

## WMA STATEMENT ON MEDICAL CARE FOR MIGRANTS

*Adopted by the 50th World Medical Assembly, Ottawa, Canada, October 1998,  
reaffirmed by the 59th WMA General Assembly, Seoul, Korea, October 2008,  
revised by the 61st WMA General Assembly, Vancouver, Canada, October 2010,  
and by the 72nd WMA General Assembly (online), London, United Kingdom, October 2021  
and reaffirmed with minor revision by the 232nd WMA Council session, Belgrade, Serbia, April 2026*

### PREAMBLE

For the purpose of this Statement, in line with the [International Organisation for Migration index](#), “migrant” is an umbrella term reflecting the common lay understanding of a person who moves away from his or her place of usual residence, whether within a country or across an international border, temporarily or permanently, and for a variety of reasons.

The WMA considers health to be a basic need, a human right, and one of the essential drivers of economic and social development.

According to the World Health Organisation, universal access to health implies that all people and communities have access to comprehensive health services, without barriers or discrimination, according to their needs, within the framework of equitable and supportive health systems.

Recalling the [WMA Declaration of Geneva](#), the WMA underlines every physician’s duty to not permit considerations of age, disease or disability, creed, ethnic origin, gender, nationality, political affiliation, race, sexual orientation, social standing or any other factor to interfere with the physician’s duty to his or her patient.

The WMA underlines that physicians should offer help in medical emergencies in accordance with the WMA International Code of Medical Ethics.

Taking into account the [WMA Declaration of Ottawa on Child Health](#) and the [WMA Statement on Medical Age Assessment of Unaccompanied Minor Asylum Seekers](#), the WMA reiterates that children should enjoy special protection, including the right to adequate health care without discrimination.

These fundamental WMA principles also echo the principles laid down in the [Universal Declaration of Human Rights](#), the [United Nations Convention on the Rights of the Child](#) and the [International Covenant on Economic, Social and Cultural Rights](#).

The [WMA Declaration of Lisbon on the Rights of the Patient](#) declares that every person is entitled without discrimination to appropriate medical care. However, national legislation varies and is often not in accordance with this fundamental principle.

At any time, large numbers of migrants are seeking protection, fleeing from natural disasters, desperate poverty, violence and other injustices and abuses with potentially very harmful effects to mental and physical health.

Recalling the [WMA statement on Armed Conflicts](#) and the [WMA declaration on Health and Climate Change](#), the WMA recognizes that climate change, natural disasters, warfare, armed conflicts and other emergencies, including continuous civil strife, unrest and violence, will inevitably lead to the displacement of people from their homes.

The WMA is concerned by the precarious situation of certain categories of migrants, such as refugees, asylum seekers, refused asylum seekers, undocumented migrants and displaced persons, whose access to health care

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is often undermined, and where physicians are required in some countries to intervene outside the scope of their medical duty, in contradiction with medical ethics.

Precarious situations fuel fear among patients and physicians alike. When people are reluctant to seek medical attention for themselves or their families due to concerns related to their legal or administrative status, it threatens their health, impedes the ability of physicians to render care, and ultimately undermines fundamental trust in health care institutions. To fulfill their oath and best serve patients, physicians must be able to work in spaces that create a sense of safety for all, not fear for the most vulnerable.

Bearing in mind the above-mentioned principles, international conventions and WMA policies, the WMA advocates a strong and continued engagement of physicians in the defence of human rights and dignity of all people including migrants worldwide, while making the following recommendations for its constituent members and individual physicians:

## RECOMMENDATIONS

### *WMA constituent members should:*

1. Prioritize the medical care of human beings above any other personal, material, economic, or political interest.
2. Actively support and promote the right of all people to receive medical care on the basis of clinical need alone and speak out against legislation and practices that contradict this fundamental right.
3. Call on governments to:
  - Reach political agreements that facilitate the availability of sufficient resources for the delivery of adequate and coordinated health services to migrant populations, including in refugee camps where the conditions of living make them more susceptible to the spread of disease and viruses.
  - Ensure access to safe and adequate living conditions and essential services to all migrants, even with support from the donor agencies and/or philanthropists if needed.
  - Refrain from conducting immigration enforcement activities in and around hospitals, emergency rooms, and health care settings.
  - Refrain from imposing requirements for healthcare personnel to inform authorities when treating undocumented migrants.
  - Promote equality, solidarity and social justice, guaranteeing access of migrants and refugees to health and social services.
  - Implement policies, actions and commitments that promote the health of all, without discrimination, addressing the social determinants of health related to migrants and refugees.

### *Physicians:*

4. Have a duty to provide appropriate medical care, based solely on clinical need, regardless of the civil or political status of the patient.
5. Should speak out against legislation and practices that prevent the fulfilment of this duty.
6. Cannot be compelled to participate in any punitive or judicial action against migrants, including refugees, asylum seekers, refused asylum seekers, undocumented migrants and or displaced persons, or to withhold medically necessary treatment, or to administer any non-medically justified diagnostic measure or treatment, such as sedatives to facilitate easy deportation from the country or relocation.

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7. Must be allowed adequate time and be provided with sufficient resources, including interpretation services, to assess the physical and psychological condition of migrants, including refugees, asylum seekers, refused asylum seekers, undocumented migrants and displaced persons.