

KYRGYZSTAN

STATISTICS

» COUNTRY INDICATORS

Total population:	5,496,737 (July 2012 est.) ¹
Life expectancy at birth:	69.45 years (2012 est.) ²
Percentage of population under 15 years (2012):	30% ³
Population below income poverty line of 1 USD per day (2008):	6.4% ⁴
Main ethnic groups (1999 census):	
Kyrgyz 64.9%, Uzbek 13.8%, Russian 12.5%, Dungan 1.1%, Ukrainian 1%, Uighur 1%, other 5.7% ⁵	
Main religions (2012):	Muslim 75%, Russian Orthodox 20%, other 5% ⁶
Maternal mortality ratio (2010):	71 deaths/100,000 live births ⁷
Abortion rate (2010)	96.4 abortions per 1,000 women ⁸

» HIV ESTIMATES

Number of people living with HIV (2011):	12,040 ⁹
Number of people newly diagnosed with HIV (2011):	599 ¹⁰
Adult (15-49) HIV prevalence (2009):	0.3% ¹¹
Number of AIDS-related deaths (year): first HIV case recorded in 1987. Cumulative deaths till 2011:	225 ¹²
Percentage of women and men aged 15-49 who received an HIV test in the last 12 months and who know their results (2010):	19.7% ¹³
Percentage of people living with HIV receiving antiretroviral therapy (2011):	31% ¹⁴
Percentage of population who inject drugs (2006):	0.45% ¹⁵

» HIV PREVENTION FOR SEX WORKERS

HIV prevalence among sex workers – female (2010):	3.5% ¹⁶
Percentage of sex workers who received an HIV test in the last 12 months and who know their results (2011):	34.9% ¹⁷
Percentage of sex workers [*] reported to have been reached with HIV prevention programmes (2011):	45.2% ¹⁸
Percentage of sex workers who both correctly identify ways of preventing the sexual transmission of HIV and who reject major misconceptions about HIV transmission (2010):	42.4% ¹⁹
Percentage of sex workers reporting the use of a condom during penetrative sex with their last client: Vaginal sex (2011): 88.1% ²⁰ ; Oral sex (2010): 80% ²¹ ; Anal sex: no data	
Condom price as a percentage of price of sexual service – breakdown for oral, vaginal and anal sex (2010):	1% ²²
Number of charges of violence against sex workers filed with the police: out of 509 sex workers, 45 reported a claim (8.8%), out of 45 claims 12 were admitted (26.6%) and out of 12 claims 1 was resolved ²³	

* No disaggregated data is available for male and transgender sex workers. The reported data refers mainly to female sex workers.

This Report Card is one in a series produced by the International Planned Parenthood Federation (IPPF) with the support of the Sex Workers' Rights Advocacy Network (SWAN) and the United Nations Population Fund (UNFPA).

Female, male and transgender sex workers are disproportionately affected by HIV. These communities are also often among the most marginalized and discriminated against in society. Laws that criminalize their occupation make it difficult for them to exercise their human rights, including accessing health services.

The Report Card summarizes the current situation of HIV prevention strategies and services for sex workers in Kyrgyzstan and supports efforts to increase and improve the programmatic, policy and funding actions taken on HIV prevention.

The research analyses five components that are essential for effective action on HIV prevention for key populations: Legal and social context; availability of services; accessibility of services; participation and rights and violence.

It also provides recommendations for key stakeholders and service providers, to enhance action on HIV prevention strategies and services for sex workers.

This Report Card is based on extensive research carried out during 2012 including published data and in-country qualitative research. More detailed information can be found in a research dossier available on request from IPPF.

SETTING THE SCENE

The estimated number of female sex workers in Kyrgyzstan ranges from 7,000 to 10,500.²⁴ The number of visible sex workers has decreased in Bishkek (the capital) due to the increased pressure from law enforcement bodies and in Osh (the southern capital) after ethnically motivated riots in June 2010. NGOs report that around 20% of sex workers continue to work on the streets; around one third work in saunas/small hotels, another third are home-based sex workers. Approximately 10% of sex workers use the telephone as the main mode of contact with prospective clients.²⁵ In small towns, sex workers rarely work on the streets, most women wait to be called at home by phone and meet clients at saunas or hotels.

