

# Kazakhstan HIV

## 1 GENERAL INFORMATION



Portfolio categorization:	Focused
Window for application:	HIV - Wave 2
GF Investment to date	HIV - US\$61,641,987 <sup>1</sup>
Income classification:	Upper middle-income country <sup>2</sup>
Application modality:	Tailored for Focused Portfolios
Allocation amount:	HIV - US\$5,197,500
Disease burden:	High
GDP per capita:	USD 9,966 <sup>3</sup>
Population:	18.2 million <sup>4</sup>
Eligibility:	HIV – eligible; TB - eligible

## 2 KEY MESSAGES – Improvements and Opportunities

(see section 5. for details)

**Overall message:** With over 90% of the national HIV program funded domestically, the Global Fund investments should be directed towards **covering remaining critical gaps and catalytic social enablers with the goal of reaching 95-95-95 global targets.** The Country Dialogue should clearly prioritize interventions for Global Fund support based on epidemiological considerations, national strategic documentation, and synergies with other funding available both domestically and internationally. It should consider allocative and technical efficiency analysis available to date and aim to strengthen the overall country transition preparedness projected in 2026-2028.

The information below serves as guidance to be used during Country Dialogue in formulating the Global Fund Funding request. Per Global Fund requirements, 100% of allocation should focus on interventions that maintain or scale-up evidence-based interventions for key and vulnerable populations. **The HIV program evaluation**, which will be conducted in Q1, 2020, and **the Roadmap for developing public financing mechanisms for CSO provided health services**, which will be available in January 2020, **should also contribute to defining the areas to be funded.**

<p>HIV</p>	<p>Introducing/scaling up the new HIV testing modalities adopted/tailored to reach members of key populations (index testing, self-testing, assisted partner notification).                  Introduction and scale up of PrEP for all people under the risk of acquiring HIV.                  Further strengthening Viral Load testing services, including unification of Viral Load testing technologies used in country, ensuring proper external quality assurance – interventions to be developed on the base of national strategic documents.                  Further strengthening of Differentiated Service Delivery models focused on key populations in ART provision.                  Addressing stigma and discrimination and other human rights-related barriers to support increased uptake and retention of key populations throughout the cascade.</p>
<p>RSSH</p>	<p>Strengthening country health management information system with a focus on key populations.                  Strengthening community systems, including community-led service delivery and community-based monitoring of availability, accessibility, acceptability and quality of health services.</p>

<sup>1</sup> <https://data.theglobalfund.org/investments/components/KAZ>

<sup>2</sup> Determined from gross national income (GNI) per capita using the World Bank income group thresholds for 2019.

<sup>3</sup> <https://www.worldbank.org/en/country/kazakhstan/overview>

<sup>4</sup> <https://www.worldbank.org/en/country/kazakhstan/overview>

# PORTFOLIO ANALYSIS

## 3 Key epidemiological data and analysis

In 2018, Kazakhstan had estimated **2600** new HIV infections and estimated **<500** AIDS-related deaths. There were **27 000** people living with HIV in 2018, among whom 58% were accessing antiretroviral therapy. Among pregnant women living with HIV, >95% were accessing treatment or prophylaxis to prevent transmission of HIV to their children.

Percent change in new HIV infections since 2010: **35%** ↗

Percent change in AIDS-related deaths since 2010: **56%** ↗

HIV prevalence among SWs: **1.9%**

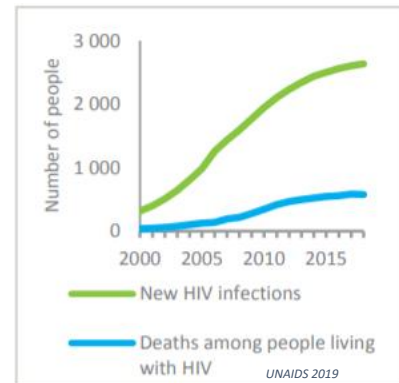
HIV prevalence among MSM: **6.2%**

HIV prevalence among PWID: **7.9%**

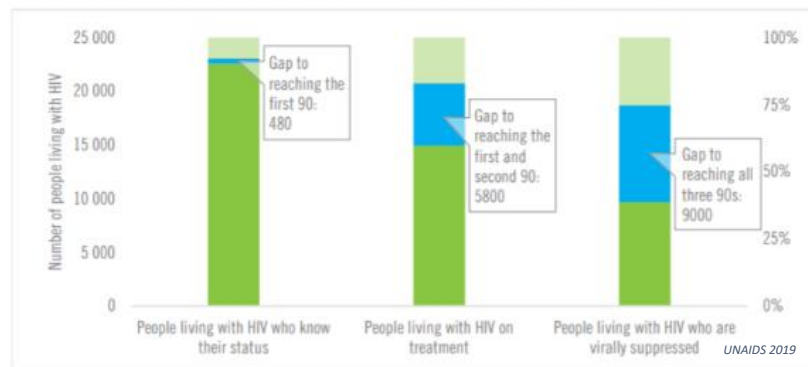
Based on HIV testing and Treatment Cascade, 88% of estimated people living with HIV were diagnosed and 58% were put on ART, 38% were virally suppressed.

