

5. Interaction between Legislation and Local Elites: A Strategic Partnership to Improve the Effectiveness of NGOs in Preventing Drug Abuse and Infectious Diseases in Central Asia

Introduction

One of the most serious public health problems in Central Asia is the growth of infectious diseases, especially tuberculosis (TB) and HIV/AIDS. These diseases have a significant, devastating impact on public health and can easily cross national borders, requiring coordinated efforts at the regional level for their effective control and prevention. Socio-economic conditions in Central Asian countries, including high levels of poverty, inadequate access to health services, and inefficient health systems, contribute to the spread of these infections. Additional factors such as labour migration, poor veterinary control, and Human immunodeficiency virus (HIV) also play a key role in the increase in TB cases.

From 1990 to 2024, the number of TB cases in Central Asian countries increased twofold or more. This is due to worsening socio-economic conditions, with poorer areas and younger age groups being most affected. Cross-border activities, including labour migration and trade, contribute to the spread of tuberculosis and HIV infection. HIV remains a major public health problem in the region. According to the United Nations Program on HIV/AIDS (UNAIDS), by early 2020, there were about 38 million people living with HIV worldwide, of whom 1.7 million were newly infected in 2019 (Mamady et al. 2021). The countries of Eastern Europe and Central Asia show one of the highest rates of HIV epidemic spread.

In such a complex epidemiological situation, non-governmental organisations (NGOs) play an important role in the prevention and treatment of infectious diseases. NGOs are uniquely positioned to work with vulnerable populations and provide services that governmental structures often cannot fully provide. However, effective functioning of NGOs requires close cooperation with government structures, stakeholders and local elites to ensure stable funding, access to necessary resources, and legal protection.

This chapter examines the state of NGO legislation in Central Asian countries and the role of local elites in supporting and cooperating with NGOs to increase their effectiveness in combating drug abuse and infectious diseases. The analysis of existing legislation in Kazakhstan, Kyrgyzstan, Tajikistan, and Uzbekistan identifies key problems and barriers faced by NGOs, as well as possible ways to overcome them. Special attention is paid to the issue of interaction between legislative bodies and NGOs, as well as strategic partnerships aimed at improving public health and sustainable development in the region.

Public Health Challenges in Central Asia

In Central Asia, one of the most threatening public health problems is the growth of infectious diseases. Tuberculosis and HIV/AIDS are two major threats to Central Asia and to most regions of the former Soviet Union. These diseases have a devastating impact and easily cross borders, making a coordinated regional approach to combatting them necessary, especially in the face of the rapidly deteriorating epidemiological situation in the region.

In the Kyrgyz Republic, HIV/AIDS represents a particular public health challenge. As of 1st January 2020, 9,148 cases of HIV infection were officially registered in the Republic, which is 143.2 cases per 100,000 population. The increasing number of people infected with HIV increases the likelihood of transmission through various routes, including sexual transmission, through blood during intravenous drug administration, blood transfusion, and blood products, through parenteral interventions, and from an infected mother to a

foetus. As the epidemic develops,¹ the number of people unable to work and in need of treatment and social rehabilitation increases.

Between September and October 2023, the United Nations Office on Drugs and Crime (UNODC) successfully organised a series of national round tables to launch the second phase of the project entitled the “Regional Network of Youth Organizations and Youth Champions for Change in Central Asia for a Drug-Free, Healthy, Safe and Environmentally Protected Society”. The project is a joint project of the UNODC Regional Office in Central Asia and the Prevention, Treatment and Rehabilitation Section of UNODC Headquarters. More than 120 young leaders and representatives of national and international organisations involved in drug use prevention among youth participated in round tables held in Kazakhstan, Kyrgyzstan, Tajikistan, Turkmenistan, and Uzbekistan. Young leaders of the UNODC Regional Youth Network presented their drug use prevention activities for the period 2021–2022 in each Central Asian country and presented the Network’s Charter and vision.

During the discussions, UNODC staff provided an overview of the objectives, activities, and expected results of the second phase of the project for the next two years. National organisations from each Central Asian country also had the opportunity to present an overview of their national priorities, policies, and work carried out in the field of drug use prevention.

In analysing the status and development of the HIV epidemic in Central Asia, general trends can be identified for most countries in the region. The exception is Turkmenistan, where the presence of HIV infection is not officially recognised and there are no statistics on the epidemic (Bryanceva, 2004). However, the absence of official data does not mean that there is no problem. According to unofficial reports there is indeed an epidemic in Turkmenistan, but no measures are being taken to combat it. For example, according to the organisation Turkmen Initiative for Human Rights in Vienna, 68 cases of HIV were detected in Turkmenbashi city in 2010. 123

¹ Empowering Youth Leaders in Central Asia for Successful Evidence-Based Drug Prevention. www.newscentralasia.net/tag/%d0%bc%d0%be%d0%bb%d0%be%d0%b4%d0%b5%d0%b6/

cases of HIV among Turkmen citizens have also been registered in Russia and Kazakhstan, although the migration of Turkmen citizens to these countries is small. About 150 residents of Turkmenistan are receiving antiretroviral therapy in Russia.² These data indicate the seriousness of the HIV situation in the country.

Public Health and NGO Legislation in Central Asia

Kazakhstan

The Republic of Kazakhstan has a broad regulatory framework governing various aspects of healthcare and prevention of infectious diseases, including HIV/AIDS. There are currently a number of regulations governing the activities of NGOs in the country, including registration requirements, financial reporting, and oversight mechanisms, given their role in the treatment and prevention of drug abuse and infectious diseases.

