Long Term Strategy
2020 — 2025

Diversity Is Strength
Preamble

EATG’s Long Term Strategy (LTS) 2020-2025 is intended to guide all our activities, internally and externally, over the Strategy’s six years. It sets out our high-level aspirations which subsequently drive more detailed work plans as well as monitoring and evaluation frameworks, including decisions about when EATG may be best suited to lead or with whom we may need to partner in order to achieve our strategic priorities.

EATG is a member-led organisation of people living with or affected by HIV and associated infections (including viral hepatitis, TB, STIs) and morbidities. We are a diverse group of people from across Europe and Central Asia. We value our diversity in nationalities or countries of residence, languages, sexes, genders, ages, beliefs, and ethnicities.

We see this variety in who we are as a strength.

We emphasise a person-centred approach to addressing the HIV-related needs of all key and vulnerable populations. We are committed to promoting 21st century medical and social science to make transformative change for best access for best lives. We participate at the European level in achieving the UN’s Sustainable Development Goals, including universal health coverage (UHC), as well as ending AIDS, viral hepatitis, and TB as public health threats by 2030. We are dedicated to promoting the GIPA (Greater Involvement of People living with HIV/AIDS) principle throughout our work. We collaborate with and support EATG members and partners in Central and Eastern Europe, and Central Asia, and promote sustainable services.

This LTS emerges from EATG’s revised Mission:

Equitable, timely and sustainable access to effective prevention, diagnoses, treatment and holistic care for all people living with and affected by HIV and associated infections and morbidities.
Programme Areas

Over the 6 years of this LTS, EATG will focus on three programme areas:

1. Quality of Life

To engage, inform and empower all people living with and affected by HIV in improving their health-related quality of life and holistic well-being throughout their lives.

This programme prioritises working towards the integration of services, including sexual and mental health services, and challenging stigma and discrimination as well as other barriers to services.

2. Combination Prevention

To inform, engage, and empower all persons at risk of acquiring HIV and associated infections to increase access to and usage of HIV, viral hepatitis, TB, and STI combination prevention and testing strategies in affected communities.

This programme prioritises promoting a full range of testing/diagnostic options, biomedical prevention, and harm reduction, in the context of welcoming, non-stigmatising, and effective community-driven or community-based services.

3. Partners in Science

To engage, inform and empower all people living with and affected by HIV in ensuring that ongoing research continues to yield best quality new diagnostics, medicines, medical devices, care, as well as progress towards cure relative to HIV, viral hepatitis, TB, emerging infectious diseases, co-morbidities and STIs.

This programme will focus on the research and development of new treatment and biomedical prevention methods for people living with HIV, at risk of HIV, and affected by conditions related to HIV. It will also concentrate on research standards, ethics and equitable access to research.
Outcomes 2025

The intended 2025 high-level outcomes of these programme areas are:

1. Healthy communities of people living with and affected by HIV, with enhanced quality of life and access to effective, integrated health and support systems.

2. Empowered affected communities working in collaboration, with access to the HIV, viral hepatitis, TB and STI prevention tools they need.

3. Communities of people living with and affected by HIV engaged with all prospective and observational research processes in up-to-date diagnostics, medicines, medical devices and care relative to HIV, viral hepatitis, TB and STIs.

EATG believes we can help to achieve these outcomes because we are person-centred. We prioritise working with people living with HIV. We also prioritise working with marginalised communities to help ensure they have access to the services they need, regardless of who they are or where they are located across Europe and Central Asia. EATG pays attention to people who are particularly vulnerable to HIV and associated infections and morbidities as well as lacking in adequate services, including people who use drugs, MSM, sex workers, people on the move (especially refugees, asylum seekers, undocumented migrants and the homeless), transgender and non-binary people, women, people in prison and other closed settings, people who are under 25 or over 50 years of age and any others who are their sexual partners. We also prioritise work with our partners in Central Europe, Eastern Europe and Central Asia to promote sustainable access to the best services, with the highest standards of care.

Ultimately, we believe that employing the GIPA Principle and the standard of “nothing about us without us” best promotes our health-related quality of life and holistic well-being, best ensures health promotion and prevention services that reach our communities, and best supports scientific research and guideline development that is responsive to real patient and community needs.
Strategic approaches to achieve our goals

These five approaches are transversal: they may be used by all three programme areas.

