

ANNUAL REPORT 2017





I am honored to present the report on the activities of Alliance for Public Health in 2017. This year Alliance – one of the biggest civil society organizations in Ukraine – successfully implemented national and international programs to fight HIV/AIDS, tuberculosis and hepatitis.

Thanks to the efforts of Alliance and its partner organizations aimed at the key populations vulnerable to HIV, over 300 thousand clients were covered with our programs. It became the determinant, which allowed curbing the epidemic in Ukraine. Our expertise was highly praised when establishing the Global HIV Prevention Coalition. Alliance works hard to achieve the global 90-90-90 targets, in particular through scaling up the access to HIV testing. In late 2017, Alliance in collaboration with the Network of PLWH launched the campaign “HIV is Invisible,

Get Tested and Save Life!” to promote a unique approach of self-testing. Any person could order and receive by post a free HIV self-test through the website www.selftest.org.ua. In 2017, Alliance was the first in Ukraine to introduce pre-exposure prophylaxis (PrEP) programs with support of CDC/PEPFAR and launch innovative programs for adolescents together with Elton John AIDS Foundation.

2017 was a special year for us as it gave start to the “transition period”: we began the handover of opioid substitution treatment program for over 10,000 patients to the government. Ten years ago, in a similar way Alliance handed over to the state the ART program to treat people living with HIV. Since then, there has been a huge scale-up of this program and we expect that it will be the same with the substitution treatment program, considering that the real demand is much higher – at least 50,000 patients are in need of OST.

It is planned that multidrug-resistant tuberculosis (MDR-TB) treatment will also be taken over by the state. In three years of MDR-TB treatment with the medicines procured by Alliance with support of the Global Fund, 15,028 patients were covered by the program. The same program allowed 9,400 patients with MDR-TB to receive psychosocial support at the outpatient treatment stage.

By implementing patient support programs, Alliance proved that the combination of medical, social and psychological support allows significantly increasing the efficiency of MDR-TB treatment and curing about 80% of patients. This is a very impressive result, considering that the average MDR-TB treatment success rate in Ukraine is less than 50%. Alliance also focused its efforts on early tuberculosis detection: in 2017, TB screening covered more than 160 thousand members of vulnerable populations, with 387 TB cases detected.

In 2017, Alliance continued providing modern hepatitis C treatment and scaled up the access to diagnostics: over 2,100 members of the key populations have already received treatment with innovative drugs – Sofosbuvir and Harvoni – in all regions of Ukraine, with 95% treatment success rate and 98% patient retention rate. In the recent years, with the latest drugs we were able to cure more patients than the government did, including 49 combatants who participated in the war conflict in the east of Ukraine. We gained the experience and developed the mechanisms highly praised by WHO, based on which Ukraine may prepare its Hepatitis C Elimination Plan.

The effective hepatitis C screening, diagnostics and treatment, first applied in the penal settings in Ukraine, may be used as the starting point of hepatitis C elimination among convicts.

We expanded our international activities, sharing the experience of Ukraine in the countries of Eastern Europe and Central Asia as well as in Africa and Asia. In 2017, we launched a regional project to fight HIV/ TB at the municipal level, which allowed us getting great results in just one year, such as introduction of the new models of work and significant increase of the municipal funding allocated.

We are grateful to all our partners, who were with us throughout this year and with whom we were able to achieve convincing results. Together we are turning the tide.

*Best regards,
Andriy Klepikov, Executive Director*

ABOUT THE ALLIANCE FOR PUBLIC HEALTH

The International Charitable Foundation “Alliance for Public Health” (hereinafter the “Alliance”) is a leading non-governmental professional organization which makes a significant impact on the epidemics of HIV/AIDS, tuberculosis, viral hepatitis, and other serious diseases in Ukraine in collaboration with key state partners and civil society organizations through providing financial and technical support to relevant programs covering over 314,000 members of the most vulnerable populations in Ukraine, which is the highest coverage in Europe.

Since being registered in Ukraine as an independent legal entity in 2003, and following the establishment of its own governing bodies in January 2009, the Alliance has shared the core values and remained a member of the global partnership of the International HIV/AIDS Alliance – an international charitable foundation, which unites 33 organizations from different countries.

The Alliance is the official co-implementer of the National Targeted Social Program to Fight HIV/AIDS in 2014-2018 approved by the Supreme Council of Ukraine on October 20, 2014.

Our Mission is to support community action against HIV/AIDS, to reduce the spread of HIV and related epidemics through disseminating effective services and approaches, strengthening health care systems and social services, and building the capacity of vulnerable communities.

Our Vision is of a world in which people do not die of AIDS, and where communities have brought HIV/AIDS under control.

THE ALLIANCE'S STRATEGIC OBJECTIVES FOR 2013–2020

1. INNOVATIONS

TO DEVELOP AND ROLL OUT EFFECTIVE MODELS OF RESPONDING TO THE EPIDEMIC OF HIV AND ASSOCIATED DISEASES IN UKRAINE AND WORLDWIDE.

3. POLICIES

TO MAKE AN IMPACT ON HEALTHCARE POLICIES IN ORDER TO ENSURE SUSTAINABLE ACCESS TO THE SERVICES, REDUCE STIGMA, AND PROTECT THE RIGHTS OF PEOPLE WHO ARE VULNERABLE TO HIV.

5. TECHNICAL ASSISTANCE

TO INTRODUCE AN EFFECTIVE SYSTEM OF TECHNICAL SUPPORT DELIVERY FOR THE DEVELOPMENT OF EFFECTIVE TECHNICAL APPROACHES IN RESPONDING TO THE EPIDEMIC OF HIV AND RELATED EPIDEMICS ALL OVER THE WORLD.

2. SERVICE ACCESSIBILITY

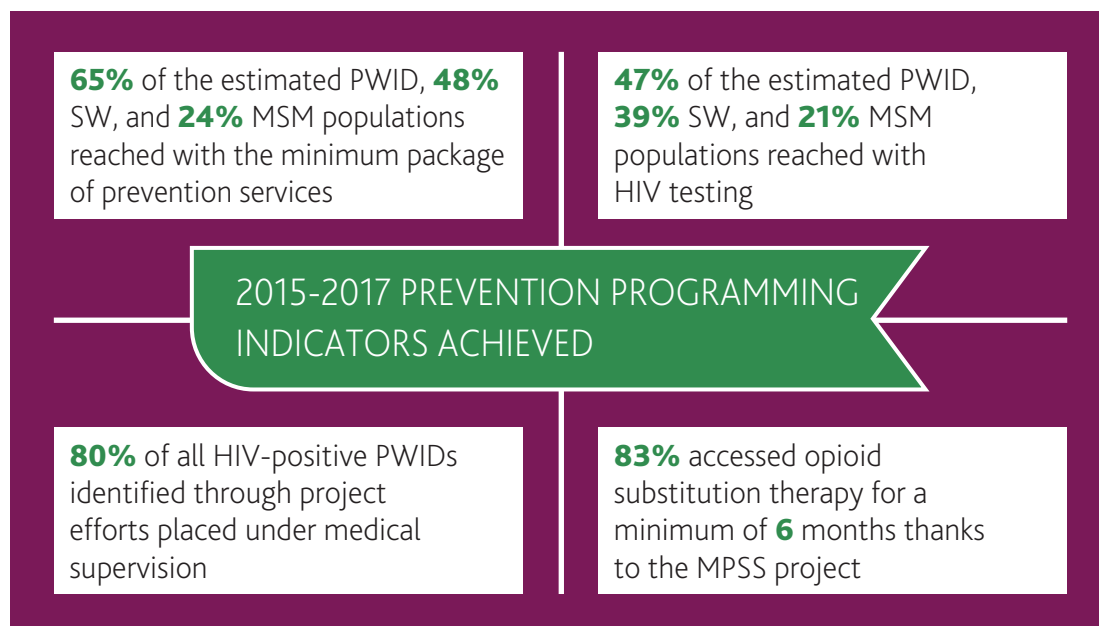
TO ENSURE UNIVERSAL ACCESS TO COMPREHENSIVE EVIDENCE-BASED SERVICES IN RESPONSE TO THE EPIDEMIC OF HIV AND CO-EPIDEMICS FOR VULNERABLE POPULATIONS IN UKRAINE.

4. COMMUNITIES

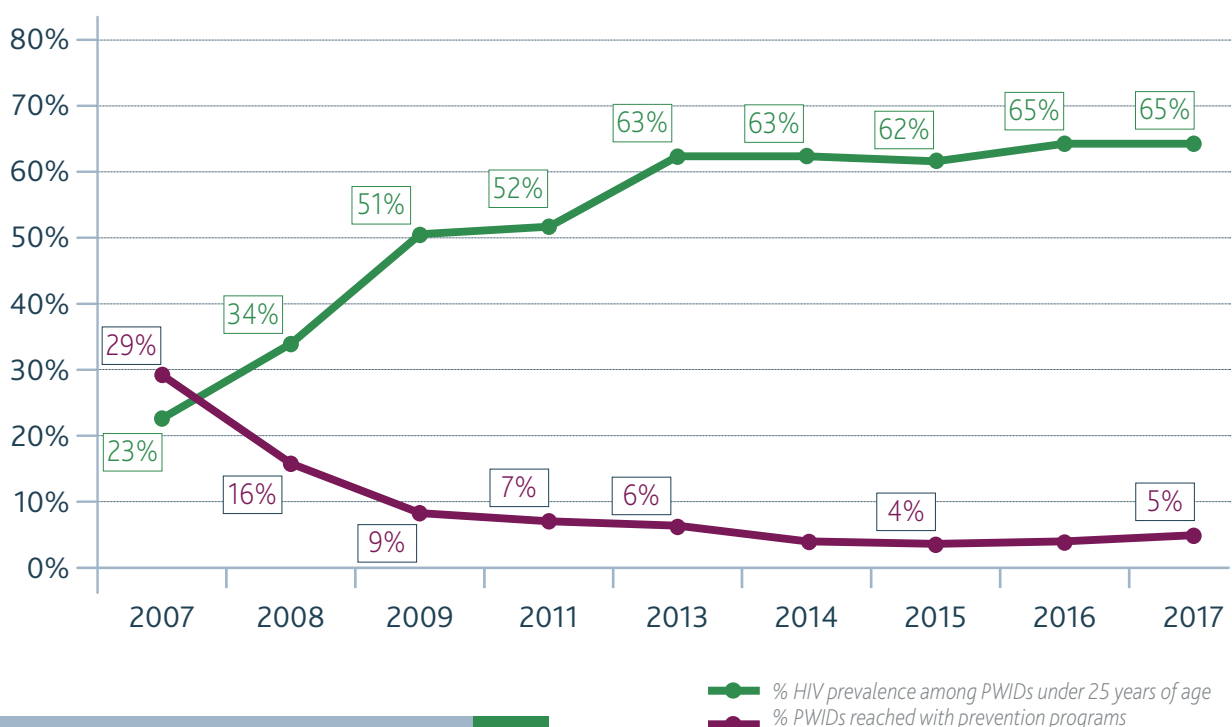
TO BUILD CAPACITY AND MOBILIZE COMMUNITIES TO ENSURE THEIR ACTIVE ENGAGEMENT AND MEANINGFUL INVOLVEMENT IN THE RESPONSE TO THE EPIDEMIC.

2017 KEY TRENDS IN ORGANIZATIONAL PERFORMANCE

- Substantial progress made towards achieving the **90-90-90** targets in Ukraine. In 2017, HIV prevention services were provided to 226,449 people who inject drugs, 38,742 people who engage in commercial sexual activity, and 42,881 men having sex with men

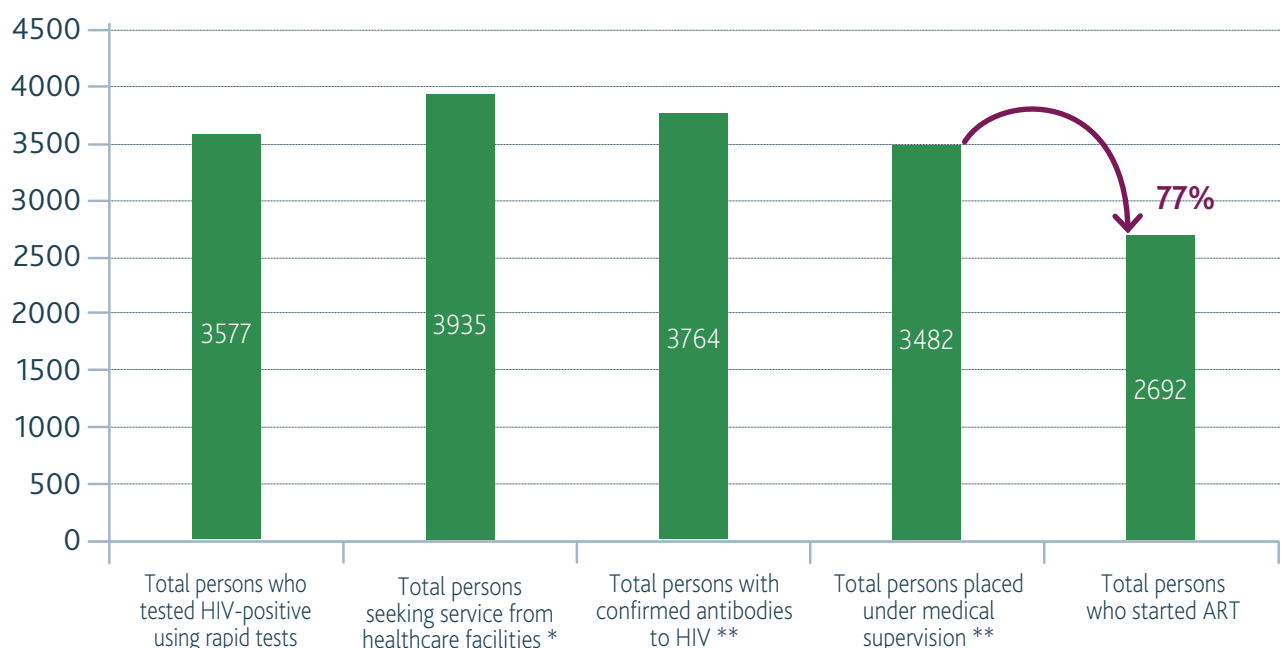


The epidemic among PWIDs continues on a downward trend.



- **The new approach to testing is working!** As compared to 2014, 2.4 times as many clients were served in 2017 thanks to assisted testing (**235,266**). There was a **30%** increase in the number of positive test results (**3,577**). The percentage of positive test results among new clients is **5** times as high as that recorded among “old” clients, which speaks for the effectiveness of the prevention strategies employed.
- **The opioid substitution therapy program expanded**, with a reach of over 10,000 patients, is now the largest program of its kind in Eastern Europe and Central Asia. Scaling up from “zero,” when it was serving a mere 100 patients, to an impressive 10,189 patients across 180 service sites nationwide, the Alliance is now taking steps for the program to be transitioned and handed over to the Ministry of Health. As of December 31, 2017, the first 11.5 percent patients had been handed over to Ukraine’s MoH.
- In 2015–2017, every patient with multidrug-resistant tuberculosis receiving treatment in Ukraine was treated with medications procured by the Alliance. The patient-oriented approach created the ability to **nearly double treatment success rates** – from 46% to 79%.
- **Successful treatment of patients with hepatitis C virus** has now become a reality! More than 2,000 patients from key populations were linked to treatment with innovative antivirals, i.e., Sofosbuvir and Harvoni. The test results for patients who have completed treatment (1,679 people) are astonishing – the virus was not identified in 95 percent of all patients tested! Treatment was provided to 50 ATO veterans, as well as 50 prison inmates.
- Having demonstrated good results, Ukraine has become an example for other countries who aspire to replicate our experience. In 2017, the Alliance supported ongoing projects across 15 countries, most of them located in Eastern Europe and Central Asia. In addition, the Alliance was involved in providing **technical and advisory support** in 24 countries.
- 2017 was a year of new project areas being embraced and new innovations implemented. The year saw the launch of pre-exposure prophylaxis (PrEP) delivery, self-testing, and the new program for transgender people, efforts to improve engagement with Ukrainian military service members and in the zone of conflict in Eastern Ukraine, as well as steps to scale up the response to TB/HIV as part of the Fast-Track Cities initiative.

Care and Treatment Cascade for Most-At-Risk Populations – Project Clients, 2017 Program Monitoring Data



* Including those who are no longer linked to healthcare facilities for follow-up & monitoring

** During or prior to the reporting period

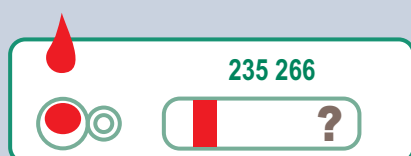
PROGRAMS FOR THE PREVENTION AND TREATMENT OF DISEASES THAT THREATEN PUBLIC HEALTH AMONG VULNERABLE POPULATIONS IN 2017

Prevention Service Coverage (Persons)



Testing for HIV and Other Serious Diseases That Affect Public Health

Total Persons from Most-At-Risk Populations Reached with Assisted TESTING USING RAPID HIV TESTS



Those who tested positive

3 577

The number of tests conducted in 2017 for sexually transmitted diseases and HCV infection was 117,344. 18,858 tests came back positive.

Information Resources

Total Copies of Brochures



218 000

Total Copies of Periodical Publications



Prevention Supplies Distributed

Condoms

16,26 million

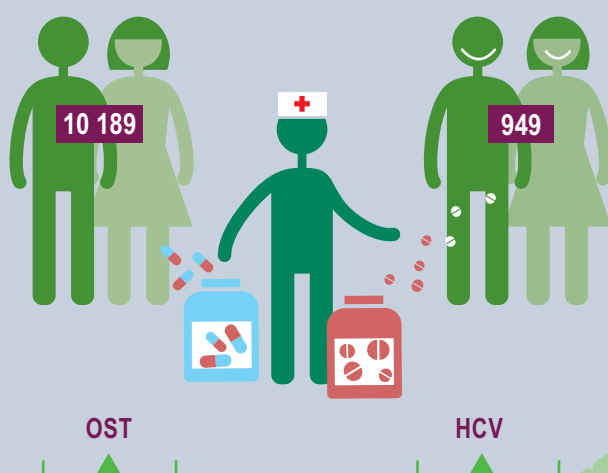
In 2017, 111 thousand condoms were delivered to the Ukrainian Ministry of Defense for preventing HIV/STIs among military service personnel

Syringes and Needles

29,07 million

Opioid Substitution Therapy

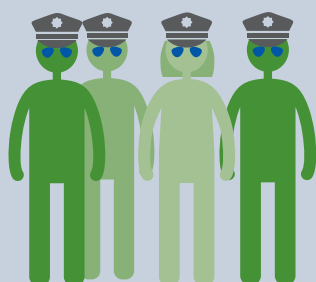
Hepatitis C Treatment



Treatment Efficacy > 95%

Trainings for Ukraine's National Police Force

30 Trainings



1 147
National
Police
Personnel
Trained

Treatment of Patients with MDR-TB *

2014-2017



9,420 persons reached
Treatment success
rates are up from 46%
to 79.3%
(among the 2014 cohort)

Early Detection of TB

165 784 persons screened for TB

*MDR-TB – Multi-Drug Resistant Tuberculosis

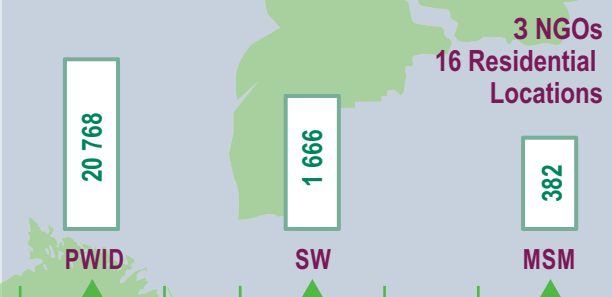
85% of those who
screened positive
underwent further
testing

386 new
TB cases
registered

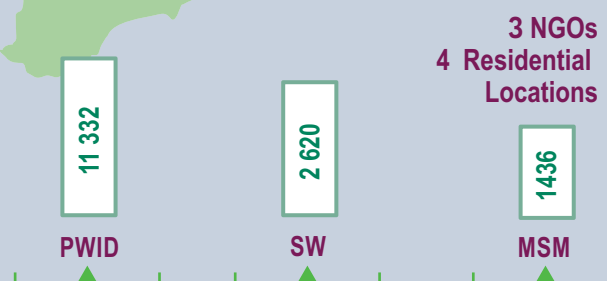
95%
started
treatment

Prevention in the ATO zone and AR Crimea

Persons Reached with Prevention Services



Prevention Services Provided in the Annexed AR Crimea



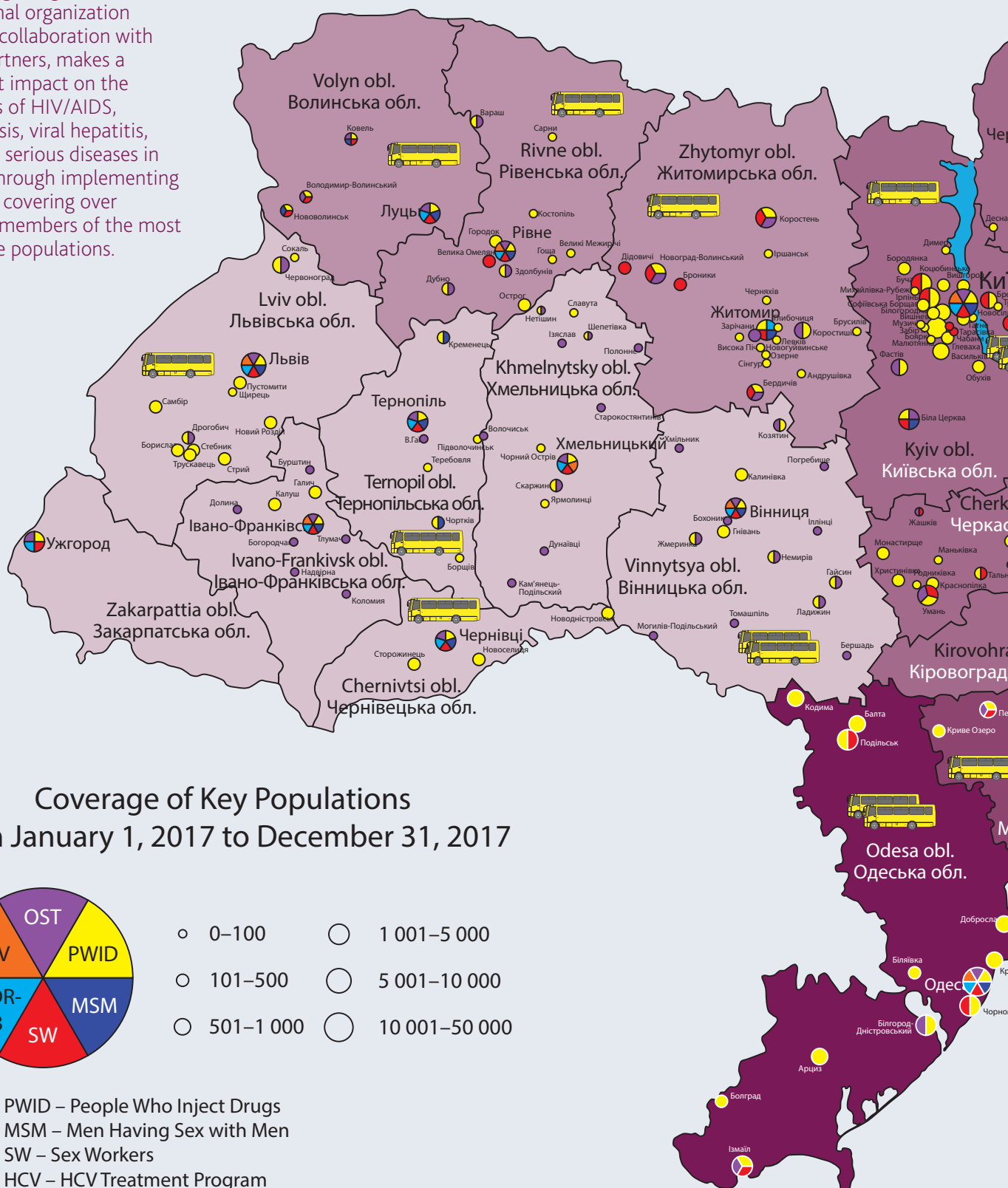
PWID — People Who Inject Drugs

SW — Sex Workers

MSM — Men Who Have Sex with Men

MAP OF PREVENTION SERVICES

The Alliance for Public Health is a leading nongovernmental professional organization which, in collaboration with its key partners, makes a significant impact on the epidemics of HIV/AIDS, tuberculosis, viral hepatitis, and other serious diseases in Ukraine through implementing programs covering over 300,000 members of the most vulnerable populations.





KEY PROGRAMS IMPLEMENTED BY THE ALLIANCE IN 2017



PROGRAM

Investing for Impact Against Tuberculosis and HIV



FINANCIAL SUPPORT:

The Global Fund to Fight AIDS, Tuberculosis and Malaria



KEY RECIPIENTS:

Ukrainian Center for Socially Dangerous Disease Control of the Ministry of Health of Ukraine, ICF "Alliance for Public Health," All-Ukrainian Network of People Living with HIV (All-Ukrainian Charitable Organization)



IMPLEMENTATION PERIOD:

2015–2017



THE ALLIANCE'S SHARE:

\$68,799,281

OBJECTIVES OF THE PROGRAM:

- To scale up and ensure equitable access to high-quality TB and HIV prevention, treatment, care and support with a focus on key populations most affected by the HIV and TB epidemics.
- To strengthen the health systems towards sustainable and integrated solutions for key populations mostly affected by the HIV and TB epidemics.
- To strengthen community systems that enable needs-based, cost-effective and integrated interventions for key populations mostly affected by the HIV and TB epidemics.

HIV PREVENTION AMONG VULNERABLE POPULATIONS

Typical Package of Services for All Target Groups:

- *Peer counseling.*
- *Distribution of awareness-raising materials.*
- *Distribution of male condoms and lubricants.*
- *Assisted testing for HIV.*
- *TB screening surveys.*
- *Referral to OST.*
- *Referral and support in seeking care from service providers to receive diagnostic testing and treatment for HIV, TB, and STIs.*

Delivering service at a time and location of the client's convenience:

- *Street outreach.*
- *Street-based and stationary sites.*
- *Mobile clinics.*
- *Inspectorate for criminal offenses and penalties.*
- *Pharmacies.*
- *Secondary exchange.*





PREVENTION AMONG PEOPLE WHO INJECT DRUGS (PWID)

Standard Package of Services for PWID:

- *Distribution and exchange of syringes.*
- *Distribution of alcohol wipes.*
- *Distribution of antiseptics.*
- *Assisted testing for HCV.*
- *Counseling on overdose prevention and response, safer injecting behavior, etc.*

KEY ACHIEVEMENTS IN 2017:

- Technical and financial support delivered to **61 community-based organizations**, which provided people who inject drugs with access to prevention services.
- **226,469 PWID** (65 percent of the estimated population) reached with the minimum package of services, which exceeded the planned achievement level by 17%.
- Programming activities extended all over Ukraine, including AR Crimea, and the areas of the Donetsk and Luhansk regions outside the control of the Ukrainian Government.
- **29,071,944 syringes and needles** distributed.
- **164,140 PWID** screened for HIV using rapid tests, with **3,003** of them testing positive. **2,261 PWID registered for medical monitoring and follow-up**, and **2,389 – started on ART**.
- **90,755 tests performed for sexually transmitted infections** (STIs), and HCV, with **17,958** of them coming back positive.
- **17,669 PWID** reached with the minimum package of prevention services via 87 pharmacy sites (7.8 percent of the entire population covered).
- **110,721 TB screening sessions** conducted among PWID for early TB detection, with **7,333** identified as TB-positive based on the survey responses; **5,415** persons sought testing, **157** had their TB diagnoses confirmed, **139** started treatment (89% of those with a confirmed diagnosis of TB).
- **1,374,883 counseling sessions** conducted by social and medical workers.





PREVENTION AMONG SEX WORKERS (SW)

Standard Package of Services for SW:

- *Assisted testing for HBV.*
- *Assisted testing for syphilis.*
- *Testing for chlamydia.*
- *Testing for gonorrhea.*
- *Counseling with a focus on evaluating client health status and needs associated with sex work, providing information on safe sexual behaviors and effective ways to prevent the transmission of HIV and STIs, etc.*



KEY ACHIEVEMENTS IN 2017:

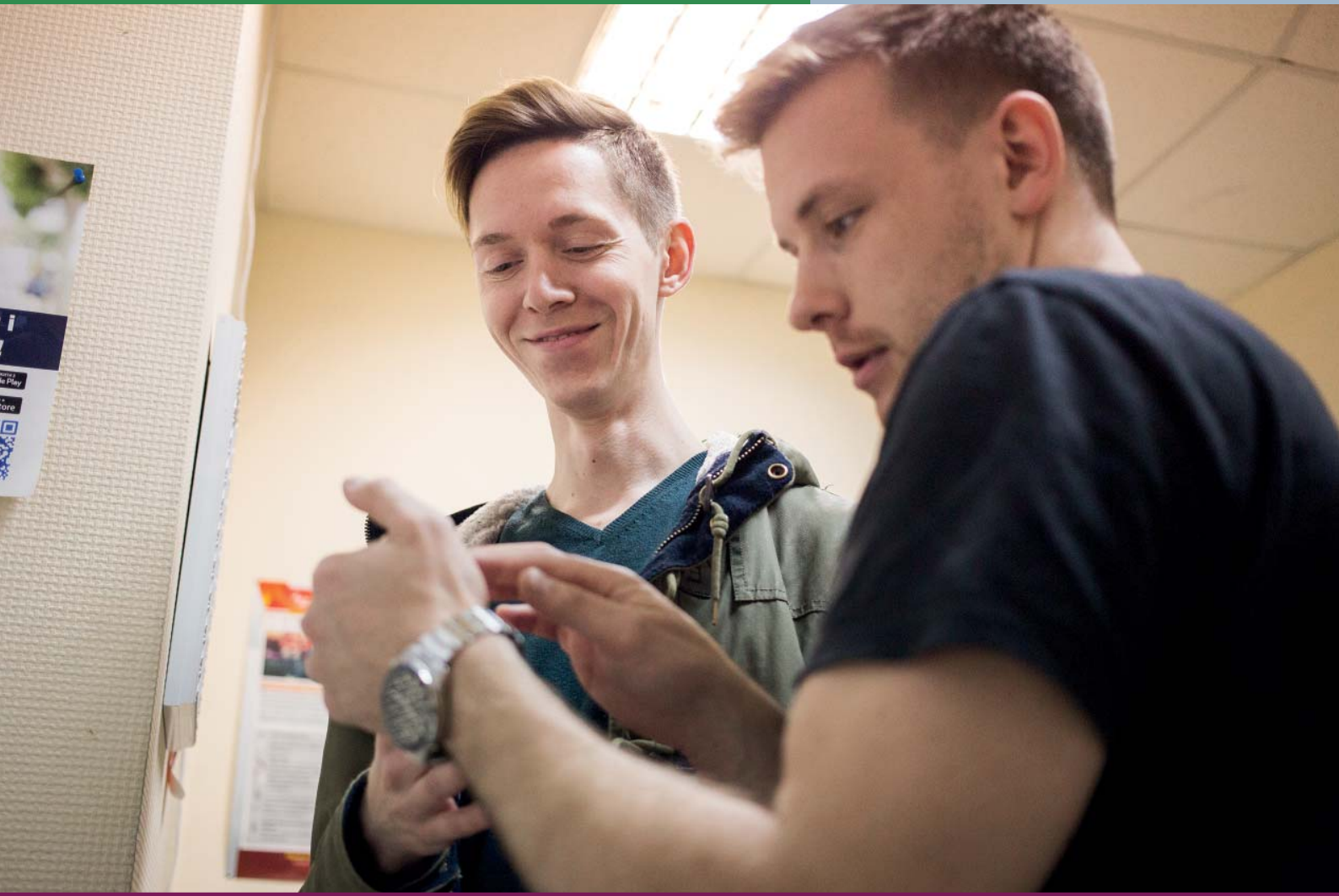
- **38,742 SW** reached with the minimum package of prevention services, which accounts for 48% of the estimated population of SW. The planned target is exceeded by 13.4%.
- **7,682,148 male condoms distributed**, as well as **1,325 female condoms**.
- **31,572 SW** screened for HIV using rapid tests, with **198** clients receiving positive results. **110 SW were registered for medical monitoring and follow-up**, and **68 started on ART**.
- Access to STI diagnostic testing provided and **17,287 tests** conducted, **764** of them coming back positive.
- **17,742 TB screening sessions** conducted among SW for early TB detection, with **582** identified as TB-positive based on the survey responses; **439** persons sought testing, **6** had their TB diagnoses confirmed, **4** started treatment (67% of those with a confirmed diagnosis of TB).
- **177,089 counseling sessions** conducted by social and medical workers.

