

Timeline of Global Fund's investments in HIV responses in the EECA countries

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Global Fund

- Major global and EECA donor in HIV and TB
 - EU and its member states are major donors
- Policy on sustainability, transition [to national funding] and co-financing
 - Only now is being defined (in two weeks)
 - The last grant is a 'transition grant'
 - Activists ask for extra 'transition grant' on exceptional basis
- Policy on eligibility (to be revisited in two weeks):
 - High income countries – not eligible
 - Upper middle income countries – eligible if high epidemics (HIV \leq 5%)
 - EU member states: only non-OECD members for NGO rule on HIV
 - G20: only in case of severe epidemics

EU member states & South-East neighborhood

Country	Status of HIV grant	Eligibility as of 2016	Last allocation for 3-4 years: cumulative, US\$
Bulgaria	Finishing Sep 2016	No, even under NGO rule	9.2 million
Romania	No HIV grant	No, even under NGO rule	0
Albania		Yes again	5.1 million
Bosnia-Herzegovina	Finishing July 2016	No	0
Kosovo		Yes	4.9 million
Macedonia	Finishing December 2016	No	0
Montenegro	No HIV grant, finished in 2015	Might – HIV increase	0
Serbia	No HIV grant, finished in 2014	Yes – HIV increase	0

- Many managed to keep HIV under 5% among key populations
 - Exceptions – Bulgaria now, Romania, Montenegro & Serbia after closure of grant
 - Larger scale of HIV prevention among key pops
 - Little policy reforms on criminalization of key populations
- Global Fund support
 - Finishing now everywhere with exception of Albania and Kosovo
 - Low predictability: Maybe some countries might re-become eligible for support
- Government covers treatment but not NGO-run HIV prevention among key populations
 - No significant national investment in key pops (exception opioid substitution therapy)
 - Often expectation is that local authorities will fund NGOs
 - In some, issues with MoH mechanism for contracting NGOs

Eastern Europe and Central Asia

- All countries have concentrated epidemics among key populations
- Grants finishing not as fast and most will be able to benefit from a 3-year transition grant
- Much higher reliance on grants – larger, still fund ART/diagnostic in most places, harder to transit
 - Economic crisis felt; e.g. Moldova's HIV program has a major HIV deficit and unclear how to fully fund ARVs
- Countries where support is finishing now:
 - Kazakhstan (end 2016; most take over by government, though less NGO funding)
 - Russia (end 2017; nearly no alternative funding for HIV prevention among key populations with exception of some 3 federal subjects; hard to bring any international funding into the country)
- NGO funding is nearly exclusively dependent on international funding

- **What is the EU role in making the transition more successful - in terms of funding and political dialogue?**
 - **In EU member states**
 - **In South-East Europe**
 - **In Eastern European countries that have partnership agreements**
 - **Other EECA countries**
- The European Communities funding for the Global Fund is coming from development funds – what are responsibilities of **other DGs** not to waste this important investment?
- How to support **NGOs watchdog and pressure on governments** in countries that have already transited?
- How the EU could support **safety-net** for NGO-run services in ineligible countries?
- How to **engage with EECA governments on reforming** policies towards key populations and start contracting NGOs?
- How to support countries that are **unable to fund because of economic challenges**?