



European  
AIDS Treatment  
Group

# **EATG ANNUAL Report**

(January - December 2017)

**designing pathways to reduce  
HIV infections**



## ACHIEVEMENTS SHOWN IN NUMBERS



### Governance

1 EATG stakeholders meeting

6 BoD meetings and additional TCs

1 governance meeting

1 strategic meeting

1 anniversary event to celebrate EATG's 25th anniversary with the publication of our 25 years' report

### Projects

18 ongoing projects

7 EU funded projects

1 Ageing with HIV conference with 104 participants

## Training

**17** LGBTI activists trained on HIV awareness and advocacy

**4** advocacy-focussed community workshops on Hepatitis treatment access organized in collaboration with local partner organizations in Temirtau (Kazakhstan), Yekaterinburg, Yerevan and Bucharest

**26** EATG members trained on Health Technology Assessment

**1.5** days of strategic discussion at the Training and Capacity Building Working Group meeting in Warsaw

**5** STEP-UP Training modules provided **18** participants with **100** hours of training

**15** webinars conducted

**6** translations/new publications funded via COPE



## Science

1 TB ECAB meeting in collaboration with World TB ECAB

1 TB stakeholders' meeting on joint advocacy agenda (collaboration between EATG/ TB Caucus/ TB people/ StopTB Partnership)

2 ECAB meetings bringing together 45 community representatives coming from > 25 different European countries

2 ECAB meetings (1 HIV; 1 HCV)

1 Parliamentarians meeting on TB (EATG/ TBEC/ TB people/ StopTB Partnership)

a series of TB meetings organized in Brussels, including a meeting at the Brussels Parliament

11 members reviewing 10 protocols and bringing in a community perspective

## Policy, political mobilisation

3 policy makers conferences in which EATG contributed speakers, advised in the programme development and provided input the conferences' call for action/ outcome documents.

2 co-organised, chaired and attended Civil Society Forum on HIV, viral hepatitis and TB and one Think Tank meeting in June and December

1 stakeholders' round-table in March "**Overcoming barriers to access to HIV and co-infections health technologies, at what levels do solutions lie?**"

1 PWG meeting in March

3 members contributed to Maltese Presidency of the EU and ECDC conference "Fast-track the end of AIDS in the EU - practical evidence-based interventions" on 30 and 31 January and the call for action

Call for fast tracking actions on HIV towards ending the AIDS epidemic by 2030 in the European Union that was presented to EU health Ministers on 13 June ; HepHIV conference on 31 January-2 February and the call for action ; Estonia Presidency of the EU meeting on 12-13 December, " Addressing HIV and TB Challenges: from Donor Support to Sustainable Health Systems "

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## TARGET RESOURCES ON ACCESS GAPS AND SPECIFIC KEY POPULATIONS

### TOWARDS **RENEWED EUROPEAN COMMITMENT AGAINST HIV/AIDS AND CO-INFECTIONS** within Europe.

EATG organized a series of activities and events prioritising sub regions, countries and cities with the greatest gaps to access screening, prevention and affordable treatment.



#### **ESTICOM - European Surveys and Trainings to Improve MSM Community Health**

**(Timeline: September 2016 – September 2019)**

EATG is involved in the EU-funded ESTICOM project, which aims at facilitating access and improving the quality of prevention, diagnosis of HIV/AIDS, STI and viral hepatitis and health care services for men who have sex with men (MSM). EATG submitted, together with project partners, a **literature review on Community Health Workers** in

Europe in March. This review combines results of an online survey with over 80 informants, a literature search of 1,400 records (of which 21 were analysed in depth), 10 interviews and detailed study of almost 50 training packages. The review was finalized in August and published at [www.esticom.eu](http://www.esticom.eu) EATG also contributed to the promotion of the two surveys within the project (EMIS2017 and ECHOES), launched in September.

Several EATG members expressed concerns that it didn't significantly address the epidemics within SEE and EECA and the funding gap.

EATG also contributed to the Estonian EU Presidency senior policy meeting on sustaining and integrating services for TB and HIV in countries where the Global Fund has or is departing on 12-13 December in Tallin.

#### **CSI - Civil Society Involvement in Drug Policy (Timeline: December 2016 – December 2018)**

EATG is as an associated partner of this EU-funded project which aims at enhancing meaningful civil society involvement in development and implementation of drug policies on national and European levels. The project contributes to the European Drug Strategy and Action Plans and the work of civil society in that regard. The project is coordinated by the Regenboog Group, the Netherlands, and host of CORRELATION – European Network Social Inclusion & Health.

#### **Joint EATG/ILGA Training on HIV and Sexually Transmitted Infections**

On 9-10 February 2017, ILGA Europe and EATG have jointly implemented a capacity building seminar on the role of LGBTI organisations to address HIV and Sexually Transmitted Infections (STIs).

The training has been attended by 18 LGBTI activists from various countries in Europe. Training sessions have been delivered by the trainers Jorge Garrido, Spain and Damian Kelly, UK. The training provided participants with an understanding of the prevention, transmission routes and treatment of HIV and STI's.

Furthermore, participants and trainers worked together to identify reasons for the separation of LGBTI and HIV activism in the past and discussed approaches of how LGBTI activists and HIV activists could work together in the future.

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## **Sexual health promotion and community empowerment in Central, South Eastern, Eastern Europe and Central Asia workshop**

EATG organised a community workshop with ILGA Europe and the Eurasian Coalition on Male Health (ECOM) at the pan-European European LGBTI conference “CHANGE! Communities Mobilising, Movements Rising” in Warsaw in November. The workshop brought together activists to discuss sexual health interventions and how HIV programmes can serve to empower LGBTIQ communities on a number of issues beyond sexual health. Participants examined community awareness-raising interventions, mobilization on sexual health promotion and service provision, as well as productive cross-sectoral collaborations.

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## **Hepatitis Access Needs (HAND) project: (timeline March 2017 – March 2018)**

The goal of the EATG project on Hepatitis Access Needs (HAND), launched in March, is to obtain knowledge about and address the specific access needs within co-infected key populations to hepatitis prevention, testing, treatment and care services in the European Region. The focus is on migrant communities and people in detention.

A **literature review and desk research** focusing on migrant communities and people in detention was done in a selected number of countries. Several EATG members and individuals in our networks have contributed to this study, which is to be finalized in 2018. This work is expected to result in concrete policy recommendations about addressing the major barriers for access to hepatitis prevention, testing, treatment and care for these key populations.

One element of the training component of the project consisted of webinars on treatment and prevention of Hepatitis B and C, conducted in English (<https://www.eatgtrainingacademy.com/hepatitis-webinar-recordings>) and Russian (<https://www.eatgtrainingacademy.com/hepatitis-webinar-recording-russian>). Furthermore, EATG organized four advocacy-focused in Yerevan, Bucharest, Temirtau (Kazakhstan) and Yekaterinburg in collaboration with local partner organizations. In addition, small grants were made available for communities to develop follow up projects to the workshops at local level.

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## **Advocacy for a new policy framework at national and European levels to reach the Sustainable Developments Goals on HIV, TB and viral hepatitis**

EATG advocated for the development of an **integrated European policy framework addressing HIV, TB, viral hepatitis and STIs in the EU** and the epidemics in SEE and EEA. This contributed to the EU Malta Presidency-ECDC meeting on HIV with speakers and input into the text of the declaration. EATG was on the **organising committee of the Hep/HIV conference** that followed the EU Presidency and which concluded with a call for action. EATG worked with its members and EU Civil Society Forum partners in reaching out to the Ministries of Health to mobilise their support for the Malta declaration and follow up in developing a new policy framework in the run up to the world AIDS Conference of 2018. Together with partners in the TB and hepatitis fields, EATG advocated and provided input into the **European Parliament resolution on HIV, TB and viral hepatitis** which was adopted in July. The EU Malta Presidency policy event concluded with a **declaration** that was endorsed by EU member states in the EU Health Council in June. It addressed several EATG concerns though it did not significantly address the epidemics within SEE and EECA and the funding gap. EATG also contributed to The Estonian EU Presidency senior policy meeting on sustaining and integrating services for TB and HIV in countries where the Global Fund has or is departing on 12-13 December in Tallin.

