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# Annual Report 2008







*Dear readers,*

*We are honoured to present to you our annual report. This last year was the most intense and effective in our entire history; moreover, 2008 was a ground-breaking year for the Alliance-Ukraine itself, as we acquired the new status of independent international organization with all governing bodies based in Ukraine.*

*Our current autonomy is the outcome of targets activity and thorough, assiduous efforts throughout the year, of effective collaboration with the Alliance Secretariat, and of the abiding confidence of our donors: first of all the Global Fund to Fight AIDS, Tuberculosis and Malaria and the United States Agency for International Development, who supported us in implementing this transformation.*

*2008 will be remembered for the innovations to which Ukraine has been progressing for many years. It was in May 2008 that the first patients of substitution maintenance therapy for injecting drug users (IDU) began to receive methadone. Introducing methadone based treatment is the most significant expansion of the range of HIV/AIDS-related services to occur in Ukraine in recent years.*

*2008 was also a unique year because we succeeded in making an impact on the epidemic. It seems as unbelievable as a dream come true, but it is an incontestable fact – even a trend that is being sustained for the second year in a row – that AIDS morbidity is declining in Ukraine. In 2008 there were 4% fewer new AIDS cases reported in comparison to the previous year. Moreover, there are initial evidences of the impact of our prevention programmes: fewer new HIV infection cases among IDU were registered, and the HIV prevalence rate among IDU with a short record of injecting drug use is falling.*

*Summing up the results achieved in 2008, I would like to sincerely thank our partners in programme implementation for their high level of professionalism and commitment to the HIV/AIDS response. Without their support our achievements described here would not have been possible.*

*I wish you success and further victories!*

**Andriy Klepikov,**  
**Executive Director**

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# 1. Contribution of ICF “International HIV/AIDS Alliance in Ukraine” to the National HIV/AIDS Epidemic Response in Ukraine in 2008

The year 2008 brought tangible results yielded by many years of Alliance-Ukraine activities. Summing up another year's work, we can single out several key achievements in the response to the spread of HIV/AIDS in Ukraine.

## 1. Signs of the Impact of Harm Reduction Programmes for IDU

Initial evidence supporting the claim that the epidemic was stabilizing amongst injecting drug users began to appear in early 2007. Triangulated data from different sources indicate a fall in HIV prevalence, which is corroborated by data on coverage increase and improving quality of services provided by harm reduction projects. In particular:

- ❖ **lower HIV infection incidence among IDU:** after a decade of constant rise, in 2007 the number of new officially registered HIV infection cases among IDU slightly decreased; this tendency held true in 2008 (from 7127 new cases in 2006 to 7084 in 2007 and 7009 in 2008). During these periods absolute numbers for HIV tests among IDU continued to rise.
- ❖ **Median HIV prevalence among newly initiated IDU (who have been injecting drugs for less than two years) is decreasing:** sentinel surveillance data indicate that the median indicator for HIV prevalence among IDU injecting for a short period of time (less than two years) in sample groups from eight cities (Donetsk, Lutsk, Odesa, Poltava, Simferopol, Sumy, Kharkiv, Kherson) substantially decreased over recent years: 29.9% in 2004, 17.7% in 2006 and 11.2% in 2008. Decrease in prevalence is more visible in large cities where harm reduction programmes supported by the Global Fund have high coverage rates (for example, Donetsk and Odesa).
- ❖ **IDU report less risky behaviour:** behavioural surveillance data indicates that risky injecting behaviour is on the decrease. The percentage

of IDU who report using sterile injecting equipment during their last injection was 79.9% in 2006, 82.7% in 2007 and 86.3% in 2008.

- ❖ **Harm reduction programme coverage rates have substantially increased:** programme monitoring indicates that numbers of IDU receiving GF-supported harm reduction services continue to rise: 67,476 IDU were covered in 2007 and 94,583 in 2008.

These data suggest that at last we are witnessing the long-awaited initial signs of impact on the HIV epidemic among IDU in Ukraine.

## 2. The five-year programme implemented by the International HIV/AIDS Alliance in Ukraine is bringing real results – a national declining trend in AIDS morbidity rates.

Thanks to the large-scale treatment programme implemented with grant support from the Global Fund to Fight AIDS, Tuberculosis and Malaria to the total amount of US\$ 98,000,000, the epidemic growth rate continues to decline in Ukraine. In 2008 there were 4380 new reported AIDS cases, while in 2007 there were 4537 cases (a reduction of over 4%). In 2008 4380 new AIDS cases were registered (9.5 per 100 thousand population) compared to 4573 in 2007 (9.8 per 100 thousand population) – a decrease of 3.1% since 2007.

When the Alliance-Ukraine began implementing this programme, only 137 patients were receiving government supported antiretroviral treatment. Today almost over 10,000 patients are receiving this life-saving treatment in Ukraine, thanks to the Global Fund grant.

An important 2008 objective was to ensure uninterrupted ARV-therapy for those patients receiving treatment within the Global Fund grant programme. It was a significant achievement when Vasyl Kniazevich, the Minister of Health of Ukraine, officially and publicly confirmed during a press conference on 1 December 2008 that the Ministry of Health (MoH) would take complete responsibility for continuing antiretroviral therapy for 6070 HIV-positive patients being treated at the expense of the Global Fund grant. Thus in 2009 the Ministry of Health will commit to provide ART to 11,906 patients, pursuant to the provisions of the new "National Targeted Programme for the Prevention of HIV Infection and Provision of Treatment, Care and Support to HIV-infected and AIDS Patients for 2009–2013".

The Government should simultaneously ensure prevention of mother-to-child HIV transmission. By 1 October 2008 (the closing date of the programme "Overcoming the HIV/AIDS Epidemic in Ukraine") 9875 pregnant women had received medical prevention of mother-to-child transmission of HIV, thanks to which the HIV infection rate among newborns decreased to 8% (10% in 2003).

### 3. The most important innovation of the Alliance-Ukraine was introduction of a substitution maintenance therapy programme with the use of methadone.

The first patients were enrolled in treatment programmes at the end of May. As of 1 January 2009 1338 patients were receiving methadone-based substitution therapy and 864 patients were being

treated with buprenorphine. Due to the programme implemented by the Alliance, in six months methadone became the first choice medicine for substitution therapy treatment. Expansion of methadone treatment programmes is an indication of the first significant increase in range of services in the field of HIV/AIDS in Ukraine during recent years. By 1 January 2009 substitution maintenance therapy with methadone and buprenorphine was being provided to 2504 patients, of whom 2202 (88% of the total) were receiving it through Alliance-Ukraine programmes supported by the Global Fund and the United States Agency for International Development.

### 4. In 2008 the Alliance-Ukraine significantly expanded prevention programmes for populations most at risk of HIV infection.

The activities of up to 200 partner organizations ensured provision of comprehensive services to over 300,000 representatives of vulnerable groups, primarily injecting drug users. Achievements in the most recent months include scale-up of services thanks to the launch of 14 mobile clinics to provide health and counselling services and HIV and STI testing for representatives of populations most vulnerable to HIV.

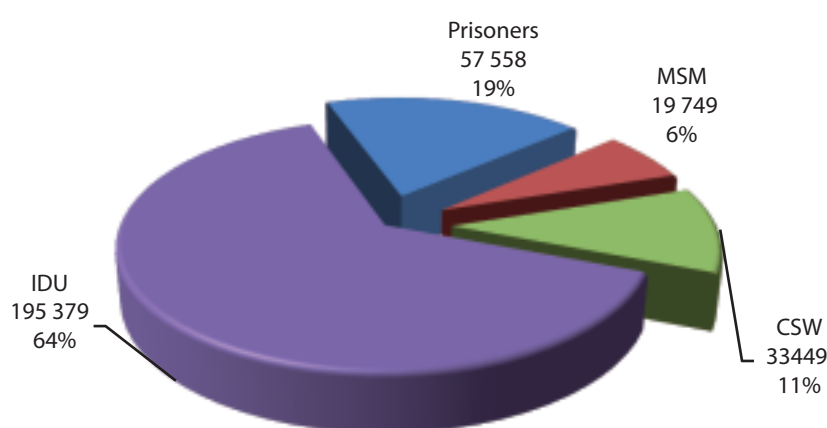
The Alliance-Ukraine considers further scale-up of prevention services and improvement of their quality to be key priority areas for its activities over the next three years. This can be achieved only by the combined effort of governmental and non-governmental organizations within a strengthened prevention component in the HIV/AIDS epidemic response in Ukraine.



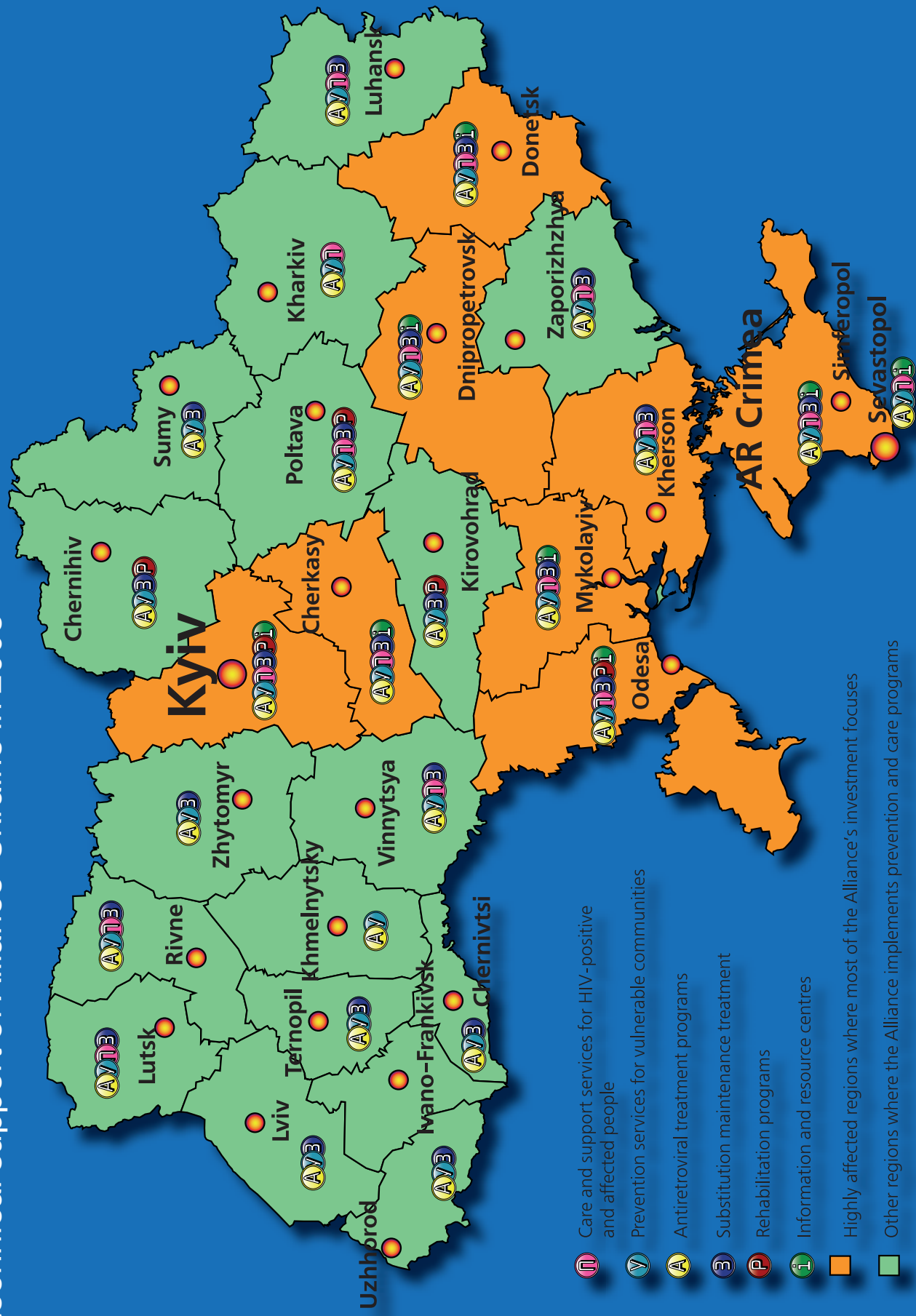
## Key achievements of the Alliance-Ukraine in 2008

- ❖ Thanks to Global Fund financing, antiretroviral therapy became available to 6070 HIV-positive people.
- ❖ ART to prevent mother-to-child transmission of HIV was provided to 9875 HIV-positive pregnant women during pregnancy and childbirth.
- ❖ A total of 2202 individuals with opioid dependence received substitution maintenance therapy in 24 regions through programmes implemented by the Alliance-Ukraine.
- ❖ 194 organisations received grants for the implementation of HIV/AIDS related activities.
- ❖ The effective and transparent system for procurement and supply of health commodities introduced by the Alliance-Ukraine allowed to procure high quality products with the best price. A total of 117 health care facilities and 92 community organizations received medicines and health care commodities in 2008.
- ❖ The range of HIV prevention services has been significantly expanded. Prevention services reached 195,379 injecting drug users (IDU), 33,449 female sex workers (FSW), 19,749 men who have sex with men (MSM) and 57,558 individuals serving sentences in penitentiary institutions (prisoners).
- ❖ Unified national system for monitoring and evaluation of the epidemic response is implementing.

Coverage of representatives of vulnerable groups with prevention services by January 1, 2009

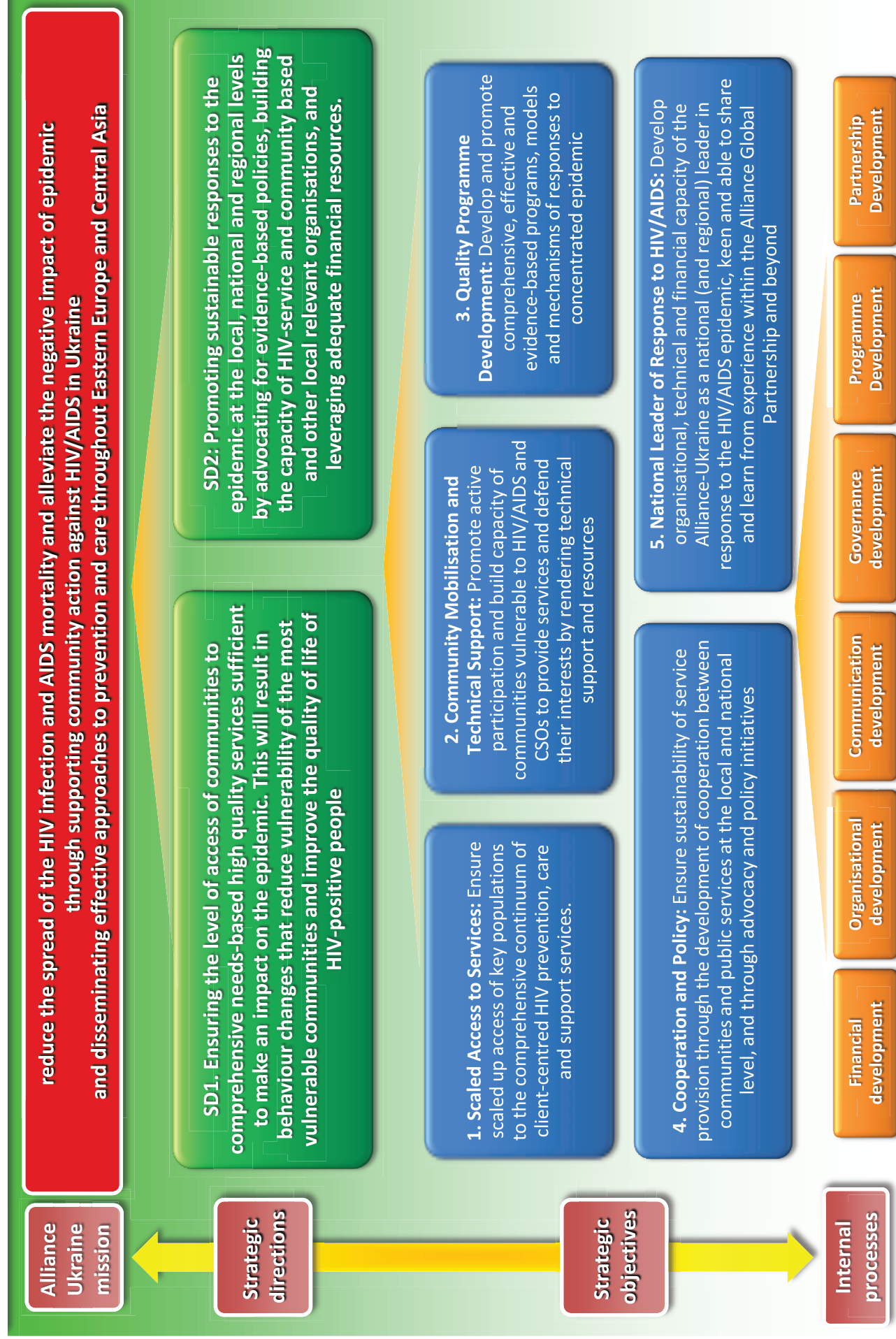


Map of services available through the financial and technical support of Alliance-Ukraine in 2008





# Strategic Framework 2010





## 2. Mission, Values and Strategy

The International Charitable Foundation “International HIV/AIDS Alliance in Ukraine” is a professional organization leading national efforts in response to the HIV/AIDS epidemic in Ukraine.

### 2.1. The Alliance-Ukraine Becomes an Independent Autonomous Organization Within the Global Alliance Partnership

**Starting from 2009 “International HIV/AIDS Alliance in Ukraine” became an autonomous organization with independent governance structures. Alliance-Ukraine now is a linking organisation within the global Alliance partnership uniting more than 30 organisations from different countries.**

According to its global partnership strategy the International HIV/AIDS Alliance encourages transition of its country offices to independent national organisations supporting community action to the overcoming HIV/AIDS epidemic. Upon acquiring organisational and managerial independence these organisations share the key values and remain within the International Alliance global partnership. The first Alliance country offices moved to the independent status are those in the Ivory Coast in 2006, Andhra Pradesh (India) in 2007 and the Caribbean in 2008. Alliance Ukraine became independent at the beginning of 2009.

Alliance started to work in Ukraine at the end of 2000 – at first, as an international technical assistance project within the Transatlantic HIV Prevention Initiative supported by the US Agency for International Development and the European Union (2000-2004). Alliance Ukraine became a separate legal entity in March 2003 after the Ministry of Justice of Ukraine had registered “International HIV/AIDS Alliance in Ukraine” as an international charitable foundation with the International Alliance Secretariat (Brighton) as a founder.

Despite legal dependency Alliance Ukraine has always been guided by the real needs for effective HIV

response in Ukraine, relying on national experts, thoroughly studying and addressing the epidemic dynamics, changes and needs of the communities vulnerable to HIV.

In 2007 Kyiv and Brighton agreed to launch a transition process of the Alliance Ukraine from a country office to an independent linking organisation with its own separate governing bodies.

The first real test for independence took place when the Alliance Ukraine was approved as one of the Principal Recipients of Round 6 HIV Grant submitted by the country to the Global Fund to fight AIDS, Tuberculosis and Malaria. Alliance Ukraine has been implementing it since August 2007.

In 2008 the recommendations of the Comprehensive External Evaluation of the 2004-2008 national AIDS response in Ukraine and the Global Fund advice sped up the transition process of the Alliance Ukraine into an independent linking organisation within the global Alliance partnership.

#### **The mission, values and team of the Alliance-Ukraine remain unchanged**

The new Alliance Ukraine retains the same mission, vision and values that have been guiding the Alliance activities over the recent years. Supporting community action on HIV/AIDS locally, nationally and regionally will continue to be the cornerstone and *raison-d’être* of the organisation. Our team, well-known to all the stakeholders, will do their best to develop further professionally and improve skills necessary for effective implementation of complex and large-scale programmes to overcome the epidemic. The official name and legal status also remain the same. The “International HIV/AIDS Alliance in Ukraine” is an international charitable foundation but with modified independent governing bodies now including citizens of Ukraine and other countries of the region.

**Independent governing bodies will strengthen the Alliance Ukraine to rapidly respond to the needs of overcoming HIV/AIDS in Ukraine and in the region.**



The essence of the change is creation of independent governing bodies including the Board and Supervisory Committee. The governing bodies involve well-known Ukrainian experts working for national non-governmental and international organisations as well as leaders in public health and corporate governance including people directly affected by HIV.

The new governing bodies will strengthen effectiveness of the Alliance Ukraine joint team, most of all, due to incorporation of rich experience and high-level expertise of national and regional experts. Besides, regular governing board meetings will now take place in Ukraine; this will also create an opportunity for more regular communication and closer links between the governing board members, Alliance management team and staff. The new governing bodies will enable further improving the ways to reach strategic goals, implementing the Alliance Ukraine vision and mission. The Supervisory Committee will ensure improvements of financial aspects of the Alliance's activities and its corporate culture. The members of the Alliance Ukraine governing bodies will follow the principles effectiveness with efficiency, accountability and transparency.

The new Board and Supervisory Committee will encourage strengthening of cooperation with national and international stakeholders; ensure better use of experience and skills of the partner organisations and communities involved in scaling up effective HIV/AIDS response in the country.

## New mechanisms to coordinate with partners and ensure accountability

The activities of the Alliance-Ukraine's Supervisory Committee are supported by the creation of a specialized unit to deal with external partner relations, risk management and compliance with the requirements of legislation, donors and internal regulations. With the establishment of this unit the Alliance-Ukraine is introducing additional mechanisms for accountability, improved efficiency and transparency of the organization's activities.

Primarily the unit will strengthen networking with external partners, thus contributing to a broad recognition and understanding of the organization and its response to external inquiries. In particular the unit will be responsible for review of external and internal questions, proposals and complaints.

Secondly, it will provide support to management and staff on issues of compliance of organization activity with the provisions of Ukrainian legislation, donor requirements and internal policies and procedures.

Thirdly, unit employees will ensure timely identification, analysis and management of risks that may threaten the efficient implementation of the Alliance's strategic objectives to overcome the HIV/AIDS epidemic in Ukraine.

## 2.2. Strategic Priorities of the Alliance-Ukraine

**The Mission** of the Alliance-Ukraine is to reduce the prevalence of HIV infection and AIDS mortality, as well as to alleviate the negative impact of the epidemic through the provision of support to community action against the HIV/AIDS epidemic in Ukraine, as well as through the dissemination of effective approaches to HIV prevention and treatment throughout Eastern Europe and Central Asia.

Key **strategic areas** of Alliance-Ukraine activity are:

- ❖ **To ensure sufficient access of communities to comprehensive, high-quality needs-based services in order to make an impact on the epidemic. This will lead to behavioural changes which can reduce the risk of HIV infection among vulnerable populations and improve the quality of life of people living with HIV.**
- ❖ **To support a sustainable response to the epidemic at the local, national and regional levels through advocating policies developed on the basis of situation analysis; building the capacity of AIDS-service, non-governmental and other relevant local organizations, and encouraging the mobilization of adequate financial resources.**

These two strategic areas are being implemented through **five strategic objectives** of the Alliance-Ukraine:

- ❖ Scaling-up access of key most-at-risk population groups to comprehensive and uninterrupted HIV/AIDS prevention, care and support services focused on client needs. Key activities in this area include provision of a comprehensive package of services for the prevention of higher risk of infection for vulnerable groups; medical, social and psychological support to HIV-positive people and provision of psychosocial care and support; advocacy of the interests of representatives of vulnerable groups at the national and regional levels.
- ❖ Encouraging active participation and capacity building of communities and civic associations of people vulnerable to HIV/AIDS in order to create opportunities for service provision and protection of interests through technical assistance and provision of resources. The Alliance-Ukraine not only provides financial and methodological support to initiative groups for the mobilization of communities vulnerable to HIV, but also supports creation of coalitions and networks of vulnerable communities at national level.
- ❖ Development and promotion of comprehensive, efficient, high quality and evidence-based programmes, models and mechanisms in response to the concentrated HIV/AIDS epidemic. Most of these programmes are based on analysis of global experience adjusted to local conditions and take into account the needs of target groups.
- ❖ Ensuring sustainable service provision through the development of cooperation between communities and government services at the local and national levels by means of advocacy and policy initiatives. Access to services and opportunities for their efficient provision are increased through improved multisectoral coordination and alignment of activities of organizations at the national and local levels.
- ❖ National leadership in response to the HIV/AIDS epidemic, in particular, building the institutional, technical and financial capacity of the Alliance-Ukraine as the national non-governmental leader in the HIV/AIDS epidemic response, which has valuable experience from other countries and which can share its experience and learn from others within the Alliance Global Partnership and beyond.





### 3. Key Programmes Implemented by the Alliance-Ukraine in 2008

In 2008 the Alliance-Ukraine, in cooperation with its regional partners, implemented several significant programmes in response to the HIV/AIDS epidemic in Ukraine, thus continuing its essential contribution to implementation of the national HIV/AIDS programme.

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

##### Round 1

The Alliance-Ukraine implemented the programme **“Overcoming the HIV/AIDS Epidemic in Ukraine”** as a principal recipient of the grant provided by the Global Fund to Fight AIDS, Tuberculosis and Malaria from 15 March 2004 till September 2008 (with an extension till the end of March 2009). Over this period the programme became the most powerful initiative in the country in the area of HIV/AIDS response with a total budget of around US\$ 100 million.

Programme activities focused on four key areas:

- ❖ treatment, care and support for people living with HIV/AIDS;
- ❖ further development and scale-up of prevention services for populations most vulnerable to HIV (injecting drug users, commercial sex workers, prison inmates);
- ❖ creation of an enabling environment through information and education activities and advocacy;
- ❖ promoting the development and implementation of a system for monitoring and evaluation of the HIV/AIDS epidemic response in Ukraine.

Although programme activities are still ongoing, it is already clear that the key target indicators of the programme “Overcoming the HIV/AIDS Epidemic in Ukraine”, i.e., ensuring large-scale access to anti-

retroviral therapy, have been exceeded. Thanks to the professionalism of Alliance-Ukraine employees and partnership with the Ukrainian AIDS Centre and All-Ukrainian Network of People Living with HIV, and also the commitment of local community organizations, large-scale initiation of ART has been possible (from 255 patients in early 2004 to over 9000 in September 2008, 6070 of them are supported by the Alliance-Ukraine). This has resulted in a reduced number of new AIDS cases (a 4% decrease in 2008 compared to 2007). The range of prevention programmes expanded within the Global Fund grant. Key indicators for target groups most vulnerable to HIV, such as injecting drug users, female sex workers and prisoners, have been surpassed. The introduction of substitution therapy services is the most significant expansion of HIV/AIDS-related services in Ukraine in recent years.

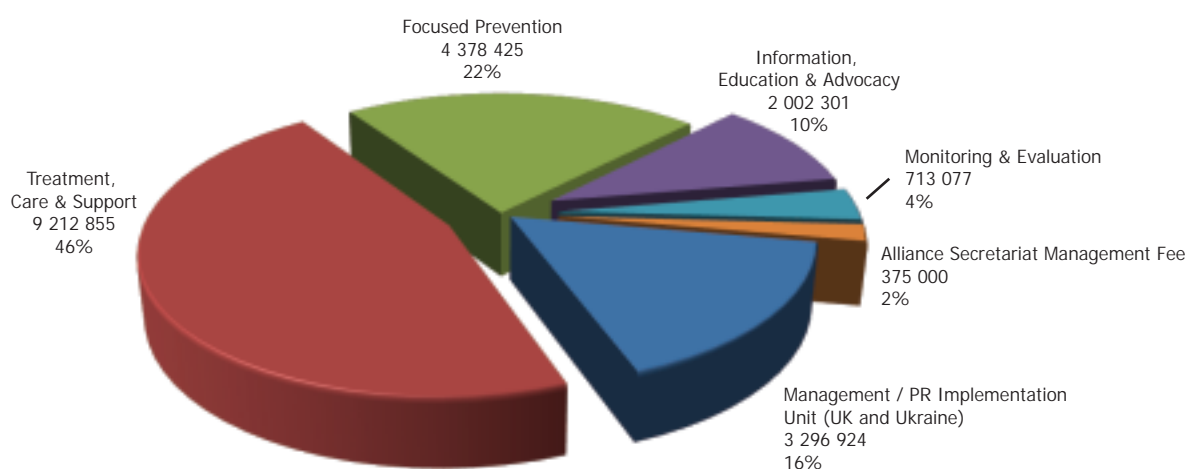
All IDU and FSW covered by prevention projects received the essential package of HIV prevention services (condoms, syringes for IDU, lubricants for MSM, information materials, counselling by social workers and other specialists depending on client needs), as well as access to rapid HIV testing, community centres and counselling from specialists. In 2008 project clients also gained access to diagnostics and treatment of sexually transmitted infections.

The programme has become a powerful driving force in the national response to the HIV/AIDS epidemic and has created a reliable foundation for a successful epidemic response in the coming years.

On 18 December 2007, with Global Fund agreement, the Round 1 Global Fund Programme “Overcoming the HIV/AIDS Epidemic in Ukraine” received a no-cost extension till 31 March 2009. In the six months following programme completion, from 1 April till 30 September 2009, the process of closure of the Round 1 programme will be implemented, which includes report writing and conducting an independent audit inspection of the Principal Recipient and sub-recipients.



Structure of «International HIV/AIDS Alliance» expenditures for the Round 1 Programme «Overcoming the HIV/AIDS Epidemic in Ukraine» in 2008



## Round 6

The programme **“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 and has two Principal Recipients – ICF “International HIV/AIDS Alliance in Ukraine” and All-Ukrainian NGO “All-Ukrainian Network of People Living with HIV”. The maximum programme budget for the period from August 2007 to July 2012 amounts to US\$ 151 million.

The first programme stage is designed for August 2007–July 2009, with the budget of US\$ 29.6 million. The second stage is planned for the period from August 2009 till July 2012 with a tentative budget of US\$ 121.4 million. Application for the second programme stage will be developed in coordination with the National Council on the Response to HIV-infection/AIDS in February–March 2009 in accordance with procedures recommended by the Global Fund.

The overall programme goal is to reduce the number of HIV transmission cases and rates of HIV-

related morbidity and mortality in Ukraine through the implementation of interventions focused on the most vulnerable population groups. With the aim of strengthening, sustaining and further developing the successes in response to HIV/AIDS that were achieved with the support of the Global Fund Round 1 grant, as well as with funding from the state budget and other sources, the programme 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, including injecting drug users (IDU), men who have sex with men (MSM), female sex workers (FSW) who work in the streets, prisoners, children aged 10–18, and people living with HIV/AIDS (PLHA).

It is expected that the introduction over five years of large-scale prevention programmes for those population groups most vulnerable to HIV will ensure that a larger percentage of IDU, FSW and MSM will start practicing safer behaviour to avoid infection (using clean injecting equipment and condoms); in particular, the share of IDU practicing safer behaviour to avoid HIV infection will increase from 53% in

2006 to 65% in 2012, the respective percentage of FSW will increase from 85% in 2006 to 94% in 2012, and MSM from 72% to 85%. A long-term outcome of programme implementation will also include reduced HIV prevalence in these population groups.

The Alliance-Ukraine is directly responsible for two of five key programme objectives: ensuring adequate access to integrated prevention, treatment, care and support services for the most vulnerable population groups, and implementation of monitoring and evaluation (M&E) of programme performance, as well as strengthening the National M&E System and, in part, contributing to the creation of a favourable environment for a long-term and efficient response to the HIV/AIDS epidemic in Ukraine.

