

12 ACHIEVEMENTS IN 2023: ANNUAL DIGEST



On the New Year's eve, we are happy to share 2023 highlights of the SoS EECA multicountry project. This is the result of incredible regional partnership and alignment, which led to strong developments based on the regional needs and with results for individual countries. We are incredibly proud of our partners and donors, whose work we are presenting in this brief overview.

Together, we are making a difference in the fight against HIV in the region, and we are committed to continuing our work to ensure that those in the highest need and risk have sustainable access to the care they need. Let 2024 be inspirational, impactful and victorious in your work in EECA!

We picked 12 achievements - to be specific and at the same time not too detailed, they correspond to SoS 2 project 3 objectives on the development of programs, protection of human rights and advocating for domestic HIV budgets.

1



Scaled up and developed PrEP in EECA: new countries, simplified prescription pathways, new forms of PrEP

Procurement of PrEP medication by APH, work on PrEP site preparation and protocols by SEE Network and WHO Europe in Bosnia and Herzegovina and Montenegro resulted in the launching PrEP for MSM in both countries! Remarkable progress was achieved in Bosnia and Herzegovina, where funding for PrEP-related expenses was already included in national schemes. The PrEP protocols in 7 EECA countries were thoroughly analyzed, and specific recommendations and goals were identified [by ECOM](#). Thanks in significant part to the SoS 2 project advocacy, [Ukraine is the first country in EECA to receive CAB LA PrEP](#) funded by PEPFAR and implemented by UPHC as a unique opportunity for HIV prevention among MSM.

2

Filled the gaps in prevention among emerging groups at risk of HIV by working on right to health for migrants, recreational drug use, stimulant users' health and in prisons

REG on Migration and Health worked towards generating evidence-based data on migrants and refugees in the region and advocated for effective national and transnational healthcare solutions for this group. [REG published research results](#) on the well-being of international migrants in Armenia, Kazakhstan, Kyrgyzstan, Tajikistan, and Uzbekistan as well as a new study on the access of Ukrainian refugees to HIV and TB care in six receiving countries across Europe. REG has promoted the adoption of national protocols of state-funded remote HIV care in Kyrgyzstan and Tajikistan in case nationals living with HIV cannot return home from the country where they currently reside. Two more countries of the EECA region to adopt similar policies in 2024.

The Joint Policy Statement regarding [EMERGING PRIORITIES FOR THE REDUCTION OF HARMS ASSOCIATED WITH RECREATIONAL USE OF PSYCHOACTIVE SUBSTANCES IN EECA](#) was developed by APH and International Harm Reduction Professional Organizations. Guide of Harm Reduction Services for people who use psychoactive substances in recreational contexts intervention was developed and will be implemented in EECA. Translation and adaptation of a blended training course: community mental health interventions in partnership with Mainline is launched and will be available for EECA.

APH-led MAT pilot is fully prepared and ready for launch in early 2024 to help stimulant users with ADHD improve their overall health and life quality and reduce stimulant usage.

Thanks to the activity of Eurasian Movement for the Right to Health in Prisons, normative documents on social order in probation were developed in Kazakhstan, the provision of ART was organized in prisons in Ukraine, introduction of release preparation program was initiated in Georgia, accreditation of peer-to-peer training program done in Moldova.

