

Publication

Improving primary healthcare access for asylum seekers and refugees:
a qualitative study from a swiss family physician perspective**JournalArticle (Originalarbeit in einer wissenschaftlichen Zeitschrift)****ID** 4694727**Author(s)** Oehri, J.; Chernet, A.; Merten, S.; Sydow, V.; Paris, D. H.**Author(s) at UniBasel** [Oehri, Johanna](#) ; [Chernet, Afona](#) ; [Merten, Sonja](#) ; [Sydow, Véronique](#) ; [Paris, Daniel Henry](#) ;**Year** 2023**Title** Improving primary healthcare access for asylum seekers and refugees: a qualitative study from a swiss family physician perspective**Journal** J Prim Care Community Health**Volume** 14**Pages / Article-Number** 21501319231181878**Keywords** Humans; *Refugees/psychology; Physicians, Family; Switzerland; Health Services Accessibility; Primary Health Care; asylum seekers; healthcare access; physicians; refugees**Mesh terms** Humans; Refugees, psychology; Physicians, Family; Switzerland; Health Services Accessibility; Primary Health Care

Since 2015 the need for evidence-based guidance in primary health care management of refugees, asylum seekers, and immigrants has dramatically increased. The aims of this study were to identify the challenges met by primary care physicians in Switzerland, by performing semi-structured interviews and to identify possible approaches and interventions. Between January 2019 and January 2020, 20 GPs in 3 Swiss cantons were interviewed. The interviews were transcribed, coded with MAXQDA 18, and analyzed using the framework methodology. Following relevant findings were highlighted; (i) problems relating to health insurance companies among (health-insured) asylum seekers and refugees were negligible; (ii) there is a high acceptance for vaccination by refugees, asylum seekers, and immigrants; (iii) limitations in time for consultations and adequate reimbursement for practitioners pose a serious challenge; (iv) the majority of consultations are complaint-oriented, preventive consultations are rare; and (v) the language barrier is a major challenge for psychosocial consultations, whereas this appears less relevant for somatic complaints. The following issues were identified as high priority needs by the study participants; (i) increased networking between GPs, that is, establishing bridging services with asylum centers, (ii) improved training opportunities for GPs in Migration Medicine with regular updates of current guidelines, and (iii) a standardisation of health documentation facilitating exchange of medical data, that is, digital/paper-based "health booklet" or "health pass."

ISSN/ISBN 2150-1327 (Electronic)2150-1319 (Linking)**URL** <https://doi.org/10.1177/21501319231181878>**edoc-URL** <https://edoc.unibas.ch/95317/>**Full Text on edoc** Available;**Digital Object Identifier DOI** 10.1177/21501319231181878**PubMed ID** <http://www.ncbi.nlm.nih.gov/pubmed/37394820>**ISI-Number** WOS:001018162000001**Document type (ISI)** Journal Article