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RESPOND Project

(Improving HIV/AIDS Services among Most-at-Risk Populations in Ukraine)

Annual Report

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List of Acronyms

Alliance	International HIV/AIDS Alliance
ART	Anti-retroviral therapy
CBO	Community-based organization
CDC	Centers for Disease Control and Prevention
CME	Continuing medical education
CoP	Chief of Party
COP	Communities of Practice
CSO	Civil Society Organization
CSW	Commercial Sex Worker
DCoP	Deputy Chief of Party
DDUDM	Data demand and use for decision-making
DQA	Data quality assessment
EBI	Effective Behavioral Interventions
FY	Fiscal year
GF	Global Fund
HCT	HIV Counseling and Testing
IR	Intermediate Result
IS	Implementation Science
ISP	Institutional Strengthening Plan
ITOCA	Integrated Technical and Organizational Capacity Assessment
M&E	Monitoring and Evaluation
MARA	Most at-risk adolescents
MAT	Medication-Assisted Treatment
MSM	Men who have Sex with Men
Network	All Ukrainian Network of PLWH
NSRI	National Strategic Information Resource
NMAPE	National Medical Academy of Post-graduate Education
ONA	Organizational Network Analysis
OPI	Organizational Performance Index
PIM	Psychosocial Intervention Model
PLHIV	People Living with HIV
PR	Principle Recipient
PWID	People Who Inject Drugs
QI	Quality Improvement
Q1	Quarter One
Q2	Quarter Two
Q3	Quarter Three
Q4	Quarter Four
RDQA	Regular Data Quality Assessment
S&D	Stigma and discrimination
SI	Strategic Information
STTA	Short Term Technical Assistance
TA	Technical Assistance
TB	Tuberculosis
ToT	Training of Trainers
TWG	Technical Working Group
UCDC	Ukrainian Center for Control of HIV and other Socially Dangerous Diseases
UN	United Nations
UNICEF	United Nations Children's Fund
USAID	United States Agency for International Development

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Project Highlights/Executive Summary

In FY14, RESPOND successfully completed the second year of the project, with 64 of 70 activities (91%) fully completed in accordance with the approved work plan, the rest of planned activities are ongoing; 7 of the 10 milestones fully reached, and the remaining 3 reached partially.

RESPOND's achievements over the last year include:

- ✓ **Successful collaboration with two Global Fund PRs** (UCDC and Network) as demonstrated through signed **Collaboration frameworks**; these documents define key areas for technical assistance from RESPOND, such as strategic information, QI, EBIs, and capacity development;
- ✓ **A break-through in the use of strategic information** through the development and publication of user-friendly on-line data visualization instruments (Regional Profiles and service maps);
- ✓ **Strengthened regional capacity in utilization of data for decision-making** through regional skills building workshops and small grants to support regional concepts developed using DDUDM methodology;
- ✓ **New evidence on the effectiveness of HIV response in Ukraine** provided through the Intervention Inventory and National IS plan;
- ✓ **Effective models for HIV prevention in key populations** adapted through successful piloting and research of EBIs for MARA, prisoners and MSM and the launch of a **new EBI pilot and IS study** for PWID;
- ✓ **QI methodology** disseminated by scaling-up successful QI demonstration projects on HCT throughout Lviv region and starting new projects in Zaporizhzhya and Poltava regions; QI methodology was adopted in Odesa region through an executive order of the regional Penitentiary Department; and
- ✓ **Organizational and technical capacities** of partner NGOs strengthened as demonstrated by the repeated OPI assessment.

In the past year, RESPOND and its partners faced a number of challenges in implementing planned activities but have worked collaboratively to resolve them:

- ✓ Political unrest in Ukraine put RESPOND activities on hold in Q1 and beginning of Q2 of FY14 resulting in some activities being delayed. RESPOND has caught up on the majority of planned activities. Those activities that had not been fully completed were carried over and incorporated into the FY15 work plan (four DDUDM trainings and ISP development for new EBI partners).
- ✓ Securing national partners' buy-in to the EBI and IS study results without demonstrated cost-effectiveness of the models has been difficult, especially given the current economic and financial constraints that Ukraine is facing. To address this issue RESPOND has engaged in a dialogue with USAID HIV Reform In Action project implemented by Deloitte to add the costing analysis of the piloted EBIs. The discussion is ongoing.
- ✓ Skepticism of GF PRs towards EBIs was addressed by inviting PRs' representatives to attend EBI Communities of Practice, join RESPOND on the mentoring visits, and

participate in EBI trainings. As a result, PLHIV Network has approached RESPOND with a request for technical assistance in structuring, assessing and packaging their interventions as EBIs. The Alliance currently sees no need in direct TA from RESPOND, but it has provided very positive feedback on the EBIs piloted by RESPOND. It is expected that some of the EBIs will be funded by the Alliance under GF Phase II of Round 9&10.

- ✓ Ukrainian NGOs lack experience with strictly structured interventions and implementation science research on top. Peer-based NGOs lack social work and mental health professionals required to implement EBIs with necessary quality and fidelity. There is a lack of professional supervision system, either internal or external, to ensure the quality of services and prevent staff burn-out. Weak individual counseling and group facilitation skills of local HIV service providers impeded the implementation of EBIs in the beginning because all interventions are structured as individual or group sessions. RESPOND addressed these challenge by establishing COPs and providing a series of skills trainings for EBI sub-grantees.
- ✓ Ensuring the quality and timeline for IS studies remain an issue because of the insufficient technical capacity of Ukrainian research institution. RESPOND has been and will continue providing ongoing technical support and guidance with the involvement of FHI 360 and Pact STTA.
- ✓ The challenge in implementing QI projects has been to bring their successful results from the institutional level up to the regional and national level, and make them sustainable. RESPOND will address this challenge in the coming months by documenting the QI methodology and developing regulatory instruments together with UCDC and regional healthcare authorities.
- ✓ Results of the Integrated Technical & Organizational Capacity Assessment showed that most local HIV service NGOs function as “projects” rather than “organizations”. They serve the clients defined by the donor; they provide services that donor selected to fund; and they have strong reporting systems. At the same time, local NGOs do not have a mission statement, a strategic plan, or internal management and M&E systems. The culture of capacity development introduced to the partners by RESPOND is grounded on the principle that organizations should identify their own capacity development needs. This concept was very new and required RESPOND to invest a significant effort with each local partner organization facilitating discussions, helping to build consensus, and moderating the process of identifying, prioritizing and addressing the capacity development needs.

Crosscutting Sub-Objective: Engage GOU, GF, GF PRs, Civil Society, AIDS Councils and Other Stakeholders in Order to Facilitate Buy In/Partnership and Coordination

Given RESPOND's mission of working with Global Fund PRs, partner and stakeholder engagement is critical for programmatic success. In FY14, RESPOND undertook the following efforts to involve program stakeholders into activities, inform them on the project's progress, coordinate effectively and jointly contribute to the national and regional response to the HIV epidemic:

- ✓ Convened **three partner coordination meetings** in January, July and September 2014. Participants included representatives of PRs, State HIV Service, UN agencies, USAID implementing partners working in the HIV/TB sector, other key actors such as Clinton Foundation, HealthRight International, AIDS Foundation East-West. *One of the coordination meetings was held in Q4.*
- ✓ Organized a **partner conference *From Local Solutions to Global Change*** in May 2014, which brought together about 130 national and local partners from eight regions of Ukraine.
- ✓ Facilitated **22 individual meetings** with Alliance, PLHIV Network and UCDC; *seven meetings were organized in Q4.*

- ✓ Organized and/or participated in **22 national-level technical working group meetings**, including TWGs on M&E, Implementation Science, MAT, HIV Prevention Strategy, Ukraine's GFATM proposal, and others. *Two TWG meetings took place in Q4.*

These meetings resulted in **coordination of training and research activities** with other partners and HIV/AIDS projects, including UCDC, I-TECH's ClASS, and METIDA; development of **collaboration frameworks** with PLHIV Network and UCDC (see Annexes 1 and 2); and technical contribution by RESPOND into the **IS, MAT and HIV Prevention Strategy TWGs**. In Q4, the activity of TWGs decreased given the dissolution of the State Service on HIV.

In FY15, RESPOND will continue coordinating with partners, manage administrative support, and provide technical input to the MAT, HCT and HIV Prevention National TWGs. The format of these TWGs may change once the State Service is replaced with another coordinating body.