PREVENTION AMONG MEN HAVING SEX WITH MEN (MSM)

Standard Package of Services for MSM:

- *Assisted testing for HBV.*
- *Assisted testing for syphilis.*
- *Testing for chlamydia.*
- *Testing for gonorrhea.*
- *Counseling with a focus on safe sexual behaviors, effective ways to prevent the transmission of HIV and STIs, etc.*





KEY ACHIEVEMENTS IN 2017:

- **42,881 MSM** reached with the minimum package of prevention services, which accounts for **24%** of the estimated population of MSM. Target achievement level – **102%**.
- **3,805,833 male condoms**, as well as **402 female condoms** distributed.
- **38,245 MSM** screened for HIV using rapid tests, with 350 receiving positive results. **267 MSM** were registered for medical monitoring and follow-up, and **223 started on ART**.
- Access to diagnostic testing for STIs provided and **8,384 tests** conducted, with **103** clients receiving positive results.
- **24,376 TB screening sessions** conducted among SW for early TB detection, with **56** positive test results based on the survey responses; **41** persons sought testing, **5** had their TB diagnoses confirmed, **5** started treatment (100% of those with a confirmed diagnosis of TB).
- **132,551 counseling sessions** conducted by social and medical workers.

MOBILE CLINICS

Mobile clinics continue to expand the geographical reach of the prevention programs and create the ability to serve project clients living in rural areas, delivering counseling and assisted testing for HIV and STIs at night and in bad weather.

KEY ACHIEVEMENTS IN 2017:

- 32 mobile clinics operating on an ongoing basis across 23 regions of Ukraine.
- Clients reached with the minimum package of prevention services:
 - **33 496 PWID** (15 percent of the entire PWID population covered);
 - **10 790 SW** (28 percent of the entire SW population covered);
 - **1 679 MSM** (4 percent of the entire MSM population covered).



TREATMENT OF HCV INFECTION

As part of the Global Fund program, in collaboration with the Ministry of Justice of Ukraine, the Alliance made arrangements for rapid testing to be conducted in medical facilities and institutions affiliated with the State Criminal Enforcement Service of Ukraine, with further laboratory diagnostic testing and HCV treatment for inmates.



ESTIMATED BUDGET:
~ \$ 250,000

1,000 rapid test kits were delivered to the healthcare facilities under the oversight of the State Criminal Enforcement Service of Ukraine for HCV screening. Positive test results were found in 74 percent of the cases.

The Alliance made laboratory testing arrangements for 139 inmates. 50 HIV-positive inmates started HCV treatment.





OPIOID SUBSTITUTION THERAPY

The OST program in Ukraine is the largest program of its kind among Eastern European countries:

- As of December 31, 2017, more than a third of all patients were receiving OST drugs through an alternative service delivery model, i.e., the practice based on a few days' take-home supply of medication dispensed to the patient for unsupervised self-administration (by prescription, directly from a healthcare institution, at home).
- In October 2017, the process of transition from donor to government funding for OST medications was initiated. As of December 31, 2017, 1,159 patients were accessing government-funded OST.

The Goal of the Component:

To ensure improved PWID access to OST, medical and psychosocial support (MPSS) for OST patients with case management and integrated services (testing and treatment for HIV, TB, viral hepatitis, etc.), to facilitate patient retention and social reintegration.

Implementing Partner:

State Institution "Public Health Center of the Ministry of Health of Ukraine".

KEY ACHIEVEMENTS IN 2017:

- As of January 1, 2018, OST was accessed by **10,189 patients** (1,075 – using buprenorphine-based drugs, 213 – liquid methadone, 8,901 – methadone-based drugs in tablet form). The number of patients increased by 975 persons compared to the previous year.
- Among this group of OST patients, based on test results, **4,227** persons (41.48%) are HIV-positive, **5,799** (56.91%) have HCV, **1,364** (13.39%) have HBV, **1,619** (15.89%) have TB.
- OST patients received services across **180** sites operating out of mental health and addiction treatment centers, AIDS centers, TB treatment centers, infectious disease clinics, municipal and district hospitals, as well as primary health care institutions.
- Medical and psychosocial support projects for OST patients successfully completed through **27 NGOs**.
- OST take-home drugs dispensed for unsupervised self-administration by patients in **24 regions** (six new ones added over the year). The percentage of OST patients increased from 23.3% to 36.1%.
- The patient retention percentage in OST programs increased by **5.65%**. The share of patients on opioid substitution therapy for a minimum of 6 months per cohort was 77.2 percent as of January 1, 2017, versus 82.85 percent as of January 1, 2018.
- The percentage of HIV-positive OST patients on ART increased due to case management **from 70.4%** (as of January 1, 2017) **to 80.4%** (as of January 1, 2018).
- OST drugs purchased through government funding and accessed by **1,159** patients as of the end of 2017.

RESULTS-BASED FUNDING FOR OPIOID SUBSTITUTION THERAPY IN UKRAINE

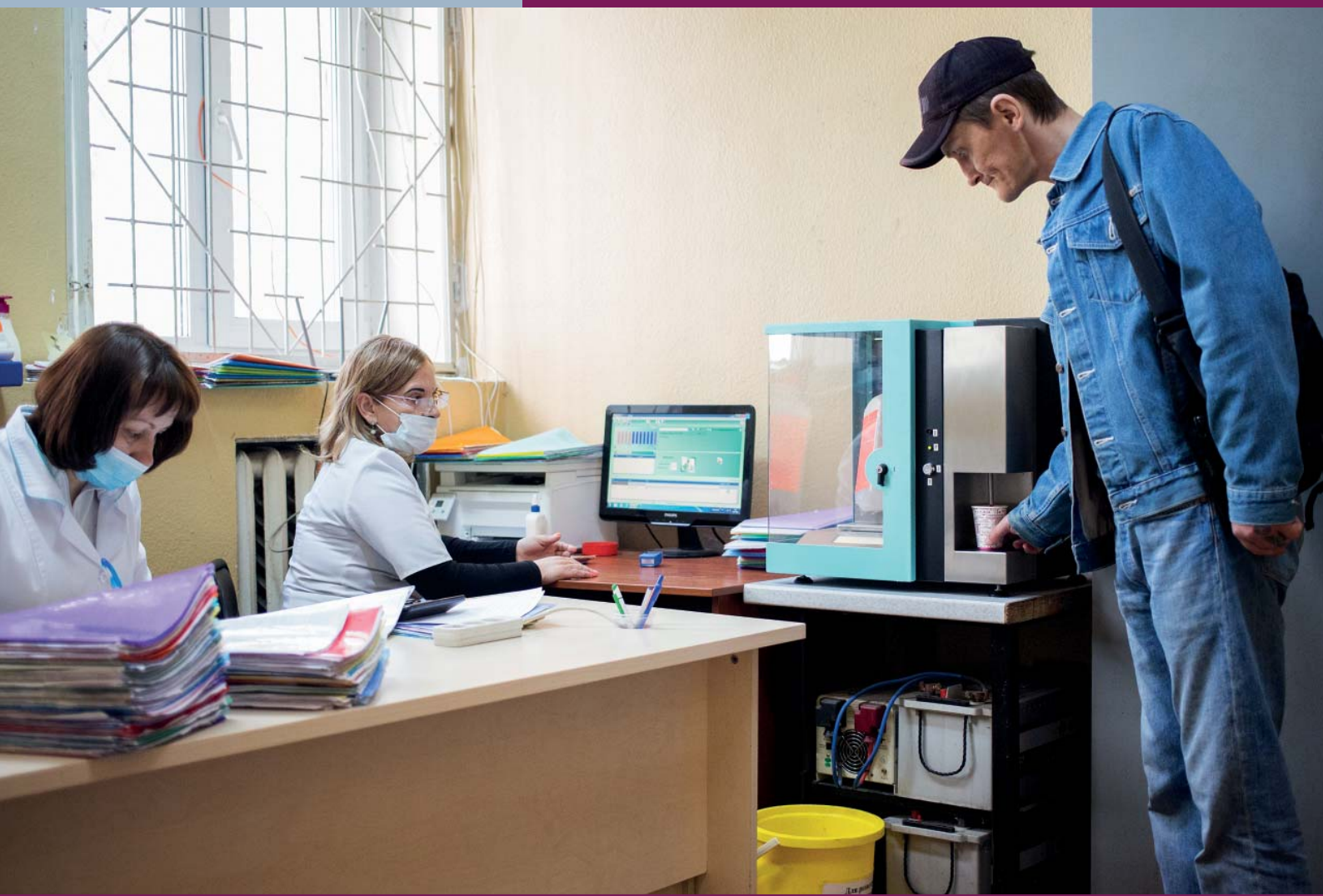


IMPLEMENTATION
PERIOD:
April 1, 2016 –
December 31, 2017

The Goal of the Component:

To transition to a new funding model for OST-dispensing healthcare facilities based on OST sustainability outcomes while drawing upon other funding sources after 2017 (excluding the Global Fund to fight AIDS, Tuberculosis and Malaria), to create an environment that facilitates OST expansion and quality service delivery.

The model was adopted by four state-owned healthcare institutions and the *Alternativa* private clinic. Funding based on results achieved was received directly by project healthcare facilities, in which management made their own decisions on how to best distribute and spend funds. This strategy served as an incentive for healthcare providers to increase OST patient numbers and improve service quality.



KEY ACHIEVEMENTS IN 2017:

- The planned performance targets for the number of patients receiving OST through the new model of funding exceeded (**plan: 1,216 patients, fact: 1,376 patients**).
- The number of patients seeking service from the sites using this model increased by **35 percent**, while the similar figure for patients accessing MPSS from the sites which rely upon the traditional model increased by **15 percent**.
- The number of persons receiving OST for a minimum of six months from the service sites using the new model increased by **12 percent**, whereas the similar metric for the service sites offering MPSS showed a **1 percent increase**.
- The number of HIV-positive persons receiving OST using the new model increased by **23.9 percent**, whereas the similar indicator for the MPSS sites was up **17.3 percent**.



National OST and Substance Abuse Hotline

KEY ACHIEVEMENTS IN 2017:

- **2,742 calls** received, the most common reasons for calls being:
 - contact information for OST sites, access to medication by prescription or directly from healthcare facilities;
 - organization of home-based care;
 - administrative discharge of patients;
 - access to OST drugs in pre-trial/temporary detention centers;
 - prevention of substance abuse and information about accessible rehabilitation centers;
 - hepatitis C prevention and treatment.
- **222 new strategic OST** cases were opened upon request, with positive resolution of **184 cases** (83%). To resolve the cases, open letters were sent to the General Prosecutor's Office of Ukraine, the Office of the Ombudsman, top-ranking officers of the Ministry of Health, the Ministry of the Interior, the National Police, Heads of Regional Divisions of the State Penitentiary Service of Ukraine, and other parties to conflicts. Key problems here include:
 - access to OST drugs in pre-trial detention centers;
 - preventing police interference with the operation of OST dispensing sites;
 - reentry into the OST program;
 - assistance in obtaining OST drugs in hospitals.

AWARENESS-RAISING AND EDUCATIONAL ACTIVITIES WITH THE NATIONAL POLICE FORCE

- With support from the Human Rights Department of the National Police, more than **30 workshops / trainings** were delivered in **11 regions for 1,147 law enforcement personnel**. They were focused on interaction between the police and community-based organizations when implementing prevention and treatment programs against diseases considered to be a threat to public health, domestic and international experience in harm reduction, as well as personal safety rules for reducing infection risks in the workplace. The main topics under discussion were human rights issues, in particular, how to ensure continuous service delivery (for OST, ART, TB, etc.) for detained and incarcerated individuals, as well as finding ways to address related concerns.
- It was the first time in Ukraine that information-sharing and educational efforts **targeted at the police force** were accompanied by voluntary **assisted self-testing** for HIV and HCV in the immediate workplace environment.



A JOINT COMMEMORATIVE ACTIVITY WITH PATROL POLICE OFFICERS TO HONOR WORLD AIDS DAY

On December 1, 2017, which is World AIDS Day, for the first time ever in Ukrainian history, the Kyiv patrol police officers pinned on their red ribbons as an awareness symbol as they came on duty and voluntarily took the anonymous HIV and HCV test in specially equipped vehicles serving as mobile clinics.

Co-organizers of the event were the Department of Patrol Police in Kyiv and ICF "Alliance for Public Health," with the participation of NGO Convictus-Ukraine and NGO Eney Club.

"Our mission is to ensure public safety! And public safety begins with the individual safety of patrol police personnel, who tend to encounter serious risks on street duty on a daily basis, that including diseases that endanger public health, such as TB, viral hepatitis, HIV infection. Today, we're setting an example by our own behavior demonstrating to our fellow citizens how important it is to care for your own personal safety and protection. The first step is to undergo the simple and painless rapid test for HIV and HCV. We care about the health and safety of our patrol officers who are out there to protect public safety and health!" said Oleksiy Beloshytskyi, First Deputy Chief of the Department of Patrol Police of Ukraine, during a press briefing.



"We are launching the media education campaign today in Ukraine. The event is held under the slogan "HIV is dangerous as long as you don't know about it!" and it's symbolic that it's Kyiv patrol police officers who are the first among Ukrainian law enforcement personnel wearing the red ribbons and taking rapid HIV tests. After all, every tenth case of 15,000 new infections registered this year was recorded in Kyiv. We at the Alliance appreciate the willingness and preparedness of Patrol Police Senior Leadership to participate in events such as this and we hope that our fruitful collaboration will continue in the future!" said Andriy Klepikov, Executive Director at Alliance for Public Health, in his address to the public in attendance.

During this awareness campaign, each patrol team received special notebooks and pads for drawing up their working documents, which also contain useful reference information about governmental and non-governmental services working to prevent HIV and other diseases that endanger public health. Working with HIV-vulnerable populations, such as people who inject drugs and sex workers, the Alliance has repeatedly witnessed prejudiced attitudes towards them from law enforcement officers, as well as a variety of other problems often arising from a lack of accurate information and contacts. Throughout the past year, the Alliance's employees held dozens of workshops for the staff of the National Police focusing on the promotion and protection of the human rights and interests of key populations and the current regulatory framework governing this area. From now on, every crew of patrol police will have on hand phone numbers for HIV, TB, and OST hotlines, as well as contact information for civil society organizations and social services working with vulnerable populations. This will facilitate the work of patrol police officers and speed up the problem resolution process when they are on duty.





THE ALLIANCE'S EFFORTS IN THE AREAS OF MILITARY OPERATIONS

Since the first days following the annexation of Crimea and the launch of the anti-terrorist operation in the eastern part of the country, as one of its priority activities, the Alliance has supported programs for the prevention and treatment of HIV, TB, viral hepatitis, and those intended to support patients on opioid substitution therapy. The political factors notwithstanding, the Alliance is pursuing purely humanitarian objectives, i.e., to provide maximum support to those who have already received treatment or prevention services, to ensure, whenever possible, the continuity of these services, as well as to deliver support to those clients who need it the most. In terms of the capability to implement comprehensive measures for the prevention and treatment of HIV, TB and hepatitis in Eastern Ukraine, in 2017 the situation has somewhat stabilized, but it continues to remain tense.

- In the areas of the Donetsk and Luhansk regions outside the control of the Ukrainian Government, support was provided to 6 NGOs with projects across 16 residential locations.
- In 2017, prevention services for key populations reached:
 - **20 768 PWID;**
 - **1 666 SW;**
 - **382 MSM.**
- Project monitoring, as well as continuous data control and verification were provided using the SYREX online database.
- The region was provided with all necessary consumable supplies (*syringes, alcohol wipes, condoms, lubricants, rapid test kits*), thus enabling project clients to access the minimum package of services.
- Collaboration with Ukraine's Ministry of Defense continues.
- Using funding provided by the GF, **72,040 rapid test kits for HIV / HCV / syphilis** were purchased to test military service members in 2018.

In 2017, the Alliance delivered **111,000 condoms** (USAID) to the Ministry of Defense to ensure HIV prevention among army troops

PROJECT ACTIVITIES IN THE ANNEXED CRIMEA

There are three partner organizations in Crimea that continue to deliver services related to HIV and STI prevention, as well as early TB detection in the most vulnerable populations: CF "Nadiya ta Poriatunok," NGO "Youth Center for Women's Initiatives," and NGO "Tvoia Peremoha."

- The three NGOs were focused on delivering prevention projects **in four cities: Bakhchisarai, Feodosiya, Simferopol, Sevastopol.**
- In 2017, prevention services for key populations reached:
 - **11 332 PWID;**
 - **2 620 SW;**
 - **1 436 MSM.**
- **Monitoring visits are made to three sub-recipients from Crimea** to provide technical assistance and facilitate improved project performance.
- The procurement of consumables (syringes, rapid test kits, condoms, etc.) is facilitated by monitoring and technical support from the Alliance. These efforts embraced technical and expert assistance, service monitoring and quality assessment, as well as verification of data received from the NGOs on the implementation of prevention projects in the Crimean peninsula.
- Two **brand-new mobile clinics** were purchased to provide project clients with prevention services in Simferopol and Sevastopol. In turn, two Crimean mobile clinics (with Ukrainian registration plates) were handed over to NGOs located in Ivano-Frankivsk and Vinnytsia.



PROJECT

M&E-Related Technical Assistance and Improved Data Application in HIV (METIDA)



FINANCIAL SUPPORT:
U.S. Centers for Disease Control and Prevention, pursuant to the U.S. President's Emergency Plan For AIDS Relief (PEPFAR)



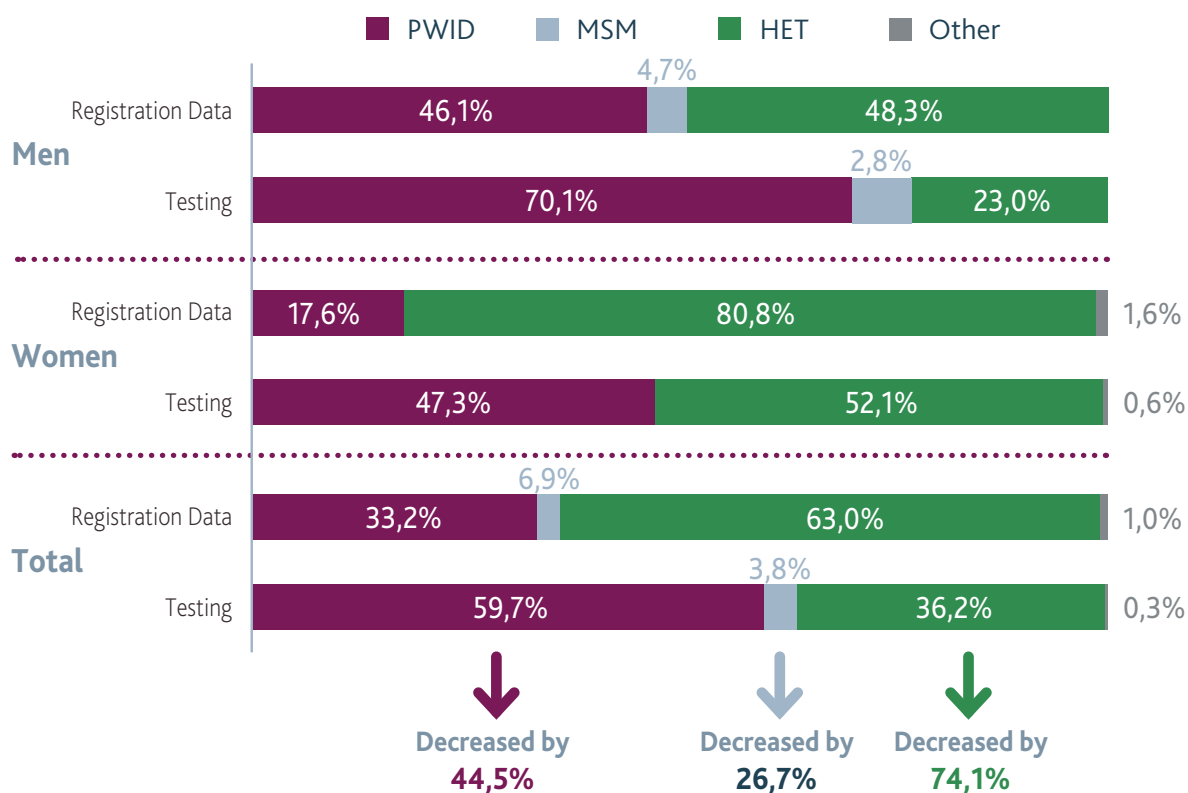
IMPLEMENTATION PERIOD:
September 30, 2012 – March 31, 2018



ESTIMATED BUDGET:
\$7,499,769



Percentage of Misclassified Cases Based on Behavioral Data Analysis and HCV Test Results



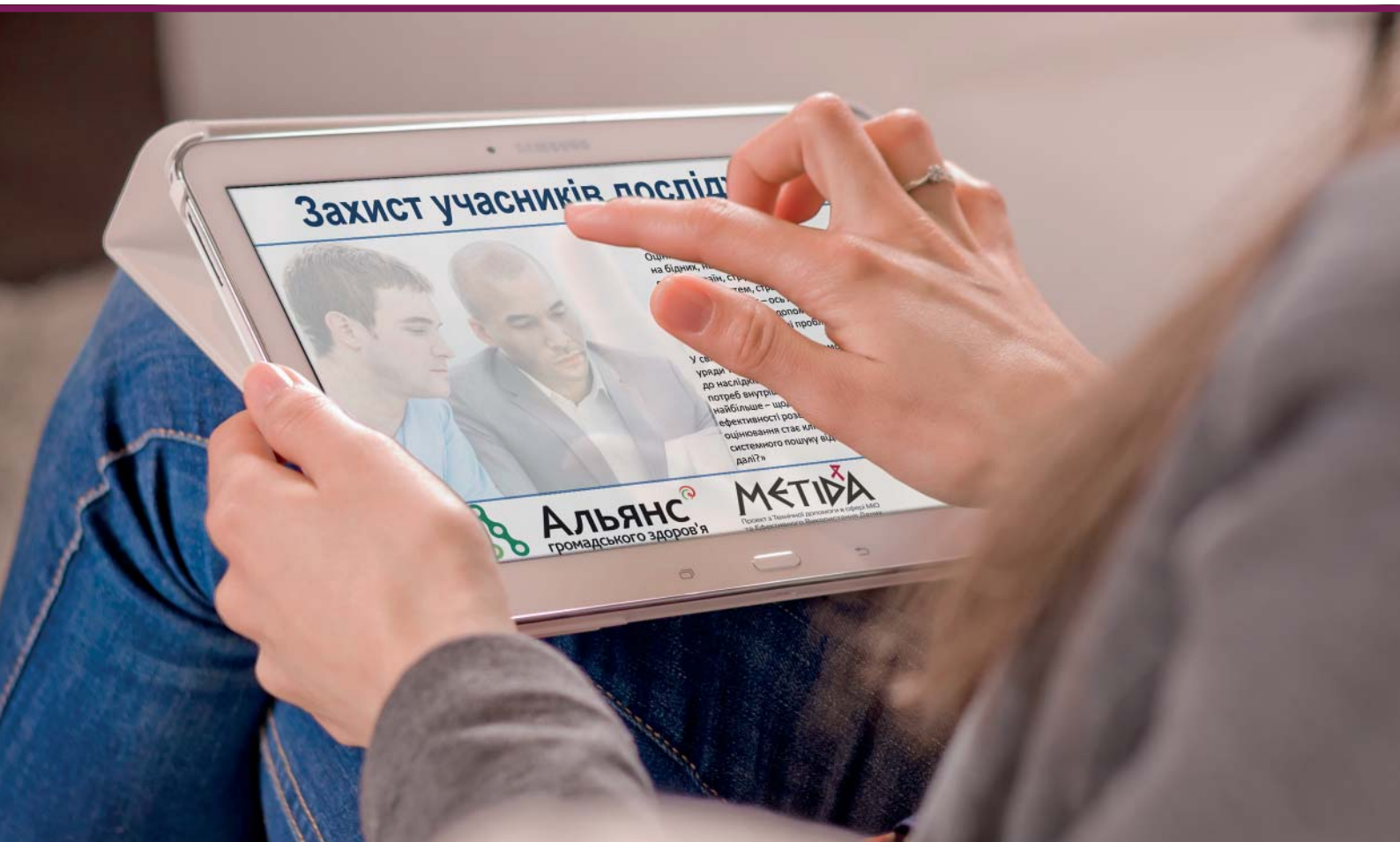
The Goal of the Project:

To improve HIV/AIDS-related evidence-based decision-making in Ukraine by means of strengthening collaboration among key partners, building M&E capacity of professional staff and decision makers, as well as identifying data collection, project resource management, key partnership and strategic information gaps with a view to filling key national and regional needs.

KEY ACHIEVEMENTS IN 2017:

- A multi-year study, unique for Ukraine, completed, i.e., **Evaluation of Officially Registered Routes of HIV Transmission in Ukraine**. The findings confirm that, based on new evidence, official data on ways of HIV transmission in Ukraine need to be reassessed and verified for accuracy, as the share of parenteral transmissions remains high, even though a significant decrease is observed among women and in the younger age group. Evidence shows that there has been a shift in the predominant mode of HIV transmission from intravenous to heterosexual contact, especially among young women (probably through sexual contact with PWID). The share of MSM in all new cases is on the rise, having doubled from 2013 to 2015.

- The seventh wave of the largest-scale research project in the region, i.e., **Integrated Bio-Behavioral Survey Among Key Groups in Ukraine**, organized and held in 32 largest Ukrainian cities, focusing on behavioral practices, as well as HIV incidence and prevalence. This year, as part of the research efforts, several innovations were also implemented, specifically, HIV testing based on an expanded testing algorithm recommended by WHO, using rapid test kits, and an expanded laboratory component to collect viral load data for all HIV-positive project participants. Only over the two weeks following completion of the fieldwork among PWID, more than a third of referred project participants (38%) made contact with local AIDS centers.
- With a view to **building and strengthening M&E and HIV research capacity of professional staff**, a series of training activities were held: such as the Train-the-Trainer event on evaluating the effectiveness of regional programs (in collaboration with the School of Medicine, University of Zagreb), Data Visualization and Presentation Training (in collaboration with the University of California, San Francisco), training on preparing scientific papers based on research findings (in collaboration with the University of California, San Francisco and the School of Medicine, University of Zagreb), Workshop on RDS-A (in collaboration with CDC, Atlanta), How to Use R Software for Data Analysis in Public Health, The Training Workshop on SPECTRUM Software Modeling (in collaboration with UNAIDS, Geneva).
- In collaboration with the World Bank's project "**Serving People, Improving Health**," training in M&E key principles was provided for healthcare system professionals to mainstream evidence-based medicine into healthcare system management and change management practices.





- Summer School on Monitoring and Evaluation was held in July 2017 for college and university instructors to improve the quality of training courses and individual study modules on the monitoring and evaluation of social programs and projects.
- The scope of activity of regional M&E centers expanded: all regions are provided with technical support in data quality evaluation, preparation of regional information bulletins, collection and posting of epidemiological data on the National Strategic Information Portal (<http://hiv.phc.org.ua/nationalportal/>).
- The results of research and evaluation for study projects that were carried out during 2017 by the METIDA project team presented at the 16th European AIDS Conference in Milan and the 2nd World Hepatitis Summit in Sao Paulo.
- The performance of regional targeted social programs to fight HIV/AIDS were assessed during the reporting year. The purpose of this activity is to evaluate the region's response to the HIV / AIDS epidemic and provide recommendations on establishing new regional and national HIV/AIDS programs. The assessment embraced an analysis of the impact of regional efforts on the HIV epidemic, a cascade analysis, and performance evaluation based on five WHO's metrics (HIV testing services, ART, prevention for PWID, SW, MSM). The results of the assessment will be used in developing the concept of a new national (program) response to the HIV/AIDS epidemic for 2019-2023.

PROJECT

Capacity Development for Quality Assured Gender-Sensitive Harm Reduction Interventions in Ukraine



FINANCIAL SUPPORT:
Expertise
France Initiative 5%.



IMPLEMENTATION
PERIOD:
March 15, 2015 –
March 14, 2018



ESTIMATED
BUDGET:
€997,548

The Goal of the Project:

To increase the access of women who inject drugs and their sexual partners to quality HIV/STI prevention services through gender mainstreaming.

Key Project Objectives:

- Design and deliver gender-sensitive prevention service models.
- Deliver further professional development programs for employees of HIV-service NGOs and government agencies in order to mainstream gender-sensitive approaches into harm reduction programs and social and medical services for women who inject drugs and their sexual partners.



KEY ACHIEVEMENTS IN 2017:

- The comprehensive approach adopted for engaging with and retaining client women in project activities, that including:
 - One-on-one counseling and education on sexual and reproductive health as part of peer-driven interventions (PDI).
 - Counseling for couples who inject drugs aimed at bringing harmony in family relationships, inducing behavior changes, and promoting a responsible attitude towards healthy lifestyle choices.
 - Strengthening self-esteem, developing a role-based identity, and encouraging individual self-identification for women who use drugs through the MeNew game designed around a range of social and psychological themes.
 - Building leadership potential in women through specially designed and structured activities in a study group setting.
 - Providing referrals and support for clients who test positive on rapid tests for HIV and hepatitis linking them to appropriate specialists for further diagnostic testing and treatment.
 - Motivating new clients towards accessing harm reduction programs on a regular basis.

