Regional Expert Group on Migration and Health

Remote registration of citizens in migration with AIDS centres in the countries of origin

Brief recommendations for countries of Eastern Europe and Central Asia

The remote registration mechanism serves citizens of Eastern Europe and Central Asia (EECA) who have been diagnosed with HIV infection while migrating outside their home country. This mechanism is crucial for migrants who lack access to therapy in their destination country and cannot promptly return to their home country to begin treatment. The remote treatment delivery model provides an entry point for cross-border HIV services for international migrants.

People living with HIV require continuous and uninterrupted lifelong treatment[1], primarily through antiretroviral therapy (ART). However, not all destination countries for migrants provide this treatment, and some states in the EECA region maintain restrictive regulations that lead to the deportation of foreigners with HIV.

According to research by the Regional Expert Group on Migrant Health (REG), HIV-positive migrants often face barriers to returning to their home countries for economic, social, and psychological reasons, preventing them from registering for medical treatment and starting therapy like other citizens[2]. The study also revealed that, for migrants, health protection is often deprioritized compared to issues like legal residence, finding stable employment, and avoiding discrimination by law enforcement agencies.

For some migrants, remote self-registration mechanisms in their home country, along with receiving ART and remote consultations with specialists, are the only ways to start timely treatment and save their lives. These mechanisms not only help fulfil the state's obligation to protect the health of its citizens but also address a wider range of issues, including:

- Ensuring that upon returning home, a patient on ART with a suppressed viral load does not transmit HIV to their partner, thus controlling the spread of HIV among migrants and their families in the country of origin.

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[1] Consolidated guidelines on HIV prevention, testing, treatment, service delivery and monitoring: recommendations for a public health approach
https://www.who.int/publications-detail-redirect/9789240031593
[2] "Research study Situation analysis of HIV-related health services for foreign migrants in the Russian Federation" REG, 2021 pp.18-21
https://migrationhealth.group/wp-content/uploads/2021/10/SITUATION_ANALYSIS.pdf

- Preventing the development of HIV-associated diseases in individuals receiving timely treatment, reducing the need for emergency hospitalization in both the destination and origin countries, and resulting in significant budgetary savings for both[3].
- Reducing the epidemic risk posed by HIV-positive individuals with a suppressed viral load, thereby contributing to global efforts to address the HIV epidemic.

Since 2022, the mechanism of remote registration with AIDS centers has been implemented in Kyrgyzstan, Moldova[4], and Tajikistan[5]. Armenia, Kazakhstan, and Uzbekistan are developing similar regulations. This strategy has proven to be a sustainable measure, demonstrating these states' ability to manage HIV epidemic risks among their migrant populations.

Proposed steps for implementing the remote registration mechanism based on the experience of countries in the region:

1. The Ministry of Health/National AIDS Centre should develop instructions for the remote registration of migrating citizens, detailing the required tests and patient actions (free consultation with REG is recommended).
2. Manage patients according to existing protocols (remote diagnosis based on available in-country testing and analyses).
3. Organize necessary online counselling sessions with relevant medical practitioners.
4. Prescribe relevant treatment regimen.
5. Dispense or send medicines to patients via their relatives (using a legal authorization form) or by other means of direct delivery to the country of residence of the patient.
6. Conduct follow-up remote monitoring of treatment.

More details on the implementation of the mechanism can be found in an article at the website of the Regional Expert Group on Migration and Health.

For more information, please, write to: migration.health.eeca@gmail.com.

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[3] See, for example, 'Situational and Economic Analysis on Migration and HIV Health Services in Tajikistan' REG, 2022 (in Russian), p. 47-49.
https://migrationhealth.group/wp-content/uploads/2023/01/Study_Tadjikistan_12.01.23.pdf

[4] New experience: Moldova remotely registered a patient with HIV abroad, REG, 31.01.2022. https://migrationhealth.group/novyj-opyt-v-moldove-udalenno-postavili-na-uchet-nahodyashhuyusya-za-rubezhom-patsientku-s-vich/

[5] Working mechanism in Tajikistan and a document sample - instructions of the Ministry of Health on remote registration of citizens with HIV in migration
https://migrationhealth.group/novyj-etap-v-okazanii-uslug-v-svyazi-s-vich-tadzhikistan-nachinaet-lechit-svoih-grazhdan-nahodyashhihsya-za-rubezhom/