



# CAPACITY

CENTRAL ASIAN PROGRAM ON AIDS CONTROL IN VULNERABLE POPULATIONS

## QUARTERLY TECHNICAL REPORT



**First Quarter Report – Third Year  
1 October 2006 – 31 December 2006  
Submitted 31 January 2007**

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:**

This quarter saw the continued expansion of the civil society mobilization strategy from the regional level to the countries and oblasts. Regionally trained Umbrella NGOs took their new skills in project development and proposal preparation to the oblasts where they trained numerous government and non-government AIDS service organizations. NGO proposals have been developed and NGOs hope to submit for grants to international donors. This was a major step by CAPACITY to build an army of implementers that will work toward increasing coverage of HIV prevention among vulnerable populations.

During this past quarter, the Youth Power Center in Almaty completed its first year of operation. Under CAPACITY, this was to be the limit of implementation of this YPC. However, because of budgetary savings, the YPC implementation will be extended. At the same time, CAPACITY has begun discussions with other stakeholders to establish a sustainability plan for the YPC, so that service may continue uninterrupted.

At the end of the quarter, CAPACITY was given indication from the CAAP project that funding will be awarded for the implementation of 7 comprehensive HIV prevention models in four countries. Once funds are allocated, the models will be implemented by local AIDS service organizations with technical assistance provided by CAPACITY. As of the end of the quarter, funds have not yet been allocated, but we remain ready for implementation as soon as they are.

In Turkmenistan, CAPACITY continues to wait for the signing of our MOU. We have every indication that this will eventually happen, but we are maintaining a holding pattern until it does. CAPACITY also continues to wait to hear about funding for a submitted proposal for providing TA to youth centers for HIV prevention in Turkmenistan.

As we are now in the third year of the project, CAPACITY intends to begin its work on strategy 4, integrating AIDS services with other health care services. To this end, a concept paper is being developed to outline how this work will take place. The paper is currently in draft form and will undergo serious discussion in the next quarter.

Progress continues to be made in the area of TB and HIV. The models in Tajikistan, Uzbekistan, and Kyrgyzstan have once again undergone quarterly monitoring visits. Results of the monitoring will be available during the next quarter.

Towards the end of the last quarter, CAPACITY held a regional meeting to develop a strategy for assisting the national stewards to improve communications between themselves and the stakeholders working on the response to the HIV epidemics in their countries. That strategy is currently in draft form and will be shared with stakeholders and the national partners soon.

## **II. Programmatic Progress**

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

#### **A.1. Regional**

##### **CAPACITY Internal Communications Guidelines**

CAPACITY finalized the Project Communications Guidelines the purpose of which is to provide a clear and concise statement of communication guidelines for CAPACITY Project staff for effective and appropriate internal and external communications. These guidelines are intended to facilitate CAPACITY's compliance with the communications requirements of the Project's donor, USAID, headquarters office, and each country's local legislative requirements. The Communications guidelines update the Project identity which is applied to a variety of project communication documents and templates, including administrative communications, project activity forms, and public outreach materials. Project communications guidelines will be followed by all Project staff, including Implementing Partners, when representing the Project, to ensure successful implementation of the Project.

##### **Promoting the Project**

The *Project brochure* was developed in English and Russian to provide basic information about the overall Project activities on its four strategic directions in Central Asian countries. The brochures will be widely disseminated during the meetings and conferences to inform the stakeholders and promote CAPACITY's activities and strategies.

CAPACITY started development of the *Project website* to host information about the Project itself and provide links to NACM websites in the region. The website will be an effective tool for communicating with partners and sharing project information and materials.

##### **Monthly Bulletins**

CAPACITY continued to issue the Monthly Bulletin from the regional office every month. The Monthly Bulletin serves the purpose of informing the wide range of stakeholders throughout the CAR on CAPACITY's activities and progress in the region.

##### **Strengthening NACM Communications**

In December 2006 CAPACITY organized a regional workshop to develop technical recommendations to NACMs on improvement of information exchange between NACM and national and international stakeholders. The meeting provided the opportunity for communications specialists from 4 Central Asian countries to discuss possible ways of improving stewardship and coordination through implementation of better information exchange system by key stakeholders. Specifically, the following issues were discussed:

- overview of current situation and needs assessment to improve coordination and information exchange between all HIV/AIDS program stakeholders in compliance with Three-Ones Principles;
- development of the information exchange system which would facilitate HIV partners involvement in coordination of efforts against HIV epidemic;
- creation of database for HIV/AIDS activities, including pool of trainers and trainings, HIV/AIDS programs and projects, grant activities, NGOs and HIV-service

organizations, existing information materials, including modules, curricula, technical papers etc; and

- use of communications tools for improving communications and involvement of all stakeholders.

As a result of the meeting the draft Technical paper was prepared which describes the proposed model of information exchange system and suggests a number of information exchange tools which can be used by NACMs in each country for streamlining and coordinating stakeholder communications. The workshop was marked by participation of CARHAP representatives who contributed to the overall meeting outcomes, specifically to the development of the electronic database model and its matrices.

### **Monitoring and Evaluation Support**

CAPACITY started to work on the Regional M&E Guidelines for NGOs. Support and agreement to work together while developing the guidelines was received from UNAIDS, CARHAP and CAAP. CAPACITY provided technical assistance to the CAAP Project in developing project's M&E indicators.

### **Conference Abstract Submissions and Acceptance**

CAPACITY submitted three abstracts for presentation to the Global Health Council Conference to be held in May 2007 in Washington, DC. One abstract was accepted, entitled, "Partner Cooperation Improves National AIDS Coordination," which expresses results CAPACITY has achieved through partnerships with other stakeholders. Acceptance of this topical abstract is testimony to the fact that the CAPACITY strategy to work in close collaboration with other stakeholders to support the national AIDS programs is an important one.

## **A.2. Kazakhstan**

### **Support to National Steward**

At the request of the RAC, the CAPACITY Project developed a paper to demonstrate the value of the formation of an HIV/AIDS CCM under the Kazakhstan government. The paper was submitted to the RAC for consideration.

### **Secondment Staff**

**M&E specialist** continues her work at the RAC. Project indicators for NGOs were developed and presented for consideration at the Third Annual NGO Forum in Almaty, in November 2006. She provided technical assistant to the GFATM PIU for the review of applications and for processing, analyzing, and summarizing the reporting forms submitted by sub-recipients. Jointly with CDC she continues her work on the creation of the ARVT patient monitoring computer database.

**Communications Specialist** was hired in November 2006 and was seconded to the RAC. In December, Communications Specialist participated at the Regional Meeting of all Communications specialists with the aim of developing "Communication Strategy" paper.

### A.3. Kyrgyzstan

#### Policy dialogue with major national stakeholders

Project activities continued to be done in the direction of policy dialogue with major national stakeholders and other international partners and donors. These activities have been done in the form of official meetings through the involvement and participation of SMT from regional office as well. The project team with support from the side of Regional Director and Regional Operations Director participated at the CMCC special sessions. In December, Regional Director and Country Director took part at the working meeting of the MoH and National program “Manas Taalimi” team whereby CAPACITY advocated for a policy of high coverage of vulnerable groups through mobilizing the civil society strategy.

#### Seconded Staff

An Operational Agreement, for CAPACITY seconded staff to the AIDS Unit, between the AIDS Unit and CAPACITY has been officially signed. Initially it was agreed that this document would be signed in the form of Memorandum of Cooperation among UNDP/KR, AIDS Unit and CAPACITY, however, AIDS Unit has proposed to sign it only between two parties.

