

# Foreign nationals' access to HIV services in the Republic of Tajikistan: achievements and challenges

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## Background

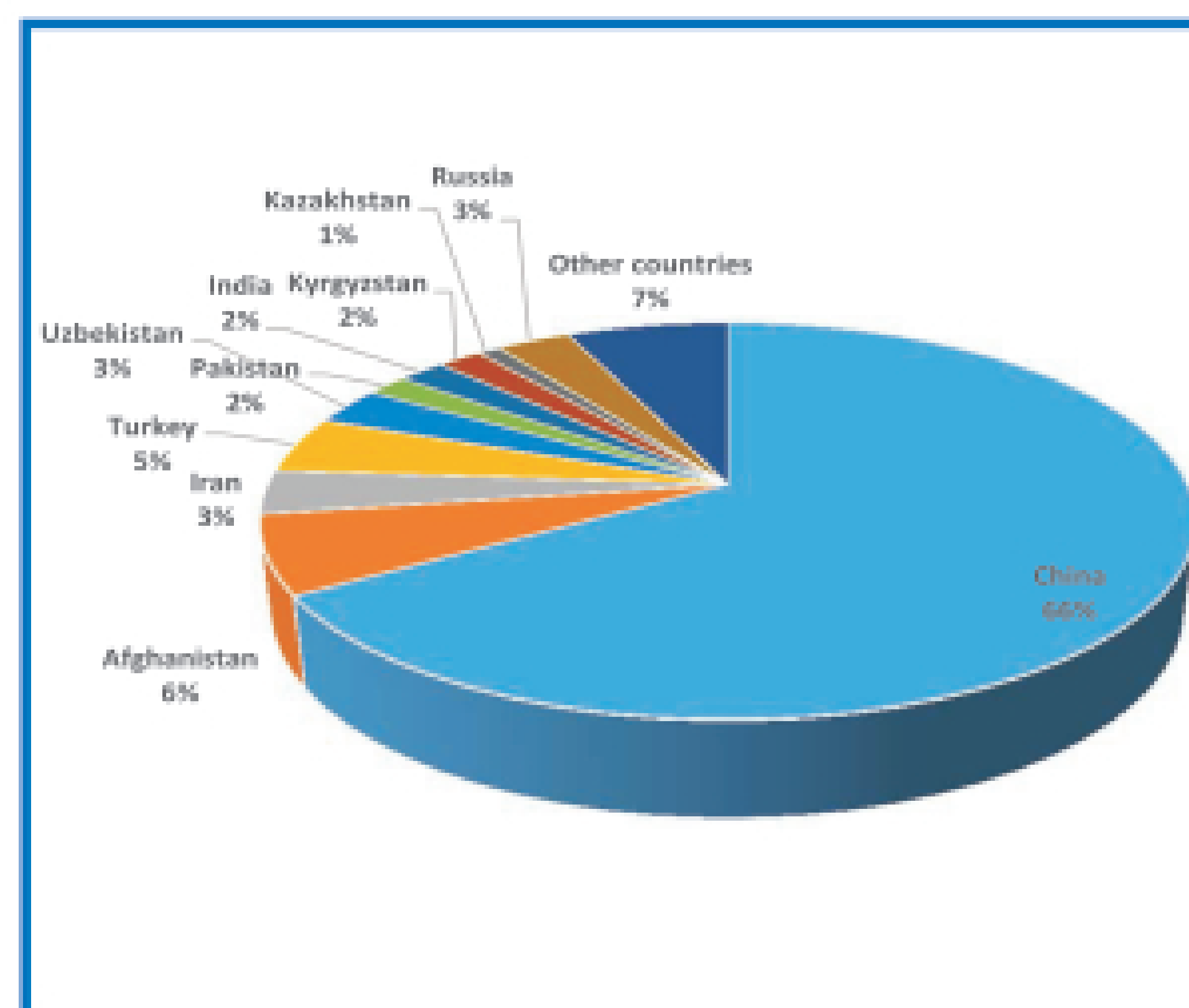


Tajikistan is a country of origin, transit and destination for migrants. While research predominantly focused on Tajik migrants' access to HIV services abroad, foreign nationals in the country were left out. The study therefore aimed at analyzing the current practice, regulations and possible gaps concerning foreign nationals' access to HIV services in Tajikistan.

Quota for 2018

#	Countries	Quota for 2018	Number of the issued work permits	Experts working within the quota	Specialists in the free and medium-sized investment projects	The remain quota for 2018
1	China	4963	2198	1225	973	3738
2	Afghanistan	480	67	67		413
3	Iran	269	207	71	136	198
4	Turkey	344	49	44	5	300
5	Uzbekistan	229	12	12		217
6	Pakistan	129	42	27	15	102
7	India	148	16	16		132
8	Kyrgyzstan	138	11	11		127
9	Kazakhstan	70	8	7	1	63
10	Russia	230	18	15	3	215
11	Other countries	500	146	59	87	441
	<b>TOTAL</b>	<b>7500</b>	<b>2774</b>	<b>1554</b>	<b>1220</b>	<b>5946</b>

Data provided by the Tajik Ministry of Labour, Migration and Employment



## Methods



Meeting with migration authority, Sogd district, The Republic of Tajikistan

Data collection and analysis were carried out during 2012 to 2017. Desk research comprised the analysis of official reports, statistical data, international and national legislation, national healthcare programmes, scientific publications, and documents from other UN agencies.

The findings were supplemented by qualitative interviews with HIV experts, employers, foreign nationals, and representatives from the state migration service and NGOs.



Meeting with Tajik health provider for data collection

## Results

Two discriminatory requirements had been abolished from Tajik legislation in the last decade: the deportation of foreign nationals living with HIV (2008), and compulsory HIV testing for migrants who apply for a visa valid for more than 3 months (2014). Moreover, foreign nationals living with HIV were granted access to free antiretroviral therapy (ARVT).

The achievement of this policy is that foreign nationals use the services offered: 6,779 underwent HIV testing, and three migrants from Russia received free ARVT treatment in 2017. At the same time, the study revealed some gaps in applying policy into the practice: the requirement of HIV testing for obtaining a work permit, and the occasional requirement of HIV testing for a visa. Another challenge identified is the lack of knowledge among foreign nationals about their entitlement to use HIV services in Tajikistan. This can be attributed to the lack of cultural mediators and information materials on HIV prevention in the migrants' languages.



World AIDS Day event among Chinese migrant workers in Korvon market, Dushanbe, The Republic of Tajikistan



Participants of the IOM training on intercultural competence for health professionals, Dushanbe, 11-15 March 2013

## Conclusions

Tajikistan's policy of guaranteeing migrants' access to HIV testing and free ARVT ensures their right to health. Still, as the study shows, this commitment has to be accompanied by information and education measures and by a thorough application of a discrimination-free legislation on all levels. Moreover, the results suggest enhanced cross border cooperation between Tajikistan and migrants' countries of origin in order to be sure that referred patients continue ARVT at home.



National working meeting on access of foreign migrant workers to health services in Tajikistan, Dushanbe, The Republic of Tajikistan