



Healthcare For Uninsured Migrant Populations in Ontario: What Do Nurses Need To Know?

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Accessibility and Costs of Healthcare for Refugee Claimants Following Changes to the Interim Federal Health Programme



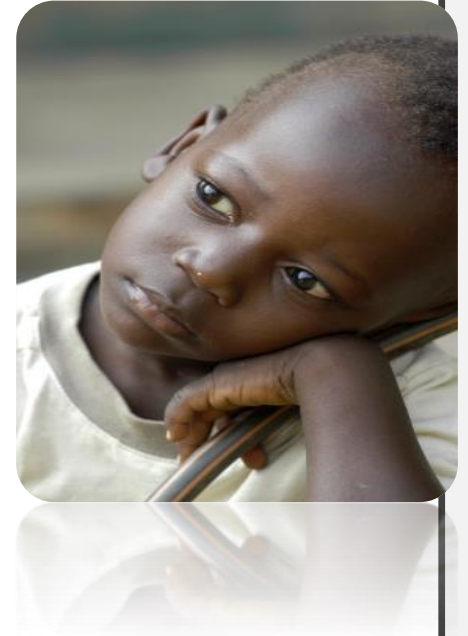
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**The Migratory Status
of the Child and
Limited Access
to Health Care:
Equity and Ethical Issues**



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WHO ARE THESE “UNINSURED MIGRANTS”?

*Individuals from another country residing in Canada (with the intent to stay here)
who do not have access to publicly funded coverage for healthcare/medical services*

Newly arrived
immigrants, PRs,
convention refugees

90-day wait period
upon arrival until,
then covered under
OHIP

Refugee
claimants/asylum
Seekers

Currently
immediately covered
under IFHP due to
policy revisions

Undocumented &
partially documented
migrants

No access to publicly
funded health care
coverage

WHAT IS THE ISSUE?

BARRIERS

Accessing care

- Delaying seeking care
- Being denied care
- Being asked to pay for services for which they are covered
- Feeling stigmatized when accessing care
- Limited care available by volunteer clinics

Delivery of care

- HCPs questioning sociocultural beliefs, experiencing cross-cultural barriers; Western medical model
- Unethical treatment by Canadian Border Security Agency when in the hospital

IMPLICATIONS

Negative health outcomes

- Direct negative consequences of not receiving care
- Delaying care until emergencies → sicker patients with more severe health conditions
- Not following up with healthcare providers
- Psychological distress associated with their migratory or precarious status

Financial burden on patients and healthcare systems/institutions

- Patients cannot afford to pay for care or prescriptions
- Overabundance of patients coming into dedicated but volunteer-run health care clinics for non-insured people

WHAT CAN NURSES DO?

CLINICAL CONSIDERATIONS

- Consider that patients may have different ideas of health and healthcare
 - may expect care to be similar to what they received in their country of origin
 - may be ashamed of, deny, or be unaware of certain illnesses (ex. mental illnesses)
- Ensure confidentiality, especially for undocumented and partially documented patients
- Ensure vaccinations are up-to-date
- Be aware that socioeconomic status may influence health issues (**social determinants of health**)
- Implement strategies to reduce language barriers
- Provide patient education: how to navigate the healthcare system, referral to community resources, etc.



COLLEGE OF NURSES
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ORDRE DES INFIRMIÈRES
ET INFIRMIERS DE L'ONTARIO

WHAT CAN NURSES DO?

ADVOCACY

- Become informed and stay up-to-date with political policies regarding healthcare
- Engage in advocacy → local, provincial, federal, as well as organizational



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