The majority of sex workers (75%)²⁶ in Bishkek are Kyrgyz internal migrants from other oblasts (provinces). According to 2008 data, women come from small towns, including the regional centres and villages. More than half (56%) of the sex workers in Bishkek were from the northern regions – the Chui and Issyk-Kul oblasts.²⁷ A small proportion of sex workers (2%)²⁸ operating in Bishkek came from other countries such as Kazakhstan, Russia and Uzbekistan. In Jalal-Abad City, about 30% of sex workers originally come from Uzbekistan. The number of sex workers grows every autumn during the crop season when potential clients have money. According to a local NGO, for women from Uzbekistan, Jalal-Abad is a

temporary stop for sex workers. After a short period of work they migrate to Turkey, United Arab Emirates, Kazakhstan or Russia.²⁹

Kyrgyzstan is a country with a concentrated HIV epidemic with a prevalence rate of 0.3%. The HIV prevalence among sex workers has increased from 1.1% in 2005³⁰ – to 3.5% in 2010.³¹

Individual sex work and sex workers are not criminalized in Kyrgyzstan but are often charged under several administrative and criminal codes. Stigma and discrimination also exist in various forms which affect sex workers and HIV prevention programmes targeting sex workers.³²

1» PREVENTION COMPONENT 1 LEGAL AND SOCIAL CONTEXT

NATIONAL LAWS, REGULATIONS, POLICIES, PROTOCOLS AND GUIDELINES FOR (AND AGAINST) SEX WORKERS AND THE CULTURAL AND SOCIAL CONTEXT THEY LIVE WITHIN

» KEY POINTS:

- Under the Kyrgyz law, individual sex work is not considered to be a crime nor an administrative offence and is not directly punishable. Brothel-keeping and forcing someone into sex work are offences under the criminal code (Art.261 and 260).^{33, 34}
- In October 2012, the Ministry of Interior announced the initiative to introduce an administrative offence for sex work. The Ministry considers sex work to be a risk for the spread of HIV and STIs, and to be associated with an increase in drug and alcohol use.³⁵
- Art.260 and Art.261^{36,37} of the Criminal Code affect sex workers directly. Anecdotal reports indicate that sex workers are arrested during police raids. Extortion of money from the sex workers after the arrest is common.
- Two articles in the Administrative Code (Art.364: Small hooliganism and Art.384: Staying without permission of residence) are regularly used by law enforcement bodies to arrest sex workers.³⁸
- Sex workers are often victims of systematic persecution by law enforcement bodies based on 'decisions' and/or 'orders' issued by the Ministry of Interior, often without any real legal grounds.³⁹
- HIV testing is provided on a voluntary basis according to the 2005 Law on HIV. Mandatory HIV testing can be undertaken by court resolution but does not target any specific groups.⁴⁰
- The 4th National Programme on stabilization of the HIV epidemic (2012-2016)⁴¹ shows a high level of commitment but is not yet approved due to budgetary constraints.⁴²
- The approved National Strategy on Reproductive Health until 2015, links HIV prevention and sexual and reproductive health. The document is mostly declarative due to the lack of stable funding and mechanisms for its implementation.⁴³
- Kyrgyzstan ratified the Convention on Eliminating All Forms of Discrimination Against Women (CEDAW) in 1997.⁴⁴ The conclusions of the committee in 2008 highlighted concerns about reports of discrimination and harassment against women as well as acts of harassment against sex workers by the police. The Committee urged the State party to take all appropriate measures to ensure that the Convention applies to all women without discrimination.⁴⁵
- A 2001 research survey conducted in Bishkek assessed the public opinion towards sex work and sex workers. 76% of the respondents reported a tolerant attitude to sex work but only 46% reported a tolerant attitude towards sex workers.⁴⁶
- Male and transgender sex workers are hidden from view and participate rarely in HIV prevention programmes. National data on the number of male sex workers are not available.^{47, 48}

» QUOTES AND ISSUES:

- *"Laws comply with international standards, but are not executed as such. Laws themselves are good but they do not work in the field."* (Interview with the Head of Sakbol, an NGO working with sex workers in Balykchy)
- *"The legislation does not meet the needs of all groups of sex workers: women, men, transgender, migrants and MSM."* (Interview with the Representative of UNFPA Kyrgyzstan).
- *"Recently the Ministry of Interior has put forward a bill to criminalize sex work. The main purpose of this law is to discuss income and taxes of sex workers which must be paid, but no one is thinking about the increase of corruption which will occur and that sex work would go underground. If today most sex workers work for themselves, there is a risk that in the future they will be under the influence of criminal elements. And what is even more frightening is the risk of growing cases of HIV and STIs."* (Interview with the Head of Tais Plus 2, Jalal-Abad)
- *"We do not know any laws that affect sex workers, we only know about our rights as citizens of this country and that we are supposed to have the same rights as the rest of the population, but in reality we have almost no rights."* (Focus-group discussion with sex workers, Osh)
- *"I think, the Law on institution of registration (Art. 384) should be abolished because sex workers move a lot from one city to another and do not always have the permit of residence. Police use this to abuse and harass sex workers."* (Interview with the Head of Tais Plus 2, Jalal-Abad)
- *"The national programme on HIV is well written, but the implementation process is not controlled. Little attention is paid to sex workers and MSM."* (Interview, the Head of the National AIDS Centre)
- *"The national programme to stabilize the HIV epidemic says little about sex work, there is nothing on transgender and migrants, it focuses much more on Injecting drug users."* (Interview with a staff member of AFEW)
- *"We wrote the shadow report to CEDAW in 2008 and CEDAW provided recommendations to our country to stop all kind of discrimination towards all women, including sex workers. But these recommendations are not implemented and even more worrying is that there are measures taken which increase punishments against sex workers."* (Interview with the Head of community-based organization of sex workers, Bishkek)

2» PREVENTION COMPONENT 2 AVAILABILITY OF SERVICES

THE NUMBER OF SITES AND RANGE OF SEXUAL AND REPRODUCTIVE HEALTH AND HIV SERVICES AVAILABLE FOR SEX WORKERS

» KEY POINTS:

- The main funding source for HIV prevention, treatment, care and support programmes for key populations is the Global Fund.⁴⁹ Main implementers of programmes targeting sex workers are non-governmental organizations active in five out of seven oblasts (provinces) and the capital. Systemic interventions are lacking in two oblasts – Talas and Chui.⁵⁰
- Funding for HIV prevention programmes for sex workers under the total Global Fund support decreased from 61% in 2009 to 42.5% in 2011.⁵¹ As a result of increased police repression, sex workers are forced to go underground, making it difficult to reach them. Additionally, the funding from GF fluctuates.^{52, 53}
- Basic HIV prevention for sex workers – condom promotion, information/education/ communication and referral to HIV/STI testing, counselling and treatment – is exclusively provided by NGOs.⁵⁴
- Generally, condoms are available from NGOs. 93% of sex workers reported that they receive condoms and lubricants from outreach workers. 87.2% of sex workers had condoms with them during research.⁵⁵
- HIV testing and counselling (HTC) is available in seven national AIDS centres and polyclinics. According to the Law on HIV and AIDS, pre-test counselling should be provided.⁵⁶ Sex workers are reluctant to go to public health facilities because they fear discrimination and lack of privacy.⁵⁷
- Counselling in state medical facilities, including AIDS Centres is limited, consisting of a short conversation followed by signing an informed consent form for HIV testing. All NGOs implementing HIV prevention with sex workers have allocated staff to provide HIV pre-test counselling. After this counselling sex workers can get HIV tests in a medical facility, typically in AIDS Centres. 82.5% of sex workers report that they are aware of places that offer HIV tests.⁵⁸
- Comprehensive package of services are provided to sex workers by NGOs and state organizations.⁵⁹ Services include: (1) Medical support: gynaecologist, general practitioner, tuberculosis specialist, dentist, surgeon; (2) Legal support: lawyer consultation, support in the court or in circumstances of illegal arrest, support in obtaining IDs; (3) Social support for sex workers living with HIV for issues related to accommodation, getting state social pension, etc.⁶⁰
- In Bishkek and some large cities sex workers can access gynaecological services free of charge, including abortions from the Alliance for Reproductive Health.⁶¹
- Harm Reduction Programmes with OST (methadone) are implemented in Bishkek, Osh, Jalal-Abat, Kyzyl-Kia and Tokmak. Sex workers who inject drugs have access to needles and syringes in NGOs implementing these programmes which include condoms and referrals to partner organizations for other services.⁶²

