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الهجرة غير الشرعية و آثارها على النظم الصحية الليبية ودول حوض البحر المتوسط: نحو سياسات صحية إفريقية أوروبية متوسطية فاعلة للمهاجرين

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الملخص

المقدمة :على الرغم من الزيادة الكبيرة في أعداد المهاجرين واللاجئين في مختلف أنحاء العالم في السنوات الأخيرة، إلا أنه لم يتم إيلاء الاهتمام الكافي لتلبية احتياجاتهم الصحية وفقا للاتفاقيات الدولية التي تنص بشكل واضح لا لبس فيه على الحق في الصحة للمهاجرين دون تمييز .**منهجية الدراسة :**دراسة تحليلية كمية للوثائق والتقارير الحكومية وغير الحكومية (من قطاع الصحة والقطاعات الأخرى) ذات صلة بقضايا الهجرة والصحة .**هدف الدراسة :**تهدف هذه الدراسة إلى استكشاف كيفية تأطير الهجرة من قبل صناع القرار الحكوميين الرئيسيين في القطاع الصحي وفهم ما إذا كانت المواقف الواردة في الوثائق تدعم نهجا مدركا للمهاجرين وشاملا لهم، بما يتماشى مع التزامات وأهداف السياسات الصحية الليبية .**النتائج :**تضمنت هذه الدراسة تحليلا للوثائق من عام 2007 إلى عام 2023. أقل من نصف الوثائق التي تم تحديدها تناولت موضوع الهجرة بشكل مباشر، مما يشير إلى عدم تحديد الأولويات في خطاب السياسات. ركز الخطاب بشكل أساسي على الجوانب السلبية المحتملة للهجرة، بما في ذلك انتشار الأمراض، والعلاقة بين الهجرة والمخاطر الأمنية، وعبء الهجرة على النظم الصحية. تقدم هذه الدراسة اقتراحات حول كيفية تعزيز المشاركة في قضايا الهجرة والصحة في ليبيا وبلدان حوض البحر المتوسط لتحقيق هدف الإدماج والإنصاف للمهاجرين وفقا للاتفاقيات والمعاهدات الدولية.

الكلمات المفتاحية:

الاحتياجات الصحية
السياسات الصحية
الهجرة غير الشرعية
حوض البحر المتوسط
ليبيا

Illegal immigration and its effects on the Libyan health systems the Mediterranean countries: Towards development of operational Afro-UERO-Mediterranean health policies for immigrants

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A B S T R A C T

Despite the greatly increased numbers of migrants and refugees worldwide in recent years, insufficient attention has been paid to addressing their health needs. While international agreements assert the right to health, in practice, migrant especially those awaiting clarification of their status, such as asylum seekers and undocumented individuals—often face challenges between service providers and humanitarian relief programmers at national and regional levels. **Methodology:** Qualitative content analysis of governmental and non-governmental documents and reports (from the health sector and other sectors) related to migration and health issues. **Results:** This study included an analysis of documents from 2007 to 2023. Less than half of the identified documents directly addressed the topic of migration, indicating a lack of prioritization in policy discourse. In these documents, language across governmental levels and sectors focused primarily on the potential negative aspects of immigration, including policies that explicitly reference health. This trend emphasized the spread of diseases across borders, the relationship between migration and security risks, and the burden of migration on health systems and other government resources. These attitudes place blame on migrant groups and largely obscure the issue of internal mobility, undermining constructive engagement needed for effective migration and health responses. This study provides evidence of successes and challenges and highlights areas requiring further effort, including policy, service design and delivery, education and training, research and communication.

Keywords:

Migrants
Refugees
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Health systems
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It also underscores the challenges of highly neglected aspects such as mental health and the importance of developing competence among health professionals and institutions working with migrants.

1. Introduction

The Mediterranean Sea has historically been a context for human mobility and migration. For thousands of years, people have travelled across its waters and come into contact with other peoples for a variety of reasons. Today, it continues to serve as a bridge between the "South" and the "North," with migratory movements towards Europe increasing in recent years [1].

Migratory pressure against European borders has grown since 2011, following major international events such as the so-called "Arab Spring," giving rise to a refugee crisis that peaked in 2015, when an estimated one million irregular migrants entered the territory of the European Union (EU) via the Mediterranean [2]. Consequently, migration has gradually emerged as a common and long-lasting challenge within the EU, becoming a top priority on the European political agenda [3].

