



# European Testing week

## 22-29 November 2021

Results from the November 2021 ETW evaluation



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# Background and methods

# November 2021 theme

- The theme of November ETW 2021 focused on the need “to catch up on testing” and regain focus on HIV, viral hepatitis and STI priorities.
- With special emphasis on:
  - Integrated testing
  - Self-testing + self-sampling (for some infections where self-testing is not available)
  - Testing in the framework of Combination Prevention

22-29  
NOVEMBER  
EUROPEAN  
TESTING  
WEEK  
www.testingweek.eu  
2021

**EuroTEST**  
Working together for integrated  
testing and earlier care

**Catch up on testing!**  
For HIV, viral hepatitis and STIs

**Register and join Autumn European Testing Week 2021**  
22-29 November

Why participate in European Testing Week (ETW) this year? More than ever, ETW can help us refocus our attention to HIV, viral hepatitis and STI priorities in our countries and regions.

The COVID-19 pandemic and measures to control it have shifted staff, funding and resources away from other healthcare essentials. In October 2020, UNAIDS reported “significant decreases in HIV testing services in nearly all countries with available data”. Country level surveys report similar trends across Europe. While some countries have rebounded to pre-COVID-19 testing levels, in other countries, testing remains low.

However, the COVID-19 pandemic has also demonstrated the ability of communities, governments and international bodies to take extraordinary measures to tackle infectious diseases. Let’s build on this in our work to increase testing.

**It’s time to catch up on testing and regain focus on HIV, viral hepatitis and STI priorities.**

Significant gaps remain in diagnosis of all these infections which can undermine international strategies to end HIV, viral hepatitis and STI as public health threats by 2030. Testing, especially in the context of combination prevention, is an essential health service, especially for marginalised and stigmatised populations such as sex workers, people who use drugs, migrants, people in prison, trans people and men who have sex with men, all of whom are often most at risk and most in need of targeted services.

**ETW calls for**

- > [Integrated testing](#)
- > Self-testing + self-sampling (for some infections where self-testing is not available)
- > Testing in the framework of [Combination Prevention](#)

This year, ETW will launch simultaneously with International Testing Week, which is promoted by [Coalition PLUS](#), with the participation of organizations around the globe.

**We are all part of the solution!**

Let ETW’s network and resources be part of your solution!

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# Evaluation methods

- An **online survey** in REDCap was distributed to all registered ETW partners to evaluate European Testing Week.
- **Reminders** (three via ETW newsletters and several posts on ETW social media) were sent prior to the survey deadline (28 January 2022).
- **Limitations** include:
  - Limited answering possibilities due to pre-defined answer categories
  - Possible language barriers and perceptions of questions asked
  - Survey length
  - Majority of questions are optional and not required for the respondent to answer
  - Lack of incentives to submit survey answers
  - Competing priorities/lack of resources due to the COVID-19 pandemic

# Survey data – a descriptive overview

# Survey data – a descriptive overview

- By the end of the 2021 Nov ETW, there were **665 organisations** registered on the ETW website as participants
- **28** participants completed the evaluation survey for a **response rate of 4.2%** (including partial responses)
- **Respondents** represented **17 of the 53 countries** in the WHO European Region and the majority were from **Western Europe (79%)**
- The country with the highest number of **sign-ups** was **Ukraine**, followed by **Italy**, and **Spain**.

# Survey data – a descriptive overview

Figure 1. Regional distribution of participants (N=665) and respondents (N=28) by WHO European Region

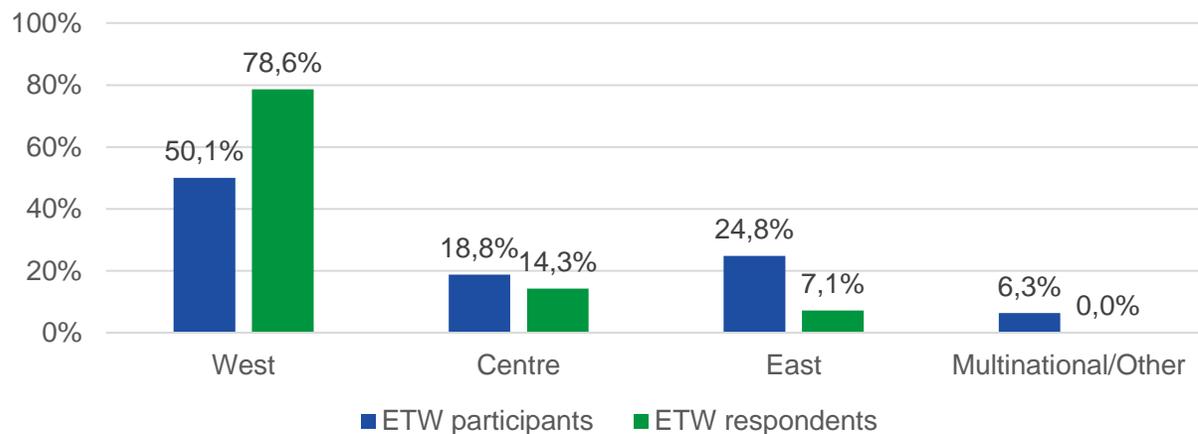
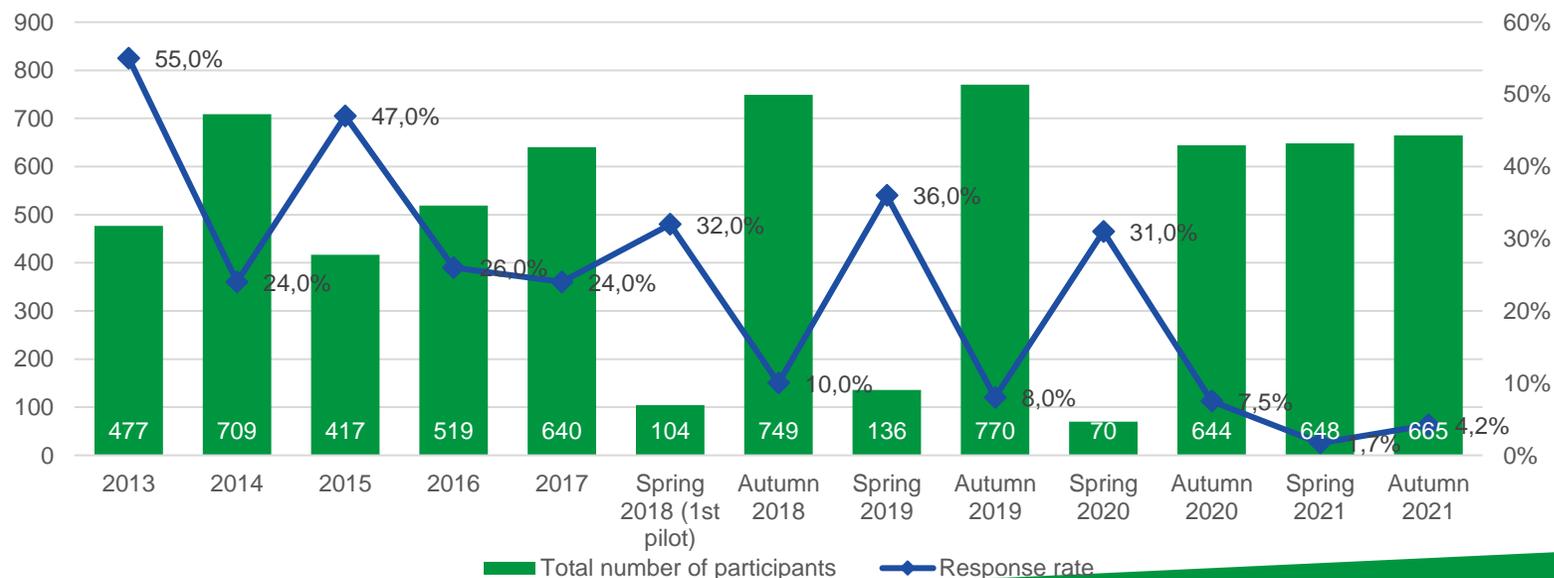


Figure 2. Total number of registered ETW organisations and survey response rate from 2013 – 2021



# ETW participants, by region and country

| West           | No. of sign-ups | Centre               | No. of sign-ups | East          | No. of sign-ups |
|----------------|-----------------|----------------------|-----------------|---------------|-----------------|
| Andorra        |                 | Albania              | 3               | Armenia       | 3               |
| Austria        | 7               | Bosnia & Herzegovina | 3               | Azerbaijan    | 4               |
| Belgium        | 18              | Bulgaria             | 8               | Belarus       | 2               |
| Denmark        | 8               | Croatia              | 14              | Estonia       | 3               |
| Finland        | 4               | Cyprus               | 3               | Georgia       | 10              |
| France         | 12              | Czech Republic       | 9               | Kazakhstan    | 2               |
| Germany        | 27              | Hungary              | 11              | Kosovo        | 1               |
| Greece         | 5               | Montenegro           | 3               | Kyrgyzstan    | 2               |
| Iceland        | 1               | North Macedonia      | 7               | Latvia        | 5               |
| Ireland        | 12              | Poland               | 20              | Lithuania     | 43              |
| Israel         | 3               | Romania              | 9               | Moldova       | 5               |
| Italy          | 51              | Serbia               | 10              | Russia        | 16              |
| Luxembourg     | 9               | Slovakia             | 4               | Tajikistan    | 4               |
| Malta          | 4               | Slovenia             | 17              | Turkmenistan  |                 |
| Monaco         |                 | Turkey               | 4               | Ukraine       | 64              |
| Netherlands    | 6               |                      |                 | Uzbekistan    | 1               |
| Norway         | 10              |                      |                 |               |                 |
| Portugal       | 47              |                      |                 |               |                 |
| San Marino     |                 |                      |                 | Multinational | 39              |
| Spain          | 50              |                      |                 | Other         | 3               |
| Sweden         | 14              |                      |                 |               |                 |
| Switzerland    | 5               |                      |                 |               |                 |
| United Kingdom | 40              |                      |                 |               |                 |

# November 2021 participating organisations

# Organisations

- The majority of respondents represented **NGOs/CSOs (75%)** followed by **health care settings/hospitals/clinics (14%)**.
- The **majority (93%)** reported that testing was part of their regular services.

