



PROJECT DURATION: 1 JANUARY 2022 – 31 DECEMBER 2024

MANAGEMENT SITE: IOM Regional Office for Asia and the Pacific, Bangkok, Thailand

OVERVIEW

Tuberculosis (TB) is one of the world’s most pressing health challenges, with nearly 1.5 million deaths occurring each year. It is estimated that approximately one third of new cases are missed by the health system and occur in populations which are most vulnerable to TB, including migrants, internally displaced persons (IDP), refugees, and other vulnerable populations. This can be due to poor nutrition status, poor living and working conditions, low education and awareness and sub-standard access to healthcare.

Cross-border mobility in the Greater Mekong Sub-region (GMS) is highly dynamic, with migration patterns and levels fluctuating in the border towns of the economic corridors. Migrants in the GMS are a key high-risk group facing serious difficulties in accessing health care as a result of their migrant status. Migrants, especially the undocumented, may fear that attending clinics, or simply

traveling to a health facility, could bring them to the attention of the authorities, and create a risk of being deported.

With funding from the Global Fund to Fight, AIDS, Tuberculosis and Malaria (GFATM) with IOM’s Regional Office for Asia and the Pacific acting as the Principal Recipient (PR), the 3-year “TEAM2” project is a multi-country TB grant, spanning the 5 GMS countries (Thailand, Viet Nam, Cambodia, Myanmar and Laos People’s Democratic Republic) with the overall aim of reducing the burden of TB among the migrant populations of the GMS sub-Region – particularly aiming at the missing cases - and thereby reducing TB transmission, incidence and mortality among each of the GMS countries.

