



Joint Action on integrating prevention, testing and linkage to care strategies across HIV, viral hepatitis, TB and STIs in Europe

Newsletter

Issue 02, November 2018

Welcome to the INTEGRATE Newsletter

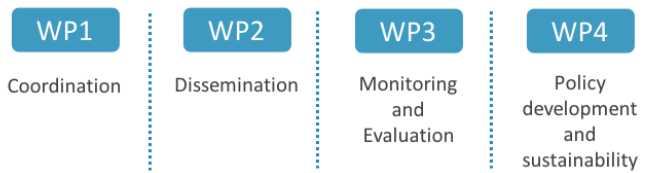
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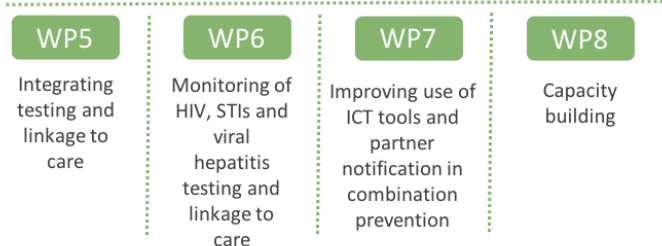
The INTEGRATE Joint Action aims to implement integrated activities to improve the awareness, prevention, early diagnosis and linkage to care of HIV (Human Immunodeficiency Virus), Viral hepatitis, TB (Tuberculosis) and STIs (Sexually Transmitted Infections) in Europe.

The four disease areas share common social and health determinants affecting the same vulnerable populations, are treatable and create unnecessary suffering of patients. INTEGRATE aspires to implement a multidimensional approach that will reduce the public health burden and determine the optimal profile of interventions to be implemented.

Four Horizontal Work Packages



Four Core Work Packages



Objectives

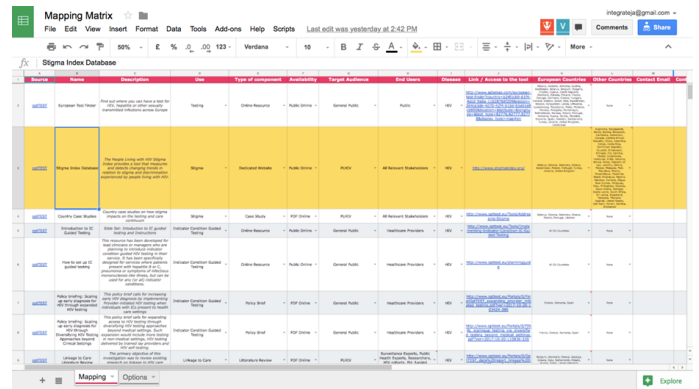
- ▲ Support collaborative implementation of the Joint Action activities through timely reporting, dissemination and evaluation.
- ▲ Support national institutions in reviewing and revising policies and action plans to include integrated activities related to early diagnosis & prevention of the four diseases.
- ▲ Improve the monitoring & evaluation of these activities and assist in the integration of data into national surveillance and M&E (Monitoring & Evaluation) systems.
- ▲ Improve the use of ICT (Information and Communication Technologies) tools and partner notification for prevention by 2020.
- ▲ Ensure better preparedness of healthcare professionals, civil society organizations and public health institutions through training and knowledge sharing on the integration of diagnosis and linkage to care for HIV, viral hepatitis, TB and STIs.



Progress on INTEGRATE Dissemination

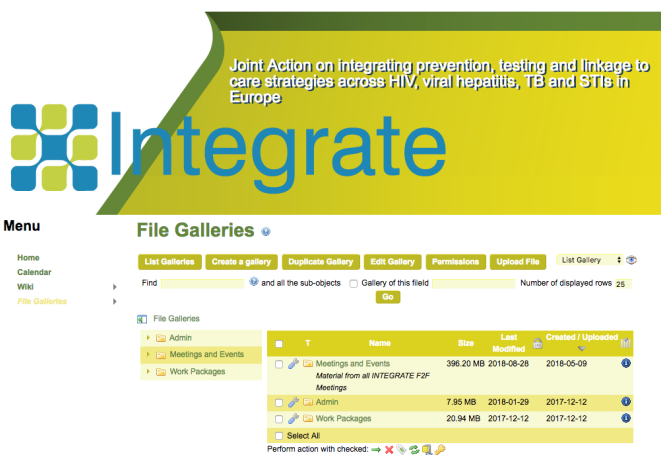
During the first year of the JA, the visual identity of INTEGRATE was determined (logo, colour scheme and official JA document templates). A detailed communication and dissemination plan was laid out to ensure high visibility and impact for the JA. Its implementation started on time, with the development of a complete communication and dissemination package that included the INTEGRATE website, the JA leaflet and Social Media presence, namely on [Twitter](#), [Facebook](#) and [LinkedIn](#). The INTEGRATE Joint Action also joined several important dissemination and discussion platforms such as the [EU Health Policy Platform](#) and [CHAFEA](#).

A secure knowledge management structure was created to be used as a round table for collaboration among the JA Consortium. This structure, in the form of an Internal Portal, features file and schedule sharing tools that integrate and map the work efforts of the JA.



