HIV OUTCOMES CALL TO ACTION

Recommit to ending the AIDS epidemic by 2030: the need for a new EU Action Plan on HIV/AIDS



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With little more than five years remaining until 2030, HIV Outcomes calls on the new European Parliament and the next European Commission to prioritise the fight against HIV/AIDS over the next five years, in line with the global political commitment to end the AIDS epidemic by 2030. To help achieve that goal, and in support of national efforts to enhance the long-term health and well-being of people living with HIV, we call for the adoption of a new EU Action Plan on HIV/AIDS.

HIV Outcomes Call to Action

In calling for the EU to prioritise the 2030 target for ending the AIDS epidemic, and the adoption of a new Action Plan on HIV/AIDS, this Call to Action echoes the <u>letter sent earlier this</u> year by 32 cross-party MEPs to European Commissioner for Health and Food Safety, Stella Kyriakides, as well as the June 2024 <u>submission</u> to the Council of the EU by the delegations and Health Ministers of Poland, Romania and Spain.

The political commitment to ending HIV/AIDS as a public health threat in Europe was recently reiterated by the <u>Resolution</u> of the Member States of the WHO European Region endorsing the 'Regional action plans for ending AIDS and the epidemics of viral hepatitis and sexually transmitted infections 2022-2030'.

At their meeting in Puglia in June 2024, G7 leaders have also <u>reaffirmed</u> their commitment to ending the HIV/AIDS epidemic by 2030.

The case for action

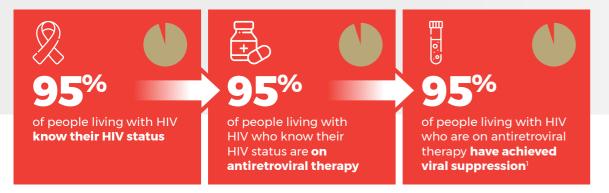
Ending the AIDS epidemic by 2030 is a globally agreed target embedded within the <u>UN 2030 Agenda for Sustainable</u> <u>Development</u>. To contribute to that objective, the <u>UNAIDS' *Global AIDS*</u> <u>Strategy 2021-26</u> has set three targets for HIV testing and treatment (below).

In early 2024 – the mid-point of the time period covered by the UNAIDS Strategy –

the European Centre for Disease Prevention and Control (ECDC) reported that only two countries within the EU/EEA had achieved the first target. A further nine countries had achieved the second target and 13 the third.

ECDC concluded that, based on current trajectories, progress 'must be accelerated' in order to meet both the UNAIDS and 2030 Agenda targets.

GLOBAL AIDS STRATEGY 2021-26 TARGETS



¹ European Centre for Disease Prevention and Control, '<u>Evidence Brief: Progress towards reaching the Sustainable Development Goals related to HIV in the European Union</u> and European Economic Area' (February 2024).

Renewing the EU's political commitment to the **fight against HIV/AIDS**

Action to combat HIV/AIDS contributed to the emergence of public health as a policy domain of the EU. The European Commission's 1987 Communication on the Fight Against AIDS was one of the early EU initiatives in the field of public health and was followed in the 1990s by the *Europe Against AIDS* programmes. In the mid-2000s, EU action on HIV/AIDS was renewed with a series of action programmes and plans, the last of which concluded in 2016.

If Europe is to achieve the 2030 target for ending the AIDS epidemic, the new

Beyond viral suppression: improving long-term health outcomes for people living with HIV

On World AIDS Day 2022, HIV Outcomes published its <u>Policy Asks</u> on 'Enhancing long-term health and well-being among people living with HIV'. This set out recommendations for HIV clinics/ care providers, national and regional health authorities, and the European Union – with a focus on four main areas of action (page 6).

The recommendations contained in our 2022 Policy Asks are prominently reflected in HIV Outcomes' priority proposals for a new EU Action Plan (see page 7).



European institutions must play their part by renewing the EU's contribution to the fight against HIV/AIDS – in line with the commitments, resolutions and proposals previously highlighted.