The main orders cover several key areas in public health and social welfare.

Order 108 plays a crucial role in identifying diseases that significantly impact public health. By defining these socially significant diseases, the order ensures that state bodies and medical institutions focus their resources and efforts on controlling and mitigating conditions that pose the greatest risk to the population. This prioritisation is essential for effective public health management and resource allocation.

Order 128 demonstrates the government's commitment to keeping healthcare regulations up to date. By amending existing regulations, the order aims to address the evolving needs of the healthcare system and ensure that policies remain relevant and effective. This adaptability is vital for maintaining a responsive and efficient healthcare system that can meet contemporary challenges.

2 Брянцева Дарья А в Туркмении СПИДа нет... <https://www.dw.com/ru/%D0%Б0-%D0%Б2-%D1%82%D1%83%D1%80%D0%BA%D0%BC%D0%Б5%D0%BD%D0%Б8%D0%Б8-%D1%81%D0%BF%D0%Б8%D0%Б4%D0%Б0-%D0%BD%D0%Б5%D1%82/a-1253165>

Order 137 focuses on HIV prevention, underscoring the importance of proactive measures in controlling the spread of HIV. By establishing clear procedures for awareness campaigns and medical examinations, the order aims to reduce new infections and promote early detection. This comprehensive approach is crucial for managing a disease that has significant public health implications.

Order 162 highlights the importance of identifying and controlling infectious and parasitic diseases that pose a danger to others. By listing these diseases, the order ensures that they receive special attention for prevention and control measures. This is essential for protecting public health and preventing outbreaks that could have widespread consequences.

Order 175 standardises medical record-keeping, which is fundamental for accurate monitoring and analysis of public health data. Consistent and reliable health records enable better tracking of health trends, identification of emerging issues, and formulation of effective public health strategies.

Orders 204 and 211 both address HIV screening, with a focus on confidentiality and accessibility. Order 204 promotes voluntary anonymous and confidential screening, encouraging more individuals to get tested without fear of stigma or discrimination. Order 211 mandates confidential screening in certain cases, ensuring that individuals who may be at risk are tested, while maintaining their privacy. Together, these orders aim to increase the rate of HIV detection and reduce the spread of the virus through timely interventions.

Decree 286 on compulsory social insurance ensures that the population has access to necessary medical services. By regulating health insurance, the decree helps to remove financial barriers to healthcare, promoting equitable access and improving overall health outcomes. This is a critical component of a robust healthcare system that supports the well-being of all citizens.

These orders collectively address various aspects of public health and social welfare, from disease prioritisation and regulation updates to specific measures for HIV prevention and medical record-keeping. They reflect a comprehensive approach to health management that aims to protect and improve the health of the population through targeted interventions, regulatory adjustments, and enhanced access to healthcare services.

Clinical and sanitation protocols include essential guidelines to ensure consistent and high-quality medical care. Protocol 60, a clinical protocol for diagnosis and treatment, outlines standards and recommendations for diagnosing and treating various diseases, including infectious ones, thereby maintaining uniformity in medical care.

In addition, the Code of the Republic of Kazakhstan, dated 7th July 2020 (Order #360 – VI), introduces several key approvals. These include sanitary rules for organizing and conducting sanitary-epidemic and sanitary-preventive measures to prevent infectious diseases, and sanitary and epidemiological requirements for healthcare facilities. The Code also sets forth rules for examining temporary disability and issuing related certificates, establishes provisions for the citizens, oralmans³, foreigners, and stateless persons residing in Kazakhstan to receive guaranteed free medical care, and identifies a list of socially significant diseases and those posing a threat to others.

Sanitary rules:

The regulations governing public health measures address various critical aspects of disease prevention and control. The sanitary rules for organising and conducting sanitary and anti-epidemic measures are essential for preventing and controlling outbreaks of particularly dangerous infectious diseases such as plagues and cholera. These measures ensure that there are well-defined procedures in place to quickly and effectively respond to potential threats, minimising the risk of widespread infection.

The rules on mandatory confidential medical screening for HIV infection stipulate that HIV screening must be conducted in certain clinical and epidemiologic situations, while maintaining the confidentiality of the data. This approach ensures that individuals at risk are identified and treated promptly, which is crucial for controlling the spread of HIV and protecting public health. Sanitary and epidemiological requirements for disinfection, disinsection, and der-

3 Oralman is a term used by Kazakh authorities to describe ethnic Kazakhs who have re-immigrated to Kazakhstan since the country gained independence from the Soviet Union in 1991.

atisation are critical components of infectious disease prevention. By regulating these pest control measures, the regulations help to minimise the risk of disease transmission from vectors such as insects and rodents, thereby safeguarding public health. Finally, the regulations for conducting mandatory medical examinations establish procedures for regular medical check-ups. These examinations play a vital role in the early detection and prevention of diseases, allowing for timely medical interventions that can improve health outcomes and reduce the burden on the healthcare system. Collectively, these regulations reflect a comprehensive approach to public health management, emphasising the importance of preventive measures, early detection, and confidentiality. By addressing various aspects of infectious disease prevention and control, they help to create a safer and healthier environment for the population.

