Report of the 15th HIV/AIDS Civil Society Forum Luxembourg, 4/5 June 2012

Meeting convened by the European Commission Health & Consumer Protection Directorate-General with co-chairing of AIDS Action Europe and the European AIDS Treatment Group









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Introduction

The HIV/AIDS Civil Society Forum (CSF) has been established by the European Commission as a working group to facilitate the participation of non-governmental organisations, including those representing people living with HIV/AIDS, in policy development and implementation and in information exchange activities. The Forum includes about 40 organisations from all over Europe representing different fields of activity. The Forum acts as an informal advisory body to the European Think Tank on HIV/AIDS. EATG and AIDS Action Europe co-chair the Forum. See the participant list in annex A. All annexes to this report are only available online at the CSF page on the AIDS Action Europe website.

4 June 2012

1 Opening

Opening of the meeting by co-chairs Anna Zakowicz and Lella Cosmaro, starting with a brief round of introductions (see **Annex A**).

1.1 Report and action list of last meeting

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What	Who	Status			
Send Wolfgang ideas for the human rights conference (topics, speakers)	CSF Members	On agenda of this meeting. The Conference will take place in November in Brussels, co-organised with UNAIDS.			
Check for additional information on the meeting between Commissioner Dalli and the Vatican.	Wolfgang Philipp	Wolfgang checked but no additional information was available			
Present update on HIV prevention tender	Wolfgang Philipp	On agenda of this meeting.			
Check with your TT member if they responded to the questionnaire on the impact of the economic crisis to the member states, since the response is low	CSF members	The questionnaire will be sent only once yearly, EC will inform CSF members timely.			
Forward joint CSF letter on funding concerns to Commissioner for drugs issues.	CSF coordination team	Done			
Send letter to encourage Commission to unfreeze Global Fund contribution	CSF coordination team	Done. EC contribution unfrozen.			
Finalise and circulate the statement on costs, cuts and drugs	Yusef Azad	Statement was presented at plenary session HIV in Europe Conference and widely disseminated.			
Record any data we have on stock-outs and feedback to WHO	CSF Members	Inventory held prior to this meeting and results discussed at the CSF meeting.			
Prepare a draft response to the communication on drugs, circulate, finalise and submit to EC	Yusef Azad	Joint CSF response was sent to EC and circulated.			
Add the EMIS survey to the agenda of the next meeting of the Civil Society Forum on HIV and AIDS	CSF coordination team	Didn't fit into agenda this time, postponed till next time.			
Select from brainstorm session on CSF priorities for 2012 three top priorities and organise teleconferences	CSF coordination team	The CSF CT worked on the priorities and tried to reflect this in the agenda			

in working groups so we can move forward in some of these issues.		of this meeting and the next one.
Forward joint letter 2 CSFs on funding concerns to health attachés and relevant national members of parliament (MEP) You could ask your MEP in the European Parliament to ask a question on funding for civil society.	CSF members	CSF CT sent letter.
Plan session about the EU presidencies on the agenda of the next CSF meeting and contact the relevant CSF members to prepare	CSF coordination team	Well-prepared session on the agenda of this meeting.
Add the topic of TB/HIV co-infection to the agenda of the next meeting	CSF coordination team and co-chairs	Had to be postponed due to other emerging issues that were prioritised.

2 CSF co-chairs update on advocacy and other actions

Lella Cosmaro presented an overview of the different advocacy actions and policy advices that were developed by the CSF coordination team (CT) since the last CSF meeting:

December 2011

 Letter to EC Commissioner Devco requesting the EC to unfreeze its contribution to the Global Fund. The contribution by the EC was released.

January 2012

Reply to our letter of November 8, 2011 to Commissioner Dalli requesting that the EC continues its support for an
effective civil society response to the HIV/AIDS challenge in Europe. The response to our letter (which was sent jointly
with the CSF on drugs) did not fully abate our concerns. While indicating several funding opportunities, none of them
were directly or easily accessible for NGOs.

