



THE FLORIDA STATE UNIVERSITY

# A Comparative Study of HIV Positive African Migrants' Efforts to Gain Health Services in the U.K. and U.S.

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# The Starting Point

- The plight of undocumented African migrants living with HIV is one characterized by challenge and hardship in virtually every aspect of life.
- During my many years of working with this population I have observed many instances in which undocumented African migrants living with HIV/AIDS have suffered due to unmet medical and social care related needs
- The joint consideration of HIV and the plight of undocumented migrants, coupled with my own life experiences offering services to, and advocating for, such people has led me to question the interaction between society, the law, healthcare agencies and this highly vulnerable group of people.



# Migratory trends to the US and UK

- During 2009, INS placed the undocumented migrant population between 4.6 and 5.4 Million.
- During 2005 half, or 2.7 million, of these undocumented migrants were from Mexico, with an additional 335,000 and 165,000 respectively from the Central American countries of El Salvador and Guatemala Respectively. The highest percentages of these migrants are concentrated in the states of California, Texas, New York, Florida and Illinois (Listed in rank order).
- This is the portion of immigration that has become so politically charged in the US, after the attacks on New York, Washington D. C. and Pennsylvania in 2001.



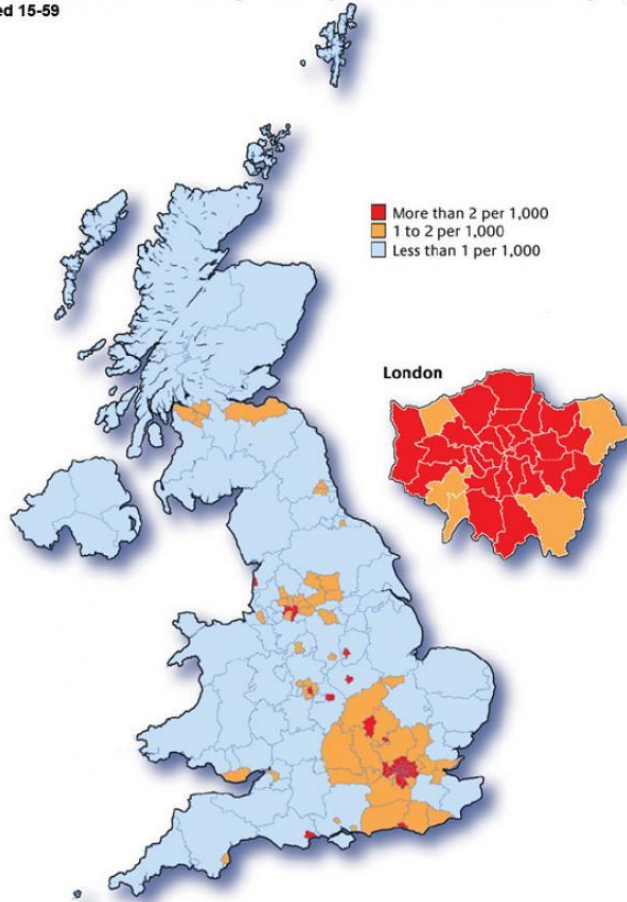
# The UK

- The UK offers a unique challenge with regards to the ability to quantify levels of undocumented migration.
- One factor that is likely adding to the problem is the annual trends with regards to asylum approval rates.
- These rates have decreased annually beginning in 2001, when 20% of applicants were granted asylum, until, 2004, when only 13% were granted asylum.
- Regionally, the bulk of cases originate amongst migrants from Africa, Asia and the Middle East respectively. The primary nationalities detailed in recent immigration statistics reflect that Zimbabwe, Eritrea, Iran, Somalia, and Afghanistan led the rates of asylum applications.
- While it is possible to quantify rates of asylum seekers to the UK, it is a far more challenging proposition to quantify levels of undocumented migrants.



