

**2022 ANNUAL
REPORT**

The Alliance in 2022

This year's report is a special one, as is the current situation in Ukraine, with the war going on... Although it reflects the Alliance's activities in 2022, those have primarily been in response to Russia's invasion which broke out on February 24, 2022 at 5:00 am. From the very first days of the war, together with other civil society organizations, medical institutions, the Ministry of Health, the Public Health Center of the Ministry of Health of Ukraine, and other government agencies, the Alliance has been working to support those who have suffered the horrors of war (*including populations that are vulnerable to HIV*) and trying to keep the HIV and TB epidemics under control. Due to our concerted efforts, our achievements in 2022 were respectable. Although this report covers activities that mostly took place in 2022, some figures and facts provided are representative of the entire period since the outbreak of the war..



2022

IN FACTS AND FIGURES

- ▶ Over the year of war, more than 4 times as many people as in previous years – more than **1 million Ukrainians** – became beneficiaries of the Alliance's various programs and projects!
- ▶ Through collaboration with donors and partners, the Alliance has delivered more than **2,000 tons of humanitarian and medical supplies** to more than **200** healthcare facilities across Ukraine, including those located in the de-occupied areas of Kherson, Kharkiv, Kyiv, Sumy, and Chernihiv oblasts.
- ▶ **117,089 people** were reached with various humanitarian services under the project for "Integrated Humanitarian Response in Conditions of War and Post-War Reconstruction."
- ▶ **57%** of officially registered HIV cases in Ukraine were detected through Alliance-supported programs.
- ▶ **66%** (4,230 people) of all new people linked to the pre-exposure prophylaxis program were enrolled through the Alliance's follow-up and referral programs.
- ▶ For the first time ever, the Alliance purchased 150 annual courses of transfeminine and transmasculine hormone therapy for members of the trans* community.
- ▶ **27** mobile outpatient clinics provided services to **49,294** clients.
- ▶ **47** countries now have access to the #HelpNow online service and hub for Ukrainian refugees and IDPs
- ▶ Prevention services reached **49,439** internally displaced persons from key populations.
- ▶ More than 100 thousand members of key populations were screened for TB.
- ▶ **2,023** patients with HIV or TB co-infection started treatment for hepatitis C during the war.

The war has had a critical impact on the healthcare system: more than **170** healthcare facilities have been completely destroyed beyond repair, more than **1,200** have to be rebuilt, and dozens of medical workers and volunteers have been killed. The fatalities and losses include clients of the programs supported by the Alliance, employees of our partner projects, and the sites where vital services were provided. But all this notwithstanding, our work has been going on!

This photo shows the office of our partners, **the Kherson regional organization of the Ukrainian Red Cross Society**, after a missile attack. This is the fourth time this building has been hit since mid-December. One of the previous shelling attacks killed a volunteer of the organization and one of its clients. Two offices and a reception area were burned out, window frames smashed up, and all office equipment and furniture destroyed in fire.



And these pictures show the **OCF project office in Dnipro** badly damaged by the bombing.



HUMANITARIAN RESPONSE

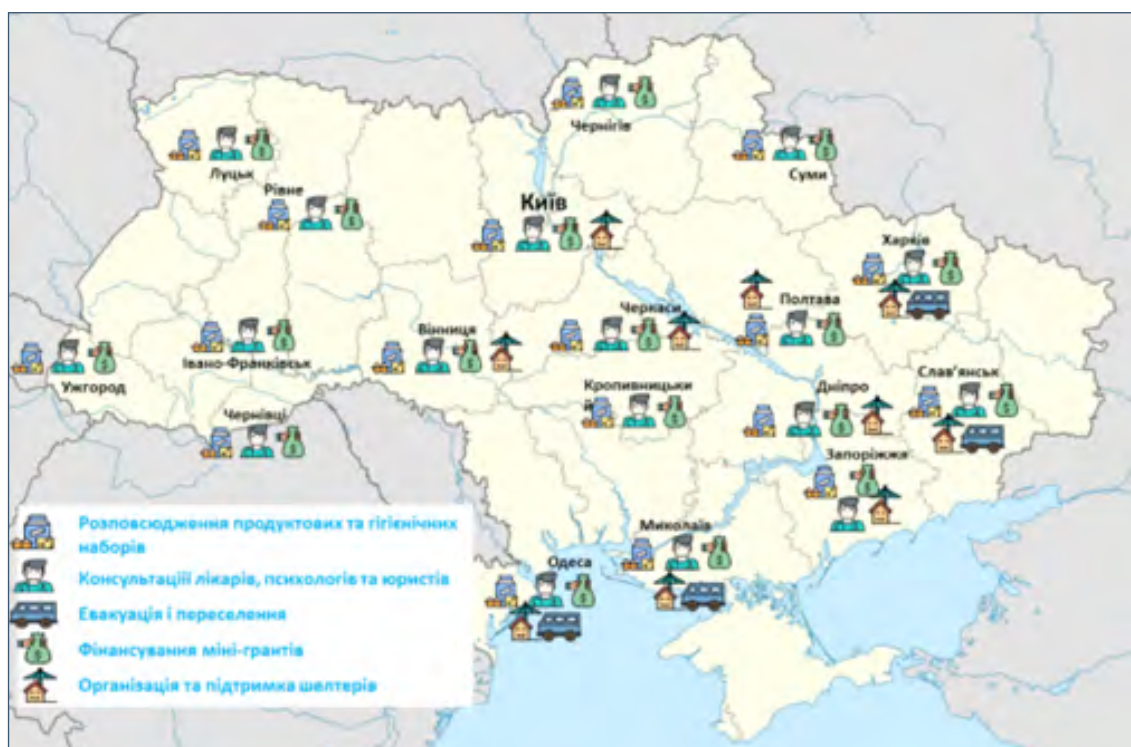
Faced with the challenges of the war, the Alliance now has new activity areas cut out for it, so as to address humanitarian response gaps. This in turn has necessitated a significant expansion of the list of key groups receiving targeted comprehensive assistance. In addition to the populations that are most vulnerable to HIV, assistance is also provided to IDPs, families in difficult life circumstances, people with disabilities, the elderly, etc.

HUMANITARIAN RESPONSE PROJECTS

The Alliance's project titled **"Integrated Humanitarian Response in Conditions of War and Post-War Reconstruction"** has been underway since May 2022 with the financial support of Christian AID and the British Disasters Emergency Committee (DEC).

The total project budget for 2022-2023 is \$4,858,054.

All project activities are aimed at providing assistance to those who are affected by the ongoing hostilities and suffering from the humanitarian crisis. The activities are being carried out in collaboration with **27** regional NGOs in 18 regions of Ukraine. Over the eight months of the project (*from May 2022 to January 2023*), **117,089** people were reached with various services.



HUMANITARIAN RESPONSE PROJECTS INCLUDE THE FOLLOWING:

- ▶ **19,229** humanitarian kits (*food, hygiene, and medical supplies, goods for children*);
- ▶ **8,501** certificates for the purchase of food, medicines, hygiene products, and cell phone top-up services;
- ▶ **43,758** specialist consultations (*social, medical, psychological, and legal*) in NGO settings and/or referrals to partner organizations and specialized institutions, all consultations adapted to relevant asks and problems related to the ongoing war;
- ▶ **291** IDP families (*820 people*) received funds to deal with their most pressing needs (*purchase of baby or toddler cots, clothing and footwear, essential medicines, etc.*);
- ▶ **2,119** vulnerable people were evacuated and provided with temporary housing;
- ▶ The Alliance financially supports 13 safe spaces in different regions of Ukraine – 7 of those are partially funded by the Alliance, and another 6 were created from scratch. Temporary accommodations were provided to 496 people, of which 448 received hot meals. The shelter-based personal services (*laundry, ironing, etc.*) were provided to 2,613 people (*not only shelter residents but also other people in need*).

In the late spring of 2022, when the situation in Lysychansk became too dangerous and living conditions too precarious, Tetiana, the mother of a minor daughter, Nastia, who has been disabled since early childhood, was forced to move her daughter out of the inferno.

"We couldn't even hide in the basement during air raids because I was unable to move the wheelchair back and forth all the time. I don't have that much strength left in me. As a makeshift protection, I built a kind of a "fortress": I barricaded the windows to shield us against glass shards flying every which way in case of explosions and protected the space as best I could. But due to the constant shelling, my daughter became very restless, she needed medication and medical attention," Tetiana recalls.

It was extremely difficult to find transportation that could accommodate people and two wheelchairs, to say nothing of their things and belongings. Besides, there were no drivers who would be willing to drive under shelling. Luckily, in the end they managed to get evacuated, but with only one wheelchair that could fit in the vehicle, the one for walking.

Via a Viber group of IDPs in Kropyvnytskyi, the woman found out that **NGO Povernennia do Zhyttia** (*Coming Back to Life*) was on site and helping people in need. Filling out a request form, she indicated that she needed a wheelchair for her daughter, as theirs was in poor condition. In late October, she received happy news from the charitable foundation's staff that a wheelchair had been ordered for her daughter from Belgium and she just had to wait for it to be delivered. However, the third wave of Russian



missile attacks all over Ukraine complicated the logistics. Enduring adversity with patience and hope, our heroines wouldn't give up. And in early November, the wheelchair, along with vitaminized food products for kids and adults, was delivered to its new owner.

"Truth be told, I didn't have much hope that I would ever get a new wheelchair for my daughter. I'm overwhelmed with gratitude for this incredible support. It is such a great joy! The new wheelchair is lighter, folds into a compact size, and is so mobile. Besides, it's adjustable and fits my daughter's body build and weight. I'm immensely grateful for this precious gift from the charitable foundation, and now that my Nastya's wheelchair is rugged and safe, I don't

need to worry," Tatiana expressed her deep appreciation and gratitude. "I come from Lysychansk and that is Ukraine. Unfortunately, now we have no place to go back to. I no longer have a home or personal property. I have a disabled daughter to take care of and the two of us moved deeper into the country amid shelling and air strikes. Yes, sure thing, we have some problems to deal with, but, like many other Ukrainians, I appreciate the support you are giving us. And I hope it will continue, because all forces for good must join together in a united front against evil."

In addition, Tatiana's family received humanitarian aid in the form of certificates for goods from the Faino Market chain of stores, as well as medicines and a three months' supply of Isosource Naturel vitaminized food products specially designed for gastrointestinal tract health.

In Kropyvnytskyi, the project is being implemented by the partner NGO "Povernennia do Zhyttia"

The most in-demand and innovative activity of this project is to **support community initiatives that are aimed at improving their well-being in times of war and developing their capacity to further help those in need** (the global SCLR [Survivor and Community-Led Crisis Response] approach has been adapted to suit the Ukrainian context).

THE KEY OBJECTIVES OF THIS APPROACH ARE AS FOLLOWS:

- ▶ Effectively unite and engage with diverse communities, including those most vulnerable to HIV, to address their urgent humanitarian needs;
- ▶ Support vital initiatives from community-based teams at the local level through mini-grants (*up to \$5,000*);
- ▶ Train action groups in writing grant applications, budgeting, monitoring, and reporting on the expenditure of funds, etc.

Relevant efforts were made to fund **97** mini-projects initiated by teams of different communities from most regions of Ukraine for a total of **UAH 10 million**, which provided varied assistance to **52,550** people.

SOME OF THE PROBLEMS SOLVED INCLUDED THE FOLLOWING:

- ▶ Renovating and fitting out temporary housing for IDPs and underground shelters;
- ▶ Cleaning wells, repairing water supply and sewage systems;
- ▶ Purchasing alternative sources of heating, lighting, and cooking;
- ▶ Establishing rehabilitation camps, playgrounds, exercise and play rooms for IDP children;
- ▶ Purchasing supplies and equipment for e-teaching children from target populations;
- ▶ Procurement and targeted delivery of humanitarian kits, medicines, etc.

EXAMPLES OF PROJECTS

50 cancer patients from Volyn were provided with the anti-cancer drug ZolendroVista from the charitable cancer foundation. This is an expensive medicine (*available at more than UAH 2,500 per package*), and its use is essential for the treatment of cancer patients with bone metastases. The organization succeeded in purchasing this drug (*in vial form*) by gaining access to a mini-grant under the project **"Integrated Humanitarian Response in Conditions of War and Post-War Reconstruction,"** which is being implemented in the region by the Rivne Regional Charitable Foundation **"Our Future"** in coordination with the Alliance.



The Odesa-based Educational Complex **"Stupeni"** (*Secondary Waldorf School [Levels I-III] – Kindergarten*) took part in a mini-grant competition for setting up the underground shelter's entrance.

"Our school uses the Waldorf teaching methodology, which requires that students be

taken care of holistically and attend school in person to ensure a full-fledged learning process, and this strategy differs from the state education system. Therefore, it was very important for us that the underground shelter for children be set up in accordance with applicable standards and requirements so that we are able to provide full-time education services at our school," said Natalia Lukianchenko, Principal of the *Stupeni* Educational Complex. The school management used the funds received to purchase all the materials necessary for the renovations. The bomb shelter is designed to accommodate students and staff (*up to 200 people*). Now students can sit at their desks and get a proper full-time education.



10,000 residents of the villages of Hora, Martusivka, Revne, and Zatyshne (*Kyiv Oblast*) were given the opportunity to take advantage of autonomous water sources. In total, 25 water wells were cleaned as part of the initiative from **NGO Interaction and Partnership**. In 20 of them, after the cleaning process, the natural water sources were rehabilitated or improved, becoming functional again. The grant of UAH 120,000 was obtained through participation in a mini-project competition hosted by **Convictus Ukraine** (*All-Ukrainian Charitable Organization*) under the coordination of the Alliance for Public Health. The implementers of the initiative joke that the project even surpassed their expectations, because along with the silt they pulled up from the

bottom of the well the buckets that had been previously lost in there. Among the buckets dragged up from the bottom of the well, one of the residents of the village of Hora recognized his old bucket which had been lost more than 10 years ago. The man replaced the metal rims on the bucket, cleaned it well, and thus gave it a new lease of life.

The Humanitarian Assistance Project for Key Populations (KPs) Affected by the HIV Epidemic, the War and Related Humanitarian Crisis in Ukraine is supported by the Elton John AIDS Foundation.

The project had been running from December 2022 to May 2023 (6 months).

The total budget is \$775,000.

KEY ACTIVITIES:

- ▶ Providing mini-grants (*up to \$5,000*) to address the immediate and urgent needs of target populations vulnerable to HIV and their families.
- ▶ Supporting shelters for KPs and their families.

Coordination and navigation of KP and NGO representatives for gaining access to humanitarian aid in 10 regions of Ukraine

The project is aimed at supporting **access to essential health and humanitarian services for key populations affected by the HIV epidemic** with the support of Aidsfonds and ECOM.

The program is being implemented from 2022 to 2025.

The total budget is €1,313,000.

The primary activity of this project is to provide various grants, including mini-grants, to address the problems and needs of members of target groups and their families.

Within the framework of these two projects, two open calls for proposals for mini-grants "**Supporting community initiatives to improve access to essential health and humanitarian assistance services for key populations affected by the HIV epidemic in the context of war and post-war reconstruction**" were held in December 2022. In total, 75 projects were supported for a total amount of **UAH 12,654,730**.

KEY SUPPORTED ACTIVITIES:

- ▶ Payment for transport and delivery of biomaterials.
- ▶ Carrying out renovations at the NGO's premises to maintain the continuity of services for key populations.
- ▶ Procurement and distribution of essential goods for KPs, including those related to the winter period.
- ▶ Payment for consulting services for KPs from medical specialists or highly specialized physicians.
- ▶ Restoration of water supply for inmates of the Petrivs'ka correctional facility.
- ▶ Replacement of windows for members of key populations whose homes were destroyed as a result of the Russian aggression.
- ▶ Assistance in fitting out or setting up safe spaces / shelters / Points of Invincibility for key populations.
- ▶ Procurement of alternative power sources for providing uninterrupted services to key populations in local NGO settings.

COORDINATING ASSISTANCE IN ACCESSING CARE OUTSIDE OF THE COUNTRY



Over the time frame between March 2022 and January 2023, #HelpNowHUB received more than 20,000 requests from Ukrainians in 47 countries. The requests were coordinated via #HelpNow Service, #HelpNowPL, #HelpNowDE, #HelpNowClinicalHUB, as well as partner hubs based in Moldova and the Baltic States, asylum and direct social support services [HelpNowHUB](#) helps Ukrainian refugees from key populations in gaining support and access to treatment-related information in host countries.

A PERSONAL REAL-LIFE STORY

Alina (*name changed*) left Mariupol on March 22, 2022, when the city was turned into a living hell. Her children had left the city earlier and she lost contact with them for a while. Luckily, all of them were found in Berdiansk. Next, there was a long journey to endure: first Zaporizhzhia, then Lviv, and finally Germany.

Alina had TB, and back home she had been receiving treatment since 2010, but when she was fleeing Mariupol, there was no time for her to collect her medicines... *"When I found myself in a refugee camp in Germany and they asked me about my illnesses and health status, I was in a daze and too scared to confess the truth. We were 'lost at sea' and had no idea about where to apply to for documents, what we were supposed to do, or where to turn to for help...Just as blind as newborn kittens. I was thinking, 'What if they deport me once they find out about my disease?'" And that was the reason why I said nothing about that."*

However, the woman needed her TB drugs, and so she started looking for relevant information. Some of her acquaintances gave her the contact number for #HelpNow telegram service and Alina left her application with them. From that point on, things started moving fast: she received contact information for the nearest doctor and the interpreter. *"To make matters worse, I had no ID on me, and this significantly complicated things for me at first. I got in touch with the service again and they helped me have my ID certificate from Ukraine re-issued. It literally took no more than a couple of days! A short while ago, my doctor from Mariupol called me to check if I needed any help or medicines, and I was so happy to say that I already have everything I need."*

TARGETED ASSISTANCE TO THE MILITARY



The Alliance delivered two ambulance vehicles to military medics, the money for which was raised at the #AIDS2022 international conference, and **4 mobile outpatient clinics** for the army's needs as well.

Over the year of large-scale hostilities, the Alliance's humanitarian convoys have delivered **100+** state-of-the-art drones, **500+** sets of uniforms, footwear, and tactical equipment to the defenders. Dozens of tons of essential medicines, medical equipment, including that for ICUs and rehabilitation wards, painkillers, hemostatic agents, tourniquets, surgical instruments and supplies were transported to key military hospitals and medical support facilities where Ukrainian defenders undergo treatment and recuperate. We have delivered **100+ armored vests** for the National Guard and the Armed Forces of Ukraine, **dozens of power generators, Starlink systems, radio stations**, etc.

Several hundred tons of food products have been delivered to the zone of active combat operations and handed over to the military, including locations such as Popasna, Bakhmut, Kramatorsk, Sloviansk, Izium, Lyman, Kherson, and Nikopol.

HUMANITARIAN CONVOYS



"They are cool and crazy. They set out late at night and rush to Lviv to pick up the cargo over there in the morning and head back to Kyiv, and then leave again at night. They spend the night at home and then head out again to help the army and civilians. This story is about those who are not fighting at the front line, but who are doing their job to help win the war right where they are. About those who will have something meaningful to answer when their kids and grandchildren will ask them, "What were you doing during the war?" This also supports the premise that the war is won by those armies whose homefront heroes and civilians working for the war effort behind the front lines say that they will catch up on sleep once the war is won."

Oleksandra Yavorivska, volunteer

"We are a kind of a connecting link within this large and spontaneously emerging mechanism of support for the war effort. We are doing the right thing for a good cause. And our role is super important, because we make sure that some hospitals have enough medicines and bandages to save the lives of our wounded soldiers and treat the sick, and that some warriors now have flak jackets / armored vests to protect their lives. Even though we are not combatants on the battlefield, we are doing an important job to support this invisible front of the war effort."

Dmytro Korobenko, driver of the Alliance's Humanitarian Convoy

My motivation was that I couldn't sit around and do nothing, just watching from the sidelines what was unfolding in the country. So, when my friend suggested I join in, I was ready to go and transport humanitarian aid deliveries on the same day. It was purely the urge to help the country, our people, and the military. Originally, I come from the Crimea, and in 2014, as everyone knows, my land was invaded and occupied, and now they want to grab some more..."

Viktor Pelepachenko, driver of the Alliance's Humanitarian Convoy

During the very first days of the war, the Alliance and its donors decided to provide mobile outpatient clinics, which are on its books, for meeting urgent humanitarian needs such as evacuation of the most vulnerable populations, women and children, delivery of food and medicines, and much more! People worked around the clock to deliver humanitarian supplies (*medicines, medical equipment, food, power generators, military equipment and supplies, etc.*)

SINCE MARCH 2022:

- ▶ 32 volunteer drivers and crew members have manned the convoys, with a total of 2,500 crew days.
- ▶ Around 700 trips completed.
- ▶ More than 600 civilians evacuated from areas of active hostilities.
- ▶ Nearly 2,000 tons of humanitarian and medical cargoes transported, including roughly 2 million OST pills (*buprenorphine and methadone*) and 9 liters of liquid methadone to 8 regions of Ukraine, as well as many other narcotic drugs for anesthesia and resuscitation.
- ▶ ARVs worth \$950,000 as part of humanitarian shipments delivered.
- ▶ Hundreds of power generators and uninterruptible power supplies of various capacities, Starlink systems, approximately a hundred intensive care beds, dozens of ALV units, oxygen concentrators, ultrasound machines, X-ray machines, resuscitation and rehabilitation equipment (*crutches, walkers, wheelchairs, etc.*) delivered.
- ▶ Total recipients – over 200 health care facilities and humanitarian warehouses.
- ▶ Total mileage travelled – 1.3 mln km.

