

OptTEST in HiE - Part I - National level

Dear partner/collaborating centre,

Please complete the questions below. If necessary, you can scroll down to the end of the questionnaire and click save and return later to complete it.

There will be an opportunity to provide any additional comments/information at the end of the survey.

If you have any questions or experience technical difficulties regarding the questionnaire, please contact HIV in Europe at (hie.rigshospitalet@regionh.dk).

Please provide name of respondent: _____

If anyone else provided any of this information, please enter their contact details here: _____

1. National HIV Testing Guidelines

1.1 Does your country have national HIV testing guidelines? (if no or do not know please skip to question 2.1)

- Yes
 No
 Do not know

Please provide following details of all guidelines which apply: Title:/year:/lead author:/published by (organisation or society):/Planned review date: _____

If yes, please insert link to guidelines here: _____

1.2 Do they specifically refer to HIV testing when a person presents with HIV indicator conditions?

- Yes
 No

Please tick all the indicator conditions referred to in the HIV testing guidelines:

- Sexually transmitted infections
 Malignant lymphoma
 Anal cancer/dysplasia
 Cervical dysplasia
 Herpes zoster
 Hepatitis B or C (acute or chronic)
 Mononucleosis-like illness
 Unexplained leukocytopenia/thrombocytopenia lasting >4 weeks
 Seborrheic dermatitis/exanthema
 Invasive pneumococcal disease
 Unexplained fever
 Candidaemia
 Visceral leishmaniasis
 Pregnancy (implications for unborn child)

1.3 Do they give specific guidance on informed consent?

- Yes
 No

If yes, please insert link or relevant text here: _____

1.4: Do they give specific guidance on pre/post-test discussion or counselling?

- Yes
 No

If yes, please insert link or relevant text here: _____

1.5 Are there any restrictions regarding who can offer the HIV test e.g. only specific staff groups are permitted to offer the test?

- Yes
 No
 Do not know

If yes, please give details:

1.6 Are there any restrictions regarding who can perform the HIV test?

- Yes
 No
 Do not know

If yes, please give details:

1.7 Is there restricted access to HIV testing for certain groups/populations?

- Yes
 No
 Do not know

If yes, please select which groups/populations

- Men who have sex with men
 People who inject drugs
 Sex workers
 Migrants
 Transgender people
 Prisoners and incarcerated people
 Other

If other, please give details

2. HIV testing recommendations in specialty guidelines

Viral hepatitis B:

2.1 Are there specialty guidelines for viral hepatitis B? (if no, please skip to question 2.6)

- Yes
 No

2.2 Please provide the following details on the viral hepatitis B guidelines: Title: / year: / lead author: / published by (organisation or society): / planned review date:

Please insert link to the viral hepatitis B guidelines if available:

2.3 Do specialty guidelines for viral hepatitis B recommend HIV testing?

- Yes
 Only if indicated after risk assessment (e.g. ethnicity, sexuality, drug use)
 Only in certain situations
 No

Please describe the certain situations:

If indicated after risk assessment, please describe the risks assessed:

2.4 Do viral hepatitis B guidelines give guidance on informed consent when testing for HIV?

- Yes
 No

If yes, please insert link to guidance or copy text:

2.5: Do they give specific guidance on pre/post-test discussion or counselling when testing for HIV?

- Yes
 No

If yes, please insert link to guidance or copy text:

Viral hepatitis C:

2.6 Are there specialty guidelines for viral hepatitis C? (if no, please skip to question 2.11)

- Yes
 No

2.7 Please provide the following details on the viral hepatitis C guidelines: Title: / year: / authors: / published by (organisation or society): / planned review date:

Please insert link to viral hepatitis C guidelines if available:

2.8 Do specialty guidelines for viral hepatitis C recommend or advise HIV testing?

- Yes
 Only if indicated after risk assessment (e.g. ethnicity, sexuality, drug use)
 Only in certain situations
 No

Please describe the certain situations:

If indicated after risk assessment, please describe the risks assessed:

2.9 Do viral hepatitis C guidelines give guidance on informed consent when testing for HIV?

- Yes
 No

If yes, please insert link to guidance or copy text:

2.10 Do viral hepatitis C guidelines give specific guidance on pre/post-test discussion or counselling?

- Yes
 No

If yes, please insert link to guidance or copy text:

Pneumonia:

2.11 Are there specialty guidelines for pneumonia?(if no, please skip to question 2.16)

- Yes
 No

2.12 Please provide the following details on the pneumonia guidelines: Title: / year: / authors: / published by (organisation or society): / planned review date:

Please insert link to pneumonia guidelines if available:

2.13 Do specialty guidelines for viral pneumonia recommend or advise HIV testing?

- Yes
 Only if indicated after risk assessment (e.g. ethnicity, sexuality, drug use)
 Only in certain situations
 No

Please describe the certain situations:

If indicated after risk assessment, please describe the risks assessed:

2.14 Do pneumonia guidelines give guidance on informed consent when testing for HIV?

- Yes
 No

If yes, please insert link to guidance or copy text:

2.15 Do they give specific guidance on pre/post-test discussion or counselling when testing for HIV?

- Yes
 No

If yes, please insert link to guidance or copy text:

Infectious mononucleosis-type illness:

2.16 Are there specialty guidelines for the diagnosis of infectious mononucleosis-type illness?(if no, please skip to question 3.1)

- Yes
 No

2.17 Please provide the following details on infectious mononucleosis-type illness guidelines:
Title: / year: / authors: / published by (organisation or society): / planned review date:

Please insert link to infectious mononucleosis-type illness guidelines if available:

2.18 Do guidelines on infectious mononucleosis-type illness recommend or advise HIV testing?

- Yes
 Only if indicated after risk assessment (e.g. ethnicity, sexuality, drug use)
 Only in certain situations
 No

Please describe the certain situations:

If indicated after risk assessment, please describe the risks assessed:

If no, is HIV listed as a differential diagnosis?

