ANNUAL REPORT 2015

KEY POPULATIONS IN FOCUS
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Back in 2005 when I was working at the World Health Organisation (WHO) on the 3 by 5 Initiative in Europe, it quickly became apparent that we had a big problem. In Eastern Europe, not only was the HIV epidemic spiralling out of control, but civil society was not empowered, and non-governmental organisations (NGOs) were all but non-existent.

Then, we discovered AIDS Foundation East-West (AFEW). They were working in Russia, Ukraine and throughout Central Asia. They were a shining light of commitment and effectiveness, focusing on key populations with the services needed, despite overwhelming obstacles in terms of funding and legal barriers. They quickly became an important partner for us.

I later left WHO for the Global Fund to Fight AIDS, Tuberculosis and Malaria. I had the good fortune to meet the executive director of AFEW at the European HCV Initiative meeting in Berlin in late 2014. We talked about AFEW’s heyday, the current difficult funding environment and possible collaboration. In our follow-up conversations in the months that followed, I was invited to become AFEW’s next Board Chair.

My first tasks were to address our own troublesome finances as well as the difficulties of working in Russia. I am proud to say that we closed 2015 not just with a stable financial outlook, but also with a three-year project to support the greater involvement of Eastern Europe in the 22nd International AIDS Conference in 2018 (AIDS 2018) in Amsterdam. Furthermore, we embark on a major five-year project, Bridging the Gaps II, allowing us to continue our vital work amongst key populations.

In 2016, we will develop a new strategic plan in cooperation with our member organisations. We will maintain our focus on HIV, key populations and harm reduction, whilst also considering new opportunities, such as those in the field of viral hepatitis. The new highly effective treatments for hepatitis C virus (HCV) provide us with an opportunity to eliminate this deadly virus, yet, Eastern Europe remains largely left behind with regards to treatment access — much like the early years of HIV.

Where can AFEW make the greatest contributions? This is the central question that will guide my work with the Board, the management team and AFEW’s partners in the coming years, as a renewed AFEW once again becomes a key player in the region.

Jeffrey V. Lazarus
Chair of the AFEW Board

Whilst increased access to quality health services continued to spearhead our activities in Eastern Europe and Central Asia (EECA), AFEW accomplished much more than that. We are happy to share our achievements in this Annual Report.

AFEW in Tajikistan achieved significant results in policy development. For example, the country’s National Action Plan on the sustainable development of HIV prevention programmes and harm reduction for 2016–2020 contains all of the objectives set by AFEW’s largest project, Bridging the Gaps: Health and rights for key populations. Amongst other things, this equates with reaching an increased number of people who use drugs with services, and the inadmissibility of discriminating against key populations. In addition, thanks to AFEW, local public organisations may provide voluntary counselling and testing on their premises. This important decision increases the breadth of services provided to key populations and simplifies access to HIV testing.

AFEW-Ukraine reached the President’s Commissioner for Children’s Rights with a resolution on the health and rights of children and adolescents — the outcome of a large conference in Kyiv attended by 245 specialists from 9 countries. At that event, AFEW-Ukraine, with input from its local partners, developed and then presented the Standards of Rehabilitation Programme for Adolescents at the age 14-18 years who have experience in psychoactive substance use.

AFEW-Kazakhstan continued to coordinate a project in Central Asia to improve HIV services for people in prisons and after their release. Through this project, AFEW maintains its reputation as a prison health expert in the region.

In 2015, AFEW-Kyrgyzstan and AFEW-Russia primarily focused on supporting services for women affected by HIV. In addition to other activities, guidelines for gynaecologists on treating female drug users and standards of support to women living with HIV were developed.

Working in Russia has become increasingly challenging due to the continuing hostile environment specifically targeting NGOs. Thus, AFEW is considering other avenues for collaboration with local NGOs.

In Georgia, AFEW supported a six-month advocacy campaign Addiction is Not a Crime to decriminalise drug use and foster tolerance towards people who use drugs. A video clip produced within the campaign reached over 114,000 people. In September, AFEW held a second partner meeting amongst NGOs implementing the people who use drugs programme of the Bridging the Gaps project. The event gathered over 70 participants from 10 countries.

AIDS 2018

AFEW is proud to have been chosen by the Dutch Ministry of Foreign Affairs as the organisation best suited to engage EECA — the region globally hit hardest by HIV — in the 22nd International AIDS Conference (AIDS 2018) in 2018. Current UNAIDS estimates for the region suggest that more than 1.5 million people are living with HIV in EECA. In addition, with a prevalence of up to 9%, EECA features some of the highest rates of HCV among people who use drugs found globally.

