



Image: National Taskforce Meeting for Migration Health Policy Development for Sri Lanka

## Summary

*“Health is a critical asset and an enabling factor for migrants... it is therefore essential to identify and address causes of ill-health inherent to the migration process that can jeopardize any positive migration outcome”.*

This IOM funded project supports the Government of Sri Lanka's efforts to strengthen the capacity of the Ministry of Health (MoH) to promote and better manage the health of migrants through policy and national program development within an inter-ministerial processes.

The MoH is actively engaged in advancing the 61st World Health Assembly Resolution (WHA 61.17, 2009), which calls upon Member States to promote the 'health of migrants'. With technical assistance from IOM, the Ministry is now in the process of developing a *National Policy for Migration Health*. Furthermore, with the support from IOM, the MoH has established an inter-ministerial coordinating framework on migration health. This high-level 'whole of Government approach' has achieved remarkable progress in a very short amount of time (see milestones on page 3).

The project received seed funding from IOM's 1035 Facility, however seeks further support to continue the technical cooperation strategy.

## Project Information Sheet

# STRENGTHENING MIGRATION HEALTH MANAGEMENT IN SRI LANKA

## Background

As an island nation at an important geographical location at the heart of the Indian Ocean, migration has always been an integral part of Sri Lanka, be it by traders or colonial invaders.

With the liberalized economic policies and the “non-aligned movement” in the late 1970s, both outbound migration and internal migration escalated dramatically.

The protracted 30 year civil conflict in the North & East Provinces also contributed to the forced migration of more than 1 million people (as internally displaced persons or as refugees). These migration patterns have greatly influenced the social fabric and economic development of the nation.

With the end of conflict in early 2009, Sri Lanka now prepares to embrace a new chapter of lasting peace and development. The ruling Government's Political Manifesto also gives strong emphasis on migration as a key engine for economic development.

Currently, there are over 1.8 million Sri Lankans employed overseas with an annual outflow of 300,000 persons. The annual remittance from migrant workers to Sri Lanka is over 3 billion US dollars. This accounted for 8% of the GDP in 2008 (Central Bank, 2008). It is projected that Sri Lanka will not only increase its labour outflow, but increasingly become a labour receiving country with multiple board of investment projects throughout the island.

The health impacts and social consequences resulting from such migrant flows in Sri Lanka have been poorly explored and understood. According to the National Labour Migration Policy of Sri Lanka (2008), low skilled and unskilled categories of migrants are subject to high level of violation of human rights, including health and labour rights at the workplace. This particularly due to poor access to primary health care services, lack of education, training and awareness on the receiving country's working conditions and laws.

Sri Lankan health authorities have increasingly become aware of the major migration health challenges, particularly in meeting the health demands of the various types of migrant and mobile populations, and are currently making efforts with IOM to ensure better health outcomes for migrants and their families. This project with IOM reaffirms the Government commitment.



**IOM IS COMMITTED TO THE PRINCIPLE THAT HUMANE AND ORDERLY MIGRATION BENEFITS MIGRANTS AND SOCIETY**

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## Migrant Health Development project objectives

IOM supports the Ministry of Health's *Migration Health Strategy* through the following broad areas of work:

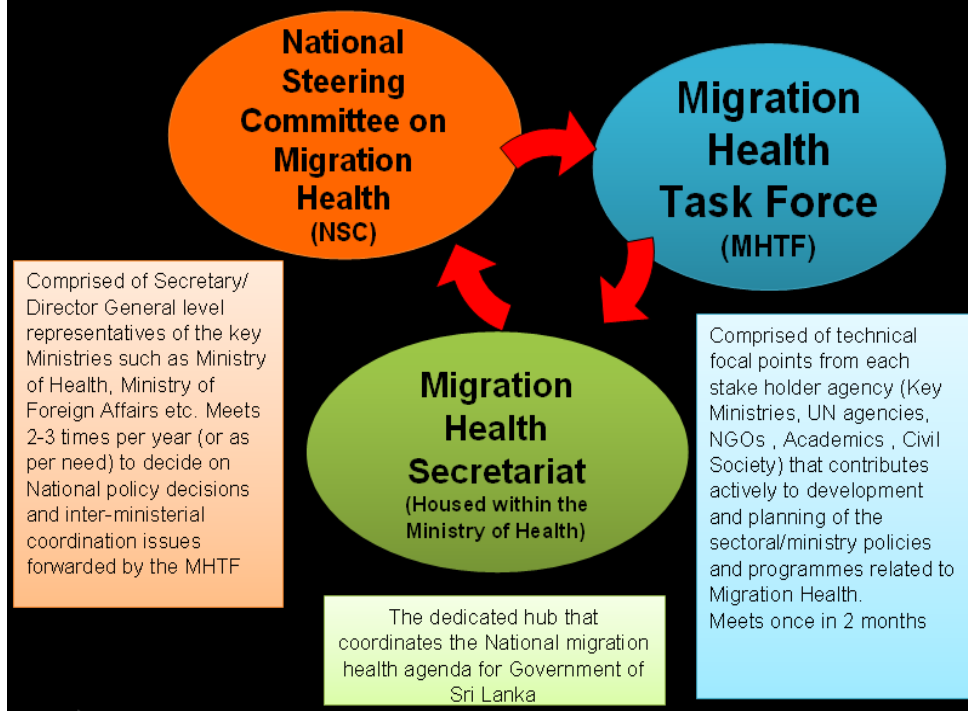
- Enhancing technical capacity of the Ministry of Health to integrate migration health in the national, regional and global agendas, and to manage various migration health challenges;
- Enhancing health promotion and education for mobile at risk populations;
- Development of a National migration health policy for Sri Lanka within a evidenced-based research agenda.

## Key MHD Programming elements and principals

The 5 key programming elements contributing to the success of the MHD project are:

- 1. Adopts an inclusive and participatory approach**—The scope of many migration related projects are often limited to labor migration. The project aims to address the health issues relating to all typologies of migrants: **Internal** (e.g. 'free trade zone' workers), **Inbound** (e.g. returning refugees and failed asylum seekers) and **Outbound** (e.g. overseas based Labor migrants).
- 2. Adopts a 'whole of Government Approach'**- Involving stakeholders from a range of Government departments within a participatory process is a hallmark of the project. An *inter-ministerial* model for coordination and engagement has been adopted for policy formulation and program planning (see diagram above).
- 3. Adopts a strong 'evidence-based approach'** - to inform policy and program development. A "*National Migration Health Study*" was launched with the support of IOM, where 3 major scientific studies pertaining to all migration categories were successfully commissioned. The research findings will aim at examining the health status, social and economic impacts, health system, domestic and legal frameworks pertaining to health of migrant populations.

## Inter-Ministerial & Inter-Agency Coordination Framework for the Migration Health Development in Sri Lanka



Prior to project commencement a series of high level national consultations were carried out to identify the key research areas/research questions and mechanisms for driving the policy related research (Delphi method)

### 4. A national migration health management framework that is responsive to emergent needs and gaps identified during the policy process and national events.

The dynamic dialogue between the stakeholders of the National Taskforce and steering committee has resulted in the rapid identification of service gaps and pragmatic program responses.

For instance, IOM is currently working together with the Ministry of Health to convene an expert committee to provide recommendations and action plans on health service assessment guidelines for returning Sri Lankan refugees from India (it is estimate that around 21,000 people will return in 2011).

The Migration health focal points from the Ministry of External Affairs and Ministry of Defense is working together with MOH, IOM, UNHCR and the relevant Government authorities in India to implement this returnee program.

IOM and MOH was also requested by the Controller General for Immigration and Emigration to assist with the development of health regulations and a 'Visa health unit' for long stay Sri Lankan resident visa holders entering Sri Lanka.

### 5. Moving the migration health agenda at regional and global level.

IOM continues to provide technical guidance and facilitation for participation of Sri Lankan Government officials in strategic regional and global meetings on migration health development. Recent forums include: Global Consultation on Health of Migrants in Spain, 2010; the Regional Dialogue on Health Challenges for Asian Migrant Workers, in Bangkok, and the Global forum on Migration and Development in Mexico, 2010.

