

QUARTERLY TECHNICAL REPORT



**Second Quarter Report – Fourth Year
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by

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and partners:

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I. Introduction

During this quarter, all countries in the region have begun efforts to apply for the 8th round GFATM grants. CAPACITY has been participating on TWGs and other committees to provide technical assistance in the preparation of these proposals. In Turkmenistan, there is the plan to submit the very first proposal to the GFATM this year. Although this proposal will be in the area of TB, CAPACITY is assisting to put elements of HIV prevention into that proposal.

Expansion training among NGOs and ASOs in 4 countries took place to build capacity for managing and implementing HIV prevention activities aimed at achieving high coverage among vulnerable populations. These trainings took place at the oblast level in these countries, providing TA to hundreds of organizations, many of which have received funding due to assistance from CAPACITY during earlier quarters. In Turkmenistan, a training of trainers took place to enable new teams of trainers to engage similar expansion trainings during the next quarters.

The Youth Center was launched in Turkmenistan. This marks the first such HIV prevention activity in that country. Not only is this YC now functioning with full approvals and support from the Turkmen national government, but the Ministry of Health is actively promoting this activity and encouraging other organizations to do similar work to fight HIV. In the history of Turkmenistan, this kind of support for HIV prevention work is unprecedented and highly appreciated.

Kazakhstan is joining the ranks of three other countries in Central Asia by beginning this quarter to implement a pilot program for the interaction of HIV and TB services. CAPACITY is working in collaboration with Project HOPE to provide training, technical assistance, and monitoring and evaluation to the national and local AIDS and TB centers. Other international and national organizations have joined this effort by picking up various aspects of the pilot, such as the social support to patients, development of IEC materials, and training on how to provide VCT in TB facilities. This pilot is not only a great medical and technical effort that will benefit patients, but also a tremendous demonstration of great collaboration, and how, when organizations work together in a coordinated fashion the impact of all our work can be multiplied.

II. Programmatic Progress

A. Regional

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

Online HIV Database as a Regional Tool

The CAAP project expressed early support for the introduction of national databases and was planning to expand the CAPACITY-developed Database into a Regional one. There were a number of discussions where CAAP and CAPACITY jointly developed TOR for the Regional database which was finally approved by CAAP's donor the World Bank. Thus, it is anticipated that at the next Quarter CAAP will announce a tender and move forward with this activity. This is a great support that one of the major donor-organizations is giving to CAPACITY efforts in the area of communications.

Technical Assistance for Monitoring and Evaluation

CAPACITY helped the local NGO MedSocInform to facilitate the regional workshop for the external M&E experts that are involved in TUMAR project. CAPACITY M&E Seconded Specialists were also invited to participate in the workshop and follow-up monitoring visits. During this workshop participants finalized the TUMAR project M&E Plan and agreed upon all the reporting forms and procedures.

CAPACITY also participated in the Regional TWG Meeting on M&E organized by the Central Asia AIDS Project (CAAP) in Almaty. The purpose of this TWG is to provide a platform for the regional discussion of various M&E related issues, including capacity building activities. CAPACITY was also actively involved in the second meeting, which took place in Bishkek and was initiated by the Global Fund to discuss their involvement and cooperation with partners in strengthening National M&E Systems.

Strengthening National Stewardship through Legalization of NCC

CAPACITY finalized the work with the governance consultant in collaboration with CAAP to support the legalization of the NCC in Tajikistan. All necessary documents (the NCC regulations, TWG regulations, and local coordination committee regulations) were developed and submitted to Government by NCC Secretariat. The NCC Operational Manual was finalized and submitted to NCC Secretariat.

Training Journalists to Cover HIV/AIDS-Related Issues, Especially Stigma and Discrimination

CAPACITY worked together with the TUMAR Project, the Soros Foundation, and the International Centre for journalism "MediaNet," to organize a training for journalists on how to project HIV/AIDS related topics in the Mass Media. Journalists from throughout the Central Asia region participated in the training. Journalists were chosen based on their motivation to cover the issues of HIV/AIDS, especially dealing with stigma and discrimination. One of the longer term benefits of this training is that the journalists have committed to work closely with the small scale HIV prevention pilots where CAPACITY

provides TA, which will enhance the results of those pilots by helping to decrease stigma and discrimination related to HIV/AIDS.

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

Technical Assistance to Small Scale HIV Prevention Pilots

To date, with technical assistance from CAPACITY, small scale HIV prevention pilots with injection drug users and sex workers in four countries have reached 5,300 people. Among all, 723 clients visited Drop-in-Centers (4 newly organized DICs, 2 existing centers and 6 Trust Points), 3,114 clients received condoms; 2,087 have gotten brochures; 3,030 clients participated in mini-sessions conducted by outreach workers; 345 clients were referred to HIV testing, 445 to STIs treatment, 28 to detoxification, and 66 to PMTCT services. In total, 121,069 condoms and 14,034 IEC materials were distributed to vulnerable groups.

Facilitation of USAID-Donated Condoms

Two countries (Kyrgyzstan and Tajikistan) have received large quantities of USAID donated condoms. CAPACITY worked with USAID to facilitate the shipment, receipt, and customs clearance in the countries. In Tajikistan, the condoms have already been shipped to local HIV prevention sites. During the next quarter, the same will occur in Kyrgyzstan.

Production of Anti-Stigma and Discrimination Video

CAPACITY is providing TA for the production of video aimed at reducing stigma and discrimination toward PLHIV, IDUs and sex workers, among the general population. The video is being funded by the TUMAR Project. A contest was conducted for the best video script among journalists working with HIV/AIDS related issues. The judging committee, consisting of representatives from the Regional CAPACITY office, Central Asia AIDS Project, and the International Centre for Journalism has chosen three best scenarios. Short video-clips on Stigma & Discrimination related to HIV/AIDS will be shot according to the winning scenarios and will be aired in all countries of Central Asia.

Support to Regional Training Center on Harm Reduction among IDUs

CAPACITY participated in the round table organized by the Central Asia AIDS Project to discuss the Regional Training Center on Harm Reduction among IDUs. CAPACITY suggested to include other vulnerable groups such as sex workers and prisoners as target groups for the Center and to not only focus on harm reduction, but to include other HIV prevention activities.

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

Technical Support to TB/HIV Monitoring and Evaluation and Scale-Up

In Uzbekistan, Tajikistan, and Kyrgyzstan, CAPACITY is continuing to provide technical assistance in conducting the quarterly M&E visits to the TB/HIV pilot facilities. In Kyrgyzstan, CAPACITY is serving as the Secretariat for the national TB/HIV TWG under

the Kyrgyz TB Coordination Committee. CAPACITY is providing technical assistance in development of clinical protocol, TB/HIV order, TB/HIV part of the GFATM Round 8 applications in Kazakhstan and Kyrgyzsan. In Tajikistan, CAPACITY is participating in the work of TWG (making recommendations to the clinical protocols and other TB/HIV docs) and providing assistance on scaling-up of TB/HIV model to other primary health facilities.

Voluntary Counseling and Testing

CAPACITY is working with national stewards to improve protocols and government orders for VCT to make counseling a mandatory component of HIV diagnosis. CAPACITY started its work on development of VCT model for pilot sites of Kyrgyzstan. These VCT models will be developed to improve the current status of VCT services, increase the availability of trained counselors, and access to VCT services, especially by vulnerable populations.

