



2014

stimulating community involvement in research

Annual Report
(January - December 2014)

**EA
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European
AIDS Treatment
Group

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COMMUNITY INVOLVEMENT

IN HIV TREATMENT, PREVENTION AND CLINICAL RESEARCH

Main activities

Treatment as Prevention (TasP)

In February, together with NAM, EATG launched a Community Consensus Statement, setting basic standards that preserve the right of people with HIV to make informed choices about their health, while maximising the power of HIV drugs to help end the epidemic. The Statement has been endorsed by over 30 prominent organisations in the field of HIV prevention and advocacy, including the Global Network of People Living with HIV (GNP+). The statement can be found and signed on at www.HIVt4p.org.

On 20 July, EATG, NAM Aidsmap and HIV in Europe hosted an interactive community satellite meeting on the margins of the International AIDS Conference in Melbourne, **“The Use of Antiretroviral Treatment for Prevention: the role of community, tensions and ways forward”**. Speakers and participants examined issues that need to be addressed before Treatment as Prevention (TasP) can be implemented equitably, efficiently and in accordance with individuals’ wishes and their human rights.

Discussion included the need of People Living With HIV/AIDS (PLHIV) and those at risk to take ownership of the debate and get involved in guidelines developments to ensure these reflect reality and needs of those affected. The preconditions of effective screening and testing strategies were raised and effective access to treatment was underlined. TasP is not a silver bullet for prevention and HIV negative people should not rely on TasP only and the problem of transmission during early infection remains a remain important challenge. Therefore it is crucial to look at TasP in a wider context of prevention tools such as pre-exposure and post-exposure prophylaxis. Some doubts were expressed about the feasibility, effectiveness and the current cost of drugs of Prep and TasP.

Cure

On November 1st, one day before the HIV Drug Therapy Congress in Glasgow, a community initiative was organized and chaired by Giulio Maria Corbelli (ECAB Chair) at the Scottish Exhibition and Conference Centre (SECC). The meeting brought together representatives of the international HIV community network, to discuss potential scenarios, including expectations and needs of PLHIV in relation to a possible cure, or strategies to control the

HIV infection in the long term. The first part of the meeting included presentations on the research on long-term drug-free remission of HIV, the identification of mechanisms of the immune system for the eradication of HIV, treatment interruptions in the clinical practice, and methods to measure latency and target reservoirs. Giulio presented an overview of the research and trials ongoing all over Europe.

During the second part of the meeting Brian West and Damian Kelly chaired the discussion on the feelings of the community about the possibility of a total remission from the HIV

infection. Participants were asked what would be the expectations and concerns once a “cure programme” will be finally available, including aspects such as risk taking, pricing and reinfection.

At the end of the meeting it was agreed that the EATG should reinforce the collaboration with other HIV patient groups to guarantee that the community is represented in the debate on the HIV cure and its related topics. For this reason a number of participants decided to join the ECAB mailing list on the cure to further the discussion after the meeting.



New Developments in HIV Prevention

Gus Cairns, project leader for EATG

Together with AVAC (AIDS Vaccine Advocacy Coalition) and National AIDS Map (NAM) EATG organized three webinars addressing a range of topics in HIV prevention research, hosted jointly by NAM and AVAC. The webinars reflected the community perspective on new prevention strategies such as Treatment as Prevention (TASP), Pre-Exposure Prophylaxis (PrEP) and HIV Vaccines. EATG members were invited to participate in the webinars in preparation to the multi-stakeholder meeting planned in January 2015.

The project intends to:

- Increase and update the knowledge of EATG members on latest advances in HIV biomedical prevention (through webinars and other materials).
- Highlight the perspective of the community in terms of social/ethical/regulative issues that are linked to the new strategies of prevention.
- Identify the needs to advocate for innovative methods of prevention.
- Produce a report to present the position and responsibility of the community on biomedical prevention.

European Community Advisory Board (ECAB) meetings on HIV

Giulio Maria Corbelli was elected as new ECAB chair during the EATG General Assembly in September in Istanbul, following up on Chris Cziria and Paul Clift who have been co-chaired ECAB activities between 2012 and 2014.

Two HIV ECABs were held in 2014.

Twenty-three ECAB members participated in the first HIV ECAB of 2014 (31st of January-2nd of February). Training on the scientific and regulatory processes linked to the development of paediatric treatments in the EU was delivered by Michal Odermarsky. During the Sunday meeting Paola Mosconi, Coordinator of the ECRAN consortium, presented some results of the ECRAN project and discussed with the members possible collaborations for the upcoming event (see the ECRAN session).

Twenty-one ECAB members discussed biomedical research and development and access during the second ECAB meeting (4 and 6 of April 2014). David Stuart and Dr Christopher Hilton from London, together with two EATG members Tamás Bereczky and Siegfried Schwarze, gave a training session on

the use of party drugs and HIV transmission among men who have sex with men. During the Sunday meeting the participants discussed the involvement of EATG members in the European Patient's Academy on Therapeutic Innovation (EUPATI) project (see the EUPATI section).

The last ECAB meeting 22 ECAB members and community delegates attended the third and last HIV ECAB of 2014 (October 17th-19th) in Brussels. During the three-day meeting the members met with Gilead, ViiV Healthcare, Merck Sharp and Dome to discuss about clinical development and innovation. Access was brought on the agenda. For the first time the ECAB invited representatives from Sandoz, the generic pharmaceutical division of Novartis, to discuss how expanding to the generic market could increase the options of treatments for people living with HIV in different European settings. On Sunday October 19th Barbara Ensoli, from the Italian National Institute of Health, presented the outcomes of the ongoing trial of the TAT-protein vaccine. The research showed that the TAT vaccine has some potential for therapeutic immunization by reducing immune activation and improving immune function in subjects on HAART.

CHAARM (Combined Highly Active Anti-Retroviral Microbicides)

Gus Cairns, steering committee member and project leader for EATG

CHAARM is a research network funded by the EC under FP7; it stands for CHAARM. EATG is part of the working group for dissemination and advocacy activities, and has an appointed representative on the CHAARM Steering Committee.

The EATG's role is to help identify target groups for dissemination of CHAARM activities and also to facilitate the organisation of 4 dedicated workshops focusing on CHAARM's scientific activities and achievements starting from the second year of the project.

The end of the project was postponed to the first semester of 2015. Therefore EATG will be involved in the organization of activities during the first semester of next year.

2 more workshops and a final event will be organized during the first half of 2015.

Further information on the project and the satellite session at EACS can be found on the CHAARM website: <http://chaarm.eu/>





ECRAN – European Communication on Research Awareness Needs project *Brian West, Project Leader for EATG*

The ECRAN project (www.ecranproject.eu) is designed to develop a portfolio of open educational resources for the general population about the challenges raised by independent clinical research. ECRAN provides a multi-lingual website. Full contents and all navigation and searching tools are provided in the 6 most common languages (English, French, Italian, Spanish, German and Polish). Selected contents are available in 17 other European languages (Bulgarian, Czech, Danish, Dutch, Estonian, Finnish, Hungarian, Gaelic, Greek, Latvian, Lithuanian, Maltese, Portuguese, Romanian, Slovak, Slovenian and Swedish). EATG members have been involved in the review of the final version of the ECRAN webpage in different languages.

The consortium met in Milan on February 6th to plan ECRAN multi-stakeholders meeting, which took place in Luxembourg on 20th and the 21st of May following the European Clinical Research Infrastructure (ECRIN) annual meeting. During those two days, the members of the consortium presented the outcomes of the project and discussed how to increase knowledge on

clinical research among the general public and patients at large. EATG was involved in two sessions: ‘Experiences from participation in design and promotion of randomised clinical trials: examples from patients’ organizations’ – with Brian West as chair and Damian Kelly as speaker. A second speech ‘The bottlenecks in disseminating information on clinical trials and how can we blow up the bottlenecks?’ on the community perspective was given by Svilen Konov.

On Monday July 28th members of the ECRAN Consortium gathered at the Istituto Mario Negri in Milan to discuss possible future developments of the project. In addition to the need of maintaining and updating the ECRAN website, three different lines of activities have been identified for potential future activities following the funding period.

ECRAN partners discussed some initiatives to improve the knowledge of young people on clinical research, such as workshops in schools, and dissemination and testing of new methods of education.

<http://www.ecranproject.eu/en/content/communicate-clinical-researchspeeches>

EUROCOORD

EuroCoord is a Network of Excellence established by several of the biggest HIV cohorts and collaborations within Europe - **CASCADE**, **COHERE**, **EuroSIDA**, and **PENTA**. Alain Volny-Anne is representing ECAB at EUROCOORD. This large integrated network exploits the scientific strengths of collaboration to ensure that the best, most competitive HIV research is performed.

