

BORDERNETWORK KICK-OFF MEETING**MINUTES****Thursday, 01.07.2010, 11:30 – 13:00 h****Plenary Session on WP5: Bridging Research to Practice****Part I HIV/STIs Sentinel Surveillance among STI patients in 4 EU countries****Moderation and Presentation: Karin Haar, Matthias Nachtnebel, RKI/Berlin****Participants:** all associated partners and collaborating partner from BMG**Protocol:** Elfriede Steffan, Tzvetina Arsova Netzelmann/SPI Forschung

The session started with an overview Power Point Presentation by Dr. Karin Haar on the Sentinel Surveillance Survey established as international research action in the frame of the BORDERNET project. The objectives, methods, indicators and instruments as well as geographical settings of the BORDERNET and BORDERNETwork's surveillance systems have been presented and actual update on the network of sentinel sites in 2010 was offered.

Thus currently under BORDERNETwork (2010-2012) 4 EU countries collaborate under the co-ordination of RKI, Berlin: Austria, Bulgaria, Slovak republic and Romania. 34 sentinel sites have been recruited already or are in process of recruitment. The sites in Bulgaria (n=5) and Romania (n=6) had joined the project since 2008 in its BMG-financed phase, the Austrian (n=16) and Slovak sites (expected n=7) had been participants in the former EU-funded project BORDERNET and join now the BORDERNETwork sentinel network after 2 years of interception.

At the end of the first part the presentation illustrated the data flow chart, how the collected epidemiological and behavioural data will be transferred from the sentinel sites in each of the 4 participating countries to RKI, which is the responsible partner for data analysis and reporting.

The second part of the presentation delivered by Dr. Matthias Nachtnebel showed intermediary results from the Bulgarian and Romanian sites covering the period August 2008 – January 2010 (for Romania – October 2008-December 2009).

Hereunder some excerpts of the presented data:

- For the above mentioned period 60 571 tests have been conducted by the Bulgarian sites, 1337 of the cases were positive, 700 diagnostic questionnaires and 577 patient questionnaires submitted. The response rate of patients' questionnaires was 82%;
- In Romania 5 221 tests have been conducted, 529 diagnosed positive cases, 289 diagnostic questionnaires and 165 patient questionnaires submitted. Response rate was 57%;
- Among the reported positive STI cases in Bulgaria, Chlamydia trachomatis has highest proportion – 285 positive cases from 2841 tests (10%). 76% of the positive Chlamydia cases are in men, and 65% of the syphilis cases are also in men;
- In Romania, highest proportion shows Syphilis (18.2 %), whereas 55% of the cases are in men followed by Chlamydia (17.3%), where 69% of the cases are in men;
- According to the characteristics of the patients (based on diagnostic and patient questionnaires) in Bulgaria (men=205, women=77), men with MSM contacts count for 29.8%

- of the male patients, i.v. drug users for 6.3% of the male patients and sex workers for 5.2% of the female patients. More than 1/3 of the male patients (35.1%) have a history of an STI.
- The patients in Romania (men =429, women=271) show different picture, only 7.7% of the male patients reported to have contacts with MSM, whereas 4.9% of the male and 6.6% of the female patients have experience as sex workers as reported. 23.1% of the men and 30% of the women have history of an STI.

Discussion and next steps

In the discussion round the moderators from RKI emphasized again the importance of recruitment of sentinel sites in Slovakia and timely starting of data collection. The PRIMA colleague considered realistically to finalize the recruitment by end of July 2010 and to start reporting from August 2010 (M8).

Another point mentioned by the Romanian partner from ARAS is that the data reported showed no positive cases in i.v. drug users in Romania. Explanation for that data is that the participating sentinel sites in Romania represent state dermato- venerological clinics, a service which is hardly visited by drug users in the country, and in case of attendance the i.v. drug using patients would not admit openly their status to the state health care workers due to fear of discrimination.

The next issue discussed was approval of the respective national ethical committees . Naturally, this issue depends on the country's context. Deadline for the task according to the action plan of WP5 is April 2011, Month14 (Milestone). The preliminary study protocol has been prepared from RKI in English and can be used to complete the ethical commissions' documents in the respective country language. In Austria, RKI will provide help to obtain ethics approval. The final study protocol will be available in October 2010, Month 10 (Milestone).

The RKI's team has already informed the Health Ministries of all participating countries except Slovakia to inform them about the project in each respective country.

First onsite visits have been already conducted in April 2010 to Vienna and Bratislava. Next visit is planned to Bulgaria for 21-22 October 2010 with field visit to a sentinel site in the city of Plovdiv.

The RKI team has prepared a certificate for participation on the request of the Austrian sentinel sites, which can be offered as an incentive to all other countries' sites.

