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RESEARCH ARTICLE

The prevalence of HIV and the role of immigration in Albania

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ABSTRACT

Objective: International migration is an increasingly important aspect of global, regional and national economies. The rapid spread of HIV among communities, states and continents, is the evidence of the link between population and growth-moving epidemic. The purpose of this study is to describe the role of immigration in the spread of HIV within the territory of the Albanian Republic.

Methods: We have used the database from the Institute of Public Health, Tirana, Albania and also, the medical records analysis at the Ambulatory Clinic of the Infectious Diseases in University Hospital Center "Mother Teresa", Tirana, Albania. In this paper are used data records from 1993 to 2012.

Results: A total of 575 cases were studied; 215 (37.4%) of these cases refer to have been infected in countries where the infected people were immigrant, and 360 (62.6%) refer to have been infected in Albania. Among the immigrants most of the infected were males (199 patients, 92.5%), with an average age of 42.5 years old.

Conclusion: Immigration is a dominant factor in the spread of HIV disease in Albania. Sexual transmission presumably predominates in majority of the cases; most of the infected immigrants come from Greece and Italy. The high rates of HIV among immigration need for more accurate epidemiologic data along with appropriate HIV service programs. *J Microbiol Infect Dis* 2015;5(3): 110-113

Key words: Immigration, HIV/AIDS, public health, risk factors

Arnavutluk'ta HIV prevalansı ve göçün etkisi

ÖZET

Amaç: Uluslararası göç; küresel, bölgesel ve milli ekonomiler için gittikçe önemi artan bir konudur. HIV'in topluluklarda, devletlerde ve kıtalarda hızlı yayılması nüfusla göç arasındaki ilişkinin göstergesidir. Bu çalışmanın amacı Arnavutluk'ta göçün HIV yayılımındaki rolünü açıklamaktır.

Yöntemler: Bu çalışmada Tiran'daki Arnavutluk Halk Sağlığı Enstitüsü veri tabanını ve gene Tiran'da bulunan Üniversite Hastanesi "Nene Teresa" Merkezi Enfeksiyon Hastalıkları Polikliniği kayıtlarının analizlerini kullandık. Bu çalışma 1993'den 2012'ye kadar olan kayıtları ihtiva etmektedir.

Bulgular: Toplam olarak 575 vaka çalışıldı, bu enfekte kişilerden 215'i (%37,4) göçmendi ve geri kalan 360'ı (%62,6) Arnavutluk'ta enfekte olmuştu. Enfekte olan göçmenlerin çoğu erkekti (199 hasta, %92,5) ve yaş ortalamaları 42,5 yıldır.

Sonuç: HIV hastalığının Arnavutluk'ta yayılmasında göç baskın faktördür. Olguların çoğunluğunda cinsel ilişki muhtemelen bulaşma nedenidir ve enfekte göçmenlerin büyük çoğunluğu Yunanistan ve İtalya'dan gelmektedir. Göçmenler arasındaki yüksek HIV sıklığı daha kesin epidemiyolojik verilere ve uygun HIV hizmet programlarına olan ihtiyacı göstermektedir.

Anahtar kelimeler: Göç, HIV/AIDS, halk sağlığı, risk faktörleri

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INTRODUCTION

The HIV epidemic continues to be a major public health concern in the European Union. The rapid spread of HIV among communities, states and continents, is the evidence of the link between population and growth-moving epidemic. Studies have shown that moving groups such as, truck drivers, travelers, soldiers, sailors, etc., have identified travel and migration as one of the factors associated with HIV infection.¹⁻³ At the end of 2011, there were 15.2 million refugees worldwide, and 80% were hosted in low-income countries where HIV is often a major public health concern.⁴ One out of every 33 people in the world is a migrant. Additionally, these numbers do not include all internal migrants, such as the estimated 16 million who move from rural to urban settings within their own country.⁵

Albania is a specific case in Europe for its immigration history. It was the last communist country in Europe. After the 1945, with the establishment of the communist regime in Albania occurred an immigration of political character, even though in small dimensions. From 1945 until 1990 immigration was against the law. The massive immigration, in Albania that characterized post-communist period began in July 1990. According to the census of the year 2011 International Organization for Migration (IOM 2011), the number of Albanian immigrants in Greece was 480,824 and in Italy 482,627.

