

"STRENGTHEN SUPPORTIVE ENVIRONMENT AND SCALE UP PREVENTION, TREATMENT AND CARE TO CONTAIN HIV EPIDEMIC IN THE REPUBLIC OF TAJIKISTAN"

## PROJECT PROGRESS UPDATE



If your organization is implementing projects under more than one grant please make sure to complete a separate 'Project Progress Update' for each signed grant agreement.

### Section A Project Information

**Name of Sub-Recipient:** AIDS Foundation East West – Tajikistan (AFEW-Tajikistan)

**Grant agreement number:** 00092968 TJK-H-UNDP, November, 2015

**Programme Period (from sub-recipient grant agreement):** November 01, 2015 – December 31, 2016

**Final Beneficiaries:**

- 2260 PLHIV living in 22 project regions

**Target groups:**

- 48 representatives of eight public organizations, PLHIV communities and initiative groups of PLHIV

**Geographic Coverage Areas:**

- Dushanbe;
- RRJ: Vahdat, Hisor, Tursunzoda and Rudaki;
- Khatlon region: Qurgonteppa; Bokhtar; Vakhsh; Yovon; Kulob; Vose, Dangara, Farkhor and Hamadoni;
- Sughd region: Khujand; B.Gafurov; Chkalovsk; Kayrakum; Isfara; Konibodom and Panjakent;
- GBAO: Khorugh.

**Reporting Period:** July 01 – September 30, 2016

## Section B: Quantitative Data

*Results Analysis Based on Key Indicators from Performance Framework*

Indicator	Target	Quarter 4 Report (July-Sep,2016)	Total Report (from the beginning of the Project)	% Achievement
Total number of PLHIV reached by Project services	2260	627	2055	91%
# of PLHIV covered by sessions on treatment adherence by self-support groups	1850	510	1188	64%
# of lost to follow patients restored to ART	285	49	178	63%
# of restored patients repetitively dropped out of treatment	-	3	5	
# of key populations (MSM, SWs, PLHIV and PWID) continued ART in other medical facilities (TB, ID hospitals, etc.)	-	51	255	
# of PWID and / or HIV-infected people who continue ART in penitentiary systems		1	132	
# of weekly clinic-based ART adherence sessions for PLHIV on ART conducted	115	33	97	84%
# of self-support groups at each ART health facilities established	258	52	132	51%
# of monthly sessions conducted at CSOs and/or health facilities	300	66	192	64%
# of home visits to dropped out patients	1500	495	989	66%
# of social workers trained on client management	16	0	17	106%
# of counseling services on social issues to key populations and PLHIV provided by CSOs	6780	3658	9414	139%
# of user service guides disseminated to key populations	1	1	1	100%
# of CSO staff trained on treatment adherence support of the PLHIV (client management)	16	0	16	100%
# of established appointment system for ART patients	1	0	1	100%
# of PLHIV on pre-ART and those receiving ART referred to other services – OST, NSEP, TB, OI treatment	-	94	872	
# of prisoners who continue ART after release from prison	-	0	4	
# of CSOs staff trained on HCT and TB/HIV co-infection adherence support	16	16	16	100%
# of TB patients referred and tested for HIV and know their status	-	7	21	
# of TB/HIV co-infected patients supported/counseled to continue ART	-	84	154	

## Section C

### Results Analysis Based on Key Indicators from Performance Framework

#### Explanation of programmatic performance:

Describe information on indicators and figures given in section B. Explain the planned versus actual results; include reasons for programmatic deviation. Explain the factors affecting these achievements.

#### Activity 3100. Development of User service Guide

In the framework of the project AFEW-Tajikistan is obliged to develop User service Guide. On June 16, 2016 the corrected version of User service Guide was approved by the Ministry of Health and Social Protection of Population of the Republic of Tajikistan. (Letter #1-6/3466-3112)

On June 17, 2016 AFEW-Tajikistan is decided to hold the small survey among PLHIV applying to services of 8 sub-sub-grantees. The survey was conducted in order to determine the optimal size of a convenient brochure, relevant to the needs of end beneficiaries of the project. According to the results of the survey it was decided to design brochure in A6 size (105x148 mm).

