



**ROME**, November 25-26, 2014

AUDITORIUM, MINISTRY OF HEALTH



**EACS** European  
AIDS Clinical Society

**MEETING**



STANDARD of CARE for **HIV**  
and **COINFECTIONS** in **EUROPE**



*Chairs: A. Antinori, A. d'Arminio Monforte, C. Mussini*

# Barriers to HIV Testing in Western Europe

Nikos Dedes

Positive Voice, Greece & EATG





**HIV in Europe**

Working Together for Optimal  
Testing and Earlier Care

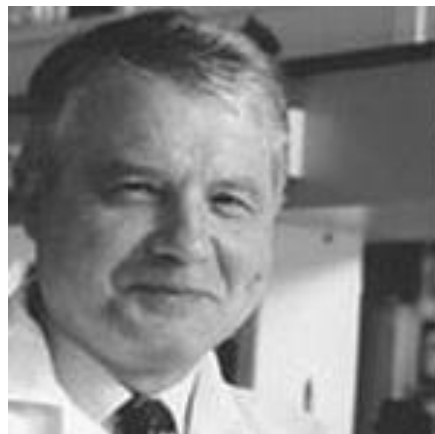
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- 1983 Discovery of HIV

# Discovery of HIV





- 1983 Discovery of HIV
- 1985 Use of serological tests - Elisa  
FDA approved





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# HIV exceptionalism

From Wikipedia, the free encyclopedia



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**HIV exceptionalism** is the term given to the trend to treat [AIDS](#) differently from other diseases, including other [sexually transmitted](#), infectious, lethal diseases in law and policy.

HIV exceptionalists emphasize the human rights of people living with HIV and AIDS, in particular their rights to [privacy](#), [confidentiality](#), and [autonomy](#). They also believe that all people seeking an [HIV test](#) always require special services, such as counseling with every HIV test, special [informed consent](#) paperwork, and guaranteed anonymity in public health reporting. In many places, it is illegal to disclose HIV test results over the phone or over the internet.





# AIDS Exceptionalism

HIV exceptionalism emphasize the human rights of people living with HIV /AIDS, in particular their rights to privacy, confidentiality, and autonomy. They also believe that all people seeking an HIV test always require special services, such as counseling with every HIV test, special informed consent, and guaranteed anonymity in public health reporting.



# The 80s....



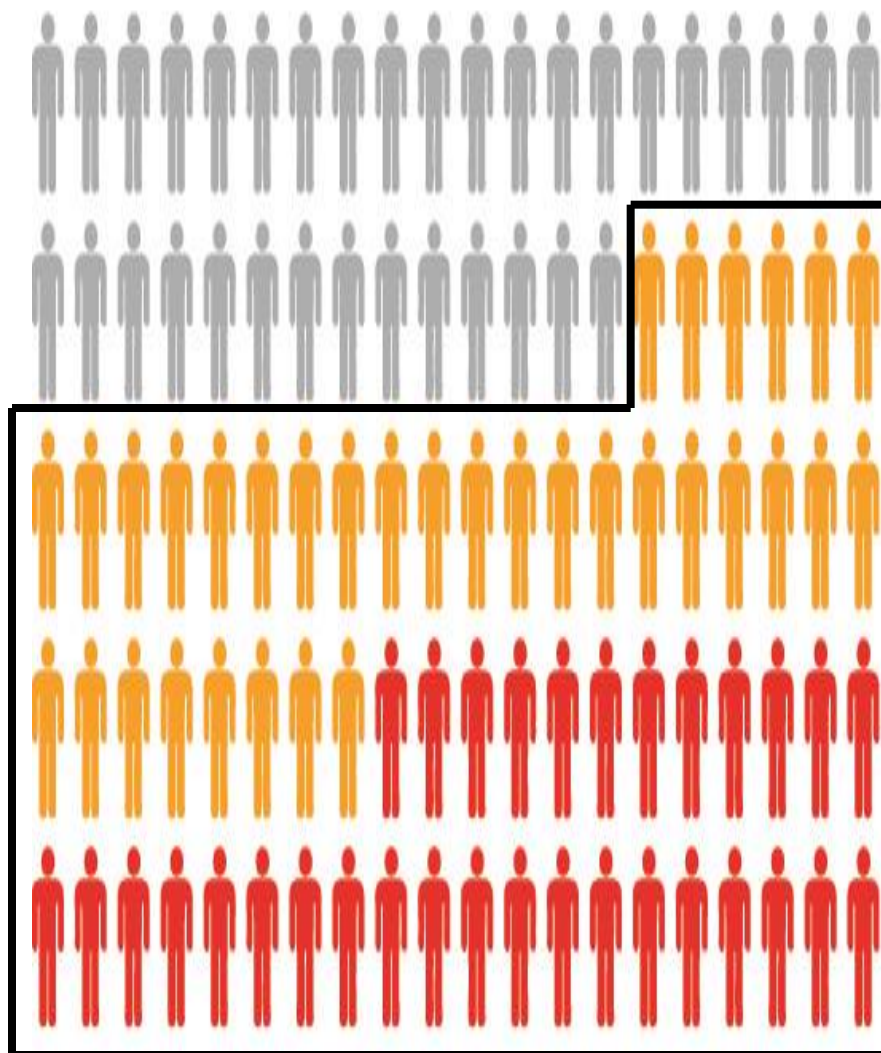
# Estimated proportion of HIV-infected persons unaware of their infection