Increased international migration, particularly from highly endemic countries, has been acknowledged as one of the major factors influencing the epidemiology of HIV in Europe and contributing to the changing pattern of HIV transmission in this region. Estimates indicate that approximately 40% of the HIV diagnosed cases during 2007-2011 in Europe were in migrants.⁶ The first cases of HIV/AIDS in Albania were diagnosed in May and July of 1993. Both of them were male immigrants in Greece, and were tested in the blood bank. Migration had been recognized to be associated with increased high risk sexual behaviors.⁷ Through this paper we want to study how population movements, the lack of information and the confrontation with the western world are closely related to the spread of HIV infection in Albania.

METHODS

This is a descriptive study based on the analysis of the database of Public Health Institute and medical files of people living with HIV at the Ambulatory

Clinic of the Infectious Diseases in University Hospital Center "Mother Teresa", Tirana, Albania. In the realization of this study we have used the database from the Institute of Public Health and also, the medical records analysis in the Ambulatory Clinic of the Infectious Diseases in University Hospital Center "Mother Teresa", Tirana, Albania. To achieve the purpose of the study, we analyzed socio-demographic factor 'Migration' to understand how many of subjects who lives with HIV/AIDS have immigrate or not. The subjects were classified into two groups according to the factor if they have been or not immigrants. From the period of 1993-2008 is analyzed the database of PHI because until this periods we have not had Ambulatory Clinic for people living with HIV. In 2008 with the opening of the ambulatory clinic we have analyzed medical file of Ambulatory Clinic of the Infectious Diseases by the year 2008 to 2012.

RESULTS

The total number of patients with HIV/AIDS who live in Albania till December 2012 was 575 cases, (403 males and 172 females) with an average age of 42.5 where 431 (74.95%) of them have only elementary educations. The group age of 25-45 years old constitutes 345 (60.0%) of cases. Up to 403 (70.08%) of them declared that they were infected while they were immigrants.

DISCUSSION

This study analyzes the role of immigration as a factor in the spread of HIV in Albania. Based on our data, they are frequently younger, away from their families, or separated from their spouses. This data are the same with other colleagues.⁵ The massive emigration that characterizes post-communist period began in July 1990. In the end of 1990, over 20 thousand Albanians left the country and immigrated in Greece. In March 1991, a large number of Albanian citizens immigrated in Italy. As a result the following questions arise: were Albanians prepared to face the problems of the Western world? Were they informed about what awaits them? Had they ever heard about HIV/AIDS? The response is definitely No! Cultural diversity, freedom in sexual behavior, being away from the community, family and prejudices, the lack of information towards condoms and sexually transmitted diseases; all of these factors had an important impact. Studies have shown that people who are more mobile or who have recently

lived in a number of different settings are at greater risk for HIV and other sexually transmitted diseases (STDs) than people who remain in one location.

The movement of the population from 1990 onwards to Europe, as illegal, legal immigrant, or even as a tourist, affected the health of the population. The results of this study show that the largest numbers of Albanian patients with HIV have been immigrants in Greece and Italy. If we analyze the first period from 1993 to 2000, most of patients who are infected with HIV were immigrants. There is an international interest in the study of globalization process and the connection between migration and health which is very well documented. In the case of Albania, we can say that until 1993 where the first case (an immigrant in Greece) was diagnosed with HIV/AIDS, there was no patient diagnosed earlier. This is due to the communist regime in Albania.

The HIV in Western Europe spread at great speed while the epidemic of HIV/AIDS was already spread worldwide. In these conditions, the Albanian emigration except the positive sides had its negative aspects because it served as the main vector of the spread of HIV in our country. From 1993 until 2012, Albania has 575 people infected with the HIV infection in a population of 2,821,977 inhabitants (ISTAT, Census 2011). We have decided to divide in two periods the history of HIV/AIDS in Albania for two reasons: First, referred to the clinical records, the patients diagnosed from 1993 until 2000, most of them have been immigrants. Second, the INSTAT (National Institute of Statistic in Albania) shows that this is the period that is characterized from massive movement of population abroad of Albania. The Albanians came from a closed world, where there was

