

BORDER|NET work

HIV in European Region – Unity and Diversity
European HIV Conference 2011

25th-27th May, 2011, Tallinn, Estonia

BORDERNETWork Satellite Workshop
26th May 2011, 16:00-20:00 h




SPI Forschung, Berlin
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SPI FORSCHUNG

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BORDERNETWork in a nutshell



Highly active prevention
Scale up HIV/AIDS/STI prevention, diagnostic and therapy through:

- Interdisciplinary
- Cross-border
- Networking

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BORDERNETWork Background: Problem Analysis and Evidence Base

I. The HIV Epidemic in Europe:

- Continues to spread – newly diagnosed HIV cases per 100 000 population in 2009 has increased by almost 30% from 2004 - still a high level of undiagnosed HIV;
- On the rise in Eastern Europe - changing patterns of transmission and affected groups in CEE - shift from injecting drug use to sexual transmission - women are growingly affected;

Sources : UNAIDS/WHO, ECDC/WHO Regional Office for Europe. HIV/AIDS surveillance in Europe 2009

II. Across Europe:

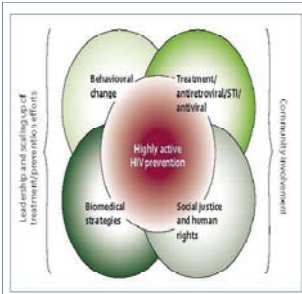
- Populations most vulnerable to HIV infection are also some of hardest to reach – sex workers, IDUs, migrants/ethnic minority communities;
- Highly disparate access to health services, marginalisation, cultural and economic barriers;
- Rapidly changing patterns of mobility in Europe - Borders lifted, problems not alleviated

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BORDERNETWork: Philosophy

Highly active prevention: cornerstone of the project's philosophy!

- > Address both direct disease causes and underlying social determinants of health (e.g. low social economic status, stigmatization, recent migration, frequent mobility) for behavioural change;
- > Enhance links between epidemiological and behavioural research and evidence-based interventions;
- > Integrating stand-alone measures in prevention, diagnostic, therapy and care into holistic approach;
- > Focus on affected and groups at risk, promoting equity, human rights and participation;
- > Mobilisation of civil society as major driving force of local response



Source: Highly Active Prevention [Coates, Richter et al.], 2008

BORDERNETWork 2010-2012: Partner Network

- **13 Partners from 8 EU countries, 6 of them CEE countries:**
 - SPI Forschung, Berlin (DE) – Co-ordinator
Contact: Elfriede Steffan, Tzvetina Arsova Netzelmann
- **12 Associated Partners:**
 - 3 GOs: RKI, Berlin (DE), NIHD, Tallinn, (EE), SPWSZ, Stettin(PL)
 - 9 NGOs: AHW, Vienna (AT), HESED, Sofia (BG), AISC, Tallinn (EE), Papardes Zieds, Riga (LV); MAT, Rostock (DE), AHP, Potsdam (DE), POMOST, Rzeszow (PL), ARAS, Bucharest (RO), PRIMA, Bratislava (SK)
- **18 Collaborating partners from 8 EU and 3 NON-EU countries**
 - Additional: Fact Finding Missions(subcontracts) in Moldova, Serbia, Bosnia and Herzegovina and Ukraine

BORDERNETWork 2010-2012: Cross-border Model Regions

The 5 Cross-border Model Regions:

- MR I: Germany-Poland
- MR II: Germany-Poland
- MR III: Austria-Slovak Republic
- MR IV: Latvia – Estonia
- MR V: Bulgaria and Romania

BORDERNETWork 2010-2012: Goal and Objectives

To improve the nexus between prevention, diagnostic and treatment of HIV/AIDS (incl. co-infections) and STIs through bridging gaps in practice and policies

Prevention and Research

- Interdisciplinary networking (WP4);
- Bridging research to practice (WP5);
- Community based prevention in migrants/ethnic groups (WP8);
- Quality Assurance in youth prevention (WP9)

