

## Background

- At the time of the ambitious 95–95–95 HIV targets, and in cope with the SDGs, to achieve the desired 95% of people living with HIV knowing their HIV status by 2030, Portugal needs to reach those who have less contact, for different reasons, with NHS and eliminate barriers to access HIV and STIs testing, working in partnership with the communities, public health practitioners and academia.
- A partnership between Portuguese Activist Group (GAT) and the Institute of Public Health of the University of Porto (ISPUP) and AIDS Healthcare Foundation (AHF) established in 2015 the Portuguese Community Screening Network designed to upscale and decentralize access to HIV, viral hepatitis and syphilis rapid testing with an individualized case management intervention for all people with a reactive result. The network is designed to work as a research infrastructure, providing information for a cross-sectional evaluation and to prospectively study the incidence and prevalence of these infections, their predictors, and possible test interventions among CBO working with key populations at a national level. The network maintains a unique joint intervention among NGOs in Portugal.

## Goals

- The network provides training in testing, counselling, and data collection, as well as consumables and test kits. It provides support on regulatory issues and the establishment of referral protocols to the NHS. External laboratory supervision is also facilitated by Institute Dr. Ricardo Jorge (INSA).
- ISPUP developed a standardized data collection questionnaire in collaboration with the participating NGOs, based on international indicators. The questionnaire is available online and users that perform at least one rapid screening session and are 18 older, are invited to give information to generate a code which allows for the establishment of a prospective cohort that all centres in the network contribute.
- Every month, each centre receives a report with monthly testing data, so that an up-to-date analysis of their testing process can be done.

## Results

- In 2019, the network involved 35 community-based testing sites from 16 national organizations to whom training and testing kits were offered as well as indications for centralized laboratory supervision and monthly reports of their activity indicators.
- Over 50 persons from different organizations received training to provide testing and counselling, and to collect data, support to establish referral protocols and regulatory processes.
- Overall, the network partners performed a total of 23 038 tests, of which 22 266 HIV tests (0,9% reactive results), 12 679 HBV tests (2,02% reactive results), 12484 HCV tests (1,59% reactive results) and 19 928 syphilis tests (2,17% reactive results).
- HIV testing can be an opportunity to screen for other communicable diseases, such as viral hepatitis and syphilis, which frequently coexist with HIV infection due to shared routes of transmission. Around half of all people tested reported never been tested in the past for neither of the infections above, which may indicate that if the test offer were not available, there would not be tested.

Graph 1. Screening sessions by regions (NUTS II)

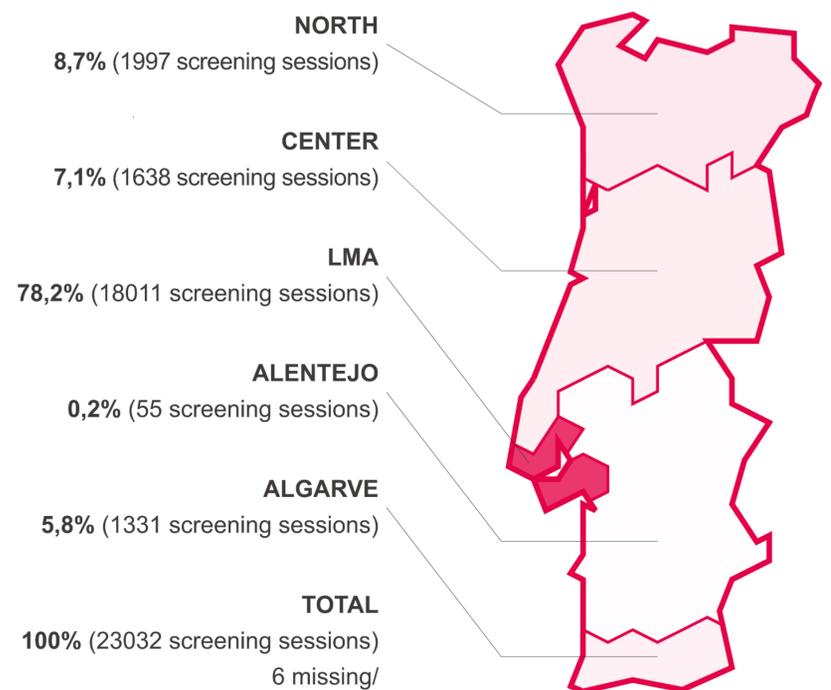


Table 1. HIV, HCV, HBV and Syphilis tests by regions

Infection	NUTS II map				
	North	Center	AML	Alentejo	Algarve
HIV	1891 tests 23 reactive 1,21%	1548 tests 13 reactive 0,84%	17667 tests 176 reactive 0,99%	53 tests 0 reactive 0%	1112 tests 6 reactive 0,54%
HCV	1459 tests 20 reactive 1,37%	866 tests 21 reactive 2,42%	8912 tests 139 reactive 1,56%	26 tests 0 reactive 0%	1221 tests 19 reactive 1,56%
HBV	1163 tests 5 reactive 0,43%	567 tests 2 reactive 0,35%	9807 tests 237 reactive 2,42%	27 tests 0 reactive 0%	1115 tests 12 reactive 1,07%
Syphilis	1762 tests 49 reactive 2,78%	1202 tests 34 reactive 2,83%	15683 tests 319 reactive 2,03%	52 tests 0 reactive 0%	52 tests 0 reactive 0%

## Conclusions

- Results clearly show the added value of community structures to bring testing services closer to key populations as it represents around 60% of all people tested. The partnership also demonstrated that close links between community, academia, and healthcare services have the potential to develop tailored, effective responses to both national and local epidemiological contexts.
- It is also clear that the combined offer of tests brings added value, as providing only HIV tests would result in 888 people who had a reactive result viral hepatitis or syphilis infection would possibly be sent home.
- The possibility to get feedback from NHS structures regarding referred participants after a reactive test would need to be available to better display the gains of the intervention.

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