

INTERNATIONAL MIGRANTS' HEALTH

HEALTH DETERMINANTS: PUBLIC POLICY AND INTER- SECTORAL COLLABORATION

SCIENTIFIC LITERATURE REVIEW SUMMARY SHEET

What will you find on this summary sheet?

This document summarizes the scientific literature regarding public policy and intersectoral collaboration in the context of international migrants' health within the Region of the Americas. The information provided here is based on a broader scoping review of the published scientific literature regarding international migrants' health in the Region of the Americas between January 2016 and March 2023.

This summary sheet is a narrative and descriptive synthesis of main topics related to the field, with a focus on international migration and health in the Region. It does not fully represent the heterogeneity of information available internationally in terms of type of migrants, countries of origin, and study designs; however, it provides a description of general patterns often found in this literature. In this scoping review, 32 articles addressed public policy and intersectoral collaboration in the context of international migrants' health, or touch upon multiple determinants of health that support the need for intersectoral collaboration.

The results presented in the following scientific literature review summary sheet are based on selected articles from the review and are not intended to be an exhaustive review of all current literature. You can find all references in the interactive dashboard located within PAHO's Information Platform on Health and Migration.

[Access the PAHO Information Platform on Health and Migration](#)

Are there other similar scientific literature summary sheets on international migrants' health available?

The scoping review on international migrants' health included a total of 837 academic articles categorized within three broad themes: health outcomes, health systems and health determinants. All these articles are described and presented in an interactive dashboard along with the 11 other similar summary sheets that are available and that touch upon more specific categories within these three major themes.

MAIN FINDINGS

What can we learn from the scientific literature so far about public policy and intersectoral collaboration in the context of international migrants' health?

Studies retrieved from the published scientific literature suggest some of the following findings:

Intersectoral collaboration is defined as the "coordinated intervention of institutions representing more than one social sector, in actions aimed, in whole or in part, at addressing problems related to health, well-being, and quality of life" (1,2). It generates tools for health promotion in different environments. Intersectoral collaboration promotes communication between civil society, the scientific community, public policymakers, and managers of health programs, favoring the incorporation of health and equity issues in the agenda of different sectors (3). The literature review, in this regard, explores the needs for intersectoral collaboration in the context of international migration in the Americas.

GENERAL FINDINGS ON INTERSECTORAL COLLABORATION

- Intersectoral collaboration is critical throughout the Region, but in the context of Latin America, the literature has pointed out the importance of health-related social determinants that require a systemic approach and the construction of solutions from all spheres of society, particularly: international migration policies, socioeconomic status, ethnicity, gender, and migratory condition (4,5).
- There is also systematic literature that seeks to make visible the need for coordinated collaboration between the health and social protection systems of the State to ensure migrants' access to systems that consider cultural patterns and migratory experiences (6–9). For example, if the cultural patterns of migrants are associated with non-traditional

healing practices and rituals, health systems should adapt and build an intercultural dialogue (10–13).

SOCIAL INTEGRATION AND SOCIAL PROTECTION

- In Latin America, particularly in Chile, the literature indicates that the difficulties of social integration - including access to health, housing, and education - upon arrival and long waiting times for refugees to obtain legal status become important barriers to the effective provision of health care. It is also noted that refugees and asylum seekers were completely unaware of how the health system in Chile functions and did not have access to it until a specific need arose. Even in those cases of urgency, they point to cases in which they had been denied the right to health care due to the presentation of expired identity documents or related to the refugee application. In this sense, and in the context of Latin America, evidence emphasizes the need to reduce the gaps between migrants and the local population, especially in terms of their access to the health system. To this end, the literature suggests the generation of concrete health strategies and policies that consider an approach focused on social participation of the immigrant community to bring the health system closer to this population (14).
- Social integration can also be observed in Latin America in effective access to education, which is reflected in a higher proportion of immigrant



children outside the school system and a higher proportion of multidimensional poverty (14).

- The literature reviewed, in the United States, Canada, and Chile, focuses particularly on prevention, risk communication and treatments for the migrant population, associated with pathologies such as: cancer, diabetes, and mental health (1,7–9,12,13,15–18). In this regard, it is necessary to count on the collaboration of different sectors of the State and civil society to provide adequate social protection to migrants (6), particularly for chronic and high-cost pathologies (19).