HIV prevention measures in Kazakhstan encompass a comprehensive approach to ensure effective prevention, treatment, and management of HIV/AIDS. Health care organisations are required to include a minimal list of mandatory activities in their HIV prevention plans. These activities ensure that health facilities implement effective strategies to combat the spread of HIV. The standards of public health services outline the necessary provisions for delivering medical services, including those related to HIV prevention and treatment. This ensures that the population has access to high-quality care that meets defined standards, promoting better health outcomes. Access to voluntary, anonymous, and confidential medical examination and counselling is provided free of charge to citizens, oralmans, foreigners, and stateless persons. This approach facilitates greater coverage of HIV testing and counselling, helping to identify and support individuals living with HIV while maintaining their privacy. Specialised centres for the prevention and control of AIDS (AIDS) operate under specific regulations that govern their activities. These centres play a crucial role in providing targeted prevention, treatment, and support services for those affected by HIV/AIDS. To prevent mother-to-child transmission of HIV, regulations include measures to be taken during pregnancy, childbirth, and breastfeeding. These measures aim to reduce the risk of HIV transmission from mothers to their children, thereby protecting the health of both. Accurate recording and monitoring of infectious, parasitic, occupational diseases and poisonings are ensured through regula-

tions for registration and record-keeping. This is a vital part of epidemiologic control, enabling effective tracking and management of disease cases. Standards for collecting and maintaining administrative data from public health entities are defined to help in planning and implementing health programmes. By ensuring consistent and accurate data collection, these forms aid in monitoring the health status of the population and improving public health interventions.

Overall, these measures reflect a multifaceted strategy to address HIV/AIDS, emphasising prevention, treatment, confidentiality, and accurate data management. This approach aims to reduce the incidence of HIV, improve health outcomes, and provide comprehensive support to those affected by the virus. These normative documents form the basis for effective management of the healthcare system in Kazakhstan and contribute to improving the prevention and treatment of infectious diseases, including HIV/AIDS.

The measures taken by the state are effective in maintaining the current situation. At the end of 2018, it was estimated that 84.1% of the patients knew their HIV status and the prevalence of infection among the population was 0.1%, mainly among key vulnerable groups.⁴

The government funds prevention programmes, which include the procurement and distribution of syringes, condoms, and information materials, as well as paying outreach workers. Treatment programmes include procurement of antiretroviral therapy (ART) and drugs to treat opportunistic infections. Diagnostic activities are also financed, including the purchase of test kits and organisation of HIV testing.

The Kazakh Scientific Center for Dermatology and Infectious Diseases estimates that in 2019, government funding accounted for 92 % of the total resources allocated to HIV. There are 17 NGOs providing HIV services in the country, which work in close cooperation with government centres and participate in projects of the Global Fund to Fight HIV/AIDS, Tuberculosis and Malaria.

The functioning of NGOs is an important element in the development of a democratic society, as they unite the population around common interests and contribute to the formation of new beliefs

⁴ Global AIDS Monitoring (2019): Country Progress Report – Kazakhstan.

and values. Service NGOs provide social services for their target groups and are more mobile and aware of the needs of the population than state structures. In recent years, Kazakhstan has introduced a number of mechanisms of financial interaction with NGOs, which facilitated an increase in the amount of budget funding. In 2019, NGOs received USD 27.4 million through local budgets and USD 2.9 million in state grants.⁵

From 2020, the government plans to introduce a new concept of civil society development for the next five years, providing for the transfer of state functions to improve the quality of services provided by NGOs. To assess the readiness of NGOs for social contracting, interviews and online surveys were conducted with leaders of organisations working in the field of HIV.

The results of the surveys showed that the majority of NGOs work in several directions at the same time. Half of the organisations have sufficient information about the mechanisms of financial partnership with the state, and 55 % have already tried to provide services at the expense of budget funds through the mechanisms of state social contracts (SSC) or grants.

Most NGOs consider government grants to be the most appropriate funding model, noting fewer bureaucratic procedures and opportunities for institutional development. Other organisations prefer SSC because of its simplicity and the possibility to cover a large geographical area. It is important to provide NGOs with information on all available funding mechanisms to help them decide whether to participate.

Most NGOs consider themselves ready for a financial partnership with the state, although there are concerns about issues related to personnel monitoring and evaluation systems. Some objective barriers, such as insufficient work experience or lack of information about NGOs in the database, may prevent them from obtaining a SSCs or grant.

⁵ www.researchgate.net/publication/335668517_Finansirovanie_gosudarstvennogo_socialnogo_zakaza_mestnymi_ispolnitelnymi_organami_v_Kazahstane_tendencii_i_dinamika_Analiticeskaa_zapiska_Grazdanskogo_Alansa_Kazahstana/fulltext/5d92404d92851c33e94b2de3/Finansirovanie-gosudarstvennogo-socialnogo-zakaza-mestnymi-ispolnitelnymi-organami-v-Kazahstane-tendencii-i-dinamika-Analiticeskaa-zapiska-Grazdanskogo-Alansa-Kazahstana.pdf

Kyrgyzstan

In recent decades, Central Asian countries, including the Kyrgyz Republic, have faced serious public health challenges related to the growth of infectious diseases, especially tuberculosis and HIV/AIDS. In response to these challenges, the governments of the region and NGOs have developed and implemented many strategies and programmes aimed at reducing the negative consequences of drug use and preventing the spread of infections among the population. One of the key elements of these strategies is the principle of harm reduction, which includes a wide range of interventions aimed at reducing the negative health consequences of drug use, both for individuals and for society as a whole.

