



Joint Action on integrating prevention, testing and linkage to care strategies across HIV, viral hepatitis, TB and STIs in Europe

Newsletter

Issue 04, December 2020

Welcome to the INTEGRATE Newsletter

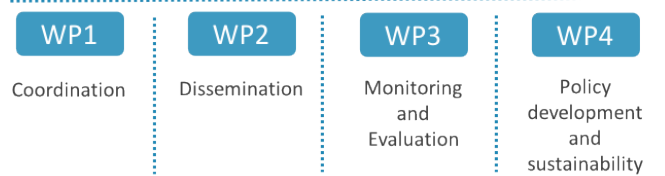
You can [subscribe](#) to INTEGRATE's newsletter on our [website](#) where it is also available for [download](#).



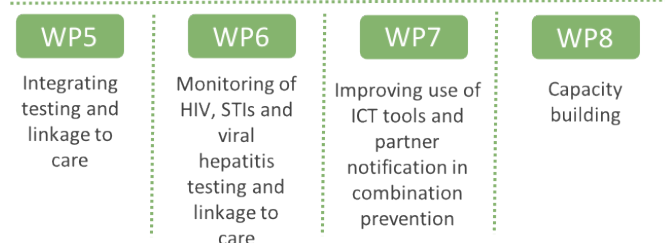
The INTEGRATE Joint Action aims to implement integrated activities to improve the awareness, prevention, early diagnosis and linkage to care of HIV (Human Immunodeficiency Virus), Viral hepatitis, TB (Tuberculosis) and STIs (Sexually Transmitted Infections) in Europe.

The four disease areas share common social and health determinants affecting the same vulnerable populations, are treatable and create unnecessary suffering of patients. INTEGRATE aspires to implement a multidimensional approach that will reduce the public health burden and determine the optimal profile of interventions to be implemented.

Four Horizontal Work Packages



Four Core Work Packages



Objectives

- ▲ Support collaborative implementation of the Joint Action activities through timely reporting, dissemination and evaluation.
- ▲ Support national institutions in reviewing and revising policies and action plans to include integrated activities related to early diagnosis & prevention of the four diseases.
- ▲ Improve the monitoring & evaluation of these activities and assist in the integration of data into national surveillance and M&E (Monitoring & Evaluation) systems.
- ▲ Improve the use of ICT (Information and Communication Technologies) tools and partner notification for prevention by 2020.
- ▲ Ensure better preparedness of healthcare professionals, civil society organizations and public health institutions through training and knowledge sharing on the integration of diagnosis and linkage to care for HIV, viral hepatitis, TB and STIs.



National Stakeholder Meetings in INTEGRATE

At country level, policies and practices for HIV, viral hepatitis, TB and sexually transmitted infections are often lagging behind international and European recommendations. To address this, INTEGRATE has in 2019 arranged four National stakeholder Meetings in Croatia, Lithuania, Poland and Italy with the aim to foster cross-disciplinary and cross-disease-area collaborations nationally. In these meetings stakeholders from policy, surveillance institutions, clinical settings and community organisations involved in the continuum of care for HIV, viral hepatitis, TB and STIs were invited to discuss how to move the national agendas for integrating prevention, testing and linkage to care forward. Further a few international experts were invited as speakers and facilitators.

The national meetings, in each country, have thus been a unique opportunity to foster a common national effort in identifying gaps and addressing solutions and potential synergies between national stakeholders towards working integrated with HIV, viral hepatitis, TB and sexually transmitted infections within the respective countries.

Zagreb, Croatia, 11 April 2019

Discussion

The main aim of the national stakeholder meeting in Croatia was for the national stakeholders to discuss the current testing strategies for HIV, viral hepatitis and sexually transmitted infections (STIs) and help to improve integrated testing in Croatia. The meeting had focus on the following key points:

- Current testing policy and practices in Croatia;
- How to align with European and international testing guidelines;
- Gaps and barriers to testing for the individual, provider and institutional levels;
- How to improve testing strategies including integrated testing and de-medicalisation of testing and linkage to care.

The meeting found that the main barriers in Croatia for testing of HIV, viral hepatitis and STIs on the patient-level include low perception of risk, fear of results, absence of will/time to get tested and not knowing where to get tested. Further the main challenges for testing in Croatia include the need for capacity building in health care settings and community settings, increase of testing and re-testing of key groups in Croatia, especially for MSM, legislation on testing by non-medical staff to test for other STIs, upkeep of organisational and financial sustainability and improved surveillance.

