

How to ensure access and quality maternal health care for pregnant migrants and refugees?

Share-Net Netherlands kindly invites you for a thematic meeting on *maternal health care for asylum seekers, undocumented migrants and asylum residence permit holders.*

Invitation and Programme

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Bestuur WP ISMRH

NVOG commissie Global Network



UMC Utrecht
Julius Center

Working Party **International Safe Motherhood & Reproductive Health**

Pregnancy - migrants in Europe

Table 1

Maternal mortality and ethnic disparity: RR or OR of risk in migrants versus native-born women.

Country/year	Maternities (M) or live births (LB)	Maternal deaths	Relative risk (RR) or Odds Ratio (OR)
Netherlands/1996–2005 [62]	2,269,506 LB	302	OR 2.1 (1.6–2.7)
United Kingdom and Ireland/2009–2012 [4]	3,182,890 M	321	RR 1.77 (1.39–2.24)
Spain/1999–2006 [12]	3,648,788 LB	133	RR 1.67 (1.22–2.33)
Switzerland/2000–2006 [14]	1,021,177 LB	57	OR 4.38 (1.88–10.55)
France/1996–2001 [11]		267	OR 2.00 (1.42–2.80)
West Germany/1980–1996 [5]	11,120,000 M	1067	RR 1.59 (1.37–1.84)
Italy/2000–2007 [63]	1,001,292 LB	118	RR 1.2 (0.7–2.1)
Sweden/1997–2007 [16]	NA	73	RR 6.6 (2.6–16.5)
United Kingdom, Netherlands, Germany, France, Spain, Switzerland (1969–2008) [10]	42,290,456	4,995	RR 2.00 (1.72–2.33)

Pre-existing health issues / infections

Social economic situation

Isolation

Access to Care?

ONDERZOEK

Zwangerschapsuitkomsten en zorgbehoeften bij
asielzoeksters

EEN LITERATUUROVERZICHT

Simone Goosen, Irene E.A. van Oostrum en Marie-Louise Essink-Bot

Maternal and perinatal health outcomes in asylum seekers,
status holders and undocumented migrants in Europe:
two systematic literature reviews



UMC Utrecht
Julius Center



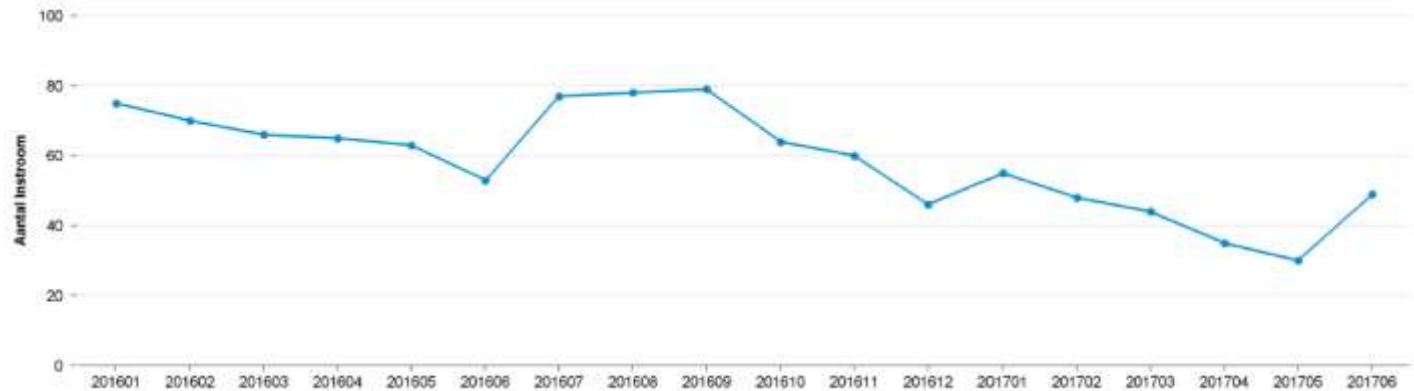
vd Akker & v Roosmalen BP_RCOG 2015
Goosen, NTVG 2010
Gieles, Tankink et al, 2018, submitted

Working Party International Safe Motherhood & Reproductive Health

Pregnancy – Migrants in NL?