EuroCoord has access to data from over 250,000 HIV-infected children and adults across the European continent and beyond. The multidisciplinary research undertaken by the network addresses key areas aimed at improving the management and life of HIV-infected individuals, whilst allowing differences within sub-groups to be explored.

EUPATI

David Haerry, Project Leader for EATG.

EUPATI is an IMI-funded consortium project, led by the European Patients' Forum, to educate patients and the lay public about how medicines' R&D works. A consortium of 29 organisations is developing training courses, educational toolkits and a web-based library to provide objective and credible information about medicines R&D and how patients can get involved. EUPATI will cover seven languages in 12 countries. The consortium can proudly look at the project's first year. All objectives have been achieved and all planned deliverables are about to be completed. EATG is involved in the project as co-leader of WP7 and partner of WP2, WP4 and WP6. With its partners, EATG is leading on the development of catalogues, reports, training material, application packages, guidelines for applicants and selection criteria for future participants of the Academy.

In the first months of 2014 EATG members were involved in the development and revision of material for the Work Package 4 (WP4) of the EUPATI consortium. The objectives of WP4 are: 1) to develop educational topics in six topic areas. 2) to create a training strategy, contents and course infrastructures for an EUPATI Certificate Course to develop "Patient Experts". 3) to develop new



educational material as well as collect and adapt existing educational material that can be used by patient advocates to educate their members. 4) to develop, collect and adapt information material for lay-public to be provided in a Wiki-type library.

EATG members were asked to elaborate and provide material on different topics on the base of their expertise. Currently, EATG is contributing to the development of training materials for the EUPATI face-to-face meetings and e-learning courses.

On April 2 a workshop was organized in Warsaw to get the view of patients from different organizations across Europe on successful example of clinical information sharing. EATG co-facilitated the session on best examples and practices of patients involvement into R&D.

On Sunday June 22, following the ECAB HCV meeting, 8 EATG members were invited to provide their input in the creation of a EATG group for consultation to guarantee the involvement of the members in the activities of the EUPATI project. Following this first consultation EATG is going to extend the participation of members in the project and the members will be asked occasionally to provide patient's feedback into different tasks and deliverables.

A meeting was organized on Monday December 15 in Mainz to discuss further representation of EATG in the EUPATI project. Six EATG representatives from BoD, staff and the Project Leader attended the meeting.

On July 23 the EUPATI workshop "Meaningful patient involvement in industrialised R&D" took place in Berlin to discuss concrete actions that support patient involvement in industrialised research and development. Three breakout sessions, followed by a priority setting exercise, supported by 22 best practice cases, led to great discussions and defined next steps. 22 cases from different disease area formed the basis of the discussion, including 2 cases provided by the EATG.

For more information on the EUPATI project and meetings you can consult the following link:

<http://www.patientsacademy.eu/>

<http://www.patientsacademy.eu/index.php/en/joomdoc/259-ppp-report/file>



Protocol reviews

Thirteen EATG members participated in the review of 12 protocols including: guidelines for clinical development of products for the treatment of HIV, package leaflets for medical products, clinical trials for the development on new treatments for HIV and HIV/TB co-infected patients and on therapeutic vaccine.

HEPATITIS C

AND TB CO-INFECTIONS

Main activities

On the 1st of February 2014, Chris Ward was appointed EATG Hepatitis Consultant as part of EATG's on-going commitment to advocating for the best, most effective, affordable antiviral treatment for people living with hepatitis C, particularly including PLWHIV. A new steering committee was established in March to oversee and advise the EATG hepatitis portfolio, composed of David Ananiashvili (Georgia), Aisuluu Bolotbaeva (Kyrgyzstan), Diego Garcia (Spain) and Maxime Journiac (France). The Hepatitis Steering Committee greatly benefitted from the combination of perspectives and experience from East and West.

The work of EATG in the hepatitis C field in the last years has moved from being primarily based on clinical trial design to advocacy for increased access and support for off-label use of newer interferon-free hepatitis C drugs for those who have been left behind. Hepatitis advocacy is clearly a point of convergence for both clinical and access issues. In any context where people in need of treatment are denied access, either due to pricing, payer issues, or lack of commitment from health systems and governments dialogue from all sides of the debate is expected to be impassioned and

constructively adversarial. Without this dialogue between all stakeholders, partnerships and potential solutions can never develop.

Increasing access to hepatitis C treatment

EATG is implementing hepatitis C treatment advocacy on many levels: from direct constructive engagement with pharmaceutical industry, to direct action when our many voices must be heard by a larger audience.

2014 saw an unprecedented expansion of EATG activities under the remit of the hepatitis portfolio. Member engagement and involvement has increased, with excellent collaboration between EATG working groups and Steering Committees. The establishment of Company Liaisons for the hepatitis remit, whilst in its early stages, has been of great utility. The new DAA's (direct acting antivirals) targeting hepatitis C show outstanding efficacy in most genotypes however issues of access, pricing and affordability have been a top priority.

Since February four press releases concerning access to hepatitis C DAA's were developed by the Hepatitis Steering Committee. Their release was timed to coincide with major events such as the EASL International Liver Congress held in April and later, the WHO World Health Assembly.



One press release was later cited by Portuguese medicines regulator INFARMED and three European media outlets. A press conference held at the Lisbon ECAB meeting in June enabled EATG voices to be heard in support of GAT Portugal.

In May 2013, the Commission committed to at least update its Action Plan that came to an end in December 2013 to avoid a policy gap while the procedure for a possible new framework is underway. As co-chair of the EU HIV Civil Society Forum, EATG provided written input to the European Commission in October and at the HIV Civil Society Forum in December. The **Action**

Plan was published on 14 March and reflects most of the concerns and recommendations presented by EU HIV Civil Society Forum.

On 18 March, EATG participated in the European Commission Conference “Health in Europe, making it fairer” in Brussels. The conference focused on how to improve fairness and equity in health in Europe, access to health and how to tackle discrimination in health. During the HIV workshop, Commissioner Borg presented the key points of the action plan: putting HIV/AIDS high on the political agenda, reaching out to key groups, specific focus on stigma and discrimination, improving access to testing.

EATG, represented by Chris Ward and Ann-Isabelle von Lingen (EATG Policy Officer), participated in the multi-stakeholder hepatitis activism planning committee at AIDS 2014, Melbourne, to implement non-violent direct action in protest against the outrageous prices of hepatitis C DAA's. EATG members marched in solidarity with members of TAG, INPUD, ITPCru, ActUp Basel and other groups.

Successively a Joint Declaration to European governments in collaboration with Correlation, ELPA, WHA, EASL and other organisations urging policy maker support for treatment access and compulsory licensing as a last resort was released. This initiative was spearheaded by Luis Mendao, EATG member and world leader in hepatitis C advocacy.

Thematic ECAB meeting on hepatitis C

EATG organised 2 thematic HCV meetings in June (20-22) and December (13-14) 2014. During the meeting the members discussed and evaluated updated clinical data concerning innovative direct acting antiviral combinations. Plans for roll-out, expanded access and pricing throughout the WHO Europe region were also discussed.

Sitges VII

The seventh international workshop on viral hepatitis, 'From the pipeline to real life' brought together people living with hepatitis C, scientists, doctors, regulators, advocates and representatives of pharmaceutical industry to engage in a dialogue concerning new treatments for hepatitis C.

Tracy Swan provided a hepatitis C drug development pipeline update, followed by an update on hepatitis treatment Access & Advocacy as developed by EATG Company Liaison (Access, Gilead) Deniz Uyanik and Chris Ward, EATG Hepatitis Coordinator in 2014. Feedback concerning the internal briefing from individual delegates has been highly positive thus far. Day 2 focused on clinical themes. Sanjay Bhagani and Claire Thorne gave two outstanding presentations concerning 'Questions remaining in HCV research' and paediatric clinical trials in Eastern Europe respectively. As per tradition, Filip Josephson (European Medicines Agency) presented his personal perspectives as a regulator involved in hepatitis C therapy approval. A panel discussion entitled '*Clinical barriers in achieving hepatitis C elimination*' permitted further exploration of the clinical themes and perspectives. In the afternoon



delegates listened to testimonies from Duytro Sherembey (Ukraine Community Advisory Board), Luis Mendao (GAT/EATG), and Pauline Londeix (ITPC Middle East, North Africa) that made their case for price reductions and other means of increasing global access to the best, most effective hepatitis C treatments. A panel discussion gave space for further exploration of the themes highlighted by the three esteemed global advocates.