3

Worked to simplify and speed up HIV diagnostics — to get the cascade to 95%

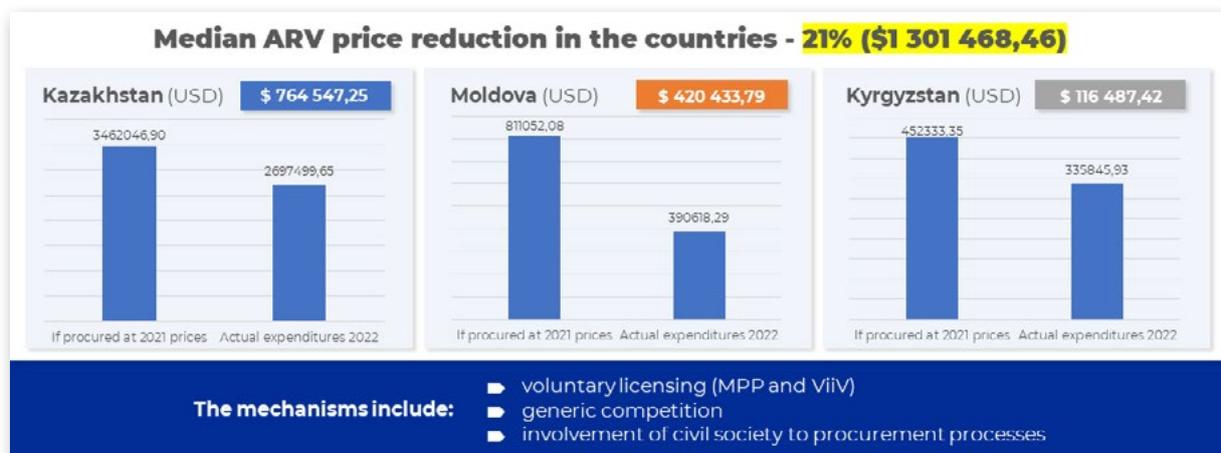
In EECA, where only 63% of PLHIV know their HIV status, it is critical to improve HIV diagnostics approaches. WHO Europe and 100% Life held [the analysis of testing and treatment protocols](#) in 7 countries (Armenia, Moldova, Georgia, Kazakhstan, Kyrgyzstan, Uzbekistan, and Ukraine) and provided recommendations. WHO Europe and PAS held the [Comparative Cost Analysis](#) of Current HIV Testing Strategies in Kazakhstan and Georgia compared to WHO Recommended Rapid Diagnostic Test (RDT) Testing Algorithm. In both countries, all preparations are done for RDT verification studies. SEH produced the reports on assessment of the readiness of health systems to decentralize HIV testing and treatment services and developed the roadmaps to decentralize [HIV testing](#) and [treatment](#) services. SEE RCN conducted [an assessment](#) and provided technical support to enable HIV self-testing, community-based testing, and decentralized testing in four SEE countries - Albania, Montenegro, North Macedonia, Serbia.

4



Reduction in prices of ARVs helps generate economies to be used to service more patients

Mechanisms for ARV price reduction are actively applied in the region, thanks significantly to the activity of HAC, 100% Life, CAAPL, SoS 2 project country coordinators and project collaboration with MPP. Median ARV price reduction in target countries in the project in 2023 achieved 21% (1.3 M USD). This is due to the following mechanisms to implementation of which the SoS 2 project directly contributed: facilitation of the process of voluntary licensing (through linking with MPP), involvement of civil society, facilitation of generic competition (through work of dedicated SoS2 project country coordinators in Moldova and Kyrgyzstan).



The Economist Impact analyzed the most successful strategies for ARV price reduction and described them in an [analytical report](#).

5



Immediate response to rights violations of KPs and PLHIV - over 8,000 cases addressed in 14 countries of EECA - defends communities and prevents new rights violations

Human rights and policies were high on the project agenda. 20k+ appeals related to human rights violations of KPs were documented during 2019-2023 with technical support of APH in 14 countries of the region. On average, 40% of appeals are resolved through direct REActor's intervention. Only 0.5% (115) of appeals are resolved through legal proceedings. This is due to complicated access to justice. REAct unites 150+ NGOs and communities, including regional networks like ECOM, ENPUD, SEE RCN. 43% of clients who contacted REActors received legal support to restore justice. At the same time, 30% of clients decline to fight for their rights due to fear of being prosecuted or chased. The main perpetrators were the police and medical personnel and we focused our advocacy effort on these groups.

An information online campaign "16 days against gender-based violence" was held, where [cases from 14 countries](#) were presented. (EWNA, REAct).

