

Final Report of the Program



Всеукраїнська
Мережа
ЛЖВ



All-Ukrainian
Network of
PLWH

“Support for HIV and AIDS Prevention, Treatment and Care for Most Vulnerable Populations in Ukraine”

(August 2007 – July 2012)

Funded by The Global Fund
to Fight AIDS, Tuberculosis
and Malaria under
Round 6 grant





"Ukrainian success in fighting HIV and TB is significant both on the regional and on the global scale"

*Michel Kazatchkine,
Global Fund Director during the implementation of Round 6 program*



"The Ukrainian advocacy and service provision experience in harm reduction, specifically syringe exchange, substitution treatment could be used by other countries"

*concluded Lord Fowler,
Chair of the House of Lords Select Committee on HIV*



"I am very impressed by the impact achieved by harm reduction programmes in Ukraine. This is clear evidence that a combination of leadership, good policies and resources, can halt even the most severe HIV epidemic"

*Michel Sidibé,
UNAIDS Executive Director*



"Within the framework of Round 6 program in Ukraine we could observe incredible achievements in HIV prevention services expansion among the risk groups"

*Ani Shkarishvili,
UNAIDS Coordinator in Ukraine during Round 6 program implementation*



"Round 6 Program was instrumental for HIV response in Ukraine. The Principal Recipients – Alliance Ukraine and All-Ukrainian Network of People Living with HIV – have done a fabulous job together with the partners from the Government trying to contain the epidemic and bring innovative approach from the angles of prevention and treatment"

*Nicolas Canto,
Portfolio Manager for Eastern Europe and Central Asia*



"New cases of AIDS decreased for the first time in 2006, and deaths from AIDS have begun to stabilize, which indicates that antiretroviral treatment is working. There are also fewer HIV cases being recorded among drug users, particularly young drug users and those who have been injecting for a short time"

British Medical Journal 13 July 2010

Background Information

The Support for HIV/AIDS Prevention, Treatment and Care for the Most Vulnerable Populations in Ukraine Program was implemented in Ukraine in August 2007 – July 2012. Principal Recipients under the Program were the International HIV/AIDS Alliance in Ukraine and the All-Ukrainian Network of People Living with HIV (the Network).

The Program implementation agreement was signed on August 20, 2007. The program budget was USD 129.4 million.

Goal of the Program: to reduce HIV transmission and HIV/AIDS-related morbidity and mortality in Ukraine through interventions focused at most vulnerable populations. Building on achievements in the national response to AIDS, which have been supported by the Round 1 Global Fund grant, the State Budget of Ukraine and contributions from other sources, this Program aims to increase access to prevention, treatment, care and support for most-at-risk populations and those most affected by the epidemic (people who inject drugs, men who have sex with men, female sex workers, prisoners, street children aged 10-18 years, and persons living with HIV/AIDS).

Key Objectives of the Program:

1. To ensure adequate access to integrated prevention, treatment, care and support services for most vulnerable populations (key implementer – Alliance -Ukraine).
2. To scale up comprehensive care and treatment for PLWH and to ensure equitable access to services for people who inject drugs and other vulnerable populations (implementers – Alliance- Ukraine, Network).
3. To expand access to comprehensive adherence counseling, psychosocial support and care for PLWH (key implementer – Network).
4. To create a supportive environment for a sustainable and efficient response to HIV/AIDS in Ukraine (implementers – Alliance- Ukraine, Network).
5. To monitor and evaluate Program implementation and strengthen the National M&E system (implementers – Alliance- Ukraine, Network).

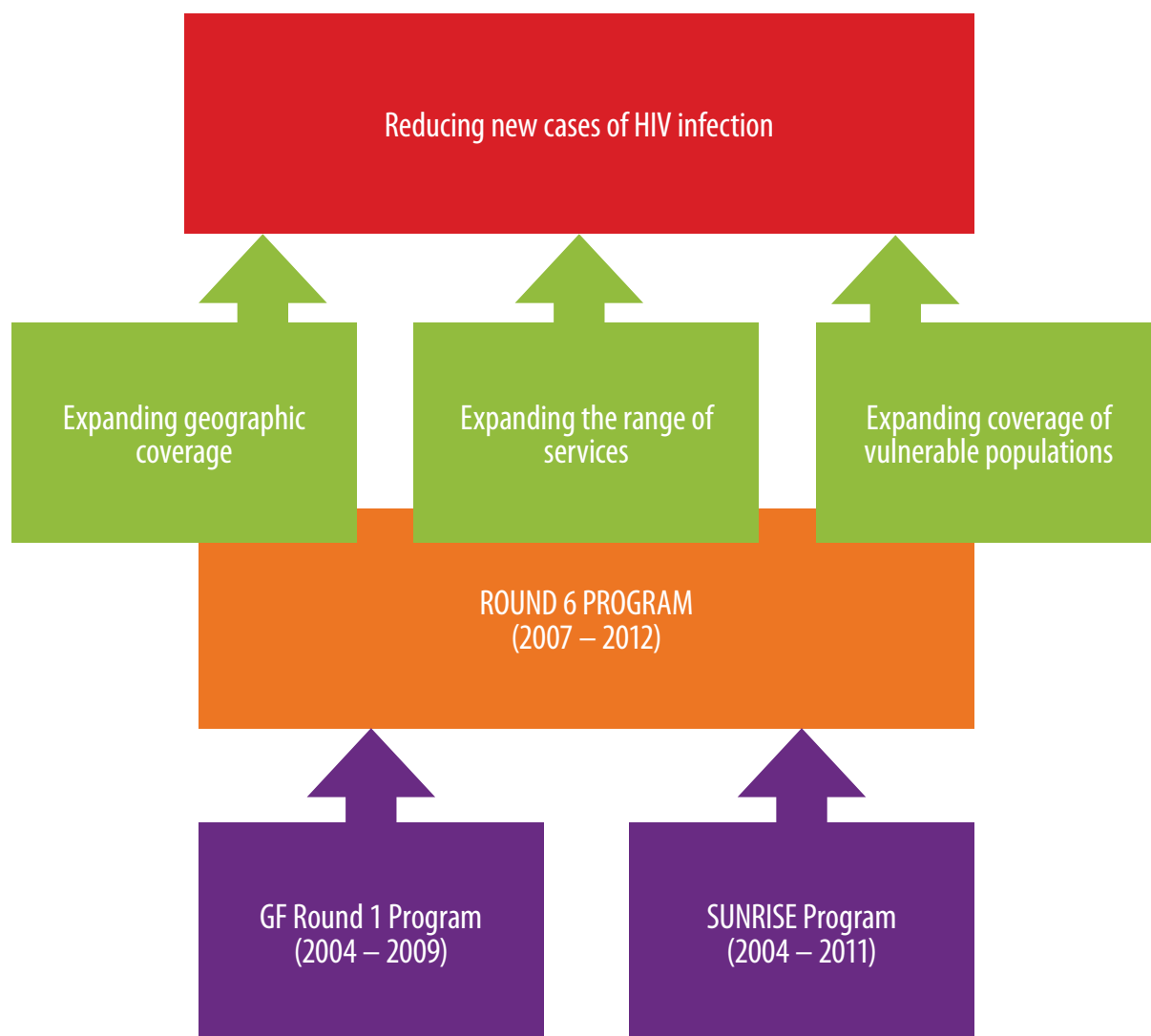
Program implementation Phases:

Phase I – 1 August 2007 – 31 July 2009.

Phase II – 1 August 2009 – 31 July 2012.

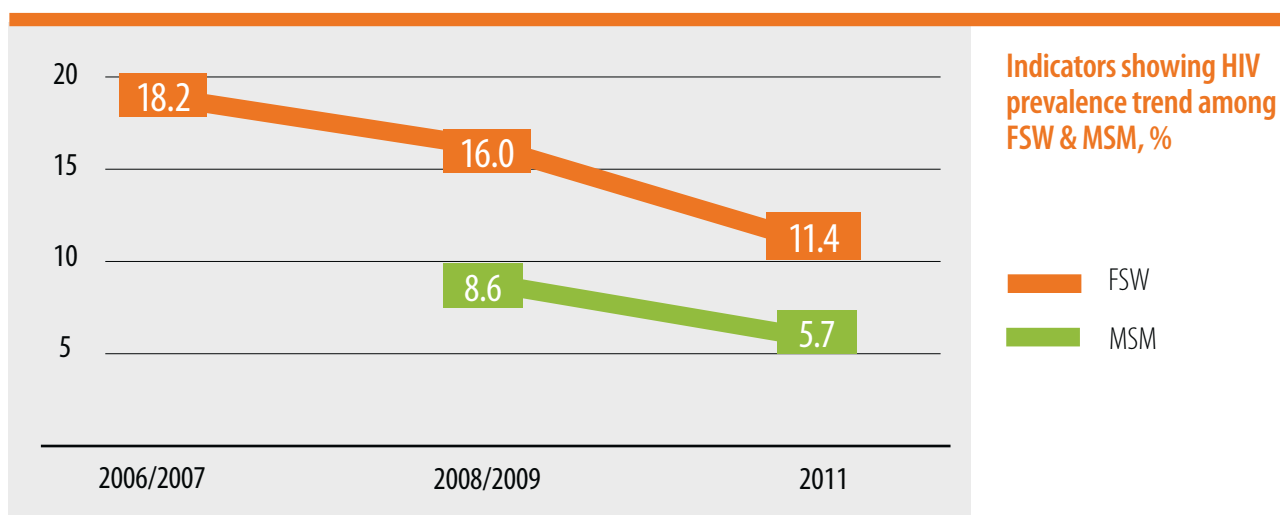
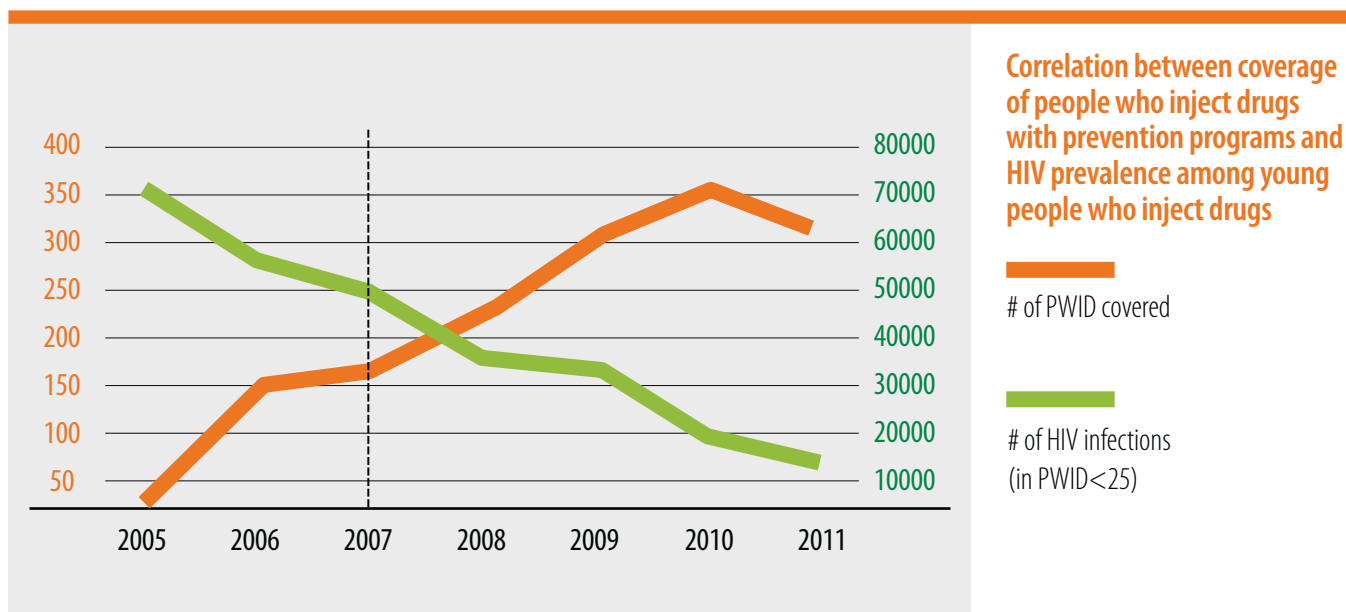


Program Implementation Results

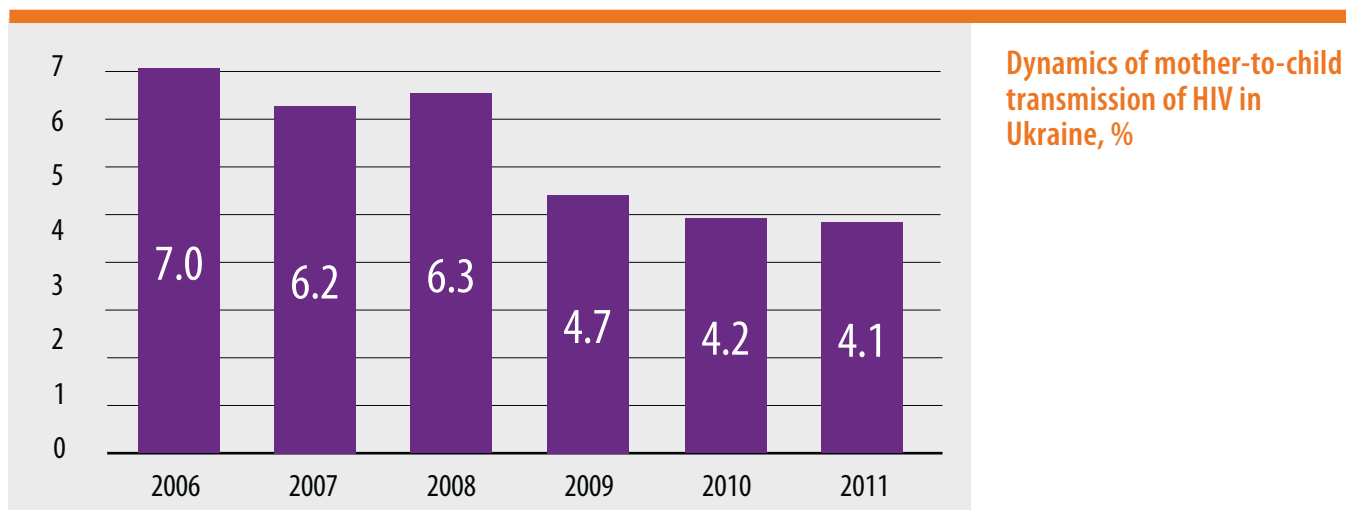


Impact on the Epidemic

Since 2010, the number of newly registered cases of HIV in Ukraine has been declining both among general population and in the most vulnerable groups. Thus, in the first six months of 2012 there has been a decline of 2.8% in the number of HIV-positive individuals and a 10.8% of HIV-positive people who inject drugs as compared to the same period of 2011 (according to the data of the Ukrainian AIDS Center). The most significant achievement is **curbing the epidemic growth among people who inject drugs with recent history of drug use**. The situation in this sub-population is an indicator of the HIV transmission processes.