Figure 3. Types of organisations by survey respondents, N=28

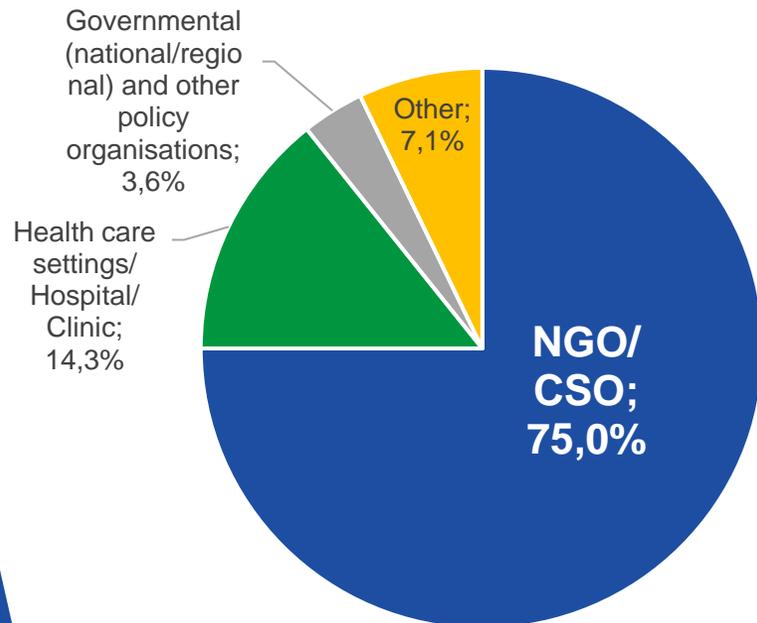
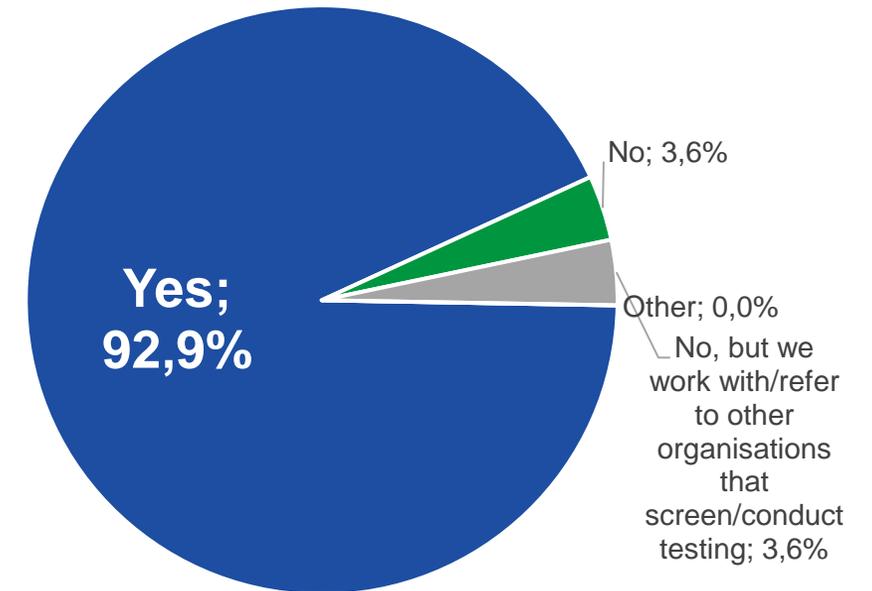


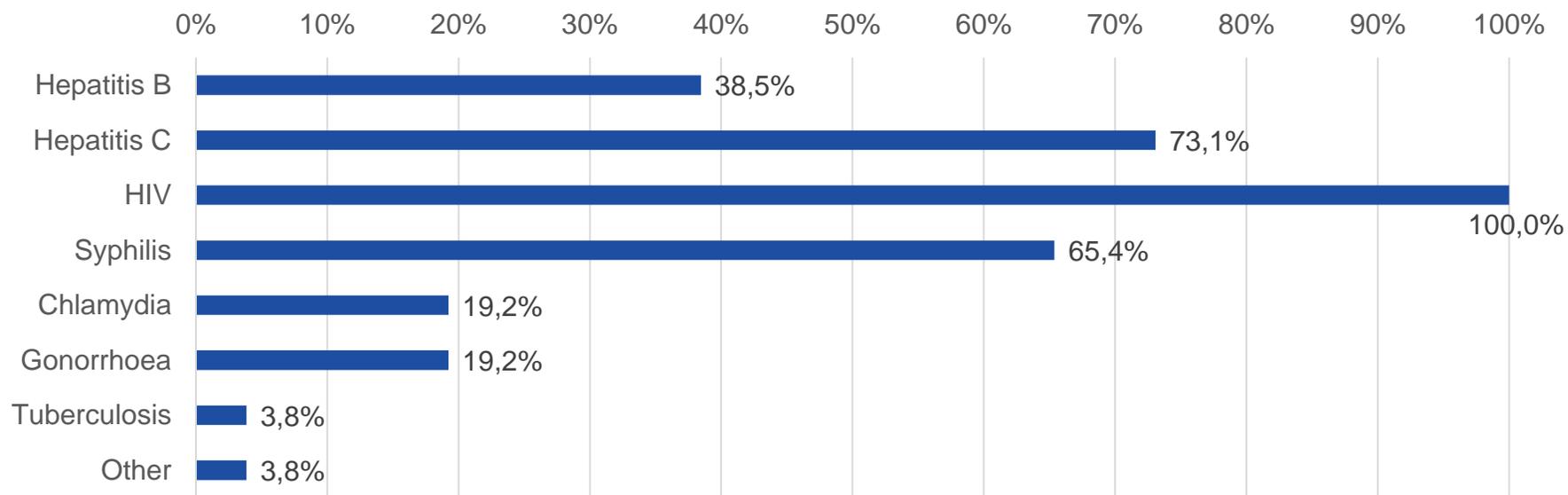
Figure 4. Testing as part of regular services (N=28)



# Tested conditions

- Of those who reported testing as part of their regular services (N = 26), they were asked for which conditions.
- All respondents reported testing/screening for HIV, followed by HCV (73%) and syphilis (65%)

Figure 5. Types of conditions tested through regular services\* (N=26)

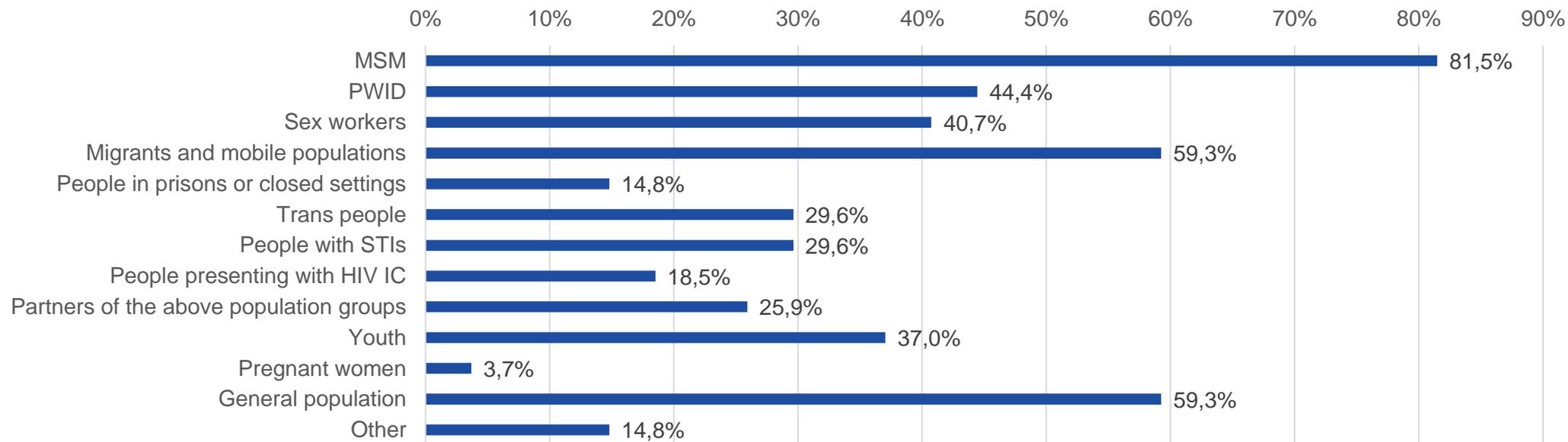


\*Respondents could choose more than one answer option

# Populations accessing services

The top three groups that access respondent's services were **MSM** (82%), the **general population** (59%), and **migrants and mobile populations** (59%)