The Sitges VII Declaration (<http://www.eatg.org/gallery/171311/Sitges%20VII%20Declaration.pdf>) was developed by consensus. The community of people living with hepatitis C and their allies met with representatives of pharmaceutical industry in order to discuss potential steps forward.

TB Online

TB Online is a website for activists, patients, health workers and researchers to disseminate knowledge and promote advocacy to end the worldwide epidemic of tuberculosis.

The site is run by the Global Tuberculosis Community Advisory Board (TB CAB) and is dedicated to increasing community involvement in TB research and to mobilizing

political will to develop and make available TB diagnostics and treatments.

EATG contributes 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. Anna Balkandjieva contributes to the updates of contents of TB Online on the Behalf of the EATG.
<http://www.tbonline.info/>

EARLY

DIAGNOSIS AND TIMELY ACCESS TO TREATMENT OF KEY AFFECTED POPULATIONS

Main Activities

The members of the Policy Working Group (PWG) are supporting most of the work done by EATG on access, affordability, early diagnosis and key affected populations.

The HIV in Europe initiative focusing on early diagnosis and early care

EATG continued to serve as Advocacy Secretariat of the HIV in Europe initiative: a pan-European initiative kicked off in Brussels in 2007 to ensure that HIV positive patients enter care earlier in the course of their infection than is currently the case, as well as to study the decrease in the proportion of HIV positive persons presenting late for care.

European HIV Testing Week

As HIV in Europe Initiative advocacy secretariat EATG sought to ensure support and input from a broad range of stakeholders for the European HIV Testing Week. It reached out to community organisations, agencies, government agencies for their involvement. In July, the results of the evaluation of the first European HIV Testing week during the July session of the EU HIV Think Tank, a working group of national government representatives, the European Commission, EU and international agencies and as experts from

civil society.

Following the overall positive results of the evaluation of Testing Week, HIV in Europe decided to proceed with a second edition of the event in the last week of November 2014. EATG took part in the working group supporting the HIV European Testing Week 2014 coordinated by HIV in Europe. It reached out to bring partners on board including the European Commission. EATG also reached out to rapid test manufacturers to discuss donations of kits to community organisations for the week. Alere and Biolytical expressed interest and donated kits to several organizations across Europe and a few countries in Central Asia.

In the context of the European Testing Week, EATG organised a policy seminar together with Belgian organisations (Ex-Aequo, Médecins du Monde, Sensoa, Plate-Forme Prévention SIDA, Sidaids Migrants Sireas, Sida Sol and Breach) to promote innovative approaches to screening in Belgium on 17th November at the Belgian Senate. The meeting sought to revive discussion around the implementation of recommendations contained in the national HIV plan (2013) for the de-medicalisation and decentralisation of screening with the new government, members of the parliament and other stakeholders.



In the autumn, EATG collected data on legislative frameworks across Europe for community based testing and ways actors in countries have sought to bring testing closer to affected communities. The information, which is largely anecdotal, has been used in discussion with rapid test manufacturers around donations of testing kits for Testing Week activities at local level. It was also presented at the EU HIV Civil Society Forum for feedback on content and next steps. The information will be cross-checked and deepened in 2015 as part of the OptTEST project work-package dealing with legal and regulatory barriers to testing and linkage to care.

OptTEST project - Optimising testing and linkage to care for HIV across Europe

The European Commission approved the OptTEST project initiated by HIV in Europe. The project started on 1 June and the kick-off meeting will take place on 2 September. EATG will be involved in WP 1 (coordination), 2 (dissemination) and 3 (evaluation) and collaborating with WP 7 on stigma and discrimination (under WP2) for the advocacy tools/resources to remove legal and policy barriers to testing and linkage to care. Contentwise, the project will cover a) Linkage and retention to HIV care after diagnosis; b) Development of tools for indicator HIV guided

testing; c) Cost-effectiveness of different testing strategies for key populations; d) Stigma and legal barriers to the provision and uptake of HIV testing services.

In particular, the project will:

- Explore and document linkage to and retention in HIV care, and access to therapy in Europe
- Develop and implement tools for indicator condition (IC) guided HIV testing across regional healthcare settings
- Estimate the survival benefits, costs, and cost-effectiveness of innovative HIV testing strategies in Europe
- Support in-depth analysis of the data and evidence on access to testing and uptake of treatment from the PLHIV Stigma Index and develop a toolkit to overcome legal and regulatory barriers to testing and linkage to care.

The OptTEST and EUROHIVEDAT project, which both look at improving early diagnosis and linkage to care, will be linked via their advisory boards. EATG members are taking part in both projects. EUROHIVEDAT is the follow up project of COBATEST and it focuses on building the network of community based voluntary testing and counselling centres.

Main activities

Renewing political commitment to achieve universal access to prevention, treatment and care for HIV and co-infections in Europe

EATG advocacy for increased political attention to HIV and co-infections in the last years aimed to secure the adoption of a pan-European ministerial declaration setting targets with clear indicators and an EU policy framework and action plan to improve the European response to HIV/AIDS and co-infections across the continent. Advocacy has also sought to ensure the inclusion of measures ensuring the human rights of key affected populations and scale up screening and timely access to treatment for key affected populations in policy documents and events.

Various advocacy actions, including a multi-stakeholders call to EU leaders and EU institutions on HIV, speeches at policy events and policy letters to EU Presidencies, direct advocacy with European Commissioner for Health and contribution to the European Commission consultation for an updated action plan, came to fruition in 2014. Indeed, in March 2014, the European Commission (the

Commission) adopted an extended Action Plan in EU and neighbouring countries for 2014-2016 to prevent a policy void. The Action Plan emphasises measures to maintain HIV/AIDS high on the political agenda, to tackle HIV-related stigma and discrimination, to achieve better access to voluntary testing and counselling, as well as to early treatment and care and prevention. It underlines the need to focus on key affected groups, such as men who have sex with men, migrants, and injecting drug users.

Moreover, the Commission organised the Conference “Health in Europe, making it fairer” in March, where the European Commissioner for Health chaired a session focused on HIV. EATG actively contributed to this session on measures to overcome stigma discrimination and to improve access to voluntary HIV testing and timely treatment for key affected communities. In addition, the Italian EU Presidency convened a high level conference “Fight against HIV/AIDS ten years after the Dublin Declaration: Leaving no One Behind – Ending AIDS in Europe” in November, whose aim was the adoption of a ministerial declaration. EATG supported the process through contribution to the external advisory board for the event and declaration, the EU HIV Civil Society Forum, speakers and

behind the scenes advocacy with the different stakeholders. The call for action from the HepHIV Conference, in which EATG was involved, was fed in the preparation of the meeting and the draft declaration.

Unfortunately, the EU Italian Presidency event did not conclude with a ministerial declaration due to lack of adequate comprehensive consultations prior to the event with the different governments. But policy-makers agreed on the need for a new declaration and further discussion on the text. EATG is following up on this with partner organisations and future presidencies.

See press release at <http://www.eatg.org/news/eatgnews/>.

The EU HIV/AIDS Civil Society Forum ***Tamás Bereczky (co-chair on behalf of EATG)***

AIDS Action Europe (AAE) and EATG co-chair and provide support to the work of the EU HIV/AIDS Civil Society Forum, an informal advisory body to the European Commission to facilitate the participation of non-governmental organizations, including those representing people living with HIV/AIDS in policy development and implementation and in information-exchange activities. The CSF includes about 40 organizations from all over Europe and observers from European Commission (health, justice and external action service), UNAIDS, WHO Europe, ECDC, EMCDDA, UNODC. Two meetings took place on 8-9 July and on 24-25 November 2014.

The agenda of the first meeting covered European policy updates and had a focused session on projects to overcome stigma and discrimination; HIV and drug use related advocacy; generics; initiatives to promote access to affordable medicines in Europe. Following the CSF meeting EATG took also part in the Think Tank meeting (national representatives, agencies and civil society experts) on 9-10 July. The purpose of the session was to discuss how ministries of health can engage in the

European HIV Testing Week 2014. The meeting updated the participants on the results of the 2013 Testing Week pilot and plans for the 2014 edition.