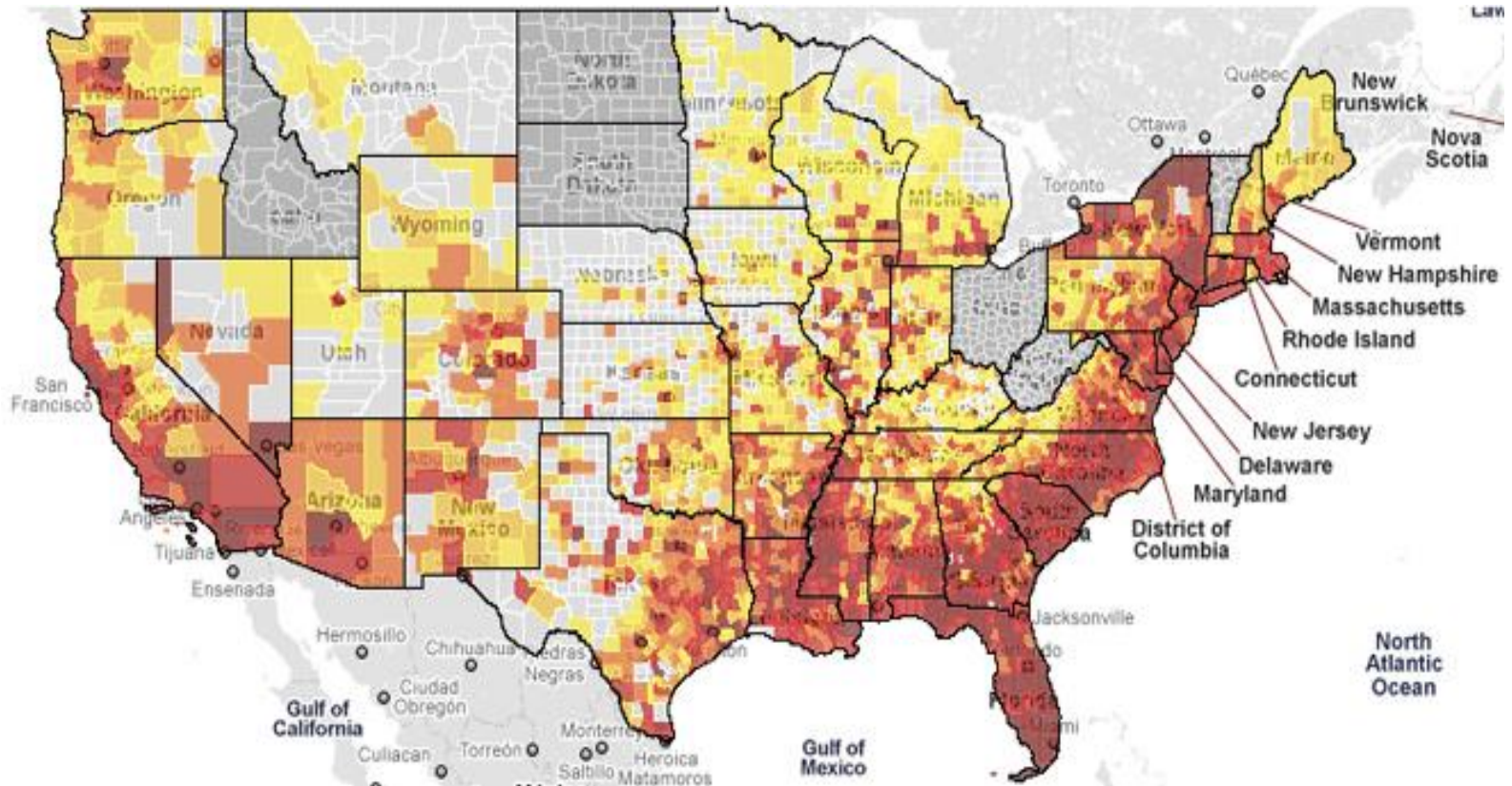
# HIV Cases-UK

HIV affected individuals accessing HIV care by area of residence in 2009: Rate per 1,000 aged 15-59





# HIV Cases-US





# Research Design

- This presentation is comprised of the results of two separate research studies.
- They were performed sequentially, with the UK study being initiated first and the US study being completed 6 months later.
- Grounded Theory Method
- The study included 16 clinical sites in both the UK and US.



# Setting and Participants

- Based in NGO's that provide services to HIV positive persons, with programming that addressed the needs of undocumented African Migrants.
- The participants were case managers within the respective agencies.
- Case managers who worked directly with African clientele were selected.
- These professionals integrate experiences with thousands of clients. This offered the opportunity to gain data regarding a wide variety of their client's experiences



# Non Governmental Organizations



AIDS Intervention  
Sexual Health Alliance Project

A Project of the Partnership for Minority HIV/AIDS Prevention

# Initial Access to Treatment- UK



- Highly dependent on pending asylum application. This renders one eligible for NHS care.
- Continuous access to GP Care
- The GU Medicine Clinics are setting for HIV care.
- Prior to 2012, failure on asylum rendered one ineligible for care in the GU Medicine Clinics.
- Currently, one may continue to receive services, at the very least, to ensure that there are no therapeutic interruptions.



