



**Asia-Pacific  
Economic Cooperation**

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# **HIV CONTROL AMONG LABOR MIGRANTS IN RUSSIA**

Submitted by: Russia

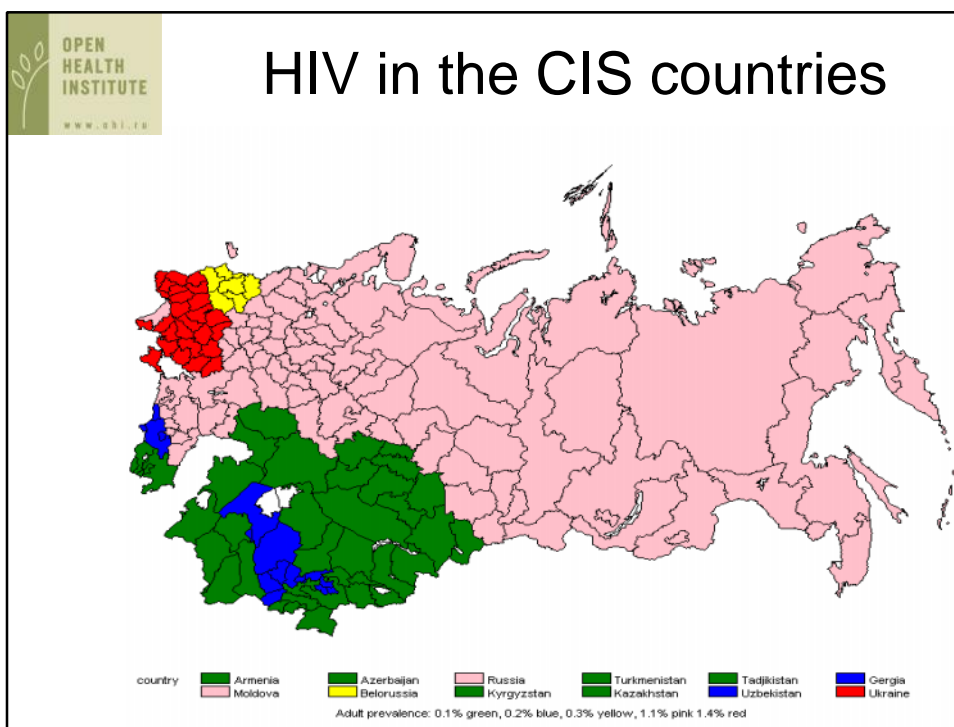
**APEC SEMINAR ON SOCIAL POLICIES FOR MIGRANTS TO  
PREVENT THE TRANSMISSION OF HIV/AIDS**

**Ha Noi, Viet Nam  
18 – 19 September 2008**



## HIV control among labor migrants in Russia





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## Reported HIV rates in migrants vs. general population

Region	HIV in migrants	HIV in population
Moscow	187.2	270.6
Moscow oblast	167.8	450.5
Chanty-Mansiisk AO	157.1	668.6
Tumen oblast	159.5	593.7
Marii El Republic	104.2	70.6
Krasnojarsk krai	150.0	236.0

## Known factors of vulnerability of migrants to HIV

- Potential marginalization, discrimination and exploitation while in transit and in the host country
- Potential barriers to information and healthcare
  - Administrative (especially for illegal migrants)
  - Cultural and linguistic
  - HIV-related legal restrictions on entry or stay
- Provocation to take risks
  - Separation from families and regular partners
  - Feeling of freedom from former social norms
  - Susceptibility to peer pressure

## Migrant population groups with elevated HIV risk in Russia

1. Foreign workers
2. Internal migrant workers
3. Tourists
4. Military personnel
5. Internally displaced people and refugees
6. Migrant sex workers, including MSM
7. Truck drivers
8. Transport workers, sailors
9. Sale people
10. Gypsies

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## OHI survey among 500 migrants in 5 Russian cities, 2007

- **Socio-demographics**
  - Mean age - 30
  - 53% married
  - 65% secondary/vocational education
  - 65% stay in Russia >1 year
  - Employment - mostly in construction and trade
- **Health status**
  - The vast majority assessed their health as perfect or good
  - Self-reported conditions:
    - 7 - history of TB (1 diagnosed in RF)
    - 16 - hepatitis C (3 in RF)
    - 7 - syphilis (2 in RF)
    - 2 - HIV cases (all 2 in Russia)

Country	Percentage
Uzbekistan	23%
Ukraine	15%
Azerbaijan	11%
Kyrgyzstan	11%
China	10%
Others	30%

- **HIV knowledge and risks**
  - 48% agreed that healthy-looking person can have HIV
  - 41% agreed that HIV could be transmitted through mosquitoes
  - 37% sex with multiple partners within last 3 months
  - 39% never used condoms
  - 10% history of injection drug use
  - Drug use within last 30 days 1%

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## OHI projects on HIV prevention among migrant workers

- **Key services**
  - Development and distribution of information materials on HIV prevention in Russian and national languages
  - Provision of condoms
  - HIV testing
  - Counseling on health, social, and legal issues
  - Medical referrals
- **Key approaches are based on targeting places where a large number of migrants pass (AIDS-centers, marketplaces, hostels)**
  - Outreach
  - Individual counseling
  - Group education

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# Infomaterials on HIV prevention prepared in the national languages

如何会感染上艾滋病?  
性接触时不带安全套  
通过血液  
(使用共同的针管、注射器、刮鬃刀、指甲刀等)  
由母亲传给胎儿  
(怀孕期、分娩期、哺乳期)

什么途径不会感染上艾滋病?  
在友好的亲物和握手时  
被蚊子及其他吸血昆虫叮咬时  
使用共同的餐具时  
使用共同的浴池及泳池时

ОИВ (ВИЧ) - ВИЧ инфекция  
СПИД

都应该知道这些

HIV-infeksiyonu HIV-infeksiya  
AIDS AIDS

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## Counseling, distribution of HIV information materials and condoms to Tajik migrant in AIDS-center



Development of HIV prevention information materials in Chinese



Outreach among Chinese migrants at the marketplace



Seminars for construction workers from Turkey and Moldova



## Conclusions

- **Migrant workers are an important target group for HIV control in Russia**
- **Current priorities in HIV prevention among migrants in Russia:**
  - Improving knowledge on HIV/AIDS
  - Promoting condom use as a reliable means of HIV&STI prevention
- **Lessons learned in Russian pilot projects**
  - Need to consider cultural and gender issues
  - Possibility and need for linkages with broader public health issues (TB, STIs, etc.)
  - Potential of cross-border approaches
- **Next steps needed**
  - Revision of HIV-related restrictions on entry, stay and residence
  - Broadening health insurance options available to migrants