



CARE

Common Approach for REfugees
and other migrants' health

This presentation is part of the project "717317/CARE" which has received funding from the European Union's Health Programme (2014-2020)

TRAINING MODULE/ COURSE SYLLABUS

Course title: Health promotion and health care of migrants

Lecturer: Public health specialist, family medicine specialist, graduated nurse, health educator

Prerequisites:

- no specific prerequisites (for non-medical personnel working with migrants)
- degree in general medicine, nursing, health sciences

Content (Syllabus outline):

World Health Organization definition of health and concept of health promotion.

Human rights and the right of migrants to health.

Stages of the migration process and their influence on migrants' health:

- pre-departure (conditions and events in home country, health system, epidemiological characteristics, cultural characteristics,...);
- travel (travel conditions, duration of journey, traumatic events);
- stay in the host community (legislation, health system and community services and their accessibility, language, cultural values, duration of stay, separation from family,...);
- return (level of home community services, remaining community ties, duration of absence, behavioral profile acquired in host countries etc.).

Key determinants of health in migrants:

- access to minimum essential food, which is nutritionally adequate and safe;
- access to drinking water;
- access to basic shelter;
- access to healthy occupational and environmental conditions;
- education and access to information concerning health;
- access to health care.

Legislation and organization of social and health care of migrants in host country relating to key determinants of health:

- accommodation, social support and assistance in integration;
- health care of migrants with an emphasis on vulnerable groups (minors, women, elderly,

persons with chronic illness;

- labour legislation and occupational health;
- involvement in childcare and education system.

Health care of migrants (differences in accessing health care services compared with general population) and key barriers for access to health care services in migrants:

- legal status of migrants and legislative barriers;
- lack of awareness of their rights and health care system in host country;
- language barrier;
- cultural differences.

Key elements in ensuring health care for migrants:

- availability
- accessibility
- acceptability
- quality

Lifestyle of migrants, its influence to migrants' health and opportunities for the promotion of a healthy lifestyle in migrants:

- specifics in health and most common health problems of migrants according to their geographic, cultural and religious bases and travel conditions;
- cultural differences and their influence to the migrants' lifestyle;
- nutrition and physical activity;
- risk behaviors (e.g. smoking, alcohol consumption, illegal drugs, sexual behavior).

Basic literature

World Health Organization, United Nations - Office of the High Commissioner for Human Rights, International Organization for Migration. International migration, health and human rights. Geneva: International Organization for Migration, 2013.

http://www.ohchr.org/Documents/Issues/Migration/WHO_IOM_UNOHCHRPublication.pdf

World Health Organization. How health systems can address health inequities linked to migration and ethnicity. Copenhagen: WHO Regional Office for Europe, 2010.

http://www.euro.who.int/_data/assets/pdf_file/0005/127526/e94497.pdf

Bradby H, Humphris R, Newall D, Phillimore J. World Health Organization. Public health aspects of migrant health: a review of the evidence on health status for refugees and asylum seekers in the European Region. Copenhagen: WHO Regional Office for Europe, 2015.

http://www.epgencms.europarl.europa.eu/cmsdata/upload/3a3f00c0-9a75-4c84-94ad-06e4bd2ce412/WHO-HEN-Report-A5-2-Refugees_FINAL_EN.pdf

Palinkas LA1, Pickwell SM, Brandstein K, Clark TJ, Hill LL, Moser RJ, Osman A. The journey to wellness: stages of refugee health promotion and disease prevention. J Immigr Health 2003; 5(1): 19-28.

Centre for Addiction and Mental Health. Best practice guidelines for mental health promotion programs: Refugees. Toronto: Centre for Addiction and Mental Health, 2012.

<https://www.porticonetwork.ca/documents/81358/128451/Refugees/3974e176-69a8-4a5f-843b-a40d0a56299c>

Biggs BA. Promoting refugee health : a guide for doctors, nurses and other health care providers caring for people from refugee backgrounds, 3rd ed. Melbourne: Foundation House - Victorian Foundation for Survivors of Torture, 2012. <http://refugeehealthnetwork.org.au/wp->

[content/uploads/PRH-online-edition_July2012.pdf](#)

Kimunai E. Health Promotion and Education Among Refugee Women: A Literature Review. Journal of Social Change 2014; 6(1): 15 – 26.

Kimunai, E. Literature Review of Effective Health Promotion and Education Strategies Used to Promote Health in the Refugee Community. Fort Worth: University of North Texas Health Science Center, 2008.

<http://digitalcommons.hsc.unt.edu/cgi/viewcontent.cgi?article=1554&context=theses>

Weine S, Demin A. Promoting Health among Migrants in the U.S. and Russia through a Public Health Approach. US - Russia Social Expertise Exchange, 2014.

<http://www.usrussiasocialexpertise.org/sites/default/files/PH%20White%20Paper%20-%20EN%20-%20Final%20%28w%20Cover%29.pdf>

Trovato A, Reid A, Takarinda KC et al. Dangerous crossing: demographic and clinical features of rescued sea migrants seen in 2014 at an outpatient clinic at Augusta Harbor, Italy. Confl Health 2016; 10:14.

Diaz E, Kumar BN, Gimeno-Feliu LA et al. Multimorbidity among registered immigrants in Norway: the role of reason for migration and length of stay. Trop Med Int Health 2015; 20(12): 1805-14.

