

Migrant population and health

An analysis of hospital medical statistics and literature research

Commissioned by the Federal Statistical Office as part of the federal strategy "Migration and health 2008-2013"

Florence Moreau-Gruet, Stéphane Luyet

Obsan, 2011

Summary

As part of the National Migration and Health Programme, the Federal Office of Public Health (FOPH) is developing a scientific basis to describe the situation of the migrant population with regard to health and to improve the state of health of this section of the population. In order to obtain information in those areas where knowledge on the health of migrants is lacking, the FOPH decided to carry out an initial monitoring of the health of the migrant population (GMM I in 2004) and then a second monitoring (GMM II in 2010) which enabled in-depth knowledge to be obtained on the health of population groups that do not speak any of Switzerland's official languages.

To complement this self-administered survey, the Federal Office of Public Health commissioned Obsan to make an analysis of the hospital medical statistics in order to examine the difference in hospitalisation rates between persons of Swiss nationality and various groups of foreigners resident in Switzerland. The empirical analysis was completed by a research of the literature.

A research of the literature revealed that in most European countries, there is very little research at national level to evaluate the health of first- and second-generation immigrants in relation to that of the indigenous population. Some countries with high levels of immigration, such as the Netherlands, and to a certain extent Sweden and Great Britain, are an exception to the rule. Countries like Belgium, Spain and Germany have recently introduced questions on migration into their health surveys. Literature research on the health of migrants in Switzerland has concentrated on five major topics: mental health, sexual and reproductive health, muscular and skeletal disorders, diabetes and cardiovascular diseases.

As far as nationality is concerned, the hospital medical statistics only list hospitalised persons by major regional groups. The analyses, therefore, focus on four groups of the Swiss foreign population, using the same grouping as that used in these statistics: persons from the "Middle East", of whom 82.3% are Turkish, persons from "Eastern Europe" of whom 87.7% come from a country from former Yugoslavia or Albania, persons from Western Europe of whom 78.6% come from either Portugal or Spain, and persons from Italy. In order to compare hospitalisation rates by different population groups, the age of persons in the survey was standardised. The analyses were carried out on the basis of 209 diagnostic groups and only the 25 most common diagnostics were presented.

The overall hospitalisation rate of persons from the Middle East, Western Europe and Eastern Europe and Italy are lower than that of Swiss citizens. Nevertheless, for several diagnostic groups, higher hospitalisation rates were observed for foreigners than were observed for Swiss citizens.

As far as the main diagnostics are concerned, higher hospitalisation rates were observed for flu and pneumonia among men and persons aged over 65 from the Middle East, Eastern Europe and Italy than among Swiss persons.

Higher hospitalisation rates are also observed in connection with sexual and reproductive health (abortion, pregnancy-related problems). A certain proportion of the differences can be attributed to the fact that foreign women have more children on average than Swiss women. But various studies have shown higher abortion rates among the foreign population, which has been attributed to a lack of access to contraception and to family planning services. Among persons from the Middle East, higher hospitalisation rates have been observed for mood disorders and stress among both men and women (in the 20 to 39 and 40 to 64 age groups) and for schizophrenia among men only (in the 20 to 39 age group). Persons from Western Europe have higher hospitalisation rates only for mood disorders and

stress in the 40 to 64 age group. Italians show no hospitalisation rates for mental health that are higher than those of Swiss persons.

From age 40 onwards higher hospitalisation rates for men from the Middle East have also been observed for back problems. Men from this region are particularly affected by difficult working conditions which could lead to musculoskeletal disorders. In addition they have higher hospitalisation rates for ischemic heart diseases. Higher rates are moreover observed for persons from Eastern Europe in the 40 to 64 age group as well as those aged 80 and older. Slightly higher rates can be seen for Italians.

Considerably higher hospitalisation rates with a secondary diagnosis of diabetes have been observed for both men and women among persons from Eastern Europe, the Middle East and Italy. Persons from Western Europe are not affected. These higher rates have been observed from age 40 onwards.

The hospital medical statistics is an annual survey covering practically all hospitalisations taking place in Switzerland. It provides very interesting information on the different hospitalisation rates by nationality. However, it does have certain limitations: information is only available at the level of major regional group and not by the migrants' country of origin; furthermore, countries are grouped together differently than in the FSO's statistics on the foreign population (PETRA) and there is no indication as to the date of arrival in Switzerland. In the light of these limitations, only the differences between the regions of the Middle East, Eastern Europe, Western Europe and Italy were analysed. This initial analysis could therefore be the subject of a more detailed study.