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## International HIV/AIDS Alliance in Ukraine

### 2009 ANNUAL REPORT

Supporting community responses to HIV/AIDS



**Dear readers,**

2009 appeared successful in many ways. Working in a new status – as an autonomous international organization based in Ukraine – Alliance achieved firm results both in implementation of the current complex programs and in attracting new resources to the country for the next 3-5 years to respond to the HIV/AIDS and tuberculosis epidemics.

In 2009 Alliance-Ukraine made the most significant contribution, among other NGOs, to implementation of the National HIV/AIDS Program for 2009 – 2013.

Due to comprehensive prevention programs Alliance managed to ensure impact on the epidemic in Ukraine: in particular currently we observe decrease in HIV prevalence among injection drug users (IDUs). Moreover, harm reduction programs (including methadone and buprenorphine-based substitution maintenance therapy) contributed to sustainable change in IDUs' behaviour to a less risky one.

Comprehensive External Evaluation of the National AIDS Response in Ukraine released in 2009 acknowledged a unique role of the Alliance in the AIDS response; moreover, contribution of the Global Fund grants to the National AIDS response is the only area where *high* importance was evaluated with *high* performance.

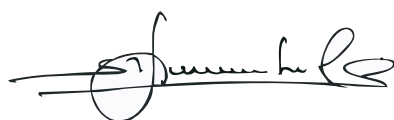
Alliance managed to succeed thanks to sustainable support of the donors – first of all, the United States Agency for International Development (USAID) and the Global Fund to Fight AIDS, Tuberculosis and Malaria. We concluded the 2009 having joined the pool of the best implementers of the Global Fund grants with an “A1” rating. The year 2009 also demonstrated a strong partnership with state institutions: multi-million programs of antiretroviral treatment, initiated and developed by the Alliance in 2004 – 2009, were handed over completely to the Ministry of Health of Ukraine, and since then the patients have been receiving the treatment continuously under the state budget support.

Presenting the 2009 Annual Report, I would like to express sincere appreciation to the Alliance staff and all our partners for high professionalism and commitment. The success achieved is a result of our common work and consolidated effort.

With wishes of health and inspiration,

Andriy Klepikov,

Executive Director



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# 1. Contribution of the ICF “International HIV/AIDS Alliance in Ukraine” to the National HIV/AIDS Response in Ukraine in 2009

In 2009 Alliance has ensured impact on the epidemic in Ukraine, making the most significant contribution, among other NGOs, to implementation of the National HIV/AIDS Program.

## 1. Improving Prevention Programmes for Populations Most Vulnerable to HIV

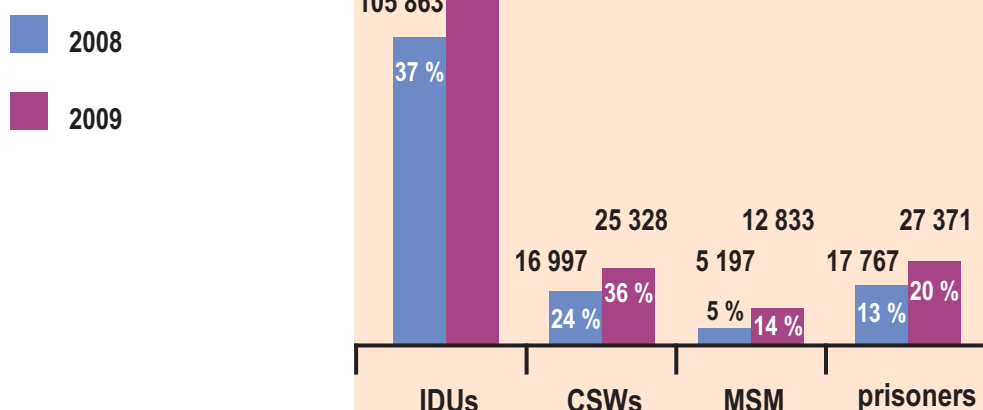
In 2009, Alliance-Ukraine continued implementing a powerful and comprehensive prevention programme among populations most vulnerable to HIV: injection drug users (IDUs), commercial sex workers (CSWs), prisoners, men having sex with men (MSM), and "street children".

In 2009, services for IDUs were successfully broadened with the involvement of the State Social Service for Family, Children and Youth. Organisational capacity support and development was provided to initiative groups. Also, support was given to CSW outreach organisations to increase the involvement of CSWs in developing, implementing and evaluating prevention programmes. A series of measures has been taken to improve the quality of services within the projects, and to decrease the level of stigma and discrimination toward MSM and to mobilize the lesbian, gay, bisexual and transgender (LGBT) community. Exchange and delivery of syringes through pharmacies has continued, significantly expanding access to HIV prevention services for IDUs.

In 2009, 10,958 STI treatment courses were provided. The number of monthly treatment courses increased twofold compared to 2008, and currently, an average of 1,200 treatment courses are given monthly. Fourteen mobile clinics are functioning in 12 Ukrainian regions; 50,508 vulnerable group members have visited them, which almost tripled expectations for the number of visits, and proved their importance and necessity.

Coverage of all vulnerable groups has significantly increased due to activities carried out in 2009. Prevention activity results among IDUs are the most significant: coverage of this group versus their estimated number is close to the ambitious goal of 60% (Fig. 1).

Figure 1. Coverage of vulnerable groups with prevention services in 2008-2009: absolute figures and percentage of the estimated number of these groups' representatives, covered with services.



## 2. Stabilizing the Epidemic Situation among IDUs

In 2009 the trend of improving safe behaviour among IDUs and stabilizing the epidemic situation in this group has continued. Harm reduction programme results show a steady increase in the percentage of IDUs using sterile instruments for injections (according to behavioural surveys in 2006 this indicator was 79%, in 2007 - 84%, and finally in 2009 - 89%).

Against the backdrop of increasing the scope and improving the quality of harm reduction services, a decrease in HIV prevalence among IDUs was observed, according to official statistics and special research data. Indeed, according to routine epidemiological surveillance data of the Ukrainian AIDS Centre, the level of HIV prevalence among IDUs declined steadily since 2007 - from 15.3% in 2007 to 13.9% in 2008 and 13.3% in 2009. A positive trend in HIV transmission reduction among IDUs was also confirmed by results of sentinel epidemiological surveillance. This trend is especially strong in cities with high coverage of prevention services for IDUs. Thus, last year HIV prevalence among IDUs in Kyiv decreased by 7.6% (from 30.8 to 23.2%), in Dnipropetrovsk - by 17.6% (from 40.3 to 22.7%), in Cherkasy - by 6.1% (from 18.2 to 12.1%).

A steady reduction in HIV prevalence among young IDUs and new drug users can be considered one of the most important achievements of prevention programmes, as these figures can be viewed as HIV incidence rate indicators. So, HIV prevalence among IDUs under 25 decreased from 26.1% in 2007 to 19.1% in 2009. This data evidently demonstrate the effectiveness of prevention programmes among injection drug users who remain the major driving force for the epidemic in Ukraine.

## 3. AIDS Incidence Rate Reduction in Ukraine

According to the Ukrainian AIDS Center, the period 2005-2009 marked a significant slowdown in the AIDS incidence rate in Ukraine: from 55.2% in 2005 to 1.8% in 2009. Moreover, the number of AIDS-related deaths fell for the first time in 2009 compared to the previous year from 2,710 to 2,591 (per 100 thousand people or 5.8 to 5.6, i.e. by 2.6%), which is the first conclusive proof of the positive impact that antiretroviral therapy (ART) has made in Ukraine. Such encouraging progress is largely due to the results gained from the five-year integrated treatment programme funded by the Global Fund to Fight AIDS, Tuberculosis and Malaria, managed by Alliance-Ukraine and completed in September 2009.

Following the results of programme implementation, Alliance-Ukraine finally transferred 6,070 HIV-positive patients receiving antiretroviral treatment funded by the Global Fund to full state support. Moreover, an additional strategic stockpile of essential medicines was created. 15,871 people, including 1,717 children (who are already under government support), had been receiving this extremely important continuous ARV treatment as of end of December 2009.

## 4. Expansion of Substitution Maintenance Treatment (SMT)

The most significant progress of Alliance-Ukraine was the twofold expansion (over the last year) of substitution maintenance therapy programmes using methadone. This is the most important expansion of HIV/AIDS related services in Ukraine in recent years. Indeed, thousands of patients have for years been waiting for it. As of January 1, 2010, a total of 5,078 patients in 102 medical facilities in 26 Ukrainian regions had been receiving substitution therapy within the framework of the Global Fund and USAID grants (compared to 2,504 for the same period in 2009).

Due to persistent Alliance-Ukraine advocacy efforts, MoH Order No. 1054 was issued on December 29, 2009 increasing the number of patients who will receive methadone-based substitution therapy in all regions of Ukraine to 6,889 in 2010.

Substitution therapy was introduced at a much higher level. Thus, activities aimed at providing integrated assistance to IDUs receiving SMT have been widely introduced. According to this model, patients received access not only to drug treatment, but also to other medical services, including diagnosis and treatment of HIV infection, tuberculosis and STI.

## Key Achievements of Alliance-Ukraine in 2009

- Due to programmes implemented by Alliance-Ukraine, 5,078 opiate dependent patients receive substitution therapy in 102 medical facilities in 26 regions.
- 139 sub-recipient organizations received grants (115 organizations that received grants for activities in HIV/AIDS prevention among them).
- An efficient and transparent system of procurement and delivery of medical products introduced by Alliance-Ukraine operates according to the highest international standards. A total of 99 medical facilities and 95 civil society organizations received medicines and medical supplies in 2009.
- The list of services for HIV prevention was expanded. In total, prevention services covered 267,605 injection drug users, 46,437 commercial sex workers, 29,959 men having sex with men and 80,409 prisoners.
- A unified national system for monitoring and evaluation of response to the epidemic is being developed.

## 2. Strategic Priorities of Alliance-Ukraine

“International HIV/AIDS Alliance in Ukraine” is the leading professional organization and national leader in the response to the HIV/AIDS epidemic in Ukraine.

Starting from 2009 “International HIV/AIDS Alliance in Ukraine” operates as autonomous international organisation governed from Ukraine, being part of the International HIV/AIDS Alliance, a global partnership of more than 30 organizations from different countries.

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:

- 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 mobilisation of adequate financial resources.

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

1. **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.
2. **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.
3. **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.
4. **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 multi-sectoral coordination and alignment of activities of organizations at the national and local levels.
5. **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 nongovernmental 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.





# EXPANDING ACCESS TO SERVICES



Projects on HIV/STI prevention among target groups:



### 3. Key Programmes Implemented by Alliance-Ukraine in 2009

In 2009, Alliance-Ukraine, in cooperation with its regional partners, implemented several important programmes to overcome the HIV/AIDS epidemic in Ukraine.

#### 3.1. Programmes Supported by the Global Fund to Fight AIDS, Tuberculosis and Malaria (GF)

##### 3.1.1. "Overcoming the HIV/AIDS Epidemic in Ukraine" (GF Round 1 grant)

In 2004 Alliance became a Principal Recipient of the Global Fund grant for implementing the "Overcoming HIV/AIDS



Epidemic in Ukraine" programme (GF Round 1 grant). Having agreed to perform the management functions, Alliance in Ukraine was one of the first civil society organisations to individually become a principal grant recipient, bearing the chief responsibility for programme implementation.

The programme had been implemented in Ukraine until April 2009. During this period, the programme has been recognized as the most powerful national initiative in the fight against HIV/AIDS with an overall budget of nearly \$100 million.

#### **The programme has four key areas of activity:**

1. Treatment, care and support for PLWHA;
2. Further development and expansion of prevention services targeted at most vulnerable populations (IDUs, men and women involved in sex business, imprisoned persons);
3. Develop favorable conditions for overcoming the epidemic through informational, educational and advocacy activities;
4. Contribute to the development and introduction of monitoring and evaluation systems aimed at measuring response efforts to the HIV/AIDS epidemic in Ukraine.

In September 2009, Alliance-Ukraine summed up results of Programme implementation in Ukraine at an extraordinary stakeholders meeting. One of the most important results achieved by the Alliance was civil society strengthening. The Alliance supported the establishment of the All-Ukrainian Network of People Living with HIV/AIDS (PLHA) and provided support to 150 new and existing NGOs. From their side, local organizations having good on-the-ground relations and being able to effectively work with the most vulnerable groups, obtained increased opportunities to provide a wide range of prevention services.

The First Round Programme included: scaling up ARV therapy, providing a full package of treatment, care and prevention services targeted at the most vulnerable groups and scaling up Substitution Maintenance Treatment (SMT). The most important results are:

#### **ARV therapy scaled up:**

- As of the end of September 2008, 6,070 persons including 911 children received ARV treatment within the framework of the Programme.
- 9,875 HIV-positive pregnant women and 9,748 children received required treatment aimed at preventing mother-to-child HIV transmission. Due to this fact, the level of mother-to-child HIV transmission was reduced to 7 % (as compared to 10% in 2003) in September 2008.

#### **SMT programmes introduced:**

As of the end of the programme, more than 2,600 IDUs in 26 regions of Ukraine (including 1,800 persons who received methadone therapy) received SMT with the support of the Global Fund:

#### **As of March 31, 2009 HIV prevention programmes covered:**

- 215,042 injection drug users;
- 37,365 commercial sex workers;
- 21,857 men having sex with men;
- 62,838 prisoners.

#### **Key educational events:**

- HIV prevention programmes as part of the general secondary school programme (3 million pupils covered)
- More than 13,000 teachers were trained at post-graduate professional institutions.

**Most of the Program's target indicators were exceeded. This demonstrates that NGOs experienced in mobilizing communities and working in cooperation with each other can efficiently contribute to making positive changes regarding HIV/AIDS at the national level in Ukraine. Programme implementation affected how the HIV/AIDS epidemic progressed in Ukraine:**

- Absolute number of new HIV infection cases decreased from 632.8 in 2006 to 590.2 in 2008 (per 100,000 tests).
- After 10 years of permanent growth, the number of new HIV infection cases among IDUs dropped in 2006 - 7,127 new cases, in 2008 – 7,009.



- Intensive scaling up of ARV treatment led to a drop in the AIDS incidence level over the last 3 years from 4,729 cases in 2006 to 4,386 cases in 2008.
- AIDS morbidity level decreased from 38% in 2004 to 8% in 2008.



Another important programme achievement was fostering effective partnerships both in government and the private sector as well as in civil society. High-quality communication and coordination channels with all stakeholders became the foundation of fruitful cooperation. For example, State AIDS Centers closely cooperate with civil society organizations providing primary prevention services and a smoothly running, well-developed referral system. Through partnership with the Ministry of Education and Science, a healthy lifestyle programme was introduced in schools and other educational institutions. An HIV prevention programme significantly differs from traditional teaching methods. In addition, partnership relations were strengthened and gained official partnership status with key Programme implementers at the local level.

Leadership of civil society implementation of the Global Fund Programme was ensured by holding regular stakeholders meetings, sending reports to the national HIV Coordination Council, organizing expert working meetings as well as analyzing and involving vulnerable communities as well as through transparent development of plans and budgets. This contributed to fundamental changes in national measures aimed at fighting the HIV/AIDS epidemic, and in society in general creating an open, responsible and trustful atmosphere.

### 3.1.2. “Support for HIV and AIDS Prevention, Treatment and Care for Most Vulnerable Populations in Ukraine” (GF Round 6 grant)

The Programme is financed by the Global Fund to Fight AIDS, Tuberculosis and Malaria within the framework of the 6<sup>th</sup> Round. The principal recipients under the Programme are the “International HIV/AIDS Alliance in Ukraine” and the “All-Ukrainian Network of People Living with HIV”. The Programme implementation period is August 2007 - July 2012.

**The main goal** of the Programme is reducing the HIV transmission rate, incidence and morbidity rate associated with HIV through measures targeting the most vulnerable populations. The Programme is directly aimed at scaling up access of the most vulnerable populations – IDUs, MSM, commercial sex workers, prisoners, street children aged 10 - 18 and people living with HIV/AIDS – to prevention, treatment, care, and support.

**The programme has five objectives:**

**Objective 1.** To ensure adequate access to integrated prevention, treatment, care and support for marginalized populations.

**Objective 2.** To scale up comprehensive HIV care and treatment and ensure equitable access to services for IDUs and other vulnerable populations.

**Objective 3.** To expand access to comprehensive adherence counseling, psycho-social support and care for PLWHA.

**Objective 4.** To create a supportive environment for a sustainable and effective response to HIV/AIDS in Ukraine.

**Objective 5.** To monitor and evaluate grant implementation and strengthen the national monitoring & evaluation system.



Photo CF “Hope and Salvation”

### Key Achievements of the 1<sup>st</sup> Phase of the Programme Implementation

The first phase of the Programme was implemented from August 1, 2007 to July 31, 2009 with total funding of \$29.6 million (\$15.6 million - Alliance-Ukraine, \$14 million - PLHA Network).

At the end of the first phase, more than 100 NGOs throughout Ukraine had covered 240,578 IDUs, 70,770 prisoners, 41,436 commercial sex workers, and 24,428 MSM.

15,500 children in shelters and socio-psychological rehabilitation establishments for children (attached to the Ministry for

Family, Youth and Sports and the Ministry of Education and Science of Ukraine) and pre-detention children centers (attached to the Ministry of Internal Affairs of Ukraine and Criminal Police on children issues) were covered with prevention programmes. More than 1,000 employees of the above-mentioned institutions and NGOs were covered by educational programmes on HIV/AIDS issues. As of July 31, 2009, 3993 clients in Ukraine were provided with substitution maintenance treatment with the support of the Global Fund (3405 clients – Alliance-Ukraine component; 588 – PLHA Network component).

## **2<sup>nd</sup> Phase of the Programme**

The second phase of programme implementation started from August 2009 and will be continued until July 2012 with a general budget of \$103.9 million. Alliance-Ukraine's share is \$64.3 mln.

The following programme components for 2012 are:

- Provide SMT to 11,300 patients;
- Cover at least 140,000 IDUs, 26,000 sex workers, 17,000 MSM, and 26,000 prisoners with HIV/STI prevention services on a yearly basis.

Once access to prevention services is scaled up for the most vulnerable populations, more IDUs, SWs and MSM are expected to start practicing safer behavior (using condoms and clean injection instruments): IDUs (from 53% in 2006 to 70% in 2012), SWs (from 85% in 2006 to 90% in 2012) and MSM (from 72% to 85%). The expected long term programme result is a decrease in the HIV transmission rate among the above-mentioned populations.

### **3.2. “Scaling up the National Response to HIV/AIDS through Information and Services” (SUNRISE) Project funded by USAID**

SUNRISE Project serves as the US Government's flagship activity in the delivery of HIV/AIDS prevention services. The goal of SUNRISE is to substantially decrease HIV transmission by significantly increasing access to and use of high quality prevention and care information and services by most-at-risk population. Starting from August 2009, WHO became the main SUNRISE partner due to the emphasis on rolling out Medication Assisted Treatment (MAT). Alliance-Ukraine joins efforts with the Programme for Appropriate Technology in Health (PATH) and the All-Ukrainian Network of People Living with HIV with the aim of implementing SUNRISE Project.

In 2009, the project was implemented in Ukrainian regions that are mostly affected by the epidemic. They are Dnipropetrovsk, Donetsk, Kyiv, Mykolayiv, Odesa, Kherson, Cherkasy regions, Crimea, cities of Kyiv and Sevastopol. The SUNRISE project is aimed at reducing the level of HIV transmission among the most vulnerable populations in the above-mentioned regions. This goal will be achieved by working toward the fulfillment of 4 key objectives:

#### **1. To reach at least 60 percent of high-risk populations with effective, high quality information and services to prevent parenteral and sexual transmission of HIV in strategically selected sites**

This task means providing prevention services and information for the most at-risk populations (IDUs, SWs, MSM).

Cummulatively, as of the beginning of 2010, 201,476 IDUs, 34,388 SWs and 24,923 MSM were covered with preventative measures and information.

In the information component, 13 informational materials aimed at HIV prevention were developed in 2009. 113,854 copies of these materials were disseminated among key target groups' representatives.

#### **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**

Alliance-Ukraine's main implementation partner of this component was the All-Ukrainian Network of People Living with HIV.

Cummulatively, 44,077 PLWHA received services and information regarding different aspects of living with HIV/AIDS.

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

Alliance-Ukraine's main implementing partner for this component was the Program for Appropriate Technology in Health (PATH). The SUNRISE project stipulated training VCT specialists, providing technical assistance to VCT centers and developing cooperation channels between VCT centers and NGOs.

In 2009, 37 specialists received professional training on HIV testing and counseling in accordance with national and international standards within the SUNRISE project. 25 VCT centers were provided with technical, methodological and counseling assistance; 700 persons were tested and counseled during the project year.

### 4. To strengthen the ability of local organizations and communities to collaboratively analyze, plan, deliver, monitor, and evaluate newly introduced information and services

In 2009, Alliance-Ukraine continued providing technical and methodological support to partners working in HIV/AIDS. The main project achievements are:

— During the year, 98 NGO representatives were trained on various aspects of developing organisational capacity, including training trainers, introducing positive prevention programmes, community mobilization, managing volunteers and organisational resources.

— In 2009, the SUNRISE project proceeded with support activities of 8 regional coordinators in Dnipropetrovsk, Donetsk, Mykolayiv, Odesa, Kherson and Cherkasy regions and Crimea and Sevastopol. Their main task was to provide local NGOs with technical support and coordination of regional efforts in fighting the epidemic, developing cooperation between specialized NGOs and government authorities on planning, developing and implementing regional programmes to fight HIV/AIDS.

Key Performance Indicators of the «Scaling up the National Response to HIV/AIDS through Information and Services» Programme	End of Project Target	Actual for 2004-2009
% of key populations covered through outreach and HIV/AIDS prevention services	60 %	66 %
Number of people trained in HIV/AIDS prevention	4 450	7 042
Number of PLHA provided with care and support services	26 000	44 077
Number of people receiving VCT in centers supported by project	43 000	50 230
Number of VCT centers supported by project	300	529
Number of people trained in VCT	900	1 135

As per USAID decision, the SUNRISE project was extended for two years - until August 18, 2011 with additional funding of more than \$4 million.

Together with HIV/AIDS prevention among IDUs, FSWs and MSM, the new Project priority for 2009-2010 is HIV/AIDS prevention among street children.

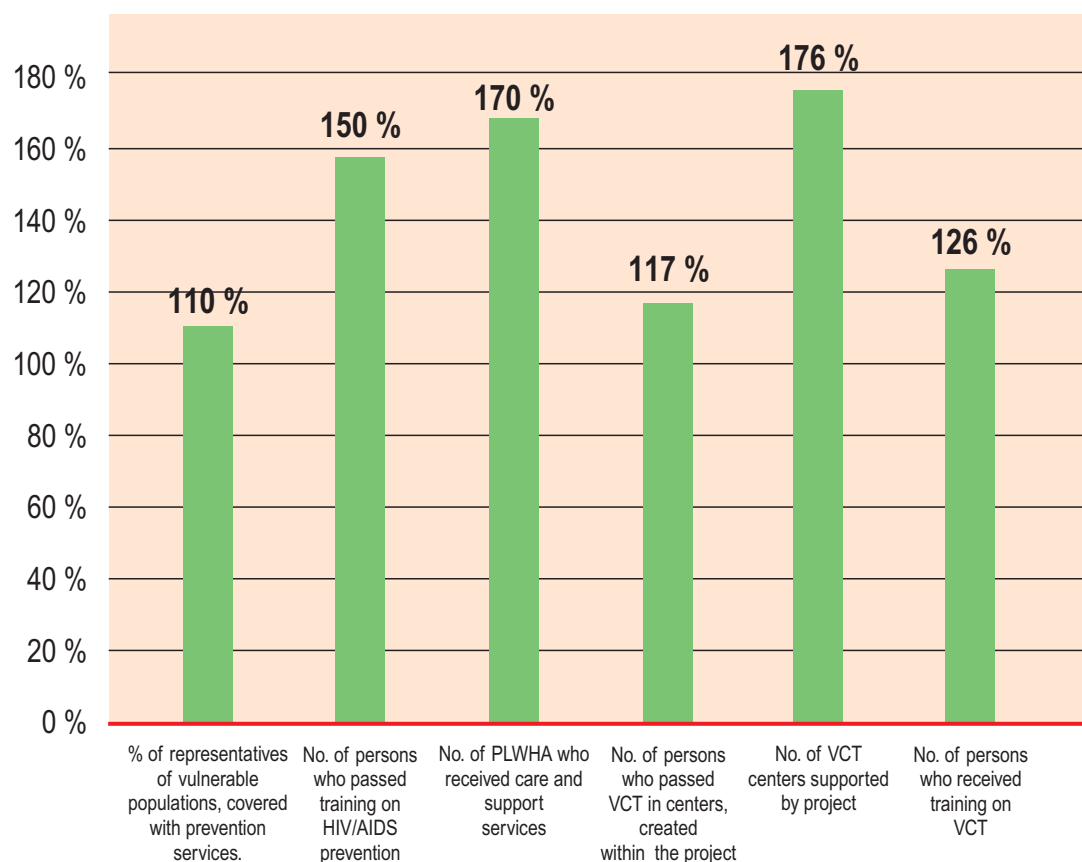
The component Scaling up access to medication assisted treatment for HIV-positive IDUs in Kyiv, Odesa and Mykolayiv was approved by USAID in September 2007. In 2009, within the framework of the Project, 150 HIV-positive IDUs were provided with integrated medical, social and psychological services including SMT. An integrated model for providing medical and psychosocial services for HIV-positive IDUs was developed and introduced at three medical institutions (Kyiv local hospital No. 5, Mykolayiv central regional hospital and Odesa regional drug treatment clinic). These models stipulate maximum approximation of medical services to psychological and social support provided in hospitals implementing methadone maintenance treatment.

Positive implementation experience led to expanding MAT sites covering 150-HIV positive IDUs with services in Kyiv, Sevastopil, Odesa, Mykolayiv, Kherson and Scadovsk (Kherson region) in 9 medical institutions in total in the project as well. An analysis and review of the experience gained in the course of developing and introducing integrated models for providing medical and psychosocial services was conducted. The work on developing methodological recommendations on introducing integrated approach in providing services to IDUs was conducted.



*US Vice President Joe Biden meets Andriy Klepikov, Executive Director of Alliance Ukraine.*

**Performance of target indicators under the Programme  
“Scaling up the National Response to HIV/AIDS through  
Information and Service”, % performed**





## Success story

Patient retention was the main achievement of the methadone SMT programme at the Mykolayiv regional hospital. Not one patient left the programme from its start. This was due to the work of an effective, multidisciplinary team and their high motivation. Every programme participant received qualified medical, psychological and social help.

The story of one of the programme's client, Valeriy, is rather illustrative. He used drugs for more than 10 years and many times tried to quit in a drug treatment clinic. He suffered from many health problems.

He was provided with a complete package of medical and social services. Valeriy was tested for HIV and started his treatment course. All the necessary clinical, biochemical and radiographic examinations were made for him in the central

regional hospital though he was not a resident of that region. He received access to all of the above-mentioned services due to a well-coordinated work of the team.

During the treatment course, Valeriy visited seminars for SMT programme clients and peer support groups, and received individual psychological counseling from a project psychologist. Valeriy's project participation restored good relations with his mother. After 2.5 months of treatment he found a job. He plans to get married.

According to Valeriy, methadone treatment helped him become drug-free. His medication dose is stable. In the nearest future he plans to start a slow methadone detoxication procedure and eventually stop using drugs.

*Yevhen Lukovenko, employee of Mykolayiv Association of HIV-positive people "Time for Life"*

## 3.3. "Learning Booth" Project Funded by Levi Strauss Foundation

In 2009, Alliance-Ukraine continued cooperation with Levi Strauss Foundation by implementing the project Decreasing Stigma and Discrimination of Populations Vulnerable to HIV. Testing of Professional School Students and Youth with a total budget of \$75,000. Thanks to this project Living Libraries and HIV testing became accessible for the first time for professional school students of Lviv, Cherkasy, and Poltava regions.

The project stipulated a combination of the following services for youth:

- Counseling and testing with rapid tests (anonymous, free of charge and confidential);
- Lectures for pupils of professional and technical schools with the aim of scaling up access to information on HIV/AIDS prevention;
- Personal communication with people vulnerable to HIV or living with HIV/AIDS during Living Libraries events;
- Distribution of information materials and condoms.

During the project, which started in December 2008 and ended on January 1, 2010, 1,220 HIV rapid tests, 22 Living Libraries, and information lectures on HIV prevention among students of 14 professional schools in Lviv, Cherkasy and Poltava regions were held. The above-mentioned activities were held in cooperation with regional Educational and Health Care Departments and AIDS Centers.

In particular, in May mass actions for youth were held in 12 cities: Kyiv, Poltava, Kakhovka, Chernihiv, Melitopol, Kremen-chuk, Lviv, Stryi, Chervonohrad, Cherkasy, Smila, and Uman. Young people were tested for HIV in the Living Library project. The Living Library methodology provides pupils and youth with open, objective and accessible information on special groups of people – IDUs, PLWHA, SWs and other groups of people by ensuring personal communication with them. 887 pupils of professional schools were tested for HIV in the project. There were 3 positive results.

As a result of project implementation, a methodological guide was prepared and delivered to 400 NGOs and government HIV-service organizations of the former Soviet Union.

Project implementation proved that pre- and post testing counseling held together with testing during Living Library events is an effective tool of prevention and educational work among youth aimed at informing youth on the ways of HIV transmission to promote safer behavior.

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

The project aim is to surmount the existent barriers and obstacles of creating favourable conditions for HR and SMT programme implementation in Ukraine.

#### Main project goals are:

1. Initiate public discussion, in particular dialogue with authorities regarding the need to review legislation stipulating criminal responsibility for keeping drugs with the aim of adjusting drug legislation to public health needs of vulnerable groups, in particular IDUs in order to reduce pressure on this group.
2. Foster cooperation between NGOs implementing SMT and HR with law enforcement agencies, in particular with police at the local level.

legislation regarding the issues were carefully analyzed and generalized, and recommendations were developed. In the second area, work on monitoring and reacting to IDUs' rights violations, who are patients of HR and SMT programmes was started.

Project coordinators and lawyers identified and analyzed numerous cases involving rights violations of IDUs and police interference into SMT programmes. Based on the facts of these violations, local police departments and prosecutor offices launched investigations into these matters. A project lawyer provided NGO directors and SMT programme clients with information, technical and legal assistance in Sumy, Ternopil, Dnipropetrovsk, and Kyiv. Work meetings with representatives of state and local authorities were held.



3. Produce and distribute short films on harm reduction, SMT and legislative issues (5–20 minutes) among representatives of the most vulnerable groups, in particular IDUs.

#### Project target groups:

Responsible governmental authorities and law enforcement bodies at the national and local levels, NGOs implementing HR and SMT programmes and vulnerable groups, in particular

In this first project area, the current situation regarding criminalization of IDUs in Ukraine was analyzed. Experience based on previous initiatives was carefully reviewed as well. Once the most effective measures, target groups and the main advocacy targets were defined, the most interested organizations were involved in cooperation, domestic and foreign

Alliance-Ukraine helped to prepare for an international seminar on interdepartmental cooperation in implementing HR and drug policy financed by the EU project UEPLAC in cooperation with interested ministries and NGOs on June 25-26, 2009 in Kyiv. Pavlo Skala, Programme Manager: Policy and Advocacy made reports and facilitated discussions with representatives of the Ministry of Internal Affairs of Ukraine.

In the third area of the project, training was held on developing scenarios for HIV prevention films in November 2009. The training was attended by 18 representatives of vulnerable groups, in particular IDUs. In the first half of 2010, scenarios will be developed and films will be made on HR, SMT, drug legislation, and rights protection issues.