During this quarter period, two CAPACITY VCT Consultants (from Russia) conducted a visit to Kyrgyzstan VCT pilot site. CAPACITY provided assistance in organizing several meetings with specialists and heads from pilot facilities. VCT Consultants conducted interviews and were provided with all necessary materials. The draft recommendations and reporting materials were developed. Now we are on the stage of negotiation with experts to finalize the reporting documents. Next step after the consultant will make necessary recommendations and develop a model description: we will start the work on VCT model implementation in Kyrgyzstan and then move to other countries (Kazakhstan, Turkmenistan).

B. Kazakhstan

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

Preparation of Annual National UNGASS Report

This quarter, following the series of meetings on preparation of National Annual UNGASS Report that started in previous reporting period, Yelena Kudussova, Kazakhstan Country Director provided technical assistance to the TWG working in the frame of UNGASS Report development. During the meeting that was in January, TWG members discussed and considered UNGASS report questionnaire filled by experts of the governmental, international organizations and NGOs and provided their feedback, and also they discussed the forthcoming UNGASS report workshop. The workshop was conducted in Astana, where representatives of all Oblast AIDS Centers and international partners and NGOs made a final revision of the report. The report was done in CRIS system, translated into English and submitted on 31 January.

GFATM 8th Round Proposal Development

At the beginning of the quarter CAPACITY participated in the partners meeting organized by Republican AIDS Center in order to discuss the results of GFATM 7th Round and the development of the National Application for the GFATM 8th Round. Kazakhstan's National proposal won GFATM 7th round - official confirmation has been received. Republican AIDS center expressed their willingness to apply to GFATM 8th Round. Dr Khassanova, RAC General Director, proposed a possible model of the application where any association or international organization could take one component, describe it in the frame of National application and then when money received, implement this component independently and conduct all operations concerning financial manipulations.

One of the important points is to revise GFATM requirements for the 8th Round that will be announced on the 1 of March. Participants discussed possible issues which could be included in the country application and the issues that are not covered by 7th round application - PMTCT, blood safety, social component, stigma and discrimination, working with migrants, HIV prevention at the working places, and prevention in the prisons. However, some of these issues should be covered by Government.

This meeting was followed by the series of meetings in the frame of GFATM 8th Round Proposal preparation process. During the next meeting, the main rules for application for the GFATM 8th round were presented. It was decided to make an analysis of previous proposal (7th round) in order to define gaps and to plan next steps as following:

- Make an analysis of existing gaps, monitoring of National Program and proposal for previous rounds
- To find weak points to improve the quality of services and accordingly access to them, improving adherence, trainings for medical staff and emphasize the healthcare system
- To create working group
- Develop 8th round Proposal

Secondment Staff

Communication Specialist

This quarter, CAPACITY Seconded Communications Specialist, Kseniya Matiko met with Rano Abdugarimova, CAPACITY Regional Information Management Coordinator to get acquainted and discuss further activities. This was the first meeting with Kseniya and she updated Rano on her recent activities within RAC, including providing support to the maintenance of the RAC website, producing the RAC Information Bulletin, and monitoring the HIV news in the Media.

Rano Abdugarimova presented the Online Database to Seconded Communications Specialist and briefed her on the original idea and how it was developed and why. Since the administrative (content management) part is similar to that of the website, Kseniya has started working on data collection and input. Also, Kseniya was encouraged to work more proactively with the international partners to increase interaction and information exchange. Specifically, it was agreed that Kseniya will create a calendar of events with information from all international partners and distribute it by email besides posting on the RAC website. Similarly, Kseniya will work on collecting information from the partners for the database and informing them about this new tool.

Following this meeting, Rano Abdugarimova had a meeting with the RAC General Director, Mariyam Khassanova, in order to discuss possibilities of introduction of the Online Database in Kazakhstan. The purpose of the meeting was to present the Online Database to M. Khassanova as a tool to be used by RAC in coordination purposes and to improve interaction with international HIV stakeholders. M. Khassanova welcomed CAPACITY and its effort to provide technical support in improving communication. She assured CAPACITY that RAC will consider the introduction of the Database to all partners for its implementation on the country level. It was agreed that Kseniya will start working with the database, by collecting and entering information; and report to Rano about any issues related to data input.

It was also decided that RAC will think about further steps of promoting the Database among partners with the CAPACITY support. Seconded Communications specialist has started the work of collecting and inputting all available information in the database.

NGO Liaison

According to the CAPACITY Kazakhstan work plan for the Year 4, it was planned to organize and conduct second round of training for ASO NGOs at the oblast level in the frame of Civil Society Mobilization in Kazakhstan. In this connection, this quarter CAPACITY NGO Liaison continued her work that she started in the frame of preparation process for ASO NGO trainings. With the goal to further strengthen the capacity of government and non-government ASOs, CAPACITY together with the Central Asia AIDS Control Project (CAAP) is conducting oblast level trainings for ASOs. These five-day capacity building trainings ASOs are being organized in Aktobe, Kostanay, South-Kazakhstan, Pavlodar, Karaganda and West-Kazakhstan oblasts between 25 February and 26 April, 2008. It is expected that approximately 150 representatives of different organizations will participate in this training across the nation. During this quarter NGO Liaison actively participated in organization and conducting of these training in Uralsk, Shymkent and Kostanay.

Strengthening NACM Communications with the Online Database

During the past quarter CAPACITY made a good progress in promoting the Online Database in **Kazakhstan**. First off, the Database was presented to the RAC Director M. Khassanova, where all the functions of the Database were discussed as well as further involvement and role of the Communications specialist. It was decided that at the initial stage the Communications specialist will be responsible for data collection and input, which requires a closer collaboration with partner organizations which are expected to provide data. By the end of the Quarter RAC Director and seconded specialist, with the support from CAPACITY regional office, organized a presentation of the Online Database to key partners, including AFEW, Soros, Global Fund and four NGO associations. It was notable that NGO leaders openly supported introduction of this tool and S. Elkeev (Peer-to-Peer) shared his comments and expressed his willingness to help promote the Database within his network of partners. Next quarter our seconded specialist will be working more actively on involvement of more partners to provide data so the database can contain more useful information interesting to users.

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

Capacity Building of AIDS Service Organizations (ASO)

Training continued among ASOs in the oblasts of Kazakhstan through a cost-sharing agreement between CAAP and CAPACITY. The objective was to build institutional and programmatic capacity among AIDS-service organizations for mobilizing community efforts for HIV prevention. A total of 90 representatives of ASOs in Uralsk, Shymkent, Aktobe and Kostanai received training by trainers who received their TOT by CAPACITY and CAAP in Bishkek last quarter. During the 5-day trainings, participants improved their knowledge and skills in effective approaches to increasing service coverage for HIV prevention among the groups most vulnerable to HIV, including management, advocacy, counseling, outreach work and fundraising. Organizations also improved their understanding of the importance of partnerships and collaboration in development and provision of prevention activities.

Support Provided to Grant Mechanism for HIV Prevention

CAPACITY Kazakhstan Country Director participated in the Grant Committee to select proposals for financial support of CAAP through the International HIV/AIDS Alliance. In this connection, the Association of PLHIV announced a call for applications among NGOs working with PLHIV. Participants of the meeting discussed regulations on Expert Committee Grant program that is directed on improving of PLHIV life quality. As a result, out of 11 NGOs that applied their proposals, after consideration and discussion, 5 of them were selected and recommended for funding, including:

1. Kuat-Shymkent - Shymkent
2. Zhardem - Aksu, Pavlodar
3. Kuat - Ust-Kamenogorsk
4. Taldykorganskii fond zanyatosti - Taldykorgan
5. Shapagat - Temirtau

Interventions with Sex Workers

Almaty (Saina, Seiphullina and Auezova streets)

The size of the targeted sex worker population in Almaty is 10,000 (data from the City AIDS Center's assessment). To date, 7,720 sex workers have been contacted (cumulative). 674 sex workers were contacted during the Quarter. There are 9 outreach workers targeting sex workers in Almaty on the Saina, Seiphullina and Auezova, Kurmangazu, Arbat streets and Hotels.