During the reporting period Seconded Staff continued their efforts in supporting the coordination mechanism of CMCC/AIDS Unit. This led to a number of activities that have been facilitated by and in turn contributed to the national stewardship. Moreover, workshops on HIV prevention in working places have been carried out by them for a number of state agencies.

**Communication specialist:** At the end of October, a working group has been formed by international and national organizations for developing joint plan and activities devoted to the World AIDS Day. The active membership led to a number of work fulfilled by communication specialist such as designing of the fliers, invitation cards and information labels and collecting all the relevant materials and information for special issuance of a digest devoted to the WAD in English and Russian. Few articles have been prepared by her on the activities carried out on the WAD (special concert, Jonathan Mann Award, award to journalists for the best article devoted to the WAD, article about US ambassador’s visit to Bishkek Youth Power Centre) and overall support and coordination of the activities that other organizations did, exchange of information among them and other awareness raising materials printed with the support of UNDP.

**NGO Liason specialist:** facilitated the organization of the two oblast level workshops in Osh and Jalal-Abad. It was three-day workshop in each site that enabled Umbrella NGO members and leaders to upgrade their skills and improve practices around project proposals development, thereby contributing to the high coverage of vulnerable groups through putting achievable objectives and effective planning of preventive measures.

**M&E specialist:** facilitated the work of M&E Technical sector of CMCC and other M&E experts on the draft documents “Regulation on the State M&E system of fulfillment of the HIV/AIDS State program in KR”, “National Plan of M&E”, finalizing “Manual on M&E of the situation on HIV/AIDS in KR”, and “Manual on national (key) indicators for M&E of the fulfillment of State program on preventing HIV/AIDS epidemic and its socio-economic consequences in KR for 2006-10”. In early November, she took part in study tour to India. This study tour has been funded through UNICEF and entitled “PMTCT and other

preventive programs among youth”. This study tour enabled experts from Kyrgyzstan to learn best practices on PMTCT and M&E tools as well in India. In December 2006, she participated in regional workshop entitled “Operational Survey” in Tashkent organized by the Central Asian Committee on Aids Control and Crime, UN. Agreeing the draft document “Regulation on state system of M&E of state HIV/AIDS program in KR” with all interested state agencies and ministries and comments have been received from them.

## **Donor Collaboration**

The project team facilitated a number of meetings with RAC, UNODC, KFW, CARHAP, AFEW, CAAP and USAID aimed at better coordination of activities and avoiding of duplication among them. A few more separate meetings were held by the country team with newly appointed CARHAP Regional Director and Republican AIDS Centre Director for building new relationships, cooperation and further coordination of activities. During this quarter, CAPACITY took part in the USAID funded health partners meeting. CAPACITY hosted this meeting at its office. CAPACITY took part at two conferences organized by the Ministry of Justice, topic of which related to health in prisons and HIV prevention. Project team took part at the following CMCC’s technical sectors meetings: these are mainly sector of M&E, sector on Information, Education and Communication and sector on Health and Social Support.

## **A.4. Tajikistan**

### **Staff Secondment**

During the reporting period seconded specialists continued to provide technical assistance to NACM. All specialists participated in the CAPACITY regional meeting in Issyk-Kul where they made presentation on achievements, obstacles and perspectives of their work. Besides provision of specialized technical assistance to NACM, Seconded Specialists took active part in arranging and conducting NACM major events (Conference on Expansion of HIV Epidemiological Surveillance in Tajikistan, WAD Partnership Forum and mass events, launching session of NCC Technical Working Group on Treatment, Care and Support).

**Communication Specialist** continued editing and dissemination of RAC monthly bulletins. Audience of the bulletin has been broadened and includes all Ministries – members of NCC. Every issue of the bulletin is regularly posted at [www.untj.org](http://www.untj.org) web-site. Eventually the Bulletin became a popular communication tool, evidence of which is large number of articles being submitted by partners. Initial version of NCC web-site was finalized and presented to NCC Secretary for review and comments. Upon his approval the site will be registered and posted in the Internet. At request of Head of RAC, Communication Specialist acted as a member of the evaluation committee of WAD media contest organized by CAAP. In December 2006, Communication Specialist participated at the CAPACITY regional workshop on communications to develop technical paper on improving National Information Exchange System.

**M&E Specialist** participated in evaluating the quality of epidemiological sentinel surveillance among pregnant women in Dushanbe at the request of Head of RAC. In December 2006 M&E Specialist closely worked with Alexey Ilnitsky (Regional M&E Adviser, UNAIDS) to develop M&E Plan of National Strategic Plan on HIV. Further activities will include update of National M&E Guidelines, development of a list of technical and financial needs required for implementation of M&E of National Strategic Plan.

**NGO Liaison** continued to work on preparations for the National Forum of AIDS-servicing NGOs. Owing to her efforts, community of AIDS-servicing NGOs elected the Forum Organizational Committee, consisting of representatives of NACM and leading AIDS-servicing NGO ("Most", "Guli Surkh", "Center for Legal Support of Youth", RAN). The Committee has drafted the agenda of the Forum which is being reviewed by the NGOs community. Upon finalization of the agenda an appeal for donors' funding along with the budget proposal will be submitted to international and governmental organizations. NGO Liaison provided series of consultations to NGOs on the issues related to interaction with NACM and project proposal development. TA on development of work plan was provided to seconded specialist on work with vulnerable groups newly recruited by CAAP for NACM. NGO Liaison also assisted in arranging trainings for AIDS-servicing organizations on HIV prevention among IDUs (see Section B4).

### **Other support to NACM**

CAPACITY together with UNAIDS and CARHAP supported NACM in organizing World AIDS Day Partnership Forum. The Forum held on 28 November 2006 aimed to improve information exchange between NACM and partners. Also CAPACITY rendered direct assistance (both technical and organizational) to NCC Secretariat in arranging first session of NCC TWG on treatment, care and support (6 December 2006). As a result of the meeting, the chairman of TWG was elected (TWG members decided that this TWG should be chaired by the Head of Medical Services Department of MoH regardless of who is in this position). Also TWG members agreed to integrate TB/HIV TWG and other existing relevant TWGs to the above TWG. CAPACITY, CAAP and NCC Secretariat continued discussion of provision of TA on integration of Three Ones Principles into the governance system. Since this TA was delayed due to difficulties with recruitment of regional consultant, NCC Secretariat proposed to hire local consultant to work with NCC TWG on National Policy and Legislation.

### **Collaboration with Partners**

CAPACITY held a meeting with OSI representatives to discuss areas of collaboration between CAPACITY, DDRP, CARHAP and Public Health programs implemented by OSI. Joint activities on supporting NACM in introduction of Three-Ones Principles at oblast level was identified as key area of cooperation with CARHAP. To improve CAPACITY reporting system and to contribute to strengthening NACM communication process **the Annual Report** on CAPACITY Tajikistan Year 2 activities along with Year 3 Work-plan was prepared and disseminated among partners, including Ministry of Health, NCC Secretariat, RAC, umbrella NGOs and international agencies.

## **A.5. Turkmenistan**

### **Orientation meetings**

Country representative has attended orientation meeting with regional staff in Almaty. Following the orientation meeting, she participated in all-staff-meeting held in Issyk-Kul, Kyrgyzstan.

