

# AAE SC MEETING – APRIL 23-24, 2018

## AIDES offices - PARIS, FRANCE

Present:

**Steering Committee:** **Aigars CEPLITIS**, AGIHAS, Latvia; **Esther Dixon Williams**, European AIDS Treatment Group (EATG), UK; **Marianella KLOKA**, PRAKSIS, Greece; **Richard STRANZ**, AIDES, France; **Silke KLUMB**, Deutsche AIDS-Hilfe (DAH), Germany; **Sini PASANEN**, Positiiviset ry, Finland; **Yaroslav BLIAKHARSKYI**, All-Ukrainian Network of PLWH, Ukraine; **Tanja DIMITRIJEVIC**, USOP-Union of organizations of people living with HIV and AIDS in Serbia, **Christos Krasidis**, AIDS Solidarity Movement, Cyprus

**AAE Office, Germany:** **Ferenc BAGYINSZKY**, Project Manager; **Michael KRONE**, Executive Coordinator; **Oksana PANOCHENKO**, Communications Officer.

**Apologies:** **Ljuba BÖTTGER**, Communications Coordinator

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## Monday, April 23

### 1. Opening and Follow up from previous Steering Committee Meeting

Richard Stranz, steering committee member from France, welcomes the SC and the office at the meeting, gives a short introduction about AIDES, and gives a brief introduction to the programme of the field visit.

Sini also welcomes everyone to the meeting and in particular our new SC members: Christos and Esther. After a short round of introduction, the agenda is approved. Marianella asks about the “Thematic session” on the second day. Michael explains that this session replaces the previous sessions of working groups. During the November meeting it was decided to have focal points instead of working groups as we are working on several thematic core areas that are difficult to handle in working groups. For tomorrow, the focal points should consider what is needed as an outcome of this session for the thematic area. AAE has a 4-year plan signed (FPA) with the Commission, what has not been signed yet, is the annual plan for 2018. If the SGA will be approved, it will be approved retrospectively from January on, meaning that a good part of planned activities needs to be transferred to the second half of the year. The discussions will take place in plenary rather than in WGs. Richard asks about discussions regarding ESTICOM, which will be covered during the report from the office session.

### 2. Approval of the minutes of the November meeting

Silke suggests some minor changes that do not change the content of the minutes; she will send these directly to the office. Christo will do so too.

Report was approved with no amendments.

### Action List – Follow up

	WHAT	Comment
A	Amend all approvals to the SC member ToR.	Done – the updated CSF co-chair TOR needs to be discussed and approved
B	Review and add all comments and corrections to the communications strategy and forward for proofreading to Richard or Brian.	Done
C	Write down minutes of the Member and Partner Meeting and follow-up on them.	Done
D	Follow-up the discussions on ENZ with EATG.	Continuing
E	Send out a request for noiseless hours for the Global Village.	Done
F	Follow-up on the collaboration for EECAAC2018 with AIDES.	Done

<b>G</b>	Adopt all amendments into the SGA before sending it out.	Done
<b>H</b>	Introduce statistics of the newsletter for SC for evaluation – as a brief document	Presented during this meeting

### 3. Reporting from the office

Michael reports on the activities since the November meeting:

- CSF meeting in December: the integrated approach to HIV, viral hepatitis and TB also affected the Governance of the CSF, now there are 5 coordination team (CT) members. Sini (AAE) and Nikos Dedes (EATG) were suggested and confirmed as co-chairs to continue for this term. There is a clear separation of the Coordination Team and the Secretariat (AAE and EATG). One interesting presentation about TB made the point again that there are no “hard-to-reach” populations. Populations may be hard to reach for the traditional health systems but not for peers or CSOs. Aigars expressed his frustration with the mechanisms within the Commission and the representatives. In his opinion, NGOs and networks have a bigger influence on health outcomes than the Commission. Marianella asks about the link between the CT and the co-chairs. Co-chairs are representing the CT as such and need to be part of the CT. The CSF is always followed by a Think Tank meeting of country representatives. In the past years the representatives have been very “silent” (some have not the mandate to speak on behalf of their governments). Both bodies are advisory boards to the Commission. The composition of the TT is very different: public health institutes, ministry representatives, etc. Other concerns raised: Could the CT develop a suggestion of changing or improving the role of CSF and TT? How could CS be more involved with the commission?
- PrEP in Europe SC meeting in December: Focus was on the programme of the upcoming conference and the governance of the PrEP in Europe initiative.
- Meeting on MSM in Central and South Eastern Europe in December: the outcome of the meeting is the updated 2008 Ljubljana Declaration on gay men’s sexual health. After the document is finalised, signatures should be collected via CSF list and other channels.
- UNAIDS PCB meeting in December: the NGO report presented focused on the 10-10-10, populations left behind in the current AIDS response. Among the highlight of the meeting were the updated report on stigma and discrimination and the report on HIV in prisons. The Thematic Day focused on discrimination in health care settings.
- FPA and SGA in December: Michael briefly explains situation and that signing the SGA is delayed until the issue of the official complaint is solved.
- With Christos and Esther joined 2 new SC members in January.
- ECHOES in January: The survey was extended for one month which was a good decision as the promotion could attract more CHWs.