February

- Compilation of CSF input to the public consultation on the Communication "Towards a Stronger European Response to Drugs". All comments will be used as input by the EC to draft the new drugs strategy. The report compiling all input received by the EC will be available soon and circulated among CSF members.
- 15-17 February, Stockholm: participation of the two CSF co-chairs in the ECDC Annual meeting "STI and HIV in EU/EEA" and the Surveillance Meeting.
- Sign-on by CSF co-chairs to the letter of ESVERO to the GF concerning eligibility criteria and continuation of key harm reduction services for groups most at risk in Russia. ESVERO managed to prove to the GF board that support to harm reduction in Russia is crucial, followed by a positive decision that makes ESVERO eligible for funding.

March

- 19-20 March, Copenhagen: participation of the two CSF co-chairs and other CSF members in the HIV in Europe Conference. Presentation of the CSF statement "Accelerating progress in Europe to Universal Access to HIV treatment during a time of financial crisis" at the plenary session.
- Letter of support to Andrej Rylkov Foundation in Russia whose website was blocked by the Federal Service for Drug Control since they appealed for more humane drug policies.
- 29-30 March, Tallinn: participation of CSF member L. Mendao to the ECDC/ECMDDA consultation "Detecting and responding to outbreaks of HIV among people who inject drugs: Best practices in HIV prevention and control".

April

• Letter of appreciation to M. Kazatchkine when he stepped down as Director of the GFATM.

May

- Letter to Irish Minister of State of European Affairs and Minister of Health to discuss the possibility of a new Dublin
 Declaration on HIV in Europe under the next Irish Presidency, who responded that they will look into our suggestion.
- Letter to Commissioners Dalli and Reding expressing our concern with the alarming situation in Greece concerning discrimination and criminalisation of sex workers and migrants.
- Sign-on by CSF co-chairs of the petition of the Lithuanian network of PLHIV expressing concern to EU, WHO and UNAIDS about lack of funding and quality standards in HIV programmes.
- 22-23 May, Brussels: participation of CSF member N. Dedes to the ECDC expert meeting "Sexual Health in context of disease prevention".
- Participation of Y. Azad as CSF representative in mission of ECDC, EMCDDA & WHO Europe to Greece on issues with migration, drug use and HIV.

3 Commission update – Wolfgang Philipp, DG SANCO (Annex B)

Wolfgang Phillipp presented an overview of the different meetings and initiatives that the EC was involved in since the last meeting.

Human rights conference

Together with UNAIDS, the EC will organise a conference on HIV and human rights in Brussels, November 13-14. (for 200 people, 1,5 day duration). The EC aims to organise a CSF meeting on Monday November 12 in order to enable participation of CSF members in the conference. CSF members were asked to save the date, more details will follow. The CSF expressed its wish to be actively involved in the preparation of the agenda. Nikos Dedes, Yusef Azad and Raminta Stuikyte were selected as CSF representatives to join the conference Steering Committee.

Situation in Greece

Greece is organising a high level meeting in June on HIV and migration, with Health Ministers from neighbouring countries, ECDC, WHO, EC. ECDC was mandated to carry out a risk assessment mission in preparation of the meeting, which took place at the end of May. The outcome of the mission is covered under the agenda point 5.1.

Think Tank

The Think Tank will look into developments in member states, starting with Greece. Other topics on their agenda are - amongst others - HIV and co-infections, prevention concepts for the future, HIV in Eastern Europe.

Terms of reference for the CSF members

Wolfgang Philipp reminded everyone about the roles and responsibilities of CSF members. CSF members are expected to act as focal points to keep others in their countries informed on a regular basis about the CSF and share relevant information from their countries. Chris Lambrechts shared some tips with the CSF members on how to be a good CSF participant.

