

QUARTERLY TECHNICAL REPORT



**Fourth Quarter Report – Third Year
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by

JSI Research & Training Institute, Inc. (JSI)

and partners:

**Abt Associates,
Boston University,
Howard University,
International HIV/AIDS Alliance, and
Populations Services International (PSI)**

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I. Introduction

During this quarter, the CAPACITY Chief of Party, Lev Khodakevich, departed the project and returned to his home in Moscow. During his tenure of the first three years of the project, Lev Khodakevich shaped the CAPACITY Project, leading the staff through many accomplishments. Importantly, Lev's focus was not only on our own staff and our own activities, but on building partnerships across the Central Asia region. Through these partnerships, resources for AIDS were shared, enabling more to be accomplished than would have been if each organization had worked alone.

Lev put much attention to strengthening the national efforts in their responses against the HIV epidemics in each country. In doing so, CAPACITY, under his leadership has been able to help countries to prioritize their efforts on HIV prevention and to reduce gaps and overlaps among multiple stakeholders. With Lev's departure, CAPACITY now has a new Chief of Party – David Hausner. To take this new position, David had to leave the position of Deputy Chief of Party. In this position, CAPACITY now has Anna Deryabina. With this new leadership, CAPACITY will continue to move full steam ahead with the efforts started under Lev Khodakevich, while at the same time expanding the work to address areas recommended in the midterm evaluation report.

II. Programmatic Progress

A. Regional

A.1. Strategy 1: Improve Stewardship of National HIV/AIDS Programs

Strengthening NACM Communications

As an effort to support National AIDS Coordinating Mechanisms in the CA countries CAPACITY initiated development of the HIV/AIDS Online Database for the use of all HIV stakeholders at the national and regional level. Currently CAPACITY completed the HIV Database development and is ready to test it. As agreed previously, the database will be administered by the seconded Communications specialists at the national level in Uzbekistan, Kazakhstan, Tajikistan and Kyrgyzstan. In Turkmenistan, the MOH supported the HIV Online database introduction and approved this activity in the CAPACITY work plan for project Year 4.

In the next Quarter CAPACITY is planning to present the Database to a wide range of national and international stakeholders and NGOs on the Partners Forum organized by CAAP. Special efforts will be given to encourage stakeholders to actively participate in the data collection and entering into database. The next step will be to start testing the database in the selected countries to identify areas for improvement, probably in Uzbekistan and Kazakhstan. Tajikistan supports the idea generally but NCC decided to wait for the test results. In Kyrgyzstan, due to the current situation with the CMCC restructuring, there is not yet CMCC secretariat, although CAPACITY plans to approach the MOH with the suggestion to provide Technical assistance to the new CMCC and its secretariat by seconding a communications specialist and introducing the HIV Database.

Legalization of the Three-Ones Principle and the NACMs

In a frame of collaborative activities with CAAP, CAPACITY has continued activity on “Development of package of recommendations on optimization of existing NACM model to strengthen National Stewardship” in Tajikistan. All developed documents were submitted to NCC Secretariat for discussion with local experts, including NCC regulations, TWG regulations, and local coordination committees regulations. No major comments or changes were required based on the review of the local experts on materials developed with CAPACITY technical support. The NCC Secretariat sent a thankful letter to CAPACITY for technical assistance in this area.

Next step: based on agreement with NCC Secretariat and CAAP the documents should be discussed at NCC TWG on National Policy and Legislation for transparency of the process and then submitted to Government by NCC Secretariat. The preliminary date of TWG meeting is the end of October. Then documents should be approved by Government. During next quarter, upon approval of NCC Constitution, NCC Operational Manual would be finalized.

A.2. Strategy 2: Educating and Empowering Vulnerable Populations

Operational and institutional development of NGOs and AIDS Service Organizations (ASO)

During the reporting period, CAPACITY started preparation for the second regional training on OD/ID for ASOs of all five CAR countries. This will be a ToT aimed at creating and training the national teams of trainers who will be able to provide follow-up oblast-level trainings, as well as ongoing technical assistance to ASOs. Preliminary negotiations have been held with International HIV/AIDS Alliance, who implemented first regional training on Project Design and Proposals Development in June 2006. In general, Alliance agreed to continue its collaboration with CAPACITY in ASOs' capacity building. Meantime, CAPACITY country offices distributed questionnaires among ASOs in their respective countries in order to assess their needs in training on OD/ID. Based on the results of the survey, the Agenda of TOT will be developed. TOT is planned for mid-December 2007 and follow-up oblast trainings in January-February 2008.

Technical Assistance to HIV prevention among ASOs

Technical assistance site visits were made to the 7 small scale HIV prevention projects funded by the CAAP project. Meetings were held with staff from the HIV prevention ASOs, local administration and health authorities, AIDS Centers partner NGOs, policlinics, Narcology, and Dermatovenerology dispensaries. Local stakeholders were briefed on the upcoming project, including its goals and objectives, and discussed issues related to the overall project implementation. Also, working meetings have been conducted with the key stakeholders in every model site aimed to discuss what needs to be done in order to start and implement the project, how referral services will be provided for vulnerable populations, how to staff the project, questions related to setting up Drop-in Centers, anticipated obstacles and ways to overcome them. As a result of the meetings, initial steps and major issues have been identified and possible ways of overcoming such issues have been discussed.

Improving access to Condoms through Social Marketing

During the life of the project the total number of condoms distributed was:

- Kazakhstan 5,302,715
- Kyrgyzstan: 1,370,151
- Tajikistan: 1,174,397
- Uzbekistan: 1,741,781
- **Total: 9,589,044**

A.3. Strategy 3: Improve the Quality of HIV/AIDS Services

TB and HIV Services Interaction

In Kazakhstan, CAPACITY met with KZ National TB Center Director and GF TB PIU/KZ to discuss a letter of agreement and cost-share budget for the activities on interaction of TB & HIV services in Kazakhstan, and the VLDP course on TB/HIV.

The main goal of the meeting was to identify the detailed work plan and budget of TB/HIV activities in the frame of collaboration of CAPACITY Project and National TB Center. GF

PIU (TB) Manager mentioned that they are at the stage of determination of specific working tasks and partners. KZ National TB Center Director noted that they were waiting for GF money transfer. CAPACITY confirmed its readiness to support financially and implement TB/HIV model in one site and to provide technical support in other pilot sites with financial support from GF. CAPACITY offered a step-by-step implementation of the model in Kazakhstan, based on the experience of this work in the other countries of the region. NTBC and GF PIU (TB) will take into account the CAPACITY TB/HIV experience among other partners while making decision on specific working tasks in the frame of GF Grant.

Next during the meeting, CAPACITY informed about MHS Virtual Leadership Development Program/VLDP (in the area of TB/HIV) opportunity for Kazakh specialists and provided NTBC Director with detailed information about the course modules. The idea of VLDP education was approved by National TB Center. One of the VLDP subgroups will be coordinated/lead by CAPACITY, another one by National TB Center. One of the many benefits of the VLDP is that participating teams actually learn how to work together more effectively. This helps them to address the real organizational challenge that they will take on during the VLDP as well as other challenges that they work on together.

In Tajikistan, during the reporting period, CAPACITY regional activities were mainly focused on monitoring (finalizing) of the TB/HIV model implementation in pilot site of TJ and making necessary adjustments. In addition, meeting with major stakeholders/ TWG meeting were held to discuss results, make analysis, develop recommendations, and discuss further collaboration in TB/HIV directions and efforts to promote model scaling up.

The purpose of the meetings was to discuss the progress and obstacles of TB/HIV model implementation in TJ. Monitoring Team presentation on the results of monitoring visits to pilot facilities demonstrated that interaction of TB/HIV structures was in place, the identified obstacles were discussed and necessary recommendations were developed.

In KG, UZ, and TJ, all planned TB-HIV models were implemented. During this quarter, reports on models implementation results in KG, UZ, and TJ were developed and provided to MoHs. CAPACITY is continuing negotiation to promote TB-HIV models scaling up in collaboration with different partners.

During several meetings with National and international partners to discuss issue of further TB and AIDS services interaction and TB/HIV model scale-up participants agreed on necessity of TB/HIV model experience expanding. The National partners are looking for partners' technical assistance in this direction. Since CAPACITY has the necessary experience it was requested the M&E activities prolongation in (CAPACITY) pilots.

