

Medical Assistance is Scarcely Sought by Immigrants and Immigrant-Travelers in Spain

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To the Editor:

Immigrants have often been accused of overusing the health services in the host countries. However, Gimeno-Feliu et al. [1] argue the opposite in a study that proceeds to offer some explanatory reasons for the under-use of health services by immigrants. In order to provide holistic care, we had to deal with some of those evading factors when attending immigrants at the Tropical Medicine Consultation (TMC) and also when implementing and managing tailored preventative programs.

The low frequency of medical visits is especially striking among immigrant-travelers [2] and it sometimes gives rise to severe health problems for them and their children. After surveying 64 patients (43 men, 21 women) from 16 tropical and sub-tropical countries (mostly from western sub-Saharan Africa) in the waiting room of the TMC about travel-related risks, we found that up to 17 % didn't know where to have access to vaccinations or medical advice, despite their median residence time in Spain being 36 months (range 1 month–20 years). Up to 37 % of the surveyed patients had scheduled trips to their countries. Most of these impending immigrant-travelers (61 %) thought there were no health risks related to their travels (unpublished data).

In our daily practice, we could observe that reasons for the under-use of health services vary according to the geographical origin of immigrants. Some populations fear some diagnostic or therapeutic procedures. The most remarkable example is the reluctance to blood testing among some sub-Saharan Africans. A qualitative research performed in Spain shed some light on how to overcome this barrier [3]. Other great barriers for immigrants to attend healthcare facilities are their employment situation and their time incompatibility, especially regarding Latin-American immigrants. Our group thus decided to adapt working hours to the needs of the target population in order to ensure a good attendance rate for a Chagas disease program focused on health education and screening. On the other hand, some patients' failure to attend the consultation after the screening was due to work-related problems [4].

These results highlight the lack of information about how the health system works among immigrants, often regardless of the length of residence in the host country. This is a huge barrier for practitioners. It reasserts the need to adapt preventative programs and health assistance to immigrants, especially in terms of culture, language and social factors, as well as work-related conditions.

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