The European Parliament resolution called the EU and its member states to adopt a new comprehensive policy framework and to allocate resources adequate to the commitments of the Sustainable Development Goal to end HIV, TB and viral hepatitis. It addressed the need to scale up prevention, testing and access to treatment. The European Commission renewed and expanded the scope of the EU Civil Society Forum and governmental representative and agency based Think Tank to cover tuberculosis and viral hepatitis. EATG was selected as a member and elected **to the coordination team of the new EU Civil Society Forum on HIV, TB and viral hepatitis**. It co-organised the meetings of the CSF and took part in the Think Tank meetings in June and December.

## Outcomes of EATG initiated or contributed work

- EATG collected **information on research centers in Eastern Europe and Central Asia** that can be approached by industry and academia which will encourage the investment on research within the region\* EATG contributed to the **establishment of easily accessible in-language resources for eastern European HCPs, patient reps, patient groups and PLHIV** via the translation of factsheets.
- EATG established **increased collaboration between partners in the TB and hepatitis fields**
- EATG established Steady collaboration with European LGBTI and HIV networks
- Advocacy efforts of EATG (in collaboration with other partners) resulted in: 2 EU Presidency meetings on HIV (one also on TB) and outcome documents
  - 1 European Resolution calling for greater political leadership to tackle the HIV, TB and viral hepatitis epidemics in Europe
  - Work on a European Commission paper on addressing HIV, TB and viral hepatitis
  - The renewal and expansion of both the EU Civil Society Forum and EU Think Tank on hepatitis, TB and viral hepatitis.
  - The discussion of a **new policy framework on HIV, TB and HCV** by EU ministers of health in October

## PROVIDING INCREASED SUPPORT FOR TARGETED TESTING AND LINKAGE TO CARE FOR MOST-AT-RISK POPULATIONS.

EATG co-organised the June and December meetings where PreP, legal and regulatory barriers to a scale up of testing and linking to care and decentralised testing were discussed, as well as the significant contribution of service delivery models tailored to the needs to affected communities and community health workers.



### HIV in Europe Initiative

As advocacy secretariat of HIV in Europe, EATG took part in the organisation of the Hep/HIV conference in Jan-February back to back with the EU Presidency ECDC event on fast tracking the end of AIDS. EATG also contributed to its position on self-testing.



### OptTEST - Optimising Testing and Linkage to Care For HIV Across Europe (Timeline: July 2014 - September 2017)

[www.opttest.eu](http://www.opttest.eu)

The last phase of the project was focused on finalisation of the research, as well as pilots and their presentation to stakeholders.

EATG participated in several national round-tables to present the outcomes pertaining to stigma in healthcare, linkage to care and indicator condition testing in Portugal and Spain. EATG was also involved in drafting policy briefs for advocates' use at national level on strategies to reach most affected populations and reduce late diagnosis, including on testing beyond medical setting (community testing, self-testing, home sampling) and provider-initiated testing for patients presenting with indicator conditions. The [OptTEST tools](#) were also introduced to stakeholders on the margins of the



IAS2017 conference in Paris in July. EATG conducted the European Legal Environment Academy in September together with AIDS Action Europe, HIV Justice Network and GNP+. This workshop was based on OptTEST research and tools addressing stigma, legal and regulatory barriers to testing and linkage to care. It brought together pan-European networks, advocates at national level and persons working with migrants, people who inject drugs, sex workers, person living with HIV to explore the lessons learned from recent advocacy efforts and tools that could be used to support them. This workshop also contributed to further cross sectoral alliances.. In October, EATG's training for new treatment advocates (STEP UP) addressed testing used the OptTEST advocacy toolkit.



### EUROPEAN TESTING WEEK (ETW)

EATG was involved in the fifth edition of the European HIV-Hepatitis Testing Week in November 2017. The focus of this edition was mainly on new choices for testing and key populations. EATG reached out actively to different networks and groups representing the most affected populations to explore what ETW joint actions should be taken so that the campaign reflects issues that they face. A [Joint Statement](#) was formulated together with this working group and published in 10 European languages.

A statement targeting policy-makers and local organisations signed up for the Testing Week were also drafted.

### Outcomes of EATG initiated or contributed work

- The need to scale up testing, with a focus on most affected populations by diversifying the testing offer, was recognised in the EU presidency Malta Declaration and the European parliament resolution adopted in January and July respectively.
- **Consensus on community and integrated testing, self-testing is progressing** with regular discussion in the EU HIV, TB and viral hepatitis Think Tank (OptTEST policy briefs, HIV in Europe positioning on self-testing, support to the development of the ECDC HIV and Hepatitis testing guidance, CSF and Think Tank discussions)
- Greater attention to the needs of different key populations in the European Testing Week (EATG support to key populations temporary working group).
- Tools have been developed to improve the **delivery of indicator condition - based testing** and to **advocate for changes in legislation and regulations** to scale up access and uptake of testing by key affected groups
- Increasing and sustained LGBTI movement advocacy for targeted community testing was performed (eg. Endorsement by and participation in Testing week of European Parliament Intergroup on LGBTI, workshop at ILGA Annual conference, liaising for a demo on community rapid testing at that conference)
- The advocacy secretariat has also worked on strengthening the capacity of communities to address legal and regulatory barriers to testing and treatment effectively, drawing on materials developed by HIV in Europe. For instance, in October, EATG's training for new treatment advocates (STEP UP) addressed testing used the OptTEST advocacy toolkit. In September, a workshop to address problematic laws and regulations hindering access to testing and care for key populations was organised thanks in part to OptTEST support and materials. It brought together pan-European networks, advocates at national level and persons working with migrants, people who inject drugs, sex workers, persons living with HIV to explore the lessons learned from recent advocacy efforts and tools that could be used to support them. This workshop also contributed to further cross sectoral alliances collaborations.



## **ECDC - HIV Testing Guidance in the EU/EEA (Timeline: 36 to 48 months starting November 2016)**

EATG got involved in the ECDC tender for HIV testing Guidance in the EU/EEA led by CHIP Copenhagen. The project aims to provide Member States (MS) with an evidence-based framework that will guide the further development of national HIV testing policies in the EU/EEA by making available current evidence-based key options for intervention and considerations for their

implementation. The work for updating the ECDC guidance started, led by the CHIP programme in Copenhagen. EATG's role primarily revolves around identifying possible case studies of innovative testing models through our networks to fill in the gaps, to provide feedback on the data collection form, and assist with consolidating the newly found cases. It may also be involved in reviewing draft documents later in the process. In July, with the contribution of members, feedback was given on the data collection form.

EATG was also calling **FOR THE INTRODUCTION OF PREP IN NATIONAL PROGRAMMES AS PART OF COMBINED PREVENTION APPROACHES AND FOR INCREASED UNDERSTANDING OF TREATMENT AS PREVENTION IN COMMUNITY AND POLICY-MAKING CIRCLES.**

Following extensive discussion with Gilead at the March ECAB meeting, EATG wrote a letter asking Gilead to make it possible for Truvada®, or for generic equivalents of the Truvada fixed-dose combination (FDC), to be offered at generic prices to all European healthcare systems so they can be used as HIV pre-exposure prophylaxis (PrEP). A meeting to discuss this topic was scheduled in June.

In July, EATG organised a webinar for community activists to explore legal and regulatory barriers to the introduction of PrEP, including supplementary patent certificates which are hindering the swift introduction of generics for PrEP as way to contain costs. The webinar explored action by advocate, including country and cross-country research on patents status and questions to patent offices on patent extensions to promote stricter approach to patentability.

The issue of PrEP introduction in prevention programmes was also discussed in the June EU HIV, TB and viral meeting of member states experts associated with national authorities (so-called the Think Tank).

### **Outcomes of EATG initiated or contributed work**

- There is greater consensus on the need to introduce PrEP in national health programmes but price and regulatory barriers in some countries need to be addressed to enable the reimbursement of PrEP via national health insurance programmes

## INCREASE COMMUNITY INFLUENCE IN RELEVANT BIOMEDICAL AND SOCIAL SCIENCE COMMUNITIES

### EATG advocates for the inclusion of **COMMUNITY INVOLVEMENT IN CLINICAL RESEARCH ON THE POLITICAL AND SCIENTIFIC AGENDA**

EATG has been actively involved in discussions about the new Horizon 2020 call and the role of community in such calls. Recent experiences showed that community is often considered as a needed, but not as an equal partner. During the discussions this topic was raised. Community involvement in academic led projects should change.