» QUOTES AND ISSUES:

- **“Condoms, both male and female are in insufficient quantities, low quality and available only through NGOs. It is clear that we cannot cover 100% of sex workers’ needs and therefore we should promote safer behaviour and encourage sex workers to either buy them or negotiate with clients to do so. But as sex workers are often poor they prefer to feed their families rather spend money on a condom.”** (Interview with the Head of Tais Plus 2, NGO working with sex workers, Jalal-Abad)
- **“In general, there are always delays in condom and lubricant supply. And when there are condoms, these are of very poor quality and break very easily.”** (Focus group discussion with sex workers from Bishkek)
- **“The AIDS Centre violates the law on voluntary counselling and HIV testing. They always require a passport to record all personal data and address, explaining that in case of an HIV positive result it would be easier to find the person. They do this in a very rude manner and breach anonymity and confidentiality.”** (Interview with the Head of Tais Plus 2, Jalal-Abad)
- **“When you get an HIV test in a friendly clinic managed by an NGO, the tests are done anonymously. A person supports you and you feel comfortable.”** (Focus-group discussion with sex workers in Bishkek)
- **“Sex workers can get essential support in drop-in centres (community centres) managed by NGOs in Bishkek, Osh and Jalalabad. They have access to laundry, showers, meals, rest areas as well as counselling service and referrals to other facilities upon request. Women in vulnerable situations – including women who are HIV positive, pregnant or who have just given birth, can stay up to several months until improvement of their situation. HIV positive women or sex workers with TB can also access these centres and get additional feeding and treatment adherence counselling.”** (Interview, the head of Tais Plus 2, Jalal-Abad)

3» PREVENTION COMPONENT 3 ACCESSIBILITY OF SERVICES

THE LOCATION, USER-FRIENDLINESS AND AFFORDABILITY OF SEXUAL AND REPRODUCTIVE HEALTH AND HIV SERVICES FOR SEX WORKERS

» KEY POINTS:

- Outreach is a key component of HIV programmes for sex workers. In 2011, 86% of sex workers in six locations across the country reported meeting volunteers or outreach workers over the last month.⁶³ The average frequency of meetings with the outreach workers was five times per month.⁶⁴
- Opening hours at State facilities are usually not suitable for sex workers. How this affects access to services provided in them has not been assessed.⁶⁵
- Sex workers often have to pay for STI testing and treatment because of interruptions in funding from the Global Fund. These costs are not affordable as is shown by the drastic decline of sex workers visiting the STI clinics when funding is interrupted: dropping from around 100 per month when funding is available to 13 visitors in September 2012 and even further, down to five sex workers in October 2012.⁶⁶
- 80% of sex workers reported that they were tested for HIV in 2011⁶⁷ and 75% of them returned to get their results.⁶⁸ The availability and uptake of HTC* is due to the significant participation of NGOs in this component of HIV prevention programmes.
- Stigma and discrimination towards sex workers in medical facilities exist. When sex workers visit a state polyclinic or stay in a hospital, the behaviour and attitude of medical providers change significantly once they know that the woman is a sex worker.⁶⁹
- The lack of a residence permit (*propiska*) is a major barrier to access free HIV prevention programmes and services. In Bishkek, 75% of sex workers are migrants from other oblasts (provinces) and therefore often lack this *propiska* and consequently have to pay for services.^{70, 71}
- According to two Ministry of Health's Orders†, health facilities should provide services to sex workers without requiring Identification Cards with '*propiska*'.⁷²

» QUOTES AND ISSUES:

- ***"Usually the attitude of NGO is better; in State facilities the attitude towards sex workers is bad."*** (Interview with the Head of Sacbol NGO, implementing programmes addressed to sex workers in Balykchy)
- ***"I like it that in NGO clinics everything is free of charge, it saves money. Also everything is anonymous."*** (Focus-group discussion with sex workers in Bishkek)
- ***"I don't know anybody at the AIDS centre and would only go there for an HIV test if a staff from Tais Plus (NGO) is accompanying. This would give me the courage to go and avoid me being kicked-out."*** (Focus-group discussion with sex workers in Bishkek)
- ***"Gynaecologists are paid and the AIDS centre is outside the city centre, which makes it difficult to reach them. In addition we are often badly treated. We usually report back to the NGOs who then talk to the service providers. We are then treated normally for a while."*** (Focus-group discussion with sex workers in Jalal-Abad)
- ***"SRH, HIV and STI services should be more accessible to sex workers; it is necessary to integrate services for HIV and SRH at primary health system level, NGOs, and so on. Donors must require that these approaches are implemented in the country."*** (Interview with the representative of UNFPA Kyrgyzstan)
- ***"In state facilities, privacy is violated completely. There were cases of HIV positive tests and the post-test counselling is taking place in a room where people come and go and the sex worker cannot have any proper discussion on the results."*** (Interview with the Head of Podruga, NGO working with sex workers, Osh)
- ***"There is still generally a lack of "user-friendly" services for sex workers in Kyrgyzstan, and sex workers are reluctant to access services owing to concerns over confidentiality, provider attitudes and cost."*** (Interview with the representative of UNFPA Kyrgyzstan)

* HIV testing and counselling

† Order No. 145 dated March 17, 2010 "On improving measures to fight HIV/TB co-infection in the Kyrgyz Republic." (translated from Russian) and Order No. 206 dated April 25, 2012 "On implementing models of comprehensive approaches in providing TB, drug dependency and HIV services in republic healthcare organizations on out-patient and in-patient levels" (translated from Russian).

4» PREVENTION COMPONENT 4 PARTICIPATION AND RIGHTS

LEVEL OF INVOLVEMENT OF SEX WORKERS IN THE DEVELOPMENT OF POLICIES AND PROGRAMMES AND THEIR REPRESENTATION AND PARTICIPATION IN DECISION MAKING PROCESSES

» KEY POINTS:

- There is only one established community-based organization governed and managed by sex workers: Tais Plus.⁷³
- In 2006 and October 2012, Tais Plus together with allies, successfully put a stop to legal initiatives of the Ministry of Interior to penalize sex work in Kyrgyzstan. Sex workers and supportive civil society groups were mobilised to conduct a broad advocacy campaign, submit petitions and hold interviews with parliamentarians. The draft bill was withdrawn in February 2013.⁷⁴
- There is no representative of the community of sex workers in the Global Fund Country Coordination Mechanism (CCM) Kyrgyzstan.⁷⁵ The voices of sex workers are therefore not properly represented in the CCM.
- The working group on the development of the National Programme on HIV/AIDS for 2012-2016 included the leaders of female sex workers' community.⁷⁶
- In 2010, the national network of sex workers "Shah Ayim" was established. The network's mission is to promote voices of sex workers at various levels. The political weight of the network is not yet strong enough to advocate with decision makers and suggest solutions for the issues they face. The main barriers for meaningful participation are the lack of skills, there are no clear mechanisms for such participation and the barriers to sex workers "coming out" publicly.⁷⁷
- In the last two years, human rights organizations started collaborating with sex workers' organizations. They provide a variety of support including documentation and investigation of sex workers' rights violations, legal support in court and visits to police stations or detention centres in cases of sex workers' arrest. In general, human rights activities for sex workers mostly take place in the capital.⁷⁸
- The Country Ombudsman has expressed interest in collaborating with "Tais Plus". With the support of the Ombudsman a research study on human rights violations against sex workers has been completed and the report is being prepared. The results of this study will be included in the Ombudsman's annual report, which is addressed to Parliament.⁷⁹
- Advocacy efforts are initiated by sex workers' organizations and other partner organizations. In 2012 these organizations joined forces to participate in a national study aimed at estimating the number of sex workers nationwide.⁸⁰

