



European HIV-Hepatitis Testing Week 2017Results from the 2017 evaluation



17-24 ROPEAN TESTING TESTING TEST. TREAT. PREVENT. TEST. TREAT. PREVENT. TEST. TREAT. PREVENT.

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Background and methods



Background

- The 2017 European HIV-Hepatitis Testing Week took place from 17 - 24 November 2017.
- It was the fifth testing week, and the third to include viral hepatitis.
- European Testing Week offers partners across Europe the opportunity to unite to increase awareness of the benefits of testing.



Background

In the WHO European Region:

- Around one in four of the 1.2 million people living with HIV are unaware that they are HIV positive.
- It is estimated that 1.8% of adults are HBs-Ag positive (usually indicates chronic infection). And 2.0% of adults are HCV RNA-positive (usually indicates chronic infection).
- The purpose of the European Testing Week (ETW) is to promote HIV and viral hepatitis testing and optimal care in the WHO European Region.



Evaluation methods

One online survey in REDCap was distributed to all participating partners to evaluate European Testing Week.

- Three electronic survey reminders were sent prior to the survey deadline (31 January 2017).
 - Additionally, each 2017 registrant was emailed directly
- A data collection form was also distributed to collect weekly testing data (offer, uptake, positivity rate).
- 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



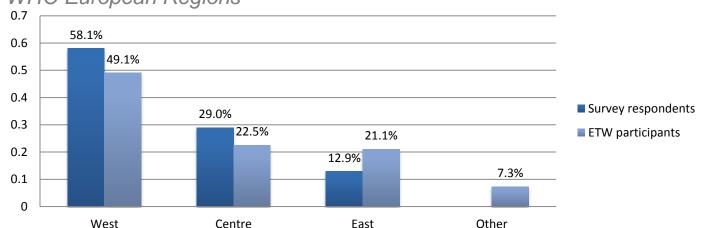
Survey data – a descriptive overview

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Survey data – a descriptive overview

- By the end of Testing Week 2017, there were 678 participants registered. However, after de-duplication of the participant list, there were 640 total participants for ETW 2017
- Of those, 186 were new in 2017, and 117 retained from 2016.
- Of those, 155 completed the evaluation survey for a response rate of 24.2%
- Respondents represented 47 of the 53 WHO European Region MS, and the majority were from Western Europe (58.1%) (Figure 1). (Missing: Andorra, Luxembourg, Monaco, Republic of Moldova, San Marino, Turkmenistan).

Figure 1: Regional distribution of participants (N=640) and respondents (N=155) by the WHO European Regions



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2017 participants by Country

West	Number of sites	Centre	Number of sites	East	Number of sites
Austria	12	Albania	1	Armenia	5
Belgium	22	Bosnia & Herzegovina	7	Azerbaijan	6
Denmark	7	Bulgaria	13	Belarus	3
Finland	6	Croatia	13	Estonia	4
France	6	Cyprus	3	Georgia	8
Germany	24	Czech Republic	11	Kazakhstan	3
Greece	5	Hungary	16	Kyrgyzstan	2
Iceland	1	The former Yugoslav Republic of Macedonia	6	Latvia	6
Ireland	17	Montenegro	4	Lithuania	24
Israel	2	Poland	18	Moldova	1
Italy	32	Romania	10	Russia	15
Luxembourg	0	Serbia	16	Tajikistan	5
Malta	3	Slovakia	5	Turkmenistan	0
Monaco	0	Slovenia	17	Ukraine	52
Netherlands	5	Turkey	4	Uzbekistan	1
Norway	13		•	•	•
Portugal	40				

www.testingweek.eu www.hiveurope.eu San Marino

Spain

UK

Sweden

Switzerland

0

41

15

6

57



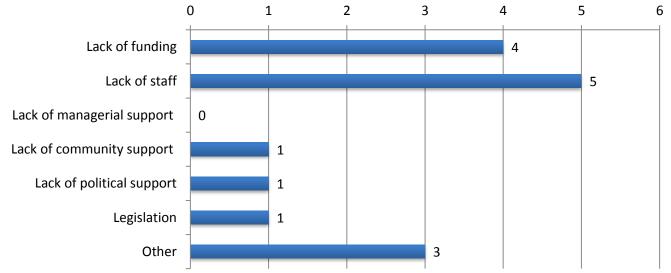
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For the first time, in 2017, we asked **all** participants who were registered in the ETW system but **did not participate in ETW 2017** to complete the first portion Post-Testing Week online survey.

 The aim was to examine why they did not participate and identify any challenges

Nine respondents to the online survey indicated that they did not participate in Testing Week 2017.

Figure 2. Reasons why respondents did not participate in ETW 2017 (N=9)



Other reasons included: Logistical issues, hearing about TW one week before and being unable to prepare

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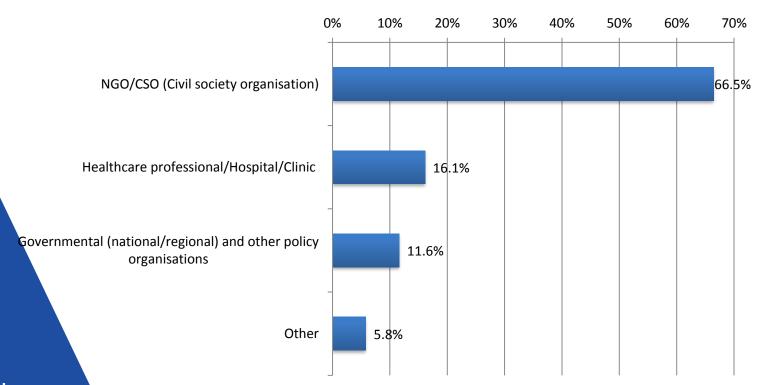
ETW 2017 participating partners and target populations



Types of participating partners

The majority of respondents represented NGOs/CSOs (66.5%) followed by healthcare professionals (Figure 3).

Figure 3: Types of respondents' organisation (N=155)

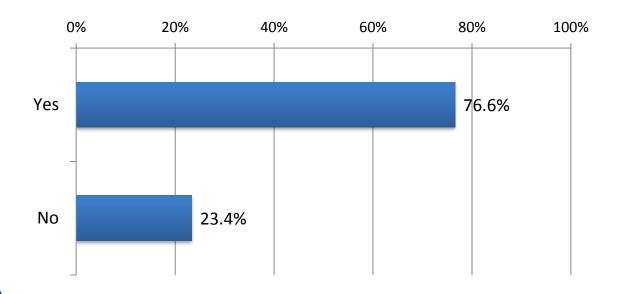




In 2017, participants were asked three new questions regarding allocating resources for TW.

Participants were asked if they dedicated/allocated staff to organise/coordinate their TW activities

Figure 4: Dedicated staff for ETW 2017 (N=141)





Examples from respondents:

"8 counsellors and outreach workers" [Eastern Europe]

"13 doctor/nurses for testing and 25 coordinators/volunteers" [Central Europe]

"3 for PR, 2 for target group information and 6 for testing" [Western Europe]

"50 % more staff this week than normal weeks" [Western Europe]

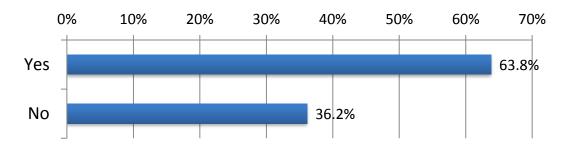
"2 Nurses and 10 volunteers for the T.W. daily activities; 1 nurse and 4 volunteers for outreach activity (1)" [Western Europe]

"20 people (all volunteers) spread across 3 days" [Western Europe]



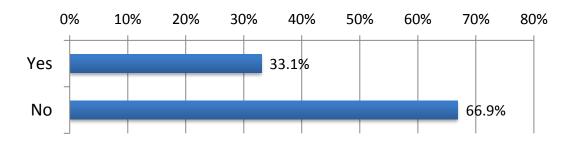
Participants were asked if they allocated resources beforehand for ETW (e.g. testing kits, educational materials, etc).

