

HIV PLEDGE PROJECT

Penitentiary, Law Enforcement & Drug sectors
Government Efficiency in HIV response

QUARTERLY PROGRESS REPORT # 16

Reporting period:

July 1, 2015 – September 30, 2015

Cooperative Agreement No.:

AID-121-IO-11-00001

Submitted by:

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1. Context

Programme/Sub-programme	XCEA01 - Effective HIV/AIDS Prevention and Care among Vulnerable Groups in Central Asia and Eastern Europe
Project Title	Penitentiary, Law Enforcement and Drugs Sectors Government Efficiency in HIV response
Project Starting Date and Duration	1 October 2011; 5 years
Location	Ukraine
UNODC Regional / Country or Thematic Programme Outcome to which this programme/project directly contributes	3.3. HIV prevention and care (as related to injecting drug users, prison settings and trafficking in human beings)
Executing Agency	UNODC Programme Office in Ukraine
Government Counterparts	Ministry of Health, Ministry of Justice, Ministry of Interior, Ukrainian Centre on Control of Socially Dangerous Diseases, State Penitentiary Service and State Drugs Control Service.
Donor(s)	USAID/Ukraine

Project Summary

USAID/Ukraine is supporting the **HIV PLEDGE** project to reduce HIV transmission among most-at-risk populations (MARPs) through increased access to state-of-the-art HIV, AIDS and drug abuse services, including service delivery within pre-, in-, and post- detention settings. This will be achieved through advocacy and policy activities, strengthening the capacity of narcological services to integrate HIV/AIDS and substance abuse services, and expanding HIV, AIDS and drug dependence treatment services in detention and post-release settings. USAID's funding for these activities builds on and expands UNODC's existing work in Ukraine under its regional programme XCEA01 – "Effective HIV/AIDS prevention and care among vulnerable groups in Eastern Europe and Central Asia".

The **HIV PLEDGE** project works with national stakeholders and other donors to ensure cohesiveness with US-Ukraine Partnership Framework goals. These partners include the Ministries of Health, Justice, and Interior as well as State Services of Ukraine on Drug Control and on countering HIV and AIDS. This project complements and adds value to existing and forthcoming HIV/AIDS initiatives, including those supported by the Global Fund and the United States Government (USG). The programme builds upon achievements and lessons learned from current HIV/AIDS interventions.

The goal of the project is to build support among Ukrainian law enforcement officials and other key Government stakeholders for HIV/AIDS and drug dependence treatment services targeted MARPs, including service delivery within pre-, in-, and post- detention settings. This will be achieved through the following three project objectives: (i) create an environment supportive of evidence-informed and human-rights based HIV and drug dependence treatment programmes for MARPs; (ii) strengthen capacities of the State Penitentiary Service, public health and social services and civil society organizations to provide evidence-informed and human-rights based comprehensive HIV prevention, treatment and care services including drug dependence treatment in prison settings; and (iii) improve capacity of drug dependence treatment system (narcological services) to provide evidence-informed and human-right based integrated HIV prevention and drug treatment services.

2. Project objectives, outputs, main activities and achievement for the period under review

Objective 1: Create an environment supportive of evidence-informed and human-rights based

HIV/AIDS and drug dependence treatment programs among MARPs.

Output 1.1: Relevant GOU stakeholders have knowledge and capacity to support development of comprehensive HIV programs for people who use drugs.

The report on the focused research among police officers and students of police training institutions on their knowledge, attitude, practice and behaviour regarding HIV (KAPB survey) conducted by the project during last quarter is agreed with the Ministry of Internal Affairs and published in 500 copies. The project will use this publication to advocate improvements of training curricula for police and implement the instruction for police on how to interact with KPs, including PWIDs. The final aim of these activities is to contribute to increase the number of PWIDs referred by police to HIV prevention and treatment (ref.act.1.1.4).

Output 1.2: The law enforcement sectoral policy framework regarding HIV is developed in line with the international guidelines.

Advocacy efforts of the project resulted in development of Law Enforcement Action Plan supporting implementation of National HIV programme for 2014-2018 (Action Plan) and its approval by the Ministry of Internal Affairs in August 2015. The document was passed over to the Ministry's units for further implementation in 2016-2018 in the following areas:

- ensure active participation of law enforcement sector in the respective work groups in the area of HIV;
- development of normative legal acts regulating cross-sectoral coordination of HIV prevention and treatment activities;
- develop acts regulating the HIV related law enforcement activities in line with the implementation of the NAP 2014-2018;
- trainings, capacity development and retraining on HIV issues (with consideration of the gender approach) for lecturers of training institutions subordinated to the Ministry of Internal Affairs, and for staff of the internal affairs structural units during their professional training.

Approval of the Action Plan ensures sustainability of awareness raising activities for police on HIV and development of enabling normative framework to decriminalize drug use, overcome stigma and discrimination and, finally, improve access of PWIDs to HIV prevention and treatment services (ref. act. 1.2.3 a).

