

Refugee Health

January 2016

A refugee is an individual who is unable to return to his or her country due to risk of punishment, unfair treatment, risk of torture, fear of persecution (related to race, religion, political views, nationality, sexual orientation etc.), and ultimately risk to life¹.

According to Refugee Health Vancouver, there are two categories of refugees including:

- a. refugees from overseas (individuals who are government assisted or privately sponsored and supported prior to arriving in Canada), and
- b. refugee claimants (those who claim refugee status upon arriving in Canada).

Background

With the current Syrian refugee crisis, nurses, as well as the public have called on the federal government to address their plan on the intake of refugees. This crisis also serves as an opportune time to address the existing issues in refugee healthcare policy, specifically because access to healthcare services among refugees in Canada is an ongoing issue.

The Interim Federal Health Program (IFHP) has been in place for refugees for decades. The program previously provided coverage for a wide range of health care services for refugee claimants until they left the country or became eligible for provincial healthcare². However, in 2012, the federal government made significant changes to the IFHP, denying and restricting refugee claimants access to vision, dental and prescription drug coverage, and denying refugee claimants from the 37 [Designated Countries of Origin](#) (also known as “safe countries”) of any health coverage that was previously provided, except when deemed as a public health risk³. According to the Canadian Doctors of Refugee Care, rationale for these changes included cost-savings, deterrence of refugees from coming to Canada for healthcare, and the argument that refugees receive healthcare that is superior to the rest of Canadians.

Since then, the federal government had faced significant opposition from the public and professional associations such as the [Canadian Association of Refugee Lawyers](#), [Canadian Doctors for Refugee Care](#), [Canadian Nurses Association](#), and the [Registered Nurses Association of Ontario](#) in regards to changes made to the program. In 2014, the Federal Court ruled against changes made regards to changes made to the program. In 2014, the Federal Court ruled against changes made to the IFHP stating that it led to “cruel and unusual treatment” and violated section 12 and 15 of the Charter of Rights and Freedoms. The federal government was given four months to reinstate its original policy. The government is currently appealing the decision, and has implemented [temporary measures for the IFHP](#), as of November 5th, 2014.

In November 2015, the newly elected federal government announced that they would reinstate full health care for refugees. Currently, the federal government has been prioritizing and addressing the resettlement of 25,000 Syrian refugees, of which 3,500

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¹ Refugee Health Vancouver. (2015). [Refugee Categories](#).

² Canadian Association of Refugee Lawyers. (2014). [Press Release: Federal Court Strikes Down Refugee Health Cuts](#).

³ Canadian Doctors for Refugee Care. (2015). [The issue](#).



Issues Brief

will be resettling in B.C. According to Immigrant Settlement Services of B.C., the province usually accepts around [900 government assisted refugees per year](#). This target is now expected to be met by the end of February 2016, and will prioritize those who are most vulnerable, including women at risk, families and LGBTQI claimants. Currently, Syrian refugees are eligible for [Type 1 benefits](#) under the IFH program, which includes basic coverage, supplemental coverage and prescription drug coverage.

Key Messages:

- All refugees, regardless of country of origin should be treated equally and provided the same healthcare coverage.
- Changes to the IFHP have been declared unlawful and unconstitutional by the Federal Court.
- Nursing has been vocal in opposing these cuts, and has played a role in advocating for the rights of refugees.
- Changes to current policy are needed to ensure that refugees are not discriminated on based on their country of origin.
- The new federal government has committed to reinstating full health care for refugees.

Share your perspectives:

3. For RNs and NPs working in refugee health, what stories can you share that can illustrate the current state of refugee health in Canada?
4. How can ARNBC better support nurses who work with refugees?
5. What short term and long term ideas come to mind?

Further Reading

- Government of Canada. (2015) [Interim Federal Health Program: Summary of Benefits](#).
- Huffington Post: [‘Old Stock Canadians’ referenced by Harper amid refugee debate](#).
- [Refugee Health Vancouver](#).

