

Healthy or Unhealthy Migrants? Identifying Selection, Socialisation and Adaptation Effects in Comparative Analysis of African HDSS

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Background

- Migration, a major demographic event
 - Health status may impede or stimulate migration
 - Migration can influence health outcomes
- Net effect of migration on health may be positive, negative, or nil
 - Are migrants positively selected on health?
 - Do migrants propagate diseases and behaviours?
 - Is the impact of migration vanishing with time?

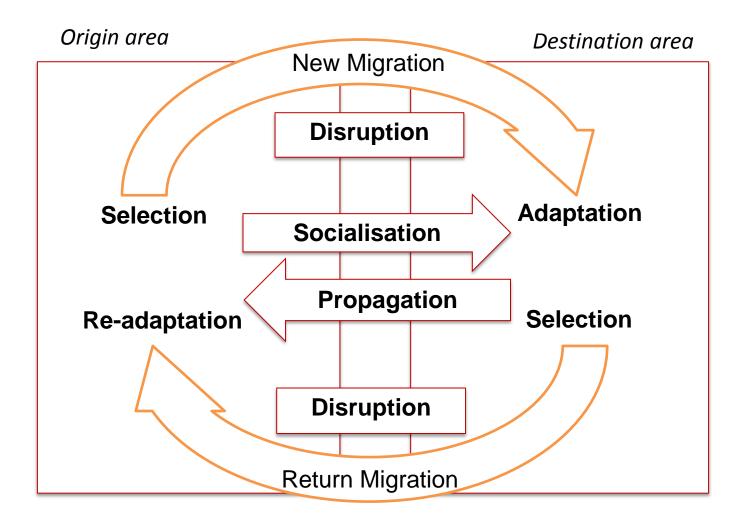


SoSAD hypotheses

on migration and health relationship

	Origin to Destination (new) migration	Destination to Origin (return) migration
So cialisation	Origin behaviour persists	Destination behaviour persists
S electivity	Selection of migrants in origin areas	Selection of migrants in destination areas
A daptation	Adaptation to the destination behaviour	Re-adaptation to the origin behaviour
D isruption	Migration disrupts other behaviours	Migration disrupts other behaviours

Migration effects on health before and after new migration or return migration







Objectives

To examine the relationship between internal migration and mortality in 9 HDSSs in sub-Saharan Africa

- To confirm the **diversity** of the migration-mortality relationship
- To confirm that this relationship is mainly generated by the combination of two processes: selection and exposure
- To check whether patterns of mortality conform to the wellknown healthy migrant and unhealthy return migrant hypotheses
- To help local health authorities to identify the categories of migrants for targeted interventions



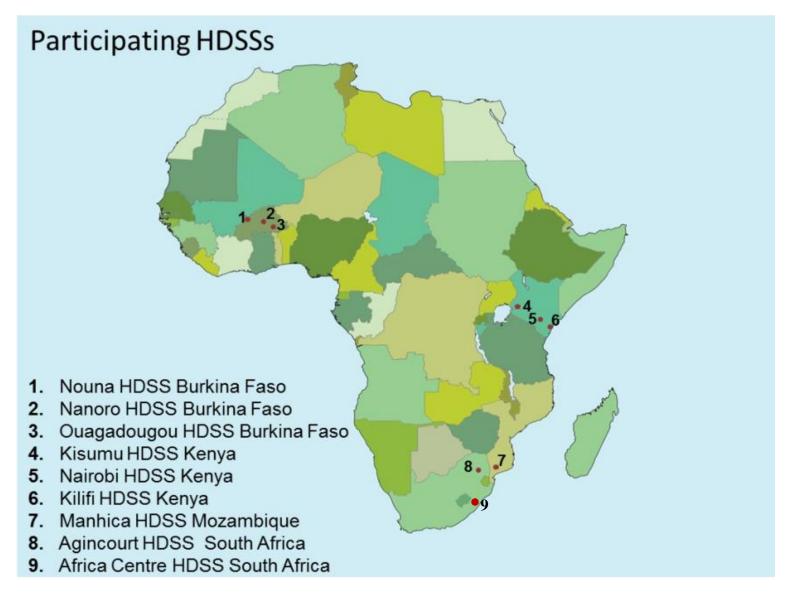
15 different potential combinations of the 3 effects

Socialisation/ propagation	(re-) Adaptation	Negative selection	No selection	Positive selection		"Healthy migrant"
	Yes	✓		\checkmark		
Negative	No	✓		✓		
	Not testable		✓			
	Yes	✓		✓		For in-migrants
None	No	✓		✓		in rural areas
	Not testable		✓			(assuming no socialisation)
	Yes	\checkmark		\checkmark		
Positive	No	1		✓		
	Not testable		✓			
	"Unhealthy return migrant"				-	