As a result of comprehensive efforts and interventions, **the rate of vertical transmission in Ukraine was reduced from 7.0% as of the end of 2006 to 4.1% in 2011.**



Key Achievements of the Global Fund Round 6 Program:

- The Global Fund grant allowed 11,049 of people living with HIV to get access to antiretroviral treatment, including 1,029 individuals in penal institutions.
- The total of 470,843 clients received HIV counseling and testing services, including notification of test results.
- The cumulative coverage (in 2007 – 2012) with prevention services was 429,778 people who inject drugs, 74,908 sex workers, 52,469 men who have sex with men, and 146,535 prisoners.
- As of July 2012, about 41% of PLWH registered with AIDS Centers were covered with care and support services. This number includes 47,399 adult PLWH, 277 HIV-positive MSM, 5,921 HIV-positive prisoners and 5,596 children affected by HIV epidemic.
- 7,094 individuals with opioid dependence in 27 regions receive SMT.
- 24,156 HIV-positive patients were tested for tuberculosis, with 4,927 individuals referred for treatment.
- 1,444 HIV-positive patients successfully completed rehabilitation programs aimed at clients becoming absolute drug-free.
- 77,263,042 condoms were distributed.
- 28,601 hotline consultations and 1,633 Internet consultations delivered to support the National HIV/AIDS Hotline.
- Within a pilot project stipulating reproductive health services for discordant couples, 58 HIV-positive males received sperm washing services and 47 females received artificial insemination services in 2011.
- 164 sub-grantees received grants to implement HIV/AIDS prevention projects.
- In the last year of Round 6, 120 sub-grantees implemented activities aimed at care and support for PLWH in all the regions of Ukraine, excluding Zakarpattia.
- In the reporting period, 595,812 individuals received STI treatment services. There were 33,637 STI treatment cases initiated among the representatives of most-at-risk groups.
- A Unified National Monitoring & Evaluation System has been launched.





As of 31 July 2012 most performance indicators, including 10 key indicators as per the Global Fund classification, have been exceeded. According to the results of Phase 2 for the period of August 2009 – July 2012, the cumulative utilization of Round 6 grant budget is 97%.

The total number of clients covered has been growing during the whole period of Program implementation. As of 31 December 2007, the total number of clients covered with Program activities was 215,313, while as of 31 July 2012, this cumulative indicator was 770,301. Thus, 554,988 new representatives of vulnerable populations were covered within the period of Program implementation.

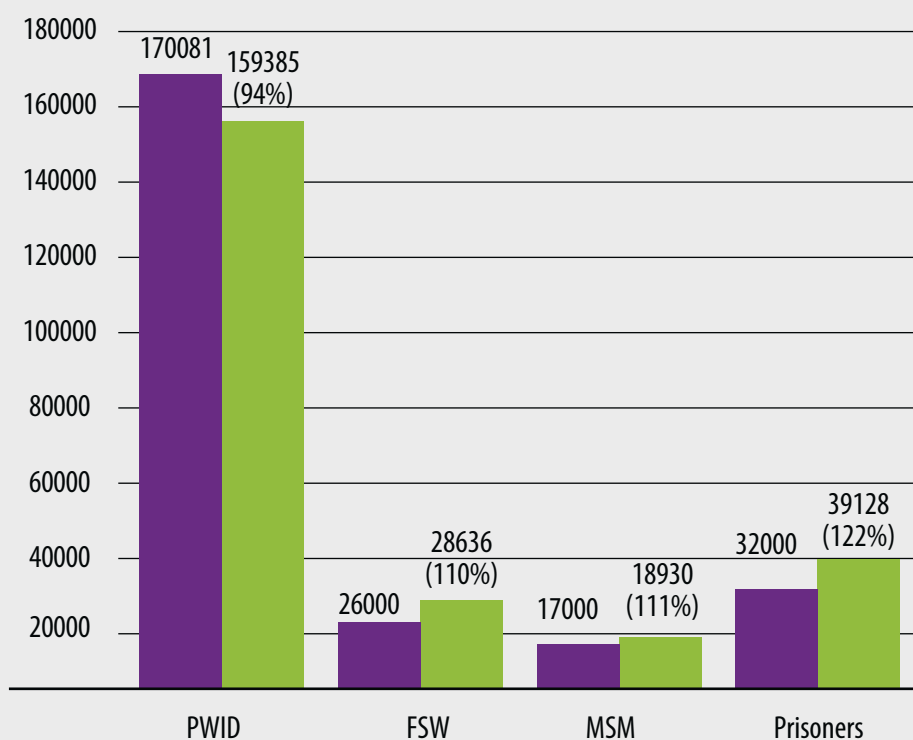
For many public health professionals, Round 6 Program became an opportunity to launch and expand innovative ideas and best international practices. It allowed piloting many innovative approaches and expanding them throughout the country. The activities which proved to be the most successful included VCT with rapid tests, pharmacy-based projects, mobile clinics, substitution maintenance therapy (SMT) programs, peer driven interventions, female condoms, supervision programs for psychologists, reforming and expanding the chain of Interregional Information & Resource Centers in order to ensure organizational development of community-based organizations and vulnerable communities.



Coverage of the most-at-risk populations with prevention services in the last 12 months as of 31 July 2012*:

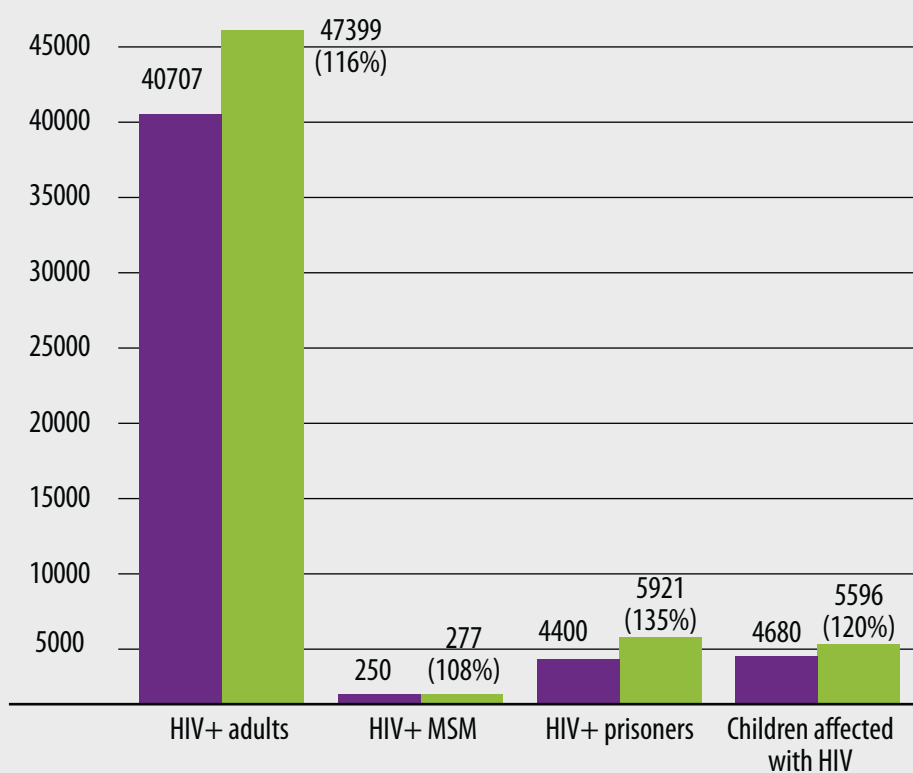
■ GF target
■ Fulfilled

* Coverage of people who inject drugs in the last 12 months went down 7% as a result of a unique coding system being launched.



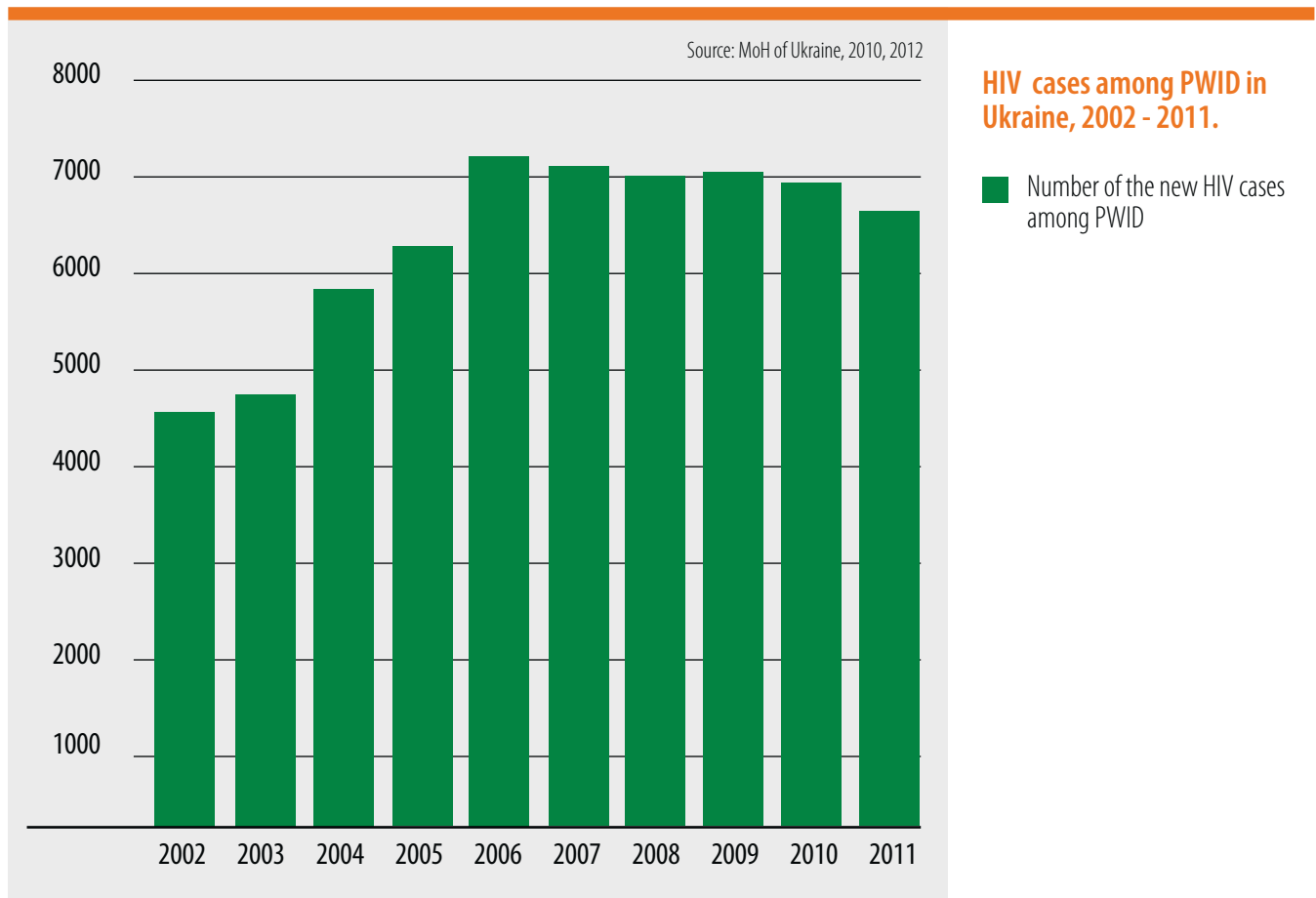
Coverage of people living with HIV with care and support services in the last 12 months as of 31 July 2012:

■ GF target
■ Result



In the Global Fund Results Report for 2012 **“Strategic Investments for Impact”** only 4 countries were selected to illustrate the coverage and impact results achieved in HIV/AIDS response sphere and Ukraine is among them.

Ukraine was presented as an example of the efficient prevention work among the risk groups. According to the report, within the period from 2005 to 2011 more than 160 000 people who inject drugs were covered with prevention services provided by the civil society organizations. HIV prevalence had been steadily decreasing in this group.

