

Introduction

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First Measures



- A problem of border control
- Development of a perspective of integration
 - Non-integration as orientation
- Class analyses
 - „Being uprooted“ (Sayad) and psychosocial problems (broken identities)
- Migration as a “particular problem”



Content



- Brief reconstruction of the development of a new policy-field
- Central conceptual decisions - core beliefs
- Fields of intervention - pragmatism
- Trends - from the multicultural or universalistic approach to the concept of pluralistic society



General characteristics



- From migration to a settled existence
- Work, Family regrouping, asylum (eastern Europe), training & education
- Small families, large communities
- Healthy migrant



New Trends

- Diversification of the origins and acceleration of migration
- Small communities - transnationalism und diasporas
- Feminization of migration
- High and low skilled migration - segmentation of the labour market
- Precariousness of the legal status
- Normalization of migration
- (post-)Americanization of Europe?



Migrants as a health problem - the development of policy answers I

- **Universalism - open systems**
 - Marshalls (right to equity and equal chances) -> the welfare state and the access to education
- **Critique**
 - Statique view of society (steps to a middle class society as normality)
 - Flexibility of the economy and the dynamic of migration
- **Generally: the pluralization (also of marginality) as “megatrend”**



Consequences on Health of the New Trends

- Class, legal precariousness, working conditions and health
- Traumas of war - asylum seekers and refugees
- From „healthy to unhealthy migrant“



Migrants as a health problem - the development of policy answers II

- **Culturalization - communities**
 - culture influences behaviour (HIV/Aids-Orientation; self-help, communities)
- **Critique**
 - Relevance of the “system” compared to the “community” - De-culturalisation
 - Dynamic of the Migrant Communities
 - Development in the context of migration of enlarged identities
 - Against Taylor and with Habermas: “Muzealisation” of Communities
- **Which combination?**



Characteristics of the “new model”

- Multidimensional way of work against exclusion tendencies
- Pragmatic approach and relativization of universalism
 - Partial rights (differentiated citizenship)
 - Group and situation related projects
 - Difference sensitivity (migration mainstreaming) and empathy



Concluding remarks



Two analyses

- **Peter Koehn**, University of Montana
Improving Transnational Health-care Encounters and Outcomes: The Challenge of Enhanced Transnational Competence for Migrants and Health
- **Johan Mackenbach**, Erasmus Medical Centre of Rotterdam
Health in Colour - new insights from the Culture & Health Research Programme



Key elements

- Normalise difference sensitivity in the training of health care providers - and migrants
- No migrant is equal - necessity to differentiate (and to know: qualitative and quantitative monitoring, QA with ethnicity elements)
- Migration as normality - end of the assimilative policy model - end of the communitarian policy model; combining, pragmatically, measures



Key players

- Power of difference (real and potential power)
 - “Transnationalists” - analysis of social and human capital in a organisation
 - Work with social and human capital of migrants
 - Include difference in decision making through incorporation of “advocacy”



Health Care Services

- Relativisation/Reconsideration of the biomedical approaches
- Pluralization of medical approaches
- Reinforce discursive/communicative elements

- We are on the right way with the Amsterdam Declaration

