**APPLICANT REQUEST FOR MATCHING FUNDS**

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| **SUMMARY INFORMATION** | | | |
| **Applicant** | Kyrgyzstan | | |
| **Funding request which this matching funds request relates to** | HIV/TB | | |
| **Strategic priority area\*** | Removing human rights-  related barriers to HIV  services | **Amount available\*** | $1,000,000 |
| **Amount requested** | 999,839.5 |
| **Strategic priority area\*** |  | **Amount available\*** |  |
| **Amount requested** |  |

*\* As communicated in the allocation letter*

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| **1. Programming of allocation funding towards strategic priority areas** |
| **Kyrgyzstan is one of 20 countries that have been selected by the Global Fund for the provision of intensive support to scale up comprehensive programs on reduction of human rights-related barriers to health services. The in-depth baseline assessment carried out in April 2017 provided: (a) baseline data about the human rights-related barriers to HIV and TB services in Kyrgyzstan and existing programs for their elimination, (b) specific recommendations on scaling up necessary interventions to reduce barriers and their costs, and (c) proposed options for possible next steps to implement a comprehensive program.**  **This application for matching funds catalyzes the interventions programmed as part of the program continuation, and is based on the results of the baseline assessment, other existing strategic information, as well as meaningful consultation of all stakeholders, including communities, during the application development. The application is aimed at eliminating the following major barriers: (1) violation of the key populations’ rights by law enforcement officers and in detention facilities; (2) high level of stigma and discrimination, particularly in health care facilities; (3) low legal literacy and capacity to claim their rights by representatives of the PLHIV community and key populations groups; (4) low access to legal services for PLHIV and key populations groups; (5) limited enforcement of protective legal environment that aims to guarantee rights of key populations; (6) high level of gender based violence related to HIV or affecting key populations.**  **The application for the program continuation under the country grant for the current period will continue interventions to remove human rights related barriers and increase access to prevention, treatment, care and support services. Matching funds will be used to increase the scale and effectiveness of existing programs, and to expand the program interventions in order to increase access to services as described below. Activities under the matching funds request are aimed at long-term improvement of behavior, attitudes and policies through interrelated, integrated strategies. These activities will strengthen the capacity of civil society and key HIV-related human rights institutions to challenge human rights-related barriers to services; ensure sustainability of services for key population groups; and will contribute to the achievement of specific gains in advancing human rights, as documented in the framework of the established monitoring and evaluation system for human rights observance. Thus, the application for matching funds includes an integrated approach which strengthens and expands the country grant, such a holistic integrated approach allowing for concrete steps towards reduction of human rights related barriers. Since the matching funds application development was carried out simultaneously with the Performance Framework development, its catalyzing potential was used to build upon and strengthen the capacity of the country grant.**  **Compared to the period of the previous 2016-2017 grant, the country grant for 2018-2020 includes an increase of funds allotted to reduce human rights related barriers to $ 513,911.6.**  **The main areas in which the matching funds application catalyzes the country application are described below. They are developed in accordance with the Global Fund technical brief and include all 7 key programs to reduce human rights-related barriers. Stigma and discrimination represent a major obstacle for PLHIV and key populations to access testing, treatment, care and support programs. Consequently, reducing stigma and discrimination has been mainstreamed throughout all proposed programs within the country grant and the programs to be funded through the matching funds.** |

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| **Priority Area 1:** Programs to inform and sensitize law-makers and law enforcement agents  Although the human rights environment is largely supportive, and most key populations are not criminalized, law enforcement agencies often abuse their power. Illegal police practices which could manifest themselves in the form of harassment, extortion, arbitrary arrests and detention, violence, rape and / or inability to protect from violence were identified by key populations in the framework of the baseline assessment as a major barrier to access to prevention services and a key a problem which affects the quality of their lives.  Previously, Kyrgyzstan was defined as a country with effective practice of ensuring protective interactions between police and key population groups, mainly because of the efforts of capacity building and adopting instructions of work with key groups. However, in the absence of clear assessment of how law enforcement agencies fulfill their obligations and because of the high staff turnover in law enforcement agencies, many of the achieved successes have been lost.  The matching funds application will focus on the strategic use of opportunities related to the law enforcement reform. It will promote strengthening the accountability mechanism and increasing the capacity of law enforcement officers in observing the rights of key population groups, as well as improving the regulatory framework to guarantee the rights of key groups. | | |