AIDS 2018 will serve as a platform to highlight the successes and challenges in the responses to HIV, tuberculosis (TB) and other diseases in the region. And, AFEW has much to share.

We look forward to 2016 and beyond, and would like to thank all of our donors and partners for their trust in the AFEW Network. We will continue contributing to a better quality of life for all in EECA.

Anke van Dam
Executive Director
About AFEW

AIDS Foundation East-West (AFEW) is an international network of civil society organisations dedicated to improving the health of key populations. With a focus on Eastern Europe and Central Asia (EECA), AFEW strives to promote health, and increase access to prevention, treatment and care for public health concerns such as HIV, TB, viral hepatitis and sexual and reproductive health and rights.

Mission

ADVOCATE FOR HUMAN RIGHTS

for key populations and protect their rights to health

DECREASE THE STIGMA OF HIV

by providing information to community leaders and creating a supportive environment

UTILISE INNOVATIVE STRATEGIES

to promote healthy behaviours

ENGAGE COMMUNITIES

in developing participatory approaches

In 2015, AFEW implemented projects in

- Georgia
- Kazakhstan
- Kyrgyzstan
- Russia
- Tajikistan
- Ukraine
## Focus

<table>
<thead>
<tr>
<th>Focus</th>
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</thead>
<tbody>
<tr>
<td>People who use drugs (PUD)</td>
<td>Men who have sex with men (MSM)</td>
</tr>
<tr>
<td>People living with HIV (PLHIV)</td>
<td>Most-at-risk adolescents</td>
</tr>
<tr>
<td>Prisoners (including former prisoners)</td>
<td>Doctors and medical personnel</td>
</tr>
<tr>
<td>Sex workers</td>
<td>State prison, law enforcement and justice authorities</td>
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## Activities

<table>
<thead>
<tr>
<th>Activity</th>
<th>Description</th>
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<tbody>
<tr>
<td>Advocacy</td>
<td>by supporting East-West dialogue and exchange, we promote evidence-based interventions on the local and international levels</td>
</tr>
<tr>
<td>Client Management</td>
<td>providing key populations with direct access to health and social services</td>
</tr>
<tr>
<td>Capacity Building &amp; Empowerment</td>
<td>providing activists, and public and state organisations with knowledge, skills and resources to extend quality services to key populations and promote their human rights</td>
</tr>
<tr>
<td>Development of Informational Materials</td>
<td>publishing brochures and guidelines to improve knowledge and skills in health-related areas</td>
</tr>
<tr>
<td>E-Learning</td>
<td>offering online educational platforms to reach key populations and health professionals with the most up-to-date information about healthcare, laws and social services</td>
</tr>
<tr>
<td>Policy Development</td>
<td>working with state bodies to amend existing healthcare laws and policies to meet the highest international standards and best practices</td>
</tr>
<tr>
<td>Prison Health Care</td>
<td>promoting harm reduction and HIV prevention among prisoners and prison staff, conducting HIV and hepatitis testing and advocating for the rights of detainees</td>
</tr>
<tr>
<td>Raising Awareness</td>
<td>conducting mass [media] events to promote health and prevent infectious diseases</td>
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Country profile: The Netherlands

AFEW International plays a vital role in the coordination of the network. We connect the network to international donors and ensure all policies, procedures and reports meet the expectations and standards of international donors.

By providing independent oversight, AFEW International aims to maintain a clear and transparent method of working. As the primary link internally between network members and externally with policy makers, donors and other stakeholders, AFEW International promotes the AFEW Network as an international network of organisations in both the West and the East. AFEW International conducts activities and fosters relationships to promote advocacy for key populations and to work with international partners to ensure that the needs of key populations remain at the forefront of both national and international policy. As such, we are a member of the following agencies:

Projects managed By AFEW International

AIDS ACTION EUROPE

CIVIL SOCIETY FORUM ON DRUGS
A BROAD PLATFORM FOR A STRUCTURED DIALOGUE BETWEEN THE EUROPEAN COMMISSION AND EUROPEAN CIVIL SOCIETY, WHICH SUPPORTS POLICY FORMULATION AND IMPLEMENTATION THROUGH PRACTICAL ADVICE

SHARE-NET INTERNATIONAL
THE KNOWLEDGE PLATFORM ON SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS (SRHR) THAT SEeks TO COMBINE THE EXPERTISE AND STRENGTHS OF LARGE ORGANISATIONS, SOUTHERN PARTNERS AND KEY INTERNATIONAL ACTORS WORKING IN THE AREA OF SRHR TO ACHIEVE MILLENNIUM DEVELOPMENT GOALS 5 AND 6 AND CONTRIBUTE TO THE POST-2015 AGENDA