This quarter:

- Trainings: 161 sex workers during 76 trainings;
- Mini-educational sessions: 584 sex workers during 397 mini-sessions (Themes were HIV and AIDS, STI, Communication skills, Responsible behavior, and Condom Use)
- Free Condoms distributed: 4,500
- Brochures distributed: 1,779 (Themes were HIV and AIDS, STI, Condom is my protection, Assess Your Own Risk)
- Events: 1 ToT was conducted for 12 potential Outreach Workers (9 female and 3 male).

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

Location	Pre Test %	Post Test %
Almaty	70	91

Condoms Availability

- Outreach continued around New Hot zones in Almaty (Kurmangazu –Kunayev str.) by recommendation of City AIDS Center.
- 154,884 units of condoms have been disseminated around Hot Zones during the Project to Date.

Interventions with Vulnerable Youth

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 4,398 vulnerable youth have been contacted. This Quarter:

- Peer education trainings: 1,110 (554 male, 556 female) vulnerable youth during 203 trainings
- Alternative activities: 145 (50 males and 95 females) vulnerable youth participated in the work of Tennis Club
- 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: 343 (113 males and 230 females) vulnerable youth were consulted by medical doctors of the Center.

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:

The administration of Clinic # 10 has not been very supportive of the continuation of joint work on strengthening capacity of the Resource Center which was opened in September 2007. Advocacy Work continues to work out this obstacle. The major issue seems to be the absence of stable financial resources to compensate involvement of doctors in the activity of Center, and this influences the quality of work. Advocacy will also continue on the level of Municipality and City Department of Health.

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, 47,075 (23,049 males, 24,026 females) vulnerable youth were contacted (cumulative). This quarter:

- Peer trainings: 4,069 (2,351 males, 1,718 females) vulnerable youth during 517 peer trainings
- Mini-sessions: 790 (326 males, 464 females) vulnerable youth during 331 Mini Sessions
- TOTs: 69 (26 males and 43 females) participants during 3 TOTs
- Free Condoms distribution: 3,570 condoms
- Brochures distribution: 2,871 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 5,037 vulnerable youth in the site (cumulative). This quarter:

- Mini-sessions: 144 (30 males, 114 females) vulnerable youth during 11 mini sessions
- Trainings: 1,408 (755 males, 653 females) vulnerable youth were contacted during 115 trainings.

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 1,981 vulnerable youth in the site (cumulative). This quarter:

- Peer trainings: 162 (81 males, 81 females) vulnerable youth during 11 trainings

Increasing access to Condoms through Social Marketing

- 11,505 units of condoms were disseminated during various events and educational activities;
- 444,000 condoms were disseminated through traditional channels (pharmacies and shops), hot zone distribution and free distribution during educational activities;
- 6,325,668 condoms were distributed during the Project to date.

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

TB and HIV Services Interaction

The TB/HIV services interaction model has begun in Almaty, Kazakhstan. This is a great example of partner collaboration, involving many local and international organizations. CAPACITY agreed with the Deputy Head of Almaty City Health Department, AIDS Center and City TB Dispenser about the KZ TB/HIV model implementation issues and the TB/HIV prikaz issuing. A preliminary agreement for approval of prikaz by City Health Department was achieved. The model is being implemented by both Project HOPE and CAPACITY together, with inputs from AFEW, KNCV, the Red Cross and Red Crescent Society (RCRCS), and the National Healthy Lifestyle Center.

On 28 March, 2008 in Almaty the pilot project was launched. CAPACITY in collaboration with Project HOPE conducted the first orientation meeting for partners and health managers from Almaty (Kazakhstan) pilot facilities. The orientation meeting was held in National TB Center where representatives of national and municipal TB and AIDS services as well as international and nongovernmental organizations were present. The pilot will be implemented during 1 year under technical and financial support from CAPACITY and Project HOPE. Next steps of collaborative activities are M&E training and trainings for TB and HIV specialists.

CAPACITY also met with AFEW, KNCV to discuss the collaborative activities in KZ TB/HIV pilot (Almaty). An agreement on collaborative efforts in this area was also achieved. During the meeting CAPACITY specifically pointed AFEW toward the issue of social support, adherence to TB preventive treatment for HIV-infected, VCT trainings for TB doctors, development of IEC materials for TB and AIDS services and dual infection issues. AFEW expressed their interest and agreed to discuss that issue after receiving the TB/HIV materials. Partners requested the M&E materials, model description, MoU (letter of agreement). CAPACITY developed the requested docs and shared with partners.

CAPACITY met with RCRCS and the National Healthy Life Style Center to discuss the collaborative activities in KZ TB/HIV pilot (Almaty). CAPACITY focused attention on IEC development and distribution (on the issues of HIV prophylaxis among TB patients and TB prophylaxis among HIV-infected); social support to HIV infected people (to stimulate them to have appropriate treatment during TB prophylaxis by izoniazid); possible support programs of motivation for doctors responsible for IPT, training programs (VCT for TB doctors) and material development. CAPACITY also mentioned the necessity of VCT training for TB Doctors and the RCRCS agreed to help with this activity and at least to share with us the VCT training materials (guideline). The RCRCS may also conduct the VCT training for TB Doctors from pilot site.

Virtual Leadership Development Program

CAPACITY completed its work in facilitation of Kazakh AIDS group in VLDP course on TB/HIV leadership issue (requested by National Partners) in Kazakhstan. The CAPACITY lead Team, consisting of representatives of Almaty Post Graduate Medical Institute, Kazakh National University Instructors, Global Fund PIU Consultant on Treatment, Almaty City AIDS Center and Republican AIDS Center Doctors, and the ZdravPlus TB/HIV Coordinator, completed all program modules on the VLDP website and workbooks, conducted face-to-face meetings to discuss content, completed assignments together, received feedback on these assignments from VLDP facilitators, exchanged view-points on the website with teams from other countries and developed action plan designed to address its specific integration challenge. The Kazakhstan (AIDS Center) Team showed a good result of team work. All Team members received certificates.

National TB Day Conference

CAPACITY participated at the national Conference dedicated to the World TB Day and organized by National TB Center and Almaty Health Department under the technical assistance of international partners. The agenda of this conference was devoted to major issues on TB control in Kazakhstan, new approaches to the work with population on TB prevention issues, TB/HIV activities in Kazakhstan, the role of PHC in issues of detection, diagnostics, treatment and prevention of TB and technical assistance of USAID to the realization of TB Program in Kazakhstan. During the meeting in the frame of TB/HIV in Kazakhstan session Yelena Kudussova informed on the launch of pilot project on strengthening TB and AIDS services interaction under the technical and financial assistance of CAPACITY Project and Project HOPE.

Report on ARVT Adherence Study

In February, Kazakhstan Country Director had a trip to Karaganda in order to meet with Karaganda Oblast, Temirtau City AIDS Centers and NGOs Shapagat and Shagala to present the Report on the qualitative study of obstacles to ARVT adherence (study conducted in Temirtau in May 2007). Representatives of AIDS Centers and NGOs expressed their great interest in the report results and would like to have the second stage of the study – the facility based quantitative adherence study.

