Kyrgyzstan
Community, Rights and Gender Country Profile
Working Document
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Quick Facts

6.52 million people

Working Document

High MDR/RR-TB Burden Country

Eastern Europe and Central Asia
UNHLM Targets

Resource Needs (2022)
47.99 million (USD)

Available TB Funding 2020 (USD)
- Domestic: 8.8 million
- International (Excluding Global Fund): 1.6 million
- Global Fund: 6.9 million
  Funding Needs: 16.1 million

Diagnosis and Treatment Targets (2020)
- TB Target: 6,900
  % Target Achieved: 71
National Strategic Plan and Funding Opportunities

• Next National Strategic Plan Development: 2026

• Next Global Fund funding request proposal development: 2023
TB Situation

Epidemiological Data (2020)

The CRG assessment conducted in 2016 identified the following:

**Accessibility Barriers**: include domicile regulations or passport requirement for people with prison history and migrants, stigma and out of pocket payments in rural areas, illegal immigration to avoid TB testing hinders healthcare access in host country, limited access to social support, discriminatory treatment of key population by HCWs in PHCs especially for people with DR-TB and long distances to TB clinics

**Availability issues**: lack of peer support programs in prisons.

**Quality issues**: DOT causes employment problems, stigmatizing & discriminatory treatment by HCWs in PHCs affects quality of care.

**Major Gaps in TB Prevention and Care**
- 2,659 Missing people with TB (320 were children)
- 300 people died because of TB
- 1,038 Laboratory confirmed people with MDR/RR-TB (WHO data, 2020)

**Acceptability issues**: DOT causes discriminatory treatment of key populations by HCWs in PHCs especially for people with DR-TB. Criminality code allows compulsory treatment of prisoners with TB. TB contacts investigation policy and practice violates privacy; TB contacts are contacted without informing person with TB, people with TB thus withhold information about their contacts, including coworkers.

**Discrimination issues**: There is no specific legal prohibition of TB discrimination. People with TB experience various kinds of discrimination in employment; Government decree prohibits people with TB from working in a list of “client-facing” professions, including transport, household services, food work and work with children. Discriminatory treatment of key populations by HCWs in PHCs especially for people with DR-TB.

**Freedoms**: There is no legal protection for right to privacy or confidentiality of people with TB. Criminal code allows compulsory treatment of prisoners with TB. TB contacts investigation policy & practice violates privacy; contacts are contacted without informing person with TB, people with TB thus withhold info. abt. their contacts, including coworkers.

**Gender**: women with TB are subjected to physical, emotional and sexual violence because of the disease

Women experience delayed diagnosis due to male control of family finances, cost of services, fear of family and community stigma, and social isolation. Women experience self-stigma due to limited knowledge about TB transmission. Pregnant women with DR-TB are advised to abort fetus. Men delay diagnosis and treatment to avoid work disruption.

**Key and Vulnerable Populations** prioritized are PWUD, prisoners/ people with history of prison, internal migrants. people with prison history, migrants struggle to access healthcare due to domicile regulatory requirements and lack of passport. Often the homeless, PWUD & people with prison history are stigmatized in health system. Lack of OST in TB clinics is treatment barrier for PWUD.

**Participation**: people affected by TB and CSOs/CBOs are permitted to engage in TB program decision-making, but there is no support or facilitation of their participation

**Remedies and Accountability**: TB law requires government to provide legal consultations and other legal aid to people with TB. Public health law provides accountability for authorities who fail to fulfil health obligations and HCWs who fail to provide safe services. People with TB lack knowledge about their rights and lack access to legal services, despite available of free legal aid.

Source: HHR: Health and Human Rights Journal: Building the Evidence for a Rights-Based, People-Centered, Gender-Transformative Tuberculosis Response: An Analysis of the Stop TB Partnership Community, Rights, and Gender Tuberculosis Assessment
Community Engagement and Representation

Active National Stop TB Partnership
- No

National Network of People Affected by TB
- TBpeople Kyrgyzstan

TB Network/CSO represented on CCM
- Yes

High-Level Engagement with Parliamentarians
- No

Celebrities Engagement in TB response
- No

Challenge Facility for Civil Society Round 10
- Public Foundation AIDS Foundation East-West in the Kyrgyz Republic
- TBpeople Kyrgyzstan

CFCS Round 10 Regional Level Partners
- TB Europe Coalition (TBEC)
- Center for Health Policies and Studies

Global Network:
- TBpeople
- Lean on me Foundation/TB Women
Community Rights and Gender

- CRG Assessment Complete ✓
- Costed CRG Action Plan Available ☒
  - No
- TB Stigma Assessment Conducted ☒
  - No
- TB Stigma Elimination Plan Available ☒
  - No
- Community-led Monitoring Mechanism ✓
  - in progress
CFCS Round 10 Grantees

Public Foundation AIDS Foundation East-West in the Kyrgyz Republic

- Global Fund Sub Recipient
- Project Location: Osh Region, Jalal Abad Region and Batken Region
- Timeline: December 2021 - December 2022
- Objectives
  - To empower people affected by TB to access health and support services, claim their rights and identify and reduce stigma through the popularization of OneImpact Kyrgyzstan mobile Application
  - To integrate community-led monitoring data for use in national responses and at local level to overcome challenges and barriers to TB services
  - To upgrade the OneImpact platform based on experiences and lessons learnt in Kyrgyzstan
  - To organize and implement advocacy and communication activities and campaigns to ensure the sustainability of OneImpact CLM in the TB response
  - To participate and engage in TB advocacy and accountability initiatives at national, regional, and global levels.
CFCS Round 10 Grantees

TBpeople Kyrgyzstan

- Global Fund Sub Recipient
- Project Location: Bishkek
- Timeline: January 2022 - January 2023
- Objectives
  - To build the capacity of TB affected communities - TB survivors and TB key and vulnerable populations in Kyrgyzstan.
  - To participate and engage in TB advocacy and accountability initiatives at national, regional, and global levels.
Questions? Contact us.

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