Instroom geboorten vanaf 2016 tot en met juni 2017
24-10-17



Retrospective database study - Ter Apel

Jan 2012- Dec 2016, first and second line

NewLife midwives and Refaja hospital, Stadskanaal

Asylumseekers (N=345), Local population (N=2342)

45% from Syrie and Erithrea

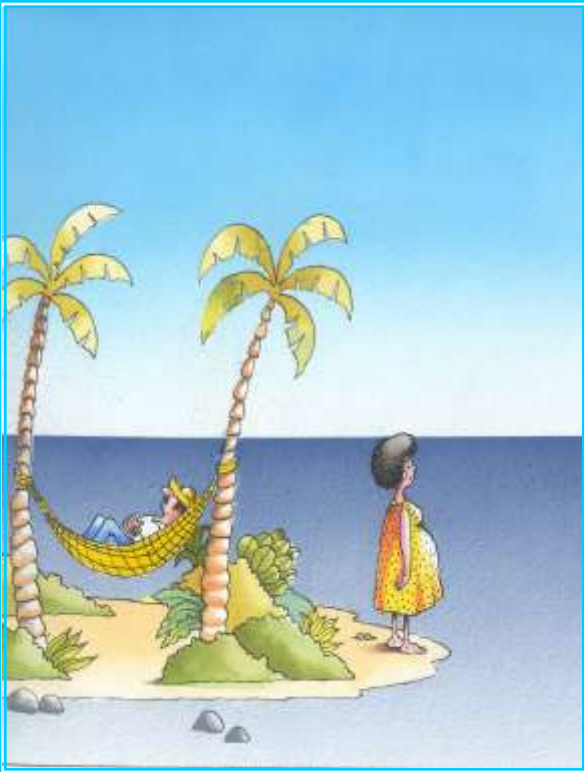
* Perinatal mortality 12/345 (3.5%) vs 15/2342 (0.6%)

* SGA 41/345 (14%) vs 172/2342 (8%)

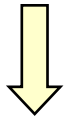
Moving...
Literacy/ Language...
Access...
Chron illness...



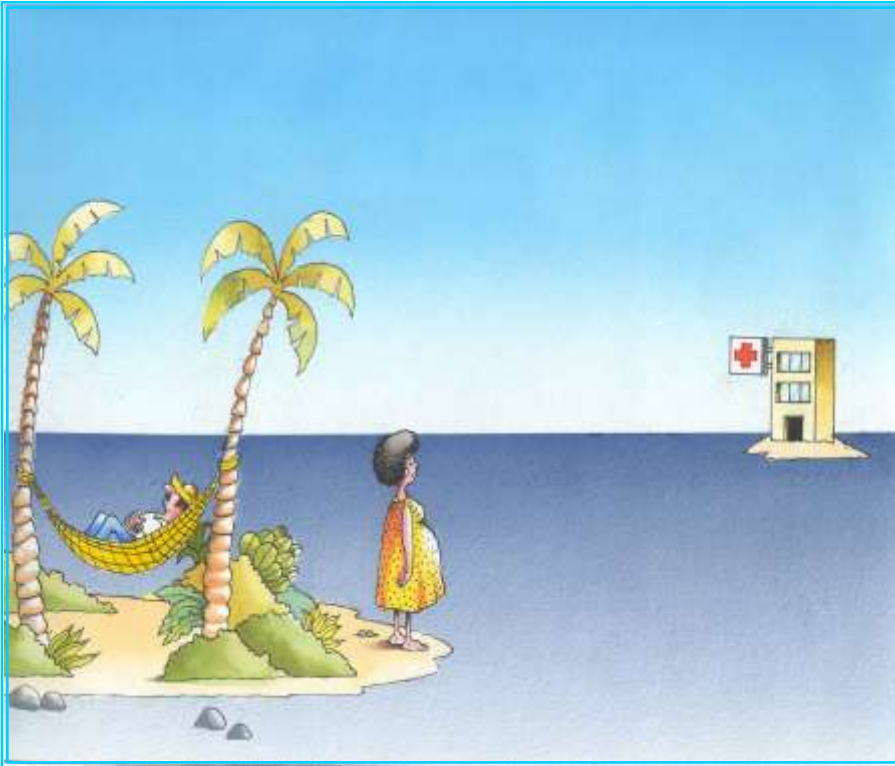
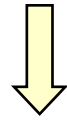
Recognition