| ***Program continuation activities:***  а) documenting human rights violations through the “street lawyers” mechanism and human rights monitoring by networks and communities;  b) Training NGO staff and community representatives of key population groups in human rights monitoring and documentation; | ***Matching funds activities:***   1. increasing the competence of law enforcement officers in the area of key populations’ rights; 2. evaluating the implementation of the “Instruction on HIV prevention by authorized state bodies of internal affairs, drug control and in the area of sanctions execution of the Kyrgyz Republic interacting with vulnerable groups”; 3. introduction of indicators on interaction with key populations groups and NGOs for the new system of evaluating the performance of Internal Affairs officers; 4. training of parliamentarians, the Presidential Administration staff and the KR Government Administration staff, Public Health Coordination Council members on health and human rights; 5. Training in the area of ​​HIV and human rights for lawyers, judges, prosecutors and the Ombudsman institute staff. | |
| **Priority Area 2:** Programs to sensitize health care providers about HIV related human rights and medical ethics  Stigma and discrimination associated with HIV status create serious barriers to PLHIV's access to prevention, treatment and support. The PLHIV Stigma Index research in Kyrgyzstan carried out in 2016, shows that most often PLHIV faced discrimination by health workers and their communities. Every third PLHIV in the Kyrgyz Republic faced disclosure of information about his or her HIV status in a medical institution, and was also forced to undergo various medical procedures. Every second PLWH did not receive necessary counselling for their reproductive health. Two out of three PLHIV in the KR are aware of organizations and groups which can be contacted for help in cases of stigma or discrimination: first of all, they are groups and networks of people living with HIV, as well as sub-national non-governmental organizations.  The country application will aim to continue strengthening community efforts to reduce stigma and discrimination by capacity building. Additionally, human rights related aspects will be integrated in all existing training programs for health care professionals. | | |
| ***Program continuation activities:***   1. Strengthening community systems and supporting networks of AIDS service NGOs which advocate for rights and access to services for PLHIV and key groups. | ***Matching funds activities:***   1. Conducting analysis of educational programs and health professionals training practices for content on human rights, stigma and discrimination related to HIV; 2. updating stigma and discrimination modules and integrating them in the health professionals pre-service education system; 3. initiating the inclusion of patient rights issues in the system of state examinations and certification of medical specialists; 4. advocacy for the inclusion of indicators on stigma and discrimination against PLHIV in performance evaluation of medical specialists; 5. in-service training of health care workers on human rights and medical ethics. | |
| **Priority Area 3: Legal literacy programs (“Know your rights”)**  Lack of knowledge about their rights among PLHIV and key populations groups leads to inability to seek redress or to challenge stigma and discrimination by health professionals or violence by law enforcement agencies. These facts and the low level of legal knowledge are confirmed by the Stigma Index Research conducted in 2015. At the same time, the growing number of such situations is not documented due to the lack of skills among community leaders in organizing the response process to cases of discrimination, and, accordingly, the opportunities for changing the situation at the systems level are limited.  The matching funds application is aimed at capacity building of community leaders to organize the process of documenting and response to the cases of discrimination, to collect and analyze documented cases of stigma and discrimination, denial of services, violence or power abuse by law enforcement bodies. At the same time, the awareness level among representatives of PLHIV and key groups on human rights issues and legal protection opportunities will be increased. | | |
| ***Program continuation activities:***·   1. Conducting legal literacy mini-sessions for clients at service delivery locations; 2. Providing consultations on rights protection by “street lawyers”. | ***Matching funds activities:***   1. Systematic training of community leaders on the process of documenting and response to the cases of discrimination; 2. Training of PLHIV community representatives and key groups, including HIV-positive adolescents, on human rights and legal protection issues. | |
| **Priority Area 4: HIV related legal services provision programs**  Non-availability of legal protection for key populations groups and PLHIV becomes a limitation affecting the broad participation of key groups in prevention, treatment and care programs and posing high risks of interrupting HIV treatment. In 2016-2017, the “street lawyers” programs were launched as part of the HIV prevention programs, which showed that involving key groups as “peer advocates” influences the formation of a safe environment. Lessons learnt from implementation of such program show that for more effective engagement with the authorities, it is necessary to expand the involvement of licensed lawyers and to provide qualified legal services and mentorship for the ‘street lawyers’. In addition, legal support provision is necessary for representatives of key groups and PLHIV, detained or released from detention facilities. It is necessary to ensure the availability of services in penitentiary institutions, including timely provision of ART treatment and substitution therapy, and upon release it is important to provide legal support for documents restoration to enable continuation of services. The country has more than 500 HIV positive children infected in medical institutions who are currently entering the adolescence period, the number of women with HIV is increasing, while the support given to them, especially for upholding their rights, remains limited.  The country application for matching funds builds upon and expands the "street lawyers" program that will continue to be funded from within allocation. The matching funds would enable expansion of qualified legal assistance, legal support for persons being detained or released from prison, and mentorship and quality assurance for the ‘street lawyers’. In addition, a set of activities will be implemented to expand the rights of HIV-positive adolescents, whose infection is the responsibility of the state, as well as activities to ensure the rights to health, including reproductive health of HIV-positive women. | | |