Over the reporting period, this comprehensive approach translated into an increase in the number of clients adhering to harm reduction programs among women who inject drugs, notably:

- **1,680** male and female clients from among PWID attracted through **ProfiGender** pilot projects based on peer-driven interventions. The efforts were focused on younger drug users aged under 24 years. 943 of them are now regular clients who are served by harm reduction projects.
- **147** couples who inject drugs completed a counseling cycle (4 consulting sessions on different topics) and improved their relationships.
- **253** project clients successfully completed all structured group sessions, became community leaders and secondary exchange volunteers.
- **126** sessions of the **MeNew** game were held, attended by 481 project clients. This helped them improve their self-esteem and make an informed decision about receiving harm reduction services on a regular basis.

Three new study programs developed as part of professional development training:

- 108-hour program “**Providing Gender-Based Social and Medical Services for Adolescents and Young People at Risk.**” Implementing Partners: Ministry of Social Policy of Ukraine, Ministry of Youth and Sports of Ukraine, Ukrainian Center for Public Health, Academy of Labor, Social Relations and Tourism.



- 108-hour program “**Specific Aspects of Social Work Among Adolescents and Youth from Key Affected Populations, Taking into Account a Gender-Sensitive Approach.**” Implementing Partners: Ministry of Social Policy of Ukraine, Ministry of Youth and Sports of Ukraine, State Institute of Family and Youth Policy.
- 48-hour program “**Specific Aspects of Gender Mainstreaming in Social and Preventive Work in Correctional Facilities, Pretrial Detention Centers, and among Clients under the Oversight of Probation Authorities.**” Implementing Partners: Ministry of Justice of Ukraine and National Dragomanov Pedagogical University.

In addition, efforts continued to train specialists in the professional development course based on the 72-hour study program “**Special Considerations in Mainstreaming Gender-Sensitive Approaches into Medical and Social Services for Vulnerable Populations.**” Implementing Partners: Ministry of Social Policy of Ukraine, National Dragomanov Pedagogical University, Center for Public Health of the Ministry of Health of Ukraine.

In total, in 2017, 294 specialists were trained, with 161 of them receiving government-recognized advanced professional education certificates, and the rest of them – certificates of attendance.

A STORY FROM A PROJECT CLIENT

Viktoria is 47 years old and she can't go out to work because of her poor health. She's been living with her partner for more than twenty years, and they still can't get around to finally getting married. The couple has no kids. She was brought into the ProfiGender project through PDI and quickly became an active recruiter for PWID – she found it easy to establish contact and get along with women, doing a great job teaching them during the study module. Viktoria got tested for HIV and the test results came back positive. She agreed to case management, got registered with healthcare services for monitoring and follow-up, and was determined to take care of her health and receive treatment. However, after a while, all contact with this woman was lost – she just plain disappeared. Six months later, Viktoria unexpectedly showed up at the project office, looking very thin and exhausted. It turned out that she had contracted TB and had been staying in the hospital. While fighting the disease, she reconsidered her prejudiced beliefs and fears about ART, and a very short time later, once all necessary tests were completed, she began to receive therapy. After leaving the hospital, Viktoria was a changed person: she quit the drugs, started to dress better, and her health improved. She's in a good mood, because her live-in partner has gotten a job and supports her in every way. Recently, she asked for help in getting a job as a volunteer in an animal shelter. She badly wants to be of service to other people and help animals. She's prepared to take them out on walks, feed them and clean up after them. Viktoria is very thankful for the opportunity to have participated in the project, for the information she has received here, and for the friendships that were made at ProfiGender.

**Viktoria, a Client of NGO “Gromadske Zdorovya”
Age 48 (Kryvyi Rih)**

ПРОЕКТ

Harm Reduction for Children and Young People Who Use Drugs in Ukraine: Reaching the Underserved



FINANCIAL SUPPORT:
Elton John AIDS
Foundation



IMPLEMENTATION
PERIOD:
January 1, 2015 –
December 31, 2017



ESTIMATED
BUDGET:
£787,776





Project Target Group:

Children and young people aged 10 to 18 years who use psychoactive substances (PAS) and injectable drugs, as well as their sexual partners.

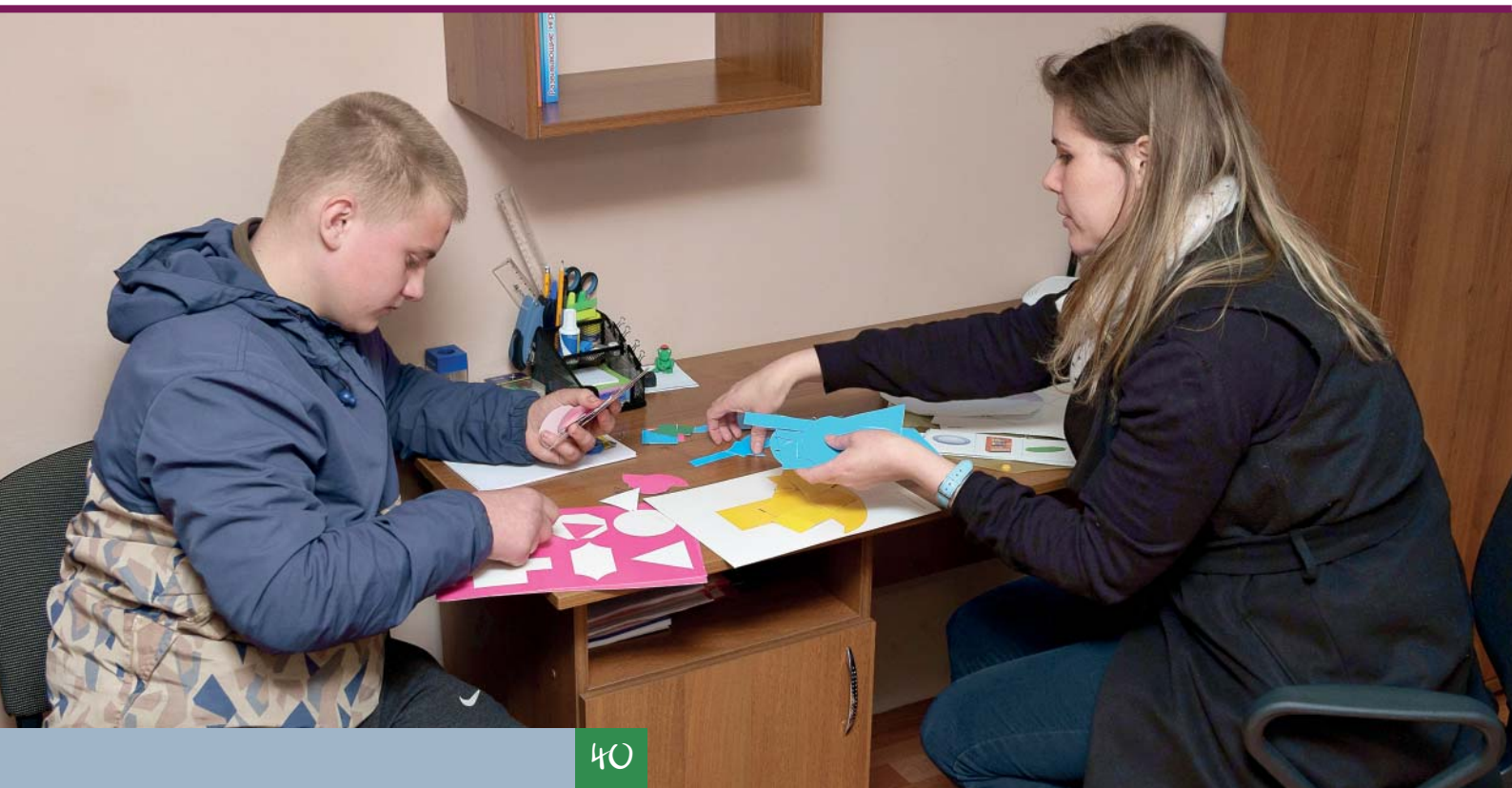
The Goal of the Project:

To protect and improve the health of children and young people who use drugs through high-quality harm reduction services for substance-abusing project clients, prevention of transmission of HIV and other diseases that affect public health by ensuring access to:

- accurate up-to-date information about drug abuse;
- HIV counseling & testing as well as assistance in accessing timely and effective treatment;
- prevention products and supplies (sterile injecting equipment, disinfection and hygiene products, condoms);
- a broad range of services that partner organizations and healthcare institutions may deliver to adolescent clients;
- structured recreation and leisure activities with integrated prevention education.

KEY ACHIEVEMENTS IN 2017:

- Among young people who use narcotic substances (both intravenously and non-intravenously), 4,565 persons reached with HIV prevention services, including harm reduction services, in six cities of Ukraine, i.e., Kyiv, Kharkiv, Odesa, Poltava, Khmelnytskyi, and Slovyansk. All project clients received counseling, while voluntary HIV testing was made available to all those who have reached the age of 14.
- Adolescent clients were provided with access to condoms; counseling by social workers, psychologists, physicians, lawyers; social and medical support by a team of specialists. Based on the target group's requirements, in each and every project city, young people received a range of case-appropriate developmental, educational, and recreational services that were reviewed and adjusted in line with client interests on a regular basis.
- Older adolescents were trained and involved in prevention activities as social workers' assistants based upon the innovative model proposed and applied for the first time in a real-life setting. The young clients were offered the opportunity to work in the project in accordance with the provisions of the Labor Code of Ukraine and draw an official salary. For most of them, it was their first job ever.
- For the target group, a bonus system was developed and widely applied for the first time ever (as a way to encourage participation in the project) coupled with raffle draws, which are extremely popular among teenagers.
- As part of the project's educational strategy, the knowledge base was expanded and budget advocacy methods developed by 105 specialists from government- and non-government agencies and organizations engaged in providing services to teenage clients.
- Mini-training sessions were held for the teams of two NGO partner organizations to enhance the knowledge and skills of case managers and prevent professional burnout among NGO employees.



STORIES FROM PROJECT CLIENTS

Zhanna's parents died in a car accident, and her aunt is her official caretaker and guardian. However, because of a conflict with her, the girl has been living pretty much on her own since 16. She had neither a permanent place to live, nor a source of regular income. She used a variety of non-injection drugs and sold sexual services. When she came to the Youth Center, she first asked for help in improving her relationships with her family members, finding a legitimate source of income, stopping or cutting down on her drug use. Zhanna's desire to turn her life around, a trust-based relationship with the social worker lady, and support from the center's staff and other teenage clients helped her improve her relationships with family, develop better communication with peers, and find her love and new friends. Zhanna learned how to identify legitimate money-making opportunities, found a job. And what matters the most is that she reduced her drug use and then completely gave it up.

***Zhanna, a Client of NGO Svitlo Nadiyi (Light of Hope)
Age 18 (Poltava)***

Vlad is living with his adoptive parents, and his relationship with them is tense. Also, he drinks alcohol and started using drugs when he was 14 (marijuana and phen), even though he's disabled from childhood, having problems with legs and eyesight. He often finds himself in unpleasant situations, his behavior is defiant, and he would do anything to attract attention, explaining this by the fact that he wants to "go toe-to-toe with the best of them and even better." Because of constant conflicts, Vlad moved out of his relatives' place and now lives alone in his grandmother's house, where he is often visited by companies of friends. After another brawl, Vlad came to the Center complaining about bodily injuries, eye hemorrhage, and splitting headaches. As the boy didn't dare go to the hospital alone, he asked for help from the social worker. Vlad was assigned to a case manager who escorted him to the hospital, where he was provided with adequate medical and psychological assistance. When his condition improved, Vlad began to actively participate in the project, joined the action group of the Center's youth leadership movement, and embarked on training at the School of Advocacy operating as part of the PITCH project. It turned out that he had some leadership potential. The time he spent at the Center was not all wasted for nothing – his relationship with his foster parents improved, he moved in back home, and continues to actively participate in the Center's activities. "I'd like to develop myself as a leader, and for this purpose I'm prepared to study and quit drug use. My thanks go to the project's staff for helping me in sorting my own thoughts and feelings out," says Vlad.

***Vlad, a Client of NGO "Nasha Dopomoha" (Our Help)
(Sloviansk), Age 19***

PROGRAM

Partnership to Inspire, Transform and Connect the HIV Response (PITCH)



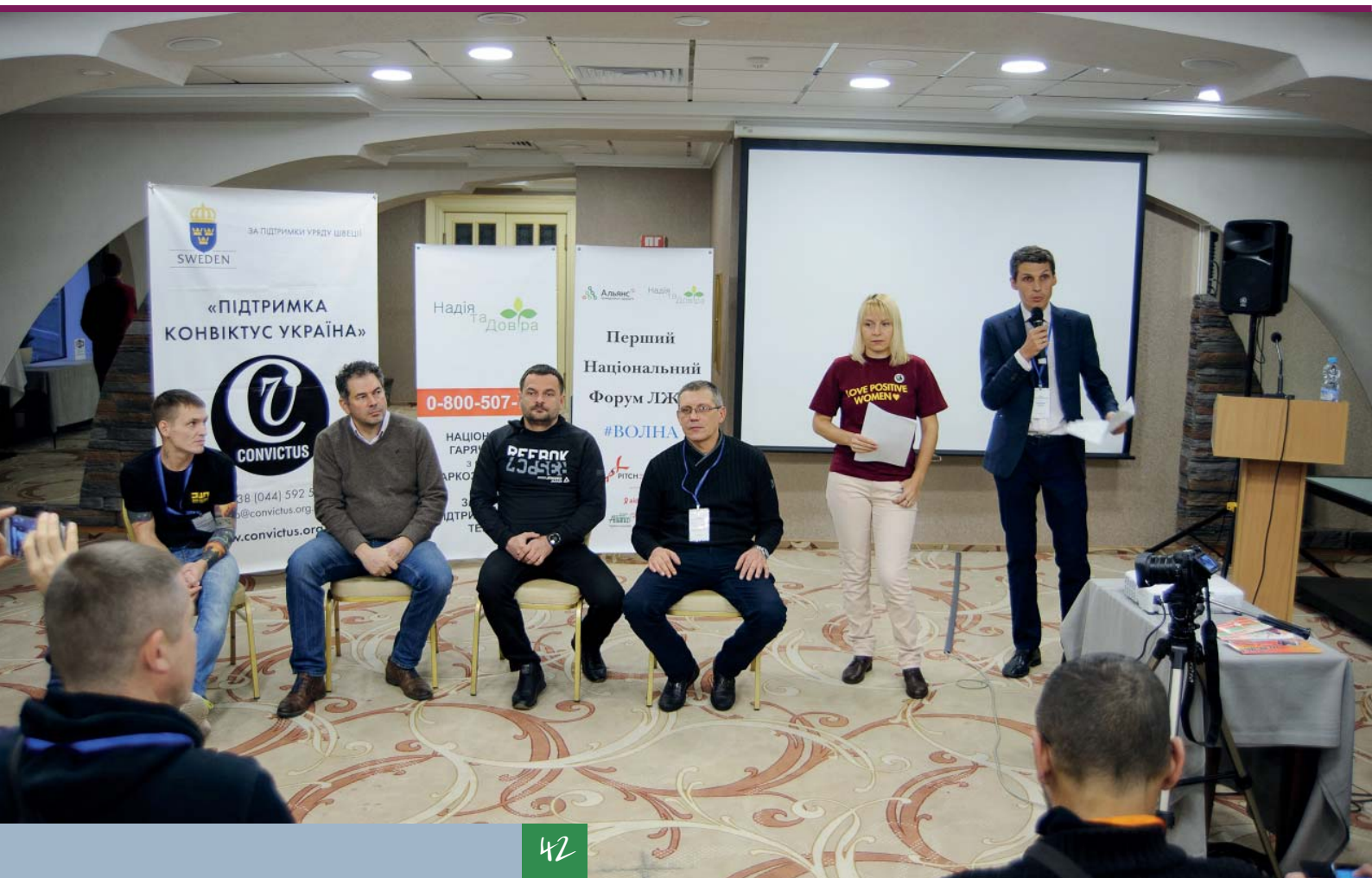
FINANCIAL SUPPORT:
Ministry of Foreign Affairs
of the Kingdom of the
Netherlands.



**IMPLEMENTATION
PERIOD:**
January 1, 2017 –
December 31, 2019.



**ESTIMATED
BUDGET:**
\$221,539
(Yearly Budget,
Ukraine's Share).



Implementing Partners:

Strategic partnership between AIDSFonds/STOP AIDS NOW!, International HIV/AIDS Alliance, and the Netherlands Ministry of Foreign Affairs (2016 – 2020) in nine countries (Indonesia, Kenya, Mozambique, Myanmar, Nigeria, Uganda, Ukraine, Vietnam and Zimbabwe).

The Goal of the Project:

Building NGO Advocacy Capacity for Community Action.

Geographical Coverage (in Ukraine):

Kyiv, Odesa, Slovyansk (Donetsk region) and at national level.

Project Objectives:

- Equal access to HIV and sexual and reproductive health related services.
- Equal opportunities in the context of sexual and reproductive health and rights for people most vulnerable to HIV.
- Equal and full rights for key populations.

PITCH works towards achieving these goals by strengthening local civil society organizations to advocate respective policy solutions. The information and conclusions obtained through national-level projects will be used to implement appropriate policies internationally.

KEY ACHIEVEMENTS IN 2017:

- In the Donetsk oblast, representatives from key populations involved in the activities of TB and HIV coordinating councils at local and regional levels. Also, as a result of advocacy efforts by project staff in Bila Tserkva (Kyiv oblast), a Coordinating Council on HIV/AIDS was created, including representatives from Convictus Ukraine, which represents drug-user communities.
- Due to the project's activities, for the first time in the past four years, the regional program on HIV/AIDS was adopted for the Kyiv oblast, whereby funding is allocated for the purchase of test systems, including rapid test kits for most-at-risk populations.

- The First National Forum was held for people living with drug addiction, where the All-Ukrainian Association of People with Drug Addiction (VOLNA) was presented, as well as a summary of experience in regional self-organization.
- A study was carried out to analyze human rights violations affecting OST patients, as well as to determine the needs of people who use drugs and young drug users in Kyiv, Poltava, and Slovyansk in terms of types and areas of legal assistance.
- An action group of OST patients was created and started work in service sites located in Slovyansk and Mariupol.
- The advocacy movement of young people who use drugs is developing at the local level. Young Leader Training was conducted in Slovyansk. One representative from the target community was given a seat on the Youth Council of the Slovyansk City Council.
- A special performance was held and themed around the International Day to End Violence against Sex Workers.



PROJECT

Advocacy and Awareness- Raising in Response to HIV/TB / Hepatitis



FINANCIAL SUPPORT:

Levi Straus
Foundation



IMPLEMENTATION PERIOD:

September 1, 2014 –
September 31, 2017
Extended to
October 31, 2018



ESTIMATED BUDGET:

\$100,000

The Goal of the Project:

To improve the effectiveness of integrated prevention, testing, treatment and care services for key groups in Ukraine and raise awareness about HIV, tuberculosis TB and hepatitis among decision-makers, law enforcement agencies and the general population through a range of advocacy and educational activities.

Project Objectives:

- To implement a range of activities aimed at decriminalizing people with substance addictions and sex workers.
- To increase awareness and knowledge about HIV/TB / hepatitis among law enforcement personnel and decision-makers.
- To improve access to HIV testing, with a special focus on self-testing.
- To increase access to testing, diagnostics, and community mobilization to address HCV-related Issues.

KEY ACHIEVEMENTS IN 2017:

- As part of the world-wide “Support. Don’t Punish!” campaign to change repressive drug policies, The Rake of Ukrainian Drug Policy! illusion performance was presented (Translator’s Note: The word “rake” in Ukrainian/ Russian brings to mind a situation where the same mistake is repeated again and again) where drug users, civil society activists and human rights advocates acted out real-life scenes or played the role of imaginary characters to depict the ongoing “war on drugs” and tortures imposed on people with drug addiction in Ukraine. Participants urged to renounce the pointless “war on drugs” in Ukraine, which boils down to criminalizing people who suffer from chronic addictions.
- A series of 30 training workshops conducted for law enforcement personnel (co-financing under the GF’s program).
- All-Ukrainian awareness-raising campaign held to commemorate the World Hepatitis Day (July of the reporting year) to draw public attention to the issue. As part of the campaign, the public was offered to take advantage of opportunities to get tested for HCV and the billboards across the cities of Ukraine carried awareness-raising messages.
- The resolution on addressing viral hepatitis developed and approved. It provides for the establishment of a national strategy on hepatitis in Ukraine, as well as an appropriate action plan.



PROJECT

Scaling Up Accessible and Effective HCV Treatment Through Community-Based Treatment Model for Most Vulnerable Populations in the Resource-Constrained Ukraine



FINANCIAL
SUPPORT:
Various Donors



IMPLEMENTATION
PERIOD:
April 2015 –
June 2018



ESTIMATED
BUDGET:
\$860,428.78

The Goal of the Project:

To ensure access to effective HCV treatment for key populations and design innovative community-based service delivery models, including medical and social support, with treatment regimens based on direct-acting antivirals, specifically, Sofosbuvir and Harvoni (Ledipasvir/Sofosbuvir).

KEY ACHIEVEMENTS IN 2017:

- 1,907 treatment courses based on hepatitis C virus (HCV) direct-acting antivirals administered to representatives of key groups. The planned target for enrolled patients was exceeded by 27%.

In 2017, for the first time in Ukraine, HCV treatment was provided in a combination antiviral regimen using Harvoni (Ledipasvir/Sofosbuvir). This treatment option was made available to 723 patients.

- 50 ATO veterans received treatment.
- In order to ensure treatment adherence and success, a community-based care model was deployed under the project with the multidisciplinary care team approach to integrated service delivery from 25 municipal and private healthcare facilities focusing on substance abuse issues across 19 regions in Ukraine. Social support was organized for clients receiving treatment for HCV from most-at-risk-populations. Social support is delivered by social workers from 19 community-based organizations. These efforts contributed to achieving high retention and adherence to therapy, i.e., 98.4%.
- **Treatment efficacy confirmed, specifically, a sustained virologic response to antiviral therapy (12 weeks after completion of treatment) was achieved in 95.1% patients.**
- Patient services paid for in full (100%) using the Project's funds to reduce related laboratory costs for viral load tests while the patient is receiving treatment for hepatitis C infection. As of January 1, 2018, 4,788 tests of this type were conducted. More specifically, a 50 percent discount on lab tests was made available to the Project's participants prior to treatment. In total, 4,500 tests were performed at 50 percent discount made available before treatment.
- Treatment efficacy and cost management outcomes under the Project monitored and assessed based on the electronic register of patients. This tool serves to track detailed patient information in real time in a depersonalized format and performs medical data analysis in an aggregate manner.
- The operations research is in progress to evaluate the performance and effectiveness of the innovative community-based HCV treatment model as part of the Project, the results of which will be reported in 2018.

80.3% of the Project's patients are people who inject drugs, 10.8% of them being OST clients.

73.4% of the Project's participants are HIV-positive, 97.1% of them being on ART (7.2% of which accessing ART and OST at the same time)

SUCCESS STORIES

"I come from the Luhansk region... As far back as in 1993, I injected my first dose of poppy, and that's when things started going to hell in a handbasket.... "Sex, drugs, rock & roll," became my life's motto. In 1997, I decided to get away from the drug scene. First, I moved to Rostov, and then up to Kyiv. It was then that I found out I was HIV-positive. I moved back to the Luhansk region, married the woman I loved, who bore me my three wonderful sons. Every now and then, the sleeping beast of HIV awoke and manifested itself in diverse symptoms. And when in 2014 the war came knocking on our front door, we had to leave it all behind and run away. Some friends helped us settle down once we reached Kyiv. But there was one more beast remaining that came back to life – hepatitis... my health condition started deteriorating, I was losing weight. My checkup and test results gave little reason for optimism, but I wanted to stay alive. Stage four fibrosis, genotype 1...

I'm a musician, a person with a creative mind and artistic nature, but now I was turned into a sickly vegetable, grumpy, with a sallowness face, my body dried up and reduced to a skeleton-like condition. Sometimes I'm hard-pressed to find the words to describe my gratitude to the people who crossed paths with me along my life's journey at certain points in time.

One of them is my doctor, Ivan Tkhaniovych. I remember how hard he was trying to find a treatment that would work against my hepatitis, going through all available therapy options. We were waiting for an appropriate program to get enrolled in. A full year... it wasn't easy. They couldn't put me on the one that was available, as it would just plain kill me, bringing my weak immune system further down. Then any opportunistic infection could strike and take me out – TB or something else.

A board of doctors was called together to look into my case. Putting their heads together. Waiting. I believed and had faith in God, hoping that He would keep me alive until it's time to get into treatment. I completely trusted the doctors in finding the right solution.

And then that happy, long-awaited phone call from Tetiana, the social worker, finally came! I can get started on my treatment plan! The wait is over! I'm alive!

I thank you all.... This involves a long chain of people. I'd like to say a big "THANK YOU!" on behalf of myself and my whole big family!"

Gennadiy, Kyiv



DEMONSTRATION PROJECT on Assessment of Simplified Antiviral Treatment Strategy for Hepatitis C in Ukraine



FINANCIAL SUPPORT:

EQUIP Consortium
supported by the
United States Agency
for International
Development.



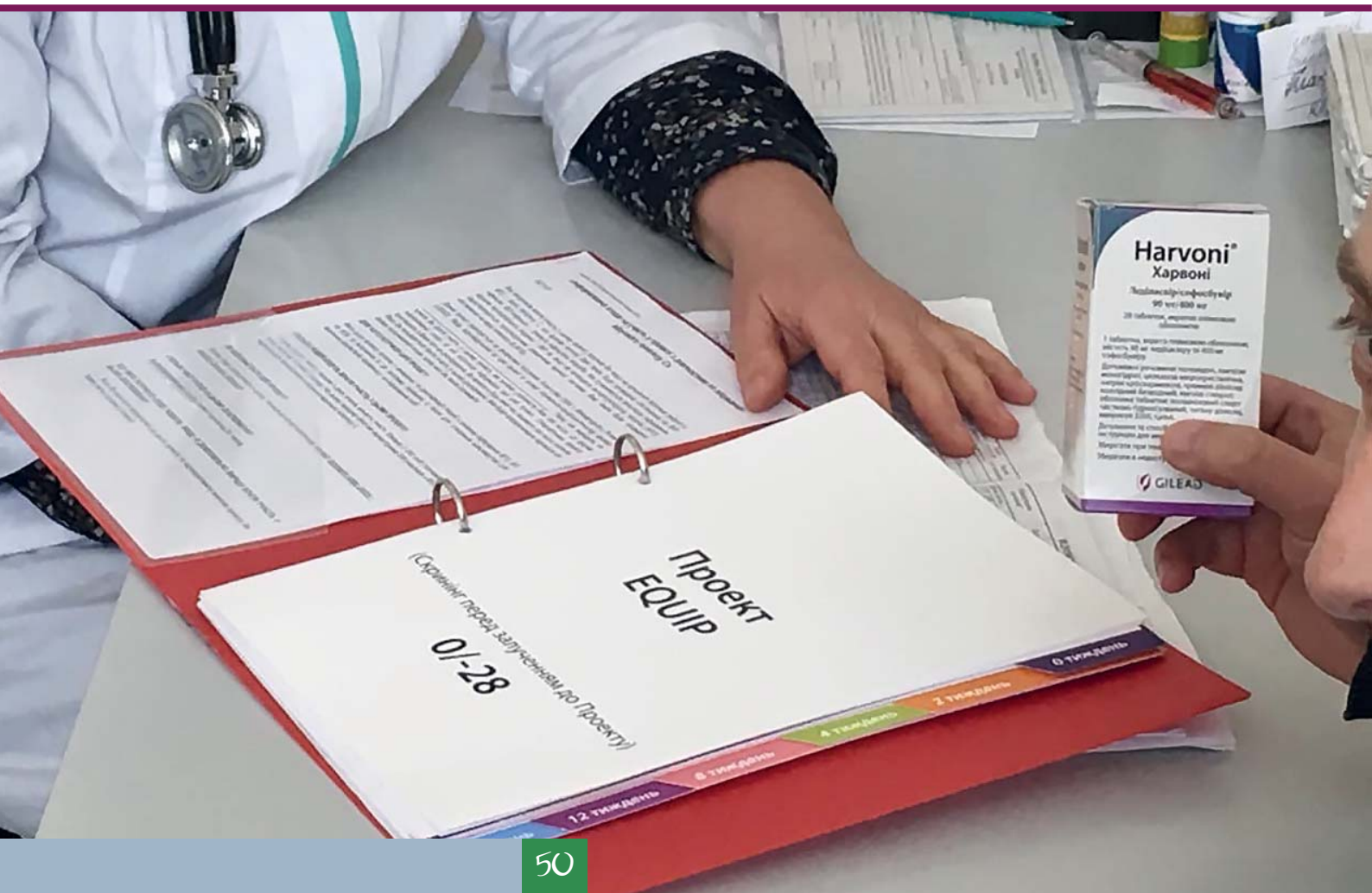
IMPLEMENTATION PERIOD:

жовтень 2017 р. –
October 2017 –
September 2018
(with Possible Extension).



ESTIMATED BUDGET:

For the Alliance:
\$420,788



The Goal of the Project:

EQUIP Consortium will evaluate the cost and treatment outcomes of a simplified HCV testing, treatment and care model integrated with HIV testing and treatment among key affected populations in Ukraine and their partners.

Representatives of key populations and their partners will be screened for HCV and HIV and treated with direct-acting anti-HCV agents (DAAs). Co-infected HIV/HCV patients will be referred for antiretroviral treatment (ART). This strategy will facilitate access to HCV treatment, and enhance ART initiation and adherence among co-infected HIV/HCV.

The Alliance's Objectives for the Project:

- To organize and monitor HCV testing, laboratory diagnostics, treatment and social support by L.V. Gromashevsky Institute Epidemiology and Infectious Diseases of the National Academy of Medical Sciences of Ukraine.
- To procure and provide medicines, laboratory equipment, and medical items for all healthcare facilities involved in the project.

KEY ACHIEVEMENTS IN 2017:

- Preparations began for the implementation of the pilot phase of the project. The first patients will begin treatment in March 2018.
- In accordance with donor requirements, an administrative and regulatory framework was established for working with patients, as well as procurement of medicines, laboratory equipment, and medical items.
- Alliance personnel was trained in the policies and procedures of the U.S. Agency for International Development.
- The procurement process was organized to facilitate access to medicines, laboratory equipment and reagents, laboratory services, and medical items necessary for the HCV screening, diagnosis, and treatment of project participants and for the training of medical staff in the health facilities involved in the project.
- The conditions were established for collaboration in providing patient screening, diagnostic testing, treatment and social support by L.V. Gromashevsky Institute Epidemiology and Infectious Diseases of the National Academy of Medical Sciences of Ukraine.