Actions

 Raminta Stuikyte, Yusef Azad & Nikos Dedes: Act as CSF representatives on Steering Committee for Conference on HIV and human rights

4 EU Presidencies: how can we make our preparatory steps work – Anna Zakowicz

Anna Zakowicz introduced the key questions for the discussion about past presidencies:

What happened in the past? Did it work?

How can we be more successful in the future?

Spanish EU Presidency: Ferran Pujol pointed out that that during its Presidency Spain held a conference on health inequalities covering amongst others vulnerable populations. Unfortunately, civil society participation was low, the CSF did not take part and did not provide any input into the conference. It was a missed opportunity for the Spanish civil society to be involved, a positive outcome was the fact that the conference was organised under the Spanish presidency.

Follow- up on declarations should be institutionalised, like in the case of the Bremen declaration. Currently follow-up on the Dublin declaration is insufficient and there is a declaration fatigue among activists. As far as EU presidencies are concerned, Nikos Dedes noted that the CSF should identify and use opportunities beyond the HIV/AIDS specific agenda. It should also engage with Presidencies when other relevant policy issues, like migration or detention are on the agenda. For instance, during the Portuguese EU Presidency when the issue of migration was on the agenda, a meeting was organised on HIV and migration and this resulted in a set of recommendations from civil society organisations in Portugal.

During the French EU presidency, the CSF had linked HIV to the issue of travel restrictions which were under discussion. Chris Lambrechts mentioned an experience during the Belgian Presidency in 2009, when Sensoa approached health representatives from the EC in relation to Belgian anti discrimination law and they were very approachable; in some cases access to the right people is not hard and we should constantly push for it.

Wolfgang Phillipp stressed the importance of advocacy at national level, because DG SANCO has a limited mandate in the field of health. He did not believe that organising CSF meetings in the EU presidency countries would be realistic, unless the issue of HIV is prominent for the government of the country. The CSF should engage with the Presidency troikas for advocacy purposes. CSF members should address their health attaches in Brussels to consult what areas in regards to health are planned for the upcoming presidencies.

The CSF divided in working groups, which came up with the following possible advocacy approaches:

- Organise CSF meetings in the Presidency country
- Talking to health ministries staff in the capital and representative in Brussels
- Starting preparations over 7 months in advance
- Identifying strategic opportunities, 'folding' HIV into larger health issues
- Developing a better understanding of national issues without colliding with national policies
- Convincing national governments to involve civil society more at national level
- Identifying most pressing issues in Troika countries and organising civil society groups there to discuss collaboration and advocacy. Migration and harm reduction are very important topics for the next presidencies so they should be picked up on .
- Using Presidencies to highlight problems in the Presidency countries
- Listing meetings where HIV could be discussed
- Using the 2013 international Harm Reduction Conference in Vilnius in the context of the EU Presidency
- Following up on CSF letter to upcoming Irish EU Presidency for Dublin Declaration follow up
- Mobilising different groups in Ireland to press Irish authorities to follow up on Dublin Declaration during its Presidency.
- During the Greek EU Presidency, Hepatitis C should be put on the agenda.
- Contact Italian Ministry of Health to include HIV/AIDS on the Italian Presidency agenda.
- In Ukraine and Russia they have good experience with developing strong and concrete backgrounders when an issue is
 presented to government officials. Present then your ideas, best practises and cost effectiveness, take practises from
 other countries, not only from NGOs, to convince governments.

Actions

- CSF CT, with cooperation of CSF members from Ireland, Lithuania and Greece: Forward to DG SANCO and the troikapartners of Ireland, i.e. Lithuania and Greece, the CSF letter that was sent to the Irish Health Ministry and their response, and push together for a renewed conference in the EECA region (Vilnius Declaration) and for a progress report and/or renewed Dublin Declaration.
- Lella Cosmaro: use the upcoming Italian Conference on AIDS and Retroviruses (ICAR, Naples, June 10-12, 2012) to bring up CSF advocacy topics in preparation of the Italian Presidency
- Ruta Kaupe: participate in open consultations around EU Presidency preparations in Latvia and keep CSF updated about possibilities to get HIV on the agenda

