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## ASSESSMENT REPORT

For the „German-Ukrainian Partnership Initiative for the fight against HIV/AIDS“

In the Donetsk Oblast, Ukraine

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## List of Acronyms

ART – Antiretroviral Therapy

CSW – Commercial Sex Worker

HIV/AIDS – Human Immunodeficiency Virus/ Acquired Immunodeficiency Syndrome

IDU – Intravenous Drug User

GFTAM – Global Fund to fight Tuberculosis, AIDS and Malaria

MSM – Men who have sex with men

MTCT – Mother to Child Transmission

NGO – Non-Governmental Organisation

PCR- Polymerase Chain Reaction

PLWH, PLWHA – Person living with HIV/AIDS

PMTCT – Prevention of Mother to Child Transmission

STI – Sexually Transmitted Disease

TACIS - Technical Aid to the Commonwealth of Independent States (EU)

TB – Tuberculosis

UCAN – Ukraine Citizen Action Network

UNAIDS – Joint United Nations Programme on HIV/AIDS

USAID – United States Agency for international Development

VCT – Voluntary Counselling and Testing

WHO – World Health Organisation

## 1 INTRODUCTION

The *Deutsche Gesellschaft für Technische Zusammenarbeit* (GTZ) implements on behalf of the *German Health Ministry* the „German-Ukrainian Partnership Initiative for the fight against HIV/AIDS“. The aim of the partnership is to support, enlarge and network German projects in the Ukraine in order to improve the access and quality of offered services of prevention, testing, therapy and care of HIV/AIDS in the Ukraine and neighbouring regions. In the frame of the partnership, the national and regional administrations should be included in the implementations of the projects. Regional focuses of the initiative are the Oblasts *Vinnitsa*, *Khmelnyzki*, *Chernovtsi* and *Ternopil* in Western Ukraine as well as the Oblast *Donetsk* in the Eastern part of the country.

The following report is the result of a regional assessment of the existing offers in the field of prevention and therapy of HIV/AIDS, particularly stressing on offers of medical and home based care of AIDS patients in the Oblast Donetsk.

This assessment is based on a qualitative review comprising analysis of existing background information provided by the GTZ followed by a field visit to Ukraine. During the ten-day country visit from May 7th to May 16th, 2008, individual interviews with relevant stakeholders in Kiev and Donetsk were conducted on the background of specifically developed guidelines. The interviewer team was formed by Samanta Sokolowski (SPI Forschung) and Maxim Tscherkaschyn (GTZ), who was in charge of taking the minutes. Jenny Bluhm (GTZ) joined the assessment team for most of the interviews made in the city of Donetsk. The interviews were made in Russian, the minutes were taken in Russian as well.

The purpose of these interviews was to gather the broadest possible insights into the functioning of the organisations the interviewed persons represented. Interviewees were selected so as to receive feedback from the entire spectrum of organizations working in the field of HIV/AIDS, ranging from specialized governmental agencies, associations of PLWHA to local NGOs. Special attention was paid to the insights of those stakeholders who are part of the German-Ukrainian Initiative in the Region Donetsk. The list of the projects and interviewees was put together by the GTZ Kiev office with the help of Valentina Pavlenko, the Donetsk Regional Representative of the International Alliance for HIV/AIDS in Ukraine.

### List of the Visited Organisations:

NGO “Coalition of HIV/AIDS Service Organisations”

NGO “International HIV/AIDS Alliance in Ukraine”

UNAIDS

NGO “All-Ukrainian Network of PLWH”

Ukrainian Centre of Prevention and Fight against AIDS

Donetsk Regional Coordinator of the International HIV/AIDS Alliance in Ukraine

Donetsk AIDS Centre

NGO “Donetsk Society of assistance for the AIDS infected”

NGO „Svitanok“

Bochum House

NGO „Donbass without narcotics“

Caritas Donetsk

Orphanage “Makeevka” and NGO “Donbass against AIDS among children”

NGO “Amikus”

Gorlovka AIDS Centre

NGO “Lifeline”

NGO “Tvoi Vibor”

“Student’s Health Dialogue Donetsk”

Meeting with the Deputy Director of the Oblast Health Care administration, Lidia Blakitina

Meeting with the Deputy Director of the Oblast Education administration, Svetlana Gordichuk

## **2 RESULTS AND RECOMMENDATIONS**

### **2.1 Perspectives and recommendations**

There are many perspectives and possibilities for improvement of the situation in consideration and with the help of the German-Ukrainian Partnership. The first issues to have in mind is that there are many interested and engaged persons that are eager to help to change the situation on the region of Donetsk and that the urgency of the situation has been understood not only by the NGOs that work at the grass root level, but also by the State and Oblast health authorities.

The main field of cooperation should be the field of capacity building. There is a need of capacity building and experience exchange at all levels.

- Capacity building and experience exchange at the medical level. As an example, the Donetsk AIDS Centre cherishes deeply the cooperation with the Augusta Viktoria Hospital in Berlin. The medical exchange has been an invaluable experience for the Centre for the improvement of the diagnostic and treatment at the AIDS Centre. The plans for the development of a telemedicine platform are eagerly awaited, even though in this case, there is yet no infrastructure whatsoever to support these plans. Other medical institutions, such as the Gorlovka AIDS Centre would profit enormously from such exchanges as well.
- The establishment of capacity building and trainings for social workers to reach a higher professionalism and a higher level of quality in the services would be an important asset for the functioning and the development of NGOs. These trainings could be organized in modules and as an on-the-job training. The development of a network of supervisors who could help in the process of professionalizing peers and avoid or help to mitigate burn-outs would be crucial.
- Fund raising and public relations seminars would be an important help for the NGOs to empower them to tackle the issue of sustainability.
- The communication between the NGOs and between the NGOs and the state structures should be supported at all times in order to ensure a working cooperation and to establish a solid working base to ensure the correct and effective use of resources.

## **2.2 Challenges**

- The level of communication and cooperation has to be improved in general.
  - This is needed not only in the case of the state structures and the NGOs but also between the NGOs themselves. These cooperations have to function effectively to avoid parallel structures and to strengthen the effect of measures and projects.
  - It became clear that in the cases where a donor supports several projects in a region, these projects are bound to be communicated with each other and cooperate, but not necessarily know that other donors support similar projects or that the possibility of networking and cooperation would be meaningful. It is important to note that often the reason lies on non-communication and not necessarily on competitiveness.

- It is very important to involve the State (Oblast) structures in the planning and carrying out of measures and projects.
  - The NGOs are financed almost exclusively by international donors, making the dialogue between the organisations and the state structures not always easy. Often the only role of the Oblast administration is providing or representing the static legal frame without the possibility of active involvement.
  
- Paradoxically, there is often a complex interweavement between NGOs and state structures such as AIDS Centres. The difficult working conditions, the small state budget and the rigid legal framework lead to creative solutions.
  - Such is the case, for example, of the AIDS Centre Donetsk, where the state health structure and an NGO not only share the building, but also the Director and part of the staff in order to provide the patients with ART therapy (state structure) and with psychological support and counselling to ensure the compliance to the therapy (NGO task). Based on this lack of exact boundaries and transparency, allegations of corruption are existent.
  
- Diagnostic and treatment for side effects of ART and opportunistic infections should be improved.
  - The treatment of side effects of the ART and especially of opportunistic infections are very difficult due to the lack of available medicine or the price of it.
  - A further difficulty is the lack of resources, human and technical, for the diagnostic of these infections. The establishment of the inpatient clinic within the Donetsk AIDS Centre has been a step forward, but there is still very much to do.
  
- Specialised offers for paediatric treatment should be developed
  - There are no services specialised in HIV paediatric treatment and no in-patient paediatric offers for HIV positive children.

- Competent home-based care remains a need
  - Even though several NGOs mentioned to offer home-based care, the exact extent of the quality and the coverage of the offers could not be established in the frame of this assessment. However, the interviewed persons identified home-based care as an urgent need.
  