PROJECT

Optimized Case Finding FOR HIV (OCF) and Community-Initiated Treatment Intervention (CITI)



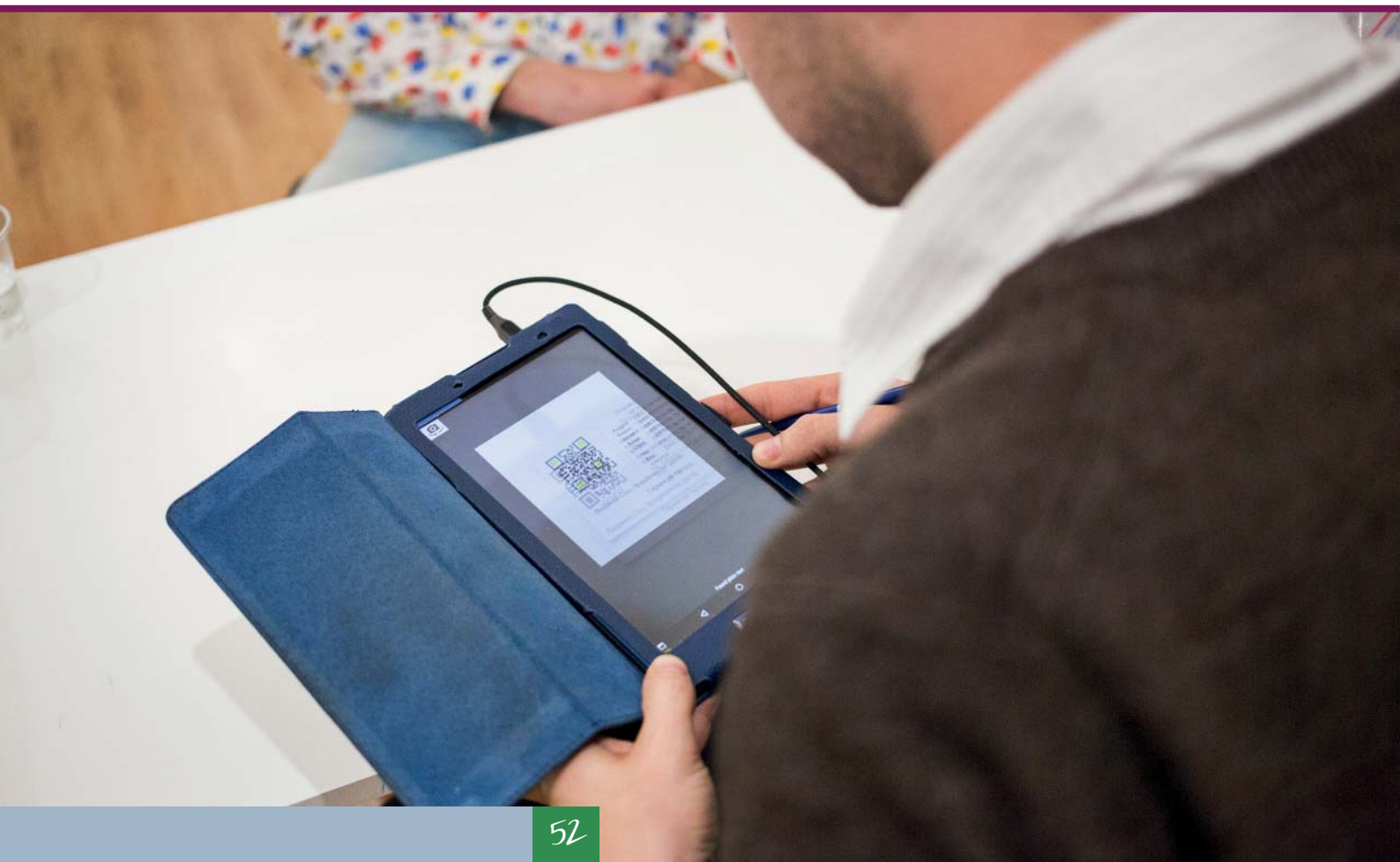
FINANCIAL SUPPORT:
U.S. Centers for Disease
Control and Prevention,
pursuant to the U.S.
President's Emergency Plan
for AIDS Relief (PEPFAR)



**IMPLEMENTATION
PERIOD:**
December 1, 2015 –
March 31, 2018



**ESTIMATED
BUDGET:**
\$1.9 mln.



The Goal of the Project:

To improve the effectiveness of HIV testing strategies through optimized case-finding based on respondent-driven sampling (RDS) by focusing on the risk networks of most-at-risk populations and improving ART access for HIV-positive PWIDs and their sexual partners by actively linking them to medical and social support programs, as well as meeting the needs of PWIDs and their sexual partners by providing them with the following services:

- HIV assisted testing using rapid tests to detect HIV antibodies;
- Consultation on HIV risk reduction;
- Training in counseling to engage for project activities with the sexual partners of HIV-positive PWIDs who were together involved in highly risky behaviors associated with HIV transmission;
- Providing support that encourages the initiation of HIV treatment as part of the CITI case management component.

23 partner NGOs were involved in implementing the program.

Geographical Coverage:

11 oblasts/regions of Ukraine – Dnipropetrovsk, Kyiv, Odesa, Poltava, Mykolaiv, Cherkasy, Zaporizhzhia, Donetsk, Kherson, Chernihiv, Kirovohrad oblasts, and the city of Kyiv.

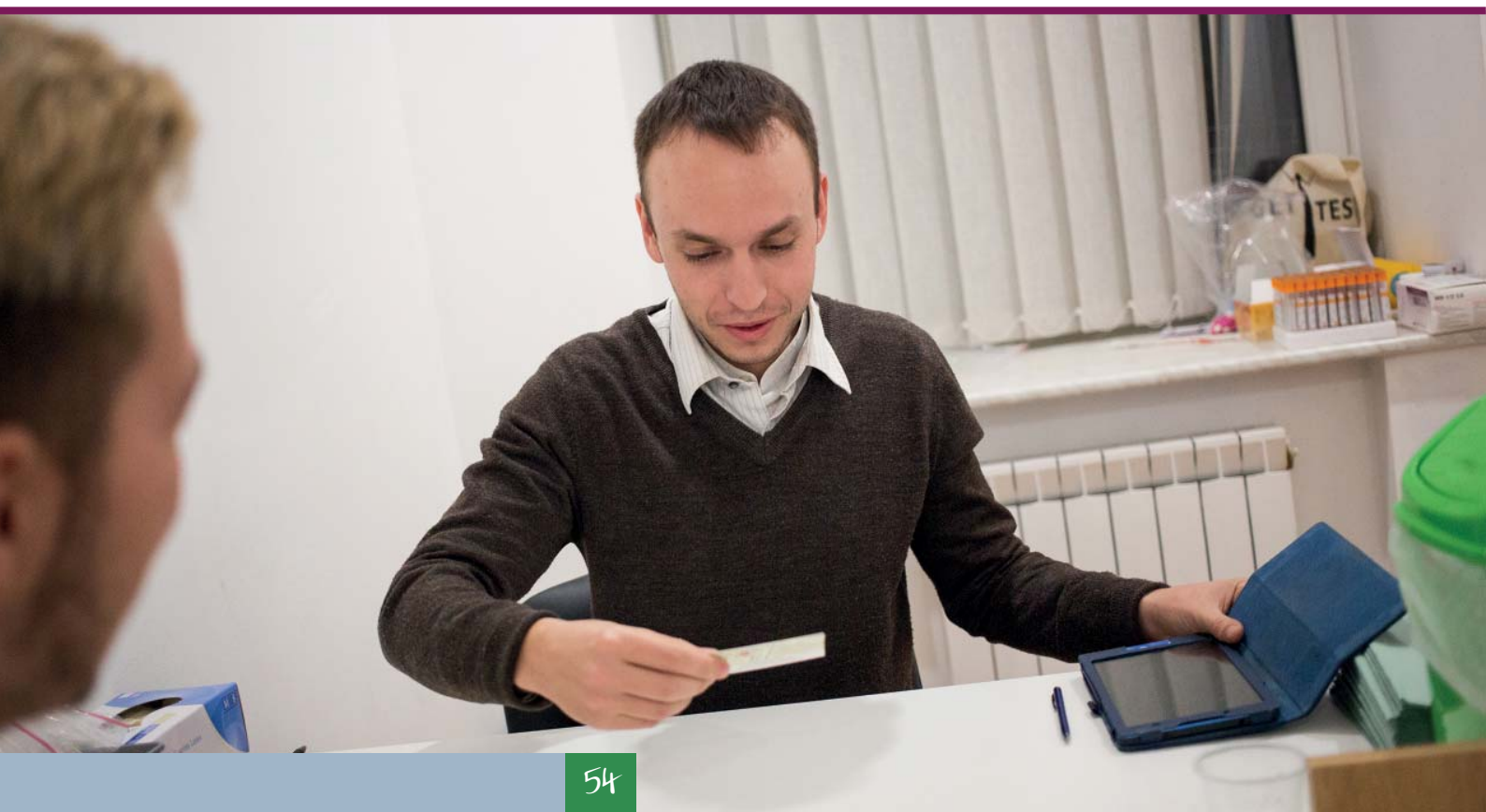
KEY ACHIEVEMENTS IN 2017:

HIV Testing and ART Support

- The program strategy assisted in reaching individually 33,601 clients from among PWIDs and 807 MSM through assisted testing for HIV.
- The percentage of those who tested positive for HIV among total persons tested in the groups of PWIDs and MSM was 16% and 4%, respectively.
- In the reporting period, the medical and social support services associated with treatment were received by 4,228 PWIDs and their partners, and 23 MSM.
- Due to case management support as part of the CITI component, 1,766 PWIDs and 17 MSM clients started ART.

Program Changes

- Geographically, the project activities were expanded. In October 2017, the program launched in the Donetsk and Kherson oblasts.
- The training handbook was developed, i.e., *Motivational Counseling When Providing PWIDs with Social and Medical Support*. Based on this resource, two three-day trainings were conducted for 43 case finders and case managers.
- A series of working meetings organized for project team representatives, which translated into providing practical recommendations on how to best improve service delivery models in the regions.
- Motivational support mechanisms were implemented to extend the reach of treatment programs for HIV-positive PWIDs and their sexual partners as part of the CITI component.
- The methodology was developed for the additional pilot model, i.e., *Instant Confirmation of HIV Infection*, to reduce the time lag between the key stages required for the initiation of treatment in three regions (Odesa oblast, cities of Kyiv and Kryvyi Rih).
- Group and individual supervisions were conducted by project supervisors for 45 experts on the teams working in the projects.
- Project funding in the amount of over UAH 455 thousand disbursed to provide vulnerable populations with access to diagnostic services needed to initiate ART.
- An adapted model developed and adopted to optimize HIV case finding and expand access to treatment for MSM (city of Kyiv).
- Study tours conducted with public health representatives from Pakistan and Azerbaijan participating in them.



STORIES FROM PROJECT CLIENTS

"When I first heard the diagnosis, I was in shock, even considering my lifestyle marked by injection drug use and promiscuous sex. I can't even describe the agony I went through. For the first two weeks, I was in a state of shock. Then depression descended on me. My whole world changed in a moment, everything looked gray and bleak. I couldn't see a way out of my situation. A big thank-you to Natalia, the case manager, who immediately pitched in to help me out. She explained in detail what this disease is all about, how to live with it and fight it, where and how to get tested, and how important that is to me. She was at my side when I was getting a complete checkup and taking the tests, getting registered with the infectious disease specialist, and at the time when I started treatment. The CD4 count test results show that my treatment was a success (after three months of antiviral therapy, my CD4 count increased by 400 cells/ μ L). Thanks to the staff of the organization, such as the counselor, the case manager, the psychologist, I was brought to my senses and I realized that now my future lay in my own hands. Everyone was telling me, "No, you won't die. You'll be all right. You'll be fine. You'll achieve all you set out to do, and we are here to help you with that." Now I know there are people near me who would lend me a helping hand in a time of need. My life has begun!"

**Vadym, a project client,
Charitable Foundation "Volya" (Uman)**

"When I first found out I was HIV-positive, for a long time I could hardly wrap my mind around it. I was staying in denial and hoped it was all a mistake. But when the confirmatory test returned positive, too, I had to adjust and learn how to live my life in a new way. It was only thanks to the people who are close to me and my social worker that I was able to accept and understand the stark necessity for treatment. That helped me begin a new life and lift myself up spiritually. Now I'm a university student. I'd like to become a successful manager and fulfill my professional ambitions in this direction. Of course, sometimes it's not so pleasant thinking about your health situation and living with it day in, day out. But I'd like to say that life goes on! If you can't change things, change yourself. Begin with yourself and all good things will come back to you."

**Viktoria, a project client,
Charitable Foundation "Unitus" (Mykolayiv)**

PILOT PROJECT

Pre-Exposure Prophylaxis (PrEP) Among MSM / TG in Kyiv



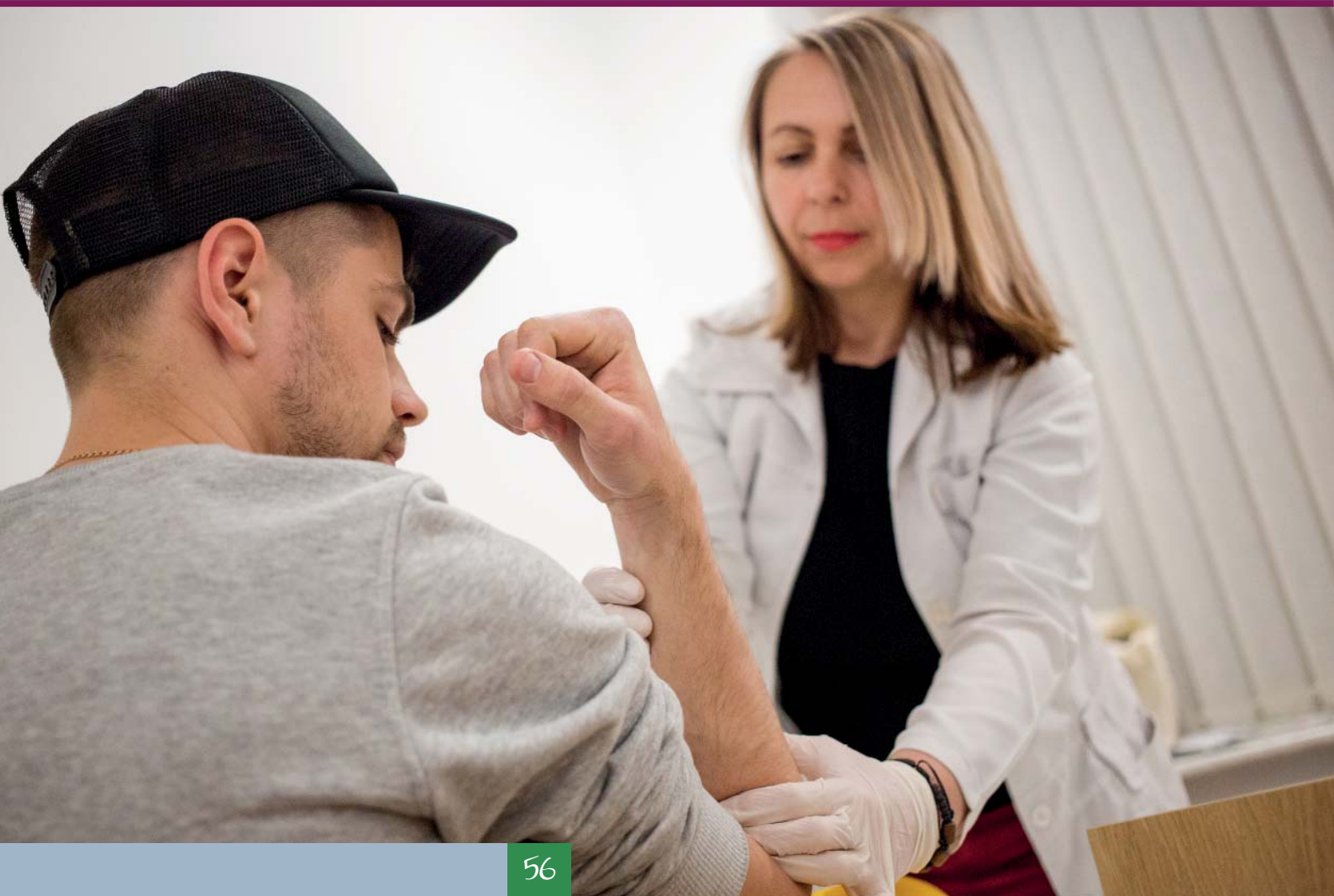
FINANCIAL SUPPORT:
U.S. Centers for Disease
Control and Prevention,
pursuant to the U.S.
President's Emergency Plan
for AIDS Relief (PEPFAR).



**IMPLEMENTATION
PERIOD:**
November 1, 2017 –
March 31, 2019.



**ESTIMATED
BUDGET:**
\$185,000.



BE PREPARED FOR INNOVATIONS: **PrEP** IS ALREADY IN UKRAINE!

The Goal of the Project:

To facilitate efforts towards reducing HIV transmission among MSM and TG by introducing pre-exposure prophylaxis as part of the combined prevention and care program in Ukraine. Implementing project partners in Kyiv are NGO "ALLIANCE.GLOBAL" and the City AIDS Center.

Project Objectives:

- To implement the pilot program and analyze project results to inform recommendations on PrEP implementation and dissemination in other regions of the country in accordance with the national program.

KEY ACHIEVEMENTS IN 2017:

- PA strategy developed to engage with and reach 100 HIV-negative MSM / TG who are at high risk for HIV infection with PrEP services.
- Advocacy meetings with stakeholders held focusing on how to implement the PrEP service delivery model in collaboration between community-based organizations and healthcare institutions.
- ART (TDF / FTS) drugs for oral administration purchased, as well as test systems, reagents, and accessory equipment for clinical and laboratory testing.
- Expert recommendations prepared to provide for PrEP medical monitoring.
- Organizational approaches to social support in developing and maintaining program adherence presented.
- Two project trainings organized and held, with 12 multidisciplinary team specialists participating in them.
- Recommendations for program participants developed detailing the PrEP regimen as a protection strategy against HIV infection.

PROJECT

Improved Quality and Sustainability of Medication Assisted Treatment (MAT) in Ukraine



FINANCIAL SUPPORT:
U.S. Centers for Disease Control and Prevention, pursuant to the U.S. President's Emergency Plan for AIDS Relief (PEPFAR).



IMPLEMENTATION PERIOD:
February 1, 2016 – January 31, 2021



ESTIMATED BUDGET
for 2016-2017:
\$1,250,000



The Goal of the Project:

To provide targeted technical assistance to medication assisted therapy (MAT) programs in Ukraine and stimulate their development in order to improve the sustainability and quality of programs and the long-term health and social outcomes for MAT clients.

Geographical Coverage:

City of Kyiv, Dnipropetrovsk, Odesa, Mykolaiv, and Kherson oblasts.

Project Objectives:

- Development, testing, piloting and evaluation of financially sustainable MAT models.
- Improvement of the quality of care and MAT effectiveness.
- Implementation of integrated care models (ART, TB, MAT, psychosocial support).
- Development and implementation of post-MAT service models.
- Providing support for the Fast Track Cities Initiative (in the city of Kyiv) and development of MAT in PEPFAR priority regions.

KEY ACHIEVEMENTS IN 2017:

- MAT models/approaches developed and made public for further piloting: dispensing take-home medications, pay-your-way MAT format, MAT development within the primary care system. The guidelines distributed among specialists from OST sites, government- and non-government organizations, charitable foundations, international technical assistance projects working in the fields of HIV/AIDS and drug addiction treatment. Model Evaluation Protocol developed.
- The main solutions identified to ensure the sustainability and quality of MAT programs, as well as advocacy changes that need to be reflected in applicable regulations, specifically, those pertaining to MAP development within the primary care system; alternative drug dispensing practices (dispensing of liquid methadone using a hand-held dosing dispenser); regulation and stabilization of prices for pharmaceutical drugs (to enable patients to purchase self-funded medicines); reducing the time lag between diagnosis and initiation of treatment.

- Support provided to the Intersectoral Working Group on OST at the Ministry of Health of Ukraine (established by the Order of the Ministry of Health as of June 15, 2016 (no. 582). The main tasks of the group are to coordinate the work of partners and advocate for sustained MAT and program quality improvement.
- The development and drafting of the Adapted Clinical Guidelines “Mental and Behavioral Disorders Due to the Use of Opioids (Dependence Syndrome)” and the Unified Clinical Protocol of Primary, Secondary (Specialized) and Tertiary (Highly Specialized) Care for Patients with Opioid-Induced Mental and Behavioral Disorders (Addiction Syndrome) finalized. Based on the protocol, work began to develop Standards for the Treatment of Opioid Dependence.
- The guidelines for the provision of integrated services to MAT patients developed and made public, as well as those for the provision of present-day evidence-based medical and psychosocial services to patients who have completed or are nearing the end of MAT.
- In collaboration with the Public Health Center of the Ministry of Health of Ukraine and the Ukrainian Institute for Public Health Policy, with a view to institutionalizing professional training, the online training courses (<https://courses.phc.org.ua>) on integrated assistance and psychosocial support for OST patients were developed. In addition, the online training course on the treatment of opioid dependence was revised and brought up to date.
- Assistance provided to support advanced OST-focused training (for family doctors, substance abuse and addiction specialists, infectious disease physicians, TB and lung disease specialists) at the P.L. Shupyk National Medical Academy of Postgraduate Education. Four webinars conducted on how to provide post-program support for patients, how to prevent treatment interruptions, relapses; how to organize rehabilitation services based on evidence-based practices and interventions.
- As part of the FTCL strategy (achieving the 90-90-90 targets), 1,000 additional annual treatment courses of methadone in tablet form procured and distributed in accordance with the Order of the Ministry of Health of Ukraine as of December 8, 2017 (no. 1571). For project service sites, rapid tests for detecting PAS purchased and distributed to establish conditions for the development of prescription-based practices and the dispensing of OST drugs directly by healthcare institutions, as well as for treatment adherence monitoring.
- Technical assistance (repairs and equipment procurement) provided to improve the performance of the OST service site operating out of the Kryvyi Rih Psychiatric Hospital, and to establish two new sites, notably in the Central District Hospital located in Berezivka (Odesa oblast) and Territorial-Medical Association “Ftyziatriia” in the city of Kyiv.
- The subgrant program with the Ukrainian Association of Family Medicine implemented to integrate OST services into family doctors' practices through their training, advocacy with stakeholders, dispensing OST through primary health care facilities (city of Kyiv and the Kyiv Oblast) by motivating physicians to work with OST patients and recruiting new patients.



- The subgrant program with Charitable Foundation “Nadiya ta Dovira” (Hope and Trust) implemented to conduct advocacy and awareness-raising activities (developing and distributing booklets, videos, etc.) with the purpose of increasing awareness among PWIDs and expanding the OST program.
- A familiarization visit to Germany (Berlin) conducted focusing on the study of best practices in OST-related primary care service delivery. The five-day visit was attended by representatives from the Ministry of Health, the Public Health Center of the Ministry of Health, the National Police of Ukraine, Departments of Health from PEPFAR-supported regions, the P.L. Shupyk National Medical Academy of Postgraduate Education.
- The information website <http://zpt.org.ua/> and the mobile application developed for improved access to the latest information about OST/HIV/TB and other topics of interest for both OST patients and people around them, and specialists in the target fields. The website and the mobile application carry useful information, such as updated national and international protocols, standards of treatment, guidelines, etc., intended for specialists, as well as popular materials about OST, treatment, contact information (phone numbers and addresses for healthcare providers, and other details) for patients. By downloading the mobile application (all materials) users gain access to all content anytime and anywhere without an Internet connection.

PROJECT

Expanding Medication Assisted Therapy (ExMAT) in Ukraine



FINANCIAL SUPPORT:
National Institute
of Drug Abuse (USA)
in partnership with the
Yale University School
of Medicine (USA)



**IMPLEMENTATION
PERIOD:**
2012 – 2018



**ESTIMATED
BUDGET:**
\$1,125,000





Project Objectives:

- To assess barriers and facilitators to entry to and retention in MAT programs.
- To implement and evaluate an evidence-based intervention aimed at process improvement at selected OST sites in order to increase access to and retention in OST programs.
- To pilot extended-release naltrexone (Vivitrol®) as a new MAT strategy.

KEY ACHIEVEMENTS IN 2017:

- In-depth interviews and surveys conducted among OST providers (doctors, nurses), as well as among OST clients and injecting drug users. The results of the study will be published in 2018.
- In September 2017, a study visit to New Haven, Connecticut (USA) organized and held for key external experts focusing on addiction medicine (narcology) based in the Mykolaiv, Lviv, Sumy Oblasts and the city of Kyiv.
- During the reporting period, three national meetings conducted for key external experts focusing on addiction medicine (narcology) from all 25 regions of Ukraine. The meetings resolved that in 2018 the number of OST patients in Ukraine should be increased by 20%.

PROJECT

Communities, Rights and Gender TB Tools Assessments in Ukraine



FINANCIAL
SUPPORT:
Stop TB
Partnership.



IMPLEMENTATION
PERIOD:
October 17, 2017 –
February 23, 2018.



ESTIMATED
BUDGET:
\$47,617

The Goal of the Project:

To conduct the study involving a wide range of stakeholders to strengthen the national response to the TB and TB / HIV epidemics using the tools developed by the STOP TB partnership, namely the TB / HIV Gender Assessment Tool and the Data Acquisition Tool for planning activities aimed at key vulnerable groups and underserved populations.



KEY ACHIEVEMENTS IN 2017:

- A desktop analysis conducted, as well as two focus groups of women and men who are affected by TB, and in-depth interviews in four regions of Ukraine involving target groups and stakeholders.
- Recommendations prepared on how to strengthen the national TB response.
- Among the key findings obtained during the data collection process as part of the qualitative component of the study, the specific needs of women, men, and transgender people were identified with regard to TB diagnosis and treatment. In particular, participants in focus groups stressed the need for separating patients by gender in healthcare facilities with due regard for the gender component.
- The exhaustive list of key vulnerable groups developed. It is recommended that this list be revised annually and adjusted, if necessary, at national and regional levels.
- Two stakeholder meetings held to present assessment tools and ensure public consultation.
- It is planned that the strategic findings and outcomes of the research project with regard to TB-related gender barriers and key populations conducted in Ukraine by the Alliance for Public Health in collaboration with the Stop TB Partnership will be used to inform national TB regulations and policies.

REGIONAL PROJECT

Strengthening Health Systems for Effective TB and MDR-TB Control in Eastern Europe and Central Asia (TB-REP Project)



FINANCIAL SUPPORT:
The Global Fund to Fight AIDS, Tuberculosis and Malaria.



PRINCIPAL RECIPIENT:
Center for Health Policies and Studies (PAS Center)



IMPLEMENTATION PERIOD:
January 1, 2016 – December 31, 2018.



ESTIMATED BUDGET:
\$375,000
(Three-Year Budget)



IMPLEMENTING PARTNERS:

11 countries of Eastern Europe and Central Asia – Armenia, Azerbaijan, Belarus, Georgia, Kazakhstan, Kyrgyzstan, Moldova, Tajikistan, Turkmenistan, Ukraine, and Uzbekistan.

The Goal of the Project:

To decrease the burden of tuberculosis and halt the spread of drug resistance in the target EECA countries through increasing political commitment and translating evidence into the broad-based implementation of patient-centered models of TB prevention, treatment and care.

ICF “Alliance for Public Health,” acting here on behalf of the TB Europe Coalition (TBEC), is responsible for providing general technical support to CSO projects, coordination of advocacy activities, monitoring and sharing of best advocacy practices in the EECA region. The principal recipient of the grant for the project is the *Center for Health Policies and Studies* (PAS Center, Republic of Moldova).

Project Objectives:

- To increase political commitment to TB and MDR-TB control through regional cooperation and experience sharing aimed at improving the performance of the National TB Control Programs.
- To develop and disseminate evidence-based practices as part of effective TB service delivery to implement patient-centered approaches and innovative care models.
- To ensure sustainable financing in TB control and effective funding allocation mechanisms.

KEY ACHIEVEMENTS IN 2017:

- The team of the TB Europe Coalition (TBEC), together with representatives from the Alliance, made monitoring visits to Azerbaijan, Belarus, Georgia, Moldova, Tajikistan, and Ukraine, providing technical support on site to local partners from civil society.
- Civil society partners were offered assistance to participate in a two-day conference held at the WHO Regional Office for Europe in Copenhagen in March 2017 to strengthen ties and networking with other TB-REP partners.

- In October of the reporting year, a joint symposium was conducted on the role of civil society in providing needs-oriented anti-TB services at the Union World Conference on Lung Health held in Guadalajara, Mexico.
- Coordination continued with the Global TB Caucus, as well as efforts to align advocacy activities between TB-REP partners from civil society and parliament members, including the establishment of parliamentary groups involved in combating tuberculosis at country levels.
- The TB Europe Coalition (TBEC) in collaboration with the Alliance published an informational brochure on advocacy highlighting civil society's stance on high-quality, needs-oriented anti-TB services. The material was developed through the combined efforts of TB-REP partners and activists from among former TB patients.



PROJECT

Fast-Track TB/HIV Responses for Key Populations in EECA Cities



FINANCIAL SUPPORT:

The Global Fund
to Fight AIDS, Tuberculosis
and Malaria.



IMPLEMENTATION PERIOD:

January 1, 2017 –
December 31, 2019.



ESTIMATED BUDGET:

\$3,900,000

The Goal of the Project:

To develop sustainable city models of HIV/TB responses among key populations in EECA Cities to contribute towards achieving the programmed 90-90-90 targets.

Implementing Project Partners:

AFEW International (the Netherlands), Licit and Stop TB Partnership (Switzerland).

Geographical Coverage:

Almaty (Kazakhstan), Belts (Moldova), Odesa (Ukraine), Sofia (Bulgaria), Tbilisi (Georgia).

KEY ACHIEVEMENTS IN 2017:

- Municipal orders approved for the establishment of coordinating councils on HIV/TB in project cities with the participation of representatives from key populations (PWID, MSM, SW).
- Situation assessments completed for project cities and municipal HIV/TB programs developed. On October 26, 2017, the first municipal program on prevention and control of HIV/TB and sexually transmitted infections was approved in the city of Belts for 2017-2020, providing for a 71 percent increase in funding for 2018 over the 2017 budget.
- Operations research projects launched in the cities of Almaty, Belts, and Odesa aimed at: improving care cascade outcomes (Almaty); piloting a collaborative intervention on HIV/TB (Belts); promoting outpatient TB treatment based on Results-Based Financing (RBF) (Odesa).
- The Paris Declaration signed by the mayors of Almaty and Odesa, and the Zero TB Cities Declaration – by the mayors of Belts and Odesa.
- Representatives from project cities, including city mayors, visited Amsterdam and Berne to witness successful practices engaged in by local HIV/TB projects.
- Trainings conducted on collaboration between the municipality and NGOs in Sofia and Odesa.
- Representatives from project cities attended the 2017 International City Health Conference held in Basel, with Odesa being announced as the venue to host the 2018 City Health Conference.
- Arrangements made to disseminate information about the project via the website, i.e., <http://hivtbcities.org>, and the Facebook page, i.e., facebook.com/hivtbcities



PROJECT

Eastern European Regional Platform for Accelerated Action for Women, Girls and Transgender in HIV/AIDS Context



FINANCIAL
SUPPORT:
The Robert Carr
Fund.



IMPLEMENTATION
PERIOD:
January 1, 2016 –
December 31, 2018.



ESTIMATED
BUDGET:
\$525,000

The Goal of the Project:

Response to the pressing need to address the persistent gender inequalities and human rights violations that put Women, Girls and Transgender (WG/TG) at a greater risk of, and make them more vulnerable to HIV.