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

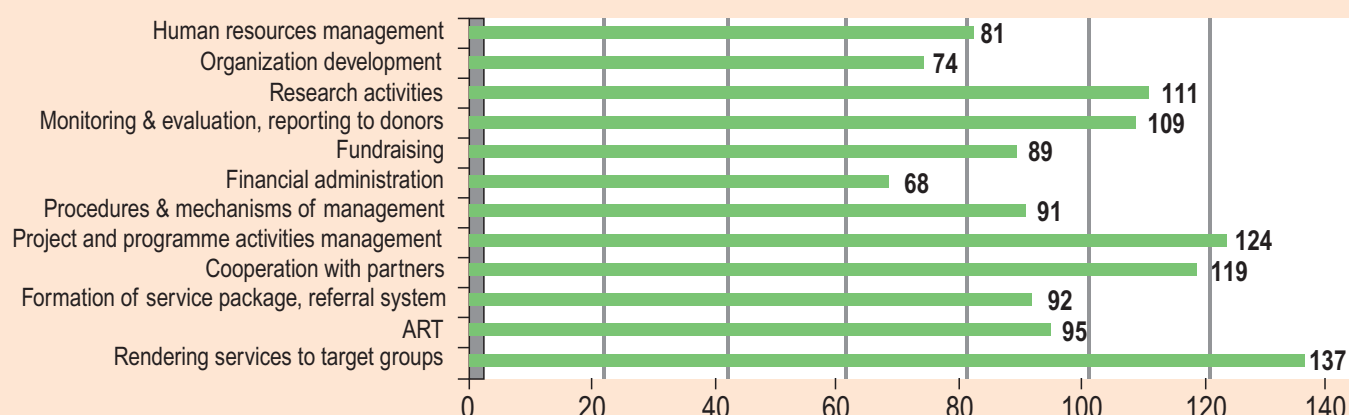
A regional Hub in Eastern Europe and Central Asia (Hub) was established by Alliance-Ukraine in 2008 to share its experience and best practices and that of its partners among organizations participating in fighting HIV/AIDS in the countries of Eastern Europe and Central Asia. The Hub possesses significant experience in about 30 international and regional projects ordered by the Joint UN Programme on HIV/AIDS, the World Bank, the Global Fund to Fight AIDS, Tuberculosis and Malaria, UN Drug Control Programme, the HIV Epidemic Control Center of the WHO in Croatia, International HIV/AIDS Alliance (Great Britain), HR Network in Central and Eastern Europe and Technical Support Hub in South-Eastern and Pacific

regions. In addition, the Hub provided technical support to regional NGOs, in particular to the Caucasus PLWH Union, Moldavian PLWH League, Georgian and Moldavian HR Networks, Russian local NGO "Kovcheg Anti-AIDS" (Rostov-on-Don, Russia).

In 2009, the Hub implemented 14 projects aimed at providing technical support (214 days of counseling) ordered by 8 countries: the Russian Federation, Moldova, Latvia, Kirgizstan, Thailand, Switzerland, Great Britain and Ukraine.

During the Third Eastern Europe and Central Asia Conference (EECAC) the Hub organized analysis of the needs in technical support of HIV-servicing organizations of the region. 249 NGO representatives from 17 regions of the world were interviewed. Results of the analysis are presented in the diagram below:

**Technical Support Needs**



#### The most interesting projects of 2009 include:

— Estimation of Programme Needs and Gaps within the Framework of Building Civil Society's Capacity for Conducting Monitoring and Evaluation of Response to the HIV/AIDS Epidemic ordered by the Joint UN Programme on HIV/AIDS in Geneva, Switzerland. The aim of research was to define needs and gaps of the existing system of technical support regarding civil society's participation in monitoring and evaluation at the national and regional levels. This global research was conducted among organizations and networks of 12 countries of all the world's regions (Asia and Eastern Europe, Latin America, Africa and Oceania) as well as among international organizations. According to the results of the analysis, researchers made conclusions on the necessity of international and national organizations conducting programme monitoring to provide technical support.



— Improving Monitoring and Evaluation from the NGOs Point of View ordered by the Global Fund to Fight AIDS, Tuberculosis and Malaria. The aim of the research was to document existing approaches to community mobilization in areas vulnerable to HIV in Kirgizstan, involving them in developing and implementing projects on defining success indicators for programmes, planning indicator collection at the country level enabling them to define the level of service provision at the local level as well as efficiency of services.

## 4. Regional Policy

As early as 2005 Alliance-Ukraine made a strategic decision to strengthen regional approach efforts. To achieve this goal, regional Alliance-Ukraine coordinators started to work in nine

(excluding the cost of medications and disposable materials), in particular 75 non-governmental organizations received funding for HIV/AIDS prevention projects among vulnerable populations, and 17 for substitution maintenance therapy programmes.

From 2005 to September 2009 activities of regional coordinators (RCs) were carried out within the project Scaling up the National Response through Information and Services (SUNRISE) with USAID support. Since October 2009 it proceeded within the programme Support for HIV and AIDS Prevention, Treatment and Care for Most Vulnerable Populations in Ukraine with financial support from the Global Fund to Fight AIDS, Tuberculosis and Malaria.

Regional coordinators make a significant contribution to ensuring interaction between different sectors, expanding partner



regions of Ukraine: Donetsk, Dnipropetrovsk, Kherson, Mykolayiv, Cherkasy, Odesa regions, Autonomous Republic of Crimea, Kyiv and Sevastopol.

A number of factors led to forming regional coordinator positions. According to official data, these are regions whose residents have the highest HIV-positive rate; in addition, these regions receive the biggest share of funds from the Alliance for HIV prevention programmes among vulnerable populations medications, preventives, and disposable materials. Also important was the fact that the biggest number of HIV-servicing NGOs work in these regions, as do health protection institutions where STI treatment and substitution maintenance therapy was implemented. In 2009, these regional organizations received grants from Alliance-Ukraine totaling almost 55 mln UAH

relations between state and public sectors, involving community members in solving their problems, participating in regional programme development to counteract socially dangerous diseases, assistance in increasing the level of availability of prevention and treatment services for representatives of vulnerable populations, lobby public sector interests at the local level, aid in introducing innovative programmes, continuous aid in solving problems related to expansion and implementation of HIV prevention and SMT programmes, assistance in creating a system of integrated services.



**The following are the main activity areas of regional coordinators (RCs) in 2009:**

- facilitate cooperation between civil society organizations with official bodies, medical institutions and other partners to counteract HIV/AIDS in the region;
- advocate for the interests of HIV-service NGOs and vulnerable populations at the regional level, including local coordination councils;
- ensure efficient cooperation among local civil society organizations;
- involve NGOs in the development of regional programmes and prevention plans with regard to socially dangerous diseases;
- new partner search and geographical expansion of projects;
- assistance in implementing innovative programmes;
- capacity building of civil society organizations, providing technical assistance;
- collecting data on events in the regions and informing the Alliance-Ukraine thereof;
- promoting activities of Alliance-Ukraine at the regional level.

Regional coordinators held regular work meetings with civil society organizations to help perform these tasks. During these meetings participants considered questions related to the degree to which planned project indicators were met; joint use of mobile clinics within the region (one mobile clinic satisfies the needs of all regional NGOs, implementing harm reduction projects); joint actions were carried out dedicated to World AIDS Day, AIDS Memorial Day, and advocacy campaigns. Also, matters and draft decisions meant for adoption at regional coordination sessions were discussed.

Meetings of NGO leaders with heads of local authorities and key partners were carried out on a regular basis. At those meetings, issues relating to services to be rendered to vulnerable populations were discussed – VCT, SMT, ARV therapy, STI treatment and diagnostics. This paved the way for considerably increasing the quantity of prevention and treatment services provided to representatives of vulnerable populations.

One of the complicated issues regional coordinators have tried to resolve was (which is still urgent) the provision of free-of-charge diagnostics of sexually transmitted infections to vulnerable populations and their access to free treatment with the medications, which were purchased with Global Fund support and were provided to medical institutions. During the first half of 2009, under the initiative and with direct participation of RCs, meetings and sessions were held with chief medical officers of STI clinics and medical institutions as well as representatives of public health departments, which led to the signing contracts between NGOs and medical institutions and solidified cooperation in providing services to clients.

Rcs regularly held round tables and work meetings in areas which had not been covered with HIV prevention programmes in order to seek out new civil society organizations and expand the territorial scope of prevention activities among vulnerable populations. As a result, there were 12 new NGOs involved (three in Cherkasy and three in Dnipropetrovsk regions, two in Kyiv region and two in the Autonomous Republic of Crimea, one in Mykolayiv region and one in Sevastopol) in 2009, all of which became Alliance grantees.

All regional coordinators are members of regional (oblast, city) coordination councils (RCCs) on HIV/AIDS and tuberculosis as well as work groups and specialized committees created at RCCs. Four RCs are deputy heads of RCCs (AR Crimea, Mykolayiv, Sevastopol, Odesa). All of them take an active part in defining agendas and draft resolutions, are speakers at sessions, help NGO representatives prepare their own issues, lobby their speeches at sessions and involve them in work groups and RCC committees. Such activities ensure participation of regional NGO representatives in preparing amendments to the regional programme on HIV/AIDS prevention and also give them an opportunity to act as equal partners in its implementation. Thus, NGOs have been included to the regional programmes of Kyiv, Kherson and Odesa as co-executors.

Within the year RCC sessions have taken place (at least four in each region) in which RCs took the initiative to raise and consider 34 issues. During these sessions, problems related to introducing prevention programmes in their respective areas demanding intersectoral cooperation and decision-making at the level of local authorities were discussed. Also information about NGO activities on introducing harm reduction programmes and joint activities of civil society organizations and local authorities in preventing tuberculosis, HIV/AIDS, drug addiction in the regions was provided.

The following were among the most topical issues raised at the sessions: situation with VCT introduction for vulnerable groups and expanding public access to the free HIV examinations (Donetsk, Mykolayiv, Crimea); provision of premises and preferential rent for non-governmental organizations, which work in HIV/AIDS (Kyiv, Mykolayiv, Dnipropetrovsk, Kherson); issues related to recycling of used syringes collected within the framework of harm reduction programmes (Cherkasy, Kyiv); opening new SMT sites, expanding and advocating for existing sites (Sevastopol, Donetsk, Kherson, Mykolayiv, Odesa, Dnipropetrovsk, and Cherkasy), etc.

Regarding issues that were considered, relevant resolutions were passed, terms of implementation and persons responsible were determined. But since implementation of RCCs' resolutions usually depends on the mandate and interest of the public sector, RCs and NGOs are doing their best to embody those resolutions.

also facilitates access to treatment of HIV-infection/AIDS and tuberculosis to injection drug users, which reduces the spread of multiresistant tuberculosis among residents of Sevastopol and save lives of the patients who have HIV/AIDS and TB". An enlarged session of the Sevastopol city coordination council, where City Council deputies were present, dedicated to counteracting TB and HIV/AIDS was held. The main agenda item was disapproval of the City Council resolution to ban SMT.

An appeal by participants of the 3<sup>rd</sup> National SMT Conference with 117 signatures was submitted to the Prosecutor's Office of the city. Based on this, an inspection was carried out and the City Council resolution was deemed illegal. Thus, as a result of joint efforts of national and regional state and civil society organizations as well as the consecutive advocacy policy of Alliance-Ukraine it became possible for the



Thus, in Sevastopol joint efforts of HIV-service NGOs and official bodies led to the defense of the SMT programme, which local authorities were trying to terminate. Despite many obstacles, the programme was not terminated and clients continued to receive medications. Iryna Potapova, regional coordinator of Alliance-Ukraine in Sevastopol said, "Regional HIV-service organizations – public and state – working under difficult conditions united their efforts and displayed resistance to attempts aimed at terminating SMT in Sevastopol. An appeal to the head of the city council, V. Saratov, has been prepared demanding reconsideration on banning the decision, in particular stating the following: "... the SMT programme is a treatment method directed at refusal from illegal injection drug use preventing HIV transmission by way of injection and

Sevastopol Prosecutor's Office to cancel the ban on the SMT programme. The fact that the SMT programme in Sevastopol has not been interrupted for a single day has become a joint victory.

In Kyiv, the premises occupied by the civil society organization Club Eney has been successfully protected. This issue was first raised at a coordination council meeting in the beginning of 2008. Numerous meetings followed with representatives of KCSA bodies and City Council deputies, letters have been sent to the Kyiv city administration as well as notes to deputies and court appeals. This issue was raised for the second time at a session at the end of 2009 and so today the said premises for carrying out preventive work among IDUs has been given to the organization. Currently the matter of preferential rent is being considered for non-governmental organizations, which work in HIV/AIDS and are recognized as co-implementers of the City Special Programme on HIV/AIDS Prevention and Overcoming Consequences of the Epidemic for 2009-2013.

Regional coordinators took an active part in development of regional operational plans (ROPs) to introduce the National Programme to Ensure HIV Prevention, Treatment, Care and Support for HIV-Infected and AIDS Patients for 2010-2013. They also involved regional NGOs in action planning, enabling them to take into account the needs of vulnerable groups and to include corresponding actions into ROPs.

When RCs carry out work meetings, this ensures effective knowledge sharing, helps them familiarize with the experience of colleagues in action, to discuss joint regional problems, and plan their solutions. So, in August 2009 a field work meeting of RCs was held in Mykolayiv region. During this meeting, participants became acquainted with practical activities of HIV/AIDS counteraction by governmental and NGOs of Mykolayiv, in particular a meeting with the head and members of the regional coordination council on issues relating to prevention of tuberculosis, drug addiction and HIV/AIDS and a work meeting with representatives of Berezan RSA coordination council were held.

Achievements and problems of cooperation between HIV-service organizations and local authorities with regard to overcoming the HIV/AIDS epidemic in the region, HIV/AIDS prevention in resort zones and results of work with NGOs as well as the role of HIV-service organizations in response to HIV/AIDS epidemic in Mykolayiv region were discussed.

RCs activities are aimed at ensuring intersectoral cooperation that helps to solve complicated matters and to find support from the government and private sector, and NGOs. Signing cooperation memorandums and agreements between city or region authorities and HIV-service organizations (Mykolayiv, Kherson), carrying out joint strategic planning (Cherkasy, Sevastopol), expanding interventions through pharmacies can serve as examples of successful activities in this area.

Once RC work meetings with HIV prevention project coordinators at pharmacies were carried out in Kyiv in March 2009, Donetsk region joined the pharmacy projects that same year, and relevant activities in Cherkasy, Dnipropetrovsk, Mykolayiv, and Odesa regions were significantly expanded. Pharmacies of different forms of ownership cooperating with NGO are involved in this work. RCs played an essential role in ensuring this cooperation, helping to carry out negotiations and sign contracts between pharmacies and NGOs, resolving issues at the level of SES and other government bodies. Syringe exchanges were carried out in all pharmacies involved in the project in Dnipropetrovsk region.

Alliance-Ukraine regional representatives set the important task of generalizing activities in overcoming the HIV/AIDS epidemic and maintaining a comprehensive approach. Cherkasy region's experience is demonstrative. Eleonora Gerasimenko, Regional Coordinator: *"In June 2009, the regional conference "Complex Approach to Overcoming HIV Epidemic in Cherkasy Region" was held, attended by the authorities, governmental and non-governmental organizations. At the conference the following issues were discussed: situation with how the Cherkasy Regional Programme on Overcoming the HIV/AIDS Epidemic is progressing; plans for the future; main achievements of the programmes of the ICF International Alliance on HIV/AIDS in Ukraine funded by the Global Fund to Fight AIDS, Tuberculosis and Malaria. Those present were familiarized with the HIV/AIDS epidemic situation in Cherkasy region and Ukraine and had an opportunity to assess the work results of NGOs and governmental authorities. Implementation results of the programmes (1st and 6th Rounds) on overcoming the HIV/AIDS epidemic financed by the Global Fund to Fight AIDS, Tuberculosis and Malaria in Cherkasy region, and activities on HIV prevention in penitentiary institutions were presented; the first results of prevention activities through pharmacies as well as the work of HIV/AIDS information centre were discussed. The conference was covered by regional SRTC, national TV and radio. A conference resolution was passed based on its results".*

On World AIDS Day and Memorial AIDS Day topical campaigns were organized in the regions as well as press conferences, in which regional coordinators took part. In three cities



of Cherkasy region - Cherkasy, Uman and Smila - with support from Levi Strauss Foundation through ICF "International HIV/AIDS Alliance in Ukraine", Living Libraries were carried out on Memorial AIDS Day. On December 3, 2009 a regional state broadcasting company held a round table in Odesa with an Odesa Alliance-Ukraine representative participating, as well as the head of the Department for Family and Youth of the Regional State Administration and the chief of Criminal Police on Children Affairs of the city department of the Ministry of Internal Affairs of Ukraine in Odesa region, dedicated to discussing the HIV/AIDS epidemic situation in the region.

The following are the main regional partners in overcoming the HIV/AIDS epidemic and other socially dangerous diseases: HIV/AIDS (and TB) regional coordination councils, main public health departments at regional state administrations; treatment and prevention institutions – AIDS centers, STI clinics, regional



drug clinics, tuberculosis clinics, sanitary and epidemic stations; social service centers; education and science boards; pharmacies; state department of punishment execution; USAID Health Policy Initiative Project, All-Ukrainian Network of PLWHA and others.

Work coordination at the regional level helps distribute new strategies to fight the HIV/AIDS epidemic initiated by Alliance-Ukraine, to increase project efficiency, to expand the range of prevention services and to provide access to integrated high-quality services to representatives of vulnerable groups.

Overall, we can note that 2009 was the year of building partner relations, which helped to fulfill goals and tasks undertaken by Alliance-Ukraine grantees in the regions.

## 5. HIV Prevention among Vulnerable Populations

### 5.1. HIV Prevention among Injection Drug Users (IDUs)

In 2009 150,815 IDUs were covered with prevention programmes, 24.4% of whom were women. HIV/AIDS prevention programmes among IDUs with Alliance-Ukraine support were carried out by 71 NGOs from 24 Ukrainian regions.

For some years already the projects supported by Alliance have been ensuring an integrated package of preventive, medical and social services to drug users. The creation and support of separate projects are not the only achievements. The infrastructure of civil society organizations has been expanded in partnership with government institutions, rendering services to vulnerable groups.

Currently all harm reduction programme clients among IDUs have access to the following services:

- syringe distribution and exchanges, alcohol swabs and/or condoms in in-patient, street or mobile syringe exchange points and through outreach work;
- voluntary counseling and testing for HIV with rapid tests;
- STI diagnostics and treatment;
- counseling on HIV-infection and drug use, provided by social workers trained within the framework of the programme, distribution of information concerning other preventive and medical programmes, which operate in the region (SMT and ART programs);
- referral system to specialized experts in cases when there is a necessity for highly specialized medical, legal or other counseling. If necessary, social support is provided to clients to receive the required services;
- self-help and therapeutic groups carried out on a regular basis;
- trainings and provision of relevant literature and information materials to clients;
- overdose prevention from opiate and stimulant use; some projects carry out this work using naloxone;
- distribution of general use medicines and intimate hygienic items;
- organization of clients' leisure time; vocational training and employment of project clients, etc.





Apart from the services listed, some cities offer services relating to leisure time organization, routine and employment at harm reduction public centers.

In 2009 it became possible to considerably expand the services provided to IDUs through cooperation with the State Social Service for Family, Children and Youth. Such partner relations were formalized in a tripartite agreement, which was signed in January 2010 between ICF “International HIV/AIDS Alliance in Ukraine”, the State Social Service for Family, Children and Youth and International NGO Labor and Health Social Initiatives. This partnership created an opportunity to provide services in 16 regional social youth centers in five regions of Ukraine (Kharkiv, Luhansk, Ivano-Frankivsk, Chernihiv regions and AR Crimea). Since October 2009, with Alliance-Ukraine support, trainings for project managers, VCT consultants, recorders of information, and social workers were given. Projects were started with five round table discussions to ensure partner relations in harm reduction activities. Currently social youth centers in five regions of Ukraine carry out distribution of preventives in in-patient and mobile stations and facilitate peer support groups for IDUs.

However, Alliance-Ukraine does not stop once results are achieved. It has introduced innovative approaches alongside traditional activities. Since 2007, in regions with a restricted drug use a model for attracting new clients was used called “Peer-Driven Interventions”. Also, in 2009 a model for attracting and working with users of injection and non-injection stimulants, which is described below, has been developed.

Also activities aimed at syringes exchange and distribution through a network of pharmacies is successfully ongoing, essentially increasing opportunities of IDUs to have access to HIV prevention services. Operation of mobile clinics, which began at the end of 2008, proved to be efficient as well and has become a very popular form of work among target groups. Mobile clinics became especially useful to injection drug users, who do not attend harm reduction projects, where IDUs were tested for HIV and STI and, if necessary, referred to treatment.

Additionally, in 2009 Alliance-Ukraine began preparing for the introduction of specialized harm reduction projects focused on female IDUs; pilot activities in this area will start in 2010.

Alliance-Ukraine activities in harm reduction among IDUs were highly assessed by AIDS Project Management Group. Ukrainian experience in programme implementation was described in a report titled, AIDSTAR-ONE HIV Prevention Case Study.

## Success Story

I am from Lviv. I studied there and graduated from a conservatory — I am an opera singer by profession. For a long time I worked abroad — first in Slovakia, then I moved to Poland. For two years I worked at the Wroclaw Opera, then in Katowice. I probably would go on singing because I was auditioned at the Warsaw Opera Theatre, but it so happened that a rock group, which gave a concert at our theatre, invited me to perform with them. I sang in a duet with their soloist, everybody liked it, and I was asked to perform more compositions. The concert was a success, and I received an invitation to work with the group.

I accepted their proposal as I wanted to earn some money — there were hard times in Ukraine and I had a child to bring up. I wanted to help in some way, but it happened otherwise. Their first soloist died from AIDS — all members of the group were drug users. Once I also tried, but it was not systematic, yet I fell into drug addiction nevertheless which I had been trying to avoid. Certainly, I earned enough money. For a couple concerts I received a fee equal to my monthly salary at the theatre. But my money was not used for good things...

For two years I had been using heroine, then stimulants, and at last I understood that things were getting worse and worse, my life turned in the wrong direction and I needed treatment. I signed documents on voluntary treatment and entered a rehabilitation center, but this probably not the way for me... I stayed there for about half a year and did not like myself very much... I gained 15 kilos. So I left this center and even made up about a reason for myself — I would inject drugs to lose weight. Since I had used drugs for ten years abroad I was included into a methadone programme.

And then I returned to Ukraine as it was difficult to live in a foreign city, in a foreign country. So, in 2001 I was back in my native city. But abroad I used to take methadone; so here it was a nightmare. I do not know what I would do if I did not have dry poppy. I even started working as a methodologist for a culture department. And then I faced problems with getting poppy straw and began to search for a way out...

I started treatment and that is why I came to Cherkasy. I became a patient of a drug treatment clinic where I met my future husband. So I remained in this city to help him — he also was a longtime drug user, he used drugs for about twenty years. I have been living here for three years already. I took a treatment course once, then another, and then I was put on substitution therapy. Since then my life began changing for the better. I was able to find work. I could not believe that in such a short period of time my life completely improved. It is a pity, my husband is not alive at this moment, he died a year ago. This treatment would not be effective at his phase as it was too late. Had we met earlier...

It was hard for me to live through his death, I even thought of suicide. I actually considered that the life was over. But there is still faith. There is my job. This is my second project at this organization — first I came to work within the PDI project, now I am engaged in social support — I just came here and felt something very close as home; I think of this place as home away from home. This is the way I feel. I don't think of my activities as work but simply as a way of life. I'm just trying to help, to do everything I can for those patients who are as sick as I once was. Who will help them if we refuse to? Today I work as a senior social worker. I can already be proud of certain successes: one my clients is now taking a rehabilitation course. It is very useful that I know the problem from the bottom. Patients trust me as they know that I have passed through all these troubles. They trust me even more than psychologists because this person does not know everything from personal experience, and I have felt all their horrors, I have lived through all their troubles.

And what about singing? You know, I have not sung for a long time, I simply could not sing. But it seems that the time for singing will come soon.

Social worker, CF "VAM", Cherkasy

*Today the "VAM" Charity Foundation with Alliance-Ukraine support (within the framework of the Global Fund program) implements the project titled, HIV Prevention among Injection Drug Users and Stimulant Users through a Network of Pharmacies and Support of Public Center Activity in Cherkasy.*



## Distance Education of Social Workers

Despite the fact that Alliance annually conducts about 80 trainings for different specialists of partner NGOs, the problem of raising the qualification level of social workers still remains very important. A big number of social workers at NGOs (about 800), high staff turnover and limited resources do not allow for the provision of necessary information and methodical support timely. For this reason, in October 2009 a distance learning project for social workers was started. This project enables us to maintain the necessary minimum level of knowledge among project workers. This educational course includes basic materials necessary for working with vulnerable groups to foster self-learning.

Distance learning is implemented gradually. Thus, once a month a lesson on a certain topic is sent to civil society organizations via e-mail. This lesson includes a theoretical part, knowledge test questions and answers as well as a list of additional literature.

During three project months lessons on the following issues were sent to partner organizations:

- HIV. Basic concepts.
- Lubricants and their use.
- Stimulant overdosing. Acute psycho-stimulant intoxication.
- Tuberculosis.
- Multiresistant tuberculosis.

The first manual based on distance learning materials is planned for publishing at the end of 2010. Due to positive feedback from many organizations, Alliance-Ukraine will develop this area in future.

## 5.2. HIV Prevention among Commercial Sex Workers (CSWs)

In the Alliance-Ukraine supported prevention projects, the amount of commercial sex workers (CSWs) covered by prevention package and social services in 2009 was 25,328 persons. 41 NGOs from 21 Ukrainian regions received grants to implement projects in "Prevention of HIV among commercial sex workers (CSWs)".

Every project has an integrated package of activities for HIV prevention among CSWs and stipulates provision of the following services:

- delivery of condoms, lubricants, local antiseptics, pregnancy tests, and other hygienic and disinfection items;
- exchange or delivery of syringes to CSWs who are IDUs;
- delivery of information materials with regard to the decrease of risky behavior, HIV and STI prevention, materials indicating medical institutions that co-operate with NGOs;
- counseling under "peer-to-peer" principle;
- expert counseling (psychologist, lawyer, doctors – according to the relevant needs of the project clients);
- counseling on HIV and STI prevention; counseling to reduce harm of drug and alcohol use; consultations in order to decrease risky sexual behavior;
- conducting groups of self-help, psychological support and trainings to form safe behavior skills;
- targeted referral or support of clients to other specialized projects and organizations;
- voluntary counseling and testing for HIV and STI diagnostics with rapid tests in public centers, in-patient departments, mobile departments, mobile clinics and outreach);
- referral to STI treatment.

Prevention activities among clients and partners of CSWs are also conducted within the projects: condoms, syringes, and information materials are distributed, counseling on HIV and STI issues is carried out, and tests to detect these infections are conducted.

Depending on the needs of CSWs, organizations also have an opportunity to provide additional services within the project (often within the activities of harm reduction public centers):

- basic everyday services: shower, laundering, ironing, etc.;
- tea and meals;
- temporary child care and help in allocating children to kindergartens;
- services of a cosmetologist, hairdresser;
- courses in sewing and needlework;
- arrangement of leisure and rest;
- humanitarian aid;
- courses in massage therapy, cosmetology, nutritional science, first pre-medical aid, computer science, etc.;
- information and education activities among CSW children;
- professional training and employment etc.





## Innovative Prevention Approaches among CSWs

### *The experience of All-Ukrainian Charitable Organization “Convictus”*

During the last year “Convictus Ukraine” implemented a number of innovative approaches to conducting fieldwork with CSWs in the context of HIV/STI prevention.

Presently, the most important and effective achievement working with this target audience is uniting different projects providing services to CSWs within one organization. Three projects: “Step towards” (financed by Alliance-Ukraine), “Peer Driven Implementation” (financed by Alliance-Ukraine) and “Equality. Attention. Motivation” (financed by AFEW) working with CSWs formed a “chain” of services, starting from harm reduction and ending with social support. Thus, beginning our work with this target group at the outreach level, we have the possibility to engage them in “deeper” work with specialists which helps to solve many problems. This complements outreach work and work in the public centre, forming a unified system of rendering services to this target audience. It is important because previously the target group of CSWs had not been covered so comprehensively and deeply. Clients now have the opportunity to receive services from the harm reduction project and solve socio-psychological, medical, and legal problems important to them.

At the public centre, the following integrated package of services can be received: food, humanitarian clothes, laundering, ironing; educational services: art-therapy, courses for skin care, trainings, information classes, peer support groups, computer courses; arrangement of leisure activities: movies, massage, haircut as well as HIV/STI testing and referrals to other programmes. Access to medicines, personal hygiene items (panty liners, wet wipes, tooth brushes, soap, shampoo, etc.) is very important.

Courses of facial and skin care, massage therapy as well as haircut services are new services provided by the centre. These services enabled involving more CSWs into the project. They also facilitated making contacts with clients and fastened

the process of establishing trust between clients and social workers. Besides, while receiving the above-mentioned services clients get basic information on less risky sexual behavior, on the different ways HIV/STI gets transmitted, infection prevention, and social workers have the possibility to obtain information on the work conditions of clients, making it easier to work with such clients in the future and also allows them to obtain information about target audience. We should note that these services have a positive influence on the clients' emotional state. The spectrum of educational services in the public centre was also expanded. They are informational and educational classes on less risky sexual behavior, HIV/STI prevention, and peer support groups aimed at overcoming psychological traumas and feelings, watching prevention films, the chance to participate in trainings on safe behavior and on forming less risky behavior with regard to HIV/STI transmission.

### **Various methods are used to involve clients into the project:**

1. Counseling and delivering informational materials on how services may be received in our organization. We constantly work on improving the visibility items of the project in order to make them more interesting and colourful (for example, calendars that are specially developed for CSWs).
2. Delivering motivational sets for CSWs that include personal hygiene items (soap, tooth brush, panty liners, chlorine hexidine).
3. Delivering standard handouts.
4. Involving clients through “Peer Driven Interventions”.
5. Finding CSWs on the Internet and informing them on project activities.
6. Co-operation with partner organizations working with this group and distribution of our project visibility items through outreach workers of such organization.

*Currently with the support of Alliance-Ukraine, CONVICTUS UKRAINE (within the framework of the Global Fund Program) is implementing the project “Step towards” which in particular will include activities of a public harm reduction centre.*



## CSW Community Mobilization as a Way towards Efficient Prevention Activities

Projects that are implemented in the area “Mobilization and building capacity of communities vulnerable to HIV” stipulate support and development of organizational capacity of initiative groups and organizations of the CSW community in order to create a favorable environment to expand prevention, care and support services for this target group and also to increase the level of involvement of community representatives into development, implementation and assessment of prevention programmes. The national project of “CSW community mobilization” is implemented by Ukrainian Harm Reduction Association, a national charitable organization.

Within the project framework “League “Legalife”, a CSW organization, was registered on December 4, 2009. The “League” is the first CIS organization that unites CSWs and

## Peer Driven Interventions for CSWs

Given the PDI model's success among IDUs, it was decided to adapt this model for use in HIV prevention programmes among CSWs. Three organizations were chosen to take part in the pilot projects: Convictus Ukraine (Kyiv); Hope and Rescue (Simferopol); Donetsk regional society providing assistance to PLHA (Donetsk). In October 2009 all participants of the pilot project passed 6-day model introduction training.

Unlike traditional prevention programmes, this model is based on the principle of involving and teaching new clients the peer-to-peer method via using existing networks. The project aims at attracting hard-to-access categories of the target group, giving them vital information on HIV/STI prevention, and providing them access to necessary services.



defends their rights. Leaders of the organization and members of CSW initiative groups actively participate in prevention programmes, help community representatives obtain necessary services from local NGOs and governmental organizations, conduct trainings for CSWs and consult on HIV/STI prevention issues. In their turn, project staff comprehensively supports the work of initiative groups: arranges trainings for leaders, develops informational materials on vital themes for CSWs, and consults on organizational capacity building issues, etc.

“League “Legalife” with Alliance-Ukraine support conducted a press-conference on International Day against Violence towards CSWs devoted to protecting rights and tolerant attitude towards commercial sex women on December 17, 2009 in Kyiv.



## Female Condoms

Within the programme Support for HIV and AIDS Prevention, Treatment and Care for Most Vulnerable Populations in Ukraine (2007–2012) financed by the Global Fund to Fight AIDS, Tuberculosis and Malaria within the framework of the 6<sup>th</sup> Round, prevention work was planned with CSWs by distributing female condoms (femidoms) as an additional method of barrier contraception.

Representatives of the NGOs working on HIV prevention among CSWs and leaders of the CSW community were trained on reproductive health on December 9–11, 2009. During the training, participants were exposed to a Russian project on femidoms (trainer and project manager – Irina Maslova, Saint Petersburg, Humanitarian Action Foundation), to acquire

## Success Story

My name is Alla. I am 52 years old.