Figure 5: Allocated resources for ETW 2017 (N=141)



Participants were asked if they fundraised to help fund their ETW activities.

Figure 6: Fundraising for ETW 2017 (N=141)



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Examples of resources used:

"Testing kits, informational materials, medical supplies, condoms" [Central Europe]

"Special web site, mobile application on viral hepatitis, posters, brochures, links on various web sites including the one of the Ministry of Health of [country] " [Central Europe]

"200 HIV Tests; 200 Hepatitis B Tests; 200 Hepatitis C Tests; 200 syphilis Tests; Nursing materials and testing materials; flyers about the ETW; flyers about different IST; paper supplies for the monitoring of the activities." [Western Europe]

"200 tests for outreach activity (purchased with the testing week discount); posters and flyer to promote both the T.W. and the outreach activity." [Western Europe]



Examples of fundraising:

"We have re-allocated money from other ongoing projects (savings) that were directed to cover some testing week expenses." [Eastern Europe]

"We have applied for and received funding for test kits, supplies and promotion materials from pharmaceutical companies." [Western Europe] "We fundraise with test distributers in the country as well as pharmaceutical industry for Human resources/test kits. We also contact municipalities/ borough administration for 'in kind' support such as utilization of public space (paid in [country]), infrastructure for outreach (like tents), etc." [Western Europe]

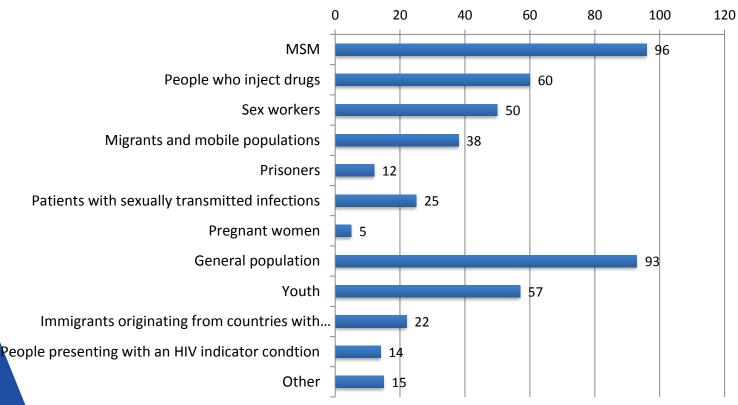
"We have fundraised specifically for ETW from [organisation] (unsuccessfully) and [city] (small grant received. We have covered rest of the costs from organisational budget for health improvement programme for MSM." [Central Europe]



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The majority of respondents targeted men who have sex with men (MSM), the general population and PWID (Figure 7).

Figure 7: Target populations during ETW (N=146)



Other target populations reported were the homeless, healthcare workers, fans of sex, trans people, poor neighbourhoods, elders and migrants in asylum centres.

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Most successful part of ETW

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"The increased number of people get[ting] tested. The media's interest about viral hepatitis and baby boomers." [Central Europe]

"Promotion of testing followed by increasing of HIV testing among key populations during December" [Central Europe]

> "99% uptake of HIV testing as part of general health checks such as Blood glucose, Cholesterol, Blood Pressure and BMI checks." [Western Europe]

"Testing in a public square in the center of [city] (two tents). Adherence was (for the 3rd year in a row) excellent, with over 250 persons tested (751 tests for all infections - HIV, HCV, HBV and syphilis)." [Western Europe]

"Be able to involve other formal partners such as City Halls and Primary Health Care Centres" [Western Europe]

> "The chance to enhance the scope of services with Syphilis testing." [Eastern Europe]

"Within the European Week of HIV testing we received invitations for our participation in several TV shows in which we informed about the importance of [doing a] HIV test and the available HIV testing services..." [Central Europe]

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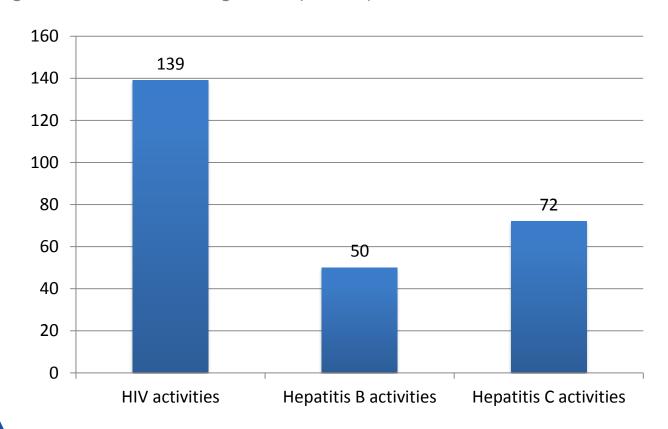
Type of activities



Type of activities

The majority of respondents carried out HIV activities (N=139), followed by hepatitis C activities (N=72), including testing activities (Figure 8).

Figure 8: Activities during ETW (N=143)

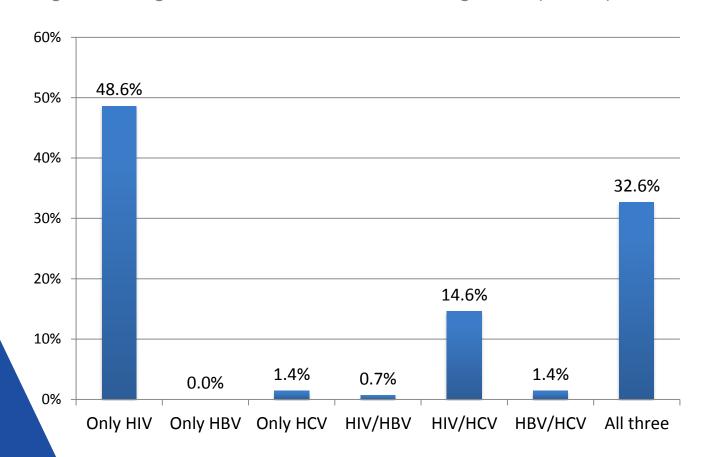


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Type of activities

For 2017, almost 33% of all respondents stated that they did activities for all three diseases. (Figure 9)

Figure 9: Single vs. Combined activities during ETW (N=143)



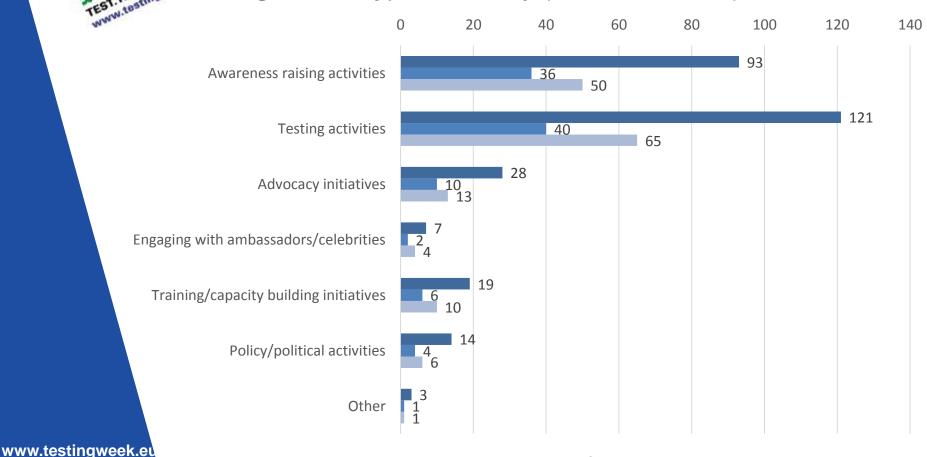


HIV, HBV and HCV activities

Activities (HIV, HBV, HCV)

Activities carried out differed slightly depending on the condition (Figure 10).

