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Access to health care for asylum seekers and refugees in Hamburg

Health service responses for refugees and asylum-seekers are heterogeneous in Germany and vary within and between federal states. No consistent guidelines or regulations exist regarding the operational aspects of health care provision except for the health entry examination as a public health measure according to § 62 of the Asylgesetz.

Under the Asylbewerberleistungsgesetz asylum-seekers are entitled to health care services for acute and painful conditions, vaccinations, preventive care like check-up examinations for children and maternity care during the first 15 months of their stay. Access to further services may be granted upon request on a case-by-case basis.

In 2015 different concepts and solutions emerged due to the local challenges faced with the rapidly rising numbers of refugees coming to Germany. The city state of Hamburg received more than 60.000 refugees till the end of 2015 and about 15.000 in 2016. About 32.000 refugees are actually living in reception centers and living quarters.

Within this critical situation the routine health care services collapsed and adequate provision of health care was difficult. Thus, the local health authority organized and coordinated the provision of basic medical care within the reception centers. Within three months the public health service of the district Altona contracted general practitioners and pediatricians as employees to provide care in more than 30 reception centers across the city. A coverage of one physician and one nurse per 1,000 asylum-seekers in each facility could be achieved. Furthermore health care facilities were established with a standardised infrastructure. Every consultation room has been equipped with medication based on an essential drug list. Interpreter services were available during consultation hours. Primary care physicians and

pediatricians treat acute needs and make referrals to the routine health care providers where needed.

Over the last 18 month different challenges due to the rapidly changing political situation occurred. The most urgent issues are: organizational and legal barriers, integration to health care system, adequate and sufficient opportunities for language acquisition, language barriers, health promotion and prevention.