During this quarter CAPACITY was providing technical assistance in development of M&E new (simplified) TB-HIV forms. The developed forms were discussed among TB-HIV M&E teams in the countries. After acceptance of final decision on new forms the M&E teams will conduct the quarterly M&E visits to the TB-HIV pilot facilities. During next quarter CAPACITY will develop M&E guideline.

In KG, CAPACITY is continuing on going collaboration in TB/HIV area in a frame of TWG. Because of CAPACITY TB-HIV experience and achievements CAPACITY was invited to be a secretariat for (national) TB/HIV TWG under Kyrgyz TB Coordination Committee.

VCT

CAPACITY is working with national stewards to improve protocols and government orders for VCT to make counseling a mandatory component of HIV diagnosis. In this process, CAPACITY will provide support to link trained counselors to the existing laboratory system of testing by first helping countries identify the responsible agency within the Ministry of Health for VCT, and second to develop VCT implementation models, where feasible. The objective will be to make VCT available to any person requesting the service, with special emphasis in geographic areas where HIV vulnerable populations are known to exist.

In the frame of above mentioned activities CAPACITY is planning to develop a VCT model for pilot sites of KG and KZ. This VCT model will be developed to improve the current status of VCT services, increase the availability of trained counselors, and increase access to VCT services, especially by vulnerable populations. During this quarter period, CAPACITY developed the TOR to hire a VCT consultant. The TOR was posted on CAPACITY website and distributed among interested agencies and partners. CAPACITY started gathering information about potential VCT consultants and negotiation on that issue.

A.4. Strategy 4: Improve Resource-Use to Integrate HIV/AIDS Services

Functionality, Financing, and Patient-flow Assessment

The report of the functionality, financing and patient-flow assessments in Karaganda oblast has been translated into Russian, with a view to have it disseminated among RAC and other relevant local partners.

B. Kazakhstan

B.1. Strategy 1: Improve Stewardship of National HIV/AIDS Programs

Communication Support to National Steward

This quarter, Communication Specialist conducted several meetings with RAC General Director and representatives of “Index Group”, IT Company to discuss the launch of RAC web site. “Index Group” developed new design of the web-site and is responsible for the hosting. Republican AIDS Center was asking Global Fund to provide its financial support in launching the web-site, however, GF did not respond. RAC General Director sent an official request to CAPACTIY to provide support. In August, under the CAPACITY Project’s technical support, Republican AIDS Center’s official newly developed web-site started functioning.

Seconded Staff

Communication Specialist

This quarter RAC started developing and distributing Monthly informational bulletin under the technical support and initiative of CAPACITY’s Seconded Communication Specialist. The edition is supposed to cover and inform about all events and activities on HIV/AIDS in Kazakhstan.

In September CAPACITY’s Seconded Communication Specialist, Saida Malayeva, left the Project to continue her education and get her Master’s degree in London. The announcement of vacant position of Communication Specialist was posted and 3 candidates applied for this position. Starting next quarter, October, new Communication Specialist will start her work in RAC.

NGO Liaison

This quarter NGO Specialist has been preparing to the Second OD/ID Training for ASO/NGOs. The pool of trainers with HIV/AIDS background and training skills was determined and they were sent application forms. At the same time NGO liaison provided needs assessment using the questionnaire that was distributed and filled by various NGOs/ASOs. On the basis of this questionnaire the analysis was done and sent to CAPACITY’s Regional OD/ID Training Coordinator (CAPACITY/KG Project Coordinator acting in this capacity for this regional activity).

B.2. Strategy 2: Educating and Empowering Vulnerable Populations

TA to Small Scale Prevention Projects

This quarter CAPACITY started providing its technical assistance in implementation of two small scale HIV prevention projects in Kazakhstan. In August, Financial Manager and Kazakhstan Country Director made initial site visits in Pavlodar and Almaty. This was done in order to meet and establish face-to-face relations with ASO financial staff, review operations functions of the ASOs, and provide TA to ASOs as they start their new HIV prevention projects. Most of the TA focused on assessing and recommending improvements to financial management, including general financial management procedures currently used by the ASO, assisting the ASO to understand donor financial management requirements and

guidelines, how to do budget revisions, etc. This visit resulted in assisting the ASOs to be financially compliant with their donor.

A second site visit, focusing on TA in technical and programmatic areas also took place this quarter. Country staff, along with the Regional Prevention Assistant met with staff from the Almaty ASO (Almaty AIDS Center) as well as its implementing partners, including Almaty district Law Enforcement Bodies, narcology dispensary, STI services and psychologist. At this meeting, the small scale HIV prevention project for Almaty was introduced, including general information about project and detailed aspects of the referral system with each organization were discussed. During the discussion some problems were identified, including:

- Absence of accommodation for drop-in center; and
- Absence of complete team of the outreach workers.

The location of the drop-in center will be defined when the situation with referral system to nearby medical facilities is cleared up. At the moment AIDS Center is in the process of searching for accommodation.

Interventions with Sex Workers

Almaty (Saina, Seiphullina and Auezova streets)

The size of the targeted sex worker population in Almaty has been revised from 3,000 (originally determined from Rapid Assessment Data) to 10,000 (new data from the City AIDS Center’s assessment). Almaty became the popular center for migrating sex workers from other provinces of Kazakhstan as well as from Uzbekistan and Kyrgyzstan. The original rapid assessment data did not include these migrating sex workers.

To date, 7,196 sex workers have been contacted (cumulative). 428 sex workers were contacted during the Quarter. There are now a total of 9 outreach workers targeting sex workers in Almaty on the Saina, Seiphullina and Auezova, Kurmangazu, Arbat streets and Hotels.

This quarter:

- Trainings: 154 sex workers during 59 trainings;
- Mini-educational sessions: 798 sex workers during 523 mini-sessions (Themes were HIV and AIDS, STI, Communication skills, Responsible behavior, and Condom Use)
- Free Condoms distributed: 14,394
- Brochures distributed: 1,700 (Themes were HIV and AIDS, STI, Condom is my protection, Assess Your Own Risk)

Pre- and post-test results of BCC among sex workers

Location	Pre Test %	Post Test %
Almaty	47	92

Condoms Availability

- Continued outreach around New Hot zones in Almaty (Kurmangazu –Kunayev St.) by recommendation of City AIDS Center.
- During the Quarter 18,000 condoms were disseminated around Hot Zones where sex workers are concentrated (Saina, Seiphullina, Auezova and Kurmangazu streets);

Interventions with Vulnerable Youth

Closing Almaty Capacity Youth Power Center

Operations under 1 year and 9 months Model of CAPACITY Youth Power Center located in Almaty, Rabochii Poselok down town district was completed. Model was started at November 1, 2005 when CYPC was officially opened by USAID.

The CYPC staff was emphasizing programmatic recommendations derived from the preliminary tracking evaluation, including:

- Promote consistent condom use with all partners;
- Emphasize the risk of HIV transmission from all partners, even partners who are well known;
- Challenge the belief that condom use reduces trust between partners
- Build the belief that using condoms demonstrates love and caring for one's sexual partner;
- Promote having condoms on hand at all times among sexually active vulnerable youth;
- Support vulnerable youth to develop skills to negotiate condoms and avoid heroin/opiates use;
- Improve availability of condoms in places where vulnerable youth socialize, live, learn, or work.

The target of Vulnerable Youth population at this site (Rabochii Poselok) totals 6,073 by data of the Police Department of the district and District Educational Department). During the period of model implementation, a total of 7,385 vulnerable youth (3,724 males; 3,481 females) were contacted, due to migration of youth from surrounding areas. Totally during the Model:

- 307 Trainings (45 Minutes Educational Sets on 4 HIV prevention titles) were conducted for 1,620 vulnerable youth;
- 2,275 Mini Sessions (15 Minutes Educational Risk Evaluation Sets) were conducted for 4,390 vulnerable youth;
- 1069 vulnerable youth visited Consulting Sessions of Psychologist and Gynecologist based in CYPC
- 2,856 vulnerable youth took part during various alternative activities available in CYPC such as Language and World Civilization Courses, Table Tennis, Break Dance, Guitar and Computer Clubs.

