Improving access of migrant populations to HIV Services in the Caribbean

09/2010 – 02/2013

A PANCAP project assisted by the German Government via the
German Agency for Technical Cooperation (GTZ),
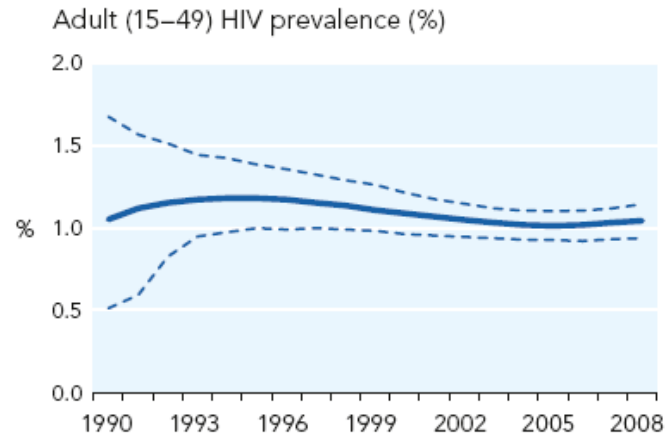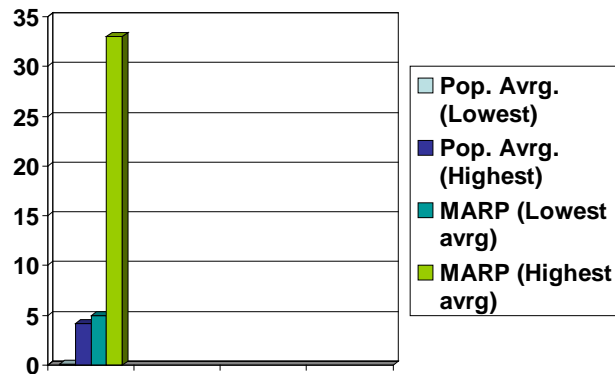implemented in co-operation with EPOS Health Management

HIV Prevalence Rates in the Caribbean: which figures tell the true story?

Average Adult HIV prevalence rate in the Caribbean

Adult (15–49) HIV prevalence (%)

- Regional average HIV prevalence rate stagnating at 1.1%
- In-Country fluctuation between 0.1% (Cuba) and 3% (Bahamas)

HIV prevalence rates among population at large vs. most-at-risk populations<<<<

Legend:
- Pop. Avrg. (Lowest)
- Pop. Avrg. (Highest)
- MARP (Lowest avrg)
- MARP (Highest avrg)

- MARP Prevalence Rate averages b/w 5 and 33%
- MARPs are driving the epidemic

Groups of Most-At-Risk-Populations (MARPs)

- **Migrant and Mobile Populations(est. 3% of region's population or 1.26 million persons)**
- People Living with HIV (PLHIV), STI clinic attendees
- MSM, Commercial Sex Workers, Drug users,
- Prisoners
- Orphans and other vulnerable children

Lessons learnt from the CRSF 2002 – 2006, objectives defined in the CSRF 2008-2012

Lesson Learned from CRSF 2002 – 2006:

Targeted prevention programmes for MARP are crucial

Targeted prevention interventions for the most-at-risk and vulnerable populations such as sex workers, MSM, persons with multiple sex partners, **migrant populations**, and prisoners need to be scaled up in all countries."
(CRSF 2008-2012, p. 22)

Strategic objectives defined in the CRSF 2008 - 2012

- **Objective:** To achieve universal access to targeted prevention interventions among most-at-risk populations (such as MSM, SW, drug users, prisoners, and **migrant populations**)." (p. 38)

- **Expected action:** „Support countries in the development and implementation] of innovative approaches to secure access to HIV services by **mobile/migrant populations**."
(p. 69)

Brief History of Project

Last Quarter, 2009

Funding Proposed to PANCAP by GTZ for project to support CRSF

January, 2010

Meeting with PCU staff and Consultant from GTZ to develop proposed project concept and next steps

March, 2010

Workshop in Barbados to facilitate development of project concept with regional stakeholders and some invited countries

Brief History of Project

March- August, 2010

- Consolidation of workshop input and finalization of project concept
- Engagement of EPOS Health Management to implement project in collaboration with PANCAP

