

## NEWSLETTER

SPRING 2018

### What is MyHealth?

Is a project that aims **to improve healthcare access for vulnerable migrants and refugees** by developing and implementing models based on the knowhow of a European multidisciplinary network with particular focus on **women and unaccompanied minors** who have recently arrived to Europe.



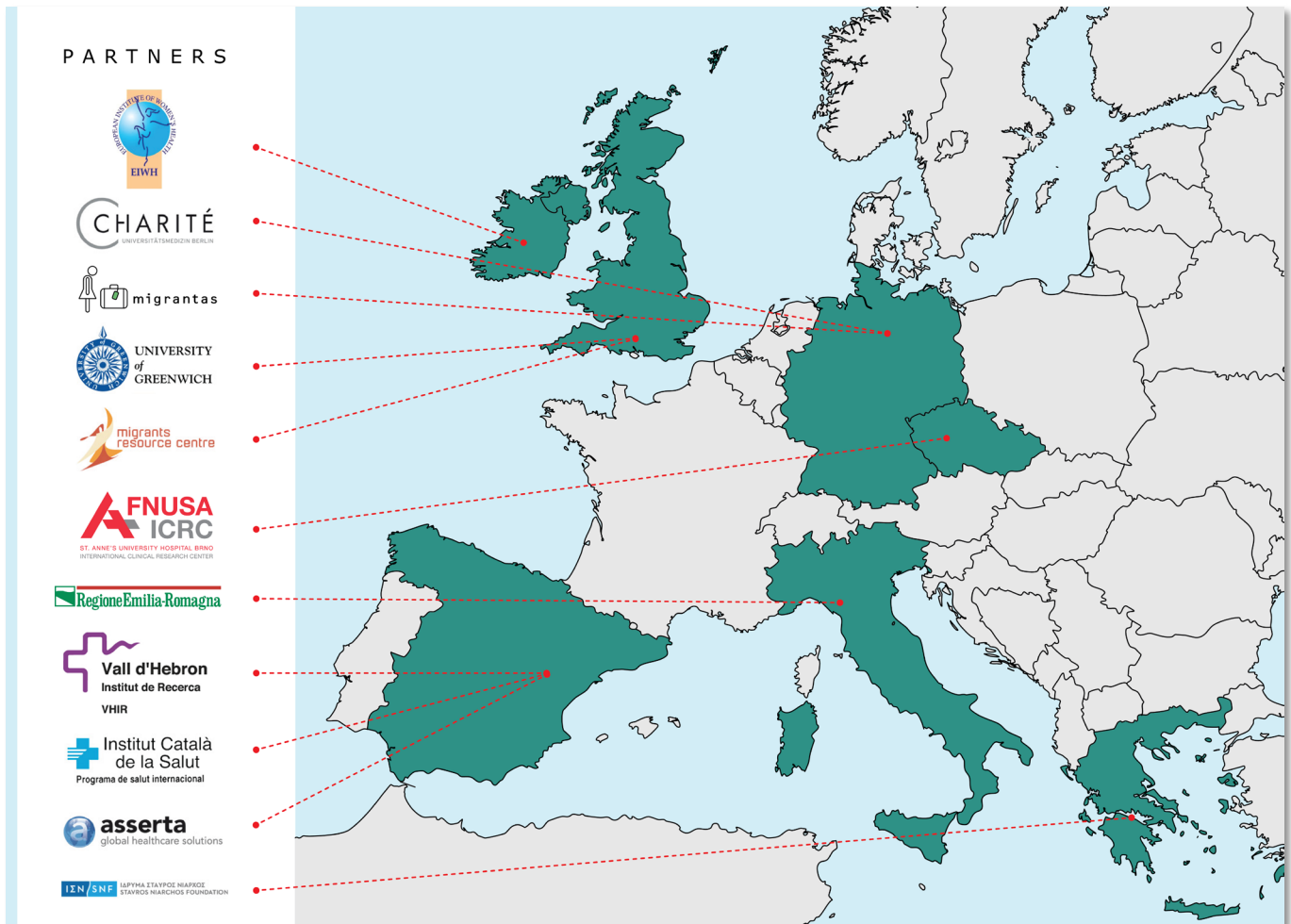
The project partners—which include universities, research institutes and charities from seven EU countries—will develop and implement models to **engage vulnerable migrants and refugees in their health through community empowerment and learning**. The project runs from April 2017 to March 2020.