Despite this significant increase in migrant numbers, inadequate attention has been paid to addressing their health needs. While a range of international instruments declare the right to health, in practice, migrants—particularly those awaiting clarification of their status, such as asylum seekers and undocumented individuals—frequently fall into the gaps between service providers and humanitarian relief programmes at national and regional levels.

In 2016, for the first time, the UN General Assembly hosted a High-Level Summit to address large movements of refugees and migrants, aiming to support the governance of international migration and create a more responsible and predictable response system. At this Summit, 193 Member States adopted the New York Declaration [4], which references health at several points [paragraphs 30-33, 59, 80, 83, and paragraphs 5c, 7b, and 13b of the annexed 'Comprehensive Refugee Response Framework'].

These references encourage states to: address vulnerabilities to HIV and specific healthcare needs of migrant and mobile populations; support access to HIV prevention, treatment, care, and support; combat sexual and gender-based violence; provide sexual and reproductive healthcare services; work to provide basic health, education, and psychosocial development; improve integration and inclusion, particularly regarding access to healthcare; protect the human rights of migrant children, especially unaccompanied minors; provide humanitarian assistance to refugees in key life-saving sectors such as healthcare; and develop national strategies for migrant protection within national social protection systems [1-3].

The challenge of migration cannot be viewed as a short-term problem resolvable exclusively through 'exceptional' or 'emergency' responses. The drivers of large-scale population movements are diverse, complex, and interactive. Many are likely to increase in the coming decades, including extreme weather events, shifts in weather patterns due to global warming leading to food and water shortages, loss of livelihoods, population increases, urbanization, land degradation, deforestation, and sea-level rise [4]. Additionally, violence, political oppression, human rights abuses, and the desire for better economic opportunities will continue to drive both involuntary and voluntary migration.

Therefore, it is vital to seek solutions that recognize migrants as 'part of society' and integrate them as 'structural' rather than 'external' elements within health systems. A comprehensive study on migration and health in Europe (2011) noted that the specific health needs of migrants are often poorly understood, communication between healthcare providers and migrant clients remains poor, and health systems are ill-prepared to respond effectively. The situation is compounded by migrants' difficulties in understanding their human rights, accessing basic services, and being relegated to low-paid and often dangerous jobs—with undocumented migrants facing the most acute challenges. A major reason for this lack of understanding is the lack of data [4].

Furthermore, the study found a tendency in many EU Member States to restrict undocumented migrants' access to health services to deter new entry. In 2010, nine out of 27 EU countries restricted access to the point that emergency care was unavailable. Only five countries offered access beyond emergency care, and only four (Netherlands, France, Portugal, and Spain) granted undocumented migrants the right to the same range of services as nationals, provided certain preconditions were met [5].

A series of reports from the WHO European Region's Health Evidence Network (2008–2023) summarizes evidence on various aspects of migrant health in Europe. At the 69th World Health Assembly (May 2016), Member States overwhelmingly supported a vision where 'all people have equal access to quality health services' [6]. WHO emphasizes that migrants' access to quality essential health services is paramount for rights-based health systems, global health security, and efforts to reduce health inequities [6].

However, access to health services is affected by poverty, stigma, discrimination, social exclusion, language and cultural differences, financial and administrative barriers, and lack of legal status. In May 2017, WHA Resolution 70.15 on 'Promoting the health of refugees and migrants' was adopted [7]. Given this context, it is urgent to understand the nature of migrants' health needs and the barriers to meeting them, and to learn from both successes and failures [8].

Aim of the Study: This study aims to explore how migration is framed by key government decision-makers in the Libyan health sector and to understand whether the attitudes expressed in policy documents support an inclusive, migrant-aware approach consistent with Libya's health policy commitments and goals.

2. Materials and Methods

This study adopted a quantitative document analysis methodology. Governmental and non-governmental documents and reports (from the health sector and other sectors) related to migration and health issues were analyzed. The study included documents issued between 2007 and 2023. Documents that directly or indirectly addressed migration were identified and classified, with a focus on analyzing language and discourse across different governmental levels and sectors. Key themes related to migration and health—such as disease spread, security risks, burden on health systems, and migrants' right to health—were extracted.

