

REFUGEES, HIV AND SEXUAL HEALTH

Maja Erceg Tušek, MS (Psychologist)
Croatian Association for HIV and Viral Hepatitis (CAHIV)

HIV NURSING 2019, September 21-22, 2019, Rome

Terminology

- as defined by the Law on International and Temporary Protection (OG 70/2015)³, there are several terminologies used:
- INTERNATIONAL PROTECTION APPLICANTS
- ASYLEES
- FOREIGNERS UNDER SUBSIDIARY PROTECTION
- FOREIGNERS UNDER TEMPORARY PROTECTION
- FOREIGNERS UNDER TRANSFER
- VULNERABLE PERSONS

International protection applicants

- third-country nationals or stateless persons who express the intention to apply for international protection up until the final decision on the application.
- international protection includes asylum and subsidiary protection.



Asylees



- a refugee to whom the asylum is granted.
- Asylum shall be granted to applicants who are outside the country of their nationality or habitual residence and have a well-founded fear of persecution owing to their race, religion, nationality, affiliation to a certain social group or political opinion, as a result of which they are not able or do not wish to accept the protection of that country.

Foreigners under subsidiary protection

- a third country national or a stateless person who has been granted with the subsidiary protection.
- subsidiary protection shall be granted to an applicant who does not meet the conditions to be granted asylum, if justified reasons exist to indicate that if returned to his/her country of origin he/she would face a real risk of suffering serious harm and who is unable, or, owing to such risk, is unwilling to avail himself/herself of the protection of that country.

Foreigners under temporary protection

- a third country national or a stateless persons who have been granted protection of an urgent and temporary character, introduced pursuant to the Decision of the Council of the EU on the existence of a mass influx of displaced persons.
- temporary protection is initially approved for a period of one year and it can be extended to no longer than three years.

Foreigners under transfer



- a third-country national or a stateless persons who is in the process of handover to the responsible member state of the European Economic Area (EEA) for consideration of his/her application.

Vulnerable persons



- deprived of legal capacity, minors, unaccompanied minors, elderly and infirm persons, seriously ill persons, persons with disabilities, pregnant women, single parents with minor children, persons with mental disorders and victims of trafficking in human beings, victims of torture, rape or other psychological, physical and sexual violence

Loss, trauma, stress



- BEFORE TRAVELLING (country of origin)
 - war, life in danger, uncertainty, poverty...
 - leaving their homes and at least part of their family behind, without goodbyes
 - many of them lost family members and valuable assets.

Loss, trauma, stress



• DURING TRAVELLING

- travelling is for most of them very long (several months or years)
- it is exhausting (lack of water, food, sleep, exposed to dangers)
- travelling afoot or by unsafe means of travelling, unprotected, until they reach the destination where they seek asylum
- they meet people with different intents: from activists who help refugees to criminals who want to use the fact they are in need and unprotected, which is sometimes very hard to distinguish so they become distrustful
- on their way they witness painful things happening
- conflicts with border police forces and army

Loss, trauma, stress



- AFTER TRAVELLING

- completely new and different culture (economically, politicaly, language, socialy)
- longterm uncertainty concerning their legal status (can last for several years)
- challenges: learning new language, finding a job, meeting new friends, housing, education...
- some of them are less motivated for integration because of the unsolved legal status
- adapting to new culture and new ways of being is particulary hard while future of their families is not legaly solved so the level of uncertainty is huge, and the meaning of adapting is questionable.

Reception and detention centres in Croatia

- there are reception and detention centres with the capacity of around 700 places for migrants operating under the supervision of Ministry of Interior:
- PORIN - in Zagreb - asylee, asylum seekers, illegal migrants (detention replacement) - as a temporary accommodation
- KUTINA - approximately 80 km from Zagreb; vulnerable groups - women, unaccompanied children, families with children
- JEŽEVO - under the Border Administration of the Ministry of Interior Affairs; detention and deportation centre for foreigners

Upon arrival

- Families are kept together, while vulnerable persons i.e. single women, unaccompanied children and traumatised applicants are accommodated in separate rooms.
- The centre for foreigners in Ježevo is under the competence of the Ministry of Interior and it serves as a detention and deportation centre. This is primarily centre for irregular migrants, but among them there are sometimes foreigners who express the intention to file an application for international protection while accommodated there, so they can stay there for a limited period of time.
- After this period elapses, they are transferred to the Reception Centre for Asylum Seekers (i.e. applicants for international protection).
- Upon arrival measures of personal hygiene (washing and changing clothes) and disinfestations of clothing should be performed.