## **MoU**

Negotiation and revision of MoU were continued throughout the quarter. By December, after reaching full agreement with Turkmen side on the document, MoU was sent to the Ministry of health and medical industry of Turkmenistan for approval. While awaiting MOU signing, country representative attended the USAID's partners meetings and worked on organizational issues.

## **A.6. Uzbekistan**

### **National Strategic Program**

As a TWG member, The CAPACITY Project/Uzbekistan continued to participate in weekly meetings on evaluation of Strategic Program on Response to HIV/AIDS Epidemic in Uzbekistan for 2003-2006 and development of the new Strategic Program for 2007-2011. The CAPACITY Project/Uzbekistan provided technical assistance to NACM by hiring a consultant for development of youth component of new Strategic Program.

### **Forum of partners working on HIV prevention in Central Asia**

The CAPACITY Project took active part in the Forum of partners working on HIV prevention in Central Asia, conducted in Samarkand city. The Forum was held in the framework of realization of the activities, planned by CAAP in partnership with UNAIDS. The main goal of this event was to join efforts of international organization, projects and national partners on efficient resource-use for HIV prevention. During two days of the Forum, the participants exchanged information on each other's activities planned for 2007 in Central Asia aiming to coordinate efforts on HIV/AIDS prevention and treatment and regional initiatives.

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

### **B.1. Regional**

#### **CAPACITY Prevention Models**

Regional HIV Prevention Proposal combined from seven proposals and submitted in August 2006 to CAAP was approved. The process of proposal funding will start in 2007.

#### **Civil Society Mobilization**

The CAPACITY regional office has been busy during this quarter supporting the expansion of the civil society mobilization strategy at the country level. Skills gained and lessons learned at the regional workshop during the last quarter have been imparted during oblast level workshops in the countries.

Results of oblast trainings on development of project proposals conducted at the end of the previous quarter were summarized. CAPACITY country teams were engaged to the implementation of the CSM Strategy in selected pilot regions. Oblast-level trainings on project proposals have been also completed in all oblasts of KG, UZ. The participants of the trainings include representatives of governmental organizations (oblast AIDS centers, narcology centers, dermatology and venereology centers) and non-governmental organizations (NGOs, initiative groups, Mahalla) of KG, TJ, UZ.

The oblast trainings covered such issues as completion of the proposal development process, discussion of partners' responsibilities under the projects, and the necessity of providing focus-groups with vulnerable populations.

### **KAP Survey among Vulnerable Youth**

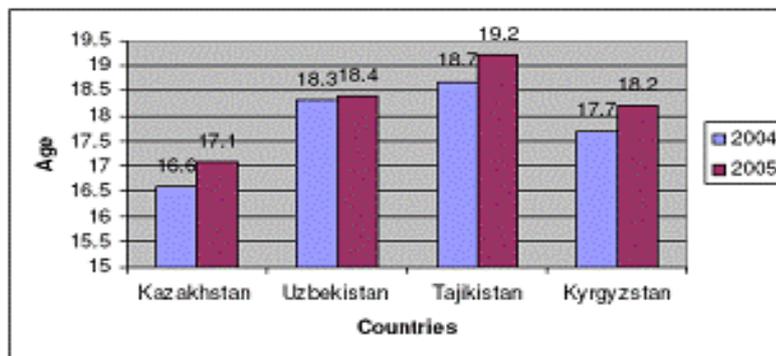
Under joint funding by CAPACITY and DDRP, PSI/Central Asia has finalized the analysis work on a second round quantitative tracking survey with youth aged 15-25 in Uzbekistan, Tajikistan, Kyrgyzstan and Kazakhstan. The survey is utilized to gain insight into youth's knowledge, attitudes, practices and beliefs (KAPB) related to HIV/AIDS, as well as their sexual and drug use behavior. The study is used to monitor prevention programs that are appropriate to the ideas, interests, problems and capacity of youth. Totally there were 2,400 youth aged 15-25 recruited and interviewed in all four countries (600 youth per country) by using four-stage probability sampling.

Using the data from this round and the first round, comparisons can be made to show the effects of prevention efforts under CAPACITY and DDRP. Highlights from the comparison are as follows:

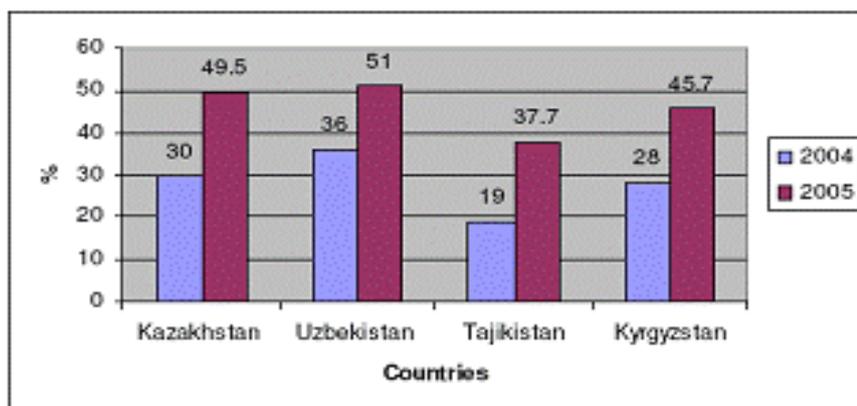
- The age of sex debut has increased slightly in all four of the target countries
- There are large increases in the percentage of youth having no misconceptions about modes of HIV transmission
- There are large increases in social support for condom use (30-40 points upper in 3 out of 4 countries)

The following graphs show the magnitude of the changes over time.

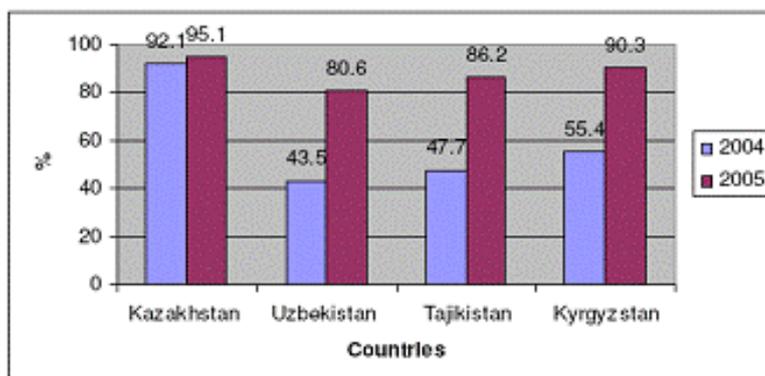
*Graph #2 Reported age of sexual debut among surveyed sexually active at-risk youth*



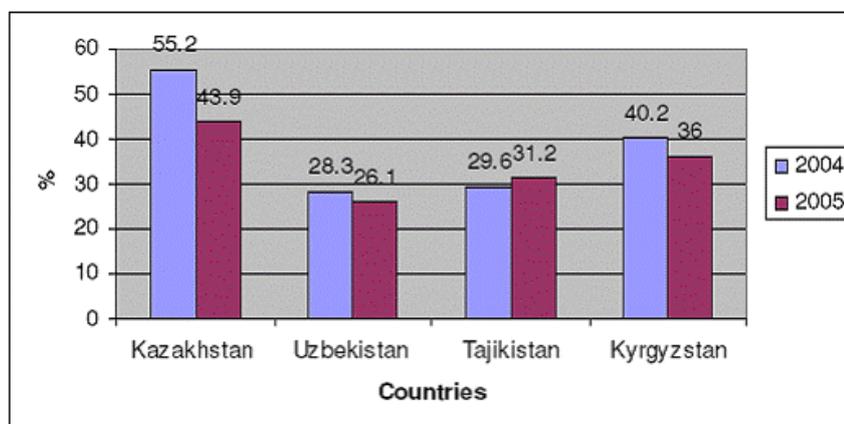
Graph #7 Percent of surveyed at-risk youth who had no misconception about ways of HIV transmission



Graph #9 Percent of surveyed at-risk reporting that they believe their friends would approve of them using condoms



The survey gives valuable information on where there is a need to improve. For example, there are falling condom use rates in all countries except Tajikistan (see below graph), which shows us the necessity to extremely extend evidence-based programming and social marketing for behavior change.