- The rigid organisational structure in different areas of health care makes a holistic approach in the integration of the health services very difficult.
  - The system of diagnostic and treatment of STIs is almost incompatible with the HIV/AIDS system; there are further difficulties and incompatibilities with the Tuberculosis system and the Narcological system, for example. There are attempts to overcome these differences through specific cooperation, as it is the case with the cooperation which just began between the AIDS Centre Donetsk and the TBC Dispensary.
  
- One of the biggest challenges is the construction and organisation of a functioning drug-help system.
  - Methadone substitution therapy started this year, but this start had been postponed for several months (it had not yet started at the moment of the interview). Despite the importance of the step of introduction of methadone to Ukraine, the experts agree on the fact that the need is not by far covered by the planned courses of therapy. The counselling and support of IDUs during the therapy is not seen as sufficient by the several NGOs that work with IDUs.
  - There are very few drug rehabilitation centres, and most have a religious background. Only one centre is free of charge, but the waiting list is very long. Several NGOs pinpointed at the poor quality of these services.
  
- The qualification and professionalization of the staff of the NGOs needs improvement.
  - Most social workers have received their qualification in the course of a short training held by the International Alliance. Most of these social workers are HIV infected and affected persons that work with a peer approach. This approach is undoubtedly very important, but it became clear that very often the closeness and empathy to and with the client combined with a lack of fundamental education in social work and practical training lead to very difficult situations for the counsellor/social worker, in which professional distance to the clients is



impossible to establish. These situations lead not only to personal conflicts but very often, a fact that was named by almost every interviewee, to burn-outs of the staff. The social workers or the staff of the NGOs are not professionally supervised.

- A very pending issue for most of the NGOs is the sustainability of their organisations.
  - A high number of projects and grants last only six months up to a year, and these periods of time do not allow any development of stable structures that could ensure sustainability of the offers. Very successful projects or/and measures can only be offered on a short time basis.
  - Due to these circumstances, personal resources are used to ensure the sustainability through fundraising, which is an important but time-consuming activity, reducing the capacities for the current measures or projects.
  
- There are several target groups that are not covered by any measures, such as
  - the relatives and close persons to IDUs including their children,
  - street children and street young adults..
  - In the field of primary prevention, campaigns for the general public and campaigns targeted for young adults are urgently needed, especially campaigns to reduce the stigmatization of PLWHAs.

### **3 HIV/AIDS IN UKRAINE**

Ukraine is experiencing one of the fastest growing HIV epidemics in the world. It is estimated that 1.4% people aged between 15 and 49 are living with HIV. By mid-2007, a total of 113.000 cases of HIV infection had been reported since the beginning of the epidemic in 1987. Official figures understate the actual size of the epidemic because they only reflect infections among people who have been in direct contact with official testing facilities<sup>1</sup>. International experts estimated the actual number of people living with HIV to be around 377,600 in 2005, and the epidemic is still growing<sup>2</sup>. At the moment, the most affected Oblasts are the Oblasts Odessa, Dnipropetrovsk and Donetsk.

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<sup>1</sup> UNAIDS Eastern Europe and Central Asia AIDS epidemic update Regional Summary, 2007

<sup>2</sup> <http://www.aidsalliance.org/sw7239.asp>

### 3.1 HIV Statistics in the Donetsk Oblast

According to the Donetsk AIDS Centre, as of the 01.01.2008 there were officially 38.422 PLWHA living in the Donetsk Oblast. During 2007, 5.164 persons became infected with HIV, 3,3% more than in 2006.

The HIV rate incidence for 2007 was thus 81,25 per 100 thousand persons and is increasing<sup>3</sup> compared to the rate of 2006 (77,70).

According to the Donetsk society of assistance for the AIDS infected, the HIV/AIDS prevalence among the Donetsk Oblast population is 568,96 per 100 thousand. The most affected cities in the Oblast are Mariupol (1124,78 per 100.000), Dobropolye (1008,97), Dimitrovo (832,08), Slaviansk (807,45), Avdeevka (781,77) and Donetsk (732,06).

There are 1.069 registered HIV infections among children younger than 18 years old, which represents a prevalence of 117,24 per 100.000 children. There were 64 new diagnosed cases in 2007, which compared to 2006 (86 cases) means a decrease of new infections. The improvement of coverage of PMTCT measures in the Oblast significantly reduced the rate of transmission from mother to child during pregnancy and delivery.

The following graph shows the dynamic of the HIV infection in the Donetsk Oblast since 1996.

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<sup>3</sup> Donetsk Society of assistance for the AIDS infected, [www.aids.donetsk.ua](http://www.aids.donetsk.ua)

FIG 1: DYNAMIC OF THE HIV INFECTIONS IN THE DONETSK OBLAST, 1996-2008



(Donetsk Society of assistance for the AIDS infected, [www.aids.donetsk.ua](http://www.aids.donetsk.ua))

The reduction of the number of new infections in 1998 in comparison to 1997 is related to the improvement of the National Law on HIV/AIDS through the Government, which introduced voluntary HIV testing among all population groups.

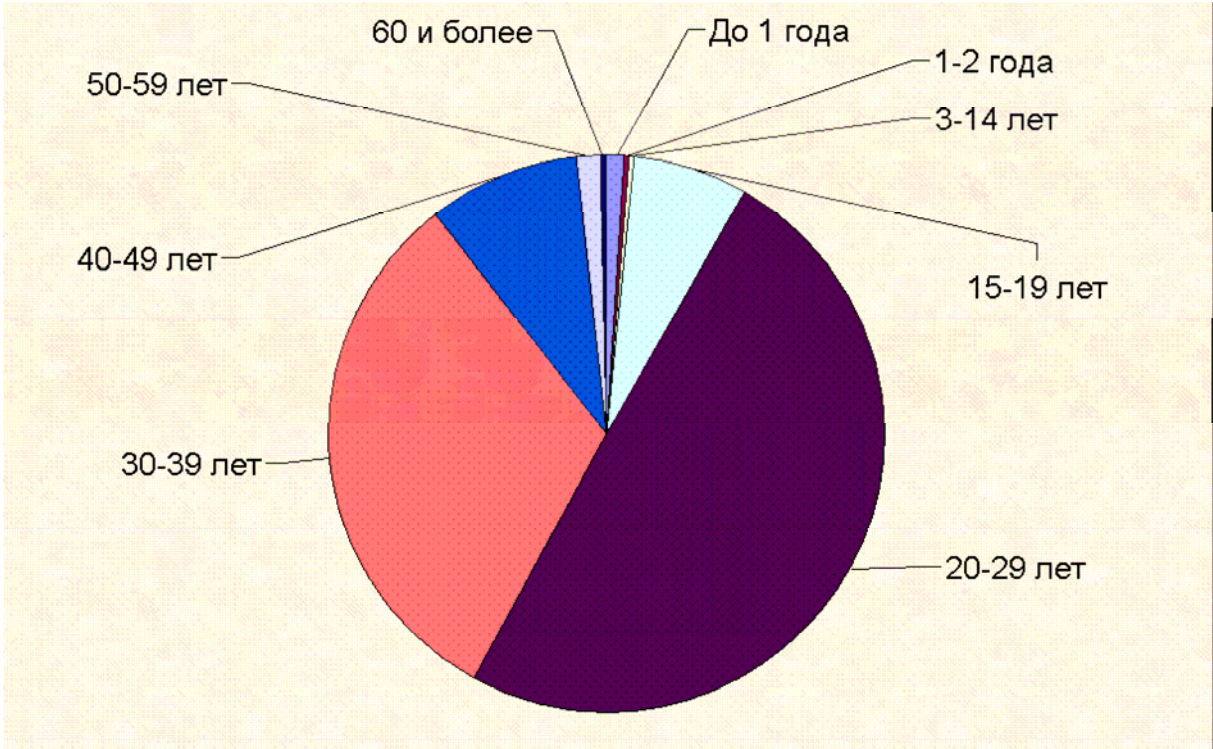
In the period between 1998 and 2002 the number of new infections remained stable, but starting from the year 2003 up to the current date a gradual increase can be noted. This is influenced by many factors, among which are:

- Universal access to voluntary counselling and testing
- The access of regional laboratories to HIV test systems (decentralisation of testing in the Donetsk Oblast)
- Improvement of the health system through the introduction of special HIV/AIDS prevention and therapy units embedded in the structure of the central city and regional hospitals of the whole Donetsk Oblast.
- Broad public information campaigns on the importance of knowing the own serostatus.

