

## Author biography

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Felicity Thomas (ed.), *Handbook of Migration and Health*, Cheltenham and Northampton: Edward Elgar Publishing, 2016, 544 pages, ISBN 978-1-78471-477-2.

**Reviewed by:** Constanze Janda, *German University of Administrative Sciences Speyer, Germany*  
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Since the so-called ‘refugee crisis’ with its enormous increase in the number of persons seeking asylum in EU Member States in 2015, migration law has left its niche and gained broader attention in the scientific community and brought about a wide range of new literature on many aspects of migration. Felicity Thomas’ *Handbook on Migration and Health* deserves special attention since it does not focus on refugees but covers a broad range of migration issues from forced migration to labour migration, affecting all age groups from children to the elderly, as well as different health issues ranging from mental health and occupational health to disabilities and chronic illnesses. The aim of the book is not only to give an overview on current debates about migration and health, but also to provide a counterbalance against the politically motivated cutback of migrants’ rights, especially in Europe.

The right to life and physical integrity is a human right. Its implementation not only requires that states abolish torture and refrain from violating the physical integrity of persons. It goes beyond a mere negative right in that states must ensure access to health care, which constitutes the positive dimension of this right. Legal rules on equal access to health care for migrants are well-established in the national law of most countries. However, the effective use of those rights is often hindered by many factors. The anthology approaches these barriers from an interdisciplinary perspective.

The book is structured in seven parts and consists of 27 chapters. The short introduction (I) is followed by a more general review of the ‘Theories and Models of Migration’ (II); the issues of ‘Rights and Deservingness’ (III); ‘Vulnerability and Precariousness’ (IV) and ‘Specific Healthcare Needs and Priorities’ (V) are intensively discussed, before the authors address ‘Specific Cases of Healthcare Provision’ (VI). The book concludes with a chapter reflecting on the role of ‘Transnational and Diasporic Networks’ (VII).

In her introduction, Felicity Thomas reflects on the interrelationship of migration and health and paints a multifaceted picture of migration as a determinant of health and well-being and, at the same time, health issues as a reason for migration. She states that migration policy and health policy are often inconsistent, limited to the national level and often focussing on partial aspects only. The perception of migration as a threat to security and – based on that – restrictive policies towards immigrants lead to a considerable worsening of their living conditions, to social isolation and discrimination, which may, in return, negatively affect their health status.

The section on 'Theories and Models of Migration' adopts an empirical approach. The various contributions examine how individual health conditions might determine the decision to opt for migrating as well as to return to one's country of origin. Healthier people tend to migrate more often than the unhealthy (this is the 'Healthy Migrant Effect') and usually have a better socio-economic status after migration; the decision to return to one's country of origin is often connected to the emergence of health issues. The authors present research on how migration itself influences health, e.g. through stress or risky behaviour or – positively – through a generally better living standard in the receiving country. Interestingly, health risks tend to persist between the generations following the migrant, which might either be caused by genetic, cultural or behavioural reasons or by the socioeconomic situation of the migrant family. The chapter also reflects on the well-being of those family members who are 'left behind', e.g. by remittances sent to the family, which might increase their socio-economic status but might also have adverse effects on, among other matters, the emotional situation of children or elderly parents.

The next chapter on 'Rights and Deservingness' starts with an interesting case study on the deservingness of an 'illegal migrant' who needs an organ transplant. Deservingness can be conceptualised according to diverse criteria such as health behaviour, the motives for migration (forced *vs.* 'economic'), criminal record, family status, economic performance, disabilities or sexual orientation. Given the fact that health care is usually part of the welfare system, this is also related to the question of who should be given access to health care: Should benefits be limited to citizens? Another contribution discusses this question for children as a specific group, again with several case studies showing the interrelationship between rejected asylum seekers and limited access to health care. Where legislation is restrictive, medical professionals see themselves as forced to break their moral and ethical standards. Furthermore, the issue of health workers' migration is addressed – reasons for shortages and recruitment of these workers by the rich nations leading to a 'brain drain' and a 'care drain' in the poorer countries of origin, calling for ethical rules for the recruitment of health workers.