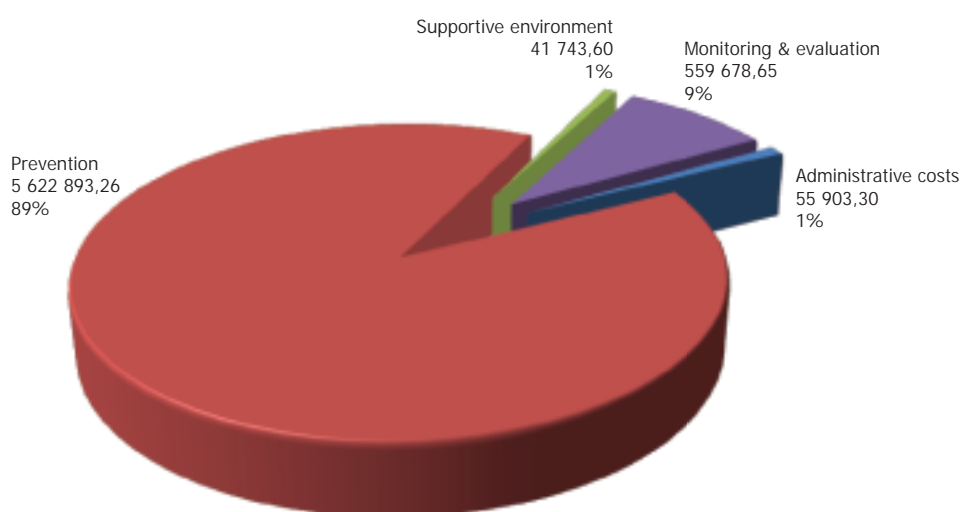
A summary of the first 18 months of implementation of the programme “Support for HIV and AIDS Prevention, Treatment and Care for the Most Vulnerable Populations in Ukraine” by the Alliance-Ukraine reveals its success. The range of prevention services has been expanded within this programme. **Four key target programme indicators – coverage**

**of IDU, FSW, MSM and prisoners by prevention services – have been surpassed.** Funding was provided to 94 grantee organizations. During the first programme year 202 grant agreements were signed for the total amount of UAH 12,252,971. Additionally the Alliance-Ukraine provided another 58 organizations with condoms for the implementation of prevention projects.

Other achievements of the Round 6 programme include:

- ❖ active work began to implement screening diagnosis, prevention and treatment of sexually transmitted infections (STI) among the representatives of vulnerable groups (IDU, FSW, MSM). Agreements between 78 NGOs and 101 specialized STI clinics were signed to perform targeted STI diagnosis and treatment among representatives of vulnerable groups.
- ❖ A grant agreement with the Ukrainian AIDS Centre of the MoH, regarding organization of STI treatment among representatives of vulnerable groups on the basis of specialized health care

The Structure of ICF “International HIV/AIDS Alliance in Ukraine” Expenditures within Round 6 Programme “Support for HIV and AIDS Prevention, Treatment and Care for Most Vulnerable Populations in Ukraine” in 2008, in US\$





facilities in cooperation with Ukrainian non-governmental organizations, was prolonged and expanded.

- ❖ Establishment of a coordination centre on STI diagnostics and treatment for representatives of vulnerable groups has commenced.
- ❖ The programme has initiated a review of current and development of new universal procedures for utilization of used syringes. This will help overcome the existing difficulties faced by organizations working with harm reduction pro-

grammes (syringe exchange programmes for IDU).

- ❖ Grant agreements with the All-Ukrainian Network of PLWH were signed to procure medicines to treat HIV/AIDS.
- ❖ ARV drugs, opportunistic infection medicines, CD4 and viral load tests, and other commodities were procured for the first and second years of programme implementation. All medicines have been delivered to Ukraine.

## Collaboration with the All-Ukrainian Network of People Living with HIV on procurement

In 2008 **collaboration with the All-Ukrainian Network of People Living with HIV on procurement and supply chain management** continued. The Alliance is procuring medicines and commodities for the Network prevention and treatment programmes funded from the Global Fund Round 6 grant within this project. Last year the project budget was UAH 3.48 million; the second year's budget is UAH 9.13 million. The range of commodities and services includes ARV drugs, medicines for treatment of opportunistic infections, test kits for CD4 and viral load tests, condoms, materials for TB diagnostics, methadone, and logistics and distribution services.

The overall goal of the joint project with the Network is to harmonize the institutional efforts of the two Principal Recipients of the Global Fund grant, and in particular to use the Alliance's capacity in procurement and supply to avoid duplication of functions and creation of a parallel procurement department in the Network. Such distribution of functions was proposed in the initial country application. During a year of implementation this collaboration mechanism proved absolutely functional, contributing to the rational use of financial and institutional resources.

ARV medicines were procured for years one and two. All medicines were imported to Ukraine and delivered to regional AIDS centres (apart from Viracept which was held up to undergo additional quality testing; currently it is ready for distribution). Tenders for procuring medicines to treat opportunistic infections were completed and medicines distributed in June; they have been delivered to end consumers. In December 2008 a tender for procuring medicines to treat opportunistic infections for the second year was conducted. Deliveries to regional AIDS centres are expected to be completed by March 2009. CD4 cell tests and viral load tests used to monitor ARV programmes were procured and delivered to regional AIDS centres in August 2008 on the Network's request. Procurement of CD4 cell tests and viral load tests for the second year was completed in December 2008. Deliveries will be completed during February–March 2009. Tenders for procuring materials for tuberculosis testing, including tuberculosis rapid tests, TB drug sensitivity test kits, plastic containers and wooden applicators, were conducted in June–July 2008. TB drug sensitivity test kits and TB rapid tests were distributed in September; other materials were delivered to end consumers in November 2008.



### 3.2. Project “Scaling Up the National Response to HIV/AIDS Through Information and Services” (SUNRISE).

The Alliance-Ukraine is partnering the Program for Appropriate Technology in Health (PATH) and the All-Ukrainian Network of People Living with HIV to implement the project **“Scaling Up the National Response to HIV/AIDS Through Information and Services” (SUNRISE)**. For the Alliance-Ukraine it is the second largest project (in terms of importance and scale) to fight the epidemic, with a budget of over US\$8 million.

In 2008 the project was implemented in eight most affected regions of Ukraine – Dnipropetrovsk, Donetsk, Kyiv, 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 expansion of access to high quality information and prevention and care services among these populations in these regions. Achievement of this goal is planned through the implementation of four key objectives:

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

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

Eighteen non-governmental organizations received funding for the implementation of prevention programmes in these populations in 2008.

*Overall, at the beginning of 2009 prevention services and information within the SUNRISE project reached 160,165 IDU, 26,964 CSW and 17,834 MSM.*

Within the information component of the project, 65 publications in the area of prevention were developed in 2008. A total of 389,604 copies of these materials were disseminated among the representatives of key populations.

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

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

In 2008 16 non-governmental organizations received funding to provide services to people living with HIV/AIDS. In particular, project clients received non-medical care and support services; social follow-up and psychological support. Clients also had an opportunity to participate in self-help groups and receive legal counselling. Within this component, day care centres for children of PLHA and support groups for family members were organized.

*Overall, in the beginning of 2009 services and information on different aspects of life with HIV/AIDS were being provided to 41,426 PLHA.*



Ambassador Mark Dybul, Global HIV/AIDS Coordinator for the U.S. Government President's Emergency Plan for AIDS Relief (PEPFAR), visited the Kyiv City AIDS Center on October 15, 2008, where he discussed HIV/AIDS services provided by the Center, including methadone-based medication assisted treatment for injection drug users implemented by the Alliance within SUNRISE framework.

Ambassador Dybul commended the Government of Ukraine for the leadership it has demonstrated to date in supporting implementation of this vital program, and emphasized the importance of partnership and cooperation with the Ministry of Health, Global Fund and HIV/AIDS partners and stakeholders to strengthen Ukraine's national AIDS response and contain HIV transmission by bringing key services to most at risk populations.



### 3. To strengthen the prevention and care continuum with a particular focus on improvement of the quality and reach of voluntary counselling and testing (VCT) services.

The Program for Appropriate Technology in Health (PATH) is the main partner of the Alliance-Ukraine in implementation of this component. The SUNRISE project conducts training for VCT specialists, provides technical assistance to VCT centres and develops formats for cooperation between NGOs and VCT centres.

*In 2008, thanks to SUNRISE, 257 specialists received professional training on HIV-related counselling and testing in accordance with national and international standards. Having received appropriate technical, advisory and methodological assistance, 201 VCT service centres provided counselling and testing services to 6920 individuals during the year.*

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

In 2008 the Alliance-Ukraine continued to provide technical and methodological assistance to partners working in the area of overcoming the epidemic. Below are the main achievements of the project within this component:

- ❖ During the year, 191 NGO representatives participated in training on various aspects of institutional capacity building, including trainings for trainers, positive prevention programme implementation, mobilization of HIV vulnerable communities, and administration of volunteer work and organization resource management.
- ❖ The Alliance-Ukraine organized and conducted three operational studies on the following topics: "Voluntary HIV Counselling and Testing with Rapid Tests as a Mechanism to Ensure Involvement and Access of Vulnerable Groups to HIV and STI Prevention and Treatment Services", "Evaluation of the Use of Gender Sensitive Approaches in HIV Prevention Programmes" and "Evaluation of a Comprehensive Package of Services Provided to Most-at-risk Groups in HIV Prevention Programmes".

- ❖ In 2008 the SUNRISE project continued to support the work of nine regional coordinators in Dnipropetrovsk, Donetsk, Mykolayiv, Odesa, Kherson and Cherkasy oblasts, in the Autonomous Republic of Crimea and in the cities of Kyiv and Sevastopol. Their main tasks are to provide technical assistance to local NGOs, coordinate regional efforts in response to the epidemic, and foster cooperation between relevant NGOs and government bodies regarding planning, development and implementation of regional HIV/AIDS programmes.

### Expanding access to Medication Assisted Treatment for HIV-positive IDUs

The component "**Expanding access to Medication Assisted Treatment for HIV-positive IDUs in Kyiv, Odessa and Mykolayiv**" covers the period is October 1, 2007 – September 30, 2009. The goal of this project is to develop models of integrated strategy for medical care, social and psychological support to IDU living with HIV/AIDS, and to implement these models in care and support services to HIV-positive IDUs in three regions of Ukraine, with consequent implementation all over the country at both regional and national levels.

During 2008, 119 IDU were receiving comprehensive medical, social and psychological services, including medication assisted treatment (MAT). This pilot project is characterized by an integrated approach that is applied to the organization of treatment, care and support to HIV infected drug users and that provides an opportunity to concentrate all services needed by HIV positive clients of MAT at one site. The models of provision of integrated health, social and psychological services with the efficient links with governmental and non-governmental service providers to ensure a cohesive care and support to HIV positive IDU are being implemented on the basis of three health care facilities (Kyiv City Clinical Hospital № 5, Mykolayiv Central District Hospital and Odesa Oblast Narcological Dispensary).

The project on social reintegration of HIV positive clients of the medication assisted treatment is being implemented in Odessa. It covers 21 clients with its services. Development of methodological guidelines for the dissemination and use of successful approaches to the provision of such treatment in Ukraine and other countries was also launched.





### 3.3. Levi Strauss Foundation HIV Prevention Project for University Students

In the first six months of 2008 the Alliance-Ukraine implemented the project **“HIV/AIDS and HIV Rapid Testing Awareness Campaign for University Students of three cities – Kyiv, Odesa and Dnipropetrovsk”** with financial support from the Levi Strauss Foundation. The project focused on implementation of the first large-scale HIV prevention campaign among university students under the slogan “Victory of a Healthy Nation”. Local project implementing partners included resource centres “Socium–XXI” in Kyiv, “Nashi Deti” (“Our Children”) in Odesa and “Dniprovski Humanitarni Initiativy” (“Dnipro Humanitarian Initiatives”) in Dnipropetrovsk.

Rapid test kits for HIV (from the Pharmasco company) were purchased and a PR campaign covering 20 million people was conducted for efficient project implementation. Training for 58 health care workers on counselling and HIV testing skills with the use of rapid tests was provided; 685 volunteers selected from among young people were trained, and advertising and information materials targeted at a young audience were designed and produced.

During the information and prevention campaign which was conducted from April to July 2008, 15,000 people were tested for HIV. Testing was anonymous, voluntary and free. Over 100,000 students received information about HIV/AIDS, the routes of HIV transmission and HIV testing procedure, and 425,000 condoms were distributed.

A total of 41 higher education institutions and three student out-patient clinics participated in the information and prevention campaign. Rapid HIV testing among young people aged 18–30 was also performed during a special event devoted to AIDS Memorial Day (18 May) in Shevchenko Park in Kyiv.

Overall 12 positive test results were obtained (all in Kyiv). According to the statistics, these positive results were related to injecting drug use and unprotected sexual contact.

Voluntary counselling and testing with the use of rapid tests was brought as close as possible to the target audience, i.e., the campaign was conducted on the basis of the universities, which is a distinguishing feature of the project. High quality project implementation was possible thanks to support from the Ministries of Health and of Education and Science of Ukraine, while on the local level it was based on close collaboration between the governmental sector and non-governmental organizations.

The Levi Strauss Foundation highly appreciated the success of the project, and accordingly extended its cooperation with ICF “International HIV/AIDS Alliance in Ukraine”, providing another US\$ 75,000 for implementation of a new project “Reduction of Stigma and Discrimination of HIV Vulnerable Groups. HIV Testing of Vocational Training School Students and Young People”.

On 14 May 2008 Kasha Saltsova, vocalist from the band Little Zakhes underwent rapid HIV testing at Kyiv National University of Construction and Architecture within the project supported by the Levi Strauss Foundation.

“I’ve been tested for HIV three times already, because I’m an adult and I live in Ukraine where 400,000 people are living with HIV, according to optimistic estimates. And I think that it is adult and normal behaviour to know your HIV status”, said Kasha. “I only hope that my example can show that you shouldn’t just be scared that you might have some disease; it’s much more dangerous to be unaware of it and continue transmitting an infection which is still incurable.”

### 3.4. Regional Technical Support Centre.

In 2007 the Secretariat of International HIV/AIDS Alliance initiated the process of decentralization of technical support provided to local organizations. For this purpose it was decided to create six Regional Technical Support Hubs to provide cost-effective and high quality technical assistance to the organizations. The longer-term vision of the hubs is to ensure access to new knowledge and methods in order to improve the implementation of the regional and national programmes, as well as to meet most of the needs of non-governmental organizations in technical support and capacity building.

The Alliance-Ukraine strategy for 2008-2010 envisages the development and dissemination of effective practice throughout the region of Eastern Europe and Central Asia. Pursuant to these priority strategic areas, since 2008 the Regional Technical Support Hub has been working on the basis of the Alliance-Ukraine with the key task to provide high quality international technical support to the organizations in Eastern Europe and Central Asia. Provision of technical support is based on the experience of the Alliance-Ukraine and its partners in the implementation of large-scale programmes supported by the Global Fund and USAID.

Key technical support areas include:

1. HIV/AIDS prevention and care work in concentrated epidemics. Development and introduction of locally tailored comprehensive service packages responding to the needs and rights of the communities, public health challenges and development objectives. Development of innovative approaches to scaling up the access to key prevention services.
2. Mobilisation and involvement of vulnerable communities in the development, implementation and evaluation of prevention care and support programmes.
3. Development and management of large-scale HIV/AIDS programmes with a particular focus on the specifics of the Global Funds and USAID funded projects.
4. Procurement and supply management of medicines and prevention commodities. Organization of treatment, care and support to PLHA. Substitution maintenance therapy.
5. Monitoring and evaluation of the programmes; support to the national and regional systems for monitoring and evaluation of epidemic response.
6. Policy development and advocacy

Key providers of technical support at TS Hub (Kyiv) are experts in the practical implementation of programmes from local partner NGOs, national experts in the programmatic areas from Ukraine and practically all countries of the region, international experts with the regional experience of work and understanding of its special features; most experienced employees of the Alliance-Ukraine.

During 2008 the Centre provided 192 days of international consultations and training sessions; the annual project budget was US\$ 84,000. More details about this project are provided in Section 7.2.



## 4. HIV Prevention Among Vulnerable Groups

### 4.1. Prevention Among Injecting Drug Users (IDU)

#### 4.1.1. Efficiency and Effectiveness of Prevention Services

There are an estimated 325,000–425,000 injecting drug users in Ukraine. According to data from the Ukrainian AIDS Centre, HIV prevalence among them may vary from 17% to 70%.

According to the AIDS Centre, injecting drug use is one of the most common HIV transmission routes in Ukraine – 7009 such cases (37% of the total number) were reported in 2008.

By the end of 2008 prevention programmes covered 195,379 IDU, 23% of whom were women. The Alliance-Ukraine provides support to HIV/AIDS prevention programmes among IDU that are being implemented by 90 non-governmental organizations in all regions of Ukraine.

Successful implementation of HIV/AIDS response programmes is based on the creation of a comprehensive system of health care and social support. All clients of harm reduction programmes for IDU have access to a comprehensive package of services which includes the following:

- ❖ provision of voluntary counselling and testing for HIV;
- ❖ diagnosis and treatment of sexually transmitted infections;
- ❖ distribution and exchange of syringes, provision of alcohol swabs and/or condoms at in-patient, street or mobile syringe exchange sites and through outreach activities;
- ❖ counselling on HIV infection and drug use provided by social workers who have been trained within the programme, as well as distribution of information about other prevention and treatment programmes in the region (substitution therapy or ARV therapy programmes);
- ❖ a system of referral to profile specialists in cases when there is a need for specialized

medical, legal or other counselling. If needed, social workers provide social follow-up to clients to ensure receipt of necessary services;

- ❖ group work within the project on a regular basis (self-help groups and therapeutic groups);
- ❖ involvement of prevention programme clients in training sessions and provision with relevant literature and information materials.

Additional services include prevention of overdose with the use of naloxone, distribution of common medicines and intimate hygiene products (for female IDU); organised leisure time activities for clients; help with professional training and employment, etc.

The basic components of a comprehensive service package are being provided by all non-governmental organizations, but community harm reduction centres for HIV vulnerable groups provide the best opportunity to not only unite representatives of vulnerable groups but also provide them with prevention services concentrated at one site. Currently 37 such community centres are working in 29 cities of Ukraine.

In order to improve access to IDU in the conditions of the closed drug scene and to hard-to-reach groups such as stimulant users or young IDU, new directions of work have been launched in Ukraine: mobile clinics, *Peer Driven Interventions* models, programmes of harm reduction through pharmacies, and work focused on stimulant users.

#### 4.1.2. Programmes for Stimulant Users

For many years opiates remained the most common narcotic among drug users in Ukraine. However, in 2007 and 2008 a declining trend was observed in the share of opiate users, while the percentage of stimulant users significantly increased.

Taking this fact into account, the Alliance-Ukraine





made the decision to initiate prevention interventions for stimulant users. Beginning in October 2008 services in this area are now being provided by 27 organizations in Ukraine.

One of the methods to involve this new target group in prevention projects is the Peer Driven Interventions model. This model is also used to research the specific features of this new client group – demographic characteristics, drug use practices (in particular stimulant use), and to identify the methods of their use. On the basis of international experience in development of special services for stimulant users, the method of routine individual and group work was used.

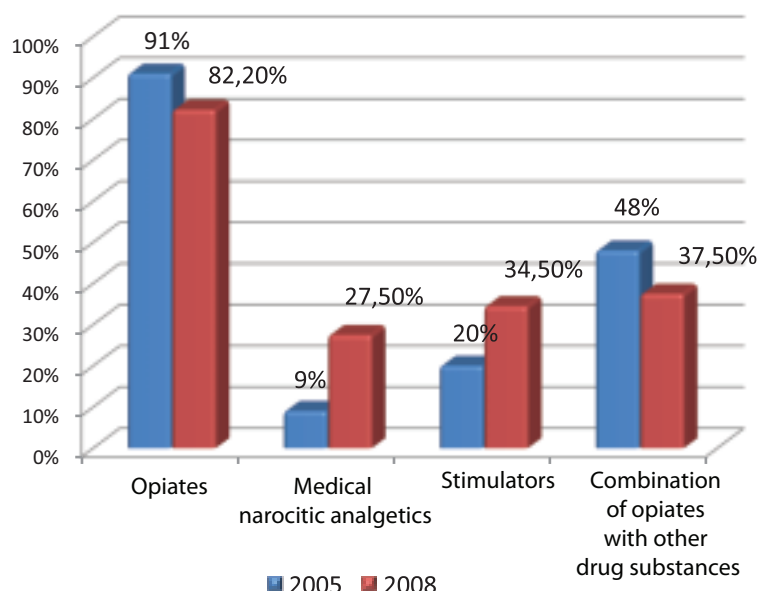
Implementation of several surveys is planned in order to help study in more detail the characteristics of the drugs used which are specific to Ukraine, and

to apply this information to consequent planning of prevention activities for this target group. The Alliance-Ukraine has published the document *Harm Reduction for IDU Who Use Stimulants*, which is the first step in this direction.

### 4.1.3. Participatory Site Assessment

The methodology of Participatory Site Assessment (PSA) was first used in Ukraine in 2005–2006 within SUNRISE project implementation. The main goal of PSA is to evaluate the provision of HIV/AIDS-related services to most-at-risk groups on the level of an individual territorial unit and to mobilize IDU, FSW and MSM communities to take part in epidemic response activities. The key defining feature of the PSA is that it is performed by teams composed of representatives of groups most at risk of contracting HIV (IDU, FSW, MSM).

### Comparative Numbers of Users of the Most Common Drugs



Source: Research of International HIV/AIDS Alliance in Ukraine.

PSA includes three stages.

Situation analysis is made at the first stage:

- ❖ assessment of the local situation related to risk behaviours;
- ❖ assessment of the number of population groups that are key drivers of the epidemic;
- ❖ identification of the specific features of those sub-groups that comprise key populations;
- ❖ identification of the territories with a high concentration of IDU and people involved in prostitution;
- ❖ identification of migration models of IDU and people involved in prostitution; in each territory.

The second stage includes implementation of specific tasks to evaluate the vulnerability factors of key groups and accessibility of HIV/AIDS prevention services:

- ❖ identification of general and specific factors contributing to the spread of HIV and sexually transmitted infections, and accessibility of treatment, care and support services for different sub-groups in each territory;
- ❖ identification of currently-provided prevention services and proposals for the efficient scale-up of clients' involvement and service provision;
- ❖ identification of obstacles to the provision and uptake of services in each territory and proposal of methods to remove these obstacles;
- ❖ mobilization of vulnerable group representatives to share their experience in risk reduction, health care provision and support methodology, as well as to share information about available services.

The aim of the third stage is to establish coordination between territories (sites) in order to develop and coordinate services that meet real needs, through implementation of the following activities:

- ❖ work with government institutions, NGOs, representatives of vulnerable groups and other stakeholders to discuss and validate assessment results;
- ❖ cooperation with government institutions, NGOs, representatives of vulnerable groups and other stakeholders to create a multi-level coordination mechanism in each site;

- ❖ assistance to local coordination mechanisms to develop the next project stage.

In 2008 the Alliance-Ukraine implemented another stage of PSA as a method for capacity building and involving in prevention activities those non-governmental organizations which previously had no broad experience of implementation of prevention programmes among vulnerable groups but were willing to launch such activities.

At the end of 2007 an open call for proposals was announced to these organizations. On the basis of the tender, 19 non-governmental organizations were selected and invited to participate in a series of training workshops in 2008 and undertake PSA in their towns and cities.

As a result, 120 NGO employees and representatives of vulnerable groups who were included in the assessment teams received intensive PSA training and performed assessments in Bakhchisaray, Vorsel, Dnipropetrovsk, Donetsk, Zhytomyr, Zhovty Vody, Kostiantynivka, Kremenchuk, Melitopol, Mykolayiv, Odesa, Sevastopol, Ternopil, Kharkiv, Cherkasy, Chernihiv and Yalta.

The results of these assessments were used for planning prevention activities and developing project proposals which were submitted by the organizations to the Alliance in 2008.

During PSA implementation the teams were guided by the first Ukrainian manual on PSA published by the Alliance-Ukraine in 2008. The authors of this manual included Ukrainian experts who directly participated in the PSA at the testing stage of this methodology in Ukraine and in further adaptation of PSA to the local context. The manual, which provides a clear description of the methodology and its impact on the further activities of AIDS-service organizations, can be used in future for implementation of new PSA stages.

#### 4.1.4. Introduction of the Peer Driven Interventions Method (PDI)

The model of peer driven interventions (PDI) developed by Robert Broadhead (University of Connecticut, USA) and adapted for Ukraine by Alliance-Ukraine experts, proved highly effective. Based on the success and experience of pilot projects realised in 2007, the project "Peer Driven Interventions" was implemented in the reporting year by 15 NGOs in eight oblasts of Ukraine. During six months of project activity 9005 IDU were covered with prevention services.



The model is based on the principle of involvement and education of new clients by injecting drug users themselves through existing IDU networks. This approach fulfils two key tasks – to reach new clients who previously did not use the services of harm reduction projects, and to reach new, hidden sub-populations of IDU who were not covered by traditional programmes, including young people under 25, stimulant users and women. This model is closely linked to other activities of organizations and thus all involved clients can be referred to harm reduction projects. Project personnel initially received a relevant education at training workshops organized by the Alliance-Ukraine.

Since October 2008 the Peer Driven Interventions model has become a key area of prevention activity. To date projects based on this model are being implemented by 17 NGOs in 12 oblasts of Ukraine and the Autonomous Republic of Crimea. During six months of project implementation, coverage of 13,720 IDU who have never been clients of other prevention programmes is planned. By 1 January 2009 coverage amounted to 11,293 people.

The Alliance-Ukraine regularly performs quality monitoring of projects with the participation of international expert Robert Broadhead. This provides an opportunity to improve and adjust the model to client needs on a regular basis, taking into account

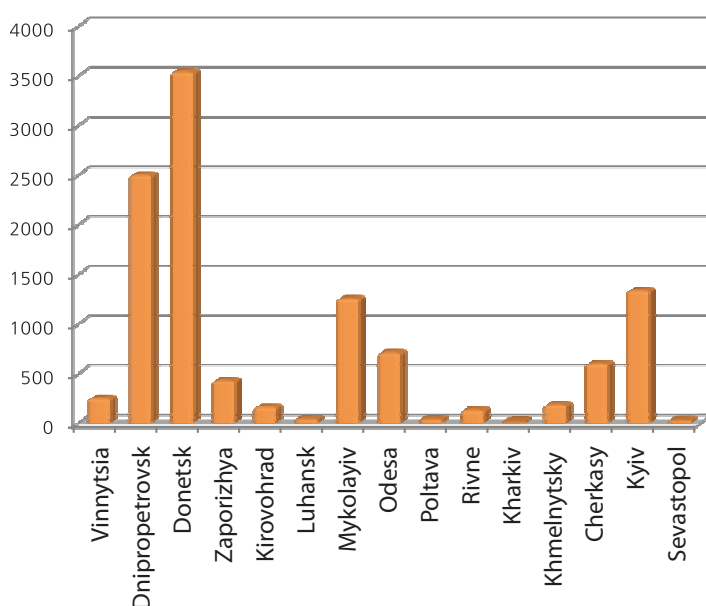
changes that occur on the Ukrainian drug scene. This model also provides an opportunity to monitor behavioural characteristics of clients through the built-in research component, which is extremely important for further planning of HIV prevention activities in Ukraine. The research results will be presented at the end of 2009.

#### 4.1.5. Harm Reduction Programmes through Pharmacies

Almost two years have passed since the first pilot project in Ukraine on HIV prevention among IDU clients of harm reduction programmes was launched on the basis of 24-hour pharmacy № 101 of the Pharmacia company in Kyiv. By the end of 2008 this programme involved 39 pharmacies representing 12 pharmacy networks of different forms of ownership in the cities of Kyiv, Cherkasy, Kherson, Vinnytsya, Poltava, Kharkiv, Kryviy Rih, Odesa, Illichivsk and Kodyma.

The project was not launched simultaneously in different cities, but within its average term of activity (12.3 months) it covered over 4200 IDU who made over 57,000 visits to pharmacies. The service package for IDU includes free distribution of syringes, condoms, alcohol swabs and information materials, and counselling services if requested.

Number of IDU Involved within Peer Driven Interventions Programmes, by Regions







The first harm reduction projects through pharmacies acted initially as syringe distribution sites. In June 2008 there was a long-awaited breakthrough in project implementation. Five Pharmacia pharmacies in Kryviy Rih, in cooperation with charity foundation “Gromadske Zdorovia” started syringe exchange, for which they receive an allowance from the Dnipropetrovsk Oblast Sanitary Epidemiological Station. The pharmacies are equipped with metal containers in which clients put used syringes. Social workers then deliver these syringes for further disposal to the AIDS centre, with which an agreement has been concluded. According to pharmacists (who were initially concerned about syringe exchange at the pharmacies) and their clients (who were also initially mistrustful), the project is gaining positive momentum every month and now over 14% of used syringes are brought to the pharmacies. This means that the streets and yards of Kryviy Rih have become cleaner, and, most importantly, clients understand that needle exchange is convenient and safe at the pharmacy where they can also receive necessary assistance and information about additional services and treatment.

In July 2008, in order to expand this best practice of syringe exchange to all regions of Ukraine, a project on advocacy and improvement of legal regulations regarding HIV prevention on the basis of pharmacies was launched (implementing agency: All-Ukrainian Pharmacy Association; implementation period: July 2008–February 2009). The project objectives are to facilitate the issue of regulatory documents by the MoH on introduction of syringe exchange on the basis of pharmacies; train and educate phar-

macists; develop and place information boards on HIV/AIDS; involve pharmacy networks from 10 regions of Ukraine into prevention activities, and foster positive public opinion.

From May to October 2008, in order to evaluate the efficiency of provision of services for injecting drug users through pharmacy networks, Kyiv International Institute of Sociology conducted operational research on “Pharmacy Interventions as a Mechanism to Ensure Involvement and Access of Representatives of Vulnerable Populations to Comprehensive Services”. The research covered six regions of Ukraine, and involved the participation of 25 employees of 14 pharmacies, 21 prevention programme employees from 11 NGOs, 11 ‘people in the street’ (pharmacy customers), 32 IDU clients of pharmacy prevention programmes and 33 IDU who were not programme clients. According to both professionals and IDU, the pharmacy prevention programme is a positive innovation which, despite all shortcomings and obstacles, is developing and expanding coverage of the target audience. The majority of respondents evaluated the programme positively as a modern, promising direction in interventions to prevent HIV among IDU. Project participants and experts say that another positive aspect of the programme is that in addition to its key objective, i.e., HIV and STI prevention, it provides an opportunity to increase the level of tolerance to IDU among general public.

Information in the media and participation in scientific and practical conferences also contribute to fostering a positive attitude to pharmacy prevention programmes and experience-sharing among

### Pharmacy Projects – Feedback from Participants

“At first I had my doubts, but now it’s very interesting working in the project. I find out a lot that’s useful even for myself when I read the information booklets.” (Yana, a pharmacist from a participating pharmacy).

“A pharmacy consultant cannot and should not change the life of a drug user in a few minutes. He or she provides only that service package which the client asks for at that moment. But he or she can help make a decision, support an action plan (e.g., planning the next visit to the pharmacy), and refer the client to a relevant specialist. The pharmacy project is a new and promising area which should be expanded further. It’s not every day or every hour that a client can find a social worker, while pharmacies work from 8 a.m. to 8 p.m., even on Saturdays and some on Sundays. Clients can always drop in and in addition to a syringe and other materials can be provided with professional counselling from a pharmacist.” (Svitlana Khalaim, project manager, CF “Gromadske Zdorovia”).