In order to empower OST personnel and improve their confidence and understanding of legal framework related to OST implementation the project developed and published the handbook for medical personnel of the OST programmes on legal and regulatory issues related to management of the use of controlled substances for medical purposes in August 2015 (ref. act 1.2.3 b). The handbook covers issues related to organizational aspects of methadone and buprenorphine usage for OST, legal aspects of the OST medicines turnover, particularities of work with OST patients, including people infected from HIV, TB and viral hepatitis, personal data security and prescription of OST medicines in Ukraine. It will be distributed among the staff of the OST programmes in November 2015 via network of the Ukrainian Centre for Socially Dangerous Diseases Control of the MoH of Ukraine (UCDC).

Outputs 1.3: Cooperative mechanisms between law enforcement, drug control, public health and civil society partners are developed and piloted in selected regions to increase effectiveness of HIV response at the local level.

On September 3-5, over 15 regional CSOs, which provide HIV related services to PWIDs participated in the training on how to establish and maintain effective partnership with law enforcement bodies in the context of provision of harm reduction services. As analysis of pre- and post- training questionnaire

shows, the participants improved their knowledge regarding the role of police in HIV prevention, tools and key messages to be used to advocate obtaining support of the police to scale-up harm reduction and OST programmes (ref. act. 1.3.3 a). It is the first training for CSOs aimed at piloting the training modules and international training guide in the harm reduction area, developed by the project (ref. act. 1.3.3 b). The project will use the feedback of the participants to modify training agenda and conduct such trainings for CSOs in the regions of Ukraine next year. It is expected that trainings will facilitate partnerships between CSOs and local police and HIV services providers in order to increase the number of PWIDs referred to HIV prevention and treatment services by police.

In order to facilitate partnerships between CSOs and local law enforcement and contribute to improving access of PWIDs to HIV prevention and treatment services, during August 2015, the project finalized and published:

- the training workshop guide “Improving Working Relationships and Collaboration with Police” (500 copies);
- the Case study publication on the good practices and models of cooperation between the law enforcement bodies and HIV-related services providers was finalized (500 copies);

Both publications will be disseminated among CSO partners and used for further trainings for CSOs in regions of Ukraine (ref. act. 1.3.3 b, c).

The PLEDGE launched regional pilot projects in August 2015 within the framework of the Grant Programme "Enhancing the role of police in response to HIV/AIDS among PWID in Ukraine"(ref. act. 1.3.4). The contracts were signed with NGO “Blago” (Kharkiv), “Light of Hope” (Poltava) and “Vertical” (Kyiv). The preparatory work was conducted in all pilot regions in August - September to launch referral schemes for police to refer PWID to HIV prevention and treatment services: the work groups were established on a local level and activities were agreed with local police and health care facilities. The trainings for police on applying referral schemes and directing PWIDs to HIV services providers is to commence in October-December 2015. It is expected that about 500 PWIDs will be referred by police to HIV prevention and treatment services by pilots’ completion in July 2015.

Output 1.4: HIV/AIDS and drugs related modules of the training curricula, manual and materials at the police training institutions are updated with the state-of-the-art evidences.

In close cooperation with the National Academy of Internal Affairs the project drafted the educational materials for police on how to interact with PWIDs and contribute to improving access of PWIDs to HIV prevention and treatment services. The materials cover issues of the police activity related to the growing supply and demand for illegal drugs, as well as support harm reduction programmes and cooperation with CSOs working in harm reduction and HIV treatment area. Specifically, the materials unveil principles of interaction with KPs, actions police officers should take to direct PWIDs to HIV prevention and cases of policing clients of ARV therapy and OST programmes. The educational materials will be piloted with support of the Ministry of Internal Affairs and used as the basis for relevant Ministry’s order to encourage police to facilitate access of PWIDs to HIV prevention and treatment services in community (ref. act. 1.4.3.).

To contribute to sustainability of the training programmes for police and compliance of training programmes with international standards and best practises, the project supported development of the training video for police and publication of *International Training Manual for Law Enforcement Officials on HIV Service Provision for People who Inject Drugs*. The draft scenarios for three training videos on occupational risks, harm reduction and drug use, as well as the role of police in HIV prevention among PWIDs are being developed (ref. act. 1.4.3). The training video production will be completed in December 2015. According to the signed Memorandum of Understanding, the project will deliver training videos to the National Academy of Internal Affairs to be widely used in educational process. The *Training Manual for Law Enforcement Officials on HIV Service Provision for People who*

Inject Drugs was translated and published in 500 copies (ref. act. 1.4.3). The manual sets a standard for improving training curricula and development of educational materials for police. The advanced copy of the manual was presented to National Academy of Internal Affairs at the beginning of 2015. The project will deliver the hard copies of training manual to the Ministry of Internal Affairs, National Academy of Internal Affairs, and disseminate among national and international organizations to be used for implementation of HIV related training programmes for police.