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

Background Assessment for Integration Model in Temirtau

In February, Kazakhstan Country Director had a trip to Karaganda in order to meet with Karaganda Oblast and Temirtau City AIDS Centers on to discuss the concept of HIV/AIDS services integration into PHC. During the meetings the Report on the study of the system of providing medical care, working with HIV/AIDS in Karaganda oblast (studying patents flow and functional and financial issues) was presented. CAPACITY and ZdravPlus representatives held a series of meetings with Oblast Health Department, Karaganda Oblast AIDS Center, Temirtau City AIDS Center, Heads of Temirtau Zonal Representatives Office of Health Department, Head and specialists of Temiratu City policlinic and NGO "Shapagat". As a result of these meeting following major issues of PHC were identified:

1. Limited number of staff in polyclinics
2. Physicians are highly overloaded and most of them are at the pension age. If there is even the slightest additional load of work they may leave their job in spite of considerably high salaries. At the same time the situation is better with the nurses.

At the present moment there is a succession and certain integration in the work between AIDS Center and PHC, specifically, mutual awareness, referral system, and training. However, at the same time further integration, for example ARVT into PHC requires provision of adequate number of preliminary activities, including approval of MOH, availability of additional warehouses for medicines, changes in reporting documents, additional payment and incentives for doctors and mid-level medical workers. At the present moment MOH is going to provide reforms in the system of medicines' distribution through pharmacies and MOH does not approve the process of distributing medicines through the specialists of PHC. At the same time preparation process for these changes will take some time.

PHC doctors supports the ideas of distributing ARV medicines through pharmacies, but now all branch pharmacies are removed from polyclinics and their location in the places not convenient for patients will cause some certain problems for patients. PHC doctors consider distribution of medicines through infectious diseases room is the most appropriate model, but it requires additional space and staff of medical doctors and mid-level medical workers. Thus, according to PHC doctors, on the one hand, they realize the need of integration of HIV/AIDS services into PHC in the nearest future, but at the same time they think that implementation of ARVT today as associated with great number of objective challenges. Moreover, PHC doctors are actively raising the issue of financial support and expanding of staff in case of integration strategy realization. These issues should be solved with Oblast Health Department and funds should be budgeted beforehand.

The views of various stakeholders toward integration of AIDS services into PHC are the following:

- Karaganda Oblast AIDS Center expressed its positive attitude towards integration of ARVT into PHC. Oblast AIDS Center specialists said that there is the necessity to train PHC specialists on ARVT issues.
- Specialists of Temirtau AIDS Center consider the distribution of ARVT in PHC to be unfeasible due to the fact of lack of staff and PHC specialists are overloaded.
- Infectious diseases specialists suggested handing over dispensary group of patients from City AIDS Center to polyclinics and assigning to the AIDS Center infectionists the functions of observation and treatment of patients. At the present moment patients list is handed over, primary care physicians observe patients on ART, provide services for them and in case of need counsels with CAC; so, it means, that the process of partial integration is available, but in future training of PHC specialists is required, since these responsibilities will be imposed on PHC.
- Specialists of CAC noted the growth of HIV-infection incidence, growth of sexually transmission and change of HIV-infected patients towards those who are more socially adapted and taking care of their health, understanding the necessity of HIV-infection treatment.
- Representatives of NGO "Shapagat" said about a necessity of social support for patients in order to solve social problems. They noted that the part of the patients prefer to address AIDS Center, and the other part - PHC in order to decrease stigma and discrimination.

C. Kyrgyzstan

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

During the reporting period the replacement of a new Minister of Health had happened. This event held up the process of formation of a new secretariat until early March. However, the CAPACITY country team has been constantly working with MoH on the issues of providing the technical support through its seconded specialists.

Support to National M&E of the State Programme on AIDS

A series of meetings have been organized with the MoH and other partners on the issue related to approval of the regulation for the M&E of the State Programme on AIDS, which has been under consideration in the MoH for almost a year. According to the regulation the M&E system was supposed to be placed and administered by the National Statistic Committee (NSC).

During the last quarter tripartite agreement has been achieved by UNDP/AIDS program, NSC and CAPACITY for sustaining the M&E system within the above mentioned agency. Moreover, the capacity strengthening of this key actor was started last quarter by UNDP/AIDS program through provision of equipment/computers to this agency and a working space has been arranged for CAPACITY M&E specialist. Debates, presentations and discussions have been organized by CAPACITY as well as other partners on where and under which agency the system will be administered.

However, the formal agreement was not achieved by all interested parties in this regard as MoH by itself is willing to take a lead on this and obligate the Republican Medical Information Centre (RMIC) which is one of the structural agency of the MoH to administer the M&E system.

Seconded Specialists

During this challenging period **M&E specialist** has been actively involved in all preplanned national activities and provided her technical expertise to National Leader (MoH). Along with other working group members from the MoH the specialist took a lead to prepare the UNGASS country report. The specialist has been involved in the second phase of work “info analysis” on GFATM 5 year term evaluation.

Finally, after a big deal of political dialogues with MoH and other interested parties it was decided that M&E specialist will be seconded to new secretariat and put all her efforts for sustaining the developed M&E system within the MoH.

NGO liaison continued his work on the promotion of civil society participation in the decision making process at CMCC. The specialist took a lead to organize the First AIDS-servicing NGOs National Forum in Bishkek and has been elected as a head of the Coordination Bureau of AIDS servicing NGOs in Kyrgyzstan. This has been followed up by the request of civil society representatives of Uzbekistan to take part of NGO liaison specialist at their national forum, facilitate the work of the forum and share with the proactive experience of Kyrgyz AIDS servicing NGOs’ work.

Furthermore, during the reporting period, the NGO liaison has been providing technical support to the newly formed secretariat staff in all their organizational work, action plan development process and in developing a separate proposal to Global Fund for the capacity building and support of CMCC/secretariat.

According to the request of the MoH/CMCC secretariat, the hiring process of a new **communication specialist** to be seconded to secretariat has been started.

Coordination with Donors and Key Partners

The first official meetings of a newly appointed CAPACITY Regional Director with main stakeholders MoH, RAC and USAID country mission have been organized by country office in January. The purpose of these meetings was to discuss the further project plans and in what capacity the project will be working and providing its technical support. A series of meetings and policy dialogues have been held and taken part by CAPACITY country office with UNDP/AIDS program, UNAIDS and USAID aimed at identifying the role of each program/project in providing their technical support to national leader.

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

Capacity Building of ASOs

Based on the agreement reached between CAPACITY and CARHAP to jointly conduct oblast-level trainings on a cost-sharing basis, a Memorandum of Understanding was signed between CAPACITY and CARHAP and its National Implementing Partner - the Soros Foundation-Kyrgyzstan, in February 2008. The trainings were conducted during February-March 2008 for AIDS-service organizations (ASOs) of Bishkek, Chui, Jalalabad, Osh and Batken oblasts.

After initial assessment conducted by CAPACITY, CARHAP, and their trainers before the trainings, it was revealed that generally ASOs can be relatively divided in two levels: more experienced/mature and less experienced/young ASOs. Taking this fact into consideration, it was agreed to conduct trainings for mature and less experienced organizations separately.

