



JOINT ACTION ON HIV AND CO-INFECTION
PREVENTION AND HARM REDUCTION

SUMMARY OF THE
PERIODIC TECHNICAL REPORT
JOINT ACTION ON HIV AND CO-INFECTION
PREVENTION AND HARM REDUCTION

CHAFEA GRANT NR:
677085

COORDINATED BY:
NATIONAL INSTITUTE FOR HEALTH AND WELFARE
(THL) FINLAND

AUGUST 2017



Co-funded by
the Health Programme
of the European Union



Table of Contents

TABLE OF CONTENTS.....	2
ABOUT HA-REACT	3
KEY FACTS	3
HA-REACT OBJECTIVES.....	3
COORDINATION WITH NATIONAL, EUROPEAN AND INTERNATIONAL PROJECTS.....	4
PROJECT RESULTS AND VISIBILITY	5
PROJECT WEBSITE	5
OVERVIEW OF THE OBJECTIVES AND THE PROJECT RESULTS SO FAR	6
LESSONS LEARNED	10
RECOMMENDATIONS	10
LIST OF ABBREVIATIONS	10
CONTACT	11

ABOUT HA-REACT

The Joint Action on HIV and Co-infection Prevention and Harm Reduction (HA-REACT) addresses existing gaps in the prevention of HIV and other co-infections, especially tuberculosis (TB) and viral hepatitis, among people who inject drugs (PWID). The three-year project was launched in late 2015 with core funding by the Health Programme 2014-2020 from European Union (EU). Twenty-two partners representing 18 EU Member States are currently implementing the project. Additional expertise is provided by 14 collaborating partners, including the European Centre for Disease Prevention and Control (ECDC) and the European Monitoring Centre for Drugs and Drug Addiction (EMCDDA). The HA-REACT project has been carried out in three focus countries: Latvia, Lithuania and Hungary. However, materials developed as part of the Joint Action will be of benefit to the entire European Union.

Key Facts

Budget	approx. EUR 3,75 million co-funded by the Health Programme of the European Union
Duration	October 2015 – September 2018
Coordination	National Institute for Health and Welfare (THL), Finland
Partners	22 partners from 18 countries

HA-REACT OBJECTIVES

WORKING TOGETHER

to prevent HIV, viral hepatitis and tuberculosis among people who inject drugs in Europe.



- To improve countries' capacity to respond to HIV and co-infection risks, and provide harm reduction measures, focusing specifically on PWID.
- To focus on European Union member states where there are obvious barriers to effective and evidence-based interventions, or where such interventions are not sufficiently implemented.
- To encourage the implementation of comprehensive harm reduction in all EU Member States, as an essential strategy to improve the prevention and treatment of HIV, TB and viral hepatitis.

The overall aim of HA-REACT is to significantly contribute to the elimination of HIV and to reduce the number of cases of TB and viral hepatitis among PWID in the European Union by 2020. This objective aligns with strategic action plans issued by the European Union, the World Health Organization, UNAIDS and the United Nations Office on Drugs and Crime.

COORDINATION WITH NATIONAL, EUROPEAN AND INTERNATIONAL PROJECTS

- The objectives of HA-REACT are in line with the Northern Dimension Partnership in Public Health and Social Well-being (NDPHS) strategy and action plan of the Expert Group. This is why HA-REACT has collaborated with NDPHS on HIV, TB and associated infections from the beginning.
- Collaboration with Optimising testing and linkage to care for HIV across Europe (Opt-TEST) has encouraged national partners to participate in a survey on the legal and regulatory barriers to HIV testing and treatment, and other activities of this project.
- At the international level, HA-REACT has collaborated with Doctors of the World and the Eurasian Harm Reduction Network (EHRN). These NGOs have had an active role in HA-REACT seminars and have presented their experiences of sustainable funding and harm reduction mobile units. (WP5)
- At the national level in Latvia and Lithuania, there has been active engagement with several non-governmental organisations (NGOs), especially DIA+LOGS, I can Live and Fund it!, in order to determine the main barriers for PWID. HA-REACT is creating a manual to overcome harm reduction professionals' reluctance, educational materials targeting PWID, etc. (WP5)



