WHO Global School on Refugee and Migrant Health

Sharing country experiences on health and migration

25-29 October 2021
Second WHO Global School on Refugee and Migrant Health

Health and Migration Programme (PHM)
Office of the Deputy Director-General
World Health Organization (WHO)
Geneva – Switzerland

25 - 29 October 2021
BACKGROUND

WHO’s Health and Migration Programme (PHM; Office of the Deputy Director-General, WHO headquarters) aims to promote knowledge sharing, build on existing capacities and stimulate a research agenda on health and migration. This is consistent with the goals set out in the 2019–2023 Global Action Plan: Promoting the health of refugees and migrants (GAP) agreed at the Seventy-second World Health Assembly in 2019 in the context of WHO’s own Thirteenth General Programme of Work 2019–2023.

To this end, the yearly Global School on Refugee and Migrant Health serves as one of the platforms of the PHM for building competency on public health aspects of migration through:

- Provision of knowledge exchange and information sharing.
- The promotion of scientific and best practices on health and migration.
- The promotion of evidence-informed best practices important to adapting health-care systems to the health needs and rights of refugees and migrants worldwide.
This year, the Global School on Refugee and Migrant Health will focus on sharing country experiences in addressing the health needs and rights of refugees and migrants. A number of countries will present their challenges and achievements in ensuring inclusive and sustainable health services for refugees and migrants with a focus on specific thematic areas: health service accessibility, SARS-CoV-2 (COVID-19), mental health, health promotion and health finance.

One of the peculiarities of this edition of the School is that it will feature a series of video reportage from different countries to provide information on the state of the health challenges for refugees and migrants and the responses on the ground.

The focus will be on the stories of refugees and migrants, and of the front-line health workers who receive first-hand information regarding the main issues encountered in refugees and migrant health-care delivery.

Because of the travel restrictions generated during the COVID-19 pandemic, the second edition of the Global School on Refugee and Migrant Health will be an e-learning event streamed from the Hashemite Kingdom of Jordan, host of the event, with a restricted number of participants attending the School in person in Amman.
AIM
The primary aim of the School is to contribute in reducing excess mortality and morbidity among migrants, refugees and hosting populations.

OBJECTIVES
There are three main objectives:

To promote evidence-informed and best practice interventions to address refugee and migrant health needs and rights.

To provide an opportunity for sharing knowledge, experience and good practice from the ground.

To strengthen understanding and knowledge to manage health systems and public health aspects of refugee and migrant health.
TARGET AUDIENCE

The School will be open to everyone, but the main target audience will be policy-makers, health sector managers and officers working at different levels within ministries in charge of the interior, labour, social affairs, foreign affairs, health and education. The School aims to reach a diverse audience because addressing the health of refugees and migrants requires coordination and joint intersectoral action by multiple actors. Researchers, people from academia, representatives of nongovernmental organizations and journalists are also welcome to join as the School is also an opportunity to reflect on the need for accurate global data for evidence-informed migrant health policies.

FACULTY

The faculty consists of international experts, representatives from WHO and other United Nations agencies, and field actors from different regions and disciplines relevant to the area of health and migration.

FORMAT

The School consists of five modules delivered over five consecutive days from Monday to Friday. Each module is dedicated to one specific thematic area and has a duration of 90 minutes.
COMPONENTS
Not all the components are included in all modules

**Introduction:**
Brief introduction about the thematic area, the structure of the day, the speakers and the modality to participate in the question and answer (Q&A) session.

**Keynote address:**
Updated global overview setting out the central issues of the specific thematic area.

**Health and migration country profile:**
Overview of the migration dynamics, existing migration health governance and health services for refugees and migrants living in selected countries of various WHO regions with focus on the thematic area of the day.

**Field reportage:**
Dynamic, journalistic style video including onsite visits and interviews with local actors highlighting real-life challenges and achievements in dealing with some specific aspects of refugee and migrant health in selected countries of various WHO regions.

**Presentation:**
International expert presenting the thematic area of the day.

**Panel discussion:**
Discussion among experts about a specific topic.

**Presentation of a research study:**
One of the authors will present their recent research study, which will be related to the specific thematic area of the day regardless of the country/region where the study was conducted.

**Q&A:**
Questions from both virtual and in-person audience selected, grouped and posed to the speakers by the session chair.
THEMATIC AREAS

Day 1: Refugee- and migrant-sensitive health systems

Day 2: Public health and migration during COVID-19 pandemic

Day 3: Public health aspects of mental health among refugees and migrants

Day 4: Health promotion to improve the health and well-being of refugees and migrants

Day 5: Financing health care for refugees and migrants

COUNTRIES

Countries selected by PHM and WHO regional offices to present their experiences on health and migration through a health and migration country profile or video reportage.