In addition, a strong referral system was established for STI Diagnosis and Testing with Friendly Cabinet of Clinics # 8 locating in Rabochi Poselok, Clinic # 10, Reproductive Health Center, Skin and Virology Institute, and City AIDS Center.

The following table summarizes the number and types of contacts resulting from the implementation of the CYPC model.

Number of contacts among vulnerable youth by type of contact and totals during 1 year and 9 months operations of CYPC in Almaty, Rabochii Poselok district (Note: All data are cumulative)

Quarter	Y2Q1	Y2Q2	Y2Q3	Y2Q4	Y3Q1	Y3Q2	Y3Q3	Y3Q4
Month	Nov-Dec	Jan-Mar	Apr-Jun	Jul-Sept	Oct-Dec	Jan-Mar	Apr-Jun	July
Year	2005	2006	2006	2006	2006	2007	2007	2007
TOTs	1	2	3	4	5		6	6
People Trained	22	47	62	74	89		101	101
Trainings	54	112	163	172	235	273	307	307
Trainings Participants	213	764	1,090	1,137	1,358	1,522	1,770	1,770
Mini Sessions	108	168	454	966	1,246	1,700	2,136	2,256
Mini Sessions participants	150	493	1,243	2,321	2,984	3,786	4,483	4,718
Consulting	30	209	393	580	748	878	1035	1069
Events		24	28	31	31	32	35	35
Events Participants		401	1,181	1,501	1,501	1,551	1,671	1,671
Alternatives Participants	125	1,352	1,711	2,039	2,338	2,580	2,787	2,856
Total # vulnerable youth contacted	509	1,894	2,972	4,215	5,256	6,171	7,087	7,385
% of vulnerable youth who were contacted	8%	31%	49%	69%	87%	102%	117%	122%

Extension of CAPACITY Youth Power Model to CAAP operations

Before the closure of the CAPACITY Youth Power Center, PSI applied for and won a regional grant from CAAP to extend the function of the YPC in Almaty. The implementation of the YPCs will be by a sub-grantee, the local NGO Zabota. The YPC is currently being opened in Turksibski district of Almaty and will receive technical assistance from CAPACITY.

Technical assistance to two new Youth Power Centers opened in City Student Clinic and City Clinic # 10

During the quarter, two new Youth Power Centers, based on CAPACITY Youth Power Model, were opened, under a new Memorandum of Understanding signed between PSI, City Students Clinic, and City polyclinic #10. These resource centers will work on HIV/STI prevention and drug addiction among vulnerable youth 15-24 years old. CAPACITY will conduct TOTs, trainings, mini-sessions, big events and different actions with help of volunteers and trainers from Youth friendly clinics.

City Student Clinic is located in Bostandykski district of Almaty for pre-drug injecting youth living in the societies where drugs are widely available. This initiative is the realization of the CYPC Sustainability Plan to transfer the Model to the City Student Clinic where UNICEF is currently implementing the Friendly Service Project. Technical Assistance to new YPCs in Almaty will be delivered under authority of City Health Department (UNICEF) and City Education Department as part of CAPACITY TA role. First TOT happened in September, 2007. The database is already installed and starting so that it will be possible to report Contact Coverage Data on the district activities, Pre and Post testing results, Alternative activities and Referrals in the site.

Almaty (Bostandyksi district, City Student Clinic based Resource Center # 1): 1 September 2007-31 September 2008

The Vulnerable Youth population at this site (Bostandyksi district, City Student Clinic) totals 65,861 by data of City Statistical Department. Clients of the clinic will be the main target, which averages about 10,000 vulnerable youth annually. Thus, 10,000 will be the contact coverage goal in this program. The program duration is 12 month, and to date 986 vulnerable youth have been contacted. This Quarter:

- Peer education trainings: 986 (405 male, 579 female) vulnerable youth during 342 trainings
- Alternate activities: PSI installed sports equipment (tennis table) at the Clinic's Health Center. The information on the Health Center services was provided to youth announcing it at district level. We expect that Health Center will start the provision of the alternatives in October
- Peer Outreach: In order to ensure regular contact with our target group in sites where they are most often found, CYPC Peer Outreach Workers will make contact with the target group in non-traditional sites such as parks, cafés, discos, and on the streets. These brief, targeted contacts are designed to improve awareness about HIV/AIDS/STI issues, personal risk assessment, ways of protection and condom use, linkage between HIV/AIDS and injecting drug use and availability of referral system to free VCT, STI treatment, social services and alternatives.
- Youth Friendly Counseling: Consultants were trained on UIC coding system. As it was agreed the information of collected UICs will be inputted weekly to the database. Negotiations are continuing to help the clinic administration to organize the counseling schedule in an appropriate and friendly regime and to code and input service data into the database.

Interventions with vulnerable youth: Almaty (Bostandyksi district, City Clinic #10 based Resource Center # 2): 1 September 2007-31 September 2008

The Vulnerable Youth population at this site (Bostandyksi district, City Clinic #10) totals 34,141 by data of City Statistical Board. College and university students will be the main target. The contact coverage goal of this program will be 3,400. The program duration is 12 month, and to date 75 vulnerable youth have been contacted. This Quarter:

- Peer education trainings: 75 (35 male, 40 female) vulnerable youth during 3 trainings
- Peer Outreach: In order to ensure regular contact with our target group in sites where they are most often found, CYPC Peer Outreach Workers will make contact with the target group in non-traditional sites such as parks, cafés, discos, and on the streets. These brief, targeted contacts are designed to improve awareness about HIV/AIDS/STI issues, personal risk assessment, ways of protection and condom use, linkage between HIV/AIDS and injecting drug use and availability of referral system to free VCT, STI treatment, social services and alternatives.
- Youth Friendly Counseling: The specialists were trained how to use UIC coding system to track number of people served during the consulting services under the CYPC # 2 program.

Non-CYPC interventions with Vulnerable Youth (BCC component of CSM)

Almaty city: Almalinski, Jetysuiski, Turksibski districts

The target vulnerable youth population in these site totals 91,716 (City Statistic State Board on quantity of vulnerable youth at age 15-24 living in mentioned administrative districts).

These sites were proposed by Republican AIDS Center based on HIV prevalence rates, drug availability, and social and economic environment. To date, 40,886 (19,980 males, 20,906 females) vulnerable youth were contacted (cumulative). This quarter:

- Peer trainings: 1,061 ARY (445 male, 619 female) vulnerable youth during 45 peer trainings
- Mini-sessions: 2,881 vulnerable youth during 610 Mini Sessions
- Free Condoms distribution: 2,832 condoms
- Brochures distribution: 1,150 brochures

Karaganda city:

The target vulnerable youth population in this site totals 15,619 (City Statistic State Board on quantity of vulnerable youth at age 15-24 living in mentioned administrative districts).

Project to date, NGO Saur Pak trained by PSI educational modules contacted 3,481 vulnerable youth in the site (cumulative). This quarter:

- Mini-sessions: 573 (317 males, 256 females) vulnerable youth during 80 mini sessions

Semipalatinsk city:

The target vulnerable youth population in this site totals 13,970 (City Statistic State Board on quantity of ARY at age 15-24 living in 1 administrative district). Project to date, NGO Istok trained by PSI educational modules contacted 1,344 vulnerable youth in the site (cumulative). This quarter:

- Peer trainings: 18 (13 female, 5 male) vulnerable youth during 1 peer trainings

Increasing access to Condoms through Social Marketing

- 10,182 units of condoms were disseminated during various events and educational activities;
- 608,862 condoms were disseminated through traditional channels (pharmacies and shops), hot zone distribution and free distribution during educational activities;
- 18,000 units of condoms were disseminated around Hot Zone Streets targeting sex workers and clients of sex workers (Saina and Seiphullina streets, Almaty, Kurmangazy-Kunayeva Street (new spot));

B.3. Strategy 3: Improve the Quality of HIV/AIDS Services

TB/HIV

In August CAPACITY met with National TB Center Director and Global Fund PIU (TB) to discuss letter of agreement and cost-share budget for the activities on interaction of TB and HIV services in Kazakhstan. The main goal of the meeting was to identify the detailed work plan and budget of TB/HIV activities in the frame of collaboration of the CAPACITY Project. GF PIU (TB) Manager Arman Toktabayaynov mentioned that they are at the stage of determination of specific working tasks and partners and NTBC is waiting for GF money transfer. CAPACITY offered a step-by-step implementation of the model in Kazakhstan.

