



World Health  
Organization



# GLOBAL SCHOOL

## ON REFUGEE AND MIGRANT HEALTH

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Leadership in health and migration:  
policies and actions across countries

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9 - 11 DECEMBER 2025 | GENEVA, SWITZERLAND  
REFLECTIONS AND KEY TAKEAWAY MESSAGES

# Background

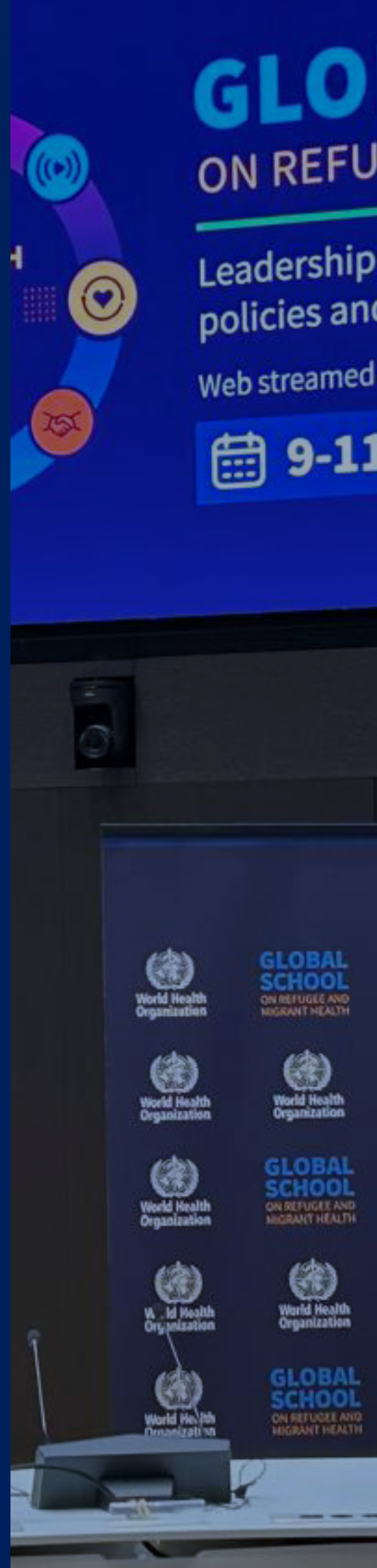
## The Global School on Refugee and Migrant Health

The 6th Global School on Refugee and Migrant Health aims to enhance the health and well-being of refugees, migrants, and host communities by serving as a dynamic platform for knowledge exchange and drawing on practical experiences in the field of refugee and migrant health.

Migration is a defining feature of our time, driven by economic inequality, conflict, environmental degradation, and political instability. These dynamics shape global health systems and require responses that are inclusive, resilient, and equitable. Refugees and migrants often face heightened health risks and barriers to care, from language and legal obstacles to stigma and financial constraints, that prevent them from accessing the services they need.

The Global School on Refugee and Migrant Health is a practical expression of WHO's commitment to ensuring that the right to health applies to everyone, everywhere. By convening policymakers, health professionals, and partners from around the world, the School promotes collective learning, evidence-informed action, and multisectoral collaboration to address these challenges.

This report compiles essential insights from the Sixth Global School on Refugee and Migrant Health 2025, showcasing the key takeaway messages to advance health care access for refugees and migrants.



