

STRATEGIC PLAN
of the Republican public organization
"AIDS Foundation East West - Tajikistan"
for the period 2017-2019

Dushanbe-2016



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STRATEGIC PLAN
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for the period 2017-2019.

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1. Mission of organization

"AIDS Foundation East-West - Tajikistan" (AFEW-Tajikistan) is the republican public organization which focus to improve the health of key populations at higher risk of HIV infection.

The organization aims to promote health and access to public health services in the field of prevention, treatment and care for HIV, tuberculosis, hepatitis C, as well as sexual and reproductive health.

To achieve this organization:

- advocates and protects the rights of key populations to health;
- raises awareness and creates a favorable supportive environment that enables to reduce the level of stigma and discrimination against key populations at higher risk of HIV infection;
- implements prevention programs and projects in the areas of health, sanitation and hygiene, sexual and reproductive health, improves the population's access to diagnostic, medical, social, personal and legal services, as well as the improvement of the moral and psychological state of the citizens;
- uses advanced strategies to promote healthy lifestyles.

2. Review of the implementation of the previous plan

In January, 2014 AFEW-Tajikistan started the implementation of the first strategic plan, which reflected the main priorities in the work of the new organization for the period of 2014-2016. This section presents the main results of the execution of the strategic plan.

Integration of client management into general health services

Preventive client management - AFEW-Tajikistan together with partner public organizations (POs) in 12 regions of the country organized client-oriented services to reduce risky behaviors related to HIV, early detection of HIV among key populations and ARV therapy for people with newly detected HIV diagnosis. In addition to preventive activities, public organizations have contributed to the attraction of drug users to participate in the program of opioid substitution therapy (OST), implemented on the basis of drug treatment centers of the Ministry of Health and Social Protection of Population of the Republic of Tajikistan (MoHSP RT).

In November 2015, the MoHSP RT approved the Guide for trainers "Organization of mini-trainings on prevention of socially significant diseases among key populations" developed by AFEW-Tajikistan.

In July, 2016 MoHSP RT approved "Directory services for organizations providing support to PLHIV» for publication. The Directory was developed by AFEW-Tajikistan for wide dissemination among PLHIV.

Supportive client management - in 22 regions of the country AFEW-Tajikistan, together with partner POs organized the work to support adherence to antiretroviral therapy (ART) among people living with HIV with the recently detected HIV diagnosis. Simultaneously, non-governmental organizations assisted the local centers for the prevention and control of AIDS in restoring of lost to follow patients to ARV treatment who dropped out of ARV treatment.

In December, 2013 MoHSP RT approved the Guidelines "Client management for HIV infection" adapted by AFEW-Tajikistan to the socio-economic realities of the country.

Transitional client management ("START Plus" program) - in August 2015 the Head office of Penitentiary system of the Ministry of Justice of the Republic of Tajikistan (Penitentiary System of MoJ RT) approved the Guideline "On organization of services of START Plus – client management of prisoners in the transitional period" for the widespread introduction among detention setting of the Penitentiary System of MoJ RT. Guide adapted by specialists of AFEW-Tajikistan and Penitentiary system taking into account the specific and socio-economic opportunities of penal system of the country.

In May 2016 MoHSP RT approved the version of the Guideline for Trainers "Organization of mini-training for the prevention of tuberculosis among prisoners". The Guideline was adapted by AFEW-Tajikistan to the specific conditions of prison system of the country.

Health promotion in prisons

With the assistance of Penitentiary System of MoJ RT AFEW -Tajikistan in partnership with two other POs organized complex measures on prevention of HIV and tuberculosis (TB) among prisoners and client management of people living with HIV and TB patients released from prisons. The special attention is paid to client management program focusing the needs and requirements of women prisoners released from prison.

Harm reduction

Within the framework of existing programs, AFEW-Tajikistan supported the initiatives of local POs on prevention of HIV, STDs, hepatitis and overdose among injecting drug users in 8 regions of Tajikistan. Two community organizations of people who use drugs (PUD), assisted to introduce of non-pharmacological methods of social rehabilitation of recovering drug addicts in two regions.

In November 2015 in collaboration with the Ministry of Internal Affairs (MIA RT) Instruction "On procedure for HIV prevention among the personnel of Ministry of Internal Affairs, working with vulnerable groups" has been updated. The new edition of instructions approved by the head of Ministry of Internal Affairs and can be used by POs for the organization of educational and advocacy activities with the participation of representatives of law enforcement bodies.

