

**Promoting the health of refugees and migrants: global action plan, 2019-2023**

The First Global Model WHO World Health Assembly,

Having considered the Director-General's Report<sup>1</sup> on the Global Action Plan on promoting the health of refugees and migrants, which implores Member States, in accordance with their national contexts, priorities and legal frameworks, to promote the health of refugees and migrants and strengthen international cooperation regarding this issue in line with the New York Declaration for Refugees and Migrants in United Nations General Assembly resolution 71/6 (2016);

Having considered also the Director-General's Report<sup>2</sup> and the Rio Political Declaration on Social Determinants of Health (SDH)<sup>3</sup>, which both reaffirm the need to move beyond the health sector in addressing the social, economic and environmental dimensions impacting health care;

Having considered further the first World Report on the Health of Refugees and Migrants (2022), which reaffirms the urgent action needed for over one billion people on the move;

Noting that more people will become migrants, internally and externally displaced or forced to seek refuge in the upcoming years due to poverty, lack of security, lack of access to basic services, violence and war, environmental degradation and disasters;

Noting also that low- and middle-income countries host 74 per cent of the world's refugees and other people in need of international protection, and that 69 per cent of refugees and other people in need are being hosted in neighboring countries;

Keeping in mind the 2030 Agenda for Sustainable Development adopted in the General Assembly resolution 70/1 (2015), particularly Sustainable Development Goal (SDG) 3, which encourages stakeholders to promote good health and wellbeing for all with no one left behind, in

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<sup>1</sup> WHA 72.25 Rev.1

<sup>2</sup> EB 148/24 (2021)

<sup>3</sup> EB 130/15 (2011)

addition to SDG target 1.4, which ensures access to resources and services, as well as SDG target 10.7 and SDG 17 that emphasize safe, orderly and responsible migration and global partnerships for migration, respectively;

Guided by the principle of Universal Health Coverage (UHC) as laid out in the Constitution of the WHO in 1948 and reiterated in the SDG target 3.8, with health as a fundamental right and the inclusion of primary health care as laid out in the declaration of Astana (2018);

Emphasizing the unique health needs' challenges that refugees and migrants face, inter alia, difficulty accessing comprehensive, affordable, and quality health services, due to various elements, including financial, linguistic and cultural barriers, institutional discrimination, the challenges of maintaining a continuum of care, highlighting the importance of access to full immunization coverage as well as the challenges of the availability and quality of adequate, standardized and comparable data on the health of refugees and migrants;

Stressing that the WHO, with topics mentioned above, is in a situation where it is more important than ever to address refugee and migrant health issues at all levels, including, but not limited to, mental health care, disease prevention, social and legal protection and financial access to healthcare systems, as well as addressing the root causes of inadequate and inequitable access to health systems,

1. URGES Member States, as appropriate to their context, priorities, and institutional and legal frameworks:

- (1) to ensure that universal health coverage applies to the whole population, with a special focus on:
  - (a) including refugees and migrants into local healthcare systems;
  - (b) providing refugees and migrants with equitable access to healthcare services;
  - (c) sharing information about health hazards from origin countries;
  - (d) enrolling undocumented refugees and migrants in Member States' vaccination programmes, and providing rehabilitative health services to refugees and migrants;