During the second CSF meeting ECDC and UNAIDS presented their latest data and reports. The CSF exchanged experience and knowledge on projects and agreed on joint advocacy to keep HIV and co-infections high on the European political agenda, especially in light of the Italian Ministerial Presidency conference on HIV/AIDS as well as a stronger EU position on harm reduction and civil society involvement in the context of the United Nation General Assembly Special Session on Drugs. There were also discussions about innovative approaches to screening and linkage to care, pre-exposure prophylaxis development (PreP), EU funding to support the implementation of comprehensive harm reduction measures and scarce civil society participation in a joint European Commission member states on prevention, access to prevention, treatment and care and community advocacy on Hepatitis C co-infection, including access to affordable direct acting agents. During the Think Tank meeting on 26 November EATG and AIDS Action Europe relayed the concerns and messages that were discussed by the CSF. The CSF coordination team provided input on

discussions regarding the ECDC surveillance data and policy implications and future EU policy framework on HIV.

Improving access to care and ART and retention in care for HIV and co-infections

EATG collaborated with the European AIDS Clinical Society in the organisation of a seminar to improve standards of care for HIV and co-infections in Europe under the auspices of the Italian Presidency in Rome on 25-26 November. The meeting brought together clinicians, researchers and community to identify critical areas of intervention to reduce late presentation and improve access to care and ART as well as retention in care. Participants examined upcoming challenges in screening, monitoring and diagnosis of HIV, HCV or HBV infected patients, integrating the latest scientific results to improve the quality of life of HIV/Hepatitis infected individuals in Europe.



Addressing the impact of the economic crisis in Southern EU member states

In March, EATG published two community country briefs on the impact of austerity measures on the HIV response in Portugal and Spain. The papers provide a community perspective on the challenges for discussion with different stakeholders at national and European level and cover issues such as cuts in HIV/AIDS programmes, access to treatment, public funding for interventions, impact on key and marginalised populations, impact on HIV voluntary screening and counselling.

The country briefs on Portugal and Spain were used in meetings at national level with national authorities and companies and at European level. They were presented during a workshop at the European Public Health Association Conference on 'Migrant and Ethnic Minority Health' in Granada, Spain organised with Doctors of the World and the Platform for International Cooperation on Undocumented Migrants.

Access to affordable medicines

As part of the HIV Civil Society Forum (CSF) and its own capacity, EATG has been advocating for European Commission support for member

states in accessing more affordable quality medicines in particular for countries with lower budget and also smaller market. EATG specifically advocated the inclusion of HIV, HCV and MDRTB medicines in the joint procurements tools that emerged from the medical counter-measure foreseen in the EU cross-border health threats decision. These medicines are mentioned in the explanatory note to the Joint Procurement Agreement signed in June 2014.

In January, EATG, as co-chair of the EU Civil Society Forum, wrote to the European Commissioner for Trade to ensure that the **Free Trade agreement** negotiated between the European Commission on Behalf of the EU and Morocco does not contain any intellectual property provisions that would go beyond the requirements of the TRIPS Agreement or any investment requirements that could harm access to medicines. The group also asked for clarification on how the Commission aims to ensure that the DFTA does not hamper access to medicines.

On 28 July (World Hepatitis Day), prior to the Italian EU Presidency meeting on access to medicines and innovation and the informal Council of EU health ministers in September, a letter was sent by the CSF and a number of HCV related organisations to EU health ministers and

heads of pharmaceutical companies requesting necessary measures that ensure access to new effective hepatitis C treatments. EATG also participated in a demonstration in front of the European Council of Health Ministers in September in Milan to press member states to ensure universal access to and affordable more effective hepatitis C treatment.

The debate over the use ART/ARVs as one of the prevention tools

In February, together with NAM, EATG launched a Community Consensus Statement setting basic standards that preserve the right of people with HIV to make informed choices about their health, while maximising the power of HIV drugs to help end the epidemic. The Statement was co-authored by the European AIDS Treatment Group and NAM and is endorsed by over 30 prominent organisations in the field of HIV prevention and advocacy, including the Global Network of People Living with HIV (GNP+). The statement can be found and signed on at www.HIVt4p.org.



WHO

HOW

WHAT

WHY

EMPOWERMENT

Main activities

Training Academy: January 23-26

On 24-26 January 2014, EATG organized the second module of EATG Training Academy STEP-UP which Kyiv, which provided an update on recent developments on the HCV and TB treatments in pipeline following the discussion started during the first module in Brussels in 2013. The trainees learnt about drug-drug interactions, the issues around HIV and sexual health and were introduced to the topics of clinical trials and protocols in the current HIV discourse. The interactive 'question-and-answer' session on drug resistance, originally scheduled

for 45 minutes, resulted in a 90-minute dialogue between the trainers and the trainees who presented the cases studies from their practice.

The session on HIV and pregnancy raised a lot of questions, particularly among the trainees from the Eastern-European countries.



There persists a lack of knowledge and an array of misconceptions on the contemporary approaches to the standards of care for babies who are born to mothers injecting drugs.

The training concluded with the introductory session on stigma and discrimination, whereby the trainees were grouped in mixed country sets and given to debate the case of HIV and possible discrimination in a health institution. This particular session gave a sneak preview of the topics that will be addressed during the upcoming modules.

The overall module 2 of the STEP-UP programme received positive participant feedback:

- **100%** agreed or strongly agreed that, over the 2.5 days of training, the content of the sessions was relevant and appropriate
- More than **90%** agreed or strongly agreed that the content was relevant and at the appropriate level over the 2.5 day training sessions
- **100%** found that the trainers answered their questions effectively
- **90%** thought the trainers were interactive and engaging



The following improvements were made in participants' knowledge:

- **100%** felt that their knowledge of HCV and TB treatment for HIV positive patients improved
- **100%** felt their knowledge of HIV in pregnancy had improved
- **100%** felt their knowledge of drug resistance had improved
- **95%** felt their knowledge of clinical trials and protocols had improved
- **90%** felt their knowledge of drug names and classifications had improved
- **85%** felt that their knowledge of stigma and discrimination had improved

The materials of both modules are available in English and Russian at
<http://eatgtrainingacademy.org/training-centre/training-modules>

Training Academy April 10-13

Building on the knowledge gained from previous modules, Module 3 focussed on soft skills and communication technique within the field of HIV, including the importance of the doctor/patient relationship. For this module, some training sessions were different between the English and Russian-speaking groups according to requested training topics. The table below shows which training each group received and when:

	Day 1 Topics	Day 2 Topics	Day 3 Topics
English-speaking participants	• Psychological, psychosocial and sociological issues relating to HIV • Protocol review	• Informing patients about HIV treatment • Doctor-patient relationship	• Patient-centred care
Russian-speaking participants	• Introduction to medical statistics • Informing patients about HIV treatment	• Protocol review • Doctor-patient relationship	• Patient-centred care

Overall module 3 of the STEP-UP programme received positive participant feedback:

- 94% found that the trainers answered their questions effectively
- 94% thought the trainers were interactive and engaging

The following improvements were made in participants’ knowledge:

- 100% felt that their knowledge of medical statistics had improved
- 100% felt their knowledge of psychosocial skills and counselling had improved
- 100% felt their knowledge of protocol review had improved
- 100% felt their knowledge of informing patients on HIV treatment had improved
- 100% felt their knowledge of patient-centred care had improved

Training Academy June 12-15

Module 4 of the Training Academy looked at several emerging topics in the current HIV and HCV treatment literacy and advocacy discourse. During this module, the participants received an update on the HCV treatment options following the findings presented at the EASL conference in London. The topic of ribavirin and interferon-free treatment options stirred active discussion not only during the training module. The outreach went beyond the participants of the Training Academy after the trainees had done live-posting on Facebook about ribavirin and interferon-free HCV treatment options. The post and the comments to it not only showed that the trainees were already a part of the new wave of treatment activism. It also indicated the need to continue investing into educating both patients and healthcare providers on the most recent treatment and those in the pipeline.

Joint workshop and session on R&D of medications introduced the trainees to the topic of calculating costs of developing new medications and the issues of ethics around it. The trainees extensively relied on the knowledge from the previous training modules when designing their own plan of developing the cost of new medications.

The training module concluded with the discussion on alternative and complementary treatments, their benefits and caveats as well as the discussion on what key points one should bear in mind when considering complementing traditional treatment options.