Figure 6. Main key groups that access their services\* (N=27)



\*Respondents could choose more than one targeted group

Other populations included:

*Heterosexual men who are travelling abroad*

*Homeless*

*PLHIV*

*People who use drugs*

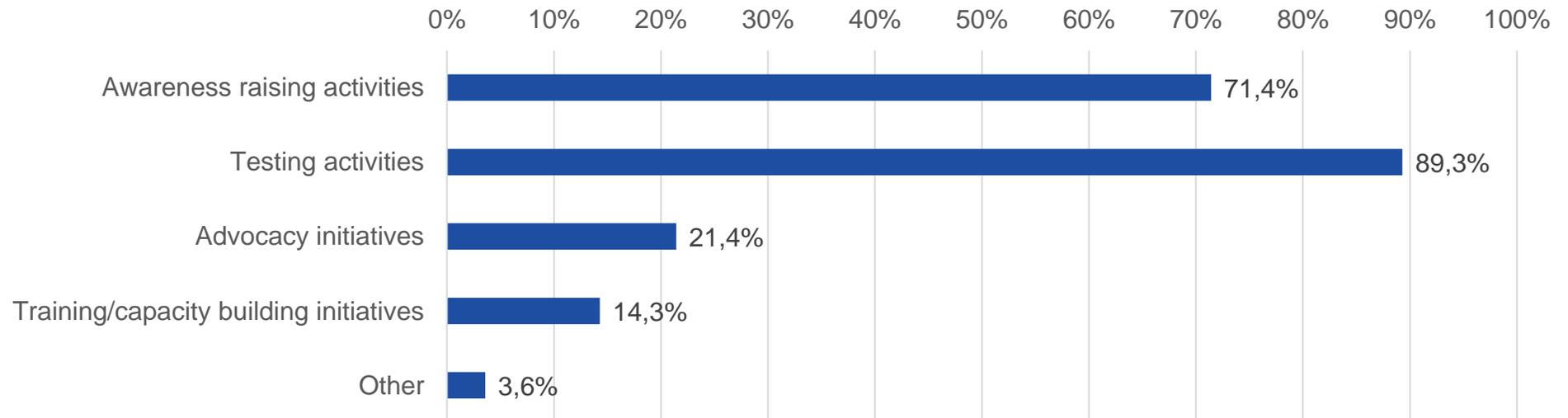
# November 2021 ETW activities

# Types of ETW activities

All respondents reported that they organised activities during the Nov 2021 ETW.

For the November 2021 ETW, the majority of respondents (89%) reported organising testing activities.

Figure 7. Types of activities for 2021 Nov ETW\* (N=28)



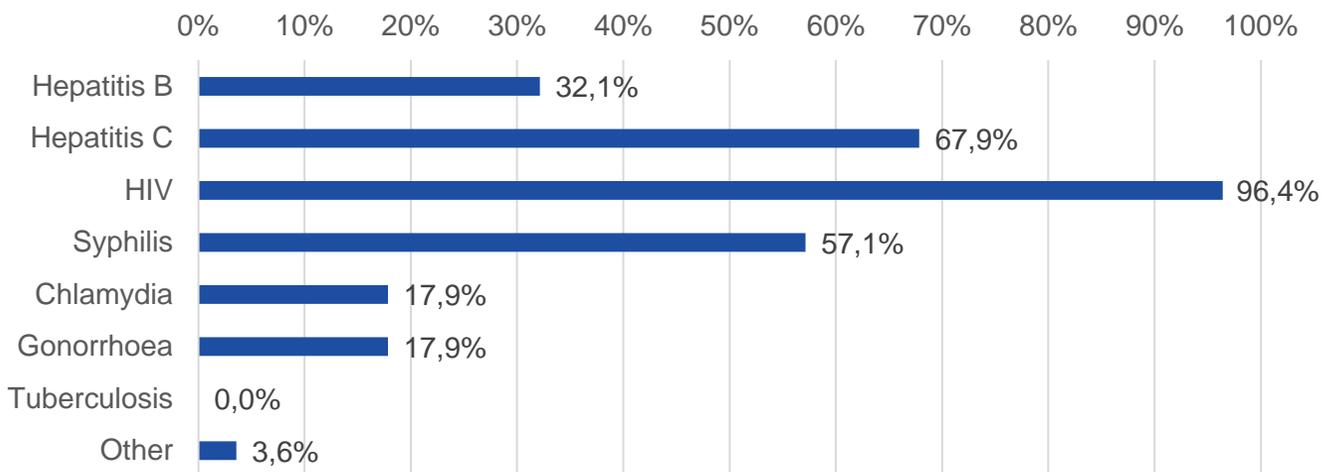
\*Respondents could choose more than one answer option

# Targeted conditions

Similarly to past ETWs, the majority of respondents reported targeting their activities on HIV (96%) followed by HCV (68%) and syphilis (57%).

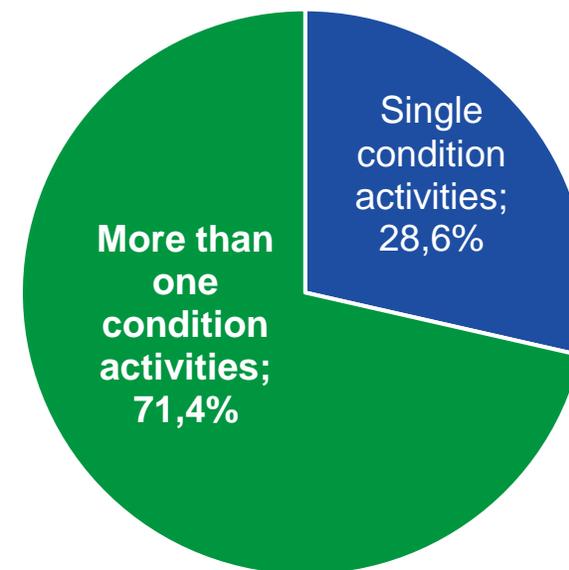
However, the majority of respondents (71%) reported targeting more than one condition for ETW

Figure 8. Targeted diseases for ETW activities, November 2021\* (N=28)



\*Respondents could choose more than one answer option

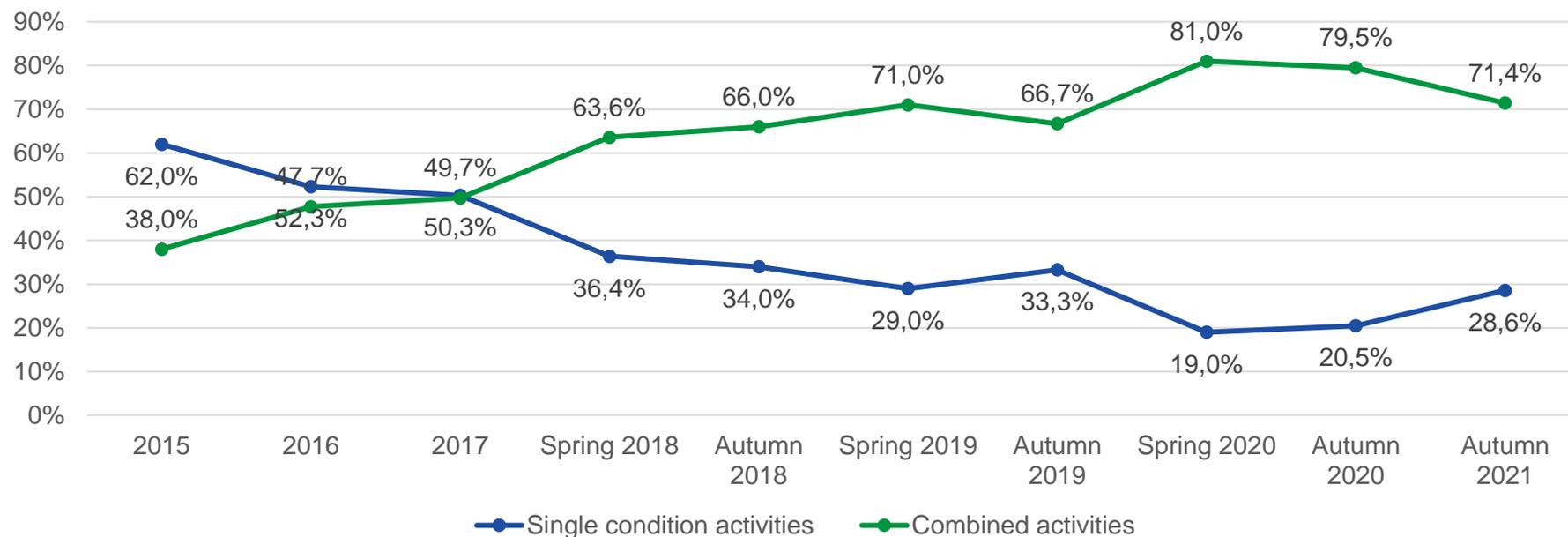
Figure 9. Activities targeting more than one condition vs. single condition activities, November 2021 (N=28)



# Targeted conditions comparison

- When comparing the amount of respondents reporting targeting single condition vs. combined (for HIV, HBV, HCV & STIs) ETW activities, the proportion **declined slightly** from the last Autumn ETW.