“Now my attitude towards these people [project clients] has slightly changed. Yes, they’ve made their choice in life, and it was a mistake, but they’ve been affected by it. And it’s good that we can help them at least in something. If we’re working here, we should do something.” (Natalia, an employee of a participating pharmacy).

specialists. During the year the professional weekly *Apteka* published a number of relevant articles, in particular, in issue № 31 (652) of 11.8.2008 under the title 'Pharmacia Company – Leadership in the Implementation of Social Projects' and in № 36 (657) of 15.9.2008 'Syringe Exchange on the Basis of Pharmacies as a Component of Harm Reduction Programmes in Ukraine'.

Representatives of the Alliance-Ukraine made presentations on the Ukrainian experience of introducing pharmacy interventions at national and international conferences. On 3–5 May 2008 in Moscow, at the Second Conference on HIV/AIDS in Eastern Europe and Central Asia, they made a poster presentation 'Pharmacy Prevention Interventions to Reduce the Risk of HIV Infection among Injecting Drug Users. Kiev Experience'. On 3–5 August 2008, at the XVII International AIDS Conference in Mexico, 'Involvement of Pharmacies in the HIV/AIDS Epidemic Response in Ukraine' poster presentation was made

#### 4.1.6. Training on Outreach Work among IDU

In 2008, in order to build the capacity of Ukrainian non-governmental organizations working with injecting drug users and increase the professional skills of project outreach workers, the Alliance-Ukraine formed a national team of trainers on outreach work among IDU. All eight trainers were selected from among the employees of Ukrainian AIDS-service organizations who have a long record of implementation of prevention programmes among IDU and experience in conducting training. In March 2008 a week-long training was provided to the potential trainers and a uniform training module was developed on the basis of its results. Four regional training workshops were held in July–August 2008, and this work will be continued in 2009. This approach – conducting training workshops by NGO specialists themselves – helps to bring the education as close to real-life working conditions as possible, and to avoid misunderstandings between trainer and training participants. This activity was appreciated by outreach workers from different projects.

#### 4.1.7. Substitution Maintenance Therapy (SMT)

In 2008 the Alliance-Ukraine supported intensive scale-up of substitution maintenance therapy in Ukraine. By the end of the second quarter of 2008 the number of patients receiving SMT with buprenorphine grew from 547 (data for 28 December 2007) to 827 people (data for 30 June 2008). During this period the number of health care facilities providing therapy with buprenorphine increased from 11 to 28. By the end of 2008 this type of therapy was provided to 864 patients of health care facilities in 24 regions of Ukraine.

The most essential expansion of the range of HIV/AIDS related services in Ukraine in recent years began at the end of May 2008, when substitution maintenance therapy with the use of methadone hydrochloride became available. During the second six months of the year the number of health care facilities providing SMT with methadone, as well as the number of patients receiving this treatment, grew rapidly. By 1 January 2009 methadone therapy was being provided to 1338 opioid dependant patients at 38 health care facilities in 11 regions of Ukraine.

In total at the end of 2008 the Alliance-Ukraine supported the provision of substitution maintenance therapy to 2202 patients on the basis of 56 health care facilities in 24 regions of Ukraine. Almost half of all SMT patients were HIV-positive (1032 people).

A significant scale-up of SMT within the programme "Overcoming the HIV/AIDS Epidemic in Ukraine" funded within the Global Fund Round 1 grant became possible thanks to the active advocacy policy of the Alliance in cooperation with the MoH of Ukraine and stakeholders – charity foundations and donor organizations, including the William J. Clinton Foundation, the All-Ukrainian Network of People Living with HIV, the Ukrainian Institute on Public Health Policy (UIPHP) and other partners.

The Alliance-Ukraine places significant emphasis on the provision of adequate support to substitution maintenance projects. During 2008 the Alliance supported projects for medical and psychosocial follow-up to SMT patients, ensured funding and supervision of organizational and methodological



follow-up to these projects, and supported training for physicians, nurses, social workers and psychologists. Within the framework of cooperation between the Alliance and UIPHP, 328 members of SMT project multi-disciplinary teams acquired necessary knowledge and improved their professional skills in this area. The Alliance allocated significant effort and funds to building the technical capacity of health care facilities for the implementation of substitution maintenance therapy. In 2008 the Alliance provided support to 40 such facilities to obtain licenses and equip premises for the planned provision of SMT.

Also in 2008 the Alliance initiated cooperation with the Ukrainian Medical and Monitoring Centre on Alcohol and Drugs (UMMCAD) at the MoH of Ukraine. Within this joint project the monitoring of SMT implementation (patient registration, balance of SMT medicines, registry of facilities that implement SMT), as well as the functions of institutional support for the expansion of SMT in Ukraine, is planned to be transferred to the control of the Ministry of Health. Development of a national register of SMT patients was initiated in cooperation with UMMCAD and UIPHP.

In 2009 the Alliance-Ukraine is planning to support further scale-up of SMT in Ukraine and will focus its efforts on increasing the number of SMT patients to 4703 people at 67 health care facilities.

#### Advocacy of Substitution Maintenance Therapy

On 25 July 2008 the Minister of Health of Ukraine signed order № 407, prepared by Alliance-Ukraine experts in cooperation with other stakeholders and experts, which stipulated the expansion of SMT programmes to practically all regions of Ukraine with a total number of up to 6000 patients.

On 10 November 2008 the MoH of Ukraine approved the guidelines *Substitution Maintenance Therapy for the Treatment of Patients with Opioid Addiction Syndrome* developed by UIPHP within the programme "Overcoming the HIV/AIDS Epidemic in Ukraine" supported by the Alliance-Ukraine. Approval of this document will unquestionably contribute to improving the efficiency of current and future SMT programmes in Ukraine.

On 16 October 2008 a multi-party statement on partnership for the expansion of SMT services for injecting drug users between the Alliance-Ukraine, Ministry of Health, Kyiv City AIDS Centre, a representative of the Global Fund and a coordinator of the US President's Emergency Plan for AIDS Relief (PEPFAR) was signed in Kyiv.

This document should contribute to further scale-up of substitution maintenance therapy for HIV-positive drug users. To date, Ukraine is the only post-Soviet country where the United States Agency for International Development is helping develop SMT services based on methadone.

#### 4.1.8. Behavioural Survey

In 2008 the Monitoring and Evaluation Team of the Alliance-Ukraine carried out the survey "**Behaviour monitoring of injecting drug users as a component of second generation surveillance**" in 16 oblasts of Ukraine.

For the first time this survey also covered cities where behavioural monitoring of IDU had not been previously performed: Khmelnytsky, Kirovohrad and Lviv. This was a linked survey – interviews were conducted together with HIV testing of the respondents' blood samples. The survey sample was made up of 4000 IDU. Respondent Driven Sampling (RDS) methodology was used. This methodology makes it possible to involve categories of respondents which are less likely to be reached by health care facilities and non-governmental organizations. The main survey results indicate that the levels of safe behaviour during the last two years remain stable: 54% of those questioned reported using condoms during their last sexual contact, and 84% of respondents used sterile equipment last time they injected drugs. The median value of HIV-infection rates for 16 oblasts constitutes 26.7%. The level of infection is preconditioned by the following factors: drug use history; shared use of injecting equipment and utensils for the preparation of drugs; practices of providing and receiving sexual services for payment; relations with two and more sexual partners, and failure to use condoms during the last sexual intercourse.





Progress in the introduction of SMT programmes in Ukraine, particularly with the use of methadone in 2008 attracted the attention of the international community. Ukraine is the leader in Eastern Europe for rates of expansion of SMT programmes. Our experience, including that of advocating for this method, is very useful for other post-Soviet countries in which SMT is currently unavailable, in particular for the Russian Federation with its tragic leadership in the number of HIV-positive people on the continent.

On 17–18 October 2008 the scientific and practical summit “Scaling-up Access to Opioid Substitution Therapy for Injecting Drug Users in the Countries of Eastern Europe and Central Asia” was held in Yalta, chaired by Michele Kazatchkine, Global Fund

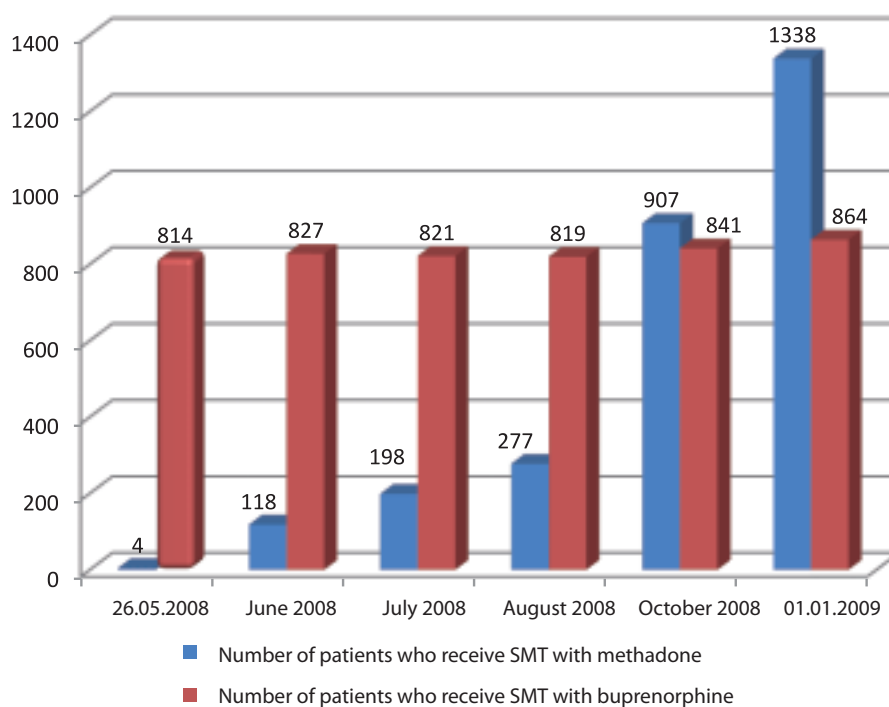
executive director.

Among other experts, the manager of Alliance-Ukraine policy and advocacy programmes was invited to the summit, and elaborated on the obstacles in this area that exist in Ukraine as well as sharing recommendations on effective methods to overcome them.

A range of conclusions and useful recommendations were developed as part of the summit results, which, according to experts, may have a positive impact on the process of further expansion of access to SMT for drug users in the region.

In particular, these recommendations will be used as a basis for the agenda of the next international conference on HIV/AIDS to be held in Vienna in 2010.

Progress in Introduction of Methadone Substitution Maintenance Programme. 2008.





### **Summer School: “Advocacy in the Area of HIV/AIDS: Overcoming Obstacles Together!”**

In July–August 2008 the Alliance-Ukraine in partnership with the International Harm Reduction Programme of the Open Society Institute conducted their third two-week Summer School on Advocacy in the Area of HIV/AIDS Response, within which 20 representatives of AIDS-service organizations received necessary knowledge and skills in the area of introduction and expansion of substitution maintenance therapy and protection of the human rights of drug dependant programme participants.

On the basis of the training, participants developed 17 outlines of advocacy projects, two of which were later supported by the

Alliance-Ukraine in the form of separate grant projects:

- ❖ CO “Club Maybutne” (Mariupol). Advocacy for the introduction of an SMT programme on the basis of Mariupol TB Clinic.
- ❖ CA “Dialogue” (Smila). Advocacy for the introduction of an SMT programme on the basis of Cherkasy Oblast Mental Hospital №1.

Another two innovative projects aimed at SMT advocacy developed by Summer School participants from Kyiv and Sumy were later supported by the International Renaissance Foundation.

### A Personal Success Story

A while ago, or to be exact, when I was 18, I took a liking to drugs. Why did it happen? I would love to get an answer to that question. But probably it'll never happen.

Looking back, I realise I've made tons of mistakes and done stupid things, and now I have to live with their consequences. There were moments which are shameful even to recall, let alone talk about. It feels like I'm covered with those life's bumps and bruises, but I keep on bumping – I guess, it's just a habit.

While I was in narcotic dreams (that's what I call my drug-using years), everything was very simple, like for those old Soviet movie 'gentlemen' – you steal, you drink, you go back to prison. And that was my fate too. In 1994 it was a serious charge and I failed to 'come off clean'. However, I got off easy – just three years imprisonment.

Back then I had enough time to think about how to live the rest of my life. But those dreams had nothing in common with my further life. I didn't learn my lesson and started to inject right after I was released.

It's a simple calculation: three years before and four years after – seven years of my life were wasted in fighting my own health. I got mixed up in different ventures, I trampled on my principles for the sake of a single dose until one beautiful day I found myself in a hospital bed where I stayed for five years. The price for my reckless life includes pleuritis, hepatitis and AIDS. I gave up on my life.

One day, when my despair and rage were almost unbearable, I decided to put it all on paper – that can survive anything! And then, by chance, the newspaper *Ne Uletay!* (Don't Fly Away!) caught my eye. This paper featured the candid stories of strangers who had the same painful problems.

I can't say that only marginal people surrounded me – not at all! But right now I understand that this is my place, my environment, where I can help someone by being myself.

When I analyze the events of the recent past, I conclude that probably all of them were worthwhile for me to finally find myself and understand that life is too short to waste its priceless moments.

Luckily, I've not only learned my lesson but I've been awarded an excellent job, team and family. I'm happy to be able to help other people, providing them with my own vivid example.

*Social worker of CF "Way Home"*

*Printed in the newspaper Ne Uletay! No. 41, 2008. This publication was prepared by the Odesa Charitable Foundation "Way Home" within the project "Desire to Live 2009", supported by ICF "International HIV/AIDS Alliance in Ukraine" (within the Global Fund programme).*





## 4.2. HIV Prevention among Female Sex Workers (FSW)

### 4.2.1. Comprehensive Social and Prevention Measures

By the end of December 2008, 33,449 people had received a complex of social and prevention services for female sex workers within the framework of prevention projects supported by the Alliance-Ukraine. Grants to implement projects in the area "Prevention of HIV infection among FSW and establishment of community centres for FSW" were given to 39 non-governmental organizations.

A comprehensive package of HIV prevention among FSW offered by organizations includes the following services to meet their specific needs and reach project targets to prevent the spread of HIV/AIDS:

- ❖ voluntary counselling and testing using rapid tests;
- ❖ provision of condoms, lubricants, wipes for intimate hygiene and other consumables, as well as syringes for FSW who inject drugs;
- ❖ diagnostics and referrals for STI treatment;
- ❖ dissemination of IEC materials;
- ❖ professional counselling (psychologist, lawyer, gynaecologist, STI specialist, etc.);
- ❖ referrals to health care facilities and other targeted projects if necessary;
- ❖ training on safe behaviour development.

The projects also organize prevention measures among the clients and sexual partners of FSW, including distribution of condoms, syringes, IEC materials, and HIV and STI counselling and testing.

Community centres for FSW are an important component to maintain the comprehensive nature of prevention services for clients, as well as to keep them in projects, thus leading to greater chances for positive behavioural change. In addition to prevention, such centres offer a wide range of services including education and employment assistance, child care, self-help groups, training on different topics, consumer services, etc.

### 4.2.2. Study on the Use of Female Condoms (Femidoms)

Within the framework of the programme "Support for HIV and AIDS Prevention, Treatment and Care for Most Vulnerable Populations in Ukraine (2007–2012)", funded by the Global Fund to Fight AIDS, Tuberculosis and Malaria within the Round 6 grant, distribution of female condoms (femidoms) is planned as an additional method of barrier contraception in prevention work with FSW. In order to ensure an evidence-based and well-balanced start of large-scale use of this HIV prevention methodology for FSW, which is new for Ukraine, ICF "International HIV/AIDS Alliance in Ukraine" analyzed international experience of female condom use. This analysis included the experience of various countries in Africa, Asia, America and Europe. In order to study the readiness of FSW clients of prevention projects for introduction of this barrier contraception method, a series of special focus groups were conducted in Odesa and Makiyivka in June 2008. The results of analysis of international experience and focus groups were discussed at working meetings of social workers of HIV prevention projects for FSW and other stakeholders. During discussions, participants identified the key risks of femidom use in HIV/STI prevention, discussed the possibilities of coverage assessment and the effectiveness of the distribution and use of femidoms as a means of preventing HIV/STI among FSW, and discussed the format of a pilot project for the dissemination of female condoms among FSW. Launch pilot projects are expected in the first half of 2009.

### 4.2.3. Behavioural Survey

A survey "**Behaviour monitoring of commercial sex workers as a component of second generation surveillance**" was conducted in 16 oblast centres of Ukraine in 2008. Monitoring among female sex workers (FSW) in the cities of Khmelnytsky, Kirovohrad and Lviv was conducted for the first time. This was a linked survey; interviews were conducted together with HIV and syphilis testing of respondents' blood samples using rapid tests. This model made it possible to identify links between behavioural patterns and likelihood of infection. In addition, such a study is the only source of



information on HIV and syphilis prevalence among FSW, since there are no official statistics regarding this group. The survey's sample was made up of 1619 FSW. Respondent Driven Sampling (RDS) and Time-Location Sampling (TLS) methodologies were used. The use of two methodologies made it possible to ensure a representative sample considering the particular characteristics of the cities under study. The survey's main results indicate that the levels of safe behaviour during the last two years remain stable: 88% of those questioned reported using condoms during their last sexual contact, and

62% of questioned women have been tested for HIV and know their results (a 17% increase compared to 2007). A total of 20% of FSW inject drugs. HIV testing results showed that the median value of HIV-infection rates among FSW in 16 oblasts constitutes 17%. The highest levels of HIV prevalence were found in Kyiv, Poltava and Mykolayiv – 42%, 38% and 24% respectively. These noteworthy figures are explained by the high representation of injecting FSW in the sample.

## Success Story

### SOLIDARITY means I AM NOT ALONE

I was alone when I started to inject – I had a lot of problems, and my mind escaped into depression while I myself escaped using drugs. I was also alone when I went on the highway to earn some money, and I was similarly alone when I tried to stop. Of course I didn't succeed. I was like this little twig, broken by the first injection. It's much easier to break than to build.

It took many years – a whole life – to meet people who could help me. That was just a miracle which can come unnoticed if you're not expecting it; it was a long-awaited, genuine miracle. On the other hand it was the totally routine business of people who've dedicated their time and lives to saving people like me. And like everything big and important in life, my salvation started with little things.

How many times did I avoid HIV and many other diseases thanks to people who brought and gave me free condoms? And new syringes? And how much more serious did I become about my health after HIV testing, when I learned about my HIV-negative status and had a two-hour candid conversation with a consultant? How much sanity did I save after they provided me with a free pregnancy test? How many times did I come to these people just to see them smiling at me, greeting me warmly, offering me tea and biscuits, asking about my affairs and family? Going there was like coming home, because at home I had nothing like it. Actually, I would have almost lost my home if it weren't for the foundation's lawyer who managed to change the situation. It's impossible to calculate, evaluate and assess all that help in material units. I think they have only one unit of measurement – it's called human life.

Such units make up something called 'solidarity'. People, many of whom have never lived like we have, are so close to us in their souls that they live with our problems and work hard to solve them. I would never have known about substitution therapy if it weren't for the foundation's consultant who took me by the hand and brought me to the place. I wouldn't have been able to change my life if I'd been alone. People in solidarity with me have made something that will always be a miracle to me – they presented me with a new life. To be a twig in a big, strong bunch means withstanding any problems and difficulties; it means using the strength of all those people who've managed to do something that I failed to do for all those years, because right now I AM NOT ALONE.

*Charitable Christian Foundation "Solidarity", supported by the Alliance-Ukraine (within the Global Fund programme) currently implements the project "Ensuring an Effective Response to the Spread of the HIV/AIDS Epidemic and STI among Most-at-risk Populations in Western Ukraine", including activities in the area "Prevention of HIV among people involved in sex business".*

#### 4.2.4. Training on Outreach Work Among FSW

In 2008 the Alliance-Ukraine focused extensively on the advanced professional training of outreach workers involved in HIV/AIDS prevention projects for FSW. With this end in view, the decision was made to create a national team of outreach trainers for projects with commercial sex workers. The team consists of expert practitioners representing Ukrainian AIDS-service organizations, who have sufficient experience of work with the target group, in-depth knowledge of the theory and practice of Ukrainian NGO operations, and who have participated in specialized training for trainers. The training “Safe sexual behaviour and outreach work among sex workers” was held on 3–7 June 2008 with an international team of trainers: Vira Dite and Olga Yun from “AIDS Foundation East-West. Central Asia”, and Andriy Nechyporuk (“Lion Society”, Lviv). The goal of the training and subsequent working meetings was to prepare a team of national trainers on outreach work among FSW to conduct further trainings in the regions, and to develop and adapt a training module. As a result of the joint work of the external trainers, the national team and specialists from the Alliance-Ukraine, a training module on outreach work among sex workers was developed, tested and prepared for publication. It will be used at local and regional professional trainings for outreach workers in 2009.

#### 4.2.5. Overcoming Stigma and Discrimination of FSW

During the reporting period the Alliance-Ukraine devoted significant attention to advocacy of the rights of sex workers. The goals of the training on “**Overcoming stigma and discrimination of FSW**” among medical personnel, conducted on 21–23 February 2008, were:

- ❖ to decrease the level of stigma and discrimination of FSW in health care institutions when requesting medical assistance;
- ❖ to create tolerant and friendly attitudes among medical personnel, as well as ensure favourable conditions for delivering high-quality medical assistance to FSW.

During the training, 24 participants from all regions of Ukraine familiarized themselves with the preconditions of commercial sex, experienced feelings of

stigma and discussed the attitudes of various social groups towards FSW. The participants identified some key challenges of communication between the target group and medical professionals. They also learned why it is important for medical personnel to be involved in overcoming stigma and discrimination, and discussed possible solutions to the problem. The participants discussed the differences between the concepts of stigma and discrimination, as well as the notion of tolerance; they developed and discussed ‘a portrait of a FSW’ and the hierarchical structure of sex work in Ukraine. A practical exercise to create a tolerant attitude towards FSW was conducted within the training.

Staff members of the Alliance-Ukraine presented the comprehensive package of prevention work among FSW, and in particular the diagnosis and treatment of sexually transmitted infections component within projects funded by the Global Fund grant. Participants discussed relevant legislation and the main principles of adherence to the professional ethics of media coverage of this issue. They also learned about the project “Mobilizing the commercial sex worker community in Ukraine”.

On 17 December, **International Day to End Violence against Sex Workers**, activists of the sex worker movement, who are directly linked to sex work, received their first-ever opportunity to publicize their position regarding respect for the human dignity of female sex workers, the unacceptability of discrimination, and prevention of violence against one of the most marginalized population groups. This event drew the attention of television and newspaper journalists. *“The state should abandon its ‘hide, wait and see’ approach and turn its face to one of the most marginalized categories of our society. We do not request any special rights for female sex workers. We call for observance of their constitutional rights and freedoms, as well as an end to violence,”* said Iryna Mishyna, manager of mobilization of sex workers community project, at a press-conference organized in UNIAN press bureau by the Alliance-Ukraine and the All-Ukrainian Harm Reduction Association. This event received significant publicity thanks to reporting from five national TV channels and over 20 articles in the print and Internet media.





#### 4.2.6. Mobilization of the FSW Community as a Way to Improve the Effectiveness of Prevention Measures

On 5 July 2008, the conference “Mobilization of People Involved in Sex Business” was held within a project of the All-Ukrainian Harm Reduction Association supported by ICF “International HIV/AIDS Alliance in Ukraine”. The conference participants – leaders of initiative groups – decided on establishment and legal registration of the All-Ukrainian Organization of Sex Workers “Legalife”.

The establishment of an all-Ukrainian organization to protect the rights and represent the interests of sex workers is a unique event for Ukraine. The establishment of associations, leagues and unions improves development of sex workers’ adherence to prevention programmes. Such associations foster community mobilization in solving internal problems, develop leadership skills in lobbying their rights and interests and contribute to the formation of tolerant attitudes in society towards representatives of this group.

The Charitable Organization “All-Ukrainian League “Legalife”” selected five key areas of work:

- ❖ mobilization of the sex worker community in Ukraine, including establishment and coordination of the work of local branches;
- ❖ scaling up access of sex workers to social and medical services and re-socialization;
- ❖ prevention of the engagement of minors in sex work;
- ❖ prevention of human trafficking;
- ❖ introduction of innovative methods of HIV/AIDS/STI/TB prevention and prevention of high risk behaviours among sex workers in Ukraine.

#### 4.2.7. Mobile Ambulance Clinics

In November 2008 14 non-governmental AIDS-service organizations, including Cherkasy Charitable Organization of PLWH “From Heart to Heart”, Club “Eney” (Kyiv), Charitable Foundation “Rehabilitation Centre for Drug Dependent People “Virtus”” (Dnipropetrovsk), Donetsk Oblast Charitable Foundation “Oberih”, CF “Public Health” (Kryviy Rih), NGO “Union “AMIKUS”” (Donetsk oblast), Luhansk Charitable Foundation “Step to the Future”, Vinnytsya Public Congress “Sustainability”, Kharkiv City Charitable Foundation “Blago”, Charitable Foundation

“SALUS” (Lviv), Youth Centre of Women Initiatives (Sevastopol), Mykolayiv Local Charitable Foundation “Unitus”, Charitable Foundation “Hope and Salvation” (Simferopol) and Kherson Oblast Charitable Foundation “Mongoose” received mobile ambulance clinics to perform testing and provide medical and counselling assistance to the most vulnerable populations: female sex workers and injecting drug users.

JSC Trading House “AUTO” re-equipped 14 Bohdan A-069 buses with an additional three folding seats and a drop table, portable refrigerator, built-in closets and shelves for medications. Additional equipment also included lighting and an extra heater for the patient compartment, electric sockets, etc. Necessary medical equipment included a gynaecological chair and washstand with integrated portable manipulation table. Individual medical observation materials and consumables were also procured.

In order to procure and re-equip the mobile clinics, the Alliance-Ukraine committed UAH 3,428,866 (UAH 244,919 per ambulance). To ensure the functioning of these mobile ambulances, non-governmental organizations received grants totalling UAH 2,385,530. Basic services provided by the mobile ambulances include:

- ❖ syphilis screening with rapid tests;
- ❖ gonorrhoea screening with rapid tests;
- ❖ screening for chlamydiosis with rapid tests;
- ❖ counselling on sexually transmitted infections (STI);
- ❖ STI examination on a gynaecological chair using disposable instruments and consumables;
- ❖ targeted referrals to health care facilities for further diagnostics and medical treatment;
- ❖ prevention of STI and HIV infection;
- ❖ voluntary counselling and testing for HIV;
- ❖ psychological assistance (involvement of a psychologist experienced in work with vulnerable populations).

Beginning in December 2008, the mobile ambulances started work in projects and immediately received many positive responses from clients and staff:

*"Starting the work of the mobile clinic was an important victory for our project. It raised our organization's credibility both with the local authorities and population, and among our clients. Clients highly appreciate the external appearance of the clinic; they like its recognisability from a distance. A well-coordinated team of medical workers ensures quick and quality service provision to clients."*

Donetsk Oblast Charitable Foundation "Oberih".

*"First of all I'd like to point out the good working conditions in the ambulance. Such details like warmth and comfort are very important, especially during night tours, after the working day. Second, it's nice to see how the girls run over when they see our white bus and hear them calling, asking us not to leave and to wait for them. In other words, our bus is AWAITED. I'd also like to mention the attractiveness of rapid tests. Quite often doubts about whether or not to have a test disappear when the girls realise that the results are available in just 15–20 minutes."*

Kharkiv City Charitable Foundation "Blago".

### Success Story

#### **The breakthrough in this harm reduction project is called... FROSYA!!!**

Some time ago I saw on TV a mobile ambulance clinic in Holland – how it was travelling around Amsterdam and providing services to drug users, including provision of methadone and syringe exchange. From that moment on I dreamt about having the same bus for our drug users and women involved in commercial sex.

Strangely enough, I, a former drug user, am now working at CF "Virtus" as social worker. One day we learned that ICF "International HIV/AIDS Alliance in Ukraine" wanted to procure Bohdan buses to provide services to drug users. We wrote a project proposal and waited a long time until the competition was over. Yes! Our proposal was supported!

And finally the day came! We were in Cherkasy; we came in a great hurry to pick up our ambulance! As soon as we saw the bus we had a name for it – Frosya (when you look at it, no other nickname comes even close!). From that day on the name of our mobile ambulance clinic was Frosyna Bohdanivna, or simply Frosya. We quickly formalized all the necessary documents and rushed home. Our souls were overflowing with happiness! We wanted to share it with our colleagues, our clients – even with the whole world!!!

Sunday. Everybody's here, everyone is waiting for Frosya. Before today we all just looked at the bus, but today it begins its career. Today is the first working day. We get inside and set off. And here's another wave of excitement. What a beauty! Now we can travel to so many places and give syringes and condoms to so many drug users! We will be able to test so many people! This is why our ambulance is called 'mobile'!

The event was a major success – all the TV channels filmed us. The first clients received information materials and underwent rapid testing. We heard many outside responses. Frosya's first working day was a decent one – 13 people took HIV antibody tests; many more clients picked up information materials.

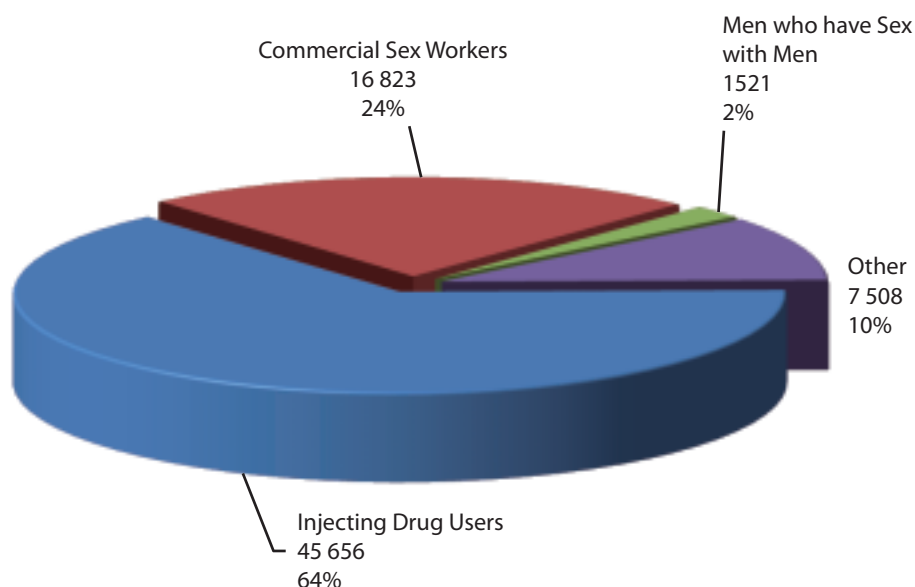
Since that day our mobile clinic has been travelling around the city from Monday to Friday. We've increased the number of syringe exchange sites and expanded the range of our services (in addition to those mentioned above, we transport clients to the local STI clinic).

During December 2008 the mobile ambulance team provided services to more than 600 individuals, both drug users and their immediate environment. Twenty-two people were transported to the STI clinic; as of today (27 January 2009) 17 of them have received treatment. Close to 200 individuals have had HIV antibody tests and syphilis tests using rapid test methodology; more than 120 people have been tested for gonorrhoea and chlamydiosis. Today many people in different districts of our city are waiting for us and greet us with sincere smiles ...