**Table 1:** The results of survey on identification the size of the User service Guide:

№	Name of organization	The size of «User service Guide»			
		A4 (210×297 mm)	A5 (148 × 210 mm)	A6 (105 x 148 mm)	A7(75X100 mm.)
1	Tajikistan Network of women living with HIV		v		
2	Guli surkh		v		
3	SVON Plus				v
4	Jovidon		v		
5	AFEW Branch in Khatlon region			v	
6	Buzurg			v	
7	Rohi zindagi			v	
8	Epidemiolog			v	

On August 24, 2016 AFEW-Tajikistan final version of User service Guide was sent to UNDP for further printing.

#### Activity 3200. Direct services (sub-sub-grants)

Sub-sub-granter CSOs are continuing providing psychosocial services to PLHIV in 22 project regions.

627 PLHIV were reached by project services. 49 PLHIV has been restored to ARV. 510 PLHIV covered by sessions on treatment adherence by self-support groups. 564 PLHIV from 627 reached are receiving ARV including

#### Additional information about results achieved in report period Quarter 4:

1. 742 new PLHIV were covered by peer counseling, ART adherence support and OI prevention.
2. 344 or 46, 36% from 742 PLHIV newly reached by Project passed to TB screening. 5 new cases of TB are detected. All clients with diagnosed tuberculosis sent to TB hospitals and initiated TB/HIV treatment.
3. 552 or 74, 4% from 742 PLHIV newly reached by Project passed CD 4 diagnostic. As result 143 PLHIV started ARV treatment.
4. 450 PLHIV or 60,6% from 742 PLHIV reached by counseling on infectious diseases
5. 165 of PLHIV covered by weekly clinic based ART adherence sessions for PLHIV on ART.
6. 330 of PLHIV covered by of monthly sessions conducted at CSOs and/or health facilities

### Activity 3300. Monitoring site visits

On July 27-29 and on August 2-16, 2016 the activities of eight sub-sub-grantees have been monitored by representatives of Ministry of Health and Social Protection of the Republic of Tajikistan and AFEW-Tajikistan. Monitoring held in NGOs "Guli surkh", "Tajikistan Network of women living with HIV" (Dushanbe), "AFEW-Tajikistan Representative Office" (Qurghonteppa, Khatlon province), "SVON Plus" and "Jovidon" (Kulob, Khatlon province), "Buzurg" (Panjakent, Sughd Province) and 'Rohi zindagi' (Chkalovsk, Sughd Province). Partner organizations were monitored on the achievements reported for the quarter previous quarters and follow up actions after first monitoring visit in February – March 2016. All partners were provided with practical assistance on organization of client management services for final beneficiaries and verifying project data. Essential recommendations on improving program, administrative and financial management have been passed to sub-sub-grantees.

Partners discussed the recommendation with the project staff and work on elimination of project gaps. The results of eliminations will be followed up by AFEW-Tajikistan project specialist during the realization of the project and during next monitoring visits.



**Please complete Annex 'A' for monitoring visits undertaken by the SR (to sub-SRs or service delivery sites) during the reporting period. (If applicable)**

#### **Was there a delay or cancellation of planned activities?**

During the reporting period AFEW-Tajikistan did not meet any problems and delays in the realization of its planned activities.

**Progress and implementation of management actions from previous periods: (Please list all outstanding actions).**

N/A

## Describe other success stories not reflected in the quantitative data.

### PUBLIC ORGANIZATIONS CONTRIBUTE TO RETURN PATIENTS ON ARV

With the technical support of the AFEW-Tajikistan the implementation of the joint projects are going on in 22 regions of Tajikistan. The projects are directed to assist the AIDS centers to return to therapy the HIV-positive patients who interrupted their antiretroviral treatment and realized by eight non-governmental organizations\*.



