

Ministerial Conference

Fighting against HIV/AIDS ten years after the Dublin Declaration: Leaving No One Behind – Ending AIDS in Europe

Rome, 27 November 2014

**Everyone, Everywhere, how can we ensure
that no one is left behind in Europe?**

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Rome, 27 Nov 2014



“No one” is....

- Ending the HIV epidemic will not be possible without increasing efforts to reduce new infections and prevent AIDS-related deaths among key populations at highest risk of HIV.
- There are five key population groups currently identified as the groups most vulnerable to HIV: **men who have sex with men, transgender people, people who inject drugs, sex workers, and people in prisons.**
- Particular focus on young people and adolescents belonging to any of the key population groups.

Specific challenges for Key populations

Improving...

- 1.The legal frameworks and rights in each country;
- 2.Access to all kind of prevention tools in each country;
- 3.Access to “treatment”... “good treatment” in each country;
- 4.Anti-discrimination and anti-stigmatization policies in each country.

There are strong connections!

Identifying the risk of...

- **Individual level risks**
 - Biological and behavioural risks
- **Network level risks**
 - Network size and density
- **Structural risks**
 - HIV criminalization, stigma, discrimination also in health care system

Focus on MSM

Research shows that MSM are at higher risk of:

- Alcohol and drug use, abuse and addiction;
- Depression and suicide;
- HIV and STIs;
- Childhood physical, sexual, mental abuse;
- Victims of violence.

There are number of papers that have shown that *internalized homonegativity*, and not homosexuality, is the better correlate with negative mental and sexual health outcomes

Vulnerability and social determinants

Internalized homonegativity according to EMIS

Level	Key construct (measures)
Structural	structural homonegativity (as measured in laws that are pro-gay or anti-gay)
Community	societal homonegativity (as measured by tolerance/hostility to gays)
Intra-individual	internalized homonegativity and depression (as measured by scales)
Behavioral outcomes	greater risk behavior syndemically (as measured by greater alcohol use, drug use, unsafe sex, suicide attempt)
Health impact	higher rates of HIV/STIs (syphilis, gonorrhea, etc.)

Example: Positive sex and prevention

The primary goal of *positive prevention* is to support people living with HIV to achieve health and wellbeing with the secondary goal of benefiting public health.

Involving all 'useful' stakeholders

- Groups/communities representing Key populations;
- Institutions;
- Health world;
- Social world;
- Any other needed...

First understanding, than tailoring the new policies according to specific issues in each country