OUR PARTNERS

ORGANIZATIONS THE ALLIANCE PARTNERS WITH TO DELIVER MEDICAL SUPPLIES:

- ▶ All-Ukrainian Council of Resuscitation and Emergency Medical Care;
- ▶ Christian Medical Association;
- ▶ United Help Ukraine;
- ▶ Volonterska Sotnia (NGO) (*Charity*);
- ▶ Z Teplo u Serts (NGO) (*Charity*);
- ▶ Svitli Spravy (NGO) (*Charity*);
- ▶ Hope UA (*Charitable Foundation*);
- ▶ Humanitarni Initsiatyvy (*Charitable Foundation*);
- ▶ Krynytsia Yakova (*Charitable Foundation*);
- ▶ Vyshgorod Chapter of the Red Cross of Ukraine
- ▶ Help People (NGO);
- ▶ Zahyst Zarady Peremohy (NGO);
- ▶ Western-Ukrainian Association "Spadschyna Ukrainy" (NGO);
- ▶ Piklius (NGO);
- ▶ Pro Dobro (NGO);
- ▶ Solidarna Sprava Hromad (NGO);
- ▶ ReHab First Women's Veteran Space (NGO);
- ▶ NIKO.VOLUNTEERS Team;
- ▶ Ukraina Vidkryte Sertse (*International Charitable Foundation*);
- ▶ Rotary Club Kyiv;
- ▶ Svitlovodsk City Council;
- ▶ Karpatski Stezhky Tourist Association;
- ▶ Dobro-KR (*Charitable Foundation*).

And many others!

HEALTHCARE FACILITIES – RECIPIENTS OF MEDICAL HUMANITARIAN AID

DNIPROPETROVSK OBLAST:

- ▶ Mechnikov Dnipropetrovsk Oblast Clinical Hospital of the Dnipropetrovsk Oblast Council
- ▶ Rudniev City Multidisciplinary Clinical Mother and Child Hospital, Dnipro
- ▶ Kryvyi Rih City Clinical Hospital no. 2 of the Kryvyi Rih City Council.
- ▶ City Clinical Hospital no. 8 of the Dnipro City Council.
- ▶ Kryvyi Rih TB Treatment Center of the Dnipropetrovsk Regional Council

ZHYTOMYR OBLAST:

- ▶ Herbachevskyi Oblast Clinical Hospital of the Zhytomyr Regional Council
- ▶ Pavlusenko Hospital no. 2 of the Zhytomyr City Council

ZAPORIZHZHIA OBLAST:

- ▶ Oblast Mental Health Facility of the Zaporizhzhia Regional Council
- ▶ Maternity Home no. 3 of the Zaporizhzhia City Council
- ▶ City Clinical Hospital no. 9 of the Zaporizhzhia City Council
- ▶ Zaporizhzhia Clinical Hospital of the Zaporizhzhia Regional Council

IVANO-FRANKIVSK OBLAST:

- ▶ Precarpathian Addiction Treatment Center of the Ivano-Frankivsk Regional Council

KYIV:

- ▶ National Children's Specialized Hospital "Okhmadyt"
- ▶ National Cancer Institute
- ▶ Applied Medical Research Center for Pediatric Cardiology and Cardiac Surgery of the MoH of Ukraine
- ▶ Ukraine Applied Research Center for Emergency Medical Care and Disaster Medicine of the MoH of Ukraine
- ▶ Center for Emergency Medical Care and Disaster Medicine, Kyiv
- ▶ National Military Medical Clinical Center The Main Military Clinical Hospital
- ▶ M. Amosov National Institute for Cardiovascular Surgery
- ▶ Cardiology and Cardiac Surgery Center
- ▶ M.D. Strazhesko Institute for Cardiology
- ▶ Nephrology Clinic
- ▶ Kyiv City Clinical Hospital of Emergency Care
- ▶ Kyiv City Clinical Hospital no. 1
- ▶ Kyiv City Clinical Hospital no. 17
- ▶ Kyiv City Clinical Hospital no. 18
- ▶ Kyiv City Clinical Hospital no. 7
- ▶ Kyiv City Maternity Home no. 1
- ▶ Kyiv City Maternity Home no. 6

KYIV OBLAST:

- ▶ Brovary Multidisciplinary Clinical Hospital
- ▶ Borodianka Central Raion Hospital of the Borodianka Village Council
- ▶ Bucha Primary Healthcare Center
- ▶ Hostomel Primary Healthcare Center of the Hostomel Village Council

MYKOLAIV OBLAST:

- ▶ City Hospital no. 1 of the Mykolaiv City Council, Mykolaiv
- ▶ City Hospital no. 3 of the Mykolaiv City Council, Mykolaiv
- ▶ City Hospital no. 5 of the Mykolaiv City Council, Mykolaiv
- ▶ City Emergency Care Hospital of the Mykolaiv City Council, Mykolaiv
- ▶ Mykolaiv Oblast Clinical Hospital of the Mykolaiv Regional Council
- ▶ Mykolaiv Oblast Mental Health Center of the Mykolaiv Regional Council

ODESA OBLAST:

- ▶ HIV/AIDS Center of the Odesa City Council
- ▶ Odesa Oblast Hospital of the Odesa Regional Council
- ▶ City Clinical Hospital no. 11 of the Odesa City Council
- ▶ City Clinical Infectious Disease Hospital of the Odesa City Council
- ▶ Primary Healthcare Center no. 3 of the Odesa City Council
- ▶ City Mental Health Center of the Odesa City Council
- ▶ Bilhorod-Dnistrovskyi City Multidisciplinary Hospital of the Bilhorod-Dnistrovskyi City Council
- ▶ Izmail City Central Hospital of the Izmail City Council

POLTAVA OBLAST:

- ▶ Poltava Oblast Addiction Treatment Center of the Poltava Regional Council
- ▶ Pyriatyn Central Raion Hospital of the Pyriatyn Raion Council
- ▶ Primary Healthcare Center (*Horishni Plavni*)
- ▶ Kremenchuk Center for Secondary Perinatal Care

SUMY OBLAST:

- ▶ Clinical Hospital no. 5 of the Sumy City Council
- ▶ Sumy Oblast Clinical Hospital of the Sumy Regional Council
- ▶ Oblast Clinical Medical Center for Disease Control (*Socially Dangerous Diseases*) of the Sumy Regional Council
- ▶ Oblast Clinical Specialized Hospital of the Sumy Regional Council
- ▶ Shostka Central Raion Hospital of the Shostka City Council
- ▶ Konotop Central Raion Hospital
- ▶ Prof. Novachenko Buryu Central Raion Hospital
- ▶ Lebedyn Central Raion Hospital
- ▶ Seredyna-Buda Central Raion Hospital
- ▶ Krolevets Central Raion Hospital

TERNOPIL OBLAST:

- ▶ Ternopil Oblast Medical Center for Disease Control (*Socially Dangerous Diseases*)

KHARKIV OBLAST:

- ▶ Prof. Meshchaninov City Clinical Emergency and Urgent Care Hospital of the Kharkiv City Council
- ▶ V.T. Zaycev General and Urgent Surgery Institute of the National Academy of Medical Sciences of Ukraine, Kharkiv
- ▶ L. T. Mala National Therapy Institute of the National Academy of Medical Sciences of Ukraine, Kharkiv
- ▶ Prof. Hirschmann City Clinical Hospital no. 14 of the Kharkiv City Council
- ▶ City Children's Clinical Hospital no. 16 of the Kharkiv City Council
- ▶ Kharkiv Oblast Clinical Hospital of the Kharkiv Regional Council
- ▶ City Clinical Hospital no. 30 of the Kharkiv City Council
- ▶ City Clinical Hospital no. 31 of the Kharkiv City Council
- ▶ Oblast Children's Clinical Hospital no. 1 of the Kharkiv Regional Council
- ▶ Military Medical Clinical Center of the Northern Region (*MoD Unit no. A-3306*), Kharkiv
- ▶ Merefa Central Raion Hospital of the Merefa City Council

CHERNIHIV OBLAST:

- ▶ Oblast Center for Emergency Medical Care and Disaster Medicine of the Chernihiv Regional Council
- ▶ Kozelets Central Raion Hospital
- ▶ Chernihiv Oblast Hospital of the Chernihiv Regional Council
- ▶ Emergency Care Center of the Chernihiv Regional Council
- ▶ Chernihiv Oblast Hospital for Psychiatric and Neurological Disorders of the Chernihiv Regional Council

CHERKASY OBLAST:

- ▶ The Third Cherkasy City Emergency Care Hospital, Cherkasy
- ▶ Cherkasy Oblast Hospital of the Cherkasy Regional Council

...and over 100 other healthcare facilities across the whole of Ukraine.

MOBILE TREATMENT POINTS

In December 2022, the Alliance launched a new MTP activity, "Mobile Treatment Points."

In these times of war, the country needs a strong home front, while every one of its citizens requires protection and support. This is the philosophy of our efforts in this focus area.

The project is intended to provide medical and humanitarian support in the de-occupied areas where rural health posts looted by the Russian invaders are now abandoned and deserted.

The first convoy reached the villages of the Kharkiv region that are nearest to the front line. In addition to the Alliance's personnel, the convoy included a family doctor and a nurse who provided primary medical care and delivered the following:

- ▶ 4 tons of humanitarian aid such as food, medicines, and warm clothing;
- ▶ 300 personalized food and hygiene kits;
- ▶ Warm clothing for more than a thousand people.

Even the cardboard from the boxes used in packaging humanitarian aid came in handy (*it was taken by local teenagers who make trench candles for the army*).

MEETING THE HUMANITARIAN NEEDS OF PARTNER NGOS' CLIENTS AND STAFF

The Alliance responds promptly to the needs of key populations who are in critical need of having their basic needs caused by the war urgently addressed. To this end, the range of services had been expanded, and the traditional prevention and treatment efforts are now supplemented by meeting the humanitarian needs of clients, thus further contributing to their retention in the programs.

THE KEY APPROACH IS BASED ON SUPPORTING NGO WORKERS WHO ENGAGE WITH CLIENTS AND ALSO NEED HUMANITARIAN SUPPLIES:

- ▶ HIV-positive clients who are supported by case managers in terms of ART initiation and clients of the PrEP program component **were provided with 1,188 food packages** (*certificates*) for a total of UAH 475 thousand.
- ▶ Families of NGO employees who were drafted and killed during the ongoing hostilities received financial support totaling **UAH 100 thousand**.
- ▶ In agreement with donors, the efforts to ensure the continuous provision of HIV and COVID-19 prevention services were repurposed to address the urgent needs of clients during the war. **11,746 additional consultations were provided** to deliver advice and guidance on accessing primary and specialized medical care during the martial law period, as well as prevention and treatment services relating to HIV, TB, and OST for those relocating to other cities of Ukraine or European countries, and psychological support during the wartime period.
- ▶ In June 2022, the Alliance responded to a request from NGO staff regarding the urgent need for **psychological first aid training** for project clients during the war and conducted a series of trainings for **90** case managers and social workers from partner organizations. The trainees noted the high level of training and pointed out the relevance and value of this topic.
- ▶ Since the outbreak of the war, the Alliance has **evacuated** 56 employees of partner NGOs, their families and project clients affected by the Russian aggression from Luhansk and Zaporizhzhia regions.
- ▶ As part of the component *"Expanding Access to HIV Treatment Services" of the project "Improving the HIV Treatment Cascade for Key Populations through Differentiated Case Detection and Treatment Engagement, Capacity Building of the Public Health Center of the Ministry of Health of Ukraine and Strategic Information in Ukraine,"* at the onset of the full-scale invasion, the work of more than **300 medical workers of ART sites** in all regions of Ukraine was supported as they were working in extremely harsh conditions and beyond normally scheduled hours to provide consultative medical and health care services to HIV-infected people and prevent ART disruptions. We also topped up cell phone accounts for more than **700 medical workers of ART sites** to ensure that they stay in constant contact with patients to navigate them through evacuation and migration during the war and prevent ART interruptions.

NEEDS ASSESSMENT

During 2022, the Alliance conducted several assessments and surveys on the needs of key populations, their experience of receiving HIV prevention and treatment services, and the adaptation of the NGO network to providing relevant services. All the findings were systematized and presented in the Summary Report Based on the Results of Studies and Routine Monitoring Among Key Populations and NGO Specialists Regarding the Needs, Receiving and Providing of HIV Services During the War in Ukraine (https://aph.org.ua/wp-content/uploads/2022/09/Report_War_5.09.2022_Red_Red.pdf), which was prepared as part of the project “Improving the HIV Treatment Cascade for Key Populations Through Differentiated Identification of New Cases and Engagement in Treatment, Capacity Building of the Public Health Center of the Ministry of Health of Ukraine and Strategic Information in Ukraine.”

The research findings were presented at a meeting of the Joint Cluster on HIV, Tuberculosis, and Hepatitis under the coordination of WHO and the Public Health Center, whereas the experience of HIV research amid a full-scale war was reported at the Third Scientific Workshop on HIV, Hepatitis C, and Tuberculosis in Eastern Europe and Central Asia, EECA INTERACT 2022, held on December 13-14, 2022 in Riga, Latvia (<https://eeca-interact.org/>).



The Alliance has successfully managed to evacuate the staff of NGO Obriy (Horizon) and their families from the temporarily occupied Sievierodonetsk to Uzhhorod. The evacuation trip lasted more than 10 days, with the route running through 7 countries. Over that time, the mobile outpatient clinic traveled more than 3,000 kilometers and passed through three “filtration” checkpoints.

In the end, our colleagues, who had been under occupation for more than 9 months, rang in the New Year amongst their families and friends, and the mobile outpatient clinic is now ready for new missions to provide preventive services to key populations in the Transcarpathian oblast

HUMANITARIAN SUPPORT FOR CITIES PARTICIPATING IN THE FAST TRACK INITIATIVE

The Alliance supported Ukrainian cities participating in the Fast Track Initiative (*Odesa, Kryvyi Rih, and Dnipro*) for facilitating access to medical and humanitarian supplies amid an ongoing war. APH held negotiations and delivered medical and humanitarian aid from the Lviv Regional State Administration to Dnipro-based health care facilities, as well as provided medicines, consumables, medical equipment, and a portable power plant to healthcare institutions in Dnipro. In Kryvyi Rih, IDPs and KPs were provided with psychological and legal consultations, as well as obtained the necessary support from family doctors and social workers; they were also provided with food and hygiene kits, and “safe spaces.” In Odesa, our partners picked up tourniquets, hemostatic bandages, medicines, first-aid kits, and multi-tests for the Armed Forces of Ukraine.

MENTAL HEALTH SUPPORT

- The Alliance is implementing a project aimed at providing **professional mental health support for KPs** affected by the war in Ukraine. The consultations are offered by 2 psychologists and 3 psychiatrists. As of February 1, 2023, **805** psychological and **467** psychiatric consultations had been provided. The most common issues among KPs are anxiety and depression, problems with partners during the war, loss of job, fear of death, death of relatives, apathy, and fear of being drafted for the war.



- ▶ **Online support groups on the Help24 website** were launched to provide psychological and emotional support to MSM clients and women living with HIV. Almost all of the online support group meetings centered on the consequences of the war: “Complicated emotions and feelings: How to navigate them,” “Fear: To displace or to overcome?,” “Self-regulation techniques when under chronic stress,” “Survivor’s guilt: Why we feel it and how to deal with it,” etc.
- ▶ To preserve the mental health of health practitioners and HIV-service NGO workers, as well as to reduce their professional burnout due to extremely harsh working conditions, stress, and overtime hours, as part of the HealthLink project, the Alliance continued to conduct **supervision sessions** both at health care facilities and NGOs or remotely through the website <https://supervision.org.ua>. During the war, professional supervisors from among psychologists and physicians have conducted **30** face-to-face supervision sessions involving **291** specialists. Over the same period of time, **930** individual online supervision sessions were conducted as well, attended by **141** specialists. The war has changed both the key objectives and the agenda topics of supervision meetings. Most often, the supervision meetings were held to provide training in the protocol for dealing with war-related trauma, analyzing complicated cases involving clients who were traumatized by combat experiences, developing new care trajectories for patients based on the security situation in specific regions, the availability of transportation links, as well as forms and methodologies for preventing professional burnout, etc.

TECHNICAL SUPPORT FOR HEALTHCARE FACILITIES

AS PART OF THE PROJECT FOR EXPANDING ACCESS TO HIV TREATMENT SERVICES:

- ▶ Technical assistance was provided to the ART dispensing sites destroyed in the Kyiv Oblast – furniture purchased to fit out and set up anonymous testing and counseling sites in Bucha and Irpin, the laboratory of the Kyiv Oblast AIDS Center, as well as a laboratory centrifuge for the Zaporizhzhia Oblast AIDS Center.
- ▶ During the shortage of ART drugs, funding and transportation to service sites in the Rivne Oblast were provided.
- ▶ When the Kherson Oblast was under occupation, ART drugs were delivered and blood samples collected at sites across the region.
- ▶ In August 2022, the project assisted in the evacuation of the Donetsk AIDS Center and the office of the partner *NGO Nasha Dopomoga (Our Help)* from Sloviansk to Dobropillia and Dnipro, respectively.
- ▶ 10 power generators and other equipment (*batteries, uninterruptible power supplies*) were purchased for the regional AIDS centers that needed it the most and 4 NGOs from the zones of active hostilities. In addition, 235 universal mobile chargers (*power banks*) were purchased for medical staff of ART dispensing sites / project consultants to have mobile communication with HIV patients.

As part of the component **“Expanding Access to HIV Treatment Services” of the project “Improving the HIV Treatment Cascade for Key Populations through Differentiated Case Detection and Treatment Engagement, Capacity Building of the Public Health Center of the Ministry of Health of Ukraine and Strategic Information in Ukraine”**:

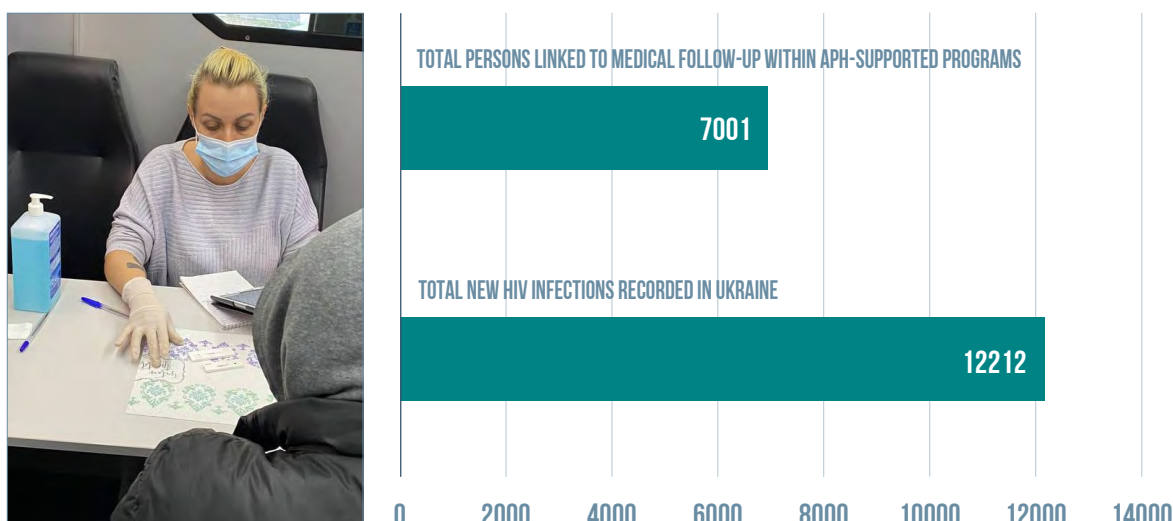
- ▶ 32,452 parcels with ARVs were delivered via mail services or shipped to HIV patients' individual addresses.
- ▶ In 12 regions of Ukraine, 518 patients with advanced HIV were provided with expensive CT/MRI scans, whereas 152 seriously ill patients received transportation services for medical evaluation purposes.
- ▶ 1,557 vehicle trips were made to transport 44,775 blood samples from rural ART sites to regional/interregional laboratories for viral load, CD4 count, and other types of testing.
- ▶ I.D. documents were re-issued for 37 patients who had no domestic passports.
- ▶ Despite the military aggression of the Russian Federation, extra shifts were arranged for patient appointments to continue (*early morning, late evening, and weekends*) in 20 health care facilities (*primarily regional and city AIDS centers*) across 11 regions. Over the year of war, 25,912 patients have visited healthcare facilities during extra working hours, thus accessing uninterrupted care and undergoing timely diagnostic procedures and counseling.
- ▶ The work of 333 specialists was supported to track patients who missed a scheduled visit to an ART site at 275 health care facilities across the country. While the war has been going on, 90,221 patients (*total*) who missed their scheduled visits to the ART dispensing sites have been contacted over the phone to ensure retention in ART and resumption of care.
- ▶ Over the year reviewed, 1,401 patients across the country achieved viral load levels below 1,000 copies/mL through the support from the project.

HIV

HIV TESTING

Identification of new HIV cases among vulnerable populations is a priority in the Alliance's programs. Despite the damaged healthcare infrastructure, in 2022, **156 thousand** key population clients received rapid HIV testing with the financial support of the Global Fund. Over the same period of time, **7,001** people from key populations were placed under medical supervision – **57%** of the officially reported cases of HIV infection in Ukraine.

THE CONTRIBUTION OF OCF, INDEX TESTING, AND CASE MANAGEMENT TO LINKING PATIENTS WITH MEDICAL FOLLOW-UP IN 2022, BASED ON DATA FROM SYREX AND PHC (MOH OF UKRAINE)



- ▶ Despite the migration of service providers, doctors, and clients fleeing the war, as well as continuous shelling and power outages, the **OCF CDC** project managed to maintain testing efforts at pre-war levels and reach **92,635** clients with testing and counseling services, while the (*OCF Global Fund*) project increased testing levels among key population clients by a quarter to **20,222** (*versus 16,328 in 2021*). We also manage to keep up the effectiveness of the case management intervention: **99%** are started on ART within the project (*OCF CDC*), whereas the number of case management clients linked to ART has increased from **79%** to **91%**.
- ▶ In 2022, we succeeded in maintaining/fully restoring the delivery of OCF services in most regions where active hostilities were taking place, and even expanded them for certain target groups in new areas. Following the de-occupation, in May 2022, OCF staff underwent custom-tailored training, which made it possible to launch a new intervention within the Global Fund-sponsored project for long-term ART adherence support (CIRI).

- ▶ As part of the **HealthLink** project, **44,422** people were tested for HIV, **2,008** were newly diagnosed with a positive status, and **1,832** were linked to healthcare services for regular medical checkups. The overall percentage of HIV detection over this period of time was **4.5%**, which is higher than that in 2021 (2.5%, respectively).
- ▶ In 2022, the Alliance's programs scaled up **self-testing** as one of the approaches to detecting HIV in hard-to-reach communities not covered by preventive programs. In June 2022, an HIV self-testing chatbot was launched, which resulted in 10,621 tests being issued to test sexual and injecting partners at risk. In total, in 2022, 17,608 HIV self-test kits were distributed within projects supported by the Global Fund (76% more than in 2021).

