

# GEORGIA

*Report prepared by the Joint UN Team on AIDS*

## PROGRESS TOWARDS THE FAST-TRACK TARGETS

COUNTRY PRIORITIES/ TARGETS BY END OF 2021	STATUS	RESULTS, END OF 2020
Testing & Treatment: 90% of people living with HIV know their status; 90% of people living with HIV are on treatment, and 90% of those on treatment are virally suppressed.	<b>ON TRACK</b>	76% of people living with HIV know their status; 86% of people living with HIV who know their status are on treatment; and >95% of those are virally suppressed (GAM 2021).
Elimination of mother-to-child transmission (eMTCT) validation; Prevention of mother-to-child transmission (PMTCT) coverage target >95% for 2020.	<b>ON TRACK</b>	National surveillance systems to monitor key indicators for progress in eMTCT have been developed in partnership with government; eMTCT validation submission due in 2020 has been delayed due to COVID-19, but is on track for 2021. From 94% in 2017, PMTCT coverage was at 95.1% in 2019 and 89.5% in 2020. This slight decrease might be due to COVID-19 pandemic related restrictions (National Centre for Disease Control and Public Health, NCDC).
Human rights, stigma & discrimination, and creating an enabling environment.	<b>ON TRACK</b>	With the revision of laws, and the provision of trainings and tools, policy and legal environment was further strengthened in 2020 to prevent HIV-related stigma and discrimination, and address gender-based violence.

### JOINT TEAM

UNICEF, UNDP, UNFPA, UN WOMEN, WHO, UNRCO

## JOINT PROGRAMME CONTRIBUTIONS AND RESULTS IN 2020

*Georgia has been making progress towards the 90-90-90 targets, through technical assistance and capacity building from the Joint Team. An expanded network of mobile laboratories has increased testing capacity, and self-testing was introduced in 2020. Infrastructure for preventing mother-to-child HIV transmission has been strengthened, through the development of new monitoring systems and an antenatal ‘roadmap’ process for pregnant women. This enables Georgia to continue its pursuit of eMTCT validation. Creating an enabling environment for women, key populations and people living with HIV has been another area of focus in 2020—for example, strengthening legal protection for victims of gender-based violence (GBV). Finally, in partnership with healthcare workers, government agencies, and through strong community engagement, the Joint Team worked to reduce stigma and discrimination in health services.*

### TESTING AND TREATMENT TECHNICAL SUPPORT

Late diagnosis of HIV is an issue in Georgia. In 2020, 50.3% of new infections were detected late (GAM 2021). In order to improve early detection, the network of nine mobile laboratories offering HIV testing actively expanded its services to fieldwork in various cities, reaching 45 cities in total by end of 2020. Under the Integrated Screening Programme, 62 000 tests were performed between January-July 2020, detecting 36 cases of HIV. Self-testing for HIV was also introduced in 2020 in accordance with the National Strategic Plan: 818 men who have sex with men and transgender people were tested in Tbilisi, Georgia, Batumi and Kutaisi. The programme was based on internet platform and tests were delivered through mobile courier service.

In 2020, the Joint Team partnered with the National Centre for Disease Control and Public Health (NCDC) to conduct two studies to analyse perceptions and attitudes of people living with HIV, key populations, young people and health professionals on the factors influencing HIV testing behaviour. The studies explored the barriers and motivating factors related to HIV testing, and identified different modalities for HIV testing that would be preferred by the target groups and well-accepted by service providers. Findings from this quantitative and qualitative research were translated into actions for behaviour change in terms of access to testing. Inputs were also made for the development of a narrative study (over 200 personal stories from young people), which informed a randomized control trial, itself an integral component of a comprehensive HIV/AIDS prevention, care, and support programme aimed at increasing knowledge about the target population’s behaviour.

### ELIMINATION OF HIV VERTICAL TRANSMISSION TECHNICAL SUPPORT; PARTNERSHIPS; COORDINATION

Intensive work has been carried out on the National eMTCT validation report and early childhood transmission of Hepatitis B. The report was due for submission in 2020, but this has been delayed until 2021 due to the COVID-19 epidemic.

Strategic information around eMTCT has been strengthened through the development of an effective monitoring and evaluation (M&E) system, providing technical support to the NCDC to work with existing government systems to incorporate the registering of HIV and syphilis testing information, create an eMTCT dashboard, and an analytical module on HIV and Syphilis, which enables central and district level analytical reports on vital eMTCT indicators. In addition, a road map for pregnant women during antenatal visits (including information on HIV/STIs, and free diagnostic and treatment services provided at state-funded antenatal services) was developed and distributed nationally.

## **ADDRESSING STRUCTURAL BARRIERS TO THE HIV RESPONSE**

### **TECHNICAL ASSISTANCE; ADVOCACY; CAPACITY BUILDING; PARTNERSHIPS; POLICY ADVICE**

Support was provided to the Ministry of Health for the successful update and review process of the HIV legislation, in close partnership with the NCDC and Public Health and the AIDS Centre, further realizing the rights of people living with HIV for health and social assistance and employment.