The trainings for mature NGOs lasted for 4 days and focused on the topics related to the development and implementation of service delivery systems for HIV prevention among vulnerable populations. And the trainings for young NGOs and governmental organizations lasted for 3 days focusing on the issues related to organization of preventive interventions for populations vulnerable to HIV/AIDS. Overall, 84 representatives of 74 organizations have been covered by four trainings conducted by 6 trainers (4 – financed by CAPACITY and 2 – by CARHAP). Out of them 21 people represented 17 governmental organizations such as local administrations, AIDS and TB centers, medical universities, etc.

The trainings were highly acknowledged by the participants, as they helped them not only improve their knowledge and skills, but also built the partnership between each other. As for CAPACITY, it is going to continue its more tailored assistance to these and other organizations in their organizational and institutional development through the existing pool of trainers/consultants during forthcoming months.

Interventions with Vulnerable Youth

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

The Vulnerable Youth population at this site (District of Park Fuchik, NGO “Intergel’po”) 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 3,145 vulnerable youth have been contacted. This Quarter:

- Peer education trainings: 514 (276 males, 238 females) vulnerable youth during 168 trainings
- Mini-sessions: 489 (235 males and 254 females) vulnerable youth during 37 mini sessions
- Alternative Activities: 586 vulnerable youth participated in alternative activities (English, Turkish, and Chinese Language Lessons, Computer club, Dance Course, Guitar)
- Youth Friendly Counseling: 260 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, 57,963 vulnerable youth were contacted in the site (cumulative). This quarter:

- Peer education trainings: 3,911 (1,782 males and 2,129 females) vulnerable youth during 1,442 peer trainings
- Mini-sessions: 2,196 (1,011 males and 1,195 females) vulnerable youth during 95 mini-sessions
- Events: 250 (169 males and 81 females) vulnerable youth during 3 events
- Free Condoms distributed: 870

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

Location	Pre Test %	Post Test %
Bishkek	70	90

Increasing access to Condoms through Social Marketing

- 1,609,209 condoms were disseminated Project to Date.

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

TB/HIV

During the reporting period, CAPACITY and GFATM PIU/TB had a series of meetings with the purpose to coordinate their efforts in improving interaction of HIV and TB services, including sustainability of HIV/TB model piloted in Chui oblast by CAPACITY. As a result of these meeting, the following areas have been assigned to CAPACITY: a) educational component; b) legislative base; c) development of HIV/TB component of the national proposal to 8th round of GFATM. CAPACITY agreed to provide technical assistance in the above directions with the financial support from GFATM PIU/TB.

Following to the above agreement, CAPACITY participated in the coordination meetings with partners organized by the National TB Center and continued its activities in the capacity of Secretariat of HIV/TB TWG within the Coordination Council on TB under the Ministry of Health. It organized and participated in the series of TWG meetings devoted to the development of HIV/TB component in the frame of national proposal to GFATM. As a result, the TWG has developed a draft sub-proposal for an amount of USD 1.5 million for 5 years aiming at building a system of interaction between TB and HIV services and ensuring provision of proper services to co-infected people throughout the country. Finalization of the sub-proposal will continue during the following months.

VCT

Two consultants on VCT from Russia started their activities in Kyrgyzstan by visiting Bishkek and Osh oblast in early February 2008. During their visit they met with the Head of the Republican AIDS Center and heads and specialists of health facilities, AIDS-service NGOs and representatives of vulnerable population in Osh oblast. The purpose of their visit and meetings was to assess the present situation with VCT and understand why counseling and testing despite efforts undertaken by governmental and civil society organizations over the past few years, are still less accessible to those who need these type of services. As a result of this analysis, the consultants provided their report and at the moment are in the process of finalizing model description document. It is expected that the model developed by consultants from Russia will describe more effective mechanisms of interaction among institutions that provide VCT and HIV services, as well as horizontal interaction between governmental and non-governmental organizations aimed at significant rise in demand for voluntary counseling and testing and HIV treatment, care and support. CAPACITY will pilot this model in Osh and Karasuu cities of Osh oblast during the following months.

Substitution Therapy

In February 2008, following up the agreement between the Ministry of Justice and CAPACITY to provide support in organizing the Round Table “Introduction of the Substitution Therapy into the penitentiary institutions in Kyrgyzstan”, CAPACITY and The Ministry of Justice jointly conducted one-day meeting which gathered representatives of Ministry of Justice, Ministry of Health, Ministry of Interior, Ministry of Labour, NGOs, international organizations and projects. The Ministry of Justice initiated the above meeting with the purpose to discuss the proposed pilot project with other state bodies and international agencies. The similar Programme has been successfully implemented in the civil health care system, so that it is anticipated that

this project will significantly contribute to the reduction of the number of injection drug users in penitentiary institutions, which will positively impact on HIV rates among convicts. The project will be implemented by the Ministry of Justice with the support of GFATM/HIV.

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

Workshop on Mapping of HIV/AIDS and Related Services

Based on the review and comments received from the MOH, National AIDS Centre and other related partners -- on the concept paper for the mapping (functional analysis) of the current institutional structure, roles and relationships for HIV/AIDS and related services, the checklist of questions/issues to investigate, and the proposed methodology for implementing the analysis, the said tools and approach were modified and finalized. Accordingly, data collection was completed in mid-February and the first workshop was held in Bishkek on February 27. The workshop was opened by Deputy Health Minister and participated, among others, by all key government partners including MOH and the National AIDS, TB, Dermatology, Infectious Diseases, Blood Centre, SES, Narcology and Health Promotion, programs. Also, representatives from the 'GUIN', 'SIZO' and 'Social Support' programs run by the Ministry of Justice, Ministry of Internal Affairs, and Ministry of Labor and Social Development, respectively, took active participation in the workshop.

The results of the above exercises are currently being analyzed. The findings and recommendations are planned to be disseminated, discussed and agreed in a final workshop to be held in end-April.

Design of Workshop on International National Health Sub-Accounts for HIV/AIDS and TB

An international workshop on National Health Account (NHA) HIV/AIDS and TB sub-account development in Kyrgyzstan was designed and finalized. CAPACITY was approached by the MOH to implement this workshop. This event will be organized jointly by Abt Associates/ USAID CAPACITY Project, Project HOPE TB, WHO Health Policy Analysis Project and MOH during April 22-25. Two international trainers from Abt and one from WHO Euro will conduct the workshop.

D. Tajikistan

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

Seconded Specialists

During the reporting period seconded specialists continued to provide technical assistance to both NCC and RAC. In the first month, the contribution of each seconded specialist was considerable in compilation of the UNGASS Report, particularly in data collection, processing, entry and analysis and organization of related activities.

M&E Specialist closely worked on preparation of the National Report on implementation of the Declaration of Commitment on HIV/AIDS adopted at the Special Session of the United Nations General Assembly. On January 25th the enlarged meeting of TWG on M&E was conducted where draft of the report was presented, discussed and approved. Further with technical support of M&E Specialist the descriptive part of the report and data on indicators were finalized considering the recommendations made at the meeting of TWG. Preparation of this report helped identify the main obstacles in the development of the HIV/AIDS monitoring and evaluation system in the country and define future steps for its improvement.

As a member of the TWG of the MoH on setting up the national M&E system on HIV/AIDS, drug addiction and development of anonymous service delivery standards at the health facilities, the M&E Specialist participated at meetings of the TWG, and provided technical support in the development of a set of documents including the patients medical card and coupon, as well as related instructions.