AFEW-Tajikistan initiated the publication of the order №832 MoHSP RT from September 30, 2015 which allows all POs to implement voluntary counseling and rapid HIV testing. Since 2016 AFEW-Tajikistan is actively involved in the country dialogue on the development of Guidelines for the provision of services of rapid testing for HIV through the use of tests on the saliva.

Sexual and reproductive health and family planning

In the programs of AFEW-Tajikistan a lot of attention continues to be provided to women who use drugs, released from prison, PLHIV, and sexual partners of PUD. The efforts of organization were aimed at improving access of vulnerable women to sexual and reproductive health.

3. The epidemiological situation

Drugs and substance dependence

The main types of drugs consumed in Tajikistan are opiates, hashish, cannabis and heroin¹. Currently, the vast number of consumers are using heroin, followed by opium consumers, then - drug users of cannabis. There is a tendency spread of new types of synthetic drugs in the country not listed in the National List of narcotic drugs, psychotropic substances and their precursors.

According to the data of RNC², the number of drug addicts in the period 2013-2015 decreased only in Dushanbe, and in other regions of the country (Sughd and Khatlon region, RRS) this figure has increased. The decline in the incidence of primary drug addiction in Khatlon, Gorno-Badakhshan Autonomous Oblast (GBO) and the Region of Republican Subordination (RRS).

The number of registered drug users in Tajikistan as at December 31, 2015 amounted to 7,313 people which is 0.47% more than in 2014 (7,279 people). The total number of registered drug users is 5,933 people are IDUs that for 0.79% more than in 2014 (5887).

There are six OST treatment centers functioning on the basis of narcological centers of MoHSP in the cities of Dushanbe (two), Khujand, Khorog, Qurghonteppa and Kulob. At the end of 2015 there were 581 clients in OST program. The number of people who continue therapy for 12 months amounted to 40-70% of the total number of people participating in the program.

HIV/AIDS

¹ Republican narcological center named after professor M.Gulomov.

² Republican narcological center named after professor M.Gulomov.

The number of HIV cases registered in Tajikistan since 1991 and up to September 30, 2016 amounted to 8,435 million, 5,724 (67.9%) of them are male and 2,711 (32.1%) are women. The number of people living with HIV is 6,253 people or 74.9% to 100 thousand people. For comparison: the similar indicator was 39.6% in 2011. Thus, the growth of HIV infection among the population is observed.

The predominant route of HIV transmission is sexual route. Since 2011 there is a tendency to reduce the number of new cases of HIV transmission from injecting mechanism in the country: from 412 cases in 2011 to 245 in 2015. The injection route of HIV transmission in the structure of all the routes of transmission in indicated years was 41.7%, and 21.3% respectively. The currently available data suggest the rapid spread of HIV in high-risk groups, as well as among women. The share of the mentioned category in the number of new HIV cases is increasing, and the contingent of infected rejuvenated. The rise of HIV among pregnant women and children is continuing.

The official statistics of MoHSP RT indicate that the growth of HIV infection observed among people who have been in international labor migration. Among the new cases of HIV in Tajikistan in 2015 the figure was 165 people (men - 151, women - 14) which is 14.3% of all new cases of infections. In 2011 the figure was 65 people or 7.7%. The main route of transmission of HIV among migrant workers in 2015 is sexual route: 151 (91.5%) cases.

Tuberculosis

According to the data of MoHSP RT in 2014 in total there were 11,432 cases of all forms of TB registered in the country from which 5,017 are new cases.

The highest TB incidence rates reported in GBAO and Khatlon regions, the lowest - in the Sughd region. From the number of registered new TB cases around 55% are male and 45% are female (ratio of males and females is 1,2). The disease mainly affects the young and the most cost-effective part of the population: 70% of all new TB cases occur in people aged 15 to 44 years.

Not less than 98% of cases associated with infection with pulmonary tuberculosis occur by airborne droplets way. Currently there is no data base on which it would be possible to analyze the spread of tuberculosis among vulnerable populations in Tajikistan. At the same time the core stakeholders understand that the diagnostic and registration of people out of key populations played an important role in the control of TB.

Labor migration

According to the data of UN by the people, the citizens in the age group 40-64 years are more typical of international immigration³. 57% of this group is women. The steady increase in female labor migration has become a new phenomenon in this area.

