

Annual Progress Report 2024: Joint Programme in the High Impact Track

Reporting period: From the start date of the Joint Programme (JP) until 31 December 2024.

- Please be succinct and to the point, focusing on the most important accomplishments and issues that you want to bring to the attention of the Joint SDG Fund at the global level.
- Please do not exceed the word limit for each narrative question.
- Please feel free to contact your main focal point in the Joint SDG Fund Secretariat (maya.marquez@un.org or yao.wang@un.org) for questions and support.

Submission deadline from RCOs on behalf of RCs and the JP team: 31 January 2025. Please submit this document through this link: <https://forms.office.com/e/k0WF72VbDk>

COVER PAGE

JOINT PROGRAMME (JP) PROFILE:	
Country	Kyrgyzstan
JP title	“Bridging the Digital Health Divide”
Funding Round	Digital Transformation
Cross-fertilized SDG Transitions (Select the 2 main SDG transition that are the most reflected in the JP results/progress so far)	Decent Jobs and Universal Social Protection Digital Transformation Energy Access and Affordability Food Systems Transformation Transforming Education Climate change, biodiversity loss, pollution
JP TEAM:	
Resident Coordinator	Name: Antje Grawe Email: grawe@un.org
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PUNOs focal points	Name: Nurgul Smankulova Title: SRH specialist Organisation: United Populations Fund, UNFPA Email: smankulova@unfpa.org
PUNOs focal points	Name: Azamat Usubaliev Title: Programme Specialist and Team Leader for Sustainable Economic Development Organisation: United Nations Development Programme, UNDP Email: azamat.usubaliev@undp.org
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JP's designated
communications focal point

Name: Aiperi Alymbekova
Title: Communication Officer
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Overall self-assessment of the JP progress as of 31 December 2024.

The primary objective of the Joint SDG Fund's seed funding track is to provide countries with support and resources to incubate and pilot transformative solutions and approaches (including actions to development and implement national roadmaps or priorities) that can subsequently lead to accelerating progress across key SDG Transitions at scale. Towards this objective, please evaluate the performance of the JP.

For more information of key SDG Transitions: <https://unsdg.un.org/resources/six-transitions-investment-pathways-deliver-sdgs>

Overall self-assessment of the JP progress as of 31 December 2024:

- Not on-track** to deliver results expected withing the first 9 months, as per JP document.
- On-track** to deliver results expected withing the first 9 months, as per JP document
- Above expectations:** besides being on track to deliver expected results, additional results are anticipated within the first 9 months

If you responded “not on-track”, please briefly explain reasons for delays in progress.

If you responded “above expectations”, please provide the list of additional results that are anticipated for the first 9 months.

A. Results Narrative

The narrative section provides a succinct description of the progress and results achieved during this reporting period, as per the JP document, including the theory of change and results framework.

1. Summary of JP implementation

Please provide a brief, succinct and focused summary of the overall progress of the JP for this reporting period. Differentiate between completed actions and preparatory work towards 2025 results. Focus on progress toward each of the three main results as outlined in the JP document.

(max. 600 words)

1. **Development of Technical Audit ToR:** A Terms of Reference (ToR) for a technical audit of existing information systems has been prepared to identify gaps in interoperability, patient access, and data security.
2. **Stakeholder Consultations:** Initial consultations with stakeholders were conducted to gather inputs on technical priorities for system integration and improved patient access through the Digital Health Profile platform.
3. **Adoption of Unified Digital Health Ecosystem Regulation:** The regulation governing the Unified Digital Health Ecosystem was adopted by the Cabinet of Ministers of the Kyrgyz Republic on October 24, 2024 (Decree No. 640).
4. **National Digital Health Strategy:** The Ministry of Health adopted the National Digital Health Strategy (2025–2027), marking a significant in-kind contribution to advancing digital health.

5. **Telemedicine Expansion:** Six new districts were identified for telemedicine expansion, prioritizing underserved and remote regions based on regional assessments.
6. **Clinical Protocol Digitalization:** The Ministry of Health established working groups to review 11 existing clinical protocols and to digitalize three new protocols for managing chronic conditions in children via telemedicine.

2. Progress towards JP's transformative impact

Outline the JP's current progress in achieving its intended transformative impact across main pillars.

2.1 In bullet points, describe the JP's contribution to integrating policies, financing and actions. Focus on cross-sectoral approaches and the intersection of digitalization with other SDG transitions within the JP. Highlight emerging synergies aligned with the JP theory of change. Reference specific SDG targets from the JP document and progress made.

