

POLICY DEVELOPMENT REPORT

AIDS&Mobility Europe 2008–2011



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Co-funded by the European Union under the Program of Community Action in the Field of Public Health 2003–2008
Executive Agency for Health and Consumers.



Policy Development Report

AIDS&Mobility Europe 2008–2011

Series of publications

AIDS&Mobility Europe 2008–2011

Volume 3

Published by:

Leading project partner: Ethno-Medizinisches Zentrum e.V. (EMZ, Hannover)

Associated project partners:

European AIDS Treatment Group (EATG, Brussels)

Fondet til bekaempelse af aids (AIDS-Fondet, Copenhagen)

International Organization for Migration (IOM, Brussels)

Istituto nazionale per la promozione della salute delle popolazioni migranti e il contrasto delle malattie della povertà/ National Institute for Health, Migration and Poverty (NIHMP, Rome)

MTU AIDS-I Tugikeskus (AISC, AIDS INFORMATION & SUPPORT CENTER, Tallin)

Naz Project London (NPL, London)

Yeniden Sağlık ve Eğitim Derneği/ Yeniden Health and Education Society (Yeniden, Istanbul)

Terrence Higgins Trust (THT, London associated partner until 2009)

The project AIDS&Mobility Europe was co-funded by the Executive Agency for Health and Consumers (EAHC) at the European Commission, and involved seven main European partner organizations working alongside the Ethno-Medical Centre in Hannover as coordinator. The project started in 2008 and finished in 2011. The main aim of the AIDS&Mobility Europe project is to reduce HIV vulnerability of migrant and mobile populations in Europe, through the development, implementation and promotion of appropriate policies and measures within a European wide network of experts. Mobility stands for migration in all its diversity: from travellers and immigrant communities to asylum seekers and refugees. For the purpose of the project, the definition of migrant is based on language barriers in access to health services as a result of belonging to a population minority (mostly ethnic groups). The main objective of the network is to build the capacity of migrant communities to engage with and embrace prevention topics related to HIV, STIs, Hepatitis, Harm Reduction and Reproductive Health.

POLICY DEVELOPMENT REPORT

AIDS&Mobility Europe 2008–2011

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A publication of the Ethno-Medizinisches Zentrum e.V.

2012

This publication was funded by:

European Union – Executive Agency for Health and Consumers
(Co-funded by the European Union under the Program of Community Action
in the Field of Public Health 2003–2008)

Lower Saxon Ministry of Social Affairs, Women, Family, Health, and Integration
City and Region of Hannover

Published by:

Ethno-Medizinisches Zentrum e. V.
Königstraße 6
30175 Hannover/Germany

Publishing and Distribution:

Ethno-Medizinisches Zentrum e. V.
Königstraße 6
30175 Hannover/Germany

Pictures and Figures

EMZ and Partners

Title

EMZ: fotolia.com

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Chapter 1:

The A&M Policy Event on 30th November 2010 in Brussels

HIV/AIDS remains a fundamental health problem in Europe, with rates of new infections increasing in recent years, and it also affects migrant populations. Lower levels of awareness and the feeling that the disease is now less severe are putting European youth and certain social groups more at-risk. Migrants are especially vulnerable due to gaps in targeted culturally-sensitive health strategies, or because of lack of access to health services. The topic, especially prevention among young migrants, is back on EU health policy and the programmatic agendas of Member States.

Marking World AIDS Day (December 1st), the AIDS&Mobility (A&M) Europe 2008–2011 project held the seminar “With Migrants for Migrants: Improving HIV Prevention for All” on 30th November 2010. The International Organization for Migration (IOM) organised this event at the European Parliament in Brussels to mobilise European stakeholders, practitioners and policy makers at EU and national levels for HIV, mobility and migrant-empowering strategies.