Figure 10: Type of activity (HIV, HBV, HCV)



■ HIV ■ HBV ■ HCV

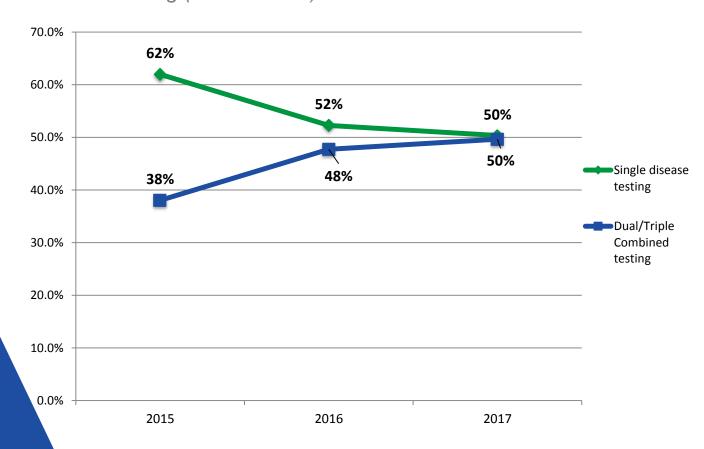
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Single disease vs. dual/triple disease activities

 Since 2015, when hepatitis was added as a key focus area, the amount of participants implementing combined activities for HIV/HBV/HCV has been on the rise (Figure 11)

Figure 11: Percentage who did single disease testing vs. dual/triple disease testing (2015 – 2017)



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Awareness raising activities

Examples of awareness raising activities:

"Counseling about HCV infection and distribution of information materials. Survey on knowledge and behavior related to HCV infection." [Western Europe]

"Informative tables in public spaces, distribution of preventive material in street and pubs, posters and specific flyers of the campaign, activities in social networks, awareness talks, quick tests with counselling. Our campaign was called Indetectable = Intransmissible." [Western Europe]

"Daily dissemination of HIV awareness-raising activities through posts on FB on different pages and groups... [including] a youth LGBTQIA group, a senior LGBTQIA group and other LGBTQIA groups around [country]. Also, interviews in radios and online and hardcopy press. Last but not least, informative material and condoms distribution in the framework of our outreach (street work) activities." [Western Europe]

"Community Based Rapid HCV Testing provision in venues frequented by specific target populations. Social media awareness raising. In house awareness raising for people who may have been at risk from HCV including promotion of the fact that a cure is now available. Training for staff in HCV and how to reduce stigma and support testing and diagnosis." [Western Europe]

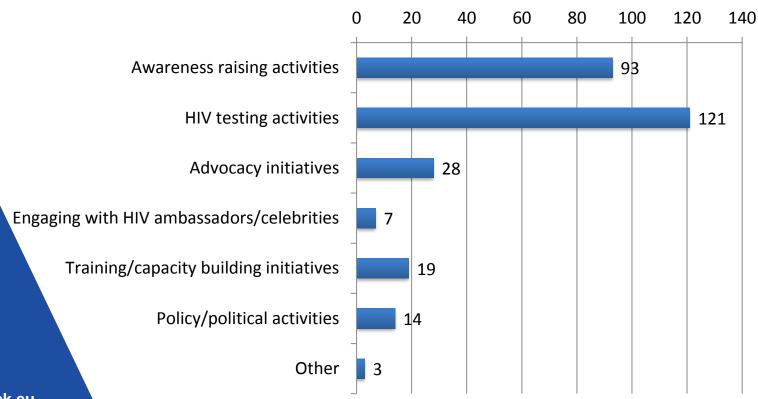


HIV activities

HIV activities

Of the respondents carrying out HIV activities (N=146) the majority carried out HIV testing activities (N=121), followed by awareness-raising activities (N=93) (Figure 15).

Figure 15: HIV activities during ETW (N=146)



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Other activities included: endorsement of ETW and support of the joint statement from key population networks, regional networks, HIV and hepatitis organisations



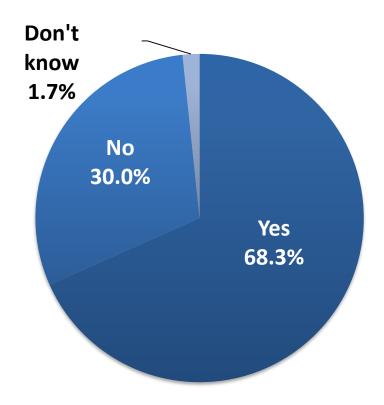
HIV testing activities

5

HIV testing activities

The majority of the respondents doing HIV testing during ETW reported doing outreach testing* (68%).

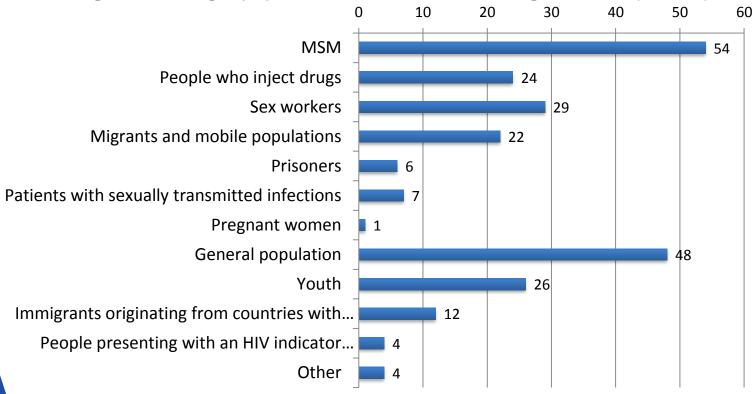
Figure 19: Respondents reporting doing outreach HIV testing (N=120)



HIV testing activities

The most frequently reported target group for outreach testing activities were MSM, general population and PWID (Figure 20).





^{*}Other target populations reported were: clients in rehabilitation centres, homeless; homeless people in the largest night shelter in [city]; transgender people; poor neighborhoods.



