

# Overview of community-based HIV testing and linkage to care among different migrant population groups across Europe

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# Disclosure

- Gilead Sciences' Zeroing In: Ending the HIV Epidemic programme provided support for the following initiative



# Africa Advocacy Foundation (AAF)

- A migrant-led organisation established 27 years ago that works primarily with migrants in the United Kingdom and the European region on healthcare access, human rights, racial justice and preventing violence against women and girls.



# Mi-Health Europe



## Vision

- A Europe in which all migrants are able to realise a healthy and safe life

## Mission

- Promoting an inclusive, empowered European community of frontline organisations and services working with migrants by
  - Building capacity
  - Influencing policy
  - Sharing best practice, expertise

# Mi-Health Europe Activities

## Policy and Research

- Inform and influence policy
- Data-driven advocacy to improve migrant health

## Capacity Building

- Equips frontline organisations with skills and resources
- Mi-Care Training Programme

## Community of Practice

- Facilitates shared learning amongst migrants and broader communities
- Deliver culturally competent frontline services (e.g. HIV testing, PrEP campaigns)

## Resource Directory

- Equips migrants with EU/EEA country-specific, accurate and up-to-date resources
- Supports navigating unfamiliar healthcare, legal and social protections

# Context

***Migrants (or people originating from outside of the reporting country) again constituted a considerable proportion (42%) of new HIV diagnoses in the EU/EEA in 2021.***

WHO Regional Office for Europe, European Centre for Disease Prevention and Control. HIV/AIDS surveillance in Europe 2022 – 2021 data. Copenhagen: WHO Regional Office for Europe; 2022.

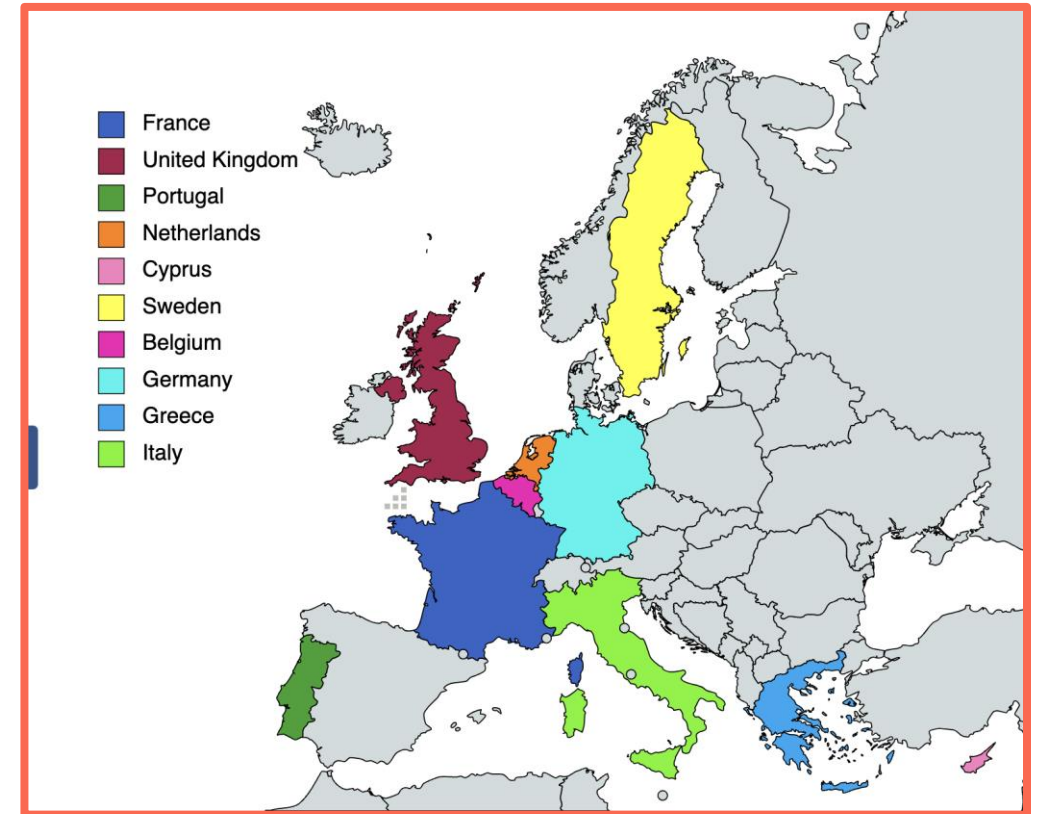
- Disproportionate burden of HIV
- Lack of migrants' knowledge of rights, services
- Limited platforms to share expertise
- Poor quality of existing HIV data on migrants



