

# EU Civil Society Forum – Thematic Network on HIV, TB, viral Hepatitis and STIs

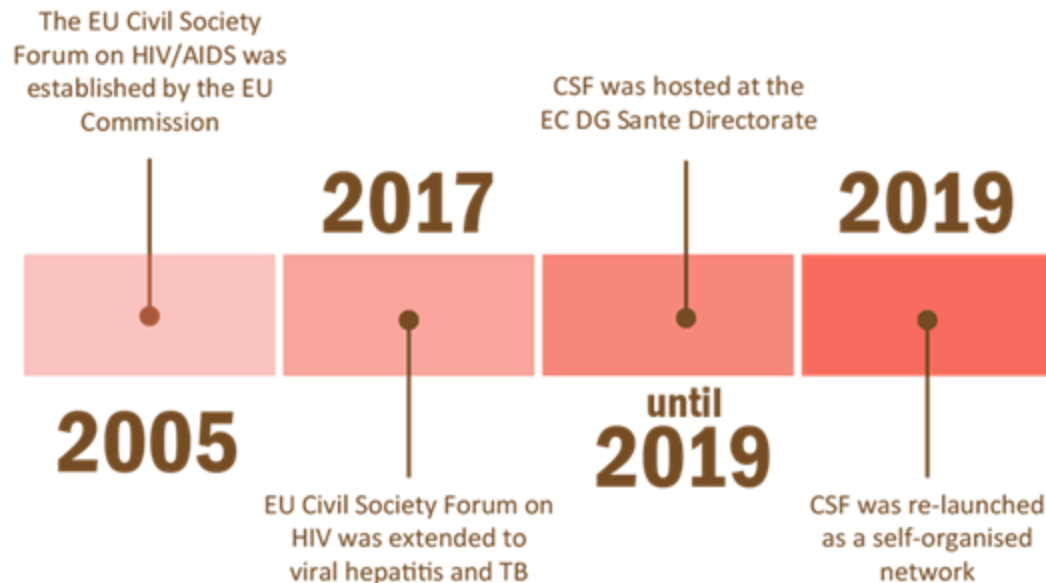
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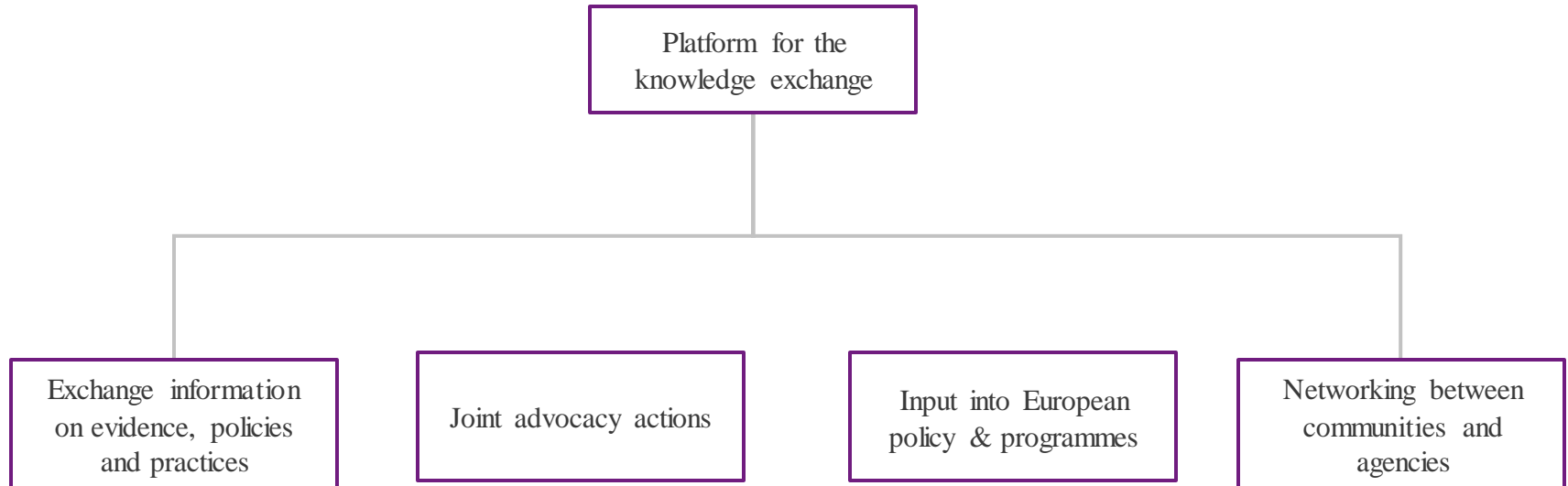