Linkage to care

- Of the 116 respondents that did HIV testing activities, 37.6% (N=44) reported that someone had a reactive HIV test during ETW.
- Of the 44, 43 were able at the time of answering the survey, to provide the number of people testing positive which ranged from 1 to 95 people (median: 2, mean: 6.19).
- 46.5% (N=20) said they referred people to get confirmatory testing and 44.2% (N=19) of respondents reported doing follow-up to confirm their clients received confirmatory testing.
- The majority of the respondents that had clients who had reactive tests (N=39), reported referring them to the relevant hospital/clinic/doctor (90.1%), while 9.3% (N=4) offered treatment and care themselves and one site reported no referral due to no system in place.



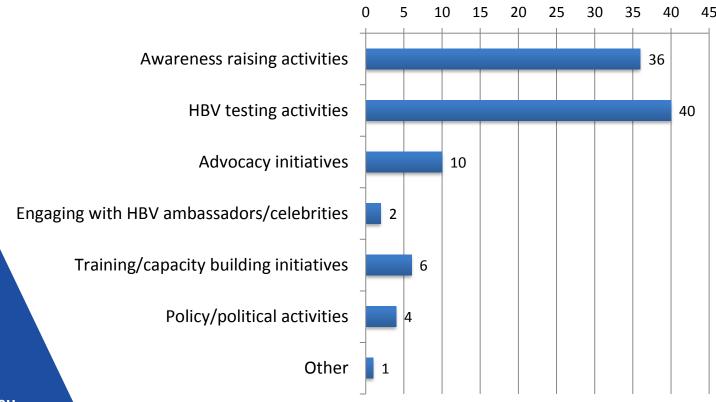
HBV activities

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HBV activities

Of the respondents carrying out HBV activities (N=50) the majority did HBV testing activities (Figure 21).

Figure 21: HBV activities during ETW (N=50)



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Other activities included: Hepatitis B vaccination



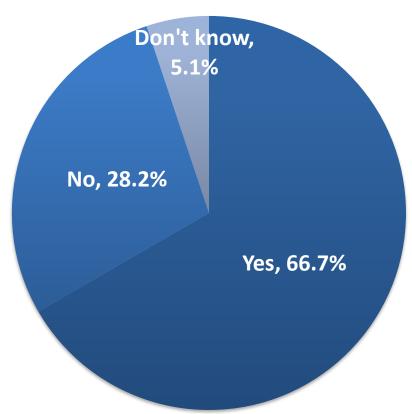
HBV testing activities



HBV testing activities

 Of the respondents carrying out HBV testing activities (N=39), the majority reported doing outreach testing (Figure 24).

Figure 24: Outreach HBV testing during ETW (N=39)



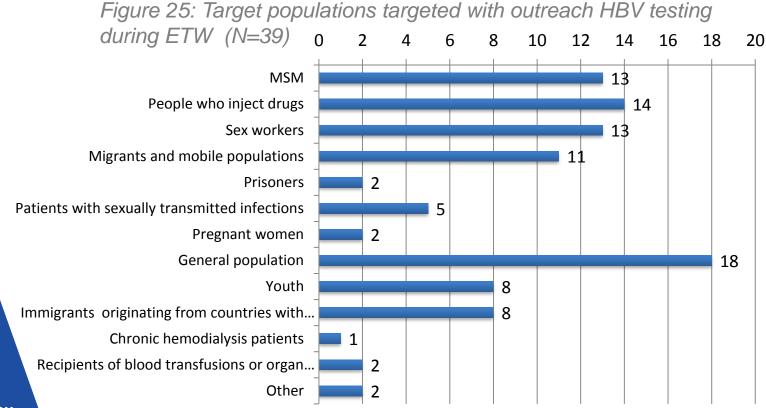
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*Outreach defined as outside your normal office/clinic or after hours



HBV testing activities

Of the respondents carrying out outreach HBV testing activities (N=39), the majority targeted the general population, PWID, MSM and sex workers. (Figure 25).





Linkage to care

- Of the 40 respondents that did HBV testing activities, 52.5% (N=21) reported that someone tested HBV antibody positive during ETW.
- Of the 21, 19 were able at the time of answering the survey to provide the number of people testing positive which ranged from 1 to 23 people (median: 2, mean: 5.16).
- 54.1% (N=13) said they referred people to get confirmatory testing and 16.7% (N=4) of respondents reported doing follow-up to confirm their clients received confirmatory testing. Three respondents reported that their clients did not receive confirmatory testing and four reported they did not know.
- Of the respondents that had clients who had reactive tests (N=21), 20 referred them to the relevant hospital/clinic/doctor, while one reported both referral and offering treatment and care themselves and one site reported no referral due to no system in place.



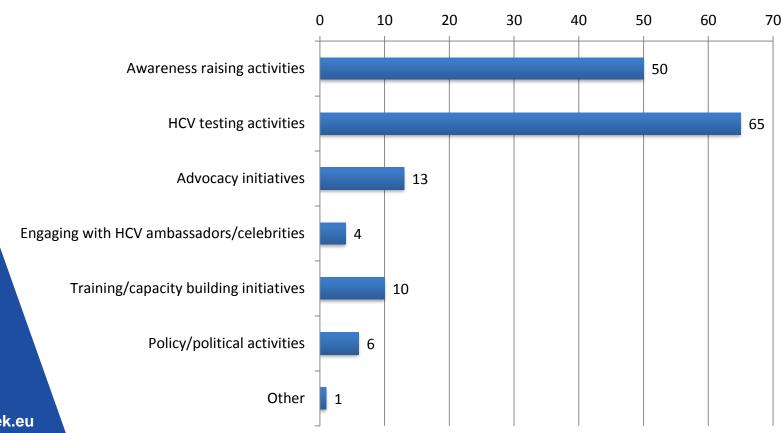
HCV activities



HCV activities

 Of the respondents carrying out HCV activities (N=72) the majority did HCV testing activities (Figure 26).

Figure 26: HCV activities during ETW (N=72)



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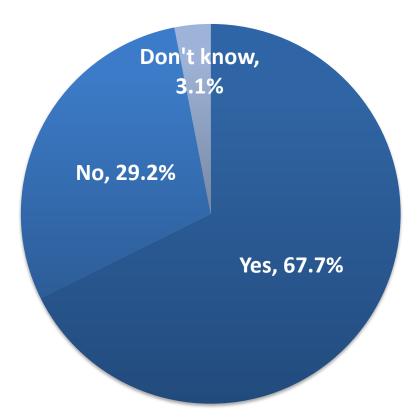
HCV testing activities



HCV testing activities

 The majority of the respondents performing HCV testing during ETW reported doing outreach testing (67.7%) (Figure 29).

Figure 29: Respondents reporting outreach HCV testing (N=65)

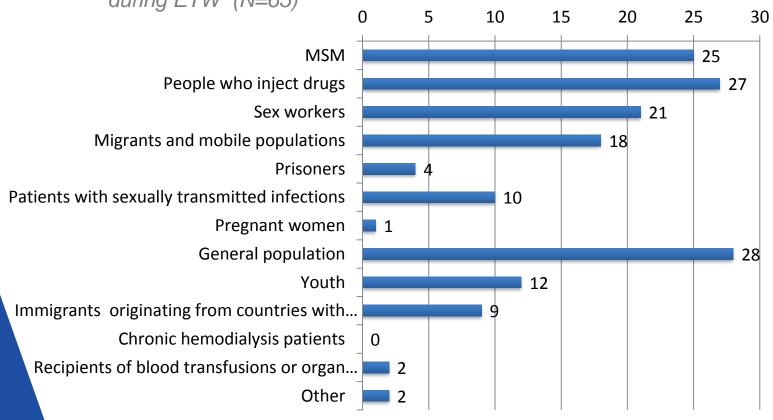


HCV testing activities

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 Of the respondents carrying out outreach HCV testing activities (N=65), the majority targeted the general population, PWID and MSM. (Figure 30).

