



**The Ministry of Health  
of the Republic of Kazakhstan  
Republican AIDS Center**



# **Problems & Perspectives of Coordination on Responses to HIV-Infection Epidemic at the National Level in Kazakhstan**

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# **Responses to HIV-infection epidemic are built up on the base of the legislative acts of the Republic of Kazakhstan:**

- Strategy “Kazakhstan – 2030”;
- KZ Code on “Health of the Public and Health Care System”;
- MOH strategic plan for 2009-2011 in the frame of which Memorandum has been signed between the Prime-Minister and the Ministry of Health of the Republic of Kazakhstan.

**Normative and legal acts  
of the Republic of Kazakhstan are coordinated  
by Three-One principles**

(Resolution of Consultations on harmonization of  
international financing to fight AIDS, April 2004)

# Three-One Principles

- **Unified coordinated HIV/AIDS frameworks ensuring the base for coordination of all partners actions;**
- **Unified national AIDS coordinating agency with broad inter-sectoral authorities;**
- **Unified coordinated national monitoring and evaluation system.**

# **1. Unified coordinated HIV/AIDS frameworks ensuring the base for coordination of of all partners actions**

- The KZ Government approved AIDS Epidemic Counteraction Program for 2006-2010 which is the base for coordination of all partners actions;
- The Program is implemented in 12 key directions on which interaction of the government, civil sector and international donors is realized;
- Within AIDS Epidemic Counteraction Program for 2006-2010 3 inter-agency programs (MOD, MIA, MOJ), MES action plan and regional (oblast) programs have been developed.

# Partners

- Governmental organizations (health care sector and agencies)
- International organizations – UN agencies, AFEW, PSI, USAID, CDC, CAAP, GFATM, Soros-Foundation-Kyrgyzstan etc;
- AIDS Service Non-Governmental organizations (93)
- Private sector

## **2. Unified national AIDS coordinating agency**

**Program activities coordination is realized by:**

- National Coordination Council on health protection under the Government of the Republic of Kazakhstan;
- Country Coordination Committee to operate with GFATM;

**National Coordination Council on health protection under the Government of the Republic of Kazakhstan**

**Chairperson** – The Minister of Health of the Republic of Kazakhstan

**One of the functions of National Coordination Council is** to ensure performance of activities provided by AIDS Epidemic Counteraction Program for 2006-2010 and inter-sectoral relationship