At this meeting it was also said about VLDP education in the area of TB/HIV interaction and leadership development. The idea of distance learning was of high interest and was approved by NTBC Director. During this quarter two multidiscipline groups were formed including both TB and AIDS services. The beginning of the course is scheduled for October, 2007 and till the end of the courses CAPACITY will be coordinating this activity.

ARVT

At the beginning of August CAPACITY met with Global Fund PIU in order to plan joint activities in the frame of ARVT adherence. The essence of this activity is oblast monitoring visits on ARV therapy and adherence to it. It was planned to conduct monitoring visits to 5 oblasts where ARV treatment has been started long ago in order to monitor adherence to ARVT. This activity is to be provided in collaboration with GF PIU, RAC and Kazakhstan PLHIV Association. The main source for funding of this activity was GF. During the meeting participants discussed the schedule, dates and responsibilities distribution. They also touched new WHO HIV treatment protocols for European Region.

During this quarter Kazakhstan Country Director together with Global Fund PIU Consultant on treatment and President of National Association of PLHIV made a series of monitoring visits to South Kazakhstan, East Kazakhstan, Karaganda, Kostanay and Pavlodar oblasts on ARVT adherence. The main goal of these visits was to define main obstacles to ARVT adherence and make recommendation on overcoming them. During these visits the monitoring group met with oblast AIDS Centers and NGOs working in the field of HIV/AIDS prevention or ARV therapy adherence. During the visits it was revealed that in some oblasts there are no organizations working on ARVT adherence; most organizations' work is directed to HIV prevention among vulnerable groups. However, they have a great willingness and capacity to work in the direction of adherence. Monitoring group came to the decision that NGOs need some training and orientation. During the meetings the main problems and obstacles to the ARVT adherence in the work of NGOs and AIDS Centers were defined. At the end of the visits monitoring group developed recommendations on improving the work and overcoming adherence obstacles.

VCT

In September CAPACITY participated in the National Conference on “Actual Issues of HIV testing and treatment (in the frame of strategy realization for improvement of access to prevention, treatment and continuum care for HIV-infected)” with participation of representative from Ministry of Health, UNAIDS, Ministry of Justice, CDC, Republican AIDS Center, Almaty Medical Post-graduate Institute, Pharmacy Committee and CAPACITY. Issues of VCT, ARV therapy, epidemiological situation and new WHO Europe treatment protocols were covered at this meeting. CAPACITY participated in this conference aiming at mathematical model and cost effectiveness and expediency of HIV testing of pregnant women and prison inmates.

To take a decision on an expediency to test prisoners for HIV on a mandatory basis it is useful to develop a mathematical model showing whether that measure will be workable. The question is how many people could be infected during definite period of time in a closed community exposing unsafe sexual and (or) injecting behaviors by only one person with HIV. Another useful mathematical solution is a projection of what share of pregnant women could be identified as HIV positive through testing of persons seeking for health service at

reproductive health settings from the expected numbers of HIV positive pregnant women basing on a concrete situation with the spread of HIV. The third useful tool is a model to estimate cost effectiveness of identification of one HIV case among pregnant women applying to reproductive health settings through different approaches to HIV testing depending on HIV prevalence in accordance with results of sentinel surveillance. CAPACITY hired a consultant who was to build the appropriate mathematical models and to accomplish tasks using the data of the Republican Centre for HIV prevention and Control and closely cooperating with its specialists.

At the conference, during the work in small groups, Kazakhstan Country Director made a presentation on mathematical model of HIV testing. The presentation raised a great interest. The main purpose of presenting this information was to show mathematical basing of expediency and cost effectiveness of voluntary HIV testing of pregnant women and prison inmates in comparison with mandatory one. At the end of the meeting recommendations to the resolution were developed. One of the points of recommendations was to review HIV testing approaches, create Working group on HIV testing and ARV therapy.

Referral System on VCT (Demand Creation, Moving Labs and Referral system to the City AIDS Center)

Within the context of HIV prevention work among sex workers, 102 sex workers were referred to and actually visited the friendly cabinet in the City AIDS Centre, 15 sex workers were referred to and actually visited the friendly cabinet in # 9 City Polyclinics, and 4 sex workers were referred to and actually visited the friendly cabinet in # 8 City Polyclinic. In addition, 1 Mobile VCT was organized with the help of the City AIDS Centre and Virology Institute.

Starting from September, outreach workers participated in City Sentinel Surveillance assisting City AIDS Center in that activity.

Referral System on STI diagnosis and treatment

As part of the prevention work with sex workers, 342 sex workers were referred to the friendly cabinets in the Republican Virology Institute and to City AIDS Center and actually visited them. The results of diagnostics were: Syphilis – 7; Trichomoniasis – 43, Gonorrhea - 18, Chlamydia – 84, Candida - 47. All beneficiaries started treatment free of charge.

B.4. Strategy 4: Improve Resource-Use to Integrate HIV/AIDS Services

Social Marketing of FAVORITE condoms through free distribution in polyclinics and Friendly Cabinets

Partner Agreements were signed with Friendly Cabinets of Clinic #10 and City Student Clinic on further free distribution of FAVORITE condoms. In September 240 FAVORITE condoms were provided to each Clinic.

C. Kyrgyzstan

C.1. Strategy 1: Improve Stewardship of National HIV/AIDS Programs

Seconded Staff

During this quarter the structure of the Country Coordination Mechanism has been restructured. This restructuring process has brought changes in authority and presence of the AIDS Unit for coordination and monitoring of HIV/AIDS programs within the Prime Minister office. The new order has been signed by Prime Minister Office on the structure of a new coordination mechanism and a new regulation has been issued. According to the new order Ministry of Health is in charge to coordinate and manage all the issues related to HIV. In light of all above mentioned changes, AIDS Unit was proposed to move under the MoH supervision and act as secretariat for a newly structured country coordination mechanism which is envisaged to deal not only with HIV/AIDS issues but other infectious disease as well.

As a result of these changes CAPACITY had a series of meetings, discussions with UNDP, USAID and other national partners to discuss the issue regarding the secondment of three specialists within a new coordination mechanism.

M&E specialist

According to the regulation on National System of M&E of the State HIV/AIDS program, the M&E system will be taken over by National Statistics Committee in order to sustain this system. Therefore, CAPACITY in collaboration with UNDP HIV/AIDS program achieved tripartite agreement with National Statistic Committee on seconding M&E specialist to the department on social issues up until the end of 2008. While the formal agreement (MoU) is under the process, UNDP has provided NSC with computers and other equipment, and a working space for M&E specialist has been provided by NSC. In the meantime, M&E specialist has conducted the regular meeting of M&E technical sector under the former CMCC. The specialist also passed the certified international training held in Issyk-kul, organized by School of Public Health in Croatia, entitled "M&E in Practice".

Communication specialist

During the reporting period, the specialist has been coordinating and wrapped up the 1st cycle of distant learning course aimed at training of non-medical specialist throughout Kyrgyzstan. Because of current changes with AIDS Unit the specialist is planning to be placed in a new secretariat under the MoH. A new SOW will be developed right after the negotiation with a MoH Deputy who is in charge to coordinate this secretariat.

NGO liaison

The NGO liaison continues his work as a member of national TWG to discuss the issues relating to national list of drugs, psychotropic substances and precursors. The issues on his role in the new environment is still under the discussion with other partners.

Coordination with Donor and Key Partners

Few policy dialogues have been held by CAPACITY country office with MoH and other partners and Country USAID office provided strong support in these efforts as well. Specifically, there have been advocated issue relating HIV/TB extension policy to other parts

of the country with the Head of Prevention and Treatment Department of MoH; technical support that CAPACITY can provide through its seconded staff in a new context with USAID, MoH and UNDP and issues relating to HIV communications database that CAPACITY developed and is planning to introduce in the region and country level as well.

