
**National Strategic Plan to
Reduce Human Rights –
Related Barriers to HIV, TB
and Malaria Services :**

**Kyrgyzstan
2020-2025**

Multi agency plan to overcome legal barriers related to HIV and TB in the Kyrgyz Republic for 2020-2025

Introduction

The program of the Government of the Kyrgyz Republic sight to overcome HIV infection in the Kyrgyz Republic for 2017-2021 (hereinafter - the Program) defines the goal, objectives and main directions of the state policy of the Kyrgyz Republic to prevent the spread of HIV infection. The number of HIV cases continues to grow in the Kyrgyz Republic, the number increased by 25% from 2016 to 2019 years. HIV infection mainly affects people of working age (20-49 years). In recent years, there has been a trend towards an increase in the number of women among people living with HIV, who are 43.5% from the number of newly diagnosed persons. There are 674 registered children under 15 years, living with HIV in the country (7% of PLHIV). The spread of HIV infection occurs predominantly among key populations having increased risk of infection, but in recent years, an increasing number of cases have been identified among people without behavioral risks.

Despite the decrease in the number of incidences of tuberculosis; there is an increase in number of drug-resistant TB. Stigma and discrimination against TB patients prevents the successful completion of treatment, which creates conditions for the further spread of TB. Government Program “Tuberculosis-V” for 2017-2021, which provides medical and social measures to improve adherence to TB treatment. Objectives set by the Programs of the Government of the Kyrgyz Republic on HIV and TB for 2017-2019 still are not implemented. This happens due to the presence of programmatic and regulatory barriers in Kyrgyz Republic. In particular, stigmatization and discrimination against people living with HIV, TB, and representatives of key populations, leads to the loss of patients at the stages of the cascade of services, refusal to participate in prevention, testing and treatment programs. In accordance with the long-term objectives set by the Sustainable Development Goals, the depth and importance of the country's tasks to prevent the generalization of the epidemic, it is necessary to remove barriers for limiting the spread of HIV infection and the number of incidences of TB.

The further spread of HIV infection and tuberculosis will worsen the social situation of households; it will lead to a generalization of epidemics and a significant burden on the country's budget for treatment, care and support programs, i.e. will increase poverty and its attendant consequences in the country. Currently, 67% of HIV control costs and 30% of TB control costs in the country are funded by international donors. Knowing the fact that donor funding decreases every year, the consequences of the epidemics will place a heavy burden on the budget of the Kyrgyz Republic.

In order to timely perform the international obligations of the Kyrgyz Republic in the field of protection of human rights and freedoms on the implementation of the recommendations made by the UN human rights treaty bodies, the Government of the Kyrgyz Republic, by the decree №55-p from 15th of March 2019 year, approved the Action Plan on Human Rights for 2019-2021 years. The decree imposes personal responsibility on the heads of state bodies for quarterly reporting for the high-quality and timely implementation of this Plan. The Coordinating Council for Human Rights under the Government of the Kyrgyz Republic and the Sector for Supporting the Work of the Coordinating Council for Human Rights under the Department of Legal Expertise of the Office of the Government of the Kyrgyz Republic.

1. Analysis and evaluation of the current HIV and tuberculosis epidemic update trends in the Kyrgyz Republic

1.1. Analysis of the HIV situation

On of 1st of December 2019, 9,516 cases of HIV infection were officially registered in the Kyrgyz Republic. Excluding the total number of people who died and people living with HIV who left the Kyrgyz Republic, 6981 or 82% of the estimated number of people living with HIV. This means that 1519 PLHIV do not yet know their status and do not receive treatment. HIV cases were registered in all regions of the country.¹