#### Projects



#### **EUPATI - European Patient Academy of Therapeutic Innovation**

The EUPATI project ended in January 2017 this year. A follow-up project was created by some of the previous partners to make sure the project gets promoted further and that the sustainability of the deliverables (training materials etc.) can be guaranteed. Currently, EUPATI operates as a public-private partnership led by the European Patients' Forum (EPF). The follow-up project

is ongoing until December 2019 with active participation of EATG in the further promotion and implementation of the training resources within our membership and network. EATG is part of the Steering Group of EUPATI, and also contributes to some key elements of the project like communications and the editorial board, and also the Patient Expert Training Course. Existing EUPATI materials will be integrated within existing projects and activities (e.g. training projects and ECAB). EATG is involved in the development of a sustainability plan and general coordination of the transition of EUPATI. Several initiatives are also ongoing within EUPATI to secure its sustainability, and meaningful exploitation of the wealth of materials and know-how, of the project. EATG has been continuously involved in the conceptual design and theoretical framing of these initiatives. In December 2017, EATG has conducted a webinar for community on the use of the EUPATI Toolbox for training purposes: <https://youtu.be/bOXdPZc3TBE> and the use and knowledge of the Toolbox among the EATG members was surveyed.



#### **EHVA - European HIV Vaccine Alliance - an EU platform for the discovery and evaluation of novel prophylactic and therapeutic vaccine candidates**

**(Timeline: January 2016 - January 2021)**

[www.ehv-a.eu](http://www.ehv-a.eu)

EATG coordinated the clinical trial protocol review involving expert community members from Europe and USA (TAG), providing specific inputs on discussion on the control group and placebo use; inclusion/exclusion criteria; criteria for restarting treatment.

EATG coordinated the Patient Involvement Strategy (PIS) review by ensuring that potential participants are well informed about the risks associated with study procedures and that the language used is simple and understandable.

EATG contributed to the development and dissemination of the project brochure and newsletter (3<sup>rd</sup> edition).

EATG was present at the EHVA annual meeting (Rome, March 2017) and at the EHVA satellite symposium: Non-ARV Based Interventions to Combat HIV/AIDS: New Insights and Initiatives (Paris, July 2017).

In the end of April, 2 EATG members were appointed to join the project Independent Data Monitoring Committee (IDMC) and the Trial Steering Committee (TSC).



### **HIVACAR - Evaluating a Combination of Immune-Based Therapies to Achieve a Functional Cure of HIV Infection** (Timeline: January 2017 - January 2022)

[www.hivacar.org](http://www.hivacar.org)

From January 2017 EATG is actively involved in the HIVACAR project as the community partner of the consortium. The project aims at changing the current paradigm of HIV treatment by obtaining a functional cure for HIV thanks to effectively targeting residual virus replication and viral reservoirs. EATG is the leader for WP6: Socio-Economic and Psycho-Social Impact and Patient Engagement and contributes for WP4: Clinical Trial phase I/IIa Implementation and for WP7: Dissemination and Exploitation.

The project kick-off meeting took place in January in Barcelona. EATG presented an overview of the organisation mission and structure, role in the project and contributions in the different WPs, expected benefits and possible links with other EATG activities and projects.

EATG contributed to the development of the project communication plan including the communication strategy towards Civil Society and communities most affected by HIV/AIDS; finalised the first draft of the study design of the community based research: Potential Psycho-Social Impact of achieving a functional cure (with the support/review of a group of EATG members) and has continuously provided input on the clinical trial design in order to represent potential participants' interests.



### **EMERGE - Evaluating mHealth technology in HIV to improve Empowerment and Healthcare utilisation: Research and innovation to Generate Evidence for personalised care** (Timeline: May 2015 - May 2020)

[www.emergeproject.eu](http://www.emergeproject.eu)

EmERGE, a project funded by the European Union's Horizon 2020 Researcher and Innovation Programme under Grant agreement no: 643736, is developing an mHealth platform to enable self-management of HIV in patients with stable disease. EATG acts as community partner within this project and facilitates consultation and interaction with representative patients and clinicians from the 5 EU participating countries.

In April EATG published its annual newsletter for the project (deliverable 8.3):

<http://us11.campaign-archive1.com/?u=cbbd192bc22f3aafd511f4a13&id=206e979c57>

The flyer for the EmERGE project features the logo at the top, followed by logos for the Institute for Public Health and SENSIO. Two red boxes pose questions: 'Are you living with HIV and on antiretroviral therapy?' and 'Have you been stable on therapy with an undetectable viral load for 12 months or more?'. The main text describes the project's goal to develop an mHealth platform for self-management of HIV. It mentions that the platform will provide fewer clinic visits and more personal access to health data. A call to action asks for recruitment of people living with HIV to use the platform. Contact information for the HIV clinic in Antwerp is provided. The footer includes the project name and a brief description of the research and innovation platform.

- In line with deliverable 8.2 (dissemination strategy) the following products were developed:
  - Posters for community centres and clinics
  - Further Work on Developing External communications strategy for EmERGE in 2018; Identification of publications, conferences, dissemination of results etc
  - Updating of the website
  - Monitoring/work on Facebook page
  - Video interviews
    - This video interview with EATG project coordinator Brian West: <https://youtu.be/FMrZ47BnWaY>
    - Video interview with Sanja Belak, who works on EmERGE in Zagreb was sent out to you also in the EATG newsletter: [https://youtu.be/RO\\_5b74vTGk](https://youtu.be/RO_5b74vTGk)
    - Koen Block - EmERGE and the related pilot study as a key current task for EATG in this interview: <https://youtu.be/ErEJNNA5Wdc>
  - The Facebook page of EmERGE is kept up to date about current events and results: <https://www.facebook.com/EmERGE-mHEALTH-976956525674191/?ref=bookmarks>

The Facebook page regularly gets inquiries from people interested in getting involved - that we cannot currently take action on



### **Metrodora - Meaningful Engagement of Women in HIV Treatment Research**

In June, EATG received a positive reply regarding an application to a ViiV Healthcare - Positive Action Community Grant to develop a project focusing on Women and HIV. The overarching goal of

the project is to strengthen the meaningful and sustainable involvement of women in HIV Research and Development and to optimise engagement of women in clinical decision-making processes by educating women about gender-based differences in HIV research and promoting collaborative efforts with key stakeholders to address prevention and treatment regimens aligned to the needs of women living with or at risk of HIV. The first phase of the project, a desk study about the involvement of women in HIV clinical trials in Europe, was initiated in December.

## **EATG puts HIV AND CO-INFECTIONS ON THE POLITICAL AND SCIENTIFIC AGENDA OF RELEVANT STAKEHOLDERS**



### **European Community Advisory Board (ECAB) meetings on HIV** Giulio Maria Corbelli, ECAB Chair

The first HIV ECAB of 2017 (March 17-19) has seen the four main HIV drug producers (ViiV, Gilead, Merck Sharp & Dohme, Janssen) present in Brussels to discuss with 23 community representatives

from different regions the current pipeline for new ARV, including:

- Injectable and oral new products for long acting use
- More potent and tolerable drugs
- Preventive use of ARVs for PrEP

In addition, the community provided advise in the design of new therapeutic alternatives to “cART for life” (combined antiretroviral therapy) about:

- Preventive vaccines
- Therapeutic vaccines enabling the immune system to control the HIV infection following interruption of ART
- Treatment strategies derived from the cancer immunotherapy experience

Within the Viral Hepatitis Portfolio EATG developed the following events to pursue our work on co-infections and co-morbidities:



### **Thematic ECAB meeting on Viral Hepatitis**

The ECAB meeting on Viral Hepatitis was organised in Brussels on 19-21 May with presentations by Janssen and Gilead. 23 participants attended. The agenda included updates of HCV and HBV drugs, paediatric research, clinical trials as well as access issues in key regions.

