



Project Title: HE.RE.: “Health and Return of illegal residents: best practice for basic requirements in the provision of health care to returnees (voluntary and forced), with a particular focus on vulnerable groups (women, children and disabled persons) prior to departure.

Project Reference: Grant Agreement N° JLS/2006/Return/028

MAPPING EXPERIENCES IN EUROPE RELATED TO THE PROVISION OF HEALTHCARE TO RETURNEES¹

CONTEXT

In the framework of the project “*Health and Return of illegal residents: best practice for basic requirements in the provision of health care to returnees (voluntary and forced), with a particular focus on vulnerable groups (women, children and disabled persons) prior to departure*”, and during the kick off meeting held in Verona, 21-22 January 2008, it was agreed to design an ad hoc questionnaire, for mapping experiences in Europe on the provision of healthcare to returnees.

BACKGROUND INFORMATION

- On 17 April 2007 the European Commission awarded a **Grant Agreement Contract (Ref: Grant Agreement Number – JLS/2006/Return/028)** “Health and return of illegal residents: best practice for basic requirements in the provision of health care to returnees (voluntary and forced), with a particular focus on vulnerable groups (women, children and disabled persons) prior to departure” to Ulss 20 Verona and a group of leading European partners.
- The **specific objective** of the project is to identify Best Practices in the Member States in the provision of health care for returnees, with a particular focus on vulnerable groups (women, children and disabled persons), prior to departure from country of illegal residence.
- One of the activities foreseen by the project is to carry out a **mapping exercise of experiences in Member States and third countries** (e.g. pilot projects) and documents (e.g. protocols) with relation to the provision of healthcare to returnees.

PURPOSE OF THE MAPPING EXERCISE:

1. To collect individual experiences at all levels (local, regional and national) on practices relating to the provision of healthcare to returnees.
2. To consolidate information in an easily consultable inventory to be uploaded on a future website (URL TBD) for consultation.
3. To provide a resource tool for key stakeholders operating in the field of illegal immigration and return.

¹ A returnee is a person who undergoes the process of return, defined as follows: “The process of going back to one’s country of origin, transit or another third country, including preparation and implementation. The return may be voluntary or enforced.” (Ref: Communication from the Commission to the Council and the European Parliament on a Community Return Policy on Illegal Residents) COM(2002) 564 final

INSTRUCTIONS

- The present questionnaire serves to collect information about experiences in Europe related to the provision of healthcare to returnees, in order to come up with a comprehensive mapping.
- The questionnaire is self-administered and Ulss 20 Verona is responsible for the supervision and distribution to appropriate parties/participants.
- The questionnaire should be completed according to the notes provided below and one questionnaire format should be used for each documented individual experience.
- Each questionnaire has a box in the upper right that needs to be filled out by participants with the following information: country where the experience occurred and questionnaire number (e.g. questionnaire 01, 02, etc.). Please see example below:

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- Feel free to distribute this questionnaire to other individuals and institutions that you believe would be interested in participating either in this survey or in the network (or both)
- Please note that all participants need to provide their signature and the date signed on the last page of the questionnaire
- Completed questionnaires need to be submitted electronically (Times New Roman 12 preferred font) via email to here@ulss20.verona.it **and** the originals (with signatures) mailed to the following address:

Azienda Ulss 20 Verona
Ufficio Rapporti Internazionali
via Valverde n.42, 37122 Verona
Italia.

- For further clarifications please contact Cristina Benedetti at the following e-mail address: cbenedetti@ulss20.verona.it or telephone number: 0039 0458076040.

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**QUESTIONNAIRE
FOR MAPPING EXPERIENCES IN EUROPE RELATED TO THE PROVISION OF
HEALTHCARE TO RETURNEES**

GENERAL QUESTIONS

1	NAME OF THE IMPLEMENTING ORGANISATION (Institution/Individual) (1)	NGO PRAKSIS, “PROGRAMS OF DEVELOPMENT, SUPPORT AND MEDICAL COOPERATION”
	CONTACT PERSON (2)	ANTYPAS TZANETOS, PRESIDENT OF BOARD
2	ADDRESS (Please provide main address details)	57 STOURNARY Str, 10432 ATHENS
3	WEBSITE OF INSTITUTION/INDIVIDUAL	www.praksis.gr
4	TYPE OF INSTITUTION (please tick most relevant, multiple entries permitted)	<input type="checkbox"/> Academic Institution <input type="checkbox"/> Research Centre/Think Tank/ Policy Institution <input type="checkbox"/> Governmental Organisation <input type="checkbox"/> Inter-Governmental Organisation <input checked="" type="checkbox"/> Non-Governmental Organisation <input type="checkbox"/> Other (please specify)
5	GEOGRAPHIC COVERAGE OF INSTITUTION OR INDIVIDUAL	<input type="checkbox"/> Global <input type="checkbox"/> Asia <input type="checkbox"/> Middle East and North Africa <input type="checkbox"/> Sub-Saharan Africa <input type="checkbox"/> Americas <input type="checkbox"/> Europe <input checked="" type="checkbox"/> Specific countries: Greece

