

AFEW-Tajikistan Reporting 2013 “Bridging the Gaps: Health and Rights for key populations”

PART A

Part 1. A narrative part in which the member reflects upon the past year (context in which the organisation operates, results (success, failure) and lessons learned) and explains for the activities and intended results for the following year (on project and institutional level) that will reflect in the technical work plan and report, this is a new part;

1. The context (political, social local and national level)

Tajikistan remains the poorest country on the post-Soviet Union space, lacking employment opportunities and handing 74% of the population of living in a rural area. In 2012, the World Bank reported the lowest per capita income 860\$ and furthermore, that high rate of the population lives in extreme poverty. Related link: <http://data.worldbank.org/country/tajikistan>

The Federal Migration Service (FMS) of the Russian Federation estimates that 1.15 million Tajiks are currently residing in the country (Federal Migration Service, 2013a), many of whom provide livelihoods for their families while their remittances keep the Tajik economy afloat. Ensuring safe movement of migrants to and from Tajikistan is of critical importance to this rural, landlocked nation. Despite many hardships, each year nearly 10% of the population leaves Tajikistan to seek employment opportunities abroad. Remittances sent home account for more than a 1/3 of national GDP, thereby highlighting the significant role labour migration holds in maintaining the social, macroeconomic and financial stability of the country. In the report of the International Organization of Migration has been mentioned that in 2009, 93% of those labor migrants had been young men, 66,7% are aged between 16 and 34 years and 76% were coming from rural areas. Negative effects of labor migration in Tajikistan are health issues for women, incomplete families due to divorces, which results mostly in ending financial support to their families, a greater risk for girls born in migrant's families to become prostitutes and children being less successful in schools. Related links: <http://www.iom.tj/> and <http://www.iom.tj/files/entryban.pdf>

Political context

The Government of the Republic of Tajikistan adheres to its political commitments of HIV/AIDS and continues providing support to development partners represented by international organizations and donor agencies. Local NGOs and grass-root organizations of PUDs and PLHIV are participated in national coordination and implementation of local projects on HIV and TB fields. At present, 8 local NGOs are represented at CCM. CCM's thematic working group on Harm Reduction are facilitating by NGO “Volunteer” and represented by NGOs and PUD organizations including NGO “SPIN Plus” and “SVON Plus” AFEW-Tajikistan’ BTG partners. Related link: <http://ncc.tj/>

At the end of 2013, collaborative proposal of PUDs organizations of Tajikistan under the leading role of BTG Partner NGO “SPIN Plus” was presented to Country Coordination Mechanism on HIV, TB and malaria prevention in Tajikistan and approved within EHRD Regional Program in the frame of GFATM Transitional Funding Mechanism for 2014-2017. Related link: <http://www.harm-reduction.org/news/2378-call-for-proposals-for-sub-recipients-within-ehrn-regional-programme.html>

AFEW-Tajikistan is taking the lead role on health promotion in penitentiary system and managing Country Technical Working Group represented by 18 stakeholders working in prisons. During November-December, 2013 newly established republican public organization AFEW-Tajikistan has signed Memorandums of Understanding with the Ministry of Health and Social Development of RT and Correctional Department of the Ministry of Justice RT. Essential joint work plans including BTG activities for 2014 were developed and signed by both parties.

Coordination, implementation and monitoring of inter-sectors activities of state health, social and education services are ensured by 2 national programs on HIV/AIDS and TB for period 2011-2015. These programs also regulate NGOs and international organizations working with key populations by providing support in capacity development and active participation at decision making. Related links: <http://www.nc-aids.tj/> and <http://health.tj/ru>

Integration of services between penal and civil health sectors and NGOs are on agenda of high-level coordination and regional networking. The Client Management and Harm Reduction Programs are recognized by local authorities as evidence-based approaches assuring key populations access to a comprehensive package of services, psychosocial support and continuum care. Lack ability of state budget and new challenges of global reducing of funding is a key barrier on integration of NGOs based services into general health system.

At the end of 2013, Tajikistan decided to apply for GFATM New Funding Mechanism and began development of three national level strategic plans for three diseases –HIV, tuberculosis and malaria for period 2014-2017. AFEW-Tajikistan as representative of NGOs sector was nominated by local grass-roots organizations of PUD and PLHIV and became a member of Country Working Group on development of HIV strategic action plan for GFATM NFM. Related links: <http://ncc.tj/?p=88> and <http://ncc.tj/?p=95>

Social context

The Republic of Tajikistan is poorest country among CIS members with extreme higher level of external labor migration of its citizen. By WBs' data for 2013, about of 46% incomes of Tajikistan budget is forming by labor migrants' money transferring to their families. <http://www.iom.tj/index.php/research>

The long processes of reforming of health system and shortage of state budget became new challenges for poorest and unprotected groups of Tajikistan citizens. Since 2010, Ministry of Health RT following the Government Order No 600 has been introducing paid diagnostic and medical services with disaggregation to levels of social vulnerability of citizens. This strategy implies s providing HIV testing and CXR for TB on paid basis for PUDs, sex workers and MSM who are not at official list of vulnerable groups of population.

Administration of health facilities using Order No600 made limitations to PLHIV for receiving free of charge diagnostic and medical services regulated by existent AIDS Law. As result, PLHIV are compelled every time to open their status and to apply for respect of their rights for free medical services.

Because of Order No600 and limited number of qualified specialists, drugs treatment and/or detox still unavailable to all PUDs who need medical support. Opioid substituent therapy points are supported only by GFATM and functioning in three big cities of Tajikistan. OST Program has juridical and geographical limitations for PUDs. OST is provided only those PUDs who are HIV positive and have official registration in IDs in the region where OST is placed.

Governmental social welfare intuitions of Tajikistan has limited resources and very bureaucratic procedures to provide adequate and timely support to key populations especially to recently released prisoners, PLHIV and PUDs faced social vulnerability due to absence of work, ID, food and shelter.

Due to existing religious and traditional concepts, women have a subordinate status in family and society. Existing family traditions do not allow women to participate in decision making related to private and public life. At the present rural women have a low educational level, have no professional skills and specialty, little job qualification, and they live under tough social control of traditional institutes of family and community. Early marriages and birth rate is the highest among rural women, but level of income is the lowest. As a result of men's labor migration and temporary or permanent lack of financial support to their families, - women are forced to find any possibilities to earn needed money. This burden does not allow women to pay attention to their health and education. The hardest conditions are among single mothers, widows, elderly women and women with disabilities. Vulnerable rural women need enhancing of their opportunities to be socially and financially independent, in receiving essential services in education, health promotion, social welfare and legal protection.

