



MINISTRY OF INTERNALLY DISPLACED PERSONS FROM THE OCCUPIED TERRITORIES, LABOUR, HEALTH AND SOCIAL AFFAIRS OF GEORGIA



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GEORGIAN NATIONAL CENTER FOR DISEASE CONTROL AND PUBLIC HEALTH

GEORGIA Brief 2020

The Global Fund Programs in Georgia

Georgia is implementing programs supported by the Global Fund to Fight AIDS TB and Malaria since 2003 when the first request for funding was approved for HIV Program. Since then, the country has received over 141.8 million USD investment to support the implementation of HIV, TB and Malaria programs (87 million for HIV Program, 41,9 million for TB and 3,5 million for malaria Program).

The Global Fund support was instrumental for:

- Elimination of malaria and no local case of malaria has been detected since 2010;
- Development and implementation of effective HIV response, which allowed to maintain low HIV prevalence status of the country and to provide universal access to lifesaving antiretroviral treatment for people living with HIV, diagnostics, and treatment; currently 5379 patients are on ART;
- Prevention of mother to child transmission of HIV through universal access to screening and prophylaxis treatment;
- Establishing effective TB response strategy and provision of universal anti-TB treatment for both, sensitive and MDR TB patients, setting up a network of laboratories and ensuring the functioning of quality control interventions; more than 20,000 patients received anti-TB treatment with the support of the Global Fund.

The Global Fund's total Investments in Georgia	
Total Disbursed	US\$ 141,799,297
Total Signed	US\$ 153,396,222
Total Committed	US\$ 147,424,722

Programmatic Achievements

Since 2005 all people living with HIV enjoy **universal access to ART** in Georgia, including individuals living in conflict zone -- Abkhazia. The Georgian ART Program is recognised as one of the best in the region due to its high coverage, good retention rates and high quality of the services provided. As early as in 2015, Georgia initiated **WHO Treat All strategy** and individuals were offered ART despite their CD4 count.

With the Global Fund support, Georgia was able to achieve significant break-through to provide HIV prevention services to communities most affected by HIV:

- Georgia was one of the first in the region to start **Opiate Substitution Treatment** program (in 2005), including in prisons;
- **Needle and Syringe Programs** scaled-up and operate from 16 drop-in centres and 9 mobile ambulatories, covering up to 55 cities;
- **HIV counselling and testing services and commodities** are available to female sex workers (FSW) and men who have sex with men (MSM) in 5 most affected cities of the country through intensive outreach work and community resource centres.
- Georgia is the first in the region to start a pilot on **PrEP among MSM community** (September 2017) with a plan to expand the program in the future.
- The HIV self-testing platform is developed to provide access to self-tests and HIV prevention commodities for KAPs



The **main challenges of HIV Program are low HIV case detection and high late diagnosis rates**, which needs acceleration of HIV testing and counselling services among KAPs that is largely supported by the Global Fund HIV Program.

The Georgian national TB program has achieved remarkable successes in the uptake and implementation of contemporary international strategies and guidance in TB control.

- Visible **reduction of TB Burden** has been documented in recent years, reflected in decreasing number of TB cases.
- The **universal access is ensured to diagnosis and treatment of all forms of TB**, including M/XDR-TB.
- The use of **novel rapid diagnostic methods**, as well as **of newly developed drugs** is scaled-up; in parallel, active drug safety monitoring system was introduced.
- Modern technologies are utilized to improve access to out-patient treatment through **Video Supported Therapy** program.

Georgia is one of the countries supported by the Global Fund Tuberculosis Regional Eastern Europe and Central Asia Project (TB-REP) and country strives to achieve “a people-centered model of TB care” as articulated in blueprint framework developed by the TB-REP project.

Within the Global Fund TB program, Georgia started implementation of **Zero TB Initiative in Adjara** region as a coalition of the local government, businesses, and civil society. The aim is to create an “island of elimination” that will contribute to lowering rates of TB through the country.



The hepatitis C elimination program has created a unique momentum for scale up of detection of HIV, HCV and TB cases in Georgia. In 2018 with the Global Fund support Georgia has started a pilot project in one of the highest prevalence regions of Georgia (Samegrelo) to test the potential

integration of HIV, TB and HCV screening services at the regional level with the increasing role of primary care in the detection and management of all three diseases under the “one umbrella”. The regional steering committee advocates and leads the implementation of the program with the support of the MoLHSA, NCDC and National TB and AIDS Centers. Based on the results coming from the pilot project, later the program was scaled up to cover all regions of the country.

C19RM: Supporting the country’s Covid-19 response

Georgia was one of the first countries in the region to mobilize about US\$ 500,000 from grant flexibilities and receive additional US\$ 1,271,000 from GF to mitigate the impact COVID-19 pandemic on HIV and TB programs and initiate urgent improvements in health and community systems, namely the funding support was directed for procurement of the C19 PCR testing equipment and tests, procurement of PPE for the service providers and the programs beneficiaries, for the capacity building of health workers and testing innovative telemedicine and mobile programs to ensure the sustainability of HIV and TB prevention and treatment interventions during the Covid-19 epidemic.

Sustainability of Programs in Georgia

For the funding cycle of 2019-2022 the budget of the GF programs has been decreased by 50% (\$15.8 million) with adequately increased co-financing requirements for the State. Although, for the next GF funding cycle of 2023-2025 the country allocation is not further decreasing (\$15.5 million), the GF is requesting at least \$2.6 million increase in the state financing of the National HIV and TB responses.

In response to transition challenges, Georgia has developed a **Sustainability and Transition Plan (STP)** with a broad stakeholder engagement and CCM leading. The Plan has addressed immediate and long-term challenges for ensuring a smooth transition of the Global Fund supported programs, and based on the plan the Government of Georgia has starting mobilization of domestic resources to ensure sustainability and scale-up of programs in response to the epidemics. Since 2015 it procures 100% of the first line ARV medicines, from 2017 it increasingly covers the cost of the Second line ARVs. From 2018 the State pays for HIV diagnostic tests and ARV treatment monitoring tests also. In 2018 with technical support of the WHO the National HIV Strategic Plan was updated for the period of 2019-2022 which fully considers the STP activities. From 2020 the Government has started investing in HIV prevention programs also starting with co-financing of the needle and syringe harm reduction program and with a clear plan for gradual takeover of the HIV prevention interventions, including the programs targeting FSWs and MSM.

With WHO EURO support the country plans a midterm review of the National HIV and TB Strategic Plans In 2021 to develop a foundation for the country’s new joint HIV and TB Proposal to the Global Fund. The WHO technical support will include analysis of epidemiological trends, clinical and laboratory service provision modalities as well as the setting the future targets.



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