

REPUBLIC OF MOLDOVA

Report prepared by the Joint UN Team on AIDS

PROGRESS TOWARDS THE FAST-TRACK TARGETS

COUNTRY PRIORITIES/ TARGETS BY END OF 2021	STATUS	RESULTS, END OF 2020
81% of people living with HIV are on treatment, representing an increase of 18% from 63%, 2018 baseline (National AIDS Programme data).	ON TRACK	By the end of 2020, 70% of all people living with HIV who know their status are on treatment—an increase of about 7% compared to 2018 (GAM 2021).
60-90% of key populations (disaggregated by men who have sex with men, sex workers, people who inject drugs) reached with comprehensive prevention programmes (baseline, IBBS 2017).	ON TRACK	The number of pre-exposure prophylaxis (PrEP) beneficiaries increased from 89 people in 2019 to 213 people in 2020, through technical assistance from the Joint Team (National AIDS Programme data). HIV comprehensive prevention services coverage in 2020 was 26% for men who have sex with men (compared to 25.6% in 2019); 45.6% for sex workers (34.4% in 2019); and 59.3% for people who inject drugs (42.4% in 2019) (Routine programmatic data).
By 2021, HIV-related stigma and discrimination is reduced by 10%.	SLOW PROGRESS	Results from the SCORE (Social Cohesion and Reconciliation Index (2020-2021) show a degrading situation compared to the 2018 analysis. In 2020, about 30% of respondents from the right bank are still reluctant to have any interactions with HIV positive people. Key populations experience even worse levels of acceptance (60 and 70% rejection in the right and left banks respectively). The country adhered to the Global Partnership for Action to Eliminate all forms of HIV-related Stigma and Discrimination in 2020, reiterating its commitment to respect, protect and fulfil human rights of all people. Stigma and Discrimination reduction is reflected in both the National AIDS Programme 2021-2025 and Global Fund application.

JOINT TEAM

UNICEF, UNDP, UNFPA, UNODC, UN WOMEN, WHO, UNAIDS SECRETARIAT, OHCHR, UNRCO

JOINT PROGRAMME CONTRIBUTIONS AND RESULTS IN 2020

Despite the notable impact of the COVID-19 pandemic on the care cascade, the Joint Team provided support to national partners in 2020 to secure advances made in terms of HIV health services delivery in Moldova—through the updating of clinical guidelines, improved testing, better and more affordable ARV therapy, and training for primary and maternal healthcare workers. The emphasis on comprehensive sexuality and reproductive health education in schools and through online campaigns has improved physical and psychological wellbeing for adolescents and young people in Moldova. Community engagement with parents, teachers and religious leaders has been expanded, and the Joint Team have been advocating for institutionalised comprehensive sexuality education (CSE). Harm reduction programmes for key populations have been initiated, and prevention services such as PrEP have continued to receive support through technical assistance and capacity building. Gaps in gender equality and human rights have been a key focus in the country in 2020. Through advocacy and in partnerships with civil society and government, the Joint Team sought to advance legislation towards an enabling environment, reducing stigma and discrimination, and ensuring inclusion for women, key populations and people living with HIV.

HIV TESTING AND TREATMENT**TECHNICAL SUPPORT; POLICY ADVICE; CAPACITY ENGAGEMENT**

Technical assistance provided by the Joint Team contributed to the review of five clinical protocols, and adjustment of national testing guidelines, implemented in primary health care facilities and NGOs including Transnistria. This approach allowed an improvement in terms of accessibility, quality and standardized testing services, particularly for key populations, and the enrolment of people into treatment at earlier stages, particularly for people with an HIV diagnosis, pregnant women living with HIV and children born from HIV-positive mothers, and people using PrEP.

Since November 2020, Dolutegravir (DTG) has become the main option for second line treatment, and considered as the most recommended, accessible and affordable therapy for almost 80% of HIV patients.