5 Updates

5.1 ECDC – Teymur Noori (Annex C)

Teymur Noori's update consisted of three key activities:

- Monitoring of the EU Action plan
- Monitoring of the Dublin Declaration
- EU mission to Greece

Discussion

Yusef Azad wondered whether the monitoring of the Dublin Declaration also takes into consideration the change of the epidemic since 2004. According to Teymur Noori new developments are taken into consideration. He noted that a renewal of the Declaration would give a political impetus to the issue.

The EU mission report to Greece will be published mid une. ECDC cannot publish it, since this was a request from the European Commission. If it decides not to publish the report, civil society should push for it.

Raminta Stuikyte noted that Russia has not been providing data for some time now. ECDC could use data provided by Russian civil society groups. What would be the timeline for input? According to ECDC data sources should remain the same and consistent, in order to allow for comparisons and updates.

Teymur Noori mentioned separate indicators on prisoners and there will be a separate report. He acknowledges that prisoners are not well reflected into the standardised indicators. EMCDDA is more involved with prisoners.

The CSF hasn't reviewed thoroughly the recommendations from the ECDC monitoring report on the EC Communication and agrees that there is a need to do so in order to fully utilise the report as input for the CSF agenda for the coming period.

Actions

- CSF CT: Utilise the recommendations from ECDC monitoring report on the Commission Communication for the CSF work
- CSF CT: Check if monitoring report on Greece is published by the EC- otherwise follow up with Commission to ensure publication

5.2 WHO/Europe- Martin Donoghoe

We see little improvement in HIV/AIDS related developments in Eastern Europe. Although an increasing number of people is on ART and OST. But the Global Fund developments are worrying in that respect. Estonia has made some commendable efforts.

Civil Society is doing a great job in alerting WHO on alarming developments such as stock outs. Unfortunately WHO is not always able to react. A current problem is provision of ART for IDUs. At the moment WHO is collecting data to identify the scope of the problem. In general it is visible across the continent that the integration of services is deteriorating. Countries which did not scale up prevention are now vulnerable to epidemic outbreaks, e.g. Greece. There is no scaling up of prevention, budgets are being cut or erased altogether, services disappear and policy directions change quickly. Countries in which relative control existed now face potential outbreaks; all this is considered as extremely alarming. The example of the UK's stance towards methadone is worrying and sends out a bad signal to Russia. It is unfortunate that the European dimension is missing in the global discussion on the strategic use of ART in prevention.

A few initiatives in which the WHO/Europe is involved:

- Support to the integration of tools on rapid assessment of TB and HIV in Portugal
- Working on global initiative to eliminate mother to child transmission report with UNICEF in Moldova and Kazakhstan
- A meeting on HIV and IDUs in Central Asia on 19-20 June
- Speaking at Eastern Europe session at World AIDS Conference in Washington
- Cyprus Hepatitis conference in December in Nicosia
- A global WHO meeting on ART is planned. It will probably not provide a good perspective on Europe. WHO recently
 published guidelines on couples, with reference to HIV testing and counselling. The guidelines refer to the issue of
 treatment as prevention. The aim of this guide was to consolidate all existing information on the topic.

6 Access to treatment in times of financial crisis

Update on HIV & co-infections stock-outs - Anna Zakowicz

Anna Zakowicz presented the outcomes of an inventory among CSF members concerning stock-outs in HIV & HCV treatment, diagnostics and reasons for stock-outs. See presentation in **annex D**. In 13 countries no stock-outs were reported. However, a number of countries did report stock-outs and challenges with more expensive drugs, the lack of viral load checks, and inadequate prevention efforts. These countries include France, Portugal, Belgium, Spain, Romania, Russia, Turkey, Ukraine, Macedonia, Latvia, Lithuania.

