

AVERROES Network – Improving access to health care for asylum seekers and undocumented migrants in the European Union

The Averroes network gathers delegations and offices of **Medecins du Monde** in ten European countries and the Skop platform from Malta.

Proposal of Amendment 23 bis Article 19

Text proposed by the Commission

1. Member States shall ensure that applicants receive **the necessary** health care **which shall include, at least, emergency care and essential treatment of illness or mental disorders.**

2. **Member States shall provide necessary medical or other assistance to applicants who have special needs**, including **appropriate** mental health care **when needed**, under the same conditions as nationals.

Amendment

Member States shall ensure that applicants receive health care, including mental health care, under the same conditions as nationals.

Justification

a) Public health justification

- *The lack or insufficient access to health care and prevention -especially vaccination- for particular group of persons within a society can pose a risk to public health. No public health policy can be efficient if it leaves aside some of the most vulnerable groups.*
- *Regarding contagious diseases, screening, early diagnosis and early treatment reduce the risk of transmission and aggravation.*

b) Financial justification

- *Access to primary health care and prevention programmes allows to reduce morbidity and is a factor of considerable costs reduction and rationalisation in terms of public health policies.*
- *Asylum seekers do not make an abusive use of health systems (in fact, they seek health care significantly less than nationals).*

c) Human rights justification

- *Refraining from denying or limiting equal access for all persons, including asylum seekers, to preventive, curative and palliative health services is a precondition to guarantee the right to health, recognised by many international human rights treaties¹.*
- *Most Member States recognise asylum seekers the right to health care in similar conditions to nationals².*

¹ See UN's ad hoc Committee on Economic, Social and Cultural Rights, on the International Covenant on Economic, Social and Cultural Rights, General comment (14) on article 12: "[...] 18. The Covenant proscribes any discrimination in access to health care and underlying determinants of health, as well as to means and entitlements for their procurement, on the grounds of race, colour, sex, language, religion, political or other opinion, national or social origin, property, birth, physical or mental disability, health status (including HIV/AIDS), sexual orientation and civil, political, social or other status, which has the intention or effect of nullifying or impairing the equal enjoyment or exercise of the right to health.

[...] 34. States are under the obligation to respect the right to health by, inter alia, refraining from denying or limiting equal access for all persons, including prisoners or detainees, minorities, asylum seekers and illegal immigrants, to preventive, curative and palliative health services(...)."

² Pro Asyl, Information and Cooperation Forum: Final Report, 28 February 2006, p.16. See also Odysseus Academic Network, Comparative Overview of the Implementation of the Directive 2003/9 of 27 January 2003 laying down minimum standards for the reception of asylum seekers in the EU Member States, pp.68-69.