From the discussion on testing policies and practices in Croatia it was highlighted that the cost of self-tests and the fact that legislation does not support lay provider testing are some of the biggest barriers to scale-up testing in Croatia. As most HIV infections are detected in community-based testing, it was discussed that targeted testing needs to be expanded to achieve earlier diagnosis – especially through an expansion of community-based STI services to make it more accessible for MSM and expand PrEP services to test for HIV and STIs.



Conclusion and Next Steps

The main agreed outcome of the meeting was to draft a document with the suggested systematic changes to national testing strategies. The document should be presented at the next National AIDS Commission meeting, with representatives from different ministries. These systematic changes include:

- Adaptation of National Testing Strategy to include new recommendations on integrated testing;
- Provision of more accessibility and de-medicalisation of rapid tests, including self-tests;
- Developing tangible solutions for addressing stigma and discrimination by first, defining the problem and then defining the solutions;

Secure funds – local level, EU funds

Prioritise key groups, including MSM, sex workers and PWID, in prevention, testing and linkage to care efforts – more modern methods to disseminate results and minimise loss to care;

Conduct cost effectiveness analysis of the benefits of the interventions to showcase funds used compared to funds saved and provide rationale for more testing.

Evaluation

All respondents stated that the meeting met their expectations, and more than half (51.9%) strongly agreed that decisions/action points were made on how to move forward.

Vilnius, Lithuania, 3 June 2019

The main focus of the National Stakeholder Meeting in Lithuania was on discussing current testing strategies for HIV, viral hepatitis and sexually transmitted infections in Lithuania and how to improve testing services with focus on the following key points:

- Current testing policy and practices in Lithuania;
- How to align with European and international testing guidelines;
- Gaps and barriers to testing for the individual, provider and institutional levels;
- Cost-effectiveness of testing;
- How to improve testing strategies including integrated testing, indicator condition (IC)-guided HIV testing and linkage to care.

Discussions

During the discussion, it was mentioned that though Lithuania had a national legislation for HIV testing, it did not make provisions for combined testing or testing for more than one disease. Moreover, challenges that limited HIV testing and diagnosis in a community setting were discussed, and these included internal stigma against HIV, communication barriers between stakeholders, inadequate staffing and funding for testing activities. With all this in mind, the Ministry of Health committed to revising the current legislation on testing strategies, with a focus on increasing knowledge of healthcare professionals and the community, taking into consideration the results and recommendations from INTEGRATE. There was also a general consensus that offering combined testing and screening to the general population in Lithuania was an efficient and cost-effective strategy to employ.

Lastly, the INTEGRATE Joint Action, a pilot project in four countries, was also introduced the meeting. The overall objective of this pilot was to increase integrated early diagnosis and linkage to prevention and care of HIV, viral hepatitis, TB and STIs in EU member states by 2020, by examining and evaluating the scalability of existing tools for prevention, testing and linkage to care.

Conclusion and Next Steps

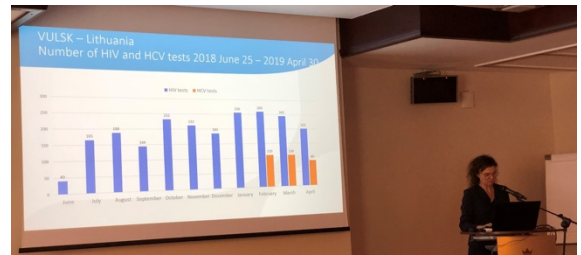
From the meeting, draft recommendations to the National AIDS commission were the main output and all participants agreed discussions that actions were needed to move the HIV treatment and care field forward in Lithuania. Some of the key proposed solutions and recommended next steps were:

- Promote testing uptake among people at high risk
- Scale-up HIV testing by GPs and primary health care (PHC)
- Changing the legislation to de-medicalize testing and allow non-clinical providers to conduct point of care tests
- Broaden implementation of provider-initiated testing – routine and HIV IC guided testing - in hospitals and clinics
- Assess Cost-effectiveness of testing strategies
- Strengthen the health system's focus on linkage to care rates to raise the percentage on treatment
- Support patients to be linked to care and continue in treatment



Evaluation

88% of the respondents stated that the meeting met their expectations, and that the moderated discussions were useful and relevant. 75% agreed that action points were made on how to move forward.