### 6. Documentation and Reporting

In partnership with the Ministry of Health, IOM has established a *Migration Health Unit* within the MOH Directorate of Policy and Planning. The unit not only acts a repository for all relevant technical papers and planning documents, but as a 'hub' dedicated for inter-ministerial coordination.

**Progress, Achievements and Future areas of work**— Some key achievements of the Migration Health development project supported by IOM are listed on page 3.

**Timeframe: 18 months (March 2010 to Aug 2011)**  
**Funds: \$200,000 USD**  
**Donor: IOM 1035 Facility**

**IOM seeks funds to upscale health services for mobile and vulnerable populations in Sri Lanka.**



IOM International Organization for Migration

### ESTABLISHMENT OF A NATIONAL COORDINATING FRAMEWORK FOR MIGRATION HEALTH DEVELOPMENT IN SRI LANKA

IOM assisted the Ministry of Health to establish: a permanent **Migration Health Unit** which acts as a 'hub' for administrative and technical coordination; a **Migration Health Task Force** which comprises of technical advisors/senior administrators from more than 9 Government departments and other stakeholders; and a high level **National Steering Committee** chaired by the Health Secretary to serve as the main policy making body in related to migration health development in Sri Lanka.

### THE SRI LANKA NATIONAL RESEARCH PROJECT ON MIGRATION HEALTH

National research agenda was launched to develop an evidence base for formulating Migration Health Policy for Sri Lanka. Three prominent Academic and Research Institutions were commissioned with undertaking research into the outbound, inbound, internal and families left behind categories.

### BORDER HEALTH REGULATION

Upon request of the Controller General for Immigration and Emigration, and the MOH, IOM assisted in the development of technical guidelines and protocols for "Health requirements for long stay visa applicants", and for the development of a Visa Health Unit for the Ministry of Health.

## KEY ACHIEVEMENTS OF THE MIGRATION HEALTH DEVELOPMENT PROJECT SUPPORTED BY IOM SRI LANKA: 2009—2011

### ENSURING A "HEALTHY RETURN" FOR RETURNING SRI LANKAN REFUGEES

With the technical support of IOM, the Ministry of Health convened an expert subcommittee headed by the Additional Secretary of Health to develop a national plan for ensuring health protection to approximately 87,000 Sri Lankan refugee returnees from Southern India. A major element was for ensuring returnees are provided with health information in collaboration with the Indian Government and are linked to primary health care services upon return to Sri Lanka. Close observation of International Health Regulations and ensuring non-discrimination on health grounds were hallmarks of the 'healthy return' plan.

### STIMULATING ORGANIZATIONAL AND ACADEMIC RESEARCH IN LINKING MIGRATION HEALTH AND DEVELOPMENT

To enhance both the advocacy and research agenda surrounding human mobility, health and development, IOM sought to engage with and co-sponsor key public health sessions at national, regional and international public health conferences. For instance, academic sessions on Health and Migration were presented at the 10<sup>th</sup> International Epidemiological Association Conference, Asia Pacific Academic Consortium Public Health and Asian Action Alliance on Human resources for health Conference in Bali, Indonesia.

### PROMOTING THE MIGRATION HEALTH AGENDA VIA REGIONAL AND GLOBAL EXCHANGES

IOM has supported and facilitated participation of key government of Sri Lanka officials in regional and global forums on Migration Health. Recent examples are; Regional Dialogue on the Health Challenges for Asian Migrant Workers, in Thailand July, 2010, Preparatory meeting for Global Forum on Migration Management, September 2010, Thailand, Global Forum on Migration and Development in Mexico in November. Sri Lanka has taken a lead role in the South Asia region in pushing for a Migrant friendly health policies

### HEALTH PROMOTION FOR MIGRANT WORKERS

Enhance health promotion and education material for outgoing and returning migrant workers with the Sri Lanka Bureau of Foreign Employment, especially at pre-departure orientation, and developing strategies for health and social protection in sending countries.

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