Country	Estimated % HIV-infected persons unaware of their infection
Czech Republic	20-25%
Denmark	15-20%
France	30%
Germany	25-30%
Italy	25%
Latvia	50%
Netherland	40%
Poland	>50%
Slovakia	20-30%
Sweden	12-20%
UK	30%
Total EU	About 30%



# Late diagnosis is a critical issue in the EU/EEA, 2012

- Of those with a CD4 count at time of diagnosis, half (49%) are diagnosed late
- As a result, there are a large number of people that need ART but are not receiving it
- Late diagnosis leads to increased morbidity and mortality
- People diagnosed early are more likely to respond well to treatment
- Early diagnosis and treatment reduces the likelihood of onward transmission



34%

of those diagnosed with HIV  
do not have a CD4 count  
reported at time of diagnosis

66%

of new HIV infections get a CD4 count  
at time of diagnosis

49%

of those with a CD4 count  
reported are diagnosed late

# Early Diagnoses

- Reduces morbidity and mortality
- Reduces cost in Health Care
- Knowledge of HIV status reduces risk behaviour
- Treatment (VL reduction) reduces transmission

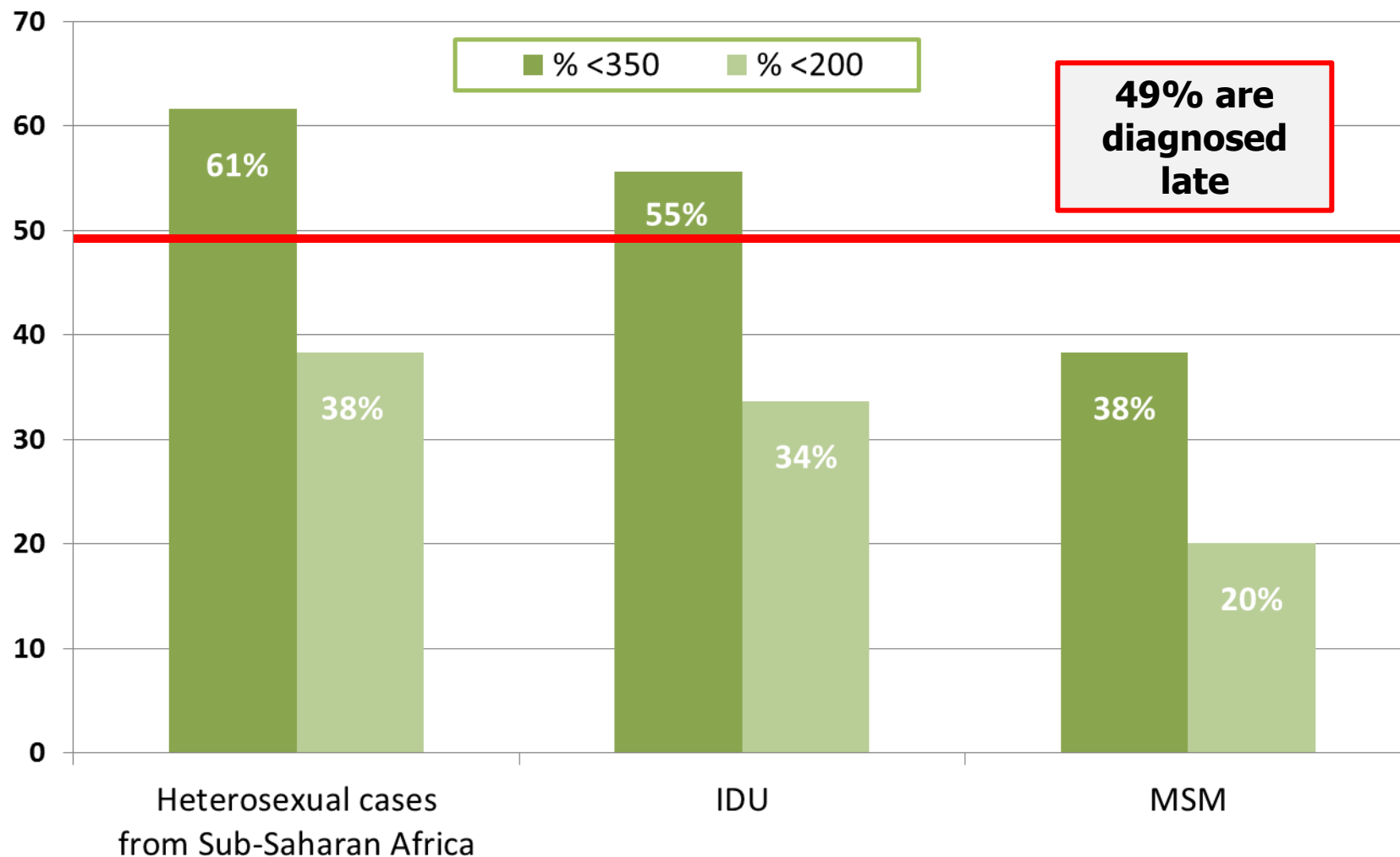
# Characteristics of persons with late diagnosis

- migrant status
- being older
- being heterosexual (not in Eastern Europe)
- living in low HIV prevalence areas
- being male
- having children