Objective 1. Increase the Quality of HIV/AIDS Services Targeted to Key Populations and Their Sexual Partners

Intermediate Result 1.1: Strengthen the Utilization of Strategic Information for Decision Making

Conduct Formative Research

To guide RESPOND programming, baseline data related to gaps in the HIV response in Ukraine, risk behaviors of key populations, access to services and client satisfaction were collected in FY13 through a **secondary data review** by RESPOND and a **survey of ten partner NGOs.** The survey was conducted by the Kyiv International Institute of Sociology (KIIS). In Q1 of FY14, KIIS provided a report on the baseline partner survey. The survey highlighted key differences between NGOs in their service to key populations. For example, most at-risk adolescents have the least access to HIV voluntary counseling and testing across all regions and organizations, compared to other key populations. Although the rates of HIV testing are generally high at around 75%, some NGOs have challenges motivating their clients and linking them to HCT services. These include PWIDs at New Century, CSWs at Unitus, MSM and prisoners at PLHA Network in Krivy Rih. Significantly more New Century's PWID clients have access to MAT, compared to all other NGOs. CSWs and MSM are statistically more likely to use condoms, compared to PWIDs and prisoners, across all NGOs. Among PLHIV, fewer Youth Development Center's clients had an overall positive assessment of their quality of life, compared to clients of other organizations. Survey results were discussed with local partners through regional events conducted in FY14.

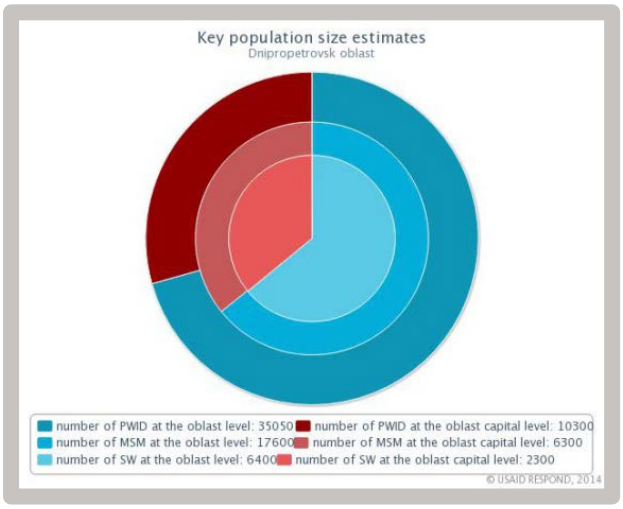
These formative studies serve as a resource for programming both within and outside of RESPOND. Activities addressing specific issues identified in the secondary data review and baseline survey are described throughout this report, such as developing and expanding interventions for key populations based on evidence of need and demonstrated effectiveness (via

intervention inventory, EBI pilots and IS plan); scale-up of MAT services and the continued review of the evidence for effective delivery of MAT services in the Ukrainian context (via MAT EBI pilot); improved quality of and demand creation for HCT (via QI and EBIs); expanding services tailored to the needs of younger key populations (via Street Smart and other EBIs); facilitating greater government involvement and coordination with civil society organizations for key populations particularly as it relates to the continuum of care (via ONA, QI, DDUDM, etc.); and addressing gender issues and stigma and discrimination within all programs and services (via gender assessment with grantees, EBI adaptation, QI and IS).

RESPOND and its partners will continue consulting with results of the formative research throughout the project to ensure the findings are incorporated into RESPOND activities.

Milestone reached: By the end of FY14, RESPOND addressed the specific issues identified in the secondary data review and the baseline survey. (The specific activities have been incorporated and described in more detail throughout the report.)

Visualize Strategic Information (Regional Profiles, Service Mapping)



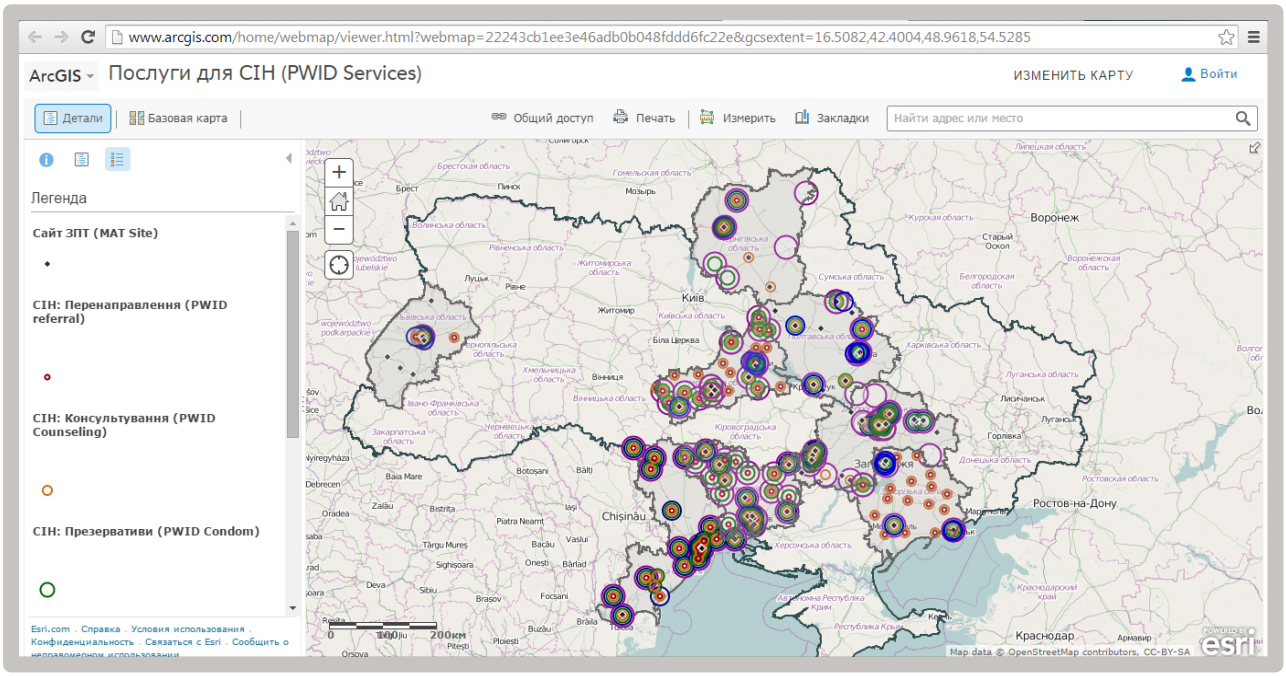
To support data-driven decision making, key indicators related to Ukraine's response to the epidemic and services available for key populations in eight project regions were visualized in FY14. **On-line Regional Profiles** presenting key indicators on the HIV epidemic and response in eight regions in the form of an interactive user-friendly dashboard were published on the RESPOND website. A set of ***eleven interactive on-line maps*** of services available to key populations in eight project regions were also published and promoted through follow-up DDUDM regional meetings. Data collection for maps on Zaporizhzhya, Poltava and Cherkasy regions was completed in Q4 of FY14. **Service mapping reports** covering eight regions were developed and placed on the RESPOND website (see Annex 3 for the latest report on Cherkasy, Poltava and Zaporizhzhya).

Regional Profiles and service maps are recognized by partners at the local and national levels as useful instruments for decision making. According to local partners, they use these data visualization products for presentations at stakeholders meeting in the regions, national coordination council meetings and during triangulation exercises. For instance, the Care Cascade for PLHIV from Chernihiv Regional Profile was used for a data triangulation exercise by the METIDA project. In FY14, **202 visitors viewed the Regional Profiles 711 times**; 62% are returning visitors (data from June 10 to September 30).

In FY15, at the request of UCDC and other partners, RESPOND will build on the success of Regional Profiles and interactive service maps:

- ✓ Work with UCDC to create Regional Profiles for the remaining regions of Ukraine;

- ✓ Work with other USAID implementing partners to add new indicators to Regional Profiles, including district-level data, indicators on TB (Chemonics and MSH), and human resources (Deloitte's HIV Reform in Action project);
- ✓ Create a new data visualization tool on HIV donors and implementing partners in Ukraine;
- ✓ Streamline access to all strategic information and data visualization tools through the development of on-line National Strategic Information Resource;
- ✓ Train regional M&E Center staff on the use and development of interactive on-line maps;
- ✓ Update existing service maps with new data.



<u>Milestone reached:</u> By the end of FY14, RESPOND created multiple innovative user friendly data visualization tools (on-line Regional Profiles, interactive service maps) to facilitate the use of strategic information. The tools are available to partners in a web format.

Cultivate DDUDM and Develop SI Guidelines

To promote evidence-based HIV programming and decision making, RESPOND organized **two rounds of regional DDUDM events** for the following purposes: (1) Introduce regional stakeholders from HIV/AIDS Coordination Councils to the principles of data-driven and evidence-based decision making; and (2) Introduce them to the electronic strategic information tools developed by RESPOND. In addition, a Guide on the use of strategic information, targeted to staff at regional M&E Centers, was developed to support the incorporation of the DDUDM approach in all regions of Ukraine.

In FY14, two-day DDUDM trainings focused on skills building in the use of strategic information were conducted in seven regions (Odesa, Dnipropetrovsk, Lviv, Zaporizhzhya, Cherkasy, Poltava, and Chernihiv). They were followed by one-day DDUDM training reinforcing these skills in four regions (Odesa, Mykolaiv, Chernihiv, Dnipropetrovsk). *Two of these follow-up trainings* (in Chernihiv and Dnipropetrovsk) *were conducted in Q4*. Four follow-up DDUDM events were carried over to Q1 of FY15.

