



Federal Law

"On Prevention of Spreading in the Russian Federation of Disease Caused by Human Immunodeficiency Virus (HIV infection)": Background, Content, and Perspectives

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Federal Law "On Prevention of Spreading in the Russian Federation of Disease Caused by Human Immunodeficiency Virus (HIV infection)": Background, Content, and Perspectives

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The emergence and spread of HIV presents a serious challenge for every democratic state because protective measures concerning public health and prevention of the epidemic must, on the one hand, reflect the interests of society and, on the other hand, take into account the human rights including of those living with HIV/AIDS and those at high risk of infection.

States resort to legal means as part of their efforts to prevent and control HIV. In doing so, they strive to achieve two basic and equally important objectives:

- **To stop (or slow down) the spread of HIV throughout the population; and**
- **To protect persons living with HIV/AIDS from various forms of direct and indirect discrimination or abuse.**

If a state acknowledges these objectives as equally important, it most likely adopts balanced legislation that meets international legal standards in the field of human rights and lays the legal foundation for effective national policies to control the HIV epidemic in the country. If priority is given to one objective over the other, however, the laws adopted tend to be unbalanced; i.e., they either infringe on human rights (a common outcome) or interfere with the overall interests of society.

The need to balance public health and human rights interests is explicitly emphasized in the International Guidelines adopted at the 2nd International Conference on HIV/AIDS and Human Rights held in Geneva in 1996. The conference was convened in order to help states develop legal instruments for HIV/AIDS control in the context of both objectives identified above. Guideline 3 recommends that states review and reform public health laws to ensure that "they adequately address public health issues raised by HIV/AIDS... and that they are consistent with international human rights obligations"¹.

The development of Russian legislation concerning the prevention of HIV transmission serves as an example of how the ratio between the objectives of public health protection and human rights changes at different stages of the epidemic. This legislation has been reviewed and updated based on the epidemic's trends in the country; the ongoing accumulation of professional knowledge about the virus, including the ways it can be transmitted; and the gradual changes in society's attitude towards individuals with HIV/AIDS.

¹ "HIV/AIDS and Human Rights. International Guidelines" (HR/PUB/98/1), United Nations. New York and Geneva: 2004: p. 11.

The Background of Russian Legislation on HIV Control



In 1985, the first HIV-positive case was registered in the USSR, in a foreign citizen. In 1987, the first HIV-positive case was reported in a Soviet citizen.² The emergence of the virus led to the adoption of a decree of the Supreme Soviet of the USSR entitled «On Measures for Prophylaxis of Infection of AIDS Virus,» passed on 25 August 1987.³

This legislative act established mandatory HIV testing for specific groups of individuals in accordance with the rules issued by the Ministry of Health of the USSR.⁴ Citizens of the USSR who evaded mandatory testing were required to be delivered involuntarily to health care facilities. Foreign citizens and stateless persons who refused testing had to be deported. The decree also criminalized two acts: knowingly exposing a person to the risk of HIV infection and infecting another person when one knew one had the virus oneself (Article 115-2 of the Criminal Code of the Russian Soviet Federative Socialist Republic).⁵ Thus, **the first national legislative act related to HIV infection reflected only the interests of society and had a restrictive (and repressive) effect on citizens' rights.**

In the late 1980s, cases of HIV infection among children caused by the negligence of medical professionals, mostly due to the use of non-sterile instruments, were registered and widely discussed in the USSR. By the end of the decade, the total number of persons infected in hospitals had reached 225.⁶

By that time, it was no longer possible to consider HIV-positive cases exclusively as those coming from abroad. Therefore in the USSR Law «On Prophylaxis of AIDS Disease,» promulgated on 23 April 1990,⁷ there appeared provisions concerning the rights of persons with HIV/AIDS. This Law ensured the right to medical and social care, free transportation to treatment facilities, free medication for out-patients (in-patient pharmacological treatment had already been free), and access to pensions for those infected by medical professionals. Parents or foster parents of infected children under 14 years of age were granted the right to stay in hospitals with their children with paid sick leave.