no freedom of speech, actions or sexual freedom and above all they had never heard of HIV/AIDS. Uncontrolled sexual behaviors, the lack of information and sex without protection has raised directly the number of HIV infected people in Albania.⁹ Up to December 2013, there are 577 HIV patients, 315 of them, claim that were infected within the country. Probably due to the improvement of socio-economic conditions after 2000 in Albania a lot of immigrants have returned back (IOM International Organization for Migration Albania). Some studies have shown a connection between Mexican immigrants in the United States and the Albanian immigrants in Greece and Italy.^{9,10} The common issue is the increase of HIV frequency due to their high-risk behaviors of the immigrants.^{1,4,5,7,10} Emigration has its pros and cons. One of the negative aspects of it which unfortunately Albanian had to deal with was the disease of the century at that time, the HIV/AIDS infection. After 2000, many Albanian emigrants returned to live back in Albania.⁹ Infection from sexual transmission prevails in 90% of cases. In general, the results of this study indicate high rates of risky sexual behaviors among immigrants, including having multiple (concurrent) sexual partners and unprotected sexual intercourse.^{7,8} The primary route of infection for labor migrants stems from unsafe sexual behavior of labor migrants. According to some studies, immigrant males tend to have unprotected sex with different partners mostly because they are far away from their community or prejudices. Unfortunately, when they return in their hometown they become a risk group for their actual or future partners.¹¹⁻¹⁴ So again, the result is that particular visits abroad of Albanians due to business or tourism carries the risk of HIV infection.

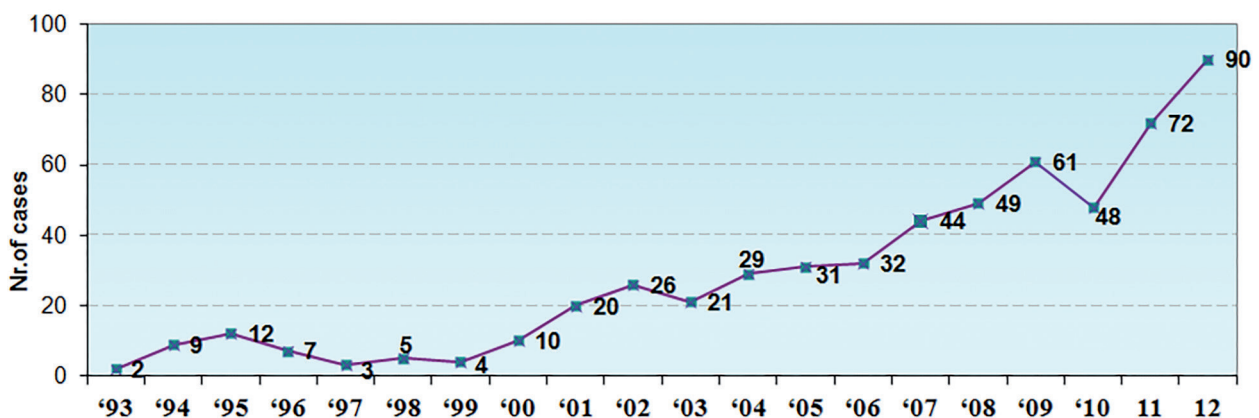


Figure 1. The distribution of HIV cases in Albania by year, 1993-2012

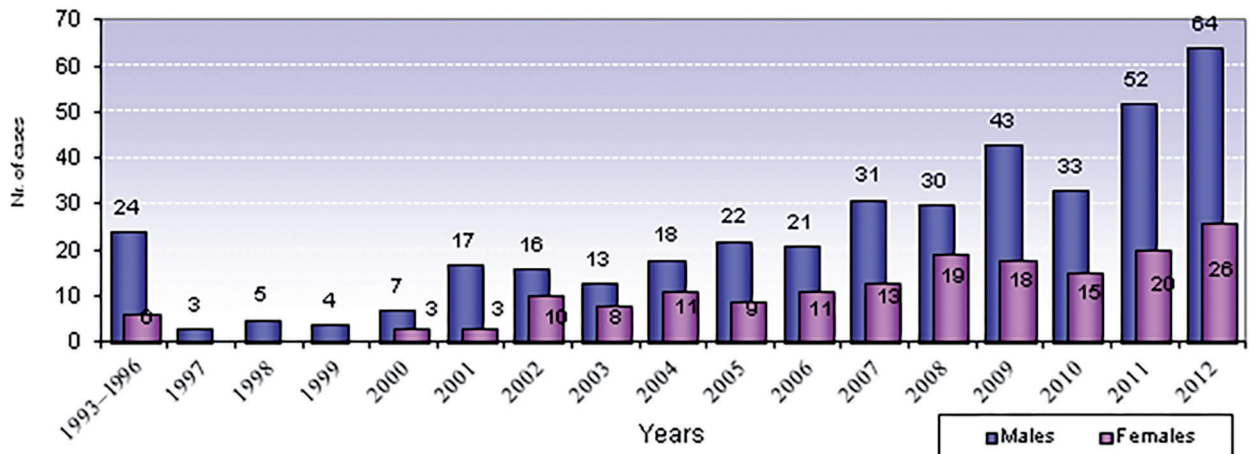


Figure 2. The distribution of HIV cases in Albania, in years according to the gender