The next steps for WP2 include the periodic update of the dissemination strategy, the constant updates of the Website and an active engagement on Social Media with the participation of all Consortium members and affiliated stakeholders.





The Knowledge Mapping Matrix was developed to consolidate available tools and existing knowledge components that focus on the implementation of prevention, testing and linkage to care in the context of HIV, viral Hepatitis, TB and STIs. It is a live document where all entries have been evaluated by the Steering Committee through certain quality metrics. The data sources for this matrix are mainly relevant EU projects and Joint Actions (HepCare EUROPE, HIV in Europe, Euro HIV EDAT, HA-REACT, E-DETECT, ESTICOM, optTEST, etc.) as well as relevant work mapped by EU agencies, network and relevant organisations (WHO, UNAIDS, ECDC, EMCDDA, CHAFEA, EATG, etc). This matrix was later extended to accommodate the specific needs of WP5 and WP7 mapping activities.

During the second year, WP2 will also focus on scientific publications in highly ranked, open access journals as well as on the presentation of the JA's results in scientific conferences. To this end, INTEGRATE is organizing a multi-stakeholder conference that will be held in the context of the HepHIV 2019 Conference in Romania. See [page 13](#) for more details.

Overall, WP2 shall be a valuable tool in promoting the activities of the pilots to come and in communicating the impact of the INTEGRATE efforts.



Progress on Policy Development and Sustainability

The current focus of INTEGRATE regarding policy development and sustainability (WP4) was the definition of a comprehensive **Sustainability Plan**. The general aim of the plan is to assess each Country context, to provide a description of the deliverables that should become part of an integration process in each Country's health policies/system, and to provide information useful for the construction of a Roadmap aiming at a concrete inclusion of INTEGRATE results in the national policies/systems.

In particular, the Sustainability Plan of INTEGRATE aims at:

- Providing appropriate policy guidance and ensure the sustainability of the activities in selected countries, building on existing policy processes, identifying barriers and possible ways to overcome them.
- Identifying, through a stakeholders consultation, key actors (institutions and bodies) responsible for health policy planning, existing strategies and ongoing policy developments relevant for national HIV, hepatitis, STIs and TB.
- Allowing more effective national level advocacy through an overview of the cost-effectiveness of piloted activities based on existing studies and publications.



A first draft of the sustainability plan for the Joint Action has been developed. Country profiles and information gathered through the stakeholder consultation in each country have been analysed to make recommendation for the definition and implementation of a roadmap for the integration of the pilot activities into national systems/policies.

In addition, part of WP4 work concerns the development of a cost-effectiveness overview. The overview will summarize cost-effectiveness studies identified in the literature of direct relevance to INTEGRATE topics of work and pilot activities. These include:

- Indicator condition-guided HIV testing and improvement of routine testing for viral hepatitis in health care settings.
- Supporting adequate linkage to care systems for self-testers.
- Integration of testing and linkage to care data into national M&E and surveillance systems, including community, GP and home/self-testing data.

The review will describe which INTEGRATE JA work areas and pilot activities are covered by the identified cost-effectiveness analyses and which specific results and conclusions from the identified cost-effectiveness analyses can inform INTEGRATE JA's work and pilot activities and the related policy process.

WP4 also conducts a patient experience survey: the template protocol for the patient experience survey has been finalised and the content of the HIV and HCV questionnaires has been drafted. The 4 pilot organisations involved have been engaged in the process with regard to their role, logistics and the necessary ethics procedures to recruit, in each of the settings including requirements for translations, written informed consent, use of incentives, etc.



Progress on Integrating Testing and Linkage to Care

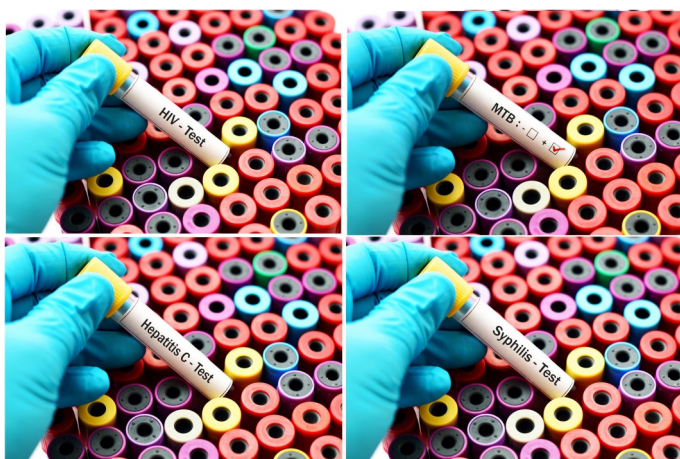
5.1 Integrated testing Pilots

Integrated HIV-hepatitis testing during SPRING European testing Week

This work stream focused on enhancing integrated testing and has 11 partners of which some will subcontract additional testing sites.

The first pilot activity focused on integrated hepatitis and HIV testing, and 5 INTEGRATE partners and 2 collaborating stakeholders participated in the Pilot Spring Testing organized jointly by HIV in Europe, ELPA and INTEGRATE in May 2018. The main aim was to assess the feasibility and sustainability of conducting 2 testing weeks in a year and to increase combined HIV-Hepatitis testing among key populations, raise awareness and increase testing rates. The pilot sites were 5 NGOs/CSOs and 2 medical services – and all conducted testing activities and awareness raising to increase testing rates (social media, pamphlets, work-shops and conferences). Overall, the spring pilot testing week was a success, with most of the participating organisations conducting combined HIV-hepatitis testing at their various sites. An overall evaluation of the SPRING testing week and a specific report on the INTEGRATE partners' activities have been drafted.

