

Migration and HIV:

exploring the linkages and responses



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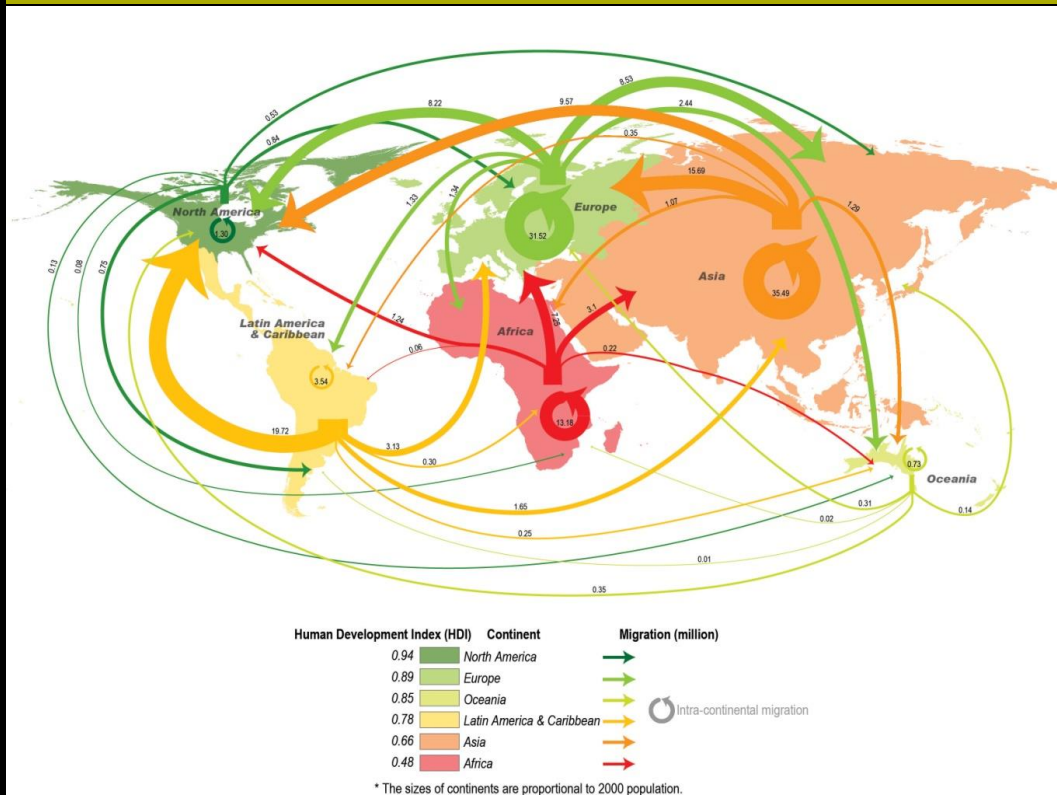
Key messages

1. **Migration is a global norm** that should be considered in all health responses.
2. Migration is a **key determinant of health** and an **important structural driver of HIV**.
3. Current responses to HIV **do not adequately engage with population mobility**.
4. **Improved responses** are urgently required.



1. **Migration is a global norm** that should be considered in all health responses.
 - Important linkages between migration, inequality and urbanisation
 - Increasing securitisation of (im)migration has negative health consequences

- 214 million cross-border migrants (around 3% of the world's population)
- 740 million internal migrants globally