The Association of Harm Reduction Programs “Partnership Network” (Partnership Network), founded in 2004, is one of the leading organisations in the Kyrgyz Republic actively working in the field of harm reduction. The Association’s activities cover several strategic directions, including expanding access to prevention and treatment of HIV, tuberculosis, and hepatitis C, protecting the rights of target groups, and promoting the interests of NGOs working with vulnerable groups, as well as developing intersectoral cooperation. The Association is engaged in advocacy for harm reduction programmes, outreach activities, client counselling, working with target groups, conducting research and training seminars to build the capacity of its members, and monitoring government programmes.

Harm reduction programmes are also actively implemented in Kyrgyzstan’s penitentiary system. Initiatives aimed at helping prisoners include rehabilitation models, needle and syringe exchange programmes, methadone substitution therapy programmes, and preparing inmates for release and social adaptation. These measures contribute to harm reduction and help drug-dependent prisoners integrate into society upon release.

Key Interventions and Programmes

Harm reduction includes specific measures such as proactive engagement of people who inject drugs, provision of sterile injection equipment and disinfection materials to prevent transmission

of infections through shared syringes and needles, and access to substitution therapy. Since 1996, Kyrgyzstan has successfully implemented syringe exchange programmes in prisons, which has significantly reduced the spread of HIV/AIDS and other infectious diseases among prisoners.

Since 2000, the harm reduction strategy has become a priority in the fight against drug abuse and drug trafficking in Kyrgyzstan, as well as an important part of government policy to prevent the spread of HIV/AIDS among injecting drug users. The non-governmental sector, supported by international organisations, has been active in distributing sterile equipment and information carrying out information work with clients and their families. However, some NGOs have encountered financial difficulties and have been forced to cease their activities.

According to a 2012 Kyrgyz Republic government report, harm reduction programmes are implemented through five local NGOs, underscoring the need for sustainable funding to support these important initiatives. These organisations provide a minimal package of services; including medical supplies, HIV testing, outreach components, counselling, and social support. Thus, these programmes not only seek to reduce harm, but also provide comprehensive services for injecting drug users.

Harm reduction programmes in Kyrgyzstan also include access to medical services and HIV treatment, which is a key aspect of a comprehensive approach to supporting the health of this population. Such measures confirm the importance of these programmes in the overall context of the fight against drugs and HIV/AIDS and underscore the need for continued financial support for these initiatives in the future.

Harm Reduction Programmes in the Prison System

Since 2005, the Global Fund has been financing ART for HIV-positive prisoners in Kyrgyzstan. Trained medical staff administer ART immediately after HIV diagnosis. Monthly consultations with the Republican AIDS Center ensure systematic monitoring and testing of patients with HIV. The needle exchange programme (NEP), available in prisons since 2013, has significantly reduced the spread of

HIV/AIDS and other infections by engaging drug users in prevention programmes and raising their awareness of HIV transmission and the risks associated with drug use.

Key programme outcomes include stabilising levels of HIV/AIDS and other infections, engaging injecting drug users in prevention and support programmes, providing comprehensive HIV/AIDS prevention services, improving identification and support for HIV-positive prisoners, increasing awareness and safety among prisoners, and reducing drug use and related social and legal consequences.

Harm reduction programmes in the penitentiary system of Kyrgyzstan also include training for staff of syringe exchange points. A special training manual called “Harm Reduction in Prisons” has been developed for this purpose (Stover/Shadymanova 2023). The training consists of three modules covering HIV/AIDS, prevention programmes, and harm reduction strategies. Non-medical staff are also trained to raise awareness and support harm reduction programmes. The primary objectives are to raise awareness about medical problems related to drug use, enhance the knowledge and skills of correctional staff, and foster a positive attitude towards harm reduction measures. Additionally, the training aims to support the dissemination of health information and the implementation of risk reduction measures within correctional institutions (Stover/Shadymanova 2023). Since 2010, NEP in Kyrgyzstan’s penal institutions has been funded by the Global Fund, which covers the purchase of medical supplies such as syringes, needles, condoms, educational materials, alcohol wipes, and HIV rapid tests. This funding also provides additional incentives for medical personnel working within the NEP. However, in 2020, the Global Fund’s financial support was terminated, and the programme is now funded by the Kyrgyz state budget. This shift necessitates exploring alternative ways to sustain the NEP, such as installing syringe and needle machines that do not require additional staffing, similar to models used in Germany. Despite this transition, the programme continues to receive support from NGOs like AIDS Foundation East West (AFEW) Kyrgyzstan, Atlantis, and the CRSA, with ongoing funding from the Global Fund for the syringe exchange programme (SEP) in Kyrgyzstan (Deryabina/El-Sadr 2017).

The Role of NGOs in Addressing Drug Dependence

Non-governmental organisations in Kyrgyzstan play a key role in combating drug dependence, conducting prevention activities, and providing harm reduction services. Supported by government agencies and international partners, NGOs implement a wide range of programmes aimed at improving the health and social well-being of vulnerable groups. In 2011, the joint efforts of governmental organisations and NGOs, with the support of international partners, resulted in mass events aimed at raising awareness among adolescents and youth about the negative consequences of psychoactive substance (PAS) use. These activities included information tours under the slogan “HIV: Act Responsibly”, including the “Safety Route”, a photo exhibition “Killer Drug”, and the “Dance for Life” campaign. These activities were aimed not only at informing young people, but also at developing life skills and promoting healthy lifestyles.

Some of the active NGOs include the “Partner Network” and the Public Association “SOCIUM”. These organisations, as well as a number of others, provide important harm reduction services, including needle exchange, methadone substitution therapy, outreach, specialist consultations, medical assistance, and an expanded package of services including social and psychological counselling.