3. Results and Discussion

The study included an analysis of documents from 2007 to 2023. Less than half of the identified documents directly addressed migration, indicating a lack of prioritization in policy discourse. Across governmental levels and sectors, language focused primarily on the potential negative aspects of immigration, including policies that explicitly reference health. This trend emphasized the spread of diseases across borders, the relationship between migration and security risks, and the burden of migration on health systems and other government resources. These attitudes place blame on migrant groups and largely obscure the issue of internal mobility, undermining constructive engagement needed for effective migration and health responses.

These findings are consistent with previous studies indicating a tendency in many countries to restrict undocumented migrants' access to health services [4]. This contrasts with the rights-based approach emphasized by WHO, which stresses that migrant access to quality essential health services is crucial for rights-based health systems, global health security, and reducing health inequities [6].

3.1 Comparative Analysis of Healthcare Challenges in North Africa

Table 1 presents a comparative analysis of healthcare challenges in North African countries. Libya faces significant challenges, including overcrowded detention centers, high disease prevalence, and lack of medical facilities, with access to healthcare for migrants being extremely limited and largely provided by non-governmental organizations.

Table 1: Comparative Analysis of Healthcare Challenges by Country

Country	Main Healthcare Challenges	Migrant Healthcare Policies
Libya	Overcrowded detention centers, high disease prevalence, lack of medical facilities	Extremely limited, mostly provided by NGOs
Tunisia	Influx of migrants in informal camps, rising demand for emergency services	Some access to public healthcare, but financial barriers exist
Algeria	Lack of integration programs, reliance on emergency services	Limited healthcare access, undocumented migrants struggle to receive treatment
Egypt	Increased strain on urban hospitals, rising maternal health cases	Some migrant-inclusive health policies, but underfunded
Morocco	Policy restrictions on migrant healthcare, spread of communicable diseases	Strict legal barriers, minimal state healthcare support

3.2 EU Support and Policy Toward Migrants in Libya

The EU has been actively involved in Libya's migration management through financial aid, training, and diplomatic agreements. However, these efforts have been widely criticized for focusing more on preventing migration than ensuring migrant well-being, as shown in **Table 2** and **Table 3**.

Table 2: EU Support and Policy Toward Migrants in Libya

EU Support Initiative	Purpose	Effectiveness
EU Trust Fund for Africa (2015)	To address migration root causes and improve local infrastructure	Mostly ineffective due to Libya's unstable governance
Libya Coast Guard Training (2017–present)	To prevent irregular migration by intercepting boats at sea	Led to human rights abuses and unsafe migrant returns
Detention Center Funding	To support food and medical services in detention centers	Conditions remain dire, with reports of malnutrition and lack of medical care
EU Border Management Support	To assist Libya in controlling its southern border	Migrants face increased risks of abuse and violence

The European Union has allocated billions of euros to manage migration in Libya, but much of this funding has gone toward border security and detention centers rather than healthcare and humanitarian assistance. Redirecting these funds toward migrant healthcare could improve access to medical services, reduce disease outbreaks, and provide a long-term solution to the migrant health crisis in Libya [23].

The EU provides financial aid through multiple programs, including the EU Emergency Trust Fund for Africa (EUTF) and bilateral agreements with the Libyan government. However, a significant portion is used for migration control rather than healthcare. **Table 3** illustrates this allocation.

Key Issue: 80% of EU funds allocated to Libya focus on preventing migration rather than improving migrant healthcare [23].

Table 3: EU Financial Aid to Libya Through Multiple Programs

EU Program	Amount Allocated	Purpose	Impact on Migrants
EU Emergency Trust Fund for Africa (EUTF)	€455 million (2015–present)	Strengthening border security, funding detention centers, training Libyan Coast Guard	Limited health benefits; funds primarily used to prevent migration to Europe
EU-Libya Migration Agreement (2017)	€90 million	Funding detention centers and migration control	Detained migrants suffer from medical neglect, malnutrition, and disease outbreaks
EU-IOM Assisted Voluntary Return (AVR) Program	€100 million	Repatriating migrants to their home countries	Healthcare support limited to emergency check-ups before deportation
EU-UNHCR Humanitarian Aid Program	€46 million	Supporting NGOs providing healthcare and shelter	Provides some medical aid but remains underfunded compared to migration control programs

3.3 Afro-Euro-Mediterranean Collaboration and Support

Afro-Euro-Mediterranean collaboration and support, driven by political will and commitment, must ensure that plans and material and financial resources are in place to meet the immediate needs of sudden crises and provide for the ongoing needs of migrants in long-term residence facilities, including a full range of health services [23].