Through these trainings, participants practiced the **use of data visualization tools** to analyze the HIV epidemic, response and gaps at the region level. Participants were asked to provide recommendations grounded in the data reviewed. For example, the biggest gap demonstrated by care and treatment cascades for PLHIV in most regions was low rates of registration of HIV-positive PWID with AIDS Centers. Participants concluded that the reason for this gap is an ineffective HCT strategy. In Dnipropetrovsk and Chernihiv where registration covered virtually all estimated numbers of HIV-positive PWID, participants concluded that the estimates are too low and should be revised. A total of **272 person-trainings (33% men) were held on DDUDM** in eight regions. Participants' knowledge level on DDUDM increased from 27% to 52% of correct responses on the pre- and post-training surveys. While participants have found the trainings to be useful, poor computer skills presented a significant challenge to some participants during practical exercises. In their DDUDM exercises, regional partners required lower-level HIV data, i.e. on the city and district levels, to plan their evidence-based HIV response. RESPOND will take this need into account when further developing Regional Profiles.

To promote the use of DDUDM skills, RESPOND funded **nine evidence-based proposals** with **small grants.** Regional partners were invited to submit Concept Papers requesting funding to fill a particular gap in the regional HIV response. All Concept Papers were required to use DDUDM methodology to justify the request. In addition, the Concept Papers had to be endorsed by the Regional HIV Council. As a result, RESPOND supported regional applications to provide HIV trainings to PHC providers (Mykolayiv, Chernihiv); improve local HIV/AIDS coordination council functions (Poltava, Zaporizhzhya), improve access to HIV information (Cherkassy, Dnipropetrovsk), and generate additional data through research (Odessa, Dnipropetrovsk). One study on barriers to ART for MAT clients in Odesa identified a lack of psychosocial support to MAT clients as the main barrier to ART (see Annex 4 for study report). Another study focused on barriers to healthcare and psychosocial services for CSWs and MSM in Dnipropetrovsk. The barriers identified include lack of HIV knowledge in key populations, high levels of stigma and discrimination in healthcare providers, and limited psychosocial services available to CSWs and MSM. As a result, regional Coordination Council adopted an action plan to alleviate these barriers. Study results were used by METIDA in its triangulation exercise in Dnipropetrovsk region (see Annex 5 for study report).

To further engrain the DDUDM approach, RESPOND and UCDC will **publish the DDUDM Guide** in Q1 of FY15. Based on the Guide, RESPOND will conduct **training of trainers** for regional M&E center staff. In addition, RESPOND will also conduct four cross-regional DDUDM trainings tailoring them to the needs of local partners.

Milestone reached: By the end of FY14, 272 person-trainings were conducted for health policy and decision makers, monitoring and evaluation staff, health finance and economics specialists as well as program implementers at the regional level. Stakeholders increased their knowledge and skills in using strategic information to plan, design, budget for, and implement programs, services and studies targeting key populations.

Generate Evidence on Interventions Effectiveness

To assess the evidence on the effectiveness of HIV prevention interventions in Ukraine, the IS Technical Working Group led and supported by RESPOND compiled an **inventory of 26 interventions** and rated them based on their scientific evidence (available at http://respond.org.ua/ukr/interventions/list). Overall, more than **60%** of expected intervention outcomes were **not supported** by evidence (see Annex 6). To build the evidence base and improve effectiveness of HIV prevention interventions in Ukraine, the IS TWG proposed a **National IS plan** (available at http://respond.org.ua/ukr/interventions/research-plan). Results of inventorying the interventions and the National IS plan were presented at the **National M&E Conference**, co-sponsored by RESPOND, in Donetsk on November 20-22, 2013, and to the **National M&E TWG** at the State HIV Service. Ensuring buy-in of national stakeholders into these results and the National IS plan has proven to be challenging. Given the current circumstances in the country, availability of basic HIV services to key populations is seen as a priority, not their quality or effectiveness. Due to constrained financial resources, National M&E TWG at State HIV Service put the National IS Plan approval and implementation on hold, and this item was removed from the RESPOND agenda.

In FY15, the Intervention Inventory will be updated with EBIs adapted and piloted by RESPOND (Street Start, Project Smart, Mpowerment, Seven Steps, and interventions for PLHIV), and evidence from implementation studies. The inventory will link to the Ukrainian Compendium of EBIs containing detailed implementation methodology of RESPOND-piloted EBIs. The Intervention Inventory and the Ukrainian Compendium of EBIs will be part of the National Strategic Information Resource on the HIV epidemic in Ukraine.

Milestone reached: RESPOND completed the intervention inventory, which includes descriptions of promising interventions in Ukraine and reviewed the existing evidence that exists for each intervention. RESPOND facilitated the drafting of a National Implementation Science Plan in collaboration with key partners (in particular the IS TWG), that identifies IS priorities for HIV and AIDS in Ukraine.

Intermediate Result 1.2: Provide EBIs as Model Best Practices for HIV/AIDS Service Delivery

Adapt and Pilot International EBIs

To further the evidence base for HIV prevention programs for key population in Ukraine, in FY14, RESPOND continued to **pilot three EBIs** (Street Smart, Project Start, Mpowerment); **translated, adapted and launched Seven Steps** (an intervention for PWID to enroll them in healthcare services including MAT); and, in partnership with the Network, **selected three promising local interventions** to be structured and packaged with formal guidelines.

To support the EBI pilots, during FY14, RESPOND held **five trainings** for implementing organizations *(one training in Q4)*, **nine meetings of Communities of Practice** (*three meetings in Q4*) and **68 mentoring visits** (*19 visits in Q4*). Through EBI implementation and associated trainings and technical assistance visits, grantees are able to meet service delivery standards and provide quality services for key populations. The knowledge and skills of EBI grantees staff to deliver these interventions have improved. RESPOND also organized a week-long

study tour for 14 national and regional partners to learn the Croatian model of MAT in PHC (*in Q4)*. During the study tour, partners learned first-hand how MAT successfully provided within PHC settings resulted in strikingly low (0.5%) prevalence of HIV in PWID in Croatia.

In FY15, RESPOND will continue to provide TA to EBI grantees through mentoring visits and on-line counseling, trainings and Communities of Practice meetings. To ensure sustained use of the EBIs, a roadmap will be developed collaboratively with the partners to support EBI handover to the public Centers for Social Services (Street Smart), and to the State Penitentiary Service (Project Start). CBOs delivering services to MSM (Mpowerment) will be applying to continue service delivery under the GF Grant.

Package Local EBIs

In partnership with the Network, RESPOND identified **three promising local interventions for PLHIV** for packaging and evaluation of effectiveness:

- ✓ **Case management for PLHIV** to improve clinical follow-up and adherence to ART;
- ✓ **Case management for HIV-positive PWID** for secondary HIV prevention;
- ✓ **Case management for PLHIV with TB** to improve clinical follow-up and adherence to TB and ARV treatment.

An outline for each intervention package was developed. In Q1 of FY15, these three interventions will be documented and packaged to include the implementation manual, case manager's guide,

monitoring and evaluation toolkit, and team supervision/management tips. In Q2 of FY15, RESPOND and the Network will join efforts to fund and provide technical assistance to the Network partners piloting these interventions. RESPOND will also launch an IS study on these interventions.

Provide IS Evidence on EBIs and Develop Compendium of Interventions

In FY14, RESPOND continued to support implementation science research for the following purposes: (1) Generate local evidence for EBIs piloted by RESPOND in Ukraine; (2) Advocate for dissemination of EBIs throughout Ukraine and their support by other donors should IS results be positive; (3) Advocate for IS research on other interventions implemented in Ukraine.

Four IS studies have been implemented:

- ✓ **Street Smart** where 99.5% of study participants have been recruited and 81.2% followed up at the four month mark (on track);
- ✓ **Project Start** where 88.0% of study participants have been recruited, and only 15.7% followed up at the six month mark, thus requiring an extension of the study period from May to September 2015 (behind schedule);
- ✓ **Mpowerment** with 96.5% of study participants recruited and 88.0% followed up at the 12 month mark (on track); and
- ✓ **Seven Steps** which was launched in August 2014 and has an approved study protocol and a team of trained interviewers.

In addition, a **feasibility study** was launched in August to accompany the Seven Steps EBI for **MAT clients in PHC**. The study has an approved protocol, and will train the research team and partners in Q1 of FY15.

There are not enough data in any of the studies yet to make conclusions on their results. Preliminary data, however, suggest that EBIs are replicable in Ukrainian context with positive outcomes. For example, proportion of MARA who tested for HIV and know the result changed from **15.7% to 38.0%** in the intervention, and from **21.0% to 6.0%** in the control group. Among MSM, proportion of those who received free condoms within the last 12 months increased from **68.6% to 94.1%**. Anecdotal evidence suggests that EBIs are endorsed by local authorities and stakeholders (Street Smart) and by implementers and donors (Mpowerment). Project Start has been challenged by initial exaggeration of the eligible prison population size on the part of RESPOND implementing partners, poor communication with prison authorities, and lack of motivation on the part of the clients, all resulting in slow participant recruitment.