Main activities and achievements

Key Activities/ milestones	O	N	D	J	F	M	A	M	J	J	A	S	Status of activity
1.1.1. Hold national awareness raising workshop for police on harm reduction and OST programmes			X										Postponed. The workshop with OBNON was initially planned to be held in December 2014. Due to political situation & reform of the police the event was cancelled.
1.1.2. (a) Facilitate participation of Ukrainian law enforcement partners in international conferences on public health, drugs and HIV/AIDS issues: <i>3rd Regional Meeting on the Role of Law Enforcement in HIV response, Moldova</i>									X				Cancelled. The event was cancelled due to lack of funding for participants from other countries.
1.1.2. (b) Facilitate participation of Ukrainian law enforcement partners in international conferences on public health, drugs and HIV/AIDS issues: <i>Conference on law enforcement and public health, Amsterdam</i>	X												Completed. 4 representatives of Ukraine law enforcement and health sectors attended the conference.
1.1.2. (c) Facilitate participation of Ukrainian law enforcement partners in international conferences on public health, drugs and HIV/AIDS issues: <i>Side event on LE and HIV during CPCJ session in Vienna</i>							X						Participation of representatives of law enforcement system of Ukraine in the Side event on law enforcement and HIV during CPCJ session in Vienna was cancelled . Due to the organizational delays at HQ level the time for preparation to the event, including vetting procedure, required by USAID, was limited.
1.1.3. Organize study visit to the best practice countries/facilities and centres of excellence													Not planned for this year.
1.1.4. Knowledge, Attitude, Practices and Behaviour (KAPB) survey among law enforcement officials	X	X	X	X	X	X	X	X	X				Completed.
1.1.5. Printing, publishing and dissemination of KAPB survey report											X	X	Completed.
1.2.1. Facilitate Technical Working Group on HIV/AIDS and Law Enforcement		X			X			X			X		Completed as per 1 st semester plan.
1.2.2. Support integration of HIV/AIDS related issues into action plan for the implementation of the National Drug Strategy			X	X	X								Completed.
1.2.3. Support to develop sectoral action plan for the implementation of the 2014-2018 National AIDS Programme		X	X	X	X	X	X	X	X				Completed.
1.2.4. Develop, publish and disseminate specific guidelines, instructions			X	X	X	X	X	X	X	X			Completed.
1.3.1. Hold advocacy workshops in pilot regions (Kyiv, Poltava and Kharkiv)													Completed last year.
1.3.2. Conduct training workshops on OST and NSP for police staff in the pilot regions (Kyiv, Poltava and Kharkiv)					X	X	X	X	X	X	X	X	Completed.

1.3.3. Conduct training for NGOs on building and maintaining effective partnership with law enforcement agencies in the implementation of the community-based HIV prevention programmes among PWID	X	X	X	X	X	X	X	X	X	X	X	X	Completed.
1.3.4. Provide small-scale grants to NGOs for piloting effective collaboration & referral schemes involving law enforcement			X	X	X	X	X	X	X	X	X	X	In progress. Contracts with local NGOs are signed and the first transfer (\$30,000) is paid.
1.4.1. Undertake assessment of current curriculum and training programmes used at police training institution													Completed last year.
1.4.2. Facilitate technical workshops with police training institutions			X				X					X	Completed as per 1 st semester plan.
1.4.3. Support the police training institutions to update training modules and materials	X	X	X	X	X	X	X	X	X	X	X	X	In progress (educational materials are completed, scenario for training videos are developed).
1.4.4. (a) Support to integrate HIV education in professional development in-service training programmes for police - <i>ToT for police training institutions on HIV/AIDS</i>						X							Due to reform of the police the training was postponed to the next fiscal year.
1.4.4. (b) Support to integrate HIV education in professional development in-service training programmes for police - <i>ToTs for police P2P instructors</i>				X	X	X							Due to reform of the police the training was cancelled .

List of annexes

- Annex 1.1.4 Publication of report on KAPB survey (advance copy in MS Word, final layout will be submitted for clearance during W42-43);
- Annex 1.2.3 (a) Action Plan of MoIA to implement NAP 2014-2018;
- Annex 1.2.3 (b) Handbook for medical personnel of the OST programmes on legal and regulatory issues related to management of the use of controlled substances for medical purposes;
- Annex 1.3.3 (a) Training on how to establish and maintain effective partnership with law enforcement bodies in the context of harm reduction services provision (agenda, list of participants, report of trainers);
- Annex 1.3.3 (b) Training workshop guide “Improving Working Relationships and Collaboration with Police”;
- Annex 1.3.3 (c) the Case study publication on the good practices and models of cooperation between the law enforcement bodies and HIV-related services providers;
- Annex 1.3.4 Copies of small grants agreement and project descriptions;
- Annex 1.4.3. (a) Educational materials for police on how to interact with PWIDs and contribute to improving access of PWIDs to HIV prevention and treatment services;
- Annex 1.4.3 (b) The Training Manual for Law Enforcement Officials on HIV Service Provision for People who Inject Drugs;

Objective 2: Strengthen capacities of the State Penitentiary Service, public health and social services and civil society organizations to provide evidence-informed and human-rights based comprehensive HIV prevention, treatment and care services including drug dependence treatment in prison settings.

Output 2.1: Decision makers and prison management have adequate knowledge, attitudes and willingness to support comprehensive programs on HIV prevention and treatment in prison settings.

On July 9-10, 2015 the PLEDGE project conducted the HIV national conference “HEALTH CARE BEHIND THE BARS. HIV, TB and Other Socially Dangerous Diseases: Challenges, Opportunities and Development”. During this event the participants identified strategic steps needed to develop mechanisms for the implementation of effective response to HIV, TB and other socially dangerous diseases in the penitentiary system of Ukraine. Over 250 representatives took part in the conference. It was also attended by experts from Austria, Azerbaijan, Germany, Moldova, Slovenia, Switzerland, UK and USA. During the second day of the conference participants adopted a draft resolution with recommendations to improve morbidity and mortality issues in the state penitentiary system of Ukraine (please, see the draft resolution of the conference in annex 2.1.1).