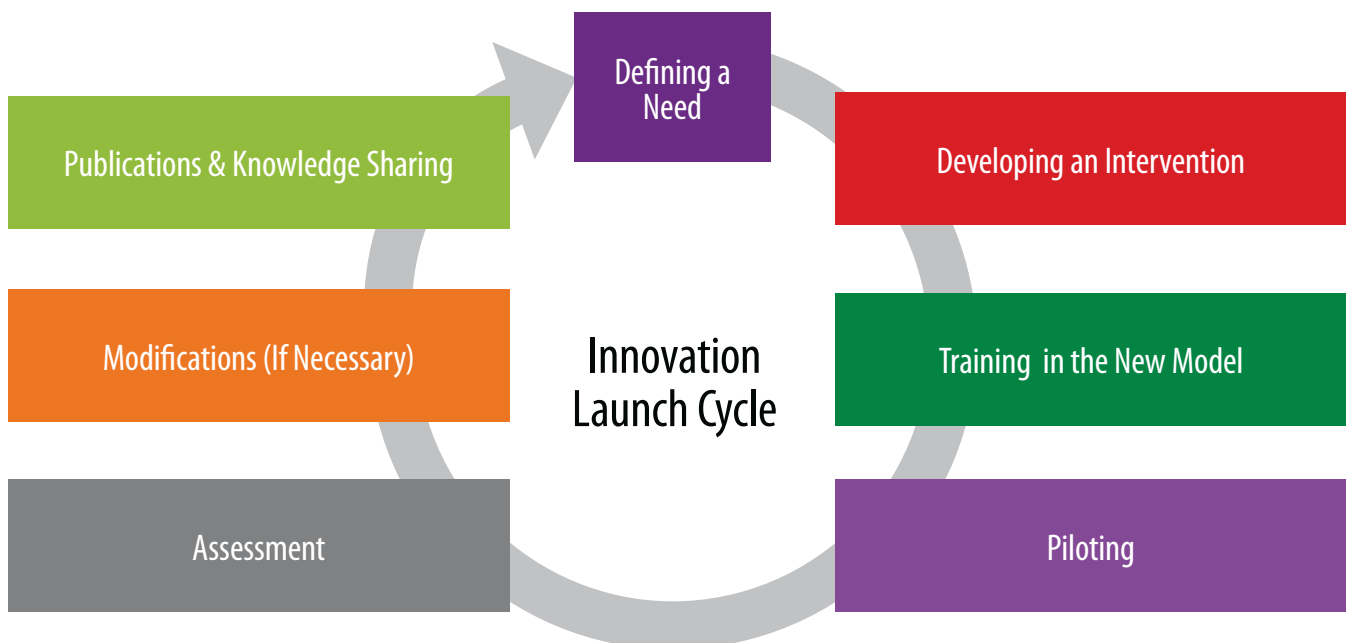


Alliance Ukraine is highlighted in the brief version of the report where all GF results are presented on 3 pages. Global Fund Results Summary showcases the first results of the new GF strategy for 2012-2016 aimed at maximizing results by investing funds more strategically for increased impact. “Investing for Impact” is illustrated with the examples of the supported programs, in particular, the Alliance Ukraine role in the implementation of a special database to monitor the provision of HIV services to most-at-risk population, allowing for real-time reporting. Thus, the best practices developed by Alliance Ukraine with the Global Fund’s support are getting widely applied across Eastern Europe and Central Asia and beyond through the Alliance’s Regional Technical Support Hub.

Prevention

HIV prevention among the groups vulnerable to HIV is a key part of the program implementation. During the program implementation years a significant success was achieved. The access to prevention services for the vulnerable groups was considerably expanded due to the following factors:

- New activity lines;
- Coverage increase of all target groups;
- Expanding the geography of services provision;
- Implementation of innovative ideas and best world approaches for HIV prevention. More than 30 innovative technologies were introduced in the practices of working with vulnerable groups.



HIV Prevention for People Who Inject Drugs (PWID)

Number of implementing NGOs: **82**

Coverage dynamics: **2007 – 110 407, 2012 – 159 385**

2012	+	Innovations: <ul style="list-style-type: none"> Prevention of HIV transmission among desomorphine users through changing individual behavior at the group level; HIV prevention among drug users using Peer Intervention – Chain Referral Model;
2011	+	<ul style="list-style-type: none"> Interventions aimed at drug injecting females and their sexual partners; Protect Project Prevention of acute and recent infection in the risk networks of the PWID; HIV prevention among drug users using Peer Intervention – Model in Risk Networks of PWID;
2010	+	<ul style="list-style-type: none"> HIV prevention among female drug users. Launching gender-sensitive approaches; Hepatitis B testing and hepatitis B vaccination; Distribution of female condoms;
2009	+	<ul style="list-style-type: none"> Prevention of HIV transmission among stimulant users through changing individual behavior at the group level;
2008	+	<ul style="list-style-type: none"> Pharmacy-based needle and syringe exchange; Distribution of lubricants; VCT with rapid tests; STI diagnostics and referral for treatment (syphilis, gonorrhea, Chlamydia); Launch of mobile clinics in 14 regions of Ukraine;
2007		<ul style="list-style-type: none"> Pharmacy-based HIV prevention among drug users and female sex workers; HIV prevention among the drug users under the Peer Driven Intervention model; Basic package of services: <ul style="list-style-type: none"> delivering a basic package of services (syringes, condoms, alcohol wipes, counseling, awareness-raising materials); outreach activities, fixed-site and street-bases syringe exchange points (SEPs); secondary syringe exchange through volunteers from among people who inject drugs; training volunteers from among people who inject drugs using peer education approach; pharmacy-based preventive activities among vulnerable populations; counseling by specialists (lawyer, psychologist, specialized healthcare providers – depending on the project clients' needs identified); providing information about functioning rehabilitation and substitution maintenance therapy (SMT) programs, supporting clients in getting the required services and referral of patients to other specialized projects and organizations; counseling on HIV prevention and safer drug using practices; distribution of behavior change communication materials; voluntary counseling and testing for HIV using rapid tests.

HIV Prevention Services for SW

Number of implementing NGOs: from **39 to 47** (depending on the year of Program implementation)

Coverage dynamics: **2007 – 21 330, 2012 – 28 636**

2012	+	Innovations: <ul style="list-style-type: none"> • Implementation of Peer Driven Intervention Model: Repeated Coverage; • Activities aimed at clients of SW; • Improvement of mobile clinics;
2011	+	<ul style="list-style-type: none"> • Sexual and reproductive health counseling and services: <ul style="list-style-type: none"> • Case management for FSW: what a woman wants; • Online counseling for SW; • Training sessions for community representatives; • Improving the quality of FSW counseling through training social workers and psychologists;
2010	+	<ul style="list-style-type: none"> • Distribution of female condoms; • Peer Driven Intervention Model implementation among FSW; • Violence prevention; • Counseling on reproductive health and female condom use; • Testing for hepatitis B;
2009	+	<ul style="list-style-type: none"> • Distribution of topical antiseptics and pregnancy tests; • Other hygiene and disinfection agents; • Peer counseling; • Self-help groups, psychological support groups, training sessions;
2008	+	<ul style="list-style-type: none"> • Distribution of lubricants; • VCT with rapid tests; • STI diagnostics and referral for treatment (syphilis, gonorrhea, Chlamydia); • Training sessions on building safer behavior; • Preventive activities for partners of SW; • Launch of mobile clinics in 14 regions of Ukraine;
2007		Basic package of services: <ul style="list-style-type: none"> • Syringe exchange and distribution; • Condom distribution; • Counseling on safer behavior; • Social support; • Outreach activities; • Distribution of awareness-raising materials; • Community centers.

HIV Prevention for Men Who Have Sex with Men (MSM)

Number of implementing NGOs: **26**

Coverage dynamics: **2007 – 10 361, 2012 – 18 930**




2012	+	Innovations: <ul style="list-style-type: none"> • Psychologists' Network founded; • Variety of condoms; • Development of online services;
2011	+	<ul style="list-style-type: none"> • Using female condoms in MSM projects; • Raising awareness on HIV prevention in the context of specific sexual practices; • Online counseling; • Expanding activities to small towns;
2010	+	<ul style="list-style-type: none"> • Mentor Support Program; • Self help groups for MSM with alcohol abuse issues; • Testing for Hepatitis B and Hepatitis C; • Hepatitis B vaccination; • Outreach activities in clubs; • Volunteer movement;
2009	+	<ul style="list-style-type: none"> • Community centers; • Arranging prevention-focused leisure activities; • VCT for HIV using rapid tests; • HIV diagnostics and treatment (gonorrhea, Chlamydia);
2008	+	<ul style="list-style-type: none"> • Individual and group counseling sessions with psychologists; • Syphilis diagnostics; • Raising awareness about services available among community representatives;
2007		Basic package of services: <ul style="list-style-type: none"> • Outreach activities; • Distribution of condoms and lubricants; • Distribution of printed materials; • Awareness-raising activities; • Self-help groups; • Peer counseling; • Counseling of social workers; • Social support of clients; • Referral of prevention project clients for non-medical support or to ART projects.

Harm Reduction Programs in Penal Facilities

Number of implementing NGOs: **27**

Number of penal facilities: **64**

Coverage dynamics: **2007 – 45,148, 2012 – 39,128**

2011		Innovations: <ul style="list-style-type: none"> • Training on how to work with volunteers;
2009		<ul style="list-style-type: none"> • Education of volunteers from among prisoners for providing peer counseling through awareness-raising classes/training sessions (with an examination to be taken); • Peer counseling in penal institutions on safer behavior, HIV/STI, motivating prisoners to take tests for HIV/STI in medical units; • Support of prisoners after they test positive for HIV; • Arranging and holding at least two mass prevention campaigns a year: prevention-focused lectures, concerts, campaigns dedicated to the World AIDS Day, International Remembrance Day, etc.;
2008		<ul style="list-style-type: none"> • Delivering radio lectures; • Positive prevention;
2007		Basic package of services: <ul style="list-style-type: none"> • Counseling sessions with psychologists and social workers; • Self-help or psychological support groups; • Distribution of preventive and hygiene items (condoms, toothbrushes, shaving equipment, awareness-raising materials) among socially insecure prisoners and/or those who lost their social links through peer counselors, meeting rooms and/or medical units; • Awareness-raising classes for prisoners on the following topics: prevention of HIV/STI, hepatitis, tuberculosis, building skills to negotiate condom use with sexual partners, etc.

"In the nearest future Ukraine should focus on achieving substantial progress in allocating governmental funding for focused HIV prevention programs, as well as covering urgent needs of prevention and treatment in prison"

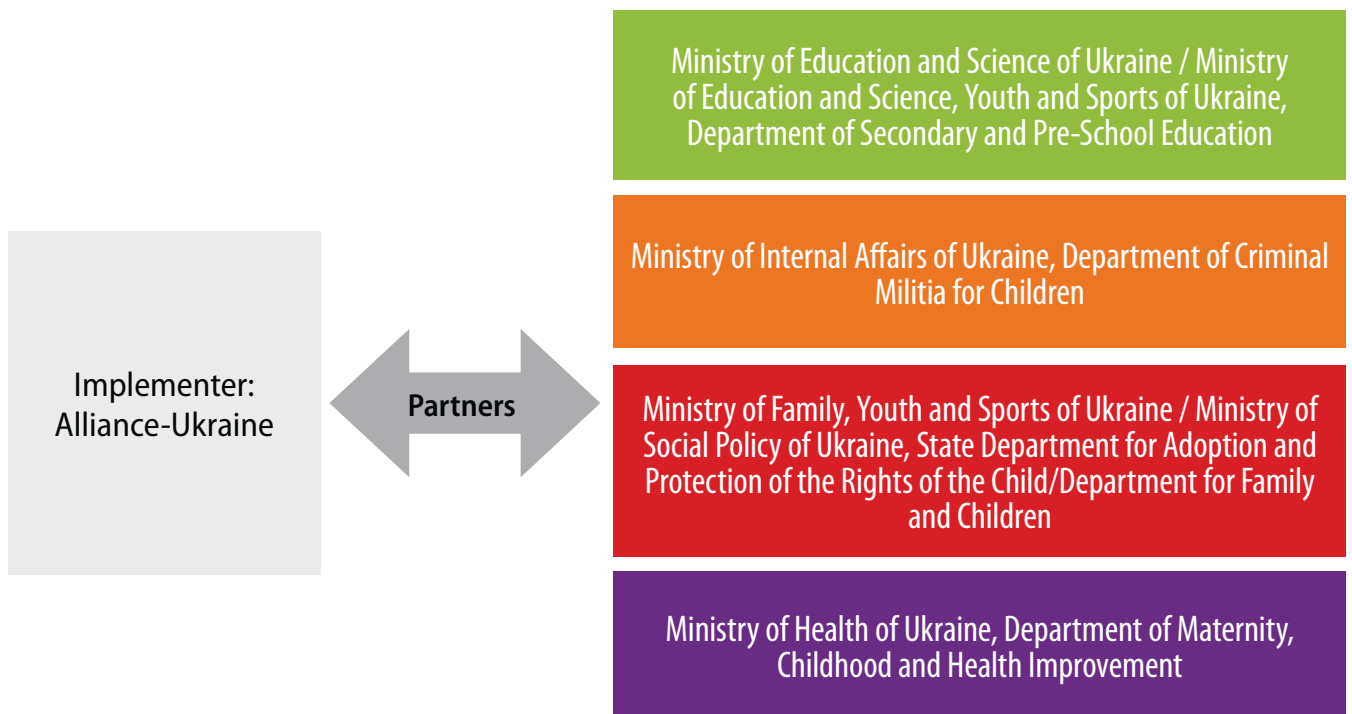
*Michel Kazatchkine,
Executive Director of the Global Fund to Fight AIDS, Tuberculosis and Malaria at his meeting with the
Prime Minister of Ukraine, Mykola Azarov, January 2012.*

5,712 officers working in penal institutions of Ukraine have been trained at training sessions held by Alliance-Ukraine at the expense of grant funds within the Program.



HIV Prevention for “Street Children”

In 2007-2012, the Global Fund Program was the only source of funding for HIV/AIDS prevention projects focused on “street children” (homeless children and those deprived of care) and students of specialized state-funded facilities for children. There has been no funding allocated for such activities from the state budget.