### **HIV/TB portfolio**

### **Promoting a comprehensive response to HIV/TB co-infection in WHO Europe Region: the community perspective**

**Evgenia Maron: TB Coordinator**

A series of meetings organised by different stakeholders and spread over 4 days in Brussels (May 12-15) prioritized the discussion on the huge delay in scientific development of new drugs/diagnostics in order to respond to the multi-drug-resistant (MDR) TB epidemic that represents one of the main causes of death in the HIV community. The events also covered access and pricing. The meeting was organised in collaboration between EATG, Global TBCAB, TAG and TB People. Part of the meetings were aimed at identifying gaps in the research and development of new treatment for MDR TB bringing to the discussion industry and other stakeholders including policy makers. The following organisations attended the meetings: TB Alliance, Cepheid/ Danaher, FIND, Alere, Hain, Medicine Patent Pool, Quantumdx, Janssen, Otsuka, PanACEA consortium, Doctors without Borders, The Union, WHO. The community representation included 12 EATG members and guests, one third coming from the EECA region with the heaviest burden of MDR TB.

As preparation for the meetings in May EATG organized community-oriented webinars on TB Treatment and TB Prevention in collaboration with. The webinars are accessible here:

**TB Diagnostics:** <https://www.eatgtrainingacademy.com/webinar-on-tb-diagnostics>

**TB Treatment:** <https://www.eatgtrainingacademy.com/webinar-on-tb-treatment>

**The meeting has been followed up with a video documentation:** <https://youtu.be/wfDVnqgpbVQ>



#### **TB Online**

<http://www.tbonline.info/>

EATG continued its contribution to TB online with six other organisations: Community Media Trust, Treatment Action Group, Treatment Action Campaign, European AIDS Treatment Group, South Africa Development Fund and HIV i-Base.

TB Online is a news website that was established in 2011 and engages TB patients, health care providers, researchers and activists and expands their knowledge of TB and related issues. This platform was developed to disseminate information vital to alleviating and ultimately ending the worldwide TB epidemic. It features highlights on recent news in research and policy relevant to TB: advocacy activities, the state of the global response to TB, international policies and their implementation in the field, the latest research publications on diagnostics, TB treatment and access to care; in view of the close association between the HIV and TB epidemics, news posted to TB Online covers TB/HIV co-infection and related policies and issues.

TB Online also contains dedicated TB information sections on “TB Basics”, “Medicines”, “Diagnostics”, “Pediatrics”, “Vaccines” and “Guidelines”.

TB Online has a Facebook page and offers a free subscription service to its weekly news digests, the TB Online Weekly Newsletter.

TB Online is also the official website of the Global Tuberculosis Community Advisory Board (TB CAB), a group of research-literate TB activists dedicated to increasing community involvement in TB research and access to tools to fight TB.

TB Online is supported through a collaboration between Treatment Action Group (TAG) and European AIDS Treatment Group (EATG).

Ana Balkandjieva – providing updates of contents to the website and the regular newsletter.

#### **Community review of scientific material**

EATG continuously advocates with industry, academia, regulatory bodies and other stakeholder involved in medicine process to integrate the perspective of PLHIV in research and development for new drugs. From the beginning of 2017 eleven ECAB members have been involved in the review of 10 scientific documents including protocols for clinical trials, clinical trial’s synopsis and package leaflet for new medical products.

**EUROPACH - Disentangling European HIV/AIDS Politics:  
Activism, Citizenship And Health (Timeline: September 2016 -  
September 2019)**

The project kick-off-meeting took place in February in Berlin where EATG actively contributed to the discussion on the study objectives and potential outcomes and to the identification of other relevant European organisations able to provide data on the topic. In April, the EATG office received the visit of the researchers who have consulted the EATG archive for data collection. Several EATGB members have contributed to the oral history element of the project.

**Outcomes of EATG initiated or contributed work**

- through the review of protocols ECAB members have contributed to the improvement of clinical trials by providing input from a community perspective.
- ECAB and the review of protocols allowed ECAB members to learn more about clinical trials, drug development etc.





## ADVOCATE FOR AFFORDABLE TREATMENT AND EVIDENCE/RIGHTS-BASED POLICIES

### EATG puts **affordability on the political agenda**

EATG promoted its access to affordable medicines agenda through membership of and contribution to the European Patients' Forum, the European Public Health Alliance and the European Alliance on Affordable Medicine and Responsible R&D, EU Civil Society Forum and Think Tank.

In March, the members training on Health Technology Assessment (HTA) training was followed by a round-table with the European Commission, the Belgian HTA body, EATG members, European Public Health Alliance, Médecins du Monde, TB Europe Coalition/Global Health Advocates and Alliance for Affordable Medicines and responsible R&D to discuss the contribution of HTA to access to new essential medicines and to share experience on strategies to enhance access affordable medicines to medicines.

In July, EATG organised a community-oriented webinar on intellectual property (IP) barriers to affordable quality medicines and ways in which these can be addressed. The webinar gave participants an overview on intellectual property challenges and practical tips for advocates patent research and then it built on the case of pre-exposure prophylaxis for HIV (PrEP) as an example to reflect on lessons learned to be considered by community activists in advocacy for access to affordable medicines.



### **COST Action - Establishing A Research Network for Medicines Shortages (Timeline: April 2016 - April 2020)**

EATG is the only community group involved in the project and is collaborating with the working group dedicated to the patient's clinico-pharmacological needs and health outcomes in medicines shortages (WG4). In April, at the WG4 meeting in Brussels, EATG showed the draft results of a survey, developed by the EATG office and piloted/reviewed by a group of EATG members, highlighting the most important issues in terms of impact from **the patient perspective on HIV and hepatitis medicines shortages**. A final version of the survey integrating all the recommendations from the EATG members and the COST Action researchers is being developed. [http://www.health.bfh.ch/cost\\_medicines-shortages](http://www.health.bfh.ch/cost_medicines-shortages)



## Fighting **stigma and discrimination**

EATG has continued to promote exchange of best practices on the subject via the EU Civil Society Forum meetings and input into the EU HIV Think Tank. We co-chaired and co-organised the July CSF together with AIDS Action Europe.

Within the framework of OptTEST and together with AAE, HIV Justice Network and GNP+, EATG is preparing a community interactive workshop in September on removing punitive and restricting laws and regulation hindering testing and linkage to care of key populations.

## **Outcomes of EATG initiated or contributed work**

- There is increased interest at policy level in several countries to explore ways to access cheaper medicines.
- In February, the European Parliament adopted a report on EU options on access to medicines
- The Malta declaration and European Parliament resolution address the access to affordable medicines even if in a timid manner
- A European Commission study on the impact of R&D intellectual property incentives is underway



## RENEW ACTIVISM THROUGH SCALED UP TRAINING AND CAPACITY BUILDING

EATG INCREASED COMMUNITY INVOLVEMENT IN THE DESIGN AND DEVELOPMENT OF HIV AND CO-INFECTIONS RELATED ACTIVITIES

Within the context of several projects and activities community involvement was encouraged and supported. This can be seen in projects such as EmERGE, EUPATI, OptTEST, but also in activities organised by members such as STEPS (the CURE symposium), PrEP seminar etc.



The last event of the TB series of meeting organised in May was hosted by the Belgian senate with the objective to engage parliamentarians on advocacy to promote more investment in scientific research to respond to the MDR TB emergency in Europe.

EATG EMPOWERED COMMUNITY LEADERS TO ENGAGE IN DESIGNING AND IMPLEMENTING NATIONAL AND EUROPEAN PLANS ON THE TREATMENT AND PREVENTION OF HIV AND RELATED CO-INFECTIONS





### **COPE Project (Continuous patient Education)** <https://www.eatgtrainingacademy.com/cope>

One of the ways EATG continues building up capacity within the community is the COPE (Continuous Patient Education) project.

This project allows community members from different regions to translate existing or produce new material in their own language.

Three calls for COPE applications were sent out, two focusing in Hepatitis (March/November) and one addressing migrant communities (May). As a result of these calls, EATG supported 7 projects, in Albania, Turkey (2), Portugal, Spain, Ukraine and the UK.