HIV/AIDS CIVIL SOCIETY FORUM
AN INFORMAL ADVISORY BODY FACILITATING THE PARTICIPATION OF NGOs AND NETWORKS, INCLUDING THOSE REPRESENTING PEOPLE LIVING WITH HIV IN EUROPEAN POLICY DEVELOPMENT AND IMPLEMENTATION, AS WELL AS TO EXCHANGE INFORMATION

ADDITIONALLY, AFEW INTERNATIONAL COORDINATES OPPORTUNITIES FOR THE EXCHANGE OF KNOWLEDGE AND THE PROMOTION OF PARTNERSHIPS WITHIN AND BEYOND THE NETWORK
**Bridging the Gaps:** Partners share best practices at final meeting

In September, AFEW and its Bridging the Gaps project partners finalised the first phase of activities at the Second Partner Meeting of NGOs. Including all implementation partners, the meeting took place in Tbilisi (Georgia). In addition to sharing experiences, best human rights and advocacy practices, opportunities and the challenges faced working with and for people who use drugs in nine countries, the meeting also summarised the results of the Bridging the Gaps programme.

In 2015, the Dutch Ministry of Foreign Affairs decided to continue funding the programme for another five years.

**HIV and hepatitis testing week in Central Asia**

Within the UNODC-funded project Get Information, Get Tested, Get Treated!, AFEW reached 1759 people in Kazakhstan, Kyrgyzstan and Tajikistan through HIV voluntary counselling and testing services. A testing week was organised for people who use drugs, prisoners and sex workers.

In Tajikistan, AFEW tested almost 1400 people who use drugs for hepatitis B and C. The testing was organised under the Gilead Sciences Europe-funded project Get Information, Get Tested, Get Treated!

**New project concept on TB/HIV presented in Kazakhstan**

In Kazakhstan, AFEW arranged several meetings with key stakeholders to present a new project concept aimed at strengthening engagement amongst the non-public sector to provide quality patient-centred TB/HIV services. Prior mapping of existing services and providers shaped the concept. In 2015, AFEW began developing a brochure on the rights of patients, a booklet for the families of patients with TB/HIV and a brochure with a list of TB/HIV service providers across the country. The project's main activities will launch in 2016.
Kyrgyzstan

HIV Situation

- 65% transmitted through unprotected sex
- 27% transmitted through injecting drug use

Budget Allocation

- Direct Services: 12%
- Integration of services: 15%
- Advocacy: 10%
- Capacity building: 10%
- Online services and access to information: 3%
- Research: 3%

Projects in 2015

- Distribution of Food Parcels & Monitoring of Distribution: 2013 - 2015, $156,443
- Conference Services & Organization of Training: 2013 - 2014, $34,074
- HIV Testing Project: 2015, $3,498,550
- Examination and evaluation of prison health in Kyrgyzstan: 2015, $5,072

- Over 200 service providers went through 11 educational events on HIV prevention, diagnosis, and treatment among prisoners before and after release

- 50 state social workers went through training on client management of people living with HIV

5300 People who use drugs received

5000 Prisons in 9 facilities

98% correctly identify the routes of transmission

5000 Patients on maintenance phase received over 19,000 food parcels

510 People went through voluntary consultation and testing (VCT)

22 Police Representatives went through training on HIV prevention at workplace and collaboration with key populations

25 Police Doctors trained on provision of quality pre and post-test HIV counseling

5300 People who use drugs received

35,600 Client management services

633 People were women, men received support through female centers in prisons and OSH

192 Prisoners in 9 facilities

510 People went through voluntary consultation and testing (VCT)

192 Prisoners in 9 facilities

280 Family Doctors

150 Family Nurses

Tied to training on contemporary recommendations for the detection and management of TB patients on primary care level.
'Thanks to Podruga I became a mother again!' 

Linara is 42 years old. She calls herself the oldest drug user in Osh (Kyrgyzstan). Linara is a client of NGO Podruga which provides client management services to vulnerable women.

In the spring of 2015, Linara became pregnant. At one clinic, she was denied registration of her pregnancy because a residence registration stamp was missing from her passport. When Linara finally visited a private family planning centre, the gynaecologist told her that her foetus was infected with HIV and her child would be a freak because of her long history of drug use. She urged her to abort the foetus and prescribed medication to induce a miscarriage.

