Report on the Action Plan to Implement the Strategy to Fight HIV/AIDS

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Summary and outlook

Thirty years after the discovery of the HIV virus, Germany can draw a positive balance on the spread of the epidemic.

The number of newly reported HIV diagnoses has been stable for the past three years at almost 3,000 per annum, giving Germany one of the lowest rates of new infections by European comparison.

In recent years, the scope of the HIV prevention campaign „Don't give AIDS a Chance“ has been further widened and prevention activities targeting specific groups further expanded. Public knowledge concerning transmission risks and protective behaviour is stable and of a very high level; the sale of condoms has reached a new peak. This is evidence of the success of a comprehensive and effective prevention strategy, the high level of which is ensured thanks to long-term financial support of over 25 years – a prevention strategy which, at the same time, is characterised by a significant amount of voluntary commitment.

The high quality of medical care in Germany has meant that the number of persons dying from the sequelae of the acquired immunodeficiency syndrome – AIDS – is on the decrease. In total, some 70,000 persons with HIV and AIDS live in Germany, among them 57,000 men and 13,000 women.

The frame of reference for the measures taken by the protagonists involved at the federal, Land and municipal level is the National Strategy of the Federal Government to Fight HIV/AIDS, the core objectives of which are:

- minimising the number of new HIV infections
- optimising the support provided to those affected
- guaranteeing that affected persons are treated in a manner which is characterised by solidarity.

The German HIV/AIDS strategy is divided into seven, mutually complementary and reinforcing spheres of activity (education and prevention, access to HIV testing and treatment, solidarity and antidiscrimination, co-ordination and co-operation, epidemiology, biomedical and social scientific research, evaluation and quality assurance). These spheres of activity are described in greater detail in the Action Plan to Implement the Strategy to Fight HIV/AIDS.

This coherent strategic approach has proven its worth, especially by international comparison. The Federal Government intends to pursue this successful strategy with the same high degree of commitment and will continue, as in the past, to take account of new findings in further refining concrete measures for implementation.

A vital component of future success will be the allocation of the necessary financial resources, not only at the federal level, but also at Land and municipal level. Only a broad-based, long-term and finely-meshed offering will be able to maintain the prevention successes already achieved and accomplish the joint objective of reducing the number of new HIV infections in Germany.

Education and prevention

Consistency with respect to protective behaviour in risk situations requires that we keep a high degree of attention focused on the topic of HIV/AIDS. At the same time, decisive action needs to be taken to counter the trend which can be observed in individual groups of the population who tend to protect themselves less consistently as a result of the good treatment possibilities and the dwindling fear of HIV and AIDS. In addition, those groups that are particularly at risk of contracting HIV need information and education opportunities which are precisely tailored to their individual, real-life circumstances.

Continuous education and prevention form the core of Germany’s HIV/AIDS strategy. The existing prevention opportunities are constantly being reviewed and adapted to ever changing needs. As a result, interactive internet opportunities and social networks, for example, are gaining increasing importance and are continually being expanded. The scope of the HIV prevention campaigns for particularly vulnerable persons has been further increased. One example of this is the German AIDS-Relief Association’s prevention campaign –
“I KNOW WHAT I’M DOING” – which is specifically targeted at men who have sex with men and is accepted thanks to its customized opportunities. Another example are the pilot projects developed and implemented together with migrant communities. There are signs that this form of differentiated education and prevention, that is tailored to the needs of an individual target group and characterised by a consistent and co-operative involvement of at-risk and affected persons, is especially credible and well-accepted. Consequently, the intention is to pursue it further in the coming years.

In the light of the close epidemiological connection between HIV and other sexually transmitted infections (STI), STI education has been increasingly integrated into HIV and AIDS prevention in recent years. One case in point is the adaptation of the Federal Centre for Health Education’s successful umbrella campaign – „Don’t give AIDS a Chance“ – which is currently underway.

Universal access to HIV testing and treatment

Universal access to HIV testing and treatment is the most important cornerstone in preventing new HIV infections and the key to securing health and quality of life for as long as possible should a person become infected. Germany’s AIDS landscape is characterised by a competent and efficient network of facilities providing counseling, testing, treatment and care. This notwithstanding, up to one-third of all HIV infections are only diagnosed after the optimal treatment time point has passed.

