

## ASSOCIATED PARTNERS



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



**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

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Co-funded by  
the Health Programme  
of the European Union

[www.HAREACT.eu](http://www.HAREACT.eu)

#HAREACT

# WORKING TOGETHER

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



# ABOUT HA-REACT

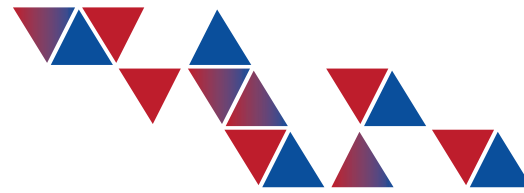
The Joint Action on HIV and Co-infection Prevention and Harm Reduction (HA-REACT) addresses existing gaps in the prevention of HIV and other co-infections, especially tuberculosis (TB) and viral hepatitis, among people who inject drugs (PWID). The three-year project was launched in late 2015 with core funding from the European Union (EU), and is being implemented by 22 partners representing 18 EU Member States. Fourteen collaborating partners are contributing additional expertise, among them the European Centre for Disease Prevention and Control and the European Monitoring Centre for Drugs and Drug Addiction.

Implementation of HA-REACT is taking place primarily in three focus countries, with attention given to preparing toolkits and guidelines that will benefit the entire European Union. The focus countries are Latvia, Lithuania and Hungary.

## HA-REACT objectives:

- To improve capacity to respond to HIV and co-infection risks and provide harm reduction with a specific focus on PWID.
- To focus particularly on Member States where there are obvious gaps in effective and evidence-informed interventions, or where such interventions are not being implemented at a sufficient level.
- To encourage the implementation of comprehensive harm reduction programmes at sufficient scale in all EU Member States as an essential strategy for improving 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 reductions in cases of TB and viral hepatitis among PWID in the European Union by 2020. This objective is aligned with strategic action plans issued by the European Union, the World Health Organization, UNAIDS and the United Nations Office on Drugs and Crime.



## WP8 Sustainability and long-term funding

*Lead partner:*  
Centre for Health and Infectious Disease Research, Rigshospitalet (Denmark)

Addresses strategies to guide planning and resource allocation and to overcome provider-related, patient-related and structural barriers to delivering services for PWID.

## WP7 Integrated care

*Lead partner:*  
National Institute for Health Development (Estonia)

Promotes the mainstreaming of patient-centred, integrated care for PWID with a focus on building the capacity of health and social welfare professionals and community-based organisations.

# HA-REACT Work Packages

WP1 Coordination

## WP4 Testing and linkage to care

*Lead partner:* Deutsche AIDS-Hilfe (Germany)

Seeks to improve early diagnosis of HIV, TB and viral hepatitis for PWID, as well as improving linkages to health and social services.

WP2 Dissemination

## WP5 Scaling up harm reduction

*Lead partner:* Instituto de Salud Carlos III (Spain)

Promotes strategies and tools for overcoming barriers to the scale-up of harm reduction, including stigmatising attitudes toward PWID and institutional and public resistance to harm reduction.

WP3 Evaluation

## WP6 Harm reduction and continuity of care in prisons

*Lead partner:*  
Frankfurt University of Applied Sciences (Germany)

Seeks to identify and overcome barriers facing prisoners in need of harm reduction services and services for preventing and treating HIV, TB and viral hepatitis.