# Building a healthy future together





AFEW Network Annual Report 2016



#### Contact

AFEW International Van Diemenstraat 48 1013 NH Amsterdam The Netherlands Tel: +31 20 638 1718 Website: <u>www.afew.org</u> Facebook: AFEWInternational Twitter: @AFEW\_Int

#### **List of Abbreviations**

AIDS2018	2018 International AIDS Conference
CBPR	Community-based participatory research
ССМ	Country Coordinating Mechanism
DGIS	Directorate-General for International Cooperation
EECA	Eastern Europe and Central Asia
ENPUD	Eastern European Network of People Who Use Drugs
GIZ	Deutsche Gesellschaft Für Internationale Zusammenarbeit (GIZ) GMBH
INPUD	International Network of People Who Use Drugs
NGO	Non-governmental organisation
NSWP	Global Network of Sex Work Projects
SWAN	Sex Workers Rights Advocacy Network
ТВ	Tuberculosis
UNGASS	United Nations General Assembly Special Session
USAID	United States Agency for International Development

Where we work:	Credits			
Netherlands	Production:	AFEW International		
Kazakhstan Kyrgyzstan	Produced by:	Olesya Kravchuk, Olga Kulyk, Zarina Davlyatova, Dina Masalimova		
Tajikistan Ukraine	English-language editor:	Vanessa Fuller		
Georgia	Graphic design: Cover photo:	Petro Andriyishin Adriaan Backer		

# Foreword

AFEW International begins 2017 with a new name, new logo, new office and a new strategic plan. We are the same organisation we have always been, but we hope these new facets of our organisation will make our goals clearer to the public and reinforce our own objectives in the responses to HIV, tuberculosis (TB), viral hepatitis and sexual and reproductive health and rights in Eastern Europe and Central Asia (EECA).

e are now *AFEW International*. Most already knew us as *AFEW*. With this new name, we hope to make it clear that we work on much more than HIV alone. Thus, our acronym will no longer serve as a stand-in for *AIDS Foundation East-West*.

Along with our new name we introduce a new logo. If you look carefully, you will find bits and pieces of our old image. We are proud of our past and *AFEW*'s important work carried out for more than 15 years now. With investments exceeding €75 million for more than 100 projects, *AFEW* has gained a reputation for excellence and leadership in public health in EECA.

With our new logo and image, *AFEW International* now also occupies new offices in a more modern, brighter environment to house our new and expanding team. With six staff members and four network members, *AFEW International* features a renewed capacity to develop programmes and ideas to best meet the needs of key and at-risk populations. Describing our new planned activities, the strategic plan for 2017–2019, '<u>Reaching Out to Key Populations</u>', will guide our work in the coming years. In this strategic plan, we set bold targets for ourselves to bring health services to those who need them free of stigma and discrimination.

More than ever, key at-risk populations need increased access to health services, something that was highlighted last year in the new WHO global health sector strategies on HIV and on viral hepatitis. Eastern Europe and Central Asia is the only region in the world where new infections of HIV are still on the rise, and where multi-drug resistant TB and viral hepatitis cases, also as co-infection with HIV are so highly prevalent. We hope to not only reinvigorate our offices, but also the interests of politicians, policy-makers and international donors who are so crucial to battling epidemics in our region.

Looking ahead to the 2018 International AIDS Conference (AIDS2018) that will be held in our hometown of Amsterdam, *AFEW International* will engage representatives at all levels to ensure that the relevant issues, successes and challenges from EECA are addressed. With AIDS2018 and through all of our projects detailed in this report, *AFEW International* continues to contribute to a healthy future for the people of EECA.



Executive director Anke van Dam.



Chair of the Board Jeffrey V Lazarus.

# **AFEW International**

# **The Netherlands**

AFEW International, based in the Netherlands, is uniquely positioned as one of the few HIV, TB, hepatitis and sexual and reproductive health and rights organisations working in EECA. Our work remains crucial in this region, since HIV and sexually transmitted infections continue to rise, sexuality education remains deficient and gender-based violence goes largely unrecognised. In addition, cases of multi-drug resistant and extensively drug-resistant TB are increasing, while hepatitis C prevalence has become alarmingly high. People who use drugs represent the group at highest risk for HIV and various related infections and diseases. However, transmission through sexual contact is increasing and women and men who have sex with men are increasingly affected as well. To improve the situation, evidence shows that working with civil society organisations and community involvement are essential components of programming. Thus, we aim to support and strengthen non-governmental organisations (NGOs) everywhere, including in challenging national situations, a phenomenon we see in an increasing number of countries. Furthermore, we include the communities we serve in all our activities.

*FEW International* connects the *AFEW Network* of organisations within EECA to international networks and organisations, institutes, agencies and donors beyond the region. *AFEW International* and its partners

in the AFEW Network apply a sustainable approach to increase access to health services for key populations at risk for HIV, TB and viral hepatitis. AFEW International promotes the AFEW Network as an international network of organisations in both the West and the East. The



Andrey Rylkov Foundation, based in Moscow, Russian Federation. The situation in Russia proves worrisome because of high HIV incidence rates, resistance amongst authorities to accept harm reduction strategies and due to the challenges civil society

faces surrounding the Foreign Agent Law. *AFEW International* believes that our work cannot be successfully completed without civil society involvement. As such, *AFEW International* attended the EECA regional conference in Moscow and visited the Andrey Rylkov Foundation in 2016, where we observed inspiring

and dedicated work continuing regardless of the difficult environment. Subsequently, we intensified our solidarity with Russian NGOs by providing advocacy training and technical support, with a plan to expand our activities in 2017.

and learn through capacity building. In 2016, *AFEW International* formed a partnership with the

AFEW Network leads and coordinates a regional approach where

members and other partners in EECA can exchange experiences

#### AFEW International is a member of the following agencies:

- AIDS Action Europe. *AFEW International's* executive director Anke van Dam is serving a second term as the chair of the AIDS Action Europe Steering Committee
- Civil Society Forum on Drugs
- Core group member of Share-Net International
- HIV/AIDS Civil Society Forum

#### **Projects managed by AFEW International**

#### **Community Action on Harm Reduction 2**

**Donor:** International HIV/AIDS Alliance with funding from the Dutch Ministry of Foreign Affairs

Project duration: January–December 2016 Total budget: €60,870

# Strengthening the engagement of the non-public sector to provide quality patient-centred TB/HIV services

**Donor:** KNCV Tuberculosis Foundation with funding from the Directorate-General for International Cooperation (DGIS), Dutch Ministry of Foreign Affairs