(max. 600 words)

Contribution to Integrating Policies, Financing, and Actions

1. **A Decree of the Cabinet of Minister was issued:** This document provides a legislative foundation for the interoperability of digital health information systems, ensuring integrated and efficient service delivery across the health and social protection sectors (SDG 16.9, 16.10). This document was developed to ensure the sustainability of digital health initiatives, particularly those of the JP.
2. **Update of the National Digital Health Strategy for 2025-2027:** The National Digital Health Strategy for 2025-2027 was adopted by the MoH, setting a strategic framework for digital health development, and aligning with broader state information system policies (SDG 3.8, 3.d, 17.8).
3. **Technical Audit of IT systems:** The Terms of Reference for the audit were developed and discussed with national partners, and a tender announcement is expected in February/March 2025.
4. **Strengthening Cybersecurity:** The risk assessment for digital health is initiated under the JP, the draft of Terms of References is on development.
5. **Laboratory Information System's Modernization:** The Terms of Reference for the modernizing of the Lab Information System were developed and discussed with national partners.
6. **Developed and approved guideline on telemedicine in maternities.** The MoH established working groups to review 11 existing clinical protocols and to digitalize three new protocols for managing chronic conditions in children via telemedicine.

2.2 In bullet points, describe what the JP has been doing to facilitate accelerating implementation and contribute to faster achievement of the SDG targets identified in the JP document.

(max. 400 words)

- **Conducting a Technical Audit and Implementing Immediate System Enhancements:**

The JP initiated a comprehensive IT audit to identify and address gaps in current systems, with a focus on scalability and interoperability. This effort strengthens the digital infrastructure, enabling faster implementation of digital health solutions in alignment with SDG 9.c.

- **Strengthening Cybersecurity for Rapid Scaling:**

A cybersecurity risk assessment was conducted to identify vulnerabilities and implement early protective measures, ensuring the security of health data. The JP also began developing cybersecurity training and recommendations for key stakeholders to enhance system resilience and manage increasing volumes of digital health data efficiently, contributing to SDG 16.10 and SDG 9.c.

- **Facilitating Digital Health Integration:**

Cross-sectoral collaboration was facilitated to achieve seamless data integration between health and social protection services. This initiative accelerates the digitization and accessibility of essential services, particularly for vulnerable populations, supporting SDG 1.3.

- **Developing the National Digital Health Strategy for 2025–2027:**

The JP facilitated stakeholder discussions to create the National Digital Health Strategy, aligning with government priorities to enable faster adoption of digital health solutions nationally. This Strategy provides clear, implementable actions that accelerate progress toward universal health coverage (SDG 3.8) and enhanced digital infrastructure (SDG 9.c).

- **Building Capacity and Sharing Knowledge:**

A rapid needs assessment for the E-Health Center was initiated, forming the foundation for tailored capacity-building programs. These programs aim to equip stakeholders with the skills needed for the rapid rollout of digital health tools, advancing SDG 4.4.

- **Strengthening Maternal Health through Capacity Building:**

The JP enhanced the capacity of 50 healthcare providers to implement e-maternity cards. This initiative directly contributes to improvement of maternal health outcomes (SDG 3.1), reduces inequalities, promotes gender equality, and enhances the efficiency of health systems, particularly in marginalized communities.

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2.3 In bullet points, describe what the JP has been doing to ensure achieving results at scale through: a) expanded reach to key beneficiaries and constituencies, and b) increased financial leverage.

(max. 500 words)

JP ensured achieving results through:

a) Expanding reach to key beneficiaries and constituencies, i.e.:

- The JP spearheaded efforts to update data in the **Patients Registry**, ensuring it reflects accurate and current information for all individuals, particularly **vulnerable and underserved populations**. This comprehensive initiative enhances healthcare accessibility and inclusivity by targeting individuals in remote and marginalized areas.
- A **national campaign**, concluded on **31 December 2024**, successfully updated over **400,000 patient records**, ensuring the registry's data is accurate and reliable. This significant achievement strengthens healthcare systems by improving decision-making and the delivery of essential health services.
- The maintenance of a **current and robust patient registry**, the JP facilitates **universal health coverage (SDG 3.8)**, ensuring access to **digital health services** for 7.1 million citizens of the country. Key benefits include access to **digital health profiles, online appointments, telemedicine**, and other innovative digital solutions. These advancements directly address healthcare disparities and ensure equitable service delivery at scale.

b) Increasing financial leverage:

- Accurate and updated patient data directly impacts the financing of health facilities, as funding is determined based on the number of patients served. Maintaining accurate and current patient records ensures that health facilities receive fair and appropriate funding allocations, particularly at the primary health care level.
- By keeping patient records up to date, the campaign supports health facilities in securing accurate funding, which can then be used to enhance the quality of care and services they provide.

2.4 In bullet points, outline what sustainability measures the JP has introduced for maintaining system change and transformative impact in the mid- to long-term. Include specific mechanisms for ensuring financial and institutional sustainability, as well as strategies for continued scaling by government and partners after JP completion. Do note the previous requirement that the “exit strategy” should be developed early on and mainstreamed through JP implementation.