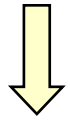
Recognition



Referral

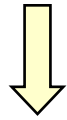


Recognition



knowledge,
communication,
literacy

Referral

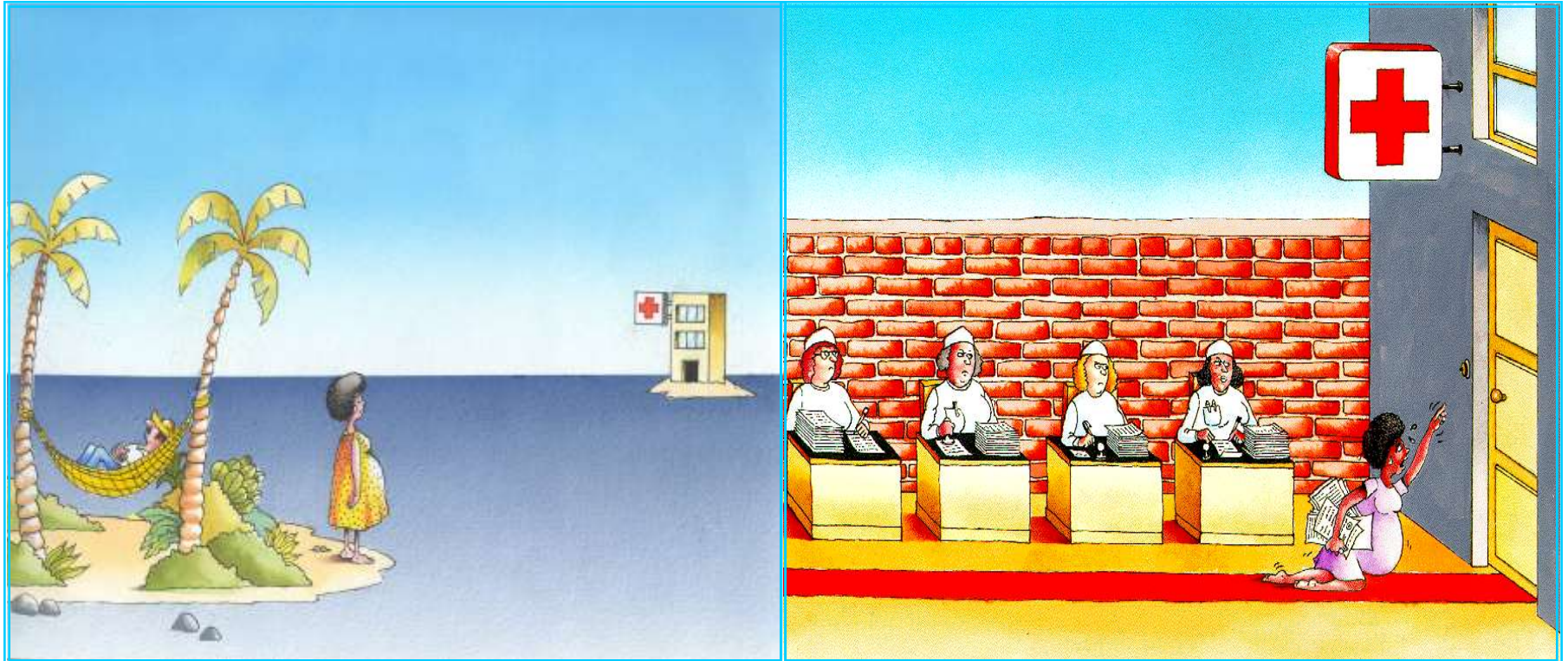


contact,
transport

Responsiveness



translation,
quality care



delay
(1) decision to seek care; (2) arrival at health facility; and (3) provision of adequate care

GEBORTEZORG ASIELZOEKSTERS (KETENRICHTLIJN)

Versie 3.0

Versie december 2016



COA Centraal Orgaan opvang asielzoekers



Ketenrichtlijn Geboortezorg Asielzoeksters



The aim of this meeting is twofold:

1. Network strengthening of stakeholders involved in maternity care for refugees and permit holders to learn from each other's experiences, learn what is already done and challenges faced.
2. Concrete recommendations and action plan to improve readiness for a next arrival of pregnant refugees to provide quality care for pregnant refugees and status holders.

No semantic discussions, no political background, no conflict of interest

The voice from the field:

How many midwives? Doctors? Kraamverzorgenden? Policy makers?

Part 1: Key note talks

- 17.05 – 17.25 **Setting the scene: from recent evidence to sharing stories**
by Simone Goosen. She will give a brief overview of recent evidence on the sexual and reproductive health of refugees and undocumented migrants. She will explore, with the audience, thoughts on the importance of sharing personal stories and chain collaboration.
- 17.25 – 17.45 **Care path for asylum seekers**
by Peggy van der Lans, Gynaecologist, VSV Almelo
- 17.45 – 18.05 **Reflections from the expert meeting by Dokters van de Wereld**
by Marthe Zeldenrust, MD in Sexual Health and SRH coordinator Dokters van de Wereld

Special guests....

Part 2: Developing recommendations and action plan

- 18.45– 19.45 **Break-out in smaller groups to develop recommendations related to research, policy and practice**
