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Volume 28 Supplement 1

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SUPPLEMENT

1ST WORLD CONGRESS ON MIGRATION, ETHNICITY, RACE AND HEALTH - ABSTRACT SUPPLEMENT

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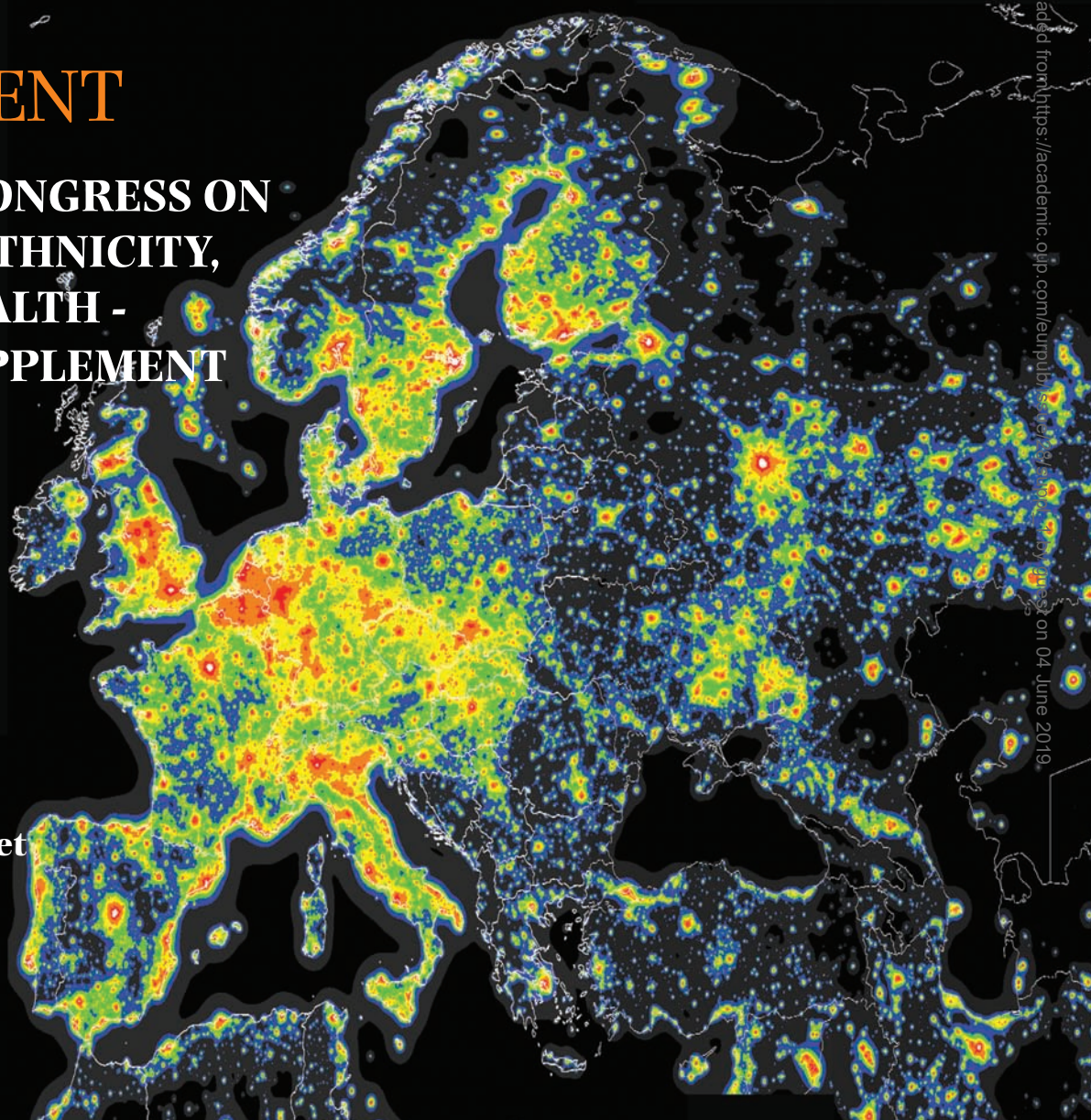
Guest Editors:

Laurence Gruer

Fiona F Stanaway

Allan Krasnik

Dineke Zeegers Paget



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care coverage for asylum seekers. The request for and the decision on a residency permit may require months and during both stages they could be without health-care coverage. Each region is autonomous in its application of national protocols. Our aim was to investigate possible differences between protocols and daily practice, and to better understand the issues related to the procedures initiated immediately after arrival.

Methods:

The research team was a subgroup of the Inequality Working Group of the Italian Hygiene Society Committee of Residents, with the Regional Immigration and Health Groups (GrIS) of the Italian Society for Migration Medicine (SIMM). The research was conducted in five regions: Emilia-Romagna, Tuscany, Umbria, Abruzzo and Lazio. National and regional protocols on health care for asylum seekers were collected and compared with the protocols of Local Health Units. The application of the protocols was investigated locally by interviews with experts.

Results:

Preliminary results show differences between the regions and individual Local Health Units, despite agreement between national and regional protocols. In the hub, the first reception centre for health-care, difficulties in continuity of care may occur when extra investigations are needed. A critical point is the transfer to the second reception level, due to incomplete communication of clinical information, which may lead to repeat visits and tests.

Conclusions:

Asylum seekers may spend different amounts of time in the first level centre depending on their social and clinical situation, affecting continuity of care and the availability of more integrated care.

Main messages:

National and regional protocols for asylum seekers are not easily implemented at the Local Health Unit level.

In a universal health service, there can be difficulties in access for more vulnerable groups.

2.11-P12

Italian policy for asylum seekers health-care: from national to local application

C Salvia, J Bianchi, F D'aloisio, V Gianfredi, L Mammana, C Milani, P Mormile, L Paglione, G Raguzzoni
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Background:

Asylum seekers are refugees who have left their country of origin and have applied for residency in another country. Italy recognises and guarantees international protection and health-