The Conference also became a platform for professional discussions and dialogue on a wide range of issues related to sustainability, stability and effectiveness of the national response to HIV, TB and other socially dangerous disease in prison settings of Ukraine. Moreover, the participants used this opportunity to exchange good practices available on national and international levels, and to identify key priority areas for the development of the prison health care system in Ukraine. Approximately 300 copies of the “Prisons and Health” 2014 publication in Russian were disseminated during 2 days of this conference among penitentiary staff and partners of the SPSU.

Output 2.2: Policies, guidelines and protocols for management of health, HIV/TB, drug dependence treatment programs in prison settings are revised and updated for the implementation of a comprehensive package of HIV/AIDS services.

During the reporting period the local consultants of the PLEDGE project continued assessments on the HIV, drug dependence treatment and TB services in the penitentiary system and in the selected prison facilities: Kyiv pre-detention centre, Bila Tserkva Men Colony, Kharkiv Women Colony, Kremenchuk Colony for Adolescents. They presented preliminary assessment results of medical services quality with special focus on HIV, TB, and drug dependence among prisoners during the HIV national conference “HEALTH CARE BEHIND THE BARS. HIV/AIDS, TB and Other Socially Dangerous Diseases: Challenges, Opportunities and Development”. The consultants also prepared reports in the form of a step-by-step analysis pointing out gaps in the service provision and recommendations on how to fill them up (please, see draft reports on HIV services in annex 2.2.1(a)) and on drug dependence in annex 2.2.2(a)). During September 2015 the local consultants of the PLEDGE project also prepared drafts of the assessment reports with step-by-step recommendations on drug dependence and HIV services provision of 4 pilot prison settings. These reports were submitted to the head of department of health care and medical sanitary provision of SPSU and his staff for clearance. Their feedback is expected in October-November, 2015. According to the agreement with SPSU the reports will be disseminated among other experts for review. The staff of 4 pilot prison settings is also engaged in contributing to reviewing reports and recommendations in order to provide feedback, which is expected in October-November, 2015.

Ongoing advocacy efforts of the project with regard to the development of the comprehensive HIV response in prison settings resulted in decision of the SPSU management to establish inter-departmental working group to develop SPSU sectoral HIV Programme for 2015-2018. The working group of the SPSU was set up by the order of the head of the SPSU (Order # 21/OD-15 dated 19.01.2015 – attached as Annex 2.2.3.(a) and tasked to develop sectoral HIV programme for the prison system on the basis of the National AIDS Programme for 2014-2018. The PLEDGE Project provided technical assistance to the working group through national consultant, facilitation of regular meetings

and involvement of experts from SPSU and partner organizations to contribute to the development of the Sectoral HIV/AIDS Programme of the SPSU, ensure its alignment with international and national guidelines and recommendations. The SPSU sectoral HIV/AIDS Programme for 2015-2018 was developed and approved by the penitentiary board in July, 2015 (please, see the SPSU Board decision in annex 2.2.4(a) and approved final sectoral HIV/AIDS Programme in Annex 2.2.5(b)).

Based on the SPSU sectoral HIV/AIDS Programme for 2015-2018 the PLEDGE project provided technical assistance in development of template regional penitentiary HIV/AIDS programme for the SPSU regional departments. This template programme includes activities on cooperation with partner organizations, development of normative documents (SOPs on HIV prevention, HTC, HIV treatment), M&E, trainings etc. This draft programme was submitted for clearance to SPSU, feedback is expected in October-November, 2015. The draft oblast prisons programme will also be submitted to the members of the TWG and non-government experts after clearance by the head of the department of health care and medical sanitary provision of SPSU in order to ensure all-round revision of all programme items by civil society organizations, which will form cooperative infrastructure for provision of the comprehensive HIV interventions to people living and working in prisons.

Output 2.3: Comprehensive package of HIV prevention, treatment, care and support services including drug dependent treatment is piloted in selected prison facilities.

Based on the assessment report prepared by the international consultant and reviewed by the representatives of the 4 pilot prison settings in April, 2015, the PLEDGE project continued adaptation and clearance process of action plans for these pilot prison institutions. The local consultant of the PLEDGE project is working on HIV action plans in pilot prison settings. These plans are based on regional HIV/AIDS programme and recommendations of the international consultant's and pilot prison staff. In September 2015, the draft action plans were submitted to the heads of medical units of pilot regional departments of SPSU and the central department of health care and medical sanitary provision of SPSU. The action plans for 4 pilot prison settings are expected to be approved by the heads of pilot prison facilities in November-December, 2015.

Following assessments of needs and capacities of pilot penitentiary institutions made by above-mentioned international and local consultants the PLEDGE project developed a training plan which included trainings on HIV prevention, HTC, HIV treatment and HIV/TB for penitentiary staff.