# BAL SCHOOL

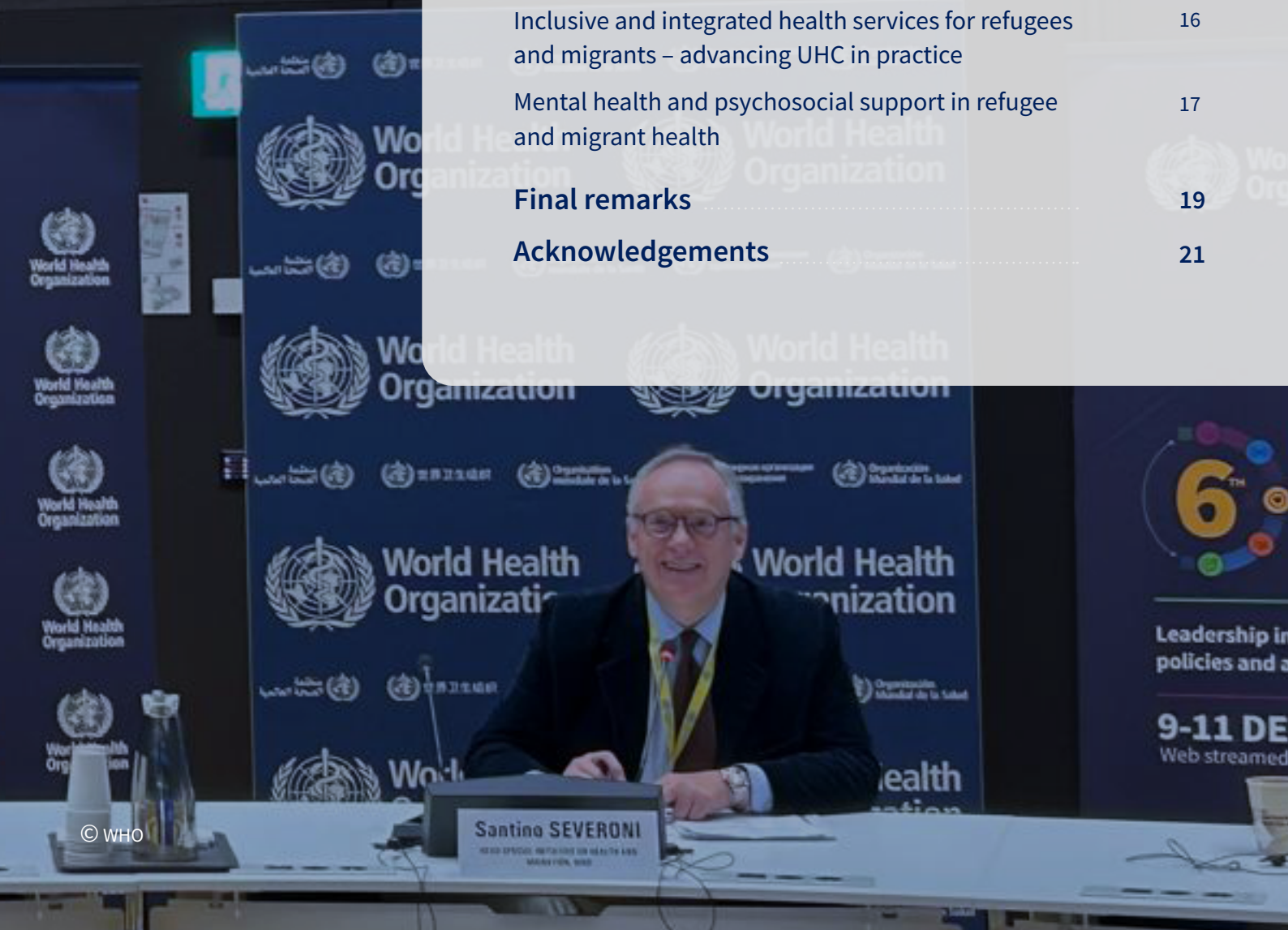
## GEE AND MIGRANT HEALTH

in health and migration:  
d actions across countries  
from Geneva Switzerland

DECEMBER 2025

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# Format and approach

## Sixth Global School on Refugee and Migrant Health

Beyond its educational mission, the Global School serves as an active advocacy platform. It highlights the importance of addressing the health needs and rights of refugees and migrants, showcases regional and national efforts and garners the interest of diverse stakeholders, including media and donor communities. The School emphasizes the development of innovative, evidence-informed and scalable solutions to local public health issues related to health and migration, drawing insights from country-level challenges and opportunities encountered by different countries.



### Programme structure

The programme consists of three modules delivered over three consecutive days from Tuesday to Thursday. Each module was dedicated to one specific thematic area and lasted 90 minutes.



### Learning methodology

Modules utilize a mixed-learning approach that includes prerecorded and live high-level remarks, expert keynotes, country experiences, panel discussions and interactive discussions with the audience.



### Annual thematic focus

Each year, the School revolves around a central thematic area, which is further divided into three sub thematic areas, one for each module. This year focused on health and migration leadership.

## Explore our past editions

Discover the highlights of previous Global School editions. Browse each event card to uncover key moments, insights and impact.

### WHO headquarters

2020

Ensuring accessibility, promoting health and saving lives.

### Jordan

2021

Sharing country experiences on health and migration.

### Bangladesh

2022

Capacity-building: human resources for refugee and migrant health.

### Senegal

2023

Addressing social determinants of health among refugees and migrants.

### Colombia

2024

Advancing UHC for refugees and migrants: from evidence to action.

# Geneva 2025

## Leadership in health and migration: policies and actions across countries

“

*The health challenges faced by refugees and migrants cannot be addressed through humanitarian action alone.*

Dr Tedros Ghebreyesus, WHO Director-General, via video message

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*Leadership is what transforms evidence into action and ensures that health systems become inclusive, resilient, and fair. It means implementation, accountability, and above all, courage to innovate, to collaborate, and to listen to the voices of refugees and migrants themselves.*