Capacity building
- strengthening the knowledge and capacity of all people living with and affected by HIV to understand key scientific and policy developments that affect them, effectively communicate about their implications, and collaboratively advocate for improvements in research and policy
- sharing robust data and good practices to support the implementation of interventions at national and local levels

Movement building
- building strategic alliances and collaborative campaigns with NGOs, EU decision makers, UN agencies, funders and other key stakeholders active in the fields of HIV, hepatitis B and C, TB and STIs across Europe and Central Asia
- using EATG as a platform for exchange and networking to improve the quality and impact of community activism and interventions at local, national and international levels
- developing effective internet and social media presence to maximise our online activism

Advocacy
- becoming more vocal and articulate in challenging laws, policies, practices and misperceptions about the diversity of people living with and affected by HIV, including raising awareness on how prejudice, stereotypes, stigma, discrimination and criminalisation undermine the exercise of our human rights and attainment of well-being
- actively engaging in decision-making mechanisms, key policy and implementation debates to maximise access, uptake and sustainability of the highest quality diagnostics, medicines and other services for HIV, viral hepatitis, TB and STIs
- ensuring the diversity of people living with and affected by HIV is represented in key policy forums, including on drug policy, affordability/price reduction of diagnostics and medicines, and Universal Health Coverage (UHC)
Research

- meaningfully engaging the diversity of people living with and affected by HIV in clinical research priority setting, guideline development, design, implementation, and evaluation relative to the prevention, diagnosis, care and treatment of HIV, viral hepatitis, TB and STIs
- meaningfully engaging the diversity of people living with and affected by HIV in social science research, including on living and ageing with HIV and best practice in reaching affected communities

Collaboration with partners in Central and Eastern Europe and Central Asia

- building evidence, monitoring and reporting on rights violations in specific countries or sub-regions
- supporting increased access to highest quality HIV, viral hepatitis, TB and STI prevention, diagnostics, treatment and care
- advocating for sustainable funding of services and any needed technical support in those countries where international donor funding is scheduled to end
- building strategic partnerships
Core Programmes

Quality of life
Combination Prevention
Partners in Science

Strategic Approaches

Capacity building
Movement building
Advocacy
Research
Collaboration with partners in Central and Eastern Europe and Central Asia

Strengthening the knowledge and capacity of communities, and disseminating robust data and good practices.
Building strategic alliances, promoting networking, and developing effective internet and social media presence.
Becoming more vocal and articulate, and actively engaging in key policy and implementation debates.
Engaging with all phases of clinical research and guideline development, and with social science research including on ageing with HIV and best practice in reaching communities.
Reporting on rights violations, supporting increased access to highest quality services, advocating for sustainable funding of services, and building strategic partnerships.
Healthy communities of people living with and affected by HIV, with enhanced quality of life and access to effective, integrated health and support systems.

Empowered affected communities working in collaboration, with access to the HIV, viral hepatitis, TB, and STI prevention tools they need.

Communities of people living with and affected by HIV engaged with all prospective and observational research processes in up-to-date diagnostics, medicines, medical devices, and care relative to HIV, viral hepatitis, TB, and STIs.

End AIDS by 2030
Quality of Life

Purpose

To engage, inform and empower all people living with and affected by HIV in improving their health-related quality of life and holistic well-being throughout their lives.

Expected 2025 high-level outcome:

Healthy communities of people living with and affected by HIV, with enhanced quality of life and access to effective, integrated health and support systems.
Scope
To engage, inform and empower people living with and affected by HIV from across Europe and Central Asia in:

ACCESSIBLY LINKED AND INTEGRATED QUALITY SERVICES, e.g.,

- promoting integrated prevention, diagnosis, treatment and care approaches to the sexual health, mental health and quality of life of all people living with HIV throughout their life cycle, especially those at risk of limited service access, e.g. sex workers and substance users
- promoting the integration of services that specifically address HIV, viral hepatitis, TB and co-morbidities
- co-designing/developing and evaluating new and integrated services and models of care