(max. 500 words)

In the medium-term perspective:

1. Development of a Detailed Program Plan

The JP created a comprehensive and detailed program plan that clearly outlines activities, timelines, and milestones. This plan serves as a structured roadmap for the systematic implementation of initiatives, ensuring efficient coordination and progress tracking. By aligning activities with long-term sustainability goals, the program plan provides a strategic framework that guides efforts toward achieving lasting outcomes and impact.

2. Finalization of Terms of Reference (ToR) for Operational and Steering Committees

To reinforce governance and accountability, the JP finalized the ToR for its Operational and Steering Committees. The ToR clearly defines the roles, responsibilities, and processes for these committees, ensuring effective oversight and decision-making. These governance structures are critical for maintaining transparency, monitoring progress, and addressing challenges, thereby contributing to the programme's sustained success and ensuring alignment with its objectives.

In the long-term perspective:

Sustainability measures for long-term period have not yet been implemented at this stage, as they will be based on the results of the needs assessment, IT audit and cybersecurity assessment.

3. Contribution to the enabling / engine room actions

Reference the targets specified in your JP document, annex 2 ("JP contribution to Joint SDG Fund global indicators") regarding engine room actions / '[enabling actions](#)'.

3.1 Has your JP contributed to policy and regulatory shifts (e.g. development and adoption of new / revised national or sub-national policies and/or regulations)?

Yes

No

If yes, explain how these changes align with national priorities, Cooperation Framework results, and the Leaving No One Behind principle. Describe their catalytic effect on JP outcomes.

(max. 250 words)

1. The JP contributed in-kind to adoption of the regulation of the Unified Digital Health Ecosystem (Decree of the Cabinet of Ministers of the Kyrgyz Republic dated 24 October 2024 No. 640). The changes include:

- **Mandatory Integration of Digital Health Systems:** National regulations now require integration across public and private sectors.
- **Enhanced Policies:** Access to digital health services is provided by free of charge ensuring inclusive approach for underserved populations)
- **Regulatory Framework:** Aligns digital health infrastructure with national health priorities, ensuring quality, accessibility, and sustainability.
- **Inclusive Access:** UMIS healthcare services are provided free of charge, addressing underserved populations' needs.
- **Scalability and Innovation:** Facilitates sustainable digital health programs, fostering future advancements and investments.

2. Additionally, the JP contributed to the development of the "Sanarip MED 2.0" National Digital Health Strategy for 2025–2027 (Order of the Minister of Health, December 30, 2024, No. 1363). This strategy builds on prior successes, focusing on

sustainability and scaling. Its primary goal is to enhance accessibility, quality, and safety of healthcare services through advanced digital technologies. "Sanarip MED 2.0" emphasizes inclusivity, modernizing healthcare delivery, improving patient outcomes, and fostering a sustainable, technology-driven health system in Kyrgyzstan.

3.2 Has your JP contributed to developing the “deal room” / financing mix, including leveraging resources, influencing government budgets and/or broader financing flows from diverse funding sources and partners?

Yes

No

If yes, explain how these financing mixes and partnerships align with national priorities, Cooperation Framework results, and the Leaving No One Behind principle. Describe their catalytic effect on JP outcomes.

(max. 250 words)

1. The Government has increased public investments in digital health, resulting in the doubling increase of annual budget of the E-Health Centre.
2. This was Government’s commitment during the JP’s design and application preparation process and was indicated in the ProDoc.

3.3 Has your JP contributed to enhancing capacity at scale (e.g. introduction of new training modules, enhancing capacities of key institutional partners, or development of new methodologies and standard operating procedure applied at scale)?

Yes

No

If yes, explain how these capacity building efforts align with national priorities, Cooperation Framework results, and the Leaving No One Behind principle. Describe their catalytic effect on JP outcomes.

(max. 250 words)

1. Key achievements include the development of practical guidelines for using telemedicine in obstetric care, improving maternal health for women with severe conditions.
2. These guidelines standardize remote consultations, ensuring equitable access to quality care and reducing healthcare disparities.
3. Additionally, 50 medical specialists were trained to use e-health cards, enhancing their ability to track labor cases, monitor patient outcomes, and maintain digital records, contributing to data-driven decision-making and aligning with national healthcare priorities.

Planned activities:

1. **Development of Training Modules:** Design digital health training for healthcare professionals, especially in underserved areas.
2. **Enhancing Institutional Capacities:** Provide specialized training for key institutional health priorities, focusing on equitable access for all regions, healthcare workers, and patients.
3. **Development of Methodologies and SOPs:** Create new methodologies and SOPs to ensure consistency and quality in digital health implementation.
4. **Alignment with National Priorities and "Leaving No One Behind":** Align training with national digital health solutions

3.4 Has your JP contributed to development of pipeline of investment-ready projects or initiatives (e.g. development of financial instruments, solutions, and processes to identify investable projects/initiatives with partners from diverse stakeholders including public and private investors)?