### **Fact Sheet Project**

The goal of the Fact Sheet project is to establish easily accessible, local language resources for Eastern European healthcare HCPs, PAGs and patients, by developing a series of fact sheets adapted to the HIV landscape in the EECA region and translated into local languages. The project website [www.about-HIV.info](http://www.about-HIV.info) provides information in different EECA languages. During the spring, EATG members have been involved in proofreading and finalizing the factsheets. A long-term initiative about raising stakeholder engagement around the local HIV/AIDS landscape is being discussed. The project group has drafted a manifesto highlighting the key HIV facts and figures in the EECA and presenting calls-to-action for a range of stakeholders. This manifesto will be translated into Russian and its dissemination is planned for 2018.



### **STEP-UP Program**

Between March and December 2017 EATG has successfully implemented the STEP-UP 2017 programme. The programme consisted of the following modules:

- Module 1 in Sitges, Spain on 23-25 March 2017, focusing on focused on HIV treatment literacy
- Module 2 in Kiev, Ukraine on 27-30 April 2017, focusing on clinical research, hepatitis and tuberculosis co-infections and community participation in clinical trials
- Module 3 in Brussels, Belgium on 08-09 July 2017, focusing on the needs of different population groups and the psychosocial aspects associated with living with HIV
- Module 4 in Milan, Italy on 21-24 October 2017, focusing on working with stakeholders and advocacy strategies. After the training module the group attended the 16th European AIDS conference on 25 - 27 October 2017.
- Module 5 in Warsaw, Poland on 7-10 December 2017, focusing on treatment guidelines updates, HIV Cure, future of activism and project management

The programme was attended by 18 participants from Spain, Armenia, Netherlands, Ukraine, Italy, Russian Federation, Ireland, Uzbekistan, Poland, Turkey, France, Belarus, Kazakhstan, Belgium, Malta and Tajikistan. All materials of the training are accessible at the EATG Training Academy Website: <https://www.eatgtrainingacademy.com/step-up-training-modules-2017>.

You can get an impression of the STEP-UP 2017 programme by watching this video: <https://youtu.be/yo2ke2FuSCw>

### **Follow-Up projects implemented**

In 2017, several EATG trainees have completed follow-up projects for which they have received funding in the context of the trainings organized by EATG.

In Serbia, STEP-UP trainees have implemented a pilot project on peer counselling in an HIV clinic in Belgrade, thus providing direct support to 200 patients.

In Tajikistan, STEP-UP trainees have implemented Train-the-Trainers trainings, directed at women and LGBTI community activists. This way 12 LGBTI trainers and 12 women trainers have been prepared who have then organized community-oriented trainings themselves, providing HIV awareness trainings to 23 young women and 26 members of the LGBTI community.

In Armenia, STEP-UP trainees have organized a 7-day training for 30 community activists on HIV, HCV and TB treatment literacy and advocacy. Participants of the training have formed an active group that is implementing advocacy and awareness campaigns directed to access to treatment in Armenia.

In Kazakhstan, a STEP-UP trainee has opened a community center that provides information on living with HIV, peer support and patient schools in the Karaganda region of Kazakhstan. 350 people living with HIV have been reached through this project. As a direct result of this project, three peer consultants are working for the regional AIDS Center on a permanent basis.

In Russia, STEP-UP trainees have implemented a 2-day training with a focus on national advocacy strategies for 35 community activists from 6 different regions in Russia. The training addressed national and international treatment guidelines, mechanisms and actions how patients can influence the access to medicines in Russia and an algorithm of actions in case the rights of patients are violated.

In the Czech Republic, successful advocacy activities implemented by a trainee of the ITACA training within the context of a follow-up activity grant ensured the inclusion of the treatment cascade into the new National HIV Strategy of the Czech Republic.

In Portugal, a STEP-UP trainee implemented a study on the barriers of access to Hepatitis C treatment among active drug users in Lisbon. The study results will guide the community efforts to increase the access to HCV treatment for the community of people who inject drugs.



### Internal Training on Health Technology Assessment (HTA)

On 16th March 2017 EATG has organized an internal training on Health Technology Assessment (HTA) in Brussels, prior to the meetings of ECAB and the Policy Working Group. The HTA training was attended by 26 EATG members – training sessions have been delivered by the EATG member Joan Tallada, lecturer at the Institute for Global Health in Barcelona, and Valentina Strammello who is working on HTA as Programme Manager at the European Patients Forum (EPF).

### Monitoring and Evaluation Webinars

Together with EATG member Ian Hodgson EATG has organized three webinars on Monitoring and Evaluation of projects. The webinars are accessible here: <http://www.eatg.org/news/eatg-project-management-and-evaluation-webinars-all-you-need/>



### Outcomes of EATG initiated or contributed work

- A new cohort of young HIV activists have been empowered to assume a leading role in advocating for the needs of people living with HIV through 100 hours of in-depth training during the STEP-UP 2017 programme
- Knowledge and capacity of EATG members on Health Technology Assessment has been increased through the HTA training
- Trainees of EATG trainings have successfully implemented diverse follow-up projects, providing support to people living with HIV and strengthening the capacity of their local communities

## MAXIMISE IMPACT THROUGH MULTI-STAKEHOLDER STRATEGIC PARTNERSHIPS

### EATG ENSURED SUSTAINED EXTERNAL COMMUNICATION AND VISIBILITY

EATG was active in the preparation of the IAS2017 Conference in Paris in July.

### EATG FOSTERED AND HARNESSSED NEW PARTNERSHIPS AND COLLABORATIONS IN THE AGEING FIELD AND FURTHER PROMOTE THIS TOPIC



#### **AGEING WITH HIV - A Lifecycle Approach (Timeline: December 2015 – December 2018)**

[www.ageingwithhiv.org](http://www.ageingwithhiv.org)

The second conference took place in January in Bucharest, Romania and the focus of the meeting was children and adolescents living (and ageing) with HIV/AIDS (webinars, presentations and conference report available on the website).

104 persons attended from 30 countries, from all parts of Europe and Central Asia, the US, Africa and Latin America. 51% of the participants were under 30 years old and 34% of them under 26. The event was a unique opportunity to bring together the community, researchers, healthcare providers and other key actors working in the domain to discuss the latest research on the medical, psychological and social aspects of living and ageing with HIV/AIDS as children, adolescents and young adults. The conference raised many policy, training and capacity requirements that can improve the health and well-being of this group. 31 specific recommendations were formulated and will be taken forward by the different working groups.

The third phase of the project, focusing on the age group of 18-50, was launched by a kick-off meeting in August. The emphasis for the next conference (to be organised in 2018) will be on Quality of Life and Preventive Healthcare.



## HIV Long Term Health Survey (Timeline: 2015 - 2017)

The results on HIV long term health survey, conducted in 8 countries in 2016, were analysed and will be presented in 2018. The online survey reached 1,342 respondents via national or regional organisations of people living with HIV. The results are expected to increase knowledge about the experiences of people living with HIV in terms of issues related to their long-term health.



### HIV Outcomes

EATG has been involved in the [HIV Outcomes](#) Initiative, a multi-stakeholder initiative developing and communicating expert, evidence based consensus recommendations for policy makers focused on the provision and delivery of high quality of care for people living with HIV (PLHIV). It seeks to include in the policy agenda,

1. health outcomes - effective prevention and treatment of co-morbidities; good mental and emotional well-being; and life expectancy comparable to the general population;
2. social outcomes -the absence of discrimination and reduction of stigma; securing employment; particularly among communities at high risk and with a high burden of HIV.

The initiative is led by a core team of a researcher, civil society, physician. It gathers input from several actors including civil society, researchers, health professionals, public health institutions and industry. After a year of work, the HIV Outcomes Initiative presented its recommendations on 'improving long-term health, well-being and chronic care for people living with HIV' at the European Parliament in November in panel joined by the EU Health Commissioner. It also presented its findings at the Civil Society Forum and Think Tank meeting in December.





## ENSURE INTERNAL STRUCTURES ARE 'FIT FOR PURPOSE'

EATG DEVELOPED AN EFFICIENT SYSTEM AND STRUCTURE THAT ENABLES THE IMPLEMENTATION OF ITS WORKPLAN AND STRATEGY

EATG had one governance meeting this year. During this meeting the annual report 2016 (outcomes/ achievements) was discussed. We also discussed the delegation of authority process; some internal processes and roles/responsibilities within the organisation.

