

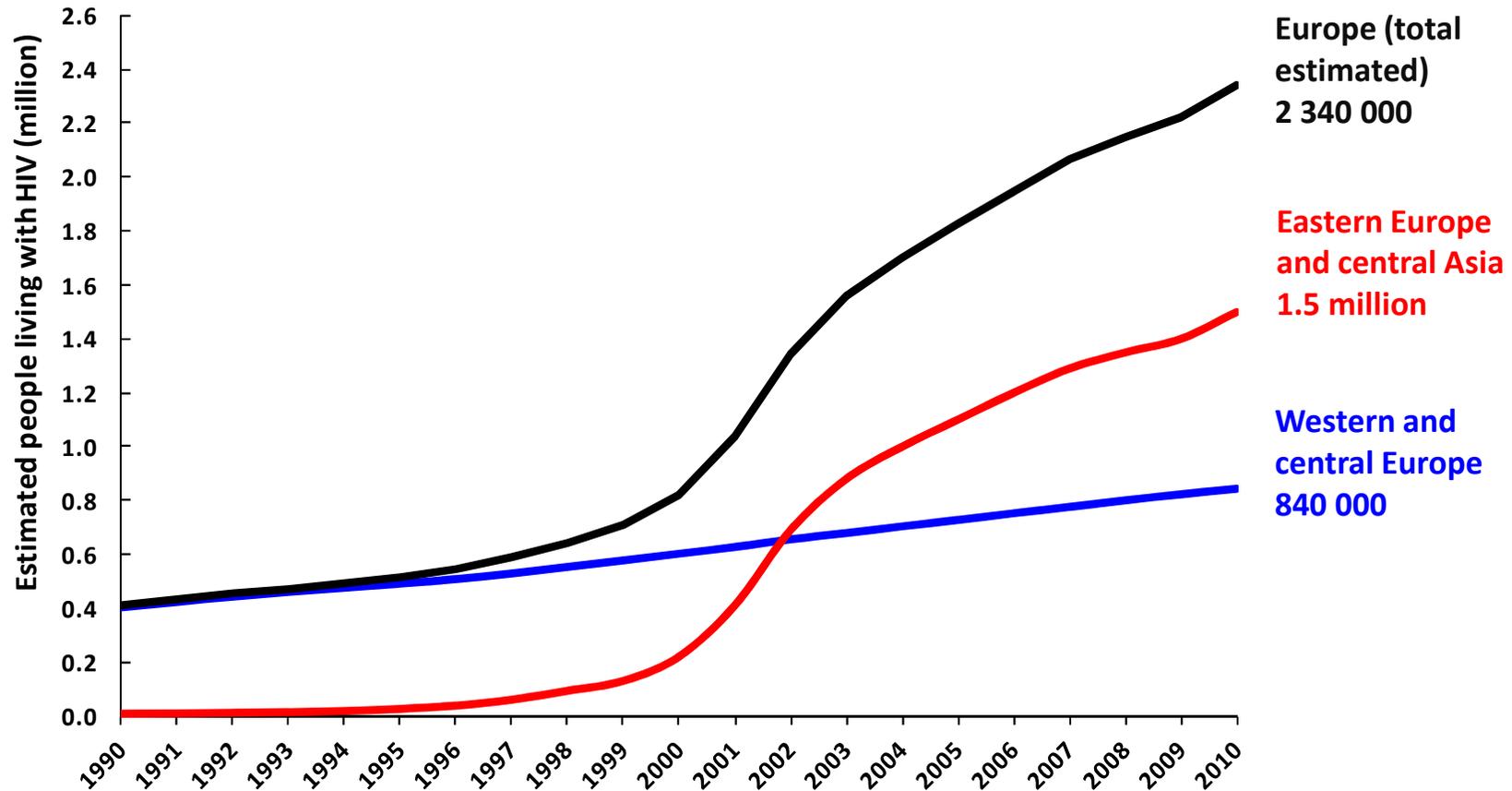
Key challenges in the cascade of care in the Eastern European region