- For a study visit to Spain in 2016, HA-REACT worked together with the main public health agencies in Madrid (**Madrid Health**) and Barcelona (**Public Health Agency from Barcelona**). (WP5)
- HA-REACT is collaborating with the European Centre for Disease Prevention and Control (ECDC) with WP leaders participating in expert panels, in order to prepare guidance on the prevention of infectious diseases in penal institutions. (WP6)
- The 1st international workshop on integrated care was held at the Regional Harm Reduction Conference in April 2017 and was planned in collaboration with **EHRN**. (WP7)



- HA-REACT has been collaborating with **EHRN** and Harm Reduction International (HRI) on a sustainable funding project called Harm Reduction Works Fund it! The project is funded by the Global Fund. This project aims to track sources of funding, their duration and the steps following the termination of funds. This is of great interest to the focus countries which have a strategic focus on transitioning from Global Fund support to independent funding. (WP8)

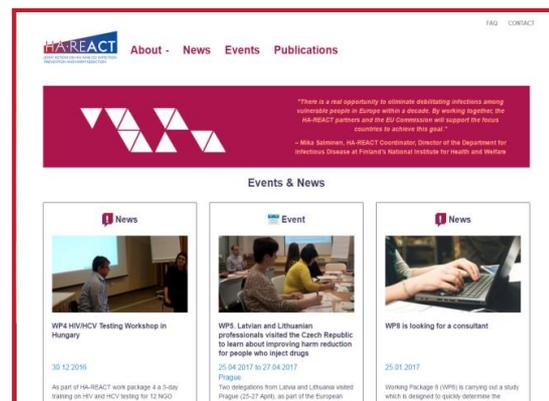
PROJECT RESULTS AND VISIBILITY

PWID encounter barriers when accessing health services for HIV, TB and viral hepatitis. HA-REACT aspires to create a platform where public health authorities, researchers, policy makers and government officials can collaborate to create health policies for PWID. The project should strengthen the capacity of harm reduction workers. The Joint Action aims to encourage more knowledge on infectious diseases that particularly affect PWID. Therefore, HA-REACT will continue to work closely with major infectious disease epidemiology centres in the EU and at the country level. HA-REACT will also use the Joint Action as a forum to display the work of existing European harm reduction networks, and engage with them in their capacity as civil society members. Most importantly, we will cooperate with the member states themselves to ensure the integration of HA-REACT activities into national policies.

