

Supporting community action on HIV/AIDS

Annual Report



Dear Readers,

The year 2010 has symbolic significance for Alliance since we are summarizing not only our work for the year but for the entire decade. Our activities in Ukraine started on December 1, 2000, the day when the official launch of Alliance's work in Ukraine within the EU-US Transatlantic Initiative was declared at the press conference held by the Ambassador of the USA, Ambassador of the European Commission and the Minister of Health of Ukraine.

Looking back over these years, I am proud to acknowledge the fact that we managed to turn a temporary project into a full-scale organization with its clearly defined mission and strategy, strong leaders and an efficient management team. Today Alliance is the biggest HIV/AIDS non-governmental organization in Ukraine, with a well-earned reputation and confirmed results that have contributed to the national epidemic response. The recent year's results are most convincing.



2010 became a year of achievements. Ukraine was recognized internationally for the first time as a success story. Prevention activities among injecting drug users were acknowledged for demonstrating a sustainable and positive effect on the HIV/AIDS epidemic in Ukraine. Summing-up the year, Alliance exceeded its obligations before the state, in achieving the National HIV/AIDS Program indicators, and also before its key donors: USAID and the Global Fund.

On the other hand, 2010 has brought new challenges. We will remember this year for the outbreak when law enforcement authorities intruded on substitution maintenance programs for drug dependent people, and also for the long-term police detention of a drug treatment doctor for performing his professional duties. Throughout the year, Alliance made all-out daily efforts to stop these violations.

We are expanding our plans for next year in the area of HIV/AIDS and are also setting new objectives to respond to the tuberculosis and hepatitis epidemics.

I am expressing my sincere thanks to the friendly and professional Team of Alliance. You can trust us.

Best wishes of good health and inspiration,

Andriy Klepikov Executive Director

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1. Key Achievements of ICF "International HIV/AIDS Alliance in Ukraine" in 2010

1.1 Key Achievements in 2010

The year 2010 was a year of achievements for Alliance Ukraine. Summarizing another year of work, we can underscore a number of key successes in the response to the HIV/AIDS epidemic in Ukraine.

1) International Recognition of the Impact of Prevention Programs on the Epidemic among IDUs in Ukraine

Ukraine's achievements in HIV/AIDS prevention and the impact on the epidemic through the Global Fund-supported program were recognized on the international level: in particular, in the UNAIDS Report on the Global AIDS Epidemic 2010 and in the most respected scientific and health media, such as The Science, The Lancet, The British Medical Journal, The Guardian, and others.

The UNAIDS Report emphasizes the link between the reduction of HIV spreading and the coverage of vulnerable groups with prevention programs. On the background of the growing number of injecting drug users (in particular, IDUs aged 15–24 years), who became clients of harm reduction programs, the HIV prevalence rate was decreasing in all age groups (Diagram 1).

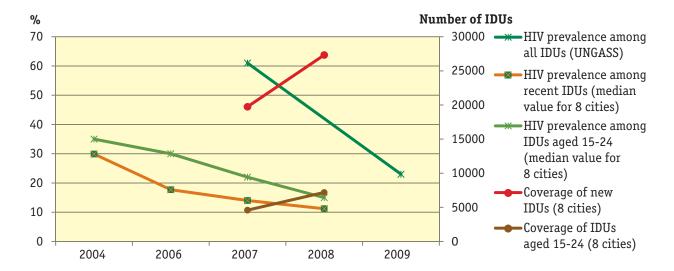


Diagram 1. Links between harm reduction programs and HIV prevalence rate in Ukraine, 2004–2009. Sources: UNAIDS Report on the Global AIDS Epodemie, 2010, p.71, M. Mahy and others (2010)

One of the most respected and long-standing medical journals in the world — The Lancet — published an article about HIV/AIDS prevention and harm reduction programs in Ukraine that were implemented with Global Fund support. "Ukraine has the highest prevalence of HIV in Europe, but an emphasis on harm reduction in the two main risk groups — drug users and commercial sex workers — is bearing fruit", Peter Hayward reported in his article. (First Reduce Harm: Tackling HIV in Ukraine, The Lancet, October 16, 2010).

Alliance Ukraine is also proud that the successes of civil society organizations implementing the Global Fund-supported program in the regions in cooperation with Alliance, were conferred with the most significant international prizes and awards in the area of HIV/AIDS response: the Red Ribbon (Mykolayiv Oblast Civil Youth Movement "Penitentiary Initiative" and Donetsk Charity Organization Club "Svitanok") and the Crystal of Hope (Odesa Charitable Foundation "The Way Home").

2) Improvement of the Epidemic Situation among IDUs

The trend towards improving the epidemic situation among IDUs, which became apparent in previous years, is strengthening. Epidemiological data for 2010 indicate that the number of newly registered HIV cases among IDUs remained stable and even had a declining trend. Significant achievements in the introduction of a large-scale prevention program are reflected in the indicators that state the reduction in new HIV cases among young IDUs, as well as among those who started using drugs only recently. These very changes are the most expected ones, as they indicate decreasing HIV incidence among IDUs. It can be stated with confidence that the number of new HIV infections among IDUs aged 15–24 years has been decreasing every year, starting in 2006 (Diagram 2). This trend is also confirmed by sero-epidemiological monitoring and sentinel surveillance data; it is a great achievement including the outcome of activities of around 100 organizations that work in reducing harm among drug users.

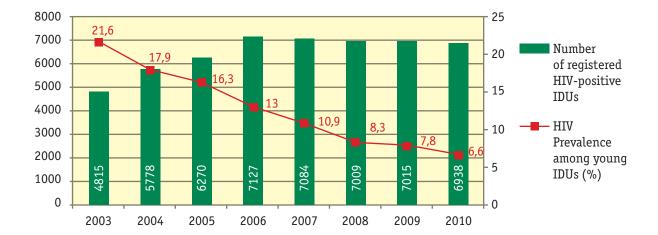


Diagram 2. Absolute number of HIV+ IDUs and share of IDUs aged 15-24 years in Ukraine, by year

Alliance Ukraine together with its partners from non-governmental and governmental sectors is proud that through their joint efforts they managed to stabilize the epidemic situation in the most hard-to-reach and numerous risk groups.

3) Improvement of the Quality of Implementation of Prevention Programs among Most Vulnerable Populations: Innovative Approaches

In 2010, Alliance Ukraine continued implementing a powerful and multifaceted prevention program among populations most vulnerable to HIV, including injecting drug users (IDUs), commercial sex workers (CSWs), men who have sex with men (MSM), prisoners, and street children.

Support was provided to 4 national projects of civil society organizations (GAY-ALLIANCE Ukraine, Association of Substitution Treatment Advocates of Ukraine, ACO "Tochka Opory", CO "All-Ukrainian League "Legalife") that will contribute to the development of organizational capacity of the initiative groups and organizations that represent the IDU community, IDUs-participants of the SMT programs, CSWs and MSM.

In 2010, Alliance Ukraine, with technical support from WHO and upon approval of the Ministry of Health of Ukraine implemented a pilot project aimed at Hepatitis B vaccination as a component of a comprehensive package of HIV prevention services among vulnerable populations (IDUs and MSM). 695 representatives of the most-at-risk populations were vaccinated within this project; an efficient model for cooperation between NGOs and health care facilities was developed and the scaling-up of these activities in other harm reduction projects was planned.

Pharmacy-based prevention activities aimed at IDUs continue developing. If in the beginning of 2010 this project involved 111 pharmacies, at the end of the year 123 pharmacies in cooperation with 25 NGOs were providing services to clients of harm reduction (HR) projects in 13 regions of Ukraine. Syringe exchange was established in 37 pharmacies in 7 regions. Thanks to these activities in the pharmacies, more than 9.4% of new clients from the total number of new clients of prevention programs were involved in harm reduction programs during the year.

Starting in 2010, overdose prevention services were provided by all projects working with IDUs. Also, first aid provision in cases of opiate overdose were introduced through the dissemination of Naloxone.

Within the first two quarters of the project year, 509 ampoules of Naloxone were distributed by 57 NGOs. Data on the prevalence of overdose cases among clients of the harm reduction projects were collected for the first time.

Wide-scale implementation of HIV prevention projects among stimulant users, who were earlier considered to be a more closed group compared to opiate users, was started in 2010.

Within the SUNRISE project, gender-sensitive approaches to HIV prevention were introduced which allowed increasing the number of female IDU clients in the harm reduction projects.

A study of the secondary syringe exchange models (among IDUs) was carried out for the first time. This study helped elaborate further steps in implementing this type of activity in HR projects.

HIV prevention project among female sex workers based on the PDI model was adapted and piloted in 2010.

In order to expand the comprehensive package of prevention services for CSWs, female condoms were introduced as an additional barrier contraception and HIV/STIs prevention method at 20 non-governmental organizations that provide prevention services.

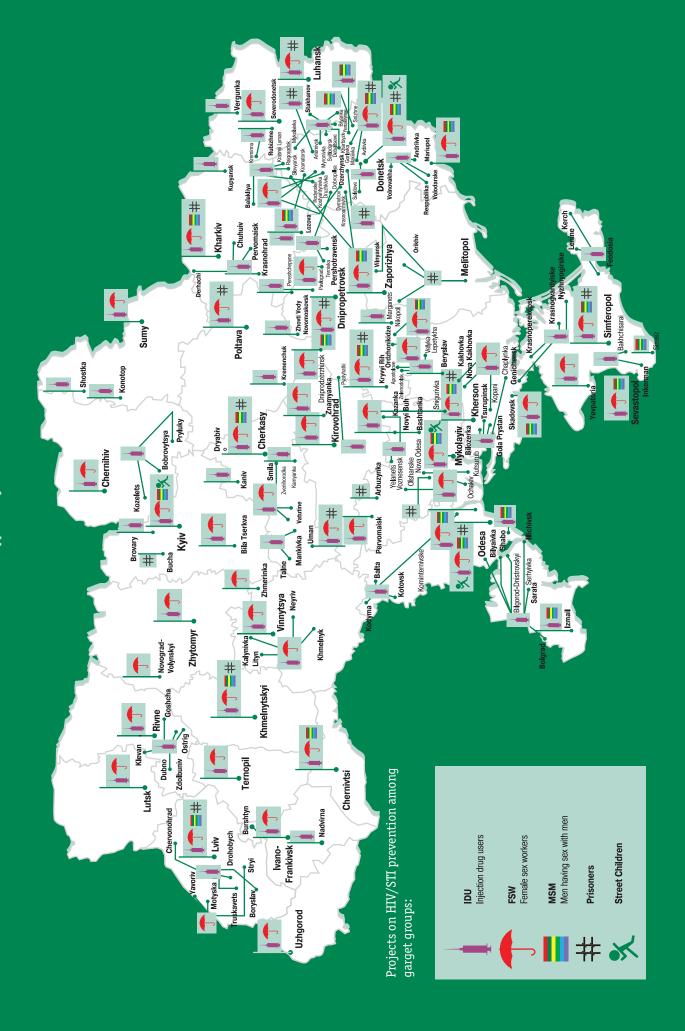
In addition, in 2010, ICF "International HIV/AIDS Alliance in Ukraine" started implementing the Anti-Violence Program in cooperation with NGOs that provide services to CSWs.

The component on improving the quality of counseling and referral activities was initiated with the participation of social workers and psychologists who work in regional NGOs.

A distance learning course was developed to educate social workers.

Key Achievements of Alliance Ukraine in 2010

- Thanks to the programs implemented by Alliance Ukraine, 6,025 people with opioid dependence are receiving substitution maintenance therapy at 125 health care facilities in 27 regions of the country.
- Grants to perform prevention activities in HIV/AIDS were provided to 156 implementing organizations.
- The efficient and transparent system of procurement and supply of health care products introduced by Alliance Ukraine is operating at the highest level of European standards. In 2010, a total of 254 health care
- facilities and 156 civil society organizations received medical supplies and health care products.
- The range of HIV prevention services was significantly expanded. In 2010, prevention services were provided to 170,081 injecting drug users, 26,452 commercial sex workers, 18,203 men who have sex with men, and 32,341 prison inmates.
- A single national system for monitoring and evaluating epidemic response activities is being developed.



4) Implementation of Objectives based on Indicators

All activity indicators, including 10 key Global Fund indicators, were surpassed as of December 31, 2010. Diagram 3 illustrates the progress of coverage indicators.

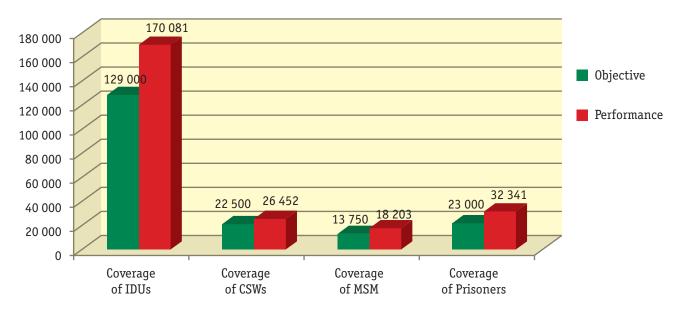


Diagram 3. Activity indicators on coverage of target groups' representatives as of December 31, 2010

The cumulative number of VCT for HIV amounted to 318,507 (131.1% of target), the number of STI screening tests was 315,249 (144.9% of target). During this period 110,091 visits to mobile clinics were made (256.1% of target) and 52,427,031 condoms were distributed.

5) Recognition of Alliance Activities in Ukraine

Having summed up the results of activities in 2010, the Kyiv Post newspaper nominated Alliance Ukraine for the Best of Kyiv Award 2010 in the "The Best Impact (by Non-Profit Organization)" category, in which Alliance Ukraine placed second according to online voting results. Whereas the first position was taken by the Pinchuk Foundation, the area of work of which is broader and includes democracy development, art, educational projects, etc. It was not just the recognition of Alliance's efforts in response to the HIV/AIDS epidemic, but also of its joint work with partner organizations to fight the epidemic, and another opportunity to emphasize the social significance of this problem.

6) Prospects for Further Activities

The year 2010 was also remarkable for achievements in resource mobilization that created a foundation for epidemic response in the coming 5 years. Alliance Ukraine, being an integral part of the strategic partnership, received a Global Fund grant in the amount of US\$ 305,000,000 within Round 10 for the HIV component. Also, the country's appeal was upheld and the Round 9 grant for TB epidemic response was approved — and so, Ukraine for the first time received support from the Global Fund in the amount of US\$ 95,000,000 to fight this epidemic.

1.2. 10th Anniversary of Alliance Ukraine



This was the tenth anniversary year of Alliance Ukraine's activities, which it celebrated on December 1. Having started its work with a small technical support project, Alliance Ukraine has gradually transformed into a leading HIV/AIDS response organization. This success would have not been possible without the fruitful partnership with Ukrainian and international organizations. Alliance Ukraine has proved that it is a true alliance of people and organizations united around one common goal. And those 10 years of work have brought the following significant results:

- 356 organizations received grants from Alliance Ukraine;
- more than 800 organizations received health care products and medicines;
- some 15,000 social and healthcare workers, NGO employees, counselors and volunteers took part in implementing HIV/AIDS response programs;
- 54,910 patients who received ART, PMTCT services were treated for sexually transmitted infections and drug dependence;
- more than 500,000 clients from different target groups were covered with prevention services;
- over 13,000 teachers trained within the program "School against AIDS", and around 3 million students received basic prevention information;

The success of these long-lasting activities was possible thanks to the long-term strategic partnership with the All-Ukrainian Network of PLWH and fruitful partnership with:

- representatives of the government sector, in particular the Committee on Counteracting HIV/AIDS, Ukrainian AIDS Center, Ministry of Family, Youth and Sports, Ministry of Health, Ministry of Education and Science, and State Department of Ukraine for Enforcement of Sentences;
- numerous Ukrainian and international organizations;
- donors of Alliance, in particular, the Global Fund, USAID, Open Society Institute and International Renaissance Foundation, Levi Strauss Foundation as well as UN agencies;
- all members of the Global Alliance family.

The key output of these 10 years of work is, perhaps, the fact that Ukraine has become one of the few countries in the world where civil society is playing a key role in the national response to the HIV/AIDS epidemic. We are entering a new decade with ambitious plans — to stop the HIV/AIDS and tuberculosis epidemics in Ukraine!





2. Strategic Priorities of Alliance Ukraine in 2010

The international charitable fund "International HIV/AIDS Alliance in Ukraine" is a leading professional organization and a national leader in HIV/AIDS epidemic response in Ukraine, as well as an independent organization within the International HIV/AIDS Alliance, which is a global partnership of over 30 organizations from different countries.

The **mission** of Alliance Ukraine is to reduce the spread of HIV infection and AIDS mortality, and to alleviate the negative impact of the epidemic through supporting community action against HIV/AIDS in Ukraine and disseminating effective approaches to HIV prevention and treatment throughout Eastern Europe and Central Asia.

Key **Strategic Directions** of Alliance Ukraine activities include:

- Ensuring communities have ample access to comprehensive needs-based high quality services sufficient to make an impact on the epidemic. This will result in behavior changes that can reduce the risks of HIV-infection among the most vulnerable communities and improve the quality of life of HIV-positive people.
- Promoting sustainable responses to the epidemic at the local, national and regional levels by advocating for evidence-based policies, building the capacity of HIV servicing, communitybased and other relevant local organizations, and leveraging adequate financial resources.

These two strategic directions are being implemented through **five strategic objectives** of Alliance Ukraine:

- 1. To ensure scaled-up access for key most-at-risk populations to a comprehensive continuum of client-oriented HIV/AIDS prevention, care and support services.
- 2. To actively involve and build the capacity of communities vulnerable to HIV/AIDS and civil society organizations in order to create opportunities for service provision and protect their interests by rendering technical support and resources.
- **3.** To develop and promote comprehensive, efficient, high-quality and evidence-based programs, models and mechanisms in response to the concentrated HIV/AIDS epidemic.
- **4.** To ensure sustainable service provision through the development of cooperation between communities and government services at the local and national levels through advocacy and policy initiatives.
- **5.** National leadership in response to HIV/AIDS epidemic, in particular, to build the institutional, technical and financial capacity of Alliance Ukraine as the national non-governmental leader in the HIV/AIDS epidemic response.



3. Key Programs Implemented by Alliance Ukraine in 2010

3.1. Programs Financed by the Global Fund to Fight AIDS, Tuberculosis and Malaria

The program "Support for HIV and AIDS Prevention, Treatment and Care for Most Vulnerable Populations in Ukraine"

The program "Support for HIV and AIDS Prevention, Treatment and Care for Most Vulnerable Populations in Ukraine" is funded by the Global Fund to Fight AIDS, Tuberculosis and Malaria within its Round 6 grant. It has two principal recipients — ICF "International HIV/AIDS Alliance in Ukraine" and All-Ukrainian NGO "All-Ukrainian Network of People Living with HIV". Program implementation period is August 2007 through July 2012.

The overall program goal is to reduce the number of HIV transmission cases and the rates of HIV-related morbidity and mortality in Ukraine through the implementation of interventions focused on the most vulnerable populations. The program has a direct targeted objective to scale-up access to prevention, treatment, care and support for people who are most vulnerable to HIV/AIDS and most affected by the epidemic, primarily injecting drug users (IDUs), men who have sex with men (MSM), commercial sex workers (CSWs), prisoners, street children aged 10–18 years, and people living with HIV/AIDS (PLWHA).

The program has five key objectives:

- To ensure adequate access to integrated prevention, treatment, care and support services for the most vulnerable populations (Alliance Ukraine is the key implementation organization).
- To scale-up comprehensive care and treatment services for PLWHA and to ensure equal access for injecting drug users and representatives of other vulnerable populations (implementing organizations — Alliance Ukraine and Network).
- To scale-up access to comprehensive counseling services in order to develop adherence, provide psychological and social support and care for PLWHA (key implementing organization — Network).
- To create favorable conditions for long-term and an efficient response to the HIV/AIDS epidemic in Ukraine (implementing organizations Alliance Ukraine and Network).
- To implement monitoring and evaluation (M&E) of program performance, and to strengthen the National Monitoring and Evaluation System (implementing organizations Alliance Ukraine and Network).



Key Outcomes of Program Implementation in 2010

In 2010, Alliance was implementing planned activities in their second stage that were started in August 2009. The Program was implemented in all regions of Ukraine within national and regional projects that are currently being implemented by 156 sub-grantees. During the year, 220 heath care facilities (AIDS Centers, drug treatment clinics, STI clinics, TB clinics and other facilities), 123 civil society organizations, 123 pharmacies, 90 shelters for women and children, 24 centers for psychosocial rehabilitation of children, 21 city or district centers of social services for families, children and youth were involved in Program implementation.

In 2010, HIV prevention projects within the Program reached 170,081 IDUs (58.6% of their estimated number); 26,452 CSWs (37.8% of their estimated number); 18,203 MSM (18.9% of their estimated number); 32,341 prisoners and 1,725 street children.

In the end of 2010, a planned audit of the Global Fund principal recipients in Ukraine was conducted by the employees of the Office of Inspector General, while members of the Global Fund Board and Secretariat visited the projects implemented the in Kyiv region with Global Fund support. Participants from Japan, Mexico, the Netherlands, Switzerland and the United States witnessed the efficacy of Program implementation in Ukraine.

Other Programs Financed by the Global Fund

Round 9 Program

In 2010, for the first time ever, Ukraine received a five-year Global Fund grant to respond to the spread of tuberculosis in Ukraine in the amount of around US\$ 100,000,000 within the **Round 9** Program "Let us Stop Tuberculosis in Ukraine". The Rinat Akhmetov Foundation for Development of Ukraine became the Principal Recipient on behalf of Ukraine. Alliance Ukraine in partnership with other governmental and non-governmental organizations, such as Ukrainian Center for TB Control at the MOH of Ukraine, State Department of Ukraine for Enforcement of Sentences, Ukrainian Red Cross Society and PATH (Program for Appropriate Technologies in Health) will be the sub-recipient of the Program.

Key objectives of the Program are:

- To improve TB diagnostics through optimization of laboratories at public and penitentiary healthcare institutions.
- To improve access to high-quality services for people who due to various reasons have limited access to anti-tuberculosis medical services.
- To strengthen the capacity of the healthcare system of Ukraine to overcome TB through management grade-up (leadership, monitoring and evaluation, human resources development) needed for successful implementation of the TB Program.
- Scale-up general access to TB-related diagnostics, treatment and care through raising awareness, mobilization of political support and reduction of stigma.

Alliance Ukraine is responsible for the component "Improvement of Access to High Quality Services for Patients with TB/HIV Co-infection", as well as procurement of medicines, medical supplies and healthcare products.

Round 10 Program

In December 2010, the Global Fund Board approved Ukraine's proposal within **Round 10** to fund HIV/AIDS response for 2012-2016 in the amount of US\$ 305,000,000, which is the second biggest grant to be provided in the Round and the biggest of all grants received by Ukraine for response to the epidemics. US\$ 95,000,000 will be disbursed to Ukraine in the first two years. It comprises almost 13% of the funds allocated by the Global Fund within Round 10 to the global HIV/AIDS epidemic response for this period. This success became possible thanks to the joint efforts and efficient epidemic response activities of non-governmental and governmental organizations in Ukraine. Final negotiations will be held in 2011 (currently the scope of funding is expected to comprise US\$ 301,700,000).

The proposal specified three key activity areas:

- to intensify the focus on a comprehensive package of services available for most-at-risk populations and people living with HIV;
- to strengthen the health care system, which would ensure the long-term duration and sustainability
 of the national HIV epidemic response in the area of coverage of most-at-risk populations and
 people living with HIV with the package of services;
- to strengthen the systems of communities and non-governmental organizations to perform the needed and cost-efficient activities for most-at-risk populations and people living with HIV.

3.2. Project "Scaling Up the National Response to HIV/AIDS through Information and Services" (SUNRISE) Supported by the United States Agency for International Development

"Scaling-up the National Response to HIV/AIDS through Information and Services" (SUNRISE) Project implemented by Alliance Ukraine since 2004 is the largest USAID HIV/AIDS project in Ukraine.

In 2010, the project was implemented in nine most affected regions of Ukraine — Dnipropetrovsk, Donetsk, Mykolayiv, Odesa, Kherson and Cherkasy oblasts, Autonomous Republic of Crimea and the cities of Kyiv and Sevastopol. The goal of the SUNRISE project is to substantially reduce HIV transmission rates in the populations most vulnerable to HIV/AIDS through significant scale-up of access to high-quality information as well as prevention and care services among those populations in the aforementioned regions.



USA Secretary of State Hillary R. Clinton meets leaders of civil society organizations, SUNRISE Project manager among them

This goal is slated for achievement through the implementation of four key objectives:

1. To cover at least 60 percent of the most vulnerable populations with effective, high-quality information and respective services to prevent parenteral and sexual transmission of HIV.

This objective envisages the provision of prevention services and information to such key most-at-risk populations as injecting drug users, commercial sex workers and men who have sex with men.



Meeting at Alliance. From left to right: Maria Samko (Alliance) and Enilda Martin (USAID)

Overall, in 2010, prevention services and information within the SUNRISE project were delivered to 130,002 IDUs, 17,225 CSWs and 15,894 MSM.

Five IEC materials on the issues of prevention were developed in 2010 within the information component of the project. A total of 12,052 copies of these materials were disseminated among representatives of the key populations.

2. To increase the accessibility of high-quality information on care, support, and respective services for people living with HIV/AIDS and other populations affected by the epidemic.

The All-Ukrainian Network of People Living with HIV was the main partner of Alliance Ukraine in implementing this component. This component was completed in 2009.

3. To strengthen the prevention and care continuum with a particular focus on improving the quality of and coverage with voluntary counseling and testing (VCT) services.

In 2010, VCT services within the project were provided to representatives of all vulnerable groups.

4. To strengthen the capacity of local organizations and communities to analyze, plan, provide help, monitor and evaluate newly introduced types of information and services in a collaborative manner.

In 2010, Alliance Ukraine continued providing technical and methodological assistance to partners working in the area of overcoming the epidemic. The following are the main project achievements within this component:

- During the year, 107 NGO representatives participated in trainings on various issues, including mobilization of communities vulnerable to HIV, administration of volunteer work and management of organizational resources.
- 28 NGOs received technical assistance with financial support from the SUNRISE project.

In August 2009, according to a USAID decision, the SUNRISE project was extended for 2 years — till August 18, 2011 — with additional funding in the amount of over US\$ 4,000,000.

In addition to HIV/AIDS prevention among IDUs, CSWs and MSM, the new priority project areas for 2009–2011 included HIV prevention among street children and targeted HIV prevention among female IDUs, as well as medication-assisted treatment.

Social Patrol among Street Children

In spring 2010, a Participatory Site Assessment (PSA) was conducted among street children in Kyiv, Odesa, Mykolayiv, and Donetsk. Based on the PSA results, prevention projects for street children were developed in these four cities, and have been implemented since July 1, 2010. The projects include activities of Social Patrol, prevention education, distribution of hot food, condoms and IEC materials among street children. Also, children are tested for HIV and syphilis, receive medical services as well as social and medical follow-up. In 2010, the projects funded by Alliance covered 1,759 street children.



Team of street children plays soccer at the training base of Dinamo FC

Gender-sensitive Interventions for Female IDUs

On June 1, 2010, HIV/AIDS prevention projects for female IDUs were launched in Uman, Mykolayiv, Bilhorod-Dnistrovsky, Kostiantynivka, and Sloviansk. The goal of these projects was to develop and introduce gender-sensitive procedures and policies to cover female IDUs, who had not been among the



Female clients of the project in Slavyansk have an opportunity to work at a sewing workshop

clients of prevention projects before, with services and information. The projects have outreach routes and organize prevention education specifically focused on female IDUs; condoms and IEC materials are distributed; health services are provided; social and medical follow-up is conducted. The project clients discuss their problems, cook food together, disseminate prevention information in their environment and involve new female IDUs into the project. Alliance developed a booklet called "A Woman and Drugs" for this target group. A total of 399 female IDUs were covered with gender-sensitive interventions in 2010.

Medication-assisted Treatment

During 2010, within the projects aimed at delivering integrated medical and psychological and social services, 255 HIV-infected drug users received comprehensive health, social and psychological services, including medication-assisted treatment. Aimed at organizing integrated service delivery, the projects are implemented in 9 health care facilities in cooperation with 6 non-governmental organizations.



Client of the integrated services delivery project, Odesa

Also, a training workshop was developed and conducted for multidisciplinary teams on the issues of taking an integrated approach to case management of patients with combined diagnosis of drug dependence/HIV/TB. A total of 47 specialists were trained within this program.

In September 2010, a group of chief physicians and heads of health care departments of Kyiv and Sevastopol cities as well as of Mykolayiv, Odesa and Kherson oblasts visited Vilnius to learn about the experience in introducing integrated medication-assisted treatment programs in Lithuania. During this visit the heads of health care departments had an opportunity to study best practices in organizing comprehensive health care and psychosocial services for drug dependent people, who receive medication-assisted treatment.

The projects that were implemented during the year helped to collect information on specifically designed

forms to evaluate success in the introduction of integrated models of medication-assisted treatment for HIV-positive drug users. This data will be used to analyze results and to develop recommendations on further disseminating experience in the introduction of an integrated approach to providing medical and psychosocial services to HIV-positive drug users.

3.3. Project "Advocacy Initiatives to Strengthen HIV/AIDS Response in Ukraine" with Financial Support from the Levi Strauss Foundation

In 2010, Alliance Ukraine continued implementing the project funded by the Levi Strauss Foundation (LSF) aimed at creating a favorable legal, political and social environment to promote and extend practices for HIV prevention and reduction of stigma and discrimination against populations that are vulnerable to HIV in Ukraine.

Allianace's advocacy efforts were mostly focused on promoting testing with rapid tests, legalizing the disposal of used syringes within the harm reduction program, establishing a network of lawyers to support organizations involved in harm reduction programs, providing information to the general public about HIV/AIDS problems and reducing the levels of stigma and discrimination against vulnerable populations.

Representatives of Alliance Ukraine took an active role in the intersectoral working group at the MOH of Ukraine that was developing a draft Law on HIV/AIDS, and provided necessary information and important input to the members of the working group. The new Law included most of the proposals submitted by International HIV/AIDS Alliance in Ukraine.

Also, within this project experts developed a draft review of scientific literature on medical waste disposal. Alliance supports the work of this expert panel at the MOH and coordinates its activities on an ongoing basis.

In May–July 2010, Living Library events were conducted in seven regions of Ukraine with LSF support. An analysis of these events found that the general public as well as representatives of high risk groups support the idea of the Living Libraries, which are aimed at reducing stigma and discrimination against most-at-risk populations by the general public. The event organizers noted the public's growing interest, especially by representatives of the social services for children and youth, school teachers, teachers of vocational training schools, colleges and universities, as well as pupils and students for the Living Libraries, where people can read a 'living book', learn different life stories, hear different views on different complex issues and find answers to their questions. Living Library events were broadly covered in local, regional and national mass media. Organizations have already received many invitations from a number of educational institutions, social services for children and youth, and from local civil society organizations to organize Living Libraries in their towns and villages located far from regional and district centers to inform the general public about the issues related to HIV/AIDS. Within the project, non-governmental organizations signed cooperation agreements with regional and district administrations, social services and numerous educational facilities.

In July 2010, Alliance representatives demonstrated the successful experience of Living Libraries at the XVIII International AIDS Conference in Vienna (Austria). The Living Libraries project was presented at one of the Conference workshops as one of the best practices to overcome stigma and discrimination against most-at-risk populations. Methodological and visual materials developed within the project were distributed to the conference participants and partner organizations from Eastern Europe and Central Asia.

An important project component was the creation of a network of lawyers from among civil society organizations. Advocacy activities at the national and regional levels ensured efficient cooperation between all lawyers of NGOs participating in the project. The lawyers had an opportunity to share information about their activities on a regular basis: concerning news and changes in the legislation, concerning patient rights violations concerning those who receive substitution maintenance treatment (SMT) and medical personnel by law enforcement officers and other governmental regulatory

bodies. Legal support was often provided to the participants of SMT programs.

During the whole year and thanks to LSF support, Alliance Ukraine successfully implemented a number of public events to provide information to representatives of most-at-risk populations, as well as health care workers and the general public about HIV prevention methods: a public event devoted to World Health Day; a press tour for journalists to Kryvyi Rih where the first pharmacy-based syringe exchange program was introduced and successfully implemented; a special event called "Race for Life". Thanks to LSF support, people who came to the concert devoted to World AIDS Day were able to have an HIV test at Alliance Ukraine's mobile

laboratories.



At the "Living Library", Kherson

3.4. Advocacy Project "Green Light" Supported by the International Renaissance Foundation

The goal of the project funded by the International Renaissance Foundation is to create a favorable environment for the introduction of harm reduction and substitution therapy programs in Ukraine, to overcome existing barriers and obstacles for introducing such programs.

Key project objectives:

- 1. To initiate public discussion, in particular, a dialogue with government authorities about the need to review legislation in order to bring laws on drug control in compliance with the needs of public health, specifically populations most vulnerable to HIV.
- 2. To establish cooperation between civil society organizations that implement substitution therapy and harm reduction projects and law enforcement bodies (most importantly with police) at the local level.
- **3.** To produce and distribute a series of short prevention and educational documentaries among populations that are most vulnerable to HIV, primarily among drug users, on the topics related to harm reduction, police detention and prevention of risky drug using practices.

The project target audiences include government authorities and law enforcement bodies at the national and local levels, civil society organizations that implement substitution therapy and harm reduction projects, and populations most vulnerable to HIV.

An on-going monitoring and analysis of the current situation concerning the criminalization of drug users in Ukraine was performed within the project. Based on previous experience and taking into account the complex situation around the program implementation, project specialists identified the most efficient and consistent activities at the national and regional levels that are being implemented to provide support to organizations that implement harm reduction and substitution therapy programs. The project tracks violations of human rights of program participants on an ongoing basis to take adequate response measures. In response to identified cases of violations a number of inspections was initiated with internal security divisions of the Department of Ministry of Internal Affairs (MIA) and General Prosecutor's Office participating. A single database has been created. Numerous facts about violations of the rights of program participants, in particular, drug users, health care workers and program employees are being entered into it. Generalized information was submitted to the respective government institutions (MIA, General Prosecutor's Office, Security Service of Ukraine, Ministry of Health, and others).

Within the working meetings with lawyers of the organizations, as well as in the day-to-day process of program implementation, counseling and legal assistance is provided to the organizations to help them remove obstacles at the regional and local levels.

On the other hand, ongoing work is being performed with law enforcement bodies to sensitize them about the specific features of work with vulnerable populations, about harm reduction and substitution therapy programs. At the regional level, civil society organizations manage to collaborate

with police in regard to implementation of these programs on the basis of memoranda of cooperation and other official agreements on facilitating the launch of and development of these programs.

Within the third direction, scripts for short prevention and educational documentaries on the topics of harm reduction, police detention and prevention of risky drug using practices were developed with the involvement of target populations and prepared for shooting. All video production including short versions of these documentaries will be shot in April-May 2011.

3.5. Technical and Methodological Support to HIV Epidemic Response in Eastern Europe and Central Asia

A Regional Technical Support Hub for Eastern Europe and Central Asia (HUB) (www.tshub.org.ua) was established at Alliance Ukraine in 2008 to improve access of civil society organizations to high-quality technical support in order to expand activities aimed at HIV/AIDS response at the national and regional levels. There were 52 projects implemented in 18 countries within the Hub's three years of activities.

The year 2010 was the most successful year since the project launch. Diagram 4 illustrates the projects implemented in 2010 in 18 countries.

The year 2010 became the year of intensive unrolling of technical support and significant success in the provision of such support to partners. In particular, these achievements are reflected in the initially planned goal being significantly surpassed, which for 2010 was 400 days of technical support, while the actual output amounted to 1,189.5 days (by commitments) and 936.5 days (of actually provided support).

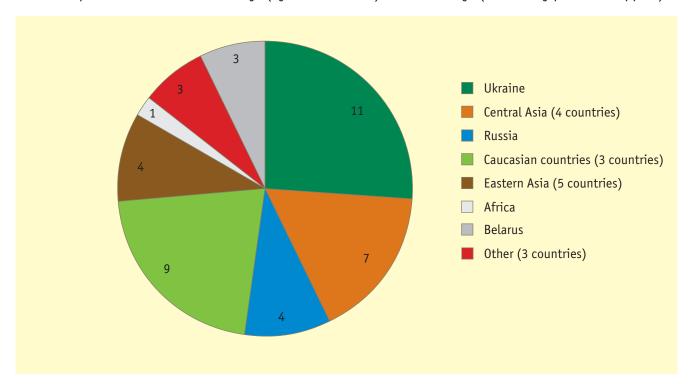


Diagram 4. Technical Support Hub for Eastern Europe and Central Asia projects in 2010 by regions

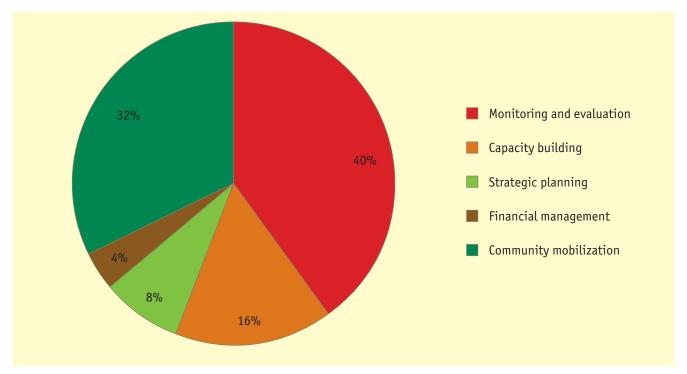


Diagram 5. Areas of technical support expertise provided in 2010

The year 2010 saw an exceptionally fruitful continuation of partnerships established in 2009, including the development expertise areas where technical support provision is required and demanded. In particular, 25 assignments started and were partly completed in 2010.