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People living with HIV: fast growing numbers in eastern Europe and central Asia

Estimated number of people living with HIV in Europe, 1990-2010



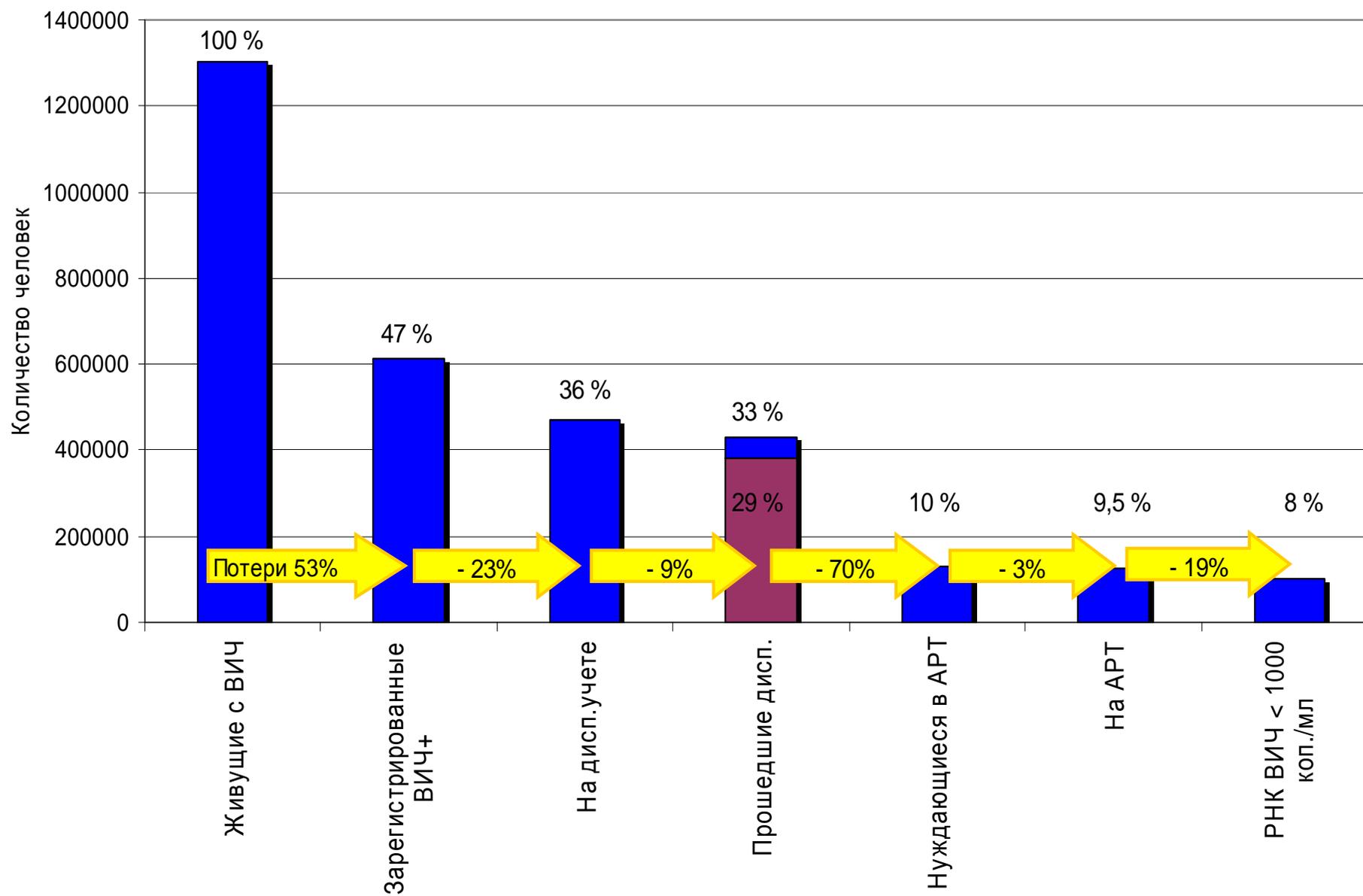
HIV in Eastern Europe and Central Asia

- An expanding HIV epidemic, largely driven by unsafe injection drug use; heterosexual transmission now also a major component of epidemic growth
- Despite recent progress, access to antiretroviral treatment remains low, particularly for key affected populations
- HIV prevention is not accessible at sufficient scale, access to harm reduction remains very limited
- Health systems are vertical and provider-centered
- High levels of stigma and discrimination, numerous structural, cultural, societal and political obstacles to the AIDS response
- Overall low levels of co-operation between government and the non-governmental sector
- Significant issues around financial sustainability

