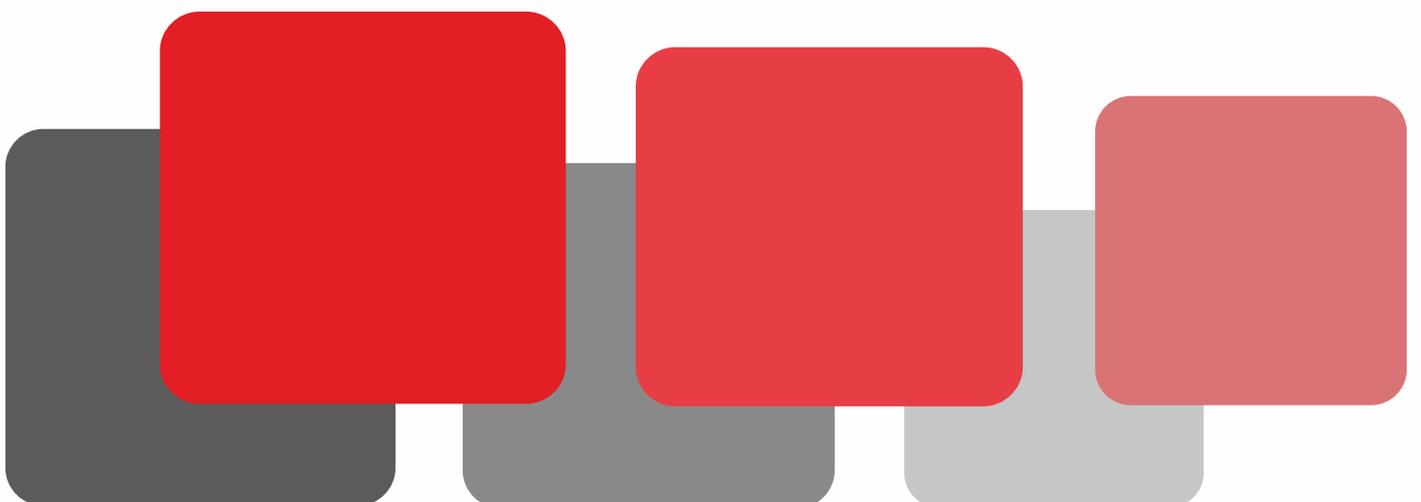




*Eurasian Coalition
on Male Health*

90-90-90

**Analysis of the Cascade of Comprehensive
HIV Prevention and Treatment Services
among MSM in the Countries of CEECA**



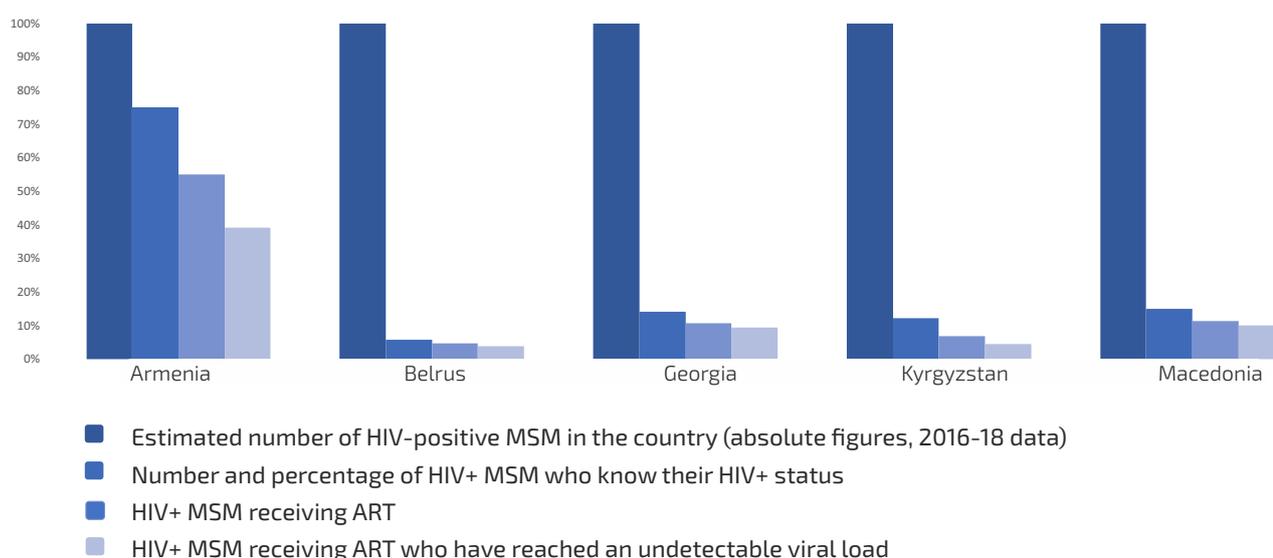
In 2018, no more than 4 out of every 10 gay men and other MSM infected with HIV in Eastern Europe and Central Asia were aware of their HIV infection. Therefore, the majority of these men do not receive the necessary treatment and support, while the uncontrolled spread of HIV among MSM continues. An analysis of cascades of HIV prevention and treatment services for MSM carried out by ECOM has led to this conclusion.