The key donors/clients of the Hub include:

- International HIV/AIDS Alliance, located in the United Kingdom (the projects were supported by the World Bank, Management Sciences for Health (MSH)/United States Agency for International Development (USAID), and UNAIDS);
- UNDP Moldova;
- United Nations representative office in Belarus;
- Global Fund with its headquarters in Geneva, Switzerland;
- Open Society Institute (OSI), Moldova;
- Harm Reduction Network, Georgia;
- KPMG Office in USA;
- Curatio International Consulting, Georgia;
- Shell Ukraine:
- Foundation for Development of Ukraine (Rinat Akhmetov Foundation).

Another unique example of Hub activities was cooperation with the private sector, such as pilot trainings on 'Basic Knowledge of HIV' conducted for Shell in Ukraine as well as technical support provided to the Ukrainian charity organization Rinat Akhmetov Foundation for Development of Ukraine. The latter experience is linked to the development of Round 9 application to the Global Fund, preparation of budgets, institutional capacity building, and participation in preparation of Appeal documents.

Key Program Achievements in 2010:

- Involvement in the assessment and program implementation of PLWHA, MSM and IDUs communities (free TS delivery in 5 countries, AIDSTAR II MSM project).
- Support of national networking of PLWHA and MSM (CA CAAP Project in cooperation with ECUO) and support of the regional network of MSM service experts/organizations (AIDSTAR II MSM project).
- Building capacity of local organizations (PR, SRs and SSRs) engaged in the GF-supported programs in Ukraine, Moldova, Russia, Mongolia and Georgia.
- Support the development of systematic and comprehensive services for vulnerable communities (AIDSTAR II MSM project and Georgian Harm Reduction Network, OSI Moldova, Moldova PLWHA League).

Success Story

Thanks to the efforts of the Regional Technical Support Hub in Eastern Europe and Central Asia it became possible to discuss the package of services at the regional level.

From the very beginning of implementation of the project "Men Having Sex with Men in Eastern Europe: Implications of a Hidden Epidemic", which envisaged provision of support to 7 countries of the region within AIDSTAR II project (with financial support from the United States Agency for International Development), in September 2009, the team of the Regional Technical Support Hub decided to use local potential and knowledge as much as possible to carry out regional evaluation. The regionally oriented strategy included not only involvement of local regional experts in analysis and evaluation, but also envisaged giving certain preference to the MSM/LGBT community, who had the requisite level of professional skills.

One of the recommendations stated in the evaluation report was to develop regional recommendations for the basic package of services on HIV/AIDS prevention, care and support among MSM. This recommendation was actively supported during a fruitful discussion on the report data by the Evaluation Group from WHO, UNDP and the Alliance-AIDSTAR II team at the seminar in Yerevan in the beginning of May 2010.

Thanks to information sharing among MSM community leaders and experts during the entire project, AIDSTAR II activities were efficiently coordinated with the regional

initiatives of the UNDP and WHO aimed at MSM. The Regional Technical Support Hub in Eastern Europe and Central Asia was invited to provide assistance to conduct the First Regional Consultation on HIV and MSM in the Countries of Eastern Europe and CIS, which was held in November 2010 in Kyiv.



Evaluation results were published and disseminated the same month. The Evaluation Committee met to analyze and discuss the key services at the regional level. The list of basic services was assigned to each component of the package of services. Each service was discussed in terms of opportunities for its delivery in different countries of Eastern Europe (Russia and Caucasian countries) and Central Asia.

In the end of 2010, a team of regional advisors developed a draft concept of the package of services aimed at HIV/AIDS prevention, care and support for MSM in Eastern Europe and Central Asia. In 2011, it is planned to hold consultations in the countries of the region.



4. The Role of Alliance Ukraine in the National Response to HIV/AIDS Epidemic in Ukraine

4.1. The contribution of Alliance to implementing the National HIV/AIDS Program

Alliance Ukraine is a co-implementer of the National Program of Prevention, Treatment, Care and Support for HIV-Infected People and AIDS Patients for 2009–2013 in accordance with the Law of Ukraine No. 1026-VI dd. 19/02/2009.

In 2010, a significantly higher level of funding was secured for Program activities than it was originally planned in the Law (UAH 165,366,000 as compared to the previously planned UAH 81,714,000). For example, UAH 88,200,000 was spent on prevention activities among injecting drug users (the planned amount was UAH 49,100,000); prevention activities for female sex workers — UAH 20,200,000 (as compared to the planned UAH 13,900,000); HIV prevention among men who have sex with men — UAH 7,600,000 (as compared to the planned UAH 4,200,000). Such significant increase in funding was achieved not only due to the growing exchange rate of the U.S. dollar versus the Ukrainian hryvnia (since the time of planning the program budget in 2008), but also thanks to the strengthened cooperation between the national and local non-governmental and governmental implementing partners and international organizations within the grant provided by the Global Fund to Fight AIDS, Tuberculosis and Malaria, as well as thanks to the redistribution of responsibilities between the Principal Recipients of the Round 6 Global Fund grant.

According to the national program, Alliance is responsible for 10 activity areas related to HIV prevention in vulnerable populations, as well as to ensuring free access to HIV counseling and free testing for different populations; and is responsible for the organization of training for specialists of the Centers of Social Services for Family, Children and Youth on issues of prevention and social support. The key results of these tasks being implemented by Alliance Ukraine by key program indicators are presented in the table below.

Program Indicators	Planned in the National Program for 2010	Alliance Implementation Results as of 31.12.2010	Alliance Share as of 31.12.2010
Number of established regional monitoring and evaluation centers and facilitation of their activities	14	11	79%
Share of injecting drug users covered with prevention activities	30% (87 000)	58,6% (170 081)	195%
Number of individuals who receive substitution maintenance therapy	12000	6 025	50%
Share of children and adolescents with risky behaviors covered with prevention activities	30%	40 599*	-
Number of prisoners and detained individuals covered with prevention activities	30% (43 500)	22,3% (32 341)	74%
Share of commercial sex workers covered with prevention activities	30% (21 000)	37,8% (26 452)	126%
Share of men who have sex with men covered with prevention activities	30% (28 500)	18,9% (18 203)	64%

^{*} Cumulative amount as of 31 December 2010

It is important that Alliance Ukraine has fully implemented its commitments to achieve its share of the national program indicators within the funding provided by the Global Fund under its Round 6 grant, and by other donors. However, due to the lack of funding, or underfunding from the state budget and insufficient support from government authorities, some country level indicators, for which partner organizations from the government sector are also responsible, fell short of the target. In particular it is related to the indicator "Number of people who receive substitution maintenance therapy".

4.2. Policy and Advocacy —

Key Achievements at the National Level

The year 2010 was marked with significant development of the national HIV/AIDS policy. In spite of all the difficulties and obstacles, it was a year of new achievements. The new version of the Law of Ukraine "On response to the Spread of Diseases Caused by Human Immune Deficiency Virus (HIV) and Legal and Social Protection of People Living with HIV" was approved by the Verkhovna Rada of Ukraine on December, 23 2010 as a result of long-term efforts of governmental, civil society and international organizations, including Alliance Ukraine, whose representatives were included into the intersectoral working group at the Ministry of Health of Ukraine to develop the draft Law and for almost two years were actively defending their proposals and provided support to the draft law at all stages. The new version of the Law takes into account most of the proposals submitted by the International HIV/AIDS Alliance in Ukraine. Adoption of the new Law should contribute to HIV/AIDS epidemic response in Ukraine by guaranteeing the provision of harm reduction services, including syringe exchange and substitution maintenance therapy to injecting drug users; confidentiality of HIV status to PLWH; post-exposure prophylaxis for health care providers and victims of sexual violence; and free access to HIV/AIDS related services in adolescents. Also, a number of other discriminatory provisions that did not meet international standards were removed from the new Law.



Ceremony of signing the Memorandum of Understanding and Cooperation between Alliance Ukraine and Ministry of Family, Youth and Sports (August 31, 2010, Kyiv)

On August 31, 2010 in Kyiv, the Minister of Family, Youth and Sport Ravil Safiullin and Deputy Executive Director of the International Charitable Foundation "International HIV/AIDS Alliance in Ukraine" Pavlo Smyrnov signed a Memorandum of Understanding and Cooperation between the Ministry of Family Youth and Sports of Ukraine and ICF "International HIV/AIDS Alliance in Ukraine" and a Joint Work Plan for 2010–2011 to respond to HIV/AIDS, ensure prevention, treatment, care and support to HIV-positive people and AIDS patients in Ukraine.

The joint work aims at strengthening the general capacity to overcome HIV/AIDS, improving the quality of social services on primary prevention and covering more children and youth among risk populations. Due to the optimization of central executive bodies, necessary adjustments will be made in the signed documents.

Throughout 2010, Alliance Ukraine, being one of the implementing organizations of the National Program for the Prevention of HIV, Treatment, Care and Support for HIV-Infected and AIDS Patients for 2009–2013, approved the Law of Ukraine No.1026-VI dd. 19.02.2009, and responsible, inter alia, for the area "Scaling-Up the Sphere of Application of Substitution Maintenance Therapy (SMT)", observed a systemic worsening of the situation around the implementation of substitution therapy programs in Ukraine.

While the national program, supported by international donors, envisaged a gradual scaling-up of SMT programs, health care workers and patients were ever more suffering from regular police interventions and oppression, which were documented in most regions of Ukraine.

But the loudest and the most demonstrative case was the "Case of Doctor Podolyan" that was broadly covered in local and international mass media. Illya Podolyan, a narcologist of the SMT program at the Odesa Regional Drug Clinic (ORDC) was accused of ostensibly committing over forty grave crimes and spent four months in prison despite severe problems with his health. All accusations that the doctor ostensibly trafficked drugs to 45 patients of the SMT program were based on the fact that Odesa Regional Drug Clinic had changed its legal address and had not timely reregistered its license for the use of narcotic drugs. At the same time, the fact that the



Illia Podolyan, narcologist of the SMT program at Odesa Regional Drug Clinic, reporting at the panel session on Human Rights of the National HIV/AIDS Conference, 2 months after 120-day long detention at the remand prison in Odesa (November 18, 2010, Kyiv)

narcologist was not a director of this health care facility and did not bear responsibility for the registration of licensing documents was not taken into account.

Alliance initiated a large-scale advocacy campaign to protect the doctor. Numerous official and collective appeals were sent to top leaders of the Government and General Prosecutor's Office; the situation was reviewed at the meetings of the National Council for Tuberculosis and HIV/AIDS, intersectoral working group on SMT at the MOH of Ukraine; dozens of articles on this case were published in national and international mass media.

Only after four months of intensive opposition and a number of appeals, on September 25, 2010, doctor Podolyan was released from custody with a written commitment not to leave the city according to a Court of Appeal of Odesa Region resolution. The doctor returned to his work at the drug clinic, but a hard legal process is yet to be performed to refute the unjustified accusations.

In October 2010, doctor Podolyan was invited as a reporter to the National HIV/AIDS Conference in Kyiv that was held with support of the MOH of Ukraine, where he made a presentation at a plenary session dedicated to reviewing problems related to observing human rights in the context of the HIV/AIDS epidemic.

Alliance Ukraine made everything possible to unite the numerous non-governmental and international organizations working in the area of HIV/AIDS to draw the attention of responsible governmental bodies and institutions, as well as of the international community, to the problems associated with introducing substitution maintenance therapy programs in Ukraine, focusing on human rights violations of health care workers and patients of the programs.

Rights violation of health care workers and patients of SMT programs in Odesa is just one of the many facts that systemically occur in almost all regions of the country.



Meeting of lawyers with representatives of the Department for Monitoring of Human Rights Observance of MIA of Ukraine (March 2010, Kyiv)

In 2010, Alliance documented numerous facts of illegal interventions by the territorial police divisions into operations of SMT programs, who, in particular, tried to obtain personified lists of drug dependent patients from administrators of health care facilities, to arrest the patients and take them to district police stations, to illegally take their fingerprints and make photos, with the use of psychological pressure and physical violence. Regional and national mass media repeatedly cited the heads of territorial police departments who accused the medical staff of SMT programs in drug trafficking, though these 'facts' were never confirmed later.

A review of this problem initiated by Alliance Ukraine at the meeting of the National Council for Tuberculosis and HIV/AIDS on April 20, 2010 resulted in the decision that the Ministry of Internal Affairs should take immediate measures to ensure the protection of rights of the patients involved in the SMT programs as well as medical staff. Unfortunately, this decision still remains on paper.

Alliance Ukraine drew attention of the most respected international media to this issue (including the Guardian, the British Medical Journal, CNN, the New York Times, BBC, the Science, Euro News, Voice of America, Radio France Internationale, and others).

On March 17–19, 2010, International HIV/AIDS Alliance in Ukraine, supported by the International Renaissance Foundation and the Levi Strauss Foundation, held a working meeting of lawyers of partner organizations implementing programs on HIV/AIDS prevention and treatment, and a joint working meeting with representatives of the Department for Monitoring of Human Rights Observance in the Activities of Internal Affairs Bodies of MIA and assistant ministers on human rights in the regions. It was the first joint event with participation of HIV-servicing organizations and the department responsible for the observance of human rights in the system of internal affairs.

Lawyers together with representatives of the Department and oblast assistant ministers reviewed and analyzed legal documents regulating the activities of civil society organizations in the area of HIV/AIDS response, and their cooperation with the bodies of internal affairs of Ukraine, prospective legislation and approaches to decriminalization of drug dependent people. Participants of the joint meeting discussed typical problem situations that occur due to the interventions of territorial bodies of internal affairs in the work of HIV/AIDS prevention and treatment programs, and developed standard models to respond to cases of human rights violations and efficient methods for collaboration with the assistant ministers of internal affairs on human rights in the regions in case of occurrence of problem situations.

In autumn (October 21–23) of 2010, Alliance Ukraine held the second meeting of lawyers who provide legal support to participants of substitution maintenance therapy programs with the aim to strengthen their and the role of lawyers and organizations; to increase efficiency and quality of legal support; to



Participants of the consultations of the Committee on the Rights of the Child at the UN Human Rights Committee (June 2010, Geneva, Switzerland). Pavlo Skala of Alliance Ukraine (first on the right)

systematize information about lawyers involved in implementing respective projects, and to develop a package of reference materials for lawyers to help them in the process of legal support provision.

Facilitators of the meeting, Pavlo Skala and Olena Kucheruk, informed participants about issues related to ensuring a continuity of SMT in case of detention or arrest. Lawyers of the regional harm reduction projects shared their work experience in the project, discussed specific cases of violation of human rights of program clients and presented an algorithm of actions that they developed to protect the rights of program clients in each specific case. The meeting resulted in the development of a package of materials (including court documents, presentations, letters of appeal, letters of support), which were used by lawyers of organizations in their further work to protect the rights of SMT program participants.

At the end of June 2010, Pavlo Skala and Damon Barrett (International Harm Reduction Association — IHRA) took part in official consultations on the Committee on the Rights of the Child at the UN Human Rights Committee within the 55th session in Geneva. There, an alternative/shadow report was presented focusing on problems of children and adolescents in relation to drug use and HIV/AIDS. Alliance also participated in the development of this report.

On the eve of official hearings in Geneva, on January 18, 2011, International Harm Reduction Association, Eurasian Harm Reduction Network, Canadian HIV/AIDS Legal Network, International HIV/AIDS Alliance in Ukraine and All-Ukrainian Network of People Living with HIV sent an addressed letter to the Ombudsman of Ukraine and to the heads of specialized parliamentary committees and MFA of Ukraine with recommendations on the need to enter specific changes in Ukrainian legislation on HIV/AIDS in order to bring policies and methods of work in this area in compliance with international standards to satisfy the needs of the most vulnerable populations of children and adolescents in the

context of HIV/AIDS, drug use and commercial sex problems. Recommendations of the UN Committee on the Rights of the Child related to drug use and HIV/AIDS that were published soon after coming into force of the new version of the Law of Ukraine on HIV/AIDS on January 15, 2010, included, inter alia, the recommendations provided by Alliance Ukraine.

The movement to protect the rights of CSWs continues to develop. On December 17, 2010, participants of the press conference organized by All-Ukrainian League "Legalife" and Alliance Ukraine informed media representatives about the relevant problems and achievements and also indicated that the government had legally recognized the existence of sex business and included this fact in the national legislation. In particular, Order No. 3123/275/770 "On Approval of Standards for Provision of Social Services to the Representatives of Risk Groups" that contains the definition of the term "commercial sex worker" was signed by three line ministries and registered at the Ministry of Justice of Ukraine. On November 1, 2010, this legal and regulatory act, which is obligatory for all government authorities, entered into force. In recognition of the International Day to End Violence against Sex Workers, flash mobs and rallies with red umbrellas (a traditional symbol of female sex workers protection) were held in Kyiv, Kirovohrad and Vinnytsia.

Enactment of the Order of the Ministry of Health No. 634 dd. 29.07.2010 resulted in a 20-fold (!) increase in the criminalization of users of the most common illicit injecting drugs. This Order makes drug dependence equal to a crime and imposes a threat to the outburst of the HIV/AIDS epidemic in Ukraine.

International HIV/AIDS Alliance in Ukraine with involvement of civil society and international organizations initiated a review of this Order, calling leaders of the state to immediately review the recent destructive decisions in the area of drug policy, to face people living with the problems of drug dependence and HIV/AIDS, and not to turn their back to obvious problems. Alliance will do everything in its powers to contribute to the changes in this Order during 2011.

On September 22, 2010, at the 65th session of the UN General Assembly in New York, speaking at the Summit on the Millennium Development Goals, Andriy Klepikov, Executive Director of International HIV/AIDS Alliance in Ukraine, warned that Ukraine would not achieve Goal 6 "Halt and begin to reverse the spread of HIV/AIDS and tuberculosis", if the approaches to the most vulnerable population groups is not changed. Andriy Klepikov emphasized that the government neglected the needs of the populations most vulnerable to HIV/AIDS, in particular, violated the rights to treatment of the majority of people living with HIV/AIDS in Ukraine, injecting drug users. He also spoke about the unavailability of ARV therapy for drug dependent patients and about police interventions and obstacles to the implementation of SMT programs at the governmental level. Addressing the President of Ukraine and official delegations in the presence of Michel Sidibă, Executive Director of the Joint United Nations Program on HIV/AIDS (UNAIDS), he called on the responsible individuals to pay attention to the needs of the populations most vulnerable to the epidemic.

In July 2010, Andriy Klepikov, Executive Director of International HIV/AIDS Alliance in Ukraine, together with 15 representatives of civil society organizations focusing on media monitoring, human rights protection and solving social problems participated in a meeting with the U.S. Secretary of State Ms. Hillary Clinton, who stayed in Ukraine with an official visit that included meetings with both the President of Ukraine Viktor Yanukovych and a number of other top officials, as well as leaders of civil society organizations.

Speaking about urgent needs, A. Klepikov expressed his sincere gratitude to the U.S. Government for its support that helps save human lives, and noted the importance of including issues related to the AIDS epidemic response into the priority agenda of the top Ukrainian officials. As the U.S. Ambassador in Ukraine Mr. John Tefft was present during this conversation, Ms. Clinton not only agreed that this objective is very important for the successful response to HIV/AIDS epidemic, but also stated that the smbassador would provide his support on this issue. On her part, Ms. Hillary Clinton thanked Alliance Ukraine for its important work.

4.3. Development of the National Action Plan for 2011-2013

The year-long work of partners aimed at developing a National Action Plan for 2011–2013 to support the introduction of the National Program for Prevention of HIV, Treatment, Care and Support for HIV-Infected and AIDS Patients for 2009–2013 was concluded at the working seminar of regional partners and key stakeholders on April 13–14, 2010. A unique methodology for regional and national operational planning was developed with the active programmatic and financial participation of Alliance Ukraine; training for the oblast (regional) planning teams was conducted; oblast plans and cost estimates were collected and the format for the planning of technical support was developed.

Operational planning at the oblast and national levels helped to obtain invaluable experience in budgeting for the oblast epidemic response programs with the use of an approach based on the cost of service per client. Evaluation of general needs at the oblast and national levels was performed and a national technical support plan was developed.

4.4. The National HIV/AIDS Conference with International Participation "For Every Life Together"

On November 17–19, 2010, the National HIV/AIDS Conference with International Participation "For Every Life Together" was conducted. Conference organizers included the Committee for HIV/AIDS and Other Socially Dangerous Diseases, Joint United Nations Program on HIV/AIDS (UNAIDS), All-Ukrainian Network of People Living with HIV, ICF "International HIV/AIDS Alliance in Ukraine", German Association for Technical Cooperation (GTZ) in Ukraine, Academy of Medical Sciences of Ukraine and other organizations.

Over 600 experts from every oblast of Ukraine and dozens of international experts shared their experience and discussed epidemic response issues at this unique national forum. Alliance Ukraine not only provided key financial support to the conference and was its organizational core together with the Committee on HV/AIDS and TB, but also held more than 10 session events.

The conference covered the following topics: HIV prevention among IDUs, efficiency of prevention programs for most-at-risk adolescents, vulnerable children and youth; services for female sex workers; services for men who have sex with men; coordination of the National HIV/AIDS epidemic response;



At one of the Sessions of the Conference

treatment, care and support for people living with HIV/AIDS; substitution maintenance therapy and other issues. To get more information about presentations and access to all conference materials please visit the website of Alliance Ukraine: http://www.aidsalliance.org.ua/cgi-bin/index.cgi?url=/en/19112010naconf/index.htm.

Conference participants stated that Ukraine had achieved significant progress in HIV/AIDS response: the number of HIV tests both among the general population and high risk groups had grown; the number of cases of mother-to-child transmission of HIV had reduced; access to treatment had increased. However, it is not enough for an adequate response to the epidemic. Having discussed the problems of HIV/AIDS response in Ukraine, the conference participants informed the President of Ukraine, Verkhovna Rada and the Cabinet of Ministers of Ukraine about the need to ensure political leadership of the state in response to HIV/AIDS and drug use.

Summing up, the conference participants came to the conclusion that prevention activities should become a priority area of HIV/AIDS response for both the general population of Ukraine, and most-atrisk populations. They identified the need to ensure support to substitution maintenance therapy programs and to protect the rights of people affected by the epidemic. The full text version of the resolution is available on the website of the Committee for HIV/AIDS and Other Socially Dangerous Diseases: http://stop-aids.gov.ua/.

4.5. International Recognition of the Activities of Alliance Ukraine

Alliance Ukraine representatives took an active part in the XVIII International AIDS Conference held on July 18–23, 2010 in Vienna, as reporters and moderators. The achievements of prevention programs for most vulnerable groups implemented with Alliance's support were recognized at the Conference.

One of the most respected and long-standing medical journals in the world — The Lancet — published an article about HIV/AIDS prevention and harm reduction programs in Ukraine implemented with the Global Fund support. "Ukraine has the highest prevalence of HIV in Europe, but an emphasis on harm reduction in the two main risk groups — drug users and commercial sex workers — is bearing fruit", — wrote Peter Hayward in his article. (First Reduce Harm: Tackling HIV in Ukraine, The Lancet, October16, 2010).

Among other mass media that were covering projects implemented by Alliance Ukraine in 2010 were BBC, the Guardian, Die Zeit, the British Medical Journal, Der Standaard, Gazeta Wyborcza, Deutsche Welle, Voice of America as well as such wire services as Agence France-Presse, Associated Press, and others.



"I have not been to Ukraine in many years and am impressed with the results achieved within this time" – noted Jeffrey O'Malley (on the right) Global Director, UNDP, HIV/AIDS Group after being introduced to prevention programs of Alliance

In 2010, at the International AIDS Conference in Vienna two Ukrainian community-based organizations – partners of Alliance Ukraine – received the International Red Ribbon Award to recognize their leadership and contribution to communities vulnerable to HIV and people living with HIV.

Mykolayiv community-based organization **Penitentiary Initiative** has been implementing project activities since 2006 at 6 penitentiary facilities in Mykolayiv oblast. The organization implements comprehensive activities on the territory of these penitentiary facilities to prevent infectious diseases, provide care and support to HIV-



Winners with the Award

positive prisoners, psychological and social support to isolated prisoners, and provide social adaptation services to released prisoners. At the conference in Vienna it was granted an award for ensuring uninterrupted access to ART at penitentiary facilities and for provision of diverse psychological and social support to HIV-positive prisoners.

Donetsk Charity Organization **Club "Svitanok"** was created by HIV activists of Donetsk in May 2002 to improve the quality of life of people living with HIV, to protect their legal rights and to fight stigma and discrimination against HIV-positive people, AIDS patients and drug dependent people. Club "Svitanok" acts as a regional office of the All-Ukrainian Network of PLWH in Donetsk and is the first ever organization of HIV-positive and drug dependent people in Donetsk oblast. Club "Svitanok" received the International Red Ribbon Award-2010 (UNDP, UNAIDS) recognizing its leadership and contribution to communities vulnerable to HIV and people living with HIV, in the nomination "Social Support for Those Affected by HIV, Including Orphans and Vulnerable Children".

The important work of **Odesa Charitable Foundation "The Way Home"** was recognized with an award in Vienna at the Ball of Life.

4.6. Coordination and Intersectoral Cooperation at the Regional Level

Provision of coordination services at the regional level is conditioned by the need to establish intersectoral cooperation and assistance to local NGOs to introduce prevention, treatment, care and support programs aimed at vulnerable populations.

Alliance Ukraine Regional Coordinators' (AU RCs) contribution to the implementation of programs that are directly administered by Alliance includes the development of cooperation between the communities, civil society organizations and governmental services, improvement of intersectoral collaboration as well as coordination of NGO activities at the local/regional level aimed at introducing comprehensive prevention and care for vulnerable groups (IDUs, CSWs, MSM, PLWH, prisoners, and others). Regional Coordinators are advocating for the interests of communities at the local government level, help introduce innovative programs, resolve problems with roll-out and implementation of HIV prevention programs and substitution maintenance therapy programs, contribute to the development of a comprehensive service package delivery system and ensure the sustainability of such programs at the regional level.



Regional Coordinators work in 10 regions of Ukraine: Dnipropetrovsk, Donetsk, Mykolayiv, Odesa, Kherson, Cherkasy, and Chernihiv oblasts, AR Crimea, cities of Kyiv and Sevastopol. Thanks to the RCs' activities, harm reduction programs are being expanded on the territory of each oblast, the range of services for vulnerable populations is growing, and there is an annual increase in the number of new partners involved in the implementation of prevention programs: NGOs, pharmacies and Centers of Social Services for Family, Children and Youth (CSSFCY). It contributes to the higher accessibility of prevention and treatment services for vulnerable populations.

In 2010, the following partners were involved in activities in the above-mentioned regions:

- 17 new NGOs: three in each of Dnipropetrovsk and Donetsk oblast; two in each of Kyiv, Chernihiv and Odesa oblasts and Sevastopol city; one in each of Cherkasy, Kherson oblast and the city of Kyiv;
- 19 new pharmacies: 13 in Donetsk region and two in each of Mykolayiv, Odesa and Kherson oblasts;
- 4 regional CSSFCY in AR Crimea.

All RCs are members of regional (oblast, city) Coordination Councils for HIV/AIDS and Tuberculosis, as well as working groups and line committees. Four coordinators are deputy heads of Coordination Councils (in AR Crimea, cities of Mykolayiv, Sevastopol and Odesa). RCs take an active part in the development of agenda and draft decisions, speak at meetings of Coordination Councils, help NGO representatives to draft their proposals and documents for review and advocate for their interests at the meetings, involve representatives of NGOs and vulnerable populations into cooperation during meetings of the working groups and committees. This ensures participation of representatives of regional civil society organizations in developing changes and amendments to regional HIV/AIDS prevention program, and gives them an opportunity to become equal partners in its implementation.

Regional Coordinators organize and hold working meetings of NGOs that are grantees of Alliance Ukraine inviting the representatives of partner governmental and non-governmental organizations, CSSFCY, AIDS Centers, TB clinics, health care facilities involved in implementing regional targeted programs to prevent HIV/AIDS, STIs and tuberculosis. During these meetings they review problems that arise in the process of implementation of prevention projects, discuss the issues and draft decisions to be submitted to the meetings of the Regional Coordination Councils, agree upon the implementation of advocacy and communication campaigns, joint events devoted to the World AIDS Day and the Candlelight Memorial Day.

RCs make an important contribution to providing information on best practices of Alliance Ukraine programs implementation at the regional level to international organizations, donor organizations, stakeholders and decision makers on the issues of funding and roll-out of HIV/AIDS and TB prevention programs at the national and regional levels, as well as to journalists and experts of special research media. In 2010, experts and journalists from international research media visited Kyiv, Cherkasy, Odesa, Donetsk, and Dnipropetrovsk oblasts.

Regional Coordinators actively participate in national and international conferences on HIV/AIDS response. Three of them participated in the XVIII International AIDS Conference in Vienna, during which an electronic poster presentation on the topic of regional coordination was exhibited ("Regional Coordinators — a tool for increasing efficiency of the HIV/AIDS epidemic response. Experience of International HIV/AIDS Alliance in Ukraine" (Ms. H.Naduta)). Also, RCs took part in the National

HIV/AIDS Conference with International Participation on November 17–19, 2010 in Kyiv. Regional Coordinator from AR Crimea O. Yatsiuk gave a presentation on "The role of Coordination Council for TB, HIV/AIDS and Drug Use in the regional response to HIV/AIDS epidemic. The Autonomous Republic of Crimea". Coordinators assisted in selecting delegates to the Forum of Social Workers, Implementing Prevention Programs for Vulnerable Populations, Care and Support to People Living with HIV, which was conducted within the National Conference on November 17–19, 2010 in Kyiv. Coordinator of Donetsk region V. Pavlenko developed a toolkit to select regional delegates to this forum.

Success Stories

Crimea: Cooperation with CSSFCY

In the process of developing the Regional Operational Plan of the Autonomous Republic of Crimea on HIV/AIDS Response for 2010–2013, the Regional Coordinator made a proposal to develop new harm reduction sites at the regional CSSFCY. In October 2010, with Alliance Ukraine support and thanks to the efforts of the regional coordinator, such sites were opened in four districts of the Crimea. In Krasnogvardeysky, Krasnoperekopsky, Leninsky and Nizhniohirsky districts they started implementing HIV prevention projects. Now, the Regional Coordinator provides diverse technical, advisory and informational support and assistance to the CSSFCY employees for implementation of the programmatic activities; expert visits are made; project employees are involved in the events organized by the RC and Regional Knowledge Hub on HIV/AIDS in AR Crimea.

Mykolayiv: Introduction of Substitution Maintenance Therapy

During project implementation in Mykolayiv oblast, 10 SMT sites were opened and partnerships with local governments and civil society organizations were built. Problematic issues were discussed at the working meetings with the Regional Coordinator and, if necessary, he advocated for them to be reviewed at the meetings of oblast, city/district Coordination Councils, sectoral meetings and consultations. Special focus was made on organizing training and educational work: joint seminars were initiated for representatives of the MIA Department, health care and social workers (2 such seminars were conducted); training seminars for medical specialists in different areas (3 trainings); booklets and brochures were developed and disseminated among IDUs, while a methodological guide "Triple Diagnosis" was published for health care workers. The mechanism for clients' referral between medical specialists (narcologists, TB doctors, infectious diseases doctors) and civil society organizations was developed; medicines were delivered to oblast health care facilities in case patients involved in the SMT program were hospoitalized. The prerequisite was that these facilities should have a license to use narcotic drugs, psychotropic substances and precursors. In case a program participant was hospitalized, the health care facility should address the head

of the SMT site (Chief Physician) in writing with a request to provide it with SMT medications for the period of the patient's treatment. Based on the request, the Oblast Health Care Department issues a special order which specifies the medication, its dosageand the procedures for its circulation. When the patient is discharged from the hospital, the remaining medications should be returned, and the patient continues receiving SMT at his site. As of 01 January, 2011, ten sites provided treatment to 524 patients (97.0% of the planned target).

Sevastopol: Intersectoral Cooperation

One of the important activities in the region is to organize intersectoral cooperation for epidemic response. In 2010, a decision was made to organize joint meetings of both non-governmental and governmental HIV servicing organizations of the region. Representatives of the city health care facilities, such as AIDS Center, CSSFCY, STI clinic and TB clinic, Monitoring & Evaluation Center, as well as representatives of community-based HIV servicing organizations and initiative groups of community representatives are involved in these meetings.

The joint work at these meetings provides an opportunity to find comprehensive solutions to existing problems, taking into account the needs of clients and capacities of local organizations. Intersectoral meetings help fill gaps in the existing system of medical and social service provision to the population, as these gaps are especially and acutely affecting the communities vulnerable to HIV.

Joint training on basic management principles is important to strengthening intersectoral cooperation. It is well known that the issue of human resources is key to having an effective management system. That is why in 2010 a modular training for the heads and managers of HIV servicing organizations was organized at the "Staff Management School" in cooperation with the Knowledge Hub. 10 modules developed by a professional psychologist will help develop HR policy in the HIV servicing sector of the city, while the joint training will be continued and laid as the basis for the development of an effective HIV servicing sector.



5.HIV Prevention in Vulnerable Populations

5.1. Prevention among Injecting Drug Users (IDUs)

5.1.1. Comprehensive Package of Services

During 2010, harm reduction program services were provided to 170,081 IDUs, 25.02% of them were female IDUs. HIV/AIDS prevention programs among IDUs supported by Alliance Ukraine are being introduced in all regions of Ukraine. In 2010, 81 civil society organizations worked in this sphere.

A comprehensive package of services for IDUs includes the following activities:

- distribution and exchange of syringes, distribution of alcohol swabs and/or condoms at stationary, street or mobile needle exchange sites and through outreach workers, together with distribution of IEC materials on behavior change;
- voluntary counseling and testing for HIV with rapid tests;
- STI diagnostics and treatment;

- counseling on HIV and drug use, provided by social workers trained within the program, and provision of information about other prevention and treatment programs operating in the region (SMT, ART programs);
- system of referrals to specialists if there is a need to receive specialized medical, legal or other advice. When necessary, social workers perform social follow-up visits of clients, so that they can obtain the required services;
- regular group work within the projects (self-help and therapeutic groups);
- involvement of prevention program clients to participate in training seminars and providing them with necessary literature and IEC materials;
- conducting educational activities for clients of organizations;
- prevention of overdose resulting from the use of opiates and stimulants (57 NGOs perform this work using Naloxone);
- distribution of essential medicines and personal hygiene products;
- organization of leisure time activities for the clients.

In some cities, in addition to the above-mentioned services there is also an opportunity to receive services of leisure time arrangement, household services, and employment at the public harm reduction centers.

At a training for clients, Donetsk oblast



The following additional services can be provided:

- HIV prevention among stimulant drug users through interventions aimed at individual behavior change at the group level;
- counseling by a TB doctor and motivating clients to take chest X-rays;
- diagnostic of Hepatitis B and C with rapid tests at community centers, stationary or mobile sites, mobile clinics or through outreach workers;
- vocational training and employment for the project clients.

In 2010, service provision for IDUs was expanded thanks to cooperation with the State Social Service for Families, Children and Youth (SSSFCY). This partnership was secured in the tripartite agreement signed in January 2010 between the ICF "International HIV/AIDS Alliance in Ukraine", SSSFCY and international NGO "Labor and Health Social Initiatives".

This partnership created an opportunity to provide services in 16 district centers of the SSSFCY in five regions of Ukraine (Kharkiv, Luhansk, Ivano-Frankivsk, and Chernihiv oblasts and AR Crimea). Training for project leaders, VCT counselors, document managers and social workers of these services was carried out with Alliance support. Project activities started with 5 round table meetings to establish partner relations in the area of harm reduction activities. Currently, CSSFCY provides prevention means in stationary and mobile modes and organize the work of self-help groups for IDUs.

5.1.2. Behavior Change Intervention at the group level through Individual Interaction

Group-Level Interventions — innovative approach to work with amphetamine-type substance users

In 2010, International HIV/AIDS Alliance in Ukraine continued introducing innovative interventions for amphetamine-type substance users. In 2010, 15 NGOs performed these activities. A total of 385 respondents were recruited to the program, 64% of whom took the whole training course that included 12 weekly classes, each lasting 90 minutes.

Data analysis demonstrated that women were more inclined to visit all the classes compared to men. Besides, this intervention helped to single out a group of IDUs who practiced multidrug use and, hence, were more susceptible to developing multidrug dependence.

The collected data also showed that 31% of amphetamine-type substance users experienced overdose due to the use of stimulant substances as well as their combination with opiates and/or alcohol. However, only one in four respondents, who had experienced overdose (26%) tried to seek medical assistance. This very conclusion contributed to further research of overdose issues among IDUs.





This intervention included the following key results:

- upon completing the training, the practice of sharing syringes decreased from 13% to 4%;
- the share of people who gave their used syringe to other people for injections in the recent month dropped from 16% to 4%;
- participation in information classes motivated 88% of participants to take voluntary testing for HIV and STIs;
- although group participants did not indicate a reduced number of sexual partners after the training, the number of reported protected sexual intercourses increased; and the more classes were visited by the participants, the safer their behavior was;
- participation in classes contributed to improving the knowledge of IDUs by 1.7–3.0 times.

The intervention participants were also engaged in peer education. This activity helped to identify an average size for a close environment of IDUs (8 people for males, and 3 people for females). This result was used to further study a close environment of IDUs and to develop instruction on secondary syringe exchange.

Prevention Activities for Non-injecting Drug Users

A short individual intervention for non-injectors was implemented by 7 NGOs and covered 178 clients aged 17 to 40 years. The majority of them used amphetamine-type drugs on a regular basis (90%, including 32% who used drugs every day).

Results of the research carried out by Alliance Ukraine demonstrated that one of the key risks in this group is sexual transmission of HIV, and this risk is much higher for women than for men. It was alerting that 32% of respondents said they would like to try injecting drugs. That is why it is very important to organize activities aimed at preventing injecting drug use in this group.

