

STRENGTHENING REFUGEE AND MIGRANT CHILDREN'S HEALTH STATUS

IN SOUTHERN AND SOUTH-EASTERN EUROPE



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the Health Programme
of the European Union



RM Child-Health

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The €4.3 million 'RM Child-Health' initiative has come to an end, having met and often exceeded its original ambitions. Since January 2020, the initiative has put long-term measures and approaches in place to support the health and well-being of children on the move in Bosnia and Herzegovina, Bulgaria, Greece, Italy and Serbia.

The 27-month initiative, co-funded by the European Union under the Directorate General for Health and Food Safety, has aimed to ensure that all refugee and migrant children and their families have access to quality health care and accurate health information.

UNICEF Country Offices have led implementation at the national level in close consultation with their partners and with refugee and migrant communities. Together, they have established sustainable health measures and approaches that will continue to respond to real needs into the future.

The initiative has more than achieved its overall objectives – the result of an effective two-track approach. This approach has combined interventions to meet the immediate health needs of refugee and migrant children and their families with measures to build the long-term capacity of national authorities, health practitioners and other frontline workers.

The 'RM Child Health' initiative has responded to the many health challenges for refugee and migrant children and their families.

A background of poor health care. **Children on the move** often come from countries with shattered health systems and may have never been able to claim their right to good quality health services.

Health risks during their journeys. Many have endured months or years on the move without access to health care. Crowded and unhygienic living conditions have exposed them to disease, and they have faced the constant risks of violence and exploitation. They often carry the physical and emotional scars of their experiences.

Continued health risks in Europe. Refugees and migrants often face continued obstacles to accessing health care as a result of cultural barriers, bureaucracy and a lack of information in their own language.

Complex health needs that go far beyond poor physical

health. The stress of migration has often damaged children's mental health and wellbeing and compromised the ability of some caregivers to meet the physical and emotional needs of their children. The cumulative impact has been deepened by poor living conditions, a lack of social networks and in some cases hostility from host communities.

Gender-based violence (GBV). A lack of child-friendly health information and durable solutions has heightened the risks of GBV, sexually transmitted diseases and early pregnancies, and the devastating consequences of all three for a child's mental health.

COVID-19. The pandemic has intensified every risk to the health and well-being of refugee and migrant children since March 2020 – the first year of the 'RM Child-Health' initiative – and lockdowns have only added to their marginalization.

National highlights: targets exceeded in every country



BOSNIA AND HERZEGOVINA

3484 refugee and migrant children reached with health checks and referrals to public healthcare services, including to immunization:
Target = 1200

BULGARIA

518 refugee and migrant children participated in gender-based violence (GBV) prevention activities and/or referrals to services:
Target = 200

GREECE

Over **3000** children and **2300** mothers accessed mother and child healthcare, including infant and young child feeding counselling:
Targets = 950 / 1,380

ITALY

450 refugee and migrant children participated in UNICEF-supported gender-based violence (GBV) prevention activities and/or referrals to GBV response services:
Target = 150

SERBIA

2036 refugee and migrant children participated in UNICEF-supported psychosocial support sessions and/or referrals to specialized mental health services:
Target = 500

Source: IOD PARC, Evaluation of the UNICEF Project: Strengthening Refugee and Migrant Children's Health Status in Southern and South-Eastern Europe, Annex 12.



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Key results

Strengthened national capacity

Over 1350 frontline professionals were trained, and the capacity for health service delivery was expanded, with over 20,000 children receiving health services, including vaccination and nutrition counselling.

- **Original goal: refugee and migrant children will benefit from improved health care provision by national authorities that responds to their specific needs.** Health systems that work for vulnerable children – including refugees and migrants – are systems that work for every child. The initiative has increased access to services for life-saving immunization, mental and emotional health, GBV prevention and maternal and newborn health care and nutrition. [Read more ...](#)

Health literacy

Over 130,000 children and their parents received information on health risks, their entitlement to health care and the services available to them. The number of fully vaccinated refugee and migrant children increased; there was greater demand from girls and women for physical and mental health support; and more mothers made use of Mother and Baby Corners.

- **Original goal: Children and their parents have an increased health literacy and are empowered to adopt positive health practices and build their confidence and self-efficacy.** An impressive pool of evidence-based materials and approaches has been created to inform refugees and migrants in their own language, while medical interpreters and cultural

mediators have enhanced communication between refugee and migrant communities and health care providers. [Read more ...](#)

Strengthened implementation of national health policies

Standard Operating Procedures were established on a range of issues, from infant and young child feeding to the protection of refugee and migrant children. Services for health, psychosocial support and gender-based violence were mapped, as well as best practices.