Access to low-threshold and universally accessible HIV testing opportunities was improved on several levels in recent years. In co-operation with the public health offices and regional AIDS-relief associations, the German AIDS-Relief Association expanded its municipal testing opportunities for men who have sex with men within the framework of the „I KNOW WHAT I’M DOING“ testing weeks. The use of HIV rapid tests makes access to HIV testing easier, for drug users for example, and up-dated maternity guidelines ensure that every pregnant mother will be offered a test for HIV, at her first antenatal examination.

In many facilities, the HIV test is already being offered in combination with a syphilis test, but to date this is hardly the case for other infections such as herpes or gonorrhoea. In this area, the Federal Government intends to do its utmost to have the Laender and the municipalities, that are responsible for these measures, adapt and, if necessary, expand the already existing opportunities to target the needs of particularly vulnerable groups. It will strongly advocate to the organs of the medical self-administration and the medical professional associations that they create awareness among the physicians, who take part in their further training measures, regarding the existing HIV testing opportunities and indications.

The treatment of HIV and AIDS in Germany is of a very high level. The adoption of an „HIV/AIDS Quality Assurance Agreement“ by the Federation of Panel Doctors, the German Association of Panel Doctors for the Treatment of HIV and AIDS Patients (DAGNÄ) and the statutory health insurance funds was an important step towards guaranteeing the high quality of this treatment in the future. With respect to the treatment of persons without a secure residence status, the General Administrative Regulations relating to the 2009 Aliens Act has made it clear that these persons may seek medical treatment at public hospitals without fear of their data being transmitted to the Aliens Authority. This clarification increased the legal certainty for both the affected persons and the physicians treating them.

Solidarity and anti-discrimination

Even nowadays, persons who are infected with HIV, or suffering from AIDS, fear or experience in their daily lives both discrimination and stigmatisation. For this reason, the Federal Government continually seeks to foster a social climate which accepts and supports persons with HIV or AIDS – a social climate that offers solidarity and protects them from discrimination. Together with civil society, the Federal Government takes a stand for solidarity
with, and against the discrimination of, persons living with HIV and AIDS within the framework of a targeted ‘World AIDS Day Campaign’. Over 12,000 persons actively campaign as ambassadors for these objectives. Since 2010, HIV positive persons have been keenly involved in the campaign, giving it a face and at the same time providing us with an insight into what it is like to live with HIV and AIDS.

The entry into force of the General Equal Treatment Act created a comprehensive legal framework against discrimination on the grounds of disability or sexual identity. This protection against discrimination also includes the disability arising from an HIV infection. In addition, with the restructuring of its labour market policy instruments, the Federal Government has considerably expanded the scope for action to create flexible labour market reintegration opportunities for disabled persons which are commensurate with their needs. These also apply to persons with HIV. The Federal Government also supports pilot integration programmes for persons with HIV in the working environment. The German AIDS-Relief Association has already taken concrete measures to reduce discrimination in the workplace. Continuing along the same lines, further intervention concepts will be developed in the coming years.

Co-ordination and co-operation

In the light of the numerous players and spheres of activity, the minimisation of overlapping and duplication will be a priority of the highest order in the future – a task that will require effective co-ordination and co-operation between governmental and non-governmental bodies. Germany can boast of a sound tradition of close and trusting co-operation among the various players involved at many different levels. This circumstance ensures sound co-ordination and a good division of labour. A central and successful axis in the planning and implementation of prevention and treatment measures, also in recent years, has been the co-operation between the Federal Government and the Laender. At federal level, a co-ordinated cross-sectoral approach is guaranteed, thanks to the collaboration which takes place among the government ministries involved. Intensive, long-standing co-operation activities also exist with civil society and the private sector. These time-tested networking structures will continue to be cultivated in the coming years.

At European level, Germany has, with the declarations of Dublin, Vilnius and Bremen, advanced the joint elaboration of Europe’s HIV/AIDS policy and championed the idea of an approach based on human rights. Together with the other Member States of the European Union, the Federal Government has committed to supporting the neighbouring states of Eastern Europe. At international level, Germany supports the fight against HIV/AIDS within the framework of its bilateral and multilateral development co-operation activities and also espouses a comprehensive strategy for combating HIV/AIDS in the context of the United Nations.