During September 28-30, 25 medical, social workers and psychologists from the 4 pilot prisons, representatives of NGOs working with them, as well as the heads of medical units of pilot regional departments of SPSU from Kyiv, Poltava and Kharkiv regions, participated in a three day training organized within the framework of the PLEDGE project. The training on effective HIV information, education and communications strategies and evidence informed prevention interventions within prison settings was held in order to provide participants with necessary knowledge and tools to improve HIV prevention and care activities in these prisons. One local UNODC's expert and 2 foreign co-trainers Ms. Catherine Ritter (Switzerland) and Svitlana Doltu (Moldova) contributed to the training through presenting experiences on the comprehensive package of 15 key interventions used in Swiss and Moldova prison settings (please, see information about the training in annex 2.3.2.). During three days the participants have began developing the local protocols on HIV prevention activities in the pilot prisons, which should be finalized during October, 2015 with support of the trainers and will become the integral part of the action plans on HIV prevention and care in 4 selected pilot prison settings.

In September, 2015, the PLEDGE project signed a contract with the Training Centre of the Vinnitsa Regional AIDS Centre to conduct a 5-day training on ART and HIV/TB for medical penitentiary staff. The training will be conducted in November, 2015. The training on HTC is under development and planned for the next reporting period. These trainings and other related activities are aimed at improvement of the professional competencies of medical and non-medical staff of the pilot regions and their NGO partners on the issues of HTC and HIV interventions for prisoners.

Output 2.4: Updated training curricula, modules and training manuals on evidence-informed and human-rights-based comprehensive HIV prevention, treatment and care in prison settings are available and used by the training staff of the prison training schools

The PLEDGE project continues its cooperation with the Chernigiv Law College of the SPSU to establish the Resource Centre on HIV/AIDS within the Chernigiv Law College with purpose to strengthen methodological base for 5 existing penitentiary educational institutions of Ukraine (Institute of Penal Enforcement Service of Ukraine (Kyiv), Chernigiv Law College, Bila Tserkva College to Train Personnel, Dneprodzerzhinsk College to Train Personnel, Khmelnytskyi Post-Graduation Training Centre for Tutors). The equipment for the Resource Centre will be purchased in October, 2015 after completion of all procurement procedures. The activities of this centre will be carried out based on a cooperation agreement between the project and the College, training sessions' plan, regulative order and job description for a person in charge. The resource centre will be a methodical platform for conducting HIV related trainings for students of the penitentiary institutions (750 persons) and penitentiary staff (deputy heads of prisons, operative and drug control officers – approximately 120 persons per year) within the framework of advanced trainings. The centre will also provide other educational institutions with methodological materials on HIV interventions in prison system and continue ToT in 2016.

The PLEDGE project has engaged a local consultant in order to develop an educational video film for penitentiary staff on HIV, stigma and discrimination, occupational safety in the penitentiary system. The draft film scenario (please, see the scenario in English in annex 2.4.1.) was submitted to UNODC's offices in Kyiv and Vienna for consideration. The preliminary preparations for the film production already started in July, 2015 and the film is expected to be finished by the end of 2015.

Main activities and achievements

Key activities/ milestones	O	N	D	J	F	M	A	M	J	J	A	S	Status of activity
2.1.1. (a) Hold advocacy and awareness raising workshops with policy and decision makers: <i>Participation of 2 Ukrainian officials in the Global consultation on HIV and prisons in Vienna, Austria on 16-17 October</i>	X												Completed.
2.1.1. (b) Hold advocacy and awareness raising workshops with policy and decision makers: <i>1 advocacy workshop at national level and 3 workshops at regional levels</i>					X	X	X	X	X	X			Completed. National HIV & Prison conference was held on 9-10 July in Kyiv.
2.1.2. Provide sponsorships for participation in international conferences on HIV in prisons issues	X												Completed. 2 Ukrainian officials attended Health in Prison Conference in Ireland.
2.1.3. Organise study tours to Moldova for a group of SPSU representatives								X	X	X	X		Cancelled. The visit to Moldova was not supported by new SPSU authorities.
2.1.4. Focused research to feed advocacy (IBBS among inmates)					X	X	X	X	X	X	X	X	Delayed.
2.1.5. Develop, publish and disseminate advocacy materials	X	X	X	X	X	X	X	X	X	X			Completed "Prison and Health" in Russian is printed and available via UNODC's website
2.2.1. Facilitate TWG on HIV/AIDS and Prisons for coordination and enhancement of HIV policy in prisons		X	X		X		X					X	Completed. 6 meetings were conducted.
2.2.2. Provide technical assistance to improve legal & normative framework to scale-up HIV services in prison settings	X	X	X	X	X	X	X	X	X	X	X	X	In progress. Proposals developed by the project are under consideration of SPSU.
2.2.3. Provide technical assistance to update currently used guidelines & protocols for service provision in prison settings	X	X	X	X	X	X	X	X	X	X	X	X	In progress. 3 national consultants reviewed service provision policies and practices in prison facilities.