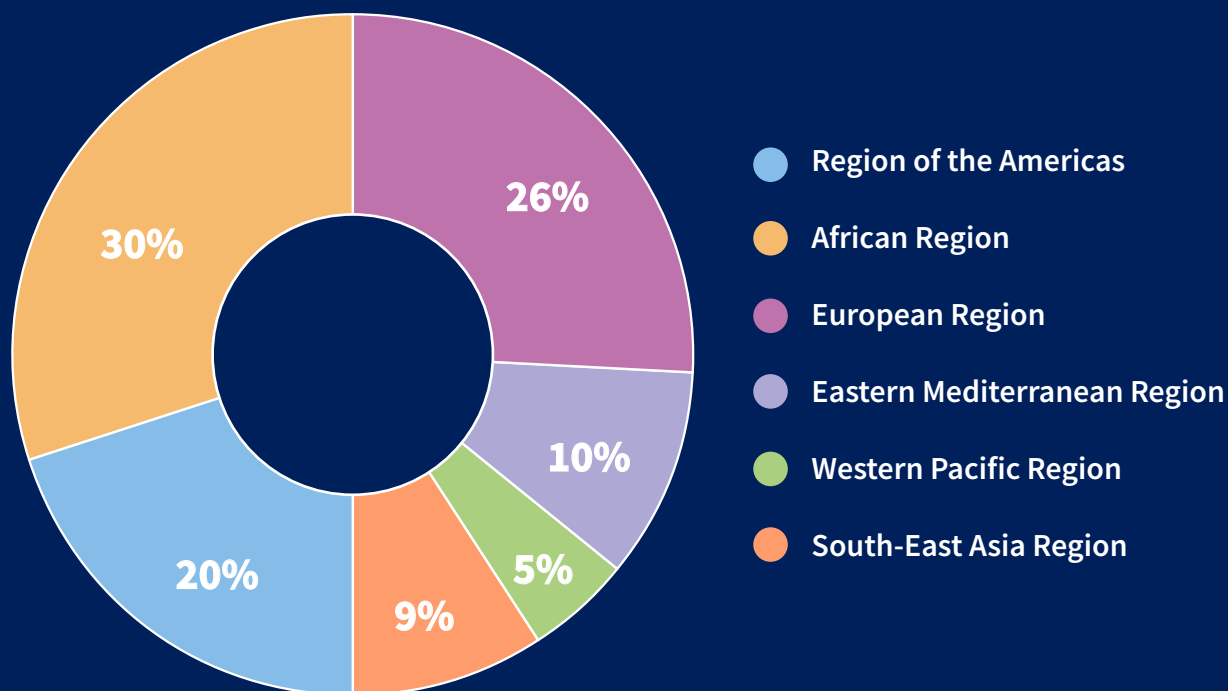
Dr Santino Severoni, Head, WHO Special Initiative on Health and Migration

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# By the numbers

## The sixth Global School at a glance

Participants by WHO region



### Languages



Participants from  
**148 countries**

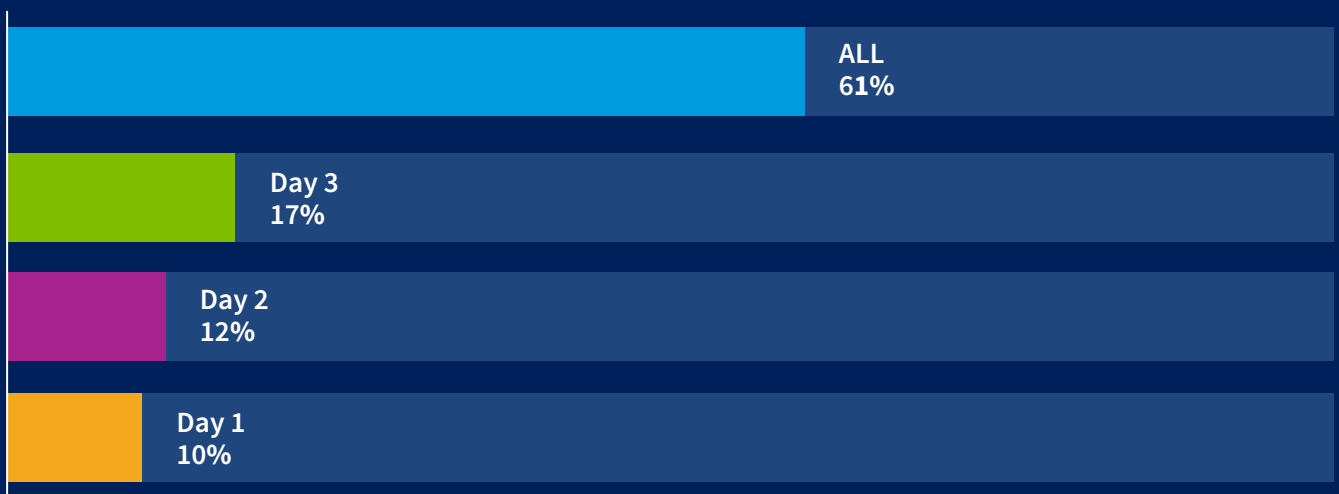
Throughout the years, the School has reached participants in every corner of the world.

## Participation overview



**SURVEY participants: 109 countries**

### Which session did you find the most valuable overall?



<sup>a</sup> The designations employed and the presentation of the material in this publication do not imply the expression of any opinion whatsoever on the part of WHO concerning the legal status of any country, territory, city or area or of its authorities or concerning the delimitation of its frontiers or boundaries. Dotted and dashed lines on maps represent approximate border lines for which there may not yet be full agreement.

# Faculty Speakers

The faculty of the Global School consists of representatives from WHO, international experts and field actors from different regions and disciplines relevant to the area of refugee and migrant health.