Total budget: €862,525 Project duration: 2014–2019

#### EECA at AIDS 2018

Donor: Dutch Ministry of Foreign Affairs Total budget: €1,384,500 Project duration: March 2016–October 2018

# Bridging the Gaps: The Health and Rights of Key Populations 2

**Donor:** Dutch Ministry of Foreign Affairs **Total budget:** €6,769,295 **Project duration:** January 2016–December 2020

#### Involvement of Communities in EECA for a Healthy Future

The meaningful involvement of the communities with whom we work represents a focal point of *AFEW International* and the *AFEW Network*. Contributing to a healthy future in the EECA region stands as one of *AFEW International's* primary objectives. In 2016, we involved communities at all levels of our work. For example, during the summer, *AFEW International* hosted a two-day meeting with the International Network of People Who Use Drugs (INPUD) and Eurasian Network of People Who Use Drugs (ENPUD) to discuss work in general and specifically within the Bridging the Gaps project framework. In addition, members of the drug using communities serve on *AFEW International's* board.

Within all Theory of Change meetings organised for Bridging the Gaps alliance partners, community members from each key population attended and actively engaged with project organisations. In addition, during the summer, the *AFEW* project manager visited the Global Network of Sex Work Projects (NSWP) in Edinburgh, leading to constructive discussions on how to move forward in project activities. In November, *AFEW International*, NSWP, and Sex Workers Rights Advocacy Network (SWAN) gathered in Budapest to further discuss their collaboration. As such, the three partners began work on developing a joint project proposal related to funding and strengthening community voices. communities in planning, monitoring and evaluating service delivery and other activities. For instance, the *AFEW Tajikistan* service branch in Khatlon initiated self-help groups for women who use drugs, women living with HIV and migrant women. In addition to the support these groups provide to individual members, they also help to identify service needs through the regular monitoring of the quality of services.

In Ukraine, youth leaders undergo training towards involvement in service delivery amongst sub-grantees and to act as volunteers or peers within various services. In Georgia, instructors for a 12step rehabilitation programme represent trained community members who now support others with similar needs. In Kyrgyzstan, community groups receive support and training to carry out joint advocacy campaigns and learn to deliver presentations. The executive director of *AFEW Kazakhstan* represents the community of people living with HIV. Thus, we have a solid connection to Kazakh community members. Most of *AFEW International's* partners are community-based NGOs. During 2016, *AFEW International* supported six community-based NGOs through sub-grants and by offering a series of capacity building trainings. In addition, community members completed a study tour to Tajikistan and Kyrgyzstan in April 2016 to learn how to work in prison settings.

All AFEW Network members actively involve key population

# AIDS2018: Representatives of Communities Learn How to Implement Research in Bishkek

24 community members from EECA took part in a training workshop held in Bishkek, Kyrgyzstan organised by AFEW International in November 2016.



In 2016, *AFEW International* initiated the AIDS2018 project, which allows for the more meaningful participation and expanded engagement of representatives of EECA countries at AIDS2018. This conference will take place in Amsterdam in July 2018, while *AFEW*'s project will extend through October 2018.

AIDS2018 represents an ideal opportunity to highlight the needs of the EECA region amongst the international community. *AFEW International* is proud to have been chosen by the Dutch Ministry of Foreign Affairs as the organisation best suited to engage the EECA region in AIDS2018. One objective of this project is to enhance community-based research across the region. As such, *AFEW International* will support community-based participatory research (CBPR) by training representatives from the region and recipients of small research grants to transform their data and findings into abstracts for AIDS2018. Furthermore, *AFEW* will guide regional representatives to use these abstracts as the basis for

an advocacy agenda in the years to come. CBPR serves as one form of meaningful involvement implemented by *AFEW International*.

In total, 24 community members from EECA took part in a CBPR training workshop held in Bishkek, Kyrgyzstan organised by *AFEW International* in November 2016. The workshop included participants from 11 countries in the region: Armenia, Azerbaijan, Belarus, Georgia, Kazakhstan, Kyrgyzstan, Moldova, Russia, Tajikistan, Ukraine and Uzbekistan. *AFEW International* received more than 170 applications to attend this workshop. In December 2016 following the training workshop, a call for proposals for small research grants was announced. All training participants also received access to online e-learning modules designed to support their own research projects, a tool developed in partnership with Health[e]Foundation. This e-course is available for a fee for anyone interested in CBPR.

# The Community Action Harm Reduction Project: Municipal Representatives from Indonesia Visit Amsterdam

In November 2016, *AFEW International* organised a study visit for governmental and non-governmental representatives from the Indonesian municipalities of Bandung and Surabaya to Amsterdam. The study visit was inspired by the 'city leadership' from various fast track cities under the UNAIDS '90-90-90 cascade' initiative. In the Netherlands, participants observed Dutch integrated services for people who use drugs and learned



This study visit for the representatives from Indonesian municipalities highlighted positive experiences resulting from city authorities' involvement in public health issues.

about collaboration between municipal authorities and local NGOs. In addition, they met with the Ambassador on Sexual and Reproductive Health & Rights Lambert Grijns. This study visit aimed to highlight positive experiences resulting from city authorities' involvement in public health issues.

As a result of the visit, representatives from the municipalities of Bandung and Surabaya developed plans to introduce activities in their own cities which they found useful during their visit. Furthermore, Bandung participants prepared a proposal to the mayor describing plans to improve the relationship between the cities of Bandung and Amsterdam, making them sister cities.

The Community Action Harm Reduction project in Indonesia aims to facilitate collaboration between authorities and public agencies at the municipal level in their work with non-governmental and community-based organisations. This collaboration is intended to expand access to health services for people who use drugs. The decentralised system in Indonesia justified the decision to implement this project on the city level since local government carries the authority and autonomy vis-à-vis programme design and financial support stemming from their HIV and harm reduction budget. Cities were selected focusing on those municipalities with the highest HIV prevalence among people who inject drugs. As such, the project underscores the importance of developing partnerships between local governments and affected communities. By doing so, the quality of services improves and they become friendlier and couched in human rights. Furthermore, relationships are maintained with national stakeholders and other institutions such as United Nations agencies.

