

COUNTRY REPORT CARD

ON “HEALTH OF MIGRANTS” RESOLUTION

Progress made and challenges faced by the Government of Sri Lanka on advancing the resolution on “Health of Migrants”, adopted on 25th January 2008 at the 122nd session of the World Health Assembly

Prepared by Ministry of Health, Government of Sri Lanka, April 2011

The Government of Sri Lanka is firmly committed to advancing the *WHA resolution on health of migrants (resolution WHA61.17)* since its adoption in 2008. Being the first country to report the progress on the resolution in 2010, Sri Lanka recognizes the importance of migration as a key engine for the country’s economic development, with international labour migration alone contributing 5.1 Billion USD in remittance to state in 2011. Assessing and addressing the social and health consequences for migrant and mobile populations is a vital step in health protection and human development.

Government of Sri Lanka with the technical assistance from International Organization for Migration (IOM) launched the *National agenda on Migration, Health and Development (MHD)* in early 2009. This programme is led through an Inter-Ministerial approach, through the active engagement of 12 key government ministries, IOM and other UN agencies to address the health issues of migrants and mobile populations in Sri Lanka.

The MHD agenda for Sri Lanka aims at addressing the health consequences of 3 categories of migration (outbound, inbound and internal migration) and also focuses on health and social impacts of migration on the ‘families left behind’. Sri Lanka is also committed to developing National Migration Health Policy led by the Ministry of Health. A national Research agenda was launched in 2010 to ensure an evidence-based public health approach for policy formulation and program development.

Sri Lanka also took active role in international forums such as *Colombo Process, Global forum on Migration and Development* and the *WHA* in advancing health of migrant resolution at regional and global levels. The experience shows that for meaningful migrant friendly health policies, there needs regional and global partnerships. Sri Lanka urges relevant member states for a more coordinated approach in addressing the health issues of migrants and mobile populations at regional and global levels, particularly for the promotion of dialogues between labour sending and labour receiving nations.

The following table describes Sri Lanka’s progress made in 2011 on advancing the *WHA resolution on Health of Migrants*:

<i>References in WHA resolution which calls upon the member states to:</i>	<i>Action taken to implement within Sri Lanka</i>	<i>Remarks, successes and constraints</i>
<i>1. “Promote migrant-sensitive health policies”</i>	Policy on Establishment of health assessment for the resident visa applicants to Sri Lanka was approved by the cabinet ministers in December 2011. The regulations and protocols relevant to the policy were also developed in readiness to be incorporated into the Sri Lanka immigration	<ul style="list-style-type: none">• Sri Lanka is increasingly becoming a labor receiving country, not only a labour sending one, with growing numbers of foreign workers and students obtaining Resident visas each year. To ensure migrant friendly health policies and to secure the public health needs of the Sri Lankan community a health assessment process will be introduced as a pre-requisite for the resident visa to Sri Lanka. Access to health care and follow up will also be ensured by Sri Lanka to these migrant workers. Employers will be encouraged to