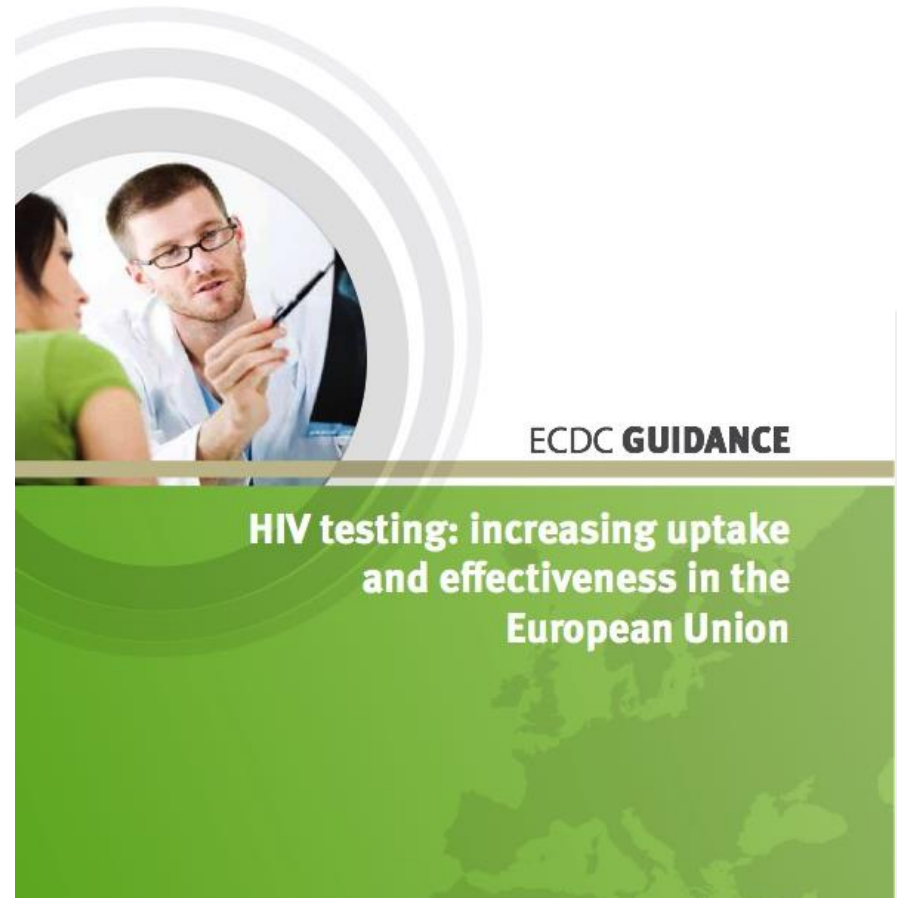
# Late HIV diagnosis by transmission mode

