

A study analyses the health status of immigrant population in Raval neighbourhood in Barcelona

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Researchers Esther Esteban, Olga Hladun and Albert Grau, at the Faculty of Biologia of the University of Barcelona.

To know the incidence and risk factors for some diseases in Barcelona's immigrant population in Spain is the main objective of a study published in the *Journal of Travel Medicine*. The article is signed by experts Esther

Esteban, from the Department of Animal Biology of the University of Barcelona, Olga Hladun and Albert Grau, doctors at the Catalan Institute of Health, and Josep M. Jansà, expert from the European Centre for Disease Prevention and Control (ECDC, Sweden).

The study, which collects data from 2001 to 2005, has been possible thanks to the collaboration of 3,132 immigrants from low-income countries who attended the public primary [health care](#) (PHC) centre Raval Nord, located in the district of Ciutat Vella, the historical centre of Barcelona. This study analyses the largest sample of immigrant patients screened in a public PHC unit in Spain.

Primary Health Care centres: health in the neighbourhood

Professor Esther Esteban, expert on human diversity studies, explains that "the study aims at clarifying the degree of demographic differences among immigrants (age, sex, country of origin, etc.) that may help us to describe their health status and to improve future initiatives in the field of [primary health](#) care." The study took place in El Raval, one of the neighbourhoods of the historical centre of Barcelona where a high percentage of immigrants live. Albert Grau, family doctor at the PHC centre Raval Nord, stresses that "the idea of the study was to include immigrants who were first attended in the PHC centre, which is the first level of health care in the neighbourhood".

Experts analyse the prevalence and risk predictors for five infectious diseases (hepatitis B and C, human immunodeficiency virus infection, syphilis and tuberculosis) in immigrants from low-income countries; to be exact, the countries most represented in the sample are Pakistan, Ecuador, Philippines, Morocco, Colombia, Bolivia, Argentina, Bangladesh, Peru and Dominican Republic. The family doctor Olga

Hladun affirms that "they are diseases without borders, you can find them all over the world; some of them are more prevalent in immigrants' countries of origin (for example, tuberculosis). Their wrong treatment generates high expenses, not only for patients, but also in the sense of social and health care (drug, hospitalization, etc.)."

Tuberculosis: more years of residence, more prevalence

According to the study, tuberculosis values, even though they are not alarming, do not decrease as the number of years that immigrants have lived in the host country increase. On the contrary, the values are increased in both, active (infectious) and latent tuberculosis (not symptomatic or contagious). The spread of the disease, highly connected with socioeconomic status, proves that living conditions (housing conditions, number of people living in the same flat, etc.) have not improved among the immigrants who live in the neighbourhood. Experts point out that tuberculosis epidemiological surveillance should be stressed, regardless of the years of residence in Spain.

In the case of hepatitis C, authors suggest performing a workup on all patients who show altered levels of liver transaminases. The study also indicates that gastrointestinal symptoms may be a risk predictor in hepatitis B. Regarding HIV infection, experts point out that data are insufficient to draw any conclusion as, historically, these patients have been attended to in the Unit of Tropical Medicine and International Health Drassanes, located in the same district of the city.

Immigration and public health: myths and reality

Experts affirm that [immigrant population](#) make the same use of healthcare resources than autochthonous one. "Immigrants do not over-

use public healthcare resources," says Albert Grau, "even if the access to the [public health](#) system is much easier than in their countries of origin. In general, [immigrants](#) who arrive to our country have good health status within their original countries."

The study published in the *Journal of Travel Medicine* provides new tools for public health authorities to make decisions and it can be extrapolated to similar neighbourhoods in any worldwide city. Besides analysing the [health status](#) of an immigrant population in a European city, the study aims at stressing the importance of [primary health care](#) as a tool for disease prevention. Authors recommend providing family doctors with better information and alert about the negative effects of cost-cutting exercises in [public health services](#).

More information: "Results From Screening Immigrants of Low-Income Countries: Data From a Public Primary Health Care." Olga Hladun, Albert Grau, Esther Esteban, Josep M. Jansà. *Journal of Travel Medicine*, 2013. [DOI: 10.1111/jtm.12083](https://doi.org/10.1111/jtm.12083)

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