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Civil society urges increase in domestic spending on HIV across Eastern Europe and Central Asia

A Georgia-based NGO has launched an online petition it hopes will attract regional support for a greater push by governments to fill the anticipated vacuum that will be left once the Global Fund no longer commits significant financial support to a majority of EECA countries.

The regional initiative spearheaded by the Georgia Union of People Living with HIV “Real People, Real Vision” group will also include advocacy targeting governments in Armenia, Azerbaijan, Belarus, Moldova, The Russian Federation and Ukraine. The campaign, ‘Health can be purchased, put the price in the budget’ seeks to ensure that government provides stable, quality and free treatment for all people living with HIV.

EECA remains the only region where generalized HIV prevalence is rising, according to a 2012 report from UNAIDS. However, because of a shift in the Global Fund’s approach towards high impact, low income countries, many of the states in the region that are classified by the World Bank as middle-income may see a precipitous drop in the amount of financial support they get from the Fund, from 2015. And while governments have committed to provide funding for treatment and care programming, it is prevention and harm reduction activities, specifically targeting key populations, that are especially vulnerable.

The Georgia-led campaign has emphasized a number of potential challenges that may occur during the transition period, even before states are ready to take financial responsibility for all of the services and programmes currently supported by the Global Fund.

Critical attention must be paid to procurement, the group said, as Georgian legislation is narrowly tailored

in order to restrict what sort of drugs are allowed in the country. Currently, state funds may only be used to purchase officially registered medicines; however, because Georgia has enrolled in the Fund's voluntary pooled procurement (VPP) mechanism, anti-retroviral drugs are being allowed in the country as humanitarian aid and without the need for local registration.

This has brought prices for anti-retroviral drugs down considerably, allowing greater numbers of the estimated 1,730 people living with HIV in Georgia – according to data generated by the National AIDS Centre in 2013 – to begin ARV treatment. Real People, Real Vision is urging a change in legislation from parliament in order to make registration more flexible and simplify the tendering process: a move that would bring Georgia in line with many other countries in the region.

Other components of the group's advocacy campaign include promoting a new working group on HIV as the credible leader in helping Georgia transition out of Global Fund financing into full domestic support for HIV prevention, treatment and care as a model for other countries in the region. A treatment support working group has been convened under the parliamentary committee on health and social affairs, to bring stakeholders and decision makers in HIV/AIDS together to plot the transition from Global Fund to state funding of ARV treatment in Georgia. There is not, however, currently any plan in place to finance or develop programming that targets high-risk groups for prevention activities after 2016.

"It is a critical moment for us to consolidate the approach by community representatives and governmental institutions to meet the challenge of transition and ensure fundamental right of every person—access to the continues vital lifelong treatment," Giorgi Soselia, a spokesman for the East Europe Central Asia Union of People Living with HIV –ECUO, told Aidspace.

Nearby in Belarus, a similar advocacy campaign is in its infancy in the wake of mounting concern that the epidemic in that country is expanding unfettered. As in Georgia, there are concerns about state funds being used to support HIV-related prevention programming for injected drug users, sex workers and men who have sex with men: three key populations that receive considerable targeted support through grants from the Global Fund.

Civil society organizations have requested urgent changes in approach and policy in order to ensure sustainability of HIV prevention work in the country. While popular opinion and state policy in Belarus is lining up against him, the chairman of "BelNet AntiAIDS" – a network of HIV service NGOs– Oleg Eryomin has expressed confidence that the science linking prevention activities to reduced risks of infection will help change people's minds.

His group has launched a campaign to incorporate all Global Fund-supported services for HIV prevention into the state budget from 2015, but the dialogue with government is not easy: Eryomin says that it might be possible to benefit from a state social demand programme that is to support local NGOs, but in reality there are many legal and policy barriers for NGOs to benefit from the state support unless some policy changes are not implemented.

Other potential sources of revenue to fill the gap that will be left by the Global Fund's investment in Belarus include other donors, who have made unofficial commitments worth about 15% of the current Fund expenditures.

According to Eryomin, the state has committed to cover treatment costs and even support production of ART medicines in the country, but funds for prevention remain under negotiation.

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