**Dr Tedros Adhanom  
Ghebreyesus**

Director General, WHO



**Dr Ahmed Zouiten**

WHO Representative in Libya,  
acting WHO Representative  
in Tunisia



**Dr Santino Severoni**

Head, WHO Special Initiative  
on Health and Migration, WHO



**Dévora Kestel**

Director, Department of  
Noncommunicable Diseases and  
Mental Health (a.i.), WHO



**Dr Shamsuzzoha Babar Syed**

Head, Service Delivery and Primary  
Health Care Unit, Department of  
Performance, Finance and Delivery, WHO



**Dr Paul Spiegel**

Director, Johns Hopkins Center  
for Humanitarian Health



**Dr Mauricio Cerpa**

Advisor, Emergency Operations  
Center (EOC), PAHO/WHO



**Dr Josephine Ihahi**

Deputy Director, CORE Group  
Partners Project (CGPP)  
in Kenya and Somalia



**Jeremie Kaelin**

Grants Acquisition Department  
Manager, World Vision Foundation  
of Thailand (WVFT), Thailand



**Amal Ireifiji**

Director General, Royal Health Awareness Society (RHAS), Jordan



**Luong Quang Dang**

Founder and Secretariat, Vietnam Migrant Health Working Group (MHWG), Viet Nam



**Professor Mauricio Avedano-Pabon**

Professor, University of Lausanne and Co-Director, Health Economics and Policy Division, Center for Primary Care and Public Health (Unisanté), Switzerland



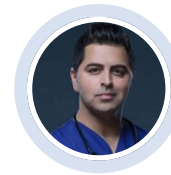
**Dr Khalid Saeed**

Regional advisor, Mental Health and Substance Abuse, Regional Office for the Eastern Mediterranean, WHO



**Dr Francesca Pennati**

Infectious Disease Specialist, migrant health clinic of Brescia, Italy



**Dr Waheed Arian**

Emergency physician, global and digital health consultant, humanitarian, founder of Arian Teleheal



**Khalid I. Hamad**

Field disease control officer, supervisor, MHPSS services, UNRWA



**Zeynab Ahmed Noor**

National Manager, Mental Health and Substance Use, Federal Ministry of Health of Somalia



**Gilles Reboux**

Lead, Health for All Film Festival, WHO



**Claudia Palacios**

Master of Ceremonies, Journalist from Colombia

# Faculty

## Coordination team



**Pino Annunziata**

Senior Coordinator,  
Former WHO



**Candelaria Araoz**

General Coordination;  
Technical Officer, WHO Special  
Initiative on Health and Migration



**Cetin Dikmen**

Technical Support, WHO Special  
Initiative on Health and Migration



**Khawla Nasser AlDeen**

Knowledge Management Support,  
WHO Special Initiative on  
Health and Migration



**Daniela Timus**

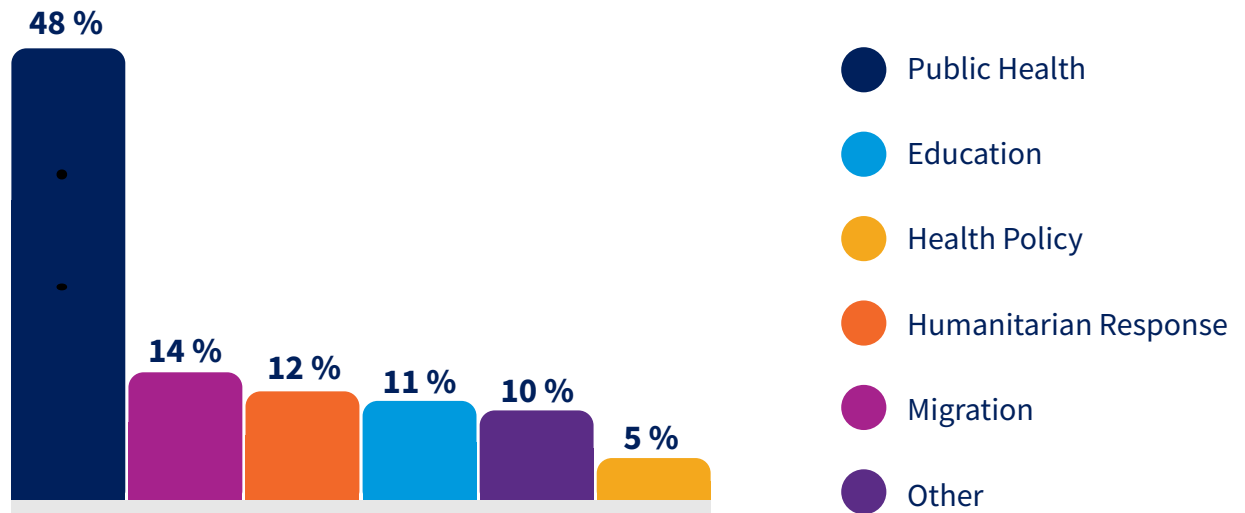
Technical Support,  
WHO Special Initiative on  
Health and Migration