A PERSONAL REAL-LIFE STORY

In September 2022, Volodymyr (name changed) contacted NGO Era of Mercy (Odesa). Together with his brother, at the onset of the war, they came to Odesa from occupied Luhansk to find a job and start a new life. However, their attempts at turning over a new leaf were unsuccessful, and the men ended up on the street with no money and no place to stay. They had to live in homeless shelters, abandoned basements, or out on the street where they came across all kinds of new people. After a while, Volodymyr took to abusing alcohol and later graduated to drugs. Fortunately, one of their friends told them about the OCF (CDC) project, gave them referral coupons, and informed them about the reward for getting tested. Desperate, hungry, dirty, and penniless, they visited the website. At that point, the organization had food kits available from the UN International Food Program. Volodymyr's brother was the first to come in for testing, and later he brought his brother over to the testing site. Volodymyr did not say much and was reluctant to answer all the questions, constantly apologizing for his appearance. After talking to the client for a while, once a comfortable atmosphere was created for him, the OCF project's social workers suggested that he take an assisted self-test. Volodymyr tested positive for HIV. Once his positive status was announced, he was scared and could hardly believe that this was happening to him. It was a good thing that he was able to talk to a psychologist and social workers right after the test as he told them that he used to be a promising athlete, led a pretty interesting life and had a job he loved. However, under the pressures of the war breaking out, back in Luhansk, he started overindulging in alcohol, and soon had to give up his athletic aspirations and quit his job. The case manager introduced Volodymyr to an infectious disease doctor who was known to always treat clients with respect and care. Volodymyr has been a client of the OCF project for almost six months now. Over this time, he and his brother have found jobs and a place to stay. They are regular clients of the service delivery site and, speaking from personal experience, explain to other clients that no matter what the odds, everything in this life can be rearranged and sorted out.

INNOVATIVE APPROACHES TO TESTING

- ▶ As part of the **HealthLink** project, the website <https://oraltest.org.ua>, continued to be active and used for distributing **SafeBoxes for the LGBTI community**. This is a prevention kit that includes an oral HIV test, a box of condoms, lubricants, awareness-raising materials, and stylish souvenirs. Given that the community members were constantly moving around Ukraine, essentially the only possible option for implementing preventive measures was to ship these kits out in the mail. Since the war broke out, a total of 5,787 boxes were ordered.



This is 1.7 times more than in the previous 12 months of the project.

- ▶ The **Video Doctor program** continued to operate so as to relieve the doctors' workload and engage with as many partners of HIV-positive patients as possible to get them tested. It is based on playing videos specially designed for different target groups to HIV-positive patients on their cell phones or tablets while healthcare workers are filling out health records or preparing for medical procedures. Since the outbreak of the war, 971 HIV-positive people have watched these videos in medical offices. As a result, 614 of their partners have been tested, **with 327 new HIV cases (53%) being identified among them.**

RESEARCH DATA

As part of the project, *"Improving the HIV Treatment Cascade for Key Populations Through Differentiated Identification of New Cases and Engagement in Treatment, Capacity Building of the Public Health Center of the Ministry of Health of Ukraine and Strategic Information in Ukraine,"* the research project titled *"Barriers and Facilitators to HIV Diagnosis, Treatment Initiation and Retention on ART Among PWID Under 25 and Female PWID During the War in Ukraine"* was conducted (<https://aph.org.ua/wp-content/uploads/2022/12/Report-barriers-HIV-among-PWID-Ukr.pdf.pdf>).



This study identified the needs of target groups in regard to HIV testing, treatment, and related services (*OST, treatment of hepatitis and STIs*), reasons for avoiding the use of relevant services by young PWID and female PWID, ways and methodologies for reaching target communities, as well as provided recommendations for

engaging these PWID subgroups in HIV testing, treatment, and ensuring their retention in care during the war in particular and in crisis situations in general.

ACCESS TO TREATMENT (ART)

- In 2022, CDC project services delivered both through partner NGOs (OCF) and optimized HIV case finding strategies via regional mobile rapid response teams (MCF) have not only been adapted to match present-day realities, but also expanded.

Since the beginning of October, this expansion has taken place in the following areas: OST (Zaporizhzhia, Cherkasy, Chernihiv, and Kirovohrad regions) and PrEP (Cherkasy, Mykolaiv, and Kirovohrad regions). A new component, New Risk Groups (NRG), was launched for testing and follow-up for linkage to care among people who are at high risk of HIV infection but are not covered by other prevention and treatment programs. The implementation teams have adapted their approach and set up



warming stations, Points of Invincibility, and bomb shelters to beef up their core testing sites. Social workers are doing everything they can to attract and retain the most vulnerable groups in treatment: they help clients get their ID documents re-issued, accompany them to homeless shelters or locations where free meals are served, help internally displaced people find jobs, make home deliveries of ART drugs, or even send them abroad with volunteers.

SUCCESS STORY

Anna, a client of the MCF project, the component that is aimed at building adherence to ART (CIRI), agreed to resume care at the end of 2021 at the urging of social workers on the mobile team. She had previous experience taking ART, but only during pregnancy, and now she had 4 kids. After joining the project, Anna communicated openly with the social worker, talking about her barriers to adherence to ART, and after some counseling, she overcame her fears and resumed the intake of her medication on a regular basis. However, the life of this family was turned upside down by the war... In the first week of the full-scale invasion, she, her four kids and husband were forced to leave their home in the village of Zahaltsi (Bucha area), and flee for their lives. All that remained of her house was a pile of bricks. The team's specialists helped Anna and her family get a modular home to return to their native Kyiv region. The staff of the mobile outpatient clinic continues to support her and do their best to help her both morally and financially (by providing clothes, household items, and making ART deliveries). Importantly, the client has achieved a non-detectable viral load and remains committed to adhering to ART.

- ▶ As part of the HealthLink project, 232 deliveries of ART drugs were made to clients who had to leave their homes due to the war, which is almost **four times as many as in the same period before the war** (*from 01/24/2021 to 02/24/2022, 59 deliveries of ART drugs were made*).
- ▶ As part of the component **"Expanding Access to HIV Treatment Services"** of the project "Improving the HIV Treatment Cascade for Key Populations through Differentiated Case Detection and Treatment Engagement, Capacity Building of the Public Health Center of the Ministry of Health of Ukraine and Strategic Information in Ukraine":
 - Roughly **30,000** parcels with ARVs were delivered via mail services or shipped to HIV patients' individual addresses.
 - More than **500** patients with advanced HIV were provided with expensive CT/MRI scans in 12 regions of Ukraine.
 - **1,300** vehicle trips were made to transport 40,000 blood samples from rural ART sites to regional/interregional laboratories for viral load, CD4 count, and other types of testing.
 - Despite the military aggression of the Russian Federation, extra shifts were arranged for patient appointments to continue (*early morning, late evening, and weekends*) in 20 health care facilities (*primarily regional and city AIDS centers*) across 11 regions. Over the year of war, **23,369** patients have visited healthcare facilities during extra working hours, thus accessing uninterrupted care and undergoing timely diagnostic procedures and counseling.
 - The work of **333** specialists was supported to track patients who missed a scheduled visit to an ART site at **275** health care facilities across the country. While the war has been going on, **109,440** patients (*total*) who missed their scheduled visits to the ART dispensing sites have been contacted over the phone to ensure retention in ART and resumption of care.



PREVENTION

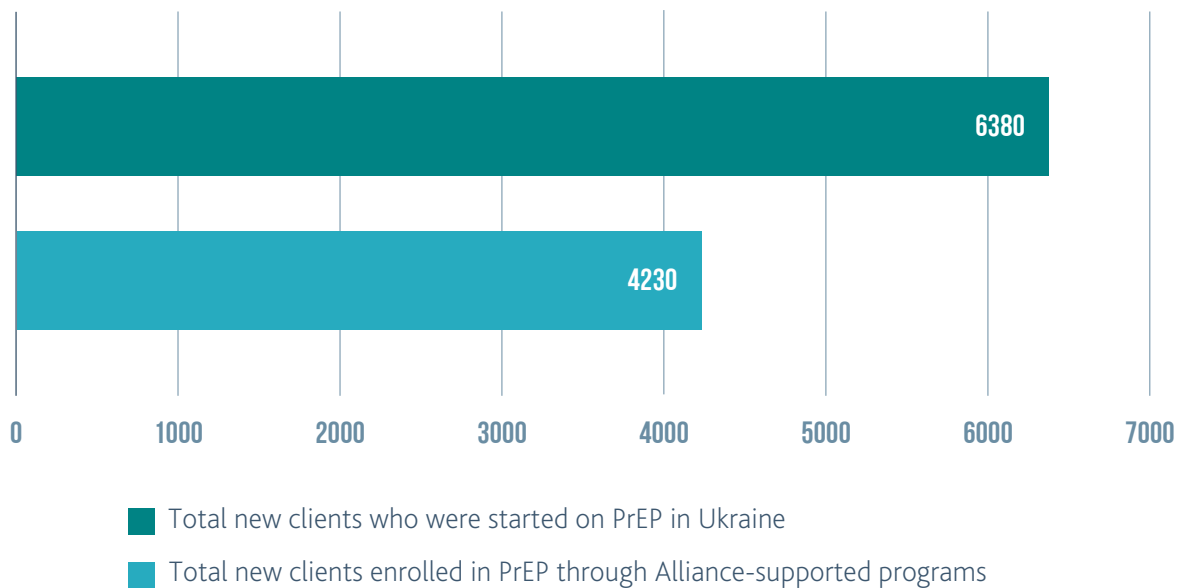
PROGRAMMATIC CHANGES IMPLEMENTED TO ENSURE ACCESS TO SERVICES FOR KEY POPULATIONS DURING THE WAR::

- ▶ Emergency funding from the Global Fund was provided to **30** NGOs to cover the costs associated with their provision of a basic package of preventive services in January-March 2022, totaling almost UAH 14 million.
- ▶ A one-time distribution of a larger volume of HIV prevention supplies and extensive online counseling prepared and provided.
- ▶ Clients were provided with humanitarian aid, assistance with housing and getting a replacement ID.
- ▶ A framework was established to refer IDP clients to service organizations in the area of temporary residence.
- ▶ The amount of naloxone dispensed was increased to reduce overdose risks for PWID.
- ▶ Procurement procedures for NGOs were simplified to ensure flexibility in prevention programs.
- ▶ The geographical reach of PrEP was expanded to cover Lviv, Chernivtsi, Zakarpattia, and Ivano-Frankivsk regions as well.
- ▶ Preventive services for internally displaced transgender people were organized in Odesa, Zakarpattia, Khmelnytskyi, and Lviv regions.
- ▶ The range of counseling topics covered by NGO social workers was expanded to meet the new needs of clients.

PRE-EXPOSURE PROPHYLAXIS (PREP)

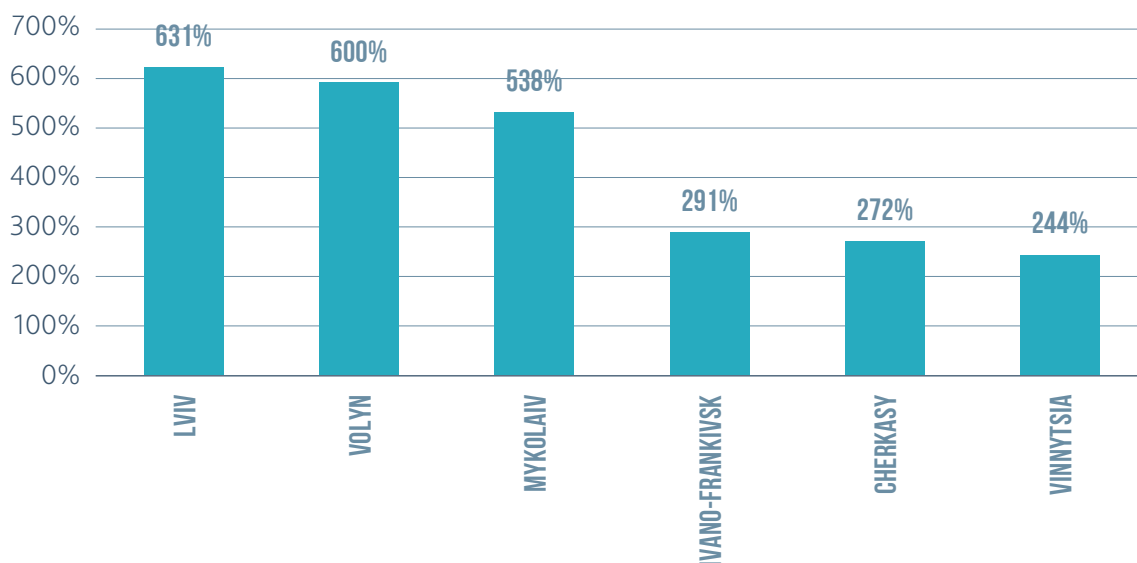
- **66% (4,230 persons)** of all new people linked to the pre-exposure prophylaxis program were enrolled through the Alliance's follow-up and referral programs.
More than 1,000 people resumed PrEP after an interruption.

IMPLEMENTATION OF PREP IN UKRAINE (2022) BASED ON DATA FROM PHC (MOH OF UKRAINE) AND SYREX



- Migration of clients due to the war, their organized referrals to service delivery NGOs in the area of their current residence, and new models of client engagement contributed to an increase in demand for PrEP among KPs: as part of the Global Fund project, **34% more clients** started PrEP in 2022 than in 2021. The largest increase in demand was recorded in Lviv and Volyn (*a six-fold increase*), Mykolaiv (*a five-fold increase*), Ivano-Frankivsk, Cherkasy, and Vinnytsia (*a 2.4-2.9-fold increase*).

INCREASE IN NEW ENROLLMENTS FOR PREP PROGRAMS (2022 VERSUS 2021) (GLOBAL FUND FUNDING), SYREX



- In 2022, the Global Fund project engaged 3,263 MSM (108% of the target) and 705 other KP clients (117% of the target). In 2022, the involvement of PWID and their partners in the program almost doubled compared to 2021. 50% of new clients were enrolled in PrEP with transportation to health care facilities as part of the arrangement.

A VERBATIM REPORT FROM THE CLIENT:

Oleh (*name changed*), a client of the MSM prevention project, and a PrEP recipient: "On February 27, I was forced to move from Kyiv to the Lviv region. The year before, while I was getting PrEP, Vitalii, my case manager, helped me along this path. On April 7, Vitalii wrote to me that now a similar opportunity had opened up in Lviv. On Saturday, I arrived at the address he provided, and 20 minutes later I was getting my PrEP. This is so important to me, because now I can get tested, pick up free lubricants, and do PrEP right in the center of Lviv, without having to wait in lines at the hospital. Just as important is the fact that the testing is conducted by a social worker I know from back in Kyiv."

In order to maintain access to preventive services for displaced MSM clients, in April, the geographic reach of the program being implemented by Alliance.Global was expanded to cover the Lviv Oblast as well. From the very first day when the program opened in Lviv, 11 MSM were started on PrEP for the first time. Clients are required to pre-register for services on the website www.prep.com.ua. On scheduled days, a doctor and a nurse come to the office and dispense PrEP to clients in a matter of 15 minutes, while they do all the necessary tests in one visit to the office.

MOBILE OUTPATIENT CLINICS

As a result of the Russian aggression, mobile outpatient clinics have demonstrated their robust capacity in ensuring the uninterrupted delivery of preventive services, especially in regions where the burden on the healthcare system has increased significantly due to infrastructure damage and clients' difficulties in reaching remote healthcare facilities:

- **49,294 clients made 109,037 visits (124% of the annual target)** to **27** mobile outpatient clinics.



The demand for mobile outpatient clinics has significantly increased during the wartime period due to the critical need for additional services, such as evacuating clients and NGO workers, delivering ART, PrEP, and OST to ensure an uninterrupted continuum of care and preventive interventions, provide humanitarian assistance, transport clients and doctors to hospitals in combat zones for diagnosis and medication deliveries, etc. One outpatient clinic was completely destroyed as a result of ongoing hostilities in Mariupol in early March 2022.

A VERBATIM REPORT FROM THE CLIENT:

"I know that here I will not be judged or preached at. So, I visit the mobile outpatient clinic whenever it arrives. The social worker does an HIV test for me. And I generally rely on her for advice and guidance whenever I have any problems."

Svitlana (name changed), client of Svitlo Nadii (Light of Hope) (NGO-based charity), Poltava

A STORY FROM THE FIELD: SUMY REGIONAL NGO CLUB CHANCE

Published in April 2022, this material was awarded the First Prize of the Media **Competition** Drug Addiction and HIV/AIDS in Ukraine: Challenges Caused by the War" hosted by the Alliance.

<https://trybuna.sumy.ua/reports/htos-pidnosyt-patrony-htos-peche-hlib-htos-vydaye-shprytsy-yak-u-sumah-pid-chas-vijny-zajmayutsya-profilaktykoyu-vil/>

"Some people help the war effort in combat roles, some others bake bread, or pass out syringes": How HIV prevention programs operate in Sumy during the war

In Sumy, on the outskirts of the city, there is a mobile outpatient clinic. Inside of the bus, the social worker, Oleksandr, is collecting boxes with syringes and needles. Putting them on a small table, he says, *"Everyone has their own front in the fight for victory. Some people help the war effort in combat roles, some others bake bread, or pass out syringes."*



About **30** people are daily processed through the Club Chance mobile outpatient clinic. *"Shelling doesn't scare us. We've got our own "armored train" to protect us,"* Oleksandr jokes. He says that during the first month of the full-scale war, they were working on adrenaline. When the war broke out on February 24, he picked up the supplies for handing out at the office and brought them home. For several weeks, he passed out syringes from his own home or made arrangements over the phone.

The social worker Oleksandr would follow the route on foot or by bicycle. He would make the rounds of the gathering places of people who use drugs and give out syringes.

"We posted an announcement that Club Chance clients who need clean syringes can get in touch by calling the social workers' personal phone numbers. We identified the number of people and the city areas where it would be convenient for them to pick up the supplies," he says.

The situation was further complicated by the fact that no shuttle buses or public transportation were running in the city. It was difficult for clients to get to the fixed sites for services.

Two weeks later, the mobile outpatient clinic resumed its activities and **sometimes travelled to the service delivery sites amid shelling and air raid sirens.**

"It was critical for us to provide HIV prevention services in the city with no interruptions. We couldn't afford to stop the work we had been doing for 16 years. Not even for a day," says Oleksandr. "I don't know how things stand now, but back then syringes were in short supply. There were three-hour-long lines at pharmacies. Pharmacists gave out only one syringe of the same size per person. So the clients needed them badly."

This work is for the future. You can't fight HIV for years and then all of a sudden just skip a few months of prevention services at one point, because this can spark the spread of disease and public health hazards across the region. Those are easier to prevent than to cure.

People are gathering around the bus. They need to be counseled, get answers to all their questions, receive advice and guidance, and get screened for TB. *"Re-using the same needle is a huge risk. It's one thing when you re-use your own needle, but using a borrowed one is a big no-no. I try to never do that," says one of the clients. "And there were no syringes available in the pharmacies. They are worth their weight in gold for us now. We used to come here and got everything for free. Sometimes Oleksandr would bring the free supplies right to my doorstep."*



Throughout the month of March, the mobile outpatient clinic still offered HIV and HCV tests. Currently, only tests for hepatitis are available. Due to the ongoing war, the logistics are a challenge, so we are still waiting for a new delivery.

"This is our front line – we are saving these people's lives," says Oleksandr.

Valerii, the ambulance driver, agrees with this sentiment. Driving a large (and rather old) mobile clinic bus, skillfully navigating through the city's streets, is not a walk in the park. But it's much worse when you have to do that amid air raids and wailing warning sirens...

OVERDOSE PREVENTION



- ▶ Social workers from **33** NGOs provided overdose prevention counseling services to **31,827** PWID who inject opioid drugs and distributed **40,906** ampoules of **naloxone** to prevent overdose deaths.
- ▶ Given the increased demand and the difficulty procuring this emergency antidote for overdoses in the regions, the Alliance initiated its **additional procurement** and delivered **7,580** ampoules for prevention projects working with PWID.

A VERBATIM REPORT FROM A SOCIAL WORKER:

"Overdose prevention is one of the important areas of our work. Our social workers managed to personally save the lives of two people who were on the verge of an overdose death. This became possible through the social workers' skillful actions and the naloxone they were carrying."

Employee of the CF Rehabilitation Center for Drug Users Zakhid Shans , Ivano-Frankivsk

SERVICES FOR TRANS* PEOPLE:

- ▶ Despite the ongoing war and the highly closed nature of the trans* community, **3,689** people were reached with the minimum package of services. As a result of the war, clients were migrating to other regions of the country, i.e., Odesa, Zakarpattia, Khmelnytskyi, and Lviv regions where local NGOs set up prevention services for them.
- ▶ In response to the difficulties of access to hormone replacement therapy, for the first time ever, the Alliance procured **150** annual courses (*5,300 packs*) of transfeminine and transmasculine hormone therapy. In less than 3 months of the intervention, **52** trans* people from 12 cities of Ukraine received the necessary medications.
- ▶ In 2022, **52 trans* people** were being provided with temporary housing and comprehensive social and psychological support services until the crisis situation in Kyiv and Odesa cleared up.

UNINTERRUPTED ACCESS TO SERVICES VIA DIGITAL TECHNOLOGIES

To ensure access to prevention and harm reduction services related to the use of psychoactive substances, the Alliance is implementing a special program via the Help24 digital platform to provide online outreach and remote counseling services, as well as ship out prevention supplies through the mail. The points of entry to the platform are the website [Help24.org.ua](https://help24.org.ua), associated social networks, and the Telegram Bot <https://t.me/help24ua>.