## **B.2. Kazakhstan**

### **Participation at NGO Forum**

In 29-30 November 2006 the 3<sup>rd</sup> Annual NGO Forum was held in Almaty. The CAPACITY Project was a co-organizer of this event and provided support for representatives from 8 pilot umbrella organizations in participation at this forum. During the forum the CAPACITY Project touched the issue of GFATM 7<sup>th</sup> round that will be announced in March, 2007 and participation of Kazakhstan. Representatives of four associations decided to join in one information communication network and apply to RAC with a possibility of NGO participation at the 7<sup>th</sup> round. In response to this initiative CAPACITY proposed its assistance on possibility of considering issues on providing technical support for creation of this informational communication network.

### **Activities dedicated to the World AIDS Day**

**KIMEP “SoMuArt” Festival:** KIMEP conducted “SoMuArt” Festival with series of workshops on different social topics and HIV/AIDS was one of them. About 200 students from KIMEP and other universities participated at this event. The CAPACITY Project was involved into the HIV/AIDS session and had an opportunity to deliver its message to the students. The action plan of this workshop in the frame of the CAPACITY Project activity was as following:

#### 1. Presentation

- information about the CAPACITY Project in the whole - principles, aims, activities, and countries the project is active in;
- general HIV/AIDS situation in the world and in Kazakhstan;
- latest numbers, expansion among vulnerable groups, and basic ways of infection.

#### 2. Consultation

- There was a "consultant's table" for students' questions concerning HIV/AIDS where students could come and get all interested information on this issue.

#### 3. Interview to "Khabar" TV channel reporter

- KIMEP invited different Mass Media to the action. "Khabar" TV channel reporter asked about the most popular HIV/AIDS questions among students, about the necessity and effectiveness of such actions, and other general HIV issues.

#### 4. HIV/AIDS film

- During the event, an HIV/AIDS film was projected on a wall behind the "consultant's table".

**Central Asian University:** The CAPACITY Project participated at the Central Asian University Conference on HIV/AIDS general issues. The aim of the conference was to inform CAU students about HIV/AIDS, to tell about the importance of the issue and ways of HIV transmission and prevention. CAPACITY made a presentation on HIV/AIDS basic knowledge and answered questions. After the presentation students answered the questionnaire on general knowledge. Brochures on HIV/AIDS were disseminated afterwards.

**National Medical University:** The Kazakh National Medical University annually holds the conference dedicated to the 1 December, World AIDS Day. The purpose of the conference is to inform students and instructors about different aspects of HIV/AIDS. About 1,000 students and faculty participated at this event and various issues of HIV/AIDS were covered (Epidemiological situation across Kazakhstan and Almaty, etiology and pathogenesis of virus, clinical symptoms, diagnostics and treatment, HIV prevention, ways of transmission of HIV, etc.). This year the CAPACITY Project participated at this conference and Yelena Kudussova made a presentation on the topic "Stigma and Discrimination". The whole conference was accompanied by sketches on the theme of HIV/AIDS prepared by medical students of various courses.

**With Sex Workers:** 24 Specialized Educational Trainings based in hotels «Pole chudes», «Consul», «Arzu», «Rassvet», saunas and private flats.

### **Activities in South Kazakhstan Oblast**

As the result of the AIDS outbreak among children and mothers in SKO, CAPACITY Project initiated the work of experience exchange between SKO Medical Academy and National Medical University on information awareness strengthening of medical and non-medical students of Shymkent aiming at decreasing stigma and discrimination of PLHIV. This initiative was supported by national and international partners and several meetings with AIDS Centers, Medical Academy and University, NGOs were held on this topic. During these meetings issues of cooperation, future plans were discussed.

### **Interventions with Sex Workers**

#### **Almaty (Saina, Seiphullina and Auezova streets)**

The target sex worker population at these sites was estimated to be 3,000, however, to date, 5,667 sex workers have been contacted (cumulative). 744 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: 225 sex workers during 66 trainings;
- Mini-educational sessions: 1,253 sex workers during 440 mini-sessions (Themes were HIV and AIDS, STI, Communication skills, Responsible behavior, and Condom Use)
- Free Condoms distributed: 4,711
- Brochures distributed: 2,515 (Themes were HIV and AIDS, STI, Condom is my protection, Assess Your Own Risk)
- Edutainment events: 31 sex workers during 2 edutainment events conducted under the slogan "Stop AIDS – keep your promise": at Saina, and Seifullina streets

Results of sex worker targeting activity were presented at the roundtables organized in Auezovckiyi and Turksibskiyi akimat (Almaty, November, 30 and December,13).

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

Location	Pre Test %	Post Test %
Almaty	48	90

### **Referral Systems on STI diagnostic and treatment:**

Together with City Skin Virology Institute (Friendly Cabinet) street-based VCT for STI and HIV among sex workers of Almaty was organized.

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

Referral work based on Letters of Intentions signed with CITY AIDS Center and Friendly Cabinet on Republican Virology Institute was continued. As a result, 105 sex workers were referred to Friendly Cabinet of City AIDS center and actually visited it during the reported Quarter. Together with City AIDS Center Regular Monthly VCT among SWs was organized. Totally during the Quarter 105 sex workers were tested and the results of diagnostics were: Candida – 3; Syphilis – 5; Gonorrhea – 1, Chlamydia - 4.

### **Condoms Availability: Monitoring**

Outreach around New Hot zones in Almaty (Kurmangazu –Kunayev str.) was continued by recommendation of City AIDS Center. Outreach Workers and Sales Agent evaluated results of promotional campaign “Mystery Client” among drug stores located in hot zones.

### **Mass Media Activities**

World AIDS Day: 2 edutainment events with 31 participants were conducted under the slogan “Stop AIDS – keep your promise”: at Saina, and Seifullina streets; Together with the newspaper “Liter,” outside confidential interview of sex workers at Saina street on HIV related problems of sex work and personal risk assessment of sex workers was organized.