Epidemiological situation

In 2013, a new 876 cases of HIV were registered in Tajikistan with cumulative 5550 HIV cases. UNAIDS provide estimated number of 16650 cases of HIV for Tajikistan in proportion 1 to 3,5 from official data. 5183 new cases of TB with 88 cases of HIV among TB patients are registered by NTP. 7117 PUDs with 4837 IDUs are officially registered by Republican narcological center with estimated number of 19348 IDUs in proportion 1to 4 to official data. 2074 people using drugs (PUD) or 23% of general prisons population (9000) were registered last five years. In 2013, were diagnosed 461 PUD in prisons. Official data about number of IDUs in prisons are absent. During period of 2009-2013, about 9,61% of all HIV cases in Tajikistan or 381 PLWH (including 25 PLWH in 2013) were registered in prisons. 40,42% of all PLWH prisoners are receiving/ed ART provided only by GFATM. Information about gaps on ART and success of their treatment is unavailable.

Plan for 2014.

Next year 2014, AFEW-Tajikistan plans to improve BTG results achieved and focus its activities on introducing sustainable approaches on provision client management and continuum care services in pilot regions of Tajikistan.

2. Summary of key BTG activities in 2013

During 2013, *AFEW-Tajikistan continues implementation of key interrelated areas disaggregated to BTG Objectives:*

Objective 1. Improve the quality of and access to HIV prevention, treatment, care, support and other services for key populations

Area 1. Improving capacities of local NGOs for delivering comprehensive package of HIV related and psychosocial support services to PUDs.

Local NGOs supported by BTG Program introduced AFEW Client Management Program with system of referrals to health care and diagnostic services, legal and social support. As result of referrals to diagnostic services made by BTG sub grantees a new HIV, tuberculosis, STI's and hepatitis cases are detecting by state health institutions. Under the project support PUDs receiving narcological support and treatment. These approaches ensuring universal access to HIV prevention, treatment, care and support for PUDs

Area 2. Enhancing of cooperation with other programmers of USAID and UNDP Tajikistan (GFATM Project Implementation Unit) for ensuring contributions into BTG activities and avoid duplication of sources.

BTG activities are conducting jointly with HIV and TB Programs of USAID and UNDP(GFATM) implementing in Tajikistan. To avoid duplication of funds, BTG educational trainings are conducted with co-funding of available sources of existent AFEW projects.

Objective 2. Improve the human rights of key populations

Area 3. Introducing international standards and approaches promoting human rights of all key populations and ensuring universal access to HIV prevention, treatment, care and support

AFEW playing an active advocacy role and participating in national thematic working groups on editing and updating existent laws and procedures, standards and policies on HIV/AIDS and health promotion spheres

Objective 3. Integrate specific services for key populations within the general health system

Area 4. Development of sustainable approaches on Client Management and Harm reduction including health care in prisons settings.

AFEW continuing wide introducing of Client Management Guidelines approved by Ministry of Health RT. Local NGOs implementing Client Management Program assuring provision of integrated and client-oriented services for key populations.

Area 5. Multisectoral coordination of BTG activities jointly with other programs.

All AFEW annual and program workplans including BTG plan are coordinated with Ministries of Health, Justice and Internal Affairs of Tajikistan. Plans also presented and discussed with international partners and donor agencies working in Tajikistan. Advocacy and awareness raising events devoted to International Day fighting against illicit drug abuse and trafficking (June 26) and World AIDS Day conducting in cooperation with Drug Control Agency under the President of the Republic of Tajikistan, Republican AIDS and TB Centers, Medical Department of Penitentiary System and local NGOs.

Objective 4. Strengthen the capacity of civil society organizations that work on HIV and key populations

Area 6. Improving the access of health professionals and NGOs staff to medical information related to prevention, treatment, care and support in HIV and AIDS, tuberculosis, STIs and hepatitis.

AFEW online informational platform www.afew.tj in cooperation with team of national health experts and 12 informational points is providing needed technical support to local health services providers and NGOs.

Area 7. Development IEC materials appropriate to informational needs of key populations and specialists

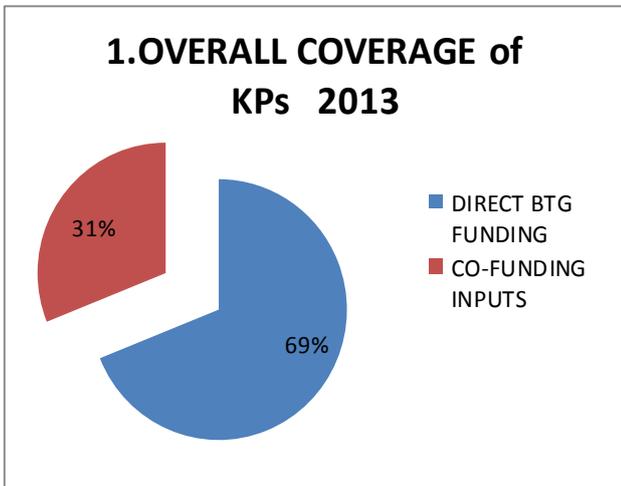
AFEW conduct regular focus groups discussions to define the most needed information for key populations. As result IEC materials of AFEW became as an effective instruments promoting access of PUD to legal information and support. Approved by Ministry of Health training manual is integral part not only of BTG sub grantees but a part of work of all interested parties delivering educational mini-trainings on HIV, TB, STIs and hepatitis.

2A. Description of key BTG activities in 2013

Objective 1. Improve the quality of and access to HIV prevention, treatment, care, support and other services for key populations

Area 1. Improving capacities of local NGOs for delivering comprehensive package of HIV related and psychosocial support services to PUDs.

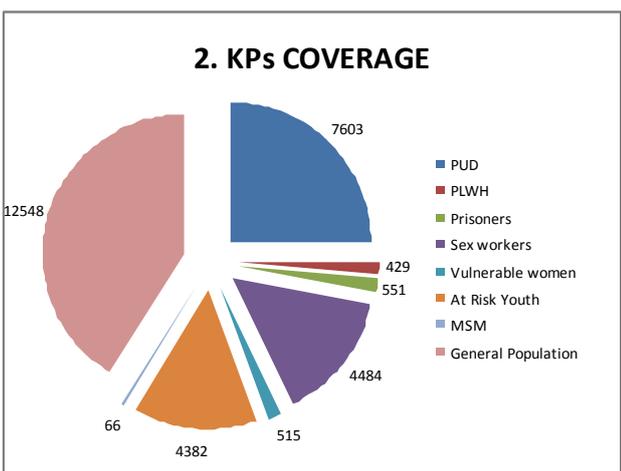
In 2013, AFEW-Tajikistan in cooperation with Republican AIDS, TB and Narcology Centers, Penitentiary System and 17 local NGOs **within BTG direct and co-funded activities were reached 30578 representatives of key populations.**



69% of key populations were reached by direct funding of BTG and 31% were reached by BTG sub-grantees receiving additional funds from GFATM, USAID and other donors. (Diagram #1)

By comprehensive package of HIV prevention and client management services of **BTG Program were reached 7603 PUDs, 429 PLHIV, 551 prisoners, 66 MSM, 4484 sex workers, 4382 at risk Youth and 515 vulnerable women.** (Diagram #2)

41% from all BTG beneficiaries are 12548 citizens of Tajikistan reached by awareness raising, advocacy, informational and outreach counseling services during country-wide events devoted to the International Day Fighting Against Illicit Drugs Trafficking and their abuse (June 26) and World AIDS Day (December 01).