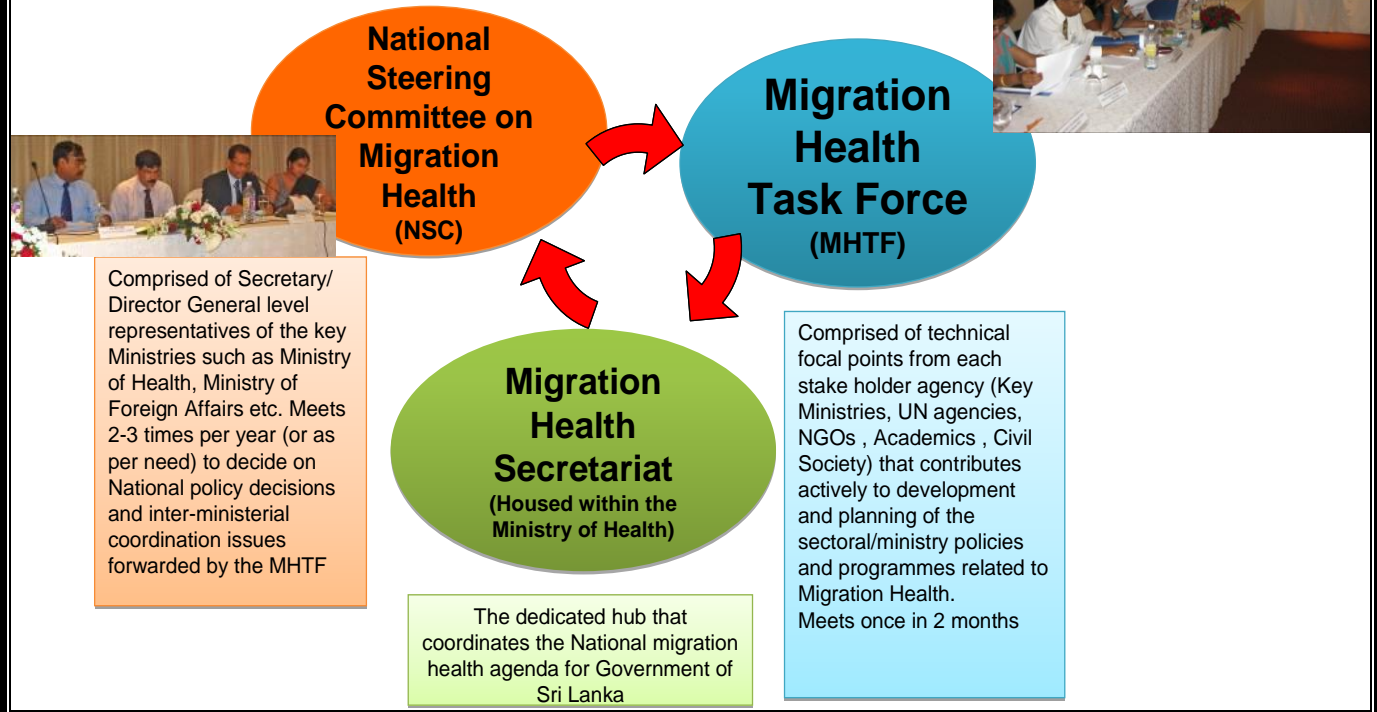
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	Act.	provide health insurance schemes to promote inclusivity and the right to health for all.
	A <i>National Migration Health policy</i> is being drafted by the Ministry of Health to address health issues of all categories of migration and impact on families left behind.	<ul style="list-style-type: none"> In 2011, the key policy areas and strategies were identified on the basis of the empirical evidence gathered through the national research on migration health and continuous consultations of the key government official and relevant stakeholders. Bilateral meetings were held with 13 key Government ministries and a scientific symposium held to consolidate major approach to policy.
	Establishing a focal point to coordinate the migration health strategy at National level	<ul style="list-style-type: none"> A <i>Migration Health Secretariat</i> was established within the Ministry of Health in 2010 with IOM support, and continues to function throughout as the permanent coordinating hub for all MHD related interventions. The Secretariat which is under the purview of the Secretary of Health is resourced with a medical officer supervised by the Director Policy Analysis and Development, with technical support from IOM health unit.
2. <i>“Promote equitable access to health promotion and care for migrants, subject to national laws and practices, and devise mechanisms for enhancing the health of migrants”</i>	Health Service Program for the returning Sri Lankan refugees developed	<ul style="list-style-type: none"> Returning Sri Lankan refugees from India have been identified as a vulnerable <i>in-bound</i> migrant group (as well as failed asylum seekers). The Ministry of Health with IOM support initiated a program to ensure their return process to the country is a healthy one. After free health checks, measures were taken to integrate the returnees within the routine health system. This not only ensured a better health package for returnees but averted any public health risks. A set of recommendations, screening guidelines and referral protocols were developed by a technical sub-committee of the Ministry of Health with IOM support, and was introduced to the local administrative, health and Defense authorities to ensure immediate integration of the returnees with the local health system. A Health awareness booklet entitled “Welcome home” was developed with support from IOM distributed among the returnees to raise awareness about the health services available for them upon their arrival to the country
	Health Promotion for potential migrant workers and their families	<ul style="list-style-type: none"> An information leaflets with health issues pertaining to the migration process in both Tamil and Sinhalese languages were developed by the Ministry of Health, Ministry of Foreign Employment promotion and Welfare and IOM. The leaflets which are distributed at SLBFE pre-departure training centres allows potential migrants to make informed choices on migration, and understand the potential social and health consequences on migration based on evidence-based research.