HIV, HCV, TB/MDR-TB and drug use are major and closely interlinked challenges in the region

- Two thirds of people who inject drugs in the region are infected with HCV.
- Prevalence of HCV RNA among people who inject drugs estimated to be 45%
- HCV co-infection rates among HIV-positive PWID are particularly high, often ranging between 70 and 90 %.
- HIV-positive PWID have a two to six-fold higher risk of contracting TB.
- Prevalence of HIV and HCV much higher among prison inmates than in the general population.

Каскад помощи ВИЧ-инфицированным в России, 2012



Cascade of care in the Russian Federation*

- High proportion of undiagnosed HIV infections
- Late presentation and late diagnosis
- Low coverage with treatment

- **A.V. Pokrovskaja, Souzdal conference, 2014*

Key populations at high risk in EECA

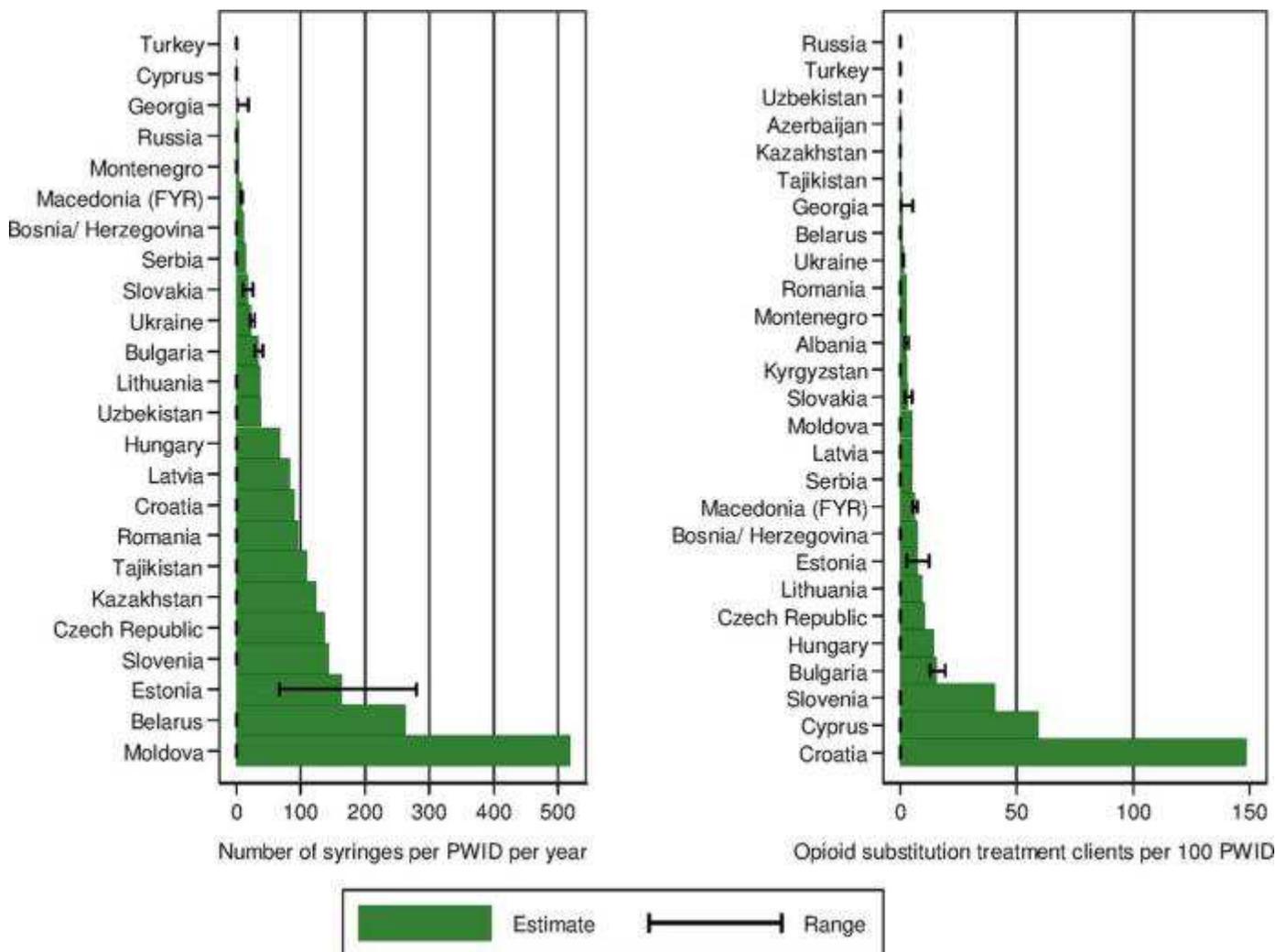
- People who inject drugs (PWID)
- Sexual partners of PWID
- Men who have sex with men
- Sex workers
- Incarcerated people