What shall I begin my story with?.. I will probably begin with my arrival to Kyiv. I fell in love with a man, we started living together, I found a job and... became pregnant. Later I gave birth to three more children – two girls and a boy. From this time my husband started drinking heavily. We quarreled often, sometimes even had fights. Then we reconciled, but our quarrels went on and on... In 2 years we separated. With my second husband we did not live long. In 10 days after the birth of my fifth child he died. And then the dark days of my life began. My grief and loneliness pushed me to seek salvation in alcohol. Then the government settled everything “for me” and “without me” – my turn for getting an apartment was deprived along



counseling skills on reproductive health issues and using female condoms, to develop a training plan for staff and clients of the project. The participants together with trainers and officers of Alliance-Ukraine discussed the advantages of using female condoms and possible risks of project implementation. Twenty organizations agreed to take part in the research on possibilities of using female condoms in HIV prevention projects among CSWs that will be conducted from February to July 2010.

with my parental rights, and my four oldest children were sent to a boarding school. I remained alone, with a baby in my hands, without a job, and in general without anything... At that moment I had two acquaintances. They earned a living as prostitutes at a motorway. Before, such a thought as selling my body never could enter my mind, but once being drunk I went with them. I did not like such way of earning money but it gave me a stable and sufficient income, and since I was not able to find a job (with 5 children!), there was no other way to support myself and my child. So that was how I lived. When my girl turned 3 years old she was taken away from me too. Being lonely for entire day, I started drinking more and more, and at night I went to work to the motorway to get money for buying clothes, food, gifts for children, and alcohol for myself as I could not go to work being sober.

One evening I met (there, on the motorway) a new friend. She used drugs and came to work only in order to earn money to buy a dose (as myself – to buy a bottle). We started working together; we helped and supported each other, passed along money for safekeeping... Later we found out that we were neighbors – we lived in neighboring houses, and since then Lena became a frequent guest in my house. She knew all my family members, and they all knew her. She visited us to inject or just to visit, and even tried to “get off” drugs with vodka... But once she disappeared for a long time. Later I got to know that she gave up drugs and settled down to work in a charitable non-governmental organization... One day she said they had a vacancy for a social worker to work with FSWs. First I did not dare to go and work with her...

But I began to go on work visits with my friend. I attended training on outreach work. I got involved in the work. From October 2010 I work in the Drop in Center as a social worker in HIV prevention among CSWs. We have a public centre NIKTA, and there we welcome any woman who has found herself in a difficult life situation. I go on routes, looking for girls, sometimes they are the same as I or Lena once were. I speak a lot with them, try to help or to refer them to those who can help. And my own experience helps me in this work.

Recently Lena and I organized and conducted a campaign in the center of Kyiv, and the purpose of it was to draw public attention to the problem of violence towards CSWs. In our center self-help groups are being conducted, during which we help girls to cope with their emotional problems. I feel I am needed, and it helps me to live.

Now I live together with my adult son. My two junior daughters have been married for a long time. I have a grandson and granddaughter, and I know that the next day will bring me joy of communication with my relatives, new impressions and possibility to change somebody else's life for the better.

*Currently the Charitable Foundation “Drop in Center” with support from Alliance-Ukraine (within the framework of the Global Fund Program) is implementing a project Complex of CF Drop in Center initiatives in HIV/AIDS prevention, expansion of access to VCT, psychosocial support and advocacy of the interests of groups vulnerable to HIV/AIDS in Kyiv.*

### 5.3. HIV Prevention among Men Having Sex with Men (MSM)

In 2009 “International HIV/AIDS Alliance in Ukraine” supported prevention work among MSM carried out by 17 non-government organizations that were conducting activities in 13 regions of Ukraine (Dnipropetrovsk, Donetsk, Zaporizhyya, Ivano-Frankivsk, Kirovohrad, Lviv, Mykolayiv, Odesa, Kharkiv, Kherson, Khmelnytsk, Cherkasy, Chernivtsi), cities of Kyiv, Sevastopol and Crimea.

Main project activities were:

1. distribution of condoms and lubricants on outreach routes;
2. group and individual counseling on safe behavior, HIV/AIDS and STI;



3. trainings aimed at forming safe behavior, including motivation to use condoms and lubricants, voluntary counseling and express HIV diagnostics, STI testing and treatment;
4. distribution of information materials; conduct of peer support groups;
5. individual and group counseling by a psychologist; peer to peer counseling;
6. referral to services provided by partner organizations;
7. distribution of information on available services in the community.

In 2009, 12,833 MSM were covered by prevention services related to Alliance-Ukraine project activities. During 2009 5,397 MSM passed testing with rapid HIV-tests, and 6,427 MSM – STI-tests.

During 2009 the “International HIV/AIDS Alliance in Ukraine” took a number of measures directed at improving the quality of project services, reduction of stigma and discrimination towards MSM, and mobilizing the lesbian, gay, bisexual and transgender (LGBT) community. As such, last year two trainings for outreach workers were conducted as well as a training under a mentor support programme. Under Alliance assistance, training on organizing and supporting public centers was held, during which about 70 persons were trained. With Alliance support, 8 meetings of the Permanent Reference Group on LGBT Community and MSM-Service Projects in Ukraine were held as well as the Seminar-Forum on Implementing MSM-Service Projects and Activities of LGBT Organizations in Ukraine in 2009.

In addition, a study was conducted named Experimental Study of the Effectiveness of Customer Acquisition in MSM Projects through the Online Social Networks within the framework of the projects on HIV prevention among MSM. This study showed that using on-line networks for involving potential clients is prospective. New clients who differ by their social and demographic characteristics were involved in the projects. The study found that services given in MSM projects meet new clients' needs.

The publication ***Social work with people, practicing uni-sexual sexual relations. Theory. Methodology. Best practices*** became the key publication of 2009 on HIV prevention among MSM. This book is intended for leaders and activists of the LGBT community, experts and social workers, for all those who work with LGBT organizations and groups with the aim of creating a comfortable environment and to prepare required services for MSM. The book describes LGBT-specific needs and services, best practices and methods of overcoming homophobia as well as advocacy and lobbying interests, mobilization of the LGBT community and the role of LGBT movement in the public and political life of Ukraine.

In June 2009, 4 representatives of regional NGOs working in the area of HIV prevention among MSM in Ukraine and one Alliance-Ukraine officer participated in a study trip to Great Britain. Participants of the trip visited 4 organizations and familiarized themselves with prevention work among MSM and male sex workers, with the work of a mobile clinic and public center for MSM, with a project for preventing violence towards men as well as a counseling center. This trip inspired participants to implement innovations in the area of HIV prevention among MSM in Ukraine, in particular in developing an organization-based volunteer movement.



II NATIONAL  
CONFERENCE OF  
LGBT-MOVEMENT  
OF UKRAINE  
**PARTNERSHIP  
AND DEVELOPMENT**

### **Second National Conference of LGBT Movement and MSM-Service Organizations in Ukraine titled “Partnership and Development”**

The Second National Conference of LGBT Movement and MSM-Service Organizations in Ukraine, titled Partnership and Development was held on May 28–30, 2009 in Kyiv.

The participants included 83 community leaders representing 18 regions of Ukraine, 25 cities, 27 organizations and 10 LGBT initiative groups as well as partner organizations from Russia, Belarus, and Germany.

The main purposes of the Conference were to create conditions for sharing experience between the participants of LGBT movement in Ukraine, assessing their positions on vital issues of LGBT movement and MSM service, increasing the conference participants' professional ability to work on healthcare for LGBT/MSM/FSWs, further mobilizing LGBT community of Ukraine.

#### **The following activities were carried out during the three-day Conference:**

- presentation of key studies, events, and publications;
- poster session presenting the activities of Ukrainian LGBT- and MSM-service organizations and LGBT initiative groups;
- session for conference participants to get acquainted with each other on a regional level;
- master classes and workshops on vital subjects: HIV/AIDS and STI prevention, psychological support and creation of favorable environment for LGBT, organization of public centers, outreach work, preparation of information materials for LGBT, advocacy and mobilization of LGBT community, etc.;
- discussion of LGBT initiative group development and establishment.



## Success Story

### Experience of Babylon Public Center for LGBT Community Representatives (Odesa)

Babylon public center for LGBT community representatives started its activities in December 2008 as part of the Partner Youth Public Movement with Alliance-Ukraine support. Both center staff and volunteers and project clients actively participated in preparatory works: repairing, equipping – everything was done with their hands. The center has already celebrated its first anniversary – it was fun, with both clients and partners invited to the holiday.

During the year about 700 people became clients of the center. It works every day from 12.00 to 21.00, but often workers and clients stay there late at night as there are many plans, a lot of ideas and optimism. The center's premises is small – two



rooms (a hall and an office) with workstations, two computers with Internet access that are used by clients, a kitchen, a storage room, and a WC. Under partnership agreement with the governmental organization Student Communication Center, Babylon under preferential conditions leases one more hall where groups, entertainment, and a cinema club meet. However, the space is too small as there are many clients and the center is not able to fit all of them.

Nevertheless employees of the center are not afraid of difficulties and are always looking for new clients. They are looking for them online, on specialized web-sites for MSM community and dating sites; through partnership with an Odesa club offering discounts to clients of the center, high-quality outreach work, and business cards of the center being distributed in entertainment places visited by MSM.

*“Our public centre is almost full-cycle: the client comes in the morning, sits in front of the computer, does some work, then has lunch, has a conversation, attends a group or a club, and at nine o'clock we are closed... We only don't offer night accommodation and if we had bigger premises, we would do it. An individual client approach is vital to us. When a person comes to us, he is not just our client. He is our friend, our family member. We do not build our communication on a worker-to-client principle. Though I am the director of this center, I am still their friend as is everybody else. My employees also support peer-to-peer communication.”*

Henrikh, public centre coordinator

Babylon public center offers a wide range of social, prevention, community and entertainment services. Apart from interest-based groups, trainings and work of psychological support groups, great attention is paid to clients' leisure. It includes a movie club, showing topical and prevention films, participation and free study at master classes on massage therapy, on using a personal computer (we are also planning sport and ballroom dance classes), participation in a music club, organizing and conducting different entertainment events.

Certainly, we do face difficulties in our work. The limited space we use does not allow accepting many clients simultaneously; we feel a sharp lack of specialized information materials for the target group of the project, especially for HIV-positive MSM. Unfortunately, sometimes we encounter homophobia, stigma and discrimination towards LGBT community from the public, a negative attitude from the house's residents where the center is situated as well as of employees of nearby organizations. One more problem is the age differentiation – our clients include both young and old people, and it is difficult for the latter to cohabitate with youth, they need a quieter place.

Nevertheless employees of the center are full of new development plans: they look for possibilities to expand the premises, plan to increase the range of services provided to LGBT community, to carry out prevention activities among MSM in prisons; to spread work of the organization to other cities outside of Odesa and also to work with LGBT community representatives – CSWs, and to create day-and-night center with temporary living accommodation.

## 5.4. Harm Reduction Programme in Penal Institutions

In 2009 ICF “International HIV/AIDS Alliance in Ukraine” supported projects on HIV prevention in penal institutions of two grant cycles in the 6<sup>th</sup> Round with Global Fund support. From January 1 to September 30, 2009 19 projects were being implemented in which prevention activities were conducted in 34 penal colonies, one juvenile correctional facility and 10 PTDCs in 16 regions. From October 1 to December 31, 2009, 21 projects were operating, in which prevention activities were conducted in 41 penal colonies in 15 regions. In 2009, 27,372 persons were covered with prevention programmes.

- provide humanitarian aid;
- deliver food rations;
- distribute information materials among prisoners;
- broadcast lectures;
- counseling with psychologists and social workers.

Extra services:

- post-release social support to prisoners;
- arranging theater performances by volunteers;
- consultations on HIV/AIDS issues and drug dependence given by doctors and project workers;
- conduct self-help groups;
- peer-to-peer training of consultants;



The following services were provided in the projects:

- conduct interviews with prisoners (ascertain level of knowledge on HIV/AIDS issues);
- train volunteers from among the prisoner population;
- distribute condoms, tooth brushes, and shavers among prisoners;
- give informational classes to employees of penal facilities;
- give informational classes to prisoners;
- carry out prevention campaigns;

- doctor consultations: infection specialist, gynecologist, dermatovenerologist;
- provide disinfectants for sterilizing tattoo instruments;
- lawyer consultations;
- rapid tests for HIV and syphilis;
- peer-to-peer consultations;
- employment assistance for released prisoners;
- informational material delivery for prisoners;
- prisoner computer classes;
- conduct of art groups, picture contests, poster contests, poetry contests, theatre performances on prevention themes, art-therapy classes, prisoner leisure activity organization;

In the new grant period (starting from October 1, 2009) projects were brought together within a unified system. All the projects supported by Alliance-Ukraine as a result of an open call for proposals, provide the following services:

- train volunteer-consultants among the prisoner population to work under the peer support principle by giving informational classes/trainings. Volunteer training is completed with an exam and receipt of a peer consultant certificate. Volunteers provide counseling on safe behavior, HIV/AIDS and STI, motivate prisoners to visit medical sanitary department for HIV/AIDS testing;
- prisoner support given a positive rapid HIV test result, positive prevention, referral to All-Ukrainian Network of PLWH;
- counseling of psychologists and social workers, self-help or psychological support groups;
- distribution of prevention materials among socially dangerous persons and those who lost social bonds: condoms, tooth brushes, shavers, other disposable materials and information materials through peer-to-peer support volunteers or through health care departments;
- conduct information classes for prisoners on the following issues: HIV/STI, hepatitis, and tuberculosis prevention, developing communication skills with a partner regarding condom use, etc.;
- conduct information trainings for staff of penal facilities;
- organize and conduct at least 2 mass prevention campaigns: lectures, concerts on prevention issues, activities devoted to AIDS Memorial Day, to World AIDS Day and others.

The following extra services are provided within the projects:

- distribution of condoms in meeting rooms;
- provide humanitarian aid;
- art-therapy, sport competitions, entertainment games, drawing contests, theatre performances on prevention themes;
- computer classes.

The project Informing, Counseling and Testing to Ensure High-Quality HIV-Service in Penal Facilities of Ukraine implemented by AFEW began on November 1, 2009. The purpose of this project is to extend prisoner access to information materials, HIV/STI testing with rapid tests and STI treatment.

## **Success Story**

### **The Way Home Charitable Foundation. Work experience in penal colony No. 74 (according to social workers)**

The first major achievement working among women serving sentences in colony No. 74 is that they are not forced to attend classes. They attend on their own free will. Sometimes there is no empty place where the peer support groups are conducted (though the room is not small). What is of great pleasure is that we feel the material received at the trainings and peer support groups is well mastered and memorized. The imprisoned women actively and willingly engage with us.

We pay much attention to social support within the project, especially with regard to persons released from prisons. We try not to lose contact with them, and it is always pleasant to hear that their life is getting better. We already have enough examples of successful work. One of the first group participants who was released exactly a year ago for health reasons (low level of CD4 cells), today feels better. He has secured a pension, and keeps in touch with an HIV-service organization in Simferopol. And what is most important – she transfers the knowledge she received at the trainings in the colony to HIV-positive people who need it.

A second prisoner, who was released in May 2009, has already managed to get her child back who was at Perlinka Boarding School and is very grateful to our organization for post-release assistance – it took a long time to find out what documents are needed to get the child back. Another imprisoned woman who was pregnant when she joined the group through the knowledge obtained at meetings and trainings was able to defend her interests and not to terminate ARV treatment during pregnancy.

We are also looking for new forms of work. For example, HIV-positive girls with drug use experience who were released before July 2009 have the right to receive free rehabilitation in a nice center along the seaside of the Black Sea (28 days). We established close contacts with the Regional Center for Social and Psychological Help, which can accept our clients after their release with full board included for up to 3 months.

Sometimes there are situations when we help women in critical situations. There was a woman whom we met near the colony gates right after she was released. The temperature outside was 6 degrees below zero, and she was wearing light clothes and holding a little child just one month old. We carried her to the public center of our organization, where she got a full package of services: food, clothes and diapers for her child. In the evening we took her to the train to Chernivtsy.

*The Way Home with Alliance-Ukraine support (within the framework of the Global Fund Program) is currently implementing the Aspiration to Live 2010 project, which in particular stipulates activities in the area of HIV Prevention in Penal Institutions.*



## 5.5 HIV Prevention among Street Children

Alliance-Ukraine's partners in Building Capacity of the Programmes for Street Children are the Ministry for Education and Science of Ukraine (MES), the Ministry of Ukraine for Family, Youth and Sports, and the Ministry of Internal Affairs of Ukraine (MIA). This programme covers all administrative regions of the country.

The target group of this area includes children aged 10 to 18 years, especially those vulnerable to HIV due to their lifestyle, who are staying in government institutions subordinate to the above-mentioned ministries. Mainly they are children who have been without parental care, who belong to so-called "dysfunctional families" (social orphans) or homeless children who lost their biological parents.



In 2009 the Global Fund Programme was the only source of financing for HIV/AIDS prevention projects aimed directly at "street children" living under the care of special government facilities for children: no funds were allocated to this area from the state budget.

In 2009 prevention classes and trainings for staff and children were systematically held in 90 shelters where children under 18 can stay for 3 months and 25 centers for socio-psychological child rehabilitation where children can stay for up to 9 months (subordinate to the Ministry of Ukraine for Family,

Youth and Sports). As of the end of 2009, 146 specialists of these facilities (32 specialists of children departments, 82 workers of children shelters of the said departments, 32 workers of children centers for social and psychological rehabilitation) were trained in HIV/AIDS issues. HIV-prevention activities and support for HIV-positive children were carried out among 10,959 children including 9,052 children from shelters of the children departments and 1,907 children from children centers for social and psychological rehabilitation.

586 directors, teachers and educators were trained in 11 schools and 3 professional technical schools of social rehabilitation for children subordinate to the Ministry for Education and Science of Ukraine within the framework of activities in this area, who gave prevention classes to 2,256 pupils. Workshop trainings were organized for 60 operating officers



and senior educators of pre-detention facilities for children (subordinate to the MIA). Systematic work on HIV/AIDS prevention among detained children was started; prevention classes were conducted for 55 children.

In 2009 cooperation began with non-governmental organizations which have rehabilitation centers for "street children", in particular, "The Way Home" carried out systematic prevention work with 46 homeless children.

The aforementioned institutions and facilities were provided with prevention table games and the 5<sup>th</sup> edition of "People and HIV" printed in the reporting year. In particular, this book describes prevention work strategies with children and teenagers with risky behavior. Special trainings were conducted to teach specialists on the methodology of using prevention games. 4 specialized issues of "Information. Views. Outlook"

magazine for those who work with “street children”, in which theoretical and practical principles of work with this category of children are clarified based on safe behavior skills formation, were distributed among all institutions (grant recipient – Youth Participation Charitable Foundation). Special training programmes were developed; a film archive and a unique collection of educational and methodological materials were created; the leading national specialists in the area of field work with children from crisis categories and children's HIV-infection were involved in the trainings.

Overall, as of the end of the year, 13,316 children who remained without parental care – “street children” – were covered with prevention activities within the programme.

In 2009 preparation was started to develop prevention mate-

adapting methodology of the regional situation assessment with involvement (RAI) conducted in November 2009. Its purpose was to clarify the needs of children living in the street within the context of problems related to HIV/AIDS. A team of trainers including leading NGO specialists having a wide experience in preparing RAI teams was created.

Thus, beginning from 2009 Alliance-Ukraine started prevention intervention focused on both segments of the vulnerable group of children living under difficult circumstances: staying in shelters and living on the street. This approach will promote deeper research and a better understanding of behavior and needs of this target group. This in turn will help to develop, implement, and estimate service



rials for such children: in order to determine their information needs and preferences of the target group concerning the materials' format and design, 8 focus groups with 10–12 and 13–15 year-old children from different facilities were conducted.

Work with “street children” was also conducted within SUNRISE project – activities in the area “Development, Approbation and Estimation of the Models of Providing Prevention Services to Vulnerable Street Children” in the cities of Kyiv, Donetsk, Mykolayiv, and Odesa was started. These activities are focused on children who for a certain period remain both out of parental care and outside of specialized facilities, living on their own and who are at peril of acquiring HIV due to their risky behavior. The first activity included a work meeting on

models for children living outside of their family, “in a high-risk environment”, for further formalization of the best of them.

## 6. Innovative Approaches and Innovative Technologies in HIV/AIDS Prevention

### 6.1. Prevention Programmes on Harm Reduction through Pharmacies

World practice shows that in many countries leading positions in implementing prevention programmes among vulnerable populations, in particular IDUs and CSWs, belong to pharmacies as they are accessible (often round the clock) and a safe place where prevention programmes could be held.

In Ukraine pharmacy interventions began in 2007 at one pharmacy in Kyiv. Currently there are 108 such pharmacies.

In 2009 an HIV-prevention pharmacy programme among vulnerable populations was geographically expanded. Thus, in the beginning of 2009 the prevention programme operated in 39 pharmacies in 8 regions of Ukraine (7 oblasts and the city of Kyiv), in the middle of the year there were already 78 such pharmacies in 10 regions, and by the end of the year 108 pharmacies were involved in cooperation with 25 NGOs working in 13 (out of 27) regions of Ukraine.

The pharmacy project started in the capital in 2007 and in regional centers of Ukraine. Today, through many NGO initiatives it operates in district centers, small towns and even in villages of Cherkasy, Mykolayiv, Odesa, Kherson, Dnipropetrovsk, and Lviv regions.

In 2009 the number of participating pharmacies increased as well as quality improvement in operation and service packages rendered: registration of new clients in pharmacies (delivery of harm reduction programme participants' cards) and syringe exchanges.

A standard package for programme clients (IDUs and CSWs) contained: free syringes, alcohol swabs, condoms, information materials, referrals to NGOs and health care facilities for additional services. Since confirmation delivery of prevention items in pharmacies is fixed in a statement, in which the date of visit, programme participant's card number as well as the quantity of items delivered are mentioned, only those IDUs and CSWs having harm reduction programme cards issued by NGOs could take advantage of pharmacy services.



According to research conducted in 2008 as well as observations made by pharmacy workers, not all IDUs and CSWs wishing to receive services in pharmacies went to NGOs in order to get a participant's card. In order to provide wider access to groups vulnerable to HIV to Alliance-Ukraine prevention programmes, starting from April 2009 Alliance-Ukraine decided to issue programme participant cards in pharmacies. Additional trainings for pharmacy workers were conducted with a focus on tolerance and ability to communicate with potential programme clients.



Due to this fact 5,420 new IDUs and CSWs became participants of the pharmacy programme and received programme participant cards in pharmacies. The total number of clients has reached 14,264; they visited pharmacies more than 140 thousand times over the year.

After the advocacy project (implementer – All-Ukrainian Pharmacy Association), the Ministry of Health of Ukraine issued Order No. 56 dd. 03.02.2009 “On Starting a Pilot Syringe Exchange Project” allowing used syringe exchanges at pharmacies. Unfortunately, the pharmacy-based projects proceeded but the syringe exchange did not begin in all the pharmacies mentioned in the MoH Order. However, this document allowed implementing the syringe exchange in other pharmacies whose owners understand the necessity of organizing

If in 2008 syringe exchanges were carried out only in 5 pharmacies (Pharmacia pharmacies in Kryvyi Rih), today it is already carried out in 28 pharmacies in 5 regions of Ukraine. These are pharmacies operating in Dnipropetrovsk, Kryvyi Rih, Novomoskovsk, Pereshchepyne village, Mariupol, Lviv, Poltava, Odesa, Bilyaivka village, Mayaky village (Odesa region). To expand this positive practice to all pharmacies involved into the project, the question of syringe exchange and disposal of used syringes collected within the harm reduction programme at the national level must be resolved.

During 2009 an educational module was prepared to work with vulnerable groups in pharmacies. Also, three two-day workshops (in March in Kyiv, in September in Odesa, and in October in Lviv) were conducted where 67 pharmacy workers and 27 pharmacy project coordinators were trained.



a complete cycle of prevention services: not only providing IDUs with clean injection tools but also a safe environment from used syringes. A permit for syringe exchanges was agreed with the local and regional Sanitary and Epidemiological Stations.

In pharmacies there are containers where IDUs put their used needles and syringes, informing a pharmacy worker on the number of syringes brought. NGO social workers who cooperate with pharmacies within the project collect and transport the syringes to a disposal place.

Alliance-Ukraine employees gave presentations on the pharmacy project and achievements in Ukraine at the SUNRISE project conference (Kyiv, July 20, 2009) and also at the Third AIDS Conference in Eastern Europe and Central Asia (Moscow, October 28–30, 2009).

## 6.2. Mobile Clinics

As of November 2008 mobile clinics operate in 14 HIV-service NGOs, namely: Cherkasy Charitable Organization of PLWH From Heart to Heart, Club Eney (Kyiv), Charitable Foundation Rehabilitation Center of Drug Dependent Virtus (Dnipropetrovsk), Donetsk Regional Charitable Foundation Oberih, CF Public Health (Krivyi Rih), Public Organization AMIKUS Association (Donetsk region), Luhansk Charitable Foundation Step to the Future, Vinnytsya Public Congress Stalist, Kharkiv City Charitable Foundation Blaho, Charitable Foundation SALYUS (Lviv), Youth Center for Women's Initiatives (Sevastopol), Mykolayiv Local Charitable Foundation Yunitus, Charitable Foundation Hope and Rescue (Simferopol), Kherson Regional

by 40 representatives of NGOs and doctors from 15 regions of Ukraine. As of January 1, 2010 representatives of vulnerable groups visited MCs for a total of (beginning from October 2008) 56,488 times.

Basic services provided at MCs are:

- screening testing for syphilis with rapid tests;
- screening testing for gonorrhea with rapid tests;
- screening testing for Chlamydia with rapid tests;
- counseling on STI issues;
- dermatologic and STI examination on gynecological chairs with disposable tools and disposable materials;
- target referral to health care institutions for further diagnostics and treatment with medicines;



Charitable Foundation Manhust. These clinics conduct HIV/AIDS testing and provide medical and counseling assistance to most-at-risk populations: to female sex workers and injection drug users.

These mobile clinics provide groups vulnerable to HIV with counseling and rapid tests for STI (chlamydia, gonorrhea and syphilis) as well as HIV tests. In the case of positive results, information is given where treatment can be received. To ensure effective operation of mobile clinics (MCs), training on MCs work organization was prepared and held, attended

- informing and counseling on STI and HIV prevention;
- voluntarily counseling and testing for HIV;
- psychological help (with psychologists having work experience with vulnerable groups' representatives).

### 6.3. Harm Reduction Programmes for Stimulant Users

Alliance-Ukraine in cooperation with the Open Society Institute developed an innovative programme for stimulant users that was piloted during 2009 at three organizations: Step by Step (Kyiv), Youth Development Center (Odesa, site of Yuzhnyi city), Youth Center for Women's Initiatives (Sevastopol).

Development of this intervention was carried out in several stages. In the first stage, focus groups were conducted in every pilot site to assess the field situation. The second stage involved a training that was conducted individually for every organization. Decentralized training was used in order to define local specifics and develop recommendations for better implementation of the model. The preparatory stage enabled us to identify the proper interference, and in the future, develop a training module for conducting work with stimulant users.

Thus a “group-level intervention” was prepared consisting of 12 weekly classes with the same group of injection stimulant users. The duration of one class was 90 minutes, and it is conducted by two facilitators. During pilot project introductions, 69 persons participated in the classes, including 29 (42%) women. 73% of participants participated in all 12 lessons refuting prejudice that long-term work with this group is not possible.

“Group-level intervention” also stipulates education under the peer support principle. It allows for dissemination of the knowledge received in stimulant users' environment and to involve new participants.

Such activities appeared to be rather successful. As a result, 2,842 consultations were conducted, including 32% with women. According to volunteers, the biggest part of their group includes people aged 25–34 who use stimulants in injection, peroral or nasal entry. The data collected by the intervention participants in general correspond to the data of 2009 operation research among stimulant users demonstrating a high level of trust among the project participants and social workers. It was also detected that most of all stimulant users are interested in how HIV is transmitted, about HIV testing, tuberculosis testing, and also the connection between drug use and sexual behavior.

On the whole, the intervention proved to be effective in involving and working with IDUs. The success of the pilot projects, allowed us to extend this activity and implement it in 12 Ukrainian cities.

When developing this model, we discovered that a majority of stimulant users administer drugs in a non-injection way. For this reason short-term individual consultations for such clients were developed. Consultations varied from 10 minutes to several meetings. Through a specially developed screening form a social worker can define the main forms of risky behavior and conduct the proper consultation. In addition, work aimed at preventing injection drug use is conducted with such clients.

#### Research among IDUs Using Stimulants

In summer 2009 Alliance-Ukraine conducted a study among IDUs who use home-made stimulant drugs. According to data received from 1,581 interviewed stimulant users in 22 cities of Ukraine, the share of IDUs who use only stimulants as compared to 2004 increased 2.5 times and comprised 11% of all interviewed IDUs in 2008. This trend is more clearly seen in small towns where use of stimulant drugs increased 5.5 times as compared to 2004. A rather big share of stimulant users has risky behavior. Thus 59% of interviewees share tools for cooking drugs, and 61% inject drugs from one and the same source. Research results once more proved the necessity to continue prevention programmes for stimulant users.



*Survey on Behaviour and HIV Prevalence among Stimulant Users.  
Brief results of Operational Research*

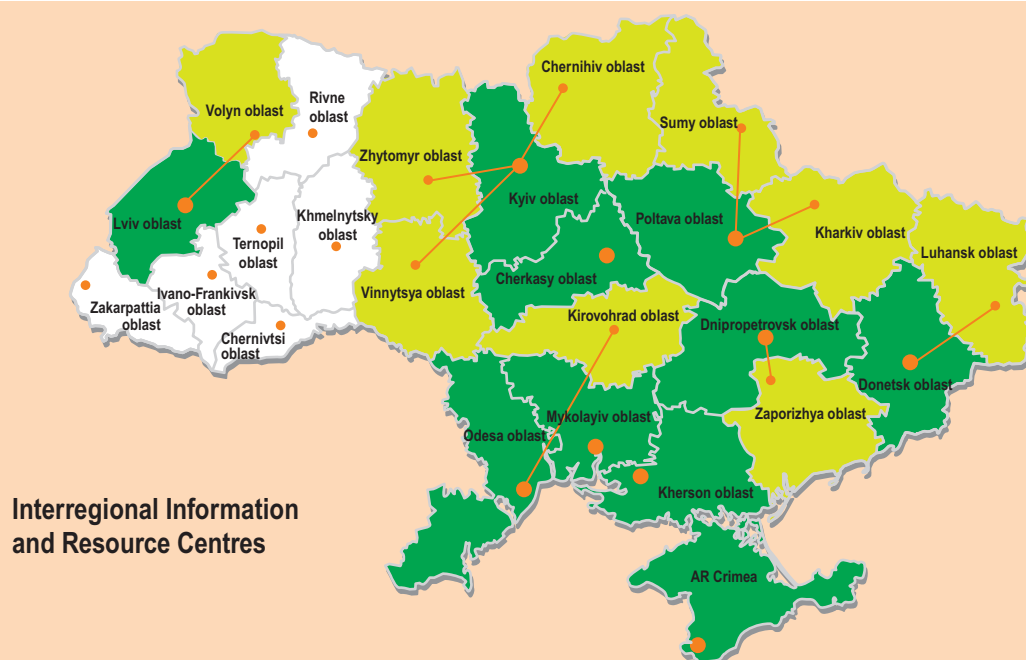


## 6.4. Activities of Interregional Information and Resource Centers (IIRC)

In 2009–2010 Alliance-Ukraine proceeded developing activities of Interregional Information Resource Centers in providing technical and information support to regional non-governmental and governmental organizations working in HIV/AIDS. Financing was carried out within the framework of the Programme Overcoming HIV/AIDS Epidemic in Ukraine (till March 31, 2009) and 6<sup>th</sup> Round Programme of the Global Fund to Fight AIDS, Tuberculosis and Malaria Support for HIV and AIDS Prevention, Treatment and Care for Most Vulnerable Populations in Ukraine.

2009 became a transitional year for the Interregional Information Resource Centers who experienced considerable programme

IIRC considerably extended their arsenal of methods of technical assistance, partnership and topics of activities. Expert visits for rendering targeted technical support to organizations and initiative groups, master classes involving experts in certain fields, internships, module trainings of social workers, focused work with different groups of technical support recipients (NGO managers and coordinators, social workers, “old” and “young” organizations, etc.) were included into IIRC activities. The centers started to more actively cooperate with initiative regional groups and “young” NGOs, inviting them to trainings, providing counseling with regard to registration and documentation, preparation of project proposals, providing office space and access to computers and the Internet.