Linara turned to Podruga for advice. There she was referred to a friendly physician who found the foetus healthy and told her that the pregnancy was progressing normally. Subsequent examinations detected no abnormalities. Linara and her husband Artiom decided to stop using drugs. Podruga helped them both enrol in an opioid substitution therapy (OST) programme. Within a short time, they significantly decreased their dosage and later visited Plus Centre, a rehabilitation centre for people who use drugs.

On 25 December, Linara gave birth to a healthy baby boy, Arseniy. Linara thinks that the physician’s advice to abort her pregnancy was driven by discrimination. Podruga provided Arseniy with clothes and a baby bed, and gave vitamins to Linara.

Whilst Linara cares for their son, Artiom is the family’s main bread-winner. As an outreach worker, Artiom visits spots where people use drugs handing out and exchanging syringes. His weekly coverage reaches 100 people who use drugs. In addition to syringes, he distributes brochures about HIV and urges those he meets to get tested and screened for TB. Linara says that, as soon as the baby grows, she will do outreach work as well.

Public Foundation Podruga is the only centre in southern Kyrgyzstan providing a comprehensive package of medical, social and legal services to women in crisis. Women there can also access low-threshold services, such as a temporary shelter, food, washing and bathing. The Bridging the Gaps project supports the centre.

'Monthly coverage – 2000 people who use drugs'

Since 2000, Public Foundation Parents against Drugs in Osh, an AFEW sub-grantee, has exchanged syringes and provided client management services to people who use drugs. Each of the 20 outreach workers in the NGO covers a unique district and their own quantitative indicators of success. Each morning—including weekends and holidays—outreach workers exchange the used syringes they collect and pick up new, clean syringes to distribute amongst people who use drugs.

Mahammad Taklaev, 48, supervises the outreach workers. He first visited Parents against Drugs in 2005 to exchange his own syringes. Later, Mahammad joined the substitution therapy programme.

'I was in very bad shape, I could barely walk. The NGO’s social workers took me to several doctors and I started treatment.'

Mahammad decided to stay. As a volunteer, he explained to clients how to inject drugs correctly and more safely. Later, he became an outreach worker. Within the framework of various AFEW projects, he completed several training programmes and seminars on the prevention of infectious diseases and motivational counselling. Today, he shares that knowledge and those skills with other outreach workers.

“Harm reduction programmes are so successful that local drug dealers, faced with fewer clients, spread rumours suggesting that methadone was brought to Kyrgyzstan deliberately so that drug users would die sooner.”

Mahammad has been taking methadone for 11 years now. In Osh, five methadone distribution points currently provide OST for people who use drugs.

Parents against Drugs refers its clients to various state and non-governmental organisations, with which it has signed partnership agreements. These include the AIDS Centre, the Narcology Department, NGO Podruga, the Musaada Rehabilitation Centre and others. Often, these agencies work with clients for months, motivating them to undergo health screening, developing a service plan with them and accompanying them to consultations with health professionals. In 2015 within AFEW’s Bridging the Gaps project, Parents against Drugs provided client management services to 1200 people, 85% of whom completed a detox programme.

Today, Parents against Drugs faces two major challenges. First, they lack a special furnace for the disposal of used syringes. Taking syringes to a dump and burning them there is illegal, but no other solution exists. Second, the demand for HCV testing remains quite high, not to mention providing treatment for it. Up to 90% of people who inject drugs test positive for hepatitis. NGOs in Tajikistan face the same problem. However, currently neither international donors nor local governments provide financial support for hepatitis testing and treatment.
**UKRAINE**

**HIV situation**

- **2013**: 2,160
- **2015**: 15,869
- **2014**: 19,306

59.3% transmitted through unprotected sex

- NEW HIV CASES REGISTERED
- transmits through injecting drug use

**Budget allocation**

- 41%
- 24%
- 25%
- 8%
- 2%

- Direct Services
- Integration of services
- Advocacy
- Capacity building
- Online services and access to information
- Research

**Projects in 2015**

- **Bridging the Gaps: Health and rights for key populations**
  - Duration: September 2014-December 2015
  - Sponsor: Dutch Ministry of Foreign Affairs
  - 2015: 470,762

- **Operational Research for Bridging the Gaps: Health and rights for key populations**
  - Duration: 2014-2015
  - Sponsor: Aids Fund, Dutch Ministry of Foreign Affairs
  - 2015: 625,430

- **Immediate Intervention to Improve the Health of HIV-Positive Women in Kyiv**
  - Duration: September 2014-September 2015
  - Sponsor: Effective Girls Programme
  - 2015: 432,800

- **HIV/AIDS Prevention and Health Promotion among Drug Users in Ukraine**
  - Duration: 2009-ongoing
  - Sponsor: Johnson & Johnson, Danish NDRF
  - 2015: 403,320