Figure 10. Single condition vs. combined condition ETW activities from 2015 – 2021



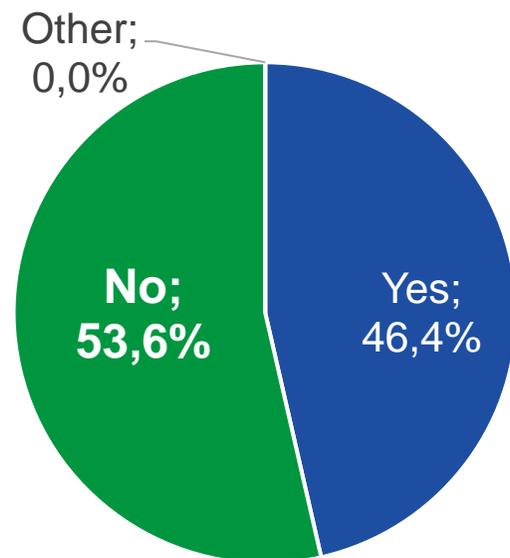
\*For the Spring 2021 evaluation, respondents were not asked to specify for which conditions they targeted for ETW.

# Targeted populations

More than half of respondents (54%) reported targeting their ETW activities for populations that normally access their services.

- However, it should be noted that **all respondents** reported that their regular services serves **key at-risk populations**.

Figure 11. Activities targeting populations that do not normally access services, November 2021 (N=28)



#### Examples of other targeted groups for the Nov 2021 ETW:

*People testing for COVID-19*

*The public health care workers, nurses*

*gbMSM experiencing rural and urban isolation*

*IDU, Migrants, sex workers and homeless*

*We always try to reach target groups who never use clinics or low threshold offers. People who have sex with same gender ++*

*Migrants and mobile populations*

*Population from excluded neighborhoods, mainly migrants*

# Examples of Nov 2021 ETW activities

*We did a press conference and TV interviews to target the general public. We collected statements from different people of interest (politics, health care, other NGOs) about the importance of being tested and posted them on our website. We offered free HIV rapid tests as well as hepatitis tests for our customers.*

*We have organize testing activities in the local of some partners and also we have done some outreach testing with our mobile unit.*

*We offered tshirt, condoms and lubricants and information about HIV and other STI's and created the website of ETW: about 90 different health care places got involved in ETW all around [country] in 2021*

*We offered free HIV-Selftests. We sent information about our services to 275 doctor's offices to be laid out in the waiting areas.*

*We offered rapid testing at triage for COVID-19 and rise awareness thru posters and information on our web site. Testing availability was prolonged outside opening hours (throughout the whole day from 9am until 7pm). Virtual World AIDS Day Symposium was held on 26th of November online. More than 100 participants were brought together. Clinicians, scientists, ministry of health representatives, civil society representatives and other established national experts and NGOs involved in different aspects of HIV infection and related co-infections (HCV, syphilis...) actively participated at this interdisciplinary symposium. We collaborated with 2 other checkpoints to provide care and confirmatory test. Throughout our testing activities and Symposium we did promote other ETW activities. Also, producing posters and flyers promoting actions, and posters encouraging healthcare workers to recommend testing was well accepted by participants.*

# Examples of Nov 2021 ETW activities

1. We launched a nationwide poster and social media campaign which encouraged gbMSM to order a HIV self-test and to post a selfie to their social media platforms encouraging their peers to get tested during ETW.

We did rapid (oral) HIV and HCV tests in the office of two GP

We disseminated information about our testing activities on social and websites

Whole week we provided free, anonymous HIV tests. Our worker went to do tests to the temporary living home for the vulnerable men and women. We had a meeting with local government organisations and other NGO's discussing possibilities of closer partnership

Sent a mail to all University students (5400), a local tv service (133.000 spectators), some news on local daily journal (35.000 readers). News and a video on social media pages (Facebook, Instagram, Twitter: 21.000 views)

We advertised the testing dates during ETW on social media. We had three "special" openings during the ETW: Nov. 22, 24 and 25.

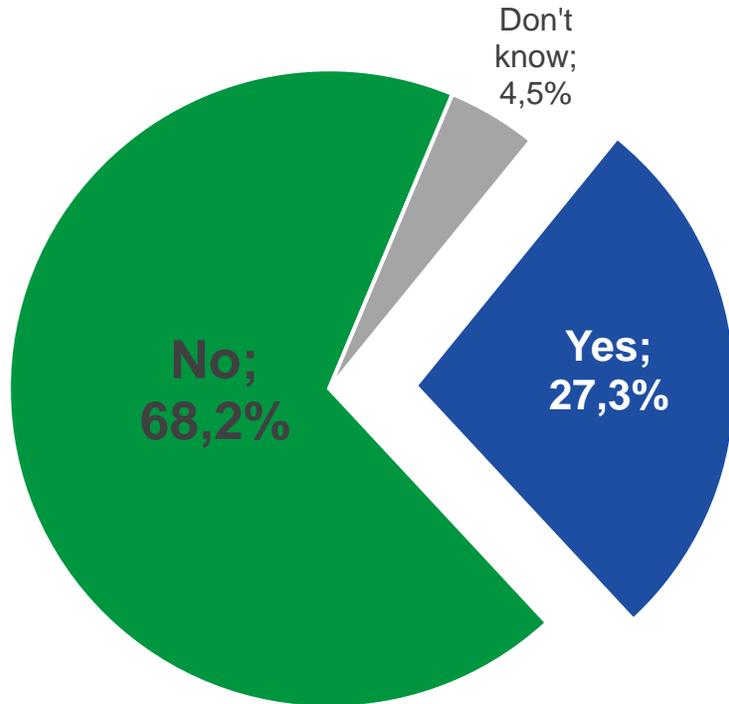
Social media campaign on FB/ Instagram... We had a gift for all who came for testing during ETC (condoms and HIV self test kits) We organized PCR HCV testing in our Mobile Harm Reduction Service - we did 89 tests many interviews about testing with journalists

[Translated from Spanish] Prevention/awareness work for vulnerable groups and/or at risk of social exclusion, psychosocial care, administration of screening tests for the general population, training and courses in educational institutions.

# New activities for ETW

- The majority of **respondents** reported **not engaging in new activities** for the Nov 2021 ETW

Figure 12. Reported new activities for the Nov 2021 ETW (N=22)



Examples of new activities for the 2021 November ETW:

*Expanding offering testing and linking testing to COVID-19 testing services  
The 'Take A Selfie' campaign was a unique communications campaign for us.*

*PCR HCV testing for drug users*

*We improve the publicity in the social media.*

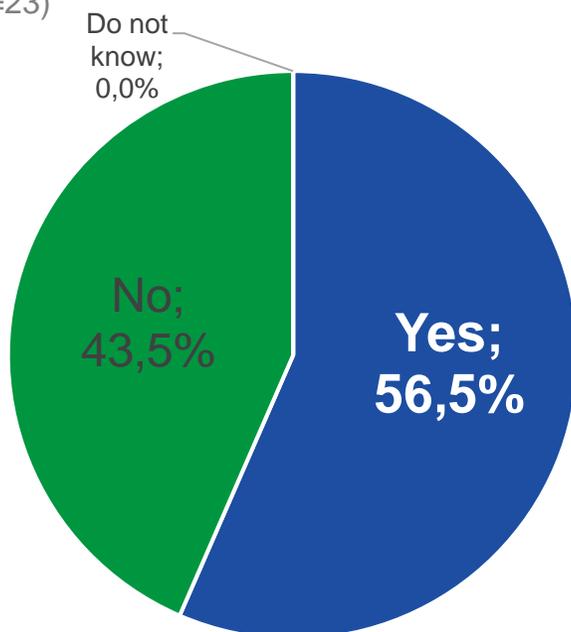
*We went to a lot of places to do community actions, we also went to some company's that work with migrant population and were able to do a lot of tests with people who have never been tested before.*

*Using Van for whole county high intensity test and treat*

# Collaborations

- The more than half of respondents (57%) reported collaborating with other organisations for ETW.

Figure 13. Percentage reporting collaborating with other organisations for the Nov 2021 ETW (N=23)



## Examples of collaborations:

*We collaborated with the [country] Medical Association by promoting a special campaign in order to get people testing.*

*Collaboration with some partners to organize testing in their office during ETW, and also collaboration with the cities to have free parking for our mobile unit, and also collaboration with hiv center to the confirmatory test for our clients and the linkage to care*

*More than 100 participants were brought together at the virtual World AIDS Day Symposium held on 26th of November online. Clinicians, scientists, ministry of health representatives, civil society representatives and other established national experts and NGOs involved in different aspects of HIV infection and related co-infections (HCV, syphilis...) actively participated at this interdisciplinary symposium. We collaborated with 2 other checkpoints to provide care and confirmatory test.*

*Collaboration with local FAST TRACK City project to implement HIV and HCV awareness*

*Organizations of shelter for Migrants and homeless that proposed STI screening on their structures. Representative students group in University that promoted our initiatives*

*Bars, clubs, sauna, marketing etc, other city.*

*We improve the number of interventions in the community and in other places , hotels, for example.*