Hosting and Partnership

The GUE/NGL (European United Left/Nordic Green Left) Group at the European Parliament kindly hosted the 30th November seminar. MEPs Marisa Matias and Marie Christine Vergiat, from the Committee on the Environment, Public Health and Food Safety and the Committee on Civil Liberties, Justice and Home Affairs respectively, chaired the seminar.

The event was the main public event of the AIDS&Mobility (A&M) Europe 2008–2011 project. Coordinated by the Ethno Medical Centre (EMZ, Hanover), the A&M project is a European partnership comprising the European AIDS Treatment Group (EATG) as well as health institutes and AIDS associations in Italy, Estonia, Turkey, Denmark and the UK.* IOM is a main partner and leads on policy development.

The A&M project has received funding from the European Commission Health Programme as well as from the Ministry of Health, Portugal, and the State Capital of Hannover, the Greater Hannover Area (Hannover Region) and the Lower Saxon Ministry for Social Affairs, Women, Family Affairs, Health and Integration, Germany.

Opening Session

MEPs Marisa Matias and Marie Christine Vergiat, in their opening keynote speeches, presented the HIV and migration context in Europe as one that is in need of heightened policy attention and action. Other panelists in this session were Bernd Hemingway, IOM Regional Representative to the EU; Gisela Lange, Policy Officer, European Commission DG Health and Consumers; Henrique Barros, the Portuguese National HIV/AIDS Coordinator; former MEP Vittorio Agnoletto; and Aldo Morrone, Director General of the National Institute for Health, Poverty and Migration (NIHPM, Rome). They all stressed in their speeches, each from their perspective, the importance of including the migratory

framework and migrants' particular circumstances and social determinants of health, as well as those of ethnic minorities, into the big European – and smaller national – picture of HIV-related research, policy analysis, and social and health programme development.



Opening Panel

Session I: A&M Project Achievements

Session I “Spotlight on migrants’ contribution to HIV prevention” put forward the AIDS&Mobility (A&M) Europe 2008–2011 project as a best practice in this field. The A&M project focuses on peer education i.e. ‘migrant to migrant’ education, for the dissemination of culturally-sensitive information. The method, supported by the A&M Guidebook and Toolkit on HIV/AIDS for Migrants in Europe, has reached hundreds of young people from 20 different language groups in six European countries while over 100 migrants have become certified transcultural mediators for their own communities.

Chaired by Roumyana Petrova-Benedict, IOM Senior Regional Migration Health Manager for Europe in Brussels, Session I

reviewed the A&M project activities and achievements with lead interventions by Ramazan Salman, Executive Managing Director of EMZ, and Jury Kalikov, Director of AIDS-i Tugikeskus, partner organization in Estonia. The A&M project has provided an effective method for health education across cultural and language barriers in the highly sensitive area of AIDS/HIV. It is a model for self-empowerment and for building and strengthening skills and responses to HIV among migrant communities. Project results and tools including the A&M successful transcultural mediator model and the Guidebook and Toolkit were presented during the event and proposed for replication in other countries and on other policy areas.

The event also promoted the EMZ Young Social Entrepreneur (YSE), which in 2010 was awarded to Dynka Amorim, a migrant from Sao Tome and Principe based in Portugal whose project “Bue fixe” successfully brings together traditional health education and new media and has been the main feature of a MTV video.

Session I: Recommendations

Session I concluded with the presentation by María José Peiro, Coordinator, Migration Health, IOM Brussels, on the set of recommendations to improve HIV policies and programmes at the national and EU levels. Inspired by the A&M project practice and IOM's own expertise, the recommendations draw on the commitments made in adopted legal and policy documents primarily at EU level.

Specifically, the recommendations call for EU Member States to improve migrants’ access

to healthcare services, to explicitly include migrants and ethnic minorities in National HIV/AIDS Plans, to promote participatory and migrant-empowering approaches in HIV prevention (including peer communication and mediation models), to institutionalise successful approaches in public healthcare systems, and to foster capacity building for organisations and professionals working with migrants through training and coaching on intercultural communication. Recommendations addressed to the EU institutions primarily demand support for full access to healthcare for migrants in Europe and greater collaboration and coordination of HIV related policies and programmes at the EU level.