For the next pilot activities, the first step is to develop an audit tool (online survey) for detailed baseline data on actual testing conducted by partners, then conduct audit as part of the pilot focusing on enhancing integrated testing.



5.2 Health care setting Integrated testing Pilots

The three pilot sites will conduct the following integrated testing activities:

- VULSK (Lithuania): STI department – STI-HIV testing

- CHIDPVB (Romania): TB hospital – TB-HIV testing
- IDIBAPS (Spain): GP settings - HIV IC guided testing

VULSK has started the STI-HIV Integrated testing and is reporting data in the online system. CHIDPVB has started testing in October. IDIBAPS is processing the proposal for internal approval. The aim is that all sites conduct the testing during 12 months with 2-3 interventions for staff throughout the period to enhance and increase testing activities and keep staff motivated.

VULSK (Lithuania) and CHIDPVB (Romania) will also conduct a national specialty guidelines' review (WP4). This process has been started and all guidelines identified. The actual review of identified guidelines is ongoing.

5.3 - Self-testing Pilots

Based on analysis of current evidence on self-testing/sampling, this work stream will develop a toolkit for the pilot partners to test. Suggested focus areas of the toolkit are:

- Be a place to debate the relative merits of self-testing versus self-sampling programmes: whether both pro-programmes are needed running in parallel, and to define contexts where each can be best applied
- Provide practical advice on ways to monitor self-testing/sampling in places where due to limited resources or legislation, tests are only sold privately (e.g. online or in pharmacies)
- How to overcome specific barriers for example, to remove legal restrictions on non-healthcare provider testing.

Practical ideas for where the toolkit could have an impact included updating Sexual and Reproductive Health training and education programmes to ensure young people are educated about self-testing/sampling.

The toolkit is being developed and the plan is to pilot test in spring 2019.

Pilot partners:

- NVSPL (Lithuania)
- LILA (Italy)
- ARCHIGAY (Italy)
- UCD (Ireland)



Progress on Monitoring and Evaluation of HIV, viral hepatitis and STIs testing and linkage to care

Objective 1

We are working on a proposal of indicators for the evaluation of the impact of European Testing Week (ETW). The indicators selected will be tested in the pilots.



Objective 2

The draft report of data collection on HIV, viral hepatitis and STI testing and linkage to care at national level in European countries is almost finished, and data from the Dublin Declaration 2018 are included.

This report aims to identify existing tools, methods and processes which facilitate integration of testing and linkage to care data on HIV, viral hepatitis and STIs into national surveillance and monitoring and evaluation systems.

The sources of information were: a desk review of key reports and projects, the survey of INTEGRATE partners, and the Dublin Declaration Monitoring 2018.

The survey and desk review indicate that reporting of HIV testing in Europe is more comprehensive than reporting of testing for other diseases. The INTEGRATE partner baseline survey finds that 7 out of 16 responding countries have national surveillance systems which collect data from Community settings, 6 of those use standardised indicators and reporting frequency varies from monthly to annually.

A range of European projects/initiatives promote standardised data collection in community settings (COBATEST Network, OptTest and European Testing Week), a standardised minimum set of indicators for testing (2016 ECDC-convened expert consultation on HIV testing data collection) and a standardised definition of linkage to care (OptTest).

Dublin Declaration Monitoring reports the most common indicator relating to linkage to care is "average time between reactive HIV test and first contact with care" (20 of 31 EU/EEA countries). Completeness and quality of testing data vary across Europe but there are initiatives that are working to standardise the processes and indicators.

Next Steps

A meeting is planned in November between WP6 partners, the stakeholders in each country where a pilot will be implemented and representatives from European Centre for Disease Prevention and Control (ECDC). The aim of the meeting is to plan the implementation of the pilots in each