### **Interventions with Vulnerable Youth**

#### **CAPACITY Youth Power Center (CYPC) in Almaty (Rabochii poselok).**

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). To date, 5,256 vulnerable youth ( 2,836 males, 2,420 females) have been contacted. During the present quarter 1,041 vulnerable youth have been contacted during peer education, peer outreach, alternate activities and Youth Friendly Counseling. This Quarter:

- TOTs: 19 participants during 1 TOT
- Peer education trainings: 209 (116 male, 93 female) vulnerable youth during 57 peer trainings conducted by 5 peer educators (Themes include HIV/AIDS/STIs 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)
- Mini-sessions: 653 (334 males, 319 females) vulnerable youth during 280 mini-sessions
- Alternate activities: 299 (159 males, 140 females) vulnerable youth (Activities include English Language Lessons, Kazakh Language Lessons, Bingo , Guitar Club, First medical help; Art therapy; Computer Club; Break dance Club; Table Tennis club)
- Peer Outreach: 445 (247 males, 198 females) vulnerable youth were contacted in non-traditional sites (streets, parks, discos, etc) (Themes include HIV/AIDS issues, personal risk assessment, and ways of protection and condom use and availability of treatment, social services and alternatives).
- Youth Friendly Counseling: 168 (70 male, 98 female) vulnerable youth received counseling by 2 counselors (gynecologist and psychologist)

(Themes include reproductive health related issues, contraception, family planning, prevention of STIs, problems of personal development, interpersonal communications, existential problems, psychology of sexual relationships, psychology of self development, referral to friendly cabinet of a women's clinic and CITY AIDS center on free VCT and STI testing and treatment).

- Free Condoms distribution: 702 condoms
- Brochures distribution: 712 brochures

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

Location	Pre Test %	Post Test %
Almaty	53	87

### **Assessment Survey Results**

The Youth Power Center Model was started in November 2005 when CYPC was officially opened by USAID. In the previous quarter an assessment survey was conducted in the district where the YPC is located (Turksibsky) as well as in a control district (Zhetysuisky). During this quarter, the data were analyzed and the results are summarized here.

Among Main Findings of the assessment survey were the situation of high sexual activity in both districts (90.7% - in Zhetysuisky, and 92.1% - in Turksibsky district). However, reported condom use at last sex with any kind of partner was relatively low (40.2% and 54.5% respectively). Sexual contacts with commercial partners was 4.1% in Zhetysuisky district and 3.0% in Turksibsky district. Almost a quarter of vulnerable youth in both districts personally know someone who has ever injected heroin, opiates or any other drugs. Segmentation analyses show that inconsistent condom users with any kind of sexual partners are characterized by beliefs that condom use undermines trust in relationships, lower belief that it is appropriate to use condoms with regular partners. Consistent condom users believed that their partners had other sexual partners in last 6 months and they also reported that condoms were available. Inconsistent condom users reported low availability of condoms but they intended to use condom the next time they have sex for HIV prevention. Vulnerable youth who are not socialized to IDUs were less likely to believe that experimenting with heroins/opiates is common in the community where they live than those socialized to IDUs. Regarding availability, vulnerable youth socialized to IDUs were more likely to know where to buy heroin or opiates if they decided to use drugs than those not socialized to IDUs.

### **Time Extension of YPC in Almaty**

The YPC was due to close in November 2006, but due to budgetary savings during the first year, implementation of the YPC has been extended into 2007, at which point a second assessment survey will be conducted to compare to the first and demonstrate any effect the YPC has on changing risky behaviors of vulnerable youth. The exact deadline for the extension is currently under discussion. In order to sustain the YPC beyond this date, other funding sources outside of CAPACITY are currently being sought. Work towards sustainability of the YPC includes:

- Funding from the Narcology Center;
- CAPACIY provided technical assistance to new YPCs in Almaty under authority of City Health Department (UNICEF) and City Education Department.

## YPC Reach among Vulnerable Youth

Over the course of the first year of operation, the YPC in Almaty contacted a total of 4,759 vulnerable youth in its various components. Details of contacts are illustrated in the following table.

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

Quarter	Y2Q1	Y2Q2	Y2Q3	Y2Q4	Y3Q1
Month	Nov-Dec	Jan-Mar	Apr-Jun	Jul-Sept	Oct
Year	2005	2006	2006	2006	2006
TOTs	1	1	1	1	1
People Trained	22	47	62	74	89
Trainings	54	112	163	172	219
Trainings Participants	213	764	1,090	1,137	1,301
Mini Sessions	108	268	525	1,062	1,247
Mini Sessions participants	150	493	1,352	2,543	2,924
Consulting	30	209	393	580	712
Events		24	28	31	44
Events Participants		401	1,181	1,501	5,976
Alternatives Participants	125	1,352	1,711	2,039	2,255
<b>Total # vulnerable youth contacted</b>	<b>509</b>	<b>1,894</b>	<b>2,972</b>	<b>4,215</b>	<b>4,759</b>
<b>% of vulnerable youth contacted</b>	<b>8%</b>	<b>31%</b>	<b>49%</b>	<b>69%</b>	<b>78%</b>

In addition to direct CAPACITY provided services, partner NGO “Peer to Peer” issued services to the YPC. Details of contacts made by Peer to Peer at the YPC are illustrated in the following table.

*Number of contacts among vulnerable youth by type of contact during 1 year operations of CYPC in Almaty, Rabochii Poselok district: Data of Partner NGO Peer to Peer (Note: All data are cumulative)*

Quarter	Y2Q1	Y2Q2	Y2Q3	Y2Q4	Y3Q1
Month	Nov-Dec	Jan-Mar	Apr-Jun	Jul-Sept	Oct
Year	2005	2006	2006	2006	2006
TOTs			1		2
People Trained			21		45
Trainings			12	63	98
Trainings Participants			774	965	612
<b>Total # vulnerable youth contacted</b>			<b>774</b>	<b>1,739</b>	<b>2,351</b>

In addition to the above activities in the YPC, CAPACITY established a Strong Referral System on STI Diagnostic and Testing with Friendly Cabinet of Clinics # 8 locating in Rabochi Poselok, Clinic # 10, Reproductive Health Center and Skin and Virology Institute, CITY AIDS Center.

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

### MOH Approved HIV Prevention Education Modules:

The following HIV prevention education modules have been approved by the Kazakhstan MOH:

- Module 1 “Risk Assessment” (Duration: 45 min);
- Module 2 “Basic information on HIV and AIDS” (Duration: 45 min);
- Module 3 “STIs” (Duration: 45 min);
- Module 4 “Communication Skills” (Duration: 45 min);
- Module 5: “Decision Making Skills” (Duration: 45 min);

- Module 6: “How to Say No” (Duration: 45 min);
- Module 7: “Responsible Behavior” (Duration: 45 min);
- Module 8: “Correct and Consistent Condom Use” (only for adult audience)

### **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, 32,562 (15,640 males, 16,922 females) vulnerable youth were contacted (cumulative). This quarter:

- Peer trainings: 3,013 (1,648 males and 1,365 females) vulnerable youth during 361 peer trainings
- Mini-sessions: 471 (new contacts) (274 males, 197 females) vulnerable youth during 252 mini-sessions
- Events: 5,105 (2,105 males, 3,000 females) vulnerable youth during 16 events
- Free Condoms distribution: 2,349 condoms
- Brochures distribution: 3,065 brochures

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

Location	Pre Test %	Post Test %
Almaty	75	92

### **Karaganda city:**

The target vulnerable youth population in these 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 1,822 (856 males, 966 females) vulnerable youth in the site (cumulative). This quarter:

- Peer trainings: 273 vulnerable youth during 23 peer trainings
- Free Condoms distribution: 425 condoms

### **Increasing access to Condoms through Social Marketing**

- During the Quarter, 845,200 units of condoms were re-exported from Tashkent to Almaty;
- 8,178 units of condoms were disseminated during various events and educational activities;
- 504,931 condoms were disseminated through traditional channels (pharmacies and shops), hot zone distribution and free distribution during educational activities;
- 10,800 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. Kyrgyzstan**

### **Civil Society Mobilization Strategy**

In October 2006, Umbrella NGOs from Jalal-Abad and Osh oblasts carried out their preplanned workshops on proposals development for 7 NGOs and 14 state institutions. The impact of these training has not yet been assessed though it is expected that Umbrella NGOs will be better prepared to meet the challenges in filling the application forms and developing

project proposals, thus increasing their opportunities for winning grants aimed at achieving high coverage of vulnerable populations. The head of NGO “Sotsium” Ms. Estebesova provided her consultancy services and took a lead for the finalization of proposals by all NGOs. There was expected the participation of CAAP Finance Manager at these oblast workshops but due to some reasons he was not able to come, however, NGO liaison specialist who facilitated these workshops as well organized telephone conference between him and participants. Thus, it made valuable contribution to participants understanding of the budget planning process and donor’s requirements.