Following the event, IOM held a (email) consultation on the recommendations among the event participants and key stakeholders to capture all views and feedback. After final review, the recommendations have been disseminated widely for endorsement and advocacy to regional and national governments, EU institutions and non-governmental and advocacy organizations at national and EU levels.

Session II: Other Best Practices

Session II “Highlights from other best practices” established linkages with other European HIV and migration-related initiatives that contribute to health promotion and HIV prevention strategies among migrant populations. National government departments, specialized university and hospital units, and civil society associations from Belgium, Spain and Portugal, as well as European projects such as the *Correlation Network* addressing key groups for HIV prevention including migrants and the *European*

Network for HIV/STI Prevention and Health Promotion among Migrant Sex Workers (TAM-PEP) presented various approaches and conclusions. The *Correlation Network*, led by the European AIDS Treatment Group (EATG, also an A&M project partner), was represented on this occasion by Bryan Teixeira (Chief Executive, Naz Project London) who presented the preliminary recommendations emerging from this project.

Conclusion

The event concluded with a unanimous message to join forces to improve the response to HIV and migration in Europe. Migrants often face situations of vulnerability in relation to HIV, especially due to the negative social health determinants and resulting health inequities they suffer across Europe. At the same time, migrants are a valuable resource in combating the growing incidence of HIV/AIDS in Europe and they need to be included in health responses that seek to tackle this. If they are to effectively address HIV concerns in Europe, national and European institutions alike need to use inclusive approaches in HIV-related prevention, health promotion and care, including mediator programmes and migrant-sensitive health services.

* The A&M partners are AIDS-Fondet (Denmark, www.aidsfondet.dk), AIDS-i Tugikeskus (AISC, Estonia, www.tugikeskus.ee), European AIDS Treatment Group (EATG, www.eatg.org), National Institute for Health, Migration and Poverty (NIHMP, Italy, www.inmp.it), Naz Project London (UK, www.naz.org.uk), Yeniden (Turkey, www.yeniden.org.tr), and the International Organization for Migration, Brussels Office (www.iom.int).

Attachments: Final Agenda, List of Speakers and Participants, Recommendations

Chapter 2: Agenda

14:00–15:00

Welcome

Chair: Vittorio Agnoletto, former MEP, expert,
National Institute for Health, Poverty and Migration (NIHPM), Italy

Hosts:

Marisa Matias, MEP (GUE NGL),

Committee on the Environment, Public Health and Food Safety

Bernd Hemingway, Regional Representative, Regional Liaison and Coordination Office
to the European Union, International Organization for Migration (IOM)

Setting the scene: HIV and Migration

Marie Christine Vergiat, MEP (GUE NGL),

Committee on Civil Liberties, Justice and Home Affairs

Gisela Lange, Policy Officer, Health Determinants Unit,
DG Health and Consumers, European Commission

Henrique Barros, National HIV/AIDs Coordinator, Portugal

Aldo Morrone, Director General, National Institute for Health, Poverty and Migration
(NIHPM), Italy

Questions & Answers

Presentation of the AIDS&Mobility Project Young Social Entrepreneur of the Year Award
2010 (MTV Video)

15:00–16:00

Spotlight on migrants' contribution to HIV prevention: the AIDS&Mobility Europe 2007–2010 project and other examples

Chairs:

Marisa Matias, MEP (GUE NGL),

Committee on the Environment, Public Health and Food Safety

Roumyana Petrova-Benedict, Senior Regional Migration Health Manager for
Europe, Regional Liaison and Coordination Office to the European Union, International
Organization for Migration (IOM)