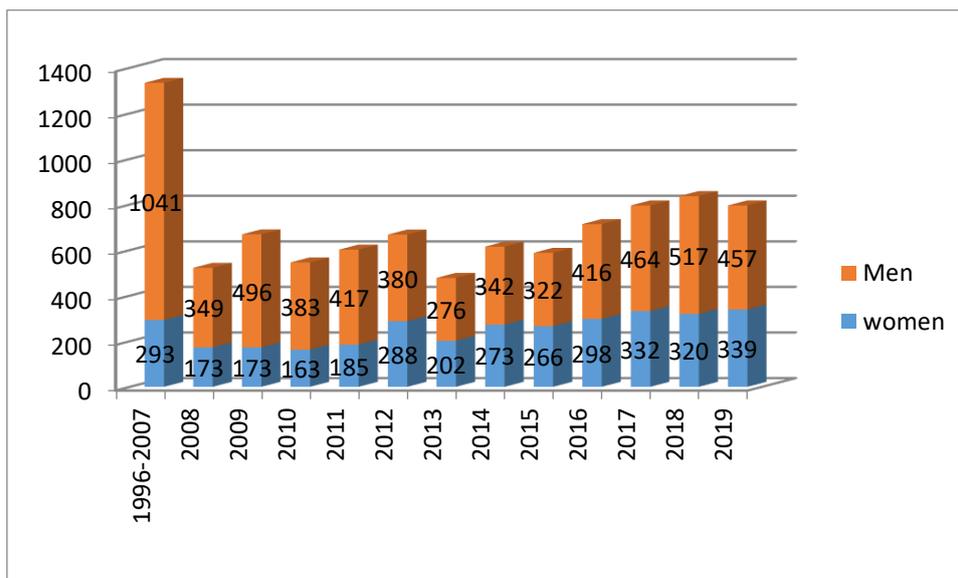


Figure 1. Registration of HIV cases among men and women for the period from 1996 to 11 months. 2019 in the Kyrgyz Republic.

HIV spreads predominantly among men, who make up 65% of the registered PLHIV. However, there is a trend towards an increase in the number of women, which is now for 43.5% of newly diagnosed PLHIV in 2019. Over the entire period of HIV monitoring in the country, 652 children under the age of 15 were registered.

According to estimates, key populations include: 25,000 people who inject drugs (PWID); 7100 - sex workers (hereinafter referred to as SW) and 11692 - men who have sex with men (hereinafter referred to as MSM). Currently, HIV infection is concentrated mainly among these population groups, which requires strengthening prevention programs in these areas.

¹ www.aidcenter.kg

1.2 Analysis of the TB situation

The program of the Government of the Kyrgyz Republic “Tuberculosis V” aims on further reduce of the incidences and mortality from TB. However, despite the undoubted success, the incidences remains high and constitute 85 cases per 100,000 population (Fig. 2). Kyrgyzstan is among 27 countries with a high level of drug resistance (DR).

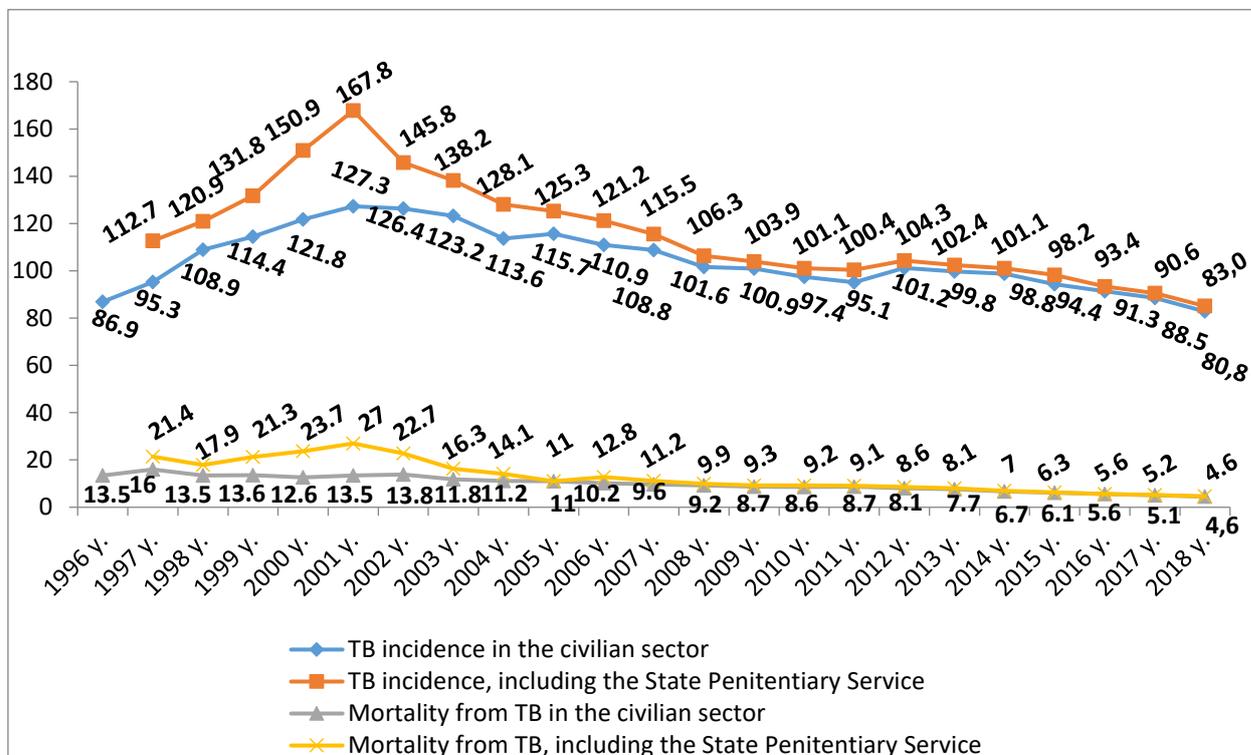


Figure 2. Dynamics of morbidity and mortality from tuberculosis in the Kyrgyz Republic for 1996-2018 years².