Yes

No

If yes, explain how that pipeline development work aligns with national priorities, Cooperation Framework results, and the Leaving No One Behind principle. Describe their catalytic effect on JP outcomes.

(max. 250 words)

N/A

4. Constraints, risks, adjustments, and lessons

4.1 In looking over the following examples (see below), please explain where there may be any **(a) constraints, including risks identified** in the JP doc's Risk Matrix, that were **encountered in the past period** and **(b)** any adjustments that were made or mitigation actions taken by the JP team to strengthen the relevance and effectiveness of the JP and the coherence and coordination of UN system support.

(600 words; delete examples)

Contextual / Strategic

Change in Key Government Leadership: The Deputy Minister of Health responsible for Digital Development was recently reassigned, and the new appointment has not yet been made.

- **Risk Identified:** The lack of a permanent leadership role for digital health in the Ministry of Health could delay decision-making and affect the smooth implementation of digital health initiatives.
- **Action Taken:** Regular meetings with other Deputy Minister and Director of E-Health Center were held to ensure that the digital health agenda remained a priority and continued to progress.

Operational/Strategic

- **Limited Capacity for Rapid Implementation by IP:** PUNOS encountered challenges in swiftly engaging in implementation, which resulted in a slower pace of progress across project activities.
- **Delayed Funds Disbursement:** The project faced delays due to funding arriving in the middle of October, instead of the expected mid-August. This funding delay significantly hindered the timely execution of planned activities and disrupted the project's schedule.

4.2 In bullet points, please indicate what could have been done differently during this past period and any lessons learned. () - Please be candid about both successes and failures, explaining how these insights might be applied to JPs in the future.

(max 500 words)

Earlier Recruitment of Relevant Staff:

- **Lesson Learned:** Uncertainty from the receipt of funds also resulted in some delays in appointing key staff members within the PUNOs, and also subsequent delays in preparatory actions that slowed overall progress at the start. However, these issues have now been resolved.
- **Future Insight:** To ensure smoother implementation, it is essential to conservatively manage start dates and give agencies appropriate windows to receive funds and complete recruitments / appointment of relevant staff well in advance of the JP launch. This will allow for better preparation, quick initiation of activities, and uninterrupted momentum from the very beginning. PUNOs should establish clear recruitment timelines during the planning phase to avoid delays and ensure that staff are on board before the project begins.

Early Activation of Steering and Operational Committees:

- **Lesson Learned:** Better management of the receipt of funds, necessary hiring, and start / launch dates of the JP would have enabled a swifter finalization of the steering committee. Ideally, these would have been in place before the launch of the JP so

that, in addition to raising awareness, this event also generated momentum towards implementation with the appropriate infrastructure already in place.

- **Future Insight:** To enhance decision-making efficiency and build momentum for implementation, Steering and Operational Committees should be formed, and roles defined as early as possible, ideally during the planning phase. The terms of reference for the steering committee and its members need to be in place ahead of the official kick-off day of the JP, ensuring that all key stakeholders are aligned from day one. Early activation of Steering and Operational Committees will also foster accountability, streamline decision-making, and provide clear guidance throughout the project's implementation.

5. Plans for 2025 with a focus on first results

5.1 In bullet points, please provide the key elements of the JP plan for 2025, focusing on the results expected in the first 9 months and completing the first year of the overall JP implementation.

(max 800 words)

- **Activate Steering and Operational Committees:** Hold regular meetings to monitor progress, align partners, and address challenges promptly.
- **Policy and Governance:** Support the development of the implementation plan for the National Digital Health Strategy for 2025-2027, ensuring alignment with national healthcare priorities.
- **IT Audit, Needs, and Cybersecurity Assessments:** Conduct comprehensive assessments to identify gaps in infrastructure, data security, and system functionality to inform future improvements.
- **Digital Solutions Implementation:**
 - Integrate vaccination records with Electronic Health Records (EHR).
 - Expand Telemedicine services to reach more remote and underserved areas.
 - Modernize the laboratory information system and integrate it with key private laboratories.
 - Develop an ERP system for disability assessments.
 - Digitize sick leave certification within the private health sector.
 - Enhance the Digital Health Profile by adding new features such as online assignment to Primary Healthcare (PHC), a text-based emergency medical call system for people with hearing impairments, and a Request for Home Visit option.
- **Telemedicine Protocols and Capacity Building:** Complete the review and digitalization of clinical protocols for Telemedicine consultations by Q1, 2025. Following this, conduct capacity building for 200 family doctors on utilizing Telemedicine for providing quality care to sick children in selected districts.

