

# OptTEST Stakeholder Analysis and Communications Strategy

The purpose of this document is to clarify who are stakeholders in the OptTEST project and how they can be addressed regarding the project's activities.

## Stakeholders:

- **Personal interest:** Key populations and PLHIV who experience barriers, such as stigmatization, criminalization, inequitable regulatory provisions and procedures in accessing testing, treatment and care.
- **Professional interest:** Healthcare professionals, scientific community, civil society and organizations for advocacy
- **Policy-making interest:** politicians, decision makers & normative bodies with an interest in more cost efficient testing strategies, better treatment rates and outcomes.
- **Media:** appropriate media outlets
- **Funders:** those with legitimate expectations and claims towards the project: **Main funder** (EU, and co-funders); **Initiators and advisors** of the HIV in Europe initiative/Steering committee

## Stakeholders per work package

For the four core work packages (WP4-7), the stakeholders are summarized below:

Key messages per work package (as well as 3-5 overarching project key messages) will be developed as the project and results progress.

CORE WORK PACKAGES				
	WP 4	WP 5	WP 6	WP 7
<b>Content</b>	Obtain better data on linkage to care and observe any regional differences, by deploying and monitoring the treatment continuum in different countries (which represent different epidemics/health care structures);  To present an applicable definition and standard methodology for linkage to care after diagnosis	To test a novel and evidence-based testing strategy in health care settings across Europe with the aim of developing applicable tools and training materials for its broad implementation.  Focus will be on provider barriers and offer and uptake rates of HIV testing.	To determine whether different HIV testing strategies are (cost) effective in different settings, regions and priority groups within Europe;  To estimate the survival benefits, costs and cost-effectiveness of innovative HIV testing strategies in Europe.	To enable networks of PLHIV to use their own data and experience to inform advocacy and build partnerships with health care providers and others to ensure better and more equitable access to services especially in regard to key populations.  To produce & disseminate good practices to scale up testing
<b>Primary stakeholders</b>	National healthcare authorities	Health care providers and commissioners; Health care decision makers and national authorities; Specialty Groups/Societies	Health authorities making policy and public spending decisions	PLHIV Networks; Health Care Providers Community Based Organisation (for both elements of WP7)

<b>Secondary stake-holders</b>	<p>Healthcare decision makers; Scientific community, Public health bodies like ECDC, WHO, UNAIDS, EMCDDA, etc.)</p> <p>Civil society organisations working on screening and treatment issues</p>	<b>Key populations</b> <p>Medical schools, nursing education (including post graduate), specialist training programmes for junior doctors.  Special interest groups – e.g. National AIDS Trust (NAT), World Hepatitis Alliance, European Liver Patients Association (ELPA)  Lab-based staff  IT staff (related to development of pop-up prompts, etc.)  Commercial companies – HIV testing technology, indicator condition/HIV drug companies</p>	<p>Scientific community;</p> <p>Public health bodies like ECDC, WHO, UNAIDS etc.</p> <p>Key populations</p> <p>Civil society actors involved in testing media</p>	<p>Key populations, as defined by WHO; Legal and regulatory authorities</p>
<b>Key Messages</b>		<p>All individuals have a right to know their HIV status; Indicator condition driven testing is an effective strategy to deliver this; normalising testing and removing potential provider based barriers; Indicator Condition driven testing has the potential to decrease levels of late presentation and levels of undiagnosed infection; It is a cost effective intervention</p>		<p>Stigma and Legal /Regulatory barriers negatively impact upon the treatment continuum</p>
<b>Goals</b>	<p>Disseminate a standard methodology for linkage to care</p>	<p>Spread the knowledge and application of indicator based testing</p>	<p>Disseminate knowledge about cost-effective testing</p> <p>Influence political decisions</p>	<p>Provision of guidance and good practice examples that enable stakeholders to address these issues in country</p>

## Communications Strategy

OptTEST describes 5 specific objectives around which the communication plan is built.