# Participants

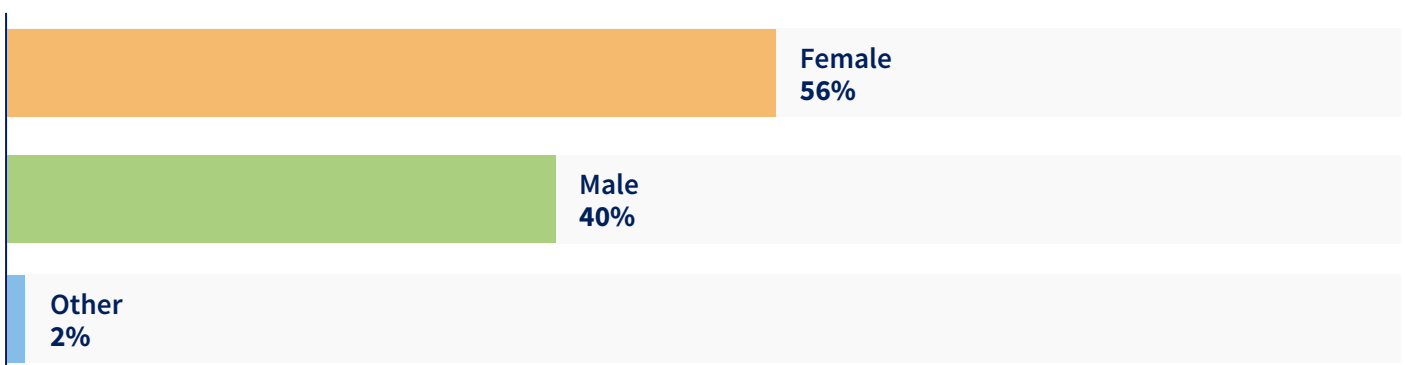
## About the participants

The Global School presents an opportunity to enhance communication and cooperation between different stakeholders in the field of health and migration.

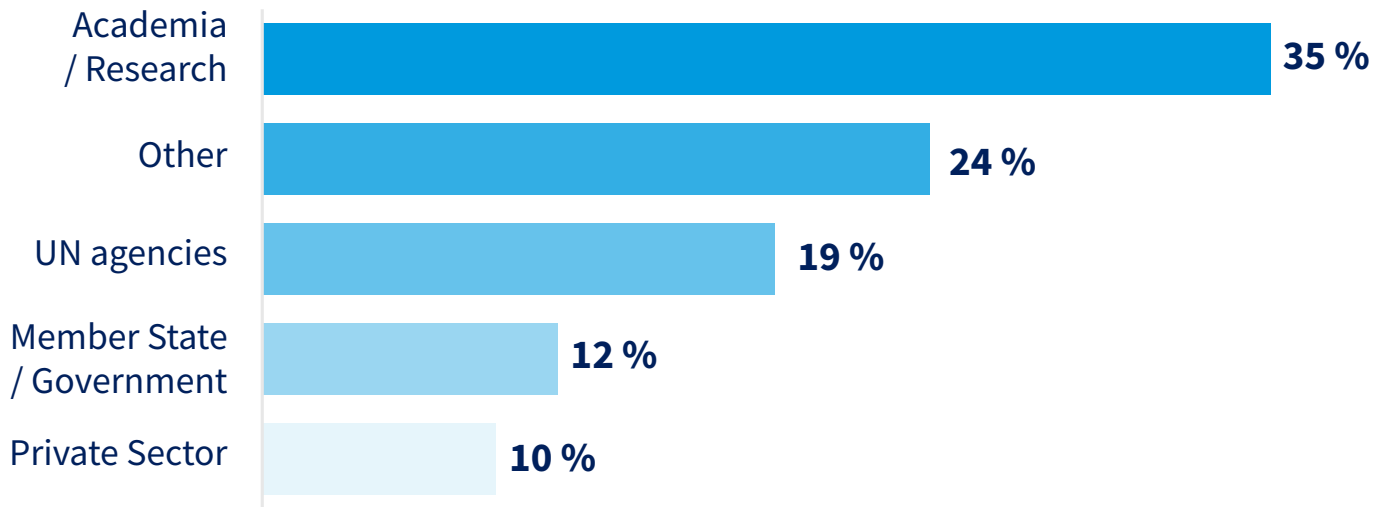
### Participants by main area of work (%)



### Participants by gender (%)



## Participants by affiliation type (%)



## Participant Feedback: most mentioned topics



# Overarching theme 2025

## Leadership in health and migration: policies and actions across countries

Human mobility is increasingly reshaping health landscapes worldwide, requiring countries to move beyond short-term or fragmented responses toward inclusive, resilient health systems that serve all people, regardless of migratory status. As migration grows more complex, driven by conflict, climate change, demographic shifts, and inequality, health systems must anticipate mobility, integrate health into wider social and economic policies, and deliver people-centred, culturally responsive services. Reaffirmed through the Political Declaration on UHC and the Sustainable Development Goals, the commitment to leave no one behind underscores that inclusive health systems are not only a moral obligation, but a practical necessity for equity, preparedness, and sustainable development in a world with more than one billion people on the move.

The global evidence base has also expanded, offering new tools and approaches for countries navigating the health dimensions of mobility.

Strengthened governance, data systems, cross-border collaboration, and community engagement are increasingly recognised as cornerstones of effective migration-health policy. At the same time, emerging innovations, from digital health platforms to integrated primary care models, are helping to reach underserved populations and support continuity of care across complex mobility pathways.

To meet these evolving challenges, countries require leadership that can bridge sectors, align national priorities with international commitments, and cultivate partnerships that reflect the realities of mobile and diverse populations. This involves a broader shift from reactive approaches toward proactive, system-wide strategies that embed refugee and migrant health into health planning, financing, and service delivery. Mental health and psychosocial well-being have rightfully gained prominence, underscoring the need for holistic, rights-based approaches that promote dignity, agency, and long-term recovery.

