

International charitable organization
"East Europe and Central Asia Union of people Living with HIV"

Minutes Regional meeting on access to ARVtreatment in Eastern Europe and Central Asia region (EECA)

March 5-6 Kyiv, Ukraine



web: www.ecuo.org

Participants

26 representatives of international organisations, government officials and civil society representatives attended the Regional meeting. List of Participants – see Annex 1.

Agenda

- A. Session 1: welcome speech and introduction of participants
- B. Session 2: situation with HIV treatment in EECA region

PRESENTATIONS:

- a) Jean-Elie Malkin, UNAIDS Regional Support Team for Europe and Central Asia, «Everyone gets treatment»
- b) Irina Eramova, WHO, «ART: situation overview in EECA countries»
- c) Nicolas Cantau, GF, «Support of the GF in ensuring ART in EECA possibilities and challenges»
- d) Jean-Elie Malkin, UNAIDS, «Analysis of the main obstacles towards scaling up access to ART in the region and UNAIDS strategies for its solutions»

DISCUSSIONS:

The following issues were discussed:

- Role of UNAIDS in securing access to ART in the region; on the consent of UNAIDS regional office to act as fiduciary agency for implementation of the regional grant in the field of prevention and supervision of HIV/AIDS at the territory of Eastern Europe and Central Asia countries in 2013-2015.
- Difficulties with identifying the number of HIV+ people, who need ART, difference in WHO and UNAIDS data, new criteria for ARV treatment initiation.
- Sustainability of ARV treatment programmes after the GF withdrawal and role of the GF in this process (registration of ARV medicines, plan for transition of patients, who take ART from the GF programmes into the state funding programmes, etc).

DESICIONS/SUGGESTIONS:

In the process of the discussion, the following suggestions were voiced:

- Involvement of PLWH community representatives into development of documents
 affecting scaling up access to ARV treatment in EECA countries; setting up
 exchange of strategic information about key actions and events re access to ART in
 EECA region; WHO and UNAIDS: to be more clear and precise about their
 messages (for example, data on the total number of PLWH, on the number of
 PLWH, who need ARV treatment, etc);
- GF: to pay attention to sustainability of HIV treatment programmes within framework of implementation of existing GF rounds (for example, to offer countries to implement a gradual plan of patients transition from the GF programme to state programme that would also allow to increase PLWH coverage, who take ART;

- CO: it's important to keep the issue of ARV treatment programmes' sustainability after the GF withdrawal high on the agenda using CCM possibilities;
- As patient community, ECUO does not have relevant tools and techniques to
 identify the exact number of people, who need ART. Therefore, ECUO will rely on
 WHO and UNAIDS data and asks these organisations to assist with official data on
 the needs of countries in treatment.

C. Session 3: Situation with treatment in ECUO region (continued)

PRESENTATIONS:

- a) Renate Utshmidt, European Union, «EU actions for HIV prevention, treatment and care in Eastern partnership countries»
- b) Ruslan Malyuta, UNICEF, «Success of PMTCT programmes important elements of universal access to treatment in CIS»
- c) Gregory Vergus, ITPCru, «Role of ITPCru in EECA region»
- d) Boyan Konstantinov, UNDP, «Political issues: scaling up access to quality treatment using registration and TRIPS flexibilities»

DISCUSSION:

The following issues were discussed:

Using TRIPS flexibilities as a mechanism of influence to decrease ARV medicines prices and scale up access to treatment in EECA region.

DESICIONS/SUGGESTIONS:

- It's important that legislative framework in the country allowed usage of TRIPS flexibilities that could assist in meaningful negotiation process with pharmaceutical companies to decrease prices for medicines as it happens, for instance, in Ukraine.
- It's important to develop mechanisms for pharmaceutical companies' motivation to register ARV medicines in the countries with small markets (for instance, experience of Armenia, where additions to current legislation has been made that allow pharmaceutical companies to register ARV medicines that went through prequalification by WHO done under the simplified procedure and reduced price).
- ARV medicines that are recommended by guiding principles of WHO should be registered, including those that went through WHO prequalification (for generics).

D. Session 4: ECUO approach – regional strategy

PRESENTATIONS:

a) Natalya Leonchuk, ECUO, presentation of the Regional advocacy strategy.