In FY15, RESPOND will initiate new IS studies on local EBIs for PLHIV and the integrated health and livelihood intervention. By the end of FY15, results of the Street Smart, Project Start, Mpowerment and MAT in PHC studies will be published together with EBI implementation packages as an on-line Ukrainian Compendium of Evidence-based Interventions at the National Strategic Information Resource. The Compendium will be updated as new implementation packages and study results become available.

Milestone reached: By the end of FY14, RESPOND began piloting one international EBI, Seven Steps, including demonstrating the effectiveness of MAT in non-specialty care sites. RESPOND has also started packaging and will begin IS studies for three local promising EBIs in FY15.

Intermediate Result 1.3: Institutionalize the QI Methodology in HIV/AIDS Services

Implement QI Local Pilots and Scale up QI Models at the Regional Level

To improve the delivery of HIV/AIDS services to key populations, RESPOND continued implementation of **four QI demo projects**. Two projects in Odesa region were implemented by two QI teams. One team focused on HCT in pre-trial penitentiary facilities, and the other focused on enrollment of key populations in care & treatment provided at the newly open ART site in one of the districts. Two QI projects in Lviv oblast were implemented by seven QI teams aiming to introduce HCT in district TB facilities, and one QI Team joining the efforts of HIV-service NGOs and the Regional AIDS Center to increase HCT coverage among key populations.

Within the reporting period, QI activities were launched in Zaporizhzhya (four QI Teams were formed) focused on improving the quality of HCT and coverage for key populations at the primary health care level. *In Q4*, QI activities were launched in Poltava (instead of originally planned Dnipropetrovsk). QI activities started with a strategy development session; next steps, including the finalization of QI charters, are planned for Q1 of FY15.

During FY14, **two QI strategy development sessions** were held in Zaporizhzhya and Poltava to launch the work in the region (*the session in Poltava was held in Q4*). Participants learned the principles of the QI methodology, and drafted charters outlining QI objectives and potential changes. **One QI coaches training** was held in Zaporizhzhya to build the mentoring skills of region-based QI coaches overseeing each QI site. **Five QI learning sessions** were held (three in Lviv, one in Odesa and one in Zaporizhzhya), where participants shared and discussed their experience in QI implementation with peers. In total, **309 QI person-trainings (47.1% male)** were held.

FY14 QI activities have shown that the changes proposed by QI teams in Lviv region have made a difference in service uptake. For example, the number of outpatients receiving HCT in Chervonohrad TB dispensary increased from zero in 2012 to 191 in 2013-2014 (or 77.6% of all eligible patients). As a result, changes were **scaled up across additional five districts within Lviv oblast.** In Odessa region, results of the QI demonstration project **were adopted through the regional Penitentiary Department's** executive order (prikaz).

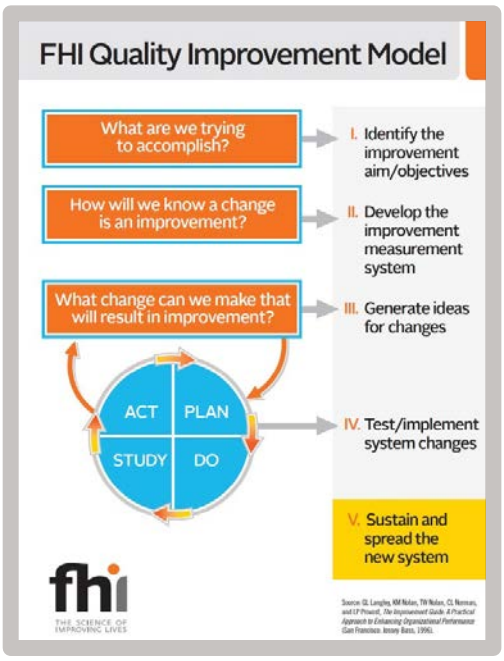
In FY15, RESPOND plans to document the results of QI demonstration projects in Lviv region, transition Odesa sites to local leadership, support QI sites in Zaporizhzhya, and launch QI demonstration projects in Poltava and Cherkasy focused on HCT improvement in PHC facilities.

Develop QI Regulatory Framework with Regional and National Partners

RESPOND strives to ensure sustainability of the QI model in project regions and on the national level. To sustain QI changes in Odesa, the **Regional Department of Penitentiary Service issued a prikaz requiring HCT for all detainees**. During FY15, RESPOND plans to support a technical working group at UCDC to increase national level buy-in on the QI approach. Additionally, to address the issue of buy-in, the teams plan to bring together key stakeholders in each region to review the progress of QI demonstration projects.

RESPOND has decided to pilot the QI demonstration projects and document their progress and results for a longer period of time before developing a CME curriculum for post-graduate medical education. RESPOND will address this milestone in the future implementation periods.

Milestone partially reached: By the end of FY14, RESPOND demonstrated the use of the science of QI to improve the quality of HIV/AIDS services in two regions (Lviv and Odesa). The QI methodology was adopted in Odesa region via an order of the Penitentiary Department, and was introduced in Zaporizhzhya and Poltava regions. A total of 54 QI coaches are trained in Lviv, Odesa and Zaporizhzhya. RESPOND postponed the adaptation of QI materials for institutionalization in post-graduate medical education (with NMAPE).

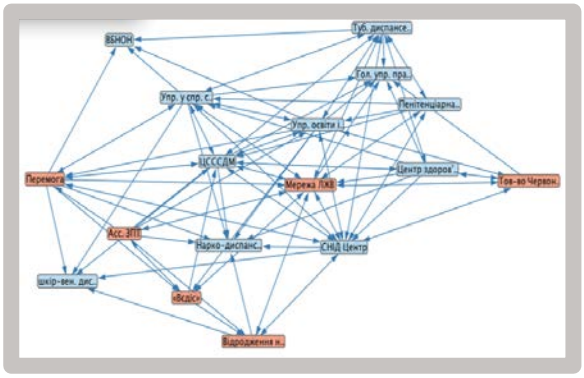


Objective 2. Strengthen the Capacity of Ukrainian Institutions to Deliver Quality HIV/AIDS Programs

Intermediate Result 2.1: Improve Organizational and Technical Capacity of CSOs, Public Sector, PRs and Other National Partners

Build Regional and National Networks (Visioning Events, Regional Meetings, ONA)

During FY14, RESPOND continued efforts aimed at strengthening regional and national networks.



From October 2013 through March 2014, RESPOND conducted a series of **regional stakeholders meetings** in new Project regions, Zaporizhzhya, Cherkasy and Poltava, to address cross sector challenges and gaps in regional response to HIV epidemic including lack of common vision of regional gaps and needs, insufficient linkages and collaboration among governmental and non-governmental organizations and facilities, and inefficient utilization of available resources. Future Search and Appreciative Inquiry methodologies were used to facilitate the meetings. As a result, participants have draft action plans to improve service provision for key populations addressing challenges such as: low coverage of key populations by HCT services, poor service

coverage in rural areas, insufficient access to MAT services, poor coordination between public sector and NGOs. MSM in Poltava and MARA in Zaporizhzhya region were identified as key populations lacking services.

During regional events, the **Organizational Network Analysis** (ONA) was conducted to look at the level of cooperation among and between regional NGOs and public authorities in the field of service provision, information exchange, implementation of projects and regional programs development. The initial network density was 42% in Zaporizhzhya, 42% in Cherkasy, and 35% in Poltava. ONA results indicated that organizations and facilities are better at information exchange (43%) in general but at the same time there is insufficient coordination and collaboration in terms of referrals and service delivery (36%). Cooperation in the development of joint programs is also lacking (36,5%).

To review the vision developed in FY13 and FY14 during regional meetings, in May 2014 RESPOND conducted a **Partner Conference**, FROM LOCAL SOLUTIONS TO GLOBAL CHANGE, which brought together about 130 national and international partners. Participants reviewed trends in the HIV epidemic, national HIV response priorities and regional needs and capacities. Three concurrent conference tracks (Strategic Information, Quality Improvement and Capacity Development) enabled participants to choose and prioritize their specific areas of interest. All sessions were interactive and included both learning/sharing as well as skill building formats. The meeting discussions, presentations and input from participants informed RESPOND on how to better support partners.

In FY15, RESPOND will conduct **four bi-regional stakeholders meetings**. These meetings will

further promote the network strengthening and will be tailored to the needs and interests of individual regions: HIV prevention services to MARA will be the focus for Dnipropetrovsk/Zaporizhzhya and Odesa/Mykolayiv regions; integrated health and livelihood programming for Poltava and Cherkasy regions; increasing and improving HIV prevention services for MSM for Chernihiv and Lviv regions. Additionally, in FY15 the ONA will be repeated in 5 initial regions to see changes in regional cooperation after organizations have been able to engage in networking activities.