2.2.4. Provide technical assistance to improve M&E system for HIV programmes in prisons				X	X	X	X	X	X	X	X	X	X	X	In progress. 2 experts from SPSU participated in Treatment Cascade Training in Zagreb.
2.2.5. Develop, publish and disseminate specific normative document including sectoral HIV programme for prisons		X	X	X	X	X	X	X	X	X	X	X	X	X	Completed. 2 consultants developed sectoral HIV programme for SPSU, regional programme and action plans on HIV for pilot prison settings.
2.3.2. Conduct trainings for representatives of prisons, NGOs and community social services		X	X	X	X	X	X	X	X	X	X	X	X	X	In progress. The list of training events is agreed with SPSU. 1 training workshop on effective HIV prevention strategies in prisons was completed in September.
2.3.3. Develop comprehensive HIV/TB & drug treatment programme for piloting in the selected facilities	X	X	X	X	X	X	X	X	X	X	X	X	X	X	In progress. The draft HIV programmes are being finalized.
2.3.4. Support the implementation of the comprehensive programmes in the selected facilities				X	X	X	X	X	X	X	X	X	X	X	Postponed until the HIV programmes finalization.
2.3.5. Support a network of service providers with referral and case management mechanisms to ensure continuity of care pre- and post release stages							X	X	X	X	X	X	X	X	Cancelled. SPSU didn't manage to appoint representatives to take part in the workshop.
2.4.1. Undertake assessment of the training programmes used at the prison staff training institutions															Completed last year
2.4.2. Conduct technical workshops with prison training institution management and academic staff					X									X	In progress. The 2nd workshop is planned at the opening of the Resource Centre at Chernigiv Law College.
2.4.3. Support to the prison training institutions to update training programs	X	X	X	X	X	X	X	X	X	X	X	X	X	X	In progress. The Resource Centre is under procurement procedures. The film is in work.
2.4.4. Train the trainers from the prison training institutions									X	X	X	X	X	X	Delayed. The ToT was postponed until next FY
2.4.5. Twinning partnership with internationally recognised centres of excellence									X	X	X	X	X	X	Cancelled. The Swiss delegation has not supported its visit to Ukraine.

List of annexes:

- Annex 2.1.1 - The draft resolution of the conference HEALTH CARE BEHIND THE BARS. HIV/AIDS, TB and Other Socially Dangerous Diseases: Challenges, Opportunities and Development;
- Annex 2.2.1(a) - Interim Assessment Report (draft) of HIV services provision in selected prison facilities (Ukrainian and English);
- Annex 2.2.2(a) – Interim Assessment Report (draft) of drug dependence treatment services provision in selected prison facilities;
- Annex 2.2.3(a) - The order to create the working group on Sectoral HIV Programme for 2015-2018;
- Annex 2.2.4(a) – SPSU Board meeting resolution that approves sectoral HIV programme
- Annex 2.2.5(b) - The final SPSU Sectoral HIV Programme for 2015-2018;
- Annex 2.3.2 –HIV training event report;
- Annex 2.4.1 - The script of a training video for staff of State Penitentiary Service of Ukraine.

Objective 3: Improve capacity of substance use treatment system to provide evidence-informed and human-right based integrated HIV prevention and drug dependence treatment services.

Output 3.1: Policy, legal and normative frameworks, technical guidelines and operational standards are in place to integrate HIV related interventions into the drug dependence treatment service system (narcology system).

Upon MoH request and in cooperation with UNAIDS the PLEDGE project has contributed to the development of draft scenarios for sustainable provision of HIV related interventions for PWIDs after GFATM support is over. The scenarios were introduced at a number of meetings and finally presented to the MoH technical working group on sustainable country's response to TB and HIV epidemic, adopted for further development. Project's officers have become TWG's members and contributed to activities. The scenarios describe funding models from respective budgets in terms of type of services – medical (central budget) or social (local budget).

PLEDGE completed an assessment of compliance of national regulations/clinical guidelines on opiate dependence treatment with international recommendations. The assessment discovered that national regulations do not correspond to the international guidelines and need to be updated. Findings and recommendations were presented to the national stakeholders. In July 2015 the assessment report had been translated in English and published in Russian and English (annex 3.1.2(b)). The copies are being disseminated among USAID, MoH, MoIA, stakeholders, UN agency and medical Universities.

The recommendations mentioned above were used to advocate setting up a special TWG under the MoH to develop clinical guideline on opiate dependence treatment. MoH's order (annex 3.1.4) establishing TWG was issued in July 2015 and provided an opportunity for the project to engage in the clinical protocol development process by providing necessary assistance. The TWG did not start its work due to lack of commitment from TWG managers.

In July, 2015 MoH issued an instruction designating UCDC to lead the working group on OST scale up. While the project had been discussing practical aspects of the group operations and schedule of activities, in August MoH retracted the instruction and designated MoH Department on public health to lead the group but the work has not been launched and UCDC is still discussing with Mrs. Ostashko, head of the Department, modality of the group work.

MoH signed the updated order #200 on OST provision. Even though MoH submitted the order to Ministry of Justice for registration it was not promulgated yet and as of the end of September 2015 MoH's legal department was adapting the order to national legislation and MoJ's requirements. The updated order allows three days home take doses and stated mandatory urine drug tests of OST clients.

Output 3.2: Conceptual framework and model of integrated and comprehensive package of HIV prevention and drug dependence treatment services system is piloted and documented for further replication at national level.

In early July USAID monitoring mission lead by Mr. Charles Lerman visited Kharkiv to get acquainted with the project's achievements. On July 2, the project presented the results of the pilot project in narcology treatment. Presentation was attended by the senior management of the local city and oblast level healthcare departments, heads of AIDS, TB, and STI clinics, local WHO representatives and NGOs.