DISCUSSION:

- Comments re ECUO strategy: it's important to get across messages of the regional strategy to decision makers at the highest level.
- Review a possibility to change wording of interim result by 2015 100% securing of ART for all who need it, by 2020 100% at state budget cost.
- Review an indicator that defines effectiveness of ARV treatment the number and % of HIV-infected adults and children, who continue to receive antiretroviral treatment 12 months after its initiation.
- Take into account an indicator on testing and sequence "testing-treatment-forming adherence".

Cooperation of CS with countries' government to attract external financial resources to state funding to scale up coverage of PLWH, who take ART.

DESICION/SUGGESTIONS:

- As a framework document, the strategy reflects the main priorities of the regional international organisations on access to treatment.
- ECUO accepts all existing challenges related to ART access (testing, counseling, adherence to ART, etc) and does not suggest refusal from external funding.
- But along with that, it's important to have a secure provision of ARV treatment by state for HIV-positive people, which guarantees sustainability of treatment programmes. Donors cannot guarantee lifelong treatment provision, this is responsibility of state. Therefore, ECUO as a regional organisation is focused on achievement of this goal and ECUO member-states are tackling with issues of testing and shaping adherence to ART at country level. Experience of Russia and Ukraine shows that a lot of problems arise with securing procurement and supply process when state takes this responsibility. Therefore, it's especially important to secure gradual transition of patients taking ART to the state programme to ensure sustainable and uninterrupted ARV treatment.
- ECUO will take into account comments it received during implementation of the strategy.

E. Session 5: Implementation of the strategy and its promotion together with its partners and stakeholders

PRESENTATIONS:

a) George Mataradze, Establishment of the Regional Advisory Group (RAG) for technical consultations of the regional PLWH community to improve effectiveness of the regional advocacy strategy implementation.

DISCUSSION:

The following issues were discussed:

- RAG role not only from the technical/expert assistance point of view but also as a political support to society at regional and national platforms.
- Terms of reference for RAG with few indicators and more specific goals for the work.
- Inclusion of state authorities to RAG on a regular basis or through invitation depending on the nature of necessary consultation/ expertise.

DESICIONS/SUGGESTIONS

- To establish RAG on scaling up sustainable access to ARV treatment in EECA countries that would join efforts of key regional players in the field of access to ART, provide technical and expert assistance in implementation of ECUO Strategy and raise questions of access to ART at the highest political level.
- Revise terms of reference for RAG to reflect its political weight, along with technical/consultancy functions.
- UNAIDS is ready to support implementation of the ECUO Regional Strategy; to provide technical assistance for achievement of universal access in the region.
- Number of international organisations, such as: International HIV/AIDS Alliance, EHRN, UNDP, UNAIDS, UNICEF, ITPCru voiced their willingness to take part in the work of RAG.

F. Session 6: Review of the situation in EECA region

PRESENTATIONS:

- a) Tatyana Alexandrina, State Service of Ukraine to countering HIV/AIDS and other Socially Dangerous Diseases, «Prospects of the state in securing access to treatment. Main problems and their solutions».
- b) Marina Tiroyan, Ministry of Health of the Republic of Armenia, presentation of the situation with treatment in Armenia.
- c) Sayrankul Kasymbekova, the Republican AIDS Centre, Kazakhstan, «Prospects
 of governments in access to treatment main difficulties and possibilities of the
 Ministries of Health in countries through the example of the Republic of
 Kazakhstan»

DISCUSSION:

The following issues were discussed:

• Main task of RAG – securing sustainability of treatment programmes in the long run. By 2018 Ukraine can become a leader in this region. If we can foresee

strengthening of the wider coverage in the long run, it would benefit our advocacy initiative; getting help of the GF in support of advocacy activities of communities in the countries.

- Inclusion of the World Bank into the RAG as a player that influences the situation with HIV/AIDS in the region;
- Creating the list of main regional and international events to voice key advocacy messages of the community in the region and to raise an issue of ARV access in EECA countries.
- Possibilities of RAG composition identification depending on the issue, subject matter or event.

DESICIONS/SUGGESTIONS

- UNAIDS voiced its readiness to support the community of countries in negotiations with pharmaceutical companies and governments on scaling up access to treatment.
- Request should be sent to all participants of this meeting to identify key events for 2013 that could be used as a platform for regional PLWH community to deliver key messages of access to treatment in the region.