Gender-sensitive Approaches to HIV Prevention among Female IDUs

With financial support from the United States Agency for International Development (USAID) within the SUNRISE Project, Alliance Ukraine supported five projects aimed at introducing a gender-sensitive model of work with drug users. This project started in August 2010 and is to be completed in June 2011. The project is a combination of specific services designed specifically for women, to develop and/or establish social links of female IDUs and to introduce gender-sensitive policies and procedures.

The project is implemented by the following organizations: "Oberih" (Kostiantynivka), "Volia" (Uman), "Nasha Dopomoha" (Sloviansk), "Unitus" (Mykolayiv), and "Blahodat" (Bilhorod-Dnistrovsky). In the first six months of project implementation, 399 female IDUs were covered. Alliance Ukraine is collecting data on the proposed model's efficiency during the entire period of work in this area. Results of these project activities will be presented in summer 2011.

Project participants provide comments regarding the introduction ma a gender-sensitive model of work

They often ask me – where did you become so clever? And I answer – here is the address, go there and you will become just as clever... Earlier I used to inject drugs every day – two-three times a day, as a rule. But recently I've listened to everything they were telling us at the classes and somehow started injecting less – once a week. And in the last week I didn't inject at all. Interestingly, I don't have a craving. I have a granddaughter, a daughter, and I want to spend time with them. When I came here I did not even think about quitting. I have a long record, my whole life. I just wanted to meet interesting people. And now I have finally found a job.

Project client, Sloviansk

We have a very interesting situation. Our employees who are not involved in the project are envious of those who work there, as there are so many interesting things. Everybody likes it so much that when girls come to the groups their eyes glare, and they continue coming to us even when the classes are over. This project means not only providing services. We were always curious about female projects, but now we have understood that we never knew what it really was. We thought that if we distribute packages for women, it is already a female project. But it turned out that we did not know anything! What are the specific characteristics of female users? Why don't they come to us? Nobody studied this. The understanding came after the 7-day training conducted by Alliance, and that is when we started training our employees.

Our clients now are not the same as when they came to us for the first time, then to just exchange a syringe and leave. Now they've become really interested. Recently we had a situation when a lavatory was absolutely destroyed. So one of our graduates came to me and said: "Our lavatory is disgusting, let's repair it". And she started doing it together with her friend. They worked on Saturdays and Sundays, plastered, painted, and finally set it in kind of order. I was surprised when I heard a conversation involving our female clients, quite by chance: "You know, it is so dirty around our community center, let's come here tomorrow and clean it – it is our home afterall, we spend so much time here!" That is how you see their views are changing! I did not even expect that we would live to see it, that we would hear such things.

Svitlana Haiduk, Project Manager, Kostiantynivka

I don't inject at all now. I don't have time for that, as they loaded me with work here: to hold information classes for others, to help organize groups, so I simply do not have time to think about drugs. Once we had a picnic and many of us could not even believe that it would be so good. Firstly, the social workers behaved like equals; we cooked and together had a nice time. And secondly, it was surprising that nobody had any alcohol, and we had so much fun! I have lived so many years, and never knew that it was possible to go to a picnic in a female company without a drop of alcohol or drugs and enjoy oneself so much! I was just amazed!

Project client, Sloviansk

Overdose Prevention among IDUs

Data collected in the course of behavioral studies in 2004–2009 suggested the existence of rather high rates of overdose cases among IDUs. This was an impetus to develop an intervention to prevent overdose. One of the key aspects of this intervention was to distribute Naloxone. 37 civil society organizations working in the area of HIV/AIDS in Ukraine were involved in the study. These were NGOs from Donetsk, Dnipropetrovsk, Zhytomyr, Kryvyi Rih, Uzhorod, Uman, Odesa, Cherkasy, Chernivtsi, Ternopil, Kharkiv, Khmelnytsky, Poltava, Vinnytsia, and Kyiv. A total of 2,821 respondents aged 17 to 58 years were interviewed.

According to the study results, more than half of the interviewed drug users had experiences of overdose in their life (as stated by 52% of respondents, including 53% of men and 49% of women). Among them, 27% of the interviewed drug users experienced an overdose in the last six months. These data were important for further development of overdose prevention program. Components of this area of work include training of IDUs on overdose prevention, first aid provision, use of Naloxone and making drug users study the instruction for its use. The medication is prescribed by a project physician.

Experience using Naloxone (NGO "Public Health", Kryvyi Rih)

Svitlana Osypova, head of the organization:

When our activities started in 2004, we researched overdose cases because they were many and we did not know how to provide help, there were no specialists. We knew that it was an urgent problem and something had to be done. We started using Naloxone since the project'st outset, but very carefully, because neither our health care workers, nor our clients knew much about it, and there were many doubts as to its efficiency. Yet, when our social workers and the mobile clinic saw real cases of timely help, when our client's life was saved, and then we called an ambulance, and the client was then brought home or to a clinic; when all this information began to reach our clients, they understood that it was really good. Even social workers were very skeptical about it in the beginning.

We had stories of success. Once a mobile clinic was on a field route in a forest belt, this was in winter, with kneedeep snow, and our nurse heard a cry for help. Initially she was perplexed but then told us how she was running through the forest, how dry twigs scratched her face and hands, and she could hardly walk in the snow, but finally saw a young man with a blue face, he was very young, around 20 years old. She braced herself, it was the first time in her life, such 'baptism of fire', and she did everything possible to bring him back to his senses.

Olexander Babrauskas, a social worker:

Our drug scene is open, and the number of overdose cases is unfortunately growing. And we, as social workers, work with the users and with those who are 'bottling' drugs. We conduct mini-trainings on the routes, trainings at the premises of our foundation. We talk about what an overdose is, about Naloxone, explain how to recognize an overdose, give information about stimulants, factors that may cause an overdose, and about first aid methods. We show how to provide the first aid, how to call an ambulance, what exactly to say and what intonations to use. We tell how to behave with policemen and health care workers. We have recently found out that even Gypsies who sell drugs now have Naloxone. I don't know where they get it, but they do have it. People buy it from them and inject it right there, so they have also learnt that it is effective.

We have clients who live in a temporary residential house for people who have problems with documents. There are many drug users there, so we organized activities aimed at preventing overdose, and involved volunteers and a local paramedic. So, we gradually educate our clients.

Distance Training of Social Workers

In the end of 2009, distance training of social and outreach workers was launched. It received great positive feedback from people working in the area of HIV. The materials developed helped project managers and heads of organizations organize the process of training for their employees more efficiently and to provide them with a basic level of knowledge.

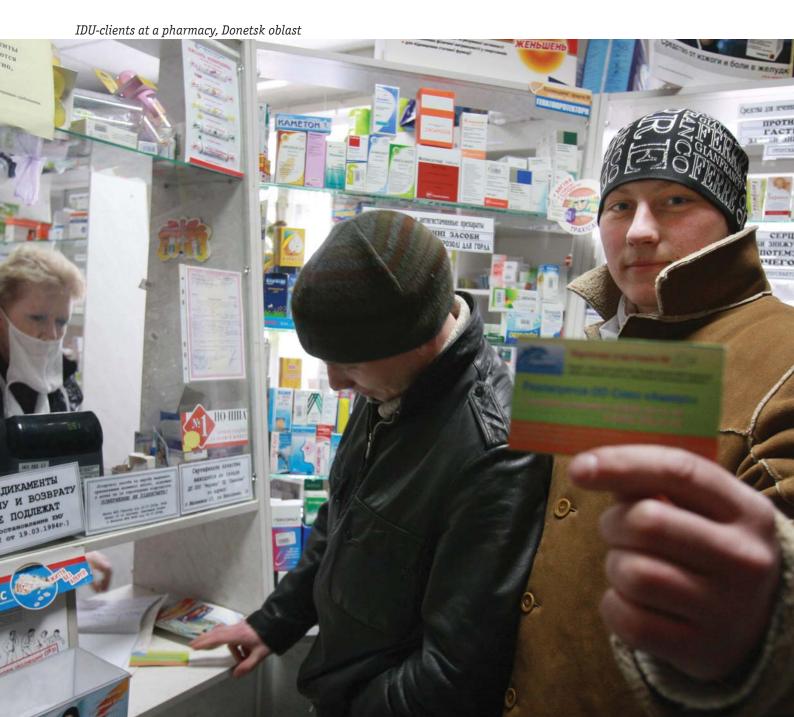
In 2010, there were 17 classes developed, followed by test questions and literature for home reading. Success and efficacy of this project encouraged preparation of a separate publication. The manual is planned to be published in the first six months of 2011.

5.1.3. Pharmacy-Based HIV/AIDS Prevention in Vulnerable Populations

In 2010, pharmacy-based prevention services for IDUs continued to be provided. Every year the number of pharmacies providing services to clients in syringe exchange projects is growing and new regions are joining. If in the beginning of 2010 the project involved 111 pharmacies, at the end of the year already 123 pharmacies worked in this area (32% municipal and 68% private pharmacies) in cooperation with 25 NGOs in 13 regions of Ukraine.

The standard package for the target audience (IDUs and CSWs) includes free distribution/exchange of syringes, distribution of alcohol swabs, condoms, IEC materials, referral to NGO and health care facilities to have rapid tests for HIV and STIs, and delivery of additional services. An important component of the pharmacy-based project is the opportunity to involve clients into the program directly in the pharmacy.

Thanks to the activities in this area, within a year, over 9.4% of the total number of new clients of Alliance Ukraine prevention programs were involved in harm reduction programs through pharmacies.



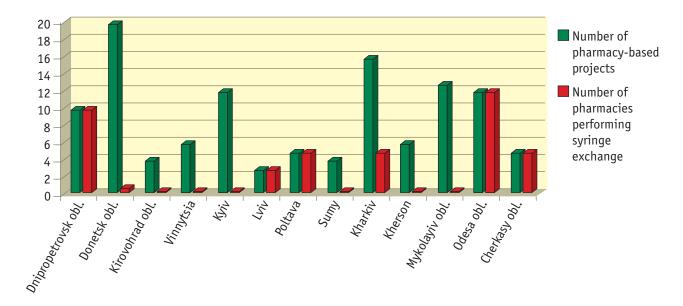
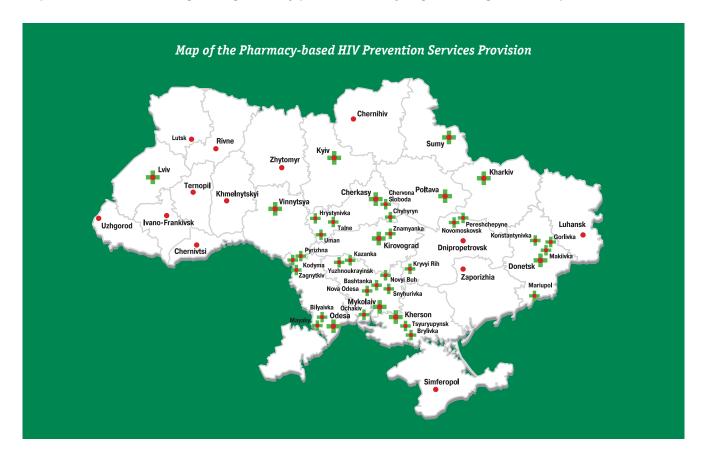


Diagram 7. Geography of pharmacy project and syringe exchange

Pharmacy-based prevention services covered 25,205 clients (including 24,829 IDUs and 363 CSWs), who paid over 346,600 visits to the pharmacies.

Unfortunately, implementation of the project is beset with certain obstacles. Difficulties introducing pharmacy-based syringe exchange still exist due to the lack of regulatory documents at the national level. Order of the MOH of Ukraine No. 56 dd. 03.02.2009 "On organization of a pilot project to exchange used syringes" had a local character and permitted exchanging syringes in a limited number of pharmacies, without regulating the very procedure for syringe exchange in these pharmacies. That is



why today only 37 pharmacies in 7 regions of Ukraine, where NGOs conducted advocacy activities and received permission from local and oblast sanitary and epidemiological stations, perform exchange of used syringes. Inside the pharmacies there are special containers, where IDUs put their used needles and syringes themselves and inform pharmacy workers about their number. Removal of full containers and their transportation to the places of further waste management is ensured by social workers of NGOs cooperating with pharmacies within this project.

A series of three 2-day training seminars for managers and workers of new pharmacies that joined the prevention activities in the new project year, and one 3-day training of trainers of knowledge hubs were conducted in October 2010 in Odesa. Thanks to this, regular training for pharmacy workers was organized at the regional training seminars conducted in these knowledge hubs to ensure the pharmacy project's sustainability.

On the eve of Pharmacy Workers Day, September 14, 2010, a press tour was organized for journalists of national TV channels and printed media to Kryvyi Rih, where HIV prevention activities of pharmacies aimed at vulnerable groups (IDUs and CSWs) was presented.

On September 15–17, 2010, a presentation "Pharmacy-Based Prevention Services Aimed at most-at-risk populations in Ukraine" was given in Kharkiv at the panel session of the VII National Congress of Pharmacists of Ukraine.

Ukraine's experience in HIV/AIDS prevention among vulnerable groups through a pharmacy network is disseminated through publications and participation in national pharmaceutical and international conferences. In July 2010, a delegation from Belarus with representatives of national enterprise "Belpharmatsia", managers of Minsk pharmacies and NGOs visited Ukraine to study experience of the pharmacy-based project implementation and prospects for its scale-up.

5.1.4. A Study: "Evaluation of the Models of Secondary Exchange of Injecting Equipment among Hard-to-Reach Groups of IDUs"

This study was aimed at studying the characteristics of organizing and managing the secondary exchange of injecting equipment. The study covered 6 cities of Ukraine — Chernivtsi, Zaporizhya, Lviv, Kyiv, Simferopol, and Sloviansk (Donetsk oblast). Participants of the study included social workers and volunteers who were implementing secondary exchange and IDUs who used those services.

Research results demonstrated that most volunteers of secondary exchange programs were male. The share of females among the volunteers varied from 0% (Chernivtsi) to 40% (Lviv). The number of secondary exchange sites varied from 4 (Lviv and Chernivtsi) to 90 (Kyiv). 70–90 percent of all interviewed IDUs were regular clients of secondary exchange services. On the average one volunteer covers 8–9 IDUs in one visit to a secondary exchange site. As a rule, they are permanent clients of this volunteer and represent his close environment. 63% of the interviewed IDUs visit secondary exchange sites 2–3 times a week (on the average).

An instruction was developed based on the study's findings to introduce the secondary exchange in civil society organizations.

5.2. Prevention Activities among Commercial Sex Workers (CSWs)

5.2.1. Comprehensive Package of Services

In grant year 2009–2010, within the area "Prevention of HIV Infection among Commercial Sex Workers (CSWs)", Alliance Ukraine provided support to 41 NGOs in 23 regions of Ukraine. Comprehensive prevention, medical and social services were provided to 26,452 commercial sex workers, which constituted 36.5% of the estimated number of CSWs in the country. The services were provided with support from the Global Fund to Fight AIDS, Tuberculosis and Malaria, as well as within a grant from the US Agency for International Development (USAID). In October 2010, already 47 civil society organizations in 27 regions of Ukraine continued these activities, having thus covered all regions of Ukraine with prevention programs aimed at CSWs.

Each project aimed at providing a comprehensive package of HIV prevention services for CSWs includes the following services:

• distribution of condoms (male and/or female), lubricants, antiseptics, pregnancy test-kits, other personal hygiene products and disinfectants;





- syringe exchange or distribution of clean syringes among CSWs who inject drugs;
- distribution of IEC materials aimed at reducing risky behaviors, HIV and STI prevention, materials with contact information of health care facilities cooperating with NGOs;
- peer counseling;
- consultations with specialists (psychologists, lawyers, physicians based on the defined client's needs);
- counseling on HIV and STI prevention, on harm reduction related to drugs or alcohol use in order to reduce risky sexual behaviors;
- organization of self-help groups, psychological support groups and trainings on development of less risky behavior skills;
- targeted clients' referral to other specialized projects or organizations;
- voluntary counseling and testing for HIV and STI diagnostic with rapid tests at a community center, stationary or mobile site, mobile clinic or through outreach workers);
- referral for STI treatment.

Depending on the defined needs of CSWs, organizations can also provide additional services within the project (often within harm reduction community centers). Such services may include:

- vocational training and employment;
- training in massage, cosmetology, nutrition, and providing first pre-medical aid, using computer, etc.;
- informational and educational activities;
- temporary care for children and help in placing children in kindergartens;
- cosmetologist's, hairdresser's services;
- sewing and needlework courses;
- basic household services: shower, laundry, ironing, etc.;
- tea and snacks;
- social and leisure activities;
- humanitarian aid, etc.



Personal Story of a Program Client (CF "Public Health", Kryvyi Rih)

I really want to share my life story. Maybe, it can become the straws at which people will grasp at during the toughest moments of their lives.

For the most part of my not so long life I believed that drugs were the sense and the essence of my existence. I could not live without them, did not have any other interests, goals or wishes. Life with no drugs was of a thick grey color. Everything was about the one thing — to inject — at any cost. Even at the cost of selling my body. People who never exchanged sex for money think that this money is easy. I assure you it is not. By selling my body I've lost my soul, because my personality shrank with every new client. I stopped feeling, crying, laughing, being afraid. I was a robot in a female body. Though, even my face, perhaps, was not like a female face. I lived in such a nightmare for several years. During this time I learned that I have HIV and the wish to fight for life was getting even smaller.

One time, when a mobile clinic of Public Health came to us to the belt highway (where 'highway' girls work), it was equipped with a gynecological chair, and a social worker Oleg convinced me to get examined by a gynecologist. He found out that I was pregnant. It was the happiest day of my life. Now I had somebody for whom my life was worth living! Of course, I had many questions. Do I have a chance

to give birth to a healthy child? What is needed for it? How will Caesarean section affect my health?

I would perhaps get lost in this unawareness, if there was no permanent communication with the social workers Halia and Sasha. They answered my questions personally, by phone, in the day and evening time and in a couple of cases in the middle of the night. They told me where I could find help and explained my rights to me. And they never refused to help me, they never left me alone with my fears, they never told me that I was annoying. I make a low bow to you for your patience!

Now I have a wonderful sonny. I love him more than anything in the world. For me, as a mother, the most important thing is that my baby is healthy. He does not have HIV.

Today I have an incentive to live and have the goal to bring up my son, and I will do everything I can so that he would never be ashamed of his mother.

Charity Fund "Public Health" supported by Alliance Ukraine (within the Global Fund program) is implementing the project "The Road of Life: Provision of Expanded Package of Services to IDUs, Stimulant Users, and FSWs in Kryvyi Rih).

5.2.2. Mobilization of CSWs Community as a Way to Ensure Efficiency of Prevention Activities

In 2010, the Charity Self-Established Organization of Sex Workers League "Legalife", supported by Alliance Ukraine, launched the project "Developing to Achieve the Goal" in the area "Mobilization and building capacity of communities vulnerable to HIV". The project includes provision of support and organizational capacity building of initiative groups and organizations of CSWs to create a favorable environment for prevention, care and scaling up support services -up among this target group and to increase the level of involvement of this community into development, implementation and evaluation of prevention programs.

In 2010, the League "Legalife" supported the activities of 10 initiative FSWs groups in 10 cities of Ukraine within leadership trainings, development of IEC materials for sex workers and provision of consultations on organizational development. On July 17-23, 2010, representatives of the League "Legalife" participated in the XVIII International AIDS Conference and presented a video on advocacy and protection of FSWs rights.

On December 17, 2010 in Kyiv, the League "Legalife", supported by the International HIV/AIDS Alliance in Ukraine, organized a fourth press conference devoted to the International Day to End Violence against Sex Workers on the topics of human rights observance of human rights of and tolerance towards female sex workers. Flash mobs and rallies with red umbrellas (a traditional symbol of female sex workers protection) were held in Kyiv, Kirovohrad and Vinnytsia on that day.

5.2.3. Innovative Approaches to Prevention among CSWs

Peer Driven Interventions for Female Sex Workers (FSWs)

In June 2010, several pilot projects on HIV/STI prevention among FSWs, based on the Peer Driven Interventions (PDI) model, came to an end. They were implemented by th All-Ukrainian charitable organization "Convictus Ukraine" (Kyiv) and charitable fund "Hope and Salvation" (Simferopol). Approximately 1,000 FSWs, who previously did not receive prevention services, got involved into the projects only within a 6-month project period. They received high-quality counseling and training on issues of reproductive health, less risky sexual behavior, and prevention of HIV, hepatitis and other STIs; clients were also referred to appropriate health care specialists as necessary.

Unlike traditional prevention programs, the PDI model rests upon the principle of involvement and training of new clients by FSWs themselves through the use of existing networks. As a result, implementers of pilot projects were able to gain access to new target subgroups of FSWs, learned about the peculiarities of the sex business in their respective cities, and studied factors that affect clients' risky behavior. In addition, it became possible to identify the needs of target group representatives in prevention and socio-medical services, as well as to improve the quality of counseling and training, offered to FSWs within the projects.

Starting in March 2011, the projects for FSWs, based on the Peer Driven Interventions model, will be implemented in seven other regions of Ukraine, thus allowing significant scaling-up of coverage of new FSWs with prevention services.

Personal experience of CF "Hope and Salvation" (Simferopol) client

My name is Natalya. I came to Simferopol about ten years ago from a remote Crimean district; I entered a college and moved into a dormitory. During my student years I had a lot of sexual partners, and sometimes used drugs.

After graduation I got married and became pregnant. During that period I became aware I had HIV. My husband left me, apparently he was HIV-negative and could not accept my diagnosis. He told me that he did not want a sick wife. Fortunately, my baby was born healthy, but my life changed drastically. I accepted any job offers and started providing sex services for money. Of course, I never told the clients about my HIV status and agreed to have sex without condoms for additional money. I tried not to think about the consequences.

One day my friend called me and asked me to accompany her to CF "Hope and Salvation" office; she told me that there we could get condoms, lubricants and wipes for free, and could even win some prizes. We met and she gave me the details: we had to participate in an interview and answer several questions about HIV/AIDS. At that moment I panicked because I had to confess I provided sex services. Moreover, I did not want to tell anyone about my HIV

status. Eventually, my friend persuaded me to come along; on our way there she gave me some facts about HIV and passed a numbered coupon.

The interview went quite smoothly, this girl was writing down my answers, and then she told me about HIV/AIDS and other sexually transmitted infections. My entire life reeled before my eyes, I've been putting myself at risk for so many years! At that moment I made a firm decision to quit risking my health and to begin therapy some time later. Well, I had a growing child! I passed my new knowledge to some friends, taught three girls and gave them my coupons. I also shared my lottery tickets and participated in three prize draws. Every time I got something! Nowadays I visit the fund's office a couple of times a month and pick up condoms, wipes, brochures and magazines. Today my friends and acquaintances ask me questions about HIV, and if I don't know something, I can call the fund and get necessary consultations from the staff. It is so nice to feel support and to be useful to other people!

Charitable Fund "Hope and Salvation" currently implements the project "Together towards Healthy Future" supported by Alliance Ukraine within the Global Fund program. Female Condoms: A Woman's Choice

During 2010, practical implementation of prevention activities aimed at CSWs through distribution of female condoms (femidoms) as an additional method of barrier contraception and HIV/STI prevention was launched within the framework of the program funded within Round 6 grant of the Global Fund to Fight AIDS, Tuberculosis and Malaria.

In March-September 2010, about 20 regional non-governmental organizations (Alliance Ukraine partners) started disseminating female condoms among CSWs during counseling sessions on sexual and reproductive health and prevention of risks of HIV/STI infection among CSWs and their partners.

In October-November 2010, 37 social and outreach workers of the projects for sex workers acquired skills and knowledge at the trainings "Reproductive health and peculiarities of the use of female condoms: a woman's choice". During the trainings they discussed issues of sexual and reproductive health of men and women, types of contraception, abortions, STIs, and types of condoms (including femidoms). Special attention was given to strategies of motivating FSWs and their sexual partners to use female condoms as a reliable method of contraception and HIV/STI prevention.

Beginning from October 1, 2010, 37 regional NGOs started distributing female condoms and providing counseling along outreach routes during the work of mobile outpatient clinics and in the course of information and educational events at community centers.

Operational Research: Assessment of Introducing Pilot Projects "Improved Efficiency of Prevention Programs for Sex Workers through Introduction of Female Condoms (Femidoms)"

Aim of study: to identify specific patterns of femidom use in sexual practices of FSWs and their clients, and to determine key obstacles to femidom use in prevention work with FSWs. A total of 600 FSWs and their 229 clients participated in the study.

Research findings demonstrated that female sex workers used femidoms most frequently with their permanent commercial clients (68%) as compared to casual ones. The majority of surveyed FSWs (77%) and their clients (76%) expressed their intention to use female condoms in the future. The main reasons for both FSWs and their clients to

use femidoms include reliable protection against HIV and STIs (54% and 38%, respectively); strength of the material of which femidoms are made (36% of FSWs and 26% of their clients); as well as interest towards the new method of contraception (32% of FSWs and 38% of their clients). Around half of the surveyed FSWs indicated that the use of femidom makes them feel more confident and protected.

The key problems of the use of femidoms are related to the lack of skills to correctly use female condoms. Research findings also revealed the need to conduct trainings for FSWs on client motivation and femidom use skills.

Prevention of Violence against FSWs as a Component of HIV/STI Prevention

Violence is one of the factors that increase the risk of HIV, especially among female sex workers who become particularly vulnerable considering the specifics of their work. Along with stigma and discrimination, this factor creates obstacles to effective prevention services by limiting access and by denying any opportunities for FSWs to assert their rights and to voice their needs in health services. Therefore, it is planned to mainstream the violence prevention component in the activities of prevention projects.

On November 2–5, 2010, a training of trainers called Strategies of Violence Prevention and Protected Sex Work was conducted with the support of Alliance Ukraine within the Project "Scaling Up the National Response to HIV/AIDS Epidemic through Information and Services" (SUNRISE) supported by the U.S. Agency for International Development (USAID). Training participants learned about violence prevention programs in Germany (trainers Markus Klein and Claudia Fischer-Czech, German NGO "Connect



At the outreach route, Odesa, Civic Movement "Faith. Hope. Love"

Plus") and in other countries of Western Europe; reviewed Ukrainian legislation on prostitution and regulations on provision of social and prevention services to individuals involved in commercial sex; they also discussed strategies of work with FSWs aimed at preventing violence and decreasing the risks of sex work. Peculiarities of FSWs counseling on these issues were also considered during the training.

A Personal Success Story

ACO "Convictus Ukraine", Kyiv

I used to have a family, and everything was great until my husband died and I was left alone with a little baby. I could not find any solutions other than getting involved in the sex business. It has gone on for three years already. This "business" is very hard; abuse and humiliation from the clients' side, problems with the baby, health problems... I was terrified by the thought that I could already have HIV... In order to subdue my negative feelings, I started drinking. First, just a little bit, and then more heavily and frequently.

One day when I was at work a girl came up to me. She introduced herself as a social worker from the organization called Convictus. We talked, and I got information about the community center; I also received condoms and several booklets. But the main thing I learned was an opportunity for me to get tested for HIV, quickly and free of charge. This is how I got acquainted with "Convictus". In a couple of days when I came to their office two very nice girls greeted me there. I knew one of them as this was the girl I talked to at the highway. Testing was my greatest concern. In many ways it was a big day! I learned that I did not have HIV! This literally loaded off my mind. In addition, social workers instructed me on how to make my work less risky and invited to come over again.

This meeting in the office was so pleasant and useful that I started visiting "Convictus" more and more often. After several meetings one of the social workers told me about "social follow-up", comprehensive support aimed at improving the quality of my life. I did not trust her at first,

but the idea was interesting. Another positive thing was that they never promised me the moon but I felt they would do all their best to help me. So I took the risk, and things in my life started changing! These changes were not as rapid as I hoped, but I can feel them now and I'm proud of them! Together with a psychologist I have learned to discover my inner-self and to address various painful personal issues; I visited an infectious disease specialist and started relevant treatment. Currently I'm mastering the use of a computer since it is impossible to find a job without computer skills. Today I have all the necessary knowledge about HIV and other diseases that can put my health at risk. I also visit an art studio on a regular basis. During all these meetings my mind and soul "take a rest", I simply talk to girls and get away from my everyday problems and troubles. Drawing a picture or making a toy for my child with my own hands helps me bring my feelings in order, relax, calm down and enjoy the creative process.

I know for sure, if something goes wrong, I can always come to the girls in this organization, and they will help me without prejudice, blame or disgust! They accept for who I am, and this makes my world better. I still cannot quit the sex business, but I hope to someday. Now, after meeting the girls from "Convictus", I started living a better life... and hope for the best!

All-Ukrainian Charitable Organization "Convictus Ukraine" currently implements the project "A Step Towards" supported by Alliance Ukraine within the program funded by the Global Fund.

5.3. Prevention among

Men Who have Sex with Men (MSM)

5.3.1. Comprehensive Package of Services

The share of men who have sex with men (MSM) covered with the comprehensive package of HIV prevention services in the past 12 months is 18.9% (or 18,203 individuals) of their estimated number. In the last 6 months 4,049 new MSM were involved in the program.

During 2010, ICF "International HIV/AIDS Alliance in Ukraine" has supported prevention interventions among MSM implemented by 19 non-governmental organizations in 11 oblasts of Ukraine (Dnipropetrovsk, Donetsk, Zaporizhya, Lviv, Mykolayiv, Odesa, Kharkiv, Kherson, Khmelnytskyi, Cherkasy, and Chernivtsi) as well as in the cities of Kyiv and Sevastopol and the Autonomous Republic of Crimea.

The projects provided the following key services:

- distribution of condoms and lubricants on outreach routes;
- group and individual counseling on safe behavior, HIV/AIDS and STIs;
- trainings aimed at developing safe behaviors, including motivation towards the use of condoms and lubricants;
- voluntary counseling and rapid testing for HIV; STI testing and treatment;
- dissemination of IEC materials;
- organization of self-help groups; individual and group psychological counseling;
- peer counseling;
- referrals to services provided by partner organizations;
- dissemination of information in communities about the available services.

During 2010, 7,644 MSM were tested for HIV with rapid tests, and 8,494 were tested for STIs (syphilis, gonorrhoea, Chlamydia). This year, for the first time, clients had an opportunity to get tested for HBV and HCV within HIV prevention projects for MSM. Thus, 2,167 tests for HBV and 274 tests for HCV were performed. Moreover, 238 project clients received vaccination against hepatitis B.

During 2010, Alliance Ukraine implemented a number of activities to improve the quality of project services, to reduce stigma and discrimination of MSM, and to mobilize the lesbian, gay, bisexual and transgender (LGBT) community. For example, the following events were conducted:

 two trainings "Voluntary HIV Counseling and Testing of MSM" for doctors, nurses and social workers working with MSM;



- two trainings on safer sexual behavior "Safe Sex: a Candid Conversation" for social and outreach workers. The topic of this training always produces lively interest among the participants: as it was noted by one of the participants in his training evaluation sheet, "it was the best training I have visited lately";
- two training workshops on "Addressing Stigma and Discrimination" for heads of NGOs, LGBT community leaders, social workers, and lawyers;
- training of trainers on building outreach teams in HIV prevention projects for MSM. 12 new trainers were trained to be able to conduct further trainings at the regional level at knowledge hubs;
- training on implementation of the Mentor Support Program. Representatives of four organizations from Donetsk, Odesa and Dnipropetrovsk oblasts and from the city of Kyiv participated in this event.

Overall, more than 140 individuals participated in the trainings.

A Personal Success Story of a Client of NGO "Partner"

After I realized that I was gay, there was no one to answer hundreds of guestions buzzing in my mind. I actually did not know where to seek advice, I was just drifting, sometimes winning and sometimes losing. There were many things I was afraid of and many things I just did not understand... I found new acquaintances, friends, sexual partners... A friend is a person with whom I could share everything and entrust things, and who would do the same for me. The beginning was standard – we found each other in one online dating service and then had several meetings in person... All of a sudden he disappeared, he did not answer calls and did not visit me. Some time later he suddenly showed up again, but refused to tell what had happened to him. Eventually he confessed he had HIV. I was shocked: I did not know what to do! I was scared as I knew nothing about it. I was afraid and just left him...

It was a betrayal from my side. I realized it but could do nothing with myself. I was even afraid to stand close to him. I thought I could be infected, too.

Some friends told me about visits made by a mobile outpatient clinic, where one could get tested for HIV. I



went there, expecting the worst... But after the doctor told me I was negative, something went upside down inside me – not because I was healthy, but because I killed our friendship... true friendship! After consultations with the doctor about HIV I understood that I was wrong, that I knew nothing about it. I decided to get more details from social workers, who come to our town from Odesa. They answered all my questions and helped me deal with my internal questions. After that we met on numerous occasions.

I asked my friend for forgiveness – he understood everything and forgave me, and now it seems we became even closer. I am not afraid anymore and I know where to seek answers to my questions. I am grateful to those guys at "Partner" NGO for their help and attention. Such people like me now have a place to go! Thank you very much!

Youth Public Movement "Partner" currently implements the project "HIV/STI Prevention among MSM and Prisoners in the city of Odesa and in Odesa Oblast" supported by Alliance Ukraine within the program funded by the Global Fund.

5.3.2. Knowledge Sharing and Strategic Planning

The Third National Conference of LGBT Movement and MSM Servicing Organizations in Ukraine

The Third National Conference of LGBT Movement and MSM Servicing Organizations of Ukraine "Strategy and Unity" was held on June 25–27, 2010.

Sponsors and organizers of the Conference included ICF "International HIV/AIDS Alliance in Ukraine", All-Ukrainian NGO "Gay-Alliance Ukraine", Standing Reference Group on LGBT Community and MSM Projects in Ukraine, Mykolayiv Association of Gay, Lesbian and Bisexual People "LiGA" as well as the representative office of Project HOPE — The People-to-People Health Foundation, Inc. in Ukraine.

The Conference brought together over 80 leaders and representatives of LGBT organizations, initiative groups, MSM servicing and other informal LGBT associations from 25 cities of Ukraine. This year there have been significant qualitative and quantitative changes in representation of the Conference, so that the interests of each region were presented in a better way.

The goal of the conference was to create conditions for knowledge sharing among the actors of the LGBT movement in Ukraine, to approximate their views on the most urgent issues of LGBT movement, and to improve service provision with regard to HIV/STI prevention for MSM and further mobilization of LGBT community.

During the 3-day conference its participants delivered presentations dedicated to results of studies among MSM and LGBT community representatives, various events in LGBT community, new prevention projects in Ukraine, publications on LGBT-related topics. In addition, reports on violation of LGBT rights were presented. Participants also took part in master classes and workshops on methods and approaches to HIV/AIDS/STI prevention, psychological support, creation of an encouraging LGBT environment, and establishment of community centers.

Study Tour to Germany

In June 2010, 14 LGBT community leaders and representatives of NGOs implementing HIV prevention projects among MSM participated in a study tour to Germany. During this tour the participants met the head of HIV/AIDS Prevention Department of the Federal Ministry of Health of Germany and visited a number of organizations working to protect the rights of LGBT community, prevent the spread of HIV, undertake studies, develop IEC materials, and issue periodic publications. Participants had a chance to visit the Robert Koch Institute of Epidemiology. This year's study tour was organized with the support of and in close cooperation with the German AIDS Help (Deutsche AIDS-Hilfe) agency and ICF "International HIV/AIDS Alliance in Ukraine". It was the third annual study tour. During such trips participants have an opportunity to directly observe the work of partner organizations in other countries and to adopt their experience, methods and approaches. Study tours typically result in the introduction of innovative approaches in preventing HIV among MSM in Ukraine.

Strategic Planning

An expanded meeting of representatives of NGOs, government bodies and stakeholders for strategic planning of activities aimed at responding to the HIV/AIDS epidemic among MSM for 2011 (IV National Strategic Planning for MSM Service and LGBT Movement in Ukraine) was held on December 6–8, 2010 in Kyiv (President Hotel). The meeting was organized within the framework of "Scaling Up the National Response to HIV/AIDS through Information and Services" (USAID Project) and "Support for HIV and AIDS Prevention, Treatment and Care for Most Vulnerable populations in Ukraine" (GF Project) implemented by ICF "International HIV/AIDS Alliance in Ukraine".

For the first time ever planning activities were organized in the form of an expanded meeting with participation of government structures and key international partners. Most of the operating LGBT and MSM service organizations in Ukraine participated in the meeting.

Involvement of a wide range of stakeholders into the dialogue regarding MSM/LGBT issues was a particular success of the meeting. For example, such officials as the Head of the Healthy Life Style Development Section of the Ministry of Family, Youth and Sports of Ukraine, the leading epidemiologist of the Ukrainian AIDS Center, 5 representatives of the Ministry of Internal Affairs of Ukraine, UNAIDS Country Coordinator in Ukraine, Legal and Policy Advisor of UNDP Ukraine, representative of USAID Regional Mission to Ukraine, Moldova and Belarus and other reference experts participated in the meeting. Overall, the planning meeting brought together 62 participants.

During three working days the participants carried out a systemic review of the situation in LGBT/MSM environment, presented key achievements of 2010, identified main areas of work for the next year, shared their views and thoughts on the urgent issues of LGBT movement and MSM service, discussed problems pertaining to the introduction of a Single Client Registration System, and discussed implementation of innovative approaches in HIV prevention among MSM.

The meeting was organized by ICF "International HIV/AIDS Alliance in Ukraine" and the Standing Reference Group on LGBT Community and MSM Projects in Ukraine (SRG-Ukraine).



SRG-Ukraine

8 meetings of the Standing Reference Group on LGBT Community and MSM Projects in Ukraine were organized and held with support of Alliance Ukraine and other donor organizations.