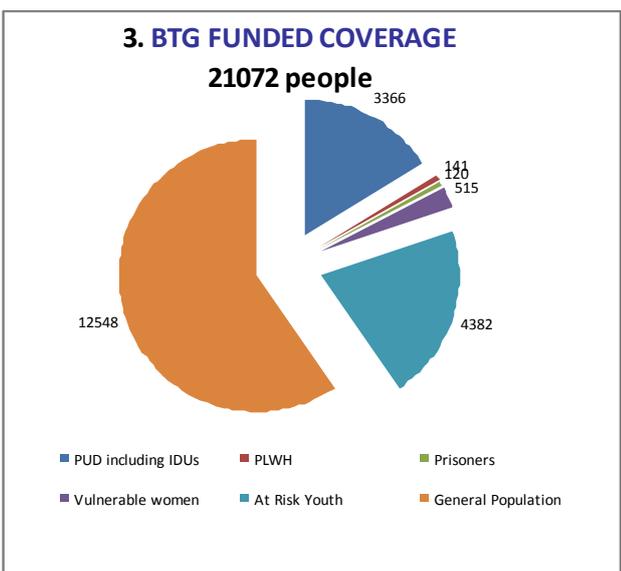


25% from BTG beneficiaries are 7603 PUDs including injection drug users and 134 HIV positive PUDs. BTG direct services to PUDs are focused on improving their HIV prevention and healthy life style skills and enhancing their access to existent client management, health, social care and legal support services.

15% of BTG beneficiaries are 4484 sex workers reached by HI&STIs prevention services, information and materials.

4% of project clients were 551 prisoners and 429 PLWH including 66 MSM reached by comprehensive package of HIV prevention and client management services.

15% are 4283 at risk Youth and 515 vulnerable women including family members of PUDs reached by awareness raising trainings and psychosocial support. (Diagram #2)



By direct BTG funding were reached **21702 people including 3627 key populations match their medical, social and legal support needs.** (Diagram #3)

On January 17-18, 2013 the 'Exchange of best practices and strategy development' working meeting was conducted in Dushanbe with participation of 30 representatives of 15 NGOs implementing AFEW projects in Tajikistan. During the meeting participants discussed BTG and GFATM funded Projects key indicators, plans of coverage for 2013 and **developed unified mechanisms of data collection processing and integration of services funded by different sources.** Also Term of

References for 'Bridging the Gaps' and 'Improving Access to Informational Activities' Projects were developed to assure united strategy of delivering services for key populations. Related source www.afew.org



In 2013, in the frame of BTG and its IAIA component were issued sub-grants to 11 NGOs providing prevention services to drug users, vulnerable women and at-risk youth in seven regions of Tajikistan: NGO ‘SPIN Plus’, ‘Vita’ and ‘Sakhy’ (Dushanbe), ‘Sudmand’ and ‘Jovidon’ (Kulob, Khatlon province), Bonuvoni fardo’ (Shaartuz, Khatlon province) ‘Young Generation of Tajikistan’ (Istaravshan, Sughd province), AntiSPID’ and ‘Nigoh’ (Khujand, Sughd province), ‘Buzurg’ (Panjakent, Sughd province), and ‘Marifatpocho’ (Darvoz district, GBAO).

Additional support for PUDs organizations were provided within BTG. On July 07, 2013 by request of NGO “Sakhi” one set of computer was purchased. This PC will be used for education of NGO clients.

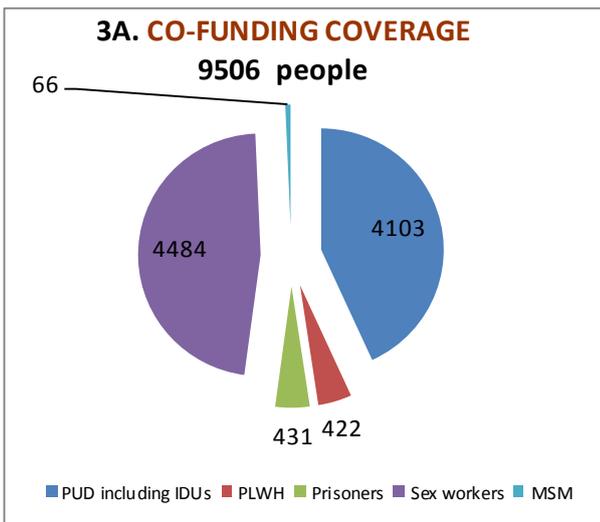
On August 12, 2013 by request of NGO “SVON Plus” (GFATM sub-grantee) one bactericide lamp were purchased for infection control in Social bureau unit in Kulob city.

In aims to provide emergency supply of disinfectants, medical and non-medical equipment and prevention materials for prisons: On the request of Tajikistan MoJ Correctional Department Medical Unit on January 29, 2013 AFEW-Tajikistan provided financial support for conducting biochemical examination of 40 HIV-positive prisoners to define their need in ARV-therapy. On the request of the Tajikistan MoJ Correctional Department for supply of chlorine bleach (Letter #5/5-851 of April 16, 2013) AFEW-Tajikistan conducted the tender on chlorine bleach delivery for MoJ CD institutions. On June 07, 2013 AFEW-Tajikistan supplied 1100kg of calcium hypochlorite for



ensuring infections control in prison settings.

Area 2. Enhancing of cooperation with other programmers of USAID and UNDP Tajikistan for ensuring contributions into BTG activities and avoid duplication of sources.



During this In January 2013, AFEW –Tajikistan developed agreement with UNDP on provision of GFATM funded HIV prevention materials to BTG sub-grantees.