Network of low-prevalence countries and Budapest meeting – Ferenc Bagyinszky

The network was established in June 2011 and focuses on access, treatment and care issues in low prevalence settings. The participating organisations adopted the Budapest Declaration, which addresses the issues of low-prevalence countries. See annex E for further details.

EATG position paper on access and innovation – Raminta Stuikyte

The financial crisis puts pressure on budgets, therefore it will be harder to increase access to treatment. We need to find a balance between innovation (we need to pay for it) and access to medicines (affordability). We need more affordable prices, (also within the EU, next to EE); alternative strategies for research and innovation, not only through patents and high prices. In September EATG will launch a position paper on access and innovation and will invite other organisations and networks to support this position. See **annex F** for further details.

Policy dialogue meeting on affordable medicines in the EU – Raminta Stuikyte

Several initiatives have looked into the issue of affordable medicines for the EU, among them the Bremen Initiative (unclear level of progress), the Belgium EU Presidency, an analysis commissioned by the European Parliament, and a multi-stakeholder Think Tank on differentiating pricing within the EU. EATG will organise a 1-day meeting to revitalise the commitments and lessons

from the different initiatives and is looking for groups interested to co-organise and shape the agenda. See **annex F** for further details.

Training on treatment interruptions and advocacy and policy dialogue meeting on access to treatment and care in St. Petersburg, Russia – Raminta Stuikyte

EATG organised a recent meeting in St. Petersburg with community groups. Key challenges prioritised by the community: improving forecast of needs, adequate procurement, reduction of prices, treatment literacy and adherence support, strengthening of collaboration.

Discussion

Affordable medicines are affected by regulatory issues., this is also the case for cancer treatments for example. Should we look into the issue Europe-wide?

The CSF produced a statement on universal access to treatment and presented it at the HIV in Europe conference. More follow-up should be given: the next step is to submit the statement formally to the EC Commissioner. In addition, the statement should be circulated in the European Parliament working group on HIV. The CSF CT will send them the CSF statement on universal access together with a one-pager with highlights of this meeting, and the invitation to the next CSF meeting in Brussels. If this is not feasible, a CSF delegation will arrange a meeting with them in Brussels.

Pavel Aksenov warns us to be careful with our messages. The initiative on treatment as prevention for Russia might give a wrong message to policy makers, since they could conclude that no specific prevention interventions for IDUs were needed any longer. Other CSF participants recognise the potential dangers in this terminology and suggest to be careful in how to tackle this issue.

Actions:

- CSF CT: send CSF universal access statement to EU Commissioner
- CSF CT: send CSF universal access statement, one pager with CSF highlights and invitation to next CSF meeting to MEPs working on HIV
- Ruta Kaupe: write letter, indicating support of the CSF, to the Latvian Ministry of Health to request access to treatment with a CD4 count above 200.
- All CSF members: if there are stock-outs, keep the CSF and WHO informed.

7 Human rights and criminalisation

In the last couple of months, a number of worrisome developments took place in Russia, Greece and Spain. CSF members were asked to update the CSF and discuss together how the CSF could support local actions.

Russia - Pavel Aksenov, ESVERO

Pavel Aksenov started with a presentation on the anti gay law in St. Petersburg (see **Annex G**). It is unclear to what extent the law is enforced. There is one case in appeal. There are concerns about the spread of similar laws throughout Russia and neighbouring countries.

Greece - Nikos Dedes, EATG

Nikos explained how the new immigration law was implemented by the Greek centre for disease control and how the law on sex work is abused to criminalise sex workers and subduing them to forced HIV-testing. The disclosing of information is currently

continuing. Marianella Kloka mentioned that civil society has complained to the data protection authority. Government officials declared that the practice of disclosing information would stop but this is not the case. Prosecution is continuing.