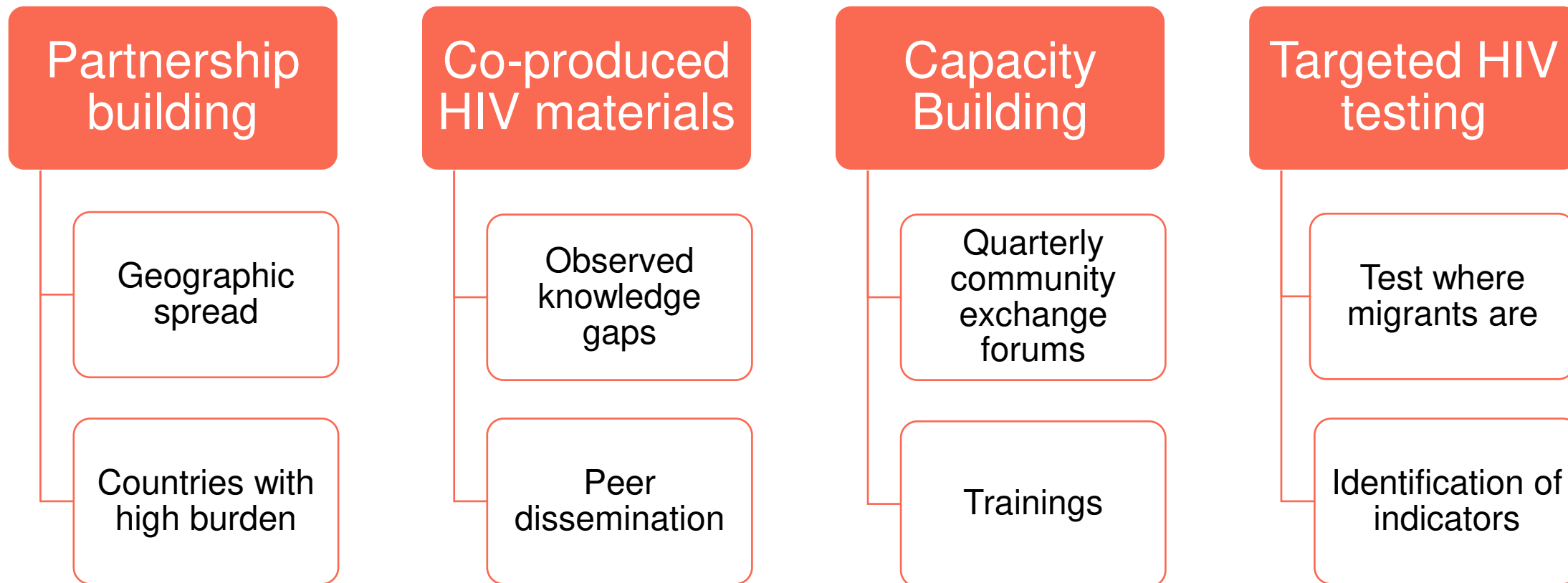
Need for effective community-led approaches to engage migrants in HIV prevention, testing and care.

# Mi-Health HIV Partnership

- Launched a Partnership of frontline migrant-led organisations in 10 high HIV prevalence countries
  - HIV education
  - Community exchange forums
  - Targeted HIV testing



# Method





# Results: Educational Materials

- Disseminated **17,020** materials
- PrEP, HIV testing, and U=U
- **9** languages



Mi HEALTH

¿Sabías que las personas que toman un tratamiento efectivo para el VIH no pueden transmitir el virus?

**I = I** Indetectable = Intransmisible

Para saber más, contactanos en [mihealthurope.org](http://mihealthurope.org)

GILEAD Este proyecto ha sido posible gracias al patrocinio de Gilead Sciences Europe Ltd.



Mi HEALTH

**PrEP is a safe and effective method of preventing HIV.**

Talk to your doctor to see if PrEP is right for you.

Learn more and contact us at [mihealthurope.org](http://mihealthurope.org)

GILEAD This project has been made possible with the provision of a financial grant from Gilead Sciences Europe Ltd.



Mi HEALTH

Знаете ли вы, что можете пройти бесплатный тест на ВИЧ независимо от вашего иммиграционного статуса?

**Пройти тестирование теперь легко, быстро и конфиденциально.**

Вы даже можете пройти тест не выходя из дома.

Узнайте больше и свяжитесь с нами: [mihealthurope.org](http://mihealthurope.org)

GILEAD Этот проект стал возможным благодаря предоставлению финансовой поддержки от Gilead Sciences Europe Ltd.