The 1990 law also included a general anti-discrimination provision that protected people with HIV/AIDS from termination of employment, refusal of employment, refusal of access to educational and pre-school facilities for children, and other infringements on legal rights and interests of HIV-infected persons. The law also prohibited violation of the right to housing and other rights and interests, specifically those involving family members of HIV-infected persons (Article 8).

The law gave citizens of the USSR, foreign citizens, and stateless persons living or staying within the country the right to HIV testing, including anonymous testing. Health care facilities were obliged to

² Pokrovsky V.V., *Epidemiology and Prophylaxis of HIV Infection and AIDS*. Moscow: 1996, pp.57, 140–141.

³ *Vedomosti Verkhovnogo Soveta SSSR*, 1987: No. 34, Article 560; No. 42, Article 694.

⁴ Approved by the Minister of Health of the USSR on 28 August 1987.

⁵ These two acts are still considered crimes under the present Criminal Code of the Russian Federation. In addition, stricter punishment has been established for transmitting HIV to two or more individuals or to a knowingly underage individual (Article 122).

⁶ Pokrovsky V.V., *Epidemiology and Prophylaxis of HIV Infection and AIDS*. Moscow: 1996, pp. 112–127.

⁷ *Vedomosti Verkhovnogo Soveta SSSR*, 1990: No. 19, Article 324.

ensure the safety of testing for both patients and medical personnel administering the test (Article 1). Medical workers and other individuals who became aware of HIV testing results because of their professional involvement were required to keep such information confidential (Article 7).

The 1990 USSR law was a direct response to the increased number of HIV/AIDS cases, including those caused by negligence of medical professionals. The law's adoption was also influenced by the disclosure of human rights violations of individuals living with HIV/AIDS and their families as well as the general public's fear of infection and lack of awareness about how the virus is transmitted or prevention methods. Therefore, **legislative provisions aimed at safeguarding human rights and banning discrimination of people living with HIV/AIDS in various spheres of social life were included in the second HIV-related legislative act.**

The currently applicable Federal Law, «On Prevention of Spreading in the Russian Federation of Disease Caused by Human Immunodeficiency Virus (HIV infection),» was adopted on 24 February 1995. It was signed by the President of the Russian Federation on 30 March 1995 and came into force on 1 August 1995.⁸

Contents of the Federal Law on HIV Infection



The most recent Federal Law of 30 March 1995 retained continuity with the 1990 USSR Law and significantly expanded the norms related to the rights of people living with HIV/AIDS and their family members.

The Federal Law introduced a provision that had never existed in Russian legislation before (Article 4). According to this provision, the State vowed to take action to prevent the spread of HIV. Its guarantees included:

- Public dissemination of information about the means to prevent HIV infection, including the use of mass media;
- Epidemiological surveillance of the virus's spread across the country;
- Manufacturing and distributing the means for HIV prevention, diagnosis and treatment;
- Accessibility of HIV testing, including anonymous, with pre- and post-test counseling;
- Free access to professional and specialized medical care, and free medication for in- and out-patient treatment; and
- Social support for people living with HIV/AIDS including education, re-training, and employment assistance.

⁸ *Sobranie Zakonodatel'stva Rossiyskoy Federatsii* (SZ RF), 1995: No. 14, Article 1212; with amendments by the federal laws of 12 August 1996 (SZ RF), 1996: No 34, Article 4027; of 9 January 1997 (SZ RF), 1997: No 3, Article 352 and of 7 August 2000 (SZ RF), 2000: No. 33, Article 3348.

Federal and local authorities are entrusted with the enforcement of state guarantees.

A separate chapter of the Federal Law is concerned with medical care for persons with HIV/AIDS. HIV testing is as a rule voluntary, at the request or with the consent of the individual being tested. Persons under 14 years of age and those duly recognized as legally incapable are tested at the request or with the consent of their legal representatives (parents, guardians, etc.). Testing is accompanied by pre- and post-test counseling on HIV prevention. Patient or their representatives may request an anonymous test (Articles 7, 8 of the Federal Law).