The program ensures uninterrupted access to services for key populations in wartime and post-war periods, as well as under conditions of forced displacement and disruptions due to damaged public health infrastructure and logistics:

- ▶ More than **2,000** members of vulnerable communities accessed delivery services in 2022.
- ▶ **2,511** HelpBox kits were distributed, those containing **18,368** syringes, **1,577** needles, **17,104** alcohol-soaked wipes, **21,840** condoms, **19,254** lubricants, **2,260** doses of naloxone, and **1,166** HIV tests.
- ▶ **1,546** clients enrolled in prevention programs for the first time in 2022.
- ▶ **1,189** clients received psychological counseling.
- ▶ **1,523** clients remotely received medical video consultations



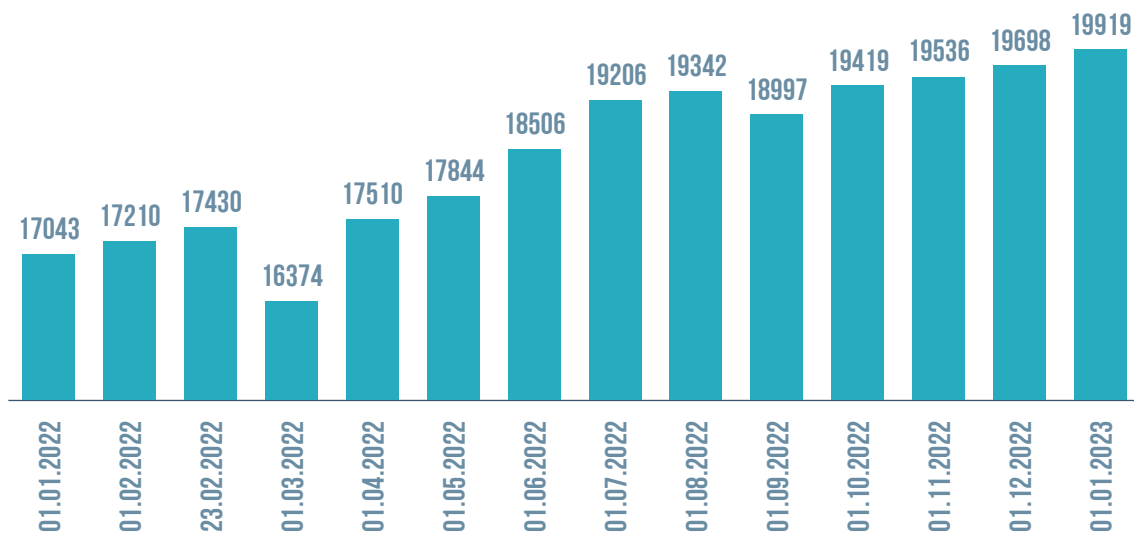
The platform is staffed by infectious disease specialists, psychiatrists, narcologists, endocrinologists, gynecologists, urologists, proctologists, psychologists, and legal counsels. Access to the platform makes it possible to customize packages of prevention supplies and services to match the specific needs of each client, as well as to adjust the range of services offered and bring on board other specialists as circumstances require.

OPIOID SUBSTITUTION THERAPY (OST)

- **The government-sponsored OST program continues to evolve amid the ongoing war.** Since the outbreak of Russia's full-scale invasion, **in 2022, the program has increased by 2,489 OST patients, and by 2,876 in total.**

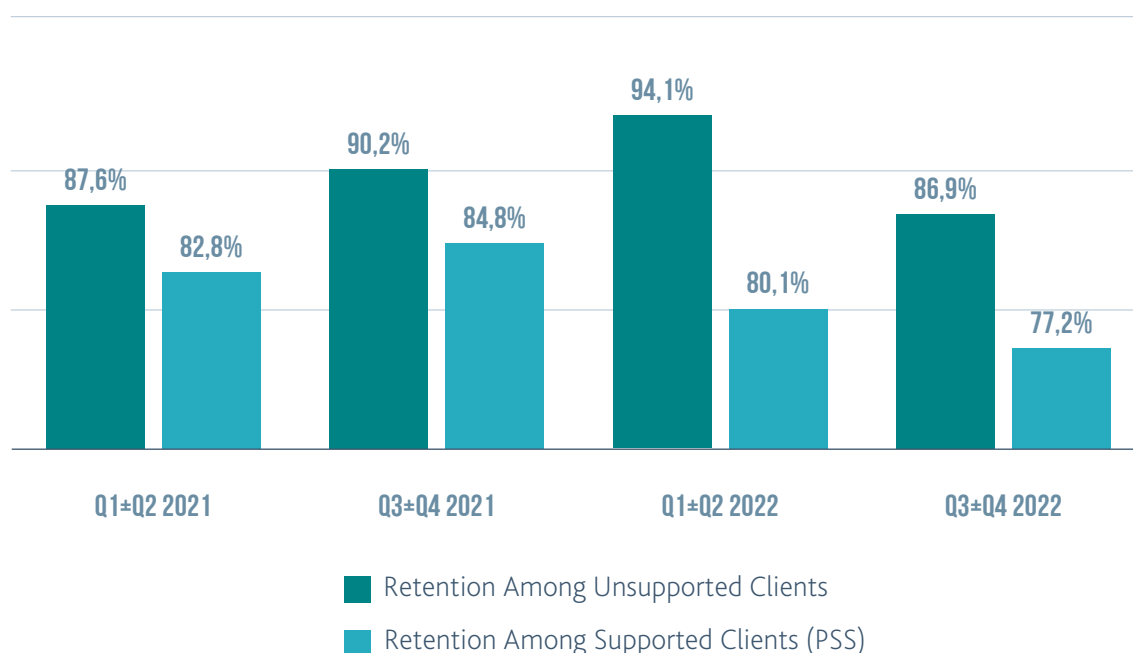
As of January 1, 2023, **19,919 patients** were enrolled in the government-supported program, of which 5,562 (**28%**) received psychosocial support services made available with the support of the Alliance, thus contributing to the retention of 79.2% of patients on OST in critical conditions.

PATIENT GROWTH RATES (PUBLIC SECTOR)



- The APH-supported services provided as *Psychosocial Support for OST Patients* through 24 regional NGOs made sure that the retention rate among OST patients was significantly higher than among unsupported patients.
- The Alliance **provided humanitarian support to OST patients**, i.e., food and hygiene kits/certificates, psychosocial support services with a total budget of UAH 6,099,600.
- In 2022, 5,245 services of transportation to OST dispensing sites were provided to the most vulnerable patients and healthcare workers while there were no or limited transportation options, thereby ensuring the uninterrupted continuum of care and patient retention in the program.

COMPARISON OF RETENTION RATES



- The Alliance continues to support the development of the OST program in the correctional sector, with 7 OST dispensing sites currently operating, where 150 clients are receiving treatment. At the end of 2022, the Alliance provided technical support to initiate efforts for setting up another two OST dispensing sites.
- Technical support was also provided to renovate/set up OST dispensing sites (*upon request from health care facilities*). The Alliance helped repair / renovate a new office of the OST dispensing site at the Mykolaiv Regional Mental Health Center which was heavily damaged by hostile shelling in March 2022. These repairs / renovations made it possible for more than 446 patients to continue their treatment.
- In 2022, the Alliance supported health care facilities that dispense OST, which were overworked and underfunded by Ukraine's National Health Service due to the ongoing war and the resulting migration of patients, by providing extra funding with a total budget of UAH 4,911,760.0. During the wartime in Ukraine, **926 patients were enrolled in OST** in PEPFAR-supported regions through the CDC project's framework of referrals of PWID from OCF and MSF projects to OST dispensing sites.
- At the beginning of the war, **OST drugs were dispensed as part of the pilot project via** mobile outpatient clinics in the Dnipropetrovsk oblast. Currently, the MoH order is being awaited to approve six fully equipped MOCs for dispensing OST drugs so that this intervention can be launched in PEPFAR-supported regions in a full-scale manner.

THE STORY OF A PATIENT WHO ACCESSED PSYCHOSOCIAL SUPPORT FOR OST PATIENTS (*Khmelnyskyi Oblast*):

The case manager of **100 Percent Life Network** (*Khmelnyskyi*), an NGO that provides APH-funded psychosocial and humanitarian support services, was approached by a pregnant client who was registered at the OST dispensing site in Shepetivka (*Khmelnyskyi Oblast*). A fetal abnormality was diagnosed in the last stages of her pregnancy, and she was urgently hospitalized at the Khmelnytskyi Regional Perinatal Center, where the baby was immediately brought out by C-section. As it was an emergency hospitalization, and any minute lost could have endangered the baby's or the mother's life, the woman basically had 10 minutes to pack up and leave. She picked up only a few days' supply of essential medicines.

The case manager accompanied and transported the laboring woman to the Khmelnytskyi-based OST site where she was dispensed the necessary medication. Getting the quick response and qualified help played a critical role in ensuring the continuity of care.

The baby was born healthy and currently the mother and child are doing well. The NGO provided diapers and baby formula by way of humanitarian aid.

A VERBATIM REPORT FROM THE CLIENT:

"I want to share with you a story about a ray of light in the realm of darkness. About what a great job our social workers are doing and how much we need them. On February 24, 2022, a completely new life began for all Ukrainians, and the events that took place that day split our lives into the "before" and "after." There is not a single person in this country who has not been affected by this vile and murderous war. Jumping a bit ahead of myself, I will mention here that I'm enrolled in the OST program. 13 years ago when I found out that this "miracle" exists, frankly speaking I could hardly believe it. But it does exist. By joining the program, I started a new chapter in my life and so did my nearest and dearest people, which are my two kids and my mother. A different life began, a sober life full of new joys and disappointments. But that was the life of a free, happy person.

So, on February 24, 2022, it all came to an end. It was a real tragedy, a total disaster where everything was wrecked and ruined. We jumped into action without overthinking it, thanks to my kids who had supported and followed me. I was packing things in some kind of agony, but I felt an empty void in my head, not knowing where I was going, how I would be received, and whether I would even be received over there. I called the social worker from NGO Synergiia Dush (Synergy of Souls) that works with OST patients in the Dnipropetrovsk Oblast with the support of the Alliance for Public Health, and she calmed me down a bit. In this bottomless pit of chaos and panic, the withdrawal syndrome started to set in, and I could feel I was getting triggered into a full-blown panic attack. I was scared of everything – how to find a place to stay, whether I would be enrolled in the program, especially with three people in my care to think of. But, as they say, "You are not alone!" I was met by a social worker. I will say this much, the girls did a terrific job, it would have been so difficult to get by without their support! The miracles began when they paid for us to stay in a hotel until we found an apartment. Then they helped us rent a place and got us enrolled in the program. We arrived in Dnipro at 23:30, and at 9:00 in the morning I picked up my OST drug. Next, they helped me get started on ART, which is critically important as well. The girls never left my side for a moment. And so, life goes on, and we will learn to live in a new way. It's not easy to start your life anew from scratch, when you are 45, but it's well worth it."

Iryna (name changed), client of NGO Synergiia Dush (Dnipro)

RESEARCH WORK

В рамках проєкту “Розширення доступу до медикаментозного підтримувального лікування (МПЛ) в Україні” (ExMAT), дослідницького проєкту у рамках партнерства зі Школою медицини Єльського університету (США) за фінансування Національного інституту з проблем споживання наркотиків (США), в наукометричних виданнях було опубліковано наступні статті:

- ▶ Ivasiy, R., Galvez de Leon, S. J., Meteliuk, A., Fomenko, T., Pykalo, I., Bromberg, D. J., Madden, L. M., Farnum, S. O., Islam, Z., & Altice, F. L. (2023). Responding to health policy recommendations on managing opioid use disorder during Russia's invasion of Ukraine: Divergent responses from the frontline to the west. *Frontiers in public health*, 10, 1044677.
<https://doi.org/10.3389/fpubh.2022.1044677>
- ▶ Altice, F. L., Bromberg, D. J., Dvoriak, S., Meteliuk, A., Pykalo, I., Islam, Z., Azbel, L., & Madden, L. M. (2022). Extending a lifeline to people with HIV and opioid use disorder during the war in Ukraine. *The Lancet. Public health*, 7(5), e482–e484.
[https://doi.org/10.1016/S2468-2667\(22\)00083-4](https://doi.org/10.1016/S2468-2667(22)00083-4)
- ▶ Madden, L. M., Farnum, S. O., Bromberg, D. J., Barry, D. T., Mazhnaya, A., Fomenko, T., Meteliuk, A., Marcus, R., Rozanova, J., Poklad, I., Dvoriak, S., & Altice, F. L. (2022). The development and initial validation of the Russian version of the BASIS-24. *Addiction science & clinical practice*, 17(1), 65.
<https://doi.org/10.1186/s13722-022-00343-0>
- ▶ Bromberg, D. J., Madden, L. M., Meteliuk, A., Ivasiy, R., de Leon, S. J. G., Klyucharyov, K., & Altice, F. L. (2022). Medications for opioid use disorder during war in Ukraine: Innovations in public and private clinic cooperation. *The Lancet regional health. Europe*, 20, 100490.
<https://doi.org/10.1016/j.lanepe.2022.100490>
- ▶ Altice, F. L., Bromberg, D. J., Klepikov, A., Barzilay, E. J., Islam, Z., Dvoriak, S., Farnum, S. O., & Madden, L. M. (2022). Collaborative learning and response to opioid misuse and HIV prevention in Ukraine during war. *The lancet. Psychiatry*, 9(11), 852–854.
[https://doi.org/10.1016/S2215-0366\(22\)00318-2](https://doi.org/10.1016/S2215-0366(22)00318-2)

TUBERCULOSIS (TB)

- ▶ TB detection activities continued in full force. In 2022, more than **100 thousand members of most-at-risk populations** were reached with TB screening, more than 30 thousand people received TB diagnostic services, and 1,206 members of most-at-risk populations were started on treatment (*149% of the planned target*). TB detection efforts among IDPs were ramped up and expanded almost 2.5-fold to reach more than 25.5 thousand people with screening services. Enrollment in care within Alliance-supported programs is 7% of the national indicator.
- ▶ TB screening coverage among most-at-risk populations in 2022 was **1.5 times higher than in 2021**. In the country's western regions, TB detection has increased almost 3-fold compared to the same period in 2021 due to a wave of mass migration westward from eastern and southern Ukraine.
- ▶ Amid an ongoing war, when people stay for a long time in crowded indoor areas without proper infection controls, endure prolonged stress and have suppressed immunity, as well as give their own health a low priority compared to other concerns, with all those factors resulting in untimely diagnosis, active case-finding in contacts of people with TB has become as important as ever. Compared to the previous year, TB detection among TB contacts has seen a 23 percent increase to reach 81 cases per 1,000 contacts, which is 5.2 times higher than the 2021 average rate in Ukraine (*15.5 cases per 1,000 contacts*). The number of people to be tested to identify one TB case is 12 contacts of people with TB.
- ▶ The Alliance's projects ensure higher retention in care: even among patients treated during the full-scale war, the rate of care interruptions in APH-supported projects being 3.4% for DS-TB and 6% for DR-TB (*versus the national indicators in Ukraine – 5.6% and 12.3%, respectively, based on data from the Handbook of Statistics 2021 [Public Health Information and Data]*).
- ▶ **In the country's western regions**, TB detection **has increased almost 3-fold** compared to the same period in 2021 due to a wave of mass migration westward from eastern and southern Ukraine.
- ▶ In 2022, **8,423** people were reached with medical and psychosocial support services from relevant projects for TB/DR-TB patients. Owing to the support provided, 84.2% of people with drug-susceptible TB and 81% of people with drug-resistant TB were effectively cured of TB. The complementary project with a focus on TB patients' mental health continued in three regions.

With the support of the Alliance, the **TB Help Hub** Platform was created to collect relevant data and address TB-related needs, as well as provide assistance to TB facilities and people with TB. The following activities were implemented over the course of 2022:

- ▶ Over \$88,000 raised.
- ▶ The urgent needs of people with TB in selected health care facilities across 8 regions of the country were met.
- ▶ 220 kg of medications were purchased for patients of TB facilities in the Kherson region.
- ▶ Repairs and renovations were made to the underground shelter of the Odesa Center for Disease Control (*Socially Significant Diseases*).
- ▶ OSB (*Oriented Strand Boards*) purchased and delivered to board up the shattered windows in the Kherson TB center.
- ▶ The Alliance released 8 humanitarian grants to regional organizations that were used to provide 1,672 people with TB and their families with food and hygiene kits.

ADDRESSING WARTIME CHALLENGES

- ▶ To protect social workers working in areas affected by ongoing hostilities, the Alliance provided them with armored vests and delivered 28 bicycles and 50 thermal bags to partners for delivering essential medicines for daily intake by TB patients in response to the challenges caused by disrupted transportation links and fuel shortages.
- ▶ TB screening was also conducted in underground shelters and other crowded settings.
- ▶ During the war, the needs of patients underwent significant changes, to which the Alliance responded promptly and adequately: additional funding was allocated for evacuation, housing, and employment in the regions of relocation. Also provided were food packages for families, clothing and underwear for evacuees, as well as psychological support. Unfortunately, we have lost contact with some of our clients due to ongoing hostilities, occupation, evacuation, or even death.



A PERSONAL REAL-LIFE STORY

Due to hostile shelling attacks on Nikopol, a part of the multi-storey building where Tatiana, a social worker of **NGO Resursy Zhyttia** (*Resources of Life*) (charitable foundation) lived, was ruined. Luckily, she was in an underground shelter on that fateful night and survived. But even such a tragic event did not make her and other social workers of the charitable foundation leave the city. As true heroes and incurable optimists, they continue to pull their weight and contribute to overcoming the TB epidemic.

"If not us, who would be there to help our clients?", Tetiana asks, sincerely surprised, and goes on to tell us about life in the city, "Residents of Nikopol have already learned how to tell apart by sound the strikes by "Grad," "Uragan," "Pion" or other artillery or multiple rocket launcher systems. After all, our city is right next door to (only 7 km away from) the Kakhovka water reservoir, and the Zaporizhzhia nuclear power plant located in occupied Enerhodar."

Despite all the work-related difficulties and problems, daily shelling, air raid alerts, missiles flying over the city and getting shot down by the best guys of the Armed Forces of Ukraine, **NGO Resursy Zhyttia** (charitable foundation) is continuing to successfully implement programmatic activities in the Dnipro region to identify TB cases among most-at-risk communities and contacts within the framework of APH-supported projects. For example, in Nikopol, over the past 3 months, approximately 8% of TB cases have been detected among those evaluated who have been in contact with TB patients.



Our dedicated social workers deserve much of the credit for achieving such great results (*high TB detection rate*) amidst ongoing hostilities. Although they had to adapt their work routines to suit the existing conditions during air raids and bombings, when all health care facilities are required to close operations and resume patient appointments only once the all-clear is given, they remain undaunted in the face of any hardship. Spending their nights in damp, cold basements and bomb shelters where they are forced to seek cover and hide from constant shelling at night, our social workers continue to provide all the necessary services to their clients during the day.

COLLABORATION WITH THE MINISTRY OF DEFENSE OF UKRAINE

In 2022, the Alliance began to step up efforts in collaborating with the Ministry of Defense to actively detect TB cases among the military. In the first months of the war, while mass mobilization was underway, military commissariats were unable to thoroughly screen all draftees for active respiratory TB, which led to the spread of the disease within the ranks of the Armed Forces contingent. To help detect TB among the military, the Alliance has equipped the mobile outpatient clinic with an X-ray machine and a safe sputum collection area. We have now signed a cooperation agreement with the Vinnytsia Military Hospital and started work. We already have the first results to show for it: Over the two months of related activity, 9 cases of TB among the military have been identified. All of those diagnosed with TB are currently undergoing treatment.

VIRAL HEPATITIS

Through the efforts of 14 Alliance partner NGOs in 16 regions of Ukraine, **2,023** HIV/HCV and TB/HCV co-infected persons from key populations were identified and referred from harm reduction programs to HCV treatment services, accounting for **22.5% of those covered by treatment at the national level** (99% of them are people who inject drugs).

Some patients were evaluated using diagnostic tests to determine treatment outcomes in the areas of their residence or relocation, as well as outside of the country. 98% of patients who were started on treatment are continuing with the program. All of them received a comprehensive package of HCV treatment services at public cost.

85% of patients completed the full course of treatment in 2022, while the rest are continuing it. Treatment was effective for 96% of patients. Some patients were evaluated using laboratory (*diagnostic*) tests to determine treatment outcomes both in the areas of relocation and outside of the country.

ADDRESSING WARTIME CHALLENGES:

- ▶ Contact was lost with 27 patients from Mariupol who were started on treatment in January-February 2022, while the care delivery sites in Sloviansk and Kherson were closed down.
- ▶ In order to avoid care disruptions at the beginning of the war, the Alliance urgently procured requisite medicines and rapid HCV screening tests. After the closure of the care delivery site in Sloviansk, the Alliance quickly made arrangements to provide treatment for patients in the city of Pokrovsk (*Donetsk Oblast*). A physician was urgently trained in the management of co-infection as rapid tests, diagnostic reagents, and medications were delivered. A total of 50 PLHIV received HCV treatment.
- ▶ Patients in the Donetsk Oblast were offered treatment in safer locations, reimbursed for transportation costs, and provided with food packages. The medicines were delivered by social workers in their own vehicles, via volunteers, mobile outpatient clinics, or by mail.
- ▶ Medications and diagnostic reagents were delivered to Russia-occupied Kherson. NGO employees rescued the therapy drugs amid shelling attacks and air strikes, and dispensed them to patients, working as a team in interaction with medical staff.
- ▶ When the laboratory of the AIDS Center in Kryvyi Rih was damaged by shelling and temporarily shut down, the Alliance quickly switched patients to the services of a private laboratory with no disruptions in care. A total of 250 patients received treatment.

A PERSONAL REAL-LIFE STORY

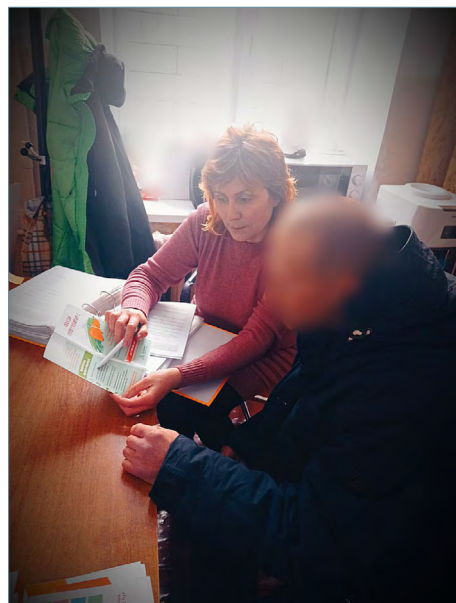
Oleksandr (*name changed*) from Donetsk, 42, was tested for hepatitis C in August 2022. The laboratory test confirmed the diagnosis of HCV infection, sending the man into shock, because previously he had no complaints about his health or general wellbeing...