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# Results: Capacity Building

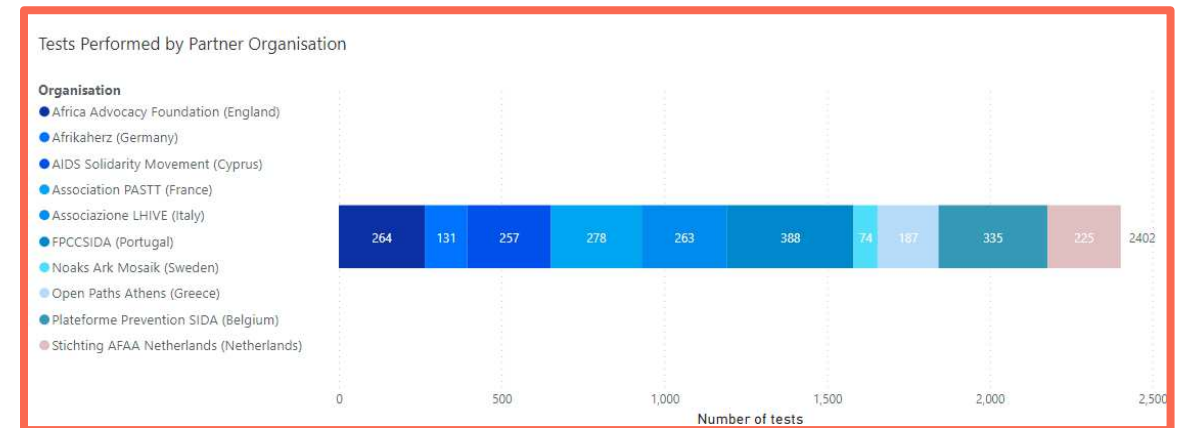
Identified key themes:

- Healthcare access barriers
- Stigma, discrimination and xenophobia
- Negative rhetoric from politicians
- Challenges in securing condoms and other prevention tools



# Results: Targeted HIV Testing

- **2,402** migrants tested for HIV
- Median age of **31** years
- **40%** female
- **43%** Black
- **23%** South or Central American
- **6.4%** prevalence rate
- **42%** were linked into healthcare
- **39%** had never tested for HIV before



