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Government of Azerbaijan Increases Funding for HIV, TB and Malaria As Several Donors Pull Out

The Government of Azerbaijan has stepped up its funding for HIV, TB and malaria as a result of the departure or anticipated departure of several donors. The government has started funding opiate substitution therapy (OST) and has begun procuring antiretroviral drugs (ARVs), sufficient to meet 20% of the national need. The government has also increased its funding for anti-TB medicines, laboratory reagents and medicines for opportunistic infections.

These are some of the findings of a diagnostic review of four Global Fund grants to Azerbaijan conducted by the Office of the Inspector General (OIG).

According to the OIG, the Open Society Institute is no longer funding programmes in Azerbaijan. Other donors expected to leave the country in 2013 include USAID and the World Bank.

The Ministry of Health (MOH) is the principal recipient (PR) for three of the grants covered by the diagnostic review: Round 9 HIV, Round 7 TB and Round 7 malaria. The Ministry of Justice is PR for a Round 9 TB grant that focuses on the penitentiary sector.

The total value of the four grants was \$44 million, of which \$41 million had been disbursed at the time of the review. Field work for the review was conducted between 26 September and 24 October 2012.

A diagnostic review is different from a country audit in that no overall opinions are provided and no assurance is given regarding how grant funds were spent.

The review revealed a mix of good practices and weaknesses or risks that needed to be addressed.

Good practices

The OIG noted that Azerbaijan has implemented innovative strategies for harm reduction in its HIV programme. Examples include the provision of OST and the use of mobile laboratories for HIV testing for most at risk populations (MARPs).

The OIG said that TB patients were being routinely tested for multiple and extensively drug-resistant TB (M/XDR-TB) and that directly-observed treatment (DOTS) was conducted among M/XDR-TB patients.

The OIG said that Azerbaijan has a comprehensive TB control programme in prisons with a strong DOTS component and active screening, solid infection control and segregation of patients, no waiting list for M/XDR-TB patients, and routine follow up of released TB-affected prisoners through an NGO.

The diagnostic review found that Azerbaijan is moving towards malaria elimination and has a sound malaria policy and strong implementation of its malaria programme. The OIG noted that operational research studies were used to help guide programme implementation.

Weaknesses and risks

Despite additional funding from the Government of Azerbaijan, the OIG said that the departure of donors other than the Global Fund threatens the long-term sustainability of HIV, TB and malaria programmes.

The diagnostic review found a gap in the provision of treatment for multi-drug-resistant TB and M/XDR-TB in the general population.

The OIG identified a significant unmet need for OST among injection drug users. The OIG noted that two OST sites in Baku, the capital city, were serving 140 clients whereas there are an estimated 71,000 injection drug users in Azerbaijan.

The OIG said that, in general, more harm reduction programmes are needed in Azerbaijan, including needle exchange in prisons.

Other weaknesses and risks identified by the OIG included the following:

- Some national disease strategies have not been updated in line with current World Health Organization standards.
- Civil society organisations were not involved in the social support and follow-up of TB patients in the general population.
- Not all co-infected patients received the treatment they required. For example, in the prison TB hospital, only half of co-infected M/XDR-TB patients received ARVs.

Recommendations and actions

The OIG's report advanced 10 recommendations to address the weaknesses and risks identified. The OIG revealed that the relevant stakeholders have agreed to implement a number of actions, including the following:

- develop financial sustainability plans for HIV and TB programmes;
- update the national disease strategies, protocols and guidelines in line with WHO standards; and
- prioritise the implementation of harm reduction interventions such as OST.

In response to some other findings in its report regarding procurement and supply chain management, the OIG said that stakeholders have agreed to harmonise procurement practices in the three grants managed by the MOH, to attempt to secure lower prices for reagents by enhancing competition, and to implement a quality assurance system for pharmaceuticals and health products.

The OIG's report on its diagnostic review of grants to Azerbaijan is available on the Global Fund website [here](#).

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