17 October, 2022

# EU Civil Society Forum on HIV, viral hepatitis and tuberculosis (CSF)



## Purpose



## Core Thematic Areas



**Affordability of and accessibility to medication and diagnostics**



**Community based voluntary counselling and testing**



**Health system strengthening**



**SRHR**

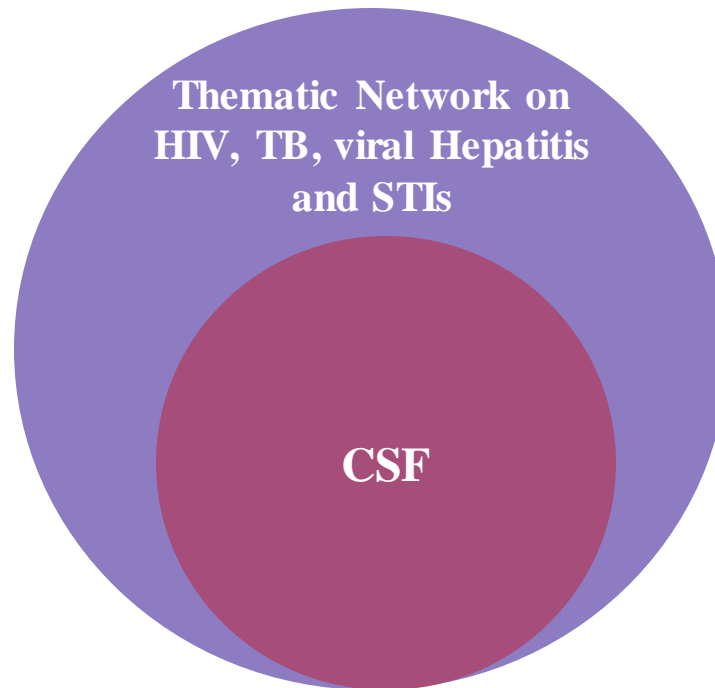


**Tackling legal barriers**



**Tackling stigma and discrimination**

**Civil Society Forum =>  
Thematic Network on HIV, TB, viral Hepatitis and STIs**



## Why are new plans needed?



REPRESENTS 1 MILLION PEOPLE

### Major public health burden



**2.6 million**

people live with HIV



**14 million**

people infected with the hepatitis B virus



**13 million**

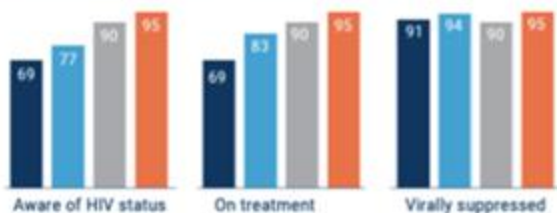
people chronically infected with the hepatitis C virus



**23 million**

cases of gonorrhoea, syphilis, chlamydia and trichomoniasis a year

### Insufficient progress



HIV 90-90-90 targets not met



Numbers of new HIV infections and the HIV-associated mortality rate rose in 2020

**50%**

of people have a late diagnosis; many people remain undiagnosed and untreated

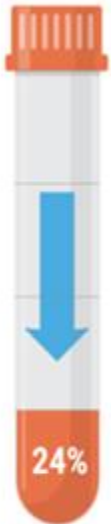


Persisting barriers for key populations: legal, stigma and discrimination

“HIV, viral hepatitis (VH) and STIs are increasingly becoming regionalized epidemics that are concentrated in key and vulnerable populations” (WHO Europe)

## New challenges and opportunities

### Impact of COVID-19



24% drop in HIV diagnoses

### Humanitarian crises



Risk of loss in progress against targets

### Innovative technologies and approaches



Agile systems for rapid uptake of innovations

*Renewed political and financial commitment needed to rebuild the disease response and urgently get back on track.*

Source: 2022–2030 Action Plans for ending HIV, viral hepatitis and STIs in the WHO European Region

# Why do we need a new TB action plan?



REPRESENTS 1 000 PEOPLE, DATA FROM 2020

## Major public health burden



**69 000**

estimated new cases of DR-TB



**29 000**

estimated people with TB/HIV coinfection



The European Region is home to 24% of the global burden of MDR-TB and 47% of the global burden of pre-XDR-TB

## Main challenges



Low DR-TB treatment success rate



TB/HIV coinfection rates are high and rising: 12% among new TB cases (2020)



Extremely slow uptake of TB preventive treatment: only 16% of target population enrolled



## New challenges and opportunities



COVID-19-related **disruptions** to TB services have led to decreases in TB case notifications



Impact of **humanitarian crises** on the continued provision of essential TB services and potential loss of progress



**New options** for TB prevention, screening, diagnosis, treatment and delivery of TB services

*Renewed political and financial commitment needed to reinvent the TB response and get back on track to reach regional and global targets*