<table>
<thead>
<tr>
<th>Country</th>
<th>Day 1</th>
<th>Day 2</th>
<th>Day 3</th>
<th>Day 4</th>
<th>Day 5</th>
</tr>
</thead>
<tbody>
<tr>
<td>Guatemala</td>
<td>Refugee- and migrant-sensitive health systems</td>
<td>Public health and migration during the COVID-19 pandemic</td>
<td>Public health aspects of mental health among refugees and migrants</td>
<td>Health promotion to improve the health and well-being of refugees and migrants</td>
<td>Financing health care for refugees and migrants</td>
</tr>
<tr>
<td>Jordan</td>
<td>Refugee- and migrant-sensitive health systems</td>
<td>Public health and migration during the COVID-19 pandemic</td>
<td>Field reportage</td>
<td>WHO Regional Office for the Eastern Mediterranean (EMRO)</td>
<td>WHO Regional Office for Europe (EURO)</td>
</tr>
<tr>
<td>Bangladesh</td>
<td>WHO Regional Office for South-East Asia (SEARO)</td>
<td>WHO Regional Office for Europe (EURO)</td>
<td>WHO Regional Office for the Western Pacific (WPRO)</td>
<td>WHO Regional Office for Africa (AFRO)</td>
<td>WHO Regional Office for Europe (EURO)</td>
</tr>
<tr>
<td>Serbia</td>
<td>WHO Regional Office for the Eastern Mediterranean (EMRO)</td>
<td>Field reportage</td>
<td>Field reportage</td>
<td>Health and migration country profile</td>
<td>Field reportage</td>
</tr>
<tr>
<td>Cambodia</td>
<td>WHO Regional Office for Europe (EURO)</td>
<td>Field reportage</td>
<td>WHO Regional Office for the Western Pacific (WPRO)</td>
<td>Health and migration country profile</td>
<td>WHO Regional Office for Africa (AFRO)</td>
</tr>
</tbody>
</table>
DAY 1. OPENING:
REFUGEE-AND MIGRANT-SENSITIVE HEALTH SYSTEMS

25 OCTOBER 2021, 14:00 - 15:30 CEST

The health problems of refugees and migrants are similar to those of the rest of the population, but they may also have special vulnerabilities and risks, including a series of language, cultural and legal barriers that make it difficult for them to access health services. These issues and the need to enhance health providers’ skills and competences to deal with the complexity of serving people with different culture and perceptions represent major challenges for the health systems of host countries. Refugee- and migrant-sensitive health systems and programmes aim to include the health needs and rights of refugees and migrants in all aspects of the health services, including financing, policy, planning, implementation and evaluation; consequently, achieving inclusive health systems is complex and requires a multisectoral approach.

Day 1 will provide a description of refugee- and migrant-sensitive health systems including different types of services that can be provided and a global overview of issues to address.
<table>
<thead>
<tr>
<th>TIME (CEST)</th>
<th>AGENDA</th>
</tr>
</thead>
</table>
| 14:00 - 14:05 | Opening remarks and introduction  
Santino Severoni, Director, PHM, WHO headquarters |
| 14:05 - 14:10 | Welcome address  
Tedros Adhanom Ghebreyesus, Director-General, WHO headquarters |
| 14:10 - 14:15 | Welcome address  
Firas Al-Hawari, Minister of Health, Hashemite Kingdom of Jordan |
| 14:15 - 14:35 | Keynote address  
Refugee- and migrant-sensitive health systems  
Suraya Dalil, Director, Special Programme on Primary Health Care, WHO headquarters |
| 14:35 - 14:55 | Screening of field reportage from Jordan and Guatemala on the health services for refugees and migrants |
| 14:55 - 15:10 | Presentation of the research study  
“Southeast Asian health system challenges and responses to the ‘Andaman Sea refugee crisis’: A qualitative study of health-sector perspectives from Indonesia, Malaysia, Myanmar, and Thailand”  
Natasha Howard, Associate Professor, Saw Swee Hock School of Public Health, National University of Singapore; London School of Hygiene and Tropical Medicine. |
| 15:10 - 15:30 | Q&A |
| 15:30 - 15:32 | Closing remarks and preview of day 2  
Santino Severoni, Director, PHM, WHO headquarters |
Refugees and migrants are potentially at increased risk of contracting diseases, including COVID-19, because they may live in overcrowded conditions with limited access to public health services due to cultural, legal and economic barriers. In addition, the economic crisis caused by the COVID-19 pandemic has worsened the already precarious situation of many refugees and migrants in formal and informal labour markets. Eventually, international migrant workers and refugees can be affected by income loss, health-care insecurity and the ramifications that come with postponement of decisions on their status or reduction of employment, legal and administrative services.¹

Day 2 will provide an overview of the latest data regarding the public health impact of the COVID-19 pandemic on refugee and migrant communities, including an overview of self-reported impacts of COVID-19 from refugees and migrants.