The adoption of a new Action Plan on HIV/AIDS is therefore vital. The Action Plan should also have as a central purpose the aim of supporting national efforts to enhance the long-term health and well-being of all people living with HIV.

HIV OUTCOMES POLICY ASK RECOMMENDATIONS: AREAS OF ACTION

Comorbidity prevention, screening, treatment and management

People living with HIV are at higher risk. compared with the general population, of developing a range of other physical and mental health conditions (comorbidities), including cancers, cardiovascular disease, chronic kidney disease, diabetes, lower bone mineral density, frailty, depression, and anxiety.

Ageing with HIV

As people age, they are at increased risk of frailty and other geriatric syndromes (such as functional limitation, depression and cognitive impairment) as well as polypharmacy. HIV increases the complexity associated with care provision as people grow older, requiring tailored healthcare services that respond to these challenges.

Measurement of personreported outcomes (PROs) & monitoring HRQoL

Poor health-related quality of life (HRQoL) is more prevalent among people living with HIV than in the general population, underscoring the need to expand the measurement of PROs - which capture individuals' perspectives about their health and well-being - and the monitoring of HRQoL.



Combating stigma and discrimination

Stigma and discrimination remain priority concerns for the HIV community and are closely connected with poor mental health among people living with HIV. HIV intersects with other personal and social identities, which can increase the experience of stigma and discrimination - for example in association with race, gender, sexuality and socioeconomic status.

Delivering on the 2030 commitment

European governments have consistently reaffirmed their commitment to ending the AIDS epidemic by 2030. The European Council's 'Strategic Agenda 2024-29' pledges that the European Union will work for the achievement of the Sustainable Development Goals and the strengthening of health cooperation at European and international level.

We therefore call upon the new European Parliament and the next European Commission to show leadership at this critical moment and renew Europe's contribution to the fight against HIV/AIDS.

2030 is little more than five years away. Together, we can write the final chapter in the HIV story.

A new EU Action Plan on HIV/AIDS HIV Outcomes' priority proposals

A new EU Action Plan on HIV/AIDS should have at least three central aims:



Reaffirming the EU's political commitment to ending the HIV/AIDS epidemic by 2030, including through attainment of the UNAIDS 95-95-95 targets, and allocating sufficient resources at EU and national level (including through funding of national projects) to deliver on this commitment.



Improving rapid access to HIV prevention and treatment options and leveraging innovation across the care continuum for better health outcomes.



Enhancing efforts to strengthen the long-term health and well-being of people living with HIV through a focus on the four thematic priorities set out in HIV Outcomes' Policy Asks: comorbidity prevention, screening, treatment and management; ageing with HIV; measurement of PROs and monitoring HRQoL; and combatting stigma and discrimination.

As the core mission of HIV Outcomes focuses on the third of these aims, our priority proposals for a new EU Action Plan focus principally on that aim.

RECOMMIT TO ENDING THE AIDS EPIDEMIC BY 2030 THE NEED FOR A NEW EU ACTION PLAN ON HIV/AIDS

A NEW EU ACTION PLAN ON HIV/AIDS

HIV Outcomes' priority proposals

ENHANCE HIV INITIATIVES AND BEST PRACTICE SHARING WITHIN THE PUBLIC HEALTH EXPERT GROUP (PHEG)

HIV Outcomes welcomes the broadening of the mandate of the European Commission's PHEG to encompass communicable diseases but calls for further prioritisation of communicable diseases, including HIV, through the creation of a dedicated subgroup within PHEG.

A communicable diseases sub-group could consider the full range of challenges relating to HIV - from prevention, diagnosis and treatment to long-term health and well-being. Priority should be given to the exchange of experiences and best practices relating to comorbidity prevention, screening, treatment and management, as well as ageing with HIV.

The sharing of best practices in the case of HIV could also inform the work of the PHEG in other areas, including other communicable diseases and mental health.

IMPROVE EU-WIDE DATA COLLECTION, INCLUDING **HEALTH-RELATED QUALITY OF LIFE**

The reinforced mandate of the European Centre for Disease Prevention and Control (ECDC) provides a valuable opportunity to bolster the fight against prevalent communicable diseases, including HIV. The ECDC should offer Member States technical and scientific guidance in establishing robust surveillance systems for HIV, incorporating indicators related to comorbidities and healthrelated quality of life (HRQoL).