| ***Program continuation activities:*** ·   1. Providing legal assistance through the “street lawyers” program. | ***Matching funds activities:***   1. Establishing a legal aid system on the basis of government institutions and NGOs; 2. Providing legal aid to the clients of HIV related prevention, treatment, care and support programs; 3. Ensuring the continuity of prevention and treatment services for PLHIV and / or key populations detained or released from detention facilities; 4. Capacity building and advocacy activities to empower HIV-positive women and children. | |
| **Priority Area 5. Monitoring and reforming of laws, regulations and policies relating to HIV programs**  In general, the legislation of the Republic is supportive for the implementation of programs in the field of HIV and PLHIV and key groups’ rights observance. At the same time, there are contradictions and ambiguities in the legislation, which allow different interpretations of existing norms. Regulations, orders and instructions do not constitute a clear and unambiguous legal frame, which also allows shying away from the comprehensive services provision. At the same time, law enforcement practice using inaccuracies in legislation, becomes unfavorable, repressive, and the fundamental rights of key groups and PLHIV may be violated. The events of the past two years, reflected in a number of reports, confirm that such problems persist, while the level of awareness and informing high-level decision makers about the situations of rights violation and the impact of such violations on the growth of the HIV epidemic remains insufficient.  In this application, we included activities which will identify weaknesses in legislation and consistency of regulations and strengthen community monitoring, in turn leading to better advocacy and engagement with decision makers. | | |
| ***Program continuation activities:*** ·   1. carrying out advocacy activities to improve legislation and monitor the implementation of regulations, provisions and instructions ensuring the rights of key population groups by one civil society network; 2. holding annual forums for community representatives and NGOs to create an enabling environment for the program implementation. | ***Matching funds activities:***   1. Conducting an analysis of Kyrgyz Republic legislation, regulations, departmental orders and instructions, as well as law enforcement practices in the field of HIV infection and key populations; 2. Making annual reports on the key populations human rights situation and the impact of the rights violations on HIV epidemic development; 3. Advocacy and monitoring of statutory documents, regulations and practices related to HIV in civil society organizations; 4. introduction of modern information technologies in the community monitoring of human rights of PLHIV; 5. Assessing the experiences of stigma and discrimination through repeated Stigma Index | |
| **Priority Area 6 Programs of reducing HIV related discrimination of girls and women**  Despite the “equality for all” 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 applying illegal actions against them, including unauthorized detention, physical and sexual violence. According to the Alternative report to CEDAW (2015), women who use drugs, sex workers and LBT are groups of women who do not actually have the same opportunities and tools to exercise their rights as all other citizens. Restriction of rights is encouraged by public opinion, by state structure practitioners, 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 affected by compounded discrimination - as women who do not have equal rights with men and as women stigmatized for who they are. A high level of violence creates barriers in access to prevention and treatment services. As a result, there is an increase in the number of women and of the sexual transmission of HIV among new cases of HIV. Thus, according to NAC, the number of women among newly registered PLHIV increased by 2.8 times between 2011 and 2016, and 84% of women registered in 2016 reported sexual transmission of HIV. This situation requires changing approaches to addressing gender-related violence and discrimination. | | |
| ***Program continuation activities:*** ·   1. Provision of training and legal assistance by NGOs and “street lawyers” to women and men living with HIV, as well as representatives of key population groups. | ***Matching funds activities:***   1. assisting PLHIV and key populations in preventing gender-based violence; 2. advocating for increased access to information and services regarding HIV infection and SRH for adolescents, including through removing age of consent related barriers; 3. introducing gender-sensitive programming for women’s empowerment for the prevention of sexual transmission of HIV for discordant couples of PLHIV. | |
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| **2. Additional investments proposed and outcomes expected** |
| *Using the table below,*   1. *Describe, for each strategic priority, the additional investments that you propose to undertake if the matching funds request is approved.* 2. *Explain how the proposed additional investments have the potential to contribute to maximizing the impact of the program. In your response, specify what program targets and/or improvements in program quality will be achieved.*   *[Duplicate the table as needed, if your application includes more than one strategic priority area]* |

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| **Strategic Priority Area** | “Introduction and scale-up of programs to remove human rights related barriers to access to HIV, TB and malaria services” (Strategic Objective 3 c) |

| **Module** | **Priority barriers** | **Interventions** | **Brief description of activities to be undertaken** | **Outcomes expected** | | **Implementation period** | **Total cost** | **Allocation within the country grant** |