Milestone reached: At the end of FY14, a common vision for the HIV/AIDS sector was established in the three new regions (as was done in the five initial pilot regions in FY13). ONA to measure the network density in 3 new project regions was conducted (according to the project PMEP, ONA is conducted in years 1, 3 and 5).

Build Individual CSO Organizational Capacity and Technical Capacity of HIV/AIDS Service Providers

In FY14, RESPOND continued providing capacity development support to its grantees. The Capacity Development team provided **mentoring visits** to EBI implementers on a quarterly basis to review and support the implementation of individual Institutional Strengthening Plans developed collaboratively with each grantee. Positive changes in performance were observed. For example, Avante in Lviv and Nashe Maibutne in Kryvyi Rig developed detailed internal procedures on monitoring and evaluation. With the support of the RESPOND QI team, Avante introduced standards for service delivery (counseling by social workers and case management). Vira. Nadiya. Liubov in Odesa developed a system for staff professional development and supervision. The Network Branch in Kryvyi Rig was able to diversify funding by attracting private business.

Out of 15 NGOs that had developed ISPs, three organizations (Penitentiary Initiative in Mykolayiv, Nashe maibutne in Kryvyi Rih and Avante in Lviv) completed all actions outlined in their ISPs and are developing further action steps. Penitentiary Initiative decided to take steps to prepare for direct USAID funding and applied for a Marketplace voucher to undergo audit readiness assessment. Avante in Lviv developed a business plan and opened a social café to generate revenue to support programs. Nashe Maybutne has developed a Quality Improvement Charter and focuses on improving services for MARA.

To address the capacity development needs of grantees identified through mentoring visits and also defined in the grantees' ISPs, RESPOND organized three trainings *(one training in Q4):*

- ✓ **Facilitation skills training** conducted in November 2013 covered 40 representatives from 16 NGOs, implementing EBIs and service grants under RESPOND. During the training NGOs staff went through basic concepts of individual counseling and group facilitation and practiced facilitation methods tailored to specific EBIs.
- ✓ Additional **individual counseling skills training** was conducted in March 2014 for four organizations piloting Project Start. Thirteen training participants (9 facilitators and 4 project coordinators) have learned how to follow the protocol, apply counseling tools, complete necessary forms. They practiced skills to address client's refusal and learned how manage time constraints in a correctional facility.
- ✓ **Fundraising training** conducted in July 2014 was attended by 37 participants from 18 NGOs. Participants learned the basics of fundraising, received knowledge and

gained skills to enable them develop fundraising strategies, practiced the use of fundraising tools and instruments. Following the training, 8 of 18 organizations applied for small grants to other donors (Renaissance Foundation and AIDS HealthCare Foundation) and at least 2 have already received additional funding from Renaissance Foundation (Dnipropetrovsk and Kryvyi Rih Branches of PLHV Network).

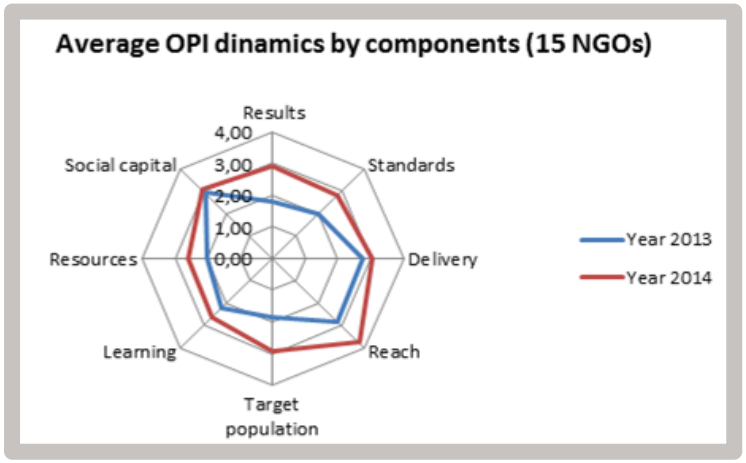
In addition, five organizations used Marketplace vouchers to address the needs outlined in their ISPs. Dnipropetrovsk Branch of the Network and Novomoskovsk Family Support Center conducted Strategic planning sessions. Nove Storichia from Mykolayiv used a regional voucher to conduct training for psychologists on burn out prevention for their staff and staff from 8 more NGOs. Vira, Nadiya, Liubov from Odesa and Nashe Maybutnie from Kryvyi Rih also conducted trainings for their teams on burn out prevention.

In Q4 of FY14, RESPOND facilitated **ITOCA** for 7 new grantees selected to pilot Seven Steps EBI targeted at PWID. ITOCA findings showed that all seven NGOs have high service provision capacity (beneficiary needs are considered and service provision standards are followed), but five of seven NGOs expressed an interest in strengthening their capacity in strategic planning and management.

To measure the level of performance of local partners, in FY14, RESPOND conducted **two rounds of OPIs**:

- ✓ Repeated OPI (re-OPI) for 15 organizations (former and current grantees);
- ✓ Baseline OPI for 7 organizations (new grantees).

Results from the re-OPI showed that the **overall organizational performance improved** from the average of 2.31 to 2.97. Such indicators as Results (demonstrating ability to set strategic goals and reach long-term results), Standards (measuring the availability of internal/external standards of service provision) and Reach (showing coverage of target populations and level of access to services) improved particularly. 9 NGOs developed strategic plans, 2 introduced internal standards, 6 NGOs developed internal system of M&E. Yet grantees are still challenged in the Resource indicator – there is low diversification of financial resources, no fundraising strategies and lack of skills in attracting additional funds. Overall, 75% of grantees have improved their performance.



The graph on the left illustrates average dynamics in performance improvement of 15 organizations.

The baseline OPI conducted with 7 new partners showed that all organizations scored relatively high on two domains – Efficiency (Results & Standards) and Effectiveness (Delivery & Reach). 4 NGOs are operating according to the strategic plans they've already developed, 3 NGOs have developed and implemented standards of service provision, all 7 NGOs admit high quality and coverage by services they provide. At the same time Sustainability domain (Resources & Learning) was scored low. Only 2 NGOs have diversified funding and developed fundraising strategies, the other 5 NGOs almost fully dependent on GF

funding. These findings will be considered when developing ISPs in October 2014 to include capacity development activities aimed at strengthening strategic planning, developing and introducing internal standards on service provision, etc.

In FY14, RESPOND provided access to all local partners to the Pact-developed on-line Capacity Solutions Platform (pact.capacitysolutionsplatform.com), and all OPI data are now stored in this on-line database. As NGOs admitted all the data stored on the platform is easily accessible, shows a clear picture of the dynamics in performance improvements, can be used as an attachment to project applications and on NGOs' web-pages. CSP also provides NGOs with possibility to score their OPI on annual basis not involving external consultants.

To promote knowledge exchange, provide technical support in addressing challenges, enhance sharing of best practices and lessons learned and alleviate professional burnout, RESPOND introduced Communities of Practice for local partners piloting EBIs. In the past year RESPOND conducted 3 rounds of Communities of Practice (COP) meetings around each of three EBIs.

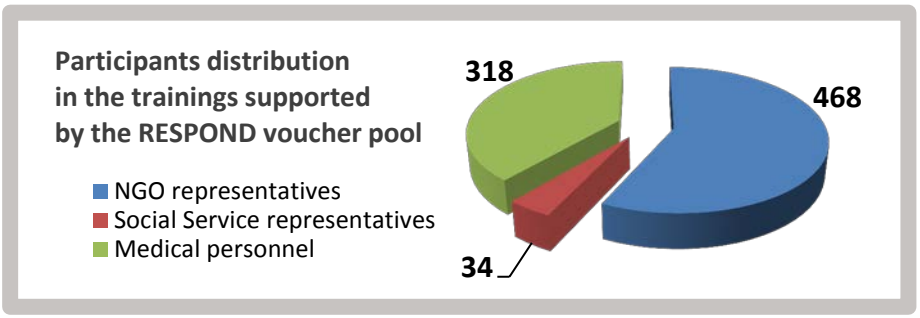
The first round of COPs was conducted in October 2013. **Fifty-one participants** shared key challenges and successes from the first 3 months if EBIs implementation. They received expert advice and recommendations on client enrollment and discussed partnership building techniques. The second round of COPs was held in Feb-March-April 2014. **Forty-nine participants** presented achievements in overcoming past challenges. They shared how and where they identified "hot spots" for enrollment Street Smart clients, how they managed to improve partnership with penitentiary system within Project Start EBI and discussed updated community assessment techniques aimed at more intensive client enrollment within Mpowerment EBI. The third round of COPs brought together **53 participants** in July 2014. This round focused on presenting and practicing success and challenge analysis techniques. COP participants acquired new skills in sustaining successes and overcoming challenges which they can apply while implementing other interventions.

RESPOND also introduced an on-line Community of Practice located at Pact's Mosaic (Jive platform) that allows partners have ongoing communication and collaborate around the issues related to EBI implementation and broader service provision agenda.