What is important is the fact that between 2000 and 2013 we have an increased number of patients infected in Albania, 62.7% of the cases have declared that they were infected in Albania and have never been abroad. Number of patients infected in Albania shows that the virus has begun to circulate within the country, as sexual practices have not changed and Albanians do not use condoms. This is because there was not at all or enough information on sexual health and education. Knowledge on HIV infection and risk behavior among immigrants is greatly needed to inform HIV prevention and control national programs as well as to provide valuable evidence for appropriate interventions in this population.

CONCLUSION

In all of the WHO reports is shown that the population mobility is a major cause of HIV spread. Albania is not an exception. The disease which absented in our country now is growing year after year. We can say that emigration has been a factor in the spread of HIV, followed by unprotected sexual practices in 90% of cases. There is an increase of HIV cases even during the post immigration period. The high rates of HIV among immigration and incomplete surveillance data highlight the need for more accurate epidemiologic data along with appropriate HIV service programs.

REFERENCE

1. Dougan S, Payne LJ, Brown AE, et al. Black Caribbean adults with HIV in England, Wales, and Northern Ireland: an emerging epidemic? *Sex Transm Infect.* 2004;80:18-23.
2. European Centre for Disease Prevention and Control. (2010) HIV testing: increasing uptake and effectiveness in the Euro-

- pean Union. 23 July 2013. http://ecdc.europa.eu/en/publications/Publications/101129_GUI_HIV_testing.pdf
3. Institute of Statistics and International Organization for Migration Albania, research report: Return Migration and Reintegration in Albania 2013.
4. Spiegel PB, Schilperoord M, Dahab M. High-risk sex and displacement among refugees and surrounding populations in 10 countries: the need for integrating interventions. *AIDS* 2014;13;28:761-771.
5. Weine SM, Kashuba AB. Labor Migration and HIV Risk: A Systematic Review of the Literature. *AIDS Behav* 2012;16:1605-1621
6. Dias S, Marques A, Gama A, et al. HIV Risk Sexual Behaviors and HIV Infection Among Immigrants: A Cross-Sectional Study in Lisbon, Portugal. *Int. J. Environ. Res. Public Health* 2014;11:8552-8566;
7. Dosekun O, Fox J. An overview of the relative risks of different sexual behaviours on HIV transmission. *Curr. Opin. HIV AIDS* 2010;5:291-297.
8. Tuan NA, Fylkesnes K, Thang BD, et al. Human immunodeficiency virus (HIV) infection patterns and risk behaviours in different population groups and provinces in Viet Nam. *Bull. World Health Organ.* 2007;85:35-41.
9. International Organization for Migration Albania 2006: The return of irregular migrants Albania: An assessment of case processing, reception and return needs and modalities.
10. Rene LF, Genao AB, Mori SE. Population mobility and HIV/AIDS in Central America and Mexico. *Rev Panam Salud Publica* 2014;36:143-149.
11. Magis RC, Gayet C, Negroni M, et al. Migration and AIDS in Mexico: an overview based on recent evidence. *J Acquir Immune Defic Syndr* 2004;1;37:215-226.
12. Pokrovskiy V. HIV epidemic in Russia and neighbouring countries. *J Int AIDS Soc* 2014 2;17:195-202.
13. Sanchez MA, Hernández MT, Hanson JE, et al. The effect of migration on HIV high-risk behaviors among Mexican migrants. *J Acquir Immune Defic Syndr* 2012;61:610-617.
14. Schlagenhaut P, Weld L, Goorhuis A, et al. Travel-associated infection presenting in Europe (2008-12): an analysis of Euro Trav Net longitudinal, surveillance data, and evaluation of the effect of the pre-travel consultation. *Lancet Infect Dis* 2015;15:55-64.