

# ECDC update to the Civil Society Forum

Teymur Noori

3 July 2020

# ECDC COVID-19 response



- PHE level 2 acute phase since 30 January
- Core team of around 40 technical experts and 15-20 support staff working full-time
- Almost all HIV/STI/Hepatitis/TB experts involved in the COVID response
- To date the work has involved almost every technical expert in ECDC at some point and in some capacity

>150+ Country requests

>100+ formal and >200+ informal European Commission requests

>600 tasks accomplished

>1000 media requests

# COVID-19 outputs on vulnerable groups

## LGBTI communities

- LGBTI people may be particularly vulnerable during the COVID-19 pandemic, both medically and socially
- People living with compromised immune systems, including those living with untreated HIV/AIDS, face an elevated risk of severe disease from COVID-19
- In addition, COVID-19 has led to the exacerbation of existing social inequalities that LGBTI individuals have already been contending with prior to the pandemic

### REPORT

### Guidance for EU/EEA

July 2020

of  
the United

Health and  
society

resents

symptoms

to

able above

disease,

cluster

- Dry or productive cough
- Sore throat
- Anosmia and ageusia or dysgeusia
- Shortness of breath

- Arthralgia (joint pain)
- Headache
- Fatigue

- Abdominal pain
- Vomiting
- Diarrhoea

The current evidence indicates that COVID-19 may be transmitted from person to person through several different routes. Although the contribution of each route is not clear yet, it is understood that transmission is mainly driven

Suggested citation: European Centre for Disease Prevention and Control. Infection prevention and control for COVID-19 in prisons – June 2020. ECDC: Stockholm; 2020.

© European Centre for Disease Prevention and Control, Stockholm, 2020

### TECHNICAL REPORT

### Guidance on the provision of support for medically and socially vulnerable populations in EU/EEA countries and the United Kingdom during the COVID-19 pandemic

#### Key messages

- The COVID-19 pandemic has had a huge and unprecedented impact on the EU/EEA and the UK, both in terms of morbidity and mortality, but also socially and economically.
- Some individuals are much more vulnerable than the rest of the population, whether to COVID-19 itself, insofar as they are at elevated risk of severe disease and death, or to the consequences of the public health measures that have been imposed in order to control the spread of the virus, which have exacerbated their already challenging life situations. These people could be described as medically or socially vulnerable, respectively.
- Many people have experienced both medical and social vulnerabilities during the COVID-19 pandemic, while others have faced a particularly extensive set of challenges due to their belonging to two or more recognised categories of social vulnerability. These challenges have included the need for targeted information, problems accessing services, de-prioritisation of routine services, stigma/discrimination, and legal as well as financial barriers.
- Civil society and other organisations have worked to provide essential services throughout the pandemic to support these people. An ECDC survey has identified a range of cross-cutting good practices that underpin the successes that have been achieved in spite of the considerable financial and logistical challenges faced. These include flexibility and an ability to adapt services to the emerging situation, thereby ensuring the continued provision of material and social support; creative use of online technologies; and a foundation for the work based in the principles of community engagement.
- National and regional authorities have facilitated civil society groups in many areas through provision of financial support; working to ensure good communication, collaboration and coordination with them; and facilitating a wider framework for action based on equity and human rights.
- However, coordination between civil society organisations and the authorities has not always been ideal, and there have also been cases where the rights of vulnerable populations have not been respected.
- The efforts of civil society support organisations over the course of the pandemic to date have been remarkable, but they may not be sustainable over the longer term, and they do not replace states' obligations to ensure access to care and support for people on their territory.
- Financial and political support from national and regional authorities along with collaborative efforts to coordinate and streamline services may be essential if the support organisations are to survive and continue to serve the most vulnerable populations in the EU/EEA.

Suggested citation: European Centre for Disease Prevention and Control. Guidance on infection prevention and control of coronavirus disease (COVID-19) in migrant and refugee reception and detention centres in the EU/EEA and the United Kingdom – June 2020. ECDC: Stockholm; 2020.

© European Centre for Disease Prevention and Control, Stockholm, 2020

# HIV update

# HIV Coordination Committee Meeting: 15-16 January 2020



HIV Coordination Committee Members		Observers	
<b>Andre Sasse</b>	Belgium	<b>Nikos Dedes</b>	European AIDS Treatment Group
<b>Susan Cowan</b>	Denmark	<b>Sanjay Bhagani</b>	European AIDS Clinical Society
<b>Kristi Ruutel</b>	Estonia	<b>Alison Brown</b>	ECDC Consultant
<b>Florence Lot</b>	France	<b>Nicole Seguy</b>	WHO Regional Office for Europe
<b>Barbara Gunsenheimer-Bartmeyer</b>	Germany	<b>José Zuniga</b>	International Association of Providers of AIDS Care
<b>Caroline Hurley</b>	Ireland	<b>Bertrand Audoin</b>	International Association of Providers of AIDS Care
<b>Anna Marzec-Bogusławska</b>	Poland	<b>Rimalda Voske</b>	EC DG SANTE
<b>Helena Cortes Martins</b>	Portugal		

# HIV Coordination Committee Meeting: 15-16 January 2020

- Updates on PrEP, modelling estimates, HIV drug resistance
- Fast Track Cities Initiative
- How to better collect and analyse data to capture the SDG 3 targets (HIV incidence, 90-90-90, mortality, stigma)
- ECDC-EMCDDA updated guidance on people who inject drugs
- European Standards of Care
- Surveillance standards
- Review of surveillance variables (no changes!)

