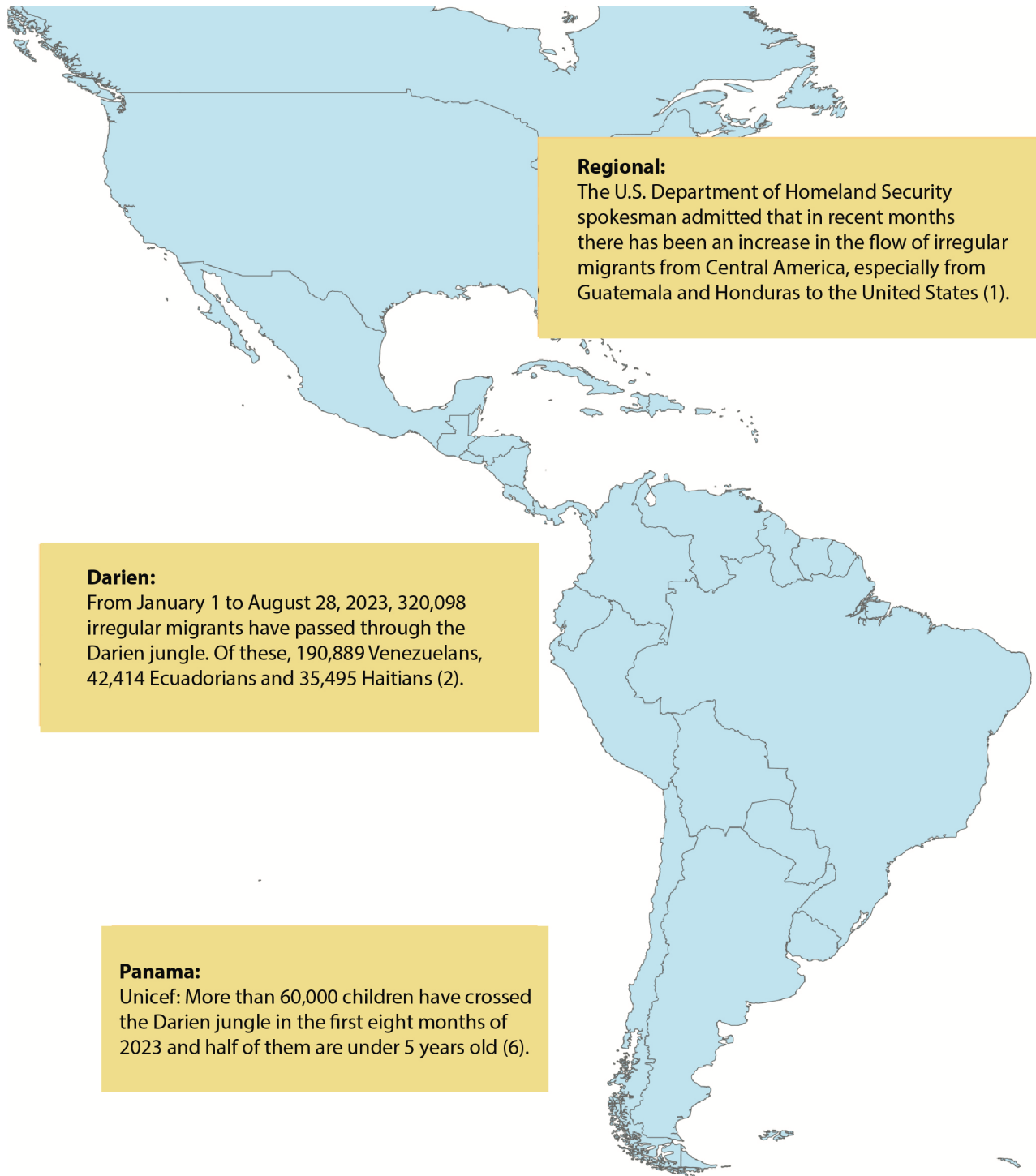


KEY UPDATES

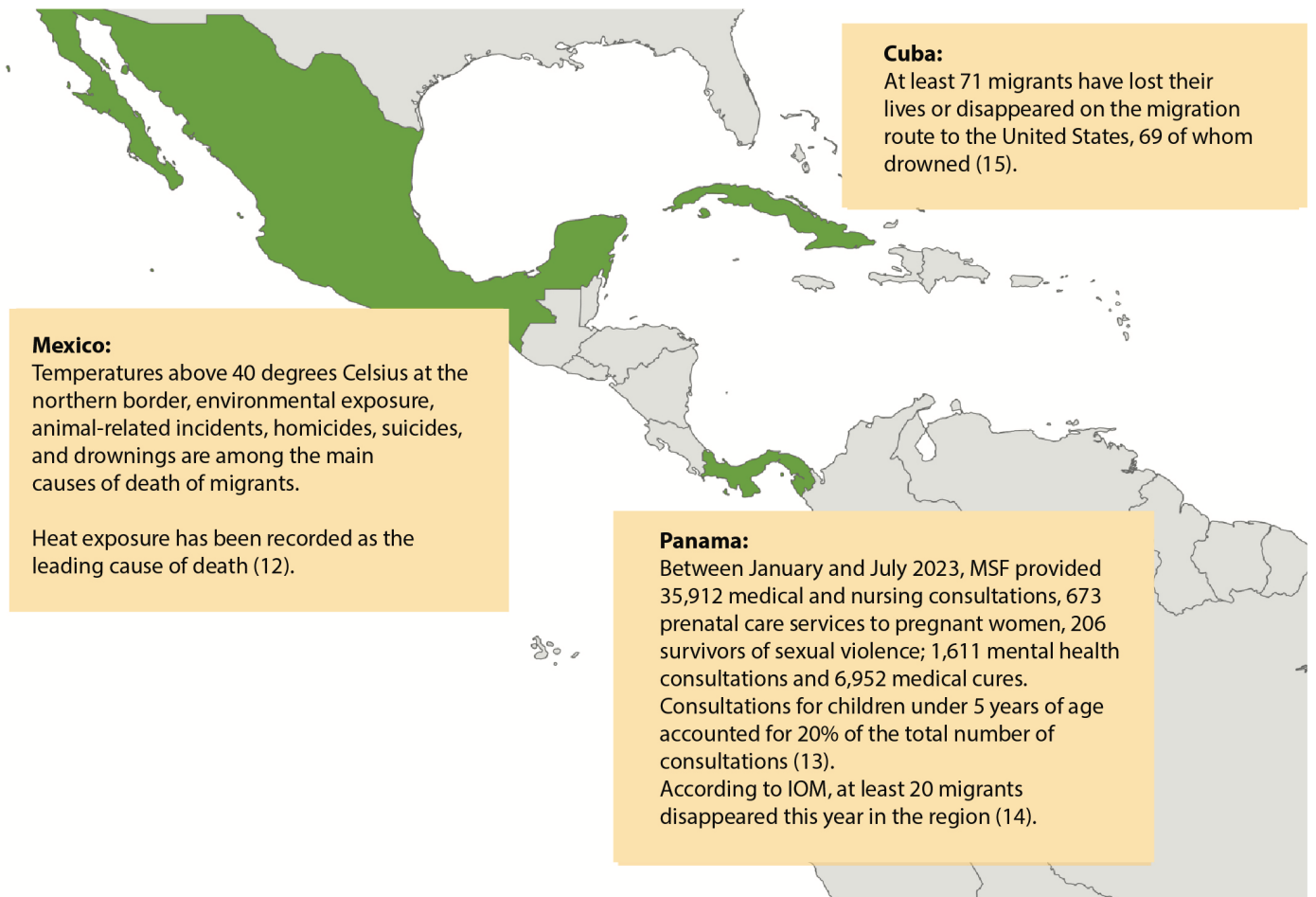


KEY UPDATES





HEALTH EMERGENCIES



HEALTH ISSUES

Maternal, Sexual and Reproductive Health:

Colombia: according to the report of the National Institute of Health, between January and August 2023, 2,331 cases of extreme maternal morbidity have been reported in women of foreign nationality; of these 2,290 correspond to women of Venezuelan nationality (16).

Non-communicable Diseases:

Colombia: according to data from the Ministry of Health and Social Protection and the Health Cluster between 2017 and 2023, in Colombia the most frequently chronic and high-cost disease reported in migrant population was HIV with 14,616 cases; 21.1% of these people not affiliated to the health system (17).

Child Health

Mexico: Migrant minors suffer from skin, gastrointestinal, flu, cough, and high fever due to exposure to the sun, dust and rains that occur in Tapachula due the dry-summer season. There are an average of 100 migrant children and adolescents who sleep and play among garbage and waste (18).

Venezuela: Only 26 % of children with HIV in Venezuela are receiving treatment, according to ONUSIDA. Many children do not know they are infected, and it is estimated that more than 3,000 have HIV, but only 1,016 receive treatment (19).

Communicable diseases:

Mexico: four cases of malaria reported in migrants in Pijijiapan. Local health authorities have established a sanitary fence to prevent the spread of the disease (20).

Access to health services:

Mexico: migrants in need of health care will be attended to and given free medication. The Secretary of Health of Chiapas stated that all persons on the move who need medical attention should go to health centers or the General Hospital of Tapachula to be examined and determined their health needs (21).

Brazil: the most vulnerable groups, such as Afro-descendants, female heads of household, indigenous people and the LGBTQ+ community, are the most affected by limitations in access to healthcare (22).