Challenges and Need for Support

In Kyrgyzstan, NGOs fulfil important roles, from providing direct services to advocacy and policy development. This analysis is important for highlighting the critical and often undervalued role of NGOs in the fight against drug dependence in Kyrgyzstan and in the broader Central Asian context. Their work is indispensable in mitigating the health and social consequences of drug dependence, emphasising the need for continued financial support and integration of their services into national health strategies.

Despite this, Freedom House, in its 2020 Freedom Ranking identified the Republic of Kyrgyzstan as a leader in freedom within the region (ECOM 2020). Positively, there has been notable progress in the development of new political parties and leaders, the establishment of connections and cooperation between certain political

forces and the public sector, and the inclusion of human rights, gender equality, and non-discrimination against marginalized groups on the national agenda.

Some laws in the Kyrgyz Republic explicitly enshrine the concept of non-discrimination and prohibit discriminatory practices on certain grounds. For instance, gender discrimination is prohibited in family and labor relations. Additionally, while some legal acts do not specifically use the term “discrimination,” they emphasize the principle of equality, particularly in access to healthcare, medical and social support, and the right to education (ECOM 2020).

However, the Kyrgyz Republic does not have a comprehensive legislative act that explicitly prohibits discrimination, nor do normative documents specifically ban discrimination based on sexual orientation and gender identity (SOGI). In some instances, these grounds might be considered under broader categories due to the open-ended nature of certain legal provisions, such as those in Article 16 of the Constitution of the Kyrgyz Republic and other laws like Article 61 of the Law “On Health Protection in the Kyrgyz Republic” and Article 4 of the Law “On Peaceful Assemblies.”

To more fully address the issue of discrimination, it is essential to examine attitudes towards People Living with HIV (PLHIV). The Law “On HIV/AIDS in the Kyrgyz Republic” includes a clear definition of “discrimination” and seeks to prevent discrimination and stigmatization of PLHIV and LGBT persons, protecting their legitimate rights and freedoms. However, according to the List of Diseases, individuals living with HIV are prohibited from adopting children or becoming guardians or foster parents (ECOM, 2020).

The Kyrgyz Republic has criminalized the transmission of HIV through Article 149 of the Criminal Code, which holds individuals accountable if they put another person at risk of infection with HIV or actually transmit the virus, including through negligence. Notably, liability is waived in cases where the individual at risk was informed about the disease and voluntarily agreed to the actions that created the risk.

While Kyrgyz criminal law does not have a specific definition of hate crimes, it does recognize aggravating circumstances for crimes motivated by racial, ethnic, national, religious, or interregional enmity. Additionally, the Criminal Code contains a progressive provision that establishes liability for “violation of human equality,”

covering both direct and indirect restrictions of rights or the establishment of privileges based on sex, race, nationality, language, disability, ethnicity, religion, age, political or other beliefs, education, origin, property, or other status, especially when such actions cause significant harm through negligence.

The Law on NGOs regulates social relations arising in connection with the establishment, activities, reorganisation, and liquidation of non-profit organisations, including foreign non-profit organisations, operating in the Kyrgyz Republic. In April 2024, the President of Kyrgyzstan signed a package of amendments to the Law "On NGOs". According to the amendments proposed by the deputy of the Parliament Nadira Narmatova, "politically oriented NGOs financed from abroad will receive the status of foreign representatives. They will be included in a special register of the Ministry of Justice" (Hvan, 2024).

According to the amendments provided in the document, non-profit organisations receiving funds from foreign sources and participating in political activities must be included in the register of foreign representatives. The parliament's website notes that the bill was developed to ensure the transparency and publicity of non-profit organisations' activities. This includes granting access to financial and business information from state statistical bodies, tax authorities, and other state oversight and control bodies, as well as credit and other financial organisations; sending their representatives to participate in events held by the non-profit organisation; and conducting audits to ensure compliance with the non-profit organisation's activities, including the expenditure of funds.

NGO participants believe the law on "foreign representatives" will have negative consequences for the development of Kyrgyzstan as a whole. Since Kyrgyzstan is still a developing country, the culture of supporting non-profit organisations from internal sources has not yet formed: mainly, support comes from international organisations, and an integral part of sustainable development in the modern world includes not only legislative, executive, and judicial powers but also independent media and organisations that address various issues, including speaking about existing problems in the country.

The changes to the Law "On NGOs" in Kyrgyzstan could significantly affect the work of NGOs that support drug users and people living with HIV, especially if they receive foreign funding and their activities can be interpreted as political.

NGOs receiving funds from abroad and involved in political activities will have to register in the Register of Foreign Representatives. This will require additional reporting and transparency of financial activities, which can increase the administrative burden on NGOs. The definition of political activity includes almost any public activity, which can endanger the work of NGOs dealing with social issues if their activities are interpreted as political. Conducting surveys, public speeches, and criticism of the authorities' actions can be classified as political activities, complicating the implementation of assistance programmes.

Restrictions on foreign funding may lead to a decrease in financial support, which is especially critical for NGOs working with drug users and people living with HIV, as local sources of funding are not yet sufficiently developed. This can lead to programme cuts, reduced quality of services, and decreased coverage of target groups.

Restricting NGO activities may lead to a worsening of the situation with drug use and the spread of HIV in the country, as many assistance and prevention programmes are funded by international organisations. A lack of support and resources can affect public health and social stability in the long term.

