Migration and health in Austria

Charlotte Wirl
Bringing the Migrant Health Discourse into Policy, 29 Nov. 2012
GÖG (Gesundheit Österreich GmbH) was established in its current form by federal law on August 1, 2006

3 Business divisions are integrated in GÖG:

ÖBIG (Österreichisches Bundesinstitut für Gesundheitswesen – Austrian Health Institute), a well-known research institute established in 1973 by federal law to plan, regulate and promote the Austrian Health Care System

FGÖ (Fond Gesundes Österreich – Fund for a Healthy Austria), established in 1992 with the task to improve health promotion and prevention in Austria

BIQG (Bundesinstitut für Qualität im Gesundheitswesen – Federal Institute for Quality Assurance in Health Care), established in 2007 to guarantee the quality of health services rendered in Austria e.g. by quality registers and Health Technology Assessments (HTA)
Organisational Chart

ÖBIG – Österreichisches Bundesinstitut für Gesundheitswesen

- Prevention
- Health Care Reporting
- Health Care Planning
- Health Professions
- Health Economics
- Transplantation and Transfusion
- Long Term and Elderly Care

BIQG – Bundesinstitut für Qualität im Gesundheitswesen

- Department for structural and procedural quality in Health Care
- Quality register and Quality of outcome
- Quality reports and Health Information
- Quality and Efficiency

FGÖ – Fonds Gesundes Österreich

- Funding and development of health promotion projects
- Quality improvement and funding management
- Further training and international networks
- Empowerment

Gesundheit Österreich GmbH
Organisation Status

- Limited company owned by the Federal State of Austria
- State is represented by the Austrian Ministry of Health
- Non profit organisation
- Independent in our scientific work
Main tasks

- “Think-Tank” for the Austrian Health Care System
- Supporting Ministry of Health and other stakeholders in preparing policy briefs, statutory regulations, etc.
- Scientific research and analysis
- Provision of information for nationwide planning, regulation, governance and (economic) evaluation in health care
- Health Care Promotion and Preventive Health
- Development, implementation and evaluation of a nationwide quality system
- Participation in national and international projects and working groups
Selected tasks

- Health in all Policies

- Vulnerable Groups as a vertical issue
  
  - Health reporting (Austrian health report)
  
  - Health promotion: Targeting vulnerable groups for health promotion (healthy diet during pregnancy), obesity prevention...

  - Health care planning: Access to health care

  - ...
Austrian Health Care System

Key Facts I

- 8.5 Mio inhabitants
- Capital Vienna: 1.7 Mio inhabitants
- Member of the European Union since 1995
- Member of the Schengen and Euro zone
- GDP per capita (2011): 42,225 Euro
- 9 federal states (strong regional representation e.g. health sector)
- 11 % of GDP spent on health (76% from public sources)
# Austrian Health Care System Comparison

<table>
<thead>
<tr>
<th>Metric</th>
<th>OECD average</th>
<th>Austria</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total expenditure on health (% GDP)</td>
<td>9.5</td>
<td>11.1</td>
</tr>
<tr>
<td>Acute hospital beds per 1,000 capita</td>
<td>3.4</td>
<td>5.5</td>
</tr>
<tr>
<td>Hospital discharges (all causes) per 10 capita/yr</td>
<td>1.5</td>
<td>2.6</td>
</tr>
<tr>
<td>Physicians per 1,000 capita</td>
<td>461</td>
<td>500</td>
</tr>
<tr>
<td>Physicians consultations per capita/yr</td>
<td>6.4</td>
<td>6.9</td>
</tr>
</tbody>
</table>

Source: OECD Health Data 2012
Health Insurance

- Statutory insurance
- 9 provincial health insurance funds plus 10 occupational health insurance funds
- Access to insurance
  - Employment (automatically, based on income)
  - Free co-insurance of family members
  - Coverage for unemployed, elderly ...(social benefits)
- Contribution of employers, employees and state (coverage of deficits)
Austrian Health Care System Organization

- Large number of actors (different financing structures): Federal Government, Social Security Institutions, provincial states and social partners
- Out-patient care: Social Security (finance) and Federal Government (legislation)
- In-patient care: Provinces (finance) and Federal Government (legislation)
- Public Health services and administration: federal, provinces and local authorities

→ High complexity of funding and responsibility
Migration in Austria 1996–2011

International net-migration into Austria

Source: Statistik Austria 2012
### International net-migration
2004 to 2006 by selected nationalities

<table>
<thead>
<tr>
<th></th>
<th>2006</th>
<th>2005</th>
<th>2004</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Total</strong></td>
<td>27,477</td>
<td>49,172</td>
<td>50,582</td>
</tr>
<tr>
<td><strong>European Union</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>&quot;Old EU Member States&quot;</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Germany</td>
<td>9,076</td>
<td>9,402</td>
<td>7,598</td>
</tr>
<tr>
<td>&quot;New EU Member States&quot;</td>
<td>7,821</td>
<td>10,595</td>
<td>11,495</td>
</tr>
<tr>
<td>Poland</td>
<td>3,136</td>
<td>4,562</td>
<td>4,997</td>
</tr>
<tr>
<td>Slovakia</td>
<td>1,384</td>
<td>1,789</td>
<td>1,897</td>
</tr>
<tr>
<td>Hungary</td>
<td>1,333</td>
<td>1,304</td>
<td>1,078</td>
</tr>
<tr>
<td>Rumania</td>
<td>1,101</td>
<td>1,765</td>
<td>1,973</td>
</tr>
<tr>
<td><strong>Former Republic of Yugoslavia</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Bosnia</td>
<td>1,155</td>
<td>2,400</td>
<td>2,480</td>
</tr>
<tr>
<td>Croatia</td>
<td>298</td>
<td>643</td>
<td>804</td>
</tr>
<tr>
<td>Serbia</td>
<td>2,261</td>
<td>7,324</td>
<td>6,757</td>
</tr>
<tr>
<td><strong>Northern/ Western Europe</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>319</td>
<td>229</td>
<td>291</td>
</tr>
<tr>
<td><strong>South–Eastern Europe</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Russia</td>
<td>1,567</td>
<td>3,066</td>
<td>5,595</td>
</tr>
<tr>
<td>Turkey</td>
<td>1,949</td>
<td>5,004</td>
<td>5,270</td>
</tr>
<tr>
<td>Africa</td>
<td>642</td>
<td>2,221</td>
<td>3,233</td>
</tr>
<tr>
<td>America</td>
<td>830</td>
<td>1,310</td>
<td>1,141</td>
</tr>
<tr>
<td>Asia</td>
<td>3,282</td>
<td>5,316</td>
<td>5,917</td>
</tr>
<tr>
<td>China</td>
<td>287</td>
<td>756</td>
<td>1,125</td>
</tr>
<tr>
<td>Philippines</td>
<td>257</td>
<td>403</td>
<td>437</td>
</tr>
</tbody>
</table>