- EATG Stakeholder meeting in January: the meeting was very useful as always. The meanwhile “traditional” staff meeting between AAE and EATG followed on the day after the SH meeting.
- Health4LGBTI project closing meeting in February: Ferenc attended the meeting where the training modules for health care provider sensitisation were presented.
- ESTICOM objective 2 & 3 meeting in March: CEEISCAT reported on the ECHOES results which showed difference between Europe and Northern Europe, Scandinavia has the best trained and educated CHW in Europe. Richard questions the follow up and the future steps of ESTICOM. Could AAE on behalf of its members collate an opinion regarding the project? Silke supports the idea of bringing up these issues within the project meetings.
- PrEP in Europe Summit in February: The geographical overview was strong but it addressed prominently MSM. The issues of how to take it to other communities needs to be addressed. Outcomes: PrEP inclusion in the transition documents of the GF; staff working document of the European Commission; increase ways of communication
- March: AAE communication strategy was finalized
- March: AAE was invited to the selection committee for the WHO Europe good practice compendium
- EU multi financial framework (MFF): Currently there is no budget for health after 2020; we need to move to the phase of advocating with member states.
- Chemsex Forum in Berlin in March: this was the 2<sup>nd</sup> European even on Chemsex. There were more than 100 participants from all over Europe, Chemsex users, service providers and policy people. Ferenc was part of a panel talking about legal issues, including consent but also the criminalization of drug use and its effect on Chemsex.
- The reporting of SGA 2017 was finalised done and if all costs are approved then we have managed to exhaust the budget much better than in the previous year
- Feedback from the EECAA conference: some sessions were very useful (migrants, civil society) but in general it was a typical conference organized by the Russian Government; there were many CS sessions but there was very little communication among different stakeholders, it is a conference of parallel worlds; the side meeting organized by UNAIDS was focusing on NGO - GO cooperation, this session was a bit more open than the conference itself. Ukraine boycotted the conference. With more than 3000 participants, one is wondering why by the end of the day only 250 people are left. AAE was involved in the set up of the UNAIDS side meeting in which M. Kazatchkine made a strong summary that can be used for future work. In general, it is a good networking opportunity for AAE to meet our members and partners from the region.

#### 4. Governance

Silke introduces issues on the updated TORs for the AAE SC member and the rewritten TOR for the CSF Coordination Team representative.

Due to the change in CSF governance composition, there is a need to work on the election procedure for the person for the Coordination Team. The office could work till next SC meeting.

The discussion went around the issue of who this person could be selected from. Should this person be from the Steering Committee Member or could it be a Member organisation or maybe another person affiliated with AAE.

Marianela suggests that it could be someone from the SC, who then should be replaced in the SC for the period of the term. Since one of the existing SC members will have a double function, AAE could look for another SC member for that period.

The office will prepare some bullet points on selection criteria procedure for the next SC meeting. The office will come up with different models. A decision does not need to be taken before the end of 2019. However the ToR for co-chair need to be taken of the website as they are not valid anymore and taking off old ToR for co-chair because they are not valid and the ToR for SC need to be amended with regards to the change of fixed seats (page 3).

## 5. Communication

Oksana presents the statistics of the newsletter following up from the Berlin SC meeting in November. The objective is to discuss what information is useful, what information is missing and what could be improved with regard to design, structure and content.