Testing that includes specific laboratory procedures is carried out in licensed state-run, municipal, and private health care facilities (section 1 of Article 7 of the Federal Law). This requirement is designed to guarantee the quality of testing and the qualifications of medical workers.

In comparison with previous laws, the list of specific groups obliged to undergo mandatory testing has been reduced. Blood donors and donors of biological liquids, organs, and tissues are obliged to be tested for HIV.⁹ In addition, individuals working in certain professions, factories, enterprises, facilities and agencies (the list is approved by the Russian Federation Government)¹⁰ must undergo mandatory HIV tests when beginning a job and periodic tests thereafter. Prison inmates as well must undergo mandatory testing¹¹ (Article 9 of the Federal Law). All rules regulating mandatory HIV testing have been approved by the national government.¹²

HIV testing is also mandatory for foreign citizens and stateless persons staying for more than three months in Russia with the exception of diplomatic corps and employees of international and intergovernmental agencies and their family members (Article 10 of the Federal Law).¹³

As a part of routine military medical examinations, individuals are tested when they are conscripted or drafted into the army.¹⁴

As for other categories of people-including pregnant women and clinical patients (for example, patients with fevers lasting longer than one month, those with an unexplainable loss of body weight of 10% or more, those with prolonged and relapsing pneumonia or pneumonias resistant to conventional therapies, etc.)-HIV testing shall be voluntary, as is specifically emphasized in administrative regulations.¹⁵

⁹ «Rulings for Medical Examination for Donor of Blood and Its Components» (No. 364 — BNA RF), approved by the Order of the Russian Federation Ministry of Health on 14 September 2001.. 2001, No. 46.

¹⁰ Decree of the Russian Federation government (No. 877 — SZ RF) on 4 September 1995.. 1995: No 37, Article 3624.

¹¹ «Rules for Mandatory HIV Testing of Prisoners» (No. 221 — SZ RF), approved by the Decree of the Russian Federation government on 28 February 1996. 1996: No. 12, Article 1112.

¹² Decree of the Russian Federation government of 13 October 1995 (No. 1017 — SZ RF), 1995: No 43, Article 4070.

¹³ «Requirements to the HIV-free Status Certificate to be Submitted by Foreign Citizens and Stateless Persons while Applying for a Visa to Enter the Russian Federation for the Period Exceeding 3 Months» (No. 1158 — SZ RF), approved by the Decree of the Russian Federation government on 25 November 1995.. 1995: No. 49, Article 4800.

¹⁴ «Statute on Military Medical Examination» (No. 123 — SZ RF), approved by the Decree of the Russian Federation government on 25 February 2003.. 2003: No 10, Article 902.

¹⁵ «List of Indications for HIV/AIDS Testing for Improvement of Quality of HIV Diagnosis» (No. 295) approved by the Order of the Russian Federation Ministry of Health and Medical Manufacture on 30 October 1995; section «П» of the «Instruction on Measures for Prevention of Spreading of HIV Infection in the Frontier Service of the Russian Federation» (No. 327 – BNA), approved by the Order of the Russian Federation Federal Border Agency on 25 May 2001. 2001: No. 30.

Medical professionals must inform the persons tested of the results of their tests. If the person tested is under 18 years of age or duly recognized as legally incapable, his or her parents or the legal representative must be notified of the test results (Article 13 of the Federal Law). Adults diagnosed with HIV infection are to be notified of protective measures they should take to prevent transmission of the virus to others. They are also to be informed of their rights and freedoms as well as the possibility of criminal punishment if they knowingly infect another person or put him/her in danger of contracting the virus.

Under the Federal Law of 30 March 1995, HIV-positive individuals are prohibited only from donating blood, biological liquids, organs and tissues. The law requires that foreign citizens and stateless persons who are HIV-positive should be deported from the Russian Federation (Article 11).

A person tested for HIV has the right to request additional tests in the same or another medical facility (or with another agency) regardless of when or how often he or she was tested previously (Article 12 of the Federal Law).

