

# HIV positive diagnosis among migrants compared to native-born in Europe and Central Asia: COBATEST network, 2021-2022

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# Introduction



Source: Tufts Observer





Currently, around 6 million Ukrainians have left their homes since 2022 and reside in EU (UNHCR, 2023)

By near the end of 2022, 5.2 million people have fled Ukraine due to the war (UNHCR, 2023).

1,57 million Ukrainian citizens were authorised to stay in the EU at the end of 2021 (Eurostat, 2021)

- Community-Based Voluntary and Counseling and Testing Service (CBVCT) centers are considered an effective strategy for HIV testing, especially for key populations such as migrants.

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PLOS MEDICINE

### Towards Universal Voluntary HIV Testing and Counselling: A Systematic Review and Meta-Analysis of Community-Based Approaches

Amitabh B. Suthar<sup>1\*</sup>, Nathan Ford<sup>1</sup>, Pamela J. Bachanas<sup>2</sup>, Vincent J. Wong<sup>3</sup>, Jay S. Rajan<sup>4</sup>, Alex K. Saltzman<sup>5</sup>, Olawale Ajose<sup>6</sup>, Ade O. Fakoya<sup>7</sup>, Reuben M. Granich<sup>8</sup>, Eyerusalem K. Negussie<sup>1</sup>, Rachel C. Baggaley<sup>1</sup>

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### Systematic review and meta-analysis of community and facility-based HIV testing to address linkage to care gaps in sub-Saharan Africa

Monisha Sharma<sup>1</sup>, Roger Ying<sup>2</sup>, Gillian Tarr<sup>1</sup> & Ruanne Barnabas<sup>1,2,3,4</sup>

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HIV Medicine published by John Wiley & Sons Ltd on behalf of British HIV Association

DOI: 10.1111/hiv.12807  
HIV Medicine (2019)

**ORIGINAL RESEARCH**

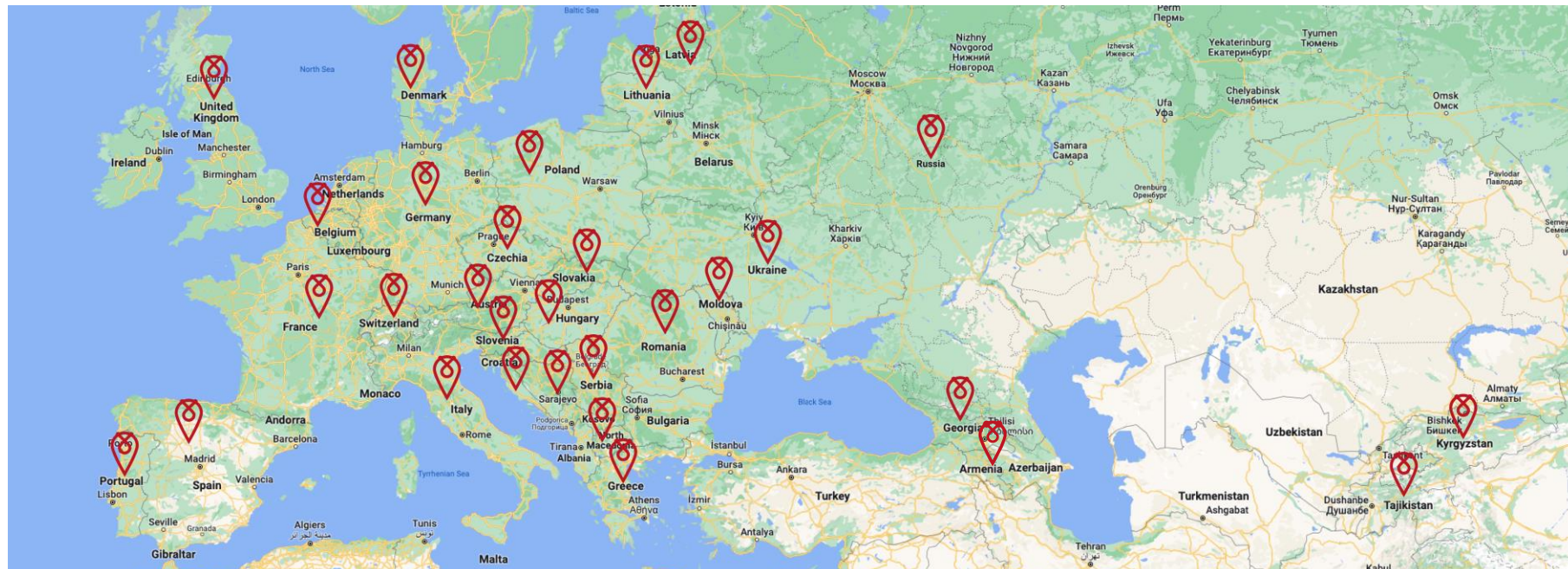
### HIV testing strategies outside of health care settings in the European Union (EU)/European Economic Area (EEA): a systematic review to inform European Centre for Disease Prevention and Control guidance