CHALLENGING STIGMA AND DISCRIMINATION, e.g.,

- advocating for improvements in laws, regulations, policies and practices that undermine the full exercise of the human rights and/or criminalise the lives and behaviours of all people living with and affected by HIV
- promoting community-based, peer-led or community-influenced HIV-related services that are safe and secure for all people living with or affected by HIV, where people can learn and exchange information, meet allies and develop resilience
- tackling stigma and discriminatory attitudes in our communities and among service providers, including relative to U=U promotion and increasing PreP awareness
- participating in implementation research to improve service delivery and approaches to challenging legal and regulatory barriers to HIV, viral hepatitis, TB and STI services, especially in Central Europe, Eastern Europe and Central Asia

PROMOTING SUSTAINABILITY OF HEALTH AND COMMUNITY SERVICES, e.g.,

- monitoring access to optimal treatment and diagnostic options and their sustainability, raising awareness to barriers, and making recommendations to responsible stakeholders
- challenging undue use of intellectual property provisions to limit price competition and access to cheaper medicines

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1 For example, freedom of thought and expression; freedom to decide whether and when to be diagnosed or to begin treatment; sexual and reproductive health and rights, with a full and satisfying sexual and emotional life; freedom to make informed decisions about becoming pregnant and initiating breastfeeding; workplace rights; and confidentiality of medical records.
Combination Prevention

Purpose
To inform, engage, and empower all people living with and at risk of acquiring HIV in increasing the usage of HIV, viral hepatitis, TB and STI combination prevention and diagnostic strategies, especially in affected communities.

Expected 2025 high-level outcome
Empowered affected communities working in collaboration, with access to the HIV, viral hepatitis, TB and STI prevention tools they need.
Scope
To engage, inform and empower people living with and affected by HIV from across Europe and Central Asia in promoting and participating in delivering:

A FULL RANGE OF TESTING/DIAGNOSTIC OPTIONS, e.g.,
- integrated community-based and/or community-influenced HIV, hepatitis B & C, TB (including multidrug-resistant and latent TB) and STI testing and treatment
- HIV self-sampling and self-testing
- indicator condition (provider initiated) testing

BIOMEDICAL PREVENTION OPTIONS, e.g.,
- TASP/secondary prevention: providing HIV care and treatment for newly diagnosed people, to support achieving and maintaining undetectable viral loads
- hepatitis B and HPV vaccination
- PEP
- all means of PrEP
- topical prevention incl. condoms /microbicides
- digital/electronic support in TASP/PrEP

HARM REDUCTION, especially in Eastern Europe and Central Asia, e.g.,
- Opioid Agonist Therapy and clean needles/syringes
- Naloxone
- other treatment therapies

OTHER INTERVENTIONS TO ADDRESS PSYCHO/SOCIO/ECONOMIC DETERMINANTS OF HEALTH, e.g.,
- prevention of vertical transmission
- accessible services for all people exposed to sexual violence, regardless of sex and gender
- housing
- psycho-social support
- decriminalisation of behaviour/status
Purpose

To engage, inform and empower all people living with and affected by HIV in ensuring that ongoing research continues to yield best quality new diagnostics, medicines, medical devices, care, as well as progress towards cure relative to HIV, viral hepatitis, TB, emerging infectious diseases, co-morbidities and STIs.

Expected 2025 high-level outcome

Communities of people living with and affected by HIV engaged with all prospective and observational research processes in up-to-date diagnostics, medicines, medical devices and care relative to HIV, viral hepatitis, TB and STIs.
Scope
To engage, inform and empower people living with HIV and affected populations from across Europe and Central Asia in clinical and social science research, guideline development, and science and regulatory policy debates relative to:

NEW TREATMENTS RELEVANT FOR PEOPLE LIVING WITH HIV, e.g.,
- ageing processes/mechanisms in HIV (e.g. chronic inflammation and immune deficiencies)
- mental health (e.g. depression)
- cure strategies
- long-acting compounds
- alternative and additional incentives for medicine development and innovative R&D
- treatments for drug-resistant TB, including multidrug-resistant TB (MDR-TB) and extensively drug-resistant TB (XDR-TB)
- treatments for paediatric HIV
- new antibiotic development for bacterial STIs and new substances for viral STIs

DIGITALISATION, e.g.,
- data protection,
- e-health
- ethics

STANDARDS AND ETHICS, e.g.,
- research and development into patient reported outcomes (PROM) and experience (PREM)
- ensuring diversity of participants in all research
- health technology assessment to inform decision-making about priorities in HIV treatment and care
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