Ramazan Salman, Executive Managing Director, Ethno-Medical Centre (EMZ), Germany

Fode Mohamed Camara, AIDS&Mobility project mediator, Germany

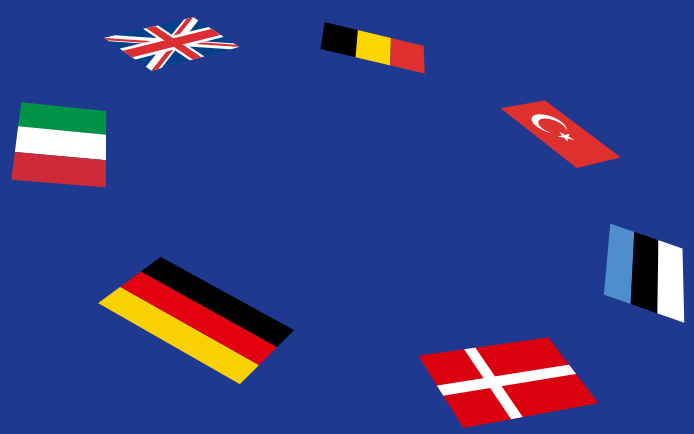
Jury Kalikov, Director, AIDS-i Tugikeskus, Estonia

María José Peiro, Coordinator, Migration Health, Regional Liaison and Coordination
Office to the European Union, International Organization for Migration (IOM)

Bryan Teixeira, Chief Executive, Naz Project London, UK: recommendations from the
Correlation Network project, led by the European AIDS Treatment Group (EATG)

José Martins, Coordinator, Intercultural Mediators Programme,

High Commissariat for Immigration and Intercultural Dialogue (ACIDI), Portugal



16:00–16:45

Highlights from other good practices

Christiane Nöstlinger, Head of Behavioral Sciences, HIV/STI Epidemiology and Control Unit, Institute of Tropical Medicine, Belgium

Bárbara Navaza, Interpreter and Cultural Mediator, Project New citizens, new patients, Tropical Medicine Unit (TMU), Ramón y Cajal Hospital, Spain

Anne Etienne, Mediator and Coordinator of Intercultural Mediation, University Hospital Brugmann (programme supported by the Belgian Federal Ministry of Health)

Anna Zakowicz, Chair, European AIDS Treatment Group (EATG)

Licia Brussa, General Coordinator, European Network for HIV/STI Prevention and Health Promotion among Migrant Sex Workers (TAMPEP), Netherlands

Maureen Louhenapessy, Project Manager, Sireas asbl – International Service for Research, Education and Social Action, Belgium

Discussion with the audience: recommendations and good practices

16:45–17:00

Final Remarks

Vittorio Agnoletto, former MEP, expert, National Institute for Health, Poverty and Migration (NIHPM), Italy

Roumyana Petrova-Benedict, Senior Regional Migration Health Manager for Europe, Regional Liaison and Coordination Office to the European Union, International Organization for Migration (IOM)



Plenary Room

Chapter 3:

List of Speakers

AGNOLETTO Vittorio

Former MEP, National Institute for Health, Poverty and Migration (NIHPM), Italy

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National HIV/AIDS Coordinator, Portugal

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General Coordinator, European Network for HIV/STI Prevention and Health Promotion among Migrant Sex Workers (TAMPEP), Netherlands

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Project Leader and Programme Director AIDS&Mobility Europe

TEIXEIRA Bryan

Chief Executive, Naz Project London, UK

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MEP (GUE NGL) Committee on Civil Liberties, Justice and Home Affairs