Treatment coverage of patients with resistant TB has increased, but treatment success among DR TB remains low. According to data from the Ministry of Health of the Kyrgyz Republic, of those people who started treatment in 2016, only 58% completed it successfully in 2018 (Table 1).

Situation of tuberculosis control in the Kyrgyz Republic for 2012-2018³

	2012 Basic	2018 Actual	2018 Target
Treatment coverage of DR-TB patients	61,2%	90,7%	95%
Treatment success for susceptible TB patients	78,9%	83%	85%
Treatment success in DR-TB patients	42,4% (cohort 2010)	58% (cohort 2016 r.)	75%

² According to data from MH KR, JAR, 2019 y. www.med.kg

³ According to data from MH KR, JAR, 2019 y. www.med.kg

1.3. Activities in the Kyrgyz Republic

The entire range of measures to overcome HIV infection is carried out in the Kyrgyz Republic. Preventive programs organized for key populations; testing, treatment, care and support programs are conducted. However, there are observed facts of late detection of HIV infection (51% of PLHIV were identified in 2019 at advanced stages of the disease with reduced immunity); there are observed a refusal from treatment; because of fear of disclosing the status of PLHIV, people refuse social benefits provided for by the law; people avoid HIV testing. The social disorder of people has a significant impact on this; high level of stigma and discrimination based on HIV status. Pressure on key populations creates significant barriers to accessing HIV prevention, treatment, care and support services.

The country has sufficient medicine and infrastructure to provide care for TB patients. However, as follows from Table 1, treatment coverage and its effectiveness to date do not reach the goals planned by the Government Program.

2. Main barriers for obtaining services

The main barriers were examined in a special study conducted by independent experts commissioned by the Global Fund among service recipients, service providers and law enforcement officials.⁴

- **The legislation of the Kyrgyz Republic** in the field of HIV infection and tuberculosis generally complies with the norms of international law and creates conditions for the implementation of preventive programs. However, the country's national and alternative reports on the implementation of international conventions on human rights and gender equality recorded violations of the legislation of the Kyrgyz Republic. These include the facts of illegal detentions, threats, degrading treatment and violence against sex workers by certain representatives of the internal affairs bodies. This practice, along with new legislative initiatives related to sex workers and MSM, creates obstacles to the implementation of programs to overcome HIV infection among key populations.

In 2019, amendments and additions were made to the law of the Kyrgyz Republic “On protection of the population from tuberculosis” from 18th of May 1998 №65, which include article 17 “Responsibility of persons with tuberculosis”, which provides for compulsory hospitalization of those who avoid treatment of patients with tuberculosis in specially created anti-tuberculosis organizations by court decision. Taking into account the social nature of the disease, no alternative approaches to increase adherence to treatment of TB patients in difficult life situations have been developed. The mechanisms and infrastructure of compulsory hospitalization and financial resources have not yet been determined, which creates risks of possible abuse and violations of patient’s rights during its implementation.

- **Stigma and discrimination** of people living with HIV and tuberculosis through neglect by disclosure of HIV or TB status, and denial of health services are major barriers to

⁴ Baseline assessment – Kyrgyzstan. Scaling up Programs to Reduce Human Rights-Related Barriers to HIV and TB services

accessing HIV and TB services. Refusal of representatives of key groups from testing for HIV and TB; from participation in prevention and treatment programs leads to the continued spread of HIV infection and tuberculosis, late access to treatment, an increase in deaths from AIDS, tuberculosis and HIV/TB co-infection. People living with HIV and tuberculosis sometimes seek medical advice late, when effective treatment is provided too late and cannot prevent the death of the patient. In 2019, 51% of PLHIV were registered in advanced stages of HIV infection. People refuse treatment for themselves and their children for fear of disclosing their HIV status.

The study of the stigma index of PLHIV in Kyrgyzstan, conducted in 2016, shows that most often PLHIV faced discrimination from health workers and from the immediate social environment. Every third PLHIV in the Kyrgyz Republic faced disclosure of information about their HIV status in medical organizations. Stigmatization of key populations by public leaders encourages informal groups and some NGOs to violence with impunity, illegal interference in private life, and physical harassment with non-interference of police officers. Illegal police practices, in the form of harassment, extortion, arbitrary arrest and detention, violence and/or failure to protect against violence, were identified by key populations in the baseline assessment as the main barrier to accessing prevention services and a key issue affecting quality their lives⁵. These facts are included in a number of alternative reports and the Concluding Observations of the Committee on the Elimination of Discrimination against Women on the implementation of CEDAW.