- (Migrants and their sexual partners)

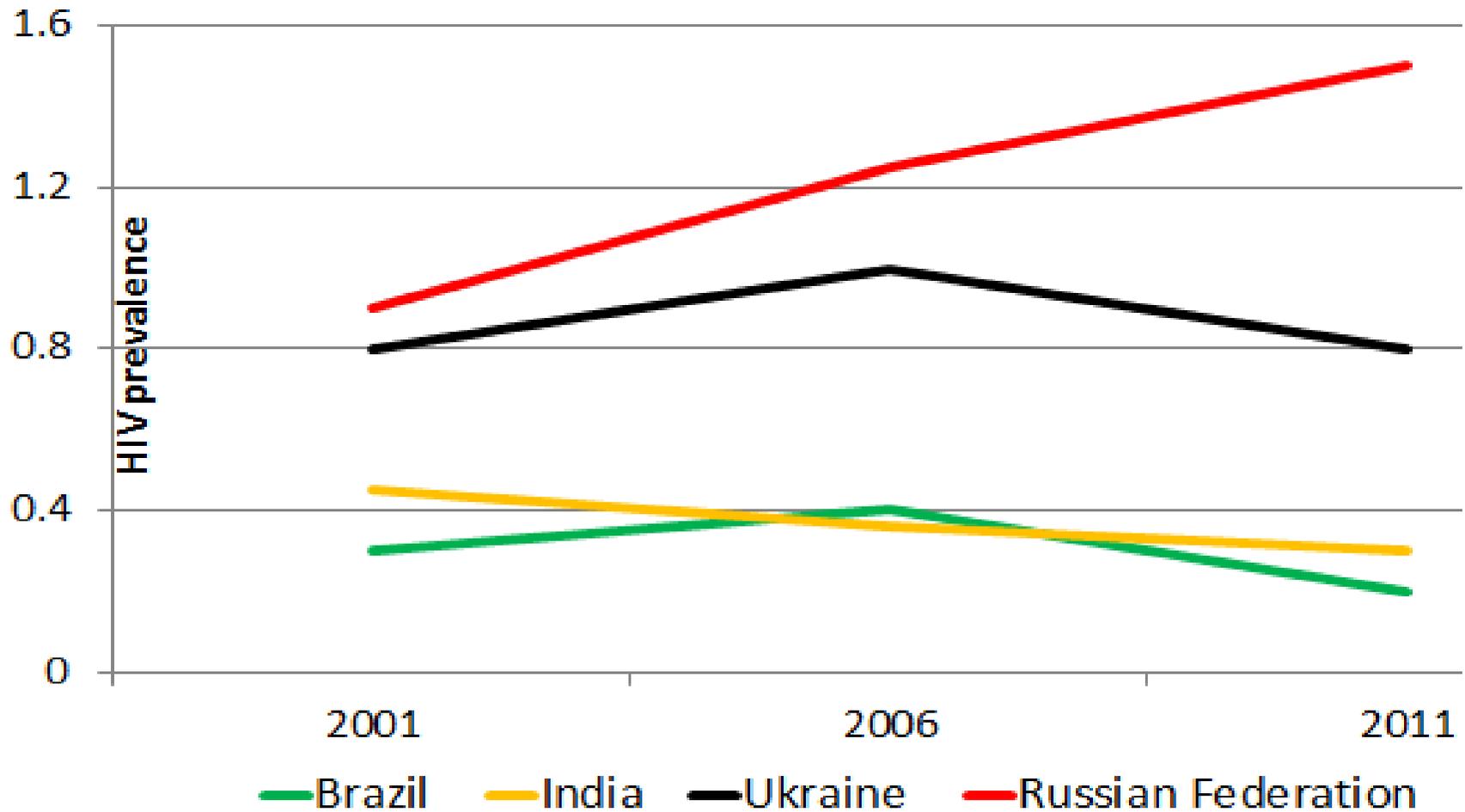
Policies of relevance to the health of key affected populations in the Russian Federation