Figure 30: Target populations targeted with outreach HCV testing during ETW (N=65)



^{*}Other included the homeless and elders.



- Of the 65 respondents that did HCV testing activities, 47.7% (N=31) reported that someone tested HCV positive during FTW
- Of the 31, 29 were able at the time of answering the survey to provide the number of people testing positive which ranged from 1 to 73 people (median: 3, mean: 10.63).
- 59.5% (N=22) said they referred people to get confirmatory testing and 27% (N=10) of respondents reported doing followup to confirm their clients received confirmatory testing. Four respondents reported that their clients did not receive confirmatory testing and one reported they did not know.
- Of the respondents that had clients who had reactive tests (N=31), 30 referred them to the relevant hospital/clinic/doctor, while one reported both providing a referral and offering treatment and care themselves. Three sites also reported other* modes of referral.

^{*}Other mode of referral included: on the spot Fibroscan and linkage to care; peer support program. One respondent mentioned that some were not referred due to their foreign status, they were already in the system or due to client's preference



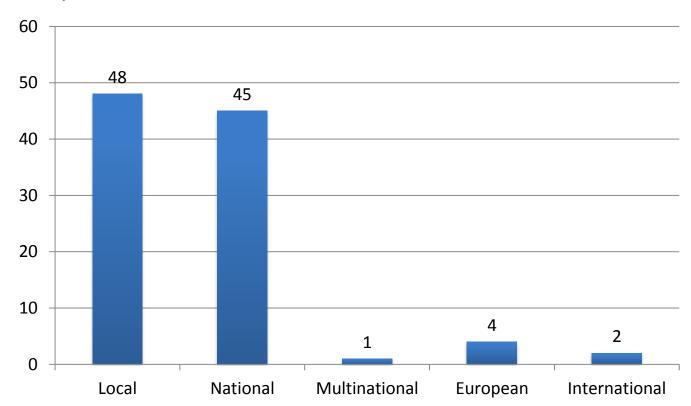
Collaboration with other organisations

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Collaboration with other organisations

The majority of the respondents reported that they collaborated with other organisations (71.1%). The majority collaborated on a local level (Figure 31).

Figure 31: Level on which the organisations collaborated (N=100)

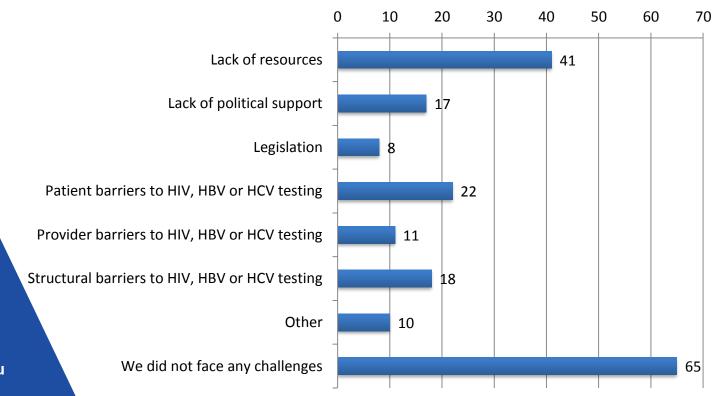






The majority of the survey respondents experienced lack of resources as the biggest challenge (N=41) followed by patient barriers to HIV, HBV or HCV testing (N=22) (Figure 32).

Figure 32: Challenges experienced by participants (N=146)



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Some of the participants further explained their challenges

during ETW:

"Unfortunately, there is poor support in terms of providing testing tools during ETW. The only thing we got was posters and nothing more." [Central Europe]

"Being based on voluntary availability from our operators, it is challenging to be open every day" [Western Europe]

"Its hard to speak about topics like HIV in country were the political system doesnt support your work and doesnt support you financially." [Central Europe]

"There are no clinical guidelines to offer hepatitis tests without any symptoms or high risk behavior (like IDUs). We do them usually on ETW only." [Central Europe]

"With additional resources we could organise testing at larger scale.
Legislations limits testing only for medical professionals.
There is strong stigma towards HIV and MSM which limits our results."

[Central Europe]

"We see a lack of public interest, lack of resources, lack of political will and advocacy for HIV/AIDS, MTS, in terms of activities, prevention and program improvement."

[Western Europe]

"HIV testing in non-medical setting can be performed only by medical staff, authorised by medical institution. HCV and HBV testing in community settings is not allowed as well as other risk groups than injecting drug users."

[Eastern Europe]

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Challenges and new experiences

Several respondents reported gaining new experiences during ETW (33.3%) (Figure 30).

Figure 33: Respondents reporting gaining new experience during ETW Examples:

Yes 33.3% No 66.7%

"We were amazed by high attendance to testing in low threshold settings for PWID which was most probably the result of an excellent awareness and motivation campaign prior to testing week (made by the peers!) and the engagement of 2 nurses... However, in the general population, people prefer to get tested in a big, centralised institution located in the capital city, rather than get tested at a local level (stigma??!!).." [Central Europe]

"There is a need for a fundraising approach which would enable us to have resources in advance -- all donors have been late with responding to our requests. Doctors have shown not be satisfied with volunteering - a fee is required to make them committed to work." [Central Europe]

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66 respondents (48.9%) reported that they developed their own materials for ETW. Some examples of

materials were provided:

"We develop our own information booklets about local centers, that can provide information, social, psychologic help to population" [Eastern Europe]

"Web page, mobile application, posters, brochures" [Central Europe]

"Communication campaign in mass media, flyers, posters, roll-ups, banners and audiovisuals." [Western Europe]

"National map of community based services offering testing (flyers, posters) and social media banners with logo/slogan." [Western Europe]

"I used the templates on the website to develop specific posters for each venue and also some informative posters for pre-testing promotion which complimented our staff and service user information sessions." [Western Europe]



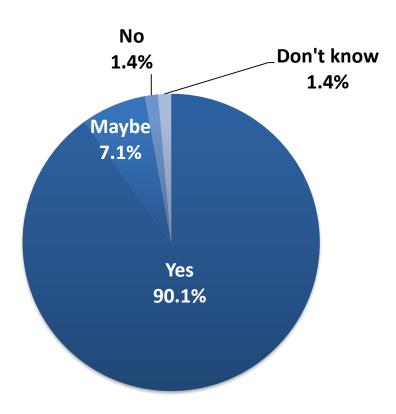
Future European Testing Weeks



Future European Testing Weeks

The majority of survey respondents reported being interested in participating in future ETWs (Figure 33).

Figure 34: Proportion of participating partners who wish to participate in another European HIV testing week (N=141)



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Future European Testing Weeks

Some of the reported reasons for participating again included:

"It could be great tool/way to be more visible, to involve more people, to promote activities, to share experience, get new ideas..." [Central Europe]

"It was a upgrade of our testing activity among the target groups and in particular among the general population."