According to the data⁴ of Federal Migration Service (FMS) of Russia on June 7, 2015 there were 998,910 citizens of Tajikistan (839,515 men and 159,395 women) in Russia. According to opinion of various experts the share of women in the total number of labor migrants is from 7% to 20%.

Many returning migrants have the problems relating to health issues, and this is a very acute problem that needs to be solved. According to the data of the Ministry of Labor, Migration and Employment of the population of RT, as well as to the Federal Migration Service of the Russian Federation, at the beginning of 2016 due to violations of Russian legislation about 334,4 thousand citizens of the Republic of Tajikistan are on the list of individuals whose entry to Russian Federation is forbidden for

³ National Strategy on HIV / AIDS in the Republic of Tajikistan for the period 2015 - 2017

⁴ <http://migrant.ru/statistika-fms-rossii-pokazyvaet-dinamiku-rosta-trudovoj-migracii-iz-centralnoj-azii/>

a period of three to five years. The deportation of Tajik labor migrants from Russia may lead to negative social consequences such as:

- Increase in the number of registered and unregistered unemployed;
- Strengthening of social tension;
- Increased competition in domestic, including the informal labor market;
- Decrease in incomes and, as a consequence, an increase in poverty amid rising unemployment.

Vulnerability to HIV and TB in the migration period primarily caused due to very low socio-economic status of men - labor migrants from Tajikistan. The level of HIV among labor migrants is high, nevertheless this number does not tell about the epidemic. Still, it should be borne in mind that the scale of labor migration in Tajikistan is very significant that poses a real threat to the spread of HIV among the population categories that have sexual contact with migrants. The same situation with TB: this disease is spreading among the contact persons of labor migrants, especially their wives or sexual partners, children and other family members.

Prison health

The total number of prisoners in the penitentiary system of the Republic of Tajikistan is around 10,000 people. TB in prisons remains a serious problem. In 2015 the absolute number of TB cases in the prison system has decreased by 30.8% compared to 2006 (from 327 in 2006 to 101 in 2015). TB cases (all forms) in prison in 2015 amounted to about 1,200 per 100,000 people. (13.5 times more than in the civil sector).

The prevalence of HIV - infection among prisoners varied from 6.2% in 2005 to 8.4% in 2013 and to 4.2% by the end of 2015. In 2015 the number of HIV infected people in Tajikistan's prisons was 222 people. Of that number, 66 people or 30% have access to ART and get treatment.

Financing of health programs

Currently, the major agencies, funding HIV prevention and TB in Tajikistan remain USAID, Global Fund to Fight AIDS, Tuberculosis and Malaria and UNDP. In the past three years EU and its structural divisions significantly reduced funding of health programs in Tajikistan.

Technical support in implementation of national strategies in the field of HIV and TB is provided by expert organizations of UNAIDS, WHO, UNODC, ICAP and CDC.

AFEW-Tajikistan continues active cooperation with international organizations with considerable experience and capacity in joint implementation projects to reduce the demand for drugs, improve the capacity of POs and promotion of the rights of key groups of population. These partners include OSI-Tajikistan, GIZ, Project HOPE, PSI, Caritas Luxemburg, KNCV and DVV-International.

Conclusions

On the basis of work priorities for 2017-2019 Republican public organization "AIDS Foundation East West - Tajikistan" placed the analysis of the current situation, strengths and weaknesses of the organization and registration of the opportunities and threats from the external environment.

SWOT- analysis

Strengths	Weaknesses
<ul style="list-style-type: none"> - Work experience in the field of HIV prevention and health in Penitentiary System - Openness and a positive business 	<ul style="list-style-type: none"> - Dependence of organization on external funding - The narrow profile of the work and positioning in the field of HIV and TB

reputation - Established partnership and excellent working relationships with government agencies, including law enforcement - Experience on capacity building/development of the organizations of Civil society - Provision of direct services for KP - Transparency and flexibility of the organization - Qualified team - Ability to learn - Partnership in AFEW network - Ability to develop high-quality project proposals. - Provision of direct services.	- Lack of financial reserving funds
Opportunities	Risks
- Securing the leading position in preventive work among prisoners and client management of PLHIV - Opening of branches and introduction of direct services in other regions of the country. - Fundraising and participation in competitions for funds from the state budget and from other donors. - Increase in the financial reserving funds.	- The trend of negative attitudes towards organizations working with key populations. - Toughening the legislation regulating activities of POs. - Competition among POs. - Reducing the number of donors funding public health.