Warsaw, Poland, June 18th, 2019

The main objectives of the National Meeting in Warsaw were:

- to analyse difficulties (legal, regulatory, organizational and practical) at the individual, local and institutional levels in implementing testing in community and healthcare settings,
- to exchange good practices related to the provision of integrated testing services and to develop adequate strategies,

Discussions

Integration of testing in Poland has not yet been implemented and the scarce financial resources allocated for HIV are currently mainly spend on treatment and not prevention. Challenges related to HIV testing and testing for HCV/HBV/STIS were discussed and these included: limited access to testing venues currently having short opening hours and only providing HIV tests, reluctance from medical personnel to asking patient for sensitive questions and recommending testing, internal stigma against HIV, linkage to care, data security and legal barriers. At the meeting stakeholders engaged in discussing opportunities and areas for improving and overcoming these challenges. The National AIDS Centre is through the participation in INTEGRATE working with a legal advisor to address legal barriers and setting up pilots to test ways of doing integrated testing and using unique identifiers to overcome the challenges with the current HIV surveillance system and data security issues.

Conclusion and Next Steps

From the discussions in the meeting a list of topics for further focusing by national stakeholders were highlighted.

- Rapid testing in VCTs should be treated as a non-medical procedure but as an indicator to future diagnosis in medical settings (a screening test). All people who are tested in VCTs are called clients, not patients.
- Recommended to stop using western-blot test and use the more efficient and cheaper Elisa tests.
- Confirmatory tests should be moved from VCTs to medical health settings which will also increase the rate of linkage to care.
- Epidemiological data do not indicate the key population that should be targeted. It would be helpful to integrate the data from VCTs into the national surveillance system.
- Pre-test counselling should not be obligatory in VCTs.
- Integrated testing is important especially for key population members who do not come to see help very often.
- The way of VCT operation should be adapted to the need for testing e.g. longer opening hours etc.
- Education and guidance for provider-initiated testing is needed.
- Pathways for confirmatory testing in community testing should be established as well as clear pathways for linkage to care.
- Consolidation of guidelines for HIV/HCV/HBV/STI screening and treatment needed.
- Cooperation between different stakeholders, experts, institutions and government should be strengthened.



Evaluation

84,5 % of the participants stated that the meeting met their expectations. The best aspects of the meeting were the analysis of opportunities and barriers, the best practice from Portugal, discussions as well as good organization. Most also agreed that the chosen topics and presentations were appropriate and useful, and that decisions/actions were made on how to move forward.



Rome, Italy, November 15th, 2019

The National Stakeholders Meeting in Rome was held at Ministry of Health and opened by Francesco Maraglino, Director of the Infectious Diseases Prevention Unit of the Ministry of Health. The aim of the meeting was for national stakeholders to discuss main difficulties and limitations and share case studies and good practices from other European countries, focusing on the following issues:

- Self-testing;
- Integration of data;
- Partner notification practices in Italy.

Discussions

During discussions it was highlighted that monitoring is an important component that need to be included in national testing strategy. Civil society called for a uniform way of collecting data and the MoH invited the community organizations to share a proposal for this to the CTS committee. Currently lay provider testing is not allowed in Italy and this is a challenge for reaching key populations and the discussion raised and underlined the need to start working on removing this barrier for testing. Further challenges with HIV self-testing were raised, currently there is no clear policy on self-testing in Italy and this should be developed to improve reaching at-risk populations, monitoring and ensure proper linkage to care of self-testers.

Conclusion and Next Steps

The Ministry of Health invited the INTEGRATE Italian partners to have a meeting to further discuss and present all findings and pilots done in Italy and so bringing the relevant issues and requests to the attention of the Minister of Health.

Evaluation

Most respondents either agreed (47%) or strongly agreed (35.3%) that the meeting met their expectations. Most of the respondents (82.4%) agreed or strongly agreed that the topics and presentations chosen were appropriate and useful. 66.7% stated that decisions and action points were made on how to move forward.



European Testing Week November 2020

The ETW secretariat conducted a series of free live webinars during the 2020 November European Testing Week. The series focused on “Challenges and opportunities for testing during the COVID-19 pandemic throughout Europe.” The webinar series highlighted the different experiences of organisations throughout Europe who have adapted testing services to mitigate the impact of COVID-19.

The specific webinar topics include:

- Testing vulnerable populations in COVID-restricted contexts (organised by HIV Prevention England in partnership with European Testing Week)
- Integrating testing for HIV and/or viral hepatitis and COVID-19
- HIV self-testing – opportunities and challenges during the COVID-19 pandemic.



Check out the [webinar page](#) on the ETW website.

Final INTEGRATE Meeting

The final INTEGRATE meeting will take place online on the 28th – 29th January 2021.