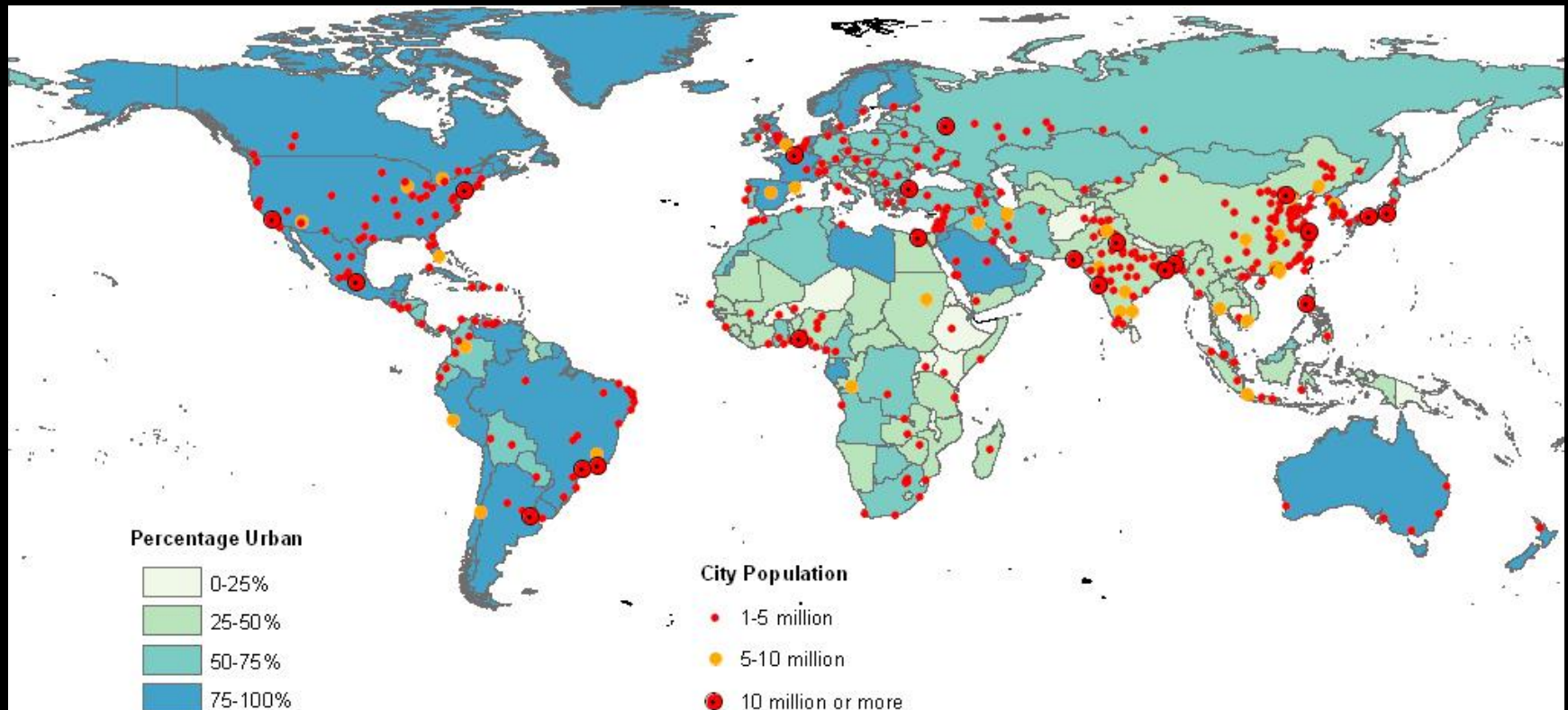


“.....migration is not a random individual choice.

People who migrate are highly organised and travel well-worn paths.”