### **Collaboration with Partners**

CAPACITY coordinated a number of meetings with CARHAP, CAAP, UNODC and AFEW with the aim to coordinate strategies and activities in civil society mobilization and joint activities accordingly.

### **Interventions with Vulnerable Youth**

#### **CAPACITY Youth Power Center (CYPC) in Bishkek (Leninski district)**

The target of Vulnerable Youth population at this site totals 36,983 by data of City Statistics Board). To date 18,188 (9,355 males, 8,833 females) vulnerable youth have been contacted. This quarter:

- Peer education trainings: 3,908 (1,885 males, 2,023 females) vulnerable youth during 2,069, 45-minute peer trainings conducted by 15 peer educators (Themes include HIV/AIDS/STIs 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)
- Mini-sessions: 5,146 (2,762 males, 2,384 females) vulnerable youth during 274 mini-sessions
- Alternate activities: 836 (286 males, 550 females) vulnerable youth (Activities included English Lessons, Turkish Lessons, Computer courses, and Debate Club).
- Peer Outreach: 5,146 (2,762 males, 2,384 females) vulnerable youth contacted in non-traditional sites (streets, parks, discos, etc. Themes include HIV/AIDS issues, personal risk assessment, and ways of protection and condom use and availability of treatment, social services and alternatives).
- Youth Friendly Counseling: 55 (19 males and 36 females) vulnerable youth by 1 counselor who provided counseling/psychological services to help them cope with the broad range of human problems such as personal development, interpersonal communications, existential problems, psychology of sexual relationships.

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

Location	Pre Test %	Post Test %
Bishkek	78	96

## **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, 33,529 (16,172 males, 17,357 females) vulnerable youth were contacted in the site (cumulative). This quarter:

- Peer education trainings: 3,720 (new contacts) (1,832 males, 1,888 females) vulnerable youth during 2,066 peer trainings
- Mini-sessions: 5,232 (new contacts) (2,721 males, 2,511 females) vulnerable youth during 270 mini-sessions
- Events: 3,199 (1,853 males, 1,346 females) vulnerable youth during 27 events
- Free Condoms distributed: 3,664 condoms

### **Increasing access to Condoms through Social Marketing**

- 22,015 units of condoms were disseminated during various events and educational activities
- 92,875 (32% of planned distribution) condoms were disseminated through traditional channels (pharmacies and shops), hot zone distribution and free distribution during educational activities
- 26,949 units of condoms were disseminated around Hot Zone Streets

## **B.4. Tajikistan**

### **Civil Society Mobilization**

Results of oblast trainings on development of project proposals conducted at the end of the previous quarter were summarized. Umbrella NGOs compiled project proposal into a summary indicating the number of target group representatives to be covered, spectrum of services, implementing partners, geographical area, total budget, etc. The summaries were reviewed and approved by the oblast TWGs; TWG written approval was sent to all organizations that submitted project proposals. According to the summary tables 5,640 IDUs and 3,580 prostitutes are expected to be covered by comprehensive HIV prevention services in case projects are funded. Umbrella NGOs will provide technical assistance for submission of the proposals to donors' grant competitions.

### **Capacity building of AIDS-servicing organizations in collaboration with partners**

In November 2006, CAPACITY, UNODC and CARHAP issued a tri-partite agreement on joint conducting two 5-day trainings for managers and trainers working on HIV prevention among IDUs: "Development and Managing Effective HIV Prevention and Care Services for IDUs" and "Training of Trainers/Supervisors/Coordinators on Outreach Work among IDUs". The aim of the first training was to develop active or potential trainers' skills on technologies of training outreach workers while the second one was devoted to development of skills on management of multisectoral projects on provision of HIV prevention services to IDUs. In accordance with the agreement partners committed US \$30,968 to cover the cost of the trainings. CAPACITY contribution included technical and overall assistance, as well as in-kind contribution (rent of equipment). NGO Liaison assisted in selection and invitation of NGO participants. Totally 59 representatives of 30 AIDS-servicing organizations (NGOs, AIDS Centers, Narcology clinics, STI Centers, Drug Control Agency

under the President of Tajikistan) successfully completed the above trainings conducted by the international team of trainers (Marek Zygodlo, Poland, Irina Mingazova, Kazakhstan, Murtazokul Khidirov, Tajikistan).

### **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 1,544 sex workers have been contacted (cumulative). This quarter:

- Trainings: 132 sex workers in 61 peer trainings
- Mini-educational sessions: 215 sex workers in 123 mini sessions (Themes were HIV and AIDS, STI, Communication skills, Responsible behavior, and Condom Use);
- Free Condoms distributed: 1,161 condoms
- Brochures distributed: 823 educational brochures (Themes were HIV and AIDS, STI, Condom is my protection, Assess Your Own Risk);
- Event: 4 Favorite promotion actions for 80 sex workers.

#### **Pre and Post Test Results of BCC among sex workers**

Location	Pre Test %	Post Test %
Dushanbe	34	67

### **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, 18,810 (11,482 males, 7,328 females) vulnerable youth were contacted in the site (cumulative). This quarter:

- Peer education trainings: 1,619 (new contacts) (1,028 males, 591 females) vulnerable youth during 336 peer trainings
- Mini-sessions: 1,306 (new contacts) (853 males, 453 females) vulnerable youth during 328 mini-sessions
- Events: 1,441 (1,012 males, 429 females) vulnerable youth during 12 events in target sites such as Discos.
- Free Condoms distribution: 237 condoms
- Brochures distribution: 1,152 educational brochures

#### **Pre and Post Test Results of BCC among vulnerable youth**

Location	Pre Test %	Post Test %
Dushanbe	67	95

### **Increasing access to Condoms through Social Marketing**

- 6,738 units of free condoms were disseminated during various events and educational activities
- 160,695 units of condoms were disseminated through traditional channels (pharmacies and shops), hot zone distribution and free distribution during educational activities.

- Promotional campaign of 13% discounted price, which started in September 2006 was finished during this quarter

## **B.5. Turkmenistan**

### **Youth Centers**

CAPACITY continues to wait to hear the result of a proposal submitted for funding of Youth Centers in Turkmenistan. The proposal was submitted several months ago, but to date there has been no information as whether or not the proposal will be funded. CAPACITY remains hopeful that funding will be awarded so this very important HIV prevention activity can begin implementation in Turkmenistan, which seriously needs such interventions.

