

APPROVED

by the Federal Government

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STATE STRATEGY

to Combat the Spread of HIV in Russia through 2020 and beyond

I. General provisions

State Strategy to Combat the Spread of HIV in Russia through 2020 and beyond (hereinafter - the Strategy) defines the purpose, objectives and main directions of the Russian state policy to prevent the spread of chronic diseases caused by the human immunodeficiency virus (hereinafter - HIV).

The Strategy is aligned with the Concept of Long-Term Social and Economic Development of the Russian Federation till 2020, the Russian Demographic Policy Concept till 2025, the National Security Strategy, the Strategy of the state anti-drug policy of the Russian Federation till 2020, the National Action Strategy for children for the period 2012-2017, the state "Health development" program. Moreover, the Strategy is adopted to take into account the paragraph 55 of the Declaration "Transforming our world: the 2030 Agenda for Sustainable Development", adopted by the UN General Assembly resolution 70/1 on September 25, 2015.

The paragraph states that "the SDGs and targets are integrated and indivisible, global in nature and universally applicable, taking into account different national realities, capacities and levels of development and respecting national policies and priorities. Targets are defined as aspirational and global, with each government setting its own national targets guided by the global level of ambition but taking into account national circumstances. Each government will also decide how these aspirational and global targets should be incorporated in national planning processes, policies and strategies. It is important to recognize the link between sustainable development and other relevant ongoing processes in the economic, social and environmental fields".

The Strategy is the basis for the organization and interaction of the Russian state bodies, state bodies of the subjects of the Russian Federation and local self-government, state and socially-oriented non-profit organizations as well as HIV-response volunteers.

II. Current state of HIV response in the Russian Federation

The deterioration of the epidemiological situation in the Russian Federation is due to the increase in the number of new cases of HIV infection, the spread of HIV beyond key populations (populations at higher risk, vulnerable and highly vulnerable groups), as well as the high risk of complications and death from the

diseases associated with HIV infection (tuberculosis, hepatitis B and C) and acquired immunodeficiency syndrome (hereinafter - AIDS).

Higher risk populations include: injecting drug users, sex workers, people engaging into unconventional sexual relations.

Vulnerable groups include people who are potentially at risk of HIV infection in certain situations or under certain circumstances: teenagers and young adults, pregnant women, vagrant children, persons with no fixed abode, migrants, couples with one partner being a member of higher risk populations, health workers and certain other persons.

Particularly vulnerable groups of the population are prisoners and people in custody who are at risk of HIV infection when put together with the representatives of higher risk groups in state imprisonment institutions.

Since 2006, HIV incidence in Russia has been growing at an average rate of 10% a year. At the same time 22 regions of the Russian Federation determine 50% of the total number of new cases and continue to contribute to the intense epidemiological situation.

According to the state statistical survey, 824 706 positive HIV antibody tests that use the immunoblotting method have been registered in the Russian Federation between 1985 and 2015.

Every year the country sees an increasing number of people getting tested for HIV. 28.3 million Russian citizens and about 2 million foreign citizens passed an HIV test in 2015. Migration is one of the adverse factors in the HIV spread. In 2015 the number of HIV cases detected among foreigners has increased twofold compared to 2013.

The average HIV detection rate in 2015 accounted for 4.2 HIV+ per 1000 analyses. The detection rate is much higher in the key populations. It amounts to 51.5 per 1000 tests for injecting drug users and 31.1 per 1000 tests for prisoners. However, medical examination coverage for people who inject drugs remains low.

In 2015, more than 50% of HIV infections occurred through blood transmission (mainly through injecting drug use for non-medical purposes). Sexual transmission accounts for about 48% of the infections.

The increase in the number of registered pregnant HIV+ women is registered every year. In 1987-2015 HIV+ mothers gave birth to 145 287 children, 6% of them were confirmed HIV-positive. From 2006 to 2015, the risk of mother-to-child transmission (MTCT) decreased from 10.5% to 2.2%. This figure corresponds with the best international practices for PMTCT.

Current coverage of the Russian population with HIV-testing and antiretroviral therapy is inadequate, and the pace of its expansion is too low to achieve global results on reducing the HIV spread in Russia.

III. Main goal and tasks of the Strategy

The goal of the Strategy is to prevent the HIV spread in the Russian Federation by decreasing the number of new HIV cases and reducing AIDS mortality.