Implementing Project Partners:

ICF "Alliance for Public Health" is collaborating with partner organizations / networks / coalitions from Armenia, Azerbaijan, Belarus, Georgia, Moldova, Ukraine, and Russia (collectively acting as EKHN, i.e., the Eurasian Key Population Health Network).

Project Objectives:

- Strengthening strategic guidance and support to national partners to “know their epidemic and response” in order to effectively meet the needs of WG/TG.
- Assisting countries to ensure that national HIV and development strategies, operational plans, monitoring and evaluation frameworks and associated budgets address the needs and rights of WG/TG in the context of HIV.
- Advocacy, capacity strengthening and mobilization of resources to deliver a comprehensive set of measures to address the needs and rights of WG/TG in the context of HIV.

KEY ACHIEVEMENTS IN 2017:

- On 27th-28th May of the reporting year, training conducted in Moscow for endocrinologists focusing on best practices for service delivery to transgender people regarding the organization of service-related research for transgender people in Moldova, Azerbaijan, and two cities in Ukraine, i.e., Kyiv and Odesa.
- The meeting of EKHN Board Members organized and held for the discussion of strategic development directions, as well as the preparation of constituent documents and regulations of EKHN. The event also included a strategic planning session for EKHN’s Board Members and Coordinators.
- A series of trainings, *Gender Equality and Women, Girls and Transgender Empowerment in HIV/AIDS and TB context*, conducted in Tbilisi (Georgia) and St. Petersburg (Russia).
- Regional Winter School “*Gender Equality and Women, Girls and Transgender Empowerment in HIV/AIDS and TB Context*” conducted on November 19-21, 2017.
- With support from the Alliance and EKHN, a strategic planning session held for the transgender action group (HelpTG), resulting in the establishment of a first-ever organization for transgender people (Lili) in the history of Belarus. The organization will be headed and led by Angelika Volkonska, a board member of EKHN.
- Events held to honor the Transgender Day of Remembrance and World AIDS Day

HARM REDUCTION ACADEMY 2017

Throughout 2017, 28 participants from Tanzania, Kenya, Ukraine, Nigeria, the United Kingdom, Georgia, Cambodia, Indonesia, Uganda, and Kyrgyzstan were trained at the Harm Reduction Academy.

The Alliance is continuously working to improve the training program by bringing in the best experts in harm reduction. In 2018, training sessions on gender issues were added to reflect the increasing need for gender-oriented programs. In this context, every effort is made to most fully leverage the local expertise of the countries hosting the training course for appropriate learning content. Collaboration with the Stop TB Partnership has strengthened the curriculum giving extra focus and attention to TB prevention and treatment subjects.

After Oleksiy Ziborov from the Patrol Police Force in Kyiv (Ukraine) completed training at the Academy, ICF "Alliance for Public Health" arranged to hold a special joint event to commemorate World AIDS Day. Kyiv police officers were given the opportunity to voluntarily take the anonymous HIV and HCV tests, as well as receive information from social workers from community-based organizations.

Oleksandra Gorchynska, a journalist from Ukraine, after completing the training course, began to focus more on social issues, including those related to HIV and drug use. Thanks to Oleksandra's efforts, in 2017, a large number of professional texts on these topics emerged in Ukraine.

Wamala Twaibu of the Uganda Harm Reduction Network began work on developing guidelines for the Harm Reduction Program launching in Uganda. The skills he learned during his training stint at the Academy helped him, based on the evidence available, to reassure government authorities and the public of the need for harm reduction components, such as syringe distribution and substitution therapy services, which had not been previously offered in the country.

Fatma Jeneby of MEWA (Kenya) developed two programs based on the theory of change. For programs on policy changes and support for people who use drugs, funding was received from NACADA. Along with other participants, Fatma had the opportunity to work on developing the project to identify the needs of women who use drugs. The ideas and concepts developed served as a foundation for the project targeting women who use drugs in Mombasa. A situation assessment has now been completed to better understand the needs of women and a project designed that will be implemented with the support of NASCOP and MAINline partners. Thus, course takers have the opportunity to get help from course participants and facilitators on their own projects and ideas that they can implement in their own countries after completing their training.





WHAT DOES THE HARM REDUCTION ACADEMY MEAN FOR COURSE PARTICIPANTS?

"The Harm Reduction Academy is about learning, networking, and experience sharing. It gives us a better understanding of how other activists work, how decision-makers reason, how harm reduction programs operate in different settings or in other countries. For me, the Harm Reduction Academy is a training course I'd really like to take, because I'm an activist and coordinator for TaNPUD programs. Going through the HRA will add weight and value to my job and the work that I do for people who use drugs in Tanzania and throughout East Africa. I will be using my knowledge to support and help people who use drugs, making their voices heard."

Hepi Asan, the Tanzanian Network of People Who Use Drugs (TaNPUD)

"The HRA for me is the opportunity to take a different perspective on the situation, get to know new people, compare notes and share experiences, establish and leverage international connections in my field. It is an opportunity to learn something entirely new and see what mechanisms are in place in other countries for achieving the programmed outcomes and outputs."

Ivanna Shkolnitska, Ministry of Justice of Ukraine

<http://aph.org.ua/uk/nasha-robota/svit/akademiya-zmenshennya-shkody/>

ANNEXES



ANNEX 1.

FINANCIAL PERFORMANCE

Table 1. Breakdown of Funding Contributions by Donor, 2017

Donor	Funding Contribution	
	(Thousand UAH)	Share in Total Funding (%)
The Global Fund to Fight AIDS, Tuberculosis and Malaria	445 464	71,84%
U.S. Centers for Disease Control and Prevention	114 522	18,47%
U.S. Agency for International Development (through All-Ukrainian Network of People Living with HIV/AIDS (CO)	18 755	3,02%
Gilead Sciences, Inc.	7 237	1,17%
International HIV/AIDS Alliance	6 955	1,12%
The Robert Carr Fund	5 590	0,90%
The Elton John AIDS Foundation	5 063	0,82%
Center for Health Policies and Studies	3 268	0,53%
Other Donors **	13 207	2,13%
Total	620 060	100%

* Converted at the official rate of exchange of the U.S. Dollar to the Ukrainian Hryvnia established by the National Bank of Ukraine as of the date the contribution was received.

** Projects with funding levels below UAH 2.5 million.

Table 2. Breakdown of In-Kind Contributions by Donor, 2017

Donor	In-Kind Contribution	
	(Thousand UAH)	Share in Total Volume (%)
Gilead Sciences, Inc. (Anti-HCV Drugs)	18 101	94,72%
Dolphi – Ukraine (Condoms)	227	1,19%
New Vision Solutions Limited (HIV Test Systems)	215	1,12%
Premier Medical Corporation Private Limited (HIV Test Systems)	155	0,81%
Delta Medical (Pregnancy Cassette Tests)	134	0,70%
Cepheid HBDC SAS (HCV Diagnostic Products)	128	0,67%
Pacific Biotech (HIV Test Systems)	108	0,57%
Biomedinvest LLC (HIV Test Systems and Multiple Test Systems)	43	0,23%
Total	19 111	100%

* * Converted at the official rate of exchange of the U.S. Dollar to the Ukrainian Hryvnia established by the National Bank of Ukraine as of the date the in-kind contribution was received.

Diagram 1. Breakdown of Contributions by Donor
(In Kind and Funding), 2017

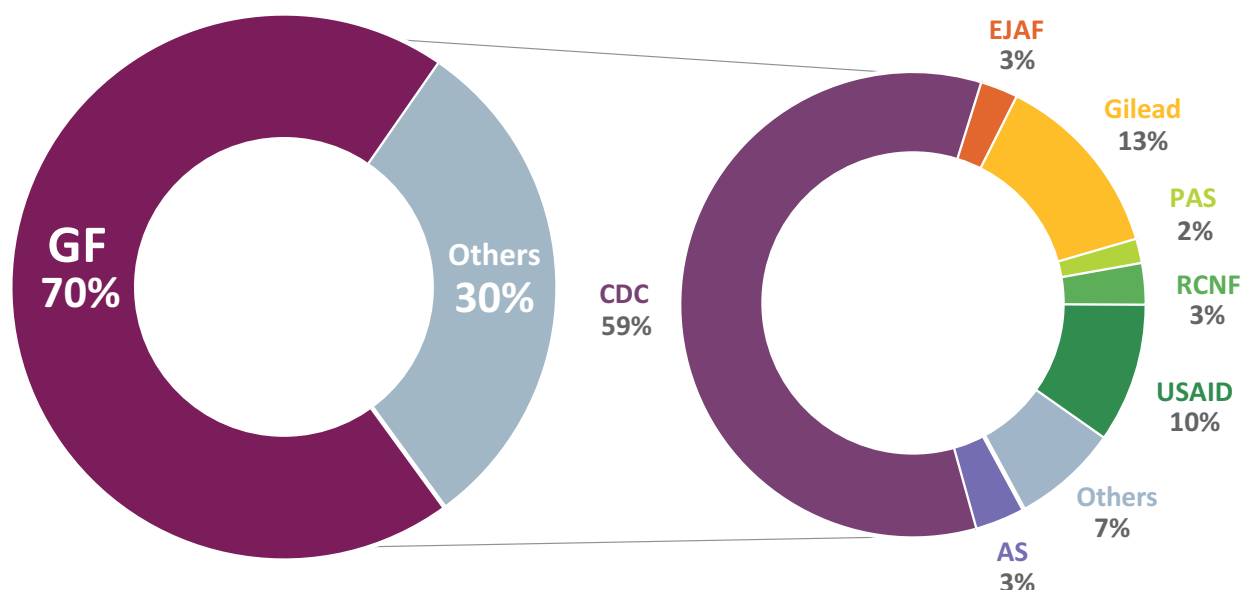


Table 3. Budget Performance, 2017

Donor	Planned Expenditures (Thousand UAH)	Funds Utilized (Thousand UAH) *	Performance, %
The Global Fund to Fight AIDS, Tuberculosis and Malaria	470 299	496 997	106%
U.S. Centers for Disease Control and Prevention	160 848	115 497	72%
The Elton John AIDS Foundation	10 346	8 584	83%
International HIV/AIDS Alliance	9 245	8 180	88%
Gilead Sciences, Inc.	8 989	5 694	63%
Expertise France	6 750	11 472	170%
The Robert Carr Fund	6 287	5 655	90%
Yale University	5 942	3 252	55%
Center for Health Policies and Studies	2 785	2 785	100%
U.S. Agency for International Development (USAID)	2 409	309	13%
Other Donors **	26 882	25 816	96%
Total	710 783	684 240	96%

* The expenditures are recorded on a cash basis when actually incurred.

** Projects with funding levels below UAH 2.1 million.

Diagram 2. Breakdown of Expenditures by Category, 2017

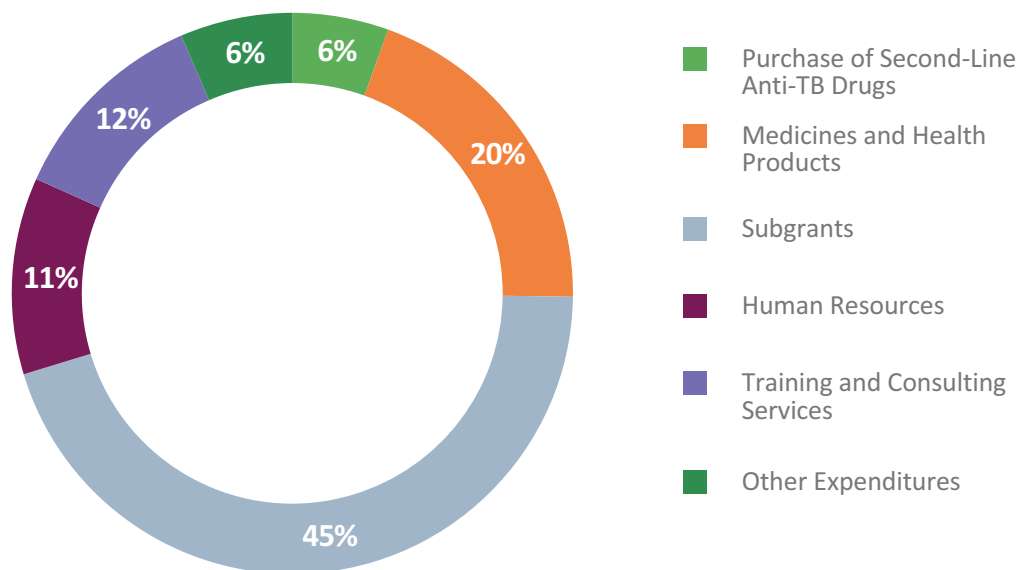


Diagram 3. Breakdown of Expenditures by Type of Disease, 2017

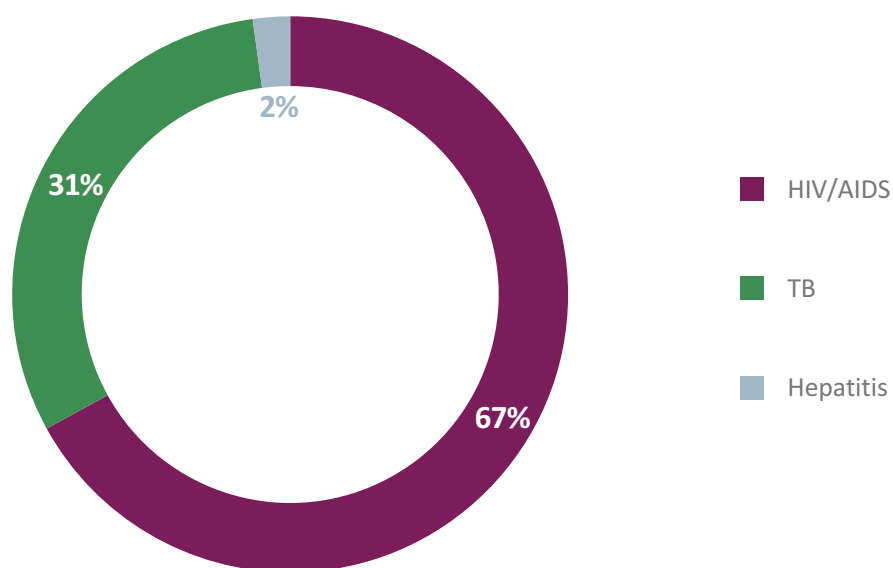
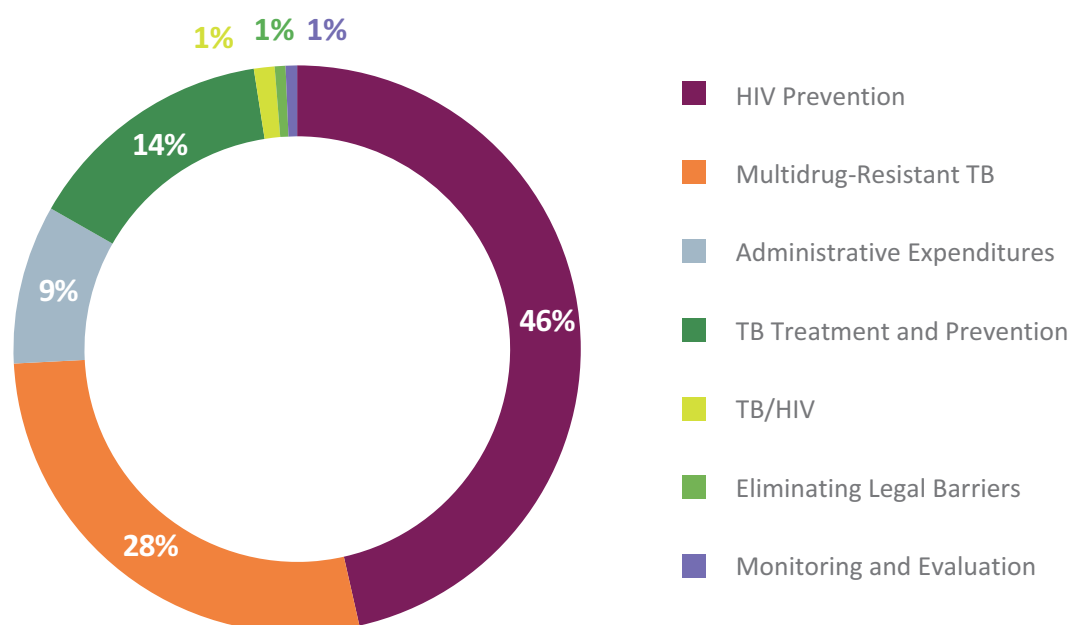


Table 4. Budget Performance for the Global Fund Program “Investing for Impact against Tuberculosis and HIV,” 2017

Donor	Planned Expenditures (Thousand UAH)	Funds Utilized (Thousand UAH) *	Performance, %
HIV Prevention	231 969	230 969	100%
Multidrug-Resistant TB	111 781	137 775	123%
Administrative Expenditures	56 747	45 074	79%
TB Treatment and Prevention	54 033	71 029	131%
TB/HIV	6 310	5 798	92%
Eliminating Legal Barriers	5 876	3 057	52%
Monitoring and Evaluation	3 584	3 294	92%
Total	470 299	496 997	106%

* The expenditures are recorded as actually incurred by the principal recipient or subrecipients

Diagram 4. Breakdown of Expenditures for the Global Fund Program “Investing for Impact against Tuberculosis and HIV,” 2017



ANNEX 2.

CONSOLIDATED FINANCIAL STATEMENTS

**International Charitable Foundation
“Alliance for Public Health”**

Consolidated Financial Statements
for the Year Ended 31 December 2017

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INTERNATIONAL CHARITABLE FOUNDATION "ALLIANCE FOR PUBLIC HEALTH"

STATEMENT OF MANAGEMENT'S RESPONSIBILITIES FOR THE PREPARATION AND APPROVAL OF THE CONSOLIDATED FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 DECEMBER 2017

Management is responsible for the preparation of the consolidated financial statements that present fairly the consolidated financial position of International Charitable Foundation "Alliance for Public Health" and its wholly owned subsidiary "Alliance Consultancy" LLC (the "Organization") as of 31 December 2017, and the consolidated results of its operations, cash flows and changes in equity for the year then ended, in accordance with Ukrainian Accounting Standards ("UASs").

In preparing the consolidated financial statements, management is responsible for:


- Properly selecting and applying accounting policies;
- Presenting information, including accounting policies, in a manner that provides relevant, reliable, comparable and understandable information;
- Providing additional disclosures when compliance with the specific requirements in UASs are insufficient to enable users to understand the impact of particular transactions, other events and conditions on the Organization's consolidated financial position and financial performance;
- Making an assessment of the Organization's ability to continue as a going concern.


Management is also responsible for:

- Designing, implementing and maintaining an effective and sound system of internal controls, throughout the Organization;
- Maintaining adequate accounting records that are sufficient to show and explain the Organization's transactions and disclose with reasonable accuracy at any time the consolidated financial position of the Organization, and which enable them to ensure that the consolidated financial statements of the Organization comply with UASs;
- Maintaining statutory accounting records in compliance with Ukrainian legislation and accounting standards;
- Taking such steps as are reasonably available to them to safeguard the assets of the Organization; and
- Preventing and detecting fraud and other irregularities.

The consolidated financial statements for the year ended 31 December 2017 were authorized for issue by the Organization's management on 8 June 2018.

On behalf of the Organization's management:


 A. Klepikov,
 Executive Director


 S. Liubarskiy,
 Finance Director

INDEPENDENT AUDITOR'S REPORT

To Management and Board of Directors of International Charitable Foundation "Alliance for Public Health":

Opinion

We have audited the accompanying consolidated statements of International Charitable Foundation "Alliance for Public Health" and its wholly owned subsidiary "Alliance Consultancy" LLC (the "Organization"), which comprise the consolidated balance sheet (consolidated statement of financial position) as of 31 December 2017, and the consolidated statement of financial results (consolidated statement of comprehensive income), the consolidated statement of cash flows, and the consolidated statement of equity for the year then ended, and notes to the consolidated financial statements, including a summary of significant accounting policies (the "consolidated financial statements").

In our opinion, the accompanying consolidated financial statements present fairly, in all material respects, the financial position of the Organization as of 31 December 2017, and its financial performance and its cash flows for the year then ended in accordance with Ukrainian Accounting Standards ("UASs").

Basis for Opinion

We conducted our audit in accordance with International Standards on Auditing ("ISAs"). Our responsibilities under those standards are further described in the *Auditor's Responsibilities for the Audit of the Financial Statements* section of our report. We are independent of the Organization in accordance with the International Ethics Standards Board for Accountants' *Code of Ethics for Professional Accountants* (the "IESBA Code") together with the ethical requirements that are relevant to our audit of the financial statements in Ukraine, and we have fulfilled our other ethical responsibilities in accordance with these requirements and the IESBA Code. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Responsibilities of Management and Those Charged with Governance for the Consolidated Financial Statements

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

In preparing the financial statements, management is responsible for assessing the Organization's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless management either intends to liquidate the Organization or to cease operations, or has no realistic alternative but to do so.

Those charged with governance are responsible for overseeing the Organization's financial reporting process.

Auditor's Responsibilities for the Audit of the Consolidated Financial Statements

Our objectives are to obtain reasonable assurance about whether the consolidated financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with ISAs will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these consolidated financial statements.

As part of an audit in accordance with ISAs, we exercise professional judgment and maintain professional skepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the consolidated financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to the audit 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 Organization's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by management.
- Conclude on the appropriateness of management's use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the Organization's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the consolidated financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the Organization to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the consolidated financial statements, including the disclosures, and whether the consolidated financial statements represent the underlying transactions and events in a manner that achieves fair presentation.
- Obtain sufficient appropriate audit evidence regarding the financial information of the entities or business activities within the Organization to express an opinion on the consolidated financial statements. We are responsible for the direction, supervision and performance of the group audit. We remain solely responsible for our audit opinion.

We communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

Deloitte & Touche

8 June 2018

General Director



Yevhen Zanoza

Auditor's Certificate Series A No. 005431

Issued by the Audit Chamber of Ukraine on 26 June 2003

on the Basis of Resolution of the Audit Chamber of Ukraine No. 124 and

Extended Subject to Resolution of the Audit Chamber of Ukraine No. 271/2 until 26 June 2018

PJSC "Deloitte & Touche Ukrainian Services Company"

48, 50A, Zhylyanska Str., Kyiv, 01033, Ukraine


INTERNATIONAL CHARITABLE FOUNDATION "ALLIANCE FOR PUBLIC HEALTH"


CONSOLIDATED BALANCE SHEET (CONSOLIDATED STATEMENT OF FINANCIAL POSITION)

AS OF 31 DECEMBER 2017

In Ukrainian Hryvnias (thousands)

Item	Line code	At the beginning of the reporting period	At the end of the reporting period
1	2	3	4
I. Non-current assets			
Intangible assets	1000	960	1,262
Historical cost	1001	3,597	4,316
Accumulated amortization	1002	(2,637)	(3,054)
Capital investments in progress	1005	3,037	4,243
Property and equipment	1010	9,026	7,437
Historical cost	1011	20,909	25,692
Accumulated depreciation	1012	(11,883)	(18,255)
Total on Section I	1095	13,023	12,942
II. Current assets			
Inventories	1100	428,473	130,589
Production inventories	1101	416,945	121,809
Work in-progress	1102	11,528	8,780
Accounts receivable for products, goods, works, and services	1125	42	3,545
Accounts receivable on settlements:			
Advances issued	1130	4,731	9,416
With the state budget	1135	206	421
Including income tax	1136	172	342
Other current accounts receivable	1155	12,249	19,837
Cash and cash equivalents	1165	156,495	155,726
Prepaid expenses	1170	1,200	859
Other current assets	1190	3,352	-
Total on Section II	1195	606,748	320,393
III. Non-current assets held for sale and disposal groups	1200	-	-
Total assets	1300	619,771	333,335
I. Equity			
Retained earnings	1420	206,728	211,855
Total on Section I	1495	206,728	211,855
II. Non-current liabilities and provisions			
Special purpose funding	1525	376,392	89,380
Total on Section II	1595	376,392	89,380
III. Current liabilities and provisions			
Current accounts payable for:			
Goods, works, services	1615	2,537	17,827
Settlements with the state budget	1620	13	-
Including income taxes	1621	-	-
Settlements on insurance	1625	4	-
Staff costs	1630	34	29
Current payables for advances obtained	1635	20,516	2,897
Current provisions	1660	2,938	2,487
Deferred income	1665	10,599	8,859
Other current liabilities	1690	10	1
Total on Section III	1695	36,651	32,100
IV. Liabilities attributable to non-current assets held for sale and disposal groups	1700	-	-
Total equity and liabilities	1900	619,771	333,335


 A. Klepikov,
 Executive Director


 S. Liubarskiy,
 Finance Director

INTERNATIONAL CHARITABLE FOUNDATION "ALLIANCE FOR PUBLIC HEALTH"

CONSOLIDATED STATEMENT OF FINANCIAL RESULTS
(CONSOLIDATED STATEMENT OF COMPREHENSIVE INCOME)
FOR THE YEAR ENDED 31 DECEMBER 2017
In Ukrainian Hryvnias (thousands)

I. FINANCIAL RESULTS

Item	Line code	Reporting period	Similar period of the prior year
1	2	3	4
Net revenue from sale of products (goods, works, services)	2000	24,922	13,926
Cost of products sold (goods, works, services)	2050	(19,157)	(11,704)
Gross:			
Profit	2090	5,765	2,222
Loss	2095	-	-
Other operating income	2120	1,044,412	852,331
Administrative expenses	2130	(79,835)	(72,941)
Other operating expense	2180	(964,496)	(759,860)
Financial results from operating activities:			
Profit	2190	5,846	21,752
Loss	2195	-	-
Other finance income	2220	-	-
Other income	2240	-	-
Other expense	2270	(719)	(147)
Financial result before tax:			
Profit	2290	5,127	21,605
Loss	2295	-	-
Income tax expense	2300	-	-
Net financial result:			
Profit	2350	5,127	21,605
Loss	2355	-	-

II. COMPREHENSIVE INCOME

Item	Line code	Reporting period	Similar period of the prior year
1	2	3	4
Other comprehensive income before tax	2450	-	-
Income taxes attributable to other comprehensive income	2455	-	-
Other comprehensive income after tax	2460	-	-
Comprehensive income (total of lines 2350, 2355, and 2460)	2465	5,127	21,605
Net profit (loss) attributable to:			
Owners of the Parent	2470	5,127	21,605
Non-controlling interest	2475	-	-
Comprehensive income attributable to:			
Owners of the Parent	2480	5,127	21,605
Non-controlling interest	2485	-	-

III. ELEMENTS OF OPERATING EXPENSE


Item	Line code	Reporting period	Similar period of the prior year
1	2	3	4
Materials	2500	520,831	410,295
Staff costs	2505	62,350	49,079
Social charges	2510	6,914	4,861
Depreciation and amortization	2515	7,307	4,686
Other operating expenses	2520	446,929	363,880
Total	2550	1,044,331	832,801

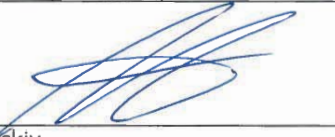
INTERNATIONAL CHARITABLE FOUNDATION "ALLIANCE FOR PUBLIC HEALTH"

CONSOLIDATED STATEMENT OF FINANCIAL RESULTS
(CONSOLIDATED STATEMENT OF COMPREHENSIVE INCOME)
FOR THE YEAR ENDED 31 DECEMBER 2017 (CONTINUED)
In Ukrainian Hryvnias (thousands)

IV. RATIOS OF EARNINGS PER SHARE

Item	Line code	Reporting period	Similar period of the prior year
1	2	3	4
Average annual number of ordinary shares	2600	-	-
Adjusted average annual number of ordinary shares	2605	-	-
Net gain (loss) per ordinary share, UAH	2610	-	-
Adjusted net gain (loss) per ordinary share, UAH	2615	-	-
Dividends per ordinary share	2650	-	-


 A. Klepikoy,
 Executive Director


 S. Liubarskiy,
 Finance Director

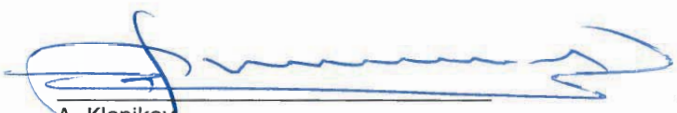
INTERNATIONAL CHARITABLE FOUNDATION "ALLIANCE FOR PUBLIC HEALTH"

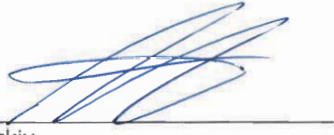
CONSOLIDATED STATEMENT OF CASH FLOWS (UNDER DIRECT METHOD)

FOR THE YEAR ENDED 31 DECEMBER 2017

In Ukrainian Hryvnias (thousands)

Item	Line code	Reporting period	Similar period of the prior year
1	2	3	4
I. Cash flows from operating activities			
Cash inflows from:			
Sales of products (goods, works, services)	3000	2,604	35,608
Return of taxes and duties	3005	-	-
Special purpose funding	3010	620,060	721,898
Advances from customers	3015	4,784	-
Proceeds from return of advances	3020	3,933	237
Income from interest on balances in current Accounts	3025	429	106
Other proceeds	3095	170	270
Cash outflows on payments for:			
Goods (works, services)	3100	(230,289)	(476,567)
Staff costs	3105	(39,706)	(37,242)
Social charges	3110	(5,500)	(4,885)
Liabilities on taxes and duties	3115	(10,281)	(14,236)
Income tax	3116	(170)	(382)
Value added tax	3117	(37)	(4,678)
Other taxes and duties	3118	(10,074)	(9,176)
Advances payment	3135	(89,721)	(23,668)
Returns of advances	3140	(45)	-
Other payments	3190	(254,858)	(200,763)
Net cash flow from operating activities	3195	1,580	758
II. Cash flows from investing activities			
Proceeds on interest received	3215	-	-
Other proceeds	3250	-	-
Payments for non-current assets	3260	(7,915)	(4,629)
Net cash flow from investing activities	3295	(7,915)	(4,629)
III. Cash flows from financing activities			
Net cash flow from financing activities	3395	-	-
Net cash flows for the reporting period	3400	(6,335)	(3,871)
Cash balance at the beginning of the year	3405	156,495	138,365
Effect of changes in foreign exchange rates on the cash balance	3410	5,566	22,001
Cash balance at the end of the year	3415	155,726	156,495



 A. Klepikov,
 Executive Director


 S. Liubarskiy,
 Finance Director

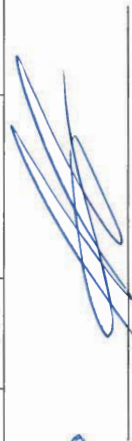
INTERNATIONAL CHARITABLE FOUNDATION "ALLIANCE FOR PUBLIC HEALTH"

CONSOLIDATED STATEMENT OF EQUITY
FOR THE YEARS ENDED 31 DECEMBER 2017 AND 2016
In Ukrainian Hryvnias (thousands)