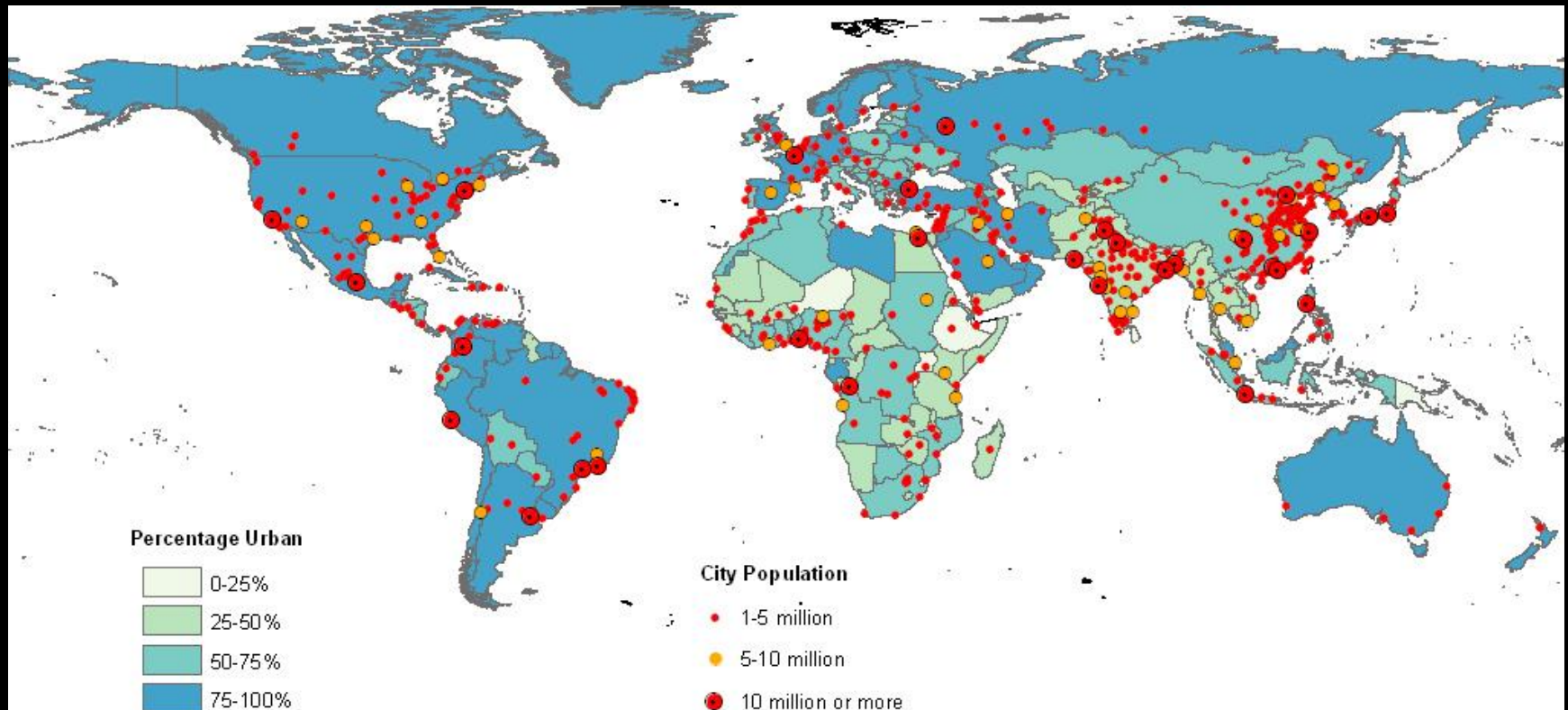
(Harcourt, 2007: 3)

Urban Agglomerations in 2009 (proportion urban of the world: 50.1%)



Source: United Nations, Department of Economic and Social Affairs, Population Division: *World Urbanization Prospects, the 2009 Revision*. New York 2010

Urban Agglomerations in 2025 (proportion urban of the world: 56.6%)



Source: United Nations, Department of Economic and Social Affairs, Population Division: *World Urbanization Prospects, the 2009 Revision*. New York 2010

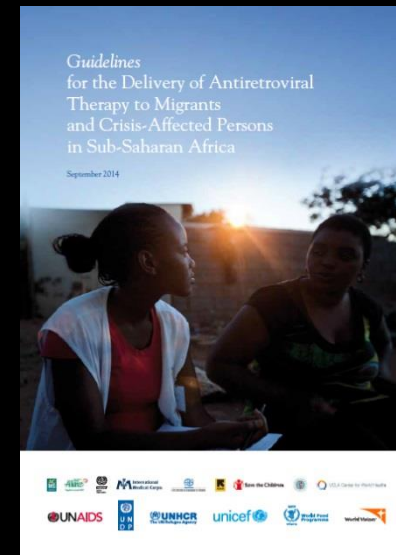
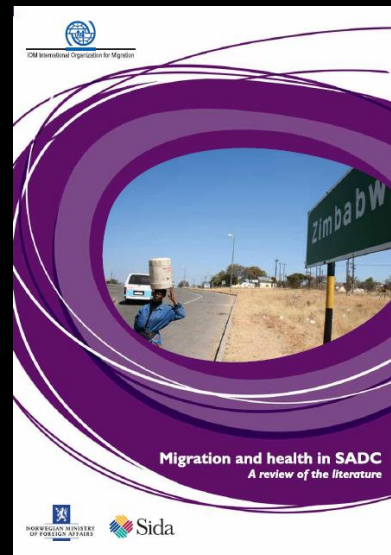
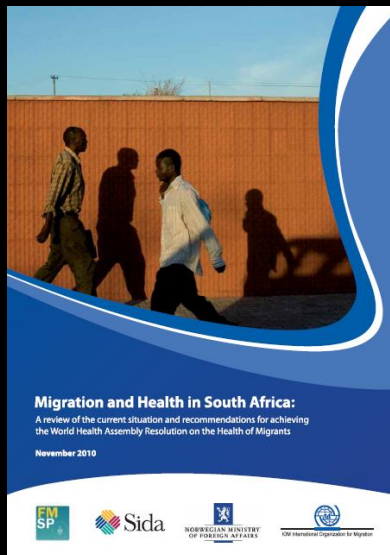
Recognition of migration as a central determinant of health

migration → health

migration can determine health

migration ← health

health can determine migration





Health of migrants

- Calls on member states to **promote equitable access to health promotion, disease prevention and care for migrants.**