Achievement of this goal is possible through the implementation of the following tasks:

- increasing Russian citizens' awareness on HIV related issues as well as forming the social environment that excludes discrimination against people with HIV;
- developing and implementing inter-agency programs on HIV prevention designed to work in key populations. Involvement of socially oriented non-profit organizations is required;
- providing an integrated interdisciplinary approach in healthcare and social support to people living with HIV (PLH), including the increased HIV-testing and ART coverage, further decrease in MTCT, development and implementation of social adaptation and rehabilitation technologies for the PLH that also involve social support measures;
- improving the normative legal regulation in HIV prevention;
- utilizing the achievements of science and practice during the conduct of HIV prevention and treatment;
- improving epidemiological control and surveillance of the HIV spread in the Russian Federation on the basis of evidence-based approaches to epidemiological monitoring;
- improving the management, logistics and staffing of the specialized medical organizations that provide medical care to PLHIV.

IV. Areas of work for HIV spread prevention in the Russian Federation

1. Informing the citizens of the Russian Federation on HIV prevention

The general level of HIV awareness is still insufficient, and HIV prevention activities are mainly organized among students and workers.

HIV prevention includes the implementation of preventive measures which are aimed at the general population (primary prevention) and key populations.

The priority of primary prevention in 2016 becomes HIV advocacy that will be delivered through a specialized federal information database on HIV prevention, large-scale communication campaigns, integrated communication projects, national events, annual expert forums and a dedicated Internet information portal on HIV and AIDS.

The creation of such information database and Internet information portal will help form the responsible attitude towards the health in citizens as well as safe behavior related to HIV infection, strengthen the traditional family and moral values and reduce discrimination against PLH.

Expanded coverage of primary HIV prevention "at work" is planned for development in the framework of the general agreement among the national associations of trade unions, the national associations of employers and the Government.

In key populations the prevention of HIV infection should be carried out along with the prevention of associated diseases that increase the risk of complications and death.

This task shall be implemented through the development and implementation of targeted interventions concentrating on key populations, including the identification of HIV-positive individuals among the representatives of key populations, facilitation in their receiving of medical treatment, provision with social support, including the use of HIV prevention measures in the framework of primary healthcare.

For the strategic planning of HIV prevention activities it is necessary to ensure the monitoring and evaluation of the developed and implemented preventive programs.

2. Providing comprehensive interdisciplinary approach to healthcare and social support for PLHIV

Increasing HIV-testing coverage

HIV-testing which includes laboratory testing and counselling allows for early detection, treatment and prevention of new HIV cases through individual work with patients newly diagnosed with HIV.

In order to achieve this objective it is necessary to:

- generate motivation among the population for undergoing regular HIV-testing;
- expand the category of people subject to compulsory HIV-testing;
- provide for the possibility of HIV-testing for all patients who sought medical help for STDs, hepatitis B and C, tuberculosis;
- increase the level of coverage with HIV-testing among women of childbearing age;
- develop and implement preventive programs for serologically-discordant couples including HIV-testing of sexual partners of the pregnant women in such pairs;
- ensure maximum coverage of HIV-testing for patients that are to undergo invasive diagnostic or surgical procedures involving a high risk of HIV transmission through blood;
- offer HIV-testing in all medical institutions in the regions of the Russian Federation where there is an intensive growth in the number of new HIV cases, focusing on citizens aged between 18 and 49;
- create the conditions and motivation to pass an HIV-test in high-risk groups.

ART coverage increase and further reduction of MTCT

The provision of HIV-positive individuals with antiretroviral therapy not only significantly increases their life expectancy but also serves as one of the most effective means of preventing further HIV spread.

Early HIV detection and increased ART coverage for at least 60% of all HIV-positive will reduce the spread of HIV infection. Raising the treatment coverage to at least

90% of all the people infected with HIV will significantly improve the epidemiological situation.

The transition to early ART delivery will reduce the number of complications in patients with HIV and increase their life expectancy. ART coverage in 2015 amounted to 37.3% of those infected with HIV and put under medical observation, or 200 000 people.

In order to perform the tasks for increasing ART coverage the following actions have to be taken:

- creation and maintenance of the federal register of HIV-positive people;
- implementation of measures aimed at reducing the prices of antiretroviral drugs, including the centralization of public procurement, widespread use of generic drugs, conclusion of price agreements on the the production of the ARV drugs in the Russian Federation in the framework of import substitution policies, ensuring an uninterrupted supply of medicines and diagnostic tools;
- improvement of medical methods of prevention, diagnosis and treatment in patients who have HIV infection combined with tuberculosis, hepatitis B and C;
- extension of measures to ensure proper healthcare for HIV-positive people and to provide these individuals and their families with social support;
- creation of a system of palliative care for the HIV-positive people;
- development of inter-agency programs for individual case management of HIV+ pregnant women including the administering of ART to prevent MTCT;
- making sure all HIV+ children receive antiretroviral therapy as well as creating conditions for the regular intake of antiretroviral drugs;
- conducting ART effectiveness monitoring.