Spain - Ferran Pujol, Projecte dels NOMS-HISPANOSIDA

Communication between civil society and the Ministry of Health basically stopped since the new government came into power. There is no funding for preventive actions carried out by NGOs in the new budget. Of the 2 million euro health budget allocated to regional governments, nothing has been foreseen for HIV prevention. The national decree on cancellation of health care to illegal immigrants and uninsured residents of Spain over the age of 26 will be implemented from August onwards, but provinces and doctors already declared that they would not implement the decree. The worrying aspect about the situation is that the government presented the cuts as an economic necessity when they are in fact guided by ideology.

Edwin J. Bernard from the HIV justice network presented the Oslo Declaration and its background (See **Annex H**). He also mentioned the upcoming EATG, DAH and IPPF seminar in Berlin in October. Besides, he mentioned the UNAIDS policy considerations as a tool for a more political view on criminalisation: many governments do not take action in HIV criminalisation issues since they consider them related to the justice system.

Harry Witzthum from Swiss AIDS Federation gave an update on the possible positive legislative changes on criminalisation of HIV in Switzerland (See Annex I). An article in the Law is about to be amended, it currently awaits approval by Parliament on 16 June.

Silke Klumb from Deutsche AIDS Hilfe presented their policy paper on Criminalisation. (See Annex J)

Yusef Azad informed participants that the **UK** government decided to provide free treatment for undocumented migrants. Treatment as prevention was a key argument used to pursuing such a positive change.

What concrete actions can be taken in a reaction to what has been happening around Europe?

Chris Lambrechts mentioned that the EU condemned the St. Petersburg anti-gay law on 25 May. He suggested to appeal to the EU again, on the basis of anti-discrimination legislation, to condemn such laws. Besides, it would also be constructive to send an appreciation to the Swiss government in case the law is amended.

Luis Mendao pointed out that he finds it necessary to develop a continent wide systematic response to these breaches of human rights.

Martin Donoghoe mentioned that indeed only writing petitions is not the right strategy and that many statements on human rights under discussion are already contained in the WHO and EU action plans. He thinks that the way to prompt WHO into action is to make a direct reference to those action plans: be specific about which parts aren't implemented, make a list of the non complying countries, and send a letter to the Director of WHO Europe, Zsuzsanna Jakab. A checklist should be made in relation to the topic and the way the countries in question are not acting according to the action plans. He also noted that the action plan addresses the issue of criminalisation.

Nikos Dedes also stressed that a more systematic approach is needed, also from the EATG/AAE offices. Also, when letters are sent to government officials it is useless to have them signed by a European body that they have never heard of. It's more effective to cc the EU commissioner. Raminta Stuikyte pointed out that she has not a clear idea on how we can do anything for LGTB issues in Russia; it's a very complex situation. EATG members met with some activists at the end of May in Saint-

Petersburg and reported that showing solidarity and spread news among partners in the EU is appreciated by local activists facing an uphill battle on LGTB issues.

Agenda setting for the EU Human Rights and HIV conference in November should be concrete: migrants and criminalisation. What do we want out of these topics? We should engage with the EU Fundamental Rights Agency as well as with EMCDDA. When preparing statements, we should make use of their monitoring results.

Actions

- CSF CT: develop a more systematic approach to advocate for human rights and civil society concerns
- CSF CT: make sure that migrants are more prominently discussed on agenda of next CSF meeting
- CSF CT: continue collecting data on stock outs and input into WHO monitoring of action plan

Feedback session on EC tender in effective HIV prevention strategies for key populations - Pauline Oosterhoff & Kelsey Vaughan, Royal Tropical Institute (Annex K)

The purpose of the EC-funded project was to prepare a guide containing evidence-informed prevention strategies for use in Europe and neighbouring countries.

Planned deliverables:

- Report based on quick scan of 33 countries and analysis of these scans (draft presented to CSF).
- Guide for policy makers for effective targeted HIV prevention, with dedicated and systematic scenarios (evidence informed strategies)
- Visualisation of HIV surveillance data with ECDC

Involvement of civil society is a key principle, case studies were only selected if this was the case. The launch of the final products is planned at the next CSF/TT meetings.