**Specific Objective 1:** To improve multi-profession, multi-country stakeholder dialogue to develop strategies to improve early diagnosis and care of people with HIV across Europe

**Specific Objective 2:** To increase knowledge on linkage to and retention in HIV care after diagnosis across geographical and health care settings and target groups

**Specific Objective 3:** To create understanding and suggest evidence-based solutions to provider barriers to testing through pilot implementation of a novel HIV testing strategy (Indicator Condition-guided) in selected European healthcare settings and countries

**Specific Objective 4:** To assemble and evaluate various existing HIV testing strategies in Europe

**Specific Objective 5:** To increase knowledge of how stigma and legal barriers to HIV testing affects the uptake of HIV testing and treatment, particularly in most affected groups and regions

## Dissemination Channels

### **1. On-line: Website, social media,**

The OptTEST website ([www.Opttest.eu](http://www.Opttest.eu)) is up and running (M6).

Discussions surrounding OptTEST social media platforms are on-going, as CHIP management is contemplating how to present their various projects through these media (either as separate dedicated pages or using a single shared project/CHIP social media platform).

The website and social media are to be updated regularly to inform followers about the progress of the project. The OptTEST website will host any published results from relevant Milestones and WP deliverables (i.e. literature reviews, published guidelines, toolkits, published articles and letters to scientific journals, etc.). Furthermore, the OptTEST website will provide the platform for the web-based learning and self-assessment tools being developed and implemented in WP5. The website and its content shall be maintained by HIV in Europe after the project officially closes in mid-2017.

### **2. Printed Materials**

Pamphlets describing the OptTEST project are now available in English, Russian, French and Spanish (M6) and shall be regularly disseminated at appropriate meetings and conferences throughout the HIV calendar (2014-17). An Excel template in Dropbox can be used to update the dissemination of pamphlets during such events. Printed posters for patient healthcare clinic waiting areas may also be developed as a part of WP4/5.

### **3. Meetings/conferences**

Dissemination of OptTEST project outcomes is to also occur through appropriate meetings and conferences scheduled throughout the calendar 2014-2017, (for example, EACS conference 2015, the EU Think-tank and EU Civil Society Forum meetings/ other events organised by EU agencies/institutions, HIV in Europe initiative's biennial conference, scheduled in 2016, International AIDS conference 2016, national AIDS conferences, Healthcare professional conferences/meetings, etc.). Dissemination channels at conferences shall include the submission of abstracts, oral and/or poster presentations, manned stalls, side-meetings, etc.

### **4. Project Outcomes**

Project outcomes (both milestones and deliverables) include a variety of materials (guidelines, toolkits, literature reviews, annual reports, evaluation reports, etc.), as well as the publication of scientific articles in international peer-reviewed Journals. As these materials are developed, they shall be disseminated through the appropriate channels listed above, including open access via the website.

### **5. News**

Press releases and position statements are scheduled for M12, 24 and 36. Furthermore, letters to scientific journals, policy statements and advocacy documents shall be issued during the project's development.

Alongside these, on-line newsletters are to be published quarterly and disseminated through all available OptTEST networks, as well as being available on the OptTEST website ([www.Opttest.eu](http://www.Opttest.eu)).

**Timeline for dissemination of OptTEST outcomes (to be updated as appropriate)**

**Key:** Press – Press release; MS- Milestone; D- deliverable; PR- progress report/position statement

OptTEST for HiE	2015												2016												2017												
	M1	M2	M3	M4	M5	M6	M7	M8	M9	M10	M11	M12	M13	M14	M15	M16	M17	M18	M19	M20	M21	M22	M23	M24	M25	M26	M27	M28	M29	M30	M31	M32	M33	M34	M35	M36	
Communications timeline	J	J	A	S	O	N	D	J	F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	
Calendar events –to fill in as announced				HepHIV 2014	Glasgow 2014												EACS												Hep/ HIV- tbc	Glasgow 2016							
OptTEST Website and Facebook page online; Leaflets printed (distribution ongoing)					MS 2 & 3																																
WP1			kick- off								annual meet/report																									annual meet/final report	
WP2											Press 1																										Press 3
Progress & Evaluation reports (WP3)											PR1						mid- term eval																				PR3