Interregional Information and Resource Centres

changes and optimization of financing, re-oriented toward active measures of providing technical, information, counseling and training support to HIV-service organizations and initiative groups in regions in accordance with objectives and tasks of the 6<sup>th</sup> Round of the GF Programme. Thus, a renewed model of IIRC work was piloted that was positively assessed by experts and included in the request for 2<sup>nd</sup> Phase financing of GF within the framework of the 6<sup>th</sup> Round programme.

Trainings are organized for social and outreach workers at the IIRCs jointly with Alliance-Ukraine in order to provide access to integrated prevention, treatment, care and support services for vulnerable populations in all regions.

### Key results of IIRCs in 2009:

— IIRCs trained 1,620 specialists in 2009, including 53 employees from the State Social Service for Family, Children and Youth (SSSFCY) from Odesa, Kirovohrad, Mykolayiv, Cherkasy, Kherson, Dnipropetrovsk regions, cities of Kyiv and Sevastopol as well as workers of NGOs and governmental organizations.

— 88 trainings and workshops were conducted. In particular under the standard training modules developed by Alliance-Ukraine (“Outreach work with IDUs”, “Outreach work with CSWs”, “Motivational interviewing”) 320 persons were trained at 15 trainings, including 22 SSSFCY specialists (Odesa, Kirovohrad, Mykolayiv, Cherkasy, Kherson, Dnipropetrovsk regions, city of Kyiv). SSSFCY training was held in accordance with submitted participant requests. The overwhelming part of training topics conducted by IIRC were aimed at forming practical work skills in the field of prevention: outreach work with different groups of clients, motivation counseling, positive prevention, gender aspects of prevention work, monitoring and evaluation of project activities.

— IIRCs conducted 21 campaigns dedicated to memorable dates and youth events, 16 press conferences and round tables devoted to both memorable dates and vital issues of work in the regions.

IIRC activities:

— conduct round tables with decision-makers and regional stakeholders on vital issues of implementing HIV/AIDS programmes;

— conduct quarterly intersectoral meetings;

— maintain web-sites and service databases, inform about services in the region, innovative approaches and methods of work, best practices and other issues important for work in HIV/AIDS via the web-site and IIRC regional electronic bulletin;

— organize expert visits to the regions of IIRC operation in order to provide technical support to regional NGOs and initiative groups (by IIRC workers and external experts-consultants);

— conduct one-day trainings for specialists and social workers of NGOs and initiative groups in accordance with regional needs;

— publish regional reference books on HIV/AIDS services;

— provide technical support, information and counseling to NGOs and initiative groups, in particular through websites;

— arrange extraordinary meetings, workshops and briefings as requested by regional NGOs and initiative groups;

— assist and develop regional initiative groups (referral to specialists; assistance in NGO registration, project proposal preparation; trainings);

— involve national and regional experts in a certain field in technical assistance provision (counseling, master classes, expert visits, etc.).

## **Trainings of NGO social workers at Interregional Information Resource Centers**

Taking into account the previous positive experience of organizing trainings according to unified programmes at **Interregional Information Resource Centers (IIRCs)** in the 1<sup>st</sup> and 6<sup>th</sup> Round of Programmes, trainings for NGO social workers were organized at the regional level according to standard modules developed by Alliance-Ukraine with national experts participating in harm reduction among IDUs and CSWs.

Standard modules “Outreach work with IDUs”, “Outreach work with CSWs”, “Motivational interviewing” are used for trainings, and such modules as “Positive prevention” and “Social support” are being developed. Trainings are conducted by trainers prepared by Alliance-Ukraine at relevant trainings for trainers.

In the First Phase of the 6<sup>th</sup> Round Programme, 2 trainings on motivational interviewing (for social workers of Dnipropetrovsk and Kyiv regions, city of Kyiv), 6 trainings on outreach work with IDUs (for social workers of Dnipropetrovsk, Odesa, Donetsk, Cherkasy, Kyiv regions, cities of Kyiv and Sevastopol) and 1 training on outreach work with CSWs (for social workers of Mykolayiv region) were organized. In total, 174 persons were trained.

From October 1 to December 31, 2009 4 trainings were held according to the module “Outreach work with IDUs” in Donetsk region (for participants from Donetsk and Luhansk regions), Dnipropetrovsk (for participants from Dnipropetrovsk and Zaporizhya regions), Mykolayiv and Kherson regions, where 99 NGO social workers and workers of local centers of social departments for youth were trained. 2 trainings were also held according to the module “Outreach work with CSWs” in Odesa and Mykolayiv regions, attended by 47 NGO workers.

Advantages of such trainings are as follows: providing wider coverage of regional social workers with trainings, involving social workers for vulnerable groups in the trainings, and the possibility closely examine issues linked to local work specifics, and also economic efficiency.

In the 2<sup>nd</sup> Programme Phase of the 6<sup>th</sup> Round the component of standard program-based regional training was included into the contest for the area “Interregional Information Resource Center”. It is expected that during 2009–2010 project years 35 regional trainings will be conducted and attended by 800 NGO social and outreach workers at the IIRCs.

## 6.5. Reducing Stigma and Discrimination within the Living Library Project

The campaigns organized in “living library” format are designed to ensure direct and friendly communication between the general population and groups suffering from stigma and discrimination in society.

“Living libraries” in Ukraine proceeded in 2009 following the methodology tested during the first campaign in Kyiv's Shevchenko Park in May 2008.

“Living library” works the same way as an ordinary library: readers come, fill in cards, choose a book and read it for a certain time. Later they return the book to the library and take another one. The only difference is that the books in a “living library” are real people. And each “live book” represents a

City	Organization holding “libraries”	Number of “living libraries”	Number of readers
Lviv	CF “Salyus”	4	355
Cherkasy	CF “Insight”	3	507
Poltava	CO “Light of Hope”	1	40
Kakhovka	Kakhovka city branch of ACO “All-Ukrainian Network of PLWHA”	1	96
Chernihiv	Chernihiv regional branch of ACO “All-Ukrainian Network of PLWHA”	1	18
Melitopol	CF “Everything is Possible”	1	26
Stryi	CF “Salyus”	4	393
Chervonograd	CF “Salyus”	4	258
Smila	Smila center for personal development “Dialog”	2	102
Uman'	CF “Volia”	3	169
Kyiv	CO “Insight”	2	60

certain group that often faces prejudice and is stereotyped and becomes a victim of discrimination and experiences social isolation.

In March-June 2009 with Alliance-Ukraine support and partly with financing from *Levi Strauss Foundation*, 26 “living libraries” were held, the majority of which were dedicated to AIDS Memorial Day. In general 1,964 readers participated in the campaign.

### Feedback from “living library” implementers

**Dmytro Chikurov, “Living library” coordinator in Poltava, Light of Hope:** We came to a conclusion that this project is an original, unique and effective method through which it is possible to destroy negative stereotypes and foster tolerant attitude towards “different” people. Implementing this project in Poltava for the first time, we understood that it would be a success, but the results surpassed all our expectations. Here is the answer of a reader to the question in the questionnaire “What were your impressions from reading the books?” The answer was “Humaneness, sincerity, understanding, and support”. You have to admit that not every real book can give you all of this.

### **Marina Stolyarova, “Living library” coordinator in Kakhovka:**

We invited Kakhovka mayor to be the “Well-known man” book. He is a rather open person who always (when there is free time) takes part in most social projects conducted in town. When announcing the “Living library”, we did not say the mayor will participate, this would've caused an unnecessary stir and fuss, and transform the campaign into political debates or become a platform for people to voice their problems. But while carrying out the campaign it was a big surprise for many readers to see the town mayor in the same row with such “books” as, “HIV-infected”, “Volunteer”, “Client of Substitution Therapy Program” and others and to be able to ask him a question and get an answer. The mayor attended the event from the beginning to the end – from 13:00 to 18:00. He was “read” by teenagers, parents with children, group of bikers (they were organizing a motor-festival), and the other “books”. During the “reading” session, the city leader took notes from time to time. He was asked about his family and son, and also how to become a mayor.







## 6.6. Publication of Information and Educational Materials (IEM) for Representatives of Populations Vulnerable to HIV

In 2009 Alliance-Ukraine proceeded with its support of successful initiatives aimed at providing groups vulnerable to HIV and HIV-service organization workers with high-quality information and educational materials on HIV/AIDS and relevant issues at the national and regional levels.

In 2009, a regional NGO with Alliance-Ukraine support produced 177 issues of new IEM (booklets, brochures, regional and national magazines, etc.) and re-published about 50 materials on issues that are vital for prevention project clients and are aimed at forming safer behavior to avoid the risk of becoming infected with HIV and to stay healthy. Among

Dnipropetrovsk, and Lviv regions were supported. Overall, as of September 30, 2009 30 issues of regional newspapers were published with a circulation of 141,400 copies (including 6 published in October – December 2008).

In the 2009–2010 project year 7 national periodicals for vulnerable groups (newspapers and magazines, see table “Periodicals 2009–2010”) were supported through open tenders. At the end of the project year (as of September 30, 2009) the total number of published materials is expected to be 51, and the total circulation to exceed 400,000 copies partly meeting the needs of prevention projects in IEM for clients. Periodicals cover various HIV/AIDS aspects and relevant services, safe behavior issues, rehabilitation, vulnerable groups' subculture, etc. From October 1 to December 31, 2009 11 issues of national periodicals were published with a circulation of 91,000 copies.



177 issues of IEM there are 99 new magazines and 78 issues of national and regional periodicals for populations vulnerable to HIV. 2,176,566 copies of IEM were distributed during the year (including IEM received by NGOs from the Ioh and Alliance-Ukraine).

In the 2008–2009 project years, 7 national periodicals were supported. Thanks to fruitful and inspired work of editorial staff during the project year, as of September 30, 2009 52 issues of national periodicals with a circulation of 399,000 copies have been published and distributed (including 9 published in October – December 2008).

In 2008–2009 6 regional publications in Donetsk, Mykolayiv,

In addition, in the 2009–2010 project year publishing of information and educational materials at the regional level within prevention projects among IDUs, CSWs, and MSM was supported. It is expected that in the 2009–2010 project year the following will be published:

- 110 non-periodical information and educational materials (including 65 new materials and 45 reprints) with a total circulation of over 250,000 copies exceeding the planned indicator by 100,000, meeting prevention projects clients' needs. From October 1 to December 31, 2009 27 information and educational materials were published.

- 5 regional periodicals (covering Mykolayiv, Donetsk, and Dnipropetrovsk regions) with 28 annual issues and a total circulation of 150,000 copies. From October 1 to December 31, 2009 7 issues of regional periodicals were published with a circulation of 32,500 copies.

In order to exercise quality control over the information and educational materials and to provide NGOs with efficient technical support in IEM development, Alliance-Ukraine continued working with the expert IEM group – editorial board of the Alliance. Editorial board experts examine all IEMs to be published with Alliance-Ukraine support and give recommendations for their improvement, as well as consult NGOs on publishing issues. Trainers from the Alliance editorial board conducted an annual training on IEM development for NGO aimed at improving the quality of materials of HIV-service organizations on March 2–6, 2009 in Kyiv. 54 applicants submitted their request to participate in the training, 28 of them passed selection and received an invitation to take part in the training. Experts of the editorial board are developing an updated version of the IEM database <http://www.aidsfiles.net.ua> and its release is expected in March 2010.

#### Periodicals for 2009–2010

#	Name of publication	Publisher	Target group
<i>National magazines</i>			
1	Magazine "Podorozhnik"	CF "Yunitus", Mykolayiv	CSWs
2	Magazine "One of Us"	NGO "Gay Alliance", Kyiv	MSM
3	Newspaper "Do Not Fly Away"	CF "The Way Home", Odessa	Target groups of prevention projects, PLWH and employees of HIV-service organizations
4	Newspaper and magazine "Plus-Minus"	ACC "Stalist", Vinnytsya	Target groups of prevention projects, PLWH and employees of HIV-service organizations
5	Bulletin of ICF "Federation "Club House"	ICO "Federation "Club House", Poltava	Clients of rehabilitation centers and programmes for drug users, drug users and their inner circle, drug users in remission
6	Newspapers "Butterfly"	CF "Drop in Center", Kyiv	IDUs, SMT clients
7	Newspaper "White Arbor"	CF "Public health", Poltava	Target groups of prevention projects, PLWH and employees of HIV-service organizations
<i>Regional periodicals</i>			
1	Newspaper "New Century"	CF "New Century", Mykolayiv	Target groups of prevention projects, PLWH and employees of HIV-service organizations
2	Bulletin "Find Yourself"	CF "New Century", Mykolayiv	IDUs
3	Newspaper "Mother and Child"	CF "Yunitus", Mykolayiv	HIV-positive women from vulnerable groups, HIV-positive pregnant women and mothers
4	Newspaper "Healthy City"	PO "Our Help", Slovyansk	Target groups of prevention projects, PLWH and employees of HIV-service organizations
5	Bulletin of Dniprovski Humanitarian Initiatives	NGO "Dniprovski Humanitarian Initiatives"	Employees of regional HIV-service organizations, decision-makers

### 6.7. Geographical Expansion of Projects

One Alliance-Ukraine achievement in HIV prevention in 2009 was the geographical expansion of projects. Today, prevention programmes are implemented not only in regional and partially in district centers but even in rural areas (maps are enclosed in this report to provide visual testimony).



## Success Story

### Harm reduction projects do not necessarily work in cities

Although With Love to Children charitable foundation implements typical harm reduction projects, its activities stand out in a way. First of all, it works not in a big city but mainly in a rural area. Father Mykola Porfiryovych Teplukha, director of the organization and a priest, tells us a story from his organization:

Our organization was created in 2005. First we tried to work with children, but gradually became interested in the HIV/AIDS problem. Actually in the beginning we wanted to open a rehabilitation center, we drew up a project, prepared regulations, but this idea also failed. Then we decided that we need to learn about the situation, the group with which we'd like to work, maybe it would help us organize a rehabilitation center more effectively. Up to now we have not given up on this idea, we still have it and hope to open one sooner or later.

First it was difficult. But I studied the situation, the story of this problem; I gained an understanding that every person has a right to live as they choose. And irrespective of a person's will there are circumstances – family conditions, street influence, national macro-indicators (unemployment, instability). As a result there are a lot of abandoned children – the government forgot about them, it does not need these people. Some of them tried to change their lifestyle themselves. There are those who would like to stop using drugs, but when you are at the bottom it's very difficult to get up... Very few people succeeded in it. There are people in our organization who were able to change the way they live and now help others through peer support. After 25 years of using drugs Natalia is involved in an SMT programme, and Sergey was able to get off drugs on his own and is drug-free for almost 2 years. They know the situation very well, they know people and can define what problems a person may face. It underlines once again that peer support is one of the effective methods of providing services to target groups.

We are sure that if we can save even a few drug dependent persons, if we manage to reduce the prevalence of HIV and other infectious diseases – our work will not be in vain.

Our organization is the first to work in the rural area of Cherkasy region – no organizations worked here before. As far as I know there are very few such projects in Ukraine. We work only in villages. As of today 2 in-patient and 8 street syringe exchange points work. We have started new activity areas – three pharmacies work within the pharmacy project.

We also have extended the geographic reach of our activities – we have chosen a distant Chyhyrskyi district where no NGOs work. In addition, we are planning to begin activities that will advocate for substitution therapy implementation for IDUs living in rural areas and for patients of the Cherkasy regional TB treatment clinic.

When we began our activities we started almost from zero – nobody knew about us, we ourselves did not know well what we had to do. First our project was almost closed due to low coverage of the target group. But after a year of work we can assert that our workers are goal-oriented and able to perform their tasks – they can establish contact with IDUs and involve them into using services offered by the organization. It is not well-known but in villages especially those situated not far from cities there are enough IDUs. In Chervona Sloboda we have 50 clients, in Bilozirya – 40. We also opened a new syringe exchange point in Geronymivka village in the TB clinic where there is a constant flow of patients in our target group.

We were afraid that people wouldn't understand us in the villages but our concerns were in vain. We started to use rapid HIV tests – first there were several positive rapid tests, but today the amount of positive results has dropped considerably.

The first year of our work is over. I tell my workers: "We have to pass this stage of formation. If we prove we can work, we will work. If not – we will fall apart, or someone else will come who will be able to prove their mettle". Certainly we have a lot of plans for the future – we need to actively engage in fundraising as until now financing is received only under the Global Fund grant. Among our upcoming plans is to ensure people from rural areas have access to and take part in the substitution therapy programme, to develop a social support system, to help people realize that there is a way out.

The main result of our activities is that we have become a real organization. In conditions of uncertainty, staff turnover we overperformed the planned indicators, we have more than 600 clients, we overperformed plans for VCT, executed all the tasks we have set. Nobody believed that we would cover so many villages. Our big achievement is our staff. If we did not have volunteers from among the users, positive changes would not be possible. But we were able to involve people, build trust – and our work became more effective.

Charitable foundation With Love to Children with support of the Alliance-Ukraine (within the framework of the Global Fund Program) currently implements the project "HIV Prevention among injection drug users (IDUs)" in Cherkasy district of Cherkasy region.

## 7. Treatment and Procurement

### 7.1. Scaling up Antiretroviral (ARV) Treatment

Starting from December 1, 2008 due to the completion of the programme Overcoming HIV/AIDS Epidemic in Ukraine, the state undertook obligations to provide continuity of treatment for all patients who used to receive treatment at the expense of the Global Fund. The Ministry of Health of Ukraine officially confirmed this position by placing the relevant statement on its website and at a press conference that took place on December 1 devoted to World AIDS Day.

However, state budget for 2009 did not stipulate procurement of antiretroviral medications for treatment of HIV-infected persons with combined pathology of HIV and hepatitis. That

Thus, in 2009 Alliance-Ukraine fulfilled its objective in SMT by 105.8%.

From 2005 and up to the end of the first quarter of 2009 within the 1st Round of the GF Programme, Alliance-Ukraine provided financing and supervision of organization and methodological support of SMT implementation in Ukraine, supported projects for medical, psychological and social support of SMT patients (MPSS of SMT), research of monitoring and evaluation of the efficiency of buprenorphine- and methadone-based SMT, trainings for doctors, nurses, social workers, psychologists, and delivered SMT medications. On April 1, 2009 Alliance-Ukraine officially completed its activities in the SMT area within the framework of the 1st Round of the GF Programme. Currently, due to the wide use of methadone



is why Alliance-Ukraine within the budget for completing the 1st Round Programme procured treatment regimens for such patients, which included new medications tenofovir and tenofovir + emtricitabine (see Annex 6).

### 7.2. Substitution Maintenance Therapy (SMT)

In 2009 intensive SMT expansion in Ukraine continued. As of January 1, 2010 5,078 patients in 102 health care institutions in 26 regions of Ukraine received SMT. Among them 4,229 patients received methadone-based therapy. 849 persons received buprenorphine-based SMT. 2,217 of the patients were HIV-infected, and 538 simultaneously received ART.

in the healthcare system, access to this effective method of drug dependence treatment and HIV/AIDS prevention of IDUs suffering from opioid dependence has been considerably extended.

Since then and until August 1, 2009 the responsibility before GF for performing indicators in SMT implementation has been passed to ACO All-Ukrainian Network of People Living With HIV (the Network) – the principal recipient of the GF for SMT component in the 1st Phase of the 6th Round of the GF Programme Support for HIV and AIDS Prevention, Treatment and Care for Most Vulnerable Populations in Ukraine. At the same time Alliance-Ukraine proceeded with medical, psychological and social support of SMT patients in 67 treatment and prevention facilities under the grant agreement with the Network.

During preparation of Ukraine's proposal to the GF within the 2nd Phase of the 6th Round it was decided to transfer activities in the area of SMT implementation from the Network to Alliance-Ukraine, and starting from August 1, 2009 Alliance-Ukraine fully undertook implementation of SMT component of the 6th Round of the GF Programme. While re-planning activities in the SMT area in the 2nd Phase of the 6th Round of the GF Programme, strategy and tactics of the programme activities were changed. An updated work plan stipulates scaling up organizational and methodological support of SMT, reducing programme expenses for medical, psychological and social support of clients, procurement and logistics of SMT medications.

During this year the following services were provided to SMT programme clients:

#### 1. Medical support of SMT clients:

- ensure delivery of maintenance medications 7 days a week at a convenient time for clients;
- develop and implement activities for prevention of violations from the side of SMT programme clients;
- assess the current health condition of SMT programme clients in order to prevent complications related to both HIV-positive status and other health problems; referral to other treatment and prevention facilities;
- create conditions for delivery of maintenance medications to clients hospitalized in in-patient departments of other treatment and prevention facilities.

#### 2. Social and psychological support of SMT clients:

- initial assessment of psycho-emotional and social state as well as life circumstances of the project client;
- familiarization with project participation rules and available services to support every project client;
- coordination of work concerning patient's support with harm reduction project implemented in the region;
- assess clients' needs in psychosocial support; develop an individual recovery plan in collaboration with the project client.
- develop a schedule for conducting structured individual and structured group consultations and its performance in accordance with clients' needs;
- conduct consultations for family members and/or partners of SMT clients;



- social support of SMT clients with regard to cooperation with governmental authorities concerning renewal of documents, receipt of pensions, subsidies, reinstatement of employment/study or assistance in employment, in case of arrests or conflicts with law enforcement agencies etc.

In 2009 integrated assistance centers for SMT clients started their operation. In the 6th Round of the GF Programme three centers were established at the Poltava regional drug clinic, Mykolayiv central district hospital and Mykolayiv regional TB treatment clinic. As of the end of 2009, 300 SMT programme participants received access not only to opioid dependence treatment but also to other medical services, in particular to diagnostics and treatment of HIV, TB and STI. In addition, favorable conditions to receive other healthcare services that



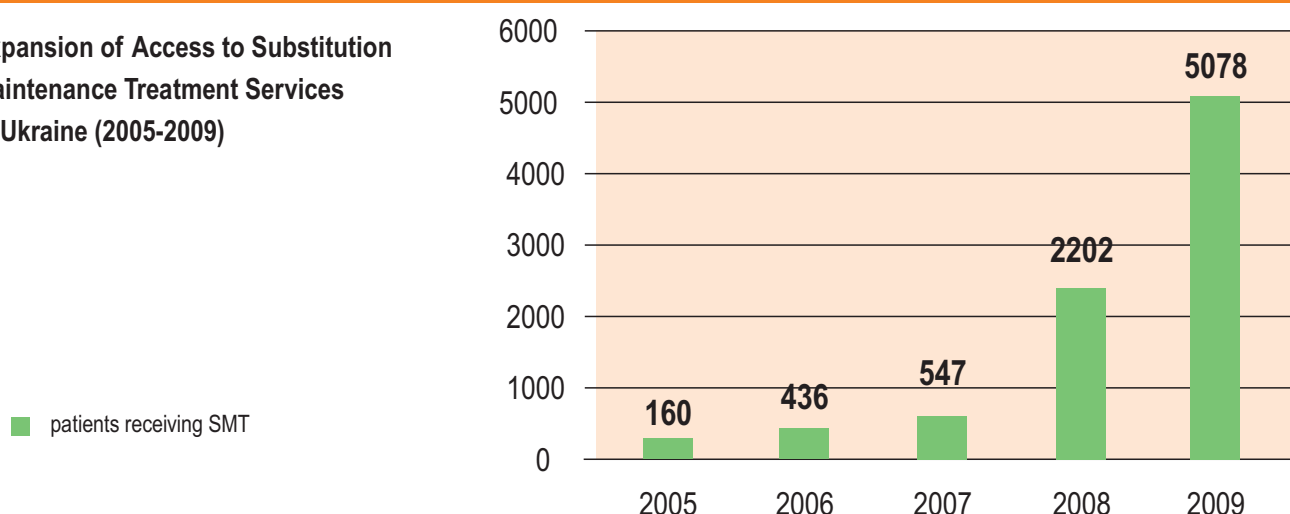
projects participants need were created as well as access to psychological and osocial support at the healthcare facilities implementing projects for developing integrated service centers in cooperation with HIV-service organizations.

In partnership with other stakeholders, Alliance-Ukraine proceeds with its efforts to improve regulatory and legal framework in order to attain better conditions for SMT implementation. First of all it has worked on creating a favorable environment for introducing liquid methadone forms into health-care practice, reducing the amount of daily registration and report documents to decrease medical personnel workload and increase patient capacity of treatment and prevention facilities. Considerable attention is paid to writing out prescriptions and giving methadone to patients according to prescriptions for several days, providing medications for SMT

In 2009, 112,046 STI examinations with rapid tests were carried out among vulnerable groups. 2,948 positive results were received, and 2,339 vulnerable groups members visited STI treatment facilities for further diagnostics and treatment. 10,958 STI treatment cases were provided. Monthly treatment increased twofold as compared to 2008 – now an average of 1,200 treatment cases are provided monthly.

Together with leading national and international partners, Alliance-Ukraine planned its activities to expand access of vulnerable groups to STI diagnostics and treatment during the 2<sup>nd</sup> Phase of the 6<sup>th</sup> Round of the GF Programme implementation, in particular a grant agreement was executed with the Ukrainian AIDS Center to organize and monitor STI treatment for vulnerable groups at healthcare facilities.

### Expansion of Access to Substitution Maintenance Treatment Services in Ukraine (2005-2009)



patients transferred to treatment and prevention facilities with no SMT sites or SMT clients staying at home due to their state of health or who aren't able to visit an SMT site. Special attention was paid to funding procurement of SMT medications from the state budget because it is a guarantee of SMT self-sufficiency in Ukraine in the future. All these aspects will require permanent Alliance-Ukraine attention during the next year and will promote expansion of SMT.

### 7.3. Treatment of Sexually Transmitted Infections (STI)

In 2009 considerable positive changes took place in expanding access of vulnerable groups to STI diagnostics and treatment.

In order to settle operational issues of STI diagnostics and treatment, Alliance-Ukraine initiated work meetings with all the participants at the regional level. Thus, in 2009 there were 5 such activities with chief medical officers of skin and STI treatment clinics, AIDS centers and NGO leaders participating in Kyiv, Chernihiv, Donetsk as well as in Kyiv region. The decision on providing funds from the local Kyiv budget for purchasing STI tests for laboratory confirmation of the diagnosis of vulnerable groups with rapid tests is a positive achievement with regard to local authorities paying attention to HIV and STI prevention issues.

On December 17–18, 2009 a two-day nationwide meeting of chief medical officers of healthcare facilities providing STI diagnostics and treatment to vulnerable groups was conducted in Kyiv. A Coordination Center for conducting STI screening tests and treatment for vulnerable groups was established at the Institute of Dermatology and Venereology of the AMS of Ukraine.

With Alliance-Ukraine support, the Ukrainian AIDS Center developed a methodological manual “Organization Model of Providing Services on STI Diagnostics and Treatment for Vulnerable Groups Representatives” with the MoH of Ukraine. Specialists of the Institute of Dermatology and Venereology of the AMS of Ukraine developed and agreed with the MoH of Ukraine methodical recommendations “Characteristics of STI Treatment in Populations Vulnerable to HIV”.



At the local level, STI diagnostics and treatment services are provided by NGOs responsible for organizing STI screening diagnostics for vulnerable groups representatives and treatment and prevention facilities. In 2009 Alliance-Ukraine signed agreements with 82 regional NGOs on conducting STI diagnostics and treatment. NGOs in their turn signed agreements with 86 treatment and prevention facilities (city and regional skin and STI treatment clinics, AIDS centers, skin and STI treatment departments and rooms of district hospitals, etc.) and defined the responsible doctors. An NGO system of client social support to healthcare facilities for further diagnostics and treatment was organized.

## 7.4. Procurement of Medications and Equipment

Alongside the general expansion of HIV prevention programmes in 2009, the amounts of disposable materials delivered to civil society organizations who are Alliance-Ukraine partners increased considerably. In particular, more than 8 million condoms were delivered this year which is 19% more than in 2008. A condom distribution system was considerably expanded. Apart from procurements funded by the Global Fund within the 6<sup>th</sup> Round Programme, 86% of the total amount of condoms delivered were provided by other donors (mainly by USAID) or by the Ministry of Health of Ukraine within the framework of the Project "Control over Tuberculosis and HIV/AIDS in Ukraine" (with WB support).

Work to improve the centralized system of delivering disposable materials to NGOs (syringes, alcohol swabs, condoms, lubricants, etc.) was continued. During the year over 18 million syringes and needles and 16.5 million alcohol swabs were delivered to almost 100 NGOs. In addition, over 120 thousand HIV rapid tests were delivered within this period.

To carry out the study "Monitoring of Knowledge, Behavior and HIV Prevalence among Prisoners as Second Generation HIV Serosurveillance", EIA test-systems for conducting 1,300 surveys to detect HIV antibodies were procured.

To implement the STI component of prevention programmes, over 92 thousand rapid tests for syphilis, 10 thousand rapid tests for gonorrhea and Chlamydia, 3 thousand tests for hepatitis B and 10 thousand pregnancy tests for vulnerable groups were purchased and delivered to NGOs in 2009.

STI treatment medicines totaling UAH 1.4 million were also procured and delivered to 86 treatment and prevention facilities in all regions of Ukraine.

Eprex medication for the Clinic for Treatment of Children with HIV/AIDS Center at the specialized children's hospital "Okhmatdyt" was procured for UAH 30,000 collected during a charity event.

In 2009 the Ukrainian AIDS Center received the last lot of SMT medications within the 1<sup>st</sup> Round of the GF Programme, which was procured to ensure continuity of treatment in the process of transferring 6,000 patients under the MoH purview.

Apart from the SMT program's considerable development implemented by Alliance-Ukraine in the nation, the amount of SMT medications delivered also went up significantly. It was preceded with meticulous work, starting with getting quotas for the import of narcotic drugs, organizing tenders, executing agreements with suppliers and contractors and control over their performance. As a result, more than 152 kg of methadone hydrochloride and 4.7 kg of buprenorphine hydrochloride were imported this year, which is 4.5 times more than the amounts supplied in 2008. According to the existing delivery schedules, this trend will continue in the next several years.



Taking into account the considerable amounts of imported goods and labor intensiveness of the procedure of receiving import permits, the qualification and experience of our procurement department at Alliance-Ukraine became vital, which together with well-established cooperation with government authorities and Alliance-Ukraine partners, ensured the timely delivery of medicines to the existing programmes in full amount.



## 8. Monitoring and Evaluation (M&E)

### 8.1. Programme Monitoring

**In 2009, Alliance-Ukraine continued to improve its programmatic M&E system, as well as to support national M&E activities and research.**

The second version of the automated system SyrEx-2 was developed based on user recommendations and is more advanced, more user-friendly and has several new features. The system allows us to collect fuller information about HIV/AIDS prevention programme clients as well as the services they receive. In addition, SyrEx-2 lets us analyze collected data more in detail.

In October 2009 a series of trainings on programme monitoring and use of the updated version of SyrEx-2 for 130 Alliance-Ukraine sub-recipients was held. M&E department and field programme departments of Alliance-Ukraine proceed with providing technical support to organizations as they make the transition to the new version of SyrEx-2 and its use.

During 2009 Alliance-Ukraine paid significant attention to the quality of collected data, in particular increasing their accuracy and reliability. Since October 1, 2009 a pilot project of introducing of a unique coding system in the system of HIV prevention programme clients and service registration was launched. Within this project a unique coding system was developed based on individual data of each client. This is a seven-digit code consisting of the first two letters of a mother's full name, first two letters of a father's full name, a number (1 - male, 2 - female, 3 - transgender), and the last two digits of the client's year of birth.

The pilot project involves seven NGOs from Odesa region working in harm reduction projects. During six months the organizations performed re-coding of clients as they receive prevention services. Each NGO carefully monitors and registers all changes in client codes, entering them into the automated accounting system SyrEx-2. Upon termination of the pilot project (in May 2010) the collected data will be

analyzed and the percentage of clients overlapping with general coverage will be calculated. There are further plans to assess the effectiveness of the project and feasibility of introducing the proposed unique coding system at the national level.

As of October 1, 2009 Alliance-Ukraine has been piloting the implementing partners assessment and rating system. The project aims to improve the effectiveness of programme implementation by Alliance-Ukraine and grant recipients funded by the Global Fund and other donors. According to this system all Alliance-Ukraine grant recipients will receive a quarterly ranking of project implementation. In compliance with this ranking Alliance-Ukraine will diversify approaches to work with the grant recipients having received a certain rating category. Within six months the system will be tested and may undergo further changes.