On the other hand, the analysis conducted shows that more than 60% of MSM who know their HIV status and who have sought treatment are already receiving modern antiretroviral therapy (ART). Moreover, 79% of those receiving ART for more than 12 months have reached an unde-

tectable viral load, meaning that HIV cannot be transmitted from them to other people, and that the health of these HIV-positive men is also protected.

Researchers pointed to the slow introduction in countries of innovative testing programs carried out by LGBT organizations, as well as of self-testing programs, as one of the main obstacles for gay men and other MSM to undergo HIV testing. Other significant barriers include high levels of stigma and frequent cases of discrimination that gay men and other MSM encounter when seeking sexual health services.

Cascade. Results: Coverage by services



	Estimated number of HIV-positive MSM in the country	Number and percentage of HIV+ MSM who know their HIV+ status	HIV+ MSM receiving ART	HIV+ MSM receiving ART who have reached an undetectable viral load
Armenia	100	75 / 75%	55 / 73,3%	39 / 71%
Belarus	4621	259 / 5,6%	211 / 81,5%	172 / 81,5%
Georgia	4490	640 / 14%	479 / 75%	422 / 88%
Kyrgyzstan	1115	135 / 12,1%	76 / 56,3%	49 / 64,5%
Macedonia	1092	165 / 15%	123 / 75%	109 / 89%

The analysis was carried out based on reports on the cascades of comprehensive HIV prevention and treatment services among MSM in 9 countries of the region. In Armenia, Belarus, Georgia, Kyrgyzstan, and Macedonia, the collection of relevant data was carried out by LGBT and PLH community organizations with the technical support of ECOM and funding from the Global Fund to Fight AIDS, Tuberculosis and Malaria. Information about the situation in Russia, Kazakhstan, Kyrgyzstan, and Tajikistan were taken from reports on projects carried out in these countries by other organizations. (The full text of the regional review will be published by the end of 2018.)

As part of the collection and analysis of data for the cascade, members and partner organizations of ECOM in Armenia, Belarus, Georgia, Kyrgyzstan, and Macedonia worked in close cooperation with experts of national ministries of health and the staff of AIDS centers.

In the future, ECOM plans to support its members and partners in the regular collection of data on the cascade of HIV services for MSM and trans people, and to use this data for the development of cooperation with governments and international organizations.