Success Story of the NGO "Open Door", Nikopol, Dnipropetrovsk oblast

Our organization implements the "Center for Integrated MSM Support in the city of Nikopol" project. It is our first project in this area, but feedback from the target audience regarding the project's usefulness to MSM in our city is surprisingly positive.

The project was launched on May 1, 2010. Within this initiative we did our best to raise general public awareness and to inform the target group about our activities. The problem is that the lives of MSM in a small Ukrainian town are much different from MSM's lives in metropolises. In many cases people are simply not familiar with the notion of "qay". All topics of this kind are kept secret; they are not even discussed between sexual partners. Most MSM conceal their sexual preferences all their lives, because if their neighbors, relatives or friends learn about their "unconventional" orientation, their lives may turn into hell. That is why one of the most important things that we did for MSM was to give them the opportunity to communicate with each other without fear, to be who they are, speak about their orientation without being afraid, and the last, but not the least - to discuss and address their problems. But the road to achieving the final results was difficult and lasted for several months, especially considering the fact that it was our first project.

Our social workers met target group representatives on outreach routes; they told them about our organization and

its services, disseminated IEC materials (booklets, brochures), condoms and lubricants. This way, social workers motivated potential clients towards behavioral change and safer sexual behaviors. In time we built trusting relations and established close contacts with MSM.

Project participants started coming to our office to participate in self-help groups, receive VCT services. We organized information sessions for the project clients in order to improve their knowledge and skills regarding safer sexual behaviors and ways of HIV and STI transmission. The clients have access to STI specialist consultations, to psychological and legal counseling. We also provide preand post-test counseling, and rapid testing for syphilis. During October-December 2010, a total of 21 project participants were tested for HIV and syphilis. Our community center is also operational. There, we organize weekly self-help groups for MSM. At these meetings our clients can discuss and receive a lot of valuable information. At the same time, project participants are welcomed at the center any time just to communicate with each other, to watch TV, to browse the Internet, to play ping-pong, chess, or other board games.

Thanks to this project, some people found new friends, some improved their knowledge. But the main achievement is that our clients started to care for their own and other people's health.

5.3.3. Mentor Support Program

From February through October 2010, the Youth Public Movement "Partner" implemented the pilot project "Mentor Support Program "MetroSafe" in Odesa". The goal of this project was to test innovative HIV prevention work with MSM, based on a mentor support program, to assess its effectiveness and to adapt it to Ukrainian conditions. The project was based on the "MetroSafe" program, developed and introduced by the London-based charity "Metro Center".

The Mentor Support Program is based on the long-term joint work of the Mentor (instructor), and Mentee (client). One mentor is working with one mentee for 4–5 months following 9 clearly structured modules: "Basic knowledge on Safer Sexual Behavior", "History Sharing", "Self-Esteem", "Drug and Alcohol Use", "Being gay", "Partnerships", "Facing the Issue", "Goal Building", and "Social Role and Responsibility". A special tool BASK (behavior, attitude, skills, and knowledge) was used to measure changes in each client's behavior, attitudes, skills, and knowledge. In the course of the pilot project, the implementers recorded challenges in project implementation, identified weak points that needed to be adapted to Ukrainian reality, and made the necessary adjustments to the program. To this end,

two focus groups were conducted separately with mentors and mentees, as well as interviews with the project coordinator and the project psychologist. All these measures contributed to better adaptation and improvement of the program for its further replication throughout Ukraine.

As a result, the pilot project was considered a success, and recommended for further replication throughout the territory of Ukraine. The mentor support project made a positive impact on both participating clients and mentors: this fact is confirmed by responses of those involved, and by the results of BASK questionnaire. According to the organization, another important outcome of the project was "the development of volunteer movement on the basis of YPM "Partner", which reinforced the project's success in 2010".

Operational Research "Assessment of Mechanisms of Involvement and Retention of IDUs, FSWs and MSM Clients in Harm Reduction Projects"

Research goal: to study the reasons why services of the HIV/AIDS prevention program are refused on a regular basis; to study ways of attracting and retaining IDUs, FSWs and MSM clients in harm reduction projects. The study covered the following cities: Kyiv, Sumy, Simferopol, Odesa, Zaporizhya, Kharkiv, Dnipropetrovsk, Donetsk, Lutsk, Znamyanka (Kirovohrad oblast), Vinnytsia, Kherson, Mykolayiv, Lviv, Khmelnytskyi, Cherkasy, Kryvyi Rih. The sample size was 1,414 respondents, including 715 IDUs, 472 FSWs, and 227 MSM.

According to the study's findings, 33% of surveyed clients (including 31% of IDUs, 37% of FSWs, and 30% of MSM) reported regular (at least once a month or more frequently) reception/use of prevention services, offered by harm reduction projects, in the course of at least one year. The share of new clients, that is, individuals who received prevention services only once, makes up 6% of all respondents. As for specific populations, the largest number of new clients is observed among FSWs (10%), and the fewest – among IDUs (3%).

Clients from the IDU population usually receive services in SEP settings and in NGO offices; MSM receive services at the organizations' offices, in community centers and along outreach routes. Taking into account mobility and specifics of work of FSWs, NGOs typically organize service provision in localities frequented by female sex workers, e.g. in places of their organized rest (near locations where they work) during pauses between clients, at venues of commercial sex provision (cafes, restaurants, highway motels, hotels, saunas, etc.)

Services that can help retain NGO clients in harm reduction projects generally include professional consultations of doctors and STI testing, provision of consumables (syringes, alcohol wipes and lubricants), as well as psychological counseling. In addition to these services, respondents from IDU and FSWs groups demonstrate an interest towards legal consultations and referrals to doctors and/or health facilities. MSM are interested in cultural events of a preventive nature, referrals, and in self-help groups. Speaking about additional health services, apart from professional medical counseling and STI testing, IDUs are interested in HBV and HCV diagnostics; FSWs - in STI treatment; and MSM seek diagnostics of HBV and HCV, as well as vaccination against hepatitis B.

In general, clients are interested in receiving free consumables and VCT services using rapid tests. The communication component is also important for MSM and IDUs, who would like to participate in self-help groups and club work (especially MSM).

5.4. Harm Reduction Programs in Penitentiary Institutions

In January–September 2010, a number of HIV prevention projects in the penitentiary system were implemented on sites by 21 non-governmental organizations under the coordination and general management of Alliance Ukraine. These projects covered 41 penitentiary institutions in 15 oblasts of Ukraine. Since October 1, 19 NGOs have been working in this area, covering 54 penitentiary facilities in 16 oblasts of Ukraine. Selection was based on bid call results within funding, provided by Alliance Ukraine in the framework of the grant of the Global Fund to Fight AIDS, Tuberculosis and Malaria.



Prevention work at a penal colony, Donetsk oblast

All the projects supported by Alliance based on results from an open call for proposals, offer the following services:

- Organization of informational trainings for the staff of penitentiary institutions on preventing HIV/AIDS/STI/hepatitis and basics of safe behavior practices.
- Training of volunteers among prisoners, followed by formal examination and issuance of a relevant certificate of a trained peer counselor.
- Peer work: counseling on safe behavior issues, prevention of HIV/AIDS/STI/hepatitis, development
 of communication skills to negotiate condom use with sexual partners, motivation of prisoners
 towards HIV/STI testing at the prison medical sanitary unit.
- Follow-up of prisoners in case of positive HIV test results: psychological and informational counseling; positive prevention; referral to care and support projects of AUCO "All-Ukrainian Network of PLWH".
- Dissemination of prevention tools through peer volunteers or medical units (e.g. condoms, toothbrushes, safety razors and other consumables and IEC materials) among socially insufficient prisoners and/or those who lost their social links,.
- Organization and holding of at least two prevention-oriented events, e.g. lectures, concerts on prevention topics, mass events dedicated to AIDS Memorial Day, World AIDS Day, etc.
- Organization of self-help or psychological support groups; psychological counseling.

• Organization of prevention activities in pre-trial detention centers (SIZO), including broadcasting of radio lectures on prevention of HIV/STI, hepatitis and tuberculosis; informational and educational work with adolescents; dissemination of IEC materials, hygienic kits, and condoms.

Additional services offered within the projects include:

- Dissemination of humanitarian aid.
- Art-therapy classes.
- Sports competitions.
- Club of Funny and Sharp-Witted (KVN) competitions and art contests.
- Theatrical performances on prevention-related topics.

The Project "Information, Counseling and Testing as a Basis for High-Quality HIV Services in Correctional Institutions of Ukraine", implemented by the AIDS Foundation East-West (AFEW) was completed on December 31, 2010. The goal of the project was to scale-up access of prisoners to IEC materials, HIV and STI testing with rapid tests as well as STI treatment. Within the project, a number of trainings on VCT were organized for 173 medical workers of the State Department of Ukraine for Enforcement of Sentences, and for 194 psychologists working in Ukrainian penitentiary institutions (9 trainings for each group). Three trainings on STI screening and diagnostics were conducted for 39 health professionals employed with penitentiary institutions. 6,961 prisoners were covered with prevention services; 5,000 prisoners were tested for HIV with rapid tests; 2,000 were tested for gonorrhoea, and another 2,000 — for Chlamydia. Nine different types of IEC materials were developed within the project.

5.5. HIV Prevention among Street Children

In its work with another vulnerable group — street children — Alliance Ukraine implements a comprehensive strategy, cooperating with various institutions and facilities (within the Global Fund program), and work directly in the streets through local NGOs and charitable organizations (SUNRISE project).

In 2010, the program partners in the service delivery area "Capacity Building of Programs for Street Children", as described in Ukraine's application to the Global Fund to Fight AIDS, Tuberculosis and Malaria, included the Ministry of Education and Science of Ukraine (MES), the Ministry of Family, Youth and Sports of Ukraine, and the Ministry of Internal Affairs of Ukraine (MIA). The Program in this service delivery area covers all of the country's territorial units, thus having a national focus.

Ukraine's grant application defines the target group in this service delivery area as children aged 10–18 years, especially vulnerable to HIV due to the specifics of their lifestyles and those living in government-funded institutions subordinated to the abovementioned Ministries.

Staff members of shelters and centers for social and psychological rehabilitation of children (Ministry of Family, Youth and Sports of Ukraine), schools and vocational schools for social rehabilitation

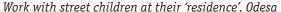
(Ministry of Education and Science of Ukraine), and reception centers for children (Ministry of Internal Affairs of Ukraine), as well as representatives of non-governmental organizations were systematically trained on prevention work methods with children in crisis, homeless and neglected children.

Prevention-oriented trainings for children that promote the development of life skills of safer behavior in all relevant institutions are organized and conducted by the specialists trained within the Program in 2007–2010.

During 2010, the Global Fund Program was the only source of funding of HIV/AIDS prevention initiatives for street children living in specialized state institutions for children as well as staff training; no funds from the state budget were allocated for this service delivery area.

By the end of the reporting period, the total number of specialists of the Services for Children, staff members of shelters and centers for social and psychological rehabilitation of children and officers of the Criminal Police for Juvenile Affairs in all oblasts of Ukraine, who completed training on HIV/AIDS prevention, is 564 persons. The number of inmates aged 10–18 years covered with prevention activities in the reporting period makes up 11,799 children.

The All-Ukrainian Working Meeting "Joint Activities Aimed at HIV Prevention among Children in Difficult Life Circumstances" was held on February 18–19, 2010 in Kyiv for directors of juvenile shelters of the Services for Children of oblast state administrations as well as Kyiv and Sevastopol city state administrations. This event was initiated by the Ministry of Family, Youth and Sports of Ukraine, and supported within the Program. It was dedicated to joint activities of Alliance and the Ministry in the area of HIV prevention among street children with analysis of achievements and gaps observed in





2009. The meeting participants also reviewed future prospects and tasks for 2010 and performed a comparative analysis of the joint work plan and its necessary measures.

In cooperation with the Department of Criminal Police for Juvenile Affairs of the Ministry of Internal Affairs of Ukraine, two training workshops "HIV/AIDS in the Environment of Street Children: Basic Knowledge about Prevention, Care and Support for the Officers of Criminal Police for Juvenile Affairs" were held for 44 service officers of the Department from all oblasts of Ukraine. Service officers who often contact children of crisis categories (e.g. substance users, children involved in sex business, children infected with HIV and hepatitis, etc.) received the first ever opportunity to receive systematic knowledge and to acquire practical skills of HIV/AIDS-related prevention and work with PLWH.

Upon the SUNRISE Project initiative, several projects for street children were launched in 2010 in the cities of Kyiv, Odesa, Donetsk, and Mykolayiv. The objectives of these projects are:

- To ensure provision of the required scope of prevention services where street children's reside;
- To provide VCT services;
- To ensure medical and social follow-up;
- To refer children to existing state health care facilities to receive necessary services, including Youth-Friendly Clinics (UNICEF);
- To refer children to governmental and non-governmental institutions providing social services to street and neglected children.

The project's target group includes street children, i.e. homeless and neglected children, children living on the street aged 10–18 years.

Within these projects a number of trainings were held for multidisciplinary teams, including "Specifics of Outreach Work with Street Children in Ukraine", "Organization of HIV/AIDS Prevention and Social Follow-up (Case Management) among Street Children", "Voluntary Counseling and Testing for HIV in the Environment of Street Children: Methodology and Peculiarities of Practical Application". Overall, 72 representatives of implementing NGOs and partners from multidisciplinary teams (doctors, nurses, psychologists, and lawyers) participated in the said trainings.

Client Coverage with Programs

- Coverage of street children with prevention-oriented classes on HIV since the beginning of the program supported by the Global Fund to Fight AIDS, Tuberculosis and Malaria has reached 40,598 persons.
- Within the SUNRISE Project services were provided to 1,759 children who live and work in the streets.



6. Diagnostics, Vaccination, Treatment and Procurement of Medications

6.1. Substitution Maintenance Therapy

As of January 1, 2011, 6,025 patients in 125 health care facilities in all 27 regions of Ukraine had access to substitution maintenance therapy (SMT). 5,200 of these patients received methadone-based SMT, and 825 patients received buprenorphine-based therapy. 45% of SMT patients are HIV-positive, while 814 patients on SMT also received ARV treatment (Diagram 7).

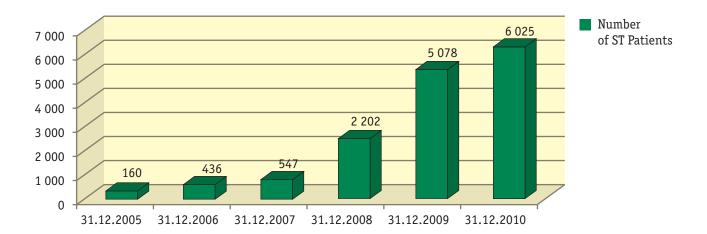
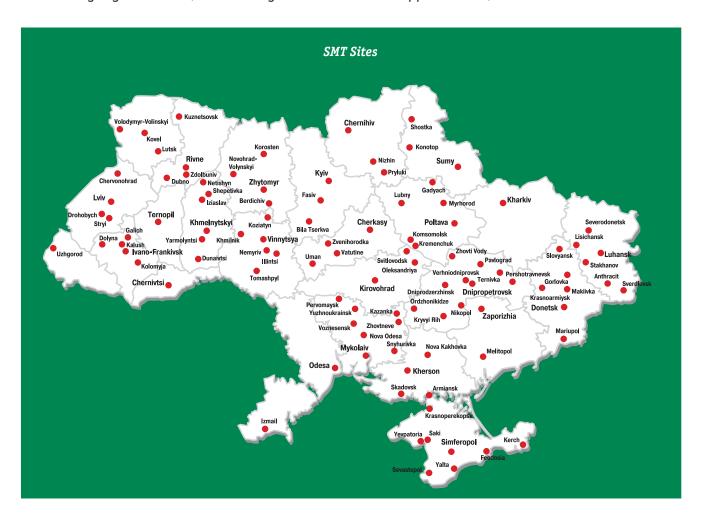


Diagram 7. Scaling up SMT in Ukraine in 2005-2010 with support of Alliance and other partner organizations

Experience gained in 2010 has shown that improved programmatic strategy introduced during Phase II of the Round 6 Grant (beginning from August 2009) and finalized at the end of 2010 was successful. As in previous years, key activity areas remain the same:

Ensuring organizational, methodological and scientific support of SMT;



- Provision of medical, psychological and social follow-up to SMT patients;
- Building capacity of health care facilities in terms of SMT introduction through improvement of their material and technical resources;
- Provision of SMT medications;



SMT site, Donetsk

- Improvement of regulatory environment for SMT introduction;
- SMT advocacy at the national level.

Within the component "Improvement of organizational, methodological and scientific support of SMT", Alliance continued its cooperation with the Kyiv NGO "Ukrainian Institute on Public Health Policy" (UIPHP). Priority attention is given to such issues as ensuring positive dynamics of scaling-up methadone- and burpenorphine-based therapy, overcoming regulatory obstacles towards rapid SMT scale-up, and establishing cooperation with health care facilities planning to launch substitution therapy services in the nearest future.

Alliance Ukraine remains committed to the strategy of having close cooperation with non-governmental organizations in the area of providing medical, psychological and social follow-up to SMT patients. Such support is currently provided by 34 NGOs working with 120 health care facilities.

The practice of integrated assistance to IDUs receiving SMT is implemented intensively in Ukraine. For example, there are already 8 centers of this kind working in Mykolayiv, Poltava, and Vinnytsia oblasts and in the Autonomous Republic of Crimea. Thanks to this model, clients of substitution maintenance therapy programs have access to both opioid dependence treatment and to a number of other health services, including diagnostics and treatment of HIV, TB and STIs. As of December 31, 2010, 900 patients in Ukraine were receiving such integrated assistance.

At the same time, the previous year revealed negative trends expanding, which undermines further progress of SMT. Among those are the growing pressure from law enforcement agencies on healthcare workers; the new government's lack of confidence in supporting previous commitments regarding SMT introduction; low interest in opening new SMT sites on the part of healthcare facility managers and medical workers at the local level.

6.2. STI Testing and Treatment

Starting from 2008 and through the end of 2010, a total of 315,201 STI tests were conducted among vulnerable groups. Since that time 24,834 STI treatment courses were provided to vulnerable groups;



clients made 110,091 visits to 14 mobile outpatient clinics that were procured by Alliance and continue their work in Ukraine.

From January 1 through December 31, 2010, the number of STI tests reached 131,647; the number of visits of most-at-risk groups to mobile clinics amounted to 53,454; and the number of initiated STI treatment courses was 10,845. The monthly number of treatment courses showed a twofold increase as compared to 2008.

Measures aimed at identifying and providing preventive treatment on sexually transmitted infections among most-at-risk populations are implemented locally by more than 100 non-governmental organizations (selected on a competitive basis) in cooperation with 97 health care facilities in all regions of Ukraine, with coordination and overall management of Alliance Ukraine. Key partners of Alliance in this area include leading national and international organizations that have extensive experience in the area of STI diagnostics and treatment, as well as state facilities and NGOs at the national and local level.

In order to scale-up access to diagnostics and preventive treatment of sexually transmitted infections by vulnerable groups, Alliance procured rapid test kits for STI testing, EIA testing equipment, lab tests and diagnostic media to diagnose STIs. Rapid tests for antibodies to HIV, EIA test kits for HIV (ELISA) and pregnancy tests were also procured. Medications for STI treatment in risk populations were delivered to health care facilities.

In 2010, in order to perform screening diagnostics in NGO and mobile clinic settings, combi test kits (for HIV, syphilis, HBV and HCV diagnostics) were introduced.

In 2010, Alliance Ukraine signed a grant agreement with the Ukrainian AIDS Center to supervise and monitor medications for STI treatment; it also supported activities of the Coordination Center on STI Diagnosis and Treatment in Risk Populations.

Development of draft Provisions on Mobile Outpatient Clinics by an expert group became an important aspect of further work in this area.

6.3. Pilot Project on HBV Vaccine Prophylaxis among Groups at Risk of HIV

Alliance Ukraine was encouraged to approbate vaccine prophylaxis of hepatitis B among risk groups as a component of harm reduction measures by the similarity of groups at risk of HIV infection and viral hepatitis in Ukraine, WHO recommendations regarding comprehensive package of HIV prevention services for IDUs and the best global practices for organizing country response to concentrated HIV epidemics, regulations of Ukrainian legislation regarding groups recommended for immunization as well as requests from partner NGOs.

With technical support from WHO, a pilot project on vaccine prophylaxis of HBV was developed in order to approbate measures of HBV prevention among IDUs and MSM within the framework of harm reduction projects or comprehensive assistance to these groups through screening diagnostics, vaccination and identification of the most effective way to implement these activities.



Pilot activities were implemented during the period from February through November 2010 and envisaged testing with rapid tests and vaccination against HBV in 5 NGOs from 4 regions of Ukraine: CF "Way Home" (Odesa), YPM "Partner" (Odesa), NGO "Gay-Alliance" (Kyiv), LGBT Association "LiGA" (Mykolayiv), and CA "Light of Hope" (Poltava). The main partners of the initiative among health care institutions were AIDS services: Odesa City AIDS Center in partnership with the City Clinic No. 20, City General Hospital No. 1, and City Clinical Hospital No. 10; Kyiv City AIDS Center in partnership with Outpatient Clinic of Family Medicine; City Clinic No. 5 (Mykolayiv); Poltava Oblast AIDS Center in partnership with Students Clinic. Global Fund to Fight AIDS, Tuberculosis and Malaria was the donor of the project.

The project was implemented in close cooperation with non-governmental organizations and healthcare facilities. Social workers of harm reduction and SMT projects (active promotion and use of IEC materials), as well as doctors (promotion during counseling and testing) were responsible for informing clients about the importance of vaccination. Specialists, invited by NGOs, performed testing with rapid tests in community centers, STI clinics, AIDS centers and health care facilities with immunization units. Vaccination was carried out in immunization rooms of the clinics by trained health care workers, following the "0-1-6" scheme. Both social and health care workers were responsible for follow-up with the clients.

As a result, 731 clients (481 IDUs and 250 MSM) received first vaccination; 707 of them (467 IDUs and 240 MSM) returned for a second vaccination; and third vaccination covered 695 clients (457 IDUs and 238 MSM) or 95% (95% and 95.2% correspondingly). There were 41 cases of refusals from revaccination (causes included poor health condition, relocation, hospitalization, no means of communication, and recommendations of friends). Therefore, implementers of this pilot project succeeded in reaching impressively high rates of immunization, which considerably exceeded the performance of similar projects in Western Europe (e.g. according to WHO data, the level of vaccination in Belgium with similar immunization scheme reached only 60%)*.

^{*} Hepatitis B vaccination for sex workers: do outreach programmes perform better? // R Mak, A Traen, M Claeyssens et al. Sex Transm Infect 2003; 79: 157–159

This project showed high levels of client satisfaction, and turned out to be very cost-effective by saving over USD 300,000, which would have been spent on future treatment (every dollar, invested in the pilot project, saved \$3).

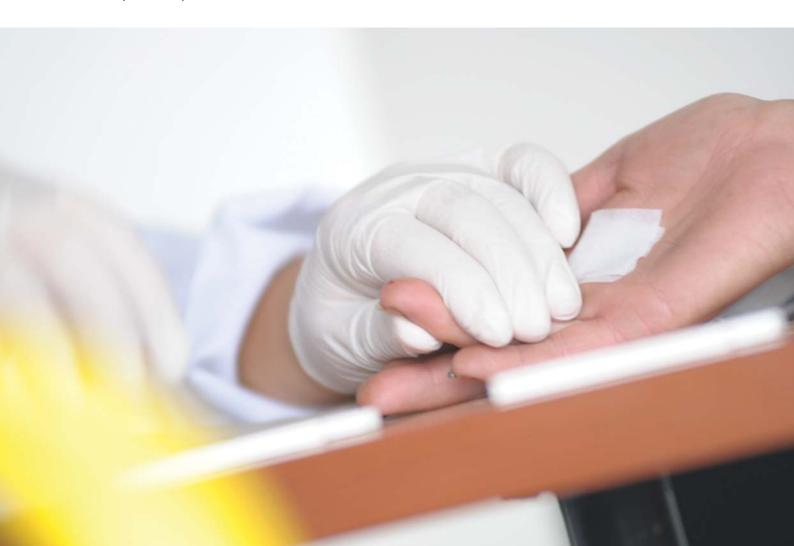
One of the downsides of this project was that a linked survey revealed a comparatively large percentage of those who thought they could care less about safety of their behaviors after the vaccination, as well as those who could not answer this question. Therefore, at the next stages of this project it is necessary to focus on counseling of social and health care workers regarding the consequences of risky sexual behaviors.

Taking into account the success of the pilot stage, a decision was made to scale-up the vaccination program in 2011 to 19 NGOs with planned coverage of 2,565 clients in 11 oblasts of Ukraine and in the cities of Kyiv and Sevastopol.

6.4. Procurement of Medical Products and Equipment

In 2010, Procurement and Supply Management Team of Alliance Ukraine continued rolling out plans to supply partner organizations throughout Ukraine with consumables. For example, during 2010, Alliance delivered 27.5 million male condoms. This number includes 12.6 million items received from USAID as humanitarian aid. These were generally delivered to projects working with IDUs and prisoners.

In order to support harm reduction projects, approximately 26 million syringes and the same amount of alcohol wipes were procured in 2010.



The Alliance-initiated project aimed at disseminating and promoting the use of female condoms (femidoms) by groups vulnerable to HIV, deserves particular attention. During 2010, almost all regions of Ukraine received 117,000 femidoms.

In addition to actual procurement and supply activities in 2010, a unit of Alliance Ukraine continued to analyze feedback of final recipients regarding previously procured commodities (condoms, lubricants, syringes, and so on). Results of this study, carried out in close cooperation with the staff of partner NGOs, will be used during the next rounds of tender procurement.

Price reduction strategy, based on the principle of holding a highly competitive procurement process, coupled with the grouping of needs and increasing the volume of purchases, resulted in substantial savings of Alliance's funds in 2010.

During 2010, Alliance continued to implement plans of uninterrupted and regular delivery of medications for substitution therapy according to schedules, developed by the MOH of Ukraine and oblast health care departments. Within the year, Alliance Ukraine delivered 79,276 packages of methadone hydrochloride to health care facilities all over Ukraine. Traditionally all deliveries were made on monthly basis.

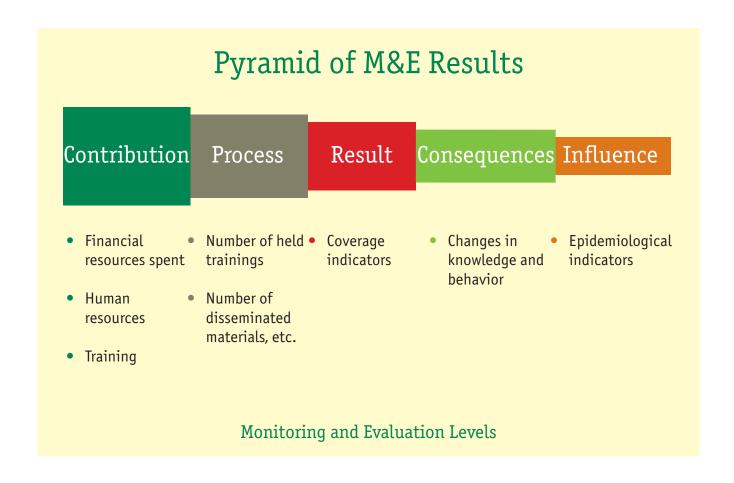
In the beginning of 2010, a tender process was organized for the purchase of an expanded range of rapid tests, namely for HIV, syphilis, gonorrhoea, Chlamydia, HBV and HCV, pregnancy tests, as well as new combi test kits for simultaneous diagnostics of 4 infections (HIV, syphilis, HBV and HCV) for the next two years of program implementation. Overall during 2010, Ukrainian NGOs received rapid test kits worth over UAH 2.4 million.

In order to ensure appropriate STI diagnostics among risk groups, five sets of equipment for enzyme immunoassay (EIA) testing with test-kits and reagents were procured and delivered to Ukrainian STI facilities.

In the framework of the Global Fund' Round 6 grant, Alliance Ukraine procured rapid tests for HIV, gonorrhoea and Chlamydia, as well as medications for STI treatment to support the implementation of the AFEW project "Information, Consultation and HIV-testing as a Basis for Quality HIV Services in Ukrainian Penitentiary Institutions". These commodities were handed over to the State Department of Ukraine for Enforcement of Sentences as a charitable donation.

To support the implementation of a pilot project on preventing the hepatitis B virus among most-at-risk groups, 2,325 doses of "Engerix" hepatitis B vaccine, manufactured by GlaxoSmithKline (Belgium), were procured and delivered to partner healthcare facilities in different regions of Ukraine.

Throughout 2010, the Procurement and Supply Management Unit of Alliance Ukraine took an active part in preparing for the future implementation of the Global Fund Round 9 project. The unit's specialists have carefully designed and planned the purchase of laboratory equipment and second-line drugs to treat multi-drug resistant TB for the sum of almost USD 6.8 million.



7. Monitoring and Evaluation

7.1. Development of National and Regional M&E Systems

In 2010, Alliance Ukraine together with the Ukrainian Monitoring and Evaluation Center continued to improve its national monitoring and evaluation system. In particular, during the year, several working meetings of the M&E team were organized with Alliance support. In order to develop a single system of monitoring and evaluation of the effectiveness of measures, implemented at the national and regional levels, and to monitor financial expenditures as a component of the National Program for Prevention of HIV-Infection, Treatment, Care and Support for People Living with HIV and AIDS Patients for 2009-2013, the working group has developed a draft Resolution of the Cabinet of Ministers of Ukraine (CMU) "On the Establishment of a Single System of Monitoring and Evaluation of the Effectiveness of Response to the Spread of HIV Infection", as well as the draft Provision "On the Functioning of a Single System of Monitoring and Evaluation of the Effectiveness of Response to the Spread of HIV Infection", which are expected to be approved by the CMU in 2011. The working group also designed the National Plan of Monitoring and Evaluation of the Effectiveness of Response to the Spread of HIV Infection which is a methodological M&E guide that describes components of the M&E system, provides the list of national and regional indicators, and defines approaches to their analysis. It is expected that the National M&E Plan will be approved sometime in 2011 by the Joint Order of different ministries and departments, involved in HIV response.

In line with recommendations of the Comprehensive External Evaluation of the National AIDS Response in Ukraine on strengthening cooperation with academic institutions in the field of M&E, the first summer school of epidemiology was organized in July 2010. Specialists of the School of Public Health at the Kyiv-Mohyla Academy and experts from Hromashevskyi Institute of Epidemiology and Infections Diseases of the Academy of Medical Sciences of Ukraine, as well as representatives of the WHO office in Ukraine and Fogarty International Center, New York State University at Albany were involved in the development and facilitation of trainings. The trainings brought together over 40 participants, including epidemiologists from AIDS centers, NGO representatives, sociologists and students of specialized schools of higher education.

In 2010, Alliance Ukraine continued its work on the development of a regional monitoring and evaluation system. Thus, Alliance provided financial and methodological assistance to the organization of trainings on the assessment of expenditures in responding to HIV/AIDS at the oblast level, and on methodology of data collection and analysis for regional M&E indicators. As a result, Regional Coordination Councils formulated HIV/AIDS response indicators .. In many cases it contributed to more effective evidence-based decision-making at the regional level.

As of December 1, 2010, regional monitoring and evaluation centers were established in 22 oblast centers, whereas 11 of them (in Volyn, Zaporizhya, Kyiv, Luhansk, Lviv, Poltava, Rivne, Sumy, Kharkiv, Chernivtsi and Chernihiv oblasts) were set up over the course of the project, implemented by the Ukrainian AIDS Center with the support of Alliance within the framework of the Global Fund program.

Epidemiological Monitoring

In 2010, the Ukrainian AIDS Center of the Ministry of Health of Ukraine, with financial support of Alliance, carried out a number of sentinel surveillance surveys among IDUs and CSWs in 9 regional centers of Ukraine (Odesa, Donetsk, Lutsk, Simferopol, Poltava, Kharkiv, Kherson, Sumy, and Luhansk). 2,251 IDUs were tested for HIV infection, syphilis and hepatitis C, and 899 CSWs were tested for HIV and syphilis. According to preliminary data, the prevalence of HIV infection in 2010 in the participating cities reached 25.2% among injecting drug users, and 10% among commercial sex workers. The HCV prevalence among IDUs made up 52.4%.

In 2010, the database of HIV-positive persons maintained by the AIDS centers (EPIDAIDS) was substantially improved. Technical upgrades of the database made it possible to increase its registration capacity. By the end of 2010, the database included over 120 thousand entries on HIV-positive individuals.

7.2. Research and Studies of Alliance Ukraine

In 2010, Alliance Ukraine continued to study behavior and HIV prevalence among the bridge population. Fort the first time in Ukraine, behavioral monitoring was conducted among Ukrainian labor migrants. This target group in Ukraine was interviewed in 2002 and 2005; however, this was the first time when researchers combined interviews with having respondents' blood tested for HIV. The survey covered individuals who travel within Ukraine's borders in search of employment (internal migrants), and those who travel abroad in search of work (external migrants). Sampling methods for this study included RDS (respondent-driven sampling), and TLS (time-location sampling). The study was carried



Participants of the First Epidemiology Summer School

out in 14 Ukrainian cities: Kyiv, Dnipropetrovsk, Donetsk, Luhansk, Kerch, Odesa, Feodosiya, Kharkiv, Yalta, Lutsk, Mykolayiv, Cherkasy, Chernivtsi and Irshava (Zakarpattia oblast). A total of 2,340 individuals were interviewed and tested for HIV. The survey was carried out by the Center of Social Expertise of the Institute of Sociology of National Academy of Sciences (NAS) of Ukraine in cooperation with the Ukrainian AIDS center of the Ministry of Health of Ukraine. Preliminary findings demonstrate that HIV prevalence among labor migrants makes up 4.5%. Key factors of infection include those who have an injecting drug use record, who served sentences in penitentiary facilities, provision of sexual services for money, as well as sexual contacts between men. It means that the cohort of migrants includes some representatives of other vulnerable groups, who actually produce an adverse epidemiological picture. At the same time, of particular concern are such factors as high sexual activity of migrants (especially those migrating inside the country), disregard of condom use, and generally low awareness on how HIV gets transmitted. This proves the urgency of prevention activities at workplaces, especially taking into account the dominance of sexual transmission of HIV.

Analysis of number of bio-behavioral studies among most-at-risk groups and bridge populations, conducted in 2009, was also completed. For example, the reports on the following studies were published: "Behavioral Monitoring and HIV Infection Prevalence among IDUs as a Component of Second Generation Surveillance", "Behavioral Monitoring and HIV Infection Prevalence among CSWs as a Component of Second Generation Surveillance", "Behavioral Monitoring and HIV Infection Prevalence among Sexual Partners of IDUs as a Component of Second Generation Surveillance", and "Behavioral Monitoring and HIV Infection Prevalence among Clients of Female Sex Workers as a Component of Second Generation Surveillance". Results of these surveys were translated into English and Russian and made available on Alliance's website.

7.3. Development of Programmatic Monitoring

In 2010, Alliance Ukraine devoted significant attention to improving and standardizing the client registration system, improving the quality of programmatic data, and prefventing double registration of clients in prevention projects at the national level.



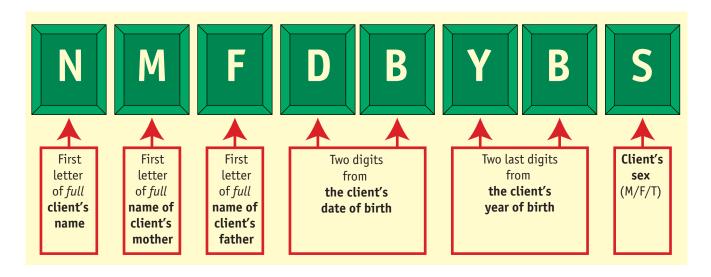
Completed Pilot Project on Introducing a Single Registration System

In 2010, the pilot project on introducing a single registration system of clients and services of HIV/AIDS prevention programs (SRS) came to a conclusion. It was launched in October 2009 with seven non-governmental organizations from Odesa oblast participating that worked in the area of harm reduction. This "pilot" also envisaged the introduction of a single client coding system, as well as the application of a single form of client cards.

Within this pilot project, a coding system, developed by the company "Population Services International", which is widely recognized in the countries of Central Asia, was used. A suggested unique client code is entered in a standardized client card, which was used by all participating NGOs.

This pilot project made it possible to identify and analyze all gaps that could emerge in the process of introducing SRS in all HIV/AIDS prevention projects supported by Alliance in Ukraine. After an analysis, a code structure and the client card were improved. Project specialists also prepared detailed guidelines on introducing the single registration system, and suggested routine procedures to the project staff responsible for client registration.

The new code, developed with participation of all HIV servicing partner organizations, is also based on the client's unique personal data, and includes 8 symbols: the first letter of the client's full name; first letter of the full name of the client's mother; first letter of the full name of the client's father; 2 digits from the client's date of birth; the last 2 digits from the client's year of birth, and the last symbol – the client's gender.



Prior to SRS introduction, relevant working meetings and trainings will be organized for all social workers and people responsible for maintaining NGO databases. Practical implementation of the single registration system in HIV/AIDS prevention projects will start on March 1, 2011 at the national level.

Introduction of the new client registration system is a big step forward to improving the data quality. A single coding system is based on each client's individual data, so the client's code can be easily retrievable in case the client's card is lost. It will reduce the risk of duplication and increase data accuracy. Moreover, in the process of data aggregation, an individual client who received services in several organizations will be counted as one. It is another important tool for data quality improvement.

Application of standardized client cards will also expand clients' access to services of different prevention projects, and increase their quality: by presenting their card, a client will be able to receive necessary services in different organizations throughout Ukraine, and will be calculated as one person. It is yet another method of data quality improvement.