M&E specialist conducted mini-sessions for the CAPACITY project staff on Unique Identification Code, monitoring and evaluation of HIV programs, national indicators and UNGASS report.

Communication Specialist developed RAC monthly bulletins and circulated them among partners. Routinely he updated different sections of the NCC website and maintained correspondence with key partners on the ways of improving the website and its contents. Promptly the key information on HIV/AIDS such as updated statistics, UNGASS national and other reports, NCC work plan for 2008, different announcements, presentations of new projects, NGO database, minutes of NCC meetings, was placed on the website, which made it a useful tool for partners.

On March 28th-30th Communication Specialist participated at the Training for Journalists on covering specifics of HIV/AIDS issues via mass media conducted by the International Journalistic Center in Almaty with support of Kazakhstan Soros Foundation.

NGO Liaison Specialist continued to maintain contact with NGOs and provide consultations and recommendations on proposal writing, sharing information and experience among NGOs as much as possible. However, during winter months the activities of the NGO Liaison Specialist were most affected and communication with the civil society beyond the capital was limited.

Per request of NCC secretary she provided information on NGO involvement in activities related to HIV prevention among vulnerable populations for the NCC report. Technical

assistance was provided to the RAC in its attempts to coordinate the activities of HIV/AIDS programs through signing of bilateral memorandums of understanding with the organizations. Other inputs of the NGO Liaison Specialist are described within Strategy 2 activities.

Strengthening NACM Regulatory Framework

In the reporting period the development of activities related to the NCC regulatory framework were slightly decelerated due to several factors:

- Arisen necessity of translating the documents into Tajik and negotiations with CAAP on this issue;
- Discharge of the Juridical Specialist seconded to NCC by CAAP who was closely dealing with this activities;
- Change in the leadership of the NCC.

However, the documents were translated into Tajik, and the Tajik version was presented to the Government for approval in the reporting period. In the meantime the Operational Manual developed by an international consultant hired by CAPACITY was presented to the NCC Secretariat for comments. It was agreed that upon approval of the NCC regulatory documents by the Government, the Operational Manual will be presented at the NCC meeting.

Three-Ones Principle at the City Level

CAPACITY conducted separate meetings with the NCC Secretary, Director of City AIDS Center, City Health Department on implementation of Three Ones Principle at city level. At the meetings it was agreed to take the activities forward through the establishment of a City Coordination Council. All the parties assured their support and agreed to focus the Committee on HIV and Drug addiction issues.

Collaboration with partners

CAPACITY had a meeting with CAAP National Coordinator in Tajikistan to discuss joint activities NCC regulatory framework and CSM Strategy.

CAPACITY had a meeting with Operation Mercy/Health Project to discuss possible areas of collaboration and joint activities.

CAPACITY met with AIDS and Migration, ADB funded project for coordination purposes and discussing projects' activities.

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

Civil Society Mobilization

As a follow-up to the Operational Development/Institutional Development (OD/ID) trainings, CAPACITY has worked out the mechanism of providing consultations and mini-trainings for AIDS servicing NGOs by the oblast/city level consultant/trainers. According to this mechanism the NGO Liaison specialist will serve as a focal point, coordinate the process of provision of consultations and mini-trainings upon NGOs' request and ensure quality control. A letter with the description of the mechanism was prepared and circulated among AIDS servicing NGOs, who participated in regional OD/ID training. At the meetings, the IOM expressed interest in funding certain costs related to consultations and continuous mini-

trainings on capacity building to be provided to AIDS servicing NGOs collaborating with IOM. Towards the end of the reporting period several consultations and mini-trainings were provided to NGOs of GBAO based on their requests.

AIDS Servicing NGO Forum

Initiative group of NGOs requested CAPACITY to provide technical and logistic assistance in organization of this event due to the Project's professional approach and experience in this area. The organizational committee of the Forum was established consisting of the most proactive NGOs functioning in the city. During multiple meetings of the organizational committee the goals and preliminary agenda were discussed including duration, list of participants, and responsibilities were distributed between the members. At the same time several meetings have been conducted with potential co-funders of this Forum. CAAP and OSI expressed interest in co-funding this event and organizational committee is working on the development of a draft budget to be submitted to donors for raising funds.

TA to Small Scale HIV Prevention Project

During the reporting period technical assistance was more focused on Kurgantube site, as this type of project is completely new for this region. In February CAPACITY staff paid a visit to Kurgantube TUMAR site and provided consultations to implementers on HIV prevention issues among IDUs. At the meetings cordial discussions were held with outreach workers who cited vital cases and situations faced during the implementation of the project. These examples once again proved the importance of implementing a project on higher coverage of IDUs with HIV prevention activities on this site.

One of the outreach workers working at the local mass media as a journalist took part at a CAPACITY-supported Training for Journalists. Upon completion of the training a follow-up training was planned to be conducted by him for local journalists of Kurgantube on appropriate coverage of HIV/AIDS issues.

In February the CAPACITY's M&E specialist and a specialist from RAC participated at the Regional meeting on M&E within TUMAR project in Almaty, Kazakhstan as national M&E specialists for TUMAR. Further in March, both specialists conducted a 3-day monitoring visit to Kurgantube site, during which meetings were held with different implementing partners including Khatlon Oblast AIDS Center.

Despite the difficulties, including failure of energy supply and telecommunication, significant work has been done to ensure coverage with prevention programs of the vulnerable populations. To date, more than 50% of estimated IDUs in Kurgantube and 70% of sex workers in Khujand, Kairakkum and Chkalovsk have been reached by the Project's preventive activities.

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 2,672 sex workers have been contacted (cumulative). This quarter:

- Trainings: 97 sex workers in 21 peer trainings

- Mini-educational sessions: 263 sex workers in 90 mini sessions (Themes were HIV and AIDS, STI, Communication skills, Responsible behavior, and Condom Use);
- Free Condoms distributed: 7,675 condoms
- Brochures distributed: 526 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	30	53

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, 27,821 (16,654 males and 11,167 females) vulnerable youth were contacted in the site (cumulative). This quarter:

- Peer education trainings: 1,190 (737 males and 453 females) vulnerable youth during 280 peer trainings
- Mini-sessions: 820 ARY (406 males and 414 females) vulnerable youth during 391 mini-sessions
- Events: 749 (439 males and 310 females) vulnerable youth during 4 events in target sites such as Movie nights, Action dedicated to healthy lifestyle and Discos.
- Free Condoms distribution: 298 condoms
- Brochures distribution: 2076 educational brochures

Pre and Post Test Results of BCC among vulnerable youth

Location	Pre Test %	Post Test %
Dushanbe	66	96

Increasing access to Condoms through Social Marketing

Sales Operations continue to be stopped during the reported Quarter in Tajikistan due to on going process of legislative clarifications need to be provided to be able to import Condoms under “Technical Assistance to the region” and work on Sales and Distribution. To proceed with Sales for Social Marketing programs, condoms will have to be imported as medicines and medical devises as commercial cargo paying 4% from Revenue and 3% from condom’s price per unit.

GFATM PIU in Tajikistan continues to provide unbranded condoms to CAPACITY for free distribution. As a result:

- 1,185,881 condoms were disseminated Project to date.

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

TB/HIV

The member of national group of monitoring of TB/HIV services conducted a seminar for TB specialists of the city TB Center and coordinators of DOTS rooms of health centers on the usage of new registration forms. The forms were developed by the Regional consultant for TB/HIV interaction of the CAPACITY Project, based on the results of the pilot model and partners' recommendations. The seminar was attended by 16 TB specialists who discussed the new forms and came to a single opinion that the forms are acceptable, easy to use, and represent a complete picture of a joint TB/HIV infection. The city TB center Director expressed the opinion of all attending TB specialists that there is an acute need for training on VCT.