<table>
<thead>
<tr>
<th>TIME (CEST)</th>
<th>AGENDA</th>
</tr>
</thead>
</table>
| 14:00 - 14:05 | Introduction and welcome to day 2  
Awad Mataria, Director, Universal Health Coverage/Health Systems, WHO EMRO |
| 14:05 - 14:15 | Welcome address  
Ahmed Al-Mandhari, Regional Director, WHO EMRO |
| 14:15 - 14:35 | Keynote address  
Special vulnerabilities, equitable access to service during a pandemic, tackle stereotypes and misinformation; Apart Together survey results  
Santino Severoni, Director, PHM, WHO headquarters |
| 14:35 - 14:55 | Screening of field reportage from Serbia and Bangladesh on the impact of COVID-19 pandemic on refugees and migrants |
| 14:55 - 15:10 | Presentation of the research study  
“Clinical outcomes and risk factors for COVID-19 among migrant populations in high-income countries: a systematic review”  
Sally Hayward, Researcher, St George’s University of London; the London School of Hygiene & Tropical Medicine |
| 15:10 - 15:20 | Q&A |
| 15:30 - 15:32 | Closing remarks and preview of day 3  
Awad Mataria, Director, Universal Health Coverage/Health Systems, WHO EMRO |
DAY 3.
PUBLIC HEALTH ASPECTS OF MENTAL HEALTH AMONG REFUGEES AND MIGRANTS

27 OCTOBER 2021, 14:00 - 15:30 CEST

The experience of migration can be complex and stressful, related to events before departure, during travel and transit, and after arrival. Consequently, refugees and migrants can suffer from mental disorders, although prevalence is highly variable across studies and population groups. Policies can help refugees and migrants to maintain good mental health, and health-care systems can improve access to and engagement with mental health care of those communities.²

Day 3 will present an updated overview of the public health aspects of mental health among refugees and migrants and the issues to address.

² Technical guidance on mental health promotion and mental health care in refugees and migrants (https://www.euro.who.int/__data/assets/pdf_file/0004/386563/mental-health-eng.pdf)
<table>
<thead>
<tr>
<th>TIME (CEST)</th>
<th>AGENDA</th>
</tr>
</thead>
</table>
| 14:00 - 14:05 | **Introduction and welcome to day 3**  
Santino Severoni, Director, PHM, WHO headquarters |
| 14:05 - 14:10 | **Welcome address**  
Zsuzsanna Jakab, Deputy Director-General, WHO headquarters |
| 14:10 - 14:30 | **Keynote address**  
**Mental health care in refugees and migrants**  
Dévora Kestel, Director, Department of Mental Health and Substance Abuse, WHO headquarters |
| 14:30 - 14:50 | **Presentation of migration country profiles Psychosocial support services for refugees and migrants in Cambodia and Ethiopia** |
| 14:50 - 15:05 | **Presentation**  
**Migration governance and mental health**  
Guglielmo Schininà, Head, Mental Health, Psychosocial Response and Intercultural Communication Section, International Organization for Migration (IOM) |
| 15:05 - 15:25 | **Q&A** |
| 15:25 - 15:27 | **Closing remarks and preview of day 4**  
Santino Severoni, Director, PHM, WHO headquarters |
DAY 4.
PROMOTING THE HEALTH OF REFUGEES AND MIGRANTS

28 OCTOBER 2021, 14:00 - 15:30 CEST

Health promotion covers a wide range of social and environmental interventions that are essential to properly address the health needs and rights of refugees and migrants within the framework of inclusive good governance for health. Health promotion is the process of enabling people to increase control over, and to improve, their health. However, refugee and migrant communities may be marginalized and excluded from decision-making spaces and have unequal access to information and availability of services. Refugees and migrants need to acquire the knowledge, skills and information to make healthy choices, and to have opportunities to make those choices. Furthermore, they need to be assured of an environment in which people can demand further policy actions to further improve their health.

Day 4 will present health promotion as a key to improve refugee and migrant health and the issues to address at global level.