S Croxford<sup>1</sup>, L Tavoschi<sup>2,3</sup>, AK Sullivan<sup>1,4</sup>, L Combs<sup>5</sup>, D Raben<sup>5</sup>, V Delpech<sup>1</sup>, SF Jakobsen<sup>1</sup>, AJ Amato-Gauci<sup>2</sup> and S Desai<sup>1</sup>



# COBATEST Network

The COBATEST is a network of 111 Community-Based Voluntary and Counseling and Testing Service (CBVCT) centers in 29 European and 2 Central Asian countries.



Coordinated by:



Centre d'Estudis Epidemiològics  
sobre les Infeccions de Transmissió  
Sexual i Sida de Catalunya

# Methods

## Objective

Describe HIV-testing trends and examine the prevalence of HIV positive diagnosis among migrants in Europe and Central Asia (ECA) compared with native-born individuals in 2021 and 2022.

## Migrant

Persons who were born abroad.

# Participating COBATEST Network members





**Log-binomial multivariable regression models** were fitted to compare the prevalence ratio of HIV positive diagnosis among **migrants and native-born individuals across the two years**, adjusting for covariates

48 centers  
(Disaggregated data)

**Descriptive analysis**  
(HIV testing prevalence)  
by: gender, key-population groups, HIV diagnosis and the two respective years, **stratified** by migrants and native-born individuals

66  
COBATEST  
members

18  
(Aggregated data)

# Results

**Table 1. Characteristics of the total study population\* by origin status**

	Total sample % (n=203354)	Migrants, % (n=34855)	Native-born, % (n=168499)	P value*
<b>Sex</b>				<0.001
Men	69.7	65.4	70.6	
Women	28.5	30.6	28	
Transgender	0.9	2.3	0.6	
Missing	0.9	1.7	0.8	
<b>Age category</b>				<0.001
< 25	26.8	21.2	28	
>= 25	62.3	76.2	59.4	
Missing	10.9	2.6	12.6	
<b>Time-period</b>				<0.001
2021	49.9	38	52.4	
2022	50.1	62	47.6	
<b>HIV result</b>				<0.001
Positive	1.1	1.8	0.9	
Negative	98.9	98.2	99.1	