[Western Europe]

"This has proven to be an approach to showcase our possibility to organise targeted MSM testing at larger scale. We are using ETW experience to advocate for similar testing activities during the whole year." [Central Europe]

"That helps us to communicate with people, who is interesting in testing, but was afraid to try it." [Central Europe]

"1. increase awareness, especially for hepatitis testing 2. I have started personally my cooperation with [region] hepatitis NGOs (there do not exist any similar NGO in my country)." [Central Europe]

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Future European Testing Weeks

Some of the survey respondents had ideas on how to

improve future ETWs:

"Some more materials translated to Russian." [Eastern Europe]

"It would be great if materials would be available on ETW's website with greater anticipation. We think it would be a great idea if the activities done by the organizations participating in ETW had a wider social media projection. Sharing of best practices would also be welcome to improve our work." [Western Europe]

"To add cito tests on hepatitis B &C in the optimisation of 'European testing week' in local 'communities'; Better promotion European Testing Week in mass media- before event." [Eastern Europe]

"Would be great to establish some [funding] for helping members with materials for testing week make more visible: distributing promotional materials (we didn't print materials from the page because we have no printer in color!), rapid tests providing, etc..." [Central Europe]

"Inform the population more or start informing ahead of time, extend to a month, testing week is not enough." [Eastern Europe]

"Better advertisement of ETW on EU and national level."

[Central Europe]

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The European Test Finder

Key Features of Test Finder In 2017







- Details of over 3,000 HIV testing sites in 55 countries across the WHO Europe region
 - Of these, around 1,500 also offered STI testing and 1,300 also offered HCV testing.
- Landing page had 15 languages, the largest range yet
 - Three African languages were added as part of a pilot to reach African migrants: Lingala (DRC), Tigrinya (Eritrea) and Somali
- Languages now available as a dropdown
- Mobile optimised



Promotion of Test Finder in 2017









 FREE push messages sent to users in 53 countries over 8 days



 The Grindr messages didn't go out in large countries and Grindr apologised with a promise to do more for 2018.





500k website impressions

Promotion Results







- Due to the Grindr message not going out in large, there was a very significant drop in users and traffic
 - Total Visits: 36,475 down from 65 614
 - Total page views: 73,379 down from 134 672
 - Total Unique Visitors: 34,986

Usage data will be made available in due course.



The European Test Finder

- Peak days for the Test Finder were Saturday 18
 November (10,037 visits) and Wednesday 22
 November (9,355 visits).
- The Test Finder recorded visitors from 897 different towns/cities/states.
- The top 3 visitor countries were: Russia (16.8%), Spain (12.8%) and Germany (8.1%)



The European Test Finder and survey respondents

- 48 of the 144 (33.3%) ETW survey respondents reported having heard about the mobile-optimised European Test Finder.
- 7 respondents reported that they had a client who indicated using the Test Finder
- 47 of the 145 (32.4%) respondents reported having heard about the collaboration with Grindr, Hornet and PlanetRomeo who have provided free advertising to promote the European Test Finder.
- 9 of the 44 (20.5%) reported that people came forward for testing as a result of seeing advertising on either Grindr, Hornet or PlanetRomeo.





AIDS Healthcare Foundation Europe has been supporting community based organizations (CBOs) to provide rapid HIV testing during ETW since the conception of ETW. In 2017, AHF Europe supported 7 CBOs from 7 countries (Estonia, Ukraine, Russia, Romania, Cyprus, Spain and the Netherlands).

Total tested

Organisation		Country	Tests done	Reactive tests	Sero-positivity (%)
EU	ARAS	Romania	669	14	2,1
	Together against HIV	Estonia	425	0	0
	AIDS Solidarity Movement	Cyprus	379	1	0,3
	AfroEuro Founation	Netherlands	11	0	0
	Apoyo Positivo	Spain	356	1	0,3
Total for EU			1840	16	0,9
Non- EU	Avante	Ukraine	927	22	2,4
	Istochnik Nadyezhdy	Russia	800	26	3,3
Total for Non-EU			1727	48	3
TOTAL			3567	64	1,8

In 2017, similarly to the past two years, AHF Europe prepared and trained NGOs to use its Rapid Testing Model (RTP) to start and/or strengthen their capacity to test at the community level. AHF Europe team conducted a series of on-line trainings for NGOs on AHF RTP model, data collection, ways of effective linkage to care and reporting.

The total AHF Europe contribution towards ETW2017 community based testing activities was at the level of 49,854 USD. The support covered organization of testing activities, payment for staff, support for volunteers and coverage of cost related to ETW promotion and marketing.





- A collaboration with BioLytical has been running since 2014, and like the three previous years BioLytical donated testing kits to the 2017 ETW participants.
- BioLytical had a 'Buy One, Get One' offer which was distributed to all signed up participants through newsletters and social media.
- 1,600 INSTI HIV & INSTI HIV/Syphilis kits were donated (for a total of 3,200 INSTI HIV & INSTI HIV/Syphilis tests on promo) to 18 participants.





- For 2017, ETW collaborated for the first time with InTec products Inc.
- InTec had two promotions for ETW participants which were distributed to all signed up participants through newsletters and social media.
 - 1. 'Buy One, Get One' offer
 - 2. Free Advanced Quality One Step HIV 1&2 tests (for selected ETW participants)
- However, during the selection process, InTec found that most participants had very limited financial resources therefore they donated 800 Advanced Quality One Step HIV 1&2 tests with free delivery to six sites
- ETW participants in the following countries received free tests: Romania, UK (2), Armenia, Ukraine and Uzbekistan



- For 2017, ETW collaborated for the first time with AAZ on their autotest VIH® / HIV self-test
- AAZ had a "buy two self-tests, get one free" offer which was distributed to all signed up participants through newsletters and social media.
- Unfortunately, since the promotion was advertised close to the start date of ETW 2017, they did not received any inquiries for their products.





Website activity

Website analytics overview August to December 2017





Average time on page 2 minutes 18 seconds



15,779 page views



6,068 unique users



pages per visit



downloads of testing week materials



Peak traffic to website

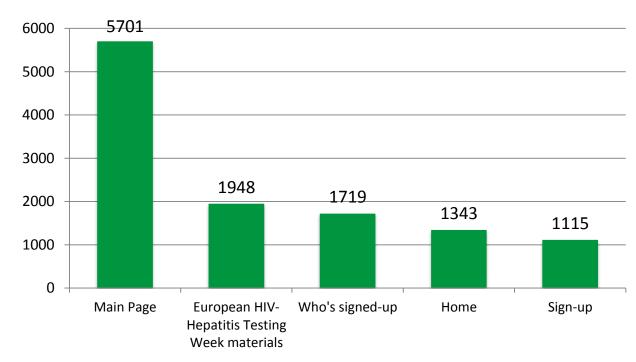


- The peak number of visits were seen during testing week 2017 (Fri 17 Nov – Fri 24 Nov)
- The biggest peak was on Fri 17 November, the first day of testing week, with 672 visits



Most popular website pages

Figure 35. Most visited pages, August - December 2017



The *main page* was the most visited page, followed by the *testing week materials* section and the *who's signed-up* section.