In 2009 a new, more sophisticated and automated form of monitoring and evaluating NGO activities was developed and introduced. Through this form programme officers evaluate NGO activities based on key criteria that affect the overall rating of the organization: work plan performance, correctness of data in NGO quarterly reports, reliability of programme monitoring and evaluation system, staffing, availability of project management mechanisms, etc.

### 8.2. Alliance-Ukraine Research and Studies Biobehavioral Research

In 2009 at the request of ICF "International HIV/AIDS Alliance in Ukraine", an integrated biobehavioral study was conducted among vulnerable populations, including injection drug users, commercial sex workers, men having sex with men, and prisoners. All studies were performed in partnership with the O. Yaremenko Ukrainian Institute for Social Research, Kyiv International Institute of Sociology, Centre for Social Expertise of the Institute of Sociology of NAS of Ukraine, Ukrainian AIDS Centre, and regional community organizations.

### **Behavioral monitoring and HIV prevalence among injection drug users and their sexual partners**

Integrated biobehavioral studies are conducted among IDUs in Ukraine every year since 2004. Traditionally they are conducted in the most affected regions, including Donetsk, Odesa, Mykolayiv and other eastern and southern regions. In 2009 the geographic reach of the study included for the first time such cities as Dnipropetrovsk, Kharkiv, Ternopil, Chernivtsi, and Uzhgorod. Combining the findings for 2008-2009 data made it possible to understand the picture of HIV prevalence and behavior of IDUs in 30 cities of Ukraine with different levels of epidemic progress. The sample size allows for analysis of each separate region. RDS methodology was applied in conducting the research - sampling directed and implemented by respondents.

According to research conducted in 2008-2009, the average HIV prevalence among IDUs is 22.9%. Indicators of safe behavior, namely the use of sterile injecting equipment during the last injection and condom use during the last sexual intercourse act, are 87.3% and 48.3% respectively. The percentage of persons who were tested for HIV during the last 12 months and are aware of their results is rather high, namely 28%. More than half of IDUs are aware how HIV is transmitted (54.7%).

### **Additional research among sexual partners of IDUs**

In 2009 for the first time in Ukraine integrated biobehavioral research was conducted among sexual partners of IDUs who do not use drugs. The study was conducted in such cities as Dnipropetrovsk, Kryvyi Rih, Zaporizhya, Simferopol and Kyiv. 609 persons were interviewed. According to preliminary analysis, HIV prevalence among sex partners of IDUs is 25%. Although research was focused on those partners who do not inject drugs, 66% of respondents reported that such drugs were used in the past. Among those who used drugs, the HIV prevalence was 35%. But the most striking result of this study is the level of HIV prevalence among partners of IDUs who have never taken drugs, which is 16%. This result indicates the need for secondary prevention among HIV-positive IDUs and direct prevention programmes among sex partners of IDUs.

### **Monitoring of behavior and HIV prevalence among commercial sex workers and their clients**

Just as in the study among IDUs, the geography of research among CSW in 2009 was expanded to new regions where such research had not been conducted before. Thus, the first study among CSW was conducted in Ternopil, Vinnytsya, Zaporizhya and Uzhgorod. Combining the 2008 findings with 2009 data makes it possible to present a picture of HIV prevalence and CSW behavior in every regional centre of Ukraine. The sample size allows for analysis of each region. RDS methodology was applied in conducting the research - sampling that is directed and implemented by respondents, as well as TLS methodology - sampling according to place and time.

According to 2008-2009 findings, the average HIV prevalence among CSW is 13.2%. Knowledge about HIV transmission - 51.4%, while at the same time percentage of CSW, who reported condom use during the last sexual intercourse act with a client is much higher - 88.3%. In recent years the level of HIV testing among CSW is very high: according to recent data the proportion of CSW who were tested in the last 12 months and are aware of their testing results is 58.7%.

### **Additional research among the clients of commercial sex workers**

In 2009 integrated biobehavioral research was conducted among CSW clients for the first time. It was conducted in such cities as Ivano-Frankivsk, Simferopol, Kyiv, Kharkiv and Odesa. 500 people were interviewed. Preliminary findings show a relatively small HIV prevalence when compared with sexual partners of IDUs, but higher than the HIV prevalence among the general population according to the routine epidemiological monitoring results. Thus, according to preliminary data, HIV prevalence among the clients of CSW is 2.8%.

### **Monitoring of behavior and HIV prevalence among men who have sex with men**

The integrated biobehavioral study was conducted among MSM in Ukraine for the second time. However, during the 2009 study, the sample was expanded to reach those regions where such research had not been conducted before. The study covered 15 cities in Ukraine where 2,300 people were polled. The sample size allows for analysis of each region. RDS and TLS methodologies were used for the study.

According to the 2009 study, the average HIV prevalence among MSM is 8.6%. MSM demonstrate high level of awareness on HIV transmission. 71.2% know how HIV is transmitted and how it is not. The percentage of people who were tested for HIV during the last 12 months and know their results is 43.4%. The proportion of MSM who reported condom use during their last sexual contact is 64%.

### **Monitoring of behavior and HIV prevalence among prisoners**

The integrated biobehavioral study among prisoners was conducted in Ukraine for the first time. This study was made possible through fruitful cooperation between Alliance-Ukraine, Analytical Centre Socioconsulting, the Ukrainian Department of Prisons and Ukrainian AIDS Centre. The sample included 1,300 persons from 26 colonies. The study also involved prisoners of juvenile penal colonies.

According to the study, the average HIV prevalence among prisoners is 15%. Only 12 percent of prisoners in the last 12 months have been tested for HIV and know their results. Prisoners demonstrate a low level of knowledge about HIV transmission: only 41% of them know how HIV is transmitted and how it is not. Such a low knowledge level is most likely associated with low coverage of this social group with prevention programmes. According to the study, the coverage rate is only 15%.

## **Operational Research**

Operational research, as a tool necessary for making information-supported management decisions on critical implementation prevention programmes issues, has been conducted by Alliance-Ukraine since 2005. In the second half of 2009 a regular research series was completed and according to its results, reports with recommendations for further actions were prepared:

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**Learning the opportunities to improve access to STI treatment programmes for CSW.** Objective: Identify barriers and reasons that prevent CSW who received a positive rapid test result for gonorrhea, syphilis or chlamydia, from turning to hospitals for diagnostic confirmation and treatment. Research results revealed that the most important reasons of not turning to STI treatment among CSW are: inadequately organized consultation and testing processes, lacking referrals and social support, lack of knowledge and counseling skills of social workers.

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**Evaluating the effectiveness of HIV prevention programmes in penitentiary institutions.** Objective: Analysis of prevention projects implemented by NGOs in penitentiary institutions with the assistance of ICF "International HIV/AIDS Alliance in Ukraine", and the factors that determine the effectiveness of such projects. Research results revealed some problems in implementing projects in penitentiary institutions, related to the lack of organized internal and external communication, joint planning and coordination with department administration, colony management, other organizations working in the colonies, more active use of passive forms of information delivery to prisoners rather than active forms of informing etc.

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**Experimental study of the effectiveness of customer acquisition to MSM projects through online social networks.** Objective: pilot ways of attracting new customers among MSM through the Internet, studying their needs. Findings proved the effectiveness of online social networks for customer involvement in existing HIV-service programmes for MSM. These studies showed that potential customers of MSM projects who can be involved via the Internet are different from the traditional customers. Age of online social



networks users varies from 18 to 78. One third of them live in heterosexual marriage. One-tenth of users are having or are ready to have sex for a fee. However, the needs of customers who can be involved via online social networks do not differ from services provided by NGOs working with MSM.

**Formative research among IDUs who use home-made stimulant drugs** is a high-quality and linked biobehavioral study (50 people who produce homemade stimulant drugs were interviewed, a total of 1,581 stimulant drug users in 22 cities of Ukraine). According to the study, the proportion of IDUs who use stimulants exclusively, compared to 2004 increased 2.5 times and in 2008 amounted to 11% of all the



interviewed IDUs. This trend is particularly observed in provincial cities where stimulant drug use has increased 5.5 times since 2004. Homemade include methamphetamine, amphetamine, cathinone, and methcathinone. The share of women among stimulant drug users varies from 11% (in Vinnytsya) to 55% (in Luhansk). Quite a large proportion of stimulant drug users are practicing risky behavior. Indeed, 59% of respondents use common utensils for making a drug, and 61% take a drug from common drug containers. Among the interviewed stimulant drug users the largest share of HIV-positive people was in Kyiv (62%) and Kryvyi Rih (49%).

## Research among the General Population

Apart from researching the most-at-risk and vulnerable populations, Alliance-Ukraine commissioned the Survey of Ukraine's population aged 15-49 for calculation of indicators for monitoring and evaluation measures that enable control over HIV/AIDS. In particular, the respondents answered questions in order to determine their level of knowledge about sexual transmission of HIV and modes of HIV transmission, the use of condoms and sexual experience at the age under 15. A total of 2,602 persons were interviewed. The knowledge level among youth aged 15-24 is 40.3%. The percentage of young people of the same age category who had sex at age 15 is equal to 2.4. Among the general population aged 15-49, 60.6% reported condom use during their last sexual contact.

## Estimated number of most-at-risk and vulnerable populations

In 2009, the study Evaluation of most-at-risk and vulnerable populations to HIV infection was completed. In assessing the size of such populations two methods were used: the coefficient method and the method of social networks expansion. The latter is quite new and was used in Ukraine for the first time. This experiment drew the attention of international scholars and practitioners.

The research findings are highly important from the point of view of calculating the coverage of vulnerable populations with prevention programmes, substitution therapy and antiretroviral therapy. These data were used to calculate the estimated number of people living with HIV/AIDS. The evaluated data concerning the number of most-at-risk and vulnerable populations were for the first time calculated separately for each region.

**According to the findings, the estimated number of IDUs in Ukraine is 230-360 thousand people, the estimated number of CSWs is 63-93 thousand people, the number of MSM (aged 15-49) is 95-213 thousand people.**

### 8.3. Developing National Monitoring and Evaluation System

The perennial development of a national M&E system culminated in 2009 with the creation of a national M&E Centre. The Centre for Monitoring and Evaluation at the Ukrainian AIDS Centre was established in August 2009 according to MoH order dd. 04.09.09. Alliance-Ukraine was directly involved in all phases of the centre's establishment, from development of official regulations and selection of its members to conducting joint seminars on strategic planning and participation in implementing planned activities. Today the centre is staffed with 10 professionals, 7 of whom are financially supported by the Global Fund: M&E centre director, specialist in medical monitoring programmes, epidemiological research specialist, behavioral research specialist, specialist in development of regional M&E systems, database specialist and an assistant. Alliance-Ukraine plans to continue supporting the activities of the Ukrainian Centre for M&E and overall development of the national M&E system.

In addition to developing a national M&E system development, Alliance-Ukraine aims its efforts at supporting regional M&E systems. In 2009 experts from nine regions (Luhansk, Volyn,



Rivne, Zakarpattia, Chernivtsi, Zhytomyr, Kharkiv, Lviv, Khmelnytsky) were supported, whose responsibilities include creating and developing M&E activities. As a result of this work, in the listed regions the regional indicators of HIV/AIDS response were for the first time collected and examined at coordination meetings. In many cases this work made it possible to make more informed decision-making at the regional level. Within this activity during the year members of Alliance-Ukraine and partner organizations held a series of seminars to discuss steps for creating regional M&E systems, indicator collection methodologies were covered, approaches and methods of using the data obtained were determined. At the end of 2009 a new concept for regional M&E systems support was developed. According to it regional M&E centers (their creation was stipulated by the National Programme on HIV/AIDS for 2009- 2013) will be funded. Although the main coordinating role in this process will be played by the Ukrainian Centre for M&E, Alliance-Ukraine will continue providing financial and methodological support to regional M&E systems.

## 9. Cooperation and Policy

### 9.1. Policy and Advocacy – Key Achievements at the National Level

**2009 year was extremely rich in events and achievements in the field of policy on HIV/AIDS at the national level.**

Indeed, just in 2009 for the first time after five years of work, including 4 years of programme implementation with the assistance of Global Fund to Fight AIDS, Tuberculosis and Malaria, Alliance-Ukraine's responsible role as one of the key implementers in the comprehensive response to HIV/AIDS in the country was recognized by the Law of Ukraine (No. 1026-VI dd. 19.02.2009), which approved the National Programme for HIV Prevention, Treatment, Care and Support for People Living with HIV and AIDS Patients for 2009–2013.

Direct programme development since 2008 was carried out by a special joint working group at the MoH of Ukraine, which included representatives of international and non-governmental organizations, including Alliance-Ukraine representatives.

According to the National Programme, Alliance-Ukraine's main focus of responsibility is on implementing prevention activities among most-at-risk and vulnerable populations.

Alliance-Ukraine's contribution to the comprehensive programme is the second largest contribution after that of the Ministry of Ukraine, and amounts to UAH 281.6 million for the next four years. The main source of funding is the 6<sup>th</sup> Round from the Global Fund.

According to 2009 work, Alliance-Ukraine managed to achieve a much higher level of funding for programme activities was previously defined by law (total funding reached UAH 110 million against the planned UAH 69 million). This funding increase was achieved not only through the UAH/USD exchange rate change, but also through the coordinated work of international and governmental organizations to prepare a request for extension of funding of the Second Phase of the 6<sup>th</sup> Round of the Global Fund Programme.

Due to regular meetings of Alliance-Ukraine with partner organizations on substitution therapy, participation in the MoH joint working group on SMT issues and development of relevant draft MoH orders in 2009, the number of treatment patients more than doubled and a number of issues related to expansion and continuity of relevant programmes implementation was resolved.

As a result of long-term preliminary advocacy by Alliance-Ukraine, in February 2009 MoH of Ukraine issued its Order

No. 56 "On Pilot Syringe Exchange Project Implementation", which approved the list of specific pharmaceutical facilities in 15 regions of Ukraine and in Kyiv, which received the opportunity to participate in the pilot project stipulating organization of syringe exchange points at pharmacies. Thus, access of IDUs to HIV prevention services was significantly increased, since by the end of 2009 108 pharmacies in cooperation with 25 NGOs were working in this field in 14 regions of Ukraine.

Building up state capacity in monitoring and evaluation of HIV/AIDS activities is one of the old-established priorities of Alliance-Ukraine. In April 2009 the Ministry of Health of Ukraine adopted, and the Ministry of Justice registered the Typical Regulations of the Centre for Monitoring and Evaluation of programme activities in HIV/AIDS response. Due to technical and financial support of Alliance-Ukraine, the Centre was staffed with competent professionals and began working actively.

Innovative work on introducing rapid testing for HIV, which was started by Alliance-Ukraine in previous years, in August 2009 was finally regulated at the national level by Order No.639 of the MoH of Ukraine, which approved "Temporary regulations for HIV testing using rapid tests, their use, storage and record-keeping of results." In 2009 over 103,000 tests and consultations for most-at-risk and vulnerable populations using rapid HIV tests were conducted and 9,467 positive results were detected. 6,340 people visited trust rooms to confirm positive results of rapid tests (67% of all identified positive results).

Due to continued active work in cooperation with the MoH of Ukraine on implementing advanced approaches to STI treatment and engagement of 22 healthcare facilities, the amount of treatment was increased twofold compared to 2008.

15 mobile clinics provided by Alliance-Ukraine last year were actively engaged in the system of testing for HIV using rapid tests, STI diagnostic and treatment in 13 regions of Ukraine.

As a result of Alliance-Ukraine's stable and efficient work, despite the global financial crisis and inadequate state funding of the National Programme, the Global Fund prolonged the agreements with the principal grant recipients in Ukraine totaling USD 103.9 million for the period up to July 2012.



Pursuant to the National Programme, in April Alliance-Ukraine signed a joint work plan for 2009 with the Ministry of Ukraine for Family, Youth and Sports. Due to cooperation with this ministry in 2009, services for IDUs were scaled up.

In 2009 the programme supported by the Global Fund was the only source of funding for HIV/AIDS prevention programmes, aimed directly at street children staying in public foster institutions: state funding is not allocated at all. In 90 orphan asylums and 25 sociopsychological rehabilitation centres for children subordinate to the Ministry for Family, Youth and Sports systematic preventive education and training were introduced.

In 2009 Alliance-Ukraine management directly took part in the National Council on the Response to HIV-infection/AIDS affiliated with the Cabinet of Ministers of Ukraine, which reported the implementation results of the 1<sup>st</sup> and 6<sup>th</sup> programme Rounds supported by the Global Fund. Alliance-Ukraine initiated discussion of the most vital problems hindering effective programme implementation.

As a full-fledged member of the Coordination Council on HIV/AIDS, Tuberculosis and Drug Use under the President of Ukraine, the Executive Director of Alliance-Ukraine initiated the need to address the challenge of providing SMT to drug users who are arrested, detained or serving sentences at a meeting on 31.03.2009. Consequently, a relevant presidential initiated the process of preparing the relevant joint Order of the MOH, the Ministry of Internal Affairs of Ukraine and the State Department of Prisons.

In autumn 2009 Alliance-Ukraine in cooperation with interested international and national NGOs successfully resisted numerous attempts by the opponents of SMT programmes during the tumultuous Presidential election campaign, who launched a public media campaign and demanded at the highest governmental levels to prevent the introduction of SMT programmes in the penitentiary system.

Previously, due to the balanced position and joint efforts of interested non-governmental and international organizations, the Sevastopol City State Administration and management of the Sevastopol mental health facility, the closing of SMT programmes in Sevastopol was successfully averted.

Consequently the decision No. 6503 of the XIII Session of Sevastopol City Council dd. 17.03.2009 which prohibited the use of municipal property facilities for introduction of SMT programmes was invalidated by the district court and was recently upheld in the court of appeals.

After several failed attempts, Alliance-Ukraine, due to advocacy support, successfully registered the first national charitable organization "All-Ukrainian League "Legalife" in December 2009 under the Order of the Minister of Justice of Ukraine No. 2346/5, which currently represents the interests of CSW community at the national level.

Alliance-Ukraine directly took part in activities of the joint working group of the MoH of Ukraine on improving procurement of goods, works and services in the area of response to HIV/AIDS, which in 2009 when compared to the previous year managed to reduce prices at which the government buys medicines to treat HIV/AIDS.

In the first half of 2009 under Alliance-Ukraine's initiative with the assistance of the Ministry of Education and Science of Ukraine, the Ministry of Health of Ukraine and funding from the Levi Strauss Foundation, for the first time in Ukraine the most massive voluntary HIV testing with "rapid tests" among students of vocational schools in Lviv, Cherkasy and Poltava regions was conducted. Such large-scale preventive measures in this population category have never been taken before, one of the possible reasons being misunderstanding of Ukrainian legislation, which ambiguously interpreted possibility of HIV testing of minors without prior consent of their parents. More than 600 regular rapid tests were conducted and numerous information sessions on HIV prevention among students and teachers of vocational schools were held which helped solve this problem.

## **9.2. International Summer School on Advocacy**

From July 27 to August 5, 2009 Alliance-Ukraine in partnership with the International Harm Reduction Development Programme of the Open Society Institute (IHRD/OSI) and International Renaissance Foundation held the fourth International Summer School on Advocacy in HIV/AIDS for HIV-service organizations "Advocacy and protection in the area of drug policy and HIV/AIDS".

Not only representatives from Ukraine took attended the school, but also representatives of the Russian Federation (St. Petersburg, Moscow and Kazan) and representatives from Georgia (Tbilisi and Telavi).

Key school trainers and experts this year again were Pavlo Skala, policy and advocacy programme manager in Alliance-Ukraine, and Olena Kucheruk, Harm Reduction Program Manager of the Renaissance Foundation. This year the participants improved their knowledge and skills in the fundamentals of advocacy

and drug policy, human rights work in the context of drug policy and HIV/AIDS; effective communication and cooperation with media, including the latest electronic media, and team interaction.

Trainers and experts in different fields were Dmytro Groysman (Vinnytsya Human Rights Group), Arkady Buschenko and Aigul Mukanova (Kharkiv Human Rights Group), IHRD/OSI consultant Matt Curtis (New York), Galyna Naduta (Alliance-Ukraine), Lesia Arhypska (International Renaissance Foundation), Andriy Tolopilo (Assistant of the Minister of Internal Affairs of Ukraine in Odesa region), Dmytro Krykun (independent journalist), Zhan Novoseltsev (journalist of 1+1 TV channel), and a team of trainers from Olympia training centre.

nization employees managed to invite officials into the campaign and resolve issues at the official level. Social workers of NGO From Heart to Heart organized out-patient, in-patient and street assistance centers for representatives of most-at-risk and vulnerable populations - injection drug users and CSWs to carry out daily work with visitors. Regular self-help groups for IDUs were organized at a public harm reduction centre in Cherkasy. A resident psychologist, psychiatrist, dermatovenereologist and gynecologist work in the centre with the target audience.

Representatives of NGO "Club "Future" in Mariupol mobilized a substitution therapy members' community in order to protect their rights for medical assistance, receiving SMT, reducing police and medical personnel discrimination. Project workers



Summer school participants not only studied the theoretical aspects of advocacy. During training participants presented 12 concepts of advocacy projects, two of which were presented by charitable organizations From Heart to Heart (Cherkasy) and Club Maybutne (Mariupol) and who received funding for individual advocacy projects according to a follow-up revision.

The project carried out in Cherkasy is aimed at creating a favourable environment for building the capacity of drug users in harm reduction and rights advocacy.

At the end of 2009 an advocacy campaign was launched aimed at fighting discrimination of drug users, including HIV-positive patients receiving ART, and at helping patients who cannot get proper treatment and substitution therapy. Orga-

nization employees managed to invite officials into the campaign and resolve issues at the official level. Social workers of NGO From Heart to Heart organized out-patient, in-patient and street assistance centers for representatives of most-at-risk and vulnerable populations - injection drug users and CSWs to carry out daily work with visitors. Regular self-help groups for IDUs were organized at a public harm reduction centre in Cherkasy. A resident psychologist, psychiatrist, dermatovenereologist and gynecologist work in the centre with the target audience.

Representatives of NGO "Club "Future" in Mariupol mobilized a substitution therapy members' community in order to protect their rights for medical assistance, receiving SMT, reducing police and medical personnel discrimination. Project workers

## 10. Technical Support to NGOs

**In 2009 Alliance-Ukraine continued to provide support to NGOs. Major achievements in this area can be divided into several thematic groups.**

### **1. Systematic advanced training of HIV-service organization specialists at the regional level through training and technical support.**

The number of specialists who passed advanced training in 2009 with the assistance of Alliance-Ukraine is 2,637 (NGO and project directors, social and outreach NGO workers, psychologists and lawyers of prevention projects, nurses and doctors, information managers, monitoring and research specialists, scientists, etc.), including 79 representatives from the Centre of Social Services for Families, Children and Youth (CSSFCY).

Advanced training was organized by Alliance-Ukraine and its regional partners with the assistance of the Global Fund to Fight HIV/AIDS, Tuberculosis and Malaria and within the framework of the project SUNRISE of the U.S. Agency for International Development (USAID) and projects supported by the International Renaissance Foundation, Open Society Institute and the Levi Strauss Foundation.

### **2. Regional training support was organized among other things through cascading from training the trainers at the national level to holding regional training for specialists by interregional information and resource centers (IIRC).**

In 2009 a transition to a new IIRC work model was completed with optimization of financial resources and expansion of methods of providing technical, advisory and training support to HIV-service organizations and initiative groups in the regions: introduction of expert visits, master classes, focused technical support and development of appropriate schemes. IIRC actively worked as a regional base for training on programmes which were centrally developed by Alliance-Ukraine.

There were 1,620 trained specialists at 11 information and resource centers in 2009, which includes 53 CSSFCY employees from Odesa, Kirovohrad, Mykolayiv, Cherkasy, Kherson and Dnipropetrovsk regions, the cities of Kyiv and Sevastopol; others are employees of NGOs and government organizations.

### **3. Organization of training and methodological support of public service professionals and organizations.**

Education of CSSFCY employees at Alliance-Ukraine trainings and information resource centers occurred according to an application process. During the year 79 experts were trained who provide services for most-at-risk and vulnerable populations. All regional centers of Social Services for Family, Children and Youth as well as the centers working with IDUs are regularly provided with training aid and materials on a centralized basis.

Concerning the provision of services to "street children", 146 qualified trainers were prepared from among officers of institutions subordinate to the Ministry of Ukraine for Family, Youth and Sports, in particular children departments, shelters for children, and centers for psychosocial rehabilitation of children. In addition, 586 directors and employees of schools, vocational schools and social rehabilitation centers for children as well as 60 employees of criminal police engaged in children's cases from all over Ukraine were trained to provide HIV prevention services.

**4. Integrated methodological publications are being prepared for each service delivery area or innovative approach,** including such components as typical project, book of best practices and experiences and operational research results, trainer study guide and materials for training of social workers, information materials for service providers and clients. In 2009 Alliance-Ukraine issued a series of methodological publications aimed at training specialists in response to HIV/AIDS.

### **5. Three technical support managers coordinated technical support regarding work with individual target groups and implementation of innovative approaches in 2009.**

Alliance-Ukraine technical support managers develop methodological materials and training programmes, coordinate distance learning courses, work with international experts on developing and adapting innovative approaches provide targeted technical assistance to organizations, particularly in crisis situations in projects, and coordinate expert reference groups for individual target groups of prevention projects.

### **6. Development and implementation of distance learning courses for social workers providing services has started.**

Currently six courses of this type have been delivered. All the parts are designed to be integrated into one comprehensive distance learning course supplied with a self-rating education level system.





**7. Achievements in mobilization and building capacity of vulnerable communities in 2009 became the result of close cooperation between technical support managers and expert/reference groups for MSM/LGBT, CSWs, IDUs, monitoring and evaluation, and STI.**

Productive coordination meetings of all the implementing partners in MSM, CSWs and prisoners were held in June-July 2009. The second national conference organized and supported by Alliance-Ukraine in May 2009 became an important capacity building event for the MSM/LGBT community.

**8. Involvement of international experts in developing new preventive interventions, followed up with introductions of innovations in work projects.**

Systematic cooperation with international experts yields positive results in implementing new interventions within prevention projects. For example, cooperation with Luciano Colonna (Consultant of the Open Society Institute) led to innovative strands of work with stimulant drug users. Robert Brodhead (University of Connecticut, USA) helped develop scientific grounding of the "Peer Driven Interventions" model for IDUs and CSWs. This also applies to overdose prevention through collaboration with Matt Curtis. Cooperation psychological and addictive behavior treatment expert Andrew Tatarskiy provided the means for starting a programme for psychologists who work in the harm reduction project.

## 11. Participation of Alliance-Ukraine in International Events and Conferences

### Participation in the 52<sup>nd</sup> Session of the UN Commission on Narcotic Drugs (UNCND, 11-20 March, 2009, Vienna, Austria).

In 2009 for the first time since Ukraine's independence an NGO representative was a member of the official delegation at the UN Profile Commission session - Programme Manager: Policy & Advocacy of Alliance-Ukraine, member of the National Coordination Council on Drug Abuse under the Cabinet of Ministers of Ukraine Pavlo Skala.

Given the limited membership of the Ukrainian official delegation and absence of a Ukrainian representative in UNCND, the Alliance-Ukraine representative virtually chaired the Ukrainian delegation throughout the whole session, speaking on behalf of the state of Ukraine in the official programme of high-level meetings and regular meeting of UNCND.

In particular, on March 12 Pavlo Skala as the official representative of Ukraine took part in the roundtable discussion "Fighting illicit trafficking and supply of narcotic drugs and alternative development" that was chaired by Mexico's Attorney General Eduardo Mendina Mora and gathered officials as well as international experts from over 40 countries. During the roundtable discussion the Alliance-Ukraine representative delivered a speech emphasizing the necessity and importance of developing a balanced approach to fighting drugs so that law enforcement efforts are directed primarily at organized drug crime groups, and not drug users, which is the case in many countries. The participants were informed of the latest progressive changes in Ukrainian legislation concerning drug trafficking, of the introduction and expansion of methadone-based substitution maintenance therapy programme in Ukraine. The Alliance-Ukraine representative reminded the high-ranking officials of member states to adhere to human rights, including those of drug users, when developing new approaches to counteracting drug trafficking.



UN Deputy Secretary General - Head of UN Office on Drugs and Crime Antonio Maria Costa said during the session, that addiction is a disease that is to be treated "by doctors, not police". Most speakers at the session supported similar positive rhetorical statements.

At the final UNCND meeting Pavlo Skala gave a brief statement and voted on behalf of the state of Ukraine joining the most important resolutions of the Commission.

### **Third Eastern Europe and Central Asia Conference (EECAC)**

On October 30, 2009 the Third Eastern Europe and Central Asia Conference (EECAC) came to its end. 2,642 representatives of governmental, non-governmental organizations and scientific community from 59 countries took an active part in it. 103 mass media outlets covered the conference. During the conference 3 plenary, 27 parallel and 4 special sessions were held, a Russian-American scientific seminar was given and 126 poster presentations were carried out. 40 organizations from the region presented their work at the exhibition and during 26 satellite activities.

ICF "International HIV/AIDS Alliance in Ukraine" representatives took an active part in the conference. Results of the participation of our delegation are six presentations in parallel sessions, participation in satellite activities and special sessions organized by partner organizations (UNAIDS, EHRN, AFEW), in the "Summer House" and at the seminars: three poster presentations, satellite activity of the Alliance-Ukraine "Technical Assistance: does it aid HIV-service? Experience of Alliance-Ukraine", "Learning Booth" project, 22 published theses.

The results of specific programme areas of work which are being developed by Alliance-Ukraine were presented at the conference as were issues concerning the programme as a whole - performance and impact of the epidemic, issues and challenges of managing the programmes funded by major foreign donors, interaction with government agencies and stakeholders.

The main result of the conference: Alliance-Ukraine properly presented its activities responding to the epidemic in Ukraine. EECAC is the leading regional forum on public health issues and HIV/AIDS that aims to strengthen regional cooperation and joint efforts in responding to HIV/AIDS and providing universal access to HIV/AIDS prevention and treatment. The conference provides a unique opportunity to assess progress in the achievement of universal

access to care and support by 2010 and to set priorities for the region based on the specific epidemic features in each country.

It was a unique opportunity to exchange experiences, to establish new partnerships, to discuss current issues with colleagues and people who determine regional HIV/AIDS policy, representatives of governmental agencies, international foundations and organizations.





## 12. Public Campaigns of Alliance-Ukraine

Fundraising "Letter to Saint Nicholas" within the campaign "Young Art Against AIDS"

Alliance-Ukraine with the assistance of its friends and partners has for the fourth time successfully implemented its own initiative to help HIV-positive children. This time the traditional campaign "Young Art Against AIDS" was part of the big St. Nicholas holiday which so many children eagerly await.

The campaign began on December 1, 2009, on World AIDS Day, during which children who receive in-patient treatment at the Treatment Clinic Centre for Children Living with HIV/AIDS that functions as part of the Ukrainian Children's Specialized Hospital OKHMATDYT, wrote letters to St. Nicholas. The collected letters were distributed among the Alliance-Ukraine staff as well as our friends and partners and together we made the dreams of all the children come true!

On December 19 a group of volunteers visited the children and performed an interesting play, organized many games, and employees of Alliance-Ukraine gave the children creative classes of modeling and beading. And, of course, on this day 26 children undergoing in-patient treatment received their long-awaited gifts from St. Nicholas and a wonderful, multi-nutritional festive table.

In response to the letter of request from the administration of the Ukrainian Children's Specialized Hospital, more than UAH 148,000 were collected (including gifts). These funds were spent on the needs of the Centre, on children's accessories, hygiene, clothing and shoes as well as expensive medicines.





