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PROMOVAX is a 3-year EU-funded project (2010-2013) aiming to promote immunizations among migrant populations in Europe. The project's activities are concluded this month and this issue represents the last newsletter for the Promovax project. In this issue we aim to provide you with an overview of Promovax projects' outline and results.



PROMOVAX project outline

The project was organized in 6 work-packages (WPs) with a total duration of 3 years. The main partner (PROLEPSIS, Greece) coordinated the operational framework and dissemination of results. Three vertical WPs: "Mapping of EU migrant origin and access to immunizations" (CII - CUT, Cyprus), "Identification, evaluation and exchange of the existing best practices in migrant immunizations" (UP, Hungary) and "Development of health provider toolkits and educational material for migrants" (Prolepsis, Greece) composed the technical base. The project was evaluated during a dedicated WP (SINTEF, Norway).

The project targeted documented **working migrants**, **health care workers** and **other care givers providing for migrants** in the European countries as well as **policy makers** and **stakeholders** in an effort to promote immunizations among migrant populations in Europe.

1. Migrant immunization needs and access to vaccinations

The burden of vaccine preventable diseases in migrant populations in US is unclear due to lack of surveillance systems that record migration status. Most of the partner countries have neither specific legislation on migrant immunizations nor specific immunization requirements for working migrants. No national body is commonly assigned with the responsibility of monitoring and administering immunizations to migrants in particular.

2. Index of Migrant Immunizations Best Practice

Migrant immunization practices were identified in the participating EU countries as well as in traditional migration countries such as the US, Australia and were evaluated according to the 'Migrant Vaccination Best Practice Evaluation Tool', during the 5th work package of the PROMOVAX project. The index of best practices is available in the project's website

(http://www.promovax.eu/index.php/promovax/vaccination/).

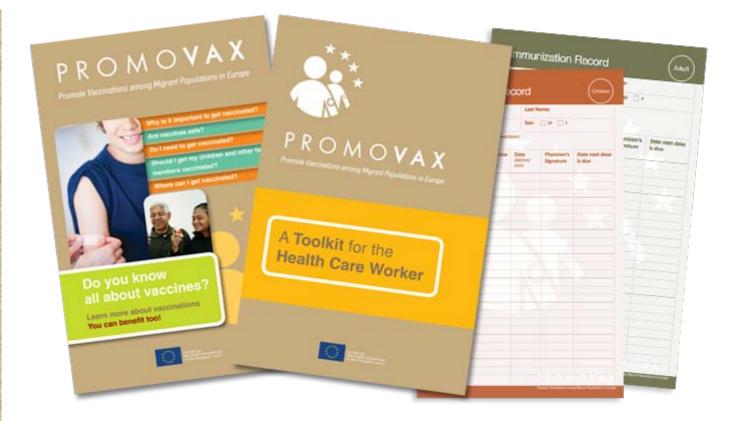
3. Recommendations on Migrant Immunizations

Based on the identified best practices as well as the immunization needs assessment performed during the 4th work package, "mapping of EU migrant origin and access to immunizations", recommendations on migrant immunizations were developed. You can find below a short overview of the recommendation document (http://www.promovax.eu/pdfs/Recommendation.pdf).