EATG communication

EATG News Bulletin

As of 18 April 2018 the EATG News Bulletin has 503 subscribers:

- 125 are subscribed for the Daily bulletin
- 345 are subscribed for the Weekly bulletin\*
- 32 are subscribed for the Monthly bulletin

Subscriber top three locations:

1. France - 27% of the subscribers
2. USA - 18% of the subscribers
3. UK - 7% of the subscribers





# WEBSITE STATISTICS - GOOGLE ANALYTICS

EATG - The statistics provided below is for the period 1 January 2017 – 31 December 2017.



**Users (total): 121.658**  
**New users (total): 120.628**  
**Sessions (total periods of browsing): 144.226**  
**Pageviews (number of total pages viewed by all users across all sessions): 192.893**

On average **monthly** for the period: **10 000 users**  
 On average **daily** for the period: **216 users**



New visitors: 90%  
 Returning visitors: 10%



User distribution by gender:

**Female - 46%**  
**Male - 54%**

### User distribution by age group:

age group 18-24 - **27,50%**  
 age group 25-34 - **33,50%**  
 age group 35-44 - **15,50%**  
 age group 45-54 - **12,50%**  
 age group 55-64 - **5,50%**  
 age group 65+ - **5,50%**

### The top 10 countries:

1. India - 30% of the users
2. United States - 14% of the users
3. Philippines - 9% of the users
4. South Africa - 5% of the users
5. United Kingdom - 4% of the users
6. United Arab Emirates - 3% of the users
7. Thailand - 2% of the users
8. Pakistan - 2% of the users
9. Myanmar - 2% of the s users
10. Nigeria - 2% of the users

### Some other European countries with around 1% of the users each:

20. Georgia
22. Germany
23. Russia
27. Netherlands
28. Switzerland
33. France
39. Italy
44. Ireland
45. Ukraine
48. Belgium
49. Romania



**TB Online Facebook** page - statistics as of 18 April 2018

Likes: **987**  
 Followers: **982**

### Likes distribution by country:

#### The top 10 countries:

1. India - 177 fans
2. Egypt - 138 fans
3. United States - 58 fans
4. Pakistan - 39 fans
5. Portugal - 31 fans
6. South Africa - 31 fans
7. Myanmar - 29 fans
8. Romania - 28 fans
9. Philippines - 22 fans
10. Brazil - 21 fans

Fan distribution by gender:

**Female - 40%**  
**Male - 60%**

### Followers distribution by country:

#### The top 10 countries:

1. India - 176 fans
2. Egypt - 138 fans
3. United States - 55 fans
4. Pakistan - 39 fans
5. Portugal - 31 fans
6. South Africa - 31 fans
7. Myanmar - 29 fans
8. Romania - 27 fans
9. Philippines - 21 fans
10. Brazil - 20 fans

Followers distribution by gender:

**Female - 40%**  
**Male - 60%**

### TB Online Weekly Newsletter - statistics as of 18 April 2018

The newsletter has been produced and disseminated via MailChimp once a week since September 2015. As of 18 April 2018 it has 491 subscribers, including individuals from the World Health Organization, the Stop TB Partnership, Unitaid, various universities, pharmaceutical companies and NGOs as well as researchers, medical doctors and activists.

- Subscriber top three locations:**
1. United States - 26% of the subscribers
  2. India - 17% of the subscribers
  3. South Africa - 5% of the subscribers

EATG INVESTED IN BETTER  
STAKEHOLDER RELATIONS VIA A  
SERIES OF EVENTS AND ACTIVITIES

EATG held a stakeholders meeting in January 2017 which was attended by more than 50 partners and stakeholders from different areas within the field. The meeting focused on the WP priorities as set by the organisation: migrants testing and linkage to care; EECA region; viable health care systems and community involvement.

EATG APPLIED FOR PROJECT  
FUNDING TO NON-PHARMA FUNDS  
AND FOUNDATIONS FOR EACH  
PILLAR OF THE ORGANISATION

Efforts have been done to secure non-pharma income. Major efforts were done to apply for project funding at EU level. No confirmations were given within the period of time. One project (PARADIGM) is entering phase 2 of the application process. Foundations were equally approached, mainly by training.

EATG IMPLEMENTED A SYSTEM  
THAT ENABLES REPORTING ON  
ACHIEVEMENTS TO EXTERNAL  
STAKEHOLDERS

As agreed during the strategic meetings, EATG now applies a 1.5-year work plan that is being updated and, if needed, revised every 6 months. During the June meeting a new framework has been adopted that allows better inclusion of specific objectives, outcomes, outputs and indicators. This will allow better evaluation of our activities.

EATG did publish a 25 years report that was presented at a public event in Kiev during the General Assembly

EATG published a 2016 annual report and regular newsletters.



## ENSURE ACTIVE & REPRESENTATIVE MEMBERSHIP

**EATG made it a priority to further IMPLEMENT THE DMAG PROJECT ON WELCOMING AND SUPPORTING EATG MEMBERS.**

The mentorship project within DMAG continues. It brings together new members and their mentor to optimize better integration within the organisation.

### **Establishment of a fair compensation system**

New contracts are being provided to members. However recent experiences have shown that TORs need to be clearer. Coordination should also be kept within the organisation.

The board, DMAG and others have been working on an optimised membership recruitment strategy. After adoption by the board, DMAG started reviewing new applications again as decided by the General Assembly.

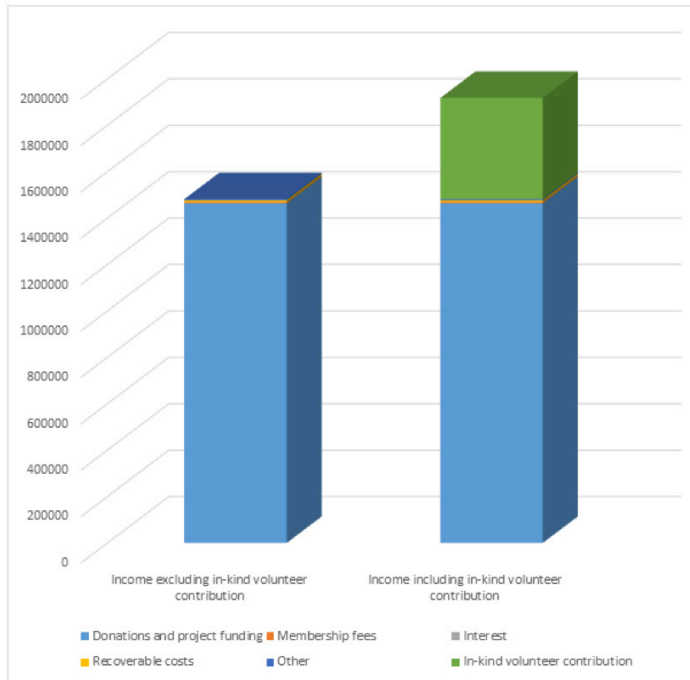
**THE DIVERSITY OF THE HIV AFFECTED POPULATION IS OPTIMALLY REFLECTED WITHIN EATG'S MEMBERSHIP**



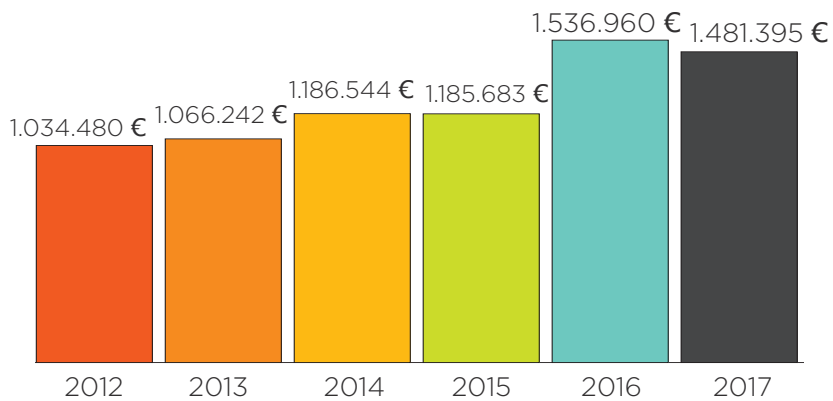
# FINANCES 2017

## INCOME € 1.48 million

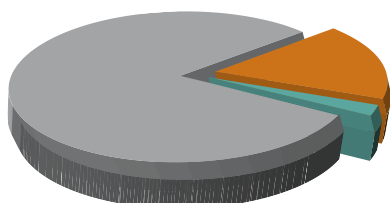
To give a true & fair view of the financial position of the organisation, income is shown here both excluding and including the in-kind contribution of our volunteers\*.