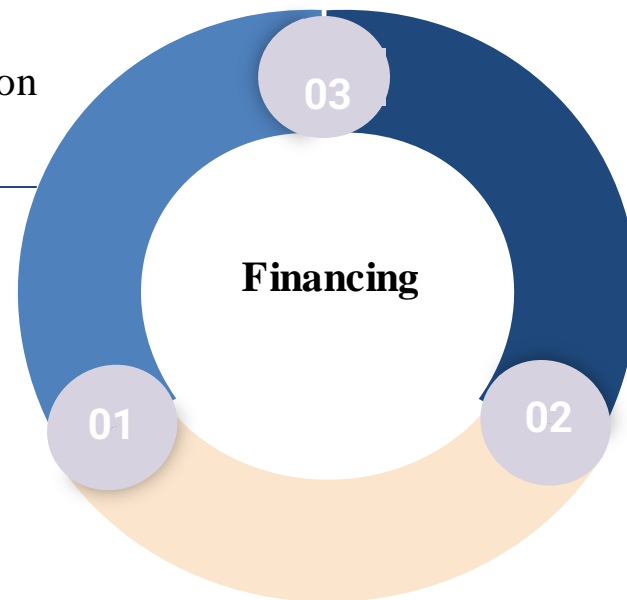
Source: WHO Regional Office for Europe (2022). [Tuberculosis action plan for the WHO European Region 2023–2030](#).

# Webinars and the Position Statement

## Thematic Areas

Eliminating stigma & discrimination, criminalisation of key populations

Availability and affordability of medicines for prevention & care



Improving healthcare (incl. cross-border) measures to ensure the continuity of prevention, treatment and care for HIV, VH and TB

## Stigma, discrimination and criminalisation of key populations

- Pushes people to the margins and hinders access/uptake of prevention, testing, treatment and care
- Stigmatisation of vulnerability in policy makers and healthcare providers, a barrier
- Prevents adoption of evidence based policies and programmes and pushes people away from services, contributes to late diagnosis and late linkage to care

### *To be discussed:*

- Monitoring of stigma and discrimination in general and in health care settings and actions to overcome it
- Supporting rights and evidence based legislation: from punitive towards supportive legal and policy frameworks
- Improve data collection to monitor prevention, treatment coverage and outcomes at local and sub-populations levels.



## Improving healthcare, including access for mobile, displaced population

- Reported problems with the access to opioid agonist therapy
- Very few OAT/ART sites close to the Ukrainian/ Polish border (Help Now Hub)
- Reported access challenges for refugees, mobile populations to relevant health services
- Shortages and stock outs of medical supplies
- vaccination

### *To be discussed:*

- Tools to improve standards of prevention and care and their implementation for HIV/AIDS, viral hepatitis, as well tuberculosis and other STIs
- Tools to ensure continuity of care
- Tools and solutions to prevent stock outs
- Emergency preparedness and crisis management

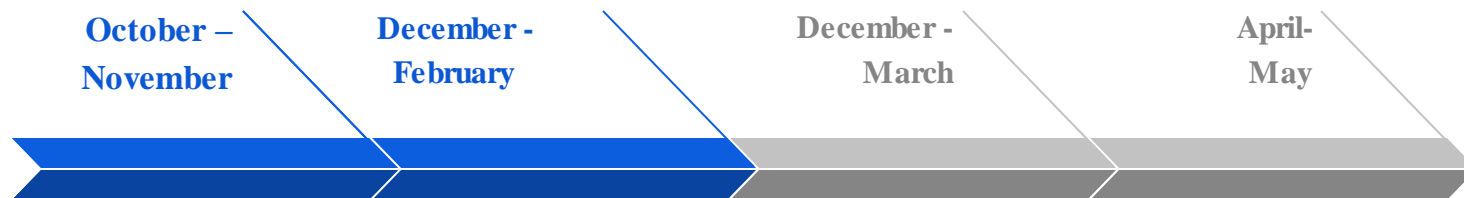


# Availability and affordability of medicines and diagnostics for prevention & care

- Lack of registration of certain medical tools
- Lack of up-to-date regulatory/policy frameworks (for using new tools and for decentralised delivery)
- Stigmatisation of vulnerability in policy makers and healthcare providers
- Delayed introduction and uptake of medical technologies
- Pricing



## Process and Timeframe



Reach out to CSF members & partners;  
Set up a Coordination Committee for webinars

3 Webinars

Draft, review and endorse the statement

Submit, present the statement to the HPP;  
Disseminate the statement

## Questions & Comments

## THANK YOU!

CSF webpage <https://www.csfhivheptb.eu/>

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