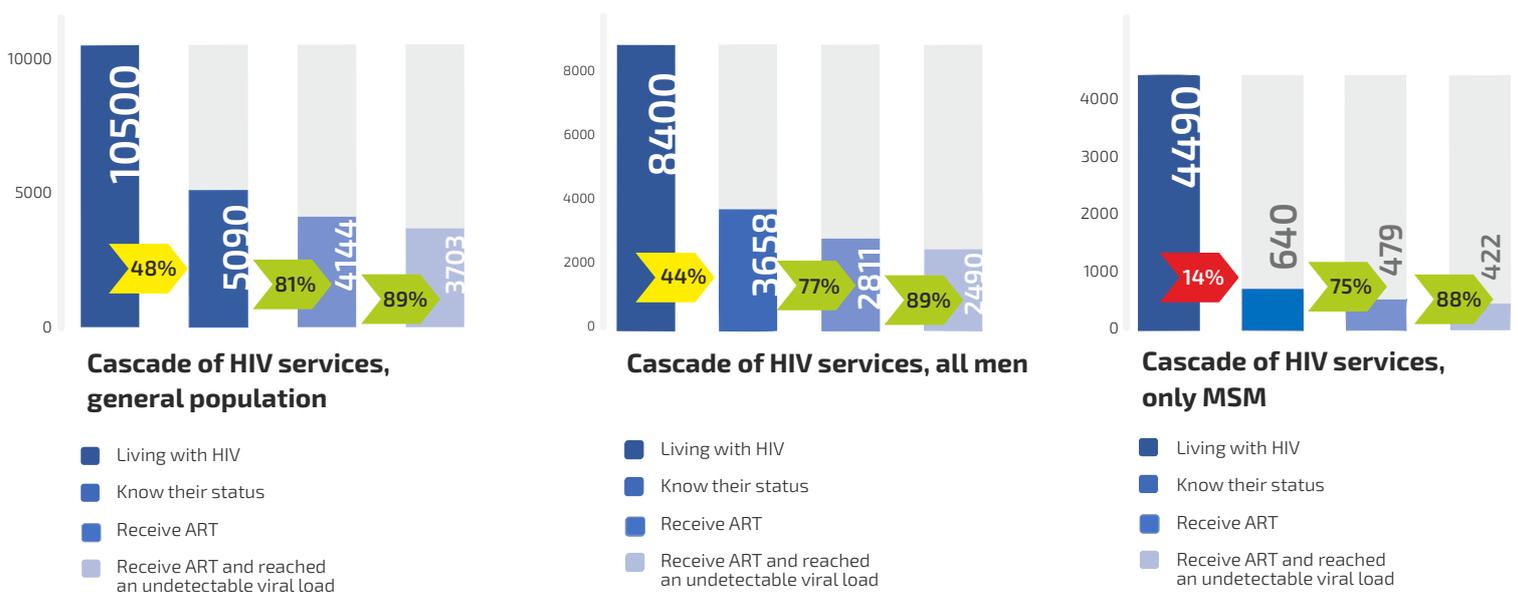
Improving the quality of data on the coverage and content of HIV prevention, treatment, and support services for MSM and trans people is another area for cooperation. During the course of data collection, researchers noted that in many countries, there are no reliable MSM population size estimates, no national package of services for key populations or standards on the provision of HIV prevention and support services for MSM and trans people, no qualitative assessments of the unit cost of prevention services, and no disaggregated data on the coverage of individual key populations, such as MSM and trans people, people who use drugs, and sex workers, with various prevention and treatment services.

The low level of trust among MSM towards sexual health service providers is one of the main factors affecting the quality of statistical data. For example, the reluctance of MSM to reveal their sexual behavior to healthcare workers leads to distorted statistics at all stages of monitoring, from determining the number of HIV-positive MSM who know their status to estimating the number of those HIV-positive MSM who receive ART and have reached an undetectable viral load.

The cascade of services is a monitoring tool, with which it is possible to evaluate the success of national anti-HIV programs, including those parts which deal with HIV prevention and treatment among MSM and trans people. The UN recommended to use a cascade of three interconnected indicators, called "90-90-90" in order to monitor the success of the HIV response: 90% of people living with HIV should have the opportunity to know their status, no less than 90% of those who know their HIV status should have access to ART, which should be effective enough that 90% of those receiving ART reach an undetectable viral load.

Cascade. Results:

MSM in comparison with other population groups (example of Georgia)



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