Tajikistan

The Republic of Tajikistan is declared as a sovereign, democratic, legal, secular, and unitary state. It is officially proclaimed that the country strives to ensure a decent life and free development of every person, following international human rights standards.

A significant issue is the lack of reliable statistics demonstrating the actual application of international norms and national human rights guarantees. The data used in this context are mainly based on information from civil society organisations and international structures, highlighting the lack of state statistics and the neglect of human rights and freedoms. The total population of Tajikistan is estimated at 8.7 million, but accurate data on the number of LGBT people and PLHIV is missing or unreliable. This may indicate attempts to conceal the problem.

Despite the stated secular and democratic nature of the state, the majority of the population is Muslim, which increases the influence

of religious leaders on public discourse on human rights. The U.S. Department of State, in its annual report on religious freedoms, notes serious restrictions on religious freedom for both minority and majority religious groups in Tajikistan groups. These restrictions include the registration of religious organisations, dress code regulations, and assembly permits for believers.

Tajikistan remains a patriarchal society with high levels of religiosity, unlike Kazakhstan and Kyrgyzstan. This results in young people and other groups being unable to freely choose and declare their lifestyle if it differs from the traditional and majority-approved lifestyle. The combination of high levels of corruption and violence by law enforcement agencies creates threats to the LGBT community, including the disclosure of their status and intimidation.

Tajikistan joined the UN's "Political Declaration on HIV and AIDS" in 2016, committing to eliminate HIV-related stigma and discrimination by 2020. However, the implementation of these commitments remains superficial. Discrimination against PLHIV is legally prohibited, but having HIV status is a barrier to medical education in several specialities. Additionally, "infection with human immunodeficiency virus" is still criminalised, despite recommendations to decriminalise HIV transmission. Tajikistan's Criminal Code imposes severe penalties for HIV 'exposure' and transmission under Article 125, with sentences of up to 10 years in severe cases. Marginalised groups, including sex workers and LGBT individuals, face disproportionate impacts from these laws. Free legal aid for PLHIV is possible only if they meet certain criteria, and the criteria need to be specified to understand the limitations.

The Law on Public Associations requires mandatory registration of NGOs, and even registered NGOs can be closed down for minor violations. They are required to disclose information on funding from foreign sources, which remain the main sources of funds for the civil sector. In 2019, legislative changes were introduced requiring NGOs to publish financial statements, which restricts their activities and increases control by the authorities. Control over lawyers has also been tightened, making it harder for marginalised groups, including LGBT people, to access legal aid. The high level of stigmatisation and homophobia in society, along with the persecution of human rights defenders, complicates the struggle for human rights in Tajikistan.

In summary, Tajikistan's official declarations of democratic and human rights commitments are undermined by practices that repress civil, political, and personal rights. Reliable statistics are scarce, religious influence is strong, and the legal framework often perpetuates discrimination. The regulatory environment for NGOs and legal professionals further restricts the ability to advocate for and protect human rights, particularly for marginalised groups such as the LGBT community and PLHIV.

Uzbekistan

Uzbekistan is experiencing a concentrated HIV epidemic. As of July 1, 2021, the Republican AIDS Center reported that 44,756 people were living with HIV in the country. During the first six months of 2021, 1,665 new HIV cases were detected. According to UNAIDS estimates, the total number of people living with HIV in Uzbekistan is around 58,000 [52,000-69,000], with 34.5% being women, 58.5% men, and 7% children under 14 years old. Among new HIV infections in the first six months of 2021, 72.7% of cases were related to sexual transmission, 8.8% to parenteral transmission, 1.5% to household parenteral transmission, and 2.3% to injection drug use. In 6.1% of cases, the source of infection could not be identified (Moroz 2022).

The legal framework in Uzbekistan, particularly Article 113 of the Criminal Code, addresses criminal liability for the spread of venereal diseases and HIV/AIDS. This article outlines various penalties based on the severity and circumstances of the offense, including fines, community service, corrective labour, restriction of freedom, and imprisonment (Volgina et al. 2021). The law differentiates between merely endangering another person and actually infecting them, with significantly harsher penalties for actual infection and aggravated circumstances, such as offenses against multiple people or minors. Specifically, knowingly placing another person at risk of contracting a venereal disease can result in penalties such as fines, community service, or corrective labour. Infecting another person while being aware of having the disease incurs stricter penalties, including higher fines, longer community service, corrective labour, restriction of freedom, or imprisonment. Article 113 places special

emphasis on HIV/AIDS, imposing even harsher penalties for knowingly endangering or infecting someone with HIV/AIDS (Volgina et al. 2021). This underscores the severe public health implications and stigma associated with the disease. Furthermore, the law addresses professional negligence, holding healthcare professionals and others in positions of trust accountable if their failure to adhere to safety protocols results in the transmission of HIV/AIDS.

According to Moroz (2022), an inquiry to the Center for Legal Statistics and Operational Accounting Information of the Ministry of Internal Affairs of the Republic of Uzbekistan (2021) reveals trends in criminal cases related to Article 113 of the Criminal Code. In 2020, there were 131 cases, and in the first nine months of 2021, there were 100 cases, indicating a high incidence rate. By the end of 2021, a total of 141 crimes were recorded, with 97 involving men and 44 involving women. Sentencing in 2021 included restriction of freedom for 32 individuals, imprisonment for 19, and conditional sentences for three. In the first five months of 2022, 76 registered crimes were reported (Moroz 2022), with 45 involving men and 31 involving women. Sentences during this period included restriction of freedom for seven individuals, imprisonment for four, conditional sentences for two, and corrective labor for one. These statistics highlight the persistent nature of such crimes and the varying penalties imposed.