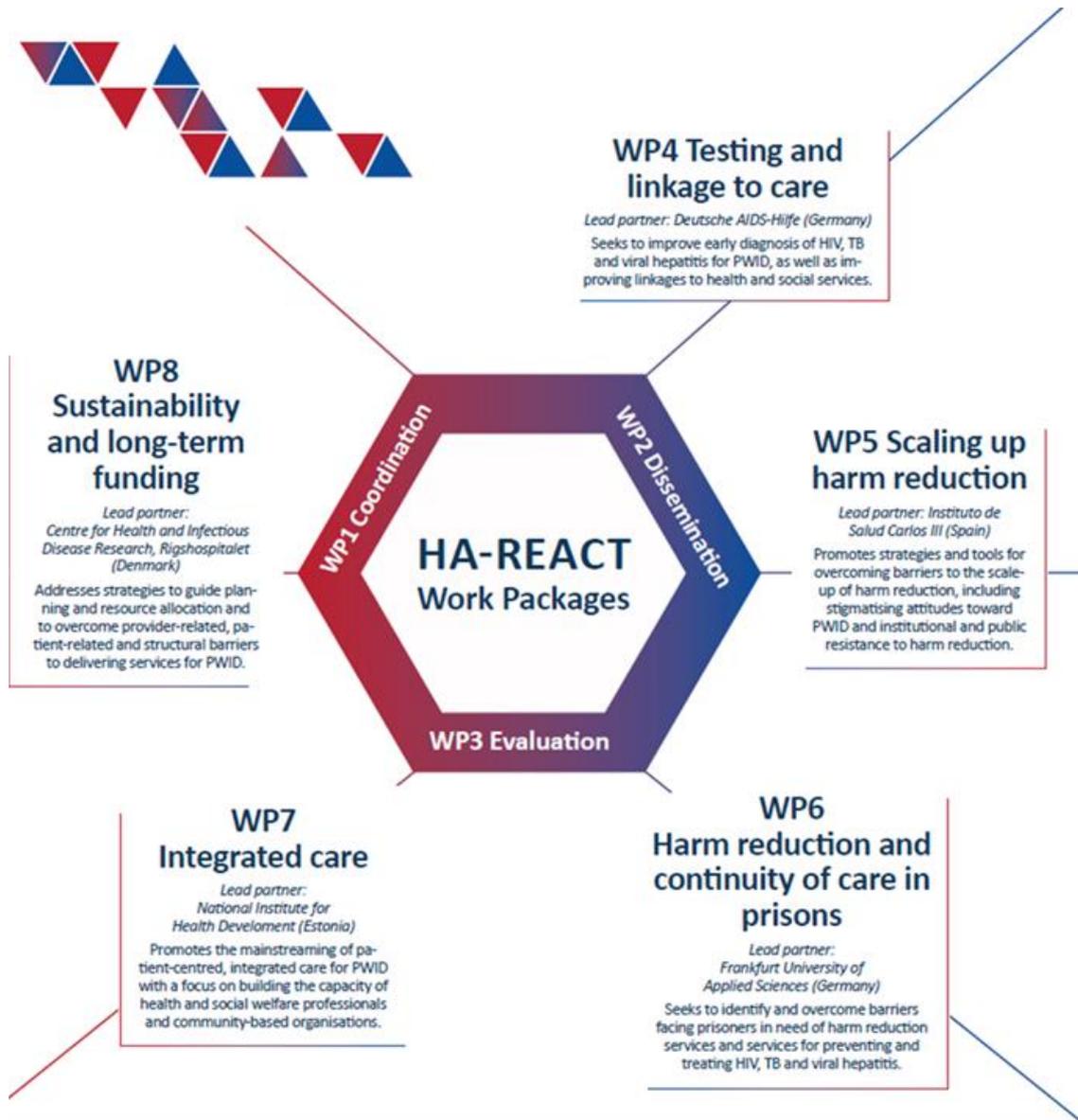
PROJECT WEBSITE

<http://www.hareact.eu/en>

The HA-REACT website is managed by the pan-European platform, AIDS Action Europe. The platform has served as a strong knowledge management tool for the Joint Action. AIDS Action Europe dedicates a section of their website specifically to events on harm reduction. This allows WP leaders to disseminate information on events, thus allowing for a wider audience to understand the monthly activities of the Joint Action. In addition, there is an area of the website used to store relevant policy. All members are encouraged to use this area to remain on top of current activities. The link to the website is on all presentations given on behalf of HA-REACT, and is widely disseminated on social media.



OVERVIEW OF THE OBJECTIVES AND THE PROJECT RESULTS SO FAR



The Eight work packages (WP) of HA-REACT objectives of the Joint Action 1-5 were assigned to WP4-8. Here we provide an overview of what the individual WPs have done to work towards these goals.

WP1: Coordination

Objective:

A well-coordinated Joint Action and functioning management should provide

timely reporting, budget control and support for successful implementation.

Progress so far:

- 1.1. Kick-off of the Joint Action in Vilnius on 14 January, 2016**
- 1.2. Established Advisory Board, it is co-chaired by ECDC, EMCDDA and Civil Society Forum on Drugs**
- 1.3. Organized five logical framework workshops preparing work plans on core work packages (spring 2016)**

WP4: Testing and linkage to care

Objective 1:

To improve early diagnosis of HIV, TB and viral hepatitis and improved linkage to care for PWID.

Progress so far:

4.1. Personnel working with PWID in Hungary and Latvia trained in low-threshold testing of HIV, HCV and TB. For this we organized three training workshops.

4.2. An interactive training manual and e-learning package on HIV, HCV and TB testing in low threshold settings for personnel who work with PWID is under preparation. Special focus is given to women and peers.