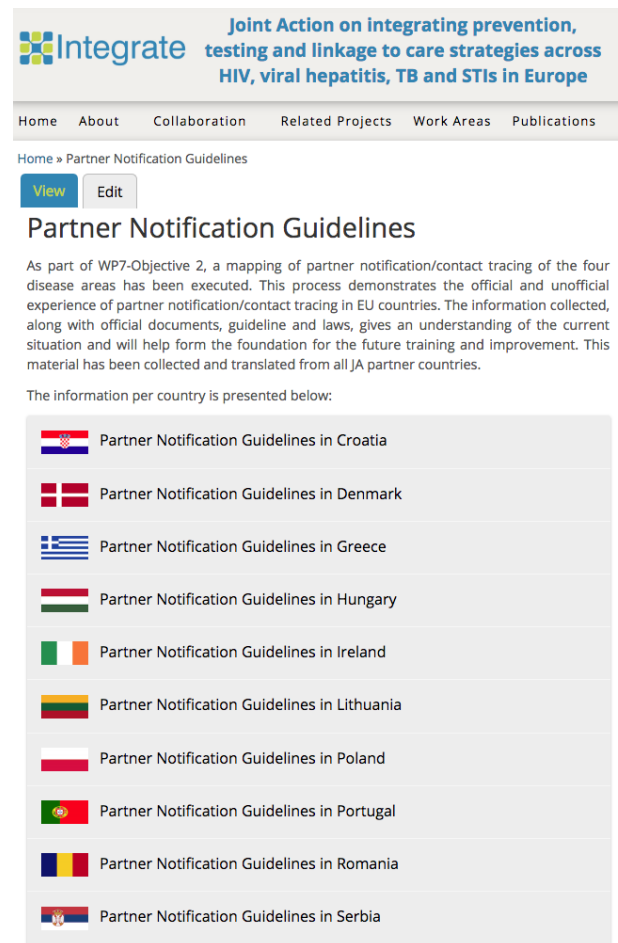


Progress on Improving the Use of ICT tools and Partner Notification in Combination Prevention (1/2)

A desk review of available ICT tools for combination prevention was completed and the most relevant and interesting apps and websites were compiled in a "mapping matrix" that was submitted to the Steering Committee and the Advisory Board members for their evaluation and rating. Quite a few of the ICT tools received a high score and seven of them were shortlisted: some of their features have become the components of the proposed INTEGRATE ICT tool, which is under development. The landing page of the new INTEGRATE ICT tool will very likely display icons leading to the following components: a risk calculator, a test locator linked to the Test Finder, an anonymous partner notification tool and a Q&A menu to address doubts and queries concerning the cause of infections, transmission routes, prevention measures, available treatments; all these components will encompass HIV, STIs and hepatitis. In addition, the INTEGRATE ICT tool will provide a special section on PrEP and a specific component dedicated to TB, since TB cannot be as easily combined with the other three disease areas, but it is nevertheless very important to integrate it in the scope of INTEGRATE.

The collected information, along with official documents, guideline and laws, provides an understanding of the current situation and will help set the foundation for the future training and improvement.

Additionally, guidelines, documents and legal requirements for partner notification / contact tracing have been collected and translated from all INTEGRATE partner countries. These documents are currently being arranged on a publicly accessible online repository, available through the INTEGRATE Website.



A Review	Name	Use	End Users	Disease	Adaptable	Reproducible	Data	Relevance
CH10	Chemsex care plan	Counseling, Harm	MSM		5	5	5	5
LC11	Know Your Health	Testing - Linkage to	Youth	HIV	1	4	0	0
LC12	HIV Testing Sites & Care	Testing, Treatment	Key Populations	HIV	1	5	0	0
PN1	CheckOut	Partner Notification	Healthcare providers, Civil society	HIV, hepatitis	5	4	5	5
PN2	SKT	Partner Notification	Healthcare providers, Civil society	HIV, hepatitis	0	2	4	4
PN3	Man to Man	Partner Notification	Healthcare providers, Civil society	HIV, hepatitis	3	5	3	3
PN4	InSpot	Partner Notification	Public	HIV, STIs	4	5	4	4
PN5	So They Can Know	Partner Notification	Public	HIV, STIs	N/A	N/A	N/A	N/A
PN6	Let Them Know	Partner Notification	Public	STIs	5	5	4	4
PN7	Don't Spread It	Partner Notification	Public	STIs	5	5	4	4
PN8	inSPOTLA	Partner Notification	MSM, Public	STIs	N/A	N/A	N/A	N/A
PREP1	PrEP in Europe	Prevention	Healthcare providers, Civil society	HIV	5	5	5	5
PREP2	PrEP Locator	Prevention	MSM	HIV	5	5	0	0
PREP3	PrEP Facts: Rethinking	Prevention	MSM, Supporting Organisations,	HIV	5	5	5	5
PREP4	PrEP in Europe	Prevention	MSM, Supporting Organisations,	HIV	5	5	5	5
PRV1	Hornet Health Starter Kit	Combination	MSM, Public	HIV, hepatitis,	5	5	2	2
PRV2	Six Dean Street Let's Get	Combination	MSM	HIV	5	5	5	5
PRV3	The sex you want	Combination	MSM	HIV, hepatitis,	5	5	5	5
PRV4	Slovenian "What you are	Combination	MSM	HIV, hepatitis,	5	5	3	3
PRV5	German "I know what I	Combination	MSM	HIV, hepatitis,	5	5	3	3
PRV6	Men Only Tayvise	Combination	MSM	STIs	5	5	3	3
PRV7	Mobile app for PrEP	Combination	MSM	HIV, STIs	1	5	0	0
PRV8	HIV Risk Meter	Combination	Key Populations, Public	HIV, STIs	2	3	3	3
PRV9	HIV Risk Reduction Tool	Prevention	Public	HIV	4	4	4	4
PRV10	I want PrEP Now	Prevention	Public	HIV	3	5	3	3