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| Module 6: Removal of human rights and gender barriers to health services  *Module 6.1. Programs of raising awareness of lawmakers and law enforcement officers* | Priority 1. Violation of the key groups’ rights by law enforcement officers and in detention facilities | 1.1. Provide technical assistance to the Ministry of Interior and the State Penitentiary Service in developing a plan for the implementation of the State AIDS Program for 2017-2021, with an emphasis on increasing human rights competences for upholding key populations’ rights | - Establish a working group consisting of 6 persons  to develop the state program implementation plan of the Ministry of Interior and the State Penitentiary System (SPS) *(see attached budget chapter №19)*  - Develop programs, action plan and M & E plan of the Ministry of Interior and the State Penitentiary Service  - Hold 5 working group sessions and meetings to reach a consensus with the leadership of the Ministry of Interior and the State Penitentiary Service  - Conduct a round table with 40 people to present the programs of the Ministry of Interior and the State Penitentiary Service *(budget chapter №6)* | The programs of the Ministry of Interior and the State Penitentiary Service include processes and indicators to monitor key populations’ HIV related rights observance | | 2018 | 13,264  2,844 |  |
| 1.2. Conduct evaluation of the implementation of the "Instruction on HIV prevention by authorized state bodies of internal affairs, drug control and execution of punishment of the Kyrgyz Republic interacting with vulnerable groups” approved by the Ministry of Interior Order No. 49 dated January 21, 2014 | - Invite a research company to conduct evaluation *(budget chapter №12)*  - Conduct the research in the cities of Bishkek and Osh together with the Department of Internal Security of the Ministry of Interior / SPS and the Public Advisory Council of MIA / SPS in the cities of Osh and Bishkek, as well as in Jalal-Abad, Osh and Chui provinces, which includes:        - collection of data about the Instruction execution;        - conducting focus group discussions and survey of the key groups about the facts of the Instruction violation;       - conducting a survey of law enforcement officers about the knowledge of the Instruction;       - conducting key informant interviews at state structures and NGOs.  - Present the evaluation results at the Ministry of Interior board. | Evaluation findings used to inform the proper response from the leadership of the Ministry of Interior and the State Penitentiary Service. Joint monitoring by key population groups and relevant MIA structures is institutionalized. | | 2018-2019 | 25,264 |  |
|  | 1.3. Conduct advocacy for and participate in the development of indicators on interaction with key groups and NGOs for the new evaluation system for MIA officers in the framework of ongoing MIA reforms. | - Organize public discussions and meetings of community representatives with the leadership of the Ministry of Interior, with the MIA reform team  - Establish a working group of 4 people to develop and promote indicators of the interaction of MIA officers with key groups and NGOs *(budget chapter №13)*  - Conduct a roundtable with 40 people on the presentation and discussion of indicators *(budget chapter №6)* | The MIA staff performance evaluation system includes indicators of interaction with key groups | | 2018-2019 | 2,480  2,844 |  |
|  |  | 1.4. Pre-service and in-service training for police officers and personnel of the Ministry of Interior and the State Penitentiary Service on HIV related human rights issues and work with key population groups. | - Create a working group of 6 people from among educational institutions and NGOs to make an analysis and update existing curricula at the Academy of the Ministry of Interior, other educational institutions of the Ministry of Interior and the system of continuous training of MIA and SPS employees *(budget chapter №19)*  - Conduct 3 meetings of the working group to discuss the developed materials  - Conduct a round table with heads of educational institutions of the Ministry of Interior and the SPS to discuss the developed programs and their further implementation *(budget chapter №6)*  - Train students on the basis of the Academy of the Ministry of Interior and other educational institutions of the Ministry of Interior and the State Penitentiary Service (payment at the expense of the Academy, but technical assistance to be provided, 2 ToTs for teachers and monitoring) *(budget chapter №2)*  - Organize seminars for the current members of the Department of Internal Affairs and the SPS in the capital and regions of the country 4 \* 2-day seminars per year *(budget chapter №18)*  - Annual on job training in the system of combat and political training in all divisions of the law-enforcement bodies and the State Penitentiary Service (12 times a year) *(budget chapter №8)* | The curriculum of the Academy of the Ministry of Interior is updated.  Training modules for law enforcement officers and the State Penitentiary Service staff are developed  300 students are trained annually on human rights aspects of HIV  At least 200 DIA and SPS employees attended the training course at the seminars per year  At least 1 training on HIV related rights of key populations is conducted annually at each DIA and SPS institution | | 2018 and then the entire period | 13,264  2,844  9,520  28,640  22,920 |  |
|  |  | 1.5. Train parliamentarians, Presidential Administration staff and administration of the Government of the KR, Public Health Coordination Council members and other decision-makers on HIV-related human rights, overcoming stigma and discrimination | - Create a working group consisting of 6 people and develop modules and new methods of informal continuous training for decision-makers, including weekend meetings, interaction with the Inter-Parliamentary Union, site visits to service provision places and other activities *(budget chapter №19)*  - Organize training meetings with decision makers, including innovative outreach, such as site visits, weekend meetings, etc. – a total of 8 meetings - 2-3 times a year *(budget chapter №11)* | 100 persons a year from among decision-makers took part in non-formal education programs | | 2018-2019 | 13,264  17,312 |  |
