




THINK-TANK: Sexual, reproductive
and maternal health of refugees
and undocumented migrants in
the Netherlands

Organized by Share-Net Netherlands & Centre
for Social Science and Global Health,
University of Amsterdam.



INTRODUCTION

On the 28th of August, approximately 20 practitioners and scholars met to develop a research agenda regarding Sexual and Reproductive Health and Rights of refugees and undocumented migrants in the Netherlands. Co-organized by [Share-Net Netherlands](#) and the [Centre for Social Sciences & Global Health](#) at the University of Amsterdam, the meeting aimed to identify research needs, research partners and potential funding avenues and to decide on concrete steps to get actual research projects off the ground.

The meeting started with a brainstorm around topics requiring investigation, taking as a starting point the December 2018 Share-Net Symposium – Joining forces to ensure accessible and high-quality maternal health care for asylum seekers, undocumented migrants and residence permit holders. Prior to the meeting, selected public health and social science literature on Sexual and Reproductive Maternal Health of refugees had been made available to participants through a shared Dropbox. After the brainstorm, groups were formed to begin proposal development. In a final plenary, we shared research ideas, gave feedback and discussed action points for the future.

Below, we report briefly on the different meeting activities.

BACKGROUND

On the 6th of December 2018, Share-Net Netherlands organised a [Symposium – Joining forces to ensure accessible and high-quality maternal health care for asylum seekers, undocumented migrants and residence permit holders](#). The presentations of that meeting were used to identify initial research needs, supplemented by issues identified by Pharos (Expert centre in the Netherlands focused on health disparities). Identified research needs were shared, as listed below:

- Increased risk adverse outcomes asylumseekers & undoc migrants; women **with** residence permit more difficult to reach.
- Contributions “Three delays”: 1) Decision to seek care (“recognition”); 2) Arrival at health facility (“referral”); 3) Provision of adequate care (“responsiveness”).
- Need for more engagement and input of women
- Barriers to contraception/abortion care undocumented women
- Post-natal care (lack of family support)
- Male involvement
- Cultural differences, profs informed by ‘western’ cultural norm.
- Communication barriers.
- Health knowledge
- Profs underestimating impact of low (health) literacy or health skills; professionals not knowing how to ‘bridge’.
- Lack of trust; avoidance of health care services
- How to ensure continuity of care.

BRAINSTORM ON RESEARCH THEMES

Participants were then asked to brainstorm about what *they* considered research priorities; either drawing from the list above or adding new themes. These were written down on post-its, clustered into 12 themes, and prioritized through voting.

Themes:

1. Male involvement
2. **Interaction & communication between women/professionals & health organizations**
3. **Implementation research (merged with 10)**
4. Private/informal support networks
5. Providers' attitudes /norms (merged with 8)
6. **Women's notions/needs/perceptions.**
7. Barriers & 3 delays
8. Health professionals' needs including interpreters (merged with 5).
9. Sexual violence & empowerment
10. **Mapping of services & PH interventions & effectiveness (merged with 3)**
11. Health literacy
12. Hidden women
13. Substandard care
14. Pregnancy outcomes

Participants were asked to prioritize three themes for which they would like to begin to develop a research proposal whilst it was noted that various themes overlap. The three themes with most votes were:

1. Implementation research, combined with the theme of mapping of services and PH interventions and assessing effectiveness.
2. Interaction and communication between women/professionals and health organizations
3. Women's notions/needs/perceptions.

Three groups brainstormed for one hour about a potential research proposal. Groups were asked to discuss what they would study, how, and funding sources. After that, groups shared 'proposals' and obtained feedback in a plenary session.

In one hour, groups could not develop a full proposal, but a start was made, cross-disciplinary fertilization of ideas and insights took place and participants got to know each other as potential research partners.