**78** RECALLED REHABILITATION SERVICES

- HIV+WOMEN
  - 59 CARE AND SUPPORT SERVICES
  - 34 COMPLETED LANGUAGE AND PROFESSIONAL TRAINING PROGRAMMES
  - 612

**245** EXPERTS FROM UKRAINE & 9 OTHER COUNTRIES

- DISCUSSED EFFECTIVE APPROACHES TO WORKING WITH TEENAGERS WHO HAVE EXPERIENCE IN THE USE OF PSYCHOACTIVE SUBSTANCES

**229** SPECIALISTS PARTICIPATED IN ONLINE TRAINING ON TB/HIV

- 49 SPECIALISTS WERE TRAINED WITHIN 8-MONTHS COURSE ON ENSURING HUMAN RIGHTS OF MOST-AT-RISK ADOLESCENTS

**1543** SERVICES AT 4 SOCIAL BUREAUS

**16,353** SOCIAL BUREAUS WHO RECEIVED PROFESSIONAL EDUCATION

**15 CORRECTIONAL COLONY EMPLOYEES**

- TRAINED ON HIV PREVENTION AMONG UNDERAGE DRUG USERS
- A CONFERENCE ON EFFECTIVE APPROACHES IN WORKING WITH TEENAGERS WHO HAVE EXPERIENCE IN THE USE OF PSYCHOACTIVE SUBSTANCES WAS HELD FOR PRISON STAFF IN ALL REGIONS OF UKRAINE
Success Stories from Ukraine

Alina (33) lives in Kyiv. She is a former drug user and is HIV-positive. Her husband is an active drug user, and she has two children. Whilst her sons are HIV-negative, her oldest child had serious health problems forcing Alina to concentrate on her family and treatment for her son. For nine years, she did not work and she lost all her social contacts.

After joining the self-help group Kyanka+, which supports and empowers HIV-positive women, her life has significantly changed. ‘I met wonderful women there – Vira, Anya and other girls – and my life was replenished. I began to participate in all of the activities, and took manicure and florist courses. I noticed that I started to pay attention to myself, to my body and my health, to my appearance. It felt as if I had escaped from custody, from a dungeon. My children and my family are the most important things to me – I live for them. When I am happy, they are happy, too. Now, we have fewer arguments and quarrels within the family. I really hope that this project does not end, since many more women could change their lives, just like I did.’

S., from Kirovohrad, a city in central Ukraine, is 18 years old. He lives with his grandmother in town, whilst his parents live outside the city and take no part in his upbringing. S. joined the client management programme of the social bureau Lilia after a referral from the police who identified him as a well-known thief. From the very beginning, he became an active volunteer at Lilia, taking part in a series of training seminars for clients and volunteers. He regularly takes part in various thematic activities.

‘My introduction to the project did not start very pleasantly. This was on account of the police: foolishly I got into trouble and there it started... Thanks to the charitable foundation ‘Return to Life’ and the project, I reconsidered many things in my life, and began to work on my faults. I became a volunteer and realised that not all specialists are the same. There are those who do not lecture you, but try to understand and help you.’

At Lilia, S. performs his duties quite responsibly. Because of this, he has become a senior volunteer and now instructs new volunteers.

‘For my active learning and work with people, the social bureau provided me with a pleasant gift: they paid for my driving lessons (category B). I have dreamed of getting my driver’s licence for a long time.’

His passion for cars and receiving his driver’s licence allowed him to spend more time with his father in the garage, contributing to the gradual restoration of relations with his family. S. decided to complete his education and was admitted to a vocational school. He combined his education with his driving lessons and never missed a class. On his birthday, his parents gave him a long-awaited gift: they covered his category A driving lessons and bought him a motorbike.
A group of clients from a social bureau in Georgia received training in Ukraine to become instructors at the rehabilitation centre for people who use drugs. The skills and experience gained will be applied to launch a centre in the Kakheti region of Georgia.

**AFEW DEVELOPED AN ADVOCACY CAMPAIGN, ADDICTION IS NOT A CRIME, AIMED AT DECRIMINALISING DRUG USE, IMPROVING DRUG USERS’ LIVES AND FOSTERING TOLERANCE TOWARDS PEOPLE WHO USE DRUGS**

Nearly 7000 people were reached by [www.nolear.ge](http://www.nolear.ge) and 114 000 people viewed the campaign's videos.

2 social services in TBILISI AND TBILISI-ORIENTED CLIENT MANAGEMENT SERVICES TO 901 PEOPLE WHO USE DRUGS

5517 services were provided, including medical, social, psychological, legal, and other services.