INTEGRATE Partners, Advisory Board members, relevant experts and stakeholders will participate in the final virtual meeting for the INTEGRATE Joint Action.

The main objectives are to:

- present the outcomes and findings from INTEGRATE
- report on the lessons learned on barriers, challenges and successes
- discuss the remaining challenges and research and implementation gaps

HepHIV 2021

As the world continues to deal with the uncertainties caused by the COVID-19 pandemic, the EuroTEST and the HepHIV Conference Secretariats are also closely monitoring the ongoing situation. The conference secretariat has decided that the HepHIV 2021 Conference planned for 5-7 May 2021 in Lisbon, Portugal will currently move forward as planned but in a new hybrid conference format (combining safe, physically distanced in-person local meetings and virtual sessions).

You can always email the Conference Secretariat at hephiv.rigshospitalet@regionh.dk, check the [Conference website](#) for updates, or subscribe to the HepHIV Conference mailing list [here](#).



Abstract submissions are invited for the HepHIV 2021 Lisbon & Virtual Conference. The call for abstracts for HepHIV 2021 closes on 7 February 2021 and abstract decisions will be communicated to authors early April 2021.



INTEGRATE's RiskRadar is finally here!

INTEGRATE JA is launching RiskRadar, a web and mobile application, with the objective to facilitate the effectiveness of combination prevention for HIV, hepatitis, STIs and TB.

The application addresses all 4 diseases and enables the public to gain insights and assess their risk of infection, notify past sexual partners and find testing sites nearby.

The app aims to eliminate the individual and social barriers to effective adoption of prevention practices, testing and linkage to care, and to thus reduce the incidence and burden of these diseases in EU member states.

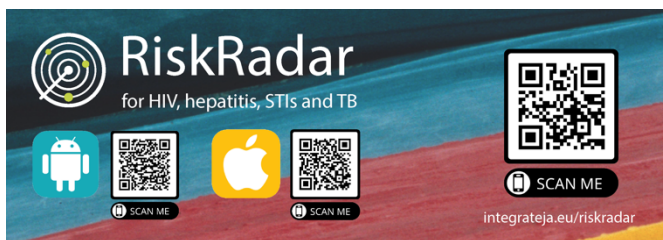
RiskRadar is available online at:

<https://integrateja.eu/riskradar/>

A mobile app is also available for [Android](#) and [iOS](#).

Available in 4 languages:

English



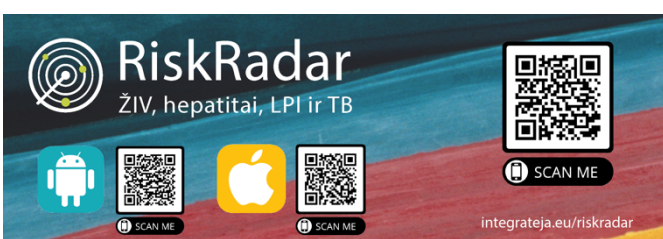
Croatian



Italian



Lithuanian




RiskRadar

Main Features

Risk calculator results

You might have been exposed to HIV, hepatitis and other STIs; your partner might also have been exposed to the other infections. You should both get a full screening, which includes testing for HIV, hepatitis and STIs. You should start taking PrEP to protect yourself from getting infected with HIV via sex.



If you shared injecting equipment with your HIV+ partner you might have been exposed to hepatitis and HIV as well. Remember that injecting or using drugs exposes your health to other risks and harms. If you would like to stop using drugs but cannot make it on your own, it is important that you seek help. You can also seek advice and learn about harm reduction strategies, in order to reduce as much as possible the risks associated to drug use.



It is recommended that all gay and bisexual men get vaccinated for Hepatitis A & B; consider asking your medical doctor for a Hepatitis A & B vaccination (You will need a test before getting vaccinated).



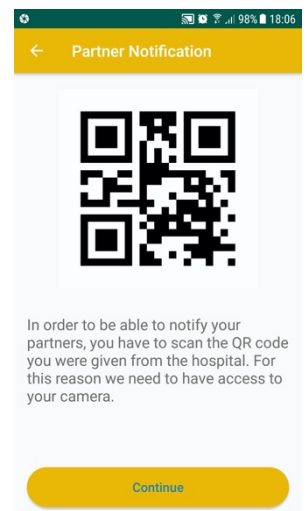
Testing for hepatitis C is especially

✓ Risk Calculator

A tool that allows a user to access their risk of exposure to HIV, viral hepatitis, TB and/or STIs by answering a few quick questions.