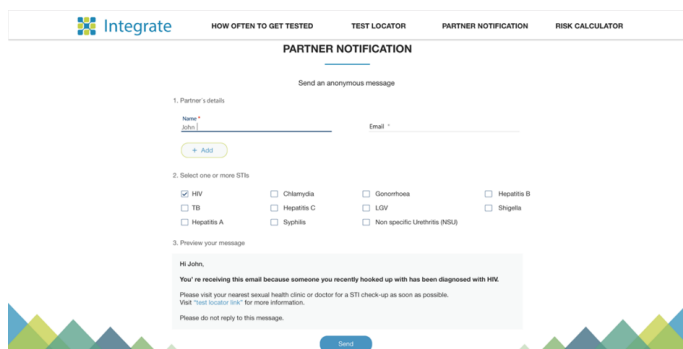
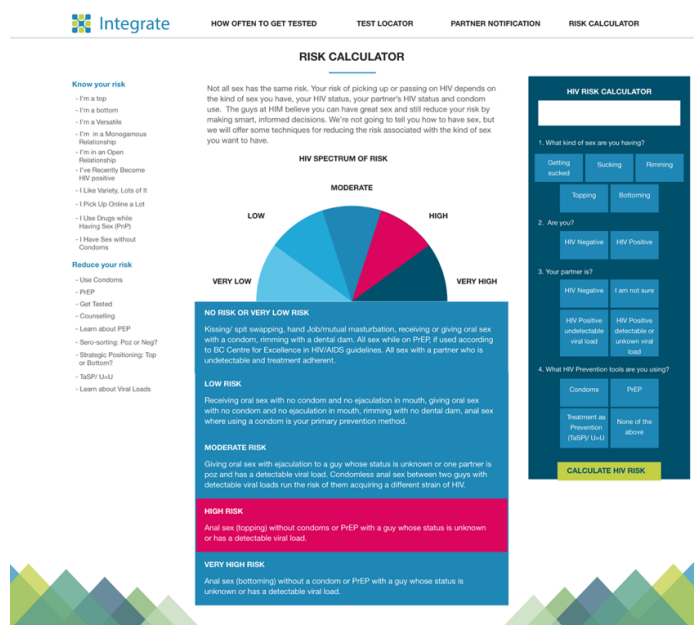
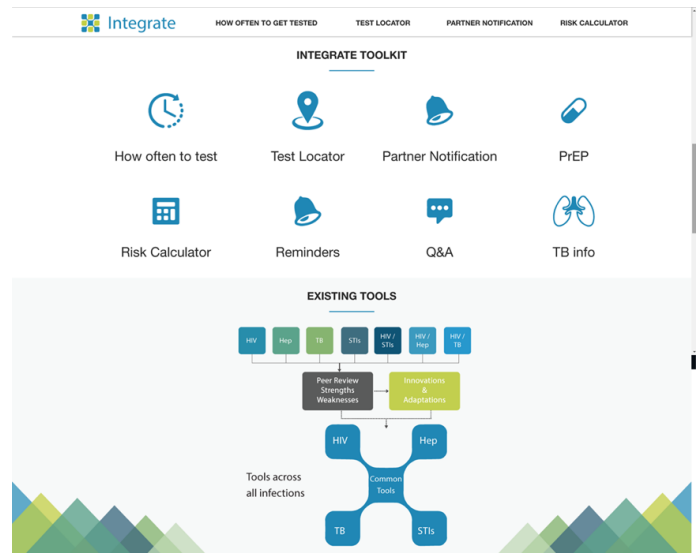
The mapping of partner notification / contact tracing of the four disease areas is completed. This mapping process demonstrates the official and unofficial experience of partner notification / contact tracing in the INTEGRATE pilot study countries (Ireland, Italy, Greece and Romania).



Progress on Improving the Use of ICT tools and Partner Notification in Combination Prevention (2/2)

As part of year 2, activities will concentrate on the technical development of the INTEGRATE ICT tool, and its adaptation and translation into the languages of the countries where it will be piloted, i.e. Croatia, Italy and Lithuania. At the same time, partners involved in the pilots will work on the preparation of promotional activities specifically addressed to the different target groups, in order to spread the news about the new tool and make it appealing for users. Pilots are planned to start in the last part of year 2.

Planning for the partner notification pilot study is underway. Thanks to feedback from partners, stakeholders and experts, the pilot has been refocused to address partner notification training needs for healthcare workers, the creation of standard operating procedures for partner notification and understanding the legal context of partner notification for each setting. This training workshop seeks to impart confidence and awareness to healthcare workers on the process and importance of partner notification in an aim to improve outcomes. Additionally, the workshop will include time to modify the training and SOP for different country contexts for improved use in the future. Following completion of the pilot, the technical report on partner notification will be revised and completed for different disease areas, populations, and settings.



Three regional workshops are planned to implement capacity building of JA partners and national stakeholders (CSOs, health care professionals, public health care agencies, etc.).

Training topics have been identified among the main topics from the core Work packages and through the partner baseline survey and then, agreed with Work package leaders, the Steering Committee and the Advisory Board during the Steering Committee meeting in Amsterdam in July, 2018.

The workshop will run over two days and have two sections: 1) a Regional Workshop for JA partners and 2) a National Stakeholder meeting. The aim of the Regional Workshop is to provide JA partners with knowledge and practical skills on selected topics to be used for sharing among colleagues and relevant stakeholders at national level. The aim of the National Stakeholder meeting to be held on the second day is to bring different relevant national stakeholders and authorities together to discuss the respective topic in depth according to the specific needs and priorities of the hosting JA partner country.