CAPACITY staff took part in few meetings organized by GFATM portfolio manager Mr. Chernyavskiy during his visit to Bishkek. The manager has briefed the partners in the country on new financing mechanisms and to hear the donors as well as other international programs opinion on restructuring of CMCC in Kyrgyzstan.

CAPACITY took part at the partners' workshop aimed at discussion of IDU indicators proposed by UNAIDS/WHO/UNODC and adapting them into the National System of M&E of the State Program on HIV/AIDS.

C.2. Strategy 2: Educating and Empowering Vulnerable Populations

TA to Small Scale Prevention Projects

In August, country office team implemented initial visit to Osh in order to assess financial and programmatic capacity of partner NGOs "Podruga" and "Parents against Drugs" who will be implementing small scale prevention projects in Osh and Karasuu, as well as discuss possible technical assistance from the side of CAPACITY. As a result, it was agreed that CAPACITY will provide TA in financial and program management, as well as in monitoring of project implementation.

Capacity Building of ASOs

In early September, country office initiated meeting with CARHAP's Regional Capacity Building Coordinator and National Coordinator for Kyrgyzstan in order to coordinate efforts in capacity building of ASOs. As a result, it was agreed to exchange the plans in terms of trainings and TA to be implemented by two projects and coordinate further activities in order to avoid overlap. The same meetings will be implemented with other partners that provide capacity building to ASOs in the country.

Interventions with Vulnerable Youth

Closing of Bishkek Capacity Youth Power Center

Operations under 1 year 6 month Model of CAPACITY Youth Power Center located in Bishkek, Leninski district down town district was completed. Model was started at February 1, 2006.

The CYPC staff was emphasizing programmatic recommendations derived from the preliminary tracking evaluation, including:

- Promote consistent condom use with all partners;
- Emphasize the ways of HIV prevention and ways of HIV transmission;
- Challenge the belief that "sexual partner does not like condoms;"
- Promote that using condoms demonstrates love and caring for one's sexual partner;
- Improve availability of condoms for vulnerable youth in certain places;
- Promote having condoms on hand at all times among sexually active vulnerable youth;

- Support vulnerable youth developing skills to negotiate condom use and avoid heroin/opiates use and injecting drugs; and
- Stimulate intention of vulnerable youth to use condoms the next time they will have sex for HIV prevention.

The end line tracking survey was conducted in June-July 2007, and the results are under the process of analyzing of data and will be reported later.

The target of Vulnerable Youth population at this site (Leninski) totals 36,983 by data of the Police Department of the district and District Educational Department). During the period of model implementation, a total of 31,436 (15,509 males, 15,927 females) vulnerable youth were contacted, due to migration of youth from surrounding areas. Totally during the Model:

- 9,471 Trainings (45 Minutes Educational Sets on 4 HIV prevention titles) were conducted for 19,523 vulnerable youth;
- 1,274 Mini Sessions (15 Minutes Educational Risk Evaluation Sets) were conducted for 19,951 vulnerable youth;
- 425 vulnerable youth visited Consulting Sessions of Psychologist based in CYPC; and
- 3,453 vulnerable youth took part during various alternative activities available in CYPC such as Language and World Civilization Courses, Table Tennis, Break Dance, Guitar and Computer Clubs.

The following table summarizes the number and types of contacts resulting from the implementation of the CYPC model.

Number of contacts among vulnerable youth by type of contact and totals during 1 year and 6 months operations of CYPC in Bishkek, Leninski district

Quarter	Y2Q2	Y2Q3	Y2Q4	Y3Q1	Y3Q2	Y3Q3	Y3Q4	
Month	Feb-Mar	Apr-Jun	Jul-Sep	Oct-Dec	Jan-Mar	Apr-Jun	Jul	TOTAL
Year	2006	2006	2006	2006	2007	2007	2007	
TOTs	2	0	1	0	0	1	0	4
People Trained	31	0	18	0	0	9	0	58
Trainings	440	1,435	1,166	2,069	1,763	2,062	536	9,471
Trainings Participants	1,080	2,998	2,796	3,908	3,880	3,973	888	19,523
Mini Sessions	107	208	137	274	145	352	51	1,274
Mini Sessions participants	963	2,925	2,149	5,146	4,162	3,951	655	19,951
Consulting	0	81	53	87	112	70	22	425
Events	2	3	6	27	4	13	2	57
Events Participants	109	463	373	3,199	466	1,205	301	6,116
Alternatives Participants	114	543	233	908	730	801	124	3,453
Total # vulnerable youth contacted	1,935	5,195	3,778	7,280	6,772	5,533	943	31,436
% of vulnerable youth who were contacted	5%	19%	29%	49%	67%	83%	85%	85%

Extension of CAPACITY Youth Power Model to CAAP operations

Before the closure of the CAPACITY Youth Power Center, PSI applied for and won a regional grant from CAAP to extend the function of the YPC in Almaty. The implementation of the YPCs will be by a sub-grantee, the local NGO Partners' Net. The YPC is currently being opened in October district of Bishkek and will receive technical assistance from CAPACITY.

Technical assistance to new Youth Power Center opened based on NGO Intergelpo“: Youth Power Center “INTERGELPO”

The opening of the new Youth Power Center based on CAPACITY Youth Power Model “Intergelpo” was in line with the Sustainability Plan. The Center was opened following an Agreement signed between PSI and NGO Intergelpo, which targets vulnerable youth living in vulnerable district of Bishkek knowing as “Hot Spot” called “Park Fuchika”. This hot spot is located in the “bazaar” district of Bishkek. Most migrants at age 15-24 who work at bazaars on seasonable basis live here in social dorms. Drugs are widely available and sex work is very popular among inhabitants of the district.

NGO “Intergelpo” targets vulnerable youth as pre-drug injectors living in the societies where drugs are widely available. Fifteen volunteers trained with CAPACITY educational manuals will implement the model in the target site. The database for monitoring contacts is already installed and NGO “Intergelpo” will report to CAPACITY the Contact Coverage Data, Pre and Post testing results, Alternative activities and Referral in the site.

Technical Assistance to the Intergelpo Youth Power Center will provided from CAPACITY staff during the period of September 1,2007 – September 1,2008. A monitoring and evaluation system has been established, and educational trainings (TOT), IEC materials, and condoms have been provided. VCT referrals are also made for YPC participants through a voucher system.

Bishkek (District of Park Fuchik, NGO “Intergelpo” based Youth Power Center # 2): 1 September 2007-31 September 2008

The Vulnerable Youth population at this site (District of Park Fuchik, NGO “Intergelpo”) totals 4,000 by data of the District Department of Education. District college and university students will be the main target. The contact coverage goal of this program will be 2,400. The program duration is 12 month, and to date 412 (176 males, 236 females) vulnerable youth have been contacted. This Quarter:

- TOT for Volunteers: 15 volunteers trained in TOT
- Peer education trainings: 180 (79-male, 101-female) vulnerable youth during 55 trainings
- Peer Outreach: To ensure regular contact with our target group in sites where they are most often found, CYPC Peer Outreach Workers will make contact with the target group in non-traditional sites such as parks, cafés, discos, and on the streets. These brief, targeted contacts are designed to improve at-risk youth awareness about the HIV/AIDS/STI issues, personal risk assessment, ways of protection and condom use, linkage between HIV/AIDS and injecting drug use and availability of referral system to free VCT, STI treatment, social services and alternatives.
- Mini-sessions: 198 (85 male, 113 female) vulnerable youth during 26 mini sessions
- Youth Friendly Counseling: 80 referral vouchers to the friendly cabinet established by City AIDS Center were distributed among vulnerable youth during mini-sessions and outreach work. Clients of this cabinet can go through STI diagnosis and treatment, as well as VCT for HIV.