6



Revising punitive laws on HIV transmission risks and criminalisation of personal drug use is critical for sustainable HIV response and is a project priority

Draft laws with the legal changes to reduce the criminalization of PLHIV were developed by project involved consultants with 100% Life or advocacy conducted for revisions by project implementers:

 **Kazakhstan:**

- ✓ Repeal of Art. 118 p.1 of C.C. (Exclude criminal liability for deliberate endangerment of another person with the risk of HIV infection).
- ✓ Transfer p.2 and 3 of Art. 118 to the composition of general crimes and consider them within the framework of Art. 107 (Intentional infliction of moderate harm to health).

 **Georgia:**

- ✓ Repeal of Art. 131 p.1 of C.C. (Deliberate endangerment of another person with the risk of HIV infection).
- ✓ Transfer p.2 of Art. 131 to the composition of general offenses and consider it within the framework of Art. 118 of the C.C. (Intentional infliction of less serious bodily harm) as a note.

 **Uzbekistan:**

- ✓ Repeal of Art. 113 p.1 of C.C. (Exclude criminal liability for deliberate placing of another person in danger of contracting a venereal disease).
- ✓ Apply Art. 109 of C.C. (Intentional infliction of light bodily harm) to intentional acts under p.2 and 3 of Art. 113 of C.C.

 **Kyrgyzstan:**

- ✓ Repeal of Art. 143 p.2-3 of C.C. (Exclude penalty or criminal liability for endangering with the risk of HIV, if infection did not occur, or occurred due to negligence).
- ✓ Amend of p.4 Art. 143 (Introduce the concept of intentional HIV infection, reduce criminal liability from 5-8 years to a fine or imprisonment for a term of 2-5 years.)

Revision of drug policy is supported by project partners, such as ECECA Commission on Drug Policy, EHRA, ENPUD and SoS 2 project country coordinators in Georgia, Moldova and Kyrgyzstan, with the following focus:

 **Kyrgyzstan:** in the Law “On Narcotic Drugs, Psychotropic Substances, and Precursors”: repeal of Art. 40-42 (Compulsory treatment for drug addiction); repeal of Art. 36. (Narcological registration).

 **Georgia:** in the Law “On Combating Drug-related crime” repeal of Art.3 (Automatic deprivation of Civil Rights for drug-related crimes); introducing alternatives to punishment for drug offenders.

 **Moldova:** amend Art 217. of C.C. (Illegal Circulation of Narcotic or Psychotropic Substances or Analogs Thereof Not for the Purpose of Alienation); repeal of Narcological registration

7



Supporting drug policy change in EECA through high level advocacy, including carried out by the ECEACD Commissioners, is showing results

ECECA Commission on Drug Policy (ECEACD) developed [Standards of Drug Policy](#) to guide drug policy reform in the region. Following a visit by the Commission on Drug Policy to Lithuania, the Parliamentary Committee supported a bill to decriminalize medical cannabis. Following the visit to Kyrgyzstan, the Parliamentary Committee supported the draft law on the abolition of compulsory treatment in the second reading. The 3rd and final reading and support by the Parliament is expected. Advocacy at the high political level is working!



8



Community-led studies conducted and readily available support advocacy and reform

Just the latest studies supported by the project and implemented by communities and further used for advocacy of regulations, approaches and practices, include:

- ✓ Stigma Index completed in Georgia, Armenia, protocol in Kazakhstan (CAAPL)
- ✓ Reports on Sexual and Reproductive Health and Rights of Women Living with HIV In [Georgia](#) and [Serbia](#) (EWNA)
- ✓ Monitoring on GBV against women living with HIV in Kazakhstan and Moldova (EWNA)
- ✓ Women-led [gender assessment](#) “How countries address barriers to HIV services for women living with HIV, sex workers and women who use drugs”. (EWNA)
- ✓ Analysis of UN recommendations implementation given to Ukraine and Kyrgyzstan (EHRA)
- ✓ Analytical papers: Repressive drug policy: evidence collected by community in Kyrgyzstan, Kazakhstan, Georgia, Moldova (ENPUD)
- ✓ [Invisible Voices](#): Regional report on violations of the right to health of LGBT people in the region of Eastern Europe and Central Asia in 2022 (ECOM)
- ✓ National reports on violations of the rights of gay men, other MSM, and trans* people in [Armenia](#), [Kazakhstan](#), [Kyrgyzstan](#), [Uzbekistan](#) (ECOM)
- ✓ Situation and Economic Analysis of HIV Services for International Migrants in [Kazakhstan](#), [Kyrgyzstan](#), [Tajikistan](#) (REGMH)
- ✓ [Regional digest](#) REAct about tendencies in human rights violations in EECA Region.