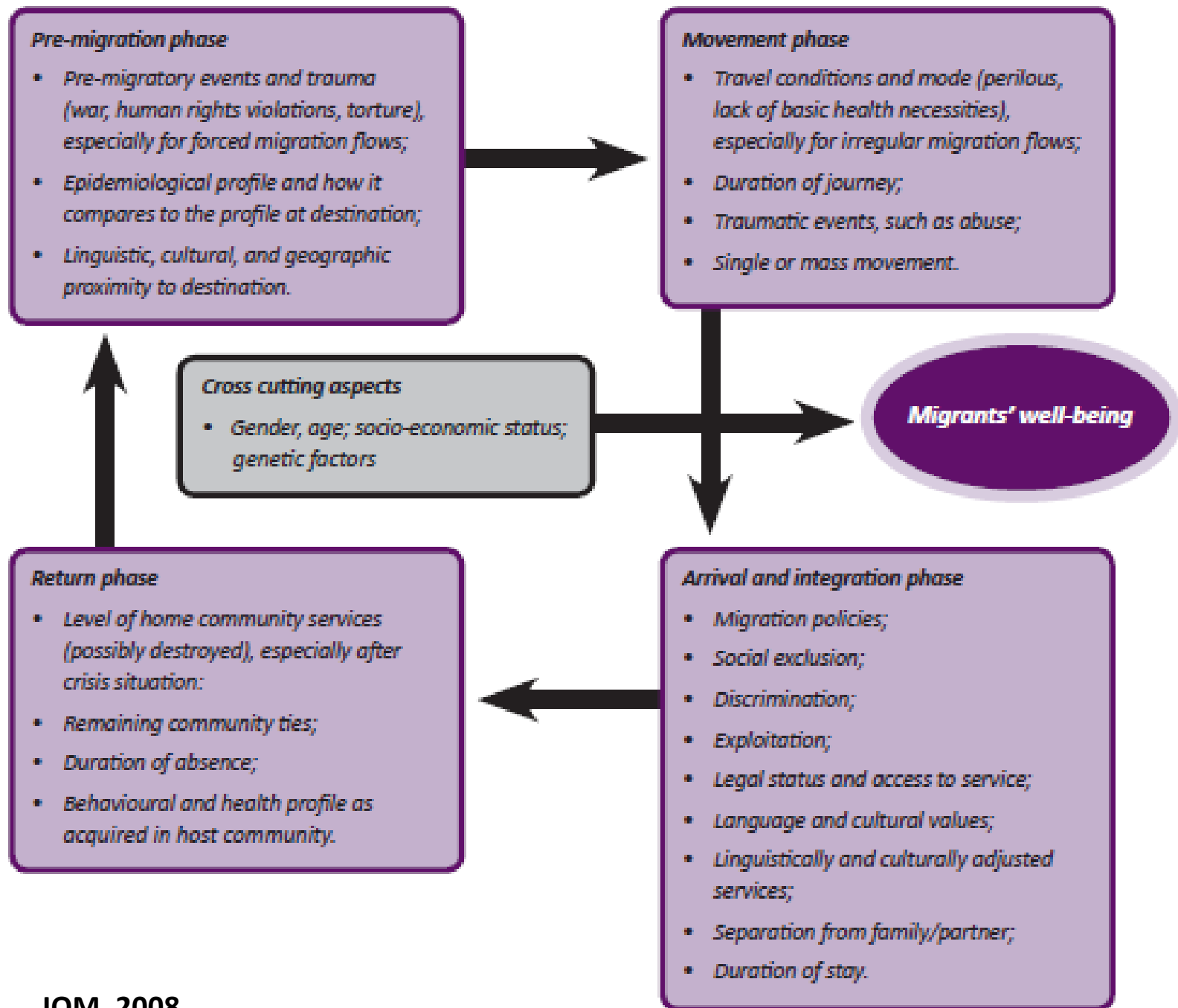
Four priority areas have been identified for achieving the WHA resolution:

1. Monitoring migrant health;
2. Partnerships and networks;
3. Migrant sensitive health systems; and
4. Policy and legal frameworks.