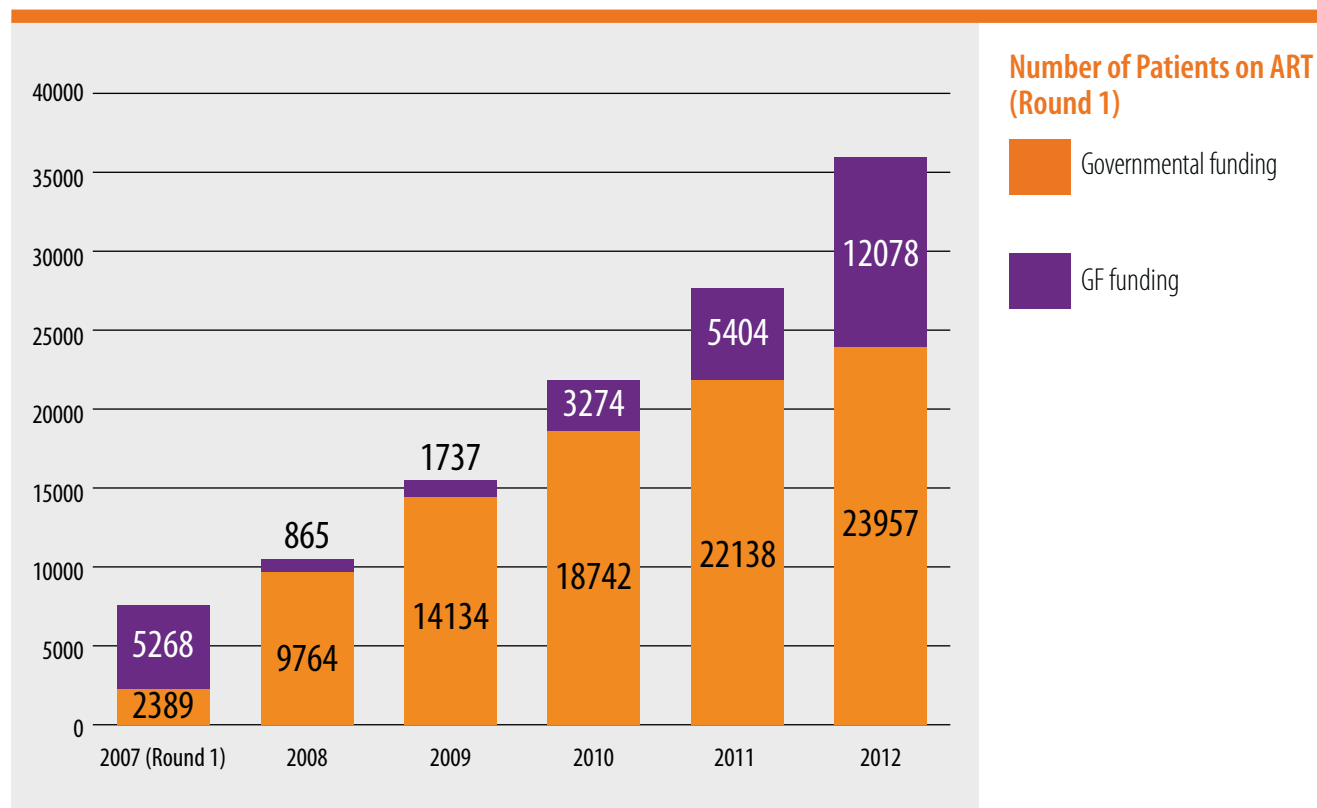


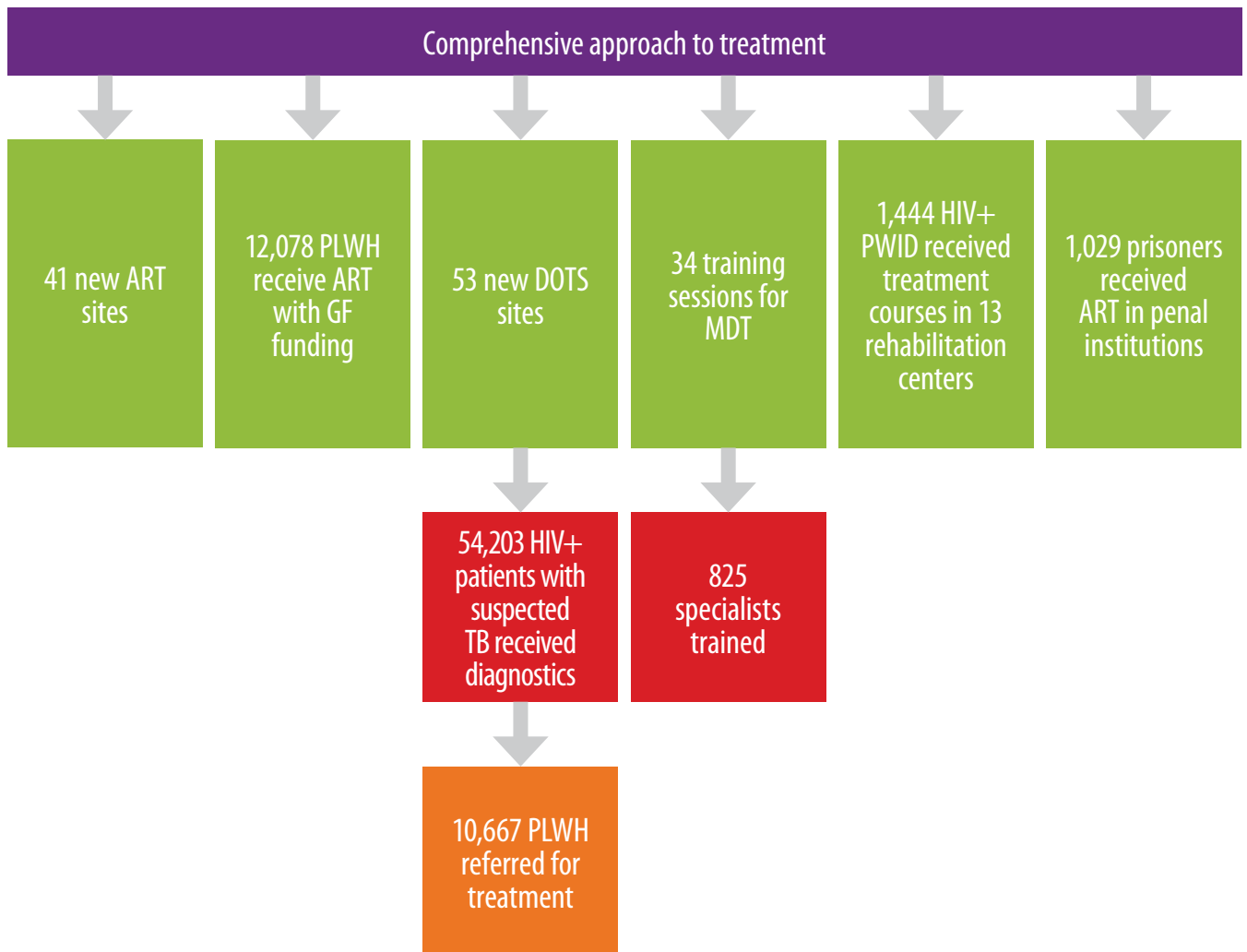
The awareness work on HIV prevention and children with HIV support was carried out with 66,661 child.

Areas of activities:

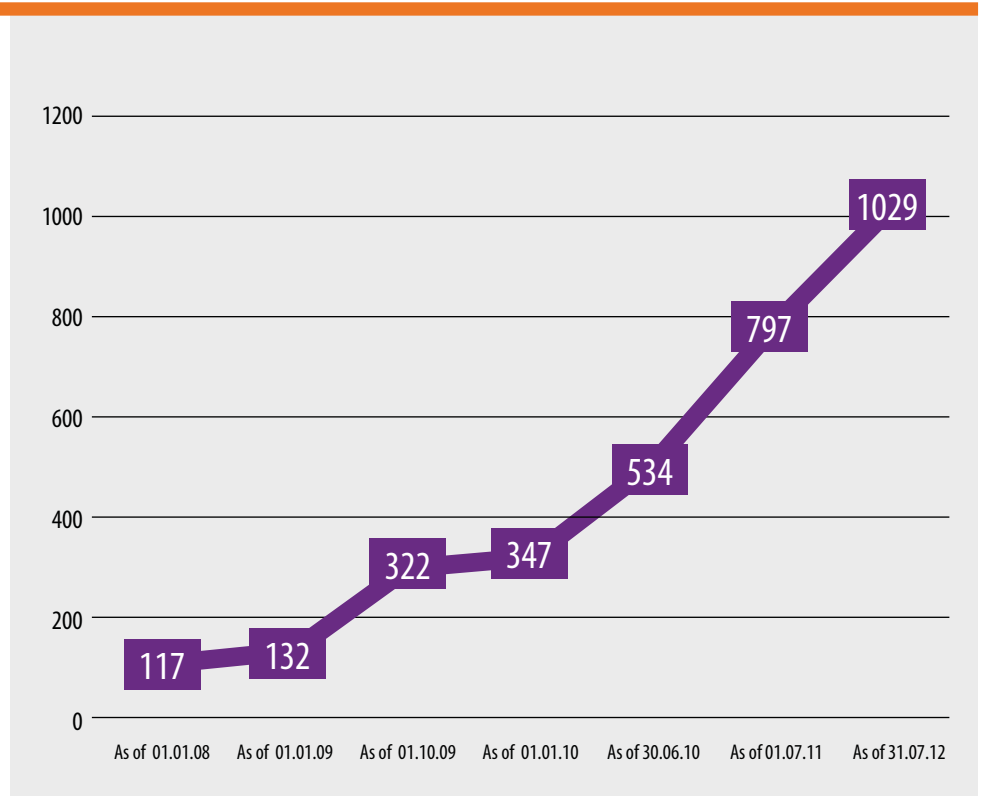
- Building institutional capacity of partners in the area of HIV prevention for homeless children.
- Awareness-raising activities aimed at the specialists directly working with children in relevant social facilities.
- Building teams of in-house trainers in each partner organization for further education of staff in by the Ministries.
- Development and distribution of training materials and guidelines.

Services for PLWH





Number of Patients on ART in Penal Institutions



Care and Support for PLWH

Number of implementing NGOs: **120**

Coverage dynamics: **2007 – 5,814** HIV+ adults (from the total of 81,741); **818** children affected by the epidemic
2012 – 47,399 HIV+ adults; **5,596** children affected by the epidemic

Project Dynamics

	Year 1	Year 2	Year 3	Year 4	Year 5
Number of HIV+ adults covered by care and support programs	5 814	24 273	33 186	40 063	47 399
Number of HIV+ MSM covered by care and support programs	62	225	170	213	277
Number of HIV+ prisoners covered by care and support programs	1 233	3 798	4 030	4 851	5 921
Number of children affected by HIV epidemic covered by care and support programs	818	3 291	4 766	5 066	5 596

Medical, social and psychological support of HIV+ adults

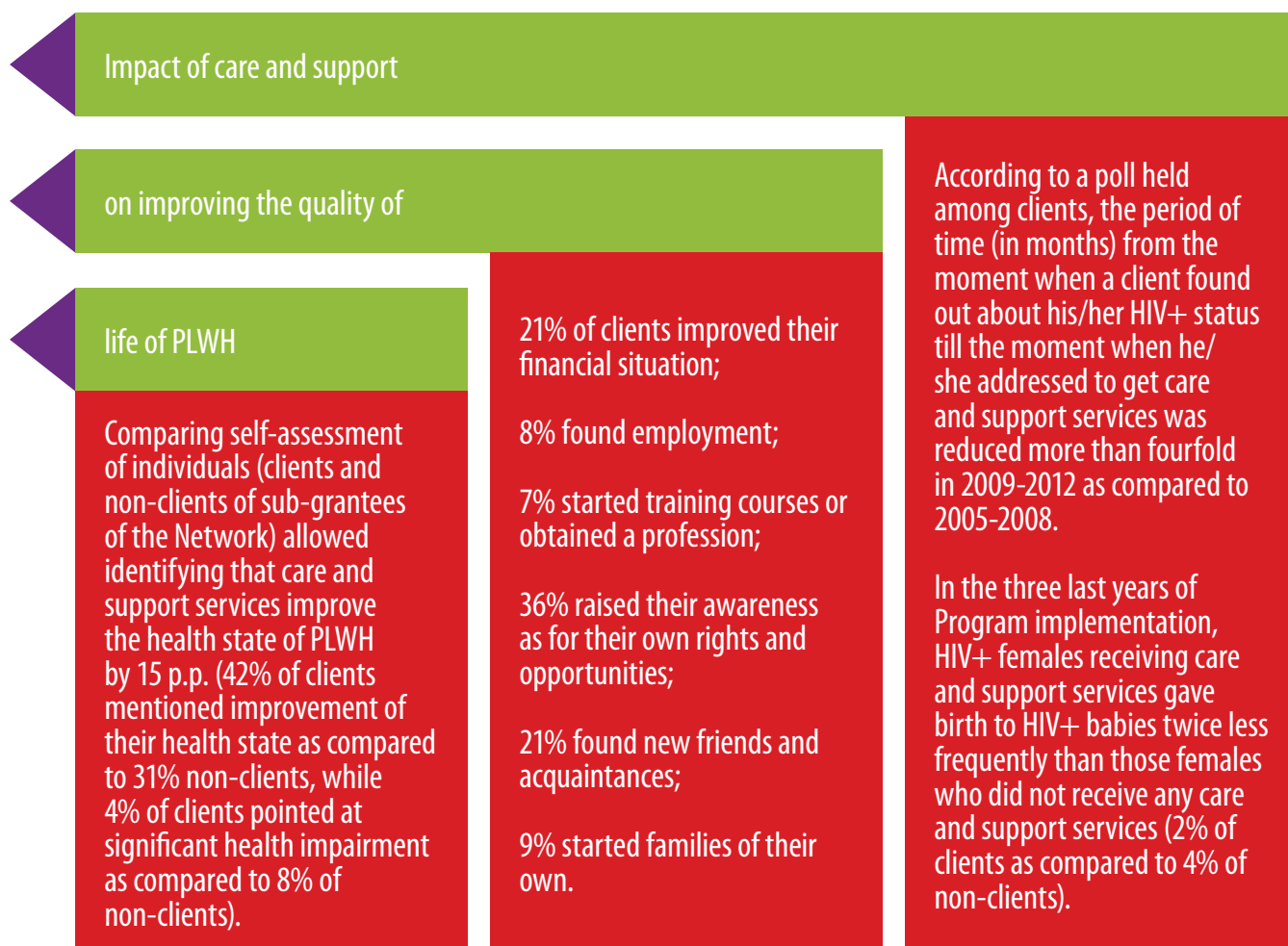
Medical, social and psychological support of antiretroviral treatment for adults with triple diagnosis HIV/TB/PWID;
 Medical, social and psychological support of antiretroviral treatment (ART) for adults;
 Home non-medical and nursing care for HIV+;
 Palliative care for patients with double diagnosis (HIV/AIDS + TB);
 Community centers for HIV+ and their family members;
 Medical, social and psychological support of HIV+ pregnant women and birthing mothers with further follow-up of babies born from HIV+ mothers;