National group of monitoring of TB/HIV services interaction conducted usual quarterly monitoring. Comparing the data for different periods of 2006 and 2007 ascending trends in identification of TB and HIV co-infection in respective services are evident. Monitoring revealed good relations established between two services, referral system and problems with conducting pre-test consultations. It was found that there is an acute and obvious need to organize training on VCT for TB specialists.

The issue of further implementation of TB/HIV model in the City Health Center #10, where city AIDS center is located, was discussed with the director of CAC. This issue was later discussed in a broader audience at the City Health Department around the table from considerations of concentrating all necessary HIV/TB interaction services together at sites, and improving access to services. At the round table the city health structures, like Health Department, AIDS Center, TB Center, Family Medicine Center, Health Center #10, and also the Republican AIDS Center were represented by key staff. As a result of the meeting the parties agreed on next steps and shared responsibilities.

Collaboration with partners

CAPACITY had meeting with GF TB/HIV Coordinator and UNDP PIU TB Grants Manager to discuss TB/HIV reporting forms (quarterly M&E forms), special forms for statistic data and possible cost-sharing for training on VCT.

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

CAPACITY launched its activities under Strategy 4 in the first quarter of the year. The guidelines on undertaking the functional analysis of existing institutional structures, roles and relationships for HIV/AIDS and related services and the checklist developed by CAPACITY Regional Integration Coordinator were adapted and translated into Russian. Several meetings were held with the NCC Secretary and specialists of the MoH, and also with UNAIDS National Programme Officer to inform them on the activity and enlist their support in order to move forward smoothly. The checklist was reviewed and agreed with the NCC Secretary. According to the NCC request the documents were translated into Tajik. All the documents were finalized and preparatory activities undertaken for the launch, however this activity was withheld for a short time due to the changes in the priorities and views of the MoH towards such activities.

E. Turkmenistan

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

Strengthening NAPC Communications

Seconded Communication Specialist

During this quarter CAPACITY's communication specialist has collected data on trainers trained by various partners for entering into the database. Furthermore, jointly with the National AIDS Prevention Center staff, he participated in review and discussion of international partners' 2008 work plan on HIV prevention (UNDP, UNICEF and UNFPA). Draft of their work plans were collected for database.

To strengthen NAPC communications, a communication specialist has started implementation of monthly information bulletin. By April, the monthly bulletin was developed in Russian and Turkmen and was sent to the MoH for review and approval. After approval, the bulletin will be widely disseminated among all partners.

The communication specialist has participated in writing 2008 report on UNGASS indicator. Report was finalized and sent to the MoH for approval. Jointly with the National AIDS Center staff, the communication specialist has participated in preparation of CCM 2008 work plan. The CCM work plan was approved on February 1, 2008.

Online HIV Database

Following the presentation of the Database in **Turkmenistan**, the CAPACITY Communications Specialist worked with partners to collect some data. At this point UNDP, UNICEF and UNFPA shared their work plans and list of trainers on HIV/AIDS but they have not yet provided their consent for publishing this information online. This issue is being discussed with the RAC Director and it is likely that CAPACITY will support a roundtable discussion with partner organizations specifically on the use of the database and sharing information for better coordination. However, the situation with the internet is still unfavorable in Turkmenistan which is preventing wide use of the online information sharing tool.

CCM Meeting

On March 5, 2008 Sona Valiyeva and Atabay Tashliyev participated in the CCM meeting. Agenda for the meeting was to provide the annual (2007) report on fulfillment of the "National program on HIV/AIDS/STI prevention in Turkmenistan for the period of 2005-2010" and to present 2008 CCM work plan. The CCM meeting was led by the Deputy Minister of Health, Mr. Elyasov G.E. His opening speech was started with talking about the Youth Center opening as a good example of partnership in HIV prevention. He thanked CAPACITY and USAID for a good collaboration and called all partners to join together in implementation of HIV prevention program.

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

Youth Center

During this quarter, formal approval for the Youth Center site was received. It is based at the Children's Fund of the Magtymguly Youth Organization. The site was renovated, equipped and furnished and prepared for the official opening.

On February 18-21, with technical assistance of PSI, the ToT on HIV/STI and drug use prevention among vulnerable youth was conducted. The participants included a representative of the Ministry of Health, of the AIDS Center and a team of 17 young people (most of whom were 15-17 years of age). The training was attended by USAID Yelena Samarkina (Health Specialist) and Lynn Gardner (Public Affairs) attended the last day of the training. Both were pleased with the results. Training was covered by the local newspaper "Neutral Turkmenistan".

Following the training, with participation of PSI staff, the Youth Center Administrative Director, Tahir Ovezberdiyev and Peer Education Coordinator, Allamurat Tuyliyev were hired. Both participated in the training and were recommended for their performance during the training and based on their experience.

To identify the youth interest in alternatives to risky behavior activities, a survey among youth of 9th and 10th grades of School #29 (located close by the YC) was conducted. As a result, the following activities were selected:

- Computer class
- English class
- Table tennis
- Chess and draughts

All activities were organized prior to opening of the Youth Center. A computer class was organized in cooperation with IREX and an English class in cooperation with ACCELS.

On March 4, 2008 was held official opening of the Youth Center. The opening was attended by the following official peoples: Chargé d'Affaires, R. Hoagland, Chief of Prevention and Treatment Department of the MoH, Mr. B.Ovezklychev, the Deputy Chief of the Magtymguly Youth Union, A.Bekiyeva, USAID Country Representative A.Moretz, USAID Regional Office, Khorlan Ismailova and others. The YC opening was broadly covered by media - the local newspapers "Neutral Turkmenistan", "Nesil", and the TV channels "TV-4", "Miras" and was posted online.

Since the opening of the Youth Center coverage was as follows:

- 272 ARY contacted with program;
- 114 (68 males and 46-females) ARY during 13 trainings in Ashgabat;
- 188 ARY were covered by alternatives to risky behavior activities (19- chess, 123 – computer class, 9-English class, 97-table tennis)

On March 18, 2008 a focus group discussion was held with the Youth Center volunteer to discuss YC logo. There was presented six possible logos. Among six, with suggestions for some modifications, one logo was selected.

To provide the counseling services to at risk youth at the Youth Center, advertisement for recruitment of gynecologist, physiologist and dermatovenerologist was posted in the local newspaper of “Neutral Turkmenistan”.

Operational Development/Institutional Development Training

On March 24-28, ToT “Development and implementation of HIV prevention service delivery system for vulnerable youth” was held. To conduct the training, trainers from International HIV/AIDS Alliance in Ukraine were invited. Participants of ToT were representatives of Women’s Union, Youth Union, National and velayat level AIDS Centers and hyakimlik. During the ToT, participants had developed plan of activities that they will be implementing at their sites.

F. Uzbekistan

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

M&E Manual and National Communication System for NACC

During the previous months, CAPACITY's seconded M&E and Communications specialists at the National AIDS Coordination Committee (NACC) worked strenuously on development, agreement, and approbation of two technical papers. These are the M&E Manual and the National Communication System for Effective Implementation of the Strategic Program on the Response to HIV Infection Prevalence in Uzbekistan for 2007-2011 (SP). The papers were reviewed by all interested partners, including UNAIDS experts, and approved by the NACC.