# AFEW Start-up Meeting for Bridging the Gaps: the Health and Rights of Key Populations. A Regional Approach

The regional component of *AFEW International's* work within the people who use drugs project 'Bridging the Gaps' facilitates the exchange of information and strengthens the capacity of organisations within the *AFEW Network* and its partners in EECA. Specifically, this project focuses on key populations (in particular, people who use drugs), public health and human rights-related issues. The project aims to create links between regional and local experts and international experts. Using a regional approach allows us to initiate an international dialogue on upholding human rights for key populations, introduce innovative approaches and lobby for activities currently lacking within the fields of focus.

In 2016, *AFEW International* organised a start-up meeting for its members. Through discussions, lectures and study visits, participants identified three areas that will form the regional approach to project activities: migration and mobility amongst key populations; rehabilitation services and human rights; and civil society work within a shrinking space. Each area of work will follow the same sequence of steps in the coming years. As such, participants identified their next steps as developing a working hypothesis through an initial assessment and then mapping the regional situation. Gaps will be identified and activities will be designed to meet the needs identified during the assessment. A go/no-go decision related to specific plans will be made at this phase.

When deciding to follow-up on a specific theme, *AFEW* will form a partnership and establish a network throughout EECA for joint work. Strategies will be described, discussed and exchanged across the region. We will introduce an annual *AFEW International* Regional Autumn School to facilitate exchanges between organisations, present progress and strengthen collaboration within the *AFEW Network* and between its partners.

Finally, small-scale innovative pilot projects will be implemented, whereby results and developments will be periodically exchanged. In 2017, *AFEW* will begin its assessments and exchange. Capacity building activities will lead to small-scale innovations beginning in 2018 and continue in the years that follow.

# Advocate for Eastern Europe and Central Asia, Harm Reduction and Key Populations Affected by HIV, TB and Other Public Health Concerns

AFEW International is a leading advocate for raising political and general awareness of the public health issues affecting EECA. To do so, AFEW International takes part in various European groups and networks to lobby for a new European policy framework on HIV, TB and viral hepatitis given the expiry in December 2016 of the European Communication and Action Plan on HIV and AIDS. For this purpose, AFEW International's executive director Anke van Dam met with the Commissioner of Health and Food Safety Vytenis Andriukaitis in November 2016. In addition, for three years now Anke has served as chair of the Steering Committee of AIDS Action Europe, a European network of HIV organisations. In this position, she advocates for supporting and meeting the capacity strengthening needs of civil society in EECA.

AFEW International also participated in discussions with the Dutch Ministry of Foreign Affairs, the Ministry of Justice and

the Ministry of Health to discuss harm reduction and drug policies at the national and international (multilateral or United Nations) levels in preparation for the United Nations General Assembly Special Session (UNGASS) on drugs held in April 2016. As a member of the Health in Prisons Project of the World Health Organisation Regional Office for Europe, *AFEW* (*AFEW Ukraine* representing the *AFEW Network*) advocates for improving the health and well-being of prisoners.

Finally, through the AIDS2018 project, *AFEW* will engage the EECA region to participate in the International AIDS Conference in Amsterdam in 2018. This project allows *AFEW* to shine a spotlight on the successes and challenges in the responses to HIV, TB and viral hepatitis in the EECA region specifically. As initial steps in this project, *AFEW International* carried out activities to strengthen the research capacity of community-based organisations in the summer of 2016.



#### <u>AFEW Kazakhstan</u>

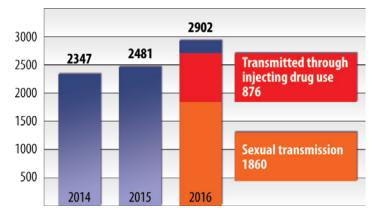
# **Budget by categories**

Total €927,161



Integration of services €73,547
<b>Advocacy</b> €160,635
Capacity building €119,448
Online services and access to information €6,601
Direct services €566,930

#### HIV situation. New cases





#### **Projects:**

#### **HIV React Project**

**Donor:** United States Agency for International Development (USAID)

Budget in 2016\*: US\$1,018,895

#### Project duration: 2014–2019

The HIV React project is coordinated by *AFEW Kazakhstan* and implemented in Kazakhstan, Kyrgyzstan and Tajikistan.

**Project objectives:** This project aims to reduce the spread of HIV in prisons, and strengthen HIV prevention, treatment and care services towards achieving the UNAIDS 90-90-90 targets.

**Activities:** Activities carried out under this project include counselling and training for people who inject drugs in prisons on HIV prevention and harm reduction and provide motivation for HIV testing. In addition, *AFEW Kazakhstan* provides counselling and training for people living with HIV in prisons on the early

initiation of antiretroviral therapy, adherence to treatment, disclosure of one's HIV status, prevention of gender violence and preventing the further spread of HIV, TB and sexually transmitted infections and viral hepatitis. In addition, we provide training on TB screening, organising and holding self-help groups and client management services for soon-to-be-released inmates (the START Plus programme). AFEW also conducts training for medical and non-medical prison staff on cutting-edge approaches to HIV prevention and treatment, as well as counselling and patient retention. In keeping with its overall mission, AFEW Kazakhstan works with prison staff and providers of medical and social services to reduce HIV-related stigma and discrimination. Furthermore, AFEW Kazakhstan produces methodological guidance materials for specialists from governmental institutions and NGOs, and develops information materials for people who inject drugs and people living with HIV.

# Strengthening Engagement amongst the Non-Public Sector to Provide Quality Patient-Centred TB and HIV Services

**Donor:** The Dutch Ministry of Foreign Affairs (DGIS) with KNCV as the lead agency

#### Budget in 2016\*: US\$196,266

#### Project duration: 2014–2019

**Project objectives:** This project aims to create a network of partner organisations that provide medical and social services in the fields of HIV and TB prevention and treatment. In addition, this project seeks to improve coordination between governmental institutions, private clinics and community-based NGOs in managing HIV and TB patients.

**Activities:** Thus far, activities falling under this project consisted of partner work-planning meetings and roundtable seminars aimed at improving coordination between governmental institutions, private clinics and NGOs on managing patients with HIV and TB. In addition, *AFEW Kazakhstan* works towards building

the capacity of medical and social service providers primarily by conducting training on cutting-edge approaches to HIV and TB prevention and treatment, and on reducing stigma and discrimination directed at HIV and TB patients. Simultaneously, *AFEW Kazakhstan* has developed guidance materials for specialists, and is developing a website with information about HIV- and TB-related providers of medical and social services and agencies providing TB screening. *AFEW Kazakhstan* is also working towards strengthening counselling services for HIV and TB patients on treatment adherence, improving the quality of life and protecting human rights. Finally, *AFEW Kazakhstan* continues its work on client management and on the provision of selfhelp groups, and has distributed information materials for key populations and for HIV and TB patients.