The epidemiology of new infections

Thanks to its time-proven surveillance tools, such as mandatory reporting and research projects, Germany possesses a solid database on newly diagnosed cases of HIV, modes of transmission and regional differences. At the same time, the increased focus of prevention on particularly vulnerable groups, as well as new issues in connection with HIV, require additional epidemiological data.

Under the aegis primarily of the Robert Koch-Institute (RKI), Germany’s surveillance of HIV, AIDS and other sexually transmitted infections was continued and expanded with the aid of new epidemiological and clinical studies on infection distribution, disease progression and forms of resistance. Furthermore, the Robert Koch-Institute has assumed a pioneering role in the international arena by organising and implementing the Europe-wide „EMIS“ survey on men who have sex with men.

The behavioural studies conducted on a regular basis by the Federal Centre for Health Education (BZgA) to evaluate the level of knowledge, attitudes, risk and protective behaviour among the population and in particularly vulnerable groups, also supplement the RKI’s data.
At present, an overall strategy for „second generation surveillance“, into which both of these surveillance areas are intended to flow, is currently in the pipeline. The aim is to facilitate the connection between medical biological data and behavioural data, thus making it easier to compare epidemiological trends among the various groups which exhibit risk behaviour. Consideration is currently being given to whether it will be necessary to make adjustments to the existing reporting system for this purpose.

**Biomedical and social science research**

In the field of biomedical HIV and AIDS investigation, the projects funded by the Federal Government include the areas of basic research, clinical research and health services research. One special research priority was the recruiting and maintaining of a representative HIV patient cohort for Germany along with the corresponding biomaterial banks. Thanks to these efforts, it was possible to find answers to a diverse range of research questions. At European level, the Federal Ministry of Education and Research participates in the ERA-Net for HIV and AIDS research (HIVERA: Harmonising, Integrating and Vitalising European Research on AIDS/HIV). The objective of this network, which is supported by the European Commission, is to better co-ordinate and supplement national research efforts and thus create a starting point for transnational research activities on HIV and AIDS. Furthermore, Germany participates in the European and Developing Countries Clinical Trials Partnership (EDCTP) network. Two of the latter’s research consortia on vaccine development are currently being funded.

One cornerstone of social science research on HIV and AIDS in Germany are the studies to determine the effectiveness of prevention measures. In addition, the Federal Government has funded and scientifically evaluated pilot projects to enhance orientation of prevention strategies towards individual target groups. The GEMO (Health for Persons from Eastern Europe) project, for example, yielded valuable insights into how the opportunities for migrants from Eastern Europe could be improved. Even in the future, HIV/AIDS and STI prevention strategies will have to be adapted to the special characteristics of each target group. Pilot-type prevention projects, with accompanying research components, will therefore continue to have an important role to play.

**Evaluation and quality assurance**

The effectiveness of campaigns and measures can only be ensured through continuous evaluation and quality assurance. An extensive amount of data already exists on the effectiveness of HIV and AIDS prevention in Germany for the general population, young people, men who have sex with men, as well as for injecting drug users. However, there is a paucity of research on prevention opportunities for sex workers. The results and recommendations which emerged from the scientific evaluations of the pilot programmes for migrant communities vulnerable to HIV are currently being evaluated and, in some cases, already being implemented at the regional level.

Moreover, in recent years, accompanying quality assurance procedures have gained in importance. For this purpose, the Federal Centre for Health Education and the German AIDS-Relief Association have each developed appropriate tools and made them permanent components of their prevention measures. At European level, the Federal Centre for Health Education, in collaboration with the WHO Regional Office for Europe (WHO/EURO), is one of the leading members of a European network of experts for quality assurance in HIV prevention. Its aim is to adapt successful quality assurance procedures to HIV prevention and to different countries and subsequently test them. The network’s activities are being funded by the Federal Government until 2012. In this way, Germany is making an important contribution to improving HIV prevention in Europe.
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