U.S Government Efforts Addressing Migrant Health



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Overview

• Migrant health? Who is a migrant in the U.S?

U.S federal agencies with a migrant health role

Opportunities on migrant health

Who is a migrant (in the U.S)?

- No standard definition
- Different agencies and organizations use ...
 - Different definitions for the same term
 - Different terms as synonyms
 - Different terms without defining them

Who is a migrant (in the U.S)?

- Broad concept: individuals residing in the
 U.S who were born in another country
- Foreign-born (US Census Bureau)
 - -~42.2 million migrants in the U.S (2014)

Different migrant categories

Legal migration status







- Length of residency and mobility
- Different occupations





U.Sfederal agencies with a migrant health role

U.Sfederal agencies with a migrant health role

 No single federal agency with main responsibility for migrant health in the U.S

- Different agencies or departments focus on different migrant sub-populations
 - Migrant and seasonal farmworkers
 - Refugees
 - Legal permanent residents

U.S Health and Human Services Health Resources and Services Administration (HRSA)

- Supports community clinics providing services to "migrant and seasonal agricultural workers"
 - ~1-5 million agricultural workers
 - Most are foreign-born
 - Comprehensive primary care
 - Culturally and linguistically appropriate
 - Affordable





National Advisory Council on Migrant Health

U.S.Health and Human Services CDC/Division of Global Migration and Quarantine (DGMQ)

 Prevent the introduction and spread of communicable diseases in the US associated with globally mobile populations

- Overseas Refugee Programs (Kenya, Thailand)
- US-Mexico Unit (San Diego)

DGMQ's Regulatory, Policy and Guidance Roles

 Oversee medical examination (including TB tests) and required vaccinations for refugees and green card applicants



- Refugees: ~80,000/year
- Green card applicants: ~1 million/year
 - 50% overseas and 50% in the U.S

Cost/effectiveness of DGMQ's overseas disease screening and treatment

- Enhanced TB screening policy
 - 60% additional TB cases identified and treated (2012)
 - Saving \$15 million in medical costs to US health system
- Presumptive treatment of intestinal parasites
 - Reduced parasite prevalence and outbreaks among refugees in the U.S

DGMQ CureTB Program: Continuity of care for TB cases crossing the U.S-Mexico border

Partners:

 U.S and Mexico federal and local TB programs, USMBHC, Immigration and Customs Enforcement (ICE)

Current focus: TB control in immigration detention centers

U.S Health and Human Services Office of Refugee Resettlement (ORR)

- Local integration of refugees
 - Supports resettlement organizations
 - Medical screening
 - Employment services
 - Language classes
 - Health care



- Unaccompanied children (UAC) services
 - Placement, timely release and care of UAC in ORR custody

Department of Homeland Security

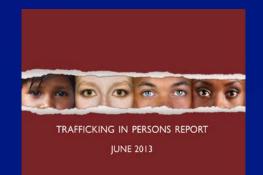
- Customs and Border Protection
 - Apprehension and care of unauthorized immigrants
- Immigration and Customs Enforcement (ICE)-Health Service Corps
 - Coordinates health services in immigration detention centers



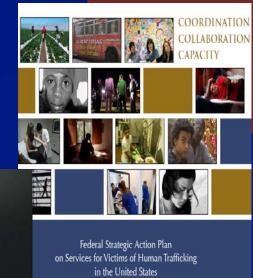


U.S Department of State

Office to Monitor & Combat Trafficking in Persons ww.state.gov/j/tip/



 U.S Trafficking Victims Protection Act of 2000



2013-2017

the is a victim of trafficking, Call 1.888.3737.888

LOOK

BENERTH THE SURFACE



Migrant Health: Opportunities

Opportunities (1)

- Enhance migrants' access to health care and preventive services
 - Affordable Care Act
 - Expand health insurance coverage
 - Increased funding for community health centers and prevention services
 - Coordination with Mexico's health insurance programs

Opportunities (2)

- Increase awareness and address migrant health disparities
 - Emphasize both health disparities AND health advantages of migrants
 - Recognize migration as a social determinant of health

National Initiative to Eliminate Health Disparities

"For the first time, the U.S has a coordinated road map designed to give <u>everyone</u> the chance to live a healthy life" (Ex. HHS Secretary Sebelius)





But ... migrants are not mentioned!