To counter the negative impact of the COVID-19 pandemic on the administration of HIV testing for pregnant women, support was provided by the Joint Team for 180 primary health-care specialists to be trained in outpatient antenatal and maternal care, nutrition during pregnancy, and breastfeeding support. Supervision and internal quality assurance for prevention of mother-to-child transmission (PMTCT) services was developed and conducted using various distance learning platforms and physical presence. A team of six specialists visited 19 medical institutions to evaluate the cases of HIV vertical transmission in 2019-2020. During these visits, 16 cases were analysed in-depth and 85 medical specialists and managers were trained in the provision of medical services to pregnant women and HIV-infected newborns.

An e-stock management system was developed to plan and track stocks of medicines and to provide health officials and staff with real-time data on availability, usage, expiration date and other analytics. This digital monitoring and evaluation tool further advances access to health services and treatment.

PREVENTION IN KEY POPULATIONS TECHNICAL SUPPORT; CAPACITY BUILDING

In Transnistria, 30 people (peer to peer / outreach workers and health care workers) were trained in community PrEP in 2020, bringing the total of trained practitioners to 34. Two new PrEP sites were opened in that region.

1093 professionals from urban and rural areas (including health care workers, medical teaching staff and 81 NGOs staff working with key populations) were trained in the provisions of the new standard on HIV prevention services organization and function for key populations, including young key populations. 3000 copies of a leaflet on HIV prevention, plus two thematic pieces of information were distributed to all relevant healthcare facilities, medical education institutions and NGOs.

Through a regional programme, 15 participants from NGOs in Moldova received training on web-outreach for people who use stimulant drugs. Subsequently, three NGOs received grants to pilot similar activities; each organization anticipates reaching 45 new clients (135 in total) through various online recruitment methods.

A harm reduction project implemented by NGOs for people who inject drugs, sex workers, and men who have sex with men was financed with domestic funds through the national health insurance company. The Joint Team advocated and provided technical assistance to develop the procurement mechanism of the HIV prevention services from NGOs. The project, costing MDL 1 million (EUR 50 000), covered 1000 key populations.

PREVENTION IN YOUNG PEOPLE TECHNICAL SUPPORT; CAPACITY BUILDING; COMMUNITY ENGAGEMENT

The Joint Team provided support to the Ministry of Education, Culture and Research to align health education curricula, including CSE, to international standards in both general and vocational education/training (VET). A baseline survey on healthy behaviours and life skills knowledge, attitudes and practices among VET students was conducted, to support the integration advocacy for mandatory CSE in VET and in General Education Institutions. Education materials for quality life-skills education (LSE) for VET students were developed, and training for 24 VET teachers was conducted; 364 VET staff received induction information sessions on adolescent health, gender-based violence (GBV), and safe sexual health behaviours.

The first network of VET youth peer educators for LSE was established, including 65 boys and girls from 12 VET schools, delivering peer education to 242 students in the first four months of their activity in 2020; 58 parents learned about the health-related problems faced by VET students and about services provided by Youth Friendly Health Centres, enabling them to refer and support youth accessing health services. Five partnership agreements were signed between VET institutions, youth clinics and youth centres. IT equipment, furniture and learning materials were provided for 13 youth-friendly learning spaces within VET institutions, and educational materials were developed suitable for vulnerable students with / or disabilities in video, game, and quiz formats, available in Romanian and in Russian.

The Joint Team supported the development of a board game and an online quiz on sexual and reproductive health and rights (SRHR) to reach more young people with CSE, distributed to organisations working with and for young people, from all over the country. Based on this, 34 702 young boys and girls received SRHR information through an online peer-to-peer information campaign. In addition, a further 98 107 adolescents and youth were reached through the online psychological support programme 'My Choice is to be OK'.