Source: Statistik Austria 2012
Migration in Austria

- Long tradition as “immigration country”
- Around 16% of the population born abroad (1971:8%)
- Around 11% of the population holds another citizenship
  - 36% from other EU or EFTA countries → right of residence
  - 64% from other countries

Source: Gächter 2008
Migration in Austria in numbers
Non-EU or EFTA migrants

- 546,000 official migrants from non-EU/ non-EFTA countries
  - 53% permanent right of residence (residents longer than 5 years)
  - 28% right of domicile (generally including right for employment)
  - 4% right for short term stay (generally including right for employment)
  - 16% asylum (different categories, generally no right for employment)

- 40,000 illegal migrants

Source: Gächter 2008
Historic view and regulations

- 1960: recruitment of temporary “guest-workers” (bilateral agreements with Turkey and Yugoslavia)
- Oil crisis → Alien Employment Act 1975
- Late 1970ies/early 80ies: start of family reunification
- 1990: Workforce quota
- Many updates of Alien Act (tightening regulations)

Source: Jandl 2003
Life Expectancy Austria

Source: Statistik Austria 2011; own calculation
Life Expectancy
Austrian inhabitants born in Austria or Turkey

Source: Statistik Austria 2007
Self perceived health in Austria

Born in Austria

Born outside Austria

Source: Statistik Austria 2006/07; own calculation
**Self perceived health in Austria**

**Place of birth Turkey and former Rep. of Yug.**

<table>
<thead>
<tr>
<th>Place of birth</th>
<th>Men</th>
<th></th>
<th>Women</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>%</td>
<td>OR</td>
<td>95%-CI</td>
<td>%</td>
</tr>
<tr>
<td>Austria</td>
<td>79.9</td>
<td>2.3</td>
<td>1.89-2.84</td>
<td>79.2</td>
</tr>
<tr>
<td>former Rep. Yug; Turkey</td>
<td>66.7</td>
<td>Ref.</td>
<td></td>
<td>62.0</td>
</tr>
</tbody>
</table>

**Source:** Statistik Austria 2006/07
Differences in self-reported health
(Turkey and FRY compared to Austrian average)

» Lower (perceived) quality of life
» Higher risks for pain
» Higher risks for obesity (Men OR: 1.75*; Women OR: 2.51*)
» Higher odds for smoking (Men OR 2.03*, Women OR: 1.44*)
» Higher risks for absence of physical activity
  (Men OR 1.35*, Women 2.04*)
» Lower vaccination and screening rates
» No general differences in chronic diseases
  » Higher risks in particular chronic diseases e.g. spine pain, depression, diabetes
  » Lower risks e.g. for allergies
» Same level of networks (relationships)
» Lower rates of alcohol abuse
Differences in health behavior

- Migrants have the same level of health care provision and preventative services (→ 99% of population covered),
- However, health behavior and health care usage shows differences when comparing migrants from Turkey/FRY with the Austrian average
  - More health problems reported, but higher life expectancy
  - Higher usage of outpatient hospital care
  - Lower usage of specialized physicians
  - Lower usage of preventative services

Source: Reinprecht 2012
Differences in health: young population
Health behavior

» **Smoking** aged 15–29: 47% of boys from Turkey and former Republic of Yugoslavia (Austria: 30%)
» Smoking aged 15–29: 33% of girls from Turkey and former Republic of Yugoslavia (Austria: 29%)

» No differences in **physical activity** in boys aged 15–34
» Lower rates of physical activities in girls aged 15–34 from Turkey and FRY
Differences in health among kids
Dental exam; comparison on place of birth of parents

% of 6 year olds without caries according to WHO

- Austria secondary education
- Austria no secondary education
- Migrant secondary education
- Migrant no secondary education

Cave: all migrants

Source: GÖG/ ÖBIG 2011
Differences in health among old people

Obesity; comparison on place of birth

Obesity and overweight rates

Source: Statistik Austria 2006/07; own calculation

Cave: all migrants
Differences in health among old people: Vaccination; comparison on place of birth

Vaccination rate influenza

- 75 and older
- 65-74
- 15 to 64

Cave: all migrants

Source: Statistik Austria 2006/07; own calculation
Closing remarks

- Health rather unattended in past integration policies
- *Health in all Policies* (e.g. integration) still a rather new topic
- Poverty/ lack of education a major health risk
  - But: higher life expectancy among Migrants
- Provision of health services is *not* the main issue but reaching/targeting vulnerable groups
- Demographic changes (ageing of population)
- Vision: Focus on resources (e.g. family networks), provide accessible services
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