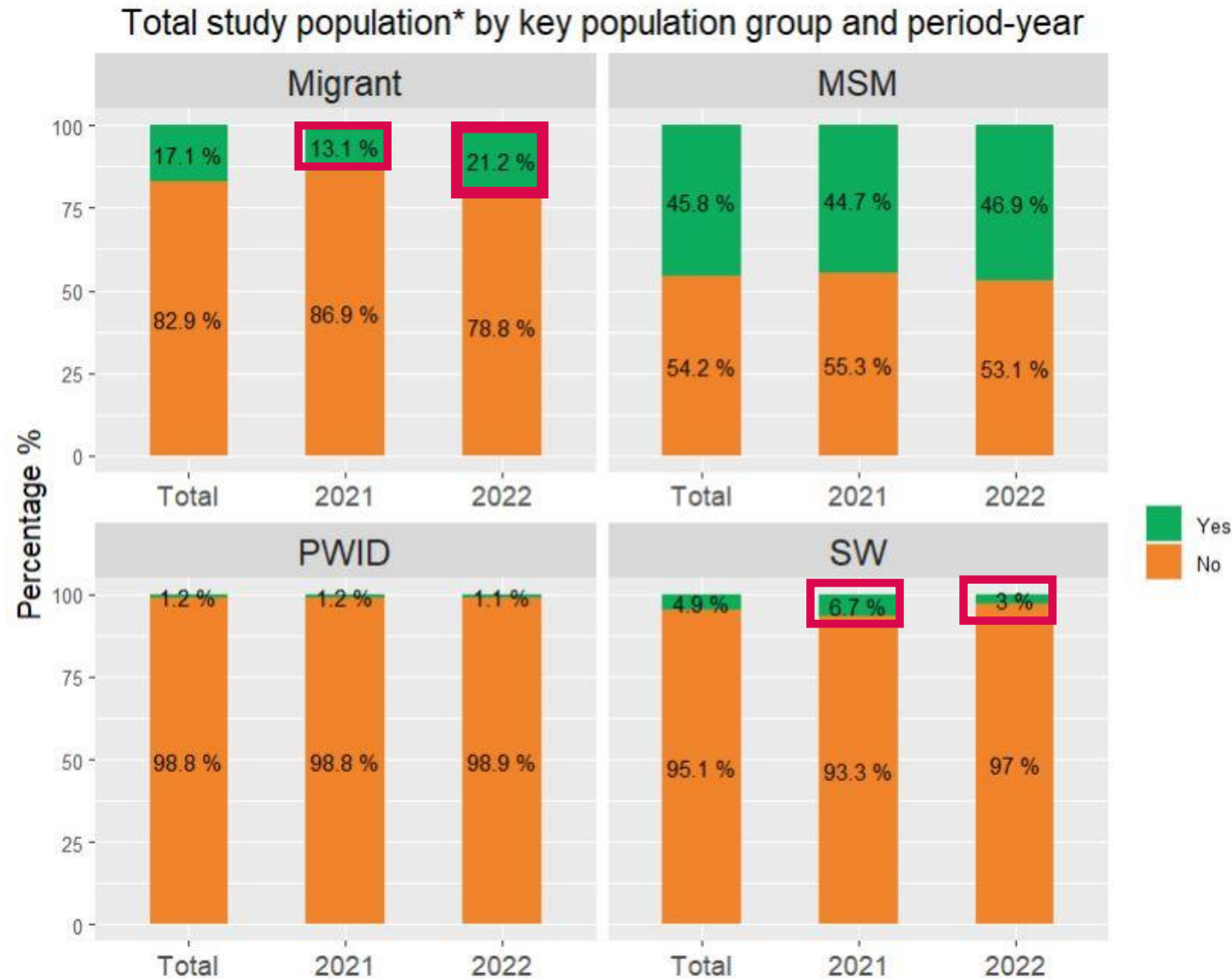
\*Total sample includes disaggregated and aggregated data.

**Table 2. Characteristics of the total study population\* by time-period**

	Total sample % (n=203354)	2021 % (n= 101462)	2022 % (n= 101892)	P value
Sex				<0.001
Men	69.7	69	70.4	
Women	28.5	29.4	27.6	
Transgender	0.9	0.8	1	
Missing	0.9	0.8	1.1	
Age category				<0.001
< 25	26.8	25.9	27.7	
>= 25	62.3	56.9	67.6	
Missing	10.9	17.1	4.6	
HIV result				<0.001
Positive	1.1	0.9	1.2	
Negative	98.9	99.1	98.8	

\*Total sample includes disaggregated and aggregated data.