- **Gender inequality and violence**

Despite “equality for all” principle proclaimed by Article 16 of the Constitution of the Kyrgyz Republic, the high level of stigmatization of sex workers and drug users creates legal barriers and allows using illegal actions against them, including unauthorized detention, physical and sexual violence⁶.⁷ Women who use drugs, sex workers and LGBT are groups of women who do not actually have the same opportunities and tools to exercise their rights as all other citizens. Restrictions on rights are encouraged by public opinion, the practices of state structures, in particular law enforcement agencies, medical institutions, as well as certain groups of citizens acting on the basis of religious and/or “traditional values”. In fact, these three groups of women are discriminated against twice - as women who have no equal rights with men and as women deserving blame⁸. High levels of violence create barriers to accessing prevention and treatment services. As a result, there has been an increase in the number of women and the sexual transmission of HIV among newly diagnosed PLHIV.

⁵ Baseline assessment – Kyrgyzstan. Scaling up Programs to Reduce Human Rights-Related Barriers to HIV and TB Services

⁶ Alternative report for 60th session of CEDAW, Geneva 2015 - http://tbinternet.ohchr.org/_layouts/treatybodyexternal/Download.aspx?symbolno=INT%2fCEDAW%2fNGO%2fKGZ%2f19256&Lang=en

⁷ Pinkam S., Malinowska-Sempruch, K. (2007), citation Tina Jiwatram-Negrón, Timothy Hunt, Danil Nikitin Economic Abuse among Substance-Involved Women in Kyrgyzstan, Central Asia: A Brief Report.

⁸ Alternative report for 60th session of CEDAW, Geneva 2015 - http://tbinternet.ohchr.org/_layouts/treatybodyexternal/Download.aspx?symbolno=INT%2fCEDAW%2fNGO%2fKGZ%2f19256&Lang=en

The Jogorku Kenesh (Parliament) has toughened responsibility for bride kidnapping. Marriage with minors is also illegal in Kyrgyzstan. However, approximately 12 percent of girls are married before the age of 18 and 1% before they turn 15. Respondents in the south of the country voiced most of the gender differences in terms of barriers to services.⁹

- **Low legal literacy of the population.** The majority of the population does not know their rights and ways of their protection. However, key populations most often face violation of their rights due to specific behavior (PID), work characteristics (SW) or sexual orientation. This is facilitated by the lack of knowledge of their rights, the inability to defend them on the one hand, and the arbitrariness of law enforcement officers, on the other. Violations of sex workers' rights were reflected in the alternative report to the 4th report on the implementation of the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW). Therefore, knowledge of their rights and the ways of their possible protection (public defenders or licensed lawyers) are important in strengthening the legal culture of both the population and law enforcement officers.
- **Providing legal assistance.** There is a law on state-guaranteed legal support for individuals who cannot afford the services of paid attorneys (SGLS). However, in order to be eligible for this service, it is necessary to provide evidence of their poverty, which they cannot do, since they are already in a pre-trial detention centers or in temporary holding facilities. There are also legal consultations at universities (Academy of Law; AUCA), but they provide only consultancy services. There are only a few qualified lawyers in the country who have experience working with key populations, so most people do not know and cannot access their services. It is important to reconsider the approaches to the work of lawyers so that SGLS is rendered at a high professional level.

3. Goal and objectives of the Interdepartmental Plan to Overcome Legal Barriers related to HIV and TB in the Kyrgyz Republic for 2020-2025

Goal: To prevent legal barriers to universal access of people living with HIV, tuberculosis and key populations to services for prevention, diagnosis, treatment and support in accordance with the regulatory legal normative acts of the Kyrgyz Republic.

Objectives:

1. Establish coordination and joint activities of various ministries and departments to ensure access to services stipulated by the Kyrgyz Republic's legal-normative acts on HIV and TB.
2. Ensure proper implementation of the legislation of the Kyrgyz Republic in the process of work with the population in general, including people living with HIV, tuberculosis and key population.

⁹ Baseline assessment – Kyrgyzstan. Scaling up Programs to Reduce Human Rights-Related Barriers to HIV and TB services, p.37.

3. Reduce the level of stigma and discrimination and gender-based violence towards PLHIV, people with tuberculosis and key population to zero in government agencies, including law enforcement agencies.

4. Ensure equal access to prevention, treatment, care and support services for all people regardless of gender, social status, occupation, sexual orientation or occupation.

5. Strategic directions

In order to achieve the goals and objectives set by the Program of the Government of the Kyrgyz Republic to combat HIV infection in the Kyrgyz Republic for 2017-2021 and the Government Program "Tuberculosis V", targeted actions will be taken in three strategic directions.

1. Optimization and monitoring of legal-normative acts of KR on HIV and tuberculosis.

2. Strengthening the capacity of employees of the Ministry of Internal Affairs, the State Penitentiary Service, the Ministry of Justice and the Ministry of Health on legal issues related to HIV and TB.

3. Provision of practical legal assistance to people living with HIV and tuberculosis.

This approach will maximize the impact at all levels of comprehensive service delivery for people living with HIV and TB, based on human rights and gender equality. It will allow to coordinate the activities of the health sector with other government departments and services, with the non-governmental sector and communities of people affected by TB and HIV infection, to increase the flow of international technical and financial assistance; improve the effectiveness of prevention and treatment programs; to increase social tolerance towards people living with HIV, tuberculosis, and key populations.