4. The aim of the strategic plan

The new strategic plan for the period of 2017-2019 is developed on the basis of the previous plan and takes into account changes in the environment, achievements and lessons learned of transition period.

The aim of this strategic plan is to predict the further development of AFEW-Tajikistan, to determine the main directions of its work and ensure the stability of the organization in the medium term.

The plan provides work direction to facilitate the implementation of the basic regulations of the Republic of Tajikistan in the field of health care such as:

- The Law of RT "On protection of public health";
- The Law of RT "On resistance to Human Immunodeficiency Virus and Acquired Immunodeficiency Syndrome";
- RT Law of RT "On protection of population from tuberculosis";
- National health strategy of the Republic of Tajikistan for the period 2010 - 2020;
- HIV/AIDS program in the Republic of Tajikistan for the period 2016-2020;
- National Strategic Plan to fight tuberculosis for 2015-2017.

5. The geography of work

Currently AFEW-Tajikistan implements preventive programs in 22 cities and districts of the republic, including prisons of Khatlon region.

In the next three years during the selection of the region the main focus will be on improving the comprehensive universal access to prevention and treatment services for key populations. These regions will be cities and regions with unfavorable epidemiological situation and/or limited access to information, health resources and social support. AFEW-Tajikistan will avoid duplication of services and resources, and will also take into account the possibility of coordination with development partners.

6. The final beneficiaries

Activities of AFEW-Tajikistan will focus on meeting the medical-psychological, social and legal needs of key populations. Special attention will be given to the work with PUDs, vulnerable women, youth, labor migrants, TB patients, people living with HIV and prisoners.

The beneficiaries of AFEW-Tajikistan programs will be:

- **people who use injecting drugs and people living with HIV** who face social stigma and discrimination of their rights based on the prevailing misconceptions about HIV among the population and the low level of awareness of current legislation among specialists, providing them with services;
- **prisoners and ex-prisoners** having insufficient knowledge in health in detention and those who need financial and psychosocial support in the first few months after release;
- **vulnerable women** facing economic difficulties that do not have broad access to social support and vulnerable to HIV, tuberculosis and other infectious diseases;
- **adolescences and youth** who have a high risk behavior to alcohol and drugs, as well as the first practice of unprotected sexual intercourse.

7. Priorities and guidelines

In the next three years, the focus of AFEW-Tajikistan will be the following programs:

- ***Reduction of stigma and discrimination against people affected by epidemics of HIV and TB***

AFEW-Tajikistan is planning to expand the range of advocacy activities carried out jointly with MoHSP, MIA, Drugs Control Agency under the President of the Republic of Tajikistan and Penitentiary System of MoJ RT, as well as civil society organizations. Joint activity is the basis of all activities of the organization aimed at promoting the rights of vulnerable groups to health care and social protection. This work will be carried out through the involvement of a wide participation of representatives of civil society organizations in the dialogue and the process of planning and coordination of prevention programs, joint monitoring of availability and quality of services provided to vulnerable groups.

The practice of building and using the experience of joint working meetings of representatives of the civil sector with law enforcement officers and medical personnel of health facilities will be continued. As part of the planned programs the expert group on the development of policies and implementation of manuals for specialists will be supported, and the assistance will be provided to organize the activities of the technical working group on health promotion in the penitentiary system of the country.

- ***Strengthening partnerships and network cooperation***

AFEW-Tajikistan will continue to strengthen mutually beneficial cooperation with state and public organizations. This direction of work will be carried out through regular consultations, organization of meetings, the joint development of policies, procedures and manuals for specialists.

AFEW-Tajikistan plans to expand cooperation with local community organizations, creating a partnership network to expand the range and geography of HIV prevention programs, treatment adherence support and social reintegration of vulnerable groups.

AFEW-Tajikistan within the framework of the Network of AFEW organizations plans to expand joint activities on communication and visibility to increase funding for joint programs.

- ***Capacity building of POs***

AFEW-Tajikistan will make efforts to replicate the experience gained by the implementation of counseling services and rapid testing for HIV on the basis of partner POs.