# ECDC/WHO Euro HIV Surveillance/TESSy reporting

- Deadline 1<sup>st</sup> June
- Most countries have been able to collect and report 2019 data
- Report is planned for publication in late November
- No changes to 2020 variables (for 2021 reporting)

# Expert Panel meeting on PrEP: 12-13 February 2020



## ECDC operational guidance on PrEP implementation in the EU/EEA & the UK

1. Minimum standards and principles for PrEP service delivery in the EU/EEA
  2. A standardised monitoring tool for PrEP in the EU/EEA
- 'The Case' for PrEP
    - Tailored to senior, non-specialist stakeholders, addressing political, environmental, social, technological, legal, economic, epidemiological, cost/funding factors and framed within the context of the Sustainable Development and 90-90-90 targets
  - A template which can be used to collect case studies and identify service delivery models relevant to the European context





# Dublin Declaration monitoring

- Original deadline (31 March) postponed until 30 June
- Countries facing challenges to dedicate resources for reporting
- ECDC has reached out to both Dublin focal points and community organisations to encourage collaboration in reporting (i.e. Denmark, Italy)
- Expected outputs:
  - Continuum of care report
  - Evidence brief on PrEP
  - Evidence brief on progress toward reaching the SDGs
  - Evidence brief on combination prevention
  - COVID-19's impact on HIV (**TBD**)
- Dublin advisory group meeting October 2020 (virtual)

# ECDC HIV Network Meeting 18 June

- ECDC updated the network on ongoing ECDC activities
- Exchange country experiences on the impact of COVID-19 on HIV service delivery



HIV NETWORK MEETING

Update on HIV in the EU/EEA in the context of COVID-19  
18 June 2020  
Webex

**Aims of the meeting**

The main aims of the meeting are to:

- 1) provide an update on ECDC activities, with a focus on HIV
- 2) exchange country experiences on how the COVID-19 situation has affected HIV surveillance and service delivery

14:00	Welcome and introductions
14:05	Update on ECDC Activities on HIV
14:20	Remarks from WHO Regional Office for Europe
14:30	Country experiences <ul style="list-style-type: none"><li>• Bulgaria (Tonka Varleva)</li><li>• Belgium (André Sasse)</li><li>• Germany (Daniel Schmidt)</li><li>• Netherlands (Silke David)</li><li>• Comments from other participating countries</li></ul>
15:10	Reflections from Civil Society on COVID-19 and HIV services <ul style="list-style-type: none"><li>• Daniel Simões (GAT, Portugal)</li><li>• Ramón Espacio (Community Counselling Board to the National Plan on AIDS, Spain)</li></ul>
15:25	COVID-19 and PLHIV: European AIDS Clinical Society (Sanjay Bhagani)
15:35	Economic, Mental Health, HIV Prevention and HIV Treatment Impacts of COVID-19 and the COVID-19 response on a Global Sample of Cisgender Gay Men and Other MSM (Glen-Milo Santos, UCSF)
15:45	AOB and meeting closure


## Plans for 2021

- ECDC-WHO HIV Network meeting: Q1-Q2?
- European Standard of Care project (joint with EACS and others)
- PrEP guidance
- Country support- implementation of testing guidance
- Dublin reports

# Hepatitis update

# Hepatitis monitoring report 2020

Other sites: ECDC European Antibiotic Awareness Day ESCAIDE - Scientific conference Eurosurveillance journal EVIP - Vaccination portal

 **European Centre for Disease Prevention and Control**

Publications & data Tools

Monitoring the responses to hepatitis B and C epidemics in the EU/EEA Member States

## Policy briefs

- Prevention of Hepatitis B and C in the EU/EEA and the UK
- Progress toward the Sustainable Development Goals and Hepatitis B and C in the EU/EEA and the UK (manuscript – 28 July)

Monitoring the responses to hepatitis B and C epidemics in the EU/EEA Member States

European Economic Area (EEA) countries has been published by ECDC. The report represents a significant step towards the understanding of priority areas for action and gaps in the national responses to hepatitis B and C epidemics. Furthermore, the collated data provides an important baseline to help map progress towards the WHO elimination targets and the achievement of the 2030 Sustainable Development Goals (SDGs).

Developed in close collaboration with all 31 EU/EEA countries, the WHO Regional Office for Europe and many other partner organisations, the report 'Monitoring the responses to hepatitis B and C epidemics in the EU/EEA Member States' provides the first collation of data relating to the monitoring of the progress towards the elimination of hepatitis B and C for EU/EEA countries.

## Next steps

- Advisory group meeting October (virtual)
- New data call 1<sup>st</sup> Q 2021



 **ecdc**  
EUROPEAN CENTRE FOR  
DISEASE PREVENTION AND CONTROL

**Monitoring the responses to hepatitis B and C epidemics in the EU/EEA Member States**

**2019**

www.ecdc.europa.eu

**Thank you!**