

North African migrants' health and quality of life

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The Centre for Primary Health Care Research aims to improve the conditions for immigrants to the EU through research and by providing recommendations for health policy measures. The CPF will coordinate the Swedish contribution to a major EU project that has received EUR 2 million to study the health of migrants from North Africa.

"We are pleased to have been entrusted with the coordination of the Swedish contribution to such a complex, exciting and important EU project, which puts the health and [quality of life](#) of North African migrants in focus", says Jan Sundquist, Director of the Centre for Primary Health Care Research (CPF), a research centre operated jointly by Lund University and Region Skåne.

Human health is complex, even in a single population. For migrants, whose life situation is always influenced by both their host country and their country of origin, the picture is even more complicated.

"It is therefore important to map health, diseases and use of health care services for [immigrants](#) and to compare the data with that for the native population. However, such analyses would be incomplete if the same parameters were not also studied in the country of origin", says Jan Sundquist.

The project, which is called EU and North African Migrants: Health and Health Systems (EUNAM), has assembled a team of experts from Egypt, Tunisia, Algeria, France, Italy, Germany, Slovenia and Sweden, whose

combined experience covers all health aspects of the migration cycle. The group will look at the health situation both in the North African partner countries of Egypt, Tunisia and Algeria, from which a large number of immigrants to the EU come, and for migrants living in Europe.

France, Italy, Germany, Slovenia and Sweden are not only recipients of North African migrants, but also have a large number of immigrants from other regions. This allows comparisons to be made between different migrant groups.

"Collectively, the group of experts has a lot of experience of disease prevention work and has access to material and registers containing information on population health and disease patterns and the effects these have on the health care system", says Jan Sundquist.

A lot of the data that will be used in the study has already been compiled by the participating countries. The participants will have access to these unique sources of data.

"We have a good starting point from which to be able to deliver research-based evaluations and recommendations for scientific and [health policy](#) measures that will improve conditions for immigrants to the EU", concludes Jan Sundquist.

Provided by Lund University

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