Next steps:

Activity	Responsible	Deadlines
Review terms of reference for RAG operation and approve list of participants	ECUO Secretariat	April 2013
Organise the next meeting of RAG	ECUO Secretariat	November 2013
Organize RAG work via message list	ECUO Secretariat	April-November 2013
Identify the list of main regional events as platforms that could be used to deliver messages of CS for 2013	ECUO Secretariat, RAG members	May 2013

Annex 1

List of Participants

#	Organisation/Country	Name	E-mail	Position	
1.	ITPCru	Gregory Vergus	gregory.vergus@itpcru.org	Regional Coordinator for EECA	
2.	EHRN	Sergey Votyagov	sergey@harm-reduction.org	Dn.org Executive Director	
3.	International HIV/Alliance in Ukraine	Gennady Roshchupkin	roshchupkin@aidsalliance.org.ua	Technical coordinator	
4.	Global Fund	Nicolas Cantau	nicolas.cantau@theglobalfund.org	Regional Manager, EE&CA	
5.	UNDP Europe and the CIS	Dr. Christoph Hamelmann	christoph.hamelmann@undp.org	Regional Practice Leader HIV, Health and Development, UNDP Europe and the CIS, Bratislava Regional Centre	
6.	UNDP Europe and the CIS	Boyan Konstantinov	boyan.konstantinov@undp.org	Programme Specialist	
7.	UNICEF	Ruslan Malyuta	rmalyuta@unicef.org	Program Officer HIV/AIDS UNICEF Regional Office for CEE/CIS	
8.	WHO Regional Office for Europe	Dr Irina Eramova	ier@euro.who.int	Senior Medical Officer, HIV/AIDS, STIs & Viral Hepatitis Communicable Diseases, Health Security & Environment	
9.	European Union	Renate Utzschmid	renate.utzschmid@ec.europa.eu	Programme manager	
10.	All-Russian Union of PLWH	Vladimir Mayanovskiy	v.mayan@pluscentre.ru	Chairman	
11.	Ukraine	Tatyana Alexandrina	aleksandrina@dssz.gov.ua	Head of State Service of Ukraine to countering HIV/AIDS and other Socially Dangerous Diseases	
12.	Armenia	Marina Tiroian	m.tiroyan@moh.am	HIV/AIDS program coordinator, MoH/Armenia	
13.	Kazakhstan	Sairankul Kasimbekova	lpo.zav@rcaids.kz	Head of clinical monitoring department, Kazakhstan Republican AIDS center	
14.	Kazakhstan	Nurali Amandjolov	nurali70@mail.ru	CA association of PLWH /	

						Kazakhstan Union of PLWH
15.	Ukraine	-	toria noshevska			International Foundation "Vidrodzhennya" Public health ptogramme director
16.	UNAIDS	Jea Mal	n-Elie lkin	malkinj@unaids.org		Director, Regional Support Team for EE&CA
17.	UNAIDS		noela nova	manovam@unaids.org		Regional Investment and Efficiency Advisor
18.	UNAIDS	Jac	ek Tyszko	Tyszko <u>tyszkoj@unaids.org</u>		Country Coordinator Ukraine
19.	UNAIDS / HQ		hard <u>burzynskir@una</u> zynski		@unaids.org	UNAIDS senior advisor
20.	UNAIDS / HQ	Elir Viit	lina <u>viitan</u> iitaniemie		e@unaids.org	Program Officer
21.	UNAIDS / Ukraine	Ole She	na erstiuk	sherstyuko	@unaids.org	Advocacy & Leadership Advisor / Ukraine
22.	ECUO		dimir ovtyak	vladimir@	network.org.ua	Predident
23.	ECUO		alya nchuk	nataliya@e	ecuo.org	Senior Advocacy Advisor
24.	ECUO	Geo Mat	orge taradze	g.mataradze@ecuo.org		Executive Director
25.	ECUO	Tat	yana Khan	tatyana@ecuo.org		Advocacy officer
26.	ECUO	Yuli Ras	ia <u>raskevich@</u> kevich		ecuo.org	Communication officer
		Invi	ted but o	couldn't	attend	
1.	GNP+		Ed Ngoksin		Specialist on vulneRAGle groups	
2.	UNITAID	UNITAID		un	Executive director	
3.	AIDS Healthcare Foundation		Zoya Shah	oarova	Eastern Europe & Central Asia Bureau Chief	
4.	Russian Federation		Dr. Alexar Goliusov	nder	Deputy director, Department of Healthcare and Sanitary- Epidemiological Wellbeing, Ministry of Health, Moskow	
5.	Executive committee CIS countries	ttee of Sergey Lel		bedev	Co-chair	