

PS1.292**The role of family doctors during the follow-up of hunger strikes of undocumented migrant workers in Belgium**

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Since the beginning of 21st century the living conditions of undocumented migrant workers in Belgium aggravated drastically. They started hunger striking because the Belgian government grants temporary residence papers to very sick people. Medical follow-up of these voluntary fasts was mandatory but a search of medical scientific literature yielded only information about the overall and specific tasks of health professionals during hunger strikes in custodial and hospital setting. The specific problems in non-custodial settings started with finding health professionals willing to voluntarily participate, work in difficult conditions and take care of vulnerable people whose health situation worsened daily. They had to work without an official health structure or funds because undocumented migrants only have a limited access to health care. The communication to the outside world was tough: emergency doctors didn't understand why people with hypoglycaemia had to be hospitalised, the media wondered when the first death would occur and doctors from government structures doubted the seriousness of the strike. In Brussels, from 2008 until the end of 2015, 1158 hunger strikers participated in 15 different hunger strikes, with participants coming from at least 18 countries. The hunger strikes lasted an average of 51 days. Medical records of the hunger strikers were analyzed and compared. After the last hunger strike in 2015 focus groups were organized to discuss with the health professionals what medical and ethical problems they encountered. This resulted in a deepening of the different CanMEDS roles of physicians, concluding that help from specialists was very welcome but that the overall competences of family doctors were the most needed to achieve this very demanding mission.