# **Country Coordination Committee to operate with GFATM (CCC)**

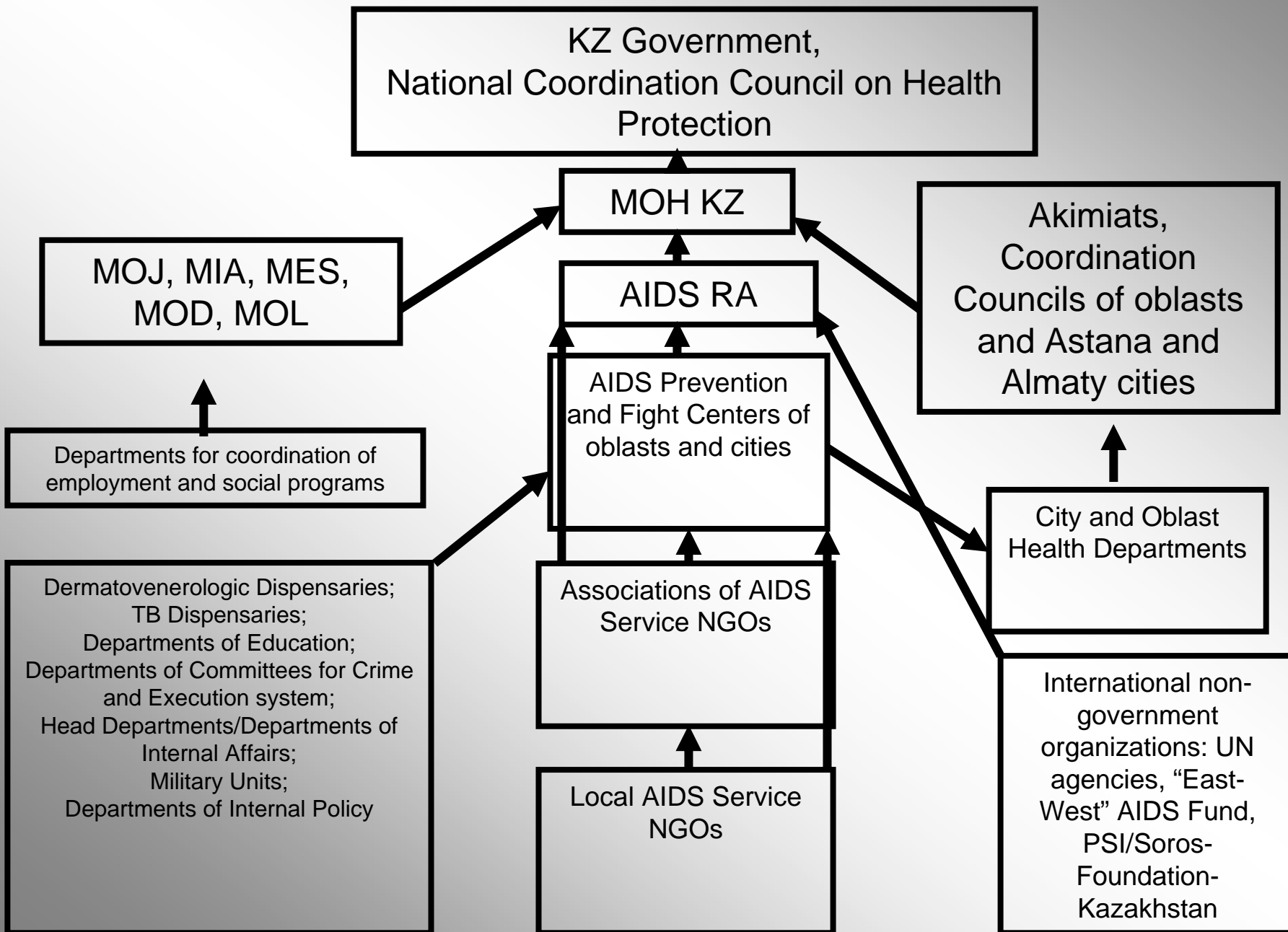
## **CCC Key functions:**

- **Development and approval of country proposals to GFATM**
- **Selection of key recipients on country proposals realization**
- **Coordination and control over recipients actions in the program and financial activity**

### **3. Unified coordinated national monitoring and evaluation system**

- National M&E system is realized at the republican and local levels ensuring information collection, its analysis and evaluation of HIV and AIDS epidemic counteraction activities in the country;
- Situation analysis is submitted to the KZ Government biannually, health management bodies on site, to international organizations and is allocated in AIDS RA web-site;
- Data collection mechanism and order has been developed and approved by the MOH KZ order #591 dated November 23, 2005 coordinated with six ministries.

# Information collection scheme



# Problems

- Non-compliance of some NGOs regulating HIV and AIDS epidemic counteraction to KZ new Code on “Health of the people and health care system” as well as the existing situation;
- Non-compliance of the existing Regulation and organizational structure of CCC to international activity practice with donors.

# Problems

- Improper activity of certain agencies on implementing own programs related to HIV and AIDS epidemic counteraction (MOD, MOJ, MIA).\*
- Absence of national integrated information and management system of AIDS service;
- Absence of domestic science school on HIV and AIDS. Scientific activity is of accidental nature despite the fact that human resources capacity to organize this activity is available in the country.

# Problems

- Absence of specialized clinical base on AIDS patients treatment, development and implementation of health standards, physician and nursing staff training;
- Non-organization of systematic training of specialists to new technologies in the field of:
  - HIV-infection epidemiological surveillance;
  - Diagnostics and treatment of opportunistic and HIV-associated diseases;
  - PZR-diagnostics for control over ARVT effectiveness ;

# Problems

- Absence of mechanism that would ensure receipt of information related to international organizations and NGOs activities necessary for evaluation of effectiveness of measures conducted at the national level.
- Poor focus on:
  - activity of the civil sector with PLWH on adherence, with MSM – on ensuring access to population, in the penitentiary system – on prevention programs and social support;
  - PLWH involvement into prevention as a unique resource on counseling and support to other people living with HIV;
  - Target groups located in the penitentiary risk area: youth, co-dependent.

# Problems

- Insufficient financing in terms of crisis, justified with:
  - inflation;
  - Increase of number of PLWH needing treatment;\*
  - High cost of drugs of second generation.

*Estimated deficit of funds necessary for ARVT drugs purchasing in 2010 due to the above indicated reasons will be 109 mln. KZ Tenge.*

# Perspectives

- Adjustment of NPA to new Code and real situation:
  - improvement of the structure and functions of AIDS service subjects, their staff number;
  - ensuring of sustainability of the existing prevention programs;
  - creation and approval of health standards developed on the base of WHO recommendations;
- Development of new national HIV-infection epidemic counteraction program for 2011-2015.

# Perspectives

- Adjustment of CCC Regulations to international practice norms and approval of its authorities as unified HIV and AIDS country agency for coordination of activity with international organizations;
- Establishment of M&E National Center aiming to ensure validity and improvement of collected data quality, their analysis and use for all partner organizations activities coordination;
- Establishment of national integrated information and management system of AIDS service available for all partners;
- Strengthening of activities of NGOs operating with risk groups: IDU, MSM, prisoners and migrants and PLWH.

# Perspectives

Attraction of donors for:

- Technical assistance to programs and projects;
- Operation with target groups;
- Creation of clinical base,
- MST expansion;
- Development of domestic science and information technologies;
- Training of specialists.

Summarizing the presentation, I would like to express my hope to continue the joint activity on the above indicated directions.

**Thank you for your attention!**

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