5.2 Describe your 2025 plans for JP coordination and monitoring mechanisms to ensure efficient, rapid, and agile implementation. Include coordination among PUNOs, government, EU, and other partners. Outline how you will monitor external conditions to identify emerging risks and opportunities.

(max 250 words)

1. Operational and Steering Committees Activation to ensure efficient, rapid, and agile implementation of the Joint Program (JP) in 2025:

- Convene regular meetings for both committees to ensure strategic alignment, resolve challenges, and provide overall guidance.
- Define clear roles and responsibilities for committee members, ensuring accountability and transparency.

2. Coordination Among PUNOs:

- Establish a structured schedule for coordination meetings to streamline activities across UN agencies, ensuring alignment with the JP workplan.
- Share progress updates, challenges, and opportunities through monthly operational reviews.

3. EU and Partner Engagement:

The EU will be regularly updated on JP progress. The JPs will also explore co-funding or technical collaboration opportunities for scaling digital health initiatives.

- Regularly update the EU and other partners on JP progress through Development Partners Coordination Council, including through health sector group.
- Explore co-funding or technical collaboration opportunities for scaling digital health initiatives.

B. Indicator-based Performance Assessment

6. The JP results framework and workplan (Excel)

Please assess the JP performance against the indicators identified in Annex 1: Integrated results framework and workplan, including 1) JP outputs, 2) JP contribution to Joint SDG Fund global indicators, and 3) JP workplan.

If the JP has a localization marker 3, please also include the progress against the localization indicators.

Please upload the completed excel file together with the narrative report via the online form.

7. Leaving No One Behind

7.1 Beneficiaries are individuals, groups or organizations who actively participate in JP activities and benefit from its interventions. Please, indicate the numbers of beneficiaries in the past period, while disaggregating between a) direct and indirect, b) achieved in 2024 and anticipated for 2025, and c) Women/girls and Children/Youth - as per the table below.

	Total Number	Number of Women and Girls*	Number of Children and Youth (0-24)*

Directly benefited in 2024		<i>Since the e-card for maternity and newborns was implemented in October, there have not yet been enough beneficiaries to report accurate figures. The project is still in its early stages, and more data will be available as it reaches a larger population.</i>	
Indirectly benefited in 2024			
Expected to directly benefit in 2025	50 000	25 000	10 000
Expected to indirectly benefit in 2025	100 000	50 000	20 000

* Note that it is allowed to have overlaps in the reporting of women/girls and children/youth columns.

7.2 In bullet points, please provide a summary of how the JP is benefiting the marginalized and vulnerable groups identified in the ProDoc. Include results to which you have contributed at both institutional/policy and local/human levels. Please find the 20 standard LNOB groups in footnote 28 on page 17 of the UNSDG Output Indicator Framework's [Implementation Guide](#).

(max 250 words)

- **Unified Digital Health Ecosystem Regulation:** Adoption of the regulation (Decree No. 640, 24 October 2024) institutionalized a framework for equitable access to digital health services, prioritizing vulnerable groups like women, children, and persons with disabilities.
- **National Digital Health Strategy (2025-2027):** Integrates specific goals to address digital health needs, ensuring the sustainability of information systems and prioritizing data privacy and security.
- **Data Privacy and Security:** Strengthens mechanisms to protect sensitive health data, ensuring patient confidentiality and compliance with international standards.
- **Inclusivity Focus:** Targets vulnerable groups, including women, children, and persons with disabilities, to ensure equitable access to digital health services.

7.3 For each question, select the relevant response on cross-cutting issues and LNOB principles, and provide a brief 1-2 sentence explanation directly in the table.

Question	Yes	No	Explanation / Comments
<p>The JP has adequately implemented environmental and social standards/safeguards to avoid and address adverse impacts on people and the planet.</p>	X		<p>The JP has successfully implemented environmental standards to mitigate potential adverse impacts on both people and the environment by introducing e-health cards linked with the Tunduk centralized digital system, eliminating the need for paper-based medical history records and reducing air pollution. This approach integrates environmental considerations into the digitalization of health systems, promoting sustainability and accessibility. The digital solutions are designed to be interoperable with the Tunduk system, ensuring seamless integration and user-friendly access for healthcare providers and patients. By prioritizing environmental safeguards and a unified approach across Kyrgyzstan, the project enhances health outcomes while minimizing negative effects on people.</p>
<p>The JP has developed or operationalized a strategy to address human rights issues, undertaking and drawing upon relevant human rights analysis.</p>	X		<p>The JP supported the development of regulations that promote the right to digital health services, free-of-charge access, and data security for all citizens.</p>

