

KYRGYZSTAN

Report prepared by the Joint UN Team on AIDS

JOINT TEAM

UNICEF, UNDP, UNFPA, UNODC, UN WOMEN, UNESCO, WHO, UNAIDS
SECRETARIAT

JOINT PROGRAMME CONTRIBUTIONS AND RESULTS IN 2020-2021

Steady improvements were made in ensuring supply of HIV and harm reduction medicines and commodities through revision of procurement policies and technical support in the supply chain. Partnerships with the Government, civil society, and nongovernmental organizations (NGOs) extended facility- and community-led HIV testing and treatment, and harm reduction services among adults and children living with HIV and key populations. Multi-month dispensing of antiretroviral medicines, motivational incentives, and nutritional support helped boost treatment adherence. Assessment on performance of prevention of mother-to-child transmission of HIV (PMTCT) was completed and the EMTCT working group established to improve quality programme data and reporting towards the EMTCT validation process. Capacity building trainings and community awareness initiatives, including virtual outreach among young people improved promotion and uptake of HIV and sexual and reproductive health (SRH). Efforts were also made to scale up psychosocial and legal support for key populations and innovative models to reduce stigma and discrimination.

HIV TESTING AND TREATMENT

The antiretroviral treatment (ART) procurement regulations and implementation mechanisms were amended enabling the Government to purchase ART through prequalified United Nations procurement agencies at a reasonable price. Technical assistance was also provided to increase the supply of methadone in the country resulting in expansion of opioid agonist therapy (OAT) in 24 sites, including nine in closed settings, reaching 1016 (944 male and 72 female) clients in 2021.

Under the Global Fund Effective HIV and Tuberculosis Control Project in Kyrgyzstan and with extensive support from the Joint Team to the Ministry of Health and other partners including NGOs, the national HIV response achieved critical results in 2020-2021. These included the expanded access to HIV testing, prevention, and harm reduction services for 34 013 people from key populations (16 973 people who inject drugs, 12 581 men who have sex with men, and 4459 sex workers) across the country. Additionally, 14 070 people who inject drugs, 8999 men who have sex with men, 3225 sex workers, and 831 prison inmates received HIV testing and counselling (HTC) services. Furthermore, thanks to enhanced ART supply, treatment coverage increased, with an estimated 4994 people living with HIV—including 194 children—accessing ART by end of 2021. Six hundred people living with HIV were newly enrolled on ART in 2021.

Motivational payments were also established for the families of 512 children living with HIV to ensure their adherence to treatment.

Thanks to technical assistance from the Joint Team, a new Global Fund COVID-19 Recovery grant of US\$ 6.6 million was secured to support the national COVID-19 response and ensure continuity of HIV services during the pandemic.

ELIMINATION OF MOTHER-TO-CHILD TRANSMISSION OF HIV AND PREVENTION OF CERVICAL CANCER

The Joint Team supported the evaluation of PMTCT programmes to assess the country's preparedness for validating the elimination of mother-to-child transmission of HIV (EMTCT) and syphilis. The assessment identified key barriers in the PMTCT services, including poor quality of data collection and reporting, and weak electronic information system. A working group—comprising experts from the Ministry of Health, the Republican AIDS Centre, development partners, the e-Health Center, independent experts, and IT specialists—was established and analysed PMTCT related records, indicators, and databases which were improved for better data quality indicators as needed to validate EMTCT.

To strengthen PMTCT services in Kyrgyzstan, the Joint Team provided technical and financial support for training 1428 village health committee members on PMTCT services; distributing PMTCT information to at least 100 000 pregnant women, young mothers, and their family members. Over 1600 medical professionals working in primary health care facility-based maternity services received refresher trainings on PMTCT thematic resulting in 25% more pregnant women being tested for HIV in Osh Province in the last six months of 2021 compared to the first six ones.

Innovative approaches such as promotion of self-testing supported by WhatsApp video counselling were promoted which was opted by almost 60% of eligible pregnant women screened for PMTCT and identified in need for HTC in the country.

The Joint Team developed a cervical cancer risk assessment questionnaire and provided financial support to enhance NGO-led cervical cancer screening programmes for women living with HIV, thanks to improved knowledge among 35 social and other NGO workers. With support from the Joint Team, Human papillomavirus (HPV) vaccines will be available for girls free of charge nationwide in 2022.

HIV PREVENTION AMONG YOUNG PEOPLE AND KEY POPULATIONS

The Joint Team implemented various outreach initiatives, including camps, forums, and information sessions with and for elevating knowledge on HIV and SRH services of 700 people living with HIV and key populations. This included promotion of uptake and consistent combination prevention and treatment adherence, as well as the development of leadership and activism skills on HIV and SRH. Information, education, and communication (IEC) materials on SRH, HIV prevention and treatment adherence reached an estimated 650 000 people through social media platforms.