*We always collaborate with NGOs /in the case they found reactive results/*

*We organise several awareness-raising roundtables and training days.*

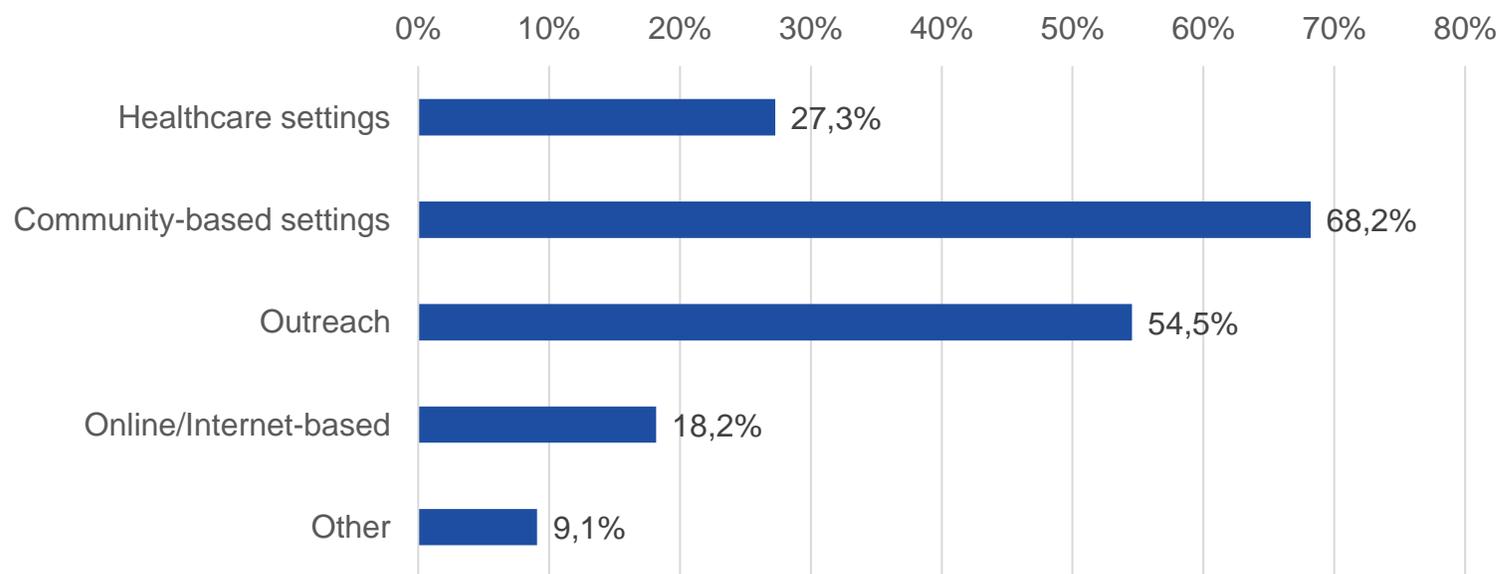
*Public health, homeless healthcare, pharma...*

# Testing activities for ETW

# Testing setting

- The majority (68%) of respondents reported conducting their ETW-related testing activities in community-based settings.

Figure 14. Setting for testing-related ETW activities, November 2021 (N=22)



\*Testing in healthcare settings includes all forms of healthcare settings (primary care, hospitals, clinics, drug treatment settings, prisons, etc).

\*\*Testing in community settings is defined as any programme or service that offers testing on a voluntary basis outside formal health facilities, includes fixed sites.

\*\*\* Testing in outreach settings is defined as testing activities in non-traditional venues including public spaces, bars, events, etc.

\*\*\*\*Online testing activity includes sale/distribution of self-test

\*Respondents could choose more than one answer option

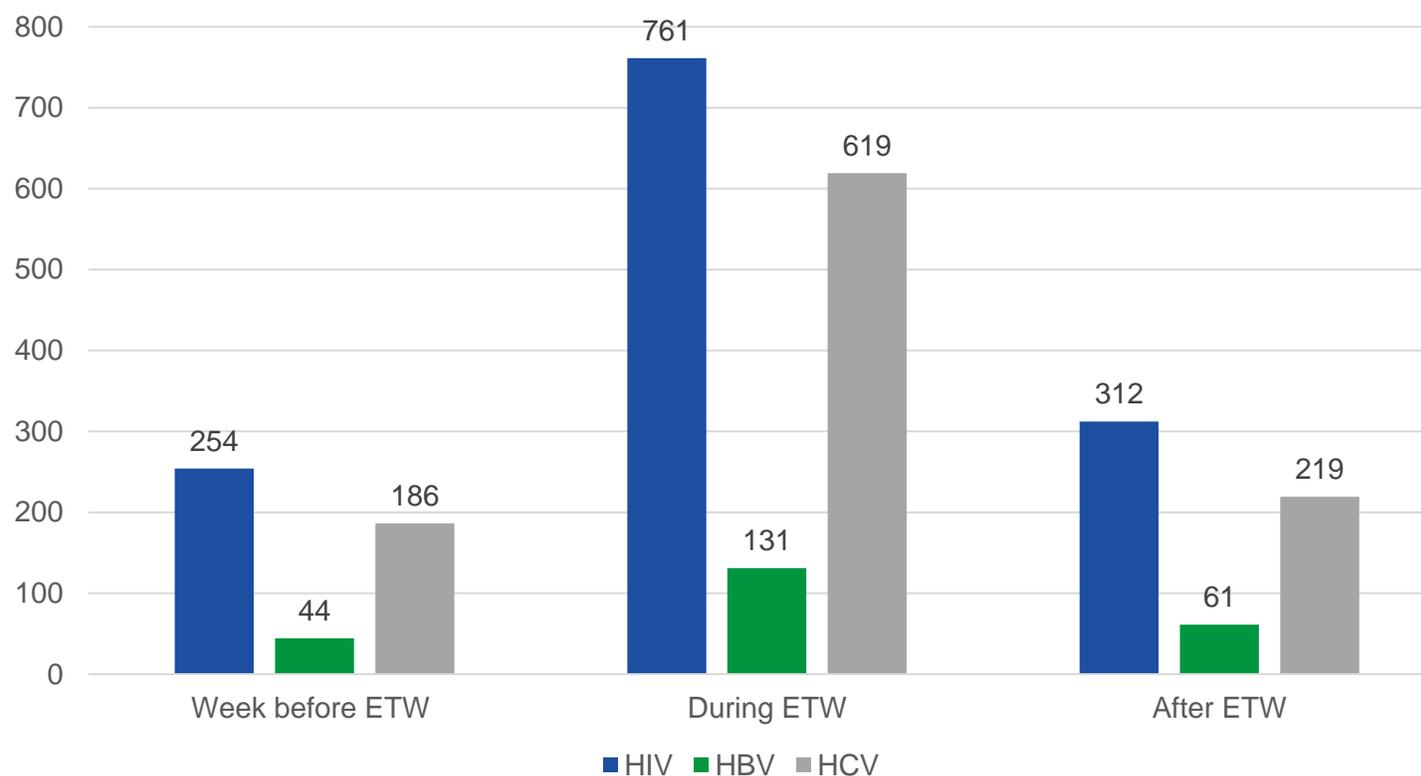
# Testing during ETW

- Participants were asked to report their **total number of tests performed, total reactive tests** and **total of those linked to care** during the following time periods:
  - The week before ETW
  - During ETW
  - The week after ETW
- Through the online survey, respondents were able to provide any available testing data for HBV, HCV and HIV.
- **46% (N=13)** of the total survey respondents who reported testing activities for ETW provided testing data
  - However, not all of those provided data for each time period
- Of the 13 respondents reporting testing data, **(85%, N=11)** provided data for all three time periods.

# Reported testing data for HIV, HBV, HCV

- A total of 1,629 tests were conducted during ETW

Figure 15. Total amount of tests/screening for HIV, HBV and HCV before, during and after the November 2021 ETW (N=11)\*

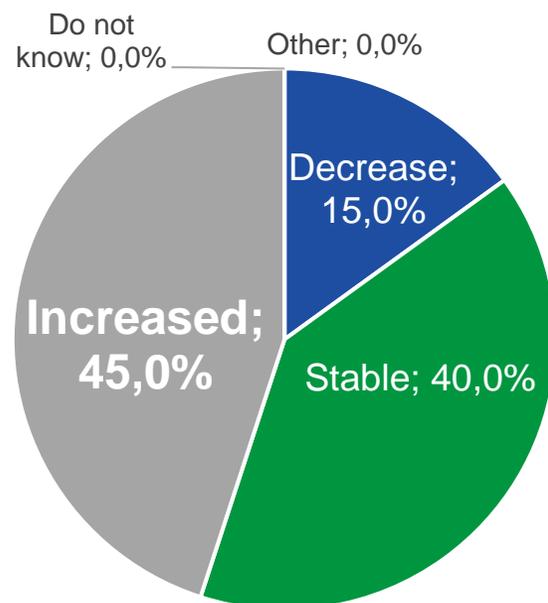


\*Only respondents who provided data for all three time periods were included in the graph

# Change in test volume

- If respondents were not able to provide quantitative testing data, they were asked to select an estimated value to measure the approximate change in tests performed at their organisation during ETW compared to an average week before the pandemic.
- **Most respondents (45%)** reported a **increase** in testing volume