Each group is led by one content expert. Facilitation by Joyce Browne, Assistant Professor Global Health.

Part 3: Feedback session and closure

- 19.45 – 20.00 **Asylum seekers and the right to health**
Presentation by Jelle Stekelenburg, Professor International Aspects of Reproductive Health, Safe Motherhood at Universitair Medisch Centrum Groningen/Medisch Centrum Leeuwarden. Chairman Working Party International Safe Motherhood and Reproductive Health. The concept of the right to health will be explained and the situation of pregnant asylum seekers in the Netherlands will be discussed. Are their rights violated? And what could we do about that?

	Break out group title	Facilitator
1.	Different health seeking behaviors and health knowledge, including language barrier and translation?	Ineke Postma, UMCG
2.	Cultural differences and intercultural skills of the care providers	Mahdi Abdelwahab & Barend Gerretsen, KIT
3.	Undocumented migrants	Marthe Zeldenrust, Dokters van de Wereld
4.	COA and care inside the AZCs	Chantal Baks, COA Gre van Gelderen
5.	Research and availability of data	Liselotte Raben, Radboud
6.	Networking and sharing experience of different concerned parties in the Netherlands	Eveline Melman, Safe Motherhood & IRH WP
7.	Quality care for the patients throughout the continuum of care	Geert Tom Heikens
8.	Sexual and reproductive health & prevention of unintended pregnancies	Simone Goosen & Ineke van de Vlugt, Rutgers

20.00 – 20.45

Groups present the recommendations from their discussion and plenary development of action plan

Facilitation by Thomas van den Akker, Leiden University Medical Centre - Department of Obstetrics.

20.45 – 21.00

Closure by Marcus Rijken

accreditation

Utrecht, 6 December 2018

To policy makers:

Letter of recommendation

Yours sincerely,

Voices from the field