Medical, social and psychological support of children affected by HIV/AIDS epidemic

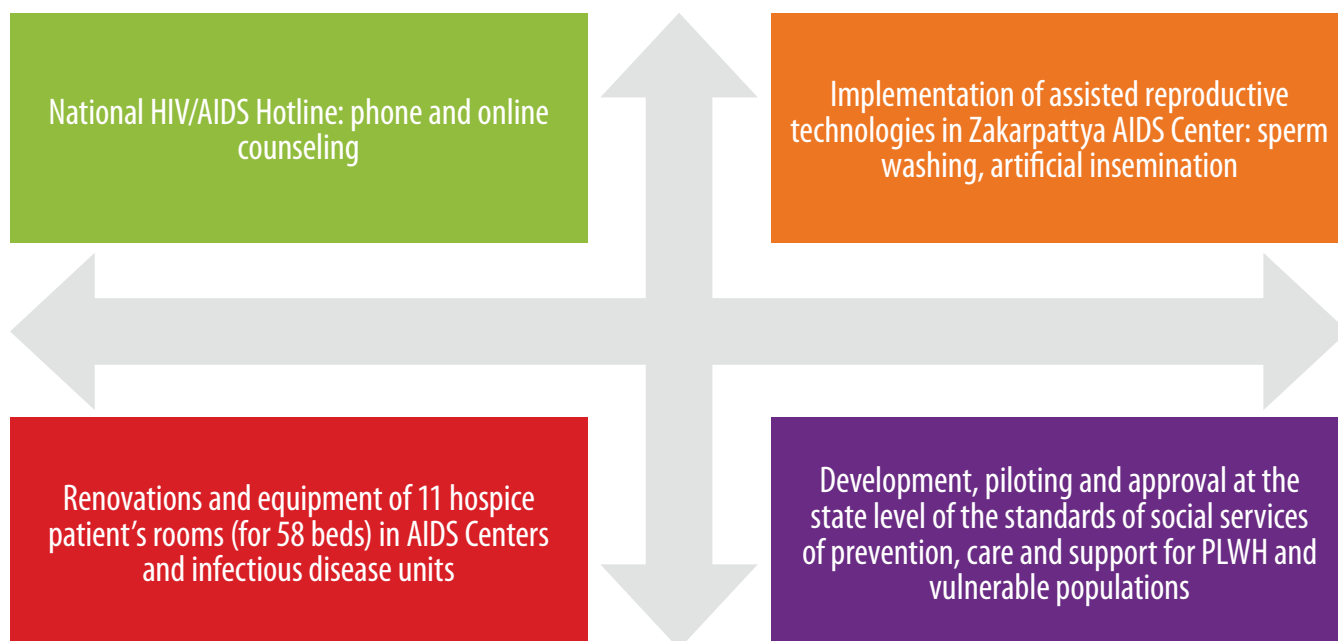
Day care center for children affected by the epidemic;
 Disclosing and accepting HIV+ status of children and their family members;
 Medical, social and psychological support of ART for children;
 Home nursing care for clients with critical health conditions requiring regular care;

Other activities

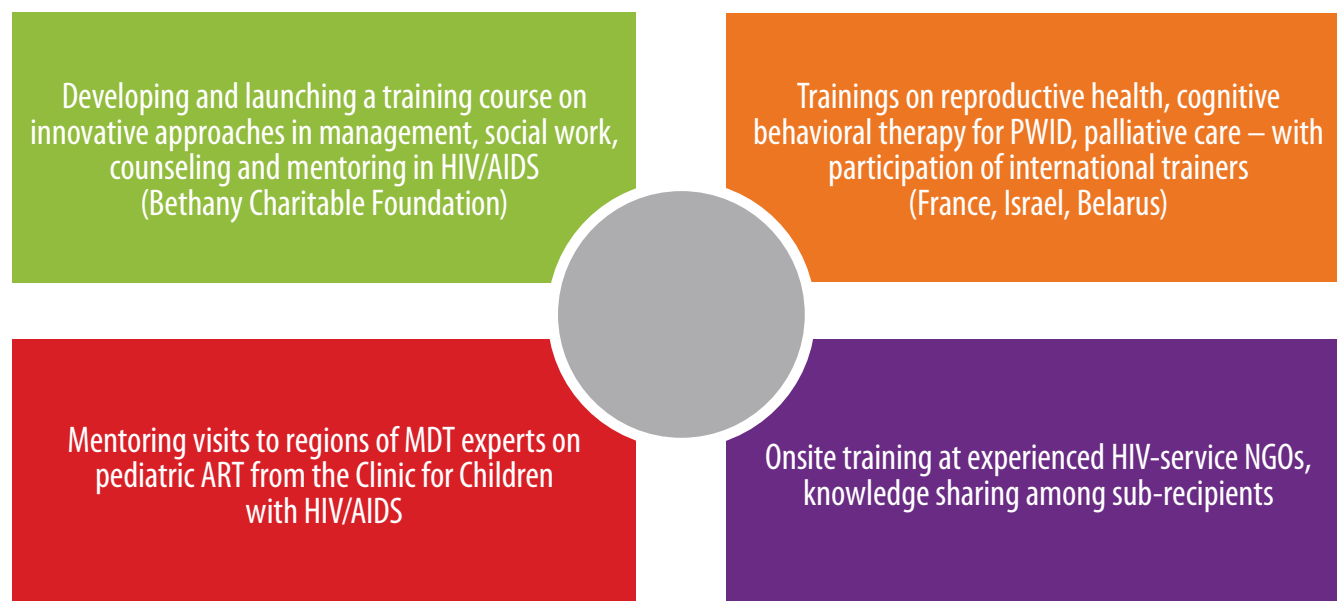
Care and support for HIV+ prisoners in correctional institutions;
 Expanding self-help movement of HIV+ MSM;
 Expanding self help movement of PLWH in small towns and villages;



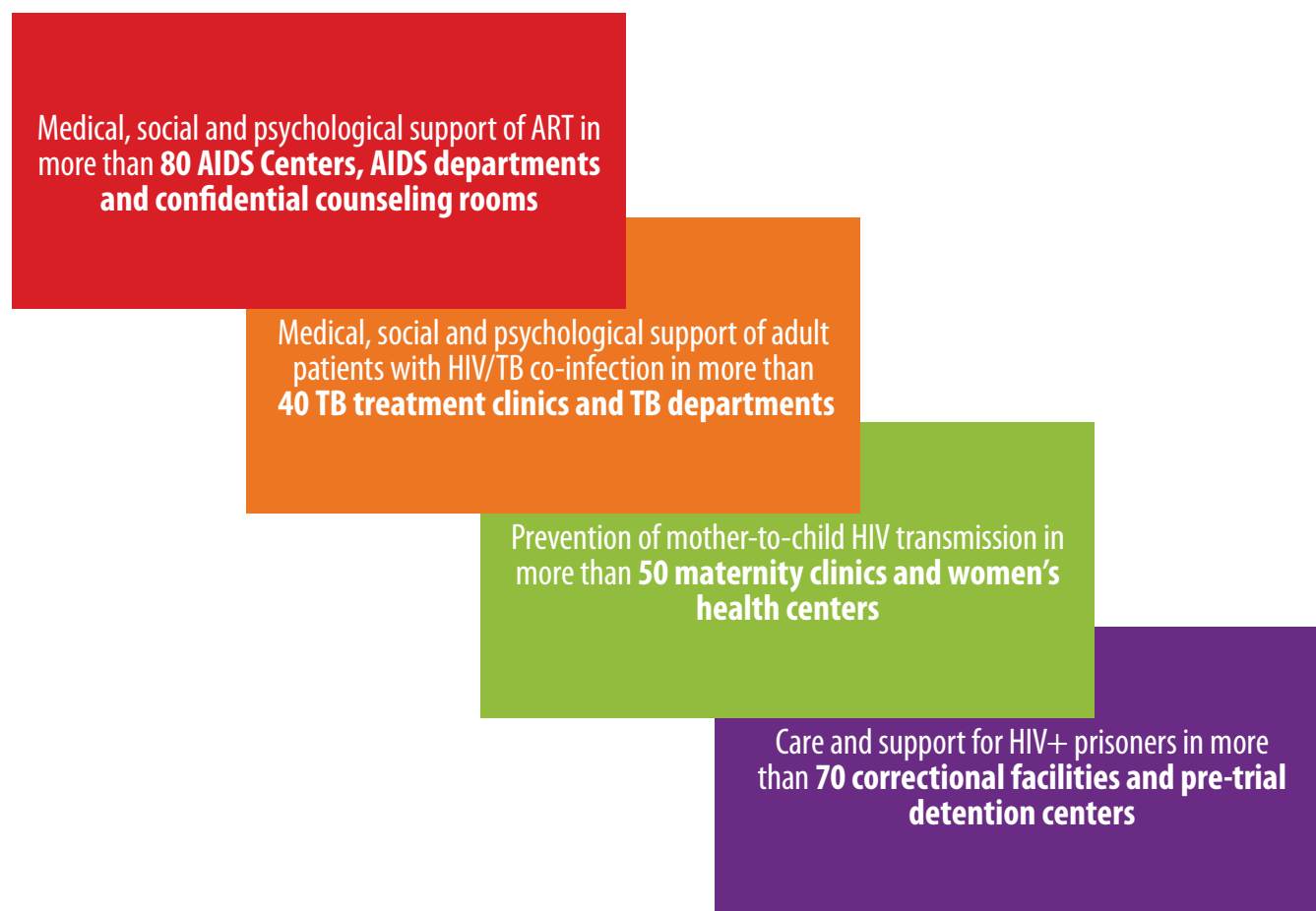
Innovations:



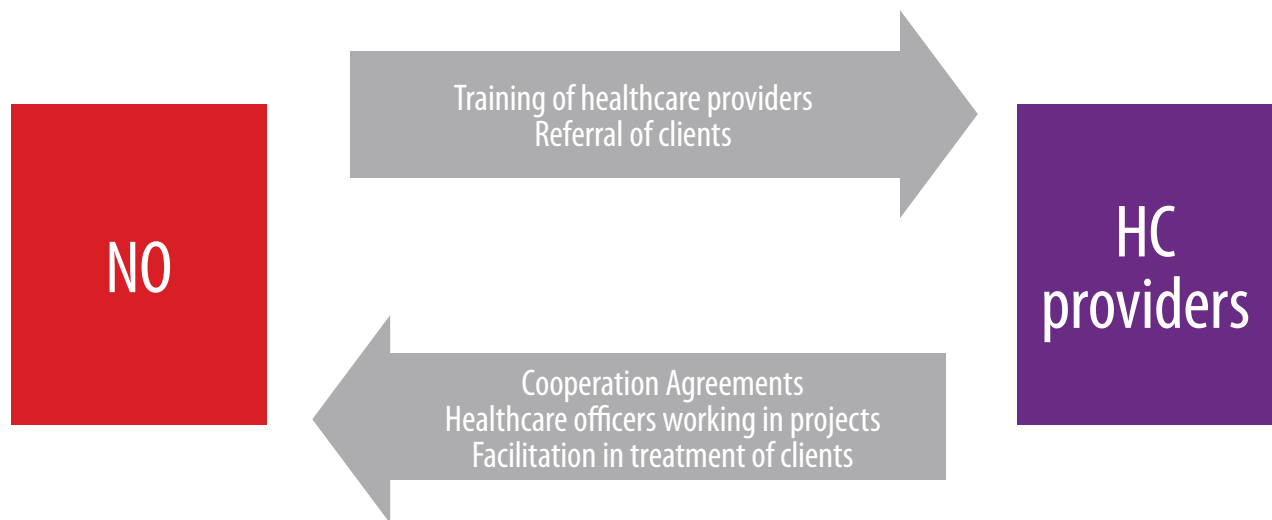
Training Activities



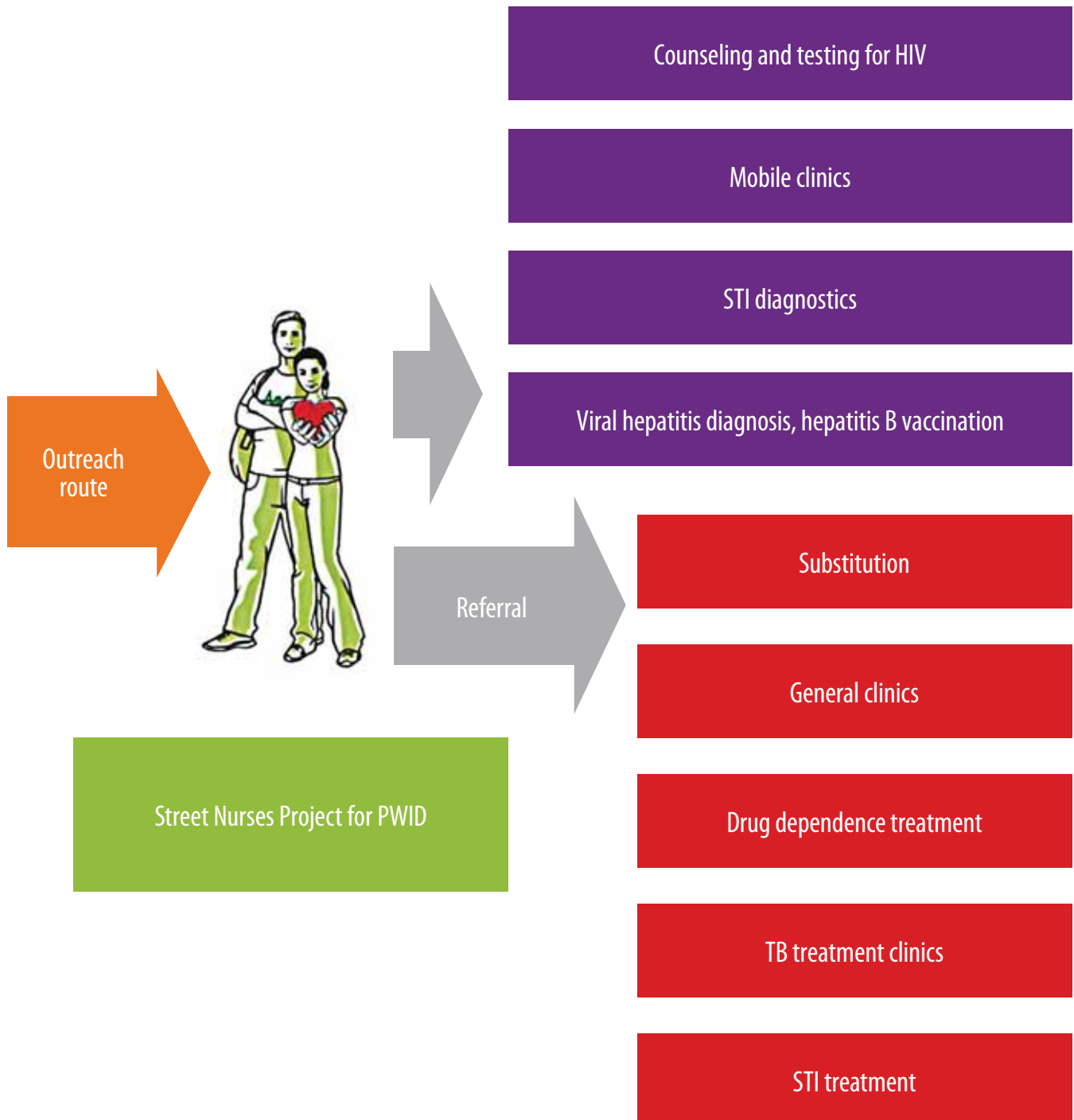
Cooperation with State Institutions



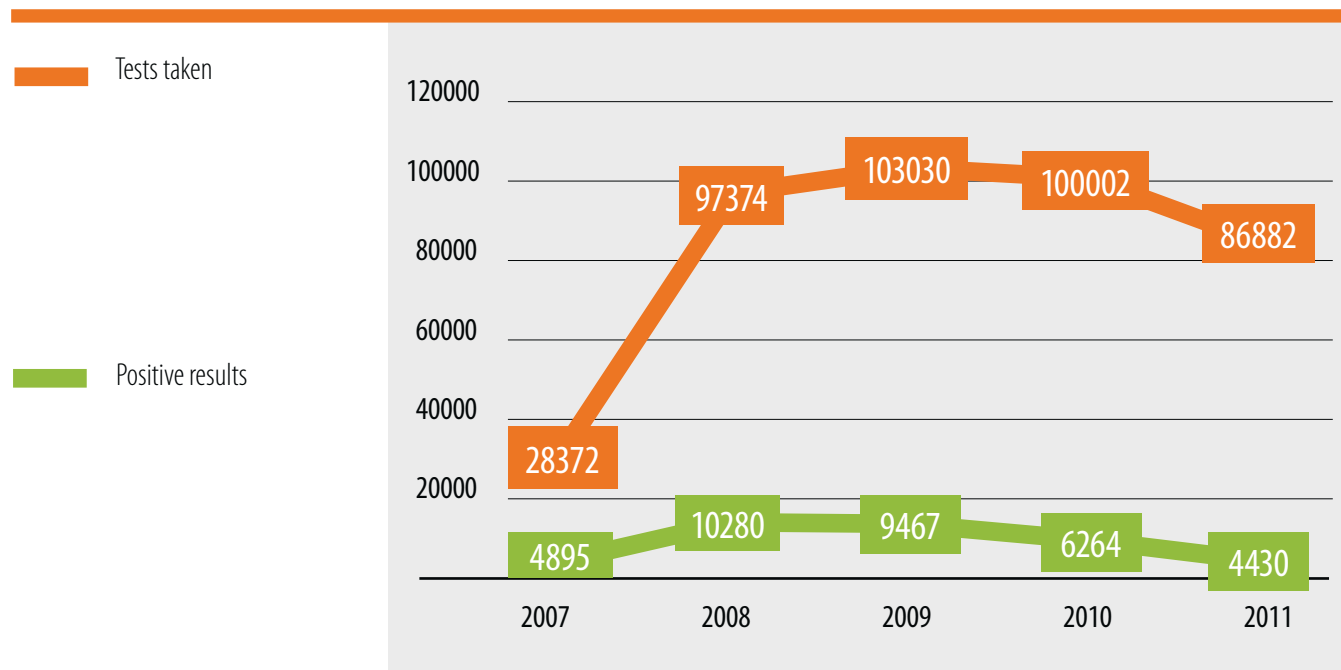
Activities Aimed at Improvement of Health Care System



Integration and Access of the Most-at-Risk Populations to Health Services



Counseling and Testing for HIV



Mobile Clinics



In November 2008, 14 NGOs received mobile clinics to conduct testing and deliver medical and counseling services. For this purpose, 14 Bogdan A-069 buses were appropriately re-equipped. Throughout Program implementation, representatives of vulnerable populations made 193,274 visits to the mobile clinics.

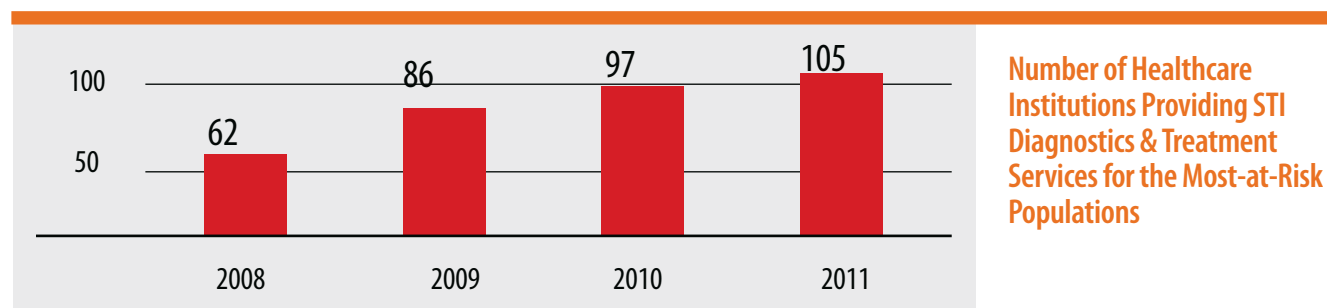
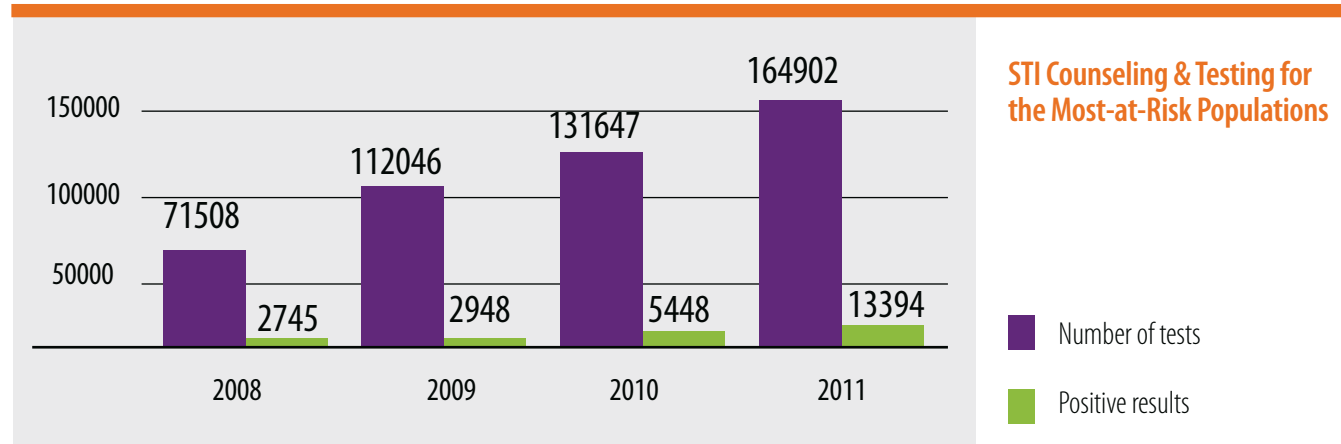
Services Provided in Mobile Clinics

- STI screening tests;
- Dermatovenereological examination in gynecological chair using disposable equipment and other expendable materials;
- Targeted referral to healthcare facilities for further diagnostics and medical treatment;
- Awareness raising and counseling on STI and HIV prevention;
- VCT for HIV;
- Psychological support and counseling;



The most significant achievement for the further activities of mobile clinics was signing of the Order on the Regulation on Mobile Clinics in 2011 (facilitated by the State Service of Ukraine for Countering HIV/AIDS and Other Socially Dangerous Diseases and the working group of the MoH of Ukraine for VCT).

STI Prevention and Treatment



Substitution Maintenance Therapy

SMT program patients:

Methadone-based therapy: 6,249 (88%)
 Buprenorphine-based therapy: 845 (12%)
 HIV+: 3,074 (43%)
 Receive ART: 1,106 (16%)
 TB+: 1242 (17,5%)
 Hepatitis+: 4145 (58,5%)
 Most patients have co-infections

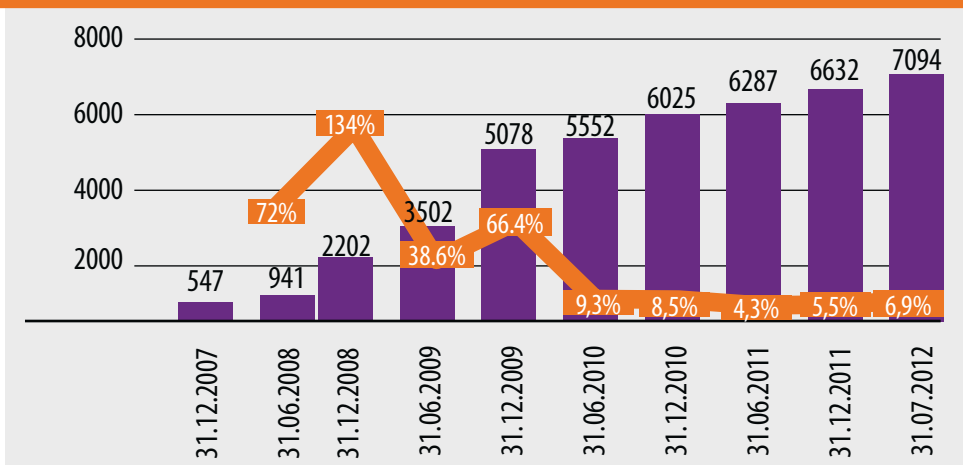
IMPACT

- Due to the SMT program, 30% of patients got employment (official or unofficial)
- App. 3% got into training
- More than 16% re-established links with their families
- App. 5% started families
- More than 2.5% had children born