A total of 194 person-trainings (32% men) on technical and organizational capacity building were conducted in FY14.

Within the reporting period, RESPOND partners continued using the **Marketplace** as a resource to strengthen their organizational and technical capacities. As of September 30, 2014 there were over 55 registered "service recipients", both CSOs and public institutions. In FY14, **23 technical vouchers and 4 organizational vouchers** were awarded under RESPOND voucher pool. Organizations also had access to SIDA's voucher pool under which 5 vouchers for organizational capacity development were awarded. Out of these, three vouchers were awarded *in Q4 of FY14*.

Ten out of twenty three technical vouchers were awarded to public sector facilities in FY14. In FY14, RESPOND project vouchers helped **820** HIV professionals from NGOs, public sector



medical and social service facilities, as well as managers and decision makers, improve their skills and expertise in HIV service delivery.

In FY 15, RESPOND will support ISP development for Seven Steps EBI grantees and will continue providing capacity development support to local partners through mentoring visits, direct trainings, COP meetings and access to Marketplace voucher pool.

Sensitization of Health Professionals on Stigma and Discrimination

To address provider stigma and discrimination (S&D) against key populations in Ukraine, RESPOND conducted a review of the existing training curricula for medical professionals. Preliminary findings of this review are the following: Undergraduate medical education curricula do not explicitly address S&D against key populations.

- ✓ The only formal postgraduate education curriculum that incorporates S&D is a new course for family physicians on Case Management of PLHIV developed under USAID RESPECT project. Why is it not sufficient?
- ✓ There are four training modules for healthcare providers adapted by international projects addressing S&D to PLHIV; only one addresses S&D to key populations. None of them are recognized for CME credit.

The full version of the review will be available in Q1 of FY15. Based on this review, RESPOND in collaboration with NMAPO and USAID RESPECT project implemented by the Network are planning the following steps:

- ✓ Update the official CME training curriculum for healthcare providers on HCT to include a module on S&D against key populations.
- ✓ Develop training guide and materials and conduct TOT for CME training providers to institutionalize the curriculum.

Milestone partially reached: By the end of FY14, 75% of CSO grantees active for more than one year improved their organizational and technical performance. Draft curriculum on stigma and discrimination for health workers is being developed in collaboration with key partners (NMAPE, Network).

Livelihood Programming for Key Populations

Based on the formative assessment conducted in FY13, RESPOND designed a pilot aimed at integrating health and livelihood programing. The intervention will target HIV positive women with small children and will be piloted in Chernihiv, Poltava, Dnipropetrovsk and Cherkasy regions. In FY14, RESPOND **brought together partners** from the regions and representatives from PRs to introduce the pilot design and the process; held **regional round tables** to have CSOs present their findings from the clients' needs assessment; reviewed the readiness of HIV service providers to integrate livelihood component; conducted **mapping of local resources** within economic empowerment area; and **refined the pilot design and M&E framework** through participation in Pact's global **Community of Practice on Integrated Approach** held in Bangkok.

The **RFC** aimed at piloting economic strengthening interventions in selected regions was announced in Q4 of FY14. The selected measurement approach envisions conducting a study based

on comparing solo health and integrated health and livelihood projects based on the case management approach. This effort will require close collaboration and coordination with the Network which will support its partners in providing case management services to HIV positive clients.

RESPOND held numerous consultations with other international projects and organizations (FINREP II, HealthRight, and Eastern Europe Foundation) to involve their expertise and will continue this effort on the stage of implementation methodology development.

Results of RFC competition will be announced by mid October 2014. In November - December RESPOND, in close cooperation with international partners, will develop implementation methodology and provide training to grantees. Implementation start day is scheduled for March 1, 2015 (grant will end on August 31, 2016). During this time RESPOND will provide close mentor support to grantees.

Milestone reached: By the end of FY14, CSOs have undergone a capacity assessment to integrate health and livelihood interventions.

National AIDS Conference

RESPOND provided technical and financial assistance for the National AIDS conference in October 2013. RESPOND was part of the conference planning committee, contributed to the agenda development and supported conference participation of 38 partners from the eight project regions. RESPOND staff as well as regional EBI and QI partners also made panel presentations to present

international best practices and promising local practices aimed at increasing access to and improving the quality of counseling & testing for key populations. Lessons emerging form the conference, such as the need for MAT scale up, integration of HIV services into non-specialized settings, need for increased focus on reducing stigma were addressed throughout RESPOND activities in FY14.

M&E Conference

Project supported participation of 25 people from eight project regions (regional AIDS centers & CSOs representatives, IS partners) in the 5th National M&E conference in Donetsk, November 20-22, 2013. RESPOND organized two sessions at the conference on (i) implementation science and (ii) National Intervention Inventory in HIV/AIDS field.

Package and Transfer Project Expertise to PRs

To ensure sustainability of project results, RESPOND worked with three PRs (UCDC, Alliance and PLHIV Network) on packaging and transferring project expertise. A breakthrough was achieved in relationships with UCDC and the Network by signing Collaboration Frameworks. The **Collaboration Framework with UCDC** (Annex 2) includes: (1) Joint development of the National Strategic Information Resource to be transferred under UCDC management; (2) Creating service mapping templates based on UCDC's request, and training UCDC and regional AIDS Centers' staff on creating interactive on-line maps; (3) Creating a visual regional profile of the HIV epidemic and response for all 27 regions of Ukraine with UCDC providing additional data and transferring the profiles under UCDC management; (4) Finalizing the SI manual and training national and regional M&E staff on the use of strategic information; (5) Institutionalizing the results of QI projects through the QI TWG at UCDC; and (6) Jointly developing regional HIV/TB resource and training centers in Zaporizhzhya and Lviv. In addition, UCDC staff participated in DDUDM trainings in all eight regions both as participants and as co-facilitators. In July-August 2014, RESPOND QI and CD staff participated in the Quality Assessment training and survey with the use of ClASS methodology, funded by CDC and facilitated by UCDC.

The **Collaboration Framework with PLHIV Network** (Annex 1) includes: (1) Structuring, piloting and evaluating EBIs on case management for PLHIV, HIV-positive PWID, and PLHIV with TB; (2) Jointly developing and piloting an integrated health and livelihood program for HIV-positive with young children; (3) Jointly developing a training curriculum for healthcare providers to reduce stigma against PLHIV and key populations; (4) Jointly developing regional HIV/TB resource and training centers in Zaporizhzhya and Lviv; and (5) Building organizational capacity of the Network's regional organizations.

No collaboration framework with the Alliance has been developed. However, RESPOND and Alliance collaborated on a number of joint activities including: (1) Implementing the new Seven Steps EBI, including the design of the RFA, the M&E system through SYREX database, and the IS study design; (2) Coordination of DDUDM and METIDA project activities in the regions, including timing, lists of participants, and content of training activities; (3) COPs on RESPOND EBIs, where both the Alliance and PLHIV Network staff participated.

RESPOND has offered access to the on-line OPI, ITOCA and ONA tool, capacitysolutionsplatform.com, to all interested stakeholders, including PRs. In FY15, RESPOND

will continue implementing collaboration frameworks with UCDC and PLHIV Network, and will keep developing one with the Alliance.

Collaboration with Alliance proved to be the most challenging, as Alliance has not been able to formulate its TA needs, which would correspond to the scope of RESPOND.

Milestone partially reached: By the end of FY14, RESPOND refined its collaborative frameworks with two PRs and initiated transferring knowledge and skills on Strategic Information, EBIs and QI.

Cross-Cutting Activities

Communications

RESPOND's communication efforts are directed toward building trust, credibility, and awareness; securing stakeholders and partners' commitment to the project's goals; and encouraging their support and participation in its activities.

To promote the PEPFAR, USAID and RESPOND brands, project branding has been used at all public events, as well as on project publications distributed during project events such as conferences, trainings, communities of practice, etc. Project publications in FY14 include leaflets describing the Organizational Performance Index, Marketplace, Overview of Strategic Information Products (Interventions Inventory, Dashboard and Service Mapping), Behavior Change Intervention for PWID, QI Briefs on demonstration projects, and the Intervention Inventory Results Overview (produced in Q4 of FY14).

In FY 14, the RESPOND website was promoted through the online photo contest Changing Lives Together which drove the collection of success stories. Additionally, the Strategic Information section was created consisting of interactive maps of HIV Services for key populations in eight project regions; interactive inventory of interventions; and interactive profiles of eight project regions. The beta version of another resource, registry of HIV-service organizations and

donors in the area of HIV/AIDS in Ukraine, was developed by and presented to partners in Q4 of FY14. The registry was acknowledged as a useful tool and a starting point for developing a national registry of HIV service organizations.

In August and September RESPOND and its partners participated in the USAID Field Days in Lviv and Dnipropetrovsk. It was an excellent opportunity for people from the communities to learn about the project through hands-on outdoor activities.