Strategic direction 1. Optimization and monitoring of normative legal normative acts on HIV and tuberculosis

TB and HIV activities are carried out with respect for human rights, gender equality and non-discrimination principle. In order to achieve universal coverage and continuity of services for key groups and PLHIV, will be carried out assessment of the legislation of the Kyrgyz Republic in the field of HIV-TB and related problems, as well as monitoring of the implementation of the legislation. Gender equality and addressing gender-based violence will be an integral part of all HIV and TB programs.

Efforts:

- Conducting analysis of the legislation of the Kyrgyz Republic, legal normative acts, departmental orders and instructions, as well as law enforcement practices in the field of TB, HIV infections and key populations, including an analysis of the observations and recommendations of the UN human rights treaty bodies;
- Made amendments to legislation and departmental regulations based on the results of the analysis;
- Conducting annual reports to the CBPH Committee on HIV and TB, the Coordination Council for Human Rights under the Government of the Kyrgyz Republic, collegiate of

ministries and departments on the situation with respect to the observance of the rights of PLHIV, TB patients, key groups and the impact of violation of rights on the development of the HIV epidemic;

- Preparation of periodic reports of the Kyrgyz Republic on the implementation of international obligations. Discussion at the level of the Government, ministries and departments of the Kyrgyz Republic on the progress in the implementation of the conclusions on the implementation of the country's international obligations and an explanation of the reasons for their non-fulfillment;
- Engaging public councils of state bodies to discuss issues of removing legal barriers to overcoming HIV and TB;
- Establishing partnerships with international and non-governmental organizations for joint activities to remove legal barriers.

Strategic direction 2. Strengthening the capacity of public officers of the Ministry of Internal Affairs, the State Penitentiary Service, the Ministry of Justice and the Ministry of Health on legal issues related to HIV and TB

Elimination of legal barriers depends on the level of competence of public officers and personnel of ministries and departments, as well as their gender sensitivity. Increase in their capacity will be carried out through the introduction of educational programs in the system of pre-graduate and continuing education of employees of the above-mentioned ministries and departments on legal issues related to HIV and TB. An important role is given to the formation of attitudes towards the problem and discussion of cases of discrimination through the departmental mass media, as well as the creation of departmental rules and instructions for working in areas of HIV and tuberculosis.

Training of employees will lead to a decrease in the level of stigma and discrimination in relation to key populations, people living with HIV and tuberculosis; remove barriers to access to services of prevention and treatment of diseases.

Efforts:

- Increasing the competence of law enforcement officials and health care organizations in the field of the rights of key populations, people living with HIV and TB;
- Implementation of rights of key populations, people living with HIV and tuberculosis, into the existing formal training systems, as well as into the training process within the framework of official and professional training of law enforcement officials, the Ministry of Health, the State Penitentiary Service and the Ministry of Justice;
- Training of professional trainers from among civil servants;
- Resumption of a course on human rights in non-core universities (for example, medical);
- Holding of the large-scale information events, including information in the departmental media, holding information events for employees;
- Creation and approval of departmental rules (guidelines, instructions) for work in the field of HIV and tuberculosis in the aspect of human rights.

Strategy 3. Provision of legal assistance to people living with HIV and tuberculosis

People living with HIV and tuberculosis do not have the legal knowledge and skills to assert their rights. The high level of stigma and discrimination against these people limits their access to services. As a result, they do not seek HIV and tuberculosis testing, treatment and social assistance. Many of them do not have documents and certificates on registration of children, as well as the possibility of restoring documents due to lack of money and/or registration. All this leads to the further spread of HIV infection, tuberculosis and an increase in government spending on treatment and support. Process of ensuring of human rights of PLHIV and key groups will be carried out through training activists, providing counseling and legal support by the staff of non-governmental organizations and lawyers, state-guaranteed legal support (SGLS). Documentation of human rights violations will be carried out in order to monitor the legal status of these groups.

Efforts:

- Assisting people living with HIV and tuberculosis and key populations in process of obtaining/recovering identity documents, including document for children;
- Training lawyers on the provision of SGLS to people living with HIV, tuberculosis, and representatives of key populations;
- Providing legal assistance to people on programs of prevention HIV and TB, programs on treatment, care and support;
- Ensuring continuity of prevention and treatment services for TB patients, PLHIV and/or key populations upon admission to prisons or upon release;
- Document violations of the rights of key populations (including domestic gender-based violence) and take these facts into account to encourage or administer administrative measures to employees. Bring this information to the attention of decision-makers.