## OUR INCOME DEVELOPMENT



## OUR FUNDERS

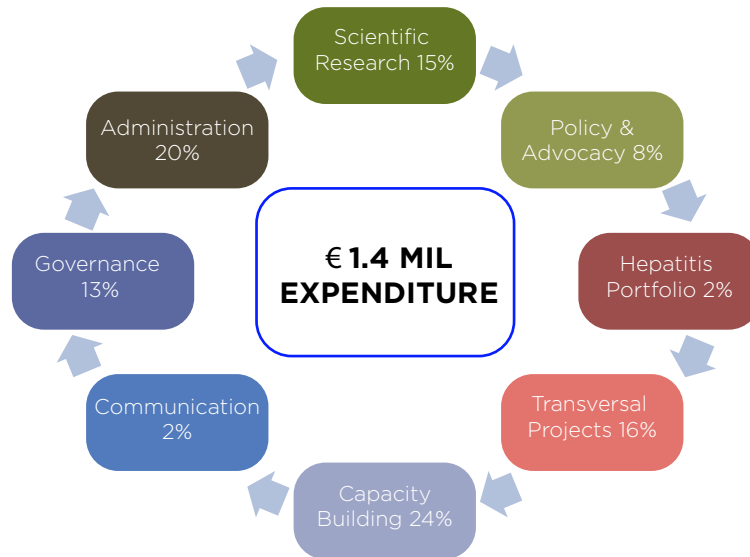


Pharmaceutical Companies 86%  
 European Commission/IMI 12%  
 Other 2%

## EXPENDITURE

In 2017, we invested 1.372.184 € in numerous ways, including projects, portfolios, trainings and activities, as well as representation, staff salaries and office operations.

Here's where the money went:



### 2017 EXPENDITURE ACCORDING TO STRATEGIC GOALS

Strategic Goal 1	Target Resources on access gaps & specific key populations	2 % € 21.471
Strategic Goal 2	Increase community influence in relevant biomedical & social science communities	13 % € 182.402
Strategic Goal 3	Advocate for affordable treatment & evidence/rights based policies	10 % € 131.123
Strategic Goal 4	Renew activism through scaled up training & capacity building	25 % € 348.812
Strategic Goal 5	Maximise impact through multi-stakeholder strategic partnerships	14 % € 187.140
Strategic Goal 6	Ensure internal structures are "fit for purpose"	26 % € 362.436
Strategic Goal 7	Ensure active & representative membership	10 % € 138.800

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## OUR VOLUNTEERS

EATG is a membership-led and membership-driven organisation. The work of EATG members is vital and many of our members are very active. We estimate the volunteer time in 2017 amounts to be at least:

14.240 hrs

8 full-time staff

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[www.eatg.org](http://www.eatg.org)

You can find more financial information on our website via the following link:

[www.eatg.org/financial-compliance](http://www.eatg.org/financial-compliance)





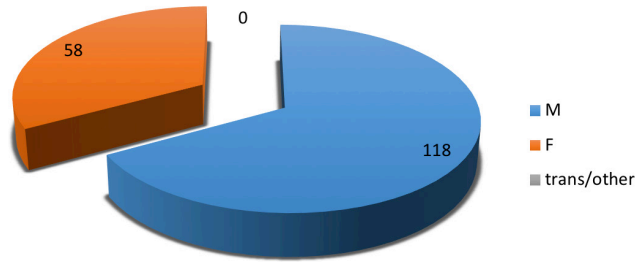
# MEMBERSHIP STATISTICS

## January - December 2017

We had 177 members at the beginning of the year, coming from 47 countries (including US, South Africa and Canada). After a stop following the 2016 GA decision, 10 new members were approved in 2017. 11 members left the organisation during the year. By the end of the year we had 176 members.

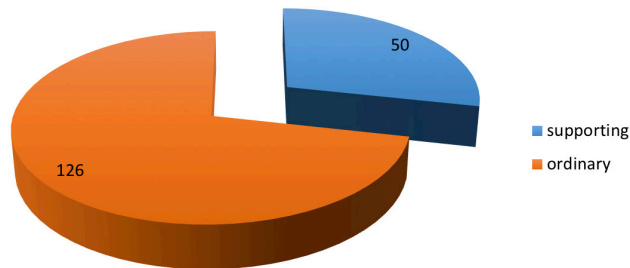
## Men-women

The gender balance has slightly improved during the past years with now 67,05% men (117) compared to 32.95% women (56).



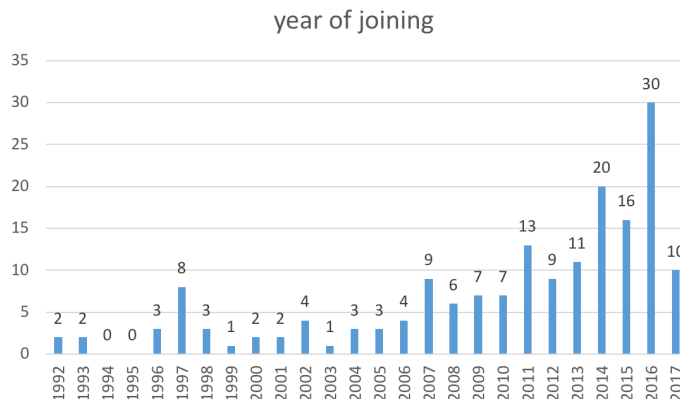
## Supporting-ordinary members

At the end of 2017 we had 126 ordinary members (members with voting rights) and 50 supporting members.



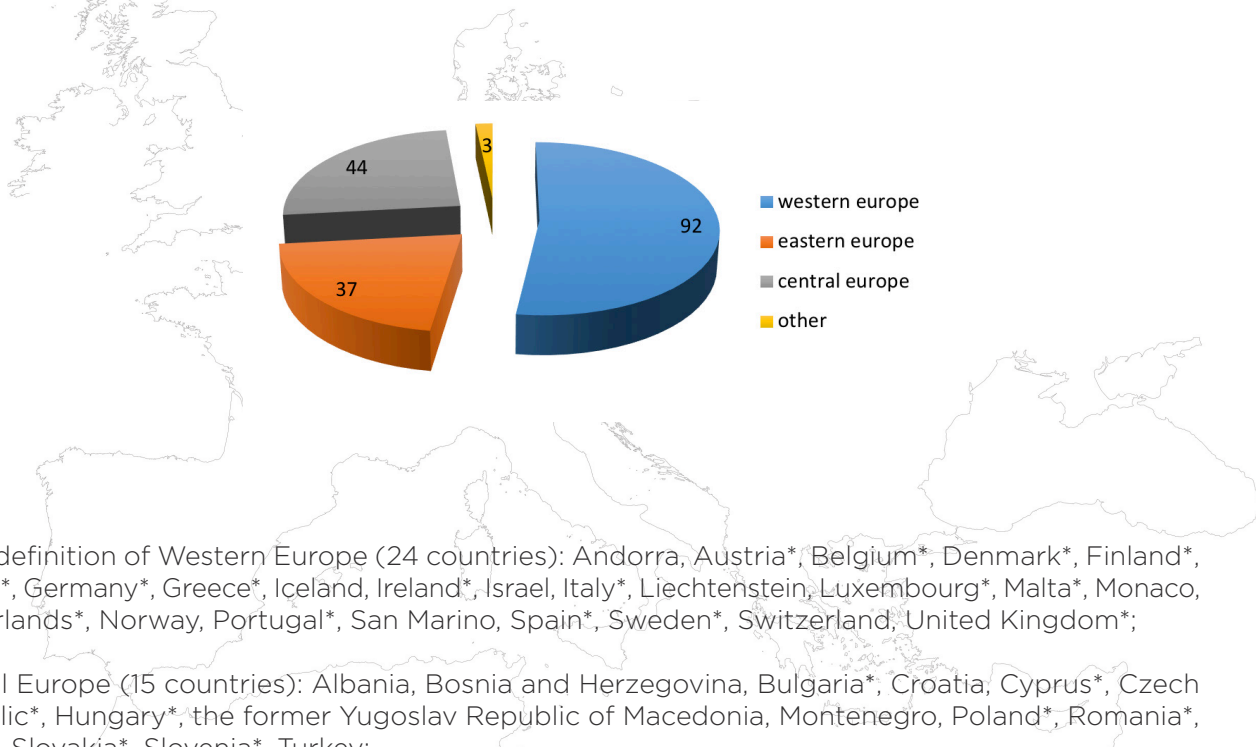
## Year of joining

The majority of our members (end of December 2017) joined the organization in 2016, followed by 2014, 2015 and 2011. The organization still has some original founding members. Almost half of the membership joined the organization in the past 5 years.