<http://www.euro.who.int/en/health-topics/health-determinants/migration-and-health/migrant-health-in-the-european-region/migration-and-health-key-issues>

<https://health.iom.int/publication>

Objectives and competences:

Course attendant

- recognizes basic concepts of health promotion;
- recognizes basic concepts of determinants of health in migrants and influence of migration process on migrants' health;
- recognizes legislation and organization of social care and health care of migrants;
- recognizes provision of health care for migrants and with barriers for access to health care services in migrants;
- recognizes specifics in lifestyle of migrants, their influence to migrants' health and opportunities for the promotion of a healthy lifestyle in migrants

Intended learning outcomes:

Knowledge and understanding:

- understanding the concept of health promotion;
- basic knowledge of key determinants of health in migrant population, understanding influence of migration process on migrants' health and awareness of specific health problems in migrants;
- basic knowledge of legislation and organization of social care and health care of migrants;
- awareness about possibilities of reducing key barriers for access to health care services by migrants;
- understanding of specifics in lifestyle of migrants, that can influence their health and empowerment for the promotion of a healthy lifestyle in migrants.



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TRAINING MODULE/ COURSE SYLLABUS

Course title:	Reducing the burden of <u>chronic noncommunicable diseases</u> and early detection of diseases in migrants
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Lecturer:	Medical doctors, graduated nurses, health educators, transcultural mediators
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Prerequisites:

- no specific prerequisites (for non-medical personnel working with migrants)
- degree in general medicine, nursing, health sciences, social sciences

Content (Syllabus outline):

Epidemiology of chronic non-communicable diseases in the developing countries and migrants, and similarities and differences within the local population

Prevalence of risk factors influencing the occurrence of chronic noncommunicable diseases in the developing countries and in migrants, and similarities and differences within the local population

Early detection of diseases through screening in different age groups, presentation of national programs of early detection and screening and the possibility of inclusion of migrants into screening programs in the host country:

- children and adolescents (monitoring of development);
- women of childbearing age (screening in pregnancy);
- adults (screening for colorectal, breast and cervical cancer, early detection of patients at risk for cardiovascular diseases).

Access to treatment of chronic non-communicable diseases and control of risk factors for chronic noncommunicable diseases; challenges, barriers and opportunities for improvement.

Special topics related to chronic non-communicable diseases:

Cardiovascular diseases - detection of risk factors and their control, and the possibilities of

treatment of a migrant patient with cardiovascular disease.

Obesity - cultural differences and their impact on the development of obesity; obesity prevention and healthy weight loss.

Diabetes mellitus – early detection of disease and possibilities of disease control in migrants diabetics, education of migrants for better self-management of diabetes mellitus.

Chronic pulmonary diseases and promotion of non-smoking, identifying possibility to include migrants in programs for smoking cessation

Cancer – prevention, early detection and screening and access to treatment in migrants. Breast, cervical, colorectal and pulmonary cancer. Association of hepatic cancer and hepatitis B and C infection and urinary bladder cancer with schistosoma infection.

Chronic renal disease and possibilities of management of migrant patient with chronic renal failure and hypertension.

Basic literature

Bhopal R. Chronic diseases in Europe's migrant and ethnic minorities: challenges, solutions and a vision. *Eur J Public Health* 2009; 19(2): 140-3.

Buja A, Gini R, Visca M et al. Prevalence of chronic diseases by immigrant status and disparities in chronic disease management in immigrants: a population-based cohort study, Valore Project. *BMC Public Health* 2013; 13:504.

Yun K, Hebrank K, Graber LK et al. High prevalence of chronic non-communicable conditions among adult refugees: implications for practice and policy. *J Community Health* 2012; 37(5): 1110-8.

van de Vijver S, Oti S, Moll van Charante E et al. Cardiovascular prevention model from Kenyan slums to migrants in the Netherlands. *Global Health* 2015; 11:11.

Testa R, Bonfigli AR, Genovese S et al. Focus on migrants with type 2 diabetes mellitus in European Countries. *Intern Emerg Med* 2016; 11(3): 319-26.

Montesi L, Caletti MT, Marchesini G. Diabetes in migrants and ethnic minorities in a changing World. *World J Diabetes* 2016; 7(3): 34-44.

Renzaho AM, Halliday JA, Mellor D et al. The Healthy Migrant Families Initiative: development of a culturally competent obesity prevention intervention for African migrants. *BMC Public Health* 2015; 15:272.

Modesti PA, Bianchi S, Borghi C et al. Cardiovascular health in migrants: current status and issues for prevention. A collaborative multidisciplinary task force report. *J Cardiovasc Med (Hagerstown)* 2014; 15(9): 683-92.

Shaw JM, Shepherd HL, Durcinoska I et al. It's all good on the surface: care coordination experiences of migrant cancer patients in Australia. *Support Care Cancer* 2016; 24(6): 2403-10.

Turrin A, Zorzi M, Giorgi Rossi P et al. Colorectal cancer screening of immigrants to Italy. Figures from the 2013 National Survey. *Prev Med* 2015; 81: 132-7.