Medical examination

- Upon admission to the centre, the reception staff or physician should perform the health status examination to detect clear signs of illness, such as fever, rash or diarrhoea and, where needed, to refer the person to the doctor or relevant medical institution
- BASIC MEDICAL EXAMINATION
 - during the first seven days of stay at the shelter, asylum seekers should check immunization status and receive the necessary vaccines. After the examination, a person should receive a written confirmation of the medical examination and guidance on health monitoring procedure. Asylum seekers should be subjected to the 21-days health monitoring at the centre during which some infectious diseases (e.g. yellow fever, measles) would manifest in case the person arrived infected but without symptoms. Also, during that period, person would get lab results from the performed analysis and receive vaccinations if necessary.
- ADDITIONAL MEDICAL EXAMINATION
 - after the medical examination, health certificate is issued to the asylum seeker in two copies, of which one is submitted together with other documents as part of the submission of request for status, and the other copy person keeps it for himself. A positive finding of a chronic disease can not influence the decision about obtaining status.

In the case of medical emergency...

- In the case of medical emergency, every person irrespective of his/her legal status in Croatia has the right to medical emergency examination and emergency treatment.
- they should inform about emergency situation the person on duty in the Centre who will call an ambulance.
- if hospital treatment is indicated, person needs a referral from primary care physician.
- in case of medical emergency, person is admitted to the hospital immediately and without a referral.

Croatian health system guide

- Croatian health system navigation guide for international protection applicants, asylees and persons under subsidiary protection (2016)
- Published by Croatian Institute of Public Health (CIPH)
- <https://www.hzjz.hr/wp-content/uploads/2017/12/CARE-brosura-EN.pdf>
- this booklet is part of the project / joint action '717317 / CARE ' which has received funding from the European Union's Health Programme (2014- 2020)

CARE



- **Common Approach for REfugees and other migrants' health**
- aimed to promote a better understanding of refugees and migrants' health condition as well as to support the adaptation of the appropriate clinical attitude towards refugees and migrants' health needs and in particular towards the health needs of fragile subgroups, such as minors, pregnant women and victims of violence.
- its main results included more appropriate health care deliveries, increased control of infectious disease risk at the early phase of migrant's care and better taking care of migrants' health over the European territory will have been obtained.
- <http://careformigrants.eu/the-project/>

Sexual health in refugees

- many overlapping risk factors affecting this population also reflect upon their sexual health
- higher risk for infectious diseases, including HIV and other STDs
- poor living conditions lead to poor health
- prostitution, sex without protection, history of sexual violence...
- poor sexual education
- diagnostics and treatment

Needs and challenges

- need to educate and support people working with refugees
- need to provide material support for the refugees
- need to provide better medical support to the refugees
- need to provide psychological support to the refugees
- dealing with traumatic experiences
- dealing with language barriers (working with a translator)
- integrating in society (school, job...)
- legal challenges
- stigma and discrimination

Organizations supporting refugees in Croatia

- Croatian Red Cross
- Center for Peace Studies (CMS)
- JRS (Jesuit Refugee Service)
- Are You Syrious
- Society for Psychological Assistance (DPP)
- Rehabilitation Centre for Stress and Trauma - RCT
- Croatian Law Center
- Médecins du Monde - MDM
- Croatia Association for HIV and Viral Hepatitis
- lokalne vjerske zajednice
- lokalni volonterski centri
- UNHCR
- UNICEF



Thank you for attending and for attention

