EuroTEST
Working together for integrated testing and earlier care

HepHIV 2026
by EuroTEST
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Cultural competent practices that improve screening, diagnosis and linkage to care

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Cure and taking care of migrant populations
A model for Mediterranean

- Migrant and vulnerable populations need specific healthcare and assistance models
- Transcultural relation and sharing of healthcare models are the mainstay of the response to the needs of migrant populations
- Screening test for early diagnosis of infectious diseases are necessary in order to protect individual and Community health



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Key sub-populations:

- Women victims of trafficking/torture/rape
- Unaccompanied foreign minors (about 17.011 in Italy until December 2025)*
- People with pathological dependences and people who use drugs
- Inmates/previous inmates, people with no fixed abode

* DIREZIONE GENERALE PER LE POLITICHE MIGRATORIE E PER L'INSERIMENTO SOCIALE E LAVORATIVO DEI MIGRANTI- Ministero del Lavoro e delle Politiche sociali

Cure and taking care of migrant populations
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The model takes into account:

- Vulnerability
- Difficulty of access to healthcare facilities
- Linguistic and cultural barriers



Setting:

- Hub center: a general hospital-supported by a city and extra-city network
- Spoke Centers: third sector, NGOs, reception centers for migrants in Western Sicily, mobile clinics and outreach services (INTERSOS, Croce Rossa Italiana, ARCIGAY, ANLAIDS)

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- Direct access to health care services regardless of legal status
- Healthcare for foreigners without a residence permit is provided through the issuance of a card with an individual STP code (STP: temporary present foreign person)
- Direct access to systematic screening for TB and STIs
- HBV and HPV vaccination
- Cultural and linguistic mediation available on a daily basis in our structures

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- Training of general practitioners and non-infectious diseases clinicians, social workers and other healthcare providers
- Social care services, legal counselling, “Social Desk for Human Rights”
- PrEP service
- Psychological support (third sector Institution-MSF)

Approaches to address specific prevention and care needs

- Development and implementation of systematic STIs and TB screening programmes
- Creation/Improvement of Hospital-community health network
- Easy access to health care facilities for people living with HIV, Hepatitis B and TB for improving adherence and retention in care

Screening TB and STIs- 2024

Migrant people tested: 471

- Male 330; mean age 23 yo
- Unaccompanied foreign minors (UFM:) 100

Screening TB and STIs- 2025

Migrant people tested: 600

- Male 417; mean age 26 yo

Sexual and reproductive health of migrant women

- Dedicated access path for women victim of sexual violence and sex-trafficking
- Initial reception and STI screening + HPV vaccination in our clinic

Hospital and territorial healthcare services

Family counselling centre

➔ gynaecological examination
➔ ultrasound
➔ cervical smear
➔ contraception
➔ pregnancy

Obstetrics and Gynaecology Dpt

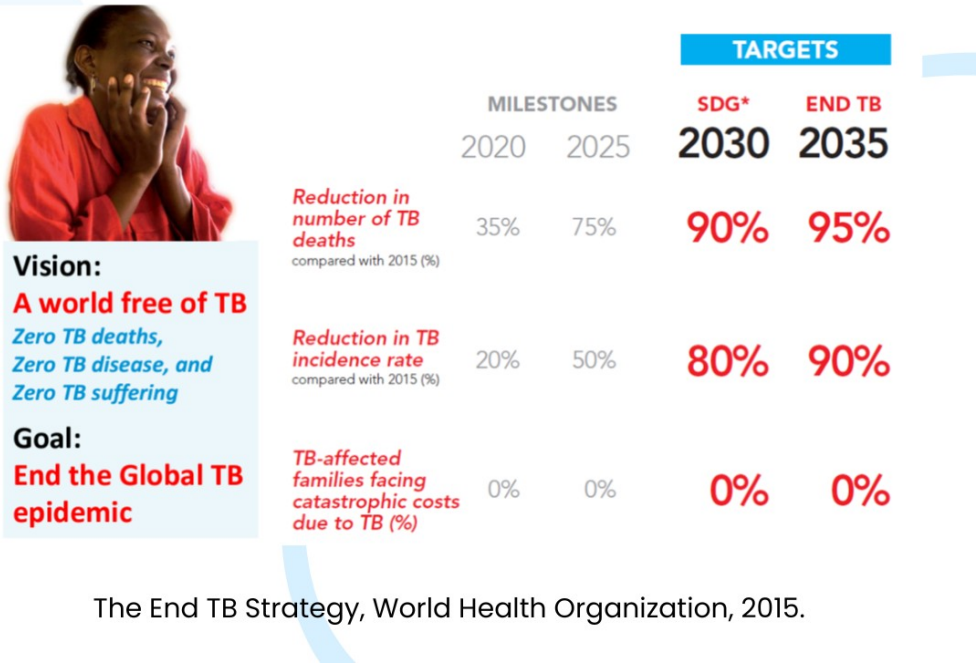
➔ complex gynaecological conditions
➔ high-risk pregnancy
➔ voluntary termination of pregnancy (VTP)

Is the model effective?

TB

- 85% of pts completed treatment for latent TB infection
- 90% completed treatment for active TB

	2022	2023	2024	2025
Migrants people tested	283	504	471	600
Male	180	317	330	417
Female	103	187	141	183
Mean age	23	24	23	26
IGRA +	29	55	48	61
Latent TB	**20**	**42**	**47**	**51**
Active TB	**9**	**13**	**1**	**10**
ZN stain +	3	5	1	2



The End TB Strategy, World Health Organization, 2015.