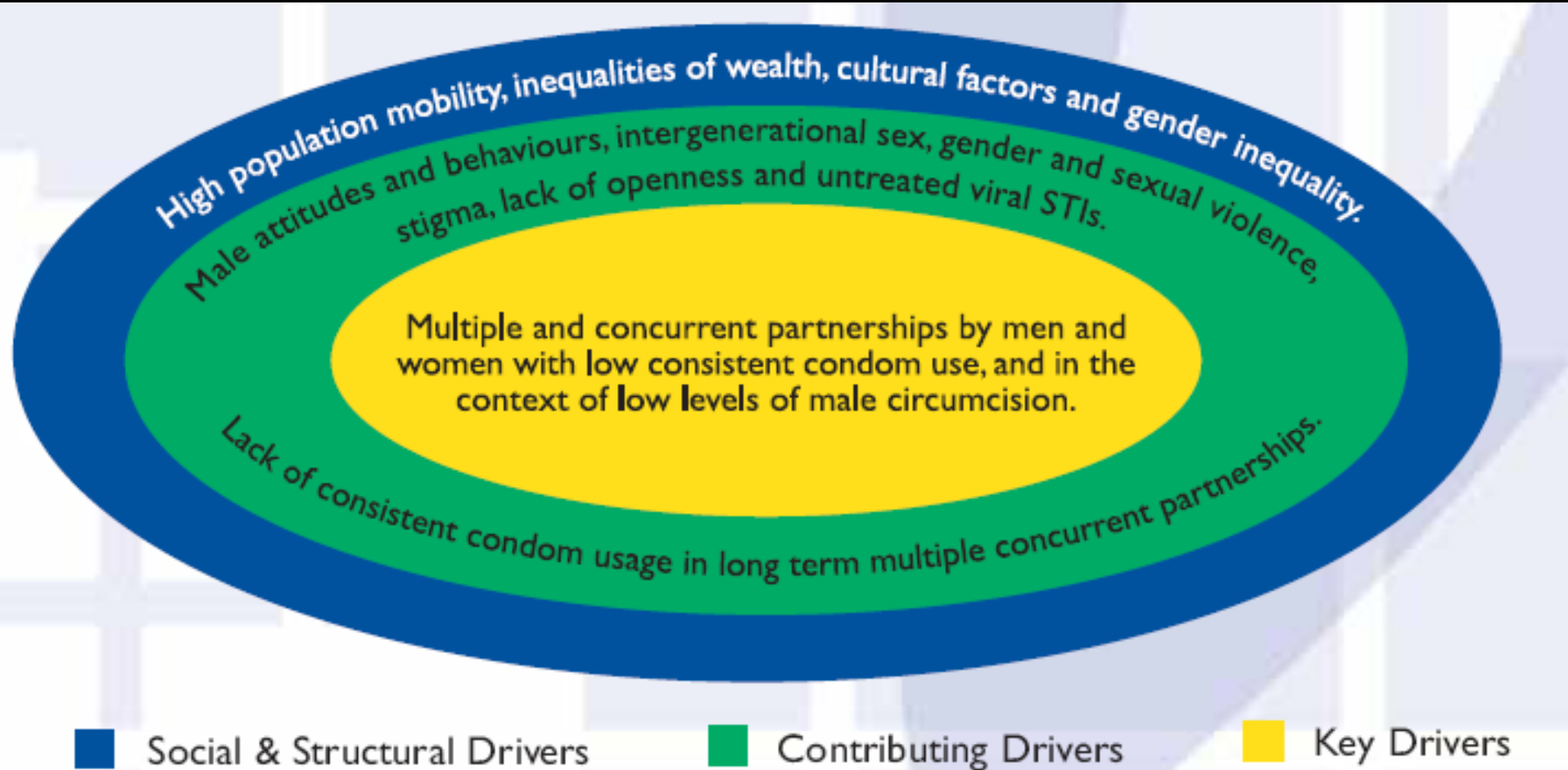


2. Migration is a **key determinant of health** and an **important structural driver of HIV**

- It is the conditions that certain migrants are exposed to which put them at increased risk for HIV acquisition, not being a migrant per se.
- Mobile populations and migrants may work and reside in **spaces of vulnerability**, where physical, social and economic conditions may lead to increased risk of acquisition of HIV