Testing week material downloads

TEST THE ATTENTION OF THE PARTY OF THE PARTY

2017 Website Banner downloaded
152 times

Factsheet About European
Testing Week
downloaded
125 times

4,147 total downloads

of testing week materials*

2017 Flyer: What is Testing Week? downloaded **185 times**

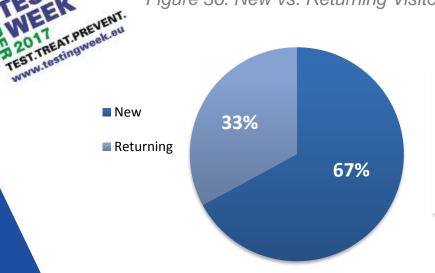
HIV-Hepatitis + HIV
Testing Week 2017 logo
(English) downloaded
312 + 121 times

www.testingweek.eu www.hiveurope.eu

* Increased 140% in comparison to 1,728 in 2016

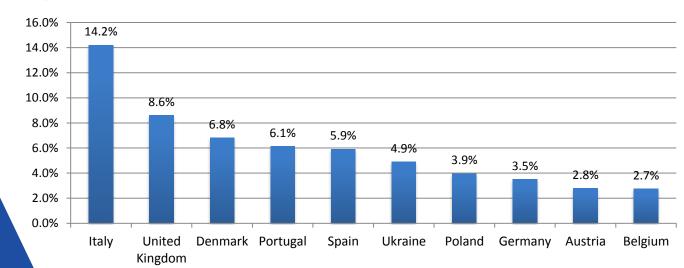
User behaviour (Aug – Dec 2017)





- New (single) visit users visited 6,017 times
- Returning users visited
 2,947 times

Figure 37. Top 10 countries by visitors



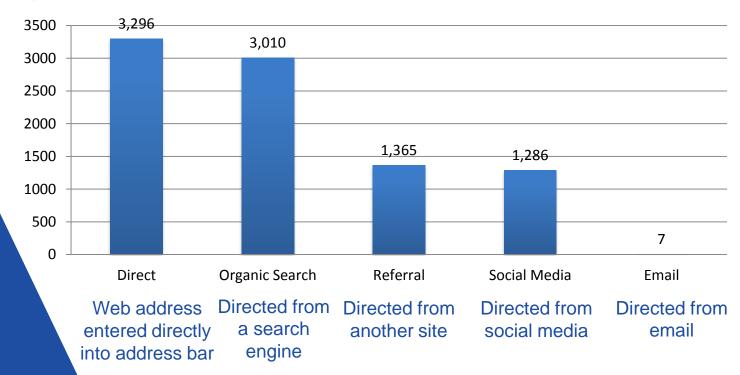
www.testingweek.eu www.hiveurope.eu



Traffic sources (Aug – Dec 2017)

Nearly 37% of traffic came from users directly entering the web address, followed by organic search (34%) (Figure 38)

Figure 38. Traffic sources



TEUROPEAN TIS ZEUV-HEPATITIS MITESTING MITESTI

Traffic source: top referrals by clicks

The **top five sites** which directed traffic to the website during TW

Twitter



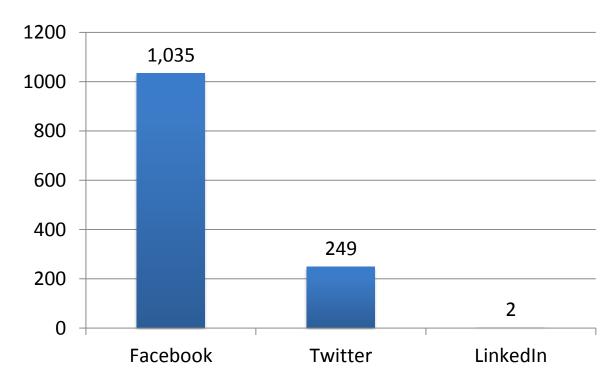
Facebook Mobile



Traffic source: social media

 The majority of social media traffic to the website came from Facebook (80.5%) followed by with Twitter. (Figure 39)

Figure 39. Traffic sources through social media (Aug – Dec 2017)

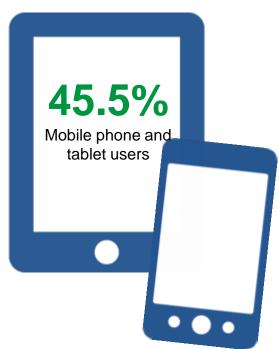


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Website usage by device



54.5% desktop users



- The majority of visitors to the website (during TW) were desktop users (54.5%), a decrease from 2016 (68%)
- The amount of users on mobile phones and/or tablets increased from 32% in 2016 to 45.5%.



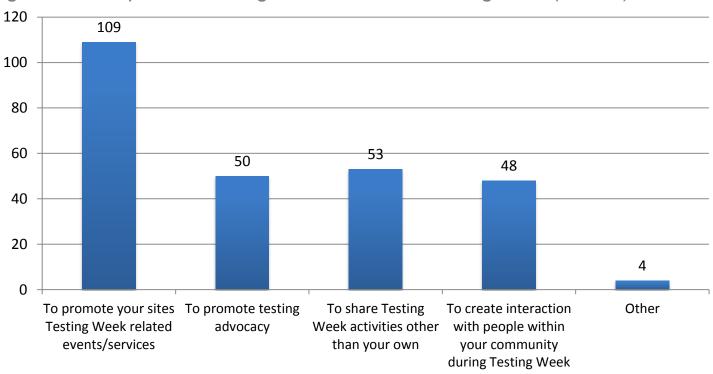
Use and knowledge of social media

Use and knowledge of social media

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In 2017, for the first time, respondents were asked how they used social media for ETW. The majority of respondents (N=109) said they used social media to promote their TW related events/services. (Figure 40)

Figure 40. Respondents usage of social media during ETW (N=146)



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Other reported uses include: posted ETW information on their website; to raise awareness of importance of testing: radio interviews



Social media

- The Facebook page and Twitter profile were created on 17 September 2013 to communicate key messages, drive people to the website and engage with participants.
- These profiles have since then become an integral resource to engage with participants and disseminate the latest news and updates.



Facebook page - Fans

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Figure 41: Facebook page fans*

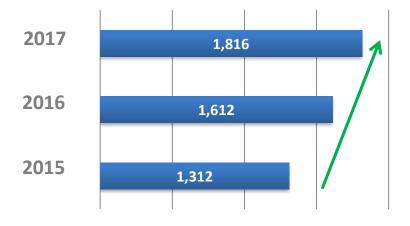


Figure 42: Top 10 countries by fans

1	Portugal	222	13,18 %
2	Italy	152	9,03 %
3	Denmark	133	7,90 %
4	United Kingdom	132	7,84 %
5	Spain	122	7,24 %
6	Greece	70	4,16 %
7	Ukraine	60	3,56 %
8	Netherlands	47	2,79 %
9	Belgium	44	2,61 %
10	Poland	44	2,61 %

Our core audience: almost equally men and women, majority are between the ages of 25-45

*Facebook fans are users who have liked the ETW Facebook page

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Facebook page - Activity

- During 2017, 116 posts were published (in average 2.2 posts per week)
- Total reach of Facebook posts: 15,272 times
 - On average, one post was can reach* 289
 Facebook users
 - On average one post can have an engagement rate of 20 (number of times a user clicked, liked, shared or commented)
- The #EuroTestWeek hashtag was used on Facebook 135 times



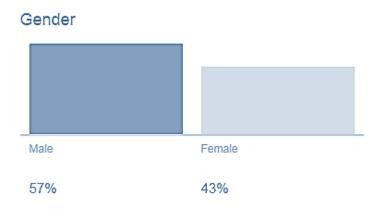
*Post reach is the total number of unique people who see our Page and post content

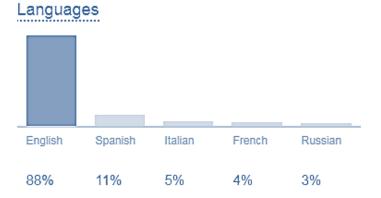


Twitter - Followers

- Total number of Twitter followers 1,140
- Our core audience on Twitter is mainly Englishspeaking men aged 25 to 34

Figure 43: Twitter followers demographics







Twitter profile - Activity

- ETW Twitter profile published 60 tweets
- ETW Twitter profile earned 62.9K impressions*
 - An average 687 impressions per day
- Top tweet of 2017 earned 3,686 impressions



View Tweet activity

*Impressions on Twitter are the number of times your content may have been displayed on a users feed, no matter if it was clicked or not



Social media – the Thunderclap

A Thunderclap was set up this year with a message that was posted automatically on the first day of ETW on 120 different profiles resulting in a social reach of 147,379.