AFEW Tajikistan will start to work on implementation of counseling services, screening and testing for TB. Screening for TB can be organized on the basis of Representative office of AFEW- Tajikistan in Khatlon region through the acquisition of the mobile device rapid diagnosis of TB Omni-GenExpert.

As part of an overall strategy to enhance the capacity of POs, AFEW-Tajikistan will expand the work to provide voluntary counseling and rapid testing for HIV on the basis of its Representative office in Khatlon region. It also suggests the introduction of express services - testing using saliva tests.

- ***Integration of social support services into general health services***

AFEW-Tajikistan will provide technical assistance to civil society organizations in the implementation and strengthening referral systems of major groups of population.

AFEW-Tajikistan will explore the possibilities and availability of resources to implement the patronage services to PLHIV on ART and TB patients receiving TB Directly Observed Treatment (DOTS) at home (drug delivery, controlled administration of drugs, food security, assistance in additional surveys and sputum collection for TB diagnostics).

AFEW-Tajikistan will continue to provide online counseling services on the basis of its medical web portal. Online services will be expanded by provision information on sexual and reproductive health, as well as consultations of therapist. At the same time the possibility of counseling labor migrants on health issues and their labor rights will be studied.

- ***Prisons Health***

AFEW-Tajikistan in collaboration with the Penitentiary System of MoJ RT will continue to implement health education activities aimed to reduce HIV and TB among prisoners.

AFEW-Tajikistan will continue to raise the knowledge of medical and non-medical staff of correctional institutions on timely detection of HIV and TB.

AFEW-Tajikistan in cooperation with partner organizations will enhance the work on implementation of the START Plus Program – client management in transition period, with particular emphasis on the needs of convicts with HIV, TB, drug users and women.

- ***Sexual and reproductive health***

AFEW-Tajikistan will assess the situation, available resources, needs, and make efforts to introduce gender-focused programs for vulnerable women who use drugs, prisoners and sex partners of men who use drugs. It is planned to carry out a series of interrelated activities, involving the organization of services for HIV and STIs prevention, sexual and reproductive health of vulnerable women. This work will be organized on the basis of AFEW-Tajikistan's Representative office in Khatlon and partner organizations working with women.

- ***Drugs demand reduction and information services for youth***

AFEW-Tajikistan will focus on implementation of drug abuse prevention programs among young people. This area will include activities to raise awareness of adolescents and young people about the negative consequences of drug abuse, the organization of leisure, sports and cultural venues. The events promoting healthy lifestyles and the promotion of physical education and sports will be introduced in the program.

8. Midterm and long term sustainability

Ensuring financial stability of the Organization is a key area in the work of AFEW-Tajikistan. The current situation is unstable since the Organization entirely depends on external funds. This raises serious concerns in terms of long-term planning and implementation of the components of the plan. The financial condition of the Organization can be considered as stable if under adverse changes in the external environment, it retains the ability to function in a timely manner and to fully implement their commitments on settlements with staff, suppliers and banks, payments to the budget and at the same time to carry out its current plans. Thus, it is important to ensure that there is sufficient budget to implement the projects and preventive programs. For the maintenance personnel and administrative costs of the organization AFEW-Tajikistan has to increase the cost of the projects.

The annual need of the organization including program costs is 850,000 - 900,000 US dollars. However, under the circumstances the most realistic sum is 500 000 - 550 000 US dollars and Organization will tend to this target.

By the end of 2016 AFEW-Tajikistan has *confirmed funding* for two large and one small project. They are: USAID TB Control Program funded by USAID for the period until December 31, 2019; Program "Bridging the gaps: health and rights of vulnerable groups of population. Phase-2.0", funded by the Ministry of Foreign Affairs of the Netherlands until December 31, 2020 and the project "Social and economic reintegration of women returning from the Labor Migration", funded by the International Department of the Institute of "Open Society" Foundation-Tajikistan until October 30, 2017. However, the cumulative budget of these projects does not allow the organization to maintain the current level of expenditure. Therefore, AFEW-Tajikistan will continue its activities on fundraising and participate in various competitions for grants in the field of health care and other areas; will use the opportunity of networking with AFEW organizations and will take the necessary efforts to increase its own reserve funds.

For mobilization of resources the Organization will also develop communication mechanisms. External relations will be aimed at strengthening cooperation with donors. On a regular basis the

results of work of the Organization will be extend among new and existing donors with an interest in the subject.