Observing dynamic of the spread of the infection in the Donetsk Oblast, it can be observed that young people are hit hardest by HIV - 88% of the total number of PLWHAs are between 15 – 39, which will reduce the share of employable people in society and will deepen Ukraine's demographic crisis. Every year, the HIV/AIDS epidemic affects an increasing

number of women in reproductive age, a fact, which becomes evident through the relation between HIV-positive men and women. This relation was 4:1 in 1997 and is 1,5:1 in 2007. The following graph shows the distribution of PLWHAs in the Donetsk Oblast according to their age:

FIG 2: DISTRIBUTION OF THE PLWHAS IN THE DONETSK OBLAST ACCORDING TO AGE GROUPS



(Donetsk Society of assistance for the AIDS infected, [www.aids.donetsk.ua](http://www.aids.donetsk.ua))

According to the AIDS Centre Donetsk, the HIV epidemic is not concentrated among IDUs any longer, but has passed to the stadium of being a generalised epidemic, a theory that is supported by the increase of the percentage of new infections through (heterosexual) sexual contacts. This percentage was 7,8% in 1996 and became 52% in 2007. 2007 became the first year in which the percentage of infections through IDUs was lower (45,9%) than through sexual contacts.

The following graph shows the dynamics of the infection ways in the Donetsk Oblast since 1996, in which the above-mentioned development can be clearly seen.

FIG 3: DYNAMIC OF THE CHANGE OF HIV INFECTION WAYS IN THE DONETSK OBLAST, 1996-2008



(Donetsk Society of assistance for the AIDS infected, [www.aids.donetsk.ua](http://www.aids.donetsk.ua))

Since the beginning of the epidemic, there have been 5.523 cases of AIDS registered in the Donetsk Oblast, being 129 of them children younger than 18 years old. There have been 3.027 official AIDS deaths, from these, 60 were children younger than 18 years old.

In the year 2007 AIDS was diagnosed in 1.217 cases (26,21 persons per 100.000), including 12 children.

On January 1, 2008 there were 17.764 registered patients with an HIV diagnosis, including 2.450 with an AIDS diagnosis.

AIDS as a cause of death had a rate of 15,96 in 100.000 in 2007, somewhat higher than in 2006 (14,13). This rate is related to the insufficient access to anti retroviral therapy. According to the Donetsk AIDS Centre only 30% of the adults PLWHA have access to ART, instead of the 80% that is recommended by the Health Ministry of the Ukraine.

However, the child mortality could be reduced to one third compared to 2006 due to the 100% access of children to ART and the possibility of polymerase chain reaction (PCR) testing in the Donetsk AIDS Centre for the exclusion of confirmation of an HIV infection of children younger than 18 months.

Analyzing the data of the seroepidemiological monitoring of the Donetsk region, the general prevalence of HIV in 2007 was 2,11%. The highest prevalence is found in the following target groups:

- Persons who had sexual contacts with an HIV positive person – 20,12% (17,36% in 2006)
- Intravenous drug users – 13,03% (16,42% in 2006)
- Prison inmates – 13,06% (13,25% in 2006)
- Persons tested due to clinical symptoms – 6,22% (6,56% in 2006)
- Persons who were voluntarily HIV tested – 8,64%,

Following the WHO guidelines, the HIV epidemic in Donetsk can be defined as concentrated, as the HIV prevalence is consistently over five percent in at least one defined sub-population but below one percent in pregnant women in urban areas (0,58%)<sup>4</sup>.

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<sup>4</sup> [www.who.int/hiv/strategic](http://www.who.int/hiv/strategic)

## 4 VISITED ORGANISATIONS

The following part of the report will comprise a brief description of the visited organisations, focusing on their activities, goals and target groups. The personal statements of the interviewed persons, including personal estimations and opinions, as well as needs and challenges expressed by the interviewees are part of the description of the institutions as well. This is not the case for all the projects, as for the umbrella organisations in Kiev – International HIV/AIDS Alliance and the All-Ukrainian Network of PLWHAII-Ukrainian Network of PLWH – or for projects that are only starting their work in the field of HIV/AIDS, as the Bochum House.

### 4.1 Organisations in Kiev

#### 4.1.1 NGO “Coalition of HIV/AIDS Service Organisations”

**Name and function of the interviewed person:** Natalya Podlesnaya, Director of the Coalition.

**Target groups:** HIV/AIDS Service Organisations.

**Offers:** This organization was founded in 2004 by 30 HIV-service organisations with the aim of establishing an umbrella organisation responsible for advocacy and representation of the interests of the HIV service organisations at the government level. As of today, 77 organisations are part of the Coalition, which represents 90% of the HIV service organisations in the Ukraine.

**Staff:** The staff of the coalition is formed by 14 members.

**Funding:** The coalition is funded by several organisation, according to different projects. Among the donors are the Bill and Melinda Gates Foundation, the Global Fund and USAID.

Every three years the main directions of advocacy are voted among the members of the coalition. The priority directions at this moment (until 2010) are (former) prison inmates, MSM, the development of primary prevention and antidiscrimination laws.

One of the main successes of the Coalition is the re-assignment of the recipient of the Global Fund grant- instead of the Government, the NGO “International HIV/AIDS Alliance in Ukraine” became recipient.

#### 4.1.2 NGO “International HIV/AIDS Alliance in Ukraine”

**Name and function of the interviewed person:** Viktor Isakov, Coordinator for the Donetsk Oblast

**Staff:** The Alliance has a staff of 85 persons, plus nine regional coordinators.

**Cooperations:** The main cooperation partner of the Alliance is the All-Ukrainian Network of PLWHA/All-Ukrainian Network of PLWH, apart from the projects the Alliance supports. The cooperation with State structures has improved in the last years.

**Background:**

The Alliance country office in Ukraine was established in December 2000 with funding from the United States Agency for International Development (USAID), to support the project ‘NGO Support and Resource Development for HIV/AIDS Prevention in Ukraine’. The project’s aim was to increase the capacity of local non-governmental organisations involved in prevention of HIV and AIDS and sexually transmitted infections, and in care and support.

With funding from the Global Fund<sup>5</sup> and USAID the Alliance supports more than 150 NGOs working in the area of HIV prevention and care. This is achieved through onward granting, coupled with support and training in practical and transferable skills in organisational development and HIV programming. The Alliance supports a wide range of prevention and care activities, in particular HIV prevention programming with vulnerable communities including sex workers and injecting drug users, the development of the self-help movement, establishment of community centres, implementation of care and support programmes in penitentiary institutions, non-medical care including home-based care, the organisation of therapeutic communities and the maintenance of the National HIV/AIDS hotline.

In September 2004, the Alliance was awarded the USAID funded project. ‘Scaling up the National Response to HIV/AIDS through Information and Services’ (SUNRISE). In partnership with PATH (Program for Appropriate Technology in Health) and the All-Ukrainian

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<sup>5</sup> On 15 March 2004, the International AIDS Alliance in Ukraine was appointed temporary principal recipient to administer the Global Fund to fight AIDS, TB and Malaria supported HIV/AIDS programme ‘Overcoming HIV/AIDS epidemic in Ukraine’. The programme’s aim is to substantially reinforce the national response, reduce HIV incidence and morbidity rates, and reduce the AIDS mortality rate.

The first phase of the Global Fund supported programme was completed by the end of September 2005, and from October 2005 Ukraine received continued Global Fund funding for the next three years to the amount of over \$67 million. The design of the second phase of Global Fund supported activities in Ukraine was led by representatives of the Ukrainian government and was designed in close collaboration with key stakeholders<sup>5</sup>.

