

## Open letter to the EU Ministers of Health

Brussels, 17 June 2015

### Concerning: upcoming EPSCO Council debate on migrant health

cc. European Commissioner for Health & Food Safety, Mr. Vytenis Andriukaitis

Dear Ministers,

We are writing to you ahead of the EPSCO Council meeting in Luxembourg on 19 June 2015, where you will discuss the health dimension of the European agenda of migration. During the April 2014 informal EPSCO Council meeting in Athens, the Health Ministers agreed on the promotion of access to healthcare for all migrants, as well as the need for “special health services for particularly vulnerable migrant groups”. In the June 2014 Conclusions on the economic crisis and healthcare, the Council acknowledged that “universal access to healthcare is of paramount importance in addressing health inequalities”.

Although these agreements and acknowledgments correspond to real needs, we have seen but very few real improvements in access to healthcare for asylum seekers, undocumented third-country nationals, or destitute EU citizens in the last years. Migrants and their children continue to face systematic barriers regarding access to health services in law and practice across the EU. The data collected by Doctors of the World – Médecins du monde International Network among the patients seen in their clinics across Europe in 2014 show that 54.2% of pregnant women had no access to antenatal care – among them, 58.2% came to receive care too late (after the 12<sup>th</sup> week of pregnancy). Less than one out of every two children (42.5%) had been vaccinated against tetanus, and only about a third (34.5%) were vaccinated against mumps, measles and rubella – well below coverage rate of the general population, which is around 90%.

The right to healthcare is one of the most basic, most universal and most essential human rights, especially for pregnant women and children. Yet, Europe tolerates national laws that hinder vaccination coverage or antenatal and postnatal care from being universal and available to all children and women residing on its territory. Excluding population groups from essential healthcare services is unethical, costly and contradictory to public health. There is an immediate need for universal access to care in the EU.

Increasingly dangerous migration routes due to tightened border controls, detention, and living in fear of expulsion is what awaits the majority of migrants who decide to seek safety and refuge in Europe, with obvious consequences for their physical and mental health and that of their children. Moreover, access to healthcare is often invoked as a tool to try and regulate migration flows, although this is highly unethical and hard data show this to be ineffective. The fact that migrants had been living on average 6.5 years in the surveyed country before consulting MdM, that only 3% had migrated for health reasons and that 90.5% of chronically ill migrants did not know about their condition before coming to Europe, clearly proves that health tourism among destitute migrants is a myth.

In accordance with medical ethics, a large majority of health professionals refuse restrictive measures that prevent them from giving appropriate care to everyone, regardless of their administrative or social status and the existing legal barriers. But more is needed in terms of national and EU policies.

The signatories of this open letter are counting on the Health Ministers to act firmly, so that evidence-based public health policies, human rights, and the health protection of the most vulnerable are at the heart of public health and migration policies.

**We ask the Health Ministers to challenge EU and national policies on migration which undermine public health objectives, and use the tools available at European level to drive developments towards universal access to healthcare in the Member States of the European Union.**

With thanks in advance for your kind consideration,



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