Despite these legal frameworks, the Labor Code does not explicitly prohibit discrimination on the basis of health, although it does mention a prohibition of discrimination on the basis of "other circumstances unrelated to the business qualities of employees and the results of their work". Uzbekistan's Law on Combating the Spread of Disease Caused by Human Immunodeficiency Virus (HIV) provides that people with HIV cannot be dismissed, nor can they be refused use of employment or educational institutions (except for certain types of educational institutions). The Law "On Protection of Citizens' Health" also guarantees protection from discrimination, regardless of the presence of diseases. However, there is direct discrimination against people with HIV in Uzbekistan, who are required to disclose information about their sexual partners to state authorities under Article 57 of the Code of Administrative Offenses, which prohibits concealment of the source of infection.

NGOs play a significant role in providing services to injecting drug users, persons who provide intimate services for remuneration, and people with HIV/AIDS. The State Program to Combat the Spread of HIV Infection in Uzbekistan, approved by Presidential Decree No. 3493, provides for the active involvement of civil society in HIV activities. The programme includes training of civil society organisations in HIV prevention methods and active participation of representatives of religious denominations in information work to promote morality, prevent risky behaviour, and promote tolerant attitudes towards people affected by HIV.

The INTILISH Information and Education Center supports government and NGO programmes in the field of public health and social development, organises educational and social services, and conducts scientific research to develop effective methods of treatment and prevention of drug addiction and HIV/AIDS, as well as social adaptation of people who have stopped using drugs. The Center also develops and implements educational programmes to increase the employment of youth and adolescents.

ISHONCH VA HAYOT is an NGO that unites people with HIV and specialists, helps to improve the psychosocial status and quality of life of PLHIV, combats stigma, and fosters a tolerant attitude of society towards people with HIV, involving them in decision-making processes and encouraging their active participation in overcoming the HIV epidemic in Uzbekistan.

The Uzbek Cancer Society focuses on palliative and hospice care, legal assistance for people with HIV, information and education on HIV/AIDS, and the creation of laboratories for research on opportunistic infections in the context of HIV/AIDS. Since 2013, multidisciplinary teams (MDTs) have been in operation, the work of which was initiated jointly with the Anti-Cancer Society and AIDS Centers. MDTs provide socio-psychological support during inclusion in the dispensary programme and initiation of antiretroviral therapy, as well as address social and domestic issues. MDTs serve as a link between AIDS service organisations and healthcare institutions.

Overall, the engagement of civil society and NGOs in Uzbekistan's fight against HIV/AIDS is crucial. These organisations play a key role in prevention, treatment, and social support, highlighting the importance of their continued involvement and the need for reliable data to support and enhance their efforts.

While Uzbekistan has made strides in creating legal frameworks to combat the spread of HIV/AIDS, there are still significant gaps and challenges, particularly regarding discrimination and the need for more comprehensive support and prevention strategies. By addressing these issues through legislative amendments, enhanced education and prevention efforts, and fostering cooperation among state authorities, local elites, and NGOs, Uzbekistan can build a more effective and humane response to the HIV epidemic.

The Role of Local Elites in Supporting and Cooperating with NGOs

The Uzbek Cancer Society focuses on palliative and hospice care, legal assistance to people with HIV, information and education on HIV/AIDS, and the creation of laboratories for research on opportunistic infections in the context of HIV/AIDS. Since 2013, multidisciplinary teams (MDTs) have been operating, the work of which was initiated jointly with the Anti-Cancer.

In January 2021, the Law on the Prevention and Treatment of Narcological Diseases came into force in Uzbekistan, regulating relations in the field of drug treatment. It defines the powers of ministries, departments, and citizens' self-governance bodies in the prevention and provision of drug treatment, as well as the rights and obligations of persons suffering from drug-related diseases and healthcare workers.

In Kazakhstan, the fight against the HIV epidemic is led by authorised government bodies and representatives of the political elite, using budgetary resources and funding from international organisations such as the Global Fund. The state continues to fulfil its commitments to respond to the epidemic, as confirmed by the results of global monitoring of the epidemic in 2019. The development strategy of the Kazakh Scientific Center for Dermatology and Infectious Diseases (KSCDIZ) for 2017–2021 included strengthening the capacity of HIV service organisations and developing a mechanism for obtaining a State Social Order (SSO) for NGOs.

In June 2019, the Republican Center for Health Development presented a draft programme to improve public health for 2020–2025, which was approved by the government in December 2019. The programme includes measures to prevent HIV infection among the population, which reduces the risks of lack of funding. The

main document declaring the intentions of the political elite was the roadmap for the implementation of HIV prevention measures for 2017–2020, drawn up in accordance with the World Health Organization (WHO) and United Nations Programme on HIV/AIDS (UNAIDS) strategy.

In Kyrgyzstan, despite regular reports to the UN and reports under the Universal Periodic Review, the authorities have not adopted the recommendations on anti-discrimination actions and SOGI policy as binding. Local activists note that the tasks and activities in the national inter-agency action plan are described in general terms, making it difficult to monitor their implementation.

At the national level, the issues of gender equality and combating domestic violence are actively discussed by civil society. It is important to note the development of partnerships between human rights organisations of different directions.

An important aspect of maintaining the gains made in the fight against HIV and tuberculosis is to ensure the sustainability of services. Central Asian countries pay special attention to social and health priorities in the structure of the state budget. Funding for services through state social contracting mechanisms is increasing, and NGOs are receiving state support and participating in shaping state priorities.