Affiliation to health services:

Costa Rica: according to data from the Costa Rican Social Security Fund in 2022, 7.93% of hospital discharges reported by the integrated network of services “Huetar Norte” corresponded to foreigners not affiliated to the health system (23).



NEEDS / GAPS IN MIGRANTS' HEALTHCARE

HEALTH NEEDS:

The main health needs of the migrant population are associated with the lack of information regarding the existence of health services in transit and host countries, lack of adequate medication in health services, among others.

Migrants in transit:

- Unrestricted access to health services for emergency care (external injuries), delivery and newborn care, comprehensive care to cases of gender-based violence and acute events of non-communicable diseases.
- Access to mental health and psychosocial support services.
- Information on health services available at entry points in the borders and transit routes within countries.
- Sexual and reproductive health services to improve their well-being and safety, including the provision of gynecological examinations, laboratory tests and prenatal care.

Migrants in countries of destination:

- Monitoring and care of pregnant women during labor and puerperium, including newborns.
- Sexual health including care for sexually transmitted infections.
- Child health with access to vaccination (according to the country's calendar), growth control and other programs.
- Access to timely diagnosis and treatment of non-communicable diseases such as asthma and hypertension, among others.
- Enrollment in health insurance systems that are available in the country.



ACTIVITIES CARRIED OUT BY PAHO

On 9 and 10 August, a technical meeting was held in Bogotá, Colombia to discuss and analyze the management of health information in events of human mobility in humanitarian contexts with the participation of health sector authorities from Panama, Honduras and Guatemala, including Colombia.

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