Currently, the man is serving a sentence in the Horodok Correctional Facility #131 (*Rivne Oblast*). He was transferred there from another prison in the Donetsk region due to the ongoing hostilities.

"I have been on the OST program for several years now. After the transfer, I joined the program in Rivne," says Oleksandr.

It was during a visit to this opioid substitution therapy site that the man was tested for HCV and found to be positive.

Iryna Dubych, one of the most experienced case managers who has been working with the Alliance's projects for a long time, an employee of **NGO Nashe Maibutnie** (*Our Future*) (*Rivne Regional Charitable Foundation*), told the man that he could undergo a course of free treatment, counseled Oleksandr, and provided him with full information as to his particular case.



"The client immediately agreed to undergo treatment and was very happy to get this opportunity at no financial cost to himself," says Iryna Dubych, adding that clients who find out about the diagnosis need detailed explanations, additional information, and individual support. *"The fact that the diagnosis, support throughout the treatment period, and the actual treatment are free of charge is important for building client commitment and a strong incentive for them to seek recovery,"* Iryna points out.

Oleksandr successfully completed the treatment and made a full recovery!

"Now I tell everyone how important it is to trust the professionals, to get checked up and treated if you are ill! I know that a lot of people who give up on their health and wellness when they find out about hepatitis, HIV, TB... But I can say for sure that if you follow the advice and guidance from your case manager and doctors, and stick to your treatment regimen, most diseases and conditions are not a death sentence!" concludes Oleksandr.

THE RIGHTS OF VULNERABLE POPULATIONS

- ▶ The National Drug Addiction and OST Hotline demonstrated a **151%** increase in the number of calls compared to the same period in 2021; **89%** of them are related to the ongoing war (*questions about the steps to take for accessing services from another site in Ukraine or abroad, disruption/interruption of OST, getting treatment for patients from private OST dispensing centers that have closed down due to the war*).
- ▶ Paralegals who provide assistance to women living with drug addictions report a **120%** increase in calls regarding human rights violation incidents or legal aid assistance.
- ▶ Despite the martial law restrictions, **training efforts** continued for **local territorial units/services of the National Police and other law enforcement and security agencies** that provide public law enforcement services during the martial law period so as to raise their awareness of HIV prevention/harm reduction and OST programs operating in the country and the areas of service coverage, as well as to minimize human right violations against key populations, especially people who use drugs, including OST patients, and advocate for the decriminalization of key populations, reduce stigma and discrimination, and inform law enforcement officers on aspects of personal safety practices in the context of HIV infection, hepatitis, and TB with due regard for martial law restrictions. For the first time ever, the component of training in basic first aid skills for law enforcement officials was introduced in conjunction with the human rights component. A total of **228** trainings were conducted for **4,784** participants.



IMPLEMENTING THE REACT SYSTEM FOR MONITORING AND PROMPTLY RESPONDING TO HUMAN RIGHTS VIOLATIONS

Target activities were being implemented as part of the projects entitled *Sustainability of Services for Key Populations in the EECA Region (#SoS_project#2.0)*, and *Accelerating Progress in Reducing the Burden of Tuberculosis and HIV Infection in Ukraine* with the support of the Global Fund to Fight AIDS, Tuberculosis and Malaria.



This activity is intended to remove non-medical barriers that impede access to HIV/TB prevention and treatment.

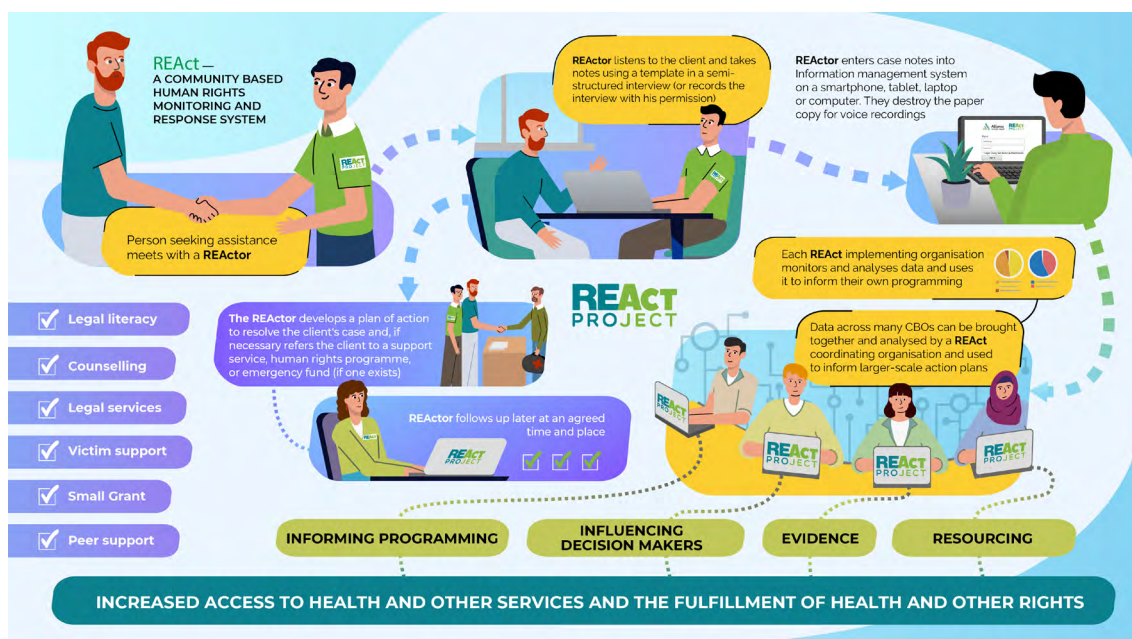
REAct is a tool developed by Frontline AIDS to monitor and respond to human rights violations. The REAct system allows users to record a wide range of human rights violations and barriers that limit access to HIV prevention or health services. This information is strategically important for the implementation of adequate measures in response to rights violation incidents at the individual level (*first and foremost, through linkages and referrals to legal, medical, psychosocial, or other services*), as well as for guiding nationwide advocacy and legislative initiatives.

2022 PERFORMANCE RESULTS

COUNTRY	NGO	REACTORS	AREAS COVERED	TOTAL CASES
Ukraine	63	85	18 regions, 24 cities. All regions – involving the use of the National OST Hotline	2,901 (2,799 persons)
The Balkan region	5	9	5 cities	155
Georgia	17	32	7 cities	656
Kyrgyzstan	15	29	6 cities	854
Moldova	14	23	8 cities	300
Tajikistan	12	12	8 cities	809
Uzbekistan	1	9	1 city	649

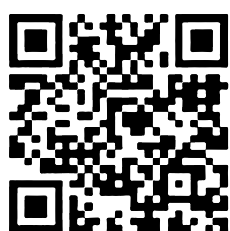
In Ukraine, 994 rights violation cases (34%) were registered, directly associated with the ongoing war.

In 2022, the REAct system was running in **11 countries** and **59 cities**. Upon receiving requests from clients, the REActors provide social and legal assistance and, if need be, help them access medical services. Based on the cases recorded in the REAct database, data analysis was conducted and the next steps identified to remove barriers for key populations in accessing services.



ADVOCACY ACTIVITIES

In 2022, at the initiative of the Alliance, in particular the REAct project, the OST Patient Certificate was re-instituted. Relevant advocacy efforts in Ukraine are being conducted with the support and participation of the Alliance's partner organizations, as well as the Public Health Center of the Ministry of Health of Ukraine.



In order to raise key populations' awareness of their rights, the REAct project in Ukraine has developed the first one in a series of informational animated videos, *"What to do if you are denied protected medical care or money is extorted for access to related services?"* An informational video about the REAct system itself was released as well. The videos are available on the project's YouTube channel:

THERE ARE REGIONAL CHATBOTS IN PLACE FOR REPORTING RIGHTS VIOLATIONS AGAINST KEY POPULATIONS:



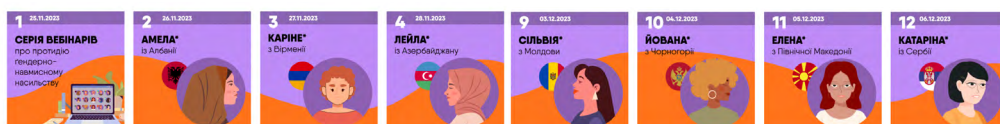
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 REAct_APH_bot

Outside of Ukraine, this tool is being implemented within various projects. In particular, in four countries (*Moldova, Georgia, Kyrgyzstan, and Tajikistan*), REAct has been adopted as the sole system for monitoring rights violations against vulnerable communities under national grants from the Global Fund. In 2022, some regional networks started working via REAct: [ECOM](#) (*Eurasian Coalition for Health, Rights, Gender, and Sexual Diversity*) records rights violations against the LGBTIQ+ community in Armenia, Kyrgyzstan, Kazakhstan, Tajikistan, and Uzbekistan; and ENPUD (*Eurasian Network of People Who Use Drugs*) records strategic cases of healthcare rights violations against drug users in Moldova, Georgia, Tajikistan, Kyrgyzstan, Kazakhstan, and Ukraine.

The cases and data related to rights violations against vulnerable populations recorded through the REAct tool are widely used by communities and non-profit organizations for advocacy purposes at the national and international levels.



As part of the international campaign “The 16 Days of Activism Against Gender-Based Violence,” the REAct team held a [series of webinars](#) to support, protect, and prevent violence against women and girls, especially those from vulnerable communities. [Stories of brave women](#) who have found the strength to stand up for their own rights and resist violence were published daily as well.

Let their stories inspire women from Eastern Europe and Central Asia to put up a fight and never let anyone abuse them. More than 400 people from 14 countries in the region took part in the webinars. The webinars were translated into five languages.



SERIES OF WEBINARS FOR EASTERN, SOUTH-EASTERN EUROPE AND CENTRAL ASIA COUNTRIES

05.12.2022 Webinar 1 WHY DOES SHE ENDURE? Causes, Preconditions, and Types of Violence in Relationships	 Speaker Marta Chumalo	
07.12.2022 Webinar 2 PORTRAIT OF AN OFFENDER How Stereotypes Can Turn Into a Fist		 Host Victoria Kalyniuk
09.12.2022 Webinar 3 DO NO HARM Ways to Support Survivors of Violence		

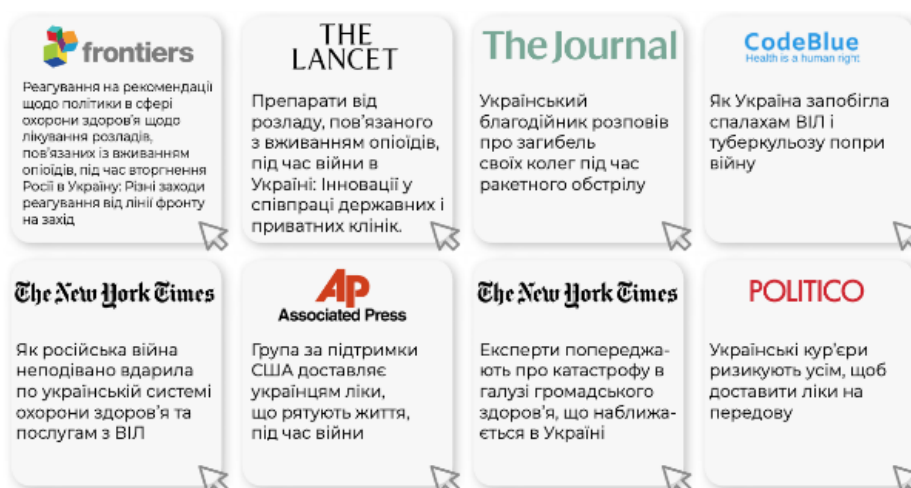
ACTIVITIES OUTSIDE OF UKRAINE

FOR THE FIRST TIME SINCE ITS INCEPTION, THE ELIZABETH TAYLOR HUMAN RIGHTS AWARD WAS GIVEN TO UKRAINIANS.



Tatiana Deshko and Andriy Klepikov were presented with the **award** on the stage of the 24th International AIDS Conference (*AIDS 2022*) in Montreal, Canada. They dedicated the award to Maksym Butkevych, a human rights activist who was taken prisoner by Russia and is now being held there; the doctors who were saving lives amid shelling attacks and air strikes or in underground shelters; the communities fighting on the front lines; and civil society, which became the backbone of the AIDS response during the war and facilitated access to medicines, humanitarian aid, and evacuation resources.

COVERAGE OF UKRAINIAN EFFORTS IN RESPONSE TO HIV AND TB DURING THE WAR BY INTERNATIONAL MEDIA OUTLETS



REGIONAL PROJECT (#SOS_PROJECT 2.0) SUSTAINABILITY OF SERVICES FOR KEY POPULATIONS IN THE EECA REGION

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

IMPLEMENTATION PERIOD: 2022–2024.

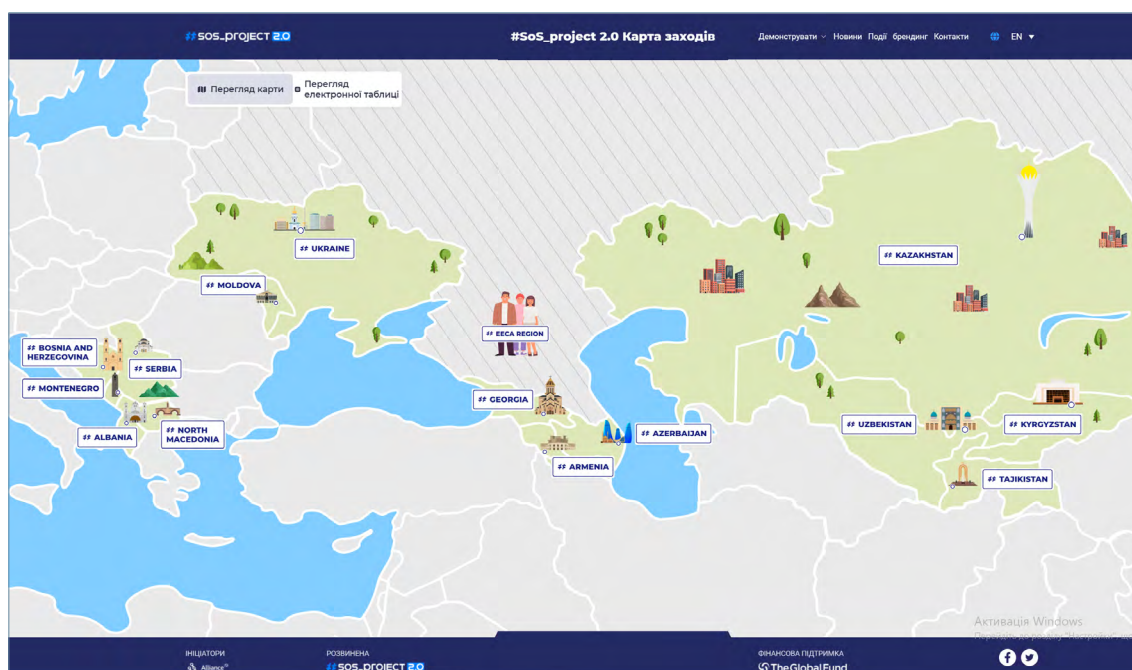
COORDINATION: The project is coordinated by a consortium of partner organizations under the coordination leadership of ICF “Alliance for Public Health.”.

CONSORTIUM:



#SoS_project: The largest and most comprehensive regional project of the Global Fund that boasts a unique combination of national and regional partnerships.

Geographical Coverage: Azerbaijan, Bosnia and Herzegovina, Armenia, Georgia, Kazakhstan, Kyrgyzstan, North Macedonia, Moldova, Montenegro, Romania, Serbia, Tajikistan, Ukraine, and Uzbekistan.



2022 OVERALL PERFORMANCE RESULTS

PREVENTION

- ▶ Pre-exposure prophylaxis and long-acting PrEP modalities.
 - Relevant medications were purchased for three countries (*Bosnia and Herzegovina, Montenegro, and North Macedonia*).
 - According to plans, additional medicine purchases for North Macedonia will be leveraged to expand PrEP programs (*expanding the target group to cover trans* people, sex workers, IDUs, expanding geographical reach through the use of the PrEP-oriented mobile clinic, piloting new approaches, advocating for regular government funding for PrEP and its renewal*).
 - In 2022, the Alliance succeeded in creating two working groups in collaboration with pharmaceutical companies ViiV Healthcare and GILEAD to develop a pilot project for providing 100 clients of KPs with long-acting PrEP.
 - In partnership with the WHO European Office, ECOM analyzed PrEP access and barriers and developed [recommendations for clinical guidelines](#) to include PrEP as part of the standard package of care in Armenia, Georgia, Kazakhstan, Kyrgyzstan, Ukraine, Uzbekistan, and Tajikistan.
- ▶ Interventions for stimulant users:
 - A study was conducted to investigate possible options for implementing interventions for stimulant users in Ukraine. A protocol was developed to evaluate the overall acceptability of the model, as well as the impact on reducing stimulant use. Discussions were held with the identified partner medical institution, i.e., the addiction treatment center in Lviv to launch a pilot project. In addition, a manual for mental health professionals on cognitive behavioral therapy for stimulant users was developed and adapted to suit local requirements.
- ▶ Identification of new HIV cases:
 - [Evaluation](#) of HIV rapid testing/self-testing policies, regulations, and practices in North Macedonia, Albania, Montenegro and Serbia, and development of recommendations.
- ▶ Optimizing the cost of HIV testing and ARVs:
 - The Alliance's partner, Health Advocacy Coalition (HAC), is analyzing HIV testing practices and approaches to reducing the price of ARVs in Moldova, Kazakhstan, and Kyrgyzstan. Over the course of 2022, advocacy plans were developed in these countries to address current pricing strategies, generic competition, and the capacity for increased coverage.
 - In Kazakhstan, a virtual HIV testing network was initiated in November 2022. Within its framework, participants will be able to share experiences, articulate questions, take part in discussions, and collaborate on HIV testing documents

COMMUNICATIONS

In 2022, the project's website was launched: <https://sos.aph.org.ua>

KEY ACHIEVEMENTS IN THE PROJECT'S COMMUNICATION ACTIVITIES:

- ▶ From the first days of the full-scale war, the [#HelpNow](#) chatbot was up and running to later become a regional hub for helping Ukrainian patients who had to flee the war and leave the country.
- ▶ At AIDS2022 in Montreal, the project team took part in a series of presentations and active discussions in the Global Village, as well as posted a series of posters.



- ▶ A panel discussion of experts on HIV, harm reduction, and Islam was held to share experiences and present successful mechanisms for implementing harm reduction and HIV prevention programs in Islamic countries.



- The Sustainability Forum was held in Tbilisi on September 26-28, 2022, where the sustainability of the response in EECA countries was discussed, and the Business Continuity Forum in Warsaw on December 8-9, 2022, where the participants explored the capability of HIV programs to operate under force majeure conditions (*caused by technological, man-made, natural, or other hazards, etc.*).

FAST TRACK CITIES (FTC)

- Collaborative efforts continue with 18 previously engaged and 5 new municipalities, and other stakeholders to implement the Fast Track Cities Initiative with a view to achieving the 95-95-95 and zero discrimination targets set out in the Paris Declaration.
- Preparations are underway to sign the Declaration in two Albanian cities (*Tirana and Shkodra*) – Expected and due in early 2023.
- Adaptation of the Paris Declaration Implementation Plan by the Podgorica City Administration including a number of measures aimed at achieving the targets. At the end of 2022, SEE RCN undertook efforts to develop relevant plans for three cities in Bosnia and Herzegovina, which will be proposed to city administrations for approval in 2023.
- In July 2022, the project continued its activities with Dushanbe in Tajikistan and added two new cities, i.e., Kulyab and Khorog.
- At the end of 2022, following advocacy activities with the Ministry of Health of Azerbaijan and CCM, Baku was brought on board to implement the FTC approach.
- As a result of budget advocacy efforts, city administrations allocated funding to implement activities aimed at achieving the targets of the Paris Declaration in Dushanbe (\$130,000), Podgorica (\$43,000), Skopje (\$35,000), Tirana (\$32,000), Novi Sad (\$9,000), Šabac (\$7,500), and Zvezdara (\$4,000).

BUDGET ADVOCACY

The project's efforts were aimed at ensuring the sustainability of mechanisms for commissioning social services in the field of HIV in the countries of the EECA region. The NGO-based contractual model for public funding is working successfully (*in Georgia, Moldova, Ukraine, Kazakhstan, Kyrgyzstan, and Tajikistan*). In Armenia and Azerbaijan, relevant efforts were focused on articulating government priorities, budgeting for services, and promoting the use of social services commissioning within the HIV service sector based on public funding. In Uzbekistan, related work activities were aimed at improving the mechanism for commissioning social services (*transitioning from project competitions to the implementation of government-commissioned HIV-related social services*). To consolidate the achievements and further ensure the stability of social services commissioning, as well as increase public funding for HIV services, the team was working to establish regulatory framework for service packages and their pricing, and advocated for budgeting through national programs.

By virtue of budget advocacy within the SOS project, in 2022, the total funding from government budgets for HIV services via mechanisms for commissioning social services was **\$1,764,423**.

The total estimated amount of funds allocated from national budgets for HIV services in the EECA region (*which is made up of contracts with NGOs and other HIV-related procurements*) is **\$29,388,199**.

HUMAN RIGHTS

"The sustainability of HIV programs depends on investments saved going into meaningful strategies. Together with The Economist's analytics team, we have clearly shown that redirecting funds from repressive drug policies against drug users to HIV substitution therapy and treatment programs halts the epidemic and saves money. Governments in EECA should be implementing this approach. Then there will be enough funds not only to stop the spread of HIV, but also of hepatitis, Covid, and other diseases. We were working hard toward this end in 2022."