Feedback: AAE could think about audio visualizing newsletters. Although it is time and energy consuming it might work to make it more appealing. The advantage of the newsletter as it is now is that it can be downloaded and read on the train for instance. Another opinion expressed is that the AAE newsletter is targeting professionals who work in the field of HIV. Therefore, directly clickable topics would be more useful for them. Short news summaries in a monthly or bi-weekly video would be interesting. Keeping the newsletter shorter with more links to the articles would be more useful. Others like the teasers for the articles as they give a clear picture of what is to expect from the article. Newsletters also record the history and activities. Therefore, we shouldn't only look at the quantity of article clicks as the newsletter might be the only source of information for some. Podcasts could also be added to information distribution. It is suggested to dedicate a small part of the Member Meeting to the communications needs of our members.

## 6. Amsterdam 2018 and AAE involvement

The 2017 AAE Member Meeting discussions gave a good basis for what should be achieved at IAS 2018. Unfortunately, AAE and EATG were not granted a European Networking Zone but only a networking boot which makes ideas like exhibitions, projections and bigger audience tackling activities impossible. However, a call for presentations and discussions will be sent out to have an own programme for the booth as planned in the set framework of GO and NGO collaboration. Successful was an application to IAS where EATG and AAE are funded for communication and information activities.

The request to introduce silence periods without any major music and drumming or other noise related activities was approved. Until 12.00 h the Global Village should be a quiet zone. Also, in communication with EATG it was discussed to have a key speaker session every day on a certain topic. Social Media communication and coverage will be worked on by EATG and AAE separately respectively additionally. As soon as possible the equipment of the Networking Booth needs to be discussed and ordered.

## 7. UNAIDS PCB

Ferenc briefly presented on the UNAIDS PCB NGO Delegation. Even though NGO Delegation do not have a right to vote, they influence 65% of all decision making.

Each year the NGO Delegation submits its report. This year the topic is on migrants and mobile populations. Input from the SC Member would be very helpful and appreciated.

Ferenc raised 2 topics concerning UNAIDS PCB for the discussion: CCF and sexual assault case within UNAIDS

a) CCF stands for communication and consultation facility. It is a body that supports work of the NGO Delegation and is paid by UNAIDS. The current CCF is based in Bangkok and their current term is ending in 2018. SC Members should discuss and decide whether AAE should apply for the next CCF term. It is a 2 years contract which is extendable up to max 4 years.

The benefits of getting CCF: it would increase reputation of AAE, one should not underestimate the influence of any Secretariat. It will be also important with regards to diversification of funds and possible staff extension.

There was no objection from the Steering Committee Members to apply after the call will be published.

b) Civil society and member states are divided with regards to the sexual assault case within UNAIDS. There are discussions questioning the state of UNAIDS as such: Some organisations and member states support that UNAIDS should stop at all and leave the field to WHO to take over, some think that UNAIDS is still needed but that Michele Sidibe should step down.

Within the Steering Committee, the opinion is that UNAIDS is still needed. The HIV agenda is already disappearing and if WHO takes over then there will be only a public health approach. AAE might consider to come up with a statement that sexual assault in the framework of the #metoo movement is not only a problem within UNAIDS but the whole UN. But it seems to be wise to wait for more evidence and investigation.

The decision is that the office should work on a draft statement based on the discussion here in Paris.

The year is Ferenc's last year on the NGO delegation. That is why we need to think on potential Delegates from Europe.

## **Tuesday, April 24**

### 8. Thematic core areas

The second day of the meeting focuses on thematic sessions. During the previous SC Meeting in Berlin it was decided to change from working groups to focal points and have

discussion which involve all SC members. Michael presented the way to work on the second day and the expected outcomes.

### 8.1 PrEP (Focal point: Tanja and Sini)

AAE is a member in the Steering Committee of the PrEP in Europe Initiative. Marianela points out that we shouldn't forget that some countries don't even have proper access to ART. AAE should find its role in the whole PrEP movement, we need to be complimentary to what already exists. For example, offer translations of documents rather than produce them. Another idea is to introduce a PrEP Tag in the Clearinghouse and collect materials on this issue. Another suggestion is to produce videos on PrEP.

As for the practical work we have planned to create a webinar and to apply a quality action tool in 2018.

It is perceived that there is a lot of aggressive promotion of PrEP in the gay community. At the same time, uptake is low but the community tries to roll PrEP out no matter what. There are reasons why people don't take PrEP. On the other hand, PrEP needs to be thought of in a bigger picture. It can also be a starting point to talk, about drug use as well as affordability.

Decision: The to be developed webinar and application of a quality action tool within the SRHR thematic core area should cover information that is demanded by our members. PrEP should be thought about as a combined approach, following up on the PrEP summit and Initiative. It should also consider various obstacles. A PrEP tag on the Clearinghouse will be created.