The drivers of HIV in Southern Africa

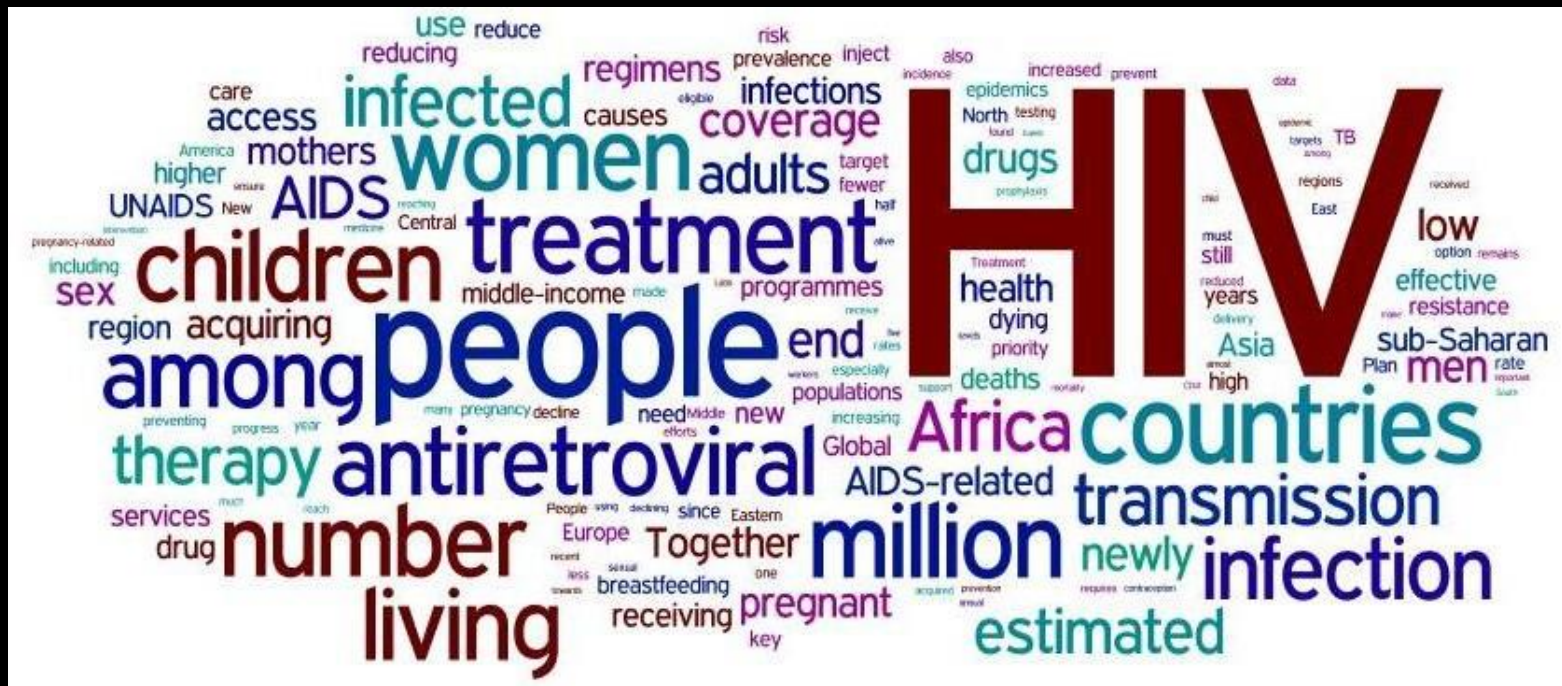


Spaces of vulnerability (IOM, 2010)

