

VIRTUAL CONFERENCE

FRENCH / ENGLISH



PROGRAM ACCESS TO HEALTH CARE FOR MIGRANTS WITHOUT PROVINCIAL HEALTH INSURANCE



Practices, Policies and Courses of Action

April, 27 2021 | 8:00 AM - 12:30 PM

April, 28 2021 | 8:30 AM - 12:30 PM

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A presentation by [SHERPA University Institute](#), the [Center of Expertise on the Well-Being and Physical Health of Refugees and Asylum Seekers \(CERDA\)](#) / CIUSSS West-Central Montreal and [Montréal's Regional Public Health Department](#) / CIUSSS Centre-Sud-de-l'Île-de-Montréal

SHERPA University Institute

The SHERPA University Institute is a research infrastructure funded by the Fonds de recherche du Québec Société et Culture - the Quebec Society and Culture Research Fund – and by the Ministère de la santé et des services sociaux (MSSS) – Ministry of Health and Social Services. Its research and knowledge mobilization activities combine practical and academic knowledge to advance the understanding and support the development of best practices in primary care interventions in a multi-ethnic context.

SHERPA is under the scientific direction of Jill Hanley and brings together more than 40 regular university and clinical researcher members from multiple disciplines (psychology, social work, anthropology, nursing science, transcultural psychiatry, etc.) as well as research practitioners, research professionals, students and interns from different areas. Research, evaluation and knowledge transfer activities are carried out in close collaboration with health care sites and community partners. Its designation as a university institute specializing in migration and intervention in an intercultural context has made SHERPA a vital actor in Quebec's health and social services sector.

Center of Expertise on the Well-Being and Physical Health of Refugees and Asylum Seekers

The Center of Expertise on the Well-being and Physical Health of Refugees and Asylum Seekers (CERDA) is part of the CIUSSS West-Central Montreal. In general, CERDA supports concerted efforts within the health and social services network to promote the settlement of refugees and asylum seekers in Quebec. CERDA's mandate in particular is to support the 11 CISSS / CIUSSS mandated to assess the well-being and physical health of newly arrived refugees. Its actions are based on 4 strategic areas: (1) connection of actors, (2) orientation of practices, (3) production and support of knowledge, (4) knowledge transfer.

To find out more, visit our website : <https://cerda.info/>

Montréal's Regional Public Health Department

The Montreal Regional Public Health Department is under the leadership of Dr. Mylène Drouin. In accordance with the laws on public health, occupational health and safety and health and social services, the main mission of the Regional Public Health Department (DRSP) is to improve health and well-being of all Montrealers while reducing inequalities between the various groups of the population. More specifically, the DRSP:

Monitors and informs the population concerning what may improve or threaten their current and future health status;

Promotes orientations and solutions and offers support and consulting services to the health and social services network and its regional and local partners in order to help put in place prevention and protection measures;

Influences decision-makers in the preparation and application of public policies to maintain and improve the health status of Montrealers;

In the case of a threat to the health of the population, determines the appropriate interventions to protect it,;

Contributes to the advancement of knowledge and the development of skills in the field of public health

Access to healthcare for migrants without provincial health insurance

Practices, Policies and Courses of Action

While access to health care is a fundamental right, many people who live in Quebec are excluded because of their migration status. Tens of thousands of residents of Quebec have no access to health care unless they pay considerable amounts of money. This is the case for people without status and also for many foreign workers and students with temporary visas. Asylum seekers, on the other hand, are covered in principle by a federal health insurance scheme (the IFHP), but in practice face major barriers.

The pandemic has highlighted the importance of providing health care and social services to all. In Quebec, screening, treatment and vaccination for COVID-19 are available to everyone free of charge, regardless of migration status, but there are still many challenges to overcome. This is a good time to discuss the means to be taken in order to guarantee genuine access to care for all.

The objectives of this conference are to:

- Promote knowledge sharing about the problems faced by migrants without provincial health insurance;
- Present inspiring models from Quebec and other provinces and countries, relating to intervention practices and public policies promoting access to healthcare for migrants;
- Discuss avenues of action aimed at broadening access to healthcare for migrants without provincial health insurance.