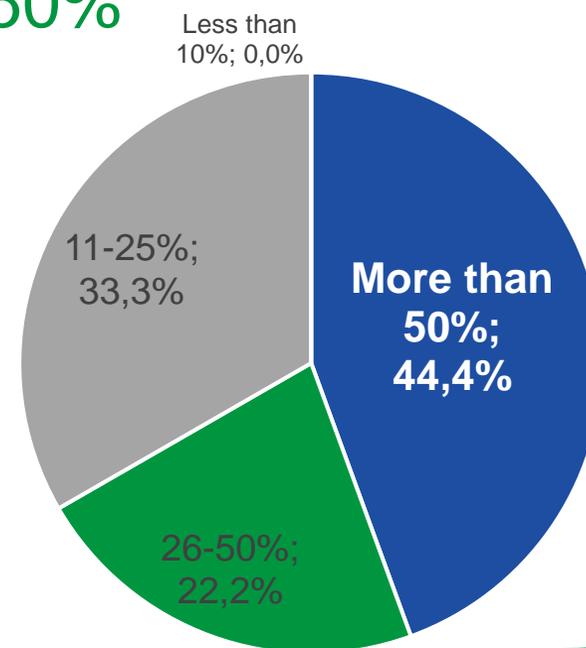
Figure 16. Approximated change in testing volume during ETW compared to an average week before the COVID-19 pandemic, November 2021 (N=20)



# Change in test volume

- Of those who indicated a 'decrease' in testing volume (N=3), two reported a decrease of more than 50% while one respondent reported a decrease within the range of 26-50%
- Of those who indicated an 'increase' in testing volume (N=9), the majority (44%) reported increases of more than 50%

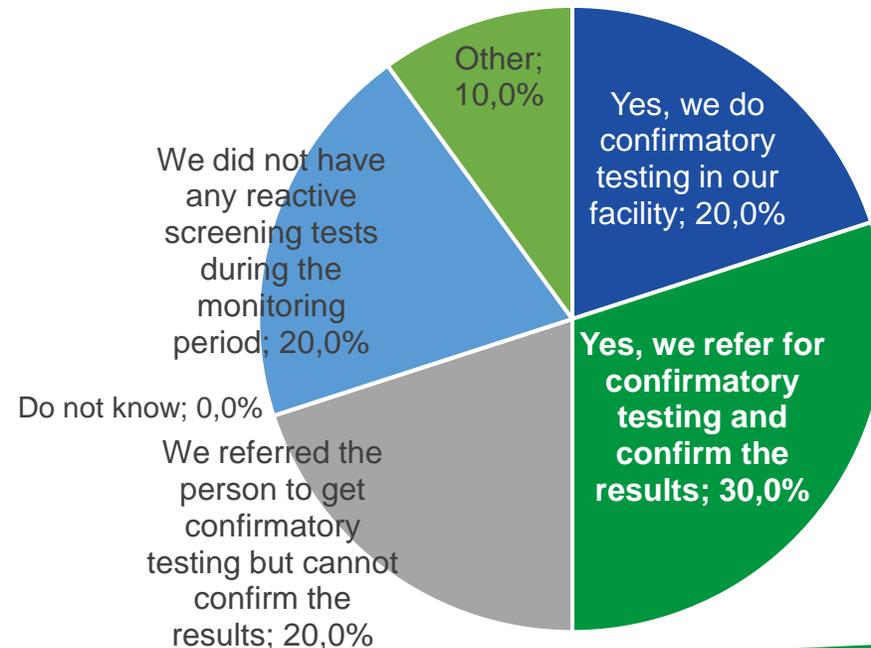
Figure 17. Estimated percentage increase in testing volume during ETW compared to an average week before the COVID-19 pandemic (N=9)



# Confirmatory testing

- Although **20%** of respondents reported **no reactive tests/screening during ETW**, of those who had reactive results, **half of respondents** reported that when a client had a reactive testing/screening, they were able to confirm the results.

Figure 18. Confirmatory testing after a reactive test/screen for the 2021 November ETW (N=20)





# Examples of successful activities

*We articulate more with other institutions in the county.*

*assess acceptance , both from GP and clients, of such testing strategy*

*We reach a lot of youth and we improved testing activities with homeless and migrants.*

*The creation of awareness about HIV an other STDs in the general public (for example articles in different newspaper, TV, radio)*

*Increased awareness. More testing. Motivational.*

*raising of health care units that got involved*

*the best part of ETW was being able to do it!*

*We were able to do a lot of screenings during this week.*

*a lot of information about testing in social media*

*The [social media] Campaign we ran during the week of ETW. It allowed us to create momentum behind testing messaging and access to testing.*

*Expanding offering testing and linking testing to COVID-19 testing services, and offering testing for syphilis confidential and free of charge. Increase in free and anonymous HIV tests performed at our Clinic from up to 50%. Almost 40% of all those who tested did the test for the first time in their lifetime. Testing availability was prolonged outside opening hours (throughout the whole day from 9am until 7pm).*

*Accessing migrant population with little information about HIV*

*Stakeholder involvement whole system approach*

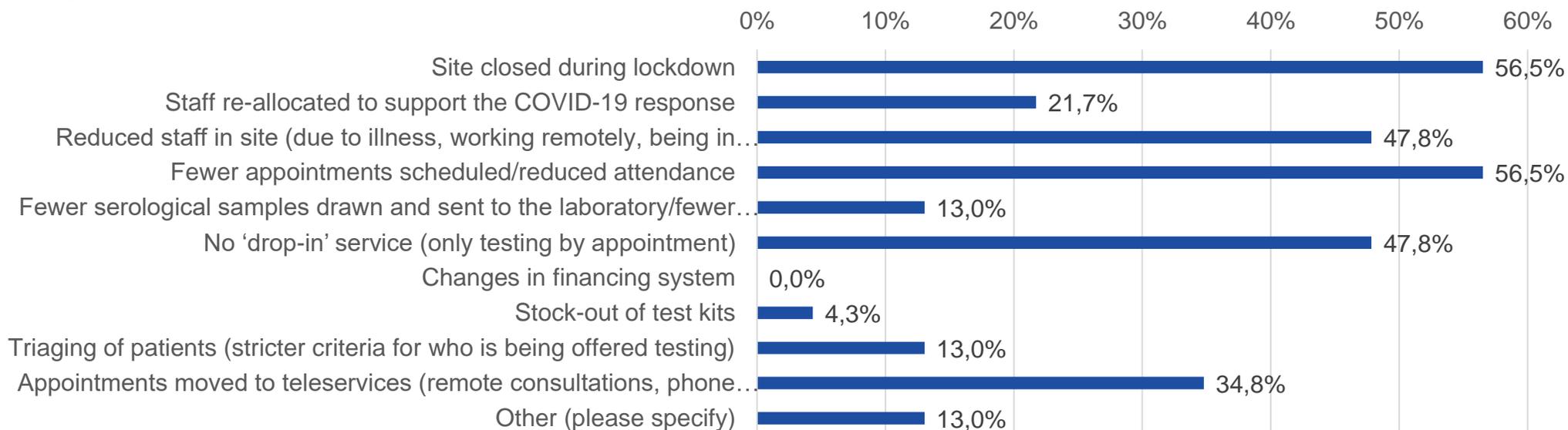
*Our HIV rapid testing service.*

# Impact of COVID-19 on services

# Impact of COVID-19 on services

- Respondents were asked to provide any observed impacts/adaptions in their services due to COVID-19
- **Site closures** and **fewer appointments scheduled/reduced attendance** were reported as the top impacts COVID-19 affected services

Figure 19. Impact of COVID-19 on services, November 2021\* (N=23)

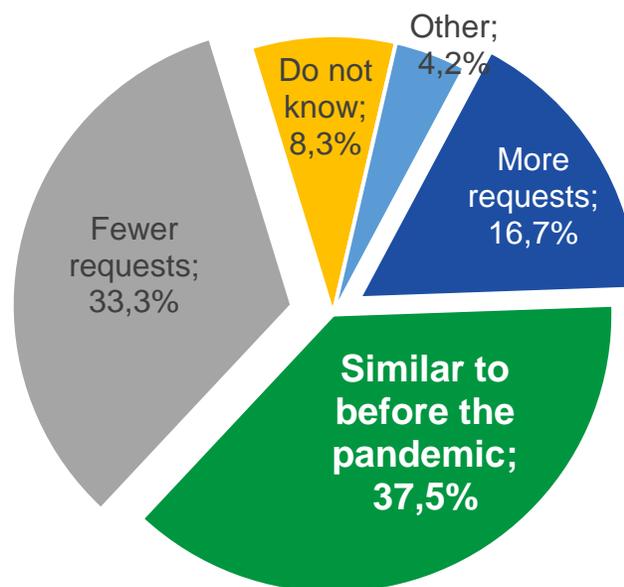


\*Respondents could choose more than one answer option

# Request for services

- Respondents were asked to categorise clients' requests for services\* during the current COVID-19 period
- **Most reported (38%)** that clients' requests for services were **similar to before the pandemic**

Figure 20. Categorisation of clients' requests for services during the current COVID-19 period, Nov 2021 (N=24)



**Of those who reported 'fewer requests,' they reported:**

*Due to restriction in traveling (lock out)*

*I think people are more focused and worried about covid-19. In addition, people have had less opportunity to have sex during lockdown periods*

*Depends on the periods within the pandemic, and the rules and regulations presented at the time. because of COVID situation we have appointment for testing centre*

*Decrease of the volume of work in some of the groups that we work with (sex workers).*

*Less people came for testing during COVID epidemic*

**Of those who reported 'more requests,' they received requests for:**

*Sexual health services have everchanging access due to COVID-19, we have remained a point of access for HIV testing and information and referral to sexual health services. In addition we received increased requests for condoms and lube and sexual health / wellbeing support.*

*We offered home self-testing during 2021 and received a marked increase for testing during this time. We hope to renew the self-testing service in 2022 as a result of the demand.*

