

KEY HIGHLIGHTS OF THE SOS 2.0 PROJECT: Achievements and Impact in the EECA Region



#SOS_PROJECT 2.0

TOGETHER WE OVERCOME
CHALLENGES AND DRIVE CHANGE!

HAPPY NEW YEAR! **2025**



As the New Year approaches, we are delighted to share the key achievements of the three-year multicountry #SoS_2.0 project in the EECA region supported by the Global Fund. Implemented in 2022-2024, the project navigated an exceptionally challenging period marked by multiple crises. These included global effects of the COVID-19 pandemic, the full-scale war in Ukraine, the most significant wave of migration since World War II, the spread of authoritarian rule and shrinking civil society space in EECA. Despite these obstacles, the project successfully delivered impactful and sustainable outcomes.

These accomplishments are the result of a strong regional partnership and collaboration, built on addressing regional needs and delivering meaningful outcomes for individual countries. The project's crisis response, regional adaptations, and innovative approaches have been crucial in ensuring progress in the fight against HIV during these turbulent times. We take immense pride in our partners and donors, whose efforts are highlighted in this brief overview.

Together, we are making a meaningful difference in the fight against HIV in the region. We remain committed to ensuring that those most in need and at risk have sustainable access to essential care and services. By sharing our experiences, best practices, and innovative solutions, we aim to inspire further action and collaboration in the face of adversity.

For this overview, we've selected 15 key achievements that reflect the objectives of the SoS project: building sustainable HIV response programs, protecting human rights, and advocating for domestic HIV budgets. Our aim was to be both specific and concise while highlighting the impact of these efforts.

1

Scaling Up access to PrEP in EECA: expanding access and simplifying pathways



The #SoS_2.0 project has driven remarkable progress in expanding and developing PrEP (pre-exposure prophylaxis) programs across the EECA region, introducing innovative approaches and ensuring sustainable access to HIV prevention.

- **Progress in the SEE region:** PrEP was successfully scaled up in **North Macedonia** and initiated for MSM in **Bosnia and Herzegovina** and **Montenegro**, supported by the SEE Regional TB and HIV Community Network, WHO Europe, and APH.
 - **Bosnia and Herzegovina** achieved a significant milestone by integrating PrEP-related expenses into national funding schemes.
 - **North Macedonia:** 153 courses provided.
 - **Bosnia and Herzegovina:** 65 courses initiated.
 - **Montenegro:** 81 courses initiated.
- Innovations in **Ukraine:** Ukraine became the first EECA country to introduce long-acting injectable cabotegravir (CAB-LA) for PrEP through advocacy with PEPFAR and PHC, benefiting over 110 patients in Kyiv and Lviv. This pilot project (2023-2025) will expand to 500 courses for all KPs in 2025.

With these achievements, EECA and SEE countries are advancing simplified prescription pathways, securing funding, enhancing sustainability, and ensuring equitable access to innovative HIV prevention methods.

2

Launching TWIIN – AI-Powered 24/7 Digital Assistant twiin.aph.org.ua



This year, Alliance for Public Health introduced [TWIIN](https://twiin.aph.org.ua), an innovative digital assistant providing 24/7 support in HIV prevention, mental health, harm reduction, and sexual health. Piloted in Ukraine amid the ongoing war, TWIIN offers personalized solutions for individuals and critical tools for social workers and healthcare providers. First presented globally at AIDS 2024 in Munich and launched in **Ukraine** in September, it is gaining attention as a groundbreaking initiative to sustain healthcare systems during crises, having already supported over 5,000 individuals with over 38,000 visits to TWIIN. TWIIN exemplifies the power of IT innovation in addressing emerging health challenges.

TWIIN is becoming a revolutionary tool, strengthening healthcare systems during crises and demonstrating the power of IT innovations in addressing emerging health challenges.

3

Excellence in HIV program data: development of DHIS2-based HIV system for Kyrgyzstan and Tajikistan



APH launched a DHIS2-Based National HIV Prevention, Care, and Support System in **Kyrgyzstan** and **Tajikistan**, marking a significant step in advancing data-driven healthcare solutions.