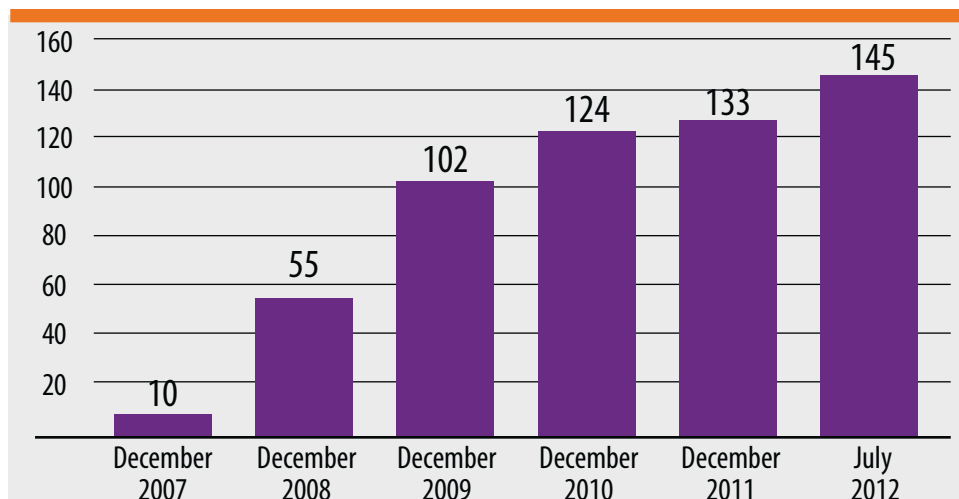
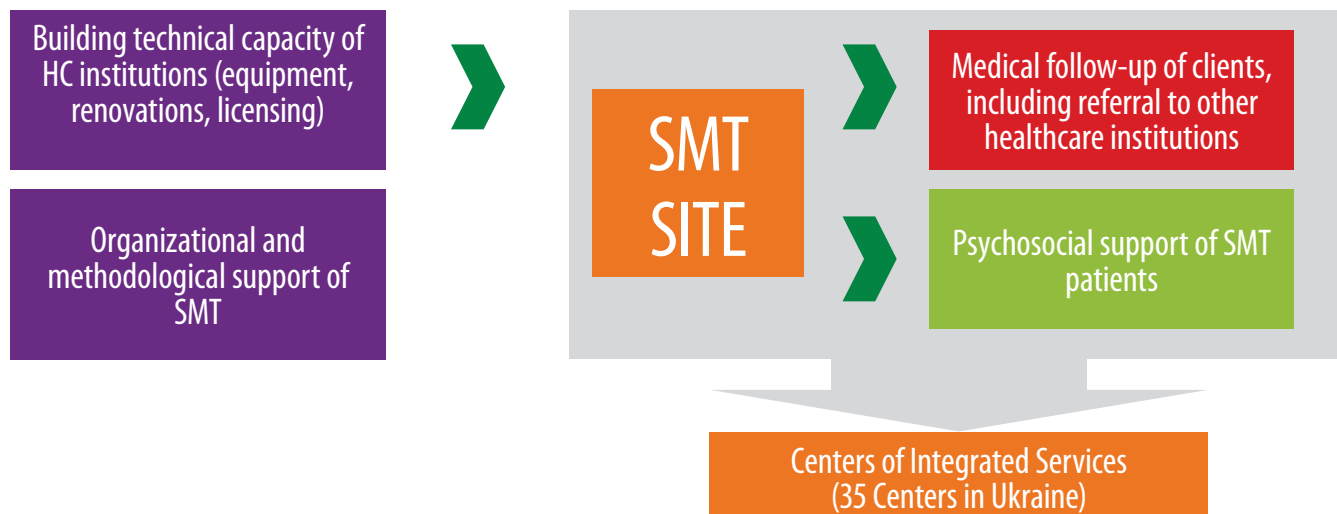
Dynamics of enrolling patients into SMT programs in Ukraine, 2007-2012

■ Total number of SMT patients

■ Growth rate, %



Integrated Care for Addicts



Dynamics in the number of healthcare institutions implementing SMT in Ukraine, 2007-2012



Technical Support Cascade

International practices



Alliance Ukraine



Guidelines,
training
modules & best
practices

Study tours

Interregional
Resource
Centers (11
Centers)
Trainings at the
regional level

Trainings and
seminars at the
national level
Trainings of
trainers

On-call
technical
support

Remote online
training: Harm
Reduction
Lessons
www.aidslessons.org.ua



Technical
support
needs

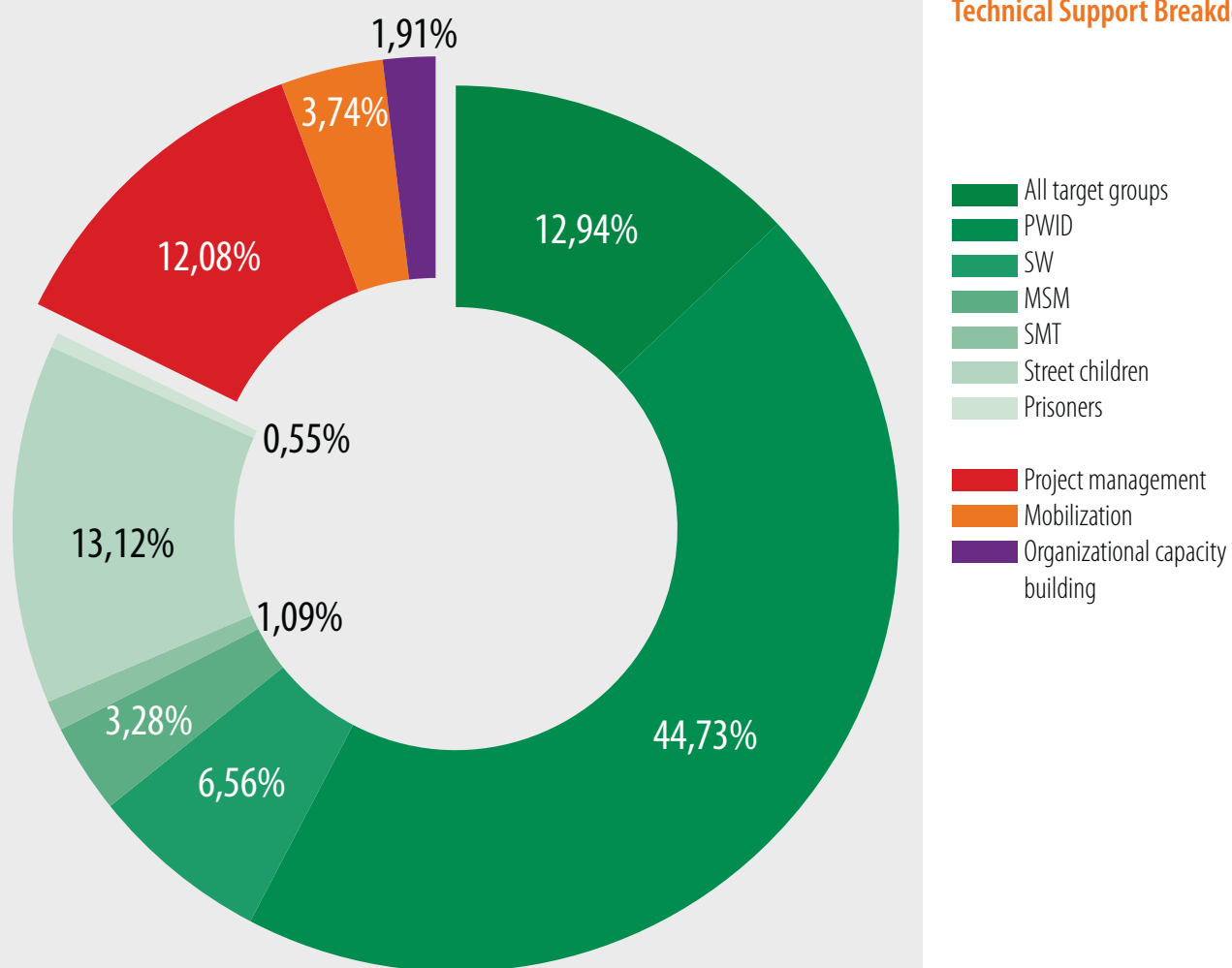


Technical
support
needs



NGOs

Technical Support Breakdown



Policy & Advocacy at the National Level

Laws Supporting Implementation of the Global Fund Program

23 December 2010 the Verkhovna Rada of Ukraine had approved the new edition of the Law of Ukraine **“On prevention of diseases caused by Human Immunodeficiency Virus (HIV), and legal and social security of people living with HIV”**.

The additions canceled formerly obligatory HIV/AIDS certificate which the foreigners had to submit in order to obtain Ukrainian visa. The law allows the doctors to inform the partners of PLWH on the fact that they had been exposed to the risk of infection. The information on a person's status among medical workers now may be transmitted only upon the patient's written consent.

23 December 2010 – Law of Ukraine No. 2861-VI “On Introduction of Amendments to the Law of Ukraine “On Prevention of Acquired Immunodeficiency Syndrome (AIDS) and Social Protection of the Population”, eliminating a number of ungrounded and discriminatory limitations for the most vulnerable populations and people living with HIV, formally granting PWID guarantees to receive OSTSM, etc.

21 June 2012 – Verkhovna Rada of Ukraine adopted the Law of Ukraine No. 4999-VI “On the Implementation of Programs of the Global Fund to Fight AIDS, Tuberculosis and Malaria in Ukraine” drafted by the MoH of Ukraine together with Principal Recipients of the GF Programs and other stakeholders, which will finally allow solving the issue of double taxation of medications, healthcare products and other goods purchased and imported to Ukraine by the Principal Recipients with GF funding as humanitarian aid.

The Barriers on the Way of SMT Implementation (In Particular Methadone-based) Have Been Eliminated.

Meeting on countering HIV/AIDS chaired by the Head of State in December 2007 and the relevant Order of the President of Ukraine No. 1208 dd. 12 December 2007.

Launch of methadone-based SMT. A certificate has been obtained to import the methadone drug into Ukraine.

Order of the MoH of Ukraine No. 823 dd. 10 November 2009, allowing introducing methadone-based SMT for 5,293 patients in all the regions of Ukraine.

Expanding SMT

2010 – systematic interferences into SMT programs and violation of SMT patients' rights from the side of law enforcement bodies

Advocacy campaign to protect SMT patients' rights

22 February 2011 – the Prime Minister of Ukraine instructed the Minister of Health of Ukraine and the Minister of Interior of Ukraine to facilitate expansion of the substitution maintenance therapy for people who inject drugs.

January 2012 – meeting of the Prime Minister of Ukraine with the Executive Director of the Global Fund. Arrangements to further expand SMT programs under personal control of the Head of Ukrainian Government.

5 June 2012 – amendments to the National Program on further expansion of SMT programs with the prospects to cover 20,000 patients with treatment services.

“Dr. Podolyan’s Case”

May 2010

May 2010 - Dr. Podolyan providing SMT services in Odesa drug treatment clinic was wrongly accused by law enforcement bodies of four dozens of cases of drug trafficking to SMT patients



2010-2012

Alliance-Ukraine initiated advocacy campaign to protect Dr. Podolyan



August 2012

It took almost two years to finally prove that Dr. Podolyan has not committed any of the grave crimes charged on him

Fighting for Humane Drug Policy



July 2010
— Order of the MoH of Ukraine No. 634: increasing the level of criminalization of opioid drug users

3 April 2011 — Alliance-Ukraine files targeted appeals to invalidate the Order in local courts, courts of appeal and cassation

A provision is added to the Concept of the National Drug Strategy of Ukraine drafted by the State Drug Control Service on the necessity to decriminalize drug dependent individuals and determine adequate amounts of drugs held to bring to criminal liability. The advocacy efforts are in progress...

Protection of the Rights of People Living with HIV





September 2009 – the MoH holds a tender to purchase drugs at a price four times higher than the purchases of the Network of PLWH. The price difference amounted to UAH 24 million.

A street anti-corruption campaign “Corruption in MoH” was held at the walls of the MoH and was widely covered in mass media.

The Prime Minister of Ukraine formed and chaired an Intersectoral Working Group to investigate pricing policy in public procurement of medical equipment, drugs and vaccines. Tender procedures used in the MoH were inspected. February 2010 – the Ministry issued an Order “On Corrective Measures in Public Procurement of Drugs and Medical Supplies”

14 June 2010 – the Cabinet of Ministers of Ukraine passed a Resolution on economic entities to be relocated from Kyiv Pechersk Lavra, including Lavra Clinic for AIDS patients

7 July – the Network held a campaign ‘Clinics on Sale: Expensive’ widely covered in media

9 July – the MoH officially announced that the Lavra Clinic will not be moved out until the Government finds appropriate premises and develops a plan of relocation





June 2011 – funding allocated to implement the National Program of Countering HIV/AIDS was analyzed, with the facts of systematic underfunding of ARV drugs procurement presented to public.

July – August: mass media widely cover the All-Ukrainian campaign 'Help Us Survive!', when children affected by HIV/AIDS epidemic wrote thousands of letters addressed to the President and the Prime Minister of Ukraine, Ministers and deputies asking to provide funds for the full-scale procurement of ARV drugs in 2012.

December – the state budget of Ukraine for 2012 stipulates UAH 234 million for the procurement of ARV drugs, which allows procuring medications for 42,000 patients. For the first time ever, this budget line of the National Program received full-scale funding.



July 2012 – the MoH held a tender to procure ARV drugs, accepting a price three times higher than the price at which the Network of PLWH procured the same drugs.

With support of its partners and mass media, the Network carried out an advocacy campaign and negotiations with pharmaceutical companies.

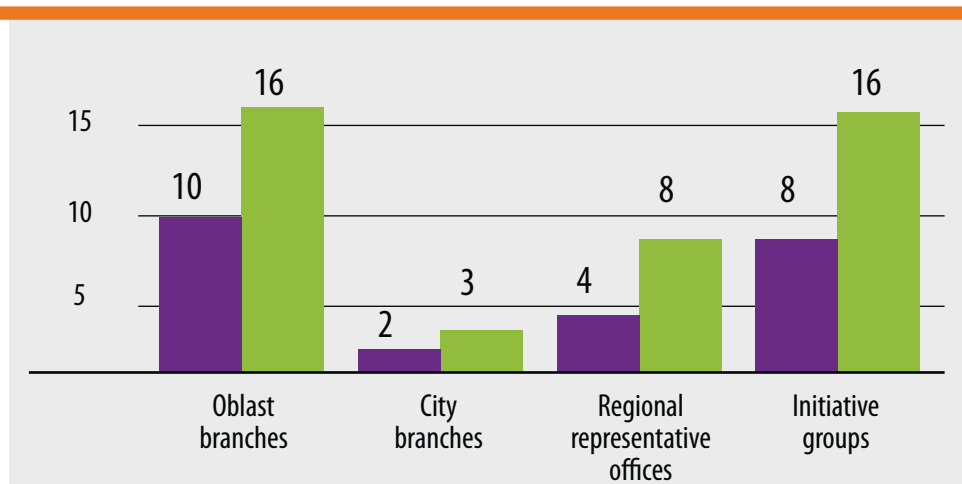
Advocacy efforts resulted in agreement with the pharmaceutical companies participating in the tender on subsidies, which allowed covering 1,800 more PLWH with treatment services.