WHO. Public health aspects of migration in Europe: Newsletter. Copenhagen: WHO

Regional Office for Europe, 2015.

http://www.euro.who.int/_data/assets/pdf_file/0008/277217/PHAME-Newsletter_5th-Issue.pdf

Objectives and competences:

Course attendant

- recognizes epidemiology of chronic non-communicable diseases and risk factors in the developing countries and migrants;
- recognizes the concept of early detection of diseases through screening and the national programs of early detection and screening in different age groups;
- recognizes the possibilities and challenges in the prevention, early detection and treatment of chronic non-communicable diseases in migrants;
- recognizes the chronic non-communicable diseases in migrants and possibilities for management and control to reduce the burden of diseases (cardiovascular diseases, obesity, diabetes mellitus, chronic pulmonary diseases, cancer, chronic renal disease)

Intended learning outcomes:

Knowledge and understanding:

- basic knowledge of differences and similarities in prevalence of chronic non-communicable diseases and risk factors among migrants and the local population;
- understanding of concept of early detection of diseases and screening, and basic knowledge of national programs of early detection and screening in different age groups;
- awareness of the possibilities and challenges in the prevention, early detection and treatment of chronic non-communicable diseases in migrants;
- basic knowledge of specifics of some chronic non-communicable diseases in migrants and awareness about the possibilities of management and control to reduce the burden of diseases (cardiovascular diseases, obesity, diabetes mellitus, chronic pulmonary diseases, cancer, chronic renal disease)



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TRAINING MODULE/ COURSE SYLLABUS

Course title: Communicable diseases – surveillance and response

Lecturer: Epidemiologist, public health specialist, infectologist, dermatologist

Prerequisites:

- no specific prerequisites (for non-medical personnel working with migrants)
- degree in general medicine, dental medicine, nursing, health sciences

Content (Syllabus outline):

Environmental and socio-economic determinants of communicable diseases in modern society:

- microbial adaptation and change
- susceptibility to infections – the impact of poverty
- change in lifestyle and behavior

Challenges of communicable diseases in migrant and local populations – similarities and disparities

Key determinants of communicable diseases in migrants:

- exhausting journeys;
- undernutrition or malnutrition;
- crowding and poor housing conditions – exposure to hot or cold environment;
- poor hygiene (lack to safe water and food);
- lack of access to medical care;
- no vaccination or partial vaccination;
- exploitation of migrants - exhausting work in unsuitable environments;
- coercion of migrants into prostitution or prostitution as the only possible source of income.

Communicable diseases: surveillance and response in migrants and refugees – for diverse contexts adjusted approaches required.

Special topics in communicable diseases.

Acute respiratory infections and tuberculosis:

- identification and prevention of seasonal outbreak of influenza in at-risk population (pregnant

women, children under the age of 5 years, people with chronic underlying conditions and the elderly);

- lower respiratory infections (pneumonia, acute bronchiolitis in children);
- respiratory infections and other infections prevented through vaccination (pertussis, measles);
- low risk of emerging infection diseases in migrants and refugees (e.g. MERS-CoV).

Food and water borne communicable diseases - hygiene measures to lower the burden-of-the disease.

Knowledge, attitude and behavior of migrants and refugees to sexually transmitted diseases, HIV, hepatitis B and C - differences in incidence depending on the country of origin.

Vector borne diseases - specific problems in migrants and refugees (e.g.: leishmaniasis).

Reintroduction of malaria in suitable environments – early recognition and response.

Hemorrhagic fevers - no risk for the local population. .

Skin infections –detection of common skin infections in a dark-colored skin and recognition of infections that are not common in temperate climate.

Global imprudent and uncontrolled use of antibiotics in humans, animals and food – the basis of development of highly resistant microbes.

Measures to reduce the spread highly resistant microbes (MRSA, VRE, ESBL, etc.) in community and health care environment.

Basic literature

Harish Nair, et al. Global burden of acute lower respiratory infections due to respiratory syncytial virus in young children: a systematic review and meta-analysis. *Lancet*. 2010; 375(9725): 1545–1555.

Jones G, Haeghebaert S, Merlin B, Antona D, Simon N, Elmouden M, Battist F, Janssens M, Wyndels K, Chaud P. Measles outbreak in a refugee settlement in Calais, France: January to February 2016. *Euro Surveill*. 2016;21(11).

Doganay M, Demiraslan H. Refugees of the Syrian Civil War: Impact on Reemerging Infections, Health Services, and Biosecurity in Turkey. *Health Secur*. 2016.

Hair Nair, et al. Global burden of respiratory infections due to seasonal influenza in young children: a systematic review and meta-analysis. *Lancet*. 2011;378(9807):1917-30.

Danis K, et al.. Autochthonous *Plasmodium vivax* malaria in Greece, 2011. *Euro Surveill*. 2011 Oct 20;16(42). pii: 19993

Saroufim M, et al. Ongoing epidemic of cutaneous leishmaniasis among Syrian refugees, Lebanon. *Emerg Infect Dis*. 2014 Oct;20(10):1712-5.

Coppola N, Alessio L, Gualdieri L, Pisaturo M, Sagnelli C, Caprio N, Maffei R, Starace M, Angelillo IF, Pasquale G, Sagnelli E. Hepatitis B virus, hepatitis C virus and human immunodeficiency virus infection in undocumented migrants and refugees in southern Italy, January 2012 to June 2013. *Euro Surveill*. 2015;20(35):30009.

ECDC. Migrant health series: HIV testing and counselling in migrant populations and ethnic

minorities in EU/EEA/EFTA Member States. Stockholm, Sweden, 2011:
<http://ecdc.europa.eu/en/healthtopics/migrant-health/Pages/migrant-health-series.aspx#sthash.MHsm5W1l.dpuf>

European Centre for Disease Prevention and Control. Guidance on tuberculosis control in vulnerable and hard-to-reach populations. Stockholm: ECDC; 2016.