On 2007 the Global Fund to Fight AIDS, Tuberculosis and Malaria Grant Agreements were signed to finance the new Program counteracting HIV/AIDS in Ukraine for 2007-2012 - The NGOs “All-Ukrainian Network of People living with HIV/AIDS” and the “International HIV/AIDS Alliance in Ukraine” became Principal Recipients of the GF Round 6 Grant with the budget ceiling over 151 million USD to implement “Support for HIV and AIDS Prevention, Treatment and Care for Most Vulnerable Populations in Ukraine” Programme for the next 5 years. Ukraine received 1st tranche of 29.6 million USD for the Programme Phase 1: August 2007-July 2009. Depending on the performance results the Global Fund will make decision on further support of the Programme. (<http://www.aidsalliance.org>, [www.un.org.ua](http://www.un.org.ua))



Network of People Living with HIV/AIDS, this five-year project aims to ensure that vital, high quality information and services are accessible to people at high risk of contracting HIV in the most severely affected regions of the country.

The Alliance also works in partnership with the state National AIDS Centre, providing training for health care providers as well as procuring and supplying antiretroviral treatment and substitution therapy. At this moment, ten regions offer methadone substitution therapy. In the whole of Ukraine there are 55 projects of methadone substitution therapy, but only ten were functioning at the moment of the interview.

The projects supported by the Alliance are monitored every three months through reports and monitoring visits.

In the Region Donetsk, the Alliance works with the following organisations:

City of Donetsk:

- Donetsk society of assistance for the AIDS infected
- Foundation “Svitanok” (support of HIV+ IDUs, community centre for PLWHAs, support for PLWHAs- home based care)
- “Pikluvannya” (prevention in prisons)
- “Donbass without narcotics” (substitution therapy)

Makeevka:

- “Amikus” (harm reduction among IDUs, CSWs, community centre for PLWHAs)
- “Health of the nation” (HIV prevention among MSM in Makeevka, Gorlovka and Mariupol)

Gorlovka:

- Several pilot projects for IDUs, projects for home based care.

### 4.1.3 UNAIDS

**Name and function of the interviewed person:** Vinay Saldanha, Adviser on Monitoring and Evaluation.

At present, the priority of UNAIDS is the work with the national structure. UNAIDS is a member of the National Council on the ministerial level. The cooperation with the national structures has improved since 2005. UNAIDS supported the creation of the “National Committee on HIV/AIDS and other Socially Dangerous Diseases Control” as an administrative organ. However, this committee is part of the Ministry of Health and not in the Ministry Cabinet, as originally planned.

UNAIDS is supporting the Ukrainian government in taking back the leader role in the fight against HIV/AIDS, even though the influence of the civil society through the NGOs is very important. The planning of the strategy and the grant applications should be carried out in cooperation between the NGOs and the statal structures.

UNAIDS coordinated the evaluation of the National Strategy against AIDS, unfortunately, the report has not been released. In general, it can be said, that the actions in the field of HIV/AIDS are in the right direction, but the coverage of the offers is low (under 30%) and the quality of the services varies very strongly.

The new National Programme against HIV/AIDS will have the status of a law and will be financed not only by three levels- national, oblast and rayon budget- but will also have non-governmental financing. After the confirmation of the National Programme, the Oblasts will confirm the Oblast programmes.

The methadone substitution therapy remains a significant challenge, as well as the admission of the syndromic approach for the treatment of STIs and TBC.

There are several target groups that are not covered through the primary prevention, such as young adults and students between 15 and 24 years old.

#### 4.1.4 NGO “All-Ukrainian Network of PLWH”

**Name and function of the interviewed persons:** Olga Gvozdetskaya, Programme department director, Vladimir Kurpita, Treatment and PSM department Director.

**Target groups:** The Network seeks to empower people living with HIV/AIDS.

**Offers:** The All-Ukrainian Network of PLWH gives support for projects offering psychological and social support, counseling and legal advice. It lobbies for medical treatment and draws attention to discrimination issues. The involvement of the Network in the introduction and implementation of methadone substitution therapy has been crucial.

The Network has 25 regional sections in Ukraine. These sections help the development of initiative local groups. It is not a prerequisite to be part of the network in order to apply for funding

There are around 400 members of the network, which do not have to be juridical, but can also be physical persons.

**Staff:** In the central office of the Network in Kiev there are 80 staff members, and they are divided in several departments: programme development, purchase and treatment, social communication, advocacy, development of the regions, finance and legal department.

**Funding:** The Network supports at the moment 68 projects throughout the Ukraine with the financial support of several international and national donors, such as the GFATM (through the Alliance), Elton John Fund, USAIDS, TACIS and the Anti-AIDS Elena Franchuk Fund. This NGO was established in the 2000 and has become, together with the International AIDS Alliance in Ukraine the main recipient of the 6<sup>th</sup> round Global Fund Grant.

**Cooperations:** The strongest cooperation is the one with the International Alliance, apart from the cooperations with the projects funded by the Network. As it is the case with the Alliance, the cooperation with the statal structures has improved in the last years.

All the projects that are supported by the network submit reports and receive monitoring visits, at the end of each year the projects are evaluated.

The Network will finance the new courses of ARV therapy from September 2008 on, the therapy courses that started before September should be taken over by the State budget. The substitution therapy with methadone will also be financed through the Network.

Even though the therapy for the treatment of tuberculosis is financed by the state, the network plans to improve the diagnostic of the disease, as well as the improvement of the access of TBC patients to HIV diagnostics and treatment.

#### **4.1.5 Ukranian Centre of Prevention and Fight against AIDS**

**Name and function of the interviewed person:** Liudmila Storozhuk, Vicedirector of the Ukranian Centre of Prevention and fight against AIDS.

**Staff:** There are 42 staff members, 10 of them are medical doctors.

**Cooperations:** The cooperation with NGOs is seen as a very important support in the work, even though the strengthening of the role of the State in the fight against HIV/AIDS is seen as a very important issue.

The Ukranian Centre of Prevention and Fight against AIDS is the organisational and methodical national centre that coordinates the work of all the AIDS Centres of the country. It has existed for 17 years, since 2000 as independent institution.

This Centre used to be the only HIV testing site, but since the regions received the necessary equipment, the workload of the laboratory has been reduced. It still is the central laboratory for the early diagnostic of HIV in infants and the test for therapy resistance.

The Centre also offers testing for opportunistic diseases, but not for STIs.

The Centre has developed a guideline, after which there has to be a “multidisciplinary team” in every regional AIDS Centre, formed by a Doctor specialised in ART, a phtisiatrist<sup>6</sup>, a social worker and a nurse. If the regional Centre does not have a phtisiatrist, then one is invited from the Tuberculosis Clinic. In big cities there are AIDS Centres, such as in Donetsk, Kiev and Frankivsk that function as centres of integral medical care, which would be an ideal situation for all the AIDS Centres.

The Centre is finishing a protocol for the treatment of HIV in combination with TB to set standards in the diagnostic and treatment of HIV/AIDS and TB. This protocol was asked by the Ministry of Health. There are already such protocols for HIV/Hepatitis and ART for IDUs in substitution therapy.

Substitution therapy is offered in general in Narcological Clinics, but three AIDS centres offer it as well – Kiev, Frankovsk and Zaporozhie. In order to have a license for administering substitution therapy, the AIDS Centres have to apply for this license, need to have a narcologist in their staff and need special rooms. These conditions are not easy to meet and sometimes the vicinity of the Narcological Dipenser to the AIDS, as it is the case in Lugansk, makes it unnecessary.

In the regions that are most affected by HIV/AIDS, PLWHAs can receive ART in the local hospital, which have a HIV/AIDS unit, and do not have to travel to the central AIDS Centre, as it is the case of the Oblast Donetsk, Odessa and Lugansk.

The specialisation of doctors in ART takes place in the Lavra Clinic in the frame of a programme of the Ministry of Health and through the AIDS Knowledge HUB<sup>7</sup>. There are also trainings for substitution therapy, but few doctors have gone through this course.

As of May 2008, 8.350 receive ART, according to the Ukranian Centre of Prevention and Fight against AIDS this number represents only 35% of the person in need of therapy (21.000). Until 2010, 100.000 PLWHA will need ART. This quantity will be only manageable through the decentralisation of services, which is already starting now.

There are also IDUs receiving ART, but the treating physician has to be sure of the person’s adherence to the therapy regime.