» QUOTES AND ISSUES:

- *"We try to support each other even if we come from different places. If something happens to another sex worker, everyone tries at least to help a bit, because you know that the day something happens to you, you will also need some help."* (Focus-group discussion with sex workers in Jalal-Abad)
- *"30% of NGOs involve sex workers in project design and development, implementation and monitoring of services, 50% involve them in provision of social services and 30% involve sex workers as paid instructors."* (Interview with the Representative of UNFPA Kyrgyzstan)
- *"The understanding of the concept of empowerment of sex workers through organizations is not clear to everyone. In some cases, top management are declaring they give a leading role to sex workers, but in reality the decisions lie in other hands."* (Interview with the Head of Tais Plus NGO)
- *"For us, work and security go first. Thanks to the work of some NGOs (Tais Plus), we learnt that we also have rights. It is reassuring to feel united and to know how to protect ourselves."* (Focus-group discussion with sex workers in Bishkek)

5» PREVENTION COMPONENT 5 VIOLENCE

PHYSICAL ASSAULT, SEXUAL ASSAULT,
PSYCHOLOGICAL ABUSE BY STATE OR
NON-STATE ACTORS

» KEY POINTS:

- The main perpetrators of violence against sex workers are the law enforcement agencies and clients. Extortion and violence by police has remained the number one concern of women involved in sex work in Bishkek and other parts of the Republic.⁸¹
- Police repression has been on the rise since 2005, especially in Bishkek. Most of the female sex workers are now hidden in apartments disguised as family homes.⁸²
- In an independent study (2009), 64.3% of female sex workers reported physical abuse by the police⁸³ and 89.5% reported sexual violence by the police.⁸⁴ In the same study all sex workers reported that they were subject to extortion by the police.⁸⁵
- In 2012 a larger, similar study was conducted with 509 sex worker respondents in six provinces across the country. Preliminary results show that 338 (67%) sex workers reported violation of their rights by the police. The main violations were extortion: 338 (100%), illegal detention: 321 (95%), humiliation and forced degrading actions: 319 (94%), threats and blackmail: 240 (71%), beatings and torture: 106 (31%).⁸⁶
- Some sex workers report that police sometimes treat them as criminals and force them to undergo HIV tests, especially when they do not have 'propiska'.^{87, 88}
- Police officers committing acts of violence against sex workers know that they will not be punished.⁸⁹
- In cases where sex workers decided to press charges against illegal actions by the police, they faced still more violence from the police.⁹⁰
- Clients who commit violence are rarely held responsible for their actions. Even if a case is filed, clients often bribe the police to act in their favour.⁹¹
- Some cases of violence by religious extremists have also occurred. These people commit violence against people they consider "promiscuous", including sex workers and organizations that provide support to sex workers. Such cases have occurred in both the northern and southern regions of the country.⁹²

» QUOTES AND ISSUES:

- *"Last year the UVD [police] staff forced us to get HIV tested and we had to pay 50 soms [about USD \$1] for this test. The test was done by their physician but who he was, we do not know. They said that there was a regional raid and this was by order of the prosecutors, but no papers had been shown."* (Focus-group discussion with sex workers, Jalal-Abad)
- *"The street is more dangerous now: groups from the mosque called DAVATCHIKI go out a couple of times per month with baklazhki [plastic bottles] filled with sand or water and they start to beat up all sex workers. It's scary. As soon as we see them, we run away in all directions. Of course, they are more terrible than the police, but the police do not see them as they are not on the street this time."* (Focus-group discussion with sex workers, Osh)
- *"Sex workers are vulnerable in the legal field, they think that they are engaged in illegal actions, and they do not always go to complain. So the client feels free to do what he wants. Impunity generates permissiveness."* (Interview, the Head of Sacbol NGO, implementing programmes addressed to sex workers in Balykchy)
- *"The police did not permit sex workers to stay on the streets of Bishkek. Because of police raids, sex workers left the streets. They started come out again in September 2012 and appear mostly at night. The police stopped their heavy pressure because they realized that they earned less money as there were less sex workers to extort money from."* (Interview, the Head of Tais Plus NGO implementing programmes addressed to sex workers in Bishkek)
- *"In Balykchy [a town in the north of the country], there is the second largest mosque of Central Asia. Among those who go to the mosque there are some radical groups. In August 2012 they beat one of our outreach workers. We did not complain to the police, because the outreach worker was afraid. We began to hold seminars with imams in fifteen mosques in Balykchy. But on August 27, 2012 two more outreach workers were beaten and pressed charges with the police, but so far no results."* (Interview, the Head of Sacbol NGO, implementing programmes addressed to sex workers in Balykchy)