With technical support from the Joint Team, an advocacy platform supporting adolescent and youth SRHR, including teachers, young people, parents, and religious leaders was expanded to five districts, and is currently acting in 40 communities to support CSE at the local level, contributing to an increasing the number of adolescents from targeted districts signing up for the 'Education for Health' optional course within General Education Institutions (sign ups increased by about 11% compared to 2019).

HUMAN RIGHTS, STIGMA, AND GENDER-BASED VIOLENCE TECHNICAL SUPPORT; ADVOCACY; CAPACITY BUILDING; POLICY DIALOGUE

Financial assistance of US\$ 203 000 was provided towards the 'One UN Joint Project on Human Rights in Moldova', to advance HIV-related stigma and discrimination elimination, through community PrEP, adjustment of the normative framework to human rights standards after the 2019 Legal Environment Assessment; stigma and discrimination reduction at individual level (through a mentoring programme for women); improving the working environment (zero stigma in health institutions, police and justice) and at general population level (communication campaigns).

Technical support and advocacy were provided to national institutions and community organizations to find agreement on approving legislative advances, allowing people living with HIV in Moldova and the Transnistrian region to adopt children. Another area of progress was in the amendment of *in vitro* fertilization regulation, to ensure equal eligibility for women living with HIV.

A national HIV accountability 'scorecard' tool was developed, as part of accessible and transparent community-based monitoring for programmatic HIV areas, human rights, stigma and discrimination and community efforts, to assess impact and communicate results to stakeholders.

Training was delivered by the Joint Team for a range of gender-sensitive issues, including 25 specialists (20 women and five men) trained in providing gender-sensitive human rights services and other 58 people living with HIV received training on gender mainstreaming and HIV. Similarly, 42 women living with HIV/AIDS benefited from a mentoring programme to be better equipped to recognize the signs of GBV, discrimination and accessing essential services and COVID-19 prevention, through online and in-person training and discussion.

CONTRIBUTION TO THE COVID-19 RESPONSE TECHNICAL SUPPORT; CAPACITY BUILDING; COMMUNITY ENGAGEMENT

The Joint Team supported the response to COVID-19 in Moldova by mobilising EUR 1 295 572 for HIV and tuberculosis (TB) programmes through the Global Fund COVID-19 Response Mechanism, and establishing a HIV/TB Crisis Management Team, which produced a TB/HIV risk assessment on services continuity.

A socio-economic impact assessment was conducted by the Joint Team focusing on people living with HIV during the COVID-19 pandemic, which resulted in the provision of online psychosocial support and counselling to counteract discrimination, inform vulnerable people of their labour rights, and address the digital gap, learning to use information and communication technologies.

Additional support included ARV home delivery to 900 HIV patients through capacitating 30 NGOs. 125 Moldovan migrants living with HIV in other countries received ARVs during lockdown. A PrEP delivery mechanism was developed, as well as TB treatment and diagnosis mechanisms to ensure PMTCT service continuity. Thirty UV bactericide lamps were distributed to all four HIV treatment centres for infection control measures.

Through technical assistance from the Joint Team, around 2000 persons from key populations received personal protective equipment (PPE). An additional 3145 women living with HIV, drug users, LGBT and female sex workers received PPE, food and hygiene supplies during the lockdown restrictions; and a further 120 women living with HIV who have HIV positive children received food packages—all as part of the Joint UN Programme ‘Strengthening the Republic of Moldova’s National Response to the COVID-19 Crisis’, funded by UN COVID-19 Response and Recovery Multi-Partner Trust Fund (UN COVID-19 MPTF). US\$ 9000 was used to provide PPE for prison health staff, and US\$ 10 000 procured PPE for 100 NGO outreach workers for HIV prevention services from UBRAF resources. PPE was also provided for 200 professionals from 41 youth-friendly health centres to ensure the continuity of SRH, including STI/HIV prevention services provided to young people.

Training was provided to over 80 perinatal healthcare providers to combat COVID-19 transmission and support clinical management of COVID-19 complications in pregnant women; and an information workshop was held to support women accessing antenatal and postnatal care, receiving 15 000 views.