**Total study population n= 203354**  
**2021 n= 101462**  
**2022 n= 101892**

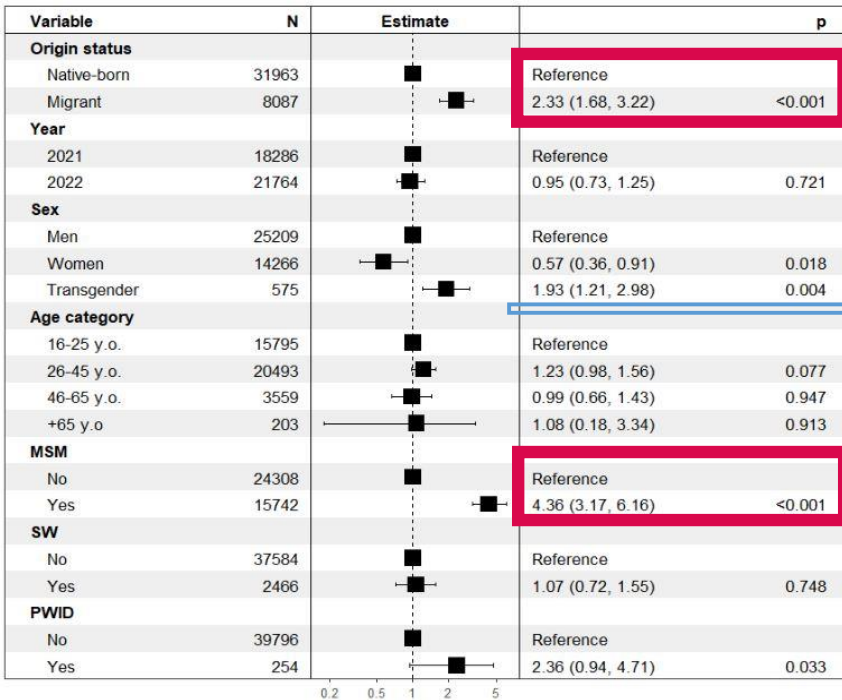


\*Total study population includes disaggregated and aggregated data;  
\*\*One person can be in more than one key-population group.

