



Mapping local and international literature Peer reviewed articles in Germany

	Summary	Reference/Link
1.	<p>The searches generated 1,190 hits; 52 articles met the inclusion criteria. Of these, 41 were quantitative studies (78.9 %), 10 qualitative (19.2 %), and 1 was a review (1.9 %). A total of 30 primary articles (58.9 %) analysed mental health aspects, followed by infectious diseases ($n = 12$, 23.5 %). Qualitative studies, mainly ethnographies and case studies, explored mental health and social determinants of health, providing evidence for the impact of living conditions on health and medical care. Few studies analysed chronic diseases ($n = 3$) or childhood illnesses ($n = 6$). No studies analysed the health needs or medical care of asylum-seeking women during pregnancy and child birth. In 62.7 % of the primary studies, a single sampling point was used to recruit asylum seekers. Nationwide external validity was given in two quantitative studies. The priority research areas identified are chronic diseases and childhood and maternal health. The divergence and heterogeneity of the studies hamper a comprehensive and comparable acquisition of knowledge and emphasize the need for collaborative research to close the existing evidence gaps.</p>	<p>Bozorgmehr K (2016). Systematic review and evidence mapping of empirical studies on health status and medical care among refugees and asylum seekers in Germany (1990–2014). <i>Bundesgesundheitsblatt - Gesundheitsforschung - Gesundheitsschutz</i>. 59 (5): 599–620</p> <p>https://link.springer.com/article/10.1007/s00103-016-2336-5</p>
2.	<p>The health of children and adolescents from families with insecure residence status could be poorer compared to other children with permanent residence permits in Germany due to exposure before and during flight. Their insecure residence status and their comparably low social status in the destination country may contribute towards access barriers to health care. However, selection effects might also lead to better health compared to other children in the destination country. This study compares the health status of children and adolescents with insecure residence status to that of other</p>	<p>Wenner J, Razum O, Schenk L, Ellert U, Bozorgmehr K. (2016). The health of children and adolescents from families with insecure residence status compared to children with permanent residence permits: analysis of KiGGS data 2003–2006. <i>Bundesgesundheitsbl</i> 59:627–635</p> <p>https://www.ncbi.nlm.nih.gov/pubmed/27090244</p>





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	<p>children with and without migration background in Germany. Among 17,245 children, 197 (1.1%) had an insecure residence status. Adjusting only for age and sex, an insecure residence status is associated with poorer subjective health (OR=3.12 (2.07–4.94)), mental problems (OR=1.83 (1.16–2.87)), an incomplete vaccination status (OR=2.0 (1.33–3.0)) and the use of emergency health services (OR=2.28 (1.2–4.36)). After adjusting also for social and migration status, only the association with the use of emergency care remains significant (OR=2.53 (1.18–5.43)). This association possibly indicates barriers to the use of regular primary care services, which requires further research</p>	
3.	<p>Due to war and destruction, many people have had to leave their homes in recent years and large numbers of asylum seekers and refugees sought shelter in European countries. In 2015 and In 2016, a total of more than one million people applied for asylum in Germany. This, in turn, represents the Existing health care structures face major challenges. From Public's point of view health is asking itself the question of the health and supply needs of asylum seekers and refugees.</p> <p>This article describes, on the one hand, the extent and legal framework of immigration. After Germany in the past two years. On the other hand, he is dedicated to the question of health and medical care for asylum seekers and refugees. It is striking that, so far, no representative data on the health situation of this population group There are. The studies so far have low case numbers</p>	<p>Frank L, Yesil-Jürgens R, Razum O, et al.(2017). Health and healthcare provision to sylum seekers and refugees in Germany. Journal of Health Monitoring. 2017; 2:22–42.</p> <p>https://www.rki.de/DE/Content/Gesundheitsmonitoring/Gesundheitsberichterstattung/GBEDownloadsJ/JoHM_2017_01_gesundheitliche_lage1b.pdf?__blob=publicationFile</p>
4.	<p>The article focuses exclusively on illustrating the effects of migration on the family life of refugees, and in particular on the education of refugee children. An aid offer for refugee parents to strengthen family skills is discussed. Eltern-Aktiv-Refugio Munich is a parent</p>	<p>Abdallah-Steinkopff, B. (2015). Kultursensible Elternberatung bei Flüchtlingsfamilien. ZFTB.Jg33(3)109-117 Culture-sensitive parental counseling for refugee families</p>





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	<p>training program that is adapted to the special needs of refugees and migrants. The manual contains five modules with pedagogical and migration-specific content intended to provide refugees and migrants with an orientation in view of the changed living conditions in exile, while making a differentiated reference to the different values and norms in Germany and the country of origin. The article takes into consideration issues related to the integrational knowledge, educational knowledge, communicational knowledge, self-care of parents and the consequences of being traumatized for children</p>	<p>Kultursensible Elternberatung bei Flüchtlingsfamilien https://www.erzieherin.de/files/paedagogisch_epraxis/69332601_KiTa_Recht_Abdallah.pdf</p>
<p>5.</p>	<p>Unaccompanied refugee minors in Europe are at high risk of developing mental health problems and experiencing poor quality of life. This study investigated the frequency of emotional and behavioral problems in unaccompanied refugee minors residing in youth welfare institutions in Germany, using data from both self-reports and caregiver reports. According to both self-reports and caregiver reports, the rates of internalizing problems in this sample were significantly higher than in norms, with frequencies ranging from 35 to 61 %. By contrast, externalizing problems were rated as significantly lower than for norms, particularly hyperactivity with frequencies ranging from only 4 to 7 %. Both sets of informants reported high levels of prosocial behavior. The findings of this study confirm that unaccompanied refugee minors are a highly vulnerable group, and suggest that mental health screenings should be done regularly in the youth welfare institutions that care for them.. Appropriate support systems should be developed and implemented, including access to mental health care as well as psychosocial and educational interventions within schools and youth welfare institutions.</p>	<p>Möhrle B, et al.(2016). Verhaltensauffälligkeiten und Lebensqualität bei männlichen unbegleiteten minderjährigen Flüchtlingen in Jugendhilfe einrichtungen in Deutschland . Kindheit und Entwicklung 25 : 204-215. doi.org/10.1026/0942-5403/a000206. https://econtent.hogrefe.com/doi/pdf/10.1026/0942-5403/a000206</p>