## Annex 1. Financial Overview for 2009

**Table 1. Structure of funds that were received by ICF "International HIV/AIDS Alliance in Ukraine" in 2009 from donors**

Donor/Project	Funds received		
	UAH*	USD	%
The Global Fund to Fight AIDS, Tuberculosis and Malaria (Round 6)	151 584 422	19 103 053	76,35 %
The Global Fund to Fight AIDS, Tuberculosis and Malaria (Round 1 & Close out)	22 263 860	2 915 825	11,65 %
The Global Fund to Fight AIDS, Tuberculosis and Malaria (Funding through PLWH Network)	12 940 302	1 686 241	6,74 %
USAID (SUNRISE project)	7 730 000	981 825	3,92 %
Levi Strauss Foundation	718 452	90 000	0,36 %
International HIV/AIDS Alliance (Regional Technical Support HUB)	684 957	85 780	0,34 %
International Renaissance Foundation	381 425	50 000	0,20 %
Others	850 629	109 530	0,43 %
<b>Total</b>	<b>197 154 047</b>	<b>25 022 254</b>	<b>100,00 %</b>

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

**Table 2. Structure of expenditures of ICF "International HIV/AIDS Alliance in Ukraine" in 2009**

Cost Category	Total Spent (UAH**)	Total Spent (USD)	(%)
Travel	5 26 924	659 459	2,98%
Workshops and meetings	9 067 662	1 165 461	5,27%
Technical Assistance	4 180 601	531 063	2,40%
Grants	85 604 064	10 960 875	49,54%
Procurement, equip. and supplies	38 088 208	4 894 196	22,12%
Publications	2 455 093	316 512	1,43%
Administrative costs***	27 847 506	3 598 551	16,26%
<b>Total</b>	<b>172 509 060</b>	<b>22 126 118</b>	<b>100,00%</b>

\*\* UAH/USD exchange rate is NBU exchange rate at the date of payment.

\*\*\*Administrative costs include the costs of audits, office costs and salaries



**Table 3.a. Structure of “International HIV/AIDS Alliance in Ukraine” expenses for the Round 6 Programme “Support for HIV and AIDS prevention, treatment and care for most vulnerable populations in Ukraine” in 2009**

Main Programme Objectives	Budget (USD)	Total Spent (USD)	Utilization of the budget (%)	Spent (%)
Prevention	11 281 343	11 247 707	99,70%	72,92%
Treatment	1 667 272	932 168	55,91%	6,04%
Supportive Environment	191 813	168 751	87,98%	1,09%
Monitoring & Evaluation	1 561 093	1 349 720	86,46%	8,75%
Administrative cost	1 484 822	1 726 909	116,30%	11,20%
<b>Total</b>	<b>16 186 344</b>	<b>15 425 256</b>	<b>95,30%</b>	<b>100,00%</b>

**Table 3.b. Structure of “International HIV/AIDS Alliance in Ukraine” expenses for the Round 1 Programme “Overcoming HIV/AIDS Epidemics in Ukraine” in 2009**

Main Programme Objectives	Budget (USD)	Forecast (USD)****	Total Spent (USD)	Utilization of the budget (%)	Spent (%)
Management / PR Implementation Unit	1 041 466	1 482 971	821 689	55,41%	19,96%
Treatment, Care & Support	1 356 204	1 912 142	1 716 360	89,76%	41,69%
Focused Prevention	411 926	582 753	798 924	137,09%	19,41%
Information, Education & Advocacy	107 652	371 560	486 216	130,86%	11,81%
Surveillance & Evaluation	56 427	69 728	55 965	80,26%	1,36%
Close-out	257 079	257 079	237 649	92,44%	5,77%
<b>Total</b>	<b>3 230 754</b>	<b>4 676 233</b>	<b>4 116 802</b>	<b>88,04%</b>	<b>100,00%</b>

\*\*\*\* Forecast consist of budget and closing balance of previous periods

## Annex 2. Key Outcomes of Alliance-Ukraine Programme Activities in 2009

### Implementation Results of Prevention Programmes for HIV Vulnerable Populations as of 1 January 2010

Oblast/region	Coverage of Representatives of Vulnerable Groups with Prevention Services as of 1 January 2010			
	IDU	CSW	MSM	Prisoners
AR Crimea	8000	1 623	708	5945
Vinnitsya oblast	3743	640	0	4094
Volyn oblast	1104	278	0	0
Dnipropetrovsk oblast	47 811	3 780	973	1783
Donetsk oblast	34 416	1 969	1150	10 774
Zhytomyr oblast	1846	0	0	0
Zakarpattia oblast	1407	131	0	0
Zaporizhya oblast	5085	458	407	3877
Ivano-Frankivsk oblast	2293	243	309	2286
Kyiv oblast	1659	239	0	391
Kirovohrad oblast	3881	549	450	0
Luhansk oblast	4111	375	0	690
Lviv oblast	1922	2109	788	9171
Mykolayiv oblast	19 936	10 641	1559	6975
Odesa oblast	33 743	9895	3863	5547
Poltava oblast	5755	464	0	6039
Rivne oblast	1921	372	0	6039
Sumy oblast	1842	343	0	0
Ternopil oblast	511	203	0	0
Kharkiv oblast	7711	3473	1301	2450
Kherson oblast	12 899	1055	609	9108
Khmelnysky oblast	5169	688	51	5275
Cherkasy oblast	13 438	094	281	4528
Chernivtsi oblast	4257	560	188	0
Chernihiv oblast	2419	42	1	0
City of Kyiv	37 008	4223	16 920	996
City of Sevastopol	3718	990	401	0
<b>Total:</b>	<b>267 605</b>	<b>46 437</b>	<b>29 959</b>	<b>80 409</b>

## Coverage of Representatives of Vulnerable Groups with Prevention Services in 2009

	IDU		CSW		MSM	Prisoners		Total
Oblast/region	Women	Men	Women	Men		Women	Men	
AR of Crimea	1015	3 067	040	0	290	0	247	5659
Vinnitsya oblast	417	1 946	451	12	0	48	755	3629
Volyn oblast	183	858	272	0	0	0	0	1313
Dnipropetrovsk oblast	5339	13 541	1934	0	924	21	840	22 599
Donetsk oblast	5615	18 929	1151	5	976	0	3274	29 950
Zhytomyr oblast	71	429	0	0	0	0	0	500
Zakarpattia oblast	127	651	16	0	0	0	0	794
Zaporizhya oblast	602	1461	248	0	401	101	2451	5264
Kyiv oblast	62	165	0	0	0	0	0	227
Kirovohrad oblast	420	2207	508	0	0	0	0	3135
Luhansk oblast	999	2726	363	0	0	0	660	4748
Lviv oblast	151	513	536	0	202	0	3903	6305
Mykolayiv oblast	3608	7528	586	1	881	50	1971	19 625
Odesa oblast	5221	12 075	3399	13	1907	425	1903	24 943
Poltava oblast	744	2 098	124	0	0	0	1948	4914
Rivne oblast	435	1338	367	0	0	76	393	2609
Sumy oblast	218	1469	300	0	0	0	0	1987
Ternopil oblast	120	390	203	0	0	0	0	713
Kharkiv oblast	1733	4455	2231	93	881	519	1822	11 734
Kherson oblast	393	5 726	708	0	531	0	2418	9776
Khmelnitsky oblast	596	1889	394	20	51	0	2315	5265
Cherkasy oblast	1716	7110	945	2	355	104	1001	11 233
Chernivtsi oblast	652	1491	365	0	179	0	0	2687
Chernihiv oblast	171	600	0	0	0	0	0	771
The City of Kyiv	5563	19 470	2502	5	4 965	0	127	32 632
The City of Sevastopol	572	1940	534	0	290	0	0	3336
Total:	36 743	114 072	25 177	151	12 833	1 344	26 028	216 348



## Disposable Materials Distributed among Vulnerable Groups in 2009

Oblast/region	Condoms	Syringes
National level	5 876 217	0
AR Crimea	769 755	287 399
Vinnitsya oblast	266 413	331 727
Volyn oblast	107 703	162 142
Dnipropetrovsk oblast	1 515 584	1 708 406
Donetsk oblast	1 819 015	2 463 225
Zhytomyr oblast	48 085	39 912
Zakarpattia oblast	44 733	70 361
Zaporizhzhya oblast	300 140	128 355
Ivano-Frankivsk oblast	33 886	35 493
Kyiv oblast	21 828	42 454
Kirovohrad oblast	189 069	276 417
Luhansk oblast	283 024	439 026
Lviv oblast	396 291	100 920
Mykolayiv oblast	1 854 757	949 393
Odesa oblast	2 482 391	1 574 458
Poltava oblast	174 957	246 508
Rivne oblast	172 977	172 875
Sumy oblast	198 776	208 606
Ternopil oblast	23 351	35 744
Kharkiv oblast	646 875	384 535
Kherson oblast	524 217	476 351
Khmelnitsky oblast	264 058	290 607
Cherkasy oblast	942 641	1 028 869
Chernivtsi oblast	144 377	168 335
Chernihiv oblast	37 866	84 110
City of Kyiv	2 863 913	2 199 250
City of Sevastopol	392 832	448 950
<b>Total:</b>	<b>22 395 731</b>	<b>14 354 428</b>

## Voluntary Counseling and Testing with Rapid Tests in 2009

Oblast/region	IDU	Positive results	FSW	Positive results	MSM	Positive results	Prisoners	Positive results	Others (clients of CSW, people close to IDU, CSW and MSM)	Positive results
AR Crimea	2079	144	1036	59	99	10	0	0	306	5
Vinnitsya oblast	1243	80	977	4	0	0	272	12	273	1
Volyn oblast	494	31	195	9	0	0	0	0	0	0
Dnipropetrovsk oblast	9433	1206	1411	274	365	3	396	81	2037	167
Donetsk oblast	10 399	1006	1107	123	194	13	205	41	1335	65
Zhytomyr oblast	289	39	0	0	0	0	0	0	0	0
Zakarpattia oblast	442	6	0	0	0	0	0	0	0	0
Zaporizhya oblast	620	64	106	9	99	8	0	0	0	0
Ivano-Frankivsk oblast	283	17	80	1	51	1	0	0	4	1
Kyiv oblast	332	66	103	9	0	0	164	40	0	0
Kirovohrad oblast	777	69	219	10	165	8	0	0	0	0
Luhansk oblast	2144	89	369	6	0	0	0	0	5	2
Lviv oblast	343	41	791	6	0	0	0	0	0	0
Mykolayiv oblast	5338	767	5333	327	300	3	0	0	110	2
Odesa oblast	8172	1587	2191	23	655	32	0	0	170	11
Poltava oblast	899	104	11	1	0	0	0	0	267	1
Rivne oblast	990	114	127	9	0	0	0	0	0	0
Sumy oblast	763	67	253	3	0	0	0	0	0	0
Ternopil oblast	172	23	89	12	0	0	0	0	0	0
Kharkiv oblast	2518	98	1924	6	232	10	353	58	223	2
Kherson oblast	2429	138	565	26	231	6	0	0	280	8
Khmelnitsky oblast	1855	58	337	21	42	0	0	0	31	3
Cherkasy oblast	4137	417	841	69	185	7	170	0	13	0
Chernivtsi oblast	786	15	242	0	51	1	0	0	65	0
Chernihiv oblast	331	88	0	0	0	0	0	0	0	0
City of Kyiv	10 220	1250	1677	48	2620	58	0	0	1410	11
City of Sevastopol	1249	83	813	66	108	3	0	0	10	5
Total:	68 737	7667	20 797	1 121	5 397	163	1560	232	6539	284

## Screening Tests among Populations Vulnerable to HIV for Sexually Transmitted Infections (Syphilis, Gonorrhea, Chlamydia) in 2009

Oblast/region	IDU	Positive results	FSW	Positive results	MSM	Positive results	Others (clients of CSW, people close to IDU, CSW and MSM)	Positive results
AR Crimea	2667	172	1 773	172	144	31	3	0
Vinnitsya oblast	1105	8	1 737	44	0	0	479	1
Volyn oblast	398	8	228	11	0	0	0	0
Dnipropetrovsk oblast	10 907	293	2 169	192	306	0	1025	35
Donetsk oblast	10 149	127	1244	9	216	2	1312	5
Zhytomyr oblast	196	2	0	0	0	0	0	0
Zakarpattia oblast	306	0	0	0	0	0	0	0
Zaporizhya oblast	326	3	81	0	99	0	150	0
Ivano-Frankivsk oblast	179	8	71	5	44	3	0	0
Kyiv oblast	190	7	86	2	0	0	145	4
Kirovohrad oblast	867	6	334	10	105	2	0	0
Luhansk oblast	3291	68	478	3	0	0	5	0
Lviv oblast	424	21	1983	61	0	0	5	0
Mykolayiv oblast	4669	126	5733	248	323	2	73	3
Odesa oblast	7080	67	4092	27	705	15	138	0
Poltava oblast	580	4	13	5	0	0	259	0
Rivne oblast	830	77	198	19	0	0	0	0
Sumy oblast	595	0	244	2	0	0	0	0
Ternopil oblast	125	1	83	5	0	0	0	0
Kharkiv oblast	2584	44	2394	92	268	15	223	0
Kherson oblast	2910	136	1401	62	500	5	401	16
Khmelnysky oblast	1215	32	434	35	24	9	21	0
Cherkasy oblast	4015	33	1844	55	188	1	97	0
Chernivtsi oblast	756	1	220	1	52	0	59	0
Chernihiv oblast	249	0	0	0	0	0	0	0
City of Kyiv	10 326	105	2551	187	3232	10	668	8
City of Sevastopol	1901	71	2323	121	221	0	7	2
<b>Total:</b>	<b>68 840</b>	<b>1420</b>	<b>31 714</b>	<b>1368</b>	<b>6427</b>	<b>86</b>	<b>5065</b>	<b>74</b>



### Annex 3. Implementing Partners of Alliance-Ukraine in 2009

№	NGO Name	Donor's programme (*)	Region	Total amount of projects	Total signed (USD)	Total disbursement (USD)
1	Youth center of women's initiatives	GFA, OSI, US	Crimea	6	\$296 103	\$229 206
2	Charitable Foundation "Nadiya & Poriatunok"	GFA, US	Crimea	7	\$356 229	\$238 056
3	Resocialisation Center of Drug-addicted Youth "Your Victory"	GFA, GFN	Crimea	4	\$57 468	\$43 959
4	Public organization "Feniks"	GFA	Crimea	3	\$37 922	\$35 746
5	Bakhchysarai Charitable Foundation "Center for Re-socialization of Drug Addicted Youth "Your Victory"	GFA	Crimea	2	\$31 449	\$28 437
6	Charitable Club Modus	GFA, GFN	Crimea	1	\$10 341	\$23 539
7	Crimea republic fund "Gelios"	GFA	Crimea	2	\$40 925	\$18 285
8	Sevastopol city charitable organisation "Gavan Plus"	GFA	Crimea	3	\$17 307	\$13 082
9	Youth Public organization "Your Victory"	GFA	Crimea	1	\$13 396	\$5 135
10	Vinnitsya Region Public Congress "Stalist"	GFA	Vinnitsya region	2	\$171 396	\$131 163
11	Vinnitsa Oblast Department of International Charitable Foundation "Human Development"	GFA, GFN	Vinnitsya region	3	\$44 472	\$65 241
12	Public organization "Center of resocialization of chemically dependent people "Nezalezhnist"	GFA	Vinnitsya region	3	\$73 641	\$28 352
13	Volynskiy Charitable Regional Foundation "Shans"	GFA, GFN	Volyn region	4	\$96 137	\$73 675
14	Charitable Foundation "Public Health"	GFA, GFN	Dnipropetrovsk region	4	\$235 710	\$181 504
15	Charitable Foundation "Virtus"	GFA, GFN	Dnipropetrovsk region	4	\$119 542	\$132 573
16	Public organisation "Nikopol center of inner and psychological rehabilitation "Vidkryti Dveri"	GFA	Dnipropetrovsk region	2	\$133 511	\$114 144
17	Public organisation Club "Impuls"	GFA	Dnipropetrovsk region	2	\$92 885	\$80 395
18	Charitable organisation "HELP"	GFA	Dnipropetrovsk region	2	\$66 685	\$50 408
19	NGO "Dniprovsky humanitarian initiatives"	GFA, US	Dnipropetrovsk region	4	\$59 302	\$43 713
20	NGO "Family support centre"	GFA	Dnipropetrovsk region	3	\$61 725	\$45 317
21	City public centre of drug-addicted "Future without AIDS"	GFA, GFN	Dnipropetrovsk region	4	\$56 200	\$42 063
22	Charitable Foundation "Promin", Zhovti Vody	GFA, GFN	Dnipropetrovsk region	4	\$53 854	\$40 125
23	Kryvyi Rig city regional Branch of Charitable Organization "All-Ukrainian Network of PLHW"	GFA	Dnipropetrovsk region	2	\$51 249	\$38 885

№	NGO Name	Donor's programme (*)	Region	Total amount of projects	Total signed (USD)	Total disbursement (USD)
24	Ordzhonikidze city charitable organization Fund "Dopomoga"	GFA	Dnipropetrovsk region	4	\$52 661	\$36 496
25	Kryvyi Rig city charitable organization "Our Future"	GFA	Dnipropetrovsk region	2	\$55 993	\$37 387
26	Public organisation Club "Impuls", Dniprodzershinsk	GFA, GFN	Dnipropetrovsk region	2	\$12 278	\$15 070
27	NGO "The Road of Life"	GFA	Dnipropetrovsk region	1	\$36 848	\$13 364
28	Pavlograd city Charitable organisation "Oberig"	GFA	Dnipropetrovsk region	1	\$32 274	\$13 314
29	Dnipropetrovsk public organization "Perekhrestya"	GFA	Dnipropetrovsk region	2	\$25 123	\$12 168
30	NGO "Z nadiyeu"	GFA	Dnipropetrovsk region	2	\$12 452	\$10 119
31	Public organisation Union "Amikus"	GFA, US	Donetsk region	4	\$271 813	\$204 324
32	Donetsk regional Charitable Foundation "Oberig"	GFA	Donetsk region	2	\$212 412	\$172 568
33	Public organisation "Liniya Zhyttia"	GFA	Donetsk region	2	\$132 118	\$118 857
34	Slovjansk City Public organisation "Nasha Dopomoga"	GFA	Donetsk region	2	\$121 456	\$113 342
35	Public organization "Donbas without drugs"	GFA, GFN	Donetsk region	4	\$143 826	\$112 520
36	Donetsk Society of assistance for the HIV-infected	GFA	Donetsk region	3	\$117 963	\$89 176
37	NGO "Mariupil Youth Association"	GFA	Donetsk region	2	\$90 511	\$75 420
38	Public organization "Stimulus fund"	GFA	Donetsk region	2	\$93 545	\$66 841
39	Charitable Foundation "Health of the Nation"	GFA	Donetsk region	3	\$73 206	\$58 459
40	Charitable Foundation "Club Svitnok"	GFA	Donetsk region	1	\$45 308	\$51 771
41	Donetsk Youth Organization "Development. Initiative. Partnership"	GFA	Donetsk region	2	\$53 889	\$42 710
42	Charitable organization "The new day"	GFA	Donetsk region	2	\$54 607	\$42 168
43	Donetsk regional Charitable Foundation "Ray"	GFA	Donetsk region	2	\$50 802	\$40 588
44	Donetsk regional Charitable Foundation "Svitnok"	GFA	Donetsk region	2	\$23 713	\$16 105
45	NGO "Club "Future"	OSI	Donetsk region	2	\$11 023	\$10 713
46	NGO Public Organization "Your choice"	GFA	Donetsk region	1	\$14 745	\$5 922
47	Zhytomyr Oblast Public organization "Perspektyva"	GFA, GFN	Zhytomyr region	6	\$85 338	\$63 416
48	Zakarpattia regional Charitable Foundation "Rada zhyttia"	GFA	Zakarpattia region	2	\$46 608	\$37 611
49	Zakarpattia regional charitable foundation of antialcohol, antinarcotics, antitobacco programs and chemical addictions prevention support	GFA, GFN	Zakarpattia region	3	\$14 758	\$12 331

№	NGO Name	Donor's programme (*)	Region	Total amount of projects	Total signed (USD)	Total disbursement (USD)
50	Zaporizhya regional Branch of Charitable Organization "All-Ukrainian Network of PLHW"	GFA	Zaporizzhya region	4	\$81 706	\$58 738
51	Charitable Foundation "Spodiivannia"	GFA	Zaporizzhya region	2	\$67 550	\$54 293
52	Zaporizhzhia regional Branch of Red Cross Society	GFA, GFN	Zaporizzhya region	3	\$14 991	\$17 861
53	Charitable organisation "Charitable Foundation "Zhhytlya Tryvae"	GFA, GFN	Zaporizzhya region	4	\$10 510	\$13 168
54	Charitable Christian Foundation "Solidarnist"	GFA, GFN	Ivano-Frankivsk region	3	\$33 490	\$64 935
55	Charitable organisation "Alfa Life"	GFA, GFN	Kyiv region	3	\$24 273	\$40 758
56	Charitable organisation "Aura+", Bila Tserkva	GFA	Kyiv region	1	\$6 288	\$6 299
57	Brovary City Charitable Foundation "Peremoga"	GFA	Kyiv region	1	\$13 520	\$5 073
58	Charitable Foundation "Return to life"	GFA	Kirovograd region	2	\$182 045	\$127 588
59	Kirovograd regional Branch of Charitable Organization "All-Ukrainian Network of PLHW"	GFA, GFN	Kirovograd region	3	\$25 273	\$24 531
60	Lugansk Charitable Foundation "Step to Future"	GFA, GFN	Lugansk region	5	\$257 022	\$157 175
61	Lugansk Charitable Foundation "Anty Snid"	GFA	Lugansk region	2	\$88 254	\$72 964
62	Lviv Charitable Foundation "SALUS"	GFA, LS	Lviv region	4	\$210 318	\$146 037
63	Lviv City public organisation "Center of inner and psychological support "Doroga"	GFA, GFN	Lviv region	4	\$30 793	\$27 282
64	Charitable Foundation "Avante"	GFA	Lviv region	1	\$23 458	\$8 412
65	Charitable Foundation "Nazareth"	GFA	Lviv region	1	\$8 442	\$3 196
66	NGO "Eney Club"	GFA	Kyiv city	3	\$423 026	\$355 592
67	Ukrainian Institute of Public Health Policy Research	GFA	Kyiv city	5	\$653 317	\$356 608
68	All-Ukrainian Network of PLWH	GFA	Kyiv city	1	\$144 999	\$261 846
69	NGO "Gay Alliance"	GFA	Kyiv city	2	\$312 479	\$235 583
70	Kyiv International Institute of Sociology	GFA	Kyiv city	6	\$159 492	\$223 570
71	International Public Organization "Labor and Health Social Initiatives"	GFA	Kyiv city	2	\$411 451	\$203 224
72	Ukrainian Institute of social research named after Oleksandr Yaremenko	GFA	Kyiv city	3	\$184 299	\$195 843
73	National AIDS Center	GFA	Kyiv city	2	\$158 407	\$175 286



№	NGO Name	Donor's programme (*)	Region	Total amount of projects	Total signed (USD)	Total disbursement (USD)
74	NGO "Step by Step"	GFA, OSI	Kyiv city	4	\$272 410	\$166 450
75	Charitable Foundation "Drop In Center"	GFA	Kyiv city	2	\$164 881	\$133 601
76	International Charitable Organization AIDS Foundation "East – West" (AFEW)	GFA	Kyiv city	1	\$479 491	\$143 656
77	Ukrainian medical and monitoring center on alcohol and drugs of the Ministry of Health of Ukraine	GFA	Kyiv city	2	\$163 228	\$99 465
78	Centre of Social Expertise	GFA	Kyiv city	1	\$105 718	\$105 718
79	International Charitable Foundation "Vertikal"	GFA	Kyiv city	2	\$109 514	\$94 123
80	All-Ukrainian Charitable Organization "Convictus Ukraine"	GFA	Kyiv city	3	\$146 915	\$86 457
81	All-Ukrainian Harm Reduction Association	GFA	Kyiv city	2	\$74 926	\$69 787
82	Charitable Organization "Substance Abuse and AIDS prevention Foundation"	GFA	Kyiv city	2	\$25 526	\$44 234
83	NGO "Socium XXI"	GFA	Kyiv city	2	\$67 884	\$45 588
84	NGO "Institut zalezhnosti"	GFA, US, GFN	Kyiv city	5	\$38 302	\$43 041
85	Charitable Foundation of Youth Involvement	GFA	Kyiv city	1	\$39 006	\$39 006
86	Kyiv branch of International Charitable Organization "Rehabilitation Center STEPS"	GFA, GFN	Kyiv city	4	\$34 028	\$35 045
87	Analytical Centre "Socioconsulting"	GFA	Kyiv city	1	\$59 276	\$26 674
88	All-Ukrainian Charitable organization "Spil'nota" ("Community")	GFA	Kyiv city	1	\$9 903	\$21 699
89	State Institute of Family and Youth Development	GFA	Kyiv city	1	\$19 321	\$19 321
90	Red Cross Society of Ukraine	GFA	Kyiv city	2	\$19 293	\$18 135
91	All-Ukrainian Pharmacy Association	GFA	Kyiv city	1	\$2 992	\$7 334
92	Kiev City Clinical Hospital #5	US	Kyiv city	1	\$6 480	\$6 480
93	Media Mist Group Ltd	GFA	Kyiv city	1	\$2 561	\$2 561
94	Mykolayiv City Charitable Foundation "Unitus"	GFA	Mykolayiv region	2	\$292 777	\$238 216
95	Mykolayiv regional Charitable Foundation "Nove Storychhya"	GFA, GFN	Mykolayiv region	4	\$283 206	\$230 893
96	Mykolayiv City Charitable Foundation "Vynid"	GFA	Mykolayiv region	3	\$137 083	\$110 901
97	Mykolaiv association of HIV-infected "Chas Zyttya"	GFA, US, GFN	Mykolayiv region	6	\$122 696	\$108 829
98	Mykolayiv Regional public youth movement "Penitenciarna"	GFA, US, GFN	Mykolayiv region	2	\$46 172	\$42 017

№	NGO Name	Donor's programme (*)	Region	Total amount of projects	Total signed (USD)	Total disbursement (USD)
	iniciatyva"					
99	Mykolayiv Association of Gays, Lesbians and Bisexuals "Liga"	GFA	Mykolayiv region	2	\$41 642	\$26 943
100	Mykolayiv Regional Charitable Foundation "Vita-Light"	GFA, US	Mykolayiv region	4	\$29 059	\$20 709
101	Charitable Foundation "Healthy Nation"	GFA	Mykolayiv region	1	\$16 771	\$6 122
102	Charitable Foundation "The Way Home"	GFA, GFN	Odesa region	6	\$483 316	\$357 279
103	NGO "Youth Center for Development"	GFA, OSI	Odesa region	5	\$237 621	\$181 174
104	Public Movement "Faith, Hope, Love"	GFA, US	Odesa region	3	\$189 841	\$146 969
105	Youth public movement "Partner"	GFA, US	Odesa region	3	\$131 999	\$104 339
106	Charitable Foundation "Veselka"	GFA, GFN	Odesa region	4	\$61 139	\$67 549
107	Charitable organization "Christian Rehabilitation Center "Blagodot", Odesa	GFA	Odesa region	3	\$69 848	\$56 800
108	NGO's Union "Razom za zhyttia"	GFA, US, GFN	Odesa region	5	\$51 438	\$41 186
109	International NGO "Rehabilitation Center STEPS"	US	Odesa region	1	\$2 517	\$5 740
110	Charitable Foundation "Public Health", Poltava	GFA	Poltava region	2	\$236 076	\$158 848
111	Charitable Association "Svitlo Nadiyi"	GFA, GFN	Poltava region	5	\$154 644	\$119 083
112	International Charitable Organization "Federation "Klubnyi Dim"	GFA	Poltava region	1	\$19 898	\$8 513
113	Poltava regional charity organization "Rehabilitation centre "Way out exists!"	GFA	Poltava region	1	\$2 949	\$2 946
114	Rivne Regional Charitable Foundation "Maibutne bez SNIDu"	GFA, GFN	Rivne region	3	\$91 365	\$97 915
115	Charitable Foundation "Pace Forward to Meeting"	GFA	Sumy region	2	\$145 235	\$103 387
116	Sumy Regional Youth Public Organization "Club for resocialization of chemically-abusive people "Shans"	GFA, GFN	Sumy region	4	\$22 521	\$17 568
117	Ternopil public organisation "Center of inner and psychological support "Dzerela"	GFA, GFN	Ternopil region	4	\$68 743	\$56 526
118	Kharkiv City Charitable Foundation "BLAGO"	GFA	Kharkiv region	2	\$289 632	\$206 106
119	Kharkiv City Charitable Foundation "Nadiia ie"	GFA	Kharkiv region	4	\$67 663	\$42 945
120	Kharkiv city branch of All-Ukrainian Network of PLWH	GFA	Kharkiv region	2	\$41 962	\$27 927
121	State Institution "Institute of Dermatology and Venereology Academy of Medical Sciences of Ukraine"	GFA	Kharkiv region	1	\$5 205	\$10 194

№	NGO Name	Donor's programme (*)	Region	Total amount of projects	Total signed (USD)	Total disbursement (USD)
122	Kharkv regional PO "Positive"	GFA	Kharkiv region	1	\$15 718	\$6 169
123	Kherson Regional Charitable Foundation "Mangust"	GFA, US, GFN	Kherson region	9	\$369 820	\$271 429
124	Public organization "For equal rights"	GFA	Kherson region	2	\$40 424	\$31 654
125	NGO "Adaptation centre "Vybir zhyttia"	GFA, GFN	Kherson region	3	\$30 622	\$22 532
126	Kachovka city branch of All-Ukrainian Network of PLWH	GFA	Kherson region	1	\$3 167	\$7 026
127	Association of Assistance of Drug Addiction Problems "Victoriya'	GFA	khmelnitskiy region	3	\$166 963	\$128 805
128	Charitable Foundation "Insight"	GFA, LS, US, GFN	Cherkasy region	8	\$249 635	\$173 443
129	Charitable Foundation "From Heart to heart"	GFA, OSI	Cherkasy region	3	\$127 162	\$96 357
130	Charitable Foundation "VAM"	GFA	Cherkasy region	3	\$78 137	\$69 858
131	Charitable Foundation "Volia"	GFA	Cherkasy region	3	\$81 583	\$61 594
132	NGO "Dialog" , Smila	GFA, OSI	Cherkasy region	4	\$79 868	\$50 870
133	Cherkasy Regional Charitable Foundation "With love to children"	GFA	Cherkasy region	3	\$49 441	\$29 264
134	Public organization "Gay-alliance Cherkasy "	GFA	Cherkasy region	2	\$31 379	\$23 603
135	Cherkassy regional Branch of Charitable Organization "All-Ukrainian Network of PLHW"	GFA	Cherkasy region	1	\$13 442	\$4 493
136	Charitable Foundation "New family"	GFA, GFN	Chernivtsi region	4	\$177 412	\$124 487
137	Chernihiv Resocialization Centre of chemically dependent "Vedis"	GFA	Chernigiv region	2	\$50 067	\$38 224
138	Chernigiv city/ Branch of Charitable Organization "All-Ukrainian Network of PLHW"	GFA, GFN	Chernigiv region	3	\$9 821	\$8 668
139	Prilyku city Center of Social Services for family, youth and children	GFA	Chernigiv region	1	\$9 390	\$3 653
	Total amount of funds unused under grant agreements for previous years, refunded in 2009					-\$ 8 872
Total grants:				380	\$14 356 847	\$10 960 875

\* Donor's programme

GFA - Alliance-Ukraine grant under the Global Fund Programme

LS - Alliance-Ukraine grant under Levi Strauss Foundation programmes

GFN - Indirect Alliance-Ukraine grant under the Global Fund Programme

OSI - Alliance-Ukraine grant under the Open Society Institute programmes

US - Alliance-Ukraine grant under USAID programmes



**Table 2. Consolidated Data on Programme Contracts of the ICF "Internatioal HIV/AIDS Alliance in Ukraine" Related to the Procurement, Storage and Distribution of Medicines in 2009, residents**