# Demographics of participants

## Prevalence rate by migration status

**18%**

Undocumented migrants

**11%**

Asylum seekers

**5%**

Refugees

## Prevalence rate of key populations

**25%**

Migrants who inject drugs

**24%**

Transgender migrants

**18%**

MSM migrants

**17%**

Migrant sex workers

## Primary barriers to healthcare

**14%**

Stigma, discrimination, racism

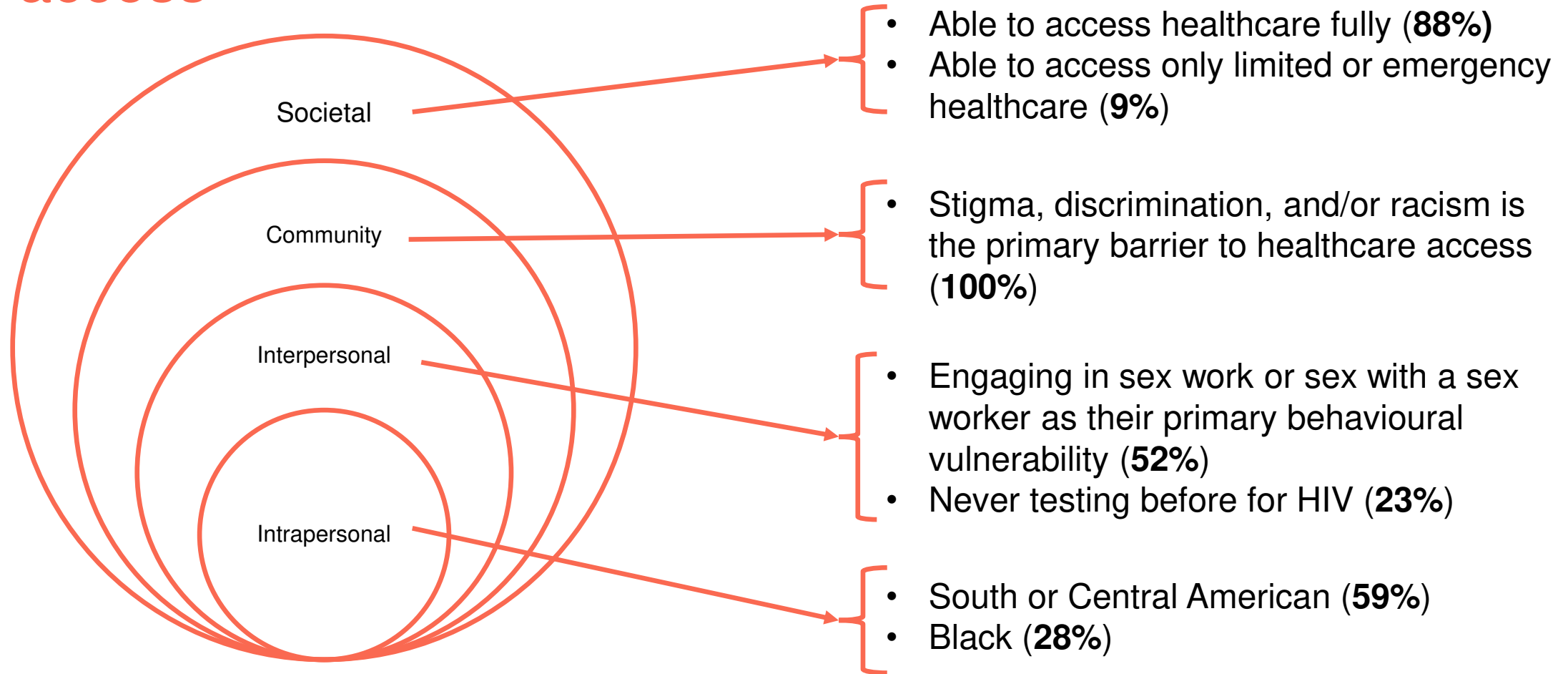
**13%**

Language, communication

**8%**

Legal restrictions

# Subset of migrants reporting stigma, discrimination, and/or racism as the primary barrier to healthcare access



# Subset of migrants reporting stigma, discrimination, and/or racism as the primary barrier to healthcare access

	Subset* (n=344)	All migrants tested (n=2402)
Prevalence rate	16%	6%
Linked into healthcare	57%	42%
Aware of PrEP	48%	36%
Used PrEP in past year	14%	3%

- Higher burden of HIV amongst this group
- Higher rates of linkage to care, PrEP awareness and PrEP uptake
- May suggest that peer-led, community-based services support access to care and prevention tools

Subset = those migrants that reported stigma, discrimination and/or racism was their primary barrier to healthcare access



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Transgender migrants	31%	24%
MSM migrants	25%	18%
Migrants who inject drugs	25%	25%
Migrant sex workers	23%	17%

- Higher burden of HIV amongst all key populations in this group
- Suggests unmet needs and the need for additional targeted interventions

Subset = those migrants that reported stigma, discrimination and/or racism was their primary barrier to healthcare access



# Why testing at the community-level is important

## Importance

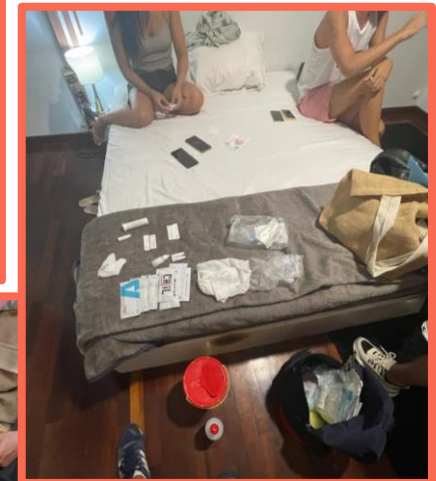
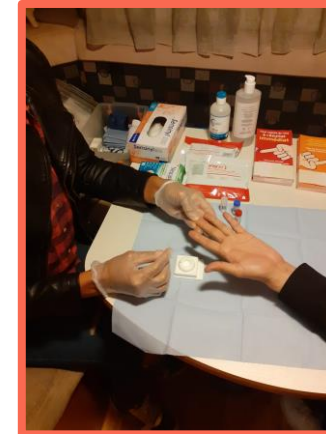
- Experience and our data shows that not all migrants are able to access mainstream healthcare pathways
- Selection of indicators and data points that matter to our communities and highlight gaps

## Engagement

- Go to where migrants are with culturally competent services
- Reach migrants who have never tested before

## Challenges

- Building trust takes time
- Anti-migrant sentiments
- Limited political will and funding





# Conclusions

- Migrants that others readily dismiss as “hard to reach” are willing to engage in HIV testing and care; it is the *services* that are usually hard to reach
- Community-led organisations create trustworthy, culturally sensitive environments for migrants to engage
- Higher HIV prevalence rates and disparities amongst key population migrants point to unmet needs and evidence the need for additional targeted interventions



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# Acknowledgements

- The 2,402 migrants who trusted us
- Our partner organisations
  - Afrikaherz (Germany)
  - The AIDS Solidarity Movement (Cyprus)
  - Association PASTT (France)
  - LHIVE Diritti e Prevenzione (Italy)
  - Noaks Ark Mosaik (Sweden)
  - Open Paths Athens (Greece)
  - Plateforme Prevention SIDA (Belgium)
  - Portuguese Foundation “A Community Against AIDS” (Portugal)
  - Stichting African Foundation Against AIDS (Netherlands)
- Gilead Sciences, Inc.