## EU/EEA, 2012

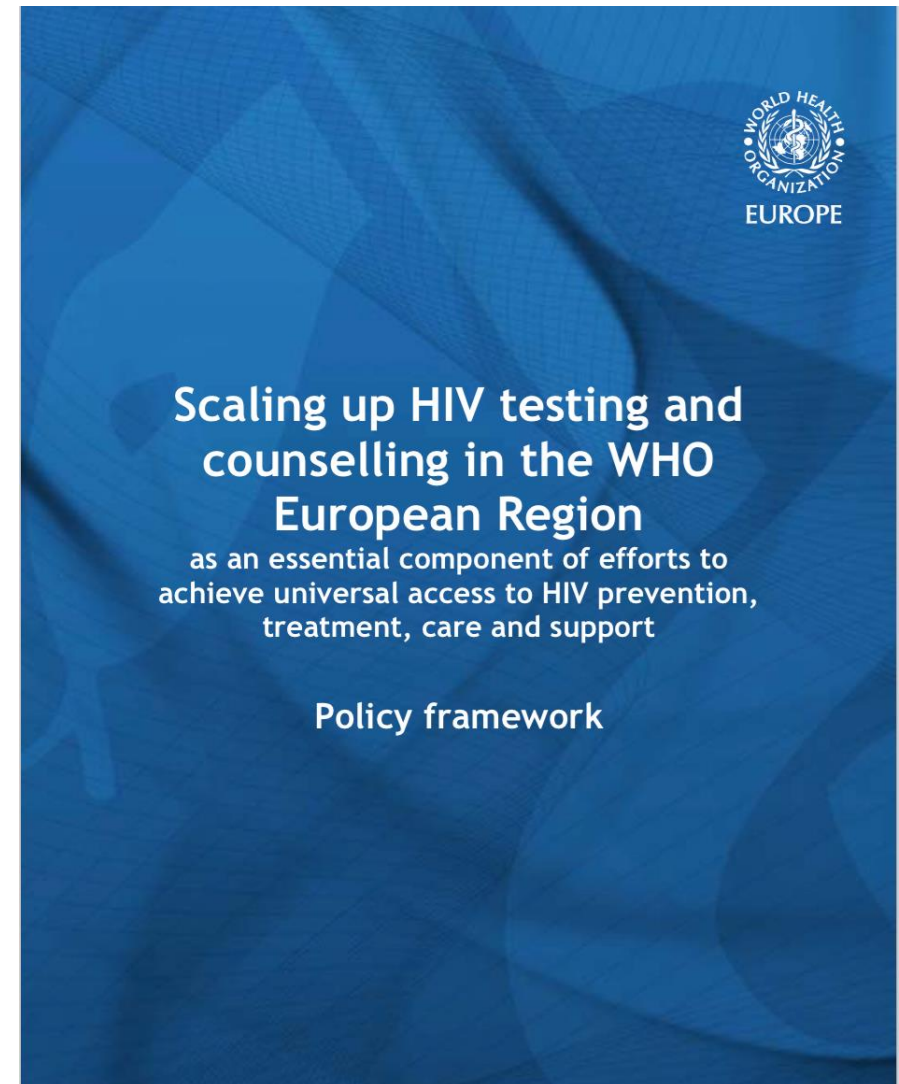


# ECDC Testing Guidance

## – Dec 2010



# WHO Euro -2010



# ECDC – HIV Testing Core Principles

- 1. Voluntary, confidential and with informed consent**
- 2. Access to treatment, care and prevention services**
- 3. Show political commitment – Financial investment**
- 4. Reduce stigma**
- 5. Remove legal and financial barriers**
- 6. HIV testing an integral part of national strategies**
- 7. Involvement of Stakeholders**

# Process of Testing

- Pre-test Counseling / Information
- Informed Consent (written in some cases)
- Delivery of Test Results (who & how)
- Post-test counseling (negative – positive)
- Referral

# Barriers to HIV testing

- Barriers to HIV testing exist on three levels
  - Patient level
  - Healthcare provider level
  - Institutional/policy level

# Barriers to ask for HIV testing

## Patient level

- Patient level barriers vary from country to country – but cross-cultural barriers include:
  - Low-risk perception
  - Fear of HIV infection and its health consequences
  - Fear of disclosure (worries about stigma, discrimination and rejection by significant others)
  - Denial
  - Difficulty accessing service, especially migrant populations

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# Barriers to offer HIV testing

## Healthcare provider level

- Healthcare provider level barriers to HIV testing:
  - Insufficient time
  - Burdensome consent process
  - Lack of knowledge/training (Stereotyping – Fear of appearing to discriminate)
  - Pretest counselling requirements
  - Reimbursement issues
  - Patient not perceived to be at risk