\*The total project budget in Kazakhstan could not be provided.

#### HIV React Project: a Bridge between Prison and Civilian Health Care

Before the HIV React Project began, a huge problem existed in the penal system vis-à-vis the provision of medical services to prisoners in Almaty and the Almaty oblast. With its action plan aimed at improving access amongst incarcerated individuals to health care services, the HIV React project officially initiated activities in 2014 receiving an extension into 2016.

t first, the project identified gaps in the provision of medical services to prisoners. In Kazakhstan, medical professionals historically shied away from work in the penal system due to low salaries, the remoteness of most correctional institutions, the lack of housing for young medical specialists, the lack of transportation to and from institutions and low motivation amongst staff. The provision of primary care in prisons was further complicated by prisoners' inconsistent access to hospitals. Thus, arranging for full and quality medical services proved difficult.

To address these issue, the project established a close link between the prison medical service and the state public health

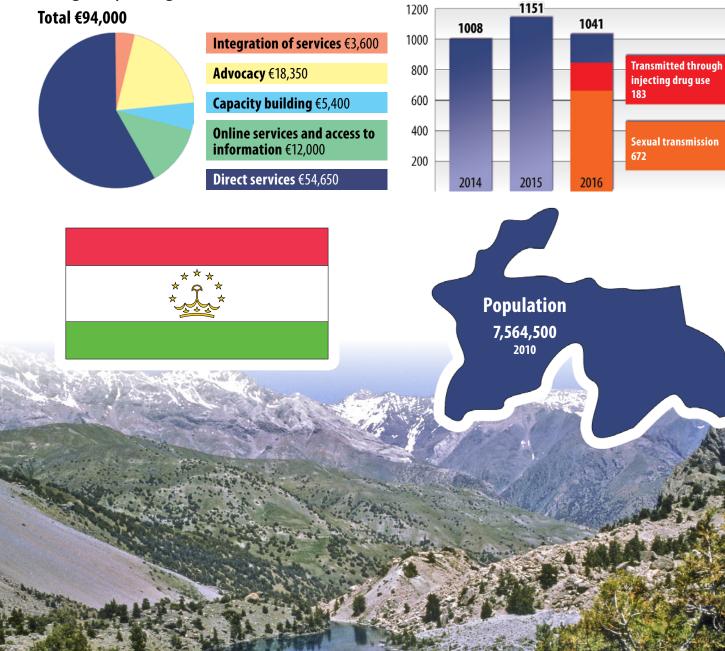
care system. *AFEW Kazakhstan* organised preventive medical examinations for inmates living with HIV carried out by medical specialists from the local communities. Quarterly working group meetings with representatives from various penal system departments, AIDS centres, service providers, NGOs and prison administrations helped to establish a dialogue and create collaborative links across and between all stakeholders. In 2016, three correctional institutions in Almaty — LA155/4, 8 and 14 sent inmates to municipal clinics in the cities of Kapchagay and Taldykorgan and to the IIi district hospital. This allowed inmates to receive the comprehensive package of services they needed most.

Working group meetings with representatives from various penal system departments, AIDS centres, service providers, NGOs and prison administrations helped to establish collaboration between stakeholders.



# <u>AFEW Tajikistan</u>

# Budget by categories



# **HIV situation. New cases**

#### **Projects:**

#### **USAID Regional TB Programme in Central Asia**

Donor: USAID

Budget for 2016\*: US\$98,490

Project duration: 1 September 2014-31 August 2019

**Project objectives:** This project seeks to reduce the burden of TB and prevent multi-drug resistant TB in Central Asia through the provision of access to more effective and accessible diagnostic and treatment tools for the general population, including key populations. In addition, activities seek to increase access to comprehensive TB testing and treatment services for key populations, and provide timely, high-quality laboratory testing for TB, including multi-drug resistant TB. Furthermore, activities work

towards expanding patient-oriented approaches to TB treatment, including multi-drug resistant TB, and promoting responses that meet international standards. As such, *AFEW Tajikistan* works to enhance organisational and human resource capacities within the health care system on TB management, including multi-drug resistant TB. Activities also seek to improve the coordination and collaboration of the national TB programme with other health care sectors and NGOs. Finally, *AFEW Tajikistan* seeks to encourage TB service providers to use database management systems and to collect quality TB statistics to take relevant, informed decisions at all levels.

\*The total project budget cannot be provided.

#### HIV React Project: Prevention among Prisoners in Kazakhstan, Kyrgyzstan and Tajikistan

Donor: USAID

Total budget: US\$526,781

Project duration: 11 June 2014–10 May 2016

**Project objectives:** This project aims to reduce HIV-related risks amongst inmates by expanding inmate access to voluntary counselling and testing and treatment for HIV and as well as drug dependence. Ultimately, this project aims to increase the number of inmates, including female inmates, people living with HIV and people who inject drugs accessing a comprehensive package of HIV prevention, care and support services in Central Asia. *AFEW Tajikistan* thus works to improve the accessibility, quality and uptake of client management services among inmates before and after

Bridging the Gaps: The Health and Rights of Key Populations 2

Donor: The Dutch Ministry of Foreign Affairs

Budget for 2016\*: €250,000

Project duration: 2016–2020

**Project objectives:** This project aims to expand access to quality HIV prevention, treatment, care and support for people who use drugs with a specific focus on women who inject drugs and the female sexual partners

release from incarceration. As such, the project aims to build the capacity amongst AIDS centres and narcological centres to provide essential services related to HIV and medication-assisted treatment of substance use for inmates and former inmates. Finally, this projects seeks to contribute to the development of national responses to provide a continuum of coordinated care and services to inmates.

**Activities:** Through project work, *AFEW Tajikistan* seeks to strengthen adherence to antiretroviral treatment amongst people living with HIV in prisons and upon and after release. Furthermore, activities focus on building the capacity of prison staff to provide services related to HIV prevention, antiretroviral treatment and opioid substitution therapy for inmates.

of people who inject drugs. Furthermore, the project aims to improve the quality of HIV prevention services for people who inject drugs and to advocate for harm reduction. In addition, the project seeks to introduce prevention approaches and methods into the general health care system, and build the capacity of civil society organisations working with key populations.