Under the theme 'Vulnerability and Precariousness', several contributions deal with survival migration, which can be defined as persons fleeing to another state for reasons of survival, e.g. because they are threatened by war, environmental disasters or economic violence in their country of origin. It examines health risks during the flight as such, which is often perilous, as well as in camps or in detention. Thus, one can conclude that forced migration is both a cause and a consequence of a precarious health status. Other issues that are discussed in this chapter are the health status of unaccompanied minors, of persons who are victims of human trafficking, climate refugees and migrant workers – the latter not only reflecting causes of health issues but also their access to occupational health services which varies according to the work that is performed.

The section on 'Specific Healthcare Needs and Priorities' examines the situation of migrants with disabilities or chronic diseases including HIV, and the prevalence of other infectious diseases among migrants. The first contribution focusses on the impact of the UN Convention of the Rights of Persons with Disabilities (UNCRPD), which has been ratified in many countries. However, migrants still face exclusion from health and care support due to structural barriers. One reason for this might be that this special group of migrants is often not even perceived as a vulnerable group by policymakers because they simply overlook them. The situation of the mentally ill is often determined by trauma and stress experiences before and during their flight. Their situation largely depends on the opportunity to join communities and networks where they experience support and solidarity.

The next chapter is devoted to the provision of care and medical treatment in refugee camps, flanked by the observation that living under such circumstances may pose a threat to health due to contagious diseases, insufficient nutrition, violence including sexual and gender-based violence, and limited access to maternal care or to emergency provisions. Access to health care for retired migrants is also examined, referring to EU citizens who make use of their right to free movement after retiring, by moving to the south without, however, being integrated into the society of their residence country. Their access to health and care is hindered due to language barriers – interpreter costs are usually not borne by health insurance – and cultural differences, e.g. in Spain, family members are expected to do the washing, bathing and feeding of hospital patients, whereas these are tasks of the nurses in other countries. This might also induce retired migrants to return to their country of origin when their state of health worsens. Other chapters refer to the engagement of young migrants with health services and sexual and reproductive health care, coming to the same conclusion that language and culture may hinder the use of medical services. As a result, increased attention to intercultural competence and mediation in the health professions is demanded.

The last part of the book deals with ‘Transnational and Diasporic Networks’. It broaches, among other matters, the issue of care networks in transnational families, who are faced with the difficult task of organising care and providing mutual support across long distances for both forced and voluntary migration. This contribution touches upon the importance of new media and the portability of care, which is secured for EU citizens through the Coordination Regulation – an issue that is, however, not dealt with. Other groups of migrants often use informal arrangements and find individual solutions that vary from family to family. It would be a task for social policy to secure access to information on formal care services and statutory benefits related to it.

This short summary shows that the handbook covers a broad range of themes, case studies and scientific analyses. The cases are well-chosen, not representing stereotypes or random choice. The issues it addresses reflect typical situations where the concerns of migration law collide with the aims of public health. Generalising, one can state that, in Europe, migration policy follows an approach of internal security and immigration is regarded as a potential threat to public safety. Health policy, on the other hand, should be oriented towards universal access so as to grant a decent medical status for all inhabitants, irrespective of their legal status. It becomes clear that tailored solutions must be found for each specific case. Hence, policy needs to develop models that take the different needs and expectations and the situation of the migrant into account, since health issues are determined by migration, but also by other factors like gender, age or socioeconomic status and solidarity of the receiving state’s society.

The 58 (!) contributors from all continents cover different disciplines, ranging from sociology, economics, anthropology, medicine and health studies to social policy and development studies. This unique mixture allows for some very interesting insights, since these disciplines do not usually interact in a scientific context. Apparently, no lawyers have contributed, which attracts criticism from this reviewer. Many obstacles for accessing health and care services may not only stem from the socioeconomic and personal situation of migrants, but also from the legal framework, especially from the rules laid down in social security law. It would have been interesting to reflect on the portability of acquired rights and benefits and the options for broadening the mechanisms of social security coordination on a wider, if not worldwide, basis in order to overcome the restriction of welfare to citizens or long-term residents.

Nevertheless, the *Handbook of Migration and Health* offers a comprehensive and in-depth study of a broad range of health issues. It sheds light on a specific topic that deserves more

attention and certainly has not been reflected upon adequately during the ‘refugee crisis’. Thus, it is to be highly recommended not only for researchers but also for practitioners and policymakers.

**Author biography**

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