This flexible, open-source platform, used in over 75 countries, offers:

- Comprehensive data collection, reporting, and analysis in one tool.
- Mobile and offline capabilities for field workers.
- Seamless integration with existing national resources and databases.
- Enhanced reporting, quality control, and national-level data management.

The system sets a new standard for tailored healthcare tools with exclusive APH-developed features like journal entries, client apps, and a report constructor. Future enhancements include predictive AI, promising an even greater impact on HIV prevention and care. With predictive AI capabilities on the horizon, this system exemplifies innovation in digital health tools, setting a benchmark for HIV prevention and care programs in the EECA region.

4

Innovative Pilot Program in Ukraine: Addressing Medication-Assisted Treatment for ADHD & Stimulant Use Disorder



The pilot program in **Ukraine** has already enrolled 66 participants across five sites: Ivano-Frankivsk, Zhytomyr, Cherkasy, and newly added locations in Kyiv and Kharkiv. The program focuses on a 6-month treatment using long-acting methylphenidate (Concerta) to address amphetamine use.

Preliminary Results include:

- Reduced amphetamine use among participants.
- Improved physical and mental health.
- Enhanced social well-being.

A comprehensive analysis of the final results and the development of a detailed report with recommendations to inform future approaches and scale-up potential will follow.

This innovative initiative showcases the potential for targeted treatment programs to improve health outcomes and reduce substance use in the region.

5

Filled gaps in prevention among emerging groups at risk of HIV by working on the right to health for migrants



Regional Expert Group on Migration and Health (REG) 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.

- **Research on Service Provision:** Conducted a comprehensive study on the state of healthcare service provision for migrants in **Kazakhstan, Kyrgyzstan, and Tajikistan.**
- **HIV Service System Development:** Developed a robust system to ensure access to HIV diagnosis and treatment for migrants in their countries of residence.
- **Remote Registration and Service Access:** Implemented a mechanism for remote registration of HIV-positive patients and ensured continued service provision in **Kyrgyzstan, Tajikistan, and partially in Kazakhstan and Moldova.**
- **Study on Challenges for Ukrainian Migrants:** Investigated and documented challenges faced by **Ukrainians** who left the country in 2022, particularly in accessing assistance related to HIV status or their membership in key population groups.

6

Innovative approaches to support IDPs and refugee clients and patients - HelpNOW



Under the initiative of the SoS project team, more than 100 organizations and activists worldwide came together to launch the HelpNow services at the onset of the war. Starting from March 1, 2022, a robust and well-structured system — “patient - request - received help” — HelpNow HUB was established, providing a simple, transparent, and efficient pathway for accessing antiretroviral therapy (ART), opioid substitution therapy (OST), and treatment for viral hepatitis and tuberculosis.

Over almost three years of operations, starting in March 2022, HelpNow services and the HelpNowHUB have coordinated more than 40,000 requests from **Ukrainians** across more than 50 countries and from within Ukraine itself. These requests, primarily from people living with HIV (PLHIV) and representatives of key populations (KPs), were managed by #HelpNow Service, #HelpNowPL, #HelpNowDE, #HelpNowClinicalHUB, and partner hubs in **Moldova** and the **Baltic States**, alongside asylum services and direct social support initiatives.

With the support of the project, the organization [HelpNowHUB Foundation](#) was registered in **Poland** and continues its work.

The HelpNowHUB model has become a vital mechanism for assisting Ukrainian refugees, particularly those from key populations, in accessing treatment-related information and support in their host countries. This hub model serves as an exemplary and sustainable system for integrating migrants into healthcare structures—one that can be adapted to function effectively in any country.

7

Enhancing Access to Healthcare Services for People in Prisons in the EECA Region



The Eurasian Movement for the Right to Health in Prisons has taken several significant steps across the EECA region to improve access to HIV and related services for people in prisons.

A comprehensive assessment identified key barriers preventing incarcerated individuals from accessing these essential services in **Georgia, Kazakhstan, Kyrgyzstan, Moldova, Ukraine**.