INTERCULTURALITY

- Intercultural health is a relevant approach of analysis and implementation of policies regarding health of migrants and refugees.
- A study from Chile shows essential elements to consider in the care of international migrants, including the training and awareness-raising of staff on the intercultural approach through strategies following the local reality in which each health establishment exists (20).

Featured Article

Community Health and Wellness Fair: A Strategy for Assessment of Social Determinants of Health, Inclusion, and Engagement of Newcomers (21)

This article reports on an experience of community health fairs as a strategy for health promotion attending to social determinants of health. Researchers describe that community health fairs have been used informally for health promotion, education, and screening services for underserved and hard to reach populations. This study is based on an annual health fair that assesses the general perception of the health status of newcomers in relation to determinants of health and evaluates its effectiveness.

A cross sectional study using questionnaires focused on the health and social determinants of health in the 3rd Annual Refugees and Immigrant's Health and Wellness Resources Fair in Allegheny County, in the United States. Perception of health was examined in relation to other determinants, including language, regular checkups, employment, income, education, access to health, and psychosocial needs.

Results show that health perception varied by ethnicity, was influenced by English proficiency, access to health, employment, and regular checkups. A qualitative analysis to the narrative responses revealed that the health fair was very effective in breaking structural barriers with providers, as well as for community engagement. The annual health fair was a successful strategy in the assessment of health determinants and for community engagement of newcomers.



Social Vulnerability and Health Needs of the Immigrant Population in Northern Chile (22)

This study aimed to understand health vulnerabilities and health care needs of immigrants in Chile through a qualitative exploratory study. Its findings suggest that health vulnerabilities respond to migrants' irregular status, precarious work, and low incomes. As researchers report, work expectations are not always satisfied in host countries. Social conditions that shape health vulnerabilities include lack of health insurance, low job qualification, low wages, sporadic and informal jobs (such as domestic services, merchants, prostitution, restaurant service, etc.) and the need to share the home with their close social network (children, family, or friends).

“Well, the people I care for here, two immigrants and with immigrant children, a Bolivian and a Mexican, they go through very difficult situations, because they are not professionals”.
(Interviewee 6).

The descriptions made by participants are a clear example of how the migrant condition tends to degrade them occupationally. For example, the skills accumulated in their countries of origin are not recognized and they must resort to more precarious jobs.

Results suggest the need to socialize health policies for migrants and to expand targeted strategies for health care. Also, health vulnerabilities related to work and living conditions underline the need for an intersectoral approach for health in the context of international migrants.

References

1. Astorga-Pinto SM, Cabieses B, Calderon AC, McIntyre AM. Percepciones sobre acceso y uso de servicios de salud mental por parte de inmigrantes en Chile, desde la perspectiva de trabajadores, autoridades e inmigrantes. *Revista del Instituto de Salud Pública de Chile*. 2019;3(1).
2. Bahamondes L, Laporte M, Margatho D, de Amorim HSF, Brasil C, Charles CM, et al. Maternal health among Venezuelan women migrants at the border of Brazil. *BMC Public Health* [Internet]. 2020;20(1):1771. Available from: <https://bmcpublihealth.biomedcentral.com/articles/10.1186/s12889-020-09912-x>.
3. Antonipillai V, Baumann A, Hunter A, Wahoush O, O'Shea T. Health Inequity and "Restoring Fairness" Through the Canadian Refugee Health Policy Reforms: A Literature Review. *Journal of immigrant and minority health*. 2018;20(1):203–13.
4. Cabieses B, Obach A. Vulnerabilidad social y su efecto en salud en Chile. Organización Panamericana de la Salud.
5. Cabieses B, Obach A. Explorando la relación entre migración internacional, vulnerabilidad social y salud. *Cuadernos Médicos*; 2018.
6. Yadee J, Bangpan M, Thavorn K, Welch V, Tugwell P, Chaiyakunapruk N. Assessing evidence of interventions addressing inequity among migrant populations: a two-stage systematic review. *International Journal for Equity in Health* [Internet]. 2019;18(1):64. Available from: <https://equityhealthj.biomedcentral.com/articles/10.1186/s12939-019-0970-x>.
7. Villegas N, Cianelli R, de Tantillo L, Warheit M, Montano NP, Ferrer L, et al. Assessment of Technology Use and Technology Preferences for HIV Prevention Among Hispanic Women. *Hispanic Health Care International* [Internet]. 2018;16(4):197–203. Available from: <https://pubmed.ncbi.nlm.nih.gov/31185747/>.
8. Aranda R. Living in the Shadows: Plight of the Undocumented. *Journal of Clinical Psychology* [Internet]. 2016;72(8):795–806. Available from: <https://pubmed.ncbi.nlm.nih.gov/27552394/>.
9. Rodríguez Vargas JM, Vargas-Valle ED, López Jaramillo AM. La afiliación al sistema de salud de personas migrantes venezolanas en Colombia. *Revista Población y Salud en Mesoamérica*. 2021;18(2).
10. Patel A, Dean J, Edge S, Wilson K, Ghassemi E. Double Burden of Rural Migration in Canada? Considering the Social Determinants of Health Related to Immigrant Settlement Outside the Cosmopolis. *International Journal of Environmental Research and Public Health* [Internet]. 2019;16(5):678. Available from: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6427738/>.
11. Ferdous M, Goopy S, Yang H, Rumana N, Abedin T, Turin TC. Barriers to Breast Cancer Screening Among Immigrant Populations in Canada. *Journal of immigrant and minority health*. 2020;22(2):410–20.
12. Tandon P, Kuehne L, Olden J. Trends and Knowledge Gaps in the Study of Nature-Based Participation by Latinos in the United States. *International Journal of Environmental Research and Public Health* [Internet]. 2018;15(6):1287. Available from: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6025174/>.
13. Alaazi DA, Salami B, Yohani S, Vallianatos H, Okeke-Ihejirika P, Nsaliwa C. Transnationalism, parenting, and child disciplinary practices of African immigrants in Alberta, Canada. *Child Abuse and Neglect*. 2018;86:147–57.
14. Cabieses B, Oyarte M. Health access to immigrants: identifying gaps for social protection in health. *Revista de Saúde Pública*. 2020;54:20.

