# Refugee, migrants and healthcare access: key issues in the response to HIV, STIs and TB

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# Declaration of interests:

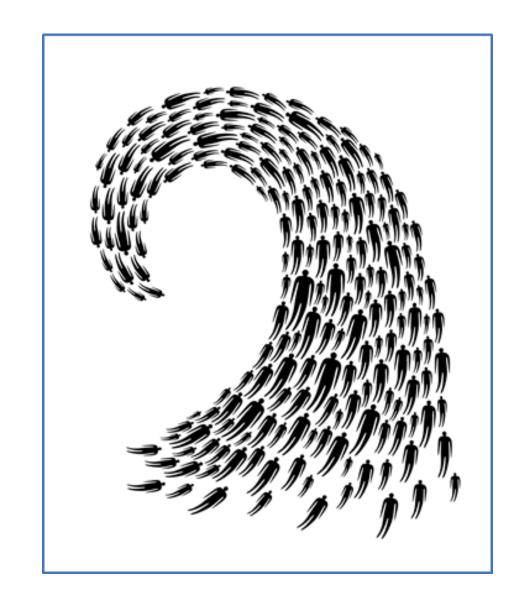
Dr Fionnuala Finnerty was the recipient of a Janssen Exchange Scholarships in collaboration with BHIVA, Barts Health NHS Trust and the University of Zimbabwe (UZ) 2015-16

Dr Fionnuala Finnerty is the SpR representative on the BASHH Sexual Violence SIG

Dr Fionnuala Finnerty is an independent advisor to Refugee Rights Europe

NAT has received grants from Gilead, Janssen, Mundipharma and ViiV over the last 12 months

Yusef Azad has received honorariums as a member of NHS England's Programme of Care Board for Blood and Infection



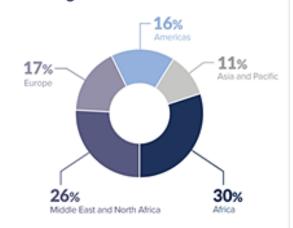


Refugees
22.5 million 17.2 million under UNHCR mandate
5.3 million Palestinian refugees registered by UNRWA

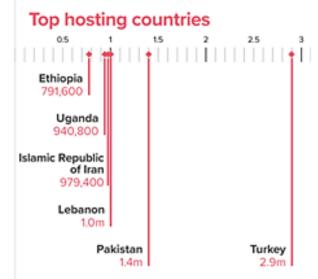
# Stateless people 10 million

**189,300** in 2016

#### Where the world's displaced people are being hosted







Refugee

Someone whose asylum application has been successful; the Government recognises they are unable to return to their country of origin owing to a well-founded fear of being persecuted for reasons provided for in the Refugee Convention 1951 or European Convention on Human Rights.

Asylum seeker

A person who has left their country of origin and applied for asylum in another country but whose application has not yet been concluded

Refused
Asylum seeker

A person whose asylum application has been unsuccessful.

Undocumented migrant

Someone who enters or stays in the UK without the documents required under immigration regulations

# Afzal\*

MSM, flees Afghanistan due to fear of persecution





\*Fictitious case study



#### Minimum Initial Service Package (MISP) for Reproductive Health



#### Objective 1

Ensure health cluster/sector identifies agency to LEAD implementation of MISP

- RH Officer in place
- · Meetings to discuss RH implementation held
- RH Officer reports back to health cluster/sector

GOAL

Decrease mortality,

morbidity & disability in

crisis-affected populations (refugees/IDPs or popula-

tions hosting them)

• RH kits and supplies available & used



#### **Objective 5**

Plan for COMPREHENSIVE RH services. integrated into primary health care

- · Background data collected
- Sites identified for future delivery of comprehensive
- Staff capacity assessed and trainings planned
- RH equipment and supplies ordered









Prevent excess MATERNAL & NEONATAL mortality & morbidity

- · EmONC services available
- 24/7 referral system established
- Clean delivery kits provided to birth attendants and visibly pregnant women
- · Community aware of services