In **Moldova**, a professional training program for peer consultants in prisons received government accreditation, and in 2024, a system for selecting, training, and supervising consultants was launched. As a result, trained consultants now provide 24/7 counseling services in two penitentiary institutions.

In **Ukraine**, the standard operational procedure for prescribing antiretroviral therapy (ART) and delivering care and support to people living with HIV (PLWH) in prison settings was revised and adopted, ensuring alignment with nationally approved standards. Legislative changes also abolished the additional 25% tax on salaries of prisoners engaged in peer service provision, removing a key barrier to the sustainability of these programs.

In **Georgia**, a program was developed to prepare people who use drugs (PWUD) in prisons for release, with prison staff trained in overdose prevention to enhance post-release safety.

Meanwhile, in **Kazakhstan** and **Kyrgyzstan**, individuals with lived experience in prisons were included in Country Coordinating Mechanisms (CCMs), ensuring that their opinions contribute to shaping policies and programs.

These measures demonstrate a strong commitment to addressing the unique needs of incarcerated individuals, creating sustainable systems, and improving access to equitable healthcare within prison settings.

8

Key Achievements in Advancing HIV Testing and Treatment in the EECA Region



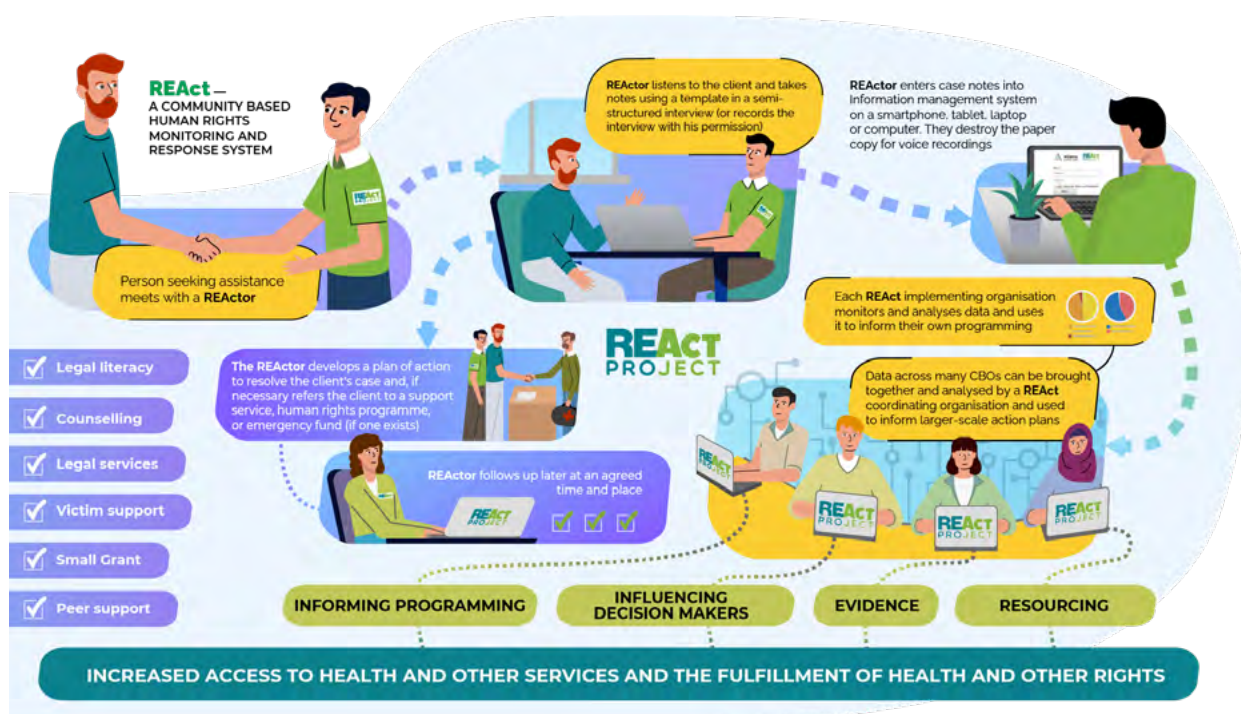
Project partnership worked on improvement of the HIV Cascade, focusing on: simplified and accelerated HIV diagnostics to move closer to achieving the first 95% cascade target. Initiated updates to HIV testing algorithms, with rapid tests successfully introduced and verified in **Kazakhstan** and **Georgia**.