MADIMAH

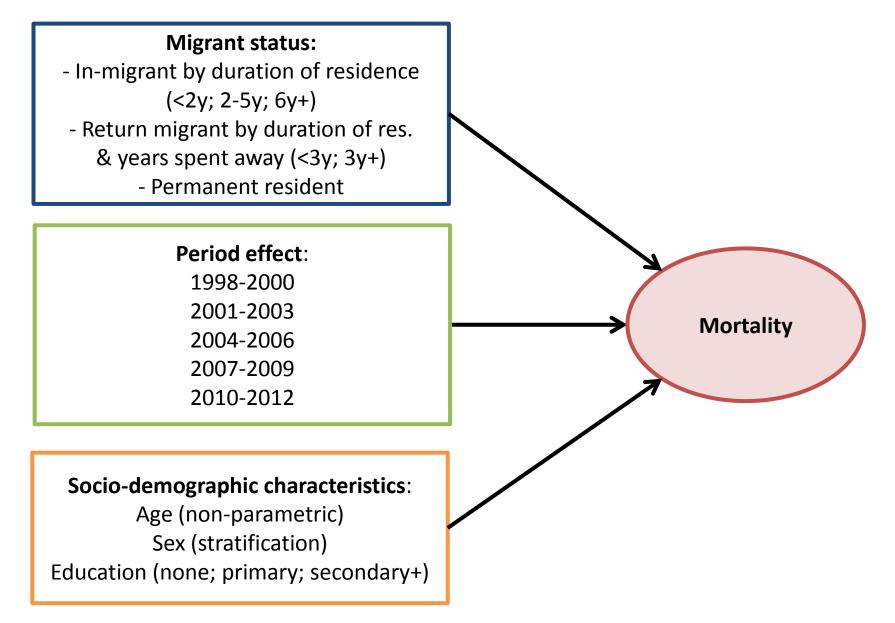


Multi-local dynamics of internal migration and health

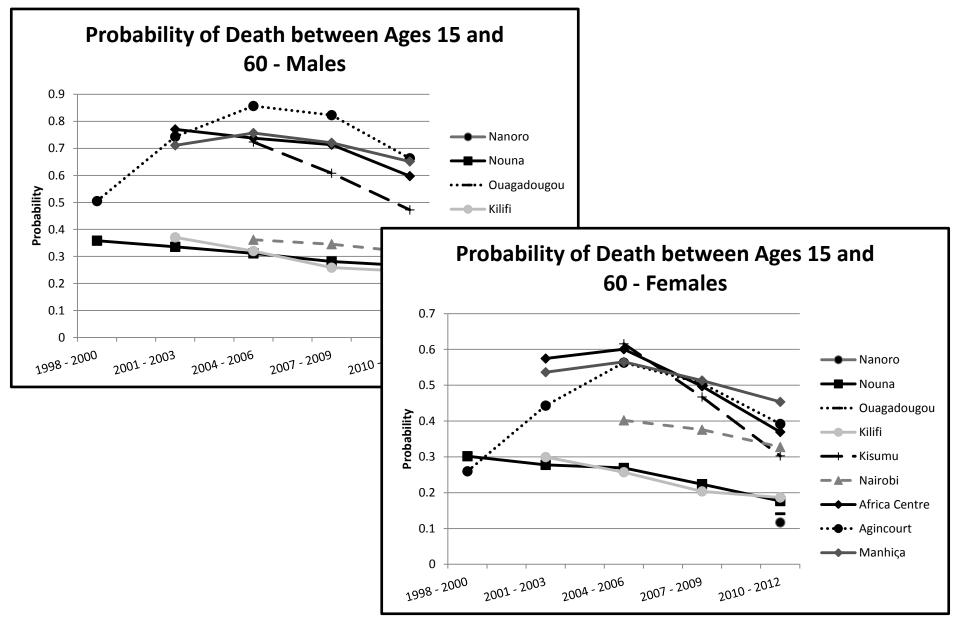




Migration-Health Empirical Cox Model



Probability of Death



Examples of outputs



(migration variables only)