		<ul style="list-style-type: none"> Further discussions are required to address health issues of migration in the pre-departure training conducted by the Sri Lanka Bureau of Foreign Employment.
	Ensuring quality, standardization and a <i>public health approach</i> to health assessments for Sri Lanka's Labor migrants	<ul style="list-style-type: none"> The Ministry of Health and Ministry of Foreign Employment promotion and Welfare is currently undertaking a rapid assessment of the GAMCA approved medical centers in order to make recommendations for development of standard protocols for pre departure health assessments.
3. <i>“Assess and analyze trends in migrants’ health, disaggregating health information by relevant categories”</i>	For the first time in the history of its implementation, the <i>National Population Census of 2012</i> captured migration statistics and population trends.	<ul style="list-style-type: none"> Analyzing and the compilation of the census data is currently in progress and national statistics on migration will be launched in 2012 by the Department of Census and Statistics.
4. <i>“Better identify the gaps in service delivery in order to improve the health of all populations, including migrants”</i>	Currents trends in migration, health issues, existing services and gaps were identified via national research on migration health	<ul style="list-style-type: none"> Research on migration health was completed using nationally representative samples across five domains of migration: Internal, inbound, out bound migrants , families left behind by migrants and returning Sri Lankan refugees). The research evidence led to greater understanding on health issues and social consequences, and paved way for a National policy dialogue in December 2011. Key research findings and the recommendations were debated within a wider group of stakeholders including government ministries which will inform the migration health policy formulation process for Sri Lanka.
5. <i>“Gather, document and share information and best practices for meeting migrants’ health needs in countries of origin or return, transit and destination”</i>	Taking leading role in advancing migration health and development agenda at regional and global level	<ul style="list-style-type: none"> The 1st report card on progress of the WHA resolution on health of migrants was submitted to the 64th WHA in May 2011 by the Hon. Minister of Health. Sri Lanka continued to participate at regional and global migration health forums. In 2011 members of the migration health task force participated at 4th <i>Colombo Process meeting</i>, and presented the health challenges faced by the Sri Lankan labour migrants and gaps in current service policies. Sri Lanka contributed to the inclusion of specific recommendations on <i>migration health</i> to the <i>Dhaka Declaration</i> of Colombo Process Member Countries. The Government of Sri Lanka with the support of IOM launched a web-portal on “Migration, Health and Development”. The website act as an ‘information hub’ for general public, policy makers, researchers and industry groups to understand the health, social and economic impacts across migrant flows. Link: www.migrationhealth.lk/

<p>“Raise health service providers’ and professionals’ cultural and gender sensitivity to migrants’ health issues”</p>	<p>Engaging key policy makers and service providers on greater level policy dialogue via <i>National Scientific Symposium on Migration Health</i></p>	<ul style="list-style-type: none"> • Evidence and knowledge gathered over 18 months via national research and bi-lateral consultations were presented for synthesis by policy makers. • This discussion enabled the policy makers and planners across relevant ministries to debate and adopt the responsibilities pertaining to general roles of implementation, monitoring, evaluation of the Migration health recommendations
<p>7. “Train health professionals to deal with the health issues associated with population movements”</p>	<p>Training of health workforce to identify vulnerable migrant groups (i.e. trafficked victims, returning refugees) and integrating them with routine primary healthcare system) and social support services at district level</p>	<ul style="list-style-type: none"> • The Ministry of Justice, the Ministry of Health with the technical assistance of IOM conducted a two-day <i>Technical training program for health service providers (medical officers of health, public health specialists and judicial medical officers) to identify victims of trafficking within primary care settings</i>, and ensure correct protocols for clinical and social case management of victims of trafficking.
<p>8. “Promote bilateral and multilateral cooperation on migrants’ health among countries involved in the whole migratory process”</p>	<p>Bilateral and multilateral corporation was stimulated through the inter-ministerial coordination via Ministry of External Affairs, consular missions and other relevant ministries.</p>	<ul style="list-style-type: none"> • Sri Lanka’s participation in Ministerial Forums such as <i>the Colombo process</i> in July 2011 been important in advancing the migration health agenda. • Ministry of Foreign Employment, Promotion and Welfare also advocated for minimum standards in wages, standard employment contracts and other protections for Sri Lanka’s labour migrants.
<p>9. “Promote strengthening of health systems in developing countries”</p>	<p>Strengthening primary health care level services to enhance access and better services for the migrants and their family members</p>	<ul style="list-style-type: none"> • Pilot study is being carried out in three districts on NCDs, migration and community participation. Discussions are also underway to develop a more coordinated action plan with the existing health service providers at the district level on tracking vulnerable left behind children of migrant families. • Primary health care strengthening aims at linking migrants and their families to the system from pre departure stage through to return and thereafter.
<p>10. “Contribute to the reduction of the global deficit of health professionals and its consequences on the sustainability of health systems”</p>	<p>Establishment of the <i>Foreign Placement Coordinating Center (FPCC)</i> with the Ministry of Health</p>	<p>Further monitoring is required to observe how international recruitments affect the local availability of Human resources for health.</p>

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



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