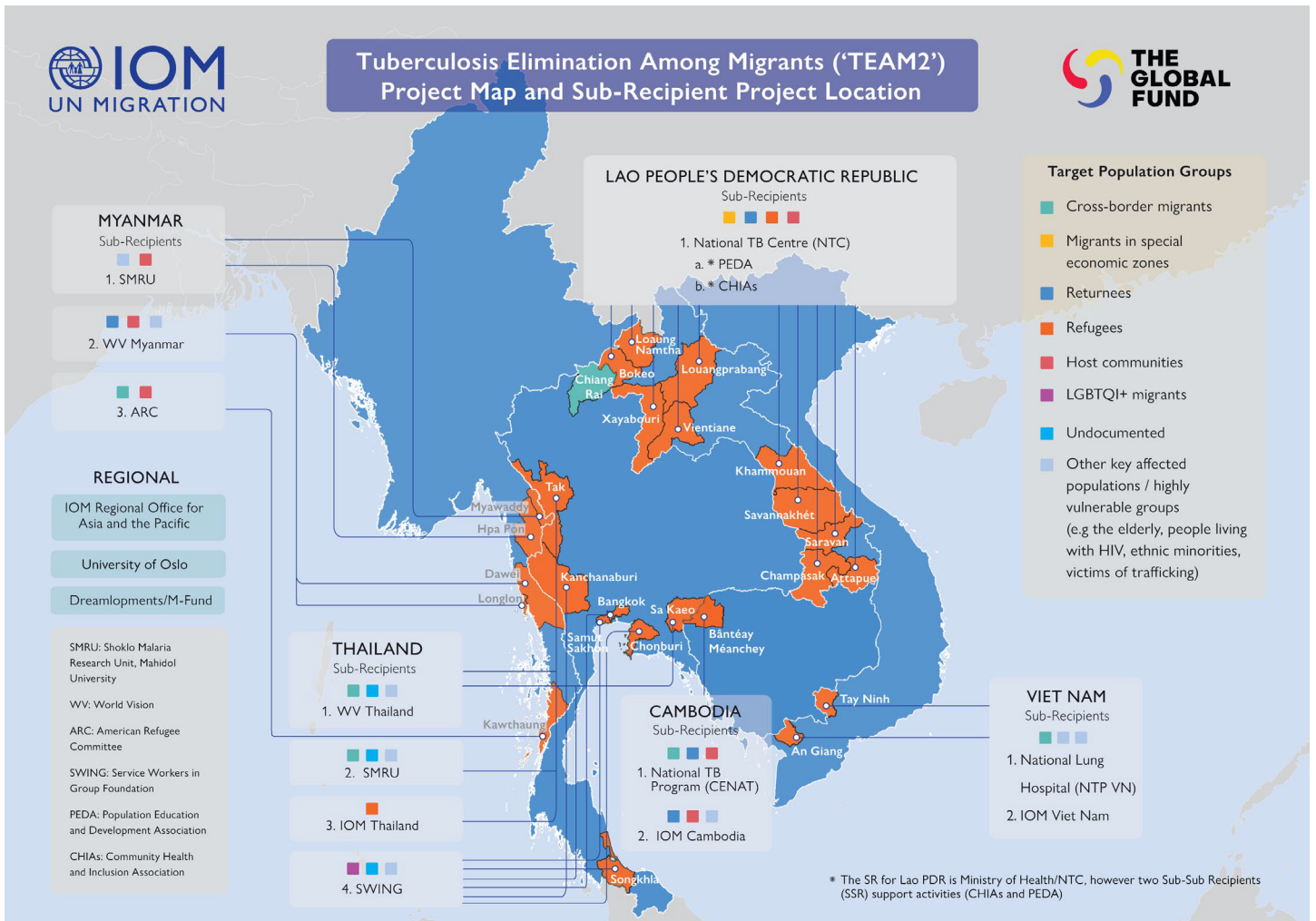


Figure 1: TEAM2 Project Map showing target population groups, implementing partners and geographical coverage of the project

To achieve the project’s objectives, TEAM2 works with multiple sub-recipients (SR) at different levels ranging from the community level to national TB programs and at regional level. It also prioritizes actions to promote political commitment and action for regional policy development with the longer-term objective to secure an endorsed regional legal/policy framework for long term cooperation and improve understanding about the efficacy of migrant-specific interventions related to TB prevention, control and elimination.

Target beneficiaries include populations who are not covered by existing NTP or National TB grants and/or which have been identified as highly vulnerable for TB due to prevalence, co-infection, social determinants of health, or barriers in accessing TB diagnosis and treatment support, and vary according to geographical location. Target groups include cross-border migrants, returnees, refugees, host communities, migrants in special economic zones, IDPs, LGBTQI+ migrants, and other vulnerable populations including victims of

trafficking, the elderly, and people living with HIV/AIDS.

It is increasingly well documented and understood that the absence of targeted TB prevention and control strategies for such groups creates significant barriers in reaching TB elimination targets.

IOM also works with multiple implementing partners across health and migration sectors to effectively implement TEAM2 programming, whilst ensuring coordination and participation of all relevant stakeholders. With numerous interventions targeted specifically at the community level so as to reach some of the world’s most vulnerable hardest-to-reach beneficiaries, IOM engages closely with civil society (including migrant groups), ministries of health, including National TB control programmes (NTP), the private sector (i.e. private healthcare providers, insurance sector), non-governmental organizations, academia, alongside key humanitarian and development agencies.

TEAM2 STRATEGIES

TEAM2 project priorities are in line with globally agreed standards, alongside existing recommendations on addressing TB among migrants and mobile populations^{1,2}.