The project has supported development of SOPs for all pilot clinics and all of them are already approved (annex 3.2.5). In line with the new SOPs the job descriptions of the relevant narcology personnel were revised and updated.

The PLEDGE officers had meetings with local partners and management of local health care departments to highlight the importance of local funding allocation to supply consumables for OST provision, PITC, TB screening to sustain the comprehensive approach.

In Kharkiv 27 PWIDs were reached with counselling on TB and 101 PWIDs were screened and consulted on TB by Kharkiv Oblast Narcology Dispensary staff and by the TB doctor.

Staff of Kiev City narcological clinic “Socioterapia” was trained on: i) TB diagnosis and treatment, 13 persons; ii) VCT provision, 15 persons. Since July 2015 OST was provided to 468 clients, DOT TB was provided to 3 patients and 15 patients have received TB consultation in the pilot clinic, HIV testing & counselling (by rapid tests) was provided to 148 clients, 12 of them tested HIV positive and were directed to AIDS centers, 10 were taken into medical observation and 3 already receive ART. 1200 condoms were given out with related consultation. In order to ensure sustainable provision of HIV related services within the pilot project framework the PLEDGE project contributed to development of proposals related to the scale up of the services in regular narcology practice, which were already submitted to Kiev City Council Health commission for consideration in August, 2015.

On August 18th, the presentation of the midterm results of the pilot project in Kyiv by UNODC PO and Kiev City Drug Dependence Treatment Hospital “Sotsioterapia” took place in Rus Hotel, gathering the project staff and stakeholders, USAID representatives and potential partners of the project from regions of Ukraine. Since May, 2015 157 patients of “Sotsioterapia” were tested in line with new local protocols and 14 tested HIV positive. The meeting was held with participation of representatives of drug treatment facilities from Dnipropetrovsk, Mykolaiv, and Kherson with the purpose of scaling up the project to be launched in these regions thus going for national coverage.

In order to provide independent evaluation of the pilot project implementation and outcomes, using competitive approach the PLEDGE has engaged the international consultant. The consultant developed the work plan, interview questionnaire etc. Together with the project officer on HIV and drug dependence the consultant has conducted a field visit and a number of interviews with implementers, heads and staff of pilot clinics, heads of cooperating AIDS, TB, STI clinics and NGOs. During the interviews the partners have expressed their opinions on the project, actuality of integration of HIV related interventions into the drug dependence treatment services in Kyiv, Kharkiv and Poltava (Ukraine). The purpose of the evaluation was to document the achieved results and to assess whether such projects could be considered as a ‘good practice’ to be replicated in other regions of Ukraine or in other countries. The Draft of the report is expected early October and the final version will be developed by the end of October 2015.

Output 3.3: Updated narcology training curricula in line with the best international practices.

The project has discussed setting up of the resource centre for DDT students, technical specifications and location with KhMAPE rector and relevant staff. This centre will allow students of the KhMAPE to obtain the latest data on narcology issues, have access to distance learning programmes (will be developed) and teaching materials of the narcology chair, and provide properly managed knowledge quality control. The centre will be located in KhMAPE main building to ensure security measures of the equipment (annex 3.3.3.). All environment requirements are in accordance with UNDP Ukraine rules. The centre is expected to begin operating in November 2015.

During September 16-17 over 11 Heads of different branches of Kharkiv Medical Academy of Post Graduate Education (KhMAPE), 5 representatives of pre-education medical universities and post-graduate medical academies, above 30 interns and practicing addiction therapist from Kharkiv and other cities of Ukraine have participated in the two day workshop presenting UNODC's approach to integrate DDT and HIV prevention and treatment services in response to the HIV epidemic and its benefits; sharing approaches to update the DDT curricula in terms of HIV related services integration, and establishing cooperation to update the curricula of respective institutions. All the participants are now aware of the importance of the integrated services approach to HIV treatment and care, have the knowledge on their implementation in everyday patient handling routines, which should lead to the improvement of the results of treatment and care on local level (annex 3.3.4).

