

## *Handbook of Migration and Health*

edited by Felicity Thomas

Cheltenham (UK) and Northampton, MA: Edward Elgar, 2016

ISBN 978-1-78471-477-2

Hardcover \$255, 576 pp.

Reviewed by Barry Edmonston  
University of Victoria

Within the field of immigration studies, the health of migrants and the effect of their movement on health in their communities of origin and destination is an important topic of demographic interest. Demographers have mainly focussed on three aspects of the health of migrants: (1) the selection effect of pre-migration individuals; (2) the effect of migration on their subsequent health; and (3) their changing health after settlement in their destination country. Lesser attention has been paid to an intriguing fourth topic: (4) the secondary selection effect of some immigrants returning to their country of origin. The *Handbook of Migration and Health* deals partially with these four topics of primary interest to population researchers. Most chapters in this volume, however, concern topics in public health and anthropology that are peripheral to usual demographic study.

The volume is organized in six topics, with 26 chapters along with an introductory chapter. The first section includes six papers concerning theories and models of migration that discuss the key theoretical questions examined in the migration and health literature. Second, there is a section of four papers dealing with rights and entitlements to health, and the concept of “deservingness” pertaining to health. The third section covers six papers on vulnerability to impaired health and the experience of health “precarity” (an uncommon word meaning “precariousness”). A fourth section has four papers concerning specific health needs and priorities, including the needs of migrants with particular health requirements, and policy and program responses. The fifth section includes five papers dealing with the provision of health care for different groups of migrants. The final section has three papers discussing transnational and diasporic networks—relationships that affect both migrants as well as others in their social networks.

As mentioned earlier, most of the papers in this volume do not deal with topics of usual interest to demographic researchers. Nine of the papers have some demographic relevance. Chapter 2 examines major mechanisms that relate migration and health. It provides a useful summary of the healthy migrant hypothesis, as well as an interesting discussion of the idea of selective return migration (the main argument is that unhealthy migrants may be more likely to return to their original communities than healthier counterparts). Common explanatory models of migration and health are described in chapter 3, including the healthy migrant hypothesis as well as a model of health transition for migrants. The authors present a reasonable argument for greater use of a life course approach for examining health changes and accumulated health risk over time. Chapter 4 makes the case for studying migrants’ health changes in both the sending and receiving countries’

contexts. Rather than a “linear” model of health changes over time with acculturation, the author formulates a dynamic interaction of health behaviour and influences shaping health outcomes.

Agricultural labour migration from Mexico and the Caribbean to Canada is discussed in chapter 13. The authors document the conditions of farm labour and the poorer health outcomes that stem from cumulative risk exposure over time. Chapter 14 relates closely to chapter 13, with a comparative overview of occupational health of migrant workers. This chapter examines several ways in which workplace practice and hazards affect work-related accidents, injuries, and illness.

The complex relationship of climate change and health is described in Chapter 15. Climate-related migration is increasing worldwide, and this chapter summarizes case studies for the Northwest Arctic, Morocco, Sri Lanka, and the South Pacific.

In chapter 16 the authors deal with a neglected topic within the health and migration literature: the situation of migrants with disabilities or chronic illness. The chapter focuses on the United Kingdom, analyzing the link between migration, chronic illness and disability, and health care.

Current literature on mental health and migration primarily deals with post-traumatic stress disorders and the mental health or depression of recently-arrived migrants. Less well-studied are changes in the mental health of groups of immigrants over the lifetime. Chapter 17 offers an interesting case study of the mental health needs and experiences of longer-term Chilean immigrants in the United Kingdom.

Most immigrants are younger, healthier, and usually have limited use of health care in the initial years after settlement. Related health research dealing with elderly immigrants usually occurs in countries such as Canada, where the immigrants have usually resided for many years. A different approach is taken in chapter 21, which looks at the health and health care of British elderly who have retired in Spain. The chapter points out there are unanticipated differences in health care rights and services in Europe, and this gives rise to problems between individual expectations and actual Spanish health care.

Overall, this volume provides useful recent literature reviews, conceptual frameworks, and case studies. The nine chapters highlighted above are likely to provide the greatest interest to demographic researchers.