### Objectives of the 2025 Global School

The 2025 Global School on Refugee and Migrant Health provides an opportunity for knowledge and experience sharing between countries and partners. By connecting leadership, policy, and practice, this year's edition served as a space to foster solutions that strengthen health systems for the future - systems capable of delivering equitable, high-quality care to refugees, migrants, and host communities alike. Through evidence-informed dialogue, practical tools, and shared experience, the Global School supports the global vision of UHC: ensuring that all people, everywhere, can access the health services they need without financial hardship.

“

*Managing migration and displacement is a shared agenda across sectors and institutions. Without leadership at the right level of influence, progress is simply not possible.*

**Dr Santino Severoni**, Head, WHO Special Initiative on Health and Migration

”

# Daily summaries

## Day 1.

### Leadership in health and migration: innovative approaches to advancing governance and coordination across sectors and borders.

The movement of people across borders continues to shape public health challenges and opportunities globally. Addressing the health needs of refugees and migrants requires strong leadership, effective coordination between sectors such as health, labour, social protection, education, and justice, and strengthened collaboration across borders. Inclusive policies aligned with UHC are essential to ensure equitable access to services. Leadership at global, regional, national, and community levels is vital to drive systemic change, integrate migrant health into health systems, and foster both multi-sectoral partnerships and intercountry cooperation.

The first session of the school highlighted leadership and inspired action through high-level dialogue and practical country examples. It provided space for sharing progress, challenges, and innovative strategies, with an emphasis on cross-sectoral collaboration and regional or cross-border approaches that respond to the realities of human mobility.



#### Speakers

- **High-level address: Dr Tedros Adhanom Ghebreyesus** highlighted the importance of leadership and governance in his opening remarks.
- **Keynote address: Professor Paul Spiegel** emphasized that leadership in migration and refugee health is the decisive factor between coherent, humane health responses and fragmentation, calling for politically aware, adaptive, and accountable leadership centred on affected communities.



#### Takeaway messages

##### 01 Leadership turns commitments into action

Political commitment alone is not enough. Effective leadership is what translates global and national commitments into concrete policies, governance mechanisms and services that protect the health of refugees and migrants across the mobility continuum.

##### 02 Governance and coordination are essential for inclusion

Inclusive migrant health responses require strong governance structures that enable coordination across sectors, such as health, labour, social protection and justice, and across borders, ensuring continuity of care and coherent responses to human mobility.

##### 03 Leadership must be adaptive, accountable and people-centred

Leadership in health and migration must respond to complex political and social realities, remain accountable to affected populations, and actively include refugees and migrants in decision-making processes.



#### Learning objectives

- Highlight the role of leadership in advancing the health of refugees and migrants.
- Showcase concrete actions and progress made at country level through intersectoral and intercountry collaboration.
- Facilitate exchange of good practices, lessons learned, and challenges across countries and regions.
- Emphasize the importance of border health, regional mechanisms, and cross-country coordination.
- Present perspectives and experiences from international organizations, regional bodies, national governments, and local communities.
- Foster dialogue among countries and stakeholders to support the implementation and scale-up of effective, collaborative strategies.



#### Country experiences

- **Colombia** highlighted how Territorial Health Committees enable coordinated, multi-sectoral and cross-border responses to protect the health of refugees and migrants in complex mobility contexts.
- **Kenya and Somalia** showcased cross-border collaboration to deliver immunization services and protect child health across high-mobility border areas.
- **Viet Nam** presented the establishment of an interministerial Migrant Health Working Group as a governance mechanism to integrate migrant health into national policies.

► [https://who.zoom.us/rec/play/3cGNj04s\\_522N](https://who.zoom.us/rec/play/3cGNj04s_522N)

## Day 2.

# Inclusive and integrated health services for refugees and migrants – advancing UHC in practice

Ensuring access to quality, affordable, and continuous health services for refugees and migrants is essential to achieving UHC. Yet, significant barriers remain at service delivery level: legal and administrative restrictions, lack of culturally and linguistically appropriate care, workforce shortages, and fragmentation between humanitarian and national health systems. These barriers not only affect the health of migrants and refugees but also undermine health equity and health system resilience.

Several countries have made important progress in adapting primary health care (PHC) services, strengthening referral pathways, and training health workers to respond effectively to diverse population needs. Mobile clinics, community health workers, and digital health tools have also emerged as promising innovations to reach underserved populations in transit, at borders, and in host communities. However, challenges persist in ensuring sustainability, integration into national health systems, and adequate financing.

Day two examined practical strategies to strengthen the delivery of health services for refugees and migrants, grounded in PHC and aligned with UHC. Through global, regional, and country perspectives, participants discussed how service delivery models can be adapted to improve accessibility, quality, and continuity of care, while simultaneously benefiting host populations and advancing health system resilience.



### Speakers

- **High-level address: Dr Ahmed Zouiten** illustrated how mobile clinics and integrated PHC approaches can strengthen access to care for migrants and host communities alike in fragile settings.
- **Keynote address: Dr Shamsuzzoha Babar Syed** stressed that PHC is the backbone of inclusive, migrant-sensitive health systems and essential for achieving UHC.



### Learning objectives

- Share country-level innovations and implementation challenges.
- Explore partnerships and financing models to ensure sustainability.
- Discuss how PHC can strengthen continuity of care for migrants and host populations.