FUND PROGRAMMES **THAT SUPPORT PERSON-**REPORTED **OUTCOMES** MEASUREMENT (PROMs)

PROMs are used to ascertain individuals' perspectives on their health and HRQoL.The experience of HIV Outcomes members suggests that very limited progress has yet been made in the integration of PROMs into routine HIV care provision.

Inclusion of HIV-specific domains within the OECD Patient-**Reported Indicator Surveys (PaRIS) could contribute to** progress in this area and would facilitate the collection of standardised, comparable data on PROs, as well as experiences, across countries.

FUND PILOT STUDIES ON LONG-TERM **CARE FOR PEOPLE LIVING** WITH HIV

EU funding could support pilot studies to better assess and improve integrated and person-centred care for people living long-term with HIV. The studies should ideally employ or develop frameworks for healthy ageing, frailty, functional ability, comorbidities, treatment adherence and resistance, and other dimensions of health that are relevant to people living with HIV. People living with HIV should also be meaningfully involved in the development of these frameworks.

COMBAT **STIGMA &** DISCRIMINATION **AFFECTING PEOPLE LIVING** WITH HIV

Action is needed to improve training for healthcare professionals to enhance awareness and knowledge of HIV/AIDS-related stigma and discrimination, especially in healthcare settings. Within the community, action is needed to promote inclusion of and support for people living with HIV. EU funding could play a crucial role by enabling and supporting awareness campaigns focused, for example, on HIV transmission routes and U=U (undetectable = untransmissible).

Mechanisms should be established to monitor HIV/AIDSrelated stigma and discrimination both in healthcare and the community contexts. This can enable the development of targeted interventions and the evaluation of progress over time. Specific attention should be paid to stigma and discrimination experienced by vulnerable groups, including women, young people, men who have sex with men, trans populations, people who inject drugs, sex workers, incarcerated groups, trans populations, migrants, and those who are generally displaced due to political factors, including war.

Some of these groups may face significant barriers to healthcare access as a result of dual stigma and discrimination experienced within healthcare services, legal barriers and due to social marginalization. The EU can facilitate action in this area by enabling the sharing of best practices across EU Member States and beyond.

It is essential to reinforce legal frameworks to fight discrimination against people living with HIV, and to leverage digitalisation for citizen empowerment and privacy protection. Following the example of Spain in 2023, HIV Outcomes also calls for the European Union and its Member States to join the Global Partnership to Eliminate Stigma and Discrimination.

ENGAGING CIVIL SOCIETY AND COMMUNITY **ORGANISATIONS**

Political leaders can strengthen partnerships with civil society, community organisations and NGOs. These groups play a pivotal role in reaching key populations and marginalised communities that are disproportionately affected by HIV. By collaborating closely with civil society, outreach efforts and policy interventions can be amplified, ensuring that services are tailored to meet the specific needs of diverse populations.

HIV Outcomes: enhancing long-term health and well-being among people with HIV

For those diagnosed and treated early, HIV is now a long-term, rather than fatal, condition. HIV Outcomes aims to address the needs generated by increased life expectancy, by looking to improve health outcomes and quality of life of people living with HIV in the long-term.

OUR VISION

A world in which people living with HIV enjoy the highest possible health-related quality of life (HRQoL).

OUR MISSION

We seek to build political support and policy measures to deliver integrated person-centered healthcare and clinical changes that deliver improved HRQoL of all people living with HIV across Europe – and thereby improve the sustainability of European healthcare systems – by sharing evidence-based best practices and innovative approaches to care.

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in HIV Outcomes - Beyond Viral Suppression

INITIATIVE PARTNERS



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OBSERVER MEMBERS

European Centre for Disease Prevention and Control (ECDC)

Joint United Nations Programme on HIV/AIDS (UNAIDS)

European AIDS Clinical Society (EACS)

Fast-track Cities Europe

UNITE Global Parliamentarians Network (UNITE)





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