On picture: Alisher is in AIDS center of Vahdat district

*«In 2014 I got to know that I was HIV infected. I was shocked by this news. I did not know what to do, whom to contact, whom to share with and in generally how to live further. At last, I decided to talk to my wife. Having learned that I have HIV, my wife told me that she still loves me and will not leave me under any circumstances. After a conversation with my wife I felt better and we went together to take an HIV test, to check her health status. My wife was not infected, her HIV status was negative. We know that among the people in our city there are fears and lots of false myths about HIV/AIDS. Therefore, we did not tell about my HIV status even to our closest relatives» - began his story Alisher attending self-help groups of people living with HIV.*

As soon after Alisher was diagnosed with HIV, he underwent further tests. Under a doctor's care, he started taking ARV treatment.

*"In the city where I live, everyone knows each other and all are afraid of everything associated with AIDS. Therefore, visits of AIDS center was a real challenge for me, because I was afraid that someone of my friends would see me there, and everyone would know that I am HIV infected. Then all my relatives, friends, neighbors and others may turn away from me and my family"- continues his story Alisher.*

Fear of stigma and persecution, at the end, led to the fact that Alisher despite of doctor's recommendations did not go to the AIDS center and stopped antiretroviral therapy. In early summer 2016, Alisher was very bad. Alisher thought that he got a flu and started to take different antibiotics, but soon they just stopped to help him. He appealed to the therapist in a local clinic. After examination of doctor Alisher passed the tests and he was diagnosed with lung tuberculosis of closed form. He was hospitalized and began the treatment for tuberculosis.



On picture: Alisher (at right) and social worker of NGO "Guli Surkh" (at left)

During the treatment, the TB specialist advised Alisher to talk to the social worker of NGO "Guli surkh", who is also living with HIV and can help him to cope with the emerging challenges. After obtaining the consent of Alisher, the social worker of "Guli Surkh" came to meet him and told him about her story. Alisher realized that he was not alone. In her story, social worker explained the importance of antiretroviral therapy for health and what will be the consequences in case of failure of the treatment.

*"Discussions and talks with the social worker helped me to make the right decision. I passed repeated analyzes at the AIDS center. My CD4 level was only 40 cells. Realizing the situation, that for me and for my family my health is more important than the opinion and fears of others I had agreed to resume the treatment"- says Alisher.*

Now, thanks to the resumption of antiretroviral therapy Alisher's health condition has been improved. He feels much better, noticeably put on weight, and the number of his CD4 cells is much increased. Alisher and his wife regularly attend self-help groups, which are organized by the NGO "Guli Surkh" at the AIDS center.

"Visiting the self-help group, my wife and I found new friends and faith in the future of our lives. We even started to think about the second child"- concludes his story Alisher.

\* Reference: In the framework of the project "Strengthen supportive environment and scale up prevention treatment, and care to contain HIV epidemic in the Republic of Tajikistan", financed by the Global Fund to Fight AIDS, Tuberculosis and Malaria through UNDP-Tajikistan.

### Lessons Learned and proposed changes to the work plan:

AFEW-Tajikistan introduced an effective practice to involve the Government structures in the Monitoring and Evaluation (M&E) process during the realization of its projects. Within activity 3300 of current project AFEW-Tajikistan organized joint monitoring visit to the project sub-sub-grantees site with two representative of the Ministry of Health and Social protection of the Republic of Tajikistan. The joint monitoring usually has the advantages on:

- Accountability and transparency of the work of AFEW-Tajikistan in front of Government;
- Raising the problems of project clients and awareness of Government on the existing problems;
- Support of Government in decision of project related problems

## Section D: Capacity Development

(actions taken towards eliminating omissions and implementing recommendations that are indicated in SR Management Letter)

N/A

## Section E: Inventory and Assets Management /

(the report is submitted on semi-annual and annual basis)

N/A

## Section F: Authorization

The undersigned authorized representative acknowledges that all information provided in this report is complete and accurate

Signed on behalf of the Sub Recipient (signature of authorized representative)

Name: Ikram Ibragimov

Title: Director RPO "AIDS Foundation East West – Tajikistan" (AFEW)

Date and Place: October 14, 2016, Dushanbe

Organizational Stamp

