

Review

A critical review of social and structural conditions that influence HIV risk among Mexican deportees

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Abstract

Mexican migrants who are deported from the US may be at elevated risk for HIV infection. Deportations of Mexican migrants by the US have reached record numbers. We critically reviewed existing literature to assess how social and structural conditions in post-deportation settings can influence Mexican deported migrants' HIV risk. We also identify critical research gaps and make research recommendations.

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1. Introduction

Mexican migrants in the US are disproportionately at risk for HIV infection [1–3]. Migration has been linked to various risk factors (e.g., poverty, stigma, severed social support networks) that influence HIV risks, including increased susceptibility to risky-sexual practices and drug abuse [1–4]. In 2010, Latino migrants accounted for over one-fifth (21%) of all new HIV infections; ~87% of these cases are among men [5]. A small body of data suggests that Mexican migrants who are expelled from the US and returned to their home countries (i.e., deportees) may be at even greater risk for HIV [6–8]. Post-deportation, individuals face multiple psychological, emotional, and economic stressors that influence their mental and physical health, including HIV vulnerability [7–10]. In the US, deportation of foreigners has increased four-fold since the 1990s; Mexican nationals account for the majority of

deportees (>75%) [11], mainly because they make up the largest undocumented population in the US [12]. Little is known about the health vulnerabilities of deported Mexican migrants [7,9].

In 2012, US deportations reached record numbers with more than 409,000 foreigners being deported [13]. More than 1.9 million migrants have been deported since 2009 [14,15]. In 2003 the US Department of Homeland Security (DHS) was created, which streamlined the process of deportation [16]. In 2008 the DHS shifted its priorities to target migrants with criminal convictions who are considered to be the main threat to society [17,18]. Migrants with convictions for aggravated felonies, drug-related offenses, firearms offenses, domestic violence crimes, and crimes of 'moral turpitude' are now at greater risk for deportation [19]. Deportations of migrants with criminal backgrounds have increased, especially for drug-related offenses. In 2013, 82% of all deported migrants had a prior criminal conviction [20], compared to 31% in 2008 [21]. Additionally, deportation of long-term migrants with strong US and familial ties are also increasing [14]. Mexican deportees may be a high-risk HIV transmission group given

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that they are at elevated risk for HIV in the US and commonly deported with a drug use and criminal history. HIV vulnerability depends upon physical and social contexts.

The Mexican communities to which deportees are relocated may increase their exposure to HIV and related unsafe behaviors. Migrants are often deported to northern US-bordering cities, including Tijuana, that have been plagued with increasing levels of drugs, drug-related violence, and sex work [2,22,23]. Notably, Tijuana receives the highest number of Mexican deportees; ~300 Mexican deportees are displaced to Tijuana *daily*, representing ~40% of all deported Mexican migrants [24]. In 2010, ~135,000 Mexican migrants were deported to Tijuana [24]. Tijuana's estimated HIV prevalence is 3 times as high as Mexico's average (0.9% vs. 0.3%, respectively) [2], and has an established drug and sex culture [2,25]. The local drug use prevalence surpasses the national average, including high rates of heroin, cocaine, and methamphetamine consumption [26,27]. Injection drug use is also pervasive; ~6400 to 10,000 injection drug users (IDUs) reside in Tijuana [25]. Sex work is tolerated and quasi-legal in Tijuana's *Zona Roja* (Red Light District); ~4800 to 9000 sex workers live and work in the city [25,28]. The intermixing of large numbers of vulnerable populations (e.g., drug users, sex workers, migrants) [28] suggests that Tijuana is a high-risk environment and may contribute to HIV transmission among vulnerable persons. Environments such as Tijuana's may thus influence deportees' sexual and drug abuse behaviors.

Rhode's HIV risk environment framework can be used to understand deportees' HIV risk [29–31]. Under this framework, the environment is conceptualized as operating at different domains of influences, including at the physical (e.g., drug availability, homelessness), social (e.g., stigma, discrimination), economic (e.g., employment, poverty), and policy levels (e.g., access to care, drug treatment) [29–31]. Factors within each level of influence constantly interact and shape risk practices and vulnerability to HIV among individuals who co-exist in that environment. Little is known about the post-deportation HIV risk environment. This critical review assesses how social and structural conditions in post-deportation settings can influence deported Mexican migrants' HIV risk, identify critical research gaps, and make future research recommendations.

2. Methods

2.1. Inclusion criteria

Articles that met the following criteria were considered for inclusion: (1) written in English or Spanish, (2) published between 1996 and 2013, (3) the study population was Mexican migrants deported from the US, (4) described HIV prevalence or post-deportation HIV risk factors, and (5) consisted of peer-reviewed research based on original studies. The year 1996 was chosen as the lower boundary for our review since new US immigration control policies that facilitated the mass deportation of migrants were implemented at that time [16,18].

2.2. Search strategy

From October to December 2013, we searched peer-reviewed databases across various disciplines including PubMed, PsycINFO, Sociological Abstracts, and Web of Science for published articles pertaining to topics of deportation and HIV risk. Titles and abstracts were searched by combining the following search terms: “Deportation OR deportee OR deported OR forced migration OR repatriated OR returned migrant” AND “HIV OR HIV risk OR substance use OR drug use OR injection drug use OR sex work OR commercial sex work OR prostitution” AND “Mexico OR Mexican” The above search terms in English and Spanish were also entered into SciELO, a Spanish international database. References within potentially relevant articles were reviewed to identify further potential articles for inclusion.

2.3. Data collection and management

Citations were managed using Endnote X5 software (Thomson Reuters Scientific Inc., New York, NY). Our searched strategy retrieved a total of 147 articles (Fig. 1). After deleting duplicates, 126 unique articles remained. The first author screened retrieved articles to determine eligibility by first examining titles and abstracts; 84 articles were not directly relevant to our review objectives, which narrowed our search to 42 potentially relevant articles. An additional 3 articles were identified via cross-referencing article citations and screened for inclusion. A total of 45 full-texts were reviewed for content surrounding the following topics: (1) HIV prevalence, and (2) post-deportation HIV risk behaviors and factors (e.g., homelessness, stigma, poverty, and barriers to health services). After reviewing full-texts, 26 articles were excluded on the basis that they did not describe original research (e.g., commentaries, review articles, short communications), did not differentiate on deportees as a subsample of migrants, did not focus on deported Mexican migrants, or did not described post-deportation experiences or HIV risk factors (e.g., examined pre-US migration factors or experiences in the US). A total of 19 articles met our inclusion criteria for this review. Two Microsoft Excel databases were created to organize and group articles into: epidemiological quantitative studies ($n = 12$; Table 1) and qualitative/ethnographic studies ($n = 7$; Table 2). Each database recorded important article information, including: title, authors, year of publication, study location, study design, population sample (i.e., total sample; deportee sample), and important findings relating to HIV risk or infection. Key themes and findings were compared across studies examining consistencies and contradictions.

3. Results

3.1. Epidemiology of HIV and deportation

Studies examining associations between HIV and deportation have been documented along the US–Mexico border (Table 1). Deported males appear to be especially at risk for

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