Tetiana Deshko, Director International Programs at ICF "Alliance for Public Health"

► **Activities of the Eastern and Central European and Central Asian Commission on Drug Policy (ECECADC):**

- Two meetings of the ECECADC Commissioners took place in 2022: On May 31, 2022 (*online*) and November 2, 2022 (*in-person*). During the meetings, the Commissioners discussed the current situation and the consequences of the war in the region, as well as adopted resolutions and action plans.
- The Commissioners represented ECECADC at various global and regional events. President Kwasniewski and Professor Kazatchkine represented the Commission at the EuroScience Open Forum "Why Europe Must Lead Drug Policy Reform and Decriminalization," on 14 July, 2022 (*Leiden, the Netherlands*) (*online*), at a media event in Montreal (*as part of the International AIDS Conference*), and on 31 July, 2022 (*Montreal, Canada*). These events were well covered by international media afterwards. Mr. Andriukaitis represented the Commission at the Bloomberg CityLab 2022 session: Drug Legalization: What Works? On October 11, 2022 (*Amsterdam, the Netherlands*) (*in person*). Prof. Kazatchkine and Olena Kucheruk participated in creating the JIED podcast on drug policy and the war in Ukraine starting from 2014, on October 27, 2022.
- During the visit to Vilnius on November 2-4, the central focus of advocacy efforts was the draft law on decriminalization of possession of small amounts of cannabis. On November 23, the Seimas Committee on Legal Affairs approved amendments to the Administrative and Criminal Codes that propose that the possession of small amounts of cannabis without the intent to distribute be decriminalized.



REGIONAL COVID-19 PROGRAM UNDER C19RM

- ▶ 120 thousand rapid COVID antigen tests purchased (*Bosnia and Herzegovina, Serbia, Tajikistan, and Ukraine*).
- ▶ Work on shelters expanded – In addition to five shelters for women who use drugs in domestic violence households (*Ukraine, Serbia, North Macedonia, and Kazakhstan*), the project supported the shelters for members of the LGBT community in Kazakhstan, Uzbekistan, Kyrgyzstan, and Tajikistan.
- ▶ Two countries (*Moldova, Montenegro*) received support for the purchase of 13 vending machines.
- ▶ Roughly 3,200 clients received assistance in the form of food packages (*Georgia and Kazakhstan*).
- ▶ 12 countries received technical assistance in developing national contingency plans.
- ▶ Personal protective equipment purchased for IDPs and KPs (*124 thousand disposable face masks and 1 thousand antiseptics*).
- ▶ Support provided for the operation of the hotline/telephone services within the framework of the REAct human rights monitoring system to provide remote support and legal advice to women from most-at-risk populations who experience domestic violence and human rights violations (*in Tajikistan and Uzbekistan*).

THE AWARENESS-RAISING CAMPAIGN “LET’S WIN TOGETHER” IN SUPPORT OF THE SIXTH GLOBAL FUND REPLENISHMENT



#LetsWinTogether #FightForWhatCounts

At the initiative of ICF “Alliance for Public Health” and with the support of 108 Ukrainian non-governmental organizations, the awareness-raising campaign **“Let’s Win Together”** was launched and conducted.

Over the entire period of the campaign, the following accomplishments were recorded: 4+ million people reached with communication content and 1.5+ million video views.

AMONG OTHER THINGS, THE AWARENESS CAMPAIGN INCLUDED THE FOLLOWING:

- ▶ A series of video stories about community members and their role, work, and achievements made through the support of national programs by the Global Fund in Ukraine.
- ▶ In total, 108 civil society organizations involved in implementing HIV/TB-related activities in Ukraine were established as part of the campaign, calling for a 30 percent increase in funding from the Global Fund. Open letters were sent to Prime Minister of Canada Justin Trudeau, the Minister of Europe and Foreign Affairs of France, Denmark’s Minister for Development Cooperation and Minister for Nordic Cooperation, Flemming Møller Mortensen, the President of the European Commission, Ursula von der Leyen, Finland’s Minister for Development Cooperation and Foreign Trade, Ville Skinnari, the Minister of International Development and Minister of Nordic Cooperation, Anne Beathe Tvinneim, and Sweden’s Minister of International Development Cooperation, Matilda Ernkrans.
- ▶ A flash mob organized and performed all the way from Ukraine to Brussels, which started in Kyiv and ended on Schuman Square in Brussels in front of the European Commission Headquarters.
- ▶ A series of presentations across various offline and online platforms: #AIDS2022 in Montreal (*Canada*), a session of the Danish Parliament, etc.





ANNEXES



ANNEX 1.

FINANCIAL PERFORMANCE

TABLE 1. BUDGET PERFORMANCE (2022).

DONOR	PLANNED EXPENDITURES, THOUSAND UAH	FUNDS UTILIZED, THOUSAND UAH*	COMPLETION STATUS, %
The Global Fund to Fight AIDS, Tuberculosis and Malaria	746,273	656,698	88
U.S. Centers for Disease Control and Prevention (CDC)	235,814	232,924	99
Christian AID	86,060	77,814	90
U.S. Agency for International Development (USAID)	62,156	56,179	90
Yale University	4,937	4,937	100
United Nations Office for Project Services (UNOPS)	3,576	2,963	83
National Institute on Drug Abuse (NIDA, USA)	1,434	957	67
Other Donors **	8,851	8,931	101
TOTAL	1,149,102	1,041,404	91

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

** Projects with funding levels below UAH 2 million

DIAGRAM. BREAKDOWN OF EXPENDITURES BY CATEGORY, 2022

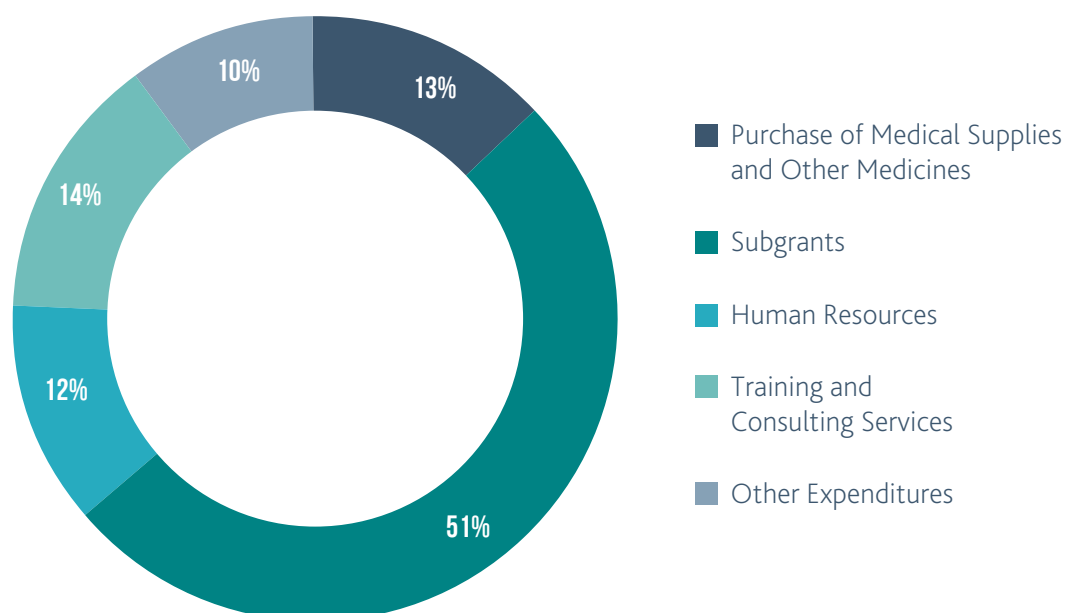


TABLE 2. BREAKDOWN OF FUNDING CONTRIBUTIONS (2022).

DONOR	CONTRIBUTION SIZE*	
	THOUSAND UAH	SHARE IN PERCENTAGE (%)
The Global Fund to Fight AIDS, Tuberculosis and Malaria	571,975	53.66
U.S. Centers for Disease Control and Prevention (CDC)	250,959	23.54
Christian AID	134,639	12.63
U.S. Agency for International Development (USAID)	65,325	6.13
Deutsche Gesellschaft für Internationale Zusammenarbeit (GIZ)	9,551	0.90
The Elton John AIDS Foundation	7,549	0.71
Payoneer	5,485	0.51
Yale University	4,903	0.46
International Renaissance Foundation	2,670	0.25
United Nations Office for Project Services (UNOPS)	2,281	0.21
Other Donors **	10,587	0.99
TOTAL	1,065,924	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 funding was received

** Projects with funding levels below UAH 2 million

ANNEX 2.

LIST OF MAJOR PROJECTS ADMINISTERED BY THE ALLIANCE IN 2022

PROJECT TITLE	DONOR	IMPLEMENTATION PERIOD
Accelerating Progress in Reducing the Burden of Tuberculosis and HIV Infection	Global Fund	01/01/2021 – 12/31/2023
Sustainability of Services for Key Populations in Eastern Europe and Central Asia	Global Fund	01/01/2022 – 12/31/2024
Improving the HIV Treatment Cascade for Key Populations Through Differentiated Identification of New Cases and Engagement in Treatment, Capacity Building of the Public Health Center of the Ministry of Health of Ukraine and Strategic Information in Ukraine	U.S. Centers for Disease Control and Prevention (CDC)	09/30/2019 – 09/29/2024
Innovative Collaboration Between Civil Society and the Healthcare System to Effectively Identify and Treat HIV in Ukraine	NGO 100 Percent Life through funding by the U.S. Agency for International Development (USAID)	Year 5: 10/01/2021 – 09/30/2022 Year 6: 10/01/2022 – 09/30/2023
Expanding Medication Assisted Therapy in Ukraine (ExMAT)	Yale University School of Medicine (USA)	July 2017 – June 2023
Challenge Facility for Civil Society	STOP TB Partnership (UNOPS)	12/17/2021 – 12/16/2022
Contingency Response in Ukraine	<i>Stichting Aidsfonds – Soa Aids Nederland (SHO/Giro555 funds)</i>	02/28/2022–02/29/2024
Providing Humanitarian Crisis Support	FRONTLINE AIDS	08/15/2022 – 01/15/2023
Integrated humanitarian response program for refugees and IDPs affected by the war in Ukraine	Christian Aid (CAID)	09/01/2022–08/31/2023
Supporting the Activities of the Mobile Crisis Response Team and the Humanitarian Convoy	International Renaissance Foundation	09/01/2022–12/30/2022 (extended until 02/28/2023)
Supporting, Documenting, and Promoting Emergency Response and Health Services for Internally Displaced Persons	Deutsche Gesellschaft für Internationale Zusammenarbeit (GIZ)	10/20/2022 – 08/31/2023
<i>Emergency Assistance Fund for Ukraine (Small Grants)</i>	Aidsfonds	12/01/2022–11/30/2025
Humanitarian Assistance to Key Populations Affected by the War and Related Humanitarian Crisis in Ukraine	The Elton John AIDS Foundation	12/15/2022–06/14/2023
Improving Health Care for Mental Disorders among Patients Undergoing Opioid Agonist Therapy	Ukrainian Institute for Public Health Policy with funding from the US National Institute on Drug Abuse	Year 4: 06/01/2021 – 05/31/2022
Integrated Humanitarian Response in Conditions of War and Post-War Reconstruction	Christian Aid (CAID)	06/01/2022–08/31/2022

ANNEX 3.

M – Male
F – Female
T – Trans* Non-Binary Person

KEY OUTCOMES OF PROGRAMMATIC ACTIVITIES

MEMBERS OF KEY POPULATIONS REACHED WITH THE MINIMUM PACKAGE OF PREVENTIVE SERVICES
WITHIN APH-SUPPORTED PROJECTS IN 2022 (TOTAL UNIQUE CLIENTS)

OBLAST/REGION	PWID		SWS		MSM		TRANS* PEOPLE			OTHERS*		
	M	F	M	F	M	T	M	F	T	M	F	T
Vinnitsia	529	84		1	39					2,749	3,846	
Volyn				1	10					841	406	
Dnipropetrovsk				20	137		35	85	64	2,697	1,471	
Donetsk				1	10					5,529	9,201	
Zhytomyr	556	41	11	204	23		9	30	58	16	8	1
Zakarpattia	4		1	3	43		31	63	7	3,001	3,261	
Zaporizhzhia					23					456	122	
Ivano-Frankivsk					29					224	41	
City of Kyiv	166	44	35	264	1,618		29	362	707	2,578	5,240	
Kyiv				5	383					1,534	928	
Kirovohrad					11					238	78	
Lviv	1 248	94		11	321		64	107	57	1,058	1,361	
Mykolaiv							37	43	22	9,137	11,604	
Odesa					628		216	930	318	774	435	
Poltava				22	39					7,677	4,377	1
Rivne			1	6	22		31	26		425	145	
Sumy	504	126								1,107	450	
Ternopil					47		35	42	23	5	6	
Kharkiv			1	7	403		1	14	118	170	85	
Kherson				71	131	5	12	7	64	5,074	5,448	
Khmelnyskyi	308	147		1	18			28	69	356	111	
Cherkasy				3	18					23	17	
Chernivtsi	476	74			89					45	13	
Chernihiv					37					784	1,166	
UKRAINE**	3,816	611	49	620	4,009	5	500	1,704	1,485	46,198	49,588	2

* PWIDs' Partners, People Who Are Close to KP Members, People Who Use Non-Injecting Drugs.

** Controlled Areas

CONSUMABLE SUPPLIES AND MATERIALS DISTRIBUTED WITHIN APH-SUPPORTED PROJECTS IN 2022

OBLAST/REGION	MALE CONDOMS	LUBRICANTS	SYRINGES/ NEEDLES	WIPES
Vinnytsia	4,420	1,451	7,354	6,130
Volyn	2,650	1,200		24
Dnipropetrovsk	59,293	18,803		
Donetsk	950	950		
Zhytomyr	28,111	9,632	14,830	13,000
Zakarpattia	7,695	4,105	690	690
Zaporizhzhia	14,524	2,852		
Ivano-Frankivsk	1,430	715		
City of Kyiv	113,122	90,340	11,087	9,336
Kyiv	24,018	12,072	130	130
Kirovohrad	1,675	1,050		
Luhansk	160			
Lviv	61,000	28,640	23,184	19,320
Mykolaiv	5,520	2,760		
Odesa	119,680	57,374		
Poltava	4,785	2,595		
Rivne	15,170	7,104		21
Sumy	5,590	1,845	7,560	6,300
Ternopil	7,300	5,650		
Kharkiv	21,901	11,928		
Kherson	6,091	4,841		
Khmelnyskyi	10,651	7,480	6,212	5,626
Cherkasy	1,500	1,265		
Chernivtsi	6,140	2,122	7,584	6,320
Chernihiv	1,850	925		
TOTAL (NATION-WIDE)	525,226	277,699	78,631	66,897

TOTAL CLIENTS TESTED USING HIV RAPID TESTS WITHIN APH-SUPPORTED PROJECTS IN 2022

OBLAST/ REGION	PWID		SWS		MSM		TRANS*PEOPLE		OTHERS**	
	THOSE TESTED	THOSE FOUND POSITIVE	THOSE TESTED	THOSE FOUND POSITIVE	THOSE TESTED	THOSE FOUND POSITIVE	THOSE TESTED	THOSE FOUND POSITIVE	THOSE TESTED	THOSE FOUND POSITIVE
Vinnitsia	613	6	1		39				16	
Volyn	31		1		10				11	
Dnipropetrovsk	19,708	1,347	1,770	151	1,607	41	184		10,839	897
Donetsk	1	1	230	19	107				524	26
Zhytomyr	952	58	394	42	22		90		16	
Zakarpattia	8		6		37	2	101	6	18	
Zaporizhzhia	3,187	119	4		290	5	1		1,044	50
Ivano-Frankivsk	25		3		49	3			1	
City of Kyiv	14,343	692	656	50	2,422	31	1,105	2	15,556	536
Kyiv	408	30	6		875	25			3,369	156
Kirovohrad	2,005	63	2		11				3,336	75
Luhansk			3						10	
Lviv	2,327	173	244	14	409	19	226		423	69
Mykolaiv	4,799	209					99		8,986	353
Odesa	16,534	1,966	1,208	94	1,352	7	1,416	2	14,609	1,131
Poltava	1,163	51	29		48				1,468	47
Rivne	2,128	104	391	22	313	10	55		42	12
Sumy	641	13							7	
Ternopil					52		85			
Kharkiv	5,023	266	120	14	786	12	128		58	11
Kherson	650	37	48		102		59		446	23
Khmelnyskyi	507	43			19		79		19	
Cherkasy	3,516	200	11	1	19	1			799	59
Chernivtsi	619	18			89				16	
Chernihiv	1,438	55	2	1	80	1			1,451	84
TOTAL (NATION-WIDE)	79,071	5,429	5,120	408	8,633	151	3,614	10	62,586	3,523

**SCREENING TESTS AMONG HIV-VULNERABLE POPULATIONS FOR SEXUALLY TRANSMITTED INFECTIONS
(SYPHILIS, GONORRHEA, CHLAMYDIA, HBV AND HCV), 2022**

OBLAST/REGION	PWID		SWS		MSM		TRANS* PEOPLE		OTHERS**	
	THOSE TESTED	THOSE FOUND POSITIVE	THOSE TESTED	THOSE FOUND POSITIVE	THOSE TESTED	THOSE FOUND POSITIVE	THOSE TESTED	THOSE FOUND POSITIVE	THOSE TESTED	THOSE FOUND POSITIVE
Vinnitsia			2		58				22	
Volyn	41		1		8				8	
Dnipropetrovsk	17,563	8,988	1		2,683		232		6,205	1,001
Donetsk					192				107	6
Zhytomyr	16		1		25		63			
Zakarpattia	8	3	8	1	36		57		17	1
Zaporizhzhia	3,079	1,533	1	1	684	6	3		1,237	177
Ivano-Frankivsk	3		1		14				1	
City of Kyiv	8,133	5,280			1,274		26	2	4,991	747
Kyiv	268	105			1,044				174	21
Kirovohrad	1,274	586	2		14				3,475	164
Lviv	424	357			144		55		6	5
Mykolaiv	4,131	1,668					218		5,614	469
Odesa	14,604	3,611			360		2,181	2	14,353	1,160
Poltava	981	343							485	46
Rivne	7		5		17		62		21	
Sumy	38								15	
Ternopil					44		148			
Kharkiv	5		9		214		210	1	11	
Kherson	359	198	24	2	53		79		343	23
Khmelnyskyi	435				14		115		8	
Cherkasy	3,185	2,180	11	4	16				688	185
Chernivtsi					3					
Chernihiv	1,451	1,067	1						634	139
TOTAL (NATION-WIDE)	56,005	25,919	67	8	6,897	6	3,449	5	38,415	4,144

EARLY DETECTION OF TUBERCULOSIS AMONG KEY POPULATIONS (PWID, SW, MSM AND THEIR PARTNERS, TRANS* PEOPLE, ROMA, HOMELESS PEOPLE, EX-PRISONERS, AND INTERNALLY DISPLACED PERSONS WITHIN APH-SUPPORTED PROJECTS) IN 2022

OBLAST/REGION	TOTAL CLIENTS SCREENED FOR TB BASED ON SURVEY QUESTIONS	THOSE SCREENED POSITIVE FOR TB	THOSE RECEIVING TB DIAGNOSTIC SERVICES	THOSE DIAGNOSED WITH TB	THOSE WHO WERE STARTED ON TB TREATMENT
Vinnitsia	6,617	1,581	1,309	8	7
Volyn	858	364	887	44	43
Dnipropetrovsk	4,262	950	4,170	243	237
Donetsk	14,375	3,992	5,990	36	36
Zhytomyr	95				
Zakarpattia	6,125	2,428	2,569	45	45
Zaporizhzhia	499	209	367	31	29
Ivano-Frankivsk	266	79	112	5	5
City of Kyiv	8,381	1,308	1,351	9	9
Kyiv	2,050	892	1,550	66	65
Luhansk	2,386	686	815	9	9
Lviv	19,627	5,091	6,132	226	224
Mykolaiv	1,088	692	807	26	18
Odesa	9,684	2,843	6,559	291	290
Poltava	513	366	567	23	22
Rivne	921	390	1,219	52	52
Sumy	44				
Ternopil	388	100	100	8	8
Kharkiv	10,252	3,941	4,163	100	99
Kherson	618	313	499	12	12
Khmelnyskyi	127				
Chernivtsi	1,909	447	256	7	6
TOTAL (NATION-WIDE)	90,715	26,643	39,311	1,241	1,216

TOTAL CLIENTS STARTED ON PREP WITHIN APH-SUPPORTED PROJECTS

OBLAST/REGION	TOTAL CLIENTS WHO WERE STARTED ON PREP
Vinnytsia	44
Volyn	48
Dnipropetrovsk	522
Donetsk	39
Zhytomyr	45
Zakarpattia	55
Zaporizhzhia	100
Ivano-Frankivsk	64
City of Kyiv	946
Kyiv	395
Kirovohrad	70
Luhansk	1
Lviv	265
Mykolaiv	45
Odesa	848
Poltava	96
Rivne	44
Sumy	24
Ternopil	36
Kharkiv	276
Kherson	30
Khmelnyskyi	37
Cherkasy	84
Chernivtsi	57
Chernihiv	63
TOTAL (NATION-WIDE)	4,230

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

Consolidated Financial Statements
for the Year Ended 31 December 2022

INTERNATIONAL CHARITABLE FOUNDATION “ALLIANCE FOR PUBLIC HEALTH”**TABLE OF CONTENTS**

	Page
STATEMENT OF MANAGEMENT’S RESPONSIBILITIES FOR THE PREPARATION AND APPROVAL OF THE CONSOLIDATED FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 DECEMBER 2022	1
INDEPENDENT AUDITOR’S REPORT	2-4
CONSOLIDATED FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 DECEMBER 2022:	
Consolidated balance sheet (statement of financial position)	5
Consolidated statement of financial results (statement of comprehensive income)	6-7
Consolidated statement of cash flows	8
Consolidated statement of equity	9
Notes to the consolidated financial statements	10-18
Explanatory notes to the consolidated financial statements	19-35

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 2022**

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, LLC “Alliance Consultancy” (collectively, the “Organization”) as of 31 December 2022, and the consolidated results of its operations, cash flows, and changes in equity for the year then ended, in compliance with Ukrainian Accounting Standards (“UAS”) and the requirements of the Law of Ukraine “On accounting and financial reporting in Ukraine” (the “Law on accounting and financial reporting”) in respect of the consolidated financial statements preparation.