15. Ahmed S, Shommu NS, Rumana N, Barron GRS, Wicklum S, Turin TC. Barriers to Access of Primary Healthcare by Immigrant Populations in Canada: A Literature Review. *Journal of immigrant and minority health*. 2016;18(6):1522–40.
16. Carreño-Calderón A, Cabieses B, Correa-Matus ME. Individual and structural barriers to Latin American refugees and asylum seekers' access to primary and mental healthcare in Chile: A qualitative study. *PloS One*. 2020;15(11):e0241153.
17. Hahn RA, Barnett WS, Knopf JA, Truman BI, Johnson RL, Fielding JE, et al. Early Childhood Education to Promote Health Equity: A Community Guide Systematic Review. *Journal of Public Health Management and Practice* [Internet]. 2016;22(5):E1–8. Available from: <https://koreauiv.pure.elsevier.com/en/publications/early-childhood-education-to-promote-health-equity-a-community-gu>.
18. Ovbiagele B. HEADS-UP: Understanding and Problem-Solving: Seeking Hands-Down Solutions to Major Inequities in Stroke. *Stroke* [Internet]. 2020;51(11):3375–81. Available from: <https://pubmed.ncbi.nlm.nih.gov/33104464/>.
19. Beck TL, Le T-K, Henry-Okafor Q, Shah MK. Medical Care for Undocumented Immigrants. *Primary Care: Clinics in Office Practice* [Internet]. 2017;44(1):e1–13. Available from: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7141175/>.
20. Cruz-Riveros C, Urzúa A, Macaya-Aguirre G, Cabieses B. How Do Health Teams Perceive International Migrant Users of Primary Care? *IJERPH*. 2022 Aug 12;19(16):9940.
21. Salman K, Turek JM, Donovan C. Community Health and Wellness Fair: A Strategy for Assessment of Social Determinants of Health, Inclusion and Engagement of Newcomers. *Journal of Community Health*. 2021;46(3):527–37.
22. Ramírez-Santana M, Rivera Humeres J, Bernales Silva M, Cabieses Valdés B, Universidad Católica del Norte Chile, Universidad Católica del Norte Chile, et al. Vulnerabilidad social y necesidades de salud de población inmigrante en el norte de Chile. *Migraciones internacionales*. 2019;10:1–20.

PAHO



Pan American
Health
Organization



World Health
Organization
REGIONAL OFFICE FOR THE
Americas

HEALTH AND MIGRATION

MAPPING OF
SCIENTIFIC LITERATURE

MARCH 2023

© Pan American Health Organization, 2023.
Some rights reserved. This work is available under
license CC BY-NC-SA 3.0 IGO.

525 23rd St. NW
Washington, DC 20037

www.paho.org

  PAHOWHO

 OPSPAHO

 PAHOTV