NGO BEMONI OPENED A SOCIAL ENTERPRISE, A CAFE THAT Serves AS A LINK WITH THE SOCIAL BUREAU IN TELAVI. THE SOCIAL BUREAU’S CLIENTS MAY RECEIVE FREE VOCATIONAL TRAINING AT THE LOCAL COLLEGE AND PRACTICE THEIR SKILLS IN THE CAFE.

41 participated in the first ‘ADDICTION IS NOT A CRIME’ SUMMER SCHOOL ON HUMAN RIGHTS

600 took part in campaign activities

51 259 reached with video [facebook.com/nolear.ge](http://facebook.com/nolear.ge)

1 805 605 visitors
Social Enterprise – Café Bemoni Culinar

In December 2015, NGO Bemoni opened a social enterprise, café Bemoni Culinar, in Telavi.

The café serves as a link to the social bureau for people who use drugs in Telavi. Social bureau clients may take free vocational courses at a local college and then may apply their new serving or culinary skills in the café. Thus, they gain practical experience to help with future employment. In 2016, Tanadgoma – Centre for Information and Counselling on Reproductive Health, is expected to offer rehabilitation services in the region. Together with the social bureau and the café, these agencies will provide a continuity of services for people who use psychoactive substances in the region.

Deputy Governor of Kakheti region Givi Metreveli, Telavi Mayor Platon Kalmahelidze, Deputy Mayor Tengiz Kalmahelidze and other city officials, as well as representatives of partner organisations and local businesses with whom NGO Bemoni is building partnerships, participated in the opening ceremony of the café. Thanks to solid promotion, the event attracted the local media.

“Such initiatives are important to our city, and they will receive our support. It is important to note that the café opened in the historical part of Telavi,” Mayor Kalmahelidze said.

All revenue earned by the café will be used to provide services to people who use drugs in Kakheti.
KAZAKHSTAN

HIV situation

<table>
<thead>
<tr>
<th>Year</th>
<th>New HIV Cases Registered</th>
<th>Transmitted through unprotected sex</th>
<th>Transmitted through injecting drug use</th>
</tr>
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<tbody>
<tr>
<td>2013</td>
<td>1974</td>
<td>57.7%</td>
<td>42.3%</td>
</tr>
<tr>
<td>2015</td>
<td>2327</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2014</td>
<td>2208</td>
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</tbody>
</table>

Budget allocation

- Direct Services: 65%
- Advocacy: 5%
- Capacity building: 30%

Projects in 2015

1. HIV/AIDS Project
   - 2015: $1,440,000
   - 2016: $1,660,000
   - Duration: January-December 2015

2. Capacity of Women Living with HIV
   - 2015: $7,840
   - 2016: $10,020
   - Duration: November 2016 - December 2015

3. Improving Knowledge Level of Young Offenders on HIV/AIDS and Healthy Lifestyle in Kazakhstan
   - 2015: $2,310
   - 2016: $2,433
   - Duration: June - December 2015

4. Get Informed, Get Tested, Get Connected
   - 2015: $17,041
   - 2016: $17,041
   - Duration: January-December 2016

5. Strengthening Engagement of Non-Public Sector in Mobile Quality HIV Care 
   - 2015: $97,310
   - 2016: $107,310
   - Duration: July 2015 - April 2016

898 people received voluntary counselling and testing (VCT) during HIV testing week.

7 prisons, 5 rehabilitation centres

2066 prisoners living with HIV and prisoners who use drugs.

6 colonies.

70 mini-training sessions.

4 female activists on basic information related to HIV and healthy lifestyles.

From networks of women living with HIV in Kazakhstan and Tajikistan travelled to St. Petersburg on a study tour.

300 newly released prisoners completed the start plus transitional client management programme.

25 women representing Kazakh and Tajik networks of women living with HIV participated in a five-day winter school aimed at capacity building. During the school, women learned about advocacy and fundraising in action and protecting and promoting the rights and interests of women.
Natalya Rudokvas: From client to NGO director

More than eight years ago, Natalya learned that she was HIV-positive. She became terribly depressed, and remained so for about three years. Now, she regrets that she wasted that time. One day, she participated in a self-help group meeting of people living with HIV.

‘Sitting in a small room over a cup of tea, amongst smiling girls, my new life started when I accepted my HIV status, and planned new endeavours and thought about the fulfilments awaiting me. Meeting after meeting, I started to enjoy my life more and more.’

A few months later, Natalya was offered the opportunity to work as an outreach worker. She realised that this work would first of all support her, but also provide her with the spirit and strength to support others to overcome their fears and problems.