*Text: Olena Polukhinskykh and Svitlana Babkina. Dnipropetrovsk Charitable Foundation "Virtus" supported by the Alliance-Ukraine (within the Global Fund programme) currently implements the project "Integration of the Efforts of the IDU, FSW and PLWH Community to Overcome the HIV/AIDS Epidemic and Its Consequences in the City of Dnipropetrovsk", including the activity area "Mobile Gynaecological Clinic".*

#### 4.2.8. Diagnosis and Treatment of Sexually Transmitted Infections (STI)

##### STI Tests Conducted



In 2008 the Alliance-Ukraine undertook the substantial work of scaling up access of vulnerable populations to STI diagnostics and treatment. Upon the Alliance's initiative and with the support of the MoH, the "Plan of Measures to Ensure Access of Representatives of Vulnerable Populations to Diagnostics and Treatment of Sexually Transmitted Infections to Prevent HIV-infection/AIDS" was developed and approved by Order of the Ukrainian MoH No. 355 as of 4 July 2008. The MoH working group on scaling up access of vulnerable populations to STI diagnostics and treatment continued its work. This issue also constituted the main topic of two all-Ukrainian meetings of central oblast STI clinics and chief doctors from AIDS centres and STI dispensaries, which were initiated by the Alliance and supported by the MoH. In order to disseminate information on the organization of project activities, in April–July 2008 the Alliance-Ukraine organized four regional trainings on STI diagnostics and treatment among vulnerable groups for 55 doctors and NGO representatives.

Key partners of the Alliance in this field include leading national and international organizations with STI diagnostics and treatment expertise, government facilities and non-governmental organizations at the national and local levels. At the national level the Alliance has concluded grant agreements with the Ukrainian AIDS Centre (organization of STI treatment among the representatives of vulnerable populations on the basis of specialized health care facilities in cooperation with non-governmental organizations; survey and analysis of needs regarding STI medications, development of orders on distribution/redistribution of drugs, etc.) and the Institute of Dermatology and Venereology (medical follow-up of STI treatment among representatives of vulnerable populations; development and approval of regulations on STI treatment among representatives of vulnerable populations; setting up a hot telephone line for STI specialists on STI diagnostics and treatment, etc.).





At the local level provision of STI diagnosis and treatment services is ensured through cooperation between treatment and prevention facilities and non-governmental organizations responsible for provision STI screening diagnostics among vulnerable populations.

In order to conduct screening tests, the Alliance procured and delivered to the regions 97,800 rapid test kits to diagnose syphilis, 15,000 rapid test kits to perform gonorrhoea screening, and 15,000 rapid test kits for chlamidiosis screening.

As of 1 January 2009, cases of testign of 72,103 representatives of vulnerable populations had been performed with the use of rapid tests. Of the results, 2745 were positive, and 1684 representatives of vulnerable groups sought assistance from STI clinics to receive further diagnosis and treatment.

The Alliance-Ukraine also procured drugs for 26,000 STI treatment courses among representatives of populations vulnerable to HIV, and delivered them to the regions on the basis of a distribution scheme approved by Order of the MoH of Ukraine No. 325 as of 18 June 2008.

As of 1 January 2009, representatives of vulnerable populations had received 3031 treatment courses.

With support from the Alliance-Ukraine, specialists of the Institute of Dermatology and Venereology within the Academy of Medical Sciences of Ukraine developed draft *Methodological Recommendations on STI Treatment among Populations Vulnerable to HIV* (at the end of 2008 the draft was awaiting approval at the MoH of Ukraine), and organized a scientific and practical conference on implementation of these recommendations. In addition, in 2008 with Alliance support, the All-Ukrainian Coordination Centre on STI Screening, Testing and Treatment among Representatives of Vulnerable Populations was established within the Institute. The Centre will start work in 2009.

Ukrainian AIDS Centre experts have developed a draft *Methodological Guidelines on Models of Provision of STI Diagnostics and Treatment Services for Representatives of Vulnerable Populations*. This draft document was discussed at two meetings of the working group on scaling up access of vulnerable populations to STI diagnostics and treatment. The manual will be formally approved in 2009.

***VCT with the use of rapid tests as a mechanism of involvement and access of representatives of vulnerable groups to comprehensive HIV/STI prevention and treatment services***

The field stage of the operational study “VCT with the use of rapid tests as a mechanism of involvement and access of representatives of vulnerable groups to comprehensive HIV/STI prevention and treatment services” was conducted in October–December 2008.

The goal of the study was to monitor and evaluate the effectiveness of VCT services with the use of rapid tests, and develop recommendations on improvement of their quality for various target groups.

The study was conducted in eight oblasts of Ukraine with high rates of VCT service coverage. Overall, 400 respondents were questioned, including 309 IDU and 91 FSW. In addition, focus group discussions were held with NGO social and outreach workers responsible for prevention and involvement of clients in VCT services with the use of rapid tests. Flexible expert interviews were used to question staff members of AIDS centres and doctors who provide pre- and post-test counselling to the clients of AIDS-service NGOs.

Key research findings are as follows:

- ❖ the absolute majority of respondents from target populations are generally satisfied with VCT services with the use of rapid tests, as well as with its separate components such as the content of counselling, conditions of VCT procedures and attitudes of personnel;
- ❖ it is impossible to develop a universal algorithm to involve clients in VCT, as approaches towards different categories of clients and the effective arguments and incentives for these categories differ significantly. Reasons for client refusal to have rapid testing usually include fear of a positive result, indifference regarding personal health, and, for FSW, seeking an ‘alibi’ if clients accuse them of transmitting HIV;
- ❖ at the same time, it is quite difficult to motivate clients with positive rapid test results to seek assistance at relevant health care facilities. According to the survey results, only 42% of respondents recommended to do so have turned to AIDS centres.

### 4.3. HIV Prevention among Men Who Have Sex with Men (MSM)

During 2008 the International HIV/AIDS Alliance in Ukraine supported prevention interventions among MSM carried out by 15 non-governmental organizations in 12 oblasts of Ukraine (Dnipropetrovsk, Donetsk, Zaporizhya, Ivano-Frankivsk, Kirovohrad, Lviv, Mykolayiv, Odesa, Kharkiv, Kherson, Cherkasy and Chernivtsi), the cities of Kyiv and Sevastopol and the Autonomous Republic of Crimea.

The main project activities included:

- ❖ group and individual counselling on safe behaviour, HIV/AIDS and STI;
- ❖ distribution of condoms and lubricants along outreach work routes;
- ❖ training aimed at the development of safe behaviours, including motivation towards the use of condoms and lubricants;
- ❖ voluntary counselling and rapid testing for HIV; STI testing and treatment;
- ❖ dissemination of IEC materials;
- ❖ support for self-help groups;
- ❖ individual and group psychological counselling;
- ❖ peer counselling;
- ❖ referrals to services provided by partner organizations;
- ❖ dissemination of information in the community about available services.

As of 1 January 2009, 19,749 MSM were reached by prevention services offered by projects supported by the Alliance-Ukraine. In 2008 1446 MSM had rapid testing for HIV and 1521 were tested for STI.

During 2008 the International HIV/AIDS Alliance in Ukraine organized a series of events to improve the quality of project services, reduce stigma and discrimination of MSM and mobilize the lesbian,

gay, bisexual and transgender (LGBT) community. For example, during the year a number of trainings were organized, including one training for trainers on "Training and Support of Outreach Teams for MSM", three regional trainings on outreach work, and one training for psychologists and social workers "Specific Features of the Provision of Social and Psychological Support for MSM within HIV Prevention Projects". A total of 76 people participated in these trainings.

In June 2008 three members of regional NGOs working in HIV prevention among MSM in Ukraine and one Alliance-Ukraine representative participated in a study tour to Germany. During the tour the participants visited nine organizations and observed prevention work among MSM and male sex workers, including the activities of a drop-in centre, MSM community centre and caf for HIV-positive MSM, a project dealing with prevention of violence against men, and a counselling centre. The study tour inspired participants to introduce innovations in the area of HIV prevention among MSM in Ukraine, in particular, to establish an MSM community centre in Kyiv.

Other important events in the LGBT community in 2008 included the first national conference "Mobilization and Advocacy of the Interests of the LGBT Community" and the working meeting "Strategic planning of HIV/STI prevention among MSM and LGBT advocacy".



### First National Conference “Mobilization and Advocacy of the Interests of the LGBT Community”



On 16–18 April, the first national conference “Mobilization and Advocacy of the Interests of the LGBT Community” took place in Kyiv. With the goal of building the capacity of initiative groups in the area of advocacy and implementation of relevant services. In the course of the conference participants shared their experience of HIV/STI prevention, as well as methods and forms of work with representatives of this target group; they also raised issues on mobilization of the LGBT community, coordination of activities and partnership support and community development strategies, and discussed the concept of a Federation of LGBT Organizations of Ukraine. The conference brought together 83 representatives of NGOs and the community, as well as governmental bodies from 17 regions of Ukraine. It culminated in signing the “Joint Statement on the Need to Establish a Federation of LGBT Organizations of Ukraine”.

### MSM Community Centres

An important step towards improving HIV prevention among MSM was taken in 2008 with the launch of two community centres in Kyiv and Odesa.

The main aim of community centres is to reduce the

further spread of HIV/AIDS among MSM through development of a healthy community able to independently resist the infection and resolve its own issues. A secondary objective envisages the collection and accumulation of data on community centre work organization and its further use by other projects. At community centres clients can receive the following services:

- ❖ social (self-help groups, motivational counselling on safe behaviour, organization of leisure time, etc.);
- ❖ medical (referrals to health care facilities for HIV/STI diagnosis and treatment, HIV/STI rapid testing, group meetings, information sessions with doctors);
- ❖ consumer (tea, coffee, hot meals, laundry);
- ❖ consultations with relevant specialists.

Despite the relatively short period of both community centres’ operations, their work can already be considered a success, garnering many positive responses from clients. The main achievement of both community centres is their ability to gain the trust of the target group, evidenced by the steady increase in visitor numbers and members of group classes.

After the MSM community centre was opened in Kyiv, weekly literary evenings were organized there with the participation of writers from *Odyn z nas (One of Us)* magazine. The magazine has been published since 2003 in partnership with the NGO “Gay Alliance”. In 2008 five issues of the magazine covered topics of safe sexual behaviour (in darkrooms in particular), life with HIV-positive status and the specifics of ARV therapy. The magazine also provides contact details of HIV and STI prevention services for MSM, as well as medical news on these issues.

## Success Stories

### **“Gay Alliance”, Kyiv, MSM Community Centre**

One of our outreach workers was approached by a young man of about 18 who asked for several lubricants. Together with these commodities our worker gave the guy a flyer inviting him to visit the community centre for gays and transgender people in Kyiv. This was how Slavyk found out about the centre. Literally the next day he attended a self-help group for the first time in his life. However, he kept silent the whole time, sitting in his overalls in the corner closest to the exit. The only thing the others got to know from him was his name. He whispered it and then blushed and looked away. He didn't attend the next meeting. However, exactly a week later, at the time of the self-help group meeting, Slavyk was at the door of the community centre. Since the start of the meeting was delayed, a social worker started chatting with him. He found out that the boy had just turned 18; he was brought up in an orphanage and didn't remember his parents.

*At 18, having left his orphanage which had no interest in him anymore, the boy got to Kyiv by hook or by crook and found himself in the bad company of boys from the cruising areas, who had no scruples about how they got money for alcohol and cigarettes. After staying with them for quite a while he realised this wasn't the life he wanted, but he couldn't get out of this situation. He slept with them in doorways, ate whatever he could find, and sometimes if he was lucky enough went to some 'do-gooder' to stay overnight. That was his story as the social worker heard it.*

*Within a month Slavyk had become a regular visitor to the centre. Every Thursday and Saturday he has psychological counselling. The centre's staff members helped him find a job as a waiter, as well as temporary housing. Today he is an active boy who can talk a lot at discussion club meetings. He always willingly helps the social workers to clean up, wash the dishes or go and buy bread. But the main thing is that now he has hopes of starting a new life, reckoning on the support of friends found at the community centre.*

### **YPM “Partner”, Odesa**

In November 2007 I met online with a social worker from the project “HIV/AIDS Prevention among MSM in Odesa”. At that time I didn't know anything about this project, who was implementing it and why. However, as I was dreaming about restoring the dismantled MSM community in Odesa I became a volunteer in the project implemented by the Youth Public Movement “Partner” supported by ICF “International HIV/AIDS Alliance in Ukraine”. For some time I helped social workers perform outreach work among MSM in the cruising areas, and helped organize hobby groups. Later on, after several trainings on HIV/AIDS prevention and outreach work, I acquired practical street counselling and became a project social worker. During this period I worked hard to support the establishment of a future community centre. Much had been done by 14 December 2008, when our “Babylon” centre opened its doors for the first time. Here we have a welcoming atmosphere and pleasant company which is growing every day; we always have various prevention and entertainment events going on. The main thing is that this centre, where I've deposited a bit of my soul, is helping overcome the HIV/AIDS epidemic among people like myself, among people from my community. I'm very committed to my goal – so come and visit us in Odesa and see it with your own eyes.

## 4.4. Harm Reduction Programmes in Penitentiary Institutions

### 4.4.1. Comprehensive Package of HIV Prevention Services among Prisoners

In 2008 ICF “International HIV/AIDS Alliance in Ukraine”, within the Global Fund’s Round 6 grant programme supported 19 projects to prevent HIV in the penitentiary system. Through these projects, HIV prevention interventions among prisoners were implemented in 51 facilities. As of the end of 2008, the overall coverage of this target group with prevention programmes reached 57,558 individuals.

As compared to the previous year, the geography of harm reduction projects in penitentiary institutions was also expanded: in addition to Lviv, Ivano-Frankivsk, Vinnytsya, Khmelnytsky, Poltava, Donetsk, Mykolayiv, Odesa, Cherkasy, Kyiv, Kherson, Zaporizhya and Dnipropetrovsk oblasts and the Autonomous Republic of Crimea, in 2008 new projects were launched in Luhansk, Kharkiv and Rivne oblasts.

The following basic services were provided within the projects:

- ❖ distribution of personal protection and hygiene materials: condoms, shaving equipment, toothbrushes and other consumables;
- ❖ publication and dissemination of information materials for prison inmates;
- ❖ organization of mass prevention and information events, including lectures and concerts on prevention topics, events dedicated to AIDS Memorial Day, World AIDS Day, etc.;
- ❖ organization of information classes, training and workshops for penitentiary institution staff;
- ❖ counselling on HIV/AIDS, STI and drug dependence; encouraging motivation to be tested for HIV/STI;
- ❖ consultation with psychologists, STI specialists and infectious diseases doctors;
- ❖ training of volunteer peer counsellors among prisoners and provision of peer counselling;
- ❖ self-help groups;
- ❖ re-equipment and installation of new wired radio outlets in pre-trial detention facilities;
- ❖ development and broadcast of radio lectures;
- ❖ provision of disinfectants to sterilize tattooing equipment;
- ❖ social follow-up of people released from penitentiary facilities.

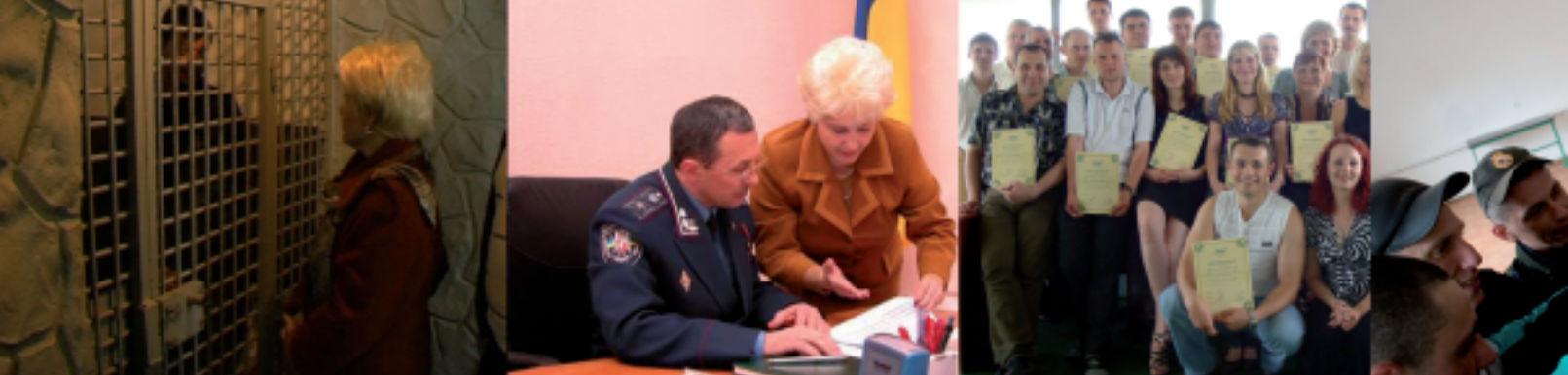
During the reporting period a number of innovative services were offered, for example, in correctional facility No.86 in Vinnytsya and correctional facility No.123 in Lityn; a large-scale campaign on syphilis testing with rapid tests was also conducted. 2008 saw a significant scale-up of VCT with rapid tests in penitentiary institutions: during the reporting period 2681 prison inmates were tested for HIV with rapid tests.

During the year active cooperation was underway with **the State Penitentiary Department of Ukraine**, which included the following activities:

- ❖ coordination and approval of HIV/AIDS prevention measures implemented within the penitentiary system in all areas;
- ❖ expert participation in commissions to select sub-recipients, including approval of calls for proposals, evaluation of project proposals and preparation of recommendations;
- ❖ expert participation in the 4th National Monitoring and Evaluation Conference and in monitoring and evaluation working group meetings;
- ❖ provision of technical assistance in implementation of a cohort epidemiological study in seven penitentiary facilities (implementer – AIDS centre);
- ❖ evaluation and approval of information and methodological materials produced by NGOs regarding work with prisoners and penitentiary system personnel;
- ❖ consultative support for NGOs working in HIV prevention among prisoners.

In addition the Alliance-Ukraine supported the participation of department representatives in the international conference “Health Protection of Women in Penitentiary Institutions” held on 13–14 November 2008 in Kyiv. The Alliance-Ukraine also supported a training course on positive prevention in work with prisoners for 28 specialists working in department facilities.





#### 4.4.2. Advocacy Projects

Within its advocacy project the non-governmental organization “Penitentiary Initiative” developed and piloted an effective mechanism of social follow-up for prisoners and people recently released from prison, the majority of whom are representatives of populations vulnerable to HIV.

Building on a needs assessment of prisoners performed after preliminary interviewing, project experts developed and distributed an instruction booklet for those awaiting release which contains guidelines on the observance of human rights in health care. The project held two trainings on the issue for the medical staff of correctional facilities and the oblast penitentiary division.

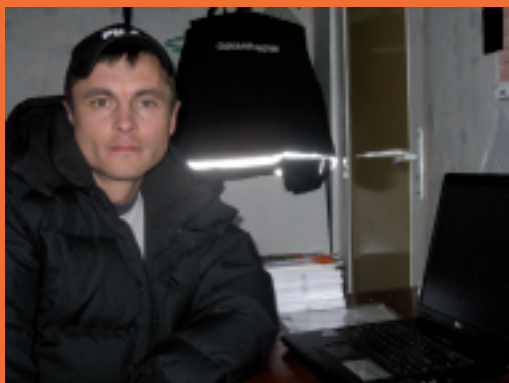
Tetiana Dobrydnyk, manager of advocacy activities, became a member of the department’s public council, directly participating in meetings (including field visits) and thus having an opportunity to influence important decisions, including those improving the legal status of a considerable number of prison inmates. Svitlana Petrosyan, head of the organization, became a member of the oblast coordination council on HIV/AIDS.

As a result of well-established cooperation with the Department of Labour and Social Protection of the Mykolayiv city executive committee, a working group on social adaptation of people released from penitentiary facilities was established.

Along with government officials, a mechanism of citizens advice provision was created within the department. During the project implementation period, more than 200 individuals, including dozens of people vulnerable to HIV, received legal services and assistance in restoring documents and gaining temporary registration.

#### 4.4.3. Study of Best Practices: Prevention Services Among Prisoners

In 2008 the Alliance launched a new series of publications *Best Practices of Ukrainian AIDS-Service NGOs*. The first issue featured the publication *Step By Step: Prevention Work of Non-governmental Organizations in Penitentiary Institutions of Ukraine*. This publication incorporates several years of experience of Ukrainian AIDS-service organizations in implementing programmes and projects aimed at HIV/AIDS/STI prevention among prisoners and staff of penitentiary facilities in different regions of Ukraine. This publication was made possible thanks to the work of volunteer prisoners, NGO staff members, prisons and pre-trial detention facilities, members of central and oblast divisions of the State Penitentiary Department of Ukraine, social workers, psychologists and legal experts from Mykolayiv Oblast Youth Movement “Penitentiary Initiative” and its director, Olena Herman. The publication will help specialists establish cooperation with the penitentiary system of Ukraine; begin prevention work among prison inmates and staff members of correctional facilities and pre-trial detention centres; organize volunteer movements among prisoners; develop and publish information materials; apply different forms and methods of work with target groups, etc.



### ***Starting Life with a Clean Slate and Doing Good to Others***

***Roman Bondarenko, social worker and self-help group organizer in correctional facilities No. 16 and No. 64, CF "Public Health", Poltava***

I've had three previous convictions in my life. I was in penal colonies 16 and 64. It wouldn't be true if I told you that I started leading a socially useful and healthy life after I was released. In fact, on my very first day of freedom I used to start doing drugs practically outside the prison gates. By using every day I soon brought myself to a miserable state – 52 kilos bodyweight, sepsis, groin phlegmon – my leg swelled to such a size I couldn't put on any boots or pants. The doctors refused to have anything to do with me, saying I had just a few days left. Thanks to my

childhood friends, who are now quite influential people, I was accepted by the infectious diseases clinic. While staying there I met social workers from the Charitable Association "Light of Hope" and Charitable Foundation "AntiAIDS" (now CF "Public Health", Poltava), who provided medical, social and legal assistance. These people made me think about the meaning of my life and my ultimate destination. During that time in the clinic I re-evaluated many things and decided to change my life. I couldn't believe that this life was given to me only to eventually bring it down to such a tragic finale. So I decided to fight and show myself and others facing the same problems that there was an way out of drug dependence.

Immediately after my discharge I went through rehabilitation in the Odesa "Steps" rehabilitation centre and came back to "Light of Hope" as a volunteer. In about six months I was working as a social worker with the self-help group development project. My first training course and certificate of completion was a huge motivation for me which reinforced my decision to help drug dependent people and people living with HIV.

In 2005 Kostyantyn Sylantiev, manager of work with the penitentiary system in the Poltava Charitable Foundation "Public Health", suggested I facilitate self-help groups in penal colonies No. 16 and No. 64. That was how I returned to the places where I'd been a prisoner. But now I came back as a specialist. I couldn't even have imagined that such changes could take place in my life – from drug dependent, asocial personality with ruined health to a professional consultant on chemical dependence issues, able to share his experience and skills to help people with these problems. I'd like to tell anyone facing HIV, drug dependence and adaptation issues after release from prison: people, don't lose hope! Remember that you are not alone, and if you need help you can always find it. And the main thing is: after imprisonment you can always start a new life with a clean slate and do good to people in need of help.

### **Text and photo: Anatoliy Volik**

*CF "Public Health" supported by the Alliance-Ukraine (within the Global Fund programme) currently implements the project "Safety. Knowledge. Support", which includes HIV prevention in penitentiary institutions.*

## 4.5. HIV Prevention in a Street Children Environment

The concept of work in this field during the year included assistance in building the institutional capacity of the Ministry of Family, Youth and Sports of Ukraine and its departments to prevent the spread of HIV among children who work and live on the streets, with a focus on inmates of shelters for minors and juvenile social and psychological rehabilitation centres. According to this concept agreed with the Ministry in 2007 at the start-up of the programme, the objectives for 2008 included the following:

- ❖ to motivate the senior management of bodies, organizations and facilities under the authority of the Ministry to cooperate in the area of response to HIV;
- ❖ to improve the capacity of relevant personnel: to conduct a series of educational and training events for specialists who directly work with children in shelters and juvenile social and psychological rehabilitation centres;
- ❖ to provide the Ministry with its own team of trainers: staff members of shelters and juvenile social and psychological rehabilitation centres who are able to train both adults and children (realization of further training activities by the Ministry itself using the “snowball” methodology);
- ❖ to identify, in cooperation with the Ministry and expert group, the requirements of shelters and juvenile social and psychological rehabilitation centres for educational, methodological and teaching materials and to adjust work plans regarding the type and quantity of materials needed by these institutions on a priority basis.

During the reporting period, in partnership with the Ministry of Family, Youth and Sports and according to the Memorandum of Understanding and Cooperation, a number of measures were organized in compliance with the approved joint work plan of the Ministry and the Alliance in the field of activity “HIV prevention among street children”.

With direct support from the State Department for Adoption and Protection of Rights of the Child of the

Ministry of Family, Youth and Sports of Ukraine, the following events were organized and held:

- ❖ On 15–23 March 2008 two advocacy/motivational workshops “Organization and Methodological Framework of HIV/AIDS Prevention in Shelters for Minors and Juvenile Social and Psychological Rehabilitation Centres” were held for specialists on juvenile affairs in those state administrations responsible for preventing negative conditions for minors, and for directors of shelters and juvenile social and psychological rehabilitation centres.
- ❖ On 20–25 April 2008 two workshops on “Organization and Methodological Framework of HIV/AIDS Prevention in Shelters for Minors and Juvenile Social and Psychological Rehabilitation Centres” were held for methodologists of respective institutions.
- ❖ On 9–14 June 2008 the first training for trainers “Theory and Practice of Organizing and Conducting Trainings” was held for trainers representing shelters and centres of juvenile social and psychological rehabilitation.
- ❖ On 15 August 2008, in cooperation with the United Nations Children’s Fund in Ukraine, a working meeting of the expert working group was held regarding the development and reproduction of educational and methodological materials for staff members and inmates of shelters and juvenile social and psychological rehabilitation centres. During the meeting participants identified materials to be printed on a priority basis.
- ❖ On 9–21 September 2008 three basic trainings “HIV/AIDS: Knowledge, Attitudes, Behaviour” were conducted for NGO representatives and psychologists from shelters and centres of juvenile social and psychological rehabilitation.
- ❖ On 20–25 October 2008 a second training for trainers “Training Skills: Theory and Practical Application” was held for trainer teams from shelters, NGOs and juvenile social and psychological rehabilitation centres.



Algorithm of trainer team formation in 2008:

7. Selection of potential trainers from the personnel of shelters and juvenile social and psychological rehabilitation centres, who participated in basic workshops in November–December 2007 and March–April 2008.
8. Training of potential trainers at a first basic Training for trainers (TT) on the theory and practice of organizing and conducting trainings.
9. Completion of trainer homework — organization of educational events for staff members and clients/inmates at the workplace.
10. Training of trainers at a second TT, aimed at helping participants master training skills with the practical application of theoretical knowledge. Development of a work plan for 2009.
11. Execution of trainer homework — organizing and holding educational events for staff members and inmates of shelters and juvenile social and psychological rehabilitation centres according to the programme work plan and the joint Ministry/Alliance work plan.

#### **“Cross-sectional Study of HIV Prevalence among Neglected and Homeless Children and Street Youth”**

In 2008 a study of street children called “Cross-sectional study of HIV prevalence among neglected and homeless children and street youth” was performed in Ukraine for the first time. This was a linked survey: interviews were conducted together with HIV testing of the respondents’ blood samples. The study covered three cities: Kyiv, Odesa and Donetsk, with a sample of 900 individuals (300 in each city). Time-Location Sampling (TLS) methodology was used. This study was conducted in partnership with Doctors of the World – USA and U.S. Centres for Disease Control and Prevention (CDC). Publication of the survey results is planned for February 2009.



## 5. Treatment and Procurement of Medicines

### 5.1. Scaling Up ARV Therapy (ART)

During 2008 the number of patients with HIV/AIDS receiving ART increased. Treatment was initiated for 802 new patients, including 658 adults and 144 children. The overall number of people receiving ART within the Global Fund programme “Overcoming the HIV/AIDS Epidemic in Ukraine” as of 1 October 2008 was 6070 (5159 adults and 911 children). Treatment within the programme “Overcoming the HIV/AIDS Epidemic in Ukraine” was provided in all regions of Ukraine.

As of 1 October 2008 (the completion date of the programme “Overcoming the HIV/AIDS Epidemic in Ukraine”), 9875 HIV-positive pregnant women and 9748 children born to them had received medicines to prevent mother-to-child transmission of HIV.

During 2008 not less than 3000 patients with HIV/AIDS all over Ukraine received palliative care services.

In view of the completion of the programme “Overcoming the HIV/AIDS Epidemic in Ukraine”, beginning from December 2008, the government made a commitment to ensure the continuity of treatment of all patients who were previously supported by the Global Fund. The MoH of Ukraine formally confirmed this position in an official statement on its web-site and during a press-conference on 1 December dedicated to World AIDS Day.

#### Training Sessions for HIV/AIDS Specialists

The Alliance-Ukraine has put significant effort into

creating conditions in the Ukrainian health care system which will enable governmental institutions to play a leading role in implementation of ARV therapy in future. In cooperation with the Regional Knowledge Hub for the Care and Treatment of HIV/AIDS in Eurasia, the Alliance continued to carry out training sessions on HIV/AIDS treatment for multidisciplinary teams that include health care and social workers. Training topics include provision of ARV treatment to adults and children, treatment of prisoners, and treatment of HIV-positive people with TB co-infection and drug dependence. In addition, during 2008 the Alliance-Ukraine supported the introduction of an on-site clinical mentoring programme. Within this programme physicians from regional AIDS centres completed a study course at the L.V. Gromashevsky Institute of Epidemiology and Infectious Diseases clinic, while specialists from this clinic visited the regions and provided consultative support to local physicians. The programme was administered by the All-Ukrainian Charitable Organization “Time of Life +”.

In addition, the Alliance helped complete the design of a four-module training programme on provision of palliative care to HIV/AIDS patients which was launched in 2007. Trainings were facilitated by experts from the Charitable Organization Mildmay (Great Britain), which runs HIV/AIDS care and support clinics in London, Uganda, Zimbabwe, Tanzania and Kenya. Twenty specialists from ten regions of Ukraine participated in these training modules.

## 5.2. Procurement of Medical Drugs and Equipment

In parallel with the continued procurement of medications and diagnostic reagents within Round 1 of the Global Fund grant, which were delivered primarily to governmental health care facilities, the Alliance has established and strengthened a supply system of medical commodities to a network of non-governmental organizations. In 2008 the Alliance-Ukraine completed the transfer from a decentralized procurement scheme, wherein each individual organization procured consumables (syringes, condoms, etc.), to a centralized scheme. This reduces prices because of the larger volume of orders and more competitive processes, and also introduces a standardized approach to the provision of prevention services.

Within Round 6 of the Global Fund grant the Alliance continues to play the role of procurement agent for the All-Ukrainian Network of People Living with HIV. In particular, the Alliance procures ARV drugs, medications to treat opportunistic infections, laboratory test kits, reagents and consumables necessary for TB diagnostics, etc.

With the completion of the Global Fund First Round grant the supply of antiretroviral drugs for HIV-positive patients also came to an end, and responsibility for their treatment after programme completion was assumed by the MoH of Ukraine. In order to ensure continuity of treatment after the programme ended, the Alliance procured an additional three-month reserve quantity of medications.

