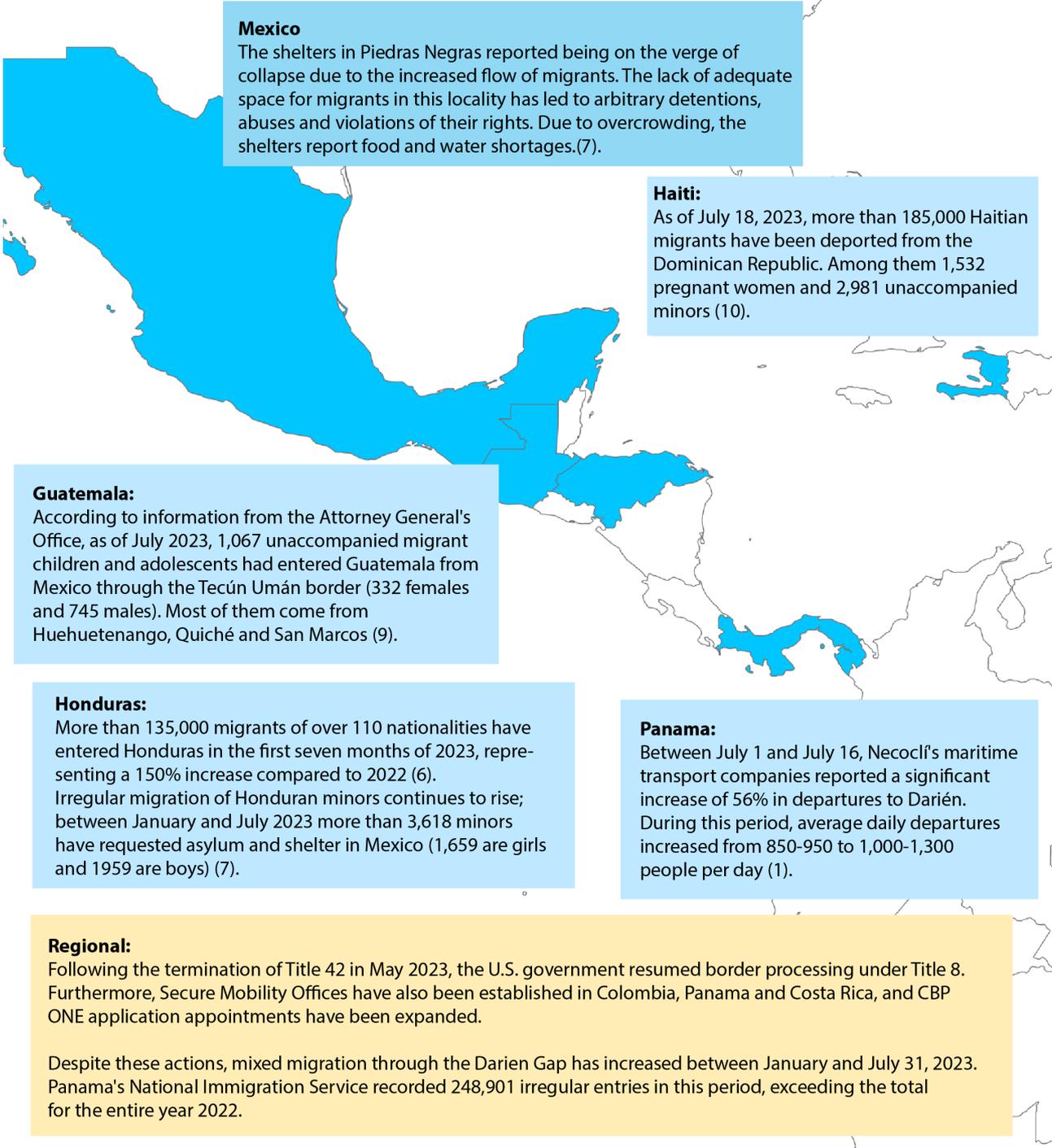


KEY UPDATES

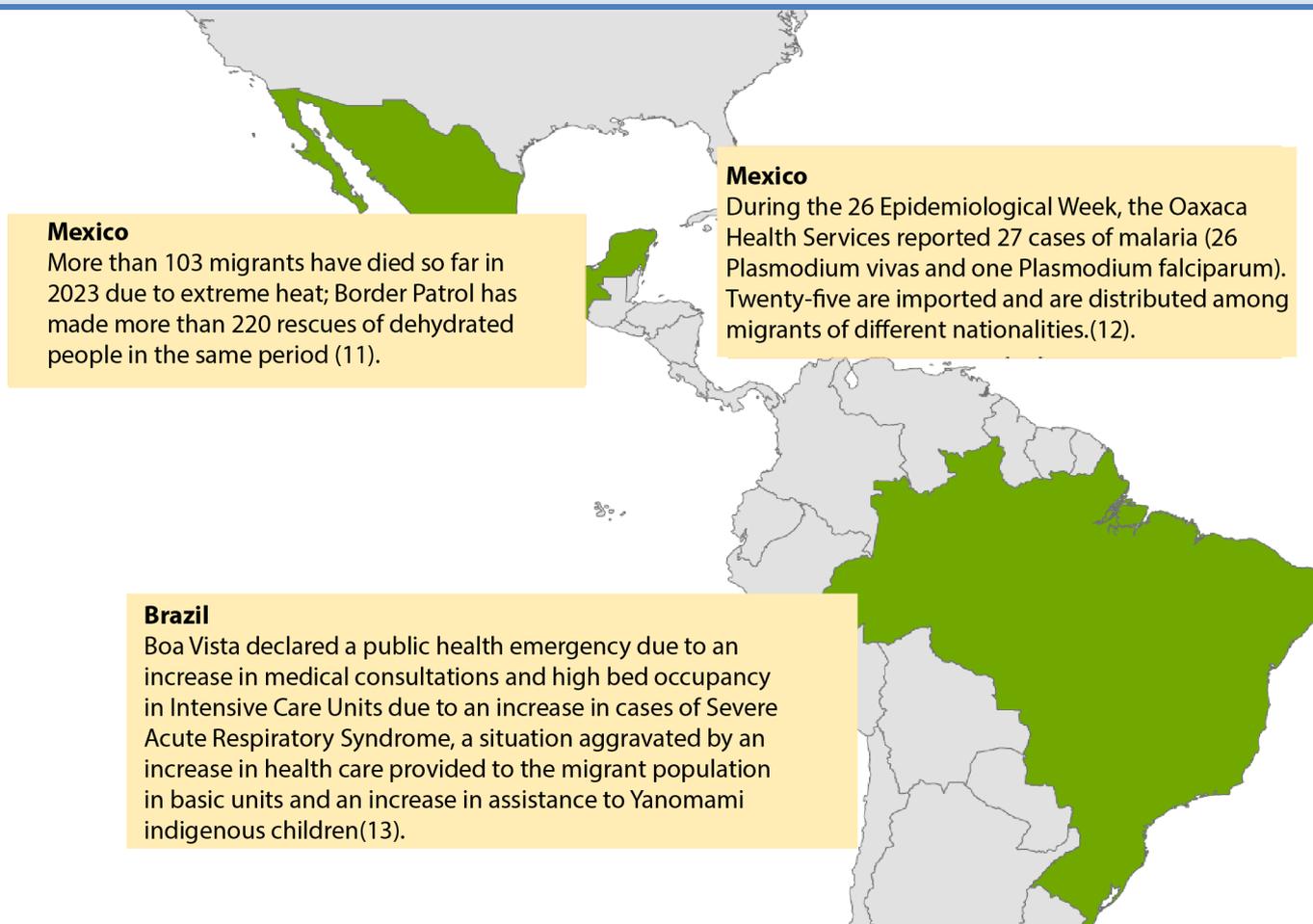


KEY UPDATES





HEALTH EMERGENCIES



HEALTH ISSUES

Maternal, sexual and reproductive health

Chile: between January and July 2023, 23,608 births have been attended in migrant women which represents 19.97 % of the total number of births attended in this country (14).

Colombia: according to the report of the National Institute of Health, between January and June 2023, 1,931 cases of extreme maternal morbidity and 22 cases of maternal mortality have been reported in women of Venezuelan nationality (15).

Child health

Colombia: according to the report of the National Institute of Health, between January and July 2023, 112 cases of acute malnutrition have been reported in children under five years of age, 105 from Venezuela, 4 from Brazil and one each from Bolivia, Ecuador and Peru; of the 112 cases, 48.3% present severe acute malnutrition (16).

Peru: From January to July 2023, the Ministry of Health has registered 5,483 medical consultations in children under five years of age of foreign nationality. Venezuelan children accounted for 77.2% of the consultations, followed by

7.39% of Colombian children and 4.69% of Ecuadorian children. The main diagnoses were acute pharyngitis with 14.4%, followed by acute rhinopharyngitis with 11.9% and iron deficiency anemia with 5.7% (17).

Access to health services:

Costa Rica: the Costa Rican Social Security Fund (CCSS in Spanish) together with the UN Refugee Agency (UNHCR) and other international and national counterparts have signed a new agreement to extend health care services to refugees and asylum seekers with special medical needs requiring treatment and prolonged follow-up. Building on a previous agreement signed in 2020 between UNHCR and CCSS, this new multilateral agreement will extend coverage to an additional 3,775 people, reaching a total of 9,775 beneficiaries. Funding comes from the European Union and the agreement will be in force from September 2023 to August 2024 (18).