|  |  | 1.6. Conduct a study tour to countries with best practices for parliamentarians and decision-makers. | - Identify countries of near and far abroad with best practices of work with key individuals *(budget chapter №9)*  - Organize the trip  - Conduct a press conference and presentation for the deputies about the visit outcomes | The parliament members have increased capacity and skills to promote legislation that is tolerant to key populations | | 2019 | 25,220 |  |
|  |  | 1.7. Training in the area of HIV infection for lawyers, judges, prosecutors and the Ombudsman Institute employees | - Create a working group consisting of 6 people to develop and introduce modules of working with key populations groups into training courses for lawyers, judges, prosecutors and the Ombudsman Institute employees *(budget chapter №19)*  - Conduct 2 2-day seminars a year for lawyers, judges, prosecutors and the Ombudsman Institute employees *(budget chapter №18)*  - Inform the bar association members about international experience and mechanisms for protecting human rights at joint meetings twice a year (5 meetings) *(budget chapter №3)* | 80 people a year from among lawyers, prosecutors, judges, the Ombudsman Institute employees have increased their capacities in human rights issues of HIV infection  Precedents of the use of alternative (non-custodial) punishment by courts have been created | | 2019-2020 | 13,264  11,456  9,400 |  |
| Module 6.2. Training programs for health care professionals on human rights and medical ethics related to HIV | Priority 2. High levels of stigma and discrimination in health care organizations | 2.1. Conduct training for health care professionals on HIV-related human rights | - Conduct an analysis of training programs and practices for training health care workers on human rights, stigma and discrimination related to HIV and TB *(budget chapter №19)*  - Update existing modules on stigma and discrimination related to HIV and TB and include them into the system of pre- and postgraduate education of doctors, nurses and administrators of medical institutions  - Initiate inclusion of patient rights issues into the system of state examinations and certification of medical specialists  - Conduct advocacy for the inclusion of indicators on stigma and discrimination against PLHIV, TB patients and key populations into the performance evaluation of medical specialists  - Train health care workers: (2 ToT - 5 days for teachers of higher and secondary specialized medical schools, 2 seminars per year – a total of 5 seminars) *(budget chapter №1\*2; #18\*5)* | Number of trained students (500 per year)  Number of trained medical personnel (140 people)  The level of knowledge and attitude of medical workers towards PLHIV has improved (60% of medical workers demonstrate tolerance to PLHIV and key populations (as reported in conducted surveys) | | 2019 and then during the entire period | 13,264  15,080  14,220 |  |
| Module 6.3. Legal literacy programs (“Know Your Rights”) | Priority 3. Low legal literacy and skills to protect their rights by PLHIV and TB community representatives and key groups | 3.1. Establish systematic training for community leaders on the process of documentation and response to incidents of discrimination and violence | . - Train community leaders at a basic human rights course and the skills to document or respond to incidents of discrimination and violence: 1 basic 5-day training in 2018 and 2020 and 2 x 2-day training courses on updating knowledge and skills per year (a total of 2 basic and 5 updating knowledge trainings)  *(budget chapter №1\*1; №18\*5)* | Monitoring of the service quality including rights violations is carried out by 75% of NGOs and community organizations across the country | | The entire period | 30,220 | 11160 |
| 3.2. Conduct training for representatives of PLHIV, TB and key populations communities on human rights and legal protection issues | - Training of representatives of PLHIV, TB and key populations communities on human rights, state social security and legal protection at mini-sessions, in the process of outreach work, or in the implementation of “Patients’ Schools for PLHIV and TB patients” (12 trainings) *(budget chapter №3)*  - Brief pocket books on key human rights issues for the program clients are developed and disseminated. (10,000 pcs. \* 1,5$) | 80% of PLHIV that receive medical services were trained at the “Patients’ School”, and know their rights and responsibilities in the field of HIV  20,000 booklets are printed and distributed | | The entire period  2019 | 22,560  15,000 |  |
|  |  | 3.3. Train HIV-positive adolescents on legal issues | - Conduct annual summer training camps for HIV-positive adolescents and their parents on human rights and their protection ($ 45 per 1 person per day for 10 days \* 360 people).  - Form groups in social networks for adolescents with HIV and establish contacts with positive adolescents from other countries  - Participation of adolescents in national and regional events on advocacy for the rights of children and adolescents (2 trips per year for 2 teenagers accompanied by parents – a total of 5 for $ 4,000) | 120 HIV-positive adolescents and their parents per year (a total of 360 people) are trained on legal issues, including through regional platforms | | The entire period | 162,000  20,000 |  |
| Module 6.4. HIV related legal service provision programs | Priority 4. Low access to legal services for PLHIV and key populations | 4.1. Establish a system for providing legal assistance on the basis of state institutions and NGOs | - A mechanism has been developed and a joint response system is functioning, with the Ombudsman Office, the National Preventive Mechanism against Torture, the General Prosecutor's Office, NGOs and communities, including legal assistance within the first 3 hours from the moment of detention for key populations *(budget chapter №19)*  - Legal and regulatory mechanisms of the LEAD model functioning (Law Enforcement Assisted Diversion) and the algorithm of state and non-state sectors’ actions in this model have been developed *(budget chapter №12)*  - Piloting of the LEAD model in the cities of Bishkek, Osh, Jalal-Abad is conducted ($ 8,000 x per 1 project per year) | Response within 3 hours from detention in 60% of cases of detention of PLHIV or key populations | | 2019-2020 | 13,264  25,264  24,000 |  |