Implementing Partner	Funding Programme (*)		Total number of projects	Total Disbursement
State Enterprise "Institute of Ecohygiene and Toxicology"	GFA	R6P1	1	\$491.80
Limited Liability Company "InterLabService-Ukraine"	GFA	R1	1	\$6,708.58
Limited Liability Company "Optima Pharm"	NW GFA	Y2	2	\$50,965.57
	GFA	R6P1		\$31,721.43
	GFA	R6P2		\$31,721.43
State Joint Stock Company "Liky Ukrainy"	GFA	R1	1	\$205,304.32
	NW GFA	R6		\$193,526.30
	US			\$43,062.04
	GFA	R6P2		\$154,388.30
State Enterprise "Ukrmedpostach"	NW GFA	Y1	1	\$8,794.08
	NW GFA	Y2		\$41,873.35
	GFA	R1		\$49,151.19
	GFA	R6P1		\$14,760.19
	GFA	R6P2		\$6,048.83
Limited Liability Company "Postal and Freight Courier"	GFA	R1	1	\$15,510.56
	GFA	R6P1		\$5,006.50
State Enterprise "BioLine Ukraine"	NW GFA	Y1	1	\$175.30
IFC Limited Liability Company "Ridan Engineering"	CR	0	0	\$811.43
	GFA	R6P1		\$1,973.37
	GFA	R6P2		\$140.48
	GFA	R1		\$6,065.53
Overseas Transport Ukraine LTD	GFA	R6P1	1	\$244.32
Limited Liability Company "Biomedinvest"	NW GFA	Y2	3	\$1,205.71
	GFA	R6P1		\$10,954.68
	GFA	R1		\$412.48
	GFA	R6P2		\$3,000.00
Limited Liability Company "VVS, Ltd."	GFA	R6P1	1	\$35,691.95
	GFA	R6P2		\$35,691.95
Limited Liability Company "Medcom Ukraine"	GFA	R6P2	1	\$163,962.38
Medbioalliance LTD	GFA	R6P2	1	\$1,047.07
Scientific and technical center "VNDIHIMPROECT" LTD	GFA	R6P2	1	\$26.65
Pharmasko LTD	GFA	R6P1	2	\$147,337.07
	CR	0		\$1,253.62
	GFA	R6P2		\$83,108.44
Limited Liability Company "Cente-Lab"	NW GFA	Y2	0	\$8,049.71
Limited Liability Company "Medlife"	GFA	R6P1	1	\$34,463.59
	GFA	R6P2		\$152,547.95
Limited Liability Company "Pharmacia-2000"	GFA	R1	2	\$163,377.08
	GFA	R6P1		\$890,387.10
	GFA	R6P2		\$11,181.04
	NW GFA	Y2		\$1,351.40
Private Entrepreneur "Smerchinsky"	GFA	R6P1	0	\$785.70
Limited Liability Company "TRI-Central Pharmacy Storehouse"	GFA	R6P1	1	\$9,026.01
	GFA	R6P2		\$9,026.01
"Liudmila Pharm" LTD	NW GFA	Y2	3	\$69,083.45
	CR	0		\$3,876.98
	GFA	R6P1		\$19,066.77
	GFA	R6P2		\$19,066.77
Private Entrepreneur Blinova I.V.	GFA	R6P1	1	\$39,554.90
Private Entrepreneur Demesko S.A.	GFA	R6P1	1	\$4,031.86
	CR	0		\$180.99
	GFA	R6P2		\$2,488.23
Latex Kiy LTD	GFA	R6P1	0	\$63,062.02
<b>Total:</b>			<b>27</b>	<b>\$2,852,744.46</b>

Project status - National, Region- All-Ukrainian

**Table 3. Consolidated Data on Programme Contracts of the ICF "Internatioal HIV/AIDS Alliance in Ukraine" Related to the Procurement, Storage and Distribution of Medicines in 2009, non-residents**

Implementing Partner	Funding Programme (*)		Total number of projects	Funded
IDA HIV/AIDS GROUP	NW GFA	Y2	1	\$391,571.13
	NW GFA	Y1		\$374,294.00
Abbott Laboratories GmbH&Co	GFA	R1	1	\$459,059.92
	GFA	R6P1	1	\$351,489.00
Rusan Pharma Ltd.	NW GFA	R6	1	\$330,536.00
	GFA	R6P2	1	\$53,944.00
Vimta Labs Ltd.	GFA	R1	1	\$2,290.80
Warnex Analytical Services Inc.	GFA	R1	1	\$8,995.20
Sandoz d.d.	GFA	R6P2	1	\$0.00
Pharmascience Inc.	GFA	R6P2	1	\$0.00
<b>Total:</b>			<b>9</b>	<b>\$1,972,180.05</b>

Implementing Partner	Funding Programme (*)	Total number of projects	Funded
International HIV/AIDS Alliance, UK	GFA	1	\$146,428.13
<b>Total:</b>		<b>1</b>	<b>\$146,428.13</b>

\* Funding Programmes

GFA - direct grant and contract of the Alliance-Ukraine under the Global Fund programme (Y - Year, R- Round, P - Phase)

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

CR - Other Programs

Annex 4. Total Cost of Medicines and Health Care Commodities in various regions in 2009

Oblast / Recipient	HIV rapid tests, UAH	Preg-nancy rapid tests, UAH	Syphilis rapid tests, UAH	HBs AG rapid tests, UAH	Gonorrhea rapid tests, UAH	Chlamydia rapid tests, UAH	Methadone, UAH	Buprenorphine, UAH	Condoms, UAH	Lubricants, UAH	ARV med-ications, UAH	Viral load test systems, UAH	Syringes, UAH	Spirit wipes, UAH	STI drugs, UAH	Total, UAH
Donetsk	148 827	3 540	95 289	995	24 559	23 976	325 904	445 536	96 000	89 280	564 404	325 837	1 462 181	238 850	106 742	3 951 920
Dnipropetrovsk	113 768	3 231	73 870	995	17 661	17 242	336 818	445 536	336 000	89 280	584 524	0	861 339	196 970	184 887	3 262 121
Crimea	55 401	563	52 011	995	11 584	12 121	288 060	445 536	245 600	56 640	330 086	384 536	415 863	63 960	139 361	2 502 316
Kherson	35 090	87	23 609	0	6 974	6 808	117 365	445 536	0	41 280	32 039	0	376 480	61 200	242 442	1 388 909
Mykolaiv	76 760	551	61 801	3 582	12 299	12 538	173 529	445 536	187 810	173 760	287 254	0	459 876	119 900	7 104	2 022 300
Kyiv	242 263	135	198 494	17 641	41 140	40 164	163 879	1 276 632	0	247 680	223 907	2 121 444	1 134 485	223 178	123 447	6 054 489
Cherkasy	53 059	3 234	40 964	1 194	8 300	8 103	43 117	171 360	100 536	26 880	60 899	0	556 136	64 625	3 998	1 142 405
Odesa	126 586	36	95 849	876	31 254	30 436	135 065	445 536	171 461	140 160	543 646	467 622	864 996	164 900	56 306	3 274 727
Sumy	10 167	900	7 790	0	1 516	1 480	32 355	171 360	14 062	9 600	27 761	0	124 965	14 450	10 765	427 171
Kirovohrad	10 512	504	14 177	0	0	0	67 807	171 360	27 670	24 960	2 801	0	104 782	12 750	1 238	438 560
Volyns	6 250	225	6 391	0	0	0	20 179	214 200	11 794	6 720	46 617	0	78 354	10 200	15 406	416 337
Poltava	13 167	165	8 953	0	1 289	1 258	148 564	274 176	0	1 920	24 718	0	124 548	22 950	4 759	626 467
Ivano-Frankivsk	6 453	0	4 620	0	0	0	80 974	257 040	30 391	18 240	44 685	0	18 301	14 450	530	475 684
Vinnitsya	26 595	540	14 798	0	7 580	7 400	77 292	274 176	16 783	7 680	60 969	0	100 224	20 400	25 567	640 003
Zaporizhya	8 100	0	5 425	0	758	1 480	17 977	385 560	14 062	13 440	141 463	88 491	94 519	12 750	28 659	812 684
Zhytomyr	2 348	0	2 444	0	0	0	99 942	128 520	0	0	19 848	0	27 184	8 500	3 998	292 784
Rivne	7 682	1 083	7 070	0	1 213	1 184	27 887	85 680	0	13 440	3 632	0	53 546	14 450	10 061	226 929
Terнопil	3 594	75	3 565	0	0	0	51 944	171 360	120 454	0	38 967	0	56 424	8 500	11 388	466 271
Khmelnytsky	13 879	65	8 770	597	3 184	2 368	25 308	0	11 794	8 640	50 050	0	101 764	18 638	5 332	250 388
Lviv	14 847	45	10 266	995	2 843	2 775	34 120	128 520	202 433	20 160	13 598	0	59 352	8 525	10 892	509 371
Kharkiv	42 025	75	32 378	1 990	4 548	4 440	0	0	23 920	59 520	96 002	0	161 524	25 500	15 789	467 711
Luhansk	22 837	129	16 662	0	4 055	3 959	166 891	128 520	0	9 600	158 985	0	222 199	32 300	32 619	798 756
Zakarpattia	4 629	353	2 201	0	720	703	27 509	85 680	0	0	3 654	0	49 519	10 200	34 131	219 300
Chernivtsi	13 778	900	12 419	0	0	0	19 238	171 360	18 144	12 480	11 967	0	133 587	17 000	8 553	419 425
Chernihiv	3 549	0	3 013	0	189	185	9 376	85 680	48 000	0	34 457	0	36 274	9 350	4 891	234 964
LAVRA	0	0	0	0	0	0	0	0	0	0	116 436	0	0	0	0	116 436
Ohmadyl	0	0	0	0	0	0	0	0	0	0	50 583	0	0	0	0	50 583
Penitentiary department	0	0	0	0	0	0	0	0	0	0	34 052	0	0	0	0	34 052
Total	1 062 166	16 434	802 832	29 860	181 666	178 620	2 491 098	6 854 400	167 6911	1 071 360	3 608 007	3 387 930	7 678 418	1 394 497	1 088 862	31 523 060

Annex 5. Pharmaceutical products, laboratory reagents and consumables procured within Global Fund Round 6 grant funds in 2009 (Grant Agreements with PLWHA network)

International Nonproprietary Name	Brand name	Supplier	Price per unit CIP \$ (inc. commission fee)	Quantity of packs	Total cost \$	Manufacturer	Country of origin
ARV							
Zidovudine 300mg + Lamivudine 150mg	Zidovudine 300mg + Lamivudine 150mg tab. №60	IDA	\$ 9,76	6 685	\$ 65 422, 75	Aurobindo	India
Tenofovir 300 mg+ Emtricitabine 200 mg	Truvada tabs	IDA	\$ 34,06	2 176	\$ 74 1086 08	Gilead	Germany
Lamivudine 150 mg	Lamivudine 150 mg tabs	IDA	\$ 3, 05	1 674	\$ 5 1006 74	Ranbaxy	India
Tenofovir disoproxil fumarate 300 mg	Viread tabs	IDA	\$ 22, 36	1 586	\$ 35 4556 89	Gilead	Germany
Efavirenz 600 mg	Efavirenz 600 mg tabs	IDA	\$ 7, 43	9 022	\$ 67 0076 84	Aurobindo	India
Efavirenz 200 mg	Efavirenz 200 mg tabs	IDA	\$ 12, 22	985	\$ 12 036660	Ranbaxy	India
Lopinavir 200mg + Ritonavir 50mg	Aluvia tabs	IDA	\$ 88, 73	1 155	\$ 102 488630	Abbott	Germany
ARV total					\$ 361 620,20		
DOI							
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 3946 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
DOI total					\$ 117 912, 53		
Viral Load							
VL total		Abbott			\$ 117 912, 53	Bayer	Germany
Cd4 tests							
Cd4 total		Becton Dickinson			\$ 14 875, 00	Becton Dickinson	Belgium
Total for Network in 2009					\$ 562 859, 73		



## Annex 6. List of ARV-Medications Procured by Alliance-Ukraine in 2009 under GF 1st Round

Product	Manufacturer	Country of origin	Strength	Number of tablets, capsules, ml, g	2009		
					quantity	price, USD	Total cost, USD
Tenofovir+ Emtricitabine	Gilead	Germany	300mg+ 200mg	30	2856	34,06	<b>97 276, 36</b>
Tenofovir DF	Gilead	Germany	300mg	30	12000	22,36	<b>268 320,00</b>
Zidovudine	Aurobindo	India	300mg	100	634	8,70	<b>5 515, 80</b>
Lamivudine	Aurobindo	India	150mg	60	12000	3,47	<b>41 640, 00</b>
Nevirapine	Aurobindo	India	240 ml (10 mg/ml)	1	3200	3,51	<b>11 232, 00</b>
<b>Total</b>							<b>423 983, 16</b>

## Annex 7. Consolidated Financial Statements for the Year Ended December 31, 2009



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## **Independent Auditors' Report**

To the Executive Director of

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

We have audited the accompanying consolidated financial statements of International Charitable Foundation "International HIV/AIDS Alliance in Ukraine" and its subsidiary (the "Organization"), which comprise the consolidated balance sheet as at 31 December 2009, and the consolidated income statement, consolidated statement of changes in equity and consolidated cash flow statement for the year then ended, and a summary of significant accounting policies and other explanatory notes.

### *Management's Responsibility for the Financial Statements*

Management is responsible for the preparation and fair presentation of these financial statements in accordance with Ukrainian National Accounting Standards and regulations on accounting and reporting in Ukraine. This responsibility includes: designing, implementing and maintaining internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatements, whether due to fraud or error; selecting and applying appropriate accounting policies; and making accounting estimates that are reasonable in the circumstances.

### *Auditors' Responsibility*

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with International Standards on Auditing adopted as National Standards on Auditing pursuant to Resolution of the Audit Chamber of Ukraine #122 dated 18 April 2003, and in accordance with Ukrainian legislation. Those standards require that we comply with relevant ethical requirements and plan and perform the audit to obtain reasonable assurance whether the financial statements are free of material misstatement.

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



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

*Opinion*

In our opinion, the consolidated financial statements present fairly, in all material respects, the financial position of the Organization as at 31 December 2009, and its financial performance and its cash flows for the year then ended in accordance with Ukrainian National Accounting Standards.

*Emphasis of Matter*

Without qualifying our opinion, we draw attention to the fact that the corresponding figures presented, excluding the adjustments described in Note 5, are based on the consolidated financial statements of the Organization as at and for the year ended 31 December 2008, which were audited by other auditors whose report dated 27 March 2009 expressed an unmodified opinion on those statements. We have audited the adjustments described in Note 5 that were applied to restate the 2008 consolidated financial statements. In our opinion, such adjustments are appropriate and have been properly applied.



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

31 May 2010



Andriy Tsymbal  
Director JSC KPMG Audit  
Certified auditor  
Certificate: Series A №005964  
from 19 July 2005

Entity International HIV/AIDS Alliance in Ukraine  
Location : 03680, Kyiv, 5 Dymytrova str.  
State administration authority: Community Property  
Legal form of activity  
Business activity: Charity  
Measurement unit: thousands of UAH

Date (year, month, day)

EDRPOU

KOATUU

SPODU

ZKGNG

KVED

Check total

Codes
2009/12/31
26333816
8038200000
7994
98600
85.32.5

### Consolidated Balance sheet as at 31 December 2009

Form No.1

DKUD 1801001

ASSETS	Line Code	At the beginning of the period	At the end of the period
1	2	3	4
<b>I. Non-current assets</b>			
Intangible assets:			
net book value	010	160	407
historical cost	011	320	678
accumulated amortization	012	(160)	(271)
Construction in progress	020	-	139
Property, plant and equipment:			
net book value	030	902	1,582
historical cost	031	1,970	3,349
depreciation	032	(1,068)	(1,767)
Long-term biological assets			
net book value	035	-	-
historical cost	036	-	-
depreciation	037	-	-
Long-term financial investments:			
accounted for on an equity basis	040	-	-
other financial investments	045	-	-
Long-term receivables	050	-	-
Net book value of investment property	055	-	-
historical cost of investment property	056	-	-
depreciation of investment property	057	-	-
Deferred tax assets	060	-	-
Other non-current assets	070	-	-
<b>Total non-current assets</b>	<b>080</b>	<b>1,062</b>	<b>2,128</b>
<b>II. Current assets</b>			
Inventories :			
raw materials	100	3,004	4,219
livestock	110	-	-
work in progress	120	-	-
finished goods	130	-	-
merchandise	140	-	-
Promissory notes received	150	-	-
Trade accounts receivable			
net selling price	160	-	99
historical cost	161	-	-
bad debt provision	162	-	-
Prepayments and taxes receivable			
taxes and duties receivable	170	18	204
advances paid	180	-	-
accrued income	190	-	-
intercompany settlements	200	-	-
Other current receivables	210	13,295	24,177
Current financial investments	220	-	-
Cash and cash equivalents:			
Ukrainian hryvnia	230	1,229	4,288
Including petty cash	231	-	-
foreign currency	240	40,615	64,950
Other current assets	250	-	-
<b>Total current assets</b>	<b>260</b>	<b>58,161</b>	<b>97,937</b>
<b>III. Deferred expenses</b>	<b>270</b>	<b>15</b>	<b>24</b>
<b>IV. Fixed assets and groups of disposal</b>	<b>275</b>	<b>-</b>	<b>-</b>
<b>TOTAL ASSETS</b>	<b>280</b>	<b>59,238</b>	<b>100,089</b>



EQUITY AND LIABILITIES	Line Code	At the beginning of the period	At the end of the period
1	2	3	4
<b>I. Equity</b>			
Authorized capital	300	-	-
Share capital	310	-	-
Additional paid-in capital	320	-	-
Other additional capital	330	-	-
Reserves	340	-	-
Retained earnings	350	11,643	13,546
Outstanding capital	360	-	-
Capital withdrawals	370	-	-
<b>Total equity</b>	<b>380</b>	<b>11,643</b>	<b>13,546</b>
<b>II. Accruals for future expenditures and payments</b>			
Accruals for employee benefits	400	-	-
Other accruals	410	-	-
	415	-	-
	416	-	-
	417	-	-
	418	-	-
Special funds	420	42,383	82,514
<b>Total provisions</b>	<b>430</b>	<b>42,383</b>	<b>82,514</b>
<b>III. Non-current liabilities</b>			
Long-term bank loans	440	-	-
Other long-term financial liabilities	450	-	-
Deferred tax liabilities	460	-	-
Other non-current liabilities	470	-	-
<b>Total non-current liabilities</b>	<b>480</b>	<b>-</b>	<b>-</b>
<b>IV. Current liabilities</b>			
Short-term bank loans	500	-	-
Current portion of long-term liabilities	510	-	-
Promissory notes issued	520	-	-
Trade accounts payable	530	3,409	642
<b>Taxes and other payables:</b>			
advances received	540	-	-
taxes and duties payable	550	-	-
extra-budgetary payments	560	-	-
insurance fees	570	-	123
salaries and related charges	580	-	(12)
settlements with participants	590	-	-
intercompany settlements	600	-	-
Liabilities related to fixed assets and groups of disposals held for sale	605	-	-
Other current liabilities	610	749	1,283
<b>Total current liabilities</b>	<b>620</b>	<b>4,158</b>	<b>2,036</b>
<b>V. Deferred income</b>	<b>630</b>	<b>1,054</b>	<b>1,993</b>
<b>TOTAL EQUITY AND LIABILITIES</b>	<b>640</b>	<b>59,238</b>	<b>100,089</b>

Executive Director

(Klepkev A.)

Chief accountant

(Zatuliviter L.)





Appendix  
to National Accounting Standard 2  
(Subject to Order No. 87 of the Ministry of Finance of Ukraine dated  
March 31, 1999)

Entity International HIV/AIDS Alliance in Ukraine  
Location : 03680, Kyiv, 5 Dymytrova str.  
State administration authority: Community Property  
Legal form of activity  
Business activity: Charity  
Measurement unit: thousands of UAH

Date (year, month, day) 12/31/2009  
EDRPOU 26333816  
KOATUU 8038200000  
SPODU 07994  
ZKGNG 98600  
KVED 85.32.5  
Check total

## Consolidated Income Statement for the year 2009

Form No.2

DKUD 1801003

### I. Financial results

Item	Line code	Reporting period	Prior period
1	2	3	4
Revenues	010	1,044	98
Value added tax	015	(20)	-
Excise duty	020	-	-
	025	-	-
Other charges	030	-	-
Net revenues	035	1,024	98
Cost of revenues	040	-	-
Gross :			
profit	050	-	-
loss	055	-	-
Other operating income	060	318,614	281,396
Income from recognition of biological assets	061	-	-
Administrative expenses	070	(39,170)	(28,826)
Sales expenses	080	-	-
Other operating expenses	090	(278,574)	(240,039)
Losses from recognition of biological assets	091	-	-
Financial result of operations :			
profit	100	1,894	12,629
loss	105	-	-
Equity earnings	110	-	-
Other financial income	120	15	57
Other income	130	-	87
Financial expenses	140	-	-
Equity losses	150	-	-
Other expenses	160	-	(16)
Financial result of operations before tax:			
profit	170	1,909	12,757
loss	175	-	-
Financial results revaluation of fixed assets			
profit	176	-	-
loss	177	-	-
Income tax on operations	180	(6)	-
Income from Income tax on operations	185	-	-
Net financial result of operations:			
profit	190	1,903	12,757
loss	195	-	-
Extraordinary :			
income	200	-	-
expenses	205	-	-
Extraordinary income tax	210	-	-
Net :			
profit	220	1,903	12,757
loss	225	-	-
Providing of material encouragement	226	-	-

## II. Components of operating expenses

Item	Line code	Reporting period	Prior period
1	2	3	4
Material expenditures	230	8,205	9,609
Salaries and related charges	240	21,349	13,756
Social charges	250	4,805	3,538
Depreciation	260	808	619
Other operating expenses	270	282,577	241,343
<b>Total</b>	<b>280</b>	<b>317,744</b>	<b>268,865</b>

## III. Return on equity

Item	Line code	Reporting period	Prior period
1	2	3	4
Average annual amount of ordinary shares	300	-	-
Adjusted average annual amount of ordinary shares	310	-	-
Net earnings (loss) per ordinary share	320	-	-
Diluted earnings (loss) per ordinary share	330	-	-
Dividend per ordinary share	340	-	-

General Director

(Klepikov A.)

Chief accountant

(Zatulyviter L.)





Entity International HIV/AIDS Alliance in Ukraine  
Location: 03680, Kyiv, 5 Dymytrova str.  
State administration authority: Community property  
Legal form of activity  
Business activity: Charity  
Measurement unit: in thousands of Ukrainian hryvnia

Date (year, month, day)

Codes	
2009/12/31	
EDRPOU	26333816
KOATUU	8038200000
SPODU	7994
ZKGNG	98600
KVED	85.32.5
Check total	

## Cash flow statement

for the year 2009

Form No.3

DKUD 1801004

Item	Code	Reporting period		Prior period	
		Inflow	Outflow	Inflow	Outflow
1	2	3	4	5	6
<b>I. Cash flows from operating activities</b>					
Profit (loss) from operating activities before tax	010	1,909	-	12,758	-
Adjustments for:					
depreciation of non-current assets	020	808	X	619	X
increase (decrease) in provisions	030	40,131	-	1,367	-
loss (gain) from unutilized foreign exchange differences	040	-	-	-	-
other loss (income)	050	-	-15	16	-144
Interest expenses	060	-	X	-	X
Operating income (loss) before change in net current assets	070	42,832	-	14,614	-
Decrease (increase) in:					
current assets	080	-	-12,376	10,500	-
deferred expenses	090	-	-24	-	-3
Increase (decrease) in:					
current liabilities	100	-	-2,121	-	-4,998
deferred income	110	939	-	307	-
<b>Cash flows from operating activities</b>	120	29,250	-	20,420	-
Paid:					
interest	130	X	-	X	-
income taxes	140	X	-6	X	-
<b>Net cash flows before extraordinary events</b>	150	29,244	-	20,420	-
Cash flows from extraordinary events	160	-	-	-	-
<b>Net cash flows from operating activities</b>	170	29,244	-	20,420	-
<b>II. Cash flows from investing activities</b>					
Disposals:					
financial investments	180	-	X	-	X
non-current assets	190	-	X	-	X
integrated property groups	200	-	-	-	-
Received:					
interest	210	15	X	-	X
dividends	220	-	X	-	X
Other proceeds	230	-	X	-	X
Acquisitions:					
financial investments	240	X	-	X	-
non-current assets	250	X	-1,886	X	-945
integrated property groups	260	X	-	X	-
Other payments	270	X	-	X	-
<b>Net cash flows before extraordinary events</b>	280	-	-1,871	-	-
Cash flows from extraordinary events	290	-	-	-	-
<b>Net cash flows from investment activities</b>	300	-	-1,871	-945	-
<b>III. Cash flows from financing activities</b>					
Proceeds from issuance of equity	310	-	X	-	X
Loans received	320	-	X	-	X
Other proceeds	330	-	X	-	X
Loans repayment	340	X	-	X	-283
Dividends paid	350	X	-	X	-
Other payments	360	X	-	X	-
<b>Net cash flows before extraordinary events</b>	370	-	-	-	-
Cash flows from extraordinary events	380	-	-	-	-
<b>Net cash flows from financing activities</b>	390	-	-	-	-
<b>Net cash flows for the reporting period</b>	400	27,374	-	19,192	-
Cash and cash equivalents at the beginning of the year	410	41,844	X	9,227	X
Effect of change in exchange rates on cash and cash equivalents	420	20	-	13,425	-
<b>Cash and cash equivalents at the year-end</b>	430	69,238	X	41,844	X

Executive Director

Chief accountant





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

Entity International HIV/AIDS Alliance in Ukraine  
Location: 03680, Kyiv, 5 Dymytrova str.  
State administration authority: Community property  
Legal form of activity  
Business activity: Charity  
Measurement unit: in thousands of Ukrainian hryvnia

Date (year, month, day) 12.31.2009  
EDRPOU 26333816  
KOATUU 8038200000  
SPODU 07994  
ZKGNG 98600  
KVED 85.32.5  
Check total

**Statement of changes in equity**  
for the year 2009  
Form No. 4

DKUD Code 1801005

Item	Code	Authorized capital	Share capital	Additional paid-in capital	Other additional capital	Reserves	Retained earnings	Outstanding capital	Withdrawals	Total
1	2	3	4	5	6	7	8	9	10	11
Balance at the beginning of the year	010	-	-	-	-	-	11 643	-	-	11 643
Adjustments:										
Change of accounting policy	020	-	-	-	-	-	-	-	-	-
Reversals	030	-	-	-	-	-	-	-	-	-
Other changes	040	-	-	-	-	-	-	-	-	-
Adjusted opening balance	050	-	-	-	-	-	11 643	-	-	11 643
Assets revaluation:										
Revaluation increase in property, plant and equipment	060	-	-	-	-	-	-	-	-	-
Revaluation decrease in property, plant and equipment	070	-	-	-	-	-	-	-	-	-
Revaluation increase in construction in progress	080	-	-	-	-	-	-	-	-	-
Revaluation decrease in construction in progress	090	-	-	-	-	-	-	-	-	-
Revaluation increase in intangible assets	100	-	-	-	-	-	-	-	-	-
Revaluation decrease in intangible assets	110	-	-	-	-	-	-	-	-	-
Deferred tax on revaluation increase in property, plant and equipment	120	-	-	-	-	-	-	-	-	-
Net profit (loss) for the reporting period	130	-	-	-	-	-	1 903	-	-	1 903
Retained earnings distributed:										
Payments to shareholders (dividends)	140	-	-	-	-	-	-	-	-	-
Reinvestment in authorized capital	150	-	-	-	-	-	-	-	-	-
Deductions to reserves	160	-	-	-	-	-	-	-	-	-
	170	-	-	-	-	-	-	-	-	-
Participants' contributions:										
Capital contributions	180	-	-	-	-	-	-	-	-	-
Capital repayment	190	-	-	-	-	-	-	-	-	-
	200	-	-	-	-	-	-	-	-	-
Capital withdrawals:										
Repurchase of treasury shares (participatory interest)	210	-	-	-	-	-	-	-	-	-
Resale of treasury shares	220	-	-	-	-	-	-	-	-	-
Annulment of treasury shares	230	-	-	-	-	-	-	-	-	-
Capital withdrawal	240	-	-	-	-	-	-	-	-	-
Impairment of shares below nominal value	250	-	-	-	-	-	-	-	-	-
Other changes in equity:										
Write-off of irrecoverable losses	260	-	-	-	-	-	-	-	-	-
Assets obtained for free	270	-	-	-	-	-	-	-	-	-
	280	-	-	-	-	-	-	-	-	-
Total changes in equity	290	-	-	-	-	-	1 903	-	-	1 903
Balance at the year-end	300	-	-	-	-	-	13 546	-	-	13 546

Executive Director (signature) (Klepikov A.)

Chief accountant (signature) (Zatulyviter L.)



Entity International HIV/AIDS Alliance in Ukraine  
Location: 03680, Kyiv, 5 Dymytrova str.  
State administration authority: Community property  
Legal form of activity  
Business activity: Charity  
Measurement unit: in thousands of Ukrainian hryvnia

Date (year, month, day) 12.31.2009  
EDRPOU 26333816  
KOATUU 8038200000  
SPODU 07994  
ZKGNG 98600  
KVED 85.32.5  
Check total

Statement of changes in equity  
for the year 2008

Form No. 4

DKUD Code 1801005

Item	Code	Authorized capital	Share capital	Additional paid-in capital	Other additional capital	Reserves	Retained earnings	Outstanding capital	Withdrawals	Total
1	2	3	4	5	6	7	8	9	10	11
Balance at the beginning of the year	010	-	-	-	-	-	(1 114)	-	-	(1 114)
Adjustments :										
Change of accounting policy	020	-	-	-	-	-	-	-	-	-
Reversals	030	-	-	-	-	-	-	-	-	-
Other changes	040	-	-	-	-	-	-	-	-	-
Adjusted opening balance	050	-	-	-	-	-	(1 114)	-	-	(1 114)
Assets revaluation :										
Revaluation increase in property, plant and equipment	060	-	-	-	-	-	-	-	-	-
Revaluation decrease in property, plant and equipment	070	-	-	-	-	-	-	-	-	-
Revaluation increase in construction in progress	080	-	-	-	-	-	-	-	-	-
Revaluation decrease in construction in progress	090	-	-	-	-	-	-	-	-	-
Revaluation increase in intangible assets	100	-	-	-	-	-	-	-	-	-
Revaluation decrease in intangible assets	110	-	-	-	-	-	-	-	-	-
Deferred tax on revaluation increase in property, plant and equipment	120	-	-	-	-	-	-	-	-	-
Net profit (loss) for the reporting period	130	-	-	-	-	-	12 757	-	-	12 757
Retained earnings distributed :										
Payments to shareholders (dividends)	140	-	-	-	-	-	-	-	-	-
Reinvestment in authorized capital	150	-	-	-	-	-	-	-	-	-
Deductions to reserves	160	-	-	-	-	-	-	-	-	-
	170	-	-	-	-	-	-	-	-	-
Participants' contributions :										
Capital contributions	180	-	-	-	-	-	-	-	-	-
Capital repayment	190	-	-	-	-	-	-	-	-	-
	200	-	-	-	-	-	-	-	-	-
Capital withdrawals :										
Repurchase of treasury shares (participatory interest)	210	-	-	-	-	-	-	-	-	-
Resale of treasury shares	220	-	-	-	-	-	-	-	-	-
Annulment of treasury shares	230	-	-	-	-	-	-	-	-	-
Capital withdrawal	240	-	-	-	-	-	-	-	-	-
Impairment of shares below nominal value	250	-	-	-	-	-	-	-	-	-
Other changes in equity:										
Write-off of irrecoverable losses	260	-	-	-	-	-	-	-	-	-
Assets obtained for free	270	-	-	-	-	-	-	-	-	-
	280	-	-	-	-	-	-	-	-	-
Total changes in equity	290	-	-	-	-	-	12 757	-	-	12 757
Balance at the year-end	300	-	-	-	-	-	11 643	-	-	11 643

Executive Director

Chief accountant

(signature)

(Klepikov A.)

(signature)

(Zatulyviter L.)