Diagnostic

- Early Diagnostic: Improve Access and uptake of HIV/STIs diagnostic services for most at risk groups (WP6);

Treatment

- Referral and treatment systems: Enhance internal links in referral systems and treatment of HIV Co-infections (WP7);

Areas of activities: Horizontal and Core Work Packages

WP1: Coordination (RKI, DE)

WP2: Dissemination (AHP, DE)

WP3: Evaluation (AHP, DE)

WP4: Interdisciplinary Networking (SPI, DE)

WP5: Research Sentinel Surveillance (RKI, DE) and **Second Generation Surveillance** (SPI, DE)

WP6: Early HIV/STI diagnostic for vulnerable groups (NIHD, EE)


WP7: Treatment and Referral of HIV Co-infections (AHP, DE)

WP8: Community Participation in Prevention (ethnic minority/migrants) (HESED, BG)

WP9: Quality Assurance in youth prevention (AHW, AT)

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**First Results and Further Expected Outcomes (1)
Interdisciplinary Networking (WP4)**



Transferable concepts for highly active prevention in 5 cross-border EU regions EU countries and

Fact Finding Missions in 4 NON –EU countries: Ukraine, Moldova, Serbia, Bosnia and Herzegovina


- Study the particularities of local epidemiological situation (e.g. HIV/AIDS/STI, HIV Co-infections (HCV, TB);
- Analyse patterns of risk and social determinants of vulnerable groups, e.g. young people at risk, mobile groups, most at risk groups (IDUs, SWs, Roma), PLHIV.
- Assess barriers of prevention measures
- Assess needs of target-groups

Communication and Counselling Curriculum for medical students and practitioners in Germany and Poland

Conduction of 12 pilot training courses for students and 2 ToT Courses for teachers;

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**First Results and Further Expected Outcomes (2)
Bridging research to Practice (WP5)**




Sentinel surveillance among STI patients, based on the German STD-Sentinel, coordinated by RKI: 29 HIV/STI diagnostic services in 4 EU countries participate, 5 new will join: *Intermediary Report Coming Soon*

Bio-behavioural surveillance among Sex Workers in 7 EU countries: *In implementation*

- o 6 capital cities and 1 border area;
- o Up to 1200-1500 Female and Male (in Sofia and Berlin) Sex Workers from In- and Outdoor Scenes
- o 6 UNGASS and 5 additional clusters of indicators will be studied in cross-country comparison
- o Prevalence of HIV, Syphilis, Hepatitis B/C, Chlamydia (Riga and Sofia), Herpes Simplex (Riga) and Gonorrhoea (in Sofia) estimated

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**First Results and Further Expected Outcomes (3)
Access to early HIV/STI diagnostic (WP6)**



Self-Assessment of VCT Services (16 services in 7 EU countries): *Report coming soon*

Focus Groups with key vulnerable population groups (3 EU countries) outlining barriers for services' access and take up


Expert Exchange Workshop on improving early access to HIV/STI services: **Satellite BORDERNETwork at AIDS 2011 : Deliverable**

Piloting of HIV/STI diagnostic/referral services for selected vulnerable groups

Practical recommendation guide outlining different approaches to early HIV/STI diagnostic and referral for key vulnerable populations

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**First Results and Further Expected Outcomes (4)
Management of HIV and Co-infections (WP7)**



Stocktaking survey on country specific conditions with participation of 12 HIV diagnostic/treatment centres in 5 EU countries: *Report coming soon*


Medical workshops and hospitation of HIV treatment practitioners:

- o June 2011, Potsdam and Berlin;
- o November 2011, Rostock (DE) and Stettin (PL)

Country-specific Guidelines for referral and management of HIV Co-infections in 6 EU countries

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**First Results and Further Expected Outcomes (5)
Community-base participatory prevention (WP8)**