In order to ensure laboratory monitoring of ARV therapy, viral load test kits (14,000 tests), CD4 count test kits (6000 tests) and HIV proviral DNA tests for children (5800 tests) were procured in 2008. All test kits were delivered as humanitarian aid to regional AIDS centres.

Non-governmental organizations received 14 *Bohdan* buses which were re-equipped as mobile gynaecological clinics. More than 100,000 HIV rapid tests were supplied to NGOs, and 15,000 HIV rapid tests were provided within the framework of a promotional event organized with the charitable support of the Levi Strauss Company.

In order to implement the STI treatment component within prevention programmes, in 2008 the Alliance procured and distributed among NGOs over 97,800

syphilis rapid tests, 15,000 gonorrhoea rapid tests and the same quantity of chlamydiosis rapid tests, as well as 50,000 pregnancy tests for representatives of populations most vulnerable to HIV/AIDS. In addition, drugs for STI treatment were procured and delivered to health care facilities in all regions of Ukraine.

Thanks to a carefully developed scheme of cooperation with suppliers and carriers, during 2008 NGOs received about 22 million condoms and 2,8 mln individual lubricant sachets on the basis of regular shipments.

Finally, at the end of 2008 a programme of cooperation between the Alliance and the MoH was launched for distribution of syringes, condoms, hygienic wipes and IEC materials procured by the Ministry with funds from the World Bank loan.

Considerable progress and reinforcement of the Alliance's supply system of drugs for substitution therapy programmes (buprenorphine and methadone) has also been made.

During 2008 a significant scale-up of SMT programmes took place, mainly due to the introduction of methadone therapy in summer. It was preceded by extensive efforts to select suppliers through an open competition process; by arrangements with suppliers and subcontractors, and by significant efforts of the Alliance-Ukraine team to receive quota and official permits for the import of medications. As a result, the overall amount of medications (in terms of cost) delivered to health care facilities in 2008 reached over UAH 7.1 million, compared to UAH 4.5 million in 2007.

Together with its partners, the Alliance-Ukraine made major progress in importing to Ukraine the first ever batch of methadone. At the beginning of 2008 partners were able to quickly overcome one serious obstacle – the non-conformity of the national and international quota for import of the drug. In May and June 2008 the first patients started to receive this medication.

Since beginning work on the first supplies in 2007, the professional level of the SMT procurement team has increased considerably. Our professionals organized accurate and systematic supply processes, avoiding any interruptions to the delivery of medications and thereby ensuring continuity of therapy.



## 6. Cooperation and Policy

### 6.1. Policy and Advocacy: Key Achievements at the National Level

During 2008 the Alliance-Ukraine continued to implement a series of interventions and initiatives aimed at the introduction of systemic changes and development of a favourable political environment for further effective implementation of prevention and treatment programmes at both national and local level.

#### The National Programme

The Alliance-Ukraine actively participated in development of the new "Government Concept of a National Targeted Programme for the Prevention of HIV-infection, Treatment, Care and Support for People Living with HIV and AIDS Patients for 2009–2013", which was approved by Resolution of the Cabinet of Ministers of Ukraine on 21 May 2008.

Experts from the Alliance-Ukraine were then involved in drafting the relevant five-year national programme. As a result, for the first time ever, key activity areas and measures within the project "Support of HIV and AIDS Prevention, Treatment and Care for Most Vulnerable Populations in Ukraine" supported by the Global Fund, were included in the national programme. The draft programme was approved on 30 September 2008, at its first reading.

At the time of writing, the national programme had been submitted to Parliament for its second reading. It is expected to be approved in the nearest future.

#### ART. Government Commitments

Within the framework of the advocacy component implemented by the All-Ukrainian Network of PLWH with the support of the Alliance-Ukraine, in July 2008 a campaign was organized to address the optimization of prices for ARV drugs procured at the expense of the state budget. Thanks to the professional intervention of Network activists and involvement of the national mass media, the purchase price for Aluvia medication was reduced from US\$ 283 (as preliminarily approved by the Tender Committee of the MoH of Ukraine) to US\$ 92. This helped save about UAH 42 million of state funds, which were later effectively used to procure 2745

courses for prevention of mother-to-child transmission, 1200 PEP courses and 3800 ART courses.

During 2008 the Alliance-Ukraine repeatedly appealed to the Government and Ministry of Health of Ukraine expressing its concerns regarding the necessity to ensure the sustainability and continuity of treatment of HIV-positive patients who started ART within the Round 1 Global Fund project. On 15 April 2008 the Ministry of Health of Ukraine approved the "Comprehensive Plan of Scaling Up Access of the Population to HIV Prevention, Diagnostics, Treatment, Care and Support of HIV/AIDS Patients in Ukraine for 2008", which provides for necessary ARV medications.

Considering the comprehensive nature of the problem, the Alliance-Ukraine repeatedly raised this issue at meetings of the National Council for the Prevention of Tuberculosis and HIV/AIDS and Coordinating Council on HIV/AIDS, Tuberculosis and Drug Addiction under the President of Ukraine, which took positive action on the matter.

Even after the formal date of the Government's commitment to continue treatment of 6070 HIV-positive patients had passed, due to the state's failure to procure ARV-drugs on time the Alliance-Ukraine continued to supply necessary medications from its own stock in October–December 2008.

Finally, on 1 December – World AIDS Day – the Minister of Health of Ukraine officially and publicly reaffirmed the Government's commitment to ensure provision of antiretroviral therapy to all patients. The relevant statement was posted on the official website of the MoH of Ukraine.

The Alliance-Ukraine is fully aware of the risks existing within the current unstable financial and economic environment regarding the provision of uninterrupted and quality treatment of HIV-positive people. Therefore, the organization is controlling the situation and taking all adequate measures in order to prevent a possible deterioration of the situation during the current year.



**“In 2009 the Ministry of Health will continue provision of antiretroviral therapy to 11,906 patients in conformity with the new “National Targeted Programme for the Prevention of HIV-infection, Treatment, Care and Support for People Living with HIV and AIDS Patients for 2009–2013”**

*Press-service of the MoH of Ukraine <http://www.moz.gov.ua/ua/main/press/?docID=11536>*

### **Presidential Coordinating Council Membership and Humanitarian Status**

The new Coordinating Council on HIV/AIDS, Tuberculosis and Drug Addiction under the President of Ukraine was established on 17 March 2008. Andriy Klepikov, executive director of the Alliance-Ukraine, became a full member of this body.

The first and the only meeting of the Coordinating Council in 2008 took place on 20 October.

During the meeting the executive director of the Alliance-Ukraine had an opportunity to present the most urgent issues to a group of high-ranking government officials and the President of Ukraine. As a result of the meeting President Yushchenko signed a protocol which, among other things, instructed the Cabinet of Ministers to introduce changes to normative and legal acts with the aim of removing barriers to the use of narcotic drugs within the framework of substitution therapy programmes, and to settle the issue of granting humanitarian aid status to medical commodities imported to Ukraine within the Global Fund programmes.

As a result, at the end of December 2008 the Government Commission on Humanitarian Aid took the positive decision to grant humanitarian aid status to all ARV drugs delivered within the Global Fund-supported programme.

In 2009, through further negotiations with the Government, the Alliance-Ukraine intends to reach a systematic and final decision on granting humanitarian aid status (and consequently exemption from all fees and duties) to all medications and commodities delivered to Ukraine by the Alliance-Ukraine.

### **Drug Policy**

In 2008 the Alliance-Ukraine continued to implement a series of advocacy interventions focused on introducing changes to national drug policy.

Thanks to the previous longstanding efforts of non-governmental and international organizations, a legislative norm came into force in Ukraine on

1 January 2008, which, in particular, defined reduction of harm from the use of narcotic drugs as a key priority of drug circulation policy.

In March 2008 the Alliance's programme officer on policy and advocacy became a member of the National Coordination Council on Drug Addiction of the Cabinet of Ministers of Ukraine (NCC). At the same time, thanks to a number of advocacy measures, it became possible to include in the NCC the heads of two partner organizations which implement Alliance-supported projects.

On 8 April 2008 at the NCC meeting chaired by Ukrainian Minister of Internal Affairs Yuriy Lutsenko, participants received information and analytical materials on the inadequately high levels of criminalization of injecting drug users in Ukraine, as well as proposals on cooperation between regional departments of Internal Affairs and non-governmental organizations implementing harm reduction projects. These proposals were reflected in the relevant NCC decision.

On 16 December 2008 Kyiv City Centre of Social Services for Family, Children and Youth (KCCSSFCY) under the executive committee of Kyiv City Council and the Central Administration of the Ukrainian Ministry of Internal Affairs in Kyiv signed an agreement of cooperation in the field of effective implementation of harm reduction related to injecting drug use and ARV treatment for HIV-positive people.

It is important to note that parties to the agreement on the side of KCCSSFCY included the Alliance-Ukraine, All-Ukrainian Network of PLWH and six Kyiv NGOs implementing relevant prevention programmes in the capital with Alliance support. Signature of the agreement became possible after a round table meeting on 16 July 2008 initiated by the Alliance-Ukraine, and following a number of working meetings to draft and agree upon the text of the above-mentioned agreement.

This is the first document of its kind in Ukraine which includes all key implementers of prevention



programmes – non-governmental sector, State Social Services branch and the central Internal Affairs authority.

In 2009 the Alliance-Ukraine plans to replicate this experience in other regions of Ukraine to improve the effectiveness of relevant prevention projects.

On the eve of 26 June – International Day against Drug Abuse and Illicit Trafficking, and UN International Day in Support of Victims of Torture – the Alliance-Ukraine initiated collection of signatures for a petition to the Prime Minister, Minister of Health and Minister of Justice of Ukraine to disallow the artificial criminalization of tens of thousands of tramadol users, a drug which a day earlier was included in the list of narcotic substances by relevant Governmental resolution.

The petition was signed by the heads of 39 all-Ukrainian, international and regional non-governmental organizations. The respective Order of the MoH of Ukraine, which established the amount of tramadol for possession of which a person is criminally liable, was cancelled on 20 August, while a new Order was registered at the Ministry of Justice only on 24 September 2008.

As a result, the amount of tramadol carrying criminal liability which was originally suggested by law enforcement agencies was eventually tripled. In this way law enforcement pressure on drug dependent people was considerably reduced.

On 30 October 2008 the Alliance-Ukraine signed an agreement with the Central and Eastern European Harm Reduction Network on implementation of an advocacy project focusing on drug policy reform and preparation of Ukraine's official delegation to the 52nd Session of the UN Commission on Narcotic Drugs to be held in March 2009 in Vienna, Austria.

Within the framework of the above-mentioned project the Alliance-Ukraine initiated discussion with the responsible government bodies concerning the effectiveness of domestic policy on drug circulation and drug abuse prevention.



### ***Success Story from the Regions***

#### ***One Day in the Project "Advocacy Injection" (Zhytomyr)***

On the eve of AIDS Memorial Day activists of this project of the Zhytomyr NGO "Perspective", which is intended to create a favourable environment for the implementation of prevention programmes and development of tolerant attitudes towards PLWH and representatives of vulnerable populations, came up with an original initiative which it submitted to the oblast coordination council on HIV/AIDS.

The idea was to put red ribbons – symbol of fighting AIDS and solidarity with HIV-positive people – on red traffic lights during Memorial Day events.

The initiative was supported by the oblast authorities and the regional branch of the All-Ukrainian Network of PLWH; it also received positive expert evaluation from the Traffic Police Division of the Oblast Department of Internal Affairs. Consequently, on 18 May 2008 many pedestrian crossing lights were covered with red ribbon stickers, which generated considerable interest, resonance and discussion among Zhytomyr residents. It was also an important newsmaker for the local media, which provided broad coverage of the event and related issues throughout the whole week.





## 6.2. Development of the National Monitoring and Evaluation System

In January 2008 Ukraine submitted its *National Report on Monitoring Progress towards the UNGASS Declaration of Commitment on HIV/AIDS*. Ukraine's National Report for 2006–2007 was acknowledged as the best and most comprehensive report submitted to the UN. The Alliance-Ukraine was actively involved in all stages of drafting the report, including data collection, analysis of indicators and approval of the report at national level.

To monitor the status of the epidemic among IDU, FSW, street children and prisoners, a number of studies were carried out in 2008:

- ❖ three linked studies “Behaviour monitoring of injecting drug users”, “Behaviour monitoring of commercial sex workers” and “Cross-sectional study of HIV prevalence among neglected and homeless and street youth”, with interviewing linked to HIV testing of respondents' blood samples. Methodologies used for sampling enabled the involvement of respondent categories which are unlikely to be covered by health care facilities and non-governmental organizations.
- ❖ A four-year cohort study among prisoners of seven penitentiary institutions with prevention interventions came to an end. Every year the results of these studies helped identify the levels of HIV prevalence and incidence levels during prison terms. Overall, over three years in these institutions only 18 cases of infection were detected. More importantly, during the last year there were no new cases diagnosed, which demonstrates the effectiveness of prevention interventions.
- ❖ The first ever study of the current state of the HIV/AIDS epidemic was conducted in Ukraine. The goal of this study was to answer the question of whether the epidemic has spread beyond the most-at-risk groups towards the general population. Desk reviews conducted in all regions of Ukraine demonstrate that people with newly

diagnosed HIV or their sexual partners belong to most-at-risk populations. This means that a statement about the generalization of the HIV/AIDS epidemic in Ukraine is premature.

For the first time, the Alliance-Ukraine in 2008 decided to provide direct funding for monitoring and evaluation (M&E) coordinators in regions with average or low HIV prevalence. We believe that M&E systems should function in each region, because timely epidemiological monitoring and planning of proactive prevention interventions at the oblast level may prevent the further spread of HIV.

To support the development of national and regional M&E systems, the Alliance adapted a unified system of collection and reporting of HIV/AIDS response indicators – the Country Response Information System (CRIS). In September 2008 the first training seminar on application of this system was organized for representatives of regions where monitoring and evaluation activities constitute an integral part of the work of oblast councils on HIV/AIDS and TB prevention.

Traditional for Ukraine was the Fourth National Conference on Monitoring and Evaluation, which in 2008 brought together almost 200 experts. For the first time the conference was attended by specialists working in related areas, such as monitoring programmes of STI prevention and treatment. Particular attention was also focused on the monitoring of antiretroviral therapy implementation, which is extremely important for Ukraine at the current stage of the epidemic.



### 6.3. Primary Prevention through the Education Sector

During 2008 activities within the education subcomponent of the programme “Overcoming the HIV/AIDS Epidemic in Ukraine” focused on the continuation of contemporary models of prevention education.

In 2008 Children’s Fund “Health through Education” continued mass implementation of two prevention programmes on the basis of life skills-based health education (LSHE):

1. *The programme for senior students “School against AIDS” has proved its impact efficiency and ensures effective primary HIV prevention among school pupils aged 13–18.*
2. *“Basics of Health” education course for general secondary schools. Suggested teaching technology ensures development of fundamental social and psychological competence necessary to lead a healthy, safe and productive life (including reduction of young people’s vulnerability to HIV).*

As a result of programme implementation, over 27% of Ukraine’s pupils gained access to quality prevention education, while more than 57% of schools were staffed with appropriately trained teachers.

Relevant activities on the teacher training and optional study course “School against AIDS” were included in the national programme approved by the Government and Parliament as the Law of Ukraine (passed in the first reading).

Children’s Fund “Health through Education” developed sets of educational and methodological materials on health basics for grade 8 and 9 general secondary school pupils (textbooks, notebooks with practical exercises, guides for teachers, tests, didactic materials, and Protect Yourself from HIV multimedia manual, which additionally offers electronic documents for teachers and students).

Textbooks for grades 8 and 9 won the All-Ukrainian Textbook Competition. Upon government order they were published with a total print-run of over 200,000 copies, thus reaching the hands of every third pupil in the appropriate age group nationwide.

As a result of state approval, specialised monitoring studies and public expertise, these textbooks were rated highly in terms of quality and impact ef-

fectiveness. Students who use them to study within the programme demonstrate in-depth knowledge and strong motivation towards a healthy lifestyle and safe behaviour in everyday life. Pedagogues and parents have noted their positive self-appraisal and well-developed psychological and social skills, including the ability to withstand negative social pressures. These are factors that ensure the best personal protection in an environment of spreading socially dangerous infections such as HIV/AIDS and tuberculosis.

Children who were taught this course also demonstrate a tolerant attitude towards HIV-positive people; they actively participate in public events, drama performances and advocacy groups, working with other students, parents and teachers; they share their knowledge and attitudes with other people, contributing to the reduction of stigma and discrimination of people living with HIV.

The project for senior school students “School against AIDS” earned a respectable reputation among both pedagogues and young people. Participants emphasize its topicality and originality and demonstrate interest in similar projects.

The introduction of innovative pedagogical techniques in schools – life skills-based health education – contributes to the overall improvement of school education. The majority of trained teachers use various elements of LSHE during other classes and extracurricular activities. This facilitates a positive psychological climate and improves trust between teachers and students and parents and children, which also reduces the vulnerability of young people in the environment of an HIV/AIDS epidemic.

The educational programme for primary schools “Useful Habits”, on prevention of HIV and the use of psychoactive substances based on life skills-based education, is implemented by the HOPE project in 14 regions of Ukraine (Vinnytsya, Volyn, Dnipropetrovsk, Donetsk, Zhytomyr, Ivano-Frankivsk, Mykolayiv, Odesa, Kherson, Khmelnytsky and Cherkasy oblasts, AR of Crimea and in the cities of Kyiv and Sevastopol). In cooperation with the Dnipropetrovsk Oblast Institute of Postgraduate Pedagogical Education, project HOPE organized 16 trainings for primary school teachers (overall 406 teachers were trained). HOPE fulfilled its obligations

and provided the Dnipropetrovsk Oblast Institute of Postgraduate Pedagogical Education with educational materials for 950 teachers as planned. The Institute continues to train teachers on the “Useful Habits” programme. All training seminars were actively supported by five regional HIV/AIDS resource centres supported by the Alliance-Ukraine. In cooperation with the National Dragomanov Pedagogical University and with logistical support from the Kyiv HIV/AIDS Resource Centre, the Alliance organized a training seminar for teachers and pedagogical universities and colleges of Ukraine. Overall during the last year 602 teachers were trained (as compared to the planned figure of 576 teachers) and 60,870 copies of educational materials were distributed directly among teachers and disseminated through resource centres.

A total of 16,154 students were covered by the prevention education programme (as compared to the planned figure of 13,700 students).

In order to ensure the programme’s sustainability the HOPE project, in cooperation with the Sevastopol Resource Centre, organized the “Prevention Institute” – a refresher course for trainers and pedagogues actively involved in programme implementation.

For the first time ever the National Dragomanov Pedagogical University held a training for the teachers and instructors of military high schools (30 course curators).

In 2008 the magazine *Informatsiya. Poglyady. Svitoglyad* (Information. Opinions. Worldviews), which is designed and published within the “Foundation of Youth Participation” programme, was awarded first prize in the nomination ‘Specialised Non-governmental Organization Publications’ in the National Media Competition Unite Our Children, Unite Against AIDS, initiated and realised by UNICEF with the “Intellectual Perspective” foundation.

The popularity of and demand for this magazine went far beyond the expected reader audience of teachers and people working with children. For example, the Charitable Foundation “Youth Participation Foundation” received very positive comments from the Ukrainian Ministry of Emergency Situations and Protection of the Population from the Consequences of the Chernobyl Nuclear Disaster, which requested the journal for use in its work.

On 28 March 2008 a round table on “Intersectoral Cooperation in Education: Prevention of Human Immunodeficiency Virus among Children and Adolescents” was organized with the Ministry of Education and Science of Ukraine, Department of Education and Science of Sumy Oblast State Administration and Sumy Oblast Institute of Postgraduate Pedagogical Education.

On 18 April 2008 a round table on the same issue was organized in Uzhgorod with the Ministry of Education and Science of Ukraine, and the Department of Education and Science and Department of Health of Zakarpattia Oblast State Administration.

### **National Conference on HIV Prevention and Development of Healthy Lifestyle Skills among Student Youth**

The 4th National conference on HIV prevention and development of healthy lifestyle skills among student youth “Intersectoral Cooperation in Education: Prevention of Human Immunodeficiency Virus among Children and Adolescents; Introduction of Life Skills-based Education as a Way to Preserve the Health of Young People in Conditions of an HIV Epidemic; Accessibility of School Education for Children Living with HIV” was held in Kyiv on 21–23 May 2004.

The conference participants – representatives of the Ministry of Education and Science, the Academy of Pedagogical Sciences of Ukraine, members of governmental, non-governmental, faith-based and international organizations, representatives of regional departments of education and science, oblast institutes of postgraduate pedagogical education, regional HIV/AIDS resource centres, coordinators of the projects “Basics of Health”, “School against AIDS” and “Useful Habits” – conducted an in-depth analysis of the conditions and perspectives of primary prevention education programmes implemented through the education system of Ukraine with the support of the Ministry of Education and Science and ICF “International HIV/AIDS Alliance in Ukraine”.



## 6.4. Regional Coordination

In 2008 the Alliance-Ukraine continued to work with its regional coordinators (RCs). With the active support of the RCs, prevention, treatment and advocacy programmes as well as public awareness and educational events within the GF and SUNRISE programmes are being implemented as scheduled in nine most severely affected regions of Ukraine (Donetsk, Dnipropetrovsk, Mykolayiv, Odesa, Kherson and Cherkasy oblasts, cities of Kyiv and Sevastopol and AR Crimea). New non-governmental organizations are being involved in cooperation, and a gradual expansion of the geography of the response to the epidemic can be observed in the regions. For example, 14 new NGOs started to work in 22 towns with no previous activity in the area of HIV prevention among most-at-risk populations. Coordinators mentor new organizations and organize working meetings of NGOs, inviting the managers of relevant health care and educational institutions, CSSFCY and Internal Affairs departments, as well as churches and other non-governmental and international organizations working in HIV/AIDS in the region. RCs cooperate with coordinators and experts from other organizations and projects in the region, including the All-Ukrainian Network of PLWH, the USAID/HIV Service Capacity Project, UNICEF, and the Interconfessional HIV/AIDS Resource Centre of the All-Ukrainian Council of Churches and Religious Organizations.

RCs participated in assessment of the technical assistance needs of local organizations working in the area of HIV/AIDS.

RCs' objectives include representing the interests and coordinating the work of the Alliance-Ukraine at regional level; developing the non-governmental AIDS-service sector; supporting the reduction of HIV rates and AIDS-related mortality, and mitigating the negative impact of the epidemic in the region. RCs implement the Alliance's strategy at regional level.

All coordinators are active and important members of regional coordination councils on HIV/AIDS. They take part in the development of council agendas and stimulate NGOs towards participatory drafting of decisions. Most importantly, RCs directly participate in the development of regional targeted intersectoral programmes on HIV prevention among the population and overcoming the consequences of the epidemic. For the first time oblast/city programmes for 2009–2013 envisage real prevention interventions that will be implemented by Alliance grantees.

Another important component of the regional coordinators' work is provision of information to local communities about HIV/AIDS issues; cooperation with mass media and local authorities; participation in round tables and other awareness-raising and educational events, as well as lobbying and implementation of innovative projects. These include pharmacy-based interventions (in Kyiv, Cherkasy, Kherson and Kryviy Rih); information distribution and HIV testing of university students with rapid tests within the Levi Strauss Foundation project (in Dnipropetrovsk, Odesa, Kyiv and Bila Tserkva); coordination of measures on STI diagnostics and treatment (regional working meetings in Donetsk, Cherkasy, Odesa and Dnipropetrovsk), and organization and coordination of mobile clinics' work in the regions.

With the RCs' active involvement press-conferences dedicated to World AIDS Day were organized in the regions around 1 December 2008; the emphasis of these press events was on the performance and achievements of prevention and treatment programmes, as well as on government support for patients after completion of the Global Fund's Round First programme.



## 7. Capacity Building of Non-Governmental

### 7.1. Assessment of the Technical Assistance Needs of AIDS-Service Organizations

In May–September 2008 researchers from regional resource centres and NGOs carried out the operational research “Assessment of the Technical Assistance Needs of AIDS-Service Organizations”.

The research goal was to analyze the needs of non-governmental and governmental organizations working in HIV prevention among vulnerable groups in terms of technical and institutional capacity building.

The research covered 24 regions of Ukraine. Overall, 765 staff members and managers from 180 organizations, nine regional coordinators of ICF “International HIV/AIDS Alliance in Ukraine” and 21 Alliance-Ukraine staff members participated in the research.

Key research findings are as follows:

- ❖ organization managers and staff lack skills in project/programme performance analysis, organizational analysis, review of conditions and performance outcomes, as well as forecasting, modelling and activity planning skills;
- ❖ all regions which participated in the research experience systemic challenges and unmet needs in terms of training of specialists on the

basic knowledge and skills of HIV/AIDS/STI/drug abuse prevention and the medical and psychological aspects of project activities. There is also a need for advanced training and retraining;

- ❖ regardless of status and organizational experience, problems in the area of management, administration of activities and human resource management, oversight, monitoring and evaluation are quite widespread;
- ❖ issues of practical implementation of new forms and methods of technical assistance provision to AIDS-service organizations are key, such as the institution of supervisors, mentoring, expert and consulting visits, etc. The potential of experienced NGOs and their experts is not being used sufficiently to provide technical support at regional level.

The results of the operational research were used to develop a plan of technical assistance provision by the Alliance-Ukraine and regional resource centres funded by the Alliance-Ukraine; they were also used to coordinate activities with other organizations providing technical support to AIDS-service organizations in Ukraine.

### 7.2. Technical Assistance in Eastern Europe and Central Asia

In 2008 the Technical Support Hub (Kyiv) implemented 13 technical assistance projects with the overall duration of 192 days, for 8 countries of Eastern Europe and Central Asia.

With the support of the Alliance’s Secretariat, United Nations Population Fund, UNAIDS, HIV/AIDS Technical Support Facility – Southeast Asia and the Pacific (TSF-SEAP), Eurasian Harm Reduction Network and within the framework of Pact Community Reach projects, Central Asian Programme on AIDS Control in Vulnerable Populations “Capacity”, etc.,

technical assistance was provided to Kazakh Union of People Living with HIV/AIDS, Georgian Harm Reduction Network, Moldovan Harm Reduction Network and to other non-governmental organizations.

International technical support in 2008 was implemented in different areas and applied different formats, namely:

#### 1. Monitoring and Evaluation:

- ❖ “Basic training on Programmatic M&E for prevention projects among vulnerable groups”, was held in March in Moldova.

- ❖ In April the Alliance-Caribbean team received technical assistance on “Development of project indicator Matrix and Reporting. Project Management and M&E Tools”.

- ❖ In May specialists from Russia and Kazakhstan undertook a study tour to Ukraine to develop the regional monitoring and evaluation system.

## **2. Community Mobilization:**

- ❖ A training “Implementation of service delivery systems for HIV prevention among vulnerable youth” was held in March in Turkmenistan.

- ❖ A workshop “Strengthening Partnerships and Involvement of People Living with and Affected by HIV Epidemic in Central Asia as a Key to Universal Access” was conducted in June in Kyrgyzstan.

## **3. Care and Support:**

- ❖ A training “Management of the projects on care and support services for people living with HIV (PLHIV)”, was held in November in Almaty (Kazakhstan).

## **4. Strategic Planning:**

- ❖ A workshop “Documentation and communications in HIV/AIDS for regional implementers of PACT community REACH project was held in June in Russia.

- ❖ A specialist of the Alliance-Ukraine provided assistance to the Kazakh Union of People Living with HIV/AIDS to develop a work plan within the country application to the Global Fund’s Round 8.

- ❖ In December the Alliance helped to organize the capacity assessment and strategic planning for the Kazakh Union of People Living with HIV/AIDS.

## **5. Institutional Development:**

- ❖ During October-November a consultant from the Technical Support Hub (Kyiv) was a member of the international research team representing 9 countries, which analyzed the issues of technical assistance and support of Global Fund grants implementation in these countries.

- ❖ Technical assistance visit to Uzbekistan took place in November to analyze local context and previous attempts related to provision funds to Uzbekistan in order to identify the most effective way to start up Uzbek part of Regional CAAP Project Round.

- ❖ In December training curricula for military doctors in Turkmenistan on STI/HIV/AIDS were updated, and recommendations on its improvement were developed.

- ❖ A Georgian specialist undertook a study visit to the Alliance-Ukraine to gain experience in the area of the institutional development.

In 2009 Technical Support Hub plans to expand areas of the provision of technical support; to develop and to improve professional skills of specialists involved in the provision of technical support; to strengthen partnership relations with international and regional organizations.

## 8. Public Alliance-Ukraine Events

### 8.1. Living Library



The first Ukrainian Living Library event was dedicated to International AIDS Memorial Day on 17 May. For six hours, close to 200 visitors could interact with 22 representatives of groups ('living books'), who, due to their ethnic origin, religious beliefs, profession, health conditions, sexual or social orientation are marginal to general society.

The goal 'Living Library' methodology was to facilitate an understanding of diversity and to promote communication between the general population and groups most vulnerable to HIV in order to overcome negative stereotypes in society regarding these specific populations.

*"I hope this project will enable people to pose questions which they never ask in their everyday lives. Next time, when they make judgments about cer-*

*tain groups of people, they will remember the face of one of the 'books' they spoke with, and hopefully change their opinions about other people", said Anya Dovgopol, an event participant.*

On 28 September 2008 a second Living Library was organized by the Alliance-Ukraine in cooperation with NGO "Insight" within the exhibition Another View, dedicated to lesbians, bisexual women and transgender people. The event brought together 12 'living books' and about 50 'readers'.

Living Library has drawn the attention of many print media outlets and television channels.

The Alliance plans to expand Living Library events to the regions and is providing technical assistance to partner organizations which are implementing this methodology.

#### Do You Think the Truth Can be Different?

We learn to read in childhood, but these are regular books – usually rectangular, with paper pages and black-and-white print. Any human being is also a book of some kind: it's plot made of thoughts, dreams and acts. No one will ever read such a book to the end, but an attempt to hear its messages is an unforgettable experience for any of us.

A unique event dedicated to International AIDS Memorial Day was held in Kyiv, and not a single kind heart could pass it over with indifference. Analogues of the Living Libraries already exist in Poland, Finland, Hungary, Czech Republic and France.

On 17 May 2008 a true Living Library was opened in the heart of the capital, in Taras Shevchenko Park. The main way this library differed from a usual one was in its books. These were real living people with unique lives and histories worthy of becoming international bestsellers.





These were true plots from life about mystery, diversity, confrontation and moral courage. From 11 a.m. until 5 p.m. all comers could become readers of this unique library with 20 living books: Life Story, Being a Lesbian in Ukraine, Ukrainian Muslim, One World – One Race, Sober Drug User, Homosexual, A Woman Living with HIV, Sex Worker and more.

“The main goal of the project is to promote better awareness and understanding of people who are different. Mutual understanding is one of the most important things in the world and a key precondition for good relations between people. The ‘books’ represent different social groups in our society, which often experience biased

attitudes and sometimes find themselves behind a wall of indifference or intolerance. Each of us needs to fight stereotypes, discrimination and social isolation to achieve human harmony”, said Olga Golichenko, policy and advocacy programme officer at the International HIV/AIDS Alliance in Ukraine, one of the event organizers.