4.3. A gender-specific approach to testing services, focusing on women who use drugs, is being developed



4.4. Leaflets and posters developed to encourage PWID to take rapid HIV and HCV tests (LV, HU, EN, RU)

WP5: Scaling up harm reduction

Objective 2:

To scale up harm reduction service in the EU, based on Latvian and Lithuanian case-studies.

Progress so far:

5.1. Mobile Unit in Latvia

First results (January 20 – July 31, 2017)	
Distributed syringes and needles	8,436
Collected syringes and needles	1,485
Distributed condoms	2,688
Rapid HIV tests performed	143
Individual clients	185

Additionally, outreach workers distributed 42,691 syringes and needles and 9,769 condoms in this time period.

5.2. Seminars in Lithuania (11-12 April, 2016) and Latvia (14-15 April, 2016) to improve the prevention of HIV in PWID.



5.3. Study visits for Latvian and Lithuanian professionals in Spain (18-21 October, 2016) and the Czech Republic (25-27 April, 2017) to learn about improving harm reduction for PWID.



WP6: Harm reduction and continuity of care in prison

Objective 3:

To increase harm reduction and improve continuity of care for PWID in prison settings.

Progress so far:

6.1. Launch of website (<http://harmreduction.eu>) with interactive information, education and communication materials were developed for PWID and prison staff:

- E-Learning courses on 4 topics around harm reduction and treatment in prisons
- toolbox with supplementary material on prison issues including 2 videos

6.2. International Training Seminar on opioid substitution treatment in prisons, Warsaw, Poland, 7-9 March, 2017.

6.3. Study visit for Czech prison professionals to Berlin, introducing them to different modes of condom distribution, 5-7 October, 2016)

6.4. Start of condom pilot project in Prague.

6.5. “Needle exchange and other harm reduction measures in prison settings” conference in Luxembourg, 29-30 June, 2017.



WP7: Integrated care

Objective 4:

To improve the provision of integrated HIV, HCV and TB treatment and harm reduction for PWID.

7.1. The capacity of health, social and civil society professionals to provide better quality of care for PWID was improved.

7.2. Evidence- and practice- based tools and instructional materials were developed and provided to implement better quality care for PWID.

Progress so far:

The first international workshop on building a network for integrated care in April 2017 (Vilnius, Lithuania).



WP8: Sustainability and long-term funding

Objective 5:

To update national programmes to overcome barriers to responding to HIV, TB and HCV-related needs of PWID in the EU, with particular focus given to Latvia, Lithuania and Hungary.

Progress so far:

8.1. “Tips sheets” on: structural funds and joint procurement.

8.2. Meeting on sustainable funding in October 2016 (Budapest, Hungary).

8.3. Survey conducted on harm reduction services in Europe for removing provider-, customer-dependant and structural barriers in implementing acceptable and accessible high-quality HIV, hepatitis and TB services to PWID.

8.4. Meeting on the financing of harm reduction services and their sustainability in April 2017 (Vilnius, Lithuania).



LESSONS LEARNED

The number of stakeholders involved in the planning process of the Joint Action has proven to be challenging. Future planning activities should be interactive using new technologies such as webinars, video conferences etc. expanding on the means currently used.

RECOMMENDATIONS

The logical framework approach workshops proved to be a good tool for the planning activities in the beginning of the project. This approach gives an analytical and comprehensive picture of possible problems that may occur. A matrix is created describing the hierarchy of objectives, indicators, sources of verification and assumptions. Workshops were helpful in preparing work plans, and dividing tasks and responsibilities between partners. Providing funding is available this approach would also be useful in the application and evaluation phase.

Debates proved to be an excellent tool to assess barriers and facilitators in scaling up harm reduction interventions in the focus countries:

1. in promoting policy dialogue;

2. in discussing benefits and drawbacks of harm reduction interventions; and
3. in identifying the main areas of reluctance towards harm reduction in each focus country.

Country visits were critical in monitoring the progress of ongoing activities and serve as a starting point for others. This will be continued in the second year.