Utilization of new SyrEx 2 Software

In the framework of programmatic monitoring activity, all partner NGOs have installed an updated version of an automated records management system for harm reduction projects – SyrEx 2 since the end of 2009. The new version of this software made it possible to collect more complete and reliable information in 2010 about clients engaged in the HIV/AIDS prevention programs, and about services, provided to them. Moreover, SyrEx 2 enables remarkably detailed analysis of collected data. In September-October 2010, a number of trainings were held on programmatic monitoring and application of the updated version of the SyrEx software. These events brought together around 130 documenters of Alliance sub-recipient organizations. Members of Alliance Ukraine M&E Team and programmatic units continue to provide technical assistance to organizations regarding the new version's functions and application for analysis of routine work.

In addition, in 2010, the SyrEx 2 database received an added important function – "Period Closure". This function prevents the user from making any changes to the data for previous reporting periods. Therefore, every sub-grantee "closes" the period after submitting its report to Alliance Ukraine. Then an M&E specialist issues unique "Period Closure" codes to each non-governmental partner. This code "closes" (prevents from changes) all previous reporting periods, and opens the current reporting period. This function was very important in implementing a data quality improvement strategy.

International Version of SyrEx Software

In autumn 2010, the new version of SyrEx became available in English. Any interested parties in any country of the world can now download this software from Alliance's website www.aidsalliance.org.ua and use it in their respective countries to monitor and keep records in HIV prevention projects for a different risk group.

An Assessment and Rating Systemof Implementing Partners Introduced

Alliance Ukraine completed the pilot project "A System of Assessment and Rating of Implementing Partners". The goal of this project was to increase effectiveness of program implementation by Alliance and by grantees that receive funding from the Global Fund program and from other donors. According to this system, all grantees of Alliance Ukraine were rated on a quarterly basis against their performance. The rating calculation was based on financial and programmatic indicators of grant implementation. Organizations that received the highest rating regularly were rewarded with the right to get the next grant outside the competition. The introduction of this rating system revealed the strengths and weaknesses of different organizations. Since implementing partners were competing for the highest rating, the quality of program implementation improved. An analysis of the rating system's led to the decision of improving it in the next year.



8. Technical Support of NGOs

8.1. Technical Assistance to Ensure Quality of Counseling of Vulnerable Groups

All implementing organizations and regional service provision partners (AIDS centers, Centers of Social Services for Family, Children and Youth (CSSFCY)) receive comprehensive technical assistance in the form of consultations, technical support visits, trainings, workshops, master classes and working meetings, from both Alliance Ukraine and its regional partners (interregional knowledge hubs, regional coordinators).

Provision of quality, timely and effective technical assistance, as well as methodological and training support to services for vulnerable groups in 2010 became a priority for the programmatic teams of Alliance Ukraine. From January 1 through December 31, 2010, Alliance Ukraine experts organized and conducted 83 trainings for specialists (heads of NGOs and project managers, NGO social and outreach workers, psychologists and lawyers of prevention projects, nurses and doctors, information managers,

monitoring and research officers, scientists, etc.), who provide services to representatives of vulnerable communities. Overall, 1,638 specialists participated in the trainings.

Trainings were organized by Alliance Ukraine and its regional partners with program support from the Global Fund to Fight AIDS, Tuberculosis and Malaria, within the framework of the SUNRISE project of the US Agency for International Development (USAID), as well as within projects, supported by the International Renaissance Foundation, Open Society Institute and the Levi Strauss Foundation.

Mobilization and Capacity Building of Vulnerable Communities

Success in the area of mobilization and capacity building of vulnerable communities in 2010 was achieved thanks to close cooperation between technical support managers and experts/reference groups for MSM/LGBT, CSWs, IDUs, M&E, and STI of four national-level projects (NGO "Gay-Alliance Ukraine", AUO "Association of SMT Patients of Ukraine", AUCO "Tochka Opory" (Point of Support), All-Ukrainian League "Legalife"), which provide support and organizational capacity building to initiative groups and organizations representing IDU community, IDUs participating in SMT programs, CSWs and MSM.

In December 2010, a training of trainers "Mobilization of IDU, MSM and CSWs Communities" was held with the goal to teach representatives of the above-mentioned vulnerable communities, leaders of the initiative and self-help groups, who already participated in the trainings on basic HIV-related counseling, to organize trainings on community mobilization.

IIProject on Ensuring Quality of Social and Psychological Counseling of Vulnerable Groups (2009–2011)

In the process of developing a comprehensive package of services for HIV/STI prevention among vulnerable groups, specific attention was given to the issue of ensuring the quality of social work, namely, different types of consultative support as well as socio-psychological counseling. The target group of this intervention includes social workers who provide consultations to IDUs, CSWs and MSM, and psychologists. The project is implemented by the team responsible for disseminating best practices, and by technical support managers in cooperation with Interregional Knowledge Hubs (IRKH) within the framework of the SUNRISE project and GF Round 6 program.

The project is based on the proper understanding of a quality service system, which consists of the following key components:

- 1 Social workers possess **knowledge** on the subject of services, quality standards of counseling, basic work methods, and services available within the package;
- 2 Counseling **skills**, understanding the process of providing consultative support, which are acquired during trainings and in practical work;
- 3 **Supervision system**, quality maintenance, control over knowledge and skills of consultants (social workers and psychologists).

The project began with a series of situational assessments in counseling within several operational studies in 2009–2010 concerning referrals of CSWs with identified STIs, regular clients, evaluation of quality of outreach services in different organizations, and an analysis of integrated services for SMT clients. Identified weaknesses in the area of social and socio-psychological counseling in the projects laid the foundation for the technical support system.

In 2010, the following key project components were introduced:

- A series of study courses for social workers on basic topics of counseling, as well as a knowledge assessment system.
- Guidelines on secondary coverage of clients. Currently they provide for mandatory counseling.
- Development of key training modules on outreach counseling of target group representatives completed.
- Trainings of consultants on communication competence and basic counseling skills started.
- Multi-step selection of the best psychologists-consultants completed. Selected specialists trained as supervisors.
- The project on provision of supervisory support to psychologists-consultants started at IRKH (17 supervisory groups began their work).

Currently there is an urgent need to ensure the systemic continuation of the project. In 2011, several important steps aimed at expanding and continuing activities on developing effective and high-quality social services is planned, including:

- A training manual for social and outreach workers of harm reduction projects.
- Trainings on the methodology of socio-psychological group support, e.g. facilitation of self-help groups (trainings of trainers and relevant trainings in all IRKH).
- Specialized trainings on providing socio-psychological support to CSWs, IDUs and MSM.

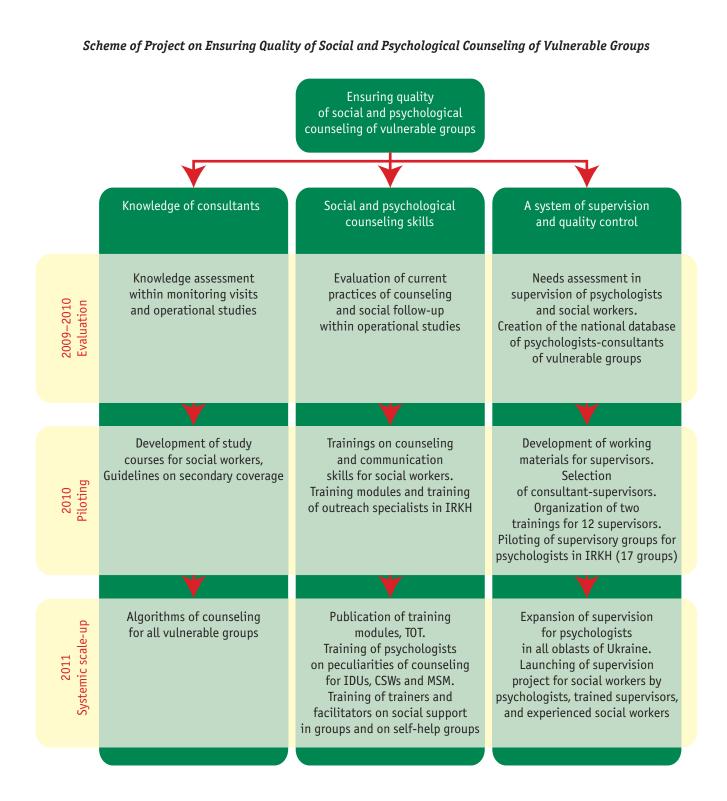
• Training of trainers on basic Participants of the training for psychologists

counseling and communication skills for outreach consultants within IRKH, development of method guide.

 Scale-up of supervision project for psychologists in the majority of oblasts.



- Develop algorithms for consultative assistance to IDUs, CSWs and MSM in all activity areas of projects dealing with HIV/STI prevention, social follow-up, care and support.
- Discussion of key components of the system of quality of social services within the Forum of Social Workers, with the development of practical skills of supervisory groups for social workers.
- Launching of permanent supervisory groups for social workers and consultants at the regional level.



8.2. Activities of Interregional Knowledge Hubs (IRKH)

During the project year 2010–2011, interregional knowledge hubs, supported by Alliance Ukraine, continued to provide technical and informational support to regional non-governmental and governmental organizations working in the area of HIV/AIDS. **Extensive training activities of IRKH at the regional level were the main priority in 2010:** the scope of such work increased significantly as a result of holding numerous trainings based on the modules developed by Alliance Ukraine together with national and international experts.

The thematic range of trainings for staff members of organizations that provide direct services to vulnerable groups, has increased significantly, whereas modules for these trainings were developed by Alliance Ukraine specialists. In 2010, Interregional Knowledge Hubs offered such trainings as "Outreach Work with IDUs", "Outreach Work with CSWs", "Social Follow-up", "Positive Prevention", "Protection of Reproductive Health", "Basic Counseling Skills", "Hepatitis", "External and Internal Communications in Building Partnerships". A supervision program for psychologists was started and trainings for pharmacists involved in prevention projects through pharmacy networks, etc. were conducted.

Main results of IRKH activities in 2010:

- The absolute number of specialists, trained during IRKH events in 2010, is 1,901, including
 161 staff members of CSSFCY from Odesa, Kirovohrad, Kyiv, Mykolayiv, Cherkasy, Chernihiv, Kherson,
 Donetsk, Dnipropetrovsk, Lviv and Poltava oblasts, from AR Crimea and the cities of Kyiv and
 Sevastopol. The rest of participants represented governmental and non-governmental
 organizations.
- 137 trainings and workshops organized and held. The majority of trainings conducted by IRKH addressed the issues practical skills development in the area of prevention, namely outreach work with different groups of clients, counseling, positive prevention, social follow-up, client registration and record keeping, and monitoring and evaluation of project performance. The number of trainings based on the standard modules prepared by Alliance specialists showed almost a threefold increase: close to 1,200 participants were educated in 72 training events of this kind, including 106 specialists from CSSFCY (Odesa, Kirovohrad, Kyiv, Mykolayiv, Cherkasy, Chernihiv, Kherson, Donetsk, Lviv and Poltava oblasts, from AR Crimea and the cities of Kyiv and Sevastopol). The advantages of receiving education at the regional level at interregional knowledge hubs include broader coverage of social workers in the regions with educational events, involvement of social workers representing vulnerable groups, opportunities to get a closer view on issues related to local peculiarities, and cost effectiveness. Participation of CSSFCY representatives in the trainings was based on submitted applications.
- IRKH held 17 community events in the regions, dedicated to different memorial days and youth festivities; organized 43 press-conferences, roundtables and regional working meetings dedicated to both memorial days and urgent regional issues, IRKH activities, and coordination of efforts of different stakeholders.



Training on positive prevention, group work, CF "Salus", Lviv

Interregional knowledge hubs offer the following services to representatives of HIV servicing organizations:

- To participate in a variety of educational events (module education, trainings, master classes, consultations, etc.);
- To join the team that supervises psychologists who work with representatives of groups vulnerable to HIV and with people living with HIV;
- To attend or to initiate roundtables and working meetings with key regional decision-makers and stakeholders in order to discuss urgent implementation issues of the HIV/AIDS program or other adjacent questions;
- To make use of IRKH libraries on HIV/AIDS and social work, websites, service databases, mailing lists, electronic newsletter, and other sources of information about regional services, innovative approaches and methods of work, best practices and other important practical issues in in the filed of HIV/AIDS;
- To receive technical support, information and consultations, including online ones;
- To order expert visits for provision of technical support to regional NGOs and initiative groups (service provided by both IRKH staff and by invited external expert-consultants);
- To receive technical support on registering an organization, or assistance in writing project proposals.

8.3. Publication of Information, Education and Communication (IEC) Materials for Representatives of Populations Vulnerable to HIV

In 2010, Alliance Ukraine continued to support successful initiatives, aimed at providing representatives of vulnerable groups and staff members of HIV-service organizations with quality information, education and communication materials on HIV/AIDS and adjacent issues at the regional and national levels.

In 2010, regional NGOs were actively involved in publishing activities. With the support of Alliance Ukraine they developed and produced **181 issues of new IEC materials**, including booklets, brochures, regional and national level printed periodicals; moreover, they re-issued **40 materials** on topics that are vital for clients of prevention projects, and which also contribute to positive behavior changes in

terms of HIV infection and health maintenance. Among 181 issues of IEC materials there are 103 new non-periodical editions and 78 issues of national and regional periodicals for populations vulnerable to HIV. 1,572,236 copies of IEC materials were distributed during 2010.

During the project year 2009–2010, seven national periodicals were supported. Thanks to the editorial staff's fruitful and inspired work during the project year, 52 issues of national periodicals with a total print-run of 394,000 copies were published and distributed as of September 30, 2010.

In addition, in 2009-2010 relevant support was provided to five regional periodicals in Donetsk, Mykolayiv, and Dnipropetrovsk oblasts. By September 30, 2010 they had published 28 issues of regional newspapers with a total print-run of 150,000 copies.

In 2010-2011 project year, 8 national and 5 regional periodicals for vulnerable populations were supported through open competitions (newspapers and magazines, see the Table "Periodicals 2010–2011"). 73 issues of periodicals with a total print-run exceeding 506,000 copies are expected by the end of the project year (September 30, 2010). This partially meets the needs of prevention projects in IEC materials for their clients. Periodicals provide coverage of various HIV/AIDS aspects and different services, issues of safe behavior, rehabilitation, subculture of vulnerable groups, and so on. 15 issues of national periodicals were published with a total print-run of 106,000 copies throughout the period of October 1 through December 31, 2010,.

Also in the 2010-2011 project year, Alliance supported publication of information, education and communication materials at the regional level within prevention projects for IDUs, CSWs and MSM.

To ensure control over the quality of IEC materials and to provide non-governmental organizations with prompt technical assistance in the area of IEC development, Alliance Ukraine continued to support its IEC expert group — Editorial Board of Alliance. Members of this board examine and review all IEC materials published at the expense of Alliance Ukraine, give recommendations for their improvement, and consult NGOs on publishing issues. Taking into account the significant demand for IEC development trainings among NGO representatives, in 2010, experts of Alliance Editorial Board conducted two relevant trainings for NGOs with the goal of improving the quality of materials issued by HIV-service organizations. The first training took place on January 25–29, 2010 in the town of Irpin

(Kyiv oblast), bringing together 26 participants from different regions. The second training was held on September 26-30, 2010 in Odesa, and attracted 18 participants. Training sessions were enriched with evening master classes dedicated to different aspects of IEC materials and video films on the topic.

Training on positive prevention, group work, CF "Salus", Lviv



Periodicals 2010-2011

No	Name	Publisher	Target audience					
		National periodica	als					
1	"Podorozhnyk" magazine		CSWs					
2	"Odyn z nas" (One of Us) magazine	NGO "Gay-Alliance Ukraine", Kyiv	MSM					
	"Ne Uletai" (Do not Fly Away!) newspaper	CF "The Way Home", Odesa	Target groups of prevention projects, PLWH and specialists of HIV-service organizations					
4	"Plus-Minus" newspaper and magazine	VCC "Stalist", Vinnytsia	Target groups of prevention projects, PLWH and specialists of HIV-service organizations					
5	"Sex, Drugs and AIDS" magazine	Kyiv oblast NGO "Promoting Medical and Social Rehabilitation of Individuals with Substance Dependence 'Phoenix'"	Drug users, clients of rehabilitation centers and programs for drug dependent individuals					
6	Newsletter of ICF "Federation Clubhouse"	ICF "Federation Clubhouse", Poltava	Clients of rehabilitation centers and programs for drug dependent individuals, drug users and their immediate environment, drug users in remission					
7	"Motylyok" (Butterfly) newspaper	CF "Drop-in Center", Kyiv	IDUs, SMT patients					
×	"Bila Altanka" (White arbor) newspaper	CF "Public Health", Poltava	Target groups of prevention projects, PLWH and specialists of HIV servicing organizations					
		Regional periodica	als					
1	"Nove Storichya" (New Century) newspaper		Target groups of prevention projects, PLWH and specialists of HIV servicing organizations					
2	"Znaydy Sebe" (Find Yourself) bulletin	CF "New Century", Mykolayiv	IDUs					
3	"Mama I maliuk" (Mom and baby) newspaper	CF "Unitus", Mykolayiv	HIV-positive women from vulnerable groups, HIV- positive pregnant women and mothers					
4	"Zdorove misto" (Healthy city) newspaper	NGO "Our Help", Slovyansk	Target groups of prevention projects, PLWH and specialists of HIV-service organizations					
5	Bulletin of Dnipro Humanitarian Initiatives	NGO "Dnipro Humanitarian Initiatives"	Specialists of HIV-service organizations in the region and decision-makers					

8.4. Supervision Program for Psychologists

Starting from September 2010, Alliance Ukraine introduced a program to supervise psychologists who work in HIV servicing organizations. Supervisory meetings are held bimonthly at interregional knowledge hubs supported by Alliance Ukraine and additionally in the cities of Chernivtsi and Rivne. Psychologists of HIV servicing NGOs, heath care facilities, centers of social services for family, children and youth, penal colonies and other institutions are invited to attend these meetings. Currently there are 17 supervisory groups working on a permanent basis in 13 cities of Ukraine: Kyiv, Vinnytsia, Mykolayiv, Simferopol, Sevastopol, Dnipropetrovsk, Chernivtsi, Rivne, Donetsk, Poltava, Kherson, Odesa and Lviv. The total number of participating psychologists is 180. Supervision sessions take place in groups; individual supervision occurs within group work.



Participants of the training for supervisors

The key objectives of **supervising** psychologists at the regional level are:

- To assist the consultant-psychologist ("psychologist under supervision") to respond to the client's needs in the most effective way.
- To increase the qualification of psychologists of HIV servicing organizations in the area of sociopsychological counseling, training, supervision of social and outreach workers by applying appropriate professional standards.
- To teach psychologists under supervision to conduct supervision of their own regarding social and outreach workers of HIV servicing organizations.
- To set up an appropriate environment for professional communication and interaction for psychologists.

Prior to this initiative, there were efforts made to collect data and to set up a database of psychologists working in the area of HIV/AIDS. Currently this database contains over 100 entries and includes psychologists working in both governmental and non-governmental organizations. The database is updated on a regular basis. 32 psychologists were selected to participate in qualifying workshops.

In September and December, 12 consultant-supervisors who were properly selected and approved participated in a special training which included topics that familiarized them with the types, forms and methods of supervision in socio-psychological assistance and social work; and practicing of skills, needed to perform different types of supervision.



9. Public Campaigns of Alliance Ukraine

- In May 2010, **the Living Library** event, dedicated to International AIDS Memorial Day, was organized in seven regions of Ukraine with the support of Levi Strauss Foundation. Organizers of this event noted the growing public attention to "living libraries", especially among representatives of social services for children and youth, school, college and university teachers, as well as students themselves. It is an opportunity for them to read "live books", to hear life stories, to share views on various issues, and ultimately find answers to important questions. All Living Library events have drawn the attention of many local, regional and national media outlets. The organizers have already received many requests from various educational facilities, social services for children and youth, and from local NGOs to organize Living Libraries in remote towns and villages in order to the raise awareness of local residents on various social issues in the context of HIV/AIDS. Within the framework of this project, a number of NGOs have concluded agreements of cooperation with oblast and district administrations, social services, and variety of educational institutions.
- On October 9, 2010, Alliance in partnership with the United Nations in Ukraine held the annual charitable event "Race for Life". Funds collected in the course of the event were directed for the benefit of children living with HIV/AIDS in Ukraine. Around 4,000 Kyiv residents and guests of the city registered for the race. Staff members and volunteers of Alliance Ukraine distributed prevention-oriented IEC materials and condoms among the participants. Representatives of the United Nations in Ukraine, Alliance Ukraine Director and other partners spoke to young people,

encouraging them to practice safer behaviors. All comers could also receive voluntary counseling and testing for HIV and STI with rapid tests.

- Within the framework of the public event "Don't Give AIDS a Chance!", organized on December 3, 2010 by the Committee on HIV/AIDS and other Socially Dangerous Diseases of the Ministry of Health of Ukraine and German Technical Cooperation (GTZ) with the support of Alliance Ukraine, our volunteers distributed 24,000 free condoms and IEC materials on the eve of and during a concert in the Palace "Ukraine" in Kyiv. A mobile clinic also offered counseling services and testing for HIV and STI with rapid tests.
- Charitable Event "A Letter to Saint Nicholas" within the campaign "Young Art against AIDS" has expanded its coverage!

For the fifth year in a row, with the support of its friends and partners, Alliance Ukraine implements a successful initiative for HIV-positive children. The first stage of this year's event "A Letter to Saint Nicholas" included a children's drawing contest on the topic of Christmas and the New Year. The winning drawing became an official corporate greeting card of one of the sponsors.

The next stage envisaged writing of a letter to St. Nicholas – 175 kids from 11 institutions in different regions of Ukraine sent us their dream letters. All letters were disseminated among Alliance staff members, our friends and partners. By joining our efforts, we succeeded in making every child's dream come true!

On December 15-20, 2010, we organized a number of holiday parties with official deliveries of gifts "from Saint Nicholas", tableful from our sponsors, performances and art boutiques.

The final stage of the event included procurement of medications and clothes according to the needs stated in official letters from institutions exceeding UAH 150,000.

We plan even more events in 2011, so feel free to join us!

If you ask us about the goal of such projects the answer will not come easily because every year brings new initiatives, and the kids in the ward for HIV+ children at the OKHMATDYT hospital can't wait to see it.

The youngest children up to the older ones anxiously look forward to the holiday. They write down their wish lists and sometimes even short stories. They give us their pictures and drawings. As for us, we work as Saint Nicholas's "helpers", fulfilling their wishes with great pleasure.

For example, we meet our old friend Alinka, who has already turned 9... Four of these nine years she spent in the hospital. She cannot go home because she does not have anyone. Moreover, her health is too weak to travel anywhere so the girl waits for the holiday with anticipation: every year this meeting opens little window to the outer world.

We are good friends with Ihorok, who is 13. This year Saint Nicholas brought him a pair of roller skates, and he's going

to skate, despite the fact that an IV line is attached to his arm.

In this ward we also meet little Pavlyk, who is only 2 years of age. He was born very small and weak, so his mother abandoned him, she was probably afraid of his status. Today, however, Pavlyk is doing OK, he receives treatment and he's got a new mom. People here call him "everybody's baby".

In spring, we organized this great photo session for kids and their parents, everyone was happy, dreamy and smiling, as if they were not in the hospital. But several days before St. Nicholas day we learned from social workers that some parents had no one left but those pictures...

As I said, there are no simple answers. We do it because we feel the calling...

Annex 1. International HIV/AIDS Alliance in Ukraine — Financial Overview 2010

Table 1. Structure of funds that were received from donors in 2010

		Funds received					
υσιισή μισμέτε	UAH'0001	USD'000	% of total				
The Global Fund to Fight AIDS, Tuberculosis and Malaria (Round 6)	165 134	20 860	92,86%				
USAID (Sunrise)	10 075	1 273	5,67%				
International HIV/AIDS Alliance ²	1 790	226	1,00%				
Others ³	836	105	0,47%				
Total	177 835	22 463	100,00%				

Table 2. Budget utilization

Donor/project	Budget, USD'000¹	Spent, USD'000	Utilization, %
The Global Fund to Fight AIDS, Tuberculosis and Malaria	23 427	23 263	99,30%
USAID (Sunrise)	1 537	1 540	100,16%
International HIV/AIDS Alliance ²	206	163	83,85%
Others ³	108	124	106,48%
Total	25 278	25 090	99,26%

Table 3. Budget utilization of Round 6 Programme "Support for HIV and AIDS prevention, treatment and care for most vulnerable populations in Ukraine" in 2010

Main Programme Objectives	Budget, USD'000 ¹	Spent, USD'000	Spent, %	% of total
Prevention	15 307	16 236	106,08%	69,81%
Treatment	4 114	3 309	80,39%	14,22%
Supportive Environment	369	365	98,91%	1,57%
Monitoring & Evaluation	1 247	1 308	104,73%	5,62%
Administrative cost	2 389	2 045	85,61%	8,79%
Total	23 427	23 263	99,30%	100,00%

¹ UAH/USD exchange rate is NBU exchange rate at the date of funds receipt

² Aidstar II, Aidstar II CAR, Technical Support Hub in Ukr

³ International Renaissance Foundation, Foundation Open Society, Levi Strauss Foundation and other

Diagram 1. Dynamic in structure of funds receipt from donors

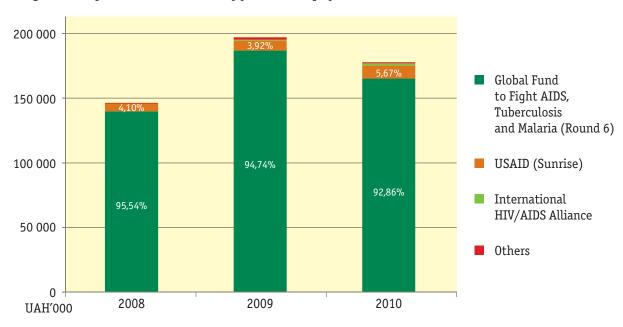


Diagram 2. Structure of expenditures in 2010

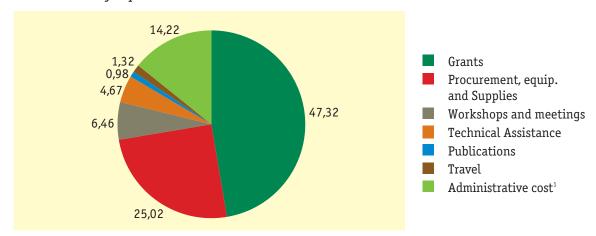
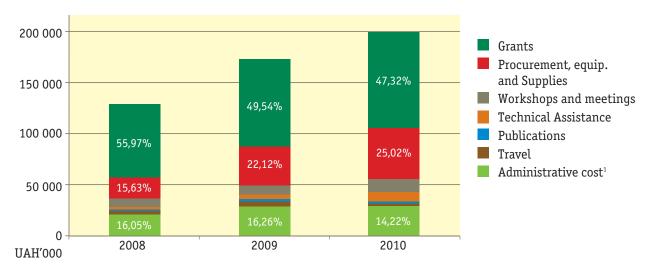


Diagram 3. Dynamic in structure of expenditures, 2008–2010



¹ Administrative costs include the costs of audits, office costs and salaries

Annex 2. Key Outcomes of Alliance Ukraine Program Activities in 2010

Cumulative coverage of risk group representatives with prevention services as of January 1, 2011

Oblast/Region	Injecting drug users	Commercial sex workers	Men who have sex with men	Prisoners	Street Children
National Projects	6 306	3		6 962	40 599
Cherkasy region	18 587	1 694	514	5 641	
Chernigiv region	3 126	42	1		
Chernivtsi region	6 097	618	259		
Crimea	10 193	2 531	1 526	6 120	
Dnipropetrovsk region	59 097	4 684	1 641	2 265	
Donetsk region	44 616	2 462	2 095	12 997	352
Ivano-Frankivsk region	2 445	284	309	2 286	
Kharkiv region	7 772	4 736	1 618	5 908	
Kherson region	15 742	1 285	1 142	11 341	
Khmelnitskiy region	5 710	947	220	5 980	
Kirovograd region	6 244	799	450		
Kyiv region	3 389	282		391	
Lugansk region	6 489	511		1 420	
Lviv region	2 945	2 334	1 014	9 675	
Mykolayiv region	22 457	11 096	1 779	8 379	518
Odesa region	44 112	11 850	5 841	7 298	443
Poltava region	7 235	534		7 223	
Rivne region	2 306	474		606	
Sumy region	3 734	450			
Ternopil region	700	261			
Vinnytsya region	4 178	766		4 550	
Volyn region	1 248	379			
Zakarpattya region	1 521	196			
Zaporizzhya region	5 767	680	675	6 481	
Zhytomyr region	2 322	71			
Kyiv city	42 706	6 034	19 443	1 679	446
Sevastopol city	4 390	1 101	464		
Total	341 434	57 104	38 991	107 202	42 358

Coverage of risk group representatives with prevention services in 2010

	Injecting drug users		Non-injecting drug users				Men who			Street Children*		Total
oblast/ kegion	Male	Female	Male	Female	Male	Female	have sex with men	Male	Female	Male	Female	Totat
National Projects	3 397	1 093						4 700	2 261			11 451
Cherkasy region	10 227	2 620	43	20		1 285	512	1 230	311			16 248
Chernigiv region	604	250										854
Chernivtsi region	2 274	871			1	310	77					3 533
Crimea	4 069	1 439				1 685	475	397				8 065
Dnipropetrovsk region	13 833	6 054	81	26		1 983	1 379	895				24 251
Donetsk region	21 329	7 021			13	1 525	1 625	4 947	2	225	127	36 777
Ivano-Frankivsk region	118	34				41						193
Kharkiv region	2 583	689			4	2 312	908	1 606	173			8 275
Kherson region	4 155	815				486	1 068	2 620	27			9 171
Khmelnitskiy region	966	249			10	385	220	706				2 536
Kirovograd region	3 704	765				669						5 138
Kyiv region	1 357	518				43						1 918
Lugansk region	3 900	1 198				492		743	42			6 375
Lviv region	1 153	403				1 286	814	927				4 583
Mykolayiv region	6 456	2 468			4	3 180	866	2 304	87	360	158	15 886
Odesa region	15 188	6 982	49	30		4 599	2 423	1 413	492	329	114	31 619
Poltava region	2 365	933				147		1 691	129			5 265
Rivne region	1 479	533				461		126				2 599
Sumy region	2 725	485				389						3 599
Ternopil region	524	179				261						964
Vinnytsya region	1 299	241				471		545				2 556
Volyn region	1 005	220				269						1 494
Zakarpattya region	315	68				76						459
Zaporizzhya region	1 441	472	1			358	444	3 399	259			6 374
Zhytomyr region	814	138				72						1 024
Kyiv city	18 738	5 291	9	1	5	3 177	7 138	309		300	146	35 114
Sevastopol city	1 516	518	2			453	254					2 743
Total	127 534	42 547	185	77	37	26 415	18 203	28 558	3 783	1 214	545	249 064

^{* &}quot;SUNRISE" Project only

Amount of commodities disseminated in 2010

Oblast/Region	Male condoms	Female condoms (Femidoms)	Syringes
National Level	113 685		462 961
Cherkasy region	915 821	2 089	1 445 031
Chernigiv region	35 391		128 148
Chernivtsi region	265 149	750	201 573
Crimea	704 383		405 344
Dnipropetrovsk region	1 655 439	9 453	2 482 722
Donetsk region	1 681 769	3 039	3 226 742
Ivano-Frankivsk region	3 492	28	6 997
Kharkiv region	633 368	340	364 536
Kherson region	344 257	1 189	869 848
Khmelnitskiy region	330 472		186 352
Kirovograd region	262 621	3 999	332 793
Kyiv region	77 659	257	167 339
Lugansk region	307 857	1 157	498 966
Lviv region	419 483	2 240	162 180
Mykolayiv region	1 254 697	2 765	739 628
Odesa region	2 238 256	297	2 472 225
Poltava region	188 951		329 579
Rivne region	167 676	370	93 635
Sumy region	187 896	614	302 988
Ternopil region	66 644	239	55 350
Vinnytsya region	316 237	2 741	234 497
Volyn region	121 772		112 308
Zakarpattya region	68 627		83 562
Zaporizzhya region	311 989	910	126 677
Zhytomyr region	42 522	30	78 838
Kyiv city	2 344 405	3 649	2 122 184
Sevastopol city	220 804	1 240	391 500
Total	15 281 322	37 396	18 084 503

Counseling and testing with rapid tests for HIV in 2010

Oblast/Region	IDU	Positive results	Non-injecting drug users	Positive results	CSW	Positive results	MSM	Positive results	Prisoners	Positive results	Street children	Positive results	Other (clients of CSW, close environment of vulnerable groups)	Positive results
National Level	1 658	ළි 111	ž	S		Pos		Pos	5 000	ě 379	Stı	ě	e o d	So
Cherkasy region	4 594	382			687	53	255	16	3 000	313			26	
Chernigiv region	433	75			007	23	233	10	1				20	
Chernivtsi region	1 723	10			83		18	1	1					
Crimea	1 917	89			786	27	394	16					2	2
Dnipropetrovsk region	8 336	860	20		1 152	125	439	7	19				563	77
Donetsk region	12 501	824			893	58	765	36	100		162	6	342	44
Ivano-Frankivsk region	13	1			12									
Kharkiv region	1 376	77			1 430	8	243	19						
Kherson region	1 835	71			569	14	455	7					159	1
Khmelnitskiy region	909	93			184	17	99	15						
Kirovograd region	1 825	104			228	16								
Kyiv region	669	106			11	2							13	4
Lugansk region	2 159	81			186	2							5	
Lviv region	588	57			761	41	293	24					3	
Mykolayiv region	3 369	384			1 180	77	455	3			83	1		5
Odesa region	8 866	813	6		2 019	39	1 122	29			157	24		45
Poltava region	1 277	58			107								174	3
Rivne region	732	18			173	4								
Sumy region	1 385	74			126	2								
Ternopil region	251	13			102	2								
Vinnytsya region	1 106	22			587	4							14	
Volyn region	450	24			145	10								
Zakarpattya region	275	1			61									
Zaporizzhya region	565	51			100	9	183	8					3	
Zhytomyr region	412	79			25									
Kyiv city	10 138	381			1 417		2 779	40			128	6		4
Sevastopol city	1 218	44			234	2							3	3
Total	70 580	4 903	26		13 258	536	7 644	221	5 120	379	530	37	2 844	188

Screening testing of representatives of populations vulnerable to HIV and sexually transmitted infections (syphilis, gonorrhea, Chlamydia, Hepatitis B, C) in 2010

Oblast/Region	IDU	Positive results	Non-injecting drug users	Positive results	CSW	Positive results	MSM	Positive results	Prisoners	Positive results	Other (clients of CSW, close environment of vulnerable groups)	Positive results	Street children	Positive results
National Level	0	0	0	0	0	0	0	0	4 000	142	0	0	0	0
Cherkasy region	5147	132	0	0	1373	15	396	10	0	0	4	0	0	0
Chernigiv region	581	34	0	0	0	0	0	0	0	0	0	0	0	0
Chernivtsi region	2570	75	0	0	237	7	36	1	0	0	0	0	0	0
Crimea	1935	55	0	0	1185	100	438	23	0	0	2	0	0	0
Dnipropetrovsk region	9693	297	25	0	2221	163	700	3	9	0	280	0	0	0
Donetsk region	13953	487	0	0	1536	22	973	4	150	0	340	3	162	1
Ivano-Frankivsk region	0	0	0	0	10	0	0	0	0	0	0	0	0	0
Kharkiv region	1682	57	0	0	2528	91	525	25	0	0	0	0	0	0
Kherson region	2195	109	0	0	1040	97	559	6	0	0	219	4	0	0
Khmelnitskiy region	1306	115	0	0	406	81	314	36	0	0	0	0	0	0
Kirovograd region	2315	81	0	0	281	11	0	0	0	0	0	0	0	0
Kyiv region	744	48	0	0	49	9	0	0	0	0	9	0	0	0
Lugansk region	3044	224	0	0	451	11	0	0	0	0	0	0	0	0
Lviv region	657	29	0	0	1333	81	538	0	0	0	0	0	0	0
Mykolayiv region	3603	101	0	0	2277	82	635	1	0	0	73	0	83	0
Odesa region	13162	480	0	0	4374	112	1809	47	0	0	843	39	156	21
Poltava region	1369	52	0	0	61	0	0	0	0	0	265	5	0	0
Rivne region	1317	108	0	0	356	6	0	0	0	0	0	0	0	0
Sumy region	2385	317	0	0	322	4	0	0	0	0	0	0	0	0
Ternopil region	266	6	0	0	182	20	0	0	0	0	0	0	0	0
Vinnytsya region	1964	32	0	0	1430	17	0	0	0	0	14	0	0	0
Volyn region	450	26	0	0	290	1	0	0	0	0	0	0	0	0
Zakarpattya region	304	11	0	0	125	4	0	0	0	0	0	0	0	0
Zaporizzhya region	263	9	0	0	372	7	227	1	5	0	37	1	0	0
Zhytomyr region	438	3	0	0	76	5	0	0	0	0	0	0	0	0
Kyiv city	13730	906	0	0	3644	146	3545	35	0	0	609	41	113	9
Sevastopol city	1644	70	0	0	438	32	240	2	0	0	0	0	0	0
Total	86717	3864	25	0 2	26597	1124	10935	194	4164	142	2695	93	514	31

Treatment of sexually transmitted infections provided to populations vulnerable to HIV in 2010

Oblast/Region	Number of STI treatment courses commenced among vulnerable populations
Cherkasy region	72
Chernigiv region	24
Chernivtsi region	128
Crimea	568
Dnipropetrovsk region	1485
Donetsk region	1276
Ivano-Frankivsk region	206
Kharkiv region	198
Kherson region	628
Khmelnitskiy region	788
Kirovograd region	65
Kyiv region	52
Lugansk region	279
Lviv region	130
Mykolayiv region	947
Odesa region	1447
Poltava region	50
Rivne region	40
Sumy region	66
Ternopil region	48
Vinnytsya region	161
Volyn region	87
Zakarpattya region	196
Zaporizzhya region	187
Zhytomyr region	55
Kyiv city	1234
Sevastopol city	381
Total	10798