All information about an individual's HIV test and its results is confidential. However, the Federal Law of 30 March 1995 does not ensure mandatory confidentiality. The confidentiality obligations of medical professionals and other persons who obtained HIV test information in the course of training or in the line of duty are regulated by the Fundamentals of Legislation of the Russian Federation on Protection of Citizens' Health, of 22 July 1993.¹⁶ Article 61 of the Fundamentals specifies the list of situations in which confidential information can be communicated to third parties without the consent of the person concerned. One such situation refers to the danger of spreading infectious diseases. Criminal responsibility for the unlawful disclosure of confidential information is established by Article 137 of the Criminal Code of the Russian Federation.

Under Article 14 of the Federal Law, HIV-positive individuals are guaranteed all types of medical care in accordance with clinical indications. They also enjoy the rights of all citizens in health care provision as established by the Fundamentals of Legislation of the Russian Federation on Protection of Citizens' Health. Administrations of respective state, municipal and private medical facilities (and agencies) are responsible for establishing conditions for the realization of all guaranteed rights (Article 16 of the Federal Law).

The Federal Law provides the following social support guarantees for persons living with HIV/AIDS and their family members:

- Prohibition of employment dismissal;
- Prohibition of employment refusal;
- Prohibition of the refusal of entrance to educational and health care facilities; and
- Prohibition of the restriction of other rights and legal interests of persons associated with HIV (Article 17).

The Law provides for pensions, benefits, and privileges for HIV-positive children and their parents (Articles 18, 19) and compensation for damaged health if HIV infection was caused by the negligence of medical professionals (Article 20). The Law prohibits the restriction of the right to housing and any other rights of family members of persons with HIV/AIDS (Article 17). It also provides for measures of social support for individuals at risk for HIV infection in the line of duty (Articles 21, 22).

Analysis of provisions of the Federal Law of 30 March 1995 indicates that it establishes a relatively wide range of guaranteed rights for persons with HIV/AIDS in health care, labor relations, education,

¹⁶ Vedomosti S'ezda Narodnykh Deputatov i Verkhovnogo Soveta Rossiyskoy Federatsii. 1993: No. 33, Article 1318.

and other aspects of social life. Compared with previous laws, the Law is based more on a preventive model of state policy in HIV control. This model is designed to combine the interests of public health and human rights. The Federal Law focuses appropriate executive powers primarily toward preventing HIV transmission among all population groups, including those at high risk of contracting the virus.

Federal Law on HIV Infection in the Context of International Law



Currently, there are no specific international legal documents in the field of HIV and human rights that are legally binding for Russia. However, there are charters and declarations acknowledging the rights of persons with HIV/AIDS that have been adopted at international conferences and meetings and can serve as recommendations for Russia. Prominent among them are the above-mentioned International Guidelines «HIV/AIDS and Human Rights» issued by the UN High Commissioner for Human Rights and the Joint UN Program on HIV/AIDS (UNAIDS), as well as the UN Declaration of Commitment on HIV/AIDS, adopted by the UN General Assembly on 27 June 2001.¹⁷

The fact that these declarations are only recommendations does not imply that states can ignore their provisions. Although lacking legal force, the recommendations are important because they reflect the opinion of the majority of members of the international organization. As such, they are intergovernmental general principles that can eventually be transformed into norms of international treaties.

Within the UN and the Council of Europe, there are a number of international legal instruments and institutes in the field of human rights that also concern persons with HIV/AIDS.

Among general human rights instruments it is important to consider the International Covenant on Civil and Political Rights and the International Covenant on Economic, Social, and Cultural Rights, adopted by the UN on 19 December 1966,¹⁸ and the Convention For the Protection of Human Rights and Fundamental Freedoms, adopted by the Council of Europe on 4 October 1950¹⁹ (the European Convention). These documents are legally binding for the Russian Federation and constitute a part of the national legal system (Section 4, Article 15 of the Russian Federation Constitution).

Since the ratification of the European Convention, Russia has recognized the jurisdiction of the European Court of Human Rights, at which private persons can lodge complaints about alleged violations of rights guaranteed by the European Convention. The European Court has already considered cases related to the rights of persons with HIV/AIDS. For instance, the case of *Z vs. Finland*²⁰ dealt

¹⁷ Resolution S-26/2.