Coordination and management

Coordination of the activities of ministries, departments, civil society institutions, departmental media on overcoming legal barriers related to HIV will be carried out by an interim Coordination Council approved by the CSOS Committee on HIV and TB among the persons nominated by the relevant ministries and departments, with the participation of representatives civil sector, representing the main key groups (PWID, SW, MSM; PLHIV). Meetings of the Council will be held at least once a quarter. Minutes will be prepared for each meeting, which will be kept in the Secretariat of the CSOS Committee.

Validity

This Plan is developed for 2020-2025 years. Here attached the matrix of activities for 2020-2021 years. In 2021, an independent assessment of the implementation of the matrix of measures will be carried out and new relevant measures for 2022-2025 will be developed. The implementation of the Plan will be monitored annually and discussed at a meeting of the CSOS committee, at the Coordination Council for Human Rights under the Government of the Kyrgyz Republic. Information on the implementation of this plan will be submitted to the Coordination Council on a quarterly basis.

This plan will be financed from the state budget and donor funds.

Monitoring and evaluation

Monitoring and evaluation of the implementation of the plan will be carried out regularly, with a hearing at each meeting of the Coordinating Council of the progress of the implementation of the plan and its lag.

Indicators:

1. Reducing the level of stigma and discrimination in government organizations by 50% compared to 2019 year.
2. The number of trained law enforcement specialists - (at least 50% of the payroll until 2021 year).
3. A 90% decrease in the number of people among PLHIV, TB patients and representatives of key populations who have experienced human rights violations, including violence by law enforcement officials over the past 12 months.
4. Getting qualified assistance from a lawyer (50% of those in need).
5. Receiving the services of a public defender, including training on human rights for at least 50% of the number of program participants.
6. The number of initiated and accepted (or updated) legal normative acts.
7. Eliminating legal barriers to access to HIV and TB services for people living with HIV, tuberculosis and key populations.
8. Percentage of women from key populations and people living with HIV and TB who have experienced violence by their regular intimate partner in the last 12 months.

5. Favorable prerequisites for the implementation of the Plan are:

- Availability of programs of the Government of the Kyrgyz Republic on HIV and TB;
- Presence of legislation ensuring the rights of people living with HIV, TB; and key populations;
- The presence of a regulatory legal framework, infrastructure and trained specialists in the health care system, other ministries and departments;
- Direct participation of the civil sector, communities of PLHIV and key populations in programs related to HIV and TB;
- Technical and financial support from international donors.

6. Risks of the Plan implementation:

- Uncertainty of sources of funding;
- High level of stigmatization and discrimination in relation to PLHIV, TB patients;
- Lack of political will and support from decision-making authorities.

List of abbreviations

AUCA	American University in Central Asia
ВИЧ	Human immunodeficiency virus
SGLS	State guaranteed legal support
SPS	The State Penitentiary Service under the Government of the Kyrgyz Republic
GFATM	Global Fund to Fight AIDS, Tuberculosis, Malaria
KPG	Key population groups
CEDAW	Convention on the Elimination of All Forms of Discrimination against women (CEDAW)
KR	Kyrgyz Republic
CSOS	Coordinating Council on Public Health under the Government of the Kyrgyz Republic
LBT	Lesbian, bisexual, transgender people
PLHIV	People living with HIV
DR	Drug-resistant (tuberculosis)
PWID	People who inject drugs
MIA KR	Ministry of Internal Affairs of the Kyrgyz Republic
MH KR	Ministry of Health of the Kyrgyz Republic
M&E	Monitoring and evaluation
MSM	Men who have sex with men
MJ	Ministry of Justice of the Kyrgyz Republic
LNA	Legal normative act
NGOs	Non-governmental organizations
MMT	Maintenance methadone therapy
RCN	Republican Center for Narcology
RC “AIDS”	Republican Center “AIDS”
Media	Mass media
AIDS	Acquired Immunodeficiency Syndrome
SW	Sex workers/sex work
TB	Tuberculosis
TG	Transgender people

MATRIX OF EFFORTS
on Overcoming Legal Barriers to HIV and TB Services in the Kyrgyz Republic for 2020-2021 years

№	Goals	Measures/Actions	Implementation period	Expected results	Responsible bodies
I. Regulatory and legal block. Optimization and monitoring of LNA on HIV and tuberculosis					
1.	Conduct an analysis of the legal normative base of the Kyrgyz Republic and law enforcement practices on the subject identifying and removing legal barriers to overcoming HIV and TB	Comprehensive legal analysis: - Laws; - Regulations; - Departmental acts of state bodies	1-2 quarter 2020 year	- Compiled a list of legal normative acts containing legal barriers to overcome HIV and TB and to change; - An analysis of legal normative acts in the field of human rights was carried out, based on their compliance with the Constitution of the Kyrgyz Republic and international norms ratified in the Kyrgyz Republic, including an assessment of their gender sensitivity	MH, MIA, SPS, MJ, NGOs (by approval)
2		Conduct an analysis of law enforcement practices: - In the field of law enforcement agencies; - In the penitentiary system; - In the health care system.	1-2 quarter 2020 year	The overview of discriminatory law enforcement practices that contradict the legislation of the Kyrgyz Republic has been prepared:	MH, MIA, SPS, MJ, NGOs (by approval)

