

Austria Country Profile

1. Key Statistics

	2015	2016	2017
Asylum Seekers	88.912	42.285	24.296
Refugees	19.003	27.552	30.428
Migrants (Third Country Nationals) with valid residence permits	642.186 (1.1.2016)	677.201 (1.1. 2017)	-
Irregular migrants	N/A	N/A	N/A

Relevant links:

Ministry of the Interior: <https://www.bmi.gv.at>

Austrian Integration fund: www.oeif.at

The most prominent nationalities among migrants/refugees in Austria are:

Afghanistan, Syria, Iraq, Iran, Pakistan

2. Priority Health Conditions

The (3) main challenges in terms of healthcare access and/or health issues of migrants/refugees identified are:

Language barrier

- Communication with healthcare providers is difficult due to language barriers. False diagnoses, misunderstandings and wrong medication are the consequences. Children are often used as interpreters. Often, a bad state of

health, inaccessible information, inadequate care and insufficient prevention result from language barriers.

Access to information

- Appointments in the health sector are problematic, since participants do not know how to find the right doctor or where to look up specific information.
- Lack of information also due to language barrier

Lack of knowledge about Austrian health system

- **Example:** In terms of the health system, they face difficulties because they do not know when to call an ambulance, when to contact a GP, when to go to the emergency department or when to see a private physician.

3. Legislation Description

Brief description of the legislation concerning access to health care for migrants/refugees

Migrants (and asylum seekers) have access to the health system without any limitations.

Asylum seekers: An initial medical examination of asylum seekers is done within 24 hours after admission to one of the reception centers. If necessary, they have the right to see specialists or staff at hospitals. People receiving Basic Care are automatically entitled to health insurance. However, certain treatments or private doctors are not covered and must be paid. If asylum seekers are not entitled anymore to Basic Care (e.g. due to violent behavior, absence from initial reception center for more than two days), they can still make use of emergency care and essential treatment. In reality however, the Basic Care provision is not easy to put into use.