### Country experiences

- **Thailand** shared community-based PHC models co-led by migrant volunteers to increase service utilization and immunization coverage.
- **Jordan** highlighted the scaling up of Healthy Community Clinics to integrate refugee health services into the national health system.
- **Italy** presented a primary care clinic model providing undocumented migrants with free, continuous access to essential health services.

▶ <https://who.zoom.us/rec/play/nE2HRWUB8DT>



### Takeaway messages

#### 01 PHC is the foundation of inclusive service delivery

PHC provides the most effective platform to deliver accessible, continuous and people-centred care for refugees and migrants while strengthening health systems for host populations. Inclusion is determined at the point of service delivery, through clear entitlement pathways, flexible administrative procedures, and frontline practices that enable refugees and migrants to receive care without fear, delay, or discrimination.

#### 02 Integration into national systems ensures sustainability

Sustainable progress requires moving beyond parallel or project-based approaches. Country experiences emphasize the importance of embedding refugee and migrant health services within national PHC systems, financing mechanisms, and health information systems to ensure long-term impact.

#### 03 Innovation must support access, continuity and quality of care

Mobile clinics, digital health tools, community health workers and culturally adapted services can reduce access barriers, but only when aligned with national systems, financing mechanisms and workforce capacity. Innovation should strengthen, not fragment, health systems.

## Day 3.

# Mental health and psychosocial support in refugee and migrant health

The mental health and psychosocial wellbeing of refugees and migrants is a growing public health concern. Many are exposed to cumulative stressors across the migration journey, including conflict, displacement, violence, precarious living conditions, discrimination, and uncertain legal status. These factors increase the risk of depression, anxiety, posttraumatic stress disorder (PTSD), and other psychosocial challenges, while also creating barriers to care such as stigma, language, and lack of culturally adapted services. The Global Evidence Review on Health and Migration (GEHM): Mental Health of Refugees and Migrants, published by WHO in 2023, highlights that refugees and migrants are at higher risk of depression, anxiety, and post-traumatic stress disorder. The review underscores persistent barriers to care, including discrimination, limited entitlements, financial constraints, and poor service availability - factors that hinder equitable access to mental health services. Despite the urgency, access to MHPSS for refugees and migrants remains fragmented and limited, particularly at the PHC level. The integration of MHPSS into PHC and UHC frameworks is essential to ensuring that mental health is treated as a fundamental component of health systems. Promising practices include task-shifting to community health workers, digital innovations, intercultural mediation, and cross sectoral partnerships linking health, education, and social protection.

The third and final day of the Global School emphasized global and country-level strategies to strengthen MHPSS, grounded in the evidence and recommendations of GEHM (2023). It also brought voices and lived experiences to the discussion through the screening of Dalal's Story, the WHO Film for Health Festival award-winning (Special Prize, Migrants and Refugee Health) short film on refugee mental health, and the panel dialogue.



### Speakers

- **High-level address:** Dévora Kestel reaffirmed that mental health is an essential component of UHC and must be integrated into PHC for refugees and migrants.
- **Champion perspective:** Dr Waheed Arian emphasized the role of trust, community engagement and culturally adapted approaches in overcoming stigma and improving access to mental health care.
- **Keynote address:** Professor Mauricio Avedano highlighted how social determinants, migration trajectories and structural inequalities shape the mental health of refugees and migrants, emphasizing the need for evidence-informed, equity-oriented policies integrated into health and social systems.
- **Film screening:** Gilles Reboux introduced the award-winning short film "Dalal's Story", highlighting the power of storytelling to amplify lived experiences and promote refugee mental health and psychosocial well-being.



### Thematic panel discussion

- **Dr Khalid Saeed**, provided a regional perspective on strengthening MHPSS systems for refugees and migrants in protracted crises through policy integration, workforce development and cross-sectoral collaboration.
- **Khalil I. Hamad**, shared field-based experience from Gaza on delivering community-centred psychosocial support under conditions of conflict, displacement and constrained access to services.
- **Ms Zeynab Ahmed Noor**, presented Somalia's approach to integrating MHPSS into PHC through task-sharing and culturally adapted services.

► <https://who.zoom.us/rec/play/0nDZbL->



### Learning objectives

- Amplify of the importance of MHPSS in refugee and migrant health and UHC strategies.
- Highlight lived experiences through film as a catalyst for dialogue on barriers and opportunities.
- Share country experiences and promising practices on integrating MHPSS into PHC and humanitarian-development settings.
- Discuss persistent barriers to access, including stigma, language, and continuity of care across borders.
- Promote intersectoral collaboration for mental health, linking health systems with education, social services, and community support networks.



### Takeaway messages

#### 01 Mental health is integral to UHC

MHPSS are not optional add-ons but essential components of inclusive health systems and UHC for refugees and migrants.

#### 02 Integration of MHPSS into PHC improves access and equity

Embedding MHPSS into PHC, supported by task-sharing and community-based approaches, is key to expanding access and reducing stigma.

#### 03 Trust, culture and community engagement are critical

Culturally adapted, community-led and rights-based approaches are essential to overcoming fear, discrimination and stigma, and to ensuring dignified mental health care for people on the move.



# Final remarks

The 2025 Global School on Refugee and Migrant Health has reaffirmed its role as a dynamic platform for advancing the global agenda on equitable health care access for all. Convening over 1 200 participants from more than 140 countries, the 2025 edition focused on leadership in health and migration, highlighting how policies, governance and coordinated action across countries can translate principles into practice.