***A Living Library functions like a regular library: a reader comes in, registers, picks up a catalogue, selects a book he or she is interested in and takes it away for a while to read. The reading process means private communication on what the ‘book’ can tell you – about him/herself, his or her life, problems and situations. The ‘book’ can provide you with a recipe for happiness or optimism; share his or her courage and provide inspiration. Any ‘book’ is a human being who, due to his or her ethnic origin, religious beliefs, profession, health condition, sexual or social orientation is separated from society. This person is ready to disclose his or her status in real conversation with you.***

The literary topics of the Living Library are diverse and interesting. A special catalogue of ‘books’ with short descriptions allows readers to pick the most interesting ones. Each visitor experiences an overwhelming desire to read everything all at the same time!

A Woman Living with HIV, or just pretty blonde Natalia, is one of the ‘books’ who openly shared their stories. Natalia told how her HIV-positive status helped her to finally find herself and her place in life. She is confident: “I’m not a victim! I don’t think about my status and I live like a normal person. And this adds to my strength. You can’t forget, throw it away or cross it out – so you have to learn to live with it, and to live happily.” Currently Natalia works in the All-Ukrainian Network of PLWH and helps people personally affected by AIDS. She has already taken the most courageous step in her life – she was openly interviewed on television and said aloud: “Yes, I am living with HIV!”

It took 16 weeks to prepare the Living Library event; the process involved 70 members of international and non-governmental organizations, volunteers, ‘books’ and librarians. The event was organized by the International HIV/AIDS Alliance in Ukraine with the United Nations Volunteers in Ukraine programme and Kyiv City Centre of Social Services for Family, Children and Youth. Partners of the project included the European Youth Parliament-Ukraine and MTV-Ukraine.

“The project was just unbelievable. I don’t mean impossible in terms of implementation – I mean you want to shake hands with all the people who organized it and express your deepest gratitude. I believe we should have many more events of this kind,” said one visitor who spent all day reading ‘living books’ and could not hide his genuine excitement and impressions.

*Text: Maryana Manakova (project volunteer)*



## 8.2. Human Rights against AIDS Exhibition

The Human Rights against AIDS exhibition, dedicated to the 60th Anniversary of the Universal Declaration of Human Rights, was held within the framework of World AIDS Day on 10–14 December 2008. It was organized by the United Nations in Ukraine and International HIV/AIDS Alliance in Ukraine, with information support provided by What's On magazine.

Around 150 visitors could see 46 photographs, 13 posters, and watch related videos. The exhibits illustrated various aspects of fulfilment of the Universal Declaration of Human Rights, in particular in the context of HIV/AIDS. The exhibition included professional photographs and art work by Natalia Kravchuk, Mila Tyeshaeva, Taras Khimchak, Giacomo Pirozzi, Eugene Reutman and Oksana Chelyk.

Visitors had an opportunity to examine articles and exhibits illustrating the conditions for fulfilment of the Declaration's articles on the right to life, development, education and recreation for street children; protection from any form of discrimination, and the right to decent living standards and access to social and medical services for female sex workers, drug users, people living with HIV and prisoners.

During the opening ceremony participants discussed the following HIV/AIDS issues and associated systematic violations of human rights in Ukraine:

- ❖ refusal to provide medical assistance to HIV-positive and drug dependent people;

- ❖ disclosure of HIV status and interventions in private life;
- ❖ torture and abusive treatment by police and during imprisonment;
- ❖ inadequate use of governmental funds in the response to the epidemic;
- ❖ problems of access to HIV testing and prevention commodities;
- ❖ the inadequately high level of criminalization of drug users in Ukraine.

During the drama forum "Children on Stigma and Discrimination" for children and adults, students from the Technical Lyceum of Kyiv's Dniprotsky district reviewed three stigma and discrimination-related dramatic episodes performed by volunteers from youth NGO "Compass". These performances were dedicated to the discrimination of people living with HIV in the family, at the workplace and in society. Each episode was discussed by the audience.



### 8.3. Young Art against AIDS

On 30 December 2008, ICF “International HIV/AIDS Alliance in Ukraine” conducted the New Year charitable event “Young Art against AIDS” to support HIV-positive child patients of the Treatment Clinic Centre for Children Living with HIV/AIDS. The event was intended to improve the quality of the young patients’ stay at the centre and also their psycho-emotional condition, providing them with gifts and surprises from Father Christmas, art therapy with professionals and a chance to interact with fairytale characters. During at least 28 days of in-patient treatment, children are faced with an unpleasant and strict treatment routine, which 20% of them endure without their parents. Some 20 children affected by the epidemic attended the festivity.

Over 70 private benefactors and eight business organizations joined forces to make up the gift sets and organize a true New Year’s celebration for these children. Overall around UAH 12,000 in charitable donations was raised during the event, which

was used to buy essential goods for children such as clothes and bedding, toys, books, CDs with developmental movies for children, hygiene products, paints, felt-tip pens, crayons and other accessories for creative activities, as well as New-Year tree decorations.

For the third year running, “Youth Art against AIDS” has proved that it is enough to take the initiative and assume a leadership role in order to unite the forces of different professions and areas of activity to overcome common problems in society.





## Annex 1. Financial Overview and Audit Report. 2008

Table 1. **Structure of funds received by ICF “International HIV/AIDS Alliance in Ukraine” in 2008\***

Donor	Funds received		
	UAH	USD	%
Global Fund Round 1	86 754 502,98	16 808 979,06	59,23%
Global Fund Round 6	43 012 708,00	8 720 324,00	30,73%
Global Fund / Round 6 via PLWH Network	7 939 574,71	1 602 695,38	5,65%
USAID	6 000 000,00	1 083 580,31	3,82%
Others	1 004 042,52	163 471,96	0,57%
<b>TOTAL</b>	<b>144 710 828,21</b>	<b>28 379 050,71</b>	<b>100,00%</b>

\* UAH/USD exchange rate is NBU exchange rate at the date of funds received

Table 2. **Structure of ICF “International HIV/AIDS Alliance in Ukraine” expenditures in 2008\***

Expenditure Summary	Total Spent (UAH)	Total Spent (USD)	(%)
Grants and Sub-grants	71 873 816,06	14 092 905,11	55,98%
Procurement, Equipment and Supplies[1]	20 069 324,26	3 935 161,62	15,63%
Publications	985 106,15	193 158,07	0,77%
Workshops and Meetings	8 576 528,94	1 681 672,34	6,68%
Technical Assistance	2 670 850,83	523 696,24	2,08%
Travel	3 623 089,34	710 409,67	2,82%
Salaries	14 547 930,05	2 852 535,30	11,33%
Office Costs	5 455 569,39	1 069 719,49	4,25%
Audit	601 035,66	117 850,13	0,47%
<b>TOTAL</b>	<b>128 403 250,68</b>	<b>25 177 107,98</b>	<b>100,00%</b>

\* Exchange Rate of 2008 ICF Alliance Ukraine budget — 5,1

[1] Procurement line does not include cost of condoms donated by USAID: 4 221 327,83 UAH ( 835 906,50 USD) at rate 1\$ = 5,05 UAH

**Table 3**      **Structure of expenditures for the Round 1 Programme “Overcoming the HIV/AIDS Epidemic in Ukraine” implemented by the “International HIV/AIDS Alliance” jointly with ICF “International HIV/AIDS Alliance in Ukraine” in 2008**

Main Programme Objectives	Budget (USD)	Total Spent (USD)	Spent (%)
Management / PR Implementation Unit	3 546 860	3 296 924	92,95%
Treatment, Care & Support	12 543 097	9 212 855	73,45%
Focused Prevention	3 718 040	4 378 425	117,76%
Information, Education & Advocacy	1 742 807	2 002 301	114,89%
Monitoring & Evaluation	706 459	713 077	100,94%
Alliance Management Fee	375 000	375 000	100,00%
<b>TOTAL</b>	<b>22 632 263</b>	<b>19 978 582</b>	<b>88,27%</b>

**Table 4**      **Structure of ICF “International HIV/AIDS Alliance in Ukraine” expenditures for the Round 6 Programme “Support for HIV and AIDS Prevention, Treatment and Care for Most Vulnerable Populations in Ukraine” in 2008**

Main Programme Objectives	Budget (USD)	Total Spent (USD)	Spent (%)
Focused Prevention	5 389 355,40	5 622 893,26	104,33%
Supportive Environment	43 630,80	41 743,60	95,67%
Monitoring & evaluation	451 532,40	559 678,65	123,95%
Administrative costs	275 173,42	55 903,30	20,32%
<b>TOTAL</b>	<b>6 159 692</b>	<b>6 280 219</b>	<b>101,96%</b>





BDO Balance-Audit

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### Auditors' Report to the members of the Governing Board of the ICF "International HIV/AIDS Alliance in Ukraine"

We have audited the financial statements of ICF International HIV/AIDS Alliance in Ukraine (further – the Alliance Ukraine), including the balance sheet as at December 31, 2008 and income statement for the year then ended.

### Respective responsibilities of the Management of the Alliance Ukraine and auditors

The Alliance Ukraine responsibilities for preparing the financial statements in accordance with Ukrainian Accounting Regulations (Standards) are as follows:

- Select suitable accounting policies and then apply them consistently
- Make judgements and estimates that are reasonable and prudent
- Follow applicable accounting standards subject to any material departures disclosed and explained in the financial statements
- Prepare the financial statements on the going concern basis unless it is inappropriate to presume that the entity will continue in operation

The Management of the Alliance Ukraine is responsible for keeping proper accounting records, which disclose with reasonable accuracy at any time the financial position of the entity. The Management of the Alliance Ukraine also responsible for safeguarding the assets of the entity and hence for the prevention and detection of fraud and other irregularities.

Our responsibility is to provide an opinion on the financial statements based on our audit. We have performed 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 whether the financial statements are free from material misstatement.

### Opinion

In our opinion:

- The financial statements present fairly the financial position of ICF "International HIV/AIDS Alliance in Ukraine" as at 31 December 2008 and the results of its operations for the year then ended in conformity with National Accounting Standards of Ukraine;
- In all material respects, ICF International HIV/AIDS Alliance in Ukraine has complied with local statutory and taxation requirements and its' activities have been conducted in conformity with the grant agreements in place during the year.

Kyiv, March 27, 2009

BDO Balance-Audit

Managing partner  
BDO Balance-Audit

Sergey A. Balchenko



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**BALANCE SHEET**

as at 31 December 2008

	Notes	2008 thousand UAH	2007 thousand UAH
<b>Fixed assets</b>			
Tangible assets: net book value	2	897,7	656,4
Tangible assets: original costs		1966,1	2 206,0
Accumulated Depreciation		(1068,4)	(1549,6)
Intangible assets: net book value	2	159,7	89,8
Intangible assets: original costs		320,1	306,0
Accumulated Depreciation		(160,4)	(216,2)
Long term financial investment		166,3	
<b>Total fixed assets</b>		<b>1 223,7</b>	<b>746,2</b>
<b>Current assets</b>			
Products	3	3 004,3	2 061,2
Debtors	4	31 037,2	28 927,2
Grants		28 344,5	
Suppliers & Contractors		1 756,9	
Tax & Social Funds		789,7	
Staff Loans		166,1	
Cash at bank	5	41 672,1	9 226,8
Prepaid expenses		11,7	8,8
<b>Total current assets</b>		<b>75 725,3</b>	<b>40 224,0</b>
<b>Total Assets</b>		<b>76 949,0</b>	<b>40 970,2</b>
<b>Liabilities</b>			
Bank loans			283,1
Creditors	6	4 049,4	88,2
Suppliers & Contractors		3 408,7	
Tax & Social Funds		637,9	
Salary		1,4	
Staff Advance		1,4	
Differed income: restricted funds		60 008,8	40 950,7
Accruals		1 053,7	746,2
Other current liabilities		64,2	17,3
<b>Total liabilities</b>		<b>65 176,1</b>	<b>42 085,5</b>
Gain on exchange difference	7	11 772,9	-1 115,3
<b>Total gain</b>		<b>11 772,9</b>	<b>-1 115,3</b>

The amounts are represented in thousand UAH

Executive Director

Klepikov A.

Chief Accountant

Zatulyviter L.



## PROFIT AND LOSS STATEMENT

for the year ended 31 December 2008

	Notes	2008 Restricted thousand UAH	2007 Restricted thousand UAH
<b>Revenue</b>			
Revenue from charitable activities		132 659,1	75 900,1
Deposit account income		56,5	40,4
<b>Total revenue</b>		<u>132 715,6</u>	<u>75 940,5</u>
<b>Expenditure</b>			
Operational costs		104059,3	52 730,6
Administrative costs		28960,6	23 170,6
Foreign exchange gains/losses		-12889,5	809,3
<b>Total expenditure</b>		<u>119 830,4</u>	<u>76 710,5</u>
<b>Net income/loss for the year</b>		12885,2	<u>- 770,0</u>
<b>Other recognised gains/(losses)</b>			1,1
Foreign exchange gains/losses		-12889,5	809,3

The amounts are represented in thousand UAH

Executive Director



Klepikov A.

Chief Accountant




Zatuliyviter L.



## Annex 2. Key Outcomes of Alliance-Ukraine Programme Activities in 2008

### Results of Implementation of Prevention Programmes for HIV Vulnerable Populations as of 1 January 2009

Oblast/Regions	Coverage of Representatives of Vulnerable Groups with Prevention Services by 1 January 2009			
	IDU	FSW	MSM	Prisoners
Autonomous Republic of Crimea	5973	1253	419	5698
Cherkasy oblast	9302	765	53	3751
Chernihiv oblast	1688	42	1	0
Chernivtsi oblast	3328	478	53	0
Dnipropetrovsk oblast	37,664	2820	580	1166
Donetsk oblast	24,452	1668	563	7967
Ivano-Frankivsk oblast	2075	216	281	2180
Kharkiv oblast	2151	1560	587	175
Kherson oblast	8518	576	376	7068
Khmelnysky oblast	3248	359	0	2962
Kirovohrad oblast	2480	264	184	0
Kyiv oblast	1206	190	0	205
Luhansk oblast	1862	241	0	30
Lviv oblast	1359	1352	735	6399
Mykolayiv oblast	16,275	8384	1242	5894
Odesa oblast	27,317	7904	2052	3454
Poltava oblast	4 062	437	0	4249
Rivne oblast	1395	288	0	234
Sumy oblast	1651	223	0	0
Ternopil oblast	250	61	0	0
Vinnytsya oblast	2513	391	0	3 618
Volyn oblast	945	177	0	0
Zakarpattia oblast	851	120	0	0
Zaporizhya oblast	3994	276	74	1639
Zhytomyr oblast	1362	0	0	0
The city of Kyiv	27,076	2489	12,320	869
The city of Sevastopol	2382	915	229	0
<b>Total:</b>	<b>195,379</b>	<b>33,449</b>	<b>19,749</b>	<b>57,558</b>

## Disposable Materials Distributed among the Representatives of Vulnerable Groups in 2008

Oblast/Region	Condoms	Syringes
Autonomous Republic of Crimea	267,866	272,491
Cherkasy oblast	411 983	500,304
Chernihiv oblast	58,169	5895
Chernivtsi oblast	210,454	167,938
Dnipropetrovsk oblast	862 584	1,052,767
Donetsk oblast	1,071,335	1,287,750
Ivano-Frankivsk oblast	161,659	120,989
Kharkiv oblast	667,097	80,128
Kherson oblast	584,953	228,084
Khmelnysky oblast	240 613	134,111
Kirovohrad oblast	43,491	235,472
Kyiv oblast	220,750	37,926
Luhansk oblast	338,428	238,862
Lviv oblast	350,021	23,794
Mykolayiv oblast	1,917,417	1,264,782
Odesa oblast	1 244 681	1,155,371
Poltava oblast	4, 497 460	106,780
Rivne oblast	121 888	94,097
Sumy oblast	139,154	264,649
Ternopil oblast	571 537	3724
Vinnysya oblast	179,811	265,344
Volyn oblast	94 133	82,029
Zakarpattia oblast	35,267	45,574
Zaporizhya oblast	102,228	76,375
Zhytomyr oblast	932	1452
The city of Kyiv	2,382,510	1,469,618
The city of Sevastopol	306,380	182,150
<b>Total:</b>	<b>16 425 214</b>	<b>9,398,456</b>

## Voluntary Counselling and Testing with Rapid Tests in 2008

Oblast/Region	IDU	Positive results	FSW	Positive results	MSM	Positive results	Prisoners	Positive results	Others (clients of FSW, people close to IDU, FSW and MSM)	Positive results
Autonomous Republic of Crimea	961	104	549	29	102	8	0	0	439	1
Cherkasy oblast	3547	490	779	108	12	0	30	0	357	0
Chernihiv oblast	68	10	0	0	0	0	0	0	25	0
Chernivtsi oblast	1274	24	411	4	11	0	0	0	92	0
Dnipropetrovsk oblast	7925	1562	1 731	395	162	5	874	90	4957	184
Donetsk oblast	9703	1265	1033	160	413	16	840	112	1463	72
Ivano-Frankivsk oblast	856	42	129	13	142	11	0	0	0	0
Kharkiv oblast	475	69	874	5	88	6	146	18	561	5
Kherson oblast	2304	148	583	27	151	3	0	0	289	7
Khmelnitsky oblast	1153	47	206	12	0	0	0	0	238	3
Kirovohrad oblast	969	93	85	6	71	8	0	0	0	0
Kyiv oblast	622	120	69	17	0	0	131	25	0	0
Luhansk oblast	840	48	227	7	0	0	0	0	0	0
Lviv oblast	60	8	1222	15	60	8	0	0	0	0
Mykolayiv oblast	5191	1073	2721	352	56	0	0	0	173	17
Odesa oblast	5879	815	2745	217	15	0	0	0	5330	91
Poltava oblast	405	45	52		0	0	250	0	431	8
Rivne oblast	847	74	257	28	0	0	0	0	0	0
Sumy oblast	868	65	182	2	0	0	0	0	0	0
Ternopil oblast	152	6	61	2	0	0	0	0	0	0
Vinnitsya oblast	1157	27	429	4	0	0	260	5	32	0
Volyn oblast	528	81	363	29	0	0	0	0	85	0
Zakarpattia oblast	367	2	30	0	0	0	0	0	0	0
Zaporizhya oblast	987	160	62		32	7	150	0	66	0
Zhytomyr oblast	40	3	0	0	0	0	0	0	0	0
City of Kyiv	7369	1564	1 142	3	104	2	0	0	7262	15
City of Sevastopol	998	102	566	57	27	5	0	0	40	9
<b>Total:</b>	<b>55,545</b>	<b>8047</b>	<b>16,508</b>	<b>1492</b>	<b>1446</b>	<b>79</b>	<b>2681</b>	<b>250</b>	<b>21,840</b>	<b>412</b>

## Screening Tests among Populations Vulnerable to HIV for Sexually Transmitted Infections (syphilis, gonorrhoea, chlamidiosis) in 2008

Oblast/Region	IDU	Positive results	FSW	Positive results	MSM	Positive results	Others (clients of FSW, people close to IDU, FSW and MSM)	Positive results
Autonomous Republic of Crimea	754	21	459	12	47	0	421	0
Cherkasy oblast	3062	32	834	21	12	0	434	0
Chernihiv oblast	1001	2	515	2	6	0	1	0
Chernivtsi oblast	58	0	0	0	0	0	15	0
Dnipropetrovsk oblast	6810	203	1755	339	217	2	1061	52
Donetsk oblast	7157	123	970	30	221	2	2544	117
Ivano-Frankivsk oblast	779	29	152	13	151	11	0	0
Kharkiv oblast	506	7	1004	36	112	2	510	0
Kherson oblast	2579	42	576	47	233	13	160	9
Khmelnysky oblast	852	18	183	17	0	0	156	1
Kirovohrad oblast	664	9	76	9	73	3	0	0
Kyiv oblast	232	3	51	3	0	0	5	0
Luhansk oblast	983	80	240	3	0	0	0	0
Lviv oblast	135	10	2028	59	100	0	0	0
Mykolayiv oblast	4212	242	3017	402	56	0	239	2
Odesa oblast	5237	107	2604	154	105	5	156	0
Poltava oblast	289	0	15	0	0	0	591	0
Rivne oblast	809	46	170	40	0	0	0	0
Sumy oblast	645	9	162	4	0	0	0	0
Ternopil oblast	115	0	61	4	0	0	0	0
Vinnysya oblast	1188	19	538	10	0	0	331	9
Volyn oblast	353	9	268	23	0	0	80	0
Zakarpattia oblast	233	0	30	0	0	0	0	0
Zaporizhya oblast	816	13	53	4	30	0	150	0
Zhytomyr oblast	36	0	0	0	0	0	0	0
City of Kyiv	5223	14	412	7	104	1	598	0
City of Sevastopol	928	104	650	91	54	1	56	43
<b>Total:</b>	<b>45,656</b>	<b>1142</b>	<b>16,823</b>	<b>1330</b>	<b>1521</b>	<b>40</b>	<b>7508</b>	<b>233</b>



## Treatment of Sexually Transmitted Infections Provided to the Representatives of HIV Vulnerable Populations in 2008

Oblast/Region	Number of STI treatment courses received by the representatives of vulnerable groups
Autonomous Republic of Crimea	454
Cherkasy oblast	31
Chernihiv oblast	67
Chernivtsi oblast	92
Dnipropetrovsk oblast	356
Donetsk oblast	72
Ivano-Frankivsk oblast	30
Kharkiv oblast	117
Kherson oblast	222
Khmelnysky oblast	72
Kirovohrad oblast	43
Kyiv oblast	85
Luhansk oblast	18
Lviv oblast	35
Mykolayiv oblast	128
Odesa oblast	361
Poltava oblast	45
Rivne oblast	108
Sumy oblast	22
Ternopil oblast	6
Vinnysya oblast	19
Volyn oblast	14
Zakarpattia oblast	165
Zaporizhya oblast	74
Zhytomyr oblast	16
City of Kyiv	300
City of Sevastopol	79
<b>Total:</b>	<b>3031</b>

## Care and Support for People Living with HIV/AIDS within the Global Fund (Round 1) Programme and SUNRISE Project

Oblast/Region	Total number of PLHA who received care and support services		Number of PLHA who had received ARV therapy by 1 January 2009		Number of PLHA who had received medical and social follow-up to ARV therapy by 1 January 2009	
	Children	Adults	Children	Adults	Children	Adults
Autonomous Republic of Crimea	176	2232	104	592	104	596
Cherkasy oblast	5	226	28	52	28	52
Chernihiv oblast	664	6256	26	26	26	26
Chernivtsi oblast	299	1398	0	0	0	0
Dnipropetrovsk oblast	882	5647	196	435	199	508
Donetsk oblast	989	5595	142	839	150	872
Ivano-Frankivsk oblast	7	469	7	94	7	119
Kharkiv oblast	269	2095	25	169	25	169
Kherson oblast	46	444	24	159	33	187
Khmelnysky oblast	275	1298	30	69	31	72
Kirovohrad oblast	78	844	9	22	10	25
Kyiv oblast	124	213	0	0	0	0
Luhansk oblast	5	657	0	235	0	235
Lviv oblast	23	277	0	0	0	0
Mykolayiv oblast	634	4104	67	838	67	877
National Programmes	656	5765	90	16	90	16
Odesa oblast	204	1553	102	505	102	519
Poltava oblast	77	156	26	202	26	202
Rivne oblast	39	299	0	0	0	0
Sumy oblast	2	189	9	67	11	102
Ternopil oblast	166	641	1	20	1	20
Vinnysya oblast	62	747	0	0	0	0
Volyn oblast	29	262	21	75	21	75
Zakarpattia oblast	0	54	0	0	0	0
Zaporizhya oblast	129	1220	27	114	27	149
Zhytomyr oblast	27	469	18	42	20	80
City of Kyiv	850	2702	79	1048	126	1093
City of Sevastopol	764	1296	18	205	21	222
<b>Total:</b>	<b>7481</b>	<b>47,108</b>	<b>1049</b>	<b>5824</b>	<b>1125</b>	<b>6216</b>

## Clients of Substitution Maintenance Therapy with Buprenorphine by 1 January 2009

Oblast/Region	Number of clients		Number of clients with HIV	Number of clients on ART	Number of clients preparing for ART
	Men	Women			
Autonomous Republic of Crimea	43	10	35	22	13
Cherkasy oblast	12	5	13	6	0
Chernihiv oblast	7	3	5	1	1
Chernivtsi oblast	14	10	12	5	4
Dnipropetrovsk oblast	30	20	37	10	2
Donetsk oblast	45	10	34	11	8
Ivano-Frankivsk oblast	24	6	15	10	4
Kherson oblast	43	9	21	7	1
Kirovohrad oblast	17	3	7	2	1
Kyiv oblast	19	3	12	3	0
Luhansk oblast	11	3	2	1	0
Lviv oblast	13	2	7	1	0
Mykolayiv oblast	36	14	40	16	2
Odesa oblast	39	10	37	11	3
Poltava oblast	24	8	19	8	7
Rivne oblast	7	3	8	1	0
Sumy oblast	19	1	6	2	2
Ternopil oblast	53	7	22	1	0
Vinnytsya oblast	27	5	10	3	0
Volyn oblast	24	5	7	0	0
Zakarpattia oblast	12	3	1	1	0
Zaporizhya oblast	39	8	27	8	13
Zhytomyr oblast	16	4	10	3	4
City of Kyiv	98	40	105	55	4
<b>Total:</b>	<b>672</b>	<b>192</b>	<b>492</b>	<b>188</b>	<b>69</b>

## Clients of Substitution Maintenance Therapy with Methadone by 1 January 2009

Oblast/Region	Кількість клієнтів		Number of clients with HIV	Number of clients on ART	Number of clients preparing for ART
	Чоловіки	Жінки			
Autonomous Republic of Crimea	95	30	34	8	19
Dnipropetrovsk oblast	87	26	54	1	0
Donetsk oblast	161	25	103	7	5
Kherson oblast	66	16	28	5	0
Mykolayiv oblast	230	47	114	8	5
Odesa oblast	75	14	46	17	4
Poltava oblast	178	31	56	1	17
Vinnytsya oblast	64	12	22	5	2
Zaporizhya oblast	33	5	18	3	15
City of Kyiv	102	41	65	18	12
<b>Total:</b>	<b>1091</b>	<b>247</b>	<b>540</b>	<b>73</b>	<b>79</b>

## Total Number of People Receiving ART with Medicines Provided by the Alliance-Ukraine as Humanitarian Aid (within Global Fund Round 1 Grant) by 1 October 2008

Oblast/Region/Organizations	Adults	Children	Total
Autonomous Republic of Crimea	588	43	631
Cherkasy oblast	16	28	44
Chernihiv oblast	11	23	34
Chernivtsi oblast	0	5	5
Dnipropetrovsk oblast	532	173	705
Donetsk oblast	865	94	959
Ivano-Frankivsk oblast	41	5	46
Kharkiv oblast	99	24	123
Kherson oblast	113	24	137
Khmelnysky oblast	41	27	68
Kirovohrad oblast	26	15	41
Kyiv oblast	120	41	161
Luhansk oblast	85	15	100
Lviv oblast	3	7	10
Mykolayiv oblast	500	59	559
Odesa oblast	599	85	684
Poltava oblast	92	26	118
Rivne oblast	12	1	13
Sumy oblast	28	9	37
Ternopil oblast	5	1	6
Vinnytsya oblast	104	17	121
Volyn oblast	43	18	61
Zakarpattia oblast	0	4	4
Zaporizhya oblast	123	16	139
Zhytomyr oblast	1	19	20
City of Kyiv	585	77	662
City of Sevastopol	136	16	152
Okhmatdyt Clinic	9	39	48
Institute of Epidemiology and Infectious Diseases of the Academy of Medical Sciences of Ukraine	382	0	382
<b>Total:</b>	<b>5159</b>	<b>911</b>	<b>6070</b>



## Number of HIV-positive Pregnant Women and Children Born to HIV-positive Mothers Who Received Prevention of Mother-to-child Transmission with Medicines Procured with the Global Fund Round 1 Grant by 1 October 2008\*

Oblast/Region	HIV-positive pregnant women who have received and continue to receive prevention of mother-to-child transmission	Children born to HIV-positive mothers
Autonomous Republic of Crimea	474	521
Cherkasy oblast	263	241
Chernihiv oblast	191	171
Chernivtsi oblast	36	44
Dnipropetrovsk oblast	1618	1592
Donetsk oblast	1776	1705
Ivano-Frankivsk oblast	59	69
Kharkiv oblast	248	255
Kherson oblast	251	248
Khmelnysky oblast	127	123
Kirovohrad oblast	279	287
Kyiv oblast	423	400
Luhansk oblast	275	284
Lviv oblast	140	85
Mykolayiv oblast	676	669
Odesa oblast	1052	897
Poltava oblast	228	216
Rivne oblast	76	64
Sumy oblast	73	70
Ternopil oblast	32	38
Vinnytsya oblast	159	136
Volyn oblast	118	119
Zakarpattia oblast	39	36
Zaporizhya oblast	209	217
Zhytomyr oblast	161	175
City of Kyiv	759	889
City of Sevastopol	133	130
<b>Total:</b>	<b>9875</b>	<b>9681</b>

\* Cumulative from October 2004

## Annex 3. List of Organizations – Grant Recipients and Implementing Partners of Alliance-Ukraine Projects, 2008

Table 1. Consolidated Data on International Grant Agreements and International Programme Contracts (including Procurement Contracts) of ICF “International HIV/AIDS Alliance in Ukraine” in 2008 \*

	Implementing Partner	Funding Programme (**)	Project Status	Region	Signed Commitments, US\$ **	Funded, US\$
1	American International Health Alliance	GFA	International	All-Ukrainian	0,00	299 829,00
3	Project Hope Representative Office	GFA	International	All-Ukrainian	0,00	58 800,00
4	International HIV/AIDS Alliance (Great Britain)	GFA, NW	International	International	307 082,03	
5	Triesco	GFA	International	All-Ukrainian	0,00	56 000,00
6	Thai Nippon Rubber Industry	GFA	International	All-Ukrainian	59 850,00	59 850,00
7	Rusan Pharma	GFA	International	All-Ukrainian	0,00	626 246,00
8	International Dispensary Association. HIV/AIDS Division (IDA)	NW	International	All-Ukrainian	851 550,94	518 342,89
9	Warnex Analytical Services Inc.	GFA	International	All-Ukrainian	8 995,20	
10	Vitma Labs Ltd.	GFA	International	All-Ukrainian	2 290,80	
11	Abbott GmbH & Co.KG	GFA	International	All-Ukrainian	505 585,00	505 585,00
12	Rusan Pharma Ltd	GFA	International	All-Ukrainian	0,00	70 290,00
13	BD International	GFA	International	All-Ukrainian	41 132,00	41 132,00
14	International Dispensary Association. HIV/AIDS Division (IDA)	GFA	International	All-Ukrainian	2 074 528,17	400 742,00
<b>Total:</b>					<b>3 851 014,14</b>	<b>2 636 816,89</b>

\* Funding may be based on the contracts signed earlier than 2008

\*\* Funding Programmes

GFA - direct grant and contract of the Alliance-Ukraine under the Global Fund programme

NW - direct grant and contract of the Alliance-Ukraine from the Network of PLWH under the Global Fund programmes

Table 2.