Non-CYPC interventions focused on Vulnerable Youth (BCC component of CSM)

Bishkek city: Leninski, Sverdlovski, Pervomaiski, administrative districts

The target vulnerable youth population in these site totals 92,388 (City Statistic State Board on quantity of vulnerable youth at age 15-24 living in mentioned administrative districts). Project to date, 49,463 vulnerable youth were contacted in the site (cumulative). This quarter:

- Peer education trainings: 4,084 (1,803 males; 2,281 females) vulnerable youth during 1,848 peer trainings
- Mini-sessions: 3,431 (1,590 males; 1,841 females) vulnerable youth during 227 mini-sessions
- Events: 156 (91 males; 65 females) vulnerable youth during 2 events
- Free Condoms distributed: 2,346

Pre- and post-test results of BCC among vulnerable youth

Location	Pre Test %	Post Test %
Bishkek	68	91

Increasing access to Condoms through Social Marketing

In Kyrgyzstan, the warehouse is recently out of stock of condoms. Condoms delivered to the region in January 2006 in the amount of 25,586 are already distributed. New condoms which delivered to the region in September 2006 in the amount of 27,778 gross were under the process of re-branding under the Cost Share funds of Asian Development Bank HIV prevention program.

In July 2007, 568,995 condoms were delivered to Kyrgyzstan. Exemption from entry taxes was applied for with the Customs Authority, but the exemption letter has not yet been delivered.

- 6,006 units of condoms were disseminated during various events and educational activities
- 39,246 condoms were disseminated through traditional channels (pharmacies and shops), hot zone distribution and free distribution during educational activities
- 24,345 units of condoms were disseminated around Hot Zone Streets

C.3. Strategy 3: Improve the Quality of HIV/AIDS Services

TB/HIV

During the reporting period, country office continued its efforts in promoting scale-up of HIV/TB model through series of meetings with national authorities (MoH) and international partners (AFEW). Country team under the regional supervision finalized and submitted to the Ministries of Health and Justice a final report on implementation of HIV/TB model in Chui Oblast of Kyrgyzstan. The report, in particular, includes review of model implementation process, M&E results, challenges and ways of their overcoming, as well as whole package of documents developed during the piloting period, as an attachment. The report has been also submitted to other interested parties and placed on the CAPACITY's website for common usage.

In August, HIV/TB TWG established in the framework of HIV/TB model implementation has been merged with HIV/TB TWG within the Coordination Council on TB under the Ministries of Health and Justice. Given recognition of the CAPACITY's expertise in the area of HIV/TB, TWG members unanimously selected CAPACITY as the TWG Secretariat. CAPACITY sees this assignment as another opportunity to promote HIV/TB model.

After official completion of HIV/TB pilot in June 2007, CAPACITY continues its technical assistance in area of HIV/TB M&E and capacity building. CAPACITY supported publication of the poster on TB detection and treatment in HIV-infected patients developed by members of national team of trainers. The posters have been distributed among PHC, HIV and TB facilities of Chui oblast, including penitentiary establishments. There is a strong belief that such kind of materials will help to health workers to maintain their knowledge on HIV/TB gained during the trainings in the framework of model implementation. Very soon, trainers' team will develop another poster on detection and treatment of HIV in TB patients.

VCT

After a short recess, CAPACITY continued its efforts in identifying the needs for its contribution for development of VCT in the country. Country team met with Deputy Director of RAC who facilitated short-term piloting of different VCT models in some parts of the country. It was stated that due to Summer time and short period given for piloting, it was impossible to achieve visible results. Taking into account this kind of deadlock situation and keeping its obligation in terms of VCT development, CAPACITY has decided to develop and pilot a VCT model using international best practice. For this, country team started search and negotiations with overseas experts in VCT.

Referral System on VCT (Demand Creation, Moving Labs and Referral system to City AIDS Center)

Agreements were signed for the establishment of a Joint Referral system between outreach workers and AIDS Center of Bishkek and the City Student Clinic. Referral will be organized to deliver vulnerable youth of Leninski, Pervomaiski and Sverdlovski districts and also vulnerable living in Park Fuchik district of Bishkek friendly VCT and psychological services. The work will be organized using a voucher system which will be provided to target populations during the outreach in the hot spots. In September, 420 referral vouchers were distributed among vulnerable youth during mini sessions and outreach work.

Referral System on STI diagnostic and treatment

An Agreement was signed to establish a Joint Referral system between outreach workers and the AIDS Center of Bishkek. Referrals will be organized to deliver vulnerable youth of Leninski, Pervomaiski and Sverdlovski districts and those living in Park Fuchik district of Bishkek for free STI diagnosis and treatment in the Friendly Cabinet located in the Center. The work will be organized using a voucher system which will be provided to target populations during the outreach in the hot spots.

C.4. Strategy 4: Improve Resource-Use to Integrate HIV/AIDS Services

Policy Dialogue on Planning and Budgeting for HIV/AIDS

Within the framework of planning and budgeting activities for Y4 country office has been actively involved in the process of discussion, planning and budgeting the activities with regional coordinator within the strategy 4. Therefore, several policy dialogues have been organized at country level with representatives of MoH, deputy minister, head of prevention and treatment department and with representatives of Mandatory Health Insurance Fund of MoH. These meetings aimed at agreeing few specific plans that CAPACITY is planning to fulfill next year. These policy dialogues resulted in positive negotiations and support from the side of national partners. However, few recommendations have been received as well in order to achieve the more effective results that would fully respond to country needs.

Social Marketing of FAVORITE condoms through free distribution in policlinics and Friendly Cabinets

Based on the Letters of Intention for free distribution of FAVORITE condoms through Friendly Cabinet of City AIDS Center and City Student Clinic, condoms will be distributed for free upon receiving tax exemption.

D. Tajikistan

D.1. Strategy 1: Improve Stewardship of National HIV/AIDS Programs

Secondment

During the reporting period seconded specialists continued to provide technical assistance to NACM.

Communication Specialist

The communications specialist continued to maintain NCC web-site and edit a monthly issue of RAC Bulletin. The contents of the Bulletin, as well as the information collection and dissemination tools were further discussed with the Director of RAC. The communications specialist participated at the meeting on Launching of Assessment of externally financed HIV/AIDS programs initiated by NCC Secretary and supported by WHO office in Tajikistan. At the meeting, the development of an action plan, questionnaire, assessment tools, data analysis and feedback were discussed.

The Communication Specialist provided support in conduction of the meeting of TWG on IEC, where the members reviewed and discussed issues related to the development of IEC strategy, and instructions on development of IEC materials, their design and printing.

M&E Specialist

The M&E specialist provided support in organizing of meetings of the TWG on legislation and TWG on M&E within the reporting period. Additionally, the M&E Specialist together with the members of TWG on development of a Classifier of services provided on anonymous basis at HIV/AIDS and Narcology Centers have finalized the Classifier and disseminated it among partners for their comments and recommendations.

In order to further implement the Three-Ones Principle at oblast level the M&E Specialist together with the NCC Secretary has undertaken situation analysis in Kulob, Kurgan-Tube cities of Khatlon oblast and GBAO and familiarize themselves with the work of the Oblast Coordination Committees on prevention of HIV/AIDS, TB and malaria.

M&E Specialist collaborated with UNAIDS in organization of the next meeting of TWG on M&E which will be devoted to preparation of National report on M&E of the National HIV/AIDS Program to UNGASS.

NGO Liaison Specialist

The NGO liaison specialist acted as a focal point in the process of registering (or updating the registration) of NGOs in the NCC database. This database was established with the purpose of collecting information about ASO/NGO implementation. Further the initial efforts in mapping of ASO/NGOs were made in collaboration with CAAP and NCC.

As a part of community mobilization efforts the NGO Liaison Specialist has conducted an assessment of capacity building needs of the NGOs working in the area of HIV/AIDS, the results of which will further feed into OD/ID trainings for NGOs. Routinely NGO Liaison Specialist provided consultations and technical support to NGOs on proposal writing, disseminated various grant competition announcements, and promoted information exchange between the NCC and civil society organizations.

Strengthening NACM regulatory framework

NCC regulatory framework documents, (NCC Constitution, Regulations on TWG and Draft Constitution of Local Coordinating Councils) revised by the CAPACITY-hired Consultant as per NCC Secretariat's request have been reviewed by local experts. The experts concentrated on the package of recommendations made by consultant and ensured their compliance with local legislation requirements and specifics of National Stewardship. Minimal comments were made, the package of documents was approved and CAPACITY's input in this activity appreciated. Further the documents will be discussed with partners to make the process transparent and open at the meeting of TWG on National Policy and Legislation planned to be conducted next quarter followed by their submission to the Government for approval. This activity will further foster integration of Three-Ones Principles into the governance system.