- Drug policies (1995; 2010). Based on prohibition law enforcement. Methadone is illegal. The stated threat to demand reduction is « social tolerance to non-medical drug use »
- Anti-LGBT propaganda law (2013)
- Budget of the National HIV program: 80% of the budget is on treatment and care; 20 % on blood safety and PMTCT; 0.6% on primary prevention; Hepatitis treatment accessible free of charge to only a very small of patients
- NGOs that receive funding from abroad to register as “foreign agent” (2013, 2014)

Estimated annual numbers of syringes distributed per person who inject drugs (PWID) and estimated number of opioid substitution treatment clients per 100 PWID (latest year)



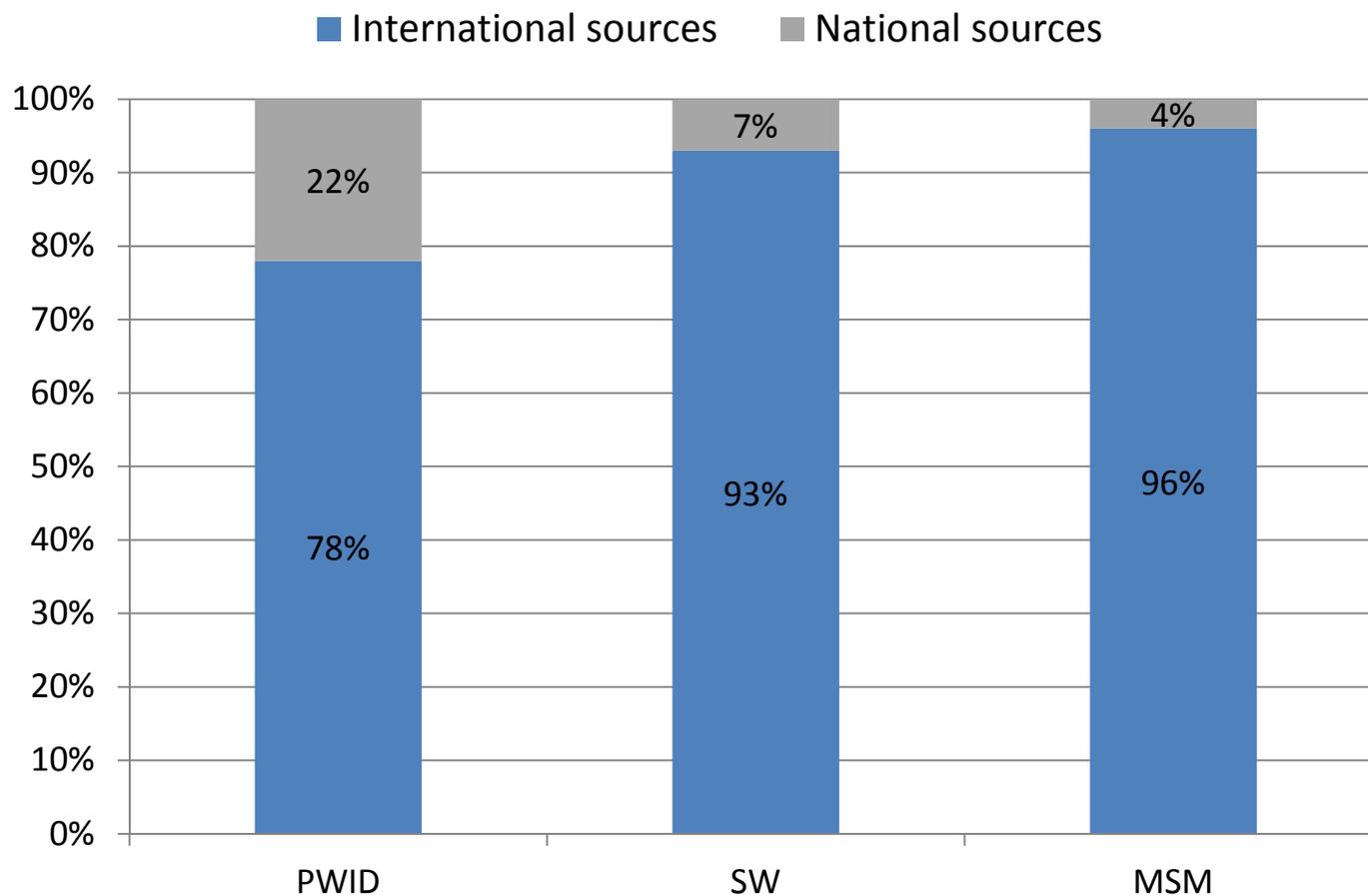
Контрастирующие траектории уровня распространения ВИЧ в России, Бразилии, Индии и Украине



Non-governmental sector

- Remarkable examples of strongly engaged individuals and activists throughout the region
- No structured and recognized civil society in most countries of EECA
- No mechanisms to contractually engage the non-governmental sector into an effective and meaningful partnership for health