**Women and unaccompanied minors**  
chronic disease | infectious disease | mental health

### Target groups

- Vulnerable migrants and refugees (VMR)
- Patients' and advocacy groups
- Health non-governmental organisations (NGOs)
- Social Platforms
- Governments and international health agencies
- Social researchers

# 3 YEARS | 11 PARTNERS | 7 COUNTRIES



## Why do we need the MyHealth Project?

Migrants face impaired health and poor access to health services due to linguistic barriers, cultural differences, social exclusion, undocumented situation, bureaucratic barriers and economic difficulties. Health care systems should be prepared to respond to their diverse needs.

## Main outcomes

- **Online interactive map**
- **Pilot survey on current health status and concerns**
- **Repository of best strategies for health promotion**
- **Evaluation of the pilot models**
- **Guide for integration of ICT solutions for vulnerable immigrants and refugees**

## KEY EVENTS



### Kick-Off Meeting

Project partners attended the MyHealth Project [Kick-Off Meeting](#) between 3<sup>th</sup> and 4<sup>th</sup> of May 2017 in Luxembourg in order to set up the main project priorities, strategies, guidelines among consortium members.

### Cluster Meeting

Members of the MyHealth team, led by Inés Oliveira, represented the MyHealth Project at the **Migration and Health, Path for Integration** [Cluster Meeting](#) hosted by CHAFAEA and DG SANTE on 21<sup>st</sup> of September 2017 in Brussels, Belgium.

### General Assemblies

The **First General Assembly** was carried out on the 20<sup>th</sup> of October 2017 in Barcelona, Spain in order to discuss the achieved results and forthcoming objectives and overall strategy in project implementation.

The **Second General Assembly** for the MyHealth Project was held on 20<sup>th</sup> April 2018 in Berlin, Germany where consortium members reviewed the results obtained over the past 12 month and upcoming tasks.

### Conferences

In October 2017, information on the MyHealth Project were disseminated at [the 10th European Congress on Tropical Medicine and International Health](#) in Antwerp, Belgium and at the [Congress of the Spanish Society of Tropical Medicine](#) in Bilbao, Spain. The presentations are available online.

Dr. med. Meryam Schouler-Ocak vom Pyschiatrische Universitätsklinik der Charité at St. Hedwig Krankenhaus (PUK der Charité im SHK) as well as Peggy Maguire and Kristin Semancik from the European Institute of Women's Health presented at the **European Institute of Women's Health 21<sup>st</sup> Anniversary Expert Conference** in Brussels, Belgium [Right from the Start: Resetting the Agenda in Women's Health in Europe](#) on the 4<sup>th</sup> and 5<sup>th</sup> of December 2017.

### Workshops and Trainings

Migrantas held two workshops on the 15<sup>th</sup> and 16<sup>th</sup> March 2018, with groups of **migrant women on the issue of the access to the health care system in Germany**. In total, 13 women attended. Migrantas will host other workshops in May and will use the results to design new pictograms.





On 19<sup>th</sup> of April 2018, a group of stakeholders of MyHealth gathered in Berlin for a day's **training** on ways to strengthen the monitoring and evaluation of the project by using a **Learning Alliance (LA) and Community Participation approach**.

A workshop for non-healthcare professionals on psychosocial and communicable diseases in asylum seekers and immigrants in vulnerable situations was held in Barcelona on the 26<sup>th</sup> of April 2018. MyHealth project results were disseminated through a **workshop on needs analysis**.



