



**EACS**  
European  
AIDS  
Clinical  
Society

30 June 2025

European  
Roundtable  
2025

# Meeting Report

**Collaborative Solidarity  
Achieving the 2030  
HIV targets as one Europe**



Hosted by  
**MEP Krzysztof Śmiszek<sup>PL</sup>**



Attended by  
**MEP Robert Biedroń<sup>PL</sup>**



Co-organised by  
**European AIDS Clinical Society (EACS)**



Moderated by  
**Amanita Calderon-Cifuentes from TGEU**

## Introduction

The EU Parliament Roundtable brought together political leaders, physicians, public health experts, civil society advocates, companies, and international organisations to take stock of Europe's progress in fighting HIV. The discussion was structured around key themes: combination prevention, testing and diagnosis, equitable access to care, political leadership, funding, and stigma reduction. The event was framed within the context of meeting the [Sustainable Development Goals \(SDG\) 3.3 target and the global UNAIDS 95-95-95 targets by 2030](#), tackling disparities, and empowering communities across the continent. The roundtable provided a comprehensive review of current challenges, ongoing initiatives, and critical strategies required to end the HIV epidemic. The discussions were based on scientific evidence, community insights, and the current political context, with overarching themes emerging: advancing combination prevention, scaling up testing and care access, and ensuring sustainable financing and political will.

## HIV Combination Prevention and Treatment Access

The meeting began with a technical overview provided by the [European Centre for Disease Control and Prevention \(ECDC\)](#), highlighting key gaps in the HIV care cascade across Europe. Emphasis was placed on ensuring early diagnosis, rapid linkage to care, and achieving viral suppression. Notably, speakers underlined the significance of treatment as prevention (TasP), especially for individuals with undetectable viral loads, who do not transmit HIV (U=U).

[Despite proved to be cost-effective](#), and described as a 'game-changer,' PrEP remains unequally accessible and underfunded across EU countries, as highlighted by ECDC. [WHO's](#) forthcoming guidelines on long-acting injectable PrEP (including Lenacapavir) were introduced as a hopeful development that could transform prevention, especially with the possibility of yearly injections. However, multiple barriers, including financial, regulatory, and structural, continue to impede equitable access.





EuroTEST emphasised the need to expand eligibility criteria for PrEP, beyond men who have sex with men (MSM) to include people who inject drugs, prisoners, sex workers, transgender people, undocumented migrants, women and pregnant individuals. Comprehensive sexual education and harm reduction services were cited as essential complements to biomedical interventions, as was the integration of PrEP into routine, community-level healthcare to “de-medicalise” its delivery.

In a broader policy context, the disparities between Eastern and Western Europe were highlighted. Infection rates in Eastern Europe and Central Asia are reportedly six times higher, indicating a pressing need for targeted investment and cross-border collaboration. The ECDC/EACS’ European Standards of HIV Prevention and Care Module on PrEP can be found [here](#).





## Expanding Testing and Closing the Diagnosis Gap

The panellists strongly advocated for scaling up HIV testing as a means to reduce undiagnosed cases. Several speakers highlighted innovative approaches, including home-based testing initiatives, particularly successful among women in Poland and [opt-out testing in Emergency Departments in Hospital settings](#). These efforts have proven effective in reaching populations traditionally underserved by conventional healthcare systems. One of the main barriers highlighted was written or documented consent as a requirement for HIV testing in more than a third of responding countries, that needs to be overcome.





The importance of integrating HIV testing into wider health services was repeatedly stressed. This includes offering testing in community settings and expanding access to combination prevention strategies, combining PrEP, condom distribution, vaccination, harm reduction programmes, and integrated testing, among others. The ECDC/EACS' European Standards of HIV Prevention and Care Module on HIV Testing can be found [here](#).

## United Against Stigma and Community Leadership

Persistent stigma remains a barrier, not only among the general public but also within the healthcare sector. As presented by ECDC, 18% of people living with HIV experienced stigma in healthcare settings in the last three years. Calls were made to improve the knowledge and sensitivity of healthcare professionals and to produce more nuanced data, including disaggregated data for women, migrants, and other underrepresented groups.

Civil society representatives appealed for structural engagement. They stressed that involving communities from the planning stage, not just during implementation, leads to more effective and cost-efficient interventions. Speakers also noted the critical role of the Civil Society Forum on HIV/AIDS, which previously facilitated direct engagement with EU institutions but has been inactive. There were calls for its reinstatement. As the European AIDS Treatment Group, Executive Director Dr Nicoletta Policek stressed in her presentation: Let Communities Lead!