Clients of Buprenorphine-based substitution maintenance therapy as of January 1, 2011

Oblast/Region	Number of	patients	Number of patients with	Number of	Patients preparing for
Oblast/ Region	Male	Female	HIV	patients on ART	ART
Cherkasy region	18	2	14	1	0
Chernigiv region	12	3	11	5	1
Chernivtsi region	11	8	9	6	2
Crimea	42	12	31	26	3
Dnipropetrovsk region	33	21	36	11	4
Donetsk region	50	11	35	19	5
Ivano-Frankivsk region	30	6	18	10	4
Kharkiv region	0	0	0	0	0
Kherson region	24	5	9	6	0
Khmelnitskiy region	0	0	0	0	0
Kirovograd region	17	3	4	1	0
Kyiv region	18	1	13	5	4
Lugansk region	13	2	1	1	0
Lviv region	13	3	6	1	0
Mykolayiv region	45	10	40	24	1
Odesa region	41	10	34	18	2
Poltava region	20	10	14	9	5
Rivne region	10	3	8	3	0
Sumy region	23	2	9	4	2
Ternopil region	19	6	5	0	0
Vinnytsya region	25	6	12	7	0
Volyn region	19	3	3	1	0
Zakarpattya region	8	1	2	2	0
Zaporizzhya region	36	13	29	20	6
Zhytomyr region	13	5	8	2	3
Kyiv city	99	40	100	62	0
Sevastopol city	0	0	0	0	0
Total	639	186	451	244	42

Clients of Methadone-based substitution maintenance therapy as of January 1, 2011

Oblast/Region	Number o	f patients	Number of patients with	Number of	Patients preparing for	
oblast/ Region	Male	Female	HIV	patients on ART	ART	
Cherkasy region	91	18	66	11	4	
Chernigiv region	35	9	28	6	1	
Chernivtsi region	41	10	15	7	0	
Crimea	367	90	167	42	61	
Dnipropetrovsk region	480	166	399	87	18	
Donetsk region	391	74	237	47	10	
Ivano-Frankivsk region	151	26	86	32	20	
Kharkiv region	25	4	10	6	1	
Kherson region	142	29	66	17	7	
Khmelnitskiy region	91	27	46	14	1	
Kirovograd region	107	24	29	1	0	
Kyiv region	73	20	48	11	13	
Lugansk region	315	54	62	18	6	
Lviv region	86	16	62	18	5	
Mykolayiv region	444	80	249	69	21	
Odesa region	122	29	78	22	15	
Poltava region	256	79	94	17	24	
Rivne region	65	15	34	2	0	
Sumy region	63	14	16	2	2	
Ternopil region	62	19	32	8	0	
Vinnytsya region	135	23	43	14	4	
Volyn region	77	20	37	4	0	
Zakarpattya region	25	7	1	0	1	
Zaporizzhya region	73	19	38	14	19	
Zhytomyr region	161	22	90	14	14	
Kyiv city	234	81	174	65	8	
Sevastopol city	88	25	62	22	5	
Total	4200	1000	2269	570	260	

Annex 3. Total value of drugs and health-related goods supplied to oblasts in 2010

Table 1

Region/Institution	HIV rapid tests,UAH	Pregnan- cy rapid tests, UAH	Syphilis rapid tests, UAH	Hepatitis B rapid tests, UAH	Hepati- tis C rapid tests, UAH	Chlamy- dia rapid tests, UAH	Gonor- rhea rapid tests, UAH	Combo- tests (HIV, Syphilis, Hep. B, Hep. C), UAH	STI Drugs, IFA equipment, UAH
Cherkasy region	37691	1 421	17 616	3 402	3 825	26 290	27 048	17 420	
Chernigiv region	2718	19	993	900	1 050	1 961	1 991	5 980	
Chernivtsi region	9953	102	8 848	750	450	0	0	3 120	
Crimea	34 028	1 584	23 159			15 034	13 988		
Dnipropetrovsk region	65 979	3 469	26 926	3 600	3 300	58 795	60 253	17 940	94 135
Donetsk region	91 540	4 111	36 251	5 025	5 775	33 591	34 240	32 240	
Ivano-Frankivsk region	580	133	134	0	0	0	0		
Kharkiv region	22643	909	15 526	2 550	3 225	16 704	18 008	17 420	
Kherson region	24775	957	11 557	1 275	1 575	20 125	20 565	8 320	
Khmelnitskiy region	8275	194	3 633	225	225	8 257	9 704	1 040	
Kirovograd region	10705	149	8 504	150	0	0	0	1 560	
Kyiv region	2632	0	875	450	525	2 860	2 729	2 600	
Lugansk region	14969,5	195	4 651	675	1 050	15 982	16 130	7 800	94 135
Lviv region	8302	385	4 228	3 375	3 975	12 922	12 624	18 460	
Mykolayiv region	34587,5	951	20 222	2 325	750	26 140	25 343	4 160	
Odesa region	86370,5	1 047	44 223	3 675	3 600	76 153	78 000	16 120	94 135
Poltava region	9065	93	5 509	450	375	1 887	1 932	3 120	
Rivne region	3852		1 598	0	0	4 882	4 984	5 720	
Sumy region	6710,5	82	3 251	900	1 050	5 809	5 932	9 100	
Ternopil region	2210					930	948		94 135
Vinnytsya region	11 285		7 837	1 050	1 200	14 819	17 537	2 080	
Volyn region	4 567			0		25 141	25 753		
Zakarpattya region	3345		915	0		2 097	1 251		
Zaporizzhya region	6367		3 085	375	225	4 693	3 355	1 300	
Zhytomyr region	3 880		2 889		150	2 568	1 812	780	
Kyiv city	104241,25				21 974	106 109	85 717	72 800	94 135
Sevastopol city	4350	124	1 809	675	825	3 720	3 792	4 420	
Ohmadyt									26000
Penitentiary	43750	0	0	0	0	55 500	56 850		86 488
department					Ī				
Всього	659 369	17 961	301 439	51 102	55 124	542 969	530 486	253 500	557 163

Table 1 Continued

Region/Institution	Vaccines for Hepatitis B, UAH	Metha- done, UAH	Buprenor- phine, UAH	Male condoms, UAH	Female con- doms, UAH	Lubri- cants, UAH	Syringes, UAH	Spirit wipes, UAH	Total, UAH
Cherkasy region		79 487	99 960	514 175	40 000	49 200	652 259	181 887	1 751 680
Chernigiv region		26 710	76 356	20 563	8 000	6 168	61 675	16 570	231 653
Chernivtsi region		40 213	141 096	152 021	40 000	11 520	176 156	43 468	627 697
Crimea		214 163	222 768	733 709	8 000	31 786	278 654	72 659	1 649 681
Dnipropetrovsk region		434 306	185 640	696 643	136 000	53 280	1 118 140	310 118	3 268 524
Donetsk region		198 714	380 702	859 622	64 000	59 760	1 397 860	352 684	3 556 115
Ivano-Frankivsk region		116 706	215 640	10 066	8 000	768	8 618	1 892	362 537
Kharkiv region		22 452		1 042 502	64 000	24 924	209 651	48 719	1 509 233
Kherson region		49 040	387 629	336 200	32 000	22 320	358 841	93 833	1 369 011
Khmelnitskiy region		141 140		343 656	0	7 920	127 470	28 960	680 699
Kirovograd region		60 205	158 040	124 056	48 000	7 920	178 847	40 998	639 135
Kyiv region		45 174	72 408	46 382	8 000	4 800	219 955	19 947	429 337
Lugansk region		234 050	99 108	216 187	16 000	12 914	266 979	65 743	1 066 569
Lviv region		38 418	116 670	328 176	72 000	22 320	76 937	18 564	737 356
Mykolayiv region	6 243	236 699	259 896	797 288	40 000	37 440	416 942	99 593	2 008 579
Odesa region	62 438	96 256	373 776	1 659 067	32 000	62 400	1 110 336	310 908	4 110 505
Poltava region	9 366	186 667	225 754	111 370	16 000	10 080	155 095	39 702	776 464
Rivne region		52 725	84 828	99 418	24 000	5 760	61 489	13 866	363 233
Sumy region		54 180	147 384	107 726	24 000	5 760	156 607	35 181	563 673
Ternopil region		70 868	42 840	48 033	8 000	2 880	33 289	8 504	314 675
Vinnytsya region		117 985	230 016	441 058	40 000	8 640	78 091	19 425	991 111
Volyn region		58 819	183 030	247 032	0	5 040	63 936	15 500	633 686
Zakarpattya region		12 096	53 124	58 248	0	1 440	50 632	10 316	193 539
Zaporizzhya region		52 020	370 572	379 146	16 000	18 000	84 546	20 601	960 334
Zhytomyr region		93 874		53 309	8 000	5 040	55 574	13 350	327 139
Kyiv city	12 488	195 590	869 582	1 535 354	160 000	88 560	1 182 361	369 611	4 959 410
Sevastopol city		80 149		200 304	24 000	8 640	160 985	39 996	533 788
Ohmadyt									26 000
Penitentiary									242 588
department									
Total	90 535	3 008 704	5 082 488	11 161 310	936 000	575 280	8 741 926	2 292 596	34 883 951

Annex 4. List of Implementing Partners

Table 1. Cumulative Data on Grant Agreements of International HIV/AIDS Alliance in Ukraine (2010)

Nº	NGO Name	Donors programme (*)	Region	Total amount of projects	Signed Obligations (USD)	Funded (USD)
1	Charitable foundation "Insight"	GF	Cherkasy region	6	182 509	181 004
2	Charitable Foundation "From Heart to heart"	GF, OSI	Cherkasy region	3	93 137	102 820
3	Charitable foundation "Volia"	GF, US	Cherkasy region	6	103 020	82 845
4	Public organization "Dialog", Smila	GF	Cherkasy region	2	81 447	73 411
5	Charitable foundation "VAM"	GF	Cherkasy region	3	74 486	70 527
6	Cherkasy regional charitable foundation "With love to children"	GF	Cherkasy region	3	37 864	40 732
7	Public organization "Gay-alliance Cherkasy"	GF	Cherkasy region	2	31 418	26 530
8	Cherkassy regional Branch of Charitable Organization "All-Ukrainian Network of PLHW"	GF	Cherkasy region	2	10 001	12 024
9	Municipal Institution Cherkassy regional Narcological Dispensary	GF	Cherkasy region	1	5 090	5 096
10	Regional charitable organization "Argo", Drabiv	GF	Cherkasy region	1	9 591	3 180
11	Chernihiv Resocialization Centre of chemically dependent "Vedis"	GF	Chernigiv region	2	65 182	45 775
12	Prilyku city Center of Social Services for family	GF	Chernigiv region	1		5 606
13	Gorodnya city Center of Social Services for family	GF	Chernigiv region	1	13 043	5 323
14	Chernigiv cityl Branch of Charitable Organization "All-Ukrainian Network of PLHW"	GF	Chernigiv region	2	6 839	5 177
15	Public organization "Prilyku salvation"	GF	Chernigiv region	1	13 328	4 713
16	Charitable foundation "New family"	GF	Chernivtsi region	5	157 001	165 637
17	Chernivci regional public organization "People of Bukovyna"	GF	Chernivtsi region	1	12 785	4 702
	Charitable foundation "Hope & Salvation"	GF	Crimea	8	453 452	337 482
19	Youth center of women's initiatives	GF	Crimea	5	266 835	229 028
20	Resocialisation Center of Drug-addicted Youth "Your Victory"	GF	Crimea	2	73 700	46 797
21	Sevastopol city charitable organisation "Gavan Plus" Pakhabugarai charitable foundation "Contor	GF, US	Crimea	4	153 598	39 867
	Bakhchysarai charitable foundation "Center for Re-socialization of Drug Addicted Youth "Your Voictory"	GF	Crimea	2	27 175	24 198
23	Youth Public organization "Your Victory"	GF	Crimea	3	24 899	21 994

Table 1 Continued

iub	e i continueu					
Nº	NGO Name	Donors programme (*)	Region	Total amount of projects	Signed Obligations (USD)	Funded (USD)
24	Crimea republic fund "Gelios"	GF	Crimea	1		21 884
25	Public organization "Feniks"	GF	Crimea	2	20 147	20 206
26	City Hospital # 1 Yalta City	GF	Crimea	1	1 013	1 009
27	Charitable foundation "Public Health", Kryviy Rig	GF	Dnipropetrovsk region	2	175 316	176 903
28	Dnipropetrovsk region public organization "Open doors"	GF, US	Dnipropetrovsk region	5	142 151	136 719
29	Public organization "Impuls"	GF	Dnipropetrovsk region	2	71 605	67 151
30	All-Ukrainian public organization "Association of ST participants in Ukraine"	GF	Dnipropetrovsk region	2	78 705	56 619
31	Charitable foundation "Virtus"	GF	Dnipropetrovsk region	2	62 382	54 089
32	Charitable organisation "HELP"	GF	Dnipropetrovsk region	2	49 197	49 857
33	Kryvyy Rig city charitable organization "Our Future"	GF	Dnipropetrovsk region	2	52 791	49 410
34	Regional public organization "Dniprovsky humanitarian initiatives"	GF	Dnipropetrovsk region	4	62 152	45 660
35	Public organization "Family support centre"	GF	Dnipropetrovsk region	2	41 000	44 910
36	Public organization "The Road of Life"	GF, US	Dnipropetrovsk region	3	46 558	44 128
37	Charitable foundation "Promin", Zhovti Vody	GF	Dnipropetrovsk region	4	47 293	42 235
38	Kryvyi Rig city regional Branch of Charitable Organization "All-Ukrainian Network of PLHW"	GF	Dnipropetrovsk region	2	45 557	41 471
39	City public centre of drug-addicted "Future without AIDS"	GF	Dnipropetrovsk region	4	39 157	40 818
40	Ordzhonikidze city charitable foundation "Dopomoga"	GF	Dnipropetrovsk region	4	41 979	39 737
41	Pavlograd Charitable Organisation "Oberig"	GF	Dnipropetrovsk region	1		18 478
42	Charitable foundation "Oberih Plus"	GF	Dnipropetrovsk region	1	45 909	16 754
43	Dnipropetrovsk public organization "Perekhresttya"	GF	Dnipropetrovsk region	1		12 642
44	Public organization "Z nadiyeyu"	GF	Dnipropetrovsk region	2	10 498	9 643
45	Public organization "Drevo Zhyttya"	GF	Dnipropetrovsk region	1	21 973	9 120
46	Regional charitable organization "Road to Life"	GF	Dnipropetrovsk region	1	14 998	6 179
47	Dnipropetrovsk City Clinic #5	GF	Dnipropetrovsk region	2	6 097	6 100
48	Pershotravensk central city clinic	GF	Dnipropetrovsk region	1	5 028	5 028
49	Public organization "Amikus"	GF	Donetsk region	4	227 371	212 912

Table 1 Continued

Nº	NGO Name	Donors programme (*)	Region	Total amount of projects	Signed Obligations (USD)	Funded (USD)
50	Donetsk regional charitable foundation "Oberig"	GF, US	Donetsk region	4	207 161	192 401
51	Public organisation "Liniya Zhyttia"	GF, US	Donetsk region	4	140 721	128 012
52	Slov'jansk City Public organisation "Nasha Dopomoga"	GF, US	Donetsk region	4	137 537	120 765
53	Donetsk Society of assistance for the HIV- infected	GF	Donetsk region	3	119 115	112 175
54	Public organization "Donbas without drugs"	GF	Donetsk region	3	101 901	84 193
55	Public organization "Mariupil Youth Association"	GF	Donetsk region	3	71 935	76 243
56	Public organization "Stimulus fund"	GF	Donetsk region	2	56 045	70 539
57	Charitable foundation "Health of the Nation"	GF, US	Donetsk region	3	58 292	63 098
58	Donetsk regional Charitable Foundation "Svitanok"	GF	Donetsk region	3	53 768	48 517
59	Donetsk Youth Organization "Development. Initiative. Partnership"	GF	Donetsk region	2	58 129	48 194
60	Charitable organization "The new day"	GF	Donetsk region	2	45 996	45 143
61	Donetsk regional charitable foundation "Promin"	GF	Donetsk region	2	41 489	39 925
62	Charitable foundation "Caritas Donetsk"	US	Donetsk region	2	58 540	37 210
63	Public organization "Your choice"	GF	Donetsk region	2	12 116	12 677
64	Public organization "Istok"	GF, US	Donetsk region	2	21 559	11 263
65	Public organization "Club "Future"	OSI	Donetsk region	1		1 128
	Charitable foundation "Zahid Shans"	GF	Ivano-Frankivsk region	2	42 319	15 366
67	Kharkiv city charitable foundation "BLAGO"	GF	Kharkiv region	2	271 524	237 710
68	Kharkiv city charitable foundation "Nadiia ie"	GF	Kharkiv region	3	67 011	58 118
69	Kharkv regional Public organization "Positive"	GF	Kharkiv region	2	39 993	25 104
70	Kharkiv city bransh of All-Ukrainian Network of PLWH	GF	Kharkiv region	1		21 044
71	Kharkiv Regional Charitable Foundation "Sail"	GF	Kharkiv region	2	45 054	17 553
72	State Institution "Institute of Dermatology and Venereology Academy of Medical Sciences of Ukraine"	GF	Kharkiv region	1	23 979	14 767
73	Kherson regional charitable foundation "Mangust"	GF, US	Kherson region	10	333 373	314 789
74	Public organization "For equal rights"	GF, US	Kherson region	3	57 335	44 930
75	Kherson Public organization "Adaptation centre "Vybir zhyttia"	GF	Kherson region	2	13 704	13 449
76	Association of Assistance of Drug Addiction Problems "Victoriya"	GF	Khmelnitskiy region	3	161 465	149 235
77	Charitable foundation "Return to life"	GF	Kirovograd region	3	166 764	164 739
78	Kirovograd regional Branch of Charitable Organization "All-Ukrainian Network of PLHW"	GF	Kirovograd region	2	14 198	11 745
79	Svitlovodsk Central district hospital	GF	Kirovograd region	1	1 013	1 012

Table 1 Continued

Nº	NGO Name	Donors programme (*)	Region	Total amount of projects	Signed Obligations (USD)	Funded (USD)
	Municipal Alexandria Narcological Dispensary	GF	Kirovograd region	1	1 011	1 011
81	KCCO Ukrainian Institute of Public Health Policy Research	GF	Kyiv city	5	667 745	616 417
82	National AIDS Center	GF	Kyiv city	4	488 845	343 637
	International Public Organization "Labor and Health Social Initiatives"	GF	Kyiv city	2	343 331	335 780
	Public organization "Eney Club"	GF	Kyiv city	2	346 292	305 994
	Public organization "Gay Alliance"	GF	Kyiv city	3	241 054	255 843
	International Charitable Organization AIDS Foundation "East – West"	GF	Kyiv city	1		254 736
87	International charitable foundation "Vertikal"	GF, US	Kyiv city	5	278 002	178 697
	Public organization "Step by Step"	GF	Kyiv city	2	153 752	156 810
89	All-Ukrainian Charitable Organization "Convictus Ukraine"	GF	Kyiv city	3	175 780	146 362
	Charitable foundation "Drop In Center"	GF, US	Kyiv city	4	132 993	126 414
91	Public organization "Ukrainian Institute of Public Health Policy Research"	US	Kyiv city	2	90 833	91 342
	Public organization "Socium XXI"	GF	Kyiv city	2	77 498	64 341
93	Gay-Alliance Ukraine	GF	Kyiv city	2	68 700	54 199
94	City Social Services for Youth	US	Kyiv city	2	82 773	53 753
	All-Ukrainian Harm Reduction Association	GF	Kyiv city	2	15 456	47 845
96	Ukrainian medical and monitoring center on alcohol and drugs of the Ministry of Health of Ukraine	GF	Kyiv city	1		41 228
97	Kyiv regional charitable foundation "Nadiya ta Dovira"	GF	Kyiv city	3	425 186	23 804
98	All-Ukrainian Charirable organization "Spil'nota"	GF	Kyiv city	1	18 808	18 808
99	Charitable foundation "NIKA KYIV"	GF	Kyiv city	2	36 392	16 205
	Red Cross Society of Ukraine	GF	Kyiv city	3	15 936	15 154
	Charitable Foundation "All-Ukrainian League "Legalife"	GF	Kyiv city	1	43 720	14 385
	Kiev City Clinical Hospital #5	GF	Kyiv city	1	10 770	10 770
	All-Ukrainian Charitable Foundation "Tochka Opory"	GF	Kyiv city	1	24 999	8 596
	Kyiv oblast public organizaton "Feniks"	GF	Kyiv city	1	23 659	7 514
105	Kiyv City Branch of International Charitable organization "RC "Skhody"	GF	Kyiv city	1		4 198
106	Charitable organisation "Aura+", Bila Tserkva	GF	Kyiv region	2	56 856	32 323
107	Brovary city charitable foundation "Peremoga"	GF	Kyiv region	2	22 934	16 983
	"Peremoga" Public organization "Foundation of assistance "Life"	GF	Kyiv region	1	18 964	7 359
	Lugansk charitable foundation "Step to Future"	GF	Lugansk region	5	110 098	245 832

Table 1 Continued

Nº	NGO Name	Donors programme (*)	Region	Total amount of projects	Signed Obligations (USD)	Funded (USD)
110	Lugansk charitable foundation "Anty Snid"	GF	Lugansk region	2	60 751	62 310
	Lviv charitable foundation "SALUS"	GF	Lviv region	2	174 867	158 226
112	Charitable foundation "Avante"	GF	Lviv region	2	32 223	27 405
113	Lviv City public organisarion "Center of inner and psychological support "Doroga"	GF	Lviv region	2	14 719	17 792
	Charitable foundation "Nazareth"	GF	Lviv region	1		5 114
115	Mykolayiv regional charitable foundation "Nove Storychhya"	GF, US	Mykolayiv region	6	315 169	238 822
116	Mykolayiv city charitable foundation "Unitus"	GF, US	Mykolayiv region	3	242 809	237 041
11/	Mykolaiv association of HIV-infected "Chas Zyttya"	GF, US	Mykolayiv region	6	164 066	117 165
118	Mykolayiv city charitable foundation "Vyhid"	GF	Mykolayiv region	2	111 141	103 388
119	Mykolayiv Association of Gays, Lesbians and Bisexuals "Liga"	GF	Mykolayiv region	3	52 249	43 328
120	Mykolayiv Regional public youth movement "Penitenciarna iniciatyva"	GF	Mykolayiv region	2	38 177	35 753
	Mykolayiv regional charitable foundation "Vita-Light"	GF, US	Mykolayiv region	3	31 432	29 864
	Charitable foundation "Healthy Nation"	GF	Mykolayiv region	2	21 657	17 766
123	Charitable foundation "The Way Home"	GF, US	Odesa region	8	510 924	493 084
124	Public organization "Youth Center for Development"	GF	Odesa region	3	203 907	188 136
125	Public Movement "Faith, Hope, Love"	GF	Odesa region	2	151 043	147 734
	Youth public movement "Partner"	GF, US	Odesa region	6	136 894	121 342
127	Charitable organization "Christian Rehabilitation Center "Blagodat", Odesa	GF, US	Odesa region	3	66 313	60 277
	Union of public organizations "Razom za zhyttia"	GF, US	Odesa region	6	68 236	52 605
129	Charitable foundation "Veselka"	GF, US	Odesa region	5	52 989	43 933
130	Public youth organization "Club of assistance "Life +"	GF	Odesa region	1	19 279	7 008
131	Public organisation "Era Myloserdya"	GF	Odesa region	1	19 382	6 958
	Odessa regional Narcological Dispensary	GF	Odesa region	1	6 846	6 846
133	Charitable foundation "Public Health", Poltava	GF	Poltava region	2	242 422	204 610
	Charitable Association "Svitlo Nadiyi"	GF	Poltava region	6	102 901	132 046
135	International Charitable Organization "Federation "Klubnyi Dim"	GF	Poltava region	2	23 889	20 102
136	Poltava regional AIDS Center	GF	Poltava region	1	1 006	1 006
	Charitable foundation "The future without AIDS"	GF	Rivne region	3	111 726	86 486
138	Charitable foundation "Pace Forward to Meeting"	GF	Sumy region	3	173 861	160 077
139	Sumy Regional Youth Public Organization "Club for resocialization of chemically- abusive people "Shans"	GF	Sumy region	2	15 966	12 173

Table 1 Continued

	Name	Donors programme (*)	Region	Total amount of projects	Signed Obligations (USD)	Funded (USD)
Ternopil public organisand psychological sup	sarion "Center of inner port "Dzerela"	GF	Ternopil region	4	49 525	46 621
141 Vinnytsya Region Publ	lic Congress "Stalist"	GF	Vinnytsya region	2	94 486	110 729
Public organization "C 142 of chemically depende "Nezalezhnist"	enter of resocialization ent people	GF	Vinnytsya region	5	90 246	81 136
143 Vinnitsya regional Nar "Sociotherapy"	cological Dispensary	GF	Vinnytsya region	1	1 012	1 012
Volynskyj regional cha "Shans"	ritable foundation	GF	Volyn region	4	81 673	72 402
145 Volynskiy oblast Narco	logical Dispensary	GF	Volyn region	1	1 010	1 010
Zakarpattia regional c "Rada zhyttia"	haritable foundation	GF	Zakarpattya region	2	31 241	34 789
Zakarpattia regional cl antialcohol, antinarco	haritable foundation of tics, antitobacco Il addictions prevention	GF	Zakarpattya region	2	7 604	6 018
148 Zakarpatsky oblast Na	rcological Dispensary	GF	Zakarpattya region	1	1 012	1 012
149 Charitable foundation	"Spodivannia"	GF	Zaporizzhya region	3	106 757	74 519
Zaporizzya regional Br 150 Organization "All-Ukra PLHW"		GF, US	Zaporizzhya region	5	70 491	74 177
151 Charitable foundation	"Zhyttya Tryvae"	GF	Zaporizzhya region	3	10 359	12 021
152 Zaporizhzhia regional Society	Branch of Red Cross	GF	Zaporizzhya region	1	5 371	5 371
153 Charitable foundation	"Vse mozhlivo"	GF	Zaporizzhya region	1	6 083	2 031
154 Zaporizhia regional TB	Dispensary	GF	Zaporizzhya region		1 440	
255 Zhytomyr Oblast Publi "Perspektyva"	c organization	GF	Zhytomyr region	5	121 031	73 596
156 Novograd-Volynskiy ch "Nehay tvoe sertse b'e		GF	Zhytomyr region	1	20 944	7 584
Всь	юго:			352	13 466 830	11 883 947

^{*} Funding programs:

GF — Alliance Ukraine grant within Global Fund programs;

US — Alliance Ukraine grant within USAID programs;

OSI — Alliance Ukraine grant within Open Society Institute (OSI) programs.

Table 2. Tabulated data on amounts of medical products supplied by ICF "International HIV/AIDS Alliance in Ukraine" under the grant agreements to organizations around Ukraine in 2010 (by units)

ו	,																			
8	Name of the implementing partner	Region	Needles for Injection	səgniny2 lm S	səɓuኲʎs յա s	29 aringes	20 ml Syringes	Alcohol wipes	HIV Rapid tests for	syphilis	Chlamydia	gonorrhea	tests Rapid tests for	Hepatitis B	Hepatitis C Rapid test kits	, vilinqys, VIH) (J.q9H , 8.q9H	smobnoo 915M	smobnoo 915M	Female condoms	Lubricant
\vdash	Charitable foundation "Insight"	Cherkasy region	24 000	24 000 185 700 183 40	183 400	36 800	13 440 4	443 520	630	300	180	230	120			.4	418 080 8	86 400	3 000	48 000
2	Charitable foundation "VAM"	Cherkasy region	32 600	72 300	71 500	13 300	9 040 1	198 880	530	297	520	880	370	267	120	380 11	115 920			15 000
n	Charitable foundation "Volia"	Cherkasy region	10 600	74 100 145 50	145 500	45 600	10 320 28	286 180	388	175	228	244	06	85	80	100	99 408		1 000	12 000
4	Public organization "Gay-alliance Cherkasy"	Cherkasy region							06	37		230	250	29	70	100 7	70 560		1 000	36 000
5	Public organization "Dialog", Smila	Cherkasy region	7 600	93 900	000 99	19 900	8 160 19	195 640	464	159	343	310	140	30	40	50 13	130 824			15 000
9	Regional charitable organization "Argo", Drabiv	Cherkasy region	1 400	2 800	4 200	1 500	720	10 800	20	20	20	20					000 9			
7	Charitable Foundation "From Heart to heart"	Cherkasy region	5 000	93 900 100 60	100 600	15 800	11 680 2	227 140	380	160	110	200	140	100	120	120 12	124 080	64 800		000 99
∞	Cherkassy regional Branch of Charitable Organization "All- Ukrainian Network of PLHW"	Cherkasy region	700	12 500	10 100	200	640	24 440	1 200		1 200						3 000			1 000
6	Cherkasy regional charitable foundation "With love to children"	Cherkasy region	38 300	38 300 106 800 101 10	101 100	12 000	11 200 20	269 540	177	54	123	230	40	89	80	120 12	124 680			12 000
10	Gorodnya city Center of Social Services for family	Chernigiv region	009	1 200	1 700	009	320	4 600	20	10	10	10					3 000			
11		Chernigiv region	1 400	2 800	4 200	1 500	720	10 800	50	20	20	20					000 9			
12	Prilyku city Center of Social Services Chernigiv for family	Chernigiv region	3 000	6 700	5 800	009	720	16 820	146	153	191	420	200	108						1 000
13		Chernigiv region	28 900	43 900	48 000	9 300	5 520 1.	135 620	06	10	09	310	20	120	140	230 4	43 680		1 000	24 000
14	Chernivci regional public organization "People of Bukovyna"	Chernivtsi region							90	40				40			28 800			3 000
15	Chernivtsi regional Branch of Red Cross Society	Chernivtsi region	2 600	006 6	11 300	1 400		25 200									24 000			24 000
16	Chernivtsi CF "Zyttya zarady zyttya"	Chernivtsi region																	2 000	
17	17 Charitable foundation "New family"	Chernivtsi region	14 800	14 800 132 700 162 00	162 000	56 300	36 320 40	402 240	440	398		90	150	89	09	520 17	170 520 1	115 200	3 000	21 000
18	Bakhchysarai charitable foundation "Center for Re-socialization of Drug Addicted Youth "Your Voictory"	Crimea	5 700	29 200	35 600	10 100	5 120	85 880	583	382	634	970	270	83		.,	21 000			000 9

Š	Name of the implementing partner	Region	eedles for noitoein	səgniny2 In	səgniny2 In	səgniny2 Jm	səgning2 Jm	onor wipes	VIH oid tests for	syphilis oid tests for	hlamydia oid tests for	onorrhea d pregnancy	tests rot stest bio	epatitis B nid tests for	epatitis C vid test kits V, syphilis,	(J.qəH ,8.c	swopuoo ə	swopuoo əje	tnsoindu.	
			I PN	n S	u g	101				Kap	Rap		Ksp	Rap	Rap (HI		JEM	Fems	1	
19	19 Crimea republic fund "Gelios" 20 CF "Ariadna"	Crimea							45	56	54	74	30	14		40 3	320	1 000		000 6
21	undation "Hope &	Crimea	84 300	84 300 111 000 230 7	00,	009 09	12 400 499 000		1 087	532 2	268 4	434 2	220	62		355 800	00 352 800		66	000
22	Youth Public organization "Your Victory"	Crimea	3 800	17 700	21 900	6 300	3 200 52	940	138	59	81 1	116	30	14		105 000	00		0 9	000 9
23	Public organization "Feniks"	Crimea							112	85	96 1	150	06	201		15 120	20		0 6	000
24 25	Ministry of Public Health (Crimea) Youth center of women's initiatives	Crimea Crimea	20 800	20 800 103 900 177	006	55 100	25 040 382	840	672	330 2	296	375 1	180	111 1	110 1	900 000 170 435 120	100	800 3 000	000 36 000	000
26	Public organization "Z nadiyeyu"	Dnipropet- rovsk region														15 0	000		12 0	000
27	Charitable organisation "HELP"	Dnipropet- rovsk region	55 000	59 500	47 900	12 500	8 320 191 060	090	280	129 1	165 1	130	50	82		7 7 7	400 14 400	00	0 9	000
28	Ordzhonikidze city charitable foundation "Dopomoga"	Dnipropet- rovsk region		46 000	38 800	17 940	12 640 115	115 400	203	99 1	121 1	196	50	212		615	260		12 0	000
29	Charitable foundation "Virtus"	Dnipropet- rovsk region							394	288 4	8 955	836 2	250	94	20	986 02	040	2 000	27	000
30	Charitable foundation "Public Health", Kryviy Rig	Dnipropet- rovsk region	28 500	28 500 791 400	000 06	46 700	26 960 983 680		1 070	494	532 10	1 008 1	190	216 1	100 1(160 319 9	920 93 60	900 8 009	15	000
31	Charitable foundation "Oberih Plus"	Dnipropet- rovsk region	000 9	12 100	18 600	9 300	3 120 46	500	180	80	09	09	10			37 3	320	1 000	m	000
32	Public organization "The Road of Life"	Dnipropet- rovsk region	5 000	42 500	49 000	5 300	2 880 104	. 680	330 2	268 1	145 3	374	20			42 0	000		0 6	000
33	Public organization "Drevo Zhyttya"	Dnipropet- rovsk region	2 200	4 400	008 9	2 300	1 120 17	000	40	10	20	20		30	40	60 12 000	00		3 0	000
34	Public organization "Impuls"	Dnipropet- rovsk region	29 600	74 000	009 29	32 400	32 080 235	200	581	302 3	360 2	250 1	160	65		8 96	360 57 60	600 2 000	15	000
35	Dnipropetrovsk region public organization "Open doors"	Dnipropet- rovsk region	90 500	90 500 137 000 114 2	00	908 09	28 960 431	431 080	572 2	291 2	289 5	534 1	130	126 1	130 67	610 209 640	40 36 000	000 1 000	27	000
36	Dnipropetrovsk public organization "Perekhresttya"	Dnipropet- rovsk region	1 300	17 900	24 200	3 500	4 080 50	086	122	1 96	156 4	409	70	63		15 0	000		3.0	000
37	Charitable foundation "Promin", Zhovti Vody	Dnipropet- rovsk region	13 200	78 700	54 600	7 800	4 320 158 700	200	371 2	207 2	289 2	250 1	100	44		24 000	00		0 9	000
38	Kryvyy Rig city charitable organization "Our Future"	Dnipropet- rovsk region	008 9	58 500	41 800	7 400	2 000 116	200	341 2	210 2	266 5	555 1	140			84 3	360 158 40	400 3 000	18	000
39		Dnipropet- rovsk region							210	35 1	135 1	120	40	179 1	120 19	190 705	260	1 000	0 36 000	000
40	City public centre of drug-addicted "Future without AIDS"	Dnipropet- rovsk region	28 100	008 99	46 800	18 500	26 960 187 220	220	196	90 1	124 1	120	40	∞ ∞		510	000 14 400	00	0 9	000 9

Table 2 Continued

15 000 45 000 33 000 3 000 18 000 3 000 0009 0009 27 000 12 000 3 000 15 000 33 000 0009 3 000 12 000 27 000 9 000 Lubricant 1 000 1 000 2 000 1 000 2 000 1 000 1 000 1 000 Female condoms 50 400 14 400 28 800 7 200 200 009 14 400 144 000 900 Male condoms 43 129 57 81 000 162 840 17 400 146 880 42 000 0006 83 040 45 000 28 080 74 040 31 440 153 720 0006 18 000 181 440 89 040 153 600 98 280 308 280 Male condoms 40 30 260 460 110 100 520 120 200 (J.q9H, &.q9H , silindys , VIH) Rapid test kits 160 30 20 200 160 80 9 9 J sititsq9H Rapid tests for 22 40 20 21 203 140 256 50 9 50 **Hepatitis B** Rapid tests for 50 20 270 10 160 50 40 300 140 120 510 150 130 100 150 **s**asaa Rapid pregnancy 10 09 140 50 1210 1270 510 240 130 440 347 690 130 220 220 200 donorrhea Rapid tests for 10 46 150 50 775 1 197 142 283 123 629 573 294 236 247 219 792 chlamydia Rapid tests for 10 118 413 185 20 115 80 348 278 140 20 125 371 204 132 237 87 302 silidqys Rapid tests for 99 278 115 1 000 1364 308 09 50 845 809 392 698 680 312 302 920 ΛIΗ Rapid tests for 10800 16800 440 5 780 149 120 38 960 412 640 120 090 760 120 11 200 132 840 140 28 800 478 780 460 096 Alcohol wipes 309 419 156 62 541 149 274 197 327 3 440 30 800 22 080 1 120 14 480 11 040 20880 27 360 440 720 43 280 880 17 920 20 ml Syringes 27 39 500 21 000 2 600 16 700 26 900 16 400 46 000 58 100 17 200 2 300 1 500 1 100 57 500 200 700 25 300 10 ml Syringes 29 31 35 900 47 000 100 300 100 1 300 65 100 134 500 116 400 900 700 700 000 200 400 500 9 700 5 ml Syringes 18 116 184 28 163 47 160 38 114 91 12 400 104 300 4 300 216 300 500 700 2 800 1 800 50 500 400 000 47 300 142 000 200 700 134 300 շ ալ շ<mark>մ</mark>ւսնեշ 55 62 109 54 17 600 20 400 11 800 20 300 21 900 30 600 19 900 2 200 1 400 25 900 33 900 700 400 45 800 Injection 16 18, Needles for rovsk region rovsk region rovsk region Dnipropet-Dnipropet-Region Dnipropet-Charitable foundation "Zahid Shans" Frankivsk Donetsk Donetsk Donetsk region Donetsk Society of assistance for the Donetsk region region Donets region region region region region region region region Charitable foundation "Health of the "Family support Public organisation "Liniya Zhyttia" Public organization "Mariupil Youth Slov'jansk City Public organisation "Nasha Dopomoga" Pavlograd Charitable Organisation Public organization "Your choice" Charitable organization "The new Regional charitable organization "Road to Life" Public organization "Stimulus ! implementing partner Charitable foundation "Caritas Donetsk" Public organization "Amikus" Donetsk Youth Organization Donetsk regional Charitable Donetsk regional charitable Donetsk regional charitable Public organization "Istok" "Development. Initiative. Name of the Foundation "Svitanok" foundation "Promin" Public organization foundation "Oberig" HIV-infected centre" day" ٤ 42 47 48 43 44 45 46 49 50 51 52 53 54 55 99 57 58 59

