



POSTER PRESENTATION

Open Access

HIV & emerging infectious diseases in mobile populations in Europe

Anna-Paola de Felici, Manuel Carballo, Sofiat M Akinola*

From 16th International Symposium on HIV and Emerging Infectious Diseases
Marseille, France. 24-26 March 2010

Background

Despite the significant progress that has been made in diagnosing and treating people with HIV in most European countries, little is known about HIV and its implications for co-infections such as TB among mobile populations in Europe, in particular among undocumented migrants and Roma. Both these groups tend to fall outside the main health care delivery networks and pathways of EU countries. Thus despite the growing statistical importance of undocumented migrants in the EU and the high internal mobility of Roma people, little is known about their vulnerability to HIV and TB and how they could best be reached with prevention and treatment interventions. In order to shed light on this emerging problem and explore possible solutions to it, we assessed HIV and TB co-infection incidence and prevalence data in mobile populations, especially undocumented migrants and Roma people in EU and EEA countries, and how countries are responding to it. In addition we investigated if and how culturally defined attitudes and behavior as well as the socio-economic and legal status of undocumented migrants and Roma influences their vulnerability to HIV-TB co-infection and their access to diagnosis, treatment and likelihood of adherence. We further examined if and to what extent this might be related to emerging patterns of multi-drug resistant TB.

Methods

We conducted a triangulation of current knowledge on this theme, including a comprehensive literature (published and unpublished) search using medical and social science journals, national and NGO reports, and we also conducted interviews of key knowledgeable people in selected high in-migration countries.

Results

Despite the growing threat of HIV-related TB and MDR-TB in the context of mobile populations, especially (but not only) clandestine migrants and Roma, there is little evidence that countries and health care organizations have taken it upon themselves to focus on these groups and develop the type of tailored interventions that are needed. Undocumented migrants and Roma are not being reached by currently available services and there is little if any evidence of HIV-TB surveillance of their disease situation.

Discussion

Unless specifically structured interventions are made available to national health care providers working in settings with a high movement of undocumented migrants and Roma, there is a danger that TB and MDR-TB will become more problematic within these groups and by extension, elsewhere as well. To this end much more emphasis should be placed on alerting and preparing primary health care personnel for this challenge and providing them with guidelines and facilities needed to reach and sustain the interest of undocumented migrants and Roma. Growing poverty will continue to drive both legal and undocumented migration, and could make TB and HIV more difficult to identify and control. Growing poverty in European countries could meanwhile extend the parameters of vulnerability within the host population.

Published: 11 May 2010

doi:10.1186/1742-4690-7-S1-P189

Cite this article as: de Felici *et al.*: HIV & emerging infectious diseases in mobile populations in Europe. *Retrovirology* 2010 **7**(Suppl 1):P189.

* Correspondence: sakinola@icmh.ch
International Centre for Migration, Health and Development, Geneva,
Switzerland