The UN High Commissioner in his report on human rights violations focused on the problems of repressive drug policy, which were highlighted by project partners in their shadow reports.

EKPC has taken forward community research data and supported the registration of first trans* CBO in Albania; gender Policy and Recommendations for the MoHSP of Albania for provision of services for the transgender community were developed; Declaration signed for raising HIV support in primary health care with the Institute of Public Health of Vojvodina (Serbia); Policy brief on Trans* communities in Armenia in respect to access to PrEP and PEP was developed; “Recommendation Paper: Reducing Gender Barriers Among Transgender People in the National HIV Programs” (North Macedonia) was issued.



Increasing domestic allocations on HIV ensures sustainable domestic HIV response

In 2023, SoS project, and in particular SEH, continued providing technical assistance to NGOs and national authorities on regulation of HIV service packages for KPs, national financing of HIV programs through social contracting, removing existing barriers and creating a favorable legal environment for reallocation or additional allocation of national funding for HIV services.

Thanks to focused advocacy efforts \$2,623,564 were allocated from national and municipal budgets to HIV programs for KPs in 2023.

BUDGET FUNDING MOBILIZED FOR HIV SERVICES USING SOCIAL CONTRACTING MECHANISMS IN 2023			
	Georgia		
2022 — \$ 357 000	2023 — \$ 384 000		
<ul style="list-style-type: none"> ✓ The analysis of standards and tariffs and their improvement were carried out. ✓ An analytical review «Municipal financing of CSOs – legislation and practice» has been prepared. 			
	Moldova		
2022 — \$ 154 126	2023 — \$ 229 414		
<ul style="list-style-type: none"> ✓ Standards for the care and support of PLHIV have been approved. Tariff for HIV preventive services for KP approved. ✓ The development of standards and tariffs for integrated public health services, including HIV, has been initiated 			
	Kazakhstan		
2022 — \$ 118 529	2023 — \$ 156 234		
<ul style="list-style-type: none"> ✓ The analysis of existing standards and tariffs was carried out. ✓ Participated in the development of the Roadmap for the implementation of measures to prevent HIV infection in the Republic of Kazakhstan for 2023-2026. 			
	Kyrgyzstan		
2022 — \$ 61 000	2023 — \$ 343 170		
<ul style="list-style-type: none"> ✓ Updated standards for NHS services in the field of HIV have been approved, which includes tariffs. ✓ Two bills “On the protection of public health in the Kyrgyz Republic” and “On health care” have been adopted, which include provisions related to the state social order in the health care system. 			

 **Tajikistan**

2022 — \$ 19 200	2023 — \$ 28 000
-------------------------	-------------------------

- ✔ Work is underway to develop standards for preventive services for HIV groups.

 **Armenia**

- ✔ Draft standards for preventive services for groups in the field of HIV have been developed.
- ✔ A package of documents has been prepared for tendering/procurement of HIV services in 2024 using public funds

 **Serbia**

2022 — \$ 19 214	2023 — \$ 807 084
-------------------------	--------------------------

 **North Macedonia**

2022 — \$ 1 000 000	2023 — \$ 311 501
----------------------------	--------------------------

 **Montenegro**

2022 — \$ 112 356	2023 — \$ 53 160
--------------------------	-------------------------

 **Bosnia and Herzegovina**

2022 — \$ 92 000	2023 — \$ 170 751
-------------------------	--------------------------

 **Albania**

2022 — \$ 32 000	2023 — No data yet
-------------------------	---------------------------

- ✔ Development of Standards and Cost Calculations for HIV Service Packages in Albania, North Macedonia and Montenegro, leading to significant advancements in the regulation and operationalization of HIV services. Standards and cost calculations have been developed in Serbia, further solidifying the commitment to enhancing the quality and accessibility of HIV services. Additionally, a draft version has been created in Bosnia and Herzegovina, with expectations for its adoption by the end of the year.