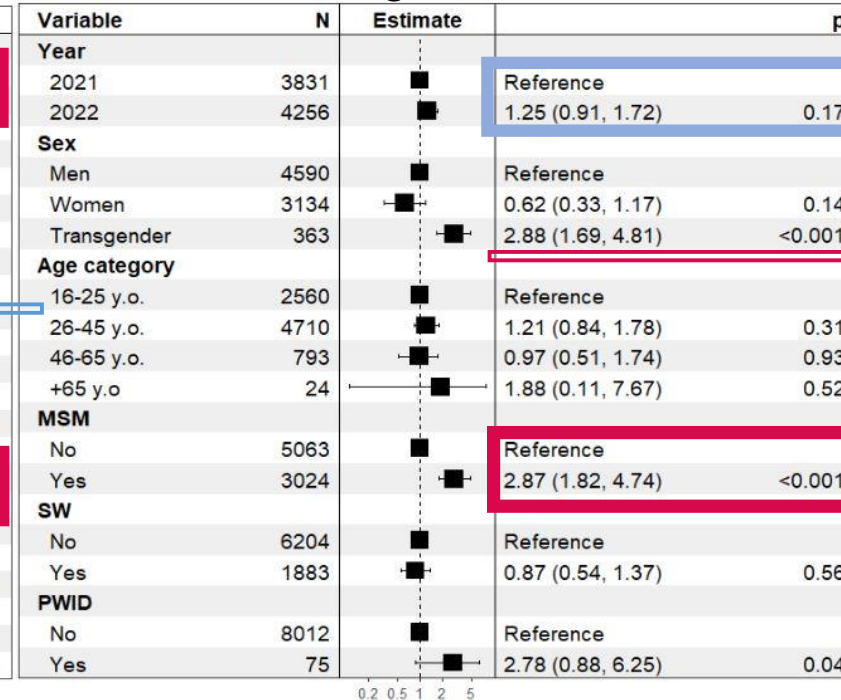


# Prevalence of HIV positive diagnosis in the disaggregated data\* stratified by origin status: Multivariable analysis

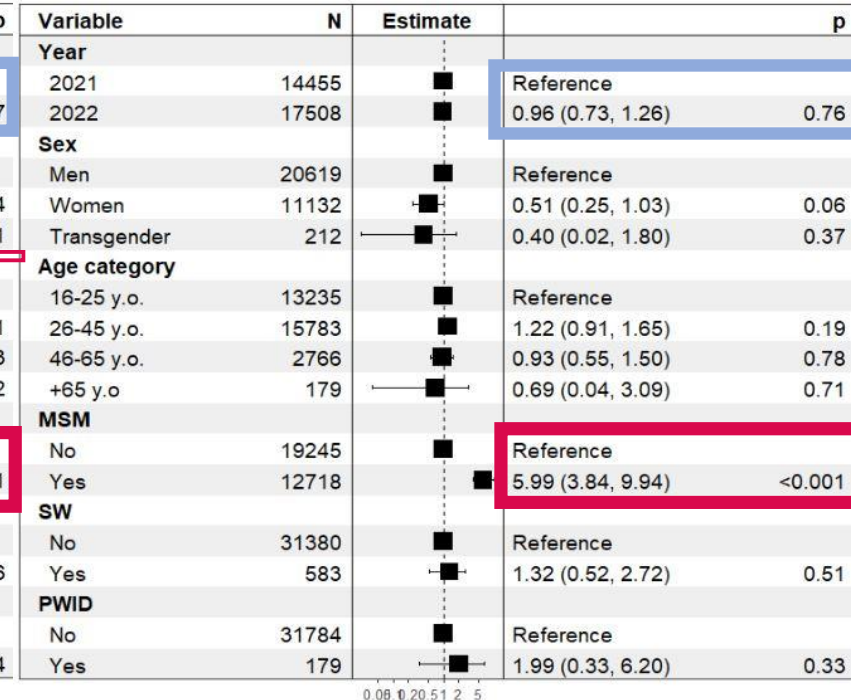