CONTRIBUTION TO THE INTEGRATED SDG AGENDA

The draft National AIDS Programme 2021-2025 was developed with representatives of public institutions, communities, UN and development partners. The Programme is appreciated as robust, based on evidence, well prioritized and costed, people-centred, with elements on service integration with TB/hepatitis/mental health/addiction and SDG adjusted indicators. Thanks to Joint Team’s inputs, this policy is human-rights based, and gender-mainstreamed and responsive. The Joint Team also ensured clear interventions and budgets were embedded into the yearly United National Partnership Framework for Sustainable Development (UNPFSD) working plan under the HIV-related outputs.

PERSISTING AND EMERGING CHALLENGES AND BOTTLENECKS	KEY FUTURE ACTIONS TO RESPOND TO CHALLENGES AND UNBLOCK BOTTLENECKS
<p>The COVID-19 pandemic posed the biggest challenge in the HIV response, creating severe barriers for HIV testing, treatment and care services. Validated data on the first semester of 2020 show a 30% decrease in ART enrolment and a 40% increase of ART abandonment compared to the same period in 2019.</p> <p>The crisis also revealed further bottlenecks in the centralised health system and vertical ART provision in Moldova, which lacks a database for data collection and analysis for HIV patient surveillance, treatment, and registration. These systematic challenges particularly impacted complex needs such as addiction, TB, hepatitis, HIV, mental health issues, and non-communicable disease management.</p>	<p>Support the implementation of the new national TB and HIV programmes 2021-2025 and the consolidated Global Fund Grant 2021-2023.</p> <p>Support the development and implementation of a granular fast-tracking health HIV treatment service model, including community involvement, in two localities. This will provide an integrated model of TB/HIV/addiction/mental health services, with granular data production to increase resilient and sustainable health systems, community strengthening, and human rights and gender interventions.</p>
<p>Patients on opioid substitution treatment (OST) would benefit from the continuation of take-home Methadone, but some have struggled with adherence to treatment and severe lack of communication with medical staff.</p>	<p>Support development of video-guided medico-social services for OST patients as a tool to serve patients and support patient/staff contact via distance programme.</p>
<p>High levels of stigma and discrimination for key populations, as well as punitive and criminalizing norms in the country create persistent challenges for prevention services. Women living with HIV also face severe stigma and discrimination, with evidence of gender-based discrimination and violence.</p>	<p>Advocate for and support the revision and adjustment of the legal, regulatory, policy and normative framework, based on HIV Legal Environment Assessment findings and recommendations.</p> <p>Continue empowering people living with HIV using the mentoring programme and Positive Deviance tool to reduce stigma and discrimination and self-stigma.</p> <p>Support local community organizations, especially of key populations in community empowerment activities, to address SRH needs, condom and lubricant programming, violence and stigma prevention, in addition to leading community services.</p> <p>Support the development of an online learning course for NGO staff to ensure the sustainability of capacity building interventions for NGOs working with key populations.</p>
<p>Domestic resource financing for some HIV prevention programmes (i.e., the Prophylaxis Fund) has no predictability and makes this kind of sustainability very fragile.</p>	<p>Technical support and advocacy to be offered to the Ministry of Health, National Health Insurance Company and national stakeholders to improve the financial/procurement mechanism of HIV prevention services and ensure a strong sustainability of the above-mentioned interventions.</p>

Due to insufficient holistic health education efforts in schools, many adolescents and young people adopt risky behaviours and face a wide spectrum of health problems, such as STIs including HIV, unintended pregnancies, use of psychoactive substances, and violence.

Continue the provision of holistic interdisciplinary capacity building for NGO staff on health, rights and the Well-Being Practical Tool for HIV and SRH programmes and other priority themes with young key populations.

Provide technical support to develop tools to address risky behaviours, especially related to psychostimulants in key populations.

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