Facts Beyond Figures

Conclusions: Future of Migrant and Ethnic Minority Research in Europe

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Migrant and ethnic minority health: Challenging field of research

1. Health
2. Migration and ethnicity
3. Management, organization
4. Policies
Early stage of research - descriptive

- Qualitative research
  - Development of categories and concepts
  - Classification
  - Systematizing

- Quantitative research
  - Describing patterns
  - Generating hypothesis

Examples:
- Botanics
- Social and ethnic disparities in health: “Rather rich and healthy than poor and sick”

Analytic research

Qualitative
- Understanding

Quantitative
- Finding associations and causal networks

Need for theory and models!!
Ethnicity

“Ethnicity is the social group a person belongs to, and either identifies with or is identified with by others, as a result of a mix of cultural and other factors including language, diet, religion, ancestry, and physical features traditionally associated with race”


Definition of migration

“The movement of a person or a group of persons from one geographical unit to another for temporary or permanent settlement”

“A social process of change, where an individual moves from one cultural context to another for temporary or permanent settlement”
Whom are we talking about?

1) **Family migrants**
   (family reunification with close relatives)

2) **Humanitarian migrants**
   (refugees and other persons in need of international protection)

3) **Labour/student migrants**

4) **Irregular migrants**


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The Life Course Perspective

**In a multidisciplinary and situational perspective!**

- Migration process
- Generational
- Age
- Institutional setting
Upstream or down stream focus?
Migrants and ethnic minorities: a problem or a benefit to society?

- Aging societies – low reproduction

- Minorities doing better – illustrate problems among majorities and mechanisms behind health and disease
  - Smoking, mortality, survival, risk factors

- How to obtain better health services
  - Communication (intercultural mediation)
  - Spiritual services
  - Professional competencies (inclusive)
  - Community/user participation

- Migration – a natural experiment!

Labour migrants, forced migrants and asylum seekers 1949-1996

Figure 4. Labour migrants, forced migrants and asylum seekers 1949-1996.

Source: De Geer 2001
Figure 8. Europe 1949-1996. Economic migrants and asylum-seekers.

Source: De Geer 2001

Development of large national cohorts of migrants
Experimental research - interventions

Perspectives
- Groups
- Populations
- Programmes
- Organisations

Designs
- Natural experiments
- Controlled studies
  - Non-randomized
  - Randomized

Multidisciplinarity required

- Medicine
- Epidemiology
- Social sciences
- Humanities

Not only additional – but truely integrated!
Triangulation of information sources

International research requested

- Identifying optimal reference groups
  - Chinese in France
  - Ghanesians in Ghana

- Transborder health care
  - Returning migrants (Salamon effect)
  - Medical tourism

- EU policy support
  - Comparative data development (MEHO)
  - Health need assessments
  - Quality of Care (EUGATE)
  - Adapting research into practice (ADAPT)
Major themes across disciplines, policies and services

- Inclusive or separate services (i.e. institutions and programs for the ageing migrants)

- Ensuring participation of migrants and minorities (studies, programs, policy making)

- Global research in a globalized world

- Barriers for integration
  - Health promoting integration
  - Integration promoting health
What do we need to achieve?

- Development of theories, concepts and common measures
- Disentangling determinants and understanding causal processes
- Developing effective and acceptable interventions (prevention and care)
  - User perspectives, Quality, Organisation, Cost-effectiveness
- Creating evidence for policy decisions (priorities):
  - Locally
  - Regionally
  - National
  - International
- Ensuring a stable research base

Facts beyond Figures?
Thank you!