The focus of the 3 Workshops (and the links with INTEGRATE activities) is as follows:

1. **Community testing/integration of testing (Poland, June 2019)**

Topics:

- How to implement/improve integrated testing in community settings (focus on eastern Europe/low prevalence countries) (WP5)

2. **Home/self-testing and linked to care & ICT-based combination prevention (Italy, tentative November 2019)**

Topics:

- How to implement home/self-testing (WP5)
- How to use ICT tools in prevention (WP7)

3. **Monitoring, Indicators and surveillance (Estonia, February/March 2020)**

Topics:

- Monitoring of linkage to care (WP6)
- Integration of data collection from various testing services into national M&E and surveillance, (WP6)
- Use of identifier (WP5, WP6)

Closer consultations are now ongoing with the leaders of WP4 and WP5 to define the agenda of the first workshop in Poland, as well as the selection of facilitators and experts from JA partner organizations and external organizations.

Progress on Monitoring & Evaluation Activities

The first year's highlight of the activity performed by the partners involved in the Monitoring and Evaluation Work package (WP3) is no doubt, the first year's internal evaluation.

As it is to be expected in such large-scale, complex actions there is always an adjustment period at the start of the project and evaluating the level of achievement of the final aims and objectives is not realistic. Therefore, current evaluation activities focused on the progress, process and implementation of the Joint Action to date, aiming to identify areas for improvement and generate practical recommendations for adjustments to ways of working and calibrate future work to align with the Joint Action's overall aims.

A review was conducted in August 2018 by a two-person team from Public Health England, UK (PHE) and "Marius Nasta" Pneumophtisiology Institute, RO (IPMN). Data was collected through semi-structured interviews, progress (RAG) reporting and a partner survey. While the findings of the first Evaluation Report are confidential (only for the members of the consortium including the Commission Services), it is important to state that overall, project implementation is broadly on track although there is variation in Work packages, project milestones and deliverables having been achieved in most cases. The most awaited part of the report is the Recommendations section which translated the findings into means to improve the activities across all work packages, all partners and disease areas. The recommendations included in the report will be analysed and be subject to the approval of the Steering Committee and subsequently turned into concrete, practical measures. The Evaluation Report will be presented at the Partnership Forum meeting in Bucharest in January 2019. Next year's Internal Evaluation report will measure the feasibility and impact of these recommendations.



News & Events 1/3

INTEGRATE Steering Committee Meeting in Amsterdam, July 24, 2018

A Steering Committee (SC) meeting was held in conjunction with AIDS 2018. The meeting had great participation from SC members and many Advisory Board members, who had been all invited. Work Package leaders gave a short update on the respective activities, and both SC members and Advisory Board members participated very actively in the fruitful discussions. The technical input from the Advisory Board members was of great value for the continuous work in the work packages.

Among the discussed topics were the process and methods of the first internal evaluation.

Progress regarding the review of existing ICT tools and the ranking of most relevant tools (WP7) was also discussed. The suggestion to develop an “integrated app” (web-based and/or smartphone-based) encompassing different functions for key populations in terms of combination prevention was presented. There was great engagement in this topic and it was agreed to discuss this further with Advisory Board members and the INTEGRATE Consortium. Finally, an update on the planning of the regional workshops was given (WP8).

Minutes from the meeting and other SC meetings can be found on the Internal Portal for INTEGRATE members.



An overview of the progress regarding self-testing and the respective pilots (WP5) was provided and a constructive discussion followed on how best to address this rapidly evolving area unfolded. An overview of the identified good practices on testing data integration in European countries was provided (WP6), and the participants provided suggestions and comments for the next steps.



News & Events 2/3

INTEGRATE Satellite Symposium, Amsterdam, July 24, 2018

INTEGRATE organized a Satellite Symposium in conjunction with AIDS 2018, entitled “HIV and co-infections in at-risk populations addressing cross-border treatment needs and ensuring earlier diagnosis for migrants, the homeless, prisoners and other vulnerable populations”

Elena Vovc, from the WHO Regional office for Europe, addressed opportunities and challenges for Eastern Europe and Central Asian countries. This was followed by lessons learned on HCV testing and treatment among key risk groups, including drug users and homeless, through outreach to the community and integration of primary and secondary care services through HepCARE by Jack Lambert. Finally, Gerard de Vries presented outcomes from E-DETECT TB focusing on their transferability to Eastern Europe of find and treat models developed in Netherlands and UK.



HIV AND CO-INFECTIONS IN AT-RISK POPULATIONS
 ADDRESSING CROSS-BORDER TREATMENT NEEDS AND ENSURING EARLIER DIAGNOSIS FOR MIGRANTS, THE HOMELESS, PRISONERS AND OTHER VULNERABLE POPULATIONS

THE SATELLITE SESSION FOCUSES ON:

- Integrated testing approaches that reach vulnerable populations at risk for infection with HIV, viral hepatitis, TB and STIs and lessons learned from EU funded initiatives to research the barriers and facilitators.
- Patients with multiple infectious diseases that needs to be addressed as part of integrated care.
- Models of care that have been successfully developed resulting in integrated testing, evaluation, treatment and cures in identified vulnerable populations.

