



Meeting of National HIV Programme Managers

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Eastern Europe and Central Asia (EECA) and non-EU/EEA countries

**WHO Regional Office for Europe
Copenhagen, Denmark**

25 – 26 September 2017

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OUTLINE

Background

HIV remains one of the most important public health challenges in the WHO European Region. HIV cases are increasing in WHO European Region and particularly in the eastern and central Europe. At the end of 2015, the cumulative number of people diagnosed with HIV in the WHO European Region increased to over two million. More than 153 000 new HIV cases contributed to this figure in 2015 – a 7% increase compared to the previous year and the highest annual number since reporting began in the 1980s. Additionally, an alarming one third of people living with HIV are estimated not to be aware of their status.

There have been improvements in some key interventions in the region. The coverage with life-saving antiretroviral treatment more than doubled over the last decade. Several countries successfully validated the elimination from mother to child transmission of HIV. However, despite the progress in achieving universal access to HIV prevention, treatment, care and support across the Region over the last decade, the response to the HIV epidemic still faces many challenges. Close to half (48%) of people diagnosed with HIV are diagnosed at a late stage of infection (with CD4 cell counts below 350 per mm³ blood). Many people living with HIV start treatment too late and already show signs of widespread immune system damage, leading to excess morbidity and mortality. In eastern and central Europe, only 21% of all people estimated to be living with HIV (diagnosed and undiagnosed) were receiving antiretrovirals in 2015. Between 2011 and 2015, the percentage of HIV co-infection in incident TB cases almost doubled, from 5.5% to 9.0%. In addition, almost three quarters of the people living with HIV in Europe are also chronically infected with the hepatitis C virus (HCV), further increasing mortality and morbidity.

In September 2016, the 66th session of the Regional Committee of the WHO Regional Office for Europe (RC66) has endorsed the Action plan for the health sector response to HIV in the WHO European Region. The Action Plan guides Member States in accelerating the response to the HIV epidemic at national levels and to contribute to the regional and global efforts to end the HIV epidemic. The goals and targets are supported by the 2030 Agenda for Sustainable Development, the multisectoral strategy for 2016–2021 of the Joint United Nations Programme on HIV/AIDS, the Global health sector strategy on HIV for the period 2016–2021, and Health 2020, the European policy framework for health and well-being. Moreover, the first ever regional Action plan for the health sector response to viral hepatitis in the WHO European Region recently endorsed through RC66 and Roadmap to implement the Tuberculosis Action plan for the WHO European Region 2016-2020 set a good ground to address synergies in prevention, treatment and control of co-infections.

The regional Action plan is structured around five strategic directions:

- information for focused action;
- interventions for impact;
- delivering for equity;
- financing for sustainability;
- innovation for acceleration.

The Action plan calls for fast-tracked actions. It asks Member States to define and deliver an essential package of HIV services that are people centered, accessible and integrated in a manner appropriate to the local context and regulations. Innovative responses, with a strong focus on comprehensive, combination prevention and a “treat all” approach, are critical to increase the number of people receiving HIV treatment and care and decrease the rate of newly diagnosed infections. These responses should be based on a people-centred health-system approach to ensure universal coverage and enhance financial sustainability. Across the European Region, there should be a renewed focus on ensuring the cost efficiency, quality and effectiveness of existing HIV services and the financial sustainability of the response.

To date some Member States took prompt actions and developed or updated their national strategies, action plans and/or national HIV programmes.

In addition, in 2015-2016 WHO has released a set of normative guidelines¹ and provides support to countries in formulating and implementing policies and programmes to improve and scale up HIV prevention, treatment, care and support services for all people in need. With latest science development certain supplements are also anticipated to be published in 2017 and 2018.

In January 2017, Maltese EU Presidency and ECDC organized a conference “Fast Track the end of AIDS in the EU” where EU/EEA and selected countries participated. Therefore the current meeting is focusing on non EU/EEA countries. Possibilities of organizing a pan European event in 2018 will be further explored by WHO Regional Office for Europe and ECDC.