Training in Romania 15-18 May

Following the training held in 2010, EATG returned to Romania with a new training on HIV treatment literacy and advocacy. The training brought together community activists and healthcare professionals from Southern Europe for an intensive 2.5 day training that covered the following topics:

- a) Initiative and managing treatment;
- b) Treatment adherence and side effects;
- c) Treatment changes and interruptions;
- d) Drug resistance;
- e) Access to treatment, stock-outs and treatment advocacy;
- f) PEP, PrEP and TasP as concepts for HIV treatment and prevention

Relying on a mix of presentations, workshops and plenary de-briefs, the training aimed at covering treatment-related issues that are relevant to the region in terms of regional HIV epidemiology, availability of medication and reflecting political



and cultural realities. The training and particular case studies on assigning PEP revealed that the countries of Southern Europe share similar problems in terms of access to and availability of treatment. However, it also underlined striking differences that are used by community-based organizations for mobilizing vulnerable groups for PrEP and early testing. Following the training, EATG will support two projects for post-training activities.

Training Academy September 13-14

On 13-14 September 2014, STEP-UP trainees met for the final Academy's module that took place in Brussels. The last module built upon the feedback received from the trainees over the last 12 months and discussed the following topics:

- (a) The role of community-based organizations for advocating HIV/HCV testing;
- (b) PrEP, PEP, TasP and HIV cure in the current public health discourse;
- (c) Psychosocial support and counseling;
- (d) Project proposal writing and fundraising and
- (e) Designing surveys on HIV-related topics.

Training Academy 2014-2015

The new cohort of trainees from 18 countries enrolled into the second edition of the STEP-UP Academy. Selected among more than 200 candidates who applied for the STEP-UP in 2014, these 21 young participants will be trained to become new generation of HIV activists in Europe and Central Asia.

The launch of the program took place at HIV Drug Therapy Congress held in Glasgow. During the first module, the trainees had a unique opportunity to meet leading scientists, doctors and community leaders who are engaged with HIV-related topics globally. Most of them had never attended the conferences of such scale or met with the representatives of the industry, governments or intergovernmental organizations.

Increasing Capacities, Achieving Novelty (iCAN)

This Pan-European Conference on Community Involvement and Sustainable Response to HIV/AIDS was organized by EATG, in collaboration with partner organizations. This two-day conference was held in Warsaw and brought together almost 100 participants from over 25 countries to learn, share, present and discuss best practices of community engagement and mobilization in the current HIV discourse. The conference showed the history and capacities of HIV communities across Europe and consisted of 6 workshops that looked at scientific, political, educational and training capacities of people who work with HIV/AIDS.

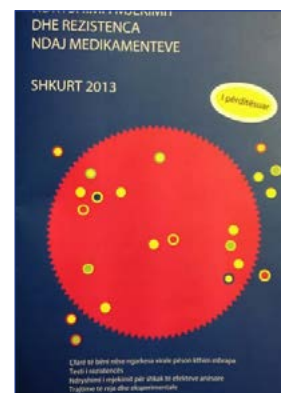
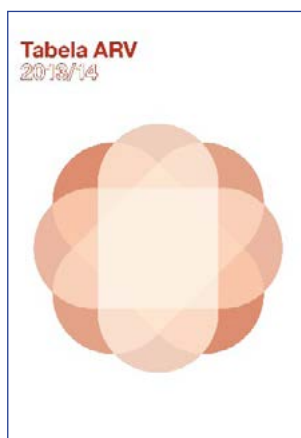
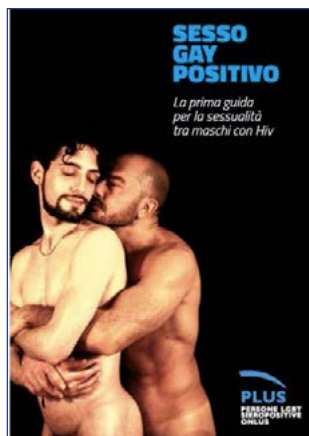
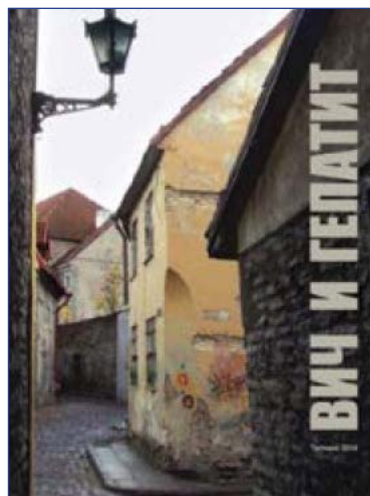
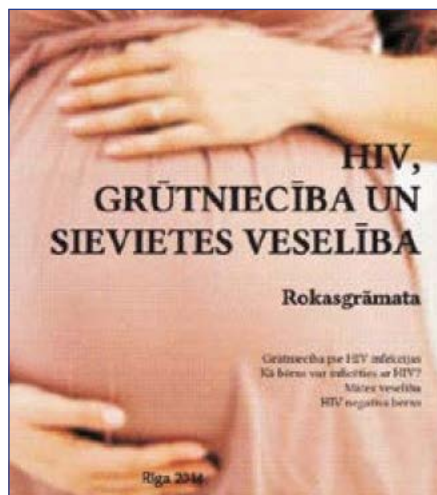
COPE

In 2014 EATG supported the translation into various European languages of 11 publications and 2 country briefs through the COPE project:

- HIV, pregnancy and women's health – HIV i-Base (Latvian)
- HIV & Hepatitis – NAM (Estonian)
- HIV and your quality of life: a guide to side effects and other complications – HIV i-Base (Macedonian)
- Sesso Gay Positivo – AFAO (Italian)
- Changing Treatment and Drug Resistance – HIV i-Base (Albanian and Latvian)
- Coming of Age – Justri (Bulgarian)
- ARV chart 2013/2014 – HIV i-Base (Russian)
- HIV, mental health & emotional wellbeing – NAM (Slovenian)
- Medical needs and challenges of MSM – AIDS foundation East West (Tajik)
- MSM, HIV and the road to universal access – how far have we come? – amfAR (Tajik)
- Country brief 2014 – Greece
- Country brief 2014 – Italian



MAIN ACTIVITIES



Conferences

The European AIDS Treatment Group regularly organises community feedback sessions on key findings and results of the most important HIV / co-infection conferences. The community feedback sessions allow treatment activists that are new or not familiar with conferences to better understand key messages from the conference that can be shared with their local colleagues.

IAS Melbourne

During the International AIDS Conference AIDS2014 held in Melbourne, Australia, EATG coordinated the European Networking Zone, in collaboration with ECUO and the Eurasian Women's Network on AIDS.

Focused on MSM, women and migrants, a total of 19 sessions from Sunday 20 to Friday 25 July were held with great attendance and very interesting topics focused on PrEP, Treatment as Prevention, MSM and drug use, early testing, self-testing, HIV criminalisation, and the needs of the next generation of HIV advocates, among others; apart from being a space for face to face meetings and networking.

Sidaction

EATG was invited as a speaker at the 6e Convention Nationale de Lutte contre le Sida (6-7 June 2014). Sidaction invited around 400 activists, scientists, doctors from French speaking countries around the world. The sessions called for earlier testing and diagnosis for different reasons. Prevention, harm reduction and newer prevention methods were central topics, as well as more general health issues. EATG was represented during the plenary session with a presentation about the impact of ageing with HIV (number of medical visits, specific preventive research etc.). Another presentation from EATG during one of the sessions focused on the cure research, as seen from a community perspective.

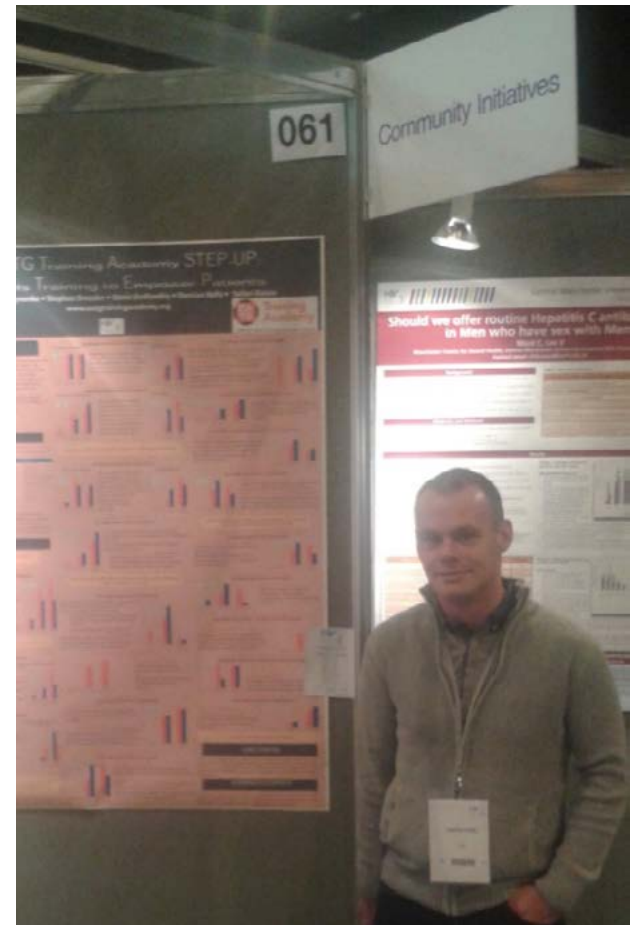
Glasgow

EATG organized a community feedback session at the conference attended by people living with HIV and participants of the EATG Training Academy STEP-UP project.