		Develop a set of measures/recommendations to eliminate stigma and discrimination against people living with HIV and TB		<ul style="list-style-type: none"> - In the internal affairs bodies; - On the part of the employees of the penitentiary system; - On the part of employees of the healthcare system 	
3		Develop a comprehensive package of drafts of LNA; Ensure its promotion and adoption in the prescribed manner	2-3 quarter 2020 year	Drafts of legal normative acts and proposals for amendments to legislation aimed at eliminating legal barriers, stigma and discrimination against people living with HIV and TB developed and submitted for approval or approved by departmental orders (if required)	MH, MIA, SPS, MJ, NGOs (by approval)
4	Monitoring of legal normative acts of the Government of the Kyrgyz Republic in the field of HIV and TB	Ensure the implementation of the Regulation of the Government of the Kyrgyz Republic “On approval of the Procedure for monitoring and evaluating the effectiveness of regulatory legal acts of the Government of the Kyrgyz Republic” from 23d of March 2015 year № 139	until 15 th January, 2021 year	Posting information on the results of the monitoring on websites. Submission, in accordance with the established procedure, for the consideration of the Interdepartmental Commission under the Ministry of Justice of the Kyrgyz Republic for the inventory of legal normative acts, drafts of legal normative acts developed	MH, MIA, SPS, MJ, NGOs (by approval)

				basing on the results of the monitoring.	
5		Preparation of materials by the request of the Jogorku Kenesh of the Kyrgyz Republic within the framework of monitoring legislation in the field of HIV and TB in accordance with the regulation: "On the procedure for exercising control functions by the Jogorku Kenesh of the Kyrgyz Republic"; "On the Regulations of the Jogorku Kenesh of the Kyrgyz Republic" (Chapter 19 "Control over the implementation of laws and decisions of the Jogorku Kenesh by its Committees")	Entire period	The sustainable system of monitoring the implementation of the Constitution and laws of the Kyrgyz Republic will ensure the elimination of legal obstacles to overcome HIV and TB. Legislators are involved in monitoring legislation and respond to regulatory gaps in the process of drafting new legislation.	MH, MIA, SPS
6		Consideration of measures to reduce legal barriers to HIV and TB at meetings of the Coordinating Council on Public health care under the Government of the Kyrgyz Republic, the Coordination Council for Human Rights under the Government of the Kyrgyz Republic	3-4 quarter of 2020 year	Involvement of state bodies in resolving issues of removing legal barriers to overcome HIV and TB	MH, MIA, SPS, MJ, NGOs (by approval)
7		Participation in the preparation of periodic reports of the Kyrgyz Republic on the fulfillment of the obligations of KR to respect human rights (in the part related to HIV, TB and key populations): UN UPR; CEDAW and others	2020 year	The comments of the UN international committees on the periodic reports of the Kyrgyz Republic were discussed at the level of departments and interdepartmental structures. Measures are taken to eliminate violations.	MH, MIA, SPS, MJ, NGOs (by approval)

8		Include in the work plan and conduct consideration on meetings of public councils of state bodies of issues of elimination of legal barriers to overcome HIV and TB	2020 – 2021 years 2 times a year	Civil society is involved in monitoring the elimination of legal barriers to overcome HIV and TB in the activities of relevant ministries and departments	MH, MIA, SPS, MJ, NGOs (by approval)
9	Cooperation of ministries and departments with representatives of nongovernmental and international organizations to implement measures aimed on removing legal barriers to overcome HIV and TB	Organization of quarterly meetings with representatives of nongovernmental and international organizations on the implementation of measures aimed at eliminating legal barriers to overcome HIV and TB; - Discussion of issues on assistance in the implementation of this Plan by nongovernmental and international organizations - Provision by international and nongovernmental organizations of the results of their own monitoring of the law enforcement practice of law enforcement agencies, the health care system and the State Penitentiary Service on work with people living with HIV and TB, as well as with key populations	2019-2020 year	Efforts to overcome legal barriers of HIV and TB programs have been strengthened as a result of consensus building and joint activities with NGOs, communities and international organizations. The contribution of international organizations and NGOs is reflected in the plans and reports of ministries and departments.	MH, MIA, SPS, MJ, NGOs (by approval)
II. Strengthening the capacity of employees of the Ministry of Internal Affairs, the State Penitentiary Service, the Ministry of Justice and the Ministry of Health on legal issues related to HIV and TB					
10	Improving the system of undergraduate and continuous education of staff of the said ministries and departments on legal issues related to HIV and TB	Development and/or improvement of educational programs on legal issues of HIV and TB for employees of the internal affairs bodies, the State Penitentiary Service, the Ministry of Justice (probation system), the	2020-2021 y.	Programs have been developed and trained 90% of employees of the probation system and the State Penitentiary Service on issues related to HIV and TB	MH, MIA, SPS, MJ,