**Consolidated Data on Grant Agreements and Programme Contracts  
of the ICF “International HIV/AIDS Alliance in Ukraine” in 2008**

<b>№</b>	<b>Implementing Partner</b>	<b>Region</b>	<b>Funding programme (*)</b>	<b>Number of Funded Projects</b>	<b>Signed commitments, UAH **</b>	<b>Funded, UAH</b>
1	Bakhchisaray Charitable Foundation "Centre for Resocialization of Drug Addicted Young People "Your Victory"	AR Crimea	GFA	4	176 399,62	80 991,41
2	Charitable Fund "Hope and Salvation"	AR Crimea	GFA, US, GFN	11	1 286 972,99	1 486 974,31
3	NGO Club "Modus"	AR Crimea	GFA	4	207 507,04	169 465,04
4	NGO "Phoenix"	AR Crimea	GFA	4	260 905,84	161 183,99
5	Women's NGO "Club for Family Creativity"	AR Crimea	US	1		99 738,00
6	Communal Enterprise 'Sevastopol City Mental Hospital'	AR Crimea	GFA	1	32 825,00	32 825,00
7	Crimean Oblast Branch All-Ukrainian Charitable Organization «All-Ukrainian Network of People, Living with HIV/AIDS»	AR Crimea	GFN	1		59 902,24
8	Yalta City Hospital № 1	AR Crimea	GFA	1	23 519,00	23 519,00
9	Sevastopol City Charitable Organization "Haven Plus"	AR Crimea	US, GFN	3	70 005,60	278 315,65
10	Sevastopol City Infectious Diseases Hospital	AR Crimea	GFA	1	32 825,00	32 825,00
11	Sevastopol City Organization "Youth Centre of Women's Initiatives"	AR Crimea	GFA, US	11	1 387 463,59	1 251 092,46
12	Centre for Resocialization of Drug Addicted Young People "Your Victory"	AR Crimea	GFA	5	251 489,57	250 634,05
13	Yalta City Charitable Organization "Coalition of HIV-servicing Organizations"	AR Crimea	GFA	1	16 917,82	16 917,82
14	Charitable Foundation "Freedom-1"	Vinnitsia oblast	GFN	1		2 378,05
15	Vinnitsia Branch International Charitable Foundation for the Human Development	Vinnitsia oblast	GFA	11	739 259,62	598 845,87
16	Vinnitsia Oblast Charitable Foundation "Positive"	Vinnitsia oblast	GFN	1		27 725,25
17	Vinnitsia Oblast Community Congress "Stalist"	Vinnitsia oblast	GFA	6	982 323,57	755 791,61
18	Tomashpil District Territorial Medical Association	Vinnitsia oblast	GFA	1	31 943,00	31 943,00

<b>№</b>	<b>Implementing Partner</b>	<b>Region</b>	<b>Funding programme (*)</b>	<b>Number of Funded Projects</b>	<b>Signed commitments, UAH **</b>	<b>Funded, UAH</b>
19	Volyn Oblast Charitable Foundation "Chance"	Volyn oblast	GFA, GFN	9	400 927,31	402 677,00
20	Volyn Oblast Narcological Clinic	Volyn oblast	GFA	1	32 825,00	32 825,00
21	Charitable Organization "Alex"	Dnipropetrovsk oblast	GFN	1	140 000,00	88 895,06
22	Charitable Organization "With Hope"	Dnipropetrovsk oblast	GFA	5	65 101,82	73 353,25
23	Charitable Organization "HELP"	Dnipropetrovsk oblast	GFA, GFN	8	291 358,33	597 396,68
24	Charitable Foundation Rehabilitation Centre for Drug Addicted "Virtus"	Dnipropetrovsk oblast	GFA	6	776 717,75	565 723,02
25	Charitable Foundation "Public Health"	Dnipropetrovsk oblast	GFA, US	10	1 175 538,99	840 772,11
26	Charitable Foundation "Dopomoga"	Dnipropetrovsk oblast	GFA	3	156 074,00	55 429,00
27	NGO "Phoenix"	Dnipropetrovsk oblast	LS, GFA, US	11	267 647,30	319 970,11
28	NGO "Family Support Centre"	Dnipropetrovsk oblast	GFA	3	180 386,26	66 086,00
29	NGO Club "Victoria"	Dnipropetrovsk oblast	GFA	4	108 301,52	240 017,51
30	NGO Club "Impulse"	Dnipropetrovsk oblast	GFA, GFN	3	132 414,41	163 380,57
31	NGO "Nikopol Centre for Spiritual, Social and Psychological Rehabilitation "Open Doors"	Dnipropetrovsk oblast	GFA, GFN	9	756 922,64	733 669,27
32	NGO Club "Impulse"	Dnipropetrovsk oblast	GFA, US	8	738 277,81	570 632,59
33	Donetsk Medical Institution "Phtisiatriya"	Dnipropetrovsk oblast	GFA	1	31 716,40	31 716,40
34	Zhovty Vody City Charitable Foundation "Promin"	Dnipropetrovsk oblast	GFA	4	181 820,18	73 571,94
35	Communal Enterprise Ordzhonikidze Central City Hospital	Dnipropetrovsk oblast	GFA	1	32 732,00	32 732,00
36	Kryviy Rih City Charitable Organization "Our Future"	Dnipropetrovsk oblast	GFA, GFN	9	471 641,73	442 859,63
37	Kryviy Rih City Branch All-Ukrainian Charitable Organization «All-Ukrainian Network of People, Living with HIV/AIDS»	Dnipropetrovsk oblast	GFA, GFN	8	273 075,21	430 388,84



No	Implementing Partner	Region	Funding programme (*)	Number of Funded Projects	Signed commitments, UAH **	Funded, UAH
38	City Community Centre of Drug Users "Future without AIDS"	Dnipropetrovsk oblast	GFA	6	204 956,84	156 916,99
39	Ordzhonikidze City Charitable Organization "Victoria"	Dnipropetrovsk oblast	GFA	4	4 500,00	85 920,93
40	Pavlograd City Charitable Organization "Oberih"	Dnipropetrovsk oblast	GFN	1		24 738,83
41	Specialized Medical and Sanitary Unit №9 of Dnipropetrovsk oblast	Dnipropetrovsk oblast	GFA	1	31 354,00	31 354,00
42	Ternivka Central City Hospital	Dnipropetrovsk oblast	GFA	1	32 825,00	32 825,00
43	Charitable Organization Club "Svitnok"	Donetsk oblast	GFA, US, GFN	7	669 903,51	614 561,33
44	Charitable Organization Club "Future"	Donetsk oblast	OSI, GFN	2	21 897,10	17 927,97
45	Charitable Organization Club "Your Choice"	Donetsk oblast	GFA, GFN	4	57 508,50	101 909,62
46	Charitable Foundation "Health of Nation"	Donetsk oblast	GFA	6	417 031,52	239 068,00
47	Charitable Foundation "Caritas-Donetsk"	Donetsk oblast	GFA	1	93 830,86	93 830,86
48	NGO "Mariupol Youth Union"	Donetsk oblast	GFA	6	419 878,24	389 530,92
49	NGO "Line of Life"	Donetsk oblast	GFA, US, GFN	11	918 378,97	913 699,41
50	NGO "Donbass without Drugs"	Donetsk oblast	GFA	4	607 383,28	568 122,76
51	NGO "Fund Stimul"	Donetsk oblast	GFA	6	488 080,16	288 191,42
52	NGO Amicus Union	Donetsk oblast	GFA, US, GFN	12	1 140 003,95	1 006 859,62
53	NGO "Peremoha"	Donetsk oblast	GFN	1	38 007,30	14 018,20
54	Donetsk City Youth NGO "Development. Initiative. Partnership"	Donetsk oblast	GFA	4	227 070,31	93 307,74
55	Donetsk Oblast NGO "Peremoha"	Donetsk oblast	GFN	1		48 233,47
56	Donetsk Oblast Association to Support HIV Infected People	Donetsk oblast	GFA, US, GFN	9	646 868,70	1 006 563,05
57	Donetsk Oblast Charitable Foundation "Oberih"	Donetsk oblast	GFA, US, GFN	10	1 155 153,47	998 908,65
58	Donetsk Oblast Charitable Foundation "Promin"	Donetsk oblast	GFA	5	281 066,42	157 562,28
59	Kostiantynivka City NGO "Paritet"	Donetsk oblast	GFA	1	20 900,82	20 900,82

No	Implementing Partner	Region	Funding programme (*)	Number of Funded Projects	Signed commitments, UAH **	Funded, UAH
60	Kramatorsk City Charitable Organization "New Day"	Donetsk oblast	GFA, GFN	6	190 131,80	132 520,77
61	Mariupol City Association for Prevention of AIDS and Support to People, Living with HIV "Choice"	Donetsk oblast	GFN	2	69 999,98	112 949,85
62	Sloviansk City NGO "Our Help"	Donetsk oblast	GFA, GFN	7	708 527,23	854 833,15
63	Zhytomyr Oblast NGO "Perspektiva"	Zhytomyr oblast	GFA	5	275 111,52	146 009,51
64	Zhytomyr Oblast Branch All-Ukrainian Charitable Organization «All-Ukrainian Network of People, Living with HIV/AIDS»	Zhytomyr oblast	GFN	2	21 999,92	17 600,28
65	Zhytomyr Charitable Foundation to Respond to Socially Dangerous Diseases and AIDS	Zhytomyr oblast	GFN	1		85 289,08
66	Zakarpattia Oblast Charitable Foundation to Support Programmes against Alcohol, Drugs, Tobacco Use and Prevent Substance Dependence and AIDS	Zakarpattia oblast	GFA	1	36 935,02	24 313,64
67	Zakarpattia Oblast Charitable Foundation "Zakarpattia against AIDS"	Zakarpattia oblast	GFA	1	51 623,00	51 623,00
68	Zakarpattia Oblast Charitable Foundation "For Life"	Zakarpattia oblast	GFA	3	175 795,78	61 858,66
69	Zakarpattia Oblast Narcological Clinic	Zakarpattia oblast	GFA	1	34 591,00	34 591,00
70	NGO "Rada Zhyttia"	Zakarpattia oblast	GFA	2	119 506,25	119 506,26
71	Charitable Organization «Charitable Foundation "Life is Going On"	Zaporizhja oblast	GFA, GFN	8	141 952,15	176 663,40
72	Charitable Foundation "Spodivannia"	Zaporizhja oblast	GFA, GFN	9	468 640,48	584 063,08
73	Zaporizhja Oblast Organization of the Red Cross Society of Ukraine	Zaporizhja oblast	GFA	2	116 538,88	93 514,38
74	Zaporizhja Oblast Branch All-Ukrainian Charitable Organization «All-Ukrainian Network of People, Living with HIV/AIDS»	Zaporizhja oblast	GFA, GFN	6	203 286,20	258 267,47
75	Charitable Foundation "Solidarity"	Ivano-Frankivsk oblast	GFA, GFN	9	868 771,28	871 687,37
76	Ivano-Frankivsk Oblast Narcological Clinic	Ivano-Frankivsk oblast	GFA	1	32 825,00	32 825,00
77	Agency "Ukraina", LLC	Kyiv city	GFA	3	102 333,00	102 333,00

No	Implementing Partner	Region	Funding programme (*)	Number of Funded Projects	Signed commitments, UAH **	Funded, UAH
78	Charitable Organization "Fund for Prevention of Substance Dependence and AIDS"	Kyiv city	GFA	3	547 104,67	1 108 002,30
79	Charitable Foundation "Drop-in Centre"	Kyiv city	GFA	8	1 000 797,99	758 725,07
80	Charitable Foundation for Youth Participation	Kyiv city	GFA	1		212 789,96
81	All-Ukrainian Charitable Organization «All-Ukrainian Network of People, Living with HIV/AIDS» **	Kyiv city	GFA	3	2 805 208,29	3 610 646,45
82	All-Ukrainian Charitable Organization "Time for Life Plus"	Kyiv city	GFA, GFN	3	259 939,78	877 266,46
83	All-Ukrainian Charitable Organization "Movement to Support Former Prisoners in Ukraine "Podolannia""	Kyiv city	GFA	1	178 832,14	83 789,68
84	All-Ukrainian Charitable Organization "CONVICTUS UKRAINE"	Kyiv city	GFA	4	442 955,55	201 587,79
85	All-Ukrainian Pharmacy Association	Kyiv city	GFA	1	86 999,00	46 979,40
86	All-Ukrainian Charitable Organization «All-Ukrainian Harm Reduction Association"	Kyiv city	GFA	4	408 861,85	413 166,51
87	All-Ukrainian Charitable Organization "Spilnota"	Kyiv city	GFA	2	200 000,00	107 868,88
88	All-Ukrainian Charitable Foundation "Coalition of HIV-service Organizations"	Kyiv city	GFA	1	100 966,26	100 966,26
89	NGO "Health through Education"	Kyiv city	GFA	1		840 508,60
90	NGO "Institute of Dependency"	Kyiv city	GFA	1	161 700,64	124 373,56
91	NGO «Gay Alliance»	Kyiv city	GFA	7	1 149 340,90	787 153,74
92	NGO "Institute of Dependency"	Kyiv city	GFA	1	32 900,00	32 900,00
93	NGO Youth Centre on the Issues of Social Sphere Transformations "SOCIUM-XXI"	Kyiv city	LS, GFA	6	346 909,84	511 514,35
94	NGO "Childhood without AIDS"	Kyiv city	GFA, US, GFN	4	754 969,05	1 062 003,93
95	Kyiv City Organization of the Red Cross Society of Ukraine	Kyiv city	GFA	8	108 543,61	97 239,18
96	Kyiv Branch of International Charitable Organization "Rehabilitation Centre 'Steps'"	Kyiv city	GFA, US	5	279 674,33	616 614,80

No	Implementing Partner	Region	Funding programme (*)	Number of Funded Projects	Signed commitments, UAH **	Funded, UAH
97	Kyiv City Branch of All-Ukrainian Charitable Organization «All-Ukrainian Network of People, Living with HIV/AIDS»	Kyiv city	GFN	2	44 560,62	514 990,29
98	NGO Club "Eney"	Kyiv city	GFA	6	2 148 807,22	1 633 735,39
99	International Charitable Foundation "Vertical"	Kyiv city	GFA, GFN	9	856 535,43	695 801,71
100	National Committee of the Red Cross Society of Ukraine	Kyiv city	GFN	1		339 289,80
101	National M. Dragomanov Pedagogical University	Kyiv city	GFA	1		188 930,80
102	Kyiv International Institute of Sociology, LLC	Kyiv city	GFA	4	1 311 442,79	665 266,20
103	Ukrainian Institute on Public Health Policy	Kyiv city	GFA	4	1 031 533,33	1 724 532,81
104	Ukrainian O. Yaremenko Institute for Social Research	Kyiv city	GFA	2	174 274,60	84 117,60
105	Ukrainian Medical and Monitoring Centre on Alcohol and Drugs at the MOH of Ukraine	Kyiv city	GFA	1	353 563,60	240 152,00
106	Ukrainian AIDS Prevention Centre at the MOH of Ukraine	Kyiv city	GFA	5	2 647 512,94	3 513 088,54
107	Centre for Psychosocial Rehabilitation of Substance Dependent Youth "Step by Step"	Kyiv city	GFA	6	314 911,92	651 452,80
108	Centre for Social and Political Research "SOCIS"	Kyiv city	GFA	2	672 788,16	672 788,16
109	Charitable Organization "Alpha Life"	Kyiv oblast	GFA, GFN	10	626 903,51	647 722,04
110	Brovary City Charitable Foundation "Peremoha"	Kyiv oblast	GFN	1		94 500,68
111	Kaniv City Charitable Organization "From Heart to Heart"	Kyiv oblast	US	1		58 035,04
112	NGO «Ukrainian Institute of Addictions»	Kyiv oblast	GFA	1	15 150,80	15 150,80
113	Kirovograd Oblast Branch All-Ukrainian Charitable Organization "All-Ukrainian Network of People Living with HIV/AIDS"	Kirovograd oblast	GFA, GFN	8	208 457,70	306 887,18
114	Oblast Charitable Foundation "Return to Life"	Kirovograd oblast	GFA	7	671 712,90	659 610,28
115	Luhansk Charitable Foundation "Anti-AIDS"	Luhansk oblast	GFA	5	421 721,08	265 565,34



No	Implementing Partner	Region	Funding programme (*)	Number of Funded Projects	Signed commitments, UAH **	Funded, UAH
116	Luhansk Charity Foundation "Step to the Future"	Luhansk oblast	GFA, GFN	10	812 326,66	667 388,11
117	Luhansk Oblast Narcological Clinic	Luhansk oblast	GFA	1	33 583,85	33 583,85
118	Stakhaniv Oblast Mental Hospital	Luhansk oblast	GFA	1	24 801,80	24 801,80
119	Charitable Organization "Hospital named after Metropolitan Andriy Sheptitsky"	Lviv oblast	GFN	1		50 000,00
120	Charitable Foundation "Avante"	Lviv oblast	GFA	2	75 088,24	75 088,24
121	Charitable Foundation SALIUS	Lviv oblast	GFA	8	598 691,17	449 331,33
122	Lviv Regional TB and Pulmonology Clinical and Diagnostic Centre	Lviv oblast	GFA	1	22 175,00	22 175,00
123	Lviv City NGO "Centre for Spiritual and Psychological Support and Mutual Help "Doroga"	Lviv oblast	GFA, GFN	6	108 841,00	160 445,81
124	Lviv Oblast AIDS Prevention Centre	Lviv oblast	GFA	2	83 238,00	83 238,00
125	Charitable Foundation "Nazareth"	Lviv oblast	GFA	1	64 019,46	64 019,46
126	Striy Central City Hospital	Lviv oblast	GFA	1	8 373,83	8 373,83
127	Charitable Foundation "Centre for Social and Psychological Information "All Together"	Lviv oblast	GFA	1	38 289,40	38 289,40
128	Mykolayiv Association of HIV Infected People "Time for Life"	Mykolayiv oblast	GFA, US, GFN	8	720 255,95	900 138,94
129	Mykolayiv Association of Gays, Lesbians and Bisexuals "LiGA"	Mykolayiv oblast	GFA, US	3	110 953,24	78 009,84
130	Mykolayiv Oblast Branch All-Ukrainian Charitable Organization «All-Ukrainian Network of People, Living with HIV/AIDS »	Mykolayiv oblast	GFA, GFN	2	65 805,48	223 265,47
131	Mykolayiv City Charitable Foundation "Orchid"	Mykolayiv oblast	GFA	1	15 569,82	15 569,82
132	Mykolayiv City Charitable Foundation "Vykhid"	Mykolayiv oblast	GFA	9	814 587,09	655 006,91
133	Mykolayiv City Charitable Foundation "Unitus"	Mykolayiv oblast	GFA, US, GFN	10	1 546 383,84	1 503 044,97
134	Mykolayiv Oblast Charitable Foundation "New Century"	Mykolayiv oblast	GFA, US	12	1 978 898,46	1 858 635,50
135	Mykolayiv Oblast Charitable Foundation "Development and Assistance"	Mykolayiv oblast	GFA, US, GFN	1		2 580,00

No	Implementing Partner	Region	Funding programme (*)	Number of Funded Projects	Signed commitments, UAH **	Funded, UAH
136	Mykolayiv Oblast Charitable Foundation to Fight TB "Vita Light"	Mykolayiv oblast	GFA, GFN	2	43 382,33	52 549,59
137	Mykolayiv Oblast Civil Movement of Youth "Penitentiary Initiative"	Mykolayiv oblast	GFA, GFN	7	289 965,00	373 606,72
138	Charitable Organization "Hand of Help"	Odesa oblast	GFN	1		48 091,57
139	Charitable Organization "Christian Rehabilitation Centre "Blagodot"	Odesa oblast	GFA	7	274 244,43	209 535,89
140	Charitable Organization "Association of NGOs of Odesa oblast "Together for Life"	Odesa oblast	GFA, US	4	150 033,21	195 027,92
141	Charitable Foundation "Veselka"	Odesa oblast	GFA	7	529 936,12	362 576,76
142	NGO "Our Children"	Odesa oblast	LS, GFA	3	117 145,25	294 829,21
143	NGO "Alternative"	Odesa oblast	GFN	2	139 999,98	298 178,16
144	NGO "Era of Mercy"	Odesa oblast	GFN	2	140 405,00	119 739,96
145	NGO Youth Development Centre	Odesa oblast	GFA, US	9	958 206,18	755 552,09
146	Civil Society Movement "Faith. Hope. Love"	Odesa oblast	GFA, US, GFN	9	953 113,84	1 155 070,85
147	Youth Civil Society Movement "Partner"	Odesa oblast	GFA	8	453 157,20	294 386,72
148	International Charitable Organization "Rehabilitation Centre "Steps"	Odesa oblast	GFA, US	3	115 800,52	363 381,41
149	Odesa Charitable Foundation "The Way Home"	Odesa oblast	GFA, US	16	3 373 620,65	3 103 838,96
150	South-Ukrainian Centre "Healthy Woman. Longevity"	Odesa oblast	GFN	1		92 371,03
151	Yuzhny City Charitable Foundation «Time of Youth»	Odesa oblast	GFA	1	25 859,88	25 859,88
152	Charitable Association to Help People, Living with HIV and AIDS "Light of Hope"	Poltava oblast	GFA, GFN	9	702 565,09	934 245,65
153	Charitable Foundation "Public Health"	Poltava oblast	GFA	6	768 298,00	569 425,40
154	NGO Club "Kviten"	Poltava oblast	GFN	1		107 959,81
155	International Charitable Organization "Federation "Club House"	Poltava oblast	GFA	1	196 354,40	196 354,40

No	Implementing Partner	Region	Funding programme (*)	Number of Funded Projects	Signed commitments, UAH **	Funded, UAH
156	Rivne Oblast Charitable Foundation "Future without AIDS"	Rivne oblast	GFA, GFN	8	701 213,05	539 181,57
157	Charitable Organization "Choice"	Sumy oblast	GFN	2	22 000,00	110 450,28
158	Charitable Foundation "Step to Meet"	Sumy oblast	GFA	7	667 930,70	532 392,80
159	Communal Enterprise of Sumy "Oblast Council Oblast Narcological Clinic"	Sumy oblast	GFA	1	32 818,47	32 818,47
160	Sumy Oblast Youth NGO "Club for Resocialization of Substance Dependent People "CHANCE"	Sumy oblast	GFA	3	114 831,90	102 419,30
161	Sumy Oblast Branch All-Ukrainian Charitable Organization "All-Ukrainian Network of People, Living with HIV/AIDS"	Sumy oblast	GFN	1		2 537,12
162	NGO Centre for Spiritual and Psychological Support "Dzherela"	Ternopil oblast	GFA, GFN	6	260 776,73	154 483,10
163	Institute of Dermatology and Venereology of the Academy of Medical Sciences of Ukraine	Kharkiv oblast	GFA	2	318 412,00	279 314,60
164	Kharkiv City Organization "Hippocrates Way"	Kharkiv oblast	GFA	1	22 891,82	22 891,82
165	Kharkiv Oblast Branch All-Ukrainian Charitable Organization "All-Ukrainian Network of People, Living with HIV/AIDS"	Kharkiv oblast	GFA, GFN	5	195 189,86	334 053,50
166	Kharkiv City Charitable Foundation «Hope Exists»	Kharkiv oblast	GFA	4	166 358,59	72 333,67
167	Kharkiv City Charitable Foundation «Blago»	Kharkiv oblast	GFA	6	1 116 755,98	729 548,13
168	NGO «For Equal Rights»	Kherson oblast	GFA	6	188 373,76	113 342,63
169	Kakhovka City Branch All-Ukrainian Charitable Organization «All-Ukrainian Network of People, Living with HIV/AIDS»	Kherson oblast	GFA, GFN	7	60 361,10	96 167,45
170	Kherson City NGO "Association 21-st Century"	Kherson oblast	GFN	2	69 999,96	188 298,92
171	Kherson City NGO Club "Probudzhennia"	Kherson oblast	GFA	1		80 510,44
172	Kherson Oblast NGO Centre for Adaptation "Choice of Life"	Kherson oblast	GFA	1	73 956,57	52 206,05
173	Kherson Oblast Charitable Foundation "Mongoose"	Kherson oblast	GFA, US	14	1 755 358,36	1 527 550,88

No	Implementing Partner	Region	Funding programme (*)	Number of Funded Projects	Signed commitments, UAH **	Funded, UAH
174	Kherson Oblast Narcological Clinic	Kherson oblast	GFA	1	34 110,00	34 110,00
175	Association to Support the Solution of Drug Addiction Problems "Victoria"	Khmelnitsky oblast	GFA	8	940 627,65	799 148,98
176	Khmelnitsky Oblast Branch All-Ukrainian Charitable Organization «All-Ukrainian Network of People, Living with HIV/AIDS»	Khmelnitsky oblast	GFN	2	38 997,86	147 703,14
177	Charitable Foundation "VAM"	Cherkasy oblast	GFA	7	508 120,24	291 297,90
178	Charitable Foundation "Volia"	Cherkasy oblast	GFA	3	283 353,40	102 693,30
179	Charitable Foundation "Insight"	Cherkasy oblast	GFA, US	10	883 441,63	782 574,96
180	Cherkasy NGO «Gay Alliance»	Cherkasy oblast	GFA	4	137 364,44	63 627,49
181	NGO Smila City Information and Counselling Centre to Protect Family and Personality "Dialogue"	Cherkasy oblast	OSI, GFA	9	206 629,76	191 897,40
182	Uman Charitable Foundation "Probudzhennia"	Cherkasy oblast	GFA	5	168 484,10	331 868,82
183	Cherkasy Charitable Organization of PHL "From Heart to Heart"	Cherkasy oblast	GFA	6	494 562,53	276 198,21
184	Cherkasy Oblast Branch of All-Ukrainian Charitable Organization "All-Ukrainian Network of People, Living with HIV/AIDS"	Cherkasy oblast	GFN	2	39 000,00	419 233,90
185	Cherkasy Regional Charitable Foundation "With Love to Children"	Cherkasy oblast	GFA	4	112 314,74	49 044,73
186	Charitable Foundation "New Family"	Chernivtsi oblast	GFA	6	640 054,64	478 553,30
187	Chernivtsi Oblast AIDS Prevention Centre	Chernivtsi oblast	GFA	1	50 500,00	50 500,00
188	Chernivtsi Oblast Branch of All-Ukrainian Charitable Organization "All-Ukrainian Network of People, Living with HIV/AIDS"	Chernivtsi oblast	GFN	1		25 730,00
189	Chernivtsi City Charitable Foundation "Life for the Sake of Life"	Chernivtsi oblast	GFN	1		2 600,00



No	Implementing Partner	Region	Funding programme (*)	Number of Funded Projects	Signed commitments, UAH **	Funded, UAH
190	Chernivtsi Oblast Narcological Clinic	Chernivtsi oblast	GFA	1	32 715,00	32 715,00
191	Centre for Resocialization of Dependent People "VEDIS"	Chernihiv oblast	GFA	4	199 677,54	85 372,63
192	NGO Rehabilitatio Centre "Steps"	Chernihiv oblast	GFA	1		59 838,26
193	Chernihiv Communal Enterprise Oblast AIDS Prevention Centre	Chernihiv oblast	GFA	1	50 352,00	50 352,00
194	Chernihiv City Branch of All-Ukrainian Charitable Organization "All-Ukrainian Network of People, Living with HIV/AIDS"	Chernihiv oblast	GFA, GFN	4	92 546,66	164 888,22
<b>Total:</b>				<b>822</b>	<b>70 208 634,25</b>	<b>72 230 296,12</b>

\* Funding Programmes

GFA	direct grant to the Alliance-Ukraine under the Global Fund programmes
GFN	indirect grant to the Alliance-Ukraine under the Global Fund Programme
US	direct grant to the Alliance-Ukraine under the programmes of the United States Agency for International Development
LS	direct grant to the Alliance-Ukraine under the programmes of Levi Strauss Foundation
OSI	direct grant to the Alliance-Ukraine under the programmes of Open Society Institute;

\*\* The amounts do not include funds for sub-granting activiteis

Table 3

**Consolidated Data on Programme Contracts of the ICF “International HIV/AIDS Alliance in Ukraine” Related to the Procurement, Storage and Distribution of Medicines in 2008**

	Implementing Partner	Funding Programme (*)	Project Status	Region	Signed Commitments, UAH	Funded, UAH
1	State Enterprise "Institute of Ecohygiene and Toxicology"	GFA	National	All-Ukrainian	3 720,00	3 720,00
2	Limited Liability Company "InterLabService-Ukraine"	NW, GFA	National	All-Ukrainian	251 754,60	201 010,92
3	Private Enterprise "Delta Medical"	NW, GFA	National	All-Ukrainian	558 457,20	558 457,20
4	LTD SUEP in the form of Limited Liability Company "Optima Pharm"	NW, GFA	National	All-Ukrainian	581 714,12	581 714,12
5	Limited Liability Company "Biocon Pharmacy"	GFA	National	All-Ukrainian	171 225,00	171 225,00
6	Limited Liability Company "Trade House Auto"	GFA	National	All-Ukrainian	930 028,00	930 028,02
7	State Joint Stock Company "Liky Ukraine"	GFA	National	All-Ukrainian	9 255 809,40	2 146 574,41
8	State Enterprise "Ukrmedpostach"	NW, GFA	National	All-Ukrainian	1 346 878,78	1 306 616,71
9	Closed Joint Stock Company "Alba Ukraine"	GFA	National	All-Ukrainian	264 044,16	264 044,16
		NW, GFA	National	All-Ukrainian	12 288,86	12 288,86
10	Limited Liability Company "Postal and Freight Courier"	GFA	National	All-Ukrainian	216 915,00	216 915,00
11	State Enterprise "BioLine Ukraine"	GFA	National	All-Ukrainian	1 866,00	1 866,00
		NW, GFA	National	All-Ukrainian	3 168,00	3 168,00
12	IFC Limited Liability Company "Ridan Engineering"	GFA	National	All-Ukrainian	44 121,14	80 584,53
		GFA			30 769,20	12 370,61
		JSI	National	All-Ukrainian		16 303,98
13	National Complex "Expocentre of Ukraine"	GFA	National	All-Ukrainian	31 731,20	31 731,20
14	Limited Liability Company "Latex Kiy"	GFA	National	All-Ukrainian	2 035 200,00	1 775 384,64
15	Limited Liability Company "Diaveritas"	NW, GFA	National	All-Ukrainian	127 080,00	127 080,00
16	Limited Liability Company "InterMed"	NW, GFA	National	All-Ukrainian	12 360,00	12 360,00
17	Limited Liability Company "Biomedinvest"	GFA	National	All-Ukrainian	254 510,00	254 510,00
		GFA	National	All-Ukrainian	64 120,00	64 120,00
		NW, GFA	National	All-Ukrainian	3 120,00	3 120,00
18	Limited Liability Company "VVS, Ltd."	GFA	National	All-Ukrainian	371 259,04	371 259,04
		NW, GFA	National	All-Ukrainian	81 127,73	81 127,73
19	Limited Liability Company "Medcom Ukraine"	GFA	National	All-Ukrainian	353 500,00	176 720,00

	Implementing Partner	Funding Programme (*)	Project Status	Region	Signed Commitments, UAH	Funded, UAH
20	Limited Liability Company "National Automobile Company"	GFA	National	All-Ukrainian		504 000,00
21	Limited Liability Company "Factor-Med"	GFA	National	All-Ukrainian	84 956,20	84 956,20
22	Limited Liability Company "Pharmasco"	GFA	National	All-Ukrainian	1 463 962,50	1 005 348,75
		LS	National	All-Ukrainian	115 897,50	115 897,50
23	Limited Liability Company "Cente-Lab"	NW, GFA	National	All-Ukrainian	121 776,00	60 888,00
24	Limited Liability Company "Dopomoga-1"	GFA	National	All-Ukrainian	708 641,25	708 641,25
25	Limited Liability Company "Medlife"	GFA	National	All-Ukrainian	340 761,60	170 380,80
26	Limited Liability Company "Pharmacia-2000"	GFA	National	All-Ukrainian	2 471 568,52	1 235 784,26
27	Subsidiary Enterprise "Spectar-Ukraine"	NW, GFA	National	All-Ukrainian	2 962,80	2 962,80
		GFA	National	All-Ukrainian	26 735,87	26 735,87
28	Private Entrepreneur "Smerchinsky"	GFA	National	All-Ukrainian	5 778,00	5 778,00
		NW, GFA	National	All-Ukrainian	8 973,00	8 973,00
29	Limited Liability Company "TRI-Central Pharmacy Storehouse"	GFA	National	All-Ukrainian	185 250,00	185 250,00
<b>Total:</b>					<b>22 544 030,67</b>	<b>13 519 896,56</b>

## \* Funding Programmes

GFA direct grant and contract of the Alliance-Ukraine under the Global Fund programme

NW direct grant and contract of the Alliance-Ukraine from the Network of PLWH under the Global Fund programmes

LS direct grant to the Alliance-Ukraine under the programmes of Levi Strauss Foundation

JSI direct grant to the Alliance-Ukraine under the programmes of John Snow Research &amp; Training Institute, Inc.