- (2) to provide all refugees and migrants with identity documentation and legal protection, including birth certificates, and to allocate resources to facilitate fair, just and timely asylum processes;
- (3) to ensure that all refugees and migrants have equal rights as citizens including access to water, sanitation and hygiene services (WASH), safe housing and shelter, critical relief items (CRIs), food security, education, social protection, work and occupational health services;
- (4) to promote the social and cultural integration of refugees and migrants into their host country population to foster inclusivity;
- (5) to ensure partnerships between local communities, refugees and migrants, and governmental organizations and healthcare providers for effective health education and literacy programmes;
- (6) to provide accessible, culturally sensitive, refugee- and migrant-specific and language-appropriate health education and literacy, resources, and trainings to promote as well as enrich academic curricula and programmes on health awareness and literacy, especially for mental, sexual, and reproductive health;
- (7) to promote policies and programmes that support the health and well-being of refugees and migrants, including cultural and sports activities;
- (8) to enhance national health surveillance systems by strengthening human and financial resources for health-related sciences and data collection regarding migrant and refugee issues;
- (9) to provide trainings to health practitioners to effectively collect and report health information of patients, while ensuring the data protection and the safety of undocumented migrants;
- (10) to collectively agree on an objective model, with appropriate maximum limits set into place, which will determine the fair numerical allocation of refugees and migrants to countries especially based on the host country's economic capability, as well as location, population density, and past contributions;

**2.** CALLS UPON United Nations agencies, the international research community, civil society, the private sector and other health-relevant national, regional, and international partners and stakeholders, in collaboration with Member States, as appropriate:

- (1) to systematically increase their financial investment in healthcare and to expand healthcare coverage and aid in a flexible, predictable and multi-year approach, so that refugees and migrants are able to access quality healthcare services;
- (2) to identify and to actively remove cultural and communication barriers in order to establish effective educational programmes that, among others, target sexual and reproductive health, maternal health, nutrition, and communicable diseases;
- (3) to support Member States in promoting safer, healthier and more inclusive environments and in actively opposing stigma, racism, gender-based violence, xenophobia and other kinds of discrimination against refugees and migrants by educating the host and the refugee and migrant communities;
- (4) to support and provide technical expertise to host countries on social, economic, environmental and political determinants of health, such as, but not limited to, housing, WASH services, and facilitating peace building dialogues;
- (5) to optimize health interventions and effectiveness by strengthening international data-sharing on refugee and migrant health related topics, including epidemiological knowledge in collaboration with community clinics, primary health care centers and hospitals, and analyzing data, aiming towards an evidence-based understanding of the health needs of refugees and migrants in order to create better policies;

**3.** REQUESTS the Director-General:

- (1) to take steps to include refugees and migrants in international organizations, particularly as key stakeholders in relevant policy discussions, empowering them to become agents of their own health;
- (2) to devise, in collaboration with Member States and partner organizations, a capacity-building plan for refugees and migrants to be able to sustain themselves, both financially and socially;

- (3) to create and suggest refugee- and migrant-sensitive health policies and legal frameworks for Member States to adopt, as well as establish committees that assist refugees and migrants with their legal status and asylum applications;
- (4) to encourage monitoring and evaluation of all programmes related to refugees' and migrants' health and to annually track Member States' national progress using standardized indices, such as the Universal Health Coverage-Service Coverage Index;
- (5) to optimize health interventions and effectiveness by strengthening international data-sharing on refugee and migrant health related topics, including epidemiological knowledge in collaboration with community clinics, primary health care centers and hospitals, and analyzing data, aiming towards an evidence-based understanding of the health needs of refugees and migrants in order to create better policies;
- (6) to urge Member States to expand beyond COVID-19 Vaccines Global Access (COVAX), especially its Advance Market Commitment (AMC) programme, for the equitable distribution of medication, vaccines, and equipment for both communicable and noncommunicable diseases;
- (7) to support Member States in their negotiations to collectively agree on an objective model for the fair allocation of refugees and migrants, as referred to above in the resolution;
- (8) to further develop terminology that would socially and linguistically reflect the rights of refugees and migrants in the international community;
- (9) to submit a progress report on the implementation of this resolution at the Third Global Model WHO World Health Assembly.

#### DISCLAIMER

These resolutions have been drafted by the Youth Delegates during the first Global Model WHO held from 10-19 February 2023. Any information or suggested actions contained in resolutions drafted by student delegates participating in the 2023 Global Model WHO do not imply official endorsement or acceptance by the World Health Organization.