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VAN DE VELDE Jan

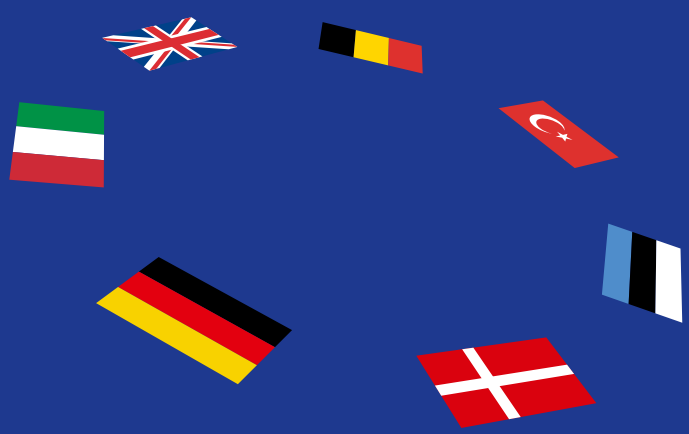
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I. Preamble¹

(a) Considering that the General Comment No. 14 of the UN Committee on Economic, Social and Cultural Rights (2000) and the General Recommendation XXX: Discrimination Against Non-Citizens, A/59/18 (65th Session, 2004) 93, of the UN Committee on the Elimination of Racial Discrimination, guarantee the right to health of migrants by application of the principle of non-discrimination; States are thus under the obligation to *respect* the right to health by, *inter alia*, refraining from denying or limiting equal access for all persons, including prisoners or detainees, minorities, asylum seekers and irregular migrants, to preventive, curative and palliative health services.

(b) Recognizing that the UNGASS 2001 Declaration of Commitment on HIV/AIDS and 2006 Political Declaration on HIV/AIDS commit European States to act and protect against HIV, including specifically addressing HIV risks among ethnic minorities and migrants.

(c) Noting that the EU Council (EPSCO) Conclusions on Health and Equity of June 2010 (Spanish EU Presidency) and the WHO Resolution on Health Inequalities (WHA, 2009) recognize that migrant groups are at a disadvantaged situation, disproportionately affected by health inequalities.

(d) Recalling that the EU Council (EPSCO) Conclusions of December 2007 (Portuguese EU Presidency) stated that:

- Addressing the health of migrants is fundamental to attaining the best level of health and well-being for all people living in the EU;
- Health is a core aspect of migrants' integration, favouring intercultural dialogue and social cohesion;
- Migrants have specific health needs and may be in situations with heightened risk of infectious diseases such as tuberculosis (TB), HIV and sexually transmitted infections (STI);
- EU countries should look for consensus and convergence in their approaches to policies and strategies for prevention and treatment.

(e) Noting that the WHO Resolution on Migrant Health (WHA, 2008) mandated Member States to advance in four highlighted areas: monitoring migrant health; migrant sensitive health systems; policy-legal frameworks; and partnerships, networks and multi-country frameworks; These priority areas were confirmed and elaborated in an operational framework for action during the WHO-IOM Global Consultation on Migrant Health (Madrid, March 2010).

(f) Noting that the IOM EU-Level Consultation on Migration Health (Lisbon, September 2009) recognized five priority areas: social determinants of health; legal and policy frameworks; research; capacity building for

¹ Policy references, conclusions and recommendations are not listed by chronological order but are presented from general to more specific on HIV and/or mediation approaches.

the health workforce; and maternal, child and adolescent health; and, within the latter area, highlighted the importance of inclusive prevention and health promotion approaches.

(g) Recalling that the EU Dublin Declaration on Partnership to Fight HIV/AIDS in Europe and Central Asia (2004) highlighted that:

- Poverty, underdevelopment and poor education are among the principal contribution factors to the spread of HIV;
- Key populations in the Europe region include ethnic minorities and migrant populations, and particularly migrant women and unaccompanied and orphaned children are among the most vulnerable groups.

(h) Noting that the 'Migration and HIV/AIDS: Community Recommendations' by the Civil Society Forum Conference (Lisbon, June 2007) observed that:

- Restrictive legislation, social exclusion and stigmatization lead to instability and vulnerability for migrants and ethnic minorities, affecting their legal and socio-economic situation and their access to health care, especially to HIV prevention, treatment, care and support;
- The right to health and access to HIV prevention, treatment, care and support must be universal, as a public health good and a matter of human rights.

