



## EDITORIALS

# WHO's global action plan to promote the health of refugees and migrants

Responses to migration must remain firmly rooted in social justice

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In May 2019, the 72nd World Health Assembly acknowledged the health of refugees and migrants as a global priority through the acceptance of the World Health Organization's global action plan to promote their health.<sup>1</sup> Since then, however, the discrepancy between policy rhetoric and global reality has continued to be painfully apparent, with high profile media coverage of deaths of migrant children, separation of children from parents, and detention in appalling conditions on the US border<sup>2</sup> and direct targeting of migrant detention centres<sup>3</sup> and indefinite detention in overcrowded conditions without drinking water or sanitation in Libya.<sup>4</sup>

The global action plan is intended to guide WHO, partner agencies, and governments in meeting the health related objectives identified in the 2018 global compacts on migration and refugees<sup>5 6</sup> and strengthen international cooperation to protect people on the move. The action plan acknowledges that to prevent inequities, public health considerations for refugees and migrants cannot be separated from those of their host populations, or from tackling the broader determinants of health. It therefore retains a health system strengthening and multisectoral approach at its core and builds on a declared commitment to strong collaboration between all UN agencies, led by WHO, the International Organisation for Migration, the UN Refugee Agency (UNHCR), the International Labour Organisation, and others, to bring the health of refugees and migrants to the fore of global policies.

### Fundamental duty

The current global political climate, antimigrant sentiments, and discrimination present real challenges to attaining the highest standard of health for refugees and migrants.<sup>7</sup> Civil society, academia, and health professionals have a fundamental duty to ensure the health of migrants during all stages of migration: from dealing with the health effects of the drivers of migration, through health challenges in transit, to the impact of

hostile national migration policies, such as deterrence, on health.<sup>8</sup>

The structural causes of migration and the effects of migration policy on individuals<sup>9</sup> must be tackled through a coordinated approach if the global action plan is to be effective. The next six months provide a unique opportunity to do this at a global level and to integrate migrants' health firmly in the universal health coverage agenda (a key opportunity is the UN General Assembly's high level meeting on universal health coverage in New York in September 2019<sup>10</sup>), the implementation of the two global compacts, and the broader Sustainable Development Agenda 2030.<sup>11</sup> Harnessing this opportunity, however, requires unequivocal leadership of governments and UN agencies, alongside a greater cooperation with civil society.

Civil society is a frontline responder to the health and social needs of refugees and migrants. Its efforts in upholding migrants' rights to water, food, health, search and rescue, and shelter across the globe show that fostering solidarity helps save the lives of refugees and migrants. Increasing criminalisation of civil society's efforts (humanitarians have been arrested in both the US and Europe for helping migrants,<sup>12 13</sup> and non-governmental organisations have been fined for saving migrants' lives<sup>14</sup>) means that it is more important than ever for the UN, civil society, and governments to work together to uphold migrants' right to health. Building a global multisector migration and health alliance among stakeholders and partners could be a way to realise inclusion of migrants in all relevant policies and especially as a key feature of the implementation of the global action plan. The UN meeting in September should be seen as an opportunity to progress with this alliance.

### Universal health coverage

In recent years, universal health coverage has become a central focus for WHO and governments. However, there is no explicit recognition that "universality" in health coverage includes

refugees and migrants, and no metrics exist to monitor inclusion. “Coverage” should therefore be distinguished from “care,” to ensure comprehensive and high quality healthcare for all; choosing coverage over care can lead to provision of minimum packages of services, rather than ensuring a health system that is equipped to respond to the health needs of all refugees and migrants.

The global action plan identifies health as a human right yet acknowledges that countries use different interpretations of entitlement to healthcare services, a concept of “universality with exceptions.” Both the implementation of the global action plan and the preparation for the UN General Assembly’s September meeting must explicitly include all refugees and migrants, regardless of legal status, in universal health coverage.

The global action plan is an important step in promoting the health of refugees and migrants. Yet its implementation will be effective only with stronger and more determined leadership, a focus on the structural drivers of migration and health effects of migration policies, a clear accountability framework for UN member states, effective engagement with civil society and academia, and a response to migration firmly rooted in social justice.

Competing interests: We have read and understood BMJ policy on declaration of interests and have no relevant interests to declare.

Provenance and peer review: Not commissioned; not externally peer reviewed.

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