3 Health Promotion Glossary, 1998 (https://www.who.int/healthpromotion/about/HPR%20Glossary%201998.pdf)
5 Health promotion (https://www.who.int/news-room/q-a-detail/health-promotion)
<table>
<thead>
<tr>
<th>TIME (CEST)</th>
<th>AGENDA</th>
</tr>
</thead>
</table>
| 14:00 - 14:05 | Introduction and welcome to day 4  
Santino Severoni, Director, PHM, WHO headquarters |
| 14:05 - 14:10 | Welcome address  
Filippo Grandi, United Nations High Commissioner for Refugees, Office of the United Nations High Commissioner for Refugees (UNHCR) |
| 14:10 - 14:30 | Keynote address  
Health promotion as key to improve refugee and migrant health  
Rüdiger Krech, Director of the Department of Health Promotion, WHO headquarters |
| 14:30 - 15:00 | Presentation of the research studies  
“How secondary cities are managing rural to urban migration”  
Florence Lozet, Urban Analyst, Cities Alliance, United Nations Office for Project Services  
“Support asylum and vulnerabilities through e-health” Project  
Gianfranco Costanzo, Director, National Institute for Health, Migration and Poverty, Italy |
| 15:00 - 15:20 | Q&A |
| 15:20 - 15:22 | Closing remarks and preview day 5  
Santino Severoni, Director, PHM, WHO headquarters |
Refugees and migrants, especially when in an irregular situation, are often excluded from national programmes for health promotion, disease prevention, treatment and care, as well as from affording financial protection for health and other social protection services. In many countries, access to health services for asylum seekers and migrants in irregular situations is severely limited by restrictive legal entitlements and is often possible only in emergency situations. However, the provision of equitable access to universal health coverage, including access to the full range of health services, medicines and vaccines for refugees and migrants regardless of their legal status, is essential for ensuring that health needs and rights of these populations are properly addressed and that international human rights treaties, signed by the majority of the United Nations Member States, are fulfilled. In addition, there is increasing evidence that exclusion is costly because when access is restricted to just emergency care the health costs incurred in the long run are higher than they would have been if refugees and migrants were included in statutory health insurance systems.⁶

Day 5 will focus on the long-term benefits of investing in the health of refugees and migrants for both these populations and their host communities and discuss the return on investment of universal health coverage, including the implementation of innovative financing mechanisms.

<table>
<thead>
<tr>
<th>TIME (CEST)</th>
<th>AGENDA</th>
</tr>
</thead>
</table>
| 14:00 - 14:05 | **Introduction and welcome to Day 5**  
Ali Ardalan, Regional Adviser and Head, Health Systems in Emergencies Lab, WHO EMRO |
| 14:05 - 14:10 | **Welcome address**  
Ugochi Daniels, Deputy Director-General for Operations, IOM |
| 14:10 - 14:25 | **Keynote address**  
Financing health services for refugees and migrants: health financing for universal health coverage  
Tamás Evetovits, Head, WHO Barcelona Office for Health Systems Financing |
| 14:25 - 15:10 | **Panel discussion**  
Investing in refugee and migrant health: financial burden and benefits  
Moderator: Báltica Cabieses, Professor of Social Epidemiology, Instituto de Ciencias e Innovación en Medicina, Facultad de Medicina Clínica Alemana Universidad del Desarrollo, Chile  
• Nadwa Rafeh, Senior Health Specialist in Health, Nutrition, and Population Global Practice, World Bank  
• Awad Mataria, Director, of Universal Health Coverage/Health Systems, WHO EMRO  
• Bente Mikkelsen, Director, Noncommunicable Diseases, Division of Universal Health Coverage/Communicable and Noncommunicable Diseases, WHO headquarters |
| 15:10 - 15:20 | **Q&A** |
| 15:20 - 15:25 | **Final remarks**  
Ministry of Health, Hashemite Kingdom of Jordan |
| 15:25 - 15:45 | **School closure**  
Santino Severoni, Director, PHM, WHO headquarters |
Dr Tedros Adhanom Ghebreyesus was elected as WHO Director-General for a five-year term by WHO Member States at the Seventieth World Health Assembly in May 2017.

He is the first WHO Director-General to have been elected from multiple candidates by the World Health Assembly, and is the first person from the WHO African Region to serve as WHO’s chief technical and administrative officer.

Immediately after taking office on 1 July 2017, Dr Tedros outlined five key priorities for the Organization: universal health coverage; health emergencies; women’s, children’s and adolescents’ health; health impacts of climate and environmental change; and a transformed WHO.

