

# **The exodus of people living with HIV from Latin America to Australia: improving asylum claims and access to care**

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## **Background/Purpose:**

The HIV/AIDS Legal Centre (HALC) has observed increasing numbers of people living with HIV from Latin America seeking legal assistance to navigate Australia's complex migration system. To improve service delivery and expand the evidence base supporting HIV, sexuality- and/or gender-based asylum claims, HALC surveyed participants on access to employment, health care and other services before and after migrating.

## **Methods:**

This mixed methods survey, available for three months in English, Spanish and Portuguese, used purposive and convenience sampling. Email invitations were sent to 167 HALC clients, with additional recruitment via social media, e-newsletters, and civil society and peer-support networks. Quantitative data were analysed descriptively. Free-text responses underwent structured thematic analysis.

## **Results:**

Of 70 eligible respondents, 46 completed the full survey. Item-level response rates averaged 47%.

The most common countries of origin (COIs) were Colombia (26%) and Brazil (21%).

In their COIs, 62% reported challenges accessing healthcare, commonly due to financial or logistical barriers (30%), their HIV status (27%), and fear of judgement or mistreatment (23%). 86% reported discrimination or mistreatment, often linked to sexuality (66%), HIV status (38%), gender identity/expression (30%), or ethnicity (22%). This occurred across education (56%), public (51%), and workplace (49%) settings. 76% reported verbal harassment or physical violence.

Post-migration, qualitative responses highlighted a need for specialist legal assistance and culturally and linguistically tailored mental health and peer support.

## **Conclusions:**

Latin American people with HIV reported substantial pre-migration healthcare barriers and pervasive stigma and discrimination, which likely shape post-migration experiences and legal needs. Gaps in meeting these needs persist. Strengthening coordinated, stigma-safe referral pathways between legal, HIV clinical, settlement, and community organisations – alongside culturally-tailored mental health and peer support – could improve continuity of care and bolster evidence for Protection visa claims.

## **Disclosure of Interest Statement:**

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