World Health Organization. Global tuberculosis report. Geneva, Switzerland, 2015.
http://www.who.int/tb/publications/global_report/en/

Tuberculosis country profiles. <http://www.who.int/tb/country/data/profiles/en/>

<http://www.euro.who.int/en/health-topics/health-determinants/migration-and-health/migrant-health-in-the-european-region/migration-and-health-key-issues>

Objectives and competences:

Course attendant

- recognizes basic concepts of communicable diseases' determinants in migrants and refugees;
- recognizes the importance of environmental and socio economic determinants of health;
- recognizes health indicators and health information sources for surveillance of communicable diseases in migrants;
- recognizes key topics in communicable diseases challenges in migrants and refugees;
- recognizes public health approaches to control major communicable diseases issues in vulnerable population.

Intended learning outcomes:

Knowledge and understanding:

- basic knowledge of determinants in migrant population in reference to local population – understanding the similarities and disparities;
- capability to understand key health determinants of communicable diseases;
- recognizing key public health issues and health threats in migrants;
- empowerment for early recognition of communicable diseases and proper response in migrants and refugees;
- knowledge about preventive measures aiming to lower the burden of acute respiratory infections, tuberculosis, food and waterborne infections, sexually transmitted diseases, HIV/AIDS, hepatitis B in C, vaccine preventable diseases in migrant population.



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TRAINING MODULE/ COURSE SYLLABUS

Course title: Mental health of migrants and refugees

Lecturer: Psychiatrist, Psychologist, Social worker

Prerequisites:

- no specific prerequisites (for non-medical personnel working with migrants)
- degree in general medicine, nursing, health sciences

Content (Syllabus outline):

Migration, new cultural environment and stress

- change of cultural, religious, gender identity and role,
- stress of migration and loss,
- the risk of victimization and acquiring victim identity.

Determinates that influence mental health:

- the migrant's personal characteristics: gender, age, education level, resources, acculturation strategies, pre-existing mental health problems,
- social support: family, community, diaspora community, neighborhood, school, networks of relatives,
- characteristics of the receiving country's socio-economic framework, unemployment levels, education programmes and health services.

Common mental health problems and epidemiology

- depression and grief,
- post-traumatic stress disorder,
- anxiety,
- schizophrenia,
- addiction,
- psychosomatic disorders,
- syndromes linked to culture.

Treatment of mental disorders

- access to psychological/psychiatric treatment,
- language barriers in psychiatry,
- cultural peculiarities,
- cultural approach, lack of knowledge and cultural understanding of mental health in migrants.

Basic literature

Carta, M.G., Bernal, M., Hardoy, M.C., & Haro-Abad, J.M. Migration and mental health in Europe (the state of the mental health in Europe working group: appendix 1), Clin Pract Epidemiol Ment Health 2005;1:13. Available from:

<http://www.ncbi.nlm.nih.gov/pmc/articles/PMC1236945/>

Bhugra D, Gupta S, Bhui K, Craig T, Dogra N. WPA guidance on mental health and mental health care in migrants. Wold Psichiatr 2011;10 (February):2–10. Available from:

<http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3048516>

Jurado D, Alarcón RD, Martínez-Ortega JM, Mendieta-Marichal Y, Gutiérrez-Rojas L, Gurpegui M³. Factors associated with psychological distress or common mental disorders in migrant populations across the world. Rev Psiquiatr Salud Ment 2016 Jun 10.

Available from: <http://www.ncbi.nlm.nih.gov/pubmed/27291831>

Equihealth: Nikolaos Gkionakis, IOM Mental health care of people on the move, training presentation

Training packages for health professionals to improve access and quality of health services for migrants and ethnic minorities: <http://www.mem-tp.org/mod/folder/view.php?id=1029>

Mental Health and Psychosocial Support for Refugees, Asylum Seekers and Migrants on the Move in Europe, a multi-agency (UNHCR, IOM and MHPSS) guidance note, December 2015.

<https://mhps.net/?get=250/Immigrant-and-Refugee-Mental-Health-Best-Practices-in-Meeting-the-Needs-of-Immigrants-and-Refugees-Snapshot.pdf>

Laurence J. Kirmayer, MD, Lavanya Narasiah, MD MSc, Marie Munoz, MD, Common mental health problems in immigrants and refugees: general approach in primary care CMAJ. 2011 Sep 6; 183(12): E959–E967. Available from:

<http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3168672/>

Objectives and competences:

Course attendant

- recognizes the general patterns of mental health problems in migrants, pre-migration and post-migration, change of identity, loss and stress of migration;
- understands the determinants and factors of migrant and environment that influence mental health;
- knows common mental health problems and the epidemiology in migrants and refugees;
- recognizes the issues in treatment of mental health problems.

Intended learning outcomes:**Knowledge and understanding:**

- basic knowledge of mental health determinants in migrant population;
- understanding of the pre and post-migration risks that have an influence mental health;
- empowerment for recognition of mental health problems and proper response in migrants and refugees;
- knowledge about issues in treatment of mental health problems.



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TRAINING MODULE/ COURSE SYLLABUS

Course title: Reproductive health in migrants and refugees

Lecturer: Gynecologist, midwife, nurse

Prerequisites:

- no specific prerequisites (for non-medical personnel working with migrants)
- degree in general medicine, nursing, health sciences

Content (Syllabus outline):

Reproductive and sexual health

The definition of reproductive and sexual health.

The organization and aspects of healthcare for female migrants and refugees in EU countries.