Table 2 Continued

14 000 15 000 3 000 3 000 42 000 0009 27 000 75 000 3 000 0006 48 000 27 000 18 000 33 000 33 000 0009 42 000 0009 000 Lubricant 8 000 4 000 0009 000 2 000 1 000 8 000 Female condoms 432 000 14 400 320 370 344 288 000 800 200 650 238 320 417 600 172 800 Male condoms 9 79 1 500 0006 255 000 74 040 72 600 50 640 18 000 30 000 48 000 63 000 79 560 450 000 240 840 229 440 18 000 579 360 700 171 840 60 74 880 Male condoms 170 100 40 500 240 360 250 (J.qeH ,8.qeH (siJidqys ,VIH) Rapid test kits 320 110 210 30 150 70 30 140 110 420 J sititsq9H Rapid tests for 248 36 20 09 20 733 250 201 77 230 107 357 **Hepatitis B** Rapid tests for 09 90 30 170 170 90 20 130 9 350 30 330 340 stsət Rapid pregnancy 740 90 80 800 9 30 760 160 400 09 420 200 150 donorrhea Rapid tests for 1 207 40 30 803 300 84 427 390 282 100 182 91 Chlamydia Rapid tests for 470 10 790 230 370 158 40 20 30 64 27 43 196 187 siJidqys Rapid tests for 70 2 160 170 272 1434 536 350 148 990 440 254 100 80 100 162 ΛIΗ Rapid tests for 163 800 63 340 18800 620 8 320 175 820 51 120 878 700 099 43 680 397 880 120 700 200 760 46 880 468 620 Alcohol wipes 112 22 201 278 97 61 20 080 3 25 360 7 120 0809 35 300 3 440 1840 1 280 11840 800 20 ml Syringes 700 32 400 29 300 81 200 88 300 9 400 12 100 54 900 12 000 2 600 700 5 500 3 200 10 ml Syringes 67 34 900 158 900 172 900 53 400 21 800 78 500 172 200 495 500 500 000 500 95 700 148 500 009 200 8 800 36 200 8 100 sagninge Im 2 06 63 39 23 43 500 6 100 46 300 17 400 26 600 900 5 500 60 500 94 200 000 35 800 4 800 saguing symuges 32 20 14 700 28 400 19 300 100 1 700 20 600 5 900 2 500 19 300 9 400 2 700 Injection 23 Needles for Khmelnitskiy Khmelnitskiy Kyiv region Kyiv region Kyiv region Kirovograd Lviv region Lviv region Lviv region Region Lviv region Mykolayiv Kherson Kherson Lugansk "Step Lugansk Kharkiv Kharkiv Kharkiv region region region Kharkiv region region region Kharkiv region region region region Lugansk charitable foundation "Anty Snid" Hospital – Regional Centre for Family Kharkv regional Public organization Lviv City public organisarion "Center Kharkiv city bransh of All-Ukrainian Lviv charitable foundation "SALUS" of inner and psychological support "Foundation of Planning and Human Reproduction Kharkiv city charitable foundation Kharkiv city charitable foundation Kharkiv Regional Centre for Family Brovary city charitable foundation "Peremoga" Association of Assistance of Drug Charitable foundation "Return to life" Charitable foundation "Nazareth" Charitable organisation "Aura+", Addiction Problems "Victoriya" Khmel'nyts'kyi Regional Clinical Charitable foundation "Healthy Nation" Lugansk charitable foundation Charitable foundation "Avante" Public organization "For equal implementing partner Kherson regional charitable Kharkiv Regional Charitable Name of the foundation "Mangust" Public organization **Network of PLWH** Foundation "Sail' assistance "Life' "Nadiia ie" Planning to Future" "BLAG0" rights" **Tserkva** ટ 77 778 9 61 62 63 64 9 99 67 89 69 70 71 72 73 74 75 79 80

Table 2 Continued

21 000 48 000 33 000 54 000 42 000 150 000 33 000 12 000 15 000 12 000 5 000 9 000 24 000 000 000 Lubricant 24 27 1 000 5 000 1 000 1 000 1 000 2 000 3 000 3 000 1 000 Female condoms 1 396 800 28 800 72 000 43 200 800 520 131 040 122 400 900 200 Male condoms 666 000 151 28 57 197 160 1 136 12 000 139 200 94 512 360 139 200 56 640 12 000 89 040 152 160 325 440 70 631 080 174 240 000 009 Male condoms 237 80 70 120 200 320 750 80 (J.qeH, &.qeH , silindys , VIH) Rapid test kits 230 50 20 40 80 40 90 20 140 J sititsq9H Rapid tests for 99 17 30 30 70 190 320 327 217 100 40 **Hepatitis B** Rapid tests for 1070 570 09 80 20 30 09 130 70 170 400 390 537 stsət Rapid pregnancy 1 170 1010 242 740 30 30 099 900 200 630 83 270 220 150 320 gonorrhea Rapid tests for 245 110 30 30 270 705 364 945 441 890 186 604 397 091 203 chlamydia Rapid tests for 390 517 315 40 40 657 790 360 196 140 568 120 09 130 320 254 silidqys Rapid tests for 415 1 190 2 147 778 554 896 575 858 100 100 204 989 408 230 334 ΛIΗ Rapid tests for 21 200 68 220 64 680 21 200 674 540 904 400 65 840 365 480 099 420 700 13 520 136 820 59 920 333 800 440 Alcohol wipes 456 163 213 80 10800 158 13 520 2 18 240 2880 1 440 1 440 3 360 16 000 3 920 34 640 920 20 ml Syringes 87 63 900 0006 12 400 2 900 2 900 4 400 126 200 906 200 673 700 110 600 18 700 16 600 30 900 300 99 400 47 000 11 600 10 ml Syringes 61 119 000 8 400 24 800 52 900 900 800 000 009 8 400 100 800 38 000 258 500 5 ml Syringes 174 104 102 26 61 67 24 200 66 100 55 800 5 500 22 400 179 500 000 100 400 5 500 248 800 40 300 22 900 35 800 շ ալ շ<mark>մ</mark>ւսնեշ 81 61 11 400 12 300 2 800 2 800 14 600 3 700 100 3 300 100 85 600 21 200 700 Injection 15 35 Needles for Odesa region Odesa region Odesa region Odesa region Odesa region Rivne region Public organisation "Era Myloserdya" Odesa region Odesa region Odesa region Sumy region Region **Mykolayiv** Mykolayiv **Mykolayiv** Mykolayiv **Mykolayiv** Ternopil Poltava Ternopil region region region region region Mykolayiv city charitable foundation Mykolayiv city charitable foundation Charitable foundation "Pace Forward Ternopil public organisarion "Center Ternopil public organisarion "Cente Public youth organization "Club of of inner and psychological support of inner and psychological support Rehabilitation Center "Blagodat", Municipal Agency "Odesa Regiona Charitable organization "Christian Public organization "Youth Center Charitable foundation "The future Youth public movement "Partner' Mykolayiv Regional public youth Charitable foundation "The Way Public Movement "Faith, Hope, foundation "Nove Storychhya" implementing partner Mykolayiv Association of Gays, Mykolayiv regional charitable Charitable Association "Svitlo Charitable foundation "Public Lesbians and Bisexuals "Liga' movement "Penitenciarna Name of the assistance "Life +" for Development' Clinical Hospital Health", Poltava without AIDS' to Meeting" "Unitus Love" 88 ٤ 82 91 81 83 84 85 86 87 89 90 92 93 94 95 96 97 98

Table 2 Continued

123 000 63 000 6 000 30 000 0009 48 000 12 000 3 000 45 000 0009 15 000 21 000 12 000 9 000 18 000 Lubricant 000 9 4 000 1 000 2 000 1 000 4 000 0009 Female condoms 620 487 440 540 580 296 432 000 53 520 86 400 64 800 28 800 800 374 400 208 800 108 000 Male condoms 28 112 200 136 200 348 120 88 800 180 000 177 192 109 920 39 000 48 960 000 99 144 600 000 009 450 000 136 560 450 000 smobnoo əlaM , silidqys ,VIH) (D.q9H ,8.q9H 20 50 170 780 9 30 Rapid test kits 60 520 50 09 30 20 100 490 100 J sititsq9H Rapid tests for 20 400 50 430 7 130 90 167 197 20 30 247 **Hepatitis B** Rapid tests for 300 110 160 70 70 340 50 440 30 90 250 150 260 stsət Rapid pregnancy 250 330 130 160 520 10 70 30 330 410 680 90 734 97 gonorrhea Rapid tests for 368 250 40 46 345 379 693 99 153 368 100 80 30 189 **Eibymeld** Rapid tests for 10 170 344 657 62 568 276 20 50 312 270 120 267 silidqys Rapid tests for 378 254 1015 1496 154 956 312 794 360 398 20 575 ΛIΗ Rapid tests for 92 380 94820 64 300 940 300 620 125 800 200 200 220 7 600 38 960 1 180 220 4 080 66 320 Alcohol wipes 147 19 520 103 164 140 27 367 7 120 8 400 16 720 1840 18 320 6 400 19 200 3 280 300 20 ml Syringes 28 900 85 400 5 200 14 200 12 400 25 900 16 100 14 900 3 700 25 500 1 000 6 700 4 260 10 ml Syringes 503 100 21 800 800 400 400 100 68 300 400 800 11 000 400 100 3 000 5 ml Syringes 36 47 99 23 135 32 27 47 355 800 23 900 5 500 7 100 3 000 29 900 41 200 21 200 128 300 900 41 900 59 000 22 700 s ալ Տչringes 30 11 300 2 000 6 100 000 09 8 600 16 900 100 11 200 3 500 10 600 57 200 300 Injection 19 Needles for Volyn region 107 Charitable foundation "Spodivannia" Zaporizzhya Zaporizhzhia regional Branch of Red Zaporizzhya Volyn region Zaporizzhya Zaporizzhya Zakarpattya Zaporizzhya Vinnytsya Region Vinnytsya Vinnytsya Kyiv city Kyiv city Kyiv city Zhytomyr Zhytomyr Kyiv city Kyiv city Kyiv city Kyiv city region region region region region region region region Zhytomyr Oblast Public organization 110 regional centre for rehabilitation of Vinnytsya Region Public Congress 117 Public organization "Gay Alliance" Volyn' Regional Territorial Medical 113 Charitable foundation "NIKA KYIV Organization "Convictus Ukraine" Municipal Agency "Zaporizhzhya dependent people "Nezalezhnist 118 Public organization "Eney Club" 119 Red Cross Society of Ukraine Charitable foundation "Zhyttya 100 Vinnytsya regional AIDS Center Zakarpattia regional charitable 112 foundation "Nehay tvoe sertse human reproductive function" implementing partner Public organization "Center of Zaporizzya regional Branch of Novograd-Volynskiy charitable resocialization of chemically Volynskyj regional charitable 109 Charitable Organization "All-Charitable foundation "Drop Center" Ukrainian Network of PLHW" foundation "Rada zhyttia" Name of the All-Ukrainian Charitable All-Ukrainian Charirable organization "Spil'nota" foundation "Shans" Union for Children 111 "Perspektyva" Cross Society b'etsya" 103 ટ 101 104 105 108

Table 2 Continued

0009 39 000 45 000 21 000 9 000 $14\,000|21\,473\,280|5\,976\,000|\,113\,000|\,2\,397\,000$ Lubricant Female condoms 800 64 Male condoms 0009 247 320 254 040 0006 30 000 716 760 0006 Male condoms , silidqys ,VIH) (J.q9H ,8.q9H 850 Rapid test kits 50 017 21 890 27 247 31 915 14 287 10 5447 500 380 D sititsq9H 1 122 1 300 Rapid tests for 67 310 25 Rapid tests for Hepatitis B 09 130 90 100 stsət Rapid pregnancy 370 190 670 237 donorrhea Rapid tests for 316 150 322 498 Chlamydia Rapid tests for 20 78 515 654 158 siJidqys Rapid tests for 1 375 1 436 515 240 202 ΛIΗ Rapid tests for 096 1058740 $2\ 230\ 300|\ 7\ 755\ 200|\ 7\ 880\ 500|\ 2\ 395\ 600|\ 1\ 453\ 440|\ 21\ 731\ 340|$ 323 700 591 Alcohol wipes 42 400 15 920 46 000 20 ml Syringes 126 400 78 000 21600 10 ml Syringes 389 300 300 118 500 187 չ ալ շմպսնեշ 165 400 368 800 114 200 s ալ Տչringes 00989 53 400 176 500 Injection Needles for Region Kyiv city Kyiv city Kyiv city Public Organization Kyiv "Labor and Health city Kyiv city Kyiv city Public organization I "Step by Step" 121 City Social Services for Youth 124 Organization AIDS Foundation "East – Kiyv City Branch of International Cha-Social Initiatives" implementing organization "RC Name of the SSSUNTU "Kyiv partner International International International **Total:** charitable foundation "Vertikal" 125 Polytechnic Charitable Institute" "Skhody" 120 ritable å 123

Table 2 Continued

Annex 5. Auditor's Opinion on 2010 Consolidated Financial Statements (Together With Independent Auditors' Report)



JSC KPMG Audit 11 Mykhaylivska St 01001 Kyiv Ukraine Telephone Telefax Internet

+380 (44) 490 5507 +380 (44) 490 5508 www.kpmg.ua

Independent Auditors' Report

To the Board of Directors

International Charitable Foundation "International HIV/AIDS Alliance in Ukraine"

We have audited the accompanying consolidated financial statements of International Charitable Foundation "International HIV/AIDS Alliance in Ukraine" and its subsidiary LLC "Alliance-Ukraine Consultancy" (together referred to as the "Organization"), which comprise the consolidated balance sheet as at 31 December 2010, the consolidated statements of operations, changes in equity and cash flows for the year then ended, and notes, comprising a summary of significant accounting policies and other explanatory information.

Management Responsibility for the Consolidated Financial Statements

Management is responsible for the preparation and fair presentation of these consolidated financial statements in accordance with National Accounting Standards of Ukraine, and for such internal control as management determines is necessary to enable the preparation of consolidated financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to express an opinion on these consolidated financial statements based on our audit. We conducted our audit in accordance with International Standards on Auditing. Those standards require that we comply with ethical requirements and plan and perform the audit to obtain reasonable assurance about whether the consolidated financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the consolidated financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the consolidated financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the consolidated financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates made by management, as well as evaluating the overall presentation of the consolidated financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.



Independent Auditors' Report Page 2

Opinion

In our opinion, the consolidated financial statements present fairly, in all material respects, the financial position of the Organization as at 31 December 2010 and its financial performance and its cash flows for the year then ended in accordance with National Accounting Standards of Ukraine.

Restriction on Use

This report is intended for the information and use of International Charitable Foundation "International HIV/AIDS Alliance in Ukraine", International HIV/AIDS Alliance (United Kingdom) and the United States Agency for International Development (USAID) and should not be used for any other purpose.

75C WATG KUE

JSC KPMG Audit Audit license #2397 from 26 January 2001 EDRPOU Code 31032100

1 June 2011

Andriy Tsymbal Director JSC KPMG Audit

Certified auditor Certificate: Series A №005964

from 19 July 2005

Appendix to National Accounting Standard 2

Entity ICF "International HIV/AIDS Alliance in Ukraine" Date Codes (year, 12 2010 31 EDRPOU 26333816 Location: 03680, Kyiv, 5 10A Dymytrova str. 8038200000 State administration authority: KOATUU SPODU Legal form of activity: Charitable foundation 07994 Business activity: Charity **KVED** 85.32.5 Measurement unit: in thousands of Ukrainian hryvnia Check total

Consolidated Balance Sheet as at 31/12/2010

			DKUD 1801001
ASSETS	Line Code	At the beginning of the period	At the end of period
1	2	3	4
I. Non-current assets			
Intangible assets:			
net book value	010	407	371
historical cost	011	678	828
accumulated amortization	012	(271)	(457
Construction in progress	020	139	
Property, plant and equipment:			
net book value	030	1 581	1 427
historical cost	031	3 348	3 833
depreciation	032	(1 767)	(2 406
Long-term biological assets			
net book value	035	-	
historical cost	036		
depreciation	037	-	
Long-term financial investments:			
	040	12	
accounted for on an equity basis	35.55.56		
other financial investments	045	-	
Long-term receivables	050	-	
Net book value of investment property	055	-	
historical cost of investment property	056		
depreciation of investment property	057	-	
Deferred tax assets	060	-	
Goodwill	065	-	
Other non-current assets	070	-	
Total non-current assets	080	2 127	1 798
II. Current assets			
Inventories :		W-71	
raw materials	100	4 219	35 110
livestock	110		
work in progress	120		
finished goods	130	-	
merchandise	140		
Promissory notes received	150	-	
Trade accounts receivable			
net selling price	160	99	
historical cost	161	99	
bad debt provision	162		
Prepayments and taxes receivable			
taxes and duties receivable	170	204	3
advances paid	180		
accrued income	190	-	
intercompany settlements	200	-	
Other current receivables	210	23 930	13 028
Current financial investments	220	-	0.000000
Cash and cash equivalents:			
Ukrainian hryvnia	230	4 288	2 361
Including petty cash	231		200
foreign currency	240	64 953	47 165
Other current assets	250	0,000	71
Total current assets	260	97 693	97 738
III. Deferred expenses	270	24	1 437
IV. Fixed assets and groups of disposal	275	24	1 437
		20.011	100.000
TOTAL ASSETS	280	99 844	100 973

EQUITY AND LIABILITIES	Line	At the beginning of the period	At the end of period
	2	3	4
I. Equity	- 4	J	
	300		
Authorized capital	310	-	
Share capital	320	-	
Additional paid-in capital	330	-	
Other additional capital	340		
Reserves	350	13 546	14 191
Retained earnings	360	13 340	14 151
Outstanding capital Capital withdrawals	370		
Total equity	380	13 546	14 191
	300	13 340	14 191
II. Accruals for future expenditures and payments	400		1.050
Accruals for employee benefits	400	-	1 259
Other accruals	410	-	
	415	-	
	416	-	
	417		
	418	-	
Special funds	420	82 514	79 383
Total provisions	430	82 514	80 642
III. Non-current liabilities			
Long-term bank loans	440	-	
Other long-term financial liabilities	450	-	
Deferred tax liabilities	460	- 2	
Other non-current liabilities	470	-	
Total non-current liabilities	480		
IV. Current liabilities			
Short-term bank loans	500		
According to Chronic and Association and Management of the Company	540		
Deferred tax liabilities	510		
Promissory notes issued	520	-	
Trade accounts payable	530	633	3 713
Taxes and other payables:			
advances received	540	-	
taxes and duties payable	550		
extra-budgetary payments	560		
insurance fees	570		
salaries and related charges	580		
settlements with participants	590	;*	
intercompany settlements	600		
Liabilities related to fixed assets and groups of disposals held for sale	605		
Other current liabilities	610	1 158	432
Total current liabilities	620	1 791	4 145
V. Deferred income	630	1 993	1 995
TOTAL EQUITY AND LIABILITIES	640	99 844	100 973

Executive Director

(Klepikov A.)

(Zatulyviter L.)

Appendix

to National Accounting Standard 3

Entity

ICF "International HIV/AIDS Alliance in Ukraine"

Date (year, month, day)

Codes 2010 12

Location: 03680, Kyiv, 5 10A Dymytrova str.

State administration authority:

Legal form of activity: Charitable foundation

Business activity: Charity

Measurement unit: in thousands of Ukrainian hryvnia

26333816 **EDRPOU** KOATUU 8038200000 SPODU 07994 **KVED** 85.32.5 Check total

for the year 2010

DKUD 1801003

I. Consolidated income statement

Item	Line code	Reporting period	Prior period
1	2	3	4
Revenues	010	1 025	1 044
Value added tax	015	_	-
Excise duty	020	(48)	(20)
	025	-	-
Other deductions from revenue	030	-	2
Net revenues	035	977	1 024
Cost of revenues	040	-	-
Gross:			
profit	050	977	1 024
loss	055	-	
Other operating income	060	364 940	318 267
Income from recognition of biological assets	061	-	
Administrative expenses	070	(32 461)	(39 171)
Sales expenses	080	-	-
Other operating expenses	090	(332 827)	(278 226)
Loses from recognition of biological assets	091	21	
Financial result of operations :		*	
profit	100	629	1 894
loss	105	-	-
Equity earnings	110	-	-
Other financial income	120	35	15
Other income	130	<u>-</u> 1	-
Financial expenses	140	-	-
Equity losses	150		
Other expenses	160	(19)	.*:

Financial result of operations before tax:	170	645	1 909
profit loss	175	045	1 909
	173		
Financial results from discontinued			
operations	1=0		
profit	176	-	
loss	177	-	
ncome tax on operations	180	-	(6
Income from Income tax on operations	185	-	
Net financial result of operations:	100	645	1 903
profit	190	645	1 903
loss	195	-	
Extraordinary :			
profit	200	-	
loss	205	-	
Extraordinary income taxes	210	-	
Net:			
profit	220	645	1 903
loss	225	-	
Providing of material encouragement	226	-	
II. Components of operating expe	enses		
Item	Line code	Reporting period	Prior period
1	2	3	4
Material expenditures	230	8 205	16 27
Salaries and related charges	240	20 382	21 038
Social charges	250	4 805	5 723
Depreciation	260	832	1 114
Other operating expenses	270	136 671	77 07
Total	280	170 895	121 220
III.Return on equity			
Item	Line code	Reporting period	Prior period
1	2	3	4
Average annual amount of ordinary shares	300	-	
Adjusted average annual amount of ordinary shares	310	-	
Net earnings (loss) per ordinary share	320	-	
Diluted earnings (loss) per ordinary share	330	-	
Dividend per ordinary share	340		

Chief Accountants and (Signature)

Signature

(Klepikov A.)

(Zatulyviter L.)

Appendix to National Accounting Standard 4

Entity ICF "International HIV/AIDS Alliance in Ukraine" Date (year, Codes month, day) 12 2010 31 Location: 03680, Kyiv, 5 Dymytrova str. **EDRPOU** 26333816 8038200000 State administration authority: KOATUU Legal form of activity: Charitable foundation **Business activity: Charity KVED** 85.32.5 Measurement unit: in thousands of Ukrainian hryvnia Check total

Consolidated statement of cash flows

for the	e year 2010		DKUD 1801004
Item	Code	Reporting period	Prior period
1	2	3	4
1. Cash flows from operating activities:			
Income from:	400,000	212320-01	
Production sales(goods, work, services)	010	1 547	836
Bills received repayments	015		
From suppliers and customers prepayments	020		
Prepayments return	030	1 497	4 503
Bank percentages for current accounts	035		<u>*</u>
Budget VAT	040	(=)	
Other tax and charges repayments (obligatory payments)	045	(4)	1
Donations and subventions receiving	050	477.005	107.201
Target financing	060	177 835	197 391
Debtors penalties	070	400.770	140.070
Other income	080	160 779	142 272
Payment for:	000	(7E 2C2)	(56 154)
Goods, work, services	090	(75 263)	(50 154)
Prepayments	095	150	7
Prepayments return	100	(334)	(163)
Employees	105	(17 326)	(16 741)
Business trips expenses	110	(568)	(479)
VAT obligations	115	(81)	(6)
Income tax obligations	120		(7)
Social measures charges	125	(6 585)	(5 552)
Other tax and charges obligations (obligatory payments)	130	(3 108)	(3 617)
Target payments	140	(96 050)	(89 939)
Other expenses	145	(161 598)	(143 099)
Net cash flow before extraordinary events	150	(19 255)	29 246
Cash flow from extraordinary events	160	- 1	18.1
Net cash flow from operating activities	170	(19 255)	29 246
2. Cash flow from investing activities			
Sales of:			
Financial investments	180	-	· ·
Fixed Assets	190	•	-
Properties	200	: and 1	141
Received:			
Interests	210	35	15
Dividends	220	-	(4)
Other income	230	3-	*
Acquisition of:			
Financial investments	240	-	-
Fixed Assets	250	(495)	(1 876)
Properties	260	3.F.	(5)
Other payments	270	-	
Net cash flow before extraordinary events	280	(460)	(1 861
Cash flow from extraordinary events	290	-	
Net cash flow from investing activities	300	(460)	(1 861)

1	2	3	4
3. Cash flow from financing activities			*
Equity income	310	-	12
Loans received	320	-	
Other income	330	-	(*
Debts repayments	340	-	100
Devidends repayed	350	-) Ex-
Other payments	360	-	350
Net cash flow before extraordinary events	370	-	
Net cash flow from extraordinary events	380	£	-
Net cash flow from financing activities	390	-	
Net cash flow for current accounting period	400	(19 715)	27 385
Opening balance	410	69 241	41 844
fluctuations of exchange rates	420	-	12
Clasing Balance	430	49 526	69 241
Executive indicactor *		(Klepikov A.)	
ries acanages (signature)		(Zotubajitor L.)	10

Chief ac AAA THE STREET OF THE

(signature)

(Zatulyviter L.)

to National Accounting Standard 5 (Subject to Order No. 87 of the Ministry of Finance of Ukraine dated March 31, 1999)

> Date (year, month, day) 12.31.2009 **EDRPOU** 26333816 KOATUU 8038200000 SPODU 07994

ZKGNG 98600 KVED 85.32.5 Check total

14 191

ICF "International HIV/AIDS Alliance in Ukraine"

Location: 03680, Kyiv, 5 Dymytrova str. State administration authority:

Legal form of activity: Charitable foundation

Business activity: Charity

Entity

Measurement unit: in thousands of Ukrainian hryvnia

Consolidated statement of changes in equity

for the year 2010 DKUD Code 1801005 form № 4 Additional Other Cod Authorized Share Retained Outstanding Item pald-in additional Reserves Withdrawals е capital capital earnings capital capital capital 10 Balance at the beginning of the year 13 546 13 546 010 Adjustments: Change of accounting policy 020 030 Reversals Other changes 13 546 13 546 050 Adjusted opening balance Assets revaluation: Revaluation increase in property, plant 060 Revaluation decrease in property, plant 070 080 progress Revaluation decrease in construction in Revaluation increase in intangible assets 100 Revaluation decrease in intangible 110 120 130 645 645 Net profit (loss) for the reporting period Retained earnings distributed : Payments to shareholders (dividends) 150 Reinvestment in authorized capital 160 Deductions to reserves 170 Participants' contributions : 180 Capital contributions 190 Capital repayment 200 Capital withdrawals: Repurchase of treasury shares 220 Resale of treasury shares 230 . Annulment of treasury shares 240 Capital withdrawal mpairment of shares below nominal 250 value Other changes in equity: Write-off of irrecoverable losses 260 Assets obtained for free Total changes in equity 645 290

14 191

Balance at the year-end 300 MAN Palma Executive (Klepikov A.) (Zatulyviter L.) Chief асооправлянародну Альяно з ВІЛ/СНІД в Ужраїні Ідентифікаційн 400 инниідо_{16,}

APPROVED. 92 of the Ministry of Finance of Ukraine Bated November 29, 2000 (in wording of Order No. 602 dated October 28, 2003)

Date (year, month, day) EDRPOU KOATUU SPODU

Entity ICF "International HIV/AIDS Alliance in Ukraine" Location: 03680, Kyiv, 5 Dymytrova str.

State administration authority:

Legal form of activity: Charitable foundation Business activity: Charity Measurement unit: in thousands of Ukrainian hryvnia

2009

to the consolidated financial statements Notes

1801008

DKUD Code

Form No. 5

2010

KVED Check total

	Line	Balance at th	e beginning of the year		Revaluation (increase +, decrease -)	, + est	Disposals for the year		arge	Impairme nt losses	Other changes for the year	the year	Bala	Balance at the year-end
Groups of intangible assets		historical accumulated (restated) cost amortization	accumulated	Additions for the year	historical (restated) cost accumulated historical amortization (restated) cos	accumulated	accumulated historical amortization (restated) cost	accumulate d amortization	for the year	for the year	historical (restated) cost		accumulat historical ed amortizati (restated) cost on	accumulated amortiz
1	2	3	4	5	9	7	82	6	10	11	12	13	14	15
Rights for use of natural resources	010	,	,	,			ī	·				·		*
Rights for use of property	020		,					4		,			4	4
Rights for goods and services brands	030											e e		
Rights for industrial property	040					3				,	200			
Copyright and other related rights	090	43	10	189		1400	٠		•			4	4	
	090		¥.		*			i						
Other intangible assets	020	829	(271)	154			(4)	4	(190)				828	
Total	080	678	(271)	154			(4)	4	(190)				828	
Goodwill	060											,		

Value of intangible assets subject to ownership right restriction Value of colleterations of intangible assets Value of intangible assets constructed by the company Value of intangible assets acquired from special financing From line 080, column 14 From line 080, column 5 From line 080, column 15

Accumulated amortization of intangible assets subject to ownership right restriction

(081) (082) (083) (084)

							II. Property,	plant an	II. Property, plant and equipment									
	Line	Balance at the y	Balance at the beginning of the year		Revaluation (increase +, decrease -)	increase +, se -)	Dispos	Disposals for the year	he year		Other changes for the year	jes for the	Balance	Balance at the year-end			including	
Groups of property, plant and equipment		historical	accumulated	Additions for the year	historical		historical	depre		Inpairment	historical	depreciati	historical	acionomia	Assets r	Assets received in financial lease	Assets transferred for operating lease	operating
		(restated) cost			(restated) cost	depreciation	cost		year		cost	Ю	cost	- Composidor	historical (restated) cost	depreciati	historical (restated) cost	depreciat
1	2	3	4	2	9	7	8	6	10	11	12	13	14	15	16	17	18	19
Land	100				1.:	*			,			1	,					'
Capital expenditures for site restoration	110		*	,				1	1									1
Buildings, constructions and transmission facilities	120		•	28	1:-	*			(1)	1			28	(1)				e e
Machines and equipment	130	2 960	(1 596)	*		100	(33)		(404)		•	*	2 927	(2 000)		1		'
Vehicles	140	80	•	*		0.	•	•		•	•	8	•			1		
Fixtures and fittings	150	6	(3)	I.			•		(3)	1			o	(9)				1
Livestock	160					*		1				,						
Perennial plants	170			ř	· C		•	,			'		1					
Other property, plant and equipment	180	214	(80)	254			•	,	(133)		1	•	468	(213)				•
Libraries	190						•		,	1	*	1						'
Low-value items	200	165	(88)	236		•	•	٠	(86)			1	401	(186)				2
Temporary constructions	210			*			+	•	,		*	A	٠					
Natural resources	220		*	*	1		,	•			*		•					
Packaging	230			1	•		4	,		1	*							
Leased items	240	,		•		\$0.		0		1	31		d .	•		1	•	
Other non-current tangible assets	250	ľ	*					1.	÷		*		1					'
Total	260	3 348	(1767)	518			(33)	t.	(623)			•	3 833	(2 406)				*
From line 260, column 14														(261)		-		
		Pledged assets Net book value of Historical (restat	Pledged assets Net book value of assets temporanily out of operation (close-down, reconstructive the book value of assets temporanily depreciated assets Historical (related) cost of fully depreciated assets with entire property complexes.	rarily out of opedepreciated as	ration (close-dov sets 1 with entire prop	m, reconstruction, etc.) erty complexes	n, etc.)							(262) (263) (264) (264.1)		. 643		
From line 260, column 8		Net book value Residual value	Net book value of assets withdrawn for sale Resedual value of property plant and equipment lost as result of extraordinary events	awn for sale	t lost as result of	extraordinary e	vents							(265)		1		
From line 260, column 5		Assets purcha: Property, plant	Assets purchased from special funds Property, plant and equipment received in operating lease	unds sceived in oper	ating lease									(266)				
From line 260, column 15 From line 105, column 14		Depreciation o. Value of invest	Depreciation of property, plant and equipment subject to ownership right restriction Value of investment property, valued for the fair value	nd equipment	subject to owners r value	hip nght restrict	ion							(268)		t: t		
			The state of the s															

Figure 1 Figure 2			III. Capital investments	nents		
1		Item	Line code	For the year	Balance at the	year-end
290 280		-	2		4	
Capital investments accounted for by equify method: Capital investments accounted for by equify me	Capital construction		280	28		
200 200	Acquisition (construction) of pro	perty, plant and equipment	290	393		
1910 1914 1914 1915	Acquisition (construction) of other	er non-current assets	300	236		
230	Acquisition (construction) of inta	angible assets	310	154		
340 811	Main herd		320	*		
Capital investments in livestment property Capital investments in constraint property Capital investments Capital investment	Other		330			
Capital investment in investment property Financial investments Prinancial investments	Total		340	811		
Hem	e 340, column 3	Capital investments in investment property Finance expenses included into capital investments			(341)	
Hem Hem Line code Balance at the beginning of the year Balance at the year-end 1			IV. Financial inves	ments		
accounted for by equity method: accounted for by equity method: accounted for by equity method: Bable Sabo		Item	Line code	Balance at the beginning of the year	Balance at the	
accounted for by equity method:			c	C	long-term	current
250	A Eigenstandini Injurant	unsted for he south mathod	7	2		,
360 - 370 - 380 - 390 - 400 - at oost at anotical investments 420 at anotical cost - Current financial investments (421) at anotical cost - at cost - at cost - at cost - at in value (423) at amortized cost (424) at amortized cost (426) at amortized cost (426)	associated companies	and a damp to the control of the con	350		,	٠
370	subsidiaries		360			
Second S	joint interest		370			
380	B. Other financial investments					
Other long-term financial investments	equity		380			
Other long-term financial investments at cost at amortized cost at an other servestments at cost at amortized cost at amortized cost at amortized cost at amortized cost at an other servestments at a tost at an other servestments at an other servestments at amortized cost (425) at amortized cost (426)	shares		390		,	
Other long-term financial investments 420	ponds		400		*	,
Other long-term financial investments at cost at a taiv value at amontized cost Current financial investments at cost at an orized cost (424) at an orized cost (426)	other		410		*	
Other long-term financial investments at oost at oost at amortized cost current financial investments at correct financial investments at cost at at amortized cost at amortized cost at amortized cost	Total (A + B)		420			
at cost at farming to cost at amortized cost current financial investments at cost at at an at a	balance sheet line 045, column 4	Other long-term financial investments				
at fair value at amortized cost Current financial investments at cost at fair value at amortized cost		at cost			(421)	
at amortized cost Current financial investments at cost at case at fair alue at amortized cost		at fair value			(422)	
Current financial investments at cost at facts at facts at famoritized cost		at amortized cost			(423)	
1500	balance sheet line 220, column 4	Current financial investments			theory.	
tsoo		at cost			(424)	
		at fair value			(479)	
		at amortized cost			(426)	

llem I	Line Code	Revenue	Expense
-	2	3	4
A. Other operating income and expenses:			
Assets under operating lease	440		(1646)
Operational foreign exchange differences	450	1 386	(1 332)
Sale of other current assets	460		
Fines, penalties and forfeits	470	7.8	
Maintenance of residential and social assets	480		
Other operating income and expenses, including:	490	363 554	(329 849)
Doubtful debt provision	491	×	
Non-productive expenses and losses	492	×	
B. Earnings and expenses on equity investments:			
Associates	900		
Subsidiaries	510	•	,
Joint interest	520	•	
C. Other financing income and costs:			
Dividends	530	•	×
Interests	540	×	
Assets under financial lease	920	•	1
Other	260	35	
D. Other income and expenses:			
Sale of financial investments	920		
Sale of non-current assets	580		
Sale of property groups	290	,	
Non-operational foreign exchange differences	009		
Assets received for free	610		×
Write-off of non-current assets	620	×	
			16 40

Non-monetary (barter) transactions Share of related party transactions in total income from non-monetary (barter) transactions Finance expenses included into cost of sales

From lines 540-560, column 4

(631) (632) (633)

Balance at the year-end VI. Cash and cash equivalents 640 650 660 670 680 690 them -

49 526

			VII. Provisions	sions				
Turn of provincion	open oni I	Balance at the beginning of	Increase in provisions during the year due to	the year due to	Provision used during the	Reversal of	Recoverable amount of	O comments of the comments of
	Lifte code	the year	new p	additional charges	year	provisions unused	counterpart's expenses	balance at the year-end
	2	3	*	9	9	7	8	6
Provision for unused vacations	710	296		292				1 259
Provision for deferred expenses on additional pension benefits	720		,		×		*	
Provision for deferred warranty expenses	730		,			-4		
Provision for deferred restructuring expenses	740		*	*			5	
Provision form deferred expenses related to obligations under onerous	750		,				1	
	760		*					*
	770	1	,				*	
Provision for doubtful debts	775	265		*		(122)	*	143
Total	780	1 232		292		(122)	1	1 402