CDC Office of Minority Health and Health Equity

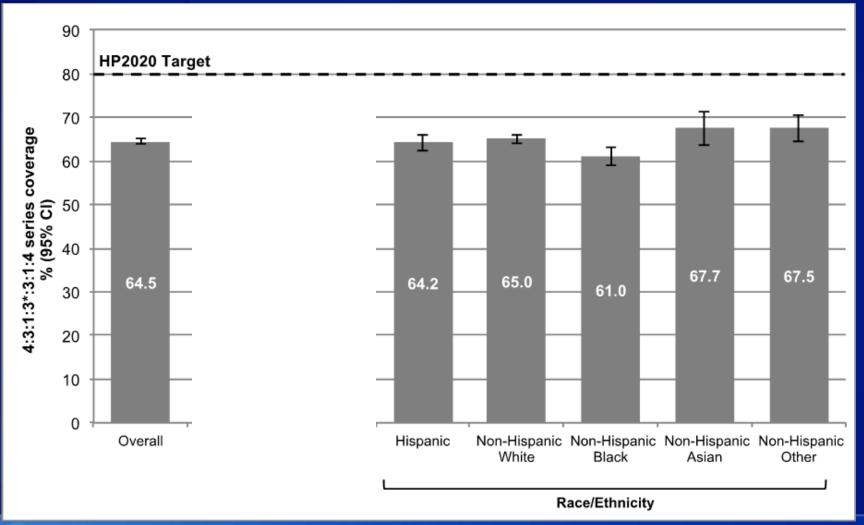
- CDC Migrant Health Working Group
- 1st CDC Conference on Migrant Health Disparities (May, 2014)

- CDC Health Disparities Reports (2011, 2013)
 - Included data on the foreign-born

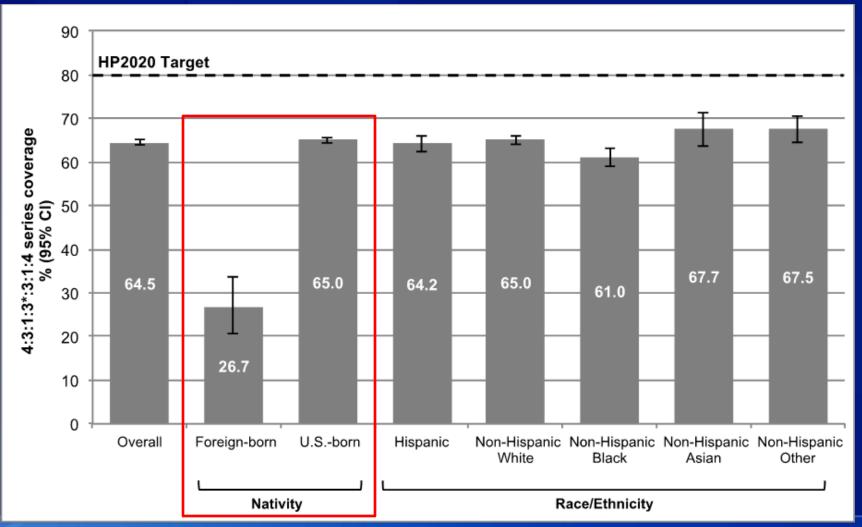
Enhancing monitoring of migrant health

- Analysis of national health data by country of birth
 - E.g., National Immunization Survey

Coverage Levels for 4:3:1:3*:3:1:4 Vaccination Series Completion in Children (19–35 Months), by Race/Ethnicity (2010–2012)



Coverage Levels for 4:3:1:3*:3:1:4 Vaccination Series Completion in Children (19–35 Months), by Nativity and by Race/Ethnicity (2010–2012)