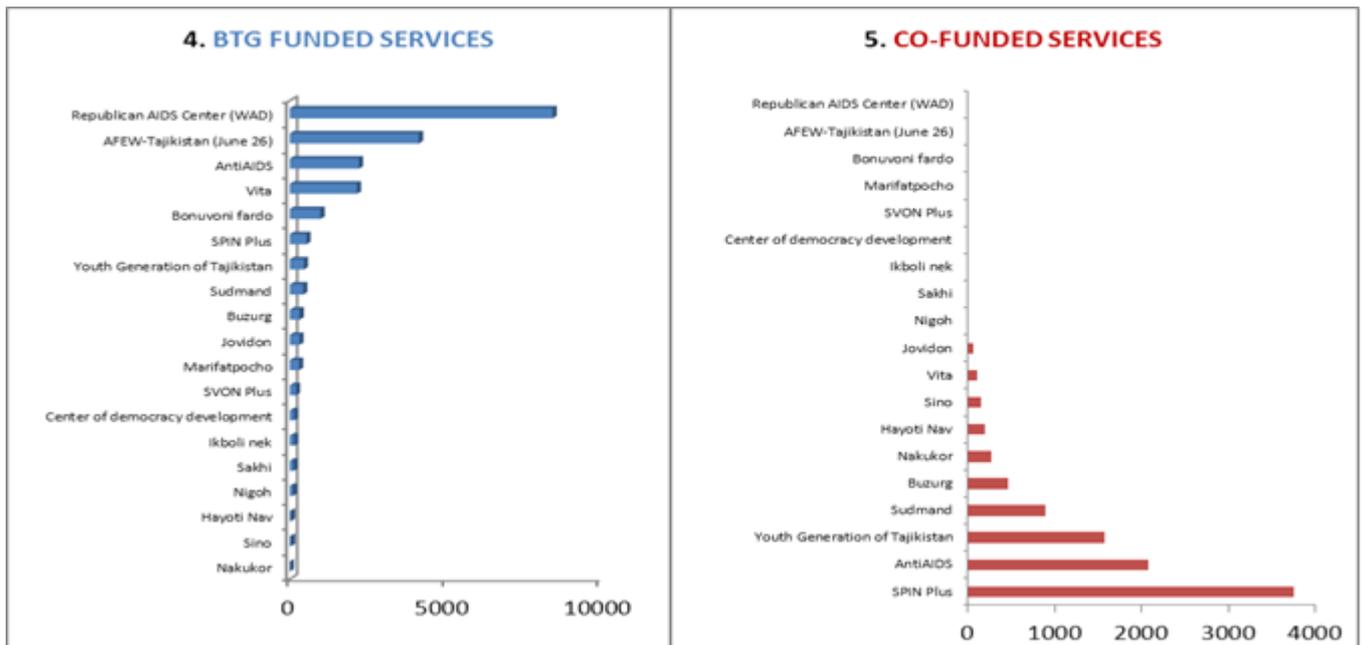
Based on this negotiation, AFEW-Tajikistan partner NGOs including BTG sub-grantees received a **set of 142 206 prevention materials** including sterile syringes, needles and safe injection kits and condoms for delivering HIV preventions services to key populations reaching by BTG and co-funded services. Related link:

<http://www.facebook.com/UNDPTajikistanHIVTBMalaria#!/UNDPTajikistanHIVTBMalaria>

As result, **additional 9506 key populations were reached by GFATM and USAID** co-funded projects implementing through AFEW-Tajikistan and its BTG sub-grantees. (Diagram #3A)

AFEW-Tajikistan provides support to its local and national partners to expand availability of coordinated HIV prevention and client management services to key

populations with emphasis to avoid duplication of existents resource and assure co-funding to BTG program activities. Diagrams #4 and #5 below are demonstrating **key populations coverage with disaggregation to BTG and co-funded sources and organizations received BTG support.**



Objective 2. Improve the human rights of key populations

Area 3. Introducing international standards and approaches promoting human rights of all key populations and ensuring universal access to HIV prevention, treatment, care and support



During 2013, AFEW-Tajikistan took part in national thematic working groups on editing and updating existent 1) AIDS law on Procedures on HIV obligatory testing, 2) National Guidelines on provision Comprehensive package of Harm reduction services to PUDs and 3) Ministry of Justice RT Corrections Dpt Rules and Regulations on provision medical care to inmates.

In 2013, AFEW-Tajikistan **developed and promoted results of 'desk review' assessment of national laws and other legal documents on PUDs' health and rights.** On June 18, 2013 AFEW-Tajikistan together with Drug Control Agency under the President of the Republic of Tajikistan(DCA) are conducted the 'Access of drug addicted to treatment and rehabilitation' round table with participation 41 governmental, international, public and PUDs community based organizations representatives including MOFA representative Mr. Gerrit Jak Steernberg and AFEW Executive Director Mrs. Anke Van Dam. Representatives of PUDs communities provide their opinion about existent situation with access to services. During meeting are presented assessment results with analysis's of national policies on human rights of PUDs. The final version of local legislation assessment on Human rights was submitted to DCA for further dissemination among national and international partners.



By decision of Coordination Council on prevention of drug abuse in the Republic of Tajikistan the results of assessment of law and drug policies were passed to relevant ministries and institutions. High-level coordination meeting conducted with participation of 18 key stakeholders and Vice-Primer of the Republic of Tajikistan. (DCA Letter # 10/1-2096 from August 09, 2013). Related link: <http://rus.akn.tj/>

In May 2013 AFEW-Tajikistan was involved in the development of Decree #171 on Procedures of the medical examination for HIV. Among major concerns AFEW expressed, are the provisions about forced HIV examination,



obligatory HIV examination of foreigners and deportation of foreigners with confirmed HIV-positive status. Besides, **AFEW-Tajikistan made suggestion to align Decree's terminology related to HIV and AIDS with UNAIDS recommendations.** Revised content of existent AIDS law - Decree #171 will assist on elimination of forced HIV examination including HIV examination of foreigners and deportation of foreigners with confirmed HIV-positive status. Related link: <http://nc-aids.tj/normativno-pravovye-dokumenti/postanovlenie-pravitelstva-rt/18-2011-04-05-10-15-32.html>

AFEW-Tajikistan provided essential recommendations related with PUDs access to OST and HIV prevention services within participation in thematic working group on updating of National Guideline on Harm Reduction services. National Guideline will equip local HIV service provider's organizations with methodology and standards of work within Harm reduction services and will bring contribution on integration of Harm reduction services into general health system. Related link: <http://afew.tj/ru/stati> <http://www.news.tj/ru/news/metadon-i-zakon-statya>



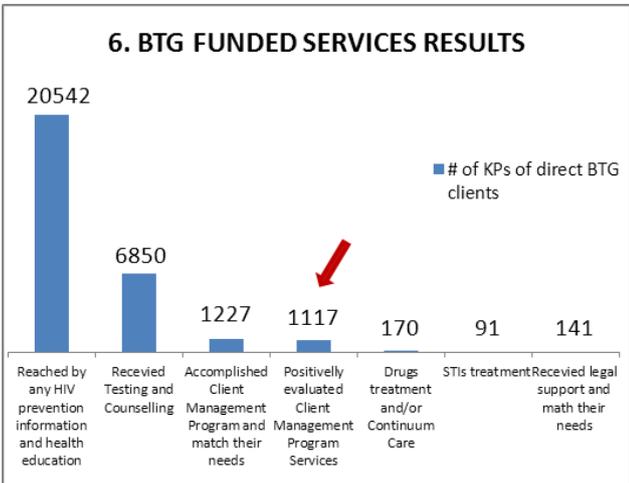
During 2013, AFEW-Tajikistan is provided support to Country Working Group activities on **revision and updating the Penitentiary Systems' Rules and Regulations on provision sanitary-epidemiological, infections control and health care in penal institutions.** Representatives from Supreme Court, Prosecutor General's Office, Ministries of Justice and Health, Caritas Luxemburg and AFEW were invited to contribute in Rules and Regulation for the ensuring of inmates human rights,

health and social care and introducing modern standards and practices in penitentiary system. Updated Penitentiary System Rules and Regulations on sanitary-epidemiological, infections control and health care in penal institutions after its approval will ensure of inmates human rights, health and social care and assists on introducing modern standards and practices in penitentiary system. There were decided to present final version of Regulations at the middle of 2014.