|  | - A working group of 6 people is created. The working group has developed *(budget chapter №12):*       - service standards, the system of training and certification of street (para) lawyers on legal issues and skills of providing legal support to clients;       - educational and methodological materials on the protection of the rights of key groups for (para) lawyers;       - Qualification requirements for para-lawyers, social workers / peer consultants for the work with key groups, and suggestions are made to include them into the list / register of occupations and qualification requirements to meet the “public defender” criteria;       - consultations with the Ombudsman Institute for the integration of “street lawyers” into the work of the Institute  - Training of para-lawyers on human rights and legal service provision skills is conducted (1 5-day basic training and 2 2-day knowledge updating trainings per year.) a total of 1 basic and 6 knowledge updating trainings) *(budget chapter №1\*1; №18\*6)*  - Establish and support an interdepartmental working group with the participation of the Ministry of Health, the Ministry of Interior, the Ombudsman, the Prosecutor's Office and the National Center for the Prevention of Torture with the participation of civil sector representatives to improve the environment for the service provision to key groups (2-3 times a year - 6 meetings in total) *(budget chapter №8)* | Legal assistance to PLHIV and key populations is institutionalized in the system of state institutions and NGOs  60% of cases of legal service provision that fall within the competence of para-lawyers are brought to a final outcome  All para-lawyers working with PLHIV and key populations possess the knowledge and skills of legal issues related to HIV | |  | 25,264  24,724  4,584 |  |
|  |  | 4.2. Provide free or low-cost legal assistance to clients of HIV related prevention, treatment and care programs | - 28 para-lawyers will continue their activities: 4 people in 7 sites, 3 positions of mentors and 3 positions of qualified lawyers in the cities of Bishkek, Osh, and Jalal-Abad provinces for legal / advocatory support of test cases regarding PLHIV and key populations *(budget chapter #14a)* | 90% of people who applied for legal assistance in connection with rights violation received it.  80% of clients who applied for legal assistance are satisfied with the quality of received services | | The entire period | 348,996 | 285,904.82 |
|  |  | 4.3. Ensure the continuity of prevention and treatment services for PLHIV and / or key populations detained or released from detention facilities | - A working group has been set up to develop an interdepartmental instruction to ensure continuity of participation in prevention and treatment programs for PLHIV, TB patients and / or key populations between civilian and prison health care, and on the socialization of detained people after release *(budget chapter #19)*  - the Instruction is printed in 500 copies (500 \* $ 5)  - A round table is held to discuss and implement the Instruction *(budget chapter #6)*  - Technical support to the staff of the State Penitentiary Service and health care workers about the application of the Instruction in practice is provided  - Monitoring visits of decision-makers together with civil society institutions are organized to closed institutions, internal affairs bodies on the implementation of legislation in the field of HIV and human rights prevention and interdepartmental instruction (3 people together with the CBO twice a year, $ 200 х 3 years) | 80% of PLHIV and OST clients continue their participation in treatment programs when they enter detention facilities and after release | | 2018 and then the entire period | 13,264  2,500  2,844  3,600 |  |
|  |  | 4.4. Initiate advocacy activities for the empowerment of HIV-positive women and children | - Discussion of issues of empowering HIV-positive women and children, including monetary and non-monetary compensation of the state in case of nosocomial HIV infection or other damage caused by unauthorized actions of state structures and individuals in social networks, at national platforms and at a high political level (6 meetings in total) *(budget chapter #8)*  - Consultations with state structures responsible for social aid, with lawyers and prosecutors on evaluation issues and mechanisms for compensation of damage in such cases    - Study and promotion of international experience in providing compensation in case of violation of human rights and patient's rights to safe medical care  - Conduct activities in the framework of the worldwide campaign against AIDS and the AIDS Victims Remembrance Day  Round tables, meetings, publications, activities ($ 2,000 per year for 3 years) | Number of initiatives undertaken by various public authorities to ensure compensations/social protection of HIV-positive women and children | |  | 4,584  6,000 |  |
| Module 6.5. Programs for monitoring and reforming HIV-related laws, regulations and policies | Priority 5. Failure to implement existing legislation regarding the key groups’ rights observance | 5.1. Conduct an analysis of the Kyrgyz Republic legislation, other regulations, departmental orders and instructions, as well as law enforcement practices in the field of HIV infection and key populations | - A research organization or a group of experts is invited to conduct analysis of the Kyrgyz Republic legislation, other regulations, departmental orders and instructions, as well as law enforcement practices in the field of HIV infection and key populations, to identify inconsistencies and gaps in enforcement mechanisms *(budget chapter #19)*  - Focus group discussions with PLHIV and representatives of key population groups (in the capital and in the country's regions) to analyze law enforcement practices are conducted  - A round table is held to discuss the evaluation results *(budget chapter #6)* | The review of the Kyrgyz Republic legislation and law enforcement practices is prepared and discussed; recommendations for lawmakers and decision-makers are prepared | | 2018 | 13,264  2,844 |  |