In FY15 RESPOND will develop a new format of multimedia e-newsletters to make the newsletter more attractive, reader-friendly and useful for the audience. The Project will continue to share program learning and knowledge via EBI COPs, QI Learning workshops, partner meetings, conferences, program products and the project web-site in a collaborative and participatory manner.

Program Monitoring and Evaluation

An independent **data quality assessment (DQA)** of RESPOND project and its six sub-grantees was conducted from April 24 to May 30, 2014. The main objectives of DQA were to assess strengths and weaknesses in RESPOND and sub-grantees' data collection and reporting system, and strengthen the capacity of RESPOND M&E staff to continue regular DQA of its partners. The M&E system was assessed at two levels: the RESPOND main office in Kyiv and the service level at the NGOs.

Four indicators at the RESPOND program level and one at the service provision level were verified and **verification factors were found to be from 94% to 100%**. The average score for the assessment of data management and reporting system was **2.82 on a scale of 0 to 3** (range 2.71 to 2.86).

Based on the assessment, the key findings and recommendations were developed and presented to USAID. An action plan was jointly developed by the DQA team and RESPOND M&E team and included steps for improving the RESPOND M&E system. All recommendations were incorporated into RESPOND project planning by September 30, 2014.

Following Pact's internal Results and Measurement Standards and the DQA recommendations, RESPOND's **PMEP was revised and updated**. The revised PMEP (M&E Plan) was submitted to USAID for concurrence along with the FY15 Workplan.

In May, RESPOND piloted a **customer survey** at its partner conference, and implemented the survey in June reaching out to 640 individuals. Responses were obtained from 196 people (30.6% response rate), with **87.6% of respondents positively rating RESPOND activities** (see Annex 7 for full report).

In FY14, RESPOND piloted the **DevResults** on-line database as a potential Pact global M&E platform. Although DevResults possesses advanced data visualization features, serious data processing deficiencies have been discovered in the piloting phase. In Q4 of FY14, Pact made a decision to implement DevResults for internal tracking of global indicators across countries and regions, donor demonstration and reporting, and direct access to project data from Pact DC Office. As DevResults was found not suitable for individual client tracking, RESPOND will not require client and service data entry by implementing partners. Rather, reports generated by Alliance's SYREX database will be uploaded and stored in DevResults for further analysis and use.

Gender Integration

In line with the PEPFAR Gender Strategy, and to promote a comprehensive approach to HIV prevention and treatment, **21 RESPOND local partners** (NGOs in Odesa, Mykolaiv, Dnipropetrovsk, Chernihiv, Cherkasy, Poltava, Lviv, Zaporizhzhya regions) went through a **gender assessment** aimed at reviewing the extent of gender-sensitive service provision and how NGOs address gender-related issues while working with clients (five NGOs went through gender assessment during ITOCA). Results showed that 62% (13of 21) NGOs provide gender-sensitive services (meaning scores are at least 80% of the maximum possible). While some questions related to gender norms, inequalities, gender-related violence are incorporated into routine practice of social workers, psychologists and other professionals, they still need additional education and trainings on gender and how it influences HIV risk for both men and women. The findings will be used for planning further RESPOND events with local partners.

Based on these results and the previously conducted situational assessment (2012) a **Gender Road Map** outlining key strategies and activities which should be implemented to achieve Respond's gender objective was developed (Annex 8). FY14 gender road map activities included a session on gender issues in the Seven Steps intervention training.

Also a new approach – Livelihood – was introduced. Based on needs assessment and resource mapping in preliminary selected regions such groups as HIV-positive women who have children under school age were offered for piloting this intervention.

Additionally, RESPOND continues to support the **"I am a Mother" center** in Dnipropetrovsk (Dnipropetrovsk Branch of All-Ukrainian Network of People Living with HIV) which ensures an increase in access to services for women, especially women who have children addressing in such a way gender inequalities and overcoming gender barriers.

In FY 15, RESPOND will continue to implement against the Gender Road Map to incorporate gender-related activities into EBI and will work with local partners to increase their awareness of the need to address gender-related norms and inequalities which underlie HIV risk and access to services. RESPOND will conduct a training on gender-related issues and also will look to register gender experts on the Marketplace to provide technical assistance. IS studies will also investigate how gender issues are addressed during the implementation of EBIs.

Environmental Compliance

In accordance with IEE/ERC (DCN: 2011-UKR-020), the only type of activity under the RESPOND Project found to have potential impact on human health was "1.1.7 The provision of technical assistance to prepare, test, package, and disseminate state of the art and cost-effective HIV/AIDS service models," so a Negative Determination with Conditions was recommended for this activity.

In FY14, RESPOND did not undertake any activities connected to the use of medications or disposal or medical waste; neither did it provide financial assistance to any Ukrainian entities that would make it necessary for them to comply with this regulation. In this and in all other respects RESPOND is in full compliance with all IEE/ERC terms and conditions.

In FY14, RESPOND came over a need to provide financial and technical assistance to several NGOs that needed cosmetic repair of either their own training centers or training centers and/or consultation rooms at medical institutions. Aware of the adverse effect on human health and/or the environment that the improper use of construction materials may have, RESPOND undertook an assessment of potential environmental risks and requested and amendment to its current IEE/ERC and EMMP. The requested amendment was granted by USAID via the DCN No. 2014-UKR-008.

In accordance with DCN, RESPOND is now also monitoring renovation of medical offices, community centers, training centers, and consultation rooms at medical facilities and other locations, which are used by local NGOs to provide services targeted to key populations and their sexual partners. As of the end of FY14, three ERCs were pending USAID Mission's environmental officer approval: Training Center at the Lviv Regional AIDS Center, MAT Consultation Office at the Poltava Primary Health Care Clinic #2, and the Cross-Sectorial Communication Center at the Cherkassy Regional AIDS Center.

Management

In the First Quarter of FY 14, the RESPOND Project conducted Annual Program Review meeting to strengthen shared understanding of overall project objectives and expected outcomes, review the results of activities conducted in the first project year, discuss how they contribute to the project goal and intermediate results. The project team also revisited and adjusted plans for the second year incorporating feedback from the donor and the national partners. USAID alternate AOR participated in the meeting. As a result, the project team made **modifications to the Project**

Results Framework and revised the second year work plan accordingly. Both document were reviewed and approved by USAID.

During the reporting period a number of staffing changes took place caused by staff rotation and also by the need to expand certain departments. USAID approved **revisions in key personnel structure** reducing the number of key personnel to CoP, DCoP, Results and Measurements Technical Advisor. Currently all key personnel positions are filled; EBI, CD and SI Teams have expanded and total number of full time project staff in the Kyiv office has grown up to 22 people with 3 more positions to be filled yet. (RESPOND Organogram is presented in Annex 9). The positions to be filled include Local Technical Team Leader, Strategic Information Officer and Knowledge Management Director. The Local Technical Team Leader has been identified and the start date is set as December 1, 2014. Hazel Simpson, has a Master Degree in Community Health from Liverpool School of Tropical Medicine and over 20 years of experience in international health and development, including HIV programming for key populations. She worked previously in Vietnam, Nepal, Ethiopia and Malawi and within RESPOND she will be leading and managing FHI 360 local team. Recruitment for SI Officer and KM Director is ongoing. RESPOND will also recruit part-time regional coordinators to support coordination and implementation of project activities in the regions.

Due to the political unrest and unstable situation across the country, many activities were put on hold in December 2013 – February 2014 but were resumed in March 2014. The project has managed to catch up on almost all activities planned for the year. The sub-grantees' activities were not affected and continued in accordance with the implementation plan.

In the past year USAID conducted Data Quality Audit and RESPOND ranked with the average score of 2.86 out of 3.0. Based on the recommendations of the DQA Team, RESPOND developed an Action Plan which was implemented both on the project level and sub-grantee level.

Within the reporting period, through national partner coordination meetings convened by RESPOND on a quarterly basis and also through individuals meetings, the RESPOND project strengthened coordination with other USAID Implementing partners (MSH & Chemonics on HIV/TB; UNODC/PLEDGE on services for prison population and access to MAT for PWID;) with UN agencies (UNAIDS on national level TA, UNICEF on services for women & MARA, WHO on strengthening HCT, World Bank on health reform).

RESPOND has assured coordination with USAID through on going communication via e-mail and by phone as well as participation in the meetings for implementing partners hosted by USAID. New AOR was appointed by USAID in May 2014 and coordination continued to be assured through regular communication via e-mail and phone. Bi-weekly meetings in person were also introduced to ensure that AOR is updated on the project progress and challenges and that the project activities are in coordination with other Mission supported efforts. Within the reporting period the Mission representatives conducted site visits to the RESPOND partners regions: Odessa (1 visit), Poltava (2 visits), Chernihiv (2 visits), Lviv (1 visit), Zaporizhzhya (1 visit) & Dnipropetrovsk (1 visit).