A study visit to addiction treatment centres and harm reduction services in Madrid and Barcelona was very successful and initiated debates among the Latvian delegation. The Latvian delegation has used Madrid's harm reduction mobile unit and Barcelona's pharmacies as standards for their own country. Following this success, the same programme will be repeated for the Lithuanian delegation.

A study visit to Berlin was organized for Czech prison professionals in order for them to get acquainted with harm reduction services such as condom distribution, in prisons and see their success.

The international training seminar on OST in prisons in Warsaw (29-30 June, 2017) and the conference on NSP and other harm reduction measures in prison settings in Luxembourg (7-9 March, 2017) were successful in giving all participants the opportunity to engage in discussions and exchange experiences.

LIST OF ABBREVIATIONS

ECDC	European Centre for Disease Prevention and Control
EMCDDA	European Monitoring Centre for Drugs and Drug Addiction
EU	European Union
HA-REACT	Joint Action on HIV and Co-infection Prevention and Harm Reduction
PWID	People who inject drugs
TB	Tuberculosis
WP	Work package

CONTACT

Outi Karvonen: Project Manager,
outi.karvonen@thl.fi

Jeffrey Lazarus: WP2 Dissemination and WP8
Leader, jeffrey.lazarus@regionh.dk



ASSOCIATED PARTNERS



Croatia. Croatian Institute of Public Health (Hrvatski zavod za javno zdravstvo); Life Quality Improvement Organisation - NGO FLIGHT (Udruga za unapređenje kvalitete življenja "LET")



Czech Republic. National Monitoring Centre for Drugs and Addiction (Office of the Government of the Czech Republic)



Denmark. Centre for Health and Infectious Disease Research, Rigshospitalet



Estonia. National Institute for Health Development (Tervise Arengu Instituut)



Finland. National Institute for Health and Welfare (Terveyden ja hyvinvoinnin laitos)



Greece. Hellenic Center for Disease Control And Prevention (Kentro Eleghou & Prolipsis Nosimaton)



HZJZ



Germany. Centre for Interdisciplinary Addiction Research, University of Hamburg; Institut für Suchtforschung, Frankfurt am Main



Germany. Centre for Interdisciplinary Addiction Research, University of Hamburg; Institut für Suchtforschung; Deutsche AIDS-Hilfe, AIDS Action Europe



Hungary. Ministry of Human Capacities



Iceland. Landspítali University Hospital



Italy. National Institute for Infectious Diseases (Istituto Nazionale Malattie Infettive L. Spallanzani)



Latvia. Center for Disease Prevention and Control of the Republic of Latvia (Slimību profilakses un kontroles centrs)



Lithuania. Centre for Communicable Diseases and AIDS (Užkrečiamųjų ligų ir AIDS centras – ULAC); Vilnius Centre for Addictive Disorders (Vilniaus priklausomybės ligų centras)



Luxembourg. Directorate of Health – Division of Sanitary Inspection (Ministère de la Santé)



Malta. Ministry for Health



Poland. National AIDS Centre (Krajowe Centrum ds. AIDS)



Portugal. Directorate-General of Health (Ministerio Da Saude)



Slovenia. Association ŠKUC (Društvo ŠKUC)



Spain. Carlos III Health Institute, Biomedical Research Networking Centre (Instituto de Salud Carlos III (ISCIII), Centro de Investigación Biomédica en Red (CIBER))

COLLABORATING PARTNERS

AIDS Foundation East-West (AFEW)
Coordinadora Estatal de VIH-SIDA, Spain
Czech AIDS Help Society
Department of Health, London, United Kingdom
European Centre for Disease Prevention and Control
European Monitoring Centre for Drugs and Drug Addiction
Free Clinic, Belgium
Grupo de Ativistas em Tratamento (GAT), Portugal
Medical and Public Health Services of the Ministry of Health of the Republic of Cyprus
Ministry of Health, Czech Republic
National Institute of Public Health, Czech Republic
Norwegian Institute of Public Health
Public Health Agency of Sweden
Vilnius University, Lithuania

Funding: Budget EUR 3.75 million. Co-funded by EU Health Programme. Duration: 36 months (October 2015–September 2018)

www.HAREACT.eu

 #HAREACT



Co-funded by the Health Programme of the European Union