TIME AND VENUE:
 18:30-20:30h,
 25 July 2018
 RAI Amsterdam,
 Room: Forum

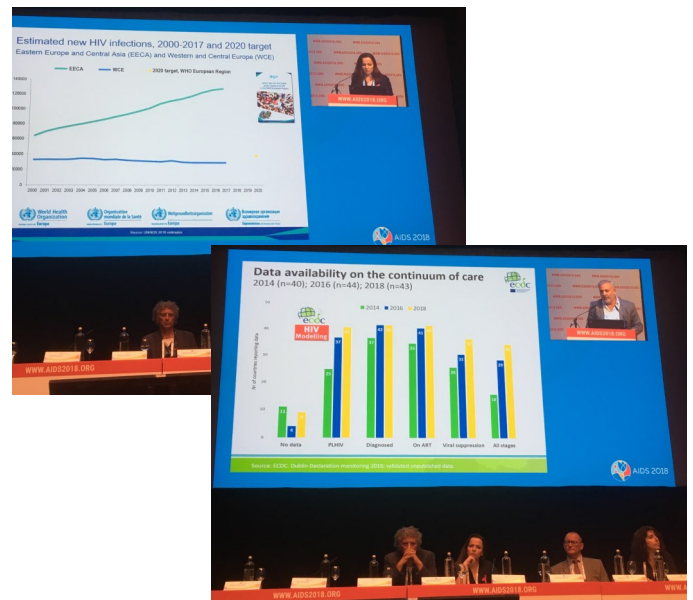
The satellite session focused on:

- integrated testing approaches that reach vulnerable populations at risk for infection with HIV, viral hepatitis, TB and STIs and lessons learned from EU-funded initiatives to research the barriers and facilitators;
- patients with multiple infectious diseases that need to be addressed as part of integrated care; and
- care models that have been successfully developed resulting in integrated testing, evaluation, treatment and cures in identified vulnerable populations.

After the welcome and introduction to the INTEGRATE Joint Action, a series of presentations were given. The new EU Policy framework, presenting the Staff Working Document 2018 was introduced by Jean Luc Sion, Representative of the European Commission (DG-SANTÉ). This

was followed by a presentation by Andrew Amato, from the European Centre for Disease Prevention and Control (ECDC) on monitoring

the continuum of care and testing in Europe.



This was followed by a panel discussion on risk groups and co-infections with focus on prevention, linkage to care, and shared care models for care. The discussion addressed transferability of tools on testing and linkage to care across diseases and the experienced challenges and opportunities, as well as the issue of how to use data in program implementation.



News & Events 3/3

INTEGRATE meeting in Croatia

An INTEGRATE Work Package meeting was held in Zagreb, in Croatia 2-3-4 May 2018 at the Croatian Institute of Public Health, Zagreb .



It was for Partners engaged in pilot activities and the main focus was the discussions and planning of the pilots, identification of possibilities and challenges and decisions -making on actions and next steps.

Participants presented their work on topics related to testing (WP5, WP6) and WP4 Patient Experience Survey, external experts, Advisory Board Members and European Testing Week Working Group Members.



INTEGRATE presentation at the Conference on screening and prevention of viral hepatitis and HIV in CEE in Sofia, Bulgaria

INTEGRATE was presented by Jordi Cassabona (CEEISCAT) at a Conference entitled: "Screening and prevention of viral hepatitis and HIV in Central and Eastern Europe - Common Challenges, Joint Solutions", that took place in Sofia, Bulgaria on June 28-29, 2018.

INTEGRATE presented at the 49th Union World Conference on Lung Health

Dr. Grecu Victor Ionel from CHIDPVB presented INTEGRATE at the 49th Union World Conference on Lung Health that is taking place in October 24-27, 2018, in the Haag (NL).



Article on Partner Notification on Sexual Health News - HSE Ireland

Shannon Glaspy (UCD) wrote an [article](#) entitled "The Need to Improve Partner Notification in Ireland" that was published in the 6th issue of Sexual Health News from [Health Service Executive Ireland](#). In this article,

INTEGRATE was presented with a special reference to the Action's efforts on mapping various partner notification strategies and tools across EU areas, aiming to create an applicable resource for health providers to navigate partner notification.



Call for Participation in the HepHIV 2019 Conference



The HepHIV 2019 Bucharest Conference: “Challenges of Timely and Integrated Testing and Care” will take place on January 28-30, 2019, in Bucharest, Romania. HepHIV 2019 aims to provide an environment in which researchers, clinicians, civil society and policy makers from Europe meet to address challenges of timely and integrated testing and care within viral hepatitis and HIV.

The main objectives of the HepHIV 2019 are to:

- Provide an overview of innovative initiatives and best practices on optimal testing and earlier care for HIV and viral hepatitis from different settings across Europe, including progress and challenges in the integration of services.
- Provide opportunities for multi-stakeholder dialogue to develop creative solutions to unresolved challenges in research and implementation of HIV and viral hepatitis, TB and STI policies and programmes to improve early diagnosis and care.
- Sustain and fuel the political discussion of testing policies, increase political commitment and public awareness by discussing how to translate global and regional goals, objectives and targets into local implementation plans.

The conference will end with a call to action that will address implications for policy and implementation agendas in the field of earlier and integrated testing and will follow up on the HepHIV 2017 conference [call to action](#).

