



13 November 2018

**Draft WHO Global Action Plan
to Promote the Health of Refugees and Migrants (Draft 4)
WMA COMMENTS**

The [World Medical Association](#) is an international organization representing millions of physicians worldwide. Acting on behalf of patients and physicians, the WMA endeavors to achieve the highest possible standards of medical care, ethics, education and health-related human rights for all people. As such, the WMA plays a key role in promoting good practice, medical ethics and medical accountability internationally.

General comments

The World Medical Association (WMA) considers that health is a basic need, a human right and one of the essential drivers of economic and social development. All people are entitled without discrimination to appropriate medical care according to the international codes of human rights and medical ethics, including the [WMA Declaration of Lisbon on the Rights of the Patient](#).

The WMA expresses concern over the systemic difficulties which health professionals face when upholding guiding ethical principles in environments hostile to the provision of healthcare to migrants. Health professionals have a duty to provide appropriate healthcare, regardless of the civil or political status of the individual. The right to receive medical care should be based on need and health professionals must be allowed adequate time and sufficient resources to assess the physical and psychological condition of refugees and migrants. Late or denied health care is not only ethically wrong and contravenes a fundamental human right, it poses a serious public health threat as well.

We would like to recall [WMA recent policy on migration](#) and call for:

- Strong continued engagement of physicians in the defense of human rights and dignity of all people worldwide, as well as combatting suffering, pain and illness;
- The prioritization of the care of human beings above any other consideration or interest;
- Providing the necessary healthcare, through international cooperation, directed to countries that welcome and receive large number of migrants.
- Governments to reach political agreements to obtain the necessary health resources to deliver care in an adequate and coordinated manner to the migrant population.

Specific comments on the draft WHO Global Action Plan to Promote the Health of Refugees and Migrants¹

We welcome the draft WHO Global Action Plan to Promote the Health of Refugees and Migrants developed in collaboration with IOM and UNHCR amongst other international organisations. This inclusive partnership, which comprises the consultation of other relevant partners as well, constitutes a positive advancement to address the complexity of the issue, with health as an essential component of good migration governance. We also welcome the various references in the GAP to the required need to develop educational courses/tools for health professionals in relation with the health of migrants and refugees.

In line with WMA policies, we suggest the following additions to the current proposed draft:

1. The draft GAP should include, in the preamble of the strategic guidelines, **an explicit reference to the right to health to refugees and migrants, regardless of the legal, civil or political status** of the individual.
2. The draft GAP should unequivocally **condemn and prohibit the participation of health professionals in any punitive or judicial action involving refugees and migrants** (regardless of the civil or political status) or to administer any non-medically justified diagnostic measure or treatment (such as sedatives to facilitate easy deportation from the country or relocation).
3. Regarding the priority 4 “Strengthen health monitoring and health information systems”, we are worried that the current draft does not refer to the **ethical aspects of health data collection** and the related role of physicians. The [WMA Declaration of Taipei on ethical considerations regarding health databases and biobanks](#) lays down essential ethical principles in collecting and using health data, including the principles of confidentiality and the required informed consent of the individuals concerned. Paragraph 9 states: “Respecting the dignity, autonomy, privacy and confidentiality of individuals, physicians have specific obligations, both ethical and legal, as stewards protecting information provided by their patients. The rights to autonomy, privacy and confidentiality also entitle individuals to exercise control over the use of their personal data and biological material.” The draft GAP should include clear references to these ethical principles as safeguards to any possible misuses in health data collection.

Given the length of the document, we suggest including an executive summary indicating the main actions under each priority.

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¹ Draft 4