<p>The JP has developed or operationalized a strategy to address structural inequalities facing women and girls.</p>	<p>x</p>		<p>The e-maternity card project supports the LNOB principle by ensuring equal access to essential maternal healthcare for all women, including those from marginalized or rural areas. By digitizing maternal health records, it promotes universal access and addresses healthcare inequalities. The project integrates e-maternity cards into national health systems, enabling continuous monitoring and better care coordination, especially for women in remote areas. This approach reduces barriers to maternal health access and addresses disparities in underserved communities.</p>
<p>The JP has demonstrated positive results / effects for youth in accordance with the principles in Youth 2030.</p>		<p>X</p>	<p>The JP on health digitalization has not yet shown significant youth engagement in 2024. However, it will focus on improving youth access to digital health services in the coming years, prioritizing youth-friendly solutions. The goal is to ensure digital health tools are accessible, inclusive, and empower young people to make informed health decisions, enhancing their well-being and future health outcomes.</p>
<p>The JP has developed or operationalized a strategy to address structural inequalities facing marginalized and vulnerable persons in any other</p>	<p>X</p>		<p>The JP focused on reducing the digital</p>

LNOB groups. Please specify which groups: <hr/>			divide by expanding telemedicine services and enhancing digital health infrastructure in remote and underserved areas, prioritizing vulnerable groups such as women, children, persons with disabilities, and rural populations.
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7.4 Please select which digital cross-cutting drivers the joint programme has contributed to since its start. Please refer to these whenever applicable in the body of the report.

You can consult the description of each cross-cutting driver in the description of the funding round [here](#).

- Digital public goods**
- Digital inclusion in underserved areas**
- Digital capacity-building and digital skills**
- Digital human rights**

7.5 Please select the window offerings the joint programme has contributed to since its start. Please refer to these whenever applicable in the body of the report.

You can consult the description of each window offering in the description of the funding round [here](#).

- Government service systems transformation**
- Inclusive digital connectivity**
- Digital finance and payment systems**
- E-commerce, market access, and trade enablement**
- Digital for the planet**

8. Additional financial resources mobilized/leveraged through growing partnerships.

Please indicate the additional financial resources (in USD) mobilized or leveraged in 2024 through the JP. The source of funding/financing should be categorized by sources, including public-private partnerships, private sector investments, Government contributions, and financial commitments from IFIs, DFIs and other donors, if any. Please clarify the actual amounts already mobilized/leveraged or the potential amounts expected to be mobilized/leveraged.

UNFPA for WHO cons-t-n The JP has not yet mobilized additional financial resources in USD but plans to leverage funds in 2025. This will include exploring public-private partnerships, private sector investments, and financial commitments from Development Partners (DPs), and other donors. Efforts will focus on maximizing the financial support required to ensure the successful implementation and expansion of the project. These collaborations will aim to enhance sustainability and drive progress toward the program's goals. The mobilization of additional

resources will be critical to scaling up initiatives and addressing emerging needs in the coming years based on the revised health Strategy 2030.

Source of Funding/Financing	Amount in US\$ (mobilized/planned)
N/A	\$
	\$
	\$

C. Strategic Communications and Partnership Update

9. Strategic communications

Please provide the information of the event(s) held or planned, and links to written articles and social media posts produced by the JP per the Joint SDG Fund's [Communications Guideline for High Impact Track Joint Programmes](#).

Event Title	Launch event of the joint UN and Government of the Kyrgyz Republic programme “ Bridging the Digital Health Divide ”
Date	2 October, 2024
Location	Hotel Novotel, Bishkek, Kyrgyzstan
Participants (Mention if Donor Member States , Government representatives were present)	MPs (head of social committee and had of SDG Task Force), Representatives of Ministry of Health, Ministry of Digital Development, Ministry of Education, UN agencies (UN RCO, WHO, UNDP, UNICEF, UNFPA), EU Delegation
Objective/Outcome (Briefly describe the key objective or outcome of the event)	<ul style="list-style-type: none"> - The launch of the Joint Programme brought together key partners and donors with a focus on the country and expertise in digital health. - During UN agencies presented key outputs of JP with deliverables and integration approach with governmental initiative Sanarip.MED - During the event, representatives from the Ministries of Health, Social Protection, and Digital Development delivered presentations and remarks highlighting recent advancements in digital health. - The event was attended by local media outlets and generated several news articles.
Quotes (Format: Name, Last Name, Title, Organization, Quote:” “) – especially from donors, government or UN representatives.	Bakyt Dzhangaziev, Deputy Minister, Minister of Health “ <i>This digital health initiative is a major step forward for Kyrgyzstan. By improving access to critical health information,</i>