Page	Figure F			VIII. INVERSORES		Manage Manage Manage	and the same	
Tame of the manufacture of the	Figure F			200 C 2000		rear-end revaid	danoi	
1	1		Item	Line code	Book value at year-end	increase in net realisable value*		
200 201	Second S		1	2		4	5	
Figure F	10 10 10 10 10 10 10 10	Raw materials		800	35 1		*	
Region R	S200	Purchased semi-finished goods and accessories		810			*	
Second Figure Second Figur	Second Endemark	Fuel		820				
2500 2500	Second	Packaging materials		830			,	
Second S	Second S	Construction materials		840				
Sepo	Second S	Spare parts		850			*	
them items to the mitems to th	Signature Sign	Agricultural materials		860				
S80 S90	150 150	Livestock		870			,	
Sept	Second value of inventories: Second value of inventories: Second value of inventories: Second value of inventories is stated at net realisable value Line code Total balance at the year-end Up to 12 months Code Code value Code Code Code value Code Code Code value Code Code Code value Code Code value Code Code value Code Code Code value Code Cod	Low-value short-term items		880				
900 900	200 Pook value of inventories; stated at net realisable value transferred for processing pledged transferred for sale on a commission basis 1.0 code 1.0 code	Work in progress		890				
910 Pook value of inventories: stated at net realisable value transferred for processing pledgad transferred for sale on a commission basis inventories for sale Line code Total balance at the year-end Up to 12 months 12 924 12 924 104	910 920	Finished goods		006		*		
Book value of inventories: stated at net realisable value of inventories: stated at net realisable value (921) (923) piedged (923) (923) (923) transferred for sale on a commission basis (924) (925) transferred for sale (924) (925) (925) transferred for sale (927) (926) transferred for sale (927) (926) transferred for sale (927) (925) transferred for sale (927) (925) transferred for sale (927) (925) transferred for sale (927) (927) transferred for sale (927) transferred for sale (927) (927) transferred	Second transferred for year or a commission basis Second transferred for sale Total balance at the year-end Total bala	Merchandise		910				
Book value of inventories: stated at net realisable value (921) (922) Intercept of processing (924) (923) Intercept of sale on a commission basis (923) (923) (924) Intercept of sale on a commission basis (924) (924) (924) Intercept of sale Inte	Book value of inventories: 1	Total		920	35 1		,	
Stand of the fallisable value Stand of the fallish of the value Stand of the fall of the value Stand of	Standard and realisable value 1921 1921 1921 1922 192		nventories:			17000		
Transferred for processing pledged for sale on a commission basis (922) (924) (924) (924) (924) (924) (924) (924) (925) (924) (924) (924) (924) (924) (924) (924) (925) (924) (924) (925) (924) (924) (924) (925) (924)	Transferred for processing pleaged 12 of 2 13 of 2 15 of 3 15 of 3	stated at net re	salisable value			(921)	1	
Pledged Pled	Pleaged Plea	transferred for	processing			(922)	•	
Transferred for sale	Transferred for sale 10	pegpeld				(923)		
1X. Accounts receivable 1	1X. Accounts receivable 1X. Accounts receivable (926) 1.	transferred for	sale on a commission basis			(924)		
Line code Total balance at the year-end Up to 12 months (926) 2 3 4 5 940 13 028 12 924 104 950 13 028 12 924 104	N. Accounts receivable IX. Accounts receivable	s in custody - account 02				(925)	•	
Line code Total balance at the year-end Up to 12 months 12 to 18 months 12 to 18 months 12 to 18 months	Line code Total balance at the year-end Up to 12 months 12 to 18 months 12 to 18 months	inventories for:	sale			(926)		
Line code Total balance at the year-end Up to 12 months 12 to 18 months	Code Total balance at the year-end Up to 12 months Age			IX. Accounts receivable				
2 3 4 12 to 18 months	2 3 4 12 to 18 months 15 to 18 months 15 to 18 months 16 to 18 months	librar	a poor enil	Total helence of the washand		Age		
2 3 4 5 . 940 13 028 12 924 104	2 3 4 5	Herri	CINE COUR	rotal balance at the year-end	Up to 12 months	12 to 18 months	18 tc	o 36 months
950 - 13 028 - 12 924 (951) - (952)	940 - 13 028 12 924 (951)		2	8	4	5		9
950 13 028 12 924 (951)	(951) (952)	e accounts receivable	940					
		r current receivables	086	13 028		24	104	
		tebt written off in the current year line 940 and line 950, column 3 debt with related parties				(951)		

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Item	Line code	Amount	
	2	8	
Shortages and losses identified (written off) during the year	096		ν.'
Recognized debt of responsible persons	970		10
Shortages and losses pending identification of responsible persons at the year-end (off-balance sheet account 072)	980		,

Item	Line code	Amount
	2	63
Income from construction for the year	1110	
Debt at the year-end:		
due from customers, gross	1120	
due to customers, gross	1130	
from advances received	1140	
Amounts overdue at the year-end	1150	
Subcontractors' share of construction in progress	1160	
	XII. Income tax	
Item	Line code	Amount
	2	eo
Current lax	1210	
Deferred tax assets:		
at the beginning of the year	1220	
at the year-end	1225	
Deferred tax liabilities:		
at the beginning of the year	1230	
at the year-end	1235	
Recognized in income statement - total	1240	
including: current income tax	1241	
decrease (increase) in deferred tax assets	1242	
increase (decrease) in deferred tax liabilities	1243	
Recognized in equity - total	1250	
including: current income tax	1251	
decrease (increase) in deferred tax assets	1252	
increase (decrease) in deferred tax liabilities	1253	

XIII. Allocation of depreciation and amortization charges	nd amortization charge	68	
Item	Line code	Amount	
	2	69	
Charged for the year	1300		829
Allocated for the year - total	1310		
including. construction objects	1311		.58
for purchase (construction) and improvement of property, plant and equipment	1312		•
including machines and equipment	1313		.1
purchase (construction) of intangible assets	1314		7

Biological assets groups Line code 1 2 Non-current biological assets 11410												I			
Biological assets groups 1 Internt biological assets				Accounte	Accounted at historical cost	st						Acc	Accounted at fair value	fair value	
Biological assets groups 1 Irrent biological assets		Balance at the beginning of the year		Disposals	Disposals for the year			1	Balance a	Balance at the year- end			d		
1 urrent biological assets	historical cost	accumulated	Additions for the year	historical	Accumulated depreciation	Depreciation charge for the year	Impairment losses	Gain on impairment recovery	historical	accumul ated deprecia tion	the pear of the year	Additions for the year	Change in value for the year	Disposals for the year	Balance at the year-end
urrent biological assets	m	4	3	9	7	80	6	10	=	12	13	14	15	16	17
- total						,	٠	•	,	7.	١,	(%			_
including															
work stock 1411			,	,										,	
productive livestock 1412				•	•	•	٠			,				-	
permanent plantation 1413			*	•			٠	E				5.		*	
1414			*	,	*		٠		,				1	,	
Other non-current biological assets 1415					*			1			,			,	
Current biological assets 1420															
- total		×		8	×	×		,		×	Ŷ	*		•	9
including			8												
farmed and fattening animals 1421		×			×	×	,			×					ľ
biological assets in process of transformation 1422		×		E	×	×		1		×			1		
1423		×			×	×	,			×	,				
Other current biological assets 1424		×			×	×									
Total 1430					*	,	ŧ.					*		'	

cost of biological assets purchased for the target finance and the cost of biological assets between the control biological assets, cost of current biological assets, cost of current biological assets to ownership right restriction net book value of biological assets subject to ownership right restriction.

From line 1430, columns 5 and 14 From line 1430, columns 6 and 16 From line 1430, columns 11 and 17

(1431) (1432) (1433)

		XV. Financia	Financial result from initial recognition and selling of biological assets and related products	illing of biological a	assets and relate	d products				
				Initial recognition result	nition result				Financial r	Financial result from:
llem	Line	Primary cost	Biological transformation expenses	income	expenses	Impairment	Revenue from sale	Cost of sales	sale	initial
100	2	89	ч	22	9	7	00	6	10	11
Crop production and additional biological assets	1500	,	•			1		*		
including:										
crops and beans	1510				•					-
of which:	1		84				,			,
wheat	101									
SOY	1513				1					1
Sulliowell	1514							,	,	
sugar beet	1515									/*
polato	1516						1			
fiouls	1517					35		*		*
other crop production	1518					,				•
additional biological assets from crop production	1519	4			•	*		*	•	•
Livestock production and other biological assets	1520	•					,	•	•	1
including:										
increase in live weight	1530			,		2	*	,		
of which:	100000								10	
cattle	1531	*				•				
pigs	1532					,				
mik	1533									
wool	1534									
eggs	1535		•							
other livestock production	1536									
additional livestock production	1537									1
fishing products	1538									1
Section of the sectio	1939									
Crop and ilvestock production and other prological assets	25					2				
A K D B I H B T COUNTY OF THE BOOK OF THE	(Zatulyviter L.)									

Notes to the consolidated financial statements of International Charitable Foundation "International HIV/AIDS Alliance in Ukraine" as at and for the year ended 31 December 2010, prepared in accordance with National Accounting Standards of Ukraine

(prepared in accordance with p.2 of Order of the Ministry of Finance of Ukraine dated 29 November 2000 No. 302 "On Notes to annual financial statements")

1. Background

Establishment of the Organization and principal lines of activity:

International Charitable Foundation "International HIV/AIDS Alliance in Ukraine" (hereinafter "Alliance Ukraine") is an international charitable foundation initially established under provisions of the Law of Ukraine "On charity and charitable organisations" in late 2002 and started its operation since its registration by the Ministry of Justice of Ukraine in March 2003. On acquiring managerial independence from its founder, International HIV/AIDS Alliance (United Kingdom), in the beginning of 2009 Alliance Ukraine became an independent linking organisation, retaining membership in the International HIV/AIDS Alliance Global Partnership. The consolidated financial statements comprise Alliance Ukraine and its wholly owned subsidiary LLC "Alliance-Ukraine Consultancy", registered in Kyiv, Ukraine (together referred to as the "Organization").

The Organization's principal activities are as follows:

- fighting HIV infection, AIDS mortality and alleviation of the negative impact of the epidemic through supporting community actions against HIV/AIDS in Ukraine, Europe and Central Asia region;
- dissemination of effective ways to prevention and treatment of HIV/AIDS in Ukraine;

The number of employees as at 31 December 2010 was 108 (31 December 2009: 105).

The principal Ukrainian hryvnia ("UAH") exchange rates for the past three years were as follows:

Reporting date	US dollar	Euro
31 December 2008	7.7000	10.8555
31 December 2009	7.9850	11.4489
31 December 2010	7.9617	10.5731

Inflation rates in Ukraine have been determined by the State Statistics Committee of Ukraine to be as follows:

2008	22.3%
2009	12.3%
2010	9.1%

The Organization did not adjust the financial statements for the effect of inflation applying inflation indices, as the cumulative inflation rate during the years 2008-2010 did not exceed the 90% threshold.

The weighted average discount rate of the National Bank of Ukraine in the past years was as follows:

2008	11.3%
2009	11.2%
2010	9.0%

2. Basis of preparation

These financial statements have been prepared based on the following principles adopted by the Law of Ukraine "On accounting and financial reporting":

Prudence – using accounting estimates such that liabilities or expenses are not understated and assets or income are not overstated.

Completeness – the financial statements must contain complete information on the actual and potential impact of business transactions and events that may influence the decisions made on a basis of such information.

Standalone basis – each entity is treated separately from its owners. Therefore, the owners' personal property and liabilities should not be included in the financial statements of the entity.

Consistency – consistent (from year to year) application by the entity of selected accounting policies. Changes in the accounting policies are allowed only in cases envisaged by national accounting standards and should be justified and disclosed in the financial statements.

Going concern – assets and liabilities of the entity are assessed based on the assumption that the entity will continue its operations.

Accrual and matching of income and expenses - to determine the financial result for the reporting period, one should compare the income for the reporting period versus expenses incurred to receive the income. Furthermore, income and expenses are recognised in accounting and financial statements as they are received/incurred irrespective of the actual date of receipt or payment of cash.

Substance over form – transactions are accounted for in accordance with their substance and not merely their legal form.

Historical (actual) cost - priority is given to the measurement of the entity's assets based on expenses incurred for their production and acquisition.

Single monetary unit - all transactions are measured and presented in the financial statements applying the same monetary unit.

Periodicity – division of the entity's activities into certain time periods for financial statement preparation purposes.

3. Significant accounting policies

The Organization's accounting policies are based on Ukrainian National Accounting Standards (NAS) and its accounting policies shall be applied so that the financial statements fully comply with all requirements of the Law "On accounting and financial reporting in Ukraine" and each individual NAS.

The accounting policies provide the following guidance:

- a) Business transactions are accounted for based on primary documents supporting these transactions;
- b) All operations of the Organization are measured and reported in Ukrainian hryvnia ("UAH"), which is Ukraine's national currency;
- Information on the Organization's expenses is accumulated on Class 9 accounts. Class 7 and Class 9 accounts shall be closed monthly. Class 8 accounts shall not be used;
- d) In accordance with NAS 1 "General Requirements to Financial Statements", the financial result of the reporting period shall be determined on an accrual and matching basis, i.e. through matching between the earning of income in the reporting period and cost incurred, with the income and expenses recognised when they occur regardless when the cash is paid;
- e) Fixed assets recognition, measurement, revaluation and disposal, as well as presentation of financial results of these transactions should comply with NAS 7 "Fixed Assets". Recognised as fixed assets

shall be tangible assets with a value over UAH 1,000 held for use in the activities or supply of goods or services, for rental to others, or for administrative purposes, with the useful life or operating cycle over one year. Depreciation shall be charged on a straight-line basis using uniform amortization rates;

- f) Assets with a value below UAH 1,000 are recognised as low value items. The low value items shall be recorded on account 112 and depreciated at 100% rate during the first month of their use;
- g) Acquired/received or internally manufactured inventories shall be recognised in the balance sheet at historical cost in accordance with NAS 9 "Inventories";
- h) All other transactions giving rise to the expenses shall be recognised and disclosed in the financial statements following the requirements of NAS 16 "Expenses";
- i) Accounts receivable are recognised as an asset when an inflow of economic benefits in the future is probable and the receivables' amount can be measured reliably. Provision for doubtful debts shall be determined by grouping accounts receivable based on their age and assigning a respective delinquency rate to each group. Other transactions giving rise to accounts receivable shall be recognised in accordance with NAS 10 "Accounts Receivable";
- j) A liability is recognised when it can be measured reliably, and the settlement of the liability is likely to result in an outflow of economic benefits in the future. If a recognised liability represents an obligation that does not require an outflow of economic benefits and will not have to be settled, such liability is recognized as income of the reporting period. Any other transactions giving rise to liabilities are recognised in accordance with NAS 11 "Liabilities";
- Leases are accounted for and presented in the financial statements in accordance with NAS 14 "Leases";
- Income is recognised in the income statement on accrual and matching bases in the corresponding periods. Accounting treatment and measurement of income shall be based on the requirements of NAS 15 "Income";
- m) Foreign currency transactions are accounted for and presented in the financial statements in accordance with NAS 21 "The Effects of Changes in Foreign Exchange Rates";
- n) Related party transactions are recorded in the Organization's books and disclosed in its financial statements in accordance with NAS 23 "Related Party Disclosures";
- o) Subsidiaries are those enterprises controlled by Alliance Ukraine. Intraorganization balances and transactions, and any unrealised gains arising from intraorganization transactions, are eliminated in preparing the consolidated financial statements. Consolidation is accounted for and presented in the consolidated financial statements in accordance with NAS 20 "Consolidated financial statements".

4. Disclosures under Ukrainian National Accounting Standards

4.1. Fixed assets

As at 31 December 2010 fixed assets are accounted for and recognised in the Organization's consolidated financial statements at historical cost less accumulated depreciation and impairment losses.

4.2. Intangible assets

As at 31 December 2010, intangible assets are accounted for and recognised in the Organization's financial statements at historical cost less accumulated amortization and impairment losses.

4.3. Inventories

Inventories are measured on a First In, First Out basis and identified value basis.

4.4. Other accounts receivable

Other accounts receivable by customer as at 31 December are as follows:

(in thousand of Ukrainian hryvnias)	2010	2009
Kyiv city charitable foundation "Ukrainian institute on public health research policy"	780	931
Social Expertise Centre of National Science Academy of Ukraine	557	4
Private company "Conference Service Centre"	477	430
"IGAR" LLC	406	<i>F</i> .
International public organization "Social initiative of labor and health safety"	391	476
Mikolaev regional charitable foundation "New century"	319	643
Charitable foundation "Blago"	297	668
Odessa charitable foundation of rehabilitation and social adaptation of homeless "Way home"	284	291
Public organization "Gay Alliance"	270	767
Kherson regional charitable foundation "Mangust"	255	263
Public organization "Club Eney"	248	262
Charitable foundation "Step to the future"	244	-
Other	8,643	19,464
Allowance for bad debt	(143)	(265)
Total	13,028	23,930

5. Changes of the Organization's accounting policy and accounting estimates

During 2010 the Organization did not change its policies and accounting estimates.

6. Extraordinary income and expenses

The Organization did not generate extraordinary income or incur extraordinary expenses during the year ended 31 December 2010.

7. Commitments

The Organization does not have any commitment as at 31 December 2010.

1 June 2011

Klepikov A

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Executive Director

Zatulyviter L

Chief Accountant

Annex 6. Informational and Methodological Work of ICF "International HIV/AIDS Alliance in Ukraine", the List of Publications in 2010

Publications for representatives of populations vulnerable to HIV



HIV Test

In 2010, Alliance Ukraine has issued a new edition of its brochure dedicated to key aspects of testing for HIV infection. It offers basic information about the test, how to get prepared for testing, what test results mean, where one can receive HIV testing anonymously and confidentially.

HIV Test: Why? How? Where?

This brochure is also dedicated to HIV testing but it specifically focuses on MSM group. In addition to basic information about testing, it addresses such specific issues as personal motivation to pass the test, myths and prejudices in the MSM environment, and overcoming fear before the test.



Альянсо ПОЗИТИВНЕ ТИМ, ТИМ, ХТО ВПЕРШЕ ДІЗНАВСЯ ПРО СВІЙ ВІЛ-статус

Positive Life

This brochure is a logical "sequel" to the booklets on HIV testing; it tells the reader about steps that need to be taken by an individual who just learned about his/her HIV-positive status. The main idea of the publication is that HIV-positive people today continue to work and study, create families, give birth to healthy children, and engage in sports and creative activities. Everything of the above is possible if you know where to seek information and support after your positive status is confirmed.

Substitution Maintenance Therapy: Facts, Problems, Advantages

This brochure offers basic information about substitution maintenance therapy, its advantages and weaknesses; it describes basic SMT drugs, explains how to enroll in the program, tells about schemes of therapy, and explains myths and facts existing around this issue.



What is Important to Know about Substitution Therapy?

This publication highlights the main aspects of medicated maintenance treatment, e.g. in addition to basic facts about how it works, it also provides information about psychosocial follow-up, organization of leisure time of the patients, and consequences of consumption of substitution medication.





What One Needs to Know about Sexually Transmitted Infections?

This publication contains basic information about major sexually transmitted infections (syphilis, gonorrhea, trichomoniasis, Chlamydia, bacterial vaginosis, etc.), their symptoms, ways of transmission and diagnostics, treatment and course of the disease. Special attention is given to STI prevention issues.

Hepatitis B

It is another information publication about health issues of vulnerable groups' representatives. The brochure contains basic information about hepatitis B, ways of its transmission, clinical signs, symptoms, ways of detection, vaccination, treatment, and life with HBV. Separate section is dedicated to hepatitis B in individuals with HIV-positive status.



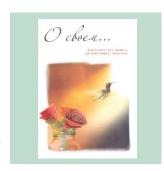


Don't Become a Victim!

This publication addresses women who offer commercial sex services, and provides basic facts about how to conduct oneself with clients in order to avoid violence (including violence of law enforcement officers), and in cases when a women already became a victim of violence. Brochure also offers advice about means of emergency prophylaxis.

About Something Private... Information for Female Drug Users

This brochure is the first publication of Alliance Ukraine designed exclusively for women. This is why issues raised in the publication are important for women: the impact of psychotropic substances on woman's body, dependence on the partner during drug use, emergency prophylaxis, and the most effective means of contraception for female users.





A Woman and Drugs

This publication was developed for female clients of the projects oriented on introduction of gender-sensitive models of work with drug users. It describes main risks for women and prevention measures. Specific attention is given to pregnancy during the drug use.

Publications for specialists working in the area of Overcoming HIV epidemic



National Report on the Follow Up to the UNGASS Declaration of Commitment on HIV/AIDS

This publication describes Ukraine's efforts in combating HIV infection. In particular, it provides calculations and analysis of the indicators of monitoring and evaluation of the national response to the epidemic; analyzes national measures and policies; and provides the data of financial monitoring of expenditures for HIV/AIDS.

Risk Behavior and HIV/AIDS in Ukraine

The book contains information about a large research project "Interventions for Injecting Drug Users in Ukraine", carried out in 2004–2008 by the group of specialists from Colorado State University and Ukrainian NGOs "Chemical Dependency and AIDS Prevention Fund" (Kyiv), Odesa-based NGO "Faith, Hope, and Love", and Donetsk Oblast Charitable Foundation "Health of the Nation" (Makiyivka). Ukrainian co-leader of the research was Serhiy Dvoryak, Director of the Ukrainian Institute on Public Health Policy. In the course of the study, the researchers identified current tendencies of drug use (including stimulants),



and analyzed impact of certain types of outreach work on seroconversion among drug users. The book contains a brief description of methodology, two published articles on the subject of research, and brief translation of manual on outreach work, developed by the National Institute of Drug Addiction (NIDA).



Sex Business, Violence and HIV

This publication is a book, developed by the experts of International HIV/AIDS Alliance (UK), somewhat adapted to the Ukrainian context. The authors of the publication used experience, accumulated by the Frontiers Prevention Project, implemented primarily in Cambodia, Ecuador, India, Madagascar and Morocco.

Since the topic addressed in the book is extremely critical for Ukraine, the decision was made to translate this manual with adaptation to the Ukrainian reality; the text was edited in line with recommendations of Ukrainian experts. Several examples from Ukraine were also added.

Альянс

Studying Behavior and HIV Prevalence among Stimulant Drug Users

This publication is a brief presentation of the results of operational research aimed to study specific features of stimulant drug users and their behavioral patterns in order to develop appropriate models for HIV prevention in Ukraine. Main objectives of the research were:

- To identify types of the most widespread stimulant drugs in Ukraine, cooked in domestic settings, and to define peculiarities of preparation and related risks;
- To study behavioral peculiarities of stimulant users;
- To identify key factors which contribute to HIV infection among the stimulant users.



Behavioral Monitoring and HIV Infection Prevalence among Female Sex Workers as a Component of the Second Generation Surveillance

This report contains results of bio-behavioral study among CSWs, conducted in 2009 in 14 oblast centers of Ukraine. The document describes behavioral practices of CSWs in terms of condom use with different types of sexual partners. Specific attention is given to peculiarities of drug use and the use of injecting equipment by CSWs. The report also provides results of testing of

female sex workers for HIV and syphilis carried out in the course of the study. The data was aggregated for all 14 oblasts and disaggregated by each region, covered by the study.

Behavioral Monitoring and HIV Infection Prevalence among Clients of Female Sex Workers as a Component of the Second Generation Surveillance

This report contains results of bio-behavioral study among persons who use services of female sex workers. The document provides analysis of sexual behavior of clients of CSWs, including the frequency of use of sexual services and condom use practices with different types of partners. Some sections of the report are dedicated to the client's awareness of the ways of HIV transmission and existing injecting drug use practices. The report also provides results of testing of the CSWs clients for HIV and syphilis carried out in the course of the study.





Estimation of the Size of Populations Most-at-Risk of HIV Infection in Ukraine

This publication presents the results of calculation of estimated size of various groups at risk of HIV infection, such as injecting drug users, female sex workers, and men who have sex with men. In addition, it provides estimates on the size of so-called "bridge groups", i.e. sexual partners of IDUs and clients of CSWs. The report also describes calculation methods, and provides estimated numbers, accepted for the national and regional levels.



Behavioral Monitoring and HIV Infection Prevalence among Injecting Drug Users

This report presents the results of bio-behavioral study among injecting drug users. In particular, it analyzes the frequency of use and types of drugs, as well as practices of injecting equipment use. Some sections of the report are dedicated to IDUs' sexual behavior, their awareness of the ways of HIV transmission, and experience of having HIV testing. Analysis of HIV

prevalence is presented in comparison with results of the study in 2007. The document also informs about syphilis prevalence in this risk group. Results are presented for the entire sample and for individual regions.

Behavioral Monitoring and HIV Infection Prevalence among Sexual Partners of Injecting Drug Users

This report presents the results of bio-behavioral study (first of this kind in Ukraine) among sexual partners of injecting drug users who themselves do not consume drugs. The document provides analysis of sexual behavior of sexual partners of IDUs, in particular, in terms of condom use with different types of partners, as well as experience of drug use and previous HIV tests. Separate



section is dedicated to analysis of HIV prevalence in this group and interrelation between HIV status with relevant behavioral patterns.

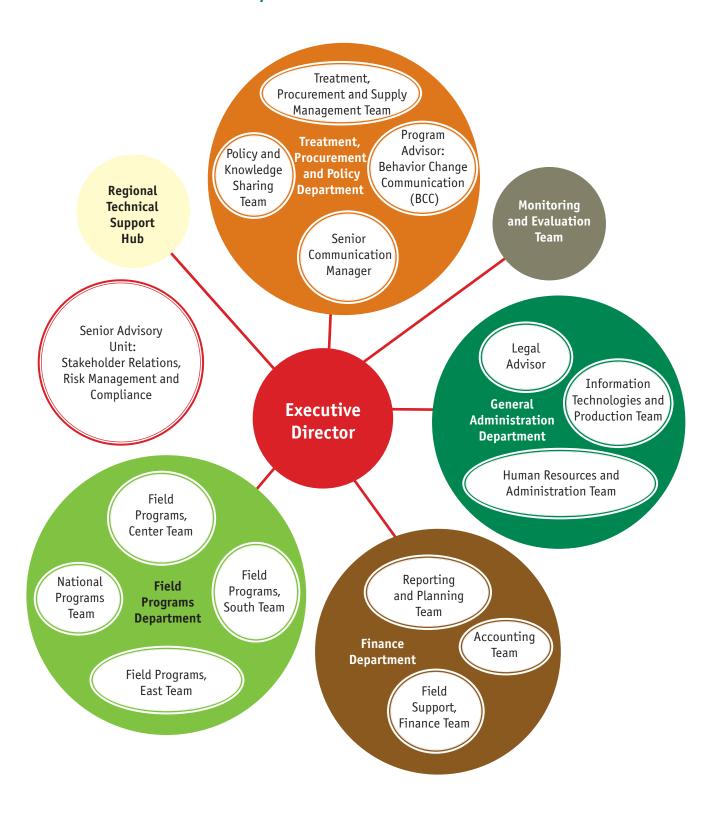


Monitoring of Awareness, Behavior, and HIV Prevalence among Prisoners as a Component of the Second Generation Surveillance

This report presents the results of bio-behavioral study (first of this kind in Ukraine) among prisoners. The document provides analysis of their experience of drug use both outside penal institutions and while in custody; practices of use of sterile injecting equipment for injections and tattooing; and peculiarities of sexual behavior. Separate section of the report is dedicated to

analysis of prisoners' awareness of the ways of HIV transmission, experience of testing for HIV, and results of testing carried out in the course of the study.

Annex 7. Organizational Structure of ICF "International HIV/AIDS Alliance in Ukraine"



Annex 8. Composition of the Governing Board, Supervisory Committee, General Meeting and Staff of ICF "International HIV/AIDS Alliance in Ukraine"

Members of Statutory Bodies

Governing Board

Yuriy Kobyshcha Svitlana Antonyak Iryna Borushek Roman Kobets Anna Sarang Julie Saunders-Bondarenko **Board Chairman**

Supervisory Committee

Jon Cooper Patrick Van Daele Irena Gryga Vadim Menzhulin Natalia Sannikova Committee Chairman

General Meeting

Vyacheslav Kushakov Svitlana Antonyak Yuriy Kobyshcha Anna Sarang Julie Saunders-Bondarenko

Staff and Consultants of ICF "International HIV/AIDS Alliance in Ukraine" as of January 15, 2010

Directorate

Andriy Klepikov Executive Director

Pavlo Smyrnov Deputy Executive Director/Director: Field Programs

Natalia Galagan Acting Director: Operations

Zahedul Islam Director: Treatment, Procurement & Policy

Oleh Kukhar Finance Director

Vlasta Brodska Director of Regional Technical Support Hub

Olga Varetska Associate Director: Strategic Information, Monitoring & Evaluation

Senior Advisory Unit: Stakeholder Relations, Risk Management & Compliance

Paola Pavlenko Senior Advisor: Stakeholder Relations, Risk Management & Compliance

Tetyana Nima Risk Management & Compliance Officer

Personal Assistants

Iryna Zharuk Personal Assistant to Executive Director

Anna Eremina Personal Assistant to Treatment, Procurement & Policy Director

Anastasia Babenko Personal Assistant to Deputy Executive Director/Director: Field Programs

Field Programs Department

Field Programs, East Team

Viktor Isakov Head of Team

Liudmyla Shulga Technical Support Manager

Oleksandra Oksenyuk Program Officer Yuliya Khomidova Program Assistant

Field Programs, South Team

Volodymyr Chura Head of Team

Oksana Matiyash Technical Support Manager
Olena Goncharenko Senior Program Officer
Nadiya Yanhol Program Officer

Olga Churanova Program Assistant

Field Programs, Center Team

Tetyana Deshko Head of Team

Myroslava Debelyuk Technical Support Manager

Galyna Naduta Program Manager: Regional Policy and Coordination

Olga Burgay Senior Program Officer

Andriy Khrapal Program Officer
Liudmyla Dmytriyeva Program Officer
Daria Ivanenko Program Assistant

National Programs Team

Liudmyla Shurpach Head of Team

Natalya Nagorna Program Manager: Community Based Information

Oleksandra Datsenko Senior Program Officer
Anastasia Mazurenko Program Officer: Prevention

Darina Marchenko-Bernhardt Program Officer Galyna Nazarchuk Program Assistant

Treatment, Procurement & Policy Department

Olena Purick Program Advisor: Street Children & Behavior Change Communication (BCC)

Kostiantyn Pertsovskyi Senior Communication Manager

Policy and Knowledge Sharing Team

Anna Dovbakh Head of Team; Senior Technical Support Manager

Maryna Varban Program Manager: Technical Support Resources Development

Pavlo Skala Project Manager: Policy & Advocacy

Myroslava Andrushchenko Senior Program Officer: Documentation & Sharing

Liudmyla Maistat Program Officer: Policy & Advocacy

Anna Oliynyk Translator

Georgiy Peday Editor/Proof-reader
Oksana Veres Program Assistant

Treatment, Procurement and Supply Management Team

Sergiy Filippovych Head of Team

Kostiantyn Talalayev Program Manager: Treatment
Oksana Savenko Senior Program Officer: Treatment
Oleksandr Lebega Senior Program Officer: Treatment

Tetyana Mikityuk Program Officer: Treatment

Natalia Moskovchenko Program Officer: Treatment Vladyslav Volchkov Senior Procurement Officer

Vitaliy Velikiy Procurement Officer Viktoria Skrychevska Procurement Officer

Alyona Mazhnaya Treatment, Procurement and Supply Management Assistant
Anna Garusovskaya Procurement and Supply Management Team Assistant

Monitoring & Evaluation Team

Tetyana Mykhalchuk Senior Program Manager: Programmatic M&E and Donor Reporting

Tetyana Salyuk Program Manager: Research and Evaluation Yulianna Girsa Program Officer: Reporting and Planning Inna Shvab Program Officer: Research and Field Analysis

Svitlana Bezimenna Program Assistant

General Administration Department

Ihor Voytenko Legal Advisor

Human Resources & Administration Team

Ganna Goncharenko Senior Human Resources Officer

Olga Svyrydovska Human Resources Officer
Maryna Maslennikova Administration Manager
Natalya Zyma Senior Administration Officer

Ivanna Yaremenko Travel Support Officer

Tetyana Vorobyova Human Resources & Administration Assistant

Olga Akaieva Secretary

Valentyna Gavrylchuk Assistant to Administration Manager Galyna Kutsaenko Assistant to Administration Manager

Valentyna Glazko
Antonina Tkachova
Svitlana Shevchenko
Valeriy Sheremet
Mykhailo Yakovlev

Courier
Cleaner
Housekeeper
Security Guard
Household Manager

Information Technologies and Production Team

Pavlo Usenko Senior IT Officer; Security Officer

Vyacheslav Yatsyuk System Administrator

Andriy Yakovlev IT and Production Assistant

Finance Department

Accounting Team

Larysa Zatulyviter Head of Accounting Team Olena Nosatska Deputy Chief Accountant

Ivanna Konyukh Senior Accountant

Roman Khomenko Senior Finance Officer: 1C System

Anastasiya Zorya Accountant Alla Kravets Accountant

Kateryna Ivanitska Assistant to Accounting Team

Field Support, Finance Team

Olga Zozulynska Head of Team Iryna Yara Grant Manager

Dmytro Belon Senior Field Support Officer
Svitlana Voynich Senior Field Support Officer
Kateryna Tytovska Senior Contracting Officer
Igor Arbatov Field Support Officer
Oksana Yatsko Field Support Officer

Ksenia Omelyanenko Field Support Finance Assistant

Reporting & Planning Team

Ilona Sydorenko Head of Team

Ganna Katasonova Senior Budget Officer

Yuriy Zozulynskiy Reporting & Planning Officer

Regional Technical Support Hub

Vlada Rabinova Operations Officer

Regional Coordinators

Tetyana Afanasiadi Regional Coordinator, Odesa Alla Kalinina Regional Coordinator, Cherkasy Yevheniya Lysak Regional Coordinator, Kherson Valentyna Pavlenko Regional Coordinator, Donetsk Iryna Potapova Regional Coordinator, Sevastopol Svitlana Khotina Regional Coordinator, Mykolayiv Regional Coordinator, Dnipropetrovsk Mykhaylo Yaroshevskiy Olexandr Yatsyuk Regional Coordinator, AR Crimea

Permanent Consultants

Maria Samko Programmatic M&E Consultant

Vasyl Setter Driver

International HIV/AIDS Alliance in Ukraine

5 Dymytrova St., building 10A, 9th floor, 03680, Kyiv, Ukraine Tel.: (+380 44) 490-5485. Fax: (+380 44) 490-5489

E-mail: office@aidsalliance.org.ua. www.aidsalliance.org.ua



"As far back as 2-3 years ago, we succeeded in joining forces of international and national organizations as well as government officials, who understood that this is not dangerous, but on the contrary — a road to salvation", said Andriy Klepikov in the interview to the Voice of America.



Наркозависимость в Украине приравнивают к преступлению

Установленные Министерством здравоохранения Украины параметры размеров наркотических средств фактически приравнивают наркозависимость к преступлению, которое угрожает всплеском эпидемии ВИЧ/СПИД в государстве.

КорреспонденТ

Януковича просят запретить милиционерам собирать списки ВИЧ-инфицированных пациентов

THE LANCET First reduce harm:

tackling HIV
in Ukraine

Ukraine has the highest prevalence of HIV in Europe, but an emphasis on harm reduction in the two main risk groups — drug users and commercial sex workers — is bearing fruit. Peter Hayward reports.

ZEIT ONLINE GESUNDHEIT

The worst HIV epidemic in Europe

sex workers in Ukraine, reports Richard Hurley

Community organisations lead the fight

against HIV among drug injectors and

AIDS-BEKÄMPFUNG

Rote Karten gegen Aids

Die Ukraine feiert Erfolge gegen die Infektionskrankheit. Doch die Prävention bleibt schwierig.

theguardian

Why is Ukraine reversing HIV policy?

In eastern Europe's HIV epidemic Ukraine was a bright spot; now doctors offering methadone are being arrested for trafficking

International concern

grows over Ukraine's

Foreign Policy treatment facilities

crack down on HIV/AIDS

The New York Times

Drug users in Ukraine are harassed when trying to get drug substitution therapy, and doctors prescribing substitutes

for them are jailed.

PAssociated Press

Meanwhile, the government has sent prosecutors to search the offices of AIDS support groups

across the country and dispatched police to collect personal information from drug users in methadone therapy, including their medical records and whether or not they have HIV, even though such information is confidential. In the eastern Sumy region, the government denied patients their daily methadone dose until they answered all the questions, an activist said. In the southern city of Odessa, one HIV-positive man's said police disclosed his status to his neighbors, prompting his wife and son to flee in shame.



«L'Ukraine risque de ne pas recevoir une aide de 305 millions de dollars du Fonds mondial de lutte contre le sida, la tuberculose et le paludisme», a prévenu le directeur d'Alliance en Ukraine, Andri Klepikov.

Дело

Международный Альянс по ВИЧ/СПИДу в Украине привлек в страну и выделил на проекты против эпидемий в этом году \$22 млн. Кроме денег Глобального фонда в эту сумму вошли средства от USAID и других доноров. Существенную помощь оказывают и фонды частных компаний, например, Levi Strauss Foundation — первый американский корпоративный фонд, который начал бороться с эпидемией еще в 1983-м.

ДЗЕРКАЛО ТИЖНЯ

Виявилося, що на київських вулицях, як і на вулицях сотень інших українських міст, існують вуличні пункти обміну шприців, а серед низки маршрутних «Богданів»

«приховані» й мобільні амбулаторії. У них можна за 15 хвилин пройти експрес-тест на ВІЛ, зробити аналіз на інфекції, що передаються статевим шляхом, отримати безкоштовні презервативи, лубриканти і т. ін.

Law Enforcement and Drug Treatment: A Culture Clash

A raid on an opiate-substitution treatment center in Ukraine highlights tense relationship between police, IDUs, and harm-reduction advocates

Science