Cultural aspects, linguistic, socioeconomic factors and transcultural mediation in reproductive health

Key topics:

- family planning and contraception
- sexually transmitted infections
- HIV and AIDS,
- violence against women and
- female genital mutilation,
- culturally appropriate sexual education for young migrants.

Pregnancy and perinatal care

- access to health care for pregnant migrants and refugee,
- pregnancy issues in migrants: , abortion, complications, low birth weight,
- factors that influence the pregnancy and the health in perinatal period;

Prevention and health promotion

- reproductive health indicators,
- reducing reproductive health inequalities between migrants and local population,
- empowerment and support for migrant women to participate in health promotion and preventive programmes – screening for cervical cancer and breast cancer

Basic literature

World Health Organization. Developing sexual health programmes. A framework for action. WHO. 2010. Available from:

http://whqlibdoc.who.int/hq/2010/WHO_RHR_HRP_10.22_eng.pdf?ua=1

Health Policy. 2014 Feb;114(2-3):215-25. doi: 10.1016/j.healthpol.2013.10.007. Epub 2013 Nov 6. Sexual and reproductive health of migrants: does the EU care? Keygnaert I¹, Guieu A², Ooms G³, Vettenburg N⁴, Temmerman M⁵, Roelens K⁶. Available from:

<http://www.ncbi.nlm.nih.gov/pubmed/24268324>

Arousell J¹, Carlbom A². Culture and religious beliefs in relation to reproductive health.

Best Pract Res Clin Obstet Gynaecol. 2016 Apr;32:77-87. doi:

10.1016/j.bpobgyn.2015.08.011. Epub 2015 Sep 10. Available from:

<http://www.ncbi.nlm.nih.gov/pubmed/26542927>

Female Genital Mutilation: Caring for patients and safeguarding children. Guidance from the British Medical Association. 2011. Available from:

http://www.bma.org.uk/images/FGMJuly06_tcm41146715.pdf#sthash.QIF4PqaH.dpuf

Lasch, V; Maschewsky- Schneider, U.; Sonntag, U. Equity in Access to Health Promotion, Treatment and Care for All European Women. The European Women's health Network (EWHNET). 2010. Available from: <http://www.uni-kassel.de/upress/online/frei/978-3-89958-740-1.volltext.frei.pdf>

<http://www.forcedmigration.org/research-resources/thematic/reproductive-health> FMO research guide: reproductive health (2004)

Training packages for health professionals to improve access and quality of health services for migrants and ethnic minorities, reproductive health: <http://www.mem-tp.org/mod/folder/view.php?id=1029>

Vissandjée B, Denetto S, Migliardi P, Proctor J. Female Genital Cutting (FGC) and the ethics of care: community engagement and cultural sensitivity at the interface of migration experiences. BMC Int Health Hum Rights [Internet]. 2014 Jan;14:13. Available from:

<http://www.pubmedcentral.nih.gov/articlerender.fcgi?artid=4012131&tool=pmcentrez&rendertype=abstract>

Objectives and competences:**Course attendant**

- recognizes basic concepts and definition of reproductive health in migrants and refugees;
- recognizes the importance of cultural and religious aspects of reproductive health;
- recognizes health indicators and perinatal factors in pregnancy in migrants;
- recognizes key topics in reproductive health challenges in migrants and refugees;
- recognizes approaches to improvement of inequality in health in vulnerable population.

Intended learning outcomes:**Knowledge and understanding:**

- comprehends the definition of reproductive and sexual health;
- understanding of the cultural aspects and differences in reproductive health;
- capability to understand key health determinants and problems of reproductive health in migrants;
- knowledge and understanding of factors for healthy pregnancy and perinatal care in migrants and refugees;
- knowledge of approaches to health promotion, prevention and education for reducing health inequalities in migrants



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TRAINING MODULE/ COURSE SYLLABUS

Course title: Cultural construction of health problems

Lecturer: Medical anthropologist, cultural anthropologist

Prerequisites:
- no specific prerequisites

Content (Syllabus outline):

Health and Disease

- WHO definition of health
- disease/illness/sickness
- differences in experiences (diagnosed without experienced, experienced without diagnose; somatization)

Culturally conditioned understanding of illness/disease

- culture's affect on beliefs, values, practices and perception
- power relations

Biomedicine

Holistic medicine

Culture, health and disease

- internal structure of the body
- body (individual body-self; social body; body politics; body/mind dualism)
- body's boundaries

Specific cultural differences concerning perception and practices about the body

- touch
- pain

Basic literature

Kleinman A., Peter Benson P., 2006, "Anthropology in the Clinic: The Problem of Cultural Competency and How to Fix It", *PLoS Med*, October, 3 (10): e294.

Scheper-Hughes N., Lock M. M., 1987, "The Mindful Body: A Prolegomenon to Future Work in

Medical Anthropology”, *Medical Anthropology Quarterly*, March 1987, 1 (1): 6-41.

Kleinman A., Eisenberg L., Good B., 1978, “Culture, Illness, and Care: Clinical Lessons from Anthropologic and Cross-Cultural Research”, *Ann Intern Med*, 88 (2): 251-258

Young A., 1982, “The Anthropologies of Illness and Sickness”, *Annual Review of Anthropology*, 11: 257-285.

Curtis, S. and Taket, A., 1996, *Health and Societies: Changing Perspectives*, Edward Arnold, London, U.K.

Field, D. 1976, ‘The Social Definition of Illness, ‘ in Tuckett, D. (ed.) *An Introduction to Medical Sociology*, Tavistock Publications, London: UK.