(i) Considering suggestions made by the First EU National AIDS Coordinators Meeting (Lisbon, September 2007) as to:

Principles

- Advocate for a "human rights approach" translated into de iure and de facto access to health services;
- Fight, by means of information campaigns and other, against stigmatization and discrimination towards people living with HIV;
- Cooperate with sending and transit countries to reinforce capacity building and strengthening of local healthcare systems thus ensuring healthier 'south' communities.

Policy

- Adopt strategic HIV planning that specifically considers population mobility and key groups such as migrants, and ensures adequate national HIV-related surveillance, translating findings into concerted actions which are regularly monitored;
- Engage in cross-sectoral policy cooperation including non-health actors in the employment, justice, interior/immigration, foreign affairs and education sectors;
- Improve data collection and research systems on HIV vis-à-vis migrants and ethnic minorities.

Programmes

- Put in place awareness-raising and communication strategies targeting migrants, including women and children, in order to promote health and ensure access to health information and care equitable with nationals (e.g. improving knowledge of the health system, overcoming language barriers and the fear of stigmatisation);
 - Tailor reach-out approaches to needs of migrants, including giving consideration to the diversity of migrants' culture, situation of country of origin, as well as life backgrounds;
 - Promote capacity building for migrant-sensitive health systems including training of staff on appropriate cultural and gender sensitive relations with patients.
- (j)** Recalling that the EU Strategy "Combating HIV/AIDS in the European Union and neighboring countries 2009–2013" recommended:
- Access for all people to comprehensive HIV prevention measures, health and social services, and to voluntary and confidential HIV testing and counseling;
 - Tailor-made approaches to reach key groups (including migrants).
- (k)** Noting that the UNGASS 2001 Declaration of Commitment on HIV/AIDS compelled signatories to develop, and start implementation by 2005 of, national, regional and international strategies to facilitate access to HIV-related prevention programmes, including provision of information on health and social services, for migrants and mobile workers.
- (l)** Noting that the ECDC 2010 Dublin Declaration Progress Report underscored the importance of involving migrant communities in HIV policy design and programme implementation by including questions on this particular matter to both governments and civil society in its monitoring exercise.
- (m)** Noting that the Spanish EU Presidency Conference "Vulnerability and HIV in Europe" (Madrid, April 2010) concluded that:
- The European Commission should take further action to enhance political leadership, policy coherence, commitment and coordination of Member States to address the needs of key populations, among which migrants, through policy and legal changes, and programme support;
 - Community action and trust are essential to successful prevention; key populations are neither victims nor just clients or patients but they are experts in their own right and agents for social change.

II. Recommendations

The Partnership of the AIDS&Mobility 2008–2011

1. Urges EU Member States to:

- Grant and ensure in practice universal access to healthcare, including HIV prevention, diagnosis, treatment, care and support, for all migrants regardless of migration status or citizenship, with heightened attention to particularly disadvantaged or especially vulnerable groups such as youth and pregnant women;
- Specifically include migrants and ethnic minorities in National AIDS Plans and/or Strategies, with reference to development and promotion of participatory, migrant-friendly and migrant-empowering approaches and their regular monitoring and evaluation;
- Develop and improve national data collection systems to fill in gaps in data gathering and reporting on migrant health and vulnerable groups within, and systematically include items of information related to migration/mobility in HIV surveillance;

‘Cultural competency’ is understood here as a set of skills that allow healthcare staff to understand the determinants of health, to respond appropriately to diverse cultural and linguistic backgrounds and different health perspectives and beliefs, to recognise the epidemiological considerations and disease symptoms associated with migration and provide appropriate care, and finally to be able to respond to the administrative, legal and rights issues which impact on migrants’ access to health services (*Developing a Public Health Workforce to Address Migrant Health Needs in Europe* (2009) Background Paper. IOM, WHO and the Andalusian School of Public Health, Spain).