*For further information on key project events please visit the news and events sections in the [MyHealth website](http://www.healthonthemove.net).*

## PROJECT COORDINATION

Vall d’Hebron Research Institute in Barcelona is the MyHealth project coordinator. Various activities occurred in the first twelve months of the project to lay the foundation for MyHealth Project work.

### Consortium Agreement

The Consortium Agreement was signed by all the partners.

### Committee Formation

Three stakeholder committees were formed:

1. Scientific Steering Committee (SSC)
2. Ethics Committee (EthC)
3. Advisory Board (AB)

The Second SSC took place in October 2017. The main responsibility of this committee is to define overall strategies for project implementation, carry out the scientific researches and disseminate its results among stakeholders. The main task of this EthC is to ensure the independence for all ethical-related decisions during the project. The last meeting was held in Berlin 2018, during the **Second General Assembly**. The AB devises strategies to extend MyHealth beyond the involved stakeholders.

## PROJECT EVALUATION

The University of Greenwich leads the evaluation of the activities throughout the duration of the project with support of all partners. The Evaluation employs the Learning Alliance (LA) strategy. The LA approach is an innovative methodology that contributes to articulate the work of different work packages by strengthening the learning and network capacity of stakeholders regarding the participation of VMR in a research project.

### Evaluation Plan

The evaluation plan presents the aim, evaluation questions, targets, timing, methods and results of the evaluation of the project. The evaluation plan delineates the steps to be followed to assess the process and results (outputs and outcomes) of the MyHealth Project. It is a flexible tool compiled with inputs from all WP leaders, and it is updated on an ongoing basis.

# PROJECT COMMUNICATION AND EVALUATION

The European Institute of Women's Health coordinates Communication and Dissemination activities for the project with support and input from all project partners.

## Dissemination Plan

The Plan informs and stimulates broader debate with and amongst specific target groups to disseminate and promote the progress of the project, events, results, and findings. It outlines how to strengthen the cooperation and collaboration dialogue between researchers, healthcare professionals and policymakers and to ensure that project recommendations and findings are understood and can be translated into practice.

## Communication Materials

A Project communication plan, leaflet, project power point, public website, press releases, and social media accounts were created. The multi-language leaflets are available online on the [project website](#).

*Please follow the MyHealth Project online  
on our Website or on social media through  
Twitter @MyHealthEU.*

## RESOURCE MAPPING

The MyHealth Project is mapping existing initiatives on health for migrants and the main actors involved in migrants and refugees' health in order to come up with an interactive map (and database) with key referents sites from the countries involved in the project, although it will be open for inputs from other countries. We are happy to announce that the mapping content is available from 1<sup>st</sup> of April 2017 on the [MyHealth Project website](#).

The online tool includes the legal and organisational health care system mapping for Czech Republic, Germany, Greece, Italy, Ireland, Spain and the UK by outlining the rights, services and resources available to for migrants' healthcare in each country. We hope to be adding the information on Austria, Cyprus, Bulgaria, Malta, Sweden and France in the coming months. The summary report of the seven case countries and the state of European and international policy is also available on the [MyHealth Project website](#).

### Report about data collection methodology for interactive map

This report presents the activity around developing the interactive map of the main health issues, actors/stakeholders, reference sites dealing with VMR, legal/organisational aspects of health systems and available ICT tools. The report is available [online](#).

### Report on interactive map

This report includes information on the mapping exercise, the first step in social network analysis and the foundation for subsequent in-depth network analysis. The report presents the aim, targets, methods and preliminary results of the process. The analysis focuses on activities directly health as well as related to social determinants of health, particularly for women and unaccompanied minors. In order to maintain an up-to-date mapping platform with accurate e information, a special update strategy is incorporated. The report is available [online](#).

## Please help us map migrant health resources in Europe

MyHealth is mapping the resources available on migrant health in Europe on an ongoing basis. We kindly would ask you to complete our brief online surveys to add to our repository:

1. **Migrant Resources Mapping**: Information about key reference sites for migrants.
2. **Stakeholder Mapping**: Information on stakeholders interested in our activities, including MyHealth Project dissemination.
3. **App/Website/E-tool Mapping**: Information about existing e-tools, including apps or websites.
4. **Current Studies and Projects Mapping**: Information about current studies or projectactivities at community level.