|  | 5.2. Ensure preparation of annual reports (reviews) about the human rights situation of the key populations and the impact of rights violation on the HIV epidemic development | - 3 experts are invited to prepare an annual report about the human rights situation of the key populations and the impact of rights violation on the HIV epidemic development (2019 and 2020) *(budget chapter #19)*  - FGDs are conducted with PLHIV and representatives of key population groups (in the capital and in the country's regions) to obtain information from beneficiaries  - A round table is held to discuss the report *(budget chapter #6)*  - A round table is held to discuss the evaluation results about the dissemination of information among decision-makers.  - Preparation of alternative reports on HIV-related human rights issues in the framework of the Kyrgyz Republic's periodic reporting on the implementation of international commitments in the field of human rights and gender equality *(budget chapter #19)*  - Regular meetings with the MIA internal security service, employees of the Ministry of Health, the Prosecutor General's Office, the Ombudsman Institute and the National Center for the Prevention of Torture at the national and regional levels to inform about violations of rights, aspects of current legislation that provide for the respect of the key groups’ rights ($ 500 \* 6 meetings) | The main conclusions of the report are included into the annual reports of the Ombudsman to the Parliament of the Kyrgyz Republic, and into the reports to Treaty Monitoring Bodies about the implementation of the country's human rights commitments  Decision makers take measures to counteract the epidemic, based on HIV related human rights information | | 2019  2020 | 13,264  2,844  13,264  3,000 |  |
|  |  | 5.3. Provide advocacy and monitoring of legislation, regulations and practices related to HIV by civil society organizations | - Support to 4 networks / associations working with main key groups, PLHIV and TB patients to implement measures on eliminating human rights related barriers to access to HIV, tuberculosis services (26,836 per 4 networks per year \* 2.5) *(budget chapter #20)*   - Capacity building of network staff members and community members to carry out advocacy activities to improve policies and procedures related to ensuring availability and quality of services, procurement monitoring, principles of country coordination mechanisms functioning, etc. (2 trainings per year – total of 5 trainings) *(budget chapter #18)*  - Involvement of the civil sector and key population communities in the work of country decision-making mechanisms, including the Public Health Coordination Council, Public Advisory Council, boards of trustees, the coordination council for human rights, participation in working groups on the development and monitoring of national programs, policies and procedures related to HIV and tuberculosis related services  - Supporting community initiatives to improve legislation related to access to services, including advocacy for anti-discrimination legislation, monitoring the implementation of country commitments on gender and human rights; drugs policy, expansion of services related to HIV, TB, STI treatment, reproductive health (1,000 \* 2 per year \* 2 years)  - Initiation of the creation of boards of trustees under AIDS centers with the participation of PLHIV and TB community representatives, including the development and approval of the Regulations about the Councils, work plan, monitoring plan of the quality of service delivery for key groups *(budget chapter #19)*  - Conduct community meetings (forums of PLHIV, IDU, SW, MSM, TG) every two years to discuss human rights issues, including issues of service quality, their availability, overcoming stigma and discrimination. 2 PLWH forums and 1 IDU, SW, MSM forum – a total of 5 forums *(budget chapter #17)* | 90% of country mechanisms / initiatives for monitoring legislation and law enforcement practices are implemented with significant participation of civil society representatives, including PLHIV and representatives of key populations | | The entire period | 268,359.1  14,320  4,000  13,264  48,680 | 174,010.8 Including due to the main grant support of 3 networks –  $103,624.8  of which for two networks on HIV and 70,386 on additional one of TB component |
|  |  | 5.4. Introduce modern information technologies into the monitoring system of PLHIV and key populations’ rights observance | - Negotiations are conducted with mobile companies to introduce modern information technologies (SMS notification, [www.pereboi.kg](http://www.pereboi.kg) web site) to register free of charge complaints about the quality of services, cases of discrimination    -A page for the program clients complaints is created on the website of the AIDS Center and the Ministry of Health  - Payment to mobile operators and internet service providers ($ 100 to an internet service provider and $ 300 to an operator per month \* 26 months).  - A database is developed and introduced to document violations of the rights of PLHIV and key populations (the working group works periodically for 2.5 years) | There will be complaints submitted at the initiative of the service beneficiaries. Their number will increase in 2020 by 10 times as compared with 2018 | | 2018-2020 | 1,040  7,440 |  |
|  |  | 5.5. Conduct the Stigma Index assessment for PLHIV and key groups | - The national network of PLHIV is supported to work with a research organization or an expert group to assess the Stigma Index (2 studies in 2018 and 2020 among PLHIV and key populations) *(budget chapter #12)*  - Focus group discussions with PLHIV and Key populations are conducted (in the capital and in the regions of the country) to obtain information *(budget chapter #6)*  - A round table is held to discuss the assessment results | The assessment results are included into the annual report of the Ombudsman and in GARPR | | 2018  2020 | 50,528  2,844 |  |