- Leading to many **missed opportunities** for HIV testing within healthcare setting encounters

Mounier-Jack S et al. HIV testing strategies across European countries. HIV Medicine (2008), 9 (Suppl. 2), 13–19.  
Sullivan AK, Raben D, Reekie J, Rayment M, Mocroft A, et al. (2013) Feasibility and effectiveness of indicator condition-guided testing for HIV: results from HIDES I (HIV Indicator Diseases across Europe Study). PLoS One 8: e52845. doi:10.1371/journal.pone.0052845.  
Partridge DG et al. HIV testing: the boundaries. A survey of HIV testing practices and barriers to more widespread testing in a British teaching hospital International Journal of STD & AIDS 2009; 20: 427-428.

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## HIV Indicator Conditions:

Guidance for  
Implementing  
HIV Testing in  
Adults in Health  
Care Settings



# Barriers to HIV testing - Institutional/policy level

- Lack of **national policy/guidelines** for HIV testing
  - A recent survey revealed that only half of European countries have national guidelines on HIV testing
- **Unfriendly services** for most at risk populations
  - Need for community based services
- **Regulations** & Professional inertia
  - Counselling (psychologists, counsellors)
  - Testing (healthcare professional – Medical devices)
- **Laws and justice systems** that jeopardise HIV prevention
  - Laws that criminalise PLHIV (for not disclosing, exposing and transmitting)
  - Laws that criminalise sex workers, injecting drug users and men having sex with men
  - Laws that do not protect PLHIV against discrimination

Thank you for your attention!