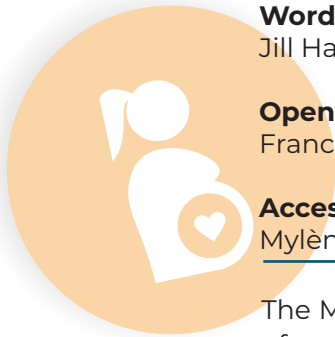
fr = in french with english simultaneous translation available
en = in english with french simultaneous translation available

April 27 - Day 1

Lack of access to healthcare for migrants with precarious status. Challenges and consequences

8:00am

OPENING SESSION



Word of welcome (fr)

Jill Hanley, Scientific Director, SHERPA University Institute

Opening remarks (fr)

Francine Dupuis, Associate CEO, CIUSSS West-Central Montreal

Access to Healthcare for All: Importance in Terms of Public Health (fr)

Mylène Drouin, Director, Montreal Regional Public Health Department

The Montreal Regional Public Health Department (DRSP) recognizes the importance of providing access to health care for all regardless of migration status and medical coverage in order to reduce social inequalities in health. Through numerous works in collaboration with key partners, the DRSP aims to facilitate access to health care especially for migrant persons without health insurance (MWHI).

Since 2018, several actions have been undertaken by the DRSP to better identify the health issues and problems that affect these populations. In particular with the launch of the portrait of the state of health of asylum seekers, refugees and migrants with precarious status. In addition, the COVID19 pandemic having exacerbated social inequalities in health, particularly for MWHI ; the DRSP is keen to prevent and protect the health of these sub-groups of the Montreal population by working simultaneously on public policies (institutions) and on interventions that directly target the population.

8:45am

ACCESS TO HEALTHCARE AND SERVICES FOR ASYLUM SEEKERS: THE IFHP

Care and services for asylum seekers: how to overcome the barriers ? (Fr)

Alexis Jobin-Théberge, Senior advisor, partnerships and Marie-Eve Boulanger, Coordinator, Programme régional d'accueil et d'intégration des demandeurs d'asile (PRAIDA / Asylum seekers)

Despite receiving IFHP coverage, asylum seekers are often denied access to health care and psychosocial services. In addition, they may be asked to pay fees for care that is supposed to be covered. Relatively few clinics and health care professionals accept patients with IFHP coverage, and the situation is particularly critical outside of Montreal. What can be done to improve the situation ?



Access difficulties: the clinical impacts on asylum seekers (fr)

Amélie Bombardier, Social worker, Team leader(PRAIDA)

Difficulties in accessing health care lead to a deterioration in the state of physical health and psychosocial well-being for many asylum seekers. We will present concrete examples of the problems encountered and discuss potential solutions to improve access to health care.

DISCUSSION

9:45am

PAUSE

9:55am

MIGRANTS WITHOUT MEDICAL INSURANCE: THE SITUATION IN QUEBEC

Access to healthcare for uninsured migrants in Québec: Overview(fr)

Janet Cleveland, Researcher, SHERPA University Institute

In Quebec, at least 50,000 people live without any medical insurance, including some temporary workers and international students, as well as people without status. The impact on their health and well-being can be dramatic, especially for pregnant women and for people with serious or chronic illnesses. We will present an overview of the situation.

Meeting with uninsured migrants (fr)

Jill Hanley, Scientific Director, SHERPA University Institute

This presentation will focus on the results of a study conducted in Montreal in 2016-2017 with 806 migrants without medical insurance, including information on the difficulties in accessing care, the state of physical and mental health, and the experiences of uninsured pregnant women.

Clinical Impacts of Lack of Access to Health Care for Migrants Without Medical Insurance (fr)

Pénélope Boudreault, Doctors of the World

In Montreal, Médecins du Monde's Migrant Clinic provides primary care to migrants without medical insurance. We will present clinical vignettes that illustrate the experiences of these people and the consequences of the lack of medical coverage on their health and well-being.

DISCUSSION

11:20am

PAUSE

11:30am

ACCESS TO CARE IN TIMES OF PANDEMICS FOR MIGRANTS WITHOUT INSURANCE

Mandatory reporting of infectious diseases among uninsured migrants - from public health to practice (fr)

Lavanya Narasiah, Physician, Montreal Regional Public Health Department, CIUSSS du Centre-Sud-de-l'île-de-Montréal



The issues of care cascades from access to screening through to treatment and vaccination have long existed for several notifiable infectious diseases, in particular for tuberculosis.