Discussion

In relation to prison intervention examples, make sure to highlight countries that are really at the forefront, like Spain. Include community system strengthening examples. Costing is an important issue, if there is information lacking the EC should do something about it, the Global Fund has experience.

Action

• CSF CT: include presentation of final products of HIV prevention tender at next CSF meeting

9 Updates

9.1 Global Fund – Hanna Shevchenko (Annex L)

There have been considerable changes in the GF secretariat. The 26th Board meeting took place in May. New funding mechanisms will be proposed, they will no longer consist of rounds.

Discussion

There are worrisome developments: Romania, Bulgaria, Lithuania are no longer eligible. Currently there are heavy measures to cut grants during renewals, the first ones to be cut are civil society's. Technical support, which ensures quality, is also disappearing. There are many upcoming battles. We should be involved in the consultation process for determining who will receive the money.

9.2 UNODC – Monica Ciupagea

UNODC just released two publications:

- A comprehensive guide for HIV prevention in prisons and closed settings
- HIV prevention, treatment and care for people who use stimulants

See www.unodc.org

9.3 EMCDDA – Liesbeth Vandam (Annex M)

Several EMCDDA publications were released. End 2012 two new publications planned:

- Monitoring strategy on drug use and responses in prison settings
- Selected issues on drug use among prisoners.

The new EU Drug Strategy 2013-2020 is being developed under the DK, CY and IE Presidencies.

Discussion

EMCDDA should look into the indications from some country representatives, according to whom people receive OST for a limited period of time only, after which they experience abstinence, without referring to any evidence based approach in their choice. The EMMCDA is not a research institution, but can identify gaps in research. Maybe an European review on effect of abstinence strategy would be useful to ensure informed discussions.

10 EuroNPUD – Maria Phelan, Harm Reduction International (Annex N)

Maria Phelan presented the outcomes of a mapping on European organisations of people who use drugs. Raminta Stuikyte pointed out that it is a useful mapping and could also be used for sex workers. Case studies and best practices can be very useful for policy makers. Luis Mendao mentioned that it would be useful to have reports in more languages than just English. Ruta Kaupe talked with activists in her country and she wonders why such action groups do not exist in Latvia. Martin Donoghoe suggested that it is hard to convince big organisations of the usefulness of such networks. However these mappings are very concrete products and can serve very well to convince large stakeholders such as the Open Society Foundations. Anke van Dam mentioned that AFEW has been involved in a large prevention project together with NPUD and Mainline.

11 Promoting earlier testing and care

11.1 HIV in Europe – Nikos Dedes (Annex O)

Nikos Dedes outlined the outcomes of the HIV in Europe conference that took place in March. Yusef Azad stressed that it has been very difficult to deliver a consistent message of what is needed in the entire region. There hardly is any European wide consensus. Raminta Stuikyte wondered what the next steps shall be and what is the follow up of the conference in Copenhagen. Nikos Dedes expressed the wish to reach out to activists in Eastern Europe.

11.2 Cobatest project - Jordi Casabona (Annex P)

Jordi Casabona presented the outcomes of a qualitative study as well as some overall project data. A problem participants seemed to have with the project is the fact that the issue of cost-effectiveness was not taken into account, as it is an important argument in times of economic crisis. Also, there is a need to provide evidence that CBVCTs are not 'luring' people away from traditional testing services. Lella Cosmaro stated that in Italy a better linkage of national focal points to the communities is necessary; no data are available since there is no cooperation. The fact that data are not available gives the government an argument to say that CBVCTs are not cost effective. Ferran suggested that we ourselves should identify centres that can be

added to the list of CBVCT centres and provide this to the project team. Luis Mendao added that when more CBVCT projects will be initiated, the CSF should push for guidelines in which communities are compensated for their work. The projects should show more flexibility and we need a legal reform that allows training of non-professionals in using new technologies and best practises. We should prove that we are cost effective and efficient. Jordi Casabona mentioned that there are legal issues regarding testing that should be taken into account. The CSF can be helpful in issuing an European statement regarding legal issues.