## **B.5. Uzbekistan**

### **Community Mobilization Strategy (CMS) – Oblast trainings on project proposals development**

During November, as the next step of the Community Mobilization Strategy realization, in close partnership with MoH/RAC and CAAP, 4-day trainings on project proposals development were provided in 7 Oblasts of Uzbekistan (the Republic of Karakalpakstan, Tashkent oblast, Bukhara oblast, Kashkadarya oblast, Khorezm oblast, Navoi oblast and Surkhandarya oblast). The main goal of the trainings was to provide various government and non-government organizations with necessary knowledge and practical skills on development of project proposals on increasing coverage of vulnerable groups with HIV prevention programs for major donors in the country. Overall, 129 participants representing different government organizations (oblast AIDS centers, narcology centers, dermatology and venereology centers, sanitary and epidemiology departments, trust points and internal affairs departments), non-government organizations (Mahalla, NGOs) and mass media took part in the trainings. Besides, people living with HIV were involved into the training process, as well as representatives of the Republican AIDS Center, who were present in all trainings.

The trainings were provided by facilitators trained during the Regional and National Workshops on Project Proposals development, whose excellent work insured the success of the training process and imposing results. All participants received information on CAPACITY strategies and approaches, 60+ approach, Community Mobilization Strategy (CMS), umbrella structure, principals of effective response to concentrated stage of HIV epidemic, major aspects on project design (including goal, objectives and activities of the project, work plan, budgeting and M&E). The training included theoretical part (presentations, lectures, etc.) and practical part consisting mainly of small group work, where the participants had an opportunity to discuss oblast consolidated project proposal and work on small project proposals (USD 5,000 – 20,000) using computers. As the main result of the trainings provided, 25 project proposals targeting different vulnerable groups and general population were developed. It is notable that all projects are to be implemented by several partner organizations.

The fourth day of each training was dedicated to the Thematic Work Group (TWG) meeting, during which oblast consolidated project proposals and other small proposals were reviewed and discussed. It is also important to note that mass media representatives took active part

in the training and were included into separate projects as partners. Besides, the trainings were covered by local TV and radio channels.

### **World AIDS Day (WAD) events**

At the end of November, 2006, 15 international (UNAIDS, UNDP, UNESCO, UNFPA, UNICEF, UNODC, WHO, CAPACITY, PSI, World Vision, AFEW, CARHAP), governmental (National AIDS Center, Women’s Committee) and non-governmental (“Ishonch va Hayot”) organizations signed the Memorandum of understanding on coordination and financing of the World AIDS Day 2006 activities in Uzbekistan. The parties agreed that all activities would be considered as a Joint campaign with visibility of all involved partners regardless of their financial contribution.

### **Interventions with Sex Workers**

#### **Tashkent (Chilanzar district)**

The target sex worker population at this site totals 5,000 and to date 2,877 sex workers have been contacted (cumulative). This quarter:

- Trainings: 206 sex workers in 239 peer trainings
- Mini-educational sessions: 389 sex workers in 319 mini sessions
- Medical Consultations: 56 sex workers
- STI Treatment: 35 sex workers
- Free Condoms distributed: 502 condoms
- Brochures distributed: 1,088 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 %
Tashkent	51	95

### **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, 40,286 ARY (20,479 males, 19,537 females) vulnerable youth were contacted in the site (cumulative). This quarter:

- Peer education trainings: 2,326 (new contacts) (1,360 males, 966 females) vulnerable youth during 591 peer trainings
- Mini-sessions: 4,804 (new contacts) (2,430 males, 2,374 females) vulnerable youth during 1,267 mini sessions
- Free Condoms distributed: 1,059
- Brochures distributed: 2,823

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

Location	Pre Test %	Post Test %
Tashkent	34	97

## **Increasing access to Condoms through Social Marketing**

CAPACITY continues to advocate for the resumption of Social Marketing of Condoms in UZ. Until now, and during the past quarter, social marketing of condoms remains halted due to restrictions from the UZ government. However, efforts for HIV prevention in Tashkent with Favorite condoms continued with free distribution of condoms among vulnerable youth and sex workers in Tashkent with accent on Chilanzar district.

- No condoms sales happened because of restrictions imposed by the UZ government and subsequent closing of the condom Sales Department
- 4,146 units of free condoms were disseminated during various events and educational activities

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

#### **C.1. Regional**

##### **TB/HIV**

During the reporting period, CAPACITY regional activities were mainly focused on monitoring of the TB/HIV models implementation in pilot sites of TJ, UZ, KG and making necessary adjustments, including developing the new M&E reporting forms for the M&E refresh-trainings. The M&E refresh-trainings on the aspects of monitoring implementation of the TB/HIV models in pilot sites took part in TJ, UZ, KG. TB/HIV Monitoring Team reviewed and improved new reporting forms for M&E activities in HIV and TB facilities. New forms were tested in facilities providing HIV/TB services. The necessary adjustments to the M&E forms were made during the M&E group meetings and M&E visits to the pilot institutions. In addition, meetings with major stakeholders were held to discuss further collaboration in TB/HIV directions in an effort to promote on-going collaboration/coordination with partners.

The purpose of the meetings was to discuss the progress and obstacles of TB/HIV model implementation. Monitoring Team's presentations on the results of monitoring visits to pilot facilities demonstrated that interaction of TB/HIV structures was in place, though hampered by such obstacles as shortage of free X-ray films and co-trimoxazol, delays with introduction of VCT to TB services and losses of patients during referral. During the meetings it was discussed a possibility of TB/HIV activities further realization within the GF 6<sup>th</sup> round grant, where the GF TB/HIV component could capitalize on accomplishments reached by the TWG and problems revealed could be solved within the GF grant funding.

In Kazakhstan, CAPACITY continues the collaboration with National partners in TB/HIV direction (National TB Prikaz development). During the quarter it was developed the TB/HIV protocol, which received a good feedback from WHO. Earlier in the frame of TWG, CAPACITY helped to draft the TB/HIV part of the National Application to GF 6<sup>th</sup> round. National Center on TB Problems in KZ, as well as TJ and KG won the 6-round GFATM grant, where one of the components is TB/HIV services integration.

##### **ARVT**

CAPACITY Regional office took part in KZ ARVT TWG meeting organized in October by CAPACITY KZ Project under RAC to discuss the main documents on ARVT adherence. (See more in section C2.).

## **C.2. Kazakhstan**

### **ARVT.**

In October the CAPACITY Project organized a meeting of Thematic Working Group on ARVT under the RAC. At this meeting the main documents on ARVT adherence were discussed and a work plan on ARVT and adherence monitoring activities in oblasts to be done together with GF was developed.

### **Development of research protocol to identify barriers to ARV initiation and adherence in Kazakhstan**

While ARVT medical services have been successfully established in Kyrgyzstan and Kazakhstan, patient uptake of ARVT program has been alarmingly low. This response rate is typical in IDU populations globally and can be expected in neighboring countries as they begin to roll out ARVT services. As such, in order to optimize efficiency of treatment programs, there needs to be interventions and programs to improve patient willingness to initiate and maintain ARVT. A small research protocol is being developed for an assessment to identify barriers to ARVT initiation and adherence in Kazakhstan. It is expected that the assessment tool can be used in other settings and will provide some insight into programmatic and policy changes to promote ARVT adherence. The project will include a rapid evaluation followed by recommendations for interventions that can be implemented to improve adherence activities at a systematic level. Follow-up after the interventions will also be conducted.