	<p><i>we can make healthcare more effective and improve outcomes to ensure LNOB.”</i></p> <p>Marilyn Josefson, Ambassador of the European Union to the Kyrgyz Republic <i>“In partnership with the Government of Kyrgyzstan and the respective EU Member States such as Spain, Sweden, and the UN organisations, we will support development of digital services based on peoples’ needs, efficiently addressing risks of their digital exclusion and turning digital access challenges into opportunities for the country’s potential.”</i></p> <p>Antje Grawe, UN Resident Coordinator in the Kyrgyz Republic <i>“Digital technologies are transforming our world, unlocking immense opportunities for societies and the planet. The Global Digital Compact, adopted by world leaders at the Summit of the Future last week, is a commitment to bridge the digital divide, advance the Sustainable Development Goals and ensure that no one is left behind. In support of this global vision, the United Nations in Kyrgyzstan is launching this Joint Programme to boost access to health services through digital tools, with a focus on vulnerable groups, children and rural areas across the Kyrgyz Republic.”</i></p> <p>Dr. Liviu Vedrasco, WHO Representative to Kyrgyzstan <i>“The launch of this Joint Programme is a pivotal moment for healthcare in Kyrgyzstan. By enhancing digital connectivity, we are empowering communities, improving access to health services, and driving sustainable development. With the support of our partners from other UN agencies and Kyrgyz Government, we are fostering innovation and long-term growth in the health sector.”</i></p>
<p>Additional materials and links on event coverage</p>	

List of links to written articles and social media posts:

<https://kyrgyzstan.un.org/en/280325-united-nations-launches-joint-digital-health-programme-kyrgyzstan>
<https://www.who.int/kyrgyzstan/news/item/08-10-2024-new-eu-funded-project-launched-to-strengthen-digital-health-in-kyrgyzstan>
<https://www.unicef.org/kyrgyzstan/press-releases/SDG-digital-health-project-launch>
<https://med.kg/pressCenter/news/6fe0696d-c6de-4b36-9f76-89f999d51b93>
<https://med.kg/pressCenter/news/6fe0696d-c6de-4b36-9f76-89f999d51b93?locale=kg>
https://kaktus.media/doc/510419_kak_cifrovizaciia_mojet_podniat_yroven_mediciny_trehle_tniaia_programma_oon.html
https://youtu.be/PYKlax2Xtl?si=2pXR_SNDJrYH8vmo
https://youtu.be/sQWLnoS5caM?si=XREHwfp_TLuGbKz
https://24.kg/obschestvo/306882_zapuschena_programma_tsifrovogo_zdravoohraneniya_o_bschey_stoimostyu_4milliona/
<https://www.super.kg/kabar/news/452671>
https://www.vb.kg/doc/439895_kyrgyzstan_zapyskaet_programmy_cifrovogo_zdravoohrane_niia_s_oon_i_es.html
<https://kabar.kg/news/oon-zapustila-programmu-tcifrovogo-zdravookhraneniia-v-kyrgyzstane/>
<https://kg.kabar.kg/news/kyrgyzstanda-salamattyk-saktoonuzhakshyrtuuga-bagyttalghan-programma-ishke-kirdi/>
<https://maralfm.kg/archives/665293>
<http://kyrtag.kg/ru/news/oon-zapustila-programmu-tsifrovogo-zdravookhraneniya-v-kyrgyzstane->
<https://vesti.kg/obshchestvo/item/130216-minzdrav-kr-i-oon-zapuskayut-sovmestnuyu-programmu-tsifrovogo-zdravookhraneniya.html>
- <https://knews.kg/2024/10/02/v-kyrgyzstane-zapustili-programmu-tsifrovogo-zdravoohraneniya/>
<http://asiatv.kg/2024/10/02/oon-zapustila-programmu-czifrovogo-zdravoohraneniya-v-kyrgyzstane/>
<https://kyrgyzmedia.kg/buu-kyrgyzstanda-sanariptik-salamattykty-saktoo-programmasyn-ishke-kirgizdi/>

10. Strategic Partnerships

10.1 What type of partnerships has your JP established or is in the process of establishing? (Select all that apply);

- National Government Institutions (Please specify): Ministry of Health of the Kyrgyz Republic (E-Health Centre, Health Development Centre, National Department for Disease Prevention), Ministry of Digital Development, State Agency for Personal Data Protection, Ministry of Labor and Social Security, National Statistic Committee.
- Sub-national Government Institutions (Please specify):
- International Financial Institutions & Development Finance Institutions (Please specify):
- Private Sector Companies or Industry Associations (Please specify):
- Civil Society Organizations, Philanthropic Organizations and Foundations (Please specify):
- Academic/Research Institutions (Please specify):
- Bilateral Development Partners (Please specify):

Labour Unions or Organizations (Please specify):

Others (Please specify):

10.2 Outline key partnerships and their expected concrete contributions to JP outcomes in 2025 (excluding EU engagements, which are addressed separately). Include any formal partnership arrangements such as Memoranda of Understanding or similar agreements.