Actions

CSF members: identify community centres that are not connected to Cobatest as yet and inform Jordi Casabona

12 Any other business

- Martine de Schutter mentioned that at the AIDS 2012 conference, the regional session on Europe will include a session on the CSF/TT which she will disseminate to the CSF. Two weeks before the conference a regional hub will be in place in Kiev.
- Arnaud Simon shared AIDES' plan to organise the second Europride in Marseille in 2013. Anyone is welcome to join or support AIDES in its promotion activities.
- From this meeting and the priorities set earlier, the following topics already emerged for the next meeting:
 - o HIV tender guide and website;
 - o HIV & TB co-infection advocacy guide;
 - monitoring of the developments in Greece, Spain and Russia with focus on migrants;
 - new EU drugs strategy;
 - o stock-outs.

13 Action list

What	Who	When
Act as CSF representatives on Steering Committee	Raminta Stuikyte, Yusef Azad &	Now till November
for Conference on HIV and human rights	Nikos Dedes	
Forward to DG SANCO and the troika-partners of	CSF CT (Coordination Team),	ASAP
Ireland, i.e. Lithuania and Greece, the CSF letter that	with cooperation of CSF members	
was sent to the Irish Health Ministry and their	from Ireland, Lithuania and	
response, and push together for a renewed	Greece	
conference in the EECA region (Vilnius Declaration)		
and for a progress report and/or renewed Dublin		
Declaration.		
Use the upcoming Italian Conference on AIDS and	Lella Cosmaro	June 10-12, 2012
Retroviruses (ICAR, Naples, June 10-12, 2012) to		
bring up CSF advocacy topics in preparation of the		
Italian Presidency		
Participate in open consultations in Latvia in	Ruta Kaupe	When consultations are ongoing
preparation of EU Presidency and keep CSF	·	
updated about possibilities to get HIV on agenda		
Utilise the recommendations from ECDC monitoring	CSF CT	September

report on the Commission Communication for the CSF work		
Check if monitoring report on Greece is published by the EC - otherwise follow up with Commission to ensure publication	CSF CT	July
Send CSF universal access statement to EU Commissioner	CSF CT	July
Send CSF universal access statement, one pager with CSF highlights and invitation to next CSF meeting to MEPs working on HIV	CSF CT	July
Write letter, indicating support of the CSF, to the Latvian Ministry of Health to request access to treatment with a CD4 count above 200.	Ruta Kaupe	ASAP
Keep the CSF and WHO informed when there are stock-outs	All CSF members	Ongoing
Develop a more systematic approach to advocate for human rights and civil society concerns	CSF CT	ASAP
Make sure that migrants are more prominently discussed on agenda of next CSF meeting	CSF CT	Next CSF meeting
Continue collecting data on stock outs and input into WHO monitoring of action plan	CSF CT	ASAP
Include presentation of final products of HIV prevention tender at next CSF meeting	CSF CT	Next CSF meeting
Identify community centres that are not connected to Cobatest as yet and inform Jordi Casabona	CSF members	ASAP

14 List of annexes

- Annex A participant list CSF XV
- Annex B opening sanco CSF
- Annex C ECDC Update CSF
- Annex D Stock-outs
- Annex E NeLP_CSF
- Annex F Access to treatment
- Annex G AntiGay Legislation
- Annex H Oslo Declaration on HIV Criminalisation
- Annex I Legislative Changes Criminalisation Switzerland
- Annex J DAH Position Paper Criminalisation
- Annex K Final Prevention strategies June TT CSF meeting
- Annex L GF Update

- Annex M EMCDDA Update
- Annex N EuroNPUD
- Annex O HIV in Europe
- Annex P COBA Test Project