

*URB *ACT







AYUNTAMIENTO DE ROQUETAS DE MAR

ARRIVAL CITIES

Managing global flows at local level









Roquetas de Mar is located in the southern part of the Almeria province, on the western side of Almeria bay, in the region of Andalusia (Spain). The municipality has a surface of sixty square kilometers (23,45 sq. miles). Roquetas has experienced rapid population growth in recent decades. The population has grown from 28.000 in 1990 to 96.000 inhabitants (2017), although the actual population exceeds 105.000 inhabitants (in summer they could easily reach 250.000). By gender, 52,47% of the inhabitants are male and 47,53% female. This growth has been stimulated mainly by economic growth in intensive agriculture and tourism.









Roquetas de Mar has become one of the main settlement areas of the migrant population in Spain and Andalusia, with a percentage of almost 30% of its permanent resident population (27.182 inhabitants on December 2016). They come attracted by opportunities in the region's agricultural economy, and despite the economic crisis, new migrants continue to arrive in the City, some seeking work and others through the right to family reunion. This population is highly diverse. The main EU-migrant population is from Romania. The main groups of third country migrants are from Senegal, Morocco, Mali, Guinea Bissau and Ghana.







To answer to this reality, the city created the Municipal Office for Immigration in 1997. This service has dealt with 50.000 beneficiaries since 2002, who have made more than 500.000 requests. The Office leads on migrant integration policy and provides integration support services including:

- Drop in information, advice and referral services available to all migrants;
- Spanish language and culture classes at fractional cost;
- Local Forum for Integration and Citizenship





Roouetas de Mar





ayuntamiento de Roquetas de Mar

Municipal Office for Migrants

Cultural Trip to visit Almeria Middle Age Castle (Alcazaba)













The Municipality Health and Social Services departments provide additional services to reach out to migrant communities, ensuring that the population has access to health and social care.

NGOs provide a range of support services to migrant populations, particularly to those who are vulnerable, including women and children who are living without any financial support.







ayuntamiento de Roouetas de Mar

The city is very positive about its increasing population diversity, viewing this as an asset. Attempts by national media to portray Roquetas' diverse population as problematic, and to promote fears that large migrant populations are linked to drugs and crime, are strongly rejected locally.

The main challenge for Roquetas is to eliminate inequalities between the migrant and Spanish populations. The aim is to ensure closer working between relevant departments, with migrant integration as a common goal, to improve the standard of living for the migrant population in order that migrants contribute to the City's economy.







Immigration and Health Commission



AYUNTAMIENTO DE ROQUETAS DE MAR

5 City Councils

7 NGOs

Migrants Associations

Healthcare professionals from the Hospital and the District











Agencia Pública Empresarial Sanitaria Hospital de Poniente CONSEJERÍA DE SALUD JUNTA DE ANDALUCIA

Distrito Sanitario Poniente de Almería Servicio Andaluz de Salud **Consejería de Salud**





European Union



- Getting to know each other and mutual exchanges
- A <u>place</u> for participation in order to create ideas and work together with the purpose of improving the health of the immigrant population.
- A look on health from all sectors in order to bring together all viewpoints
- Contrasting ideas and making the best out of everyone's potential
- Bringing together all social agents





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Roquetas de Maf









FICHA ACTIVIDADES DE PROMOCION DE SALUD EN POBLACION INMIGRANTE

AYUNTAMIENTO.....

ONG..... ASOCIACIÓN INMIGRANTES.....

CENTRO SALUD.....

POBLACION	LUGAR	TIPO DE ACTIVIDAD	TEMAS A TRATAR	RECURSOS	CUANDO

Población: especificar a quien se dirige la actividad: población inmigrante en general, población inmigrante irregular, padres, mujeres, jóvenes o niños. Profesores de español, agentes de salud, mediadores, etc

Lugar: especificar sitio y si estaría incluido en espacios de trabajo existentes: Ejemplo: colegios e institutos a los inmigrantes que acuden a clases de español.