In the context of the pandemic, screening, treatment and vaccination for COVID-19 is offered free of charge to anyone living in Quebec, regardless of migration status. However, in practice, migrants without insurance still face many challenges. This presentation will explore strategies to reduce access barriers and better reach this population with a view to preventing and reducing inequities in public health.

Right to confidentiality of migrants without status (fr)

Genna Evelyn, Lawyer

Presentation of a legal analysis of the rights and obligations of institutions in the Quebec health and social services network with respect to migrants without status in relation to confidentiality. The review particularly focuses on the issue of disclosure of personal information by a health services staff member to authorities without the patient's consent.

DISCUSSION

12:30 pm

CLOSING

April 28 - Day 2

Possible Solutions - Towards Universal Coverage

8:30am

OPENING

Care for all children: growing up healthy without barriers (fr)

Mahli Brindamour, Assistant Professor General Pediatrics,
University of Saskatchewan

In this presentation, we will review the Canadian Pediatric Society's position on access to health care for all despite migration status, and the negative consequences of denying access to children who need it. Avenues for reflection and solutions will be explored using real-life cases.

9:00am

UNIVERSAL OR EXTENDED ACCESS POLICIES - EXAMPLES AND AVENUES FOR THE FUTURE

Access to health care for undocumented migrants in Europe (fr)

Michele LeVoy, Director of PICUM (Platform for International Cooperation on Undocumented Migrants)



In Europe, as health care is primarily a national level competence (as opposed to being primarily regulated at the EU level), there are 27 different legal frameworks governing undocumented migrants' access to health care. In most countries undocumented migrants face significant barriers and limited legal entitlements to health care as well as the absence of firewalls between immigration authorities and health care providers. The Covid-19 vaccine is being rolled out amidst this backdrop but there are nonetheless a number of EU member states which have included undocumented migrants in their vaccine rollout strategies.

Recent evolution and effects of healthcare coverage exclusion of undocumented immigrants in Spain (en)

Roberto Nuño-Solinís, Director of Deusto Business School Health, University of Deusto (Bilbao), Spain

The healthcare coverage for undocumented immigrants in Spain has changed during the last decade. Particularly, the 2012 reform excluded a large number of undocumented immigrants from basic publicly financed healthcare. The reform was justified as a needed measure to control healthcare expenditure. In this presentation, the impact of this measure will be reviewed from the efficiency and equity perspectives.

DISCUSSION

10:00am

PAUSE

Expanding Health Care Access for Migrants without Health Insurance in Ontario during COVID Pandemic and Beyond: Lessons from the Health Network for Uninsured Clients in Toronto (en)

Nadjla Banaei, Client Care Coordinator, South Riverdale Community Health Centre;
Rebecca Cheff, Researcher, Wellesley Institute;
Both are Co-Chair, Health Network for Uninsured Clients

In response to the COVID-19 pandemic, the Ontario Ministry of Health expanded access to publicly-funded health care for people who are not currently uninsured. As the co-chairs of the Health Network for Uninsured Clients in Toronto, Nadjla and Rebecca will share experience advocating for improved access to care for uninsured migrants in Toronto prior and during the COVID pandemic. Together we will review: 1) an overview of pre-pandemic health services for uninsured migrants in Ontario, 2) the new policy that has expanded coverage since the beginning of the pandemic, and 3) critical challenges, lessons learned, and possibilities beyond the pandemic.

The Mythology of Universal Healthcare in Canada and the Fight for « Healthcare for All » in Quebec (fr)

Samir Shaheen-Hussain, Emergency pediatrician; McGill University Faculty of Medicine; Caring for Social Justice

This presentation will describe the growing movement of support for access to health care for all in Quebec and Canada, inspired mainly by the demands of people with precarious status, on the part of community groups, professional associations and unions in the health and social services sector. The different reasons for this support - the harmful effects on health according to clinicians, a perspective of equal rights (including social rights such as health) for all people living on the territory regardless of their migratory status, the principles of dignity and justice - will also be discussed.

DISCUSSION

11:05am

PAUSE

11:15am

COLLABORATIVE WORKSHOPS

12:00pm

PLENARY DISCUSSION

12:30pm

CLOSING