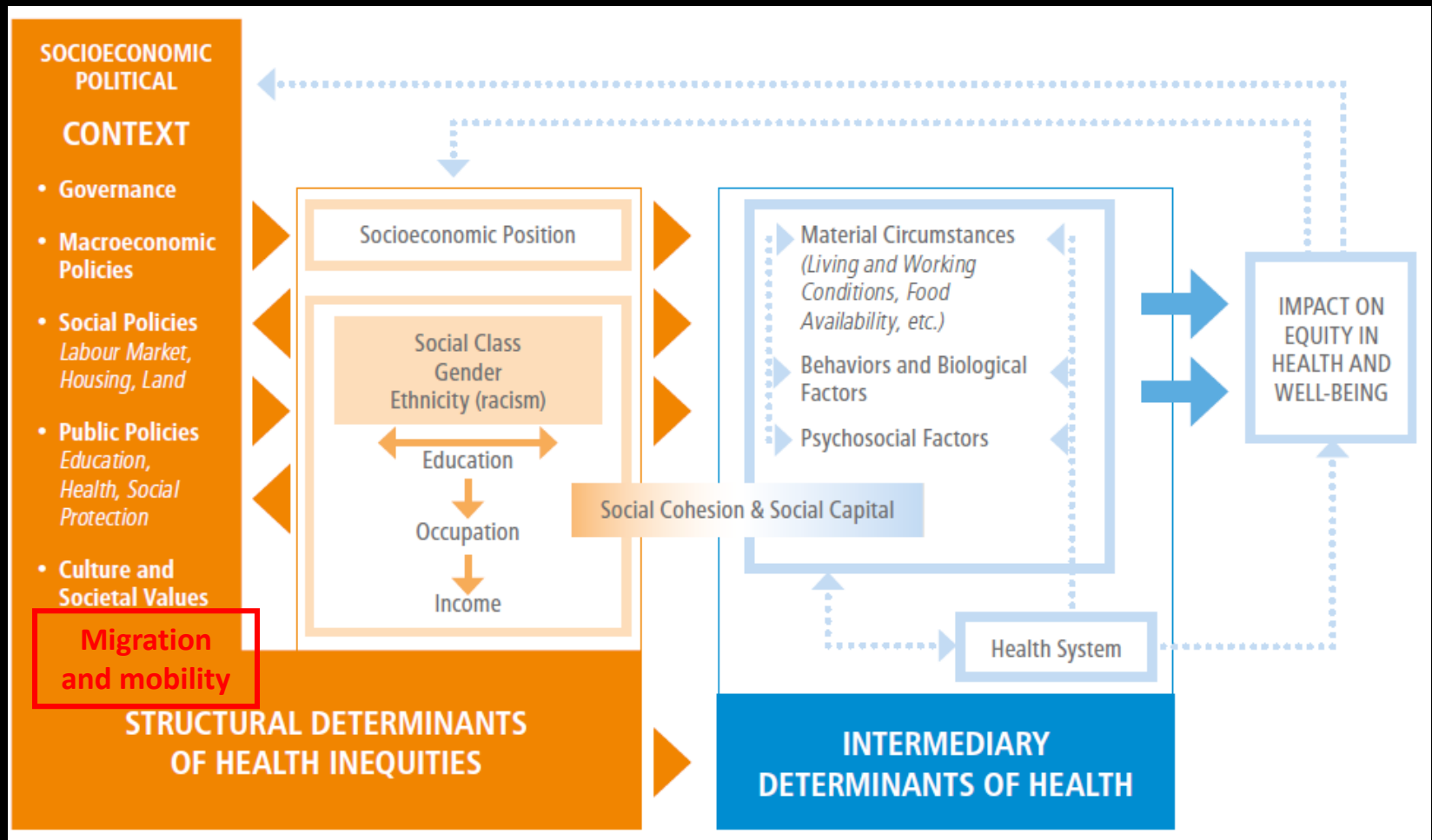
“....health vulnerability stems not only from individual but also **a range of environmental factors specific to the unique conditions of a location**, including the relationship dynamics among mobile and sedentary populations.”

Migration and HIV

- Mobility as a driver of HIV
 - Links geographically separate epidemics
 - Riskier sex
- Migration is complex
 - Definitions?
 - Reasons for moving?
 - Characteristics of areas move from/to
 - Influence on behaviours
- Conflicting evidence
- Complexity of mobility and association with risk factors for HIV
- Context
- Social processes and social relationships