## Annex 4. Laboratory Equipment and Reagents Supplied to the Regions as Humanitarian Aid, 2008

Laboratory Equipment and Reagents within the Round 1 and Round 6 Global Fund supported programmes and within the SUNRISE programme supported by USAID, from 01.01.2008 till 01.01.2009

№	Name of Regional Center	CD4 reagents	Test-systems for DNA HIV	Viral Load tests	Total in 2008, \$
1	Ukrainian AIDS Center	12 113,00	26 217,53	155 400,00	193 730,53
2	Crimea Republican Center	9 978,00	10 262,68	81 589,00	101 829,68
3	Dnipropetrovsk Regional Center	8 148,00	0,00	0,00	8 148,00
4	Donetsk Regional Center	0,00	0,00	103 604,00	103 604,00
5	Odessa Regional Center	10 893,00	15 394,02	103 604,00	129 891,02
6	Kyiv City Center	0,00	0,00	61 388,00	61 388,00
<b>Total in 2008, USD</b>		<b>41 132,00</b>	<b>51 874,23</b>	<b>505 585,00</b>	<b>598 591,23</b>



## Annex 5. List of Medicines Procured in 2008

List of medicines procured for implementation of the Round 1 and Round 6 Global Fund supported programmes and within the SUNRISE programme supported by USAID from 01.01.2008 till 01.01.2009.

Product	Manufacturer	Country of origin	Strength	Number of tablets, capsules, ml, g	2008		
					quantity	price, USD	Total cost, USD
Abacavir oral sol.	GlaxoSmithKline Ltd.	Canada	240 ml (20 mg/ml)	1	1104	26,45	29 200,80
Abacavir 300mg	Aurobindo Pharma Ltd.	India	300 mg	60	3550	31,04	110 198,11
Didanosine EC (ddl)	BMS	Switzerland	250 mg	30	1182	44,08	52 098,16
Didanosine EC (ddl)	BMS	Switzerland	400 mg	30	7397	44,08	326 032,24
Didanosine EC (ddl)	BMS	Switzerland	100 mg	60	1261	24,55	30 952,00
Efavirenz (EFV)	Ranbaxy	India	200 mg	90	29412	16,24	477 659,70
Lamivudine (3TC)	CIPLA Ltd.	India	150 mg	60	3165	4,37	13 845,93
Lamivudine (3TC) oral solution	CIPLA Ltd.	India	oral sol. 100ml (50mg/5ml)	1	10560	1,59	16 758,72
Lamivudine (3TC)	CIPLA Ltd.	India	150 mg	60	12600	3,27	41 139,25
"Lopinavir (LPV) + ritonavir (Rtv) "	CIPLA Ltd.	India	200 mg + 50 mg	120	3600	88,73	319 444,06
Nevirapine (NVP)	Aurobindo Pharma Ltd.	India	200 mg	60	1336	4,18	5 583,28
Nevirapine (NVP)	Aurobindo Pharma Ltd.	India	200 mg	60	7496	3,65	27 361,15
Nevirapine oral suspension	Aurobindo Pharma Ltd.	India	240 ml (10 mg/ml)	1	1684	20,05	33 762,68
Stavudine oral powder	CIPLA Ltd.	India	200 ml (1mg/ml)	1	3450	25,39	87 602,40
Stavudine (d4T)	Abbott Laboratories	UK	30 mg	60	5860	2,12	12 399,76
Zidovudine (AZT)	Boehringer Ingelheim	Germany	100 mg	100	776	6,98	5 418,65
Zidovudine (AZT)	Aurobindo Pharma Ltd.	India	100 mg	100	16609	7,19	119 491,79
Zidovudine (AZT) + lamivudine (3TC)	CIPLA Ltd.	India	300 mg+150 mg	60	5376	10,21	54 887,35
Zidovudine (AZT) + lamivudine (3TC)	BMS	Switzerland	300 mg+150 mg	60	33202	10,47	347 764,39
Zidovudine 10mg/ml oral solution	Aurobindo Pharma Ltd.	India	oral sol. 100ml (50mg/5ml)	1	17405	1,69	29 463,18
<b>Total</b>							<b>2 141 063,60</b>

## Annex 6. Total Cost of Medicines and Health Care Commodities 2008

**Total cost of medicines and health care commodities supplied within the Round 1 and Round 6 Global Fund supported programmes and within the SUNRISE programme supported by USAID from 01.01.2008 till 01.01.2009.**

Region/ Institution	ARV drugs, UAH	STI drugs, UAH	STI and pregnancy tests, UAH	HIV rapid tests, UAH	Alcohol wipes, UAH	Mobile clinics, UAH	Buprenorphine, UAH	Methadone, UAH	Lubricants, UAH	Condoms, UAH	Total
Autonomous Republic Crimea	1 644 592,27	122 810,02	78 798,50	24 865,00	9 042,30	244 928,57	449 439,90	34 695,82	29 232,18	146 662,06	2 785 066,62
Cherkasy oblast	216 432,90	4 178,20	59 220,00	34 833,00	21 611,25	244 928,57	158 166,00		65 633,12	194 731,74	999 734,78
Chernihiv oblast	145 598,86	9 265,68	960,00	1 625,00	2 249,10		79 083,00		3 120,08	20 998,95	262 900,67
Chernivtsi oblast	106 267,10	25 720,54	12 512,50	10 999,60	5 898,15		158 166,00		9 137,38	82 683,02	411 384,29
Dnipropetrovsk oblast	2 821 025,07	174 472,72	150 742,95	97 438,00	58 086,45	489 857,14	449 439,90	30 869,79	99 693,99	429 995,00	4 801 621,01
Donetsk oblast	3 083 968,99	59 991,88	135 702,32	86 291,00	69 339,60	489 857,14	449 439,90	82 799,24	107 122,75	399 516,13	4 964 028,96
Ivano-Frankivsk oblast	96 055,35	9 968,24	10 211,50	9 860,00	4 023,90		237 249,00		15 080,39	83 690,77	466 139,15
Kharkiv oblast	277 655,75	28 401,74	46 471,00	17 660,00	7 803,00	244 928,57			52 892,79	296 932,61	972 745,45
Kherson oblast	349 680,85	98 875,98	54 050,50	28 223,20	17 487,90	244 928,57	449 439,90	28 345,09	31 720,82	179 835,91	1 482 588,72
Khmelnitsky oblast	154 539,65	87 100,80	13 056,50	15 955,00	7 497,00				12 108,88	68 989,43	359 247,26
Kirovohrad oblast	90 408,32	9 347,70	10 909,50	11 478,80	7 489,35		158 166,00		13 743,21	74 415,99	375 958,87
Kyiv oblast	374 959,68	17 172,36	7 744,00	6 290,00	2 356,20		79 083,00		11 328,86	16 499,10	515 433,21
Luhansk oblast	311 816,58	21 982,18	36 037,00	11 863,00	10 778,85	244 928,57	118 624,50		22 657,73	79 566,61	858 255,02
Lviv oblast	69 135,13	12 778,44	41 291,00	12 272,60	1 583,55	244 928,57	118 624,50		18 980,49	98 131,17	617 725,45
Mykolayiv oblast	1 401 366,19	216 390,84	108 311,50	66 811,20	33 652,35	244 928,57	449 439,90	79 897,82	136 231,12	1 195 624,94	3 932 654,43
Odesa oblast	1 645 210,42	152 377,87	103 939,90	65 335,20	55 860,30		449 439,90	58 392,80	120 940,25	912 422,98	3 563 919,62
Poltava oblast	342 327,40	17 257,80	7 859,50	8 275,00	6 678,45		262 276,80	40 168,96	11 328,86	51 708,53	747 881,31
Rivne oblast	52 473,42	12 553,29	9 582,50	9 910,40	6 135,30		79 083,00		9 843,11	78 782,03	258 363,05
Sumy oblast	111 636,60	2 854,62	8 535,00	7 638,00	4 582,35		158 166,00		8 283,07	53 544,38	355 240,02
Ternopil oblast	29 509,60	3 014,38	1 568,00	1 625,00	1 797,75		158 166,00		13 594,64	25 393,86	234 669,23
Vinnitsya oblast	232 044,27	7 722,02	34 819,50	11 160,00	6 196,50	244 928,57	262 276,80	32 459,83	12 183,17	62 818,56	906 609,23
Volyn oblast	205 778,62	11 655,94	4 895,50	4 103,00	2 754,00		197 707,50		8 914,52	41 240,77	477 049,85
Zakarpattia oblast	15 712,97	52 996,88	2 287,50	2 790,00	2 027,25		79 083,00		2 340,06	13 499,40	170 737,06
Zaporizhya oblast	400 359,48	21 518,90	9 480,00	8 465,00	4 023,90		358 752,00	8 726,91	16 640,43	64 043,85	892 010,47
Zhytomyr oblast	109 278,14	6 789,48	720,00	1 300,00	1 767,15		118 624,50		4 457,26	10 499,48	253 436,00
Kyiv Hospital №5	1 821 967,11	104 384,76									1 926 351,87
City of Kyiv		27 384,26	125 802,00	122 400,80	62 630,55	244 928,57	1 195 244,10	38 993,32	206 259,59	688 224,60	2 711 867,79
City of Sevastopol	458 171,27				8 874,00	244 928,57			20 391,95	105 950,71	838 316,50
Lavra AIDS Clinics	1 394 348,31										1 394 348,31
Okhmadit Clinocs	312 114,84										312 114,84
Prison Department	67 721,21										67 721,21
National Projects										1 308 000,00	1 308 000,00
<b>Total</b>	<b>18 342 156,35</b>	<b>1 318 967,52</b>	<b>1 075 508,17</b>	<b>679 467,80</b>	<b>422 226,45</b>	<b>3 428 999,98</b>	<b>6 673 181,10</b>	<b>435 349,59</b>	<b>1 063 860,67</b>	<b>6 784 402,60</b>	<b>40 224 120,23</b>

## Annex 7. Pharmaceutical products, laboratory reagents and consumables supplied under Grant Agreements with the PLWH Network within Round 6 Global Fund Grant

International Non-proprietary Name	Brand name	Supplier	Price per unit CIP \$ (inc. commission fee)	Quantity of packs	Total cost \$	Manufacturer	Country of origin
Efavirenz 200 mg tab.	EFFERVEN	IDA	\$17,43	4 400	\$76 671,14	Ranbaxy	India
Zidovudine 300mg + Lamivudine 150mg tab. №60	Zidovudine 300mg + Lamivudine 150mg tab. №60	IDA	\$10,21	3 300	\$33 692,01	Aurobindo	India
Lopinavir 200mg + Ritonavir 50mg tab.	Aluvia	IDA	\$88,73	720	\$63 888,81	Abbott	Germany
Didanosine 400 mg enteric coated	Videx 400 mg caps	IDA	\$44,08	526	\$23 184,12	BMS	France
Lamivudine 150 mg	Lamivudine 150 mg tabs	IDA	\$3,22	1 354	\$4 354,90	Aurobindo	India
Zidovudine 300mg + Lamivudine 150mg	Zidovudine 300mg + Lamivudine 150mg tab. №60	IDA	\$9,79	9 602	\$93 969,97	Aurobindo	India
Efavirenz 600 mg	Efavirenz 600 mg tabs	IDA	\$12,17	11 721	\$142 609,41	Aurobindo	India
Efavirenz 200 mg	Efavirenz 200 mg tabs	IDA	\$14,64	530	\$7 760,64	Aurobindo	India
Nevirapine 200 mg	Nevirapine 200 mg tabs	IDA	\$3,69	993	\$3 666,57	Aurobindo	India
Lopinavir 200mg + Ritonavir 50mg	Aluvia tabs	IDA	\$88,73	1 169	\$103 730,58	Abbott	Germany
Nelfinavir 250 mg	Viracept tabs	IDA	\$205,94	687	\$141 480,57	Roche	Spain
Tenofovir disoproxil fumarate 300 mg	Viread tabs	IDA	\$22,22	1 200	\$26 661,60	Gilead	Germany
Tenofovir 300 mg+Emtricitabine 200 mg	Truvada tabs	IDA	\$33,86	3 340	\$113 079,04	Gilead	Germany
Abacavir 300 mg	Abacavir 300 mg tabs	IDA	\$26,41	471	\$12 438,02	Aurobindo	India
Didanosine 250 mg enteric coated	Videx 250 mg caps	IDA	\$44,08	99	\$4 363,55	BMS	France
<b>ARV TOTAL</b>					<b>\$851 550,95</b>		
Azythromycin Tab. 0,5 g №3	AZICIN	Alba	\$2,89	480	\$1 385,82	Darnytsya	Ukraine
Amikacin pwd. for inj. 1,0 bottle	AMICILUM	Alba	\$1,41	2 520	\$3 557,94	Pharmalife	Ukraine
Cephepime pwd. for inj. 1 g, bottle №1	MAXIPIME	Delta-Medical	\$14,63	7 560	\$110 585,58	BMS	USA
Moxifloxacin tab. 400 mg, № 5	AVELOX	Optima-Pharm	\$5,44	2 520	\$13 717,78	Bayer	Germany

International Non-proprietary Name	Brand name	Supplier	Price per unit CIP \$ (inc. commission fee)	Quantity of packs	Total cost \$	Manufacturer	Country of origin
Fluconazole caps. 100 mg x 28 (7x4)	MYCOSYST	VVS	\$49,69	236	\$11 726,63	Gedeon Richter	Hungary
Trimetoprim / Sulfamethoxazole tab. (400mg/80mg) x 20	GROSEPTOL	VVS	\$0,64	6 741	\$4 314,24	Grodzinski PF «Polfa»	Poland
Azythromycin Tab. 0,5 g №3	Azythromycin-Norton	Optima-Pharm	\$0,89	1 920	\$1 710,55	Unimax Laboratories	India
Fluconazole caps. 100 mg x 28 (7x4)	MYCOSYST	Optima-Pharm	\$1,74	11 200	\$19 505,45	Gedeon Richter	Hungary
Trimetoprim / Sulfamethoxazole tab. (400mg/80mg) x 20	Bi-Sept-Farmak	Optima-Pharm	\$0,03	398 820	\$11 394,86	Pharmak	Ukraine
Cephepime pwd. for inj. 1 g, bottle №1	Efipim	Lyudmila-Pharm	\$6,73	10 080	\$67 863,27	Orhid Healthcare	India
Moxifloxacin tab. 400 mg, № 5	AVELOX	Optima-Pharm	\$5,19	3 360	\$17 438,40	Bayer	Germany
Opportunistic Infections Medications TOTAL					\$263 200,52		
Methadone Hydrochloride, 5 mg tablets	Metadol	Pharmascience Inc.	\$3,90	1 960,5	\$7 645,95	Pharmascience Inc.	Canada
Methadone Hydrochloride, 10 mg tablets	Metadol	Pharmascience Inc.	\$4,85	3 921,0	\$19 016,85	Pharmascience Inc.	Canada
Methadone Hydrochloride, 25 mg tablets	Metadol	Pharmascience Inc.	\$5,78	13 723,5	\$79 321,83	Pharmascience Inc.	Canada
Methadone TOTAL					\$105 984,63		
Viral Load test reagents and consumables		Abbott			\$103 863,00		Germany, USA
CD4 test reagents and consumables		Becton Dickinson			\$56 007,00		Belgium, USA,
TB test reagents, rapid tests, sputum cups and consumables		Aptaka, Becton Dickinson, Human			\$65 948,00		Italy, USA, Germany
Laboratory reagents and consumables TOTAL					\$225 818,00		
TOTAL					\$1 446 554,10		



## Annex 8. ICF “International HIV/AIDS Alliance in Ukraine” Publications in 2008

The Policy and Programme Development Department of the International HIV/AIDS Alliance in Ukraine has been developing, publishing and coordinating development and publication of Alliance information products in Ukraine. All publications are distributed among target audiences and are available in electronic form on the Alliance website in the Infocentre section.

### HIV/AIDS Digest. Partnership with Local Governments



This publication summarizes the key principles of building partnerships with different organizations in the area of HIV/AIDS prevention services among vulnerable populations. The digest includes information about the areas of competence of the executive authorities and the main forms of their cooperation with AIDS-service organizations; it also makes it possible to evaluate international and domestic experience of building partnerships between non-governmental organizations and state/municipal authorities.

### Participatory Site Assessment. Methodological Recommendations



This manual is a summary of Participatory Site Assessment (PSA) experience; its goal is to assist new organizations beginning to apply this methodology to avoid typical mistakes and complete the process in a professional and competent manner. The manual describes all stages of PSA implementation (expected results, steps, tools for each stage, information analysis, organization of the process, key lessons and difficulties). Annexes contain short examples of the main PSA documents.

### Making Sex Work Safe



This manual is a version of the guidelines developed under the initiative of the Global Programme on AIDS (GPA) of the World Health Organization and the Network of Sex Worker Projects, adapted to be distributed among the former Soviet republics. The manual provides answers to the key questions most frequently asked by projects working with FSW: how to develop working policies and strategies, how to define safe sex work, how to work with migrating groups and drug users, how to perform project planning and evaluation. The manual also presents basic information on the sex work situation and offers examples of successful strategies of project and programme implementation.

## Learn about the Risks of Sex Work



This information brochure for commercial sex workers analyzes the main risk situations which can occur in their daily lives. The publication offers simple and practical information about sexually transmitted infections, HIV/AIDS and safe sex work. Special focus is given to legislative aspects and basic skills of safe behaviours.

## Series of Booklets for Positive People (6 issues)



This publication is a revised and expanded version of the well-known series of booklets for people living with HIV already published by the Alliance-Ukraine (Keeping Healthy, Adherence to ARV-Therapy, ARV-Therapy, ARV Medicines, Pregnancy, HIV and Hepatitis). The series provides accurate and understandable information for HIV-positive people, including treatment, healthy lifestyles, etc.

## Nothing About Us Without Us



This is a Russian-language version of the report and manifesto on meaningful involvement of people who use illegal drugs in the response to HIV and hepatitis C, developed by the Canadian HIV/AIDS Legal Network. The Russian version was designed to include the experience of countries of Central and Eastern Europe as well as the former USSR.

## Substitution Maintenance Therapy in Ukraine: Can the Community Respond Effectively to the Challenges of HIV/AIDS?



This policy briefing provides background information about substitution therapy, its advantages and role in HIV/AIDS prevention programmes, and the position of Ukrainian legislation and international organizations on this issue. The document also describes the history of the introduction of substitution maintenance therapy in Ukraine. It considers the challenges and perspectives of SMT implementation in Ukraine, in particular within programmes financed by the Global Fund. The document also offers recommendations for successful work.



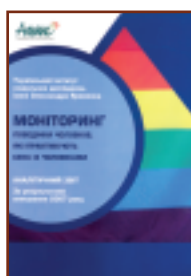
### Step by Step. Prevention Work of Non-governmental Organizations in Penitentiary Institutions of Ukraine

With this publication the Alliance-Ukraine has launched a series Best Practices of Ukrainian AIDS-Service NGOs, which will enable NGO experts to share their experience and best practices in the field of prevention. The first publication of the series covers key aspects of HIV prevention in penitentiary institutions (overall it is based on the experience of the Mykolayiv oblast public youth movement "Penitentiary Initiative"), and considers the specific features of prevention in correctional facilities, pre-trial detention centres and work with convicted women. Special focus is given to different forms and methods, including peer education, the volunteer movement and development of IEC materials.



### Prevention of Opioid Overdose. Harm Reduction for IDU Who Use Stimulants

The second publication of the Best Practices series features materials collected by the International HIV/AIDS Alliance in Ukraine after a review of scientific literature and best international practices on the use of naloxone in prevention programmes; it also describes the characteristics of opioid overdose and methods of first aid. In addition this publication contains material on stimulants which have recently become a serious problem for those working in HIV/AIDS prevention. In particular, it offers a description of a typical project on HIV prevention among injecting stimulant users.



### Behaviour Monitoring of Men Who Have Sex With Men as a Component of Second Generation Surveillance

This publication is an analytical report of the results of the survey among men who have sex with men (MSM), in particular, the social and demographic features of this population; their level of knowledge about HIV/AIDS and ways to prevent the infection, and information about sexual behaviour. The report analyzes factors of risk behaviours, consumption of alcohol and narcotic substances, level of accessibility of condoms and HIV testing, and levels of coverage by prevention programmes.



### Behaviour Monitoring of Commercial Sex Workers

This publication presents the results of a survey among female sex workers (FSW), in particular, the social and demographic features of this population; their level of knowledge about HIV/AIDS and ways to prevent the infection, and information about sexual behaviour. The publication analyzes factors of non-observance of safe behaviours, with special focus given to consumption of alcohol and narcotic substances and level of accessibility of condoms. The report reviews the conditions and practices of HIV testing among FSW and

factors contributing to its inaccessibility, as well as levels of FSW coverage by prevention programmes.



### Behaviour Monitoring of Injecting Drug Users

This report presents the results of a survey of injecting drug users: namely, the social and demographic features of IDU; their level of knowledge about HIV/AIDS and ways to prevent the infection; information on alcohol consumption and narcotic substances, purchase of syringes and shared use of injecting equipment. Special attention is given to sexual practices and factors of non-observance of safe behaviours. The publication reviews the condition and practice of HIV testing among IDU and factors contributing to its inaccessibility, as well as levels of IDU coverage by prevention programmes.



### Methodological Guidelines on Implementation of Surveys to Monitor the National Response to the HIV Epidemic

This publication provides an in-depth review of key components of the national monitoring and evaluation system, characteristics of the second generation epidemiological surveillance and behavioural surveys. The publication contains a list of national M&E indicators and algorithms of their calculation; it reviews guidelines for monitoring and evaluation of different populations and M&E tools and methods to evaluate the size of most-at-risk populations, levels of coverage of student youth with education and prevention programmes, as well as study of tolerant attitudes towards people living with HIV/AIDS.



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

This report contains an analysis of fulfilment of the national strategy on HIV/AIDS for the period from January 2006 to December 2007.



Annex 9. Organizational Structure of ICF “International HIV/AIDS Alliance in Ukraine”



## Annex 10. Composition of the Governing Board, Supervisory Committee and Staff of ICF “International HIV/AIDS Alliance in Ukraine”

### GOVERNING BOARD

<b>Yuriy Kobyshcha</b>	Board Chairman
<b>Svitlana Antonyak</b>	
<b>Iryna Borushek</b>	
<b>Roman Kobets</b>	
<b>Anna Sarang</b>	
<b>Julie Saunders-Bondarenko</b>	
<b>Anja Teltschik</b>	

### SUPERVISORY COMMITTEE

<b>Jon Cooper</b>	Committee Chairman
<b>Bruno Le Ciclé</b>	
<b>Irena Gryga</b>	
<b>Vadim Menzhulin</b>	
<b>Natalia Sannikova</b>	

Staff and consultants of ICF «International HIV/AIDS Alliance in Ukraine» as of 19 January 2009

#### Directorate

<b>Andriy Klepikov</b>	Executive Director
<b>Pavlo Smyrnov</b>	Deputy Executive Director/Director: Field Programmes
<b>Zahedul Islam</b>	Director: Treatment, Procurement and Supply Management
<b>Andriy Khomenko</b>	Finance Director
<b>Natalya Galagan</b>	Acting Director: Operations

#### Senior Advisory Unit

<b>Paola Pavlenko</b>	Senior Advisor: Stakeholder Relations, Risk Management & Compliance
<b>Yuriy Gavryliuk</b>	Risk Management & Compliance Officer

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\* as of January 19, 2009.

**Personal Assistants**

<b>Iryna Golubeva</b>	Personal Assistant to Executive Director
<b>Anastasia Babenko</b>	Personal Assistant to Deputy Executive Director/Director: Field Programmes
<b>Daria Bilan</b>	Personal Assistant to TPSM Director
<b>Natalia Potiy</b>	Personal Assistant to Director: Policy & Communication
<b>Kateryna Prontenko</b>	Personal Assistant to Finance Director

**Field Programmes Department****Field Programmes, East Team**

<b>Victor Isakov</b>	Head of Team
<b>Liudmyla Shulga</b>	Technical Support Manager
<b>Yuriy Gayduk</b>	Senior Programme Officer
<b>Oleksandra Lakhina</b>	Programme Officer
<b>Yuliya Gamankova</b>	Programme Assistant

**Field Programmes, South Team**

<b>Volodymyr Chura</b>	Head of Team
<b>Natalya Dvinskykh</b>	Technical Support Manager
<b>Olena Goncharenko</b>	Senior Programme Officer
<b>Nadiya Yanhol</b>	Programme Officer
<b>Anastasiya Kekutiya</b>	Programme Assistant

**Field Programmes, Centre Team**

<b>Tetyana Deshko</b>	Head of Team
<b>Myroslava Debelyuk</b>	Technical Support Manager
<b>Galyna Naduta</b>	Programme Manager: Regional Policy & Coordination
<b>Olga Korolenko</b>	Senior Programme Officer
<b>Ganna Orlova</b>	Programme Officer
<b>Olga Burgay</b>	Programme Officer
<b>Iryna Nerubayeva</b>	Programme Assistant

**National Programmes Team**

<b>Ludmila Shurpach</b>	Head of Team
<b>Maryna Braga</b>	Programme Manager: Prevention
<b>Natalya Nagorna</b>	Programme Manager: Community Based Information
<b>Olexandra Datsenko</b>	Senior Programme Officer
<b>Anastasia Mazurenko</b>	Programme Officer: Prevention
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<b>Galyna Nazarchuk</b>	Programme Assistant

## Policy & Communication Department

**Olena Purick** Programme Advisor: BCC Education & Training

### Policy & Programme Development Team

**Ganna Dovbakh** Head of Team  
**Pavlo Skala** Project Manager: Policy & Advocacy  
**Maryna Varban** Programme Manager: Technical Support Resources Development  
**Myroslava Andrushchenko** Programme Officer: Documentation & Sharing  
**Olga Golichenko** Programme Officer: Policy & Advocacy  
**Olga Lutsyk** Programme Officer: Programme Development  
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**Tetyana Salyuk** Programme Manager: Research & Evaluation  
**Inna Shvab** Programme Officer: Research & Field Analysis  
**Yulia Skoropatska** Programme Officer: Reporting & Planning  
**Svitlana Kononkova** Programme Assistant: Monitoring & Evaluation

## General Administration Department

**Ihor Voytenko** Legal Advisor

### Human Resources & Administration Team

**Victoria Obozna-Petrova** Senior HR Project Manager  
**Ganna Goncharenko** Senior Human Resources Officer  
**Maryna Maslennikova** Administration Manager  
**Natalya Gudyma** HR Officer  
**Olga Svyrydovska** HR Officer  
**Natalya Zyma** Administration Officer  
**Ivanna Yaremenko** Travel Support Officer  
**Tetyana Vorobyova** Human Resources & Administration Assistant  
**Olga Akaieva** Secretary  
**Mykhailo Yakovlev** Household Manager



<b>Valeriy Sheremet</b>	Security Guard
<b>Svitlana Shevchenko</b>	Housekeeper
<b>Valentyna Glazko</b>	Courier
<b>Antonina Tkacheva</b>	Cleaner
<b>Galyna Kutsaenko</b>	Assistant to Administration Manager
<b>Valentyna Gavrylchuk</b>	Assistant to Administration Manager
<b>Vasyl Setter</b>	Driver

#### Information Technologies and Production Team

<b>Andriy Afanasyev</b>	Head of Team
<b>Andriy Karpovych</b>	Production Manager
<b>Pavlo Usenko</b>	Senior IT Officer; Security Officer
<b>Vyacheslav Yatsyuk</b>	System Administrator
<b>Andriy Yakovlev</b>	IT and Production Assistant

#### Treatment, Procurement and Supply Management Department

<b>Sergiy Filippovych</b>	Head of Treatment, Procurement and Supply Management Team
<b>Tetyana Perepelitsya</b>	Programme Manager: Treatment
<b>Oksana Savenko</b>	Senior Programme Officer: Treatment
<b>Oleksandr Lebega</b>	Senior Programme Officer: Treatment
<b>Tetyana Mikityuk</b>	Programme Officer: Substitution Treatment
<b>Danil Kalnik</b>	Manager of Procurement and Supply Management Unit
<b>Vladislav Volchkov</b>	Senior Procurement Officer
<b>Vitaliy Velikiy</b>	Procurement Officer
<b>Victoria Skrychevskaya</b>	Procurement Officer
<b>Yulianna Ivanenyuk</b>	PSM Assistant

#### Finance Department

##### Accounting Team

<b>Larysa Zatulyviter</b>	Head of Accounting Team
<b>Olena Nosatska</b>	Deputy Chief Accountant
<b>Ivanna Konyukh</b>	Senior Accountant
<b>Roman Khomenko</b>	Senior Finance Officer: 1C System
<b>Lesya Khmel</b>	Accountant
<b>Anastasiya Zorya</b>	Accountant
<b>Alla Kravets</b>	Bookkeeper/Cashier
<b>Kateryna Ivanitska</b>	Assistant to Accounting Team

#### Field Support, Finance team

<b>Olga Zozulynska</b>	Head of Field Support
<b>Iryna Yara</b>	Grant Manager
<b>Dmytro Belon</b>	Senior Field Support Officer
<b>Kateryna Tytovska</b>	Senior Contracting Officer
<b>Svitlana Voynich</b>	Senior Field Support Officer
<b>Igor Arbatov</b>	Field Support Officer
<b>Oksana Yatsko</b>	Field Support Officer
<b>Ksenia Omelyanenko</b>	Field Support Finance Assistant

#### Reporting & Planning team

<b>Ilona Sidorenko</b>	Head of Team
<b>Olesya Lesnikova</b>	Senior Finance Officer
<b>Ganna Katasonova</b>	Budget Officer
<b>Yuriy Zozulynskiy</b>	Assistant to Reporting & Planning team

#### Regional Coordinators

<b>Tetyana Afanasiadi</b>	Regional Coordinator, Odesa
<b>Eleonora Gerasimenko</b>	Regional Coordinator, Cherkassy
<b>Yevheniya Lysak</b>	Regional Coordinator, Kherson
<b>Valentyna Pavlenko</b>	Regional Coordinator, Donetsk
<b>Iryna Potapova</b>	Regional Coordinator, Sevastopol
<b>Svitlana Khotina</b>	Regional Coordinator, Mykolaiv
<b>Mykhaylo Yaroshevskiy</b>	Regional Coordinator, Dnipropetrovsk
<b>Olexandr Yatsyuk</b>	Regional Coordinator, AR Crimea

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<b>Vlada Rabinova</b>	Operations Officer