**RH Kit** 



#### **Objective 2**

#### Prevent SEXUAL VIOLENCE & assist survivors

- Protection system in place especially for women
- Medical services & psychosocial support available for survivors
- Community aware of services







#### Objective 3

#### Reduce transmission of HIV

- Safe and rational blood transfusion in place
- · Standard precautions practiced
- Free condoms available



Universal precautions through kits 1-12



#### Results

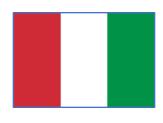
Wo	Work-stream 4: Audit against MISP standards				
	Standard	Result			
1	Leader to implement MISP – reproductive health officer in place	NOT MET			
2	Prevent sexual violence and assist survivors	NOT MET			
3	Reduce transmission of HIV	NOT MET			
4	Prevent obstetric and new-born morbidity/mortality	PARTIALLY MET			
5	Plan for comprehensive sexual health services integrated into primary health care	NOT MET			

Finnerty et al. Does the new 'jungle' migrant camp in Calais meet the intra-agency working group (IAWG) minimum standards for sexual and reproductive health (MISP) in an emergency situation? Sexually Transmitted Infections 2016;92:291

# Sexual Violence



# HIV infection prevalence in refugee & undocumented migrant population



• 1.5% - asylum centre Italy (Tafuri et al BMC Infectious Diseases, 2010)



• 3.4% pregnant asylum seekers Netherlands (Goosen et al, PLOS One 2015)



• 2.9% undocumented migrants France (Berdougo, IAS 2017)

# Post migration acquisition of HIV

#### RESEARCH ARTICLE

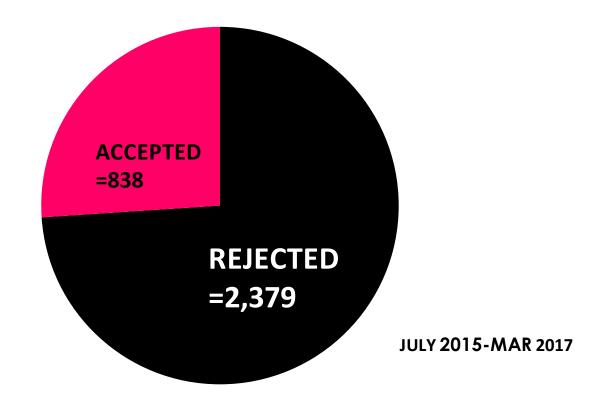
Sub-Saharan African migrants living with HIV acquired after migration, France, ANRS PARCOURS study, 2012 to 2013

A Desgrées-du-Loû 15, J Pannetier 15, A Ravalihasy 15, A Gosselin 15, V Supervie 2, H Panjo 3, N Bajos 35, F Lert 35, N Lydié 45, R Dray-Spira 25, The Parcours Study Group 5





# Asylum claims on the basis of sexual orientation



# Deported gay Afghans told to 'pretend to be straight'

New Home Office rules would send gay asylum seekers back to Afghanistan, where homosexuality is illegal

England's most disadvantaged groups:
Migrants, refugees and asylum seekers

An *Is England Fairer?* review spotlight report (4 of 4)

# STIs

Table 5. Prevalence by infection and World Bank classification.

	Classification	Chlamydia	Gonorrhoea	Trichomoniasis	Syphilis
Females	High-income economies	3.0%	0.3%	1.9%	0.2%
	Upper-middle income economies	6.9%	1.2%	6.9%	0.3%
	Lower-middle income economies	2.4%	0.6%	3.5%	0.5%
	Low-income economies	2.9%	1.1%	7.8%	1.3%
	Female total	4.2%	0.8%	5.0%	0.5%
Males	High-income economies	2.4%	0.3%	0.6%	0.2%
	Upper-middle income economies	4.2%	1.0%	0.7%	0.3%
	Lower-middle income economies	1.6%	0.5%	0.3%	0.5%
	Low-income economies	2.0%	0.5%	0.8%	1.3%
	Male total	2.7%	0.6%	0.6%	0.5%