- An effective migrant immunization program should be a continuous and sustainable one and it also should take into account the **availability of the target group** (e.g. Immunization clinics with flexible opening hours, or services that are available in the afternoon or in the evening).
- **The language barrier** impedes utilization of health services. The language barrier could be addressed by the use of interpreters. A fee for the use of the interpreter should be discouraged. Additionally, when possible it is very helpful to have health personnel and doctors speaking the language of the minority group, especially in areas where the knowledge of the national language is limited.
- Immunization programs should take **cultural diversity** into account and use cultural mediator in order to overcome this barrier. The role of the cultural mediator extends beyond translation. In successful migrant immunization practices, cultural mediators are trained in order to act as educators, health promoters, and health care system navigators for the migrant families
- **Cost** can be a major barrier to effective vaccination programs. In order to improve access to immunizations, vaccines should be provided for free for the migrants. Successful immunization initiatives have secured funding for multiple resources.
- A well-prepared program should provide vaccinations that will take into consideration the **individual characteristics** of each migrant.
- Successful immunization practices are **monitored and evaluated** at the central and regional levels in terms of the quality of activities and outcomes (output indicators, both for quantitative and qualitative aspects)
- **Data collection** and research concerning migrants' health and socioeconomic status are essential to create a more detailed and realistic feedback on the situation of the target group
- Usage of registry and immunization record card are recommended in order to facilitate the further evaluation of the results and are essential for creating a consistent migrant health data base.

4. Immunization educational material for migrants and the toolkits for health care workers

PROMOVAX educational materials were produced with the input of all associated and collaborating partners as well as representatives of the projects' target groups (http://www.promovax.eu/index.php/promovax/toolkits/too0).



► The Migrant Educational Material was translated into 11 selected migrant spoken languages:

- Albanian
- Arabic
- Bosnian
- Bulgarian
- Chinese
- Nepali
- Polish
- Romanian
- Russian
- Somali
- Ukrainian

► The Health Care Worker Toolkit was translated into the 7 consortium languages:

- Croatian
- German
- Greek
- Hungarian
- Italian
- Norwegian
- Polish

The immunization educational material for migrants and the toolkit for health care workers are available through the projects' website in the following link: http://www.promovax.eu/index.php/promovax/toolkits/too0



PROMOVAX

PROMOVAX Meetings

15-16.04.2013:

5th Partners Meeting

The 5th and last Partners meeting of the PROMOVAX group took place in Rome, Italy.

PROMOVAX News

21.05 2013: Promovax Project end

April - May 2013:

National workshops are being organized in all partner countries with the participation of stakeholders, policy makers, migrant representatives, and NGOs providing migrant care. The workshops focus on the presentation of the main project outputs and the active exchange of ideas for their further development with national stakeholders.

PROMOVAX Partnership

The PROMOVAX partnership comprises of **11** Associated Partners from 8 countries and **12** Collaborating Partners from **11** countries.

Main Partner:

• Institute of Preventive Medicine, Environmental and Occupational Health, Prolepsis – *Greece*

Associated Partners:

- Technische Universität Dresden Germany
- Universitá degli Studi di Sassari Italy
- The SINTEF Foundation *Norway*
- Nofer institute of Occupational Medicine *Poland*
- University of Zagreb, Medical School Croatia
- RUBSI Research Unit in Behaviour and Social Issues *Cyprus*
- University of Pécs Hungary
- Universitá degli Studi di Milano Italy
- Istituto Superiore di Sanitá Italy
- Cyprus University of Technology Cyprus



Collaborating Partners:

- Public Health Institute Albania
- Baskent University Turkey
- Hospital de Sabadell. Consorci Hospitalarai Parc
- Tauli'. Universitat Autonoma de Barcelona Spain
- Institute of Occupational Health Serbia
- WHO/Europe Occupational Health *Germany*
- WHO/Europe Communicable Disease Units Denmark
- Alpert Medical School of Brown University USA
- International Organization for Migration (IOM), Migration Health Division (MHD) – *Belgium*
- Institute of Epidemiology, Preventive Medicine and Public Health – *Greece*
- National School of Health. Instituto de Salud Carlos III. Ministry of Science and Innovation – Spain
- European Center for Disease Prevention and Control (ECDC) *Sweden*
- National Centre of Infectious and Parasitic Diseases (NCIPD) *Bulgaria*



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For more information on the project please visit the website: www.promovax.eu or contact the Project Management Team: Eleni Patrozou M.D., e.patrozou@prolepsis.gr or Dina Zota MSc, d.zota@prolepsis.gr