

## Cancer care for refugees and displaced population: a looming humanitarian crisis

### *Atención del cáncer a refugiados y población desplazada: una crisis humanitaria que se avecina*

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On September 5, 2023, the Mexican Society of Oncology organized a session on migrant health and cancer, in which I had the honor to participate as a panelist. Although at that moment, the session felt of particular importance, with the passing of the months, it has become even more of an issue for cancer care and for healthcare in general. The current crisis in Gaza, the war in Ukraine, and the crisis at the US-Mexico border, which has become a focal issue of the upcoming US presidential election, have brought the issues faced by refugees and asylum seekers worldwide to the forefront.

According to the Pew Research center, the number of migrant encounters at the US-Mexico border hit a record high at the end of 2023, with almost 250,000 encounters registered in December 2023<sup>1</sup>. Likewise, there has been a profound shift in the nationalities of people attempting to cross the US-Mexico border, with a surge in people from countries in Central America and the Caribbean, South America, and from places as far away as China or Ukraine<sup>2</sup>. The strengthening of the security at the border, along with strong political pressure for migrants to remain in Mexico has led to large refugee populations at the border, particularly in Tijuana and Ciudad Juárez. While the most obvious consequences of this massive displacement of people are economic and political, the healthcare aspect, and in particular that related to cancer, should not be overlooked.

Many immigrants experience elevated risks of some neoplasms, particularly those related to infection, and a significant proportion come from countries with limited availability of screening, prevention, or early detection programs<sup>3</sup>. With more and more immigrants staying for longer periods of time at our northern border, the risk of people developing symptoms of cancer is significantly increased, and health-care systems in border regions and cities should strive to create strategies to tackle this potential program. A recent study from Turkey conducted among Syrian refugees showed a high prevalence of cancer, along with late presentation, delayed diagnosis, treatment abandonment, and poor survival<sup>4</sup>.

The Mexican Government recently launched the “Comprehensive Plan for Migrant Healthcare” (*Plan Integral de Atención a la Salud de la Población Migrante*), which aims at coordinating primary healthcare for migrants crossing the Mexican territory. However, the plan heavily focuses on sanitation, vaccination<sup>5</sup>, and infectious disease control, without any mention of coverage or care for chronic diseases. The fact is that, currently, migrant populations in Mexico have no protection when facing cancer. To fix this pressing issue, the first step is to understand the extent of the problem. There is a need for research looking at the prevalence and incidence of cancer among refugees and displaced populations in our northern border, to figure out the resources needed to provide them with care. Likewise,

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non-communicable diseases should be considered as a part of any response plan, since the likelihood of these presenting will only increase as more migrants arrive to our territory.

While the terrible scenes we see in other Gaza and Ukraine may seem to be a world away, refugees and displaced populations in our own country are suffering from a humanitarian crisis, which is made worse by the political tensions of our time. It is up to us as members of the cancer care community to highlight the importance of providing care and coverage for this vulnerable population, and to develop the research needed to better understand this growing problem.

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