doi:10.1371/journal.pone.0143304.t005

# Contraception/Reproductive Health



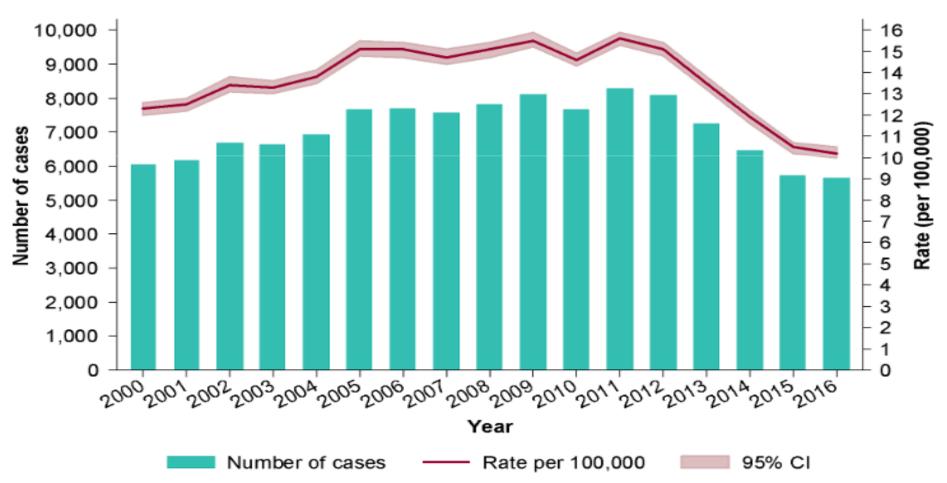
For more information go to www.nhs.uk/visitingengland

#### **Exempt services**

- 1.1. The following services are free at the point of use for all patients. A charge cannot be made or recovered from any overseas visitor for:
  - accident and emergency (A&E) services, this includes all A&E services
    provided at an NHS hospital, e.g. those provided at an accident & emergency
    department, walk-in centre, minor injuries unit or urgent care centre<sup>2</sup>. This does
    not include those emergency services provided after the overseas visitor has
    been accepted as an inpatient, or at a follow-up outpatient appointment, for
    which charges must be levied unless the overseas visitor is exempt from
    charge in their own right;
  - family planning services (does not include termination of pregnancy);
  - diagnosis and treatment of specified infectious diseases (listed at Chapter 4);
  - diagnosis and treatment of sexually transmitted infections;

## **Tuberculosis**

Figure 1.1: TB case notifications and rates, England, 2000-2016





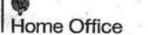
TB Monitoring Indicator 1: Overall TB incidence per 100,000 population (England and PHEC)

Top asylum applications by nationality Q2 2017	Estimated TB incidence per 100,000 population		
Pakistan	268		
Bangladesh	221		
Nigeria	219		
India	211		
Afghanistan	189		
Sudan	146		
Vietnam	133		
Iraq	43		
Albania	16		
Iran	14		

"The aim is to create here in Britain a really hostile environment for illegal migration ... What we don't want is a situation where people think that they can come here and overstay because they're able to access everything they need." Theresa May, 2012













To: Mr/Mrs/Miss

Date: 2 3 18

#### Dear

I am a Home Office Immigration Enforcement Manager based at Yarl's Wood IRC and must explain to you, in the presence of my Home Office colleague, that the fact that you are currently refusing food and/or fluid:

- will not lead to the progress of your immigration or asylum case being halted or delayed;
- may, in fact, lead to your case being accelerated and your removal from the UK taking place sooner;
- · will not lead to your removal directions being deferred;
- · will not lead to you being granted permission to stay in the UK; and
- will not automatically lead to your release from detention.

Signature 1

Signature 2