## Countries

The majority of our members still came from Western Europe (as defined by WHO). By the end of 2017 92 members came from this region. 44 members were from Central Europe and 37 members came from Eastern Europe. We clearly see increases within the last years in our membership coming from Central and Eastern Europe.



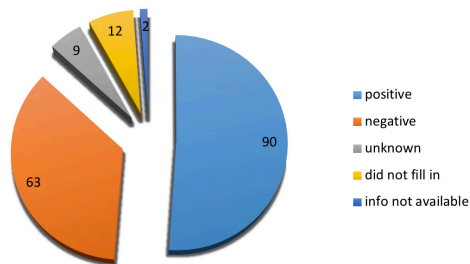
WHO definition of Western Europe (24 countries): Andorra, Austria\*, Belgium\*, Denmark\*, Finland\*, France\*, Germany\*, Greece\*, Iceland, Ireland\*, Israel, Italy\*, Liechtenstein, Luxembourg\*, Malta\*, Monaco, Netherlands\*, Norway, Portugal\*, San Marino, Spain\*, Sweden\*, Switzerland, United Kingdom\*;

Central Europe (15 countries): Albania, Bosnia and Herzegovina, Bulgaria\*, Croatia, Cyprus\*, Czech Republic\*, Hungary\*, the former Yugoslav Republic of Macedonia, Montenegro, Poland\*, Romania\*, Serbia, Slovakia\*, Slovenia\*, Turkey;

Eastern Europe (15 countries): Armenia, Azerbaijan, Belarus, Estonia\*, Georgia, Kazakhstan, Kyrgyzstan, Latvia\*, Lithuania\*, Moldova, Russia, Tajikistan, Turkmenistan, Ukraine, Uzbekistan.

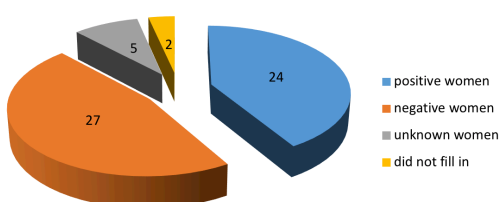
## HIV status

At the end of 2017 we had 90 HIV-positive members (51.4%); 63 members (38.69%) identified themselves as HIV negative. 9 members said their status is unknown. No information was available for 14 members.



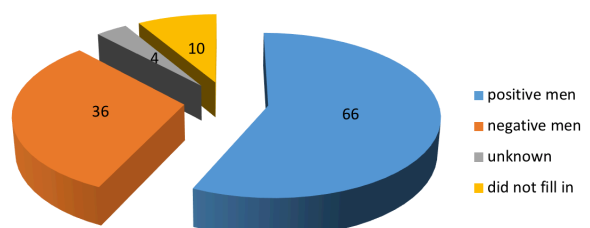
## HIV status women

Most of the women within the organisation identified themselves as HIV-negative (27/58) at the end of 2017 and 24 as HIV positive (42.86%).



## HIV status men

Most of the men identified as HIV positive at the end of 2017 (56%).



## GOVERNANCE

### The Board of Directors

The EATG General Assembly elects the Board of Directors (2 year term).

Jackie Morton (chair) – Sanja Belak Skugor (secretary) – Brian West (treasurer) – Luis Mendaõ (director) – Nikos Dedes (director)

As from the General Assembly in September 2017 in Kiev the board included: Nikos Dedes (chair); Brian West (treasurer) – Bryan Teixeira (secretary) – Mario Cascio (director) – Esther Dixon-Williams (director)

### The EATG External Advisory Board

Lella Cosmaro – Michel Kazatchkine – Jürgen Rockstroh – Matthew Weait – Sini Pasanen – Ricardo Baptista Leite

### Development and Membership Advisory Group (DMAG)

The Development Membership Advisory Group DMAG is the internal group dealing with membership issues and internal working mechanisms.

DMAG chair: Memory Sachikonye, later joined by Ferenc Bagyinszky

### Chairs

**The Policy Working Group:** Andrej Senih (until the GA 2017)

**ECAB:** Giulio Maria Corbelli

**The Training and Capacity Building Working Group:** Damian Kelly

### The Staff Members

Koen Block, Executive Director; Marie McLeod, Financial Manager; Giorgio Barbareschi, Scientific Officer; Ann Isabelle von Lingen, Policy Officer; Mariana Vicente, Project Coordinator; Kristjan Jachnowitsch, Training Coordinator; Maria Dutarte, Project Manager; Tamas Bereczky, Communications Officer.

### EATG funders

AbbVie • Cepheid • European Commission • IMI • Janssen • Gilead • HIV in Europe • Merck Sharp & Dohme • Mylan • Otsuka • ViiV Healthcare



# Annex 1: Goals and objectives

## GOAL 1: TARGET RESOURCES ON ACCESS GAPS AND SPECIFIC KEY POPULATIONS

**Objective 1.1** Prioritise (sub-) regions, countries, and cities with the greatest gaps in access to screening, prevention, and affordable treatment as well as inequities in protection from stigma and discrimination

**Objective 1.2a** Prioritise key populations with the greatest gaps in access to screening, prevention, and affordable treatment as well as inequities in protection from stigma and discrimination

## GOAL 2: INCREASE COMMUNITY INFLUENCE IN RELEVANT BIOMEDICAL AND SOCIAL SCIENCE COMMUNITIES

**Objective 2.1** Improve effectiveness and efficiency of members' and community involvement in HIV-related social and clinical research

## GOAL 3: ADVOCATE FOR AFFORDABLE TREATMENT AND EVIDENCE/RIGHTS-BASED POLICIES

**Objective 3.1** Expand community involvements in the promotion of affordable and innovative treatment and services for HIV and co-infections

**Objective 3.2** Promote enabling socio-economic and legal environments to fight stigma and discrimination as well as human rights violations

## GOAL 4 RENEW ACTIVISM THROUGH SCALED UP TRAINING AND CAPACITY BUILDING

**Objective 4.1** Build-up capacity on cascades of care and "Knowing your epidemic" especially on key population access gaps

**Objective 4.2** Provide training and capacity building using face-to-face as well as distance learning technologies

## GOAL 5 MAXIMISE IMPACT THROUGH MULTI-STAKEHOLDER STRATEGIC PARTNERSHIPS

**Objective 5.1** Confirm key strategic partners and develop working agreements with them, including community representation within their structure

**Objective 5.2** Pursue work on co-infections, co-morbidities, well-being and ageing through collaborative arrangements with pre-existing specialist organisations

## GOAL 6 ENSURE INTERNAL STRUCTURES ARE 'FIT FOR PURPOSE'

**Objective 6.1** Ensure that all levels of EATG are working collaboratively towards achieving the goals of the LTS

**Objective 6.2** Establish a strong fundraising capacity to build sustainability and a diversified funding base in terms of the needs of the LTS and beyond

**Objective 6.3** Establish an M&E system that demonstrates the difference EATG makes to the quality of life of PLHIV and other at-risk communities across Europe

## GOAL 7 ENSURE ACTIVE AND REPRESENTATIVE MEMBERSHIP

**Objective 7.1** Enhance member engagement in all activities of EATG

**Objective 7.2** Establish a system of strategic recruitment with focus on diversity and representation



**EATG would like to thank its members, partners, stakeholders, funders and other contributors for their continued support, collaboration and trust.**



European  
**AIDS Treatment**  
Group