Item	Line code	Registered capital	Revaluation reserve	Additional capital	Reserve capital	Retained earnings	Total
1	2	3	4	5	6	7	8
Balance at the beginning of the prior year	4000	-	-	-	-	185,123	185,123
Adjusted balance at the beginning of the prior year	4095	-	-	-	-	185,123	185,123
Net profit for the prior period	4100	-	-	-	-	21,605	21,605
Other comprehensive income for the prior period	4110	-	-	-	-	-	-
Total changes in equity	4295	-	-	-	-	21,605	21,605
Balance at the end of the prior year	4300	-	-	-	-	206,728	206,728
Balance at the beginning of the year	4000	-	-	-	-	206,728	206,728
Adjusted balance at the beginning of the year	4095	-	-	-	-	206,728	206,728
Net profit for the reporting period	4100	-	-	-	-	5,127	5,127
Other comprehensive income for the reporting period	4110	-	-	-	-	-	-
Total changes in equity	4295	-	-	-	-	5,127	5,127
Balance at the end of the year	4300	-	-	-	-	211,855	211,855



A. Klepikov,
Executive Director



S. Liubarskiy,
Finance Director

INTERNATIONAL CHARITABLE FOUNDATION "ALLIANCE FOR PUBLIC HEALTH"

NOTES TO THE CONSOLIDATED FINANCIAL STATEMENTS

FOR THE YEAR ENDED 31 DECEMBER 2017

In Ukrainian Hryvnias (thousands)

I. Intangible assets

Groups of intangible assets	Line code	Balance at the beginning of the year		Additions during the year	Revaluation (surplus +, deficit -)		Disposals during the year		Amortization accrued during the year	Impairment losses for the year	Other changes during the year		Balance at the end of the year	
		Historical (revalued) cost	Accumulated amortization		Historical (revalued) cost	Accumulated amortization	Historical (revalued) cost	Accumulated amortization			Historical (revalued) cost	Accumulated amortization	Historical (revalued) cost	Accumulated amortization
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Rights to use natural resources	010	-	-	-	-	-	-	-	-	-	-	-	-	-
Property rights	020	-	-	-	-	-	-	-	-	-	-	-	-	-
Trademark rights	030	-	-	-	-	-	-	-	-	-	-	-	-	-
Industrial property rights	040	-	-	-	-	-	-	-	-	-	-	-	-	-
Copyrights and related rights	050	78	16	339	-	-	-	-	48	-	-	-	417	64
	060	-	-	-	-	-	-	-	-	-	-	-	-	-
Other intangible assets	070	3,519	2,621	380	-	-	-	-	369	-	-	-	3,899	2,990
Total	080	3,597	2,637	719	-	-	-	-	417	-	-	-	4,316	3,054
Goodwill	090	-	-	-	-	-	-	-	-	-	-	-	-	-

From line 080 column 14

Cost of intangible assets with restricted ownership rights

Cost of intangible assets pledged as collateral

Cost of internally generated intangible assets

Cost of intangible assets acquired by using special purpose financing

Accumulated amortization of intangible assets with restricted ownership rights

(081)

(082)

(083)

(084)

(085)

INTERNATIONAL CHARITABLE FOUNDATION "ALLIANCE FOR PUBLIC HEALTH"

NOTES TO THE CONSOLIDATED FINANCIAL STATEMENTS

FOR THE YEAR ENDED 31 DECEMBER 2017

In Ukrainian Hryvnias (thousands)

II. Property and equipment

Groups of property and equipment	Line code	Balance at the beginning of the year		Additions during the year		Revaluation (surplus +, deficit -)		Disposals during the year		Impairment losses	Other changes for the year		Balance at the end of the year		Received under finance leases		Including Transferred to operating leases	
		Historical (revalued) cost	Accumulated depreciation	Historical (revalued) cost	Accumulated depreciation	Historical (revalued) cost	Accumulated depreciation	Historical (revalued) cost	Accumulated depreciation		Historical (revalued) cost	Accumulated depreciation	Historical (revalued) cost	Accumulated depreciation	Historical (revalued) cost	Accumulated depreciation	Historical (revalued) cost	Accumulated depreciation
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19
Land plots	100	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Investment property	105	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Capital expenditure on land improvement	110	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Buildings, constructions, and transmission equipment	120	28	28	-	-	-	-	-	-	-	-	-	28	28	-	-	-	-
Machinery and equipment	130	8,475	6,377	3,287	-	-	487	487	3,045	-	-	-	11,275	8,935	-	-	-	-
Vehicles	140	8,985	2,971	-	-	-	-	-	1,797	-	-	-	8,985	4,768	-	-	-	-
Tools, devices, and fixtures (furniture)	150	1,625	711	398	-	-	-	-	432	-	-	-	2,023	1,143	-	-	-	-
Livestock	160	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Perennial plants	170	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Other fixed assets	180	404	404	-	-	-	11	11	-	-	-	-	393	393	-	-	-	-
Library stock	190	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Low-value non-current tangible assets	200	1,392	1,392	1,616	-	-	20	20	1,616	-	-	-	2,988	2,988	-	-	-	-
Temporary constructions	210	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Natural resources	220	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Returnable containers	230	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Leased items	240	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Other non-current tangible assets	250	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Total	260	20,909	11,883	5,301	-	-	518	518	6,890	-	-	-	25,692	18,255	-	-	-	-

From line 260 column 14

Cost of property and equipment for which there is a restriction of ownership rights in accordance with the effective legislation

Cost of property and equipment pledged as collateral

Net book value of temporarily idle assets (conservation, reconstruction, etc.)

Historical (revalued) cost of fully depreciated property and equipment

Leased property and equipment of integral property complexes

Cost of property and equipment decommissioned for sale

Net book value of property and equipment disposed as a result of extraordinary events

Cost of property equipment acquired by using special purpose financing

Cost of property and equipment received under operating Leases

Accumulated depreciation of property and equipment with restricted ownership rights

Cost of investment property measured at fair value

(261)	-
(262)	-
(263)	-
(264)	7,026
(2641)	-
(265)	-
(2651)	-
(266)	-
(267)	-
(268)	-
(269)	-

INTERNATIONAL CHARITABLE FOUNDATION "ALLIANCE FOR PUBLIC HEALTH"

**NOTES TO THE CONSOLIDATED FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2017 (CONTINUED)**
In Ukrainian Hryvnias (thousands)

III. Capital investments

Item	Line code	For the year	At the end of the year
1	2	3	4
Construction in progress	280	-	-
Acquisition (construction) of property and equipment	290	3,790	97
Acquisition (construction) of other non-current tangible assets	300	1,903	189
Acquisition (creation) of intangible assets	310	1,662	3,957
Acquisition (cultivation) of non-current biological assets	320	-	-
Other	330	-	-
Total	340	7,355	4,243

From line 340 column 3 Capital investments to investment property _____ -
 Finance costs included in capital investments _____ -

IV. Financial investments

Item	Line code	For the year	At the end of the year	
			Non-current	Current
1	2	3	4	5
A. Financial investments accounted under the equity method in:				
Associates	350	-	-	-
Subsidiaries	360	-	-	-
Joint ventures	370	-	-	-
B. Other financial investments in:				
Stakes in contributed capital of other companies	380	-	-	-
Shares	390	-	-	-
Bonds	400	-	-	-
Other	410	-	-	-
Total (Section A + Section B)	420	-	-	-

From line 1035 column 4 of balance sheet (statement of financial position)

Other non-current financial investments presented at:

Cost (421) _____ -
 Fair value (422) _____ -
 Amortized cost (423) _____ -

From line 1160 column 4 of balance sheet (statement of financial position)

Current financial investments presented at:

Cost (424) _____ -
 Fair value (425) _____ -
 Amortized cost (426) _____ -

V. Income and expense

Item	Line code	Income	Expense
1	2	3	4
A. Other operating income and expense			
Operating leases of assets	440	-	58
Operating foreign exchange difference	450	64,001	57,702
Sale of other current assets	460	-	-
Penalties, fines, forfeits	470	282	26
Maintenance of housing and utility, social and cultural units	480	-	-
Other operating income and expense	490	980,129	906,710
Including:			
Charges to provision for doubtful debt	491	X	-
Non-productive expense and losses	492	X	-

INTERNATIONAL CHARITABLE FOUNDATION "ALLIANCE FOR PUBLIC HEALTH"**NOTES TO THE CONSOLIDATED FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2017 (CONTINUED)***In Ukrainian Hryvnias (thousands)***V. Income and expense (Continued)**

Item	Line code	Income	Expense
1	2	3	4
B. Income and expense from investments in:			
Associates	500	-	-
Subsidiaries	510	-	-
Joint ventures	520	-	-
C. Other finance income and expense:			
Dividends	530	-	X
Interest	540	X	-
Finance leases of assets	550	-	-
Other finance income and expense	560	-	-
D. Other income and expense			
Sale of financial investments	570	-	-
Income from business combination	580	-	-
Result of revaluation	590	-	-
Non-operating foreign exchange difference	600	-	-
Assets received free of charge	610	-	X
Write-off of non-current assets	620	X	-
Other income and expense	630	-	719

Exchange (barter) transactions with products (goods, works, services)	(631)	-
Share in revenues from sale of products (goods, works, services) under exchange (barter) contracts with related parties	(632)	-
From line 540-560 column 4: Finance costs included in cost of sales from operating activities	(633)	-

VI. Cash and cash equivalents

Item	Line code	At the end of the year
1	2	3
Cash on hand	640	-
Current accounts with banks	650	155,712
Other accounts with banks (letters of credit, checks)	660	-
Cash in transit	670	14
Cash equivalents	680	-
Total	690	155,726

From line 1090 column 4 of balance sheet (statement of financial position) – Restricted cash	(691)	-
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INTERNATIONAL CHARITABLE FOUNDATION "ALLIANCE FOR PUBLIC HEALTH"

NOTES TO THE CONSOLIDATED FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2017 (CONTINUED)*In Ukrainian Hryvnias (thousands)*

VII. Provisions and reserves

Types of provisions and reserves	Line code	Balance at the beginning of the year	Increase during the reporting period		Used during the year	Reversed unused amount in the reporting period	Expected recovery of losses by other parties included in the provision valuation	Balance at the end of the year
			Accrued (created)	Additional charges				
1	2	3	4	5	6	7	8	9
Provision for unused vacations	710	2,938	2,487	-	2,232	706	-	2,487
Provision for subsequent expense on additional retirement benefits	720	-	-	-	-	-	-	-
Provision for subsequent expense on guarantee obligations	730	-	-	-	-	-	-	-
Provision for subsequent restructuring expense	740	-	-	-	-	-	-	-
Provision for subsequent expense under onerous contract liabilities	750	-	-	-	-	-	-	-
Other provisions	760	-	-	-	-	-	-	-
Insurance reserves	770	-	-	-	-	-	-	-
Provision for doubtful debts	775	40	-	-	-	-	-	40
Total	780	2,978	2,487	-	2,232	706	-	2,527

INTERNATIONAL CHARITABLE FOUNDATION "ALLIANCE FOR PUBLIC HEALTH"

**NOTES TO THE CONSOLIDATED FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2017 (CONTINUED)**
In Ukrainian Hryvnias (thousands)

VIII. Inventories

Item	Line code	Carrying amounts at the end of the year	Revaluation during the year	
			Increase in net realizable value*	Revaluation decrease
1	2	3	4	5
Raw materials and supplies	800	322	-	-
Purchased semi-finished products and component parts	810	-	-	-
Fuel	820	32	-	-
Containers and packaging inventory	830	-	-	-
Construction materials	840	-	-	-
Spare parts	850	173	-	-
Agricultural materials	860	-	-	-
Current biological assets	870	-	-	-
Low-value items	880	121,282	-	11,568
Work in progress	890	8,780	-	-
Finished goods	900	-	-	-
Merchandise	910	-	-	-
Total	920	130,589	-	-

From line 920 column 3 Carrying amounts of inventories:

Presented at net realizable value	(921)	-
Transferred to processing	(922)	-
Pledged as collateral	(923)	-
Transferred to commission	(924)	-

Assets at custodial storage (off-balance account 02)

(925) -

From line 1200 column 4 of balance sheet (statement of financial position) – Inventories held for sale

(926) -

* Determined according to Paragraph 28 of Ukrainian Accounting Standard 9 "Inventories".

IX. Accounts receivable

Item	Line code	Total at the end of the year	Including by aging		
			Up to 12 months	From 12 to 18 months	From 18 to 36 months
1	2	3	4	5	6
Accounts receivable for goods, works, services	940	3,545	3,545	-	-
Other current accounts receivable	950	19,837	19,697	140	-

Bad debts written off in the reporting year	(951)	-
From lines 940 and 950 column 3 Accounts receivable from related parties	(952)	-

X. Shortages and losses from inventory damage

Item	Line code	Amount
1	2	3
Identified (written off) shortages and losses during the year	960	-
Recognized as liabilities of responsible persons in the reporting year	970	-
Shortages and losses for which responsible persons were not identified at year end (off-balance sheet account 072)	980	-

INTERNATIONAL CHARITABLE FOUNDATION "ALLIANCE FOR PUBLIC HEALTH"

**NOTES TO THE CONSOLIDATED FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2017 (CONTINUED)**
In Ukrainian Hryvnias (thousands)

XI. Construction contracts

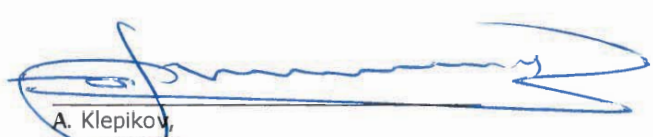
Item	Line code	Amount
1	2	3
Income from construction contracts during the reporting year	1110	-
Accounts payable and receivable at the end of the reporting year:		
Gross from customers	1120	-
Gross to customers	1130	-
Advances received	1140	-
Amount of funds in transit at the year end	1150	-
Cost of works performed by subcontractors under construction contracts in progress	1160	-

XII. Income taxes

Item	Line code	Amount
1	2	3
Current income tax	1210	-
Deferred tax assets:		
At the beginning of the reporting year	1220	-
At the end of the reporting year	1225	-
Deferred tax liabilities:		
At the beginning of the reporting year	1230	-
At the end of the reporting year	1235	-
Included into Statement of Financial Results – Total	1240	-
Including:		
Current income tax	1241	-
Decrease (increase) in deferred tax assets	1242	-
Increase (decrease) in deferred tax liabilities	1243	-
Presented in equity – Total	1250	-
Including:		
Current income tax	1251	-
Decrease (increase) in deferred tax assets	1252	-
Increase (decrease) in deferred tax liabilities	1253	-

XIII. Use of depreciation and amortization charges

Item	Line code	Amount
1	2	3
Charged during the reporting year	1300	7,307
Used during the year – Total	1310	7,355
Including for:		
Construction	1311	-
Acquisition (construction) and improvement of property and equipment	1312	3,790
Including machinery and equipment	1313	-
Acquisition (construction) of intangible assets	1314	1,662
Repayment of borrowings received for capital investments	1315	-
Acquisition (construction) of other non-current tangible assets	1316	1,903
	1317	-



A. Klepikov,
Executive Director



S. Liubarskiy,
Finance Director

INTERNATIONAL CHARITABLE FOUNDATION "ALLIANCE FOR PUBLIC HEALTH"

EXPLANATORY NOTES TO THE CONSOLIDATED FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 DECEMBER 2017

In Ukrainian Hryvnias (thousands) unless otherwise indicated

1. GENERAL INFORMATION

International Charitable Foundation "Alliance for Public Health" ("Alliance") which up to 22 December 2015 was known as International Charitable Foundation "International HIV/AIDS Alliance in Ukraine" is an international charitable foundation established under provisions of the Law of Ukraine "On charity and charitable organizations" in late 2002. It began operations from its registration with the Ministry of Justice of Ukraine in March 2003. The Alliance has a status of international charitable organization pursuant the Certificate on State Registration of Charitable Organization issued by the Ministry of Justice of Ukraine. On acquiring managerial independence from its founder, International HIV/AIDS Alliance (United Kingdom), at the beginning of 2009, the Alliance became an independent organization sharing the key values and retaining membership in the International HIV/AIDS Alliance Global Partnership.

The consolidated financial statements comprise the financial statements of the Alliance and its wholly owned subsidiary LLC "Alliance Consultancy" (previously known as LLC "Alliance-Ukraine Consultancy") registered in Kyiv, Ukraine (the "Organization").

The Organization's mission is to support community action against HIV/AIDS, reduce the spread of the HIV and related epidemics through disseminating effective services and approaches, strengthening health care systems and social services, and building the capacity of vulnerable communities.

The core business of the wholly owned subsidiary, LLC "Alliance Consultancy", is rendering consulting services on fighting HIV infection and AIDS to its customers.

The activities of the Organization are financed by grants and donations. One of the major grants is provided by the Global Fund to Fight AIDS, Tuberculosis, and Malaria (hereafter, the "Global Fund") directly to the Organization and is used to fund the Program "Investing for Impact against Tuberculosis and HIV" (hereafter, the "Program"). The agreement for the Grant #UKR-C-AUA-613 under the Program was signed on 23 February 2015 and had effective date on 1 January 2015. Total initially planned amount of funding according to the Grant confirmation issued on 23 February 2015 is equal to USD 68,799 thousand and has ending date of 31 December 2017. During the year ended 31 December 2017, the Organization received USD 15,443 thousand (equivalent to UAH 411,140 thousand) for the Program's implementation.

In order to implement the Program the Organization uses services of other organizations located in different regions of Ukraine, so-called Sub-Recipients. The Organization disburses funds to its Sub-Recipients and monitors their activities and respective expenditures by checking their regular reports. The total number of Sub-Recipients the Organization worked with during the year ended 31 December 2017 was 84. Sub-Recipients implement program activities at their locations.

The overall goal of the Program is to reduce the tuberculosis and HIV/AIDS-related morbidity and mortality in Ukraine.

The specific tasks of the Program are as follows:

- Scale up and ensure equitable access to high quality tuberculosis and human immunodeficiency virus ("HIV") prevention, treatment, care and support with a focus on key affected populations (most-at-risk populations, people living with HIV/AIDS, and other people most affected by the HIV and tuberculosis epidemic);
- Strengthen the health systems towards sustainable and integrated solutions for key populations mostly affected by the HIV and tuberculosis epidemic;
- Strengthen community systems that enable needs-based, cost-effective, and integrated interventions for key populations mostly affected by the HIV and tuberculosis epidemic.

During the year ended 31 December 2017 the Organization was also financed by the Global Fund for the Program "Fast-Track TB/HIV responses for key populations in EECA cities". Total amount of financing received under this program during the year ended 31 December 2017 was USD 2,355 thousand.

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On 13 September 2012 the Organization signed Notice of Award ("NOA") with the Centers for Disease Control and Prevention ("CDC") to implement the program "Engaging Local Indigenous Organizations in Developing HIV/AIDS Monitoring and Evaluation Capacity in Ukraine under the President's Emergency Plan for AIDS Relief". The program's period is from 30 September 2012 until 31 March 2018. As of 31 December 2017 the budget confirmed by NOAs for the period from 1 April 2017 until 31 March 2018 was USD 4,362 thousand. During the years ended 31 December 2017 and 2016, the Organization received financing from CDC under the program in the amount of USD 3,740 thousand and USD 2,142 thousand, respectively.

On 27 January 2016 the Organization signed Notice of Award with CDC to implement the program "Improved Quality and Sustainability of Medication Assisted Treatment in Ukraine under the President's Emergency Plan for AIDS Relief". The program's period is from 1 February 2016 until 31 January 2021. As of 31 December 2017 the budget confirmed by NOAs for the period from 1 February 2017 until 31 January 2018 was USD 750 thousand. During the year ended 31 December 2017 the Organization received financing from CDC under the program in the amount of USD 575 thousand, and USD 317 thousand, respectively.

During the years ended 31 December 2017 and 2016, the Organization was also financed by other donors: Robert Carr civil society Networks Fund, French Agency for International Technical Expertise, USAID and others.

In 2017 and 2016, the Organization employed on the average 55 persons. In addition, during the years ended 31 December 2017 and 2016, the Organization used services of individual entrepreneurs attracted on a regular or temporary basis.

The registered office of the Organization is located at: Floor 9, Building 10a, 5 Dilova Str., Kyiv, 03150, Ukraine.

2. OPERATING ENVIRONMENT

In the recent years, Ukraine has been in a political and economic turmoil. Crimea, an autonomous republic of Ukraine, was effectively annexed by the Russian Federation. In 2017, an armed conflict continued in certain parts of Luhansk and Donetsk regions. These events resulted in higher inflation, devaluation of the national currency against major foreign currencies, decrease of GDP, illiquidity, and volatility of financial markets.

In 2017, annual inflation rate amounted to 13.7% (2016: 12.4%). The Ukrainian economy proceeded recovery from the economic and political crisis of previous years that resulted in real GDP smooth growth of around 2.5% (2016: 1.4%) and stabilization of national currency. From trading perspective, the economy was demonstrating refocusing on the European Union ("EU") market, which was a result of the signed Association Agreement with the EU in January 2016 that established the Deep and Comprehensive Free Trade Area ("DCFTA"). Under this agreement, Ukraine has committed to harmonize its national trade-related rules, norms, and standards with those of the EU, progressively reduce import customs duties for the goods originating from the EU member states, and abolish export customs duties during a 10-year transitional period. Implementation of DCFTA began on 1 January 2017. As a result, the Russian Federation implemented a trade embargo or import duties on key Ukrainian export products. In response, Ukraine implemented similar measures against Russian products.

In terms of currency regulations, the National Bank of Ukraine ("NBU") decreased the required share of mandatory sale of foreign currency proceeds from 65% to 50% from April 2017, increased settlement period for export-import transactions in foreign currency from 120 to 180 days from May 2017, and allowed companies to pay the 2013 (and earlier) dividends with a limit of USD 2 million per month from November 2017 (from June 2016, companies were allowed to pay dividends for 2014-2016 to non-residents with a limit of USD 5 million per month).

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In March 2015, Ukraine signed four-year Extended Fund Facility program ("EFF") with the International Monetary Fund ("IMF") that will last until March 2019. The total program amounted to USD 17.5 billion, while Ukraine has so far received only USD 8.7 billion from the entire amount. In September 2017, Ukraine successfully issued USD 3 billion of Eurobonds, of which USD 1.3 billion is new financing, with the remaining amount aimed to refinance the bonds due in 2019. The NBU expects that Ukraine will receive another USD 3.5 billion from the IMF in 2018. To receive next tranches, the government of Ukraine has to implement certain key reforms, including in such areas as pension system, anti-corruption regulations, and privatization.

Further stabilization of the economic and political situation depends, to a large extent, upon success of the Ukrainian government's efforts, yet further economic and political developments are currently difficult to predict.

3. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES**General information**

The accompanying consolidated financial statements of the Organization have been prepared in accordance with Ukrainian Accounting Standards ("UASs"), as approved by the Ministry of Finance of Ukraine and registered with the Ministry of Justice of Ukraine as of the date of the consolidated financial statements preparation.

The accompanying consolidated financial statements were prepared as of 31 December 2017 and cover the period from 1 January 2017 to 31 December 2017 and the period from 1 January 2016 to 31 December 2016 for comparison.

These consolidated financial statements have been prepared in the national currency of Ukraine, Ukrainian Hryvnias ("UAH"). Unless otherwise indicated, the amounts are presented in UAH and in thousands.

These consolidated financial statements have been prepared on a going concern basis which contemplates that the Organization will be able to operate in the foreseeable future.

Basis of consolidation

The consolidated financial statements incorporate the financial statements of the Alliance (the "Parent") and the entity controlled by the Parent, "Alliance Consultancy" LLC (the "subsidiary"). Control is achieved when the Parent has the power to govern the financial and operating policies of an entity, either directly or indirectly, so as to obtain benefits from its activities. The financial statements of the subsidiary are included in the consolidated financial statements of the Organization from the date when control effectively commences.

When necessary, adjustments are made to the financial statements of the subsidiary to bring its accounting policies into line with those used by the Parent.

All intra-group transactions, balances, income and expenses are eliminated in full on consolidation.

Intangible assets

Intangible assets acquired by the Organization and which have finite useful lives consist primarily of software.

Software rights acquired or received free of charge are carried at cost, less accumulated amortization and accumulated impairment losses. Amortization of intangible assets is recognized on a straight-line basis over their estimated useful lives (mainly three years). Amortization of intangible assets commences when the assets are ready for their intended use.

Intangible assets of the Organization have been predominantly acquired at the cost of special purpose funds.

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All property and equipment items are carried at historical cost, less any accumulated depreciation and accumulated impairment losses. Historical cost of property and equipment consists of the purchase price, non-refundable indirect taxes related to their purchase, costs of installation, and maintenance of property and equipment, and other directly attributable costs of bringing the property and equipment items to working condition for their intended use.

Depreciation of all groups of property and equipment is calculated using a straight line method over the following useful lives:

	<u>Years</u>
Buildings, constructions and transmission equipment	20 years
Machinery and equipment	2 years
Vehicles	5 years
Tools, devices, and fixtures (furniture)	4 years
Other fixed assets	4 years
Low-value non-current tangible assets	Fully depreciated when put into operation

The residual value, useful lives, and depreciation methods are reviewed at each financial year-end. The effect of any changes from previous estimates is accounted for as a change in an accounting estimate.

Historical cost of property and equipment items is increased by the expenditures related to the property and equipment item's improvement (modernization, modification, additional construction, equipment installation, reconstruction, etc.), which increases future economic benefits initially expected from the use of an item of property and equipment. Capitalized cost of property and equipment improvement is depreciated using the straight-line method at the same rates as the respective property and equipment items.

Repairs and maintenance expenditures, as well as costs related to servicing of assets, are included in the consolidated statement of financial results for the period when incurred.

Gain or loss arising on the disposal of an item of property and equipment is determined as the difference between the sales proceeds and carrying amounts and included in other income or expense from ordinary activities.

The Organization's property and equipment have been predominantly acquired at the cost of special purpose funds.

Impairment of tangible and intangible assets

At each balance sheet date, the Organization reviews the carrying amounts of its tangible and intangible assets to determine whether there is any indicator that those assets have suffered an impairment loss. If any such indicator exists, the recoverable amount of the asset is estimated in order to determine the extent of the impairment loss (if any). Where it is not possible to estimate the recoverable amount of an individual asset, the Organization estimates the recoverable amount of the cash-generating unit to which the asset belongs.

Capital investments in progress

Item of capital investments in progress reflects the cost of capital investments (incomplete at the balance sheet date) in the non-current assets transferred for modernization, which will increase their initial cost, as well as the cost of other property and equipment items that are not yet ready for use.

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Inventories

Inventories are mainly represented by drugs, other health care medications, and handout materials. An accounting unit of inventories is acknowledged to be a homogeneous group, batch, or type.

Inventories are carried at cost that includes expenditure incurred in acquiring inventories, delivering, and bringing them to their existing condition for the intended use. Disposal cost of inventories is determined for individual groups using average weighted cost method and identifiable cost of individual inventory items. As of the balance sheet date, the Organization reviews the expiry dates of inventories (including drugs) and, if they are short-term or delayed, writes off the respective inventories. Inventories are recorded net of provision for slow moving, damaged, or obsolete assets.

Accounts receivable on advances made

Accounts receivable on advances made are represented by the advances issued to suppliers in the course of purchasing equipment, inventories, including medical supplies, services, etc. in order to conduct programmatic activities and are carried as advances issued, less any provision for doubtful debts.

Other current accounts receivable

Other current accounts receivable of the Organization are mostly attributable to the sub-recipients that receive financing through the Organization from the Global Fund and other donors. As of each balance sheet date, the Organization reviews the intended use of advances by sub-recipients and assesses the recoverability of funds from them in the event the expenses are recognized as inappropriate. Other current accounts receivable are carried on the balance sheet net of the provision for doubtful debts.

Provision for doubtful debts

The amount of provision for doubtful debts is determined by the Organization's management based on their estimates regarding possibility of sub-recipients to perform the programmatic activities in accordance with the sub-grant agreement. The provision is created when there is objective evidence that the Organization may fail to obtain the proof from the sub-recipients that their programmatic activities were carried in accordance with the terms of the sub-grant agreement. The Organization also creates the provision for doubtful debts the recovery on which is considered as doubtful.

Cash and cash equivalents

Cash and cash equivalents include cash on hand and cash on current accounts with banks.

Prepaid expenses

Prepaid expenses are stated at the actual cost of the funds paid. Prepaid expenses are recognized in the consolidated statement of financial results when they are incurred.

Deferred income

Deferred income is mainly represented by the net book value of property and equipment and intangible assets acquired at the donors' financing and not yet fully depreciated or amortized. Deferred income is reduced by other operating income in the consolidated statement of financial results in respective amounts that match with the depreciation and amortization charge recognized during the reporting period on such property and equipment and intangible assets.

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Special purpose funding is initially recognized when the respective cash proceeds are received from donors. Special purpose funding is subsequently reduced by the amount of incurred expenses related to the program with simultaneous recognition of other operating income. Cost of property and equipment and intangible assets acquired at the expense of special purpose funding is depreciated and amortized over their useful lives, with simultaneous recognition of other operating income. Balance of the special purpose funding received in respect of which the Organization has not yet incurred expenditures is recorded on the Organization's balance sheet in section "Non-current Liabilities and Provisions".

Current accounts payable for goods, works, services

Current accounts payable for goods, works, services are mainly represented by the amounts due to the suppliers of drugs and other suppliers.

Cost of products sold (goods, works, services)

Cost of products sold (goods, works, services) is represented by cost of the services realized by LLC "Alliance Consultancy" and comprises predominantly payment for the services rendered by external suppliers.

Financial instruments

Financial instruments are recognized when the Organization becomes a party to the contractual provisions of the instruments. Financial assets and financial liabilities are initially measured at fair value. Transaction costs that are directly attributable to the acquisition or issue of financial assets and financial liabilities (other than financial assets and financial liabilities at fair value through profit or loss) are added to or deducted from the fair value of the financial assets or financial liabilities, as appropriate, on initial recognition. Transaction costs directly attributable to the acquisition of financial assets or financial liabilities at fair value through profit or loss are recognized immediately in profit or loss.

The Organization's financial assets are subsequently measured at amortized cost using the effective interest rate method, less any impairment.

The effective interest rate method is a method of calculating the amortized cost of a financial asset (liability) and of allocating interest income (expense) over the relevant period. The effective interest rate is the rate that exactly discounts estimated future cash receipts (payments), including all fees on points paid or received that form an integral part of the effective interest rate, transaction costs, and other premiums or discounts, through the expected life of the financial asset (liability), or, where appropriate, a shorter period to the net carrying amount on initial recognition.

Financial assets are assessed for indicators of impairment at the end of each reporting period. Financial assets are considered to be impaired when there is objective evidence that, as a result of one or more events that occurred after the initial recognition of the financial asset, the estimated future cash flows of the investment have been affected.

Objective evidence of impairment could include:

- Significant financial difficulty of the issuer or counterparty; or
- Breach of contract, such as a default or delinquency in interest or principal payments; or
- It becoming probable that the borrower will enter bankruptcy or financial re-organization; or
- The disappearance of an active market for that financial asset because of financial difficulties.

The Organization's financial liabilities are subsequently measured at amortized cost using the effective interest rate method, with interest expense recognized on an effective yield basis.