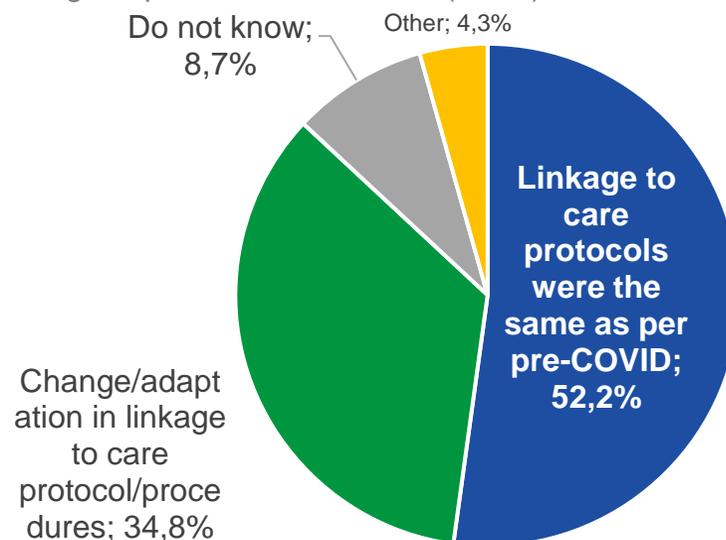
*More problematic alcohol users*

\*Request for services' can include any form of contact for any type of service (not just testing)

# Linkage to care during the pandemic

- Respondents who were implementing testing services were asked how they conducted linkage to care following a reactive test during the pandemic
- The **majority (52%)** reported the linkage to care protocols were the **same as per pre-COVID**

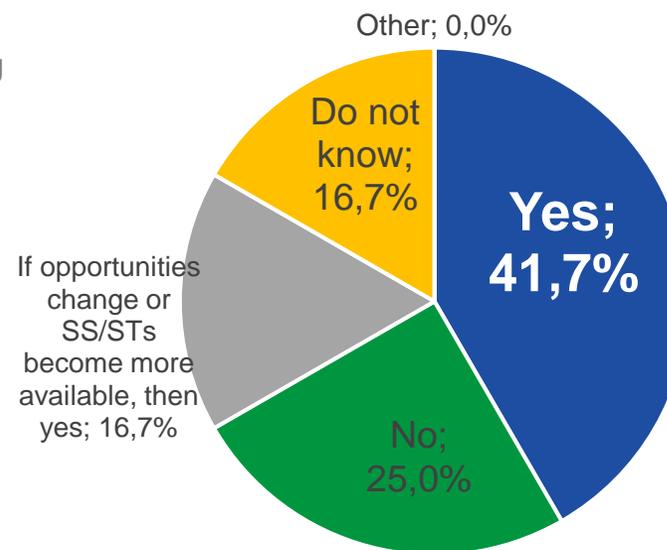
Figure 21. Linkage to care during the pandemic, Nov 2021 (N=23)



# Self-testing/sampling

- In Spring 2020, during the early stages of the pandemic, there was growing interest of expanding self-tests/self-sampling due to the lockdowns. To follow-up, for the Nov 2020 survey, respondents were asked if their organisations were considering adopting or expanding self-testing and/or self-sampling services.
- **Most respondents (42%)** reported **Yes**, their organisations were considering to expand their services to include self-testing/sampling.

Figure 22. Expansion of self-testing and/or self-sampling services, Nov 2021 (N=24)



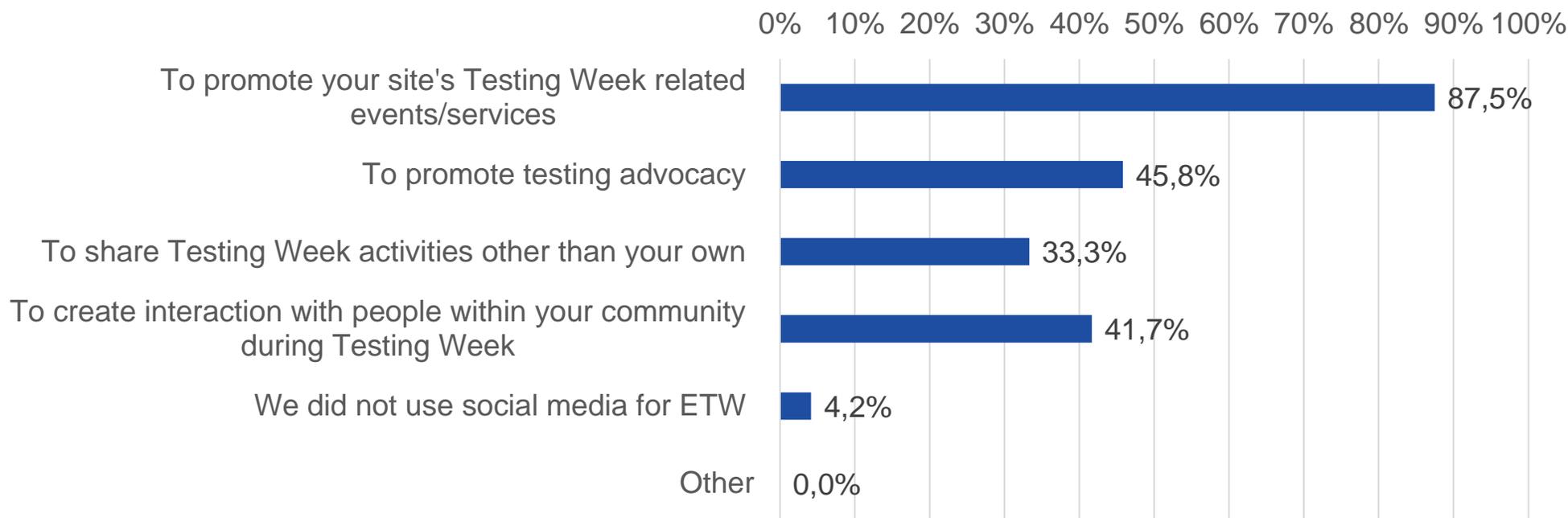
\*The wording of this question does not specify if the respondent's organisation already implements ST/SS services

# ETW online activities

# Use of social media

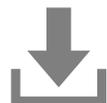
- The majority (88%) of respondents reported using social media to promote their own ETW-related events/services

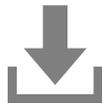
Figure 23. Use of social media for the Nov 2021\* ETW (N=24)

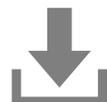


\*Respondents could choose more than one answer option

# ETW materials

 **65**  
downloads

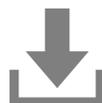
  **25**  
downloads  
ETW word  
template

 **27**  
downloads

**355**  
total downloads  
of testing week  
Materials

  **11**  
downloads

Toolkit 2

  **18**  
downloads  
Powerpoint  
template

# Webinars / Online videos

- For the November 2021 ETW, the secretariat hosted a live webinar on self-testing for Hepatitis C
- The webinar programme had four presentations
- There were 14 participants during the live webinar
- (As of Feb 2022) There are 25 views of the webinar recording



**22-29  
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2021**

WHO Collaborating Centre  
on HIV and Viral Hepatitis

**EuroTEST**  
Working together for integrated  
testing and earlier care  
Addressing Hepatitis, HIV, STIs and TB

**WWW.TESTINGWEEK.EU**

**Date:** November 8th, 13:00 - 14:00 CET

ETW webinar  
**SELF-TESTING FOR HEPATITIS C**

Programme:

|             |   |
|-------------|---|
| 13.00-13.05 | Welcome   |
| 13.05-13.15 | Niklas Luhmann (WHO)<br>"WHO recommendations and evidence on HCV self-testing"  |
| 13.15-13.25 | Ann-Isabelle Von Lingen (EATG)<br>"Community perspectives on HIV/HCV self-testing: results from a cross-country survey" |
| 13.25-13.35 | Sonjelle Shilton (FIND)<br>"HCV self-testing opportunities and challenges from real world implementation"               |
| 13.35-13.45 | Antons Mozalevskis (WHO)<br>"HCV self-testing: regional context and pilot projects in Georgia"                          |
| 13.45-13.55 | Questions from participants   |
| 13.55-14.00 | Closing   |

The webinar will take place via ZOOM. Please find the link to join in the event description.

# European Test Finder

# European Test Finder

- Over half of respondents (60%) reported hearing of the European Test finder.
- The majority (65%) also reported that their site was already registered.