Prior to his election as WHO Director-General, Dr Tedros served as Ethiopia’s Minister of Foreign Affairs from 2012 to 2016. In this role he led efforts to negotiate the Addis Ababa Action Agenda, in which 193 countries committed to the financing necessary to achieve the Sustainable Development Goals.

Dr Tedros served as Ethiopia’s Minister of Health from 2005 to 2012, where he led a comprehensive reform of the country’s health system. All roads lead to universal health coverage for Dr Tedros, and he has demonstrated what it takes
to expand access to health care with limited resources. The transformation he led as Ethiopia’s Minister of Health improved access to health care for millions of people. Under his leadership, Ethiopia invested in critical health infrastructure, expanded its health workforce and developed innovative health financing mechanisms.

Beyond Ethiopia, Dr Tedros’ global leadership on malaria, HIV/AIDS and maternal and child health has been immensely impactful. He was elected as Chair of the Global Fund to Fight AIDS, Tuberculosis, and Malaria Board in 2009 and previously served as Chair of the Roll Back Malaria Partnership Board, and Co-chair of the Partnership for Maternal, Newborn and Child Health Board.

Born in the city of Asmara, Eritrea, Dr Tedros holds a Doctorate of Philosophy in Community Health from the University of Nottingham and a Master of Science in Immunology of Infectious Diseases from the University of London. Dr Tedros is globally recognised as a health scholar, researcher and diplomat, with first-hand experience in research operations, and leadership in emergency responses to epidemics.

Throughout his career Dr Tedros has published numerous articles in prominent scientific journals and received awards and recognition from across the globe. He received the Decoration of the Order of Serbian Flag in 2016 and was awarded the Jimmy and Rosalynn Carter Humanitarian Award in recognition of his contributions to the field of public health in 2011.
Dr Ahmed Al-Mandhari has been WHO Regional Director for EMRO since June 2018. Prior to that, he was a senior hospital manager in his native Oman and also served as head of the Quality Assurance Centre at Oman’s Ministry of Health. A specialist in family and community medicine, he studied at the Sultan Qaboos University in Oman and the Liverpool School of Tropical Medicine in the United Kingdom of Great Britain and Northern Ireland. As Regional Director, his overriding aim is to ensure that the Organization responds to its Member States and works closely with them to address priority health issues and challenges.

Dr Ali Ardalan, MD, PhD is a public health professional with about two decades of experience in arena of health emergency management at various managerial, policy making, advisory and academic capacities. Currently he is the Regional Adviser and Head of the Health Systems in Emergencies Lab at WHO EMRO, with a focus on health systems recovery from emergencies, operationalization of humanitarian-development-peace nexus, and promoting health of refugees and migrants in the Eastern Mediterranean Region. Dr Ardalan was the founding chair and Professor at the Department of Disaster Public Health at Tehran University of Medical Sciences, Senior Fellow at Harvard Humanitarian Initiative, and a Visiting Scientist at Harvard School of Public Health.
**Ms Baltica Cabieses** is a nurse-midwife with a diploma in university teaching, master in epidemiology and doctorate in health sciences (social epidemiology) from the University of York, United Kingdom.

She is Professor and Director of the Social Studies in Health Program at Universidad del Desarrollo in Chile, senior visiting scholar at the Department of Health Sciences at the University of York, Co-leader of Lancet Migration for Latin America and coordinator of the Chilean Network of Research on Health and Migration. Her research includes social inequities in health, health of international migrants and participation of patients in decision-making on health coverage. She has published six academic books, participated in more than 45 research projects in Chile and abroad and has over 140 scientific publications.

**Dr Gianfranco Costanzo** is Health Director at the Italian National Institute for Health, Migration and Poverty, which provides health assistance to refugees and disadvantaged Italian people and develops low-threshold access models to the national health service for people in health poverty. Main tasks are development and promotion of policies against inequalities in health. Dr Costanzo directed the Complex Unit for International Relations, with the Regions and Project Cycle Management at the Italian National Institute. He worked in the Italian Ministry of Health as responsible officer of the Alliance of the Italian hospitals worldwide as well as Italian expert at the Enlargement Group of the European Union’s Council of Ministers. Prior to this, he worked at the European Commission Services in Luxembourg as Italian Detached Expert on Public Health.
Dr Suraya Dalil is the Director of the WHO Special Programme on Primary Health Care. She was Minister of Public Health in Afghanistan from March 2012 through 2014 and Acting Minister of Public Health from January 2010 to February 2012. Dr Dalil was Ambassador and Permanent Representative of the Islamic Republic of Afghanistan to the United Nations and international organizations based in Geneva and Ambassador to Switzerland from October 2015 to March 2019. Her profile encompasses humanitarian leadership, health expertise and diplomacy. She holds a medical degree from Afghanistan and a Master’s Degree in Public Health from Harvard University, United States, where she is a visiting university fellow.