Objective 3. Integrate specific services for key populations within the general health system

Area 4. Development of sustainable approaches on Client Management and Harm reduction including health care in prisons settings.

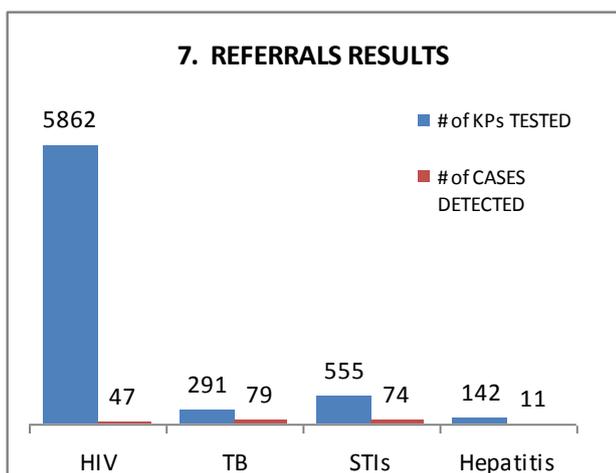
1227 key populations were accomplished BTG supported Client Management Program in 2013. From them **91% of key populations are positively evaluated the quality of services** provided by BTG sub-grantees and by services provided by result of referrals to health and social care services. (Diagram #6)



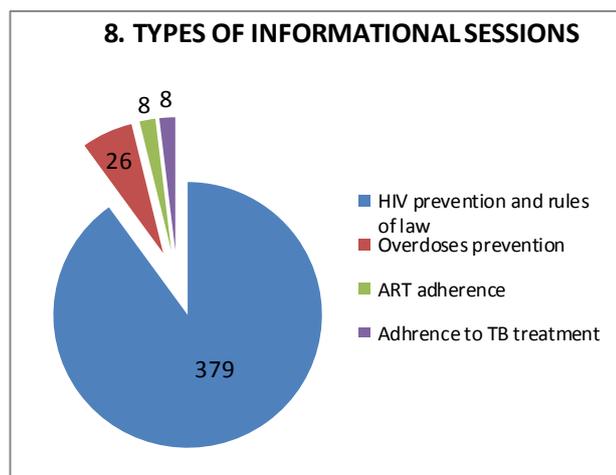
141 key populations promoted their rights and interests by receiving legal support of BTG. Related link: <http://www.hivgaps.org/news/spin-plus-a-home-that-still-attracts/#.UnIMG1O8Gul>

170 PUDs received detox and social re-adaptation services on the basis of state narcological service and NGO "Sakhi". 91 clients of Client Management Program were provided by STIs syndromes treatment. Related link: <http://www.hivgaps.org/news/sakhi-tajikistan-helping-people-who-use-drugs-return-to-society/#.UnIOyVO8Gul>

7. REFERRALS RESULTS



8. TYPES OF INFORMATIONAL SESSIONS



system of pre and post trainings evaluation and analyzing of trainings participants' responses by using standards questioners. (Diagram #8) Key populations were covered by educational activities of local NGOs in eleven regions of Tajikistan. Essential consultations on health issues including HIV, TB and STI's prevention were provided to mini-trainings participants. Educated team of trainers together with health professional provided relevant HIV and TB information and consultations to session's participants. By conducting planned events, BTG contributed on increasing the number of people those referred to diagnostic and testing, number of people who know their health status and the number of people who will receive needed treatment, care and support.

Area 5. Multisectoral coordination of BTG activities jointly with other programs.

During report period, AFEW-Tajikistan continuing its advocacy activities aimed on introducing key principle of universal access to services. The human rights advocacy activities include revising and updating policies on HIV/AIDS, coordination efforts, development of guidelines and curriculums for specialist, IEC materials for key populations and support to national wide advocacy and awareness raising activities.

6850 people received HIV testing and counseling services during participation in Client Management Program and European HIV testing Week in Tajikistan (November 22-29, 2013). And **20542 people in Tajikistan were reached by HIV prevention information** and health education in 2013. (Diagrams #6 and #8)

In 2013, BTG program activities contributed on **integration of CSO's client management services within general health system of Tajikistan**. Referrals system is confirm its effectiveness as evidence-based approaches on delivering HIV and TB focused services to hard-to-reach groups of key populations.

6850 BTG clients were tested on social significant infections in 2013. As result, 47 new cases of HIV, 79 new cases of tuberculosis, 74 STIs and 11 new cases of hepatitis are registered by state health services interacting with local NGOs in the framework of Regional Partner Services Providers Networks supporting by NGOs implementing Client Management Program in five regions of Tajikistan. (Diagram #7). One of the most **important successes of BTG program in Tajikistan is development of sustainable data verification system ensuring the quality of NGO's data on registration of new cases of HIV and TB**. Under the AFEW-Tajikistan support, local NGOs receiving BTG sub-grants was obligated to closely cooperate and interact with local health services such as AIDS and TB centers, STIs and narcological clinics of the Ministry of Health RT. (Diagram #7)

On June 06, 2013 ToT training "HIV and TB prevention and health care" were conducted in Dushanbe. 15 specialists from 14 NGOs are improved their practical skills on conducting informational sessions on health promoting among PUDs. AFEW has presented Terms of References for conducting series of informational sessions with requirements to integrate education activities with state health HIV and TB services.

Follow to its general strategy to sustain project approaches, AFEW-Tajikistan is introduced **unified standards on delivering health promotion trainings for key populations**. (Diagram #8)

Within BTG program **421 informational sessions on HIV prevention and rules of law** for PUDs and prisoners, overdoses prevention among IDUs, adherence to ART and DOTS for HIV positive PUDs, PLHIV and TB-patients were delivered by 16 NGOs. BTG partners utilized unified



During May-June, 2013 Drugs Control Agency under the President of RT was supported by BTG to conduct the series of competitions on best pictures among teenagers and Youth in Dushanbe, GBAO, Khatlon and Sughd provinces. The slogan of competition devoted to June 26, 2013 is "I am choosing health life style!".

On June 17-18, 2013 the exhibition and competition on best pictures among teenagers and Youth were conducted by NGO "Youth Generation of Tajikistan" and Drawing studies of Dushanbe. 60 pictures were preliminary selected for competition. 8 best pictures winners were provided with prizes' and memory gifts of organizers.

During June 17-28, 2013 AFEW Partner NGOs together with health specialists and volunteers will organize were organized informational kiosks in four administrative

centers of Tajikistan. During work of informational booths volunteers and outreach workers distributed IEC and visibility materials. Relevant health information was shared among citizens, interested people invited to receive consultations of health professional both from AIDS and TB centers. Medical specialists provided consultations and referred them to HIV testing and/or TB diagnostic services.



