

**BORDERNETWORK WP6 meeting
Early HIV/STI diagnostic for vulnerable groups**

Meeting protocol

**Friday, May 27, 2011, 3–6 PM
Tallinn, Estonia**

Participants:

Isabell Eibl, AIDS-Hilfe Vienna, Austria
 Jury Kalikov, AISC, Estonia
 Krzysztof Kulczycki, POMOST, Poland
 Patryk Kapa, SPWSZ, Poland
 Małgorzata Kłys-Rachwalska, SPWSZ, Poland
 Galina Musat, ARAS, Romania
 Barbora Kucharova, PRIMA, Slovakia
 Martin Palenik, PRIMA, Slovakia
 Maryana Sluzhynska, Salus Foundation, Ukraine
 Anda Karinte, Riga Stradins University, Latvia
 Iveta Skripste, Papardes Zieds, Latvia
 Inga Upmace, LIC, Latvia
 Alexander Leffers, AIDS-Hilfe Potsdam, Germany
 Elfriede Steffan, SPI Forschung, Germany
 Tzvetina Arsova Netzelmann, SPI Forschung, Germany
 Riina Enke, NIHD, Estonia

Moderation and protocol:

Kristi Rüütel, NIHD, Estonia

Agenda:

1. Overview of WP6 activities so far (Kristi Rüütel, NIHD):
 - NGO Code of Good Practice – draft is ready, to be sent to partners for comments by June 6, comments to NIHD by June 13, final version by June 21.
 - Country profile report – draft is ready, to be sent to partners for comments by June 6, comments to NIHD by June 13, final version by June 21.
 - Desk review
 - All reports will be combined into one together with the piloting results.

2. Overview and discussion of the partners' piloting protocols:
 - AIDS-Hilfe Vienna, Austria – testing for MSM in gay-clubs
 - AISC, Estonia – testing for sexual partners of CSW
 - POMOST, Poland – testing in prison
 - SPWSZ, Poland – testing in night clubs, youth film days and other events
 - ARAS, Romania – testing for injecting partners of IDUs

- PRIMA, Slovakia – testing for CSWs, collaboration with shelters and other organizations
- Papardes Zieds, Latvia – testing for regular sexual partners of CSWs
- AIDS-Hilfe Potsdam, Germany – testing for FSWs in the Polish-German border region
- NIHD, Estonia – partner notification and testing for sexual partners of IDUs

3. General discussion, main points:

- Access to treatment was identified as the main potential barrier to STI testing. In all countries antibiotics for STI treatment are prescription drugs and patients have to pay for them fully or partially, especially in case they have received testing anonymously. All partners should think through how to grant treatment (collaboration with pharmaceutical companies or pharmacies, buying the antibiotics centrally?)
- Ethical committee's approval for the protocol. Every partner has to clarify it themselves, because regulations may be different in different countries. In most cases it is not necessary because it is not research but rather an extension/modification of existing services.

4. Next steps for piloting the services:

- Development of common indicator list for data collection from participants in the piloting of services –NIHD will send the draft for commenting by June 1, 2011 (besides common data all partners are welcome to collect additional data for their own purposes)
- Refining the protocols – final versions to be sent to NIHD by June 17, 2011
- Finishing country profile report – draft to be sent to partners by June 6, comments to NIHD by June 13, final version by June 21.
- Piloting – June–October 2011
- Data input and analysis – October–December 2011
- Developing of joint report – January–April 2012
- Development of guidelines – practical recommendations for providing early HIV/STI VCT services for vulnerable groups (M2) – January–June 2012