# Strengthening Supportive Environments and Scaling-Up Prevention, Treatment and Care to Contain the HIV Epidemic in the Republic of Tajikistan

Donor: The Global Fund to Fight AIDS, Tuberculosis and Malaria Total budget: US\$181,961

Project duration: 1 November 2015–31 December 2016

**Project objectives:** This project seeks to encourage comprehensive access to HIV prevention, treatment, care and support to improve the quality of people's lives.

**Activities:** Project activities aim to expand the coverage of services and to recruit and retain people living with HIV on antiretroviral treatment. *AFEW Tajikistan* works towards strengthening the system of referrals and the integration of HIV and TB services by increasing adherence to treatment, providing voluntary counselling and testing to patients with TB and providing timely TB testing amongst people living with HIV.

#### Never give up, believe in life!

Sangimo lost her parents early. After the death of her parents, she moved to Dushanbe to live with her aunt. Since her aunt was from a poor family, she married Sangimo off very early. At that time, Sangimo had just turned 17 years old. She lived with her husband one year, and they had a daughter. A year after giving birth, Sangimo went to the hospital because she needed surgery. Before the surgery, Sangimo underwent medical tests, including HIV testing.

he head of the clinic called me to her office, and the doctors began to ask questions: How many men had I had sex with, if I drank alcohol, if I used drugs, etc. The doctors sent me to the AIDS centre so that my daughter and I could be tested for HIV,' Sangimo recalled.

The AIDS centre confirmed her and her daughter's diagnoses as HIV positive. During her pregnancy, HIV was not detected since the test fell within the undetectable 'window' period.

'I registered at the municipal AIDS centre in my city. God knows what kinds of things I have heard from doctors for having infected my



baby... My husband only told me, "Do not worry...', Sangimo says with tears in her eyes.

After consulting the AIDS centre, Sangimo remained in denial of her diagnosis. She felt pain, anger, a lack of understanding and asked herself why this had happened to her. A strong sense of guilt towards her child lingered. Sangimo fell into a deep depression, wanting to die. One phrase she heard helped change her attitude: 'If you do not need your child, then who will need her?' Then, Sangimo realised that suicide was not the way to solve her problems.

Sangimo accepted her diagnosis and felt some relief. She told her aunt everything. Her aunt worried a lot, but did not abandon Sangimo or her daughter. On the contrary, her aunt supported them. Sangimo was also referred to the Republican AIDS Centre.

'Many thanks to Tatiana Madzhitova, a paediatrician at the Republican AIDS Centre. She convinced me that my daughter and I will live a long time—we must simply continue to take our medication. She also directed me to the organisation "Guli Surkh", where I was welcomed and learned all about antiretroviral therapy. I learned a lot about HIV, its treatment and living with HIV, and I started my therapy. Now, my daughter and I take antiretroviral therapy, and we participate each month in self-help groups and are monitored by our physician at the AIDS centre,' she explained.

AFEW Tajikistan trained social and outreach workers from the NGO 'Guli Surkh' to work with people living with HIV and explained how they may support individuals who want to commit suicide. Staff from AFEW Tajikistan provided Sangimo with the necessary psychological support and helped her to believe in herself again.

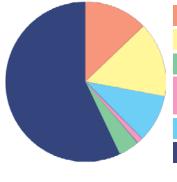
By overcoming difficulties and problems and starting a new life, Sangimo did not lose faith in people and achieving a better life. Recently, she remarried and gave birth to a healthy daughter. Her husband loves her eldest daughter as if she was his own and accepts her as she is. Sangimo's eldest daughter is an excellent schoolgirl who dances, draws, actively participates in all school activities and helps her mother to look after her younger sister.

*Staff from AFEW Tajikistan provided Sangimo with the necessary psychological support and helped her to believe in herself again.* 

# AFEW Ukraine

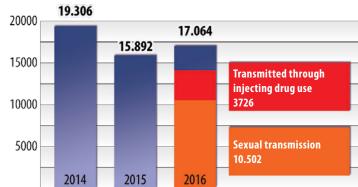
# Budget by categories

Total €351,647



Integration of services €45,114
<b>Advocacy</b> €52,899
Capacity building €33,738
Online services and access to information €12,000
<b>Research</b> €14,224
Direct services €201,362

#### **HIV situation.** New cases





**Population 45,426,249** 1 January 2013

#### **Projects:**

# Expanding an immediate intervention model to ensure adherence to HIV and hepatitis C treatment and improve the quality of life for HIV-positive women in Kyiv

Donor: Gilead Sciences Europe Ltd

**Total budget:** €49,980

Duration: June 2016–May 2017

**Project objectives:** This project aims to empower HIV-positive women in Kyiv, to improve the quality of their life and adherence to treatment, and to overcome the social exclusion experienced by HIV-positive women.

**Activities:** Project activities include establishing a telephone hotline for HIV-positive women and providing online counselling and support for HIV-positive women via a secret Facebook group, 'Kyianka+'. In

addition, *AFEW Ukraine* holds monthly meetings of an HIV-positive women's self-help group and monthly meetings of an HIV-positive women's self-help group on hepatitis C treatment. Joint events are also held monthly for HIV-positive women that include master classes, training seminars and leisure activities, as well as training seminars for women peer leaders as well as medical and social workers (on the most crucial issues.) Furthermore, project activities include professional training and assistance on finding employment, individual and group counselling from a psychologist and social support and referrals to other services (if needed or upon request).

#### Bridging the Gaps: The Health and Rights of Key Populations 2

**Donor:** Dutch Ministry of Foreign Affairs **Total budget:** €1,250,000

**Duration:** 2016–2020

**Project objectives:** This project aims to strengthen civil society enabling them to hold governments to account as well to increasingly uphold the human rights of key populations. In addition, this project seeks to improve sexual and reproductive health and rights and reduce the spread of HIV.

Activities: Activities under this project centre around young people who use drugs situated in four cities: Kropyvnytskyi, Kharkiv, Poltava and Chernivtsi. The specific activities are focused on piloting new methods of work with young people who use drugs and disseminating successful experiences among other services providers. In addition, the primary advocacy goal focuses on improving access to services for young drug users in Ukraine within the second phase of the project. *AFEW Ukraine* seeks to reach this goal through the development of standards, drug strategies and action plans in cooperation with local stakeholders. As such, we involve young clients actively to volunteer, carry out peer activities, monitor the quality of services and to improve the project design. This project specifically focuses on monitoring, documenting and responding to any human rights violations experienced by young drug users.

