



WHO/UNHCR/UNICEF guidance on vaccination of refugees, asylum-seekers and migrants in the WHO European Region



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The unprecedented influx of refugees and migrants to Europe: *a public health challenge*

Refugees and migrants: common health problems

- Similar to those of the rest of population
- Injuries, hypothermia, chronic diseases, psychological stress and violence
- Vulnerable groups: women and children

Migration and communicable diseases: no systematic association

- Communicable diseases associated with poverty
- Tuberculosis – risk of being infected depends on the country of origin, living and working condition in the country of immigration, e.g.
 - Incidence in Syria: 17/100 000
 - Incidence in Nigeria: 338/100 000
 - Incidence in WHO-EURO: 39/100 000
- Vector-borne diseases (malaria, Dengue etc.): some threat of reintroduction
- Risk of Ebola, Lassa, MERS is extremely low

Risk of increased transmission of communicable diseases

- Mass movement, lack of shelter, insufficient sanitation
- Increased risk of respiratory diseases, diarrhoea and skin infections

Risk of increased transmission of VPI

Refugees and migrants:

- Most coming from countries with good vaccination coverage
- Small children at risk of not being vaccinated

Host communities:

- Many remain susceptible («anti-vaxxers», underserved groups)

Most outbreaks of VPI (measles, pertussis) independently of migrant population, and risk of polio outbreaks remains in some countries

Provision of health services and vaccines

- Many international regulations state the need for universal health coverage and equitable access, irrespective of legal status
- This includes immunisation, particularly against measles and polio
- Intervention that requires follow-up – need for cooperation among the countries of origin, of transit and of destination

Recommendation for vaccination

- Priority – MMR and polio
- In the country of destination – migrants to be incorporated into routine programmes
- Authorities to provide documentation of the vaccination given to avoid unnecessary revaccination
- The refugee crisis should incite countries to review any immunity gaps and ensure services, strong communication and social mobilisation

Considerations for viral hepatitis, incl. vaccination

- WHO does not recommend obligatory screening of refugee and migrant populations for diseases, because there is no clear evidence of benefits; furthermore, it can cause anxiety in individual refugees and the wider community
- WHO strongly recommends, however, that health checks be offered, respecting the human rights and dignity, to ensure access to health care for all refugees and migrants requiring health protection
- Protection of health care workers – HBV vaccination (and measles)
- Mass migration impact on the prevalence – vaccination strategies?

Thank you!

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