NOTES AND REFERENCES

- ¹<http://www.indexmundi.com/kyrgyzstan/population.html>
- ² http://www.indexmundi.com/kyrgyzstan/life_expectancy_at_birth.html
- ³ <http://www.globalhealthfacts.org/data/topic/map.aspx?ind=82&by=Location&order=d&fmt=84>
- ⁴ http://w3.unecp.org/pxweb/quickstatistics/readtable.asp?qs_id=200
- ⁵ http://www.indexmundi.com/kyrgyzstan/ethnic_groups.html
- ⁶ <http://www.indexmundi.com/kyrgyzstan/religions.html>
- ⁷ http://www.indexmundi.com/kyrgyzstan/maternal_mortality_rate.html
- ⁸ WHO (HFA-DB) 2010
- ⁹ Kyrgyzstan Country Report on implementation UNGASS declaration. – 2012. – p. 8.
- ¹⁰ National AIDS Centre data
- ¹¹ UNAIDS data: <http://www.unaids.org/en/regionscountries/countries/kyrgyzstan/>
- ¹² National AIDS Centre data as of 01 Sept 2012
- ¹³ *Kyrgyzstan Country Report on implementation UNGASS declaration.* – 2012. – p.6.
- ¹⁴ *Kyrgyzstan Country Report on implementation UNGASS declaration.* – 2012. – p.14.
- ¹⁵ UNODC IDU Assessment, 2006. IDU amount is 25000.
- ¹⁶ *Kyrgyzstan Country Report on implementation UNGASS declaration.* – 2012. – p.6.
- ¹⁷ *Kyrgyzstan Country Report on implementation UNGASS declaration.* – 2012. – p.6.
- ¹⁸ *Kyrgyzstan Country Report on implementation UNGASS declaration.* – 2012. – p.6.
- ¹⁹ Report on Monitoring Survey “Condom-related behavior and HIV/AIDS/STI awareness among sex workers”. – January 2011. – Tais Plus NGO/ GFATM. – Section 8, p. 2.
- ²⁰ *Kyrgyzstan Country Report on implementation UNGASS declaration.* – 2012. – p.6.
- ²¹ Report on Monitoring Survey “Condom-related behavior and HIV/AIDS/STI awareness among sex workers”. – January 2011. – Tais Plus NGO/ GFATM. – Section 9, p. 2
- ²² Report on Monitoring Survey “Condom-related behavior and HIV/AIDS/STI awareness among sex workers”. – January 2011. – Tais Plus NGO/ GFATM. – Section 4 and 6.
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- ²⁴ Programme Report Salem 2 Project. *Reducing the spread of HIV in sex workers and the development of tolerance to HIV-positive sex workers and their clients* – Tais Plus / GFATM – 2007 – Annex 4. These estimates were recognized by the team who developed the Country Proposals on HIV to round 10 of Global Fund which were approved by GF for funding (http://www.aids.gov.kg/doc/R10_ProposalForm_KG_3-5_HIV_final.pdf, access 9th of November 2012).
- ²⁵ Target communication with 6 NGOs in Bishkek and in Regions implementing HIV prevention programmes with sex workers
- ²⁶ Report on Monitoring Survey “Condom-related behavior and HIV/AIDS/STI awareness among sex workers”. – October 2009. – Tais Plus NGO/ GFATM. – Section 1, pp. 4-5.
- ²⁷ Ibid.
- ²⁸ Ibid.
- ²⁹ Lessons Learnt: *HIV Prevention Programmes for Sex Workers in Kyrgyzstan and Tajikistan* – CARHAP – 2010 – p. 5, p. 7
- ³⁰ *Kyrgyzstan Country Report on implementation UNGASS declaration.* – 2007. – p. 7
- ³¹ *Kyrgyzstan Country Report on implementation UNGASS declaration.* – 2012. – p. 13
- ³² *Mid-term review of the National Programme for prevention of HIV/AIDS epidemic and its socio-economic consequences in the Kyrgyz Republic for 2006-2010* – Curatio International Consulting – 2009 – p. 35
- ³³ *Sex Work, HIV/AIDS, and Human Rights in Central and Eastern Europe and Central Asia* – CEEHRN – 2005 – p. 109 Source: <http://swannet.org/node/1532> (Access on 27th November 2012)
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KEY RECOMMENDATIONS