# MIGRANT HEALTH NEEDS ASSESSMENT

The Project is assessing the needs and raising awareness of difficulties that migrants face in terms of access and utilisation of healthcare services, which are directly connected to the social determinants of health as well as to the barriers to the traditional health systems. MyHealth conducted a pilot survey to collect information on the current physical and mental health status of migrants and refugees using quantitative indications.

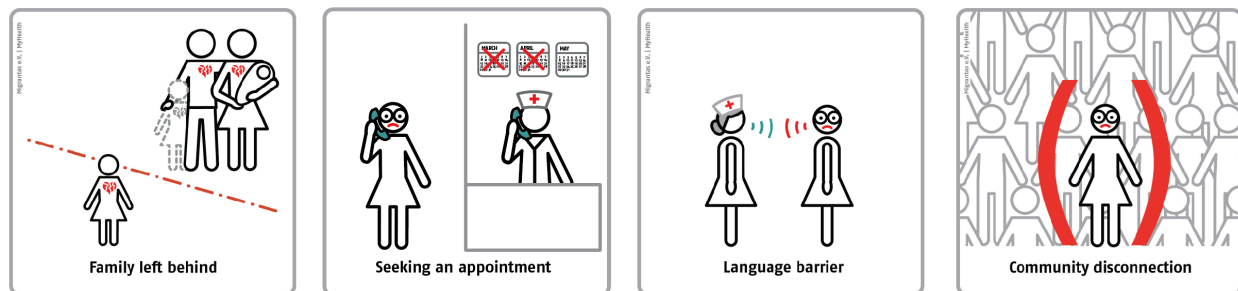
## Preliminary report on needs analysis

The current assessment aimed at providing key aspects of the needs of migrants and refugees in term of service. Focus groups, individual interviews and online questionnaires were completed. The preliminary report is a working document compiled with inputs from at least the three “clinical sites” in Barcelona, Berlin and Brno, and it will be updated by September 2018 with the results of different activities of the WP, especially from the online survey and additional focus groups and individual interviews. The report is available [online](#).

If you are interested in taking part in this initiative, please fill out the anonymous **survey(s) available online for [healthcare professionals](#) and for [migrants themselves \(VMR\)](#).**

## Workshops

Migrantas met with migrant women in their own collective spaces—organisations, community centres, cultural groups—and organised workshops in Berlin to reflect on health issues. Migrants from different national, cultural and social backgrounds as well as with different residency statuses exchanged their experiences and expressed themselves in simple drawings. After a careful analysis of all the drawings from different workshops, Migrantas culled key elements and common themes from them and translates these central motifs visually and artistically into pictograms—a visual language accessible to everyone.



One of Migrantas’ major goals is to make these experiences visible in the urban space. Through different formats—like posters, flyers, postcards or shopping bags—these pictograms will be used to disseminate the results of the MyHealth Project. With this communication campaign migrant women’s’ perspectives about health realities and necessities are taken out of the individual private sphere and made visible in the public space. Examples of Migrantas work are included in the figures above.



# COMMUNITY PARTICIPATION

Community participation strives to ensure that members of the community are meaningfully involved in shaping and delivering health care in a given society. The aim is for health systems to be designed and implemented by people and with people, rather than on people or to people. There is no one solution to implementing community participation into our work. A training, which was held in April 2018 in Berlin, explored the concept of community participation with the aim of assisting MyHealth Project Partners to understand, clarify and plan on how they want to deliver community participation effectively as part of the project.



## Material for community participation strategy

We developed a strategy that outlines key steps involved in effective community participation. The document proposes a community participation strategy that can be adapted by all the project partners for the current project, as well as other agencies and organisations in the European Union that are keen to ensure the engagement of communities in health services. We have also started delivering some activities and information sessions aimed at increasing community participation. The strategy is available [online](#).



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