The first stage of field work was conducted in December 2006. A team of 3 CAPACITY staff plus a representative from the Republican AIDS Center traveled to Karaganda and Temirtau to visit the Karaganda Oblast Health Department and the Temirtau City AIDS Clinic. The purpose of the trip was to introduce the CAPACITY team to Temirtau and Karaganda staff and to learn about the current situation regarding HIV testing and treatment in Temirtau, understand issues related to ARVT uptake and adherence in Temirtau, and ascertain if there is local commitment and resources to engage in this study. Interviews with Karaganda Oblast Health Dept, Karaganda Oblast AIDS Center, Temirtau City AIDS Center, Temirtau Primary Health Clinics, and NGOs were conducted. CAPACITY also reviewed some of the patient records. The CAPACITY team learned enough through the visit to design a protocol to study the situation. The staff in Timertau and Karaganda are eager to collaborate on the study and wish to get started as soon as possible.

### **TB/HIV**

The Capacity Project provided technical assistance in development of recommendation on interaction of two services – HIV/AIDS and TB and National TB Prikaz. National Center on TB Problems won the grant of the GFATM 6<sup>th</sup> round. One of the components of this application was component of the integration of TB/HIV services that was designed under the CAPACITY Project's technical assistance. The Project continues working in the frame of TWG on TB/HIV. The work plan for the next year was developed and sent to NCTP (National Center for TB Problem).

### **C.3. Kyrgyzstan**

#### **Voluntary Counseling and Testing**

In the course of reporting period, TWG on VCT had several work meetings on drafting regulatory documents for VCT in Kyrgyzstan. This led to the final meeting facilitated by regional coordinator on VCT and two documents: regulation and joint order between Ministry of Health and Ministry of Education for organizing psychosocial counseling were drafted. These documents were reviewed by the AIDS Unit director and were not approved as they did not meet her expectations. Specifically, she expected design of the VCT system itself including structure, players, etc. This issue has been followed by the meeting of CAPACITY's Regional Director with AIDS Unit and RAC Director. As a result, the AIDS Unit, RAC, and CAPACITY agreed that a structure of MoH should be appointed for coordination of the VCT system in Kyrgyzstan and as soon as they decide which agency will do this job CAPACITY will start its technical support.

#### **HIV/TB**

During the reporting period, country office organized site visit for the representative of the USAID Regional office to the Issyk-Ata rayon of Chuyi oblast. This enabled her to see the process of interaction between two services (TB and HIV) at the place.

In November 2006, CAPACITY organized working meeting and refresh training on M&E for the national M&E team in Bishkek. This meeting has been carried out through the consultation of a regional deputy on M&E, regional coordinator on TB/HIV and CAPACITY regional consultant Dr. Seledtsov and brought together the members of M&E Team and representatives of RAC, National Centre of Phthysiology, Kyrgyz Medical Academy, Chuyi Oblast Family Medicine Centre and TB Centre, Department of Punishment and Execution (GUIN) under the Ministry of Justice. The head of M&E team presented the results of the first monitoring visit to pilot regions and highlighted issues to be addressed throughout the meeting. At this meeting modified M&E sheets for data collection on TB/HIV were developed. The participants visited two TB/HIV institutions to test the amended forms.

To ensure enhanced political and financial support for further dissemination of the model a meeting with head of AIDS Unit has been organized. As a result, all data related to further implementation of the model has been provided to Unit.

Few separate meetings have been organized by CAPACITY with National Centre of Phtisioilogy aimed at advocating the scaling up of TB/HIV model at the national level through attracting available state funds and funds form 6<sup>th</sup> round of GFATM.

In December 2006, M&E team has divided into two groups and fulfilled 2<sup>nd</sup> monitoring activity in Chuyi oblast. All in all, 26 sites were monitored by the team and it was expressed by team that modified monitoring sheets were more effective in use.

#### **ARVT**

Due to very low number of ARVT patients in Kyrgyzstan the earlier planned rapid assessment on barriers to this treatment has been canceled by regional office. This decision has been discussed with Isakova A. AIDS Unit, RAC Director and supported by them as well.

## **C.4. Tajikistan**

### **TB/HIV**

On 6-7 December 2006, CAPACITY Project supported working meeting of TB/HIV TWG (as sub-group of TWG on Treatment, Care and Support) and subsequent re-fresh training for the National Monitoring Team in the framework of TB/HIV model. The purpose of the meeting was to discuss the progress and obstacles of TB/HIV model implementation. Monitoring Team's presentations on the results of monitoring visits to pilot facilities demonstrated that interaction of TB/HIV structures was in place, though hampered by such obstacles as shortage of free X-ray films and co-trimoxazol, delays with introduction of VCT to TB services and losses of patients during referral. Dr. Beknazarov, Manager of GF Grant Implementation Unit, made a presentation on TB/HIV activities within the GF 6<sup>th</sup> round grant, where he noted that GF TB/HIV component would capitalize on accomplishments reached by the TWG and problems revealed could be solved within the GF grant funding.

The TB/HIV Monitoring Team reviewed and improved new reporting forms for M&E activities in HIV and TB facilities. New forms were tested in three facilities providing HIV/TB services: Dushanbe-city TB Center, City Health Center # 9 and Republican AIDS Center.

### **Collaboration with partners**

CAPACITY participated in the work of TB IEC/BCC TWG and of TB Interagency Coordination Council meetings, organized by project HOPE and Republican TB Center.

## **C.5. Uzbekistan**

### **M&E of HIV/TB Model Implementation**

Within the reporting period, the CAPACITY Project held refresh training/working group meeting for the National HIV/TB M&E Team in order to discuss the results of the Model on Interaction of AIDS/TB Services and M&E visits schedule. Besides M&E team and the CAPACITY Project representatives, GFATM and HOPE/TB representatives took part in the meeting and gave their comments on new quarterly reporting forms. Moreover, they offered their assistance (staff and transport) for M&E activities.

During the meeting, new reporting forms were discussed, approbated in trial M&E visits to the Tashkent city AIDS Center and TB Hospital #1, and updated by M&E team. MoH Order was signed, based on which starting from November 20 till December 20, 2006, National M&E team conducted M&E visits to all medical institutions in pilot regions (Tashkent city and Tashkent oblast) using new reporting forms. The results of these visits are to be analyzed and discussed during the TWG meeting in January, 2007.

### **Joint TB activities**

During the reporting period, the CAPACITY Project/Uzbekistan took active part in various activities and events, conducted by organizations working in TB area: work meetings, conferences, partner meetings, etc., where different questions concerning TB situation in Uzbekistan, including interaction of AIDS/TB services were discussed.

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

### **D.1. Regional**

#### **Concept Paper drafted**

A concept paper on the probable strategies for integration of HIV/AIDS services with PHC and other health systems was developed. It is now under review of the CAPACITY Senior Management Team. A meeting will be held in Almaty in the next quarter to determine the next steps for Strategy 4.

### **D.2. Kazakhstan**

#### **Patient and Fund Flow Analyses**

Analyses of the information collected within the functionality, funding and patient-flow assessments were completed. The draft report is nearly completed.

### **D.3. Uzbekistan**

#### **Integration of TB and AIDS Services**

Participated in the review meetings for the HIV/AIDS–TB linkage pilots in Tashkent. The monitoring of HIV–TB linkage model revealed several obstacles relating to sustainability of supplies (e.g., x-Ray films, contrimaxozol, izoniazid), staffing with needed consultants, and coordination of respective supervision and M&E activities. Ways to address these obstacles will be explored further with the regional office during the next quarter.