Total disaggregated sample



Migrants



Native-born



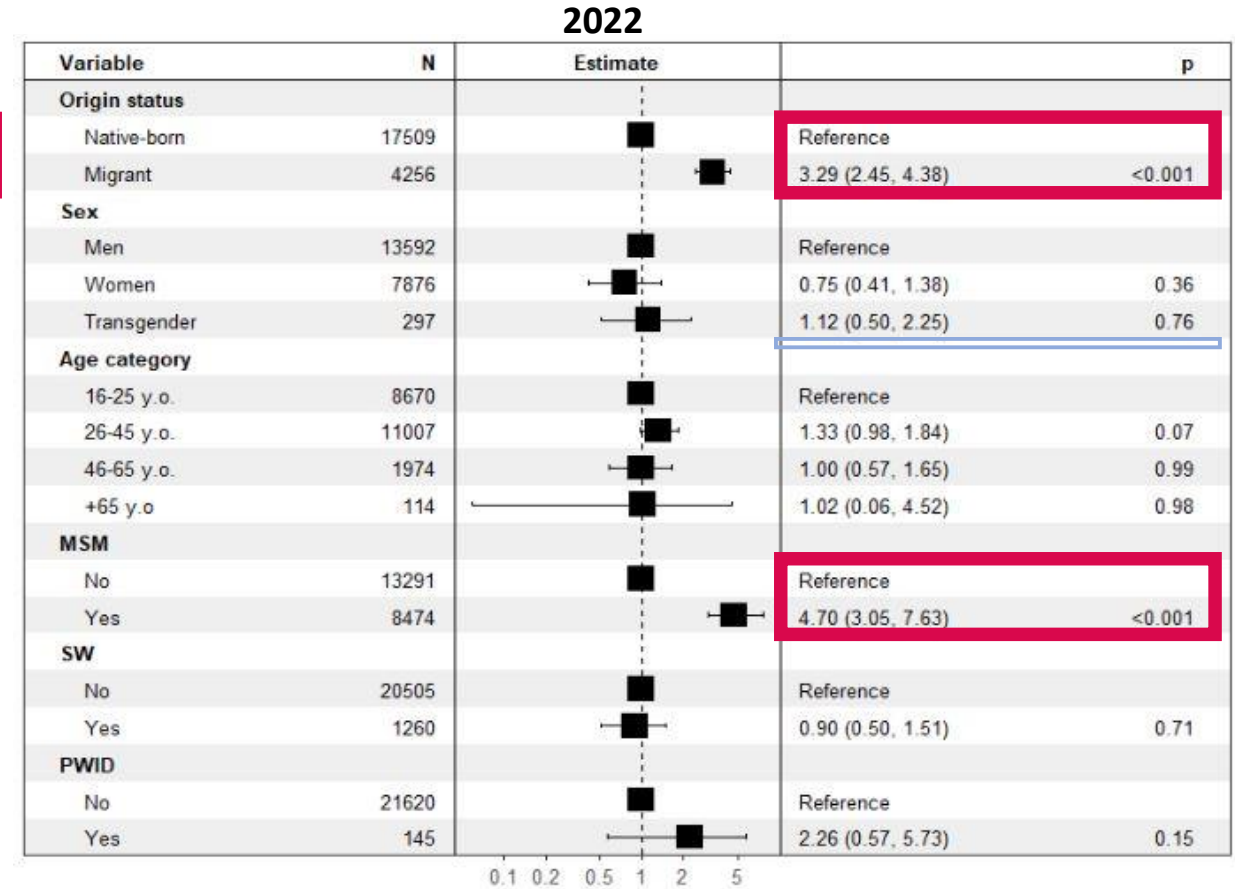
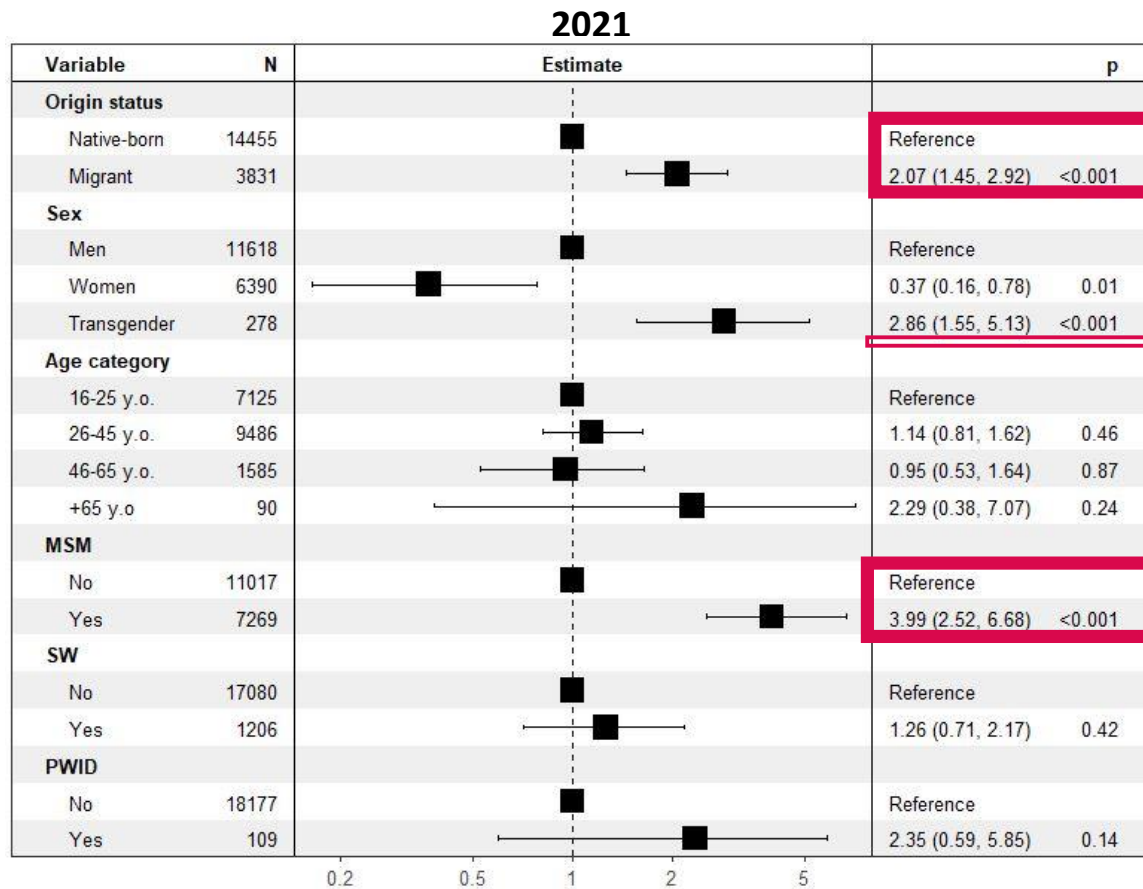
\*The model was applied only to disaggregated data from 48 COBATEST member centers;