Strengthening Dushanbe city HIV/AIDS program Stewardship

The Project supported Dushanbe-city AIDS Center (DAC) in preparatory activities for establishment of the City Coordinating Council on HIV, TB, Malaria (oblast replica of NCC). It was agreed with the DAC to collaborate with the Dushanbe Health Department on developing a Plan of Actions and establishment of Local Coordinating Council.

Implementation of Three Ones Principles at oblast level

In addition to the activities related to the implementation of the Three-Ones Principle at oblast level, a series of discussions were held with corresponding structures aimed at implementation of the Three-Ones Principles at city level through the establishment of a coordination mechanism in Dushanbe. Taking into account the epidemiological situation and results of Sentinel Surveillance, CAPACITY proposed to establish the Coordinating Council on Combating HIV, STI, and Drug Addiction in Dushanbe without replicating the national structure of NCC on HIV/TB/Malaria. It is further corroborated by the fact that effective coordination requires the involvement of all sectors including NGOs in the coordinating body.

ToR of M&E Specialist

With a purpose of avoiding duplication of M&E functions, by the CAAP M&E specialist and the RAC M&E Specialist (CAPACITY Seconded Specialist), it was agreed that the CAPACITY seconded M&E specialist will focus on National M&E indicators that the MoH is responsible for, while Specialist seconded to NCC (CAAP) will work on indicators relevant to other Ministries (Education, Justice, Defense, Labor and Social Protection etc.). This complies well with both National M&E Guidance and missions of RAC and NCC. Moreover, all indicators relevant to MoH are in line with CAPACITY priorities.

Development of CAPACITY Y4 work plan

CAPACITY/TJ worked closely with leading partners (NCC Secretariat, RAC, UNAIDS, CAAP, CARHAP, ZdravPlus, USAID) during the finalization of the CAPACITY annual work plan for Y4. As a result, ways of collaboration in several activity areas were identified.

D.2. Strategy 2: Educating and Empowering Vulnerable Populations

TA to Small Scale HIV Prevention Projects

In the reporting period, CAPACITY provided TA for the start-up of implementation of two small-scale HIV prevention models focused on increased coverage of vulnerable groups (IDUs, SWs) HIV prevention. In September, site visits were made to project sites in Khujand and Kurgan-Tube cities. During the visits meetings were held with key partners involved in promotion and implementation of HIV prevention projects. Several issues and challenges related to implementation of models were revealed, however, local authorities assured CAPACITY to provide necessary support.

Interventions with Sex Workers

Dushanbe (Karabolo street, Disco Dousti, Disco Sitora, café Farahnoz)

The target sex worker population at these sites totals 4,000 and to date 2,183 sex workers have been contacted (cumulative). This quarter:

- Trainings: 139 sex workers in 23 peer trainings
- Mini-educational sessions: 259 sex workers in 87 mini sessions (Themes were HIV and AIDS, STI, Communication skills, Responsible behavior, and Condom Use);
- Free Condoms distributed: 5,303 condoms
- Brochures distributed: 316 educational brochures (Themes were HIV and AIDS, STI, Condom is my protection, Assess Your Own Risk);

Pre and Post Test Results of BCC among sex workers

Location	Pre Test %	Post Test %
Dushanbe	24	49

Interventions with Vulnerable Youth (BCC component of CSM)

Dushanbe city: micro districts ## 46,61,63, “Sahovat”, “Giprozem”, Sovetsky – 1, Sovetsky – 2, Diagnostika

The target vulnerable youth population in these sites totals 48,000 (City Statistic State Board on quantity of vulnerable youth at age 15-24 living in mentioned administrative districts). Project to date, 24,699 (14,907 males and 9,792 females) vulnerable youth were contacted in the site (cumulative). This quarter:

- Peer education trainings: 1,328 (810 males, 518 females) vulnerable youth during 335 peer trainings
- Mini-sessions: 1,328 (810 males, 518 females) vulnerable youth during 335 mini-sessions
- Events: 473 (298 males and 175 females) vulnerable youth during 7 events in target sites such as Discos.
- Free Condoms distribution: 234 condoms
- Brochures distribution: 1,152 educational brochures

Increasing access to Condoms through Social Marketing

- 9,122 units of free condoms were disseminated during various events and educational activities
- Stock out problem, which was due to tax exemption issues, were solved during this quarter.

D.3. Strategy 3: Improve the Quality of HIV/AIDS Services

TB/HIV

The implementation TB/HIV services interaction model developed and piloted by CAPACITY has been completed. The final meeting of TWG on interaction of TB/HIV services was focused on analyzing the results of M&E, review of the Technical Guidelines on detection, registration and treatment of patients with dual infection. Further, CAPACITY presented the results of TB/HIV interaction models at the partners meeting. Achievements and challenges were pointed out and recommendations for further expansion of the model throughout the country were made. The sustainability of the Model was ensured by including the TB/HIV component into National Strategic Plan and the GF's 6th Round Grant. It was agreed that the model will be expanded at national level according to the objective 6 of NSP (TB/HIV component) and the TB/HIV component will be included into new National TB Program on 2009 – 2015.

Report on the results of implementation of the model prepared jointly with the Regional Consultant on HIV/AIDS Dr. V.P. Seledtsov was disseminated among all partners concerned and resented to the MoH of Tajikistan.

Collaboration with partners

CAPACITY met with GFATM new TB/HIV Coordinator. The importance of collaboration between CAPACITY and GF PIU on TB/HIV scale-up at national level was acknowledged by both sides. CAPACITY expressed its willingness to provide technical and methodic support to GF on TB/HIV interaction issues and presented the whole package of documents developed by CAPACITY and MoH.

E. Turkmenistan

E.1. Strategy 1: Improve Stewardship of National HIV/AIDS Programs

Work plan development and approval

To identify areas for technical assistance and cooperation, numbers of meetings were held with national as well as with international partners. Based on results of these meetings, the work plan for the period of October 2007 – September 2008 was drafted.

On August 2, 2007, CAPACITY held round table meeting which was attended by UN organizations working in Turkmenistan, by the Youth and Women Unions, the National Red Crescent Society, Ministry of health and medical industry, the National AIDS Centre, Narcology and Dermato-venereology dispensaries as well as by Blood bank. At the meeting the following presentations were made:

- Draft of CAPACITY's work plan by Sona Valiyeva, TM country representative;
- HIV situation in Turkmenistan by M. Muhammedov, director of the National AIDS prevention center;
- Experience about the US study tour by M. Muhammedov, director of the National AIDS prevention center, and T.Silliyev, director of Blood bank;
- HIV situation and responses in CA countries by L.Khodakevich, CAPACITY Chief of Party (former); and
- Patterns of international partnership among international stakeholders in four CA countries by L.Khodackevich, CAPACITY Chief of Party (former).

Following the round table, the finalized work plan was sent to the MoH. On September 14, 2007, it was approved by the Deputy Minister of Health, Dr.Elyasov G.

Advocacy for GF application

During the meeting with the Deputy Minister of Health, Dr. G. Elyasov, CAPACITY has discussed the GF 8th Round application. According to the Deputy Minister, the GF money are required for purchasing PCR equipment and disposables and other HIV diagnostic means. CAPACITY proposed to considering educational component of prevention and to involving the public organizations such as Youth and Women unions as well as the National Red Crescent Society in this work, and to considering their applications for the GF 8th Round. CAPACITY has also mentioned that the lack of the proper HIV surveillance data was put as a reason for rejection of the Turkmenistan application for the 6th Round.

Partnership activities

CAPACITY participated in the following partnership building activities:

- UNTG meetings which were held on July 12 and September 13, 2007;
- USAID activities: workshop on marking and branding policy and partners meetings;
- Assisted director of the National AIDS Prevention Center in his preparation for participation in Euro HIV 2007 conference; and
- Review and discussion of Communication strategy for HIV/AIDS/STI prevention program of Turkmenistan which was developed in support of UNICEF.