Dr. Mariana Mardărescu, from HIV Outcomes and EACS WAVE Group, presented on the Romanian HIV Cohort, namely the work around women with a strong focus on pregnancy and healthy living throughout the lifespan of a woman living with HIV, their needs and burden of care. Dr. Jakub Wyszynski reminded the need for tailored interventions regarding Chemsex and other forms of sexualised drug use, especially among MSM.





## Sustaining Financing and Strengthening Political Commitment

One of the most urgent concerns expressed by EACS President Prof. Miłosz Parczewski was the decline in global and regional funding for HIV programmes. As highlighted by WHO, the withdrawal or reduction of U.S. contributions to the Global Fund has already begun to impact HIV responses in Eastern and Central Europe, and similar budget constraints are surfacing within the EU. This budgetary downturn has been exacerbated by shifting financial priorities toward defence, especially in the context of the war in Ukraine.

Multiple speakers, including MEPs Krzysztof Śmiszek and Robert Biedroń, highlighted the necessity of influencing the EU's upcoming Multiannual Financial Framework to ensure that HIV remains a priority. Both emphasised the need for the HIV community to mobilise, communicate clear, human-centred narratives, and exert pressure on policymakers at both national and EU levels.

Concerns were also raised about the lack of a coherent EU-wide HIV Action Plan since 2016. Stakeholders urged the European Commission to take leadership and re-establish a strategic, multi-sectoral framework, anchored in community leadership, scientific evidence, and political backing.





## Political Reflections and the Role of Parliamentarians

The final sessions of the roundtable focused on the role of political leadership. Participants acknowledged that despite technological and scientific advances, implementation often lags due to lack of political will. MEPs emphasised their readiness to act as conduits between civil society and broader legislative bodies but also noted the competing demands for attention and resources within Parliament.

Speakers urged for more targeted communication, telling compelling human stories rather than submitting technical policy briefs alone. There was agreement that shared ownership of the HIV response, spanning communities, scientists, and policymakers, is the only path toward an end to the epidemic. [UNITE's](#) Executive Director Dr. Guilherme Duarte gave notice of the re-launch of the [Informal Group on HIV at the European Parliament](#), urging attendees to push more MEPs to sign onto the group.

Closing reflections called for renewed solidarity and a reaffirmation of global health commitments under the Sustainable Development Goals (SDGs), particularly SDG 3 on health and well-being. As funding declines and populist rhetoric threatens health priorities, the consensus was clear: only collaborative, community-led, evidence-based, and politically endorsed action can turn the tide.



## Ways Forward

- **Reinstate and Strengthen EU Leadership on HIV:**

Develop and implement a renewed EU HIV Action Plan, reinvigorate the EU Civil Society Forum and HIV Think Tank, and harmonise legal frameworks across Member States to support integrated testing, treatment, and prevention strategies.

- **Invest in Community-Led and Inclusive Programmes:**

Prioritise funding for community-led services, particularly for key populations (e.g., migrants, transgender women, MSM, sex workers, and people who inject drugs), and ensure equitable access to PrEP, testing, and care across all regions of Europe.

- **Combat Stigma Through Legislation and Education:**

Enact anti-stigma and anti-discrimination laws, remove punitive HIV-specific legislation, and implement community-led training for healthcare workers to reduce bias and improve the quality of care for people living with or at risk of HIV.

- **Scale Up Prevention Efforts, Including Testing and PrEP:**

Expand HIV testing modalities (e.g., home-based, ED opt-out testing, community-led, and multilingual services), make PrEP affordable and accessible to all who need it (not only MSM) and integrate prevention tools into primary healthcare and harm reduction programmes.



## Conclusion

The roundtable concluded with a clear message: Europe has the tools to end HIV transmission by 2030, but only if political will aligns with community leadership and sustained investment. Achieving the 95-95-95 targets requires closing gaps in prevention, diagnosis, and treatment. Combating stigma, enacting inclusive policies, and funding community-led approaches must be the priorities moving forward. The EU Parliament and Commission were called upon to act now—not only to protect gains made, but to lead globally in ending the HIV epidemic for all.



The EU Parliament roundtable meeting on 30 June 2025 underscored the urgency of reinvigorating the HIV response. While scientific and technical solutions are available, implementation gaps persist—driven largely by inadequate funding, fragmented political support, and societal stigma. Going forward, the HIV community must continue to push for sustainable financing, equitable access, and stronger political accountability to ensure a unified and effective response across Europe.

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