## **HIV Testing in Europe**

From Policies to Practices

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HIV infection remains one of the highest morbidity and mortality infectious diseases in the European Union (EU) and EU Member States have committed themselves towards the goal of universal access to comprehensive HIV prevention programs, treatment, care and support by 2010.

Undeniably, diagnosing persons who are HIV infected is a prerequisite to the provision of treatment, care and support. A large proportion of HIV infected persons - ranging from an estimated 15% to over 50% in EU countries - are unaware of their infection, and therefore do not benefit from treatment and may transmit HIV to others, unknowingly. There is evidence that many opportunities are being missed to diagnose HIV infections in EU countries, particularly in regular health care settings.

While most EU countries have recommendations to screen pregnant women, testing policies in other populations and settings appear to vary from country to country. More over, information on HIV testing practices and on barriers to HIV testing and to linking diagnosed HIV infected persons to health services, is lacking.

In this context, the European Centre for Disease Prevention and Control (ECDC) has commissioned the International Centre for Reproductive Health (ICHR) from the Ghent University (Belgium) to carry out a study on HIV testing policies, practices and barriers in the EU Member States.

In order to map HIV testing policies and guidelines, a questionnaire survey has been performed among key informants responsible for the national infectious diseases system or HIV epidemiology in each of the EU Member States and EEA/EFTA countries. This survey focuses on the existing policies, guidelines or laws referring to HIV testing in specific settings, for populations at increased risk.

With the objective to identify HIV testing practices, barriers and facilitating factors surveys have been carried out in five selected countries: Belgium, Estonia, Finland, Poland, and Portugal. Data were extracted through questionnaires and structured interviews among patients, activist organizations, health care providers and policy makers. These studies highlight the circumstances in which people are being tested, the voluntary nature of existing HIV testing practices, the mechanisms of pre- and post test counselling, partner notification and referral to HIV services, as well as the reasons for getting or not getting an HIV test.

With the aim to delineate the different steps of the HIV testing process, the hurdles to be taken as well as to identify interventions which may have a beneficial impact on final outcomes of the HIV testing practices, the Piot Model has been applied to the survey results.

In this perspective, it is expected that the results of this study will serve as reference material for ECDC advice activities, with the aim to improve the access, the offer, the uptake and the effectiveness of HIV testing and counselling to populations at increased risk, and vulnerable to HIV, in EU Member States.