INTERNATIONAL CHARITABLE FOUNDATION "ALLIANCE FOR PUBLIC HEALTH"**EXPLANATORY NOTES TO THE CONSOLIDATED FINANCIAL STATEMENTS
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Revenue of the Organization is attributable to its subsidiary, "Alliance Consultancy" LLC, for providing consultancy services. Revenue from rendering of services is recognized by reference to the stage of completion of the transaction at the end of the reporting period, if its outcome can be reliably estimated. The outcome of a transaction can be estimated reliably when all the following conditions are satisfied:

- The amount of revenue can be measured reliably;
- It is probable that the economic benefits associated with the transaction will flow to the entity;
- The stage of completion of the transaction at the end of the reporting period can be measured reliably; and
- The costs incurred for the transaction and the costs to complete the transaction can be measured reliably.

Expense recognition

Expense incurred by the Organization is represented by the costs of services rendered by subcontractors, office premises leases, payroll expenses, and other services.

Administrative expenses mainly consist of payroll expenses to the Organization's employees and other expenses.

All expenses are recognized as expenses of the period when they are incurred and included in profit or loss based on the accrual method.

Operating leases

Operating lease is a lease under which the Organization does not obtain substantially all the risks and rewards of use and ownership of the asset. Rental costs are recognized in the consolidated financial statements as expense of the current period over the term of the relevant lease. Rentals are prepaid by the Organization for the period of no longer than 12 months from the balance sheet date and recognized as "Accounts Receivable on Advances Issued".

Foreign currency transactions

Monetary assets and liabilities denominated in foreign currencies are translated into UAH at the exchange rates established by the National Bank of Ukraine at the end of the reporting period. Revenue and expense denominated in foreign currencies are translated at the exchange rates established by the National Bank of Ukraine at the dates of the respective transactions. All realized and unrealized gains and losses arising on exchange differences are recognized in the consolidated statement of financial results.

The relevant exchange rates were as follows:

	As of 31 December 2017	Average exchange rate for 2017	As of 31 December 2016	Average exchange rate for 2016
UAH/USD	28.0672	26.5966	27.1909	25.5513
UAH/EUR	33.4954	30.0042	28.4216	28.2919
UAH/GBP	37.7337	34.2487	33.3208	34.7008

Contingent liabilities and assets

Contingent liabilities are not recognized in the consolidated financial statements. They are disclosed in the explanatory notes to the consolidated financial statements unless the possibility of an outflow of resources embodying economic benefits is remote.

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Contingent assets are not recognized in the consolidated financial statements but disclosed in the explanatory notes to the consolidated financial statements when an inflow of economic benefits is probable.

Income taxes

The Alliance is registered as a non-tax payer, so, except for certain transactions the amount of which is not material, all income tax expenses are attributable to the subsidiary of the Organization, "Alliance Consultancy" LLC. Income tax expense is based on the sum of profit or loss for the year and deferred tax. According to the Organization's management, deferred income taxes were immaterial for the years ended 31 December 2017 and 2016 and, thus, they were not recognized in the consolidated financial statements.

Use of estimates and assumptions

The preparation of the financial statements under UASs requires that management of the Organization makes estimates and assumptions that affect the reported amounts of assets and liabilities, the disclosure of contingent assets and liabilities as of the reporting date, and the amounts of revenue and expense reported during the reporting period. The actual results may differ from such estimates.

The main Organization's estimates and underlying assumptions are related to the net realizable value of inventory. The estimates and underlying assumptions are reviewed on an ongoing basis. Revisions to accounting estimates are recognized in the period in which the estimate is revised if the revision affects only that period or in the period of the revision and future periods if the revision affects both current and future periods.

4. CASH AND CASH EQUIVALENTS

As of 31 December 2017 and 2016, cash and cash equivalents represented by balances on current accounts with banks were as follows:

	31 December 2017	31 December 2016
USD-denominated cash	119,559	130,975
UAH-denominated cash	33,065	6,787
GBP-denominated cash	1,936	5,082
EUR-denominated cash	1,166	13,651
Total	155,726	156,495

As of 31 December 2017 almost all cash and cash equivalents balances of the Organization (93% of the consolidated amount) were placed on current accounts at one of the Ukrainian banks owned by a large European financial group with risk rating "B-" according to Fitch ratings, which is the same as the rating of Ukraine.

5. OTHER CURRENT ACCOUNTS RECEIVABLE

As of 31 December 2017 and 2016, other current accounts receivable were represented by advances issued by the Organization to sub-recipients that implement programmatic activities funded by the Global Fund and other donors in the amount of UAH 19,837 thousand and UAH 12,239 thousand, respectively, net of provision for doubtful debt, as well as other accounts receivable in the amount of UAH 4 thousand and UAH 10 thousand, respectively.

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Movements in provision for doubtful debt for the years ended 31 December 2017 and 2016 were as follows:

	<u>2017</u>	<u>2016</u>
Balance at the beginning of the year	40	455
Amounts written off during the year	-	(415)
Balance at the end of the year	<u>40</u>	<u>40</u>

6. CAPITAL INVESTMENTS IN PROGRESS

As of 31 December 2017, capital investments in progress included mainly software with historical cost of UAH 3,859 thousand (as of 31 December 2016: UAH 3,014 thousand), which is being developed by the third parties for the purpose of different programs implemented by the Organization.

7. OTHER OPERATING INCOME

Other operating income for the years ended 31 December 2017 and 2016 were as follows:

	<u>2017</u>	<u>2016</u>
Income on current assets received free of charge (at the cost of special purpose funds)	979,700	796,656
Realized forex gain	64,001	55,569
Other	711	106
Total	<u>1,044,412</u>	<u>852,331</u>

8. OTHER OPERATING EXPENSE

Other operating expense for the years ended 31 December 2017 and 2016 were as follows:

	<u>2017</u>	<u>2016</u>
Purchase of inventories	539,073	407,981
Expenses of sub-recipients	271,921	189,555
Costs of services	90,413	128,073
Losses on operating translation differences	57,702	32,643
Other	5,387	1,608
Total	<u>964,496</u>	<u>759,860</u>

9. OTHER PAYMENTS

Other payments included in cash flows from operating activities for the years ended 31 December 2017 and 2016 were as follows:

	<u>2017</u>	<u>2016</u>
Funds issued to sub-recipients	(249,164)	(195,502)
Return of the funds unused to donors	(37)	-
Other	(5,657)	(5,261)
Total	<u>(254,858)</u>	<u>(200,763)</u>

INTERNATIONAL CHARITABLE FOUNDATION "ALLIANCE FOR PUBLIC HEALTH"**EXPLANATORY NOTES TO THE CONSOLIDATED FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2017***In Ukrainian Hryvnias (thousands) unless otherwise indicated***10. RELATED PARTY TRANSACTIONS**

Major part of related party transactions during the years ended 31 December 2017 and 2016 were current remuneration payments to the Organization's key management personnel.

For the year ended 31 December 2017, total remuneration to the Organization's key management personnel represented by 9 employees was included in administrative expenses and amounted to UAH 18,569 thousand (2016: UAH 17,947 thousand and 10 employees, respectively).

For the year ended 31 December 2017, total amount of services purchased by "Alliance Consultancy" LLC from its key management personnel was included into cost of sales and amounted to UAH 2,695 thousand (2016: UAH 1,766 thousand).

As of 31 December 2017, the Organization had unused vacation provision accrued in respect of key management personnel in the amount of UAH 941 thousand. As of 31 December 2016, the Organization had unused vacation provision accrued in respect of key management personnel in the amount of UAH 969 thousand and current accounts payable for goods, works, services in the amount of UAH 418 thousand.

The total amount of services and goods purchased by the Alliance from LLC "Alliance Consultancy" for the year ended 31 December 2017 amounted, respectively UAH 11,514 thousand and UAH 750 thousand.

11. CONTINGENCIES AND CONTRACTUAL COMMITMENTS**Taxation**

The Alliance is a non-profit organization and is subject to specific tax requirements. Ukraine's tax environment is characterized by complexity in tax administering, arbitrary interpretation by tax authorities of tax laws and regulations that, inter alia, can increase fiscal pressure on tax payers. Inconsistent application, interpretation, and enforcement of tax laws can lead to litigation which, as a consequence, may result in the imposition of additional taxes, penalties, and interest, and these amounts could be material. Facing current economic and political issues, the government has implemented certain reforms in the tax system of Ukraine by adoption of the Law "On amending the Tax Code of Ukraine and certain laws of Ukraine" which became effective from 1 January 2015.

Management believes that the Organization has been in compliance with all requirements of the effective tax legislation.

Legal issues

The Organization is involved in litigation and other claims that are in the ordinary course of its business activities, none of which has had, individually or in the aggregate, a material adverse impact on the Organization.

Contingencies

On 21 July 2017, the Office of the Inspector General ("OIG") issued a report on the Global Fund grants in Ukraine. The investigation's fieldwork was carried out in 2017 and it covered the procurements of RDTs (CITO tests) in the period of November 2014 – November 2015 using grant funds. The Global Fund has found that certain Grant Funds have been used by the Organization in deviation from the Grant Agreements. The amount of the Organization's expenditures classified as non-compliant in accordance with the Global Fund QA policy is USD 175 thousand. On 13 November 2017, the Global Fund requested to refund this amount to the bank account of the Global Fund by 12 January 2018.

INTERNATIONAL CHARITABLE FOUNDATION "ALLIANCE FOR PUBLIC HEALTH"

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FOR THE YEAR ENDED 31 DECEMBER 2017*In Ukrainian Hryvnias (thousands) unless otherwise indicated*

On 21 December 2017, the Organization responded to Global Fund that the request cannot be satisfied immediately and made alternative propositions for resolution of the issue. In particular, the Organization notified the Global Fund about ongoing negotiations with the manufacturer of CITO tests and that the refund of USD 175 thousand could be compensated by them. On 11 January 2018, the Global Fund requested additional information and notified Organization that this issue have to be discussed by the Recovery Committee of the Global Fund. As at date of this report, the Organization is attempting to reach an agreement with the manufacturer and its proprietary entities on potential compensation. So far, the Recovery Committee has not held meeting yet and, consequently the issue was not yet discussed. The outcome of this discussion is uncertain yet and the management of the Organization believes in its positive resolution, thus no provision or adjustment was made in this Special Purpose Grant Program Financial Statement.

Contractual commitments

As of 31 December 2017 and 2016, the Organization had the following commitments under non-cancelable agreements for acquisition of:

	31 December 2017	31 December 2016
Health care goods and medical equipment	1,633	2,798
Drugs and pharmaceutical products	1,402	53,501
Other	457	433
Total	3,492	56,732

12. RISK MANAGEMENT POLICIES

Major categories of the Organization's financial instruments were as follows:

	31 December 2017	31 December 2016
Financial assets		
Cash and cash equivalents	155,726	156,495
Accounts receivable for products, goods, works, and services	3,545	42
Other current accounts receivable ¹	4	10
Total financial assets	159,275	156,547
Financial liabilities		
Current provisions	2,487	2,938
Current accounts payable for goods, works, services	17,827	2,537
Current accounts payable for staff costs	29	34
Current accounts payable for settlements with the state budget	-	13
Current accounts payable for insurance settlements	-	4
Total financial liabilities	20,343	5,526

The main risks arising in the course of use of the Organization's financial instruments are those related to inappropriate use of funds by sub-recipients, foreign currency risk, liquidity and concentration risks.

¹ Excluding advances issued to sub-recipients and other non-monetary items.

INTERNATIONAL CHARITABLE FOUNDATION "ALLIANCE FOR PUBLIC HEALTH"

EXPLANATORY NOTES TO THE CONSOLIDATED FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2017*In Ukrainian Hryvnias (thousands) unless otherwise indicated***Risk of inappropriate use of funds by sub-recipients**

The Organization is exposed to a risk of inappropriate use of funds by sub-recipients, i.e. a risk that the recipients obtaining funds from the Organization may not be able to use the funds for a program in accordance with the terms and the budget of sub-grant agreement, thus, causing losses to the Organization.

This risk is mainly attributable to other current accounts receivable mainly represented by advances issued to sub-recipients. The amounts are recorded in the consolidated financial statements net of provision for doubtful debts. The amount of provision is calculated by the Organization's management based on the recoverability of funds by sub-recipients.

Foreign currency risk

Foreign currency risk is the risk that the financial results of the Organization will be adversely impacted by changes in exchange rates to which the Organization is exposed. Approximately 99% of all donations received by the Organization come from foreign donors. Funds are received and held in foreign currency. The Organization undertakes certain transactions denominated in foreign currencies, but, due to the fact that the national currency tends to devalued and, therefore, the foreign currencies strengthen their positions, the foreign currency risk exposure is insignificant. The Organization does not use any derivatives to manage its foreign currency risk exposure.

The carrying amounts of the Organization's foreign currency denominated monetary assets and liabilities as of 31 December 2017 and 2016 were as follows:

	31 December 2017			31 December 2016		
	USD	EUR	GBP	USD	EUR	GBP
Assets						
Cash and cash equivalents	119,559	1,166	1,936	130,975	13,651	5,082
Accounts receivable for products, goods, works, services	3,545	-	-	42	-	-
Total assets	123,104	1,166	1,936	131,017	13,651	5,082
Liabilities						
Current accounts payable for goods, works, services	2,432	9,096	-	87	-	-
Total liabilities	2,432	9,096	-	87	-	-
Net currency position	120,672	(7,930)	1,936	130,930	13,651	5,082

The following table details the Organization's sensitivity to weakening of UAH against USD, EUR, and GBP by 10%. This sensitivity level presents management's estimates regarding possible foreign currency exchange fluctuations as of the reporting dates. The sensitivity analysis includes only outstanding balances of foreign currency denominated monetary assets and adjusts their translation to presentation currency at the end of the period with reference to estimated exchange rate fluctuations.

	31 December 2017			31 December 2016		
	USD	EUR	GBP	USD	EUR	GBP
Profit	12,067	(793)	194	13,093	1,365	508

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Liquidity risk

Liquidity risk is the risk that the Organization will not be able to settle its financial liabilities to third parties arising from its main activities as they are due. The Organization's liquidity position is carefully monitored and managed. The Organization has a detailed budgeting and cash forecasting process in place to help ensure that it has adequate cash available to meet its payment obligations.

As of 31 December 2017 and 2016, all financial liabilities of the Organization based on contractual payments were due within the period from one to three months.

Concentration risk

During the year ended 31 December 2017, funding provided by the Global Fund amounted to 74% and by Centers for Disease Control and Prevention amounted 20% (2016: 80% and 9% respectively) of all donations received by the Organization in the form of cash transfers. To manage this concentration risk, the Organization seeks for obtaining additional financing from other donors.

13. FAIR VALUE OF FINANCIAL INSTRUMENTS

Estimated fair value disclosures of financial instruments are made in accordance with the requirements of UAS 13 *Financial Instruments*. Fair value is defined as the amount at which the instrument could be exchanged in a current transaction between knowledgeable, willing parties in an arm's length transaction, other than in forced or liquidation sale. As no readily available market exists for a major part of the Organization's financial instruments, professional judgment is necessary to determine fair value, based on current economic conditions and specific risks attributable to the instrument. The estimates presented herein are not necessarily indicative of the amounts the Organization could realize in a market exchange from the sale of its full holdings of a particular instrument.

The Organization's management believes that, as of 31 December 2017 and 2016, fair values of cash and cash equivalents and accounts receivable and payable actually approximated their carrying amounts due to the short-term nature of such instruments.

14. SUBSEQUENT EVENTS

On 20 December 2017 a new Grant agreement #UKR-C-AUA-1541 was signed with Global Fund. The implementation period of the program is from 1 January 2018 till 31 December 2020. The grant funds is up to USD 45,123 thousand or equivalent in other currency.

On 9 February 2018 the Organization received a cash transfer from the Global Fund in the amount of USD 2,132 thousand for the Program "Gain momentum in reducing TB/HIV burden through forging universal access for timely and quality TB diagnosis and treatment, scaling up evidence-based HIV prevention, diagnosis and treatment, building up resilient and sustainable system for health" implementation.

15. APPROVAL OF THE CONSOLIDATED FINANCIAL STATEMENTS

These consolidated financial statements were approved by management and authorized for issue on 8 June 2018.

ANNEX 3.

M – MALE
F – FEMALE
T – TRANSGENDER

KEY OUTCOMES OF PROGRAM ACTIVITIES
FOR THE YEAR ENDED DECEMBER 31, 2017

Members of Key Populations Reached with the Minimum
Package of Prevention Services in 2017, *Unique Clients*

Oblast/Region	PWID			SW			MSM		Others*		
	M	F	T	M	F	T	M	T	M	F	T
AR Crimea	5 348	1966			1 875		640			1	
Vinnitsia oblast	1 871	507			441		577				
Volyn oblast	1181	225			419		361				
Dnipropetrovsk oblast	27 572	11795			3 875		4 412	5	172	165	
Donetsk oblast	22 951	7 551		1	2 062		1223		341	139	
Zhytomyr oblast	3 225	841			1 064		286		1		
Zakarpattia oblast	778	158			257						
Zaporizhia oblast	4 901	1 357			734		2 497	2	102	112	
Ivano-Frankivsk oblast	1 079	196			488		385		3		
Kyiv oblast	7 366	2 086		3	501		770		96	116	3
Kirovohrad oblast	3 968	1 382			564		419		8	32	
Luhansk oblast	7142	2 600		1	901						
Lviv oblast	5 845	1302			1 432		1 606				
Mykolaiv oblast	5 763	2 661		5	2 672		1768				
Odesa oblast	17 203	7 668	2		5 489		3 882	25	608	294	297
Poltava oblast	3 730	1280			343		785		760	345	
Rivne oblast	2 577	1 041			542		938				
Sumy oblast	4 495	976		1	1297		552				
Ternopil oblast	1 022	349		3	430		608		6		
Kharkiv oblast	10196	2 882			3 636		1834		610	356	
Kherson oblast	4 300	1352			511		904				
Khmelnyskyi oblast	2 521	1 254			737				212	92	
Cherkasy oblast	6 957	1924			1374		1 018		3	20	
Chernihiv oblast	2 671	1001					636				
Chernivtsi oblast	2 028	990			907		856				
Kyiv	17 767	5 833		49	6 216	22	15 763	1	762	352	242
Sevastopol	2 871	1 161			748		797				
Total for Ukraine	165 540	60 927	2	63	38 657	22	42 848	33	3 666	2 016	539

*Partners of PWIDs, People Who are Close to KP Members, People Who Use Non-Injecting Drugs

CONSUMABLE SUPPLIES AND MATERIALS DISTRIBUTED IN 2017

Oblast/Region	Male Condoms	Female Condoms (Femidoms)	Syringes/Needles
AR Crimea	479 280		751 320
Vinnytsia oblast	195 577		444 888
Volyn oblast	231 123		212 479
Dnipropetrovsk oblast	2 017 003		4 622 549
Donetsk oblast	812 310		3 311 889
Zhytomyr oblast	238 886		505 562
Zakarpattia oblast	89 000		74 190
Zaporizhia oblast	506 555	400	902 677
Ivano-Frankivsk oblast	82 396		156 333
Kyiv oblast	241 700		754 936
Kirovohrad oblast	298 779		710 257
Luhansk oblast	371 186		1 227 893
Lviv oblast	600 922		1 055 148
Mykolaiv oblast	1 076 240		1 061 993
Odesa oblast	2 261 230		3 096 783
Poltava oblast	249 227		476 173
Rivne oblast	262 340		528 293
Sumy oblast	423 040		569 114
Ternopil oblast	85 845	905	94 238
Kharkiv oblast	1 405 775		1 396 065
Kherson oblast	202 148		646 438
Khmelnyskyi oblast	289 885		713 973
Cherkasy oblast	499 551		1 426 860
Chernihiv oblast	109 737		435 635
Chernivtsi oblast	168 132		338 803
Kyiv	2 758 530	658	3 186 226
Sevastopol	300 331		371 229
Total for Ukraine	16 256 728	1 963	29 071 944

TOTAL CLIENTS TESTED USING HIV RAPID TESTS THROUGHOUT 2017

Oblast/Region	PWID		SW		MSM		Others*	
	Total Clients Tested	Those Tested Positive	Total Clients Tested	Those Tested Positive	Total Clients Tested	Those Tested Positive	Total Clients Tested	Those Tested Positive
AR Crimea	4 213	62	1 351	4	428			
Vinnitsia oblast	1 974	7	323	2	547	4		
Volyn oblast	1 096	15	366	2	326	6		
Dnipropetrovsk oblast	23 902	714	3 169	16	4 204	24	152	6
Donetsk oblast	20 388	289	1 562	24	1 019	13	363	
Zhytomyr oblast	2 993	24	604	2	262	2		
Zakarpattia oblast	530		191				68	1
Zaporizhia oblast	4 691	55	602	1	1 902	9	213	
Ivano-Frankivsk oblast	849	17	307	1	367	9		
Kyiv oblast	6 507	252	348	1	749		211	1
Kirovohrad oblast	4 300	24	513		405	2	36	
Luhansk oblast	7 452	75	692	5				
Lviv oblast	6 312	69	1 103	2	1 344	31		
Mykolaiv oblast	6 077	134	2 092	8	1 445	6		
Odesa oblast	19 005	244	4 751	31	3 884	14	788	9
Poltava oblast	3 431	44	261		753	2	589	
Rivne oblast	2 690	22	484		908	1		
Sumy oblast	3 845	12	1 225	1	449			
Ternopil oblast	889	3	324		602	2		
Kharkiv oblast	8 765	210	3 016	8	1 726	14	823	
Kherson oblast	4 611	37	354	5	493		2	
Khmelnitskyi oblast	3 130	7	585	3			298	
Cherkasy oblast	6 927	70	1 245	4	837	6	52	
Chernihiv oblast	2 434	28			645	5		
Chernivtsi oblast	2 577		391	2	732			
Kyiv	18 767	565	5 687	72	14 236	201	1 179	13
Sevastopol	2 464	29	516	4	478			
Total for Ukraine	164 140	3 003	31 572	198	38 245	350	4 760	30

* Partners of PWIDs, People Who are Close to KP Members, People Who Use Non-Injecting Drugs

SCREENING TESTING AMONG HIV-VULNERABLE POPULATIONS FOR SEXUALLY TRANSMITTED INFECTIONS (Syphilis, Gonorrhea, Chlamydia, HBV and HCV), 2017

Oblast/Region	PWID		SW		MSM		Others*	
	Total Tests Performed	Those Found Positive	Total Tests Performed	Those Found Positive	Total Tests Performed	Those Found Positive	Total Tests Performed	Those Found Positive
AR Crimea	811	3	524		67			
Vinnitsia oblast	1 148	81	172		122	3		
Volyn oblast	598	29	215	3	85	1		
Dnipropetrovsk oblast	13 273	1 316	1 342	59	801	1	114	3
Donetsk oblast	10 840	1 918	991	92	198		4	
Zhytomyr oblast	1 174	98	429	2	12		1	
Zakarpattia oblast	309	40	104	1				
Zaporizhia oblast	2 613	665	418	43	460	1		
Ivano-Frankivsk oblast	456	164	144	15	94	1		
Kyiv oblast	3 559	1 779	158	5	166			
Kirovohrad oblast	2 424	526	300	22	96	1	27	1
Luhansk oblast	3 979	813	245	3				
Lviv oblast	3 520	590	640	21	323			
Mykolaiv oblast	3 727	241	1 210	41	374	2		
Odesa oblast	11 398	873	2 344	208	735	7	346	11
Poltava oblast	1 894	379	190		173			
Rivne oblast	1 301	69	221	19	217	7		
Sumy oblast	1 960	714	561		129			
Ternopil oblast	400	161	200	14	132	1		
Kharkiv oblast	4 773	1 156	1 688	41	310	4	11	1
Kherson oblast	2 773	384	221	11	93			
Khmelnyskyi oblast	1 715	253	426	20				
Cherkasy oblast	3 833	280	767	14	177			
Chernihiv oblast	1 502	302			171			
Chernivtsi oblast	1 238	329	238	2	137	3		
Kyiv	11 224	4 851	3 420	92	3 250	61	415	17
Sevastopol	379	56	302	37	92	10		
Total for Ukraine	90 755	17 958	17 287	764	8 384	103	918	33

* Partners of PWIDs, People Who are Close to KP Members, People Who Use Non-Injecting Drugs

*EARLY DETECTION OF TUBERCULOSIS
IN KEY POPULATIONS (PWID, SW, MSM,
ROMA, HOMELESS PEOPLE, EX-PRISONERS)
THROUGHOUT 2017, Unique Clients*

Oblast/Region	Total Clients Screened for TB Based on Survey Questions	Those Screened Positive for TB	Total Clients Receiving TB Diagnostic Services	Those Diagnosed with TB	Clients Who Started TB Treatment
AR Crimea	2719	74	37	1	1
Vinnitsia oblast	2702	365	365	2	2
Volyn oblast	664	18	18	12	12
Dnipropetrovsk oblast	20933	1796	1446	53	53
Donetsk oblast	17302	1871	1212	19	16
Zhytomyr oblast	3075	250	246	17	17
Zakarpattia oblast	2690	855	852	63	63
Zaporizhia oblast	5343	322	322	5	5
Ivano-Frankivsk oblast	1829	415	238	6	5
Kyiv oblast	6870	466	432	1	1
Kirovohrad oblast	3496	787	636	2	2
Luhansk oblast	5947	650	629	7	6
Lviv oblast	5029	722	287	6	5
Mykolaiv oblast	7298	390	380	20	18
Odesa oblast	17906	944	932	37	35
Poltava oblast	3122	680	618	3	1
Rivne oblast	2656	109	109	3	2
Sumy oblast	3322	522	511	8	8
Ternopil oblast	516	34	3	3	3
Kharkiv oblast	8067	336	290	20	21
Kherson oblast	4391	578	567	63	63
Khmelnyskyi oblast	2192	49	44		
Cherkasy oblast	7275	572	578	11	9
Chernihiv oblast	1904	107	104	1	
Chernivtsi oblast	2274	469	469	3	1
Kyiv	29349	1177	1029	19	14
Sevastopol	2297	62	50	1	
Total for Ukraine	165 784	14 580	12 375	386	363

ANNEX 4.

LIST OF GRANTEES AND IMPLEMENTERS OF ALLIANCE PROJECTS IN 2017

Nº	Name of NGO	Donor Funding Program (*)	Oblast/ Country	Total Projects Funded	Total Amount of Approved Commitments (UAH)	Total Funding Provided to Recipients/ Implementing Partners (UAH)	Approved Commitments (USD)	Funding Provided (USD)
1	2	3	4	5	6	7	8	9
1	Initiative for Health Foundation	GF Cities	Bulgaria	1	3 260 772	3 185 783	120 232	120 232
2	Tanadgoma, Center for Information and Counseling	GF Cities	Georgia	1	3 227 607	3 151 305	119 009	119 009
3	THE UNITED NATIONS OFFICE FOR PROJECT SERVICES (UNOPS)	GF Cities	Denmark	1	1 737 290	1 717 629	66 295	66 295
4	Eurasian Coalition on Male Health	GF Cities	Estonia	1	325 449	317 195	12 000	12 000
5	AIDS Foundation East-West (AFEW) in Kazakhstan	GF Cities	Kazakhstan	1	4 806 513	4 655 197	177 012	177 012
6	Association (NGO) "Youth for the Right to Life"	GF Cities	Moldova	1	3 774 659	4 381 771	140 011	167 145
7	AIDS Foundation East West International	GF Cities	Netherlands	1	2 372 651	2 303 710	87 485	87 485
8	SWAN Foundation for the Human Rights of Sex Workers	GF Cities	Hungary	1	2 255 236	2 215 663	83 460	83 460
9	Licit GmbH	GF Cities	Switzerland	1	2 098 042	2 036 826	77 643	77 643
10	CF "Nadiya ta Poriatunok" (Hope and Salvation)	GF NFM	AR Crimea	1	9 783 013	9 408 554	376 339	357 136

Nº	Name of NGO	Donor Funding Program (*)	Oblast/ Country	Total Projects Funded	Total Amount of Approved Commitments (UAH)	Total Funding Provided to Recipients/ Implementing Partners (UAH)	Approved Commitments (USD)	Funding Provided (USD)
1	2	3	4	5	6	7	8	9
11	Youth Center for Women's Initiatives (NGO)	GF NFM	AR Crimea	1	7 629 011	7 312 432	293 478	277 140
12	Bakhchisarai Youth NGO "Tvoya Peremoha" (Your Victory)	GF NFM	AR Crimea	1	1 821 677	1 555 347	70 077	58 850
13	NGO Public Health Center "Nezalezhnist" (Independence)	GF NFM	Vinnytsia oblast	1	2 820 900	2 595 030	111 853	97 943
14	Vinnytsia Regional Branch of All-Ukrainian Network of PLWH	Gilead Sciences INC	Vinnytsia oblast	1	105 914	82 084	3 937	3 132
15	Volyn Regional CF "Shans" (Chance)	GF NFM	Volyn oblast	1	1 597 848	1 597 847	63 413	59 942
16	Charitable Foundation "Public Health," Kryvyi Rih	GF NFM CDC METIDA France Expertise Internationale 5% Initiative Gilead Sciences INC	Dnipropetrovsk oblast	4	9 256 279	8 642 558	363 537	326 226
17	NGO "Doroha Zhyttia Dniipro" (Way of Life Dniipro)	GF NFM CDC METIDA	Dnipropetrovsk oblast	2	7 292 488	5 890 017	283 244	223 471
18	NGO "Drevo Zhyttia" (Tree of Life)	GF NFM CDC METIDA	Dnipropetrovsk oblast	2	3 750 985	3 563 237	148 492	134 300
19	Novomoskovsk District NGO "Family Support Center"	GF NFM CDC METIDA	Dnipropetrovsk oblast	2	3 272 325	2 384 521	129 125	90 271
20	Charitable Foundation "Virtus"	GF NFM	Dnipropetrovsk oblast	1	2 412 204	2 212 392	100 061	83 864

Nº	Name of NGO	Donor Funding Program (*)	Oblast/ Country	Total Projects Funded	Total Amount of Approved Commitments (UAH)	Total Funding Provided to Recipients/ Implementing Partners (UAH)	Approved Commitments (USD)	Funding Provided (USD)
1	2	3	4	5	6	7	8	9
21	Charitable Foundation "Impuls Kamianske"	GF NFM CDC METIDA	Dnipropetrovsk oblast	2	1 938 579	1 787 565	77 210	67 350
22	Charitable Society "All-Ukrainian Network of PLWH in Kyvyi Rih"	GF NFM	Dnipropetrovsk oblast	1	1 017 344	932 786	19 829	35 165
23	Zhovti Vody City Charitable Fund "Promin" (Ray)	GF NFM	Dnipropetrovsk oblast	1	833 529	833 529	15 422	31 124
24	NGO "Maibutnie bez SNIDu" (Future Without AIDS)	GF NFM	Dnipropetrovsk oblast	1	758 904	697 981	30 689	26 530
25	Dnipropetrovsk Regional NGO "Perehrestia" (Crossroads)	GF NFM	Dnipropetrovsk oblast	1	685 654	685 654	28 348	25 660
26	NGO "Nasha Dopomoha" (Our Help)	GF NFM PITCH EJAF Harm Reduction for CYPUD	Donetsk oblast	3	5 105 579	4 908 619	202 244	184 801
27	Donetsk Regional CF "Oberih" (Talisman)	GF NFM CDC METIDA	Donetsk oblast	2	3 376 622	3 376 621	137 299	127 041
28	Horlivka NGO "Linia Zhyttia" (Life Line)	GF NFM	Donetsk oblast	1	3 055 253	3 055 253	125 584	114 647
29	NGO "Union AMICUS"	GF NFM	Donetsk oblast	1	2 162 518	1 980 063	87 983	74 471
30	NGO "Mariupol Youth Association"	GF NFM Gilead Sciences INC	Donetsk oblast	2	1 715 684	1 383 861	68 747	52 129
31	NGO Donetsk Regional Association for Assistance to HIV-Positive People	GF NFM	Donetsk oblast	1	1 326 375	1 213 846	54 320	45 920