Key elements for international cooperation include:

- Development and implementation of standardized procedures for health assessment and care
- Strongly intersectoral approaches considering the all-round well-being of migrants and refugees, including nutrition, clean water, sanitation, shelter, transport, education, and culturally appropriate health services
- Cross-border collaboration in research, education, and training

To achieve this, policymakers should be encouraged to [24]:

- Recognize migration as a structural phenomenon of the 21st century requiring policies for ongoing migration and crises
- Understand the totality of reasons for migration
- Act in accordance with shared international responsibility, recognizing rights to health and healthcare
- Implement the New York Declaration and relevant regional instruments such as the WHO European Region's Strategy and Action Plan for Refugee and Migrant Health
- Develop and implement national policies based on equity, ensuring affordable healthcare for all, including migrants, refugees, and asylum seekers
- Accept evidence for the benefits of including migrants and refugees in mainstream societies
- Support systematic data collection and research on migrant and refugee health
- Promote intersectoral approaches and cross-border cooperation on public health and social determinants of health
- Communicate these positions to the public and media, increasing awareness of rights and responsibilities
- Demonstrate political will to translate these principles into evidence-based policies, strategies, and practices

Areas requiring focused attention and resources include:

- Developing and implementing strategies using the social determinants of health framework
- Addressing physical and mental health issues early [25]
- Providing cultural/transnational competence education and training for healthcare providers
- Ensuring culturally competent interpreters are readily available, especially for addressing mental health issues, including those of traumatized child migrants [26]

As noted by the World Economic Forum, poor health affects a migrant's ability to find employment, learn the local language, interact with public institutions, and succeed in school—all critical factors for successful integration. Refugees are particularly prone to mental health issues such as anxiety and depression following traumatic experiences. Host countries should assess mental health alongside physical health and grant humanitarian migrants' access to regular healthcare [25].

4. Conclusion

It is evident that migration has become a structural phenomenon of the twenty-first century. This necessitates that policymakers move beyond a paradigm of immobility, recognize the totality of reasons for migration, and examine the consequences for different sectors, with implications for planning, budgeting, and implementation.

In the health field, it is crucial that the needs of migrants and refugees be met within the framework of international agreements adopted by countries, recognizing the right to health of all individuals and the centrality of this principle in designing and implementing policies and programmes at global, regional, national, and local levels.

5. Recommendations

The 'agenda of solutions' presented here aims to provide a comprehensive framework bridging humanitarian, ethical, and rights-based imperatives for action. It stresses the need for [27-39]:

- Framing migration as a normal and constructive response to local realities—i.e., as an adaptation strategy
- Intensified international collaboration and support to address both immediate and long-term health needs of migrants
- Policies based on the right to health, equity, and social justice, recognizing the benefits of including migrants in mainstream societies, including entitlement to the full range of health services accessible to the general population
- Utilizing the social determinants of health framework to identify needs and devise solutions
- Dealing with physical and mental health issues early
- Developing cultural/transnational competence among health professionals, institutions, and agencies working with migrants and refugees
- Ensuring the availability of culturally competent interpreters
- Developing a communications approach oriented to migrant welfare, health, and well-being, including migrants' own voices
- Expanding education and training for health professionals working with migrants, and for migrants who are health professionals, to enable them to work in their fields of expertise
- Supporting prioritized research agendas comprehensively addressing migrant and refugee health across physical and mental health within a broad social determinants framework
- Encouraging academics to speak out on facts, interpretations, policies, and practices to promote migrant and refugee health
- Encouraging national academies and professional associations to play active roles at national, regional, and global levels
- Promoting a twin-track approach that addresses the root causes of displacement while managing the safety, welfare, and health of those displac

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