

21 Maggio 2026 14.00 - 15.00 Sala Cassiopea 2

Oral Communications

Reaching the unreachable: community strategies for HIV testing and care

OC 6 The value of promoting hepatitis and HIV screening in high-prevalence populations: the "Test in the City" project

N. prog: OC 6

Title: The value of promoting hepatitis and HIV screening in high-prevalence populations: the "Test in the City" project

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Abstract body

Background: Test in the City involved 14 Italian Fast-Track Cities and addressed high-risk populations: migrants, DU and people over 55. The goal was to implement a screening campaign for hepatitis and HIV, supporting the health system in identifying and taking charge of undiagnosed patients. The tests used are antibody tests for HIV and HCV, and HBsAg for HBV. The project, funded by Gilead Sciences, ran in 2025 and involved third sector organisations, healthcare facilities and institutions.

Materials and Methods: We established a network to share strategies and best practices through monthly meetings. A dedicated website and multilingual communication tools were developed, as well as a data collection method based on a shortened version of the COBATEST questionnaire. Each city identified procedures for referring people with reactive tests to healthcare facilities for confirmatory testing and treatment and promoted screening actions by identifying the best contexts and opportunities at the local level including CPIA, CAS, low-threshold services, embassies, addiction services and community gathering places.

Results: During 2025, 5,572 people were tested, of whom 5,020 were in the target group (Table 1): 84.34% were foreigners (127 countries), 16.4% having been homeless in the last year, 12.71% reported drug use, 11.67% reported not having access to the National Health Service, 63% were male, and the distribution across different age groups was homogeneous, with 14% over 55.

The results show significant incidences for all infections, especially new diagnoses for HBV, in addition to a certain number of people with already known diagnoses (Table 2). Analysis of the characteristics of people tested highlights further significant elements. Being male correlates with reactive tests, particularly for HBV and HCV. Considering age, HBV infection is distributed across all age groups, with a significant incidence in under 44 years; for HCV there is a significant incidence in the 45-54 age group, while for HIV in the 35-54 age group. Not having access to the healthcare system or being homeless correlates significantly with all three infections. The use of psychoactive

substances is significant for HIV and HCV. Correlations with geographical origin are widely confirmed (Table 3). In general, significant indications emerge regarding the relevance of age, origin and the eight of health determinants, largely confirming the hypotheses on which the project was based.

Conclusions: This project points to the most efficient way to achieve the WHO's 2030 goals. The road ahead is certainly difficult, because the populations with the highest prevalence of these infections are difficult to reach. Collaboration between healthcare institutions and the third sector, with targeted approaches, is not only desirable, but absolutely necessary. The findings identify those most at risk and highlight where and how efficiently address undiagnosed cases. The project continues, but it cannot become structural without adequate public financial support.

Table 1

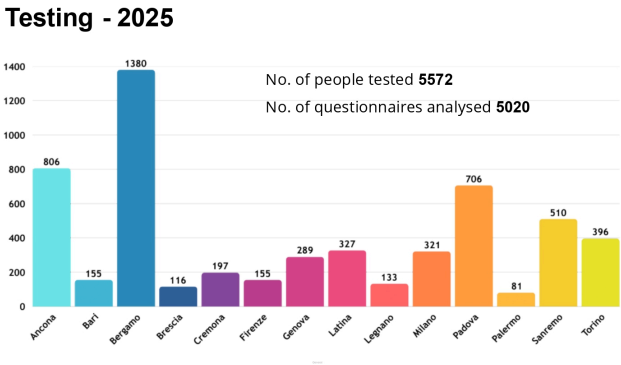


Table 2

In-depth analysis: the project's targets

The people tested in the target refer to*:

- **84.34%** to the migrant population
- **13.54%** to the population over 55
- **12.7%** to users of psychoactive substances (PUD)

Target Population	Migrants			DU			Over55		
Prevalence	Total	New diagnosis*	Known diagnoses	Total	New diagnosis*	Known diagnoses	Total	New diagnosis*	Known diagnoses
HIV	0.53%	0.33%	0.23%	2.36%	1.26%	1.10%	0.60%	0.00%	0.60%
HCV	1.89%	0.62%	1.27%	5.70%	1%	4.70%	5.60%	0.60%	5%
HBV	2.29%	1.91%	0.33%	0.80%	0.50%	0.30%	1%	0.60%	0.40%

*It should be noted that within the calculation there are people who belong to more than one target.

Table 3

New and previous infections	HIV	HCV	HBV
Gender	male 63%	male 80%	male 92%
Age	35-54 (70%)	45-54 (28%)	under 44 (85,7%)
Origin	Italy 36% Pakistan 13% Sub-Saharan Africa 25% Latin America 16%	Italy 30% Sub-Saharan Africa 20% South Asia 32%	Sub-Saharan Africa 38% (Burkina Faso 11%) South Asia 20% (India 11%)
No health-care service access	32%	34%	28%
Homeless	45%	27%	23%
Co-infections	4,3%	4%	not relevant
Use of psycho-active drugs	39%	32%	5%