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

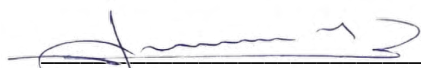
- Properly selecting and applying accounting policies;
- Presenting information, including accounting policies, in a manner that provides relevant, reliable, comparable, and understandable information;
- Providing additional disclosures when compliance with the specific requirements in UAS and the Law on accounting and financial reporting are insufficient to enable users to understand the impact of particular transactions, other events and conditions on the Organization’s consolidated financial position and consolidated 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 ensure that the consolidated financial statements of the Organization comply with UAS and the Law on accounting and financial reporting;
- Maintaining statutory accounting records in compliance with the Ukrainian legislation, Ukrainian Accounting Standards, and the Law on accounting and financial reporting;
- 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 2022 were authorized by the Organization’s management for issue on 30 November 2023.

On behalf of the Organization’s management:



A. Klepikov,
Executive Director

K. Bubnova,
Finance Director



RSM UKRAINE

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www.rsm.ua**INDEPENDENT AUDITOR'S REPORT**

*To the Supervisory Board and the Board of Directors of the
INTERNATIONAL CHARITABLE FOUNDATION "ALLIANCE FOR PUBLIC HEALTH"*

REPORT ON THE AUDIT OF THE FINANCIAL STATEMENTS**Opinion**

We have audited the consolidated financial statements of the *INTERNATIONAL CHARITABLE FOUNDATION "ALLIANCE FOR PUBLIC HEALTH"* and its wholly owned subsidiary "Alliance Consultancy" LLC (hereinafter together – the Organisation), which comprise the consolidated balance sheet (consolidated statement of financial position) as at December 31, 2022, consolidated statement of financial results (consolidated statement of comprehensive income), consolidated statement of cash flows, consolidated statement of equity for the year then ended and notes to the annual consolidated financial statements, including a summary of significant accounting policies (hereinafter – the consolidated financial statements).

In our opinion the accompanying consolidated financial statements present fairly and objectively, in all material respects the financial position of the Organisation as at December 31, 2022, its financial performance and cash flows for the year then ended in accordance with the National Provisions (Standards) on Accounting effective in Ukraine (hereinafter – NP(S)A) and comply with the requirements of the Law of Ukraine "On Accounting and Financial Reporting in Ukraine" №996-XIV of July 16, 1999 (hereinafter – the Law of Ukraine *On Accounting and Financial Reporting in Ukraine*) regarding preparation of the financial statements.

Basis for Opinion

We conducted our audit in accordance with International Standards on Auditing (ISAs). Our responsibilities according to those standards are further described in the *Auditor's Responsibilities for the Audit of the Financial Statements* section of our Independent Auditor's Report.

We are independent of the Organisation in accordance with ethical requirements that are relevant to our audit of the financial statements in Ukraine, in particular: the International Ethics Standards Board for Accountants' *Code of Ethics for Professional Accountants* (IESBA Code) and we have fulfilled our other ethical responsibilities in accordance with these requirements.

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

Emphasis of matters paragraph - Operating Environment

We refer to Notes 2, 3 and 15 to these consolidated financial statements that state that from February 24, 2022, the impact of the ongoing hostilities in Ukraine, the scale of their potential further development, the prospects of their termination and final resolution are unpredictable and have had adverse effect on the economy of Ukraine and operation of the Organisation. The plans of the management regarding this impact are also described in Note 3 to these consolidated financial statements. Our opinion is not modified in respect of this matter.

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Other matters

The audit of the consolidated financial statements of the Organisation for the year ended December 31, 2021 was conducted by another auditor, “Deloitte & Touche Ukrainian Services Company” LLC, which expressed an unmodified opinion on these consolidated financial statements on February 24, 2023.

Responsibilities of the Organisation’s Management and Those Charged with Governance for the Financial Statements

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

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

Those charged with governance are responsible for overseeing the Organisation’s financial reporting process.

Auditor’s Responsibilities for the Audit of the 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 scepticism 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 Organisation’s internal control;
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by management of the Organisation;
- 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 Organisation’s ability to continue as a going concern. If we conclude that the material uncertainty exists, we are required to draw attention in our auditor’s



- 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 Organisation's ability to continue as a going concern. If we conclude that the material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the 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 Organisation 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.

We communicate with those charged with governance regarding 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.

We also provide those charged with governance with a statement that we have complied with relevant ethical requirements regarding independence, and to communicate with them all relationships and other matters that may reasonably be thought to bear on our independence, and where applicable, related safeguards.

Basic information about the audit firm:

- *full name according to the constituent documents:* LIMITED LIABILITY COMPANY "RSM UKRAINE" (hereinafter – the audit firm);
- *information regarding listing in the Register:* under #0084 in the Register of auditors and audit entities, including the section "Audit entities entitled to conduct statutory audit of the financial statements";
- *legal address and actual location:* 04080, 47 Nizhnyoyurkivska Str., Kyiv and 37/19 Donetska Str., 03151, Kyiv respectively.

The Key Audit Partner of the audit resulted in this Independent Auditor's Report is Serhiy Mulyk.

Serhiy Mulyk
Key Audit Partner

Registration number in the Register of Auditors and
Audit Entities 100728

November 30, 2023

37/19 Donetska Str., Kyiv, Ukraine
Audit firm's USRCOU Code: 21500646
<https://www.rsm.global/ukraine>

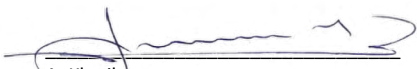
INTERNATIONAL CHARITABLE FOUNDATION “ALLIANCE FOR PUBLIC HEALTH”

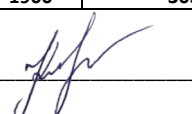
CONSOLIDATED BALANCE SHEET (STATEMENT OF FINANCIAL POSITION)

AS OF 31 DECEMBER 2022

(in Ukrainian Hryvnias and in 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	5,364	4,832
Historical cost	1001	12,403	13,298
Accumulated amortization	1002	(7,039)	(8,466)
Capital investments in progress	1005	19,031	4,777
Property and equipment	1010	18,495	52,951
Historical cost	1011	52,089	94,218
Accumulated depreciation	1012	(33,594)	(41,267)
Total on Section I	1095	42,890	62,560
II. Current assets			
Inventories	1100	73,077	80,637
Production inventories	1101	73,057	80,637
Work in-progress	1102	20	
Accounts receivable on products, goods, works, services	1125	65	942
Accounts receivable on settlements:			
Advances issued	1130	18,758	15,794
With the state budget	1135	383	400
Including income tax	1136	-	342
Other current accounts receivable	1155	30,926	61,594
Cash and cash equivalents	1165	136,032	378,519
Prepaid expenses	1170	1,642	1,858
Other current assets	1190	24	
Total on Section II	1195	260,907	539,744
III. Non-current assets held for sale and disposal groups	1200	-	-
Total assets	1300	303,797	602,304
I. Equity			
Retained earnings	1420	1,095	838
Total on Section I	1495	1,095	838
II. Non-current liabilities and provisions			
Special purpose funding	1525	259,482	519,415
Total on Section II	1595	259,482	519,415
III. Current liabilities and provisions			
Current accounts payable on:			
Goods, works, services	1615	7,640	9,589
Settlements with the state budget	1620	-	73
Including income taxes	1621	-	-
Settlements on insurance	1625	-	-
Staff costs	1630	13	116
Current payables on advances received	1635	804	1,553
Current provisions	1660	6,178	9,449
Deferred income	1665	25,446	59,614
Other current liabilities	1690	3,139	1,657
Total on Section III	1695	43,220	82,051
IV. Liabilities attributable to non-current assets held for sale and disposal groups	1700		
Total equity and liabilities	1900	303,797	602,304


A. Klepikov,
Executive Director


K. Bubnova,
Finance Director

INTERNATIONAL CHARITABLE FOUNDATION “ALLIANCE FOR PUBLIC HEALTH”

CONSOLIDATED STATEMENT OF FINANCIAL RESULTS (STATEMENT OF COMPREHENSIVE INCOME)
FOR THE YEAR ENDED 31 DECEMBER 2022
(in Ukrainian Hryvnias and in thousands)

I. FINANCIAL RESULTS

Item	Line code	Reporting period	Similar period of the prior year
1	2	3	4
Net revenue on sale of products (goods, works, services)	2000	3,901	3,336
Cost of products sold (goods, works, services)	2050	(2,791)	(3,175)
Gross:			
Profit	2090	1,110	161
Loss	2095		-
Other operating income	2120	1 062,767	964,495
Administrative expenses	2130	(102,604)	(84,478)
Other operating expense	2180	(960,228)	(879,886)
Financial results from operating activities:			
Profit	2190	1,045	292
Loss	2195		-
Other finance income	2220	(1,302)	-
Other income	2240		-
Other expense	2270		-
Financial result before tax:			
Profit	2290		292
Loss	2295	(257)	-
Income tax expense	2300		-
Net financial result:			
Profit	2350		292
Loss	2355	(257)	-

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	(257)	292
Net profit (loss) attributable to:			
Owners of the Parent	2470		292
Non-controlling interest	2475		-
Comprehensive income attributable to:			
Owners of the Parent	2480		292
Non-controlling interest	2485	-	-

INTERNATIONAL CHARITABLE FOUNDATION “ALLIANCE FOR PUBLIC HEALTH”


CONSOLIDATED STATEMENT OF FINANCIAL RESULTS (STATEMENT OF COMPREHENSIVE INCOME)
FOR THE YEAR ENDED 31 DECEMBER 2022 (CONTINUED)
(in Ukrainian Hryvnias and in thousands)


III. ELEMENTS OF OPERATING EXPENSE

Item	Line code	Reporting period	Similar period of the prior year
1	2	3	4
Materials	2500	165,100	251,282
Staff costs	2505	109,194	82,558
Social charges	2510	15,823	13,101
Depreciation and amortization	2515	11,312	8,941
Other operating expense	2520	761,403	608,482
Total	2550	1 062,832	964,364

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. Klepikov,
Executive Director


K. Bubnova,
Finance Director

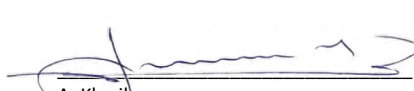
INTERNATIONAL CHARITABLE FOUNDATION "ALLIANCE FOR PUBLIC HEALTH"

CONSOLIDATED STATEMENT OF CASH FLOWS (UNDER DIRECT METHOD)

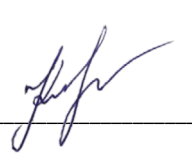
FOR THE YEAR ENDED 31 DECEMBER 2022

(in Ukrainian Hryvnias and in 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	1,813	773
Return of taxes and duties	3005	-	-
Special purpose funding	3010	1 065,925	745,034
Advances from customers	3015	2,938	3,349
Proceeds from return of advances	3020	657	1,078
Income from interest on balances in current accounts	3025	173	200
Proceeds on penalties	3035		10
Other proceeds	3095	51,374	26,000
Cash outflows on payments for:			
Goods (works, services)	3100	(75,829)	(111,904)
Staff costs	3105	(84,795)	(62,739)
Social charges	3110	(16,794)	(14,385)
Liabilities on taxes and duties	3115	(19,955)	(15,254)
Income tax	3116	-	-
Value added tax	3117	(14)	(144)
Other taxes and duties	3118	(19,941)	(15,110)
Advances payment	3135	(218,125)	(160,391)
Returns of advances	3140		(1)
Payments of targeted contributions	3145	(516,316)	(421,298)
Other payments	3190	(9,702)	(28,685)
Net cash flow from operating activities	3195	181,363	(38,213)
II. Cash flows from investing activities			
Proceeds on interest received	3215	-	-
Other proceeds	3250	-	-
Payments for non-current assets	3260	(24,189)	(35,411)
Net cash flow from investing activities	3295	(24,189)	(35,411)
III. Cash flows from financing activities			
Net cash flow from financing activities	3395		-
Net cash flows for the reporting period	3400	157,175	(73,624)
Cash balance at the beginning of the year	3405	136,032	217,513
Effect of changes in foreign exchange rates on the cash balance	3410	85,312	(7,857)
Cash balance at the end of the year	3415	378,519	136,032



A. Klepikov,
Executive Director





K. Bubnova,
Finance Director

INTERNATIONAL CHARITABLE FOUNDATION “ALLIANCE FOR PUBLIC HEALTH”

CONSOLIDATED STATEMENT OF EQUITY
FOR THE YEARS ENDED 31 DECEMBER 2022 AND 2021
(in Ukrainian Hryvnias and in 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	-	-	-	-	803	803
Net loss for the reporting period	4100	-	-	-	-	-	-
Other comprehensive income for the reporting period	4110	-	-	-	-	292	292
Net loss transferred to special purpose funding	4220	-	-	-	-	-	-
Total changes in equity	4295	-	-	-	-	292	292
Balance at the end of the prior year	4300	-	-	-	-	1095	1095
Balance at the beginning of the year	4000	-	-	-	-	1095	1095
Net gain for the reporting period	4100	-	-	-	-	(257)	(257)
Other comprehensive income for the reporting period	4110	-	-	-	-	-	-
Net loss transferred to special purpose funding	4220	-	-	-	-	-	-
Total changes in equity	4295	-	-	-	-	-	-
Balance at the end of the year	4300	-	-	-	-	838	838


A. Klepikov,
Executive Director


K. Bubnova,
Finance Director

INTERNATIONAL CHARITABLE FOUNDATION “ALLIANCE FOR PUBLIC HEALTH”

NOTES TO THE CONSOLIDATED FINANCIAL STATEMENTS

FOR THE YEAR ENDED 31 DECEMBER 2022

(in Ukrainian Hryvnias and in 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	3,083	1,846	520	-	-	-	-	602	-	-	-	3,603	2,448
	060				-	-	-	-	-	-	-	-	-	-
Other intangible assets	070	9,320	5,193	376	-	-	-	-	826	-	-	-	9,695	6,018
Total	080	12,403	7,039	896	-	-	-	-	1,428	-	-	-	13,298	8,466
Goodwill	090	-	-	-	-	-	-	-	-	-	-	-	-	-
From Line 080 Column 14		Cost of intangible assets with restricted ownership rights										(081)		-
		Cost of intangible assets pledged as collateral										(082)		-
		Cost of internally generated intangible assets										(083)		-
From Line 080 Column 5		Cost of intangible assets acquired by using special purpose financing										(084)		889
From Line 080 Column 15		Accumulated amortization of intangible assets with restricted ownership rights										(085)		-

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

From Line 080 Column 5 Cost of intangible assets acquired by using special purpose financing

From Line 080 Column 15 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 2022

(in Ukrainian Hryvnias and in 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		Depreciation charge for 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
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	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Machinery and equipment	130	14,260	11,287	2,173	-	-	993	993	2,712	-	-	-	15,440	13,005	-	-	-	-
Vehicles	140	26,338	13,296	42,197	-	-	1,919	627	5,068	-	-	-	66,616	17,738	-	-	-	-
Tools, devices, and fixtures (furniture)	150	5,920	3,440	134	-	-	137	126	965	-	-	-	5,917	4,279	-	-	-	-
Livestock	160	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Perennial plants	170	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Other fixed assets	180	140	140	-	-	-	6	6	-	-	-	-	134	134	-	-	-	-
Library stock	190	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Low-value non-current tangible assets	200	5,431	5,431	1,140	-	-	460	460	1,140	-	-	-	6,111	6,111	-	-	-	-
Temporary constructions	210	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Natural resources	220	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Returnable containers	230	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Leased items	240	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Other non-current tangible assets	250	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Total	260	52,089	33,594	45,643	-	-	3,515	2,213	9,885	-	-	-	94,218	41,267	-	-	-	-

INTERNATIONAL CHARITABLE FOUNDATION “ALLIANCE FOR PUBLIC HEALTH”

NOTES TO THE CONSOLIDATED FINANCIAL STATEMENTS

FOR THE YEAR ENDED 31 DECEMBER 2022

(in Ukrainian Hryvnias and in thousands)

II. Property and equipment (Continued)

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	(261)	-
	Cost of property and equipment pledged as collateral	(262)	-
	Net book value of temporarily idle assets (conservation, reconstruction, etc.)	(263)	-
	Historical (revalued) cost of fully depreciated property and equipment	(264)	28,175
	Leased property and equipment of integral property complexes	(2641)	
From Line 260 Column 8	Cost of property and equipment decommissioned for sale	(265)	
	Net book value of property and equipment disposed as a result of extraordinary events	(2651)	
From Line 260 Column 5	Cost of property and equipment acquired by using special purpose financing	(266)	45,643
	Cost of property and equipment received under operating Leases	(267)	-
	Accumulated depreciation of property and equipment with restricted ownership rights	(268)	-
From Line 105 Column 14	Cost of investment property measured at fair value	(269)	-

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	44,503	4,553
Acquisition (construction) of other non-current tangible assets	300	1,140	221
Acquisition (creation) of intangible assets	310	896	3
Acquisition (cultivation) of non-current biological assets	320		
Other	330		
Total	340	46,539	4,777

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	-	-	-

INTERNATIONAL CHARITABLE FOUNDATION “ALLIANCE FOR PUBLIC HEALTH”

NOTES TO THE CONSOLIDATED FINANCIAL STATEMENTS

FOR THE YEAR ENDED 31 DECEMBER 2022

(in Ukrainian Hryvnias and in thousands)

IV. Financial investments (Continued)

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			4,140
Operating leases of assets	440		
Operating foreign exchange difference	450	99,701	16,550
Sale of other current assets	460		
Penalties, fines, forfeits	470	27	10
Maintenance of housing and utility, social and cultural units	480		
Other operating income and expense	490	963,039	939,529
Including:			
Charges to provision for doubtful debt	491	X	-
Non-productive expense and losses	492	X	-
B. Income and expense from investments in:			
Associates	500	-	-
Subsidiaries	510	-	-
Joint ventures	520	-	-
C. Other finance income and expense:			
Dividends	530	-	-
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	-	1,302-

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) -

INTERNATIONAL CHARITABLE FOUNDATION “ALLIANCE FOR PUBLIC HEALTH”

NOTES TO THE CONSOLIDATED FINANCIAL STATEMENTS

FOR THE YEAR ENDED 31 DECEMBER 2022

(in Ukrainian Hryvnias and in thousands)

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	378,499
Other accounts with banks (letters of credit, checks)	660	
Cash in transit	670	
Cash equivalents	680	19
Total	690	378,519

From Line 1090 Column 4 of Balance Sheet (Statement of Financial Position) – Restricted cash

(691) -

INTERNATIONAL CHARITABLE FOUNDATION “ALLIANCE FOR PUBLIC HEALTH”

NOTES TO THE CONSOLIDATED FINANCIAL STATEMENTS

FOR THE YEAR ENDED 31 DECEMBER 2022

(in Ukrainian Hryvnias and in 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	6,178	9,449	-	1,381	4,797	-	9,449
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	6,218	9,449	-	1,421	4,797	-	9,449

INTERNATIONAL CHARITABLE FOUNDATION “ALLIANCE FOR PUBLIC HEALTH”

NOTES TO THE CONSOLIDATED FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2022
(in Ukrainian Hryvnias and in 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	557	-	-
Purchased semi-finished products and component parts	810	-	-	-
Fuel	820	0	-	-
Containers and packaging inventory	830	-	-	-
Construction materials	840	-	-	-
Spare parts	850	1,157	-	-
Agricultural materials	860	-	-	-
Current biological assets	870	-	-	-
Low-value items	880	78,922	-	-
Work in progress	890	0	-	-
Finished goods	900	-	-	-
Merchandise	910	-	-	-
Total	920	80,637	-	-

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 on goods, works, services	940	942	942	-	-
Other current accounts receivable	950	61,594	61,190	404	-

Bad debts written off in the reporting year

(951) -

From Lines 940 and 950 Column 3 Accounts receivable from related parties

(952) -

INTERNATIONAL CHARITABLE FOUNDATION “ALLIANCE FOR PUBLIC HEALTH”

NOTES TO THE CONSOLIDATED FINANCIAL STATEMENTS

FOR THE YEAR ENDED 31 DECEMBER 2022

(in Ukrainian Hryvnias and in thousands)

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 the year end (off-balance sheet account 072)	980	-

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	-

INTERNATIONAL CHARITABLE FOUNDATION “ALLIANCE FOR PUBLIC HEALTH”

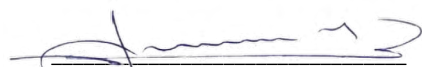
NOTES TO THE CONSOLIDATED FINANCIAL STATEMENTS

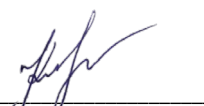
FOR THE YEAR ENDED 31 DECEMBER 2022

(in Ukrainian Hryvnias and in thousands)

XIII. Use of depreciation and amortization charges

Item	Line code	Amount
1	2	3
Charged during the reporting year	1300	11,312
Used during the year – Total	1310	11,281
Including for:		-
Construction	1311	9,885
Acquisition (construction) and improvement of property and equipment	1312	2,459
Including machinery and equipment	1313	896
Acquisition (construction) of intangible assets	1314	-
Repayment of borrowings received for capital investments	1315	500
Acquisition (construction) of other non-current tangible assets	1316	11,312
	1317	-


 A. Klepikov,
 Executive Director


 K. Bubnova,
 Finance Director

INTERNATIONAL CHARITABLE FOUNDATION “ALLIANCE FOR PUBLIC HEALTH”**EXPLANATORY NOTES TO THE CONSOLIDATED FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2022***(in Ukrainian Hryvnias and in thousands, unless otherwise indicated)***1. GENERAL BACKGROUND**

The International Charitable Foundation “Alliance for Public Health” (formerly known as the International Charitable Foundation “International HIV/AIDS Alliance in Ukraine” until November 2015) (hereinafter – Alliance) is one of the leading non-governmental professional organizations making a significant impact on the epidemics of HIV/AIDS, tuberculosis, viral hepatitis, and other socially dangerous diseases in Ukraine. In cooperation with state partners and civil society organizations, it provides financial and technical support to programs, covering over 250,000 representatives of most vulnerable populations.

The Alliance for Public Health (Alliance) started operating at the end of 2000 as an international technical assistance project within the Transatlantic HIV Prevention Initiative supported by the US Agency for International Development and the European Union (2000-2004).

Since its establishment, the Alliance has demonstrated sustainable organizational development. It makes a daily, uninterrupted contribution to combating the epidemic. Over the last decade Alliance’s contribution has been significant in Ukraine.

The focus of Alliance activities in Ukraine is concentrated on HIV prevention both with traditional and innovative harm reduction approaches, support of patients of OST therapy, with TB and Hepatitis as well as human rights protection. The Alliance regularly conducts research and facilitates innovative approaches and best practices in Ukraine and the region.

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 (hereinafter collectively referred to as the “Organization”).