There are a number of systemic problems at the levels of priority setting, regulation, budgeting, and service delivery. Elimination of these problems will allow the countries of the region to make significant progress in ensuring the sustainability of funding for HIV and TB services and become leaders among Eastern Europe and Central Asia Constituency (EECA) countries.

Conclusion

To improve the situation, it is necessary to amend the legislation in the four Central Asian countries discussed in this chapter to expand the list of protected characteristics, including HIV status, sexual orientation, and gender identity. Simplifying the procedures for the registration and regulation of NGOs and guaranteeing their access to funding from national and local budgets on an equal footing with state institutions will allow NGOs to participate more effectively in

the implementation of programmes for the prevention and treatment of infectious diseases.

Reducing HIV-related stigma and discrimination is crucial. This can be achieved through educational campaigns aimed at promoting a better understanding of people with HIV-positive status and incorporating stigma reduction measures into national HIV/AIDS programmes. Reducing stigma will improve access to prevention, testing, and treatment services, thereby helping to curb the spread of HIV.

Preventing HIV infection among injecting drug users requires a comprehensive approach. Health and social welfare policies should address the needs of this group by providing access to harm reduction programmes such as needle exchange and substitution therapy. Policymakers and public health leaders need proper training to make informed decisions that benefit public health and well-being.

Efforts should also focus on harmonising the work of NGOs and legislators in preventing and treating drug abuse and infectious diseases among vulnerable groups in Central Asia. Specific measures and recommendations include improving legislation, stimulating partnerships, and enhancing the conditions for effective work of NGOs.

Key areas of attention in the Central Asia region include:

- **Long-Term Destigmatisation Efforts:** It is vital to work on forming an adequate perception of people with HIV-positive status and reducing stigma and discrimination. This will protect people living with HIV and their environment and help reduce the spread of HIV infection by improving access to a full range of services, including prevention, testing, counselling, care, and treatment.
- **Comprehensive Public Health and Social Policies:** Preventing HIV infection among injecting drug users is both a public health and a social issue. Policymakers, public health managers, and law enforcement officials should receive the necessary training to make decisions that benefit public health and well-being.
- **Training and Education:** Media professionals, educators, and health and social service workers should be trained to conduct

educational campaigns and provide accurate information on health issues.

- **Investment in Research:** Increased investment in scientific research, building national research capacity in HIV/AIDS, and addressing biomedical, legal, social, cultural, and behavioural aspects will help develop more effective treatment and prevention methods.

To enhance the effectiveness of NGOs in Central Asia, it is essential to support scientific research in HIV/AIDS, covering not only biomedical aspects but also legal, social, cultural, and behavioural dimensions. This will enable the creation of evidence-based treatment and prevention methods and the development of national research capacity.

NGOs are critical in providing services to injecting drug users, sex workers, and people living with HIV/AIDS. Programmes supported by these organisations, such as those run by the INTILISH Information and Education Center and Ishonch va Khayot, are pivotal in improving the psychosocial status and quality of life for affected individuals, combating stigma, and fostering tolerance. By involving affected communities in decision-making processes and programme implementations, these NGOs enhance the effectiveness of the national response to the HIV epidemic.

The Uzbek Cancer Society's MDTs exemplify effective collaboration between NGOs and health institutions, providing socio-psychological support and addressing social and domestic issues related to HIV treatment. Such collaborative models should be expanded and supported to ensure comprehensive care for individuals with HIV/AIDS.

In Kazakhstan, the strategy for fighting the HIV epidemic involves strengthening the capacity of HIV-service organisations and developing mechanisms for SSOs for NGOs. The development strategy of the Kazakh Scientific Center for Dermatology and Infectious Diseases (KSCDIZ) for 2017–2021 included significant steps to integrate NGOs into the national response to HIV, demonstrating the positive impact of legislative support and funding for non-governmental initiatives.

The role of political elites in legislating and addressing drug addiction problems cannot be overstated. Elites have the power to

shape public policy and allocate resources towards effective harm reduction and treatment programmes. By advocating for evidence-based policies and removing legal barriers that hinder the work of NGOs, political leaders can significantly contribute to the reduction of drug-related harm. Ensuring that policies are inclusive and address the needs of vulnerable populations, including injecting drug users, will enhance the overall public health response and improve societal outcomes.

A significant challenge faced by NGOs in Kyrgyzstan is the implementation of “foreign agent” laws, which require organisations receiving foreign funding and engaging in what is broadly defined as political activity to register as foreign agents. This designation often carries a stigma and imposes additional administrative burdens, making it difficult for NGOs to operate effectively. These laws can undermine the ability of NGOs to secure funding and support, limit their activities, and discourage collaboration with international partners. To foster a more supportive environment for NGOs, it is essential to revisit these laws and create a framework that ensures transparency without hindering the vital work of civil society organisations.

In conclusion, the interaction between legislation, local elites, and NGOs represents a strategic partnership that contributes to public health improvement and sustainable development in the region. Only through joint efforts by the state, local elites, and NGOs can effective prevention and treatment of drug abuse and infectious diseases among vulnerable groups be ensured. Continuous efforts to improve the legal and regulatory framework, stimulate partnerships, and enhance the conditions for effective NGO work in Central Asia are vital for achieving these goals. By fostering an environment of cooperation and support, Central Asian countries can build a robust public health infrastructure capable of addressing current and future challenges.

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