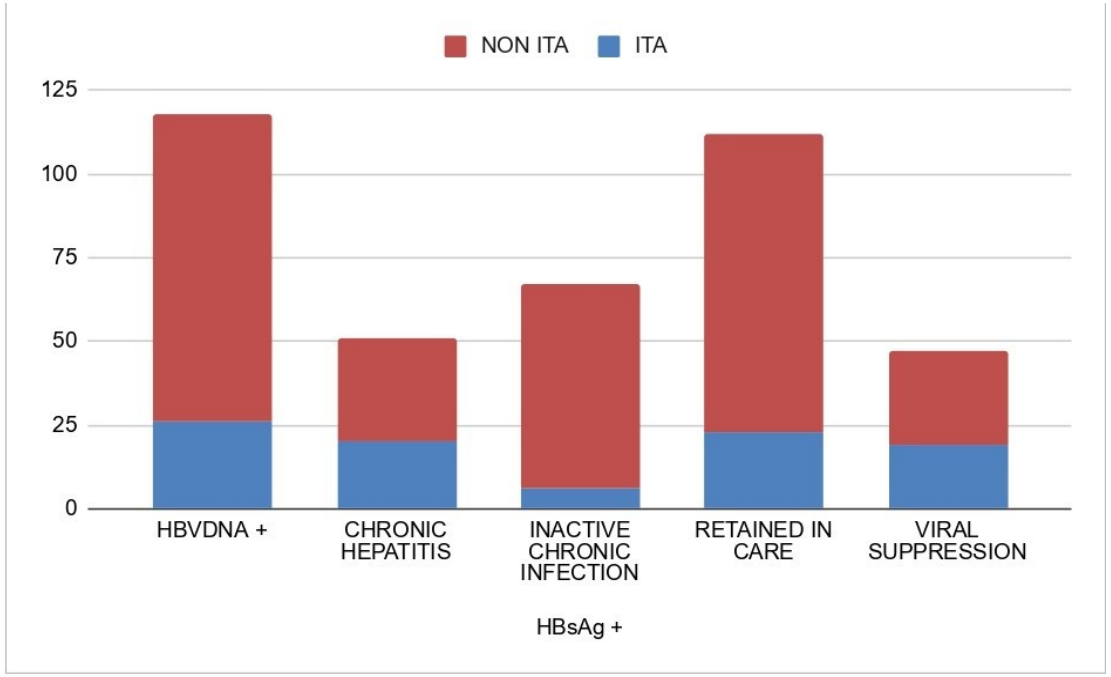
Is the model effective?

HBV

- **118 pts- 92 (78%) non italian:**

- Retention in care: 95%
- Virological suppression: 92%

HBsAg +	ITA	NON ITA	TOTALE
HBVDNA +	26	92	118
CHRONIC HEPATITIS	20	31	51
INACTIVE CHRONIC INFECTION	6	61	67
RETAINED IN CARE	23	89	112
VIRAL SUPPRESSION	19	28	47

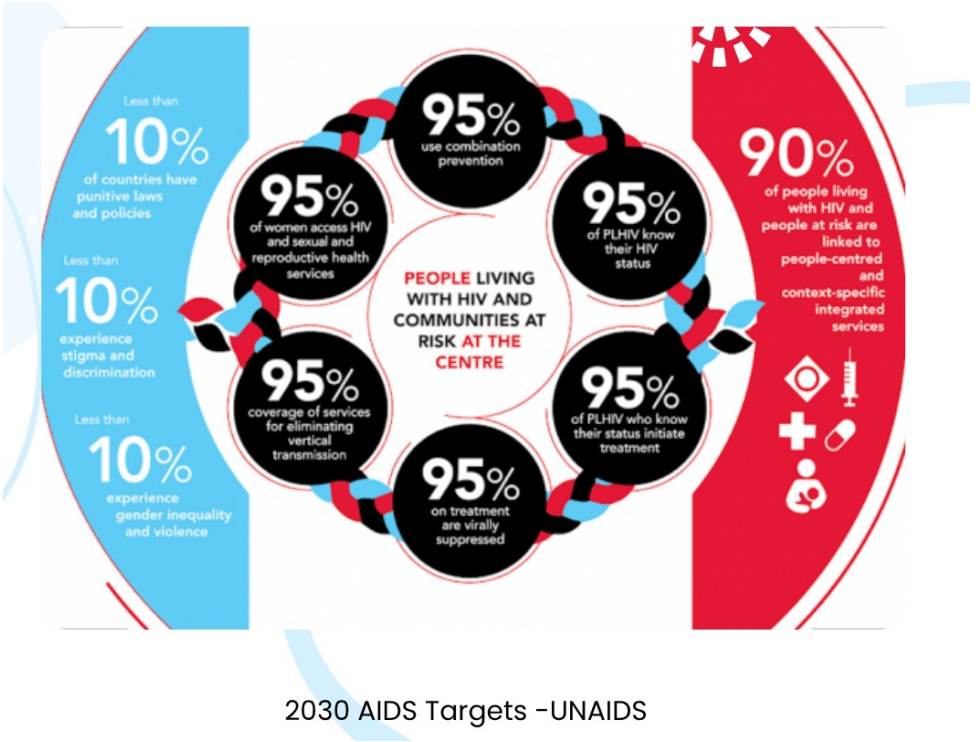


Is the model effective?

HIV

- **236 pts- 87 (37%) non italian:**

- Retention in care: 95%
- Virological suppression: 92%



2030 AIDS Targets -UNAIDS



Is the model effective?

HPV vaccination- vulnerable migrant women (2019-2023)

- **306 pts- 262 (86%) non italian**

- Vaccine uptake rate: 97% (296/306)
- Completed vaccination schedule: 92% (273/296)

- In our experience, a person-centered healthcare delivery model that integrates multidisciplinary care, active vaccine offering, cultural mediation, and continuity of care can significantly reduce barriers to accessing prevention and treatment for HPV-related diseases among vulnerable women

Grazie!



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