APPROVED  
By Order No. 302 of the Ministry of Finance of Ukraine  
Dated November 23, 2000  
(in wording of Order No. 602 dated October 28, 2003)

2009	12	31
EDRPOU	26333816	
KOATUU	8038200000	
SPODU	07994	
ZKGNG	98600	
KVED	85.32.5	
Check total		

Date (year, month, day)

Entity International HIV/AIDS Alliance in Ukraine  
Location: 03680, Kyiv, 5 Dymytrova str.  
State administration authority: Community Property  
Legal form of activity  
Business activity: Charity  
Measurement unit: in thousands of Ukrainian hryvnia

## Notes to the consolidated financial statements

2009

Form No. 5

I. Intangible assets

DKUD Code 1801008

Groups of intangible assets	Line code	Balance at the beginning of the year		Revaluation (increase +, decrease -)		Disposals for the year		Amortization charge for the year	Impairment losses for the year	Other changes for the year		Balance at the year-end	
		historical (restated) cost	accumulated amortization	historical (restated) cost	accumulated amortization	historical (restated) cost	accumulated amortization			historical (restated) cost	accumulated amortization	historical (restated) cost	accumulated amortization
1	2	3	4	5	6	7	8	9	10	11	12	13	14
Rights for use of natural resources	010	-	-	-	-	-	-	-	-	-	-	-	-
Rights for use of property	020	-	-	-	-	-	-	-	-	-	-	-	-
Rights for goods and services brands	030	-	-	-	-	-	-	-	-	-	-	-	-
Rights for industrial property	040	-	-	-	-	-	-	-	-	-	-	-	-
Copyright and other related rights	050	-	-	-	-	-	-	-	-	-	-	-	-
Other intangible assets	060	-	-	-	-	-	-	-	-	-	-	-	-
	070	320	160	358	-	-	-	-	111	-	-	-	678
Total	080	320	160	358	-	-	-	-	111	-	-	-	678
Goodwill	90	-	-	-	-	-	-	-	-	-	-	-	-

From line 080, column 14

Value of intangible assets subject to ownership right restriction

Value of collateralized intangible assets

Value of intangible assets constructed by the company

Value of intangible assets acquired from special financing

Accumulated amortization of intangible assets subject to ownership right restriction

(081)  
(082)  
(083)  
(084)  
(085)



## II. Property, plant and equipment

Groups of property, plant and equipment		II. Property, plant and equipment																
		Line code	Balance at the beginning of the year		Additions for the year	Revaluation (increase +, decrease -)		Disposals for the year			Impairment losses	Other changes for the year		Balance at the year-end		Including		
			historical (restated) cost	depreciation		historical (restated) cost	depreciation	historical (restated) cost	depreciation	historical (restated) cost		depreciation	historical (restated) cost	depreciation	historical (restated) cost	depreciation	historical (restated) cost	depreciation
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19
Land	100	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Capital expenditures for site restoration	110	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Buildings, constructions and transmission facilities	120	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Machines and equipment	130	1 845	979	1 116	-	-	-	618	-	-	-	-	2 961	-	-	-	-	-
Vehicles	140	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Fixtures and fittings	150	9	-	-	-	-	-	3	-	-	-	-	9	3	-	-	-	-
Livestock	160	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Perennial plants	170	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Other property, plant and equipment	180	29	2	185	-	-	-	78	-	-	-	-	214	80	-	-	-	-
Libraries	190	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Low-value items	200	87	87	78	-	-	-	-	-	-	-	-	165	88	-	-	-	-
Temporary constructions	210	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Natural resources	220	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Packaging	230	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Leased items	240	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Other non-current tangible assets	250	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Total	260	1 970	1 068	1 379	-	-	-	699	-	-	-	-	3 349	1 767	-	-	-	-

From line 260, column 14

Value of property, plant and equipment subject to ownership right restriction as required by law

Pledged assets

Net book value of assets temporarily out of operation (close-down, reconstruction, etc.)

Historical (restated) cost of fully depreciated assets

Property, plant and equipment that were leased with entire property complexes

Net book value of assets withdrawn for sale

Residual value of property, plant and equipment lost as result of extraordinary events

Assets purchased from special funds

Property, plant and equipment received in operating lease

Depreciation of property, plant and equipment subject to ownership right restriction

Value of investment property, valued for the fair value

(281)  
(282)  
(283)  
(284)  
(284.1)  
(285)  
(285.1)  
(286)  
(287)  
(288)  
(289)

From line 260, column 8

From line 260, column 5

From line 260, column 15

From line 105, column 14

III. Capital Investments				
Item	Line code	For the year	Balance at the year-end	
1	2	3	4	5
Capital construction	280	-	-	-
Acquisition (construction) of property, plant and equipment	290	1 301	-	139
Acquisition (construction) of other non-current assets	300	78	-	-
Acquisition (construction) of intangible assets	310	358	-	-
Main herd	320	-	-	-
Other	330	-	-	-
Total	340	1 737	-	139

From line 340, column 3

Capital investments in investment property  
Finance expenses included into capital investments

(341)  
(342)

IV. Financial Investments				
Item	Line code	Balance at the beginning of the year	Balance at the year-end	
1	2	3	4	5
A. Financial investments accounted for by equity method:				
associated companies	350	-	-	-
subsidiaries	360	-	-	-
joint interest	370	-	-	-
B. Other financial investments:				
equity	380	-	-	-
shares	390	-	-	-
bonds	400	-	-	-
other	410	-	-	-
Total (A + B)	420	-	-	-

Stated in balance sheet line 045, column 4

Other long-term financial investments  
at cost

at fair value

at amortized cost

Current financial investments

at cost

at fair value

at amortized cost

(421)  
(422)  
(423)  
(424)  
(425)  
(426)

Stated in balance sheet line 220, column 4



V. Income and expenses

Item	Line Code	Revenue	Expense
1	2	3	4
<b>A. Other operating income and expenses:</b>			
Assets under operating lease	440	-	-
Operational foreign exchange differences	450	20 909	17 967
Sale of other current assets	460	-	-
Fines, penalties and forfeits	470	-	-
Maintenance of residential and social assets	480	-	-
Other operating income and expenses, including:	490	297 705	289 757
Doubtful debt provision	491	X	-
Non-productive expenses and losses	492	X	-
Pension fund's contribution on foreign currency purchases	493	-	-
Write-off of inventories	494	-	-
Income from services sold	495	-	-
<b>B. Earnings and expenses on equity investments:</b>			
Associates	500	-	-
Subsidiaries	510	-	-
Joint interest	520	-	-
<b>C. Other financing income and costs:</b>			
Dividends	530	-	X
Interests	540	X	-
Assets under financial lease	550	-	-
Other	560	-	-
<b>D. Other income and expenses:</b>			
Sale of financial investments	570	-	-
Sale of non-current assets	580	-	-
Sale of property groups	590	-	-
Non-operational foreign exchange differences	600	-	-
Assets received for free	610	-	X
Write-off of non-current assets	620	X	-
Other	630	-	-

Non-monetary (barter) transactions

Share of related party transactions in total income from non-monetary (barter) transactions

Finance expenses included into cost of sales

(631)  
(632)  
(633)

From lines 540-580, column 4

VI. Cash and cash equivalents

Item	Line code	Balance at the year-end
1	2	3
Cash	640	-
Current bank account	650	1 059
Other bank accounts (letters of credit, check books)	660	88 179
Cash in transit	670	-
Cash equivalents	680	-
<b>Total</b>	690	69 238

VII. Provisions

Type of provision	Line code	Balance at the beginning of the year	Increase in provisions during the year due to new provisions charged (created)	Provision used during the year	Reversal of provisions unused during the year	Recoverable amount of counterpart's expenses considered for provision	Balance at the year-end
1	2	3	4	5	6	7	8
Provision for unused vacations	710	-	-	967	-	-	967
Provision for deferred expenses on additional pension benefits	720	-	-	-	-	-	-
Provision for deferred warranty expenses	730	-	-	-	-	-	-
Provision for deferred restructuring expenses	740	-	-	-	-	-	-
Provision for deferred expenses related to obligations under	750	-	-	-	-	-	-
	760	-	-	-	-	-	-
	770	-	-	-	-	-	-
Provision for doubtful debts	775	-	-	-	-	-	-
<b>Total</b>	780	-	-	967	-	-	967



VIII. Inventories

Item	Line code	Book value at year-end	Year-end revaluation increase in net realisable value* 4	Year-end revaluation value decrease 5
1	2	3	4	5
Raw materials	800	-		
Purchased semi-finished goods and accessories	810	-		
Fuel	820	-		
Packaging materials	830	-		
Construction materials	840	-		
Spare parts	850	-		
Agricultural materials	860	-		
Livestock	870	-		
Low-value short-term items	880	4 219		
Work in progress	890	-		
Finished goods	900	-		
Merchandise	910	-		
Total	920	4 219		

From line 920, column 3

Book value of inventories:  
stated at net realisable value  
transferred for processing  
pledged  
transferred for sale on a commission basis  
inventories for sale

(921)  
(922)  
(923)  
(924)  
(925)  
(926)

Assets in custody - account 02

IX. Accounts receivable

Item	Line code	Total balance at the year-end	Up to 12 months 4	12 to 18 months 5	18 to 36 months 6
1	2	3	4	5	6
Trade accounts receivable	940	99	99	-	-
Other current receivables	950	24 177	24 177	-	-

Bad debt written off in the current year

From line 940 and line 950, column 3 debt with related parties

(951)  
(952)

X. Shortages and losses from spoilage

Item	Line code	Amount
Shortages and losses identified (written off) during the year	2	3
Recognized debt of responsible persons	960	-
Shortages and losses pending identification of responsible persons at the year-end (off-balance sheet account 072)	970	-
	980	-

XI. Construction contracts

Item	Line code	Amount
Income from construction for the year	2	3
Debt at the year-end:	1110	-
due from customers, gross	1120	-
due to customers, gross	1130	-
from advances received	1140	-
Amounts overdue at the year-end	1150	-
Subcontractors' share of construction in progress	1160	-

XII. Income tax

Item	Line code	Amount
Current tax	2	3
Deferred tax assets:	1210	-
at the beginning of the year	1220	-
at the year-end	1225	-
Deferred tax liabilities:	1230	-
at the beginning of the year	1235	-
at the year-end	1240	-
Recognized in income statement - total	1241	6
including:		
current income tax decrease (increase) in deferred tax assets	1242	-
increase (decrease) in deferred tax liabilities	1243	-
Recognized in equity - total	1250	-
including:		
current income tax decrease (increase) in deferred tax assets	1251	-
increase (decrease) in deferred tax liabilities	1252	-
	1253	-

XIII. Allocation of depreciation and amortization charges

Item	Line code	Amount
Charged for the year	2	3
Allocated for the year - total	1300	810
including:	1310	-
construction objects for purchase (construction) and improvement of property, plant and equipment	1311	-
including machines and equipment	1312	-
Purchase (construction) of intangible assets	1313	-
repayment of loans obtained for capital investment purposes	1314	-
	1315	-
	1316	-
	1317	-



Executive Director

(Klepkov A.)

(signature)

Chief accountant

(Zatylyutier L.)

**Notes to the consolidated financial statements of International Charitable Foundation “International HIV/AIDS Alliance in Ukraine” as at and for the year ended 31 December 2009, prepared in accordance with National Accounting Standards of Ukraine**

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

## **1. Background**

### *Establishment of the Organization and principal lines of activity:*

International Charitable Foundation “International HIV/AIDS Alliance in Ukraine” (hereinafter – Alliance Ukraine) was established on 11 March 2003 by not for profit organization International HIV/AIDS Alliance, UK. The consolidated financial statements comprise the Organization and its wholly owned subsidiary LLC “Alliance-Ukraine Consultancy”, registered in Kyiv, Ukraine (together referred to as the Organization).

The organization’s principal activities are as follows:

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

The number of employees as at 31 December 2009 was 106 (31 December 2008: 102).

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

Reporting date	US dollar	Euro
31 December 2007	5.0500	7.4195
31 December 2008	7.7000	10.8555
31 December 2009	7.9850	11.4489

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

2007	16.6%
2008	22.3%
2009	12.3%

The Group did not adjust the financial statements for the effect of inflation applying inflation indices, as the cumulative inflation rate during the years 2007-2009 did not exceed the 90% threshold.

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

2007	8.4%
2008	11.3%
2009	11.3%



## 2. Basis of preparation

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

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

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

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

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

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

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

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

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

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

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

## 3. Significant accounting policies

Organization accounting policies are based on national accounting standards (NAS) and its accounting policies shall be applied so that the financial statements fully comply with all requirements of the Law "On accounting and financial reporting in Ukraine" and each individual NAS.

The accounting policies provide the following guidance:

- a) Business transactions are accounted for based on primary documents supporting these transactions;
- b) All operations of the Company are measured and reported in Ukrainian hryvnia ("UAH"), which is Ukraine's national currency;
- c) Information on the Company's expenses is accumulated on Class 9 accounts. Class 7 and Class 9 accounts shall be closed monthly. Class 8 accounts shall not be used;



- d) In accordance with NAS 1 *"General Requirements to Financial Statements"*, the financial result of the reporting period shall be determined on an accrual and matching basis, i.e. through matching between the earning of income in the reporting period and cost incurred, with the income and expenses recognised when they occur regardless when the cash is paid;
- e) Fixed assets recognition, measurement, revaluation and disposal, as well as presentation of financial results of these transactions should comply with NAS 7 *"Fixed Assets"*. Recognised as fixed assets shall be tangible assets with the value over UAH 1000 held for use in the activities or supply of goods or services, for rental to others, or for administrative purposes, with the useful life or operating cycle over one year. Depreciation shall be charged on a straight-line basis using uniform amortization rates;
- f) Assets with the value below UAH 1000 are recognised as low value items. The low value items shall be recorded on account 112 and depreciated at 100% rate during the first month of their use;
- g) Acquired/received or internally manufactured inventories shall be recognised in the balance sheet at historical cost in accordance with NAS 9 *"Inventories"*. Inventories are measured on a FIFO and identified value basis;
- h) All other transactions giving rise to the expenses shall be recognised and disclosed in the financial statements following the requirements of NAS 16 *"Expenses"*;
- i) Accounts receivable are recognised as an asset when an inflow of economic benefits in the future is probable and the receivables' amount can be measured reliably. Provision for doubtful debts shall be determined by grouping accounts receivable based on their age and assigning a respective delinquency rate to each group. Other transactions giving rise to accounts receivable shall be recognised in accordance with NAS 10 *"Accounts Receivable"*;
- j) A liability is recognised when it can be measured reliably, and the settlement of the liability is likely to result in an outflow of economic benefits in the future. If a recognised liability represents an obligation that does not require an outflow of economic benefits and will not have to be settled, such liability is recognized as income of the reporting period. Any other transactions giving rise to liabilities are recognised in accordance with NAS 11 *"Liabilities"*;
- k) Leases are accounted for and presented in the financial statements in accordance with NAS 14 *"Lease"*;
- l) Income is recognised in the income statement on accrual and matching bases in the corresponding periods. Accounting treatment and measurement of income shall be based on requirements of NAS 15 *"Income"*;
- m) Foreign currency transactions are accounted for and presented in the financial statements in accordance with NAS 21 *"The Effects of Changes in Foreign Exchange Rates"*;
- n) Related party transactions are recorded in the Company's books and disclosed in its financial statements in accordance with NAS 23 *"Related Party Disclosures"*;
- o) Subsidiaries are those enterprises controlled by Alliance Ukraine. Intraorganization balances and transactions, and any unrealised gains arising from intraorganization transactions, are eliminated in preparing the consolidated financial statements. Consolidation is accounted for and presented in the consolidated financial statements in accordance with NAS 20 *"Consolidated financial statements"*.

## 4. Disclosures under Ukrainian National Accounting Standards

### 4.1. Fixed assets

As at 31 December 2009, fixed assets are accounted for and recognised in Organization's consolidated financial statements at historical cost less accumulated depreciation and impairment loss.

### 4.2. Intangible assets

As at 31 December 2009, intangible assets are accounted for and recognised in the Organization's financial statements at historical cost less accumulated amortization and impairment loss.

### 4.3. Inventories

Inventories are measured on a FIFO and identified value basis.

### 4.5. Other accounts receivable

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

<i>(in thousands of UAH)</i>	<b>2008</b>	<b>2009</b>
CJSC "Pharmtsia-2000"	683	3,175
Rusan Pharma Ltd.	-	3,069
LLC "Medcom Marketing and Sales Ukraine"	-	1,240
ICF "AIDS Fund East-West"	-	964
Ukrainian Institute of Policy Research of Social Health	334	931
LLC "Pharmasco"	-	925
Public organization "Soyuz Amicus"	118	630
SJSC "Liky Ukraine"	-	602
MGO "Social initiative of labor and health safety"	-	476
Odesa charitable fund of rehabilitation and social adaptation of homeless "Way home"	179	291
Kherson regional charitable fund "Mangust"	143	263
Public organization "Club Eney"	194	262
Sevastopol city organization "Youth Center of Female initiatives"	198	261
Other	11,444	11,353
Provision for doubtful debt	-	(265)
	<b>13,295</b>	<b>24,177</b>



## **5. Correction of errors in the financial statements**

The Group reflected in the consolidated financial statements as at and for the year ended 31 December 2009 a correction of prior period's errors for the amount of UAH 17,690 thousand. This correction primarily relates to timing differences over recognition of income and expenses in prior periods. As a result other operating income and expenses increased by UAH 17,690 thousand, target financing and other current receivables were decreased for the amount of UAH 17,690 thousand as at 31 December 2008. The abovementioned correction did not have any effect on net financial result for the year ended 31 December 2008 and retained earnings as at that date.

## **6. Changes of the Company's accounting policy and accounting estimates**

During 2009 the Group did not change its policies and accounting estimates.

## **7. Extraordinary income and expenses**

The Organization did not generate extraordinary income or incur extraordinary expenses during the year ended 31 December 2009.

## **8. Commitments**

The Organization does not have any commitment as at 31 December 2009.

31 May 2010

  
Klepikov A.

Executive Director

Zatulyviter L.

  
Chief Accountant

## Annex 8. Alliance-Ukraine Publications in 2009

The Policy and Knowledge Sharing Team of the “International HIV/AIDS Alliance in Ukraine” develops, publishes and coordinates development and publication of Alliance information materials in Ukraine. All publications are distributed among target audiences and are available electronically on the Alliance website in the “Infocentre” section.



### People and HIV

In 2009 the 5th edition of "People and HIV" was released. This is the first publication in the former Soviet Union that comprehensively covers various aspects of the HIV pandemic. This book is designed for people of various ages and professions who want to learn more about HIV and AIDS; it is especially useful to people living with HIV, their friends and relatives, representatives of governmental and non-governmental HIV-service organizations, medical and social workers and teachers.



### Reference book of organizations working in HIV/AIDS

The 5th edition of the book titled "Organizations working in HIV/AIDS in Ukraine" presents background and contact information of authorities, parliamentary committees of Ukraine, the State Social Service for Family, Children and Youth, healthcare facilities, research organizations, national organizations, regional NGOs and international organizations.



### Reference book for positive people

This book is designed for people living with HIV, especially for those who recently learned about their positive status. ICF “International HIV/AIDS Alliance in Ukraine” together with the organization "Doctors without Borders" developed and republished a series of brochures for positive people which are familiar to almost every person living with HIV. This publication not only combines all information contained in small booklets, but also attempts to compensate for the lack of information on other important issues of health, prevention and treatment.

Although this book is not meant to be a universal manual and, of course, will not replace regular consultation with a physician on matters concerning health and nature of treatment, yet it provides basic knowledge to help HIV-positive people develop a more conscientious approach to their health and everyday life.

### **Social work with people who have homosexual relationships. Theory. Methods. Best practices.**

This manual is intended for leaders and activists of the LGBT community, professionals and social workers, for all those who work with LGBT organizations and groups. The book consists of several sections that provide information on the specific needs and services for LGBT, gives practical advice on homophobia fighting methods; provides information on advocacy and lobbying, mobilization of LGBT community and the role of LGBT movement in social and political life in Ukraine. The book also contains additional examples of press releases, invitations, a training catalogue, a list of recommended books and Internet resources, and so on.



### **Healthy budget: financial management practices for Ukrainian HIV-service organizations**

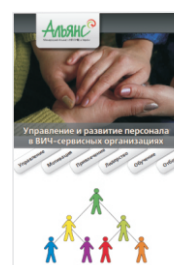
The publication is designed for financial managers and leaders of local HIV-service organizations and contains experience of local organizations in the field of local budgets and a basic guide to mobilizing local community resources for further sustainable organizational development. Special attention is paid to specific features of local fundraising for organizations working with communities vulnerable to HIV, and only those methods are described which are appropriate for non-governmental organizations working in HIV prevention. The manual also contains many examples of different documents - notices, agreements, letters to potential sponsors, announcements, etc., and some practical aspects of positive experience of local organizations, for example in the field of creating social enterprises.



### **Management and development of personnel in HIV-service organizations**

According to a needs assessment carried out by the "International HIV/AIDS Alliance in Ukraine", most Ukrainian HIV-service organizations noted a lack of qualified staff, lack of clear division of functional responsibilities, opportunities for professional development and high level of professional burnout.

This book includes a series of training materials on the subject, sums up the experience of Ukrainian HIV-service organizations with staff and volunteers, provides practical advice on key aspects of management, such as team building, human resource management, personnel motivation, delegation of responsibilities, leadership, conflict management and work with volunteers.



### **Community harm reduction centers for most-at-risk and vulnerable populations: experience, practice and prospects**

The manual summarizes the international experience of community centers for IDUs, CSWs and MSM in different countries as well as best Ukrainian practices in such centers. The main problems these centers are facing are analyzed, and several options to address them are provided, in particular for achieving sustained funding.







## Guide to Living Library implementation: methodology to overcome stigma and discrimination of most-at-risk and vulnerable populations and people living with HIV

The "International HIV/AIDS Alliance in Ukraine" together with its partners at the national and regional level stipulates implementing and adapting "living library" methodology in overcoming stigma and discrimination of most-at-risk and vulnerable populations and people living with HIV in the context of understanding diversity and developing tolerance toward representatives of such populations.

The described methodology allows to objectively tell people about the life of vulnerable populations and involving their representatives into the project directly. Therefore it is an effective means of response to stigma and discrimination of most-at-risk and vulnerable populations. The purpose of the proposed manual is teaching future organizers of the "living library" to implement the methodology at a high-quality level and understanding it in a broader context of diversity.



## HIV/AIDS Treatment in Ukraine – Responsibility of the State

This report is intended to inform interested organizations and individuals of the development, main results and problems of ART and PMTCT programmes in Ukraine and to provide recommendations to governmental authorities responsible for further implementation of PMTCT and ART programmes in Ukraine from 2009. The report expresses the position of and recommendations of Alliance-Ukraine and the Network of PLWH concerning transfer of treatment programmes to and their continuation by the Ministry of Health of Ukraine funded from the state budget and is not meant to present an overall assessment and detailed description of treatment programmes in Ukraine.



## "Peer Driven Interventions" model: history, experience and prospects

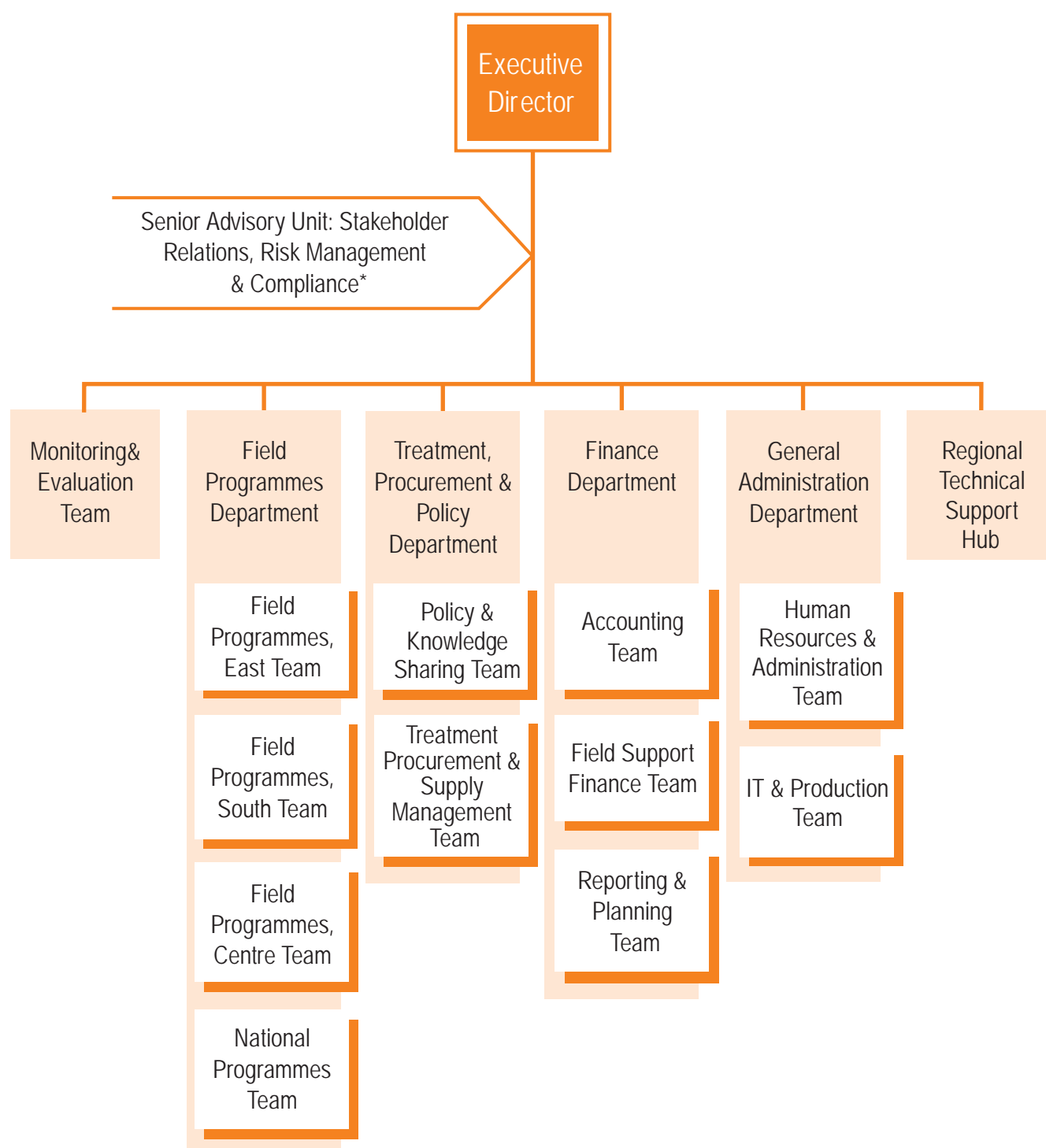
The brochure provides a brief overview of the basic principles of the "Peer Driven Interventions" model as one of the most effective forms of HIV prevention; it also presents the history of methodology development and its implementation in Ukraine, and its basic principles – main objectives, project cycle, peculiarities of individual approach to customers and expected results. In addition, a short review of the results of implementing this technique in Ukraine is provided.



## Outreach among commercial sex workers

This multimedia manual consists of training modules, designed to help NGOs working in HIV/AIDS and STI prevention among commercial sex workers. In addition to a detailed description of a three-day training, the publication is supplemented with practical materials - presentations, videos, a library of useful literature for the coach enabling more efficient preparation for the training.

## Annex 9. Organizational Structure of Alliance-Ukraine



\*Head of Unit reports to the Supervisory Committee of Alliance Ukraine

## Annex 10. Composition of the Governing Board, Supervisory Committee, General Meeting, Staff and Permanent Consultants as of 15 January 2010

### Members of Statutory Bodies

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#### Governing Board

---

Yuriy Kobyshcha	Board Chairman
Svitlana Antonyak	
Iryna Borushek	
Roman Kobets	
Anya Sarang	
Julie Saunders	
Anya Teltschik	

#### Supervisory Committee

---

Jon Cooper	Committee Chairman
Bruno Le Ciclé	
Irena Gryga	
Vadim Menzhulin	
Natalia Sannikova	

#### General Meeting

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Slava Kushakov
Svitlana Antonyak
Yuriy Kobyshcha
Anya Sarang
Julie Saunders

### Staff and consultants of ICF "International HIV/AIDS Alliance in Ukraine"

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#### Directorate

---

Andriy Klepikov	Executive Director
Pavlo Smyrnov	Deputy Executive Director/Director: Field Programmes
Natalia Galagan	Acting Director: Operations
Vlasta Brodska	Director of Regional Technical Support Hub
Zahedul Islam	Director: Treatment, Procurement & Policy
Oleg Kukhar	Finance Director



## Senior Advisory Unit: Stakeholder Relations, Risk Management & Compliance

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

## Personal Assistants

Iryna Golubeva	Personal Assistant to Executive Director
Anastasia Babenko	Personal Assistant to Deputy Executive Director/Director: Field Programmes
Anna Eremina	Personal Assistant to Treatment, Procurement & Policy Director
Kateryna Prontenko	Personal Assistant to Finance Director

## Field Programmes Department

### *Field Programmes, East Team*

Victor Isakov	Head of Team
Liudmyla Shulga	Technical Support Manager
Yuriy Gayduk	Senior Programme Officer
Oleksandra Oksenyuk	Programme Officer
Yuliya Gamankova	Programme Assistant

### *Field Programmes, South Team*

Volodymyr Chura	Head of Team
Natalya Dvinskykh	Technical Support Manager
Olena Goncharenko	Senior Programme Officer
Nadiya Yanhol	Programme Officer

### *Field Programmes, Centre Team*

Tetyana Deshko	Head of Team
Myroslava Debelyuk	Technical Support Manager
Galyna Naduta	Programme Manager: Regional Policy and Coordination
Olga Korolenko	Senior Programme Officer
Olga Burgay	Programme Officer
Iryna Nerubayeva	Programme Officer
Daria Ivanenko	Programme Assistant

### *National Programmes Team*

Lyudmyla Shurpach	Head of Team
Maryna Braga	Programme Manager: Prevention
Natalya Nagorna	Programme Manager: Community Based Information
Olexandra Datsenko	Senior Programme Officer
Anastasia Mazurenko	Programme Officer: Prevention
Darina Marchenko-Bernhardt	Programme Officer
Galyna Nazarchuk	Programme Assistant

## Treatment, Procurement & Policy Department

---

Olena Purick	Programme Advisor: Street Children and Behaviour Change Communication
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### *Policy and Knowledge Sharing Team*

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Ganna Dovbakh	Head of Team; Senior Technical Support Manager
Maryna Varban	Programme Manager: Technical Support Resources Development
Pavlo Skala	Project Manager: Policy and Advocacy
Myroslava Andrushchenko	Senior Programme Officer: Documentation and Sharing
Lyudmyla Maistat	Programme Officer: Policy, Advocacy and Technical Support
Oksana Matiyash	Translator
Georgiy Peday	Editor/Proof-reader
Kateryna Izotova	Programme Assistant

### *Treatment, Procurement and Supply Management team*

---

Sergiy Filippovych	Head of Team
Tetyana Perepelitsya	Programme Manager: Treatment
Oksana Savenko	Senior Programme Officer: Treatment
Oleksandr Lebega	Senior Programme Officer: Treatment
Tetyana Mikityuk	Programme Officer: Substitution Treatment
Nataliia Moskovchenko	Programme Officer: Substitution Treatment
Danil Kalnik	Manager of Procurement and Supply Management Unit
Vladislav Volchkov	Senior Procurement Officer
Vitaliy Velikiy	Procurement Officer
Victoria Skrychevskaya	Procurement Officer
Olga Afanasieva	Treatment, Procurement and Supply Management Assistant
Anna Garusovskaya	Procurement and Supply Management Team Assistant

## Monitoring & Evaluation Team

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Olga Varetska	Head of Team
Maria Samko	Senior Programme Manager: Programmatic M&E and Donor Reporting
Tetyana Salyuk	Programme Manager: Research and Evaluation
Yulianna Girska	Programme Officer: Reporting and Planning
Inna Shvab	Programme Officer: Research and Field Analysis
Svitlana Kononkova	Programme Assistant

## General Administration Department

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Ihor Voytenko	Legal Advisor
---------------	---------------

### *Human Resources & Administration Team*

---

Victoria Obozna-Petrova	Senior HR Project Manager
Ganna Goncharenko	Senior Human Resources Officer
Olga Svyrydovska	Human Resources Officer
Maryna Maslennikova	Administration Manager
Natalya Zyma	Administration Officer
Ivanna Yaremenko	Travel Support Officer
Tetyana Vorobyova	Human Resources & Administration Assistant
Olga Akaieva	Secretary
Valentyna Gavrylchuk	Assistant to Administration Manager
Galyna Kutsaenko	Assistant to Administration Manager
Valentyna Glazko	Courier
Antonina Tkacheva	Cleaner
Svitlana Shevchenko	Housekeeper
Valeriy Sheremet	Security Guard
Mykhailo Yakovlev	Household Manager

### *Information Technologies and Production Team*

---

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

## Finance Department

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### *Accounting Team*

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



#### *Field Support, Finance team*

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

#### *Reporting & Planning team*

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Ilona Sidorenko	Head of Team
Ganna Katasonova	Senior Budget Officer
Yuriy Zozulynskiy	Officer: Reporting & Planning

#### **Regional Technical Support Centre**

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Vlada Rabinova	Operations Officer
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#### **Regional Coordinators**

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

#### **Support Team (Non-Staff)**

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Vasyl Setter	Driver
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