EATG held an information booth together with HIV in Europe to show the work done by the European AIDS Treatment group in different projects and initiatives such as OptTEST, ECRAN,

MAIN ACTIVITIES

EUPATI, EUROCOORD, aMASE CHAARM and with a special focus on the collaboration with HIV in Europe promoting the European HIV Testing Week.





training

HUMAN RIGHTS

AND KEY AFFECTED POPULATIONS

MAIN ACTIVITIES

Access to health services for undocumented migrants

In April, EATG organised a workshop on access to HIV treatment, prevention and care for undocumented migrants at the 5th European Conference on Migrant and Ethnic Minority Health in Granada together with the Platform for International Cooperation on Undocumented Migrants (PICUM) and Médecins du Monde (MdM). EATG presented the findings of the two country policy briefs (Portugal and Spain) on the impact of austerity measures on the HIV response. Ibi Fakoya spoke about the legislative changes two years ago in the UK allowing the possible inclusion of undocumented migrants into ARV treatment schemes and the political counter-movement since then. PICUM provided an overview of the legislation related to treatment coverage for undocumented migrants at EU level. MdM presented the impact of austerity measures in Spain for NGOs working in the HIV field. EATG signed the Granada declaration, which was adopted following the conference and then sent to EU health ministries before their EU presidency informal meeting, where the economic crisis, migration and e-Health were discussed.

aMASE Community Survey

aMASE (advancing Migrant Access to health Services in Europe) is a European Commission funded community study. It is being led by researchers from University College London, UK, and the Institute of Health Carlos III, Spain. aMASE allows migrants to feedback about their experiences of healthcare systems across Europe so that healthcare providers can plan better, more appropriate services for ALL people living in Europe. The survey is strictly anonymous and confidential and takes about 15 minutes to complete. Participants have to be aged 18+ and living outside their country of birth.

After some delay the community survey of aMASE was launched. The initial deadline of December 2014 was extended to March 2015.

<http://blog.blackwomenineurope.com/tag/amase>

Reaching out to the Trans* community

As part of efforts to reach out to key affected sub-groups and gain a better understanding and needs of the transgender communities in relation to HIV, EATG took part in the annual meeting of Transgender Europe (TGEU) in Budapest on 1-4 May. New contacts were established and there will further efforts to reach out and build cooperation with the trans-community via TGEU.

Sex work and HIV

In February, EATG advocated for an alternative resolution to the debated report on sex exploitation in the European Parliament calling member states to adopt the Nordic model to deal with the issue of sex trafficking, i.e. punishing the demand for sexual services and not the supply of these services. In support of TAMPEP and the International Committee on the Rights of Sex Workers, EATG reached out and collaborated with a few MEPS, other groups and UNAIDS to convince MEPs to reject the initial report and support the alternative one. In the end some amendments were made to the initial report, and it was adopted. The amendments were not sufficient to change the message of the initial report. Advocacy at least served to raise awareness on others views with the European Parliament.

MAIN ACTIVITIES

The Policy review:

A first phase of policy review was performed in 2014 with a review of structural mechanisms of policy and decision making within the organisation. Recommendations were formulated to the organisation.

Further evaluation is planned within the framework of the current Long Term Strategy which will end in 2015.

EATG stakeholders meeting – Brussels – February 3

On February 3rd 2014 EATG organised its annual stakeholders meeting which was attended by 29 stakeholders (partner organisations, networks, funders, international institutions etc.). EATG presented its 2013 achievements on advancing earlier testing, treatment access and affordability, key populations and political leadership, followed by an introduction to the 2014 workplan.

Presentations by the different pillars within the organisation were the start of a more in depth discussion with the participants on 'Early

access to testing, treatment and other projects with vulnerable populations,' 'Raising patients' awareness and participation in pharmaceutical R&D' and 'Laying the foundations of treatment activism: follow up activities of capacity building.' During the stakeholders meeting the newly established EATG External Advisory Board was introduced to the stakeholders: Lella Cosmaro, Jürgen Rockstroh, Michel Kazatchkine and Matthew Weait.

More information is available at <http://www.eatg.org/news/publication>



EATG governance meeting – Brussels – April 7

During the April governance meeting the participants (board, chairs, staff and guests) discussed representations and reporting; training within EATG; LTS 2012-2015 and new LTS and members involvement.

The membership involvement project

This project focuses on how new and current members can be better integrated within the organisation and its activities.

The handbook/protocol review

Following previous agreements a small team within DMAG has started the handbook review process in collaboration with chairs, some members and staff. The new document will be a series of protocols that will clarify internal structures and processes.

2013 annual report

At the end of May EATG published its 2013 annual report. A digital full report is available via our website. A printed summary report was equally created.



EATG AND FINANCES

EATG Expenditure 2014

		Budget	Total Expenditure	% budget
Scientific Research	ECAB meetings, Protocol Reviews & Representation	208,516 €	178,862 €	86%
	"STEPS- A community initiative to design the pathway to a long-term remission of HIV infection"	11,573 €	5,291 €	46%
	TB Online	8,942 €	7,868 €	88%
	CHAARM Project	6,844 €	3,760 €	55%
	ECRAN Project	11,931 €	9,833 €	82%
	EUPATI Project	99,878 €	83,495 €	84%
	Total	347,684 €	289,109 €	83%
Policy and Advocacy	Policy Working Group meetings, Review and Representation	75,228 €	46,225 €	61%
	OPtest EC Project	21,219 €	6,745 €	32%
	aMASE Project	19,968 €	11,805 €	91%
	HIV in Europe Project	12,563 €	13,183 €	121%
	Total	128,978 €	77,958 €	60%
HCV	Core Activity Budget, Sitges Conference & representation	66,605 €	63,497 €	95%
	Total	66,605 €	63,497 €	95%
	Eurocoord	1,419 €	207 €	15%
	TasP	27,264 €	17,529 €	64%
	Total	28,684 €	17,736 €	62%
Capacity Building	iCAN Conference	124,840 €	97,901 €	78%
	Step Up Training Academy	10,455 €	10,533 €	101%
	Promoting Universal Access: HIV/AIDS Treatment, Care, Support & Prevention in Central & Southern Europe	33,410 €	33,383 €	100%
	Integrated approach in Treatment of HIV and related co-infections (TB/HCV) – training for the Russian community of PLWH and their health care providers	3,777 €	4,070 €	108%
	Access, Services, Knowledge (ASK) Project	33,804 €	35,130 €	104%
	Staff Training	4,258 €	5,118 €	120%
	Continuous Patient Education (COPE)	33,356 €	29,545 €	89%
	Conference Support for staff	23,997 €	23,625 €	98%
	Representation & Capacity building for members	26,969 €	30,491 €	113%
	Total	294,866 €	269,795 €	91%
Communication	Website content management, Publications, IT Support etc.	33,365 €	28,019 €	84%
	Total	33,365 €	28,019 €	473%
Governance	Ombudspersons	1,419 €	0 €	0%
	General Assembly	98,761 €	94,505 €	96%
	Board of Directors	58,359 €	73,435 €	126%
	Development and Membership Advisory Group	15,612 €	14,933 €	96%
	Internal Auditors	5,677 €	5,424 €	96%
	Governance Meetings	10,347 €	28,441 €	134%
	Stakeholders Meeting	10,943 €		
	External Advisory Board	3,548 €	1,129 €	32%
	Fundraising	35,877 €	37,951 €	106%
	Total	240,544 €	255,818 €	106%
Administration	Staff Salaries, Office cost, other overheads	126,630 €	114,431 €	90%
	Legal Advice	4,258 €	175 €	4%
	External Auditors	17,032 €	16,209 €	95%
	Total	147,920 €	130,814 €	88%
OVERALL BUDGET 2014		1,288,646 €	1,132,747 €	88%