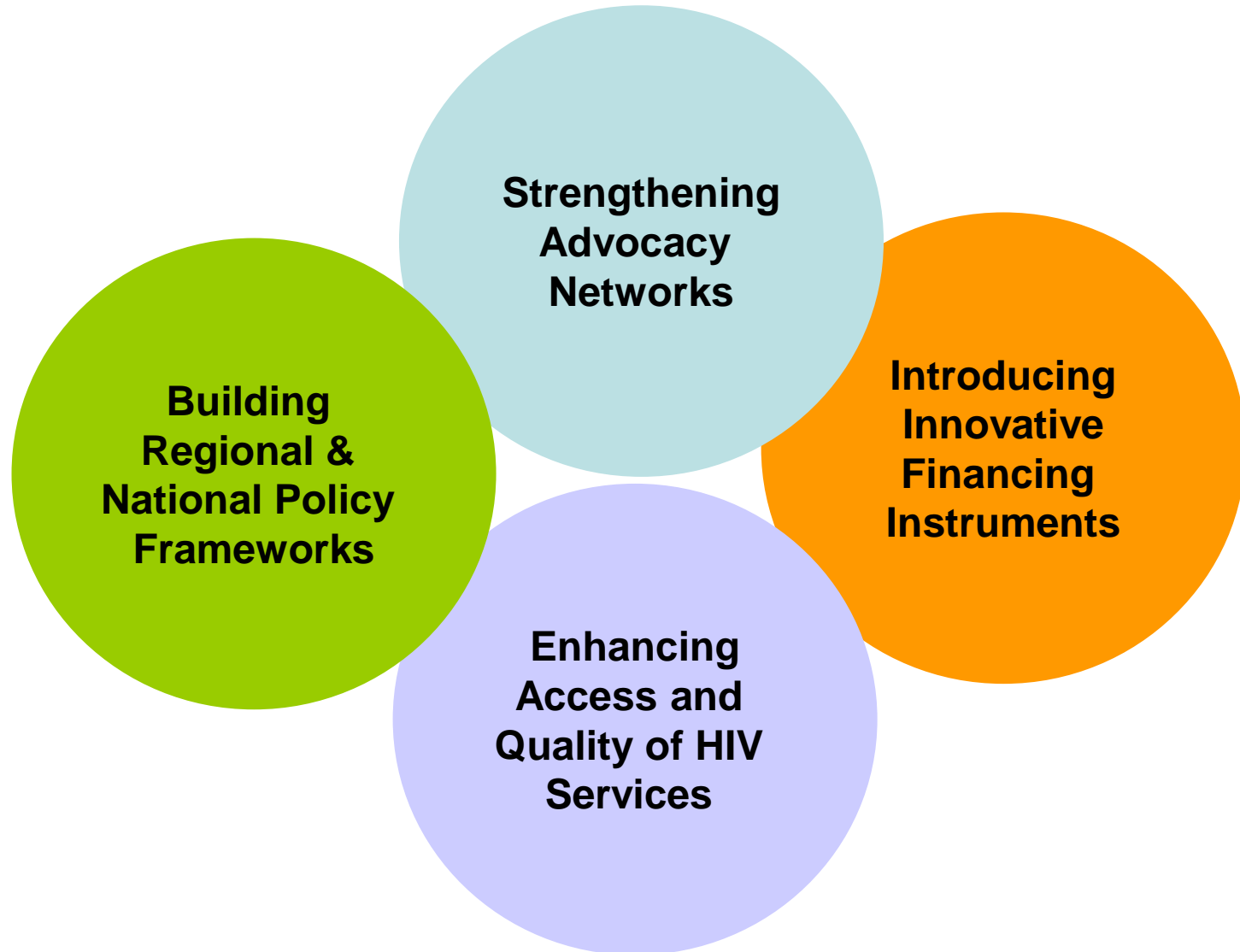**September, 2010**

Commencement of Inception Phase Project

October, 2010

- Country Visits to potential Pilot countries to present project
- Commencement of Inception Phase consultancies

Objectives of Country Visits

- **To promote ownership of project as PANCAP project to countries**

- **To advocate for cooperation during implementation of project at country level**

- **To introduce and provide information on project to proposed pilot countries**

- **To provide forum for clarification of issues/queries on project on an individual basis so as to inform country decision to participate in the project**

- **To guide choice of countries for inception workshop**

- **To inform PCU and EPOS on final pilot country selection process**

Reaching the target:
Improving Access of Migrant Populations to HIV Services

Strengthening Advocacy Networks

Building Regional & National Policy Frameworks

Introducing Innovative Financing Instruments

Enhancing Access and Quality of HIV Services

Building Regional & National Policy Frameworks

Development of gender specific regional and national policy guidelines governing the access of mobile populations to HIV services

Key Deliverables

- **Analytical report on existing policy and legal frameworks**
  influencing the access of migrant populations to HIV services in the Caribbean.

- **Development of regional model policy guidelines**
  on the access of HIV-services by migrant populations.

- **Piloting of regional model guidelines in selected countries**
  to enhance the accessibility and quality of HIV services for mobile populations.

Introducing Innovative Financing Instruments

Development and piloting of effective financing mechanisms / models to secure the access of mobile populations to HIV services

Key Deliverables

1. **Costing of basic HIV service packages for mobile populations.**

2. **Identification of successful social security mechanisms**
   for strengthening access of mobile populations to HIV services.

3. **Cost-Benefit studies on (sub-) regional health insurance mechanisms.**

4. **Action research on the introduction of health insurance mechanisms**
   nationally / regionally.

5. **Piloting of innovative financing instruments in selected pilot countries.**

Strengthening Advocacy Networks

Identify organizations representing the interests of mobile populations and strengthen the participation of migrant populations in decision making processes

Key Deliverables

1. **Capacity building of organisations currently working with and for migrants,** or able to provide HIV support services to migrant populations.

2. **Development of a training manual on the rights of mobile populations** with regards to accessing HIV services.

3. **Compilation of IEC materials on HIV services accessible by migrants**.

4. **Publication of specific legal and health related material** concerning the access of HIV services by migrant populations.

Enhancing Access and Quality of HIV Services

Enhancing the number of public-, private- and non governmental entities offering HIV services tailored to the specific needs of male, female, and adolescent migrants.

Key Deliverables

1. **Definition of a basic package of HIV prevention, treatment, and care services** for migrant populations.

2. **Mapping of migrants with relation to access to selected HIV services.**

3. **Compilation of evaluation report on a sub-regional referral system test**.

4. **Publications of Best Practices on HIV services for migrants.**

5. **Training needs assessment for HIV-service providers**.

6. **Training of trainers and support of training institutes offering targeted training to service providers.**

Country Selection

The project will be piloted in 3-5 countries which will be selected using the following proposed criteria

Preliminary Selection Criteria

- Magnitude of the migration problem in the respective country

- Countries where there is the greatest challenge to access services by migrant populations.

- Is improving access for migrants to HIV services a country priority ?

- Interest and willingness of the country to participate (allocation of project responsibility to a specific body, political willingness to create or promote the involvement of stakeholders)

- Commitment to avail/availability of resources to participate (human resources, time,etc.)

- Findings from consultancies supporting Components 1, 3 and 4