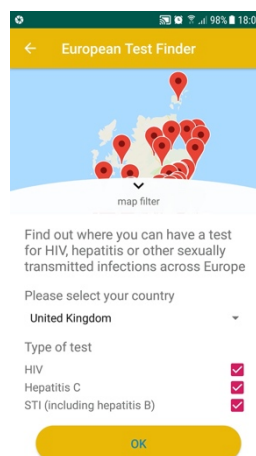
✓ Partner Notification

Anonymous, encrypted and free SMS partner notification service for people diagnosed with HIV, viral hepatitis and/or STI(s). This service is only accessible via a unique random code issued by a doctor enrolled in the INTEGRATE pilots.



✓ Test Finder

A tool providing contact information on where to get tested across EU, offering filtering capabilities per disease, type of point-of-care, and country



Consortium

Croatia

 HRVATSKI ZAVOD
ZA JAVNO ZDRAVSTVO

Hrvatski zavod za javno zdravstvo Croatian
Institute of Public Health

 LET
Udruga za
poboljšanje
kvalitete života

Life Quality Improvement Organisation
"FLIGHT"

 HUHIV
Hrvatska udruga
HIV pozitivnih osoba
i osoba s hepatitisom B

Croatian association for HIV and viral hepatitis

 ISKORAK

ISKORAK

Denmark

 chip
Centre of Excellence for
Health, Immunity and Infections

Region Hovedstaden / CHIP

Estonia

 Tervise Arengu Instituut
National Institute for Health Development

Tervise Arengu Instituut
National Institute for Health
Development

Greece

 CERTH
CENTRE FOR
RESEARCH & TECHNOLOGY
HELLAS

Centre for Research & Technology Hellas,
Institute of Applied Biosciences, Information
Technologies Institute



National Public Health Organization (NPHO)

NATIONAL PUBLIC
HEALTH ORGANIZATION

Hungary



Simmelweis University

Ireland

 UCD
DUBLIN

University College Dublin,
National University of Dublin, Ireland

Italy

 ARCIGAY
ASSOCIAZIONE
LGBTI ITALIANA

Arcigay Associazione LGBTI Italiana



Croce Rossa Italiana

 LILA
LEGA ITALIANA
PER LA LOTTA
CONTRO L'AIDS
LILA Milano ONLUS
Fondazione di Partecipazione

Fondazione LILA Milano ONLUS -
Lega Italiana per la Lotta contro l'AIDS

 FONDAZIONE VILLA MARAINI

Fondazione Villa Maraini Onlus

Lithuania

 NVSP
Nacionalinė visuomenės
sveikatos priežiūros laboratorija

National Public Health
Surveillance Laboratory

 REPUBLICAN
CENTRE FOR ADDICTIVE
DISORDERS

Republican Centre for Addictive Disorders

 UIAC
Užkrečiamųjų ligų ir AIDS centras

Centre for Communicable Diseases and AIDS



Vilnius University Hospital
Santaros Klinikos

Malta

 health.gov.mt*

Health Promotion and
Disease Prevention

Poland



National AIDS Centre
Agency of the Ministry of Health

Romania



"Victor Babes" Clinical Hospital of Infectious
Diseases and Pneumophtisiology Craiova



"Marius Nasta"
Pneumophtisiology Institute

"Marius Nasta" Pneumophtisiology Institute

Serbia



Institute of Public Health of Serbia "Dr
Milan Jovanovic Batut"

INSTITUTE OF PUBLIC HEALTH OF SERBIA
"Dr Milan Jovanovic Batut"

Slovakia



Slovak Medical University in Bratislava

Slovenia

 NIJZ
Nacionalni inštitut
za javno zdravje

National Institute of Public Health
Nacionalni inštitut za javno zdravje

Spain

 CEEIS
Cat
Centre d'Estudis Epidemiològics
sobre les ITS i Sida de Catalunya

Centre d'Estudis Epidemiològics sobre
les ITS i Sida de Catalunya

IDIBAPS



Consorci Institut d'Investigacions
Biomèdiques August Pi i Sunyer

 ISPLN
Instituto de Salud
Pública y Laboral de Navarra

Instituto de Salud Pública y Laboral de Navarra

United Kingdom



Public Health England

Further information

Find out more about the INTEGRATE Joint Action

Visit the [JAwebsite](#)

integrate.rigshospitalet@regionh.dk

[Sign up](#) for the INTEGRATE newsletter

Connect with us on social media