Nº	Name of NGO	Donor Funding Program (*)	Oblast/ Country	Total Projects Funded	Total Amount of Approved Commitments (UAH)	Total Funding Provided to Recipients/ Implementing Partners (UAH)	Approved Commitments (USD)	Funding Provided (USD)
1	2	3	4	5	6	7	8	9
32	CO "Svitnok" (Break of Dawn)	GF NFM	Donetsk oblast	1	1 249 117	1 040 821	56 698	39 461
33	NGO "Istok"	GF NFM	Donetsk oblast	1	331 822	331 822	13 646	12 448
34	CO "Club Maibutne" (Club Future)	GF NFM	Donetsk oblast	1	33 847	33 847	470	1 276
35	NGO "Perspective"	GF NFM	Zhytomyr oblast	1	2 548 328	2 493 415	100 802	93 571
36	Charitable Fund "Let Your Heart Beat"	GF NFM	Zhytomyr oblast	1	400 146	400 146	8 520	15 061
37	Zakarpattia Regional Charitable Fund "Rada Zhyttia"	GF NFM	Zakarpattia oblast	1	464 723	464 723	18 410	17 537
38	Charitable Fund "Spodivannia" (Hope)	GF NFM CDC METIDA Gilead Sciences INC	Zaporizhia oblast	3	2 540 945	2 447 590	61 258	92 178
39	CF "Vse Mozhlyvo" (Everything is Possible)	GF NFM CDC METIDA	Zaporizhia oblast	2	1 372 935	1 213 870	53 950	45 912
40	Charitable Organization "100 Percent Life Network. Zaporizhia"	GF NFM	Zaporizhia oblast	1	912 708	837 702	35 212	31 638
41	Zaporizhia Regional Charitable Foundation "Gender Zed"	GF NFM	Zaporizhia oblast	1	701 359	701 359	28 894	26 235
42	Charitable Foundation "Rehabilitation Center for Drug Users "Zakhid Shans" (West Chance)	GF NFM Gilead Sciences INC	Ivano-Frankivsk oblast	2	1 105 199	1 104 666	43 380	41 529

Nº	Name of NGO	Donor Funding Program (*)	Oblast/ Country	Total Projects Funded	Total Amount of Approved Commitments (UAH)	Total Funding Provided to Recipients/ Implementing Partners (UAH)	Approved Commitments (USD)	Funding Provided (USD)
1	2	3	4	5	6	7	8	9
43	CF "Povernennia do Zhyttia" (Coming Back to Life)	GF NFM CDC METIDA France Expertise Internationale 5% Initiative	Kirovohrad oblast	3	3 410 024	3 225 288	136 834	120 773
44	Kirovohrad Regional Branch of All-Ukrainian Network of PLWH	GF NFM Gilead Sciences INC	Kirovohrad oblast	2	988 062	907 224	37 489	34 218
45	Luhansk Regional Society "All-Ukrainian Network of PLWH"	GF NFM	Luhansk oblast	1	2 170 729	2 170 729	86 243	81 880
46	Charitable Organization "Obriy" (Horizon)	GF NFM	Luhansk oblast	1	1 411 708	1 172 597	57 120	44 296
47	Charitable Foundation "SALUS"	GF NFM Gilead Sciences INC	Lviv oblast	2	4 760 618	4 760 618	191 222	178 899
48	Charitable Fund "Avante"	GF NFM	Lviv oblast	1	453 858	453 858	9 729	16 956
49	Ukrainian Red Cross Society	GF NFM	Kyiv	1	68 353 068	51 259 362	273 915	1 921 787
50	All-Ukrainian Charitable Organization "Convictus Ukraine"	GF NFM CDC METIDA EJAF Harm Reduction for CYPUD France Expertise Internationale 5% Initiative Gilead Sciences INCPITCH	Kyiv	6	17 734 665	16 833 320	692 409	636 019

Nº	Name of NGO	Donor Funding Program (*)	Oblast/ Country	Total Projects Funded	Total Amount of Approved Commitments (UAH)	Total Funding Provided to Recipients/ Implementing Partners (UAH)	Approved Commitments (USD)	Funding Provided (USD)
1	2	3	4	5	6	7	8	9
51	Charitable Organization "Ukrainian Institute for Public Health Policy"	CDC MAT CDC METIDA	Kyiv	2	10 476 864	8 486 745	393 794	320 998
52	NGO "ALLIANCE.GLOBAL"	GF NFM CDC METIDA	Kyiv	2	6 063 543	6 063 543	153 738	227 608
53	All-Ukrainian Charitable Foundation "Drop-In Center"	GF NFM CDC METIDA	Kyiv	2	4 828 891	4 367 489	190 458	165 372
54	International CF "Vertikal"	GF NFM CDC METIDA	Kyiv	2	4 492 266	4 071 264	186 518	152 387
55	NGO "Club Eney"	GF NFM	Kyiv	1	3 622 248	3 622 248	146 228	135 755
56	Kyiv Regional CF "Nadiya ta Dovira" (Hope and Trust)	GF NFM PITCH CDC MAT	Kyiv	3	2 858 064	2 966 688	106 990	111 896
57	All-Ukrainian Charitable Organization "Ukrainian Association of Public Health"	GF NFM	Kyiv	1	1 892 061	1 892 061	77 869	70 893
58	International Charitable Organization "Roma Women's Fund "Chirikli"	GF NFM	Kyiv	1	1 022 606	1 022 606	2 781	38 605
59	NGO "Ukrainian Association of Family Medicine"	CDC MAT	Kyiv	1	819 181	937 329	31 000	35 146
60	Charitable Organization "Dopomozhy Zhyttiu" (Help Life)	CDC MAT	Kyiv	1	325 022	325 022	6 610	12 210
61	Charitable Organization "All-Ukrainian League "LEGALIFE"	PITCH	Kyiv	1	286 010	286 010	11 196	10 821

Nº	Name of NGO	Donor Funding Program (*)	Oblast/ Country	Total Projects Funded	Total Amount of Approved Commitments (UAH)	Total Funding Provided to Recipients/ Implementing Partners (UAH)	Approved Commitments (USD)	Funding Provided (USD)
1	2	3	4	5	6	7	8	9
62	Mykolaiv City CF "Unitus"	GF NFM CDC METIDA	Mykolaiv oblast	2	3 261 372	3 093 148	132 728	116 714
63	NGO "Public Health and Positive Action "Chas Zhyttia" (Time of Life)	GF NFM	Mykolaiv oblast	1	2 404 200	2 404 200	90 145	90 517
64	Mykolaiv City Charitable Fund "Vykhid" (Way Out)	GF NFM CDC METIDA	Mykolaiv oblast	2	2 270 147	2 203 696	91 743	82 625
65	NGO "LGBT Association "LIGA"	GF NFM	Mykolaiv oblast	1	510 283	510 283	21 160	19 101
66	Mykolaiv Regional Fund "Zdorova Natsiya" (Healthy Nation) (CO)	GF NFM	Mykolaiv oblast	1	420 140	384 667	8 911	14 509
67	Odesa CF for Rehabilitation and Social Adaptation of Homeless People "Shliakh do Domu" (The Way Home)	GF NFM CDC METIDA EJAF Harm Reduction for CYPUD France Expertise Internationale 5% Initiative Gilead Sciences INC	Odesa oblast	5	11 418 235	11 432 796	455 078	429 272
68	NGO "Vira, Nadiia, Liubov" (Faith, Hope, Love)	GF NFM CDC METIDA	Odesa oblast	2	4 599 378	4 468 772	182 232	168 220
69	NGO "Youth Development Center"	GF Cities	Odesa oblast	1	4 445 710	3 862 983	172 191	145 536
70	NGO "Era Myloserdiia" (Era of Mercy)	GF NFM CDC METIDA	Odesa oblast	2	2 089 224	1 891 354	82 217	71 101

Nº	Name of NGO	Donor Funding Program (*)	Oblast/ Country	Total Projects Funded	Total Amount of Approved Commitments (UAH)	Total Funding Provided to Recipients/ Implementing Partners (UAH)	Approved Commitments (USD)	Funding Provided (USD)
1	2	3	4	5	6	7	8	9
71	Youth NGO "Youth Public Movement "Partner"	GF NFM	Odesa oblast	1	1 522 393	1 522 393	61 972	57 320
72	CF "Veselka" (Rainbow)	GF NFM	Odesa oblast	1	1 102 932	1 102 924	41 823	41 496
73	Community-Based Youth Organization "Klub Vzaiemodopomohy "Zhyttia+" (Peer Support Club Life+)	GF NFM	Odesa oblast	1	315 981	315 981	6 773	11 862
74	NGO Odesa Human Rights Group "Veritas"	PITCH	Odesa oblast	1	106 155	105 291	4 108	4 050
75	Charitable Association for HIV/AIDS Patients "Svitlo Nadii" (Light of Hope)	GF NFM CDC METIDA EJAF Harm Reduction for CYPUD Gilead Sciences INC	Poltava oblast	4	5 015 495	4 723 483	193 470	178 041
76	Poltava Regional Charity Fund "Public Health"	GF NFM	Poltava oblast	1	650 361	650 361	26 916	24 460
77	Charitable Organization "Meridian"	PITCH	Poltava oblast	1	292 064	292 064	11 272	11 113
78	Rivne Regional Charitable Fund "Nashe Maibutnie" (Our Future)	GF NFM Gilead Sciences INC	Rivne oblast	2	2 390 702	2 295 733	96 493	86 175
79	CF "Krok Nazustrich" (Step Forward)	GF NFM	Sumy oblast	1	1 560 720	1 560 720	62 883	58 545

Nº	Name of NGO	Donor Funding Program (*)	Oblast/ Country	Total Projects Funded	Total Amount of Approved Commitments (UAH)	Total Funding Provided to Recipients/ Implementing Partners (UAH)	Approved Commitments (USD)	Funding Provided (USD)
1	2	3	4	5	6	7	8	9
80	Sumy Regional NGO "Club Chance"	GF NFM Gilead Sciences INC	Sumy oblast	2	1 551 719	1 510 068	59 842	56 953
81	Sumy Charitable Organization "All-Ukrainian Network of PLWH"	GF NFM	Sumy oblast	1	198 217	198 217	4 048	7 472
82	NGO "Public Health Sources"	GF NFM	Ternopil oblast	1	1 251 751	1 251 751	49 256	47 113
83	CF "Parus" (Sail)	GF NFM EJAF Harm Reduction for CYPUD	Kharkiv oblast	2	4 068 784	4 003 843	159 786	150 956
84	Kharkiv City CF "BLAGO" (Goodness)	GF NFM	Kharkiv oblast	1	3 638 959	3 638 959	147 448	136 357
85	Charitable Organization "100 Percent Life Network. Kharkiv"	GF NFM Gilead Sciences INC	Kharkiv oblast	2	1 328 210	1 328 210	17 765	50 024
86	Kharkiv City CF "Nadiya Ye" (There is Hope)	GF NFM	Kharkiv oblast	1	255 765	255 765	10 760	9 638
87	Kherson Regional Charitable Fund "Mangust" (Mongoose)	GF NFM CDC METIDA	Kherson oblast	2	3 810 664	3 550 054	151 878	133 804

Nº	Name of NGO	Donor Funding Program (*)	Oblast/ Country	Total Projects Funded	Total Amount of Approved Commitments (UAH)	Total Funding Provided to Recipients/ Implementing Partners (UAH)	Approved Commitments (USD)	Funding Provided (USD)
1	2	3	4	5	6	7	8	9
88	Khmelnitskyi Association of Public Health "Victoria"	GF NFM EJAF Harm Reduction for CYPUD France Expertise Internationale 5% Initiative Gilead Sciences INC	Khmelnitskyi oblast	4	2 539 555	2 534 453	65 944	94 845
89	Khmelnitskyi Regional Branch of All-Ukrainian Network of PLWH	GF NFM	Khmelnitskyi oblast	1	1 022 675	902 093	36 661	34 180
90	Charitable Fund "Insight"	GF NFM	Cherkasy oblast	1	2 170 947	1 994 851	86 549	75 228
91	Cherkasy Charitable Organization of PLWH "Vid Sertsia do Sertsia" (From Heart to Heart)	GF NFM CDC METIDA	Cherkasy oblast	2	1 832 447	1 669 046	74 072	63 094
92	CF "Volia" (Liberty)	GF NFM CDC METIDA	Cherkasy oblast	2	1 386 783	1 316 799	55 731	49 544
93	Regional NGO Information and Counseling Center for Families and Individuals "Dialog"	GF NFM CDC METIDA	Cherkasy oblast	2	1 015 528	968 956	41 028	36 538
94	Cherkasy Regional Branch of All-Ukrainian Network of PLWH	GF NFM	Cherkasy oblast	1	272 915	272 915	5 648	10 361
95	Charitable Fund "Nova Simya" (New Family)	GF NFM	Chernivtsi oblast	1	1 538 018	1 538 018	62 276	57 726

Nº	Name of NGO	Donor Funding Program (*)	Oblast/ Country	Total Projects Funded	Total Amount of Approved Commitments (UAH)	Total Funding Provided to Recipients/ Implementing Partners (UAH)	Approved Commitments (USD)	Funding Provided (USD)
1	2	3	4	5	6	7	8	9
96	NGO "Liudy Bukovyny" (People of Bukovyna)	GF NFM	Chernivtsi oblast	1	408 892	408 892	16 880	15 272
97	NGO "Resocialization Center for Chemically Dependent People "VEDIS"	GF NFM CDC METIDA	Chernihiv oblast	2	1 055 718	909 819	42 486	34 277
98	Chernihiv Regional NGO "Vidrodzhennia Natsii" (Revival of the Nation)	GF NFM	Chernihiv oblast	1	855 562	855 562	35 453	32 016
99	Chernihiv Branch of All-Ukrainian Network of PLWH	GF NFM	Chernihiv oblast	1	721 000	721 000	27 068	27 171
Total		0.00		152	3 185 071 222	2 886 089 961	9 780 455	10 873 987

* Funding Programs

GF NFM – grant funding provided under the project Investing for Impact Against Tuberculosis and HIV

GF Cities – grant funding provided under the project Fast-Track TB/HIV Responses for Key Populations in EECA Cities

CDC MAT – grant funding provided under the international technical assistance program Improving the Quality and Sustainability of Drug Maintenance Treatment in Ukraine

CDC METIDA – grant funding provided under the international technical assistance program M&E-Related Technical Assistance and Improved Data Application in HIV (METIDA)

Gilead Sciences, Inc. – grant funding provided under the project for improved access to HCV treatment for key populations

EJAF Harm Reduction for CYPUD – grant funding provided under the project Harm Reduction for Children and Young People Who Use Drugs in Ukraine: Reaching the Underserved

France Expertise Internationale 5% Initiative – grant funding provided under the project Capacity Development for Quality Assured Gender-Sensitive Harm Reduction Interventions in Ukraine

PITCH – grant funding provided under the project Partnership to Inspire, Transform and Connect the HIV Response

ANNEX 5.

TOTAL COST OF MEDICINES AND HEALTH PRODUCTS DELIVERED, BY REGION, 2017, UAH

Region	Anti-TB Drugs	Syringes, Needles, and Wipes	TB Diagnosis: Equipment and Consumables
Vinnysia oblast	7 763 511,120	302 781,810	829 929,310
Volyn oblast	9 382 249,400	157 454,700	456 310,170
Dnipropetrovsk oblast	43 643 539,470	4 012 999,630	2 530 030,810
Donetsk oblast	37 969 397,160	4 066 527,710	2 625 040,990
Zhytomyr oblast	14 509 131,150	489 744,410	588 554,710
Zakarpattia oblast	14 743 656,870	58 659,690	887 135,880
Zaporizhia oblast.	24 279 845,230	749 063,330	1 219 960,100
Ivano-Frankivsk oblast	5 481 083,000	105 098,470	750 199,440
Kyiv	16 121 507,230	4 397 435,940	1 312 642,330
Kyiv oblast	17 362 295,900		1 083 945,610
Kirovohrad oblast	11 425 271,390	1 098 625,960	696 672,670
Luhansk oblast	7 033 180,230	578 859,110	171 985,060
Lviv oblast	12 493 975,230	805 611,020	1 174 005,420
Mykolaiv oblast	16 792 752,590	1 337 616,250	1 458 967,560
Odesa oblast	41 643 328,430	4 250 151,420	1 509 386,630
Poltava oblast	12 798 860,470	681 220,880	737 788,570
Rivne oblast	3 155 098,120	315 124,630	653 774,390
Sumy oblast	7 836 519,190	650 735,900	643 145,880
Ternopil oblast	3 890 909,370	94 482,830	830 821,320
Kharkiv oblast	23 631 175,710	1 835 057,270	1 930 110,620
Kherson oblast	16 818 777,350	993 273,350	1 810 167,660
Khmelnyskyi oblast	6 592 628,990	427 278,680	595 901,660
Cherkasy oblast	8 306 693,960	1 751 479,590	653 774,400
Chernihiv oblast	13 324 353,360	621 012,170	557 425,260
Chernivtsi oblast	3 557 587,560	258 746,760	408 577,950
Total	380 557 328,480	30 039 041,510	26 116 254,400

HCV Drugs	Condoms and Lubricants	Rapid HIV Test Kits (Test Systems)	Rapid HCV Test Kits (Test Systems)
2 210 404,990	182 193,480	155 355,500	32 045,800
	167 610,730	98 695,150	25 986,160
2 314 331,960	2 249 497,360	2 081 150,990	188 798,990
364 841,210	1 071 654,760	1 842 955,990	111 429,270
	206 055,370	175 848,600	39 608,950
	62 845,710	33 212,470	22 182,690
971 765,220	521 921,270	374 300,630	55 755,880
1 356 817,520	87 532,390	72 308,360	25 650,330
6 340 202,000	8 159 548,090	2 748 285,470	242 845,130
1 187 565,310			
734 561,380	457 624,070	326 367,090	60 931,940
	57 597,280	345 830,110	38 437,410
753 476,430	797 572,900	448 056,090	62 249,260
	1 713 291,650	502 775,220	85 448,470
876 463,970	3 103 684,860	1 497 843,420	198 915,670
1 449 120,270	223 814,020	252 081,130	47 181,210
1 099 398,870	263 345,060	174 932,180	33 712,690
827 523,390	574 120,990	213 065,100	35 087,540
	167 977,870	83 925,550	22 294,410
2 213 333,770	2 074 700,530	633 139,970	76 856,150
975 930,000	334 978,260	282 946,670	68 378,070
848 779,270	243 267,700	191 102,750	36 888,940
	1 001 368,960	558 036,430	70 596,210
	66 383,100	176 409,160	39 326,310
	235 586,380	169 619,730	34 391,640
24 524 515,560	24 024 172,790	13 438 243,760	1 654 999,120

Table continued from page 126-127

Region	Laboratory Diagnosis: Equipment and Materials	Rapid Test Systems for STIs and Related Components	Other Test Systems
Vinnitsia oblast	18 874,100	9 983,560	
Volyn oblast	20 270,470	11 812,420	
Dnipropetrovsk oblast	78 537,180	87 444,190	181 933,380
Donetsk oblast	22 840,410	45 049,680	
Zhytomyr oblast	28 227,490	17 377,640	
Zakarpattia oblast	15 937,090	3 657,740	
Zaporizhia oblast.	32 047,320	27 941,730	
Ivano-Frankivsk oblast	17 137,280	10 251,960	
Kyiv	567 443,220	234 811,490	173 428,990
Kyiv oblast	33 966,070		
Kirovohrad oblast	32 560,840	14 845,290	
Luhansk oblast	22 286,250	7 152,580	
Lviv oblast	22 784,010	40 639,710	
Mykolaiv oblast	37 360,950	71 997,200	66 765,380
Odesa oblast	212 915,640	188 786,840	96 074,370
Poltava oblast	27 577,570	5 463,740	4 143,600
Rivne oblast	20 270,490	14 503,360	
Sumy oblast	13 513,640	26 617,200	
Ternopil oblast	28 867,330	11 771,500	
Kharkiv oblast	48 022,440	72 716,660	21 767,880
Kherson oblast	51 777,650	17 476,670	
Khmelnitskyi oblast	14 713,830	13 682,230	
Cherkasy oblast	26 317,560	31 820,460	
Chernihiv oblast	23 894,100		
Chernivtsi oblast	22 693,950	16 703,730	
Total	1 440 836,880	982 507,580	544 113,600

Rapid HBV Test Systems	Other Equipment and Materials	Antiretroviral Drugs	Total
1 808,280	3 376,880		11 510 264,830
2 260,350	4 374,610		10 327 024,160
16 726,570	13 749,290		57 398 739,820
12 205,880	6 050,820		48 137 993,880
3 164,490	5 070,960		16 062 783,770
904,140	2 061,850		15 830 254,130
4 068,620	5 355,980		28 242 025,310
1 808,280	5 909,910		7 913 796,940
36 391,630	20 781,950	163 954,260	40 519 277,730
			19 667 772,890
3 164,490	15 842,380		14 866 467,500
2 260,340	1 380,360		8 258 968,730
6 328,980	6 527,480		16 611 226,530
14 918,300	9 476,810		22 091 370,380
33 001,100	9 836,460		53 620 388,810
2 260,340	8 900,010		16 238 411,810
2 712,420	2 998,310		5 735 870,520
5 198,800	2 380,650		10 827 908,280
1 808,280	2 459,330		5 135 317,790
15 596,410	4 373,580		32 556 850,990
2 260,350	6 307,310		21 362 273,340
4 068,630	4 734,260		8 973 046,940
7 911,210	13 506,650		12 421 505,430
	8 282,360		14 817 085,820
2 260,340	4 533,490		4 710 701,530
183 088,230	168 271,690	163 954,260	503 837 327,860

ANNEX 6.

IKNOWLEDGE SHARING ACTIVITIES, LIST OF KEY PUBLICATIONS RELEASED IN 2017

PUBLICATIONS FOR KEY POPULATIONS



A Positive Book

The authors of this book have collected and briefly outlined the most useful and up-to-date ideas about HIV infection and all related topics in clear and easy-to-understand language accessible to the layman. This resource is neither a medical manual nor a self-treatment guide. The basic information gathered here covers, first and foremost, the most fundamental concepts and is intended to assist people who have found out they are HIV-positive in learning how to live it and interact with the environment, how to identify top priority tasks, and develop adherence to ARV therapy.



What does it mean to be HIV-positive?

This brochure is aimed at LGBT communities, first and foremost, MSM testing HIV-positive for the first time. How do you deal with stress? Who do you turn to? How will this affect your relationships with friends and your partner? How will your life change? The book provides answers to these and other questions.



Street Methadone



At this point in time, methadone is used as a substitution drug for the treatment of opioid-dependent patients. But the other side of the coin is its illicit use as a drug of abuse, when a person with addiction issues uses its “home-cooked” version. The use of illicit methadone carries serious risks to the life and health of the user. These topics are discussed in this brochure.



Non-Medical Use of Pharmacy Drugs and its Consequences



The brochure contains information on the most common kinds of pharmacy medicines used for non-medical purposes and better known among drug consumers as “pharmacy drugs.” The resource sheds light on the specific features and consequences of the use of particular drugs, their effects on the mind and body, explains what happens when they are used in combination with other substances, as well as outlines the basic principles of harm reduction.



Salts and Spices



The brochure contains information on new drugs that have seen a significant rise in popularity only in relatively recent times, i.e., salts and spices. The authors draw attention to the risks linked to the use of these substances, such as their unknown chemical composition, high risk of overdose, and negative effects on physical and mental health.



Calendar for Women

The original brochure is produced as a calendar journal book and covers basic information on the prevention of HIV and other STIs, as well as contact information, focusing primarily on issues that are of special importance to women: the effects of alcohol and drugs on women's health, pregnancy and drugs, women and OST, female intimate hygiene and reproductive health, responding to violence against women, etc.





About Contraception

The publication provides basic information about available contraception methods, focusing on those that are most suited for vulnerable populations.



Healthy Sex Life

This MSM-targeted publication covers topics relating to safe sexual behavior as a tool to prevent HIV and other STIs.



PUBLICATIONS FOR PUBLIC HEALTH PROFESSIONALS



Risk Reduction Lessons

A new series of lessons for social workers and NGO employees engaged in implementing prevention interventions for men having sex with men and sex workers of both genders. Risk Reduction Lessons provide a platform for basic training for all social workers from MSM- and SW-service organizations, and cover essential learning material that must be acquired by new specialists from prevention projects.



Current Regulatory Documents on the Use of Narcotic Drugs and Opioid Substitution Therapy (as of July 15, 2017)

A collection of basic legislative documents that regulate opioid substitution therapy and the use of narcotic drugs.



Integrated Care for People with Opioid-Induced Mental and Behavioral Disorders – Patients Receiving Opioid Substitution Therapy.



This resource contains a description of the entire range of integrated care services for OST patients that facilitate the successful treatment of dependence, toward achieving the 90-90-90 targets (services for the diagnosis and treatment of HIV/AIDS, TB, hepatitis, STIs. Services that concern patients' general, mental, and reproductive health. Psychosocial and harm reduction services). The recommended services are based on up-to-date protocols and standards, as well as the most effective evidence-based international interventions and practices. This publication will be useful to all professionals involved in the fields of HIV/AIDS, public health, and drug addiction treatment, be they practitioners or healthcare managers.



Improving the Quality of Post-Program Support Services for Medication-Assisted Therapy Patients in Ukraine



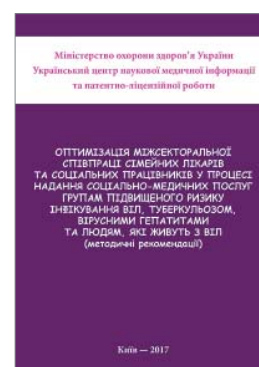
This publication describes the approaches, models, and evidence-based strategies to be adopted when working with patients who have completed or are nearing the end of OST. The resource covers topics such as relapse prevention, social reintegration, maintaining adherence to treatment for HIV/AIDS, TB, and other diseases that affect public health. The recommendations contained in the publication will be useful for all professionals working with patients with drug addiction, i.e., drug abuse specialists, family doctors, therapists, psychologists, and social workers.



Optimizing Intersectoral Collaboration Between Family Doctors and Social Workers in Providing Social and Medical Services for Populations at High Risk for Transmission of HIV, TB, Viral Hepatitis, and People Living with HIV.



Methodological guidelines for physicians specialized in General Practice – Family Medicine, social workers.





Violence

Violence: A brief orientation for counseling personnel. This information resource is designed to provide necessary information for social and outreach workers, as well as psychologists involved in prevention programs. It will assist them in recognizing violence, preventing it, and dealing with the consequences of violence against clients of both genders. The groups covered by interventions being conducted by prevention programs as well as other socially disadvantaged populations often suffer from violence, while not being always able to recognize it, and essentially never seek help from social workers, psychologists, physicians, or law enforcement agencies to put an end to it. Some groups, such as sex workers and transgender people, can perceive violence as a way of life.



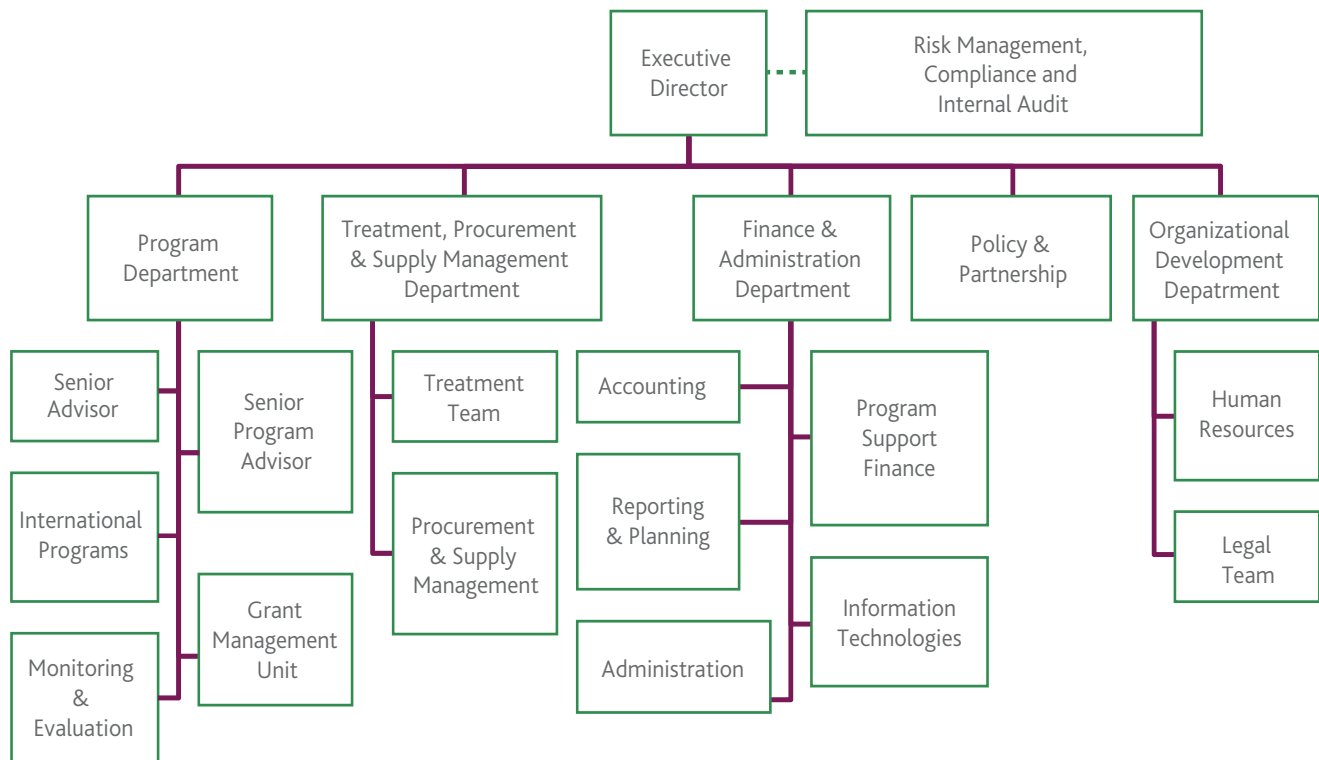
Methodological Guidelines for Mainstreaming Gender-Sensitive Services into Harm Reduction Projects.

This publication is intended to introduce innovative approaches based on the three-year implementation (from March 2015 to March 2018) of the Alliance's project "Capacity Development for Quality Assured Gender-Sensitive Harm Reduction Interventions in Ukraine," the financial support being provided by Expertise France – Initiative 5%.



ANNEX 7.

ORGANIZATION STRUCTURE OF ICF “ALLIANCE FOR PUBLIC HEALTH” *



** As of December
29, 2017

ANNEX 8.

MEMBERS OF STATUTORY BODIES

GOVERNING BOARD

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