Decentralization of HIV Testing and Treatment activities included:

- **Georgia:** Expanded HIV/AIDS confirmation and ambulatory treatment to new regions (Telavi, Akhaltsikhe, Poti, Khashuri) and trained healthcare staff in these areas. Established a state commitment to centrally procure high-quality HIV confirmation tests, including 4th generation antigen-antibody determination tests. Facilitated an exchange visit between Armenia and Georgia to share best practices in decentralized testing and community-based organization engagement. Initiated a verification study on rapid diagnostic tests (RDTs) for HIV testing.

- **Kazakhstan:** Approved a methodology in 2023 for allocating resources and funds within the healthcare system to support decentralization of HIV treatment. Updated tariff calculations linked to the new HIV testing algorithm, which is under review. Planned procurement of tests for the verification study on RDTs to be used in the new testing algorithm by the end of 2024.

9 Human Rights, Immediate response to rights violations of KPs and PLHIV - over 24,000 cases addressed in 14 countries of EECA - defends communities and prevents new rights violations



REAct is the biggest CLM tool, used by 270+ CSOs to track human rights violations, discrimination and violence against KPs in **Armenia, Albania, Azerbaijan, Bosnia & Herzegovina, Georgia, Kazakhstan, Kyrgyzstan, Montenegro, Moldova, North Macedonia, Serbia, Tajikistan, Uzbekistan**. On average, 69,5% of cases are responded. During 2024, 2217 consultations on human rights, and 935 consultations with professional lawyers were provided.

REAct unites 270+ NGOs and communities, including regional networks like ECOM, ENPUD, SEE RCN.

REAct data formed a basis for shadow reports to UN treaty bodies:

- UPR alternative report on Kazakhstan (ECOM)
- OHCHR Central Asia Human Rights Officer in Geneva
- Report to CESCR on Kyrgyzstan (ECOM+EHRA) and on Albania (EHRA)
- OSCE human rights violations review.

10

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



ECECA Commission on Drug Policy (ECECAD) developed Standards of Drug Policy to guide drug policy reform in the region.

- Actively collaborated with the Eastern Europe and Central Asia commission on drug policy, promoted liberalization of drug policy in view of EU accession, and supported drug policy change in Kyrgyzstan and Kazakhstan.
- In 2024 **Kyrgyzstan** parliament approved the revision of the Law “On Narcotic Drugs, Psychotropic Substances, and Precursors” to repeal the former Art. 40-42 Compulsory treatment for drug addiction
- The OAT pilot program faces the risk of closure, along with potential shortages of OAT medications, due to an active campaign by a group of opponents pushing for its termination. **The Kazakh** government has currently decided to continue the implementation of OAT, i.a. after an urgent country visit of the EECA Drug Policy Commissioners in June 2024.
- The meeting “Collective Reflection of State Structures and Civil Society on the Future of Drug Policy in **Moldova**” was organised in partnership with the National Drug Commission, as well as UNAIDS, UNODC, and ECECAD.



ADVOCACY AT THE HIGH POLITICAL LEVEL IS WORKING!

11

Driving advocacy, policy reform, and community empowerment in the EECA region



Advances in HIV decriminalization have been facilitated. In **Uzbekistan**, amendments to the List of Jobs and Types of Professions Prohibited for PLHIV removed discriminatory restrictions, and the draft law (Art. 113 p.1 of the Criminal Code) is under consideration by the Oliy Majlis.

In **Kyrgyzstan**, the Ministry of Health has committed to reviewing a draft procedure for recording and responding to infectious diseases.

