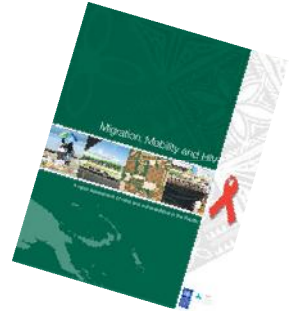


Key findings from

Migration, Mobility and HIV: A Rapid Assessment of Risks and Vulnerabilities in the Pacific

- Workers who engage in **circular migration (those working in mines, in construction, plantation, military... are typically at higher risk exposure** to HIV and STI due to the long period of absence away from home, relatively high income and a risk taking ethos.
- Another group that exhibits high risk sexual behavior and that tends to be younger and away from home for even longer period of time are **seafarers and transport workers**.
- Sex workers, both commercial and transactional, many of whom migrate domestically and internationally are also a highly vulnerable community because they are extremely marginalized and often criminalized.
- In general high risk sexual behavior and high level of migration coincide in **urban areas**
- While all countries have some degree of mobility related HIV vulnerability, a few of them stand out: the **High level of HIV in PNG points to the significance of internal migration** rather than international migration as the critical influence.
- Guam, the Northern Marianas, Fiji Solomon Islands, Kiribati, Palau, Marshall Islands, New Caledonia and French Polynesia have a relatively significant sex worker population, growing urbanization and other key vulnerable groups such as seafarers and soldiers. **Some specific urban centres such as Suva, Honiara, Guam, Saipan and Tarawa are hotspots worthy of further/enhanced preventive interventions.**



- Except for the seafarers and the military and some intervention targeting mining workers mostly in PNG, in general we found **very little evidence of specific interventions for migrant and mobile groups in the Pacific.**

For example:

- Despite the large number of tourists moving in the region and a number of studies that have highlighted high risk sexual behavior within the industry (and anecdotal reports of sex tourism) there does not seem to be any specific activities targeting tourists in the Pacific.
- There are no activities targeted at return migrants
- There are very few specific interventions for skilled workers except some limited work with sportsmen and women who travel for competitions
- There has been no mention of a specific HIV component to the guest worker scheme to mitigate the potential impact of migration. In Vanuatu there are briefing sessions for guest workers that cover some issues but how effective they are remain unknown.
- A few groups in the Pacific work with sex workers, essentially domestic sex workers, and have developed targeted interventions but in a number of settings this work is being undermined by the criminalization of sex workers, which is the case in most PICs. We are not aware of intervention targeting the foreign sex workers. This is particularly difficult because of the collusion of sex work with trafficking.
- Over 9 countries impose travel restriction on entry, stay or residence of people living with HIV, believing that these measures are “protective”. These measures have no public health justifications and are discriminatory and global evidence suggests that they are ineffective.

The report can be accessed from:

http://www.undppc.org.fj/_resources/article/files/Migration,MobilityandHIV_web.pdf