Figure 24. Knowledge of the European Test Finder (N=26)

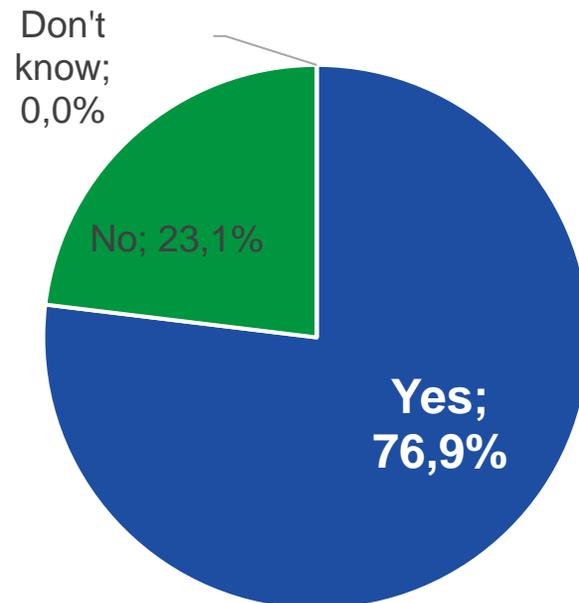
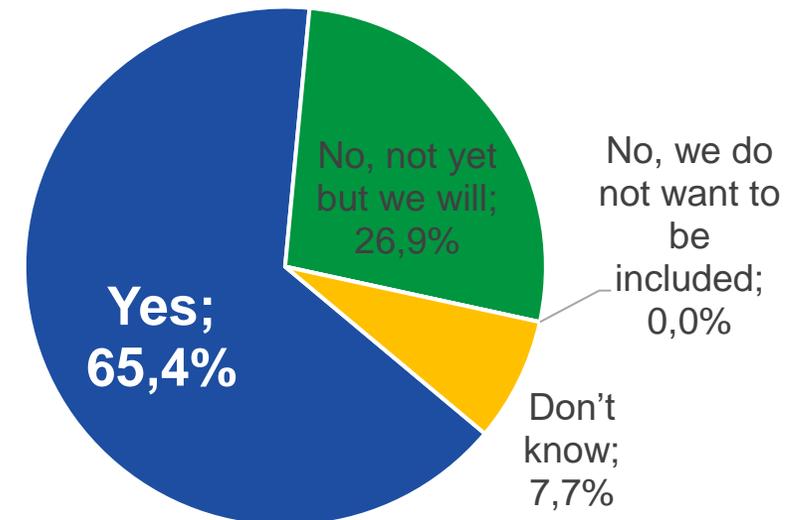


Figure 25. Registration on the European Test Finder (N=26)

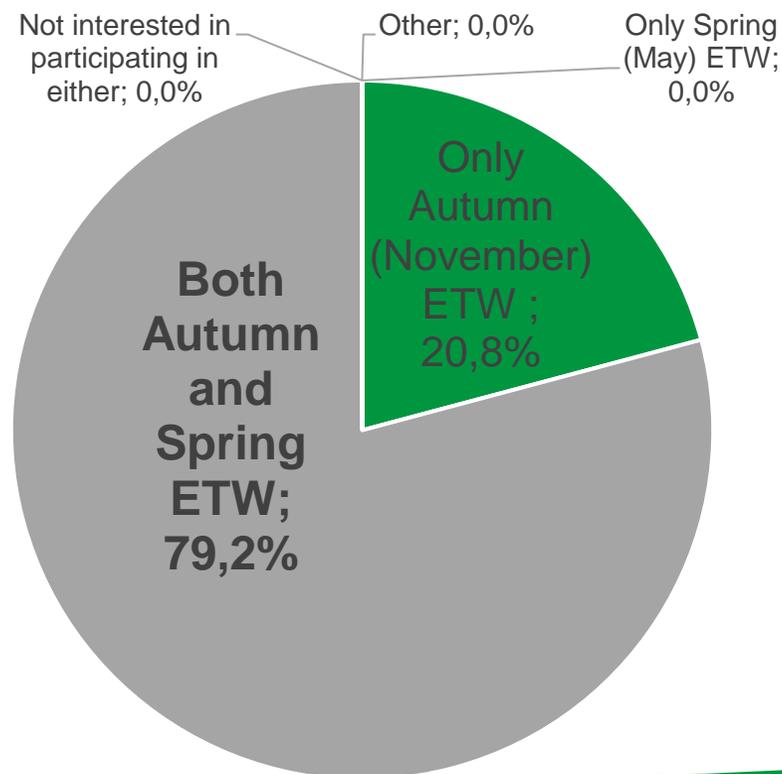


# Future ETWs

# Future ETWs

- The majority of respondents (79%) reported interest in participating in both the Autumn and Spring ETWs

Figure 25. Interest in participating in future ETWs (N=24)



# Collaborations

# International Testing Week

- Collaboration with Coalition Plus to organise the International Testing Week (ITW) (first launched in November 2020)
- In 2021:
  - ETW and ITW held a **joint launch event** in Lisbon and online
  - Released **joint press release** highlighting:
    - The **decline in testing for HIV, hepatitis and STIs** caused by the pandemic
    - The **urgent need to increase access to and provision of testing**



# Media Coverage

# Media coverage

- A search in Meltwater was conducted to find all relevant and ETW-related articles
- There was a total of **134 publications** in **14** different languages

The screenshot shows the website of the European Monitoring Centre for Drugs and Drug Addiction. The page is titled "European and International Testing Week launch event". It includes the following information:

- Event Dates:** 22 NOV 2021 TO 28 NOV 2021
- Organiser(s):** EUROTEST
- Event Type:** MEETING
- Description:** European Testing Week (ETW) was started by the [HIV in Europe initiative \(now named EuroTEST\)](#) in 2013 as a way to create a united European effort to raise awareness on the benefits of earlier testing for HIV. European Testing Week offers partners across Europe the unique opportunity to unite to increase awareness of the benefits of early HIV and hepatitis testing among those who are at risk and promote increased access to testing.
- Main subject:** harm reduction
- Keywords:** harm reduction, hepatitis C, HIV, preventing infectious diseases
- Target audience:** EMCDDA partners, policymaker, practitioner, researcher

A button at the bottom of the page says "Learn more about this event".

# Conclusions

# Conclusions

- As seen through other similar initiatives throughout Europe, the **survey response rate continues to decline**.
- Although there were 665 organisations signed-up on the website, because these registrants were carried over from previous years, the **true number of active organisations is unknown**.
- Activity in **Ukraine** continues to grow therefore more secretariat resources in Ukrainian/Russian should be supported.
- Similarly the past ETWs, the survey respondents comprised of majority **community-based organisations** who provide **testing in their regular services**.
- **All respondents** reported **offering testing for HIV**, however, increasingly more organisations report testing for other conditions, specifically **HCV and syphilis**.
- Similar to past ETWs, the **majority of respondents report MSM and the general population** as the top populations that access their regular services, however, for the Nov 2021 survey, **migrants and mobile populations** was frequently reported.
- The majority of respondents reported organising **testing activities for ETW** which many reported included **HIV**. However, the majority of respondents reported **targeting more than one condition for ETW**.

# Conclusions

- Similar to the Autumn 2020 ETW, respondents reported **not targeting their ETW activities for populations that do not normally access their services**, which should be further explored in future ETW evaluations. If there is reported limitations or restrictions in doing so, the secretariat can help to support or resolve those issues.
- The majority of respondents also reported **not engaging in new activities** for the Nov 2021 ETW which should also be further clarified in future evaluations as it can influence the strategic direction of future ETWs.
- The collection of quantitative testing data, although provides a more accurate description of testing activities, has its limitations. The **response rate continues to remain low** and similar to past ETWs, an accurate comparison of testing rates is unattainable due to **variability in reporting** (e.g. data was collected only for the week during ETW).
- Although less accurate, the **categorisation of the estimated change in testing volume** during ETW compared to a regular week before the pandemic, yields a **higher response rate and simplified overview of the impact on testing** during ETW.
- The COVID-19 pandemic continues to affect services with **site closures and fewer appointments scheduled/reduced attendance** as the most frequently cited issues. However, **requests for services and linkage to care** following a reactive screening remain similar to before the pandemic.

# Conclusions

- The interest in adapting/expanding services to include self-testing/sampling (ST/SS) **slightly increased** in comparison to results from the Autumn 2020 ETW. However, it should be noted that the wording of the survey question does not account for organisations who have already implemented ST/SS into their services and future evaluations should be amended accordingly.
- **Online activities/resources** continue to be utilised and serve as an important platform for the ETW network to gain and share from experiences.
- The majority of respondents reported knowledge of the **European Test Finder (ETF)** and reported already being registered. However, there is still a portion of respondents with no knowledge of the ETF therefore there is a need for increased promotion within the network.
- Similar to past ETWs, the majority of respondents report **willingness to participate in both the Spring and Autumn ETWs**.

# Acknowledgements

- The EuroTEST Secretariat would like to express their sincerest thanks to the following people and organisations for all their hard work and contributions during the development, coordination and execution of the November 2021 ETW and its subsequent evaluation:
  - The 665 registered ETW organisations, 28 survey respondents, and 44 endorsing organisations
  - **The Working Group:** Josip Begovac, Ben Collins, Nikos Dedes, Valerie Delpech, Zoran Dominkovic, Jason Farrell, Marine Gogia, Cary James, Chamut Kifetew, Tudor Kovacs, Takudzwa Mukiwa, Teymur Noori, Sini Pasanen, Daniel Simões, Dorthe Raben, Ann-Isabelle von Lingen, Tonni van Moonfort, Chris Wingrove, and Anna Zakowicz
- The evaluation was completed by Lauren Combs with assistance from Cæcilie Bom Kahama and Olena Valdenmaier with inputs from Dorthe Raben, the EuroTEST SC and the ETW WG.

# Financial Statement

- European Testing Week is coordinated under the EuroTEST initiative is governed by an independent Steering Committee (SC). The Coordinating Centre is at CHIP, Rigshospitalet and the political secretariat is at EATG.
- The conditions of funding the initiative are approved by the SC. Industry sponsors are invited to quarterly updates but do not participate in the SC.
- The EuroTEST initiative has received funding and grants from Gilead Sciences, ViiV Healthcare, Janssen, Merck/MSD, AbbVie, and the European Commission under the 3<sup>rd</sup> and 2<sup>nd</sup> Health Programmes and European Centre for Disease Prevention and Control (ECDC).