Joralemon, D., 2010. *Exploring Medical Anthropology*, Third Edition, Prentice Hall, upper Saddle River, N.J.

Peters-Golden, H., 2009, *Culture Sketches: Case Studies in Anthrology*, 5th Edition, McGraw-Hill Higher Education, New York, N.Y.

Herman, Cecil. 2002. *Culture, health and illness*. London: Arnold

Encyclopedia of medical anthropology : health and illness in the world's cultures. 2004. New York: Springer, cop

Lupton, Deborah. 2012. *Medicine as culture : illness, disease and the body*. Los Angeles: SAGE

Narrative and the cultural construction of illness and healing. 2000. Berkeley; Los Angeles; London: University of California Press

Singer, Merrill and Hans Baer. 2012. *Introducing medical anthropology: a discipline in action*. Lanham, Md.: AltaMira Press, cop.

Multiple medical realities: patients and healers in biomedical, alternative, and traditional medicine. 2006. New York; London: Berghahn Books

Objectives and competences:

Course attendant

- knows how to ask correct and useful questions, concerning health status of a migrant
- understands cultural differences in perception
- can explain the procedure of treatment, taking into account that migrant/patient certain rules and requirements are not necessarily self-evident
- understands different logical linking and needs of members of other cultures and can correctly identify local medicinal logic and explain it to the migrant/patient
- properly responds to complaints about well-being; recognizes the needs and demands of a migrant
- understands and can explain that different is still ok

Intended learning outcomes:

Knowledge and understanding:

- differences in medicines
- differences in understanding pain and disease
- differences in describing pain or disease

- differences in understanding the origin and reason for pain or disease
- differences in logical linking of different symptoms and demands for treatment
- correct approach and explanation of treatment



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TRAINING MODULE/ COURSE SYLLABUS

Course title: Confronting stereotypes – recognition and response

Lecturer: Sociologist, cultural sociologist, cultural scientist, anthropologist, psychologist, social psychologist

Prerequisites:

- no specific prerequisites

Content (Syllabus outline):

Stereotypes are a part of every culture, just as it is xenophobia:

- definitions of prejudice, stereotypes and xenophobia
- inception (origin) and influencing factors of stereotypes
- dangers and failures of *incomplete images of others* (stereotypes)
- how to recognize a stereotype in ourselves and in others

Individual against an entirety (unity):

- multiple identities in a person

How to recognize stereotypes

National stereotypes

- functions of national stereotypes (why and what)
- national stereotypes from the past to this moment

Securitization discourse

Self-fulfilling prophecy

- what is it, whose is it, how was it developed
- role of self-fulfilling prophecy
- prophet's influence

Exceptions that do not prove the rule

- danger of positive stereotyping

Fight against stereotypes

- introspection (self-reflection)
- flexibility
- curiosity
- open approach
- knowledge

Basic literature

Handbook of prejudice, stereotyping, and discrimination / edited by Todd D. Nelson. - 2nd ed. - New York ; London : Psychology Press, 2016

Schneider, David J., The psychology of stereotyping / David J. Schneider. - Pbk ed. - New York ; London : Guilford, cop. 2005

Stereotyping and prejudice / edited by Charles Stangor and Christian S. Crandall. - 1st ed. - New York ; London : Psychology Press, 2013

Whitley, Bernard E. The psychology of prejudice and discrimination / Bernard E. Whitley Jr., Mary E. Kite. - 2nd ed., international ed. - Belmont : Wadsworth Cengage Learning, cop. 2010

Steele, Claude M. Whistling Vivaldi : how stereotypes affect us and what we can do / Claude M. Steele. - 1st ed. - New York ; London : W. W. Norton & Company, 2011

Images of the other in ethnic caricatures of Central and Eastern Europe / edited by Dagnosław Demski and Kamila Baraniecka-Olszewska. - Warsaw : Institute of archaeology and ethnology; Polish academy of sciences, 2010

Imagining 'the Turk' / edited by Božidar Jezernik. - Newcastle upon Tyne : Cambridge Scholars, 2010

The Social psychology of stereotyping and group life / edited by Russell Spears ... [et al.]. - 1st publ. - Oxford ; Cambridge, Massachusetts : Blackwell, 1997

Cognitive processes in stereotyping and intergroup behavior / edited by David L. Hamilton. - London ; New York : Psychology Press, 2015

EDN, Whitworth Richard, Stover Lois T., Holt Rochelle Lynn, Miller John, Rekrut Martha D., Milner Elizabeth Hearn, Drazdowski Thomas A., Murphree Bruce, and Hiller Janet. "Booksearch: Breaking down Cultural Stereotypes." The English Journal 78, no. 5 (1989): 88-90.

Anthony M. Castaldo, Stephen E. Silver, Forrest Curo, and B. Bower. "Uses of Stereotypes." Science News 150, no. 11 (1996): 163.

Objectives and competences:

Course attendant

- can identify different types of stereotypes
- can identify his or her own stereotypes against others
- knows ways how to fight against stereotypes

- can recognize dangers of stereotypical and xenophobic thinking
- is aware of actual situation of migration and asylum seeking
- can doubt or maybe even change a negative thinking rooting in wrong in misleading information
- can approach a migrant as an individual and not as a part of a group
- can recognize characteristics of an individual that are overlooked in a stereotyped image
- can lead with example
- can control his or hers frustrations (why, when, how, over whom; whether they are misdirected, etc.)