Tipo de actividad: charla, taller, grupo de trabajo, actividad formativa, participación en semanas culturales, jornada de asociaciones, difusión matrila educativo, etc

Temas: Relacionar los temas que consideréis importante abordar

Recursos: se trata de plantear los recursos con los que se cuenta para llevar a cabo la actividad, tanto humanos como materiales.

Cuando: fechas aproximadas en las que se considere que se puede realizar la actividad



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European Union European Regional Development Fund



Work teams by town: promoting local networking - 30 proposals on



immigrant women





Trabajar en red por la salud de la mujer

Aguadulce 12 Diciembre 2008

DISTRITO SANITARIO PONIENTE. DELEGACION PROVINCIAL DE LA CONSEJERIA DE SALUD DE LA JUNTA DE ANDALUCIA

Access to health programs



Education for health within the community

European Union

Addressing women in a vulnerable situation







Spanish lessons as a place for Education for Health

EFH ACTIVITIES HAVE BEEN CARRIED OUT IN COLLABORATION WITH NGOS, CITY COUNCILS...

ayuntamiento de ROQUETAS DE MAR









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European Union



TRAINING HEALTH AGENTS



Training in:

- Accessibility to the health system
- Priority contents in health: promoting work among peers
- Agreed within the Immigration
 Commission





European Union European Regional Development Fund

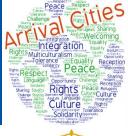






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Working with Immigrants Associations and NGOs at culture seminars meetings









- Support
- Relationship on a peer-topeer basis: availability
- Public acknowledgment of their work







2012-2013





The Immigration and **Health Commission is** designing an action plan to inform the immigrant population about healthcare services which is targeted to **Immigrants Associations Technical staff at city** councils and NGOs













- Malaria: Traveller's health
- Ebola: Action plan aimed at preventing the disease and fighting xenophobic attitudes towards the black population















Projects

Projects carried out with the Vicar City Council

- Promoting health among immigrant women
- Household cleanliness and hygiene to prevent infectious diseases
- Spanish lessons
- Local action plan on health

Projects carried out with the Roquetas City Council

Intervention plan for food facilities at the impoverished quarter "The 200 Dwellings"
European project "Healthy and Wealthy Together"
Spanish lessons

•Project "Arrival Cities"







ayuntamento de Roquetas de Mar









https://www.youtube.com/watch?v=1CE5ti4HS0c

AYUNTAMIENTO DE ROQUETAS DE MAR

Ms. Pilar Baraza: Our Commission of Migration and Health was born in the context of the Western Area of Almeria Province, a context of a very wide cultural diversity, counting on people who come from more than a hundred countries. Since it was set up in the year 2008 we identified a series of needs with which we want to work in a coordinated and complementary way among several institutions and social networks. The Commission has represented a meeting point for the entities who work on it, Municipalities, general NGOs, and local migrants' NGOs. Their aim is to exploit the synergies to improve migrant population health. This experience is innovative and it has managed to last over time. Its richness is that from our meeting point we can identify needs as well as having a proactive attitude in the search of solutions. We can also act in critical situations. For instance, when there were doubts about migrants' access to health services or during last Ebola virus crisis, we managed to build up actions to work together with the whole population of the Western Area of Almeria Province.

Ms. Juana Montoya: This is the model we are ready to keep on working on, because our staff have a different look when they work with migrant population. We know we have to care about them in the same way as the rest of the population, because this is the only way to reach levels of quality in their health appropriate to the times we are living and to this population circumstances.







This is a comprehensive program of social and health care aimed at the migrant population in general, and within this population specially towards those who suffer a migratory duel, or those who might suffer from any type of mental disorder in particular, especially those rated as severe and at risk of social exclusion.