Based on this Report Card, a number of programmatic, policy and funding actions are recommended to enhance HIV prevention for sex workers in Kyrgyzstan. Key stakeholders – including the government, relevant inter-governmental and non-governmental organisations and donors – should consider the following actions:

LEGAL AND SOCIAL CONTEXT

- Take measures to halt the Ministry of Interior's initiative to penalize sex work through administrative punishment.
- In partnership with human rights organizations, achieve implementation of the recommendations by the Committee on the Elimination of All Forms of Discrimination against Women, set out in the 42nd session of the Commission on the Status of Women in 2008. The country is encouraged to take all steps to ensure that the Convention is applied to all women without discrimination.
- It is necessary to halt illegal activities against sex workers perpetuated by law enforcement bodies.
- Advocate for simplified procedures regarding Identification Cards and the Residence Permit (*propiska*).

AVAILABILITY OF SERVICES

- Ensure that HIV prevention programmes adopt a human rights based approach, address the needs of sex workers, and take into account best practices adapted to local conditions.
- Improve the quality and availability of services targeting sex workers and increase the availability of high quality condoms and lubricant for sex workers.
- Ensure a proper access to full-fledged friendly SRH services, especially to family planning, including contraceptives.
- Male and transgender sex workers should be involved in HIV prevention programmes.

ACCESSIBILITY OF SERVICES

- To make voluntary STI diagnosis and treatment accessible and affordable to sex workers on a permanent basis.
- Health facilities should be properly staffed, and equipped to provide quality HTC, ensuring counselling is offered appropriately.
- Sensitise healthcare providers to ensure "sex worker friendly", non-judgmental attitudes including towards male and transgender sex workers.

* Organization for Security and Co-operation in Europe
† Office for Democratic Institutions and Human Rights
‡ Office of the United Nations High Commissioner for Human Rights

- Install a clear mechanism to report clients' rights violations in a healthcare context.
- Implement the WHO, UNFPA, UNAIDS, NSWP Guidelines on Prevention and Treatment of HIV and other Sexually Transmitted Infections for Sex Workers in low and middle-income countries.
- Reduce the barriers to access services by ensuring clients' rights are met, including privacy and confidentiality.
- Ensure the two Orders issued by the Ministry of Health to increase access to health services by members of vulnerable without '*propiska*' is correctly implemented.

PARTICIPATION AND RIGHTS

- It is necessary to openly acknowledge the existence of violence and the extortion of sex workers by the police at higher levels. The inclusion of the violation of sex workers' human rights in the Ombudsman's annual report to Parliament can be a significant way forward.
- The concept of community empowerment and giving voice to sex workers should be actively promoted at all levels.
- Ensure meaningful involvement of sex workers in development, implementation and evaluation of sex work-related programmes.

VIOLENCE

- Document human rights violations across the country on a regular basis and reporting to OSCE* / ODHR† and other human rights committees. OHCHR‡ office should also be involved in the monitoring of human rights abuses of sex workers.
- Protect sex workers in cases of violence or other unlawful actions by police or clients must be organized properly so that witnesses can be protected from the additional pressure and repeated violence, particularly by the police. Enforce accountability of police officers for their unlawful actions against sex workers.
- Ensure safe and accessible mechanisms to report abuse by state-actors.
- Integrate programmes to eliminate violence against sex workers within broader gender based violence programmes.

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