At a time when migration continues to shape societies and health systems worldwide, this year's Global School underscored a clear message: leadership matters. Health for refugees and migrants cannot be achieved through isolated interventions, but through collective responsibility, political commitment and sustained action that bridges humanitarian, development and health system responses.

Throughout the three days, the Global School provided practical pathways for change:



showcasing country-led and community-based models



bridging evidence, policy and implementation



fostering cross-regional collaboration and peer learning



reinforcing the commitment to leave no one behind

Through high-level addresses, keynote speeches, country case studies and interactive discussions, participants explored how culturally responsive, people-centred PHC and integrated MHPSS can strengthen UHC and system resilience in both emergency and protracted settings.



# Looking ahead

The Global School is more than a learning event - it is a growing global community committed to turning dialogue into action. The insights, experiences and leadership shared in 2025 serve as a catalyst for stronger partnerships, inclusive policies and accountable governance that protect the health and dignity of refugees and migrants.

As we look to the future, the School will continue to support countries and partners in translating knowledge into scalable, sustainable solutions, reaffirming health as a universal and inalienable human right.

We look forward to welcoming you in 2026 as we continue to strengthen leadership, collaboration and action for refugee and migrant health worldwide.



# Acknowledgments

## Technical development and coordination

The technical conceptualization and coordination of the WHO Sixth Global School on Refugee and Migrant Health were provided by the WHO Special Initiative on Health and Migration, under the strategic guidance of Dr Santino Severoni, Head of the Initiative, with technical leadership and coordination by Candelaria Araoz, Technical Officer, and senior advisory support from Pino Annunziata, former WHO official.

Special thanks are extended to the following staff and consultants of WHO Health and Migration for providing technical contributions: Yosr Bellourou, Cetin Dikmen, Khawla Nasser AlDeen and Dr Daniela Timus.

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## High-level address, keynote presentations, panel discussions and country experiences

We extend our sincere appreciation to all speakers, panellists, moderators and participants who contributed to the success of the Sixth Global School on Refugee and Migrant Health, held in Geneva and online from 9 to 11 December 2025

WHO extends particular gratitude to Dr Tedros Adhanom Ghebreyesus, WHO Director-General, for his high-level video message underscoring the importance of leadership and inclusive governance in advancing refugee and migrant health.

We express our appreciation for the keynote addresses, including Professor Paul Spiegel, Director, Johns Hopkins Center for Humanitarian Health; Dr Shamsuzzoha Babar Syed, Head, Service Delivery and Primary Health Care Unit, Department of Performance, Finance and Delivery, WHO Headquarters; and Professor Mauricio Avedano-Pabon, University of Lausanne and Co-Director of the Health Economics and Policy Division, Center for Primary Care and Public Health (Unisanté), Switzerland.

We are grateful to Dr Waheed Arian, emergency physician, global and digital health consultant, humanitarian, founder of Arian Teleheal.

We thank all panellists and country representatives for sharing rich experiences and practical strategies,

including contributions from Colombia, Kenya and Somalia, Viet Nam, Thailand, Jordan, Italy, which illustrated how leadership, governance and innovation can strengthen health systems for people on the move in diverse contexts.

We also acknowledge Gilles Reboux, Lead of the WHO Health for All Film Festival, for introducing the award-winning short film Dalal's Story, which powerfully brought lived experience into the dialogue on refugee mental health.

Our sincere thanks go to Claudia Palacios for serving as an outstanding Master of Ceremonies, and to Federico Cantone for his support in the production of materials. We also extend our appreciation to the PHM team for their support: Mohammad Darwish, Claudia Marotta, Saverio Bellizzi, Iryna Aleksieieva, and Teuta Bytyqi-Forde.

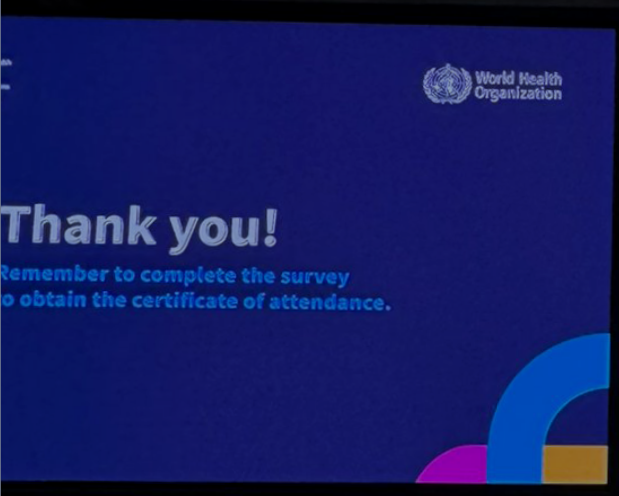
Thank you to all colleagues from WHO headquarters, regional and country offices whose technical, logistical and communications support made this Global School possible.

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## Funding acknowledgments

This event was made possible through funding support from the UHC Partnership, particularly with Luxembourg, and through the generous financial contributions of the Ministry of Foreign Affairs and International Cooperation of Italy, the Ministry of Health of Italy, and the Ministry of Foreign Affairs of Portugal.





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