(max 600 words)

To be inputted by all PUNOs

1. **The Ministry of Health** serves as the high-level body shaping the direction of digital transformation in healthcare, ensuring the project's integration into national strategies and plans. This includes policy development, standardization, and regulatory support.
 - **E-Health Center** implements and supports digital healthcare solutions, ensuring their integration, data security, technical support, information analysis, and staff training. It serves as a key driver in modernizing the healthcare system, enhancing its efficiency, and fostering innovation.
 - **The Health Development Centre** plays a pivotal role in the implementation of telemedicine, acting as a key driver of its development and integration into the healthcare system.
 - **The National Department for Disease Prevention** plays a key role by integrating surveillance data into digital systems, coordinating digital tools for disease prevention.
2. **The Ministry of Digital Development** ensures the digital infrastructure, interoperability, cybersecurity, and policy framework necessary for integrating and scaling digital health solutions. It drives innovation and supports capacity building to enable healthcare modernization.
3. **The Ministry of Labor and Social Security** will support the JP by integrating disability assessment processes into digital platforms and provide high-level directions.
4. **The State Agency for Personal Data Protection** ensures data privacy and security by enforcing regulations, monitoring compliance, addressing breaches, and building capacity for secure health data management.

10.3 Describe the engagements with EU during JP design, launch, and initial implementation in 2024. Describe plans to enhance EU involvement in 2025 and identify potential opportunities to leverage additional EU partnerships and investments.

(max 400 words)

1. The EU Delegation to the Kyrgyz Republic, alongside the Presidential Administration, was invited into the selection panel during the call for concept notes among all members of the UNCT. Thus, it contributed to selection of the finalist and further development of the full proposal and the design along with the launch of the JP in October 2024.
2. **Steering Committee Involvement:** Consider the EU as regular observers of the Steering Committee to jointly review ongoing activities and challenges.
3. **Cybersecurity and Data Privacy:** Plan to collaborate with the Training Center under the State Agency for Personal Data Protection (Cabinet of Ministers) to strengthen

local capacity and align with international data protection standards, established through Kyrgyzstan-EU cooperation.

4. **Pilot Project:** Involve the EU in field visits to attract further EU investment and matching funds.
5. **Study Tours:** Organize study tours to EU member states with mature digital health ecosystems, allowing key national stakeholders to learn from European experiences.
6. **Regular Coordination:** Establish semi-annual coordination meetings with the EU to ensure timely sharing of implementation data, financial reporting, and policy updates.
7. **Lessons Learned:** Use insights from previous EU-funded projects to inform current implementation.
8. **Communication and Visibility:** Advocate for the inclusion of JP activities in EU projects to harmonize efforts, ensure synergy, and enhance EU visibility in all communication products.

ANNEX: Localization Marker Survey

Note: relevant only for the JPs with localization marker 3

A. Did you upload the SDG Localization monitoring indicators as part of your JP results framework?

Yes

No

B. What action areas has your JP prioritized since launch to advance the SDGs at the local level? (Select all that apply)

Empowering local authorities and communities (e.g. capacity building, leadership development, technical support)

Facilitating multi-stakeholder engagement (e.g. participatory planning processes, community consultations)

Strengthening multi-level governance (e.g. vertical coordination, central-local policy alignment)

Localizing SDG financing (e.g. municipal finance mechanisms, local resource mobilization, local SDG budgeting)

Enhancing local data systems (e.g. disaggregated data collection, community-based monitoring)

Expanding social service access (e.g. last-mile delivery, integrated service provision)

Others (please specify): _____

C. To what extent have financial resources been transferred or mobilized directly to local-level actors (e.g. local governments, local community organizations, local service providers) to support SDG Localization efforts in the reporting period?

0% i.e. no resource has been directed to local-level actors.

X 1-24% of total programme funding directed to local-level actors.

- 25-49% of total programme funding directed to local-level actors.
- 50-74% of total programme funding directed to local-level actors.
- 75-100% of total programme funding directed to local-level actors.

D. Please describe how your JP engages with sub-national (local and regional) authorities, communities, and/or local service providers to advance SDG Localization, including approaches to enhance local capacities, align policies with local contexts, and ensure sustainable financing mechanisms.

Please provide your response in the box below to upload in Q15 of MS Form, or directly enter your response in Q22 of MS Form.

(max 250 words)

The e-maternity card project ensures equal access to essential maternal healthcare for all women, including those from marginalized or rural areas. By digitizing maternal health records, it promotes universal access and addresses healthcare inequalities. The project integrates e-maternity cards into national health systems, enabling continuous monitoring and better care coordination, especially for women in remote areas. This approach reduces barriers to maternal health access and addresses disparities in underserved communities.