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Dear Karen,

Thank you for your letter and for the Committee's ongoing interest in this important issue.

I am pleased to report that since the Committee's evidence sessions and publication of the Scottish Government's [HIV Transmission Elimination \(HIVTE\) Delivery Plan 2023-26](#) last March there has been considerable progress in taking forward actions to tackle stigma and achieve zero new transmissions of HIV in Scotland by 2030. The chairs of the HIV Transmission Elimination Delivery Group (HIV-TEDI) are currently preparing a mid-plan progress report which will provide an update on delivery of the prioritised actions, as well as outlining epidemiological data and trends which will inform future planning and interventions. As the current plan runs until the end of 2025/26, work will also commence this year to consider the next phase of our work towards achieving Scotland's 2030 HIV transmission elimination goal.

In the meantime, I am happy to provide an update on the matters you have raised on behalf of the Committee.

Identifying and supporting those living with undiagnosed HIV, including gaps in mental health support.

Public Health Scotland's (PHS) latest annual report on [HIV in Scotland](#), published last September, indicated a sustained increase in HIV testing numbers, however we know that further work is required to reach undiagnosed individuals living with HIV.

The HIVTE Delivery Plan includes a range of actions to identify and deliver the most effective approaches to testing to find undiagnosed individuals living with HIV, and to support engagement in treatment and care. This includes actions to improve testing for HIV in the presence of 'indicator conditions' which may be suggestive of HIV infection; work to ensure that opt-out testing is proactively and consistently offered in key settings such as drug

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services and prisons; and pilots of Emergency Department opt-out testing for blood borne viruses (BBVs). The Scottish Government is also continuing to fund Terrence Higgins Trust Scotland's delivery of HIV Self-Test Scotland and community-based testing initiatives.

Scottish Government-funded research is also ongoing to identify the optimal approach to testing for BBVs for people at highest risk in Scotland, in order to reduce undiagnosed infections, increase linkage to care for those not in treatment, improve health and prevent BBV transmission. The outputs of this work are expected to be finalised in the coming months.

The Scottish Government is also committed to ensuring that people living with HIV receive the care and support they need, and we are working with partners across public service and the third sector to ensure that this happens. The HIVTE Delivery Plan sets out our approach to ensuring equitable access to high quality care and treatment.

Following publication of the [HIV Outcomes Beyond the Virus](#) report, officials are engaging with the HIV-TEDI Group and the Scottish Health Protection Network's HIV Clinical Leads Group to consider its recommendations and ensure that psychological support for people living with HIV meets the high standards we would expect. The Scottish Government has also provided NHS Education for Scotland with around £30 million in 2024/25 to deliver multidisciplinary education, training and workforce expansion for staff supporting adult and children's mental health and psychological wellbeing.

Through our Communities Mental Health and Wellbeing Fund for Adults the Scottish Government is also funding a number of projects offering peer support and practical assistance which can help people living with HIV to stay well and engage or re-engage in care.

Addressing stigma and removing barriers to testing, particularly for those in rural communities, where privacy and anonymity can be more of an issue, therefore the importance of awareness training for staff.

The HIVTE Delivery Plan set out a multi-layered approach to addressing HIV stigma, with actions ranging from a population-wide media campaign through to targeted education and awareness-raising opportunities for health and social care staff. Under Action 1 of the Plan the Scottish Government committed to addressing educational needs across the health and social care sector. To deliver this we have taken a tiered approach and funded two key projects, details of which are outlined below:

- NHS Education for Scotland has been funded to develop and deliver health workforce education to improve the detection and diagnosis of HIV within non-HIV specialties. This includes considering areas such as indicator conditions, the language around testing and communication skills (including addressing stigma and normalising the process of HIV testing). Outputs include eLearning resources on HIV indicator conditions and testing, stigma and HIV PrEP.
- Waverley Care has been funded to develop resources on HIV prevention, testing, treatment and stigma for the wider health and social care workforce. The project also

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includes creation of a digital hub to ensure that resources are accessible and easy to navigate for a wide range of staff.

Action 2 of the HIVTE Delivery Plan involved the delivery of the national HIV anti-stigma campaign which the Terrence Higgins Trust was funded to develop in partnership with the Scottish Government and a range of stakeholders. An evaluation of the campaign is currently being finalised, but indicates that it exceeded all expectations in terms of its reach and span of delivery, whilst achieving its aims in terms of changing attitudes and educating the public about HIV. We will of course consider the evaluation findings and learning from the campaign in our future planning.

Uptake on PrEP and those attending sexual health services for the first time.

PHS's latest [HIV in Scotland](#) report highlighted ongoing progress in relation to uptake of HIV PrEP in Scotland, with the average number of individuals accessing PrEP for the first time in 2023 amongst the highest since the NHS-funded programme began in 2017.

Nonetheless, within the HIVTE Delivery Plan we have recognised the need for further work to ensure that PrEP is accessible to all those who could benefit from it. Prioritised actions include work to review guidelines on PrEP suitability and update training materials, and funding projects exploring new models of PrEP provision. Of particular note is the ePrEP Clinic study, led by Glasgow Caledonian University, which has now seen participants complete the online consultation pathway and successfully receive their PrEP. The project will run until April 2026 and its findings will inform decisions about future delivery models for HIV PrEP in Scotland.

Emergency department opt-out testing pilots and progress in Scotland since the pilots (when will they be rolled out and what is the evaluation process?)

As you will be aware, the Scottish Government has funded pilots of Emergency Department (ED) opt-out BBV testing in NHS Grampian, Lothian and Highland. We are using evaluation data from the pilot projects, combined with evidence available from the programme in England and Scottish Government-funded research, to determine whether further roll-out would be acceptable, deliverable and cost-effective.

However, two of the pilot projects commenced later than originally planned, meaning that the evaluation process has not yet been completed. There has also been an extension to the timescale of Scottish Government-funded academic research on missed opportunities for BBV testing, which will provide valuable information to inform future funding decisions. An options appraisal for ED opt-out testing is currently in development, however this will need to be carefully considered alongside other potentially beneficial testing interventions, as well as wider budget priorities.

Any other data you can provide regarding developments since last year.

As indicated above, PHS's latest [HIV in Scotland](#) report includes encouraging data on progress across a range of indicators. Perhaps the most notable of these is a significant and

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sustained decline in the number of newly diagnosed infections where transmission was thought to have occurred within Scotland. In 2023, this figure was 37. However whilst this can give us reasonable grounds for optimism, I recognise that there is no room for complacency. I would like to assure the Committee that the Scottish Government remains fully committed to delivering on the actions set out in the HIVTE Plan, to ensure we can achieve and sustain transmission elimination and improve the lives of people living with HIV in Scotland. Further detailed updates on the actions will be available in the mid-plan progress report which we will publish later this year.

Yours sincerely

JENNI MINTO

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