Increase migrant sensitivity of health service provision for TB services (and specifically to increase migrants' access to those services)

- Active case finding (ACF) in specific migrant groups/geographic locations. Attention will be paid to evaluating ACF strategies in terms of diagnostic algorithm and cost-effectiveness to generate recommendations for integration into national programs
- Passive case finding (PCF) via NTPs as well as community-based mechanisms
- Community level peer outreach and health education
- Promoting migrant health insurance, including for TB patients; promoting TB screening for insured migrants



Develop policies and legal frameworks aimed at improved TB control in migrants, to facilitate longer-term policy change and enhance service access for people on the move

- Conduct regional consultations and high-level advocacy towards developing a regional policy framework for TB and health care for migrants in the GMS
- Link TEAM2 activities to ongoing and emerging legal and policy frameworks at country, GMS, and supra-regional level for improved migration/migration health governance
- Consider opportunities for interlinkages at the policy level pertaining to universal health care, and HIV, malaria, COVID-19 and TB for people on the move, to try and enhance support to all diseases through leveraging and potentially expanding pre-existing agreements, policy, legislation and regulation



Improve monitoring and evaluation of TB in migrants

- Operationalize a regional cross-border TB database and referral system to facilitate patient referrals for active TB cases, and transfer in/transfer out of TB cases from national programs
- Enhance and improve national reporting of TB data for migrants and mobile populations
- Evaluate strategies undertaken to reach migrants and mobile populations to create recommendations for national TB programs/grants



Develop, set up, and maintain partnerships, networks and multi-country frameworks

- Foster strategic partnerships beyond TB programs, including with regional HIV/AIDS and malaria initiatives among others
- Pilot, strengthen and systematize cross-border referral mechanisms
- Facilitate enhanced regional collaboration and networking among stakeholders working on TB and migration in the GMS



WHY CONSIDER MIGRATION IN HEALTH AND TB PROGRAMMING IN THE GMS?

- **Diseases do not respect borders.** In the fight for global health, we cannot leave anyone behind. Migrants and mobile populations are often a "forgotten group" and struggle to access services, or are not considered in preparedness and response plans.
- **Including migrants in health systems improves health outcomes.** Healthy migrants can substantially contribute towards the social and economic development of their home communities and host societies. Health is also a human right.
- **Healthy migrants promote development.** Health is both an outcome and requirement for sustainable development. Migrants often harbor extensive cultural, social and financial capital and can contribute significantly to the development of origin and host countries.
- **Migration itself under normal circumstances is not a risk to health.** Even though conditions surrounding the migration process can increase vulnerability to ill-health, risk factors are often linked to the legal status of migrants, which determines the level of access to health and social services.

¹ IOM, WHO (2014) Tuberculosis Prevention and Care for Migrants https://www.who.int/tb/publications/WHOIOM_TBmigration.pdf
² WHO WPRD (2016) Tuberculosis control in migrant populations: guiding principles and proposed actions <https://iris.wpro.who.int/handle/10665.1/13398>



In Lao PDR, CHiAs conduct home visits, alongside TB awareness raising in Chakoan village. Yommalath district, Khammoan province © Phoxai Phoutdavong

IOM's GLOBAL APPROACH TO MIGRATION AND HEALTH

MONITORING MIGRANT HEALTH

Research and Information Dissemination

STRENGTHENS knowledge on the health of migrants via research and information dissemination to ensure evidence-based programming and policy development.

MIGRANT-SENSITIVE HEALTH SYSTEMS

Health Service Delivery and Capacity Building

DELIVERS, FACILITATES and PROMOTES equitable access to migrant-friendly and comprehensive healthcare services.

POLICY AND LEGAL FRAMEWORK

Advocacy for Policy Development

ADVOCATES for migrant inclusive health policies and programmes at a national, regional and global level, and assists in the development of policies to promote and protect the health of migrants.

PARTNERSHIPS

Strengthening Inter-Country Coordination and Partnerships at All Levels

COMMITTED to developing and strengthening multi-sectoral partnerships and coordination among member states, stakeholders and migrants.

For more information about TEAM2 programming, please contact RObangkokmigrationhealth@iom.int

IOM encourages and stands ready to support Member States and migrant communities by implementing key actions in migrant health monitoring, strengthening migrant-sensitive health systems, developing conducive policy frameworks, and strengthening multisectoral partnerships that address migrants' vulnerability to TB.