Intended learning outcomes:

Knowledge and understanding:

- definitions and meanings of stereotypes and xenophobia
- confrontations of stereotypes – with themselves and others
- dangers of stereotyping
- real migration situation (including wanted and unwanted economic migrants, refugees, etc.)
- greater emotional competence, empathy
- more open approach to those that are different, to foreigners



CARE

Common Approach for REfugees
and other migrants' health

This presentation is part of the project "717317/CARE" which has received funding from the European Union's Health Programme (2014-2020)

TRAINING MODULE/ COURSE SYLLABUS

Course title: Intercultural competences

Lecturer: Cultural scientist, sociologist, communicologist, psychologist, educator

Prerequisites:

- no specific prerequisites (for non-medical personnel working with migrants)

Content (Syllabus outline):

WHAT IS?

Cultural competences:

- definition of culture
- cultural shock

Categories of values and people behaviors

- personal
- cultural
- universal

Cultural differences

Intercultural competences

- what are intercultural competences?
- who is intercultural competent person? (does not evaluate others through the 'glasses' of his/her own culture)

Why are intercultural competences needed?

HOW TO?

Intercultural relations

- intercultural encounter
- intercultural dialogue
- intercultural communication

Barriers to effective intercultural communication

(Self)Reflection

Assertive behavior and communication

Communicating in different languages

- current methods and their risks

Nonverbal communication

- touch
- facial expressions
- eye contact
- body language
- expressions of respect

Intercultural mediation

Benefits of intercultural mediation

How to be culturally aware?

Temeljni literatura in viri / Basic literature

UNESCO: Intercultural competences. Conceptual and operational framework.

<http://unesdoc.unesco.org/images/0021/002197/219768e.pdf>

Berry, John W. 2002. *Cross-cultural psychology: research and applications*. Cambridge: Cambridge University Press

The challenges of globalization: rethinking nature, culture, and freedom. 2007. Malden; Oxford; Carlton: Blackwell publishing, cop.

Shuang Liu, Zala Volčič & Cindy Gallois. 2015. *Introducing intercultural communication : global cultures and contexts*. Los Angeles: SAGE

Competences for democratic culture : living together as equals in culturally diverse democratic societies. - Strasbourg : Council of Europe, cop. 2016

Condon, J., and Yousef, F., 1975. *An Introduction to Intercultural Communication*. Indianapolis, IN: Bobbs-Merrill.

Deardorff, D.K. (editor). 2009. *The Sage handbook of intercultural competence*. Thousand Oaks, CA: Sage

Hannerz. U. 1996. *Transnational connections: Culture, people, places*. London: Routledge

Are you intercultural: <http://areyouintercultural.eu>

Objectives and competences:

Course attendant

- can recognize cultural diversity
- can maneuver in cultural differences
- gains a better emotional competence (recognition of emotions of themselves and other and acting accordingly)
- recognizes different ways of communicating and responding accordingly
- knows the specifics of their own culture and way of communicating and is capable of using those specifics in favor of better communication with a foreigner

Intended learning outcomes:**Knowledge and understanding:**

- increased emotional competence (understanding and recognition of emotions)
- increased intercultural sensitivity
- increased ability of better social interaction (recognition of rules of intercultural interaction)
- successful management of complex situation
- greater openness and flexibility
- increased capacity of meta-communication



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TRAINING MODULE/ COURSE SYLLABUS

Course title: Violence against migrants and refugees

Lecturer: Medical doctor, nurse, psychologist, social worker, sociologist, anthropologist, law enforcement

Prerequisites:

- no specific prerequisites (for non-medical personnel working with migrants)
- degree in general medicine, nursing, health sciences, psychology, social sciences, anthropology

Content (Syllabus outline):

The basics of violence: definition and typology of violence according to *World report on violence and health*.

Modes of violence: physical violence, sexual violence, psychological attack and deprivation.

Sub-types of violence

Violence victim-offender relationship:

- self-directed violence and suicide;
- social/personal violence between individuals;
- collective violence, committed by groups of individuals in economic, social and political context.

Interpersonal violence

Youth violence – bullying

Violence against women

- honour killings

Violence towards and among migrants:

Community violence toward migrants and refugee

- assault by acquaintance;
- assault by unfamiliar person

The impact of violence on human health: physical injury, functional impairment, mental health problems, negative health behaviour, chronic conditions and reproductive health problems.

Public health approach to violence prevention

Human rights approach to violence prevention

Comprehensive society response to violence against migrants and refugees:

- inter-sectorial cooperation with programmatic, policy and legislative measures to prevent violence.

Useful links

Basic literature

Etienne G. Krug, Linda L. Dahlberg, James A. Mercy, Anthony B. Zwi and Rafael Lozano. World report on violence. World Health Organization, Geneva, Switzerland, 2002.

World Health Organization, Department of Reproductive Health and Research, UNFPA and UNHCR. Clinical management of rape survivors: developing protocols for use with refugees and internally displaced persons. Geneva: World Health Organization; 2004.

WHO. Global status report on violence and health. World Health Organization, Geneva, 2014.

World Health Organization. Preventing and addressing intimate partner violence against migrant and ethnic minority women: the role of the health sector. The Regional Office for Europe of the World Health Organization, Geneva, Switzerland, 2014.

Guruge S, Humphreys J. Barriers affecting access to and use of formal social supports among abused immigrant women. CJNR 2009; 41(3):66-84.

Tappis H, Freeman J, Glass N, Doocy S. Effectiveness of Interventions, Programs and Strategies for Gender-based Violence Prevention in Refugee Populations: An Integrative Review. PLoS Curr 2016;19:8.