As a partner in the Dutch–UNAIDS Tripartite collaborative initiative, *AFEW Ukraine* facilitates the development of the National Key Populations Platform. This allows the people who use drugs, sex worker, men who have sex with men and the lesbian, gay, bisexual and transgender communities to identify joint advocacy goals and develop a unified voice to address key barriers to accessing quality services.

#### Building Effective Partnerships to Improve Work with People Who Use Drugs in the City of Kropyvnytskyi

The Kirovohrad Regional Charitable Foundation 'Return to Life', an *AFEW Ukraine* partner within the Bridging the Gaps project, has been working with key populations in Ukraine for 18 years. Throughout this time, 'Return to Life' has stood as a pioneer, introducing new methods of work with people who use drugs. Their participation in the project allows for an expansion of the partnership network and strengthens cooperation with service providers, law enforcement agencies and the local administration in the city of Kropyvnytskyi.

et, police reform in Ukraine provided new opportunities for organisations that work with people who use drugs, while also posing some challenges. In the summer of 2016, new patrol police began working in Kropyvnytskyi. Shortly thereafter, a 'Return to Life' needle exchange programme client was stopped and searched on his way to the exchange point. This signalled that new police officers remained unaware of harm reduction services, necessitating additional work and education related to HIV and prevention services for key populations. To do so, 'Return to Life' approached the Office of the Kropyvnytskyi Patrol Police and launched a training programme for new police officers. Since then, 240 policemen received training on topics related to HIV, principles of harm reduction and human rights-based approaches to working with people who use drugs. The police officers were very much impressed by their meetings with drug users as clients of the harm reduction programme, where they learned more about needle exchange, its benefits and effectiveness, as well as the needs of programme participants. Subsequently, access to services for drug users became easier and safer.

Establishing a partnership with local police formed a part of the municipal programme on drug policy, with 'Return to Life' assuming the role of active partner. Recently, 'Return to Life' recommended to local administration installing safety boxes for used syringes in places where people who inject drugs gather. Director of 'Return to Life' Oleksandr Ostapov stated that annually about 1 million syringes are used to inject drugs in Kropyvnytskyi. All syringes not brought to needle exchange points run by 'Return to Life' are thrown away, at best, in rubbish bins. The mayor's office supported the recommendation, and 'Return to Life', using funds from several sources including the Bridging the Gaps project, purchased 16 sharps disposal boxes for used syringes. In addition, municipal authorities agreed to cover the costs associated with maintaining and cleaning the boxes. Given that 'Return to Life's' projects reach about 40% of the city's inhabitants who inject drugs, Oleksandr believes they will succeed. If so, this initiative will serve as an example and lead to

replication in other cities.

This initiative serves as important evidence that civil society can change traditional attitudes amongst officials and the police towards people who use drugs and harm reduction approaches.

Establishing a partnership with local police formed a part of the municipal programme on drug policy, with 'Return to Life' assuming the role of active partner.



# <u>Georgia</u> HIV situation. New cases



#### Bridging the Gaps: The Health and Rights of Key Populations 2

**Donor:** Dutch Ministry of Foreign Affairs **Total budget:** €750,000 **Duration:** 2016–2020

**Project objectives:** This project aims to strengthen civil society enabling them to hold governments to account as well to increasingly uphold the human rights of key populations. In addition, this projects seeks to improve sexual and reproductive health and rights and reduce the spread of HIV.

**Activities:** AFEW International's activities in Georgia focus on providing case management services for people who use drugs at

social bureaus located in Tbilisi and Telavi and in the rehabilitation centre in Gremi in the Kakheti region. In order to ensure that a complex model of services are offered, a social enterprise (cafe Bemoni) was established in 2015 and continues operating in Telavi today. In 2016, both partners became members of the National Drug Policy Platform, which has three advocacy goals: improving access to services for key populations, addressing stigma and discrimination and decriminalising drug use. Furthermore, activities focus on advocating for the rights of key populations, as well as involving and mobilising the community of people who use drugs, the primary priorities for the second phase of this project.

#### First In-Patient Rehabilitation Centre Opens in Georgia

Vazha Kasrelishvili, Project Coordinator of 'Tanadgoma', a centre providing reproductive health information and counselling, came up with the idea of establishing a rehabilitation centre for people who use drugs in 2002. At the time, no rehabilitation centres existed in Georgia. Her wish to create a rehabilitation centre in the country took shape following a trip to Poland where she became familiar with the work of a local Polish rehabilitation centre.

er plan evolved and gained speed in 2015 through support from *AFEW Ukraine* as a component of the 'Bridging the Gaps' project. After calculating the costs, searching for a suitable place in the Kakheti region and repairing the first floor of a house in April of 2016, centre 'Tanadgoma' began working and accepted its first clients. Centre instructors also received training from a similar rehabilitation centre in Ukraine.

Currently, 'Tanadgoma' accommodates up to three people at a time. Renovations of all three floors of the building are scheduled for completion in the summer of 2017. Thereafter, at least 12 women and men may go through the rehabilitation process. Since its launch, the centre has provided services to 11 individuals, 7 of whom have completed the rehabilitation programme.

Clients live at the centre for two to three months. When necessary, their stay may be extended for up to six months. 'Tanadgoma' bases its work on a 12-step rehabilitation programme for substance dependence. In addition, art therapy and methods of cognitive-behavioural therapy supplement the 12-step programme. Clients are actively involved in the everyday activities at the centre — they complete all cleaning and maintenance work necessary at the facility. Centre staff consists of two instructors, a psychologist and a cook. In addition, Ukrainian colleagues continue to support their Georgian peers. In autumn 2016, the Director of the Ukrainian rehabilitation centre 'Return to Life' Hennadii Razumov visited his Georgian

colleagues for a week to provide on-the-job training and supervision. 'Tanadgoma' stands as the only drug rehabilitation centre in Georgia, where drug users receive free rehabilitation services through an inpatient setting.