EATG Income 2014

	Total	% Total Income
Donations		
BOEHRINGER-INGELHEIM	12,158 €	1.02%
GILEAD	271,268 €	22.86%
MSD/MERCK	96,079 €	8.10%
BMS	58,000 €	4.89%
ABBVIE	225,212 €	18.98%
JANSSEN	95,118 €	8.02%
ViiV	160,000 €	13.48%
ROCHE	12,158 €	1.02%
NOVATIS	5,000 €	0.42%
MEMBERS	285 €	0.02%
MEMBERS	1,881 €	0.18%
Projects		
ECRAN	7,868 €	0.66%
COPE (Swim for Life & Sidaction)	24,347 €	2.05%
Integrated approach in Treatment of HIV and related co-infections (TB/HCV) – training for the Russian community of PLWH and their health care providers (Sidaction)	4,042 €	0.34%
"Access, Services, Knowledge (ASK):	12,510 €	1.05%
Treatment of HIV/AIDS and related co-infections among people who inject drugs (BMS & Sidaction)"	33,383 €	1.05%
Promoting Universal Access: HIV/AIDS Treatment, Care, Support & Prevention in Central & Southern Europe (BMS)	5,301 €	2.81%
STEPS- A community initiative to design the pathway to a long-term remission of HIV infection (BMS)	6,697 €	0.45%
OPTTEST	43,694 €	3.68%
ICAN	1,851 €	0.16%
CHAARM	44,363 €	3.74%
EUPATI	10,775 €	0.91%
AMASE	454 €	0.04%
EVS	42,925 €	3.62%
ADVANCES	1,932 €	0.16%
OTHER	1,932 €	0.16%
Total	1,175,421 €	99.06%
Membership fees	2,250 €	0.19%
Interest	937 €	0.08%
Recoverable costs	7,363 €	0.62%
Other	574 €	0.05%
Total income 2013	1,186,544 €	100.00%

EATG Budget 2015

		Total Budget 2015
Scientific Research	European Community Advisory Board (ECAB) meetings, Protocol Reviews, representation & New Developments in HIV Prevention	244,400 €
	"STEPS- A community initiative to design the pathway to a long-term remission of HIV infection"	15,644 €
	TB Portfolio	6,272 €
	CHAARM Project	13,942 €
	EUPATI Project	12,128 €
	Total	381,519 €
Policy and Advocacy	Policy Working Group meetings, external representation & other costs	55,357 €
	Optest Project	36,789 €
	aMASE Project	8,741 €
	Civil Society Forum	13,294 €
	HIV in Europe Project	12,210 €
	Total	126,390 €
HCV	Core Activity Budget, Sitges Conference & other costs	93,558 €
	TOTAL	93,558 €
Other projects	Eurocoord	1,419 €
	Living Positively with HIV – A Lifecycle Approach	25,916 €
	EMERGE project	117,225 €
	Total	144,561 €
Capacity Building	Training & Capacity Building Working Group Meetings & other costs	24,194 €
	"Project: Access, Services, Knowledge (ASK): Treatment of HIV/AIDS and related co-infections among people who inject drugs"	43,035 €
	Step Up Training Academy	10,000 €
	Training Staff	4,758 €
	Continuous Patient Education (COPE)	49,153 €
	Conference Support for staff	20,194 €
	Membership Development	10,000 €
	External Representation (& conference attendance)	20,194 €
	Total	181,528 €
Communication	Website content management, Publications, IT support & other costs	52,922 €
	Total	52,922 €
Governance	Ombudspersons	1,419 €
	General Assembly	77,973 €
	Board of Directors	66,778 €
	Development and Membership Advisory (DMAG)	15,195 €
	Internal Auditors	5,678 €
	Governance Meeting	10,097 €
	Long Term Strategy Development	32,011 €
	Stakeholders Meeting	10,646 €
	External Advisory Board	3,549 €
	Fundraising	73,236 €
	Total	296,580 €
Administration	Staff Salaries & office cost	57,440 €
	Recruitment Costs	7,097 €
	Legal Advice	4,258 €
	External Auditors	17,033 €
	TOTAL	85,828 €
OVERALL BUDGET 2015		1,362,887 €



THE EATG MEMBERSHIP

The EATG membership consists of individual who are mainly active in their country of residence, in local community-based organisations, research centres in universities, governmental agencies and public services, scientifically trained health professionals from various fields and individuals involved in advocacy in international networks, institutions and organisations.

Candidates that want to join EATG should have an interest in the topics covered by EATG. EATG's working language is English. Therefore candidates must have basic understanding of English. Preferably they should be involved in activities related to the EATG mission statement in their country of residence. Preference is given to people living with HIV/AIDS. Applications from candidate members are reviewed by the Development and Membership Advisory Group (DMAG).

We had 111 members in January 2014. Some members left during the year, 13 new members joined, resulting in a total number of 141 members by the end of December, being active in the following 42 countries in Europe and Central Asia: Albania, Armenia, Austria, Belarus, Belgium, Bosnia & Herzegovina, Bulgaria, Croatia, Czech Republic, Denmark, Estonia, Finland, France, Georgia, Germany, Greece, Hungary, Ireland, Israel, Italy, Kosovo, Kyrgyzstan, Latvia, Lithuania, Luxembourg, Macedonia, Montenegro, Netherlands, Poland, Portugal, Romania, Russian Federation, Serbia, Slovak Republic, Slovenia, Spain, Sweden, Switzerland, Tajikistan, Turkey, Ukraine, United Kingdom. We also have members from Canada, South Africa and the United States.

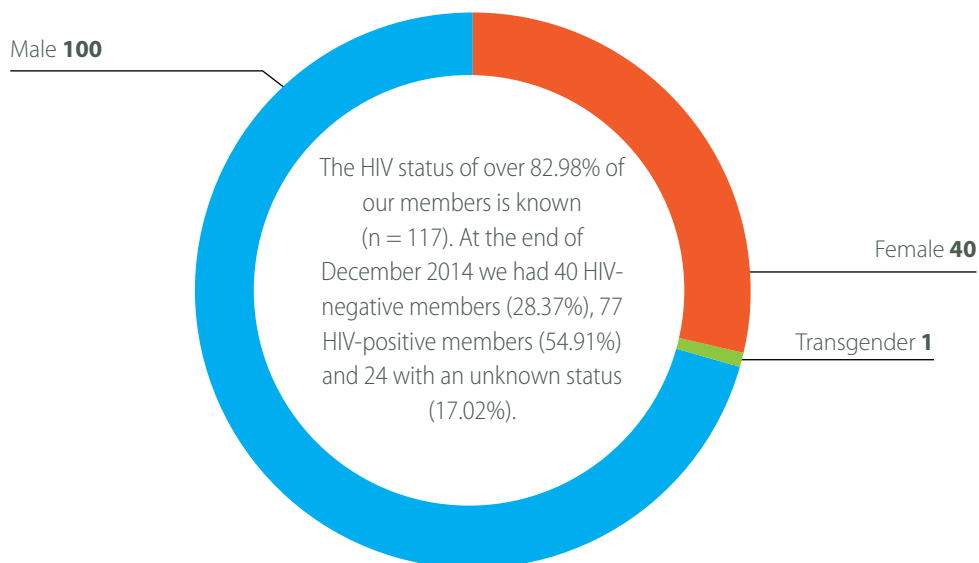
Most members come from Western Europe (n = 84¹, followed by Central Europe (n = 36)² and Eastern Europe (n = 19)³.

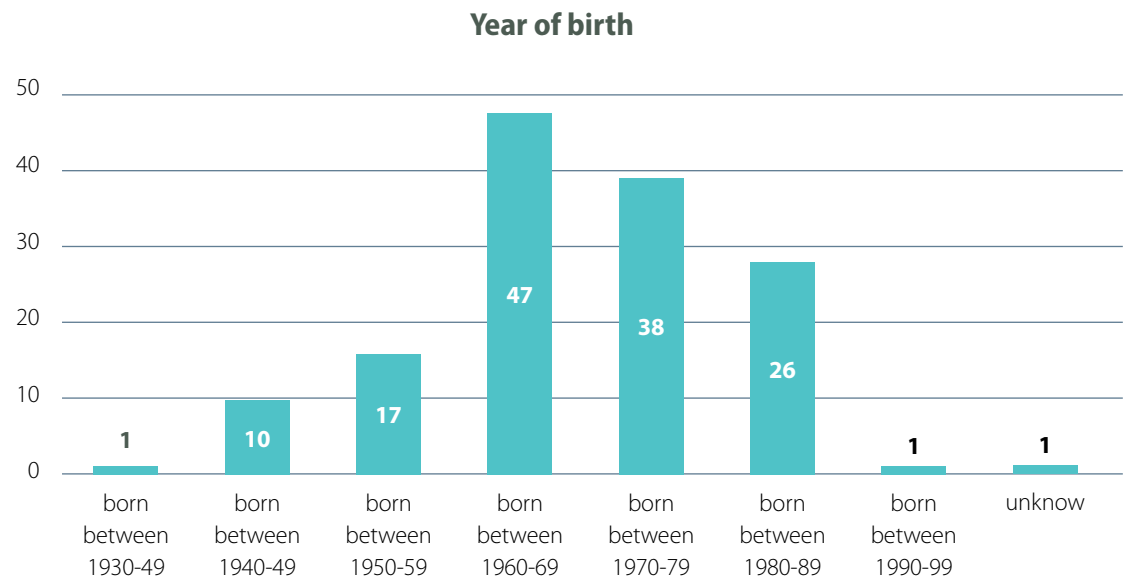
The increase in membership during the past years is reflected in the number of countries represented by our members. The increase also led to a more empowered representation from the different regions of Europe within the EATG. 28% of members are women (n = 40). 71% are men (n = 100) and 1% is transgender (n = 1).