 **Ukraine**

2022 — \$ 931 453	2023 — N/A
--------------------------	-------------------

- ✔ Approved updated maximum tariffs for HIV-related services and Standards for the provision of care and support services to people living with HIV.
- ✔ The Working Group on Sustainability of HIV Prevention, Testing, Care and Support Services continues its work.

 **Azerbaijan**

- ✔ Draft standards and tariffs for preventive services for groups in the field of HIV have been developed.
- ✔ A working group on sustainability and budget advocacy has been created.
- ✔ Pilot tender for procurement of HIV services from GF funding was conducted. A package of documents has been prepared for tendering/procurement of HIV services in 2024 using public funds.

 **Uzbekistan**

- ✔ The approval of the Manual/Standards of the “Patient School” is at the final stage. Includes a list of services and their pricing for the implementation of this intervention in the context of a social order.
- ✔ A full package of documents was prepared for the state social order in the field of HIV in the amount of \$ 486,534.00.

10



Business continuity (BC) management is an important response to crises in EECA

In the context of ensuring continuity of health care services, a lot of preparatory work, a number of regional meetings and trainings were carried out, with leadership of SEH, which contributed to the fact that:

- ✓ Public Health Center of the MOH in Ukraine prepared for ISO 22301 accreditation;
- ✓ a brief on the implementation of the BC approach is developed for the EECA region and TA is provided regarding the inclusion of the BC activities in the new wave of countries' applications to GF;
- ✓ consultations and technical support were provided to stakeholders in Moldova, Kazakhstan, Kyrgyzstan, Georgia, Ukraine, Uzbekistan (national application is under preparation) and Tajikistan / In Ukraine and Azerbaijan (included in the national application to the GF).

11



Fast-tracking city responses in EECA brings important new stakeholders and budgets to HIV response in EECA

APH has been capitalizing on the successful experience of bringing cities to HIV fast-track family in EECA. Indeed, after signing the Paris declaration over 7 years ago, most of the cities continue to develop, fund and implement city programs on HIV! This year we have worked with cities in EECA to exchange best practice as well as introduce new cities to the partnership. In 2023, three cities joined the Fast-track family of cities: Khorog and Kulyab in Tajikistan (thanks to SPIN-Plus advocacy), and Kolonja in Albania (SEE RCN). Now EECA is home to 38 Fast-track cities!

12



Catalyzing responses through digitalisation and use of AI makes HIV programming cheaper and smarter

In 2023, the project team led by APH continued its steadfast commitment to enhancing the region's HIV response by spearheading the development of innovative digital solutions, focusing on the following areas:

- ✓ The rollout of the integrated DHIS 2 based national HIV prevention, care and support info system is gaining momentum, with Kyrgyzstan already getting ready to implement at the start of 2024 and Tajikistan preparatory work underway.
- ✓ Furthermore, the team has successfully developed and presented at regional and national events the Virtual Social Worker platform, which is poised to revolutionize social support services in the region.
- ✓ Regional HIV data dashboard initiative is also progressing steadily, in partnership with Positive Initiative, with the first version of the public access website to be available by June 2024.

These technological advancements will undoubtedly bolster the region's HIV prevention, treatment, and care efforts, bringing us closer to achieving an HIV-free future.

For more comprehensive information about the project, please visit our official website <https://sos.aph.org.ua>, where you can find detailed reports, case studies, and ongoing updates on our progress.

Our website serves as a central hub for disseminating knowledge and insights about our work to combat HIV in Eastern Europe and Central Asia.

By visiting the website, you can gain a deeper understanding of our strategies, partnerships, and achievements, and stay informed about our ongoing efforts to ensure that everyone has access to life-saving HIV prevention, treatment, and care services.

Happy 2024!