	Kilif	Kilifi HDSS		Kisumu HDSS		Nairobi HDSS	
	All	All Deaths		All Deaths		All Deaths	
	Male	Female	Male	Female	Male	Female	
Permanent Resident							
In-Migrant	on						
In-Migrant 6 - 24 months in HDSS Selecti	0.59***	0.58***	1.35***	1.80***	((•/***	1.2- *	
	(0.22 - 0.02)	(0.52 - 0.6+)	(1.23 - 1.49)	(1.64 - 1.97)	(0.66 - 0.90)	(1.05 - 1.50)	
25 - 59 months in HDSS 60+ months in HDSS Adapta Return Migrant 6 - 24 months in HDSS Selecti	6.67***	0.74***	1.12**	1.26***	0.91	1.01	
	(0.60 - 0.74)	(0.67 - 0.82)	(1.01 - 1.24)	(1.13 - 1.40)	(0.78 - 1.07)	(0.83 - 1.24)	
60+ months in HDSS	0.94	1.11*	0.95	1.17*	0.83	0.90	
Adar	(0.84 - 1.06)	(0.99 - 1.24)	(0.81 - 1.12)	(0.99 - 1.39)	(0.65 - 1.05)	(0.67 - 1.22)	
Return Migrant	on						
6 - 24 months in HDSS Select	0.56***	0.62***) (1.36***	1.53***	1.31	1.16	
5	(0.44 - 0.70)	(0.49 - 0.77)	(1.17 - 1.57)	(1.31 - 1.79)	(1.04 - 1.65)	(0.85 - 1.57)	
25 - 59 months in HDSS	0.76**	0.86	1.40***	1.13	1.10	0.97	
	$\begin{array}{c} 0.76^{**} \\ tati(0.60 - 0.96) \\ 0.74 \\ (0.49 - 1.12) \end{array}$	(0.68 - 1.07)	(1.21 - 1.62)	(0.94 - 1.36)	(0.86 - 1.41)	(0.70 - 1.35)	
60+ months in HDSS	0.74	0.92	1.15	1.12	1.33	1.39	
Re	(0.49 - 1.12)	(0.63 - 1.33)	(0.87 - 1.52)	(0.79 - 1.60)	(0.93 - 1.89)	(0.91 - 2.14)	
Return Migrant Exposure >36month	15						
36+ months away	tion.95	1.11	1.04	0.88	1.46*	1.36	
nag	ation.95 (0.71 - 1.29)	(0.84 - 1.48)	(0.81 - 1.33)	(0.64 - 1.23)	(0.99 - 2.15)	(0.77 - 2.40)	
prop							



Summary results for in-migrants in rural areas (assuming no socialisation)

Socialisation	Adaptation	Negative selection	No selection	Positive selection
Negative	Yes			
	No			
	Not testable			
None	Yes	Manhiça M+F Kisumu M+F		Kilifi M+F
	No			Nouna M
	Not testable		Agincourt M+F Africa Centre M Nouna F Nanoro M+F	
Positive	Yes			
	No			
	Not testable			

No suitable combination was found for female in-migrants in Africa Centre (positive selection + counter-adaptation)



Summary results for return migrants in rural areas

Propagation	Re-adaptation	Negative selection	No selection	Positive selection
	Yes	Agincourt M+F		
Negative	No			
	Not testable			
	Yes	Africa Centre F Kisumu M+F		Kilifi M+F
None	No	Manhiça M		Nouna M
	Not testable		Africa Centre M Nouna F	
	Yes			
Positive	No			
	Not testable			

Not enough female return migrants in Manhiça Not enough return migrants of both sexes in Nanoro (2010-2012)



Summary results for in-migrants in urban areas

Socialisation	Adaptation	Negative selection	No selection	Positive selection
Negative	Yes			
	No			
	Not testable			
None	Yes	Nairobi F		Ouaga M Nairobi M
	No			
	Not testable		Ouaga F (?)	
	Yes			
Positive	No			
	Not testable			

Several possible combinations were found for female in-migrants in Ouagadougou : no socialisation (as for males) is assumed.



Summary results for return migrants in urban areas

Propagation	Re-adaptation	Negative selection	No selection	Positive selection
Negative	Yes			
	No			
	Not testable			
None	Yes	Nairobi M		
	No			
	Not testable		Nairobi F	
	Yes			
Positive	No			
	Not testable			

Not enough return migrants in Ouagadougou (2010-2012)



Summary Findings

- Confirms the diversity of the migration-mortality relationship over a range of settings
- **Theoretical framework** explain all 34 observed situations but 1
- Selection in-migrants:
 - Positive: 4 sites for males, 1 for females
 - Negative: 2 sites for males and females
 - No selection: 3 sites for males and females

Selection return migrants:

- Same pattern as for in-migrants except:
- Female in Africa Centre (?)
- Nairobi
- (re-)Adaptation after selection in 17/20 situations
- No socialisation (in-migrants): most reasonable assumption
- Propagation (return migrants): always nil, except in Agincourt (negative)



Provisional Policy Implications

- **Negative selection** on health:
 - Manhiça & Kisumu: a concern whatever migration status and gender
 - Agincourt: a concern for return migrants, also vector of propagation
 - Africa Centre: why female return migrants' health deteriorates over time?
 - Nairobi: a concern for male return migrants and female in-migrants
- In all these cases: target recent migrants within the first 2 years of their arrival/return
- Agincourt:

target residents who intend to migrate to reduce propagation through return migration

 Rural areas: return migrants will not help health policy (no propagators of "good" health behaviour)



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