3. Development and implementation of social adaptation and rehabilitation technologies as well as social support measures for PLHIV, including the representatives of key populations

Rehabilitation, social adaptation and social support for HIV-positive members of key populations is no less important for stopping the epidemic than testing, treatment and prevention. This process can be facilitated through the engagement of socially oriented NGOs (NPOs).

In order to fulfil this task it's necessary to take the following steps:

- ensure the interoperability of healthcare organizations and social security authorities to provide integrated medical and social services for HIV-positive people and their families;
- apply effective technologies of social, educational, legal support for HIV+ children, develop the institution of adoption and custody of HIV+ children, carry out orphanhood prevention measures among children born to women with HIV;
- provide prevention, treatment and palliative care for HIV-positive individuals serving a sentence of imprisonment;

- ensure inter-ministerial collaboration in designing and implementing the interventions aimed at prevention, treatment, rehabilitation and social adaptation of HIV-positive drug users;
- assist socially oriented non-government (non-profit) organizations and volunteers involved in HIV prevention and treatment as well as the support of HIV-positive people. Ensure the interaction of these organizations with various government agencies.

4. Improvement of legal regulation for HIV prevention

Russian HIV response legislation was formed in 1980-1990 at the dawn of the HIV epidemic in the country. It does not meet modern requirements for providing the population with preventive measures, healthcare services, social adaptation, rehabilitation and social support for the HIV-positive.

This objective shall be completed by introducing amendments into the Russian legislation. The changes will include an update and unification of terminology, improved provisions for HIV-testing as well as for entry and residence conditions of foreign citizens and persons without citizenship, legal protection of the population from intentional HIV infection and broader participation of the civil society organizations working with the members of high-risk groups.

5. Utilization of the latest achievements science and practice in HIV prevention & treatment

Main research objectives in the field of HIV:

- creation of new and improvement of the existing technologies for prevention, diagnosis and treatment of HIV infection and associated diseases;
- science-based prediction of the epidemic process development;
- acquisition of fundamental knowledge in the field of HIV biology and immunology.

The development of the following items is a priority:

- methods of HIV prevention (including immunological) based on new technological solutions;
- Russian test-systems that also indicate the viral load;
- specialized (genotypic, phenotypic) tests to promptly assign and modify ART regimens based on the drug sensitivity of HIV;
- Russian anti-retroviral drugs;
- Cutting-edge approaches to HIV treatment based on the latest achievements of biomedical science.

6. Improvement of the epidemiological surveillance and control over the HIV spread in the Russian Federation with the help of evidence-based approaches to epidemiological monitoring of HIV

Evidence-based epidemiological monitoring will improve the epidemiological surveillance of the HIV spread in Russia.

In order to complete this task the following measures should be taken:

- organization of epidemiological, bio-behavioural, molecular studies and epidemiological monitoring of HIV infection in order to ensure full analysis of the features of HIV strains circulating in the Russian Federation;
- modelling of the epidemiological situation with HIV, formation of the system that delivers HIV spread estimates and assesses socio-economic impacts;
- improvement of the methodological approaches to conducting statistical surveys among HIV-positive people.

7. Improvement of the management, logistics and staffing at specialized medical organizations that provide medical care to PLHIV

The improvement of the management, logistics and staffing at specialized medical organizations that provide medical care to PLHIV is required for the facilitation of access and quality amelioration of medical services for people living with HIV. This will also increase the number of applications to healthcare organizations that will help identify HIV and initiate prompt treatment.

There should be cooperation and continuity in the work of primary healthcare institutions, specialized healthcare organizations providing medical assistance to HIV-positive people, medical institutions that specialize in infectious diseases (tuberculosis, hepatitis B and C) and substance abuse (drug-addiction) at the stages of identifying new HIV cases and delivering medical assistance to people living with HIV.

In addition, it is planned to integrate off-site (including the use of mobile laboratory complexes) and provision of an "in-patient facility" replacing more conventional forms of work during the provision of medical care to PLHIV.

Human resources development will be achieved through:

- continuing education and training of healthcare workers, teaching staff at vocational education institutions and higher education establishments on HIV related issues;
- development and implementation of additional professional programs for the specialists in demand;
- improvement of the training system for HIV-prevention specialists, including primary healthcare.