Ms Ugochi Daniels, appointed as IOM’s Deputy Director General – Operations in May 2021, has over 27 years of diverse managerial experience with donor and United Nations entities, academia and private sector institutions. Prior to joining IOM, Ms Daniels was the Chief of Staff at the United Nations Relief and Works Agency for Palestine Refugees covering Jordan, Lebanon, the Syrian Arab Republic and the Occupied Palestinian Territory. She was also the United Nations Resident Coordinator and Designated Official for Security in the Islamic Republic of Iran from 2018 to 2020.

From 2013 to 2018, Ms Daniels was the Chief of Humanitarian and Fragile Contexts Branch at the United Nations Population Fund (UNFPA) Headquarters covering over 70 countries where UNFPA was responding to emergencies. Her stint at UNFPA includes assignments in the Philippines (Country Representative, 2010–2013) and Nepal (Deputy Representative, 2007–2010). Ms Daniels joined the UNFPA in 2002 as the Deputy Programme Manager for Africa Youth Alliance (2002–2007) covering Botswana, Ghana, Tanzania and Uganda.
**Dr Tamás Evetovits** is the Head of the WHO Barcelona Office for Health Systems Financing. He is leading WHO’s technical assistance to Member States on health financing in the WHO European Region. A key part of his work is on monitoring financial protection in WHO European health systems and improving coverage policies to reduce financial hardship and unmet need. He has extensive experience in training and consultancy in health financing policy and capacity-building in countries of central and eastern Europe. He is a medical doctor by training and holds two masters’ degrees in health policy and management from Semmelweis University, Budapest, and the University of London.

Elected by the General Assembly, **Filippo Grandi** became the 11th UN High Commissioner for Refugees on 1 January 2016. He leads UNHCR, which operates in 135 countries providing protection and assistance to more than 82 million refugees, returnees, internally displaced people, as well as stateless people. Dr Grandi, an Italian national, has been engaged in international cooperation for 35 years and holds degrees in modern history and philosophy, as well as an honorary doctorate from the University of Coventry, United Kingdom.
Professor Feras Ibrahim Hawari was appointed Minister of Health for the Hashemite Kingdom of Jordan in March 2021. He is also the Chairman of the Jordanian Medical Council, the President of the High Health Council and the chairman of the Board of Directors of Prince Hamzah Hospital.

He has been President of the Jordanian National Centre for Disease Control since December 2020 after working at King Hussein Cancer Centre for 16 years, where he occupied many positions, including Clinical Professor of Medicine, Executive Director of the Cancer Control Office, Chief of Pulmonary/Critical Care Unit, Chairman of the Institutional Review Board and permanent member of the Executive Council. He also worked as Senior Staff Fellow of Pulmonary/Critical Care at the American National Institutes of Health in Bethesda, United States from 2000 to 2004.

Professor Hawari has been on the American Board of Critical Care Medicine and the American Board of Pulmonary Diseases since 2000, the American Board of Clinical Pharmacology since 1997 and the American Board of Internal Medicine since 1996. He was awarded the 2016 Judy Wilkenfeld Award for International Tobacco Control Excellence, and Ibn Sinna Award for Best Physician in Critical Care Study at the World Federation of Societies of Intensive and Critical Care Medicine conference in April 2011. In 1996, he was awarded the Dexter Levy Memorial Award for Excellence in Bedside Medicine at the State University of New York Buffalo Graduate Medical and Dental Education Consortium Program, United States.
**Sally Hayward** is a researcher funded by the Medical Research Council of the United Kingdom and based jointly at St George’s, University of London and the London School of Hygiene & Tropical Medicine. She is a mixed methods researcher with expertise in migration and infectious disease and a specific interest in the role of mental disorders in tuberculosis in the WHO European Region. More recently, she has examined risk factors and vulnerabilities for COVID-19 in migrant populations.