¹⁸ The covenants became effective on 23 March and 3 January 1976, respectively. The covenants were ratified by the Decree of the Presidium of the Supreme Soviet of the USSR of 18 September 1973. (Cited in *Vedomosti Verkhovnogo Soveta SSSR*. 1976: No. 17, Article 291.)

¹⁹ This convention came into force on 3 September 1953. It was ratified by the Russian Federation on 30 March 1998 (Cited in *SZ RF*, 1998: No. 14, Article 1514). For the official translation of the Convention into Russian see *SZ RF*, 2001: No. 2, Article 163.

²⁰ A ruling in this case was announced on 25 February 1997. See the European Court of Human Rights, *Selected Judgments*, vol.2. Moscow: 2000, pp. 412–427.

with disclosure of confidential information concerning persons with HIV/AIDS (Article 8 of the European Convention).

Generally, the Federal Law of 30 March 1995 meets the requirements of international legal documents, including their recommendations. Both the scope of legal provisions and their content are within the mainstream of international recommendations that concern the reduction of the number of specific groups subject to mandatory HIV testing, prohibition of discrimination of persons with HIV/AIDS and state guarantees of HIV prevention information and resources. Problems emerge in the course of law enforcement, however, because the provisions of the Federal Law have not been fully implemented.

Challenges in the Enforcement of the Federal Law on HIV Infection



Serious problems exist concerning a) the enforcement of provisions to reduce the number of groups whose members are subject to mandatory HIV testing, and b) access to free, quality medical care for persons living with HIV/AIDS. While the Law was being drafted, there were suggestions to codify mandatory testing of pregnant women and individuals belonging to so-called risk groups (injecting drug users, men who have sex with men, commercial sex workers, etc.). Though these suggestions were not included in the Federal Law, the fact remains that more people are being subjected to mandatory testing than the Law specifies, especially because of testing of individuals entering jobs.²¹

An example of how the number of individuals subjected to mandatory testing has grown is a Decree (No. 203) of the Administration of Nizhniy Novgorod Region on «Strengthening measures for HIV (AIDS) Prevention in Nizhniy Novgorod Region,» of 16 July 1996. This Decree specifies that, in addition to the groups subject to mandatory testing under the Federal Law, HIV testing is mandatory at times for members of the following groups: drug users, people suspected of using drugs, homosexual and bisexual individuals, prostitutes, and individuals having random sexual intercourse.²² (According to the Decree, individuals within these groups can be tested if they are registered in local agencies of the Ministry of the Interior, identified as a result of police work, or detected in the course of epidemiological investigation as potentially infected.) The Decree violates both the Federal Law of 30 March 1995 and Section 3, Article 55 of the Russian Federation Constitution, according to which only federal law can restrict the rights of citizens.

Persons with HIV/AIDS also face a number of difficulties while exercising their right, as guaranteed by the Federal Law, to free professional medical care in accordance with clinical indications. The main cause of these difficulties is the inadequate federal and regional funding for such medical care. A related concern is that due to the high costs of modern pharmacological treatment and limited funding, some categories of persons with HIV/AIDS, particularly drug users, are being discriminated against in access to medical care. For instance, according to the Head of Federal Center for AIDS Prophylaxis and Control V. Pokrovsky, there is an opinion in Russia that drug users should not be treated for HIV.²³ Some international research

²¹ From the report «Violations of the Russian Federation Citizens' Rights in Context of AIDS Epidemic,» The Russian Foundation «Names.» Moscow: 1998, pp. 2–3.

²² This is the exact terminology used in the Decree.²³ «Interview of the Head of Federal Center for AIDS Prophylaxis and Control V. Pokrovsky,» Gazeta, 19 May 2004.

²³ «Interview of the Head of Federal Center for AIDS Prophylaxis and Control V. Pokrovsky,» Gazeta, 19 May 2004.

shows that attitudes toward them among specialists are more negative than toward HIV positive individuals of other categories. One of the reasons for this opinion might be a perception that people addicted to drugs are unable to follow treatment schemes. Regardless, providing equal (non-discriminatory) access to necessary health care for all citizens is an international legal obligation of Russia according to the International Covenant on Economic, Social, and Cultural Rights, which ensures in Article 12 the human right to the highest attainable standard of physical and mental health.²⁴

It should be noted that the serious growth of HIV cases in Russia began after the Federal Law was adopted in 1995. At that time, dozens of persons were in need of specific antiretroviral therapy (ART); today, however, the number has increased to the tens of thousands, and experts predict that it will continue to surge. Meanwhile, the budget provided by the Federal Target Program «Preventing and Combating Social Diseases (2002–2006)»²⁵ can only accommodate the provision of ART to fewer than 2,000 patients.²⁶

The State does not pay enough attention to prevention, primarily to raising HIV awareness and prevention measures among the general public and to developing, introducing, and funding targeted education and prevention programs, including those for high risk groups.

Recommendations on the Strengthening of HIV/AIDS Legislation



1. Implementation of the Federal Law of 30 March 1995 needs to be monitored continuously by the authorized state bodies with the participation of non-governmental organizations working with people living with HIV/AIDS and their family members. Data on cases of human rights abuse concerning persons living with HIV/AIDS should be collected and analyzed on a regular basis. In addition, a special report of the Commissioner for Human Rights in the Russian Federation should be dedicated to the analysis of violations of human rights with regard to HIV/AIDS.
2. The Federal Law can be improved only after a detailed analysis of its implementation nationwide and public discussion of proposed amendments. Organizations working with and for persons with HIV/AIDS must be involved at all times.
3. Discussions of strategic and tactical issues of State policy regarding HIV/AIDS, including improvement of federal and regional legislation, should be organized at the Russian State Duma Parliamentary hearings.

²⁴ «Substantive Issues Arising in the Implementation of the International Covenant on Economic, Social and Cultural Rights,» United Nations: General Comment No. 14 (2000), E/C. 12/2000/4, CTSCR General Comment 14. 4 July 2000: para. 12.

²⁵ Approved by the Decree (No. 790) of the Russian Federation Government on 13 November 2001.

²⁶ «Why HIV/AIDS Should Become a Policy Priority for Russia?» Transatlantic Partners Against AIDS, Policy Brief No. 1. March 2004: p. 7.

4. Estimates of financial and other costs associated with the comprehensive implementation of the Federal Law should be made based on the realities of the HIV epidemic, including the speed of its spread and who is most at risk. In accordance with international recommendations and obligations, any amendments or additions to the Federal Law should not remove or weaken the social, legal and health-related rights currently guaranteed to people living with HIV/AIDS.
5. To enforce provisions of the Federal Law related to human rights, regional legislation concerning HIV/AIDS must be analyzed and brought into compliance with the Federal Law and the Russian Federation Constitution.
6. Special attention should be paid to the development and introduction of mechanisms to reduce the costs of ARV treatment and the assurance of unified and equal access to treatment. Among the key focus areas should be the development and production of effective medication for HIV prevention, diagnosis, and treatment in Russia.
7. Curricula at medical institutions of higher education and medical colleges should include contemporary scientific data on HIV. The qualifications and skills of medical workers and other professionals working with persons with HIV/AIDS and their family members should be constantly upgraded.
8. Prevention measures in Russia should be implemented as a set of economic, social, and legal activities, all in accordance with human rights instruments and related international recommendations.

Appendix



From the protocol of the roundtable "The Federal Law "On Prevention of Spreading in the Russian Federation of Disease Caused by Human Immunodeficiency Virus (HIV)": Background, Content and Perspectives." (June 1, 2004, Moscow)

"...1. The role of the Federal Law, its compliance with the current HIV/AIDS situation in Russia.

- 1.1 To present the Chair and members of the Interfactional Deputies' Working Group of the State Duma of the Russian Federation on Prevention and the Fight Against AIDS with a request to discuss strategic and tactical issues regarding State HIV/AIDS policy, including improvement of federal and regional legislation, in the course of parliamentary hearings at the State Duma of the Russian Federation.
- 1.2 In order to implement the provisions of the Federal Law, to present the State Duma Committee on Education and Science with a request to discuss within its authority framework the possibility of organizing and implementing the analysis of HIV/AIDS-related scientific research and developments, paying particular attention to programs developing a new generation of antiretroviral medications, HIV vaccines, microbicides, etc.

2. The role of other legislation influencing the HIV/AIDS situation in Russia.

2.1 In order to improve HIV legislation, to present the State Duma Committee on Legislation with a request to discuss within its authority the possibility of analyzing federal and regional legislation relevant to prevention and the fight against HIV/AIDS, as well as related legal and administrative implementation of these practices, including wide-scale discussion of proposed amendments and additions with all Ministries and public organizations concerned, including persons living with HIV/AIDS.

3. Directions in the development and improvement of legislation influencing HIV/AIDS in Russia.

3.1 To present the State Duma Committee on Budget and Taxes with a request to discuss within its authority the possibility of establishing a working group to estimate financial and other costs related to full-scale implementation of all provisions of the Federal Law, taking into consideration the spread of HIV/AIDS in Russia and the growing needs for medical care and social support to persons living with HIV/AIDS and their family members.

3.2 To present the Commissioner for Human Rights in the Russian Federation with a request to consider the possibility of analyzing complaints concerning violations of human rights of persons living with HIV/AIDS and the inclusion of a chapter related to this work in his annual report.

3.3 Note the need to observe international recommendations and obligations that Russia has accepted regarding guarantees and social support provided by the state to HIV-positive persons and their family members, as well as existing labor benefits for professionals involved in diagnostics, treatment, and prevention of HIV/AIDS..."



A. Chukhraev, Chair of the Roundtable, First Deputy Chair of the State Duma Committee on Health Care, member of the Interfactional Deputies' Working Group on Prevention and Fight Against AIDS

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G. Dzlieva, Adviser of the State Duma Committee on Health Care; **E. Karamov**, Aide to First Deputy Chair of the State Duma Committee on Local Governance, member of the Interfactional Deputies' Working Group on Prevention and Fight Against AIDS **G. Safaraliev**; **A. Goliusov**, Head of the Department on HIV/AIDS Prevention of the Ministry of Health of the Russian Federation; **L. Dementieva**, Senior Specialist of the Department on HIV/AIDS Prevention of the Ministry of Health of the Russian Federation; **M. Kotelnikova**, Senior Specialist of the Agency on Social and Pedagogic Support and Rehabilitation of Children of the Ministry of Education of the Russian Federation; **S. Selivanov**, Chief State Sanitary Physician of the Penal and Correctional Systems of the Ministry of Justice of the Russian Federation; **S. Polubinskaya**, Senior Researcher at the Institute of Governance and Law of the Russian Academy of Sciences; **M. Sokolov**, Legal Advisor at the Vologda Region Center on HIV and Infectious Diseases Prevention and Fight; **T. Sychkar**, Lawyer at Krasnoyarsk Kray Center on HIV and Infectious Diseases Prevention and Fight; **V. Zhumagaliev**, Chair of the Russian Harm Reduction Network; **N. Nedzelsky**, Director of the Educational Center InfoPlus; **I. Pchelin**, Chief Editor of "Shagi" magazine; **V. Golikov**, Managing Director, Bioprocess Group, "Pharmapark" Ltd.; **S. Rotberga**, UNODC National Program Officer; **O. Elo**, UNAIDS Representative in the Russian Federation; **T. Shoumilina**, UNAIDS National Program Officer in the Russian Federation; **M. Semenchenko**, WHO HIV/AIDS Program Coordinator; **N. Vozyanova**, USAID Project Management Specialist; **J. Tedstrom**, TPAA President; **A. Khachatryan**, TPAA Senior Manager for Policy and Leadership; **S. Votyagov**, TPAA Associate for Policy and Leadership; **A. Vinokur**, TPAA Research Director; **N. Katsap**, TPAA Programs Associate.

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Transatlantic Partners Against AIDS (TPAA) is an independent, non-governmental organization that leverages the political, civic, scientific, and economic resources of North American, European, and Eurasian partners to combat the rapid and devastating spread of HIV/AIDS in Russia, Ukraine and neighboring countries.