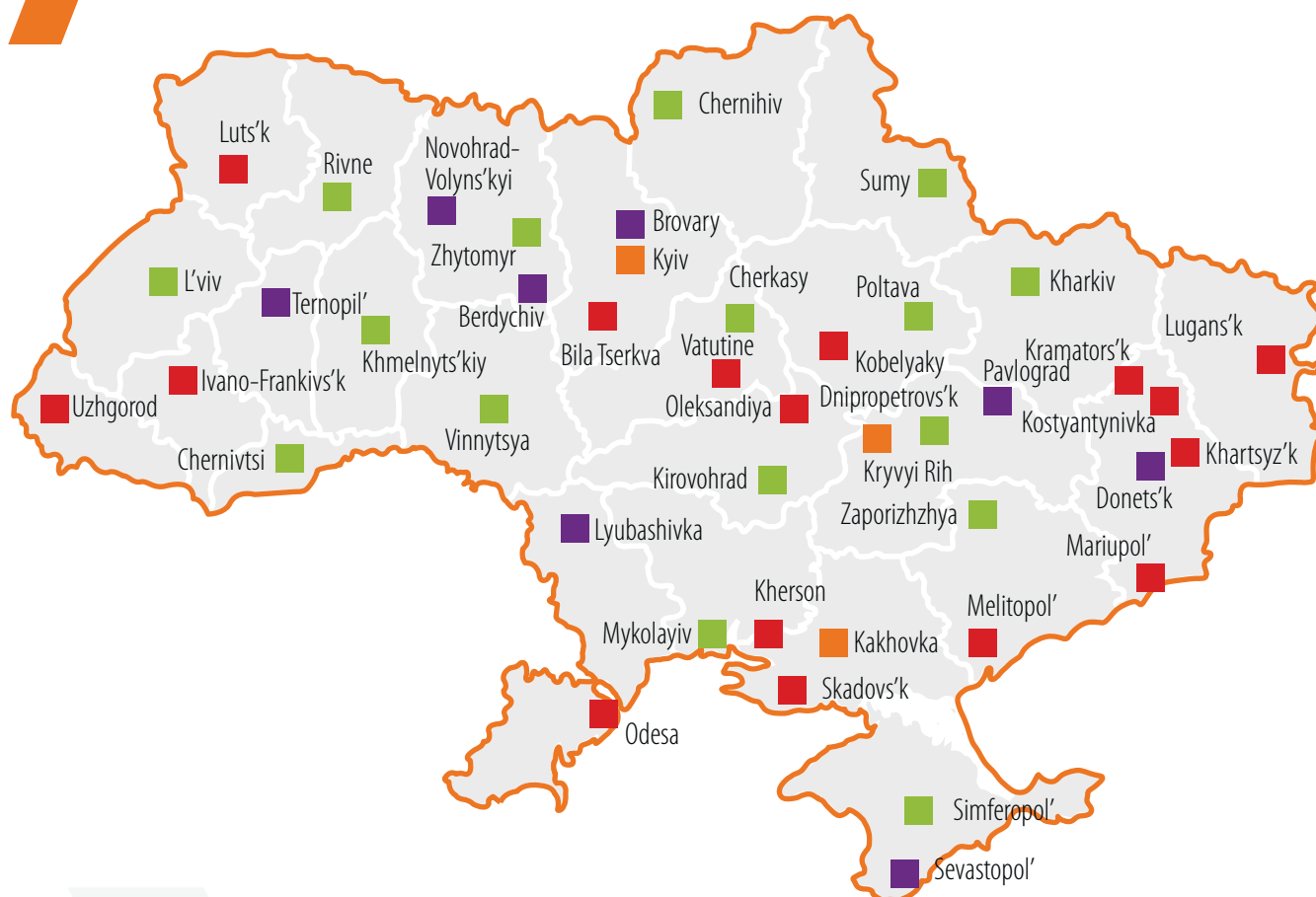
Regional Activities

Within the Program, advocacy of the rights of PLWH in the regions of Ukraine was conducted directly by regional representatives of the Network of PLWH. **The number of the organizational units of the Network grew from 23 to 43, with 8 regional representative offices being registered.** All the regions of Ukraine are covered with activities of the organization. During the period of Program implementation, geographical coverage of its work was increased by 50%.

At the beginning of the project

At the end of the project



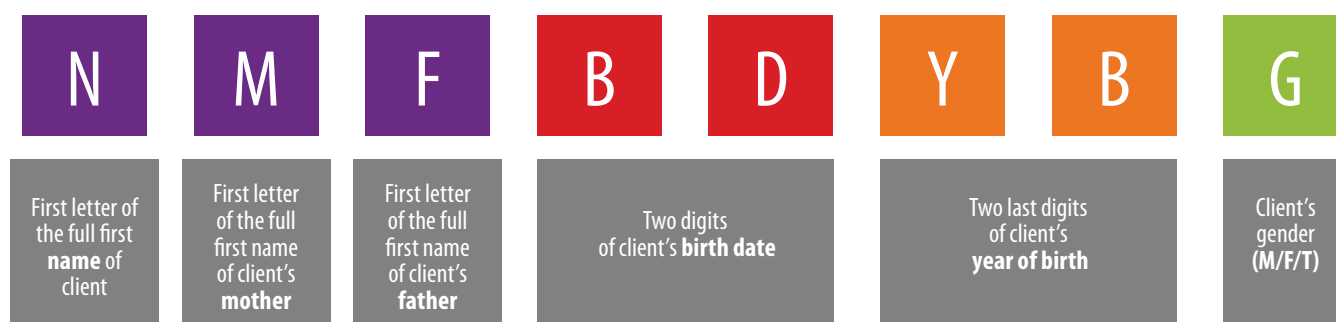


- 15 oblast branches 1 republican branch
- 3 city branches
- 8 regional representative offices
- 16 initiative groups

100% of regional Network representatives are members of oblast-, city- or district-level Coordination Councils for Countering HIV/AIDS Epidemic in Ukraine covering all regions.

Monitoring & Evaluation

Launching a Unified System of Client Registration



Starting from March 2011, more than 130 NGOs implementing HIV prevention projects among the most-at-risk populations began launching the Unified Coding System (UCS). As of the end of Round 6 Program implementation, 99.6% of clients having received services in the period of new system launch got new codes. The implementation of UCS reduces the probability of clients' double counting and increases data accuracy.

SyrEx Update

"In Ukraine, the International HIV/AIDS Alliance Ukraine (a civil society Principal Recipient) has used financing from the Global Fund to introduce a specially developed database to monitor the provision of HIV services to most-at-risk populations – using unique identifier codes to prevent the double-counting of individuals and enabling better assessments of service coverage. The software allows for real-time reporting to the Global Fund, and is used by more than 150 nongovernmental organizations in Ukraine (as well as groups from Belarus, Kazakhstan, Kyrgyzstan, Malaysia and Tajikistan)."

*Strategic Investments for Impact,
Global Fund Results Report 2012*

In the period of Round 6 Program implementation, a lot of efforts have been made to develop and update a new version of the SyrEx automated system to register clients and services delivered within HIV/AIDS prevention projects.

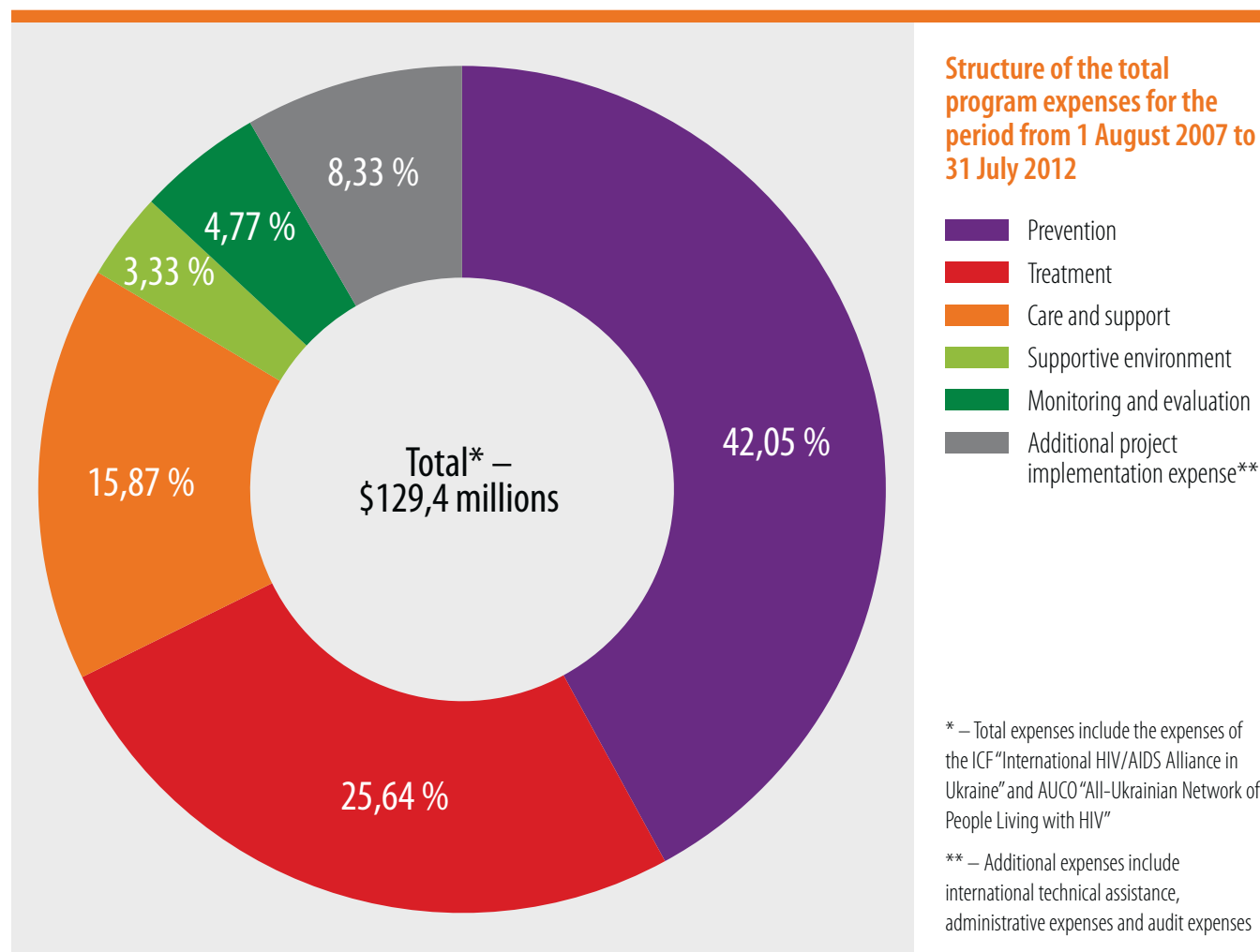
SyrEx Database – International Version

In 2010, SyrEx was adjusted to the needs of HIV prevention programs in the countries of Central Asia. Trainings were held on how to use the software. In 2011, an English version of SyrEx was developed for Malaysia. And in 2012 new versions were prepared for India and Kenya. Foreign colleagues were trained on how to work with the software and since the end of 2011 started using SyrEx in their projects.

"This software is really good. Our sub-recipients consider that it is easy even for a regular user and multifunctional (with regard to the registration of most-at-risk populations and services delivered, visits paid, etc.) We would like to thank your team for the work done..."

Elaine Wong (Senior Executive – Monitoring and Evaluation, Malaysian AIDS Council)

Financial Overview of the Program for the Period from 1 August 2007 to 31 July 2012



Structure of the Expenses of ICF “International HIV/AIDS Alliance in Ukraine” under the Program for the Period of 1 August 2007 to 31 July 2012

Principal programmatic goal	Services sphere	Planned expenses, USD thousand	Used funds, USD thousand	Fulfillment	Share
Prevention	Outreach work in PWID communities	37 310	36 515	97,87%	47,05%
	HIV/AIDS services in prisons	3 190	2 304	72,24%	2,97%
	Outreach work in FSW communities with focus on street FSW and FSW using drugs	12 324	11 056	89,71%	14,25%
	Outreach work in MSM communities	3 716	3 564	95,89%	4,59%
	Street children	991	990	99,94%	1,28%
Treatment	Substitution therapy	7 788	9 129	117,23%	11,76%
Supportive environment	Strengthening of civil society and organizational capacity building to provide due contribution to HIV epidemic response	1 240	1 180	95,15%	1,52%
Monitoring and evaluation	General monitoring and program evaluation	1 189	1 122	94,36%	1,45%
	Strengthening of the national M&E system	4 379	4 397	100,41%	5,67%
Additional project implementation expenses: international technical assistance. administrative expenses and audit expenses		7 832	7 353	93,88%	9,47%
Total		79 959	77 610	97,06%	100,00%

Structure of the program expenses of the AUCCO “All-Ukrainian Network of People Living with HIV” during the period from 1 August 2007 to 31 July 2012

Principal programmatic goal	Services sphere	Planned expenses. USD thousand	Used. USD thousand	Fulfillment	Частка
Treatment	Antiretroviral therapy and monitoring for the most vulnerable groups of clients	15 889	18 010	113,35%	34,75%
	Prevention and treatment of opportunistic infections	268	298	111,17%	0,58%
	TB/HIV co-infections	3 354	2 655	79,16%	5,12%
	Substitution therapy	2 816	3 100	110,07%	5,98%
Care and support	Home care within community	22 598	20 541	90,90%	39,63%
Supportive environment	Enhancement of HIV/AIDS coordination on the local level	1 620	1 253	77,33%	2,42%
	Strengthening of civil society and institutional capacity building for the appropriate contribution to HIV response	160	112	69,73%	0,22%
	Policy development and coordination	1 938	1 771	91,34%	3,42%
Monitoring and evaluation	General monitoring and program evaluation	919	657	71,51%	1,27%
Additional project implementation expenses: international technical assistance; administrative expenses; audit		3 997	3 436	85,95%	6,63%
Total		53 560	51 832	96,77%	100,00%

Дізнайтеся більше про нашу роботу:

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