### 8.2 Chemsex (Focal point: Richard)

AIDS Action Europe participated in and supported the Chemsex forum. During the Chemsex Forum the terms Chemsex and problematic Chemsex were used. We as AIDS Action Europe need a clear definition and position.

A longer discussion centres on the type of drugs that are supposed to be counted in under Chemsex, the criminalisation of drugs at large, how to factor Chemsex into the bigger picture of harm reduction, to change the narrative of problematic Chemsex and how AAE could facilitate cooperation and dialogue between gay community and drug community as it seems to be difficult to bring them together.

What AAE could do is to develop a webinar on issues of problematic use, what our organisations could work on and to link between different and parallel communities as well as to make a clear position of decriminalisation, drug policy and effect on harm reduction.

As it already happened, Chemsex needs continuously to be taken to the international level at conferences and meetings like the HepHIV conference, the CSI conference and the CSF that for its second meeting in 2018 will take place jointly with the CSF on drugs.

### 8.3 Criminalisation (Focal points: Sini and Silke)

In the SGA this topic is planned as part of the EHLF with regards to documenting, building a network etc. A first discussion considered countries that could be involved. There is focal point in every country within the HIV Justice Network. We will have to check with countries and organisations.

Pre-selective countries could be those where criminalisation is especially high. Criminalisation has been a huge issue within the Nordic countries, highly stigmatising with criminalisation of key populations. We should take into account countries where the situation is very bad or which are progressive. Organisations involved in the activity need to be member organisations of AAE.

#### 8.4 Affordability (Focal point: Marianella)

Affordability is an essential point of the FPA for 2018-2021, for 2018 an updated training manual and 2 ToTs are planned. After a series of successful trainings in 2016-2017 at international level, the objective is now to transfer the advocacy training skills from the international to the national level, also considering that there are AAE Member organisations interested who don't command the language skills and to whom it is important being trained in their country languages. The Office will contact people who were trained in 2016/17, asking whether they would be interested to participate in the ToT in order to become a national trainer.

#### 8.5 People in prisons and detention (Focal point: Aigars)

Aigars introduced the discussion with a summary of documents regarding the situation of people in prison and detention. The discussion covered aspects like the right to health in prisons and detention facilities at a practical level, the over representation of key populations in prisons, testing and compulsory testing and access to condoms and other prevention tools. The office will come up with an application to co-fund the project, planned and described in the SGA 2018, that reflects this discussion in order to start the activities still this year in the framework of the EHLF.

#### 8.6 Fundraising (Focal point: Marianela)

AAE established contact with the Robert Carr Foundation that specifically supports regional networks. As soon as the call is published, the Office will share it with the SC in order to discuss possible contents and opportunities. Moreover, towards the end of the year the call for the Communication and Coordination Facility (CCF) for the UNAIDS PCB NGO delegation is expected.

#### 8.7 Member and Partner Meeting (Focal point: Silke)

The Meeting is planned for October. The procedure will be similar to previous years with a call for abstracts on good practice from member organisations and the opportunity of a broader discussion.



After some suggestions the SC decides to have a good practice call on access to harm reduction and the discussion on the role of international networks and what is expected from us.

## 9. Action list

	WHAT	WHO	TIMEFRAME
A	Share the final draft of the updated 2008 Ljubljana Declaration on gay men's sexual health with the SC	Ferenc	asap
B	Revision of the ToR for the CSF Coordination Team representative	Michael, office	Until the next SC meeting
C	Come up with few selection procedures for the CSF Coordination Team representative	Michael, office	Until the next SC meeting
D	Submit an updated text for the European Networking Booth	Sini and Michael	By 27.04.2018
E	Share with SC call for consultations to the NGO delegation's report on migrants and mobile populations	Ferenc	As soon as the call is published
F	Work and share with SC draft of statement regarding UNAIDS situation	Office	asap
G	Forward to the SC the call for NGO Delegate for Europe to the UNAIDS PCB for dissemination	Ferenc	As soon as the call is published
H	Create a PrEP Tag on Clearinghouse	Oksana and Ljuba	asap
I	Develop and send out a survey on affordability for participants of 2016-2017 trainings	Oksana	asap
J	Write and share draft application for next round of EHLF	Ferenc, office	asap
K	Come up with the call about good practice for Member Meeting 2018	Office	asap
L	Write and share application to the Robert Carr Foundation for the next 3 years	Michael, office	asap