To strengthen policy and the legal environment for addressing GBV among key populations, work was carried out in partnership with the government and the Global Fund to develop a three-year action plan (2021-2024) for better GBV detection, prevention, and response among key populations, endorsed by the Country Coordinating Mechanism. Recommendations have been developed for further integrating GBV services into the National Referral Mechanism.

Technical assistance and capacity building were provided to reduce HIV-related stigma in the healthcare sector, providing 100 frontline service staff with the skills and knowledge for quality service provision for key populations. Five consensus/training meetings were conducted for health care providers and managers, policymakers and CBOs, on the use of a stigma assessment tool for medical facilities and related stigma and discrimination reduction training manual, to be institutionalized in healthcare services.

## **CONTRIBUTION TO THE COVID-19 RESPONSE**

### **TECHNICAL ASSISTANCE**

In partnership with the NCDC, support was provided to assess the needs of key populations during COVID-19, analysing measures undertaken as part of the response to the pandemic (in terms of service delivery, health and psychosocial challenges, socio-economic impact, and wellbeing), assessing their effectiveness, and recommending refinements where needed. Based on the findings, effective referral and communication plans for improved management were elaborated. Major challenges found were the linkage to health and social services, loss of employment and income, and vulnerability to violence, including domestic and GBV; and experience of discrimination and stigma (including people who inject drugs, sex workers, men who have sex with men, transgender people, and people living with HIV/tuberculosis).

With advocacy and coordination assistance from the Joint Team, the country also introduced ARV home-delivery via mobile ART teams and postal services during the COVID-19 pandemic, and three-month supply of ARVs were dispatched for people living with HIV to ensure treatment adherence.

## **CONTRIBUTION TO THE INTEGRATED SDG AGENDA**

The Joint Team worked under the 2016-2020 United Nations Partnership for Sustainable Development (UNPSD) towards achieving the 2030 Agenda and leaving no one behind, with a focus on i) democratic governance, ii) jobs, livelihoods and social protection, iii) education, iv) health and v) human security and resilience. Preparation of a United Nations Sustainable Development Cooperation Framework (UNSDCF) for 2021-2025 is underway, expected to further guide the collective UN support to Georgia to reach the SDGs, and in particular enhance social equality and protect most vulnerable people.

PERSISTING AND EMERGING CHALLENGES AND BOTTLENECKS	KEY FUTURE ACTIONS TO RESPOND TO CHALLENGES AND UNBLOCK BOTTLENECKS
<p>Low detection rates of HIV are a major challenge: more than one-third of estimated number of people living with HIV (35%; 3150 infected, NCDC data) still remain unaware of their HIV status. Late diagnosis also remains a significant challenge: over half (between 51-56% in recent years, NCDC data) of newly diagnosed persons were presented to care late.</p>	<p>Continue to prioritize HIV prevention portfolio, with particular focus on needs of key populations, including young key populations.</p> <p>Lead advocacy work and apply a participatory approach to address barriers to HIV testing among target populations through developing a communication strategy.</p> <p>Increase motivation for testing among young people by supporting non-formal learning methods to raise awareness on HIV among young people on HIV, to provide information on the services available and to facilitate referral to HIV testing.</p>
<p>Young people are particularly vulnerable to HIV, due to the lack of access to SRH services, information and stigma and discrimination. Access to healthcare services is constrained if HIV positive status is revealed outside HIV-specialized clinics. Poor quality healthcare is exacerbated due to the stigma and discrimination, resulting in lower access to and uptake of HIV prevention services, especially by adolescents and young key populations.</p> <p>Gender inequalities were exacerbated by the COVID-19 pandemic; about 11% of Georgians have heard of or felt increased gender-related discrimination after the outbreak of COVID-19. Notably, more women have felt or heard of domestic violence (Rapid Gender Assessment of the COVID-19 Situation in Georgia, 2020).</p>	<p>Strengthen stigma-free healthcare services through enriching existing online module on HIV prevention and capacitating medical professionals on issues related to stigma and discrimination (including the introduction of an amendment in the standard operating procedure of the Healthcare System Response to violence against women and domestic violence for key populations at high risk of HIV/AIDS).</p> <p>Support development and launch of effective behaviour change communication and counselling services for all key populations, including young key populations.</p> <p>Enrich existing online module for healthcare professionals to increase medical professionals' awareness on issues related to sexual orientation and gender identity.</p>
<p>There is a need to sustain and strengthen the national HIV response and ensure effective planning of transitioning to the state funding.</p>	<p>Provide support to NCDC to evaluate HIV/AIDS National Strategic Plan 2019-2022 and make adjustments, as necessary and to develop a Global Fund funding request.</p>

---

Report available on the  
**UNAIDS Results and Transparency Portal**

[open.unaids.org](https://open.unaids.org)