Migration as a Social Determinant of Health

According to IOM research, migration is not of itself detrimental to health but it is a social determinant of health. The circumstances in which migration takes place, together with individual factors such as gender, language, immigration status and culture, have a significant impact on health-related vulnerabilities and access to services. The challenge for the Kenyan Government and partners is to understand these social determinants in order to improve the welfare of migrants and communities as a whole. A multitude of sources indicate that a major challenge to the health of migrants is access to appropriate services. Geographical accessibility, availability, affordability and acceptability are major challenges to access, all of which must be addressed when reassessing Kenyan health policy. So, why is it imperative that migrants gain access to health services in Kenya? Addressing the health needs of migrants not only improves their well-being, but also safeguards the health of Kenyan host communities. In addition, acceptance and integration of migrants contributes towards social and economic development. Furthermore, health is a fundamental human right that is recognized in the new constitution.

Migration and Tuberculosis in Kenya

TB is a social disease and migration, as a social determinant of health, can increase TB-related morbidity and mortality among migrants and communities. There is growing evidence and understanding that social and economic inequalities exacerbate migrants’ vulnerability to TB, as do discriminatory policies in non-health sectors such as immigration, labour and social protection. Cramped urban settlements are prone to tuberculosis transmission, and highly mobile pastoralists need to be reached with services at those locations where they settle at particular times of the year. A number of social factors, such as immigration status, stigma and language barriers prevent migrants from accessing quality health care. In reducing health inequity in Kenya, a concerted effort is required to make health systems more migrant friendly. Moreover, as some health issues related to trans-border mobility cannot be solved by Kenya alone, international collaboration is required.

IOM encourages and stands ready to support Kenya and migrant communities in implementing key actions in monitoring migrant health, strengthening migration-sensitive health systems, developing conducive policy frameworks and strengthening multisectoral, multi-country partnerships.

Message of the Regional Director on the occasion of World Tuberculosis Day 2016

Today, 24 March 2016, the World Health Organization joins the rest of the international community to commemorate World Tuberculosis Day. The theme for this year is “Unite to End TB”. Every year, there is an estimated 9 million new tuberculosis (TB) cases worldwide and despite the huge investments in health services in countries, 3 million of these cases are still not diagnosed and treated, or are diagnosed but not registered by national TB control programmes. In the WHO African Region, TB continues to be a major public health concern. Sixteen (16) of the 30 TB high burden countries in the world are in Africa.

The Region also has the highest TB and TB/HIV co-infection rates in the world and drug resistant TB (MDR-TB) continues to pose a serious challenge, especially because of the prohibitive cost of treatment and lack of adequate laboratory capacity to detect it. There are also persisting pockets of high TB cases that require extra investment. Although it is evident that the previously increasing trend of TB cases has been halted and the Region is observing a declining trend, it is important to reach, treat and cure all patients, especially vulnerable people including children and women, people living with HIV, people with diabetes, refugees, miners and ex-miners, prisoners and drug users whose access to basic health care services may be limited. Homeless people and individuals living in densely populated communities are especially at increased risk of contracting TB.

Last year, countries in the African Region agreed to reduce TB deaths and TB occurrences by 75% and 50% respectively by 2025. To attain these new targets, countries will have to use innovative approaches including: engaging civil society and non-governmental organisations, rolling out new diagnostic techniques and adopting new tools for monitoring and evaluation among others. Countries and partners need to intensify efforts to reach, treat and cure everyone with TB and to pay special attention to underserved areas and vulnerable people. Patients and their families are also urged to adhere to TB treatments in order to improve cure rates, control the spread of infection, and minimize the development of drug resistance.

As we commemorate World TB Day, I call on Governments and other stakeholders to “Unite to End TB” by working closely together to prompt actions to address the scourge of this disease. This calls for accelerated global efforts. WHO will continue to support countries to strengthen health systems to make this a reality.

Thank you.