		Ministry of Health within the framework of existing departmental education systems.		by the end of 2021; By 2020-2021 all employees of the SPS, district commissioners and employees of the pre-trial detention center were trained on HIV and TB. 200 cadets of the Ministry of Internal Affairs and 100 people from among the leading employees of the Ministry of Internal Affairs are trained per year on legal issues of HIV and TB. The course on medical law has been updated on the basis of current legislation and introduced into the system of training medical personnel and lawyers.	
11		Training of professional trainers from among state officials	2020 year	At least 30 trainers were trained for each state body	MH, MIA, SPS, MJ,
12		Ensure that legal issues on HIV and TB are included in the system of professional training of employees at least twice a year, as well as facilitate the conduct of training trainings for the personnel of the Internal Affairs Directorate, the Ministry of Justice, the State Penitentiary Service at the expense of non-governmental and international organizations	2020 year	0% of the personnel of the Internal Affairs Directorate and the State Penitentiary Service, the probation system are covered by educational programs on legal issues of HIV and TB in the vocational training system. Conducted at least 1 training per year on the submitted issues in cooperation with	MH, MIA, SPS

				NGOs and international organizations in all regions of the country. Legal issues are included in the HIV and TB education system for medical staff.	
13	Conducting large-scale information events	The comprehensive plan has been developed for broad coverage of the issues for overcoming legal barriers to HIV and TB in departmental and electronic media. Legal aspects of HIV and TB are reflected in the departmental media.	2020 year	Conducting media campaigns at least 2 times a year with coverage of legal issues in professional and departmental media agents	MH, MIA, SPS, MJ, NGOs, international organizations (by approval)
14	Creation and approval of departmental procedures for work in the field of HIV and TB	Develop/revise departmental instructions, guidelines, manuals for working with people living with HIV and TB, taking into account the specifics of work of law enforcement agencies, penitentiary services, probation authorities, health workers	2020 – 2021 years	Departmental rules (instructions) are developed/ revised, approved in the prescribed manner and have being used in practice	MH, MIA, SPS, MJ, NGOs (by approval)
III. Providing practical legal assistance to people living with HIV and tuberculosis					
15	Ensuring the rights of people living with HIV and TB and representatives of key populations, to officially document their identity	Identification and subsequent referral to the competent state bodies of people with HIV and TB, key populations regarding their problems with documentation. Submitting proposals for the development of a draft legal regulation of an interdepartmental document aimed at solving problems with documentation	2020-2021 years constantly	90% of people living with HIV and TB in need and 60% of key populations received identification documents by the end of 2021. 90% of prisoners received an identity document upon release.	MH, MIA, SPS, MJ, NGOs (by approval)

16	Provision of state-guaranteed free legal support (SGLS) to people living with HIV and TB, as well as to representatives of key populations.	<p>Conduct training for lawyers involved in the provision of SGLS Legal Affairs to HIV and TB.</p> <p>Trained lawyers will provide legal support to people living with HIV and TB, as well as to representatives of key populations group.</p> <p>Provide legal advice to citizens of the Kyrgyz Republic facing stigma and discrimination in the area of HIV and TB, and representatives of key populations who have suffered from domestic violence, using the SGLS tool.</p>	2020-2021	According to the Law of the Kyrgyz Republic “On State Guaranteed Legal Support”, people living with HIV and TB, as well as representatives of key populations, will have access to SGLS. 100% of the lawyers involved in providing SGLS will be trained on legal issues of HIV and TB.	MJ
17					
18	Implement a gender-sensitive policy to eliminate stigma and discrimination against people living with HIV and TB and key populations.	The facts of stigma and discrimination against people living with HIV and TB are monitored, and taken into account during evaluating the performance of employees of the internal affairs bodies, the State Penitentiary Service, health care and probation departments.	Constantly	The level of stigma and discrimination against people living with HIV and TB is decreasing, which is revealed through periodic surveys and surveys of target population groups	MH
19	Development of client-oriented approaches in organizing the work of the probation system in relation to participants in prevention and treatment programs from HIV and TB	<p>Raise financial resources on examination of international best practices in organizing the probation system.</p> <p>To stipulate the allocation of resources for state social order programs for NGOs working on the socialization of prisoners and representatives of key populations. Provide training of officers of the State Penitentiary Service, judges and police officers on</p>	2020 y.	The Probation Institute, in cooperation with NGOs, ensures the re-socialization of former convict people and clients of the probation system. The relapse rate of probation clients will not exceed 25% by the end of 2021.	MH, MIA, SPS, MJ, NGOs (by approval)

		the work of the probation system. Conduct a study of the institutional experience of NGOs in the re- socialization of prisoners.			
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