

Illegal immigration in Malta and its Problems

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INTRODUCTION

Situated in the middle of the Mediterranean Malta has become constantly burdened with large numbers of immigrants fleeing from poor countries in Africa. The migrants flee their home countries to escape from social strife and civil and political unrest, and seek asylum in European countries.

Around 404,000 inhabitants live on the islands making Malta the most densely populated country in Europe. Malta, apart from suffering from overcrowding, has problems relating to resource shortage. The majority of consumer goods are imported and water levels, in spite of Malta being surrounded by water, are very low. Moreover, Malta’s energy resources are very scarce. The regular influx of illegal immigrants is only worsening the problem and is increasing the burdens of the Maltese government and general public alike.

MATERNITY CARE

Quite a number of illegal immigrants either arrive pregnant or have conceived since arriving in Malta. Lack of understanding of healthcare access, difficulty in communication and cultural issues have all contributed to making this population vulnerable.

This review will consider the impact presented to health professionals when caring for illegal immigrants during pregnancy, birth and the postnatal period. Late bookings for maternity care puts any women in a pregnancy high risk category as antenatal care would be considered to be suboptimal. Important dating scans and a general picture of the progress of a pregnancy are lacking when care starts during later stages of pregnancy.

Female genital mutilation(FGM) presents a big challenge for midwives during labour and birth. With many women having Somalian origins FGM is common and performed to the highest grades. This has led to a high Cesarean rate to avoid the issue of opening the circumcision and what will happen after birth. Many of these women do not want their circumcision reversed and as it is not against Maltese law to perform this the health professional is faced with the ethical issue of whether or not to restore this unhealthy practice.

Infant feeding has become a major issue with this population. Many illegal immigrants chose not to breastfeed citing lack of breastmilk. The Maltese Government provides free formula milk giving easy access to alternative forms of infant nutrition. However, lack of hygiene and knowledge on preparation of feeds means that safe bottlefeeding is not really achieved. Also, both the closed and open

centres are often overcrowded and shared with school children who have little or no immunity to common infections found in European countries. Thus, these babies are deprived of the anti-infective effect of breastmilk and frequently suffer from common illnesses that may have been avoided through breastfeeding.

LANGUAGE BARRIERS

Communicating with language barriers creates huge difficulties in delivering good effective healthcare. The effect this has on both health carers and the new family will be reviewed with an overview on existing schemes to enhance the ability to communicate.

CONCLUSION

The migrant community in Malta has the right to access free health care and know what their rights are for this. Efforts and overcoming language barriers may enhance the care that is provided for these mothers. Effective programmes need to be implemented to educate women on the hazards of FGM with opportunity to reverse this. Promotion of breastfeeding as the healthiest choice to feed a baby needs to become a priority. This requires a joint effort of all parties caring for women and their babies with restrictions on free milk so that it is only prescribed when medically indicated.