Strategic Plan Monitoring Visits/Oblast AIDS Coordination Committee Meetings in Bukhara and Navoi

In 2008, the Secretariat of NACC is planning to monitor the implementation of the Strategic Program on HIV for 2007-2011 in all regions of Uzbekistan. The Secretariat/NACC officially requested CAPACITY to assist them in providing monitoring visits to the regions. With this purpose a working group on monitoring of SP implementation in Navoi and Bukhara regions was established. Representatives of NACC, Secretariat/NACC, Republican AIDS Center and international organizations (as observers) were included into the WG.

During the visits, WG members had a series of work meetings with the representatives of regional government authorities, regional health departments, AIDS Centers, TPs, NGOs and institutes of higher education and colleges. Moreover, one-day seminar/discussion on monitoring results of realization of SP regional implementation plans for the members of Oblast Coordination Committees and representatives of Navoi and Bukhara AIDS Centers.

Online HIV Database Promotion in the countries

In Uzbekistan, the Online Database as part of the National Communications Strategy was formally approved by CCM. In the next quarter we anticipate moving forward with its implementation.

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

HIV Module Development for Mahalla/Community Leaders

In the framework of increasing capacity of traditional communities (mahallas) in HIV prevention and reduction of stigma and discrimination towards vulnerable groups among the general population, a number of meetings were conducted with the Republican AIDS Center (RAC) and Mahalla Fund with the purpose to discuss the importance of the issue and possible ways of cooperation and support from the CAPACITY Project in this regard. Thus, after negotiating with RAC and Mahalla Fund, together with international partners (Health-2/World Bank Project) it was agreed to establish a group of national experts for development of a training module on HIV prevention and stigma and discrimination reduction for mahalla leaders.

The Training Module on “HIV prevention and stigma and discrimination of vulnerable groups and its reduction among population” developed under the CAPACITY technical assistance was reviewed by TIAME and Health Institute experts and approved by the Republican AIDS Center/Ministry of Health and Republican Mahalla Fund. As active work in this direction is to be lead in all regions of Uzbekistan, including rural areas, it was essential to develop the module in two languages, to ensure easier understanding of the information material by target population.

In terms of ensuring sustainability of the activities provided, the CAPACITY Project initiated a partner work meeting, during which 5 organizations, including the Republican AIDS Center, Fund Mahalla, Health Institute/MoH, Health-2/World Bank Project and the CAPACITY Project signed a Joint Work Plan on scaling-up of HIV prevention activities among the general population through Mahallas.

Operational Development/Institutional Development Trainings on Project Management for CAAP and GFATM Sub-Recipients

In 2006-2007, the CAPACITY Project provided technical assistance to ASOs, NGOs and communities in improving their skills in project proposals development for major donors in Uzbekistan, including CAAP and GFATM. A number of organizations that had taken part in the trainings, received financial support from the donors and, together with other sub-recipients from all regions of Uzbekistan, needed skills and knowledge to successfully manage their projects.

In this regard, as the next step of CSMS realization in Uzbekistan the CAPACITY Project assisted the donors in conducting two 5-day trainings for their sub-recipients aiming to train the participants (ASO and NGO representatives) on management of projects on increasing coverage of vulnerable population groups with HIV prevention activities in order to strengthen their capacity in effective HIV prevention. More than 50 participants gained the knowledge and skills required for proper project management and were awarded with certificates signed by the MoH.

Interventions with Sex Workers

Tashkent (Chilanzar district)

The target sex worker population at this site totals 5,000 and to date 5,497 sex workers have been contacted (cumulative). This quarter:

- Mini-educational sessions: 371 sex workers in 150 mini sessions
- Free Condoms distributed: 744
- Brochures distributed: 451 (Themes were HIV and AIDS, STI; Condom is my protection, Access Your Own Risk)

Pre and Post Test Results of BCC among sex workers

Location	Pre Test %	Post Test %
Tashkent	40	96

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, 69,748 (35,340 males, 34,408 females) vulnerable youth were contacted in the site (cumulative). This quarter:

- Peer education trainings: 1,536 (962 males, 574 females) vulnerable youth during 391 peer trainings
- Mini-sessions: 5,417 (2,798 males, 2,619 females) vulnerable youth during 1,812 mini sessions
- Peer Education Event: 55 (36 males, 19 females) attended 1 events
- Condoms distributed: 4,582
- Brochures distributed: 6,100

Increasing access to Condoms through Social Marketing

- No Sales happened because of closing condom Sales Department due to government restrictions in Uzbekistan
- 1,741,781 condoms disseminated Project to Date

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

TWG Meeting on M&E results of HIV/TB Model Realization in Pilot Regions

As the CAPACITY Project actively works on ensuring sustainability of HIV/TB Model realization in pilot regions of Uzbekistan (Tashkent city and Tashkent oblast) and its dissemination to other regions of the Republic, it was essential to conduct a regular TWG meeting on M&E results of HIV/TB Model realization focusing on the following issues:

- Discussion and amendment of the new quarterly reporting forms/check-lists after their approbation during last M&E activities;
- Discussion of the instruction developed for the new quarterly reporting forms/check-lists for both TB and AIDS services.

Thus, all issues related to M&E activities and further actions on HIV/TB Model realization were discussed; slight changes were made in the forms/check-lists and instruction, and finally they were approved by TWG members.

HIV/TB Model Sustainability

The CAPACITY Project initiated a meeting with Tashkent Medical Academy (TMA) with the purpose to discuss the results of the HIV/TB Module approbation. During the discussion, its successful integration and the necessity of its dissemination to all medical institutes of Uzbekistan (6 in total) were recognized.

In terms of further ensuring sustainability of HIV/TB Model realization, the CAPACITY Project agreed to support a series of trainings for teachers of all medical institutes of Uzbekistan on HIV/TB. At the same time, due to the limit of the Project funds for implementing the entire activity in this direction, it was decided to involve interested international partners (GFATM Project on TB and HOPE/TB) in terms of cost-share.

Therefore after the discussion with partners, an Agreement was developed and signed, according to which, all medical institutes will be covered by ToTs within the following two months (May-June, 2008). Presently, MoH draft Order is submitted to the Ministry for approval.

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

Training Module on HIV/AIDS for Primary Health Care (PHC) Providers

With regard to reformation of PHC system in Uzbekistan, PHC providers are to carry out more duties on population sanitation and prevention of various infections. Thus, active PHC specialists' efforts are focused on prevention and reduction of the most dangerous diseases, such as HIV/AIDS, STI, tuberculosis, drug addiction, etc.

In this connection, it became evident that PHC providers did not have enough skills and knowledge on HIV/AIDS and stigma and discrimination reduction towards vulnerable groups. The CAPACITY Project initiated a meeting with all interested partners, both national and international, to discuss possible ways of providing assistance to PHC. As the result of the meeting, a joint work plan was signed by all of the partners and a group of national consultants for development of the Training Module for PHC providers was established based on MoH Order. Thus, the CAPACITY Project rendered technical assistance to the Thematic Working Group (TWG) of national consultants in the Module development.

In the middle of March, TWG successfully completed its work and now the Training Module is being reviewed by experts. As of today, the Training Module has received positive references from several international and national experts, and by the end of the month the Module will be submitted to MoH for the approval. A dissemination and planning workshop for sharing the key content of the manual and scheduling the next steps for holding the TOT and training programs for the PHC physicians, in line with the training manual and module, will be organized following the MOH approval.