Objectives

- Easy access to the mental health network.
- Foster, among professionals, an intercultural attitude, and a holistic view.
- Early and contextualized Diagnosis.
- Ensure agile intervention.
- Redistribute and optimize existing health care resources.
- Achieve comprehensive and participatory care.
- Research and epidemiologic studies.
- Teaching and training professionals.



ROQUETAS DE MAR







- Networking.
- Work with the migrant population.
- Fluid coordination in three fields: health-social-family.
- Interdisciplinary and intercultural intervention.
- Evaluation of the current sociocultural context.
- Intervention plans put into context and culturally adapted to needs and requests.
- Work with protocols of intervention.
- Carry out several interventions in a "single act", whenever possible.
- Development of resource guide.

Intervention protocols

- 1. Migratory Duel.
- 2. First psychotic episode and serious Mental disorder.
- 3. Social intervention and networking.
- 4. Dual pathology.







From our experience during these years we deduce that Networking has been the pillar and the key to achieve the objectives of the program. We consider networks as support systems which include all the institutions, public and private, informal and professional, that can intervene to provide better attention to the migrant population with mental health needs.

Mental health devices provide support and the necessary information so that they can be collaborating agents in detection, support, care and social support for those who may suffer from a simple migration duel to a serious mental disorder.







Current situation II



In the majority of occasions, people suffering from severe mental disorders often have difficulties to ask for support healthcare. If there is any family member, any acquaintance, any association... *someone* who worries and takes care to provide them the necessary support, they may not receive this attention with the necessary haste and prevention.

That is why it is important to take into account the work of "cultural caregiver" provided by these networks and to create bridges of communication between them and the network of mental health care, in order to ensure the continuity of care from an intercultural and holistic perspective.

Interventions, therefore, focused on the social intervention Protocol and on networking as well as the Protocol of first psychotic episode and serious mental disorder.







Main achievements

- Better access to mental health services. Associations and NGOs have access quickly and without paperwork for cases that are detected with possible psychotic pathology, with immediate assessment and possibly in "single act".
- There is also an active uptake of cases to ensure continuation of treatment in coordination with the inpatient unit, after admissions.
- Jointly with the network of support interventions are carried out in the community, even with possible serious mental disorders who live on the street.









- Immigrants have been developing self-help groups in collaboration with NGO with women as prevention of complicated migratory duel.
- People with serious mental disorder sometimes lose the support of friends, work, housing... and they need help after having overcame the acute phase of the disease, to continue with their life and expectations. In these cases the support network has structured supports for free and immediate delivery of treatment, food support, support for rental, procedures for documentation, etc. It must be borne in mind that these people may suffer a double stigma, as mentally ill and migrants alike.





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Main achievements III

- Professionals can use a tool for intervention with a cross-cultural approach adapted to the needs of the migrant population.

- We also highlight the participatory and active role they have in the design of its plan of action, with respect to their culture "in health" and the empowerment of the patient, enhancing its strengths and coping capabilities.

- We have seen greater satisfaction of users and their environment.









Finally, we could say that although migration is not a risk factor on its own, as for mental health it is true that too often it has an enormous emotional burden of suffering traumatic experiences, broken dreams, situations of extreme necessity and vital risk making threatening mental stability. For this reason the host society must be prepared to provide them with the necessary resources to deal with moments of mental imbalance.









MAIN CITY CHALLENGES = QUESTIONS TO THE GROUP

- The migrant population is more transient than the Spanish population; people come and go, moving on to new job opportunities, back to country of origin, returning to Roquetas. So the city is managing new arrivals and settled migrant populations at the same time.
- Migrant populations suffer greater inequality than the Spanish population; they are more likely to be unemployed and to have lower incomes.
- Irregular migrants are at greater risk than migrant with legal status. Irregular migrants are in higher risk jobs, including prostitution, and have less access to public health and other support services.







GrazieThanksDankeMerciGraciasΕυχαριστούμεHvalaObrigadoKiitosPaldies





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