**Dr Natasha Howard** is an Associate Professor at the National University of Singapore Saw Swee Hock School of Public Health and the London School of Hygiene & Tropical Medicine. She is an interdisciplinary health policy and systems researcher, with over 20 years’ experience in low- and middle-income countries. Her research focuses on strengthening health system responses during protracted adversity (e.g. fragility, complex emergencies or displacement) and infectious disease control. Her teaching has included developing and managing postgraduate courses and modules, editing and writing textbooks, supervising doctoral and masters student research and mentoring students and professionals.
Dr Zsuzsanna Jakab, a native of Hungary, was appointed Deputy Director-General of WHO in March 2019, after having served as WHO Regional Director for the European Region for nine years. The Deputy Director-General’s portfolio includes WHO’s technical programmes for universal health coverage, the life course, communicable and noncommunicable diseases, healthier populations and antimicrobial resistance, alongside other programmes.

Dr Jakab has held a number of high-profile national and international public health policy positions in the last three decades. She served as the founding Director of the European Union’s European Centre for Disease Prevention and Control in Stockholm, Sweden. Between 2005 and 2010, she built this into an internationally respected centre of excellence in the fight against infectious diseases. Between 2002 and 2005, Dr Jakab was State Secretary at the Hungarian Ministry of Health, Social and Family Affairs. Between 1991 and 2002, she worked at EURO in a range of senior management roles.

Dr Rüdiger Krech is the Director of the Department of Health Promotion at WHO in Geneva since September 2019. He heads WHO’s work on risk factors such as tobacco consumption and harmful use of alcohol; he is responsible for work on health-promoting settings and programmes increasing physical activity. In addition to the normative work, his team supports Member States in public health legislation and ways to impose additional taxes on unhealthy products. Prior to this, Dr Krech was the Director of Universal Health Coverage and played a key role in placing this issue on the global health agenda. From 2009 to 2014, Dr Krech was the Director of Social Determinants of Health and Equity and was responsible, among other things, for organizing the World Conference on this topic.
Dévora Kestel is a senior mental health policy specialist with more than 25 years of international experience in Europe, the Caribbean and Latin America, implementing and advising governments on national policies related to mental health systems. She is a strong advocate for the rights of people with mental health issues.

Ms Kestel obtained her masters degree in psychology from the Universidad Nacional de la Plata in Argentina and her masters in public health at the London School of Hygiene & Tropical Medicine, United Kingdom. After completing her university studies in Argentina she worked for 10 years in the development and supervision of community-based mental health services in Trieste, Italy. In 2000, she joined WHO as a mental health officer, first in Kosovo and then in Albania where she became the WHO Representative to Albania. In both, she worked closely with the ministries of health to help to establish comprehensive community-based mental health systems.

In 2007, Ms Kestel joined PAHO/WHO as the Sub-regional Mental Health Advisor for the English Speaking Caribbean Countries, based in Barbados. In 2011 Ms. Kestel was appointed as Regional Mental Health Advisor, based at the headquarters in Washington (DC), providing technical cooperation in the mental health field to the entire region. In 2015, she became the Unit Chief for Mental Health and Substance Use at PAHO/WHO. Over the years, Ms Kestel has contributed to and co-authored publications in the area of mental health. Since 2019 Ms Kestel has been the WHO Director of the Department of Mental Health and Substance Use.

7 (in accordance with Security Council resolution 1244 (1999)).
Ms Florence Lozet is an Urban and Migration Analyst for Cities Alliance. She oversees the forced migration component of the Cities and Migration Global Programme, which is being implemented in Uganda, Ethiopia, Somalia and Kenya. She holds masters’ degrees in human geography and international relations from King’s College London, United Kingdom, and Université catholique de Louvain, Belgium. She has over seven years of experience working in urban development with municipalities from the Horn of Africa.

Dr Awad Mataria is the Director of Universal Health Coverage/Health Systems at WHO EMRO. Dr Mataria has more than 15 years’ experience in health system strengthening, health economics and health financing. For the last 10 years, he has been supporting countries of EMRO to reform their health financing systems to move towards universal health coverage. Dr Mataria has a doctorate in health economics and a masters in health system analysis, following his undergraduate degree in pharmacy. His areas of expertise are: universal health coverage; health systems financing and organization; social health insurance; using economics in health-care priority setting; measuring the benefits of health care, mainly using stated preferences techniques; economic evaluation of health-care interventions; and national health accounts. Dr Mataria has several publications in high impact journals, including the Journal of Health Economics, Health Economics and The Lancet. He has also presented at several international and regional conferences.
**Dr Bente Mikkelsen** is Director, Noncommunicable Diseases in the Division of Universal Health Coverage/Communicable and Noncommunicable Diseases, WHO headquarters in Geneva.

She was formerly Director, Division of Noncommunicable Diseases and Promoting Health through the Life-course at EURO in Copenhagen, Denmark, Head of Secretariat for the Global Coordination Mechanism on the Prevention and Control of Noncommunicable Diseases at WHO headquarters from its inception in 2014 as well as a former CEO of the Southern and Eastern Norway Regional Health Authority.