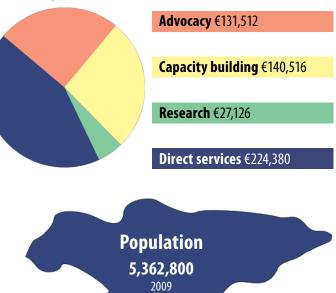


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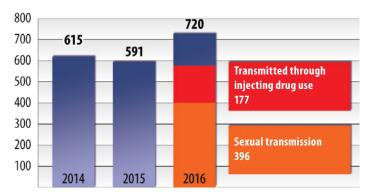
# AFEW Kyrgyzstan

# **Budget by categories**





#### **HIV situation. New cases**







#### **Projects:**

# Mutual Efforts amongst Internal Affairs Bodies and Civil Society in Kyrgyzstan in the Response to the HIV Epidemic

**Donor:** Soros Foundation – Kyrgyzstan

Total budget: US\$131,100

Project duration: 1 April 2016–31 March 2018

**Project objectives:** This project aims to maintain an enabling environment for harm reduction programmes, and to conduct advocacy for unhampered harm reduction services by lifting barriers within law enforcement agencies. Furthermore, this project seeks to raise awareness among police staff and increase their sensitivity when working with key populations. In addition, this project aims to improve legal literacy within the community and to engage community members to advocate for police reform. Finally, this project focuses on motivating Internal Affairs Academy

#### **BackUp Health**

**Donor:** Deutsche Gesellschaft Für Internationale Zusammenarbeit (GIZ) GMBH

Total budget: 4,383,270 Kyrgyz soms

Project duration: 1 July 2016–30 June 2017

**Project objectives:** This project aims to improve coordination mechanisms to optimise the responses to HIV and TB within the health care system. Furthermore, this project aims to strengthen civil society engagement in the work of the Country Coordinating Mechanism (CCM) as a sub-structure of the Public Health Coordination Council, whilst also improving the capacity of CCM. In addition, this project seeks to develop

#### **HIV React Project**

Donor: USAID

Project duration: 11 June 2016–10 June 2017

Total budget: US\$100,000

**Project objectives:** This project aims to reduce the spread of HIV in prisons and to strengthen HIV prevention, treatment and care services towards achieving the UNAIDS 90-90-90 targets.

**Activities:** This project's activities included establishing a working group to foster collaboration between the state's Department of Penal Services, the Regional Narcological Centre and the Regional AIDS Centre. In addition, *AFEW Kyrgyzstan* organised mini-sessions on providing services for the clients of needle and syringe exchange points and on opioid substitution treatment programmes within select pilot institutions. Informational

#### Bridging the Gaps: The Health and Rights of Key Populations 2

**Donor:** The Dutch Ministry of Foreign Affairs

**Total budget:** €1,250,000

Project duration: July 2016–November 2020

**Project objectives:** This project aims to achieve universal access to HIV prevention, treatment, care and support services.

Activities: Activities falling under this project focused on building

cadets to study harm reduction.

**Activities:** Project activities focused first on organising personnel and partner meetings with decision makers from the Directorate General of Public Security and the Departments of Internal Affairs in Bishkek and other Kyrgyz cities in order to promote the project and the mission of *AFEW Kyrgyzstan*. In addition, *AFEW Kyrgyzstan* monitored the implementation of training activities aimed at respecting the rights of people who use drugs and referring them to health and harm reduction services. Finally, a group of police officers received training to support law enforcement in several cities in the implementation of the 'Interagency Instruction'.

the terms of reference for consultants, establish a working group on public health reform with experts from civil society and hold regular working group meetings.

**Activities:** *AFEW Kyrgyzstan's* activities under this project consisted of conducting primary research to evaluate the capacity of CCM and organising and holding training seminars on capacity-building. In addition, field trips to the regions allowed for the provision of technical support to CCM team members and facilitated the measurement and evaluation of services provided in the regions visited.

mini-sessions and individual consultations for 'new' people who inject drugs were also organised, along with the provision of information on supporting people living with HIV to prepare for, initiate and adhere to treatment. *AFEW Kyrgyzstan* also worked towards supporting people living with HIV to raise awareness amongst their sexual partners. Alongside HIVrelated activities, *AFEW Kyrgyzstan* provided support for clinical practices related to TB screening, along with the need for pre- and post-release client management services for people living with HIV. *AFEW Kyrgyzstan* also organised mini-sessions for the non-medical staff from correctional institutions, and organised self-help groups in a female correctional facility on issues related to gender violence. Finally, *AFEW Kyrgyzstan* carried out campaigns to reduce stigma and discrimination directed at people living with HIV and at people who inject drugs.

the capacity of the community of people who inject drugs. In addition, activities focused on the provision of access to discrimination-free and gender- and age-based services. *AFEW Kyrgyzstan* is also working on establishing centres for women who use drugs in Bishkek and Osh as well as on rehabilitation services specifically for women. Finally, *AFEW Kyrgyzstan* is introducing comprehensive approaches to working with young people who use psychoactive substances.

#### Effective TB and HIV Control in the Kyrgyz Republic

Donor: The Global Fund to Fight AIDS, Tuberculosis and Malaria

Total budget: US\$30,884

Project duration: August 2016–May 2017

**Project objectives:** This project aims to reduce the patient drop-out rate during treatment follow-up from 16% to 10% in 2016–2017. In addition, the project seeks to create peer support self-help groups to facilitate re-entry into treatment. Furthermore, this project aims to raise awareness

of multi-drug resistant TB amongst patients and their family members to prevent the further spread of TB and improve adherence to treatment. Finally, this project aims to conduct information sessions for multi-drug resistant TB patients formally refusing to receive treatment, as well as information sessions for their family members.

**Activities:** Project activities focus on the delivery of daily medications to multi-drug resistant TB patients in Bishkek receiving in-home treatment due to their severe health condition and difficult family circumstances.

#### Together we can overcome it

Vasily (pseudonym), at 29 years old, spent the last 5 years of his life in prison facility #8. 'When I entered prison, I was stressed out. Other prisoners offered me heroin to make me feel better. I injected for two years, but managed to give it up,' Vasily recalls. He experienced no serious health problems and never went to a doctor.

n January 2015, the HIV React Project began its work in prisons with financial support from USAID. During mini-sessions, prisoners received information about HIV, including its transmission routes. Trainers explained to prisoners that sharing injecting equipment carries risks including the transmission of HIV. This information lead Vasily to think about his past.