- Develop and implement culturally-sensitive awareness-raising and communication strategies on HIV and sexual and reproductive health education, including among particular groups within migrants such as youth, men who have sex with men (MSM), and people living with HIV, as well as ensure that migrants are included in and can benefit from general education and communication strategies on an equitable basis;
- Support migrant-to-migrant, cultural mediation and other migrant-friendly health initiatives and integrate successful approaches into mainstream public health systems;
- Set up mechanisms fostering the participation and the contribution by migrant and ethnic minority communities, especially youth, to HIV-related public policy and programming;
- Put in place capacity building programmes for organizations and professionals working with migrants and ethnic minorities involving training and coaching on cultural competency² and communication aspects in a diverse society.

2. Requests EU institutions to:

- Support Member States’ granting and ensuring in practice universal access to healthcare for all migrants regardless of migration status or citizenship;
- Support and coordinate at EU level HIV-related prevention programmes and research directed at migrants and mobile populations, including ‘combination’ prevention and research encompassing the social determinants of health, which include migration;

- Improve data comparability of surveillance and research on migrant populations across the EU, working towards an eventual harmonization of related definitions, indicators and instruments;
- Increase collaboration and synergies across EU institutions and programmes for enhanced policy coherence and funding effectiveness;
- Facilitate a consultative mechanism among Member States for dialogue, comparative peer monitoring, review and evaluation of national HIV and migration related policies and initiatives, as well as sharing of good practices;
- Strengthen political commitment and sustain action fostering equity in HIV-related prevention, treatment, care and support vis-à-vis migrants and ethnic minority populations.

These Recommendations were presented for discussion at the Conference “With Migrants for Migrants: HIV Prevention for All” (30th November 2010, marking World Aids Days on 1st December), hosted by the European United Left/Nordic Green Left (GUE/NGL) group at the European Parliament in Brussels. Subsequently, the recommendations were open for further inputs by experts and stakeholders participating in the event.

The Recommendations have been developed within the framework of the AIDS&Mobility 2007–2010 Project, coordinated by the Ethno-Medical Centre (EMZ, Hannover) with the participation of the European AIDS Treatment Group (EATG) and the National Institute for Health, Migration and Poverty (NIHMP, Rome). The project has received funding from the European Commission Health Programme as well as from the Ministry of Health, Portugal, and the State Capital of Hannover, the Greater Hannover Area (Hannover Region) and the Lower Saxon Ministry for Social Affairs, Women, Family Affairs, Health and Integration, Germany.



AIDS&Mobility Europe Publications

Published by: Ethno-Medizinisches Zentrum e.V. Germany

A&M Final Report

Published by: Ethno-Medizinisches Zentrum e.V., Germany
Volume 1 | 32 Pages

A&M Health Literacy Report

Published by: Ethno-Medizinisches Zentrum e.V., Germany
Volume 2 | 44 Pages

A&M Policy Development Report

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Volume 3 | 24 Pages

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Volume 4 | 24 Pages

A&M Future Development Report

Published by: Ethno-Medizinisches Zentrum e.V., Germany
Volume 5 | 16 Pages

More Information about the A&M project and other activities are available at:

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Marking World AIDS Day (December 1st 2010), the AIDS&Mobility (A&M) Europe 2008–2011 project held the seminar “With Migrants for Migrants: Improving HIV Prevention for All” on 30th November 2010. The International Organization for Migration (IOM) organized this event at the European Parliament in Brussels to mobilize European stakeholders, practitioners and policy makers at EU and national levels for HIV, mobility and migrant empowering strategies. The results of this event are elaborated on in this report.



Recommendations addressed to the EU institutions primarily demand support for full access to healthcare for migrants in Europe and greater collaboration and coordination of HIV related policies and programmes at the EU level.

(María José Peiro, IOM)

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Co-funded by the European Union under the Program of Community Action in the Field of Public Health 2003–2008
Executive Agency for Health and Consumers.