Dr Mikkelsen is trained as a gynaecologist and obstetrician and holds a master’s degree in health administration and management from the University of Oslo, Sweden.

Her current focus is on achieving the Sustainable Development Goals through the reduction of premature deaths from noncommunicable diseases in the context of WHO’s General Programme of Work, and working across sectors with multistakeholders, within and beyond the health sector using innovation, implementation research, health literacy and new technologies.
**Dr Nadwa Rafeh** is a Senior Health Specialist at the World Bank, in the Europe and Central Asia Region. She is a health services organization and policy expert with more than 20 years of experience in the design, implementation and evaluation of health-care programmes. In her current capacity, Dr Rafeh is leading the World Bank health portfolio in Turkey and supports several operations in the Europe and Central Asia Region. Prior to joining the Region, Dr Rafeh led several World Bank operations in the Africa and the Mashreq Regions, engaging in policy dialogue and providing technical assistance in the areas of health financing, universal health coverage and health sector reforms.

**Guglielmo Schininà** is Head of Mental Health, Psychosocial Response and Intercultural Communication at the IOM. He is an expert in psychosocial activities in war-torn situations and disasters, with vulnerable migrants and victims of trafficking, and in cultural integration. He has worked as manager of psychosocial programmes and as a psychosocial technical advisor and psychosocial trainer in more than 70 countries worldwide, including in Europe, the Middle East, east and west Africa, Asia and the Caribbeans, for different organizations including for the United Nations Children’s Fund in the Republic of Moldova, the United Nations Development Programme in Serbia, the Italian Consortium of Solidarity and War Child and the Catholic University of Milan.
Dr Santino Severoni is Director of the global Health and Migration Programme, Office of the Deputy Director-General, at the WHO headquarters in Geneva. He is a medical doctor, health economist, epidemiologist and experienced systems management.

He has over 24 years of experience as an international senior technical advisor and executive, worked for WHO, governments, nongovernmental organizations and foundations in eastern Africa, the Balkans, central Asia and Europe. He has dedicated his work to global health, focusing on health sector reforms, health systems strengthening, health diplomacy, aid coordination/effectiveness, management of complex emergencies. He has acted as a WHO Representative in Albania and Tajikistan. Since 2011, he has been leading the work on health and migration in EURO. In 2019 he was appointed EURO Special Representative on Health and Migration and Director a.i. on Health Systems and Public Health.

In June 2020, he was appointed Director of the global PHM at WHO headquarters in Geneva to lead WHO’s global work on health and migration.
2021 GLOBAL SCHOOL SECRETARIAT

**PHM, WHO headquarters:** Santino Severoni, Giuseppe Annunziata, Cetin Dogan Dikmen, Alexandra Ladak, Ana Cristina Sedas, Veronica Cornacchione.

**WHO EMRO:** Awad Mataria, Ali Ardalan, Tonia Rifaey, Omid Mohit.

**WHO Jordan Country Office:** Jamela Al-Raiby, Saverio Bellizzi, Banan Saad Hamdallah Kharabsheh, Emanuele Tacconi, Omar Al-Abachee, Bashar Elias, Nazeema Sheerin Muthu, Olle Mjengwa, Ghadeer Tamimi.

The 2021 Global School was organized in collaboration with WHO EMRO and the WHO Jordan Country Office, and hosted by the Ministry of Health of the Hashemite Kingdom of Jordan with the close involvement and support of Huda Hababneh and Jaber Al-Daod.

*The School is a collaborative effort involving WHO regional offices and country offices.*

**ABOUT THE HEALTH AND MIGRATION PROGRAMME (PHM)**

The WHO PHM brings together WHO’s technical departments, regional and country offices, as well as partners, to secure the health rights of refugees and migrants and achieve universal health coverage. To this end, the PHM has five core functions: to provide global leadership, high level advocacy, coordination and policy on health and migration; to set norms and standards to support decision-making; to monitor trends, strengthen health information systems and promote tools and strategies; to provide specialized technical assistance, response and capacity-building support to address public health challenges associated with human mobility; and to promote global multilateral action and collaboration.
“This course addresses a critical and often neglected topic in global health. …In much political and social dialogue, there are many negative attitudes and stereotypes about refugees and migrants. Building a better understanding of the public health implications of population movements can help to change this negative narrative.”

Dr Tedros Adhanom Ghebreyesus, Director-General, WHO.
Opening remarks at the WHO e-learning Summer School on health and migration 2020.