
Review by Marius Ioan TĂTAR

An increasing amount of research highlights the challenges of integrating migrants into European societies. The book *Undocumented Migrants and Healthcare: Eight Stories from Switzerland* by Marianne Jossen focuses on undocumented migrants, persons that lack the legal entitlement to live in a country. This category comprises those who have overstayed their visas, people who crossed the border without legal entitlement to do so, and failed asylum seekers, generally non-citizens who are excluded from basic social services. Using interviews with migrants, healthcare professionals and NGO staff, this book examines the experience of undocumented migrants when they try to access healthcare in one region of Switzerland.

Chapter two of the book deals with ”undocumentedness” and contextualizes information about undocumented migrants and their access to healthcare based on an outline of policies and practices in this field in various European countries and particularly in Switzerland. As Jossen highlights, it is difficult to produce accurate data about undocumented migrants as their names do not appear in state registers and their legal status changes from one category to another. The author cites several sources of information that estimate the numbers of undocumented migrants who lived in the European Union in 2008 to be between 1.9-3.8 million persons, representing about 7-13% of the foreign population of the Union. In Switzerland the number of undocumented migrants ranges between 58,000 and 105,000, most of whom entered the country without permission to do so, or overstayed their tourist visa, as well as failed asylum seekers. In terms of migration
policy, Jossen notes that being undocumented is a process and this means firstly that a person’s status can shift from legal to undocumented and back again, and secondly it is not a full description of a person, but rather a social construct. In Switzerland, healthcare is generally regulated by the federal law on health insurance, however the administrative units of the country, the cantons, retain much of the power to implement this law and regulate healthcare autonomously in their areas. According to current policy interpretations, undocumented migrants in Switzerland have both the right and the duty to take out insurance, because they reside in the country (p. 16). In terms of practices, Jossen notes the discrepancies that seem to exist between the legal entitlement to healthcare insurance and the actual delivery of healthcare to undocumented migrants through NGOs and charities.

Chapter 3 explains the methodological and theoretical perspectives of the book. The empirical material is gathered through eight interviews with undocumented migrants who attended an NGO specialized in working with migrants and ten interviews with professionals working either at the NGO or in fields related delivering healthcare to migrants. In terms of theoretical approach the book adopts a processual understanding of ‘undocumentedness’ and healthcare, which reveals individual experiences that are in constant flux, between inclusion and exclusion, in relation both to the person’s changing legal status and to the healthcare they receive (p. 27). Based on Niklas Luhmann’s system theory, Jossen highlights that a person’s inclusion in the social system is dependent on the extent to which he or she is addressed by the communication that constitutes that system (p. 28). In this framework, the migrants’ stories describe their inclusion within organizations such as the NGO, an insurance company, a hospital, or similar (p. 29).

Chapters 4, 5 and 6 tell the stories of the undocumented migrants based on the eight interviews, which for the focal point of this study. The interviews with migrant patients are examined to discern the event that the interviewees describe as the core moment of their inclusion in healthcare. These moments are recounted spontaneously by patients as those incidents that helped them to address their health issues in a way that they define as good, or at least satisfactory (p 31). Based on similarities between these core moments of inclusion along with their preconditions and consequences, the author groups the undocumented migrants’ stories into three categories, each of these being presented in one chapter. Thus chapter 4 tells the story of Suzanne from whom the settling in (finding a job, housing and friends) represents the core moment of inclusion. In chapter 5, Jossen presents
the stories of 4 undocumented migrants for whom getting in touch with the NGO and its network as a core moment of inclusion. Reaching out for insurance is depicted as a core moment of inclusion for three migrants, whose stories are presented in chapter 6.

Chapter 7 reviews the moments of inclusion in healthcare, their preconditions and consequences and contrasts them with with situations in which patients remain excluded from communication related to or directly concerning healthcare (p. 88). The evidence presented in this book research confirms the idea that being undocumented is a social determinant of health on its own (p. 91). This further suggests that exclusion in one area of social life seems to be linked with exclusions in other fields. In this context, Jossen concludes that the inclusion of undocumented migrants in healthcare in Switzerland remains partial and precarious, while exclusion remains and ever-present threat (p. 96).

Overall, the book of Marianne Jossen demonstrates that the health and healthcare of undocumented migrants is deeply affected by their legal status, and they are excluded from some aspects of care, notwithstanding entitlements such as healthcare insurance in Switzerland. These findings have significant policy implications and provide useful insights for professionals, researchers and students interested in the fields of public health and migration studies.