Scope and purpose

The meeting is aimed at reviewing the countries’ progress, challenges and exchange good practices to overcome them in the field of HIV prevention, testing, treatment and care in Eastern Europe and Central Asia as well as central Europe (non EU/EEA countries). The following themes will be covered during the meeting:

- **Prevention interventions** to achieve better impact and effective HIV response in the Region
- **HIV testing** scale up and strengthening linkage to care to enable better access to treatment
- **HIV treatment** scale up through « treat all » approach and treatment optimization
- **HIV surveillance and monitoring** strengthening to support decision making
- **Financial sustainability** for accelerated and maintained response of national programs

Objectives

1. Overview the HIV epidemic in the WHO European Region;
2. Present and exchange on National HIV Action Plans or relevant national strategies and their financing;

¹ [\(1\) Consolidated guidelines on HIV testing services and latest Guidelines on HIV self-testing and partner notification;](#) [\(2\) Consolidated guidelines on the use of antiretroviral drugs for treating and preventing HIV infection;](#) [\(3\) Consolidated strategic information guidelines for HIV in the health sector;](#) [\(4\) Consolidated guidelines on HIV prevention, diagnosis, treatment and care for key populations \(2016 update\)](#)

3. Review the latest evidence, WHO guidance, tools and policies;
4. Address cross-cutting issues and opportunities, particularly in regards to co-infections and vulnerable populations.
5. Present and discuss the best practices;

Expected results and Outputs

- A comprehensive overview of national HIV strategies and action plans developed and/or updated in the participating countries
- Participants briefed and exchanged on the latest evidence and good practices in the field of HIV prevention, testing, treatment and care and co-infections (HCV, TB)
- A report from the WHO Regional Meeting describing the outcomes of the meeting

Event Format

The meeting will last two full working days (25-26 September 2017) and will be held in the premises of WHO Regional Office for Europe in Copenhagen (Marmorvej 51, Copenhagen 2100-DK, Denmark).

The meeting is envisaged as an extended forum of partners and leading experts that will consist of plenary sessions, poster session and parallel working groups on defined topics. To assure that the agenda is aligned with latest developments in science and public health but also responds to the needs of countries invited to the meeting, WHO has proposed a scientific committee. This committee consists of WHO staff, country representatives, civil society and researchers. The committee oversees the development of a detailed agenda and priority issues to be addressed in the Regional Meeting.

The event will be followed by a one day meeting for representatives of countries of central Asia to discuss specific actions related to HIV and migration (a separate scope and purpose document describes the details of this back to back meeting)

Participants

The Action Plan calls for coordinated efforts from all sectors of society. WHO, Member States, non-state actors— including civil society and community-based organizations, research and academic institutions, healthcare providers, federal, district, municipal level governing bodies, media, and others.

Participants include:

- Representatives of Member States from eastern Europe and central Asia (including Armenia, Azerbaijan, Belarus, Georgia, Kazakhstan, Kyrgyzstan, Moldova, Tajikistan, Turkmenistan, Russian Federation, Ukraine, Uzbekistan); Central Europe (representatives of non EU/EEA countries²: Albania, Andorra, Bosnia and Herzegovina, the Former Yugoslav Republic of Macedonia, Israel, Monaco, Montenegro, San Marino, Serbia and Kosovo³, Switzerland, Turkey)
- National health authorities/decision makers and delegated national experts
- Invited international experts
- UNAIDS, UNODC, UNFPA, UNICEF, UNDP, UNITAID representatives
- ECDC, Global Fund, World Bank, US CDC, USAID and other organizations representatives active in EECA region
- Representatives from WHO Country Offices, Regional Offices and Headquarters

³ Invitations will be extended to technical programme representatives of Kosovo (without prejudice to positions on status, and in accordance with Security Council (UNSCR) resolution 1244 (1999) and the ICJ Opinion on the Kosovo Declaration of Independence)

- Civil society organisations, professional associations and WHO Collaborative Centres

Provisional programme

Day 1, 25 September		
9:00–10:00	Plenary session 1 Welcome remarks Scene setter presentations	
10:00–12:30	Poster session	
12:30–13:30	LUNCH	
13:00–14:30	Plenary session 2	
14:30–17:00	Countries group work	
Day 2, 26 September		
9:00–10:30	Plenary session 3	
10:30–12:30	Group work	
12:30–13:30	LUNCH	
13:00–14:30	Group work	
14:30–17:00	Plenary session 4	