Assessment Survey on Participatory HIV/AIDS/STI prevention for ethnic minorities and migrant groups with participation of 8 NGOs from 6 EU and 2 NON-EU countries: [Report available here](#)

Competence Training in evidence-based model POL (Popular Opinion Leader), for participatory community-based HIV/STI prevention with participation of 20 prevention workers (7 EU and 2 Non-EU countries): **Deliverable**

Good-practice manual in participatory community-based HIV/STI prevention for ethnic minority/migrant groups in 6 EU countries

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**First Results and Further Expected Outcomes (6)
Enhance QU in Youth HIV Prevention and SRHR projects (Wp9)**



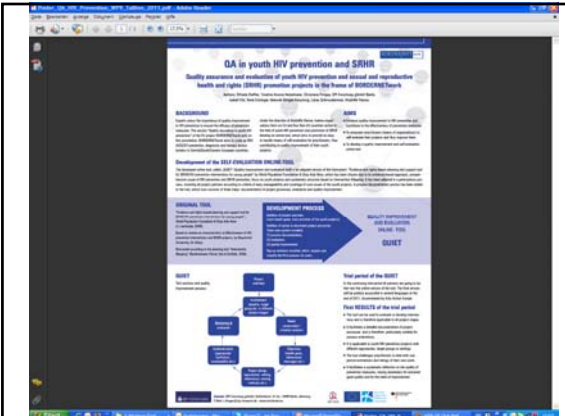
Participatory development and adaptation of evidence-based tool for Quality Development and Evaluation, based on

Evidence and rights-based planning and support tool for SRHR/HIV prevention for young people; World Population Foundation & Stop Aids Now (J. Leerlooijer, 2009)

QUIET: user-friendly online self-evaluation and QI tool for youth HIV/STI prevention, sexual and reproductive health and rights interventions: [See Poster ID 5800](#)

Test phase of on-line tool in the frame of running HIV/STI /SRHR youth prevention projects

On-line Launch and accessible in English and Russian by the End of 2011



The screenshot shows a presentation slide with the following content:

- QA in youth HIV prevention and SRHR**
- Quality assurance and evaluation of youth HIV prevention and sexual and reproductive health and rights (SRHR) prevention projects in the frame of BORDERNETwork
- BACKGROUND:** Quality assurance and evaluation of youth HIV prevention and SRHR prevention projects in the frame of BORDERNETwork
- AIMS:** Improve the quality of youth HIV prevention and SRHR prevention projects in the frame of BORDERNETwork
- DEVELOPMENT OF THE SELF-EVALUATION ONLINE TOOL:** Development of the SELF-EVALUATION ONLINE TOOL
- DEVELOPMENT PROCESS:** Development of the SELF-EVALUATION ONLINE TOOL
- DEVELOPMENT TOOL:** Development of the SELF-EVALUATION ONLINE TOOL
- TEST PHASE:** Test phase of the SELF-EVALUATION ONLINE TOOL
- ON-LINE LAUNCH:** On-line Launch and accessible in English and Russian by the End of 2011

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BORDERNETwork: Glimpses



The collage includes several photographs: a group of people in red shirts standing in a line; a group of people sitting on a bench; a group of people standing in front of a building; a group of people sitting at a table; and a group of people standing in front of a building.

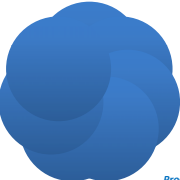
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WHY does BORDERNETwork make a difference?

Interdisciplinarity and Cross-border Efforts in mutual learning processes by and for the Communities in Central, Eastern and South Eastern Europe

Participatory development and transfer

Improve coordination of practices for better quality assurance in prevention measures; and forge better links between diagnostic and treatment systems.



Linking Regions

Boost regional networks in public health sector and mobilise civil society resources in order to increase the impact of local response;

Advocating

for human rights, equity and social inclusion of most affected groups and communities

Producing evidence

Enhance links between epidemiological and behavioural research and sound interventions.

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Thank you very much for your attention!

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