The purchase of ART is covered by the International AIDS Alliance in Ukraine (Global Fund funds) (70%) and by the government (30%). The therapy of opportunistic infections is funded by the governement and a credit of the World Bank.

The quantity of therapy courses that every region receives is based on official inquiries of the Oblast AIDS Centres. The medicines are given to the Ukranian Centre of Prevention and Fight against AIDS, which centrally distributes them to the regions. The purchase of therapy courses takes place once a year on the state budget and twice a year through the Alliance.

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<sup>6</sup> Specialist for tuberculosis

<sup>7</sup> <http://www.aidsknowledgehub.org/>

The actions of the AIDS Centres, the HIV/AIDS units in the hospitals, Narcological clinics, children's hospitals, Dermatovenerological clinics and gynecological services are monitored through reports and monitoring visits to assure the adherence to the National Programme for the fight against HIV/AIDS.

Based on these reports, recommendations are developed that have an obligatory character for the single institutions.

At the moment, there is no computer system to administer this data, which represents a great difficulty in its analysis and prognosis.

The Centre is lobbying, together with the most important NGOs working in the field, for the syndrom approach for STIs, but so far the resistance of the dermatovenerologists has been very strong.

In general, the Centre sees the diagnostic and treatment of STIs as a great challenge in the fight against HIV/AIDS. Currently, the treatment of STIs can only be carried out in the Dermatovenerological Clinic (Dispensary), in which the therapy, even though officially free of charge, is expensive for the patient and every person is registered- giving no option for anonymity.

The improvement of the access to tuberculosis diagnostics is crucial, being this disease the main cause of death of PLWHAs. According to the Centre, anti retroviral therapy alone will not stop the mortality and the epidemic. Particularly difficult is the diagnostic of extrapulmonary TB.

The brain drain in governmental institutions in NGO direction due to the much better pay is seen as an additional difficulty in the everyday work. To address the problem of brain drain, there are plans to create an NGO within the Centre in order to attract more funds.

According to the Centre there are several vulnerable groups that are not yet target of projects but need specific help, such as former inmates, street children and adolescents, female and child IDUs and children of IDUs.

## **4.2 Organisations in Donetsk**

### **4.2.1 Donetsk Regional Coordinator of the International HIV/AIDS Alliance in Ukraine**

**Name and function of the interviewed person:** Valentina Pavlenko, Donetsk Regional Coordinator of the International HIV/AIDS Alliance, Director of the NGO "Amikus".

The International Alliance supports 13 organisations in the Donetsk Oblast. The main task of

the coordinator is to represent the interests of the Alliance in the Donetsk Oblast and introduce innovative approaches and projects.

The Alliance projects in Donetsk report directly to the Central office in Kiev, the regional coordinator offers supports in technical questions.

Not all the organisations working in the field of HIV/AIDS in Donetsk are part of the Alliance. In total, there are around 50 organisations working in this field in the region.

When an NGO receives a grant from the Alliance, the Regional Coordinator supports and accompanies this NGO.

The main challenge of the projects working in the field of HIV/AIDS remains the assurance of the sustainability.

#### **4.2.2 Donetsk AIDS Centre**

**Name and function of the interviewed person:** Dr. Nikolai Grazhdanov, Director of the Donetsk AIDS Centre, Director of the NGO “Donetsk Society of assistance for the AIDS infected”.

**Staff:** A total of 32 doctors and 47 nurses work in the Centre, including the stationary clinic. Many of the doctors work part time in the Centre, such as the gynecologist and the dermatovenerologist.

**Cooperations:** There are cooperations between the AIDS Centre and other Dispensaries for the diagnostic and treatment of PLWHAs, such as with the Narcological Dispensary, Tuberculosis Dispensary and the Oncological Dispensary. The Donetsk AIDS Centres cooperates with all the organizations on the field of HIV/AIDS in Donetsk.

The Regional Donetsk AIDS Centre was opened in 1990, the actual building was built in 1993. The Regional AIDS Centre is divided into three sections: the Policlinic, the Laboratory and the administration of the AIDS Centre, including the data bank. The AIDS Centre has got a stationary clinic 15 km away from the policlinic, with beds for 60 patients.

The laboratory of the AIDS Centre does not only carry out the HIV testing of the patients of the Clinic but also the verification of the tests that are carried out in the eight laboratories of the Oblast. The laboratory also carries out the tests for the CD4 determination and the virus load for the Donetsk Oblast. The only tests that are sent to Kiev are the analysis of the children born to HIV positive mothers and the therapy resistance tests.

One of the achievements of the AIDS Centre Donetsk is the de-centralisation of the medical care for PLWHAs. In every policlinic of the Oblast there is a unit for HIV positive persons, in which the PLWHAs are under ARV treatment and do not have to travel to the central AIDS

Centre.

At the moment, 1.500 patients receive ARV therapy. The AIDS Centre applied for 1.000 more therapy courses for the year 2008, but received resources only for 250. There is the need for at least 4000 therapy courses at the moment.

The AIDS Centre is very skeptical of the governmental plan of financing all ARV therapy courses from September 2008 on<sup>8</sup>.

TBC remains a great challenge for the AIDS Centre. If a PLWHA has to get treated for TBC, the ARV therapy is interrupted until the person is healthy again. There are not enough phthisiatrists in the region and in general, there are not enough young doctors interested in an HIV/AIDS specialisation.

The state budget of the AIDS centre does not allow the purchase of enough medicine for the treatment of side effects and opportunistic diseases.

Infrastructure is a further need of the AIDS Centre. The prospect of Telemedicine is very attractive for the AIDS Centre, but they do not have any of the infrastructure needed for these plans.

#### **4.2.3 NGO “Donetsk Society of assistance for the AIDS infected”**

**Name and function of the interviewed person:** Olga Kosinova, Vicedirector of the NGO and of the AIDS Centre.

**Target groups:** This NGO was funded in 1996, and it was the first in Donetsk to work with PLWHAs. The NGO offers care and support for PLWHAs, especially those who take ART, including children through “interdisciplinary teams” formed by doctors, nurses and social workers. Harm reduction among CSWs and IDUs is also an important field of action. This NGO is the only NGO that offers harm reduction in the city of Donetsk.

The resource centre “Most”, also part of the NGO, carries out projects of primary prevention, including workshops and trainings for special groups such as police officers and also for volunteers. Another task of “Most” is the advocacy for PLWHAs and offering technical help for other NGOs working in the field of HIV/AIDS.

**Offers:** The care and support of PLWHAs includes offering help in resolving paperwork, organizing transportation for severely ill patients, in some cases home based care and

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<sup>8</sup> The “All Ukrainian Network of PLWHAs” will finance the new cases starting from September 2008, according to the 6 th round Global Fund grant

material help for the PLWHAs. With the help of the Red Cross it is possible to help the patients with some medications.

**Staff:** The staff of the NGO is formed by 40 persons in total, which includes social workers, a psychologist, doctors and a nutritionist. Most of the medical personnel that offer services in the NGO are at the same time part of the staff of the AIDS Centre.

Twelve social workers are in charge of the harm reduction programme of the NGO, which organizes needle-exchange for IDUs and condom distribution.

**Funding:** The NGO is financed by the International Alliance and the All-Ukrainian PLWHA Network. The majority of the clients are IDUs and their relatives (40%), followed by CSWs.

The activities of the NGO are monitored by the Alliance, every three months reports have to be sent to Kiev.

The Donetsk Society of assistance for the AIDS infected is part of the Alliance/USAID funded project 'Scaling up the National Response to HIV/AIDS through Information and Services' (SUNRISE), which aims at improving the information level on HIV/AIDS and health issues of vulnerable groups.

**Cooperations:** The NGO shares a building with the AIDS Centre Donetsk, and the Director of the Centre is at the same time the Director of the NGO.

The NGO cooperates with several organisations that work in the field, such as the NGO "Svitanok", as well as with the AIDS Centre, as well as with the NGO "Donbass without Narcotics", the NGO that offers substitution therapy.

The staff takes part in seminars and trainings that are offered by the Alliance and the Network, but there is a big need on capacity building.