Finally, During May - June, 2013 under the BTG support were conducted 19 advocacies and awareness raising activities with participation about 4132 citizens of Tajikistan. Advocacy events devoted to International Day fighting against illicit drugs trafficking and abuse conducted in 9 regions of Tajikistan and include following: 4 competitions on best pictures among **200** teenagers and Youth in Dushanbe, GBAO, Khatlon and Sughd provinces; One exhibition and one competition on best pictures among **96** teenagers and Youth in Dushanbe; 12 informational kiosks activities in Dushanbe, Khudjand, Kulob, Vakhdat and Panjakent cities among about **3800** citizens and 1 Round Table "Access for

treatment and rehabilitation for PUDs" with participation **36** key stakeholders and PUD communities. Related

links:http://ygt.tj/index.php?option=com_content&view=article&id=210%3A-l-r-

http://ygt.tj/index.php?option=com_content&view=article&id=210%3A-l-r-&catid=7%3Ainfbul&Itemid=9&lang=ru

http://mmko.tj/index.php?option=com_content&view=article&id=149:-l-r-&catid=6:2011-07-29-05-49-20

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<http://news.tj/ru/news/snizit-vred-ot-narkotikov>

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The best example of passing innovative European approaches to Tajikistan and coordination of BTG with other programs is AFEW-Tajikistan's participation at European HIV Testing week conducted during November 22-29, 2013.

AFEW-Tajikistan in collaboration with the Republican AIDS Centre organized joint activities of European HIV Testing Week in Tajikistan. 8416 people received essential HIV related information and **3285 people are reached by voluntary counseling and HIV testing. 8 new HIV cases detected as a result of testing.**

European HIV Testing Week was conducted in the framework of BTG program in 14 regions of Tajikistan in

cooperation with ten local NGOs and regional AIDS centers. During the campaign people has a chance to go through voluntary consulting and testing (VCT) and take informational materials on HIV, TB and Hepatitis prevention and treatment, learn about the work of public organizations that provide support to key populations.

Related links: www.hivtestingweek.eu www.afew.tj <https://www.facebook.com/AidsFoundationEastWest>

<http://www.news.tj/ru/news/v-tadzhikistane-startovala-nedelya-testirovaniya-na-vich>

Objective 4. Strengthen the capacity of civil society organizations that work on HIV and key populations

Area 6. Improving the access of health professionals and NGOs staff to medical information related to prevention, treatment, care and support in HIV and AIDS, tuberculosis. STIs and hepatitis.

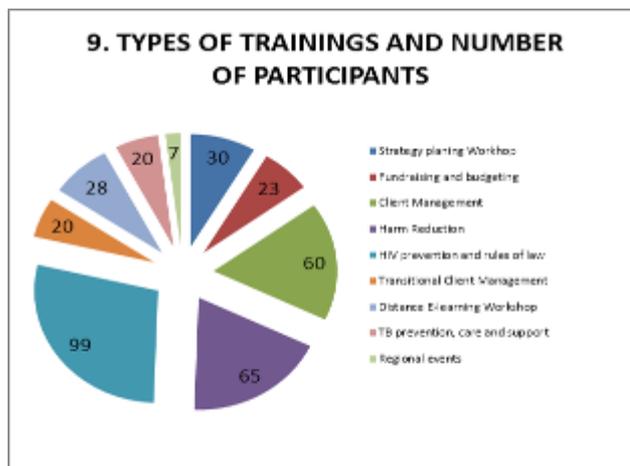
3. AFEW and sub grantees skills / performance have improved during the last year and plans for the next year:

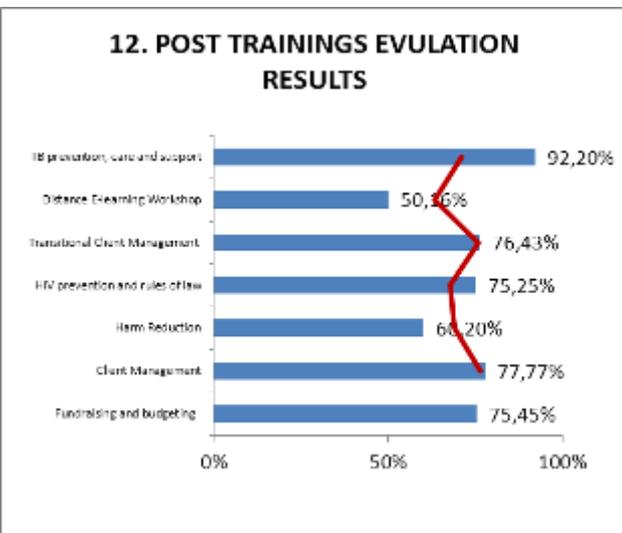
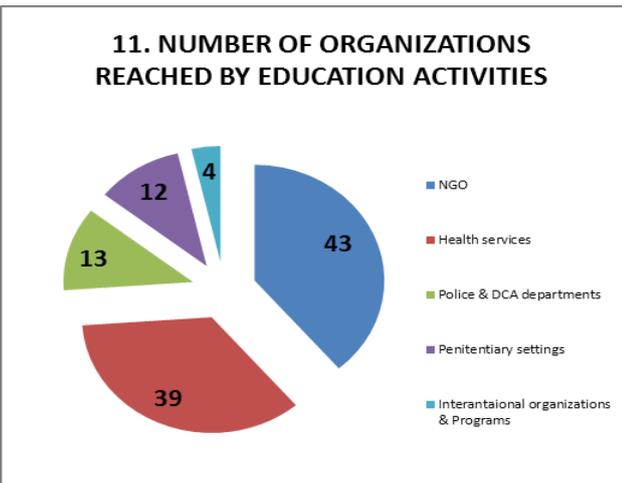
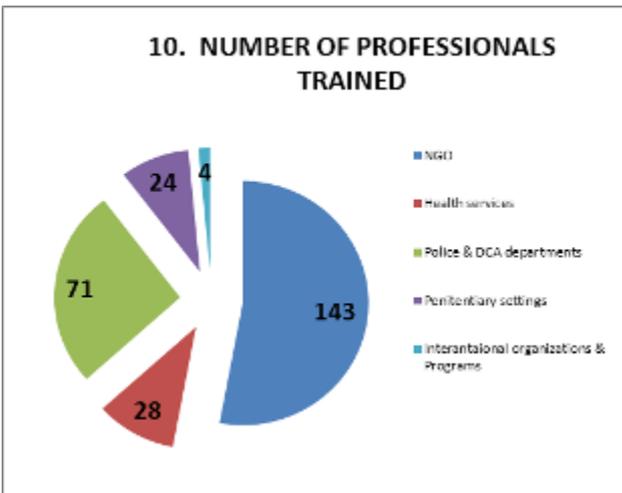


On January 16, 2013 AFEW Head Quarter approved offer of AFEW-Tajikistan to develop new web-site www.afew.tj. The team of 12 focal points and 5 national experts of Ministry of Health RT are established under BTG support to delivery informational and counseling services through online webplatform and individual work with local specialists, NGOs staff and key populations. During February 2013 AFEW-Tajikistan handed over 15 desk computers and 11 printers to 11 coordinators of Informational Points and 5 National Experts. All service delivering points of webplatform were connected to Internet. Active work within the given Project and new informational platform was launched in the middle of March 2013. Related link: <http://www.afew.org/ru/press-centr/news-single-view-5f4642a752b7487c75112d>

Informational and services delivering points placed on the basis of 10 NGOs, 10 Regional AIDS centers, regional hospital and Police Academy of the Ministry of Internal Affairs RT. In 2013, **BTG beneficiaries were provided with 3233 responses on HIV prevention, treatment, adherence, PTMT, tuberculosis, TB/HIV, MDR-TB, drug abuse, OST and treatment.** The web informational platform was actively promoted among key stakeholders during round table meetings, workshops and trainings conducted by AFEW-Tajikistan and its partners. Basic information on using of the web-site for dialogue with experts was provided to key stakeholders and AFEW partners.

