



Statement by H.E. Archbishop Ivan Jurković, Permanent Observer of the Holy See
to the United Nations and Other International Organizations in Geneva
at the 144th Meeting of the Executive Board of the World Health Organization
Agenda Item: 6.4 – “Promoting the health of refugees and migrants”,
including Draft global action plan, 2019-2023
30 January 2019

Madame Chairperson,

The Holy See notes the further development of the Draft Global Action Plan, 2019-2023 on Promoting the health of refugees and migrants and wishes to call particular attention to the urgency of the worldwide health care needs of migrants and refugees, as well as to the public health impact of further delay in addressing such needs in a comprehensive, equitable, and concerted manner.

The Report of the Director General provides statistical data on the significant growth, by 49%, of international migration between the years 2000-2017. It also highlights the particular vulnerabilities, including those that are health-related, of 68.5 million forcibly displaced people, comprised of officially recognized refugees and internally displaced persons, as well as of 10 million stateless persons. As Pope Francis has pointed out on many occasions, however, “... the issue of migration is not simply one of *numbers*, but of *persons*, each with his or her own history, culture, feelings and aspirations... These persons, our brothers and sisters, need ‘ongoing protection’, independently of whatever migrant status they may have ... All of them hope that we will have the courage to tear down the wall of ‘comfortable and silent complicity’ that worsens their helplessness; they are waiting for us to show them concern, compassion and devotion.”¹

My Delegation further notes the five priorities² outlined in the Draft Global Plan. Progress on the recommended actions to address the social determinants of health and accelerating

¹ Message of Pope Francis to the Holy See – Mexico Colloquium on International Migration, Vatican City, 14 June 2018.

² Priority 1: Reduce mortality and morbidity among refugees and migrants through short- and long-term public health interventions; Priority 2: Promote continuity and quality of care, while developing, reinforcing and implementing occupational health and safety measures; Priority 3: Advocating mainstreaming refugee and migrant health in the global, regional and country agendas, and promote the following: refugee and migrant-sensitive health policies, and legal and social protection; the health and well-being of women, children, and adolescents living in refugee and migrant settings; gender equality and empowerment of refugee and migrant women and girls; and partnerships and inter-sectoral, intercountry and interagency coordination and collaboration mechanisms; Priority 4: enhance the capacity to tackle the social determinants of health and

progress towards achieving the Sustainable Development Goals, including universal health coverage, as well as to improve overall communication with migrants and refugees and to counter xenophobia will require focused and concerted attention and action, especially since these issues currently exert such a strong impact on the overall wellbeing and both the physical and mental health of migrants and refugees worldwide.

The Holy See urges that the proposed Plan of Action acknowledge the need to engage a wide range of stakeholders in efforts to advance health promotion among refugees and migrants. While the engagement of Member States is essential to these efforts, many civil society organizations and faith-based organizations can and should be engaged in the complex and multi-faceted actions that will be required to accomplish this goal.

My Delegation wishes to express its deep concern about the inclusion, in the document, of references to so-called "reproductive rights". In particular, the Holy See reiterates that it does not consider abortion or abortion services to be a dimension of reproductive health or reproductive health services. The Holy See does not endorse any form of legislation which gives legal recognition to abortion. In a similar way, the Holy See considers the terms "sexual and reproductive health" and "sexual and reproductive health-care services" as applying to a holistic concept of health. Nor does it consider abortion, access to abortion, or access to abortifacients as a dimension of these terms.³ Finally, my delegation urges the deletion of reference, in this proposed Plan of Action, to the so-called "minimum initial service package" (MISP), which is recommended among "essential health services", in the WHO Framework of Priorities and Guiding Principles, particularly since some of the MISP kits contain abortifacients and tools to procure abortion.⁴

Thank you, Madame Chairperson.

accelerate progress towards achieving the Sustainable Development Goals, including universal health coverage; and Priority 5: Support measures to improve communication and counter xenophobia.

³ Statement of Reservations, Holy See Delegation, as noted in the Report of the Fourth World Conference on Women, Beijing, 4-15 September 1995.

⁴ Statement of Position by His Excellency Archbishop Bernardito Auza, Permanent Observer of the Holy See to the United Nations in New York, *after the adoption of the resolution by the General Assembly of the United Nations to endorse the outcome of the International Conference to Adopt the Global Compact for Safe, Orderly and Regular Migration*, UN Headquarters, New York, New York, 19 December 2018