- Yes
 No

2.19 Do infectious mononucleosis-type illness guidelines give guidance on informed consent when testing for HIV?

- Yes
 No

If yes, please insert link to guidance or copy text:

2.20 Do they give specific guidance on pre/post-test discussion or counselling when testing for HIV?

- Yes
 No

If yes, please insert link to guidance or copy text:

3. HIV testing

3.1 Is there a national policy/strategy or other recommendations from government on HIV testing?

- Yes
 No
 Do not know

If yes, please insert link to or describe the national HIV testing policy:

3.2 Are any of the following testing options legal (as distinct from tests in clinical/community settings):

- Postal HIV sampling (ordering an HIV test and returning sample to laboratory through postal services. Result is provided by health service by phone/SMS)
- Home HIV testing (buying an HIV test kit and performing test within the home, results immediately available to tester)
- Other
- None of the above
- Do not know

If other, please specify:

3.3 Are any of the following testing options available:

- Postal HIV sampling (ordering an HIV test and returning sample to laboratory through postal services. Result is provided by health service by phone/SMS)
- Home HIV testing (buying an HIV test kit and performing test within the home, results immediately available to tester)
- Other
- None of the above
- Do not know

If other, please specify:

3.4 Can individuals test anonymously for HIV?

- Yes
- No
- Do not know

If yes, please give details:

If not, why not and what sort of information is required?

4. Discrimination

4.1 Is there any protective legislation for people living with HIV, e.g. employment, access to health care in any arena?

- Yes
- No
- Do not know

If yes, please insert link to the legislation:

Comments on question 4.1:

4.2 Is there protective legislation based on gender identity, sexual orientation or sexual practice?

- Yes
- No
- Do not know

If yes, please insert link to the legislation:

Comments on question 4.2:

4.3 Is there legislation to protect people against discrimination based on race?

- Yes
- No
- Do not know

If yes, please insert link to the legislation:

Comments on question 4.3:

4.4 Is needle exchange legal in your country for people who inject drugs (PWID)?

- Yes
- No
- Do not know

Comments on question 4.4:

4.5 Is opiate substitution therapy (OST) legal?

- Yes
 No
 Do not know

Comments on question 4.5:

4.6 Are PWID excluded from HIV treatment while actively using drugs?

- Yes
 No
 Do not know

Comments on question 4.6:

4.7 Commercial sex work - is it legal to sell sex as an individual?

- Yes
 No
 Do not know

Comments on question 4.7:

4.8 Is it legal to organise or manage the selling of sex?

- Yes
 No
 Do not know

Comments on question 4.8:

4.9 Is it legal to buy sex from commercial sex workers?

- Yes
 No
 Do not know

Comments on question 4.9:

5. Access to HIV treatment and care

5.1 Is there free access to HIV treatment and care?

- Yes
 No

Comments on question 5.1:

5.2 Who pays for HIV treatment and care?

- The individual/ patient
 Private individual health insurance
 State Health Insurance
 International donor programme (i.e. Global Fund)
 Government
 Other

If other, please specify:

If more than one is selected in question 5.2, please identify the main funding source:

6. Status and access to HIV treatment and care

6.1 Is there restricted access to HIV treatment and care for certain groups/ populations of people living with HIV?

- Yes
 No
 Do not know

If yes, please select which groups/populations of people living with HIV?

- Men who have sex with men
- People who inject drugs
- Sex workers
- Migrants
- Transgender people
- Prisoners and incarcerated people
- Other

If other, please describe:

If more than of the above groups/populations of people living with HIV are selected, please give more information

Please indicate if you are responding from an EU or a non-EU country?

- EU country
- Non-EU country

Do the following groups/populations have legal access to HIV treatment and care? (i.e provided on the same basis as citizens of the country)

6.2 Migrants from another EU state - (migrants being defined as all non-nationals)

- Yes there is universal access
- Yes but there are exceptions
- No
- Do not know

If yes but exceptions, please describe:

6.3 Migrants from outside the EU (but not refugees, asylum seekers or undocumented)

- Yes there is universal access
- Yes but there are exceptions
- No
- Do not know

If yes but exceptions, please describe:

6.4 Migrants from outside the EU applying for Asylum/Refugee status (documented)

- Yes there is universal access
- Yes but there are exceptions
- No
- Do not know

If yes but exceptions, please describe:

6.5 Migrants from outside the EU who are undocumented - i.e 'illegals'

- Yes there is universal access
- Yes but there are exceptions
- No
- Do not know

If yes but exceptions, please describe:

6.6 For non EU countries responding Other than nationals of your country who else is entitled to access to HIV treatment and care on the same basis as citizens of you country? Please describe.

6.7 For non EU countries responding Who is excluded from access to treatment and care? Please describe.

Thank you for completing this survey. If you have any additional comments/information relating to the responses you have provided, please enter in the text box:
