



U N D P

THIRD MEETING OF THE EECA REGIONAL JUDGES' FORUM ON HIV, HUMAN RIGHTS AND THE LAW

11–12 NOVEMBER 2021

BACKGROUND

Eastern Europe and Central Asia (EECA) is one of only three regions where the HIV epidemic is growing; it is also one of only two regions in the world where the annual number of AIDS-related deaths has increased since 2010. According to UNAIDS, there are approximately 1.6 million people living with HIV in the region.¹ Most new infections in the region are among key populations,² who must contend with punitive legal environments, social ostracization and discrimination.

High rates of co-infections are prominent, with tuberculosis (TB) increasingly linked to HIV infection and drug use, while hepatitis C infection is approaching 80 percent prevalence amongst people who use drugs. Nine of the world's 30 countries with a high burden of multidrug-resistant TB (MDR-TB) and extensively drug-resistant TB (XDR-TB) are within the EECA region³.

While there have been significant improvements in the legal environment relevant to HIV and TB in the region, legal barriers persist. The rights of PLHIV, key populations at risk of HIV, and of people experiencing TB are not sufficiently and effectively protected. Additionally, the legal, policy and regulatory frameworks that govern national efforts in prevention, treatment, care and support need significant strengthening. Some key obstacles include: criminalisation of HIV transmission, nondisclosure and exposure; criminalisation of sex work or introduction of increased punitive measures against sex workers; criminalisation of drug use and/ or possession for personal use; forced and coerced HIV testing and others.⁴

Functional and effective judicial systems are imperative to ensure the protection of the rights of key populations. In this regard, the judiciary in a number of the EECA countries has been guite progressive also through important enabling court decisions.

CONTEXT

In its flagship "Risks, Rights & Health" report of 2012⁵ and subsequent 2018 Supplement⁶, the Global Commission on HIV and the Law recognized that the law alone cannot stop HIV transmission, nor can the law alone be blamed when HIV responses are inadequate. However, the Global Commission found that legal environments can play a powerful role in the well-being of people living with or vulnerable to HIV.7 Without the contribution of judicial members in combatting HIV and related conditions, it is unlikely that significant change in how HIV is comprehended on a societal, legal and medical level will be actualized.

to the Global Commission's In response recommendations, the United Nations Development Programme (UNDP) has been facilitating the work of the African Regional Judges' Forum on HIV and AIDS, which held its sixth meeting in 2019. As the Forum

proved to be an important platform for information and experience exchange, raising awareness and sensitizing members of the judiciary on the issues of HIV and key and vulnerable populations, UNDP supported participation of EECA judges in the meetings of the African Judges Forum in 2018 and 2019, creating a clear demand by these judges to replicate the experience in the EECA region.

On 3-4 October 2019, the first meeting of the EECA Judges' Forum on HIV, Human Rights and the Law (hereinafter, the Forum) took place in Chisinau, Moldova, gathering over sixty participants, including members of the judiciary, representatives of national judicial training institutes, officers of UN country offices, and civil society and community activists from 11 countries of EECA, as well as representatives of headquarters and regional offices of UN agencies.

¹ UNAIDS data, https://aidsinfo.unaids.org/.

² UNAIDS considers gay men and other men who have sex with men, sex workers and their clients, transgender people, people who inject drugs and prisoners and other incarcerated people as the main key population groups. These populations often suffer from punitive laws or stigmatizing policies, and they are among the most likely to be exposed to HIV. Their engagement is critical to a successful HIV response everywhere-they are key to the epidemic and key to the response (UNAIDS Terminology Guidelines, 2015, https://www.unaids.org/sites/default/files/media_asset/2015_terminology_guidelines_en.pdf). 3 Stop TB Partnership, High Burden Countries, http://www.stoptb.org/countries/tbdata.asp.

⁴ Global Commission on HIV and the Law, 2018 Supplement, https://hivlawcommission.org/supplement/.

⁵ Global Commission on HIV and the Law, Risks, Rights and Health, https://hivlawcommission.org/report/.

⁶ Global Commission on HIV and the Law, 2018 Supplement, https://hivlawcommission.org/supplement/.

⁷ Global Commission on HIV and the Law, Risks, Rights and Health, https://hivlawcommission.org/report/.

The second meeting of the Forum took place in Dushanbe, Tajikistan, on 15 and 16 October 2020. Due to the global pandemic of COVID-19 and related travel restrictions, the meeting was organized in a hybrid format whereby participants in Tajikistan gathered in one venue, and participants from other countries connected remotely via Zoom. The meeting, focused on the issue of criminalization of HIV transmission, exposure and non-disclosure, gathered 88 participants. The third Forum meeting, organized jointly by UNDP and National School of Judges of Ukraine, took place on November 11–12, 2021, also in a hybrid format using Zoom: participants from Kyrgyzstan and Tajikistan got together in venues in Bishkek and Dushanbe, while others were connecting individually. The first day was devoted to criminal law and the second day to civil law (see **Annex 1: Agenda**).

MEETING REPORT

The Forum meeting commenced with Session 1: Opening, moderated by Mykola Mazur, Supreme Court Judge, Ukraine. During the opening, participants were welcomed by Volodymyr Mazurok, Vice-Rector of the National School of Judges of Ukraine, retired Supreme Court Judge, Gerd Trogemann, Hub Manager, UNDP IRH; Manal Fouani, UNDP Deputy Resident Representative in Ukraine; Dmytro Sherembey, Chair of the Coordinating Council, Charitable Organization "100% Life", Ukraine; and Raminta Stuikite on behalf of Prof. Michel Kazatchkine, Special Advisor to the Joint United Nations Programme on AIDS (UNAIDS) in Eastern Europe and Central Asia; they highlighted the importance of the Forum and outlined major challenges related to HIV and the law faced by the region.

Greetings were followed by introduction and expectations for the meeting, whereby **Amitrajit Saha**, Team Leader of the HIV, Health and Development Team for Africa (UNDP IRH) made linkages with other regional judges' forums, and the previous meetings of the EECA Judges' Forum that took place in 2019 and 2020. Dr. Saha also spoke briefly about the expectations and the agenda of the third meeting.

Session 2: Overview of HIV epidemic and legal environment in EECA, moderated by Sharof Alanazarzoda, Judge of the Supreme Court of the Republic of Tajikistan and a member of the Forum Steering Committee, led the segment on *HIV and the law in EECA: brief overview*. The first speaker, Konstantin Voytsekhovich, Advocacy and Management Adviser of UNAIDS Regional Support Team, spoke about HIV epidemiological trends in the region, highlighting a continued increase of HIV incidence and the failure to achieve the 90-90-90 targets in spite of the progress achieved in recent years (see Figure 1 below).

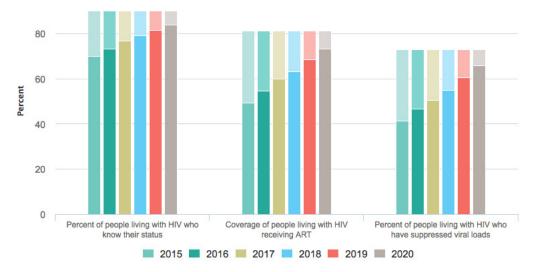
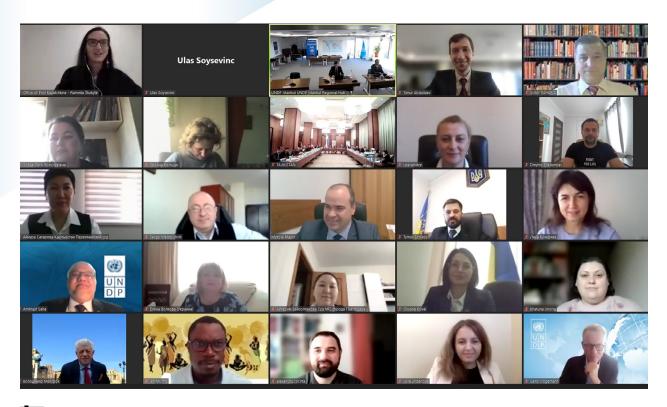


Figure 1. HIV treatment cascade in Eastern Europe and Central Asia

Source: presentation of K. Voytsekhovich



Ю Meeting participants connecting through Zoom. Source: UNDP Istanbul Regional Hub

The speaker also presented an overview of the HIV legal environment globally and in the region; in context of the laws criminalizing HIV transmission, exposure and non-disclosure, again, the situation in EECA is considerably worse compared to the rest of the world.

The second speaker, Elena Vovc, Technical Officer of WHO Europe, presented key facts about HIV based on latest scientific evidence. She explained how antiretroviral treatment brings down viral load in HIV-positive people within 1–3 months with another six months to a confirmatory test; it therefore takes 7 to 10 months for a person living with HIV to pose an effectively zero

risk of HIV transmission. The speaker shared a slide with average risk of transmission through different routes, including different types of sexual intercourses, injecting drug use, blood transfusion, as well as biting and spitting (see Table 1 below). She also spoke about the Expert Consensus Statement on the Science of HIV in the Context of Criminal Law,⁸ an important reference for judges and other participants of HIV-related criminal proceedings. She mentioned factors, which reduce the risk of transmission and should be taken into account by courts when hearing cases on HIV exposure; these include use of condoms, low or undetectable viral load, and pre- and/or post-exposure prophylaxis by the HIV-negative partner.

Table 1. Average Risk of HIV Transmission Per Exposure to Infected Source

Source	Percentage	Odds
Nonsexual modes ⁹		
Blood transfusion	90%	9 in 10
Needle sharing (injection drug use)	0.67%	1 in 149
Needlestick (percutaneous; through the skin)	0.30%	1 in 333
Biting, spitting, throwing body fluids (including semen or saliva), sharing sex toys	negligible	negligible
Oral Sex ¹⁰		
Receptive partner	0%-0.04%	0–1 in 2,500
Insertive partner	~0%	about zero

8 Expert consensus statement on the science of HIV in the context of criminal law, J Int AIDS Soc. 2018 Jul;21(7):e25161. doi: 10.1002/jia2.25161, https:// pubmed.ncbi.nlm.nih.gov/30044059/

HIV Transmission Risk Factsheet, Centers for Disease Control and Prevention, July 2012.

10 Julie Fox et al., Quantifying Sexual Exposure to HIV Within an HIV-Serodiscordant Relationship: Development of an Algorithm. AIDS, 2011.

Vaginal Sex ¹¹		
Risk to female with HIV-positive male partner		
High-income countries	0.08%	1 in 1,250
Low-income countries	0.30%	1 in 333
Risk to male with HIV-positive female partner		
High-income countries	0.04%	1 in 2,500
Low-income countries	0.38%	1 in 263
Anal Sex ¹²		
Insertive partner's risk (circumcised)	0.11%	1 in 909
Insertive partner's risk (uncircumcised)	0.62%	1 in 161
Receptive partner's risk (without ejaculation)	0.65%	1 in 154
Receptive partner's risk (with ejaculation)	1.43%	1 in 70

Source: presentation of E. Vovk

Next segment of the session, Access of people living with HIV, affected by TB and key populations to justice, including during the COVID-19 pandemic, featured two presentations. The first speaker, Viktor Zaharia, Chair of the National Legal Aid Council, Moldova, highlighted some challenges faced by people living with HIV, affected by TB and key populations in the work of police, prosecutors and courts, and even defense lawyers due to stigma, which may lead to low quality of investigation and prosecution and consequently unjust convictions. The speaker offered a number of initiatives to improve access to justice for marginalized and vulnerable communities, such as training of law enforcement officers, development of standard operating procedures, monitoring of police records, as well as specialization of defense lawyers, introducing quality standards and monitoring of quality of services. He also recommended to support the creation of networks of specialized paralegals, and to improve the engagement of NGOs.



न्ति Forum participants in Dushanbe, Tajikistan. Source: UNDP Tajikistan

11 Summarized from Boily MC et al. Heterosexual Risk of HIV-1 Infection Per Sexual Act: Systematic Review and Meta-analysis of Observational Studies. Lancet Infect Dis 9: 118-29, 2009.

12 Jin F et al. Per-Contact Probability of HIV Transmission in Homosexual Men in Sydney in the Era of HAART. AIDS, published online ahead of print, 2010.

Ganna Dovbakh, Executive Director of EHRA, mentioned the types of human rights violations most frequently faced by key populations (e.g., discrimination in healthcare facilities; lack of social protection; arbitrary arrests and police violence; deprivation of parental rights; lack of protection for victims of gender-based violence, etc.). These findings are supported by the evidence collected through REAct and Tiberius tools rolled out in the region. She mentioned that during 2021, EHRA made submissions to eight UN human rights mechanisms leading to recommendations being provided to the governments. She also spoke about the work being done by EHRA to overcome existing barriers to services, including the work of paralegals and mediation.

The third session, International standards and guidelines on HIV decriminalization; experience of HIV decriminalization, was moderated by Oksana Koval, Judge of Svyatoshin district court of Kyiv, Ukraine, and a member of the Forum Steering Committee. The session started with a presentation by Timur Abdullaev, UNDP International Consultant, who emphasized that HIV criminalization affects implementation of countries' international human rights law obligations. As highlighted by UN Secretary General, the UN Special Rapporteur on the Right to Health, as well as a number of human rights treaty bodies, excessive criminalization of HIV exposure and transmission affects the realization of a number of fundamental human rights, including the right to health, right to privacy, and right to non-discrimination. The speaker then highlighted some of the key recommendations that need to be implemented in order to avoid unjustified use of criminal law against people living with HIV including: (1) repealing HIV-specific articles in the criminal codes that not only stigmatize but also violate the human right to privacy (by disclosing the HIV-positive status of those convicted in their criminal record) and instead using general articles on the harm to health; (2) limiting criminalization to only intentional and actual transmission; and (3) introducing important circumstances that are listed in international guidelines and

have to be considered in criminal cases on HIV exposure and transmission. While recognizing obsolete legislation, the speaker pointed to the importance of such tools as Supreme Court Plenum resolutions in order to address some of these recommendations and reduce unnecessary criminalization of people living with HIV even without changing the law.

The second segment of the session was devoted to international experience of decriminalizing HIV and featured a presentation by Edwin Bernard, Executive Director of the HIV Justice Network, who highlighted that full decriminalization, that is applying criminal law to truly outrageous cases of intentional transmission, was only achieved in two countries, the Netherlands and Denmark, but there is a growing number of countries that have modernized their laws to gradually decriminalize certain aspects of HIV non-disclosure, exposure and transmission. The speaker provided latest data on availability of specific or general laws and their application to prosecute alleged nondisclosure, potential or perceived exposure and non-intentional transmission (Figure 2 below). He stressed that even where the legal environment has improved, overly broad HIV criminalization is possible and likely unless there is also clear guidance for police, prosecutors and judges. The speaker presented some of key rulings from different countries of the world (however, none from the EECA region) that have led to an improvement in the legal environment around HIV criminalization. The speaker emphasized that there is no evidence suggesting that decriminalization of HIV non-disclosure, exposure and transmission has a negative impact on the HIV epidemic; on the contrary, the two countries that fully decriminalized HIV are among the only six countries, which reached the UNAIDS' 90-90-90 targets by 2020, and the other four countries (Botswana, Cambodia, Eswatini and Namibia) do not have HIV criminalization laws. Therefore, HIV non-disclosure, exposure and transmission has to be decriminalized to reach the UNAIDS targets of 95-95-95 and fewer than 10% of countries having restrictive legal and policy frameworks by 2025.

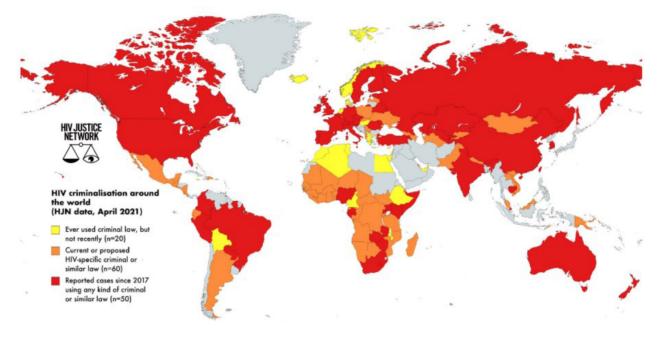


Figure 2. HIV criminalization around the world (HIV Justice Network data)

Source: presentation of E.Bernard

The second speaker was **Tomás Carrizosa**, Deputy Justice of the Constitutional Court of Colombia, who spoke through a video recording for his intervention.¹³ The speaker presented how the Constitutional Court of Colombia in its decision C-248/2019 examined the constitutionality of a legal provision, which provided criminal responsibility and a prison term for up to 12 years for exposure to HIV and hepatitis B, and declared this provision unconstitutional after considering that it breached the principles of equality and free development of one's personality.

After lunch, the meeting resumed with **Session 4**, **Levels and assessment of risk in the context of HIV exposure and other offenses**, chaired by **Diana Scobioala**, Director of the National Institute of Justice, Moldova. The session started with a personal testimony of **Larisa**, an HIV-positive woman from Uzbekistan, who was convicted for HIV exposure because she worked as a hairdresser (one in a list of professions that people living with HIV in Uzbekistan are banned from). The judge took into account some circumstances of the case, such as having an underage child, and convicted her conditionally to two years of imprisonment. The second speaker, Mikhail Golichenko from the Canadian HIV Legal Network, discussed key elements of corpus delicti of knowingly exposing another person to HIV infection. He pointed to three essential characteristics that have to be considered when adjudicating cases of HIV exposure: the risk of infection as the objective element of the crime, and formal elements of the crime (i.e., action that does not result in harmful consequences), which requires the presence of direct intent (i.e., the person's being aware of the risk of infection and wanting the infection to happen). As part of the first element, the speaker referred to the levels of risk as indicated in the Expert Consensus Statement;¹⁴ in line with this, a considerable share of criminal cases on HIV exposure in the region is based on activities that are not associated with any risk of infection and should therefore be dropped or lead to acquittal. Speaking on the form of intent, the speaker quoted two commentaries to the Criminal Code of the Russian Federation,¹⁵ (including one authored by Prof. Bastrykin, the head of the Investigative Committee of the Ministry of Internal Affairs), which say that HIV exposure is only punishable if direct intent to infect was present. The speaker ended his presentation

15 Article-by-Article Commentary to the Criminal Code of the Russian Federation. Ed: N. Gromov, 2007 (in Russian); Criminal Law. Practical Course. Eds: Prof. A.Bastrykin and A. Naumov, 2007 (in Russian).

¹³ Due to time constraints, the video was shown during the closing session later in the day.

¹⁴ Expert consensus statement on the science of HIV in the context of criminal law, J Int AIDS Soc. 2018 Jul;21(7):e25161. doi: 10.1002/jia2.25161, https://pubmed.ncbi.nlm.nih.gov/30044059/.



Forum participants in Dushanbe, Tajikistan. Source: UNDP Tajikistan

with a conclusion that prosecution of any criminal case on HIV exposure has to involve two tests: first, to establish the presence of a real risk of infection, and if the risk is present, then second, to establish the presence of direct intent. Lack of either risk or direct intent should lead to dropping charges or acquittal.

During the discussion at the end of the segment, Dr. Golichenko was asked to comment on the case of Larisa. First, he pointed to the fact that lists of professions that people living with HIV cannot perform (present in many countries of EECA) are not evidence-based. He stressed that while working as a hairdresser involves a negligible risk of infection, even professions involving a contact with blood are associated with strict infection control measures that exclude a risk of transmission. He said that such lists in fact are counter-productive, because instead of requiring strict observation of prevention measures, they ban people from a profession as if it was sufficient for ensuring lack of transmission. The speaker also pointed to Larisa being on ARVs and having a suppressed viral load, meaning that there was no risk of transmission at all. And other circumstances suggest that Larisa did not have any intent to transmit the virus. This shows that Larisa's conviction was an example of excessive, unnecessary and unjustified criminalization of people living with HIV.

Judge **Mykola Mazur** also commented by providing an example from his own practice, where an HIVpositive person broke into a house to commit burglary and forced a woman who was there to have oral sex. The court considered circumstances of the case and decided not to prosecute the person for HIV exposure given the negligible risk of transmission.

The second segment of the session was dedicated to the assessment of risk in context of HIV exposure and other offenses. Judge Sharof Alanazarzoda pointed out that a number of countries criminalize HIV exposure thus making people living with HIV, who have sex with HIV-negative partners, a potential target for prosecution and violating their sexual and reproductive rights. In such cases prosecutors and courts often ignore such important circumstances as informed consent of the HIV-negative partner, use of condoms and undetectable viral load, which, according to latest scientific evidence, minimizes or completely removes the risk of transmission. He stressed that convictions have to be based on sufficient evidence of HIV-positive person's direct intent to infect. Courts have to remember that the risk has to be real; refusal to take ARVs and nondisclosure of this does not by itself constitute a risk of transmission. The speaker believed that prosecution should not take place when the person's viral load is undetectable, did not know of his/her HIV-positive status, was not aware of the routes of transmission, disclosed his/her HIV-positive status and took reasonable measures to reduce the risk of transmission (e.g., use of condoms or other prevention measures). The speaker also said that in cases when the HIV-negative partner was informed



Forum participants in Dushanbe, Tajikistan. Source: UNDP Tajikistan

about the HIV-positive person's diagnosis and accepted the risk, criminal liability should be waived. This provision has been incorporated into Criminal Codes of several EECA countries, but it has certain limitations - e.g., it cannot cover breastfeeding by HIV-positive mothers. In conclusion, the speaker mentioned that the National Strategic Plan of the Republic of Tajikistan prioritizes decriminalization of HIV and possession of drugs for personal use including introduction of alternative measures to punishment for people who use drugs. He also mentioned the ongoing work on the development of the Supreme Court Plenum resolution on application of the Criminal Code article on HIV exposure and transmission, envisaging inadmissibility of prosecution when there is no direct intent and the list of circumstances that have to be taken into account.

The last speaker of the session, **Badri Niparishvili**, Judge of Tetritskaro District Court, Georgia, spoke about the Georgian approach to dealing with HIV exposureandotheroffenses.InGeorgia, both exposure (art. 131(1)) and transmission (art. 131(2) and (3)) are criminalized. Under part 1, intentional HIV exposure means deliberately posing a risk of transmission, even if there was no intent to infect. As to art. 131(2), only actual transmission committed with direct or indirect intent, when the victim was not aware of the HIV-positive status of the person, is criminalized. Art. 131(3) criminalizes negligent transmission of HIV when performing professional duties. Overall, in 2010–2021 only four HIV-related criminal cases were considered, all of them being on intentional transmission of HIV, leading to three convictions. The Georgian Criminal Code also criminalizes, in art. 132, intentional exposure and transmission of a particularly dangerous infectious disease, other than HIV, and the punishment is considerably softer than for HIV exposure and transmission. The speaker also pointed to the current status of criminalization of other behaviors: use of heavy drugs is criminalized but without imprisonment as a punishment; sex work is an administrative offence, while engaging in and providing premises for prostitution is a crime. Trials are open and public, but may be partially or fully closed by request of one of the parties or by the judge's own initiative for the protection of personal data; and rulings cannot be published without permission of the parties.

Session 5: HIV status in criminal procedure was moderated by Olena Volkova, Judge of the Yuzhnoukrainsk city court of the Mykolaiv region and member of the Forum Steering Committee, Ukraine, and featured two speakers. Dmytro Tretyakov, Lawyer at the Registry of the European Court of Human Rights, who presented the Court's caselaw related to HIV-positive status in context of criminal proceedings, especially with cases related to access to medical services for HIVpositive people in pretrial detention and prisons, where the Court found violations of art. 2 (Right to life), art. 3 (Prohibition of torture), art. 5 (Right to liberty and security) and art. 8 (Right to respect for private and family life). The speaker also mentioned some cases where the Court has not found human rights violations alleged by applicants; for instance, the no violation of the Convention was found in applications from HIV-negative prisoners who were held together with HIV-positive inmates as long as the administration took necessary measures to prevent the risk of exposure either by sexual contact or through intravenous drug use.

The second speaker of the session, Judge **Sharof Alanazarzoda**, focused on the issue of confidentiality of the diagnosis of HIV-positive participants of criminal proceedings. He shared an opinion that trials on cases of HIV exposure and transmission should be conducted in a closed format, which is different from the current system in a number of countries (e.g., Georgia), where closed format in trials involving HIV-positive participants is optional. The speaker also pointed out to a number of procedural safeguards that should be involved in order to protect confidentiality and human rights of people living with HIV.

The day was concluded with **Session 6: Closing Day 1**, when Judge **Oksana Koval** summarized the discussions of the day and there were comments and suggestions from some of the meeting participants.

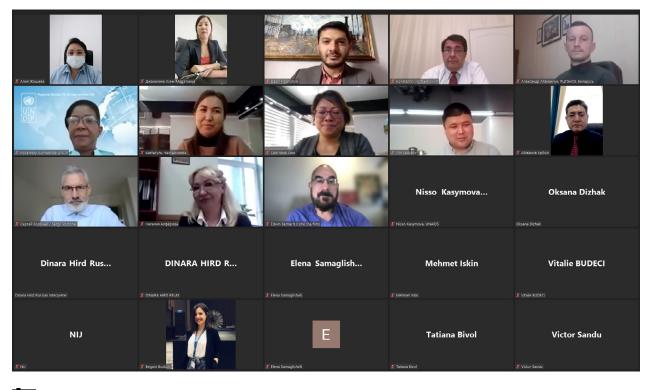
Day 2 started by a brief summary of day 1 by Judge Oksana Koval, who then moderated Session 7: HIV status in context of civil litigation: access to justice. The session started with presentation by Timur Abdullaev, who made an overview of international standards and guidelines related to HIV and civil law and highlighted existing gaps. He pointed that international guidelines on HIV and human rights are mostly focused on criminal law and procedure, where challenges are more significant, while remaining silent on civil law and procedure. However, he highlighted that general safeguards contained in international human rights standards and related to fair trials, equality before the law, safety and security of person, and privacy, are applicable to all proceedings, both criminal and civil.

The second segment of the session was dedicated to HIV status in the context of civil litigation and access to justice. **Sasha Volgina** from the Global Network of People Living with HIV (GNP+) presented some of the challenges faced by people living with HIV in accessing justice, with a particular focus on legislative barriers in EECA countries. She emphasized that punitive legislation against people living with HIV does not only violate their human rights and undermine the effectiveness of HIV responses, but also makes people living with HIV feel vulnerable and unprotected. Fearing their diagnosis disclosed by judicial officers and not believing in justice, they prefer not to seek judicial protection of their rights. She emphasized the importance of progressive rulings in restoring the trust of people living with HIV in justice and pointed to a case from Uzbekistan, where a person was fined for disclosing a couple's HIV-positive status.

In her comment, Judge **Olena Volkova** stressed the importance of awareness raising and sensitization of judges to make sure the judiciary does not discriminate against people living with HIV. She also brought up a case from her practice, when a person living with HIV decided not to seek judicial protection of his violated rights (disclosure of HIV-positive status and termination of his employment based on his diagnosis).

The next speaker, **Valerian Mamaliga** from NGO IDOM, Moldova, spoke about the involvement of his organization in extrajudicial and judicial protection of the rights of people living with and affected by HIV. Litigation may be individual and strategic; individual litigation is usually more resource-intensive and less impactful, which is why NGOs usually focus on strategic cases that are part of larger advocacy efforts and are aimed at bringing about legal and legislative change. The speaker also gave some specific examples of successful strategic cases led by IDOM, which led to revision of the country's bylaws related to access to care, social protection, and disclosure of HIV-positive diagnosis.

Session 8: Civil law and HIV was moderated by Judge Khatuna Jinoria from Georgia. The first segment, on the right to confidentiality, was opened by Iryna Senyuta, Head of the Committee on Medical and Pharmaceutical Law and Bioethics at the Ukrainian National Bar Association, who spoke about the right to confidentiality of HIV-positive status. She gave a Council of Europe definition of medical data, which is particularly relevant to all Council of Europe member States: *"all personal data concerning the health of an individual. It refers also to data which have a clear and*



Б Meeting participants connecting through Zoom. Source: UNDP Istanbul Regional Hub

close link with health as well as to genetic data".¹⁶ She also pointed to Article 8 of the European Convention of Human Rights (Right to respect for private and family life) and Article 10 of the Convention on Human Rights and Biomedicine (Private life and right to information);¹⁷ both documents are often referred to by the European Court of Human Rights in the context of HIV-related cases. The speaker then presented key provisions of Ukrainian legislation, specifically mentioning that the law recognizes both HIV-diagnosis and information related to provision of health services (which, inter alia, includes such non-medical information as sexual orientation and preferences) as confidential information that constitutes a medical secret. The speaker paid particular attention to conditions under which confidential information can be disclosed, including in court proceedings.

The next speaker, Vitalie Budeci, Judge of Chisinau Court, Moldova, and a Member of the Forum Steering Committee, made a presentation on the right to confidentiality and mechanisms of its enforcement in Moldova. He explained that there are three ways of resolving violations related to confidentiality of HIV diagnosis (peaceful resolution by requesting responsible staff member or administration of the agency that breached confidentiality to prevent the violation; by complaining to the administration of the agency requesting to bring the responsible staff member to disciplinary liability; by complaining to police or prosecutor's office requesting to bring the responsible person to liability, including criminal; and civil suit against the responsible person or agency) and provided relevant practical examples.

Next segment of the session was focused on claiming moral and material damages in HIV-related cases. Sergey Volochay, Expert Psychologist from Ukraine, spoke about establishing and claiming moral damages. He pointed that instead of being based on characteristics of the offense or right violation, establishing moral damages should be centered at personal characteristics of the victim and the experienced impact of the offense/ right violation on the victim. The speaker offered a set of questions which can be used to correctly assess moral damages (e.g., Does the offense

17 Convention for the protection of Human Rights and Dignity of the Human Being with regard to the Application of Biology and Medicine: Convention on Human Rights and Biomedicine (ETS No. 164). https://www.coe.int/en/web/conventions/full-list?module=treaty-detail&treatynum=164.

¹⁶ Council of Europe, Committee of Ministers, Recommendation No. R (97) 5 on the Protection of Medical Data (Feb. 13, 1997), http://hrlibrary.umn.edu/ instree/coerecr97-5.html

represent a traumatic experience? Has the offense caused mental suffering? How can the suffering be compensated? How can adequate financial compensation be established?), and emphasized the importance of taking into account both primary factors (the offense and its circumstances) and secondary factors (consequences of the offense and of its circumstances).

The topic was further explored by the next speaker, Mykyta Rybak, Judge of Shevchenkivskyi District Court of Kyiv City, Ukraine, who shared his experience of adjudicating a case where a child contracted HIV during blood transfusion. In his decision, he referred to ECHR caselaw and the European Charter of Patients' Rights when establishing that the doctors had to get informed consent of the parents for the transfusion. To identify adequate compensation for moral damages of the plaintiff, the speaker tried to assess the moral suffering caused, and eventually his decision was upheld both by the appellate court and by the Supreme Court. While it is the role of the counsel to invite experts, such as psychologists, the speaker pointed to the importance of explaining to relevant parties the benefit of having such experts participate in the hearing.

Next segment of the session on HIV and employment: labour disputes was opened by Evghenii Golosceapov from the Equality Council of Moldova. Equality Council is an independent quasi-judicial human rights body established in 2003 to prevent and combat discrimination and promote equality. It consists of 5 members appointed by the Parliament and 20 staff members. HIV-positive status is among the protected grounds, but according to social distance index data, people living with HIV are the second least accepted group after LGBT persons. The speaker mentioned that between 2013 and 2021, the Council considered 11 HIV-related cases, which is only a fraction of discrimination faced by people living with HIV. He reiterated the point that people living with HIV often prefer not to seek justice because of fear of disclosure of their diagnosis and further violations of their rights. He then presented two cases, both related to discrimination in employment. In one of the cases, No. 16/20, the Council established that the HIVpositive applicant was discriminated against when his

employment was terminated and requested a number of actions to restore the applicant's rights. Besides, to seek financial compensation for the violated rights, the applicant went to court, which confirmed the findings of the Council and ordered compensation of moral and material damages.

The second speaker, **Ketevan Meskhishvili**, Judge of Tbilisi Court of Appeals, Professor of the Free University of Tbilisi, Georgia, and a Member of the Forum Steering Committee made an overview of the Georgian legislation and practice in relation to HIVrelated discrimination in the area of employment. The list of protected grounds is open-ended; "other status" includes health status, which in turn includes HIV-positive status. In case of termination of contract with an HIV-positive person, who claims that his/her HIV-positive status was the ground for contract termination, the employer bears the burden of proving otherwise.

Session 9: Family law and HIV, was moderated by Judge Olena Volkova. In the first segment, Custody and adoption by people living with HIV, Baktygul Israilova, Director of the national network of women living with HIV from Kyrgyzstan, presented a strategic case where an HIV-positive woman could not adopt her own nephew due to an existing prohibition for people living with HIV to become adoptive parents, guardians or custodians. Eventually, the decision of the Constitutional Chamber of the Supreme Court of Kyrgyzstan found the prohibition unconstitutional and requested HIV to be removed from the list of grounds that exclude adoption, custody and guardianship. As of the time of the presentation, the Ministry of Justice was working on necessary amendments, including the list of eligibility criteria for people living with HIV to become adoptive parents, guardians and custodians. After that, Kyrgyzstan will become the fourth country of the region (after Moldova, the Russian Federation, and Ukraine), where the people living with HIV are fully or partly¹⁸ eligible to become adoptive parents, guardians or custodians.

Ruslan Poverga, Director of NGO "Positive Initiative", Moldova, spoke about recommendations of the Legal Environment Assessment, carried out by UNDP in Moldova in 2018–2019, of which the community

of people living with HIV and broader civil society identified five priority areas: (1) HIV decriminalization, (2) removing barriers preventing people living with HIV to become adoptive parents, (3) ensuring equal access to reproductive health services, including in-vitro fertilization (IVF), (4) review of maximum allowed amounts of psychoactive substances to be possessed, and (5) review of narcological registration system. Of these five, two barriers (2 and 3) have been removed: the Ministry of Health approved two decrees - one prohibits using HIV-positive status as a ground for denying adoption, and the other removed a ban for people living with HIV to access IVF as long as they are enrolled in ART, have a suppressed viral load and a CD4 count of at least 500 cells/ml.

The segment on **HIV as a barrier for marriage and** a ground for divorce was opened by Judge Khatuna Jinoria, Georgia. The speaker highlighted that according to the Georgian legislation, couples willing to get married are neither required to go through any medical check-ups nor need to provide any medical documentation. HIV is also not among the grounds for divorce; however, if one of the spouses wishes to discontinue marriage for whatever reason (e.g., because the other spouse was diagnosed HIV-positive or did not inform about his diagnosis before marriage), it will be a sufficient ground for divorce-and in cases of non-disclosure, the HIVpositive spouse may be requested to compensate moral damages. However, in case of divorce because of HIV-positive status of one of the spouses, the spouse's property rights and ability to participate in the upbringing of their common children cannot be limited only on the grounds of HIV status.

Evgeniya Korotkova, NGO "Hope and Life", Uzbekistan, pointed to the existence of mandatory premarital medical examination, and in case of HIV-positive status of one of the partners, the other partner has to be informed and confirm, in the written form, their readiness to get married. As to divorces in families where one of the spouses is HIV-positive, the speaker mentioned a case, where after divorce the HIV-positive man was allowed to spend certain time with their common child, but the ex-wife appealed against the decision, and the appellate court reduced the amount of time because of the man's HIV-positive status. Nevertheless, the highest court upheld the initial decision and did not allow restricting the man's

right to spend time with his child only because of his HIV-positive status. The speaker concluded that people living with HIV face discrimination in realization of their right to family and private life.

Larisa Aleksandrova, Legal and Gender Expert of NGO "Human Rights Centre, Tajikistan, pointed that in her country, there is a requirement of premarital medical examination, which includes tests for HIV, syphilis, TB, as well as hepatitis B and C. The speaker highlighted some of the flaws in the system, such as no consent required to inform the other partner about the outcomes of the tests Moreover, there are instances where upon receipt of HIV-positive results, doctors fail to authorize the certificate thus making it impossible for the marriage to take place. She referred to a case where doctor's refusal was supported by the Ministry of Health (which recommended to postpone marriage till the viral load is reduced), but overturned by court (the judge, who made the decision also participated in the Forum meeting). In the regions, the required tests may not be available for free and doctors may refer couples to private clinics. Finally, there were instances when the HIV-negative partner consents to marriage with an HIV-positive person, but later decides to seek a divorce. In such cases HIV-positive status can be accepted as a ground for divorce. Even worse, sometimes the HIV-negative partner files a complaint to the police leading to criminal prosecution of the HIV-positive partner as the Criminal Code does not waive responsibility for HIV exposure or transmission on the grounds of informed consent of the HIV-negative partner. The speaker concluded that premarital testing should be voluntary and be accompanied with proper counseling.

The event concluded with Session 10: Next steps and closing, moderated Judge Sharof Alanazarzoda. The Forum was concluded with closing remarks of meeting organizers: Rosemary Kumwenda, Regional HHD Team Leader UNDP, Olena Volkova, Judge of the Yuzhnoukrainsk city court of the Mykolaiv region, Ukraine, Oksana Koval, Judge of Svyatoshin district court of Kyiv, Ukraine, Ketevan Meskhishvili, Judge of Tbilisi Court of Appeals, Professor of the Free University of Tbilisi, Georgia, Vitalie Budeci, Judge, Chisinau Court, Moldova, Sharof Alanazarzoda, Judge of the Supreme Court of the Republic of Tajikistan, and Volodymyr Mazurok, Vice-Rector of the National School of Judges of Ukraine.

Recommendations of the third Forum meeting

- 1. The fourth Forum meeting to be organized in Tbilisi, Georgia.
- 2. UNDP Istanbul Regional Hub to coordinate with the Steering Committee and national partners to prepare for fourth Forum meeting.
- 3. The theme and dates of the fourth Forum meeting to be determined in consultation with the Forum Steering Committee.
- 4. The development of the Forum interactive platform to continue.
- Other events, including webinars, national judges' forum meetings, etc., to be organized regularly. 5.

Evaluation

At the end of the meeting, Forum participants were asked to fill out an evaluation form (Annex 2); a total of 15 responses were received from participants who connected remotely. In general, participants were highly satisfied with the meeting: an average score was 4.9 of 5 (13 participants gave 5 points, and 2 participants gave 4).

The second question, "How helpful was the Forum for your work?" received the same average score of 4.9, though breakdown of individual responses was different (14 participants gave 5 points and one participant gave 3). The most liked session was Session 8: Civil Law and HIV (12 votes of 14), followed by Session 4: Levels and assessment of risk in context of HIV exposure and other offenses, Session 7: HIV status in context of civil litigation: access to justice, and Session 9: Family law and HIV (each receiving 10 votes of 14). The least liked sessions were Session 1: Opening and Session 6: Closing day 1 (4 votes each).

As to question "How satisfied are you with the format of the meeting (online connection, Zoom platform)?", most participants were satisfied: an average score was 4.3 (10 participants gave 5 points and three

participants gave 4 points; notably, two participants were very unsatisfied and gave 1 point only).

Answering the question "What are the key takeaways from the meeting for you?", participants highlighted the opportunity to learn experiences of other countries, hear the stories of people living with HIV, understand that HIV is not a death sentence and learn about establishing moral damages. One of the participants wrote: "I liked the forum very much, I received so much useful information about issues that I have never even thought about. I want to thank the organizers for such an initiative. Unfortunately, in our society there is still a stereotype that HIV is dangerous and not treatable, which makes people living with HIV social outcasts. Thanks to the Forum, I now know more about HIV, and I will share this information and apply it in my work. Regarding decriminalization of HIV specific articles of the Criminal Code, it is the first time I heard about it, and I think it is a good initiative that is aimed to protect the rights of people living with HIV. It was also interesting to hear about the problem of adoption by people living with HIV. A big thank you to all the speakers, organizers and participants of the Forum".

ANNEX 1: AGENDA

	DAY 1 — 11 NOVEMBER, 2021, THURSDAY								
		Tii	me						
Tirana	Kyiv, Chisinau	Istanbul	Tbilisi	Dushanbe, Tashkent	Nur-Sultan, Bishkek	Торіс	MODERATORS / SPEAKERS		
7:30-8:00 (30 min)	08:30-9:00 (30 min)	9:30-10:00 (30 min)	10:30–11:00 (30 min)	11:30–12:00 (30 min)	12:30–13:00 (30 min)	Connection and registration of participants			
8:00-9:00 (1 hour)	9:00-10:00 (1 hour)	10:00-11:00 (1 hour)	11:00-12:00 (1 hour)	12:00-13:00 (1 hour)	13:00-14:00 (1 hour)	Session 1: Opening	Moderator: Mykola Mazur, Supreme Court Judge, Ukraine		
8:00-8:40 (40 min)	9:00-9:40 (40 min)	10:00–10:40 (40 min)	11:00–11:40 (40 min)	12:00–12:40 (40 min)	13:00–13:40 (40 min)	Opening and welcoming notes	Speakers: Volodymyr Mazurok, Vice-Rector of the National School of Judges of Ukraine, retired Supreme Court Judge, Ukraine Gerd Trogemann, Hub Manager, UNDP IRH Manal Fouani, UNDP Deputy Resident Representative in Ukraine Dmytro Sherembey, Chair of the Coordinating Council, Charitable Organization "100% Life", Ukraine Prof. Michel Kazatchkine, Special Advisor to the Joint United Nations Program on AIDS [UNAIDS] in Eastern Europe and Central Asia		
8:40-9:00 (20 min)	9:40-10:00 (20 min)	10:40–11:00 (20 min)	11:40-12:00 (20 min)	12:40-13:00 (20 min)	13:40-14:00 (20 min)	Introduction and expectations for the meeting	Moderator Amitrajit Saha, Team Leader, HIV, Health and Development Team for Africa, UNDP IRH		
9:00-9:30 (30 min)	10:00-10:30 (30 min)	11:00–11:30 (30 min)	12:00–12:30 (30 min)	13:00–13:30 (30 min)	14:00–14:30 (30 min)	Coffee	e Break/Group photo		
9:30–10:10 (40 min)	10:30–11:10 (40 min)	11:30-12:10 (40 min)	12:30–13:10 (40 min)	13:30–14:10 (40 min)	14:30–14:10 (40 min)	Session 2: Overview of HIV epidemic and legal environment in EECA	Moderator: Sharof Alanazarzoda, Judge of the Supreme Court of the Republic of Tajikistan, Member of the Steering Committee of the Judges' Forum		
9:30-9:50 (20 min)	10:30–10:50 (20 min)	11:30-11:50 (20 min)	12:30–12:50 (20 min)	13:30–13:50 (20 min)	14:30–14:50 (20 min)	HIV and the law in EECA: brief overview	Speakers: Konstantin Voytsekhovich, Advocacy and Management Adviser, UNAIDS RST Elena Vovc, Technical Officer, WHO Europe		

9:50-10:10 (20 min)	10:50–11:10 (20 min)	11:50–12:10 (20 min)	12:50–13:10 (20 min)	13:50–14:10 (20 min)	14:50–15:10 (20 min)	Access of people living with HIV, affected by TB and key populations to justice, including during the COVID-19 pandemic	Speakers: Viktor Zaharia, Chair of the National Legal Aid Council, Moldova Ganna Dovbakh, Executive Director, EHRA
10:10–11:00 (50 min)	11:10–12:00 (50 min)	12:10-13:00 (50 min)	13:10-14:00 (50 min)	14:10-15:00 (50 min)	15:10-16:00 (50 min)	Session 3: International standards and guidelines on HIV decriminalization; experience of HIV decriminalization	<i>Moderator: Oksana Koval, Judge of Svyatoshin district court of Kyiv, Ukraine, Member of the Forum Steering Committee</i>
10:10–10:30 (20 min)	11:10–11:30 (20 min)	12:10–12:30 (20 min)	13:10–13:30 (20 min)	14:10-14:30 (20 min)	15:10-15:30 (20 min)	International standards and guidelines related to HIV decriminalization: existing documents, their status, gaps	Speaker: Timur Abdullaev, UNDP International Consultant
10:30–11:00 (30 min)	11:30–12:00 (30 min)	12:30–13:00 (30 min)	13:30–14:00 (30 min)	14:30-15:00 (30 min)	15:30-16:00 (30 min)	International experience of decriminalizing HIV	Speakers: Edwin Bernard, Executive Director, HIV Justice Network Tomás Carrizosa, Deputy Justice, Constitutional Court of Colombia (video recording)
11:00-12:00 (1 hour)	12:00-13:00 (1 hour)	13:00-14:00 (1 hour)	14:00-15:00 (1 hour)	15:00-16:00 (1 hour)	16:00-17:00 (1 hour)		Lunch
12:00-13:00 (1 hour)	13:00-14:00 (1 hour)	14:00-15:00 (1 hour)	15:00-16:00 (1 hour)	16:00–17:00 (1 hour)	17:00-18:00 (1 hour)	Session 4: Levels and assessment of risk in context of HIV exposure and other offenses	Moderator: Diana Scobioala, Director, National Institute of Justice, Moldova
12:00-12:30 (30 min)	13:00–13:30 (30 min)	14:00–14:30 (30 min)	15:00–15:30 (30 min)	16:00–16:30 (30 min)	17:00–17:30 (30 min)	Levels of risk in context of HIV exposure and other offenses	Speakers: Larisa, Woman living with HIV convicted for HIV exposure Mikhail Golichenko, Canadian HIV Legal Network
10.00 10.00	13:30-14:00	14:30-15:00	15:30-16:00	16:30-17:00	17:30-18:00	Assessment of risk in context	Speakers:
12:30–13:00 (30 min)	(30 min)	(30 min)	(30 min)	(30 min)	(30 min)	of HIV exposure and other offenses	Sharof Alanazarzoda, Judge of the Supreme Court of the Republic of Tajikistan Badri Niparishvili, Judge, Tetritskaro District Court, Georgia

13:15–13:45 (30 min)	14:15–14:45 (30 min)	15:15–15:45 (30 min)	16:15–16:45 (30 min)	17:15–17:45 (30 min)	18:15–18:45 (30 min)	Session 5: HIV status in criminal procedure	Moderator: Olena Volkova, Judge of the Yuzhnoukrainsk city court of the Mykolaiv region (Ukraine), Member of the Forum Steering Committee
13:15–13:45 (30 min)	14:15–14:45 (30 min)	15:15–15:45 (30 min)	16:15–16:45 (30 min)	17:15–17:45 (30 min)	18:15–18:45 (30 min)	HIV status in context of criminal procedure (confidentiality in trials)	Speakers: Dmytro Tretyakov, Lawyer at the Registry of the European Court of Human Rights Sharof Alanazarzoda, Judge of the Supreme Court of the Republic of Tajikistan
13:45–14:15 (30 min)	14:45–15:15 (30 min)	15:45–16:15 (30 min)	16:45–17:15 (30 min)	17:45–18:15 (30 min)	18:45–19:15 (30 min)	Session 6: Closing day 1	<i>Moderator: Oksana Koval, Judge of Svyatoshin district court of Kyiv, Ukraine, Member of the Forum Steering Committee</i>
13:45–14:10 (25 min)	14:45–15:10 (25 min)	15:45–16:10 (25 min)	16:45–17:10 (25 min)	17:45–18:10 (25 min)	18:45–19:10 (25 min)	Questions and answers	Moderator
14:10–14:15 (5 min)	15:10–15:15 (5 min)	16:10–16:15 (5 min)	17:10–17:15 (5 min)	18:10–18:15 (5 min)	19:10–19:15 (5 min)	Wrap up	Moderator

	DAY 2 — 12 NOVEMBER, 2021, FRIDAY									
		Tiı	me							
Tirana	Kyiv, Chisinau	Istanbul	Tbilisi	Dushanbe, Tashkent	Nur-Sultan, Bishkek	Торіс	MODERATORS / SPEAKERS			
8:00-8:10 (10 min)	9:00-9:10 (10 min)	10:00–10:10 (10 min)	11:00–11:10 (10 min)	12:00–12:10 (10 min)	13:00–13:10 (10 min)	Opening of day 2	Oksana Koval, Judge of Svyatoshin district court of Kyiv, Ukraine, Member of the Forum Steering Committee			
8:10-9:00 (50 min)	9:10-10:00 (50 min)	10:10-11:00 (50 min)	11:10-12:00 (50 min)	12:10-13:00 (50 min)	13:10-14:00 (50 min)	Session 7: HIV status in context of civil litigation: access to justice	Moderator: Oksana Koval, Judge of Svyatoshin district court of Kyiv, Ukraine, Member of the Forum Steering Committee			
8:10-8:30 (20 min)	9:10-9:30 (20 min)	10:10-10:30 (20 min)	11:10-11:30 (20 min)	12:10-12:30 (20 min)	13:10-13:30 (20 min)	International standards and guidelines related to HIV and civil law: existing documents, their status, gaps	Speaker: Timur Abdullaev, UNDP International Consultant			

8:30-9:00 (30 min)	9:30-10:00 (30 min)	10:30-11:00 (30 min)	11:30-12:00 (30 min)	12:30–13:00 (30 min)	13:30–14:00 (30 min)	HIV status in the context of civil litigation: access to justice	Speakers: Sasha Volgina, Global Network of People Living with HIV (GNP+) Valerian Mamaliga, Lawyer, IDOM, Moldova
9:00-9:15 (15 min)	10:00–10:15 (15 min)	11:00–11:15 (15 min)	12:00–12:15 (15 min)	13:00–13:15 (15 min)	14:00–14:15 (15 min)		Coffee Break
9:15-10:15 (1 hour)	10:15-11:15 (1 hour)	11:15-12:15 (1 hour)	12:15–13:15 (1 hour)	13:15-14:15 (1 hour)	14:15-15:15 (1 hour)	Session 8: Civil law and HIV	Moderator: Khatuna Jinoria, Judge, Georgia
9:15-9:35 (20 min)	10:15–10:35 (20 min)	11:15-11:35 (20 min)	12:15-12:35 (20 min)	13:15–13:35 (20 min)	14:15-14:35 (20 min)	The right to confidentiality— enforcement mechanisms	Speakers: Iryna Senyuta, Head of the Committee on Medical and Pharmaceutical Law and Bioethics at the Ukrainian National Bar Association Vitalie Budeci, Judge, Chisinau Court, Moldova, Member of the Forum Steering Committee
9:35-9:55 (20 min)	10:35–10:55 (20 min)	11:35–11:55 (20 min)	12:35–12:55 (20 min)	13:35–13:55 (20 min)	14:35–14:55 (20 min)	Claiming moral and material damages in HIV-related cases	Speakers: Sergey Volochay, Expert Psychologist Mykyta Rybak, Judge of Shevchenkivskyi District Court of Kyiv City, Ukraine
9:55–10:15 (20 min)	10:55–11:15 (20 min)	11:55–12:15 (20 min)	12:55–13:15 (20 min)	13:55–14:15 (20 min)	14:55–15:15 (20 min)	HIV and employment: labour disputes	Speakers: Evghenii Aleksandrovich Golosceapov, Equality Council, Moldova Ketevan Meskhishvili, Judge of Tbilisi Court of Appeals, Professor of the Free University of Tbilisi, Georgia, Member of the Forum Steering Committee
10:15-11:15 (1 hour)	11:15–12:15 (1 hour)	12:15–13:15 (1 hour)	13:15-14:15 (1 hour)	14:15–15:15 (1 hour)	15:15–16:15 (1 hour)	Session 9: Family law and HIV	Moderator: Olena Volkova, Judge of the Yuzhnoukrainsk city court of the Nikolaev region (Ukraine), Member of the Forum Steering Committee
10:15–10:45 (30 min)	11:15–11:45 (30 min)	12:15–12:45 (30 min)	13:15–13:45 (30 min)	14:15–14:45 (30 min)	15:15–15:45 (30 min)	Custody and adoption by people living with HIV	Speakers: Baktygul Israilova, Community representative from Kyrgyzstan Ruslan Poverga, Positive Initiative, Moldova Khatuna Jinoria, Judge, Georgia

10:45–11:15 (30 min)	11:45–12:15 (30 min)	12:45–13:15 (30 min)	13:45–14:15 (30 min)	14:45–15:15 (30 min)	15:45–16:15 (30 min)	HIV as a barrier for marriage and a ground for divorce	Speakers: Khatuna Jinoria, Judge, Georgia Evgeniya Korotkova, NGO "Hope and Life", Uzbekistan Larisa Aleksandrova, Legal and Gender Expert NGO "Human Rights Centre", Tajikistan
11:15–12:15 (1 hour)	12:15-13:15 (1 hour)	13:15-14:15 (1 hour)	14:15-15:15 (1 hour)	15:15-16:15 (1 hour)	16:15–17:15 (1 hour)		Lunch
12:15–13:15 (1 hour)	13:15–14:15 (1 hour)	14:15–15:15 (1 hour)	15:15–16:15 (1 hour)	16:15–17:15 (1 hour)	17:15–18:15 (1 hour)	Session 10: Next steps and closing	Moderator: Sharof Alanazarzoda, Judge of the Supreme Court of the Republic of Tajikistan, Member of the Steering Committee of the Judges' Forum
12:15–12:35 (20 min)	13:15–13:35 (20 min)	14:15–14:35 (20 min)	15:15–15:35 (20 min)	16:15–16:35 (20 min)	17:15–17:35 (20 min)	Questions and answers	Moderator
12:35–12:55 (20 min)	13:35–13:55 (20 min)	14:35–14:55 (20 min)	15:35–15:55 (20 min)	16:35–16:55 (20 min)	17:35–17:55 (20 min)	Plenary Discussion: Next steps and opportunities for expanding regional collaboration	Moderator
12:55–13:15 (20 min)	13:55–14:15 (20 min)	14:55–15:15 (20 min)	15:55–16:15 (20 min)	16:55–17:15 (20 min)	17:55–16:15 (20 min)	Concluding remarks Acknowledgments	Speakers: Rosemary Kumwenda, Regional HHD Team Leader UNDP Sharof Alanazarzoda, Judge of the Supreme Court of the Republic of Tajikistan Olena Volkova, Judge of the Yuzhnoukrainsk city court of the Mykolaivregion, Ukraine Oksana Koval, Judge of Svyatoshin district court of Kyiv, Ukraine Ketevan Meskhishvili, Judge of Tbilisi Court of Appeals, Professor of the Free University of Tbilisi, Georgia, Member of the Forum Steering Committee
							Vitalie Budeci, Judge, Chisinau Court, Moldova

ANNEX 2: EVALUATION FORM

- 1. How satisfied were you with the meeting of the Forum? (0 = not satisfied at all, 5 = totally satisfied)
- 2. How helpful was the Forum for your work? (0 = not helpful at all, 5 = extremely helpful)

3. Which sessions did you like the most?

Session 1: Opening Session 2: Overview of HIV epidemic and legal environment in EECA Session 3: International standards and guidelines on HIV decriminalization; experience of HIV decriminalization Session 4: Levels and assessment of risk in context of HIV exposure and other offenses Session 5: HIV status in criminal procedure Session 6: Closing day 1 Session 7: HIV status in context of civil litigation: access to justice Session 8: Civil law and HIV Session 9: Family law and HIV Session 10: Next steps and closing

4. What are the key take-aways from the meeting for you?

5. How satisfied are you with the format of the meeting (online connection, Zoom platform)? (0 = not satisfied at all, 5 = totally satisfied)



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