Last two announcements were made related to the oncoming World AIDS Conference in Vienna from 18 to 23 July 2010. A poster submitted by RKI and SPI with the intermediary sentinel results from Bulgaria and Romania has been approved and will be broadcasted electronically.

Secondly an invitation to take part in a sentinel sites evening meeting in a leisure time setting on July 22 2010 from 18:30 h was made to all participants who will attend the WAC 2010.

Finally the RKI team distributed a CD-ROM with all language versions of the instruments updated with EU logo and project's name.

Part II HIV/STIs Second Generation Behavioural Surveillance among sex workers in 6 EU countries

Moderation and Presentation: Tzvetina Arsova Netzelmann, SPI Forschung

Participants: all associated partners and collaborating partner from BMG

Protocol: Elfriede Steffan, Tzvetina Arsova Netzelmann/SPI Forschung

The component of second generation surveillance was introduced as part of the research tasks in WP5. A power point presentation outlined the specific objective 2 relevant for WP5 and the rationale behind the behavioural surveillance:

- to bridge gaps in collection of comparable epidemiological and behavioural data in the group of Sex Workers throughout Europe;
- to augment the evidence on HIV/STIs prevalence and analysis of risk factors;
- to outline comparable indicators for behaviour change in the group of SWs to be addressed in prevention/diagnostic/treatment offers

The moderator referred briefly to the desk review conducted so far and the ECDC technical report on mapping of HIV/STI behavioural surveillance in Europe.

Then the detailed description of the research task followed:

- 1) **Participating countries:** Bulgaria, Estonia, Germany/or Poland (in the border region to Germany), Latvia, Romania, and Slovak Republic.
- 2) **Sample size:** between 200 and 300 respondents in each survey location;
- 3) **Sampling method:** combination of service- and respondent- driven sampling methods based on snow-ball technique;
 - Service-driven:
 - Sex workers STI services,
 - Mobile medical units,
 - outreach visits in prostitution scene.
 - Respondent-driven:
 - initial contacts with between 3 to 5 respondents will trigger several different chains of a snow-ball to study the context of risk and the social network of the group;
- 4) **Behavioural Indicators** (among others): transactional sex, condom use, HIV/STI testing und prevalence, access to care
- 5) **Qualitative in-depth narrative interviews**
 - up to 5 in survey location on social determinants, access to social (re)-integration services and quality of life of the affected groups.

In a discussion round afterwards the moderator clarified with all partners participating in the survey the following open questions:

- **Feasibility of the estimated sample size**
The team of PRIMA confirmed that a sample of 300 sex workers can be reached for the purpose of the survey in Slovakia; in Romania – 200 respondents are envisaged as realistic size of sample, in Estonia – 250; in Bulgaria between 150 and 200, in the region between Germany and Poland such a great sample size can be only covered if the survey is allocated both in MRI and in MRII – possibilities will be searched for that and clarified with the organisation, which will be subcontracted by AHP/DE to conduct the survey;
- **Setting of sex work for main enrolment of survey respondents-**
In Slovakia, Bulgaria and Romania – outdoor sex work scene, in Estonia – indoor and as far as there a respondent-driven sampling will be attempted the chain could also lead to some outdoor scene respondents
- **Permission of ethical commission** – should be provided by February 2011 (M14) on the basis of the protocol and instrument for the survey
In Estonia the experience suggests that 2 to 3 weeks are enough to obtain the permission of the ethical commission after submission of the documents;
The PRIMA partners have no experience with ethical commission so far, there is such for research existing, they will make the contact. In Romania there is a ethical commission in the

MoH but there is another hurdle seen in the context that prostitution is an illegal issue in Romania and a survey on that issue can be obstructed. Here it was recommended to approach the ethical commission from the perspective "survey on human beings" requiring informed consent and not emphasizing on belonging to a certain group as sex workers. For the case of Bulgaria the HESED representative will consult their colleague from the sex work department, who is in charge of the survey among the group and will feedback the information.

- **Start date of the field phase of administration** – at earliest in March 2011 (M15)
In Estonia best time for administration in the sex work scene will be May-June 2011;
- **Duration of the field phase of administration** – in Estonia and Bulgaria – 3 months, in Slovak republic and Romania – around 5-6 months will be needed.

Next steps:

- Design of survey protocol and questionnaire by SPI in consultation with the partners – by end of October 2010 (M10);
- Clarification for the reporting of the respondents' incentives –
Several ideas have been shared by the partners – some practice purchase of vouchers for food or petrol, or of some other cosmetic products, some practice reimbursement of the time with an amount. In any case anonymity of the respondents will be assured, signature of the interviewer or chosen initials of the interviewee are seen as two options for the reporting of the incentives.