3. Current responses to HIV do not adequately engage with population mobility.



4. Improved responses are urgently required.

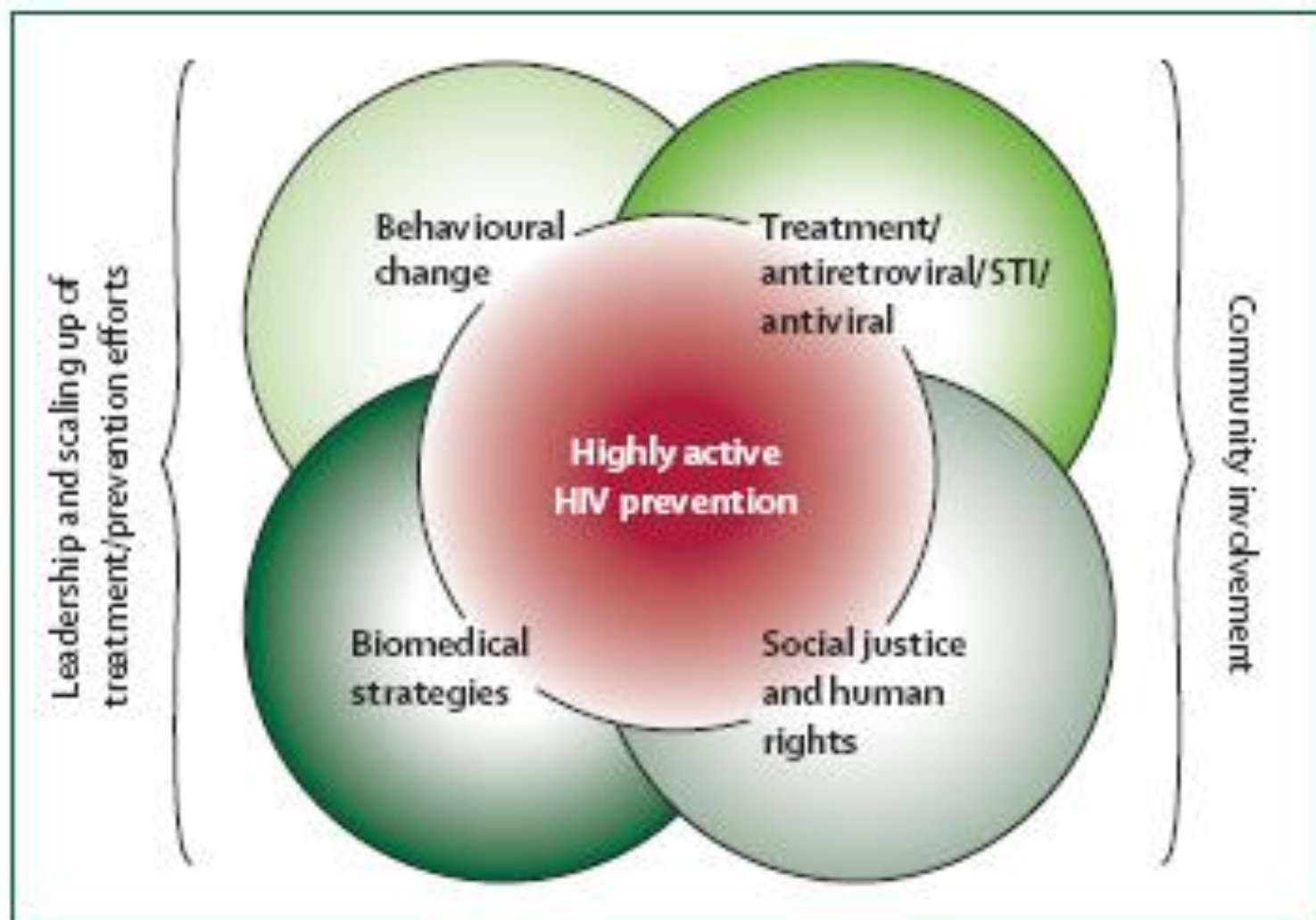


Figure 1: Highly active HIV prevention

This term was coined by Prof K Holmes, University of Washington School of Medicine, Seattle, WA, USA.⁵ STI=sexually transmitted infections.

The social determinants of health:

socioeconomic and political context; structural determinants; intermediary determinants

migration and
mobility

livelihood seeking

HIV TB

Overlapping vulnerabilities:

*gender; food insecurity; lack of cash; living on the periphery;
struggle to meet basic needs*

Inequality



Inequity

spaces of vulnerability

Access to positive determinants of health:

*basic services; healthcare; housing; education;
secure livelihood activities; food security*

Governance (response):

*healthy urban governance; intersectoral action; health in all policies;
developmental local government*

What is needed?

Apply a social determinants of health lens.

- Engage with the informal workplace as a space of vulnerability

Improved data on migration and health is needed.

- Numbers of migrants; numbers of HIV and TB clients who are mobile; strategies employed by mobile clients; referral systems

Advocate for a migration-aware public health

- Work with multiple levels/spheres of governance: global, regional, national, local; involve state and non-state actors; the urban-rural continuum

Do not exceptionalise cross-border migrants.

- Internal migrants are greater in number and a larger development challenge, and are often worse off than cross-border migrants

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