- **Original goal: Health authorities and allied sectors gradually acquire the capacity to realize the right of refugee and migrant children to health.** Frontline health-care workers have been supported to respond to the needs of refugee and migrant children and their families. National health authorities have been supported to implement their health policies and tackle bottlenecks that hamper access to health care for refugee and migrant children. [Read more ...](#)

In addition

the resources of the 'RM Child-Health Initiative' made it possible to safeguard the health of refugee and migrant children during the **COVID-19** pandemic.

- While the initiative was launched before the COVID-19 pandemic, it responded at speed, testing and rolling out effective solutions that will enhance responses to health crises in the future.

Voices from the field



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Bosnia and Herzegovina



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How a pair of spectacles changed one girl's life; and support for a boy travelling alone. [Read more ...](#)

Bulgaria



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Health care during a pandemic; and social workers on the vaccination frontline. [Read more ...](#)

Greece



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Safeguarding health in a crisis; and Mother and Child Centres. [Read more ...](#)

Italy



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Reaching refugee and migrant children during COVID-19; and a community defends itself from the pandemic. [Read more ...](#)

Serbia



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Mother and Baby Corners; and research on drug and alcohol abuse. [Read more ...](#)

Key findings on the 'RM Child-Health' Initiative from an independent evaluation¹

Relevance

The initiative was found to be highly relevant at a national, regional and global level, contributing to national goals on health and protection, and regional and global strategies and policies on migration, health, and children's rights.

Coherence

Stakeholders recognized UNICEF's credibility, neutrality, technical expertise, convening power, agility, and ability to work in a multisectoral manner as its main added value. Internal coherence was strong both within the initiative itself and with other UNICEF programmes, while external coherence was achieved through collaboration with other UN agencies.

Effectiveness

The initiative met (and often exceeded) its planned targets in the five countries. Key factors in this success include:

- UNICEF's agility and flexibility
- the use of other grants to complement EU funding for this initiative
- the use of cultural mediators and multiple means of communication
- physical outreach to refugee and migrant populations
- the capacities and long-term presence of implementing partners on the ground
- cutting-edge research.

¹ Conducted by International Organisation Development Ltd, Sheffield, United Kingdom.

Sustainability

There was evidence of potential sustainability across the five countries:

- government ownership
- exit/handover strategies
- institutional arrangements
- advocacy for policy and legislative changes
- capacity building of government and the staff of implementing partners
- sustainable approaches (often community-based)
- continuity of funding
- policymaking based on research.

Resilience

Elements of the initiative could, over time, lead to more resilient health systems in the five countries:

- stronger networks and linkages for crisis response (enhanced during the COVID-19 response)
- production of GBV and psychosocial support packages
- a stronger focus on prevention activities.

Response to the COVID-19 pandemic

While the pandemic posed unprecedented challenges across multiple sectors, including health services, the initiative demonstrated a high-level of agility in responding. It changed the way it operated – including its training content – and adapted its services at speed. It overcame daunting logistical challenges to safeguard the health and well-being of refugee and migrant children and their families.

Conclusions

The initiative delivered and exceeded several of its planned outputs, despite the challenges of the COVID-19 pandemic and the severe overstretching of national health systems, implementing partners and UNICEF staff at country and regional level.

The key drivers of success lay in the agility of UNICEF and its implementing partners, and their ability to reach refugee and migrant populations, communicate effectively and leverage local knowledge. UNICEF's reputation enabled successful interactions with national governments, and, in some countries, supported high levels of national ownership.

The initiative's shift to remote activities in response to the COVID-19 pandemic had some unintended yet positive consequences. These included more active participation in online webinars by greater numbers of people, better learning opportunities, improved social cohesion and greater capacity to use digital devices.

One key strength was the multisectoral approach of the initiative and its strong links with other UNICEF programmes. In particular, the provision of services for mental and psychosocial protection as well as for physical health helped to build trust with refugee and migrant communities and meet their needs in a holistic and efficient manner.

Important conditions for sustainability were met. The initiative helped to build capacity among frontline workers and its response to the COVID-19 pandemic built more resilient networks and ways of working among stakeholders.

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for every child



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