V. Performance targets of the Strategy

The results of the Strategy's implementation will be assessed based of the following indicators:

- HIV-testing coverage of the general population in the Russian Federation;
- percentage of HIV-positive individuals under medical observation from the total number of people living with HIV;
- percentage of HIV-positive individuals receiving ART from the total number of PLHIV;
- percentage of HIV-positive individuals receiving ART from the total number of PLHIV under medical observation;
- chemoprophylaxis of HIV transmission from mother to child (during pregnancy, labor and to the newborn).

Performance targets of the Strategy are indicated in the appendix.

VI. Main features of the Strategy's implementation

Activities for the period 2016-2020:

- approval of the Strategy's implementation plan;
- implementation of legal regulation measures that ensure the improvement of federal laws and Russian legal and normative acts in connection with the adoption of the Strategy;
- adjustment of the relevant state programs of the Russian Federation and its regions ;
- development of regional programs to combat the spread of HIV and associated diseases while taking into account both general and inherent characteristics of the region's epidemiological, economic, traditional, geographic and other situations;
- involvement of the civil society representatives in HIV response (including socially oriented non-profit organizations);
- formation of the necessary conditions to increase HIV-testing and ART provision coverage;
- support of the existing and development of new strategic pathways to joint international HIV response projects within the framework of the Eurasian Economic Union, BRICS, the Commonwealth of Independent States, the Shanghai Cooperation Organization, the United Nations;
- utilization of unified approaches to monitoring and evaluation of the Strategy's events carried out at federal and regional levels. The approaches are determined taking into account the peculiarities of interagency cooperation and the participation of socially oriented non-profit organizations working with key populations;
- utilization of unified approaches to monitor and evaluate the Strategy's activities carried out at federal and regional levels. The approaches are determined taking

into account the peculiarities of interagency cooperation and the participation of socially oriented non-profit organizations working with key populations;

- the Strategy's progress assessment.

The Strategy is funded from the federal budget, the budgets of the Russian Federation's regions as well as from other sources.

In order to achieve maximum value for the Strategy's designated targets, the subjects of the Russian Federation should provide suitable funding for HIV-testing and ART coverage increasing projects beforehand.

VII. Expected results

Implementation of the Strategy will allow to:

- increase the HIV-testing coverage;
- increase the number of people living with HIV on ART, including the patients on early stages of the disease;
- reduce the risk of mother-to-child transmission to a minimum;
- increase citizens' awareness on the prevention of HIV and associated diseases;
- reduce the discrimination against people living with HIV in their families, at the workplace and in healthcare institutions;
- improve the system of epidemiological control and surveillance over the HIV spread in the Russian Federation.

APPENDIX
to the State Strategy to Combat the Spread of HIV
in Russia through 2020 and beyond

PERFORMANCE TARGETS
of the State Strategy to Combat the Spread of HIV
in Russia through 2020 and beyond

Indicator name	UOM*	Indicator values					
		2015	2016	2017	2018	2019	2020
1. Coverage of the general population with HIV-testing	%	19,3	NLT* 20	NLT 21 (35 ¹)	NLT 22 (35 ¹)	NLT 23 (35 ¹)	NLT 24
2. Percentage of HIV-positive individuals under medical observation from the total number of people living with HIV	%	66,1	69,1	74,2	79,5	84,7	90

Indicator name	UOM	Indicator values					
		2015	2016	2017	2018	2019	2020
3. Percentage of HIV-positive individuals receiving ART from the total number of	%	26,3	30,3	32,3 (45,1 ¹)	34,3 (60,2 ¹)	36,3 (75,3 ¹)	38,3 (90 ¹)
4. Percentage of HIV-positive individuals receiving ART from the total number of under medical observation	%	37,3	41	44 (69,7 ¹)	48 (79,8 ¹)	52 (90,1 ¹)	56 (100 ¹)
5. Chemoprophylaxis of HIV transmission from mother to child							
during pregnancy	%	88,8	89	92	93	94	95
during labor	%	92,7	93	93,5	94	94,5	95
to the newborn	%	99,4	99,5	99,6	99,7	99,8	99,9
6. Level of HIV awareness in populations aged 18-49 years	%	-	-	84	87	90	93

Indicator name	UOM	Indicator values					
		2015	2016	2017	2018	2019	2020
7. Development and implementation of inter-agency HIV prevention programs for injecting drug users	quantity	-	-	1 ²	85 ³	85	85

¹ Target values of the Strategy's implementation are indicated in the parentheses. Successful completion of the Strategy's objectives is only possible if suitable funding for 2017 HIV-testing and ART coverage increasing projects is provided and then maintained for the years to come.

² Typical interagency preventive program to reduce HIV infection among injecting drug users.

³ Interdepartmental prevention programs of the Russian Federation subjects to reduce HIV infection among injecting drug users.

*UOM=Unit of Measurement; NLT=Not Less Than