QUESTIONS RELATING TO A SPECIFIC ACTION

6	ACTIVITIES RELATED TO HEALTH and RETURN: <ul style="list-style-type: none"> - Is the issue of health and return (forced and voluntary) an issue for your organization/government/institution” ? - Is there legislation in your country which lays down the procedures for returning illegal residents to their country of origin and if yes, is there any reference to healthcare in such legislation? - Did you experience problems with health related issues when returning 	<p>-Yes, a significant number of our organization’s beneficiaries visit our programs for medical advice. At the same time, we provide health care for returnees, with a particular focus on vulnerable groups (women, children and disabled persons), prior to departure from country of illegal residence.</p> <p>- There is specific legislation referring to home-coming for illegal residents. This information is included in the instruction 2004/83/EK of the article 19, charter 5 «Protection from repatriation and expulsion» as well as to instruction 2005/85/EK of the article 25, section II charter 3 «Cases of unacceptable petitions», but there is no reference to healthcare in such legislation.</p> <p>- According to our experience, there are no significant problems with health related issues when</p>
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	<p>third country nationals? If yes, which are the most striking ones?</p> <p>- Which countries of return are in this respect the most problematic and why?</p>	<p>returning third country nationals. In some cases that a third country national faced a health problem which would be difficult to deal with in his country of origin, we followed the procedure of asking for a stay permit due to humanitarian purposes.</p> <p>- In general, Middle Asia countries face the most problematic circumstances of return, due to the specific economical, political and social conditions (wars, civil wars, terrorism, poverty etc).</p>
7	TYPE OF ACTION (3)	<p>PRAKSIS's main target is the creation, application and implementation of social and medical act programs. Those benefited from PRAKSIS's activities are Greek indigents, economic immigrants, asylum seekers/refugees and every socially excluded group, such as drug-addicts, gypsies, trafficking victims, homeless, ex-prisoners, street children and fellow human beings with little or no access to health services, psychosocial and legal support. PRAKSIS programs include providing medical/ pharmaceutical care, psychological and law support in new-comers seeking asylum, refugees and immigrants, people moving back, street children, ex-prisoners and other socially excluded groups.</p>
8	NAME OF PARTNER ORGANISATIONS INVOLVED (4)	-
9	RESOURCES (5)	<p>PRAKSIS's usual sources of finance are those of private, corporate and institutional funds. With regards to the Institutional Funding, we refer to co-financed funding lines, either directly by E.U. (e.g. DAPHNE II), or by EU and competent Greek Ministries (e.g. EQUAL Initiative, European Refugee Fund). As far the corporate funding is concerned, part of its annual financial needs is covered by enterprises that are active in terms of its Corporate Social Responsibility policy and at the same time comply with PRAKSIS' ethics and values.</p>
10	INITIATION (6)	The action was due to the initiative of the implementing organisation.
11	DATE AND DURATION (7)	10/2004- today
12	DESCRIPTION OF THE ACTION (8)	<p>PRAKSIS's main activities / programs are the followings:</p> <p>-Athens and Thessalonica Polyclinics programs (2 programs: Athens -Thessalonica): in the polyclinics two fully equipped programs provide General Surgery, Gynecological – obstetric services, Pharmacy and Dentist.</p> <p>-Public Health (P.H.) programs (2 programs: Athens –Thessalonica): main objective of P.H. programs is to record the living conditions and to</p>

		<p>raise awareness on health education issues (action and health counseling) of those served in polyclinics, as well as of the general immigrant population within the boundaries of Attica and Thessalonica.</p> <p>-Legal Information Centre (2 programs: Athens - Thessalonica) The program provides legal advice on ways to ensure a residence permit on humanitarian grounds to individuals with a disability or life-threatening diseases and to those who suffer from curable infectious diseases.</p> <p>-Next door Children (1 program: Thessaloniki): In a purposely created space children forced by their family or third parties to work or panhandle are offered daily accommodation. Specially trained volunteers offer psychosocial, medical, educational and recreational services while focusing on the reintegration of children and their families. Moreover, one of the program objectives is to get the State involved in order to prevent and eradicate the phenomenon of child labor.</p> <p>-Post Release Centre (2 programs: Athens -Thessalonica)The program concerns the rehabilitation of ex-prisoners (men and women) by offering psychological and social support, legal information and advice, medical/ pharmaceutical care.</p> <p>- Labour Offices (2 programs : Athens and Thessalonica): with main target the promotion to labour market of social excluded groups.</p>
13	KEY PROBLEMS/CHALLENGES/ CONSTRAINTS (9)	<ul style="list-style-type: none"> - Language barriers that lead up to the limited information and knowledge of the third country nationals in Greece about their rights and obligations according the law. What is more, language problems are responsible for the limited access of the third country nationals to public services. - Bureaucracy that leads up to slow and not immediate satisfaction of the needs of the target group by the public services. - The services applied by the public organizations and/ or bodies have significant time delays, a problem that develops dissatisfaction within the target group. - Civil servants (at hospitals and public authorities and organizations in general) lack on knowledge about the legal context concerning the refugees or immigrants in Greece and about legal or administrative procedures concerning the third country nationals. - Limited sensitisation and information of the public opinion about migration issues that causes phenomena of xenophobia and/or racism among the general population.
14	REFERENCE DOCUMENTS (10)	-

Notes

- (1) Please indicate the name of the implementing organisation.
- (2) Please indicate the name and contact information of the contact person for the action.
- (3) Please indicate the type of action (individual experience) that has been undertaken (e.g. information campaign, mediation, accompanying of returnees).
- (4) Please indicate the name of partner organisations involved and specific nature of the partnership – if appropriate.

- (5) Please indicate the source of funding of the action.
- (6) Please indicate whether the action was due to the initiative of the implementing organisation or whether another organisation (e.g. Government) was the initiating party.
- (7) Please indicate commencement date and duration of the action.
- (8) Please describe the type of action that has been undertaken. (max.250 words)
- (9) Please list problems/challenges/constraints associated with the action.
- (10) Please list and provide (if possible) any relevant reference/resource documents.

Signature

Date

According to the Italian law 196/2003 and EC regulation Directive 95/46/EC, I freely give my consent to Ulss 20 Verona, as the entrusted organisation for the treatment of personal/institutional data, to use any information provided only for those purposes strictly connected with activities of the mapping exercise within the legislative, statutory and contractual provisions of both the Italian and the EC framework.

Signature

Date