

**Sri Lanka - Opening Statement: Health
in the Context of Migration and
Forced Displacement
UN General Assembly, New York**

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Excellencies, members of the Panel, ladies and gentlemen

Sri Lanka is pleased to co host this side event together with Italy, IOM, WHO and UNHCR. As we understand it is in the first time the UN general assembly has considered to bring on to the agenda through a side event, the subject of Health of Migrants.

The challenge for providing Health for migrants is complex. It certainly questions our understanding for Universal health coverage beyond borders, which in turn would affect sustainable development to which we are all now committed . It questions our responsibility towards global public health and country level capacities to respond in specific situations of large movements of migrants .

Migration unfolds different situations in different countries, the challenges vary. A national diagnosis , mapping all possible types of migrants that affect the country and the health challenges that can arise is vital.

Ladies and Gentlemen, Sri Lanka acknowledges and appreciate the direction given to member states in the World Health Assembly resolution of 2008 on "promoting health of migrants" . In Sri Lanka, the subject has received continued political commitment. The Ministry of health responded by establishing a focal unit to define our agenda for Migration and health. We received timely support from the International Organization for Migration where a rapid analysis of the countries migration profile was examined together with analysis of national stakeholders and the countries policy, legal and institutional frameworks pertaining to migration and health. To address the gaps identified we explored options further, through several commissioned studies, supported by the IOM.

This extensive research, was the basis for the National Migration Health Policy that was launched in 2013 under the leadership of HE the President Maithripala Sirisena who was at the time the Minister for Health.

Ladies and Gentlemen, The migrant profile in Sri Lanka has many facets, being that of outbound migrants and the returnees, other inbound migrants , internal migrants. We also consider the

families left behind of outbound labor migrants as there are several issues that have health, social and economic implication.

In Sri Lanka we have significant public health challenges posed due to migration , such as in maintaining a malaria free country, the low prevalence for HIV , controlling TB, however , our concern for health of migrants is not merely seen from a protection point of view of the public health of a country. Our experience tells us that differences in providing for health lead to wide disparities in health outcomes between the Sri Lankan host population and the Estate/plantation communities. Today, after decades of interventions, although the disparities have narrowed we recollect that we have had to put a concerted effort into health service delivery to do this.

Ladies and Gentlemen ,

We faced the challenge from internal migration during the aftermath of the internal conflict where large numbers of our own people were freed from previously terrorist held areas. We had to adopt temporary arrangement to secure their safety during a transition period and health received priority attention. With the extension of our existing public health services and setting up of special hospitals through a rapid response plan we were able to achieve good health outcomes. We were able to do this as we already had an organized public health system, and replicated the same model within a short time to serve this transition period of internal migration.

We also saw a steady return of our Tamil speaking citizens who had been residing in south India for decades during the time of the conflict. Here too we followed an approach of getting them to access local health services soon after their return, rather than creating barriers to their return due to health concerns.

A growing number of asylum seekers also use Sri Lanka as a transit point. We recognize the need to have a better preparedness plan. Currently we adopt public health measures to prevent possible disease outbreaks as well as look after their primary health care needs and any emergency health care.

Ladies and Gentlemen,

Sri Lanka is considered a labor sending country, but in recent times we are also now a labor receiving country. We recognize that whilst we expect primary health care access to our labor migrants in other host countries, it is time we consider reciprocal for the labor migrants who are supporting our economy. We are to introduce health assessment for inbound migrants applying for resident visa which will apply to the labor migrants as well. The health assessment will not be a barrier for employment. As currently there is no health screen , it will pave the way to identify diseases of public health importance to us and we will ensure that treatment is provided . We consider that offering treatment will minimize fraudulent practices of migrants.

Ladies and Gentlemen, Sri Lanka recognizes the importance of international dialogue on migration , Health and development. In the context of the SDGs this becomes important. Migrants would be the group, left behind ,in country estimates of UHC.

The WHA resolution in 2008 called upon member states to take action to promote migrant sensitive health systems , and having developed our own national policy on migration health and development, we recognized that addressing several aspects of migrants health is beyond our scope and borders. Sri Lanka had noted that global dialogues were infrequent and the WHA resolution too needs to be reviewed and its monitoring strengthened. We have been engaged to bring migration and health into international attention through our regional platforms such as the Colombo Process and at the recently concluded SEA regional committee of the WHO. Sri Lanka also made a request for its inclusion into the agenda of the next Executive Board meeting of the WHO so that recommended revisions can be considered to the existing WHA Resolution on promoting health of migrants.

In February 2017, Sri Lanka will also be hosting the 2nd Global Consultation on Migrant Health, focusing on Resetting the Agenda. The event is jointly organized by the IOM, WHO and GoSL.

Ladies and gentlemen, Health of Migrants has come to the limelight due to needs of addressing the health of migrants and refugees moving in large numbers, this side event of the UN GA is certainly an opportunity to revisit the WHA resolution on Promoting health of Migrants, where a significant global populations' health coverage is focused upon, in keeping with our commitments to SDGs.

Thank you.