The brain drain among the staff that is not employed in the AIDS Centre as well is very large. The level of management within the organisation is very low, there are no funds for a specialist in this field.

#### 4.2.4 NGO "Svitanok"

**Name and function of the interviewed persons:** Natalya Bedeleva, Executive Director of the NGO, Natalya Yurchenko, Donetsk Regional Representative of the All-Ukrainian Network of PLWH

**Target groups:** This NGO works in the field of HIV/AIDS secondary prevention for PLWHAs, especially among IDUs. "Svitanok (Sunrise)" works with adults and with children.



**Offers:**

- Day care centre for children affected by HIV/AIDS
- Social support of PLWHAs
- Home based care
- Community centre for PLWHAs
- Support of PLWHAs in prison (one male and one female prison)
- Information on HIV/AIDS and other health issues

Concerning the part of the NGO that works with children, „Svitanok“ runs a day care centre for children from families affected by HIV/AIDS. The children can spend four hours a day (due to regulations it cannot be longer than this) in the care of the „Svitanok“ social workers. „Svitanok“ is the only NGO that has offers directly for HIV/AIDS affected children. Around 40 children profit from this offer.

The part of the Project that works with adults offers psychological and legal consultations, a community centre and self-help groups. „Svitanok“ helps with the paperwork that the clients need, such as monetary reliefs of the rent, the preparation of the rent, invalidity, the paperwork to be admitted to the hospital or to be diagnosed for medical care.

Around 2/3 of the 200 „Svitanok“ clients are former ID users, being a large part of the rest active IDUs. 60% are men. The average age for the female clients is 26 to 28 years old, for the men 30 to 35 years old.

**Staff:** A total of 31 persons work in the NGO „Svitanok“, 14 of them are social workers. Three of these social workers offer home based care (which is to be understood as social support) for adults and they reach around 30 clients. The contact to the clients is approximately once a week.

**Funding:** „Svitanok“ is financed by the International Alliance, the All Ukrainian Network of PLWHAs, the Ukraine Citizen Action Network (UCAN) and the Canadian Society for International Health.

**Cooperations:** The NGO cooperates with other NGOs working in the field, as well as with the AIDS Centre, Caritas and the local authorities.

The social workers have been trained by the Alliance and they take part in several trainings, but there is an acute need for further specialisation.

The medical care of HIV positive children is seen as a problem, because there is no pediatric ward in the stationary ward of the AIDS Centre. In the Donetsk Oblast there are 130 children on ART. The socio-economical situation of families with HIV affected children is very difficult.

#### 4.2.5 Bochum House

**Interviewed person and function:** Liudmila Pelikh, coordinator of the Bochum house and Director of the Donetsk Association “Freundeskreis”.

**Target groups:** Elderly persons. The next step is to widen the offer of home based care for people suffering from AIDS.

**Offers:** The Bochum House is a cultural Centre that was started as an initiative from the Lutheran Church and opened in 2001.

In 2004 a social station was opened in order to offer home based care for elderly former Ukrainian forced laborers in Germany.

For this purpose, the Bochum House prepared home based care specialists following a special capacity building programme (weekly seminars during 6 to 8 months) based on the German specialisation of geriatric nurse. Around 80 persons have gone through this programme, which was the first of it’s kind in the Ukraine.

The home based care concept involves the families of the elderly persons as well, and monthly open presentations on specific diseases are organized in the rooms of the organisation.

The Bochum House is funded through the cooperation with the city of Bochum, which takes over the funding of the building, as well as the salaries of the persons who work in the Bochum House

**Staff:** Seven persons in total work in the Bochum House. At this moment, four of these persons work in the social station of the Bochum House and offer home-based care.

**Cooperations:** The Bochum house does not yet cooperate with other organisations active in the field of HIV/AIDS due to the fact that they have had no contact with the topic so far.

#### 4.2.6 NGO “Donbass without narcotics”

**Name of the interviewed person and function:** Alexei Kolodyozhny, Executive Director of the NGO “Donbass without narcotics (Donbass bez narkotikov)”

**Target groups:** IDUs

**Offers:** “Donbass without narcotics” has the task of carrying out the substitution therapy and the social support of the IDUs under this therapy. It is the only site in the Donetsk Oblast that offers this therapy. The NGO offers VCT as well. The NGO “Donbass without narcotics” functions in the territory of the Narcological Dispensary and and

At the moment, 52 persons are in the substitution therapy with Buprenorphen, and there are plans of starting methadone substitution therapy in July, with 90 therapy courses<sup>9</sup>.

In order to be able to be part of the substitution therapy programme, the IDU has to be inscribed in the Narcological Dispensary and have had at least one try of becoming clean. HIV positive IDUs have priority in order to be able to receive ART, should they need it.

**Funding:** The NGO “Donbass without narcotics” is financed exclusively by the HIV/AIDS International Alliance.

**Staff:** The NGO, apart from the Director, has three doctors, two nurses, a psychologist and two social workers.

The HIV positive IDUs in the programme (33 out of 52) are under ART and are counselled by a peer who helps the persons to follow the adherence to the therapy.

The NGO cooperates with the AIDS Centre, who readdresses patients to the NGO, as well as the NGO “Svitanok”.

The number of the persons who are in need of a substitution is far greater than the actual number of treated IDUs. The Director of the NGO talked of the need of 1.000 therapy courses in Donetsk city alone and around 2 to 3.000 in the Donetsk Oblast. Once the methadone substitution programme starts, the International Alliance has plans to support six further sites for substitution therapy- in Krasnodar, Mariupol, Gorlovka, Makeevka, Slaviansk and a second site in Donetsk.

The IDU has to go through a detoxification in the Narcological Dispensary in order to start the substitution therapy. There are very few rehabilitation centres, and most of them are not free of charge. There is a state-run one in the Donetsk Oblast, but the waiting list is very long.

One of the problems of the NGO is that it is not allowed to take away the substitution substance outside the premises (No take-home-dosages, as in other countries) of the Narcological Dispensary. The result of this very strict regulation is that the therapy is interrupted when a client is impaired to come to the Dispensary. This is one of the reasons why there are plans to open a branch of the NGO in the Tuberculosis Dispensary.

#### 4.2.7 Caritas Donetsk

**Name of the interviewed person and function:** Lubov Panteliuk, Coordinator of the home-based care project.

**Target groups:** The catholic organisation Caritas is active in 15 cities of the Ukraine. The central office is in Lviv. In the cities of Kiev, Odessa and Donetsk, HIV/AIDS topics are a field

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<sup>9</sup> Methadon substitution therapy started in Donetsk on June 15<sup>th</sup>, according to a telephone conversation between Alexei Kolodyozhny and Samanta Sokolowski on July, 8<sup>th</sup>.

of activity. Caritas Donetsk, an independent structure within Caritas Ukraine, started to work in the field of HIV/AIDS in 2003, and they work with children affected by HIV/AIDS.

**Offers:** At the moment, Caritas Donetsk works in three directions:

- Home-based care of families affected by HIV/AIDS
- Street children, with a mobile unit and cooperation with social centres
- “Bereginya”- together with the Network of PLWHAs – PMTCT through visits of maternity units and accompanying and support of HIV positive (future) mothers.

As of today, Caritas offers help to 38 families (99 persons). Among them, there are 6 children younger than 18 months, 6 children live with their grandmothers and there are two adoptive mothers.

**Staff:** The help is offered by 6 social workers that do not have any specialisation on the subject, only a short course of home based care they attended in Lviv.

**Funding:** Caritas Donetsk is mainly funded by Caritas Ukraine, there were fundings for a short specific project by the International Alliance.

**Cooperations:** The office of home-based care is in the rooms of the 2nd children’s Hospital of the City of Donetsk. Caritas offers help to the families of the children, including medications and nutrition complementations.

The cooperation with the hospital started in 2003, when the hospital had around 30 abandoned children, many of which were HIV positive. Father Vasili, part of Caritas Donetsk, was asked to baptize these children, and this was the beginning of the cooperation. These abandoned HIV positive children led to the establishment of the Orphanage Makeevka, which is aimed exclusively at children affected by HIV/AIDS.