#TestTreatPrevent

by European HIV-Hepatitis Testing Week 2017

category: **Health**

"#EuroTestWeek starts TODAY. Help us raise
awareness on #HIV and #Hepatitis!
#TestTreatPrevent http://thndr.me/ZMH1Bw"



European HIV-Hepatitis Testi...

EMBED </> SUPPORTERS

120 of **100**

120% of goal supported

SOCIAL REACH

147,379

People

TIME LEFT

Complete

Social media – #EuroTestWeek



- Dr. Graham Mackenzie, Consultant in Public Health -NHS Lothian, partnered with ETW to analyse the impact of the #EuroTestWeek hashtag on Twitter
- Analytics were measured from 7 25 November 2017 through the Followthehashtag service and NodeXL analytics program



1,807Total Tweets using the #EuroTestWeek hashtag



781Users of the hashtag



2,408,199Total Audience (Number of people who may have seen the hashtag)



5,979,406Total Impressions (Number of times the audience may have seen the hashtag)

For more information, please refer to Dr. Mackenzie's blog post on https://scotpublichealth.com/2017/11/18/eurotestweek-and-hivtestweek/



Media Coverage



Media coverage

- A publication search was conducted utilizing the media service, Meltwater
- In total, **28 online articles** were found for ETW 2017
 - Search was limited due to language restrictions and less accessibility of publications in local media
- International organisations including the World Health Organization, the European Centre for Disease Prevention and Control and the European Parliament's Intergroup on LGBT Rights published web articles to commence ETW 2017



www.tes www.hi

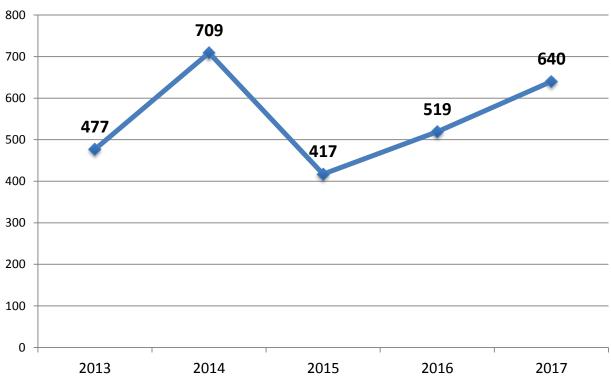


European Testing Week – Comparisons by year



Comparison by year

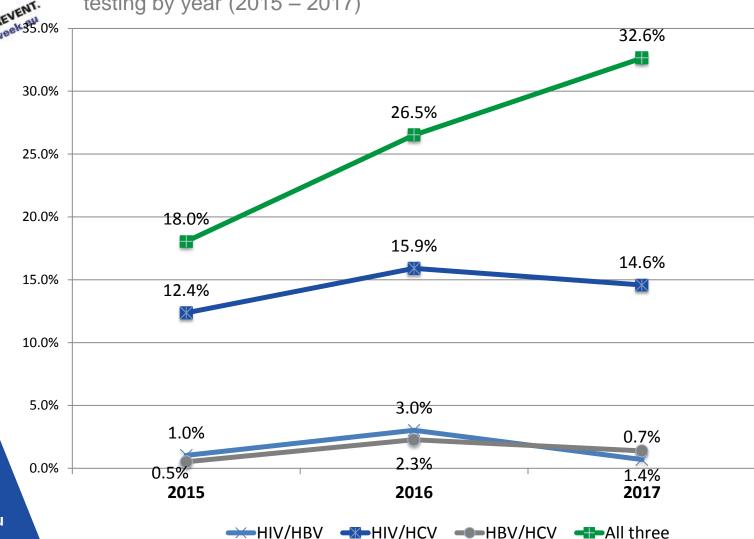
Figure 44. Number of ETW participants (2013 – 2017)



TEST TREAT PREVENT.

Comparison by year

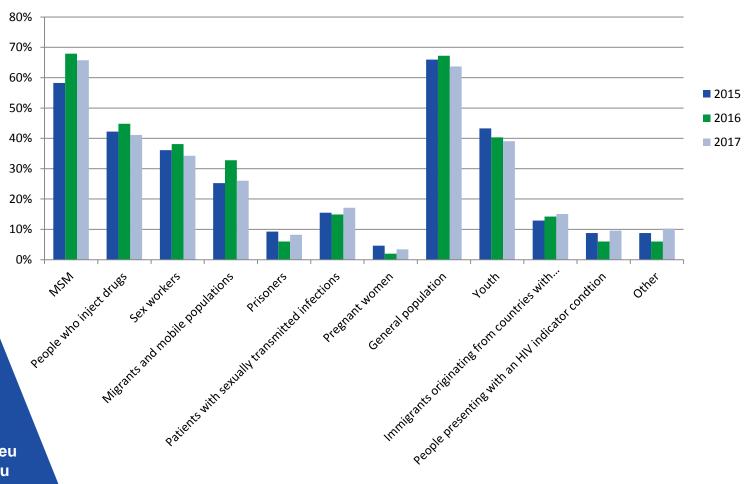
Figure 45. Percentage of respondents who reported doing combined testing by year (2015 – 2017)



TEST TREAT PREVENT.

Comparison by year

Figure 47. Targeted populations for European HIV-Hepatitis Testing Week activities, 2015 - 2017



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Conclusions



Conclusions

- The success and impact of ETW must be measured not only by the number of people tested but also by the efforts made in awareness-raising and combating stigma, which is difficult to be measured quantitatively.
- One recurring success story reported in the evaluation survey was that ETW provides an opportunity for participants to go out into the community and/or partner with other organisations to increase awareness through outreach and reach people who would not normally access their services.
- ETW provides a unique opportunity for organisations across Europe to stand united in increasing awareness of HIV and hepatitis testing, reducing the number of people unaware of their status, and creating new united partnerships and collaborations.



Conclusions

- The ETW webpage (www.testingweek.eu)
 performed well again this year. Participants
 appreciated the developed materials and translated
 documents.
- Social media continues to be a useful resource for participants to engage and share information and photos from their activities.
- In 2017, compared to 2016, there were more participants, more followers on social media and more downloads from the website.



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Financial statements



Financial Statements

- The HiE initiative is governed by an independent Steering Committee (SC). The Coordinating Centre is at CHIP, Rigshospitalet and the political Secretariat is at EATG.
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