Other collaborative initiatives reached over 500 000 young people, including young people from key populations empowering them to choose healthy lifestyles and linking them to SRH and HIV services for early testing and treatment. These included (a) partnership with the media and the *teens.kg* youth-led and youth-serving media network; (b) youth training and empowerment programme *Journey4Life*; (c) production and promotion of 48 video lessons and teacher training to improve the quality of school-based HIV and health education; and (d) launch of OILO, the first ever in Kyrgyzstan AI-powered interactive chatbot for information on HIV and SRH services.

To mitigate the emotional impact of crisis and emergency situations, including the COVID-19 pandemic on key populations, the Joint Team supported members of key population groups and psychologists to develop guidelines for psycho-social support and 20 people living with HIV and key population community leaders benefited from a training of trainers to roll out peer support for people in need.

HUMAN RIGHTS, GENDER-BASED VIOLENCE, STIGMA, AND DISCRIMINATION

The Stigma Index 2.0 with expanded assessment of tuberculosis-related stigma was completed with active involvement of key populations. Initial survey results revealed elevated HIV-related stigma and self-stigma among people living with HIV and people from key population groups, which undermines their ability to talk openly about their HIV status, sexuality and related needs when seeking employment or accessing health and social protection services.

In 2020-2021, the Joint Team continued support for the Street Lawyers initiative expanding access to legal services among vulnerable and key populations. Sixteen NGOs working on HIV participated in this initiative, as para-lawyers, documenting 817 human rights violation cases, i.e., cases filed by 282 people who inject drugs, 109 OAT clients, 190 sex workers, 96 people living with HIV, 112 people infected by tuberculosis, 28 people from the lesbian, gay, bisexual, transgender and intersex (LGBTI) community.

The Joint Team introduced the “Positive Deviance Model” as an innovative approach to reduce stigma and self-stigma among key populations. Through trainings and small grants, it aims to ensure that HIV programmes are gender sensitive and build capacity and leadership among girls, women, people living with HIV and men from key population groups. It also aims to eliminate self-stigma and HIV-related stigma and discrimination; support civil society organisations to build meaningful partnership with government agencies; and strengthen coordination for HIV prevention and community development programmes. As a result, seven groups representing key populations and people living with HIV started implementing nationwide “positive deviance” projects, while 100 people living with HIV and people from key populations were trained as “positive deviants” to disseminate information about HIV among peers. In addition, 665 people living with HIV and people from key population groups participated in information sessions on prevention and management of HIV and (self) stigma.

About 80 000 people, including young people were reached via social media platforms with information to address gender stereotyping and stigmatizing attitudes towards girls, women, and HIV. Support was also provided to develop and share widely social media videos, publications and personal stories of female champions living with HIV and/or from key population groups on overcoming stigma and violence.

CONTRIBUTION TO THE INTEGRATED SDG AGENDA

The Joint Team significantly contributed to ensure the new United Nations Sustainable Development Cooperation Framework (UNSDCF) 2023-2027 responds to the needs of all people in Kyrgyzstan and attain the Sustainable Development Goals (SDGs) such as inclusion of equitable access to quality social services, including health, education, justice, social protection, employment, and labour through effective policies, inclusive collaboration, and appropriate financing mechanisms.

The Joint Team’s work in 2020-2021 contributed mostly towards SDGs 3, 4, and 5. Various types of support including technical, financial, trainings and awareness-raising initiatives empowered representatives of key population groups and built capacities of healthcare workers, experts, activists, volunteers, peer supporters, and communities in the implementation of gender sensitive and equitable HIV programmes to better meet the needs of communities left behind. In particular, using innovative approaches, the Joint Team contributed to SDG 5 through partnerships with people from key populations, women and youth and broader civil society to address (self) stigma and discrimination and promote more equal rights.

CHALLENGES AND LESSONS LEARNED

Low rates of HIV diagnosis and enrolment of people living with HIV on ART coupled with high number of lost to follow up among people living with HIV on treatment continue to be a challenge in the national HIV response. COVID-19 affected outreach initiatives and the shift to virtual activities limited public mobilization, active participation, and comprehension. Further engaging activists from networks of people living with HIV and key populations will be critical in motivating communities to uptake HIV and SRH services and actively participate in implementation of community-led programmes. There is also a need to sustain and scale up OAT programmes in the country.

Stigma and discrimination towards persons from key populations are a consistent challenge in Kyrgyzstan. Discrimination against some key populations including people from the LGBTI community and sex workers has surged, and some resulted in persecutions, unlawful detention and violence, with grave consequence on mental health and safety for key population, NGO workers, and the implementation of essential health and social protection programmes. Lessons from the HIV response underscored the need to continue building the capacity of NGOs and communities on stigma and discrimination, self-stigma, gender equality, human rights, and HIV. It is also crucial to work closely with local government agencies in planning and implementing joint programmes targeting people living with HIV, women, girls, and key populations and improve their understanding about HIV, gender equality and upholding human rights for all.

Although pre-exposure prophylaxis (PrEP), condoms, and harm reduction services are accessible and available in the country, demand for them among key populations remains low. Self-care, including consistent condom use, ART adherence needs to be promoted widely among people living with HIV and key populations.

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