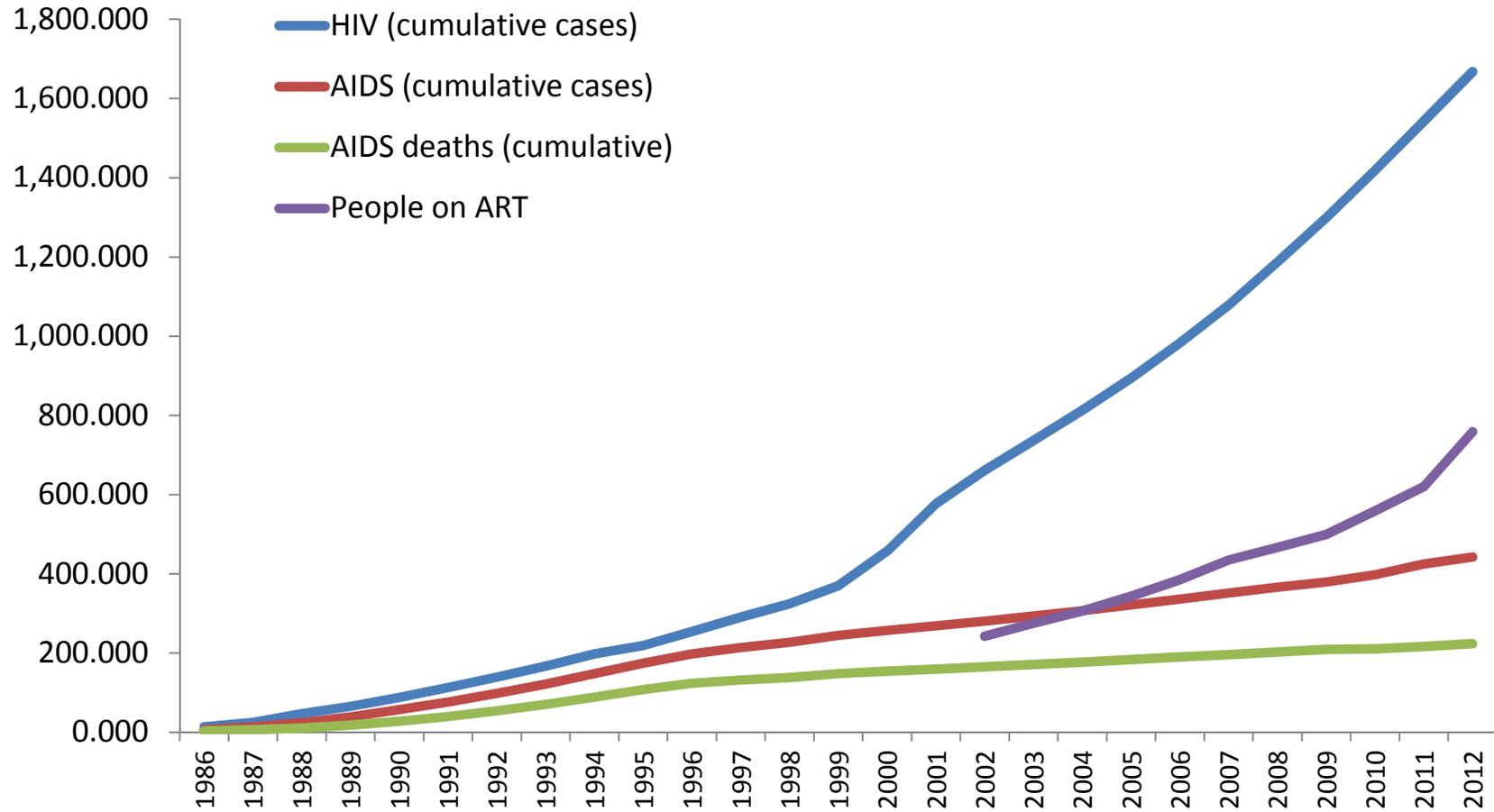
Percentage of HIV programme spending on key populations from international funding sources



Only 11% of total investment in HIV prevention is focused on key populations in EECA.

National funding for HIV treatment is increasing.

Treatment increasing but slower than the growth of the HIV epidemic



A rapidly changing international and regional context

- Increasing trend for change from a “global” to a “regional” AIDS response
- Ukraine, Georgia, Moldova have signed association agreements with the EU
- Complexity of geopolitics in Central Asia
- Strong assertion of the Russian Federation’s position in the region and internationally

Geopolitics, initiatives and policies of relevance to the EECA region

- Discontinuation of OST in Crimea
- Ukraine confronting major economic challenges and conflict
- Low access to OST and NSP; high rates of incarceration in most countries in Central Asia
- Legislation targeting LGBT being proposed or introduced throughout the region

Health is politics: Improving access to prevention and treatment in EECA

- Acknowledge the key populations at risk and the many limitations of current approaches
- Scale up access to testing among key populations at risk
- Scale up prevention of HIV and hepatitis among vulnerable groups, including scaling up harm reduction interventions for people who inject drugs
- Establish ways for the public health sector of working with/ and funding the civil society
- Intensify access to treatment; create the conditions and safe environments for access to ART of vulnerable populations
- Reform access to prevention and treatment in prison settings
- Move to reforms; amend laws and policies that hinder access to care and that fuel stigma and discrimination; prioritize health in drug policies
- Plan for appropriate and sustainable funding for the AIDS and Hepatitis response

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Testing and counseling in Liviv, Ukraine (Natalia Kravchenko, UNAIDS Alliance 2013)