Kazakhstan is the only country in Eastern Europe and Central Asia reaching closest (88%) 90% target of detecting estimated people living with HIV.

The government has incorporated the Fast Track approach into its national HIV plan and in 2018 moved to a test and treat approach. A national plan for the elimination of mother-to-child transmission of HIV has been developed and put into practice.



## HIV TESTING AND TREATMENT CASCADE



## 4 Country Financing

In the recent years, Kazakhstan government investments in health overall, and HIV and TB programs response specifically, have increased in nominal terms, despite significant currency depreciation and large external pressures on national economy, particularly on account of sharp decline in oil prices. Kazakhstan is on track for meeting its co-financing financial and programmatic commitments undertaken under the agreement with the Global Fund. During this allocation period, the government continued its gradual uptake of key HIV program activities and is expected to meet over 94% of the program need from domestic resources.

The next implementation cycle proposed interventions should converge towards and build on the below priorities:

- **Continue to improve allocative efficiency** towards maximizing HIV program outcomes and with the vision of reaching the 95-95-95 targets. In 2019, Kazakhstan updated the Optima analysis<sup>5</sup> highlighting the need for further investments in scaling up of antiretroviral treatment (ART) on account of deprioritized funding for general population HIV prevention program, along with scaling up investments for HIV testing and prevention programs targeting men who have sex with men and needle-syringe programs for people who inject drugs.
- **The ongoing health reform** aimed at the establishment of mandatory social health insurance is an opportunity to further institutionalize and integrate HIV service provision in the overall health system. Leverage Global Fund funding to consolidate these efforts towards improved patient outcomes.
- **Ensure institutionalization of mechanisms for procurement of essential health products for HIV program delivery.** In particular, Kazakhstan should safeguard the current opportunity to access international procurement platforms (such as UNICEF for ARVs), by ensuring these are further simplified and embedded into the national regulations and procedures and not treated as 'exceptional' measures.

<sup>5</sup> <http://optimamodel.com/hiv/>

# PORTFOLIO ANALYSIS

- **Focus on setting up and strengthening of a more sustainable mechanism(s) for public financing of health services delivered by CSOs** (including HIV and TB). The national social contracting mechanism have gaps in terms of ensuring *uninterrupted* service provision, adequate costing, *predictable* and secure financing. Global Fund grant funding can be leveraged to set up and improve a more *comprehensive approach*, whereby CSO provided health services can be funded based on the type of service, on a defined minimal and expanded service package, etc. The ongoing assessment in this area, to result in a national Roadmap, should help shape the direction of national efforts and upcoming Funding Request.

## 5 Progress to date

### HIV Program

Key area / priority	Successes	Challenges	Opportunities
HIV testing and diagnosis	The volume of HIV testing is increasing annually in the country; in 2018, approximately 3 million tests were conducted.	Testing among key populations requires further scale up.	Introduce new testing modalities adopted/tailored to reach members of key populations (index testing, self-testing, assisted partner notification). The testing strategy should adequately address the needs of hard-to-reach members of key populations that face barriers in accessing facility-based testing services.
HIV prevention	Country made significant progress in scale up of coverage of prevention services for key populations during recent years.	The coverage of comprehensive prevention services for KPs requires further scale up, particularly among MSM (5% systematic coverage out of estimated size of population in 2018).	Further scale up of comprehensive prevention services coverage, particularly focusing on MSM population. Addressing stigma, discrimination and other human rights-related barriers to prevention. Introduction and scale up of PrEP for all people under the risk of acquiring HIV.
HIV treatment	Kazakhstan made a significant progress by scaling up treatment coverage, adopting recent recommendations of the WHO for HIV treatment.	The insufficient level of Differentiated Service Delivery models that offer a mix of interventions at both facility and community level for members of key populations. Further improvement of National Laboratory service for Viral Load testing.	Further strengthening and scale up of differentiated approaches addressing age, sex and needs of prioritized key populations and integrating focus on reduction of stigma and discrimination. Further strengthen Viral Load testing services, including unification of Viral Load testing technologies used in country, ensuring proper external quality assurance.

## 6 Annexes & References

1. Aids Info Global HIV Database accessed on December 2019.
2. Kazakhstan UNAIDS country progress report 2019.
3. UNAIDS 2019 data report.