\*\*A time-period\*migrant variable refers to an interaction term between migrant and year (2021 vs.2022) that was included in the model;

\*\*\*One person can be included in more than one key-population group;

PR, prevalence ratio.

# Prevalence of HIV positive diagnosis in the disaggregated data\* stratified by time-period: Multivariable analysis



\*The model was applied only to disaggregated data from 48 COBATEST member centers;

\*\*One person can be included in more than one key-population group;

PR, prevalence ratio.

# Limitations

- Aggregated data limiting the analysis.
- The data was not collected specifically for this study.
- Not all countries of ECA or all COBATEST members are presented in the study.

# Conclusions

Migrants compared  
with Native-born

Significantly high PR

Migrants tested in  
2022 compared  
with 2021

Higher PR of HIV-  
positive diagnosis in  
2022

Significant increase  
in prevalence of  
migrants tested in  
2022

Migrant  
characteristics  
(HIV-positive  
diagnosis)

Significantly high PR  
among transgender  
migrants

Significantly high PR  
among MSM (2021 and  
2022)



- **Analysis of data by country of origin to further tailor the strategies by specific groups within migrant population.**



**COBATEST envisions addressing this by already planned improvements in the standardized data collection tool.**

- **Urgent need for inclusive health policies and scale-up of strategies for delivering HIV testing, prevention, and treatment tailored to migrant population**



## COBATEST Team at CEEISCAT



**COBATEST**  
NETWORK

HepHIV **2023**  
13-15 NOVEMBER · MADRID

# Participating COBATEST Network members

## Austria

Aids Hilfe Wien

## Belgium

BeTested - Aimer Jeunes (FLCPF)  
BeTested - Marolles (FLCPF)  
PlateForme Prévention Sida  
BeTested - Jette (FLCPF)  
BeTested - Uccle (FLCPF)  
Médecins du Monde Belgique  
SidaSol (Liège)  
Exaequo  
ELISA Center (Brussels)  
Aide Info Sida  
Centre de Planning Familial Verviers

## Croatia

Croatian Association for HIV and  
Hepatitis (CAHIV)

## Denmark

AIDS Fondet

## Germany

Deutsche Aidshilfe Checkpoint  
Network

## Italy

Fondazione LILA Milano  
Checkpoint Milano  
ANLAIDS Sezione Regionale Ligure ONLUS  
ASA Associazione solidarietà AIDS  
Bergamo Fast Track City  
Latina Check Point  
Roma Checkpoint

## Latvia

Baltic HIV Association

## Moldova

GENDERDOC-M

## Poland

National AIDS Center

## Portugal

Espaço Intendente GAT  
GAT'AFRIK (GAT)  
IN-Mouraria (GAT)  
Checkpoint LX  
Lisbon Cohort (GAT)  
Almada (GAT)  
Setúbal (GAT)  
PCVM (MDM & GAT)

## Romania

ARAS

## Serbia

Asocijacija DUGA / Association  
RAINBOW

## Slovakia

Odyseus

## Slovenia

Legebitra

## Tajikistan

Equal Opportunities Tajikistan  
Volunteer

## Spain

Associació Antisida Lleida  
ACASC  
ACAS Girona  
Actuavallès  
Àmbit Prevenció  
CAS Lluís Companys/SAPS  
Assexora'Tgn  
CJAS  
Creu Roja Tarragona  
Gais Positius  
Stop Sida  
ACAVIH  
ACCAS  
Asociación SOMOS LGTB+  
AVACOS-H  
Associació Lambda  
CCASiPA  
CASDA  
CIBE Marítim  
Mujer Gades  
OMSIDA  
Mediterrània LGTBI  
Colors Sitges Link

Thank you