¹ 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;

² 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;

³ Eastern Europe (15 countries): Armenia, Azerbaijan, Belarus, Estonia, Georgia, Kazakhstan, Kyrgyzstan, Latvia, Lithuania, Moldova, Russia, Tajikistan, Turkmenistan, Ukraine, Uzbekistan.





Reaching out

Website, Digest news and Visual Identity

In the first 6 months of 2014 EATG continued offering the service of the daily 'Global HIV News' for everyone interested in the latest developments around HIV/AIDS. The news feeds are updated daily and cover not only recent European developments but also stories from around the world.

The EATG website continued to be regularly visited. For the first 6 months, we had 1883 people visiting our webpage, a third of which were unique new visitors. While most visits are under 5 minutes, we see the tendency that both new and returning visitors spend more time on the webpage.

EATG also provides daily updates on tuberculosis on the www.tbonline.info website



Country / Territory ?	Acquisition		
	Sessions ? ↓	% New Sessions ?	New Users ?
	18,883 % of Total: 100.00% (18,883)	64.50% Site Avg: 64.44% (0.06%)	12,179 % of Total: 100.08% (12,189)
1. United States	4,419 (23.40%)	80.20%	3,544 (29.10%)
2. United Kingdom	2,083 (11.03%)	61.07%	1,272 (10.44%)
3. Belgium	1,429 (7.57%)	36.32%	519 (4.26%)
4. Canada	743 (3.93%)	51.68%	384 (3.15%)
5. Germany	631 (3.34%)	63.71%	402 (3.30%)
6. Russia	591 (3.13%)	51.10%	302 (2.48%)
7. France	574 (3.04%)	58.01%	333 (2.73%)
8. India	525 (2.78%)	87.62%	460 (3.78%)
9. Spain	497 (2.63%)	49.50%	246 (2.02%)
10. Italy	476 (2.52%)	52.10%	248 (2.04%)

Most visits are from US, UK, Belgium, Canada, Germany and Russia.



Social media

The EATG social media portfolio currently consists of a Facebook page, a Twitter account and a YouTube channel where we inform our audience about EATG events, news and publications and interact with partner organisations and members.

Our Facebook page sees an increasing number of likes during the first 6 months:

External Newsletter

EATG published 3 issues of the External news: April, August and December 2014.

Members’ representation

EATG members were involved as representatives within a total of 42 representations in steering committees, advisory boards, scientific committees, board of directors etc.





ACRONYMS AND ABBREVIATIONS

ARV	Antiretroviral
ATAC	AIDS Treatment Activists Coalition
BBID	Blood Borne Infection Diseases
BOD	Board of Directors
CAB	Community Advisory Board
CHAARM	Combined Highly Active Anti-Retroviral Microbicides (FP 7 project)
COPE	COntinuous Patient Education
Correlation	European Network Social Inclusion & Health
CSF	Civil Society Forum
ECAB	European Community Advisory Board
ECDC	European Centre for Disease prevention and Control
ECRAN	European Communication on Research Awareness Needs (FP 7 project)
EMA	European Medicines Agency
EMCDDA	European Monitoring Centre for Drugs and Drug Addiction
EUPATI	European Patients' Academy on Therapeutic Innovation (FP 7 project)
EUROCOORD	Network of Excellence by several of the biggest HIV cohorts and collaborations within Europe - CASCADE, COHERE, EuroSIDA, and PENTA

IDU	Intravenous Drug User
MEP	Member of the European Parliament
MSF	Médecins sans Frontières
MSM	Men who have Sex with Men
NeLP	Network of Low Prevalence countries
PLHIV	People Living With HIV/AIDS
PWG	Policy Working Group
R&D	Research & Development
TAG	Treatment Action Group
TAMPEP	European Network for HIV/STI Prevention and Health Promotion among Migrant Sex Workers
UNAIDS	Joint United Nations Programme on HIV/AIDS
UNODC	United Nations Office on Drugs and Crime
WHO	World Health Organisation

GOVERNANCE

The Board of Directors

The EATG General Assembly elects the Board of Directors (2 year term). The Board of Directors is given its mandate by the GA and is bound by its decisions.

(September 14 2013 – September 19 2014): Brian West, UK – Chair (and ECAB liaison) - Ferenc Bagyinszky, Hungary – vice-Chair (and DMAG liaison) - Tamás Bereczky, Hungary – Secretary (and PWG liaison) - Tomislav Vurusic - Treasurer - Olimbi Hoxhaj, Albania – Director

(September 14 2013 – September 20 2014): Brian West, UK – Chair (and TCWG liaison) – Luis Mendaõ, Portugal – vice-Chair (and ECAB liaison) - Tamás Bereczky, Hungary – Secretary (and PWG liaison) - Tomislav Vurusic - Treasurer - Olimbi Hoxhaj, Albania – Director (and DMAG liaison)



The EATG External Advisory Board

Lella Cosmaro, Italy - Michel Kazatchkine, France - Jürgen Rockstroh, Germany - Matthew Weait, United Kingdom

The 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 (replacing José Rojas Lima e Silva since September 2014)

The Policy Working Group

Chairs

Peter Wiessner, Shona Schonning

Steering Committee members

Aisuloo Bolotbaeva, Andrej Senih, Bryan Teixeira, Frank Amort, Giulio Maria Corbelli, Peter Wiessner, Shona Schonning, Tamás Bereczky

ECAB

Chairs

Paul Clift, Chris Cziria (until GA 2014)

Giulio Maria Corbelli (since GA 2014)

Steering Committee members

Giulio Maria Corbelli, Evgenia Maron, Memory Sachikonye, Sanja Belak Kovacevic

Hepatitis Consultant: Chris Ward

The Training and Capacity Building Working Group (group created at GA 2014)

Chairs

Damian Kelly

The staff members

Rubén Alonso, Office Manager; Giorgio Barbareschi, Scientific Adviser; Koen Block, Executive Director; Oleksandr Martynenko, Training & Communications Coordinator; Marie McLeod, Financial Manager; Ann Isabelle von Lingen, Policy Officer; Mariana Vicente, trainee; Joris de Froidmont, admin support

SPECIAL THANKS

EATG Permanent Representations and Partnerships

AIDS Action Europe • AIDSMAP.com • CHAARM steering committee • COBATEST • Collaboration of Observational HIV Epidemiological Research in Europe - COHERE • Correlation Network • Civil Society Forum on HIV • Civil Society Forum on Drugs • Drug interactions website • EACS guidelines • ECRAN • EMA - Patient & Consumer Working Party • EMA – Paediatric Committee (PedCo) • EMA management board • ENCePP Steering Committee • EPF Board of Directors • EPHA Board of Directors • Epposi • EUPATI • EuroCoord - Collaboration of Observational HIV Epidemiological Research in Europe • European Harm Reduction Network • European HIV Resistance Network • European Workshop on HIV & Hepatitis Treatment Strategies & Antiviral Drug Resistance • Forum for Collaborative HIV Research • Glasgow HIV 2014 (HIV 12) • Global Fund • GNP+ • HAART Oversight Committee (D:A:D study) • HIVERA • HPYP (Health Promotion for Young Prisoners) • IQ-HIV • PARTNER Study executive committee • Paediatric European Network for Treatment of AIDS (PENTA) • IPPF Europe • PROTECT External Advisory Board (EMA) • Quality Action • STOP TB Partnership • TB Europe Coalition (TBEC) • UNAIDS PCB • WHO Europe • WHO Civil Society Reference Group on HIV

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