Meanwhile, the Ministry of Justice in **Kazakhstan** has expressed readiness to consider amendments to Article 118 (1) of the Criminal Code. These efforts reflect substantial progress in advocacy and policy reform to support human rights and equitable access to healthcare.

12

Increasing domestic allocations to HIV ensure sustainable domestic HIV response



In 2022-2024, SoS project 2,0 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 \$5,676,707 were allocated from national budgets to HIV programs for KPs in 2022-2024.

Domestic funding for HIV services

	2022	2023	2024	Main Drivers influencing budget allocations
Ukraine	\$931 453	GF	GF	Due to War
Georgia	\$357 000	\$384 000	\$131 585	Political situation
Moldova	\$154 126	\$229 414	\$482 946	Systematization of timely tenders, increase in tariffs
Kazakhstan	\$118 529	\$156 234	\$483 999	Advocacy for social contracting allocation
Kyrgyzstan	\$ 61 000	\$343 170	\$570 388	Advocacy for OST program financing, work in penitentiary institutions
Tajikistan	\$19 200	\$ 28 000	\$31 026	Work with 2 NGOs to receive social contracting
5 Balkan countries	\$355 570	\$885 284	\$858 267	Advocacy for domestic funding, support to NGOs

13

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



In the context of ensuring the continuity of healthcare services, significant preparatory work and a series of regional meetings were conducted under the leadership of SEH, leading to the following achievements:

The Public Health Center of the Ministry of Health of Ukraine has successfully completed all stages of implementing this approach and is now in the final phase of obtaining certification under the ISO 22301 standard.

A document with recommendations for project countries has been developed to guide further implementation of the BCM approach in the EECA region.

Consultations and technical support were provided to stakeholders in **Armenia, Moldova, Georgia, and Ukraine** on integrating the BCM approach into the HIV sector.

In **Azerbaijan**, BCM activities were included in the national application to the Global Fund, and consultations were held with the participation of representatives from the Public Health Center on the algorithm for implementing BCM activities.

14

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

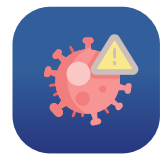


APH has been capitalizing on the successful experience of bringing cities to HIV Fast-Track family in EECA. Indeed, after signing the Paris Declaration over 8 years ago, most of the cities continue to develop, fund and implement city programs on HIV. This year we have worked with cities in EECA to exchange best practices as well as introduce new cities to the partnership. Cities signed Paris Declaration to Fast-Track HIV responses in 2022-2024: Khorog and Kulyab in **Tajikistan** (thanks to SPIN-Plus advocacy), and Kolonja, Durres, Pogradec, Shkoder in **Albania** (SEE RCN). 34 cities in 13 countries have joined Fast Track Cities initiative through signing Paris Declaration within Alliance-led regional projects starting 2017!

684,000 - Municipal HIV financing in 2022-2024:
Dushanbe - \$354 000,
Podgorica - \$88 000
Tirana - \$86 000
Skopje - \$75 000
Novi Sad - \$46 000
Sabac - \$29 000
Kulyab - \$7 800
Zvezdara - \$4 000
Subotica - \$1 000
Kragujevac - \$1 000

15

THE SECOND REGIONAL PROGRAM OF THE SOS 2.0 PROJECT UNDER THE COVID-19 RESPONSE MECHANISM (C19RM)



With the emergence of COVID-19, proactive measures were taken to adapt and enhance the effectiveness of HIV programs in the new realities. Key achievements include:

130000 rapid tests and 13 vending machines were procured and delivered to the countries, also an additional 4 thousand PCRs tests and **North Macedonia** was supported with the necessary equipment for the COVID-19 treatment, 3200 people in need received living financial support, telemedicine services in **BiH** and **Georgia**, support for migrants in **Kazakhstan**, assessment of the prevalence of SARS-CoV-2 antibodies among blood donors in **Ukraine** was conducted, Contingency Planning Guide for ensuring HIV Services for Key Population was developed for 12 countries, and support was provided to shelters for victims of human rights violations (LGBT individuals and women who use drugs) in 7 countries during COVID-19 pandemic.

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 2025!