E.2. Strategy 2: Educating and Empowering Vulnerable Populations

Youth Model Centers

After CAPACITY has obtained MoH's approval for the WP, preparation activities for implementation of model youth centers have started. According to the approved work plan, the model youth centers supposed to be launched by December 2007. To assess the situation, PSI representatives, Leila Koushenova and Natalya Burlakova, have visited Ashgabat. During their visit number of meetings took place, including director of the National AIDS prevention center - Mr. Muhammedov, director of the Narcology dispensary - Mr. Meredov, STI clinic staff, representatives of the Youth Union, UN team and USAID. During these meetings, Youth model was presented to the partners, and partners in their turn expressed their support for this program and willingness to work together.

During the meetings, it was found that Youth Power Center Model cannot be established in Turkmenistan in the same format that was tested in Kazakhstan and Kyrgyzstan during Years 2 and 3 of CAPACITY, taking into account local legislation, politics, and cultural traditions. Youth Power Model should be transferred into Youth Resource Centers when HIV prevention activities will be concentrated mostly on provision of main knowledge and personal risk assessment skills to local youth through Republican Youth Union, the organization which handles the impressive distributional network working with mostly all youth at age 15-25 living in Ashgabat through 4 City District Union's Departments.

During the meeting with General Director of Republican Youth Union advice was given on most appropriate ways of HIV prevention work targeting vulnerable youth. Information was also received on the most suitable districts where Youth Resource Centers should be open: Chendybinskii district and district of Ak Budai. Those locations were discussed with USAID and strategic partners and also were supported during the Meetings.

PSI started to develop appropriate scheme of possible local operations taking into account the issues of absence of official registration and transparent bank account belonging to PSI.

Capacity Building of Youth Union, Women's Union, and National AIDS Prevention Center

In light of preparation OD/ID ToT at the regional level, CAPACITY has distributed application and assessment forms to Youth Union, Women's Union and National AIDS Prevention Center to identify their training needs in terms of program management and technical areas. Results were summarized and sent to the regional coordinator of this activity.

F. Uzbekistan

F.1. Strategy 1: Improve Stewardship of National HIV/AIDS Programs

Providing support to the National Strategic Program

In July, the CAPACITY Project/Uzbekistan in close cooperation with UNAIDS, provided technical assistance to RAC/MoH in conducting the National workshop on development of the national Implementation Plan and oblast implementation plans of the Strategic Program on response to HIV in the Republic of Uzbekistan with participation of more than 80 representatives from all regions of Uzbekistan, government and international organizations. As the next step of this activity, in August-September, workshops for HIV/AIDS Oblast Coordination Committees representatives on completion of oblast Strategic Plan implementation plans were conducted in all regions of Uzbekistan. Thus, the implementation plans were developed and approved by oblast Coordination Committees on HIV/AIDS. The CAPACITY Project also took part in a number of meetings on completion of National Strategic Plan Implementation Plan, together with major stakeholders. Moreover, technical support was provided to RAC/MoH in publication of the Strategic Program and Uzbekistan Law on HIV prevention.

CAPACITY Year four Work Plan (WP) and Budget

Within the reporting period, CAPACITY/Uz team worked on development of the WP for the fourth year of the Project implementation in country. In this regard, series of meetings were conducted with the main interested partners (MoH, RAC, TMA, UNAIDS, WHO, GF Project on AIDS and TB, “Ishonch va Hayot” NGO, and others) aiming to coordinate future joint activities.

F.2. Strategy 2: Educating and Empowering Vulnerable Populations

PSI ToT for peer-educators and outreach workers

In August, the CAPACITY Project provided technical assistance to PSI/Uzbekistan in organization of ToT for peer-educators and outreach workers. The main purpose of the training was to train 15 people, who would work with vulnerable groups in Tashkent city under the CAPACITY vulnerable youth project.

TA to small scale HIV prevention project

In September, the CAPACITY/Uz team and Regional Prevention Assistant visited Samarqand/Urgut Project site to provide TA. The main purpose of this visit was to assess and collect information on current situation and readiness of partners for HIV prevention project implementation. During the site visit, the possibility of providing narcology, STI, surgical and other services in Central District Hospital/Urgut and involvement of community leaders into the project implementation was discussed with project partners.

Urgut Hospital drug store and intensive therapy unit, narcology rooms for detoxication, friendly clinic (STI) and premises for a drop-in center were visited by CAPACITY team and the partners with the purpose of verifying their readiness for the HIV prevention project implementation.

CAPACITY Building for ASOs

During this quarter, CAPACITY/UZ began preparations for the upcoming regional OD/ID ToT for ASO/NGOs. Questionnaires with the purpose of doing a needs assessment among ASO/NGOs in order to be able to structure the ToT according to felt needs were disseminated among ASO/NGOs. The questionnaires have been returned, the data collected and analyzed. From this information, the regional training agenda will be developed.

Interventions with Sex Workers

Tashkent (Chilanzar district)

The dynamic in the target group has changed dramatically – more Uzbek speaking young women had started arriving in Tashkent. There are now several times more Uzbek speaking sex workers than Russian speaking sex workers. Most of the outreach workers in the CAPACITY sex worker program are not Uzbek speakers, though they have been taking Uzbek lessons. Some of these outreach workers have had to be replaced by native Uzbek speakers.

The target sex worker population at this site totals 5,000 and to date 4,717 sex workers have been contacted (cumulative). This quarter:

- Trainings: 222 sex workers in 128 peer trainings
- Mini-educational sessions: 640 sex workers in 165 mini sessions

Interventions with Vulnerable Youth (BCC component of CSM)

Tashkent city: M-Ulugbek, Mirabad, Yunusobod districts

The target vulnerable youth population in these site totals 134,549 (Republican Statistical Center of Uzbekistan, 2005 for quantity of vulnerable youth at age 15-24 living in above mentioned administrative districts). Project to date, 57,627 (30,106 males, 27,521 females) vulnerable youth were contacted in the site (cumulative). This quarter:

- Peer education trainings: 81 vulnerable youth during 44 peer trainings
- Mini-sessions: 5,124 vulnerable youth during 1,991 mini sessions
- Condoms distributed: 3,048
- Brochures distributed: 12,589

Increasing access to Condoms through Social Marketing

- No Sales happened because of closing condom Sales Department due to government restrictions in Uzbekistan

F.3. Strategy 3: Improve the Quality of HIV/AIDS Services

Roundtable and ToT on VCT

Trainings for specialists and VCT introduction is implemented in Uzbekistan since 1997 by international organizations (WHO, AFEW, etc) but it has not been enough. The fact is that there was no National Strategy, Manual and Module on VCT. In this regard, under the support of GFATM Project on AIDS and CAPACITY, international and national experts developed a Manual and Module on VCT provision. The Module was developed for

education of physicians of various profiles, nurses, psychologists, social workers, NGO representatives and PLHIV.

In September, on the initiative of the Ministry of Health of Uzbekistan (MoH) and in close collaboration with GFATM Project on AIDS, AFEW, and UNAIDS, the CAPACITY Project provided technical assistance in conduction of Roundtable and ToT on VCT for health specialists from all regions of Uzbekistan. The main goal of the Roundtable was to present the developed VCT Manual and Module and to discuss it with all interested governmental and international organizations.

The ToT main objectives were to train health care specialists with appropriate VCT Training Module. More than 30 representatives of STI service, NGOs, Mass Media together with specialists of the Republican and oblast AIDS Centers, who would be responsible for providing expertise of theoretical and practical aspects of delivering VCT in all regions of Uzbekistan, took part in the training.

HIV/TB Monitoring and Evaluation

During the discussion of HIV/TB Model realization results at the roundtable held in the previous quarter, it was noted that M&E quarterly reporting forms were rather inadequate and difficult for completion and collecting data. Therefore, it was recommended by TWG to simplify the forms and develop instruction for filling them in.

Hence, within the reporting period, the CAPACITY Project in coordination with international experts, Project HOPE TB representatives and local specialists worked on improving and simplifying monitoring forms on HIV/TB services interaction. Thus, the quarterly reporting forms have been changed in order to make them convenient for data collectors in pilot regions of Uzbekistan.

Following the recommendations of TWG members and national and international experts, the CAPACITY Project keeps providing technical assistance in conduction of M&E activities in medical facilities of Tashkent city and Tashkent oblast. Thus, the next M&E visits are to be held in October, 2007.