Affiliation to health services:

Colombia: according to the results of the Fifth Round of the Pulse of Migration, 64.8% of those surveyed state that they are in good health. Likewise, regarding affiliation to the health system, the results show that 64% of Venezuelan migrant citizens are affiliated to the Colombian health system, while 34.7% are not affiliated. Of the percentage of affiliates, 77.9% are part of the subsidized regime and 22.1% are in the contributory regime. In terms of access to services, 69.9% have been able to access them (19).



NEEDS / GAPS IN MIGRANTS' HEALTHCARE

HEALTH NEEDS:

The main health needs of the migrant population are associated with the lack of information regarding the existence of health services in transit and host countries, lack of adequate medication in health services, among others.

Migrants in transit:

- Unrestricted access to health services for emergency care (external injuries), delivery and newborn care, comprehensive care to cases of gender-based violence and acute events of non-communicable diseases.
- Information on health services available at entry points in the borders and transit routes within countries.
- Sexual and reproductive health services to improve their well-being and safety, including the provision of gynecological examinations, laboratory tests and prenatal care.

Migrants in countries of destination:

- Monitoring and care of pregnant women during labor and puerperium, including newborns.
- Sexual health including care for sexually transmitted infections.
- Child health with access to vaccination (according to the country's calendar), growth control and other programs.
- Access to timely diagnosis and treatment of non-communicable diseases such as asthma and hypertension, among others.
- Enrollment in health insurance systems that are available in the country.

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