Caritas cooperates with the AIDS Centre, with Amicus and with „Svitanok“, two organisations that work with CSWs and IDUs, as well as with other NGOs in the field.

The need for more social workers is great, as well as capacity building offers to avoid burn outs and to professionalise the help.

#### **4.2.8 Orphanage “Makeevka”, NGO “Donbass against AIDS among children”**

**Name and function of the interviewed persons:** Viktor Goncherov, Head doctor of the Orphanage and Liudmila Batekhina, Director of the NGO “Donbass against AIDS among children (Donbass protiv SPIDA u detei)”.

**Target groups:** HIV positive orphans and abandoned children.

**Offers:** The Orphanage for HIV infected children was started in 2001, with a capacity for 40 children, a number that grew continuously up to 80 children in 2004.

At the moment, 76 children live in the institution. The age of the children ranges from a few weeks to the oldest child, who is nine.

The tasks of the orphanage include not only the actual care – including medical care- of the children, but also the promotion of adoption and the return of the children to their original families, should they exist. For these purposes, the staff of the orphanage offers special trainings for the families on the care of an HIV positive or HIV affected child, but further capacity building is needed in this field.

The orphanage offers specialised medical care for the children, it has an own laboratory, in which they carry out HIV testing and CD4 count. The confirmation HIV test is carried out by the Donetsk AIDS Centre. If a child's HIV negative status is confirmed, then it is transferred to a general orphanage. At the moment, 30 children are receiving ART.

**Staff:** There are 73 nurses, 2 doctors and 12 educators among the staff.

**Funding:** The orphanage is financed by the state and the NGO is funded by several donors, such as the Alliance and the All-Ukrainian Network of PLWH.

**Cooperations:** The orphanage cooperates with the AIDS Centre, Caritas, the Alliance, the project “Hospitals of the World”, Education and Children Welfare authorities, Elena Franchuk Anti-AIDS Fund, American-Israeli fund, All-Ukrainian Network of PLWH, the “Resurrection” Fund and the “MAMA+ Project for the Prevention of Abandonment of Children Born to HIV-Positive Mothers” from the Doctors of the World.

The orphanage is in need of capacity building for the staff, especially concentrating on burn out prevention and support for the trainings for the families of the HIV positive children.

#### 4.2.9 NGO “Amikus”

**Name and function of the interviewed person:** Valentina Pavlenko, Director of the NGO “Amikus” and Regional Coordinator of the International Alliance.

**Target groups:** The field of work of this NGO is the prevention of HIV/AIDS in vulnerable groups, especially among CSWs and IDUs, but also prison inmates.

**Offers:** The NGO offers harm reduction, distribution of condoms, information and works with prison inmates. Amikus has a community Centre, in which self-help groups are organized. It also carries out VCT, with the help of a HIV quick test. The confirmation tests are then carried out in the AIDS Centre. The same is the case with the Syphilis quick test.

The NGO offers twice a week outreach work for the CSWs that work on the main road between Donetsk and Makeevka. Jenny Bluhm and Samanta Sokolowski accompanied the

social worker and the GP of Amicus in their outreach circuit for CSWs and IDUs.

For IDUs, the NGO offers the community Centre, psychological support and medical diagnostic care, as well as needle exchange. A social worker from Amicus carries out outreach work in the IDU scene, including the visiting of apartments where the IDUs gather.

The work with prison inmates includes a self-help group for HIV positive inmates, as well as psychological support and medical counselling.

This NGO works not only with PLWHA but also with their relatives

**Staff:** In total, “Amikus” has a staff of around 40 persons, including volunteers (around 20). The volunteers are trained in the NGO.

**Funding:** “Amikus” is financed by the Alliance, the All-Ukrainian Network of PLWHAII-Ukrainian Network of PLWH and some small grants from other funds, such as the “Resurrection” Fund.

**Cooperations:** Due to the Fact that the NGO Director, Valentina Pavlenko, is at the same time the Regional Coordinator of the International Alliance, the NGO has contacts to all the organisations that work in the field of HIV/AIDS in the Region, especially the ones funded by the Alliance.

The outreach work is carried out by a social worker and a medical doctor. In the course of the year a specialised bus will start functioning as mobile medical unit, in which the CSWs can receive medical care and diagnosis for STIs and HIV (quick tests). “Amikus” estimates that they have contact to 120 CSWs, out of which around 15% are HIV positive.

“Amikus” estimate that 80% of the CSWs to whom they have contact to are at the same time IDUs. According to estimations of the NGO there are around 3.000 to 3.500 IDUs in Makeevka, out of which around 20% are HIV positive.

At this moment, 15 inmates are receiving ART, but according to “Amikus”, at least further 30 therapy courses are needed. The inmates are encouraged to work as multipliers in HIV/AIDS prevention, there is even a theater group that creates plays dealing with this subject. There is no needle exchange programme in the prison, but there is condom distribution.

In general, the level of NGO development in the field of HIV/AIDS in Makeevka, especially for PLWHAs, is very low.

There is no substitution therapy in Makeevka, although there are plans to open a substitution therapy site.

“Amikus” expressed their need of capacity building in the field of social work and fundraising.

#### 4.2.10 Gorlovka AIDS Centre

**Name and function of interviewed person:** Natalya Savchuk, Director of the Gorlovka AIDS Centre and Director of the NGO “Lifeline”.

**Offers:** The AIDS Centre has a laboratory, which carries out HIV/AIDS diagnostic. The Centre does not carry out the analysis for CD4 cells or virus load, these analysis are done in Donetsk. There is a “Trust Cabinet”, a room where VCT and counselling in general are carried out, and around 4.000 to 4.500 persons per year make use of it. In Gorlovka there are 1.134 PLWHAs registered.

The Centre is responsible for the ART in Gorlovka. Pregnant women and children are given ART at once should they need it, the situation for the other patients is more difficult. There is a total of around 100 patients on ART at the moment.

The Centre carries out STI diagnostic through the venerologist and the gynecologist of the Centre.

**Staff:** The Centre has a staff of 29 members, and they are funded by the State.

**Cooperations:** As it is the case in the Donetsk Centre, the director of the AIDS Centre is at the same time the director of the NGO, in this case “Lifeline”, that supports PLWHAs in the building of the AIDS Centre. The AIDS Centre cooperates with all the NGOs working in the field of AIDS in Gorlovka, as well as with others AIDS Centres.

The Centre is pessimistic about the possibility of receiving more ART drugs in order to enlarge the number of patients under ART. A special problem is the lack of sufficient medicines for the opportunistic infections. Should a PLWHA in need of ART have Tuberculosis, the patient is sent to the TBC Dispensary for treatment first.

There is the hope that the syndromic approach will be allowed. In the case of a positive result of an STI, the patient is redirected to the Venerological Dispensary.

There is a wing for AIDS patients in the local Infection Hospital, as well as a special wing in the Maternity ward for HIV positive women, due to the need of avoiding stigmatization of the patients.

There is still no substitution therapy in Gorlovka. The necessary rooms and staff are prepared, but the official allowance for the distribution of Methadone was not given at the moment of the interview. There are 90 methadone therapy courses planned, of which half will be for HIV positive IDUs.

The Gorlovka AIDS Centre does not have enough medical personnel, and capacity building is a pending issue- there is need for further training of the doctors in ART therapy. Medical equipment as well as computers are a need as well.

#### 4.2.11 NGO “Linia Zhizni”

**Name and function of interviewed person:** Elena Drachkova, Coordinator of the Section HIV/AIDS Prevention for IDUs and CSWs of the NGO “Linia Zhizni (Lifeline)”.

**Target groups:** IDUs (they reach around 1.500), CSWs (around 100), PLWHAs (around 100), PLWHAs family members and MSM.

**Offers:** The main activity of the NGO is secondary prevention of HIV/AIDS. The NGO offers harm reduction, medical, psychological and legal counselling, the services of a hairdresser and a group of self-help for PLWHAs. The NGO offers HIV testing (VCT) on the field, as part of their streetwork offer. Social workers go out to the IDUs and CSW scene three times a week, from 20:00 to 22:00 in the evening. If an HIV test is positive, the patient is redirected to the AIDS Centre for a confirmation of the test.