In 2013, AFEW-Tajikistan **conducted 15 capacity building trainings and workshops with 345 participants and assist to 7 local counterparts to participate at three out-country events** such high-level meeting of CIS countries Sanitary and epidemiological Services in Moscow, Russia (January 31, 2013), BTG regional meeting in Kiev, Ukraine (September 16-17, 2013), and Regional Round Table "Role of law enforcement structures on decreasing HIV epidemic" in Bishkek, Kyrgyz Republic (November 28-29, 2013). (Diagram #9).





On January 2013, Mr. Samardin Aliev the Senior Head of State Sanitary and Epidemiological Services of the Republic Tajikistan took part at **high-level meeting** of sanitary services of CIS countries and provided information about existent situation on HIV epidemic in Tajikistan and Tajik NGOs involvement to HIV prevention programs among key populations. On September 16-17, 2013 **Regional meeting** of BTG partners was conducted in Kiev. During meeting representatives of four Tajik NGOs “SVON Plus”, SPIN Plus”, “Rohi Zindagi” and “ROST” presented information about their achievements and experiences in implementation of the project. On November 28-29, 2013 representative of DCA took part at **Regional Round Table** for law enforcement officers in Bishkek. DCA representative Mr.Nargiz Alierova presented *AFEW* BTG experience on delivering advocacy and awareness raising trainings “HIV prevention and rules of law” for police officers in Tajikistan.

By BTG and co-funded educational activities were educated 270 professionals from 111 organizations represented by NGOs, governmental health services of the Ministry of Health RT, penitentiary settings of the Ministry of Justice RT, law enforcement structures of Ministry of Internal Affairs RT and Drugs Control Agency under the President of RT (DCA).(Diagrams #10 and #11). Specific trainings on ART, DOTS, adherence, care and support to PLHIV, TB-patients and OST for HIV positive PUDs were conducted by invitation of lead specialists of Republican AIDS and TB services, Republican clinical narcology center. The series of four regional training on “HIV prevention and rules of law” for law enforcement officers are conducted in coordination with Departments on Public Safety and Medical provision of the Ministry of Internal Affairs RT.

100% or 14 project trainings including Health[e]Foundation workshop were accompanied by pre and post trainings evaluation and further analyzing of results achieved. **71,37% of all post trainings evaluation responses of trainings participants are correct.** Trainings performance is consist from key questions assisting to monitor skills dynamic among participants and/or evaluate the level of their knowledge’s improvement. (Diagram # 12)

In aims to provide ongoing coaching of partners on implementing activities and monitor the quality of services provided, during 2013, *AFEW*-Tajikistan is conducted **five monitoring site visits to provide ongoing coaching for partners implementing BTG** including IAIA, USAID and GFATM program activities. Monitoring teams are consisted from specialist represented by Republican AIDS center, DCA and external experts as Mr. Roman Dudnik (MSM GF Secretary), Mr. Vladimir Magkoev (NGO “ROST”) and Mrs. Mehriniso Rustamova (Academy of Medical Scientific’s of RT).

Experts delivered methodological consultations, practical advices and support for NGOs staff and Informational points coordinators. Relevant recommendations on enhancing program management of project were delivered to sub-grantees. Final recommendations are taking into account of *AFEW*-Tajikistan and sent to sub-grantees. As a part of BTG monitoring plan, MOFA representative Mr.

Gerrit Jak Steerberg and AFEW Executive Director Mrs. Anke Van Dam are visited NGOs “SPIN Plus” and “Sahi” working with PUDs and HIV positive people in Dushanbe. During their visit in June, 2013, guests participated in AFEW awareness raising activities Round table, Training for law enforcement officers and conduct series of meetings with UNDP, DCA, Penitentiary System, Ministry of Health RT representatives. Monitoring site visits are conducted on April 10-19, May 17, June 15-25, November 21-28 and December 25-27, 2013. **The process of financial and program management of sub-grants and execution of project commitments are monitored by AFEW staff. Monitoring reports with appropriate recommendations was submitted to AFEW-Tajikistan’s Grant Committee consideration.** On May 23, 2013 by AFEW TRC decision was closed the sub-grant of NGO “Nigoh” implementing activities the frame of BTG Project. Decision for sub-grant cancellation is developed by results of program and financial monitoring of NGO activities and unfavorable atmosphere in organization. On November 05, 2013 sub-grant of NGO “Marifatpocho” in the frame of Bridging the Gaps Project was closed by AFEW TRC decision. Decision for sub-grant cancellation is developed by results of program and financial monitoring of NGO activities of organization.

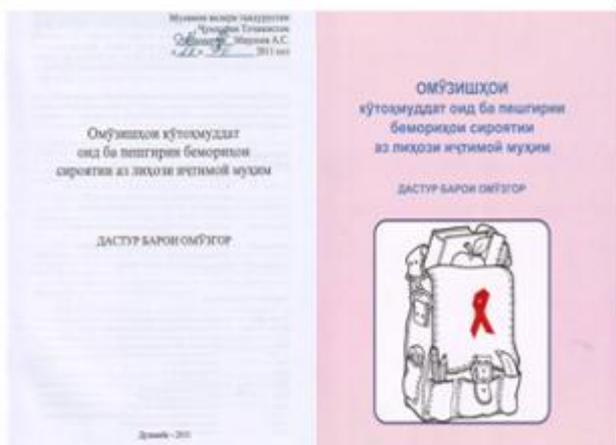


In 2014, AFEW-Tajikistan is plan to delivery limited number of trainings focused on improvement of the quality of Client Management services and interaction with law enforcement structures to promote human rights for health. Outreach and social workers will refresh their knowledge’s during HIV prevention, adherence, care and support trainings. Trainings participants will be those specialists involved in provision of direct services to key populations. Regarding general strategy on improvement of access to informational resources, AFEW-Tajikistan will actively promote its webplatform www.afew.tj

Area 7. Development IEC materials appropriate to informational needs of key populations and specialists

4. Materials developed:

Training Manual



June 10, 2013 AFEW has printed brochures “HIV” and “Hepatitis” on Russian and Tajik with 2700 copies each. Materials were distributed to local partners working with key populations in the frame of existent AFEW programs supported by MOFA and GFATM. In 2013, AFEW-Tajikistan’s Training Manual on conducting educational mini-trainings on preventions of social-significant disease among key populations is widely introduced. Training Manual is approved by Ministry of Health RT and became as long term approach supporting NGOs and health services in delivering health trainings for key populations. (Picture “Training Manual”)

During July, 2013 AFEW has disseminated these brochures among 22 local NGOs working in 11 regions of Tajikistan. On July 15, 2013 AFEW has re-printed brochure “The rights of detainees” in Russian and Tajik with 1000 copies. Related links:

- <http://www.hivgaps.org/news/the-rights-of-detainees-new-brochure-for-key-populations-in-tajikistan/#.UnlRaiO8Gul>
- http://www.afew.org/fileadmin/data/2011/Photos/Central%20Asia/Rights_of_Detainees.pdf

By request of UNDP AFEW provided to PIU UNDP Tajikistan for re-printing with 20000 copies the next AFEW informational materials: «Overdoses», «Personal hygiene», «STIs», «Veins» and «HIV and pregnancy».