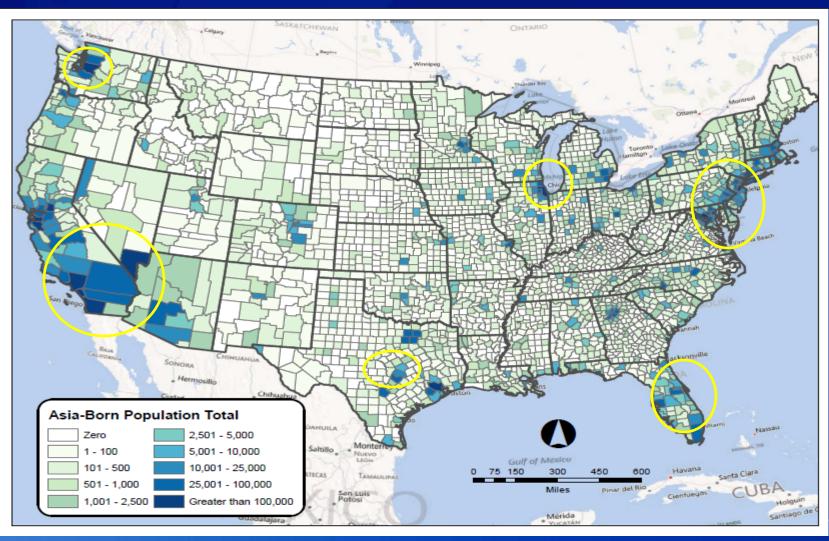
Enhancing monitoring of migrant health

- Encourage collection of migrationrelated data (e.g., country of birth, time in the U.S) in National Data Systems
 - National Notifiable Diseases Surveillance System
 - Country of birth (added in 2014)

Opportunities (3)

- ➤ Public health interventions targeting migrant populations with higher risk and/or burden of disease
- CDC project: Hepatitis B and Asian-born in the U.S
 - Partner with community-based organizations to conduct outreach, education, screening, vaccination and referral for care and treatment

Asian-born populations Main geographic concentrations



Opportunities (5)

- Provide cultural and linguistically appropriate health services
 - U.S National Standards for Cultural and Linguistically Appropriate Services (CLAS)

National Standards for CLAS in Health and Health Care: A Blueprint for Advancing and Sustaining CLAS Policy and Practice



National Standards for Culturally and Linguistically

Appropriate Services in Health and Health Care:

A Blueprint for Advancing and Sustaining CLAS
Policy and Practice

Office of Minority Health

U.S. Department of Health and Human Services

April 2013





Access to language services

Limited English Proficiency (LEP) A Federal Interagency Website

- President's Executive Order 13166 (2000)
 "Improving Access to Services for Persons with LEP", requires Federal agencies to:
 - Implement a system to provide meaningful access to services by LEP persons, without unduly burdening the fundamental mission of the agency
- Title VI of the Civil Rights Act (1964)
 prohibits discrimination by national origin

Language access Focus areas

Health care organizations

- Public health surveillance:
 - Translation of questionnaires
 - Access to interpreters

Emergency risk communication

Emergency Risk Communication

- SARS, H1N1, Ebola, Zika, ...
- Need to communicate with migrants from affected countries living in U.S
 - Translation and cultural validation of public information materials
 - Targeted community outreach
 - Addressing stigmatization





Emergency risk communication

 Established CDC work group for communication with Limited English Proficient populations

 Developed (pilot) communication plan for outreach to non-English speakers

Zika and other mosquito-borne diseases



- Multilingual translations:
 - Spanish
 - Portuguese
 - Haitian Creole
 - Tagalog
 - Mandarin
 - Vietnamese
 - Korean
 - Arabic

Migrant outreach

- Collaboration with migrant-serving organizations, ethnic media and initiatives
 - E.g., Hispanic-serving organizations
 - Health Initiative of the Americas (HIA)
 - NCLR, LULAC NCFH
 - MCN
 - New America Media
 - Mexican Consulates in the U.S
 - Binational Health Week (HIA)



Opportunities (6)

Coordination between U.S agencies and organizations serving migrants





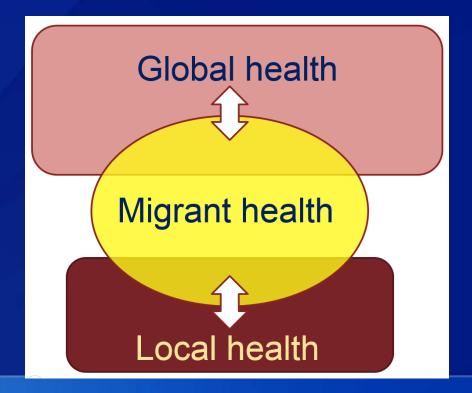
- White House Task Force on New Americans
 - Launched in 2014
 - Multiagency
 - Building WelcomingCommunities Campaign

Opportunities (7)

- ➤ Collaboration between U.S and international partners:
 - Agencies and organizations in countries of origin (e.g., Mexico's Migrant Health Program)
 - International agencies working on migrant health (e.g, IOM, European Union)

Opportunities (8)

► Include migrant health in global and local health initiatives



Migrants: a shared population, a shared responsibility





Thank you! ¡Muchas gracias!

For more information, please contact:

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The findings and conclusions in this report are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.