More information about HepHIV2019 is available in this [link](#), while the tentative scientific program can be found [here](#).

The conference will end with a call to action that will address implications for policy and implementation agendas in the in this [link](#), while the tentative scientific program can be found [here](#).



Monday 28 January 2019

Side meetings 9:00-16:30

Time		
9:00-16:30	INTEGRATE Partnership Forum Meeting. Room: Enescu 1	All INTEGRATE partners + AB members
15:30-16:30	Press Conference. Room: Regina Maria 2	
12:30-19:30	Registration open	
Time	Room: Le Diplomate	Moderators and speakers
OPENING SESSION		
17:00-19:00	Objectives: <ul style="list-style-type: none"> • Provide an overview of the need for and work towards integration of testing of infectious diseases in Europe • Introduce the policy framework in Romania and Europe 	Moderators: TBD
	Welcome: conference objectives and overview	Conference Chairs: Jürgen Rockstroh, Daniel Simões, Adrian Streinu-Cercel
	The situation of blood-borne viruses in Romania: recent trends and testing initiatives	Minister of Health Romania, Hon. Sorina Pintea (TBC)
	European Commission policy of integration of infectious diseases	Vytens Andriukaitis, European Commissioner for Health and Food Safety (Confirmed by video)
	HIV and HCV trends in the EU	Andrew Amato, ECDC
	WHO welcome remarks: the targets in the European Region	Masoud Dara on behalf of Regional Director Zuzanna Jakab, WHO Regional Office for Europe
	European Community Perspective on stigma as a continued barrier to testing for Hep/HIV	Sini Pasanen, Civil Society Forum
	The HIV in Europe initiative – past, present and future	Brian Gazzard, Chelsea and Westminster Hospital



Consortium

Croatia

 Hrvatski zavod za javno zdravstvo
Croatian Institute of Public Health

Hrvatski zavod za javno zdravstvo Croatian Institute of Public Health

 LET
Life Quality Improvement Organisation "FLIGHT"

Life Quality Improvement Organisation "FLIGHT"

 HUHIV
Croatian association for HIV and viral hepatitis

Croatian association for HIV and viral hepatitis

 ISKORAK

ISKORAK

 Denmark
chip
Centre of Excellence in Health, Immunity and Infections

Region Hovedstaden / CHIP

 Estonia
Tervise Arengu Instituut
National Institute for Health Development

Tervise Arengu Instituut
National Institute for Health Development

 Greece
CERTH
Centre for Research & Technology Hellas,
Institute of Applied Biosciences, Information Technologies Institute

Centre for Research & Technology Hellas,
Institute of Applied Biosciences, Information Technologies Institute

 HCCDC
Hellenic Center for Disease Control & Prevention
Ministry of Health

Hellenic Center for Disease Control & Prevention

Hungary



Semmelweis University

Ireland



University College Dublin,
National University of Dublin, Ireland

Italy

 ARCI GAY
Arcigay Associazione LGBTI Italiana

Arcigay Associazione LGBTI Italiana



Croce Rossa Italiana

 Lega Italiana per la Lotta contro l'AIDS
Fondazione LILA Milano ONLUS - Lega Italiana per la Lotta contro l'AIDS

Fondazione LILA Milano ONLUS -
Lega Italiana per la Lotta contro l'AIDS

 Fondazione Villa Maraini
Fondazione Villa Maraini Onlus

Fondazione Villa Maraini Onlus

Lithuania

 NVSPL
Nacionalinė visuomenės sveikatos priežiūros laboratorija

National Public Health Surveillance Laboratory

 REPUBLICAN CENTRE FOR ADDICTIVE DISORDERS

Republican Centre for Addictive Disorders

 UIAC
Užkrečiamųjų ligų ir AIDS centras

Centre for Communicable Diseases and AIDS

 Santaros Klinikos
Vilniaus universiteto ligoninė Santaros Klinikos

Vilnius University Hospital
Santaros Klinikos

Malta

 health.gov.mt

Health Promotion and Disease Prevention

Poland



National AIDS Centre
Agency of the Ministry of Health

Romania



"Victor Babes" Clinical Hospital of Infectious Diseases and Pneumophtisiology Craiova



"Marius Nasta" Pneumophtisiology Institute

Serbia



Institute of Public Health of Serbia "Dr Milan Jovanovic Batut"

Slovakia



Slovak Medical University in Bratislava

Slovenia

 NIJZ
Nacionalni inštitut za javno zdravje

National Institute of Public Health
Nacionalni inštitut za javno zdravje

Spain

 CEEIS Cat
Centre d'Estudis Epidemiològics sobre les ITS i Sida de Catalunya

Centre d'Estudis Epidemiològics sobre les ITS i Sida de Catalunya

 IDIBAPS
Institut d'Investigacions Biomèdiques August Pi i Sunyer

Consorci Institut d'Investigacions Biomèdiques August Pi i Sunyer

 ISPLN
Instituto de Salud Pública y Laboral de Navarra

Instituto de Salud Pública y Laboral de Navarra

United Kingdom



Public Health England

Further information

Find out more about the INTEGRATE Joint Action

Visit the [JA website](#)

integrate.rigshospitalet@regionh.dk

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