

Talking About Migrants

Epidemiological Data





Epidemiological data



Globally, there are an **estimated 258 million international migrants**, and 763 million internal migrants; 65 million are people forcibly displaced from their homes (WHO, 2018).

The available evidence about communicable disease among migrants tells that more than 22% of **TB** reported cases occurred in migrants. The more affected areas of origin are Asia and Africa. To reflect on this data it has to be reminded that TB is a disease of poverty, more affected people living in overcrowded communities, in condition of poor nutrition, inadequate accommodation, with a low access to the health services, all factors which made the migrants really vulnerable.

Hepatitis B is one of the more reported, by the literature, in migrants, in both rates of incidence and prevalence. The countries of origin more affected, with a rate of chronic infection over 8%, are China and other part of Asia, sub-Saharian Africa, and the Amazon region.

In general, the most important transmission route for **HIV** are risky-behaviours in which migrants are not highly represented; however, considering the heterosexually transmission, the influence of migrants increases till 43%. In the general picture, migrants seems to be highly represented in the HIV infections, in different countries of the UE. In these, African migrants represent the main group of risk; in specific, sub-Saharian people represent more than 16% of all reported cases in UE, and they have the higher rate of deaths from AIDS.





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Even if lots of the childhood infection diseases are preventable by immunization, in many country of origin vaccination campaigns are not so developed, and the individual data/reports are not easy to be found. A lower immunization rate in children with different nationality from UE is confirmed, and it becomes a risk factor for the overall coverage (European Observatory on Health System and policies Series, 2011).

The top countries by origin of asylum seekers in the EU are Syria, Iraq, Afghanistan, Nigeria and Pakistan, together with the asylum seekers from Eritrea, Bangladesh, Somalia, Iran and some Sub-Saharan countries become the top ten countries of origin of those who have applied for asylum (UNCHR, 2017).

For more on this, see:

http://www.euro.who.int/ data/assets/pdf file/0019/161560/e96458.pdf





References



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