Main activities and achievements

Key activities/ milestones	O	N	D	J	F	M	A	M	J	J	A	S	Status of activity
3.1.1. Conduct stakeholders meeting to promote reforms in narcology services	X	X	X	X	X								Cancelled. Due to frequent changes in Chief Narcologist position and lack of clear vision with regard to Health Reform and particularly in narcology reforms the project activities were reoriented towards promoting only OST, HTC and ART.
3.1.2. (a) Provide technical support to improve legal and normative framework for the improved services – TA to develop concept and strategy for narcology reform	X	X	X	X	X	X							Cancelled. National consultant recruited to draft a strategy of DDT system reform concept note failed to deliver output as per the project expectations. Since the project is more focused on development of sustainability and quality of OST, VCT, and ART, this activity is cancelled.
3.1.2. (b) Provide technical support to improve legal and normative framework for the improved services – Assessment of compliance of the national guidelines and protocols on treatment of opioid dependence with international standards and recommendations				X	X	X	X	X	X				Completed. Assessment report is developed, printed and disseminated among stakeholders.
3.1.3. Facilitate the Technical Working Group on HIV/AIDS and Narcology		X			X			X				X	In progress. In July MoH issued the instruction designating UCDC to lead the group. In late August MoH retracted instruction and designated Department of public Health to manage the group work.
3.1.4. Develop specific technical guidelines and operational standards for integrated drug use & HIV prevention services		X	X	X	X	X	X	X	X	X	X	X	In progress. MoH issued the order establishing working group to develop national clinical guidelines on opioid dependence treatment. The group is not started yet.
3.1.5. Launch grant programme to support research projects in HIV/AIDS, MAT and harm reduction related areas	X	X	X	X	X	X							Cancelled. lack of applications on innovative research in the HIV and drug use field.
3.2.1. Undertake assessment of the needs and capacity of the selected narcology facilities													Completed last year
3.2.2. Conduct advocacy and coordination meetings in pilot regions		X		X		X		X		X		X	Completed. Meetings were conducted in each pilot regions to present pilot projects achievements
3.2.3. Organise study visit to Germany for representatives of the DDT facilities in Kyiv, Poltava and Kharkiv to facilitate development of comprehensive and integrated service provision models				X									Completed.
3.2.4. Organise and deliver series of thematic trainings for the staff of the narcology services		X										X	Completed. 18 staff of pilot DDT clinics were trained on “Work on motivation to initiate and retain in treatment” and “Effective counselling strategies through cognitive behavioural interventions – pragmatic and practical skills building” (Nov, 2014); 5 staff from Kharkiv narcology clinics had been trained on ART/TB in Sep’15.
3.2.5. Support selected institutions for piloting various models of integrated services	X	X	X	X	X	X	X	X	X	X	X	X	In progress. Pilot projects in Kharkiv and Poltava are finished. In Kiev the project is given no cost extension till December 2015.
3.2.6. Ensure appropriate monitoring, evaluation and documentation of the lessons learned, results and experience with pilot projects							X	X	X	X	X	X	In progress. Contract with the consultant signed, field missions accomplished in September 2015.

training HIV Prevention and Treatment Cascade Analysis (29.06.2015-03.07.2015) delivered by WHO Collaborating Centre for HIV Surveillance, Andrija Stampar School of Public Health, University of Zagreb School of Medicine (see <http://www.kvs.gov.ua/peniten/control/main/uk/publish/article/786188;jsessionid=A912EA7AA26AFB31D6D6942A00A43A7A>). During the training participants enhanced the skills in analysis of the HIV test–treat–retain cascade (“cascade”), which is used to determine the magnitude of the losses and gaps along the continuum of HIV care and to explore reasons for these losses. While preparing learning exercises Penitentiary representatives identified need in introduction reporting formats which allow to collect more accurate data regarding HTC and CD4 and viral load testing and analyze actual need in ART and clinical outcomes of ART for prisoners. Participants fully understood the overall aim of the cascade analysis which is to improve HIV services throughout the continuum of care, from diagnosis to achievement of viral suppression. It’s worth to admit that participants from penitentiary actively participated in the cascade exercise of Ukrainian group with regard to ART in population and PMTCT.

4. Major problems encountered and steps taken to solve them

In the situation of ongoing reformation of health care system and MoH structure PLEDGE continue its advocacy to revitalize enforcement of MoH order #592 of 22.08.2014 on improvement of drug dependence treatment system in Ukraine. It is important with regard to institutionalization of OST as clinical method in DDT in order to remove all barriers and preconditions towards scale up of OST.

The PLEDGE project has performed a number of activities to advocate setting up a special TWG under the MoH to develop clinical guideline on opiate dependence treatment. MoH’s order establishing TWG was issued in July 2015 and provided an opportunity for the project to engage in the clinical protocol development process by providing necessary assistance. The TWG did not start its work due to lack of commitment from TWG managers.

In July, 2015 MoH issued the order designating UCDC to lead the working group on OST scaling up. While the project had been discussing practical aspects of the group operations, in August MoH retracted the order and similar group was unexpectedly proposed under Ukrainian Medical & Monitoring Centre (UMMC) but as of the current moment no official commands of MoH got promulgated.

Due to the changes in the governance of SPSU the new management of the penitentiary system has reviewed its tactical plans several times, which made it impossible to accomplish some of the activities (e.g. study tours to Moldova for a group of SPSU representatives). The lack of transparency and overall closeness within penitentiary system of Ukraine made it very difficult for consultants and officers of the PLEDGE project to make timely and precise assessments of the current situation with HIV related issues within penitentiary system and provide proposals and action plans to SPSU to improve HIV related services provision. Excessive bureaucracy, lack of qualified personnel within penitentiary system of Ukraine led to overall overload of existing staff, which obstruct implementation of the project activities.

5. Staffing, management and coordination arrangements

The project has hired Mr. Rostyslav Gavrylov to fill in a position of the Advocacy and Communications Officer, SC, SB4 of UNODC in Ukraine. Mr. Gavrylov has started on August 1st, 2015. As of October, he started managing preparation and production of new publications for the project, ensuring proper alignment with branding and marking plan provisions. Mr. Gavrylov also started providing coordination support to media interactions during events conducted by the project, namely during the presentation of the midterm results of the Kyiv pilot project with the Kiev City Drug Dependence Treatment Hospital “Sotsioterapia” which took place in Rus Hotel on August 18th. He also started development of the information materials, which will include coverage of the PLEDGE project progress (namely newsletter, Facebook page), which are to be launched within the next month.