

## **I. Status at a glance**

This report was prepared with the full collaboration and participation of relevant stakeholders including Government, MoH - Officer for HIV/AIDS, M&E officer for HIV/AIDS, Prison health Department, NIPH experts, UNKT Focal point, the responsible expert from the Infectious Disease Clinic, NGOs, etc.

## **II. Overview of the AIDS epidemic**

Kosovo is located in south-eastern Europe. It has a surface area of 10 887 square kilometers. It is surrounded by Albania, the former Yugoslav Republic of Macedonia, Montenegro and Serbia. According to the Kosovo Agency of Statistics, there were an estimated 1 815 606 people living in Kosovo by the end of 2012. Pristina is the capital city, with more than 200 000 residents.

Around 90 % of the population is Albanian, other ethnic groups are Serbians and Bosnians, while Turkish, Ashkali, Egyptian, Goran, Roma, and people of other ethnicities comprise a small fraction of the total population

Surveillance system is monitored by National Public Health Institute of Kosovo.

Epidemiological Department, Department of Microbiology (includes the national reference laboratory for HIV, viral hepatitis and STI.

First HIV/AIDS case in 1986

Kosovo is grouped among low HIV/AIDS prevalence countries, with the prevalence of < 1% among general population, and < 5% in key population at risk.

Since 1986 all blood donors are tested for HIV, Syphilis as well as Hepatitis B and C.

Between 1986 and 2013, total of 90 cases of HIV/AIDS were reported, of those 48 have developed AIDS and 42 HIV were positive. Up to this date 40 people have died from AIDS. (referring to the data provided from NIPH) .

In 2013 three new cases of HIV were reported (2 HIV positive and 1 AIDS). Furthermore, in 2013, fifteen infected patients were under ART. (Referring to the data provided from Infective clinic)

Two Bio BSS studies have been conducted in 2006 and 2011 respectively. Additional Bio BSS will be carried out in the second half 2014.

Health Behavior in School-aged Children (HBSC) survey was conducted during 2013. Preliminary findings revealed that 13% of children of age 15 have had sexual intercourse, out of which 27% did not use any protection method (condom).

### **III. National Response**

During 2012 – 2013 national response activities were focused on implementation National Strategic Plan on HIV/AIDS 2009 – 2013, including:

- development of Guideline and Protocol for VCT;
- provision of ART and care;
- provision of the VCT services;
- prevention and support for the key population at risk such as Sex Workers, MSM, PWID, Prisoners, PLWH (condom distribution, distribution IEC materials, NSP, MMT, VCT, STI testing/counselling and treatment, Peer Education);
- Training of health professionals;
- as well as substantial number of promotion/education activates with youth, including ToT trainings and Peer Education, social marketing of male condom.

### **IV. Best practices**

Very good cooperation and coordination of the Ministry of Health / Office for HIV/AIDS with other relevant governmental and non-governmental organizations, including UN Agencies and Global Funds, through Kosovo AIDS Committee and other coordination mechanisms, such CCM, working group for development of the new Strategic Plan for HIV/AIDS.

### **V. Major challenges and remedial actions**

Due to the budgetary limitations and insufficient technical expertise, the major challenge remains ensuring sustainability of the actions which are supported by external donations such as GF and UN Agencies.

### **VI. Support from the country's development partners (if applicable)**

Global Fund and UN Agencies represents crucial partners for implementation of the National Strategy on HIV/AIDS.

### **VII. Monitoring and evaluation environment**

Monitoring and Evaluation capacities for HIV and AIDS in Kosovo are not sufficiently developed. However, thanks to the support and cooperation with the external donors, it is expected that M&E will become stronger in the near future. In this context, with the funds from the Global Fund, MoH was able to employ an M&E officer that will support MoH to develop a comprehensive M&E framework.