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Features of public healthcare services provided to migrant patients in the Eastern Macedonia and Thrace Region (Greece)



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ABSTRACT

Background: The influx of migrants, refugees and asylum-seekers into European Union (EU) countries, especially into Greece, in the last 20 years is an issue of growing concern and requires a rational approach. The aim of this study is to chart the use of public health services by the migrants of the Eastern Macedonia and Thrace Region, which forms the northeastern border of Greece.

Methods: We collected data from five of the six public hospitals in the specified region, and we carried out a per clinic cross tabulation analysis of admission diagnosis and citizenship variables in order to establish the frequency at which the various diagnoses emerge per distinct group of migrant and non-migrant patients in each clinic. The main limitation of the study was the lack of age-standardised data. An additional analysis of frequencies per clinic focusing on migrant patients yielded hospitalisation frequencies per country of origin. We also performed a *t*-test to compare the average length of stay per clinic between the two groups. Finally, we utilised our available data to map the insurance status of migrant patients.

Results: The results have indicated that the hospitalisation rate of migrant patients due to chronic medical conditions is statistically significantly lower compared to non-migrant patients, while the opposite is true when looking at accident-related diagnoses, certain infectious diseases and medical conditions pertaining to depression and alcohol abuse. The comparisons of the average length of stay showed no overall differences between migrants and non-migrants. Only 2.04% of the migrant patients were uninsured.

Conclusions: One of the key issues raised by the influx of migrants settling in host countries is concerned with health policy. The knowledge afforded by the medical parameters that characterise the provision of healthcare to them and the findings of relevant studies can lead to a more efficient identification of health risk factors and more effective prevention and treatment. This knowledge also constitutes a particularly crucial and useful tool to

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help authorities shape their healthcare policies and modify national health systems, which are currently based on the size and characteristics of indigenous populations, to take into account the different conditions with regard to both the number of patients treated and the epidemiological characteristics of the migrants. A greater appreciation of the particular current and potential roles of non-governmental organisations (NGOs) can help to provide appropriate healthcare services to migrants, refugees and asylum-seekers, especially when these groups are excluded from the public health system.

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1. Introduction

Over the last few decades, migration has emerged as a major issue all over Europe. Changing geopolitical conditions, wars, unemployment and poverty have all prompted large population groups from countries troubled by these phenomena to seek a better life in the developed countries of Europe. The geographical location of Greece, in conjunction with the fact that conflicts have broken out in the wider geographical area in recent decades, has made Greece an attractive destination for refugees and asylum-seekers. The influx of refugees in recent years consists mainly of people who have been driven out of their homes, people who have been persecuted on political grounds and people at risk in third world countries (e.g., Syrians, Afghans and Iraqis).

According to the 2001 census of the Hellenic Statistical Authority (ELSTAT), there were 797,091 immigrants in a resident population of 10,964,020 people, accounting for 7.27% of the total resident population. The most recent ELSTAT data from the 2011 census show an increase in the immigrant population. In a total resident population of 10,816,286, there were 912,000 immigrants, which is 8.43% of the total resident population. In both censuses, there is no report on the number of undocumented immigrants; this actual number can only be estimated by conjecture. Lianos et al. [1] estimate the total number to be 172,250–209,402 people.

Therefore, Greece has to deal with a pressing issue. The migrant population has created changes in the demand for healthcare services because it makes up an additional “body of consumers” with different epidemiological characteristics that must be taken into consideration by the domestic health system. It is necessary to formulate a comprehensive healthcare policy that will address migrants and aim to provide them with an adequate level of healthcare.

This issue becomes more pronounced when the host country is in the middle of an economic crisis, as Greece is today. The economy faced a structural crisis in 2010, characterised by a large fiscal deficit, a huge public debt and the continuous erosion of the country's competitive position in the global economy. This crisis has been particularly noticeable in the sensitive sector of public healthcare, which had already amassed a number of underlying structural problems before the crisis [2]. One of the most important consequences of this crisis is the increased risk for the health of the population, especially of the vulnerable groups that include migrants. The causes of the increased risk are related to the minimisation of preventive actions

and the difficulty or delay in accessibility to health services [3,4]. This fact makes the formulation of a national health policy even more essential, as this policy incorporates the systematic recording of the epidemiological characteristics of clearly targeted population groups, their lifestyle and risk factors. Such a health policy must also ensure easy and swift access to health services by removing language, religious and social barriers. This study attempts to document how the immigrants of the Eastern Macedonia and Thrace Region use public health services. This region is located in the northeastern corner of Greece, and it was chosen because it is one of the main land gateways to the country.

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1.1. The Study

The Eastern Macedonia and Thrace Region consists of the following five regional districts: Drama, Evros, Kavala, Xanthi and Rodopi. According to the ELSTAT data from the 2011 census, there were 21,956 migrants in a resident population totalling 608,182 people (i.e., 3.61% of the registered population of the region or 2.41% of the total number of migrants living in Greece). The corresponding figures, according to the previous census of 2001, reported a total population of 507,092 with 14,728 migrants (2.90%). That number accounted for 1.85% of the then total number of migrants residing in Greece. According to the 2011 census, the largest portion of those migrants were of Albanian origin (40.8%), followed by migrants from Bulgaria (23.4%), Georgia (5.0%), Armenia (4.5%), Germany (3.1%) and Russia (3.1%). The remaining 20% was the aggregate percentage of migrants from other countries from all five continents. The number of undocumented migrants in the region concerned is also unknown; however, if we take into consideration the findings of the research conducted by Lianos et al. [1] in conjunction with the percentage of legal immigrants based on the censuses, we can estimate that number to be within the 3500–4000 range. In conclusion, the percentage of migrants in relation to the total population of the Eastern Macedonia and Thrace Region varies between 3% and 4%. As can be seen, this region is not one of the regions (e.g., Athens and Thessaloniki) that has attracted a large volume of migrants due to greater opportunities and potential job prospects.

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