**Staff:** The NGO has a staff of 52 persons, 20 of them are social workers.

**Cooperations:** The NGO cooperates with medical entities (hospitals, TB Dispensary), with the Alliance projects and with the authorities. This NGO is within the premises of the AIDS Centre Gorlovka, and its Director is at the same time Director of the AIDS Centre.

**Funding:** “Lifeline” is financed by the International Alliance, the All-Ukrainian Network of PLWHAs, USAID, “Resurrection” fund and the Canadian Society for International Health. The NGO follows the rules of monitoring of the Alliance and the PLWHA Network presenting quarterly reports and monitoring the activities of the social workers

The NGO is in need of capacity building for their social workers. Even though the NGO itself organizes trainings and meetings, they are not enough. Even though there is a psychologist working in the NGO, the specialist is not full time at the organisation.

There is a need of medical care for the IDUs that are in contact with “Lifeline”.

Street children are at the moment the biggest challenge for the NGO. “Lifeline” does not have the capacity or the legal situation for helping these children.

#### 4.2.12 NGO “Tvoi Vibor”

**Name and function of interviewed person:** Oleg Galaktionov, Director of the NGO.

**Target Groups:** This NGO works in the City of Gorlovka and has as target groups male prison inmates from three prisons in the Donetsk Oblast and former convicted persons. The NGO “Svitanok” works with female prisoners.



**Offers:** “Your Choice (Tvoi Vibor)” , started by former inmates and IDUs, carries out primary prevention in prisons and offers support and counselling for imprisoned PLWHAs and for PLWHAs who have been freshly released from prison. In this regard they provide support in the resocialisation process and help these persons with the access to a drug rehabilitation centre (detoxification centre). Advocacy is a further field of activity.

The NGO supports self-help groups in the prisons and also for former prisoners in the premises of the NGO.

The staff of “Tvoi Vibor” is allowed to distribute condoms among the inmates.

**Cooperations:** An important part of the work of “Your Choice” is the cooperation with the administration of the prisons, especially on the issues of human rights, tolerance and HIV primary prevention. “Tvoi Vibor” cooperates with “Amicus”, “Svitanok”, the Donetsk AIDS Centre, Lifeline and other NGOs working in the field of HIV/AIDS.

**Staff:** There are 3 permanent members of the staff together with 24 volunteers.

**Cooperations:**

**Funding:** “Tvoi Vibor” is financed by the Alliance, the All-Ukrainian Network of PLWHAII-Ukrainian Network of PLWH and the “Resurrection” Fund.

According to “Your Choice”, 80% of the prison inmates in the Ukraine are convicted due to crimes related to drugs. The average conviction is 5 to 6 years, in average a prisoner spends 3 to 4 years in prison. There are state resocialisation Centres, but they are overfilled and there is a very long waiting list.

The HIV/AIDS rate is very high in prisons, according to the NGO 60 to 80% of the IDUs in prison are HIV positive, 80 to 85% have hepatitis C. According to official statistics, there are 22.000 prisoners in the Donesk Oblast, out of which 1.500 are PLWHAs. The NGO estimates the number of PLWHAs as high as 15.000. Obligatory HIV testing in prisons was abolished in 2000, and now there is the possibility of carrying out VCT.

The NGO “Tvoi Vibor” depicted a very difficult situation within the prison, where many PLWHAs die in the need of ART, the majority due to Tuberculosis or Hepatitis. According to the NGO, 50% of the imprisoned PLWHAs suffers from tuberculosis.

There is no substitution therapy in the prisons and the access to ART is very poor. Only 15 persons receive ART therapy at the moment, there is an estimated need of at least 150 persons who are in need of therapy.

#### **4.2.13 Students Health Dialogue Donetsk**

**Name and function of interviewed person:** Elena Bessmertnaya, Leader of the team of students.

**Offers:** The Students Health Dialogue Donetsk is a group of students that carry out primary prevention workshops in the Donetsk school No. 35 and at the Donetsk Medical University.

In the school, the group works with children aged between 15 and 17 years old, and in the University with students in the first year (18 years old). The trainings are 1,5 to 2 hours long and comprise topics such as human physiology, relationships, sexuality, contraceptives, pregnancy and HIV/AIDS.

**Staff:** At the moment, the group is formed by seven students.

**Cooperations:** This group has cooperations with Germany (Students Health Dialogue) and with Sweden. In the frame of the cooperation with Germany, trainings and workshops in primary prevention are carried out and with the cooperation with Sweden, prevention materials are designed.

The cooperation with Germany started in 2006, and two of the seven members of the group took part in a central Students Dialogue meeting.

The group does not cooperate with other groups working in the field of prevention of HIV/AIDS.

This group is not a registered organization and they do not have an official permit from education authorities for the carrying out of these trainings. They act on personal contacts with the Director of the school and of the University. There are plans to eventually register the group as an organization.

#### **4.2.14 Meeting with the Deputy Director of the Oblast Health Care administration**

**Name of the interviewed person:** Lidia Blakitina, Deputy Director of the Oblast Health Care administration.

The Oblast Health Department, even though it finances all state health institutions, is not able to provide any financial help to the NGOs working in the field of HIV/AIDS, but the Oblast tries to support with technical help, such as for example reducing the rent of rooms that are used by NGOs. The role of NGOs in the fight against HIV/AIDS is very much valued and seen as essential.

The Oblast Health Department controls the fulfillment of the National Plan against AIDS and is very proud of the structure of the AIDS Centres and the AIDS Cabinets in every Rayon (District) in Donetsk. There are plans from the Ministry of Health to adopt this structure in every Ukrainian Oblast.

A big challenge remains the substitution therapy with methadone, which had not yet started in the Oblast at the moment of the interview.

A further challenge is the fight against Tuberculosis. There is a special programme, which is financed by three levels (national, oblast and city budget) and an NGO (financed by the Development Fund of Ukraine) with a budget of 250 Mio. Gryvnias (around 50 Mio USD) until 2012.

The priorities of the Oblast Health Department at the moment are HIV/AIDS, Tuberculosis, Mother and Child Health as well as Oncology.

One of the goals at the moment is to reach the level of HIV/AIDS testing to the level of at least 5% of the general population.

#### **4.2.15 Meeting with the Deputy Director of the Oblast Education Administration**

**Name of the interviewed person:** Svetlana Gordichuk, Deputy Director of the Oblast Education Administration.

Ms. Gordichuk is in charge of the education in pre-schools, schools, orphanages and boarding schools. There is a great need in training of the teachers in the field of HIV/AIDS to avoid stigmatization. There have been programmes that have concentrated on this issue, but there is a further need for further measures. The teachers that have gone through such programmes receive a certificate of participation that allows them to carry out the activities of the particular measure.

Unfortunately, there is no general module on HIV/AIDS-prevention foreseen in every school, every institution is free to chose an existent programme. As an example, Ms Gordichuk named a programme called "School against AIDS" which is used for schoolchildren from the 8<sup>th</sup> to the 11<sup>th</sup> form. 80 teachers were trained to use the manual and the CD that belongs to the course. The Alliance has also got a programme for teachers, which covers around a 100 schools, and the Peer-programme works in around 50 schools. The total number of schools in the Oblast is around 1.100, and they are not all covered by such programmes by far.

After some problems with the parents in several schools due to moral apprehensions, every programme that is to be used in a school has to be approved by the Education Department, if approved, it receives the permission to be carried out in schools.

The Oblast Education Department cooperates with all the NGOs working in the field of AIDS, and it helps these NGOs in the carrying out of trainings, giving the necessary permissions and the support to carry out different actions.

A big challenge is the sustainability of these educational programmes. Very often a good programme runs out and there is no further access to the materials used in the programme. Unfortunately. There are no investigations or monitoring that show the efficacy of these programmes.

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United Nations in Ukraine, [www.un.org.ua](http://www.un.org.ua)

## **6 CONTACT LIST OF THE VISITED ORGANISATIONS**

### **NGO “Coalition of HIV/AIDS Service Organisations”**

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