Asgary R, Emery E, Wong M. Systematic review of prevention and management strategies for the consequences of gender-based violence in refugee settings. Int Health 2013 Jun;5(2):85-91.

Drury J, Williams R. Children and young people who are refugees, internally displaced

persons or survivors or perpetrators of war, mass violence and terrorism. *Curr Opin Psychiatry* 2012;25(4):277-84.

Steel Z, Chey T, Silove D, Marnane C, Bryant RA, van Ommeren M. Association of torture and other potentially traumatic events with mental health outcomes among populations exposed to mass conflict and displacement: a systematic review and meta-analysis. *JAMA* 2009;302(5):537-49.

Jensen TK, Skårdalsmo EM, Fjermestad KW. Development of mental health problems - a follow-up study of unaccompanied refugee minors. *Child Adolesc Psychiatry Ment Health* 2014;17;8:29.

Jensen TK, Fjermestad KW, Granly L, Wilhelmsen NH. Stressful life experiences and mental health problems among unaccompanied asylum-seeking children. *Clin Child Psychol Psychiatry* 2015;20(1):106-16.

Objectives and competences:

Course attendant

- recognize the definition and classification of violent acts;
- recognize different forms of violence;
- recognize gender and age-based violence;
- trained to better understand the vulnerability of migrant and refugee;
- trained to identify the signs of abuse;
- trained to detect violence, exploitation and sexual abuse of underage refugees;
- recognize the consequences of violence on physical and mental health;
- trained to search for the solutions to overcome the cultural and language barrier with taking into consideration diverse health concepts;
- recognize the importance of coordination between the health system and other sectors to lessen the impact of violence in migrants and refugees.

Intended learning outcomes:

Knowledge and understanding:

Learns about the negative impact of violence, exploitation and abuse of migrants and refugees on health.

Knows the legal obligations of health services with regard to violence against migrants and refugees.

Understands the intimate partner and other forms of violence vulnerability against migrant and refugee women.

Understands the special vulnerability of unaccompanied minors.

Understand the key position of health care workers in recognition of abuse.

Understand the importance of trust build between abused migrant and health care provider.

Understands the negative impact of language and cultural barriers for migrants and refugees who seek medical and social support.

Learns about negative impact of discrimination in an encounter with a health care professionals as a barrier to tackle the violence in migrants and refugees.



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TRAINING MODULE/ COURSE SYLLABUS

Course title: Migration clarity – streams of people: who, when, where, why

Lecturer: Legal officer, sociologist (of migrations), anthropologist (of migrations), sociologist of contemporary societies, political scientist

Prerequisites:

- no specific prerequisites

Content (Syllabus outline):

Migrations:

- definitions, explanations: who, where, how, why

Time-Space Mobility

Link to interactive maps.

Inequalities

Modern migrations

Migrants

- immigrant, emigrant
- an international migrant

Types of migration

Forced migration

- UNHCR

Reasons for migration

- *push* and *pull* factors

Misconceptions about migrants

Dangers and difficulties a migrant could experience

Integration process

Links to interactive maps

Important for this course:

- emphasis to contemporary understanding of migration; its frequency, especially with open borders in the EU
- generalization of migrants into any of the above categories is wrong and possibly harmful
- legal (official) status if not a psychological assessment, characteristic trait or a threat

Basic literature

International Organization for Migration (IOM): <https://www.iom.int>

United Nations Populations Fund (UNFPA): <http://www.unfpa.org/migration>

Migration Policy Institute: <http://www.migrationpolicy.org>

UN Refugee Agency (UNHCR): <http://www.unhcr.org>

People on the move : studies on internal migration / edited by Leszek A. Kosiński & R. Mansell Prothero. - London : Methuen & Co., cop. 1974

Migration theory : talking across disciplines / ed. by Caroline B. Brettell, James F. Hollifield. - New York ; London : Routledge, 2000

Justice and home affairs in the EU : liberty and security issues after enlargement / edited by Joanna Apap. - Cheltenham ; Northampton : E. Elgar, cop. 2004

Guild, Elspeth., The legal elements of European identity : EU citizenship and migration law / by Elspeth Guild. - The Hague : Kluwer Law International, cop. 2004.

Goldin, Ian. Exceptional people : how migration shaped our world and will define our future / Ian Goldin, Geoffrey Cameron, and Meera Balarajan. - 4th printing, 1st paperback printing. - Princeton ; Oxford : Princeton University Press, 2012

World migration 2003 : managing migration challenges and responses for people on the move / International Organization for Migration. - Geneva (Switzerland) : IOM, 2003

McLeman, Robert A., Climate and human migration : past experiences, future challenges / Robert A. McLeman. - New York : Cambridge University Press, 2014

Objectives and competences:

Course attendant

- understands and can identify different categories and concepts of migrants and migration
- understand legal requirements, rights and obligations of every migrant
- understands actual situation of migration to and out of EU
- can approach and consequently react appropriately in case of meeting a migrant

Intended learning outcomes:

Knowledge and understanding of:

- legal definitions of different legal statuses
- rights and obligations of migrants in their different categories
- rights and obligations of those that come in contact with migrants
- actual situation of migration on a wider scale and in EU (what are the countries of origin of migrants in EU, what are the reasons for migrating to EU)
- migrants are not to be understood as a threat but as individuals with different legal status
- dangers and risks which migrants might face with while coming to or living in EU