| Module 6.6. Programs to reduce discrimination against women and girls in the context of HIV | Priority 6 High level of gender based violence associated with HIV or belonging to key populations | 6.1. Provide assistance to PLHIV and Key populations in the prevention of gender-based violence | - Training of PLHIV and Key populations on gender and violence prevention. Carrying out 10 mini-sessions per year on violence for all key groups, including in the women’s prison, as well as adolescents living with HIV. Including gender-based violence into the programs of human rights seminars; stigma and discrimination ($ 500 10 times a year \* 2 years)  - Introduction of innovative approaches to care provision to girls and women, representatives of PLHIV and key populations, victims of violence, including the WINGS model. In particular: motivational counseling; social support; asylum provision (2 projects for $ 8,000 per year) | Number of trained men, women and girls  Number of women and girls who have received assistance | | 2019  2020 | 10,000  16,000 |  |
| 6.2. Conduct advocacy on expanding access to HIV related and SRH information and services for adolescents | - The advocacy activities plan is developed to expand services for adolescents, to develop policies which overcome age of consent related barriers and provide access to health care services and information about HIV, STIs, sexual and reproductive health *(budget chapter #19)*  - Consultation meetings are held with key service providers: MH; MoES, as well as with decision-makers at the level of the Kyrgyz Republic Parliament and the Public Health Coordination Committee under the Government of the Kyrgyz Republic | Hearings on expanding adolescents’ rights to SRH services are held in social networks, at the level of parliament, MoES, and regional administrations | | 2019  2020 | 13,264 |  |
|  |  | 6.3. Introduce gender-sensitive programs for the prevention of sexual transmission of HIV for discordant couples of PLHIV | - Coverage by educational programs with a human rights component (Patients’ School) for PLHIV and their sexual partners is expanded ($ 5 per person who completed the full course of the Patients’ School - 700 people per year \* 3 years)  - Advocacy of increasing access to STI treatment and contraception services for PLHIV and their sexual partners | 80% of PLHIV's sexual partners received training on human rights  60% of PLHIV and their sexual partners are provided with access to STI and contraception services | | The entire period | 10,500 |  |
| **TOTAL AMOUNT** | | | | |  | | **1,513,751.1** | **513,911.6** |

***Requested amount: $* *999,839.5***

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| **3. Compliance with the minimum 1:1 funding match** |
| For each strategic priority areas included in your application,   1. Confirm whether the total allocation funding invested in the strategic priority area matches by at least a 1:1 ratio the total amount that you are requesting for matching funds. 2. Provide a justification if this minimum matching ratio is not met. As applicable, specify any potential funding sources that will be mobilized to increase investments in the strategic priority area. |

|  |  |  |
| --- | --- | --- |
| **Allocation funding** | **Matching fund** | **Ratio** |
| **513,911.6 $** | **999,839.5$** | **0.51:1** |

The Investment Case development, based on the Optima model conducted with the support from UNAIDS in 2015, reports the need for $ 16 million a year for activities to overcome the HIV epidemic. At the same time, the amount of funds to be allocated under the state program for 2017-2021 has decreased. This has been determined by significant decreasing of the international financial support, the ongoing financial crisis in the Kyrgyz Republic, and the heavy burden of the external financial debt, which has reached 55.4% of GDP. The Global Find is still the key donor and covers about 48% of the budget of the State Programme for 2017-2021. The allocation for Kyrgyzstan for the next funding cycle has decreased by 30%, threatening the sustainability of the gains and the continuation of basic services. At the same the country takes responsibility for ambitious goals on considerably increasing coverage of ART, prevention programme among key population, and TB treatment. Albeit the grant funds are more focused on maintaining the basic minimum package of services, there has been an increase in the funds allotted for overcoming human rights related barriers in accordance with the GF technical recommendations. This indicates significant commitment of the national stakeholders to scale up the response to such barriers.

Despite of difficult economic situation, the Government of the Kyrgyz Republic has expanded its investments into HIV/TB programs and is ready to allocate about $ 3 million for treatment programs for the period up to 2020, however, due to a significant 2.5 times increase in the number of PLHIV on therapy, the projected amount of funds will be largely directed to treatment programs and will be insufficient to maintain the prevention programs in full. This has leaded to the reduction of funds for prevention programs by almost 3 times. In such challenging circumstances, the opportunity to fully match the funds needed to remove human rights barriers to services from within allocation is significantly limited.

An analysis that informed the development of the current matching fund application indicates that activities to overcome human rights related barriers or to develop community systems which promote an enabling environment are implemented by a number of other donors. For example, Soros Foundation-Kyrgyzstan co-finances the “street lawyers” programs, in addition, Soros Foundation-Kyrgyzstan supports programs to protect the rights of key groups - sex workers and people using drugs. Total annual funding is about 300 thousand US dollars. At the same time, the Leader Project is implemented in the country with the support from PEPFAR funds for capacity building for PLHIV communities and reducing stigma and discrimination within health care facilities, with a project implementation period up to 2020. However, such external funding cannot ensure comprehensive impact to reducing human rights-related barriers.

The current Matching Funds Application, if fully funded, will allow build upon such programs implemented from within allocation, and those implemented by other donors, for a comprehensive, concerted and integrated approach to overcome human rights related barriers and to expand the availability of HIV and TB-related services.