In June 2014, RESPOND conducted an on-line **partner (customer) survey**. The survey was circulated among 640 e-mail addresses from RESPOND partner database, which returned 196 responses (30.6% response rate). Majority of respondents (58.2%) represented institutions that had never received RESPOND grants. Survey results have been overwhelmingly positive. Respondents found various RESPOND activities, such as capacity development, quality improvement, DDUDM, etc., as useful or very useful (average scores between 3.04-3.38 on the 4.0 scale). Various RESPOND products, such as regional profiles, EBIs, Marketplace, etc., were rated

as good or excellent (average scores between 3.02-3.22). Quality of technical assistance provided by RESPOND received an even higher rating, 3.20-3.53 on the 4.0 scale. Technical assistance from RESPOND partially or completely meets respondents' expectations (average score of 3.31 on the 4.0 scale). Survey results are available in Annex 7.

In the *last quarter of FY 14*, the RESPOND team conducted 2nd Annual Review meeting. As a next step the local project team together with Pact and FHI 360 international technical experts engaged into work planning for Year 3. Work plan activities under each of four Intermediate Results were discussed and agreed upon. Cross-cutting themes such as Quality, Gender, Knowledge management were integrated into work plan activities. Feedback received through partner survey and input from the AOR was incorporated as well. The work plan for FY 15 was submitted to the Mission on time for review and approval.

In August 2014, Pact submitted a request for incremental funding to support operations and work plan implementation. The request was partially met in September 2014. The pipeline analysis shows that the obligated funds will be used up almost completely by the end of Quarter 1 of FY 15.

Challenges & Opportunities in Sustaining and Scaling-up Project Results

Strengthened Utilization of Strategic Information for Decision Making

By the end of Year 2, RESPOND has developed and successfully tested a number of tools and instruments to promote data demand and enhance the use of strategic information for decision making and program planning. These tools include the inventory of local HIV prevention interventions, regional profiles, service maps, and DDUDM guide. These tools and instruments are now recognized by the national, regional and international partners (UNAIDS in particular). The two challenges identified are:

- ✓ Both service maps and regional profiles would be even more helpful if they included rayon (district) level data breakdown and additional data on TB services, HIV/TB human resources, donor funding allocation. To address these needs RESPOND is joining efforts with UCDC and other USAID Implementing Partners (Deloitte, MSH, Chemonics) to collect and incorporate additional data into existing data visualization tools.
- ✓ Regular updating and continued use of the developed tools upon the completion of the RESPOND project. This challenge has been addressed by developing a detailed plan to transition the ownership of the tools to UCDC. Transitioning will be achieved through a series of trainings for UCDC and M&E Units of the Regional AIDS Centers and placing all SI products on UCDC owned and managed National Strategic Information Resource.

The National Implementation Science Plan developed by RESPOND-led National IS TWG is removed from the project's agenda due to lack of commitment and in-country resources to support IS efforts. At the same time, RESPOND experience with EBI pilots linked to IS studies

demonstrated the need to strengthen technical and organizational capacities of Ukrainian research institutions. RESPOND will look into this need more carefully in the coming years.

EBIs as Model Best Practices for HIV/AIDS Service Delivery

The piloting of three EBIs – Street Smart/MARA, Mpowerment/MSM and Project Start/prison population will be completed in March 2015. Preliminary finding from IS studies show that these interventions if implemented with fidelity are effective within Ukraine context. To promote further use of these interventions by Ukrainian HIV service providers, RESPOND has planned a number of steps.

- ✓ EBI electronic "packages" (implementation manuals, facilitator guides, M&E annexes, handout materials, results from IS studies) will be published as the Ukrainian Compendium of Effective Behavioral Interventions. The Compendium itself will be part of Ukrainian National Strategic Information Resource.
- ✓ RESPOND will work closely with EBI grantees to identify and further train expert trainers and supervisors to support scale up and dissemination of interventions. Experts will be certified by RESPOND and registered on the Marketplace as available technical resource.
- ✓ RESPOND will select a limited number of NGOs from the existing pool of local partners (two to three organizations) to develop them as Centers of Excellence and training sites for further roll out of EBIs within and across regions.
- ✓ RESPOND will be more intentional and strategic about transferring EBIs to the Ukrainian government agencies for further funding. Preliminary analysis of funding landscape prompts that despite the fact that services for MARA are not included into the National AIDS Program for 2014-2018, Street Smart intervention for MARA can be potentially supported through the public centers for social services. Project Start intervention for people to be released from prisons could be supported by Penitentiary and Social Services together.
- ✓ Scale up of Mpowerment EBI would help to address the hidden epidemic in MSM; unfortunately there is no interest or commitment from any public social service agency to work with this key population. RESPOND will design and support a series of activities to help HIV service CSOs diversify funding in the future to be able to support services for MSM. Meanwhile, a number of RESPOND partners piloting Mpowerment intervention have applied for funding under GF Phase II Rounds 9&10.

Institutionalizing QI Methodology in HIV/AIDS Services

QI demo projects in Lviv and Odessa have shown positive results in closing gaps in the HIV Treatment Cascade on the rayon (district) level. At the same time, there is still lack of understanding and buy-in among regional decision-makers and health administrators as to how QI methodology could be applied and institutionalized on the regional level. One of the reasons could be that so far RESPOND has focused mostly on building capacity of the local QI teams and creating a critical mass of local QI coaches and mentors. In the coming year, more effort will be invested into engaging regional health authorities and exposing them both to the methodology as well as early gains from the demo projects.

In addition, in FY15, RESPOND collaboratively with UCDC will co-facilitate the National QI Technical Working Group which will be tasked with documenting and institutionalizing QI methodology in Ukraine. Another UCDC-RESPOND collaborative activity is the establishment of Regional HIV Resource Training Centers in several of RESPOND partner regions. In addition to training health and social service professionals on HIV/TB related topics, these Centers can be potentially tasked with building regional capacity in QI.

Organizational and Technical Capacity Building

Sustainable delivery of quality HIV services depends on a variety of factors. One of the challenges is low organizational capacities of HIV service NGOs and dependency on one or two donors. Working with the local partners to help them develop and adopt strategic management approaches including but not limited to fundraising strategies will be one of the focus areas for RESPOND in the coming years. Community mobilization, establishing public-private partnerships, social contracts with the local government & other strategies to diversify funding will be tested and transferred to local partners.

Through the establishment of NGO-based EBI Centers of Excellence and Regional HIV Trainings Centers at the AIDS Centers, RESPOND will create capacity for ongoing skills training & continuous education for different target groups – NGO service providers, health professionals, public sector social workers.

By opening access to online Pact's Capacity Development Platform, RESPOND will promote the capacity development culture and opportunities among regional and national partners. RESPOND will also continue working with GF Principal Recipients and other national and international partners to adopt the use of such CD tools as OPI, Marketplace and others.

Emerging Needs and New Opportunities

Needs:

- ✓ As a result of armed conflict in the Eastern regions, there is an emerging need to cover with services internally displaced people - representatives of key populations;
- ✓ Humanitarian crisis in the conflict and post-conflict zones should be addressed;
- ✓ Dissolution of the HIV State Service & lack of strong & committed leadership in the MoH require a more targeted effort to incorporate HIV response into the MoH agenda;
- ✓ Corruption in procurement and delay with procurement of ARVs (current stock will last through the end of December 2014) may result in interruption of ART services.

Opportunities:

- ✓ Ukraine 2020 Reform Strategy announced by the President of Ukraine outlines 60 reforms; eight of them are identified as priority, including **healthcare reform;**
- ✓ Agreement on Ukraine's Association with EU contains certain articles (Chapter 22: Articles 426, 427, 428, 429) outlining GOU's **commitment** to implement health sector reform with shifting focus to primary care and **controlling the HIV/TB epidemic;**

- ✓ Public health approach and decentralization of services as key elements of reform efforts outlined by the Health Strategic Advisory Group set new tasks in terms of strengthening regional capacities in terms of data-driven and evidence-based decision-making, health management, etc.

In FY15 and upcoming years, RESPOND will build on its successes, address the needs and challenges, and will seek to utilize emerging opportunities.

Annexes

1. **Collaboration Framework of the All-Ukrainian Network of People Living with HIV and USAID RESPOND Project**
2. **Collaboration framework between Ukrainian Center for socially dangerous disease control (UCDC) and USAID RESPOND Project**
3. **Service Mapping for HIV Key Populations in Three Oblasts in Ukraine: Cherkasy, Poltava and Zaporizhzhya**
4. **Study "Models of Access to ARV Treatment for HIV Positive Patients of the Substitution Maintenance Program in Odessa Oblast"**
5. **Study "Evaluation of Needs in HIV Related Health, Prevention and Social Services for MSM and FSW in Dnipropetrovsk Oblast"**
6. **Results from Inventorying Ukraine's HIV prevention interventions and analyzing the level of evidence for these interventions**
7. **Customer Survey**
8. **Road Map on Integrating Gender into RESPOND**
9. **RESPOND Organogram**
10. **When Saying 'No' is Good for Your Health. RESPOND Success Story**