# Initial Access to Treatment- US

- Clear statutory limits on access to publicly funded care.
- Prohibitions against the provision of social care to undocumented migrants.
- Fragmentation in the system.
- Extreme cost associated with gaining care.
- Highly limited migrant health services.



Figure-1: Theoretical Model for Undocumented African Migrants Access to Health services in the UK

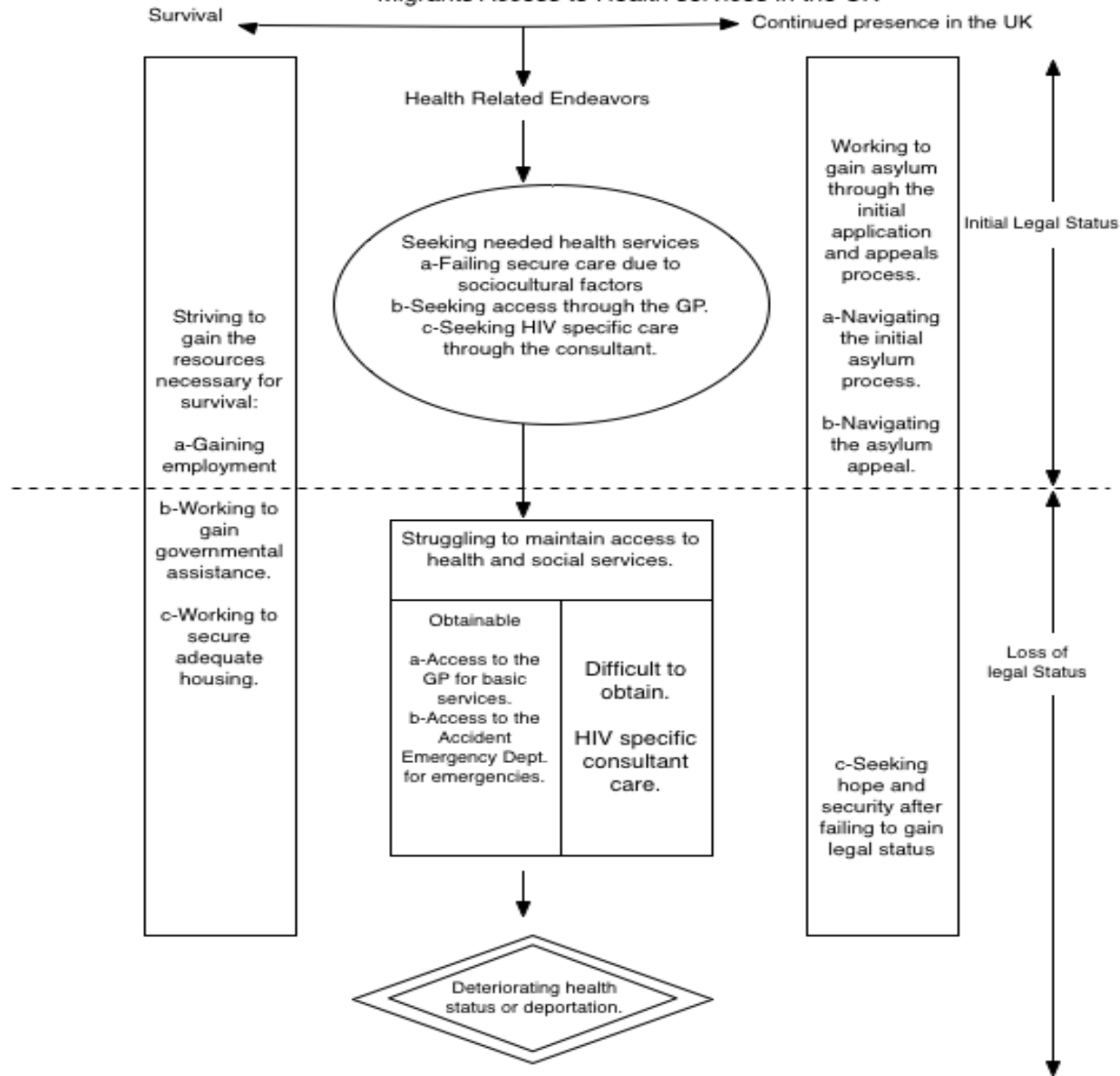
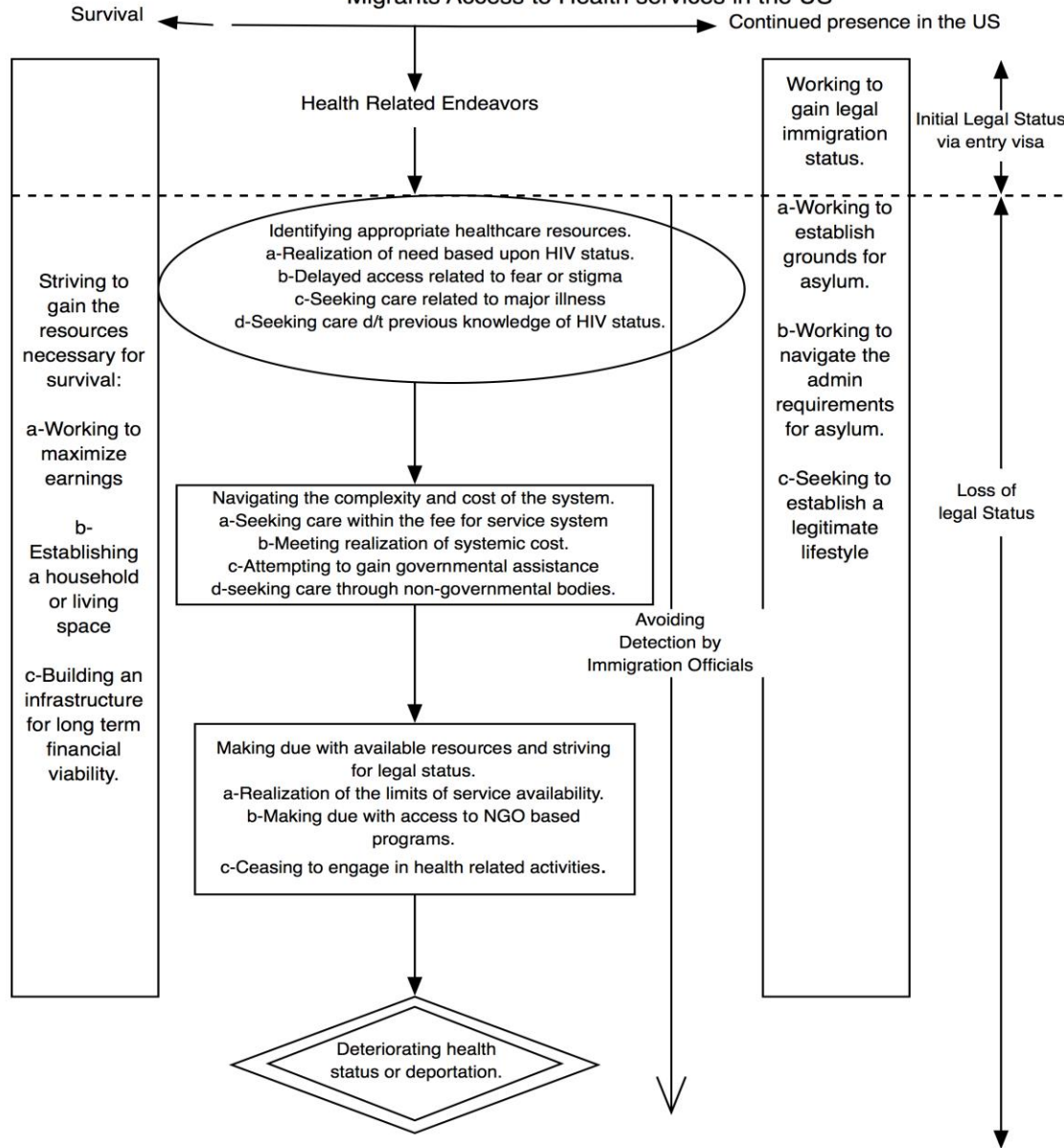




Figure-2: Theoretical Model for Undocumented African Migrants Access to Health services in the US





# Discussion

- Basic needs and survival are the primary motivators despite disease.
- Stigma is a significant factor governing people's behaviors related to accessing care.
- Success in the immigration process is a common theme in both countries.
- In the UK, access, however fragmented, is now possible.
- In the US, access to care is highly improbable

# Maslow's Hierarchy of Needs