'I was shocked. Several years ago I used drugs and I had no idea that I was risking my health. I needed help. The project social worker looked quite friendly and I decided to tell her about my injecting experience,' he said. The social worker referred him for HIV testing.

He tested positive for HIV. 'The doctor kept saying something—explaining that people can live with HIV—but I was not able to listen and understand at that time. I kept thinking about my wife and my 5-year-old son. He was born right before I was sent to prison. Did they get infected from me? What will I tell my wife? I was overwhelmed with guilt and was afraid I'd lose my family,' Vasiliy remembered rather emotionally.

Vasily withdrew into himself and did not want to discuss his problem with anyone including the physician. He did not consult the social worker for further counselling, but the social worker somehow found her client and talked to him about his health.

'She spoke warmly and compassionately. I truly lacked such experiences in prison. I felt I could trust her. We started talking more frequently, and she was the first person to whom I disclosed my status. The social worker, Olga, gave me much information about living with HIV and antiretroviral treatment.'

From that moment on, the social worker together with the physicians began to help Vasily accept his diagnosis. His blood work was good and he did not yet need treatment. The most important aspect of psychosocial support for Vasily revolved around disclosing his HIV status to his family members. He asked Olga to stay with him to talk to his wife during that difficult conversation.

'My wife was very supportive. The social worker referred her and my child for HIV testing. Thank God their tests were negative. The energy to live returned again,' he said.

Half a year later, the social worker suggested that Vasily become a peer volunteer within the project. He learnt more about HIV and harm reduction, and acquired the skills necessary to share this information with other prisoners. The volunteer peer leadership movement helps reach prisoners afraid to disclose information about their drug use histories to prison officials and, therefore, to prisoners who do not have access to HIV prevention programmes and testing.



The social worker referred Vasiliy for HIV testing. He tested positive.

#### **Financial Results for 2016**

#### Fundraising

In 2016, AFEW International maintained relationships with major international governmental and non-governmental donors and signed new contracts totalling  $\in 8,4$  million. All new contracts were granted for long- (more than one year) and short-term (one year or less) projects. The total amount of contract subsidies signed to date is around  $\notin 82$  million.

#### **Income and Expenditure**

The total income available for core objectives in *AFEW*'s 15th operational year was €1,539,028. The decline was foreseen with the start of two new projects Bridging the Gaps 2 and AIDS2018 later than expected. The regional approach that *AFEW International* leads under 'Bridging the Gaps 2' did not begin implementation until 2017.

Expenditures in 2016 were lower than income, totalling €1,530,774.

#### Forecasts for 2017

For 2017, the income portion of the budget at the moment of preparation of the financial statements is expected to total €2.2 million. Income in 2017 is mainly based on the project Bridging the Gaps 2: Health and Rights of Key Populations, funded by the Dutch Ministry of Foreign Affairs, which will start with the first phase of another five years, on AIDS2018, the TB project and the Cities project.

# Budget for the financial year 2017

AFEW International's objectives, described in the strategic plan, are translated into three programme objectives. In 2010, AFEW International decided on a new classification for its core programme objectives to better reflect what the organisation does.

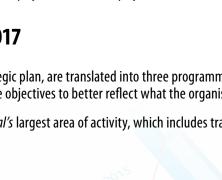
 Capacity Strengthening (by far, AFEW International's largest area of activity, which includes training, sub-grants, technical support and client management).

20%

• Advocacy.

80%

•



Advocacy

€375,542

**Capacity Strengthening** €1,502,170

# **Balance Sheet**

#### (As of 31 December 2016, after appropriation of the year-end surplus)

	201	6, €	2015, €		
Tangible fixed assets	2,576		0		
		2,576		0	
Inventory					
For immediate and full use in the context of the objective		0		0	
Accounts receivable and deferred assets					
Donors	6,164,227		76,817		
Other	130,116		41,365		
		6,294,343		118,183	
Cash and cash equivalents		1,211,463		147,924	
TOTAL ASSETS		7,508,382		266,107	
Reserves and Funds:					
Reserves					
Continuity reserve	130,294		41,713		
Restructuring reserve			80,327		
Restructuring reserve Central Asia	0		0		
		130,294		122,040	
Funds					
Special purpose funds		20,276		20,282	
Long-term debts					
Subsidy commitments	2,207,454				
Short-term debts					
Subsidy commitments	5,069,407		71,015		
Other liabilities	80,951		52,770		
		7,357,812		123,785	
TOTAL LIABILITIES		7,508,382		266,107	

# Statement of Income and Expenditure for 2016

	Actual 2016, €		Budget 2016, €		Actual 2015, €	
INCOME						
Income from own fundraising:						
- Grants from international Foundations / NGOs	63,353				21,908	
- Grants from Businesses	0				118,451	
- Other: Donations / Collections	4,359		0		3,695	
		67,712		0		144,054
Income from joint activities		172,667		196,000		35,713
Income from third parties' activities		0		0		(
Subsidies from governments		1,295,093		1,842,000		2,370,336
Other income/ loss		3,556		0		30,882
TOTAL INCOME		1,539,028	ľ	2,038,000		2,580,985
EXPENDITURES						
Spent on objectives:						
Capacity Strengthening	1,069,676		900,065		1,153,437	
Mass Media Campaign	0				0	
Advocacy	267,419		900,065		1,160,912	
Other (research, provision of product sets, milk formula, condoms and other materials)	0		-		23,438	
		1,337,095		1,800,130		2,337,787
Costs of raising income:						
Cost of own fundraising	10,200		18,459		9,159	
Cost of Joint activities	0				0	
Cost of third party activities						
Costs of obtaining governmental grants	35,720		48,603		36,969	
		45,920		67,062		46,128
Management and administration:						
Costs management and administration	147,759		134,808		164,133	
		147,759		134,808		164,133
TOTAL EXPENDITURES		1,530,774		2,002,000		2,548,048
Balance of income and expenditure		8,254		36,000		32,936
Allocation of year-end result:						
Continuity reserve		8,254		36,000		32,936
Continuation reserve Russia 2012						
Restructuring reserve, additions		-				
Restructuring reserve, expenditures						
Restructuring reserve Central Asia						
Special purpose funds, additions						
Special purpose funds, expenditures						
Total allocation of Year-end result		8,254		36,000		32,930

AFEW International closed the financial year-end 2016 with a positive balance. Based on the Board's decision, the amount of  $\in 8,254$  from 2016 has been added to AFEW International's reserves.