On December 25, 2013 printed version of AFEW “HIV prevention Client Management” Manual with 700 copies and “Mini-training on prevention social significant



infections” Module with 450 copies were passed to Ministry of Health RT for further distribution among health facilities in all regions of Tajikistan. Manual and Module were approved by MoH RT and printed by PUI UNDP Tajikistan in the frame of GFATM funding.

In 2014, AFEW- Tajikistan plans to disseminate some part of these materials among Informational Points and national experts working within BTG Online web platform. After submitting mid-term evaluation results, AFEW-Tajikistan is planning to develop new and/or reprint most needed IEC materials for key populations and specialists. All IEC materials developed within BTG and other AFEW-Tajikistan programs are placed at website: www.afew.tj Related links: <http://afew.tj/ru/broschyury>

5. Developments that took place within organization and that are foreseen for the next year:



In accordance with decision of AFEW Board (Amsterdam, Netherlands) Tajikistan Country office developed all needed documents and presented to Ministry of Justice RT. In April, 2013 new local organization – AIDS Foundation East West-Tajikistan was officially registered. On November 22, 2013 AFEW-Tajikistan re-registered in the Ministry of Justice RT by # 1534”A”.

On December 14, 2013 the Strategic Plan for 2014-2016 of newly established RPO “AFEW-Tajikistan” has been developed and submitted to review of the Board of AFEW-Tajikistan.

AFEW-Tajikistan is legal successors of Representative office of Dutch humanitarian organization “Shichting AIDS Foundation East-West” in the Republic of Tajikistan with over ten years’ experience on HIV/AIDS and TB including work in prisons settings of Tajikistan. AFEW-Tajikistan implements health promotion programs targeting prisoners and specifically focused on providing comprehensive package of continuous services in detention institutions of Tajikistan and has through understanding of specific of work in prison settings.

AFEW-Tajikistan has political support of local authorities and established effective cooperation with governmental structures, namely Penitentiary Systems, Ministries of Justice, Internal Affairs, Public Health and Social Welfare, regulated by Memorandums of Understandings and annual work plans.

AFEW-Tajikistan and its partner CSO’s have regular access to the prisons settings and closely work with AIDS, narcology, TB and primary health centers and, interact with social and legal support organizations. AFEW-Tajikistan interacting with the Penitentiary System of the Ministry of Justice RT on the basis of Memorandum of Understanding signed on August 25, 2005, revised on January 24, 2008 and last update on October 02, 2013.

AFEW –Tajikistan implementing its health promotion programs in Tajikistan on the basis of Memorandum of Understanding with Ministry of Health and Social Development signed on January 24, 2008 and re-signed on December 24, 2013. In 2014, AFEW-Tajikistan is planning to establish branches in two biggest regions – Khatlon and Sughd province. Regional branches will develop new organizational strategy on delivering direct services to key populations and improve monitoring of field programs implemented by local NGOs receiving BTG sub-grants. Besides, this approach will allow to receive financial support from the local donors and therefore will ensure sustainability of the organization and its’ programmes.

НАКАЗЫВ

Министр юстиции Республики Таджикистан

Министр здравоохранения Республики Таджикистан

№	Имя должности	Чрезвычайно	Место работы	Наименование должности	Место работы
1	Директор-координатор программы по борьбе с ВИЧ/СПИДом в Республике Таджикистан	Ташкент	Министерство юстиции Республики Таджикистан	Директор-координатор программы по борьбе с ВИЧ/СПИДом в Республике Таджикистан	Министерство юстиции Республики Таджикистан
2	Заместитель директора программы по борьбе с ВИЧ/СПИДом в Республике Таджикистан	Ташкент	Министерство юстиции Республики Таджикистан	Заместитель директора программы по борьбе с ВИЧ/СПИДом в Республике Таджикистан	Министерство юстиции Республики Таджикистан
3	Менеджер программы по борьбе с ВИЧ/СПИДом в Республике Таджикистан	Ташкент	Министерство юстиции Республики Таджикистан	Менеджер программы по борьбе с ВИЧ/СПИДом в Республике Таджикистан	Министерство юстиции Республики Таджикистан

НАКАЗЫВ

Министр здравоохранения Республики Таджикистан

№	Чрезвычайно	Место работы	Наименование должности	Место работы
1	Директор-координатор программы по борьбе с ВИЧ/СПИДом в Республике Таджикистан	Ташкент	Директор-координатор программы по борьбе с ВИЧ/СПИДом в Республике Таджикистан	Министерство юстиции Республики Таджикистан
2	Заместитель директора программы по борьбе с ВИЧ/СПИДом в Республике Таджикистан	Ташкент	Заместитель директора программы по борьбе с ВИЧ/СПИДом в Республике Таджикистан	Министерство юстиции Республики Таджикистан
3	Менеджер программы по борьбе с ВИЧ/СПИДом в Республике Таджикистан	Ташкент	Менеджер программы по борьбе с ВИЧ/СПИДом в Республике Таджикистан	Министерство юстиции Республики Таджикистан

6. Plans to adjust the project activities and/ or approach and/ or the organisational structure

There are three key directions of work focusing on enhancing the quality of Client Management services, integrations of NGO program approaches into general health system and increasing awareness' raising activities among general populations in aims to reduce stigma and discrimination toward PUDs and promote their rights for health and social care.

Enhancing the quality of Client Management Services will be assured by systematization of routine work at fields and improving social mobilization capacities of local NGOs to promote the rights and interests of key populations.

Integration of NGOs-based programs into general health system will be reached by coordination wide national referrals system between NGOs and health services such as AIDS, TB services, narcological centers and STI's clinics.

Reducing the level of stigma and discrimination will be achieved by technical assistance to advocacy activities of national technical working groups updating and /or revising existent policies and procedures making barriers on improving access to HIV prevention, care and support services for key populations. As a part of advocacy approaches, the evidence-based practices on conducting wide national awareness raising activities devoted to WAD and Memory Days will be organized through local NGOs and Republican AIDS Center.

AFEW-Tajikistan will continue and further develop its close collaboration with Penitentiary System namely by provision of methodological assistance to Penal Technical Working Group, support of infections control implementation in prisons settings and accomplishment of revising existent Rules and Regulations on provision medical assistance in prisons.