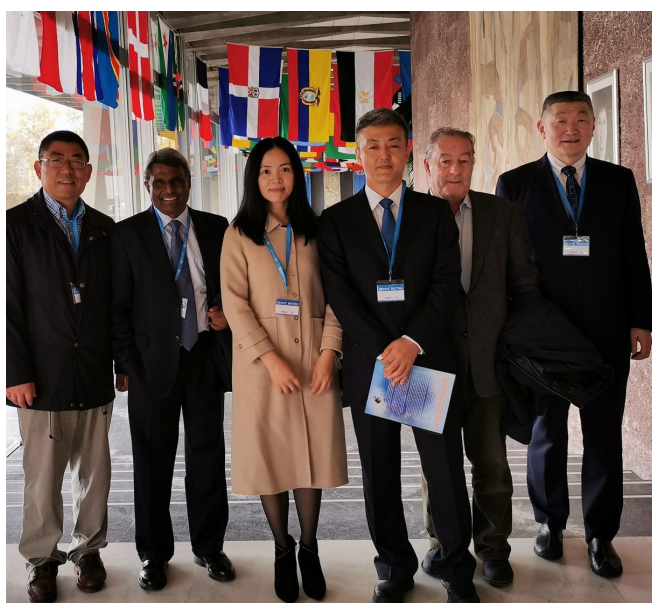
China Aerospace Laboratory of Social System Engineering (CALSSE) and the Realizer Group to review the situation and determine how best ICMHD and the CALSSE could work to impact on patterns of urban development and public health in the context of the CBRI projects.

The meeting looked at the key factors that have historically influenced the growth of towns and cities, and how these have had an impact on social life, public health and the delivery of healthcare and social services. The meeting concluded that in some of the countries where CBRI projects have been started or are planned, it will be important to undertake in-depth analyses of the ways in which these projects are already encouraging, or can be expected to influence, new settlements and if and how these can be planned using a systems' development approach. The experts agreed that how human settlements are structured and function will have an important impact on patterns of health and disease, and that in an era of climate change, future human

*"...the development and maintenance of the vitality of Belt and Road countries' national health systems and pushing forward the health cooperation between Belt and Road countries is not only conducive to improving people's health, but will also contribute to promoting economic development."*

*Beijing Communiqué of The Belt and Road Health Cooperation & Health Silk Road*

settlements will have to be conceptualized and developed taking into account the need for balance between health safety, development, ecological soundness, sustainability and Universal Health Coverage. In 2020, the participants agreed to work with selected CBRI countries to assess how the projects currently being developed in them can be designed to improve public health and wellbeing as well as economic development.



Left photo: from left to right - Dr Gangyan Gong, Dr Mohamed Rasheed, Ms Jiang Han, Mr Ye Tao, Dr Paolo Hartmann, Professor Chang Yuan  
Right photo: Presentation made by Professor Chang Yuan





# FOSTERING INTERNATIONAL COLLABORATION

## **CRIMEDIM**

In 2019, ICMHD strengthened its collaboration with CRIMEDIM, a WHO Collaborating Centre for Training and Research in Emergency and Disaster Medicine based in Novara, Italy. ICMHD and CRIMEDIM will organize research and training on topics of public health concern within the overall context of population movement and resettlement instigated by man-made and natural disasters and other emerging health threats.

## **WHO Collaborating Centers**

In December, ICMHD participated at the WHO Collaborating Centres (WHO/CCs) meeting organized by the Division of Tropical and Humanitarian Medicine and the Centre for Humanitarian Disaster Management of the Geneva University Hospitals (HUG). The meeting provided participants with opportunities to present activities carried out in support of WHO's programs, share good practices, and strengthen and promote innovative collaboration and networking mechanisms among collaborating centres. The meeting also included presentations by WHO staff on WHO's transformation process and strategic priorities through 2023.

## **CMCA**

ICMHD signed a Memorandum of Understanding (MoU) with the China-Maldivian Cultural Association (CMCA). In 2020, ICMHD and CMCA will develop joint activities on global health and population movement. Particular emphasis will be given to the development of joint research, training and policy projects on travel medicine, diabetes in the Maldives, and migration into and out of the Maldives.

## **ISSD Malta**

A MoU was also developed with the Institute for Strategic Studies and Democracy (ISSD), a research and policy group based in Malta, but with a broad range of initiatives in Africa, Asia and the Middle East.

## **New York University**

In June, ICMHD received a group of graduate students from New York University. They came for a briefing on recent initiatives in the area of migration and to gain a better understanding of the role of NGOs in this area. Requests for similar briefings to be organized in 2020 have been received from Carleton University in Canada and Glasgow Caledonian University in the UK.



## INTERNSHIPS

For the last 20 years, ICMHD has provided opportunities to students to gain experience in the field of international public health and migration. In 2019, ICMHD welcomed 12 undergraduate and graduate students from Egypt, Germany, India, Lithuania, Russia, the UK, and the USA. Students came from a wide range of academic backgrounds, such as biology, journalism, public health, international development, political science, European studies, international relations, neuroscience, and migration and multiculturalism studies. Interns have contributed to ongoing projects or they have designed their own research projects on topics such as the legal ramifications of migrant family separation, cancer and migration,

migrant occupational health, climate change and displacement, among others. Interns also benefited from informal lectures provided by ICMHD staff on topics of their interest. Some interns also took the opportunity to publish the research conducted during the course of the internship.



Sabasteanski N. Climate Migrants within the U.S. Will Need a Strong Health System. *Scientific American*. August 26, 2019



Weaver K. The Family Separations You're Not Hearing About. *AmeriQuests*. 2020;15(1). doi:10.15695/amqst.v15i1.4756

# NATIONAL AND INTERNATIONAL MEETINGS AND CONFERENCES

In 2019, ICMHD was invited to participate in, and give keynote presentations, at over 14 national and international meetings.

## **BRANCH Consultation on RMNCAH & nutrition in conflict settings**

February 6-7, London

## **Save the Children, UNICEF, WHO and UNHCR Meeting on "Newborn Health in Humanitarian and Fragile Settings"**

February 27- March 1, Geneva

## **Expert Committee Meeting on the Global Action Plan**

February 27-28, Geneva

## **European Association of Urology Meeting "Refugee and migrant health: One billion reasons to care"**

March 17, Barcelona

## **WHA Side Event "Universal Health Coverage and Migration: leaving no one behind"**

May 21, Geneva

## **High Level Briefing on "Aligning Women's, Children's and Adolescents' Health and Well-being in Humanitarian and Fragile Settings, taking a life-course approach"**

May 21, Geneva

## **Antwerp Study Centre for Infectious Diseases Symposium on 'Migration of Infectious Diseases'**

April 2, Antwerp

## **IBP Consortium Regional Partners Meeting**

April 9-11, Istanbul

## **23rd PMNCH Board Meeting**

July 9-11, The Hague

## **WHO Technical Consultation on the Global Guidance for Country Health Emergency Response Planning**

August 26-28, Tunis

## **UN General Assembly "Migration Health and the Universal Health Coverage targets: Promoting equity in access to health services with financial protection"**

September 25, New York

## **24th PMNCH Board Meeting**

November 9-11, Nairobi

## **Federation of European Academies of Medicine "Migration, Health and Medicine" Conference**

November 22, Brussels

## **2019 WHO Collaborating Centers Annual Meeting**

December 9-10, Geneva