The Alliance 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.

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 (the “Global Fund”) for the Program “Gain momentum in reducing TB/HIV burden in Ukraine” (the “Program”). The implementation period of the agreement for the Grant #UKR-C-AUA-1933 under the Program is from 1 January 2021 to 31 December 2023. Total amount of funding is equal to USD 50,502 thousand for the Program and additionally 11,720 thousand are available for C19RM2021. During the year ended 31 December 2022 the Organization and its Sub-Recipients received funding amounting to USD 14,948 thousand including interest income for realization of the Program.

Other grant is provided by the Global Fund to Fight AIDS, Tuberculosis and Malaria (the “Global Fund”) for the Program “Sustainability of services for key populations in Eastern Europe and Central Asia region”. The agreement for the Grant #QMZ-H-AUA-2788 was signed on 01 January 2022 and had effective date on 31 December 2024. The total amount of funding according to the grant is equal to

INTERNATIONAL CHARITABLE FOUNDATION “ALLIANCE FOR PUBLIC HEALTH”**EXPLANATORY NOTES TO THE CONSOLIDATED FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2022***(in Ukrainian Hryvnias and in thousands, unless otherwise indicated)*

USD 14,087 thousand. During the year ended 31 December 2022 the Organization and its Sub-Recipients received funding amounting to USD 7,802 thousand for realization of the Program.

In order to implement the Programs the Organization uses services of other organizations located in different regions of Ukraine and abroad, 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 under the Programs during the year ended 31 December 2022 was over 113. Sub-Recipients implement program activities at their locations.

On January 27, 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 MAT Program’s period was initially set from February 1, 2016 until January 31, 2021 and subsequently extended until June 29, 2022. Funding in the amount of USD 1,000 thousand is approved for the Year 5 budget period, which is September 30, 2020 through June 29, 2022.

On August 19, 2019 the Organization signed Notice of Award for implementation of the program “Improving HIV Treatment Cascade for Key Populations through Differentiated Case Detection and Linkage to Care and Increased Capacity of the Center for Public Health and Strategic Information in Ukraine under the President’s Emergency Plan for AIDS Relief (PEPFAR)”. The METIDA Program period is set from September 30, 2019 until September 29, 2024. Year 3 of the METIDA Program is set from September 30, 2021 to September 29, 2022 with funding in the amount of USD 5,563 thousand. Funding in the amount of USD 8,024 thousand is approved for the Year 4 budget period, which is September 30, 2022 through September 29, 2023.

During the year ended December 31, 2022 the Organization received financing from CDC in amount of USD 7,892 thousand.

In 2022 the average annual number of employees of the Organization was 46 persons (2021: 49 persons).

The registered office of the Organization is located at: 24 Bulvarno-Kudriavska Str., Building 3, Kyiv, 01601, Ukraine.

2. OPERATING ENVIRONMENT

On 21 February 2022, the Russian Federation recognized the occupied territories in Luhanska and Donetsk regions as independent republics and, on 24 February 2022, the Russian Federation started its military invasion of Ukraine resulting in a full-scale war across the Ukrainian state. The ongoing military attack has led, and continues to lead, to significant damage to infrastructure, dislocation of the population, and disruption to economic activity in Ukraine. All ports in the Black Sea area stopped working, and exports made via seaports were fully suspended. Transportation of goods inbound and outbound is performed by railway and trucks. Airports, many roads, and bridges are closed, have been damaged or destroyed, further crippling transportation and logistics. The situation remains highly fluid, and further developments are subject to extraordinary uncertainty. The economy of the country has experienced serious consequences. At the end of April, Ukraine faced a significant shortage of fuel

INTERNATIONAL CHARITABLE FOUNDATION “ALLIANCE FOR PUBLIC HEALTH”**EXPLANATORY NOTES TO THE CONSOLIDATED FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2022***(in Ukrainian Hryvnias and in thousands, unless otherwise indicated)*

and had to create new logistical supply routes from Europe. The government has introduced a range of emergency measures to stabilize the economy.

On 4 October 2022, president of the Russian Federation signed laws on annexation of part of Luhanska, Donetska, Zaporizhskya and Khersonska regions, that has been previously ratified by the Parliament.

In October and November 2022, there were massive power outages for the population and businesses due to significant damage to power grids as a result of shelling by the Russian Federation. This has also led to problems with water supply and heating. The recovery of economic activity slowed down. Based on the results of the three quarters of 2022, the drop in GDP in Ukraine is estimated at the level of 30%.

Since February 2022 the inflation rate increased in annual terms up to 26.5% as of November 2022, because of the disruption of supply chains and production processes, uneven demand, increased business costs, physical destruction of assets of many companies caused by the Russian Federation attack on Ukraine.

With the start of the invasion, the NBU has introduced some temporary protective measures as restriction of cross-border payments in foreign currency, fixing the official exchange rate for major currencies (on 21 July 2022 the NBU has changed the official exchange rate of the hryvnia against U.S. dollar by 25%, to UAH/USD 36.5686). In October 2022, the NBU prohibited p2p transfers from Ukrainian hryvnia payment cards of Ukrainian banks to cards of foreign banks. In addition, since the start of the war the NBU decided that the discount rate would stay unchanged at 10%, since the forced administrative restrictions were in place. However, in June 2022 it decided to increase the rate up to 25%. The NBU stated it would revert to the traditional format of inflation targeting with a floating exchange rate after the economy and financial system return to their normal operational mode. The Ukrainian government continued to service external debt obligations, and the banking system remains operational.

The Ukrainian government received financing and donations from international organizations, along with individual countries, and charities to support financial stability, social related payments, and military needs. As of October 2022, since the beginning of the full-scale invasion, the international financial aid received amounted to USD 22.6 billion, and the aid declared but not yet provided amounted to USD 8.6 billion.

During 2022 the government introduced a zero quota on exports of gold and silver (except for bank metals), buckwheat, table salt, fuel oil and fuel wood. Exports of chicken meat, cattle, cattle meat, eggs, mineral fertilizers, rye, oats, millet, and sugar are subject to licensing. Exports of gas are prohibited.

On 15 March 2022, the Verkhovna Rada of Ukraine introduced some changes to the tax legislation and adopted the Law of Ukraine No. 2120-IX “On Amendments to the Tax Code of Ukraine and Other Legislative Acts of Ukraine Concerning the Effect of Norms for the Martial Law Period”.

In March 2022, the system operator of the Ukrainian electricity network, together with European operators, completed integration of the Ukrainian and European energy systems.

INTERNATIONAL CHARITABLE FOUNDATION “ALLIANCE FOR PUBLIC HEALTH”**EXPLANATORY NOTES TO THE CONSOLIDATED FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2022***(in Ukrainian Hryvnias and in thousands, unless otherwise indicated)*

On 23 June 2022, the European Union at the Brussels summit approved a decision to grant Ukraine the candidate status to join the European Union. Ukraine will become a participant of some European Union programs and initiatives open to candidates.

On 22 July 2022, in Istanbul, representatives of Ukraine signed an agreement with Turkey and the United Nations on the unblocking of ports and the resumption of grain exports, which are blocked in Black Sea ports due to the war. The Russian Federation also signed a “mirror agreement” with representatives of Turkey and the United Nations. As of the beginning of October, 5 million tons of agricultural produce were shipped from the seaports of Odesa region.

On 27 September 2022, the Cabinet of Ministers approved resolutions that will allow Ukraine to join the Common Transit Convention and Convention on the Simplification of Formalities in Trade in Goods (the so-called “customs free regime”) from 1 October 2022. The resolutions open access to an unlimited range of Ukrainian businesses to authorizations and simplifications of joint transit procedures similar to those available to economic operators in the 35 member states of the Convention.

The war between Ukraine and the Russian Federation is ongoing, resulting in a significant destruction of property and assets in Ukraine and a significant displacement of people in Ukraine. The consequences of the war are changing day to day and the long-term implications are unclear. Further impact on the Ukrainian economy depends upon the way the Russian Federation military invasion in Ukraine is resolved and upon the success of the Ukrainian government in realization of new reforms, recovery strategy after the invasion is stopped and the transformation of the state to acquire European Union membership, cooperation with the international funds.

3. GOING CONCERN

These consolidated financial statements have been prepared on the assumption that the Organization will be able to continue as a going concern and that it will continue in operation for the foreseeable future.

However, as noted in Note 2 and in Note 15, on 24 February 2022, Russian forces began a military invasion of Ukraine, which led to a full-scale war throughout Ukraine. The operating environment remains risky and with a high level of uncertainty. Therefore, the going concern assumption is to be carefully assessed by management to ensure the Organization has sufficient funding for its activities.

Management believes that preparation of these consolidated financial statements on a going concern basis is appropriate due to the following factors and actions taken:

- There are no damages caused by the war and there are no assets in occupied territories.
- As of 31 December 2022, the Organization has signed grant agreements with donors for funding of its activities both in 2022 and further years – total amount of contributions receivable from donors equal to UAH 1,524,693 thousands as of 31 December 2022. Subsequent to 31 December 2022, the Organization signed also new grant agreements with the existing and new donors for funding new

INTERNATIONAL CHARITABLE FOUNDATION “ALLIANCE FOR PUBLIC HEALTH”**EXPLANATORY NOTES TO THE CONSOLIDATED FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2022***(in Ukrainian Hryvnias and in thousands, unless otherwise indicated)*

program activities. The Organization receives contributions from donors in accordance with grant agreements budgets and needs and is following grant agreements terms.

- As of 31 December 2022 and subsequently, the Organization has sufficient liquidity - all Organization's current liabilities are fully covered by highly liquid assets such as cash and cash equivalents.
- The Organization is operationally digitalized due to COVID-19, thus has managed the difficulties of relocating staff and remote work of employees. System of remote and extensive management of the Organization and the projects built during the COVID-19 lockdowns, made it possible to work without significant operational break ups.
- The Organization was able to master new types of activities (assistance in migration, shelters, humanitarian assistance to displaced persons and people in the territories close to hostilities, provision of basic needs (medicine, food, means for heating and lighting, etc.), acquire additional financing for needs caused by the war and carry out additional purchases of vital goods, provide humanitarian corridors across the border for cargo.
- During the period after the reporting date and before the authorization of these consolidated financial statements, the Organization continues its operations and manages to meet main goals of the Organization's activities in 2023.

Considering the reasons above, management believes that preparation of these consolidated financial statements on a going concern basis is appropriate, and the Organization has adequate resources to realize its assets, discharge its liabilities and continue in operational existence for the foreseeable future.

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

The accompanying consolidated financial statements of the Organization have been prepared in accordance with the Law of Ukraine “On Accounting and Financial Reporting in Ukraine” (the “Law on accounting and financial reporting”) and Ukrainian Accounting Standards (“UAS”), 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 2022 and cover the period from 1 January 2022 to 31 December 2022 and the period from 1 January 2021 to 31 December 2021 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.

INTERNATIONAL CHARITABLE FOUNDATION “ALLIANCE FOR PUBLIC HEALTH”**EXPLANATORY NOTES TO THE CONSOLIDATED FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2022***(in Ukrainian Hryvnias and in thousands, unless otherwise indicated)*

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, LLC “Alliance Consultancy” (the “subsidiary”). The financial statements of EKHN have not been consolidated, as they are not material for the consolidated financial statements of the Organization. In October 2022, the EKHN was liquidated.

Control is achieved when the Parent has the power to govern the financial and operating policies of an entity, either directly or indirectly, 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 in 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, which were 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.

INTERNATIONAL CHARITABLE FOUNDATION “ALLIANCE FOR PUBLIC HEALTH”**EXPLANATORY NOTES TO THE CONSOLIDATED FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2022***(in Ukrainian Hryvnias and in thousands, unless otherwise indicated)*

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

Property and equipment

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:

	Years
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 funding.

INTERNATIONAL CHARITABLE FOUNDATION “ALLIANCE FOR PUBLIC HEALTH”**EXPLANATORY NOTES TO THE CONSOLIDATED FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2022***(in Ukrainian Hryvnias and in thousands, unless otherwise indicated)*

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

An 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.

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 activities under the Programs 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 activities under the Programs in accordance with the 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 activities under the Programs were carried in accordance with the terms of the Grant Agreement. The Organization also creates the provision for doubtful debts the recovery on which is considered as doubtful.

INTERNATIONAL CHARITABLE FOUNDATION “ALLIANCE FOR PUBLIC HEALTH”**EXPLANATORY NOTES TO THE CONSOLIDATED FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2022***(in Ukrainian Hryvnias and in thousands, unless otherwise indicated)*

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.

Special purpose funding

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 Programs with simultaneous recognition of other operating income of the period. 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 and financial result (profit or loss) of the Alliance for the reporting year is recorded on the Organization's balance sheet in section “Non-current Liabilities and Provisions”.

Current accounts payable on goods, works, services

Current accounts payable on 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 in the consolidated statement of financial position 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.

INTERNATIONAL CHARITABLE FOUNDATION “ALLIANCE FOR PUBLIC HEALTH”**EXPLANATORY NOTES TO THE CONSOLIDATED FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2022***(in Ukrainian Hryvnias and in thousands, unless otherwise indicated)*

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.

Revenue recognition

Revenue of the Organization is attributable to its subsidiary, LLC “Alliance Consultancy”, 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 purchasing medicines, other health care equipment, information and educational materials, as well as the costs of services rendered by sub-contractors, office premises leases, payroll expenses, and other services. Costs of services consist of fees for sub-contractors who participated in conduct activities under the Programs.

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

INTERNATIONAL CHARITABLE FOUNDATION “ALLIANCE FOR PUBLIC HEALTH”**EXPLANATORY NOTES TO THE CONSOLIDATED FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2022***(in Ukrainian Hryvnias and in thousands, unless otherwise indicated)*

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 reporting date and recognized as “Accounts Receivable on Advances Made”.

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:

	<u>As of 31 December 2022</u>	<u>Average exchange rate for 2022</u>	<u>As of 31 December 2021</u>	<u>Average exchange rate for 2021</u>
UAH/USD	36.5686	32.3423	27.2782	27.2862
UAH/EUR	38.9510	33.9820	30.9226	32.3009
UAH/GBP	44.0048	39.8567	36.8392	37.5474

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.

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

ICF “Alliance for Public Health” 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, LLC “Alliance Consultancy”. 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 2022 and 2021 and, thus, they were not recognized in the consolidated financial statements.

INTERNATIONAL CHARITABLE FOUNDATION “ALLIANCE FOR PUBLIC HEALTH”

EXPLANATORY NOTES TO THE CONSOLIDATED FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2022*(in Ukrainian Hryvnias and in thousands, unless otherwise indicated)***Use of estimates and assumptions**

The preparation of the consolidated financial statements under UAS requires that management of the Organization make 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 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.

5. CASH AND CASH EQUIVALENTS

As of 31 December 2022 and 2021, cash and cash equivalents were represented by the following balances:

	31 December 2022	31 December 2021
USD-denominated cash	275 157	120,051
UAH-denominated cash	35 770	12,378
GBP-denominated cash	56 416	2,763
EUR-denominated cash	11 176	840
Total	378, 519	136,032

As of 31 December 2022, almost all cash and cash equivalent balances of the Organization (95% of the aggregate amount) were placed on accounts with one of the Ukrainian banks owned by a large European financial group that had a credit risk rating assigned at the level of “A” by the international rating agency of Fitch.

6. OTHER CURRENT ACCOUNTS RECEIVABLE

As of 31 December 2022 and 2021, other current accounts receivable were represented by balances of advances issued by the Organization to sub-recipients to implement the activities under the Programs funded by the Global Fund and other donors in the amount of UAH 61,594 thousand and UAH 30,926 thousand, respectively, net of provision for doubtful debts.

INTERNATIONAL CHARITABLE FOUNDATION “ALLIANCE FOR PUBLIC HEALTH”

EXPLANATORY NOTES TO THE CONSOLIDATED FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2022*(in Ukrainian Hryvnias and in thousands, unless otherwise indicated)*

Movements in provision for doubtful debts for the years ended 31 December 2022 and 2021 were as follows:

	2022	2021
Balance at the beginning of the year	40	40
Amounts written off during the year	40	-
Balance at the end of the year		40

7. CAPITAL INVESTMENTS IN PROGRESS

As of 31 December 2022 and 2021, capital investments in progress included predominantly purchases and modernization of property and equipment with historical cost of UAH 4,777 thousand and UAH 19,031 thousand, respectively.

8. OTHER OPERATING INCOME

Other operating income for the years ended 31 December 2022 and 2021 was as follows:

	2022	2021
Income on current assets received free of charge (at the cost of special purpose funds)	961 454	938,120
Realized foreign exchange gain	99 701	26,314
Other	1 612	61
Total	1 062, 767	964,495

9. ADMINISTRATIVE EXPENSES

Administrative expenses for the years ended 31 December 2022 and 2021 were as follows:

	2022	2021
Staff costs	78,784	58,579
Cost of services	9,393	14,283
Depreciation and amortization	11,312	8,941
Other	3,115	2,675
Total	102,604	84,478

INTERNATIONAL CHARITABLE FOUNDATION “ALLIANCE FOR PUBLIC HEALTH”**EXPLANATORY NOTES TO THE CONSOLIDATED FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2022***(in Ukrainian Hryvnias and in thousands, unless otherwise indicated)***10. OTHER OPERATING EXPENSE**

Other operating expense for the years ended 31 December 2022 and 2021 was as follows:

	2022	2021
Expenses of sub-recipients	428,699	407,529
Purchase of inventories	165,309	252,941
Costs of services	217,487	154,804
Labour costs	46,419	37,080
Losses on operating translation differences	99,782	25,997
Other	2,532	1,535
Total	960,228	879,886

11. RELATED PARTY TRANSACTIONS

Major part of related party transactions during the years ended 31 December 2022 and 2021 were current remuneration payments to the Organization’s key management personnel, namely: representatives of General Meeting of the Organization, Directorate of the Alliance and management of the Alliance Consultancy, their close family members that were the Organization’s employees or provided services to the Organization. For the year ended 31 December 2022, total remuneration to the Organization’s key management personnel represented by 5 directorate personnel of the Alliance and Director of the Alliance Consultancy was included in administrative expenses and amounted to UAH 21,619 thousand (2021: UAH 15,545 thousand and 6 employees, respectively). For the year ended 31 December 2022, total remuneration to the representatives of General Meeting of the Organization, represented by 1 employee of the Alliance, amounted to UAH 4,823 thousand (2021: UAH 3,357 thousand and 1 employee).

For the year ended 31 December 2022, total amount of the services purchased by the Organization from key management personnel and their close family members was included into cost of sales on products (goods, works, services) and recorded as other operating expenses and amounted to UAH 1,739 thousand (2021: UAH 1,342 thousand).

12. 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 taxpayers. 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 considers implementing certain changes in the tax system of Ukraine.

INTERNATIONAL CHARITABLE FOUNDATION “ALLIANCE FOR PUBLIC HEALTH”**EXPLANATORY NOTES TO THE CONSOLIDATED FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2022***(in Ukrainian Hryvnias and in thousands, unless otherwise indicated)*

Management believes that the Organization has complied 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.

Contractual commitments

As of 31 December 2022 and 2021, the Organization had the following commitments under non-cancellable agreements for acquisition of:

	31 December 2022	31 December 2021
Medical, pharmaceutical products and services	11,977	10,504
Rent	454	531
Total	12,431	11,035

13. RISK MANAGEMENT POLICIES

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

	31 December 2022	31 December 2021
Financial assets		
Cash and cash equivalents	378,519	136,032
Accounts receivable on products, goods, works, services	942	65
Total financial assets	379,461	136,097
Financial liabilities		
Provisions for unused vacations	9,449	6,178
Current accounts payable on goods, works, services	9,589	7,640
Current liabilities on staff cost settlements	116	13
Total financial liabilities	19,154	13,831

The main risks arising in the course of use of the Organization’s financial instruments are those related to foreign currency risk, liquidity risk, and concentration risks.

INTERNATIONAL CHARITABLE FOUNDATION “ALLIANCE FOR PUBLIC HEALTH”

EXPLANATORY NOTES TO THE CONSOLIDATED FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2022*(in Ukrainian Hryvnias and in thousands, unless otherwise indicated)***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. 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 2022 and 2021 were as follows:

	31 December 2022			31 December 2021		
	USD	EUR	GBP	USD	EUR	GBP
Assets						
Cash and cash equivalents	275,157	11,176	56,416	120,051	840	2,763
Accounts receivable on products, goods, works, services		-	-	65	-	-
Total assets	275,157	11,176	56,416	120,116	840	2,763
Liabilities						
Current accounts payable on goods, works, services	88		-	627	128	-
Total liabilities	88		-	627	128	-
Net currency position	275,069	11,176	56,416	119,489	712	2,763

The following table details the Organization’s sensitivity to weakening of UAH against USD, EUR, and GBP by 30% for the year ended 31 December 2022 as well as for the year ended 31 December 2021. This sensitivity level presents management’s estimates regarding reasonably 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 2022			31 December 2021		
	USD	EUR	GBP	USD	EUR	GBP
Impact on profit/(loss)	82,821	3,353	16,925	35,847	214	829

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.

INTERNATIONAL CHARITABLE FOUNDATION “ALLIANCE FOR PUBLIC HEALTH”**EXPLANATORY NOTES TO THE CONSOLIDATED FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2022***(in Ukrainian Hryvnias and in thousands, unless otherwise indicated)*

As of 31 December 2022 and 2021, 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 2022, funding provided by the Global Fund amounted to 54%, by the Center of Disease Control amounted to 24% and by the Christian Aid amounted to 13% (2021: 60%, 30% and 0% 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.

14. 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 2022 and 2021, 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.

15. EVENTS AFTER THE REPORTING PERIOD

As at the date of issuing these consolidated financial statements, the Organization continues running its operations without any restrictions. Management of the Organization maintains control over all its operations. Impact of the war on the Organization that is currently known and measures taken by the management in response are disclosed in Note 3.

16. APPROVAL OF THE CONSOLIDATED FINANCIAL STATEMENTS

These consolidated financial statements were approved by management and authorized for issue on 30th of November 2023.

NATIONAL HIV/AIDS AND TB HOTLINE:

0 800 500 451

NATIONAL DRUG ADDICTION
AND OST HOTLINE:

0 800 507 727

NATIONAL HEPATITIS HELPLINE:

0 800 503 310

2022 ANNUAL REPORT



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