She continued taking part in self-help group meetings, but now as a moderator. She knew all 50 people by name, knew all their strengths and weaknesses. Together, they would picnic outside the town and celebrate public holidays.

When she wrote her first project proposal and won a grant, Natalya thought she lacked the skills to complete the work. Thanks to AFEW's capacity building and empowerment opportunities, Natalya participated in a series of training sessions on:

- leadership and advocacy,
- public speaking,
- motivational counselling,
- antiretroviral treatment adherence and
- client management programmes with a focus on OST.

‘This knowledge and the skills I gained helped me visualise my life priorities and goals, and prepared me to speak before large audiences with confidence about the health and rights of people living with HIV.’

She then became a project coordinator and, at the end of 2015, was appointed director of the NGO Answer in Ust-Kamenogorsk (a city in East Kazakhstan).

‘There were times when we had no projects and no money, some of our staff members left us, and only the strongest and most committed people remained. When I see that my work yields results, when it changes the lives of people living with HIV and former prisoners, it brings me great satisfaction.’

NGO Answer is a sub-grantee of AFEW-Kazakhstan under the USAID HIV React Project aimed at providing technical assistance, training, transitional client management and prevention services to reduce HIV transmission among prisoners and post-release inmates in Kazakhstan, Kyrgyzstan and Tajikistan.

The project strengthens the quality of medical services and their links with AIDS centres, as well legal and social support services for prisoners and former prisoners. HIV React's ultimate goal is to enhance country ownership to provide coordinated and continuous services for prisoners.
**HIV situation**

- **2013**: 876
- **2015**: 1082
- **2014**: 1008

- 61.9% transmitted through unprotected sex
- 22.5% transmitted through injecting drug use

**Budget allocation**

- Direct Services: 62%
- Integration of services: 11%
- Advocacy: 11%
- Capacity building: 7%
- Online services and access to information: 7%

**Projects in 2015**

- **TAJIKISTAN**

  - **Bridging the Gaps: Health and rights for key populations**
    - 2015: $124,104
    - 2016: $120,104
    - Duration: September 2015-December 2016
    - Source: Dutch Ministry of Foreign Affairs

  - **Get Informed, Get Tested**
    - 2015: $47,022
    - 2016: $48,422
    - Duration: August 2015-September 2016
    - Source: United Nations

  - **Strengthening Supportive Environments and Scaling Up Prevention, Treatment and Care to Control the HIV Epidemic in the Republic of Tajikistan**
    - 2015: $158,160
    - 2016: $168,704
    - Duration: February 2015-January 2016
    - Source: The Global Fund to Fight AIDS, Tuberculosis and Malaria

- **<1000 Police Officers** throughout the country participated in training on HIV prevention, the rule of law and client management.

- **<8300 Individuals** from the general population including some prisoners received information on HIV prevention.

- **3 Educational Modules** for trainers on the client management programme.

- **8 Different types of brochures** on infectious diseases and various services available were developed and disseminated.

- **74 Meetings** on the reduction of stigma and discrimination at 67 locations.

- **3529 Individuals** underwent HIV testing.

- **2000 and #160** reached through client management services.

  - All 2000 PUD received legal support, whilst 46 received OST and 23 received treatment in the Drugs Clinic.
Young and ambitious: Tajikistan's Network of HIV+ Women connects hearts

Despite being only three years old, Tajikistan’s Network of HIV+ Women staff boast extensive experience in HIV prevention among the general population and the promotion of the rights of women living with HIV. Thanks to cooperation with local religious leaders, imams in mosques spoke about sexual and productive health and rights against domestic violence.

Today, Tajikistan’s Network of HIV+ Women unites hundreds of women, all of whom share similar stories: 5 to 10 years of secondary education, early marriages and spouses who used drugs and transmitted HIV to them. As a result, their families have broken apart and women found themselves alone with small children and HIV.

Manfat is 18 years old. When she was 16, her mother forced her into a marriage with a labour migrant who worked in Russia. The man knew that he was HIV-positive; in order to conceal it from his wife, he stopped taking his antiretroviral treatment. During her pregnancy, Manfat discovered her own HIV status, and her infant died when only eight months old. Manfat then divorced her husband and returned to Tajikistan.

‘According to studies carried out in Tajikistan, 80% of women in such situation confessed to contemplating or attempting suicide,’ Takhmina Khaidarova, the Network’s director.

Takhmina did not leave Manfat to fend for herself. In Tajikistan, no special centres exist for women in crisis. Takhmina, therefore, invited Manfat to live with her. Takhmina’s similar personal experiences allowed Manfat to believe in herself. Today, Manfat is a successful college student and one of the Network’s activists. In future, she hopes to learn English and promote gender equality.

Tajikistan’s Network of HIV+ Women was established thanks to training received from AFEW. Within several AFEW projects carried out since 2015, the Network has actively cooperated with other Tajik NGOs as well as a similar network in Kazakhstan, and actively shares their experiences with NGOs focused on women living with HIV in Russia. To date, four couples living with HIV have formed through Tajikistan’s Network of HIV+ Women and subsequently built their families.

Sharifbek and Muhammad represent the brightest of these couples. Both now work as peer consultants in the AIDS centre. A couple built out of love at first sight, Muhammad accepted Sharifbek’s two children as if they were of his own.

According to Muhammad, ‘Society is full of myths about people living with HIV and people who use drugs. During my meetings with people, at first they do not believe that I am also HIV-positive, that I am a former drug user and a prisoner. They think people living with HIV must look sickly and gloomy. By our own example, we show them that that is not true!’

In the nearest future, the network plans to create a shelter for HIV-positive women, monitor the enforcement of legal provisions against domestic violence and lobby for changes to the law so that court hearings are held in closed sessions should women with living HIV ask for such privacy.

Methadone saved us!

Sharifbek Safarov (left) is 54 years old. He is Master of Sport on the national wrestling team, a six-time Tajik champion and a Candidate for Master of Sport in judo. For many years, he worked as a wrestling coach. The difficult economic situation, as well as the instability resulting from the civil war in Tajikistan between 1992 and 1997 and the flow of drugs from neighbouring Afghanistan contributed to many young people, including Sharifbek, picking up heroin use.

‘For a pair of rubber galoshes, dealers doled out a half kilo of opium,’ he recalls.

In June 2014, Sharifbek met an outreach worker from AFEW’s branch office in the Khalk in the region. After Sharifbek underwent an HIV test and screening for TB, he was offered enrolment in an OST programme.

Thanks to OST and support from social workers, Sharifbek returned to his favourite job. Today, his wrestling programme includes around 70 teenagers, for which he receives a salary from the state. In addition, his methadone dosage is gradually decreasing. With a diploma from a sports college, despite his age, Sharifbek also hopes to complete further higher education training and receive a diploma from the Sports Pedagogical Institute.

Together with his friend, Bobokhuja Badridinov (right)—who is also a client of the OST programme—they often visit AFEW’s branch office to take part in the group sessions with active drug users. In doing so, they explain the advantages of OST and the resulting positive changes to their own lives.

‘Methadone has literally saved us. We can work and feed our families. There is no need to look for drugs. It means there are fewer health risks and chances that we will get into trouble with the law,’ they say.

AFEW’s branch office in the Khalk region is focused on client management amongst key populations, the prevention of infectious diseases in prisons, supporting people living with HIV to access HIV treatment and adhere to it and increasing awareness amongst law enforcement officials on HIV-related issues. Thanks to AFEW’s efforts in 2015, Tajikistan’s Ministry of Health and Social Protection allowed local public organisations to conduct voluntary HIV counselling and rapid testing on their own premises.
List of Abbreviations and Acronyms

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<thead>
<tr>
<th>Abbreviation</th>
<th>Description</th>
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<tbody>
<tr>
<td>AFEW</td>
<td>AIDS Foundation East-West</td>
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<tr>
<td>AIDS 2018</td>
<td>22nd International AIDS Conference</td>
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<tr>
<td>EECA</td>
<td>Eastern Europe and Central Asia</td>
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<tr>
<td>HCV</td>
<td>Hepatitis C virus</td>
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<tr>
<td>KNCV</td>
<td>KNCV Tuberculosis Foundation</td>
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<tr>
<td>MSM</td>
<td>Men who have sex with men</td>
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<tr>
<td>NGO</td>
<td>Non-governmental organisation</td>
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<tr>
<td>OST</td>
<td>Opioid substitution therapy</td>
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<td>PLHIV</td>
<td>People living with HIV</td>
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<tr>
<td>PUD</td>
<td>People who use drugs</td>
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<tr>
<td>SRHR</td>
<td>Sexual and Reproductive Health and Rights</td>
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<td>STIs</td>
<td>Sexually transmitted infections</td>
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<td>TB</td>
<td>Tuberculosis</td>
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<tr>
<td>UNODC</td>
<td>United Nations Office on Drugs and Crime</td>
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<tr>
<td>VCT</td>
<td>Voluntary counselling and testing</td>
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<tr>
<td>WHO</td>
<td>World Health Organisation</td>
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Want to learn more? Contact us!

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